

# **SB511\_The Arc Maryland\_Support.pdf**

Uploaded by: Ande Kolp

Position: FAV



The Arc Maryland  
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Columbia, MD 21046  
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[www.thearcmd.org](http://www.thearcmd.org)

## Senate Finance Committee

### SB 511: Health and Human Services Transportation Improvement Act of 2023

February 23, 2023

Position: Support

The Arc Maryland is the largest statewide advocacy organization dedicated to the rights and quality of life of people with intellectual and developmental disabilities.

This bill would create and provide funding for the creation of a Rural Nonemergency Medical Transportation Program that would operate in traditionally underserved, rural parts of the state.

In the southern part of Maryland, a pilot transportation program, Wheels 2 Wellness (the model of the statewide program that would be created through this bill), has been operating with success. It is our understanding that the program has produced both positive health outcomes for people, and savings for the tri-county area.

The Wheels 2 Wellness Program is a collaborative partnership between several nonprofit organizations that have lift vans and other accessible vehicles that were previously not being used during the day. The Arc Southern Maryland is a W2W Program partner. Their vehicles bring people with intellectual and developmental disabilities to and from their day programs and, in the time between, are used to assist seniors and others to get to their medical appointments and procedures, including dialysis and other important, time-sensitive and life sustaining treatments.

The Wheels to Wellness pilot program measured its success by evaluating CRISP Reports, the State Patient Health Information System, to determine impact. **The reports showed savings in hospital charges under their pilot model and improved stats for health outcomes with increases in kept medical appointments (lessened missed appointments).**

According to a survey completed by the Tri-County Council for Southern Maryland (TCCSMD), Charles County dialysis patients consumed 45% of their paratransit funding prior to the pilot. Because of this demand, paratransit was less able to transport riders for other types of rides such as shopping or recreation. The Wheels 2 Wellness pilot program outcomes show that this model works, and with partners and appropriate funding, non-medical transportation may be improved in rural areas. We believe this will reduce strain on residents and the transportation systems of rural areas, while also improving health outcomes of those living there.

We ask the committee for a favorable report on SB 511.

For more information, please contact Ande Kolp, Executive Director, The Arc Maryland.

[akolp@thearcmd.org](mailto:akolp@thearcmd.org)

# **Allegany County Chamber - Support SB511.pdf**

Uploaded by: Andrea Kraft

Position: FAV

February 21, 2023

The Honorable Melony Griffith, Chair  
Senate Finance Committee  
3 East, Miller Senate Office Building  
Annapolis, MD 21401

The Honorable Guy Guzzone  
Senate Budget and Taxation Committee  
3 West, Miller Senate Office Building  
Annapolis, MD 21401

**Re: SB0511 – Health and Human Services Transportation Improvement Act of 2023**

Dear Chairwoman Griffith and Chairman Guzzone:

The Allegany County Chamber of Commerce appreciates the opportunity to provide written testimony in support of Senate Bill (SB) 511. Through our Transportation Committee, the Chamber has been working with community stakeholders and transportation providers to improve transportation access in Allegany County.

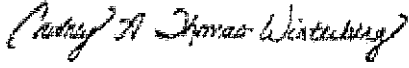
Allegany County, like many rural communities, has limited transportation options for those who do not have access to a reliable automobile. While public transportation exists, the existing fixed route service offers limited hours of operation, has inadequate reach in the most rural parts of our county, and can be difficult for those with disabilities and seniors that may have mobility issues and need door-to-door services or assistance with mobility aids. Cabs or other ridesharing services are limited and costly, but we know that reliable and affordable transportation access is essential to meet one's health and medical needs essential to daily living and quality of life.

Allegany County is fortunate to have several human service agencies in the County that offer transportation to help fill the gaps however, there are eligibility restrictions and most providers focus on providing rides to agency services and/or Medicaid eligible non-emergency medical transportation (NEMT) due to funding restrictions.

Senate Bill 511 establishes a Rural Non-Emergency Medical Transportation Program with an annual appropriation to support hospitals working with non-profit providers to address transportation gaps in rural communities to ensure eligible individuals can access needed medical appointments; increases funding for the Senior Rides Program to expand the successful volunteer transportation program to help elderly individuals maintain their independence, remain active in their communities, and access essential services, such as pharmacy and grocery stores; and establishes a State Coordinating Committee for Health and Human Services Transportation to develop a cooperative and coordinated approach to health and human services transportation in rural communities, which would further improve access to necessary services and support for individual in rural areas of the state.

For these reasons, the Allegany County Chamber of Commerce strongly urges your support of Senate Bill 511.

