RideKC Coordination of ADA Paratransit and Other Demand Responsive Services

Kansas City Area Transportation Authority, June 2015
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Kansas City Area Transportation Authority
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EXECUTIVE SUMMARY
**Study Purpose**
The study supports efforts to discuss and strategize on the possible coordination of ADA paratransit services and other demand responsive services in the Kansas City region. Throughout the planning process, the study team reviewed existing services in the region, participated in on-site observations, completed technical research, and facilitated discussion among stakeholders.

**Background**
The Americans with Disabilities Act (ADA) of 1990 requires public transit agencies that provide fixed-route service to provide complementary paratransit services to persons with disabilities who cannot use the fixed-route service. Transit agencies and other entities may offer above-and-beyond, or non-ADA, services that often vary widely from community to community. Several paratransit services are offered within the Kansas City region, which is defined as the five-county area including Jackson, Clay, Platte, Wyandotte, and Johnson counties for the purpose of this study. Three agencies provide ADA complementary and above-and-beyond (non-ADA) paratransit services: Kansas City Area Transportation Authority (KCATA), City of Independence, and Unified Government Transit (UGT). Other demand responsive transportation services are provided by several other entities including Johnson County Transit (JCT), OATS, counties, municipalities, and volunteer-based services.

**Stakeholder Engagement**
The study team collaborated with the Mobility Advisory Committee, a stakeholder group co-administrated by KCATA and the Mid-America Regional Council, at key points in the study. The Mobility Advisory Committee includes stakeholders from transportation providers, underserved populations, philanthropic organizations, and local government authorities. After discussing current issues and possible coordination opportunities with the committee, Proposed Coordination Plans were developed for three priorities:

- Priority #1: Coordination of ADA Paratransit Services
- Priority #2: Regional Eligibility
- Priority #3: Expanded Information and Referral Services
Priority #1: Coordination of ADA Paratransit Services

Combined ADA paratransit and non-ADA demand responsive services are provided by KCATA, the City of Independence, and Unified Government Transit. Each agency operates non-commuter fixed-route transit service and is therefore required to provide ADA paratransit service within 3/4 of a mile of all fixed-routes. Each agency also supplements the required ADA paratransit service with demand responsive service for seniors. Johnson County Transit only operates commuter, fixed-route transit service and therefore is not required to provide ADA paratransit service. Johnson County Transit, however, does provide non-ADA demand responsive service. In 2015, KCATA began managing the Johnson County Transit services.

Issue
There is significant overlap in operations and riders must contact different agencies for local and regional trips.

Solution
The recommended plan encompasses phased coordination with the four core service providers KCATA, City of Independence, Unified Government Transit, and Johnson County Transit.

► Phase I: Coordination between KCATA and the City of Independence would centralize trip reservation for both local and regional trips to enable trip commingling between the service providers. Dispatch would remain at each agency.

► Phase II: Coordination between KCATA and Unified Government Transit would centralize trip reservation for both local and regional trips to enable trip commingling between the services providers. Dispatch would remain at each agency.

► Phase III: A regional call and control center would enable centralized trip reservation, scheduling, and dispatch for local and regional trips. Phase III, illustrated below, would enable trip commingling between all four core service providers.

Implementation Considerations
► Develop a cost allocation model
► Adopt consistent operating policies
► Notify riders about operational changes
► Implement compatible technology systems

Benefits of Coordination
► Efficient use of vehicles and resources
► Streamlines trip requests for the rider
► Increases capacity
► Consistent operating policies
Priority #2: Regional Eligibility

For most ADA paratransit and demand responsive services, riders must first apply and be determined eligible. Some coordination of eligibility determination currently exists. KCATA, which contracts with a private company (MTM) for assistance, also completes eligibility determinations for Unified Government Transit. The City of Independence honors ADA eligibility determinations by KCATA. Under the recent management transition, KCATA also completes eligibility determinations for Johnson County Transit’s non-ADA Special Edition service.

Issue

Riders must complete different eligibility processes with different applications for each service.

Solution

The recommended plan encompasses phased coordination to simplify region-wide eligibility.

► Phase I: Similar to existing coordination with Unified Government Transit and Johnson County Transit, eligibility determinations for the City of Independence would be completed at KCATA.

► Phase II: A common application and process would be developed for the four core service providers. Identification cards, such as the example illustrated below, would indicate the type(s) of rider eligibility.

► Phase III: A common form of eligibility would enable reciprocity as other agencies can accept eligibility documentation. For example, any person who meets the strict criteria for ADA paratransit eligibility and/or age eligibility (recommend 65+) would also meet the less specific criteria accepted by others.

► Phase IV: A Transportation Resource Center would be established to combine coordination efforts in a central location. The Transportation Resource Center would house eligibility determination staff, travel training staff, travel equipment, and informational brochures and materials about various services.

Implementation Considerations

► Develop a common application
► Implement a consistent senior eligibility requirement (recommend 65+)
► Discuss sharing of rider information among providers to enhance service delivery
► Continue low-income eligibility at Johnson County Department of Human Services

Benefits of Coordination

► Eliminates need to apply to separate services for local and regional service
► Enables eligibility reciprocity for other services in the region
► Implements regional identification card
► Opportunity to incorporate regional branding initiative into identification card

Identification Card Example

An identification card simplifies proof of eligibility for the rider across multiple service providers. Each card can indicate the type of rider eligibility: ADA, senior, and/or low-income reduced fare. The identification card can also be integrated into the regional RideKC branding initiative.
**Priority #3: Expanded Information and Referral**

A one-call/one-click service provides riders with a single point of contact for transportation. Link for Care, managed by the Landon Center on Aging at the University of Kansas (KU) Medical Center, has served as the region’s one-click service since April 2014. Link for Care is a free, searchable, online database of transportation and other human services in the Kansas City region. The site receives about 550 visitors each month. Care Connection, managed by Shepherd’s Center Central with support from the Truman Heartland Community Foundation, has served as the region’s one-call service since April 2013. A staff person is available on weekdays to provide information about transportation and other human services. Currently, about three to four calls are received each week.

**Issue**

The one-call service and one-click service are two separate entities with little coordination. Both services could benefit from integration, improvements, and additional features that enhance public information.

**Solution**

The recommended plan encompasses a partnership between Link for Care, Care Connection, and KCATA.

► **Phase I:** Upgrades to Link for Care would include fixed-route trip planning, paratransit trip planning, a defined partnership with Care Connection as the one-call service, and providing more detailed information about eligibility and travel training. In Phase I, the two formerly separate services would be experienced by the user as an integrated one-call/one-click service.

► **Phase II:** In coordination with regional eligibility Phase IV, a Transportation Resource Center would be established to create a single point of entry for information, referral, assessment, eligibility, and travel training. KU Medical Center continues to maintain the Link for Care database, but riders interact with staff at the Transportation Resource Center. An example of a bus mock-up for training at a Transportation Resource Center is below.

► **Phase III:** In concurrence with the previous two phases, expanded marketing and outreach efforts would include a campaign with the launch of the Transportation Resource Center.

**Implementation Considerations**

► Develop formal agreements between partners
► Monitor increase in call volume
► Seek assistance to ensure the Link for Care database is designed effectively
► Maintain other important human service categories in the Link for Care database

**Benefits of Coordination**

► Demonstrates consumer-friendly delivery of service by enhancing public information
► Streamlines coordination efforts and information in one central location
► Provides a tool for rider empowerment
► Integrates community resources effectively
PART I
Inventory of Existing Services
**Part I Summary**

An inventory of services in the five-county region was developed to understand existing operations, issues, and potential opportunities for improvement. Three agencies provide ADA complementary and above-and-beyond (non-ADA) paratransit services: Kansas City Area Transportation Authority (KCATA), City of Independence, and Unified Government Transit (UGT). Other demand responsive transportation services are provided by several other entities including Johnson County Transit (JCT), OATS, counties, municipalities, and volunteer-based services. Information was not collected for private, for-profit services. The agencies and their respective services are outlined in Table 1.

Table 1: Agencies and Services in the Kansas City Region

<table>
<thead>
<tr>
<th>Type</th>
<th>Agency</th>
<th>Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADA Paratransit Services</td>
<td>KCATA</td>
<td>Share-a-Fare (ADA)</td>
</tr>
<tr>
<td></td>
<td>Unified Government Transit</td>
<td>Dial-a-Ride (ADA)</td>
</tr>
<tr>
<td></td>
<td>City of Independence</td>
<td>IndeAccess (ADA)</td>
</tr>
<tr>
<td></td>
<td>KCATA</td>
<td>Share-a-Fare (non-ADA)</td>
</tr>
<tr>
<td></td>
<td>Unified Government Transit</td>
<td>Aging Transit (non-ADA)</td>
</tr>
<tr>
<td></td>
<td>City of Independence</td>
<td>IndeAccess Plus (non-ADA)</td>
</tr>
<tr>
<td></td>
<td>Johnson County Transit</td>
<td>Special Edition, SWIFT</td>
</tr>
<tr>
<td>Core Service Providers</td>
<td>OATS</td>
<td>Area B (south Platte County), Area N (north Platte County and Clay County), Area L (Jackson County), City of Blue Springs, City of Lee's Summit</td>
</tr>
<tr>
<td></td>
<td>City of Olathe</td>
<td>Taxi Coupon Program</td>
</tr>
<tr>
<td></td>
<td>City of Shawnee</td>
<td>CityRide</td>
</tr>
<tr>
<td></td>
<td>City of Liberty</td>
<td>Liberty Access Bus</td>
</tr>
<tr>
<td></td>
<td>City of Excelsior Springs</td>
<td>Omni Bus</td>
</tr>
<tr>
<td>County and Municipal Services</td>
<td>Platte County Board of Services</td>
<td>Transportation for Individuals with Disabilities</td>
</tr>
<tr>
<td></td>
<td>Platte County Senior Fund</td>
<td>Transportation for Seniors</td>
</tr>
<tr>
<td></td>
<td>Clay County Senior Services</td>
<td>Transportation for Seniors</td>
</tr>
<tr>
<td></td>
<td>Developmental Disability</td>
<td>Empowering Individuals Through Advocacy and Support (EITAS)</td>
</tr>
<tr>
<td></td>
<td>Services of Jackson County</td>
<td></td>
</tr>
<tr>
<td>Agency-Specific Services</td>
<td>Johnson County</td>
<td>Catch-a-Ride</td>
</tr>
<tr>
<td></td>
<td>Jewish Family Services</td>
<td>JET Express, JET Express Plus</td>
</tr>
<tr>
<td>Volunteer-Based Services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Methodology
For each service provided by the agencies, the following information was gathered: general service description, eligibility requirements and application process, trip purposes, service area, days and hours of service, trip reservation policies, and method of operation. The following additional information was also gathered, as available: ridership, fleet size and composition, annual operating budget, and sources of funding.

For each service, the information was first collected from online sources and other readily available documents. In September 2014, personal contact with agency staff was initiated to verify the material collected to date and inquire about other information, as appropriate. Follow-up telephone calls and email messages were completed, as necessary.

In October 2014, the study team also met with managers of the four core service providers in the region: KCATA, City of Independence, UGT, and JCT. The on-site observations of the call center, trip scheduling, and dispatch functions helped develop a better understanding of the service operations and expand upon the information collected.

A chart summarizing key information for each service is provided in Table 2. Information for the four core service providers is included in this section with the detailed inventory of all services in Appendix A.

Service Patterns
While the services in the region vary in terms of their characteristics, a few items can be discerned:

► Eligibility Requirements: The minimum age requirement for eligible senior riders varies between 60 years and 65 years depending on the service. Most services have an eligibility verification process.

► Service Area: The services generally operate within their own city or county limits. However, several agencies also provide transportation to medical centers outside the jurisdiction and make exceptions for these specific locations.

► Days and Hours of Service: With the exception of KCATA’s Share-a-Fare, most services operate Monday to Friday during the daytime hours. Services that contract with a for-profit taxi company have extended hours.

► Fares: Typically, one-way trips range from $1.00 to $3.50. Some services charge additional fares depending on mileage. Several cities require a travel card ID for eligible riders. Others only sell coupon books or punch cards in quantities of ten one-way trips.

► Annual Ridership: The annual ridership of the services varies significantly. For example, KCATA’s Share-a-Fare provides more than 250,000 trips each year. In comparison, JET Express provides about 2,000 trips each year.

Service Areas
The service areas for the three agencies that provide ADA paratransit service — KCATA, City of Independence, and UGT — are displayed in Figure 1. The service areas for county and municipal providers are displayed in Figure 2. The service areas for agency-specific providers are displayed in Figure 3. The service areas for volunteer-based providers are displayed in Figure 4.
<table>
<thead>
<tr>
<th>Agency/Service</th>
<th>Description</th>
<th>Eligibility</th>
<th>Trip Purposes</th>
<th>Service Area</th>
<th>Days/Hours</th>
<th>Annual Trips</th>
<th>Fleet</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>KCATA: Share-a-Fare (ADA)</strong></td>
<td>Shared-ride van and taxi service; in-house call center, contracted operations</td>
<td>Must be ADA paratransit eligible</td>
<td>All trip purposes</td>
<td>All origins and destinations within 3/4 of a mile of KCATA local bus routes</td>
<td>Daily: 6 am - 12 am</td>
<td>258,574</td>
<td>70 minibuses (shared with non-ADA service)</td>
</tr>
<tr>
<td><strong>City of Independence: IndeAccess (ADA)</strong></td>
<td>Shared-ride van service; turnkey contract</td>
<td>Must be ADA paratransit eligible</td>
<td>All trip purposes</td>
<td>All origins and destinations within 3/4 of a mile of IndeBus routes</td>
<td>M-F: 5:30 am - 7 pm, Sat: 5:30 am - 6 pm</td>
<td>8,654</td>
<td>4 minibuses (shared with IndeAccess Plus)</td>
</tr>
<tr>
<td><strong>Unified Government Transit: Dial-a-Ride (ADA)</strong></td>
<td>Shared-ride van service; in-house operations</td>
<td>Must be ADA paratransit eligible</td>
<td>All trip purposes</td>
<td>Wyandotte County</td>
<td>M-F: 7 am - 9 pm</td>
<td>8,366</td>
<td>8 minibuses (shared with Aging Transit)</td>
</tr>
<tr>
<td><strong>KCATA: Share-a-Fare (non-ADA)</strong></td>
<td>Shared-ride van and taxi service; in-house call center, contracted operations</td>
<td>Low-income persons with disabilities (16-65) and seniors (65+); City residency requirement</td>
<td>Medical and work (priority and standard fare); other purposes added fare</td>
<td>Kansas City, MO city limits and some medical and work destinations in neighboring communities</td>
<td>Daily: 6 am - 12 am</td>
<td>includes in ADA Share-a-Fare trip count</td>
<td>Shared fleet with Share-a-Fare (ADA) service</td>
</tr>
<tr>
<td><strong>City of Independence: IndeAccess Plus (non-ADA)</strong></td>
<td>Shared-ride van service; turnkey contract</td>
<td>Seniors (60+), City residency requirement</td>
<td>All trip purposes</td>
<td>City of Independence</td>
<td>M-F: 5:30 am - 7 pm, Sat: 5:30 am - 6 pm</td>
<td>4,080</td>
<td>Shared fleet with IndeAccess ADA service</td>
</tr>
<tr>
<td><strong>Unified Government Transit: Aging Transit (non-ADA)</strong></td>
<td>Shared-ride van service</td>
<td>Seniors (60+)</td>
<td>Medical, essential shopping, nutrition sites</td>
<td>Wyandotte County</td>
<td>M-F: 8 am - 6 pm</td>
<td>14,880</td>
<td>Shared fleet with Dial-a-Ride ADA service</td>
</tr>
<tr>
<td><strong>Johnson County Transit: Special Edition</strong></td>
<td>Shared-ride van and taxi service; turnkey contract</td>
<td>Persons with disability, seniors (60+), low-income; County residency requirement</td>
<td>All trip purposes</td>
<td>Johnson County plus medical destinations in Kansas City, MO and Kansas City, KS</td>
<td>M-F: 6 am - 6 pm</td>
<td>56,650</td>
<td>36 minibuses plus taxis (shared with SWIFT service)</td>
</tr>
<tr>
<td><strong>Johnson County Transit: SWIFT</strong></td>
<td>Shared-ride van and taxi service; turnkey contract</td>
<td>SWIFT program participants</td>
<td>Work and work training</td>
<td>Johnson County plus destinations in Kansas City, MO and Kansas City, KS</td>
<td>M-F: 6 am - 6 pm (peak service 6:30 am - 9 am and 3pm - 5 pm)</td>
<td>45,430</td>
<td>Shared fleet with Special Edition service</td>
</tr>
<tr>
<td><strong>OATS: Area B (south Platte County)</strong></td>
<td>Shared-ride van service</td>
<td>Persons with disability, seniors (60+)</td>
<td>Medical, essential shopping, Senior Center</td>
<td>West OATS region (Platte, Clay, Jackson, and Cass counties)</td>
<td>Medical: M, W, F Shop: 1st, 3rd, 4th T</td>
<td>505</td>
<td>76 vehicles (shared in West region)</td>
</tr>
<tr>
<td><strong>OATS: Area N (north Platte County and Clay County)</strong></td>
<td>Shared-ride van service</td>
<td>Persons with disability, seniors (60+)</td>
<td>Medical, essential shopping, Senior Centers</td>
<td>West OATS region (Platte, Clay, Jackson, and Cass counties)</td>
<td>Medical: M, W, F Shop North Platte: 1st F, 2nd, 4th W Shop Excelsior Springs: 1st, 3rd W Shop Kearney: 1st, 2nd, 3rd Th Shop Smithville: 1st, 2nd, 3rd Th Senior Center Excelsior Springs: M-F 8:45 am - 9:30 am, 1pm - 2:30 pm Senior Center Smithville: M, W, F</td>
<td>26,104</td>
<td>76 vehicles (shared in West region)</td>
</tr>
<tr>
<td><strong>OATS: Area L (Jackson County)</strong></td>
<td>Shared-ride van service</td>
<td>Persons with disability, seniors (60+)</td>
<td>Medical, Senior Centers</td>
<td>West OATS region (Platte, Clay, Jackson, and Cass counties)</td>
<td>Medical: M, W, F Senior Center Buckner: M-F 8:30 am - 10 am, 1:30 pm - 3 pm Senior Center Blue Springs: M-F 8:30 am - 10 am, 1:30 pm - 3 pm Contracts in Independence: M-F varies</td>
<td>3,118</td>
<td>76 vehicles (shared in West region)</td>
</tr>
<tr>
<td>Agency/Service</td>
<td>Description</td>
<td>Eligibility</td>
<td>Trip Purposes</td>
<td>Service Area</td>
<td>Days/Hours</td>
<td>Annual Trips</td>
<td>Fleet</td>
</tr>
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</tr>
<tr>
<td>OATS: City of Blue Springs</td>
<td>General public</td>
<td>N/A</td>
<td>All trip purposes</td>
<td>City of Blue Springs</td>
<td>T, Th: 10 am - 2 pm</td>
<td>1,099</td>
<td>76 vehicles (shared in West region)</td>
</tr>
<tr>
<td>OATS: City of Lee’s Summit</td>
<td>General public</td>
<td>N/A</td>
<td>All trip purposes</td>
<td>City of Lee’s Summit</td>
<td>M-F: 7 am - 3 pm</td>
<td>6,097</td>
<td>76 vehicles (shared in West region)</td>
</tr>
<tr>
<td>City of Olathe: Taxi Coupon program</td>
<td>User-side taxi subsidy service</td>
<td>Persons with disability, seniors (65+ in 2015), low-income (varies by trip purpose); City residency requirement</td>
<td>Medical, work, personal business</td>
<td>City of Olathe</td>
<td>Daily: 24 hours</td>
<td>42,264</td>
<td>10/10 Taxi fleet</td>
</tr>
<tr>
<td>City of Shawnee: CityRide</td>
<td>Provider-side taxi subsidy service</td>
<td>Persons with disability, seniors (65+); City residency requirement</td>
<td>All trip purposes</td>
<td>City of Shawnee plus some outside medical and agency service locations</td>
<td>Daily: 24 hours</td>
<td>5,000</td>
<td>10/10 Taxi fleet</td>
</tr>
<tr>
<td>City of Liberty: Liberty Access Bus</td>
<td>Shared-ride van service</td>
<td>Persons with disability, seniors (60+); City residency requirement</td>
<td>Medical, shopping</td>
<td>City of Liberty plus once per month to Walmart outside city</td>
<td>M-F: 8:30 am - 4:30 pm</td>
<td>Not available</td>
<td>3 vans</td>
</tr>
<tr>
<td>City of Excelsior Springs: Omni Bus</td>
<td>General public with deviated route service</td>
<td>N/A</td>
<td>All trip purposes, but deviations for medical and essential shopping</td>
<td>All origins and destinations within two miles of the Omni Bus</td>
<td>M-F: 9 am - 12 pm, 1 pm - 4 pm T, W: 5:30 pm - 7 pm</td>
<td>10,000</td>
<td>2 ADA buses</td>
</tr>
<tr>
<td>Platte County Board for the Developmentally Disabled</td>
<td>Agency shared-ride van service</td>
<td>Program participants</td>
<td>To/from programs</td>
<td>Kansas City metropolitan area</td>
<td>M-F: daytime hours</td>
<td>Not available</td>
<td>34 sedans, vans, minivans</td>
</tr>
<tr>
<td>Platte County Senior Fund</td>
<td>Agency shared-ride van service</td>
<td>Seniors (60+); County residency requirement</td>
<td>Medical, essential business</td>
<td>Up to 50-mile radius of Platte County Senior Fund office</td>
<td>M-F: 6 am - 6 pm Sat: as necessary</td>
<td>5,746</td>
<td>Assisted Transportation, Northland Taxi, and Twin Coach fleet</td>
</tr>
<tr>
<td>Clay County Senior Services</td>
<td>Agency shared-ride van service</td>
<td>Seniors (60+); County residency requirement</td>
<td>Medical, essential business</td>
<td>Up to 50-mile radius of homes in Clay County</td>
<td>M-F: 6 am - 5 pm</td>
<td>6,128</td>
<td>Assisted Transportation fleet (mostly wheelchair lift vans)</td>
</tr>
<tr>
<td>Develop. Disability Services of Jackson County: EITAS</td>
<td>Agency shared-ride van service</td>
<td>Program participants</td>
<td>To/from programs; limited service for other purposes</td>
<td>Jackson County</td>
<td>M-F: 6 am - 6 pm</td>
<td>234,000</td>
<td>40 vehicles (mostly vans, minibuses)</td>
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<tr>
<td>Johnson County: Catch-A-Ride</td>
<td>Volunteer driver program</td>
<td>Persons with disability, seniors (60+), or no transportation; County residency requirement</td>
<td>Medical, shopping, social service programs</td>
<td>Johnson County and certain out-of-county medical facilities</td>
<td>M-F: 8 am - 5 pm</td>
<td>5,200 trip requests each year</td>
<td>Volunteer driver cars</td>
</tr>
<tr>
<td>Jewish Family Services: JET Express</td>
<td>Volunteer driver program</td>
<td>Seniors (65+) without transportation</td>
<td>Any trips for daily living</td>
<td>Southern Johnson and Jackson counties</td>
<td>Sun-Th: 8 am - 9 pm F, Sat: 8 am - 10 pm</td>
<td>2,000</td>
<td>Volunteer driver cars</td>
</tr>
<tr>
<td>Jewish Family Services: JET Express Plus</td>
<td>Shared-ride van service</td>
<td>Seniors (65+) without transportation</td>
<td>Any trips for daily living</td>
<td>Southern Johnson and Jackson counties</td>
<td>M-F: 8 am - 9 pm Sat, Sun: per driver availability</td>
<td>Included in JET Express</td>
<td>1 minivan</td>
</tr>
</tbody>
</table>
Figure 1: Service Areas for ADA Complementary and Above-and-Beyond Services

Service Areas
ADA Complementary and Above-and-Beyond Services

KCATA ADA complementary service area does not include express, commuter, or MetroFlex routes.

Dial-a-Ride ADA complementary service extends beyond 3/4 of a mile of the fixed routes to serve all of Wyandotte County.

Service Providers
- KCATA, Share-a-Fare (non-ADA)
- KCATA, Share-a-Fare (ADA)
- City of Independence, IndeAccess (ADA)
- City of Independence, IndeAccess Plus (non-ADA)
- Unified Government Transit, Dial-a-Ride (ADA) and Aging Transit (non-ADA)
Figure 2: Service Areas for County and Municipal Services
Figure 3: Service Areas for Agency-Specific Services
Figure 4: Service Areas for Volunteer-Based Services

Service Areas
Volunteer-Based Services

Johnson County Catch-a-Ride serves some medical destinations outside the county.

JET Express and JET Express Plus serve southern Jackson and Johnson Counties. Illustrated boundary is approximate.
**KCATA: Share-a-Fare**

**General Description**
Share-a-Fare is an ADA complementary paratransit service that also provides service above-and-beyond minimum regulatory requirements (non-ADA).

**Eligibility Requirements and Application Process**
To be eligible for ADA service, individuals must meet one of the following regulatory categories:
- Category 1: Individual with a disability unable to use fully-accessible, fixed-route bus service
- Category 2: Individual with a disability who could use the fixed-route bus service if accessible
- Category 3: Individual with a disability who cannot access a particular bus stop or access the final destination after disembarking from a fixed-route bus

Persons eligible for ADA trips may also have unrestricted, temporary, or conditional access to the service:
- Unrestricted: Full access to service for up to three years
- Temporary: Full or conditional access for the expected duration of a temporary disability
- Conditional: Access to the service for up to three years only when conditions impact the ability to use the fixed-route bus service (i.e. weather, unfamiliarity of trips, specific origins/destinations, etc.)

Persons with disabilities between 16-65 years or seniors at least 65 years with an annual income of no more than 150 percent of the poverty level are eligible for non-ADA trips. To date, KCATA has not received an application requesting service based on the income eligibility requirements. Individuals must be a resident of Kansas City, Missouri to qualify for non-ADA trips.

KCATA released a Request for Proposal in July 2014 to advance regional coordination in terms of eligibility and the application process. KCATA is seeking to coordinate regional eligibility and certification processing services for ADA complementary paratransit clients, non-ADA elderly and disabled paratransit clients, and fixed-route reduced fare public transportation clients. KCATA indicated that it may be feasible to enact consistent disability and age requirements, but income thresholds across different jurisdictions may pose a challenge.

**Trip Purposes**
ADA trips are for any trip purpose. Non-ADA trips are primarily designated for work or medical trips, but may also be used for education, shopping, social, or personal trips for an additional charge.

**Service Area**
The service area for ADA trips generally extends 3/4 of a mile on each side of KCATA Metro non-commuter, fixed-route bus service (does not include express, commuter, or MetroFlex routes). Intercity eligible trips between Independence, Missouri or Kansas City, Kansas are permitted. Officially, the service area for non-ADA trips is within Kansas City, Missouri and certain medical or work destinations in neighboring communities. Generally, the service area extends two miles on each side of local Metro fixed-routes but there is a need to establish a consistent service area and identify important service pockets outside of Kansas City, Missouri.

**Days and Hours of Service**
The service operates daily from 6:00 AM - 12:00 AM. Reduced service may be implemented on holidays.

**Trip Reservation Policies**
*Trip Reservation*
Trip reservations are received Monday to Friday from 7:00 AM - 4:45 PM and Saturday to Sunday from 8:00 AM - 4:30 PM. Typically, four to six reservationists are on staff to answer calls. The office receives approximately
400 to 600 calls per day. Peak call time is in the late afternoon prior to the 4:45 PM cut-off time to schedule trips for the next day. Reservationists are also busy during the lunch period due to staff rotation.

Trips may be scheduled one to fourteen days in advance. About 50 percent of the riders schedule trips in advance and the other 50 percent call the day before. Riders who schedule trips in advance usually call to confirm the trip closer to the travel date. KCATA currently does not have a trip negotiation policy. Staff expressed a need for the ability to see real-time service capacity to know when to negotiate trips. Currently, medical appointments or trips for legal purposes (i.e. tax, court) are will-call return trips. If intracity trips are requested in the City of Independence or UGT service area, riders are referred to the appropriate service (unless after service hours).

About 10 percent of all scheduled trips are cancelled at least two hours prior to the trip. Nearly 3 percent are considered late cancels (less than two hours prior to the trip) with about 7 percent as no-shows. Therefore, about 80 percent of the trips actually occur as scheduled. The no-show penalty policy is currently not enforced due to software transition. Staff expressed the need to educate users about the importance of timely cancellations.

Subscription Service
If work or travel schedule remains the same at least two times per week, a subscription service can be arranged for a 90-day period or until the next quarter when fixed-route bus service changes. KCATA also receives appointments lists from dialysis units on a monthly basis. However, reservationists noted the current process is subject to error. As a result, the policy may change to make trip reservation the individual riders' responsibility.

Trip Scheduling
As noted above, KCATA receives reservations and same-day calls in-house. Trip requests are entered into the RouteMatch system but not negotiated or scheduled to a specific run. All trip requests are left in the system in unscheduled status. The unscheduled trips are then sent to Reveal Management Systems for scheduling. Transdev receives the scheduled driver manifests and controls dispatch of the vehicles. Transdev constantly checks for same-day updates, such as same-day cancellations, that are entered into the system by KCATA.

Same-Day Trip Status Calls
Calls from riders checking on the status of trips go directly to Transdev, the service provider. Transdev dispatchers have access to the Reveal software to keep runs updated and can contact drivers as needed to get status reports on trips.

Travel Training
KCATA has a contract with MTM for travel training. The contract is supported with federal New Freedom funding. MTM started travel training just for KCATA riders, but has expanded to serve other agencies in the region. MTM is regularly in contact with other agencies as part of an outreach effort to identify candidates for travel training.

MTM arranges in-person assessments as part of the voluntary travel training program to determine the rider’s capacity to navigate the system. Training also includes trip planning and riding or driving the route with the individual. In addition to education about the paratransit services, riders are trained to use the fixed-route system. After training, riders are provided with a 31-day pass as an incentive to use the fixed-route system when able. Staff noted that, in some other cities, businesses partner with the local transit agency to provide gift cards to local businesses as an incentive for using the fixed-route system. The City of Independence provides fixed-
route service for IndeAccess riders free of charge as an incentive for using fixed-route when able. However, the group noted that providing free fare for fixed-route without an in-person assessment can pose challenges.

Currently, KCATA handles travel training for UGT and serves as the back-up travel training provider for the City of Independence. KCATA indicated that more outreach is needed with JCT to coordination travel training with them. Other places perform their own training (Rehabilitation Institute of Kansas City, Oak Grove Nursing and Rehab, Alpha Point, and Truman Medical Center) but will send referrals periodically. Staff noted that some of these agencies only focus on home-to-work travel training while KCATA will train for broader use. Staff expressed that KCATA will typically consider referrals for travel training on any system.

About 100 individuals are referred each year with 47 to date this year. After the assessment, about five individuals either do not meet the eligibility requirements or choose not to use the service. Once eligibility is consistent across the region, staff believes that travel training referrals will increase. KCATA would also like to wait for consistent eligibility requirements to be in place before sharing the cost of travel training with other agencies. Currently, KCATA utilizes New Freedom funds to operate the program and does not charge other agencies for referrals.

Some riders are able to use the service after one training while others work with the travel training staff for a few weeks. Staff indicated that one-on-one route training tends to be more successful than group training. Nonetheless, staff is interested in arranging more group training activities to educate system wide. Outreach and education is an important step in making potential riders aware of the travel training service. Critical outreach outlets include the application packet, welcome brochure, and the KCATA website. Staff noted that KCATA receives more feedback on overall service from individuals who complete the travel training.

KCATA and the study team also discussed precedents for assessing paratransit routes. The study team described Olympia, Washington’s process of assessing routes for sidewalk connectivity, terrain, and other elements in order to offer assistance with trip planning. The study team also described the route database maintained by the Southeastern Pennsylvania Transportation Authority (SEPTA) in Pittsburgh, Pennsylvania. To develop the database, the SEPTA first assessed frequent rider trips and then continued to enhance the database as trip requests were received. The study team noted the importance of a thorough examination and application process in order to help determine which routes a rider would be eligible for fixed-route or paratransit service. In Pittsburgh, a convenience fare is applied if the individual has the capacity to use the fixed-route service but chooses to utilize the paratransit service. Staff indicated that a similar process and database could be a long-term goal for KCATA.

Technology
KCATA uses both RouteMatch software and Reveal software. RouteMatch is an Intelligent Transportation System platform for fixed-route and paratransit scheduling. Reveal is an automated scheduling, routing, and dispatching system. Currently, scheduled trips are located in RouteMatch but same-day changes to trips occur in Reveal. The software provides an on-screen notification to alert reservationists when trips are outside the ADA area or hours. Reservationists noted that riders do not typically update their information until a vehicle has been dispatched to the wrong address. Since transitioning to Reveal, KCATA has noted cost savings because of greater efficiency (i.e. KCATA is four percent below the proposed budget and seven percent below the actual budget. Staff noted that Reveal is developing its trip reservations and scheduling capabilities. It is possible that KCATA may migrate further to Reveal in the future.
Fare
Fare for ADA trips is $3.00. Fare for non-ADA trips is dependent upon the trip mileage. Non-ADA trips are $3.00 for 0-3 miles and increase by $2.00 by three-mile increments. Once the trip mileage has reached 15 miles, the fare is $11.00 plus an additional $2.00 per mile. A $2.00 per trip premium is added to non-ADA trips that are not medical or work related trips. Certified personal care attendants ride free of charge.

The eligibility process determines if riders are Medicaid eligible, and if so, individuals ride free of charge due to an agreement with Medicaid in Missouri. Per the agreement, Medicaid pays half the price of Medicaid eligible trips (approximately $17). Staff indicated that a few trips do not get reimbursed, but overall the fare recovery is significant. An immediate benefit of consistent eligibility would be the ability to recover costs through the Medicaid agreement. Extending the agreement to include Kansas is a possible long-term goal.

Method of Operation
KCATA operates an in-house call center to receive trip requests and manage services. Scheduling is provided by a vendor, Reveal Management Systems. Vehicle operations are provided by a contracted vendor, Transdev.

In general, KCATA has had difficulty getting taxi companies interested in supporting paratransit service. Many of trips are short and do not provide taxis with a suitable profit. More attractive financial reimbursement, such as mutually beneficial minimum mileage, would need to be agreed upon in order for taxi companies to be interested in the KCATA operation.

Ridership
The service has 7,282 registered riders. The service provided 258,574 one-way trips in 2013. For the six month period from April 2014 to September 2014, 94 percent of the trips were ADA trips with the remaining 6 percent as non-ADA trips.

Fleet Size and Composition
The service maintains 77 vehicles: 41 body-on-chassis vehicles and 36 sedans. Taxi cabs are also utilized to manage trip volume as needed. KCATA paratransit services provide a maximum of 160 to 170 trips per hour.

Annual Operating Budget and Funding
The annual operating budget is approximately $10.6 million. Based on the number of one-way trips provided, the operating cost for Share-a-Fare is $40.99 per trip. Sources of funding include: Kansas City, Missouri’s 1/2-cent and 3/4-cent sales tax, Medicaid funding, MEHTAP state grant, and Mid-America Regional Council (MARC) grants.

Policies

<table>
<thead>
<tr>
<th>Policy</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation Window</td>
<td>None</td>
</tr>
<tr>
<td>Pick-up Time Window</td>
<td>30 minutes (+/- 15 minutes)</td>
</tr>
<tr>
<td>Vehicle Wait Time</td>
<td>5 minutes</td>
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<tr>
<td>On Board Time</td>
<td>60 minutes maximum</td>
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<td>Mobility Device Accommodation</td>
<td>Up to 30 inches wide by 48 inches long, maximum 600 pounds</td>
</tr>
<tr>
<td>Driver Assistance</td>
<td>Door to door</td>
</tr>
<tr>
<td>Package Limit</td>
<td>5 packages</td>
</tr>
<tr>
<td>On-Time Performance</td>
<td>88% - 92% within +/- 15 minute window</td>
</tr>
<tr>
<td>Late Cancellation</td>
<td>At least two hours prior to trip</td>
</tr>
<tr>
<td>No-Show Penalties</td>
<td>Point system</td>
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</table>
City of Independence: IndeAccess and IndeAccess Plus

General Description
IndeAccess is an ADA complementary program that provides curb-to-curb, shared-ride service. IndeAccess Plus provides service above-and-beyond minimum ADA regulatory requirements. It provides curb-to-curb, shared-ride service for seniors. The operation of the fixed-route transit (IndeBus) and the paratransit services (IndeAccess and IndeAccess Plus) is closely intertwined and the relationship is crucial to current operation. First Transit is contracted by the City to operate fixed-route, IndeAccess, and IndeAccess Plus services.

