Paratransit Advisory and Planning Committee Meeting Agenda
Monday, November 18, 2019, 1:30 p.m.

Chair:	Sylvia Stadmire	Staff Liaison:	Krystle Pasco, Kate Lefkowitz
Vice Chair:	Sandra Johnson	Public Meeting Coordinator:	Angie Ayers

1. Call to Order

2. Roll Call

3. Public Comment

4. Consent Calendar   Page/Action

4.1. Approve the September 23, 2019 PAPCO Meeting Minutes   1   A

4.2. Receive the FY 2019-20 PAPCO Meeting Calendar   7   I

4.3. Receive the PAPCO Roster   9   I

4.4. Receive the Paratransit Outreach Calendar   11   I

5. Paratransit Programs and Projects

5.1. FY 2020-21 Implementation Guidelines and Performance Measures Update   13   I

5.2. Receive East Bay Paratransit Report (Verbal)   I

5.3. Receive Livermore Amador Valley Transit Authority (LAVTA) Paratransit Program Report (Verbal)   I

5.4. Mobility Management – Dialysis Transportation: The Intersection of Transportation and Healthcare   35   I

6. Committee and Transit Reports

   6.1. Independent Watchdog Committee (IWC) (Verbal)   I

   6.2. East Bay Paratransit Service Review Advisory Committee   I
       (SRAC) (Verbal)

   6.3. Other ADA and Transit Advisory Committees (Verbal)   I

7. Member Reports

8. Staff Reports

9. Adjournment

Next Joint PAPCO and ParaTAC Meeting: February 24, 2020
Next PAPCO Meeting: March 23, 2020

Notes:
- All items on the agenda are subject to action and/or change by the Committee.
- To comment on an item not on the agenda (3-minute limit), submit a speaker card to the clerk.
- Call 510.208.7450 (Voice) or 1.800.855.7100 (TTY) five days in advance to request a sign-language interpreter.
- If information is needed in another language, contact 510.208.7400. Hard copies available only by request.
- Call 510.208.7400 48 hours in advance to request accommodation or assistance at this meeting.
- Meeting agendas and staff reports are available on the [website calendar](#).
- Alameda CTC is located near 12th St. Oakland City Center BART station and AC Transit bus lines. [Directions and parking information](#) are available online.

Alameda CTC Schedule of Upcoming Meetings for November 2019 through January 2020

Commission and Committee Meetings

Time	Description	Date
2:00 p.m.	Alameda CTC Commission Meeting	December 5, 2019 January 23, 2020
9:00 a.m.	Finance and Administration Committee (FAC)	
9:30 a.m.	I-680 Sunol Smart Carpool Lane Joint Powers Authority (I-680 JPA)	
10:00 a.m.	I-580 Express Lane Policy Committee (I-580 PC)	January 13, 2020
10:30 a.m.	Planning, Policy and Legislation Committee (PPLC)	
12:00 p.m.	Programs and Projects Committee (PPC)	

Advisory Committee Meetings

Time	Description	Date
5:30 p.m.	Bicycle and Pedestrian Advisory Committee (BPAC)	November 21, 2019
1:30 p.m.	Alameda County Technical Advisory Committee (ACTAC)	January 9, 2020
5:30 p.m.	Independent Watchdog Committee (IWC)	January 13, 2020
9:30 a.m.	Paratransit Technical Advisory Committee (ParaTAC)	January 14, 2020

All meetings are held at Alameda CTC offices located at 1111 Broadway, Suite 800, Oakland, CA 94607. Meeting materials, directions and parking information are all available on the Alameda CTC website.

Commission Chair
Supervisor Richard Valle, District 2

Commission Vice Chair
Mayor Pauline Cutter,
City of San Leandro

AC Transit
Board Vice President Elsa Ortiz

Alameda County
Supervisor Scott Haggerty, District 1
Supervisor Wilma Chan, District 3
Supervisor Nate Miley, District 4
Supervisor Keith Carson, District 5

BART
Vice President Rebecca Saltzman

City of Alameda
Mayor Marilyn Ezzy Ashcraft

City of Albany
Mayor Rochelle Nason

City of Berkeley
Mayor Jesse Arreguin

City of Dublin
Mayor David Haubert

City of Emeryville
Councilmember John Bauters

City of Fremont
Mayor Lily Mei

City of Hayward
Mayor Barbara Halliday

City of Livermore
Mayor John Marchand

City of Newark
Councilmember Luis Freitas

City of Oakland
Councilmember At-Large
Rebecca Kaplan
Councilmember Sheng Thao

City of Piedmont
Mayor Robert McBain

City of Pleasanton
Mayor Jerry Thorne

City of Union City
Mayor Carol Dutra-Vernaci

Executive Director
Arthur L. Dao

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Paratransit Advisory and Planning Committee
Meeting Minutes
Monday, September 23, 2019, 1:30 p.m.

4.1

1111 Broadway, Suite 800, Oakland, CA 94607   •   510.208.7400   •   www.AlamedaCTC.org

1. **Call to Order**
   Sylvia Stadmire, PAPCO Chair, called the meeting to order at
   1:30 p.m.

2. **Roll Call**
   A roll call was conducted and all members were present with the
   exception of Larry Bunn, Bob Coomber, Carolyn Orr, Peggy Patterson,
   Carmen Rivera-Hendrickson, Will Scott, Linda Smith, Cimberly Tamura
   and Hale Zukas. A quorum was not present and the Chair moved item
   5.1 before item 4.

   Subsequent to the roll call:
   Hale Zukas arrived during item 5.1.

3. **Public Comment**
   Shawn Costello made a public comment about the 2-door versus the
   3-door notification on the BART station screens. Michelle Rousey and
   Herb Hastings explained that the legacy BART cars have two doors for
   riders to enter and the new cars have three doors. It was noted that
   the third door lines are indicated on the platform.

   Kevin Barranti asked if there is a method to contact the BART train
   operator if a situation arises. Herb Hastings stated that intercoms are
   located on both ends of BART cars.

4. **Approval of Consent Calendar**
   (This item was presented after item 5.1)

   4.1. Approve the June 24, 2019 PAPCO Meeting Minutes
   4.2. Receive the FY 2019-20 PAPCO Meeting Calendar
   4.3. Receive the PAPCO Roster
   4.4. Receive the Paratransit Outreach Calendar

Herb Hastings moved to approve the consent calendar. Esther Waltz seconded the motion. The motion passed with the following votes:

Yes: *Barranti, Behrens, Costello, Hastings, Johnson, Lewis, Ross, Rousey, Stadmire, Waltz, Zukas*

No: *None*

Abstain: *None*

Absent: *Bunn, Coomber, Orr, Patterson, Rivera-Hendrickson, Scott, Smith, Tamura*

5. Paratransit Programs and Projects

5.1. Receive the Final 2018 Comprehensive Investment Plan (CIP) Paratransit Discretionary Grant Program Progress Report
(This item was presented before item 4)

Naomi Armenta presented this item. Ms. Armenta noted that this is the last report on the 2018 Comprehensive Investment Plan (CIP) Paratransit Discretionary Grant Program, which ended on June 30, 2019. She recapped that in 2016, a Call for Projects for discretionary funding was issued through the agency's CIP process and nine applicants submitted paratransit applications. In March 2017, staff and PAPCO evaluated the applications and recommended approval of all nine grants. The 2018 CIP Paratransit Discretionary Grant Program recommendation was approved by the Commission in April 2017.

