Assessing Transportation Impediments to Medicaid Members in the State of Iowa

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ABSTRACT

Medicaid, an entitlement health insurance program funded jointly by states and the federal government, is one of the largest funding resources for transportation to the elderly, the financially constrained (low income), the disabled, and children across the country. To keep these subgroups of the population mobile and efficiently meet their accessibility needs is a challenge for Medicaid. It is a challenge that is increasingly difficult because of the profound demographic change in the United States—age is increasing and incomes are decreasing. These trends have been forecasted to continue for much of the first half of the twenty-first century.

The ensuing question is whether the available transportation services are adequate for Medicaid members in the state of Iowa. Iowa has approximately 250,000 individuals who receive coverage through the Medicaid program. Therefore, the goal of this study is to identify the current gaps in transportation services available to Medicaid consumers based on the information collected from Medicaid consumers, Medicaid workers, and transportation providers. To capture this, several surveys (including mail-out/mail-back surveys, Internet-based surveys, and telephone interviews) have been completed that capture transportation demand and supply within the state of Iowa.

Data analysis is done at various levels. Medicaid members are divided into three subpopulations: adults with disabilities, the elderly (65 years and older), and remaining adult members. In addition, the subpopulations are further identified by geographical area (urban area with fixed-route transit, urban area without fixed-route transit, and rural area without fixed-route transit). The initial descriptive analysis shows that transportation services are not a major problem for most Medicaid members. Nearly 89% of all members reported they have not missed a desired activity or medical service due to lack of transportation. As a whole, those who rely on fixed-route transportation report that it is almost always available, and those who do not drive themselves arrange rides with family and friends. However, the results are not uniform across the study groups. People with disabilities miss more medical services and desired activities than other Medicaid members. Strikingly, people who live within urban areas with access to fixed-route transportation missed the most medical visits and other activities.
Logistic regression models are used to assess various transportation and socio-economic factors related to utilization of Medicaid transportation services. The transportation factors include car ownership or its immediate availability, availability of transit facilities, travel time and cost, weather conditions, understanding of Medicaid transportation resources, and reimbursement eligibility. The socio-economic factors include sex, age, and employment conditions. This multivariate analysis helps in understanding how various transportation barriers as a whole contribute to the problem of missing transportation trips, not only in various geographical areas, but also among the above-stated subgroups. Results of this analysis identify the groups with the greatest transportation needs.

**Key words:** fixed-route transportation—logistic regression models