Eligibility Requirements and Application Process
Eligible IndeAccess riders must meet ADA criteria and be verified by a medical professional as unable to use the fixed-route service. IndeAccess also accepts identification provided by the KCATA. The application for an IndeAccess Travel Card is seven pages. Eligible IndeAccess Plus riders must be 60 years or older and residents of the City of Independence. The application for an IndeAccess Plus Travel Card is one page. Currently, First Transit handles the application process.

In order to increase capacity on the paratransit services, IndeAccess ID cardholders are eligible for free fare on the fixed-route service. In September 2014, approximately 1,600 fixed-route trips were ADA eligible trips. With IndeAccess ID cardholders receiving these trips for free rather than the $1.50 fare, First Transit loses approximately $2,400 in fixed-route revenue per month. However, due to the cost of paratransit service, approximately 50 round-trips on IndeAccess would cost $2,400. Currently, over 700 IndeAccess trips are provided each month. If 7 percent of potential IndeAccess trips are diverted to fixed-route by the free fare program, it is a break-even proposition and an effective way to increase paratransit capacity and minimize costs.

Trip Purposes
Both IndeAccess and IndeAccess Plus serve any trip purpose. Many of the trips are medical related, particularly dialysis appointments on Mondays, Wednesdays, and Fridays.

Service Area
The service area for IndeAccess generally extends 3/4 of a mile on each side of the IndeBus fixed-route bus service in the City of Independence. The service area for IndeAccess Plus is within the City of Independence.

Most trip requests are local trips that do not extend beyond the city limits. Several riders take IndeAccess to the McDonald’s located near Interstate 70 and Blue Ridge Boulevard. From there, individuals cross the street into Kansas City, Missouri to shop at the Blue Ridge Crossing shopping center or to transfer to a KCATA Metro fixed-route. The City has considered promoting a meet-a-friend program at the low-income, high-rise housing complexes to coordinate shopping trips.

A portion of the service area overlaps with the service areas of KCATA, Jackson County’s EITAS, and OATS. The City of Independence does not typically have interaction or coordination with EITAS or OATS. However, for intracity dialysis trips, some riders have expressed that the City of Independence services are more convenient and less expensive than the OATS service. KCATA operates the Independence Transit Center with connections to The Metro service.

The City of Independence provides paratransit trips that have both origins and destinations within the city. Riders wanting to travel outside the city and into the KCATA area are referred to KCATA’s Share-a-Fare service. Similarly, KCATA does not do intracity trips in Independence. If KCATA gets calls for paratransit trips completely within the city, they refer the riders to IndeAccess.
**Days and Hours of Service**
Both IndeAccess and IndeAccess Plus operate Monday to Friday from 5:30 AM - 7:00 PM and Saturday from 5:30 AM - 6:00 PM. Holiday closures include New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas.

**Trip Reservation Policies**

**Trip Reservation**
Trip reservation is available Monday to Friday from 7:00 AM - 3:00 PM. Requests on weekends and holidays via voicemail are honored for next day service. However, most riders are aware that staff is not directly available at these times and therefore primarily call Monday to Friday during business hours. Trip reservations must be made no less than one day and no more than fourteen days in advance. With the exception of subscription service, most riders call one day in advance. Official policy states that same day trip request are not permitted. However, the services accommodate same-day requests as available, although historically there have not been many same day requests. Riders inform the scheduler if a personal care attendant or other guests will be traveling or if a mobility device or assistance to and from front door will be needed. When scheduling trips, riders need to allow adequate travel time in case of weather or traffic and allow extra time for the pick-up and drop-off of other passengers before reaching the destination.

First Transit has two staff members who handle reservations, scheduling, and dispatch of both the paratransit and fixed-route services. Each person takes paratransit trip requests, fixed-route customer service calls, and dispatches both services. Each also performs window dispatch. The afternoon staff person arranges schedules for the next day. If paratransit calls were to go to a central call center, First Transit would still need two staff people to do window dispatch, dispatch fixed-route service, and handle fixed-route customer service calls.

Staff indicated that there is a regional branding committee exploring the central call center and “one pass” concepts. In past positions, staff has had experience with central call centers and expressed that having one call center for the region would be a nice option for riders. In order for a central call center to function effectively for the City of Independence, the call-takers must be familiar with the area. Staff indicated this would be the greatest challenge with moving towards a central call center. While the relationship between the riders and the call-takers would become less personal, staff indicated that a more efficient process for riders is more important. Currently, all employees are cross-trained to drive any route or serve as dispatcher depending on demand. All employees are familiar with the riders and know the passengers by name. In the past, First Transit has found that demand did not necessitate the need for a full-time scheduler as peak time for calls is between 6:00 - 7:00 AM and 2:00 - 3:00 PM. As 90 percent of the riders receive financial support from the state, trip reservations are typically heavier at certain times of the month, such as when riders receive assistance checks.

IndeAccess has no ADA denials and trips are accommodated within +/- one hour of the requested time. IndeAccess Plus riders are involved in broader negotiations that are sometimes pushed to the next day. There are currently no issues with phone wait time, which will be important to consider at a central call center. Monday is the heaviest day for reservations with Wednesday as the lightest day.

**Subscription Service**
At the discretion of the City, riders with a permanent work, school, or medical schedule may be offered a subscription service whereby riders can schedule standing appointments for regular routine trips. Currently, approximately 70 percent of the trips are subscription trips. The remaining 30 percent, about 25 round-trips per week, are primarily shopping trips that are typically scheduled one day in advance. These non-subscription trips could easily be absorbed by a central call center.
Trip Scheduling
The services are completely demand responsive and adjust driver schedules accordingly. No more than three rides per 15-minute time slot are scheduled, and appointments are sometimes negotiated +/- one hour of the requested time. The call-taker does not schedule a trip to a specific run. Because trip reservations for the next day end at 3:00 PM rather than 5:00 PM, the scheduler can condense the runs for efficiency in the afternoon for the next day. Schedulers overbook runs because they tend to receive cancellations. Staff indicated that the schedulers, using their historical knowledge, can often schedule the trips better than the software. When assigning runs, the scheduler manually adjusts trips to create the most efficient pick-up and drop-off schedule for the driver manifests. The informal guideline for trip length is 90 minutes, but the majority of trips are completed within 30 minutes and rarely extend to 60 minutes.

Drivers can be used on all three services (IndeBus, IndeAccess, and IndeAccess Plus) as needed in order to meet peak demand, resulting in high productivity with low cost. All 18 drivers are cross-trained, allowing the operation to be flexible with its resources to meet demand. The operation has good driver retention and can satisfy the hours per week that employees desire to work (some prefer to work part-time and are flexible with their schedules, creating flexibility within the demand responsive operation).

Throughout the day, dispatch will sometimes transfer a trip from one driver to another to remain on schedule. The service has an informal “no-strand” policy, ensuring that riders will be returned home even as issues arise. A common issue is unexpected recovery time for dialysis patients. Overall, there are typically enough trips for three full-time paratransit runs. As a result, the City of Independence has about 30 revenue hours per day allocated for paratransit. Approximately ten riders utilize the service on Monday, Wednesdays, and Fridays for dialysis appointments. Peak times are generally 6:00 - 10:00 AM for pick-ups and 1:00 - 4:00 PM for returns.

Technology
Currently, First Transit utilizes Trapeze Simpli Transport software but is in negotiations with Reveal Management Systems to purchase new mobility management software. Reveal is an automated scheduling, routing, and dispatching system. Because Reveal is also utilized by KCATA and JCT, there is greater opportunity for future coordination between the agencies if they convert to this software. Utilizing similar technology and software would be an important element to consider in coordination efforts.

The services use a Nextel radio system but will be converting to a two-way radio system. First Transit utilizes TransLoc Real Time, a GPS-based system, to track fixed-route and paratransit vehicles. The dispatcher updates the fixed-route travel times so users can access real-time fixed-routes via the website and phone application.

Travel Training
First Transit provides travel training internally to educate riders about the fixed-route service and paratransit services. First Transit has had discussions with MTM about coordinating regional travel training. However, the City of Independence would then pay a cost per referral instead of providing training in-house with available staff. Staff indicated that there are typically very few requests for travel training.

Fare
The service for IndeAccess and IndeAccess Plus are both provided for $2.00 per one-way trip. IndeAccess Plus Travel Cards provide up to 24 eligible trips per quarter. IndeAccess Plus riders may use their Travel Cards as identification for reduced fare on the IndeBus. Passengers who have Medicaid may be eligible for free transportation to and from medical appointments and trips to the pharmacy. Currently, no passengers within the system are requesting verification to present to Medicaid for reimbursement, but it is available upon request. First Transit does not take the risk of providing free trips and then requesting reimbursement.
Method of Operation
Both services operate through a turnkey contract with First Transit. First Transit has been operating the services since 2012. Previously, the Department of Parks and Recreation operated the paratransit services.

Ridership
IndeAccess has 425 registered riders with 82 of the registered riders using the service on a regular basis. IndeAccess provided 8,654 one-way trips. IndeAccess Plus has 417 registered riders with 72 of the registered riders using the service on a regular basis. IndeAccess Plus provided 4,080 one-way trips.

Fleet Size and Composition

Annual Operating Budget and Funding
The annual operating budget for IndeAccess is $193,700. Based on the number of one-way trips provided, the operating cost for IndeAccess is $22.38 per trip. The annual operating budget for IndeAccess Plus is $129,100. Based on the number of one-way trips provided, the operating cost for IndeAccess Plus is $31.64 per trip. Cost-share between the fixed-route and paratransit operations is likely the reason for good trip costs. Sources of funding include: the City of Independence general fund, Hospital Corporation of America (HCA) supplement, and farebox revenue.

Policies

<table>
<thead>
<tr>
<th>Policy</th>
<th>Description</th>
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<tbody>
<tr>
<td>Negotiation Window</td>
<td>1 hour before to 1 hour after requested travel time for ADA service; Up to one day before or after requested travel time for non-ADA service</td>
</tr>
<tr>
<td>Pick-up Time Window</td>
<td>30 minutes (+/- 15 minutes)</td>
</tr>
<tr>
<td>Vehicle Wait Time</td>
<td>5 minutes</td>
</tr>
<tr>
<td>On Board Time</td>
<td>Informal maximum guideline: 90 minutes; Goal: 30 minutes</td>
</tr>
<tr>
<td>Mobility Device Accommodation</td>
<td>Up to 30 inches wide by 48 inches long, maximum 600 pounds</td>
</tr>
<tr>
<td>Driver Assistance</td>
<td>Curb-to-curb unless notified when scheduled; Drivers can assist to the threshold of the exterior door and must maintain sight of the vehicle</td>
</tr>
<tr>
<td>Package Limit</td>
<td>Six packages</td>
</tr>
<tr>
<td>On-Time Performance</td>
<td>No standard for on-time trip performance (informally, service operates about 95% on-time within the +/- 15 minute window)</td>
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<tr>
<td>Late Cancellation</td>
<td>Advanced Cancellation: By 5:00 PM the day prior, no impact on rider history</td>
</tr>
<tr>
<td></td>
<td>Same Day Cancellation: At least two hours prior to trip,</td>
</tr>
<tr>
<td></td>
<td>Late Cancellation: Less than two hours prior to trip, considered a no-show</td>
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<tr>
<td>No-Show Penalties</td>
<td>1st Offense: Courtesy letter</td>
</tr>
<tr>
<td></td>
<td>2nd Offense: Follow-up phone call</td>
</tr>
<tr>
<td></td>
<td>3rd Offense: Meeting with General Manager (suspension from subscription service)</td>
</tr>
</tbody>
</table>
Unified Government Transit: Dial-a-Ride and Aging Transit

General Description
Dial-a-Ride is an ADA complementary paratransit service that operates beyond the required 3/4 of a mile around fixed-routes to provide service within all of Wyandotte County. Aging Transit is a non-ADA demand responsive service for seniors. Aging Transit includes three different services:
1. Demand Response: Transportation for seniors within Wyandotte County
2. Congregate Meals: Transportation for seniors from their homes to designated nutrition sites
3. Meals on Wheels: Hot and frozen meals prescribed by a physician are delivered to homebound seniors

Eligibility Requirements and Application Process
To be eligible for Dial-a-Ride ADA service, individuals must be persons with disabilities. The application and certification process is through KCATA’s Share-a-Fare process. To be eligible for Aging Transit non-ADA service, individuals must be 60 years or older.

Trip Purposes
Dial-a-Ride serves any trip purpose, but most trips involve medical appointments, residential care, and work purposes. Aging Transit Demand Response serves trips for medical appointments and grocery shopping. Aging Transit Congregate Meals serves designated nutrition sites including the Argentine Community Center, Bethel Neighborhood Center, Edwardsville Court, Plaza Towers, Rosedale Towers, Vaughndale Towers, Westage Towers, and Strangers Rest.

Service Area
For both Dial-a-Ride and Aging Transit, the service area is Wyandotte County. Additionally, KCATA operates four fixed-routes within Wyandotte County. Therefore, KCATA provides ADA paratransit service within 3/4 of a mile of the KCATA fixed-routes in Wyandotte County, creating an overlap in service areas. Typically, the KCATA Share-a-Fare is contacted for out-of-county trips and trips that extend beyond Dial-a-Ride’s hours of service (i.e. weekends and weeknights after 9:00 PM). Otherwise, Share-a-Fare discourages intracity paratransit trips and will refer riders to Dial-a-Ride. Share-a-Fare currently provides approximately 500 trips each month within Wyandotte County, and therefore provides nearly as many trips as the Dial-a-Ride service.

Dial-a-Ride will provide service to the Metro Transit Centers within their service area (7th Street/Minnesota Avenue and 47th Street/State Avenue), but do not provide vehicle to vehicle transfers unless necessary. Staff expressed that riders are accustomed to trips being limited to Wyandotte County, but believe there is demand for regional trips and regional service would be desirable. In particular, there are a few riders who desire service to the Veterans Administration Medical Center office in Kansas City, Missouri. UGT is also willing to discuss designated transfer points at the Metro Transit Centers outside of Wyandotte County, including the Mission Transit Center and the 10th Street/Main Street Transit Center.

Days and Hours of Service
Dial-a-Ride operates Monday to Friday from 7:00 AM - 9:00 PM. Aging Transit operates Monday to Friday from 8:00 AM - 6:00 PM.

Trip Reservation Policies
Trip Reservation
Trip reservations are received Monday to Friday from 7:00 AM - 4:00 PM. Trip reservations must be made at least 24 hours in advance. Two dispatchers receive trip reservations (7:00 AM - 4:00 PM shift, 9:00 AM - 6:00 PM shift). From 6:00 PM - 9:00 PM, the evening supervisor is responsible for the duties. Maximum call hold time is three minutes with peak call time during the early morning and afternoon. The peak afternoon call time is
associated with the return trips, particularly medical appointments, which are all will-call trips. In the afternoon, UGT utilizes the Congregate Meals vehicles (which are typically done with their runs by 1:00 PM) to meet the demand for the will-call return trips.

Several riders are eligible for both Dial-a-Ride and Aging Transit. Currently, riders declare which service they would like to utilize. Eligibility requirements are not officially verified. Dial-a-Ride riders are given an exact pick-up time while Aging Transit trips are scheduled one hour prior to the rider’s appointment. Currently, trip reservation and scheduling is performed manually. The information is later entered digitally for record keeping purposes, resulting in duplicate effort for the same task.

Subscription Service
Officially, subscription service is not offered. However, Dial-a-Ride dialysis appointments, Demand Response dialysis appointments, Congregate Meal trips, and employment trips appear to be routine with a set list of riders. Unofficially, about 20 to 30 percent of the trips are subscription based.

Trip Scheduling
The dispatchers who receive trip reservations also assign the trips the night before. The dispatchers indicated that dialysis appointments block out a significant period of time. Trips for Congregate Meals and Meals on Wheels are automatically loaded from the Unified Government Area Agency on Aging each day.

UGT promotes a team mentality and the drivers are relied upon to volunteer to meet will-call return trips when available. At full capacity, UGT employs 36 to 39 union employees. Flexibility is important in order to provide quality performance and good customer service. At the current rate of approximately 1.2 trips per hour, there is capacity to improve efficiency. Currently, UGT places a focus on flexibility and customer service over operational efficiency.

Travel Training
Currently, UGT coordinates with KCATA for travel training.

Technology
Currently, UGT utilizes Trapeze Pass software, but the software is only used for recording purposes. Trip reservation and scheduling is completed manually. Dispatchers noted that when Trapeze Pass was implemented, the schedules produced were inaccurate and had to be manually overridden. They also indicated larger technology issues, such as server reliability. As a result, the dispatchers have found that recording trips by hand is more efficient and accurate at this time. Staff expressed that while some user error explains the non-utilization of the software, UGT also does not have the rider demand to utilize Trapeze Pass to its fullest extent. As a result, there is some duplication of effort with manual recording and digital recording.

UGT has a voice radio system for communication with drivers. They also have automatic vehicle location (AVL) to monitor vehicle location and assist with run management. The services do not currently use mobile data terminals (MDT) to communicate with dispatch. Actual pick-up times are recorded on the driver manifests.

Fare
Dial-a-Ride is provided for $3.00 per one-way trip. Aging Transit is provided for $1.00 per one-way trip. Congregate Meal transportation to designated nutrition sites is provided for $0.50 per one-way trip. For the designated nutrition sites, seniors are picked up from their homes and transported to the sites where they receive a nutritious meal and participate in various other activities such as arts and crafts and workshops.
**Method of Operation**
The services operate in-house.

**Ridership**
In 2013, the service had 4,500 registered riders between Dial-a-Ride and Aging Transit. In 2013, Dial-a-Ride provided 8,366 one-way trips. In 2013, Aging Transit provided approximately 14,880 one-way trips.

**Fleet Size and Composition**
The services maintains eight dedicated cutaway vehicles and one spare vehicle between Dial-a-Ride and Aging Transit Demand Response. Meals on Wheels utilizes three minivans and one refrigerated vehicle for delivery. Dial-a-Ride operates three runs for 23 revenue hours. Aging Transit operates five runs for 35 revenue hours. Congregate meals operates four runs for 21 revenue hours. Congregate Meals service is usually completed by 1:00 PM. Drivers then assist with will-call return trips for the Dial-a-Ride and Aging Transit services. Meals on Wheels operates four runs for 28 revenue hours. Meals on Wheels provides approximately 70 to 90 meals per route per day. Frozen delivery operates four days a week within four districts.

Based on the daily operating hours, UGT operates about 26.5 revenue-hours of Dial-a-Ride service per day (23 for the three dedicated runs, plus an estimated 3.5 of the congregate meals vehicles in the afternoon). UGT operates about 40.5 revenue-hours of Aging Transit Demand Response service per day. UGT also operates about 12 revenue-hours of Congregate Meals transportation per day. For the Dial-a-Ride ADA service, this suggests about 6,890 revenue-hours per year. With 8,366 Dial-a-Ride trips per year, this suggests a productivity of about 1.21. For non-ADA (Aging Transit Demand Response plus Congregate Meals), this suggests about 13,650 revenue-hours per year. Combined, these services provide 14,880 trips per year, suggesting a productivity of about 1.09 hours per year. This suggests a combined productivity of about 1.13.

**Annual Operating Budget and Funding**
The annual operating budget for Dial-a-Ride is $145,162. Based on the number of one-way trips provided, the operating cost for Dial-a-Ride is $17.35 per trip. The annual operating budget for Aging Transit is $875,162. Combined, the budget for the services is $1,020,324. Based on the number of one-way trips provided, the operating cost for IndeAccess is $58.81 per trip. If trips and budget are combined, the operating cost is $43.89 per trip. Sources of funding for Dial-a-Ride include federal, state, and local funding. Sources of funding for Aging Transit include a mill levee and general funds.

**Policies**

<table>
<thead>
<tr>
<th>Policy</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation Window</td>
<td>As necessary</td>
</tr>
<tr>
<td>Pick-up Time Window</td>
<td>30 minutes (+/- 15 minutes)</td>
</tr>
<tr>
<td>Vehicle Wait Time</td>
<td>Drivers will wait as necessary and shift drivers to accommodate trips</td>
</tr>
<tr>
<td>On Board Time</td>
<td>30 minutes (rarely more than 15-20 minutes)</td>
</tr>
<tr>
<td>Mobility Device Accommodation</td>
<td>No limit on mobility devices with a maximum of 1200 lbs.</td>
</tr>
<tr>
<td>Driver Assistance</td>
<td>As necessary</td>
</tr>
<tr>
<td>Package Limit</td>
<td>None</td>
</tr>
<tr>
<td>On-Time Performance</td>
<td>Not available</td>
</tr>
<tr>
<td>Late Cancellation</td>
<td>Officially, at least two hours prior to trip; not enforced</td>
</tr>
<tr>
<td>No-Show Penalties</td>
<td>Not enforced and typically not an issue</td>
</tr>
</tbody>
</table>
Johnson County Transit: Special Edition and SWIFT

General Description
Special Edition is an enhanced mobility, shared-ride service. It is not ADA complementary paratransit. SWIFT provides home to worksite trips for clients of Johnson County Developmental Service.

Eligibility Requirements and Application Process
Eligible riders must be 65 years or older, have a documented disability, or have a monthly family income within low-income guidelines established by Johnson County. Existing riders who were eligible for service under the previous 60 years or older requirement are grandfathered. Youth 13-18 years with a documented disability may ride for medical appointments only. Riders must also be a resident of Johnson County and live or have means to travel within the designated service area.

Passengers must submit a four-page application, including a statement from a physician stating the nature of the disability. If approved, riders are issued an ID card. Applications from low-income applicants are transmitted to the Johnson County Department of Human Services for review and approval.

Trip Purposes
Special Edition serves any trip purpose within the designated service area. Special Edition travels into specified areas of Kansas City, Missouri and Kansas City, Kansas for medical appointments only. SWIFT provides home to worksite trips for Johnson County Developmental Service clients.

Service Area
The designated service area for Special Edition and SWIFT is bounded by 159th Street on the south, K-7 and Hedge Lane on the west, State Line Road on the east, and 47th Street on the north. Special Edition travels into specific areas of Kansas City, Missouri and Kansas City, Kansas for medical appointments only. There are currently no designated transfer points.

For Olathe riders, trips must travel outside the Olathe city limits to be eligible. Riders are referred to the Olathe Taxi Coupon Program if they request internal trips within the City of Olathe. There is not a similar agreement regarding internal trips within Shawnee (Shawnee provides the CityRide program). Special Edition is available for curb-to-curb service in rural areas of Johnson County when three or more riders request trips on the same day. In these cases, trips within the city limits are available on the designated days: Monday in Spring Hill, Tuesday in DeSoto, Thursday in Edgerton and Gardner, and Friday in Stanley and Stilwell.

Staff noted that JCT implemented a small expansion of the service area through a six-month pilot project that allows trips to extend one-half mile farther south and west of the current service boundaries to designated program locations. Currently, the pilot project only serves a new adult day services provider, WillowTree Supports, located west of K-7. JCT last expanded the service boundaries approximately seven years ago. Staff expressed that, because of continued development and growth, there appears to be a need to expand the service boundary; however, County funding availability has constrained the service area.

Days and Hours of Service
Special Edition and SWIFT operate Monday to Friday from 6:00 AM - 6:00 PM. Holiday closures include New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas. Reduced service may be implemented on observed holidays including Martin Luther King Day, the Friday after Thanksgiving, Christmas Eve, and New Year’s Eve. Current peak demand period for SWIFT are approximately 6:30 AM - 9:00 AM and from 3:00 PM - 5:00 PM.
Trip Reservation Policies

Trip Reservation
Trip reservation for Special Edition is available Monday to Friday from 8:00 AM - 5:00 PM. Trips may be scheduled up to seven days in advance and no later than two days prior to the trip.

Four people work in the call and control center during regular weekday hours of operation including a Special Edition reservationist, Special Edition dispatcher, and a fixed-route customer service agent. The reservationist takes calls and enters them into the Reveal system. Trips are entered into the system, but not scheduled to actual runs until the day before the trip. The system keeps track of trips by time and guidelines have been developed to limit the number of trips during any given time period to not exceed capacity.

Staff noted that demand is currently exceeding capacity. The services typically reach capacity one week in advance, resulting in approximately five denials each day (denied trips are placed on a wait list). There is typically less demand in the summer.

Riders must call the Special Edition Scheduler or communicate through the Dial 7-1-1 Kansas Relay Center to schedule trips. Riders may not schedule service through the taxi company. JCT dispatch and the 10/10 Taxi dispatch will communicate as needed. Trips are not assigned when received.

Subscription Service
Premium reservation (subscription) service is available to a limited number of passengers who have schedules with a degree of regularity from week to week. Riders who utilize premium service are invoiced monthly rather than pay cash fare for each trip. There is currently a waiting list for premium service.

Trip Scheduling
Reveal Management Systems handles the scheduling and dispatch for the services. The manager of the call center currently schedules all trips that are in the system. He develops detailed manifests for the vehicles and runs operated by First Transit. A second manifest (a list of trips) is also developed for 10/10 Taxi. The scheduling process attempts to maximize the use of First Transit vehicles and runs. Trips that do not fit well or productively on these runs are then assigned to 10/10 Taxi. Trips are scheduled one to two days in advance.

To keep within budget, JCT has established a limit of 52 First Transit vehicle-hours of service per weekday. There are also limits on the number of trips assigned to 10/10 Taxi each day.

Special Edition schedules seven morning runs and seven evening runs at peak times. SWIFT has a set schedule of rides and operates twelve morning runs and twelve evening runs at peak times. SWIFT will accommodate individual riders with exceptional needs as necessary. Project SEARCH has one morning run and one evening run. Specifically, the Heart Strings Community Foundation has peak use from 8:00 - 9:00 AM and the Lake Mary Center from 2:00 - 3:30 PM. The services operate at approximately 2.4 trips per revenue hour.

Travel Training
No travel training is provided through JCT.

Technology
JCT utilizes Reveal software for scheduling. 10/10 Taxi also utilizes Reveal software. Some JCT vehicles have mobile data terminals (MDT) for communication with central dispatch. JCT will be outfitting the vehicles with tablets to monitor routes.
Fare
Fares are based on mileage “as the crow flies” for regular service. Fare is $5.20 for a trip less than ten miles, $6.20 for a trip ten to twenty miles, and $7.20 for more than twenty miles. Reduced fare trips are available for $3.30 but JCT may also charge an additional $0.75 per zone for travel outside the designated area. Reduced fare qualification is based on low-income guidelines. For convenience, Special Edition passes may be purchased in increments of ten punches. Aides with a documented physician statement and Aide ID travel free of charge.

Method of Operation
JCT has three separate contracts for the operation of Special Edition and SWIFT services. Reveal Management Systems has a contract to manage reservations, scheduling, and dispatch, and develop driver manifests. JCT contracts with First Transit to hire and supervise drivers and operate and maintain vehicles. JCT also contracts with 10/10 Taxi for the provision of service.

KCATA is absorbing the management of JCT. Johnson County will pay KCATA $450,000 annually to operate the JCT contracts. KCATA estimates they will need five positions to perform this function (including contract manager, planner, and IT staff). Staff expressed that various services in the region need to be operationally merged so that it is transparent to the rider and they can ride throughout the metropolitan area.

JCT will continue to own the facilities and vehicles and monitor the use and performance of services through the existing turnkey contract with First Transit. The First Transit agreement is a three-year contract with two two-year extension options. JCT also has a contract with 10/10 Taxi for supplemental, overflow service. First Transit schedules trips to both its own vehicles and to 10/10 Taxi as needed. 10/10 Taxi owns their own vehicles and the drivers are independent contractors. There is a pool of drivers specifically trained for Special Edition service with an emphasis on customer service and sensitively meeting the needs of the clientele.

Ridership
In 2013, the service had approximately 2,000 registered riders shared between Special Edition and SWIFT. In 2013, Special Edition provided 56,650 one-way trips. In 2013, SWIFT provided 45,430 one-way trips. Staff indicated that about 260 trips are scheduled each day. About 160 trips are completed by 10/10 Taxi with the remaining trips using internal wheelchair-accessible vehicles. About 26 trips per day are provided to riders who use wheelchairs.

Fleet Size and Composition
In 2013, the services maintained 43 coaches and 35 wheelchair-accessible cutaway vehicles shared between Special Edition and SWIFT. Many of the cutaway vehicles are used for transportation to and from group homes. Supplemental service is provided through 10/10 Taxi. Over time, staff believes that the fleet will downsize as more service is completed by 10/10 Taxi. By utilizing taxis for some trips and maximizing the use of dedicated vehicles operated by First Transit, the Reveal Management Systems manager indicated that the Special Edition service operates at a productivity of about 2.4 trips per vehicle-revenue-hour.

SWIFT vehicles are parked at The Worship Center of Kansas City, located adjacent to Johnson County Developmental Supports, during the day. JCT pays the church $250 per month for vehicle storage. One vehicle returns to the JCT in order to shuttle the drivers.

Annual Operating Budget and Funding
In 2013, the annual operating budget for Special Edition was $3,313,681. Based on the number of one-way trips provided, the operating cost for Special Edition is $58.49 per trip. In 2013, the annual operating budget for SWIFT was $941,086. Combined, the budget for the services is $4,254,767. Based on the number of one-way
trips provided, the operating cost for SWIFT is $20.72 per trip. If trips and budget are combined, the operating cost is $41.68 per trip. The operating cost for 10/10 Taxi is approximately $15.00 per trip. Sources of funding for Special Edition: federal funding (12.7%), state funding (9.7%) county funding (69.6%), farebox revenue (7.3%), and other revenue (0.8%). Sources of funding SWIFT include: federal funding (4.7%), county funding (76.0%), farebox revenue (13.9%), and other local revenue (5.5%) that includes the New Freedom grant and scholarship rides reimbursement.

**Policies**

<table>
<thead>
<tr>
<th>Policy</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation Window</td>
<td>No formal window; trips negotiated if needed to not exceed capacity</td>
</tr>
<tr>
<td>Pick-up Time Window</td>
<td>30 minutes (+/- 15 minutes)</td>
</tr>
<tr>
<td>Vehicle Wait Time</td>
<td>5 minutes</td>
</tr>
<tr>
<td>On Board Time</td>
<td>60 minutes maximum</td>
</tr>
<tr>
<td>Mobility Device Accommodation</td>
<td>Up to 30 inches wide by 48 inches long, maximum 600 pounds</td>
</tr>
<tr>
<td>Driver Assistance</td>
<td>Curb-to-curb</td>
</tr>
<tr>
<td>Package Limit</td>
<td>No package service</td>
</tr>
<tr>
<td>On-Time Performance</td>
<td>Not requested (not ADA paratransit)</td>
</tr>
<tr>
<td>Late Cancellation</td>
<td>At least two hours in advance</td>
</tr>
<tr>
<td>No-Show Penalties</td>
<td>No formal no-show suspension policy in Rider Guide</td>
</tr>
</tbody>
</table>

**First Stakeholder Meeting**

In October 2014, the first of three stakeholder meetings was held with the Mobility Advisory Committee. The purpose of the meeting was to discuss existing services, challenges, and initial opportunities for improved coordination. The challenges identified by the group along with the frequency the topic was mentioned are outlined in Table 3. Similarly, the potential opportunities are outlined in Table 4. The challenges and opportunities helped guide the study team’s technical research of potential coordination strategies in the next phase of the study. The meeting notes for the first stakeholder meeting are included in Appendix B.
Table 3: Challenges

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional travel (i.e. service areas, commuter route accessibility, eligibility)</td>
<td>6</td>
</tr>
<tr>
<td>Demand exceeds financial capacity</td>
<td>5</td>
</tr>
<tr>
<td>Non-dedicated funding sources</td>
<td>5</td>
</tr>
<tr>
<td>Limitations with services (i.e. trip purpose, passengers, coordination opportunities)</td>
<td>3</td>
</tr>
<tr>
<td>Volunteer drivers and limitations with personal vehicles</td>
<td>3</td>
</tr>
<tr>
<td>Changing demographics</td>
<td>2</td>
</tr>
<tr>
<td>Trip fare</td>
<td>2</td>
</tr>
<tr>
<td>Marketing and awareness</td>
<td>2</td>
</tr>
<tr>
<td>Limited service hours during evenings and weekends</td>
<td>1</td>
</tr>
<tr>
<td>Rider expectations</td>
<td>1</td>
</tr>
<tr>
<td>Fleet (i.e. parking, maintenance)</td>
<td>1</td>
</tr>
<tr>
<td>Driver training</td>
<td>1</td>
</tr>
<tr>
<td>Cost effective options</td>
<td>1</td>
</tr>
<tr>
<td>Statutory requirements</td>
<td>1</td>
</tr>
<tr>
<td>Driver assistance (i.e. curb-to-curb, door-to-door, through door)</td>
<td>1</td>
</tr>
<tr>
<td>Data for number of trips vs. number of riders served</td>
<td>1</td>
</tr>
<tr>
<td>Data for ambulatory riders vs. non-ambulatory riders (i.e. fleet composition, funding)</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 4: Opportunities

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service areas (i.e. expand boundaries, underserved areas)</td>
<td>6</td>
</tr>
<tr>
<td>Technology (i.e. software, GPS systems, card-based fare systems)</td>
<td>5</td>
</tr>
<tr>
<td>Regional call center</td>
<td>4</td>
</tr>
<tr>
<td>Increase efficiency</td>
<td>4</td>
</tr>
<tr>
<td>Willingness to cooperate among large and small operations</td>
<td>4</td>
</tr>
<tr>
<td>Eligibility requirements</td>
<td>4</td>
</tr>
<tr>
<td>Funding opportunities (i.e. ride sponsorship, funding from private businesses)</td>
<td>3</td>
</tr>
<tr>
<td>Regional branding</td>
<td>2</td>
</tr>
<tr>
<td>Cost allocation</td>
<td>1</td>
</tr>
<tr>
<td>Combined management</td>
<td>1</td>
</tr>
<tr>
<td>Integrated services</td>
<td>1</td>
</tr>
<tr>
<td>Work with contractors (i.e. allocate designated drivers, familiarity with riders)</td>
<td>1</td>
</tr>
<tr>
<td>Organize group trips</td>
<td>1</td>
</tr>
</tbody>
</table>
PART II
Coordination Options
Part II Summary

The next part of the study summarizes options for increased coordination of services and other efforts that can be taken to improve mobility for seniors and people with disabilities. Several opportunities for increased coordination and enhanced mobility were identified by the Mobility Advisory Committee in October 2014. The opportunities are summarized below:

- Coordination of ADA services
- Coordination of other demand response services
- Coordination of agency-specific services
- Expanded volunteer driver programs
- Regional eligibility determination
- Expanded travel training
- Expanded information and referral services
- Improved public information
- Implementation of advanced technology
- Regional electronic fare system

For each of the eight opportunities, coordination options are presented with best practices described as appropriate. The benefits and challenges of each coordination opportunity are also explained. It is also important to note that many of the coordination options are interrelated and some options may be contingent on the implementation of others.

The coordination options were then presented to the Mobility Advisory Committee in February 2015 for further input. The selected options for further consideration and possible implementation are included in more detail in Phase III of the study.

Coordination of ADA Services

Current Services

Combined ADA paratransit and non-ADA demand responsive services are provided by three agencies: KCATA, the City of Independence, and UGT. Each of these agencies operates non-commuter fixed-route transit service and therefore is required to provide ADA paratransit service within 3/4 of a mile of all fixed-routes. Each agency also supplements this required ADA paratransit with demand responsive service for seniors. JCT operates only commuter fixed-route transit service and therefore is not required to provide ADA paratransit. JCT does, however, provide non-ADA demand responsive transportation service. These four agencies are referred to as the core agencies.

Overlap in ADA Paratransit Service Operations

There is significant overlap of current ADA paratransit services. KCATA operates local fixed-routes into the City of Independence as well as Wyandotte County and therefore is required to provide ADA paratransit service within 3/4 of a mile of all fixed-routes. Each agency also supplements this required ADA paratransit with demand responsive service for seniors. JCT operates only commuter fixed-route transit service and therefore is not required to provide ADA paratransit. JCT does, however, provide non-ADA demand responsive transportation service. These four agencies are referred to as the core agencies.

