

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/clinicians-roundtable/medical-depots-for-americas-truck-drivers/3665/>

ReachMD

www.reachmd.com
info@reachmd.com
(866) 423-7849

Medical Depots for America's Truck Drivers

PHYSICIAN ASSISTANTS AND NURSE PRACTITIONERS IMPROVING THE HEALTH OF AMERICA'S PROFESSIONAL TRUCK DRIVERS.

Over 26 million trucks operate each year in The United States and each has a driver with limited access to healthcare providers; physician assistants and nurse practitioners filling the healthcare gaps in the trucking industry. You are listening to ReachMD XM 157, The Channel for Medical Professionals. Welcome to the Clinician's Roundtable. I am Lisa D'andrea, your host, and with me today is Dr. John McElligot, founder of Professional Driver Medical Depot in Knoxville, Tennessee, a clinic that serves the trucking and trucking related profession only. Today, we are discussing physician assistants and nurse practitioners improving the healthcare of America's professional truck drivers.

MS. D'ANDREA:

Hi, John, welcome to ReachMD.

DR. MCELLIGOT:

Hi, how are you doing today, Lisa.

MS. D'ANDREA:

I am doing well, thank you. John, can you tell us about your medical background and how this concept of having medical facilities available at travel centers for truckers came about.

DR. MCELLIGOT:

Well, I am a board certified internist and just happened to have a Masters of Public Health and Occupational Health and Safety and got into occupational health on a full-time basis after an illness and really got into the trucking business and basically a gentleman named Bill Godman from Midland Texas, we were out having a cold beer one night and he said, you know truckers have no healthcare and as of now they come to my office all the time, but anyway I got to look into it and 10 years later I said, you know, we got to do something; these guys are down like < ____ > that they just live to be 55 and they have every disease known to man, so that's what got me started.

MS. D'ANDREA:

You also have a history of being a physician assistant and the majority of the cares provided by PAs and nurse practitioners. How does your medical team handle that medical supervision and how does that work in your team.

DR. MCELLIGOT:

Well, having been a PA, I am big fan of mid levels as well as nurse practitioners and we have a medical director, who is usually affiliated with the local hospital at every site and he oversees the nurse practitioner or the physician assistant, and in most sites we have more than one, and in some sites we have as many as four, depending on the state law and we interface some with nurse practitioners and PAs because some of the laws are good for PAs and some aren't and some are better for nurse practitioners, so we kind of are using both liberally.

MS. D'ANDREA:

Is it difficult to recruit PAs or NPs to your facilities?

DR. MCELLIGOT:

It was in the beginning, it's not now. We have a strategic plan and a gentleman named Jeff Heimerick, at Connecticut, who is a PA and has a doctorate in education, was the former director of the GW Program, was a full professor there, and he has come on as a strategic planner and he started helping us kind of get the word out there, so now we've got lot of people, who know what we are, what we do, and know that the cause is really great and the pathology is unbelievable.

MS. D'ANDREA:

The truck drivers have very different medical needs, can you highlight some of these and discuss their barriers to care?

DR. MCELLIGOT:

Lot of barriers to care is their on the road 28 days a month, 57% of them couldn't get to the doctor in the preceding year when we did our studies. In addition to that, they can't get their medicines refilled. They run out sometimes from months at a time, and their biggest barrier is they are paid by the mile and they have hours of service and they cannot stop and it is just a really difficult dilemma trying to get them into a hospital to get a study done.

MS. D'ANDREA:

How do the depots operate? Do the truckers make appointments?

DR. MCELLIGOT:

No they don't. They can walk in and we can take care of them, you know, at that point in time. We also have a 24-hour call center where we can direct them all over the country to hospitals that primarily are teaching hospitals because the residents like <____> pathology and our PA students love it because these guys, some of them are just a great teaching opportunity and they love people. It's a very lonely profession. So they like the attention and we direct about 100 a week through our 24-hour call center, plus we've seen 10,000 or so truckers in less than two years.

MS. D'ANDREA:

Do you utilize electronic medical records?

DR. MCELLIGOT:

Yes, we do, and we are working on that to perfect it. Every driver that comes to us as has a card. We are working with the website people to get it to where the family doctor can actually pull that record up, and we're working with the HIPAA folks to make sure everything is protected, and by giving your doctor your card, you in essence say, okay you can look at my stuff, but we don't want anybody that the driver doesn't want looking at his medical record, so that's where the card comes in and they can carry from site to site or to their family doctor and it should all be in place shortly.

MS. D'ANDREA:

What services do the depots offer?

DR. MCELLIGOT:

Primarily what we do is DOT, we can do anything DOT-wise from the exams, breath alcohols. We have state-of-the-art hearing booths, vision machines, and so all that's taken care of it. If there's an accident, we can do post-accident drug screens. All of our technicians are certified. All our sites are certified by an inspector to make sure we meet the DOT requirements and we do that with an independent person who knows the DOT regs and can point them out to us. We have probably 400 fleets that are signed up and we have protocols in place for them. Our biggest population was independent on our operators.

MS. D'ANDREA:

What happens if there is a need for hospitalization, imaging, or referrals to a specialist?

