Tools of the Trade:
Human Service Agency Transportation Quality and Efficiency

Workshop Summary

Disability Population Statistics

The population of disabled individuals in each county remains roughly proportional to their overall populations.

This map shows that some of the areas with the highest percent of disabled residents are towns on the region’s periphery. Often, these locations lack regional transportation services, which presents another obstacle to the mobility of disabled residents.

The rate of disabilities among the veterans is more than double that of the overall population, as nearly one in four veterans has a disability.
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Background

CDTC held a full day workshop for human service agency transportation providers on April 14, 2016 at The Crossings of Colonie. Over 40 people attended to hear a wide range of presentations about currently available programs from travel training to driver training, to innovative approaches to mobility management and agency staff-based transportation services planning. Successful collaborative inter-agency projects and information technology were also highlighted. A lunch panel made up of New York State agency representatives provided attendees with an opportunity to hear about the state’s human services transportation initiatives as well as to ask questions. During the afternoon sessions participants broke into county-based groups to discuss participant’s transportation services and goals, the populations they serve and to potentially identify common needs and issues. Each group provided a summary of their discussions and some potential future cooperative activities and next steps.

Session 1: Existing Opportunities Presentations

1. CDTA - Contracting Opportunities, STAR, Travel Training, Presenter: Maryellen Casey Usis
CDTA administered a successful 5310: Enhanced Mobility for Seniors and Individuals with Disabilities project for Accessible Taxis, which has expanded to serve the region with 4 in Albany County. Mobility Works retrofitted vans for the Accessible Taxis project.

Access Transit, run by CDTA, schedules trips for Albany County seniors for the Albany County Department of Aging. STAR provides service to the disabled population, within ¼ mile of fixed routes during adjacent service(s) timeframes. The cost is $2.50 one way (PCA, Personal Care Assistants, are allowed to assist disabled passengers). STAR meetings are held to better understand user issues.

Albany County residents aged 60 years or older who don’t qualify for STAR can receive rides through Albany County Aging. Demand for STAR and number of people served has grown since the service started. In 1975 150 people rode on weekdays and between 35-50 rode on weekends. Today 1,100 people are served each weekday and between 300 to 500 people are transported on weekends. This growing demand is becoming unaffordable for CDTA.

Other service providers can join in contracts with CDTA which provide savings through group purchases for things such as fuel and repairs.

Two Travel Trainers are available to train individuals on how to ride CDTA’s fixed route bus service from reading schedules to how to board the bus and pay the fare

Maryellen introduced Tanya Pitts, the new STAR eligibility contact and Fred Gilliam as the new CDTA Director of Transportation.

Q&A

Eligibility is for 3 years and when eligibility ends a person may re-apply or use Albany County Office for Aging transportation but they cannot use both.

If STAR scheduling is not allowing someone to arrive at work on time, Maryellen suggested calling STAR and describing the exact issues, as a solution could likely be found. Scheduling should be done from both ends (for example, it’s best to specify when a person needs to arrive at their destination vs when
they want to be picked up to start their trip). STAR service equates to the fixed routes. The service provider has a window of arriving at the location, for pick up and drop off, between 5 to 25 minutes. The STAR User Guide is a great resource and provides a lot of explanations regarding how ride scheduling works best. (See: http://www.cdta.org/sites/default/files/pdfs/star_handbook_august_2014_version_layout_1.pdf)

Members of the audience suggested that more agency staff learn about STAR and that more people should be trained in how to use STAR services

2. Center for Disability Services - Driver Training Facility and Training, Presenter: Chris Schelin

The Cohoes training facility and driver training program was funded through a prior federal 5310 Program grant administered by CDTA. The training facility has a capacity of about 50 people, 3 areas, and 3 screens in each segment. The funding has helped with technology: state of the art video & audio equipment, and software for video editing so that the tapes can be used in the training classes in the future. The driver training facility is open for use by other entities and NYS Defensive Driving Courses are available by authorized instructors. CDS offers contractual agreements or per class trainings, and training sessions can be videotaped and edited for future use. So far, one outside group, SUNY Albany drivers, have taken advantage of the training facility.

VIA: “Value, Independence and Accessibility” is a new CDS wheelchair-accessible shared transportation service for people with disabilities. This program will be opening services to the greater capital district. VIA is funded through the NYS Office for People With Developmental Disabilities (OPWDD) and will have 5 accessible vehicles. Trips are requested through an online portal, require approval by the VIA dispatcher, and are provided Monday through Saturday between 6 am and 10 pm. VIA service eligibility will follow STAR guidelines. Cost will be $2.50 per one-way trip.