Sincerely,



Courtney Thomas-Winterberg  
Transportation Committee Chairwoman



Juli R. McCoy  
Executive Director

cc: Honorable Katherine Klausmeier, Vice Chair, Finance  
Honorable Jim Rosapepe, Vice Chair, Budget and Taxation  
Senate Finance Committee Members  
Senate Budget and Taxation Committee Members  
Allegany County Delegation

# **SB511 - RMC Support Testimony - Health and Human S**

Uploaded by: Charlotte Davis

Position: FAV



*Susan O'Neill, Chair*

*Charlotte Davis, Executive Director*

Testimony in Support of  
Senate Bill 511 – Health and Human Services Transportation Improvement Act of 2023  
Finance and Budget and Taxation Committees  
Wednesday, February 22, 2023

**The Rural Maryland Council supports Senate Bill 511 – Health and Human Services Transportation Improvement Act of 2023.** This bill will establish a Rural Nonemergency Medical Transportation Pilot Program for hospitals to coordinate transportation provided by a nonprofit organization to or from medical services for eligible individuals; repeal a certain cap on the amount of grants that may be awarded by the Maryland Transit Administration under the Maryland Senior Rides Program; require the Governor to provide at least \$1,000,000 annually to support the Rural Nonemergency Medical Transportation Program in the State's budget beginning in 2025; and other items generally relating to transportation for health and human services.

Routinely the Rural Maryland Council (RMC) receives requests to fund health-related transportation projects through the Rural Maryland Prosperity Investment Fund grant program. Examples of these requests include the purchase of vehicles to take patients to dialysis; support the development of computer dispatch software to aid in non-emergency medical transportation; and support salaries and wages of staff that intake and coordinate health transportation needs. The rise in demand for these requests led RMC to partner in 2022 with the Tri-County Council for Southern Maryland to host three Transportation Health Care Roundtable meetings between healthcare and transportation providers to determine how non-emergency health transportation can be improved in the State.

The research and findings generated from these roundtables showed that there is a lack of coordination between the transportation and healthcare sectors, a lack of knowledge where to go for transportation services, and a lack of resources. Additional findings from the roundtables show that there is a need to develop a rural transit model that provides on demand services (versus fixed route), smaller vehicles, and take a more regional approach to support the program. Cross-jurisdictional travel for health care services is often a requirement in rural areas

The Council strongly believes that the provisions included in Senate Bill 511 will help in alleviate the challenges found in the non-emergency Health and Human Services Transportation sector. The Rural Maryland Council respectfully requests your favorable support of Senate Bill 511.

*The Rural Maryland Council (RMC) is an independent state agency governed by a nonpartisan, 40-member board that consists of inclusive representation from the federal, state, regional, county and municipal governments, as well as the for-profit and nonprofit sectors. We bring together federal, state, county and municipal government officials as well as representatives of the for-profit and nonprofit sectors to identify challenges unique to rural communities and to craft public policy, programmatic or regulatory solutions.*

**CDN SB511 FAVORABLE.pdf**

Uploaded by: Claudia Wilson Randall

Position: FAV





**Testimony SB 511  
Finance Committee  
February 22, 2023  
Position: FAVORABLE**

Dear Chairman Griffith and Members of the Finance Committee:

The Community Development Network of Maryland (CDN) is the voice for Maryland's community development sector and serves nearly 200 member organizations. CDN—focuses on small affordable housing developers, housing counseling agencies and community-based non-profits across the state of Maryland. The mission of CDN is to promote, strengthen and advocate for the community development sector throughout Maryland's urban, suburban and rural communities. CDN envisions a state in which all neighborhoods are thriving and where people of all incomes have abundant opportunities for themselves and their families.

SB 511 – Establishes the Rural Nonemergency Medical Transportation Program for hospitals to coordinate transportation provided by a nonprofit organization to or from medical services for eligible individuals; repealing a certain cap on the amount of grants that may be awarded by the Maryland Transit Administration under the Maryland Senior Rides Program; requiring the Governor to provide \$1,000,000 annually for the Rural Nonemergency Medical Transportation Program in the State budget.

in Calvert and St Mary's counties . Wheels to Wellness has travelled up to 20,000 miles per year since 2018, assisting those in mostly rural areas who cannot provide their own transportation to health service appointments. The Wheels to Wellness program provides transportation to seniors and individuals with disabilities. Each ride given to an individual provides them with medical care that they would have otherwise gone without. As a result, these individuals are able to address health related issues that they otherwise would have had to leave unchecked, resulting in worsening health conditions. Most of the areas served are rural areas. Individuals in rural areas tend to have less access to health care facilities, specifically specialty care, and in return have worst health than those in urban and suburban areas

For example, CalvertHealth completed a pre-post analysis of the program visits and charges for unique patients enrolled in the Wheels to Wellness program. The preliminary findings demonstrate significant savings particularly for emergency room, intensive care, laboratory, and medical hospital charges. The analysis also determined a significant increase in drug charges, which indicates enrollees may be improving their medical regime maintenance.

