

Colorado Mobility and Action Coalition



BACKGROUND

Human Services Transportation Coordination & Mobility Management

SEPTEMBER 2016

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BACKGROUND

Human Services Transportation Coordination & Mobility Management

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HUMAN SERVICES' TRANSPORTATION COORDINATION & MOBILITY MANAGEMENT

This document was compiled to provide background or context to human services transportation coordination. In Colorado, there are interagency coordination efforts going on at the state level and there are regional and local coordinating councils and mobility management efforts. Approaches vary by regional need, but the goals are similar: provide quality service, respond to growing demands, and improve efficiencies. This document attempts to give the essence of how human services coordination and how mobility management came about.

Much of the sections below borrow (and steal) heavily from existing sources. References and sources are cited in footnotes, in the text, or in links. The information is presented from big to small, from federal initiatives to Colorado's efforts to coordinate community transportation (aka human services transportation). It is recognized that coordination must include policy as well as service delivery.

Things we know...

- *The need for transportation is increasing*
 - *More people*
 - *More seniors*
 - *More special needs*
 - *More low income*
 - *Demand exceeds supply —*
 - *and will do more so in the future*
 - *Public funding is allocated away from human services*
 - *Funding is in silos, not person-centered*
 - *Public transportation is under-funded, inadequate, and decreasing*
 - *Transportation isn't cheap—and costs are rising*
 - *Big difference between FARE and COST*
 - *Not everyone can be "funder of last resort"*
 - *Someone has to pay for the last mile*
-

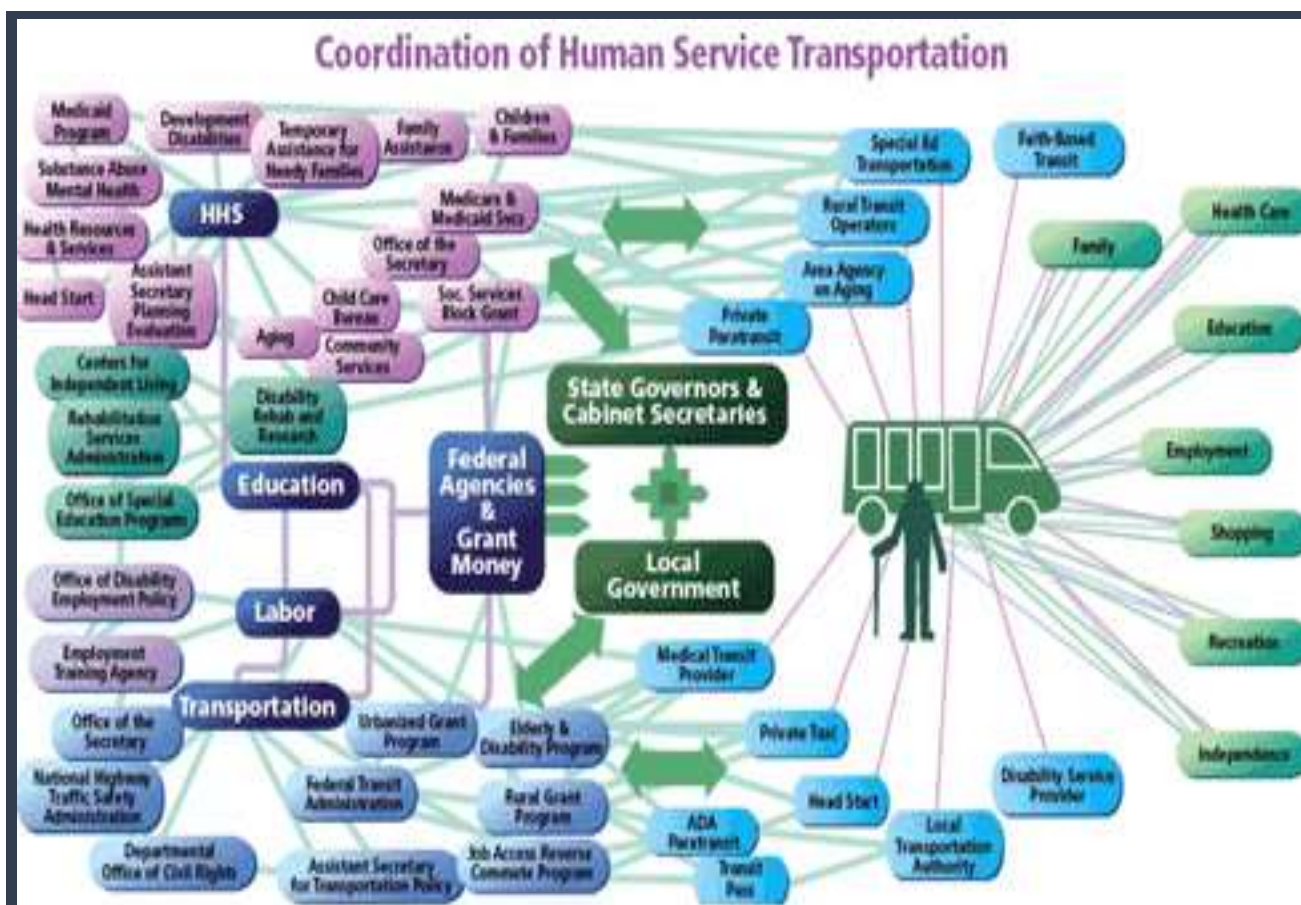
HUMAN SERVICES TRANSPORTATION AND COORDINATION

Human service transportation (HST) is a range of transportation service options intended to meet the needs of older adults, persons with disabilities and/or those with lower income (“transportation disadvantaged”). Individuals should have transportation options to access healthcare, employment, education, social services, and community life. People require different sets of services depending on their abilities, the environment, community supports and services, and financial resources.

The goal of HST coordination is to stretch public dollars while responding to growing demand. Efficiencies are most often found by coordinating the transportation services provided by individual human service agencies that provide transportation solely for their own clientele.

There is a network of publicly-subsidized transportation. DOT and HHS are the primary public transportation funders, but others do too. There are 60–80 federal programs that fund hundreds of state programs and thousands of local agencies. There is often overlap in services or destinations; restrictive funds, rules against crossing jurisdictional boundaries.

There are often rules against “mixing” populations (funding sources)—like seniors and veterans or Medicaid recipients or people with disabilities. It will happen that someone can get to a medical appointment, but can’t go somewhere else *on the same trip*. Same person, different needs at different times. Never mind spontaneity. Imagine arranging a ride to the doctor, then back home (one funder),



arranging to go out again (different trip, different funder) to the market then back home, and then arranging another ride to go to the rec center. It takes time and energy. And it's stressful, especially for us aging people and those of us who have a hard time getting around. Any way you look at it, it's a waste of resources. Doesn't say much for quality of life, either.

Type and amount of transportation varies by funding program and individual eligibility.

Some might be eligible to get to a medical appointment, but not to work. A veteran can use "senior" transportation if that vet is a

senior (thus different funding source), but likely not if a younger non-senior veteran, or a non-veteran with or without a disability. Every program has rules—different levels of government as well as individual agency rules. There are rules and guidelines that guide policy, rules that guide administration and management, rules that guide service delivery and performance.

More people who will soon need or want to leave the driving to someone else.

But the rules can result in gaps and unmet needs. In truth, there isn't enough *capacity*. While there are inefficiencies in the systems that fund transportation, there are also changing demographics and less public money. More people who will soon need or want to leave the driving to someone else. These changes will look very different depending on where you are in Colorado, whether changing economies or aging citizens, or rural and remote.

Two Categories of Transit Service Delivery

Public transportation is categorized as "fixed route" or "demand responsive," and sometimes "deviated fixed route." Fixed routes run on a repetitive, fixed-schedule basis along a specific route with vehicles stopping to pick up and deliver passengers to specific locations. A *deviated fixed route* is a fixed route service which may deviate from its regular route to pick up riders then return to its regular route without significantly detracting from its schedule. Demand response is personalized, direct transit service provided usually for elderly and disabled persons or other special needs populations, either on an immediate demand or advanced reservation basis. See the next illustration and the glossary section for more detail.

Transit Vehicles

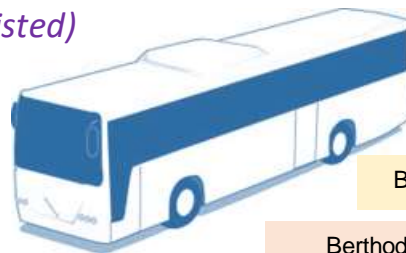
There are few absolutes, but generally—particularly in urban areas—vehicles that run on fixed routes can usually hold about 42 ambulatory passengers when two wheelchair tie-downs are provided. Demand response vehicles traditionally hold around 12 people, but vans, sedans, and other vehicles are also in use. Fixed routes are usually operated by a governmental or quasi-governmental structure. Demand response vehicles are commonly operated by private non-profit agencies.

Transportation Delivery Mechanisms

With Examples (not every Colorado provider listed)

“Fixed Route”

- Established, regular schedule and route
- Most cost-effective



Bustang

Berthod Area
Transp Services

RTD-Denver

Durango Transit

Grand Valley
Transit

Mountain
Metro

Pueblo Transit

Gunnison Valley RTA

Steamboat Springs Transit

Roaring Fork Transp
Authority (RFTA)

Greeley-
Evans

“Demand Response”

- “Complimentary” ADA Paratransit
Not free; it *compliments* fixed route service
- Riders must qualify
- Eligibility has strict oversight
- Restrictions (that tend to Increase costs):
 - Client specific (inability to mix populations, e.g., senior only)
 - Trip Purpose (inability to mix trip types, e.g., medical and anything non-medical)
 - Funding “silos” (e.g., AAA, TANF, Medicaid, Public Health, etc.)
 - Location or geographic limits (e.g., county or community restricted)



Seniors

Mental
Health

Seniors Resource Center

NE Assoc of Local
Governments

VA Medical Hospitals and
Clinics

All Points Transit

Baca County Senior
Transportation

Red Cross

Medicaid Non-Emergency
Transportation (NEMT)

DAV

Medicaid Non-
Medical
Transportation/
HCBS Waivers

Via Mobility Services

Veterans

Lakewood Rides

People with Intellectual
and Developmental
Disabilities

Blue Peaks Developmental
Services

SAINT Volunteer
Transportation

Dolores County Senior Services

Care Connect

Coordination: Basic Concepts

Current public funding for transportation is inadequate. There isn't enough to meet current or future needs for community transportation. This is particularly true for people who cannot or do not drive. Usually those people are older adults, people with disabilities, or people with low incomes—but not always. Transit use is on the rise for the whole population as more people prefer to take transit. Without enough money to go around, agencies need to look for better ways to do things. Coordinating services is one mechanism.

The following section is taken directly from *Economic Benefits of Coordinating Human Service Transportation and Transit Services*, Transit Cooperative Research Program Report 91, Chapter 1: Basic Coordination Concepts¹. *It's quoted directly* because important core policy concepts are explained well.

What is Coordination?

Coordination is a technique for managing resources. Fundamentally, coordination is about shared power among organizations that are working together. For coordination to succeed, the organizations involved must have shared objectives (like increasing mobility for persons who lack mobility) and a real level of shared respect. After these preconditions are met, sharing of the key components of power — responsibility, management, and funding — can occur. Coordination can then change practices of independent operations by multiple providers to more integrated service delivery patterns.

Coordinating transportation systems is best understood as a political process in which two or more organizations interact to jointly accomplish their transportation objectives.

Coordinating transportation means doing better (obtaining more results, like trips) with existing resources by working together with persons from different agencies and backgrounds. Coordination helps to address transportation problems such as duplication of effort and low transportation resource efficiency.

Coordinating transportation systems is best understood as a political process in which two or more organizations interact to jointly accomplish their transportation objectives. Like many other political processes, coordination involves power and control over resources. Coordination can be subject to the usual kinds of political problems and pressures, such as changing environments and competing goals or personalities.

A broad perspective is critical: effective coordination requires a focus on the entire community or maybe even on multiple communities. Individuals who may not be used to talking or working with each other will need to develop levels of trust, respect, and confidence that will permit them to share responsibilities. A willingness to be open-minded about changing long-standing operating procedures is needed. Once these conditions are met, the results can include the blending of travel purposes, client types, travel modes, funding sources, vehicle types, and the needs of different political jurisdictions, as well as organizational philosophies and perspectives. The results can be quite beneficial.

¹[*Economic Benefits of Coordinating Human Service Transportation and Transit Services*](#). TCRP 91. Burkhardt, et.al., 2003.

Why Coordinate Transportation Services?

When human service agencies — such as departments of social services, departments of health and mental health, and area agencies on aging — realized that many of their clients had no means of traveling to the services that they needed, many of these agencies started their own transportation systems. In recent years, public transit agencies have also offered what have come to be known as specialized transportation services. Each of these agencies and organizations may receive funding for transportation services from one or more sources, including federal, state, and local programs and nonprofit programs. Such funds are often accompanied by specific objectives for serving limited clienteles and by specific rules, accountability procedures, and operating requirements.

Previous research shows that, if transportation services are operated in a separate and uncoordinated fashion, many economic inefficiencies and service problems result (Burkhardt, et al., 1990²):

- Multiple transportation providers, each with its own mission, equipment, eligibility requirements, funding sources, and institutional objectives, often resulting in significant duplication of expenditures and services;
- No formal mechanism for cooperation or communication among these operators;
- A total level of service well below the total level of need;
- Vehicles and other resources not utilized to capacity;
- Duplicative services in some parts of the community but other areas have little or no service available;
- Substantial variations in service quality, including safety standards, from provider to provider;
- A lack of reliable information—for consumers, planners, and service operators—about the services being provided and their costs; and
- No comprehensive plan to address these problems.

Coordination has been shown to be capable of resolving such problems and improving specialized transportation services.

What Kinds of Benefits are Expected?

Coordination is expected to provide a wide range of benefits that reduce or eliminate the problems noted above, resulting in more effective and efficient transportation services in a locality. Typical coordination consequences include lowered unit costs and increased ridership.

²Burkhardt, J.E., et al. (1990). Specialized transportation services coordination plan for southeast Michigan. Prepared by Ecosometrics, Incorporated for the Southeast Michigan Council of Governments.

Four major classes of information are needed to describe and evaluate transportation services: system characteristics, performance measures, service attributes assessments, and users' overall system assessments (Burkhardt, 2003³). System characteristics include the resource inputs required for service: funds, personnel, vehicles, etc.

The performance measures typically apply ratios of inputs and outputs to measure factors such as resource efficiency (the amount of public transportation service produced in relation to the resources expended), service effectiveness (the consumption of transportation services in relation to the amount of service available), and cost effectiveness (the consumption of transportation services in relation to the resources expended (Fielding and Anderson, 1993⁴)).

The service attributes include measures of quality — from both the system and the rider perspectives — such as reliability, accessibility, comfort, and affordability. The service assessments reflect the outcomes of the services or how the services influence the lives of those who use them. Taken together, the service assessments and service attributes can be used to express customer satisfaction with the services consumed.

Potential Coordinated Transportation Benefits

<i>Factor</i>	<i>Desired or Expected Change</i>
SYSTEM CHARACTERISTICS (INPUTS)	
Number of transportation providers	Lower
Number of agencies purchasing transportation	Higher
Number of vehicles	Lower
Number of drivers	Lower
Part-time/full-time driver ratio	Lower
Average hourly driver wage	Higher
Total driver wages	Lower
Level and quality of driver training	Higher
Hours when service is provided each day	Expanded
Days when service is provided each week	Expanded
Vehicle hours of service	Maybe lower
Vehicle miles of service	Maybe lower
Total service area	Expanded
Number of persons who can get services	Expanded
Joint purchasing	More frequent
Joint dispatching of agency-owned vehicles	More frequent
Centralized oversight and management	More frequent
Level of route duplication	Lower
Number of funding sources	Higher
Total transportation funding	Higher
One central community information source	More frequent
Segregated client types	Less frequent
Limited trip purposes	Less frequent
Community-wide transportation perspective	More frequent
Time spent in meetings	Higher
Level of planning processes	Higher

PERFORMANCE MEASURES	
Number of passenger trips	Higher
Number of passenger trips per service area population	Higher
Passenger trips per vehicle mile	Higher
Passenger trips per vehicle hour	Higher
Number of driver hours per passenger trip	Lower
Number of admin staff hours per passenger trip	Lower
Cost per vehicle hour	Lower
Cost per vehicle mile	Lower
Cost per passenger trip	Lower
Community benefits	
Economic activity	Higher
Economic growth	Higher
Nursing home admissions per 1,000 population	Lower
SERVICE ATTRIBUTE ASSESSMENTS	More positive
USERS' OVERALL SERVICE ASSESSMENTS	More positive

³ Burkhardt, J.E., 2003. "[Critical Measures of Transit Service Quality in the Eyes of Older Travelers](#)," Transportation Research Board.

⁴Fielding, G.F., and Anderson, P.P. (1993). Public transit performance evaluation. In: Transportation Research Record 915. Washington, DC: Transportation Research Board, National Research Council.

Coordination's economic benefits are best described in terms of system characteristics and performance measures. These tables show changes in characteristics or performance that are desired or could be expected from coordinating human service transportation and public transit systems. For most parties, the changes indicated will be seen as positive improvements. Clearly, a large number of these anticipated benefits will vary significantly according to local conditions and programs.

Coordination should have measurable effects on service attributes and users' overall service assessments. In general, these changes will be seen under the overall heading of "improved services." However, although these positive changes are often greatly appreciated by system users, they are not easily measured in economic terms.

When Is Coordination Effective?

Coordination will not solve all transportation problems in all communities. It needs to be seen as one of several possible management or problem-solving tools. In order to determine whether coordination can improve transportation services in a particular locality, transportation planners must first gather data about the potential users of services and the current transportation providers. The next step is to analyze the effectiveness and efficiency of current services in meeting the service population's needs.

Coordination may be an effective action strategy especially in communities where there is substantial unused vehicle time, substantial unused vehicle capacity, or a lack of economies of scale in planning, administration, operations, purchasing, or maintenance. Without these conditions, strategies other than coordination are better suited to improve transportation services. Thus, coordination has its most substantial impact where transportation efficiency can be improved. In communities where persons who need transportation are not being served but existing services are already highly efficient, coordination by itself will not be an effective strategy: in these cases, additional resources are needed.

