

Public Transit-Human Services Transportation Plan (Coordinated Plan Updates) Final

Executive Summary

Prepared for the
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Division of Public Transit

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COORDINATED TRANSPORTATION PLANS-EXECUTIVE SUMMARY

OVERVIEW

This Executive Summary is an overview of the Public Transit-Human Services Transportation Plan Updates (Coordinated Plan Updates). The planning effort began in December 2010 to update the Coordinated Public Transit-Human Services Transportation Plans developed in 2007 for all counties and Metropolitan Planning Organizations in the State. Work under this project was undertaken on behalf of the West Virginia Department of Transportation, Division of Public Transit (DPT).

Coordinated Plan Updates were facilitated in response to the requirements set forth in the original authorizing legislation for the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users, (SAFETEA-LU). The legislation was enacted on August 10, 2005, and codified in 49 U.S.C. Chapter 53. It provided guaranteed funding for Federal surface transportation programs through FY 2009. Since October 1, 2009, SAFETEA-LU has been under multiple continuing resolutions.

In order to be eligible for the Federal funding, a locally developed, Coordinated Public Transit-Human Services Transportation Plan must be prepared that identifies the transportation needs of individuals with disabilities, older adults, and people with low incomes, provides strategies for meeting those needs, and prioritizes transportation services for funding and implementation. At minimum, the coordinated plan should follow the update cycles for metropolitan transportation plans: four years in air quality nonattainment and maintenance areas and five years in air quality attainment areas). The original coordinated plans throughout West Virginia were completed in 2007. Thus, updates to the Plans were required for the 2012-2016 planning horizon.

Coordinated Transportation Plans are an eligibility requirement for the following Federal Transit Administration (FTA) grant programs:

Transportation for Elderly and Persons with Disabilities (Section 5310) – This program (49 U.S.C. 5310) provides formula funding to states for the purpose of assisting private nonprofit groups, Federally recognized tribes, and qualified local public bodies in meeting the transportation needs of the elderly and persons with disabilities when the existing transportation service is unavailable, insufficient, or inappropriate to meeting these needs.

Job Access and Reverse Commute (JARC) Program (Section 6316) – The purpose of this grant program is to develop transportation services designed to transport people with low incomes to and from jobs and job related activities. Job Access grants are intended to provide new transit service to assist welfare recipients and other low-income individuals in getting jobs, training, and childcare.

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New Freedom Initiative (Section 5317) – A new funding program which began in Federal Fiscal Year 2006, New Freedom is designed to encourage services and facility improvements to address the transportation needs of individuals with disabilities that go beyond those required by the Americans with Disabilities Act.

Funding Eligibility Requirements

Certain coordinated transportation stakeholders are eligible for additional funding through the FTA programs described above. Criteria for eligible applicants to the Section 5316 and 5317 programs are as follows:

- ◆ Public entities providing public transit services; or,
- ◆ Private, nonprofit entities designated by local government to provide public transit services.

Criteria for eligible applicants to Section 5310 are as follows:

- ◆ Private, nonprofit 501(c) (3) corporations;
- ◆ Public bodies identified by the state as lead agencies in a coordination project; or,
- ◆ Public bodies that certify that no private, nonprofit corporation exists within their jurisdiction for the provision of elderly and disabled transportation.

Organizations that are not eligible applicants for Sections 5316, 5317, or 5310 may still benefit from those programs through agreements with eligible organizations and they should seek partnerships and formal contractual agreements with an eligible applicant in order to achieve the coordinated transportation goals.

West Virginia’s Coordinated Transportation Funding Resources and Application Process

Local agencies are reminded that available funding for new services is limited. The application process for Federal funding associated with the coordinated transportation strategies outlined in this report must be requested through a formal grant application process. The State receives an allocation that is competitively bid among all eligible organizations in the State that operate in communities with a population of less than 50,000. The following table outlines the available United States Department of Transportation (USDOT) funding for each grant program for the nonurbanized areas of West Virginia during Fiscal Year (FY) 2011.

Exhibit 1: West Virginia SAFETEA-LU Funding

SAFETEA-LU Grant Program	FY 2011
Section 5310	\$1,119,326
Section 5316	\$1,355,012
Section 5317	\$762,112

Source: Federal Transit Administration

INTENT

The Coordinated Plan Updates are a source of knowledge and a shared vision of where coordination efforts in West Virginia may try to go in the future. No agency or public transit provider is required by law to implement the strategies included in the Coordinated Plan Updates. The implementation timeframe for each strategy ranges from December 2011 through December 2016 and is based on stakeholder desire to implement the strategy as well as financial feasibility. It is important to note that all Coordinated Plan Update strategies that require additional funding will be possible only with additional local-match funding from the local governments and non-U.S. DOT Federal programs (i.e., Medicaid, Older Americans Act, and TANF).

APPROACH

In 2007, each regional planning organization and Metropolitan Planning Organization (MPO) in the State was tasked with producing a locally developed regional Coordinated Public Transit-Human Services Transportation Plan. The planning boundaries for the Coordinated Plan Updates followed the same geographic pattern. The DPT elected to hire a consulting team to develop each of the Coordinated Plan Updates for the regional planning organizations. The revised planning approach was implemented in an effort to standardize the procedures and begin to develop a cohesive understanding and interpretation of the local transportation needs across the State. Each MPO had the option of updating their plans in-house or utilizing the services offered by the DPT consulting team. All MPOs elected to use the services of the consulting team.