Even with this division of service, there is significant operational overlap and duplication. Figure 5 shows the ADA paratransit service areas of all three agencies as well as the number of trips provided by each per year. As shown, IndeAccess provides 8,654 trips per year to ADA eligible riders making local trips within the City of Independence, and 4,080 trips to seniors (12,734 total). Share-a-Fare then provides 1,180 trips to and from
Independence each month (or 14,160 per year) trips per year to ADA eligible riders traveling to or from the City of Independence.

In Wyandotte County, UGT provides 8,366 trips per year to ADA eligible riders making trips within the County, and 14,880 trips for seniors (23,246 total). Share-a-Fare provides another 500 trips each month (or about 6,000 per year) to ADA eligible riders traveling to and from Wyandotte County.

The volume of ADA service provided by each agency suggests that KCATA operates as many vehicle-hours of service within Independence as the City, and a significant portion of the demand response trips within Wyandotte County. If services were coordinated, it is likely that the total service could be provided more efficiently. Currently, Share-a-Fare vehicles deadhead into and out of Independence and Wyandotte County when providing inter-area trips. If the services were coordinated, Share-a-Fare vehicles could be used to provide local trips when operating in each area. Vehicles that are now used only locally could also assist with some inter-area trips.

**Overlap involving JCT Service Operations**

Some overlap also exists between the services provided by KCATA and JCT. As also shown in Figure 5, KCATA provides some ADA paratransit service in eastern Johnson County. Because JCT does not operate ADA paratransit, there is no overlap in ADA service as there is in Independence and Wyandotte County. Still, KCATA Share-a-Fare vehicles are operating in areas where JCT Special Edition vehicles are also providing service. As noted above, JCT also provides transportation to Kansas City, Kansas and to Wyandotte County for specialized medical needs. JCT vehicles therefore sometimes overlap with vehicles operated by both KCATA and UGT in these areas.
Figure 5: Overlapping ADA and non-ADA Services Areas with Annual Trips
Opportunities for Coordination
Several options for the coordination of services between KCATA, the City of Independence, UGT, and JCT are described below.

Coordination of Trip Reservations and Scheduling
One option would be to coordinate the trip reservation and scheduling process. Instead of calling separate numbers for service in each area, riders throughout the area would be directed to call a single number. This approach of a one-call center has been implemented by a number of transit agencies (see Expanded Information and Referral Services section).

It is recommended that KCATA, as the largest provider of paratransit and demand responsive services, house the central reservation service. In keeping with the current service structure, it is also recommended that KCATA arrange for the scheduling of trips through Reveal Management Systems.

This option is illustrated in Figure 6. The City of Independence, UGT, and JCT would each contract with KCATA for trip reservations and scheduling services. Under this option, each agency would still contract for the delivery of service in its area. Reveal Management Systems would provide run schedules to each operator the evening before the day of service. KCATA would still have its service delivered through Transdev; the City of Independence would still contract with First Transit; JCT would still contract with First Transit and 10/10 Taxi; and UGT would still operate its vehicles in-house.

Benefits and Challenges
The benefit of this option would be simplifying contact for paratransit and demand responsive services. Riders would not need to call the City of Independence and UGT for local service and then KCATA for regional service. This option would also support the concept of a regional mobility manager. In addition to taking trip reservation calls, KCATA could take information calls and provide information about all services in the area.

This option would not require significant organizational change and could be implemented within current service provider contracts. The contract between the City of Independence and First Transit would need to be modified slightly to reassign the trip reservation and scheduling function to KCATA. The City of Independence could still maintain the contract for other aspects of operation, including operation of fixed-route services. This option is also consistent with the new management contract between KCATA and JCT. The difference would be that calls for JCT services would be taken by KCATA rather than by Reveal Management Systems directly.

Figure 6: Centralized Trip Reservation and Scheduling Structure
Commingling of Trips and Service Delivery
A second option would be to not only create a single call center, but commingle trips and use vehicles now operated separately to provide service in the most efficient way possible. For example, KCATA vehicles could be used to assist with local trips when operating in Independence, Wyandotte County, or Johnson County. Similarly, JCT vehicles could assist with local trips in Wyandotte County or the KCATA service area.

For this option to be effective, ADA as well as most non-ADA trips provided in the area would have to be coordinated. In Independence, the provision of ADA and non-ADA trips is fully integrated on the same vehicles. It would not be efficient to separate these services and only coordinate the provision of ADA trips.

In Wyandotte County, the Dial-a-Ride and Aging Transit services are similarly integrated and provided on the same fleet of eight vehicles. Three vehicles are dedicated to Dial-a-Ride and demand response service. Five vehicles provide demand response service and also transport seniors to and from congregate meal sites. Trips on each of these services are combined on the same vehicles. It would not be efficient to separate the operation of these services and coordinate only Dial-a-Ride service.

However, Meals on Wheels transportation in Wyandotte County is operated separate from the other services. Three minivans and one refrigerated truck are used exclusively to deliver meals to residents and food and supplies to the congregate meal sites. These vehicles are not designed to transport passengers. There is also a very close working relationship between UGT and the Unified Government Area Agency on Aging (AAA) for Meals on Wheels service. The AAA uploads information to UGT each day on seniors who are to receive meals. The actual delivery of meals is then recorded on hand-held scanners and the information is downloaded and provided to the AAA. Because of the unique nature of Meals on Wheels transportation and the close and unique working relationship between UGT and the AAA, it is recommended that this portion of the transportation program remain with UGT.

Benefits and Challenges
Commingling of trips would improve operating efficiency, particularly for Share-a-Fare vehicles providing inter-regional trips in Wyandotte County and Independence. Currently, Share-a-Fare vehicles deadhead to and from pickups and drop-offs in these areas. If Share-a-Fare vehicles were able to also assist with local service while in each area, the total number of vehicle-revenue-hours needed to operate the combined local and regional service should be reduced. This could either allow more trips to be provided for the same cost, or vehicle-hours to be reduced and overall costs lowered.

The same benefit would exist, to a lesser degree, for JCT vehicles. When making trips to medical facilities in Kansas City, JCT vehicles would not have to deadhead back to Johnson County or wait for return trips.

The main challenge of commingling trips is agreeing on a fair and equitable way to allocate costs between the agencies. For example, if KCATA’s contractor and vehicles are used to provide local service in Independence, a mechanism for charging the appropriate portion of the costs to Independence would be needed. Two methods of cost allocation are typically used when trips are commingled – cost per trip and cost per passenger-mile. Cost per trip is used when the characteristics of trips (mainly average trip length) is similar between agencies or communities. If the trips provided by each agency have different average lengths, cost per passenger-mile is used. Since local trips in Independence, Wyandotte County, and Johnson County are likely to be shorter than trips provided throughout the KCATA area, it is recommended that costs be allocated based on passenger-miles.

A second challenge would be managing the overall service within the maximum budgets established by each agency. The cost of local service is typically managed by controlling the number of vehicles and vehicle-hours of
service. Using vehicles from other (regional) fleets to support local transportation would create additional capacity. The total number of trips provided would need to be managed to keep total service within budget.

A third challenge with commingling trips is consistent operating policies. Trips for different programs cannot easily be commingled if key operating policies are not the same. For example, if there are different on-time performance windows for each program, riders from different programs will be looking for vehicles at different times and this may be difficult for the drivers and dispatchers to manage.

Table 5 shows key policies adopted by the core agencies. As shown, there is consistency in the on-time window, the vehicle wait time, and late cancel policies. There are some differences in driver assistance and package policies that may need to be negotiated. Only the City of Independence does any significant trip time negotiation, so that should not be an issue.

Table 5: Key Operating Policies

<table>
<thead>
<tr>
<th>Policy</th>
<th>KCATA</th>
<th>Independence</th>
<th>UGT</th>
<th>JCT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation window</td>
<td>Trip requests currently not negotiated</td>
<td>+/- one hour</td>
<td>No formal window; negotiated as needed</td>
<td>No formal window; negotiated as needed</td>
</tr>
<tr>
<td>On-time window</td>
<td>+/- 15 minutes</td>
<td>+/- 15 minutes</td>
<td>+/- 15 minutes</td>
<td>+/- 15 minutes</td>
</tr>
<tr>
<td>Vehicle wait time</td>
<td>5 minutes</td>
<td>5 minutes</td>
<td>No formal policy</td>
<td>5 minutes</td>
</tr>
<tr>
<td>Driver assistance</td>
<td>Door-to-door</td>
<td>Door-to-door</td>
<td>As needed</td>
<td>Curb-to-curb</td>
</tr>
<tr>
<td>Package limits</td>
<td>5 packages</td>
<td>6 packages</td>
<td>No formal limit</td>
<td>No package assistance</td>
</tr>
<tr>
<td>Late cancel policy</td>
<td>At least 2 hours prior to trip</td>
<td>At least 2 hours prior to trip</td>
<td>At least 2 hours prior to trip</td>
<td>At least 2 hours prior to trip</td>
</tr>
</tbody>
</table>

Consolidation of Operations
Another option would be to coordinate contracts for service delivery. Rather than having each agency maintain separate contracts with private providers, KCATA, as the manager of reservations and scheduling, could develop contracts directly with service providers.

This option is illustrated in Figure 7. The City of Independence, UGT, and JCT would have contracts with KCATA to manage ADA and non-ADA paratransit and demand responsive services. KCATA would then contract for scheduling services (currently Reveal Management Systems) as well as service provision (currently Transdev, First Transit, and 10/10 Taxi). UGT, which operates service in-house could continue to provide service directly, or could opt to have services provided by contractors through KCATA.

Benefits and Challenges
This option would simplify the management and oversight of services. KCATA would have a direct contractual relationship with service providers. The City of Independence and JCT would not have to intervene if there were contractual service delivery issues.

This option would be a logical extension of the management contract recently negotiated between KCATA and JCT. Since KCATA has responsibility for the overall management of services, it would make sense for it to have a direct relationship with contracted service providers. When current contracts between JCT, First Transit, and 10/10 Taxi expire, KCATA could seek and execute new contracts with these or other providers.
In Independence, where the operation of the IndeBus fixed-route service and IndeAccess paratransit service is highly integrated, it may not be cost-effective to have separate contracts for these two services. Therefore, if services in Independence are consolidated under KCATA, the only cost-effective option might be to have KCATA contract for and manage both the IndeBus and IndeAccess services.

Another benefit of consolidated operations is that non-ADA service could be easily and efficiently expanded to be more regional rather than local. If the City of Independence, UGT, or JCT wanted to provide more regional service for seniors or other non-ADA riders, these trips could easily be accommodated on the regional fleet. Since vehicles would already be operating throughout the area for ADA service, non-ADA trips could be cost-effectively combined on existing runs.

Under this option, it is recommended that each agency remain involved in the selection of service providers. KCATA could manage the RFP process for service providers, but the City of Independence, UGT, and JCT, would participate in the process as members of the selection committee.

The challenges that would apply to commingling of trips would also apply to the consolidation of services. A fair and equitable method for allocating the cost of trips would need to be developed. Differences in key operating policies would also need to be negotiated.

Figure 7: Consolidated Operation of Core Agencies

**Coordination of Other Non-ADA Demand Responsive Services**

**Current Services**

Within the Kansas City metropolitan area, non-ADA demand responsive services are also provided by several other agencies and municipalities. To the north and east of the metropolitan area, OATS provides demand responsive service in Platte, Clay, and Jackson counties and in several communities within these counties. The City of Liberty also provides service to seniors and persons with disabilities, and Excelsior Springs operates a
general public route-deviation service. The Cities of Olathe and Shawnee operate taxi voucher programs for seniors, persons with disabilities, and low-income residents (Olathe only).

Overlap in Service Operations
There is some overlap of services. City-specific services in Liberty and Excelsior Springs overlap with countywide service provided by OATS in Clay County. City-specific services in Blue Springs and Lee’s Summit overlap with the Jackson County service, but all three are operated by OATS, so can be coordinated internally. The taxi subsidy programs in Olathe and Shawnee also overlap in area with the JCT Special Edition service. To help address this, JCT and the City of Olathe have an agreement to avoid duplication. If travel is within the City of Olathe, JCT refers riders to the Olathe Taxi Coupon Program. JCT only provides trips to and from the City of Olathe. The non-ADA demand responsive services throughout the area are also very cost-effective, with per trip costs ranging from only $6.52 to $22.36, and most of the services operating at less than $20.00 per trip. It is unlikely that coordination could lower costs. The main issue appears to be one of capacity and funding, rather than overlap or coordination.

Demand responsive transportation in the more rural areas of Platte, Clay, and Jackson counties is somewhat limited. In many areas, service is operated on only certain days and for limited hours. Much of the service in Platte, Clay, and Jackson counties is, however, provided by OATS. A fleet of 76 vehicles is shared throughout the area and, as the lead transportation agency in these counties, OATS is able to internally coordinate services. OATS also coordinates with other providers of service. Referrals are routinely made if OATS or other agencies are not able to accommodate all trip requests. In Jackson County, because of limited capacity, OATS often refers callers if they are traveling in areas served by the City of Independence or KCATA.

Opportunities for Coordination
Improving public awareness and access to the many different services could be an opportunity for coordination. If public awareness and access were improved, though, additional funding and capacity would be needed, as current services are typically capacity constrained. Without significant additional funding, the only option for expanding service capacity would be to make greater use of volunteers. Options for improving public awareness and use of volunteers are discussed in Improved Public Information Services section and Expanded Volunteer Driver Programs section.

Coordination of Agency-Specific Services
Current Services
A number of social service agencies also provide or arrange for transportation within the area. The most significant of these are services by the Missouri County Boards or sub-agencies for seniors and people with developmental disabilities. These services include the Platte County Board for the Developmentally Disabled, Platte County Senior Fund, Clay County Senior Services, and Developmental Disability Services of Jackson County’s EITAS program.

Overlap in Service Operations
The four social services generally operate within their respective counties. While trips from Platte County and Clay County can extend a specific distance beyond their county borders, riders must be residents of the specific county due to the funding mechanism. As a result, there is very little overlap in service operations.

Opportunities for Coordination
These agency-specific services provide very targeted and defined transportation. Clay County Senior Services and the Platte County Senior Fund services address long-distance transportation and other priority needs that may not be able to be served by other providers in the county. The Platte County Board and Jackson County’s
EITAS services primarily provide group transport to program sites and other work locations. Vehicles are in use at certain times of the day—mainly early morning and mid-afternoon when this transportation is needed.

For the most part, coordination of these services with other public demand responsive transportation would not be advantageous. The Platte County Board and Jackson County services are highly grouped and efficient. Clay County Senior Services and the Platte County Senior Fund services, with their large service areas, could not easily be combined with other county-based or city-based services. Even OATS, which has a large catchment area, would not be able to provide some of the long-distance trips that can extend into Kansas.

Public Awareness and Access
The coordination activity that could possibly benefit Clay County Senior Services and the Platte County Senior Fund would be increased public awareness of the service. This might be provided through a one-call/one-click service (see Expanded Information and Referral Services section). Coordination with existing volunteer driver programs, or expansion of volunteer driver services, is also a possible area of opportunity.

Travel Training
The coordination activity that might best assist the Platte County Board and Jackson County’s EITAS is expanded travel training. This option is also discussed in the Expanded Travel Training section.

Shared Use of Vehicles
Finally, the Platte County Board and Jackson County’s EITAS might be able to assist other agencies and programs by making vehicles available at times when they are not in use. This could be done by negotiating vehicle sharing arrangements, where another agency would provide a driver and pay to use vehicles during down times, or by providing a vehicle and driver and operating service under contract with other agencies.

Expanded Volunteer Driver Programs
Current Services
Two agencies, Johnson County’s Catch-a-Ride and Jewish Family Services’ JET Express, offer volunteer driver programs to arrange for transportation within the area. In general, both services have difficulty recruiting enough volunteer drivers to meet the transportation demands.

Overlap in Service Operations
The two volunteer driver programs overlap significantly. The programs are primarily located in Jackson County and Johnson County, leaving a void in the northern areas of Clay, Platte, and Wyandotte counties.

Selected Best Practices
Volunteer driver programs often arise from the communication and coordination of multiple organizations and government agencies concerned about the transportation needs of seniors and persons with disabilities. The use of volunteers is less expensive than paid employees for providing ADA paratransit and demand response trips, although there are expenses for recruitment, training, and administration tasks that should be considered. While some transit services are limited by service boundaries and hours, volunteer drivers have the ability to cross jurisdictional boundaries and operate during evening and weekend hours depending on driver flexibility. Following are descriptions of several different volunteer driver strategies and models. The best practices are summarized in Table 6.
Table 6: Volunteer Driver Program Best Practices

<table>
<thead>
<tr>
<th>Location</th>
<th>Vehicle</th>
<th>Key Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sonoma County Transit</td>
<td>Agency-supplied</td>
<td>Part-time volunteer drivers during peak hours; Use of agency-supplied vehicles; Collaborates with regional volunteer center to recruit drivers</td>
</tr>
<tr>
<td>Neighbor Ride</td>
<td>Personal</td>
<td>Identification on personal vehicles (i.e. magnet)</td>
</tr>
<tr>
<td>Dane County</td>
<td>Personal</td>
<td>Enables volunteers to accumulate ride credits for assisting with travel training; Volunteers assist riders at the Transit Transfer Center</td>
</tr>
<tr>
<td>RideNet</td>
<td>Personal</td>
<td>Enables volunteers to accumulate “ride credits” for driving; Provides assistance to purchase personal vehicles for volunteer drivers</td>
</tr>
<tr>
<td>TRIP</td>
<td>Personal</td>
<td>Mileage reimbursement-based model; Riders help recruit own drivers</td>
</tr>
</tbody>
</table>

**Sonoma County Transit: St. Cloud, Minnesota**

The Volunteer Center of Sonoma County in the San Francisco Bay area schedules volunteer drivers to help meet demand for Sonoma County Transit during peak and other time periods. The strategy eliminates the need to have a full-time paid driver shift to cover only a few hours. The volunteers are provided with basic training, attend periodic safety meetings, and use sedans provided by Sonoma County Transit. Most volunteer drivers have a four-hour shift. The use of part-time volunteer drivers reduces the use of paid drivers by nearly 30 percent on some days, a significant cost savings for the agency.

**Neighbor Ride: Howard County, Maryland**

Led by the Howard County’s Office of Aging and a local coalition of businesses, transportation providers, and senior groups, Neighbor Ride was established to provide various local and long distance trips. Although drivers use their personal vehicle, when operating, drivers wear name badges and attach a magnetic Neighbor Ride sign to their vehicle. Riders must establish an account with the program, from which funds are drawn to pay for trips. Neighbor Ride’s original team of 20 volunteers has grown to over 300 volunteers in the past ten years.

**Dane County, Wisconsin**

Although not volunteer driver program, Dane County established a “time bank” barter network that allows some seniors and riders with disabilities who know the fixed-route and/or paratransit system well to bank time for training new riders. As a result, volunteers indirectly receive reimbursement for their time. Dane County also manages a transit transfer center to support riders with disabilities. As a result, riders can cross jurisdictional transit boundaries. Volunteer Youth Corp participants supervise riders who need to transfer and assist individuals as necessary.

**RideNet: St. Cloud, Minnesota**

RideNet established a Senior Ambassador program to give seniors the opportunity to provide services for others. One of the features is a “ride credit” or “bank” that allows drivers to accumulate credits to donate to others or use themselves if they become unable to drive. Similarly, the Certified Driver program gives individuals the opportunity to provide rides if they meet prescribed guidelines. Certified drivers earn ride credits that can be passed on to others who could use the RideNet service. RideNet also established a Drive to Own Auto Purchase program to provide a car for those willing to help others who need a ride, if they meet prescribed guidelines. Qualifications include a clean driving and criminal record, ten years of local driving experience, physical examination, completion of a defensive driving course, and availability for six or more hours per week. In return, participants will receive assistance purchasing a vehicle and an accompanying maintenance program. Participants will have a loan on a car and may use credits from driving to help with payments.
TRIP: Riverside County, California
TRIP is a mileage reimbursement-based driver volunteer program developed through a collaborative partnership with the local Area Agency on Aging, the regional planning organization, and a non-profit sponsor of the program. With this model, the rider is encouraged to recruit his or her own volunteer driver(s) – creating a customer-driven approach that helps the individual needing transportation be part of the solution. The rider and driver are both registered into the program and make their own arrangements for trips. At the end of each month, the rider submits a reimbursement form and is then responsible for paying the volunteer driver. The three basic elements of the model (sponsor, driver, and rider) interact in a manner that results in administrative efficiency and cost effectiveness. In 2010, the program provided more than 100,000 annual trips to nearly 400 individuals with an average trip cost of $4.96. A $0.35 per mile reimbursement is provided to volunteer drivers.

Opportunities for Coordination
These volunteer driver programs provide important transportation options that are less restricted by funding requirements or service times and boundaries. However, the programs rely on the availability of volunteer drivers, which can compromise service availability, consistency, and number of possible trips. For the most part, coordination of these services relates to volunteer recruitment efforts, support travel training efforts, and expansion of programs in underserved areas.

Expansion of Programs to Platte, Clay, and Wyandotte Counties
Current volunteer-based services are limited to Jackson and Johnson counties. Expansion into underserved areas should be considered. In particular, transportation in Platte and Clay counties is constrained by capacity issues with limited funding for expansion of the existing services. Volunteer driver programs could be particularly beneficial in these areas.

Use Volunteers to Support Travel Training
Some systems, such as Dane County, recruit seniors and individuals with disabilities who currently use the bus to train other individuals to navigate the system. Travel Ambassadors – regular riders who are willing to travel with others to learn the system – could be recruited and linked with new rider who make similar trips. Volunteers could also be used to staff designated transfer centers to help riders cross service boundaries. Other cities that utilize Travel Training and Ambassador programs include DART (Dallas Area Rapid Transit), SamTrans (San Mateo County Transit District), and C-Tran (Clark County, Washington).

Coordinated Recruitment Efforts
The greatest difficulty these programs face is recruiting and retaining volunteer drivers. Collaboration in recruitment and trips provided between the services that overlap could also be considered. In addition, a targeted volunteer recruitment plan could employ the following strategies:

► Reach out to community-wide volunteering clearinghouses to post the need for volunteers
► Collaborate with targeted organizations that can help identify and recruit volunteers (i.e. local business and retail networks, veterans groups, faith-based organizations, Area Agency on Aging, local AARP chapters, human services organizations, medical centers)
► Encourage riders to identify individuals that may be suitable as volunteer drivers
► Offer flexibility for drivers in terms of training, schedules, and service areas
► Enable volunteers to support other functions such as travel training or administrative tasks
► Identify funding sources to reimburse drivers for expenses or offer other incentives to drivers
► Market the benefits of volunteering (i.e. obtain new skills, expand social network)
► Recognize volunteers for their service
Regional Eligibility Determination

Current Services

For most of the ADA paratransit and demand responsive services in the area, riders must first apply and be determined eligible. In some cases, services are open to the general public and a determination of eligibility is not required. Table 7 summarizes current eligibility requirements.

Three programs serve persons who meet the ADA regulatory eligibility criteria. Fourteen programs serve seniors, with eight serving persons 60 years and older and six serving persons 65 years and older. Nine programs serve people with disabilities, with most using a broader definition of disability than the ADA criteria. Two programs use income thresholds to either define eligibility or qualify riders for reduced fare benefits. Four programs serve the general public – three serve all people, and one serves those in the public without access to transportation. Three programs serve only clients who are participating in specific agency programs.

Some coordination of eligibility determination currently exists. KCATA, which contracts with a private company (MTM) for assistance, also does determinations for UGT. The City of Independence honors ADA eligibility determinations made by KCATA. OATS, which operates several different programs, is able to use information about eligibility made under one program for other programs, where requirements are similar.

Table 7: Current Eligibility Requirements

<table>
<thead>
<tr>
<th>Service</th>
<th>Eligibility</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ADA</td>
<td>Seniors</td>
<td>Disability</td>
<td>Low-Income</td>
<td>Public</td>
<td>Agency</td>
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<tr>
<td>KCATA Share-a-Fare (ADA, non-ADA)</td>
<td>●</td>
<td>● (65+)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Independence (IndeAccess, IndeAccess Plus)</td>
<td>●</td>
<td>● (60+)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>UGT (Dial-a-Ride, Aging Transit)</td>
<td>●</td>
<td>● (60+)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Johnson County (Special Edition)</td>
<td>●</td>
<td>(65+)</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
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<tr>
<td>Johnson County (SWIFT)</td>
<td>●</td>
<td></td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Platte)</td>
<td>●</td>
<td>(60+)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Clay County)</td>
<td>●</td>
<td>(60+)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Jackson County)</td>
<td>●</td>
<td>(60+)</td>
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<td>OATS (Blue Springs)</td>
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</tr>
<tr>
<td>OATS (Lee’s Summit)</td>
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<td></td>
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<tr>
<td>Olathe Taxi Coupon</td>
<td>●</td>
<td>(65+)</td>
<td>●</td>
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<tr>
<td>Shawnee CityRide</td>
<td>●</td>
<td>(65+)</td>
<td>●</td>
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<tr>
<td>Liberty Access Bus</td>
<td>●</td>
<td>(60+)</td>
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<tr>
<td>Excelsior Springs Omni Bus</td>
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<td>●</td>
<td></td>
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<tr>
<td>Platte County Board</td>
<td>●</td>
<td></td>
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<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Platte County Senior Fund</td>
<td>●</td>
<td>(60+)</td>
<td>●</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Clay County Senior Services</td>
<td>●</td>
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<td>●</td>
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<td></td>
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<td>Jackson County EITAS</td>
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<tr>
<td>Jewish Family Services</td>
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<td>(65+)</td>
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<tr>
<td>Johnson County Catch-A-Ride</td>
<td>●</td>
<td>(60+)</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1 Seniors without access to transportation
2 Non-senior and non-disabled who do not have access to transportation
Opportunities for Coordination

Coordination of KCATA, UGT, and JCT

With the management of JCT services shifting to KCATA, it would be logical for KCATA to make determinations of eligibility for JCT services, since this was done formerly by JCT staff. If this is done, eligibility determinations will be coordinated for KCATA, UGT, and JCT.

Adding City of Independence

It would also seem reasonable for KCATA to also make eligibility determinations for applicants in Independence. This would help to ensure consistent ADA eligibility determinations throughout the region. It would also eliminate the need for riders to apply to both the City of Independence and KCATA to be able to receive local as well as regional ADA service. This would certainly be appropriate if trip reservations were centralized or if services were consolidated (as discussed above).

Regional Eligibility

Another, more complex opportunity would be to establish a process for eligibility determinations for services throughout the region. This option would be appropriate if there was a common branding of paratransit and demand responsive services throughout the region. It would also be particularly appropriate if a robust one-call/one-click center were to be established (see the Expanded Information and Referral Services section). Region-wide eligibility would apply to those seeking ADA paratransit or for those seeking non-ADA services as seniors, people with disabilities, or low-income riders. It would not be appropriate for those services that are client-specific, and would not be applicable for services open to the general public.

Agencies and municipalities throughout the region could direct interested persons to a central agency for eligibility determination. This central agency would then maintain a database of applicants who qualify under each category of eligibility. Daily updates of new determinations could be electronically transmitted to each participating agency for inclusion in service-based rider files.

An added, future feature of regional eligibility determination might also be a regional ID card. Again, this would be particularly appropriate if there is regional branding of services. Photo ID cards could be provided to riders for use on services throughout the region. The cards could be coded to indicate ADA paratransit eligibility, eligibility as a senior, eligibility as a person with a disability, and eligibility for low-income benefits.

The implementation of regional eligibility would be simplified if participating agencies agreed on common eligibility standards. In particular, one age standard (recommend 65+) could be used. One common definition of a “person with a disability” could be adopted.

Future ADA Paratransit Eligibility Considerations

In-person process: Currently, KCATA uses a paper application form to determine ADA paratransit eligibility. Most large cities use processes that include in-person interviews and many have added in-person functional assessments as needed. Processes that include interviews and assessments as needed have been found to be more accurate in making thorough determinations of ADA paratransit eligibility. In-person processes also provide an opportunity to discuss service policies and specific rider needs, such as ensuring that mobility aids can be accommodated and arranging for appropriate rider assistance.

Use the eligibility process to support mobility management: Another possible opportunity is to broaden the eligibility determination process to support mobility management. When individuals apply for eligibility for a specific paratransit or demand responsive service, information could be provided about all service options. This
might include other services that may better meet their needs or support services, such as travel training, that might help facilitate the use of public transit.

If a paper application process is used, information about all appropriate options could be provided when individuals call to inquire about services. Brochures and other information about all appropriate service options could also be included in application packets. If an in-person eligibility process is implemented, the office where eligibility determinations are made could be called a Transportation Resource Center or Mobility Resource Center. Information and resources about transportation options throughout the regional could be gathered and made available. Travel training services and staff could also be co-located with eligibility staff to streamline access to this service.

**Expanded Travel Training**
Many seniors and people with disabilities are able to use fixed-route transit for at least some trips that they need to make, but have little or no experience using fixed-route services. Travel training has proven effective across the country in encouraging and facilitating increased use of fixed-route services.

**Current Services**
Several agencies currently provide travel training services in the region. This includes KCATA, the City of Independence, and JCT. It also includes several non-transportation agencies, such as the Rehabilitation Institute of Kansas City, Oak Grove Nursing and Rehabilitation, Alpha Point, and Truman Medical Center.

KCATA contracts with MTM for travel training. The contract is supported with federal New Freedom funding. MTM started travel training for KCATA riders but has expanded to serve other agencies in the region. MTM staff is regularly in contact with other agencies as part of an outreach effort to identify candidates for travel training. Other agencies make referrals to MTM if they identify individuals interested in learning how to use the fixed-route system. KCATA, through MTM, also provides travel training for riders in the UGT area. KCATA and MTM also serve as a back-up travel training provider for the City of Independence. KCATA does not charge other agencies for referrals.

MTM arranges in-person assessments as part of the voluntary travel training program to determine the rider’s abilities to travel independently and whether they are appropriate candidates for the service. Training then includes instruction on planning trips, riding the route with the trainee, and then traveling with the person as they gradually become more independent making trips on the bus. After training, riders are provided with a 31-day pass as an incentive to use the fixed-route system. About 100 individuals are identified or referred for training each year. Current training focuses primarily on individual instruction rather than group instruction, although some group instruction has been provided.

**Opportunities for Coordination**
**Link Eligibility Determination and Travel Training**
With MTM performing both eligibility determinations and travel training, there is an opportunity to use the eligibility process to help identify appropriate candidates for training. If the eligibility process indicates that applicants have the ability to sometimes use the fixed-route service, and are granted conditional eligibility for ADA paratransit services, travel training can be offered. Temporary eligibility, for one year, could be provided with a recommendation that the rider consider travel training (Note: under ADA regulation, travel training can be recommended but not required).
Expanded Group Training
While individual training is appropriate for riders with intellectual disabilities, group training can be effective for seniors and persons with physical disabilities, who have the ability to travel independently but have little or no experience using the system. Outreach efforts could focus on senior centers, senior housing associations, and independent living centers to arrange group trainings. Information about bus service could be distributed and instruction on reading schedules and planning trips provided. Some transit agencies, such as Glendale, Arizona Public Transit, partner with local businesses, plan trips to local stores, and provide gift certificates to encourage participation in the training and ongoing use of the fixed-route system after training.

Expanded Free Fare Fixed-route Service
As noted above, KCATA already provides a 31-day bus pass to individuals who complete travel training. As an added incentive, KCATA could extend unlimited free fare fixed-route services to individuals who complete travel training. To encourage paratransit riders in particular to use fixed-route service whenever possible, free fares could be extended only to trainees who are determined ADA paratransit eligible.

Assessing Trip Accessibility
The travel training program and staff could also be used to help individuals with disabilities determine whether they can make trips by fixed-route transit. Individuals may know how to use the bus, but may not be familiar with certain locations. They may not know if there are sidewalks, curb ramps, or other needed accessibility features. KCATA could first advertise the availability of this personalized trip planning service to paratransit riders. Depending on the demand, the service could then be offered more broadly in the community. Staff could get trip details, assess the environment in the area of travel, and then contact individuals with details and specific instructions for making the trip. Intercity Transit in Olympia, Washington provides a similar service and reports that it has been a successful addition to their travel training program.

Expanded Information and Referral Services (One-Call/One-Click Service)
Interest in one-call/one-click services for transportation is growing throughout the country in response to communities seeking more consumer-friendly mobility management solutions. A one-call center provides customers with a single point of contact for transportation. By developing this customer-friendly resource, communities give travelers a tool for individual empowerment. Many communities also offer one-click information through computers, cell phone applications, and kiosks in addition to through the telephone. One-call/one-click transportation services offer numerous benefits for the community, customers, and agencies:

One-call/one-click services benefit the community by:
► Using community resources (i.e. funding, vehicles, technology) more effectively
► Reducing duplication of transportation services
► Removing transportation as a barrier to accessing key community services
► Demonstrating consumer-friendly delivery of community services
► Enabling broader community values to thrive (i.e. aging in place)
► Establishing a united voice for future transportation initiatives

One-call/one-click services benefit customers by:
► Making it easier to obtain information on a wide range of transportation options
► Providing one location to obtain a ride for a variety of programs
► Streamlining the eligibility process for multiple programs
► Being a place to receive counseling assistance (i.e. advocacy services, travel training)
With coordination and technology, one-call/one-click services benefit transportation agencies by:

- Increasing ridership by filling empty seats in existing vehicles
- Reducing duplication of services by combining riders in a single vehicle
- Assisting agencies in matching riders with most appropriate and least expensive travel option
- Reducing no-shows and improving rider readiness through automated calls

**Current Services**

Link for Care currently serves as the region’s one-click center. In 2010, MARC with support from the University of Kansas (KU) Medical Center, applied for a federal Veterans Transportation and Community Living Initiative grant. Link for Care, a site created approximately ten years ago through the HealthyKC initiative, was selected as the foundation of a new Internet-based source of consolidated transportation information. Focus groups were utilized to identify needs for improvement and refine the website search engine. The updated Link for Care website provides information on transportation and eleven other types of resources, with over 1,400 services delivered throughout the nine-county area. The transportation information reflects data on over 60 transportation providers and follows this protocol: (1) select a type of transportation service, (2) select the geographic area, (3) receive a list of matching transportation providers, and (4) view comprehensive data for each service.

Link for Care is maintained and managed by the Central Plains Geriatric staff at the University of Kansas Medical Center, Landon Center on Aging. The staff has notified all service providers listed on the site that it is their responsibility to keep the information updated. Every six months, an automatic email is sent to all listed providers asking them to log onto the site and confirm and/or change information. If a series of follow-up efforts do not result in a response from the provider, the provider’s information on the website is blocked. Another innovative feature is the individual’s ability to create an account to streamline future trip selections.

Link for Care also recently became aware of a similar site, Care Connection, maintained by Shepherd’s Center Central. A staff person at Shepherd’s Center Central is available by phone to provide transportation information as well. In the most recent request for funds, Link for Care has included funds to support this call position and integrate the one-call service into the Link for Care site. If funding is received, Link for Care will function as a basic one-click/one-call center with information and referral services.

In addition to Link for Care and Care Connection, KCATA provides assistance similar to a one-call/one-click service through its fixed-route customer service and trip planning. KCATA is also planning to expand its customer service role to include mobility management with the hiring of a Regional Mobility Manager.

**Selected Best Practices**

The development of a one-call/one-click center can be the enhancement of an existing call center or website or the creation of a new center. Issues to consider in developing a one-call/one-click center depend upon the functionality determined in the planning process. Centers may cover different geographic areas or serve different audiences. Coordination also typically involves a lead agency and partners. The scope of information and services to be provided as well as existing and planned resources (i.e. funding, facilities, software, staff) should be discussed. Lastly, basic to any one-call/one-click center is the overall commitment to ensuring the customer has a positive experience through a person-centered focus.

