

# **ACCESSIBLE TRANSPORTATION COMMITTEE MEETING**

Tuesday, December 20, 2016 10:00 a.m. to 12 Noon

**NEXT STOP CENTER Eugene Station** 1099 Olive Street, Eugene

### ACENDA

		AGEN	NDA		
I.	CALL TO ORDER – Chair				
	ROLL CALL:				
	<ul><li>□ Peter Barron (Chair)</li><li>□ Stefan Kwiatkowski</li><li>□ Rachel Jacobson</li><li>□ Scott Whetham</li><li>□ Hoover Chambliss (Notes)</li></ul>	☐ Josh Haring ☐ Ed Necker ☐ Salish Davis	☐ April Wick ☐ Tim Shearer ☐ Ruth Linoz ☐ Eleanor Mulde ☐ Vacant (Rural	☐ Paul Blaylocl ☐ Annie Saville er	k
II.	ANNOUNCEMENTS AND	AGENDA REVIE	W		
III.	AUDIENCE PARTICIPATIO	NC			
	Public Comment Note: This to address the Board on a the Audience Participation name is called, please step audio record. If you are unayour seat.	ny issue. The pe form for submit o up to the podiur	erson speaking is tal to the Clerk of n and give your na	requested to sig f the Board. Who ame and address	gn-in on en your s for the
	Citizens testifying are a.	sked to limit testii	mony to three min	utes.	Page No
IV.	ITEMS FOR ACTION:				
	A. Approval of Minutes: No	ovember 15, 2016	6, ATC Meeting –	Chair	3
V.	ITEMS FOR INFORMATIO	N:			
	A. Lane Transit District Wi	nter Bid – Heathe	er Lindsay and Bre	et Smith	
	Staff from the Marketing Winter Bid changes that	•	•	•	

- B. West Eugene EmX Digital Sign System Scott McFarland
  Staff from the Marketing and Service Planning divisions of LTD will describe the new digital signage being installed at West Eugene EmX platforms.
- C. Discretionary Grant Subcommittee Report John Ahlen
- D. Lane Coordinated Public Transit Human Services Transportation PlanUpdate Kris Lyon
- E. The draft Lane Coordinated Public Transit Human Services Transportation Plan Update document (attached) was last updated in 2013. It is timely to begin the next round of updates to coincide with the work of the Discretionary Grant Subcommittee.
- F. Program Updates
  - 1. Lane Transit District Cosette Rees
  - 2. Ride Source Call Center Advisory Committee Kris Lyon
  - 3. Ride Source Call Center Richard Belcher
  - 4. Ride Source ADA Paratransit David Braunschweiger
  - 5. South Lane Wheels (Cottage Grove) Ruth Linoz
  - 6. Florence Rhody Express Josh Haring
  - 7. Oakridge / Diamond Express Aline Goddard
  - 8. White Bird Clinic Salish Davis
  - 9. Alternative Work Concepts Scott Whetham
  - 10.LCOG Senior & Disability Services Rachel Jacobson
  - 11. Lane Independent Living Alliance (LILA) Tim Shearer
  - 12. Full Access April Wick
  - 13. Pearl Buck Preschool Lise Schellman
  - 14. Other
- VI. NEXT MEETING January 17, 2017

#### VII. ADJOURNMENT

The facility used for this meeting is wheelchair accessible. If you require any special physical or language accommodations, including alternative formats of printed materials, please contact LTD's Administration office as far in advance of the meeting as possible and no later than 48 hours prior to the meeting. To request these arrangements, please call 682-5555 (voice) or 7-1-1 (TTY, through Oregon Relay, for persons with hearing impairment.

# MINUTES OF MEETING ACCESSIBLE TRANSPORTATION COMMITTEE

November 15, 2016 10:00 a.m. – 12 Noon Next Stop Center 1099 Olive Street, Eugene

### **Members Present:**

Peter Barron, Chair Annie Saville

Ruth Linoz Stefan Kwiatkowski
Bill Morganti Aline Goddard
Paul Blaylock Josh Haring

Staff:

John Ahlen Cosette Rees Kris Lyon Jeanne Schapper

**Guests:** 

David Braunschweiger Fred Stoffer
Dave Sedgwick Lise Schellman

Janice Friend

**Members Absent:** 

Rachel Jacobson April Wick

Scott Whetham Hoover Chambliss Ed Necker Eleanor Mulder

Tim Shearer

**CALL TO ORDER:** Mr. Barron called the meeting to order at 10:06 a.m.

**INTRODUCTIONS, ANNOUNCEMENTS, AGENDA REVIEW:** Those present introduced themselves.

**AUDIENCE PARTICIPATION:** There was no one wishing to speak.

**ITEMS FOR ACTION:** 

A. Approval of Minutes: September 20, 2016

**MOTION:** Mr. Morganti, seconded by Ms. Linoz, moved to approve.

**VOTE:** The MOTION was approved as follows:

AYES: (8) NAYS: None

ABSTENTIONS: None

EXCUSED: (7)

### B. Ride Source Call Center No Show Policy and Procedure:

Ms. Lyon presented the current No Show Policy. A scheduled trip is considered a *No Show* if the vehicle arrives at the designated pickup within the scheduled pickup window and the customer:

- is not present and does not appear within five minutes of the vehicle's arrival, or
- is present but is not ready to board within five minutes of the vehicle's arrival, and the vehicle leaves without him/her, or
- is present but is not intending to travel, and failed to cancel the trip before the vehicle's arrival (late cancel)

The No Show Policy and Procedure was flagged for review by Special Mobility Services, with updates drafted for review and approval by the Accessible Transportation Committee.

The new policy is based on a pattern or practice of *no shows* by calculation instead of number of days. A preponderance would be three *no shows* out of 30 trips, and greater than or equal to 6 percent of total trips during the time period. This change would bring the system into a more balanced and equitable process. There also would be a specific potential process to notify customers. If a customer showed a pattern, they would look into a tiered system of consequences instead of a 30-day suspension on the first offense. This method could provide more flexibility to LTD as well as offer customers with an opportunity for appeal to LTD for special circumstances without immediate disruption to their daily lives.

Mr. Morganti brought up his personal experience when Ride *Source* had repeatedly left him at dialysis because his treatment ran late. He asked if that counted toward a *no show*. Ms. Lyon responded that was not a *no show* because it was outside of Mr. Morganti's control. In that situation, he should call Ride *Source*.

Ms. Linoz asked Ms. Lyon to cover procedure, specifically No. 2 in the packet. Ms. Lyon explained that clients must give a cancellation within the two-hour time frame. Ms. Lyon clarified the "two hours" was the appointment, not pick-up time. Mr. Kwiatkowski and Ms. Linoz suggested a policy change to "two hours prior to pick-up time" instead. Ms. Lyon noted the request.

Ms. Linoz and Ms. Lyon discussed the process for return trip cancellation policy. Ms. Linoz asked for a procedural update to dispatch in order to adjust the internal process.

Ms. Lyon clarified this policy is only for ADA paratransit trips; Medicaid would have to have a completely different process. This was only a program policy change for ADA paratransit. She referenced Page 3 of the policy. Ms. Linoz affirmed there was oversight of the policy and programs. It was suggested that the policy read two hours before the "scheduled appointment" instead of the vehicle's arrival time.

Ms. Lyon added that once an updated policy change was finalized, the policy and process will be posted on the LTD Website and in *Ride Guide*.

**MOTION:** Mr. Kwiatkowski moved that the Accessible Transportation

Committee approve the draft of the No Show Policy and Procedure as amended, and recommended it be adopted by Special Mobility

Services; Mr. Morganti provided a second.

**VOTE:** The MOTION was approved as follows:

AYES: (8) NAYS: None

ABSTENTIONS: None

EXCUSED: (7)

### ITEMS FOR INFORMATION:

### A. Lane Coordinated Public Transit - Human Services Transportation Plan Update:

Ms. Lyon presented a draft of the 2017 update. She noted that everything in blue was an update. She added that this was only a draft and there were many additional changes to be made. The draft of the Plan document was last updated in 2013. It was timely to begin the next round of updates to coincide with the work of the Discretionary Grant Subcommittee.

Mr. Morganti inquired about several values in the report; Ms. Lyon responded that there were many items to update as this was an early draft. She affirmed there were many changes to be made.

Ms. Linoz inquired about Page 2, "cross cutting:" should that be cost cutting? Ms. Lyon confirmed that it was an error.

Ms. Lyon highlighted Section II, page 11, which addressed veterans and families specifically. She also highlighted the transportation reports on page 12: trip numbers were still reflected from 2012 but mentioned having the 2016 values. She expressed her hope that those would be added to the next draft. Ms. Lyon referenced various reports that she used for the study on rural transportation needs.

Ms. Lyon continued on to Section III, which concerned the desire for more evening services, additional bus stop seating, etc. Ms. Lyon affirmed that the numbers listed were from 2012; this portion of the draft was not yet updated.

Ms. Linoz asked for clarification that the new information did not include changes but was much the same as the LCOG report from 2012. Ms. Lyon confirmed.

Ms. Linoz asked where the report was currently located online. Ms. Lyon did not have current information, but it was available on the LCOG site. She reminded the group that this was a draft document and there was a lot of information to update.