At least two general public and transportation stakeholder meetings were conducted in a central location within each Region or MPO area. A stakeholder is considered to be any individual from the general public or representative of an organization that utilizes or benefits from community transportation. All meetings were advertised in local newspapers, on local agency websites, and with flyers posted in public locations. Key stakeholders also received meeting announcements via mail and email. Outreach efforts are thoroughly documented in each Coordinated Plan Update.

In addition to local meetings, the DPT consulting team met individually with key transportation providers and other local planning and human service agency organizations in each Region. An extensive inventory of existing transportation services was developed based on the interviews. An analysis of unmet transportation needs and gaps in service was facilitated through the first round of local meetings. Information was supplemented with a public survey.

At the second round of local meetings in each Region, stakeholders were asked to develop and prioritize goals and strategies to meet the identified unmet transportation needs and gaps in service. Responsibilities for leading the implementation of each goal was also discussed and documented.

Finally, Regional Coordinated Plan Updates were distributed to the stakeholders in each Region for review and approval. Each participating stakeholder in rural regions was invited to sign as verification of local adoption of the Plan. Each MPO passed a formal Resolution with Board approval to locally adopt the MPO Regional Plans.

Local Conditions

ASSESSMENT OF LOCAL CONDITIONS

OVERVIEW

The assessment of local conditions used as the foundation for coordinated public transit-human service agency transportation priorities included a demographic analysis, economic profile, travel and trip characteristics, and eligibility requirements. A summary of the assessment results is provided in this section.

SUMMARY OF RESULTS OF THE ASSESSMENT OF LOCAL CONDITIONS

Demographic and Economic Conditions

Demographic characteristics of an area are an indicator of potential transportation demand. In particular, the general population density, density of older adults, density of individuals with disabilities, and density of households with no available vehicles tend to indicate the level of demand for transportation services. Areas of higher densities in the above noted categories tend to have a higher likelihood for demand. Furthermore, these areas tend to be the most appropriate areas for the FTA funding programs associated with SAFETEA-LU.

Each Regional Coordinated Plan Update provides detailed analysis of the demographic and economic conditions by county. For the purposes of this summary, the overall densities are analyzed on a statewide level. The population density by 2010 Census Block Group is illustrated in Exhibit 2. The areas with darkest shading have the highest population density, as the shading lightens, the population density decreases.

Exhibits 3 and 4 provide an illustration of the density of adults age 65 and older, and zero-vehicle households by Census Block Group. Data is derived from the 2005-2009 American Community Survey (ACS) because it is not available through the 2010 U.S. Census. As a five-year estimate, the data represent a percentage based on a national sample and does not represent a direct population count. Similar to the population density map, the Block Groups with the darkest shading have the highest densities, and as the shading lightens, the densities decrease.

Neither the 2010 U.S. Census nor the 2005-2009 ACS offer a method of identifying the densities of individuals with transportation related disabilities. Each Regional Coordinated Plan Update includes a discussion of the incidence, by county, of individuals having a 'go-outside the home' disability that restricts a person's ability to leave the home alone for shopping or medical trips. These discussions are based on the most recent available data, the 2000 U.S. Census. In nearly every county, the incidence of a 'go-outside the home disability' is highest among the 65 and older age groups. Marshall County is the exception. In Marshall County, the age group between 16 and 20 has the highest incidence of disability.

