

Non-Emergency Medical Transportation for Veterans

This policy brief by the Institute for Public Administration was prepared for the Delaware Transit Corporation, a division of the Delaware Department of Transportation that operates DART First State Transit. The brief was prepared as part of the research process to update Delaware's 2020 Coordinated Public Transit–Human Services Transportation Plan.

INTRODUCTION

This brief discusses the specific transportation needs of Delaware veterans, who comprise approximately ten percent of Delaware's total population.¹ Healthcare and wellness treatment options for veterans are often limited and can require considerable travel time. For example, there is only one full-service Veterans Health Administration Medica Center Medical Center in Delaware, which is located in Wilmington. Additionally, there are only two Veterans Affairs (VA) community-based outpatient clinics (CBOCs) that are located in Dover and Georgetown and two Vet Centers (that provide community-based counseling, outreach, and referral services to Vets who served in combat zones), which are located in Georgetown and Wilmington.² The Wilmington Medical Center provides a variety of comprehensive health services, while CBOCs—as supplemental, regional facilities—offer a more limited set of health and wellness services. Veterans may visit more than one type of facility, depending upon their specific medical needs. Approximately 27,070 veterans in Delaware are

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enrolled in the VA healthcare system. Additionally, 13,235 veterans in Delaware are receiving disability compensation, and many are served by these facilities.³ Due to geographic and transportation limitations, however, veterans can experience significant challenges in accessing appropriate medical services.

PROFILE OF VETERANS IN DELAWARE

Like the general public, veterans living in Delaware are diverse in terms of age, income level, and educational attainment. In Delaware, for example, there are 51,000 veterans who are 55 years old or older and 25,000 veterans who are 70 years old or older.⁴ These demographics are detailed in *Non-Emergency Medical Transportation and Delaware's Aging Population*, which also discusses some of the additional challenges faced by the state's older adults. Most of Delaware's veterans served during the Vietnam and the Gulf Wars. While the population of veterans who served during WWII and the Korean and Vietnam Wars is projected to decrease over time, the number of Gulf War veterans is projected to steadily increase until 2030.

Figure 1 demonstrates the distribution of low-income veterans living in Delaware. There are pockets of veterans living in poverty throughout the state, and they are located in both rural and urban areas. As described in IPA's *Access to Transportation as a Social Determinant of Health* policy brief, access to non-emergency medical transportation is an important social determinant of health, particularly for low-income individuals.

VETERANS' HEALTH NEEDS

Veterans typically have many healthcare challenges, including disproportionately high rates of mental health and substance abuse disorders, post-traumatic stress, and traumatic brain injury.⁵ If left untreated, these challenges can result in long-term consequences, including hospitalization and differential mortality rates. Older adults and unhealthy veteran populations are particularly impacted by delays in medical care.⁶

TRANSPORTATION OPTIONS FOR VETERANS

The most common transportation options for traveling to and from VA health facilities are outlined below. Benefits and limitations for each option are included in the descriptions.

Personal Vehicle

An individual with access to a personal vehicle can drive to and from a VA facility. With appropriate documentation, reimbursement is provided by the VA. This option requires the ability to drive as well as access to a reliable personal vehicle—or availability of someone who is able and willing to drive.

Public Transit and Paratransit

Discounted public transit services are available to eligible veterans. Veterans with disabilities may qualify for paratransit services. However, access to public transit and paratransit services are more challenging for individuals living in rural areas, who might experience first- and last-mile barriers. Additionally, people who are traveling to and from a facility located in another county may be required to navigate multiple routes, transfers, and forms of transit.