The Center for Disability Services also provides vehicle maintenance and repair services to outside entities for passenger car, bus, and large fleets. Fleet service contract agreements are available.

3. Catholic Charities Senior & Caregiver Support Services - Radio and Dispatch Coordination, Presenter: Margo Mahoski

New Freedom Funding financed this project for purchase, installation and implementation of digital mobile radio systems among 4 agencies: Catholic Charities Senior & Caregiver Support Services, Schenectady ARC, Center for Disability Services, and Senior Services of Albany. This New Freedom (5310 program) funded project required a 20% local match. In-kind work can be used for the local match. There is space for others to partner on the radio system and other New Freedom funded projects such as routing/dispach software.

The project aimed to comply with the FCC (Federal Communications Commission) requirements to upgrade radio systems. The FCC required organizations to purchase Digital Mobile Radio (DMR) systems to access narrowband frequencies by January 1, 2013. Group purchasing of DMR equipment saved thousands of dollars – the total amount spent was $222,952.

The project resulted in inter-organizational fleet access, with the capability for over 100 vehicles on the road at the same time to access the same radio system. Agencies can now communicate with each other while on the road, enhancing workforce and consumer safety. AVL (Automatic Vehicle Location) capabilities permit dispatchers to locate vehicles in the event of a breakdown or accident with pinpoint accuracy and with minimal lag time. Coupled with Routing Software, this means routes can be made more efficient and the closest available vehicle can be located, decreasing fuel costs and minimizing equipment costs.
4. NYSDOT - State Information Systems (511NY), Presenter: Ellwood Hanrahan

511NY.org can create travel routes based on origin to destination using different criteria. Routes can be selected and embedded maps created to provide real time traffic information for selected routes. The website allows creation of alerts for selected sections of routes to identify and avoid traffic backups. Customized routing is useful to agency transportation providers to answer “what are the spots along a route where a driver can make a diversion to avoid congestion or an incident”? The type of information and alerts received can be customized by users https://www.511ny.org/my511/faq. A Real time traffic viewer can be viewed through the portal.

Customized rideshare system similar to previous iPool2.org; iPool2 users now use 511ny. The rideshare portal aids in ride matching depending on the users location and has a Park and Ride Map available. Calling 511ny can connect users to other transportation services’ information lines. There are 60 local web portals downstate; NYSDOT hasn’t expanded this upstate as of yet, but it is available. CDTA real time information can be embedded. 511NY is an open source technology to encourage continuous improvement. The portal evolves based on who uses it, how it is used, and demand for certain services.

Session 2: New Ideas Presentations

1. The Institute for Human Services, Inc. (IHS) - Coordinated Transportation Services and Mobility Management, Presenter: Belinda Hoad, Director of Mobility Management

Belinda provided an overview of IHS and its services including collaborative services, transportation needs, 2-1-1 helpline, Mobility Management, and the volunteer driver program. IHS is a non-profit 501c3 established in 1984 focused on Steuben County in NYS to provide information and referral for human service agencies, reduce duplication of services, and address transportation needs. Funding comes from Medicaid, Office for Aging, and a variety of other fund sources.

IHS initially worked on the core areas of human service agency capacity building, communication, and collaboration, and now includes IHS Coordinated Transportation Services, which cover volunteer drivers, mobility management, NEMT (non-emergency medical trips), DSS Transportation Scheduling, and 2-1-1. Funding comes from partnerships between local agencies such as OFA, United Way of the Southern Tier, Consulting Services and Steuben County, NYSDOT, and the local Department of Social Services. Diversified funding provides resilience and by intertwining programs member agencies, community, and stakeholders are better served.

Collaboration is key to addressing transportation issues in many communities. Steuben County’s Human Services-Public Transportation Advisory Committee includes public, non-profit and private transportation providers, transportation planners, funders, and consumers. By collaborating organizational capacity is built, there’s a reduction in duplicative services, and the quality of life of Southern Tier residents is improved. The Human Services-Public Transportation Advisory Committee developed a tri-county map showing the service area for each provider and found while many of the main roadways were being served by public transportation there were large areas where transportation services are not available. Providing public transportation to serve every community, town, and roadway throughout the rural county was not feasible.
To serve these areas the IHS volunteer transportation program for NEMT and nutritional related services was developed in 2000 in partnership with the Steuben County Office for Aging (SCOFA) to assist people with transportation to and from nutritional and service related appointments. Volunteer drivers use their own vehicles and get reimbursed for gas and vehicle wear and tear. Drivers have their own insurance and it must cover $300,000; IHS pays for supplemental insurance of $5 M coverage. Drivers go through a background check. In 2002 United Way funding was secured to serve clients that were not eligible for SCOFA funded trips. In 2010 IHS began supplementing DSS funded trips. In 2013, IHS applied to become a Medicaid transportation provider for Steuben County and implemented the HBSS scheduling software. In 2015, MAS requested that IHS consider providing NEMT in Allegany, Cattaraugus and Livingston Counties. The IHS volunteer driver program has grown in size and service area. In 2015, volunteer drivers provided 723,550 miles of NEMT service - time equivalent to 15.4 full time employees and the program is currently on track to obtain 1 million miles of service in 2016. Volunteer drivers have cell phones but can’t use them while driving, and hands-free is not allowed. HBSS scheduling software is used to schedule trips.

