



Meeting Notice

1111 Broadway, Suite 800, Oakland, CA 94607

• 510.208.7400

• www.AlamedaCTC.org

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Paratransit Technical Advisory Committee

Tuesday, September 8, 2015, 9:30 a.m.

1111 Broadway, Suite 800

Oakland, CA 94607

Mission Statement

The mission of the Alameda County Transportation Commission (Alameda CTC) is to plan, fund and deliver transportation programs and projects that expand access and improve mobility to foster a vibrant and livable Alameda County.

Public Comments

Public comments are limited to 3 minutes. Items not on the agenda are covered during the Public Comment section of the meeting, and items specific to an agenda item are covered during that agenda item discussion. If you wish to make a comment, fill out a speaker card, hand it to the clerk of the Commission, and wait until the chair calls your name. When you are summoned, come to the microphone and give your name and comment.

Reminder

Please turn off your cell phones during the meeting. Please do not wear scented products so individuals with environmental sensitivities may attend the meeting.

Glossary of Terms

A glossary of terms that includes frequently used industry terms and acronyms is available on the Alameda CTC website at www.AlamedaCTC.org/app_pages/view/8081.

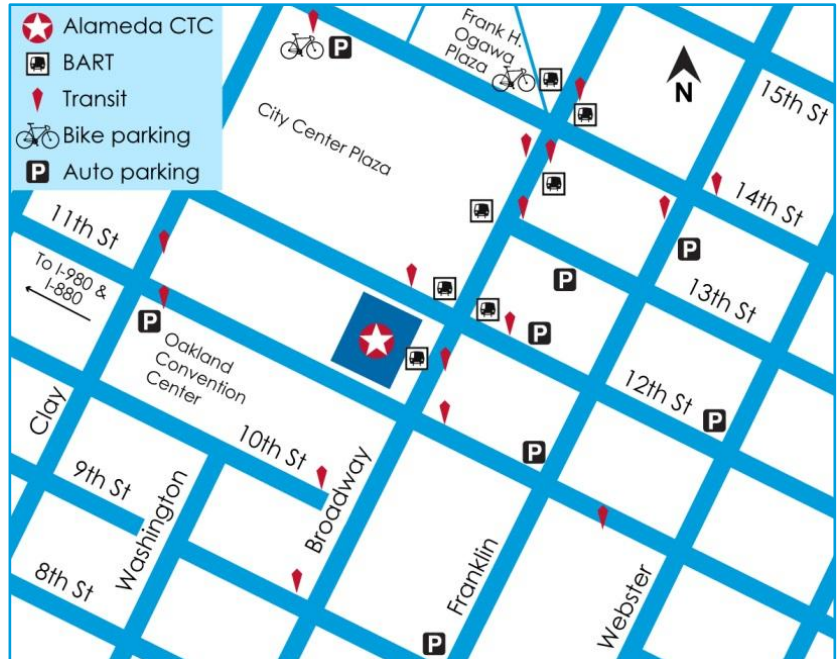
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Location Map

★ Alameda CTC
1111 Broadway, Suite 800
Oakland, CA 94607

Alameda CTC is accessible by multiple transportation modes. The office is conveniently located near the 12th Street/City Center BART station and many AC Transit bus lines. Bicycle parking is available on the street and in the BART station as well as in electronic lockers at 14th Street and Broadway near Frank Ogawa Plaza (requires purchase of key card from bikelink.org).



Garage parking is located beneath City Center, accessible via entrances on 14th Street between 1300 Clay Street and 505 14th Street buildings, or via 11th Street just past Clay Street. To plan your trip to Alameda CTC visit www.511.org.

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Public meetings at Alameda CTC are wheelchair accessible under the Americans with Disabilities Act. Guide and assistance dogs are welcome.

Call 510-893-3347 (Voice) or 510-834-6754 (TTD) five days in advance to request a sign-language interpreter.



Meeting Schedule

The Alameda CTC meeting calendar lists all public meetings and is available at www.AlamedaCTC.org/events/upcoming/now.

Paperless Policy

On March 28, 2013, the Alameda CTC Commission approved the implementation of paperless meeting packet distribution. Hard copies are available by request only. Agendas and all accompanying staff reports are available electronically on the Alameda CTC website at www.AlamedaCTC.org/events/month/now. Any other notice required or permitted to be given under these bylaws will follow the same policy. PAPCO members receive an exception to the paperless policy and will continue to receive notices via U.S. Postal Service in addition to electronic versions. Members can request to opt-out of paper notices.

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Paratransit Technical Advisory Committee Meeting Agenda Tuesday, September 8, 2015, 9:30 a.m.

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• www.AlamedaCTC.org

Facilitator: Naomi Armenta

Staff Liaison: Jacki Taylor

Public Meeting Coordinator:
Krystle Pasco

9:30 – 9:35 a.m.
Staff

1. Welcome and Introductions

9:35 – 9:40 a.m.
Public

2. Public Comment

Page A/I

9:40 – 9:45 a.m.
Staff

3. Administration

3.1. June 9, 2015 ParaTAC Meeting Minutes

1 |

The Committee will review the
June 9, 2015 ParaTAC meeting
minutes.

3.2. FY 15-16 ParaTAC Meeting Calendar

7 |

The Committee will receive the
updated FY 15-16 ParaTAC
meeting calendar.

3.3. PAPCO Appointments

9 |

The Committee will receive the
current PAPCO appointments.

9:45 – 10:10 a.m.
Staff

4. Quarterly Paratransit Strategic Planning Workshop Feedback

11 |

The Committee will have an opportunity to provide feedback on the quarterly paratransit strategic planning workshop that took place on July 27, 2015.

10:10 – 10:35 a.m. Staff	5. Access Alameda Website: Alameda County City-Based Paratransit Application Discussion	23	
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The Committee will have an opportunity to discuss creating an interactive version of the city-based paratransit application for the Access Alameda website.