- * -

FROM THE COORDINATING COUNCIL FOR ACCESS AND MOBILITY, FTA ADDITIONAL BENEFITS OF COORDINATED TRANSPORTATION

Greater access to funds is provided by:

- Tapping a wider range of funding programs.
- Accessing a greater variety of staff and facilities.
- Employing more specialized and skilled staff.
- More cost-effective use of resources is created through:
 - Productivity increases.
 - Economies of scale.
 - Eliminating waste caused by duplicated efforts.
- More centralized planning and management of resources.
- Greater productivities and efficiencies will:
 - Fill service gaps within communities by offering services to additional geographic areas and individuals within existing budgets.
 - Provide additional trips for community members, thus enhancing their quality of life.
 - Generate cost savings to some participating agencies in special forms of coordinated transportation service.
- More centralized management of existing resources results in greater visibility for transportation services:
 - To riders.
 - To agencies needing trips for their clients.
 - To the community.
 - To funding sources.
- Reduced consumer confusion about how to access services.
- Clear lines of authority.
- More professional (comfortable, reliable, and safe) transportation services.

From <https://www2.fta.dot.gov/ccam/about/faqs>

GOOD RESOURCE. One of many good resources to help understand transportation coordination *and how to do it*, check out the [ICCT Clearinghouse Transportation Coordination Primer](#).

The Primer details a process for creating a coordinating council, assessing community needs and resources, developing an action plan and methodology, applying for funding, and evaluating program and process.

COORDINATION POLICY AT THE NATIONAL LEVEL⁵

Executive Order 13330, February 2004

To promote deficit reduction efforts and fiscal efficiency, President George W. Bush signed [Executive Order 13330](#) in 2004 that ***required federal agencies coordinate human services transportation.*** Coordination is about trimming budgets. Turns out, it's also better use of resources.

Federal Coordinating Council on Access and Mobility

Executive Order 13330 established the [Interagency Transportation Coordinating Council on Access and Mobility](#) (CCAM) (updated 2016) to coordinate the 60–80 “[different federal programs](#) across nine federal departments that provide funding to be used in support of human services transportation.”

CCAM program goals are to:

- Simplify customer access to transportation,
- *Reduce duplication* of transportation services,
- Streamline federal rules and regulations that may impede the coordinated delivery of services, and
- *Improve the efficiency* of services using existing resources.

RECENTLY RE-INVIGORATED (2015), CCAM consists of “federal agencies working together to Connect Communities to Ladders of Opportunities through Transportation”:

The Coordinating Council on Access and Mobility (CCAM) is a partnership of federal agencies working to build ladders of opportunity across America by improving the availability, quality and efficient delivery of transportation services to people with disabilities, older adults and people with low incomes. CCAM members continue to promote further the mission of United We Ride, a 10-year initiative to help states and local communities coordinate across the various federal programs associated with human services transportation.

The Secretary of Transportation chairs the [CCAM](#), which includes the Secretaries of Health and Human Services, Education, Labor, Veterans Affairs, Agriculture, Housing and Urban Development, Interior and Justice as well as the Commissioner of the Social Security Administration and the Chairperson of the National Council on Disability.

Program funds from these agencies are distributed to the states. It's through many different programs that money flows from the federal government through state governments, to finally the local level. It is here where individuals receive transportation services (they get rides).

These are our neighbors.

⁵ Adapted from the [LCC Handbook](#), 2009, TransitPlus, and Mobility Management Basics.

Senior Centers are a good example. Senior Centers are often funded in part by funds from the federal Older Americans Act, through the state to the county. Travel might also be subsidized, nutrition too.

If you're geeky about this kind of stuff, check out the [CCAM website](#). It links to a ton of great information on coordination and mobility management. There is also guidance for specific agencies, like the Departments of Veterans Affairs⁶, Labor⁷, and Human Services⁸. CCAM has developed important policies on [coordinated planning](#)⁹, [vehicle sharing](#)¹⁰, and [performance measures](#)¹¹— all of which is aimed at these federal agency members.

PROGRAM INITIATIVES Coordinating Council on Access & Mobility

Rides to Wellness [From <http://nationalcenterformobilitymanagement.org/rides-to-wellness/>]

A significant factor in rising healthcare costs is the prevalence of chronic disease across the country, with a disparate impact on low income populations. According to the Centers for Disease Control and Prevention (CDC), chronic conditions such as heart disease, stroke, cancer, diabetes, obesity and arthritis are among the most common, costly, and preventable of all health problems and the leading causes of death and disability in the US.

Lack of transportation access can create a barrier for treatment and screening, with an estimated 3.6 million Americans missing or delaying non-emergency medical care each year because of transportation issues. People often don't make appointments or go to free health screenings if they can't get a ride.

For all of these reasons, the Federal Transit Administration launched the **Rides to Wellness Initiative** to increase partnerships between health and transportation providers and show the positive financial benefit to such partnerships. The initiative's goals are to:

- Increase access to care
- Improve health outcomes
- Reduce health care costs

In March 2015, FTA hosted a Rides to Wellness summit, a cross-agency effort to clarify needs, identify barriers and brainstorm solutions. Representatives from FTA, HHS, USDA and the Dept. of Veterans Affairs attended.

⁶ See [Guidance to VA medical centers on implementing strategies in response to Executive Order 13330 on Human Transportation Services Coordination \(PDF\)\(32 KB\)](#)

⁷ [Employment and Training Administration - Strategies to Meet One-Stop Career Centers' Business and Job-Seeker Customer Needs for Employment-Related Transportation Services](#) and [Employment and Training Administration guidance to grantees on vehicle sharing and coordinated planning](#)

⁸ [Use of Temporary Assistance for Needy Families \(TANF\), Welfare to Work, and Job Access Funds for Transportation](#)

⁹ See also [Final Policy on Coordinated Planning \(2006\)](#)

¹⁰ See also [Final Vehicle Sharing \(2006\)](#)

¹¹ [Logic Model and Performance Measures](#) and [Final Logic Model Performance Measures](#)

United We Ride

[UWR](#), a project of CCAM, is/was an interagency federal, national initiative that supports states and their localities in developing coordinated human service delivery systems and coordinate across the various federal programs associated with human services transportation. While there has been significant federal investment in accessible public transportation systems, it's gone to exclusive funding "silos" for specific programs. Too often this has turned into a bureaucratic mess of unintended fragmented, inconsistent, duplicative, and restricted service. Federal funds are not intended to be exclusive of other federal funds. Federal funds can and should be used together¹².

CCAM is reinvigorating UWR and it remains an excellent resource on coordination, One Call/One Click, technology, mobility management, community assessment (["Framework for Action"](#)), and [more](#).

National Center for Mobility Management

The [NCMM](#) is a program of the FTA administered by Easter Seals, CTAA, and APTA. Developed under United We Ride, NCMM supports communities' efforts to develop transportation options that "empower people to live independently, and advance health, economic vitality, self-sufficiency, and community."

NCMM facilitates communities adoption of options and strategies that allow people to live independently with access to transportation. Community transportation promotes healthy living and supports the economy.

NCMM activities support FTA "grantees, mobility managers, and partners in adopting proven, sustainable, and replicable transportation coordination, mobility management, and one call—one click transportation information practices."

NCMM's activities are described as:

- ✓ Providing assistance to communities through NCMM Regional Liaisons, a peer-to-peer network, short-term technical assistance, web resources, and one-on-one phone and e-mail support
- ✓ Delivering in-person and virtual trainings, a monthly e-newsletter, webinars, and conference calls Disseminate descriptions of relevant promising practices, including "snapshots" of a particular topic or trend as well as a more in-depth database of practices
- ✓ Collaborating with mobility management practitioners through several communication forums Align and support the goals and activities of the Coordinating Council on Access and Mobility (CCAM) and the Federal Transit Administration's United We Ride program

Read [more](#).

¹² Federal funds can be used to match other federal funds, **except** that US DOT funds cannot be used to match other US DOT funds. FTA Section 5311 funds cannot be used as match for Section 5310, or FHWA funds cannot be used to match FTA funds, for example.

ADDITIONAL RESOURCES ON THE RIDES TO WELLNESS INITIATIVE:

Read FTA Acting Administrator's Therese McMillan's blog post about the Healthcare Access Challenge Grants:

- [Creative Ways to Make that Healthcare Appointment.](#)
- [Healthcare Access Challenge Grants Announcement.](#)
- [Healthcare Access Challenge Grants Awards and information about the current projects.](#)
- [Rides to Wellness Panel Presentation.](#)

Veterans Transportation Community Living Initiative

FTA awarded \$64 million in competitive grants to help veterans, military families, and others connect to jobs and services in their communities by improving access to local transportation options. All funded projects are displayed, with descriptions, on the map based on the location of service.

National Center for Mobility Management

Healthcare Access Challenge Grant awards and info about the current projects. For more info, visit the website for the National Center for Mobility Management.
[\[http://nationalcenterformobilitymanagement.org\]](http://nationalcenterformobilitymanagement.org)

WHAT IS MOBILITY MANAGEMENT?

There are far more resources on mobility management available now, unlike the early days of Mobility Management. These sources are through FTA and FTA-supported programs. We first *borrow heavily* from the [Mobility Management Brochure](#) from United We Ride, an FTA outreach program. Written in 2007, the brochure does a good job of describing what, at that time, was a new profession.

Mobility Management grew out of FTA's recognition that someone needed to do the *work* of coordination. Coordination was a required response to address deficit reduction. Mobility Management became eligible for funding under then new SAFETEA-LU transportation legislation. Mobility Management was promoted as a *capital expense*, with up to 80 percent federal match, for most FTA programs at that time (5307, 5310, 5316, 5317, and 5318). Mobility Management was seen as a way to focus on coordinating transportation options and service providers to make "a more efficient transportation service delivery system for public policy makers and taxpayers who underwrite the cost of service deliver."

Mobility management focuses on meeting individual customer needs through a wide range of transportation options and service providers.

Legislation defines Mobility Management as "short-range planning and management activities and projects for improving coordination among public transportation and other transportation service providers." According to United We Rides, Mobility Managers serve as

- **Policy Coordinators** who help communities develop coordination plans, programs, and policies; and build local partnerships. They also promote transit-friendly land use policies.
- **Operations Service Brokers** who coordinate transportation services among all customer groups, service providers, and funding agencies.
- **Customer Travel Navigators** who work with human service agencies and/or workforce centers that coordinate the travel and trip planning needs of individuals who receive human service program assistance.

Mobility Management thus becomes a different way to manage and deliver coordinated transportation, the focus largely on older adults, people with disabilities, and people with lower incomes. Demographic, economic, labor market, land use and other changes are forcing policy makers to look for better approaches to providing transportation are needed, particularly for people who have mobility challenges.

The law made a variety of Mobility Management activities eligible for funding:

- *Operating transportation brokerages* to coordinate service providers, funding resources, and customer needs;
- *Coordinating transportation services* for older adults, individuals with disabilities, and individuals with low incomes;

- *Supporting local partnerships* that coordinate transportation services;
- *Staffing* for the development and implementation of coordination plans;
- *Providing travel training and trip planning* activities for customers;
- *Developing and operating traveler call centers* to coordinate travel information, manage eligibility requirements, and arrange customer travel; and
- *Planning and implementing* the acquisition and purchase of *intelligent transportation technologies (ITS)* to operate a coordinated system and make individualized service possible.

Mobility Management approach is different from traditional transit service. Mobility Management:

- *Disaggregates service planning and markets* to better serve individuals and the community. Traditional transit service planning responds to the demand with the traditional transit system.
- *Focuses on service diversity* and an assortment of transportation services to address customer/rider needs. Traditional versus traditional transit systems that are built on the principle of unified regional service coverage. A “family of transportation services” is a wide range of travel options, services, and modes that are matched to community demographics and needs.
- *Uses multiple transportation providers* to offer the most efficient and effective service to all individuals. Traditional transit agencies typically use a single operator to deliver all services.
- *Underscores the importance of service advocacy* as a way to improve public transportation management and delivery. A mobility manager acts as a travel agent/service coordinator to seek the most effective means for meeting an individual’s transportation needs. Transit agencies generally focus on the direct provision of services.

Mobility Management Activities

In working to understand mobility management activities in Colorado, CDOT, CMAC session attendees, and others are studying common activities and working to categorize and simplify them. New material will be available at that time. The following continues from *The Mobility Management Brochure*.

Meeting the community’s transportation needs is possible if transportation providers, human services and workforce investment agencies, and the community collaborate to plan and implement services. Important Mobility Management activities include:

- Developing an inventory of available services;
- Identifying customer needs;
- Developing strategies to meet needs;
- Coordinating financial and other resources;

- Improving coordination through transportation brokerage systems;
- Training staff and volunteers;
- Promoting the use of innovative technologies, services, and other methods to improve customer service and coordination; and
- Developing customer information and trip planning systems.

Performance Measurement

Determining program success is another key element of mobility management. Progress needs to be measured. Furthermore, federal law requires performance measures as a condition of funding. FTA promotes a [logic model](#) to measure a community's progress in developing a mobility management strategy.

A collaboration of CDOT policy makers, grant managers, and mobility managers are working to define performance measures specific to Colorado. Measures will be based on relevant activities, activities that are aligned with goals and objectives identified in Statewide and Regional Transit Plans.

Customer Focus and Person Centered

The [National Center for Mobility Management](#) calls Mobility Management a customer-focused approach to designing and delivering transportation services that focuses on the customer. However individual the focus is, flexibility and coordination begins with a community working together—the entire transportation network. That means bringing public transit, private operators, cycling and walking, volunteer drivers, and others together to work with customers, planners, and stakeholders to deliver the transportation options that best meet the community's needs.

Mobility Management as it Evolves

We've recommended and linked a number of documents that excellent resources. There's a lot to pick from, but this particular presentation caught our eye. Contrary to the title "[The Roots of 'Mobility Management'](#)", it's an overview "emerging new paradigms" for public transportation. Here are several slides from that presentation. It's a hint of where the field is headed. Seemed worth sharing.

**Why a New
“Mobility Management” Paradigm?**

- Our quality of life and economic vitality remains at risk;
- Socio-economic trends act to reduce relevance of traditional transit;
- Fragmented responsibilities, regulatory constraints, conflicting policies and goals, and restrictions on funding frustrate innovation;
- Separate, hierarchical, monolithic operating agencies remain the norm;
- We are slow to grasp the “customer experience” as a strategic focus;
- We are slow to deploy state-of-the-art information technologies.

Circumstances facing most public transportation agencies provide ample reason to examine fundamental changes in the years ahead. To what extent do these factors impact your agency and it's effectiveness?

TCRP J-08 New Paradigms for Local Transportation Organizations

Today's Converging Imperatives

1. The decades long struggle to advance "*service coordination*," driven by the need for greater economy, efficiency and effectiveness;
2. Lessons drawn more recently from *fundamental changes across business and industry* that point the way toward an operational model of mobility management; and
3. Prospects that future Federal legislation will provide a greater emphasis on *managing mobility on a metropolitan scale*.

The drive toward fundamental organizational change and the current interest in "managing mobility is also a product of three current and converging imperatives.

TCRP J-08

New Paradigms for Local Transportation Organizations

The Concept of "Mobility Management" Made Operational

- ...A *goal* that serves broad public purposes.
- ...A *responsibility* to be shared both within AND outside the "provider" community.
- ...A *function* to be embraced and carried out as a new, strategic organizational mission, task.
- ...An approach that requires *fundamental changes* in how transportation assets and resources are managed.

"Mobility management" is a shift away from managing the transit assets owned by individual providers to a larger, more strategic responsibility for assuring the quality of the customers travel experience, regardless of whose assets are being used.

TCRP J-08

New Paradigms for Local Transportation Organizations

The Emergent “Mobility Management” Paradigm

- In each case, the customer deals with the integrated service provider concerned with the door-to-door trip
- In each case, information technology is used to design, track, and evaluate the services provided
- In each case, the modal capacity need not be provided on the dedicated assets of any single company



TCRP J-08

New Paradigms for Local Transportation Organizations

How to Move Toward Mobility Management: Six Dimensions of Change

- | | |
|--------------------|---|
| • Mission shift | <i>From 'capacity provider' to 'mobility manager'</i> |
| • Customer focus | <i>Measure quality of the customer's travel experience</i> |
| • Collaboration | <i>Across modes, agencies, programs, jurisdictions</i> |
| • Integration | <i>Of facilities, equipment, systems, services, functions, processes, resources</i> |
| • “Info-structure” | <i>Universal fares, real-time info, joint scheduling and dispatching, unified accounts, etc.</i> |
| • Organ. Structure | <i>Distinguishing strategic from operational responsibilities, new / reorganized functions, units, skills</i> |

Action on any one or more of these dimensions can begin to move an organization toward more effective mobility management

TCRP J-08

New Paradigms for Local Transportation Organizations

Mobility Management in Action: Emerging Models in 2011

- Transit Agencies
San Francisco MTA, Denver RTD, PACE/Chicago, TARC in Louisville, Salt Lake City UTA, SMART/ Detroit,
- Cities/Counties
Savannah, GA, Tompkins Co., NY, Maricopa Co., AZ, St. Augustine, FL,
- MPOs
SF MTC, Lower Savannah COG
- States
Wisconsin, Florida
- For-profit/non-profit/independents
COAST/Colfax WA, Paratransit, Inc., Sacramento, Buffalo, NY brokerage,, Outreach, Inc./San Jose, CA, TransCom, TranStar

Agencies in orange are profiled elsewhere on the web site

TCRP J-08

New Paradigms for Local Transportation Organizations

The Mobility Management Function



For public transportation agencies, the mobility management function, role and responsibility may parallel the models emerging in transportation and other business sectors...but the mobility management responsibility requires support from partners OUTSIDE the transit organization to be successful

TCRP J-08

New Paradigms for Local Transportation Organizations

Decisions Needed to Make Mobility Management Effective

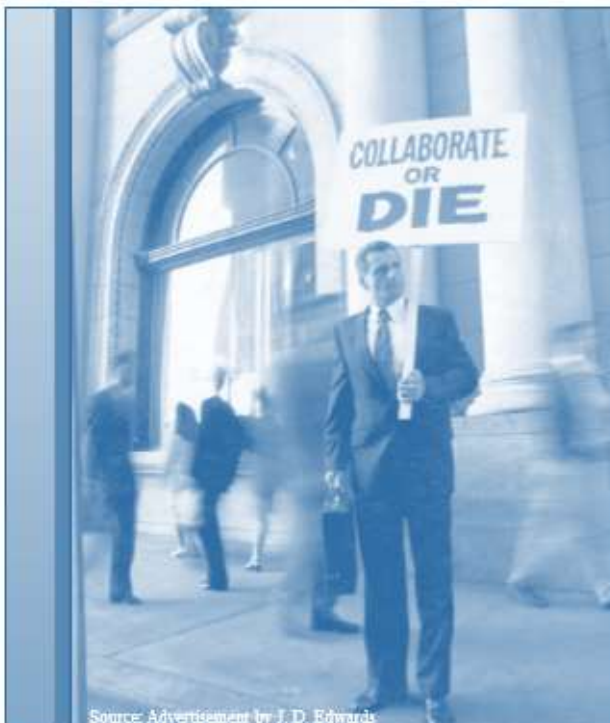
“Servicing the public and planning performance excellence on a region-wide system requires more than equipment installation and one-time projects. A framework is needed to link ongoing actions of the many transportation operators, service providers [and decision-makers] in a metro region.”