From October 4, 2019 to January 28, 2021. The CRISP data evaluates patients with a CalvertHealth Medical Center MRN and does not include patients referred to the program by some of the primary care offices. The patients are enrolled in the hospital case management program which includes Wheels to Wellness. CalvertHealth indicated that the number of ED visits dropped from 68 visits to 44 for the 23 members. The analysis by CalvertHealth indicate the medical/surgical costs dropped from \$238,844 to approximately \$49,233. The analysis by CalvertHealth indicate the Laboratory charges dropped from \$112,902 to \$31,336

Rural health disparities and racial and ethnic health disparities are well documented. Although the specific health challenges may vary, many are the same, such as higher rates of chronic conditions. Similar to communities of color, rural communities experience higher poverty and unemployment rates (US Department of Agriculture 2018) and have lower college enrollment rates despite having a higher high school graduation rate (National Student Clearinghouse Research Center 2016). Rural communities also face food insecurity.

Transportation to medical appointments provided by community based nonprofits is one way to address the health disparities that exist for older adults and people of color throughout Maryland.

We respectfully request a favorable report for SB 511.

Submitted by Claudia Wilson Randall, Executive Director

# **POG Final Testimony - SB511.pdf**

Uploaded by: Devin Wylie

Position: FAV

## People on the Go of Maryland



### Senate Bill 511

## Health and Human Services Transportation Improvement Act of 2023

Establishing the Rural Nonemergency Medical Transportation Program for hospitals to coordinate transportation provided by a nonprofit organization to or from medical services for eligible individuals; repealing a certain cap on the amount of grants that may be awarded by the Maryland Transit Administration under the Maryland Senior Rides Program; requiring the Governor to provide \$1,000,000 annually for the Rural Nonemergency Medical Transportation Program in the State budget beginning in fiscal year 2025; etc.

Position: Support

February 22, 2023

Sponsored by Senators Ellis and Hester

Assigned to Finance and Budget Taxation

Written by Cody Drinkwater

Public Policy Assistant - People On the Go of Maryland

Honorable Chairperson and members of the Finance and Budget Taxation Committee,

People on the Go of Maryland (People On the Go) the statewide self-advocacy organization ran for and by those with intellectual and/or developmental disabilities (IDD) offers this written testimony in support of SB 511, Health and Human Services Transportation Improvement Act of 2023. This act establishes the Rural Non-emergency Medical Transportation Program for hospitals to coordinate transportation provided by a nonprofit organization to or from medical services for eligible individuals; repealing a certain cap on the amount of grants that may be awarded by the Maryland Transit Administration under the Maryland Senior Rides Program; requiring the Governor to provide \$1,000,000 annually for the Rural Nonemergency Medical Transportation Program in the State budget beginning in fiscal year 2025; etc. Transportation is a serious issue in Maryland, especially for people with disabilities who live in rural areas that cannot afford to travel to cities with hospitals. Non-emergency hospital visits are important as emergency visits because maintaining health and

preventing diseases like cancer are incredibly important to potentially high risk individuals with disabilities. Thank you for your time and attention to this matter and we encourage a favorable report.

Should you have any questions. Please contact Cody Drinkwater.

Best regards,

Cody Drinkwater  
Public Policy Assistant  
People on the Go of Maryland

**SB0511-FIN\_MACo\_SUP.pdf**

Uploaded by: Dominic Butchko

Position: FAV



## Senate Bill 511

### *Health and Human Services Transportation Improvement Act of 2023*

MACo Position: **SUPPORT**

To: Finance and Budget and Taxation  
Committees

Date: February 22, 2023

From: Dominic J. Butchko

The Maryland Association of Counties (MACo) **SUPPORTS** SB 511. This bill would create the Rural Nonemergency Medical Transportation Program and provide resources for nonprofits operating nonemergency medical transportation networks in rural counties.

Counties recognize the importance of both emergency and nonemergency medical transportation. In 2022, MACo adopted as one of its legislative initiatives realigning emergency medical service (EMS) funding for the modern era. This initiative was successful in raising the Medicaid reimbursement for EMS by 50% and commissioning a study to look at, among other things, how to better handle emergency and nonemergency interfacility transport.

