



## POLICY OPTIONS IN BRIEF

**Option:** Direct DMAS to amend contracts with the MCOs to adopt performance metrics for Medicaid NEMT brokers consistent with the FFS NEMT program. (Option 1, page 16)

**Option:** Direct DMAS to develop guidance to the MCOs regarding NEMT mileage pre-authorization requirements. (Option 2, page 17)

**Option:** Increase the portion of the CMTF dedicated to supporting human service transportation programs to 0.0045%. (Option 3, page 23)

**Option:** Add \$500,000 per year to the CMTF for DRPT to provide technical assistance on program financial management to Section 5310 Program grantees. (Option 4, page 24)

**Option:** Provide up to \$8 million per year for DRPT to establish a grant program for mobility management services and regional transportation hubs. (Option 5, page 26)

**Option:** Provide up to \$5 million per year for DRPT to establish a grant program for microtransit services in rural areas of Virginia. (Option 6, page 29)

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# Strategies to Address Transportation Related Barriers to Health Care

## FINDINGS IN BRIEF

### **The Virginia NEMT Program has improved in recent years, but data collection could be enhanced**

The NEMT program has improved on-time performance and unfilled trips. DMAS collects performance data for the FFS NEMT program on several metrics, however they do not specify performance metrics for MCOs to include in contracts with transportation brokers. As a result, Virginia's Medicaid MCOs are tracking and collecting performance metric data differently.

### **Fixed funding hinders expansion of transportation services for Section 5310 program recipients**

Rising capital costs and costs of program operations without an increase in funding makes it impossible to expand services. The fixed allocation formula for Section 5310 Program funds limits the funding available for transportation programs in small urban and rural areas of the Commonwealth.

### **Transportation services in Virginia are siloed, limiting access and making coordination across programs difficult**

The complexity of the siloed transportation system makes it difficult for patients to find appropriate services and frustrated when they have to interpret different eligibility requirements, service areas, and other service guidelines on their own. A solution to this issue is to increase agency level and individual level coordination of transportation services.

### **Rural areas of Virginia need additional transportation options and resources**

National estimates indicate that rural residents live an average of 10.5 miles from the nearest hospital, compared to 4.4 miles in urban areas. When public transportation is available in rural areas, it may not serve the entire population. Microtransit could be a solution to increase transportation to health care in rural areas.

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