The following tables identify a spectrum of coordination options related to one-call/one-click services. Table 8 summarizes options related to service logistics. Table 9 presents options related to customer interactions with services. Table 10 summarizes technology-related coordination options for one-call/one-click services.
### Table 8: One-Call/One-Click Service Options - Logistics

<table>
<thead>
<tr>
<th>None</th>
<th>Some Coordination</th>
<th>Full Integrated</th>
<th>Automated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Trips</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providers work alone</td>
<td>Share service information</td>
<td>Share rides</td>
<td>Develop shared standards for operations</td>
</tr>
<tr>
<td><strong>Eligibility</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providers use own eligibility process</td>
<td>Process applications at one-call center</td>
<td>Cross-train staff to review applications for other agencies</td>
<td>Establish common eligibility process</td>
</tr>
<tr>
<td><strong>Reservations</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providers make reservations directly with customers</td>
<td>Expand capacity by calling other providers to schedule trips</td>
<td>One-call service makes tentative or confirmed reservations</td>
<td>Shared reservation system among providers</td>
</tr>
<tr>
<td><strong>Scheduling and Dispatch</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providers schedule and/or dispatch only their trips</td>
<td>Establish compatible communication systems</td>
<td>Shared scheduling and dispatch</td>
<td>Automated scheduling and dispatch</td>
</tr>
<tr>
<td><strong>Financial Operations</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providers have separate billing systems</td>
<td></td>
<td>Develop allocated costs for trips</td>
<td>Centralized billing through one-call center</td>
</tr>
</tbody>
</table>

### Table 9: One-Call/One-Click Service Options - Customer Experience

<table>
<thead>
<tr>
<th>None</th>
<th>Some Coordination</th>
<th>Full Integrated</th>
<th>Automated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Information and Referral</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rider calls each provider for information and reservation</td>
<td>Paper-based ride guide for all services</td>
<td>One-call telephone or one-click site for information</td>
<td>One-call or one-click access to reservations on all programs</td>
</tr>
<tr>
<td><strong>Eligibility</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rider completes eligibility with provider directly</td>
<td>Rider completes eligibility with one provider that is shared with other providers</td>
<td>Common application for all services</td>
<td>One-call center implements pre- or full eligibility screening for all partner services</td>
</tr>
<tr>
<td><strong>Fare</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Customer pays individual provider at time of ride</td>
<td>Payment made to provider through back-office operations</td>
<td>Agencies develop system for paying for shared rides</td>
<td>One-call center provides centralized billing</td>
</tr>
<tr>
<td>None</td>
<td>Some Coordination</td>
<td>Full Integrated</td>
<td>Automated</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Customer Communication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone communications</td>
<td></td>
<td>Web-based information and reservation requests</td>
<td>Automated customer notification via e-mail or text message</td>
</tr>
<tr>
<td>Driver/Dispatch Communication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single providers communicate with their drivers via radio</td>
<td>Compatible communication systems among providers for dispatching</td>
<td>Communication with automatic vehicle locator (AVL)</td>
<td></td>
</tr>
<tr>
<td>Scheduling and Dispatch</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paper or electronic spreadsheets for scheduling and/or dispatch</td>
<td>Computer-aided scheduling and dispatching</td>
<td>One-call center has read/write access to web-based scheduling systems</td>
<td>Fully integrated traveler information system</td>
</tr>
<tr>
<td>Financial Operations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providers have separate billing systems</td>
<td></td>
<td>Shared cost/billing software</td>
<td>Shared electronic fare system</td>
</tr>
</tbody>
</table>

Information, Referral, and Trip Reservation

One-call/one-click centers may connect customers to resources at varying levels of coordination. At the lowest level of coordination, the center shares information by providing educational material, service information, and eligibility requirements. At the next level of coordination, in addition to the assistance above, the center has access to provider networks. The center may connect directly to service providers or refer callers to providers. At times, the center may also be able to make tentative trip reservations. At the highest level of coordination, the center may connect to scheduling software of multiple providers in order to schedule trips for callers. These centers generally return a call to the rider with specific reservation information. This highest level of coordination requires access to providers’ schedules or a protocol for handling this function smoothly.

Shared Reservations, Joint Scheduling, and Joint Dispatch

At lower levels of coordination, agencies can develop technologies that allow trips to be shared on other participating agency vehicles. At a higher level, trip reservations can be centralized with a lead reservations and scheduling agency or services can be coordinated, scheduled, and dispatched through a broker.

Eligibility

Eligibility determination can also be included in a one-call/one-click operation. Callers can be screened for probable or definitive eligibility using an interactive process completed while the caller remains on the phone. Establishing regional eligibility requirements or a common database of eligibility requirements is important to establishing the eligibility process as part of the one-call/one-click operation. This option is discussed in the Regional Eligibility Determination section.
Technology
Telephone systems can be simple systems that direct callers to staff who provide information about available resources or complex systems that distribute calls to multiple staff members located on- or off-site. Systems may also use Interactive Voice Response (IVR) systems that direct callers to appropriate staff or offer an online web chat that is handled by the call center. Telecommunication systems may be premise-based or connected remotely in the cloud and can be scaled to fit the expected demand for the call center capacity.

The Mobility Services for All Americans program initiative provides a sample, recommended technological framework for a one-call/one-click center. The system backbone is a database with information on funding, eligibility requirements, fare, and customer information. The system also includes a data dictionary that allows for information exchange among agencies. Travel planning includes reservation, scheduling and dispatch, fare payment and management, and eligibility systems. Operations and customer service include a transfer connection protection (TCP) system, vehicle-visibility subsystems that support both scheduling activities and real-time information, and a safety and security subsystem such as on-board cameras and recording. Financial transactions cover reporting, reimbursements, smart card fare collection, and payments. Traveler information systems provide information to riders before the trip. System activities after service include invoicing to automatically allocate costs across programs and develop reports. Lastly, human and technical resources provide a live help desk and assist with smart card technology.

Standards and Protocols
Developing standards and protocols should be a priority for one-call/one-click centers to ensure the center is operating according to its purpose and objectives. Standards describe how the center’s services are expected to impact customers. Protocols describe how the center will deliver its services. Both standards and protocols should generally address: professional conduct and courtesy, privacy and confidentiality, resource data management and maintenance, staff training and performance, conversation scripts, complaints, crisis callers, and gaps in service.

The following one-click/one-call best practices represent varying levels of coordination. The best practices also utilize diverse operating structures and technology. A summary of the case studies is presented in Table 11.

Dane County, Wisconsin
Dane County, the lead agency, established a one-call/one-click service. The agency coordinated information between county providers, municipal shared-ride taxi programs, and other transportation options to simplify access for customers. The service also benefits from consolidated eligibility with a standard application form, travel training, and the management of a supervised transit transfer center. Currently, Dane County uses spreadsheets for tracking calls and trips but is exploring the use of a software program to handle the 500,000 trips provided annually.

Lane Transit District: Eugene-Springfield, Oregon
Lane Transit District expanded its one-call service to include Medicaid Non-Emergency Transportation (NEMT) participants, a new model that added approximately 42,000 people to the system. In addition, call takers were trained to not only provide information about services but to serve as transportation advocates as well. The one-call center also coordinates in-person interviews for eligibility determination. The interview typically occurs in the rider’s home with a trained Transportation Assessment Coordinator. The service also coordinates with the Area Agency on Aging to have case workers complete eligibility assessments as well. Lane Transit District is assessing new software options to meet the volume of calls.
Table 11: One-Call/One-Click Service - Best Practices

<table>
<thead>
<tr>
<th>Location</th>
<th>Coordination</th>
<th>Key Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dane County, WI</td>
<td>Level 1: Yes</td>
<td>Consolidated eligibility procedure; Manage a supervised transit transfer center; Travel training with experienced riders</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
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<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>Lane Transit District</td>
<td>Level 1: Yes</td>
<td>Integration of ADA and Medicaid services; Partner with Area Agency on Aging to complete eligibility assessments</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>Manitowoc County, WI</td>
<td>Level 1: Yes</td>
<td>Consolidated functions under a single entity; Consolidated eligibility process</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>Steuben County, NY</td>
<td>Level 1: Yes</td>
<td>Integration into existing 2-1-1 service; Electronic update of database; Multi-user scheduling software environment</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>FACT</td>
<td>Level 1: Yes</td>
<td>Integration into existing 2-1-1 service; Ease and volume of use via the one-click site, mobile application, and kiosks</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>SmartLink Transit</td>
<td>Level 1: Yes</td>
<td>Centralized data warehouse that enables fully automated manifests for providers; Improved billing and payment process</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>ASI</td>
<td>Level 1: Yes</td>
<td>Dedicated paratransit service provider</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>PART</td>
<td>Level 1: Yes</td>
<td>Sophisticated telephone and website infrastructure that enables customers to schedule, manage, and monitor trips</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>LSCOG</td>
<td>Level 1: Yes</td>
<td>Hybrid ADRC/TMCC call center design; Use of Interactive Voice Response (IVR) system to confirm/cancel trips</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>OUTREACH</td>
<td>Level 1: Yes</td>
<td>Call-center coordination; Customer pay-as-you-go accounts; Option to share vehicles; Customizable one-click database</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
<tr>
<td>RideNet</td>
<td>Level 1: Yes</td>
<td>Non-profit corporation with ties to private sector providers to provide a fully coordinated one-call/one-click service</td>
</tr>
<tr>
<td></td>
<td>Level 2: Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Level 3: Yes</td>
<td></td>
</tr>
</tbody>
</table>

Level 1: Information, Referral, and Eligibility
Level 2: Scheduling and Reservation
Level 3: Trip Management and Dispatch

** Manitowoc County, Wisconsin **
Manitowoc County provides three transit programs: a rural curb-to-curb service for persons with disabilities, a contracted curb-to-curb service for seniors, and a volunteer-driver program. In total, the services operate at relatively low volumes of between 6 to 20 calls per day. The Aging and Disability Resource Center (ADRC) is a function of Manitowoc County and led the efforts to develop a one-call service. Associated activities included hiring a Mobility Manager, creating a resource guide, a consolidated eligibility process, and establishing a one-call center with a single telephone number. Manitowoc City’s transit clerk was already responding to many transportation questions and was the natural selection for the operator of the one-call center.

** Steuben County, New York **
The Institute for Human Services, which operates the five-county 2-1-1 service, was selected to take the lead role in coordination rather than select one of the five area transit providers. Adding a one-call service to the existing 2-1-1 service presented fewer challenges than creating an entirely new program. Each caller is pre-screened for eligibility for specific services. Upon completion of the brief screening interview, 2-1-1 staff transfers the call to a particular provider. After-hour and weekend service is provided by a third-party using remote access to the 2-1-1 database. The phone system has seven incoming lines and automatically distributes
calls to workstations with networked access to a resource database and call-screening protocols. The current database includes information for approximately 500 programs and thousands of individual services. Users may call or search the database online and results are geographically specific. The information for each program is updated annually via electronic format. Although the one-call service is not actively involved in accepting reservations or scheduling trips, the Institute for Human Services hosts the paratransit scheduling software and facilitates a multi-user environment, enabling providers to utilize the software without the burden of ownership or maintenance.

**Full Access and Coordinated Transportation (FACT): San Diego, California**

Full Access and Coordinated Transportation (FACT) is a non-profit Mobility Management Center for San Diego County. FACT manages a database of over 150 public, private, and social service transportation providers to match callers with the best transportation option for their needs. On average, FACT provides 2,400 referrals per month via phone. When riders call the one-call center, the operators ask the caller questions to determine eligibility for available services and selects the most appropriate provider. If an appropriate service is not available, FACT fulfills the rides using one of its 14 brokered providers through the RideFACT program. This includes riders that are outside paratransit service areas as well as riders who cannot afford private transportation providers. When FACT takes a reservation for its RideFACT service, a reservation is made in real time and, after confirming with the provider, the rider receives a confirmation call the day before travel. FACT recently entered into collaboration with the 2-1-1 service for a pilot project to provide 24-hour call center coverage. The integrated call center will be built on the 2-1-1 InContact cloud-based telephone solution, which provides true virtual hold, call recording, a call back system, and automated satisfaction survey system. The one-call/one-click center provides about 1,300 web-based referrals each month. The site has an origin and destination-based travel planner to determine applicable transportation services for the trip. The site also allows users to provide service feedback and reviews. The one-click database, a consolidation of three partner databases, also offers a free mobile application and interactive kiosks at key locations.

**SmartLink Transit: Scott and Carver County, Minnesota**

SmartLink Transit, a county-run service, processes all trip requests through a one-call center. Operators determine eligibility and identify the most appropriate option for the rider. Riders are placed on a SmartLink service or with one of the agency’s contracted providers. Trips provided by SmartLink or third-party operators for confirmed eligible customers are routed to the transit scheduler, fed into the system’s scheduling software, and distributed to the drivers’ mobile data computers. Callers can request last-minute and same-day trips as capacity enables. SmartLink created a data warehouse in which any qualified transportation provider could enter information on trips requested and provided. The data is fed directly into SmartLink’s scheduling software, enabling a fully automated manifest as well as trip reports to be generated, including passenger trips, revenue hours, service hours, and miles traveled. This enabled the counties to allocate trips by provider, funding source, or service area for reporting purposes.

**Access Services Incorporated (ASI): Los Angeles, California**

Access Services Incorporated, a local public entity, is responsible for the provision of paratransit services, freeing up local bus operators to concentrate on the operation of fixed-route bus or rail services. The local transit service directory, RideInfo, is a facilitated referral service that matches the rider’s transportation needs with available accessible transportation. Riders can find the information via the website, email, the 1-800-COMMUTE line, or speak with an information specialist via phone. The three functional elements of Access Services Incorporated include (1) program management, which covers eligibility, data management, and other administrative functions, (2) the call center, which includes trip reservations and scheduling, and (3) trip management, covering dispatch for dedicated and non-dedicated providers. Access Services Incorporated uses Trapeze software.
Purchase Area Regional Transit (PART): Paducah, Kentucky
The Paducah Area Transit System and three rural transit systems collaborated in a multi-year demonstration project to provide one-call service through a Transportation Management Coordination Center (TMCC). The one-call center allows customers to make and manage their reservations online or by calling a single telephone number. The collaboration, known as the Purchase Area Regional Transit (PART), uses a telephone system with 23 incoming lines that supports language options, TTD/TTY, 2-1-1 call forwarding, and different ring tones to distinguish trip request types. Trip reservations are scheduled immediately. The phone system features Interactive Voice Response to enable callers to obtain information and direct their calls using a phone tree. The phone system is Internet-accessible using Voice over Internet Protocol. RouteMatch scheduling software, AVLs, and MDTs also provide integrated scheduling and dispatching. These systems provide customers with Internet and telephone access to their trips via password-protected client accounts and support dissemination of travel information such as vehicle arrival status, schedule changes, and service disruptions via cell phone text messaging and e-mail. PART also purchased six information kiosks to allow remote access to the website from selected high-visibility locations in the service area. PART has a searchable information and referral directory on its website with more than 3,800 resources in sixty categories. Records are updated every six months.

Lower Savannah Council of Government (LSCOG): Aiken, South Carolina
The Lower Savannah Council of Governments, the region’s planning and development agency, is not a direct transportation provider but coordinates the services of several human service and public transit providers. Becoming an Aging and Disability Resource Center (ADRC) with merged transportation, mobility management, and coordination functions helped the agency obtain part of the one-call service infrastructure. The ADRC was integrated into a new Transportation Management Coordination Center (TMCC) in 2010. The final hybrid design of the call center uses both a centralized ADRC/TMCC call center with all the functions available and also smaller, decentralized and linked virtual centers in local communities. The Lower Savannah Council of Governments uses the SCAccess database for providing human services programs and information and referral services. RouteMatch is utilized to provide, track, and report on demand-response transportation services in the region. As a result, transportation providers have options to review, request, and utilize each other’s vehicles to request individualized assistance. The telephone system supports Interactive Voice Response to make calls to riders in order to confirm or cancel the trip.

OUTREACH Mobility Management Center: Santa Clara County, California
OUTREACH is the paratransit broker for the Santa Clara Valley Transportation Authority. The one-call center is integrated into the agency’s Mobility Management Center. The brokerage service uses automated scheduling and vehicle route and tracking technology to coordinate its fleet operations with volunteer and third-party service providers. The design of the call center has also been revised over the years. Previously, OUTREACH only handled trip reservations and scheduling with service providers responsible for radio dispatching and run management. Over the past decade, the dispatching of dedicated service was also centralized, providing better control over service efficiency and service quality. OUTREACH operates as a single point of entry for customers across a range of mobility programs, which allows the center to coordinate eligibility services. OUTREACH staff and other non-profits can access the web portal to manage members, mobility options, subscription trips, buy seats from another non-profit, and loan or share vehicles. Customers can also use the web portal, which supports different languages and fonts, to save search results, view maps of service areas, compare resources side-by-side, or chat with a live operator. The web interface includes a virtual payment system integrated with the scheduling system that allows riders to establish pay-as-you-go accounts.

RideNet: St. Cloud, Minnesota
RideNet is a non-profit corporation operated as a public service by Care Transportation Inc. The corporation has partnered with private sector providers and a variety of sponsors to address the need for transportation
services. RideNet provides 24-hour one-call services utilizing its taxi dispatch system. Customers may call or email transportation information requests for any trip purposes and transportation options will be provided. For internal trips, reservations are scheduled immediately. For brokered trips, reservations are accepted but not confirmed. Depending on the trip request, eligibility may be determined immediately or by the service provider. Four key functional areas interact with the one-call service: the call center, driver/rider programs, dispatch services, and administration.

**Opportunities for Coordination**

Opportunities for coordination generally include two options: (1) support and expansion of the current services provided by Link for Care and Care Connection or (2) relocate the services to KCATA. Greater technology improvements related to one-call/one-click centers are explored in the Implementation of Advanced Technology section.

**Coordination and Expansion of Link for Care and Care Connection Services**

One option is to move forward with the planned coordination between Link for Care and Care Connection. With the incorporation of the one-call staff person at Care Connection, Link for Care can become a fully functioning one-call/one-click center.

**KCATA as the Regional One-Call/One-Click Lead Agency**

The alternative option is to relocate the current transportation-related services provided by Link for Care and Care Connection to KCATA. If desired, the one-call/one-click function at KCATA would also fit well with planned mobility management improvements, such as the hiring of a Regional Mobility Manager. In addition, if KCATA becomes the trip reservation center for the City of Independence, UGT, and JCT, it would be a more robust center with operational responsibility in addition to information and referral capabilities.

**Improved Public Information**

A primary purpose of one-call/one-click services is to simplify access for the customer and agency personnel. Therefore, marketing is an important activity. A regional branding effort for transit began in 2014, and paratransit services will be included in the branding initiative to improve public information services.

**Current Services**

In November 2014, RideKC was endorsed as the new regional transit brand. The approval follows ten months of stakeholder engagement, research, and design. The RideKC brand will be the umbrella brand used by all the region’s transit agencies (KCATA, the City of Independence, UGT, JCT, and the Streetcar Authority) and will be used to provide unified marketing and communication for multiple modes of transit, including local bus service, rapid bus service, paratransit and demand responsive services, and the future streetcar. Transit agency staff and consultants will continue to refine the design and plan the implementation of RideKC. The brand is expected be implemented in 2015 and first debut with the streetcar. The regional brand objectives extend beyond the name and logo to include regional transit maps, website, fare card, signage, and a unified fleet brand.

In addition to the regional branding initiative, several of the existing services provide guidebooks for riders. The service guidebooks have varying levels of information and accessibility (i.e. online, publications at the agency office, distributed publications).

**Opportunities for Coordination**

In addition to the one-call/one-click initiative and the regional branding, there are other ways to disseminate information to the public.
Guidebook Creation
While agencies provide varying levels of information in their existing guidebooks, a regional handbook for paratransit customers could provide extensive but simple-to-understand information for both fixed-route and paratransit services for persons with disabilities and seniors. The information should be available through a variety of mediums including print and electronic.

Material Distribution
Agencies could communicate with social service organizations, charitable and religious entities, businesses, schools, medical offices, and community groups to deliver group presentations and distribute leave behind materials.

Establish a Unified Forum
The region could seek to establish a unified voice to speak for paratransit customers, or in the alternative, create a single forum where all relevant paratransit groups are represented. The Mobility Advisory Committee led by MARC could sponsor this forum. In addition, providing means for individuals to provide service feedback via online reviews, e-mail, or phone could be implemented. San Diego’s FACT one-call/one-click site provides a forum for customers to provide service feedback and reviews to inform other riders but also provide information for the transit agencies.

Implementation of Advanced Technology
Current Services
KCATA uses both RouteMatch and Reveal software. Currently, scheduled trips are located in RouteMatch but same-day changes to trips occur in Reveal. The software will provide an on-screen notification to alert reservationists when trips are outside the ADA service area or hours. Since transitioning to Reveal, KCATA has noted cost savings because of greater efficiency (i.e. KCATA is four percent below the proposed budget and seven percent below the actual budget. Reveal is developing its trip reservations and scheduling capabilities and it is possible that KCATA may migrate further to Reveal in the future.

For the City of Independence services, First Transit utilizes Trapeze Simpli Transport software but is in negotiations with Reveal Management Systems to purchase new mobility management software. Reveal is an automated scheduling, routing, and dispatching system. The services currently use a Nextel radio system but will soon be converting to a two-way radio system. First Transit also utilizes TransLoc Real Time, a GPS-based system, to track both fixed-route and paratransit vehicles. The dispatcher updates the fixed-route travel times so users can access real-time bus routes via the website and phone application.

UGT utilizes Trapeze Pass software, but the software is only used for recording purposes, not trip scheduling. Trip reservation and scheduling is completed manually. Dispatchers noted that when Trapeze Pass was implemented, the schedules produced were inaccurate and had to be manually overridden. They also indicated larger technology issues, such as server reliability. As a result, the dispatchers have found that recording trips by hand is more efficient and accurate at this time. While some user error explains the non-utilization of the software, UGT also does not have the rider demand to utilize Trapeze Pass to its fullest extent. As a result, there is some duplication of effort with manual recording and digital recording. UGT has a voice radio system for communication with drivers. They also have automatic vehicle location (AVL) to monitor vehicle location and assist with run management. The services do not currently use mobile data terminals (MDT). Actual pick-up times are recorded on the driver manifests.

JCT utilizes Reveal for scheduling. 10/10 Taxi also utilizes Reveal software. Some JCT vehicles have mobile data terminals (MDT). JCT will be outfitting the vehicles with tablets to monitor routes.
Selected Best Practices
Technology solutions that enable coordination among different agencies and programs result in long-term efficiencies that cannot be reached manually. A wide variety of Intelligent Transportation Systems (ITS) technology exists to improve coordination. The technologies used are not necessarily new, but they have become more affordable and easier to customize, enabling transit providers to design platforms that support coordination in new and innovative ways.

Organization-related technology is described below:
► Routing and Scheduling System: Coordinates routes and schedules among agencies; works with fixed-route data and verifies customer eligibility by location; supports graphic display of service boundaries
► Geographic Information System (GIS): Displays and analyzes the spatial relationships between different data such as vehicles routes, trip origins and destinations, streets, and landmarks
► Computer-Aided Dispatch (CAD): Expedites call taking, prepares driver manifests, collects and maintains client/service/vehicle data, and generates reports
► Automatic Vehicle Location (AVL): Determines vehicle location using GPS navigation to send position data to control center; expedites the operation of vehicles running on flexible schedules through integration with CAD
► Mobile Data Terminal (MDT): Links the driver to the control center to relay relevant information such as dispatch, trip, route, and rider data

Passenger-related technology is described below:
► Interactive Voice Response (IVR): Enables riders to receive password protected access to recent trip history; allows riders to request a trip via e-mail or automated call back
► Trip Planning: Considers multiple modes, routes, service schedules, fare structures, and travel constraints to build optimal trip itineraries; web-based or telephone-based
► Advanced Traveler Information Systems (ATIS): Provides the rider with electronic, real-time or static travel information; conveys information such as schedules, fares, routes, transfers, arrival time of vehicles, and availability of accommodation equipment via websites, kiosks, automated telephone systems, or phone applications; may include web-based reservations, automated reservation management, automated client eligibility certification, computerized complaint management systems, and phone or online chat customer support centers
► Electronic Fare Payment: Enables easy rider identification and allows the rider to pay for transportation service on one or more transit systems electronically (i.e. bar code, smart card, magnetic stripe card); simplifies billing and payment processes
► Surveillance and Security Systems: Ensures rider safety using video surveillance camera, silent alarms on vehicles, and smart cards for driver identification

Table 12 displays a summary of best practices. The best practices represent various uses of technological innovations to increase coordination and service efficiency.
### Table 12: Advanced Technology Best Practices

<table>
<thead>
<tr>
<th>Location</th>
<th>Organization Technology</th>
<th>Passenger Technology</th>
<th>Key Points</th>
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<tbody>
<tr>
<td>Polk County Transit Services</td>
<td></td>
<td></td>
<td>Coordinate trips using scheduling software to leverage extra capacity provided by volunteer driver network</td>
</tr>
<tr>
<td>Via Mobility Services</td>
<td></td>
<td></td>
<td>Communicate between different scheduling/dispatching software to enable trip sharing among providers</td>
</tr>
<tr>
<td>MART</td>
<td></td>
<td></td>
<td>Web-based, market-based bidding system for brokering lowest-cost trip</td>
</tr>
<tr>
<td>Lane Transit District</td>
<td></td>
<td></td>
<td>Sophisticated trip and cost tracking software program allocates costs to sponsoring agencies</td>
</tr>
<tr>
<td>GoTriangle</td>
<td></td>
<td></td>
<td>Exploring use of regional trip planner and real-time information accessible via website, mobile application, and text messaging for demand response</td>
</tr>
<tr>
<td>OUTREACH</td>
<td></td>
<td></td>
<td>Transportation brokerage with automated scheduling and payment for rides to coordinate multiple fleet operations; web-portal for collaborative mobility management options</td>
</tr>
<tr>
<td>LSCOG</td>
<td></td>
<td></td>
<td>Use of Interactive Voice Response system to confirm and cancel trips</td>
</tr>
</tbody>
</table>

**Polk County Transit Services: Polk County, Florida**

Polk County Transit Services and the non-profit ElderPoint Ministries share technology to expand transportation services. To most efficiently leverage the extra capacity provided by the ElderPoint Ministries’ volunteer drivers, the two services coordinate trips using the County’s Trapeze scheduling software. As a result, in addition to trip request that come directly to ElderPoint Ministries, the volunteer network is able to respond when the County’s services are at capacity. Using Trapeze also helps the partnership eliminate double bookings—a common practice for some seniors as they may worry about the completion of their trips. ElderPoint Ministries provides about 3,000 rides per year. A standardized invoicing format was also implemented.

**Via Mobility Services: Boulder County, Colorado**

Via Mobility Services developed coordination agreements with Call-n-Ride in the Boulder, Colorado area. On the operations side, capacity for communication between the two different scheduling/dispatching software systems allows the agencies to identify existing gaps and excess capacity, and then fill empty seats where appropriate. Updated scheduling information is then relayed to vehicle MDT and riders via cell phone using Voice-over Internet Protocol (VoIP). Trips on Via Mobility Services can be scheduled automatically with callers receiving voice or email verifications of acceptance. Call-n-Ride customers can book trips online or directly with the driver. Dispatchers use map-based, real-time data on operation status and computer-assisted mobile dispatching. As a result of coordination, there has been a 36 percent increase in ridership without an increase in cost. The average number of boardings has increased from 2.7 per hour to 3.6 per hour—a 34 percent increase in productivity. In particular, the new technology allows more riders to be assigned to vehicles, resulting in fewer vehicles used to complete dialysis trips, which expands opportunity for non-dialysis riders.

**Montachusett Regional Transit Authority (MART): Fitchburg, Massachusetts**

To provide trips at the lowest cost possible, MART implemented a web-based bidding system that allows providers to bid on trips and review the bids of others. About 235 private operators participate in the
brokerage. Available trips for bidding are posted on an open-data-exchange platform that allows all vendors to view competing bids for service and counter-bid on trips. Once all the bids are in, MART automatically assigns trips to the lowest bidder, ensuring transparency and competitive rates. The system automatically assigns a trip number and generates invoices for all completed trips on a daily basis, deducting the cost of cancellations and other changes. Assignments are made until all seats are filled; when possible, customers are scheduled to share trips to achieve cost-efficiencies. A database manages requests for service, billing, and invoicing. MDTs on vehicles record trip origins and destinations and the use of GPS optimizes shared ride possibilities.

*Lane Transit District: Eugene-Springfield, Oregon*
As the Lane Transit District has added transportation services to its RideSource call center, it has responded with an increasingly sophisticated trip and cost tracking and allocation software program. The cost-allocation model allows for the distribution of direct services and administrative/overhead costs to sponsoring agencies. Once RideSource began brokering Medicaid trips, the model also had to meet strict federal guidelines. The model ensures appropriate charges are made to each program, allowing participating agencies to pay based on the cost of providing services. The call center database consolidates all information relevant to passenger vehicle entry and exit, vehicle hours, mileage, administration time, volunteer time, vehicle maintenance, and cost and dispatch time. The database also includes information from eligibility determinations. Providers receive assignments and payments by trip.

*GoTriangle: Raleigh-Durham, North Carolina*
GoTriangle is a partnership of seven public transportation agencies to create a common brand for an online regional trip planner. All regional systems agreed to translate their stop and schedule data into a suitable form for the trip planner, thus allowing riders to effectively plan cross-jurisdictional travel. General transit feed specifications (GTFS) files were also developed so the trip planning function could be accessed via the Google Maps trip planner as well as on the GoTriangle site. After implementing AVL technology, real-time arrival information tools were developed. The data from all service providers could then be integrated into the website, mobile application, and text messaging system. Although the system is currently only operating for fixed-route transit, agencies are exploring how to integrate the information services into the regional 5-1-1 system and integrate electronic fare payment to support demand-response service.

*OUTREACH Mobility Management Center: Santa Clara County, California*
OUTREACH has a longstanding contractual relationship for the operation and management of the brokerage. The broker’s service uses automated scheduling and vehicle routing and tracking (AVL/MDT/GPS) technology to coordinate its fleet operations with volunteer and third-party provider services. Call center agents access the web-based dashboard for scheduling and reporting trips on the service. OUTREACH staff and other non-profits can access OUTREACH's web portal to manage members and trips, buy seats from another non-profit, vehicle loan or share, operate a vehicle driver program, accomplish trip reporting, and complete accounting activities. The web interface includes a virtual payment system integrated with the scheduling system that allows riders to establish pay-as-you-go accounts, thus eliminating the need for fare equipment and cards. The system also facilitates the automated distribution of rider fares to client or authorized third parties that subsidize fares. A mobile application integrated with the one-click website for real-time vehicle location is currently under development.

*Lower Savannah Council of Government (LSCOG): Aiken, South Carolina*
The Lower Savannah Council of Governments, the region’s planning and development agency, is not a direct transportation provider but coordinates the services of several human service and public transit providers. Becoming an Aging and Disability Resource Center (ADRC) with merged transportation, mobility management, and coordination functions helped the agency obtain part of the one-call service infrastructure. The ADRC was
integrated into a new Transportation Management Coordination Center (TMCC) in 2010. The final hybrid
design of the call center uses both a centralized ADRC/TMCC call center with all the functions available and also
smaller, decentralized and linked virtual centers in local communities. SCAccess is the database used by ADRC
staff for providing human services programs and information and referral services. RouteMatch software tracks
and reports on demand-response transportation. Additionally, CAD and AVL provide real-time tracking for
improved schedule adherence. The telephone system enables the MTCC to serve as the one-call service for
information and referral. The VoIP technology reports call center statistical data and has the capacity to connect
partner agencies. It also supports the IVR system in making outbound calls for appointment reminders with
riders having the option to confirm or cancel scheduled trips. AVL and MDT expand same-day service and
efficient utilization of the fleet. Electronic interface between RouteMatch and the Medicaid Broker's technology
provides the ability to electronically transmit demand-response and recurring trips to the TMCC.

**Opportunities for Coordination**

**Scheduling and Dispatching System for UGT**

Utilizing similar technology and software is an important element to consider in coordination efforts. KCATA
and JCT, as well as 10/10 Taxi, utilize Reveal software for scheduling, routing, and dispatching. The City of
Independence is also in negotiations with Reveal Management Systems to purchase the same mobility
management software. As a result of the similar technology, there is greater opportunity for future coordination
between the agencies. UGT currently operates using Trapeze Pass software but does not use the program to its
fullest extent. UGT could consider using Reveal software to align with the other three agencies. An alternative
option for UGT is to participate in a central trip reservations and scheduling effort with KCATA so the
technology could be applied to their services.

**Regional Electronic Fare Payment**

A regional electronic fare system is explored in detail in the Regional Electronic Fare Payment section.

**Regional Electronic Fare Payment**

Electronic fare payment systems use electronic communication, data processing, and data storage to automate
manual fare collection processes. The ability to use an electronic form of payment is convenient for riders and
more manageable for transit providers.

There are numerous options for electronic fare media including magnetic stripe cards or smart cards that are
capable of storing information. Additionally, contactless cards or mobile ticketing are available forms of
electronic fare media that use electronic purses or time coupons. The on-board fare collection system or
farebox is equipped to read the electronic fare media and store the data or transfer the data over a network to
a central database. Once the data is collected, it can be processed and mined to determine trip characteristics
such as trip origin/destination or rider category.

**Current Services**

The ADA paratransit and non-ADA demand responsive transportation provided by KCATA, the City of
Independence, UGT, and JCT are predominantly cash-based payment systems where drivers collect payment
from the rider upon completion of their trip. Some of the non-ADA services operate using a coupon system
that is pre-purchased by mail or in-person using cash, debit, or credit options. Shawnee CityRide uses the
CityRide card for fare payment. The card is issued at city hall and loaded with trips which cost the rider $2.00
each. It is a debit system where the card is swiped in the taxi providing the trip.
The Regional Transit Coordinating Council (RTCC) was formed in Fall 2013 by the KCATA and MARC to improve regional transit coordination. The RTCC serves as an advisory body to KCATA, MARC, and local jurisdictions and convenes to address regional transit planning, coordination, and implementation of priorities.

A regional initiative studied by RTCC and KCATA is a regional fare policy. One of the goals is to develop a comprehensive fare policy to address the current complexities in fare structure, regional agreements, and administration and develop a regional fare policy. As part of the study, investigation into a regional fare payment system is being conducted to ease the adoption of a regional fare. Mobile ticketing options as well as options for implementing a smartcard or new technology-based system, considering the fare equipment currently being used by each transit agency is under consideration. While the main thrust of the regional fare policy and fare payment system investigation is for fixed-route services, a fully-integrated fare payment system including paratransit services is desired.

**Selected Best Practices**

*San Francisco Paratransit (SFP): San Francisco, California*

San Francisco Paratransit (SFP) is operated by the San Francisco Municipal Transportation Agency (SFMTA) and has operated for more than thirty years. This service was started from a community desire for service that pre-dates federal passage of the Americans with Disabilities Act.

In 2009, SFP provided more than 1.1 million paratransit trips to approximately 14,000 registered riders. Approximately 50 percent of SFP trips were provided on taxis equipped for riders with disabilities. Before 2009, SFP riders paid for taxis with paper scrip, which was difficult and cumbersome to manage for SFMTA, drivers, and riders. In 2009, SFP implemented the Paratransit Debit Card System, installing swipe readers, smart meters, mobile data terminals, and GPS units compatible with taxi companies' credit card systems. The program then issued magnetic-swipe debit cards to all paratransit riders for identification and electronic payment. This new technology addressed numerous issues at once, including: eliminating the paper system, automating the fare payment process, electronically monitoring service, and reducing the opportunity for fraud.

The implementation of the debit card system, and the associated reduction in administration and fraud, contributed to the program being $2 million under budget for Fiscal Year 2009-2010. Operational cost savings are anticipated to offset increased use of paratransit services by the aging population. The capital investment by SFMTA totaled less than $5 million and was funded by a local tax proposition, FTA funding, bridge tools, and the San Francisco Municipal Railway Improvement Corporation.

The San Francisco Bay Area has over twenty transit agencies operating fixed-route and paratransit services in the region. The Muni, BART, AC Transit, VTA, SamTrans, Caltrain, Golden Gate Transit and Ferry, and San Francisco Bay Ferry have joined together to offer the Clipper all-in-one transit card. This card keeps track of any passes, discount tickets, ride books, and cash value loaded by riders while applying all applicable fares, discounts, and transfer rules.