Mobility Management at IHS is a strategic approach for managing and delivering coordinated transportation services. It leverages services of multiple transportation providers and visibly improves the effectiveness, efficiency, and quality of all transportation services delivered. Rural mobility management includes coordinating service promotion and marketing to improve public awareness of available transportation, providing a single point of contact for transportation services through 2-1-1 HELPLINE, and bringing public and private sectors together in planning by facilitating the Steuben Coordinated Transportation Advisory Committee.

Bus Buddies is a volunteer program to assist and advise seniors in using public transit systems in order to help them remain mobile and active in their communities. Trained volunteers accompany riders, offer information and encouragement, and participants build confidence and bus riding skills. Bus Buddies are knowledgeable about routes, times, stops, fares and policies and teach others how to read the bus schedule, recognize bus stops, getting on and off the bus safely, pay the fares and purchase passes. Travel Training is a free program offered through Steuben Coordinated Transportation Mobility Management designed for seniors, people with disabilities or anyone needing guidance on navigating the bus system and can be group focused or individualized.

Southern Tier Rideshare is a collaborative effort between NYSDOT, 511NY, Steuben and Chemung County Mobility Managers and is key to supplementing public transportation in rural communities. Currently there are about 150 community users. Free employer portals are available to engage employees; it can be customized and utilized to control the usage of employer owned vehicles. In 2017 the program will be expanded to include 5-7 adjoining counties.

The www.Needaride.info website is a Steuben County mobility management project in partnership with 2-1-1 to provide the community with better transportation related information. The website offers an online resource for all transportation needs. 2-1-1 is easy to remember and connects to a one stop call center serving 5 counties with 8 call center specialists available 24/7/365. Automatic call distribution routes calls to ensure that every time anyone calls 2-1-1 a specialist will answer the phone and assist them. 2-1-1 also offers an online searchable database for those with internet access and who know exactly what services that they are looking for. In 2015 transportation rated in the top 3 needs categories of 2-1-1 calls. Community members face a real barrier to many activities and services because
of the lack of transportation. 2-1-1 has the ability to gather data for every call to better help county planners and mobility management understand what the realized needs are within the region.

The key to cost effectiveness and delivering superior service is for all organizations to coordinate services to serve the most people. 5 Key Points/Best Practices are as follows:

- Leverage existing resources: Coordinate services, providers, and capacity
- Choose a neutral convener so that one industry does not feel left out
- Each agency keeps its own identity and serves it role in the coordination process
- Utilize a single point of information and referral (2-1-1)
- Volunteer drivers can reach rural clients in a cost effective manner

2. The ARC of Rensselaer County - Transportation Planning Process, Presenter: Todd Finkle
The Arc of Rensselaer County serves about 800 individuals with intellectual and developmental disabilities. Rensselaer ARC spends over $450,000 on transportation annually. ARC staff organized and held a daylong workshop on transportation involving ARC employees, consumers and other stakeholders. Through a SWOT approach, identified strengths were that there are 15 routes daily, long term drivers know their passengers, the longest time from pick up to drop off would be about an hour and a half, passionate and flexible staff, a willingness to work with families, and successful 5310 grants for vehicles. Identified weaknesses were that vehicles are starting to get old, less convenient service in the rural areas, problems with reporting accidents and damages, wheelchair vehicles have four to six routes per day, and lack of a computerized mapping system. Identified opportunities were identifying and taking advantage of the availability of NYS and federal Grants such as 5310, new ideas such as a spreadsheet to track vehicle maintenance, utilizing CDTA travel trainers, and better organizing agency vehicles. Identified threats were the small size of the organization, passenger safety on public transportation, reimbursement, stereotypes associated with existing transportation resources, and the constantly changing environment.

Overall, participants felt the workshop was useful, and it resulted in some immediate action items being pursued. Several themes came out of the workshop that staff will focus on as they are able including collaborating with other agencies and families, sharing vehicles and ride sharing.

