Older adults with medical conditions that impair function are at the highest risk for driving retirement. This Randomized Controlled Trial investigated the efficacy of an intervention that facilitated planning for a likely driving transition among medically-impaired elders – those with vision, cognitive, or psychomotor impairment. A 2-to-1 allocation ratio resulted in comparisons between 26 intervention and 13 attention control (n = 39) group members who were recruited from health care sites. The intervention consisted of two sessions of facilitated planning in which the participant’s health, transportation alternatives, attitudes/emotions regarding a change in mobility, and actions to ensure continued safe mobility were discussed. Moreover, all participants received supportive phone calls during the 6 month intervention period. Results showed that when compared to the control group, the intervention group had significantly better subjective health, fewer high-risk driving behaviors, and drove less distance on excursions from home at follow up. Simple repeated measures analyses were not significant. Results suggest that facilitated planning may help ease the transition to driving retirement among some high-risk older adults.