Allocation of fare revenue from the Clipper system is governed by an interagency participation agreement. Paratransit services are not included in the interagency agreement; however, the Regional Transit Connection (RTC) Discount ID card is available to persons with disabilities. This card can be used to receive discount fares on fixed-route, rail, and ferry systems in the San Francisco Bay Area. The RTC program does not apply to paratransit services.
MetroAccess: Washington Metropolitan Area Transit Authority

MetroAccess is a regional service of the Washington Metropolitan Area Transit Authority (WMATA), and is the region’s complementary paratransit service. It is a shared ride service that provides daily trips throughout the Washington, D.C. metropolitan region, including the District of Columbia, Maryland, and Virginia.

In 2009, WMATA contracted with MJM Innovations to implement electronic transaction technology to enable the EZ-Pay feature for the MetroAccess paratransit program. EZ-Pay allows riders to prepay their MetroAccess fare by phone or online with a debit or credit card. Cash payment is allowed at sales offices. An EZ-Pay account is automatically established for riders when they are certified for MetroAccess. Riders prepay with EZ-Pay but use their MetroAccess photo ID for payment to the driver upon boarding the vehicle. Riders are allowed to pay with cash for the full and complete payment but they are encouraged to prepay for trips.

WMATA selected this system to avoid the need for riders to carry cash or other fare media. While they continue to accept other forms of payment, there is a desire for riders to take advantage of the cashless-fare system to increase trip efficiency. The fare payment technology’s goal is to provide a solution to streamline fare purchase, collection, and reporting for MetroAccess.

Additional features of the system allow riders who receive a transit benefit from their employer’s SmartBenefits program to direct the benefit to MetroAccess. Other features provide visibility to reservation agents so they can direct riders of total fare upon trip booking and balance in the EZ-Pay account.

SmarTrip is a contact-less stored-value smart card payment system managed by WMATA for the fixed-route system. The Maryland Transit Administration’s CharmCard uses a compatible payment system from the same manufacturer. Through a reciprocity agreement fixed-route riders can use WMATA’s payment card to travel on any of the participating systems throughout the Baltimore-Washington Metropolitan Area. This system is independent from the paratransit system; however, discount cards for MetroAccess eligible-riders are available for fixed-route trips.

SunGo: Tucson, Arizona

In June 2013, Sun Tran in Tucson, Arizona launched the SunGO smart card fare payment system, providing the ability for passengers to travel between Sun Tran, Sun Express, Sun Shuttle, and eventually the Sun Link modern streetcar with just one card. The SunGO system uses smart card technology to facilitate fare payments and transfers throughout the region. Sun Tran contracted with SPX Genfare, the vendor responsible for the development of the SunGO fare payment and online system. SunGO was selected to improve regional mobility by creating a more efficient and convenient transit system.

For paratransit riders, the City of Tucson issues a current ADA Eligibility Card, and through the Special Services Office, riders can set up an electronic fare payment account. To add value to the account, riders can send payment by mail, pay over the phone, or pay in person at the city office. The SunGO system and the paratransit electronic fare payment accounts are not linked.

Spokane Transit: Spokane, Washington

In January 2009, Spokane Transit Paratransit began issuing new ADA eligible ID cards to all riders. The ID card can be converted into a Smart Card that can be used as a monthly pass or a stored value (pre-paid debit) card. If a rider has activated their ID card as a smart card, the rider hands the card to the driver of the paratransit vehicle to scan on board. Riders have the option of using other forms of payment like cash, a paratransit monthly pass, or paratransit one-ride pass.
Opportunities for Coordination
Paratransit electronic fare payments systems can operate independently of fixed-route electronic fare payment systems or they can be fully integrated. Regional systems are typically governed by interagency agreements that allocate fares and expenses based on trip characteristics. For a regional system to be most effective, three components need to be considered: (1) universal identification and fare payment card(s), (2) trip reservation and scheduling software compatibility, and (3) on-board fare collection equipment compatibility.

Universal Identification Cards
If regional eligibility is implemented for ADA-eligible riders, issuing a universal identification card is a logical next step. A universal identification card could follow the RideKC branding initiative and allow for upgrades to a payment card in the future.

Explore Software Compatibility
As discussed in the Implementation of Advanced Technology section, limited use of their current system by UGT and similar systems for KCATA, the City of Independence, and make this opportunity for software compatibility within reach. Cost would be the most significant barrier for UGT, but partnering with a system already in operation may reduce costs.

Fare Collection System Determination
As the regional fare policy discussion continues, paratransit should be included in the discussion as it could be a stand-alone pre-payment system or included in a comprehensive electronic fare system compatible with the fixed-route options. An early step could be adopting a pre-payment system attached to the trip scheduling software. If a system-wide fare collection upgrade is under consideration, waiting for paratransit implementation would be easier for rider adoption.

Cost and revenue allocation between agencies would be governed by agreements similar to monthly pass agreements in place today. These agreements would need to be negotiated early and updated once the system is in place so they are accurately reflecting how the system is operating.

On-Board Fare Collection Equipment Compatibility
Depending on the type of regional fare collection system selected there may be a need to upgrade and/or install fare collection equipment in all paratransit vehicles. Some constraints with this opportunity focus on the cost to upgrade and install equipment. Additionally, the contracted use of taxis would require the system to be adaptable to the payment system in the taxis.

Second Stakeholder Meeting
In February 2015, the second of three stakeholder meetings was held with the Mobility Advisory Committee. The purpose of the meeting was to review the coordination options and build consensus around priority options. Meeting attendees ranked their coordination priorities in terms of desired implementation. The outcome of the exercise results in the rankings in Table 13. The meeting notes for the second stakeholder meeting are included in Appendix B. The top three shortlisted strategies, identified below, are the focus of the next phase of the study.

► ADA Service Coordination
► Regional Eligibility
► Expanded Information and Referral Services
Table 13: Second Stakeholder Meeting Results

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<td>Improved Public Information</td>
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\(^1\) Includes Regional Electronic Fare Payment
PART III
Priority Options
and Proposed
Coordination Plans
Part III Summary

The final part of the study provides Proposed Coordination Plans for implementation of the selected options

- Coordination of ADA Services
- Regional Eligibility Determination
- Expanded Information and Referral Services

A summary of current services is first described, and then proposed changes are indicated. Implementation considerations and proposed schedules are also provided. Throughout the process, meetings were held with key stakeholders, those who will be most affected by implementation of one or more of the shortlisted strategies. The Proposed Coordination Plans were presented at the third meeting of the Mobility Advisory Committee in April 2015. The meeting notes for the third stakeholder meeting are included in Appendix B.

Coordination of ADA Paratransit Services

The coordination of ADA paratransit services in the Kansas City region was the option that was rated the highest by the Mobility Advisory Committee. This includes the coordination of ADA paratransit and other demand responsive services provided by the four core agencies: KCATA, the City of Independence, UGT, and JCT. Following is a description of these services and a Proposed Coordination Plan.

Current Services

KCATA

KCATA provides Share-a-Fare (ADA) paratransit service within 3/4 of a mile of all non-commuter fixed-routes as well as service to eligible riders outside the required ADA service area and service to low-income seniors (non-ADA). The Share-a-Fare service area includes much of Kansas City, Missouri as well as portions of Kansas City, Kansas and the eastern part of the City of Independence. There are 7,282 registered Share-a-Fare riders who take 258,574 trips per year.

KCATA operates a call center and takes trip requests from riders. Trip requests are scheduled to vehicle runs by a contractor, Reveal Management Systems. Schedules created by Reveal Management Systems are then sent to Transdev, the contracted service provider. Transdev operates a fleet of 77 vehicles and also subcontracts to have some trips provided on taxicabs. KCATA’s annual operating budget for the Share-a-Fare service is about $10.6 million. The fare is $3.00 per trip.

City of Independence

The City of Independence provides ADA paratransit as part of its IndeAccess service. There are two types of IndeAccess service: IndeAccess service to ADA paratransit eligible riders and IndeAccess Plus service to seniors. There are 425 registered riders who make 12,734 trips per year – 8,654 IndeAccess (ADA eligible) trips and 4,080 IndeAccess Plus (senior) trips. IndeAccess (ADA) service is provided in areas of the City of Independence that are within 3/4 of a mile of IndeBus routes, the City’s fixed-route service.

The IndeAccess services are provided by First Transit, a contractor to the City of Independence. First Transit provides a turnkey service. It takes and schedules trip requests and operates and maintains the vehicles that provide the service. Four vehicles are used to provide the IndeAccess and IndeAccess Plus service. Total annual operating budget for the service is $322,800, of which $193,700 is for IndeAccess ADA service and $129,100 is for IndeAccess Plus senior transportation service. The fare for both services is $2.00 per trip.

Unified Government Transit

UGT provides several different paratransit and demand responsive services. Dial-a-Ride is provided to ADA eligible riders. Demand Response provides medical, shopping, and other trips for residents 60 years of age or
older traveling within Wyandotte County. Senior Group Transportation takes groups of ten or more seniors to destinations within a 50-mile radius of Kansas City, Kansas. Congregate Meals transportation takes seniors to and from congregate meal sites. Meals on Wheels delivers hot lunches to seniors. The Demand Response, Congregate Meals, and Meals on Wheels services are part of UGT’s Aging Transit service, which is supported by and coordinated with the Unified Government Area Agency on Aging (AAA). UGT operates the Dial-a-Ride and Aging Transit services in-house. UGT employees take and schedule trip requests, and UGT drivers operate the vehicles. Dial-a-Ride (ADA) and Aging Transit Demand Response services are provided within Wyandotte County and on the same vehicles. Eight vehicles are used to provide this integrated service. UGT also operates three minivans and one freezer truck used to provide Meals on Wheels service.

There are 4,500 registered riders for both the Dial-a-Ride and Aging Transit Demand Responsive services. Dial-a-Ride provides 8,366 trips per year to ADA eligible riders. A total of 14,880 trips are provided on the Aging Transit service, which includes Demand Response trips as well as trips to and from congregate meal sites. The annual operating cost of the Dial-a-Ride (ADA) service is $145,162. The Aging Transit service operating cost is $875,162 per year. The Dial-a-Ride (ADA) fare is $3.00 per trip. The Aging Transit Demand Response service is $1.00 per trip. Service to and from congregate meal sites is provided for $0.50 per trip.

Johnson County Transit

JCT provides two different demand responsive transportation services for seniors, persons with disabilities, and low-income residents: Special Edition and Sheltered Workshop Industrial Fixed Transportation (SWIFT). Special Edition provides demand responsive services for seniors (65+), people with disabilities, and low-income residents. Transportation is provided mainly within Johnson County, but also to designated destinations in Kansas City, Kansas and Kansas City, Missouri for medical appointments. SWIFT provides transportation for people who are participating in services provided by Johnson County Developmental Support Services. Transportation is provided to and from work training and employment sites.

Johnson County contracts with Reveal Management Systems for reservations and scheduling of trips – the same company that schedules Share-a-Fare trips for KCATA. The County also contracts with two private companies – First Transit and 10/10 Taxi – to operate vehicles and provide the service as scheduled by Reveal Management Systems. The County also owns the vehicles operated by First Transit and the facilities used by Reveal Management Systems and First Transit. Johnson County recently entered into a contract to have KCATA assume responsibility for management of the Special Edition and SWIFT services. Johnson County still contracts with Reveal Management Systems, First Transit, and 10/10 Taxi directly for the provision of service, but these companies are not managed by KCATA. Once the current contracts with the contractors expire, it is expected that future contracts will be with KCATA directly.

In 2013, 56,650 one-way trips were provided under the Special Edition service and 45,430 trips were provided for SWIFT. About 260 one-way trips are provided each weekday, with about 160 of these provided by 10/10 Taxi and the remainder by First Transit. The annual operating budget for these services in 2013 was $4,254,767, which included $3,313,681 for Special Edition and $941,086 for SWIFT. The cost per trip for Special Edition was $41.68 and the cost per trip for SWIFT was $20.72.

Figure 8 illustrates how services are currently structured and provided. Share-a-Fare riders call KCATA to schedule trips. Trips are then scheduled by Reveal Management Systems and provided by Transdev. Riders in Independence call First Transit for local trips and KCATA for regional trips. First Transit schedules and provides local IndeAccess trips. KCATA provides regional Share-a-Fare ADA trips. Riders in Wyandotte County call UGT for local trips and KCATA for regional trips. UGT schedules and provides local Dial-a-Ride, Demand
Response, Senior Group, Congregate Meals, and Meals on Wheels transportation. KCATA (through Reveal Management Systems and Transdev) schedules and provides regional Share-a-Fare ADA trips.

Figure 8: Current Service Structure

Meeting Summary
Input was obtained from staff at each agency, as well as MARC staff, on possible approaches to coordination of services. This included discussions with Jameson Auten of KCATA, Mary Hunt of the City of Independence, Justus Welker and Irvin Jackson of UGT, and Tyler Means of MARC. Various approaches to coordination of current services were discussed. There was general consensus that a phased implementation seemed most appropriate.

There is significant overlap of current ADA paratransit services. KCATA operates fixed-routes into the City of Independence as well as Wyandotte County and therefore is required to provide ADA paratransit services in those areas. To minimize the overlap, KCATA does not provide local service in areas where the City of Independence and UGT operate. KCATA only provides service to and from each overlapping area. If riders call KCATA for service locally within Wyandotte County or the City of Independence, they are referred to UGT and IndeAccess.

In 2013, the City of Independence provided 8,654 trips to ADA eligible riders making local trips within the city and 4,080 trips for seniors. KCATA provided 14,160 Share-a-Fare trips to/from Independence. UGT provided 8,366 trips in 2013 to ADA eligible riders making trips within Wyandotte County and 14,880 trips for seniors. KCATA provided about 6,000 Share-a-Fare trips to ADA eligible riders to/from Wyandotte County.

The volume of ADA service provided by each agency suggests that KCATA operates as many vehicle-hours of service within Independence as the City, and a significant portion of the demand response trips within Wyandotte County. If services were coordinated, it is likely that the total service could be provided more efficiently. Currently, Share-a-Fare vehicles deadhead into and out of Independence and Wyandotte County when providing inter-area trips. If coordinated, Share-a-Fare vehicles could be used to provide local trips when operating in each area. Vehicles that are now used only locally could also assist with some inter-area trips.
Some overlap also exists between the services provided by KCATA and JCT. KCATA provides some ADA paratransit service in eastern Johnson County. JCT also provides transportation to Kansas City, Kansas for specialized medical needs. JCT vehicles therefore sometimes overlap with vehicles operated by both KCATA and UGT in these areas.

Proposed Coordination Plan
Following is a description of the phase implementation plan. Implementation issues and a suggested schedule for the proposed changes is also provided.

Phase I: Coordination of KCATA and City of Independence Services
The recommended first phase involves the coordination of the IndeAccess and IndeAccess Plus services with the KCATA Share-a-Fare service. Under this model, trip reservations would be taken by reservationists at KCATA who also book trips for the Share-a-Fare service. Reveal Management Systems, the company that schedules Share-a-Fare trips, would also schedule IndeAccess trips and send the selected Independence contractor schedules to be run each day. Figure 9 shows how service will be structured and provided in Phase 1.

Under this arrangement, KCATA would still be responsible for funding regional trips to and from Independence and the rest of its service area. The City of Independence would fund local ADA trips, with both origins and destinations within the city, as well as local trips for seniors under the IndeAccess program. Both services will also still be marketed to the public as separate programs.

Impacts on KCATA and Reveal Management Systems staff should be manageable. About 75 percent of IndeAccess service is standing order subscription trips that are prearranged and pre-scheduled without ongoing calls from riders. Only about 3,183 trips per year (or 61 per week) are non-subscription. Allowing for trip requests that are cancelled, this suggests about 40 calls per week will be making new trip requests that will need to be individually scheduled. Allowing for an equal number of “Where’s my ride?” calls or trip cancellation/confirmation calls suggests an increased workload of about 80 calls per week, or about 14 to 16 calls per weekday.

Figure 9: Service Structure After Phase I Coordination
Phase I Implementation Considerations
As this new model is implemented, particular attention should be given to the following implementation issues.

► **Public information and rider notification:** Efforts should be made to notify riders of the change of services. The IndeAccess service is relatively small, and riders and First Transit staff who now handle trip reservations have developed a close relationship. The First Transit scheduler knows most riders by name and in many cases by voice. Riders will notice that changes have been made to how reservations are handled. As a result, it will be important for riders to anticipate the changes. This can be done by sending a service update to all registered riders and by distributing updates to riders on vehicles for one or two weeks. Local agencies served by IndeAccess, such as dialysis centers, should also be made aware of the change.

Notification should stress that the coordination of services is being done in part to streamline the process for providing ADA service throughout the region. Updates should note that riders no longer will need to call different reservation numbers for local versus regional ADA trips.

► **Staff orientation to IndeAccess riders:** Also because of the close relationship between First Transit staff and riders, it would be advantageous for KCATA reservation staff to develop an understanding of current riders and trips. This could be done by having KCATA reservationists sit with the First Transit reservationist/scheduler/dispatcher for a few days and listen-in on calls. KCATA reservationists could also spend a few days riding on vehicles and meeting riders.

► **Standing order trips and schedules:** A significant part of the current IndeAccess service (about 75 percent) is standing order trips. It would be beneficial for Reveal Management Systems schedulers to sit with the First Transit scheduler to gain a full understanding of how standing order trips are arranged and scheduled. It will also be beneficial for Reveal Management Systems schedulers to gain a full understanding of how the final run structure is decided by First Transit each day. First Transit has a few set runs and drivers but then can open extra runs using available drivers as needed. It will be important for Reveal Management Systems to understand how these decisions are made and how First Transit staffing ties into decisions to open (or close) runs.

► **Trip time negotiation:** KCATA reservationists currently do not negotiate trip times and schedule trips to actual runs. Trip requests are simply entered into the scheduling system at the times requested. IndeAccess trip times are sometimes negotiated. Because of the limited IndeAccess fleet, reservationists must make sure that there are not too many trips in any given 15-minute period of the day. A maximum number of trips per 15-minute period is established and times are negotiated once this quota is reached. ADA trips are negotiated up to an hour and non-ADA trips can be negotiated even more. Until trips are commingled and additional capacity is available to provide local IndeAccess trips (see below), KCATA will need to implement a trip reservation procedure for IndeAccess trips similar to what is currently used to ensure that trips can be scheduled and performed on-time.

► **Dispatch and run management technology:** If the selected service provider for IndeAccess continues to dispatch and manage runs on the day of service, it will be highly beneficial for the provider dispatcher to have access to Reveal dispatching and management software. This software should be installed at the selected contractor’s location and the dispatcher should be trained to proficiency to use the software. Leading up to the change, the selected contractor’s current software should be run side-by-side with the Reveal software so that service can continue uninterrupted during the transition period.
Trip Commingling and Implementation Considerations

Moving forward, opportunities for coordination of the two services can be explored. Following is a proposed plan for this future coordination. It is recommended that opportunities for commingling trips for greater efficiency and increased service capacity be explored. Reveal Management Systems should look for opportunities to use vehicles operated by Transdev, KCATA’s regional Share-a-Fare service provider, to provide local trips in Independence. Similarly, Reveal Management Systems should consider using vehicles operated by the selected Independence contractor to assist with some regional Share-a-Fare service if this is more productive and efficient than having a Transdev vehicle deadhead to the city.

The following are implementation issues which will need to be considered to successfully commingle trips:

- **Cost allocation**: With multiple contractor vehicles used to provide both services, an approach for allocating costs will need to be developed. Currently, the costs for IndeAccess are simply the costs billed by First Transit, and the costs for the Share-a-Fare service are the costs billed by Transdev. If both providers are used, the cost allocation methodology will need to assign costs from each provider to KCATA and the City of Independence.

Because the two services are different in terms of average trip lengths, subscription rates, and productivities, a simple per trip cost allocation would not work. IndeAccess service tends to be more standing order trips with shorter average lengths, and therefore are about $25.35 per trip. Share-a-Fare tends to have a higher proportion of individual, non-standing order trips and longer region-wide trip lengths and costs about $41 per trip. It would therefore not be possible to simply allocate costs based on the proportion of trips for each service provided by each provider.

Instead, it is recommended that passenger-miles of service be used to allocate costs. Mileage at each origin and destination would be captured by GPS and mobile data terminal (MDT) units on each vehicle. Trips would then be coded by program – either Share-a-Fare or IndeAccess. The cost of each provider would then be allocated to KCATA and the City of Independence by the proportion of passenger-miles of service provided for each program by each provider.

Implementing this proposed cost allocation methodology would require that the fleets of both providers be equipped with GPS and MDT technologies. Transdev vehicles currently have both technologies. The vehicles of the selected Independence contractor would need to be equipped with compatible systems.

- **Managing total costs**: A second challenge with the commingling of trips will be managing the overall service within the maximum budgets established by each agency. The cost of service is typically managed by controlling the number of vehicles and vehicle-hours of service provided each day. Having vehicles from other fleets available to support local transportation programs creates additional capacity. The total number of trips provided and the total fleet capacity used will need to be closely monitored to ensure that the services funded by each agency remain within budget.

Each agency will continue to decide the maximum budget for combined ADA and senior transportation. ADA trips will be accommodated because there can be no capacity constraints on this service. Non-ADA (senior) transportation will then be provided up to the maximum capacity funded by each agency.

- **Rider recognition of vehicles**: Currently, riders look for a specific style of vehicle with particular branding. Utilizing vehicles from a different company could be confusing to riders. This issue should be addressed before trips are commingled. In the short-term, riders should be made aware through mailed notices or
flyers distributed on-board vehicles that different vehicles might be used. Pictures of the different vehicles should be included in the notices/flyers.

In the long-term, this issue should be addressed through regional branding of services. An overarching brand, such as RideKC should be adopted for all regional services. The logo should then be added to vehicles used in coordinated regional service. If desired, local program names could be maintained as part of the larger brand. For example, vehicles might display both the RideKC brand as well as the IndeAccess or Share-a-Fare names. Public information describing the RideKC brand could note that both programs are included within the regional network of services. Vehicles used in shared-service could then display the overarching brand as well as all program names for which they are used. For example, Transdev vehicles used in both regional Share-a-Fare service and local IndeAccess service could display the RideKC name and logo and the Share-a-Fare and IndeAccess program names in smaller print. Consistent driver uniforms featuring the branding would also help riders identify the ride.

Handling of “Where’s my ride?” calls and same-day schedule changes: Currently, calls from Share-a-Fare riders inquiring about the status of pickups are transferred to Transdev dispatchers. Calls making same-day changes (i.e. trip cancellations) are also transmitted to the provider (either electronically by entering the cancellation in the Reveal system or by both entering it in the system and following up with a notification call). Calls from IndeAccess riders are currently handled directly by First Transit. If trips are commingled, a process will need to be in place to identify which provider has the trip so that riders can be transferred to the correct provider. It is therefore recommended that these calls also be handled centrally by KCATA staff. This will allow the staff to look in the Reveal system, identify the provider to which the trip has been assigned, and then forward the information or call to that provider. To facilitate efficient communications between KCATA agents and provider dispatchers, it is also recommended that dedicated phone lines be installed at each provider site linking agents to provider dispatchers.

Consistent operating policies: Another challenge with commingling trips is consistent operating policies. Trips for different programs cannot easily be commingled if key operating policies are not the same. For example, if there are different on-time performance windows for each program, riders from different programs will be looking for vehicles at different times, which is difficult to manage.

Table 14 outlines key policies used for the Share-a-Fare and IndeAccess services. As shown, there is consistency in the on-time window, vehicle wait time, and late cancellation policies. There are some differences in driver assistance, package policies, and trip negotiations. The difference in trip negotiation is discussed above. Until commingling of trips is implemented, KCATA will need to implement a trip time negotiation process for IndeAccess trips to ensure that all trips can be scheduled and delivered on-time. This could be done just for IndeAccess trips without impacting the Share-a-Fare riders or service.

A consistent driver assistance policy will need to be agreed upon. Once trips are commingled, it will be confusing for drivers and dispatchers to distinguish between Share-a-Fare and IndeAccess riders. It is recommended that door-to-door service be adopted for both services with assistance automatically provided at both the origin and destination unless refused by the rider.

Similarly, a consistent package policy should be adopted. To keep from downgrading service to any riders, it is recommended that the more liberal policy of allowing up to six packages be adopted for both services. These changes may require amendments to current service delivery contracts and notice to/re-training of drivers.
Table 14: Key Share-a-Fare and IndeAccess Operating Policies

<table>
<thead>
<tr>
<th>Policy</th>
<th>KCATA</th>
<th>City of Independence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation window</td>
<td>Trip requests currently not negotiated</td>
<td>+/- 1 hour (ADA); more for non-ADA</td>
</tr>
<tr>
<td>On-time window</td>
<td>+/- 15 minutes</td>
<td>+/- 15 minutes</td>
</tr>
<tr>
<td>Vehicle wait time</td>
<td>5 minutes</td>
<td>5 minutes</td>
</tr>
<tr>
<td>Driver assistance</td>
<td>Door-to-door</td>
<td>Door-to-door as needed</td>
</tr>
<tr>
<td>Package limits</td>
<td>5 packages</td>
<td>6 packages</td>
</tr>
<tr>
<td>Late cancel policy</td>
<td>At least 2 hours prior to trip</td>
<td>At least 2 hours prior to trip</td>
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</tbody>
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Phase II: Coordination of KCATA and UGT Services

The second phase involves coordination of UGT’s services with the KCATA and the City of Independence services. This is proposed as a separate phase for two reasons: (1) because the UGT services are more involved and varied, and (2) to allow the mechanisms for coordination to be successfully established in Independence before being applied more broadly.

As noted above, UGT manages several transportation programs. This includes local Dial-a-Ride (ADA) service, Senior Group Transportation, and Aging Transit. Aging Transit then includes individual Demand Response trips for seniors, Congregate Meals transportation to and from meal sites, and Meals on Wheels food delivery. Dial-a-Ride and Senior Group Transportation are administered by and funded by UGT. Demand Response, Congregate Meals, and Meals on Wheels transportation is supported by Unified Government Area Agency on Aging (AAA) and managed jointly by UGT and the AAA.

In terms of which services to coordinate regionally, three options seem most plausible:

1. coordinate only the Dial-a-Ride (ADA) service
2. coordinate Dial-a-Ride, Senior Group Transportation, and senior Demand Response service, or
3. coordinate all services.

Because UGT works together with the AAA and jointly manages the Congregate Meals and Meals on Wheels transportation services, it is recommended that these remain locally managed. The AAA develops the daily lists of riders to be transported to and from congregate meal sites and enters this information directly onto the schedules of vehicles used for this service. Similarly, the AAA identifies the meals to be delivered each day and loads this information onto handheld computer units used by drivers to confirm each delivery. This close working relationship seems best suited to local management.

There are advantages and disadvantages to both Option 1 and Option 2. It could be argued that Dial-a-Ride (ADA) service is the only truly regional service and senior Demand Response is local and should continue to be managed locally. On the other hand, the same vehicles are used by UGT to provide both Dial-a-Ride and Demand Response service; it would be counterproductive and unwieldy to split the service and have schedules for the same vehicles developed by two separate schedulers. If the services provided regionally by KCATA and the City of Independence include both ADA and senior transportation, it would seem to be most consistent to have both UGT services coordinated as well. It is recommended that Option 2 be pursued and that both the Dial-a-Ride and Demand Response services be coordinated with Share-a-Fare and IndeAccess services.

It is also recommended that a staged implementation, similar to that used to coordinate City of Independence and KCATA services, be used for UGT. To start, it is suggested that trip reservations and scheduling for Dial-a-Ride and Demand Response services be handled by KCATA. Trip reservations would be taken by KCATA.
reservationists and scheduling would be done by Reveal Management Systems under contract to KCATA. Reveal Management Systems would develop and return schedules to UGT for operation each day. For several months, it is suggested that KCATA simply manage the service as currently provided with no commingling of trips. During this period, reservationists and schedulers should become proficient in working with UGT and riders from Wyandotte County. During this period, Reveal Management Systems should also analyze local trips provided by UGT and regional ADA trips provided by KCATA and consider opportunities for commingling.

Once the transfer of reservations and scheduling has been successfully transitioned, commingling of trips on UGT and Transdev vehicles should be implemented. As in Phase I, a cost allocation methodology should be applied to equitably share the cost of service. Figure 10 illustrates how services will be structured and delivered after Phase II coordination is implemented.

Figure 10: Service Structure After Phase II Coordination

Phase II Implementation Considerations
Many of the same implementation issues that are noted above in Phase I for coordination of the IndeAccess and Share-a-Fare services would apply to coordination with UGT. This includes creating and distributing public information to alert riders to the transition of reservations and scheduling; orientating KCATA reservations staff to UGT riders and services; developing a full understanding of standing order trips and schedules; agreeing on a cost allocation methodology; managing total costs; rider recognition of vehicles; and handling of “Where’s my ride?” and same day change calls. Lessons learned from the coordination of the City of Independence and KCATA services should be applied to this second phase of coordination.

Other implementation issues that are unique to the UGT coordination include:

► Compatible reservations, scheduling, and dispatching technologies: The Reveal technology would need to be implemented at UGT to facilitate regional trip reservations and scheduling. The Reveal dispatch module would also be needed since UGT would continue to operate vehicles and services. As a standalone public entity, rather than a contractor to KCATA, a standalone implementation of Reveal is recommended with full capabilities to manage all UGT transportation services, including the Aging
Services that will continue to be provided locally. Some customization of the product used by KCATA may also be needed to incorporate the links with Aging Services that have been developed for the Congregate Meals and Meals on Wheels services. It is recommended that a Section 5310 grant be considered for the purchase and installation of Reveal software and related hardware.

- **Fully utilizing UGT vehicles:** Under the agreement that UGT has with the union, drivers are paid eight hours a day to be available to provide service, regardless of the actual trips scheduled to their runs. In any regional system, it will therefore be important to fully utilize this available resource before assigning trips to other contractors. Even if a more efficient individual trip assignment is possible, it would not be cost-effective to assign trips to a for-profit provider if there is open space on a paid UGT schedule. As the commingling of trips is being implemented, Reveal Management Systems should therefore first fully schedule all available UGT runs. Remaining trips should then be assigned to other contract providers.

- **Coordination of group versus individual Dial-a-Ride scheduling:** While UGT will continue to manage and schedule Congregate Meal transportation locally, the vehicles that provide this service can be used to assist with Dial-a-Ride and Demand Response trips in the afternoon. UGT currently uses Congregate Meal vehicles to assist with will-call returns between 1:00 PM and 4:00 PM. It will therefore be important to continue to utilize this capacity to be able to accommodate will-call return trips. It may also be possible to utilize this vehicle time for other trips as well.

It is recommended that UGT set up the Congregate Meals runs in the Reveal system and continue to work with the AAA to schedule trips to and from congregate meal sites. Once these trips have been entered, Reveal Management Systems could have access to the runs and could use them in the afternoon to perform other local or regional ADA, Dial-a-Ride, or senior Demand Response trips. UGT could also continue to utilize this vehicle time for will-call returns as part of their dispatching and operation of the Dial-a-Ride and Demand Response runs.

- **Consistent service policies:** Again, consistent policies will be needed to effectively commingle trips. Table 15 shows key operating policies for the KCATA Share-a-Fare service, the IndeAccess service, and for the UGT Dial-a-Ride and Demand Response services. Note that the policies for Share-a-Fare and IndeAccess assume that the changes recommended in the Phase I coordination have been made to make the policies for these services consistent.

As shown, the services are consistent in terms of the on-time window and late cancellation policy. There is some difference in rider assistance with the Share-a-Fare and IndeAccess services offering door-to-door service as the base level of service and Dial-a-Ride and Demand Response drivers providing assistance beyond the curb as needed. As in Phase I, it is recommended that door-to-door service in all cases be adopted as the consistent policy.

No real inconsistencies exist with the vehicle wait time and package policies since UGT has not adopted a formal policy and decides wait time and package accommodation on a case-by-case basis. To ensure consistent service delivery, it is recommended that the Share-a-Fare and IndeAccess policies be formally adopted for the Dial-a-Ride and Demand Response services once commingling of trips is implemented.

As in Phase I, these changes will require some notification of and re-training of UGT drivers.
Table 15: Key Share-a-Fare, IndeAccess, Dial-a-Ride, and Demand Response Service Policies

<table>
<thead>
<tr>
<th>Policy</th>
<th>KCATA and City of Independence¹</th>
<th>Unified Government Transit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negotiation window</td>
<td>Some negotiation of IndeAccess trips; no negotiation of Share-a-Fare trips</td>
<td>No formal window; negotiated as needed</td>
</tr>
<tr>
<td>On-time window</td>
<td>+/- 15 minutes</td>
<td>+/- 15 minutes</td>
</tr>
<tr>
<td>Vehicle wait time</td>
<td>5 minutes</td>
<td>No formal policy</td>
</tr>
<tr>
<td>Driver assistance</td>
<td>Door-to-door</td>
<td>Door-to-door as needed</td>
</tr>
<tr>
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<td>No formal limit</td>
</tr>
<tr>
<td>Late cancel policy</td>
<td>At least 2 hours prior to trip</td>
<td>At least 2 hours prior to trip</td>
</tr>
</tbody>
</table>

¹ Assumes changes recommended in Phase I coordination

**Phase III: Implementation of Regional Call and Control Center and Coordination of JCT Services**

The third phase of coordination of service would involve implementation of a single, regional call and control center. It would also include relocating the JCT operation and housing it together with this call and control center. Under the first two phases, trip reservations and scheduling will be regionalized for ADA and individual seniors transportation services, but reservations and scheduling will not be co-located. Most trip reservations will be housed at KCATA, but some will remain at the JCT operations center. Dispatch will be in four different locations – Transdev, a selected contractor (City of Independence), First Transit (JCT), and UGT.

In this final implementation phase, a central location will be created for the operation and management of all regional ADA and individual senior transportation services. This will include trip reservations, scheduling, and radio dispatch. Vehicle operation and window dispatch (the management of run pull-in, pull-out, and vehicle exchanges) will remain with the service providers. KCATA paratransit management staff should also be located at this central facility to facilitate effective service management and monitoring.

Under this design, riders will call the call and control center to make trip requests. Trips will be scheduled by schedulers at the center. Run manifests will then be transmitted to contracted service providers the evening before each day of service. Drivers will be assigned runs and vehicles at each service provider garage. When drivers pull-out, they will log-in with dispatchers and the control center and will complete runs under the direction of the dispatchers at the center. If on-road assistance is needed, the dispatchers at the control center will work with window dispatchers at the service provider garages to respond as needed. This service design model has been used successfully by many large transit agencies that have multiple service providers, including Seattle, Portland (OR), Denver, Philadelphia, Baltimore, New York City, and Washington, DC.

In some cases, call and control centers are operated in-house while others contract out. Since trip scheduling, a critical part of this design, is now contracted out, it is recommended that KCATA contract out for the operation and management of this new call and control center. As part of the procurement, the contractor should be encouraged to interview and hire current reservationists and radio dispatchers whenever appropriate.

In addition to procuring and managing the call and control center contractor, KCATA would also procure and manage the service providers. It is recommended that multiple service providers be used. This will provide flexibility and back-up and will minimize transition issues. It will also aid in achieving good service performance. If one of the contracted providers does not meet performance standards, and efforts to correct the problem are not successful, trips can simply be shifted to the service providers that are meeting performance standards. Incentives and damages will not need to be relied on as heavily to achieve quality performance.

Figure 11 illustrates how the regional paratransit service would be structured under this design.
Phase III Implementation Considerations
Following are implementation issues which will need to be considered in Phase III coordination:

► **Timing and contract changes**: The creation of a single call and control center will significantly change some of the contracts between KCATA and its service providers, and between JCT (or KCATA) and the providers of Special Edition and SWIFT services. The service providers will no longer be asked to provide radio dispatch and manage vehicle runs on the day of service. They will not handle “Where’s my ride?” calls or calls making same-day service changes. All of these functions will be performed by the new call and control center contractor.

Ideally, these changes would be made as existing contracts expire and new services are procured. However, it will be many years until current contracts expire. The contract between KCATA and Reveal Management Systems and KCATA and Transdev for the scheduling and operation of the Share-a-Fare service is effective until January 31, 2019.

It is therefore recommended that KCATA negotiate an earlier contract end date with Reveal Management Systems to allow an RFP for a new call and control center. Similarly, it is recommended that KCATA negotiate with Transdev to identify the costs related to services they would no longer be asked to provide (i.e. radio dispatch, weekend reservations) and that a revised reimbursement rate be created. Note that Transdev can still be involved as one of the providers in the Phase III service design.