ITE Journal, May 2004

- o What organization should be empowered to “manage mobility?”
- o Who will define and assign responsibility? What is the role of state elected officials? Local elected officials?
- o Who is responsible for assuring that transportation resources and assets are fully integrated?
- o Who must act to reduce or eliminate barriers and contradictory policies and practices across local areas and agencies?

TCRP J-08

New Paradigms for Local Transportation Organizations



Source: Advertisement by J.D. Edwards

Action Steps in Promoting Mobility Management

Actively foster and support collaboration and integration...

- ...across organizations
- ...across modes
- ...across programs
- ...across resource bases

TCRP J-08

New Paradigms for Local Transportation Organizations

Learn More

Online Course in Mobility Management

There is an online, self-paced Mobility Management Basics course offered by the National Center for Mobility Management. Click [here](#) for list of and links to modules:

1. What is Mobility Management
 2. Understanding the Customer
 3. Identifying Transportation Services in Your Community
 4. Transportation for People with Disabilities
 5. Transportation for Job Seekers and People with Limited Income
 6. Transportation for Medical Purposes
 7. Transportation for Older Adults
 8. Transportation for Military Veterans
 9. Creating New Service Options
-

MOBILITY MANAGEMENT AND CDOT

The following material is quoted from the CDOT Division of Transit and Rail Grant Partner Manual¹³, 2016.

The *Division of Transit and Rail* defines mobility management as those:

Activities by a transportation provider or coordinator designed to ensure the mobility of individuals from their trip origin to their trip destination regardless of the individual's age or disability status, using as many mobility options as are necessary and available along the route of travel to ensure the customer is able to reach their destination with as few interactions as possible (One stop shop concept).

In practice, mobility management requires several elements. First, the individual providing the mobility management service should have the ability and authority to act on behalf of the passenger to arrange their travel across multiple modes. This can range from walking to bicycling through for-profit transportation (taxi cabs, Uber, Lyft, etc.) to public transit and specialized transportation modes. The use of multiple modes may include arranging for transportation on one carrier for one direction of travel and on another for the return trip.

Second, the mobility manager must have a directory of potential service modes available to them at the time the request for transportation comes in. The development and administration of such a database is a core element of any successful mobility management or coordination program. It can be as simple as a guide of services or as sophisticated as a trip planning application.

Finally, the mobility manager is responsible for tracking the passenger's use of the service options provided to them, ensuring that the trip was accomplished. The mobility manager is also charged with tracking unsuccessful trip requests to aid in identifying gaps in service for future planning efforts.

CDOT is in the process of clarifying its definitions and developing a comprehensive state mobility management plan. Once this plan has been adopted, [they] will provide more information on how mobility management will be supported.

— * —

COORDINATION POLICY AT THE STATE LEVEL

So far we've only talked about federal agencies and activities. The federal agencies involved¹⁴ agreed to work together. This must happen at the federal policy level because it affects the funding passed from the federal government to the states—and on down to local jurisdictions. As the federal funders sort out policy, states should identify their own policies and legislation for barriers and inefficiencies

¹³ [DTR Grant Partner Manual 2016](#)

¹⁴ US Departments of Agriculture, Education, Health and Human Services, Housing and Urban Development, Interior, Justice, Labor, Transportation, Veteran Affairs, and the National Council of Disability and Social Security Administration.

and coordinate their own HST. Human Service Transportation coordination—*and address those barriers*.

At the local level, agencies that receive federal funding, even indirectly, are to collaborate on coordination issues. This is true no matter the funding amount. The need for and mandate to coordinate has remained even as the transportation legislation has changed a couple of times since 2004. Descriptions and links to legislation are included as an appendix.

The FTA encourages states to coordinate by attaching desired outcomes to funding opportunities and planning requirements. Public policies promote coordination through funding requirements, offering incentives for improvements in coordination, and requiring transportation and human service providers to demonstrate strategies and efforts to coordinate resources at the local level.

Funding Policy, Division of Transit and Rail

Quoted from the CDOT/DTR Grant Partner Manual, 2016.

Coordination is required in order to ensure that the funding available for public transit in Colorado is utilized to its maximum potential. With the balkanization of funding at the state and federal level, transportation programs are often limited to working under the programs with which they are most familiar while other funding is either used inefficiently or ineffectively. Coordination allows transportation providers to work together to serve the community, sharing information, resources, and forging a unified vision of service to the region.

Coordination may take several forms from ad hoc committees to organizations dedicated to directly coordinating services in a region. Grant partner participation can range from attending meetings to hosting coordination centers and merging operational functions with other agencies.

*It's preferable to have a regional entity
to do mobility management—
DTR/CDOT*

Each region is different and DTR supports all forms of coordination. Funding is made available to support coordination councils and to develop regional transit plans that include coordination efforts. Other support is made through the Colorado Mobility Action Coalition and through training provided through the RTAP program.



STATEWIDE AND REGIONAL PLANNING

Agencies that hope to receive CDOT/DTR-administered funding from the FTA¹⁵ must participate in coordination activities with other transportation providers, human service agencies, service recipients, and other relevant stakeholders. Many non-transit agencies receive funding each year for client transportation. For FTA funding, at a minimum, requires involvement with local HST planning and inclusion in a Coordinated Public Transit-Human Services Transportation Plan in their Transportation Planning Region. That's just the base level. Community members and clients need access to services or employment, there may be value in collaborating with other agencies with similar needs.

Between 2014 and March 2015, the Division of Transit and Rail (DTR), human service agencies, and interested stakeholders prepared Regional Coordinated Transit and Human Services Plans (Regional Transit Plans) for nine of 15 CDOT Transportation Planning Regions (TPR) in the state. The South Central TPR developed their own Regional Transit Plan in April 2014. These Plans were developed to meet all CDOT and Federal Transit Administration planning requirements for funding eligibility and planning for Colorado's transit needs. They also serve as a foundation, along with the urban area transit plans, for Colorado's first Statewide Transit Plan.

Each Plan was integrated into the [Statewide Transit Plan](#). The SWTP and your Regional Transit Plans and Appendices are your guiding documents.

Statewide Transit Plan: http://coloradotransportationmatters.com/wp-content/uploads/2015/03/SWTP_Final_March2015_web.pdf

Under federal regulations the urban areas (Metropolitan Planning Organizations: North Front Range, Greater Denver Area, Pikes Peak Area, Pueblo Area, Grand Valley/Grand Junction Area) must develop their own Transit Plans. These Transit Plans are part of the areas multimodal Regional Transportation Plan. Here are links to urbanized areas' website for more information on their transportation/transit plans.

[Denver Metro Area](#)
[Grand Valley Area](#)

[North Front Range Area](#)
[Pikes Peak Area](#)

[Pueblo Area](#)

Regional Transit Plans and Appendices

These are links to the final rural Regional Transit Plans (2015).

Transportation Planning Region	Plan	Appendices
Central Front Range	Download Plan	Download Appendices
Eastern	Download Plan	Download Appendices
Gunnison Valley	Download Plan	Download Appendices

¹⁵ Most commonly FTA Sections 5310, [Enhanced Mobility of Seniors and Individuals with Disabilities](#) and 5311, [Formula Grants for Other than Urbanized Areas](#)

Intermountain	Download Plan	Download Appendices
Northwest	Download Plan	Download Appendices
San Luis Valley	Download Plan	Download Appendices
South Central	Download Plan	
Southeast	Download Plan	Download Appendices
Southwest	Download Plan	Download Appendices
Upper Front Range	Download Plan	Download Appendices

State Agency Coordination and the State Coordinating Council

The SCC has not met since 2014, but intends to reconvene soon. Among the issues will be working to establish a State-level mandate or recommendation to coordinate human services transportation. Without strong “encouragement” from a higher governmental authority, individual agencies are less inclined to invest the resources in coordination.

History

The State Interagency Coordinating Council on Transportation, Access, and Mobility (State Coordinating Council – SCC) is the CDOT sponsored organization dedicated to coordinating HST to improve mobility and better ensure public dollars are spent efficiently and effectively. The SCC was formed in 2005 as Colorado’s version of United We Ride and CCAM. The Governor at the time, Bill Owens, assigned “lead agency” status to CDOT and asked a wide range of stakeholders to participate. Most were state agencies, for example, State Departments of:

- Health Care Policy and Finance (HCPF, Medicaid-funded transportation),
- Human Services (representing Area Agencies on Aging, Community Centered Boards for people with intellectual and developmental disabilities),
- Labor and Employment (Workforce Development)
- Local Affairs
- Public Utilities Commission (regulates common carriers)
- Education

A few federal agencies were represented, including the Eastern Colorado Veterans Administration Medical Center (VA hospital); and the Departments of Agriculture and Housing and Urban Development.

Many nonprofit transportation providers, social service organizations, advocates, and transportation users became SCC members too. In early meetings, the SCC worked hard to educate itself of the role its members played in the human services transportation picture. Most participants had little idea about what services were offered—and the restrictions—by their sister agencies.

The SCC identified two core problem areas on which to focus:

1. Increase awareness about specialized transportation needs, issues, and resources in Colorado.
2. Develop and promote viable strategies for encouraging interagency collaboration, coordination and communications and for addressing policy & procedural barriers.

These focus areas are built on three core challenges:

- ⇒ Federal, state, regional, and local/county agencies do not consistently coordinate, communicate, or collaborate;
- ⇒ Colorado lacks common cost allocation and/or accounting principles for human service agencies and human service transportation; and that
- ⇒ Funding programs often have policies that inhibit services coordination.

The SCC recognized early that coordination needed to be developed and maintained on more than one front. Policies at the state (and federal) level needed to be identified and addressed, but changes needed to also occur at the administrative and service delivery level, and often in tandem.

Early SCC Members

- Colo. Assn. of Transit Agencies (CASTA)
- Colo. Behavioral Healthcare Council
- Colo. Counties, Inc. (CCI)
- Colo. Cross Disabilities Coalition
- Colo. Municipal League (CML)
- Colo. Departments of
 - Education
 - Health Care Policy and Financing
 - Human Services, Divisions of
 - Aging and Adult Services
 - Vocational Rehabilitation
 - Developmental Disabilities
 - Labor and Employment, Workforce Development
 - Local Affairs
 - Transportation
- Colo. Healthcare Assoc.
- Colo. Mobility Coalition
- Consumers/clients/riders
- Denver Dept. of Human Services, Adult Services Section
- Denver Regional Council of Governments (DRCOG)
- Easter Seals of Colorado
- Regional Transportation District
- US Departments of
 - Agriculture, Rural Development
 - Health and Human Services, Head Start
 - Housing and Urban Development
 - Veterans Administration

For example, focus on Medicaid-funded transportation touches federal and state policy, county administrative policy, and service delivery. The network of transportation options available for veterans' transportation might be a more complicated silo than Medicaid. A lot of different focus areas could be the local priority, like employment and education transportation, healthcare (not exclusively Medicaid), law enforcement, housing, and so forth.

The SCC was instrumental in developing the regional and local coordinating councils. Members contributed to writing the NOFAs and evaluation criteria for forming and facilitating new, and then renewing coordinating councils.

Local Control: Colorado, Land of 64 Nations

Although the State establishes policy, it does not control how counties administer programs. Colorado is one of 13 states with a particularly strong local control ethic. This means that Colorado state government cannot dictate *how* a county complies with state requirements. Counties must develop their own policies and procedures.

Local control allows flexibility to address diverse needs in a dynamic and complex economy. However, it often results in each county, or sometimes groups of counties ("regions"), having its own way of doing things—which is great—but it can make shared efforts or inter-county transit efforts time-consuming challenges because rules and processes—and resources can vary significantly.

Compounded with limited staff in virtually every public and non-profit agency, resources to invest in coordinating services are limited. Especially if the advantages are indirect or unclear from the agency or county's perspective. Counties can often be reluctant to share resources with adjoining counties, particularly when resources are thinly stretched.

Human service programs are administered and delivered at the county level where they can deliver services that better responds to local conditions. This can result in multiple vehicles being dispatched from one area to common destinations. Coordination is challenging because service delivery and policies differ. This lack of consistency makes it harder to coordinate transportation systems with human services and health care systems. The State hasn't made it easier; key funding agencies have regional offices and boundaries that don't line up. For example, CDOT's 15 Planning Regions often have different boundaries from the Area Agencies on Aging's regional offices, Community Centered Boards (for people with intellectual or developmental disabilities), Workforce Investment Areas, Local Affairs, etc.).

Compounding the coordination challenge is that public transportation isn't available everywhere or at the same times. And, while CDOT is actively pursuing an intercity bus network that provides *meaningful connections* for passengers, it's in the early stages.

Nonetheless, counties are responsible for providing many services. The emphasis on local control means local decision makers determine how to use transportation resources. That often first requires helping a wide range of agencies understand the benefits of coordination. Then comes the process of identifying activities around needs and solutions.

Local County Control in Colorado

Colorado counties are a subdivision of state government existing to administer state programs at a local level. County governments are responsible for functions in all areas of the county, both urban and rural.

Counties are responsible for providing the state's social services, including administering and carrying out virtually all programs overseen by the Colorado Department of Human Services. Counties may provide health services, although their ability to do so depends on resources available.

Home Rule Authority

A county having a charter may establish its own structure of county government. County home rule adopted under statutory procedures does not include the kind of "functional" home rule powers found in municipal charters. Thus, state statute still determines the functions, services and facilities provided by home rule counties. Currently, there are two home rule counties in Colorado: Weld and Pitkin. Denver and Broomfield are also "home rule," but have unique dual city/county status and specific constitutional provisions grant them more expansive municipal style home rule power.

Article XIV of the Colorado Constitution also establishes the organization and structure of non-home rule counties.

For more, see [here](#) and <http://ccionline.org/download/Snapshot%202011.pdf>

COORDINATION AT THE REGIONAL AND LOCAL LEVEL

Coordinating Councils

Quoted from the 2016CDOT/DTR Grant Partner Manual

The process of coordination depends on the agencies that provide the services coming together to work on coordinating services. Depending on the local operating and political dynamics, Regional/Local Coordinating Councils may consist of entities within a specific county or may include multiple counties.

DTR encourages coordination by annually offering seed funds to develop R/LCCs. These grants are 100% FTA funds requiring no matching funds and are awarded to organizations interested in leading the development of the L/RCC. This funding is available for a maximum of two years and must result in the development of an action plan for coordination for the area.

An action plan for HST coordination should identify:

- goals and objectives of the coordinating council
- a “champion” agency to manage the R/LCC moving forward, and
- key coordination needs of the region, and
- financial and other support provided by the various partner agencies

The champion agency is then eligible to apply to DTR for 5310 or 5311 funding to support the mobility management activities identified in the action plan. These activities and needs should also be reflected clearly in the regional transit plan(s).



Colorado Mobility and Access Coalition¹⁶

CMAC exists to provide support and training for mobility managers and arguably for the whole coordination family. CMAC includes professionals dedicated to promoting and supporting mobility through coordination. Formed in 2014, mobility managers came together for mobility managers, still a young profession. Most of CMAC’s efforts are focused on encouraging transportation options and innovation for people who need assistance.

Toward this, CMAC has given presentations and training at CASTA conferences since 2014.

CMAC’s Value Statement

- 1. We value statewide interagency coordination to improve access to community transportation.*

¹⁶DTR encourages and supports the organization and its efforts but does not participate in any capacity to direct or manage the organization

2. We value everyone involved—providers, customers, coordinators, human service agencies, and funders.

3. We value action and results.

4. We value simple, transparent and collaborative processes and decision-making.

Through an iterative process and study of national definitions, CMAC defines mobility management in Colorado:

Mobility Management plans and manages activities and projects that improve coordination among transportation providers and those who need transportation. Mobility Management assists moving any individual using a range of transportation options, with a focus on effectiveness and cost-efficiency.

Mobility Management seeks and leverages a variety of funds and partnerships to connect resources and needs in a sustainable manner. (Mobility Management CMAC Definition, Spring 2015.)

Stated in the 2014–2015 Action Plan, CMAC’s goal is to be a

Centralized Information Portal/Point for LinkedIn, Information Sharing, Mobility Management (MM) Tips, Funding information, Education Opportunities, Workshops and other support functions for Colorado professionals working on mobility management activities.

With this objective:

Objectives:

Grow Colorado Mobility Action Coalition (CMAC) in order to become effective support network for Colorado mobility management professionals.

Promote MM needs, issues and accomplishments through education and awareness as well as collaboration with the CO State Coordinating Council (SCC) to address policy issues affecting MM programs.

CMAC is also developing agreement on involvement in the transportation planning process, identifying core activities, and proposing performance measures. For a copy of the latest newsletter, contact Sarah at sarah.dodson@durangogov.org.