Session 3: State Agency Representatives Lunch Panel with NYS Departments of Transportation and Health, and Offices for Aging and People with Developmental Disabilities

1. NYS Department of Health - Medicaid Transportation, Presenter: Jonathan Lange, Empire State Fellow
Medicaid transportation is a federally-required State-Plan-approved service managed and administered by the Department of Health to ensure that enrollees have access to approved medical services. The Medicaid Non-Emergency Medical Transportation benefit (NEMT) is authorized under the Social Security Act §1902(a)(70) and 42 C.F.R. §440.170 and requires that states ensure necessary transportation to and from providers, use the most appropriate form of transportation, and include coverage for transportation and related travel expenses necessary to secure medical examinations and treatment. Covered modes are public transportation, personal vehicle, taxi, wheelchair van, ambulance both Ground and Air, and commercial airline. Public Transportation Automated Reimbursement is expected to start in the summer of 2016.
Prior to 2011, Medicaid transportation was administered by county Departments of Social Services. The 2010-11 State Budget gave the Commissioner of Health the authority to assume the administration of Medicaid transportation from the counties. The 2010 Medicaid Administration Reform and subsequent Medicaid Redesign Team initiatives intended to improve the program by relieving counties from the burden of administering Medicaid transportation, improving program quality, reducing costs, achieving greater department accountability, and standardizing the application of Medicaid transportation policy. The Department of Health assumed management of Medicaid transportation by July 2015.

The Department of Health contracts with transportation management companies to manage non-emergency fee-for-service transportation. Most services are provided by Medicaid-enrolled service providers who are reimbursed by the State. Medical Answering Service (MAS) has a contract with the NYS Department of Health to provide a call center, assign trips, generate prior authorizations, and perform other tasks in the Capital Region. There are about 5,700,000 trips (not including public transportation) north of NYC. The annual Call Volume is 5,500,000 calls in upstate New York and is serviced by 370 MAS staff.

2. NYS Office for People with Developmental Disabilities (OPWDD), Presenter: Laura Jonas-Bates, Employment Specialist
NYS OPWDD is currently funding a Mobility Management Study for coordination of transportation for the disabled, focused on people served by OPWDD, the NYS Office of Mental Health and NYS Department of Health. NYS DOT and Office for Aging are also involved in steering the study. Public Consulting Group with Nelson Nygaard was selected to conduct the study, which should be completed by December 2016. Assessments will include whether non-medical trip needs are met. Analysis and Recommendations will focus on a gap analysis for persons with multiple disabilities, identification of local transportation providers, models to address the transportation needs of individuals with disabilities, public transportation and any related safety issues, potential pilot programs to meet people’s transportation needs.

3. NYS Office for the Aging (NYS OFA), Presenter: John Cochran
The Office for the Aging promotes and administers programs and services for New Yorkers 60 years of age and older and oversees community based services provided through a network of county Area Agencies on Aging and local providers. NYS has an Aging Network and each county has an Office for the Aging. There is a network of 1200 providers for OFA around the state. All local area agencies on aging around the state provide resources for transportation for older adults.

Seniors are the fastest growing demographic in New York State. One of the most challenging issue confronting older adults is transportation, and transporting seniors with disabilities is a growing challenge. Most older adults want to age in place but that often depends on their ability to drive. As people age their likelihood of becoming disabled increases.

79% of baby boomers live in places where public transportation is not easily accessible. As our communities have sprawled out there is increased dependency on automobiles. The inability to travel from point A to point B impacts the lifestyles of seniors as they lose independence and may become isolated and decrease their standard of living. For seniors who no longer drive it has been observed that there is about a 15% decrease in trips for doctor’s visits, 59% trip decrease for leisure, and 5% trip decrease to visit friends.
4. NYS Department of Transportation (NYSDOT), Presenter: Tom Vaughan, Public Transportation Bureau

State and federal programs support local efforts to fill transportation gaps. Recent federal transportation legislation consolidated several long standing programs. The transition period to shift to the new framework resulted in a delay in the FTA (Federal Transit Administration) 5310 program solicitation. FTA’s emphasis is on safety, asset management and performance measurement resulting in new regulations to address each.

In response to a US Supreme Court decision, NYS and others have developed plans to ensure “the most integrated setting” for individuals with disabilities. NYS’s 2012 Olmstead Plan is the impetus behind the Mobility Management pilot Study discussed earlier as the state realizes how important mobility management is on the local level.

Panel Q & A

Q for NYS OFA: Funding has been cut for rural transportation resulting in trips prioritized for medical trips and congregate meal site trips, with some shopping trips available. However, trips for socialization cannot be provided and this is a big issue for rural residents. A holistic approach is needed. Another example was that a person may be admitted to a hospital rehabilitation center for an injury due to a fall. After they’re released they go back home to a rural area and have no transportation for follow up care. This applies to people on Medicare, not Medicaid.