Exhibit 2: Statewide Population Density

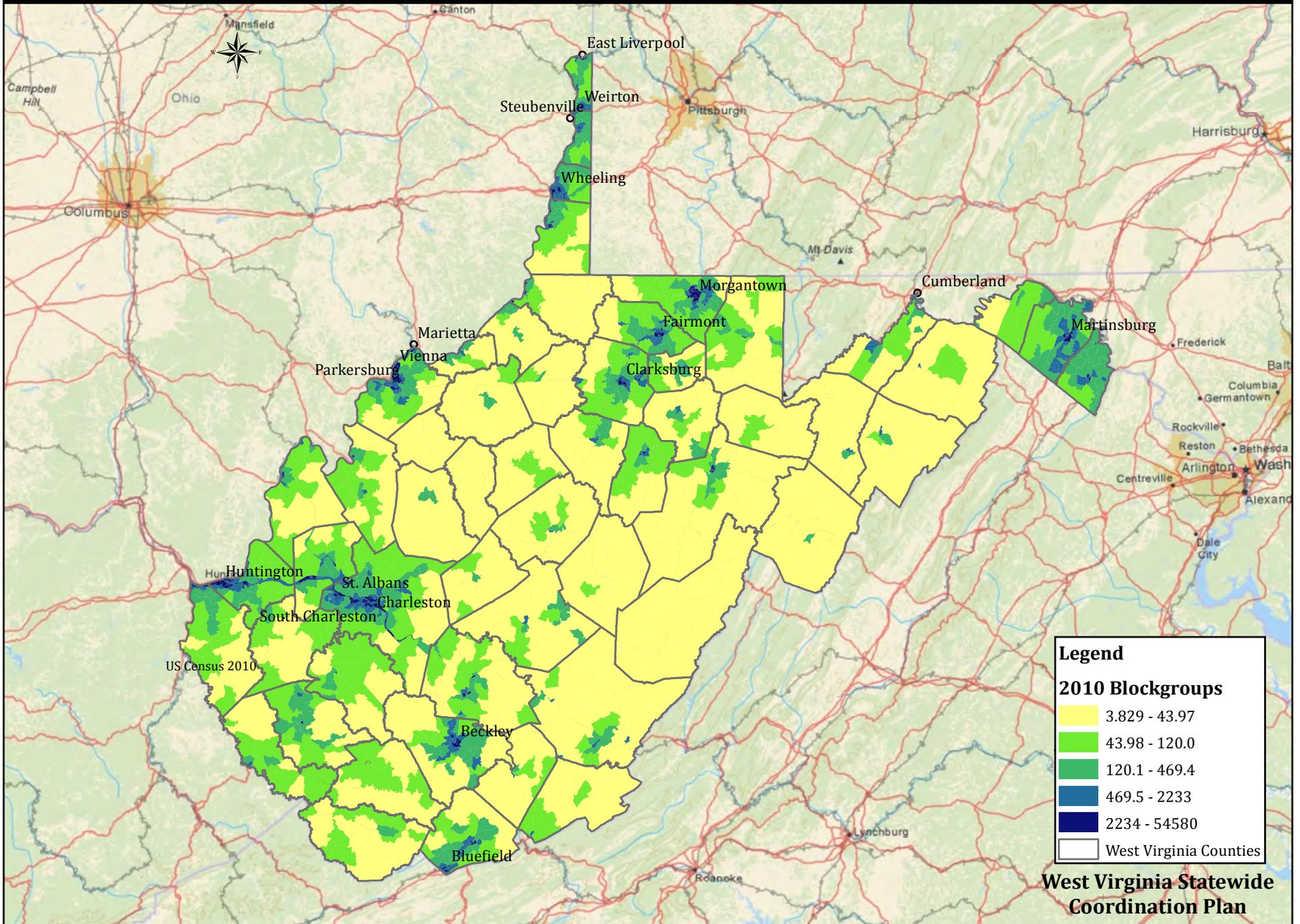


Exhibit 3: Statewide Population Density 65 and Over

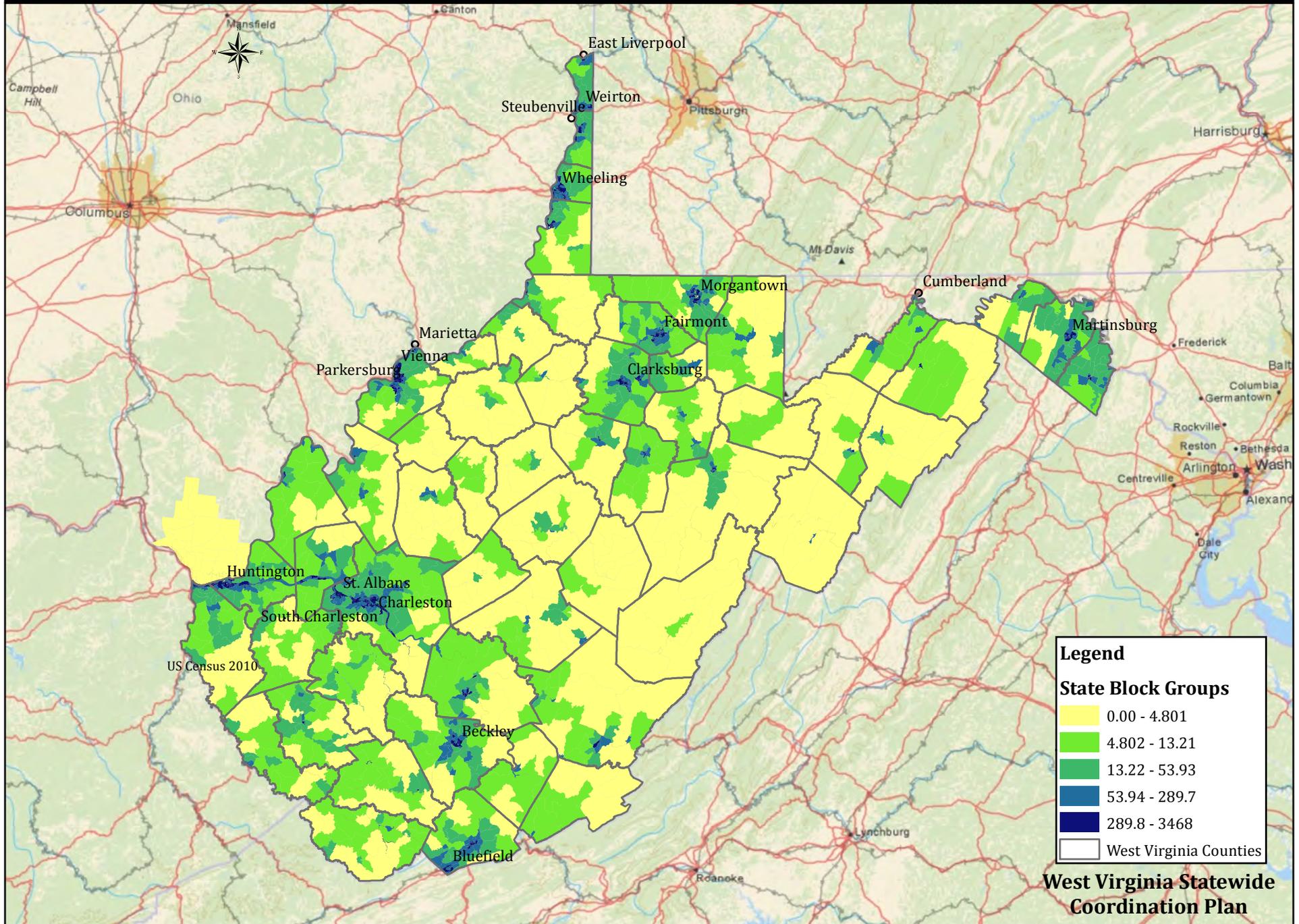
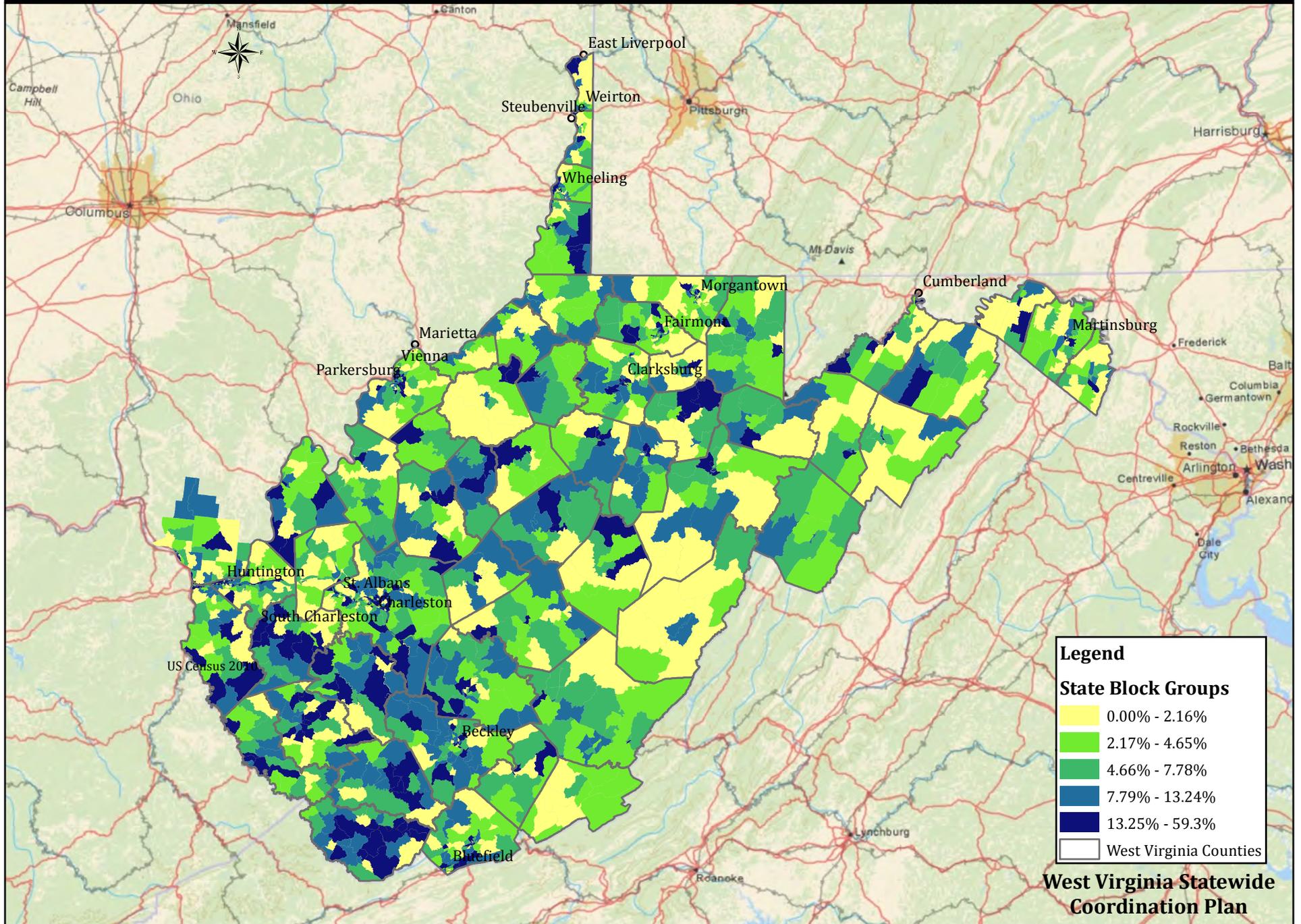


