MEDICAL TRANSPORTATION ASSESSMENT REPORT

Health & Human Services of Faribault & Martin Counties

July 2025

Report prepared by NorthStar Data Partners, LLC

Addendum: Loss of Local Medical Transportation Services

September 2, 2025

In April 2025, results from the Medical Transportation Assessment were presented to Faribault and Martin Counties' Stronger Together Coalition, a group of community leaders focused on improving health in the bi-county area. This written report was published in July 2025.

At the end of August 2025, Health & Human Services of Faribault & Martin Counties learned that their local Nonemergency Medical Transportation (NEMT) provider, MN Para, would be closing its doors as of August 29, 2025. In this report, having a local NEMT provider was listed as a key strength of the medical transportation system. MN Para had strong relationships with other local providers serving residents. Together, MN Para worked with local long-term care staff and other providers to ensure many residents with mobility limitations were able to access medical appointments both in and out of the bi-county area.

Their sudden absence leaves a large gap in an already taxed medical transportation system, and it remains to be seen what services and supports will fill the gap.

Purpose of the Assessment

In Summer 2024, Health & Human Services of Faribault & Martin Counties launched a comprehensive assessment process to examine medical transportation needs and services within Faribault and Martin Counties. With recent changes to available medical services in the counties, Health & Human Services wanted to learn more about strengths and challenges with the existing medical transportation system. The assessment was funded by a grant from the Minnesota Department of Health to support local agencies meeting foundational public health responsibilities. Data collection began in Fall 2024 and was supported by graduate intern McKenna Matthews, a Martin County resident and Master of Public Health candidate attending South Dakota State University.

Assessment Research Questions

- What **medical transportation options are available** to residents in Faribault and Martin Counties? How do the options available **align with residents' need** for medical transportation?
- **Who** is accessing medical transportation in Faribault and Martin Counties? What are their **experiences** with medical transportation?
- How (if at all) does medical transportation availability **impact residents' medical care and/or health**? When residents need medical transportation but are unable to secure a ride, how do they get the care they need?
- Who is **NOT using medical transportation** but may benefit from the service? What prevents them from accessing medical transportation?
- What is **working well** with medical transportation in Faribault and Martin Counties?
- What are **current challenges** with medical transportation in Faribault and Martin Counties?

Defining Medical Transportation

Nonemergency Medical Transportation (NEMT) is a specific service available to elderly and disabled participants of Minnesota Health Care Programs, which is often informally known as “medical transportation.” NEMT is a Special Transportation Service (STS) governed by Minnesota Statute 174.29. NEMT providers require certification through the Minnesota Department of Transportation.

For this assessment, medical transportation is defined **more broadly** to include the transportation of any person who is going to receive medical care in a non-emergency situation. This includes visits for medical, dental, behavioral health care, vision and other health care needs. NEMT is one of several transportation options examined in this assessment.

Additionally, this assessment focuses primarily on populations in Faribault and Martin Counties that **face barriers to getting to health care appointments**. This includes residents that do not have reliable access to their own transportation or the transportation of a friend, family or caregiver.

Methodology

Data Sources

This assessment report compiles information gathered through resident and provider surveys, key informant interviews and a document review.

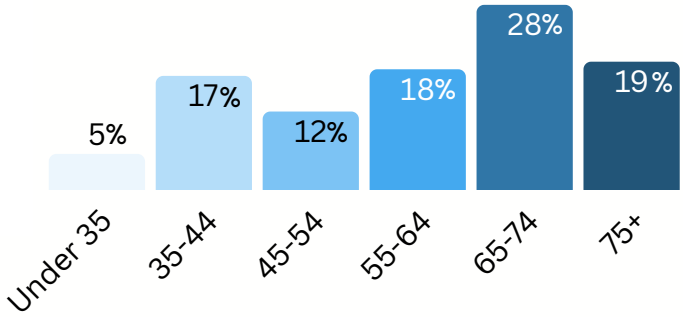
In Fall 2024 and Winter 2025, 101 residents completed a survey about their experiences with and opinions of medical transportation options within Faribault and Martin Counties. The target audience for the survey was residents that already use or may benefit from medical transportation, including residents that are elderly, those with mobility limitations, and those without reliable transportation or a driver's license. Surveys were distributed by county case managers, food shelves, medical providers, and by local leaders in Faribault and Martin Counties' Stronger Together Coalition. Surveys were available in English and Spanish, in paper and online formats. As a thank you for their time taking the survey, residents were able to designate a $1 donation to a local food shelf of their choice.

Resident Survey Reach

Forty-six Faribault County residents and 55 Martin County residents completed the survey. Residents surveyed come from all parts of the counties. The map below shows towns with one or more survey respondents. Residents aged 65 to 74 were the largest group of survey respondents.