GREAT LIST OF FEDERAL FUNDERS:

[Federal Programs Available for Use in Coordinated Transportation Arrangements](#)

[Appendix A: An Inventory of Federal Funding for Coordinated Transit and Human Services Transportation](#)

APPENDIX 1. ADDITIONAL RESOURCES

From the Small Urban and Rural Transit Center (SURTC):

[*Annotated Bibliography of Human Service Transportation Coordination.*](#)

From the Transit Cooperative Research Program:

- [*Economic Benefits of Coordinating Human Service Transportation and Transit Services*](#), TCRP Report 91.
- [*Impact of the Affordable Care Act on Non-Emergency Medical Transportation \(NEMT\): Assessment for Transit Agencies*](#), 2014. TCRP Research Results Digest 109. This study looked at the impact of the ACA on NEMT nationally and concluded that “Despite representing a significant funding source of human service agency transportation, there is a scarcity of data concerning the effectiveness of NEMT characteristics.”
- [*Improving Transit Integration Among Multiple Providers*](#). Joey Goldman, *et.al.* 2014, TCRP Report 173.
- [*Local and Regional Funding Mechanisms for Public Transportation*](#), Cambridge Systematics, 2009, TCRP Report 129.
- [*Open Data: Challenges and Opportunities for Transit Agencies*](#), TCRP Synthesis 115.
- [*Resource Guide for Comingling ADA and Non-ADA Paratransit Riders*](#). Rosemary B. Gerty, *et.al.* 2011, TCRP Report 143.
- [*Sharing the Costs of Human Services Transportation*](#), Jon E. Burkhardt, *et.al.* 2011, TCRP Report 144.
- [*Sub-Allocating FTA Section 5307 Funding Among Multiple Recipients in Metropolitan Areas*](#), TCRP Synthesis 113.
- [*Transit, Call Centers, and 511: A Guide for Decision Makers*](#). 2009, TCRP Report 134.
- [*Toolkit for Rural Community Coordinated Transportation Services*](#). J E Burkhardt, *et.al.* 2004. TCRP Report 101.

[*Effective Transportation Advisory Committees: Creating a Group that Reflects all Community Voices.*](#)
Easter Seals Project Action, 2012.

From the General Accounting Office:

- [*Transportation Disadvantaged Populations: Nonemergency Medical Transportation Not Well coordinated, and Additional Federal Leadership Needed*](#), December 2014, GAO-15-110.
- [*Transportation Disadvantaged Populations: Coordination Efforts are Underway, but Challenges Continue*](#), US Government Accounting Office, November 2013, GAO-14-154T.
- [*Transportation Disadvantaged Populations: Federal Coordination Efforts Could be Further Strengthened*](#), Government Accounting Office, June 2012.
- [*Transportation-Disadvantaged Populations; Some Coordination Efforts Among Programs providing Transportation Services, but Obstacles Persist*](#). June 2003.

[*Seniors Benefit from Transportation Coordination Partnerships: A Toolbox and Resource Guide*](#), By the Administration on Aging, U.S. Department of Health and Human Services.

The [*United We Ride National Dialogue Final Report*](#), By the National Academy of Public Administration for the Federal Interagency Coordinating Council on Access and Mobility.

[Coordinated Human Services Transportation Plans](#) (examples).

Federal Transit Laws, [49 U.S.C. Chapter 53](#).

NRC Publications

- [Coordination: It's the Law](#) by NRC Director Chris Zeilinger.
- [Capitol Clips Blog: Federal News Affecting Community Transportation](#).
- [Tappy Grams](#), A monthly electronic newsletter with coordination publication alerts and "Web Help" tutorials.
- NRC [Myths and Realities](#) Series.
- NRC [Technical Assistance](http://nrctanews.blogspot.com/) <http://nrctanews.blogspot.com/> News.

["Care and Service Coordination for Long Term Services and Supports, Definitions, Principles, and Provider Practice Recommendations"](#), Care Coordination Subcommittee, Community Living Advisory Group, 2014,

["Community Living Advisory Group Report, Final Recommendations"](#), Community Living Advisory Group, September 2014,

["CDL Medical Requirements and the Role of Predictive Modeling in Safety and Health Care,"](#)

"Cost Benefit Analysis of Providing Non-Emergency Medical Transportation," *Transportation Research Board: Washington, D.C., Wallace, R., Hughes-Cromwick, P., Mull, H., Bologna, J., October 2005.*

Colorado Department of Transportation. [Statewide Transit Survey Report of Results](#), April 2014. A detailed look at overall transportation needs throughout Colorado for people who are elderly and/or who have disabilities (not just NEMT or healthcare transportation).

Transportation Planning Regions:

- [Eastern Transportation Planning Region Regional Coordinated Transit and Human Services Plan](#), March 2015.
- [Northwest Transportation Planning Region Regional Coordinated Transit and Human Services Plan](#), December 2014.
- [San Luis Valley Transportation Planning Region Regional Coordinated Transit and Human Services Plan](#), December 2014.

Healthcare Transportation

Improving Healthcare Access: Finding Solutions in a Time of Crisis Collaborative Problem-solving for State and Communities [National Policy Consensus Center](#) (NPCC), Portland State University.

[“Dialysis Transportation: Behind the Numbers.”](#)

[“Enabling Better Mobility Through Innovations for Mobile Devices,”](#) Center for Urban Transportation Research, Center for Transit Research, CTAA presentation, June 2015, ¹ Sean J. Barbeau, et.al.

[“Health & Transportation: Partners in Wellness & Affordable Healthcare.”](#)

Improving Healthcare Access: Finding Solutions in a Time of Crisis Collaborative Problem-solving for State and Communities [National Policy Consensus Center](#) (NPCC), Portland State University.

Joint Committee on Rural Emergency Care, National Association of State EMS Officials, December 2010.

[“Medicaid Expansion and Premium Assistance: The Importance of Non-emergency Medical Transportation \(NEMT\) to Coordinated Care for Chronically Ill Patients,”](#) March 2014.

[“Medicaid Non-Emergency Medical Transportation \(NEMT\) Saves Lives and Money,”](#) Community Transportation Association of America (CTAA), Spring 2014.

[“Medicaid Non-Emergency Medical Transportation \(NEMT\) Brokers,”](#) *Paratransit Watch Blog and Directory of Wheelchair Accessible and Assisted Ambulatory Transportation*, April 9, 2012.

¹[“Medicaid NEMT Saves Lives and Money,”](#) Community Transportation Association of America (CTAA), Spring 2014.

[Medicaid CTAA Medicaid Webinar Parts I and II.](#)

[“Medicaid Medical Transportation Assurance: Origins, Evolution, Current Trends, and Implications for Health Reform,”](#) School of Public Health and Health Services, George Washington University, July 2009, Policy Brief, Sara Rosenbaum, et.al.

[“Medical Transportation: Challenges of the Future,”](#) Jon E Burkhardt.

[“Medical Transportation in an Era of Change,”](#) commentary, Dale Marsico, CTAA, Spring 2014.

[“Medical Transportation: Today. Overview of Medical Transportation Today and the Important Role played by Medicaid,”](#) Presentation by Rex Knowlton, CTAA.

[“New Symbol for Outpatient and Non-Emergency Medical Transportation.”](#)

[“Voices from the Community,”](#) Insightful, timely medical transportation discussion with Ride Connection's Julie Wilcke, MJS&Company's Marsha Simon and the Michigan Public Transportation Association's Clark Harder.

Program	Access Through or Coordinate With	Service Area
AGING SERVICES		
<ul style="list-style-type: none">Older Americans Act (OAA)	<ul style="list-style-type: none">Area Agencies on Aging (AAA)	<ul style="list-style-type: none">Statewide
<ul style="list-style-type: none">Older Coloradoans Act		
MEDICAID SERVICES		
Non-Emergency Medical Transportation (NEMT)	Counties or Brokerages	Statewide
Home and Community Based Services (HCBS)	Counties	Statewide
Services for Developmentally Disabled	Community Centered Boards	Statewide
VETERANS' SERVICES		
Veterans Administration (VA)	Veterans Service Officers in each county	Statewide
Colorado Trust Fund		Statewide Grants
VOCATIONAL REHABILITATION		
Vocational Rehabilitation / Related Programs	Workforce Centers or field offices	Statewide
Independent Living Centers	Local Independent Living Centers	Varies
SELF SUFFICIENCY		
Temporary Assistance for Needy Families (TANF)	County Dept of Human / Social Services	Statewide
WORKFORCE		
Workforce Investment Act / Related Programs (WIA)	Workforce Centers	Statewide
PUBLIC TRANSIT SERVICES		
Urban and Rural Transit Programs (FTA Sections 5307 / 5311)	Urban Areas: Transit Operators Rural Areas: CDOT Transit Unit	Statewide Grants
<ul style="list-style-type: none">Capital Funding for Elderly / Disabled Services (FTA Section 5310)	<ul style="list-style-type: none">Urban Areas: Transit OperatorsRural Areas: CDOT Transit Unit	Statewide Grants
<ul style="list-style-type: none">Asset Management Services (FTA Section 5326)	<ul style="list-style-type: none">Urban Areas: Transit OperatorsRural Areas: CDOT Transit Unit	Statewide Grants
<ul style="list-style-type: none">Safety Authority (FTA Section 5329)	<ul style="list-style-type: none">Urban Areas: Transit OperatorsRural Areas: CDOT Transit Unit	Statewide Grants
<ul style="list-style-type: none">State of Good Repair (FTA Section 5337)	<ul style="list-style-type: none">Urban Areas: Transit OperatorsRural Areas: CDOT Transit Unit	Statewide Grants
<ul style="list-style-type: none">Bus and Facilities Formula Grants (FTA Section 5339)	<ul style="list-style-type: none">Urban Areas: Transit OperatorsRural Areas: CDOT Transit Unit	Statewide Grants

Agency and Program Resources

APTA	American Public Transportation Assoc.
GAO	Government Accounting Office
NCMM	National Center for Mobility Management
SWATA	Southwest Association of Transit Agencies
NRC	National Resource Center
TRB	Transportation Research Board
NCST	National Center for Senior Transportation
NCSL	National Center of State Legislatures
CCAM/UWR	Coordinating Council for Access and Mobility
SURTC/NDSU	Small Urban and Rural Transit Center
TCRP	Transit Cooperative Research Program

APPENDIX 2. FEDERAL TRANSPORTATION LEGISLATION

Transportation legislation drives policy and funding. It's important to be familiar with legislation, regulation, circulars, and other relevant federal guidance.

2015 FAST Act. The newest legislation is the “[Fixing America’s Surface Transportation Act](#).” Congress establishes the legal authority to commence and continue FTA programs through authorizing legislation covering several years. In December 2015, President Obama signed the Fixing America’s Surface Transportation (FAST) Act, reauthorizing surface transportation programs through Fiscal Year 2020. Find FTA’s take on the FAST Act [here](#).

The previous authorization, [MAP-21](#), reauthorized surface transportation programs from FY 2012 through FY 2015. Each reauthorization amends the Federal Transit Laws codified in [Title 49 USC Chapter 53](#).

2012 MAP-21, [Moving Ahead for Progress in the 21st Century](#). The next transportation legislation was called MAP-21, which President Obama signed into law in July 2012. MAP-21 strengthened requirements for performance-based results and continued funding for mobility management. Projects were still required to have resulted from a locally-developed, interagency and stakeholder planning process.

2006 SAFETEA-LU, [Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users](#). Most of the interest in coordination came about because coordination became a requirement that FTA-funded projects be in (or consistent with) a “locally-developed, coordinated public transit human service transportation planning process.” This was required under the legislation known as SAFETEA-LU¹⁷ in 2005. This legislation also opened up funding for mobility management activities under FTA Section 5310, *Elderly Individuals and Individuals with Disabilities* and two new, now discontinued, programs: FTA Section 5316, Job Access and Reverse Commute, and FTA Section 5317, New Freedom.

US Code¹⁸. Title 49—Transportation, Subtitle III General and Intermodal Programs, Chapter 53¹⁹. To understand the policies under these regulations, it’s worth taking the time to read §5301, *Policies and purposes*, and §5302, *Definitions*.

Transit providers most frequently consult these subsections to understand the funding programs available for transit programs:

- § 5304 - Statewide and nonmetropolitan transportation planning
- § 5310 - Formula grants for the enhanced mobility of seniors and individuals with disabilities
- § 5311 - Formula grants for rural areas

¹⁷ See [legislation](#). Of interest are the sections under Title III, Division B, Public Transportation. The title of this legislation is the “Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users.”

¹⁸ According to Wikipedia, the Code of Laws of the US, or USC, is “the official compilation and codification of the general and permanent **federal statutes**...The main edition is published every six years...cumulative supplements are published annually.”

¹⁹ This link is through Cornell University Law School. Check [here](#).

Chapter 53 other subjects include transit asset management, contract requirements, safety requirements, national transit database, bus and bus facilities.

Code of Federal Regulations²⁰, Title 49, Transportation²¹. Most of the transit-pertinent material is under Chapter VI—Federal Transit Administration, Department of Transportation. Some of the relevant sections in Title 49:

- Subtitle A—Office of the Secretary of Transportation, Part 37—Transportation Services for Individuals with Disabilities (ADA)
- Subtitle A—Office of the Secretary of Transportation, Part 38—Americans with Disabilities Act (ADA) Accessibility Specifications for Transportation Vehicles
- Subtitle B—Other Regulations Relating to Transportation, Chapter VI, Part 609, *Transportation for Elderly and Handicapped Persons*
- Subtitle B—Other Regulations Relating to Transportation, Chapter VI, Part 613, *Planning Assistance and Standards*, particularly
 - Subpart B—Statewide Transportation Planning and programming
 - Subpart C—Coordination of Federal and Federally Assisted programs and Projects

²⁰ According to Wikipedia, the CFR “is the codification of the general and permanent ***rules and regulations*** (sometimes called administrative law)...” The executive departments and agencies of the federal government publish these rules and regulations in the *Federal Register*.

²¹ Search under ecfr.gov or go [here](#).

APPENDIX 3. A BIG GLOSSARY OF OTHER IMPORTANT THINGS TO KNOW

ADA: Americans with Disabilities Act of 1990.

ADA Accessible Stations: Public transportation passenger facilities, which provide ready access, and do not have physical barriers that prohibit and/or restrict access by individuals with disabilities, including individuals who use wheelchairs. Refer to 49 CFR Part 37, Appendix.

ADA Accessible Vehicles with Lifts: Public transportation revenue vehicles, which do not restrict access, are usable, and provide allocated space and/or priority seating for individuals who use wheelchairs, and which are accessible using lifts. Refer to 49 CFR Part 38.

ADA Accessible Vehicles with Ramps/Low Floor: Public transportation revenue vehicles, which do not restrict access, are usable, and provide allocated space and/or priority seating for individuals who use wheelchairs, and which are accessible using ramps. Refer to 49 CFR Part 38.

Active Vehicles: The vehicles available to operate in revenue service, including spares and vehicles temporarily out of service for routine maintenance and minor repairs.

Actual Service: The total service operated during each time period. Actual service excludes: missed trips and service interruptions (e.g., strikes, emergency shutdowns). Actual service is measured by vehicles in service, in miles and hours.

Actual Vehicle Revenue Miles (VRM): The miles that vehicles travel while in revenue service. VRM includes layover/recovery time, but excludes deadhead, operator training and maintenance testing, and school bus and charter services.

Administrative Expenses: Expenses related to the planning or administering of a local public transportation project or program.

Advertising Revenues: The revenue earned from displaying advertising materials on transit agency vehicles and property. The amounts should be net of any fees paid to advertising agencies, which place the advertisement with the transit agency.

Americans with Disabilities Act (ADA): Public Law 336 of the 101st Congress, enacted July 26, 1990. The ADA prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, state and local government services, public accommodations, commercial facilities, and transportation.

Annual Operating and Administrative Expenses. The recurring costs of providing public transportation service. They include: all employees' wages and salaries; fringe benefits; operating supplies such as fuel, and oil; contractors' charges for services; taxes; repair and maintenance services, parts, and supplies; equipment leases and rentals; marketing; lease or rental costs; and insurance. Operating expenses include administrative expenses.

Operating costs exclude fixed costs such as depreciation on plant and equipment, costs of providing transportation services not available to the general public, and interest paid on loans on capital equipment.

Annual Passenger Trips: The number of passenger boardings counted each time they board vehicles no matter how many vehicles they use to travel from their origin to their destination. Trips should be counted regardless of whether an individual fare is collected for each leg of travel. It includes passenger trips on volunteer vehicles. A

passenger traveling to the hospital, then receiving a return trip home constitutes two passenger trips.

Annual Vehicle Miles: The total number of miles for the reporting period that all vehicles travel from the time they pull out to go into revenue service to the time they pull in from revenue service. This includes the miles of personal vehicles used in service.

Applicant: An organization that has submitted an application for funding, but which has not yet been awarded a grant for the funding cycle under consideration.

Brokerage: A method of providing transportation where riders are matched with appropriate transportation providers through a central trip-request and administrative facility. The transportation broker may centralize vehicle dispatch, record keeping, vehicle maintenance, and other functions under contractual arrangements with agencies, municipalities, and other organizations. Actual trips are provided by a number of different vendors.

Brokerage System: An association of transportation providers managed by broker or agent who makes transportation arrangements for a specific clientele such as the elderly and persons with disabilities. The transportation providers in a brokerage system are typically social service agencies and taxicab operators. The broker may be the transit agency directly or the transit agency may contract with an individual or firm to operate the brokerage system.

Bus: A transit mode comprised of rubber-tired passenger vehicles operating on fixed routes and schedules over roadways. Vehicle are powered by diesel, gasoline, battery, or alternative fuel engines contained within the vehicle.

Bus Miles: The miles that a bus is scheduled to or actually travels from the time it pulls out from

its garage to go into revenue service to the time it pulls in from revenue service. Does not include non-revenue hours.

Capital: Projects related to the purchase of equipment. Equipment means an article of non-expendable tangible personal property having a useful life of more than one year and an acquisition cost which equals the lesser of the capitalization level established by the government unit for financial statement purposes, or \$5,000. Capital expenses do not include operating expenses that are eligible to use capital funds.

Capital Costs: The expenses incurred within the year related to the purchase of facilities, vehicles, and equipment.

Capital Expense: The expenses related to the purchase of equipment. Equipment means an article of non-expendable tangible personal property having a useful life of more than one year and an acquisition cost which equals the lesser of the capitalization level established by the government unit for financial statement purposes, or \$5,000. Capital expenses do not include operating expenses that are eligible to use capital funds.

Census Designated Place: This refers to a densely settled concentration of population that is not legally incorporated as a political subdivision, but is identifiable by a name assigned by the decennial Census.

Charter Service: A vehicle hired for exclusive use that does not operate over a regular route, on a regular schedule and is not available to the public.

CASTA: Colorado Association of Transit Agencies. Private nonprofit membership association that represents the interests of Colorado transit operators. The association has a paid executive director and a board of directors made up of transit operators elected by the membership.

COG: A *Council of Governments* is a voluntary association of local governments that operates as a planning body, collects and disseminates information, reviews applications for funding, and provides services common to its member agencies.