If new contracts are executed for service in Johnson County before Phase III is implemented, KCATA should request two prices: one for the provision of service with radio dispatch and another without radio dispatch. The new contracts should also give KCATA the flexibility to establish a call and control center and have the providers work under the direction of the call and control center contractor.

► **Trip time negotiation**: The creation of a call and control center will also allow for greater trip time negotiation. Trip time negotiation is important for maximizing trip grouping and operating shared-ride
paratransit service in a cost-effective manner. The ADA allows trip times to be negotiated an hour
before or after requested times (with consideration to trip needs) to enable appropriate grouping.

The RFP for the new call and control center should require the contractor to utilize software that
allows for trip time negotiation while still protecting negotiated times for other riders. It should also call
for reservationists to use this software feature to place trips on runs and negotiate appropriate times.
Efforts will then need to be made to inform riders of this new trip scheduling process. This will be
particularly important for Share-a-Fare riders whose requested trip times are currently not negotiated.

- **Commingling of JCT trips and consistent operating policies:** With a single call and control center, it will also
  be possible to coordinate and commingle JCT trips with other trips in the region. As with coordination
  in Phases I and II, consistent operating policies will be needed for trips to be effectively commingled and
  served. Table 16 shows key operating policies proposed for Phase II coordination (KCATA Share-a-Fare
  service, IndeAccess service, and UGT Dial-a-Ride and Demand Response services). It then shows the
current operating policies for JCT Special Edition service.

JCT’s on-time window, vehicle wait time, and late cancellation service policies are consistent with those
recommended for the Phase II coordination. No conflict exists as no formal trip time negotiation policy
has been adopted. Since JCT services are non-ADA, reservationists can negotiate trips times for Special
Edition trips as needed.

There is a significant difference in rider assistance policies. Door-to-door service is recommended as the
policy for KCATA, Independence, and UGT services under the Phase II coordination. JCT Special
Edition service is curb-to-curb. Even though Special Edition is non-ADA service and assistance beyond
the curb is not required, it is recommended that a door-to-door assistance policy be adopted for that
service as well if trips are commingled. It simply would be too difficult to try to have drivers differentiate
and provide different levels of service for different program riders.

There is also a significant difference in the package assistance policies. A six package limit is
recommended for KCATA, the City of Independence, and UGT services under Phase II coordination.
JCT does not assist riders with any packages. Again, if trips are commingled in Phase III, it is
recommended that a six package limit be adopted for JCT services as well. As in prior coordination
phases, additional driver training on the revised policies will be needed.

Table 16: Key Operation Policies for KCATA, City of Independence, UGT, and JCT Services

<table>
<thead>
<tr>
<th>Policy</th>
<th>KCATA, City Independence, and Unified Government Transit (Phase II)¹</th>
<th>Johnson County Transit</th>
</tr>
</thead>
</table>
| Negotiation window | ADA trips: +/- 60 minutes (considering trip requirements - appointment or earliest time)
Non-ADA trips: Negotiation as needed. | No formal window; negotiated as needed       |
| On-time window      | +/- 15 minutes                                                      | +/- 15 minutes                               |
| Vehicle wait time   | 5 minutes                                                          | 5 minutes                                    |
| Driver assistance   | Door-to-door                                                       | Curb-to-curb                                 |
| Package limits      | 6 packages                                                         | No package assistance                        |
| Late cancel policy  | At least 2 hours prior to trip                                     | At least 2 hours prior to trip               |

¹ Assumes changes made in Phase II coordination as well as full trip time negotiation
Regional Branding of Coordinated Service

With a single call and control center and the coordination of all core services in the Kansas City region, regional branding of the new service can be considered. A single name for the service can be adopted (i.e. AccessRideKC). Another option, as noted earlier, is a regional brand that can be used together with local service names.

Proposed Schedule

Figure 12 provides a suggested schedule for the proposed three phase coordination of ADA paratransit and other demand responsive services. The first part of Phase I—the transition of reservations and scheduling for the IndeAccess service and the transition of IndeAccess management to KCATA—is currently being negotiated. It is assumed that this first step will be implemented by mid-2015.

Once trip reservations and scheduling for Share-a-Fare and IndeAccess services is coordinated, KCATA and Reveal Management Systems can analyze the potential benefits of commingling trips in the third quarter of 2015. If the analysis shows potential efficiencies and cost savings, trip commingling could be phased-in in the last quarter of 2015 and the first quarter of 2016. The acquisition of a new paratransit software system that is compatible with KCATA and the City of Independence is needed before any coordination can be implemented with UGT (Phase II). Opportunities for funding can begin to be explored immediately. It is estimated that purchase and implementation could occur in the first quarter of 2016. Coordination of trips scheduling for UGT’s Dial-a-Ride and Demand Response services could then be implemented in the second and third quarters of 2016. An analysis of opportunities for cost savings and efficiencies could then be performed and the commingling of trips could be phased-in in late 2016 and early 2017 if savings and efficiencies were apparent.

Implementation of a single call and control center would begin with negotiations between KCATA and service providers. Provider costs would be analyzed and cost savings for shifting radio dispatch and weekend reservations out of current contracts would be estimated. It is proposed that this negotiation and cost analysis be conducted in late 2015. Concurrently, a RFP and scope of services for a single call and control center should be developed. The RFP would then be issued and bids received and analyzed in early 2016. The costs of a new call and control center contractor would be compared to savings from current contracts and the net additional cost of a single call and control center would be determined in the third quarter of 2016. This net cost would then be compared to the benefits and cost savings of a single call and control center (i.e. better trip time negotiations, trip commingling). If the analysis suggests net benefits, the contract for a call and control center contractor could be let by late 2016 with a call and control center in place by mid-2017.

Figure 12: Proposed Schedule for Coordination of ADA Services

<table>
<thead>
<tr>
<th>PROPOSED SCHEDULE</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase I: Coordination of KCATA and Independence Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coordination of trip reservation and scheduling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commingling of trips</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phase II: Coordination of KCATA and UGT Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New paratransit software for UGT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coordinate trip reservations and scheduling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commingling of trips</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phase III: Implementation of Regional Call and Control Center and Coordination of KCATA and JCT Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cost analysis of current service providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop RFP and scope for call and control center</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solicit proposals for call and control center</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compare costs and cost savings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Renegotiate service provider contracts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implement single call and control center</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Regional Eligibility Determination

Current Services

For most of the ADA paratransit and demand responsive services in the area, riders must first apply and be determined eligible. In some cases, services are open to the general public and a determination of eligibility is not required. Table 17 summarizes current eligibility requirements.

Three programs serve persons who meet the ADA regulatory eligibility criteria: KCATA, UGT, and the City of Independence. Fourteen programs serve seniors, with eight serving persons 60 years and older and six serving persons 65 years and older. Nine programs serve people with disabilities, with most using a broader definition of disability than the ADA criteria. Two programs use income thresholds to either define eligibility or qualify riders for reduced fare benefits. Four programs serve the general public. Three programs serve all people and one serves those in the public without access to transportation. Three programs serve only clients that are participating in specific agency programs.

Table 17: Current Eligibility Requirements

<table>
<thead>
<tr>
<th>Service</th>
<th>ADA</th>
<th>Seniors</th>
<th>Disability</th>
<th>Low-Income</th>
<th>Public</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>KCATA Share-a-Fare (ADA, non-ADA)</td>
<td>●</td>
<td>● (65+)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independence (IndeAccess, IndeAccess Plus)</td>
<td>●</td>
<td>● (60+)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UGT (Dial-a-Ride, Aging Transit)</td>
<td>●</td>
<td>● (60+)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Johnson County (Special Edition)</td>
<td>●</td>
<td>● (65+)</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Johnson County (SWIFT)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>●</td>
<td></td>
</tr>
<tr>
<td>OATS (Platte)</td>
<td>●</td>
<td>● (60+)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Clay County)</td>
<td>●</td>
<td>● (60+)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Jackson County)</td>
<td>●</td>
<td>● (60+)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Blue Springs)</td>
<td></td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OATS (Lee’s Summit)</td>
<td></td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Olathe Taxi Coupon</td>
<td>●</td>
<td>● (65+)</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shawnee CityRide</td>
<td>●</td>
<td>● (65+)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liberty Access Bus</td>
<td>●</td>
<td>● (60+)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excelsior Springs Omni Bus</td>
<td></td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Platte County Board</td>
<td></td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Platte County Senior Fund</td>
<td>●</td>
<td>● (60+)</td>
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<td></td>
<td></td>
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<tr>
<td>Clay County Senior Services</td>
<td>●</td>
<td>● (60+)</td>
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<td>●</td>
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<td></td>
</tr>
<tr>
<td>Jackson County EITAS</td>
<td></td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jewish Family Services</td>
<td>●</td>
<td>● (65+)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Johnson County Catch-A-Ride</td>
<td>●</td>
<td>● (60+)</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1 Seniors without access to transportation

2 Non-senior and non-disabled who do not have access to transportation
Meeting Summary

To begin the process of coordinating determinations of eligibility for current services, the forms and processes used by the core providers – KCATA, the City of Independence, UGT, and JCT – were reviewed. KCATA’s new Regional Mobility Manager, who manages the eligibility determination process, was also interviewed to get a better understanding of current processes and opportunities for future coordination.

Some coordination of eligibility determination currently exists. KCATA, which contracts with MTM for assistance with eligibility determinations, has an agreement with UGT to determine eligibility for UGT’s Dial-a-Ride (ADA) service. As part of managing JCT services, KCATA also determines eligibility for Special Edition service. The City of Independence also honors ADA eligibility determinations made by KCATA. OATS, which operates several different programs, is able to use information about eligibility made under one program for other programs where requirements are similar.

KCATA

KCATA uses a nine-page application form to determine eligibility for Share-a-Fare service. The form is designed to gather information about functional ability to use fixed-route transit – the criteria used for ADA paratransit eligibility. The first page of the application provides instructions on how to complete the process. The next six pages are completed by applicants and include general information (i.e. name, address, contact information), disabilities and travel abilities, current use of transit services, and mobility aids used. The last two pages must be completed by a licensed healthcare provider and include verification of the applicant’s disability and opinions about the applicant’s functional abilities in areas related to independent travel and transit use.

Completed applications are sent to KCATA for review. MTM reviews the information in the application. As needed, MTM staff contact applicants or healthcare professionals to get additional information or clarify information provided in the application form. Also, MTM can request applicants to appear in-person for an interview and/or functional assessment as needed. To date, MTM has not conducted in-person interviews and/or assessments and has been able to make eligibility determinations based on the application forms and follow-up telephone interviews.

MTM is reimbursed $30.84 for each determination made based on a review of the application and follow-up contact. An additional $61.69 is paid by KCATA if an in-person interview and/or assessment is needed.

Unified Government Transit

Individuals applying for UGT’s Dial-a-Ride service are directed to contact KCATA. KCATA and MTM make determinations of eligibility using the same application form and process developed for the Share-a-Fare service. KCATA provides UGT a daily update of all residents of Wyandotte County who have applied and been approved for Dial-a-Ride services. UGT reimburses KCATA for the costs of determinations for its riders.

Determinations of eligibility for the Demand Response service is less formal. Individuals interested in using the service simply call the UGT reservation number and can self-certify that they are 60 years of age or older. UGT does not require that they send documentation of age. UGT maintains the database of eligible riders for the Demand Response service.

Johnson County Transit

Special Edition service is provided to individuals 65 years of age or older and persons who have a documented disability. To apply, individuals complete a two-page application form that requests general information (i.e. name, address, contact information), mobility aids used, emergency contact information, and any special travel requirements. Individuals applying based on age provide a date of birth but are not required to submit proof of
Individuals applying based on disability must enclose a statement from a physician indicating the nature of the person’s disability. Completed application forms are mailed to KCATA, which makes determinations of Special Edition eligibility as part of the new management agreement with JCT. Information about eligible riders is then transmitted to Reveal Management Systems, the contractor that does trip reservations and scheduling for the Special Edition service.

Seniors and people with disabilities who meet low-income guidelines established by JCT are eligible for reduced fare on Special Edition service. To qualify for reduced fare, applicants complete an additional two-page application form after they have been determined eligible for the Special Edition service. The form requests the applicant’s Special Edition ID number, information about the size of their household, and monthly income of the household. Applicants are directed to mail completed forms to Johnson County Human Services (JCHS), which verifies the income information provided. JCHS then notifies KCATA of riders who qualify for reduced fare.

MTM, the KCATA eligibility contractor, processes Special Edition applications and is reimbursed $26.33 for each determination. JCT reimburses KCATA for this cost as part of the management agreement between the agencies.

City of Independence
IndeAccess service is provided to people who meet the ADA paratransit eligibility criteria. IndeAccess Plus is provided to people 60 years of age and older. A seven-page application form must be completed to apply for IndeAccess. The first four pages are completed by the applicant and request general information (i.e. name, address, date of birth, contact information) and information about functional abilities related to using fixed-route transit, mobility aids, Medicaid eligibility (which allows for free medical trips). The last three pages must be completed by the applicant’s physician and request information about the disability or health condition, mobility aids, and selected functional abilities related to independent travel.

The IndeAccess Plus application is one page and requests general information (i.e. name, address, emergency contact) and information about travel training and Medicaid eligibility. The applicant is asked to provide a date of birth but is not required to submit proof of age. Completed applications are mailed to First Transit, the contractor that operates the service. First Transit staff review applications and make eligibility determinations.

Proposed Coordination Plan
Following are suggestions for additional coordination of eligibility determinations throughout the region. Implementation issues are also presented. A suggested schedule for the proposed changes is also provided.

Phase I: Eligibility Determinations for City of Independence Services
As noted in the previous section of coordination of ADA paratransit services, KCATA and the City of Independence are discussing transitioning the management of the IndeAccess service delivery contract to KCATA. The arrangement would mirror the agreement for management of services in Johnson County. If the arrangement is formalized, it is recommended that determinations of eligibility for the IndeAccess service be completed by KCATA. This would eliminate the need for riders to apply to both the City of Independence and KCATA services in order to receive local as well as regional ADA service. It is recommended that IndeAccess eligibility determinations be centralized at KCATA at the same time that reservations and scheduling are centralized.

Phase I Implementation Considerations
During Phase I coordination efforts in centralizing eligibility determinations for IndeAccess service, the following items should be taken into consideration.
Separate or common ADA applications: The City of Independence could ask KCATA to continue to use the same application forms that are now used for IndeAccess. A second option could include an agreement between the City of Independence and KCATA to use the same ADA application used for Share-a-Fare and Dial-a-Ride eligibility. A third option would be for KCATA and the City of Independence to develop a new application form that combines the best features of the Share-a-Fare and IndeAccess applications. A review of the two ADA applications indicates that each has strengths; therefore, it is recommended that staff who are involved in making eligibility determinations meet to discuss the two applications and identify the most useful questions from each. A new application that combines the best features of each should then be developed.

Separate or integrated IndeAccess application: As noted above, the City of Independence currently uses a separate one-page application for IndeAccess Plus eligibility. KCATA could continue to use both or an integrated application could be developed. Having an integrated application might eliminate confusion that some seniors with disabilities have about which application they should complete. An integrated application should start with instructions that explain that people can apply for either service, or both. If people want to apply just based on age, they would be asked to complete the first page. If applying for ADA paratransit eligibility, they would be asked to complete the rest of the application as well. Since some seniors may also qualify for ADA paratransit service, the cover instructions should explain the benefits of having both types of eligibility (i.e. no capacity constraints) and encourage people to apply for ADA paratransit eligibility if they think they qualify. A sample of such an application developed by the Cape Ann Transportation Authority (CATA) in Gloucester, Massachusetts is provided as Appendix C. Note that the ADA eligibility portion of the CATA application is not as thorough and detailed as the current KCATA or the City of Independence applications. The application is shared only to illustrate the approach of a combined application for seniors as well as those seeking ADA eligibility.

Requiring documentation of age: As noted above, the City of Independence accepts self-certification of age. It is suggested that documentation of age be requested as KCATA, the City of Independence, and other agencies move toward an integrated eligibility process. In addition to indicating date of birth, applicants should be asked to attach a copy of readily available proof of age (i.e. copy of driver’s license, other government issued ID).

Phase II: Develop a Common Application Process for KCATA, City of Independence, UGT, and JCT Services

Even if a common and combined application is developed and used for Share-a-Fare, Dial-a-Ride, IndeAccess, and IndeAccess Plus services, multiple processes and forms will still be used for these core services. Seniors will still apply for UGT’s Demand Response service by calling UGT’s reservations number and self-declaring age. The JCT applications (for Special Edition and for reduced fare eligibility) will still be different and separate. As the reservations, scheduling, and management of these services becomes more centralized, it is recommended that a common application and process be developed for all of these core services. Implementation of a common application process could be done to coincide with the implementation of the new RideKC brand for region-wide services and/or with the implementation of Phase III in the Coordination of Services section. New service names might also be considered as part of this new branding, such as a common name for all ADA paratransit services (i.e. AccessRideKC), as well as for non-ADA service for seniors (i.e. SeniorRideKC). A single, common application packet could be developed that describes the services. A single common application could then be developed. The combined KCATA-Independence application suggested above could be a good starting point.
A common process should also result in similar documentation of eligibility. In addition to a determination letter, it is recommended that a photo ID be issued. The photo ID should be designed to use the regional brand and then to indicate all types of eligibility. For example, a resident of Wyandotte County might receive an ID that shows RideKC at the top and then AccessRideKC and SeniorRideKC under “Types of Eligibility.” Similarly, a resident of Johnson County might receive an ID that indicates three types of eligibility: AccessRideKC (since ADA eligibility is not limited by place of residence), SeniorRideKC, as well as Reduced Fare.

Phase II Implementation Considerations
During Phase II coordination efforts in developing a common application process, the following items should be taken into consideration.

- **Documentation of age**: It is recommended that documentation of age be part of any common eligibility process. As the scope of the services expands and the number of services available to eligible riders increases, it seems appropriate to require documentation of age rather than allowing unverified self-declaration of age.

- **Unique Special Edition eligibility criteria**: There is some commonality between the eligibility criteria for KCATA, the City of Independence, and UGT paratransit and demand response services. ADA standards are used to determine eligibility for Share-a-Fare, Dial-a-Ride, and IndeAccess services. Service is provided to seniors (60+) in both Wyandotte County and Independence. Developing a common application that captures information for these criteria will be relatively easy.

Eligibility for Special Edition services is different. While age is a qualifying criteria, a different age (65+) is used. This different age criteria could be accommodated administratively – a matter of considering two different age levels when reviewing applications; however, it complicates the description of services and eligibility for each. It is therefore recommended that a common age criteria (65+) be considered.

Criteria for eligibility based on disability is also different from the other services. JCT has a broader definition of disability that only requires a formal diagnosis or documentation of the condition; ability to use fixed-route transit is not considered. Building two different criteria for disability into the same application form and process would be difficult. Therefore, it is recommended that JCT consider a definition of disability that is consistent with ADA paratransit eligibility criteria. Residents whose disabilities do not limit their use of fixed-route transit options should reasonably be expected to use these more efficient forms of public transportation. A benefit of adopting this definition would be that any resident of Johnson County who qualified based on ADA disability criteria would then be eligible to use the ADA service throughout the region since ADA paratransit eligibility is not tied to place of residence. Currently, individuals who qualify for Special Edition based on disability must apply separately to KCATA or the City of Independence for ADA paratransit eligibility if they travel in those areas.

Special Edition also is the only service that provides reduced fares for low-income riders with a separate application for reduced fare eligibility. Reviewing and verifying income is also specialized and is currently done by another County department. It is therefore recommended that this additional element remain separate from any common application form that is developed. Public information will need to explain that this benefit is only available to Johnson County residents and a separate application form should be included in the eligibility packet.

- **Clearly explaining service differences**: A common application packet will need to clearly communicate the types of services provided and where each type of service is available. Services based on age will be
provided in Independence, Wyandotte County, and Johnson County, but not in the rest of the KCATA service area. Instructions will need to clearly explain that seniors who reside in the KCATA service area will need to complete the entire application, not stop at the part that focuses on age. Similarly, unless the geographic limits of reduced fares are explained, people who live outside of Johnson County may be confused by the inclusion of a supplemental low-income reduced fare application form.

Phase III: Simplify Region-wide Eligibility (Reciprocity)
If a common form of eligibility documentation is developed for the core services, other agencies throughout the region could then begin accepting this documentation of eligibility. For riders who have RideKC eligibility and meet the criteria for other services in the area, they could simply provide their RideKC ID number rather than completing a separate application form.

This form of reciprocity would be most useful for seniors since many other services in the area use age as an eligibility criteria. It would also apply to any services that use disability as a criteria since any person who qualifies for AccessRideKC will have provided documentation of disability, and any person who meets the stricter criteria for ADA paratransit eligibility would also meet any more general criteria for disability.

Phase III Implementation Considerations
During Phase III coordination efforts in implementing region-wide reciprocity, the following items should be taken into consideration.

► Sharing rider information: Since the eligibility process and rider intake is used not only to verify eligibility but to obtain information important for service delivery, an appropriate process for sharing rider information will need to be developed. The following process is proposed. The common application packet used for the core services could provide information about transportation services throughout the region. Eligibility reciprocity could be explained. A “release” related to regional travel could then be included in the application form. The release could ask riders if they want to allow KCATA to provide the information in the application form to other transportation providers in the region. The release could be restricted to when the rider contacts another provider and requests service. If riders contact other service providers in the region and provide their RideKC ID number for eligibility, those providers could request information from KCATA. KCATA could send information on contact information, type of disability, mobility aids used, emergency contacts, and any other data relevant to service delivery (i.e. “needs call out” or “do not leave unattended”).

► Reverse reciprocity: While the core service providers could also honor some of the determinations of eligibility made by other regional agencies, the benefit of doing this is not clear. None of the other regional agencies use ADA paratransit eligibility criteria. Being determined eligible by another agency based on a general definition of disability would not necessarily qualify a person for ADA paratransit service. People with disabilities seeking ADA paratransit eligibility would still need to apply to KCATA using the common application developed for the core providers. Similarly, while riders who qualify based on age might indicate eligibility on this basis for other regional services, senior transportation in the core area also has a residency requirement so this reciprocity would not be useful unless people relocated. For these reasons, procedures for reverse reciprocity are not recommended.

► Differences in age criteria: Unless a common age criteria can be agreed upon by all agencies in the region, reciprocity based on age would pose additional complications. If riders requested service from another regional provider and indicated SeniorRideKC eligibility, that provider might need to explain the differences in age criteria if they use 60+ rather than 65+. Riders might then self-certify an age that
qualifies them until the provider obtained the verified information from KCATA. While an extra consideration, this difference in age criteria should not add a significant hurdle to regional eligibility reciprocity.

Phase IV: Establish a Transportation Resource Center
It is also recommended that a Transportation Resource Center (TRC) be created to combine eligibility determinations with other coordination efforts in the region. Specifically, the TRC could combine:
- Contractor eligibility determination staff
- Travel training staff
- Mobility management staff
- Fixed-route customer service staff
- Informational materials on all transportation options for seniors and people with disabilities in the region
- Safety equipment or other travel equipment that can be provided to riders
- Mock-ups of bus and rail lifts, ramps, and wheelchair securement locations to familiarize riders with how to use fixed-route services

Ideally, the TRC would be located within or in close proximity to a bus and rail transit center so that people who do not drive can access it. It should also have convenient pick-up and drop-off areas for paratransit vehicles so that people can use the ADA paratransit and other demand responsive services to get to it.

The TRC would bring together all non-operating KCATA staff involved in general public customer service as well as programs to serve seniors and people with disabilities. A unique phone number for the TRC could be implemented and all public information for paratransit eligibility, travel training, and mobility management could include the number. The TRC could also be a place where people can come for personal assistance with public transportation. Staff could meet with individuals, determine what transportation options they might qualify for, and even assist them in contacting services or completing application materials for services. It would also be a central location for transit pass sales or other fare media.

The TRC might also be developed as part of the transportation Voucher Program being considered by KCATA and MARC. The TRC could be the central location for staff administering the program. There could then be personal kiosks and/or outlying flagship kiosks managed by staff at the TRC. Long-term, the TRC might also house the transportation portion of the region’s one-call/one-click center (discussed in the next section). It might also be the location where in-person interviews and functional assessments are conducted as part of determining ADA paratransit eligibility.

A number of transit agencies across the country have opened TRCs, also referred to as Mobility Centers. This includes King County Metro in Seattle, Valley Metro in Phoenix, and the Southeastern Pennsylvania Transportation Authority (SEPTA) in Philadelphia. Figure 13 shows service brochures and other information at King County Metro’s Transportation Resource Center. Figure 14 displays some of the safety and travel equipment that is provided free of charge to King County Metro riders at the Transportation Resource Center. Figure 15 illustrates mock-ups of accessible buses and rail vehicles at SEPTA’s Mobility Center.
Figure 13: Information Display, King County Metro Transportation Resource Center

Figure 14: Travel Equipment, King County Metro Transportation Resource Center
Phase IV Implementation Considerations
During Phase IV coordination efforts to implement a TRC, the following items should be taken into consideration.

► **Initial build-out costs and funding:** Simple centers have been created by transit agencies for less than $100,000. More elaborate centers with extensive vehicle mock-ups can cost several hundred thousand dollars. Costs can be managed by utilizing existing staff, such as maintenance staff, to build mock-ups. It is recommended that KCATA apply for Section 5310 funding to establish the TRC. All of the functions that will be housed at the TRC are high priorities for this program. If selected for funding, 80 percent of the costs would be covered and only 20 percent would need to be provided by KCATA.

► **Ongoing operating costs:** If located in newly-acquired rental space, the TRC would have significant ongoing operating costs. If located in an existing public facility, these costs might be substantially reduced. Funding used to support overhead and facility cost for the various programs that would be at the TRC might be used to cover operating expenses. This would include current overhead and office costs for the KCATA customer service staff, eligibility and travel training staff, and mobility management staff.

Other ADA Paratransit Eligibility Considerations
► **In-person process:** Currently, KCATA uses a paper application form to determine ADA paratransit eligibility. MTM’s contract includes rates for in-person interviews and functional assessments, but these options have not been used to date. Most large cities use processes that include in-person interviews and many have added in-person functional assessments as needed. Processes that include interviews and assessments as needed have been found to be more accurate in making thorough determinations of ADA paratransit eligibility.

In-person processes also provide an opportunity to discuss service policies and specific rider needs, such as ensuring that mobility aids can be accommodated and arranging for appropriate rider assistance. The
proposed TRC could be designed to support in-person interviews and functional assessments. The vehicle mock-ups at the TRC could serve as props needed to conduct physical functional assessments.

- Use the eligibility process to support mobility management: Another possible opportunity is to broaden the eligibility determination process to support mobility management. When individuals apply for eligibility for a specific paratransit or demand responsive service, information could be provided about all service options. This might include other services that may better meet their needs or support services like travel training that might help facilitate the use of public transit.

If a paper application process is used, information about all appropriate options could be provided when individuals call to inquire about services. Brochures and other information about all appropriate service options could also be included in application packets. If an in-person eligibility process is implemented and housed at the proposed TRC, information about transportation options throughout the region could be made available. Travel training services and staff would also be co-located with eligibility staff to streamline access to this service.

Proposed Schedule
Figure 16 provides a proposed schedule for implementing coordinated and expanded eligibility determination efforts. Coordination of eligibility with the City of Independence would take place first and would be part of discussions to centralize reservations and scheduling, which is anticipated to happen mid-2015. A revised application form that combines senior and ADA paratransit eligibility would be developed, and referrals of applicants for IndeAccess to KCATA could be implemented in the second half of 2015.

Development of a coordinated eligibility approach for all core providers – KCATA, the City of Independence, UGT, and JCT – would occur in 2016. A combined application and public information would be developed in the first quarter of 2016. Photo ID equipment would also be purchased in early 2016. Development of a brand for regional paratransit would take place as part of the larger, regional branding effort throughout 2016. New, combined photo IDs for regional paratransit would then be implemented in early 2017, at the same time as the creation of a single call and control center.

Once a regional photo ID is implemented with centralized eligibility records for all core services, broader coordination with transportation services throughout the region could take place. Releases and other administrative work to make the sharing of rider information feasible would be developed in early 2017, and eligibility reciprocity could be implemented by mid-2017.

Creation of the TRC is proposed for 2017. An application for Section 5310 funding to build the center would be drafted in 2016. Assuming funding would be approved in late 2016, site selection and build-out could take place in the last part of 2016 and early 2017. KCATA and contractor staff involved with eligibility determination, travel training, mobility management, and customer service would be relocated to the TRC in mid-2017. Once the TRC is created, in-person interviews and functional assessments for ADA paratransit eligibility could be implemented. The mock-ups at the TRC could be used to support physical functional assessments.

Note that the last item in the schedule – the integration of ADA eligibility determinations with mobility management activities – could be implemented in the near-term. When applicants apply for ADA paratransit eligibility, all public transit options and information about other services throughout the region could be provided. This could begin by mid-2015 and could continue throughout the period when other eligibility coordination efforts are implemented.
Expanded Information and Referral Services

One-Call/One-Click Service and Improved Public Information

The one-call/one-click service and improved public information tied for the third highest rated priority by the Mobility Advisory Committee. Because the two concepts are very interrelated, they are presented as an integrated Proposed Coordination Plan.

Current Services

Link for Care

Link for Care, maintained and managed by the Landon Center on Aging at the University of Kansas (KU) Medical Center, has served as the region’s one-click center since April 2014. Link for Care is a free, searchable, online database of services in the Kansas City region that consistently receives about 550 visitors or more each month. Services on the site are segmented into twelve categories, one of which is transportation services. More than eighty public, private, and non-profit transportation service providers are listed on the site.

Care Connection

Care Connection, maintained and managed by Shepherd’s Center Central with support from the Truman Heartland Community Foundation, has served as the region’s one-call center since April 2013. Care Connection formerly hosted a website similar to Link for Care but has recently focused on the one-call service due to expected coordination between the two entities. As a result, in January 2015, the Care Connection website merged data with Link for Care and began forwarding users to the Link for Care website. A staff person continues to be available at Shepherd’s Center Central by phone Monday to Friday from 8:30 AM to 5:00 PM to provide information about human and transportation services. The hotline helps older adults and their caregivers cope with difficult matters that can complicate life and provides a smoother transition to relieve the challenges of aging that involve illness, disability, and poverty.
**KCATA Call Center**

KCATA provides assistance through its fixed-route customer service and trip planning call center. KCATA has also recently expanded its customer service role to include greater mobility management with the hiring of a Regional Mobility Manager. The Regional Mobility Manager is responsible for the planning, coordination, and direction of special services, the travel training program, ADA compliance, and working with external organizations to improve the overall transportation network within the KCATA service area.

**Meeting Summary**

Before drafting concepts for coordination and improvement, TranSystems staff met with stakeholders involved in the one-call/one-click services in the region: Link for Care, Care Connection, and KCATA. Meetings with each entity included discussions about existing operations, challenges, and future opportunities.

**Link for Care**

The project team met with the following staff members at KU Medical Center that are responsible for the development, maintenance, and promotion of the Link for Care site: Jane Johns, Associate Director for Operations; Nicole Palmer, Senior Coordinator; Tanya Bishop, Project Manager; and Larry Hicks, Programmer/Web Developer.

**Service Function**

Project Manager Tanya Bishop updates the information on the site and then contacts service providers to update additional details as necessary. Each provider is updated one-by-one at least once per year. Any updates must be reviewed and approved by Tanya Bishop before publication. The Link for Care site also lists the date of the most recent update to provide users with reliable information. Staff does not typically receive phone calls about information and referral, but will occasionally receive emails via the contact page. Individuals are typically referred to Darla Heath at Shepherd’s Center Central for more information. Staff also indicated that KCATA will use Link for Care to refer callers if trips are requested outside of the KCATA service area. Technology functions well under the current structure, but the site could be improved with additional funding. The site has a feature that allows users to create an account to save searches and preferred providers.

**Marketing and Outreach**

Staff does not currently have a sophisticated marketing outreach program. When Link for Care was launched last year, MARC created marketing materials and produced a commercial to promote the site. Senior Coordinator Nicole Palmer constantly keeps abreast of services that are not promoted on the site and often mentions Link for Care at monthly meetings, weekly brown bag lunches, and similar events. Nicole Palmer is hoping to work with Jewish Family Services in the upcoming months to strengthen marketing of the Link for Care site.

**Funding**

Link for Care relies on Section 5310 funds that are distributed through MARC. Funds have also been utilized from the Health Resources and Service Administration (HERSA) and the Veterans Transportation and Community Living Initiative (VCTLI). Associate Director Jane Johns has communicated with the University of Kansas Endowment Fund to find possible donors to assist with funding. However, she indicated that donors are more willing to provide “seed” funds to initiate a project rather than maintenance funds. Service providers are not charged for listings on Link for Care, and staff believes it is critical to maintain the free posting in order to provide the most comprehensive database possible.
Challenges
Staff is primarily focused on continuing education efforts at the Landon Center on Aging. Of the twelve service categories outlined in Link for Care, staff feels the least qualified in regards to the transportation information. At times, staff noted that they are unsure the best manner in which to proceed with transportation aspects of the site but are committed to their primary goal of remaining a customer-driven resource that helps individuals remain independent. Details within the site are also extensive. Staff needs to balance the amount of work needed to maintain the site with the information that is most relevant and helpful to users. Other challenges including making a distinction between services that are only for specific “clients” and transportation providers that serve the “public.”

Future Opportunities
Progressing into the future, staff would like to see Link for Care be a central resource and point-of-contact that, because of its flexibility, can adapt to reflect ongoing coordination efforts. Short-term and long-term future scenarios were discussed:

► Without additional funding, short-term efforts include maintaining accurate information on the site. If additional funding is provided, efforts could then progress to coordination with Shepherd’s Center Central and KCATA to improve information and referral services. Staff is also open to the possibility of providing information about eligibility and travel training, but is cautious about taking a more direct role unless significant funding is available.

► Long-term efforts include migrating the one-call/one-click function to KCATA to advance increased regional coordination.

Care Connection
The project team met with the following staff members at Shepherd’s Center Central that are responsible for the development, maintenance, and promotion of the Care Connection hotline: Pam Seymour, Executive Director and Darla Heath, Program Director.

Service Function
Program Director Darla Heath staffs the Care Connection hotline during business hours Monday to Friday. Most of the calls are from family caregivers who need immediate assistance to help a family member, but occasionally she will speak to older adults themselves. Darla indicated that older adults are more likely to use the phone number than try to navigate online resources. Caregivers tend to be more comfortable with online materials and she will communicate with them via phone and email. Darla also follows-up with a phone call to the individual the following week. Depending on the caller’s needs, the interaction can involve a back-and-forth conversation until an individual’s needs are met. Rather than transfer callers directly to a service provider, she prefers to provide information and options to allow the caller to make an informed decision. At times, Darla will call a service provider to confirm information and then follow-up with the caller to relay the information.

The Care Connection hotline currently receives approximately three to four calls per week. The calls are not always specifically transportation related but include a broad range of human service inquiries. The hotline number goes directly to Darla Heath’s desk phone, not through an automated telephone system. This particular aspect re-emphasizes the personal, customer service aspect of Care Connection and their passionate staff. If the caller requests a specific topic that is more suited for a different staff member, Darla will transfer the caller. If she is unavailable, callers can leave a voicemail message and typically receive a return call the same day. Staff is willing to help in-person if an individual comes to the office, but this rarely occurs.
Marketing and Outreach
Shepherd’s Center Central staff promotes Care Connection through announcements at their events, support group meetings, and health fairs. The hotline and Link for Care site are also listed on their new business cards and brochures. Staff also works closely with discharge planners at medical centers and hospitals.

Funding
Care Connection is funded through the Truman Heartland Community Foundation. In addition to serving as Program Director for Care Connection, Darla Health is also responsible for the Meals on Wheels Program. She indicated that about 60 percent of her time is dedicated to Meals on Wheels coordination while the remaining 40 percent of her activities are related to Care Connection. In addition to the hotline, the Care Connection program also provides caregiver education and employee assistance programs.

Challenges
Darla Heath indicated that she attempts to help callers determine eligibility for transportation services, but most callers have immediate needs. Therefore, even when she is able to inform the caller about the eligibility process for transportation services, there is a waiting period to process the application.