10:35 – 11:00 a.m. Staff	6. Hospital Discharge Transportation Service and Wheelchair Scooter Breakdown Transportation Service Program Update (Verbal)		
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The Committee will receive a program update on the Hospital Discharge Transportation Service and Wheelchair Scooter Breakdown Transportation Service programs.

11:00 – 11:15 a.m. ParaTAC	7. Technical Exchange (Verbal)		
	7.1. Mobility Management		
	7.2. Preparedness		
	7.3. Ask a ParaTAC Member		

11:15 – 11:30 a.m. ParaTAC	8. Information Items (Verbal)		
	8.1. ADA and Transit Advisory Committee Updates		

PAPCO Chair	8.2. PAPCO Update		
Staff	8.3. Paratransit Outreach Update	27	
ParaTAC	8.4. ParaTAC Member Reports		
Staff	8.5. Other Staff Updates		
	9. Draft Agenda Items for November 10, 2015 ParaTAC Meeting		
	9.1. Quarterly Paratransit Strategic Planning Workshop Feedback		
	9.2. Draft Implementation Guidelines and Performance Measures Review and Discussion		
	9.3. Needs Assessment Review and Discussion		
	9.4. Technical Exchange – Recurring Items		
11:30 a.m.	10. Adjournment		

Next Paratransit Strategic Planning Workshop (Joint PAPCO/ParaTAC Meeting): October 26, 2015

Next ParaTAC Meeting: Tuesday, November 10, 2015

All items on the agenda are subject to action and/or change by the Committee.

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Paratransit Technical Advisory Committee
Meeting Minutes
Tuesday, June 9, 2015, 9:30 a.m.

3.1

1111 Broadway, Suite 800, Oakland, CA 94607

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MEETING ATTENDEES

Attendance Key (A = Absent, P = Present)

Members:

<u>A</u> Rhianna Babka	<u>A</u> Karen Hemphill	<u>P</u> Gail Payne
<u>P</u> Dana Bailey	<u>A</u> Drew King	<u>P</u> Kim Ridgeway
<u>A</u> Beverly Bolden	<u>A</u> Jackie Krause	<u>A</u> Sandra Rogers
<u>P</u> Jessica Cutter	<u>P</u> Kadri Klm	<u>A</u> Mary Rowlands
<u>A</u> Pam Deaton	<u>A</u> Isabelle Leduc	<u>A</u> Sid Schoenfeld
<u>P</u> Shawn Fong	<u>A</u> Wilson Lee	<u>A</u> Leah Talley
<u>A</u> Pamela Gutierrez	<u>P</u> Hakeim McGee	<u>A</u> Laura Timothy
<u>A</u> Brad Helfenberger	<u>A</u> Cindy Montero	<u>A</u> Jonathan Torres
	<u>A</u> Mallory Nestor	<u>A</u> David Zehnder
	<u>A</u> Julie Parkinson	

Staff:

P Jacki Taylor, Program Analyst
P Naomi Armenta, Paratransit Coordinator
P Krystle Pasco, Paratransit Coordination Team
P Cathleen Sullivan, Paratransit Coordination Team

Guests:

Ken Bukowski, Public Member

MEETING MINUTES

1. Welcome and Introductions

Naomi Armenta called the meeting to order at 9:40 a.m. The meeting began with introductions and a review of the meeting outcomes.

2. Public Comment

There were no public comments.

3. Administration

Kim Ridgeway noted that on page 4, BAPAC (Bay Area Partnership Accessibility Committee), is spelled incorrectly as “BayPAC” in the previous meeting’s minutes.

ParaTAC members reviewed the rest of the meeting minutes from March 10, 2015 and by consensus approved them as written.

4. FY 2015-16 Measure B/BB Paratransit Program Plans (Verbal)

Naomi Armenta reviewed the highlights for the FY 2015-16 Measure B/BB paratransit program plans. She noted the subcommittee’s review process, the summary of programs by city and area (including Gap Grant programs), program plans with capital expenditures and/or community needs assessments, and other new programs for the next fiscal year.

Questions and feedback from ParaTAC members:

- Who is the transportation provider for the City of Hayward’s volunteer driver program? The program will be providing service similar to LIFE ElderCare’s program, VIP Rides.
- What is the car sharing program for the City of Hayward? The City of Hayward public works department received grant funding to bring car sharing to the City of Hayward. The paratransit program will be purchasing some accessible vehicles as a part of the larger car sharing program. The vendor is yet to be determined. CRIL will also be managing the operations of the accessible portion of the car sharing program.
- Is the initial grant funding that the City of Hayward public works department is receiving going to be used to purchase the first batch of vehicles? The City of Hayward public works department’s grant funding will go towards the contract and the paratransit program funding will go towards purchasing the initial accessible vehicles.
- Will individuals be able to join as members like other car sharing programs in the Bay Area? Yes, the program is still being developed but we are looking into a membership based model. Naomi noted that the City of Berkeley also has an accessible vehicle in their car sharing program and it is parked at the Ed Roberts Campus. More information regarding the City of

Hayward's car sharing program, including the use of electric accessible vehicles, will be shared once it becomes available.

5. FY 2015-16 Mobility Workshop Strategy (Verbal)

Cathleen Sullivan gave an update on the Mobility Workshop strategy for FY 2015-16. She noted that staff is interested in hosting four quarterly strategic planning workshops throughout the year versus one big workshop once a year. This approach will hopefully better inform PAPCO's work plan for the fiscal year. The first workshop will take place on Monday, July 27th in place of the regularly scheduled PAPCO and Joint PAPCO and ParaTAC meetings. The first strategic planning workshop will be focused on dialysis transportation challenges and the second workshop will likely focus on accessible taxi issues.

Cathleen then gave a brief overview of the tentative panelists for the first paratransit strategic planning workshop on dialysis transportation challenges.