Tony Lewis asked why the Center for Independent Living's (CIL) target for non-seniors with disabilities was not met. She stated that seniors, youth and people with vision impairments were in different categories and CIL stated that most adults already know how to use transit.

Tony Lewis asked why Eden I&R's target for calls from seniors was very low. Ms. Armenta suggested that Eden I&R had too many targets, which include targets that can be consolidated like seniors served and calls from seniors, and they've recently corrected this.

Michelle Rousey commented that using 2-1-1 for housing is very difficult.

Hale Zukas commented that it is difficult to believe that all of CIL's clients know how to use transit.

This item is for information only.

5.2. AC Transit RealTime Presentation

Chantal Reynolds provided an update on AC Transit RealTime (ACT RealTime). Ms. Reynolds stated that ACT RealTime reports the location of AC Transit buses every 15 seconds. Her presentation covered how ACT RealTime works, why AC Transit introduced the new real-time system, how to access the data, and how to find bus stop identification numbers. Ms. Reynolds concluded the presentation by walking through the steps with the Committee.

Shawn Costello asked why the texting feature has a phone number with only five digits. An Easy Does It staff member said the 5-digit number is for texting only. She also said that if you do not have your bus stop identification number you can request a list.

Hale Zukas asked how many bus stops have signs. Ms. Reynolds said that she will provide Krystle with this information.

Tony Lewis asked when the ACT RealTime mobile app will be available. Ms. Reynolds noted that there is no mobile app available at this time but the website is very mobile-friendly.

Yvonne Behrens asked if you do not have a computer how would you get the information. Ms. Reynolds said the website may be saved to your phone.

Tony Lewis suggested that the folks generating the platform work with Lighthouse for the Blind to make the platform more efficient for people with visual impairments.

Kristen Spencer said if you say "Hey, Google" on your smart phone or home device it will search the website with the voice command.

Shawn Costello commented that voice activation software may not work well for people with voice issues.

Michelle Rousey stated her concern with the platform is that AC Transit may be repeating the work already done by Google Maps. Ms. Armenta stated that the data that Google Maps uses comes from the transit agencies.

Herb Hastings suggested involving East Bay Paratransit's SRAC as a testing group.

Hale Zukas asked if the bus stop identification numbers can be put on the bus stop poles in Braille.

This item is for information only.

5.3. Mobility Management – Innovations in Volunteer Transportation: Examples of Technology Enhancing the Performance of a Volunteer Driver Program

Naomi Armenta presented this item. Ms. Armenta stated that the item in the packet was generated by the Massachusetts Mobility Management Center. Ms. Armenta reviewed the five areas in which technology can support a volunteer driver program.

This item is for information only.

6. Committee and Transit Reports
7.1. Independent Watchdog Committee (IWC)

Krystle Pasco presented this item. Ms. Pasco stated that the IWC met on Monday, July 8, 2019 and a public hearing was held for the draft IWC 17th Annual Report to the Public. There were no public comments. The Committee approved the draft annual report and outreach costs. The Committee re-elected Steve Jones as their Chair and Murphy McCalley as the Vice Chair. The next IWC meeting is November 18, 2019.

7.2. East Bay Paratransit Service Review Advisory Committee (SRAC)
Michelle Rousey stated that SRAC met on August 6, 2019. The Committee re-elected Arnold Brillinger as Chair and Don Queen as Vice Chair. She said they discussed the emergency operation plan and the toolkit. The next SRAC meeting is scheduled for Tuesday, October 1, 2019.

7.3. Other ADA and Transit Advisory Committees
Herb Hastings reported that the BART Accessibility Task Force will meet on Thursday, September 26, 2019. He said that BART will have transitioned from paper tickets to the Clipper Card by the beginning of 2020.

7. Member Reports
Kristen Spencer said that the United Seniors of Oakland and Alameda County's (USOAC) Healthy Living Festival was very well attended.

Shawn Costello said he chaired his second Human Services Commission in July. The Committee approved over $200,000 in grants for non-profits in Dublin. The next meeting is in November.

Michelle Rousey said the Healthy Living Festival at the Oakland Zoo was great. She also said that the Alameda County IHSS is actively looking for members.

Herb Hastings said he received a notification from CRIL to test the new Uber wheelchair accessible vehicles (WAVs).

Andrea Mok said that LIFE ElderCare is currently booking rides on Uber WAV with 100% success.

Shawn Fong stated that Lyft is starting to provide WAV vehicles in San Francisco.

Sandra Johnson also stated that she attended the USOAC Healthy Living Festival and it was a great success. Ms. Johnson stated that she is also a member of the IHSS.

Shawn Fong gave a shout out for the USOAC Healthy Living Festival. She also announced that AC Transit is in the process of doing a planning effort to redesign the service in the Newark/Fremont area and may be expanding the Flex Service.

Yvonne Behrens requested moving the November PAPCO meeting from November 25th to November 18th because of the holiday. Ms. Pasco stated that she'll check Alameda CTC's meeting schedule and let the Committee know if November 18th is a good date.

8. Staff Reports

Kate Lefkowitz gave an update on SB 1376 and the efforts of the California Public Utilities Commission on ensuring that the Transportation Network Companies (TNCs) are accessible for everyone.

Naomi Armenta gave an update on the new Access Alameda website. She also reviewed the potential topics for the February 24, 2020 Joint PAPCO and ParaTAC meeting.

9. Adjournment

The meeting adjourned at 3:00 p.m. The next PAPCO meeting is scheduled for November 25, 2019 at 1:30 p.m. at the Alameda CTC offices located at 1111 Broadway, Suite 800 in Oakland.

PAPCO meetings occur on the fourth Monday of the month from 1:30-3:30 p.m. Joint PAPCO and ParaTAC meetings also occur on the fourth Monday of the month from 1:30-3:30 p.m. Meetings are held at the Alameda CTC offices in downtown Oakland. Note that meetings and items on this calendar are subject to change; refer to www.AlamedaCTC.org for up-to-date information.

Categories	September 23, 2019 PAPCO	November 18, 2019 PAPCO	February 24, 2020 Joint PAPCO and ParaTAC	March 23, 2020 PAPCO	April 27-28, 2020 Subcommittees	June 22, 2020 PAPCO
Planning and Policy		• Implementation Guidelines and Performance Measures Update	• Topic: TBD		• Paratransit Program Plan Review Subcommittees	• Approve FY 2020-21 Paratransit DLD Program Plans Recommendation
Programs and Grants Review	• Receive Final 2018 CIP Paratransit Program Progress Reports	• Receive East Bay Paratransit Report • Receive LAVTA Report		• Receive 2020 CIP Paratransit Program Progress Reports		• 2020 CIP Paratransit Program Presentations
Committee Development	• AC Transit RealTime Presentation			• Request Volunteers for Program Plan Review Subcommittees		• Elect FY 2020-21 PAPCO Officers • Approve FY 2020-21 PAPCO Meeting Calendar

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Alameda County Transportation Commission
Paratransit Advisory and Planning Committee
Roster - Fiscal Year 2019-2020

