



# Hot Topics in Paratransit

2012 Alameda CTC Senior and Disabled Mobility Workshop

Presented by Richard Weiner | July 16, 2012



# Hot Topics in Paratransit

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- Larger wheelchairs on transit and paratransit
- Increase in dialysis trips
- Role of taxis in paratransit provisions



Image from Doug Cross



# Wheelchair Usage on Transit

## Trends emerging since the passage of the ADA

- More active wheelchair users in the community
- More accurate paratransit eligibility shifted riders onto fixed-route
- Some agencies have more than 100,000 wheelchair boardings on fixed-route



# At the same time ...

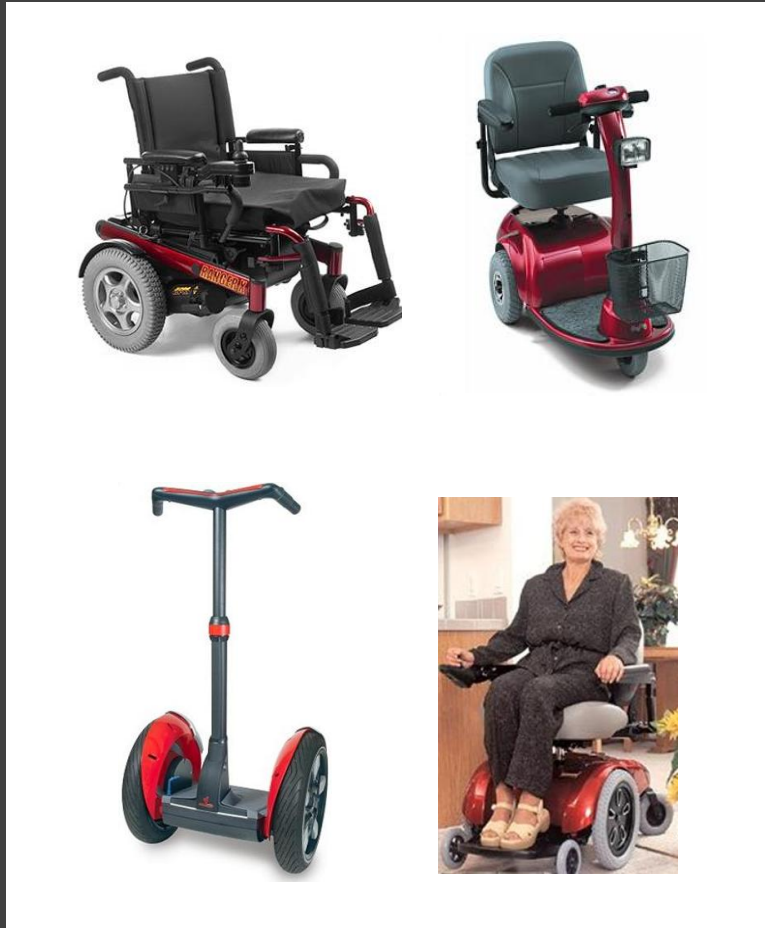


Image from Doug Cross

- Proliferation of new models on the market
- Benefits: can be cheaper, more comfortable/ convenient
- Some are not meant to be used on transit
- Too large or difficult to maneuver on buses
- Many power chairs/scooters don't provide adequate securement points

# What Needs to Happen

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- Need for “transit safe” designs
- Voluntary standards (WC19) not well-known
- Education of manufacturers, consumers, transit agencies, medical funding and regulatory agencies
- Need to increase use of wheelchairs that are WC19 compliant

# 2011 FTA ADA Paratransit Ruling

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- “Common wheelchair” definition removed
- Agencies were excluding riders even if vehicles could accommodate
- Now must provide trip if equipment can safely accommodate
- Weight may be greater issue than wheelchair size
- New research study “**Use of Mobility Devices on Paratransit Vehicles and Buses**”
- Identify issues that limit use on vehicles, develop guidance for larger devices

# Dialysis



Image from Anna Frodesiak

- Patient population growing 10% annually
- 60,000 patients (1980) grown to 571,000 (2009)
- Obesity, high blood pressure, diabetes
- Some systems now 10 – 18% of trips

# Dialysis Trips Can be More Expensive

- Higher driver assistance required
- Increased boarding times
- Shifts sometimes start early morning, end late
- Sometimes assigned to clinics far from home
- Four hour shifts, must be consistent
- Often includes Saturday treatment
- Medicare only covers emergency medical transportation costs





# What is Needed?

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- Education of medical professionals making referrals
- Negotiation of schedules with clinics
- Adding 6% to Medicare reimbursements
- Potential for cost sharing with private clinics

# Use of Taxis in Paratransit Service



- Transit agencies have contracted with taxis since 1970's
- Provide both ADA and non-ADA service
- Proportion of ADA paratransit on taxis varies greatly

# Taxi as ADA contractor

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- Address demand fluctuations
- Low demand areas
- Seasonal fluctuations
- Some provide all paratransit trips

# Issues

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- Service quality (driver training, vehicles)
- Lack of accessible vehicles
- Competition with human service agencies
- Low density areas unappealing to drivers





# Solutions

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- Provide accessible vehicles
- Better coordination with human service transportation
- Provide guaranteed number of trips

# Subsidized Taxis as a Means of Lowering Costs

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- Non-ADA seen as way of providing lower cost paratransit service
- Attraction of same day service drives up demand
- Cost savings questionable
- When funding available, expands service choices
- Alameda County unusual compared to other locations

**Other “Hot Topics”  
You Want To Share?**