While just as critical to maintaining public health, historically, nonemergency medical transportation has been largely overshadowed by EMS. The link between service providers and their patients – many of whom require maintenance visits for kidney dialysis or similar care – faces a persistent shortfall in funding as these services lie outside the realm of governmental insurance coverage. In some cases, counties have filled this gap to ensure the safety and health of their residents, but this current patchwork is unsustainable and insufficient. By investing in these nonprofits directly, providers more readily focus on their mission: providing critical medical transportation in areas of need.

SB 511 seeks to provide relief to nonemergency medical transportation providers in rural counties. By investing in these services and providers, the General Assembly can ensure and hopefully stabilize this vital public service. Accordingly, MACo requests a **FAVORABLE** report on SB 511.

# **SB 511- Health and Human Services Transportation I**

Uploaded by: Erin Dorrien

Position: FAV





Maryland  
Hospital Association

February 22, 2023

To: The Honorable Melony G. Griffith, Chair, Senate Finance Committee

Re: Letter of Support- Senate Bill 511- Health and Human Services Transportation Improvement Act of 2023

Dear Chair Griffith:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment in support of Senate Bill 511.

Access to reliable transportation is a common barrier to medical care. In Community Health Needs Assessments across the state, transportation is often identified as a top challenge. It can also contribute to longer hospital stays if a patient does not have access to transportation to their next level of care. Marylanders in rural and underserved urban areas with limited transportation have even greater difficulties getting to and from medical appointments.

This statewide challenge contributes to longer emergency department wait times in two ways: patients may wait for transportation out of the hospital, and patients unable to be discharged from an inpatient bed can cause hospital throughput issues. Additionally, lack of available nonemergency transport options means patients cannot get to critical appointments. This can delay care and lead to avoidable hospital visits and costly emergency ambulance transport.

The Maryland Department of Health (MDH) funds the Non-Emergency Medical Transportation program, which is administered by local jurisdictions and available only to Medicaid participants. There are significant programmatic limitations, and different requirements across counties and restrictions by vendor availability, distance, and hours of operation. While helpful, they are insufficient to address the scope of medical transportation needs for all Marylanders.

SB 511 will offer patients and hospitals another tool to help get patients home or to the next level of care as soon as they are cleared to do so. Hospitals are well-positioned to help coordinate transportation and work with community stakeholders to implement these programs. Implementation on a statewide basis could help address this critical social determinant of health.

For these reasons, we ask for a *favorable* report on SB 511.

For more information, please contact:  
Erin Dorrien, Vice President, Policy  
Edorrien@mhaonline.org

# **Written Testimony For SB511 John Hartline TCCSMD -**

Uploaded by: John Hartline

Position: FAV

# Written Testimony SB 511 Health and Human Services Transportation Improvement Act of 2023

**John F. Hartline, Executive Director, Tri-County Council for Southern Maryland**

Thank you for allowing me to speak to you today in favor of SB511.

In 2017, the Tri-County Council for Southern Maryland (TCCSMD) working with the Community Transit Association of America (ATAA) performed a study on the most urgent needs for local transit in the Southern Maryland Region. That study group focused in on Non-Emergency Medical Transportation as the most important unmet need. This resulted in a group made up of two human services agencies, two county hospitals and the Tri-County Council for Southern Maryland moving forward to begin the Wheels2Wellness (W2W) Program with funds from MDOT and the Rural Maryland Council (RMC).

The group had four major objectives:

1. Provide transportation for patients who have no way to get to in-and-out hospital procedures and to follow-up visits.
2. Keep the “no-show” rate for follow-up patient office visits near zero. (under 2%)
3. Improve the patient’s outcomes by reducing the patient bounce-back rate.
4. Prove the program could save the hospitals more money than the transportation program cost.

After two years of start-up problems related to computer software, just about the time I was ready to give up. CRISP cost of care reports for the cohort of Wheels2Wellness patients from **Calvert Health Hospital showed a return on investment that was roughly 6-times the cost for transportation.**

Following that surprising outcome, I asked the TCCSMD Executive Board to apply more RMC RMPIF formula funds to the W2W program and TCCSMD staff applied for competitive RMPIF funds and local foundations to expand the program to Charles Regional Hospital.

After 4 years of experience, the Wheels 2 Wellness Program has continued to produce savings, but we have found there can be a wide standard deviation in the distribution of savings, but always positive results, in our pilot program.