DR. MCELLIGOT:

Well, that's why we have the affiliated hospitals and they have a fast track set up for us, and usually it's run by a PA or nurse practitioner. So we call them, we say okay, we've got a patient of the medical director because once I go to the hospital, becomes his patient, is not ours, and we say here's what we've got and we send the man, and we've had, you name it we've had to send it in, we've sent probably close to 4000 people in the last year to the hospital. Now, getting them to go is another issue, a lot of them can't go because they are paid by the mile. If they go in the hospital and are admitted, they can lose their truck, their house, and that's where the St. Christopher Fund comes in.

MS. D'ANDREA:

I will talk about that in a second. What have the truck drivers done in the past for their medical care?

DR. MCELLIGOT:

Mostly go to the emergency room, that's their most frequent stop. Sometimes they can get home, but it's on a Saturday or Friday night late and Saturday and nobody is open. The veterans out there, the Veterans from actually Vietnam they are in, now the new ones are coming back from Iraq that become truck drivers, they can't get any healthcare and return to work with the VA to get < ____ > so least we can do urgent care when they are sick because VAs are open 8 to 5.

MS. D'ANDREA:

Has there ever been a model like this before?

DR. MCELLIGOT:

There have and they have all failed because they were operated by doctors who were at private practices and these things take time to mature because when you open the doors, you start off, they don't trust you and you start off with one driver then he tells ten more and they build up and now our clinics are very busy. Some of the clinics we are going to have to go to 2 full-time providers and probably several part-time.

MS. D'ANDREA:

If you are just joining us, you are listening to the Clinician's Roundtable on ReachMD XM 157, The Channel for Medical Professionals. I am Lisa D'andrea and I am speaking with Dr. McElligot, founder of Professional Drivers Medical Depot in Knoxville, Tennessee, a clinic, which serves the trucking and trucking related profession. We are discussing physician assistants and nurse practitioners improving the health of America's professional truck drivers.

The lack of healthcare coverage is a problem for truckers and in 2007 you cofounded the St. Christopher Fund, the not-for-profit organization that provides financial assistance to the truck drivers, who have medical problems and can't afford their healthcare, can you tell us about that?

DR. MCELLIGOT:

Yes, they have < ____ > Michael Barnes one of your cohorts on the on XM Radio had this idea and I just sort of made it happen and had a lawyer that didn't charge us anything, so we got it going. We presently have helped 18 drivers just since last December and we probably have another couple when works and what we try to do is we find people with catastrophic medical problems that are going to lose their homes, there family is going to be destitute and may be homeless; we have 20,000 drivers a year with their families that do become homeless. So what we do is we bootstrap them. We don't give them fish, we teach him how to fish so to speak, and that we will go to the doctor, the hospital, and we'll get things going with the help of chemotherapy, on several we've got medications for people

who've had just catastrophic strokes or heart attacks, and we try to get them back on the road and rehab'd and once they get on most of them go back to work and get their DOT card back and then, believe it or not, they make a donation to the St. Christopher Fund, it's really great.

MS. D'ANDREA:

Many truck drivers are independent operators and don't have health insurance. Can you tell us about the Professional Drivers Insurance Program.

DR. MCELLIGOT:

We call PDIP, and it's really separate from PDMD, but we went out and did focus groups and said, look, what do you need, and of course they wanted a big 80-20, it cost, you know, lot of money, and we said okay <_____> going to call us and then we said we can't afford this. So we kept massaging the system until we got down to a limited service to where the doctors got paid for their office visit within 48 to 72 hours. They had 8 or 10 paid for a year. They had up to 800 or 1000 dollars in labs and some hospital stuff, pharmaceutical coverage, and it goes down to as low as 140 dollars a month and they like that so that's what we did. We put several levels in there because some of the truckers make a lot of money and some don't so we had to have a big range of services and some are very good, almost like an 80-20 policy. The problems with the 80-20 policies in a truck drivers is that they will spent 10,000 to 15,000 dollars getting up to the point where they had coverage. So they are still almost all cash paying customers. So they like this PDIP because it gives them access to their home doctor, they can come to a PDMD Clinic as well.

MS. D'ANDREA:

You recently completed a healthcare survey with over 1600 truck drivers, what were some of the highlights of that survey.

DR. MCELLIGOT:

Well, the biggest thing was the lack of access, the lack of education, the fact that we have an epidemic of obesity, sleep apnea, diabetes, hypertension, the average driver are on about 3 medications and they are just not surviving very long. The teamsters and one of the medical schools up in Pennsylvania, I can't remember that, they did a study in the teamster retiring at 63 only collects 20 retirement checks before he does, there is not very many.

MS. D'ANDREA:

How do you manage wellness?

DR. MCELLIGOT:

We have lot of that. Primarily with our Novartis programs that we do on XM 8 times a month and we have coffee with the doctor, walking with a doctor, which is another 12 to 15 times a month that the drivers can come and we do free consults and the whole point of what we are doing is education, education then diet, which they don't have access to and then the medical people, which is primarily nurse practitioners and PAs and I will say one thing that we can always work under a medical director, but this team approach with the nurse

practitioner and PA could be what's going to save this profession.

MS. D'ANDREA:

So, how many clinics are there currently in operation?

DR. MCELLIGOT:

We have 4 open right now, 2 opening in the next month or two. Then next year there will be 10 and the following year there would be 24 in addition to that.

MS. D'ANDREA:

What's your..

INCOMPLETE DICTATION