



January 7, 2020

The Honorable Earl L. “Buddy” Carter  
2432 Rayburn House Office Building  
Washington, DC 20515

Re: January 8, 2020 Hearing on H.R. 3935 by the Subcommittee on Health of the House Committee on Energy and Commerce

Dear Representative Carter:

Established in 1980, Access Living is the Center for Independent Living for Metropolitan Chicago. We are a cross disability rights and services organization providing individualized, peer-based independent living supports, legal and advocacy services. As a provider representing thousands of Chicagoans with disabilities, we would like to thank you for sponsoring H.R. 3935, the "Protecting Patients Transportation to Care Act" and express our support.

As an organization whose mission is to ensure that Chicagoans with disabilities live fully-engaged and self-directed lives in their homes and communities, we are acutely aware of how important non-emergency medical transportation (NEMT) is to helping patients access the care they need. The overwhelming majority of the consumers we serve are low-income racial and ethnic minorities with a wide range of disabilities across the Chicago region. Without NEMT, these Chicagoans with disabilities would not be able to access critical health services, like dialysis, primary care, preventive care and care for substance use disorders. Therefore, we strongly support making NEMT a statutorily mandated Medicaid benefit.

Transportation options in general for people with disabilities are limited, inefficient, and often expensive, especially in suburban and rural areas. Even in urban centers like the city of Chicago, more options may exist, but they still fail to provide service that is on par with what is available to non-disabled people. Additionally, there exists a state of flux for mass transit, ADA paratransit, and other travel options in urban areas across the US due to the rapid growth of, and attendant instability created by, Transportation Network Companies (TNCs) and the on-demand services they provide. Since TNC service is almost always inaccessible to wheelchair users who cannot transfer from their mobility devices, and since explosive expansion in the TNC sector has begun to threaten the viability of lower ridership transit routes and the ADA paratransit coverage connected to those routes, options for people with disabilities are receding rather than expanding. For these reasons, NEMT is a crucial lifeline to improved health outcomes and quality of life for disabled people everywhere.

Non-emergency medical transportation is both a critical and cost-effective benefit. In a recent survey of NEMT recipients, 58 percent reported that they would not be able to make any medical appointments

without NEMT.<sup>1</sup> By helping patients access routine and preventive care, NEMT helps prevent avoidable medical emergencies and costly hospitalizations. More specifically, while NEMT provides transportation to 10 percent of, or about 7 million, Medicaid enrollees, it only constitutes 1 percent of Medicaid's total budget.<sup>2</sup> Recent data has also shown that NEMT has resulted in a return on investment for both wound care for diabetics and dialysis.<sup>3</sup> Additionally, one Florida study estimated that if just 1 percent of all medical transportation trips prevent a one-day stay in a hospital, the resulting return on investment would be 11:1.<sup>4</sup>

In recent years, both the benefits of NEMT as well as the consequences of not providing NEMT have been demonstrated across states. While providing NEMT has been shown to help patients stay healthy and states save money, as explained above, forgoing NEMT has been shown to be a barrier to receiving care and maintaining overall health.<sup>5</sup>

For all of these reasons, we support H.R. 3935 and thank you for your leadership on this issue. By codifying NEMT as a required Medicaid benefit, all Medicaid enrollees, including those that we serve, will be able to access this critical health care service that will help them lead healthy, productive lives.

Sincerely,

Angel Love Miles, PhD  
Healthcare/Home and Community Based Services Policy Analyst  
Access Living of Metropolitan Chicago

Adam Ballard  
Housing and Transportation Policy Analyst  
Access Living of Metropolitan Chicago

Cc: The Honorable Frank Pallone, Chair, House Committee on Energy and Commerce  
The Honorable Greg Walden, Ranking Member, House Committee on Energy and Commerce  
The Honorable Anna G. Eshoo, Chair, House Subcommittee on Health  
The Honorable Michael C. Burgess, Ranking Member, House Subcommittee on Health  
The Honorable Bobby Rush  
The Honorable Robin Kelly  
The Honorable John Shimkus

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<sup>1</sup> Medical Transportation Access Coalition, *The Value of Medicaid's Transportation Benefit – Results of a Return on Investment Study*, <https://mtacoalition.org/wp-content/uploads/2018/08/NEMT-ROI-Study-Results-One-Page.pdf> and <https://mtacoalition.org/wp-content/uploads/2018/07/NEMT-ROI-Methodology-Paper.pdf>

<sup>2</sup> Letter from the Congressional Black Caucus to Chairwoman Rosa L. DeLauro and Ranking Member Tom Cole of the House Committee on Appropriations, February 15, 2019

<sup>3</sup> Medical Transportation Access Coalition, *The Value of Medicaid's Transportation Benefit – Results of a Return on Investment Study*, <https://mtacoalition.org/wp-content/uploads/2018/08/NEMT-ROI-Study-Results-One-Page.pdf> and <https://mtacoalition.org/wp-content/uploads/2018/07/NEMT-ROI-Methodology-Paper.pdf>

<sup>4</sup> The Stephen Group, *Volume II: Recommendations to the Arkansas Health Reform Task Force Re: Health Care Reform/Medicaid Consulting Services*, October 2015, <https://www.stephengroupinc.com/images/engagements/Final-Report-Volume-II.pdf>

<sup>5</sup> The Lewin Group, *Indiana HIP 2.0: Evaluation of Non-Emergency Medical Transportation (NEMT) Waiver*, March 11, 2016, <https://www.in.gov/fssa/hip/files/Indiana%20HIP%202.0%20NEMT%20Report%20Updated%203-11-16.pdf>