Common Rule: The “Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments”; Final Rule” originally issued at 53 FR 8034–8103 (March 11, 1988).

Communication Systems: Systems for exchanging information including two-way radio systems for communications between dispatchers and vehicle operators, automatic vehicle locator systems, automated dispatching systems, vehicle guidance systems, telephones, facsimile machines, and public address systems.

Complementary Paratransit Services: Transportation service required by the ADA for individuals with disabilities who are unable to use fixed route transportation systems. This service must be comparable to the level of service provided to individuals without disabilities who use the fixed route system and meet the requirements specified in Sections 37.123-137.133 of *Transportation Services for Individuals with Disabilities* (Part 37), CFR 49, Volume 1. The complementary services must be origin-to-destination service (demand response or on-call demand response service to an accessible fixed route where such service enables the individual to use the fixed route bus system for their trip.

Commuter Rail: Long-haul rail passenger service operating between metropolitan and suburban areas, whether within or across the geographical boundaries of a state, usually characterized by reduced fares for multiple rides, and commutation tickets for regular, recurring riders. Usually involves using “heavy” passenger cars and operating on existing rail lines. The service can either

be operated by a railroad company or by a public agency which has negotiated use of the rail line.

Congestion Mitigation and Air Quality Improvement Program (CMAQ): Federal Highway Administration (FHWA) funds transferred from the Congestion Mitigation and Air Quality Improvement Program (CMAQ) to FTA for transit projects. This program is to help improve air quality and to manage traffic congestion. Transferred funds may be used for capital expansion and improvements that increase ridership, travel demand management strategies, shared ride services, and bicycle and pedestrian facilities.

Contract: A mutually binding legal relationship obligating the seller to furnish the supplies or services (including construction) and the buyer to pay for them. It includes all types of commitments that obligate the government to an expenditure of appropriated funds and that, except as otherwise authorized, are in writing. In addition to bilateral instruments, contracts include (but are not limited to): Awards and notices of awards; job orders or task orders issued under basic ordering agreements, letter contracts; orders, such as purchase orders, under which the contract becomes effective by written acceptance or performance; and, bilateral contract modifications. Contracts do not include grants and cooperative agreements covered by 31 USC 6301 *et seq.*

Contract Revenues: Reimbursement by any organization, government, agency, or company, because of a formal contractual agreement with the transit service operator, for trips provided to a specific passenger or group of passengers.

Contractor: An individual who is compensated by the transit agency for directly operated services, the labor expense for the individual is reported in object class 501 labor, or for purchased transportation service, the labor expense for the

individual meets the same criteria as object class 501 labor.

Contributed Services: The receipt of services (not cash) from another entity where such services benefit transit operations and the transit agency is under no obligation to pay for the services.

Coordinated Plan: See “Locally Developed Coordinated Public Transit-Human Services Transportation Plan.”

Coordination: A cooperative arrangement between transportation providers and organizations needing transportation services. Coordination models can range in scope from shared use of facilities, training or maintenance to integrated brokerages or consolidated transportation service providers.

Corridor: A broad geographical band that follows a general directional flow connecting major sources of trips and that may contain a number of streets, highways, transit route alignments, fixed guideways, etc.

Cost: An amount as determined on a cash, accrual, or other basis acceptable to the federal awarding or cognizant agency. It does not include transfers to a general or similar fund.

Cost per Passenger-Trip: The total operating expense (including administration and maintenance) divided by the total annual number of passengers. This is a key indicator of the service efficiency and also reflects the market demand for the service.

CTAA: The *Community Transportation Association of America* represents the interests of specialized transit operators, as well as those operating in rural and small urbanized areas.

Cutaways: A vehicle in which a bus body is mounted on the chassis of a van or light-duty truck. The original van or light-duty truck chassis

may be reinforced or extended. Cutaways typically seat 15 or more passengers, and typically may accommodate some standing passengers.

DBE: A Disadvantaged Business Enterprise is a business owned (at least 51%) and controlled by one or more socially and economically disadvantaged individuals, including women, African Americans, Native Americans, Asian-Pacific Americans, or Hispanic Americans.

Deadhead: The miles and hours that a vehicle travels when out of revenue service. Deadhead includes (1) leaving or returning to the garage or yard facility; (2) changing routes; and (3) when there is no expectation of carrying revenue passengers.

Deadhead does not include charter service, school bus service, operator training, or maintenance training.

Demand responsive: Personalized, direct transit service provided usually for elderly and disabled persons or other special needs populations, either on an immediate demand or advanced reservation basis. Demand response vehicles do not operate over a fixed route or on a fixed schedule, except perhaps on a temporary basis to satisfy a special need. Typically, a demand responsive vehicle may be dispatched to pick up several passengers at different pickup points before taking them to their respective destinations and may even be interrupted en route to these destinations to pick up other passengers. This term is often used interchangeably with “paratransit,” “dial-a-ride” or “specialized service” to refer to any non-fixed route service, but there are some nuances in the terms. For example, dial-a-ride service usually implies a fairly immediate, taxi-like response, as opposed to an advanced reservations system.

There are other differences in demand responsive service. In terms of personal level of service, one can provide curb-to-curb service (passenger must come out to the vehicle), door-to-door ser-

vice (driver goes to the passenger's door and provides assistance if needed), and door-through-door service (driver goes into home or ultimate destination to provide more assistance, especially to frail or confused individuals, when needed).

Demand Responsive Vehicles

Standard Van: A factory-built 12- or 15-passenger vehicle (including the driver) manufactured by Ford, GM, or Chrysler. Vans can be retrofitted with wheelchair lifts or ramps and extended roofs, but the buyer must ensure the retrofit meets ADA requirements. The usual life expectancy of vans ranges from about 125,000 to 150,000 miles.

Minivan: A factory-built vehicle designed to be something between a car and a van. Examples are the Dodge Caravan and Chevy Astro. They hold seven passengers, including the driver. A *wheelchair minivan* is one which has gone through an extensive after-factory conversion. The firms performing this after-factory work raise the roofs and literally drop the floor of the minivans about six inches, enabling them to use short wheelchair ramps, rather than wheelchair lifts. These vehicles usually hold two wheelchairs and one ambulatory passenger, in addition to the driver.

Van Conversion: A standard factory-built van that has been significantly altered by a specialty retrofitter after leaving the van maker's factory. These retrofitters remove the seats and the top half of the van. Among the features are an extended height roof, a specific wheelchair entry door, a front entry door with a convenient low step for ambulatory passengers, and new seating with a center aisle. The conversion van has three-across seating: two-person seats on the driver's side and one-person seats on the other. The usual configuration is eight ambulatory seats and one wheelchair tiedown.

"Body-On-Chassis" Minibus: A specially-made body placed on a Ford or Chevy "cutaway" truck (not van) chassis. The chassis is made by Ford or Chevy, but the bodies are manufactured by companies such as Champion, Collins, Diamond, El Dorado, and Supreme. These vehicles are wider and taller than standard vans. Like van conversions, they have walk-in, front entry doors and a center aisle, but they are wider and higher than van conversions, with interiors tall enough to allow a person to stand and four across seating. Minibuses are made with various wheelbases, designed to accommodate 16, 20, 24 or 28 ambulatory passengers (excluding the driver). When equipped to handle 24 or more passengers, an extra rear axle, referred to as a "*tag axle*," is usually added by the manufacturer.

When minibuses are equipped to handle wheelchairs, four seats are removed for the wheelchair lift assembly and four seats for each wheelchair tiedown. Therefore, a minibus designed to handle 20 ambulatory passengers would convert to a vehicle holding 12 ambulatory passengers and one wheelchair tiedown.

Depreciation: The charges that reflect the loss in service value of the agency's assets. Depreciated items have a high initial cost and a useful life of more than one accounting period. To account for the reduction in value (usefulness) of this type of asset, a portion of the cost is expensed each year of the asset's life. Depreciation and amortization include the depreciation of the physical facilities such as: tracks and roadbeds; elevated structures; passenger stations and parking facilities; revenue vehicles, operating stations; facilities (including buildings, equipment, and furnishings) for power generation and distribution; revenue vehicle movement control; data processing; revenue collection and processing, and so forth. *FTA funds will not pay for depreciation charges.*

Designated recipient: A public body designated to have the legal authority to receive and disburse federal funds.

Deviated Fixed Route Service: Transit service that operates along a fixed alignment or path at generally fixed times, but may deviate from the route alignment to collect or drop off passengers who have requested it.

Direct Cost: An object class (e.g., labor, services, materials, and supplies) that is incurred exclusively for a particular function, mode, and type of service. For example, an operator whose time is spent solely in driving a bus or a mechanic who works only on directly operated buses.

Drug and Alcohol Testing Regulations: Drug and Alcohol tests are required for all safety-sensitive employees of agencies receiving Section 5307, 5309 or 5311 funding including drivers, maintenance workers, dispatchers and supervisors.

EIS/EA: Environmental Impact Statement are reports required by the National Environmental Policy Act to determine the significant impacts a proposed project will have upon the environment. An Environmental Assessment is a study used to determine whether an EIS is required for a particular project. EAs and EISs are only required for projects that utilize federal funding.

E&D: Elderly and Disabled. Elderly persons (usually defined as any person 60 years of age and older) and persons with disabilities (usually defined as persons who have a disability which limits their transportation alternatives). These categories are not mutually exclusive: some elderly persons, perhaps as high as 60%, are also considered disabled; to avoid overlaps in reporting, some systems distinguish between elderly and non-elderly persons with disabilities.

Elderly Individuals: Persons 60 years of age or older.

Eligible Low-Income Individual: Refers to an individual whose family income is at or below 150 percent of the poverty line (as that term is defined in section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2)), including any revision required by that section) for a family of the size involved (see [here](#), search for Title 42, Section 9902).

Employee(s): An individual who is compensated by the transit agency as follows:

- For directly operated services, the labor expense for the individual is reported in object class (501) labor.
- For purchased transportation service, the labor expense for the individual meets the same criteria as object class (501) labor.
- Applies to transit employees and contractors.

Employee Work Hours: Employee labor hours, not including fringe benefit hours such as sick leave, holidays, and vacations. Work hours include only labor hours for employees of the transit agency, both full time and part time, permanent and temporary.

Fare Revenue Collection Equipment: Any equipment used in collecting passenger fares including turnstiles, fare boxes (drop), automated fare boxes and related software, money changers and fare dispensing machines (tickets, tokens, passes).

Fare Revenues: All income received directly from passengers, either paid in cash or through pre-paid tickets, passes, etc. It includes donations from those passengers who donate money for the ride.

Federal Interest: The amount of fiduciary involvement in capital equipment purchased with federal funds that is retained by the federal government, through the Department, to ensure that capital equipment is used for its intended

purpose for a reasonable and appropriate period of time.

Federal Transit Administration (FTA): The agency under the U.S. Department of Transportation that provides financial assistance to develop new transit systems and improve, maintain, and operate existing systems.

FHWA: Federal Highway Administration. A component of the U.S. Department of Transportation. Provides funding to state and local governments for highway construction and improvements, including funds to be used for transit.

Fixed Guideway: Any public transportation facility utilizing and occupying a separate right-of-way or rails for the exclusive use of public transportation service including, but not limited to, fixed rail, automated guideway transit, and exclusive facilities for buses and other high occupancy vehicles.

Fixed Route: A transit service provided on a repetitive, fixed-schedule basis along a specific route with vehicles stopping to pick up and deliver passengers to specific locations. Each fixed-route trip serves the same origins and destinations, unlike demand response. A *deviated fixed route* is a fixed route service which may deviate from its regular route to pick up riders then return to its regular route without significantly detracting from its schedule.

FTA: Federal Transit Administration is a federal agency of the U.S. Dept. of Transportation that provides funding for various transit services.

Fixed Route Services: Services provided on a repetitive, fixed schedule basis along a specific route with vehicles stopping to pick up and deliver passengers to specific locations; each fixed route trip serves the same origins and destinations, such as rail and bus; unlike demand responsive and vanpool services.

Fixed Route Vehicles

Transit Bus (or Transit Coach): A bus with front and center doors, normally with a rear-mounted engine, low-back seating, and without luggage compartments or restroom facilities for use in frequent-stop service. This is found most typically on fixed route systems. A 40-foot coach is the common type bus used in larger systems. This vehicle can usually hold about 42 ambulatory passengers when two wheelchair tiedowns are provided. A 35-foot coach will hold about 35 ambulatory passengers. The average service life of transit coach chassis is about 12 years. It is common for the engine and other equipment to be rebuilt a number of times.

Articulated Bus: Extra-long (54 to 60 feet) bus with the rear body section connected to the main body by a joint mechanism. The accordion-like joint mechanism allows the vehicle to bend when in operation for sharp turns and curves and yet have a continuous interior.

Double Decked Bus: High-capacity bus with two seating levels, one over the other, connected by one or more stairways. Total bus height is usually 13 to 14.5 feet, and typical seating capacity ranges from 40 to 80 people.

Intercity Bus: (Also referred to as an over-the-road coach.) A bus with front door only, separate luggage compartments, and usually with restroom facilities and high-backed seats for use in high-speed long-distance service. Usually 40-foot or longer, with only forward-facing, reclining seats. Most noted for being the vehicles of choice for the intercity bus industry. They usually hold about 40 passengers. These buses usually are not wheelchair accessible; this, according to the private sector, is largely due to the cost of retrofitting, the loss of seats and luggage space, and the space required for restroom facilities. However, while the ADA granted an exemption

to the private sector, this exemption is now expiring.

Suburban Bus: A bus with front doors only, normally with high-backed seats, and without luggage compartments or restroom facilities for use in longer-distance service with relatively few stops. They are usually 35 to 42 feet in length.

Trolley Replica Bus: A bus with an exterior (and usually an interior) designed to look like a streetcar from the early 1900s. They usually hold 20 to 40. The cost varies greatly, depending on quality of construction materials (pine vs. walnut), type of suspension (spring vs. air), etc.

Commuter Rail Locomotive: Commuter rail vehicle used to pull or push commuter rail passenger cars. Locomotives do not carry passengers themselves.

Heavy Rail Car: Rail car with motive capability, driven by electric power taken from overhead lines or third rails, configured for passenger traffic and usually operated on exclusive right-of-way.

Light Rail Vehicle: Rail car with motive capability, usually driven by electric power taken from overhead lines, configured for passenger traffic and usually operating on non-exclusive right-of-way. Also known as “streetcar”, “tramway,” or “trolley car.”

Full Time Employees: Employees of the transit agency meeting the local definition of full time hours. Normally, these persons are entitled to receive the full benefits package (e.g., sick leave, vacation, and insurance benefits).

According to the Colorado Department of Labor and Employment, *Unemployment Insurance Handbook for Claimants*, page 11, employees full-time if they work 32 or more hours a week. (See also “Advisory Bulletins and Resource

Guide,” Colorado Division of Labor, January, 2009.)

Function: An activity performed or cost center of a transit agency. There are four basic functions for reporting: vehicle operations, vehicle maintenance, non-vehicle maintenance, and general administrative. The activities included under each basic function are detailed in Section 6.2 of the Uniform System of Accounts.

General Administration: Activities associated with the general administration of the transit agency, including transit service development, injuries and damages, safety, personnel administration, legal services, insurance, data processing, finance and accounting, purchasing and stores, engineering, real estate management, office management and services, customer services, promotion, market research, and planning.

Headway: The time interval between the passing of successive transit buses or trains moving along the same route in the same direction, usually expressed in minutes; for example, “the northbound Route 40 bus comes by every ten minutes during peak hours, but the headway is thirty minutes in off-peak hours.” It may also be referred to as service frequency.

Heavy rail: High-speed, passenger rail cars operating singly or in trains of two or more cars on fixed rails in separate rights-of-way from which all other vehicular and foot traffic are excluded. Also known as rapid rail, subway, or elevated (railway).

HOV facility: High-Occupancy Vehicle (HOV) Facility: An exclusive or controlled access right-of-way which is restricted to high occupancy vehicles at all times or for a set period of time. The designation of an HOV facility is determined by state and/or local officials. Also called “busway,” “transitway,” or “commuter lane.”

Human services transportation: Transportation services provided by or on behalf of a human service agency (e.g., Medicaid, Title III) to provide access to agency services and/or to meet the basic, day-to-day mobility needs of transportation-disadvantaged populations, especially individuals with disabilities, older adults, and people with low incomes.

Hybrid Vehicle: A vehicle that combines two or more sources of power that can directly or indirectly provide propulsion power, so as to increase efficiency and thereby reduce emissions. A hybrid vehicle uses a mixture of technologies such as internal combustion engines, electric motors, gasoline, and batteries.

Incidental transit provider: An organization that provides transportation only to its own clients and basically as a service incidental to its primary service(s).

Indirect Cost: A cost that is not directly related to the production of a specific good or service but that is indirectly related to a variety of goods or services. For example, the cost of administering a large company is an indirect cost that must be spread over a number of products or services. Market research is another indirect cost because, while it may assist in making decisions about production, it does not affect the production of any one unit. Another common indirect cost is the purchase of office supplies. Indirect costs are necessary to running a business.

Individual with a Disability: An individual who, because of illness, injury, age, congenital malfunction, or other incapacity or temporary or permanent disability (including an individual who is a wheelchair user or has semi-ambulatory capability), cannot use effectively, without special facilities, planning, or design, public transportation service or a public transportation facility (49 U.S.C. 5302(a)(5), *Definitions*).

In-Kind Contributions: In-kind contributions are goods and services donated from outside your agency. The value of noncash charges for real property and equipment, and the value of goods and services must directly benefit and be specifically identifiable to the project. To be eligible as match, the monetary value of the in-kind contributions must be documented.

In-Kind Match Report: A written proposal that identifies the sources of in-kind match and method for determining their value. Documentation for goods and services should include donation receipts stating the donor, the item donated, and its fair market value. Volunteer time should include time cards and be charged at either the prevailing wage or the wage rate paid to an employee performing similar duties.

In-Kind Services: A type of contributed service reported only if there is no obligation to pay for the service.

Incidental Service: The provision of transit rides when existing public transportation services cannot meet demand. This is often done through a Guaranteed Ride Home program or policy. There are three common cases:

1. Transit agency works with employers to ensure employees who took transit to work and who must leave work for a personal emergency (illness, family crisis) or have unscheduled overtime, have a ride home
2. Transit vehicle breakdowns or other service interruptions
3. Demand response mode when reserved passenger trips cannot be met.