Survey Respondents by Geography

Survey Respondents by Age Group



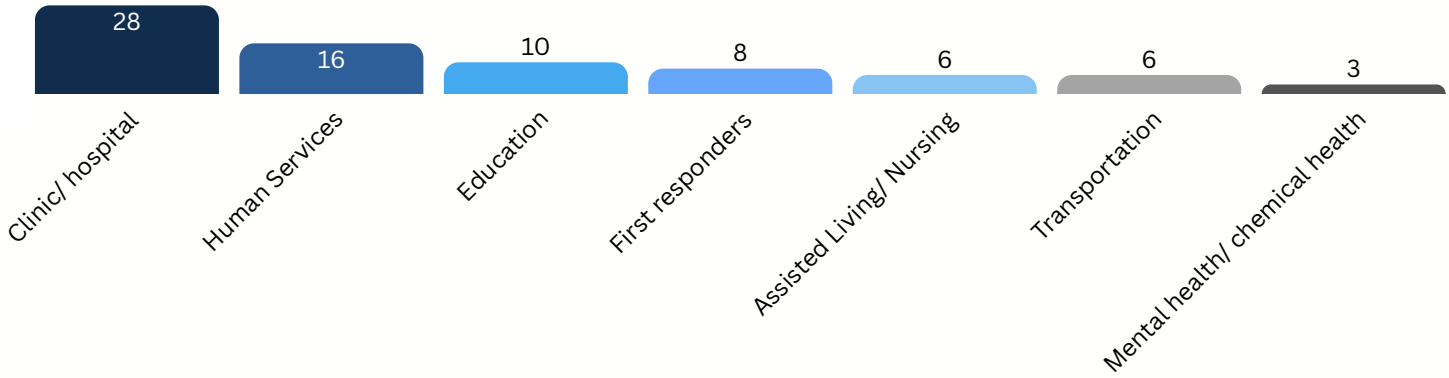
Residents that completed the survey were asked if they were interested in sharing more information about their experiences through a key informant interview. Ten residents volunteered to participate in a phone interview to share more about their experiences and needs related to medical transportation. As a thank you for their time, residents were offered a $25 stipend for completing the interview.

Methodology

Data Sources

In Fall 2024 and Winter 2025, 93 local providers completed a survey about medical transportation options within Faribault and Martin Counties. The target audience for the survey was providers who work with residents that already use or may benefit from medical transportation. This includes transportation providers, medical professionals, county staff, first responders and long-term care providers. Surveys were primarily distributed by local leaders in Faribault and Martin Counties' Stronger Together Coalition. The survey was available in English in an online format. As a thank you for their time taking the survey, providers were able to designate a $1 donation to a local food shelf of their choice.

Provider Survey Responses by Sector



Providers that completed the survey were asked if they were interested in sharing more information about their experiences through a key informant interview. Additional providers were nominated to participate in key informant interviews by members of the Stronger Together Coalition. In total, seventeen providers participated in a phone or video interview to share more about their observations and experiences serving residents with medical transportation needs. Most providers served both Faribault and Martin Counties, although six providers exclusively serve Martin County residents and two providers exclusively serve Faribault County residents.

This report also draws on a review of Minnesota Statutes related to Special Transportation Services and a review of publicly available materials published by UCare and Blue Plus managed care plans.

Data Analysis Methods

An external evaluator from NorthStar Data Partners analyzed quantitative data using descriptive statistics using Microsoft Excel and SPSS software. The evaluator also analyzed qualitative data from interviews and surveys using content and thematic analysis methodology.

Available Medical Transportation Services in Faribault & Martin Counties

A variety of medical transportation options exist within Faribault & Martin Counties that vary widely in availability, accessibility for mobility limitations and cost. The following services are the primary options used for medical transportation in Faribault and Martin Counties:

Nonemergency Medical Transportation Services are provided locally by MN Para, based in Truman. MN Para operates during standard business hours, and their entire fleet is wheelchair accessible. Drivers provide door-to-door service, helping residents inside the home or health care facility when needed. MN Para accepts payments from Medical Assistance, private payers, and the managed care plans available in Faribault and Martin Counties, Blue Plus and UCare. While MN Para tries to accommodate rides whenever they can, demand for services exceeds their availability. Residents that provide at least two weeks notice to schedule rides have the best chance of securing their ride.

Special Transportation Services (STS) providers outside of the bi-county area also provide some **Nonemergency Medical Transportation Services** for Faribault and Martin County residents. Johwar Transportation and Blue Earth Taxi, both based in Mankato, occasionally provide rides to Faribault and Martin County residents with medical appointments in Mankato. Sunflower Transportation, based in Rochester, provides rides on occasion to Faribault and Martin County residents accessing services in Rochester.

CREST, based in Martin County, and Interfaith Caregivers, based in Faribault County, offer **volunteer driver programs** for residents aged 60 and over. Eligible residents complete an intake process with the volunteer driver program and then call the main office to request a ride as needed. After rides are requested, each program connects with their network of volunteers to try to secure a ride for the resident. Volunteers reported that last-minute ride requests and rides outside of the county can be harder to accommodate. Volunteers drive their own cars, none of which are fully wheelchair accessible. However, volunteers provide rides to many residents that have mobility limitations that are able to transfer in and out of a car. Volunteer drivers provide door-to-door service when needed. Residents may request their volunteer driver accompany them to medical appointments to take notes or be another set of ears. There is no charge to residents to access volunteer driver rides, although donations to the driver program are accepted.