Ms. Lyon expressed that from an Oregon Health Plan (OHP) standpoint, there will likely be additional mandates from the Affordable Healthcare Act to increase involvement in the community.

Mr. Morganti mentioned the Veterans Administration (VA) trip numbers for Roseburg since the new hospital opened. Ms. Lyon explained that the majority of trips have been to the new Eugene VA Clinic and the downtown VA Mental Health facility.

Ms. Rees requested that everyone review the Plan and contribute revisions. Ms. Lyon had given a lot of effort to begin revising the document, but it would be beneficial to the integrity of the document if everyone contributed. She said that the final draft document would be presented to the public for comment, alongside a discretionary grant public hearing.

Regarding funding criteria, Ms. Lyon directed the group to Page 3 for documents used for funding updates.

Ms. Lyon clarified for the group that the public hearing will occur during the regular LTD ATC meeting.

Ms. Lyon asked those present to review the document and notify Ms. Lyon of items to add or requests for discussion, and to please review and respond before the December meeting. At that time, edits to the draft document can be incorporated, and hopefully, they will be close to a final document for approval at the January meeting.

Mr. Barron asked for further questions; there were none.

### **B. Program Updates**

 Discretionary Grant Subcommittee: Mr. Ahlen reported that the numbers from Oregon Department of Transportation (ODOT) were not optimistic. Staff anticipated funding cuts above 10 percent. Ms. Rees and Mr. Ahlen will be going to Salem the following day for grant training and will have more information to provide at the next meeting. He stated there will be conversations about how to best use funds because it will be a challenge.

Ms. Rees notified the group about the ODOT plans for Oregon public transportation. The Oregon Transportation Plan is a 25-year plan; there will be a lot of changes to funding and technology. She affirmed the desire to have a plan in place should additional funds become available so that updates can happen quickly. The Plan will include more services for public, rail, bike, and housing and urban development. The draft plan will be available next spring. She clarified that it may not sound like it was about local transit, but it was all about local transportation across the state. Ms. Rees had to add LTD to the list because their meeting was scheduled for Salem. In response, LTD hosted ODOT to present local and specific needs.

Mr. Ahlen provided a brief update from the October 26 ATC Grant Subcommittee meeting.

2. <u>Lane Transit District</u>: Ms. Rees added to Mr. Ahlen's comments about the discretionary grant training in Salem. There was substantial discussion at the meeting about accessibility.

Ms. Linoz declared that there was more than one mode of transit, and customers need access once they are off the bus as well. Ms. Rees responded that she would like to see a strengthening of the Oregon Transit Plan. Once developed, all of the smaller plans would be coordinated together for broader access throughout Oregon. Congestion is a huge issue for freight, so a transit plan could help freight as well. The long-term vision and objectives are available online. Transit planning does not only involve the bus system; it includes rail, freight, physical activity, Senior and Disability Services, Department of Human Services (DHS), and many other entities.

Ms. Rees offered her gratitude to the Committee for the discussion and ongoing development. She continued about FTA review and partnering with the State for requirements. Review will happen in May. She would like to see more from community planners.

- 3. <u>RideSource Call Center Advisory Committee</u>: Ms. Lyon reported that the Committee met in October and had a great discussion about trips, costs, and information about planning. She was really looking forward to the next meeting to keep the momentum going.
- 4. <u>RideSource Call Center</u>: Richard Belcher was not present, so Ms. Lyon shared information regarding call status. Changes have been made and there was a positive response. Phone testing was going well. There had been consistently better service. Consumer frustration seems to have decreased.

- RideSource ADA Paratransit: Mr. Braunschweiger reported that he attended several meetings for special requests. As an example, one customer requested that a Hoyer lift be transported. He presented the idea that drivers were mandatory reporters for DHS. RideSource will be hiring drivers soon.
- 6. <u>South Lane Wheels</u>: Ms. Linoz reported that she was in the process of exploring how a social service agency could be qualified as "organizational" so that it could arrange for rides, scheduling social activities, medical trips, etc. Right now it is a charter at a different rate. She will explore this concept and process.
  - Ms. Rees replied that the charter guide should have agency policies for qualification. Ms. Rees added that even if there was an exemption, the agency would still be required to fulfill quarterly reports.
- 7. Rhody Express: Mr. Haring notified the group that one of the buses has a broken head gasket, and it could not be repaired until funding became available. Other buses covered the route while it was down. Also, schools have asked for a route change, police have reviewed the request, and it is being considered. There is a difference in perspective regarding what signage would be appropriate. The police will handle new signage, but temporarily there was no left-turn available.
- 8. <u>Diamond Express</u>: Ms. Goddard has been surveying the 12:15 p.m. bus; and some days, it has been empty. They were now back on the LTD schedule after some time on ODOT's schedule. Also, bus No. 15 has been a continuing saga of repairs. It was not currently running, again, because the heater was out -- and then the engine failed. She reported that Mr. Ahlen was working on it, but the issue was locating funding. She planned to meet with Mr. Ahlen.
- 9. White Bird Clinic: No report.
- 10. Alternative Work Concepts: No report.
- 11. LCOG Senior and Disability Services: No report.
- 12. Lane Independent Living Alliance (LILA): No report.
- 13. Full Access: No report.
- 14. Other: Mr. Baron invited the group to offer any other comments.
  - Ms. Rees suggested promotion of Diamond Express for Oakridge. It could take some time, but people would adjust.

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Ms. Linoz brought of funding to replace vehicles. Ms. Rees said that funds are applied in small portions from many sources--an example is capital funds through the capital plan. This would require a course correction to work vehicle replacement into all of the plans.

Ms. Linoz stated that she would like to see a fleet replacement plan. Mr. Rees responded that this was a good segue because fleet replacement was transferred from Mr. Ahlen's position to Ernie Turner's (fleet maintenance director) position. She said that there would be many conversations to figure out the process for a fleet plan.

Ms. Linoz expressed her concern for the various fleet needs as she was continually facing an immediate need. Ms. Rees replied that she would like to provide that long-term information. There still will be emergencies, but a fleet plan would be helpful for all.

Mr. Ahlen affirmed a replacement plan was in the works.

**NEXT MEETING:** The next meeting is scheduled to be held on December 20, 2016.

**ADJOURNMENT:** Mr. Baron adjourned the meeting at 11:21 a.m.

(Recorded by Tiffany Boss)

# Lane Coordinated Public Transit - Human Services Transportation Plan

**201<u>7</u>3 UPDATE** 

**DRAFT**FINAL



Lane Transit District, P.O. Box 7070, Springfield, OR 97475

Adopted by the LTD Board of Directors

Add adoption date

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# **Executive Summary**

The Lane Coordinated Public Transit-Human Services Transportation Plan (Lane Coordinated Plan) was first prepared by Lane Transit District (LTD) and adopted by the Board of Directors in January 2007. Because the original plan was developed prior to the issuance of guidance by the Federal Transit Administration (FTA), it was revised in June 2008 to include additional information to meet both FTA and State of Oregon planning expectations. Both versions are incorporated by reference as source documents for this and subsequent updates.<sup>1</sup>

The Lane Coordinated Plan satisfies federal requirements enacted through the passage of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for User (SAFETEA-LU). It is specific to funds administered through the FTA and the Oregon Department of Transportation (ODOT) Public Transit Division with expectations for planning and coordination of these resources. The federal requirements for the coordinated transportation planning process are retained under new legislation signed into law on July 6, 2012, by President Obama titled Moving Ahead for Progress in the 21st Century (MAP-21). In December 2015, President Obama reauthorized transportation programs through Fiscal Year 2020 with the passage of the Fixing America's Surface Transportation (FAST) Act.

MAP-21 took effect on October 1, 2012. Some changes were made to improve the efficiency of administering grant programs by consolidating and repealing several programs. Programs relevant to this plan are §5310 Enhanced Mobility of Seniors and Individuals with Disabilities (Enhanced Mobility), §5311 Rural Area Formula Grants (Rural and Small City), §5316 Job Access and Reverse Commute (JARC), and §5317 New Freedom.—The FAST Act took effect October 1, 2015, and made some changes to federal grant programs. The FAST Act is the new five-year surface transportation authorization that provides FTA an authorization level of \$11.78 billion in FY 2016 and a total of \$61.56 billion from FY 2016 through FY 2020. The FAST Act realigns several transit programs, provides significant funding increases specifically for bus and bus facilities, creates several new discretionary programs and changes several cross-cutting requirements. The law continues and expands FTA authority to strengthen the safety of public transportation systems (https://www.transit.dot.gov/regulations-and-guidance/regulations-and-guidance).

This 20137 update to the Lane Coordinated Plan will:

- 1. Update important information in order to ensure that the Lane Coordinated Plan is relevant to **present conditions**;
- 2. Include transportation needs of veterans and their families and how these are identified;

<sup>&</sup>lt;sup>1</sup> The Lane Coordinated Public Transit-Human Services Transportation Plan is posted on LTD's website at <a href="https://linear.ncbi.nlm.nih.gov/ltd.org">https://ltd.org</a> under EZ Access/Accessible Services. Copies in print or alternate formats are available on request by contacting LTD's Administration office at 541-682-6100 (voice) or 7-1-1 (TTY).

- 3. Reference relevant needs assessment and local planning information;
- 4. Match needs with preferred coordination practices and projects;
- 5. List projects and resources; and
- 6. Report on **public review and comments** about the Lane Coordinated Plan.