Information Systems: Systems for processing data including computers, monitors, printers, scanners, data storage devices, and associated software that support transit operations such as general office, accounting, scheduling, planning,

vehicle maintenance, non-vehicle maintenance, and customer service functions.

Insurance Premiums:

Administration: Insurance premiums related to the administrative portion of your operation. Generally, general liability, office space, and office equipment related insurance premiums, as long as they are related to the transit program's operation, are eligible for FTA participation.

Operating: Vehicle and bus maintenance/ storage facility insurance premiums. Both are eligible for FTA participation.

Intercity bus (ICB) service: Regularly scheduled bus service for the general public, using an over-the-road bus, that operates with limited stops over fixed routes connecting two or more urban areas not in close proximity or connecting one or more rural communities with an urban area not in close proximity, has the capacity for transporting baggage carried by passengers, and makes meaningful connections with scheduled intercity bus service to more distant points.

Intermodal: Those issues or activities which involve or affect more than one mode of transportation, including transportation connections, choices, cooperation and coordination of various modes. Also known as "multimodal."

ITS: Intelligent Transportation Systems use computer and communications technology to provide information to travelers about road and transit conditions and to monitor, guide or control the operation of vehicles. ITS includes concepts such as urban signal control systems, real time traffic reports and highway signage, and automated highways.

Labor: The pay and allowances due employees in exchange for the labor services they render in behalf of the transit agency. The labor allowanc-

es include payments direct to the employee arising from the performance of a piece of work.

Local Capital Funds: Financial assistance from local entities to assist in paying capital. They include:

- ♦ Tax levies—a specific amount from local tax levies that is dedicated to supporting the capital costs of the public transit system
- ♦ General funds — Transfers from the general fund of local governments to cover the Local Share portion of transit system capital costs.
- ♦ Specified contributions — Contributions from the local government towards the Local Share portion of transit system capital costs.
- ♦ Reserve funds — Transfers from a capital reserve fund of local governments expressly established to be used to cover the Local Share portion of transit system capital costs.
- ♦ Donations — Donations from individuals or organizations to help cover the transit system capital costs.
- ♦ Local Governmental Authority: This term includes:
 - ♦ A political subdivision of the State of Colorado;
 - ♦ An authority of at least one state or political subdivision of Colorado;
 - ♦ An Indian tribe; and
 - ♦ A public corporation, board, or commission established under the laws of a state.

Light rail (TRB): Metropolitan electric railway system characterized by its ability to operate single cars or short trains along exclusive rights-of-way at ground level, on aerial structures, in subways or, occasionally, in streets, and to board and discharge passengers at track or car-floor level.

Light rail vehicles derive power from a catenary system via a trolley or a pantograph. Also known as “streetcar,” “tramway,” or “trolley car.”

Local Government: A county, municipality, city, town, township, local public authority, school district, special district, intrastate district, council of governments (whether or not incorporated as a non-profit corporation under state law), any other regional or interstate government entity, or any agency or instrumentality of a local government.

Local Government Funds: Financial assistance from local governments (below the state level) to help cover the costs of providing transit services.

Local Operating Funds: Financial assistance from local entities that support the operation of the transit system. They include, but are not limited to:

- ♦ Tax levies — A specified amount from local levies that is dedicated to supporting public transit system operating costs.
- ♦ General funds — Transfers from the general fund of local governments to cover the Local Share portion of the transit system budget.
- ♦ Specified contributions — Contributions from city, county or other municipal government towards the Local Share portion of the transit system budget.
- ♦ Donations — Donations from individuals or organizations to help cover the costs of providing transit service but which are not related to specific passengers or trips.
- ♦ Other — Other revenues such as advertising.

Locally Developed Coordinated Public Transit-Human Services Transportation Plan: A plan that identifies the transportation needs of individuals with disabilities, older adults, and people

with low incomes, provides strategies for meeting those local needs, and prioritizes transportation services for funding and implementation.

MAP-21: Transportation legislation passed in July 2012 for two years. Congress establishes the legal authority to commence and continue Department of Transportation programs through this authorizing legislation. Each reauthorization amends the Federal Transit Laws codified in 49 USC Chapter 53.

Mass Transit: Transportation by bus, or rail, or other conveyance, either publicly or privately owned, providing to the public general or special service (but not including school buses or charter or sightseeing service) on a regular and continuing basis. Also known as “mass transportation,” “public transportation,” and “transit.”

MPO: Metropolitan Planning Organization. Agency designated by law with the lead responsibility for developing transportation plans and programs within an urbanized area. MPOs are established by agreement of the Governor and units of general purpose local government which together represent 75 percent of the affected population.

Materials and Supplies: The tangible products obtained from outside suppliers or manufactured internally. Expenses include freight-in, purchase discounts, sales taxes and excise taxes (except on fuel and lubricants) are to be included in the cost of the material or supply.

Charges to these expense accounts will be for the materials and supplies issued from inventory for use and for the materials and supplies purchased for immediate use; i.e., without going through inventory.

Minivans: A light duty vehicle having a typical seating capacity of up to seven passengers plus a driver. A minivan is smaller, lower, and more streamlined than a full-sized van, but it is typically taller and has a higher floor than a passenger

car. Minivans normally cannot accommodate standing passengers.

Miscellaneous Expenses: The expenses that cannot be attributed to any of the other major expense categories (labor, fringe benefits, services, materials and supplies, utilities, casualty and liability costs, taxes, and purchased transportation.

Mobility Management: Eligible capital expenses consisting of short-range planning and management activities and projects for improving coordination among public transportation and other transportation service providers carried out by a recipient or subrecipient through an agreement entered into with a person, including a government entity, under Chapter 53 (other than Section 5309). Mobility management does not include operating public transportation services.

Mode: A system for carrying transit passengers described by specific right-of-way (ROW), technology, and operational features.

Mode (Rural): Description of mode of service operated with subcategories for bus and demand response modes. Bus mode can be conventional bus fixed route service, bus deviated fixed route service, or intercity bus service. Demand response can be the usual service (no standing reservations) or subscription demand response where there are on-going reservations for scheduling consistent passenger trips. These subscriptions services are for categorical programs, such as Medicaid, meals-on-Wheels, sheltered workshops, independent living centers, and any social service agency programs. Subrecipients of Section 5311 funds may report these programs to the extent that services are provided in coordination with public transit trips; i.e., they are included in a coordinated public transit-human services transportation system.

Non-Profit Organization: A corporation or association determined by the Secretary of the Treasury to be an organization described by 26

U.S.C. 501(c), *List of Exempt Organizations*, which is exempt from taxation under 26 U.S.C. 501(a), *Exemption From Taxation*, or one which has been determined under state law to be non-profit and for which the designated state agency has received documentation certifying the status of the non-profit organization. See also private nonprofit organization.

Non-Transportation Funds: The revenue earned from activities not associated with the provision of transit service. Non-transportation funds include: investment earnings; other non-transportation sources, including: revenues earned from sales of maintenance services on property not owned or used by the transit agency, rentals of revenue vehicles to other operators, rentals of transit agency buildings and property to other organizations, parking fees generated from parking lots not normally used as park-and-ride locations, donations, grants from private foundations, development fees, rental car fees, other.

Non-Urbanized Area (Non-UZA): An area (a population of fewer than 50,000) designated by the U.S. Bureau of the Census, also referred to as a rural area.

NTD: National Transit Database. Those receiving funding from the Urbanized Area Formula Program (5307) or Rural Formula Program (5311) – are required to submit data to the NTD in uniform categories. More than 660 transit providers report to the NTD through the Internet-based system.

[NTD has the biggest and best glossary](#) ever.

Number of Active Vehicles in Fleet: The total number of operational revenue vehicles in the fleet available for general public transit service, including spare or back-up revenue vehicles. The total should also include any operational revenue vehicles used by contractors in general pub-

lic transit service. Non-revenue service vehicles and personal vehicles should not be included.

One-Way Passenger Trips: A trip made by one person from one origin to one destination. A “round-trip” is considered two trips.

Operating Assistance: Financial funding to help cover the operating costs of providing transit services. Operating costs are classified by function or activity and the goods and services purchased. The basic functions and object classes are detailed in the Operating Expenses form (F-30) and are defined in Section 5.2, Descriptions of Expense Object Classes, and 6.2, Description of Expense Functions, of the Uniform System of Accounts (USOA) See [here](#).

Operating Expenses: The expenses associated with the operation of the transit agency, and classified by function or activity, and the goods and services purchased. The basic functions and object classes are defined in Section 5.2 and 6.2 of the Uniform Systems of Accounts (USOA). These are consumable items with a useful life of less than one year or an acquisition cost which equals the lesser of:

- The capitalization level established by the government unit for financial statement purposes, or
- \$5,000.

Operating deficit: The difference between operating expenses and operating revenues.

Operating costs: The sum of all recurring expenses (e.g. labor, fuel, parts) that can be associated with the operation and maintenance of the transit system; excludes capital equipment purchases, loans, depreciation or leases.

Operating revenues: All funds generated from the operation of a transit system, including passenger fares, donations, income from bus ads, etc.

Over-the-Road Bus or Coach: A bus characterized by an elevated passenger deck located over a baggage compartment.

Paratransit: Forms of transportation that are more flexible and personalized than conventional fixed route/fixed schedule mass transportation service, but not including such exclusionary services as charter or sightseeing trips.

Or...Types of passenger transportation which are more flexible than conventional fixed-route transit but more structured than the use of private automobiles. Paratransit includes demand response transportation services, shared-ride taxis, car pooling and vanpooling, and jitney services. Most often refers to wheelchair-accessible, demand response service.

Part-Time Employees: Employees of the transit agency who work less than the local definition of full time. Normally, these persons are not provided the full benefits package (e.g., sick leave, vacation and insurance benefits) associated with full time employment. Full time employees working part of their time in a function or mode are not part time employees.

Park and Ride Facility: A parking garage and/or pavement used for parking passengers’ automobiles, either free or for a fee, while they use transit agency facilities. Park-and-ride facilities are generally established as collector sites for rail or bus service. Park-and-ride facilities may also serve as collector sites for vanpools and car-pools, and as transit centers.

Passenger Fares: The revenue earned from carrying passengers in regularly scheduled and demand response (DR) services. Passenger fares include base fare, zone or distance premiums, express service premiums, extra cost transfers, quantity purchase discounts applicable to the passenger’s ride and special transit fares.

Passenger-Trips per Capita: The total number of boardings divided by the service area population. This reflects the average number of transit boardings per person. The number is larger in areas that emphasize public transportation and in areas where there is a greater transit dependent population.

Resort areas in Colorado have a very high number because of the large visitor population base. Use of this measure requires a common definition of the population base: the US census. The population number should be the same as that used by CDOT in calculating grants.

Passenger-Trips per Service Hour: The ratio of passenger trips to revenue hours of service. This is a better indicator of effectiveness of the service than passengers per revenue mile because the number of hours is a better indicator of the resource consumed than is the number of miles.

People mover: An automated transportation system (e.g. Continuous belt system or automated transit) that provides short-haul transit service, usually in a major activity center.

Performance Measures: FTA is required to establish performance goals to define the level of performance and to establish performance indicator to be used in measuring relevant outputs, service levels, and outcomes for each of its programs as mandated by the Government Performance Results Act.

Persons (or Individuals) with Disabilities: This refers to persons who have a physical or mental impairment that substantially limits one or more of the major activities of daily living, a record of such impairment, or who is regarded as having such impairment. For transportation purposes, a individual with a disability is one who is unable to board, disembark, or navigate the transportation system without assistance.

Private-For-Profit Provider: A nonpublic entity that provides public transportation services. For-profit entities exist primarily to generate a profit, (i.e., a surplus of revenues over expenditures).

Private Nonprofit Provider: A nonpublic entity with a tax-free status that provides transit services. Nonprofit entities exist to provide a particular service (e.g., public transportation) to the community. Nonprofit refers to a type of business—one that is organized under rules that forbid the distribution of profits to owners. Profit refers to a surplus of revenues over expenditures.

Project/Project Request: Public transportation services or public transportation alternatives proposed in an application.

Public Transportation: As defined in the Federal Transit Act, “transportation by a conveyance that provides regular and continuing general or special transportation to the public, but does not include school bus, charter, or intercity bus transportation or intercity passenger rail transportation provided by the entity described in chapter 243 (or a successor to such entity).”

Purchased Transportation: Transportation service provided to a public transit agency or governmental unit from a public or private transportation provider based on a written contract. The provider is obligated in advance to operate public transportation services for a public transit agency or governmental unit for a specific monetary consideration, using its own employees to operate revenue vehicles. Purchased transportation does not include franchising, licensing operations, management services, cooperative agreements, or private conventional bus service.

Regional Transportation Plan (RTP): This is a technically-based, 20-year plan designed to meet the future mobility needs for a Transportation Planning Region (TPR), including anticipated

funding, priorities, and implementation plans under CRS 43-1-1103, Transportation Planning.

Revenue Service (Miles, Hours, and Trips): The time when a vehicle is available to the general public and there is an expectation of carrying passengers. These passengers either:

- Directly pay fares
- Are subsidized by public policy, or
- Provide payment through some contractual arrangement.

Vehicles operated in fare free service are considered in revenue service. Revenue service includes:

- Layover/recovery time

Revenue service excludes:

- Deadhead
- Vehicle maintenance testing
- School bus service, and
- Charter service.

Reverse Commute: Movement in a direction opposite the main flow of traffic, such as from the central city to a suburb during the morning peak period.

Reverse Commute Project: A public transportation project designed to transport residents of urbanized areas and other than urbanized areas to suburban employment opportunities.

Ridesharing: A form of transportation, other than a transit service, in which more than one person shares the use of the vehicle, such as a van or car, to make a trip. Also known as “car-pooling” or vanpooling.”

Rolling Stock: Transit vehicles such as buses, vans, cars, and trolley buses as well as vehicles used for support services.

Route Deviation: A type of transit service that operates as conventional fixed route bus service along a fixed alignment or path with scheduled time points at each terminal point and key intermediate locations. Route deviation service is different than conventional fixed route bus service in that the bus may deviate from the route alignment to serve destinations within a prescribed distance (e.g., $\frac{3}{4}$ mile) of the route. Following an off route deviation, the bus must return to the point on the route it left.

Rural: Population under 50,000, and neither “small urbanized” nor “large urbanized.”

Rural Transit Assistance Program (RTAP): This program is a sub-component of Section 5311. It provides funding for training and technical assistance for transit operators in rural areas.

SAFETEA-LU: The Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users, signed on August 10, 2005, authorizes the federal surface transportation programs for highways, highway safety, and transit for the five-year period 2005–2009.

Seating Capacity: The number of seats that are actually installed in the vehicle.

Service Area: A measure of access to transit service in terms of population served and area coverage (square miles). The reporting transit agency determines the service area boundaries and population for most transit services using the definitions contained in the Americans with Disabilities Act of 1990 (ADA). Transit agency reporters are required to submit service area information on the Identification form (B-10).

Service Area — Demand Response: As Demand Response does not operate over a fixed route, but rather serves a broad area, the service area cannot be measured by corridors (see Service Area — Bus (MB)). Therefore, the service area for demand response is the area encompassing

the origin to destination points wherever people can be picked up and dropped off.

Service Area Population: The total nonurbanized population in the geographic areas where the project is actually provided and is limited to incorporated areas, Census Designated Places, and unincorporated areas of population concentration as agreed upon by both the applicant and CDOT.

Service Vehicles: The vehicles used to support revenue vehicle operations and that are not used to carry transit passengers. Types of service vehicles include tow trucks, supervisor vans, transit police cars, staff cars.

Social Service Agency: A public or private non-profit organization providing specialized programs and transportation service to a specific clientele such as the elderly and persons with disabilities.

State Administration: Expenses incurred by the State to administer the FTA grants.

State Management Plan: The document developed by the Department and submitted to FTA on a periodic basis that details the Department's policies and procedures for administering FTA grant programs.

Statewide Transportation Plan (STP): The 20-year comprehensive, intermodal state transportation plan adopted by the Transportation Commission under the provisions of C.R.S. 43-1-1103(5), Transportation Planning, (1991), as further described in C.R.S. 43-1-1102(8), Definitions.

Subcontractor: Refers to any organization that subcontracts with a grantee to perform project activities under a grant.

Subrecipient: Refers to a state or local governmental authority, non-profit organization, or operator of public transportation services that re-

ceives an FTA grant indirectly through a recipient, such as CDOT. Subrecipients may be referred to as "grant partners" or "grantees."

Subscription Service: Shared use transit service operating in response to on-going reservations made by passengers to the transit operator, who can schedule in advance a consistent trip to pick up the passenger and transport them to their destination.

Surface Transportation Program (STP): Federal Highway Administration (FHWA) funds transferred from the Surface Transportation Program (STS) to FTA for transit projects. These funds may be used for capital projects including, ridesharing projects, bicycle and pedestrian facilities, transit safety improvements and transportation control measures; and, for planning activities including transit research and development, environmental analysis and wetland mitigation.

Temporary Employees: Employees of the transit agency working full time or part time hours, but only for a limited period of time for the completion of a set task. These persons are usually not entitled to receive any benefits and do not have any job security rights. Persons employed through a temporary employment agency are not temporary employees of the transit agency.

TNC: A transportation network company connects paying passengers with drivers who provide the transportation on their own non-commercial vehicles. All parties connect to the service via website and mobile apps. TNCs include Lyft, Cabify, Uber, and others. (Wikipedia 2016).

TPR: Transportation Planning Regions are planning areas that were established by the same legislation that also created Colorado's DOT as a means of developing local transportation priorities and plans, then also used to develop a statewide transportation plan.

Transit Grants Unit: The work unit that oversees Federal Transit Administration grant funds in Colorado. The Unit is within the Division of Transit and Rail at the Colorado Department of Transportation.

Transportation Improvement Program (TIP): A staged, multi-year program of transportation improvements, including annual or biennial elements.

Transportation Planning Region (TPR): A geographically contiguous area of the state as defined by Section IV-A of the Rules and Regulations for the Statewide Transportation Planning Process and Transportation Planning Regions, and meeting some or all of the criteria for transportation commonality, and in which a regional transportation plan required to be developed under the provisions of CRS 43-1-1102, Definitions, and 1103, Transportation Planning.

Travel Training: Travel training is short-term, comprehensive, intensive instruction designed to teach students with disabilities how to travel safely and independently on public transportation. The goal is to train students to travel independently to a regularly visited destination and back. Specially trained personnel provide the travel training on a one-to-one basis.

