Cost Sharing and Cross Partnership Funding Models





About the National Center for Mobility Management (NCMM)

The National Center for Mobility Management is a national technical assistance center funded through a cooperative agreement with the Federal Transit Administration and operated through a consortium of three national organizations—the American Public Transportation Association, the Community Transportation Association of America, and Easterseals Inc. The mission of the Center is to promote customer-centered mobility strategies that advance good health, economic vitality, self-sufficiency, and community.

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Since its founding in 1919, Easterseals has remained committed to ensuring that the needs of children and adults with disabilities, veterans and older adults are met with services and support to help them live, learn, work, and play in their communities. By combining on-the-ground presence, deep expertise and diverse programs, 69 Easterseals affiliates nationwide are advancing change to assure that people with disabilities and other special needs can thrive in their communities.

About this Information Brief

Easterseals, through its work at the National Center for Mobility Management (NCMM), focuses on building connections across education, human services, and transportation sectors so that individuals with disabilities can access school, work, health care, and other inclusive community settings. In this work, NCMM has researched and sourced national examples that support the ability of transit agencies, human service and non-transportation organizations to connect services across multiple types of funding sources. By developing cross funding partnerships, agencies and organizations can leverage resources that allow for expanded services to riders who may not have access to standard public transportation options. This guide will highlight a diverse range of examples and is intended to be utilized by organizations and agencies as a tool to implement similar models in their regions.

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Introduction

Developing partnerships and coordinating funding streams across various federal agencies, non-transportation companies, human service organizations, and transit agencies has proven to be a powerful resource in providing access to transportation for many riders who otherwise have minimal alternatives. Whether in urban, exurban, or rural areas, transportation options for older adults, individuals with disabilities, those with limited income and others, are not as readily available as they are for the general population and require innovative solutions to meet increased challenges.

Many of the barriers faced in providing coordinated transportation options across communities can be solved by understanding the variety of funding models and cost sharing opportunities available.

This guide will showcase a diverse range of cost sharing and cross funding partnership models that have been employed by organizations and agencies across geographical regions and is intended to be used as a resource to build and implement models in your communities. Mobility Mangers and Planners will:

- I. Learn about cross partnership funding models and cost sharing;
- II. Understand why cost sharing is an important tool in connecting communities with vulnerable populations;
- III. Gain information regarding how to leverage Federal funding sources;
- IV. Access models that have already been applied nationwide; and
- V. Obtain resources.

Understanding Cost Sharing

Cost sharing is a process wherein two or more entities work together to secure savings that one alone would be unable to obtain.

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match across Federal programs.

Cost sharing, or cost allocation, as stated in The CCAM Policy Statement, is a mechanism for local service and nonservice providers to partner and share costs for mutually beneficial transportation services in order to maximize the availability and efficiency of transportation services, and can include both vehicle and ride sharing, as well as Federal fund braiding for local

The statement goes on to say that vehicle and ride sharing occurs when a single shared vehicle transports beneficiaries of multiple Federal programs. Vehicle sharing can be thought of as one aspect of cost sharing when participating collaborators each cover a fair ratio of combined expenses for transporting its beneficiaries.

Vehicle sharing and cost sharing may occur when:

- Shared rides, when multiple Federal Programs' beneficiaries are in the same vehicle simultaneously;
- With individual rides, when a vehicle transports a single beneficiary at a time;
- Participating partners pay for the equitable proportion of shared costs for transporting its beneficiaries; or
- Before local partners begin to share vehicles and rides, they should first establish a local cost allocation agreement that details how the partner organization will allocate shared costs.

Operating Costs

Operating expenses, operating expenditures, or "OPEX," refers to the costs incurred by an agency for its operational activities. In other words, operating expenses are the costs that a company must make to perform its operational activities.

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Identifying the operating costs associated with a new program is essential to ensuring its success, and recognizing the method, or methods, in which it will be funded is a consideration that should always be front of mind. Increasing coordination efforts to include local, state, and federal organizations creates unique opportunities to produce enhanced mobility solutions that share operational costs and reduce financial burdens.

Why Cost Sharing is an Important Tool in Connecting Vulnerable Populations with Transportation Options



Vulnerable populations are at a significant disadvantage compared to the general public when accessing transportation, and creative cost sharing and cross funding partnership programs have proven vital in

protecting their ability to attain safe, reliable modes of transport within their communities. This, in turn, mitigates constraints local service providers may face when they have a lack of readily available resources.