#### Additional resource documents are:

Attachment 1:	Health System Transformation (HST) in Oregon - Non-Emergent Medical Transportation Policy Recommendations ECONorthwest Rerport - Recent Economic Performance of the Eugene-Springfield Metropolitan Statistical Area (MSA), April 2014
Attachment 2:	Oregon Economic and Revenue Forecast, September 2016. Volume XXXVI, No. 3
Attachment 32:	Legislative Task Force on Veterans' Transportation Final Report October 2010
Attachment 4:	National Center for Transit Research: Improving Veteran Mobility in Small Urban and Rural Areas, February 2014
Attachment 5:	Senior & Disabled Services 2016 Community Needs Assessment
Attachment <u>6</u> 3:	Plan Summary: Lane Coordinated Public Transit-Human Services Transportation Plan by the Lane Livability Consortium2015-2016 Lane County Regional Community Health Needs Assessment
Attachment 7:	2016-2019 Lane County Regional Community Health Improvement Plan
Attachment <u>8</u> 4:	Fact Sheet: Enhanced Mobility for Seniors and Individuals with Disabilities Section 5310, U.S. Department of Transportation Federal Transit Administration
Attachment <u>9</u> 5:	Fact Sheet: Formula Grants for Rural Areas Section 5311, U.S. Department of Transportation Federal Transit Administration
Attachment 6:	Fact Sheet: Program Consolidation, U.S. Department of

Since the initial Plan and subsequent update was adopted, there have been significant changes and new initiatives that impact local transportation, such as a sluggish state and local economy with a very slow recovery from recession, fluctuations in fuel costs, uncertainty about federal and state transportation resources, and fixed-route service reductions along with increased use. Responding to unmet service needs and more demand is quite challenging under these circumstances. So too is taking on new initiatives to serve veterans and military families, transportation linked to health care reform, and providing transportation to the growing number of

**Transportation Federal Transit Administration** 

older adults in need of transportation services to help sustain, support, or enhance personal independence.

# **Section 1: Present Conditions**

# **Local Economy**

Lane Transit District (LTD) was founded in 1970 under the laws of the State of Oregon that allowed the formation of transit districts as special taxing entities. LTD was empowered by State Statutes to impose an excise tax on employers to fund local transit. The recent downturn in the local economy with associated job losses led to a significant reduction in LTD's payroll tax revenues. The State of Oregon Economic and Revenue Forecast published in September 2009 predicted that Oregon jobs lost since 2007 would not be regained until 2013. Since there have been only small improvements in the local economy since 2009, there is was continued speculation that job recovery will not occur until 2015. The local economy is not likely to regain lost jobs any sooner. Unemployment rates remain high and have not changed significantly.

In 2009, a significant LTD service reduction was avoided by the application of federal stimulus funds in support of fixed-route operations. Federal stimulus funds were a one-time infusion, so the need for the service reduction that was averted in 2009 was not eliminated. With the continued poor local economy, a service reduction of 11.2 percent was carried out in September 2010. The health of the local economy remains a critical factor in assessing Lane Transit District's ability to preserve and potentially improve service. This slow growth means that District costs will continue to be carefully controlled, and it is likely to be years before additional service can be considered. The economy began to improve in 2012 and 2013, earlier than originally anticipated.

In the fall of 2014, a first step was taken to restore some service in the district. One of the most powerful onesimpactful changes included adding back service on four national holidays, including New Year's Day, Memorial Day, the Fourth of July, and Labor Day. Additionally, some routes were expanded and times increased craze. Some of these service improvements were not expected to take place for several years craze. In the fall of 2016, a service enhancement of 14,000 hours was added, increasing service along LTD's most used routes and corridors. A third service enhancement is expected to take place in the fall of 2017 with the introduction of the third leg of LTD's Bus Rapid Transit (BRT) system EmX.

Economic recovery has been seenoccurred in Lane County during both 2013 and 2014. Recent increases in the payroll tax revenues and job growth in the Eugene/Springfield Metro area led the LTD Board of Directors to commission a study to determine if local economic conditions supported an increase in the payroll tax (see Appendix 1, ECONorthwest Report). The previous increase was in 2003, when the Oregon Legislature provided LTD the authority to raise the rate over 10 years from .006 to .007. The study found that economic conditions in Lane County have improved and will continue to improve. The unemployment numbers have decreased, and personal income has increased. However, the income increase is not near pre-2007 levels. While the report itself did not provide any recommendations, the Board determined that while the economy is improving it is not yet stable enough to handle a payroll tax increase.

Unlike the recession that began in 2001 that was relatively mild and of short duration, it does not appear that our community will fare as well in recovering from the recession that began in 2008. While officially over, the end of the recession has brought back few of the thousands of local jobs that have been lost. Only the recession of the early 1980s, which necessitated a 30 percent fixed route service cut, has challenged the District's Board of Directors and staff more in their efforts to continue to provide quality public transportation options to our community. (For additional information, visit the LTD website at <a href="Itd.org">Itd.org</a> under Reports and Publications to find the LTD Annual Budget.)

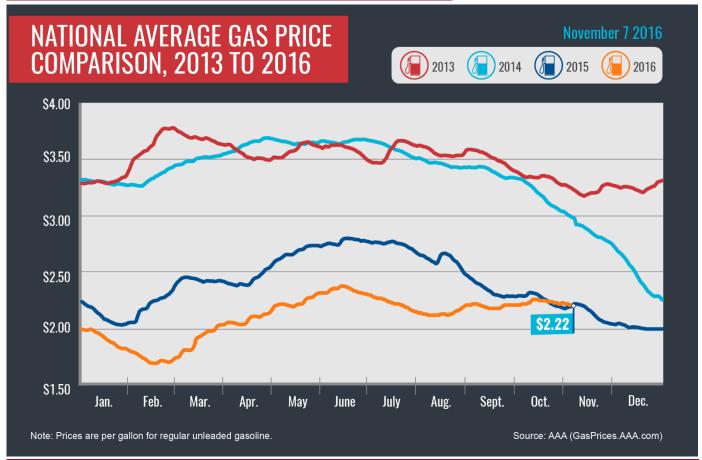
The story is similar for local non-profit and human services agencies that also depend on a stable economic base. Likewise, statewide cuts to human services programs have had a negative ripple effect that degrades service networks, including transportation.

Currently, the economic forecast for Oregon is positive. Job gains in Oregon have exceeded what is needed for population growth. Unemployment continues to drop from the high in 2009. Wages are rising, as are the need for more skilled workers. This increase in jobs has resulted in higher payroll tax revenues for LTD further allowing service expansions in 2016 and beyond (see Appendix 2, Oregon Economic Forecast Report).

# **Rising** Cost of Fuel

While it is encouraging that LTD payroll tax receipts have stabilized, it is discouraging that fuel prices continue to climb and fluctuate. Annual fuel prices are expected to increase. LTD assumes that fuel price inflation will be 6 percent per year from Fiscal Year (FY) 2013 through FY 2019. This affects all providers of transportation services. Small operators of taxis or specialized vehicles, whether a for-profit business or a not-for-profit agency, feel the impact of fuel prices and have few options to mitigate the higher cost of doing business except to raise fares or rates or reduce service availability.

The rising cost of fuel was a significant concern as of the last2013 plan update. As of this publication, the cost of fuel has begun to significantly decrease. Previous estimates were for fuel prices to increase by 6 percent per year from Fiscal Year (FY) 2013 through FY 2019. What has become a reality since 2013 is a decrease in the price per gallon. In June 2016, the AAA Daily Fuel Gauge Report stated the national average was \$2.39 per gallon. As of this report, the October 2016 average continues to increase slightly back to 2015 levels. With gas prices the highest on the west coast this could indicate a potential increase in the costs for transportation requiring small operators of taxis or specialized vehicles to be concerned at fueling their fleet. (See Figure 1 – National Average Gas Price Comparison 2013-2016). This being said, however, projecting future fuel costs is difficult at best, since fuel prices are affected by many factors.



<u>Figure 1 – National Average Gas Price Comparison 2013-2016</u>

### **State and Federal Revenue**

Additional state funding was obtained from the 2009 legislative session in an amount of \$450,000 for transportation services for older adults and people with disabilities within Lane County. This state revenue supported implementation of projects within the Lane Coordinated Plan.

Unfortunately, because of larger state budget issues, this funding was not continued past FY 2011.

A different source of revenue - the Business Energy Tax Credit (BETC), was curtailed as allowable for public transit services. Elimination of the BETC program was a setback to both LTD's fixed-route and paratransit (RideSource) services. No new revenue source is available to fully replace this resource.

Congress passes legislation which, when signed by the President, appropriates funds for the U.S. Department of Transportation and associated agencies. MAP-21, the new two-year transportation authorization, consolidates certain transit programs to improve their efficiency and provides significant funding increases specifically for improving the state of good repair of transit systems. It places new emphasis on restoring and replacing aging transportation infrastructure and streamlines processes for large capital project eligibility and development. The bill highlights

safety by granting FTA new authority to strengthen the safety of public transportation throughout the country. Most significant to this Plan is the consolidation of some programs.

