

**3.6**

**Million**

*Approximate number of Americans who miss or delay medical care because of transportation issues<sup>4</sup>*

**950,000**

*Approximate number of children who missed or delayed medical care because of transportation issues<sup>5</sup>*

**\$367**

*The amount of money saved per person when providing NEMT for prenatal care<sup>6</sup>*

## **MEDICAID NON-EMERGENCY MEDICAL TRANSPORTATION (NEMT) SAVES LIVES AND MONEY**

### **BARRIERS TO ACCESSING HEALTHCARE**

Each year, millions of Americans miss or delay preventative medical care due to their inability to access transportation services. Research has consistently shown that transportation is one of the most common barriers faced by low-income populations in accessing timely and necessary medical care because many low-income recipients simply lack the disposable income needed to have a working automobile or have access to affordable public transit in order to get to or from medical services.

The Medicaid non-emergency medical transportation (NEMT) benefit fills these various access gaps by providing the least costly but appropriate method of transportation services, such as taxis, vans and public transit for Medicaid beneficiaries with no means to get to and from their necessary medical appointments.

By way of background, The Center for Medicaid and Medicare Services (CMS) established transportation as a mandatory benefit in order to provide consistent and efficient access to early intervention/preventive medical care for disadvantaged Medicaid recipients who would otherwise have no means of accessing healthcare services. As a result, providing access to preventative treatment prior to escalating healthcare needs has proven to be a less costly and more effective means of keeping low income, elderly, and disabled recipients out of hospitals and nursing homes; allowing such individuals to remain viable members of the community and live healthier and independent lives while lowering overall health care costs.

### **RETURN ON INVESTMENT**

The federal requirement concerning medical transportation assurance is based upon recognition from past experience in Medicaid that unless needy individuals can actually get to and from providers of services, the entire goal of a state Medicaid program is compromised. Healthcare costs would escalate rapidly with low-income individuals ending up in high cost emergency rooms via ambulance services at 15 times the cost of routine transportation.

On average, NEMT is utilized by only 10 percent of the total Medicaid population and represents approximately 1 percent of total Medicaid expenditures.<sup>1</sup> That said, measuring the benefits of providing access to transportation

is far more difficult than measuring its costs. Nonetheless, studies have consistently shown that treatment programs that include transportation to increase attendance at appointments reported positive results, including fewer missed appointments, reduced length of stay, and fewer emergency room visits.<sup>2</sup> A study conducted by Florida State University concluded that if only one percent of the medical trips funded resulted in the avoidance of an emergency room hospital visit, the payback to the State would be 1108%, or about \$11.08 for each dollar the State invested in its medical transportation program.<sup>3</sup>

## **NEMT AND THE AFFORDABLE CARE ACT**

When viewed in the broader context of comprehensive healthcare reform, the assurance of such access to medical transportation is consistent with the law's intent to provide Medicaid coverage for all low-income American citizens and is considered to be a primary component of an efficient and effective health care delivery system. This, in turn, is key to the effective management of escalating medical costs as well as addressing general health care inefficiencies for this population.

In essence, Medicaid's transportation benefit serves as the *life blood* of our nation's publicly funded health care system, allowing our country's most vulnerable families to access critical medical services. It also lessens the financial burden on state governments by avoiding unnecessary emergency room visits, ambulance transportation and extended hospital stays. The assurance of such access to transportation has consistently proven to provide a positive impact on health care management from both an access and cost-containment perspective.

*1 Raphael D. Medicaid Transportation: Assuring Access to Health Care: A Primer for States, Health Plans, Providers and Advocates. 2001.*

*2 Wallace, R., Hughes-Cromwick, P., Mull, H., Bologna, J. Cost Benefit Analysis of Providing Non-Emergency Medical Transportation. Transportation Research Board: Washington, D.C. October 2005.*

*3 Florida Transportation Disadvantaged Programs Return On Investment Study Prepared By The Marketing Institute / Florida State University's College of Business – Dr. J. Joseph Cronin, Jr.*

*4 Wallace & Hughes. Cost Benefit Analysis of Providing Non-Emergency Medical Transportation*

*5 Ibid.*

*6 Ibid.*