TCRP Report 144 highlights how cost allocation methodologies are powerful tools that can complement other efforts to establish reasonable distributions of costs, responsibilities, and benefits when multiple programs and projects share riders and transportation resources. The report states this is particularly true in the area of human services transportation, where public transportation providers and human service agencies are being asked to coordinate their efforts to ensure maximum productivity at minimum costs. While the objectives for coordinated services may vary somewhat between communities, the primary purposes are usually to:

- Avoid duplicative and overlapping services;
- Reduce service gaps;
- Increase services;
- Ensure cost effectiveness and cost savings; and
- Provide safe and reliable transportation services.

Member agencies of the Federal Coordinating Council on Access and Mobility resolve that federally assisted grantees that have significant involvement in providing resources and engage in transportation delivery should participate in a local coordinated human services transportation planning process and develop plans to achieve the objectives to reduce duplication, increase service efficiency and expand access for the transportation-disadvantaged populations as stated in Executive Order 13330.

-Coordinated Human Service Transportation Planning Final Policy Statement

As dedicated transportation services increase in demand, the federal, public, private, and non-profit sectors must continue to engage and partner with one another and establish committed working relationships within their communities to meet ridership needs, identify funding strategies and coordinate services.

Cost Sharing by Leveraging Federal Funding Sources

When developing coordinated transportation services, understanding the availability of funding sources and how to access them is a critical component to ensuring the success, viability, and longevity of a program.

In 2004, the Coordinating Council on Access and Mobility (CCAM) was implemented by executive order and charged to improve coordination across federally funded transportation services for people with disabilities, older adults, and individuals of low income with the goal of increasing access and efficiency of transportation for these targeted populations. To accomplish this, CCAM issues policy recommendations and implements activities that increase the efficiency, accessibility, and availability of Federal programs that fund transportation services.

In 2018, CCAM initiated national focus groups and listening sessions to identify what state and local stakeholders recognized as the most pressing obstacles to human-service transportation coordination. It was consistently documented, particularly in rural areas, that fulfilling match requirements for federal grant programs was a barrier that impacted their ability to provide transportation services.

As a result of these impediments, in 2018 and 2019, CCAM conducted Program Analysis Working Sessions to clarify and document which Federal programs' statutes expressly provide this authorization to enable Federal agencies and Federal grant recipients to more effectively manage Federal funds and coordinate human service transportation.

I. Federal Fund Braiding for Local Match and the CCAM Program Inventory

In June 2020, CCAM released a memo describing how federal fund braiding allows the recipient of one Federal grant to meet the local match requirement of another grant, thus permitting grantees the ability to share costs of transportation projects across multiple federal programs. CCAM notes that funds eligible for Federal fund braiding can be categorized in two types: incoming and outgoing. A

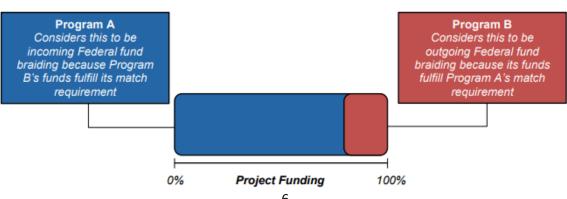


Figure 1: Federal Fund Braiding Example

program considers a Federal fund braiding arrangement to be incoming when another Federal program's funds fulfill its match requirement to fund a single transportation project. A program considers a Federal fund braiding arrangement to be outgoing when its funds fulfill the match requirements of another Federal program to fund a single transportation project.

Published in 2019, the <u>CCAM Program Inventory</u> highlights 130 Federal programs that can provide funding for transportation services for certain vulnerable populations. The inventory contains comprehensive program information, such as CFDA numbers and statutory references, information on recipients and beneficiaries, and eligible transportation activities. However, a stipulation for groups looking to develop a program that receives funds from multiple Federal sources is that they must meet all requirements of the participating Federal agencies. Those can include:

- Eligibility requirements;
- Reporting requirements;
- Match requirements;
- Regulatory requirements;
- Statutory requirements; and
- Program guidance.

Having an awareness of available funding opportunities provides a foundation to strategize how communities can begin developing a coordinated transportation program, and one way to learn about the potential of cross partnership funding and cost sharing agreements is by reviewing what programs have already been developed and implemented across the country. This brief will touch on a diverse range of models and case studies which highlight the benefits of coordinated transportation and how it creates unique opportunities to fill the transportation needs of vulnerable populations.