Available Medical Transportation Services in Faribault & Martin Counties

Prairie Lakes Transit is the **public transportation provider** in Faribault & Martin Counties. Prairie Lakes serves residents within the two county borders, and operates between 6:00 am to 6:00 pm on weekdays. Fairmont has additional operating hours between 6:00 pm and 10:00 pm on weekdays, and 8:00 am to 10:00 pm on Saturdays. Blue Earth has additional operating hours between 8:00 am and 6:00 pm on Saturdays. Prairie Lakes has several regular deviated routes, meaning drivers will deviate up to one quarter of a mile off the regular route to pick up and drop off riders who have called to reserve rides. The Prairie Lakes Transit fleet is wheelchair accessible, but drivers are prohibited from bringing riders inside their destination due to their licensure restrictions. If a person with the disability needs an aide or attendant to ride the bus, the individual pays for the bus fare and their aide or attendant assisting them rides for free. Rides are reasonably priced at $2 for a deviated route fare and $4 for a demand-response fare (based on passenger request rather than a fixed route or schedule). Residents can buy a package of ride tokens for a discounted price.

Private transportation companies, such as Royalty Rides and FAST RideShare LLC, both based in Martin County, offer on-demand transportation options for residents, which are at times used for medical transportation. Royalty Rides and FAST RideShare LLC accept private payments and hospitals have hired these companies to bring patients home after they are discharged from the emergency department. They do not offer wheelchair accessible vehicles. However, much like the volunteer driver program, they are often able to transport individuals with mobility limitations that are able to transfer in and out of a car.

Residents using Medical Assistance are eligible for **mileage reimbursement** if they use their own vehicle or the vehicle of a loved one for medical transportation. The mileage reimbursement request must be preapproved by the county prior to the medical appointment and can be used for appointments within the counties and appointments outside of the counties. Residents must keep track of their mileage used to attend the appointment and submit the request to the county for reimbursement using the county form. Only loaded miles are reimbursed. This means that mileage is only paid when the Medical Assistance member is in the car. If a resident traveled from Blue Earth to Mankato and back for a doctor's appointment, they would be eligible for reimbursement for all of the miles. If a family member came from Mankato to Blue Earth to take their loved one to a doctor's appointment in Blue Earth, they would only be reimbursed for the miles from the resident's home to the appointment and back.

Securing Medical Transportation Rides

The process for securing a medical transportation varies depending on the service used.

Residents that use **Medical Assistance that receive mileage reimbursement** reach out to county staff to obtain a mileage voucher prior to their appointment. With each appointment, the individual submits details of their medical appointment. To access primary care 30 miles or more from the resident's home and specialty care 60 miles or more from the resident's home, the resident must receive a signed form from their medical provider stating that the medical care is being provided by the geographically closest health care provider to meet the residents' medical needs. After the appointment, county staff verify Medical Assistance eligibility before processing mileage reimbursement.

Residents that use **public transportation** access designated bus stops or call to schedule a ride outside of the designated routes. After a medical appointment, riders call dispatch for their pick up ride.

Residents that access volunteer driver services call the **volunteer driver program** and share details about their appointment date, time and location. Volunteer driver coordinators disseminate the request to their volunteer driver networks in attempt to match the patient with a driver. The more advanced notice the patient gives, the better the chance for securing a ride.

Nonemergency Medical Transportation (NEMT) Services are typically funded through public health plans that serve seniors and residents with disabilities. The process for reserving a ride varies based on the residents' health plan. Public plans available in Faribault and Martin Counties include Medical Assistance ("straight MA") or the managed care plans UCare and Blue Plus. Each plan has different authorization and reservation procedures. Residents using Medical Assistance can use any certified NEMT provider, but they must reserve the ride themselves. Rides paid through UCare and Blue Plus must be pre-authorized. Residents call each plans' designated phone number to authorize the ride to their medical appointment, and the plans call transportation providers to try to secure a ride.

Providers reported that many residents experience challenges navigating the transportation reservation systems. It can take upwards of an hour to request a medical transportation reservation via phone using the health plans. Many residents that access these services are elderly, some of whom have hearing limitations which impact their ability to navigate this system. A provider also shared that vision limitations make it difficult for residents to read the phone number to call for service. For residents that live in long-term care, staff often assist residents in making these reservations.

Securing Medical Transportation Rides

Because NEMT services are in such high demand, staff have the best chance of securing rides for patients with several weeks' notice. However, even when residents have appointments scheduled months in advance, they have to wait for their plan's authorization window to open to officially reserve their medical ride. Both UCare and Blue Plus require pre-authorizations for medical transportation services. UCare requires a two-business-day approval, with the ability to schedule up to 30 days in advance on a rolling basis. If a resident is discharged from the emergency room on a Friday with a follow up appointment scheduled for the following Monday, there is not enough time to secure the ride pre-approval required by the plan.

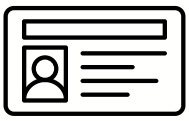
Blue Plus prefers a two-business-day approval, but is more likely to provide flexibility for last-minute transportation requests. However, Blue Plus opens up scheduling for one month at a time a few days before the end of a month. For appointments that land at the beginning of a calendar month, all NEMT slots are usually booked up by the time the authorization window opens. Long-term care staff use a workaround to call the NEMT provider directly and ask them to reserve a spot. Then, when the Blue Plus authorization window opens, long-term care staff call the plan to reserve a ride. At times, it takes staff an hour on the phone to complete this step of the process. If appointments change on the clinic end, staff start the process completely anew.