Exhibit 4: Statewide Zero Vehicle Households



Major Trip Generators

Major trip generators are locations in a community that have a high density of residents or are popular destinations (i.e., apartment complex, hospital, shopping area, and others). The term trip generator is applied when analyzing public and human services transportation because it represents travel patterns for passengers and potential passengers.

The most common challenge for access to trip generators in rural West Virginia pertains to accessing the places of employment during early morning and late evening hours, and on weekends when no low-cost transportation service is offered. For some rural areas, access is a barrier during all hours of the day. In other areas, a private taxi or human service agency may offer transportation, but the cost of providing long-distance trips makes it cost prohibitive for the individual passenger and/or the provider. Affordable, reliable, and safe transportation for employment and employment-related activities is an on-going challenge for individuals in each Region, and especially in the rural areas.

Service Provider Capabilities

An assessment of existing resources, vehicle utilization, and financial information is necessary prior to implementation of new coordinated transportation approaches. The following summaries of transportation service characteristics provide an overview of existing transportation services provided by human service agencies, private and public transit. More detailed information about the transportation providers is provided in the Regional Coordinated Plan Updates. Every attempt was made to involve all organizations that provide transportation in the planning and inventory process.

Costs and ridership estimates are based on information provided by each organization. Each organization tracks ridership and costs according to their individual program requirements. Sometimes, transportation expenses are bundled into the overall expense of providing services to a consumer. In those cases, expenses could only be estimated. As discussed later in the document, several local stakeholders recommended that a standardized process for tracking transportation expenses be implemented for all human service agency and public transit programs.

The table in the appendix outlines the services provided by each agency, by county. All counties have some level of human service agency transportation; typically the service is limited by program eligibility (i.e., age, ability, income). The gap in service that cannot be depicted with the map is temporal rather than spatial. That is, a large majority of West Virginia, transportation services are offered only on weekdays and typical service hours are 7:00 AM to 5:00 PM. As agencies plan to coordinate transportation resources, they can use the information provided in the Coordinated Plan Updates to determine opportunities to share vehicles during idle times (i.e., evenings and weekends) or fill otherwise empty seats with consumers from other agencies or the general public.