Case Studies

NCMM identified the following cases by reviewing literature and then interviewing key participants responsible for the development of the program. Additionally, we researched state and agency websites, as well as community resources.

Cascades East Transit: Veterans Healthcare Transportation Service

Cascades East Transit (CET) headquartered in Bend, Oregon, is a mid-sized transit agency that connects people to places through high-quality transit service, primarily in rural areas, throughout Central Oregon. CET bus services include fixed-routes within Bend, regional Community Connectors, recreational shuttles, Rural Dial-A-Ride service for the general public, and Bend Dial-A-Ride service for qualifying persons with disabilities and seniors who qualify as low-income.

Rural Veterans Healthcare Transportation Grant Program (RVHTS): The Program and Need

On November 11, 2020 (Veterans Day), CET was proud to launch the Veterans Healthcare Transportation Service (VHTS), otherwise known as the Rural Veterans Healthcare Transportation Grant Program (RVHTS). This no-cost transportation service is available to all veterans living in Crook, Jefferson, and Deschutes Counties, and the Confederated Tribes of Warm Springs, and provides them with ADA-accessible, curb-to-curb access to all healthcare related trips, including, but not limited to, appointments for physical or mental health, pharmacies, dental appointments, hearing and eye specialists, and physical therapy appointments.

Because CET services such a diverse and geographically large rural area, they recognized an increased need to provide vulnerable populations, especially veterans, with access to healthcare related appointments across central Oregon. Many veterans lacked the resources and ability to access reliable transit services to make necessary medical appointments, and they were provided funding to make that service a reality.

Partnerships/Funding Sources:

The VHTS program is currently funded through a partnership between Jefferson County, CET, the Oregon Department of Transportation, and the Oregon Department of Veterans Affairs. According to a representative at ODOT, ODVA invited ODOT's Public Transportation Division (PTD) to develop and implement the Rural Veterans Healthcare Transportation Grant Program. The program was created by an initial one-time allocation of \$500,000 to ODVA through lottery dollars to qualified entities who

represented rural areas. In this scenario, the qualified entity is the county, Jefferson County, who then applied for state funds. CET has long maintained a partnership agreement with Jefferson County, and in collaboration, provided input into the grant application.

Ultimately, the grant was awarded to Jefferson County, who then funneled the funds to CET, who met the eligible criteria by qualifying with the necessary Rural-Urban Commuting Area (RUCA) census tracks, in two rounds totaling \$60,000 to implement the VHTS program. While the grant is specifically designated for rural areas, one of the benefits is that CET's entire region, which includes Jefferson County, Crook County, Deschutes County, as well as the Confederated Tribes of Warm Springs, is all considered rural. As a result of CET's rural service coverage, Jefferson County agreed to allow CET to use the funds to provide services around the entire region. Essentially, veterans who do not just live in Jefferson County, but veterans who live throughout the whole region, are now able to access this service.

Theresa Conley, ODOT's Region 4 regional transit coordinator, said, "This program will help provide Central Oregon veterans with a reliable way to get to vital services, such as health care, all around the region. It's a great example of regional partners coming together to improve the quality of life for those who have served, and we're proud to be able to help."

Cross Funding Challenges and Solutions

As with most grants, there are specific requirements that need to be met regarding eligibility criteria. As part of the criteria for CET's VHTS program, veterans initially were required to show proof of their veteran status by presenting a multitude of forms, including their DD 214 form. This government form is a complete and thorough document that verifies a service member's proof of military service and includes sensitive information such as their social security number, etc.

CET immediately realized this would create a barrier, especially for the more vulnerable populations, such as homeless veterans. To prevent this from becoming an obstacle, CET engaged the various counties and tribes to develop a set of eligibility standards and a memorandum of understanding to streamline the eligibility process and allow them to vet veteran riders themselves. According to Ashley Hooper, CET's strategic programs and partnerships coordinator, this approach allowed the transit agency to leverage the experts who work with and build relationships with veterans directly to create a more equitable process that reduced barriers to access for Central Oregon's most vulnerable veterans.