Residents that use Medical Assistance ("straight MA") can use any licensed, approved vendor for medical transportation services without preapproval. Many residents transition from straight MA to a managed care plan, UCare or Blue Plus, which do require preapprovals. When residents transition from straight MA to a managed care plan, this transition occurs on the first of the month. This presents a challenge when residents have medical appointments and medical transportation scheduled for the beginning of the month they transition. Even if a resident booked their NEMT ride months in advance while they were on straight MA and didn't need preauthorization when it was booked, the moment they transition plans, residents are bound by the preauthorization requirements of their new plan. The managed care plan requires two business days pre-authorization for all medical rides. For new enrollees, it is impossible to provide that two day notice for rides scheduled for the first day of the month. Therefore, their medical ride would not be reimbursed to the transportation provider. NEMT providers shared that they cannot afford to provide those rides uncompensated so they have to cancel the rides for residents.

Medical Transportation Ridership in Faribault & Martin Counties

Survey Respondent Driving Profile

Just over half of medical transportation survey respondents (53%) can drive or live with someone who can drive, but only 37% of respondents have a vehicle in working condition. Survey respondents had lower incomes than average in the county. Many residents are retired or unable to work because of a disability. About a third of residents always need medical transportation to get to medical appointments. Another 43% sometimes need this service to get to medical appointments. One interviewee shared that their vehicle is not always in working condition, which is why they sometimes need medical transportation. Others need medical transportation only for out-of-county appointments.



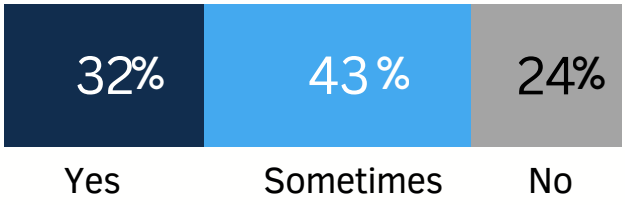
53%

can drive or live with someone who can

37%

have a vehicle in working condition

Is medical transportation the only way for you to get to medical appointments?



Source: Faribault & Martin Counties Medical Transportation Resident Survey, 2024-25.

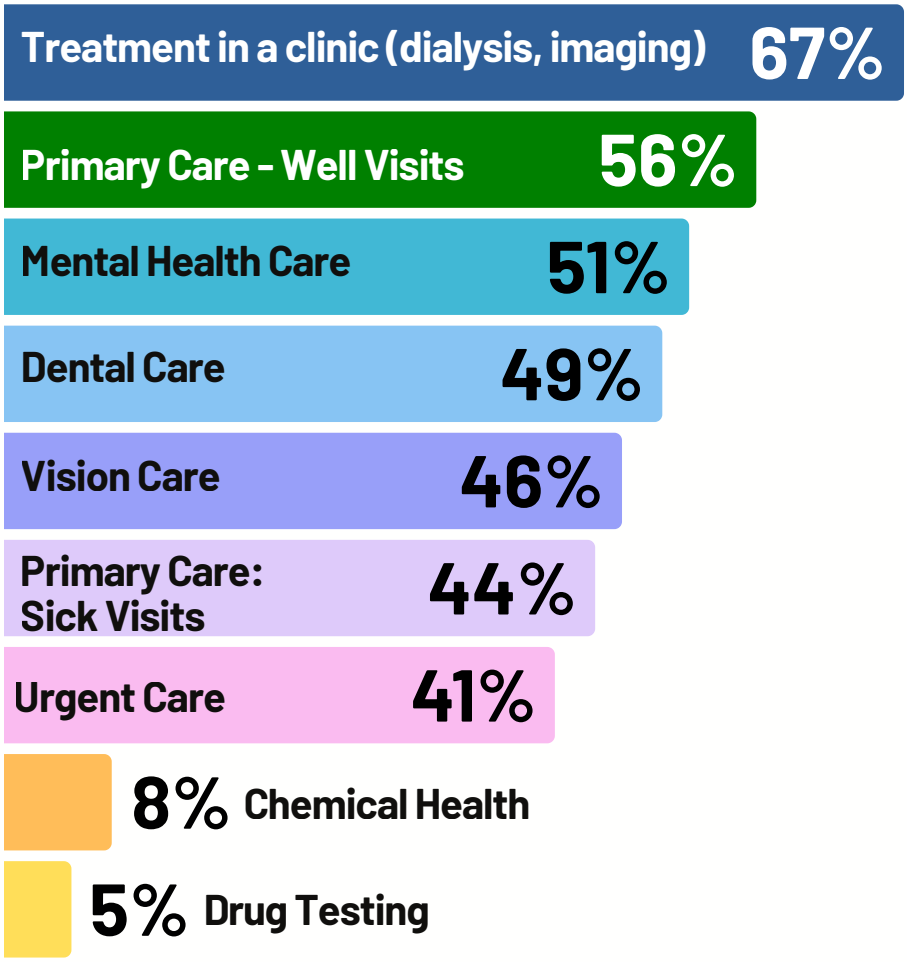
Needed Medical Transportation by Location of Service

Over half of residents surveyed need medical transportation for medical appointments in their own town (59%), or out of town but within the county limits (56%). Nearly three-quarters of residents surveyed (74%) need medical transportation for out-of-county appointments.