Duplications in service, where multiple providers cover the same county or community at the same time of day occur in the majority of West Virginia counties. These duplications could be reduced, where appropriate through coordination or consolidation efforts between public, private, and agency operators.

ASSESSMENT OF TRANSPORTATION UNMET NEEDS AND GAPS

METHODOLOGY

The assessment of local conditions also involved a four-part process of outreach to residents, agencies, transportation providers, health care facilities, and businesses in each county.

- (1) At least two general public and stakeholder meetings at a central location in each Region.
- (2) Surveys of agencies and transportation providers.
- (3) One-on-one interviews with public and private transportation providers, planning organizations, senior programs, public transit, and human service agencies.
- (4) A statewide general public survey.

The intent of the outreach efforts was to identify specific temporal and spatial gaps in transportation services for older adults, individuals with disabilities, people with low incomes, and the general public. And also, to identify potential challenges to coordinating resources.

SUMMARY OF RESULTS OF THE ASSESSMENT OF NEEDS AND GAPS

Transportation providers of West Virginia are doing a noteworthy job of serving their communities. The following list is intended to provide a format for continued improvement.

Common Unmet Transportation Needs and Gaps in Service for West Virginia

Access to Transportation (Geographic Coverage)

- ◆ Public transportation services are not available in every county.
- ◆ Transportation providers travel extensive distances to reach rural passengers due to mountainous terrain and sparse population.
- ◆ Access to transportation for employment is limited.

Capacity Issues

- ◆ Flexibility to have a mixture of vehicle types in the fleet would maximize vehicle utilization.
- ◆ There is growing demand for non-emergency medical transportation.
- ◆ Agencies need additional vehicles and operating dollars to meet demands.
- ◆ A pool of vehicles to choose from is needed so that providers can use the most appropriate size vehicle.
- ◆ Wheelchair accessible vehicles will continue to be necessary.

Days/hours of Transportation Service Operations

- ◆ Transportation providers do not have sufficient operating funds to meet transportation needs during late evening, early morning, and weekends.
- ◆ People need expanded hours of transportation for employment, appointments or events.

Inter-Agency Information Sharing

- ◆ Local elected officials, agency administrators and other community leaders must understand the actual cost of the day-to-day operation of transportation services, the impact of gaps in service that still exist, funding requirements, and opportunities to address these gaps.
- ◆ Direction from state-level administrators to use agency funds as local match for coordinated services is needed so that local programs can make the most efficient use of funding.
- ◆ Current funding restrictions are barriers to coordinating trips and mixing passengers from multiple agencies on one vehicle. Clarification from state-level administrators is needed.
- ◆ An organized inter-agency communication process will reduce duplication and promote information sharing and referrals.

Cooperation and Coordination

- ◆ Providers need to minimize unnecessary duplication of services.
- ◆ The perceived restrictions on transport of non-agency consumers must be clarified.
- ◆ Transportation providers need an impartial process for sharing resources and operational activities (i.e., procurements, scheduling, and training) without jeopardizing funding.

Low Fares for Transportation

- ◆ People with low incomes need affordable transportation options for all trip purposes.
- ◆ Transportation providers need to explore coordination and multiple modes of service that could lower the cost per trip, thus, provide an opportunity to reduce passenger fares.

Operating Costs for Transportation Providers

- ◆ Transportation providers need local match to draw down available Federal grants.
- ◆ More operating funds are needed.
- ◆ Local communities need funding to assist with start-up of coordination projects.
- ◆ Providers need to control costs and/or look to Local, State, and Federal programs for revenue.
- ◆ A fuel consortium for non-profit organizations is needed in some regions.
- ◆ An insurance pool for eligible transportation providers is needed.

Public Outreach and Improved Awareness

- ◆ An advocate for transit dependent individuals would help to promote and educate.
- ◆ A single resource for information about schedules, passenger eligibility, or hours of service is needed to open the possibility of serving more people and improving independence.
- ◆ The general public needs user-friendly access to comprehensive information about transportation resources that are available to them.

Funding Program Regulations

- ◆ Funding sources for transportation services are limited by age, ability, or income (i.e., senior programs), which creates the dichotomy of transportation networks that are adequate for older adults but inadequate for younger populations.
- ◆ Funding sources often restrict who can utilize transportation services.
- ◆ Providers need to clarify and remove insurance issues that limit resource sharing.
- ◆ Funding programs need to offer more flexibility in human service passenger eligibility.

Common Challenges to Coordinated Transportation in West Virginia

Coordinated transportation is successfully implemented throughout the country, and certain aspects of coordination already exist in West Virginia. Therefore, issues such as guidelines for use of funding and vehicles, unique needs presented by different populations served, etc., should challenge, but not stop, a coordination effort. There are many resources available to assist communities with overcoming some of the challenges presented by stakeholders during local focus group meetings and interviews. Each challenge listed below should be considered a potential obstacle, but not a barrier.

