

## Transportation Workgroup Minutes

**Attendees:** Bill Wagner, Dwight Mengel, Emily Briggs, Emily Hotchkiss, Heather Warner, Jack Salo, Jamie Hagebuch, John Mazzello, Mandy Walsh, Mary Maruscak, Phill Ginter, Yvonne Johnston, and Jessica Krohn.

**Absent:** Adam Hughes, Amy Beveridge, Chris McAvoy Paul, Emily Balmer, and Theresa Davis

### I. Welcome and Opening

Jack suggested that he and Dwight share information about the various transportation forums and networks in the area. This idea was well received by the group and will be added to the agenda of the next meeting.

### II. [Transportation Health and Forum](#) Updates

#### a. General updates

Jack reported that the conference has been distributed across numerous networks, including the PPS for Care Compass Network and Leatherstocking, all Rural Health Networks, various newsletters, and foundation leaders. The last planning committee meeting is scheduled for Tuesday, 10/5 at 8:30 am at Community Foundation.

#### b. PHIP/HAPN presentation clarification

Population Health Coordinators will meet to finalize content for the presentation. Discussion about presentation content. Jack suggested that the HAPN presentation include a content defining population health, health disparities and how transportation is a contributor to health disparities, particularly for elderly, the rural community and those with a low SES.

Yvonne suggested that a visual topographical map be created and shared during the opening of the conference to illustrate the various barriers impacting transportation and its relationship with healthy outcomes. Discussion held. Information may be able to be included in the HAPN presentation; Phill will inform Jessica and the Coordinators if additional assistance is needed for this section of the presentation.

Discussion on considerations for handouts for presentation. Yvonne asked if the presentations at the conference will be recorded. Phill will connect John Tooley with Jack Salo, as John Tooley had helped record an event on behalf of the United Way of Broome Co.

#### c. Fact Sheets

Population Health Coordinators provided an overview of the 6 fact sheets they are developing. Please see summary below. Mary noted that she is considering creating #3 and #5 together.

1. Health Care Access Solutions: methods that DO NOT require transportation of people to health care (mobile health services, mail or other delivery of Rx, mobile integration teams, telemedicine, etc.) **(John Mazzello)**
2. Health Care Transportation Payers and Gaps: (MOST VALUABLE) Tool that shows who pays for health care related transportation, organized by both income and age groups since both can trigger some level of transportation payer support (Medicaid, Medicare). This will include payer support for both NEMT, Private payer plans, Local resources (Connection to Care, etc.), and hospital systems that pay for specific needs and/or populations. **(Emily Hotchkiss)**
3. Transportation Considerations for Specific Health Conditions & Treatments: What do mobility managers and transportation providers need to know about dialysis, cancer treatments, wound care, etc. related to patient needs and transportation requirements. **(Mary Maruscak)**
4. Transportation and mobility definitions: Lots of new terms – need to have everyone on the same page. Include Mobility Management, NEMT, EMT, curb-to-curb, door-to-door, door-through-door, etc. **(Jessica Krohn)**
5. Considerations for transportation to health care of individuals with disabilities: STIC is working on this issue. May want to integrate this into #3. Consider Mental Health, Substance Use, Development Disabilities, and Physical Disabilities – all have different considerations when it comes to transportation. **(Mary Maruscak)**
6. Transportation Demographics: Time-permitting, include information on determining transportation needs through demographics. **(John Mazzello)**

Committee members requested that drafts of the fact sheets be shared with the committee for feedback. A graphic designer, Kathy Buchta, has been secured; Jessica will follow up with Kathy. Jack shared that the fact sheets will be distributed in the conference packets for all attendees.

Discussion on how to portray the information, such a decision tree. Yvonne mentioned the possibility of developing a relational database. Discussion as to how these fact sheets will be incorporated into the Transportation toolkit. Transportation toolkit discussed. Jack noted that a grant for the project was submitted to DSIRP and is awaiting a decision. Dwight mentioned that there are some funding opportunities for innovative ideas.

#### **d. Continuing Education**

Jack thanked Emily and Jessica for working on the continuing education credits. Emily has secured 7 CEs for the Public Health Education. The request for contact hours has been submitted to the MSW program for review and approval. The nursing continuing education units has not been submitted; Emily shared the challenges she faced in getting the nursing continuing education credit application. Yvonne offered to assist with getting the application through the School of Nursing at Binghamton University. Yvonne will follow up with Emily. Jack noted that to date, individuals seeking nursing CEs have not registered for the conference.

### **III. Transportation Workgroup Update**

#### **a. Transportation Pilot program**

Committee continued to brainstorm ideas on developing the pilot program. Committee members suggested having a few questions for medical staff to ask the patients about their access to reliable transportation in addition to developing a questionnaire to be completed by the patient, self-report, on transportation needs, access and barriers. Current draft questions were reviewed and discussed. A consensus was made by the committee to create a subgroup, chaired by Yvonne, to develop the questions for the pilot. Jessica will send out a doodle to the Coordinators and the committee to schedule a subgroup to meet in October. <http://doodle.com/poll/k9xk7vbt9dwkca94>

#### **b. Strategy to secure partners for the pilot program**

Coordinators provided updates to the committee. Emily reported she has talked with Carmen Francavilla at Lourdes and a staff member at Bassett. Discussion as to how confidentiality might be a barrier for mobility management referrals. Discussion on how workflow may be impacted. Emily noted that Bassett current schedules appointments, in house, whereas Lourdes uses central scheduling. The use of central scheduling changes the workflow options as to when to ask the pilot questions. Discussion and uncertainty was shared as to whether or not there will be one universal pilot or if the pilot would vary based on primary care facility. Phill talked with the group about how HealthlinkNY HIE is now offering an alert system and mentioned that the referrals may be able to be incorporated into the HIE.

- Delaware: The Delhi Health Center, located on O'Connor Hospital's campus, would like to participate in the pilot transportation project - thanks to Amy Beveridge!
- Tioga: Lourdes, Gutherie and UHS are viable options
- Tompkins: Emily suggested Cortland Regional
- Broome: Emily spoke with Carmen Francavilla at Lourdes, who has expressed an interest in the pilot program.
- Chenango: UHS may be an option.

#### **c. Mobility Management Readiness**

Due to lack of time and consensus to create a subgroup to fine tune the pilot program and questions, this matter was not discussed.

**IV. Developing a narrative** – not discussed, deferred to next meeting

**V. Membership composition** – not discussed, deferred to next meeting

**VI. Announcements** - not discussed

**Next Transportation Workgroup:** [Please complete the doodle.](#)