	Title	Last	First	City	Appointed By	Term Began	Re apptmt.	Term Expires
1	Ms.	Stadmire, Chair	Sylvia J.	Oakland	**Alameda County Supervisor Wilma Chan, D-3**	**Sep-07**	**Jul-19**	**Jul-21**
2	Ms.	Johnson, Vice Chair	Sandra	San Leandro	**Alameda County Supervisor Nate Miley, D-4**	**Sep-10**	**Jul-19**	**Jul-21**
3	Mr.	Barranti	Kevin	Fremont	City of Fremont Mayor Lily Mei	Feb-16		**Feb-18**
4	Ms.	Behrens	Yvonne	Emeryville	City of Emeryville Councilmember John Bauters	Mar-18	Jan-19	**Jan-21**
5	Mr.	Bunn	Larry	Union City	Union City Transit Steve Adams, Transit Manager	Jun-06	Feb-19	**Feb-21**
6	Mr.	Coomber	Robert	Livermore	City of Livermore Mayor John Marchand	May-17	May-19	**May-21**
7	Mr.	Costello	Shawn	Dublin	City of Dublin Mayor David Haubert	Sep-08	Jun-16	**Jun-18**
8	Mr.	Hastings	Herb	Dublin	Alameda County Supervisor Scott Haggerty, D-1	Mar-07	Oct-18	**Oct-20**
9	Mr.	Lewis	Anthony	Alameda	City of Alameda Mayor Marilyn Ezzy Ashcraft	Jul-18		**Jul-20**
10	Rev.	Orr	Carolyn M.	Oakland	City of Oakland, Councilmember At-Large Rebecca Kaplan	Oct-05	Jan-14	**Jan-16**
11	Rev.	Patterson	Margaret	Albany	City of Albany Mayor Rochelle Nason	Feb-18		**Feb-20**
12	Ms.	Rivera-Hendrickson	Carmen	Pleasanton	City of Pleasanton Mayor Jerry Thorne	Sep-09	Apr-19	**Apr-21**

	Title	Last	First	City	Appointed By	Term Began	Re apptmt.	Term Expires
13	Ms.	Ross	Christine	Hayward	Alameda County Supervisor Richard Valle, D-2 Pending Commission Approval	Oct-17		**Oct-19**
14	Ms.	Rousey	Michelle	Oakland	BART President Rebecca Saltzman	May-10	Jan-16	**Jan-18**
15	Mr.	Scott	Will	Berkeley	Alameda County Supervisor Keith Carson, D-5	Mar-10	Jun-16	**Jun-18**
16	Ms.	Smith	Linda	Berkeley	City of Berkeley Mayor Jesse Arreguin	Apr-16		**Apr-18**
17	Ms.	Tamura	Cimberly	San Leandro	City of San Leandro Mayor Pauline Cutter	Dec-15	Mar-19	**Mar-21**
18	Ms.	Waltz	Esther Ann	Livermore	LAVTA Executive Director Michael Tree	Feb-11	Jun-16	**Jun-18**
19	Mr.	Zukas	Hale	Berkeley	A. C. Transit Board Vice President Elsa Ortiz	Aug-02	Feb-16	**Feb-18**
20	**Vacancy**				**City of Hayward Mayor Barbara Halliday**			
21	**Vacancy**				**City of Newark Councilmember Luis Freitas**			
22	**Vacancy**				**City of Piedmont Mayor Robert McBain**			
23	**Vacancy**				**City of Union City Mayor Carol Dutra-Vernaci**			

Upcoming Events

Date	Event Name	Location	Time
3/14/20	Transition Information Faire**	College of Alameda, 555 Ralph Appezzato Memorial Parkway, Alameda, CA 94501	9:30 a.m. – 3:00 p.m.
Mar 2020	Transit Fair**	Pleasanton Senior Center, 5353 Sunol Boulevard, Pleasanton, CA 94566	10:00 a.m. – 1:00 p.m.
Apr 2020	Senior Wellness Fair	South Berkeley Senior Center, 2939 Ellis Street, Berkeley, CA 94703	10:00 a.m. – 1:00 p.m.
Apr 2020	Senior Resource Fair	Albany Senior Center, 846 Masonic Avenue, Albany, CA 94706	10:00 a.m. – 1:00 p.m.
May 2020	Senior Health and Wellness Resource Fair**	Kenneth C. Aitken Senior and Community Center, 17800 Redwood Road, Castro Valley, CA 94546	9:00 a.m. – 1:00 p.m.
May 2020	Older Americans Month Celebration**	Oakland City Hall and Frank Ogawa Plaza, 1 Frank H. Ogawa Plaza, Oakland, CA 94612	10:00 a.m. – 2:00 p.m.
May 2020	Age Friendly Health Expo**	Fremont Multi-Service Senior Center and Central Park, 40086 Paseo Padre Parkway, Fremont, CA 94538	9:00 a.m. – 1:00 p.m.
May 2020	USOAC Annual Convention	St. Columba Church, 6401 San Pablo Avenue, Oakland, CA 94608	10:00 a.m. – 3:00 p.m.
May 2020	Open House and Resource Fair	Mastick Senior Center, 1155 Santa Clara Avenue, Alameda, CA 94501	3:00 p.m. – 6:00 p.m.

Date	Event Name	Location	Time
Jun 2020	Transportation Workshop	Emeryville Senior Center, 4321 Salem Street, Emeryville, CA 94608	9:30 a.m. – 11:30 a.m.

Past Events

Date	Event Name	Location	Time
9/19/19	Healthy Living Festival**	Oakland Zoo, 9777 Golf Links Road, Oakland, CA 94605	8:00 a.m. – 2:00 p.m.
10/18/19	Senior Resource Fair***	San Leandro Senior Community Center, 13909 East 14th Street, San Leandro, CA 94578	10:00 a.m. – 1:00 p.m.
Oct 2019	Senior Health Faire	Silliman Activity Center, 6800 Mowry Avenue, Newark, CA 94560	9:00 a.m. – 12:00 p.m.
Oct 2019	Senior Info Fair	Dublin Senior Center, 7600 Amador Valley Boulevard, Dublin, CA 94568	10:00 a.m. – 2:00 p.m.

**Alameda CTC's Paratransit Coordination Team will be distributing materials at an information table at events marked with asterisks (**).

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

DATE:	November 12, 2019
TO:	Paratransit Advisory and Planning Committee
FROM:	Krystle Pasco, Assistant Program Analyst Kate Lefkowitz, Associate Transportation Planner
SUBJECT:	Implementation Guidelines and Performance Measures – Special Transportation for Seniors and People with Disabilities (Paratransit) Program

Recommendation

PAPCO members will receive an update on the Implementation Guidelines and Performance Measures – Special Transportation for Seniors and People with Disabilities (Paratransit) Program. This item is for information purposes only.

Summary

The Implementation Guidelines for the Special Transportation for Seniors and People with Disabilities (Paratransit) Program are periodically reviewed and updated and the last revision was completed in 2018 for FY 2019-20.

Starting in FY 2016-17, Alameda CTC implemented the use of standardized performance measures for all Measure B and BB funded projects and programs. The current Implementation Guidelines and Performance Measures are included as Attachment 5.1A.

Alameda CTC staff reviewed the Implementation Guidelines and Performance Measures in August 2019 and determined that no revisions were necessary for FY 2020-21. On August 28, 2019, ParaTAC members were informed that there would be no updates to the guidelines and measures and that the current version will remain in place through FY 2020-21.

Background

Implementation Guidelines

The Implementation Guidelines for the Paratransit Program identify the types of services that are eligible to be funded with Alameda County Measure B (2000), Measure BB (2014), and Vehicle Registration Fee (VRF, 2010) Direct Local Distribution (DLD) revenues. The Implementation Guidelines and Performance Measures are incorporated by reference into the Master Program Funding Agreements (MPFAs) and also apply to all paratransit discretionary grant funded programs (e.g., Comprehensive Investment Plan (CIP) Grants).