Questions and feedback from ParaTAC members:

- A ParaTAC member expressed interest in inviting paratransit providers from beyond Alameda County to come and speak to their services at the workshop and future events regarding paratransit.
- Where will the workshops be held? The workshops will be held at the Alameda CTC offices.
- A ParaTAC member suggested inviting someone from Napa County that was involved in the elimination of paratransit subscription trips to speak to the transportation issues in their service area. Staff will be inviting a representative from Napa County and will also be inviting others who have implemented a cost sharing model with dialysis treatment providers.
- A ParaTAC member expressed interest in hearing Heidi Branson's perspective on the dialysis transportation issue.
- Are there national models for providing transportation to dialysis treatment centers that staff has looked into? Yes, staff has done some research on other models for this type of transportation service. More information will be shared once it becomes available.

- ParaTAC members suggested topics for future workshops including emergency preparedness and establishing volunteer driver programs.

6. Dialysis Transportation Challenges Discussion (Verbal)

Cathleen facilitated a discussion regarding dialysis transportation challenges in hopes to generate additional ideas for the paratransit strategic planning workshop in July.

Questions and feedback from ParaTAC members:

- A ParaTAC member suggested discussing cost sharing models with various providers to establish a reasonable solution to the general issue.
- A ParaTAC member suggested hearing information from Alameda County's Medi-Cal services; including where the funding they receive for transportation related expenses originates from, who qualifies for it and how they are able to access that funding.
- Are there other frequently recurring trips that clients are taking? Recurring trips can include dialysis, chemotherapy, physical therapy, and regularly scheduled doctor's appointments.

7. Technical Exchange (Verbal)

7.1. Mobility Management

Naomi Armenta shared that the last Alameda County travel training working group meeting took place on May 1st and the next meeting is scheduled for August 7th. Also the regional volunteer driver program working group, VITAL, is meeting on June 25th in Lafayette at the Senior Helpline Offices at 10:00 a.m.

7.2. Preparedness

Naomi Armenta requested that Laura Timothy and Kim Ridgeway give another update on East Bay Paratransit's emergency preparedness efforts. She will coordinate with Laura and Kim for the best time to put that presentation on the ParaTAC meeting agenda.

7.3. Ask a ParaTAC Member

The City of Alameda paratransit program will be going out for a competitive bid for a new shuttle operator. They are currently using MV Transportation but would like to know other potential transportation providers that other paratransit programs might be using instead. Suggestions included First Transit and A Para Transit.

7.4. Other Technical Exchange Items

There were no other technical exchange items discussed.

8. Information Items (Verbal)

8.1. SRAC Update

Kim Ridgeway gave a brief update on the last SRAC meeting that took place on May 5th. The agenda included a broker's report and joint ethics training. The next SRAC meeting is July 7th and the East Bay Paratransit open house is scheduled for July 29th. Also, more information on the ADA's 25th anniversary celebration event will be shared once it becomes available.

8.2. PAPCO Update and Appointments

Naomi Armenta noted that the next PAPCO meeting is on June 22nd. Agenda items include officer elections and committee effectiveness training.

8.3. Outreach Update

Krystle Pasco gave an update on PAPCO's outreach activities. She noted that staff is looking forward to the next outreach event which is the Senior Resource Expo at the Albany Senior Center on June 11th.

8.4. ParaTAC Member Announcements

Kim Ridgeway gave an update on the broker's office move for East Bay Paratransit. The final move will take place on June 26-27th and a satellite office will be set up to continue operations during that time. Additionally, the open house will be in conjunction with the ADA's 25th anniversary celebration at the new East Bay

Paratransit office and it is tentatively scheduled for July 29th. More information will be shared once it becomes available.

8.5. Other Staff Updates

Naomi Armenta announced that staff is updating the ParaTAC member roster. Please send any edits to Naomi as soon as possible.

Naomi also requested suggestions for community based organizations for the Community Based Transportation Provider presentations for next fiscal year. Please send any suggestions to Naomi as soon as possible.

9. Draft Agenda Items for September 8, 2015 ParaTAC Meeting

- 9.1.** Hospital Discharge Transportation Service and Wheelchair Scooter Breakdown Transportation Service Programs Update
- 9.2.** Community Based Transportation Provider Presentation
- 9.3.** Technical Exchange – Recurring Items

10. Adjournment

The meeting adjourned at 10:35 a.m. The next ParaTAC meeting is scheduled for September 8, 2015 at Alameda CTC's offices located at 1111 Broadway, Suite 800, in Downtown Oakland.



FY 15-16 Paratransit Technical Advisory Committee Meeting Calendar

3.2

1111 Broadway, Suite 800, Oakland, CA 94607

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www.AlamedaCTC.org

ParaTAC meetings are generally held on the second Tuesday of the month, between six and eight times per year, from 9:30 – 11:30 a.m. at the Alameda CTC. Note that meetings and items on this calendar are subject to change; refer to www.AlamedaCTC.org for up-to-date information.

Date	Events
July 27, 2015	<ul style="list-style-type: none"> • Quarterly Strategic Planning Workshop <ul style="list-style-type: none"> ◦ Dialysis transportation challenges
July 31, 2015	<ul style="list-style-type: none"> • Gap Grant Progress reports due for January 1, 2015 – June 30, 2015; Gap Grant final reports due for ending grants
August 2015	<ul style="list-style-type: none"> • NO MEETINGS
September 8, 2015	<ul style="list-style-type: none"> • ParaTAC Meeting <ul style="list-style-type: none"> ◦ Feedback on Quarterly Strategic Planning Workshop ◦ Access Alameda website – Alameda County City-Based Paratransit Application ◦ Update on HDTs/WSBTs Programs ◦ Technical Exchange – (Mobility Management, Preparedness, Ask a ParaTAC member)
October/November 2015	<ul style="list-style-type: none"> • ADA and City-programs receive input from local consumers
October 26, 2015	<ul style="list-style-type: none"> • JOINT Meeting / Quarterly Strategic Planning Workshop <ul style="list-style-type: none"> ◦ Same-day on-demand accessible trips
November 10, 2015	<ul style="list-style-type: none"> • ParaTAC Meeting <ul style="list-style-type: none"> ◦ Feedback on Quarterly Strategic Planning Workshop ◦ Draft Implementation Guidelines and Performance Measures ◦ Needs Assessments ◦ Technical Exchange – Recurring items

