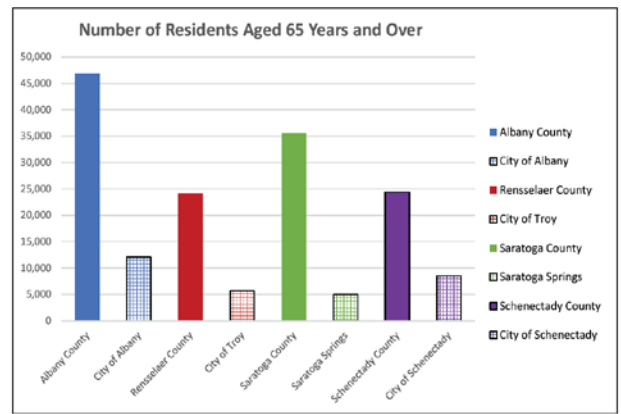
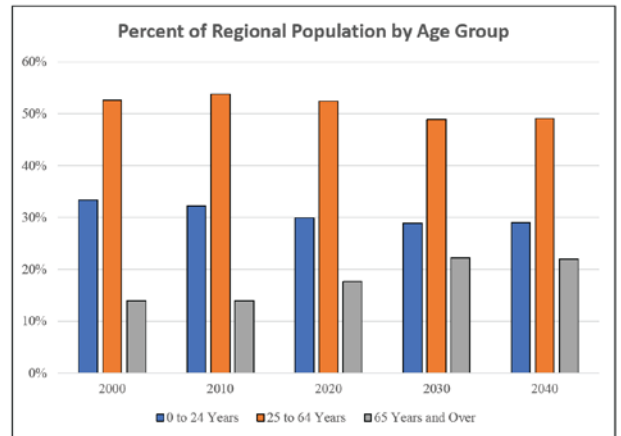
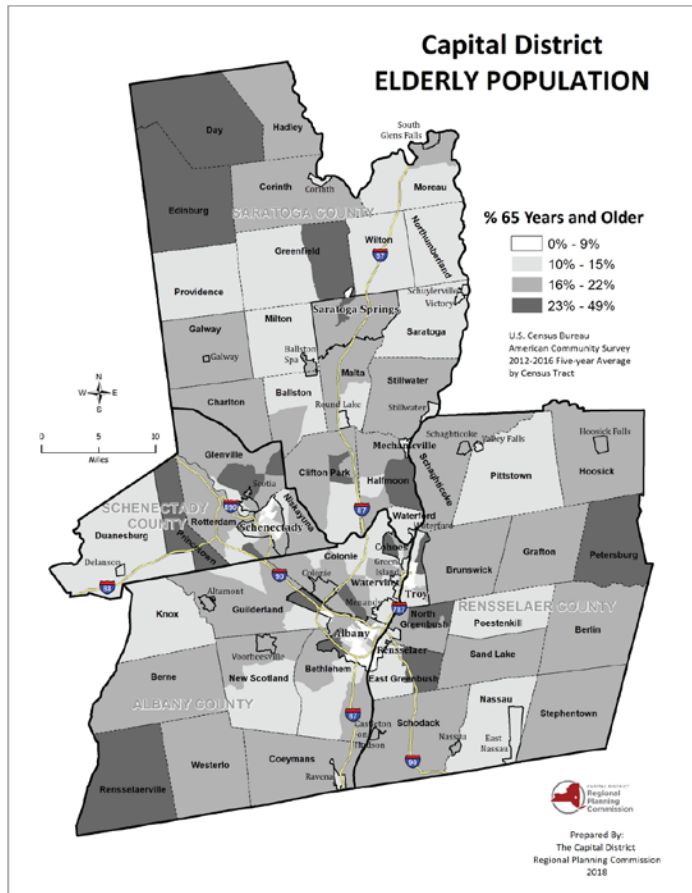


Tools of the Trade:

Human Services Transportation Providers

May 24, 2018 Workshop Summary

Elderly Population Statistics



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Background

CDTC held a half day workshop for human service agency transportation providers on May 24, 2018 at The Crossings of Colonie. Over 30 people attended to hear a range of presentations about grant and funding opportunities, driver recruitment and retention, volunteer driver programs, and Medicaid transportation opportunities. CDTC staff also followed up on items discussed at the Tools of the Trade workshop held in 2016.

Session 1: Follow up from 2016 Tools of the Trade; Grants and Funding

1. Follow up from 2016 Tools of the Trade

Carrie Ward began the presentation portion of the event by following up on a number of items discussed during the 2016 Tools of the Trade. The Schenectady ARC, Catholic Charities Senior and Caregiver Support Services, Center for Disability Services, and Senior Services of Albany jointly implemented a shared digital mobile radio system. The grant has ended, but the project is ongoing and is now based on a monthly service contract. The Niskayuna Central School District has since been added to the system, and the Scotia Central School District is expected to join in July 2018. One notable feature is that the GPS is tied to the radio system, which eliminates fees as would be required with cell phones.