- ◆ Many agencies are not aware of **the actual fully allocated cost** for providing trips and the potential advantages that could be gained through trip sharing or coordination of other aspects of operations.
 - With the revision of Non-Emergency Medical Transportation (NEMT) for Medicaid, transportation providers may soon be limited to billing Medicaid no more than the amount that is currently billed to a client or contracting agency. In some cases, the amount currently billed is less than the fully allocated cost for providing the trip. Clarification of actual costs is an urgent issue.
- ◆ **Educating the public** about the available transportation services in each community is a challenge. Many people are not aware of the services that are available to them.
- ◆ In some cases, transportation providers are **reluctant to lose control** over the transportation and care of their consumers. This includes the scheduling and the transportation of consumers.
- ◆ Adequately **informing local officials** about the availability of public and human service agency transportation services in a Region or community is a challenge.
- ◆ It is often difficult to obtain large enough numbers of **participating agencies** to actually realize the benefits from trip-sharing. This is often true in rural areas.
- ◆ Many agencies apply for and receive **their own vehicles** with little regard for the repercussions of a practice that creates unnecessary duplications.
- ◆ **Myths** associated with coordination rather than actual prohibitive regulations are presenting barriers in some communities.
- ◆ The **current economic climate** creates a challenge to moving toward coordination. Change is difficult, particularly in a situation where the economic impact cannot be confirmed.
- ◆ Coordination requires funding from various sources. It is sometimes a challenge to find **local funds** to cover expenses and/or match that is not covered by State or Federal Funds.

There are many resources available to assist communities as they coordinate transportation including, www.unitedweride.gov and www.ctaa.org. The next section addressed coordinated transportation goals that were outlined by a majority of the transportation stakeholders in West Virginia who participated in this planning effort. The Ride in 55: West Virginia Transportation Summit identified similar challenges. Summit results are available at www.ridein55.com.

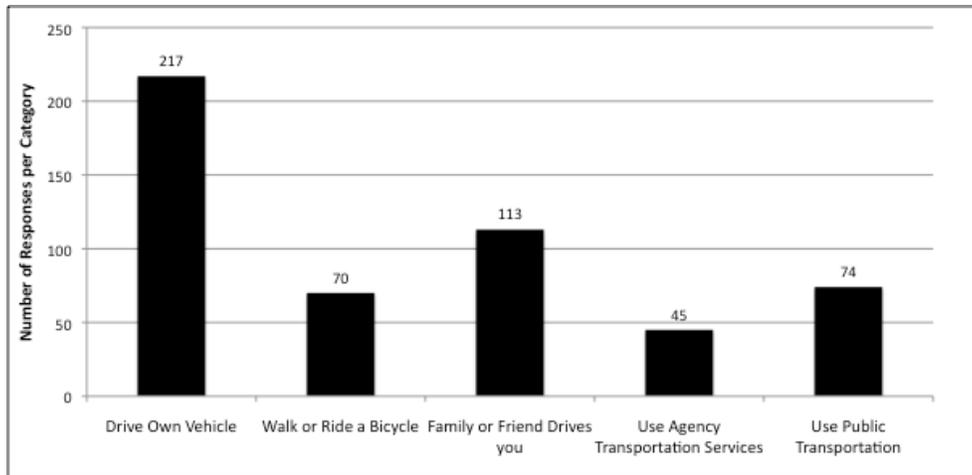
SUMMARY OF PUBLIC SURVEY RESULTS

The survey opportunity was advertised over a period of six months in local newspapers, by email, announced at local meetings, and on the Ride in 55 (www.ridein55.com) and West Virginia Department of Transportation (www.transportation.wv.gov) websites. A total of 338 completed surveys were submitted.¹ Participants were invited to select multiple responses to each question. Region II included the KYOVA, and Region VI included the Morgantown Monongalia MPO.

Current Mode of Transportation

Across the State, it is not a surprise that the most common mode of transportation was a personal automobile. The second most common mode was to ride with a family or friend.

Exhibit 6: Current Mode of Transportation, Statewide



Source: Public Survey, RLS & Associates, Inc.

Most of the participants that use agency transportation are in Region V. More than half of the participants that use public transportation live in Region VI.

¹ Of the total responses received, 322 could be assigned to a specific region of the state. The remaining 16 did not provide an address.

Exhibit 7: Current Mode of Transportation, by Region

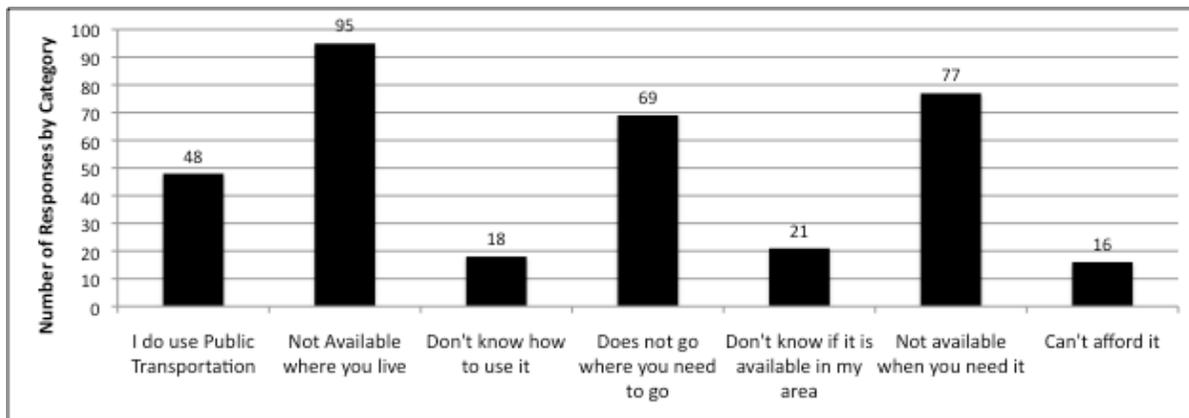
Region	Drive Own Vehicle	Walk or Ride a Bicycle	Family or Friend Drives you	Use Agency Transportation Services	Use Public Transportation
Region I	3	1	0	1	0
Region II	2	1	1	1	1
Region III	14	5	7	3	5
Region IV	2	0	1	1	1
Region V	92	24	63	32	8
Region VI	78	32	30	5	53
Region VII	5	0	0	0	0
Region 8	3	2	3	0	0
Region IX	1	1	1	0	1
Region X	4	2	3	2	3
Region XI	6	0	1	0	0

Source: Public Survey, RLS & Associates, Inc.