Medical Transportation Ridership in Faribault & Martin Counties

Needed Medical Transportation by Type of Care

When asked what types of appointments were needed when accessing medical transportation, the most common need was treatment in a clinical setting such as dialysis or imaging. Residents use medical transportation to access a wide range of medical services.

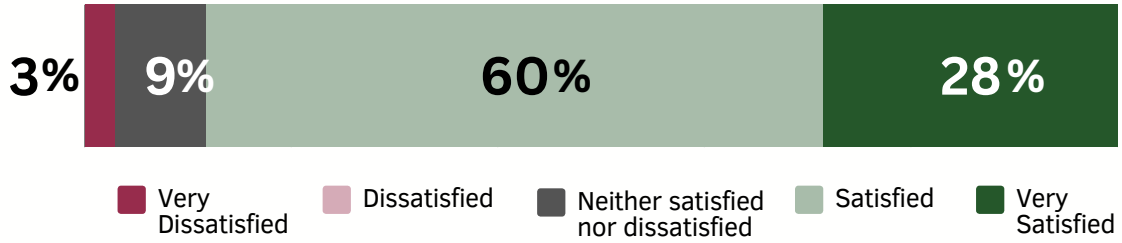


Source: Faribault & Martin Counties Medical Transportation Resident Survey, 2024-25.

Riders' Experiences with Medical Transportation

Residents are generally satisfied with the medical transportation they use.

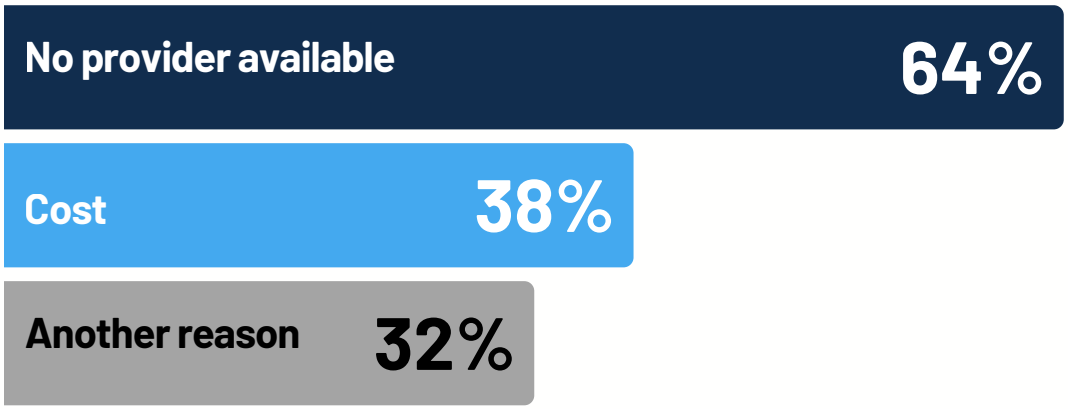
When asked about their levels of satisfaction or dissatisfaction with medical transportation used in the past year, most residents expressed satisfaction:



Source: Faribault & Martin Counties Medical Transportation Resident Survey, 2024-25.

However, most survey respondents have been unable to access needed medical transportation at least once in the previous year.

They shared the following reasons:



Source: Faribault & Martin Counties Medical Transportation Resident Survey, 2024-25.

Other reasons residents were not able to access medical transportation include lack of service on weekends and evenings, all providers were already booked, long wait times after the appointment and before getting picked up, not knowing how to set up a reservation, and not wanting to use medical transportation during inclement weather.

Medical Transportation Service Gaps

Resident Interview Findings

Residents that need medical transportation often receive care from multiple health care providers. Most interviewees accessed at least some of their care outside of their county of residence, especially specialty care such as neurology, cardiology, dermatology, mental health services and diagnostic testing. Residents that receive **services out of county experience reported more transportation challenges** than those served within county borders. However, residents reported the greatest need for medical transportation for out-of-county appointments.

Residents use a variety of formal and informal networks to secure rides to medical appointments. Some interviewees shared that they have family, friends and neighbors help them get to medical appointments. Other interviewees reported that outside of formal medical transportation providers, there is no one to bring them to medical appointments. Yet, available medical transportation options do not always meet the needs of residents. Residents shared several barriers to using medical transportation services.

In addition to wait times to see their medical care provider once they arrive on site, residents have experienced long waits for their ride back home after their appointment has ended. Multiple interviewees mentioned they can't leave their **pet** for the extended periods needed to access medical transportation services. Another resident shared that because they do not have a cell phone, they cannot call for their ride home and they see this as a barrier to accessing medical transportation services.

Some residents shared bad experiences with transportation that impact how they view their transportation options today. One resident noted, "I don't take medical transportation [anymore] because it's not reliable." Another resident shared bad experience in the past with drivers, including the driver bringing a friend along on the ride. This resident shared that they feel very vulnerable as they are "in the vehicle alone with [the driver] sometimes for hours and nobody has looked into these drivers' backgrounds." If transportation services change or improve, many residents will not know about it.

A particular service gap noted by residents was coverage for weekend, evening care and on demand care. Sobriety support groups are often held after business hours and while residents can sometimes get to the groups, there is no ride home. When residents need to be seen for a rapid onset illness or an injury that doesn't require emergency room care, they often cannot find appropriate medical transportation options with such short notice. One resident shared that a ride within 24 hour's notice is "impossible to book; [you] always have to book ride service days out."