The eligible service types identified in the Implementation Guidelines include:

- ADA Paratransit
- Same-Day Transportation
- Specialized Accessible Van
- Accessible Shuttle
- Group Trips
- Door-through-Door/Volunteer Driver Service
- Mobility Management and/or Travel Training
- Scholarship/Subsidized Fare Programs
- Meal Delivery Funding Programs
- Capital Expenditures

Performance Measures

The Performance Measures section is organized into similar categories as the Implementation Guidelines and highlights data that is collected through the compliance reports. The data requested is primarily the number of trips (or trainings, meals, etc.) provided and the Measure B/BB cost per unit. This information is meant to provide the Commission with a high-level summary of how Measure B and BB funds are being spent.

Beginning in FY 2018-19, the Performance Measures have included "additional" performance measures collected by staff, in coordination with PAPCO and ParaTAC, through program plan review, grant progress reports, or other means. These measures go beyond the required measures collected for compliance reporting. Members should expect to continue to see the additional performance measures in future grant and program plan review processes.

Fiscal Impact: There is no fiscal impact associated with the requested action.

Attachment:

A. Implementation Guidelines and Performance Measures – Special Transportation for Seniors and People with Disabilities (Paratransit) Program for FY 2019-20.

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Implementation Guidelines and Performance Measures – Special Transportation for Seniors and People with Disabilities (Paratransit) Program

Implementation Guidelines

These guidelines lay out the service types that are eligible to be funded with Alameda County Measure B (2000), Measure BB (2014) and Vehicle Registration Fee (VRF, 2010) revenues under the Special Transportation for Seniors and People with Disabilities (Paratransit) Program. All programs funded partially or in their entirety through these sources, including American with Disabilities Act (ADA)- mandated paratransit services, city-based programs and discretionary grant funded projects, must abide by the following requirements for each type of paratransit service.

Fund recipients are able to select which of these service types are most appropriate for their community to meet the needs of seniors and people with disabilities. Overall, all programs should be designed to enhance quality of life for seniors and people with disabilities by offering accessible, affordable and convenient transportation options to reach major medical facilities, grocery stores and other important travel destinations to meet life needs. Ultimately, the importance of a trip should be determined by the consumer.

The chart below summarizes the eligible service types and the transportation need the service targets. This is followed by more detailed descriptions of each.

Service	Transportation Need Targeted and Service Details
ADA Paratransit[1,2]	Origin-to-destination trips for people with disabilities unable to ride fixed route transit • Pre-scheduled • Accessible
Same-Day Transportation[3]	Curb-to-curb trips using taxis or ride-hailing apps for seniors and/or people with disabilities (usually ADA paratransit certified) • Same day • Accessible vehicles not guaranteed

Service	Transportation Need Targeted and Service Details
Specialized Accessible Van	Origin-to-destination specialized trips for seniors and people with disabilities using lift- or ramp-equipped vehicles • Pre-scheduled & Same Day • Accessible
Accessible Shuttle	Fixed or flex route trips for seniors and people with disabilities possibly able to ride fixed route transit, but who benefit from targeted routes/stops and more individualized service (compared to transit) • Fixed Schedule • Accessible
Group Trips	Round trip or origin-to-destination trips for seniors and people with disabilities • Pre-scheduled/fixed schedule • Usually accessible
Door-through-Door/Volunteer Driver Service	Origin-to-destination trips for seniors and people with disabilities with special needs requiring door-through-door service or escort • Pre-scheduled • Generally not accessible when provided in private cars
Mobility Management and/or Travel Training	Information and referral, service linkage, service coordination, advocacy, and/or individual/group training or travel orientation for seniors and people with disabilities to facilitate use of services
Scholarship/ Subsidized Fare Programs	Financial assistance for seniors and people with disabilities to utilize services
Meal Delivery Funding Programs	Funding for meal delivery for seniors and people with disabilities who cannot travel to congregate meal sites • Programs currently funded by Measure B may continue, but new programs may not be established.
Capital Expenditures[4]	Funding for capital purchases for transportation programs for seniors and people with disabilities • If purchasing vehicles, they should be accessible

[1] *Note on ADA Mandated Paratransit*: Programs mandated by the Americans with Disabilities Act are implemented and administered according to federal guidelines that may supersede these guidelines; however all ADA-mandated programs funded through Measure B and BB or the VRF are subject to the terms of the Master Programs Funding Agreement.

[2] *Interim Service for Consumers Awaiting ADA Certification*: At the request of a health care provider or ADA provider, city-based programs must provide interim service through the programs listed above to consumers awaiting ADA certification. Service must be provided within three business days of receipt of application.

[3] *Note on Transportation Network Companies*: Programs may utilize Transportation Network Companies or TNCs (e.g. Lyft, Uber) that use ride-hailing apps under the guidelines for Same-Day Transportation Services. Other service types are ineligible unless wheelchair accessible service can be provided equitably. Programs should review the Department of Transportation guidance on shared mobility at www.transit.dot.gov/regulations-and-guidance/shared-mobility-frequently-asked-questions. Service changes to utilize TNCs are subject to review by Alameda CTC staff prior to implementation.

[4] *Note on Capital Expenditures*: Any capital expenditures within the eligible service categories must be consistent with the objectives of the Alameda CTC Special Transportation for Seniors and Peoples with Disabilities (Paratransit) Program described above and are subject to review by Alameda CTC staff prior to implementation.

Same-Day Transportation Service Guidelines	
Service Description	Same-day transportation services provide on-demand same-day services utilizing taxis, Transportation Network Companies a.k.a. TNCs (e.g. Lyft, Uber) that use ride-hailing mobile apps, or other new transportation options. Services may be subsidized in different ways including vouchers, scrip, reimbursement, a discount code on an app, call center or website payment, etc.

Taxis provide curb-to-curb service that can be scheduled on a same-day basis. Taxis charge riders on a distance/time basis using a meter. Taxi subsidy programs allow eligible consumers to use taxis at a reduced fare by reimbursing consumers a percentage of the fare or by providing some fare medium, e.g. scrip or vouchers, which can be used to cover a portion of the fare. These programs are intended for situations when consumers cannot make their trip on a pre-scheduled basis.

Transportation Network Companies (e.g. Lyft, Uber) using ride-hailing apps and web-based platforms can also provide a similar service at the discretion of the program sponsor with local consumer input. TNC trip services can incorporate a concierge service.

The availability of accessible vehicles varies by geographical area and provider, but programs should expand availability of accessible vehicles where possible in order to fulfill requests for same-day accessible trips. |
| Eligible Population | Eligible Populations include:

1. People 18 and above with disabilities who are unable to use fixed route services. Cities may, at their discretion, also provide services to consumers with disabilities under the age of 18, and
2. Seniors 80 years or older without proof of a disability. Cities may provide services to consumers who are younger than age 80, but not younger than 70 years old.

Cities may continue to offer "grandfathered" eligibility to program registrants below 70 years old who were enrolled in the program as of FY 2011/12 and have continued to use it regularly, as long as it does not impinge on the City's ability to meet the minimum requirements of the Implementation Guidelines.