Two programs, §5316 Job Access and Reverse Commute (JARC) and §5317 New Freedom were repealed and expired on September 30, 2012. No new funding is authorized beyond 2012 for these programs, although LTD can continue to use up previous authorizations. JARC activities are now eligible under the Urbanized Area Formula program (§5307) as well as the Rural Area Formula program (§ 5311). Activities eligible under the former New Freedom program are now eligible under the Enhanced Mobility Program (§ 5310). (More information about these programs is provided in Section 5: Resources starting on page 26.)

increases over the 2013-14 levels. In June 2014, U.S. Transportation Secretary Anthony Foxx announced the availability of additional funding through a new Ladders of Opportunity Initiative (http://www.fta.dot.gov/newsroom/news\_releases/12286\_16007.html, accessed 12/30/14). LTD was successful in receiving funding from this grant opportunity in the amount of \$2.0 million. This funding supports enhancing access to work, supporting partnerships,

and economic opportunities through vehicle replacement and safety enhancements.

MAP-21 has current re-authorization through May 31, 2015 and does not provide any funding

Also in 2014, the Oregon State Legislature appropriated funds on two separate occasions to Elderly and Disabled (E&D) Funding for transit projects and are looking for a long-term solution to funding for these populations. The funding appropriated to LTD during the Legislative short session were \$702,257 and \$134,340 [CR4] from previously unspent funding allocations. With this additional allocation, programs have been funded at close to previous 2009 levels.

Anticipated E&D funding levels for the 2017-19 biennium are projected to be lower due to decreased funding availabilities. At this time, the estimated decrease for LTD will be approximately 9% for state distributed 5310 funding and nearly an 18% decrease in the Special Transportation Fund allocation.

# **Health Care Reform in Oregon**

A growing body of evidence supports the connection between successful health outcomes and access to affordable and appropriate transportation options; that there is synergy between health and transportation availability.

Oregon is began carrying out a significant change to provide health care services for people who receive health care coverage under the Oregon Health Plan (Medicaid) by creating Coordinated Care Organizations (CCO) in 2012. As described by the Oregon Health Authority (OHA):

Coordinated Care Organizations are replacing managed care organizations, mental health organizations, and dental care organizations for Oregon Health Plan

members. The CCO's will focus on improved wellness, prevention, and integration of behavioral and physical health care. These local health entities will deliver health care and coverage for people eligible for the Oregon Health Plan (Medicaid), including those also covered by Medicare. Coordinated Care Organizations are a new way of doing business for the Oregon Health Authority. They will be the umbrella organizations that govern and administer care for OHP members in their local communities.

CCO's must be accountable for health outcomes of the population they serve. They will have one budget that grows at a fixed rate for mental, physical, and ultimately dental care. CCO's will bring forward new models of care that are patient-centered and team-focused. They will have flexibility within the budget to deliver defined outcomes. They will be governed by a partnership among health care providers, community members, and stakeholders in the health systems that have financial responsibility and risk.

Although relationships and agreements have yet to be established, it has been determined that CCO's must offer transportation to persons eligible for that benefit under the Oregon Health Plan. Managers of Oregon's network of transportation Call Centers agree that the goal of CCO's to reduce health care costs is good for the state. However, at present, neither the Oregon Health Authority nor the proposed CCO's have a clear understanding what moving responsibility for Non-Emergency Medical Transportation (NEMT) to CCO's means for the current transportation network and system.

The RideSource Call Center (RSCC) <u>wasis</u>-one of eight regional call centers <u>currently</u> within Oregon that handled transportation services for Medicaid recipients through an agreement with the Oregon Health Authority. Unique to the RSCC are features that offer a comprehensive approach to coordinating local transportation services:

- Approved cost allocation methodology
- Cost sharing and integration of human service transportation
- Personal in-the-home interviews by trained Transportation Coordinators from Senior and Disabled Services (S&DS) and Alternative Work Concepts (AWC)
- Interagency collaboration with Case Managers
- Innovative program development using a community care model
- · Sophisticated application of technology and software

Development of the Ride Source Call Center has been the overarching strategic and accountability model for coordinating transportation services for older adults and people with disabilities in Lane County. In essence, the RSCC serves as a one-call center for different transportation services using an assortment of resources and providers. Since 2008, the Ride Source Call Center has provided Non-Emergency Medical Transportation (NEMT) for people

eligible under the Oregon Health Plan. Under Oregon's emerging CCO structure, these newly formed entities will now be primarily responsible for NEMT transportation.

In July 2013, LTD began a relationship with the local CCO, Trillium Community Health Plans to provide NEMT services for their members. The service area for the CCO expanded slightly outside of Lane County into small rural areas of Linn, Benton, and Douglas Counties. The partnership with the CCO has brought unique challenges to the RideSource Call Center, including the formalization of partnerships with other agencies and the introduction of strong HIPAA requirements as a Business Associate of the CCO.

Under the fee for service model utilized by OHA, RSCC functioned as a gatekeeper to transportation services by ensuring the customer was receiving services only when all other resources had been exhausted. With the focus of the CCOs on health outcomes for members, many (including Trillium) are working to enhance access to transportation. In effect, RSCC is evolving into a service to enhance access to health care services with respect to NEMT [CR5].

This new focus on health outcomes and CCO independence is changing the landscape of transportation brokerages throughout Oregon. Some CCOs (such as Trillium) have chosen to work with the existing brokerage in their area. Some CCOs, however, have chosen not to work with the existing brokerage system. At least two new entities have entered the NEMT brokerage business in Oregon, one beginning service in October 2014 and the other beginning service in January 2015. The first company is a newly developed operation called Ready Ride located in Southern Oregon. The second company was awarded the RFP for services in the Tri-County region in the Portland metro area. This has resulted in the Tri-Met Transportation District's Medical Transportation Program disbanding as of December 31, 2014. The services for customers in this area will continue to be served by local transportation companies but the call intake and provider service components will be handled out of a regional call center located in the state of Idaho.

In the summer of 2015, Trillium was purchased by The Centene Corporation, and now operates as a wholly-owned subsidiary. To date, minimal changes have taken place with regard to service provision and have been more behind the scenes consisting of data exchange and new procedures for inquiries and service approvals.

The introduction of this new relationship changes the landscape of NEMT coordination across Lane County, and also to some degree within the state of Oregon. To what degree the changes will continue be and if those changes are positive or negative remains to be seen. In any event, RSCC remains well positioned to continue providing NEMT transportation services, enhancing individual opportunities for accessing multiple transportation programs from a single location.

While the RSCC is well positioned to continue providing NEMT transportation, there is no guarantee that the local CCO will choose to use the Call Center. This has the potential of undermining efforts to provide a single location from which to coordinate transportation services

for people who are eligible for and/or utilize multiple transportation programs. The initial transition is scheduled to occur by July 1, 2013.

For more information about the transition of NEMT to CCO's, refer to Attachment 1: Health System Transformation (HST) in Oregon - Non-Emergent Medical Transportation Policy Recommendations.

### **LTD Accessible and Customer Services**

LTD has changed its internal structure to better align the work of Accessible Services and Customer Services staff. Already this change has revealed new ideas for improving service to customers and better coordination of services for older adults, people with disabilities, and persons of low income. For example, integrated improvements to the data management system and co-location at the downtown Eugene Station of staff responsible for LTD's Not-for-Profit, Reduced Fare, and other programs that offer assistance to these groups.

LTD has two discount fare programs aimed at providing lower cost fixed-route public transportation:

**EZ Access Half-Fare and Honored Rider Programs**: LTD's EZ Access program provides free fares to customers age 65 and older, and half-price discounted bus fares to customers with disabilities. The latter is in accordance with and exceeds the FTA half-fare requirements.

**Private Not-for-Profit Agency Program**: The District offers private, not-for-profit agencies the opportunity to purchase LTD fare media at a 50 percent discount. This discount is granted in recognition of a community need for transportation services for low-income individuals and families who are working with an agency(s) to seek employment, housing, and medical services.

At present these programs are managed separately and without a communication or data connection to other services such as in person assessments, transit training and host services, and ADA paratransit. Now is a great time to build upon and improve coordination across a wider spectrum of services and make better connections with the people who need and use a variety of these options. New operations software is expected to be in use for RSCC customers and will have the ability provide an opportunity to enhance the data collection and management of these programs in a more coordinated seamless manner. The software is expected to be in use by late summer 2017.

A comprehensive evaluation of LTD's fare-based programs will be conducted with oversight and accountability incorporated into the overall management of the collection of services referenced in the Lane Coordinated Plan.

# **Section 2: Transportation for Veterans and Military Families**

# **Transportation Needs of Oregon Veterans**

This summary from the *Legislative Task Force on Veterans' Transportation Final Report October 2010,* follows the work conducted at the State level to identify the transportation needs of Oregon veterans:

In 2008, Governor Ted Kulongoski commissioned the Governor's Task Force on Veterans' Services with the mission of identifying issues facing Oregon veterans and providing recommendations to improve service delivery to those veterans. During its work, the Task Force traveled to 24 cities throughout the state and met with more than 500 veterans. In every city the Task Force visited, veterans identified lack of transportation to and from VA medical appointments as a major barrier to veterans receiving their earned benefits.

In response, the Governor's Task Force recommended that the 2009 Legislature create a task force on veterans' transportation that could more deeply examine the current veterans' transportation system and provide recommendations for enhancements that would meet the concerns of Oregon veterans. The Legislature passed Senate Bill 98 creating the Legislative Task Force on Veterans' Transportation.