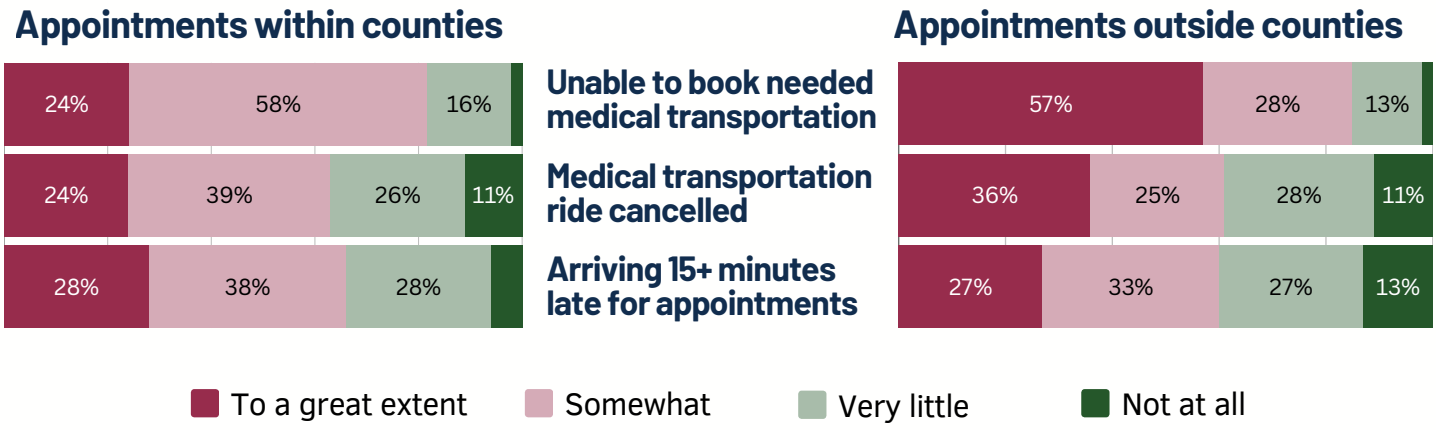
Impacts of Medical Transportation Service Gaps

Without medical transportation, many residents are unable to obtain timely medical care.

When unable to secure a ride, some residents use telehealth services and others forego or delay needed care. While some interviewees prefer not to use telehealth services, others that are open to telehealth reported that a lack of reliable internet connection prevents them from using this service.

Over half of local providers reported that issues with medical transportation have negatively impacted their patients' and clients' medical care.

Local providers were asked to what extent service gaps in medical transportation, both inside and outside of the counties, have negatively impacted their clients' or patients' medical care:



Source: Faribault & Martin Counties Medical Transportation Provider Survey, 2024-25.

The chart above shows that being unable to book needed medical transportation, especially for appointments outside the bi-county area, has had the most widespread negative impact on patient medcial care.

Impacts of Medical Transportation Service Gaps

In interviews and surveys, providers shared many examples of negative impacts patients face when they are unable to secure needed medical transportation. Additionally, the entire medical system suffers when patients are unable to receive the care they need.

Local providers shared countless examples of how medical transportation service gaps led to delays of critical health care services for patients. Recently, a resident was waiting for months for residential treatment outside of the county. They finally moved up the waiting list and were next in line to be served, but were unable to secure transportation to the provider. The resident lost their current place in line and had to wait for another care opening. Another provider described how lack of reliable transportation options has led to providers discharging patients from their practice due to no shows or late arrivals.

The greatest gaps in care are for out-of-county appointments and on-demand medical care. Providers shared that after being unable to secure medical rides again and again, many residents decide it is too much of a hassle and they simply forego medical care.

In addition to negatively impacting patient care, many providers shared how a lack of transportation strains the entire medical system. Several providers shared that residents are forced to use ambulances for non-emergency transfers as they have no other way to receive care. This taxes local emergency medical services and can delay care for other emergencies.

Multiple health care providers reported that when residents don't have access to medical transportation, residents end up accessing care at the emergency room and then don't have transportation to return home. One provider explains, that residents "end up going to the ER for unnecessary visits, utilizing EMS for **nonemergent transfers to ER,** and then not having transportation back home" Then, emergency room patients that are ready for discharge from the emergency room must stay in the emergency department overnight because there is no appropriate transport system available.

"I have had multiple clients tell me they have **simply given up on scheduling needed medical care** with primary providers or specialists due to lack of access from transportation barriers, often clients need specialty care far from our area and they feel **the barriers of getting medical transportation are too great to overcome**. I have had clients who have ended up hospitalized or relying on ambulances for basic medical care because the need to schedule rides two or more days in advance does not work with how fast their flares for medical conditions occur, and then if they are unable to schedule ahead, they are denied transportation and must utilize emergency services even in non-emergent situations."

-Human Services Provider

Key Medical Transportation Challenge: Emergency Room Discharge

Providers across Faribault and Martin Counties shared that transportation for emergency room patients ready for discharge is a critical service gap in the area. Many residents arrive at the emergency department via ambulance from their home or assisted living facility. After the patient has been treated and is ready for discharge, hospital staff can help coordinate a ride home by public transportation or taxi if the patient is ambulatory.