Date	Events
December 2015 (exact dates TBD)	<ul style="list-style-type: none"> • Annual Audits and Program Compliance Reports due
January 12, 2016	<ul style="list-style-type: none"> • ParaTAC Meeting <ul style="list-style-type: none"> ◦ Update on direct local program distribution estimates ◦ Final Implementation Guidelines and Performance Measures ◦ Presentation on Transit Plan ◦ Update on HDTs/WSBTs ◦ Technical Exchange – Recurring items
January 31, 2016	<ul style="list-style-type: none"> • Gap Grant Progress reports due for July 1, 2015 – December 31, 2015 for extended grants
February 22, 2016	<ul style="list-style-type: none"> • Quarterly Strategic Planning Workshop <ul style="list-style-type: none"> ◦ TBD
March 8, 2016	<ul style="list-style-type: none"> • ParaTAC Meeting <ul style="list-style-type: none"> ◦ Feedback on Quarterly Strategic Planning Workshop ◦ Program Plan Application completion mini-workshop ◦ Technical Exchange – Recurring items
March 18, 2016	<ul style="list-style-type: none"> • Annual Program Plans due
April 25, 2016	<ul style="list-style-type: none"> • JOINT Meeting / Quarterly Strategic Planning Workshop <ul style="list-style-type: none"> ◦ Needs Assessments in Alameda County
May 2016 <i>Dates TBD</i>	<ul style="list-style-type: none"> • PAPCO Program Plan Review Subcommittee Meetings
May 23, 2016	<ul style="list-style-type: none"> • PAPCO finalizes recommendation to Alameda CTC regarding Fiscal Year 2016/17 program plans
June 14, 2016	<ul style="list-style-type: none"> • ParaTAC Meeting <ul style="list-style-type: none"> ◦ Feedback on Quarterly Strategic Planning Workshop ◦ Status report on PAPCO Program Plan funding ◦ Update on HDTs/WSBTs ◦ Technical Exchange – Recurring items



Current PAPCO Appointments and Vacancies

3.3

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Appointer

- Alameda County
 - Supervisor Scott Haggerty, D-1
 - Supervisor Richard Valle, D-2
 - Supervisor Wilma Chan, D-3
 - Supervisor Nate Miley, D-4
 - Supervisor Keith Carson, D-5
- City of Alameda
- City of Albany
- City of Berkeley
- City of Dublin
- City of Emeryville
- City of Fremont
- City of Hayward
- City of Livermore
- City of Newark
- City of Oakland
- City of Piedmont
- City of Pleasanton
- City of San Leandro
- City of Union City
- AC Transit
- BART
- LAVTA
- Union City Transit

Member

- Herb Hastings
- Vacant
- Sylvia Stadmire
- Sandra Johnson Simon
- Will Scott
- Harriette Saunders
- Jonah Markowitz
- Vacant
- Shawn Costello
- Joyce Jacobson
- Sharon Powers
- Vanessa Proee
- Vacant
- Vacant
- Rev. Carolyn M. Orr
- Vacant
- Carmen Rivera-Hendrickson
- Vacant
- Vacant
- Hale Zukas
- Michelle Rousey
- Esther Waltz
- Larry Bunn

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1. Meet and Mingle

Workshop attendees had the opportunity to network with other paratransit and healthcare professionals.

2. Panelist Presentations and Moderated Discussion

Richard Weiner of Nelson\Nygaard Consulting Associates facilitated a panel discussion that included the following panelists:

- Steve Turitzin, MD (retired kidney doctor)
- Liza Lane, NorCal Ambulance, dialysis transportation provider
- Tasha Wilson, Dialysis Social Worker, DaVita HealthCare Partners
- Heidi Branson, Manager of Accessible Services, East Contra Costa Transit Authority
- Tom Roberts, Chief Operating Officer, Marin Senior Coordinating Council (formerly Manager of Public Transit at Napa County Transportation and Planning Agency)

Key points from panelists' presentations:

- Steve Turitzin, MD
 - Dialysis is an expensive procedure due to the increase in morbidity and usage for patients with kidney issues
 - Transportation is an important issue in getting to and from dialysis centers
 - Dialysis happens for 9-12 hours over the course of three appointments per week
 - Patients tend to be fluid overloaded since they are not creating as much urine and this can cause heart disease
 - Patients are oftentimes weak after treatments and this can affect the ability for a patient to leave the dialysis center on time. This will ultimately affect their transportation as well.
 - Patients need the maximum amount of time allotted for their appointments, as they need that time to regain equilibrium in their system. If patients arrive late then they

have less time to regain their equilibrium, which can cause them to get sick.