The Task Force made a number of recommendations. During the course of its work, the Task Force was cognizant of Oregon's current economic crisis and noted that it worked diligently to provide recommendations with the least amount of fiscal impact. And, it acknowledged that transporting veterans did have a cost. The goal of the Task Force was to recommend creative ways to leverage existing resources to meet veteran transportation needs, as well as find creative financing through existing federal monies (such as VA mileage, grants, pilot projects, etc.) to establish a consistent and efficient veteran medical transportation system in Oregon.

For a full copy of the report refer to Attachment 23: Legislative Task Force on Veterans' Transportation Final Report October 2010.

# **Veterans Transportation Initiative**

President Obama called on Federal agencies to support veterans and military families through a coordinated network of support systems. Staff members of the Federal Interagency Coordinating Council on Access and Mobility (CCAM), which includes the U.S. Departments of Transportation, Veterans Affairs (VA), Labor, and Health and Human Services worked with the Defense Department's Office of Wounded Warrior Care and Transition Policy to move this initiative forward.

### CCAM acknowledges that:

Access to reliable and affordable transportation is an essential ingredient to empower today's service members, veterans, and their families to participate fully and successfully in their communities and achieve economic stability. Many families are struggling to meet mobility needs with one or more family members deployed overseas. Moreover, our fighting forces returning from overseas face a range of physical, mental health, and economic challenges that directly affect their families as they strive to rejoin their communities.

A new Veterans Transportation and Community Living Initiative (VTCLI) focused on these challenges:

- Support the creation or expansion of community-based "one-call" transportation centers and mobility management strategies to include veteran and military family-directed resources;
- Target outreach efforts to the military and veteran communities through veterans service organizations and military family support organizations; and
- Provide technical assistance to selected communities to improve awareness, effectiveness, and coordination of existing transportation resources.

Under this initiative, LTD has been awarded a capital grant to replace and augment the 25-year-old communications structure and systems used in the Ride Source Call Center with current technology. The software system is being replaced to (1) ensure seamless interaction with modern software technologies, (2) allow for growth and adding new services, and (3) take into account significant data security needs for privacy and asset protection. A new telephone system with advanced capabilities will replace the old service. Along with the capital elements of the project, a Work Group has convened to explore transportation options and choices for local veterans and military families.—The new phone system became operational in fall 2015, and the software is expected to be operational in the late summer of 2016.

# **Transportation for Lane County Veterans**

LTD teamed up with Lane County Veteran's Services to offer transportation to and from VA medical and Lane County Veterans Services appointments. Funding from LTD's Accessible Services Fund was reprogrammed to pay and arrange for trips through the Ride Source Call Center.

In calendar year 2010 (before starting the Veterans' Transportation Program), 76 veterans made total of 548 one-way trips for total average of 45 trips per month through the Ride Source Call Center. Service was incidental with no special attempt to identify veterans within the system or to promote transportation specifically to veterans. Transportation is now offered to veterans for medical and local Veteran's Services appointments at no cost. Non-veteran family members needing to get to service appointments also can use the service. Veterans are now identified through the assessment process as well as self-identification upon requesting services and can get rides through this and other programs offered through the Call Center. Most trips funded are

for critical medical needs or to provide a short term stop gap solution while a permanent transportation plan is implemented in conjunction with the VA Hospitals, Disabled American's Veteran's transportation program, and volunteers.

Over the last six months (April 1 through September 30, <u>2016</u>2012) 543 one-way trips have been provided. Most but not all trips are local. This chart shows trips by destination:

# Number of One-Way Trips to Veterans by Facility from April through September 2012

<b>Trip Destination</b>	April	May	June	July	<b>August</b>	September	Total
VA Clinic	48	35	46	45	36	44	254
VA Mental Health	18	21	20	28	30	49	166
McDonald's Rest (VA							
bus stop)	6	10	5 8	9	6 5	10	46
Veterans Counseling	8	10	8	6	5	4	41
VA Hospital Roseburg, OR	2	2	2	6	10	0	22
VA Services of Lane County	0	0	2	4	3	2	11
VetLift (Homeless services)	0	0	0	0	0	1	1
VA Hospital Portland, OR	0	0	1	0	0	0	1
VA Hospital Walla Walla, WA	0	1	0	0	0	0	1
VA Community Counseling	0	0	0	0	0	0	0
	82	79	84	98	90	110	543

This chart shows trips by transportation program type:

# Number of One-Way Trips to Veterans by Program Type from April through September 2012

Program Type	<b>April</b>	May	June	July	<b>August</b>	September	Total
RideSource ADA	52	38	37	45	29	18	219
Non-Emergency Medical							
Transportation (NEMT)	24	24	22	24	20	36	150
Community Non-Medical	0	0	0	0	2	6	8
Vets Transportation	6	17	25	29	39	50	166

82 79 84 98 90 110 **543** 

#### [CR7]

This update to the Plan responds directly to the Task Force on Veterans' Transportation recommendation to:

Ensure that transportation for veterans is included in all local Public Transit-Human Services Coordinated Transportation Plans

To further improve coordination and follow-up on other Task Force recommendations veterans are identified during initial contact and follow-up interviews by Transportation Coordinators with the goal of making sure that veterans are aware of transportation options available in the area.

On November 10, 2012, LTD participated in the 2012 LTD is a regular participant with the annual Lane County Stand Down, providing transportation service information to all attendees, including regular bus service, half-fare programs, transportation options, bicycle, pedestrian and RideSource services.

Stand Down was a term first used to describe the relief of a military unit on the front lines. By moving the unit to the comparative safety of the rear, it could rest, eat hot food, train, and re-equip before going back into action.

Today, Stand Down is the annual celebration where local veterans are exposed to a variety of exhibits, and programs, many of which are unknown by the average veteran. A Stand Down operates at several levels; for Veterans and their families, a variety of programs from the VA, local support organizations, and fraternal organizations are exhibited and; for veterans who are homeless, there are basic services, haircuts, clothes, and a hot meal.

A study by the National Center for Transit Research shows how coordination between Veteran's Administration medical centers and public transportation can lower costs and increase access to services for Veteran's living in rural areas. This is applicable to Lane County Veteran's who currently must travel in some cases up to three hours for care at one of the two hospitals located in Oregon. A large Community Based Outpatient Care Clinic has been built in Eugene and is now served by the regular LTD fixed route. However, the building sits back quite a ways from the main road. To enable veteran's with disabilities to use the fixed route, the Clinic has instituted a volunteer assistance service using golf carts to take people not just to and from the bus, but also to and from parking lots. While this is helpful in the Eugene/Springfield Metro area, the issues continue to exist for veteran's living in rural Lane County.

For more information on the NCTR report please refer to Attachment 4: Improving Veteran Mobility in Small Urban and Rural Areas.

# Section 3: Needs Assessment and Local Planning

### **Needs Assessment**

Senior and Disabled Services (S&DS) a division of the Lane Council of Governments periodically conducts research in conjunction with their responsibility as the Area Agency on Aging:

Based on population estimates from the US Census Bureau, 2010 - 2014 American Community Survey 5-Year Estimates, 105,618 adults age 60+ and individuals with reported disabilities age 18 – 59 reside in Lane County. Based on this, a total of 1,030 surveys needed to be returned to make a statistically valid survey with a 99% confidence level and a margin of error confidence interval of plus or minus 4. A total of 1,409 useable surveys were returned. Between December 1, 2010 and January 1, 2011, LCOG Senior & Disabled Services distributed 4,649 surveys to adults who were at least 60 years of age and resided in Lane County. There were 1,027 useable surveys returned. As a result of the return rate, this survey meets a 99 percent confidence level with an error rate of +/- 4 percent. The survey explored the views of adults meeting the age requirements regarding housing, in-home support needs, transportation, health and nutrition, financial security, and care giving.

Among the stated concerns identified in the needs assessment is not only a lack of transportation (particularly in rural areas) but also the availability of affordable specialized transportation services. Of all survey respondents, over 30% of those with a disability stated they did not have dependable transportation, just under 30% need a different specialized transportation service, and just under 20% do not use transportation due to the cost. Community planning which results placing new living facilities near bus lines has shown to increase access for medical and shopping needs.

More information can be found in Attachment 5: Senior & Disabled Services 2016 Community Needs Assessment.

Key findings in the area of transportation are:

- Older adults who live alone have a greater need for accessible/specialized transportation services. Sixteen percent of survey respondents reported needing accessible/special transportation. Nearly 60 percent of these individuals live alone.
- Seven percent of survey respondents reported being unable to shop for groceries, and out of this group, 71 percent live by themselves.
- Non-medical transport continues to be an issue. Many low income seniors cannot afford to pay for their own transportation needs which leaves them socially isolated.

Within their report, S&DS highlighted these actions to improve transportation:

- Continue coordination between S&DS and LTD to utilize a fully integrated transportation model to assess the transportation needs of older adults and people with disabilities.
- Utilize the Aging and Disability Resource Connection to inventory existing transit services and analyze accessibility, cost, and transit utilization to fully explore existing transportation and identify gaps in services.
- Advocate for and identify potential community partners that provide transportation to rural and socially isolated seniors.
- Advocate for the continued creation of public transportation services and pedestrianfriendly environments for older adults and people with disabilities.
- Advocate for expansion of transportation services that make shopping, recreation opportunities, and essential services available to those who need it

Lane Transit District also conducts research. LTD uses origin and destination surveys to ask riders about various elements of LTD fixed-route service that is not working for them and where they would like to see improvements. A new survey was conducted in October 2011. An on-board survey was administered to riders on a random sampling of LTD buses. Surveyors provided self-administered questionnaires to every rider on those runs.