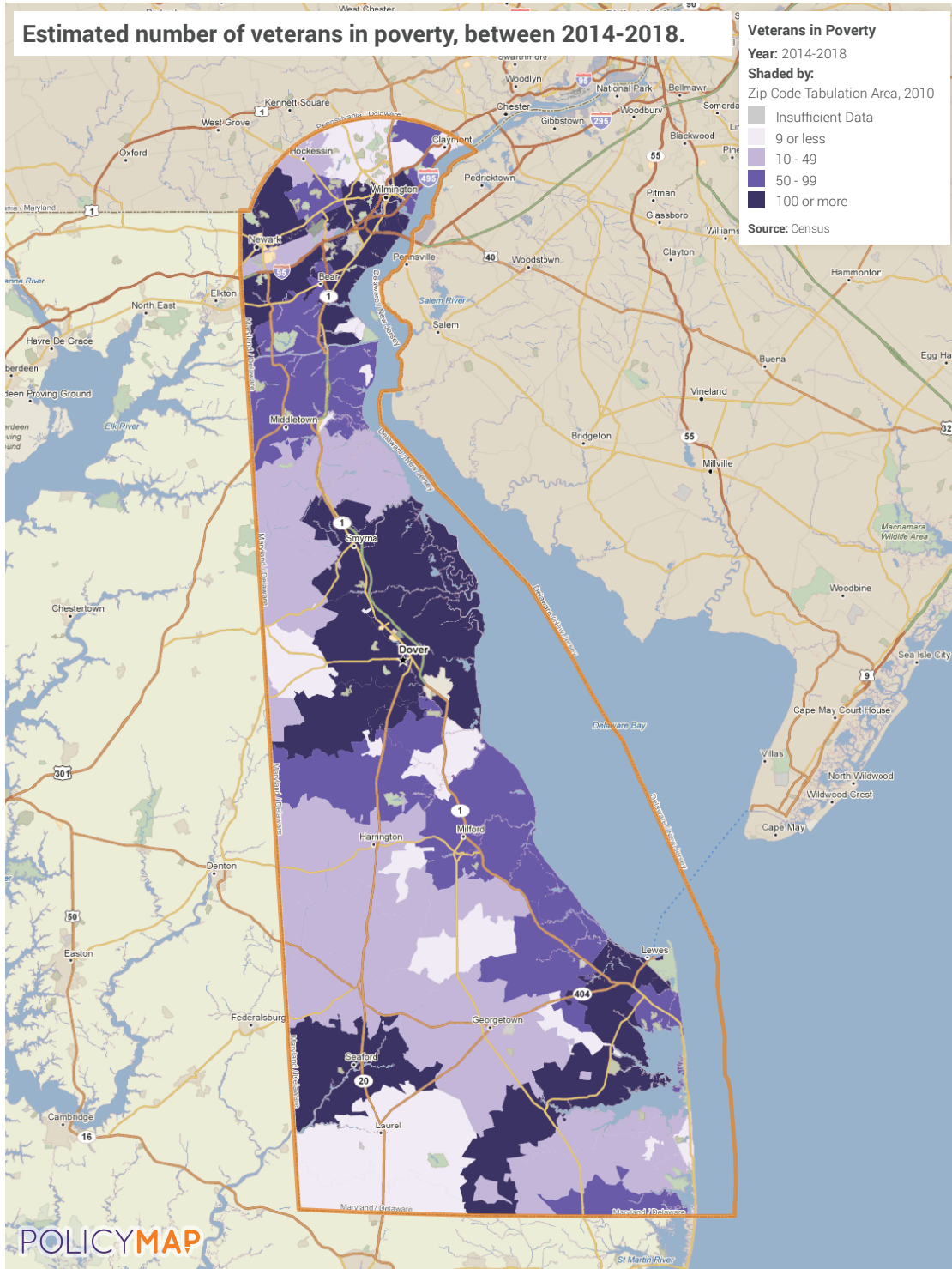
Transportation Network Companies and Taxis

Transportation network companies (TNCs) are companies that use innovative technologies to create a centralized scheduling process for accessing local transportation options. IPA's policy brief, *Transportation Network Companies, Transportation Brokerage Companies, and Non-Emergency Medical Transportation*, discusses TNCs and their role in addressing non-emergency medical transportation gaps.

Transportation Organizations

Several organizations that serve veterans provide transportation to VA facilities. Transportation to the Wilmington VA Center is provided by the Veterans

Figure 1. Distribution of Low-Income Delaware Veterans, 2014–2018.



Source: Source: U.S. Census, Policymap

Transportation Service (VTS) using a multi-passenger van. The Disabled American Veterans (DAV) Delaware chapter/units also help coordinate veterans' travel throughout the state. Currently, no organization provides statewide door-to-door transportation to VA facilities for veterans.

CONCLUSION

Collectively, veterans face challenging and unique healthcare needs. Due to limited healthcare facilities and transportation options, veterans in Delaware often experience significant barriers to non-emergency medical transportation. Delaware organizations serving veterans and public- and private-sector transit providers might consider conducting research and strategic planning on the emerging medical and mobility needs of this diverse and aging population. New and innovative opportunities that provide the state's veterans with better access to both healthcare and transportation services can help to maintain and improve their quality of life while mitigating unnecessary hospitalizations and longer-term medical challenges.

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END NOTES

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