Program sponsors may use either ADA eligibility, as established by ADA-mandated providers (incl. East Bay Paratransit, LAVTA, Union City Transit) or the Alameda County City-Based Paratransit Services Medical |

Same-Day Transportation Service Guidelines	
	Statement Form, as proof of disability. Program sponsors may, at their discretion, also offer temporary eligibility due to disability. *ADA-mandated providers that are not also city-based providers (East Bay Paratransit and LAVTA) are not required to provide service to seniors 80 years or older without ADA eligibility.*
Time & Days of Service	Service should be available 24 hours per day/7 days per week, unless a City notifies Alameda CTC staff that providers do not operate 24 hours per day/7 days per week in their jurisdiction.
Fare (Cost to Customer)	Programs must subsidize at least 50% of the fare. Programs can impose a cap on total subsidy per person. This can be accomplished through a maximum subsidy per trip, a limit on the number of vouchers/scrip (or other fare medium) per person, and/or a total monetary subsidy per person per year.
Other	Programs may also use funding to provide incentives to drivers and/or transportation providers to ensure reliable service. Incentives are often utilized to promote accessible service. Planned expenditures on incentives are subject to review by Alameda CTC staff prior to implementation. Programs may utilize Transportation Network Companies (e.g. Lyft, Uber) for these programs but should review the Department of Transportation guidance on shared mobility at www.transit.dot.gov/regulations-and-guidance/shared-mobility-frequently-asked-questions. Program changes to utilize TNC's are subject to review by Alameda CTC staff prior to implementation.

City-based Specialized Accessible Van Service Guidelines	
Service Description	City-based specialized accessible van service provides accessible, door-to-door trips on a pre-scheduled or same-day basis. This service category is not required to be as comprehensive as primary services (i.e. ADA-mandated or Same-Day Transportation Services), but should complement core services in communities where critical needs for accessible or other specialized trips are not being adequately met by the existing primary services. Examples of unmet needs are a taxi or TNC program without accessible vehicles, medical trips for riders with dementia unable to safely take an ADA-mandated trip, or trips

City-based Specialized Accessible Van Service Guidelines	
	outside of the ADA-mandated service area. When possible, a priority for this service should be fulfilling requests for same-day accessible trips.
	Services may be subsidized in different ways as agreed upon by the program sponsor and transportation provider, including vouchers, scrip, reimbursement, a discount code on an app, call center or website payment, etc.
Eligible Population	People 18 and above who are unable to use fixed route, ADA-mandated or same-day transportation services due to disability. Cities may, at their discretion, also provide services to consumers with disabilities under the age of 18.
	Cities may continue to offer "grandfathered" eligibility to "City-based Door-to-Door Service" registrants below 70 years old who have used the program regularly since FY 2011/12, as long as it does not impinge on the City's ability to meet the minimum requirements of the Implementation Guidelines.
	Program sponsors may use either ADA eligibility, as established by ADA-mandated providers (incl. East Bay Paratransit, LAVTA, Union City Transit) or the Alameda County City-Based Paratransit Services Medical Statement Form, as proof of disability. Program sponsors may, at their discretion, also offer temporary eligibility due to disability.
Time & Days of Service	At discretion of program sponsor with local consumer input. When possible, service should be available Monday – Friday between the hours of 8 a.m. and 5 p.m. (excluding holidays), and accept reservations between the hours of 9 a.m. and 5 p.m. Monday – Friday (excluding holidays).
Fare (Cost to Customer)	Fares for pre-scheduled service should not exceed comparable local ADA-mandated or same-day transportation services fares. Higher fares can be charged for "premium" service (e.g. same-day).
Other	Specialized Accessible van programs must demonstrate that they are providing trips at an equal or lower cost to the provider than the ADA-mandated provider on a cost per trip basis, except if providing "premium" service (e.g. same-day). Cost per trip is defined as total transportation cost (from all sources of revenue) during a reporting period divided by the number of one-way trips, including attendant and companion trips, provided during the period.

Accessible Shuttle Service Guidelines	
Service Description	Shuttles are accessible vehicles that operate on a fixed, deviated, or flex-fixed route and schedule. They serve common trip origins and destinations visited by eligible consumers, e.g. senior centers, medical facilities, grocery stores, BART and other transit stations, community centers, commercial districts, and post offices. Shuttles should be designed to supplement existing fixed route transit services. Routes should not necessarily be designed for fast travel, but to get as close as possible to destinations of interest, such as going into parking lots or up to the front entrance of a senior living facility. Shuttles are often designed to serve active seniors who do not drive but are not ADA paratransit registrants.
Eligible Population	Shuttles should be designed to appeal to older adults, but can be made open to the general public.
Time and Days of Service	At discretion of program sponsor with local consumer input.
Fare (Cost to Customer)	At discretion of program sponsor, but cannot exceed local ADA paratransit fares. Fares may be scaled based on distance.
Cost of Service	By end of the second fiscal year of service, the City's cost per one-way person trip cannot exceed $20, including transportation and direct administrative costs. Cost per trip is defined as total cost (all sources) during a reporting period divided by the number of one-way trips, including attendant and companion trips, provided during period.
Other	Shuttles are required to coordinate with the local fixed route transit provider. Shuttle routes and schedules should be designed with input from the senior and disabled communities to ensure effective design. Any new shuttle plan must be submitted to Alameda CTC staff for review prior to implementation. Deviations and flag stops are permitted at discretion of program sponsor.

Group Trips Service Guidelines	
Service Description	Group trips are round-trip rides for pre-scheduled outings, including shopping trips, recreational events, and community activities. These trips are specifically designed to serve the needs of seniors and people with disabilities and typically originate from a senior center or housing facility, and are generally provided in accessible vans and other vehicle types or combinations thereof.
Eligible Population	At discretion of program sponsor.
Time and Days of Service	Group trips must begin and end on the same day.
Fare (Cost to Customer)	At discretion of program sponsor.
Other	Programs can impose mileage limitations to control program costs.

Door-through-Door/Volunteer Driver Service Guidelines	
Service Description	Volunteer driver services are pre-scheduled, door-through-door services that are typically not accessible. These programs rely on volunteers to drive eligible consumers for critical trip needs, such as medical trips. Programs may use staff to complete intake or fill gaps in service provision. This service meets a key mobility gap by serving more vulnerable populations and should complement existing primary services (i.e. ADA-mandated, City-based Door-to-Door, or Same-Day).

Volunteer driver programs may also have an escort component where volunteers accompany consumers on any service eligible for Alameda CTC funding, when they are unable to travel in a private vehicle. |
Eligible Population	At discretion of program sponsor.
Time and Days of Service	At discretion of program sponsor.
Fare (Cost to Customer)	At discretion of program sponsor.

Door-through-Door/Volunteer Driver Service Guidelines	
Other	Program sponsors can use funds for administrative purposes and/or to pay for volunteer mileage reimbursement purposes (not to exceed Federal General Services Administration (Privately Owned Vehicle) Mileage Reimbursement Rates) or an equivalent financial incentive for volunteers.

