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Bridge Initiative for Science and Technology Policy, Leadership, and Communications

Science and Technology Note

Medical Transportation Strategies in West Virginia April 2024

This Science and Technology Note identifies and compares non-emergent healthcare transportation strategies used in and around West Virginia and defines models to expand availability.

Access to Healthcare in Rural West Virginia

In 2018, West Virginians ranked first in the nation for the prevalence of poor physical and mental health. This is likely due to a lack of available healthcare. A study by

Sidecar Health ranked West Virginia as the state with the most healthcare deserts, with 84.66% of the population living in counties designated as primary care deserts, with no providers within a five-mile radius. The same study indicated that 55% of the population in these healthcare deserts do not have broadband connections, limiting the efficacy of telehealth programs. Additionally, 17.9% of West Virginians fall below the poverty line which limits their ability to afford a vehicle and/or fuel to get to appointments that are far away. Therefore, there is a need to increase accessibility to healthcare facilities. West Virginia is 46.68% rural, and research has shown that citizens in rural locations live an average of 10.5 miles from the nearest hospital compared to 5.6 miles in suburban locations. There is an increasing need for transportation to healthcare facilities, especially as the population ages. West Virginia is third in the nation for the percentage of residents over the age of 65. Elderly residents are more likely to have chronic conditions that require more frequent visits to healthcare facilities and



Source: Rural Health Information Hub

Research Highlights:

- West Virginia is a primarily rural state with an aging population that requires increased medical care.A number of these individuals live in healthcare deserts or lack reliable transportation to receive the necessary healthcare.
- West Virginia currently ranks first in the nation for poor physical and mental health. Access to healthcare, particularly in underserved communities, could improve the health of residents and of the community.
- There are a variety of transportation models utilized by rural communities throughout Appalachia.The success of these programs depends on the community

also less likely to possess a driver's license.

The State Rural Health Plan

The State Rural Health Plan was established in 2018 to address rural health disparities in West Virginia. One of the specific objectives of this plan is to improve access to healthcare. Through the promotion of stronger linkages between social and healthcare institutions, rearranging resources for optimal access to care, coordinatingcare between providers, developing solutions in order to adopttelehealth technology, and promoting policy to increase funding.

Benefits of expanding healthcare transportation

Access to healthcare can improve the quality of life for the individual through disease prevention, early detection, and intervention, resulting in improved health outcomes, increased life expectancy, and decreased

overall healthcare costs. Community benefits of improved healthcare access are increased economic productivity by fostering a healthier workforce, decreased economic burden associated with treating preventable diseases, and increased healthcare-related employment.

Models of Medical Transportation Throughout Appalachia

Transportation	Transportation	Geographic
Model Category	Mode	Coverage
Mobile Health Clinic	The Health Wagon (Medical, Dental, Vision)	Southwest VA
	Remote Area Medical (Medical, Dental, Vision)	Popup Clinics in TN, SC, VA
	Premiere Health Mobile Clinic (Medical)	Southwest OH
	Cabin Creek Health (Medical)	Kanawha County, WV
Public Transportation	Mountain Area Transportation Ser- vices (Flex-Route)	Asheville, NC
	Kentucky River Foothills Development Council (Fixed Route)	Eastern KY
	Country Roads Transit (Flex-Route)	Randolph and Upshur Counties, WV
Volunteer	Mercy Health	OH and KY
Transportation	Volunteer Match	Kanawha and Putnam Counties, WV
Rideshare	Lyft	Certain cities in WV (Charleston, Huntington, Mar- tinsburg, Morgan- town, Parkersburg, Vienna)
	Uber health	Certain Cities in WV (Bridgeport, Clarks- burg, Nutter Fort, Fairmont, Westover, Gransville, Morgantown, Star Citv)

Selected Rural Transportation Program Models

	Description
Program	Description
Public Transportation	Fixed-route buses are typically the main transit providers in rural areas. Flex-route transportation systems, where buses leave their regular routes on request, may aid to expand these services. However, rural communities may lack sufficient resources to expand public transportation
Volunteer Model	Volunteers from the communi- ty,often driving their own vehi- cles,coordinate with passenger requests to provide door-to- door services at a specific time.Programs may reimburse drivers for the cost of mileage and gas.
Voucher Model	Eligible riders exchange tickets for a ride from a participating transportation provider, either public transportation or ridesharing. Voucher programs allow the riders to choose transit services that meet their needs and preferences.
Ridesharing Model	Demand-response transportation that involves vehicle sharing and using tech- nology to arrange shared rides on short notice. These programs help fill gaps in trans- portation for people who do not have access to other modesof transportation in the evenings,on weekends, and on holidays.
Mobile Clinics	Customized motor vehicles that travel to different communities to provide healthcare. These clinics are designed to provide non-emergent services such as bloodwork, physical exams, and first aid. Some mobile clinics are able to provide additionals- ervices such as routine dental- care, and vision screepings

Source: <u>Transportation Research Board</u>

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