- Dialysis units typically run four shifts a day from 6-10 a.m., 10-2 p.m., 2-6 p.m. and 6-10 p.m.
- Several staff members are assigned to each patient including a social worker that is usually responsible for coordinating the patient's transportation. Monetary grants may be available to patients who cannot afford transportation or who do not have other resources for transportation such as family members or friends.
- A majority of dialysis patients are poor and some patients have become impoverished by their illness. Kidney failure is more common amongst poor people and can be related to the lack of access to healthcare.
- Liza Lane, NorCal Ambulance
 - NorCal Ambulance is a private transportation provider for dialysis patients who need to be lying down, are bed confined or need oxygen or vital sign monitoring during transport.
 - Annually, they are conducting approximately 5,000 dialysis transfers across 11 counties.
 - Challenges include maintaining schedules and on time performance and documentation for reimbursement purposes. They strive to keep their patients qualified for these trips to and from their dialysis treatments by following up with reimbursements.
 - Even though a patient is prescribed dialysis treatments they are not necessarily covered for those treatments. Furthermore, transportation costs are not taken into consideration for coverage.
 - Medicare is the largest payer for ambulance transportation to and from dialysis treatments for their patients. However, Medicare has recently pushed patients into lower levels of service which do not cover ambulance transportation costs.
 - The cost of ambulance transportation to and from dialysis treatment two to three times per week is approximately \$300 each way. This can easily cause a financial burden for

- patients who are not covered by Medicare. As a result, patients have been known to utilize other forms of transportation that are not safe for post dialysis treatment.
- The volume of patients that need dialysis treatment is increasing and this is an issue for the ambulance industry. The reimbursement structure is also rapidly changing.
 - In 2006, Medicare reported that there were 4,700 facilities and 315,000 patients receiving some form of end stage renal disease or kidney disease reimbursement from the federal government for healthcare services totaling over \$8 billion. To further cut costs there was a proposal to Congress in 2008 to include the costs for ambulance transportation to and from dialysis in the rate that the clinic is receiving for the treatment provided. This proposal did not pass because the proposed payment was less than the ambulance would have cost and there would have been nothing left over for the actual dialysis treatment. In response, Medicare reduced the payment rate for ambulance companies by 10% specific only to patients going to and from dialysis.
 - Medicare is also now denying more patients that seemingly would be eligible for services including those that need oxygen administered en route, are bed confined, or in need of other medical assistance and monitoring. Ambulance companies, like NorCal Ambulance are transporting those patients anyways and are looking for creative solutions for reimbursement.
 - In 2016, Medicare will start preauthorizing these services so ambulance companies will know within 10 days if patients are eligible for reimbursement.
 - Tasha Wilson, DaVita HealthCare Partners
 - Staff members at DaVita Health Care Partners are very aware of the paratransit services available in the Hayward area. They continuously help patients get connected to these various transportation options to get to and from their dialysis appointments. However, there are still some gaps in service including holidays and scheduling early morning, evening and Saturday appointments.

- In some facilities, patients are able to schedule their appointments around their own schedules. The only real limitation is their transportation including those that are provided by Medi-Cal.
- East Bay Paratransit has an urgent medical need form that will allow patients to be signed up for paratransit services by the next business day if needed.
- Increasing the publicity of the various paratransit forms to the community, social workers and administrative assistants can help connect patients to transportation services in their respective areas.
- Expanding the availability of purchasing East Bay Paratransit tickets at more locations would be very helpful for patients and social workers that have allocated emergency funds to purchase tickets.
- More training and clarification for Alameda Alliance's LogistiCare software would be very beneficial for social workers working with those patients.
- In the Hayward area, there is only one Medi-Cal van service, Wheelcare Express. If patients cannot use the service (e.g. have an altercation with a driver and are banned), it leaves them with very few options for transportation.
- The cost factor of transportation is unreasonable for many patients on fixed incomes, including those relying solely on SSI.
- Medicare is going to start reimbursing for end of life and palliative care discussions so that patients can be educated on their options regarding medical interventions, because sometimes patients' wishes are different from their family members' wishes.
- Heidi Branson, East Contra Costa Transit Authority
 - Tri Delta Transit serves a 250-mile radius service area and currently has six dialysis centers in that area. Approximately ten years ago the State of California allowed Tri Delta Transit to be a vendor for non-emergency medical transportation services. At that time they were able to access some funding and purchase six vehicles for this

purchase. Although this allowed Tri Delta Transit to expand their services, it has still been a challenge to provide satisfactory service to dialysis patients on a daily basis. They are currently providing approximately 400 rides a day with about 50% of those rides being dialysis trips.

- Tom Roberts, Marin Senior Coordinating Council
 - In 1989, most cities in the United States did not have formalized paratransit programs. However, during that time senior centers, adult day programs and dialysis facilities already existed and transportation to these facilities were paid for by the facilities themselves.
 - The Americans with Disabilities Act (ADA) was meant to address the lack of transportation options for people with disabilities and frail seniors who weren't affiliated with any program.
 - When the rule making process took place in 1990-1991, representatives of the transit industry expressed concern over client dumping into the ADA paratransit service from programs that were already providing transportation to individuals using their programs.
 - According to the ADA, paratransit trips cannot be prioritized based on trip purpose. This is due to the idea that the paratransit experience should be as equal as possible to the experience of someone who is not disabled using a fixed route transit system.
 - The purpose of the two-hour scheduling window is not only intended for scheduling flexibility for operators to schedule paratransit rides but also to maintain a similar experience for a paratransit rider to that of a non-paratransit rider with regards to arriving at the desired destination with the desired timeframe.
 - If a program or service is federally funded, it is not allowed to provide a charter type of service. If a program requests a transportation provider to pick up a group of people at a certain date and time, that is considered a charter type of service.
 - Subscription trips are not required of ADA paratransit services and as a matter of fact, trips taken to and from

community programs and facilities (that used to run their own transportation to and from program services) make up the majority of subscription trips.

- If an ADA paratransit service allows for subscription trips, up to 50% of their scheduled trips can be considered subscription trips. However, subscription trips are not allowed if a service has systematic capacity constraints.
- ADA paratransit was not intended to be program based social service group charter transportation.
- ADA eligibility was intended for individuals not institutions. Institutions cannot request a certain group of people to be transported to their location for services or treatment.
- Eliminating subscription trips in Napa County in 2012 made it impossible for social service agencies and private corporations to demand or take over the paratransit system. This forced key players to consider partnering on solutions to this transportation issue. Cost sharing can be a solution for capacity and demand issues. There is no ADA paratransit service in the United States that can successfully meet the demand of all its clients without a cost-sharing model in place.