The report presents results of a survey of 6,647 LTD passengers. The survey tracks many of the same factors addressed in previous surveys conducted since 1999. A significantly revised questionnaire was utilized in 2011 to provide expanded origin/destination information.

This question was new to the survey:

What type of assistance, if any, did you need to use the bus today?

These follow-up options were provided:

- No assistance
- Lift/Ramp
- Stop announcements
- · Driver assistance
- Travel training
- Personal assistance
- Service Animal
- Other: fill in the blank

Other questions like, "In the past 30 days, how well has LTD met your transportation needs," helped identify specific needs of riders who reported needing some assistance when using the bus. Here are some of the findings reported by CJI Research:

Of all LTD riders, 4.8 percent indicated that they needed some type of assistance in using the bus on the day of the survey. Conversely, of course, this means that 95.2 percent did not need assistance. While relatively few riders need assistance, some of those, particularly those in need of travel training, those who use service animals, and those who require a personal assistant, all have very small subsamples within the study.

Among those who needed assistance, the most common need is for bus stop announcements (2.2%). The second most common need is for a lift or ramp to board the bus (1.7%). The needs vary among the rider segments. For example, those who ride only occasionally, from one to three days a week, are more likely to need a lift or ramp, while those who ride seven days a week are more likely to rely on stop announcements.

Do those who need assistance feel that their needs are being met? Generally, the answer was yes. However, there were some exceptions. Those who need a lift or ramp to board a bus were more likely than others to say that their needs were not being met very well. Specifically, 6 percent gave a rating of one, and another 17 percent gave a rating of two, for a total of 23 percent giving a negative rating. This compares to only 10 percent of the total LTD sample who gave such low ratings. Although the subsample is extremely small (n = 27), those who rely on a service animal appeared to give the most negative rating of all in terms of their needs being met. A total of 51 percent of this small group gave a rating of only one or two, more than five times the negativity of the total sample.

Of course, these are perceptions, and this result does not mean that LTD is not doing all it can to meet the needs of those who need assistance. However, the results may indicate a need to further examine these aspects of service to those needing assistance. In spite of the relative dissatisfaction in terms of having their needs met by current LTD service, those who need special assistance actually are more likely than others to indicate that they are likely to use LTD more often in 2012 than they were in 2011. It is unclear from the data why this specific sub-population would expect to use LTD more rather than to the same extent they now use it.

With the exception of those who needed a lift or ramp to board the bus, most of those who indicated a need for assistance tended to follow the same general age profile as the total ridership. Those who needed a lift or ramp to board the bus, however, tended to be older than the norm for other riders. Of those who needed a lift or ramp, 40 percent were over 60 years of age compared to only 6 percent of the total ridership sample. Those who required driver assistance also were more likely than others to be over 60 years of age (12%), but the difference is much less than for those who required a lift or ramp.

The other groups, however, were similar in profile to the general ridership in terms of age. For example, of those who rely on stop announcements, 37 percent were under 20 years of age compared to 33 percent of the total ridership.

Such findings provide insight into the service needs and satisfaction of current LTD riders who say they need some type of assistance and illuminates system characteristics that are important to these older adults and younger people with disabilities.

### Looking at age in general:

LTD ridership tends to fall in a relatively younger, economically active age group. That is, riders are primarily employed or preparing for employment. In 2011, only 6 percent of all LTD riders were over 60 years of age. However, this is 2 percent higher than in 2007 and 2004. The increase may have to do with the fact that the baby-boomers are entering their 60s and constitute a larger proportion of the population.

Riders were asked to rate the importance of a wide variety of potential service improvements and then to select those most important to them personally. While not appreciably different, there were some slight variations between the expressed preferences of riders needing assistance compared to the general ridership.

Top ranked improvements for riders needing assistance were:

- 1. More frequent weekend service
- 2. Schedule information at more bus stops
- 3. Later evening service
- 4. More bus stop seating
- 5. More frequent weekday service

For total ridership the ranking went like this:

- 1. Later evening service
- 2. More frequent weekend service
- 3. Schedule information at more bus stops
- 4. More frequent weekday service
- 5. More bus stop shelters

## **Local Planning**

The Lane Livability Consortium is a collaborative effort focused on identifying opportunities and connections with core regional plans primarily in the areas of land use, transportation, housing,

economic development, and public health. The Consortium is working under a Sustainable Communities Regional Planning Grant starting in 2011 and finishing in 2014.<sup>2</sup>

Lane Livability conducted an assessment of regional planning efforts and held a community planning workshop to find ways to increase interagency collaboration. Plans were identified and reviewed in the core areas of interest. The Lane Coordinated Plan was included in the review. (For a copy of the review, refer to Attachment 3: Plan Summary: Lane Coordinated Public Transit-Human Services Transportation Plan by the Lane Livability Consortium.)

The Lane Coordinated Plan is one of a multitude of plans addressing specific issues or geographic areas. The Consortium offers that there are many opportunities to better connect and leverage the goals and strategies embodied in local plans. And, that there are "cross-cutting" issues that should be recognized amongst planning professionals. By providing a regional forum, the Lane Livability Consortium provides an opportunity to expand the planning context of the Lane Coordinated Plan.

In an effort to enhance the health of the community, four agencies including Lane County Public Health, Peace Health Oregon West, Trillium CCO, and the United Way of Lane County teamed up to perform and complete a comprehensive Community Health Assessment (CHA) and from that assessment develop a Community Health Improvement Plan (CHIP). The focus of the study was to determine strategies for improving health outcomes of Lane County residents. (See Appendix 6 and 7 for the CHA and CHIP).

### Some transportation related findings include:

- Transportation access issues are of particular interest, especially in rural areas of the county.
- Affordable transportation options, access to care for rural consumers are greater for those receiving services under the Oregon Health Plan than the general public.
- 5.8% of key informants felt transportation was a barrier to improving health and quality of life in Lane County (total number of informants = 36).

The CHA provided support for the development of the CHIP. The CHIP identified five priorities for Lane County agencies to focus on to improve the health of Lane County Residents. Health priorities with a transportation strategy included:

Priority 3, Strategy 6: Prevent and reduce obesity by supporting statewide efforts to secure funds and support active transportation projects

<sup>&</sup>lt;sup>2</sup> The project is funded through a grant from the U.S. Department of Housing and Urban Development (HUD) and contributions of local partner agencies.

Priority 5, Strategy 5. Improve access to care by improving access to health care for rural Lane County residents.

# Section 4: Coordination Practices and Projects

### **Coordination Practices**

As noted in the 2009 Lane Coordinated Plan (pages 1-5 and 1-6):

From the 1970s to the mid-1980s, a number of administrative and service changes within local public transit and human services laid the groundwork for the expansion of a human services transportation network. During this period, a protracted economic recession in Lane County forced the consolidation of services through coordination and cost savings measures.

The coming together of a consortium of small, human services agencies to pool resources and make agreements to use Dial-a-Ride service rather than competing with each other for limited grant dollars was a significant development. These individual agencies no longer had to purchase and maintain their own vehicles, employ driving staff or obtain insurance. The foundation of that enterprise is present today in the Ride*Source* program that includes multiple relationships, contracts, and understandings that represent 25 years of coordination between public transportation and human service agencies in Lane County.

Cost savings through grouped purchasing, cost sharing, ride sharing, and creating economies of scale are the underpinnings of these core practices:

- One-Call Center with multiple transportation providers
- Consolidated vehicle purchasing and equipment acquisition
- Consolidated fleet management and vehicle preventive maintenance
- · Cost sharing agreements
- Ride sharing

Matching a person's needs and capabilities with the most appropriate and least cost service available, reducing service duplication, reaching beyond the metro area, and offering a range of options through a single contact happens through:

- One-Call Center with a variety of transportation services
- Personalized evaluation of transportation needs and capabilities
- Interagency partnerships
- Rural and small city services

# **Linking Needs and Priorities with Practices and Projects**

A number of unmet transportation needs were identified in the 2009 Lane Coordinated Plan (pages 5-1 through 6-3). Generally, these fell into the following categories:

- 1. Un-served or underserved areas (service not available where it is needed)
- 2. Lack of availability (service not available when it is needed)
- 3. Unconventional services (people need services different than traditional fixed route and paratransit)
- 4. Affordability (cost of public transportation is difficult for some)
- 5. Lack of awareness (need additional information about transportation services)
- 6. Training (need assistance using transportation services)

These priorities were established in the 2009 Lane Coordinated Plan (pages 6-4 and 6-5) to help guide the selection of projects. The wording was updated to maintain relevancy:

**First Priority**: Maintain sustainable service levels of viable operations – ensure transportation services and connections remain at a sustainable level for people who depend on public transportation services in Lane County.

**Second Priority**: Respond to growth within existing services – Allow for measured increases where demand points to an unmet need within the available resources.