Mobility Management and/or Travel Training Program Guidelines	
Service Description	Mobility management services cover a wide range of activities, such as travel training, coordinated services, trip planning, and brokerage. Mobility management activities often include education and outreach which play an important role in ensuring that people use the "right" service for each trip, e.g. using East Bay Paratransit from Fremont to Berkeley for an event, using a taxi voucher for a same-day urgent doctor visit, and scheduling with a group trip service to go grocery shopping. Service types can be categorized as information and referral, service linkage, service coordination, or advocacy. Travel training is short-term, one-on-one or group-based intensive instruction designed to teach people with disabilities and seniors to travel safely and independently on fixed-route public transportation in their community.[1] Travel orientation, also known as transit orientation, is less formal and involved than traditional travel training and explains transportation systems by sharing information about trip planning, schedules, maps, fare systems, mobility devices, new mobility services, and benefits and services. It may be conducted in a group or one-on-one.[2]
Eligible Population	At discretion of program sponsor.
Time and Days of Service	At discretion of program sponsor.
Fare (Cost to Customer)	N/A

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[1] Easter Seals Project ACTION http://www.projectaction.com/glossary-of-disability-and-transit-terms/

[2] Mass.gov https://www.mass.gov/info-details/offering-travel-instruction#what-is-travel-instruction?-

Mobility Management and/or Travel Training Program Guidelines	
Other	For new mobility management and/or travel training programs, to ensure effective program design, a plan with a well-defined set of activities must be submitted to Alameda CTC staff for review prior to implementation.

Scholarship/Subsidized Fare Program Guidelines	
Service Description	Scholarship or Subsidized Fare Programs can subsidize any service eligible for paratransit funding and/or fixed-route transit for paratransit customers who are low-income and can demonstrate financial need.
Eligible Population	Subsidies can be offered to low-income consumers with demonstrated financial need who are currently eligible for an Alameda County ADA-mandated or city-based paratransit program. Low income requirements are at discretion of program sponsors, but the requirement for household income should not exceed 50% AMI (area median income).
Time and Days of Service	N/A
Fare (Cost to Customer)	N/A
Other	Low-income requirements and the means to determine and verify eligibility must be submitted to Alameda CTC staff for review prior to implementation. If program sponsors include subsidized East Bay Paratransit (EBP) tickets in this program, no more than 3% of a program sponsor's Alameda CTC distributed funding may be used for the ticket subsidy. Other services or purposes proposed for scholarship and/or fare subsidy must be submitted to Alameda CTC staff for review prior to implementation.

Meal Delivery Funding Guidelines	
Service Description	Meal Delivery Funding programs provide funding to programs that deliver meals to the homes of individuals who are generally too frail to travel outside to congregate meal sites. Although this provides access to life sustaining needs for seniors and people with disabilities, it is not a direct transportation expense.
Eligible Population	For currently operating programs, at discretion of program sponsor.
Time and Days of Service	For currently operating programs, at discretion of program sponsor.
Fare (Cost to Customer)	For currently operating programs, at discretion of program sponsor.
Other	Currently operating funding programs may continue, but new meal delivery funding programs may not be established.

Capital Expenditures Guidelines	
Description	Capital expenditures are eligible if directly related to the implementation of a program or project within an eligible service category, including but not limited to, purchase of scheduling software, accessible vehicles and equipment, and accessibility improvements at shuttle stops.
Eligible Population	N/A
Time and Days of Service	N/A
Fare (Cost to Customer)	N/A
Other	Capital expenditures are to support the eligible service types included in the Implementation Guidelines and must be consistent with objectives of the Alameda CTC Special Transportation for Seniors and Peoples with Disabilities (Paratransit) Program. If purchasing vehicles, they should be accessible. Planned expenditures are subject to review by Alameda CTC staff prior to implementation.

Implementation Guidelines and Performance Measures – Special Transportation for Seniors and People with Disabilities (Paratransit) Program

Performance Measures

The Alameda CTC collects performance data from all programs funded with Alameda County Measure B (2000), Measure BB (2014) and Vehicle Registration Fee (VRF, 2010) revenues. All programs funded partially or in their entirety through these sources must at a minimum report annually through the Annual Compliance Report for Direct Local Distribution (DLD) funding on the performance measures identified within the Implementation Guidelines for each DLD program.

The performance measures for the Measure B and Measure BB Direct Local Distribution (DLD) funding distributed through the Special Transportation for Seniors and People with Disabilities (Paratransit) Program, which funds ADA-mandated paratransit services, city-based paratransit programs and discretionary grant funded projects, are identified below. Performance data required for Compliance Reports are marked with a ✜. Additional performance-related data is listed and may be required through separate discretionary grant guidelines or to report to the Alameda CTC's Commission or one of its community advisory committees. Additional performance measures include but are not limited to those below marked with a regular bullet.

ADA-mandated Paratransit
❖ Number of one-way trips provided
❖ Total Measure B/BB cost per one-way trip *(Total Measure B/BB program cost during period divided by the number of one-way trips provided during period.)*
• Total program cost per one-way trip (total program cost during period divided by the number of one-way trips provided during period).
• Non-Measure B/BB revenues and costs
• Number of registrants
• On-time performance
• Number of trips provided to consumers who require an accessible vehicle
• Qualitative information on complaints
• Qualitative information on safety incidents
• Qualitative information on outreach
• Qualitative information on "high need" trips

❖ *Performance data required for Compliance Reports*

Same-Day Transportation Service
❖ Number of one-way trips provided on taxis
❖ Number of one-way trips provided on Transportation Network Companies (e.g. Lyft, Uber) using ride-hailing apps
❖ Total Measure B/BB cost per one-way trip *(Total Measure B/BB program cost during period divided by the number of one-way trips provided during period.)*
• Total program cost per one-way trip, including extra concierge costs if applicable (total program cost during period divided by the number of one-way trips provided during period)
• Non-Measure B/BB revenues and costs
• Number of registrants (report quantities for taxis and/or Transportation Network Companies separately)
• Information in aggregate on origin and destination for same day trips by category (i.e. medical appointments, grocery store, senior center, etc.; report quantities for taxis and/or Transportation Network Companies separately)
• Qualitative information on complaints (report quantities for taxis and/or Transportation Network Companies separately)
• Qualitative information on safety incidents (report quantities for taxis and/or Transportation Network Companies separately)
• Qualitative information on outreach

✛ *Performance data required for Compliance Reports*

City-based Specialized Accessible Van Service
❖ Number of one-way trips provided
❖ Total Measure B/BB cost per one-way trip *(Total Measure B/BB program cost during period divided by the number of one-way trips provided during period.)*
• Total program cost per one-way trip, including extra costs for specialized service if applicable (total program cost during period divided by the number of one-way trips provided during period).
• Non-Measure B/BB revenues and costs
• Number of registrants
• On-time performance
• Number of trips provided to consumers who require an accessible vehicle
• Qualitative information on complaints
• Qualitative information on safety incidents
• Qualitative information on outreach

❖ *Performance data required for Compliance Reports*

Accessible Shuttle Service
❖ Total ridership *(One-way passenger boardings)*
❖ Total Measure B/BB cost per one-way passenger trip *(Total Measure B/BB program cost during period divided by the total ridership during period.)*
• Total program cost per one-way passenger trip (total program cost during period divided by the total ridership during period).
• Non-Measure B/BB revenues and costs
• Number of registrants
• On-time performance
• Number of trips provided to consumers who require an accessible vehicle
• Qualitative information on complaints
• Qualitative information on safety incidents
• Qualitative information on outreach

❖ *Performance data required for Compliance Reports*

Group Trips Service
❖ Number of one-way passenger trips provided
❖ Total Measure B/BB cost per passenger trip *(Total Measure B/BB program cost during period divided by the number of passenger trips provided during period.)*
• Total program cost per passenger trip (total program cost during period divided by the number of passenger trips provided during period).
• Non-Measure B/BB revenues and costs
• Number of registrants
• Number of trips provided to consumers who require a wheelchair accessible trip
• Qualitative information on complaints
• Qualitative information on safety incidents
• Qualitative information on outreach