3. Audience Participation and Q&A

- How many people are waiting for kidney or liver transplants? There are about 120,000 people waiting for a kidney transplant and about 15,000 kidneys become available every year. The average wait time is about six years for a kidney. Sometimes patients wait so long for a transplant that they develop other medical issues that render them ineligible as surgical candidates for a kidney.
- Why are patients referred to dialysis centers outside of their communities when there are centers much closer to their neighborhoods? DaVita Dialysis has three centers in Hayward and it depends on whom the doctor is and where the patient lives that determine which center they are assigned. The patients that are assigned to a center much farther than where they live are usually the ones that have requested a particular center closer to a certain doctor. 98% of patients are assigned to

centers near where they live. It also depends on where the patient can find an open chair to dialyze. This is also a great collaborative opportunity to work with the social workers if patients are choosing to follow certain doctors and may need to rely on public transit or other transportation services.

- An audience member suggested that it is apparent how costs for dialysis treatment and paratransit have increased for patients. He also noted that individuals taking paratransit after dialysis treatment might not be the appropriate mode of transportation. Lastly, he appreciated and reemphasized some of the points that Tom Roberts made in his presentation.
- The City of Hayward has a number of options for patients to access for dialysis treatment including East Bay Paratransit and subsidized taxi service. Patients are aware that East Bay Paratransit is just one of their options and they are able to exercise their options. Many times patients with recurring medical appointments will schedule their trips in advance with the shared ride service and then schedule a taxi for the return trip since they don't know how long their appointment will last and how they will feel after their dialysis treatment. Having these options has made the costs for these trips more affordable for patients and the city based paratransit program. However it is still difficult for some patients to get transportation for the early morning or late afternoon appointments. Per trip cost is approximately \$15.00 to \$22.00.
- Although clients are only paying roughly \$4.00 per trip it is still hundreds of thousands of dollars of taxpayer funds that are being used for this purpose. This is a business decision and DaVita and other dialysis services are a part of larger corporations that make profit and can seemingly afford to pay for their clients' transportation costs. The focus should be less on using public dollars and making it the clients' responsibilities and more about making the private corporation figure out their transportation issues.
- Do doctors have practice privileges at different dialysis centers? Yes, doctors may have practice privileges at more than one hospital and at several dialysis centers. It may be hectic for the doctors but it is definitely doable.

- Many other countries have a higher percentage of their patients doing home dialysis while the United States has only roughly 4%. However in other countries dialysis is only offered to those who are healthier and have a longer life span whereas in the United States dialysis is offered to anyone despite age. Home dialysis gives patients more power to take care of themselves and the outcomes are much better. It may even have a similar outcome to those with a transplant.
- Why is home dialysis not offered as an option for Medi-Cal? Home dialysis is offered as an option for all patients within the first week of dialysis. Patients denying home dialysis treatment may have been due to several factors including fear of the treatment being done without a professional, the desire to not have the equipment at home, etc. The government supports in-home dialysis because it costs \$54,000 per year per patient whereas in center dialysis costs about \$71,000.
- In other countries there may not be an abundance of dialysis centers available so patients that live too far away are forced to do in home dialysis as a result.
- Why should local taxpayers subsidize 90% of the dialysis rides that are provided by East Bay Paratransit? For many dialysis patients on a fixed income, transportation to dialysis centers is not affordable. As a social worker, it is our responsibility as a community to take care of people who are poor and disabled. However, I do not know why DaVita Dialysis is not paying for patients' transportation costs despite paying other taxes.
- Is there a process for individuals who get into altercations while using your transportation service and how many occur? There are very few instances where a patient gets kicked off their transportation service to dialysis. It is very rare.
- How can we improve transportation services to dialysis centers and other medical facilities? This question will be addressed in later discussions with PAPCO and ParaTAC members.
- The ride home from dialysis is not appropriate on paratransit or other forms of public transportation as it is a shared service and the patient needs to get home directly. Our agency in Marin County has also tried to group and schedule dialysis appointments together so that patients can be transported

together but this has not worked. There have also been instances where patients will be kept at dialysis centers overnight so that paratransit can pick them up the following morning (instead of being transported in a shuttle bus). Generally, it is tough to work with dialysis centers in Marin County.

- NorCal Ambulance does receive a lot of requests for ambulance transport post dialysis treatment because patients are so vulnerable and are not comfortable on paratransit but also because there is no assistance with stairs and getting back into the home (paratransit is curb to curb service only). Sometimes a patient will have a family member with them on the ambulance but those conditions don't necessarily qualify a patient for ambulance criteria. Home dialysis seems like a good solution.
- The Center for Elders' Independence (CEI) currently has about 1,000 participants, 10% of which are receiving dialysis treatment, which is outsourced to East Bay Paratransit and MV Transportation despite having their own vehicles for transportation to and from their programs. Is the County looking for additional transportation providers for dialysis and if so, what is the process? The Alameda County Transportation Commission is not in the business of contracting out for dialysis services; however East Bay Paratransit does have a contract to provide transportation for this purpose.
- A solution may be to contact every agency and organization in the private and nonprofit sector that has available vehicles and find out if they want to get into the dialysis transportation business. Someone has to pull these resources together and it might be helpful if the Bay Area reinstituted Consolidated Transportation Service Agencies (CTSAs).
- One of the issues is overall healthcare costs. The United States as a country has determined that dialysis treatments will be paid for by taxpayers' dollars so corporations and other private businesses should not be profiting from this industry. Why are taxpayers not only paying for the service but the transportation to that service as well? Furthermore, transportation costs should be added to the \$71,000 cost for in-center dialysis treatment so that we can see the overall taxpayer cost for this service. It should be considered a medical cost because in order to get to

that medical service, you have to have transportation. It seems like we are not providing good enough information to people who are making the decisions about costs as well as to the clients who need to make decisions about what services they need and can afford. This issue needs to be brought to a national level as it is not unique to the Bay Area.