A: There is a growing awareness of this issue. The possibilities offered by non-traditional approaches are being discussed such as ride-sharing (e.g. Uber, etc). NYS OFA is starting to identify locally developed solutions that may help. There is great interest and great push to address the land use/transportation link and in the 2016 NYS budget there is $10M for a downtown initiative to revitalize core areas where people can live in areas with good public transit access.

Q for panel: People mention ridesharing and volunteer drivers but many of these rides aren’t universally accessible. The disability community is concerned about Uber as they are not ADA compliant. The state should look at this issue and be involved to ensure accessible vehicles are available and not create an inaccessible system.

A: The state is looking at an Uber and Lyft pilot and having conversations internally. Also, taxis aren’t regulated at the state level so the big question is “how do we make such a system accessible”? CDTA was able to develop an accessible taxi project using former New Freedom funds.

Q for panel: Can volunteer drivers drive accessible vehicles and handle wheelchair tie-downs? They would need training and certifications.

A: The Center for Disability Services does training on wheelchair tie-downs and offers other trainings to keep certifications current.

Session 4: County Group Sessions

Attendees broke into groups organized by County to discuss their transportation services and populations served, identification of needs and issues, and to brainstorm steps to solve those issues. Each group was supplied with maps to draw routes and trip origins and destinations on, data summaries from the regional Coordinated Public Transit – Human Services Transportation Plan, and some prompts
and questions to get the conversation going including: *Please describe the services you provide and the people you serve. Where do you pick people up and where do you take them? What are major goals you want to achieve? What are some next steps for achieving your goals?*

**Schenectady County** – Participants included the Center for Disabilities Services, Schenectady Municipal Housing Authority, Catholic Charities Senior and Caregiver Support Services. The group noticed a lot of geographical overlap in services. The Center for Disability Services could provide transportation for Wildwood Programs. There is a potential partnership between the Schenectady Municipal Housing Authority and Catholic Charities to divvy up riders to fit better with the program rules of each organization and overall be able to provide better service to their mutual customers. (The Housing Authority provides transportation but only has a few drivers and cars. Catholic Charities only provides rides for seniors, so it makes sense for Catholic Charities to provide rides for the Housing Authority’s seniors.)

**Rensselaer County** – Participants included Catholic Charities Disabilities Services, Rensselaer ARC, and the Center for Disability Services. The group discussed options when STAR is not available, particularly in rural areas. Non-medical trips are also important for quality of life. Family support grants are helpful to help people pay for STAR. When people get suspended from transportation services, there is no path to figure out how to get them back on – this applies to STAR but it also applies to agency supported transportation. Training for drivers and riders could be useful, especially in the case of people with developmental disabilities or traumatic brain injury. The group was hopeful of finding areas of potential coordination, but none arose during this session.

**Albany County** – Participants included CDTA and Bethlehem Senior Services. Bethlehem only provides rides to seniors over 60, and only within 17 miles of the Town border. They are interested in scheduling software and radio dispatch. They are also interested in accessible vehicles, but are wary of 5310 requirements. Bethlehem Senior Services uses volunteer drivers with Town-owned vehicles, which may be a somewhat unique arrangement. CDTA would like to see more workshops like today’s. There should be more funding for human services transportation and more coordination among providers.

**Saratoga County** – Participants included Saratoga County Office for Aging and Saratoga Bridges. Saratoga Bridges provides services to people with special needs and has 25 daily bus routes serving 500 people. The County Office for Aging has two systems: A & H Taxi provides rides for seniors 5 days a week for medical and shopping trips as well as a volunteer driver program using 1 minivan. This program, called RSVP (for Retired and Senior Volunteer Program), provides medical trips only both in county and out of county on rotating days. There is a concern that there is no free service for people who are wheelchair bound. Providers have had difficulty finding drivers and are interested in travel training. The group was interested in CDTA Travel Training so people feel less intimidated using public transit. This group is interested in a Saratoga region interagency day to discuss transportation issues.
NEXT STEPS

- broaden participation in the Regional Transportation Coordination Committee to those expressing interest at the workshop
- develop action item ideas emerging from workshop discussions in consultation with the RTCC
- hold a Saratoga county interagency meeting and other county based meetings bringing together transportation providers in each county
- keep abreast of activities and potential stakeholder input opportunities related to the ongoing NYS Mobility Management Design study
- post Workshop summary and powerpoints to www.cdtcmpo.org