For patients with mobility issues, there are far fewer options to return home after discharge. Hospital staff use NEMT services when possible, but can rarely access these services on the same day they request them as the NEMT provider is already booked solid. Additionally, NEMT services are not offered on nights or weekends. Some patients with mobility issues are able to return home using public transportation if their discharge time aligns with public transportation operating hours. If a resident with mobility limitations can transfer to a vehicle that is not wheelchair accessible, emergency department staff can contract with local taxi providers to secure a ride home.

Occasionally, local ambulance providers and police officers transport residents home from the hospital when hospital staff can find no other options. The communities are close knit and first responders help out however they can. Hospital staff shared that they greatly appreciate the help of first responders to get residents home. However, they recognize this is not an ideal situation, and hospital staff always try to avoid using emergency services for a non-emergency situation.

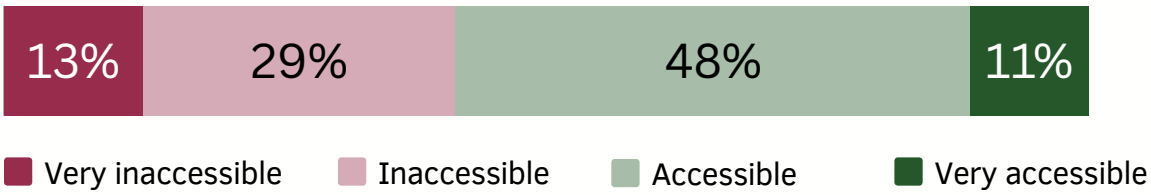
If no other transportation can be secured, patients simply stay longer than needed until a ride can be secured. This can impact staff's ability to care for other patients, especially if the patient needing medical transportation has dementia and requires a lot of monitoring to ensure their safety.

Transportation providers reported that patients newly discharged from the hospital may not be equipped to independently ride the bus. Discharged patients may need a support staff or another loved one to ride with them to ensure safety of all passengers.

Knowledge Gaps about Medical Transportation in the Counties

Most residents consider information about medical transportation within Faribault and Martin Counites to be accessible. However, one in eight consider the information to be "very inaccessible."

Residents were asked to rate the accessibility of information about medical transportation in Faribault and Martin Counties:



Source: Faribault & Martin Counties Medical Transportation Resident Survey, 2024-25.

Residents learn about medical transportation through a variety of ways, and some residents are unfamiliar with services available to them.

Residents shared that they learn about medical transportation from their medical providers, other service providers, case managers, and through word of mouth. However, many residents do not know about the medical transportation services available to them through their health plans or volunteer services. Several residents learned about transportation options available to them from completing the survey and participating in interviews for this assessment.

Summary of Key Strengths of Local Medical Transportation System

Some key strengths of the medical transportation system involve local partners:

MN Para Transit Services provides licensed Nonemergency Medical Transportation (NEMT) based out of Truman. The provider has strong ties with other providers in the area that serve residents needing their services, including assisted living providers.

During business hours, all Faribault and Martin County residents have access to the **Prairie Lakes** public transit system with fares many residents find affordable. Prairie Lakes serves the entire bi-county area. In addition, Fairmont and Blue Earth residents have access to extended public transit hours on evenings and weekends.

CREST in Martin County and **Interfaith Caregivers in** Faribault County provide elderly residents with volunteer driving and other support services, at no cost to the individual.

Medical transportation is in high demand, and so the current system works best for appointments with lots of advanced notice. Long-term care staff, case managers, and other providers very dedicated to help secure rides for residents.

Summary of Key Challenges of Local Medical Transportation System

Residents and providers shared several key challenges in securing transportation for medical appointments:

Medical transportation is in high demand and rides are often booked out weeks in advance. This means that on-demand medical transportation options are rarely available. This leaves residents scrambling to secure rides for follow up medical appointments for urgent medical needs.

Additionally, this service gap strains the local emergency departments who must dedicate considerable staff time to find rides home for patients ready for discharge. When emergency room staff are unable to secure rides in a timely manner, they must continue to care for and support patients who are no longer in need of emergency health care services.

The administrative burden of coordinating medical transportation can be extremely high, and even with a large amount of effort, rides are not guaranteed. Residents using managed care health plans must get all medical rides preapproved, and the preapproval process can be very complex and burdensome.

Many specialty health care services are not available within Faribault and Martin Counties, so residents must travel out-of-county to access these services. Medical rides for out-of-county appointments are the most in-demand rides, and also the rides that are most challenging to secure. Most providers surveyed for this assessment reported that being unable to book transportation to medical appointments negatively impacted their patients' medical care. Some residents give up on obtaining the medical care they need due to the difficulty obtaining transportation.

Faribault & Martin Counties' Stronger Together Coalition and Access to Health Subcommittee work to improve resident health through collective action.

If you would like to work to address medical transportation service gaps in Faribault & Martin Counties, please contact Jordan Niles, Public Health Planner, at 507-238-4757.

In Summer 2024, Health & Human Services of Faribault & Martin Counties launched a comprehensive assessment process to examine medical transportation needs and services within the two counties. The assessment was funded by a grant from the Minnesota Department of Health to support local agencies meeting foundational public health responsibilities. The assessment draws data from surveys completed by 101 residents that use or need medical transportation, surveys completed by 93 health care providers, first responders, county staff, transportation providers and other local staff that serve Faribault and Martin County residents. Additional information was gathered for this report from 10 key informant interviews with residents and 17 key informant interviews with local providers. The assessment concluded in Spring 2025.