- LAVTA recently set up a paratransit program that contracts with individual drivers and their own vehicles for rides. This program also offers accessible vehicles for individuals needing them. This is a new model for paratransit trips that is more direct and comfortable for riders.
- Tom Roberts makes a good point when we consider who is actually responsible for paying for these dialysis trips. Currently the taxpayers are paying for everything. He noted that it is okay for government agencies to purchase services from companies that make profits. However if dialysis corporations, whose shareholder's stock prices are increasing exponentially, are profiting greatly from these services, then maybe they can afford to make less profit to cover their clients' transportation costs.
- The issue around who should pay for the oldest and most disabled people in the country is very complex. However, DaVita Dialysis does have healthy profits and should pay for clients' transportation costs or be taxed accordingly. And it wouldn't be efficient if each clinic had their own vehicles providing transportation.
- The medical costs should be bundled and transportation costs should be included in the reimbursement for Medicare.
- For the people who live outside of the paratransit service area and are unable to access transportation, is it possible to involve private non-emergency medical service caregivers in the coordination of transportation to dialysis centers? These individuals need more coordination of care.
- As a non-emergency medical transportation provider, we have to have the rides preauthorized and the treatment authorization request has to be sent to Medi-Cal or Contra Costa Health Plan. That individual has to meet certain criteria to be authorized for that ride. At times there is gray area that these service providers

look for that will deem an individual ineligible for transportation even though they have been using the service for years.

- The larger issue here is centered on aging in place. In 1992, it may have been cheaper to relocate an individual and buy them a house closer to available services than to transport them to and from dialysis appointments farther away. Ideally, we would like to have individuals age and get the treatment they need in their own homes.
- This is a bigger medical issue. For example, in Pleasanton Kaiser decided to move its medical center to a whole different county. Unfortunately, paratransit is often defined by counties and this makes it harder to schedule rides for clients' regional medical trips.
- Initially after subscriptions trips in Napa County were eliminated from the local dialysis center, staff members were not happy, however, after some time Napa County representatives shared a list of other transportation providers available for transporting dialysis patients. Starting July 1st of that year, there were vans from various transportation companies parked outside the local dialysis center. It is still unknown who the new transportation providers really are, how they are being paid and ultimately how clients are making their transportation arrangements.
- A concern regarding this model is that the smaller dialysis centers with fewer patients may no longer be cost effective and may need to shut down. It is unknown whether or not this is happening.
- Due to the rigorous dialysis treatment patients receive, they may be more susceptible to getting sick from other passengers who may be riding along with them on a paratransit trip that is a shared ride. This can be a major concern. However, dialysis patients are also sitting in a room with 30+ other people while they are going through their treatment. The risk with this service is assumed.
- There are also other clients, non-dialysis patients, using paratransit that are not getting the rides that they need. This is a larger transportation capacity issue.
- Audience members expressed interest in hearing more about what happened in Napa County when subscriptions trips were

eliminated. Did clients continue scheduling paratransit trips without the convenience of subscription trips? Did the dialysis centers really contract out for that transportation service and are they paying for it? Did the dialysis centers just provide a list of transportation options to their clients and are now expecting clients to pay more out of pocket for their transportation? More information regarding cost sharing models was requested.

- Tom Roberts shared more information on what happened when subscription trips were eliminated in Santa Barbara. He noted that program based transportation providers were forced to come together to look at cost sharing solutions which allowed the taxpayer money that was intended for ADA paratransit to provide more ADA paratransit service. This prevented the paratransit service from collapsing onto itself. Furthermore, after the ADA passed in 1990 the cost for providing paratransit in Santa Barbara was only \$100,000 because a system was previously built that was almost 100% ADA compliant. This allowed for a cost sharing system to be built that was bigger than any one entity could build on their own.

4. Wrap Up

Richard Weiner thanked the panelists and audience members for attending the workshop on dialysis transportation challenges. He noted that there will be a post-workshop survey for attendees to provide feedback on any aspect of the workshop. Lastly, he noted that PAPCO and ParaTAC members will be debriefing the workshop and discussing strategies at their next respective meetings.

Alameda County City-Based Paratransit Services Application Form

Please use this application if you are a resident of: *Alameda, Albany, Berkeley, Castro Valley, Emeryville, Fremont, Hayward, Newark, Oakland, Piedmont, Pleasanton, San Lorenzo, San Leandro or Sunol*. Upon receipt of this form, the program may contact you to submit additional information. ADA paratransit service operators (East Bay Paratransit, Union City Paratransit & Wheels Dial-A-Ride) require a separate application process. Please return this application to the paratransit program to which you are applying. For more information about specific programs, please refer to the Access Alameda brochure, www.AccessAlameda.org, or call 1-866-901-7272.

Name: _____
Last Name First Name Middle Initial

Daytime Phone: (____) _____ **Evening Phone:** (____) _____

Cell: (____) _____ **TDD/TTY:** (____) _____ **Email:** _____

Home Address: _____
Street Address Apt. # City Zip Code

Name of Housing Facility (if applicable): _____

Birth Date: ____/____/____ **Male** ☐ **Female** ☐
Month Day Year

Do you manage your own affairs and deal with your own mail? Yes ☐ No ☐

If "No", to whom should important correspondence be mailed?

