Meeting the Transportation Needs of Enrolled Participants
Disability-Competent Care Webinar Roundtable Series

Transportation services may be critical to meeting the needs of individuals with disabilities or "participants." Within the disability-competent care model transportation services support a participant's access to services and can increase his or her sense of security, belonging, and community participation.

As with all Disability-competent care services, the identification of transportation needs and options is a part of a comprehensive assessment and individualized plan of care (IPC). Key considerations when developing a transportation plan include:

- Level and nature of assistance required;
- Ability to access public transportation services (para-transit and scheduled routes);
- Frequency of transportation required;
- Ability to plan and arrange for transportation; and
- Participant scheduling and provider preferences.

Transportation needs typically fall into three categories:

- Standing orders for regular appointments (e.g., attending day program);
- Periodic, non-routine appointments; or
- Urgent or emergency.

Meeting a participant's transportation needs requires access to the participant's assessment and IPC and the ability to accommodate the participant in a timely manner. Some participants can make their own arrangements and only require access and authorization to the services, others will need assistance.

In 2012, **Medica Health Plan** restructured its transportation services to support its growing under-65 membership.

Medica **created a team** to:

- Maintain and support the vendor network;
- Establish new provider contracts and services;
- Systematically track and address complaints; and
- Develop a system to provide for individual problem solving as needed.

> **Profile: Medica Health Plan**
> - Non-profit health plan serving 1.5 million members in Minnesota, Wisconsin, North Dakota, and South Dakota
> - 15+ years of experience offering Medicare Special Needs Plans

Medica established a new set of procedures and functions, such as:

- Coordination of and improvements to the process of acquiring and administering transportation services;
- Email boxes dedicated to transportation; and

- Working with internal staff (e.g., members, care coordinators, care coordination operations, call centers) and contracted vendors to implement the new procedures and functions.

To appropriately **identify member needs**, Medica requires:

- Care coordinator assessments and reassessments of the member's situation;
- Direct member input;
- Provider input; and
- Specific call center staff training on assisting members in care coordination programs.

To help understand if there are policy gaps that require attention, Medica addresses questions such as:

- How are the health plan's actions meeting the needs of members? Are the actions helpful to the members?
- Are there people inside or outside of the organization that can offer insight and support initiatives to improve the transportation program?
- Are transportation service processes clearly defined?
- Are the services flexible enough to accommodate unique situations?

Medica offers these **lessons learned** from its focus on providing Disability-competent transportation services:

- Each member's situation is unique and each event is an individual experience. Therefore, processes must be able to meet wide-ranging needs and be flexible enough to adapt to unexpected situations.
- Use feedback such as member surveys and benefit exception inquiries for insights into individual member needs and the plan's transportation program.
- Transportation services work best when integrated with care coordination.

Additional Resources

Please visit the *Resources for Integrated Care* website (www.resourcesforintegratedcare.com) for the "Training in Disability-Competent Care and Supports" webinar series, which served as the basis for this brief and for other Disability-Competent Care-related resources including an interactive self-assessment tool.