❖ *Performance data required for Compliance Reports*

Door-through-Door/Volunteer Driver Service
❖ Number of one-way trips provided
❖ Total Measure B/BB cost per one-way trip *(Total Measure B/BB program cost during period divided by the number of one-way trips provided during period.)*
• Total program cost per one-way trip (total program cost during period divided by the number of one-way trips provided during period).
• Non-Measure B/BB revenues and costs
• Number of registrants
• Qualitative information on complaints
• Qualitative information on safety incidents
• Qualitative information on outreach
• Number of active volunteer drivers
• Number of one-way trips provided by staff
• Percentage of service requests unfulfilled when requested within specified time

❖ *Performance data required for Compliance Reports*

Mobility Management Program
❖ Number of individuals provided with mobility management support *(Note: an individual may have multiple contacts)*
❖ Number of contacts providing mobility management support (service type can be categorized as information and referral, service linkage, service coordination, or advocacy.)
❖ Total Measure B/BB cost per individual provided with mobility management support *(Total Measure B/BB program cost during period divided by the number of individuals provided with support during period.)*
• Total cost per individual provided with mobility management support (total program cost during period divided by the number of individuals provided with support during period).
• Non-Measure B/BB revenues and costs
• Qualitative information on outreach

✤ *Performance data required for Compliance Reports*

Travel Training Program
❖ Number of individuals trained and/or received travel orientation (divided by those in individual training and those participating in group trainings)
❖ Total Measure B/BB cost per individual trained in individual trainings and in group trainings *(Total Measure B/BB program cost during period divided by the number of individuals trained during period)*
• Total program cost per individual trained in individual trainings and in group trainings (total program cost during period divided by the number individuals trained during period)
• Non-Measure B/BB revenues and costs
• Number of individuals trained (divided by those receiving travel orientation, mobility device training, seniors, adults with disabilities, youth with disabilities, and/or people with visual impairments)
• Qualitative information on outreach
• Percentage/number of people surveyed who used transit post workshop

✤ *Performance data required for Compliance Reports*

Scholarship/Subsidized Fare Program
❖ Number of unduplicated individuals who received scholarship/subsidized fares
❖ Number of one-way fares/tickets subsidized
❖ Total Measure B/BB cost per subsidy *(Total Measure B/BB program cost during period divided by the number of subsidized fares/tickets during period)*
• Total program cost per subsidy (total program cost during period divided by the number of subsidized fares/tickets during period)
• Non-Measure B/BB revenues and costs
• Qualitative information on complaints
• Qualitative information on outreach

✣ *Performance data required for Compliance Reports*

Meal Delivery Funding Program
❖ Number of meal delivery trips
❖ Total Measure B cost per meal delivery trip *(Total Measure B program cost during period divided by the number of meal delivery trips during period)*
• Total cost per meal delivery trip (total program cost during period divided by the number of meal delivery trips during period)
• Non-Measure B revenues and costs

✣ *Performance data required for Compliance Reports*

Capital Expenditures
❖ Total Measure B/BB cost
• Non-Measure B/BB revenues and costs

✣ *Performance data required for Compliance Reports*

5.4

Executive Summary

Dialysis Transportation:
The Intersection of Transportation and Healthcare

Why This Report on Dialysis Transportation?

The first answer is that this report responds to the major concerns of public transportation agencies about the rising demand and cost to provide dialysis trips and experience showing these trips require service more specialized than public transportation is designed to provide.

A second answer is that this report documents the complicated relationship of two different industries—public transportation and healthcare, each with its own perspective and requirements—to highlight the problems, identify strategies addressing concerns, and suggest options that may be more appropriate for dialysis transportation.

The fundamental problem is that transportation and healthcare intersect in ways that often lead to negative health outcomes for the thousands of people in the U.S. with failed kidneys who rely on transit agencies and other public sector modes for trips to dialysis—a treatment that is literally saving their lives.

Increasing Demand for Dialysis Transportation

Chronic kidney disease has reached a crisis in the U.S.—for both medical care and public policy. Approximately 30 million people or 15% of U. S. adults have the disease, and increasing numbers of those will likely progress to the disease's final stage when the kidneys fail—end stage renal disease (ESRD).

More than 700,000 people in the country have ESRD and the number increases by about 20,000 each year. From 2000 to 2015 (the year with the most recent national data), the number of ESRD patients increased by an alarming 80%. While kidney transplantation is considered the preferred treatment for many, dialysis is by far the most common treatment.

Number of ESRD Prevelent Cases in U.S. Population, 1980-2015
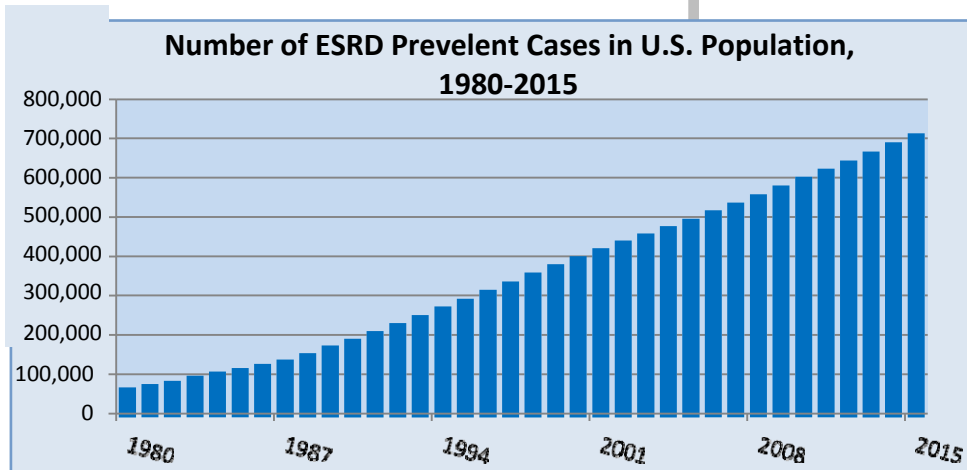
At the end of 2015, almost one-half million ESRD patients were receiving kidney dialysis and, of these, 90% traveled to dialysis facilities for their required three-days-each-week treatments. This translates to almost 139 million one-way trips annually for dialysis.

Findings from this research project combined with other studies of dialysis transportation estimate that approximately half of patients rely on public sector transportation modes for dialysis—in particular, public transit's specialized services including ADA paratransit and Medicaid's non-emergency medical transportation (NEMT). Other public sector modes with smaller roles include Veterans Administration (VA) vehicles, human service agencies, taxis and ambulances, among others. This means that the public sector may be responsible for close to 70 million trips annually for dialysis.

Photo courtesy of KFH Group

Increasing Cost for Dialysis Transportation

With cost data from this research project, it is estimated that public sector trips to dialysis facilities require almost $2 billion annually—a large and startling number. This is a rough estimate, but it is important to recognize that public transportation agencies have a significant role in providing and funding those millions of public sector trips.

Results of the Research Project

The research, conducted over an 18-month period, involved a literature review; surveys of transit agencies, dialysis facilities, and dialysis patients; information, data, and consultation with healthcare professionals on the research team; development of a forecasting tool to estimate needs and costs for dialysis transportation; and follow-up with selected public transit providers to document efforts to provide dialysis trips more effectively.