My goal for this Bill SB511 is to scale up the W2W project and to operate it Statewide through the five Tri-County Councils to prove the program can save lives and save the healthcare providers money in all rural areas of the State of Maryland.

I ask for your support and invite you to add funds for other more urban counties as you see fit.

Thank you and I am happy to answer any questions.

John Hartline

[jhartline@tccsmd.org](mailto:jhartline@tccsmd.org)

240-682-3426

**SB0511.pdf**

Uploaded by: Jonathan Dayton

Position: FAV



**Statement of Maryland Rural Health Association (MRHA)**

To the Senate Finance Committee

Chair: Senator Melony Griffith

February 7, 2023

**Senate Bill 511: Health and Human Services Transportation Improvement Act of 2023**

**POSITION: SUPPORT**

Chair Griffith, Vice Chair Klausmeier and members of the Committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of *Senate Bill 511: Health and Human Services Transportation Improvement Act of 2023*.

The Maryland Rural Health Association recently participated in the three rural roundtables hosted by the Rural Maryland Council and Tri-County Council of Southern Maryland where we firsthand listened to the many of the most pressing non-emergency medical transportation challenges across Maryland. Tens of thousands of Marylanders each year miss critical medical appointments thus furthering their healthcare challenges but also creating financial burdens on the medical system. The Centers for Medicare and Medicaid Services directly state, "Non-emergency medical transportation (NEMT) is an important benefit for people who need assistance getting to and from medical appointments."

MRHA believes that SB511 is a great first step in addressing these most pressing challenges that greatly and primarily affect rural residents of Maryland across the 18 designated rural counties across the state.

*Sincerely,*

*Jonathan Dayton, MS, NREMT, CNE, Executive Director*

*jdayton@mdruralhealth.org*

*Non-emergency Medical Transportation. CMS. (n.d.). Retrieved February 21, 2023, from <https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Program/Education/Non-Emergency-Medical-Transport>*

# **SB 511- LWVMD- FAV- Health and Human Services Tran**

Uploaded by: Nora Miller Smith

Position: FAV



## TESTIMONY TO THE SENATE FINANCE COMMITTEE

**SB 511: Health and Human Services Transportation Improvement Act of 2023**

**POSITION: Support**

**BY: Nancy Soreng, President**

**DATE: February 22, 2023**

The League of Women Voters Maryland supports **Senate Bill 511: Health and Human Services Transportation Improvement Act of 2023**.

**Lack of easy access to safe, reliable, and affordable transportation disproportionately affects the elderly, those with limited mobility, low-income Marylanders, and rural residents who often must travel long distances to reach healthcare services and providers.** Without dependable transportation, healthcare appointments can be missed or rescheduled, resulting in delayed care and poorer health outcomes.

**Reducing health disparities and improving equity can sometimes simply be a matter of removing transportation barriers to healthcare access.** This is particularly important for patients with life-threatening conditions such as cancer or end-stage kidney disease, who need **consistent monitoring** of their condition and **strict adherence** to treatment plans such as radiation or dialysis.

**The longer distances and increased travel time needed to reach healthcare services increases the transportation burdens of rural residents.** Without a driver's license and reliable car, patients in rural areas have very limited options. Passage of Senate Bill 511 will reduce some of those transportation burdens by establishing the **Rural Nonemergency Medical Transportation Program**, through which eligible individuals living in a rural county in Maryland will be able to easily access reliable transportation to hospital medical services.

The League of Women Voters believes that health care is a human right. All Maryland residents need access to affordable, equitable, quality health care. Any measure to increase that access will improve the medical system for everyone.

Because transportation is such an important social determinant of health in rural communities, **the League and its 1,500+ members urge the committee to give a favorable report to Senate Bill 511.**

# **MSCAN 2023 Testimony- SB 511 HHS Transportation Im**

Uploaded by: Carol Lienhard

Position: FWA





# Maryland Senior Citizens Action Network

## MSCAN

*AARP Maryland*

*Alzheimer's  
Association,  
Maryland Chapters*

*Baltimore Jewish  
Council*

*Catholic Charities*

*Central Maryland  
Ecumenical Council*

*Church of the Brethren*

*Episcopal Diocese of  
Maryland*

*Housing Opportunities  
Commission of  
Montgomery County*

*Jewish Community  
Relations Council of  
Greater Washington*

*Lutheran Office on  
Public Policy in  
Maryland*

*Maryland Association of  
Area Agencies on Aging*

*Maryland Catholic  
Conference*

*Mental Health  
Association of Maryland*

*Mid-Atlantic LifeSpan*

*National Association of  
Social Workers,  
Maryland Chapter*

*Presbytery of Baltimore*

*The Coordinating  
Center*

*MSCAN Co-Chairs:  
Carol Lienhard  
Sarah Mücke  
410-542-4850*

## Testimony in Support of Senate Bill 511 – Health and Human Services Transportation Improvement Act of 2023

### Senate Finance Committee

February 22, 2023

### SUPPORT with Amendments

The Maryland Senior Citizens Action Network (MSCAN) is a statewide coalition of advocacy groups, service providers, faith-based and mission-driven organizations that supports policies that meet the housing, health and quality of care needs of Maryland's low and moderate-income seniors.

