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TRB Policy Session on Transportation and Public  
Health

January 13, 2016

*(Ms. McMillan spoke to the issues of social equity and access to transportation. She was asked to speak at the last moment because of an illness to a scheduled speaker. Ms. McMillan made her presentation based on personal experience. In addition, she highlighted information that was included in a session she was the presiding officer for earlier in the day. The slides used were produced by Flora M. Castillo, CHIE, Vice President Community & Strategic Engagement, UnitedHealthcare Community & State; and Henrika Buchanan-Smith, Associate Administrator, Program Management, Federal Transit Administration.)*

# Social Determinants of Health

**Conditions of poverty cause more than 70% of avoidable mortality in the United States.**

**Social and economic factors account for 40% of the factors influencing length of life and quality of life.**

**4 out of 5 physicians think patients unmet social needs lead to worse health outcomes and are as important to address as medical conditions\***



Housing



Food



Transportation



Financial Assistance & Education



Training



Jobs

\* Robert Wood Johnson Foundation, University of Wisconsin Population Health Institute School of Medicine and Public Health.

# Transportation Impact on Health

- **Primary Care** – Rides must be scheduled 72 hour advanced; as a result many high risk members with acute needs go to ER for non-emergent care
- **Healthy food** – ~23.5M Americans lack access to a supermarket within 1 mile of their home, and in ~20% of rural counties, the majority of residents live more than 10 miles from a supermarket
- **Stable employment** – More than ~700K Americans do not have a car and lack access to public transportation, making them less likely to find and keep jobs
- **Job interviews** – A survey of 800 homeless individuals found that ~21% had missed a job interview due to difficulties with transportation
- **Other social support** – Lack of transportation limits access to other critical social services, such as government-funded benefits, day care, shelters, etc.



*Perpetuates the cycle of poverty, and compounds the cost to care for the member*

# Rides to Wellness

## Vision and Goals

**Through  
rides  
people and  
community  
health  
thrive**

- Improve healthcare access
- Reduce healthcare costs
- Leverage public transportation assets and services

# Compelling Need

Almost 80% of healthcare costs (\$2.1T) are associated with chronic conditions. Access to screenings for chronic conditions can make a difference. The Affordable Care Act mandates 15 different preventive screens.

18% of patients discharged from the hospital are readmitted within 30 days, 1/3 within 90 days. Medicare spends \$15B annually for hospital readmissions.

Missed appointments are a major issue for healthcare: reduced revenues, wasted staff time, create artificial access problems, and negatively affect patient care.

Medical appointments occur during off-peak hours when there is excess transit capacity and underutilized vehicles.

# Benefits of Health and Transportation Initiative: Win -Win



Health equity resulting from reduced health disparities

Better health access resulting in fewer missed appointments, reduced healthcare costs for providers and improved health for people.

New Public Transit riders and partnerships with Healthcare providers and insurers

Flora M. Castillo, CHIE  
Vice President Community & Strategic Engagement  
UnitedHealthcare Community & State



# FTA

FEDERAL TRANSIT ADMINISTRATION



***Rides to Wellness***  
**Building**  
**Ladders of Opportunity &**  
**Access to Care**  
**through**  
**Public Transit and Healthcare**  
**Partnerships**



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