Outcomes, Metrics, and the future of the VHTS

According to a 2014-2018 American Community Survey, and US News and World Report, the average veteran population in Oregon stands at 9%. That average grows as you look at rural areas, such as

Crook Country, which is 13.3%, Jefferson 10.4%, and Deschutes 9.6%, respectively. This indicates a deep need to provide veterans with a reliable mode of transportation within those communities. As such, from 2013-2016, CET implemented the precursor to the VHTS program known as the Central Oregon Veterans Medical Transport Program. Throughout the lifecycle of this pilot program, a total of 2,058 trips were made to support the veteran population, with a staggering year-over-year ridership increase leading the way to create the VHTS.

Since VHTS was launched last year, there have been a total of 374 one-way trips. While still successful, the ridership numbers have not been as high as the earlier pilot program would have suggested, due to a number of factors. COVID-19 has caused many potential riders to be weary of public transportation, especially older adults. Another primary factor is that the program was started later than intended, which has led to an overall slower rate of active riders using the service. Since the program re-started, there has been a steady month-to-month increase, and that is expected to continue as the vaccine is rolled out and trust in public transportation builds.

Looking ahead, it is evident that the need for this service continues to grow, and while current funding for the VHTS program was a one-time allocation of funds, the Oregon State legislature has since introduced two bills (2139 and 3099) which hope to provide more sustainable funding for veterans' transportation services in the future.

Funding Models and the Ride Alliance Pilot Program: Denver, CO

As stated by the <u>Shared-Use Mobility Center</u>, launched in 2020, the Ride Alliance pilot program, created for individuals with mobility challenges, older adults and veterans, endeavors to improve coordination for demand-response transportation (DRT) trips across multiple service providers by allowing them to coordinate trips and funding for trips through a streamlined scheduling software called the Trip Exchange. Developed through a partnership between the Denver Regional Council of Governments (DRCOG)/Denver Area Agency on Aging (AAA), and Via Mobility Services, the Ride Alliance program services over nine counties in the Denver metropolitan area by providing a one call, one click system that seamlessly allows for veterans and other vulnerable populations to access transportation, information and community services.

Background

The Denver metro area has multiple demand-response transportation (DRT) services operated for human services transportation (HST) and public transportation purposes in the same geographic area, which has led to difficulty over the years coordinating across various services and service providers.

In response to these challenges, Via Mobility Services was awarded a grant through the FTA in 2014 to create a more seamless way to share trip data for demand-responsive transportation to improve service coordination in the region. As stated by the <u>Mobility Service for All Americans (MSAA)</u>, which initially funded the program, the intention was twofold:

- Use technology to provide more rides for more people; and
- Create a system platform to exchange the needed trip data and do so in a way that can be replicated

After an initial effort in which they coordinated these services, it was demonstrated that overall service productivity increased 26%, thus setting the stage to expand coordination efforts across the area.

Program Characteristics and Funding Models

In 2017, the Denver Regional Council of Governments (DRCOG) received funding from the state of Colorado, as well as funding through the FTA VTCLI grant to fund Ride Alliance.

DRCOG administers three funding sources to streamline and expand human service transportation coordination efforts and lessen administrative burdens for providers: the Older Americans Act & Older Coloradans Act (OAA), Federal Transit Administration Section 5310, and the Human Service Transportation Set Aside (HST), from the Transportation Improvement Program. Through the application of these funds, DRCOG has developed a model that complements and enhances the Ride Alliance program by allowing transportation providers more flexibility to exchange trips through more coordinated funding sources. Using trip exchange technology from DemandTrans Solutions (see below), providers can now charge to and leverage these sources since OAA and HST can pay for the local match through 5310 funds.

In essence, providers participating in Ride Alliance can exchange trips and exchange funding. A large component of the program's success is ensuring DRT trips across many service providers and across multiple DRT scheduling platforms be coordinated effectively and efficiently. If provider A wanted to exchange a trip with provider B, provider A can use one of the funding sources to pay provider B for that trip. This opens the opportunity for providers to take advantage of separate funding streams where they typically may be unable to. By giving providers the opportunity to leverage more funding pots, agencies can more efficiently coordinate their trips through the scheduling platform.

DRCOG, in partnership with Uber and DemandTrans, applied the trip exchange and Routematch software to support technologically advanced trip booking that simplifies the process of requesting rides by coordinating them through multiple transportation providers using an online trip exchange.

Riders, or someone on behalf of the rider, can contact any of the participating agencies. If the agency is unable to provide the ride, they can put it on the exchange for another agency to take it. If the ride is to be provided by another agency, the rider is then contacted by the new provider. If the ride still cannot be provided, that information is communicated to the rider by the original agency contacted.