MSCAN supports SB 511 which would establish the Rural Nonemergency Medical Transportation Program for hospitals to coordinate transportation provided by nonprofit organizations to or from medical services for eligible individuals. It would provide an appropriation of at least \$1 million dollars to the Maryland Department of Health to fund the program. The bill also establishes a much-needed State Coordinating Committee for Health and Human Services Transportation in the Maryland Department of Transportation.

It is important to note that this proposed transportation option would actually save far more than it costs. Thousands of elderly patients require medical transportation services every day to address a variety of debilitating health conditions which threaten their ability to remain at home in the community. When the deterioration in the health of seniors results in nursing home placement just because they are unable to receive the medical transportation they need, the costs can be staggering. The current **annual cost of nursing home placement in Maryland is \$108,258** – so nursing home placement of just 150 seniors who cannot reach essential medical care **could cost as much as \$16.2 million dollars!** Thus a **\$1 million dollar investment in the Rural Nonemergency Medical Transportation Program could result in \$15.2 million dollars in savings for taxpayers.**

In order to provide as many options as possible for the program, we respectfully request an amendment which would make local Transit agencies as well as non-profits eligible to participate in the rural transportation program, as there may be areas in the state where the Transit agencies may be more able to assist than nonprofits.

MSCAN appreciates the opportunity to provide supportive testimony on behalf of SB 511 with amendments. Thank you for your consideration of this important legislation. On behalf of the rural seniors of Maryland, we will be grateful for a favorable report.

**SB511\_NonMedicalTranspo\_KennedyKrieger\_Support.pdf**

Uploaded by: Emily Arneson

Position: FWA



**DATE:** February 22, 2023      **COMMITTEE:** Senate Finance  
**BILL NO:** Senate Bill 511  
**BILL TITLE:** Health and Human Services Transportation Improvement Act of 2023  
**POSITION:** Support with amendment

**Kennedy Krieger Institute supports with amendment Senate Bill 511 - Health and Human Services Transportation Improvement Act of 2023.**

**Bill Summary:**

Senate Bill 511 establishes the Rural Nonemergency Medical Transportation Program for hospitals to coordinate transportation to or from medical services for eligible individuals. The legislation also establishes the State Coordinating Committee for Health and Human Services Transportation to examine the needs of state residents who require transportation to access job, medical or other health-related appointments, senior citizen programs, etc.

**Background:**

Kennedy Krieger Institute provides specialized services to patients and students nationally and internationally. Kennedy Krieger Institute is dedicated to improving the lives of children and young adults with developmental, behavioral, cognitive and physical challenges. Kennedy Krieger's services include inpatient, outpatient, school-based and community-based programs.

The Maryland Center for Developmental Disabilities (MCDD) at Kennedy Krieger Institute is proud to be Maryland's University Center for Excellence in Developmental Disabilities Education, Research, and Service (UCEDD) and a member of the national Association of University Centers on Disabilities (AUCD).

MCDD links the community to vital services, research and information to improve the lives of people with disabilities. Our mission is to provide leadership that advances the inclusion of people with intellectual, developmental and other disabilities through preservice preparation and training; research and evaluation; community service and technical assistance; and information dissemination.

**Rationale:**

Increasing access to reliable and equitable transportation for individuals with disabilities will have a profound impact on access important healthcare services. Currently, the paratransit service in Maryland has much need for improvements and leaves many individuals stranded or waiting hours for the service.

Having reliable transportation will increase access to specialized healthcare programs like the ones offered at Kennedy Krieger.

Anecdotally, Kennedy Krieger has had many patients from rural jurisdictions that have had immense challenges in getting to their appointments at the Institute, which located primarily in Baltimore City. For example, a child and their guardian from the Eastern Shore were able to ask a fellow church member for transportation to the Bay Bridge, but non-emergency transportation was not available to pick them up at a meeting point to take them from the Bay Bridge to Baltimore City.

