

HB 596 Health and Human Services Transportation Improvement Act of 2023

Access to health care is a daily challenge for rural residents. Residents living in any one of Maryland's rural communities must travel long distances to receive health care—routine or emergency. In addition, rural community members are also experiencing significant changes in the way health care is delivered in their communities. As rural communities continue to experience population decline and the delivery of health care is continually evolving, ensuring access to quality health care will continue to be a challenge.

Studies have shown that there are fewer physicians in rural areas to treat health issues. A [2014 study](#) found that there were 53.3 physicians per 100,000 residents in urban areas, but only 39.8 doctors in rural areas.

It is also harder for rural residents to access specialized medicine as compared to their urban counterparts. A study from the University of Minnesota School of Public Health found that only 46% of rural hospitals had obstetrics care in-house, leading to declines in maternal-child health.

Mental illness is as prevalent in rural communities as it is among urban residents, yet the availability of mental health services is very different in the two communities. Mental healthcare needs are often not met in many rural areas across the country because adequate services are simply not present.

The State of Maryland recognizes 18 of its 24 jurisdictions as rural. One in four Maryland residents live in rural Maryland. Yet, Maryland's rural communities face unique health care challenges that include a general lack of health care providers compounded by the difficulty accessing those providers due to transportation and technological barriers.

These pressing issues make it more difficult for rural residents to access routine care, which can lead to more significant and more costly emergency services in time.

Rural populations are more likely to have to travel long distances to access healthcare services, particularly subspecialist services. This can be a significant burden to rural residents in need of care as they must travel farther from their immediate communities, in terms of travel time, incur greater costs for care, and take time away from their workplaces.

In addition, the lack of reliable transportation is a barrier to care. In urban areas, public transit is generally an option for patients to get to medical appointments; public transportation services are often lacking in rural areas. Rural communities are frequently home to more elderly residents who have chronic conditions requiring multiple visits to outpatient healthcare facilities—a significant challenge without available public transportation. In addition, services such as Uber and Lyft are simply not available to rural residents.

HB596 establishes the Rural Nonemergency Medical Transportation Program within the Maryland Department of Health. Beginning in fiscal 2025, the Governor will be required to include an appropriation of at least \$1.0 million in the annual budget bill designated to MDH to fund the program. The bill also establishes a State Coordinating Committee for Health and Human Services Transportation in the Maryland Department of Transportation and repeals the limits on annual funding for the Maryland Senior Rides Program and the Job Access and Reverse Commute Program administered by the Maryland Transit Administration.

As we work together to ensure that all Marylanders have access to quality, affordable health care, I urge a favorable vote on this bill, which will put health care within easy reach of rural resident.