Issue Brief: Emergency Room Discharge Medical Transportation Gaps in Faribault & Martin Counties

Providers across Faribault and Martin Counties shared that transportation for emergency room patients ready for discharge is a critical service gap in the area. Many residents arrive at the emergency department via ambulance from their home or assisted living facility. After the patient has been treated and is ready for discharge, hospital staff help coordinate a ride home by public transportation or taxi if the patient is ambulatory.

For patients with mobility issues, there are far fewer options to return home after discharge. Wheelchair accessible transportation services often books out weeks in advance, and are rarely available for on demand service needs. Some patients with mobility issues are able to return home using public transportation if their discharge time aligns with public transportation operating hours. If a resident with mobility limitations can transfer to a vehicle that is not wheelchair accessible, emergency department staff are able to contract with local taxi providers to secure a ride home for the patient.

Occasionally, local ambulance providers and police officers transport residents home from the hospital when hospital staff can find no other options. The communities are close knit and first responders help out in any way they can. Hospital staff shared that they greatly appreciate the help of first responders to get residents home. However, they recognize this is not an ideal situation, and hospital staff always try to avoid using emergency services for a non-emergency situation.

If no other transportation can be secured, patients simply stay longer than needed until a ride can be secured. This can impact staff's ability to care for other patients, especially if the patient needing medical transportation has dementia and requires a lot of supervision to ensure their safety.

Transportation providers reported that patients newly discharged from the hospital may not be equipped to independently ride the bus. Discharged patients may need a support staff or another loved one to ride with them to ensure safety of all passengers.

Providers in Faribault and Martin Counties consistently report that securing patient transportation home from emergency rooms is a persistent, system-wide challenge requiring further attention.

For the full Medical Transportation Assessment Report, please visit: tinyurl.com/FMTransport

Report prepared by NorthStar Data Partners, LLC | July 2025

In Summer 2024, Health & Human Services of Faribault & Martin Counties launched a comprehensive assessment process to examine medical transportation needs and services within the two counties. The assessment was funded by a grant from the Minnesota Department of Health to support local agencies meeting foundational public health responsibilities. The assessment draws data from surveys completed by 101 residents that use or need medical transportation, surveys completed by 93 health care providers, first responders, county staff, transportation providers and other local staff that serve Faribault and Martin County residents. Additional information was gathered for this report from 10 key informant interviews with residents and 17 key informant interviews with local providers. The assessment concluded in Spring 2025.

Issue Brief: Challenges in Coordination and Preauthorizing Medical Rides
Medical Transportation Gaps in Faribault & Martin Counties

Nonemergency Medical Transportation (NEMT) is a service available to elderly and disabled participants of Minnesota Health Care Programs, which offers door-to-door wheelchair-accessible transportation to medical appointments. NEMT providers require certification through the Minnesota Department of Transportation and are governed by Minnesota Statute 174.29.

NEMT services are in high demand in Faribault and Martin Counties, and residents have the best chance of securing rides for medical appointments with several weeks' notice. However, even when residents have appointments scheduled months in advance, they have to wait for their managed care plan's authorization window to open to officially reserve their medical ride. Both UCare and Blue Plus, the two managed care plans available to county residents, require pre-authorizations for medical transportation services. UCare requires a two-business-day approval, with the ability to schedule up to 30 days in advance on a rolling basis. If a resident is discharged from the emergency room on a Friday with a follow up appointment scheduled for the following Monday, there is not enough time to secure the ride pre-approval required by the plan.

Blue Plus is more likely to provide flexibility for last-minute requests for medical rides. However, Blue Plus opens scheduling for one month at a time just a few days before the end of a month. For appointments that land at the beginning of a calendar month, all NEMT slots are usually booked up by the time the authorization window opens. Long-term care staff that schedule rides on behalf of patients use a workaround to call the NEMT provider directly and ask them to reserve a spot for their patient. Then, when the Blue Plus authorization window opens, long-term care staff call the plan to officially reserve a ride. At times, it takes staff an hour on the phone to complete this step of the process. If appointments change on the clinic end, staff start the process completely anew.

Residents that use Medical Assistance ("straight MA") can use any licensed, approved vendor for medical transportation services without preapproval. Many residents transition from straight MA to a managed care plan, UCare or Blue Plus, which do require preapprovals. When residents transition from straight MA to a managed care plan, this transition occurs on the first of the month. This presents a challenge when residents have medical appointments and medical transportation scheduled for the beginning of the month they transition. Even if a resident booked their NEMT ride months in advance while they were on straight MA and didn't need preauthorization when it was booked, the moment they transition plans, residents are bound by the preauthorization requirements of their new plan. The managed care plan requires two business days pre-authorization for all medical rides. For new enrollees, it is impossible to provide that two day notice for rides scheduled for the first day of the month. Therefore, their medical ride would not be reimbursed to the transportation provider. NEMT providers shared that they cannot afford to provide those rides uncompensated so they have to cancel the rides for residents.

The complex authorization process can result in unavailable rides, ultimately leading to missed or delayed medical care.

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