CDTA's Navigator is now live, and Swipers and change cards are discontinued. However, single ride Navigator cards are available for bulk purchase. The Medicaid transportation system did finish work on the Public Transit Automated System, however it is not used outside of NYC. In the Capital Region, the Medicaid broker, Medical Answering Services (MAS) mails CDTA Navigators to the enrollee. People should request public transit trips at least five days in advance to ensure adequate time to receive the bus pass. Once received, MAS reloads the card on the enrollee's behalf for continued use. Medicaid reimburses MAS for the cost of the bus passes.

The OPWDD [Mobility Management Study](#) is finished. It was an implementation action from the Olmstead Plan. There has been no implementation of the Mobility Management Study yet; but hopefully recommendations will be considered soon. The Department of Health is actively discussing the use of Lyft as a taxi/livery level Medicaid transportation provider throughout the state with possible implementation by the end of this year. The Center for Disability Services has provided transportation for Wildwood Programs on small scale. The potential for joint provision of transportation between the Schenectady Housing Authority and Catholic Charities Senior and Caregiver Support Services has not been implemented, but remains promising. CDTC held County-level meetings with transportation providers in Albany, Rensselaer, Saratoga, and Schenectady Counties in 2016-2017.

2. Grants and Funding

Carrie provided a brief summary of grant programs available for Human Service Transit Providers.

FTA Section 5310 funding is a grant program for public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public

transportation is insufficient, inappropriate, or unavailable. Not for profits and state/local government entities can apply to implement public transportation projects that improve access to fixed-route service and decrease reliance on complementary paratransit; and/or to implement alternatives to public transportation projects that assist seniors and individuals with disabilities with transportation. A question was asked on the status of the 5310 program, to which Carrie responded that CDTC has rated and ranked projects and is currently awaiting NYSDOT approval of the rating and ranking.

The Job Access and Reverse Commute program for capital, planning and operating expenses for projects that transport low income individuals to and from jobs and activities related to employment, and for reverse commute projects has been discontinued but these project types are still eligible under the FTA Section 5307 and 5311. Section 5307 is the urbanized area formula grant program and 5311 are formula grants for rural areas.

Likewise, the New Freedom grant program supporting new public transportation services and public transportation alternatives beyond those required by the ADA was discontinued, but projects fitting this description are now eligible under the FTA Section 5310.

Agencies can apply to the NYS Department of Health (NYSDOH) to become a Medicaid transportation provider, including with volunteer drivers. For more information see the [enrollment section on the NYSDOH website](#).

[AARP's Community Challenge grants](#) to nonprofits and government entities to improve housing, transportation, public space and other community elements provide \$100's to \$1,000's in funding to each successful applicant. The annual solicitation is usually due in late spring.

The RSVP program is a project of the Corporation for National and Community Service's Senior Corps' volunteer network for people 55+. Colonie Senior Service Centers is the sponsor for Albany, Rensselaer, and Schenectady County, and Saratoga County is the sponsor for that county. Other agencies can partner to get volunteer drivers through these two agencies and the RSVP program.

The National Aging and Disability Transportation Center is a program of the FTA administered by Easterseals and the National Association of Area Agencies on Aging. It occasionally solicits small grants, most recently the "[Getting Ready to Innovate](#)" grants for nonprofit and government agencies to implement projects up to \$20,000 to remove barriers to transportation and expand mobility options.

The Alliance for Better Health is a network of 2,000+ providers and community-based organizations partnering to transform how health care is delivered in our region, with a focus on Medicaid and uninsured individuals. The Alliance has an [Innovation Fund](#) to incentivize collaboration between medical providers and community-based organizations, and to address social determinants of health. Funding is for partners, but the Alliance encourages partnerships with non-partners.

The Office for People with Developmental Disabilities recently funded the Center for Disability Services to provide shared curb to curb rides in fully accessible vehicles for individuals with disabilities. The service is no longer operational. OPWDD also provides bus passes to participants in their Home of Your

Own program, which provides income-eligible people with intellectual/ developmental disabilities eligible for OPWDD services with a low interest loan or a down payment assistance loan to purchase a home.

The NYS Developmental Disabilities Planning Council has demonstration funding to respond to identified needs of individuals with intellectual and/or developmental disabilities as identified in the DDPC State Plan. They are currently funding a “Transit Research & Accessibility Center,” implemented by the Northeast ADA Center at Cornell.

County Departments for Aging often contract for transportation services with taxi companies, nonprofit agencies, and CDTA.

The Community Transportation Association of America’s [Transit Planning for All](#) grant program seeks to develop, test, and demonstrate ways to empower people with disabilities and older adults to be actively involved in designing and implementing coordinated transportation systems. They provide up to \$35,000 to nonprofit or government agencies. CDTC’s Regional Transportation Coordinating Committee is embarking on an update to Coordinated Public Transit – Human Services Transportation Plan for the Capital District, for which the group plans to include a more robust public input process.