Ride Alliance funding through the VTCLI grant has since ended as of 2020, however, DRCOG uses a small portion of 5310 funds to pay for the upkeep of the scheduling platform.

Program Challenges and the Future of Ride Alliance

As with any pilot program launch, Ride Alliance was met with a number of challenges which ultimately led to many lessons learned. Among the challenges the program faced, was COVID-19 and the many factors that needed to be taken into consideration to ensure safe, reliable and trustworthy rides. Programs of this scale also often take a great deal of time and effort to implement, legal agreements between the public and private sectors can become cumbersome and complicated, and staffing constraints can impact productivity and efficiency. Yet, having learned from these, the program has still been very successful and is looking to expand throughout 2021 and beyond. The program aims to engage additional transportation providers to join, create more flexible MOU/IGA processes, and develop a comprehensive coordination manual which includes financial business rules. (PPT)

Missouri Rural Health Association's HealthTran Program

The Missouri Rural Health Association's (MRHA) mission is to safeguard and improve the health of rural Missourians. As such, they are strongly connected to Federally Qualified Healthcare Centers, rural hospitals, clinics and agencies working on social determinants of health issues, primarily around accessibility and transportation. Mary Gordon, MRHA's health director, stated that the organization found its "niche" and expertise in helping to link healthcare with transportation. Building on a community approach to addressing rural transportation barriers.

From 2013–2016, MRHA was awarded a Missouri Foundation for Health Grant that allowed them to pilot a transportation-focused program around mobility and coordination. During the pilot, MRHA and its partners provided more than 4,750 rides to 733 unduplicated individuals, gathered data showing ROI, and the need and health outcomes of those with access to healthcare. Subsequently, from this pilot, HealthTran was conceived.

The Program

HealthTran, as stated in the MRHA website, is a multi-branched program offering services of community outreach, transportation landscape assessment, mobility management education and training, development of local non-traditional transportation and a volunteer driver program (VDP) that closes the transportation gap. The Community Approach empowers communities by allowing rural Missouri Rural Health Association members the opportunity to subscribe to a scheduling platform allowing for quick and efficient scheduling across public, commercial, local and volunteer transportation providers. Health providers schedule rides to and from their health and wellness visits, most often with no expense to the patient. HealthTran is expanding to include other entities such as court systems, schools, employers, and nonprofits. The program was designed to address rural transportation limitations and barriers, with a primary focus on health and social determinants of health that affect Missourians and offers a multitude of services to increase awareness of mobility and transportation options. The program links hospitals and rural health providers by offering a one-stopshop to scheduling a ride across multiple transit providers, including the MRHA VDP program, and it works with local non-traditional sites with vehicles to build greater transportation options. Transportation providers are on-boarded to the platform at no cost and can expand a customer base and a new funding stream.

Mary Gordon, Director of HealthTran said the program is recognized as one of the most innovative Mobility Management solutions in the nation.

"We are working on a statewide program to help people get where they need to go," said Gordon.
"To help sustain and build, we are just starting to work with volunteer organizations like veteran groups, senior centers, RSVP programs, churches and other organizations with a volunteer base.
The goal is to provide support and knowledge in sustaining and building a volunteer driver program. It is our hope that HealthTran and local volunteer stations can work together to improve transportation options."

Partnerships, Funding, and Challenges

MRHA receives funding through a multitude of sources to support the HealthTran program, including, but not limited to, FTA grants such as the Innovative Coordinated Access and Mobility pilot program (ICAM), as well as through other health grants and membership dues, subscriptions, and volunteer mileage.

Health care providers, rural hospitals and clinics, health departments, nonprofits and others support transportation through local funding or grants, each being different from one another. Currently, all

MRHA members pay for 100% of the cost of transportation for their customers, while the FTA supports the scheduling technology and staff funding. MRHA members pay annual dues of \$250 as a nonprofit, \$500 annually as for profit, plus an additional \$37.50 per month for unlimited access and logins to the scheduling platform. MRHA VDP also receives support through booking fees and mileage cost sharing. Volunteer drivers receive most of the loaded mile reimbursement to offset volunteering related expenses, and MRHA keeps a small portion to support some of the technology costs.

An added benefit is that the scheduling platform helps local and public transportation providers get additional paid referrals, and as medical providers get more patients in the door, insurance reimbursable payments improve. Additionally, all metrics and data for the HealthTran program is gathered on the scheduling platform and helps to provide a wide variety of information related to health transportation.