Trip: A one-way movement of a person or vehicle between two points. Transit statistics are based on unlinked passenger trips, which refer to individual one-way trips made by individual riders in individual vehicles. A person who leaves home on one vehicle, transfers to a second vehicle to arrive at a destination, leaves the destination on a third vehicle and has to transfer to yet another vehicle to complete the journey home has made four unlinked passenger trips.

Uniform Financial Accounting and Reporting Elements (FARE): Transit industry initiative for a uniform reporting system for transit agencies.

Uniform System of Accounts (USOA): A structure of categories and definitions used for NTD reporting to ensure uniform data. The USOA contains:

- ♦ Various categories of accounts and records for classifying financial (Chart of Accounts) and operating data
- ♦ Definitions of the data elements included in each category
- ♦ Definitions of practices for the orderly and regular collection and recording of the data.

Urban area: A community with a population of 5,000 or more population and NOT within an urbanized area.

Urbanized Areas, Large: Large urbanized areas have populations of 200,000 or more. There are three in Colorado: Colorado Springs, Denver-Aurora, and Ft. Collins-Loveland-Berthoud.

Urbanized Areas, Small: Areas with populations between 50,000 and 200,000. There are six small urbanized areas in Colorado: Boulder, Grand Junction, Greeley, Longmont, Louisville-Lafayette, and Pueblo.

UZA: An *Urbanized Area* is a contiguous metropolitan area with a population of 50,000 or more and meeting certain density requirements of the Census Bureau. (NOTE: This is distinctively different from an URBAN area, which includes any area with a population of over 5,000.) In Colorado, the urbanized areas include the Boulder, Colorado Springs, Denver, Fort Collins, Greeley, Lafayette, Louisville, Loveland, Longmont, Pueblo and Grand Junction metropolitan areas. The urbanized boundary does not necessarily follow political boundaries. For FTA purposes, a SMALL UZA is one between 50,000 and 200,000 population while a LARGE UZA has over 200,000 people. Conversely, a non urbanized area is one with a population under 50,000.

Utilities: The payments made to various utilities for utilization of their resources (e.g., electric, gas, water, telephone, etc.). Utilities include propulsion power purchased from an outside utility company and used for propelling electrically driven vehicles, and other utilities such as electrical power for purposes other than for electrically driven vehicles, water and sewer, gas, garbage collection and telephone.

Vanpool Service: Transit service operating as a ride sharing arrangement, providing transportation to a group of individuals traveling directly between their homes and a regular destination within the same geographical area. The vehicles shall have a minimum seating capacity of seven persons, including the driver. Vanpool(s) must also be open to the public and that availability must be made known. Does not include ridesharing coordination.

Vans, Vehicle Type: Vehicles with a typical seating capacity of 5–15 passengers and classified as a van by vehicle manufacturers. A modified van is a standard van that has undergone some structural changes, usually made to increase its size and particularly its height. The seating capacity of modified vans is approximately 9–18 passengers.

Vehicle Hours (Miles): The hours (miles) that a vehicle is scheduled to or actually travels from the time it pulls out from its garage to go into revenue service to the time it pulls in from revenue service. Does not include non-revenue hours.

Vehicle Rehabilitation: Refers to a major mechanical overhaul, which would include all or many of the following replacement components: new engine, transmission, drive shaft, axle, differential, brakes, wheel bearings, fuel system, suspension system, steering system, electrical system, coolant system, exhaust system, and

heating/air conditioning of a vehicle, which may include cosmetic body or interior work.

Vehicle Revenue Hours: The hours that vehicles are scheduled to or actually travel while in revenue service. Vehicle revenue hours include layover / recovery time; but excludes deadhead, operator training, and vehicle maintenance testing, as well as school bus and charter services.

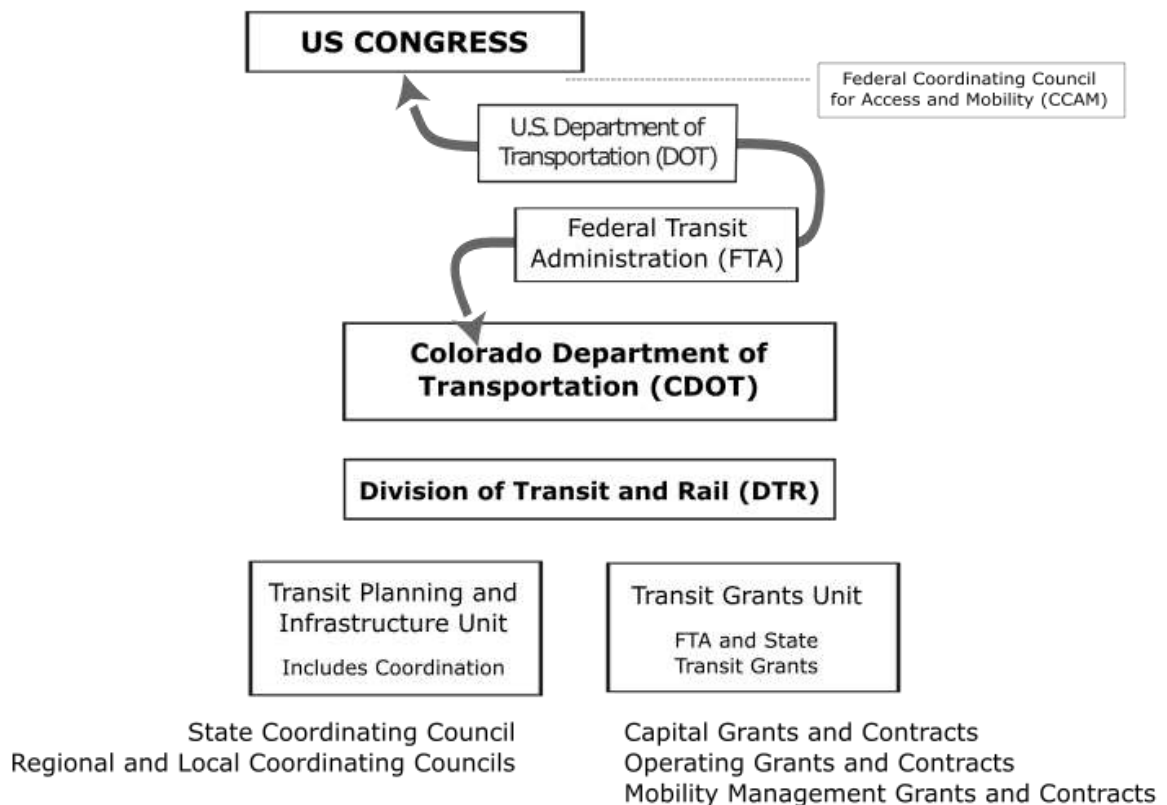
Vehicle Revenue Miles: The miles that vehicles are scheduled to or actually travel while in revenue service. Vehicle revenue miles include layover/recovery time, but excludes deadhead, operator training, and vehicle maintenance testing, as well as school bus and charter services.

Welfare Recipient: An individual who has received assistance under a state or tribal program funded under part A of Title IV of the Social Security Act at any time during the three-year period before the date on which the applicant applies for a grant under the FTA Job Access and Reverse Commute (JARC) grant program.

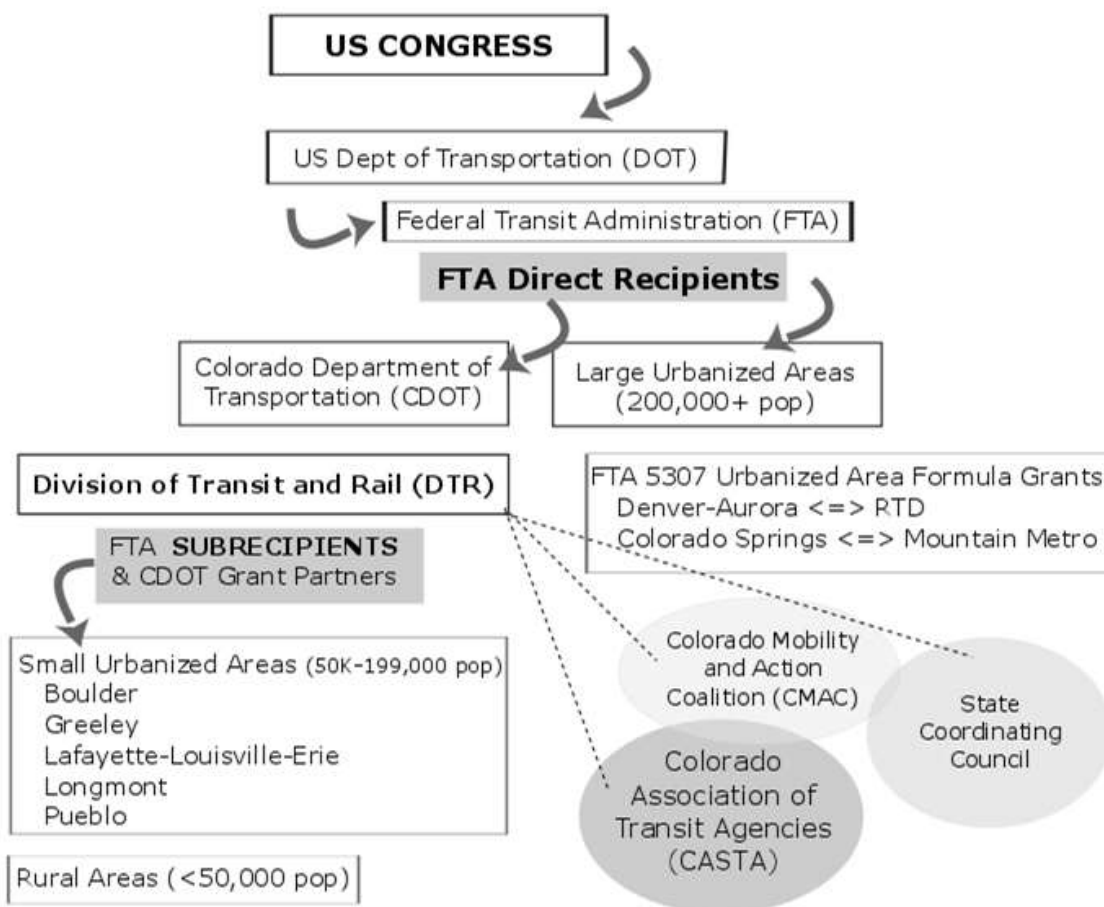
APPENDIX 4. INTERAGENCY RELATIONSHIPS

Understanding the big picture of transit relationships can be tough. Here are a couple attempt to illustrate key relationships.

CDOT Relationships, selected



CDOT Relationships, selected #2



APPENDIX 4.

ACRONYMS, TERMINOLOGY, AND GLOSSARIES FOR TRANSIT, TRANSPORTATION, AND HUMAN SERVICES

Presented for you, the biggest assortment of terminology references ever to be compiled.

Agencies, Associations, Committees, and Projects—Transportation

AASHTO...American Assn. of State Highway and Transportation Officials	MPO.....Metropolitan Planning Organizations
APTA.....American Public Transportation Association	HTFHighway Trust Fund (Federal)
ABA.....American Bus Association	LCC.....Local Coordinating Council
ACTAssociation for Commuter Transportation	LRT.....Light Rail Transit
CASTA.....Colorado Association of Transit Agencies	MAP-21...Moving Ahead for Progress in the 21 st Century (expired legislation)
CCAMCoordinating Council for Access and Mobility (federal program)	MSAA.....Mobility Services for All Americans
CDOTColorado Department of Transportation	RCCRegional Coordinating Council
CMAQ.....Congestion Mitigation and Air Quality	RPCRegional Planning Commission
CTAA.....Community Transportation Association of America	RTARegional Transportation Authority (in Colorado law)
CTAPCommunity Transportation Assistance Program	RTAPRural Transit Assistance Program
DOT.....U.S. Department of Transportation	RTDRegional Transportation District (Denver's Transit System)
E&DElderly and disabled (elderly persons and persons with disabilities)	SCCState Coordinating Council
ESPAEaster Seals Project ACTION (Accessible Community Transportation in our Nation)	SLVSan Luis Valley, south central Colorado
FHWAFederal Highway Administration, U.S. Department of Transportation	STACState Transportation Advisory Committee
FRAFederal Rail Administration, U.S. Department of Transportation	STIPStatewide Transportation Improvement Program
FTAFederal Transit Administration, U.S. Department of Transportation	SWCCOG.Southwest Colorado Council of Governments
ICATInternational Centre for Accessible Transportation	TAC.....Transit Advisory Committee (local group for transit plan)
ICCTInteragency Coordinating Committee on Transportation	TCTransportation Commission (CDOT)
ITAInternational Taxicab Association	TPRTransportation Planning Region (CDOT regional division for planning purposes)
	TWGTransit Working Group (committee of the TPR's responsible for transit planning)

Agencies, Associations, Committees, and Programs—*Non-Transportation*

AAA	Area Agency on Aging	DREDF	Disability Rights Education and Defense Fund
AARP.....	American Association of Retired Persons	DRCOG....	Denver Regional Council of Governments
ACB.....	American Council for the Blind	DRMAC...	Denver Regional Mobility and Access Council
AHCA	Agency for Health Care Administration	DSHS	Department of Social and Health Services
AMPO	Association of Metropolitan Planning Organizations	FCC	Federal Communications Commission
AoA.....	Administration on Aging	HCBS.....	Home and Community-Based Services
APHSA.....	American Public Human Services Association	HCFA.....	Health Care Financing Administration
APRIL	Association of Programs for Rural Independent Living	HHS.....	Health and Human Services, U.S. Department of
CCB.....	Community Centered Board	HSA	Human Services Agency
CCI	Colorado Counties, Inc.	HUD	Housing and Urban Development, U.S. Department of
CCOA	Colorado Commission on Aging. Also: County Commission on Aging	ICADI.....	International Conference on Aging, Disability and Independence
CDBG	Community Development Block Grant	JBC.....	Joint Budget Committee (of the State Legislature)
CDDPC	Colorado Developmental Disabilities Planning Council	MMS.....	Mobility Management System
CDPHE.....	Colorado Department of Public Health and Environment	MRDD	Mental Retardation and Developmental Disabilities
CHRS.....	Division of Children’s Health and Rehabilitation Services	NAC	National Association of Counties
CIP	Community Integration Program	NARC	National Association of Regional Councils
CML	Colorado Municipal League	NASUA....	National Association of State Units of Aging
CM(M)S ..	Centers for Medicare and Medicaid Services	NAWB.....	National Association of Workforce Boards
COA	Council on Aging	NCD	National Council on Disability
COG	Council of Governments	NCIL	National Council on Independent Living
CSBG.....	Community Services Block Grant	NCSL	National Conference of State Legislatures
DBTAC	Disability and Business Technical Assistance Centers	NCWD.....	National Center on Workforce and Disability
DD.....	Developmental Disabilities	NDRN.....	National Disability Rights Network
DDD	Department of Human Services Division for Developmental Disabilities	NEMT.....	Non-emergency Medical Transportation
DDS	Developmental Disabilities Services	NFRMPO..	North Front Range Metropolitan Planning Organization
DES	Department of Economic Security	NHSA	National Head Start Association
DHHS.....	U.S. Department of Health and Human Services, Office of Disability	NIDRR	National Institute on Disability and Rehabilitation Research
DHS	Colorado Department of Human Services		

NRC.....National Resource Center for Human
Service Transportation Coordination
NRICGP ...National Research Initiative
Cooperative Grant Program
NTBANational Transit Benefit Association
NTOCNational Transportation Operations
Coalition
OCROffice of Civil Rights
PPACGPikes Peak Area Council of
Governments
PUC.....Public Utilities Commission
PVAParalyzed Veterans of America
SAPSubstance Abuse Professional
TANF.....Temporary Assistance to Needy
Families
TDD.....Telecommunications Device for the
Deaf
TLPA.....Taxi, Limousine and Paratransit
Association
TRBTransportation Research Board

Transit/Transportation Acronyms, Terms, Legislation, Plan, and Programs

A&D.....Alcohol and Drug (regulations)
ADAAmericans with Disabilities Act of 1990
BRTBus Rapid Transit
CDLCommercial Drivers' License
CDOTColorado Department of Transporta-
tion
CMAQ.....Congestion Mitigation/Air Quality
DOT.....Department of Transportation (U.S.)
DTR.....Division of Transit and Rail, Colorado
DOT
E&DElderly and Disabled
EIS.....Environmental Impact Statement
FAST Act .Fixing America's Surface Transporta-
tion Act, 2015
FASTER ...Funding Advancement for Surface
Transportation and Economic Recovery
(state funding mechanism for trans-
portation)
FHWAFederal Highway Administration
FTAFederal Transit Administration

HOVHigh Occupancy Vehicle (i.e., buses,
carpools)
HTFHighway Trust Fund (federal)
HUTF.....Highway Users Tax Fund (state)
ICBIntercity Bus
ISTEAIntermodal Surface Transportation Ef-
ficiency Act of 1991 ("Ice Tea")
ITS.....Intelligent Transportation System
JARC.....Job Access and Reverse Commute (ex-
pired FTA grant program)
LOS.....Level of service
LRT.....Light Rail Transit
MISMajor Investment Study
MISManagement Information System (FTA
Drug and Alcohol Regulations)
NEPA.....National Environmental Policy Act
NHS.....National Highway System
O & DOrigin and Destination
PMTPassenger Miles Traveled
RTDRegional Transportation Director
(CDOT)
RTPRegional Transportation Plan
ROWRight of Way
SAFETEA-LU Safe, Accountable, Flexible
and Efficient Transportation Equity
Act-A Legacy for Users (highway reau-
thorization August 2005)
SIP.....State Implementation Plan (for air
quality)
SMPState Management Plan (for transit
grant management)
SOVSingle Occupancy Vehicle
STIP.....Statewide Transportation Improve-
ment Program
STP.....Surface Transportation Program
TCIPTransit Communications Interface Pro-
tocol
TDM.....Transportation Demand Management
TE.....Transit Element
TIP.....Transportation Improvement Program
(metropolitan areas)
TEA-21Transportation Equity Act for the 21st
Century
TMA.....Transportation Management Area

TNC.....Transportation Network Company
TPRTransportation Planning Region (CDOT
regional division for planning purposes)
UZA.....Urbanized Area
VMTVehicle Miles Traveled
UWRUnited We Ride