**Third Priority**: Respond to emerging community needs – Take action on opportunities to optimize coordination, develop new partnerships and to accommodate newly identified transportation needs and gaps.

For the period of July 1, 20145 through June 30, 2013 [crs]7, a variety of transportation projects were supported. All were considered high priority projects because of helping to maintain the established transportation service network. Projects dealt with a previously identified service need and contributed to an integrated service approach.

The following table connects service needs and system goals with coordination practices or strategies and specific projects:

Need	Practice (Strategy)	Project Description
<ul> <li>Maintain and improve transportation services throughout Lane County</li> <li>Manage costs</li> </ul>	<ul> <li>Consolidated vehicle purchasing</li> <li>Cost sharing agreements</li> <li>Ride sharing</li> <li>Interagency partnerships</li> </ul>	Replacement Vehicles – LTD buys and then leases accessible vehicles to non-profit and for-profit businesses and local government agencies that serve older adults or people with disabilities and operate in Lane County. These agencies include:  • Special Mobility Services (RideSource and Oakridge)  • South Lane Wheels (Cottage Grove/Creswell)  • River Cities Taxi (Florence)  • Willamalane Senior Center  • City of Eugene – Hilyard Community Center Adaptive Recreation Program
<ul> <li>Maintain and improve transportation services throughout Lane County</li> <li>Manage costs</li> </ul>	<ul> <li>Consolidated fleet management and vehicle preventive maintenance</li> <li>Cost sharing agreements</li> <li>Interagency partnerships</li> </ul>	Vehicle Preventive Maintenance (PM) – This covers some costs for preventive maintenance for the fleet of accessible vehicles that serve older adults and people with disabilities in Lane County. These agencies include:  • Special Mobility Services (RideSource and Oakridge)  • South Lane Wheels (Cottage Grove/Creswell)  • River Cities Taxi (Florence)

Need	Practice (Strategy)	Project Description
Unconventional services     Unique needs and circumstances associated with mental health issues and disability	Interagency partnerships	Mental Health Transportation - White Bird Clinic (WBC) is a crisis intervention, mental health counseling and information and referral center. The Counseling Program serves adults on the Oregon Health Plan (Medicaid). Grants fund low-income and homeless individuals. WBC arranges transportation primarily to mental health treatment and other essential activities.
<ul> <li>Lack of awareness</li> <li>Training</li> <li>Manage costs</li> </ul>	<ul> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of needs and capabilities</li> <li>Interagency partnerships</li> </ul>	Transit Training & Hosts – Alternative Work Concepts (AWC) provides one-on-one training on how to effectively use TheBus! and EmX. AWC employs Transit Hosts who assist with prescheduled transfers, support training activities, and provide ride and schedule information at the downtown Eugene Station each weekday. AWC also conducts in person visits to evaluate transportation needs and capabilities. Transitions riders from paratransit to fixed-route
Meet demand for Americans with Disabilities Act (ADA) complementary paratransit service	<ul> <li>One-Call Center with multiple transportation providers</li> <li>Ride sharing</li> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of transportation needs and capabilities</li> <li>Interagency partnerships</li> </ul>	RideSource ADA – This is curb-to-curb-origin to destination service within the metro area for people unable to use regular bus service (some or all of the time) because of a disabling condition. RideSource ADA meets ADA requirements. It is operated by Special Mobility Services, Inc. a non-profit agency. Transportation Coordinators from Alternative Work Concepts and Senior and Disabled Services (S&DS) make in person evaluations to determine eligibility. S&DS is a division of the Lane Council of Governments and the local Area Agency on Aging.

Need	Practice (Strategy)	Project Description
<ul> <li>Unconventional services – riders need assistance with packages</li> <li>Affordability</li> <li>Manage costs</li> </ul>	<ul> <li>Ride sharing</li> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of transportation needs and capabilities</li> <li>Interagency partnerships</li> </ul>	RideSource Shopper – The Shopper is a low cost, once a week neighborhood shopping shuttle operating within the metro area. The driver assists people with their groceries and packages. It is operated by Special Mobility Services, Inc. a non-profit agency. Transportation Coordinators from Alternative Work Concepts and Senior and Disabled Services make in person evaluations to determine eligibility.
Un-served or underserved areas     Unconventional services – riders need high level of assistance in order to travel	<ul> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of transportation needs and capabilities</li> <li>Interagency partnerships</li> <li>Rural and small city services</li> </ul>	Volunteer Escort – This is a door- through-door service for people who need a high level of assistance and do not have other transportation options. Special Mobility Services (SMS), Senior and Disabled Services, and the Senior Companion Program all participate in the support and recruitment of volunteers. Volunteer drivers using their own cars receive a per mile reimbursement. SMS volunteers often use agency vehicles. The program serves older adults and people with disabilities throughout Lane County. Transportation Coordinators from Senior and Disabled Services make in person evaluations to determine eligibility.

Need	Practice (Strategy)	Project Description
Unconventional services – parents with disabilities who have young children need transportation support to help optimize child development	<ul> <li>Cost sharing agreements</li> <li>Ride sharing</li> <li>One-Call Center with a variety of transportation services</li> <li>Interagency partnerships</li> </ul>	Pearl Buck Center (PBC) Preschool Transportation – PBC's preschool program is designed to support parents with disabilities and foster optimal development in their children. Most children whose parents have special needs are born with the potential for average and above-average intelligence. Preschool transportation is a shared cost, dedicated service offered through the Ride Source Call Center and the children do better when they are able to participate regularly. <sup>3</sup>
<ul> <li>Unconventional services</li> <li>Manage costs</li> </ul>	<ul> <li>Cost sharing agreements</li> <li>Ride sharing</li> <li>One-Call Center with a variety of transportation services</li> <li>Interagency partnerships</li> </ul>	Transportation to Work for Persons with Developmental Disabilities – Transportation for eligible individuals that get vocational benefits through Lane County Developmental Disabilities Services. This is shared cost service offered through the RideSource Call Center. Service is managed through an intergovernmental agreement with the Oregon Department of Human Services.
Unserved or underserved areas	<ul> <li>Consolidated vehicle purchasing</li> <li>Consolidated fleet management and vehicle preventive maintenance</li> <li>Ride sharing</li> <li>Interagency partnerships</li> <li>Rural and small city services</li> </ul>	South Lane - The non-profit agency, South Lane Wheels (SLW) provides local Dial-a-Ride services that are open to the general public in Cottage Grove, Creswell, and surrounding rural areas. SLW takes people into Eugene and Springfield for medical appointments and is a provider for the Ride Source Call Center. The agency also operates a local shuttle supported by the City of Cottage Grove and the Rural General Public Program for areas with a population less than 50,000.

<sup>&</sup>lt;sup>3</sup> This is a long-standing relationship established when PBC agreed to join a newly created transportation consortium. In 1992, the Lane Council of Governments (under the direction of LTD) submitted the first coordinated vehicle grant applications thereby consolidating ownership of vehicles and oversight of services.

Need	Practice (Strategy)	Project Description
Un-served or underserved areas     Unconventional services – riders need high level of assistance in order to travel	<ul> <li>Consolidated vehicle purchasing</li> <li>Consolidated fleet management and vehicle preventive maintenance</li> <li>Ride sharing</li> <li>Interagency partnerships</li> <li>Rural and small city services</li> </ul>	West Lane – The Rhody Express is a local shuttle service within the City of Florence that is operated by River Cities Taxi. The shuttle is supported by the City of Florence and the Rural General Public Program for areas with a population less than 50,000. River Cities Taxi is also a provider for the Ride Source Call Center.
Un-served or underserved areas	<ul> <li>Consolidated vehicle purchasing</li> <li>Consolidated fleet management and vehicle preventive maintenance</li> <li>Ride sharing</li> <li>Interagency partnerships</li> <li>Rural and small city services</li> </ul>	East Lane – Service for the community of Oakridge includes demand response service as a provider for the Ride Source Call Center and an intercity shuttle called the Diamond Express, both operated by Special Mobility Services. The Diamond Express makes three runs each weekday between Oakridge and the metro area as an intercity connection and is open to the general public. The midday run provides curb-to-curb assistance in the metro area to better serve older adults and people with disabilities. It is supported by the City of Oakridge and the Intercity Passenger Program that connects communities with a population of 2,500 to the next larger market economy and to other transportation services.
Unconventional services - short term transportation intervention	<ul> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of transportation needs and capabilities</li> <li>Interagency partnerships</li> <li>Rural and small city services</li> </ul>	Crucial Connections - Transportation to relieve an immediate (non-emergency) or evolving situation when no other transportation option can be identified; offers quick relief to allow time to formulate long-term resolution. Crucial Connections pays for a limited number of trips that are situation specific. Service involves cooperation with human service workers and creative problemsolving.