Future Opportunities
Progressing into the future, Care Connection staff would like to support a partnership with Link for Care as a one-call/one-click service. Staff views the partnership between the two entities as an important step to providing one central resource for human service and transportation information. As other regional coordination initiatives progress, Link for Care and the Care Connection hotline can be a customer-friendly guide and resource to help navigate the system and its changes. Short-term and long-term future scenarios were discussed:

► Without additional funding, short-term efforts include maintaining the Care Connection program as is. If additional funding is provided, efforts could then progress to include coordination with Link for Care and KCATA to improve information and referral services. Staff is also interested in the eligibility and travel training aspects, but is cautious about taking a more direct role unless formal guidance is provided. For example, Darla Heath could be provided with an outline from KCATA to assist with pre-screening eligibility to better direct callers to services. Nonetheless, staff sees the one-call/one-click service functioning as a three-prong partnership between Care Connection, Link for Care, and KCATA.

► Long-term efforts include migrating the one-call/one-click function to KCATA to advance increased regional coordination. Staff expressed concern about maintaining the information and referral aspect for the other human services if the transportation component is removed from the scenario (i.e. potential funding issues, decentralization of human service resources). As transportation-related grants are a major source of funding for Link for Care, it will be important to have additional funding sources to maintain information about the other human services on the site.

Proposed Coordination Plan
A Proposed Coordination Plan was developed based on discussions with Link for Care, Care Connection, and KCATA. In the short-term, Phase I, the Proposed Coordination Plan supports the pending coordination between Link for Care and Care Connection to become an integrated one-call/one-click center that provides information and referral services. As other mobility management improvements move forward through KCATA, such as travel training and regional eligibility, these concepts can be incorporated into the Link for Care site. In the long-term, Phase II, the one-call/one-click service may migrate to KCATA as coordination progresses. Then, the one-call/one-click service can be integrated into a Transportation Resource Center with more responsibility in addition to information and referral capabilities. Phase III, which occurs in concurrence with Phase I and II, employs marketing and outreach techniques to increase public information.
Phase I: Upgrade Link for Care

KU Medical Center has an application for Section 5310 funding to improve Link for Care for one-call/one-click mobility management. Section 5310 funds are awarded through a process with MARC. The Mobility Advisory Committee prioritized the latest round of funding applications in December 2014 using a criteria-based evaluation exercise. The prioritized projects are expected to be finalized in June 2015. The funding request for Link for Care has a high priority score, placing the request in the top five requests of over twenty-five applications. As full funding of the request is likely to be awarded, Phase I of the Proposed Coordination Plan assumes approval of the requested Section 5310 funding.

Once awarded, funds would support ongoing maintenance of the site and add new features that would move Link for Care closer to fulfilling the goal of a one-call/one-click mobility management resource that provides information and referral services. Maintenance of the site includes keeping data on the site updated and accurate, fixing technical issues, installing software updates to keep the platform stable, ongoing screening for new service providers, and continued marketing efforts to promote use of the site.

Before adding additional features to the site, Link for Care staff should evaluate the Transportation Services page. Staff managing the site is primarily focused on continuing education for older adults. While they are committed to providing a customer-driven resource, staff has more knowledge and training related to the other human services components of the site – transportation is not their primary area of expertise. Before implementing significant changes to the site and database, staff should develop a business model for Link for Care and critically evaluate the transportation categories and information. For example, the current transportation categories on the site (bus service, car service - volunteer drivers, car service, non-emergency medical transportation, public transportation, taxi service, other transportation, van service) could be better classified and defined (i.e. fixed-route transit, ADA paratransit, non-ADA paratransit, taxi service, etc.). The site could also be improved by making a distinction between services that are only for specific clients and those that serve the public (subject to eligibility requirements). By consulting with transportation specialists and stakeholders, the database could provide more effective and accurate search results to meet the needs of users.

Currently, the Link for Care site also directs users immediately to the search engine after selecting Transportation on the home page. The Transportation Services page could be revised to direct users to a Transportation sub-home page first. This sub-home page could provide a link to the search engine as well as other links about trip planning, travel training, and eligibility as those coordination elements progress.

With the additional Section 5310 funds, four new features would be integrated into the Link for Care site:

- **Fixed-route Trip Planning:** Fixed-route trip planning would be provided using Google Transit Trip Planner. Since 2011, Google Transit has been integrated into Google Maps to provide real-time transit updates for selected locations. The General Transit Feed Specification (GTFS) defines a common format for public transportation schedules and associated geographic information. As a result, GTFS feeds allow public transit agencies to publish their transit data and developers to write applications that consume the data in an interoperable manner. Data for fixed-route trips provided by KCATA, UGT, and JCT is compatible with and currently integrated into Google Transit. While staff at Link for Care noted that data for fixed-route trips provided by IndeBus did not appear to be compatible with Google Transit, further investigation reveals that IndeBus trips are now integrated into Google Transit and color-coded by route. Nonetheless, all fixed-route transit providers should ensure that a data feed is prepared according to GTFS standards and hosted on a web server in order to integrate into Google Transit. Link for Care can then provide a Google Transit link that serves fixed-route trip planning for the major transit providers in the Kansas City region.
Paratransit Trip Planning: Because paratransit services represent a complex service, it is unlikely that Google Transit will incorporate paratransit trip planning into the platform in the near future. Paratransit trip planning would be based on the user-defined origin and destination address. Information in the Link for Care database would need to be revised to reflect accurate origin and destination service areas, eligibility requirements, and trip purposes. Other potential options to incorporate into paratransit trip planning include the ability to calculate fare and integration with fixed-route trip planning to present trips on fixed-route systems as viable alternatives.

One-Call Service: Link for Care would collaborate with Care Connection and enter into a formal agreement to provide information about the one-call support hotline on the Link for Care site. Both entities will remain separate organizations and remain at their respective locations at KU Medical Center and Shepherd’s Center Central. Once the hotline is published on the site, call traffic will multiply beyond the current three to four calls per week that Darla Heath currently receives. With the additional Section 5310 funding, a new part-time staff position should be created to assist Darla Heath with responding to callers. As call traffic increases, the position could transition to a full-time position. Call volume should be monitored to continue offering the quick, personal customer service Care Connection is accustomed to providing. Personnel staffing the hotline should also be trained to ensure comfort with navigating the Link for Care site and utilizing the fixed-route and paratransit trip planning platforms to assist callers. A Contact Us page on the current Link for Care site allows users to seek additional information and referral guidance via email. Link for Care and Care Connection should ensure that both entities have access to emails sent through this interface and assign corresponding responsibilities to specific personnel. As a result, Care Connection hotline staff would have access to information and referral requests via both phone and email.

KCATA Call Center: Similar to advertising the Care Connection hotline on the site, Link for Care should also provide contact information for the KCATA call center. KCATA call center staff uses Link for Care as a resource when callers request trips outside of the KCATA service area. A greater, defined partnership between Link for Care and KCATA regarding the one-call/one-click aspects of mobility management provide a first and logical step towards future coordination.

The update to the Link for Care site and additional features discussed above would be implemented with the Section 5310 funding. As other regional coordination initiatives progress, Link for Care can be a central resource that, because of its flexibility, adapts to reflect ongoing coordination efforts.

Both Link for Care and Care Connection staff expressed interest in integrating travel training and regional eligibility. For example, KCATA contracts with MTM to provide travel training. Travel training information from KCATA, as well as other organizations that provide similar training, should be published on the Link for Care site. In addition, KCATA contracted with MTM to provide eligibility assessments for ADA and non-ADA paratransit service on KCATA’s Share-a-Fare, UGT’s Dial-a-Ride, and JCT’s Special Edition programs. The City of Independence has also expressed interest in including the IndeAccess program into the eligibility coordination effort. As this initiative to improve and standardize eligibility processes advances, Link for Care should provide the information to direct and inform users. Staff operating the hotline should also receive training and a formal outline to help pre-screen eligibility for transportation services and direct callers to the formal eligibility process.

As a virtual, ever-changing database, Link for Care would function as a three-prong partnership between KU Medical Center, Shepherd’s Center Central, and KCATA to provide the most updated and connected information as conditions change. Phase I of the Proposed Coordination Plan enables community resources to be used more effectively and reduces duplication of efforts.
Phase I Implementation Considerations
During Phase I coordination efforts, the following items should be taken into consideration.

► Service agreements should be established between KU Medical Center, Shepherd’s Center Central, and KCATA to formalize the partnerships and define responsibilities. Cost allocation between the different entities should also be determined, particularly as a portion of the Section 5310 funds awarded to KU Medical Center will fund the hotline staff that will remain in their current location at Shepherd’s Center Central.

► Staff at KU Medical Center and Shepherd’s Center Central, while passionate about providing information to assist others, are not trained transportation professionals. Personnel staffing the hotline and responding to inquiries via email should receive training to ensure comfort with using the Link for Care features. Additional information and outlines should be provided to hotline staff to help advise callers about technical aspects such as eligibility and travel training. The advice of specialists in the transportation field should be sought to ensure that the Link for Care database and search engine are designed effectively. Because details within the site can be extensive, consultation with transportation specialists can help balance the amount of work needed to maintain the site with the information that is most relevant and helpful to users.

► In order to implement paratransit trip planning, the Link for Care database would need to reflect accurate origin and designation service areas, eligibility requirements, and trip purposes. Incorporating this feature into Link for Care may require the assistance of a technical consultant and GIS-based mapping platforms. KCATA or MARC may be potential partners in accomplishing this task.

► Call volume to the Care Connection hotline should be monitored after publishing the number on the Link for Care site. As awareness of the hotline increases, Shepherd’s Center Central may need to adjust personnel to meet the call volume demand. Shepherd’s Center Central staff was interested in the possibility of offering a live chat feature on the Link for Care site that connected to their hotline personnel, but did express concern about staff availability to respond to online chats. Also, seniors would likely be more comfortable using the hotline phone number to request information rather than an online chat. As a result, providing the hotline phone number along with the current Contact Us email application should suffice as providing varying means of contacting support staff in the near-term.

► Individuals associated with The Whole Person, Inc. (a Center for Independent Living that assists people with disabilities) has indicated that the Link for Care site seems to work well with screen reader capabilities. However, optimizing this function could be considered into the future.

Phase II: Establish a Transportation Resource Center
Even as Link for Care will grow to incorporate additional features and information, users will still need to directly contact other providers for services. For example, while the site will provide details about travel training options, individuals will need to contact the respective agencies to initiate the process. As a result, in Phase I of the Proposed Coordination Plan, Link for Care remains an information and referral resource. However, because Link for Care and Care Connection staff are not transportation specialists, they expressed that KCATA is likely positioned to take a greater role with the one-call/one-click service in the future. Therefore, to expand Link for Care beyond the information and referral stage, Phase II for coordination involves migrating the one-call/one-click service function to KCATA.
Attempting to incorporate additional components beyond Phase I into Link for Care would require major funding and both Link for Care and Care Connection staff are not prepared nor qualified to serve this role. However, establishing this foundation of information, referral, and assistance creates an opportunity to develop management capacity to deliver quality services. KCATA is positioned to align several coordination initiatives, including the improved public information through the one-call/one-click service, into a central Transportation Resource Center. A Transportation Resource Center serves as a single point of entry into the long-term support and service systems for older adults and individuals with disabilities. It can address many of the frustrations customers experience when trying to find information and support. Most Transportation Resource Centers offer a strong focus on assessment, eligibility determination, and transportation services counseling; therefore, most centers incorporate the one-call/one-click component. The proposed, Transportation Resource Center, as introduced in the Regional Eligibility Determination section, could include the following elements:

- Travel training
- Regional eligibility determination via application, phone interviews, or in-person assessments
- Information and referral services through use of the Link for Care database (including trip planning, service assistance, and support from mobility management ombudspersons)

A primary tension that is often encountered with merging existing resources into a Transportation Resource Center is whether the resources will be co-located with a truly centralized service or if they will use technology to operate out of different locations. Because it is critical to maintain the human services information also contained within the Link for Care site, Phase II of the Proposed Coordination Plan suggests the second option of employing technology to operate out of different locations. As a result, the one-call/one-click database would be maintained at KU Medical Center while the physical Transportation Resource Center is located in a central, easily accessible location (i.e. near a transit hub). After an agreement between Link for Care and KCATA, staff at the Transportation Resource Center would then receive training and access to utilize the database. As described in Table 18 of coordination Phase II provides the following improvements compared to the Phase I one-call/one-click service concept.

Table 18: One-Call/One-Click Service Phases

<table>
<thead>
<tr>
<th>Topic</th>
<th>Phase I Concept</th>
<th>Phase II Concept</th>
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<tbody>
<tr>
<td>Information and Referral</td>
<td>Information about multiple providers is available on the Link for Care site and</td>
<td>Information and referral services can be incorporated into the Transportation</td>
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<td></td>
<td>hotline staff can assist with referrals via phone or email.</td>
<td>Resource Center for one phone number to lead to information support as well as</td>
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<td>eligibility and travel training.</td>
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<td>Eligibility</td>
<td>Eligibility information is provided on the Link for Care site, but customers</td>
<td>The Transportation Resource Center processes applications across multiple</td>
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<td></td>
<td>must still contact each provider separately and participate in multiple eligibility</td>
<td>providers through a streamlined process. Eligibility determination can be</td>
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<td></td>
<td>processes.</td>
<td>accomplished via application, phone interviews, or in-person assessments.</td>
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<td>Travel Training and Trip</td>
<td>Travel training and trip planning information is provided on the Link for Care</td>
<td>The Transportation Resource Center provides one phone number that can also lead</td>
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<tr>
<td>Planning</td>
<td>site, but customers must still contact each travel training provider separately.</td>
<td>to staff to assist with travel training and trip planning.</td>
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<tr>
<td>Reservations</td>
<td>Contact information for various service providers is available on the Link for</td>
<td>The Transportation Resource Center can help callers make the connection to trip</td>
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<tr>
<td></td>
<td>Care site, but customers contact each provider directly to make reservations.</td>
<td>reservations by providing referral information or transferring the caller directly</td>
</tr>
<tr>
<td>Scheduling and Dispatch</td>
<td>Customers are contacted directly by the respective service provider for the trip.</td>
<td>to a service provider.</td>
</tr>
</tbody>
</table>
<pre><code>                       |                                                                                 | Service providers can refer callers to the Transportation Resource Center to     |
                       |                                                                                 | pursue other transportation options as appropriate.                             |
</code></pre>
Phase II Implementation Considerations

During Phase II coordination efforts, the following items should be taken into consideration.

- Link for Care and Care Connection staff expressed concern about the de-centralization of human services information if the transportation service component fully migrated to KCATA. Potential funding issues could arise for the remaining human service categories as well. As a result, Phase II of the Proposed Coordination Plan suggests that KU Medical Center, in partnership with KCATA, continue to play a role in maintaining the Link for Care database.

- The one-call/one-click service is closely intertwined with other transportation coordination elements. The structure of the Transportation Resource Center should be flexible in order to incorporate new components into the one-call/one-click service as they progress. Therefore, the one-call/one-click service can continue to be enhanced over the years as regional coordination efforts advance.

Phase III: Improved Public Information (Marketing and Outreach)

A primary purpose of one-call/one-click services is to simplify access to transportation services for the customer. Therefore, marketing and outreach is an important activity that is included in Phase III of the Proposed Coordination Plan. Phase III is intended to occur in concurrence with Phase I and Phase II. Phase III marketing and outreach efforts are facilitated through three concepts: communication through a unified forum, regional branding, and increased promotion of Link for Care.

Unified Forum

The Mobility Advisory Committee, co-administered by KCATA and the MARC, convenes bi-monthly to address issues regarding enhanced mobility in the Kansas City region. As a sub-committee of the Regional Transit Coordination Council, the Mobility Advisory Committee provides a forum to bring additional expertise and focus to the issues of paratransit and other demand responsive services. The Mobility Advisory Committee should continue to function in this manner and serve as an information outlet to promote regional coordination efforts as they progress. As an in-person forum to discuss transportation service, the committee can also promote awareness of Link for Care site and its service feedback features.

Regional Branding

A regional branding effort for transit began in 2014, and paratransit services will be included in the branding initiative. In November 2014, RideKC was endorsed as the new regional brand in order to continue pursuing deployment into 2015. The initiative will be integrated through the new RideKC transit website.

Promotion of Link for Care

Link for Care does not currently have a sophisticated plan to market the site to users. When the site was launched last year, MARC helped create marketing materials and produced a commercial. However, there is currently no available funding or formal process to support these efforts. Because of their valuable connections with social service organizations, medical centers, and community groups, staff at KU Medical Center, Shepherd’s Center Central, and KCATA should continue to promote Link for Care through announcements at meetings and events.

Providing the extensive information on the Link for Care database in print format would not be effective or cost-efficient. Link for Care provides information and services that are constantly changing or being updated. While users may like possessing hard-copy materials, Link for Care staff has developed a good format for printing information from the site to create tailored hard-copy materials. Link for Care also supports the
creation of user accounts where individuals can save searches and preferred providers, thus providing accurate and updated information that is tailored to the specific user. Nonetheless, advertisement of Link for Care could be incorporated into existing leave behind distribution materials such as business cards and simple brochures. In addition, the service feedback component of Link for Care could be further promoted. When utilized by more users, the site then provides valuable information for other riders and feedback to transit agencies in order to improve services in the future.

If additional funding were obtained, Link for Care could establish a marketing campaign similar to the effort used during launch of the site. During the previous campaign, users on the site spiked to more than 1,100 per month (currently, about 550 users consistently access the site). In the long-term, the Transportation Resource Center could provide hard-copy brochures that raise community awareness about the one-call/one-click service.

While promotion to users is important, perhaps even more critical is the promotion of the resource to service providers. The Link for Care search engine is only as effective as the information contained in the database. Therefore, it is critical to ensure that provider information is accurate and complete. Project Manager Tanya Bishop spends a significant amount of time updating the provider information one-by-one. A digital wizard should be considered that sends an automatic email to the listed providers at least one per year asking them to confirm and/or change their service information. An effective database template that asks “the right questions” can enable providers to become accustomed to routinely updating the information, thus increasing the productivity of KU Medical Center staff’s valuable time.

**Proposed Schedule**

The proposed schedule incorporating the three phases is outlined in Figure 17. With the expected Section 5310 funding, Link for Care and Care Connection can begin Phase I and formalize partnership agreements in mid-2015. The partnership can then progress into improvements of the Transportation Services page, inclusion of the one-call hotline, and the development of additional features throughout late 2015 and early 2016. As the travel training and regional eligibility initiatives progress, information related to these topics can be added to the Link for Care site.

Phase II aligns with components of the Regional Eligibility Determination recommendation. Preparation for the Transportation Resource Center should begin in mid-2016 with implementation in 2017.

Phase III occurs concurrently with Phase I and Phase II. Phase III involves marketing and outreach efforts to promote the improved Link for Care site and the planned Transportation Resource Center. Outreach occurs through multiple avenues including a unified forum (i.e. Mobility Advisory Committee), the regional branding initiative, distribution materials, and a campaign at the launch of the Transportation Resource Center.
## Figure 17: Proposed Schedule for Expanded Information and Referral Services

<table>
<thead>
<tr>
<th>Proposed Schedule</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Phase I: Upgrade Link for Care site</strong></td>
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<tr>
<td>Finalize Section 5310 Funding Agreements</td>
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<tr>
<td>Maintain Link for Care Site</td>
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<tr>
<td>Evaluate Transportation Services Page</td>
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<tr>
<td>- Develop a business model</td>
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<tr>
<td>- Meet with transportation specialists to evaluate organization</td>
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<tr>
<td>- Refine Transportation Services homepage</td>
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<tr>
<td>One-Call Service</td>
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<tr>
<td>- Establish formal agreement between Link for Care and Care Connection</td>
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<tr>
<td>- Train hotline staff to use Link for Care site</td>
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<tr>
<td>- Update site to include hotline information</td>
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<tr>
<td>- Monitor call volume to Care Connection hotline</td>
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<tr>
<td>- Hire part-time staff to assist with call volume (transition to full-time as necessary)</td>
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<tr>
<td>KCATA Call Center</td>
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<tr>
<td>- Establish formal agreement between Link for Care and KCATA</td>
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<tr>
<td>- Update site to include KCATA call center information</td>
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<tr>
<td>Fixed Route Trip Planning</td>
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<tr>
<td>- Ensure data is provided in compatible format</td>
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<tr>
<td>- Provide link to Google Transit</td>
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<tr>
<td>Paratransit Trip Planning</td>
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<tr>
<td>- Collect accurate service area and information from service providers</td>
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<tr>
<td>- Develop GIS-based service areas</td>
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<tr>
<td>- Implement database with search functions</td>
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<tr>
<td>Travel Training</td>
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<tr>
<td>- Update site to include KCATA travel training information</td>
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<tr>
<td>- Screen for other travel training providers and update site as necessary</td>
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<tr>
<td>Regional Eligibility</td>
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<tr>
<td>- Provide hotline staff with outline and training for pre-screening eligibility</td>
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<tr>
<td>- Update site to include eligibility information and forms</td>
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<tr>
<td><strong>Phase II: Establish Transportation Resource Center</strong> (see Regional Eligibility Determination section for detailed information)</td>
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<tr>
<td>Preparation for Transportation Resource Center</td>
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<tr>
<td>- Apply for Section 5310 funding</td>
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<tr>
<td>- Establish formal agreements between KCATA and Link for Care</td>
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<tr>
<td>- Train KCATA staff to use Link for Care site</td>
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<tr>
<td><strong>Implementation of Transportation Resource Center</strong></td>
<td></td>
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<tr>
<td><strong>Phase III: Marketing and Outreach</strong></td>
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<tr>
<td>Unified Forum</td>
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<tr>
<td>Regional Branding</td>
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<tr>
<td>Promotion of Link for Care</td>
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<tr>
<td>- Promote site and hotline through personal contact, business cards, and brochures</td>
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<tr>
<td>- Create materials for distribution at the Transportation Resource Center</td>
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</table>
APPENDIX A
Inventory of Existing Services
Agency: Kansas City Area Transportation Authority (KCATA)
Service: Share-a-Fare
Website: www.kcata.org
Contact: Jameson Auten
Address: 1200 E. 18th Street, Kansas City, MO 64108
Phone: (816) 346-0886
Email: jauten@kcata.org

General Description
Share-a-Fare is an ADA complementary paratransit service that also provides service above-and-beyond minimum regulatory requirements (non-ADA).

Eligibility Requirements and Application Process
To be eligible for ADA service, individuals must meet one of the following regulatory categories:
Category 1: Individual with a disability unable to use fully accessible, fixed-route bus service
Category 2: Individual with a disability who could use the fixed-route bus service if accessible
Category 3: Individual with a disability who cannot access a particular bus stop or access the final destination after disembarking from a fixed-route bus

Persons eligible for ADA trips may also have unrestricted, temporary, or conditional access to the service:
Unrestricted: Full access to service for up to three years
Temporary: Full or conditional access for the expected duration of a temporary disability
Conditional: Access to the service for up to three years only when conditions impact the ability to use the fixed-route bus service (i.e. weather, unfamiliarity of trips, specific origins/destinations, etc.)

Persons with disabilities between 16-65 years or seniors at least 65 years with an annual income of no more than 150 percent of the poverty level are eligible for non-ADA trips. To date, KCATA has not received an application requesting service based on the income eligibility requirements. Individuals must be a resident of Kansas City, Missouri to qualify for non-ADA trips.

Trip Purposes
ADA trips are for any trip purpose. Non-ADA trips are primarily designated for work or medical trips, but may also be used for education, shopping, social, or personal trips for an additional charge.

Service Area
The service area for ADA trips generally extends 3/4 of a mile on each side of KCATA Metro non-commuter, fixed-route bus service (does not include express, commuter, or MetroFlex routes). Intercity eligible trips between Independence, Missouri or Kansas City, Kansas are permitted. Officially, the service area for non-ADA trips is within Kansas City, Missouri and certain medical or work destinations in neighboring communities. Generally, the service area extends two miles on each side of local Metro fixed-routes but there is a need to establish a consistent service area and identify important service pockets outside of Kansas City, Missouri.

Days and Hours of Service
The service operates daily from 6:00 AM - 12:00 AM. Reduced service may be implemented on holidays.
Trip Reservation Policies

Trip Reservation

Trip reservations are received Monday to Friday from 7:00 AM - 4:45 PM and Saturday to Sunday from 8:00 AM - 4:30 PM. Typically, four to six reservationists are on staff to answer calls. The office receives approximately 400 to 600 calls per day. Peak call time is in the late afternoon prior to the 4:45 PM cut-off time to schedule trips for the next day. Reservationists are also busy during the lunch period due to staff rotation.

Trips may be scheduled one to fourteen days in advance. About 50 percent of the riders schedule trips in advance and the other 50 percent call the day before. Riders who schedule trips in advance usually call to confirm the trip closer to the travel date. KCATA currently does not have a trip negotiation policy. Staff expressed a need for the ability to see real-time service capacity to know when to negotiate trips. Currently, medical appointments or trips for legal purposes (i.e. tax, court) are will-call return trips. If intracity trips are requested in the City of Independence or UGT service area, riders are referred to the appropriate service (unless after service hours).

About 10 percent of all scheduled trips are cancelled at least two hours prior to the trip. Nearly 3 percent are considered late cancels (less than two hours prior to the trip) with about 7 percent as no-shows. Therefore, about 80 percent of the trips actually occur as scheduled. The no-show penalty policy is currently not enforced due to software transition. Staff expressed the need to educate users about the importance of timely cancellations.

Subscription Service

If work or travel schedule remains the same at least two times per week, a subscription service can be arranged for a 90-day period or until the next quarter when fixed-route bus service changes. KCATA also receives appointments lists from dialysis units on a monthly basis. However, reservationists noted the current process is subject to error. As a result, the policy may change to make trip reservation the individual riders’ responsibility.

Trip Scheduling

As noted above, KCATA receives reservations and same-day calls in-house. Trip requests are entered into the RouteMatch system but not negotiated or scheduled to a specific run. All trip requests are left in the system in unscheduled status. The unscheduled trips are then sent to Reveal Management Systems for scheduling. Transdev receives the scheduled driver manifests and controls dispatch of the vehicles. Transdev constantly checks for same-day updates, such as same-day cancellations, that are entered into the system by KCATA.

Same-Day Trip Status Calls

Calls from riders checking on the status of trips go directly to Transdev, the service provider. Transdev dispatchers have access to the Reveal software to keep runs updated and can contact drivers as needed to get status reports on trips.

Travel Training

KCATA has a contract with MTM for travel training. The contract is supported with federal New Freedom funding. MTM started travel training just for KCATA riders, but has expanded to serve other agencies in the region. MTM is regularly in contact with other agencies as part of an outreach effort to identify candidates for travel training.

MTM arranges in-person assessments as part of the voluntary travel training program to determine the rider’s capacity to navigate the system. Training also includes trip planning and riding or driving the route with the individual. In addition to education about the paratransit services, riders are trained to use the fixed-route
After training, riders are provided with a 31-day pass as an incentive to use the fixed-route system when able. Staff noted that, in some other cities, businesses partner with the local transit agency to provide gift cards to local businesses as an incentive for using the fixed-route system. The City of Independence provides fixed-route service for IndeAccess riders free of charge as an incentive for using fixed-route when able. However, the group noted that providing free fare for fixed-route without an in-person assessment can pose challenges.

Currently, KCATA handles travel training for UGT and serves as the back-up travel training provider for the City of Independence. KCATA indicated that more outreach is needed with JCT to coordination travel training with them. Other places perform their own training (Rehabilitation Institute of Kansas City, Oak Grove Nursing and Rehab, Alpha Point, and Truman Medical Center) but will send referrals periodically. Staff noted that some of these agencies only focus on home-to-work travel training while KCATA will train for broader use. Staff expressed that KCATA will typically consider referrals for travel training on any system.

About 100 individuals are referred each year with 47 to date this year. After the assessment, about five individuals either do not meet the eligibility requirements or choose not to use the service. Once eligibility is consistent across the region, staff believes that travel training referrals will increase. KCATA would also like to wait for consistent eligibility requirements to be in place before sharing the cost of travel training with other agencies. Currently, KCATA utilizes New Freedom funds to operate the program and does not charge other agencies for referrals.

Some riders are able to use the service after one training while others work with the travel training staff for a few weeks. Staff indicated that one-on-one route training tends to be more successful than group training. Nonetheless, staff is interested in arranging more group training activities to educate system wide. Outreach and education is an important step in making potential riders aware of the travel training service. Critical outreach outlets include the application packet, welcome brochure, and the KCATA website. Staff noted that KCATA receives more feedback on overall service from individuals who complete the travel training.

KCATA and the study team also discussed precedents for assessing paratransit routes. The study team described Olympia, Washington’s process of assessing routes for sidewalk connectivity, terrain, and other elements in order to offer assistance with trip planning. The study team also described the route database maintained by the Southeastern Pennsylvania Transportation Authority (SEPTA) in Pittsburgh, Pennsylvania. To develop the database, the SEPTA first assessed frequent rider trips and then continued to enhance the database as trip requests were received. The study team noted the importance of a thorough examination and application process in order to help determine which routes a rider would be eligible for fixed-route or paratransit service. In Pittsburgh, a convenience fare is applied if the individual has the capacity to use the fixed-route service but chooses to utilize the paratransit service. Staff indicated that a similar process and database could be a long-term goal for KCATA.

Technology
KCATA uses both RouteMatch software and Reveal software. RouteMatch is an Intelligent Transportation System platform for fixed-route and paratransit scheduling. Reveal is an automated scheduling, routing, and dispatching system. Currently, scheduled trips are located in RouteMatch but same-day changes to trips occur in Reveal. The software provides an on-screen notification to alert reservationists when trips are outside the ADA area or hours. Reservationists noted that riders do not typically update their information until a vehicle has been dispatched to the wrong address. Since transitioning to Reveal, KCATA has noted cost savings because of greater efficiency (i.e. KCATA is four percent below the proposed budget and seven percent below the actual budget. Staff noted that Reveal is developing its trip reservations and scheduling capabilities. It is possible that KCATA may migrate further to Reveal in the future.
Fares
Fare for ADA trips is $3.00. Fare for non-ADA trips is dependent upon the trip mileage. Non-ADA trips are $3.00 for 0-3 miles and increase by $2.00 by three-mile increments. Once the trip mileage has reached 15 miles, the fare is $11.00 plus an additional $2.00 per mile. A $2.00 per trip premium is added to non-ADA trips that are not medical or work related trips. Certified personal care attendants ride free of charge.

The eligibility process determines if riders are Medicaid eligible, and if so, individuals ride free of charge due to an agreement with Medicaid in Missouri. Per the agreement, Medicaid pays half the price of Medicaid eligible trips (approximately $17). Staff indicated that a few trips do not get reimbursed, but overall the fare recovery is significant. An immediate benefit of consistent eligibility would be the ability to recover costs through the Medicaid agreement. Extending the agreement to include Kansas is a possible long-term goal.

Method of Operation
KCATA operates an in-house call center to receive trip requests and manage services. Scheduling is provided by a vendor, Reveal Management Systems. Vehicle operations are provided by a contracted vendor, Transdev.

In general, KCATA has had difficulty getting taxi companies interested in supporting paratransit service. Many of trips are short and do not provide taxis with a suitable profit. More attractive financial reimbursement, such as mutually beneficial minimum mileage, would need to be agreed upon in order for taxi companies to be interested in the KCATA operation.

Ridership
The service has 7,282 registered riders. The service provided 258,574 one-way trips in 2013. For the six month period from April 2014 to September 2014, 94 percent of the trips were ADA trips with the remaining 6 percent as non-ADA trips.

Fleet Size and Composition
The service maintains 77 vehicles: 41 body-on-chassis vehicles and 36 sedans. Taxi cabs are also utilized to manage trip volume as needed. KCATA paratransit services provide a maximum of 160 to 170 trips per hour.

Annual Operating Budget and Funding
The annual operating budget is approximately $10.6 million. Based on the number of one-way trips provided, the operating cost for Share-a-Fare is $40.99 per trip. Sources of funding include: Kansas City, Missouri’s 1/2-cent and 3/4-cent sales tax, Medicaid funding, MEHTAP state grant, and Mid-America Regional Council grants.
ADA Paratransit and Other Demand Responsive Services
Kansas City Area Transportation Authority (KCATA), Share-a-Fare

KCATA ADA complimentary service area does not include express, commuter, or MetroFlex routes.

The service area for KCATA non-ADA trips extends beyond Kansas City, Missouri to neighboring communities for certain medical or work destinations.
Agency: City of Independence  
Service: IndeAccess and IndeAccess Plus  
Website: www.indebusmo.com/indeaccess  
Contact: Mary Hunt  
Address: 111 E. Maple, Independence, MO 64105  
Phone: (816) 325-7418  
Email: mhunt@indepmo.org  

General Description  
IndeAccess is an ADA complementary program that provides curb-to-curb, shared-ride service. IndeAccess Plus provides service above-and-beyond minimum ADA regulatory requirements. It provides curb-to-curb, shared-ride service for seniors. The operation of the fixed-route transit (IndeBus) and the paratransit services (IndeAccess and IndeAccess Plus) is closely intertwined and the relationship is crucial to current operation. First Transit is contracted by the City to operate fixed-route, IndeAccess, and IndeAccess Plus services. 

Eligibility Requirements and Application Process  
Eligible IndeAccess riders must meet ADA criteria and be verified by a medical professional as unable to use the fixed-route service. IndeAccess also accepts identification provided by the KCATA. The application for an IndeAccess Travel Card is seven pages. Eligible IndeAccess Plus riders must be 60 years or older and residents of the City of Independence. The application for an IndeAccess Plus Travel Card is one page. Currently, First Transit handles the application process. 

In order to increase capacity on the paratransit services, IndeAccess ID cardholders are eligible for free fare on the fixed-route service. In September 2014, approximately 1,600 fixed-route trips were ADA eligible trips. With IndeAccess ID cardholders receiving these trips for free rather than the $1.50 fare, First Transit loses approximately $2,400 in fixed-route revenue per month. However, due to the cost of paratransit service, approximately 50 round-trips on IndeAccess would cost $2,400. Currently, over 700 IndeAccess trips are provided each month. If 7 percent of potential IndeAccess trips are diverted to fixed-route by the free fare program, it is a break-even proposition and an effective way to increase paratransit capacity and minimize costs. 

Trip Purposes  
Both IndeAccess and IndeAccess Plus serve any trip purpose. Many of the trips are medical related, particularly dialysis appointments on Mondays, Wednesdays, and Fridays. 

Service Area  
The service area for IndeAccess generally extends 3/4 of a mile on each side of the IndeBus fixed-route bus service in the City of Independence. The service area for IndeAccess Plus is within the City of Independence. 

Most trip requests are local trips that do not extend beyond the city limits. Several riders take IndeAccess to the McDonald’s located near Interstate 70 and Blue Ridge Boulevard. From there, individuals cross the street into Kansas City, Missouri to shop at the Blue Ridge Crossing shopping center or to transfer to a KCATA Metro fixed-route. The City has considered promoting a meet-a-friend program at the low-income, high-rise housing complexes to coordinate shopping trips. 

A portion of the service area overlaps with the service areas of KCATA, Jackson County’s EITAS, and OATS. The City of Independence does not typically have interaction or coordination with EITAS or OATS. However, for intracity dialysis trips, some riders have expressed that the City of Independence services are more
convenient and less expensive than the OATS service. KCATA operates the Independence Transit Center with connections to The Metro service.

The City of Independence provides paratransit trips that have both origins and destinations within the city. Riders wanting to travel outside the city and into the KCATA area are referred to KCATA’s Share-a-Fare service. Similarly, KCATA does not do intracity trips in Independence. If KCATA gets calls for paratransit trips completely within the city, they refer the riders to IndeAccess.

**Days and Hours of Service**
Both IndeAccess and IndeAccess Plus operate Monday to Friday from 5:30 AM - 7:00 PM and Saturday from 5:30 AM - 6:00 PM. Holiday closures include New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas.

**Trip Reservation Policies**

**Trip Reservation**
Trip reservation is available Monday to Friday from 7:00 AM - 3:00 PM. Requests on weekends and holidays via voicemail are honored for next day service. However, most riders are aware that staff is not directly available at these times and therefore primarily call Monday to Friday during business hours. Trip reservations must be made no less than one day and no more than fourteen days in advance. With the exception of subscription service, most riders call one day in advance. Official policy states that same day trip request are not permitted. However, the services accommodate same-day requests as available, although historically there have not been many same day requests. Riders inform the scheduler if a personal care attendant or other guests will be traveling or if a mobility device or assistance to and from front door will be needed. When scheduling trips, riders need to allow adequate travel time in case of weather or traffic and allow extra time for the pick-up and drop-off of other passengers before reaching the destination.

