Without timely and reliable transportation, people living in rural areas face many challenges obtaining needed health care services. In fact, 60 percent of community stakeholders in the northern Litchfield Hills of Connecticut and the greater Harlem Valley of New York identified unmet transportation needs as one of the top three barriers to health care access, according to a 2014 survey funded by the Foundation for Community Health (FCH).¹

Based on community feedback, the Foundation has been funding non-emergency medical transportation (NEMT) to help residents living in its 17-town service area² easily acquire health care and other services.

The positive effects of this funding are many, according to a 2017 independent, retrospective evaluation³ that included an analysis of ridership data, passenger surveys, and telephone interviews with grantees, riders and health care providers.
TRANSPORTATION IMPACT ON RIDER HEALTH AND WELL-BEING

Among riders who participated in a survey about FCH-funded transportation services:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>83%</td>
<td>said they were able to keep medical appointments</td>
</tr>
<tr>
<td>43%</td>
<td>said they were healthier because of regular access to both routine and specialty care (e.g., dialysis, physical therapy, mental health services) treatment</td>
</tr>
<tr>
<td>20%</td>
<td>said they obtained prescription medications and other medical supplies consistently</td>
</tr>
<tr>
<td>31%</td>
<td>said they could stay socially connected to family, friends and the wider community</td>
</tr>
<tr>
<td>50%</td>
<td>said they could live independently in their homes (rather than moving into an assisted living community)</td>
</tr>
</tbody>
</table>

When asked if transportation services were not available, 22 percent said they would make fewer medical appointments, while 16 percent said they would consider moving to a more populated area.

Almost all passengers interviewed said they could no longer drive due to advanced age, physical disability, or a chronic medical condition. Relying on family or friends for all rides is unrealistic because of work schedules and family commitments.

Community-based, demand response, door-to-door transportation is focused on an individual rider’s need for flexible routing and scheduling between pick-up and drop-off locations. These transportation services do not operate on fixed hours or routes, meaning passengers must schedule rides several days or weeks in advance. These shared-ride services use vans or buses to transport elderly, disabled or Medicaid-eligible passengers door-to-door (i.e., from the threshold of a rider’s home to the threshold of his/her destination) with drivers assisting passengers on and off vehicles when necessary. None of the following three transportation grantees charge passengers for rides, although donations are accepted:

**Geer Dial-A-Ride** provides transit services for medical appointments, shopping and day-to-day errands for residents of North Canaan, Falls Village, Salisbury, Cornwall and Sharon in Connecticut. This service, operated by Geer Village Senior Community, operates three vehicles five days a week throughout the county including FCH service area towns of Wassaic, Amenia, Dover, Millbrook, Millerton, Stanfordville and Pine Plains.

**North East Community Center (NECC)** furnishes transportation services for medical appointments (including rides to Connecticut health care providers that are closer than those in New York), errands, employment and social visits via North East Dutchess Transit (NEDT). The transit service operates three vehicles (plus a small cadre of volunteer drivers using their own vehicles) five days a week throughout the county including FCH service area towns of Ancram, Ancramdale, Copake and Copake Falls.

**The Children and Adults Rural Transportation Service (CARTS)** provides only NEMT for Columbia County residents including FCH’s service area towns of Ancram, Ancramdale, Copake and Copake Falls. A service of the Columbia County Community Healthcare Consortium, Inc., CARTS operates ten vehicles five days a week.

“It is a lifeline,” a passenger said of Columbia County, New York’s, expanded transit services during a telephone interview. “It has saved my life. I am housebound ... I can’t get to a doctor or PT (physical therapy) without this service.”
TRANSPORTATION IMPACT ON THE HEALTH CARE SYSTEM

Health care provider interviewees reported fewer missed medical appointments thanks to the Foundation’s transportation grants.

Transportation Grant Program Investments

Knowing that an increasing elderly and low-income population, an inadequate transportation infrastructure, and long distances between patients and health care providers, all have contributed to a growing demand for NEMT in its service area, the Foundation has invested $1,135,970 between 2004 and 2017.

With an average annual investment of $81,140 for operations (some funds were used to purchase vehicles in 2006 and 2014), FCH’s modest support – between 8 percent and 19 percent of each grantee’s annual transit operating budget – has improved transportation access significantly.

“The (transportation services) offer a pathway to patient care that decrease utilization of the ER (emergency room) and unnecessary appointments,” said a family care provider of Columbia County, New York, patients. “They are able to go to the doctor on a regular basis.”

TRANSPORTATION IMPACT ON TRANSIT ACCESS

The three transportation grantees not only provided 86,582 rides between 2010 and 2017, but also increased the number of rides by 32 percent and the number of unduplicated riders by 42 percent during the same time period.

In 2017, grantees provided a total of 11,381 rides to 496 unduplicated passengers. During the same year, senior citizens over age 60 took nearly 70 percent of all rides and comprised 56 percent of all unduplicated riders, while disabled passengers secured 31 percent of rides and accounted for 30 percent of unduplicated riders. As shown below, NEMT services accounted for 58 percent of all rides.

Transportation by Purpose in 2017

FCH’s grantees provided 11,381 rides to 496 unduplicated riders

Survey data demonstrates the importance of transportation services in improving riders’ quality of life. Among passenger survey respondents, 31 percent reported using transit services to stay socially connected to family and friends, and engage in the broader community.

The 2017 evaluation also found that passengers were overwhelmingly satisfied with FCH-funded transportation services. In fact, 83 percent of survey respondents rated transit services as “excellent” and 18 percent rated them as “good,” specifically mentioning the quality of drivers, timeliness of service, and transportation staff efforts to coordinate trips and meet passenger needs.

“They are very accommodating…. The bus drivers are good to us,” said a GEER rider. “There is no other way to get around in this very rural area (of Connecticut).”

When asked about service improvements, both passengers and health care providers suggested:

- Expanding overall capacity to fulfill unmet transportation needs
- Additional weekday and weekend hours
- More frequent service to long distance destinations

Based on evaluation results and a growing demand for transit services in its service area, FCH will continue funding its transportation grant program. For example, the Foundation financed transportation proficiency studies to help grantees identify potential operational and financial efficiencies.

For more information, please contact Gertrude O’Sullivan, Director of Communications and Special Programs, at gertrude@fchealth.org.

ENDNOTES

3 Please visit www.fchealth.org to review The Foundation for Community Health Community Grant Program Evaluation Report and a separate executive summary, which relies on data through the second quarter of 2017.
4 Rides are defined as transporting one person from point A to point B.
5 The same passenger may take multiple rides, but he/she is counted as one unduplicated rider.