
Participants: Heather Clark (Hopelink Mobility), Staci Sahoo (Hopelink Mobility), Aaron Morrow (Public Policy Advocate), Alan Bruckner (SVT), Alex O'Reilly (community member), Antoinette Smith (City of Kirkland), Belen Herrera (SDOT), Blake Matthews (Seattle/King ADS), Camille Biggins (Virginia Mason Franciscan Health), Judy Brown, Julie Rose, Karen Hartman, Katie Hogle (YMCA Greater Seattle), Mandy Wes (DEC), Marie Woodley (DEC), Olivia Hals-Dias (Kaiser Permanente), Sarah Arndt (NUHSA, Scott Weinberger (KC Metro), Tony Hester, Cynthia Coffin,

Hopelink Staff Support: Lyn McCarthy (host), Nicole Ross (notetaker), Roz Novikova, Grace Georgitsis, Chitra Subramanian, Ysabel Yu, Sandy Phan, Dean Sydnor, Mackenzie Kneeland

Welcome, Introductions, and Announcements

Lyn McCarthy – projects in process to close out the 2023-2026 KCMC Action Plan

- The Inclusive Planning Toolkit is being updated – please offer input
- The Rural Transportation Advocacy workshop series is complete and the “Rural Transportation Advocacy Toolkit” is taking shape.
- A networking event for Volunteer Driver Programs will be held on December 4th, 2026.
- KCMC Co-Chair nominations are being accepted. Vote for new chair in February.

Medical Chaperone Transportation: Increasing Access to Essential Outpatient Care

Staci Sahoo & Heather Clark, Hopelink Mobility

- **KCMC Identified Need:** clients were skipping treatments, forced to decrease pain management,
- connected w/ Beverly Kitter South Central CT, who was working with an agency called trusted riders,
- talked with Kristin Webb (VS) about potential of a pilot with trusted riders, did a deep dive, significant liability in this situation
- Eastside Friends of Seniors expanded geographic area, couldn't expand scope as well, project came to a halt
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- **Funding Opportunity Proposal:** Introduction: Olivia Halas-Dias, Kaiser Permanente, proposed grant opportunity,
 - if awarded pilot it's not just for Kaiser Permanente but broader community, proposal is about access to care and treatment, goal is to have it in an area served by Kaiser, up to \$24,000 dollars
 - Clients eligible: clients with medical burdens,
 - Need is beyond 60, but objective is to serve 60 by Dec 2027
 - Hope to engage workgroup throughout the process
 - Really about engaging partners, medical facilities
 - Third-Party Vendor: [MYFREDY](#), national medical chaperone provider that includes transportation
 - Due diligence: what is the level of care that a medical facility requires, unclear what what level of service medical facilities require
 - Roundtrip will probably be most common with this pilot
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- **Questions:**
 - Judy Brown:** Has any reached out to local GI doctors to get feedback? **Staci Sahoo:** Trying to understand across the board what different doctors/ medical facilities are requiring
 - Alex O'Reilly:** Shared recent ortho surgery experience, noted that medical chaperone requirement was mentioned in many places
 - Antoinette Smith:** Thinks idea of engaging providers, relationship building with providers, familiarizing providers w/ the program will be essential
 - Karen Hartman:** Shared experience with Kaiser, has been advocating for service over last 9 years on Senior Council
 - Judy Brown:** If you get grant would there be any out of pocket cost for patient? **Staci Sahoo:** Intention is no, would be fully funded. **Judy Brown:** What would buy-in be from the types of insurances that cover some transportation costs? **Staci Sahoo:** HSA and FSA is accepted by MYFREDY, could possibly help right now. Also a KC Veterans program that can possibly provide subsidies.
 - Heather Clark:** Would grant cover hotel costs? Thinks chaperone might need to be there at the beginning so staff can verify, also client would likely want to meet chaperone prior to procedure so they're not meeting a complete stranger post procedure. **Antoinette Smith:** A common thing that came up when working w/ older adults was not access to support but rather clients not wanting to bother someone,

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keep it simple and straightforward. For example, hotel or 24-hour care should be a no-go pilot.

Tony Hester: Are the vehicles fully accessible? **Staci Sahoo:** Haven't identified vendor/ vendors, if there is a request for someone needing a wheelchair accessible vehicle (non-folding) we would want to be able to accommodate. **Tony Hester:** How are folks going to receive information? Will it be accessible? Large print, braille, etc? **Staci Sahoo:** How are people being referred to the program?

- **Discussion:**

Need three things: **1. Customer Desirability, 2. Operational Feasibility** (will run through Find A Ride), **3. Financial Viability** make sure the long-term proposal is sustainable

- **Referrals: Judy Brown,** Ex.- Colonoscopy, would recommend reaching out to UW or 1 or 2 private practices to see if we can get buy-in; the other place to start would be cataract surgery. **Staci Sahoo:** I'm hearing 2 things. Should we cap it at the type of procedure (gastro or cataracts), should we work w/ specific providers?
- **Mandy Wes:** I would piggyback on working with specific providers.
- **Tony Hester:** I would want the information to be shared but I wouldn't want the provider to require a certain service
- **Judy Brown:** I do this job for hip & knee replacements. Take the approach, what is your plan for transportation? What is your plan for caregiver support? This gives the patient agency.
- **Antoinette Smith:** Referral process could come from medical provider. Patients have suggested that this is what is needed for support. If you don't have that here is a resource, let me know what you decide.
- **Lyn McCarthy:** The administrative component of making coordination happen could be really large unless there is a centralized system. Channeling it to a specific point makes sense.
- **Mandy Wes:** Shared personal experience w/ medical procedures. I think it's really important for drivers to be trained to work with post-Anesthesia patients.
- **Lyn McCarthy:** The scope of this need is large, reminding us that we're talking about a small pilot, focusing on something smaller for the scope of the pilot.
- **Judy Brown:** Sometimes a tough family dynamic, feel like a burden, some screening questions can help people open-up and get to the real need, can mix and match transportation w/ family support, etc.



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- **Olivia Halas-Dias:** Thank you for including me today. I feel well prepared to review the grant application with my team.
- **Lyn McCarthy:** Shared www.kcmobility.org grabbed most links from here to drop in chat
- **Camille Biggins** comment about increasing coordination, presentation topics, cross county approval
- **Lyn McCarthy:** some folks are using Community Van for cross county medical appointments

Roundtable Shareout

- Find A Ride is hosting Coordinated by Design on Friday, October 9, will host a November 9th webinar debrief from 1PM-2PM.

Next Meeting: December 2, 2026, 9:30 - 11AM, Zoom

King County Mobility Coalition contact information

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For more information on the Access to Health and Wellbeing Workgroup, visit our website www.kcmobility.org

Please contact Lyn McCarthy at emccarthy@hopelink.org for any errors or omissions in these notes.