Human Services' Acronyms

ACFAlternative Care Facility
AFCAdult Foster Care
ATUAcute Treatment Unit
CASSPChild and Adolescent Service System
Program
CBLTCCommunity Based Long Term Care
CCARColorado Client Assessment Record
CCB.....Community-Centered Board
CCSCConsumer Centered Services of Colo
CDASConsumer Directed Attendant Support
CDCE.....Consumer Directed Care for Elderly
CMHCCommunity Mental Health Center
CMHIColorado Mental Health Institute
CMHI-FL .Colorado Mental Health Institute at
Fort Logan
CMHI-P ..Colorado Mental Health Institute at
Pueblo
CMHSCenter for Mental Health Services
CMSCenters for Medicare and Medicaid
Services
ComPASSCommunity Personal Assistance Ser-
vices and Supports
DD.....Developmental Disability
DDSDevelopmental Disabilities Services
DIDeinstitutionalization
EBDElderly, Blind, and Disabled
HCAHome Care Allowance
HCBS-.....Home and Community Based Services
Waiver for Persons
HCBS-MI Home and Community Based Services
Waiver for Persons with Major Mental
Illnesses
HCFAHealth Care and Financing Administration

HCPFColorado Department of Health Care
Policy and Financing
HOMEHOME Investment Partnership
Program
HUDHousing and Urban Development
ICF/MR ...Intermediate Care Facilities for the
Mentally Retarded
IHSS.....In-Home Support Services
JBCColorado Joint Budget Committee
LTCLong Term Care
LTSSLong Term Services and Supports
MHACMental Health Association of Colorado
MHASA ..Mental Health Assessment and Service
Agency
MHSColorado Mental Health Services
MIMental Illness
MINSMost in Need Screen
NAMI-Colorado .National Alliance for the
Mentally Ill of Colorado
NAMHPACNational Association of Mental
Health Planning and Advisory Councils
NASMHPDNational Association of State
Mental Health Program Directors
NFNursing Facilities
OBRAOmnibus Budget Reconciliation Act
OLTCOptions for Long Term Care
PACEProgram for All-Inclusive Care for the
Elderly
PARPrior Authorization Request
PASARR ..Pre Admission Screen and Annual
Resident Review
RCCFResidential Child Care Facility
RFPRequest for Proposals
RTCResidential Treatment Center
SEDSerious Emotional Disturbances
SEPSingle Entry Point
SHHPSupportive Housing and Homeless
Programs
SMISerious Mental Illness
SNFSkilled Nursing Facility
SPMISerious and Persistent Mental Illness
SSDI.....Social Security Disability Insurance
SSISupplemental Security Income
ULTC-100Uniform Long Term Care Form

Other Terminology

CRSColorado Revised Statutes

FFYFederal Fiscal Year

GISGeographic Information System

GPSGlobal Positioning System

IGA.....Intergovernmental Agreement

MOUMemorandum of Understanding

NOFANotice of Funding Availability

PNPPrivate Non-Profit

PPP.....Public Private Partnership

SAPSystems, Applications, Products in Data
Processing (state's financial management tool)

SOPStandard Operating Procedures

SOW.....Scope of Work

TABORTaxpayer's Bill of Rights (S.B. 93-74)

WIA.....Workforce Investment Act

FFYFederal Fiscal Year

FYFiscal Year

More Health and Human Services Acronyms and Terms

AFDC	Aid to Families with Dependent Children	Also known as ADC.
AFDC-U	AFDC	For families where primary wage earner is unemployed.
AND	Aid to Needy Disabled	
Child Care	Also Known as CCAP	Assistance with cost of childcare for eligible families.
CW—FC/SUB	Child Welfare—Foster Care/ Subsidized Adoption	Children in out-of-home placement or children who have been placed in an adoptive home and the adoptive parents receive a subsidy for the child.
CWP	Colorado Works Program	Used to track the number of TANF recipients who must participate in work activities. Some clients are exempt such as grandparents receiving assistance for grandchildren, disabled parents, and pregnant women after their sixth month.
Employment First	Employment program for food stamp single recipients who do not have minor children; requires recipients work at public service site for their food stamp benefit.	
Food Stamps	HH is number of households and IND is number of individuals who received food stamps for the month.	
General Assistance	County-only funded program for short-term emergency assistance to persons who are below poverty level and who do not qualify for any other assistance.	
IV-D (AFDC)	Number of child support cases where the custodial parent received cash assistance from the AFDC program/TANF.	
IV-D (NON)	Number of child support cases where the custodial parent did not receive AFDC payments/TANF.	
LEAP	Low Income Assistance Program	Provides assistance with home heating costs- program operates from November thru April
MED ONLY	Medicaid Only	Persons who do not receive cash assistance but who are eligible for Medicaid benefits only. Includes nursing home eligibles, pregnant moms, baby care etc.
MED Transportation	Assistance to Medicaid	
New Directions	Employment program for AFDC recipients. Replaced by Colorado Works.	
Investigations	Number of investigations for recipients who may have committed fraud or who owe a repayment of prior assistance.	
OAP	Old Age Pension	
SEP	Single Entry Program	Options for long term care program which is nursing home diversion program for people who are financially eligible and who meet the nursing home level of care screen. Services are provided to the client in their own home or some alternative to nursing home setting.
TANF	Temporary Assistance to Needy Families	Replaces AFDC program. In Colorado, it is called the Colorado Works Program. Time limits for assistance and work activities are required.

APPENDIX 5. RECOMMENDATIONS FOR THE COMMUNITY LIVING ADVISORY GROUP, CARE COLLABORATION SUBCOMMITTEE (2014)

The Community Living Advisory Group, a multi public-private governor-led initiative, met for well over a year to develop policies to improve service delivery. Health Care Policy and Financing was the lead agency; stakeholders included agencies, non-profits, advocates, service recipients, and others to improve how care is coordinated. Transportation was considered one of the cornerstones to community living and aging in place. Transportation interests were represented on the Care Collaboration Subcommittee, which presented the following problem statement and list of recommendations. The final report to the Governor included these recommendations in condensed form.

PROBLEM STATEMENT HUMAN SERVICES TRANSPORTATION

Individuals who are aging or who live with disabilities have the right to remain at home with the dignity of individual choice and self-determination. To be successful, they must have access to safe, reliable, affordable, and accessible transportation. Access to services is key to person-centered, community life, but people must be able to get to those services.

Transportation is vital, and Human Service or Community based types are expensive. Furthermore, demand is increasing when public funds are declining and harder to come by. Public funds that subsidize this type of transportation are complicated and fragmented, resulting in transportation services that are frequently duplicative, inefficient, and inadequate. The inefficiencies waste precious resources when there isn't enough money to go around. Funding is often narrowly targeted and resides across multiple agencies, and at all levels of government. We need to address these funding silos.

The availability of human services transportation can only be more efficient, maintained, and improved through the collaborative efforts of transportation providers, human service agencies, funders, and policy makers to *coordinate transportation services*. Throughout the country, human services or community based transportation coordination has been shown to dramatically reduce per trip costs and decrease duplicative services, while providing more transportation services and availability.

There are many challenges to transportation coordination. Many of those challenges are institutional—not regulatory—and can change. Overcoming the barriers and breaking down the silos to support person-centered community life begins with agencies working and solving problems together.

Options for individuals are often limited, but transportation coordination greatly supports an individual's right to live at home, be self-directed, and to guide one's own

quality of life. The Colorado Interagency Coordinating Council for Transportation Access and Mobility (State Coordinating Council (SCC)), a collaborative project that includes numerous state agencies, including CDOT, HCPF, and DHS, has identified approaches that will help break down transportation, funding, and policy silos. Transportation coordination enables providers to use multiple funding streams, increase operational efficiency, and maximize resources available to individuals, providing them with flexibility and options that help keep them independent and mobile.

RECOMMENDATIONS TO CLAG (2014)

- **Support the development of a coordinated system of transportation in the region**
 - a) Engage with State, Regional, and Local Coordinating Councils
 - b) Give preferential treatment to agencies who collaborate/participate in coordination efforts
 - c) Facilitate connections between transportation providers and transportation users
 - d) Create Incentives at state, regional and local levels for transportation coordination and collaboration
 - e) Work with Veteran's Transportation groups to coordinate services
- **Support simplification**
 - a) Work with other agencies to simplify and consolidate reporting requirements
 - b) Work to remove overly restrictive and conflicting state agency requirements in funding/service eligibility
 - i) Allow sharing of vehicles—use and maintenance
 - ii) Encourage other resource—sharing and activities coordination e.g., driver-sharing, driver safety or customer-sensitivity training, co-op liability insurance, scheduling and/or dispatch systems, voucher systems, etc.
 - iii) Remove barriers that prohibit mixing of populations, funding sources, and trip purposes
 - iv) Work with other agencies to create a unified cost accounting processes and reporting requirements
 - v) Work with state and federal agencies to recognize verified true cost of transportation services and develop strategies for addressing reimbursement rates
 - vi) Develop state agency mechanisms to allow for cost sharing and joint funding where they currently do not exist
- **Support innovation in transportation operations**
 - a) Work with CDOT and other state agencies to identify potential cost savings through pool operations
 - i) Identify potential savings from pool purchases for fuel, insurance, vehicles, contracted services (i.e., drug and alcohol testing, safety programs, training, etc.)

- ii) Identify potential cost savings through technology such as scheduling software, accounting software, asset management systems, fuel management systems, mobile data technology, etc.
- b) Support the use of technology to enhance customer service
 - i) Support the development of communication tools, i.e. social media, targeted texting, alerts, etc.
 - ii) Support the development and use of one call/one click services
 - (1) Work with organizations that are moving forward on this, i.e., Veterans Transportation and Community Living Initiative (VTCLI), regional brokerages, etc.
 - (2) Work to integrate human services operations with transportation operations such as coordination of 511 and 211
- c) Support the use of technology to promote efficiency and productivity
- d) Work toward a vision of a single, universal transportation pass for all service modes
 - i) Include rail, bus, shuttle, taxi, tolling, parking, B-Cycle, etc.
 - ii) Ensure access by all funding sources
 - iii) Provide for all trip purposes
- **Work toward a collaborative future**
 - a) Participate in long- and short-range transportation, economic development and community planning efforts at the state, regional and local areas
 - b) Support innovative service concepts proven promising practices



APPENDIX 6. AN EXAMPLE OF STATE LEVEL COORDINATION:

Recommendations to Non-Emergency Medical Transportation Regarding Regional Coordination

The following material is the text from a slide presentation given at the 2015 Spring CASTA Conference. It is based on a report HCPF/NEMT commissioned that studied the NEMT program and recommended improvements to Medicaid-funded transportation.

Non-Emergency Medical Transportation: A Study in Progress! CASTA Fall Conference, Sept. 16, 2015

Colorado has the opportunity to make significant improvements in our medical transportation programs. This presentation is about a recent and important study on NEMT. This is an overview of the main points of that study.

Study Purpose

- Commissioned by Health Care Policy and Financing
- Conducted May 1, 2015 through June 30, 2015
 - Concern about NEMT program consistency and effectiveness
 - Need to understand how NEMT services were being provided
 - Desire to jump-start the development of recommendations for improvement

Study Targets

- The *non*-Total Transit counties which constituted a total of 55 counties,
- The Regional Care Collaborative Organizations (RCCO's) where those targeted counties reside, and
- HCPF staff who work the most closely with NEMT services at the state level.

Study Process

- Online survey program, Survey Monkey, for counties and RCCOs
- Group interview for HCPF staff input
- Return rate was exceptional
 - 91 percent from the counties
 - 100 percent from the RCCOs
 - 100 percent from staff selected to participate

Major Findings: Context

- The NEMT Program is limiting its
 - funding,
 - federal compliance, and
 - return-on-investment potential
- by being conceptualized and operated as a “silo” program at the state and service delivery levels.
- Findings generally fall into three categories
 - Issues for *policy and system changes*
 - Issues at the *services delivery level*
 - Items for further study

Major Findings: Overview

- 1) Colorado's NEMT program is currently administered using three structures:
 - A State-managed broker contract operated by Total Transit that serves the counties of: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson, Larimer, and Weld,
 - Three multi-county collaboratives that involve a total of 19 counties. Each of the collaboratives have partnered with a non-county department of human services agency act as their "regional" transportation broker, and
 - A county-administrated system where all other counties (36) operate NEMT locally using a number of different approaches and processes through the county departments of human services.
- 2) Wide variety in how NEMT is provided at the county level—full compliance and creativity to no compliance, no service.
- 3) Big challenges in current state-supervised/county-administered system(excluding the 9-county Denver metro broker, Total Transit)
 - Lack of adequate resources at state and county levels
 - Inconsistency of services
 - Jurisdictional issues regarding inter-county transportation or cross-county transportation
 - Lack of resource sharing
- 4) Multi-county collaborative NEMT projects vs single or dual county NEMT services
 - Most of the single county systems do not maximize resources available regionally
 - Most do not address cross-county jurisdictional issues
 - A regional structure would give Colorado more opportunities for economies of scale in:
 - Services delivery
 - resource use
 - administration
 - A regional structure is widely preferred by most counties and RCCOs
- 5) Other inconsistencies and inadequacies
 - Data collection systems, reporting, and analysis
 - Current data management system doesn't measure NEMT performance and costs
 - Staff activity and workload descriptions vary among counties
- 6) Critical staff workload constraints at state and services delivery levels
 - NEMT provision is an "add-on" task for county staff
 - County directors lack sufficient Administrative Allocations
 - State staff juggle NEMT oversight with other priorities
- 7) Major areas of the state—especially rural—do not have adequate transportation options. This is further compounded by:
 - remote client locations
 - lack of local healthcare delivery systems (medical providers, pharmacies, etc.)

- 8) The current NEMT will be further overwhelmed
 - impacts from the Affordable Care Act on increased Medicaid enrollment
 - shifts in demographics
- 9) Need strategic policy communications, coordination, and collaboration!
 - NEMT issues are not integrated into other Medicaid and healthcare reform discussions and policy planning at the state level. Transportation issues have been raised in each of the following:
 - Long-Term Services and Supports (LTSS) delivery system,
 - Home and Community Based Services (HCBS),
 - Community Living Advisory Group Final Report (CLAG), and
 - Centers for Medicare & Medicaid Services (CMS) partnership with HCPF to test a new model for providing Medicare-Medicaid enrollees with more coordinated, person-centered care
 - Conflicting state policies are not being addressed

Key Recommendations

*The NEMT Program can significantly improve its resources and funding, federal compliance, and return-on-investment by being viewed and operated as **an integral part of larger efforts to increase access to healthcare, improve health outcomes** with more cross-system policy collaboration at the state, regional, and local levels.*

Suggested Next Steps

- 1) Build on demonstrated commitment and interest in NEMT reform
 - Value county and RCCOs efforts and input, and keep them informed
 - Share survey results with stakeholders, counties, and RCCOs
- 2) Respond to survey requests, including:
 - Collect and share NEMT policies and procedures from those counties who have them
 - Develop a NEMT program toolkit for staff at the state or county level
 - Support, guide, and lead on:
 - Creating consistent county NEMT policies and procedures (e.g., how “no shows” are handled)
 - Addressing the inconsistent manner in which client complaints are handled
 - Developing performance standards that are enforced statewide
- 3) Given the success learned from HCPF’s stakeholder engagement process with the dental benefits collaborative process, HCPF should begin a planning processes for NEMT reform by engaging key stakeholder including:
 - Initiating meetings, discussions, focus groups town hall meetings, and activities with critical
 - stakeholders including:
 - Medicaid clients and advocates
 - Community Mental Health Centers (CMHC’s)
 - transportation providers
 - Area Agencies on Aging and seniors

- County Commissioners/CCI; policy makers
- Colo. Coalition for Medically Underserved
- Regional Care Collaborative Organizations (RCCO)
- Colo. Coalition for Cross Disability (CCDC)
- community based-organizations that work and persons with disabilities, and/or provide services to Medicaid clients
- veterans organizations
- nursing homes

Recommendations to HCPF:

- Get input from other state agencies that work with Medicaid clients, e.g., including the Colorado Departments of Human Services (CDHS) and Public Health and Environment (CDPHE).
 - Meet with state legislators interested in the broader issue of healthcare access and cost-containment to explore ways that NEMT reform can be included in their legislative policy activities.
 - Meet with the PUC to explore options for how the two state agencies can work together to address the transportation licensing issues.
 - Investigate options for addressing state staff resource issues by *integrating NEMT state oversight responsibilities with other Medicaid healthcare access and services delivery programs and functions*.
 - Maintain closer working relationships with CDOT (transit planning & funding, Rides to Wellness, etc.), Community Living Initiative, Veterans Transportation, and CDHS programs that interface with Medicaid.
- 4) Decisions to be made regarding additional NEMT research and data analysis needs:
- Further analysis of the NEMT Evaluation Project Report data and information, including:
 - regional breakdown of transportation resources
 - regional breakout of NEMT county infrastructure (costs, number of staff and staff hours, etc.)
 - regional analysis of NEMT strengths and challenges combining all counties, multi-county collaboratives and RCCO's
 - Multi-county projects' NEMT strengths and challenges compared to all counties
 - In-depth study of the strengths and needs for improvement with the new 9-county State Broker shared-risk contract.
 - Studying other state NEMT services delivery and financing models, including:
 - Establishing dual classification of NEMT in the Colorado State Medicaid Plan as both a "medical assistance" and an "administration" expenditure,
 - Combining/collapsing all transportation benefits and managing services as one overall benefit category, and

- Seeking alternative/creative state and local options to meet the statutory definition of Medicaid match.
- Analyzing the present county administration allocation methodology, including:
 - What mandated activities do or don't have a designated line item
 - Whether the allocation adequately covers all mandated activities
 - Staff concerns about inequities and county concerns about allocation reductions
- Analyzing actual transportation costs to determine whether changes in Medicaid transportation policies are warranted.
- Researching public/private sector partnership solutions (e.g., using Transportation Network Companies (“Uber” type); or under-used vehicle capacity
- Researching technology options to improve NEMT performance and cost-efficiencies, including:
 - use of tele-medicine and electronic medical records to reduce the need for transportation or at least create options for closer medical appointment locations,
 - use of web-based scheduling where clients book their own transportation,
 - use of regional scheduling, dispatching and billing systems, and
 - use of innovative payment technologies (e.g., smart cards, pre-loaded funding)



(BACK COVER INSIDE)

(BACK COVER OUTSIDE)