**Amendment:**

On page 3, line 16 under section 13-4801(E)(II)(2) add the word “accessible” – “Provides **accessible** transportation services to eligible individuals...” By adding the word accessible, the legislation is clarified that transportation must be Americans with Disabilities Act (ADA) compliant so that all individuals may access the service without barriers.

**Kennedy Krieger Institute requests a favorable report with amendment on Senate Bill 511.**

Contact information: Emily Arneson, AVP Government Affairs – 443.631.2188 or [arneson@kennedykrieger.org](mailto:arneson@kennedykrieger.org)  
707 North Broadway Baltimore, Maryland 21205 (443) 923-9200/Telephone (443)923-9125/Facsimile

**TAM - SB 511 FAVwamend.pdf**

Uploaded by: John Duklewski

Position: FWA



**Bill:** Senate Bill 511: Health and Human Services Transportation Improvement Act of 2023

**Position:** Favorable with Amendments

Dear Chair Griffith, Vice-Chair Klausmeier, and Members of the Committee:

The Transportation Association of Maryland is a 501(c)(3) organization representing 104+ member organizations consisting of locally operated transit agencies (LOTS), non-profit transit providers, transportation vendor and transportation supporters with 20,000+ individual members. TAM is the legislative voice and vigilant eyes and ears of the transportation industry in Maryland. TAM's mission is to strengthen community transportation in Maryland through advocacy and professional development.

The need for effective coordination between transit providers, hospitals is a long-overdue and much needed part of the solution of provided non-emergency medical transportation. Missed appointments often lead of hospital visits and increased readmission rates. As exemplified in the Wheels to Wellness program in southern Maryland, effective coordination causes lower overall costs and better health outcomes

We recommend the following change to this legislation: public transit agencies should be specifically allowed to participate in this program, as they often possess capacity to participate in ways that non-profits do not.

These changes will permit more effective use of funds and enhance ongoing efforts to promote coordination between transit agencies, non-profits, and medical providers.

Should you have any questions, please feel free to contact John Duklewski at 410-553-4245 or [jduklewski@taminc.org](mailto:jduklewski@taminc.org).

Sincerely,

John Duklewski

Executive Director, Transportation Association of Maryland

# 2023 SB511 Written Testimony.pdf

Uploaded by: Deborah Brocato

Position: UNF



### **Opposition Statement SB511**

Health and Human Services Transportation Improvement Act of 2023

Deborah Brocato, Legislative Consultant

Maryland Right to Life

#### **We oppose SB511.**

On behalf of over 200,000 followers across the state, we object to **SB511**. As written, the bill would allow state transportation services to transport women and girls to abortion centers. We oppose the allocation of taxpayer funds for the purpose of transporting “eligible individuals” to and from entities that promote and provide abortion services. Maryland Right to Life requests an amendment to exclude abortion purposes from the application of this bill.

**Maryland is a state sponsor of abortion.** By providing transportation to and from the abortion business, Maryland is promoting the abortion industry and using public money to do so.

**Abortion is not healthcare.** It is violence against the woman or girl and her unborn child. The baby is killed and the woman or girl suffers physically, emotionally and psychologically (see [www.silentnomoreawareness.org](http://www.silentnomoreawareness.org)). 85% of OB/Gyns do not perform abortions on their patients indicating abortion is not an essential part of women’s healthcare. The Abortion Care Access Act of 2022, sponsored by former NARAL employee Delegate Ariana Kelly, removed abortion from the spectrum of healthcare by removing the physician requirement for abortion and allowing any “certified provider of abortion care” to perform or provide both chemical and surgical abortion through birth.

**Maryland fails to protect minor girls.** The Assembly reduced the age of medical consent for behavioral health services to 12 years of age. The Department of Health list mental health as a reason for public funding of abortion, including for minor girls. Many of the businesses that commit abortions are now dispensing puberty blockers and cross-hormones. Again, gender dysphoria is a mental health condition. Minor girls could seek abortion, the lethal chemical abortion drugs and gender identity drugs without parental consent or knowledge. Transportation provided by the state would make it easier for the abortion industry and businesses that dispense these dangerous drugs to prey on minor girls.

**D-I-Y Abortions Endanger Women:** Public policy has failed to keep pace with the abortion industry’s rapid deployment of chemical abortion pills. “D-I-Y” abortion is normalizing “back alley abortion” where women self administer and hemorrhage without medical supervision or assistance.

Chemical abortion is four times more likely to result in complications than surgical abortion. To date more than 6,000 complications have been reported and 26 women have been killed through chemical abortion since its approval by the Food and Drug Administration (FDA). Because half of all women experiencing complications from chemical abortions receive emergency intervention through hospitals, the rate of abortion complications is dramatically underreported.