Why Not Ride Public Transportation?

Responses varied and the largest number of responses indicated that public transportation is not available where they live. The second most common reason for not riding was that public transportation was not available when they need it. Another significant result from the question reveals that public transportation does not go where the respondents need it to go. Nearly equal amounts of survey participants indicated that they either do not know how to use public transit, do not know if it is available where they live, or cannot afford it.

Exhibit 8: Why Not Ride Public Transportation, Statewide



Source: Public Survey, RLS & Associates, Inc.

Responses by Region are provided in the following table. Results from Regions V and VI had the most significant impact on the statewide results.

Exhibit 9: Why Not Ride Public Transportation, by Region

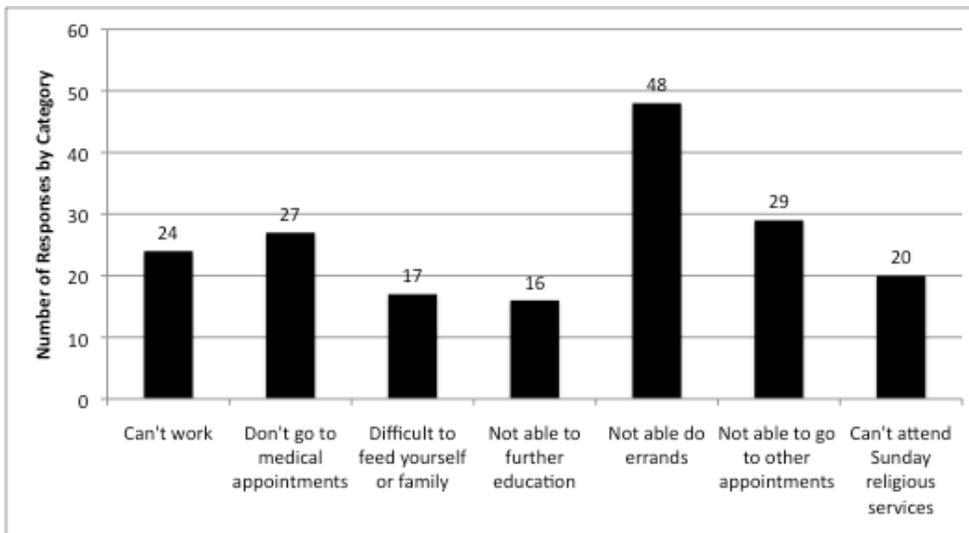
Region	I do use Public Transportation	Not Available where you live	Don't know how to use it	Does not go where you need to go	Don't know if it is available in my area	Not available when you need it	Can't afford it
Region I	0	1	0	0	1	2	1
Region II	0	0	0	0	1	0	0
Region III	0	4	1	5	3	4	0
Region IV	0	1	0	1	0	1	0
Region V	8	57	9	17	8	18	13
Region VI	38	20	6	35	5	42	2
Region VII	0	4	0	2	0	0	0
Region 8	0	2	0	2	0	2	0
Region IX	0	0	0	2	0	1	0
Region X	1	2	0	1	0	3	0
Region XI	0	4	0	2	1	1	0

Source: Public Survey, RLS & Associates, Inc.

Unmet Transportation Needs

A question about transportation needs reveals more information about the type of unmet transportation needs and gaps in service by trip purpose. Across the state, most survey participants said that they are not able to do errands because they do not have transportation.

Exhibit 10: Unmet Transportation Needs



Source: Public Survey, RLS & Associates, Inc.

Exhibit 11 displays the distribution of responses by Region to the question about transportation needs.

Exhibit 11: Unmet Transportation Needs, by Region

Do you have any transportation limitations?							
Region	Can't work	Don't go to medical appointments	Difficult to feed yourself or family	Not able to further education	Not able do errands	Not able to go to other appointments	Can't attend Sunday religious services
Region I	1	1	1	1	1	1	0
Region II	0	0	0	0	0	0	0
Region III	0	0	1	2	3	2	2
Region IV	1	0	1	0	1	1	0
Region V	11	20	6	9	21	17	6
Region VI	10	5	6	3	18	7	9
Region VII	0	0	0	0	0	0	0
Region 8	0	0	1	0	1	1	1
Region IX	0	0	1	0	1	0	1
Region X	0	0	0	0	0	0	1
Region XI	0	0	0	1	0	0	0

Source: Public Survey, RLS & Associates, Inc.

GOALS FOR COORDINATED TRANSPORTATION

SUMMARY OF COORDINATED TRANSPORTATION GOALS

Achieving coordinated transportation goals will take time, effort, and in most situations, additional funding. Therefore, it is recommended that the goals and objectives included in each Coordinated Transportation Plan Update become a starting point for continued discussion to refine a feasible implementation plan on which to base funding and service design decisions. The following goals were common in most of the Regions.

Common Coordinated Transportation Goals

Goal #1: Develop enabling legislation that mandates improved communication among the legislators, state agencies, public transportation providers, non-profit agencies, and for-profit companies with the intent to develop coordinated approaches that fill gaps and reduce unnecessary duplication of transportation services in each county and throughout the State.