Name: _____ **Relationship:** _____

Daytime phone: (____) _____ **Cell or Evening phone:** (____) _____

Email: _____

Mailing Address: _____
(if different from above) Street Address or PO Box Apt. # City State Zip Code

1. How do you currently travel to your most frequent destinations? (Check all that apply)
☐ ADA Paratransit (i.e. East Bay Paratransit, Wheels Dial-A-Ride, Union City Paratransit)
☐ Drive myself ☐ Someone drives me ☐ Buses/BART ☐ Taxi
☐ Other: _____

2. Have you been certified as eligible for rides with an ADA paratransit service?
(i.e. East Bay Paratransit, Wheels Dial-A-Ride, Union City Paratransit)
☐ Fully eligible ☐ Conditionally eligible **Rider Identification #:** _____
☐ Not eligible/Denied ☐ Have not applied ☐ Don't know

3. Do you use any of the following mobility aids or specialized equipment?
☐ Cane ☐ White Cane ☐ Walker
☐ Manual Wheelchair ☐ Power Wheelchair ☐ Power Scooter
☐ Service Animal ☐ Portable Oxygen Tank ☐ Other: _____

4. Do you need a wheelchair lift to get in and out of a vehicle? ☐ Yes ☐ No ☐ Don't know

5. Do you typically travel with assistance from another person (other than driver)? ☐ Yes ☐ No

6. Please describe your disability or disabling health condition and explain how this condition prevents you from using public transit (i.e. buses or BART):

7. Is the above condition you describe: ☐ Permanent ☐ Temporary until: _____

8. Emergency Contact Person: _____

Relationship to you: _____ Daytime phone: (____) _____

Cell phone: (____) _____ Evening phone: (____) _____

9. Are you on any of the following forms of income/benefit assistance? (check all that apply)

- ☐ Supplemental Security Income (SSI) ☐ Cash Assistance Program for Immigrants (CAPI)
☐ Medi-Cal; if yes, #: _____ ☐ CalWorks ☐ General Assistance (GA)

10. Gross *Individual* Monthly Income: _____

11. Gross *Household* Monthly Income: _____ # of people in household: _____

12. What is your living arrangement? ☐ Live alone ☐ Live w/ spouse/partner
☐ Live with adult children ☐ Live in a skilled nursing facility/nursing home
☐ Live in assisted living/residential care home ☐ Other: _____

13. What is your race/ethnicity? ☐ African American ☐ Asian/Pacific Islander
☐ Caucasian ☐ Hispanic/Latino ☐ Native American
☐ Other: _____

14. What language(s) do you speak? Preferred Language: _____

Other Language(s): _____

15. If you need future information provided to you in an accessible format, please check which format you prefer: ☐ Large Print ☐ Audiotape ☐ Braille ☐ CD/Electronic File

I certify that the information in this application is true and correct. I understand that knowingly falsifying information will result in denial of service. I give the City permission to contact me about my paratransit service experience and to verify my enrollment with East Bay Paratransit, Wheels Dial-A-Ride or Union City Paratransit. I understand that my application information will be kept confidential; only information required to provide service or verify service quality will be disclosed under any circumstances.

Applicant's Signature: _____ Date: _____

Person who assisted you with application/Phone #: _____

Alameda County City-Based Paratransit Services Medical Statement Form

This form must be completed if the applicant **does not meet the "Senior" age eligibility requirement** (see pages 2 & 3 of application cover sheet) of the city-operated paratransit service for which he/she is applying. For more information, please call your city's paratransit program or 1-866-901-7272.

Applicant's Name: _____ Birthdate: _____

Address: _____

Dear Physician, Social Worker or Health Care Professional:

The above named person is applying for the paratransit services in the city where he or she resides. In order to determine whether this applicant is eligible for paratransit services, applicant must provide verification that he/she is unable to utilize public transit services independently due to a disability/disabling health condition. All information provided below is confidential and is used for the sole purpose of establishing eligibility for paratransit services. Please help us determine the eligibility status of this individual by checking and/or completing all of the items below that apply to applicant. Please return this form to the applicant to submit with his/her paratransit application. Thank you.

1. Please describe the applicant's disability or disabling health condition that prevents use of public transit (i.e. buses and/or BART):

2. Applicant's condition is: ☐ Permanent ☐ Temporary until _____

3. Due to the conditions noted above, applicant is unable to use public transit services because he/she:

- A. _____ Cannot walk or travel in a wheelchair or scooter to or from a bus or train stop without the help of another person
- B. _____ Cannot board or get off a bus or train without the help of someone else
- C. _____ Cannot wait outside by him/herself for a bus or train to arrive
- D. _____ Cannot stand and maintain balance on a moving public transit vehicle
- E. _____ Cannot see, read and/or comprehend information signs, schedules, maps, etc.
- F. _____ Cannot hear and/or comprehend verbal information given by public transit personnel
- G. _____ Other reason(s): _____

4. Are paratransit services needed for applicant to obtain life-sustaining treatment? ☐ Yes ☐ No
(i.e. dialysis, chemotherapy, radiation therapy, etc.)

PRACTITIONER'S STATEMENT: *I hereby state that the information provided above is correct.*

Practitioner's Name: _____
(Print/Type) (Signature)

Date: _____ Discipline: ☐ Physician ☐ Nurse ☐ Social Worker
☐ Other Practitioner (describe): _____

Agency/Organization Affiliation: _____

Address: _____

Telephone #: _____ Fax #: _____ Email: _____

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Paratransit Outreach Calendar for September through November 2015

8.3

1111 Broadway, Suite 800, Oakland, CA 94607

• 510.208.7400

• www.AlamedaCTC.org

Date	Event Name	Location	Time
9/17/15	USOAC Healthy Living Festival	Oakland Zoo, 9777 Golf Links Road, Oakland, CA 94605	8:00 a.m. – 2:00 p.m.
10/3/15	Senior Info Fair	Dublin Senior Center, 7600 Amador Valley Boulevard, Dublin, CA 94568	10:00 a.m. – 2:00 p.m.
10/6/15	Newark Senior Center Senior Health Fair	Silliman Activity Center, 6800 Mowry Avenue, Newark, CA 94560	9:00 a.m. – 12:00 p.m.

For more information about outreach events or to sign up to attend,
please call Krystle Pasco at (510) 208-7467.

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