The HealthTran program, while highly successful in connecting communities through innovative partnerships, is, as Mary Gordan states, not a simple program by any means. Funding remains a primary barrier, as do regulations and policy, siloed behavior, and mistrust in public transit. COVID-19 has caused additional issues and was highlighted as the main reason for reduced ridership since March 2020.

Door County Wisconsin:

Cost Sharing, Vehicle Sharing and Cross-Funding Partnerships

Over the years, Door County Wisconsin has developed a number of innovative and creative ways to provide transit services through cross-funding partnerships, vehicle sharing and cost sharing agreements to expand transportation services to a wide variety of the area's population, due to the fact that they do not have traditional local transportation agencies. While these programs have proven to be extremely valuable, they have had to employ unique strategies to keep the services going, and at many have times had to revise models as challenges and barriers arise.

Door-Tran's Veteran Volunteer Transportation Program

During the mid-2000's, the American Red Cross provided veterans in Door County no-cost rides for health-related trips. The program, while highly successful, was almost ended once the Red Cross' mission altered and they no longer provided transportation services.

In order to ensure the programs continuation, Door-Tran, a transportation focused non-profit organization, was contacted by the County Veterans Services Office (CVSO) in 2011 regarding resuming services for veterans in a cost effective and efficient manner. Having been an ongoing collaborator with

Door County regarding transportation related services, Door-Tran partnered with the County's Human Services Department, now the Transportation Department, to see how to best implement a sustainable program to meet veterans' mobility needs.

Door County had two vehicles, however only one driver. The County offered to supply Door-Tran with a wheelchair accessible van to implement what is now the Veteran Volunteer Transportation Program (VVTP). Working through a three-way partnership, the CVSO offered to share costs with Door-Tran by providing funding for fuel costs and meal reimbursements if Door-Tran administered the coordination of volunteer drivers. In addition to supplying vehicles, Door County also agreed to pay Door-Tran with up to \$8,000 a year through WDOT's Wisconsin Specialized Transportation Assistance Program (85.21 funds), allowing for a very successful program that re-launched in 2011 and still runs today.

Funding Challenges and Solutions

Door County uses state 85.21 funds as part of their local match for federal public transit funds, such as 5311 and 85.20. Since the launch of the VVTP, Door County's public transit system has grown immensely, and as a result, in 2019, 85.21 funding for the program needed to be redirected to account for that growth. However, the county still maintained their partnership with VVTP by allowing Door-Tran to continue using their vehicles, which was extremely important to the continuation of the program as the non-profit does not have their own vehicle inventory and has always relied on providers for that need.

Not receiving the county subsidy did provide initial funding challenges, however, Door-Tran has found creative ways to attain sustainable funding streams by partnering with community organizations. After the county subsidy was withdrawn, Door-Tran received a \$10,000 grant from the 100+ Women Who Care. Ongoing funding for this program has been continued through grants from United Way of Door County, the Door County Community Foundation as well as from other sources to support staffing and

administrative costs of the VVTP. This is a great example of how the community has come together to ensure important transit programs stay intact.

Door-Tran Voucher Program

Another creative program Door-Tran has implemented is their Half-Price Travel Voucher program. Residents who earn less than 200 percent of the Federal Poverty Level are eligible to participate in the program and can receive

85.21 SPECIALIZED
TRANSPORTATION ASSISTANCE
PROGRAM FOR WI COUNTIES:

PROMOTE THE GENERAL PUBLIC
HEALTH AND WELFARE BY PROVIDING
FINANCIAL ASSISTANCE TO COUNTIES
PROVIDING TRANSPORTATION
SERVICES FOR SENIORS AND
INDIVIDUALS WITH DISABILITIES

affordable transportation using reliable local taxi providers. Unlike transportation agencies, local government organizations and non-profits, taxi companies' eligibility for federal and local grants is extremely limited and partnering with community transit services is challenging. This ultimately can leave gaps in services in more rural and exurban areas.

