Oregon’s Medically At-Risk Driver Program
Oregon’s At-Risk Drivers

• Oregon law used to be condition-based
  • 1933: People with “physical or mental disability or disease” prohibited from driving
• 1947: First mandatory reporting law
  • Doctors treating “epilepsy or similar disorders”
• 1999: DMV convenes Older Driver Advisory Committee to study the effects of aging on the ability to drive
  • “Age alone and/or the presence of various medical conditions does not support the conclusion that a driver lacks the fitness to drive”
• 2003: Mandatory reporting law passed
  • Based on actual effect of the condition or impairment on the person’s ability to safely operate a vehicle.
• At the time, mandatory reporting legislation failed to pass in other states because of strong opposition from senior advocacy groups
  
  • Advisory committee included AARP, the Governor’s Commission on Senior Service and senior citizens
  
  • Because our new law focused on impairments and not age, these advocacy groups did not oppose the bill
  
  • Oregon Medical Association backed the legislation.
## Oregon’s At-Risk Drivers

### Mandatory Reports

- **WHO**
  - (1) Primary Care Provider (PCP)
  - (2) Specialist or Emergency Room physician if patient has no PCP
  - (3) Vision Specialist

- **WHAT** Severe and uncontrollable functional and/or cognitive impairments

- **HOW** DMV Mandatory Impairment Referral

### Non-Mandatory Reports

- **WHO** Anyone - family, friends, law enforcement, DMV Employees, medical professionals, pharmacists, social service providers, courts, etc.

- **WHAT** Medical conditions or diagnosis and/or observed driving behaviors

- **HOW** Usually DMV Driver Evaluation Request
  - Also Mandatory Impairment Referral Forms, Crash Reports
Demographics are similar: 60% are drivers age 70 or older

Mandatory Reports
- ~1,800 reports/year
- 75% immediate suspension
- Fewer than 10% regain driving privileges
- Source:
  - 100% medical professionals

Non-Mandatory Reports
- ~2,800 reports/year
- 22% immediate suspension
- 78% result in request for medical information and/or retesting
- Source:
  - 43% law enforcement
  - 29% medical providers
  - 13% acquaintance (family, friends, social services, etc.)
  - 15% other (DMV, courts, etc.)
Response to Mandatory Report

• Screened by DMV staff to ensure the report meets legal standards
• Immediate suspension
  • 5-day notice
• Consider as a non-mandatory report
  • If reporter does not meet definition of “mandatory reporter”
  • If condition is not a “severe and uncontrollable” condition that affects a person’s ability to drive safely
Mandatory Impairment Referral Form and Driver Evaluation Request Form

• Check boxes for common driver behaviors

• Details in narrative help support DMV action
  • DMV decision is based on information submitted
  • Information must provide a reasonable basis to believe the condition or impairment affects safe driving
    • Reports based solely on age or diagnosis can not be accepted

• Additional law enforcement details on Driver Evaluation Request
Confidentiality of Reporters

Reports submitted by law enforcement officers or judges acting within scope of their official duties cannot be kept confidential.

- Others can request anonymity but DMV will release other reports if:
  - The documentation must be released pursuant to the Public Records Law, or the Attorney General or a court orders disclosure.
  - The documentation is necessary evidence in an administrative hearing.
Response to Non-Mandatory Report

• Immediate suspension

• Driver required to provide a medical report or certificate of vision (suspension follows non-compliance)

• Pass DMV tests (vision, knowledge, skills)

DMV staff may request supporting information from reporter

• Medical information

• Clarification from law enforcement
Issues Addressed

• Immunity
  • A designated physician or health care provider who makes a report in good faith or does not make a report shall be immune from civil liability that may otherwise result

• HIPAA Regulations
  • DMV is considered a public health authority
  • The medical information required by the department is confidential and shall be used only to determine the qualifications of a person to drive
  • Consequently, release of confidential medical information to DMV is not in conflict with HIPAA regulations
Medical Review

- Medical Determination Officers on staff
  - Medical professionals, currently three physicians
  - ~50 case files each day, every other day (~6,000/year)

- Medical review results in:
  - Driver dropped from the program (regain driving privileges with no further restrictions)
  - Driver is medically eligible to regain privileges but must pass DMV knowledge, vision and drive tests
  - Driver regains or retains driving privileges but must medically recertify in 6 months/1 year/etc.
  - Driver is not medically eligible and eligibility will be reconsidered when certain conditions are met
Surrendering Driving Privileges

• No-fee ID Card available for people who voluntarily surrender driving privileges because of safety reasons or they cannot pass re-exam tests
• 2,384 drivers surrendered privileges in 2014
• Average age 81
• Most surrender at renewal
• Removes medical suspension from record
2012 Evaluation of Medical Program

- Oregon’s impairment-based model is consistent with best practices
- No recommended changes to law
- Encourage voluntary license surrender
- Current simple and practical evidence-based assessment tools cannot reliably measure driving skills and predict future crash risk
- Limited evidence that age-based license renewals and age-based testing reduce risk for crashes
  - However, in-person license renewals have been associated with a reduction in fatality rate among the oldest drivers
Drivers Involved in Fatal Accidents as % of Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2000</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-24</td>
<td>0.034%</td>
<td>0.021%</td>
</tr>
<tr>
<td>25-34</td>
<td>0.022%</td>
<td>0.010%</td>
</tr>
<tr>
<td>45-54</td>
<td>0.016%</td>
<td>0.013%</td>
</tr>
<tr>
<td>55-64</td>
<td>0.019%</td>
<td>0.014%</td>
</tr>
<tr>
<td>65-74</td>
<td>0.024%</td>
<td>0.010%</td>
</tr>
<tr>
<td>75-84</td>
<td>0.019%</td>
<td>0.019%</td>
</tr>
<tr>
<td>85+</td>
<td>0.025%</td>
<td>0.017%</td>
</tr>
</tbody>
</table>
For More Information

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