Significant Challenges Face Dialysis Patients and Public Transportation Agencies

For patients and nephrology social workers at the dialysis facilities, transportation is a major concern.

- Patients and social workers complain that transportation is unreliable: vehicles are late dropping patients off for their treatment and late picking up patients after treatment; vehicles never come—the transportation provider cancels the trip or is a no-show.

Page 36

- The unreliability is stressful. Patients are anxious—they worry about missing their trip home, so they end dialysis treatment early so they won't miss their ride.

- Transportation problems for patients reliant on publicly provided transportation services negatively impact their treatment.

- The social workers spend hours dealing with patients' transportation problems—time and effort detracting from their primary responsibilities.

Perhaps most critical from a healthcare perspective is the impact of unreliable transportation on the health of dialysis patients. Medical literature has identified transportation as a factor in missed and shortened dialysis treatments which leads to negative health outcomes. These adverse outcomes include, among others, increased hospitalizations because patients do not receive their scheduled treatments.

For public transportation agencies, dialysis transportation has become a critical concern as increasing numbers of individuals with ESRD turn to their community's public transit service for their six trips each week for dialysis.

- Significant numbers of trips are dedicated just to dialysis, impacting the ability to meet other trip needs.

- Scheduling is a major problem, particularly for return trips from dialysis: patients are often not ready for their scheduled trip because they're not medically stable or from delays in starting or during treatment. Dialysis facilities change treatment days and times, sometimes with little notice.

- Transit agencies report that dialysis facilities do not work with transit agencies to coordinate transportation with dialysis treatment, resulting in less efficient and therefore more costly transportation service.

- Particularly for transportation agencies providing ADA paratransit, increasing demand for dialysis trips is a severe problem since ADA regulations prohibit any capacity constraints—in other words, the dialysis trips cannot be denied.

> More than 100 of 262 surveyed social workers provided comments and concerns; six are quoted:
>
> *"Some transportation services have patients waiting a very long time after treatment to be picked up. Patients who wait long periods of time after treatment seem to have frequent physical declines."*
>
> *"Transportation providers often do not show up or are quite late, both of which tend to decrease the amount of dialysis received by the patient, thereby negatively affecting their health*."
>
> *"Transportation problems have a huge impact on our patients. They often report this to be the number one stressor in coping with ESRD."*
>
> *"In a rural area like ours, transportation resources are so limited. The transportation that is available cannot transport patients at typical dialysis times causing patients to have to get off treatment early or start treatment late."*
>
> *"Dialysis patients suffer tremendously from lack of appropriate transportation…"*
>
> *"…it would be better if dialysis centers were able to have their own transportation company to transport patients…"*

Transportation Funding—and Lack Thereof—Has Impacts

Funding programs impact dialysis patients as well as public transit agencies.

- Medicare, the main source of payment for ESRD and dialysis, does not pay for routine transport of patients for dialysis treatment. Medicare patients

without private transportation (self-driven or rides from family/friends) or in communities without ADA paratransit or other public specialized service must fund their own trips, which can be costly.

- Medicaid patients, on the other hand, receive free transportation for dialysis. Yet, Medicaid increasingly uses private brokers with a payment structure incentivizing the broker to use the least cost transportation provider, even though this may not be the preferred provider for the dialysis patient's medical condition.

- Public transportation agencies receive no special funding for dialysis trips. Transit agencies must increasingly look to their communities for local funds to support day-to-day operations.

Comments from more than 140 of 500+ transit agencies surveyed underscore the problems. Quotes from five agencies:

"To serve dialysis trips, we have to put drivers on the road at 4 am, two hours earlier than before. This places strain on drivers but also on maintenance and dispatch that now need to be ready to react to issues as early as 3:30 am. There is no compensation for this operational cost."

"Special care is needed with patients on the return trip due to frail status and bleeding. The...needs of these passengers go beyond what a public transit driver can provide."

"The problem we encounter most frequently is that a rider is late getting off dialysis and we have to leave to do other scheduled trips. The rider is then left waiting... [which is hard*] as the rider is weak and ill..."*

"We had a coordinated system [but] Medicaid trips have been removed... more people are using ADA paratransit for dialysis because HMO providers [are] unreliable so people would rather [use] ADA. This trip dumping puts the burden on the community..."

"...dialysis centers are only concerned with making sure each 'chair' is maximized. [Dialysis center] staff...are only interested in telling transportation how to get patients there. They are not concerned with ADA and what that means-no trip priorities. [Dialysis] is a huge money maker for the companies."

Disconnects Between Public Transportation and Healthcare

The differing perspectives and funding programs between public transportation and healthcare make clear serious disconnects:

- Transit agencies report that dialysis riders are not ready for their return trip. Social workers report patients have long waits for their return trips.

- Transit agencies report that they inform dialysis facilities about what they can and cannot do as public transit providers. But social workers appear not to understand the constraints and legal framework of ADA paratransit, which, for one, prohibits any trip purpose prioritization—even for critical medical trips.

- Transit agencies report changing patient schedules and a lack of coordination with dialysis facilities for transportation. Social workers report that they consider patients' transportation needs when scheduling treatment.

- Problems with transportation are a major stress for patients. Healthcare *Quality of Life* surveys of dialysis patients address biological symptoms, but do not include transportation.

- The shifting of Medicaid trips to public transit agencies' ADA paratransit without funding coordination with Medicaid is a major concern for public transit. Yet federal guidance through the Centers for Medicare and Medicaid Services (CMS) and language from a CMS ruling implementing the 2005 Deficient Reduction Act allow Medicaid

agencies to contribute to the full cost of trips with a "negotiated rate" (more than the fare). In practice, coordination is rare.

What Can Be Done?

Communities can look to strategies and practices identified in the research and documented in the report that public transit agencies use to try and serve dialysis trips more effectively. These actions are noteworthy, but they do not solve the challenges of dialysis transportation.

One finding of this research is that public transportation is not appropriate for the many dialysis trips that require care more specialized than public transportation is designed to provide. Public transportation agencies may fairly question their role in providing dialysis trips. It is appropriate to look to the healthcare industry for its participation, as healthcare initiatives could have more impact on dialysis transportation.

Photo courtesy of KFH Group

Dialysis Facilities Can Fund and Provide Transportation—The medical community including dialysis facilities are now allowed to participate in funding and providing patient transportation through revisions to federal law that restricted participation in the past. Their involvement—with care tailored to patients—would help improve dialysis transportation. Their involvement may also help ensure better health outcomes for their dialysis patients.

Cost-sharing with Medicaid—The fact that public transportation agencies serve Medicaid trips in many communities and some of these trips are dialysis trips, communities should work toward improved coordination and cost-sharing with their state's Medicaid agency for the dialysis trips.

Home dialysis—Increasing the use of home dialysis is another healthcare initiative that would not only reduce the need for dialysis transportation but may benefit patients as home treatment has been associated with greater patient independence and improved quality of life.

Reduce kidney disease—Healthcare programs that tackle the growing incidence of chronic kidney disease that too often results in ESRD could reduce the need for dialysis transportation, at least in the longer term. One such initiative—the Special Diabetes Program for Indians that has significantly reduced the incidence of ESRD among American Indians and Alaskan Natives—may be a useful disease management program for other population groups.

As the healthcare industry increasingly embraces its responsibility for the social determinants of health—of which transportation is a key determinant—it may be that the healthcare sector recognizes its role and responsibility for dialysis transportation.

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