Session 2: Driver Recruitment and Retention

1. Jill Weinisch, Wildwood Programs

Jill began with a discussion of their current situation regarding recruitment and driver retention. Currently most of their drivers are older and have been employed with them for many years. This allows them to have a trusting relationship with their workers and let them keep their vehicles at their own homes each night, which is a major job perk, since there is no morning commute. Jill acknowledged that this would be more difficult to allow with younger and less experienced staff. A question was asked about how they address maintenance with vehicles staying at home overnight. They are still able to keep track of maintenance schedule and perform maintenance at their garage as needed. However, very recently they have stopped performing their own maintenance and contracted with Enterprise for fleet management services for a cost savings.

2. Margo Mahoski, Catholic Charities Senior and Caregiver Support Services

Margo said that their drivers typically identify as not “needing” this job but rather doing it because they enjoy the work. The older work may be a good market to target when looking to fill positions. They have had experience with younger staff typically seeing a higher turnover rate with younger drivers who may be using this as a stepping stone job. Margo said that she doesn’t underestimate the power of word of mouth when looking to fill positions.

3. Nathan Mandsager, Schenectady Works

Nathan discussed the Employer Resource Network (ERN) program, which works to reduce the amount of turnover for all types of employers. The average cost of turn over for an employee is approximately \$4,200. Many entry level employees do not come from / have a solid system of stability backing their routine which can lead to inconsistent attendance / effort at work. ERN looks to provide that stability, connecting people to resources, and teaching people skills to create that themselves. They provides employers with an on-site “success coach” that employees can reach out to in order to help them with any problems they may be having that impacts their performance at work. Other forms of this exist, but most are in the form of call in hotlines. The ERN program offers a more personal approach and builds a sense of trust with employees.

Session 3: Volunteer Programs

1. Ellen Avery, Community Volunteer Transportation Company (CVTC), Peterborough, New Hampshire

Ellen began with a discussion of CVTC and what they do. There is a lack of affordable and flexible public transportation options. CVTC started in 2008, at which time they serviced 13 towns, they now service 34 towns, all in southwestern NH. CVTC operates with a completely volunteer driver force of about 80 drivers from 20 different towns. Ellen’s goal is to have 120-140 drivers with drivers from all towns in which they operate. CVTC provides service to local medical facilities and to hospitals in Peterborough, Keene, and the Boston area (approximately 2hrs away). These include Medicaid trips. They focus on other trips as well that promote “healthy living” but aren’t necessarily trips to the doctor. Ellen noted that only 20% of being healthy is doctor related.

CVTC requests a 5 business day notice of requested trips to allow drivers time to coordinate and accept the trips. They use ‘Trip List,’ which is their own program designed to allow drivers to pick up trips and keep track of mileage for reimbursement purposes. Drivers are reimbursed at a rate of 41 cents per mile. This was originally 55 cents per mile when they began and has been decreased with time to help stretch their funding. Ellen was worried when she had to do this that they may have lost drivers, but it did not seem to have much of an impact. They operate on a budget of 190K per year, of which 40% is FTA 5310 funding. The United Way were co-authors on the 5310 grant and their match was cash.

In 2017, 7,133 trips were requested and 5,000 were provided. When riders sign up, CVTC explains up front that sometimes drivers cannot meet the demand and they try and notify them at least 48 hours ahead of time if they will not be able to make the trip. Drivers travelled 116K miles, and CVTC reimbursed 93% of miles traveled (some people do not take the reimbursement).

2. Samuel Purington, Volunteer Transportation Center – Watertown NY

The Volunteer Transportation Center (VTC) operates in Jefferson, Lewis, and St. Lawrence Counties. Much of this area has no public transit service. They try to coordinate all non-bus related trips, and provide approximately 800 trips per day. The VTC has 314 volunteer drivers all using their own vehicles with the exception of 4 wheelchair vans owned by VTC that can be used when needed. Drivers are an average of 60 years old. They all drivers receive background checks, since they provide trips for both Medicaid and Child Protective Services. This adds an additional barrier/check but it opens up a significant amount of trips for them. Drivers are reimbursed every 2 weeks at 44.5 cents / mile. Drivers' vehicles must also go through a standard inspection process, heat and AC working, no smoking, etc. The VTC looks to fill the gaps for people who don't have Medicaid. Primary target users are elderly, blind, and disabled people who have no other choice of transportation. The VTC will not transport people who can use other modes of transportation.

The VTC is currently operating a 1st mile/ last mile pilot in St. Lawrence County, which takes riders to and from bus stops that are typically very far apart. Riders call the bus garage and tell them when / where they need a ride and the bus garage coordinates with VTC to find a driver available to make the trip.

Their drivers have an app that allows them to be tracked in real time. VTC created their own software, which they have started marketing as "VTC in a box". They began doing this to offset their costs of developing the software. VTC is available assist to set up the software and get new programs going.

3. Mike DiRenzo, Medical Answering Services

Mike described how a volunteer transportation organization can begin to act as a "taxi level" service for Medicaid transportation. This represents a cost savings for Medicaid, and can also provide revenue for nonprofit agencies utilizing volunteer drivers. Medical Answering Services brokers Medicaid transportation in all counties in NY except Nassau and Suffolk, based on a Department of Health (DOH) contract. Agencies can apply through DOH for status as a Medicaid transportation provider. Becoming a Medicaid transportation provider will add paperwork etc. to your organization. Having an established billing department is helpful.