Need	Practice (Strategy)	Project Description
Lack of awareness	<ul> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of transportation needs and capabilities</li> <li>Interagency partnerships</li> </ul>	Veterans Services Transportation  – Transportation for veterans to get to VA medical and local Veteran's Services appointments at no cost. Non-veteran family members needing to get to service appointments can also use the service.
Un-served or undeserved areas     Unconventional services     Lack of awareness	<ul> <li>Cost sharing agreements</li> <li>One-Call Center with a variety of transportation services</li> <li>Personalized evaluation of needs and capabilities</li> <li>Interagency partnerships</li> </ul>	Mobility Management and Service Coordination – In person (most often in the home) transportation assessments to determine the transportation needs and capabilities of older adults, people with disabilities and people with low incomes. Transportation Coordinators from Alternative Work Concepts and Senior and Disabled Services make these evaluations. Results are recorded in a centralized database - TAMS
Unconventional services     Manage costs	<ul> <li>One-Call Center with multiple transportation providers</li> <li>Cost sharing agreements</li> <li>One-Call Center with a variety of transportation services</li> <li>Interagency partnerships</li> </ul>	Medical and Community Non-Medical Transportation under Medicaid – The Ride Source Call Center administers two-three Medicaid programs: (1) Non-Emergency Medical Transportation (NEMT) for the Oregon Health Authority; (2) NEMT for Trillium Community Health Plan; and (23) Community Non-Medical transportation. Medicaid NEMT is for people who qualify for Oregon Health Plan (OHP) Plus-medical coverage and receive that service either directly through the Oregon Health Authority or through Trillium. In addition, some non-medical trips are arranged for Medicaid recipients who have a qualifying care plan that is managed through a Senior and Disabled Services Case Worker. The latter is based on a cost sharing agreement between LTD and the Oregon Department of Human Services.

Need	Practice (Strategy)	Project Description
Unconventional services     Manage costs	One-Call Center with multiple transportation providers     Cost sharing agreements     Ride sharing     One-Call Center with a variety of transportation services     Personalized evaluation of transportation needs and capabilities     Interagency partnerships     Rural and small city services	Lane County Coordination – The RideSource Call Center System Improvement project is a necessary upgrade to call taking, scheduling, and dispatch systems. This project involves replacing and augmenting a 25-30 year old structure and systems with current technology. LTD determined the software system must be replaced for effective operations and continuity to (1) ensure seamless interaction with modern software technologies, (2) allow for growth and adding new services, and (3) take into account significant data security needs for privacy and asset protection.

# **Section 5: Resources**

# **Funding Sources**

There is a mix of federal, state, and local funds that pay for transportation projects that help meet mobility needs of older adults and people with disabilities and are managed through LTD's Accessible Services Fund.

Money coming from these federal programs is anticipated over the next two to three years.

**Older Americans Act** – Senior and Disabled Services (S&DS) is the local Area Agency on Aging and is authorized by the Older Americans Act to receive funds to develop, coordinate, and arrange for services. Older Americans Act programs serve older adults and adults with disabilities, age 18-64. Transportation remains a priority in the Area Plan and there is an annual allocation that supports Volunteer Transportation.

§5310 Enhanced Mobility of Seniors and Individuals with Disabilities - This program is intended to enhance mobility for older adults and persons with disabilities by providing funds for programs to serve the special needs of transit-dependent populations beyond traditional public transportation services and Americans with Disabilities Act (ADA) complementary paratransit services. MAP-21 combined the §5317 New Freedom funding with §5310. For more information, refer to Attachment 4: Fact Sheet: Enhanced Mobility of Seniors and Individuals with Disabilities Section 5310, U.S. Department of Transportation, Federal Transit Administration.

§5311 Formula Grants for Rural Areas – This funding goes to States for the purpose of supporting public transportation in rural areas with population of less than 50,000. In 2012, MAP-21 combined §5316 Job Access Reverse Commute with §5311 funding. For more information, refer to Attachment 5: Fact Sheet: Formula Grants for Rural Areas Section 5311, U.S. Department of Transportation Federal Transit Administration.

§5316 Job Access Reverse Commute - The purpose of the JARC program is to fund local programs that offer job access services for low-income individuals. Mobility management activities are eligible under JARC. While the §5316 JARC program has been repealed under MAP-21, LTD has funds from previous years that will be dedicated to projects that meet formerly established program criteria. For more information, refer to Attachment 6: Fact Sheet: Program Consolidation, U.S. Department of Transportation Federal Transit Administration.

**§5317 New Freedom** - The New Freedom formula grant program aims to provide additional tools to overcome existing barriers facing Americans with disabilities seeking integration into the work force and full participation in society. The New Freedom Program seeks to reduce barriers to transportation services and expand the transportation mobility options available to people with disabilities beyond the requirements of the ADA. While the §5317 New Freedom

### program has been repealed under MAP-21, LTD has funds from previous years that will be

dedicated to projects that meet formerly established program criteria. For more information, refer to Attachment 6: Fact Sheet: Program Consolidation, U.S. Department of Transportation Federal Transit Administration.

Medicaid Non-Emergency Medical (NEMT), Community Transportation and Vocational Transportation for Persons with Developmental Disabilities - NEMT is a benefit for some people who are eligible for Medicaid to make sure that they can get to covered medical appointments and treatment. In Oregon, people who qualify for Oregon Health Plan (OHP) Plus medical coverage and do not have any other transportation are provided with the least cost, most appropriate transportation option available. Oregon is known for having developed community-based residential options under Medicaid using waivered services as an alternative to nursing home placements. Transportation for trips other than to medical services is provided as an important support service for community-based housing choices. Under a different type of waiver program for eligible individuals with developmental disabilities transportation to and from work is provided. These latter two programs are under cost sharing agreements with local matching resources covering approximately 50 percent of the full cost of these trips.

The sole dedicated resource from the State of Oregon to support public transportation comes from the Special Transportation Fund for the Elderly and People with Disabilities (STF):

**Special Transportation Fund** - Agencies designated by statute (transportation districts, county governments, and Native American tribal governments) are given an annual formula-based allocation from the cigarette tax and other state resources approved by the Legislature that go into the Fund. This money often is used as local match for federal grants. A portion of the STF funds that are allocated for Lane County are dedicated to projects that operate within LTD's service district (In-District), and the remaining funds are distributed to providers who operate outside of LTD's service district (Out-of-District). On a bi-annual basis, there typically are discretionary grant funds that also are available from this program.

Other resources include fares collected from passengers, local contributions from small cities and agencies to support specific projects of interest, and a significant contribution from the LTD General Fund. These local revenues help pay for ADA complementary paratransit and associated services and meet local match requirements for federal and state grants, as needed.

The following charts show revenues and project budgets for FY 162 and FY173 from LTD's Accessible Services Fund:4

<sup>&</sup>lt;sup>4</sup> LTD's Medicaid Fund revenue and expenses and capital projects are not included.

# Accessible Services Fund Two Year Revenue Budget for FY12 FY16 and FY173

Revenue	FY12 Actual	FY13 Budget
Older American Act	10,222	10,200
§5310 Enhanced Mobility	1,136,784	1,460,300
§5311 Formula Grants for Rural Areas	142,382	154,900
§5316 Job Access Reverse Commute	187,838	91,500
§5317 New Freedom	15,588	152,000
Medicaid Non-Emergency Medical (NEMT)	28,382	0
Developmental Disabilites Services	430,979	488,300
Special Transportation Fund	585,708	473,000
Fares	317,948	319,500
Small City - Florence and Oakridge	40,000	41,800
Agency - Pearl Buck Center	52,700	48,500
LTD General Fund	1,906,946	2,563,300
Total	\$ 4,855,477	\$ 5,803,300

# Accessible Services Fund Two Year Project Budget for FY126 and FY13

Project	FY12 Actual	FY13 Budget
Vehicle Preventive Maintenance	164,580	180,500
Mental Health Transport - White Bird Clinic	79,466	86,600
Transit Training & Hosts	122,188	130,000
RideSource ADA	2,754,779	3,525,000
Ride <i>Source</i> Shopper	94,628	98,000
Volunteer Escort	88,769	128,500
Pearl Buck Preschool	143,825	152,000
Developmental Disabilites Services	702,760	700,000
South Lane - Cottage Grove	94,779	104,000
West Lane - Florence	156,323	172,000
East Lane - Oakridge	183,852	188,000
Lane County Coordination	29,439	45,000
Crucial Connections & Veterans	2,973	18,200
Mobility Mgt & Service Coordination	237,116	275,500
Total	\$ 4,855,477	\$ 5,803,300

# **Section 6: Public Review and Comments**

### **Community Outreach Prior to Public Comment:**

September 18, 2012 – Presentation of Plan Update process to LTD Accessible Transportation Committee; information item.

November 5, 2012 - Presentation of Draft Plan Update to Housing Policy Board; information item.

November 7, 2012 – Presentation of Draft Plan Update to United Way Advisory Committee and Human Services Network; information item.

November 12, 2012 - Presentation of Draft Plan Update to LTD Board of Directors; information item.

January 10, 2013 - Presentation of Draft Plan Update to Metropolitan Policy Committee; information item.

January 15, 2013 – Update on Draft Plan Update to LTD Accessible Transportation Committee; information item.

### **Outreach Activity – Public Hearing and Adoption**

February 5, 2013 - Notice of Public Hearing printed in Eugene Register Guard; posted on LTD website; posted on LTD Facebook.

February 19, 2013 – Presentation and Public Hearing on Draft Plan Update at LTD Accessible Transportation Committee (ATC) meeting. A motion was made and ATC unanimously approved forwarding their recommendation that the LTD Board adopt the Plan.

February 20, 2013 – Presentation on Plan Update at LTD Board of Directors. Plan Update is adopted unanimously.

#### **Public Comment**

No input was received during the public comment period.