### **Opposition Statement SB511**

Health and Human Services Transportation Improvement Act of 2023

Deborah Brocato, Legislative Consultant

Maryland Right to Life

**Adopt Reasonable Health and Safety Standards:** The growing reliance on chemical abortions underscores the need for a state protocol for the use of abortion pills including informed consent specific to the efficacy, complications and abortion pill reversal. Strong informed consent requirements manifest both a trust in women and a justified concern for their welfare.

While we oppose all abortion, we strongly recommend that the state of Maryland enact reasonable regulations to protect the health and safety of girls and women by adopting the previous FDA Risk Evaluation and Mitigation Strategies (REMS) safeguards that required that the distribution and use of mifepristone, the drug commonly used in chemical abortions, to be under the supervision of a licensed physician because of the drug's potential for serious complications including, but not limited to, uterine hemorrhage, viral infections, pelvic inflammatory disease, loss of fertility and death.

**Patients before Profits:** Maryland policy makers have put abortion politics before patients. In 2020, Maryland Attorney General Brian Frosh joined twenty state Attorneys General in pressuring the FDA to permanently remove safeguards against the remote prescription of abortion pills. Maryland already has been circumventing the FDA restrictions on the remote distribution of chemical abortion pills since 2016 by allowing Planned Parenthood to practice tele-abortion as part of a "research" pilot program directed by Gynuity/Carefem. While program participants are loosely tracked, Maryland generally fails to protect women as one of three states that do not require abortion providers to report the number of abortions they commit, resulting in increased threat to maternal health, complications or deaths.

**Abuse of Abortion Drugs:** The state also is neglecting the fact that as much as 65% of abortions are not by choice, but by coercion. Potential for misuse and coercion is high when there is no way to verify who is consuming the medication and whether they are doing so willingly. Sex traffickers, incestuous abusers and coercive boyfriends will all welcome more easily available chemical abortion.

Providing transportation to and from abortion centers makes it easier for sex traffickers and abusers to seek abortion for their victims.

**The abortion industry is only concerned with abortion remaining legal. The state of Maryland has a duty to ensure that abortion is safe and must intervene on behalf of women and girls by adopting protocols and standards to protect the health and wellbeing of women and girls.**

Maryland Right to Life opposes the promotion of the abortion industry by providing transportation to their doors. For these reasons, without an amendment excluding abortion funding and transportation for the purpose of abortion access, we respectfully ask you to oppose **SB511**.

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# **SB0511 - MTA - Transportation Improvement Act - LO**

Uploaded by: Patricia Westervelt

Position: INFO

February 22, 2023

The Honorable Melony Griffith  
Chair, Senate Finance Committee  
3 East, Miller Senate Office Building  
Annapolis MD 21401

***RE: Letter of Information – Senate Bill 511 – Health and Human Services - Transportation Improvement Act of 2023***

Dear Chair Griffith and Committee Members:

The Maryland Department of Transportation (MDOT) takes no position on Senate Bill 511 but offers the following information for the Committee's consideration.

Senate Bill 511 establishes the Rural Nonemergency Medical Transportation Program for hospitals to coordinate with nonprofit organizations that provide transportation to or from medical services and mandates an annual appropriation for the Program of at least \$1,000,000 beginning in FY 2025. Additionally, Senate Bill 511 establishes the State Coordinating Committee for Health and Human Services Transportation (the Committee) and eliminates the caps on the Maryland Senior Ride Program and Job Access and Reverse Commute (JARC) Program.

The Committee proposed in Senate Bill 511 is tasked with reviewing the transportation needs of certain individuals, including those who are elderly, have a disability, and require access to jobs, medical, and other health-related appointments; MDOT is to staff the Committee. It should be noted for the Committee that MDOT does not have subject matter experts in health policy, and it would be necessary to collaborate with the Maryland Department of Health. Further, MDOT expects additional consultants would be needed to provide the level of analysis required.

Currently, the Maryland Senior Rides Program and the Job Access and Reverse Commute (JARC) Program are capped at \$500,000 and \$400,000, respectively. The Senior Rides Program has previously been funded at just under \$190,000 per year and the JARC Program had been funded at \$400,000 per year. If these programs are both renewed at the existing funding levels, this would require about \$590,000 per year in additional funding. Any level of funding for these two programs in excess of the previous funding amounts will increase the fiscal impact of this bill.

The Maryland Department of Transportation respectfully requests the Committee consider this information when deliberating Senate Bill 511.

Respectfully submitted,

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