Door County Transportation Department, now called Door County Connect-Public Transit, operates Door County Connect (DCC) and Door County Connect-Door 2 Door Rides (D2D). These are the only public transportation services in Door County. DCC only runs Monday-Friday from 8:15 AM to 4:00 PM and D2D operates up to seven days per week; however some areas are only serviced Monday-Friday as well. This leaves a large need for alternative mobility options outside of these operating hours. In order to meet those additional transportation needs, Door Tran has partnered with local taxi services in Door County to provide residents the option to purchase taxi vouchers. Supported through 5310 funds and additional foundation grants, the program allows riders to purchase vouchers from Door-Tran at half the price of a taxi ride. Riders can purchase a \$10 taxi voucher from Door-Tran for \$5. When the rider takes a taxi ride valued at \$10, they give the taxi driver their voucher, and the taxi company then invoices Door Tran who pays them back 95% of the cost of the trip. The extra 5% is used by Door-Tran for administrative costs.

The project has been well received and has also been expanded to help residents of Washington Island and patients at local hospitals. Door-Tran provides additional vouchers to the Washington Island Health Community Health Program to cover ferry costs, primarily for residents whose medical needs require many ferry trips, and to local hospitals to assist with providing patient transportation after they've been given care and have no alternatives.

This innovative example highlights how private businesses, such as taxis, can be leveraged to support community transportation needs when traditional modes of transportation are not available.

Conclusion

Coordinated transportation services play an integral role in providing access to basic care, connecting communities, and offering reliable modes of transport outside traditional public transit services. By thinking creatively, building local, state, and federal partnerships, and understanding the availability of resources to support innovative programs, communities can close service gaps and provide essential transit options to meet increased demand. Tools such as cost sharing, vehicle sharing, and cross funding partnerships have proven to be extremely effective in maximizing limited resources and can play a vital role in ensuring the success of programs that serve vulnerable populations.

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Resources:

- CCAM Program Inventory
 https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/subdoc/261/ccam-program-inventory-summary-10-2019.pdf
- Coordinating Council on Access and Mobility (CCAM) Federal Fund Braiding Guide https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/regulations-and-programs/ccam/about/148536/ccam-federal-fund-braiding-guide-june-2020.pdf

- Coordinating Council on Access and Mobility Cost-Sharing Policy Statement https://cms7.fta.dot.gov/sites/fta.dot.gov/files/docs/regulations-and-programs/ccam/about/148581/ccam-cost-sharing-policy-statement.pdf
- Coordinating Council on Access and Mobility Cost-Sharing Policy Statement https://cms7.fta.dot.gov/sites/fta.dot.gov/files/docs/regulations-and-programs/ccam/about/148581/ccam-cost-sharing-policy-statement.pdf

The following FTA-funded national technical assistance centers can provide free support and resources to help improve mobility options for individuals and communities.

- National Rural Transit Assistance Program (RTAP). https://www.nationalrtap.org/ all for resources and info: 1-888-589-6821 or email: info@nationalrtap.org. This center supports the Grants for Rural Areas Program.
- National Center for Mobility Management (NCMM).
 https://nationalcenterformobilitymanagement.org/ phone: 1-866-846-6400 email: info@nc4mm.org. This center supports mobility management, which means helping communities and individuals create and manage their mobility options NCMM supports grantees, mobility managers, and partners in promoting customer-centered mobility strategies that advance good health, economic vitality, self-sufficiency, and community.
- National Aging and Disability Transportation Center (NADTC). https://www.nadtc.org/ phone: 1-866-983-3222 email: contact@nadtc.org. This center supports the Grants for Enhanced Mobility for Seniors and Individuals with Disabilities Program.
- National Center for Applied Transit Technology (N-CATT). https://n-catt.org/. The mission of this center is to translate emerging transportation technologies for states and localities across the United States. Contact us: https://n-catt.aura-software.com/contact/.
- Shared Use Mobility Center (SUMC). https://sharedusemobilitycenter.org/. The Shared-Use Mobility Center is a public-interest organization dedicated to achieving equitable, affordable, and environmentally sound mobility across the US through the efficient sharing of transportation assets. By connecting the public and private sectors, piloting programs, conducting new research, and providing policy and technical expertise to cities and regions, SUMC seeks to extend the benefits of shared mobility for all. Contact us: info@sharedusemobilitycenter.org.

The National Center for Mobility Management (NCMM; www.nationalcenterformobilitymanagement.org) is a national technical assistance center created to facilitate communities in adopting mobility management strategies. The NCMM is funded through a cooperative agreement with the Federal Transit Administration, and is operated through a consortium of three national organizations – the American Public Transportation Association, the Community Transportation Association of America, and Easterseals. Content in this document is disseminated by NCMM in the interest of information exchange. Neither the NCMM nor the U.S. DOT, FTA assumes liability for its contents or use.