Improving communication is the first goal because it represents a fundamental aspect of establishing a successful transportation network. Many local transportation stakeholders feel that only through strong guidance from enabling State legislation and Local Codes, can transportation stakeholders truly achieve the goal of sharing resources, improving efficiency, and providing top-quality coordinated community transportation. Transportation stakeholders overwhelmingly indicated that a council of human service agency and public transit directors, such as the West Virginia Transportation Coordinating Council (WVTCC), should be the source of leadership in achieving this goal and that other agencies must participate.

A critical factor in the success of this goal is that the Council must not only have the authority to enforce coordinated transportation goals, it must also require active participation from agency and State department directors with the authority to enforce changes in procedure and policy.

Stakeholders also suggest that WVTCC develop a statewide policy wherein various State departments, such as the Bureau of Senior Services and DPT, develop joint-strategic approach to funding local services. All State departments and agencies that serve the market segments identified by SAFETEA-LU have an important role in achieving new levels of coordinated transportation for West Virginia and a comprehensive or joint approach to planning is sensible. In recognition of the importance of the role of the Senior Services programs in the coordinated transportation effort, for example, the Federal Administration on Aging (AoA) entered into a memorandum of understanding with the Federal Transit Administration in January 2003. As a result of this collaboration, AoA has become a key partner in promoting the coordination of senior and public transportation across the country. This Federal-level recognition could be communicated to Senior Services programs at the local level through changes in State procedures as they relate to community transportation. Such changes could take place through the WVTCC so that they benefit from a broad range of perspectives that are provided by each human service agency and State department representative.

Goal #2: Control Operating Costs and Diversify Revenue Sources.

Local transportation providers will collect data on their actual fully allocated costs for providing transportation. Costs will be matched with the potential for coordinating non-U.S. Department of Transportation dollars to be used as local match for SAFETEA-LU grant programs. Stakeholders need to inform decision makers at the State and Federal levels of government about the realities of serving consumers and the general public. Data collected and represented in the Inventory chapters of the Regional Coordinated Plan Updates will be a basis for data on existing services, costs, and unmet needs.

Furthermore, while research continues to explore fuel alternatives, transportation providers need solutions to rising fuel costs now. Through collaborative fuel purchases or trip sharing strategies, agencies can realize a reduction in fuel costs.

Along with increasing fuel costs comes limited funding for operations. In the long-term planning horizon, coordinating trips whenever feasible, practical, and safe for the consumer will 'stretch' the overall operating and capital funding associated with transportation by eliminating unnecessary duplications in service at the local level.

Goals #3: Maintain or expand transportation service in every county throughout the next four years to sustain at least the current (2011) level of self-sufficiency for older adults, individuals with disabilities, people with low incomes, and the general public.

The transportation stakeholders in each region will continuously work toward coordinating transportation with the goal that all people can achieve and maintain self-sufficiency.

Goal #4: Implement coordinated transportation strategies that support and encourage local, regional, or statewide economic development opportunities.

Transportation will be designed and coordinated to support existing and future economic development opportunities throughout the State. The goal allows for development of transportation services that would support new opportunities that were not predicted during the planning process but would benefit the community and its residents.

Goal #5: Collaborate and facilitate transportation endeavors related to effectively reducing the cost of Medicaid non-emergency medical transportation (NEMT) while sustaining top-quality and safe transportation for eligible individuals.

Organizations representing or serving individuals who are eligible for Medicaid will collaborate toward documenting actual fully allocated costs of providing such trips and a achieving cost savings strategy. Quality of service will be the top priority. The fully allocated cost should be established immediately and included in all contract agreements and/or consumer fees.

Goal #6: Improve access to employment and employment-related activities for people with low incomes and the general public.

Access to employment opportunities is sometimes a challenge, especially for residents of rural areas, individuals with disabilities, and employers that offer shift work. Multi-modal solutions such as vanpool, carpool, subsidized taxi service, and employer-sponsored trips will be sought to provide an affordable transportation option and fill the gap in services.

Goal #7: Implement driver training requirements that are standardized for all recipients of Section 5310, 5316, and 5317 funding.

To ensure that all passengers know what to expect from a driver, no matter which provider they use in West Virginia, stakeholders in many Regions suggested that recipients of Section 5310, 5316, and 5317 abide by a standard list of driver training requirements that go above and beyond PASS training. A comprehensive training schedule should be developed and posted by WV DPT.

Goal #8: Establish a comprehensive and user-friendly resource for anyone who wants information about his or her transportation options for local or regional transportation.

Stakeholders from the general public, especially in rural areas, indicated that they are not aware of transportation resources that are available to them, and many people are confused about how to get information when they want to make a trip. There are many resources provided by human service agencies that provide some information about services available for program-eligible individuals. But, there is no single resource where a person can call and look on-line to plan a trip. A single resource for trip planning was recommended in nearly every Region of the State; but the most applicable use would be in areas where there are multiple transportation providers.

It is strongly suggested that existing resources such as West Virginia Aging and Disability Resource Centers (www.wvnavigate.org) and the Department of Health and Human Resources' (DHHR) "BeeLocal" website (<http://beelocal.thebeehive.org>) take the lead in providing and maintaining comprehensive and current transportation information. These two organizations already provide a limited amount of transportation information. To be most useful, the information should be expanded. Furthermore, all transportation providers and agencies must advertise the resources.

CONCLUSION

West Virginia's human service agencies and transportation systems have made progress in their understanding of the possibilities and benefits of coordinated transportation since the initial Coordinated Transportation Plans were conducted. The primary challenge that remains is to implement a solution that will provide clear and strong guidance to local agencies and funding resources so that they can move forward with implementation of coordinated transportation goals and strategies that reduce unnecessary duplication of transportation resources and address the gaps and unmet needs in service.