First Transit has two staff members who handle reservations, scheduling, and dispatch of both the paratransit and fixed-route services. Each person takes paratransit trip requests, fixed-route customer service calls, and dispatches both services. Each also performs window dispatch. The afternoon staff person arranges schedules for the next day. If paratransit calls were to go to a central call center, First Transit would still need two staff people to do window dispatch, dispatch fixed-route service, and handle fixed-route customer service calls.

Staff indicated that there is a regional branding committee exploring the central call center and “one pass” concepts. In past positions, staff has had experience with central call centers and expressed that having one call center for the region would be a nice option for riders. In order for a central call center to function effectively for the City of Independence, the call-takers must be familiar with the area. Staff indicated this would be the greatest challenge with moving towards a central call center. While the relationship between the riders and the call-takers would become less personal, staff indicated that a more efficient process for riders is more important. Currently, all employees are cross-trained to drive any route or serve as dispatcher depending on demand. All employees are familiar with the riders and know the passengers by name. In the past, First Transit has found that demand did not necessitate the need for a full-time scheduler as peak time for calls is between 6:00 - 7:00 AM and 2:00 - 3:00 PM. As 90 percent of the riders receive financial support from the state, trip reservations are typically heavier at certain times of the month, such as when riders receive assistance checks.

IndeAccess has no ADA denials and trips are accommodated within +/- one hour of the requested time. IndeAccess Plus riders are involved in broader negotiations that are sometimes pushed to the next day. There are currently no issues with phone wait time, which will be important to consider at a central call center. Monday is the heaviest day for reservations with Wednesday as the lightest day.
Subscription Service
At the discretion of the City, riders with a permanent work, school, or medical schedule may be offered a subscription service whereby riders can schedule standing appointments for regular routine trips. Currently, approximately 70 percent of the trips are subscription trips. The remaining 30 percent, about 25 round-trips per week, are primarily shopping trips that are typically scheduled one day in advance. These non-subscription trips could easily be absorbed by a central call center.

Trip Scheduling
The services are completely demand responsive and adjust driver schedules accordingly. No more than three rides per 15-minute time slot are scheduled, and appointments are sometimes negotiated +/- one hour of the requested time. The call-taker does not schedule a trip to a specific run. Because trip reservations for the next day end at 3:00 PM rather than 5:00 PM, the scheduler can condense the runs for efficiency in the afternoon for the next day. Schedulers overbook runs because they tend to receive cancellations. Staff indicated that the schedulers, using their historical knowledge, can often schedule the trips better than the software. When assigning runs, the scheduler manually adjusts trips to create the most efficient pick-up and drop-off schedule for the driver manifests. The informal guideline for trip length is 90 minutes, but the majority of trips are completed within 30 minutes and rarely extend to 60 minutes.

Drivers can be used on all three services (IndeBus, IndeAccess, and IndeAccess Plus) as needed in order to meet peak demand, resulting in high productivity with low cost. All 18 drivers are cross-trained, allowing the operation to be flexible with its resources to meet demand. The operation has good driver retention and can satisfy the hours per week that employees desire to work (some prefer to work part-time and are flexible with their schedules, creating flexibility within the demand responsive operation).

Throughout the day, dispatch will sometimes transfer a trip from one driver to another to remain on schedule. The service has an informal “no-strand” policy, ensuring that riders will be returned home even as issues arise. A common issue is unexpected recovery time for dialysis patients.

Overall, there are typically enough trips for three full-time paratransit runs. As a result, the City of Independence has about 30 revenue hours per day allocated for paratransit. Approximately ten riders utilize the service on Monday, Wednesdays, and Fridays for dialysis appointments. Peak times are generally 6:00 - 10:00 AM for pick-ups and 1:00 - 4:00 PM for returns.

Technology
Currently, First Transit utilizes Trapeze Simpli Transport software but is in negotiations with Reveal Management Systems to purchase new mobility management software. Reveal is an automated scheduling, routing, and dispatching system. Because Reveal is also utilized by KCATA and JCT, there is greater opportunity for future coordination between the agencies if they convert to this software. Utilizing similar technology and software would be an important element to consider in coordination efforts.

The services use a Nextel radio system but will be converting to a two-way radio system. First Transit utilizes TransLoc Real Time, a GPS-based system, to track fixed-route and paratransit vehicles. The dispatcher updates the fixed-route travel times so users can access real-time fixed-routes via the website and phone application.

Travel Training
First Transit provides travel training internally to educate riders about the fixed-route service and paratransit services. First Transit has had discussions with MTM about coordinating regional travel training. However, the
City of Independence would then pay a cost per referral instead of providing training in-house with available staff. Staff indicated that there are typically very few requests for travel training.

**Fare**
The service for IndeAccess and IndeAccess Plus are both provided for $2.00 per one-way trip. IndeAccess Plus Travel Cards provide up to 24 eligible trips per quarter. IndeAccess Plus riders may use their Travel Cards as identification for reduced fare on the IndeBus. Passengers who have Medicaid may be eligible for free transportation to and from medical appointments and trips to the pharmacy. Currently, no passengers within the system are requesting verification to present to Medicaid for reimbursement, but it is available upon request. First Transit does not take the risk of providing free trips and then requesting reimbursement.

**Method of Operation**
Both services operate through a turnkey contract with First Transit. First Transit has been operating the services since 2012. Previously, the Department of Parks and Recreation operated the paratransit services.

**Ridership**
IndeAccess has 425 registered riders with 82 of the registered riders using the service on a regular basis. IndeAccess provided 8,654 one-way trips. IndeAccess Plus has 417 registered riders with 72 of the registered riders using the service on a regular basis. IndeAccess Plus provided 4,080 one-way trips.

**Fleet Size and Composition**

**Annual Operating Budget and Funding**
The annual operating budget for IndeAccess is $193,700. Based on the number of one-way trips provided, the operating cost for IndeAccess is $22.38 per trip. The annual operating budget for IndeAccess Plus is $129,100. Based on the number of one-way trips provided, the operating cost for IndeAccess Plus is $31.64 per trip. Cost-share between the fixed-route and paratransit operations is likely the reason for good trip costs. Sources of funding include: the City of Independence general fund, Hospital Corporation of America (HCA) supplement, and farebox revenue.
ADA Paratransit and Other Demand Responsive Services
City of Independence, IndeAccess and IndeAccess Plus
Agency: Unified Government Transit (UGT)
Service: Dial-a-Ride and Aging Transit
Website: www.wycokck.org/transit
Contact: Irvin Jackson
Address: 5033 State Avenue, Kansas City, KS 66102
Phone: (913) 573-8309
Email: ijackson@wycokck.org

General Description
Dial-a-Ride is an ADA complementary paratransit service that operates beyond the required 3/4 of a mile around fixed-routes to provide service within all of Wyandotte County. Aging Transit is a non-ADA demand responsive service for seniors. Aging Transit includes three different services:

1. Demand Response: Transportation for seniors within Wyandotte County
2. Congregate Meals: Transportation for seniors from their homes to designated nutrition sites
3. Meals on Wheels: Hot and frozen meals prescribed by a physician are delivered to homebound seniors

Eligibility Requirements and Application Process
To be eligible for Dial-a-Ride ADA service, individuals must be persons with disabilities. The application and certification process is through KCATA’s Share-a-Fare process. To be eligible for Aging Transit non-ADA service, individuals must be 60 years or older.

Trip Purposes
Dial-a-Ride serves any trip purpose, but most trips involve medical appointments, residential care, and work purposes. Aging Transit Demand Response serves trips for medical appointments and grocery shopping. Aging Transit Congregate Meals serves designated nutrition sites including the Argentine Community Center, Bethel Neighborhood Center, Edwardsville Court, Plaza Towers, Rosedale Towers, Vaughndale Towers, Westage Towers, and Strangers Rest.

Service Area
For both Dial-a-Ride and Aging Transit, the service area is Wyandotte County. Additionally, KCATA operates four fixed-routes within Wyandotte County. Therefore, KCATA provides ADA paratransit service within 3/4 of a mile of the KCATA fixed-routes in Wyandotte County, creating an overlap in service areas. Typically, the KCATA Share-a-Fare is contacted for out-of-county trips and trips that extend beyond Dial-a-Ride’s hours of service (i.e. weekends and weeknights after 9:00 PM). Otherwise, Share-a-Fare discourages intracity paratransit trips and will refer riders to Dial-a-Ride. Share-a-Fare currently provides approximately 500 trips each month within Wyandotte County, and therefore provides nearly as many trips as the Dial-a-Ride service.

Dial-a-Ride will provide service to the Metro Transit Centers within their service area (7th Street/Minnesota Avenue and 47th Street/State Avenue), but do not provide vehicle to vehicle transfers unless necessary. Staff expressed that riders are accustomed to trips being limited to Wyandotte County, but believe there is demand for regional trips and regional service would be desirable. In particular, there are a few riders who desire service to the Veterans Administration Medical Center office in Kansas City, Missouri. UGT is also willing to discuss designated transfer points at the Metro Transit Centers outside of Wyandotte County, including the Mission Transit Center and the 10th Street/Main Street Transit Center.

Days and Hours of Service
Dial-a-Ride operates Monday to Friday from 7:00 AM - 9:00 PM. Aging Transit operates Monday to Friday from 8:00 AM - 6:00 PM.
**Trip Reservation Policies**

**Trip Reservation**
Trip reservations are received Monday to Friday from 7:00 AM - 4:00 PM. Trip reservations must be made at least 24 hours in advance. Two dispatchers receive trip reservations (7:00 AM - 4:00 PM shift, 9:00 AM - 6:00 PM shift). From 6:00 PM - 9:00 PM, the evening supervisor is responsible for the duties. Maximum call hold time is three minutes with peak call time during the early morning and afternoon. The peak afternoon call time is associated with the return trips, particularly medical appointments, which are all will-call trips. In the afternoon, UGT utilizes the Congregate Meals vehicles (which are typically done with their runs by 1:00 PM) to meet the demand for the will-call return trips.

Several riders are eligible for both Dial-a-Ride and Aging Transit. Currently, riders declare which service they would like to utilize. Eligibility requirements are not officially verified. Dial-a-Ride riders are given an exact pick-up time while Aging Transit trips are scheduled one hour prior to the rider’s appointment. Currently, trip reservation and scheduling is performed manually. The information is later entered digitally for record keeping purposes, resulting in duplicate effort for the same task.

**Subscription Service**
Officially, subscription service is not offered. However, Dial-a-Ride dialysis appointments, Demand Response dialysis appointments, Congregate Meal trips, and employment trips appear to be routine with a set list of riders. Unofficially, about 20 to 30 percent of the trips are subscription based.

**Trip Scheduling**
The dispatchers who receive trip reservations also assign the trips the night before. The dispatchers indicated that dialysis appointments block out a significant period of time. Trips for Congregate Meals and Meals on Wheels are automatically loaded from the Unified Government Area Agency on Aging each day.

UGT promotes a team mentality and the drivers are relied upon to volunteer to meet will-call return trips when available. At full capacity, UGT employs 36 to 39 union employees. Flexibility is important in order to provide quality performance and good customer service. At the current rate of approximately 1.2 trips per hour, there is capacity to improve efficiency. Currently, UGT places a focus on flexibility and customer service over operational efficiency.

**Travel Training**
Currently, UGT coordinates with KCATA for travel training.

**Technology**
Currently, UGT utilizes Trapeze Pass software, but the software is only used for recording purposes. Trip reservation and scheduling is completed manually. Dispatchers noted that when Trapeze Pass was implemented, the schedules produced were inaccurate and had to be manually overridden. They also indicated larger technology issues, such as server reliability. As a result, the dispatchers have found that recording trips by hand is more efficient and accurate at this time. Staff expressed that while some user error explains the non-utilization of the software, UGT also does not have the rider demand to utilize Trapeze Pass to its fullest extent. As a result, there is some duplication of effort with manual recording and digital recording.

UGT has a voice radio system for communication with drivers. They also have automatic vehicle location (AVL) to monitor vehicle location and assist with run management. The services do not currently use mobile data terminals (MDT) to communicate with dispatch. Actual pick-up times are recorded on the driver manifests.
**Fare**
Dial-a-Ride is provided for $3.00 per one-way trip. Aging Transit is provided for $1.00 per one-way trip. Congregate Meal transportation to designated nutrition sites is provided for $0.50 per one-way trip. For the designated nutrition sites, seniors are picked up from their homes and transported to the sites where they receive a nutritious meal and participate in various other activities such as arts and crafts and workshops.

**Method of Operation**
The services operate in-house.

**Ridership**
In 2013, the service had 4,500 registered riders between Dial-a-Ride and Aging Transit. In 2013, Dial-a-Ride provided 8,366 one-way trips. In 2013, Aging Transit provided approximately 14,880 one-way trips.

**Fleet Size and Composition**
The services maintain eight dedicated cutaway vehicles and one spare vehicle between Dial-a-Ride and Aging Transit Demand Response. Meals on Wheels utilizes three minivans and one refrigerated vehicle for delivery. Dial-a-Ride operates three runs for 23 revenue hours. Aging Transit operates five runs for 35 revenue hours. Congregate meals operates four runs for 21 revenue hours. Congregate Meals service is usually completed by 1:00 PM. Drivers then assist with will-call return trips for the Dial-a-Ride and Aging Transit services. Meals on Wheels operates four runs for 28 revenue hours. Meals on Wheels provides approximately 70 to 90 meals per route per day. Frozen delivery operates four days a week within four districts.

Based on the daily operating hours, UGT operates about 26.5 revenue-hours of Dial-a-Ride service per day (23 for the three dedicated runs, plus an estimated 3.5 of the congregate meals vehicles in the afternoon). UGT operates about 40.5 revenue-hours of Aging Transit Demand Response service per day. UGT also operates about 12 revenue-hours of Congregate Meals transportation per day. For the Dial-a-Ride ADA service, this suggests about 6,890 revenue-hours per year. With 8,366 Dial-a-Ride trips per year, this suggests a productivity of about 1.21. For non-ADA (Aging Transit Demand Response plus Congregate Meals), this suggests about 13,650 revenue-hours per year. Combined, these services provide 14,880 trips per year, suggesting a 1.09 productivity. Combining all non-meals delivery service, about 23,246 trips are provided using 20,540 revenue-hours per year. This suggests a combined productivity of about 1.13.

**Annual Operating Budget and Funding**
The annual operating budget for Dial-a-Ride is $145,162. Based on the number of one-way trips provided, the operating cost for Dial-a-Ride is $17.35 per trip. The annual operating budget for Aging Transit is $875,162. Combined, the budget for the services is $1,020,324. Based on the number of one-way trips provided, the operating cost for IndeAccess is $58.81 per trip. If trips and budget are combined, the operating cost is $43.89 per trip. Sources of funding for Dial-a-Ride include federal, state, and local funding. Sources of funding for Aging Transit include a mill levee and general funds.
ADA Paratransit and Other Demand Responsive Services
Unified Government Transit (UGT), Dial-a-Ride and Aging Transit

Dial-a-Ride ADA complimentary service extends beyond 3/4 of a mile of the fixed routes to serve all of Wyandotte County.


Agency: Johnson County Transit (JCT)
Service: Special Edition
Website: www.jocogov.org/dept/transit/special-edition
Contact: Shawn Strate
Address: 1701 W. 56 Highway, Olathe, KS 66061
Phone: (816) 346-0349
Email: sstrate@kcata.org

General Description
Special Edition is an enhanced mobility, shared-ride service. It is not ADA complementary paratransit. SWIFT provides home to worksite trips for clients of Johnson County Developmental Service.

Eligibility Requirements and Application Process
Eligible riders must be 65 years or older, have a documented disability, or have a monthly family income within low-income guidelines established by Johnson County. Existing riders who were eligible for service under the previous 60 years or older requirement are grandfathered. Youth 13-18 years with a documented disability may ride for medical appointments only. Riders must also be a resident of Johnson County and live or have means to travel within the designated service area.

Passengers must submit a four-page application, including a statement from a physician stating the nature of the disability. If approved, riders are issued an ID card. Applications from low-income applicants are transmitted to the Johnson County Department of Human Services for review and approval.

Trip Purposes
Special Edition serves any trip purpose within the designated service area. Special Edition travels into specified areas of Kansas City, Missouri and Kansas City, Kansas for medical appointments only. SWIFT provides home to worksite trips for Johnson County Developmental Service clients.

Service Area
The designated service area for Special Edition and SWIFT is bounded by 159th Street on the south, K-7 and Hedge Lane on the west, State Line Road on the east, and 47th Street on the north. Special Edition travels into specific areas of Kansas City, Missouri and Kansas City, Kansas for medical appointments only. There are currently no designated transfer points.

For Olathe riders, trips must travel outside the Olathe city limits to be eligible. Riders are referred to the Olathe Taxi Coupon Program if they request internal trips within the City of Olathe. There is not a similar agreement regarding internal trips within Shawnee (Shawnee provides the CityRide program). Special Edition is available for curb-to-curb service in rural areas of Johnson County when three or more riders request trips on the same day. In these cases, trips within the city limits are available on the designated days: Monday in Spring Hill, Tuesday in DeSoto, Thursday in Edgerton and Gardner, and Friday in Stanley and Stilwell.

Staff noted that JCT implemented a small expansion of the service area through a six-month pilot project that allows trips to extend one-half mile farther south and west of the current service boundaries to designated program locations. Currently, the pilot project only serves a new adult day services provider, WillowTree Supports, located west of K-7. JCT last expanded the service boundaries approximately seven years ago. Staff expressed that, because of continued development and growth, there appears to be a need to expand the service boundary; however, County funding availability has constrained the service area.
Days and Hours of Service
Special Edition and SWIFT operate Monday to Friday from 6:00 AM - 6:00 PM. Holiday closures include New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas. Reduced service may be implemented on observed holidays including Martin Luther King Day, the Friday after Thanksgiving, Christmas Eve, and New Year’s Eve. Current peak demand period for SWIFT are approximately 6:30 AM - 9:00 AM and from 3:00 PM - 5:00 PM.

Trip Reservation Policies
Trip Reservation
Trip reservation for Special Edition is available Monday to Friday from 8:00 AM - 5:00 PM. Trips may be scheduled up to seven days in advance and no later than two days prior to the trip.

Four people work in the call and control center during regular weekday hours of operation including a Special Edition reservationist, Special Edition dispatcher, and a fixed-route customer service agent. The reservationist takes calls and enters them into the Reveal system. Trips are entered into the system, but not scheduled to actual runs until the day before the trip. The system keeps track of trips by time and guidelines have been developed to limit the number of trips during any given time period to not exceed capacity.

Staff noted that demand is currently exceeding capacity. The services typically reach capacity one week in advance, resulting in approximately five denials each day (denied trips are placed on a wait list). There is typically less demand in the summer.

Riders must call the Special Edition Scheduler or communicate through the Dial 7-1-1 Kansas Relay Center to schedule trips. Riders may not schedule service through the taxi company. JCT dispatch and the 10/10 Taxi dispatch will communicate as needed. Trips are not assigned when received.

Subscription Service
Premium reservation (subscription) service is available to a limited number of passengers who have schedules with a degree of regularity from week to week. Riders who utilize premium service are invoiced monthly rather than pay cash fare for each trip. There is currently a waiting list for premium service.

Trip Scheduling
Reveal Management Systems handles the scheduling and dispatch for the services. The manager of the call center currently schedules all trips that are in the system. He develops detailed manifests for the vehicles and runs operated by First Transit. A second manifest (a list of trips) is also developed for 10/10 Taxi. The scheduling process attempts to maximize the use of First Transit vehicles and runs. Trips that do not fit well or productively on these runs are then assigned to 10/10 Taxi. Trips are scheduled one to two days in advance.

To keep within budget, JCT has established a limit of 52 First Transit vehicle-hours of service per weekday. There are also limits on the number of trips assigned to 10/10 Taxi each day.

Special Edition schedules seven morning runs and seven evening runs at peak times. SWIFT has a set schedule of rides and operates twelve morning runs and twelve evening runs at peak times. SWIFT will accommodate individual riders with exceptional needs as necessary. Project SEARCH has one morning run and one evening run. Specifically, the Heart Strings Community Foundation has peak use from 8:00 - 9:00 AM and the Lake Mary Center from 2:00 - 3:30 PM. JCT has only had three no-show/late cancellation incidents in the past 90 months. The services operate at approximately 2.4 trips per revenue hour.
Travel Training
No travel training is provided through JCT.

Technology
JCT utilizes Reveal software for scheduling. 10/10 Taxi also utilizes Reveal software. Some JCT vehicles have mobile data terminals (MDT) for communication with central dispatch. JCT will be outfitting the vehicles with tablets to monitor routes.

Fare
Fares are based on mileage “as the crow flies” for regular service. Fare is $5.20 for a trip less than ten miles, $6.20 for a trip ten to twenty miles, and $7.20 for more than twenty miles. Reduced fare trips are available for $3.30 but JCT may also charge an additional $0.75 per zone for travel outside the designated area. Reduced fare qualification is based on low-income guidelines. For convenience, Special Edition passes may be purchased in increments of ten punches. Aides with a documented physician statement and Aide ID travel free of charge.

Method of Operation
JCT has three separate contracts for the operation of Special Edition and SWIFT services. Reveal Management Systems has a contract to manage reservations, scheduling, and dispatch, and develop driver manifests. JCT contracts with First Transit to hire and supervise drivers and operate and maintain vehicles. JCT also contracts with 10/10 Taxi for the provision of service.

KCATA is absorbing the management of JCT. Johnson County will pay KCATA $450,000 annually to operate the JCT contracts. KCATA estimates they will need five positions to perform this function (including contract manager, planner, and IT staff). Staff expressed that various services in the region need to be operationally merged so that it is transparent to the rider and they can ride throughout the metropolitan area.

JCT will continue to own the facilities and vehicles and monitor the use and performance of services through the existing turnkey contract with First Transit. The First Transit agreement is a three-year contract with two two-year extension options. JCT also has a contract with 10/10 Taxi for supplemental, overflow service. First Transit schedules trips to both its own vehicles and to 10/10 Taxi as needed. 10/10 Taxi owns their own vehicles and the drivers are independent contractors. There is a pool of drivers specifically trained for Special Edition service with an emphasis on customer service and sensitively meeting the needs of the clientele.

Ridership
In 2013, the service had approximately 2,000 registered riders shared between Special Edition and SWIFT. In 2013, Special Edition provided 56,650 one-way trips. In 2013, SWIFT provided 45,430 one-way trips. Staff indicated that about 260 trips are scheduled each day. About 160 trips are completed by 10/10 Taxi with the remaining trips using internal wheelchair-accessible vehicles. About 26 trips per day are provided to riders who use wheelchairs.

Fleet Size and Composition
In 2013, the services maintained 43 coaches and 35 wheelchair-accessible cutaway vehicles shared between Special Edition and SWIFT. Many of the cutaway vehicles are used for transportation to and from group homes. Supplemental service is provided through 10/10 Taxi. Over time, staff believes that the fleet will downsize as more service is completed by 10/10 Taxi. By utilizing taxis for some trips and maximizing the use of dedicated vehicles operated by First Transit, the Reveal Management Systems manager indicated that the Special Edition service operates at a productivity of about 2.4 trips per vehicle-revenue-hour.
SWIFT vehicles are parked at The Worship Center of Kansas City, located adjacent to Johnson County Developmental Supports, during the day. JCT pays the church $250 per month for vehicle storage. One vehicle returns to the JCT in order to shuttle the drivers.

**Annual Operating Budget and Funding**

In 2013, the annual operating budget for Special Edition was $3,313,681. Based on the number of one-way trips provided, the operating cost for Special Edition is $58.49 per trip. In 2013, the annual operating budget for SWIFT was $941,086. Combined, the budget for the services is $4,254,767. Based on the number of one-way trips provided, the operating cost for SWIFT is $20.72 per trip. If trips and budget are combined, the operating cost is $41.68 per trip. The operating cost for 10/10 Taxi is approximately $15.00 per trip. Sources of funding for Special Edition: federal funding (12.7%), state funding (9.7%), county funding (69.6%), farebox revenue (7.3%), and other revenue (0.8%). Sources of funding SWIFT include: federal funding (4.7%), county funding (76.0%), farebox revenue (13.9%), and other local revenue (5.5%) that includes the New Freedom grant and scholarship rides reimbursement.
Additional service area (dotted line) for additional charge as determined by destination zone.
General Description
OATS is a non-for-profit corporation providing specialized transportation for seniors, persons with disabilities, and the rural general public. In the West region, OATS has contracts through the Mid-America Regional Council (MARC) for seniors and persons with disabilities. MARC contracts are organized as:

Area B: South Platte County
- Area N: North Platte County and Clay County (including City of Excelsior Springs, City of Kearney, and City of Smithville)
- Area L: Jackson County (including City of Buckner and City of Blue Springs)

Eligibility Requirements and Application Process
Eligible riders include seniors 60 years and older and persons with disabilities 18 to 59 years.

Trip Purposes
OATS serves medical appointments, essential shopping, and trips to eligible Senior Centers.

Service Area
The service area is within the OATS four-county West region: Platte, Clay, Jackson, and Cass Counties.

Days and Hours of Service

<table>
<thead>
<tr>
<th>Area B (South Platte County)</th>
<th>Medical appointments: Monday, Wednesday, Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Platte Cities</td>
<td>Essential shopping: 1st, 3rd, 4th Tuesday of each month*</td>
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<tr>
<td></td>
<td>Platte County Senior Center</td>
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<tr>
<td></td>
<td>*Northern route: Bean Lake, Camden Point, Dearborn, Edgerton, Platte City, New Market, Kearney, and Weston to Kansas City (8:30-10:00 AM pick-up; 1:30-3:00 PM return); Southern route: Farley, Ferrelview, Houston Lake, Kansas City, Lake Walkomis, Parkville, Riverside, Waldron, and Weatherby Lake to Kansas City (8:30-10:00 AM pick-up; 1:30-3:00 PM return)</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Area N (North Platte County and Clay County)</th>
<th>Medical appointments: Monday, Wednesday, Friday</th>
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</thead>
<tbody>
<tr>
<td>North Platte Cities</td>
<td>Essential shopping: 1st Friday of each month; 2nd, 4th Wednesday of each month</td>
</tr>
<tr>
<td>Platte County Senior Center</td>
<td></td>
</tr>
<tr>
<td>City of Excelsior Springs</td>
<td>Medical appointments: Monday, Wednesday, Friday</td>
</tr>
<tr>
<td></td>
<td>Essential shopping: 1st, 3rd Wednesday of each month</td>
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<tr>
<td></td>
<td>Senior Center: Monday to Friday, 8:45-9:30 AM pick-up, 1:00-2:30 PM return</td>
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<tr>
<td>City of Kearney</td>
<td>Medical appointments: Monday, Wednesday, Friday</td>
</tr>
<tr>
<td></td>
<td>Essential shopping: 1st, 2nd, 3rd Thursday of each month</td>
</tr>
<tr>
<td>City of Smithville</td>
<td>Medical appointments: Monday, Wednesday, Friday</td>
</tr>
<tr>
<td></td>
<td>Essential shopping: 1st, 2nd, 3rd Thursday of each month</td>
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<tr>
<td></td>
<td>Senior Center: Monday, Wednesday, Friday</td>
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### Area L (Jackson County)

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<tbody>
<tr>
<td>Jackson County</td>
<td>Medical appointments: Monday, Wednesday, Friday(^<em>)(^</em>)Riders are typically referred to Share-a-Fare or IndeAccess as applicable; OATS provides services in Independence for special contracts only Monday to Friday</td>
</tr>
<tr>
<td>City of Buckner</td>
<td>Buckner Senior Center: Monday to Friday, 8:30-10:00 AM pick-up, 1:30-3:00 PM return</td>
</tr>
<tr>
<td>City of Blue Springs</td>
<td>Vesper Hall Senior Center: Monday to Friday, 8:30-10:00 AM pick-up, 1:30-3:00 PM return</td>
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</tbody>
</table>

**Trip Reservation Policies**
Trip reservations must be made at least 24 hours in advance.

**Fare**
There is no fare charged for the service. If riders and/or trip purposes are not covered by a MARC contract, a fee of $30.00 per hour is assessed.

**Method of Operation**
The service operates in-house.

**Ridership**
In 2013, the service provided: 505 trips in Area B, 26,104 trips in Area N, and 3,118 trips in Area L. Of the Area B trips, 419 were ambulatory trips and 86 were lift/ramp trips. Of the Area L trips, 2595 were Senior Center trips, 287 were ambulatory trips, and 236 were lift/ramp trips.

**Fleet Size and Composition**
The service maintains 76 vehicles within the four-county West region, including contracts for general public transit with the City of Blue Springs and the City of Lee’s Summit.

**Annual Operating Budget and Funding**
Sources of funding include MARC contracts. In 2013, the budget is as follows: $4,140 for ambulatory trips in Area B; $7,150 for lift/ramp trips in Area B and Area L; $170,250 for trips in Area N; $28,560 for Senior Center trips in Area L; and $4,500 for ambulatory trips in Area L.
**Agency: OATS, Inc.**  
**Service: City of Blue Springs**  
Website: www.oatstransit.org  
Contact: Sara Davis  
Address: 2109 Plaza Drive, Harrisonville, MO 64701  
Phone: (816) 380-7433  
Email: sdavis@oatstransit.org  

**General Description**  
OATS has a contract with the City of Blue Springs for transit for the general public.

**Trip Purposes**  
The OATS contract with the City of Blue Springs serves any trip purpose.

**Service Area**  
The service area is within the City of Blue Springs.

**Days and Hours of Service**  
The service operates Tuesday and Thursday from 10:00 AM - 2:00 PM.

**Trip Reservation Policies**  
Trip reservations must be made at least 24 hours in advance.

**Fare**  
The service is provided for $3.00 per one-way trip.

**Method of Operation**  
The service operates in-house.

**Ridership**  
In 2013, the service provided 1,099 one-way trips.

**Fleet Size and Composition**  
The service maintains 76 vehicles within the four-county West region, including contracts with MARC and the City of Lee’s Summit.

**Annual Operating Budget**  
In 2013, the annual operating budget was $13,560.

**Sources of Funding**  
Source of funding include the contract with the City of Blue Springs. Approximately $3,220 was collected from farebox revenue.
Agency: OATS, Inc.
Service: City of Lee’s Summit
Website: www.oatstransit.org
Contact: Sara Davis
Address: 2109 Plaza Drive, Harrisonville, MO 64701
Phone: (816) 380-7433
Email: sdavis@oatstransit.org

General Description
OATS has a contract with the City of Lee’s Summit for transit for the general public.

Trip Purposes
The OATS contract with the City of Lee’s Summit serves any trip purpose.

Service Area
The service area is within the City of Lee’s Summit.

Days and Hours of Service
The service is provided Monday to Friday from 7:00 AM - 3:30 PM.

Trip Reservation Policies
Trip reservations must be made at least 24 hours in advance.

Fare
The service is provided for $2.00 per one-way trip for any trip purpose.

Method of Operation
The service operates in-house.

Ridership
In 2013, the service provided 6,097 one-way trips.

Fleet Size and Composition
The service maintains 76 vehicles within the four-county West region, including contracts with MARC and the City of Blue Springs.

Annual Operating Budget
In 2013, the annual operating budget was $43,590.

Sources of Funding
Source of funding include the contract with the City of Lee’s Summit. Approximately $12,216 was collected from farebox revenue.
Agency: City of Olathe
Service: Taxi Coupon Program
Website: www.olatheks.org/HT/TransportationPrograms/TaxiCouponProgram
Contact: Carroll Ramseyer
Address: 300 N. Chestnut, Olathe, KS 66061
Phone: (913) 971-6273
Email: cramseyer@olatheks.org

General Description
The Taxi Coupon Program provides taxi-based demand responsive service to low-income, elderly and/or disabled citizens for personal, medical, or work-related destinations.

Eligibility Requirements and Application Process
Eligibility requirements differ for the types of coupons. All riders must be residents of the City of Olathe.
- Personal Taxi coupon: elderly (65+) or persons with disabilities
- Work Taxi coupon: low-income or persons with disabilities
- Medical Taxi coupon: elderly persons (65+) with disabilities
- Special Taxi coupon: available to all riders and entitles the rider to a five-minute stop (Coupon is used in conjunction with other ride coupons, allowing the rider to stop for up to five minutes, making a round-trip with a quick stop feasible.)

Applications are accepted throughout the year. Work Taxi coupon riders must provide a copy of their current pay stub to purchase coupons.

Trip Purposes
The Taxi Coupon Program serves trips based on the type of coupon:
- Personal Taxi coupon: any trip purpose
- Work Taxi coupon: work-related trips only
- Medical Taxi coupon: medical appointments only

Service Area
The service area is within the City of Olathe.

Days and Hours of Service
The service operates Monday to Saturday from 6:00 AM - 7:00 PM at a minimum. Taxi companies are required to accept coupons during all operational hours that exceed the minimum service requirements. Currently, 10/10 Taxi lists service hours as 24-hours, year-round. Reduced service may be implemented on holidays.

Trip Reservation Policies
Trips are scheduled by calling the eligible taxi company at least one hour in advance of the trip. Taxi coupon books can be purchased Monday to Friday from 8:00 AM - 4:00 PM.

Fare
All taxi coupon books are $35.00 for ten one-way trips. A maximum of one book per month is permitted for Personal Taxi coupons. A maximum of four books per month is permitted for Work Taxi coupons. A maximum of two books per month is permitted for Medical Taxi coupons. Additional Medical Taxi coupons may be considered with documentation from a medical provider. Special Taxi coupon books are $5.00 each with unlimited books per month.
Method of Operation
The service is operated through a contract with 10/10 Taxi.

Ridership
The service has 450 registered riders. The service provided 42,264 one-way trips.

Fleet Size and Composition
The contractor, 10/10 Taxi, has taxis and wheelchair lift vans available. As part of the contract, the City also provides one wheelchair van that has space for two wheelchairs and 12 additional passengers.

Annual Operating Budget and Funding
The annual operating budget is approximately $600,000. Based on the number of one-way trips provided, the operating cost for the service is $14.20 per trip. Sources of funding include grants from the Federal Transit Administration, including Job Access Reverse Commute (JARC) and New Freedom grants. The City of Olathe provided a 50 percent match for the grants. Other sources include Community Development Block Grant funds and farebox revenue.
ADA Paratransit and Other Demand Responsive Services
City of Olathe, Taxi Coupon Program
Agency: City of Shawnee
Service: CityRide
Website: www.cityofshawnee.org
Contact: Vicki Charlesworth
Address: 11110 Johnson Drive, Shawnee, KS 66203
Phone: (913) 742-6242
Email: vcharlesworth@cityofshawnee.org

General Description
CityRide provides taxi-based demand responsive service to eligible seniors and persons with disabilities.

Eligibility Requirements and Application Process
Eligible riders must be 65 years and older or persons with disabilities. Disability is defined as having a record of a physical or mental impairment that substantially limits one or more major life activities or being regarded as having such impairment as defined by the Americans with Disabilities Act. Residents, who are otherwise ineligible, but who are temporarily disabled and are unable to drive, are also eligible for limited participation. Temporarily disabled residents must provide a physician's letter indicating the duration of the disability and a statement they are unable to drive. Eligible riders must also be residents of the City of Shawnee.

Trip Purposes
CityRide serves any trip purpose.

Service Area
The service area is within the City of Shawnee. Service is also provided to eligible riders to the Shawnee Mission Hospital Complex or the Merriam Nutritional Center at the Irene French Community Center at no additional charge. Passengers are responsible for paying any additional charges for trips outside the service area. The City is considering adding the Mission Transit Center as a location for no additional charge, but the location has not yet been approved.

Days and Hours of Service
The service operates 24-hours daily, including holidays.

Trip Reservation Policies
Trips are scheduled by calling 10/10 Taxi. It is suggested that riders call at least 45 minutes prior to the trip. Riders with a location west of Lackman Road may need to schedule a pick-up time at least one hour in advance. It is suggested that riders call two hours in advance if a wheelchair lift van is required. Vouchers must be purchased at Shawnee City Hall or at the Shawnee Civic Center.

Fare
The service is provided for $2.00 per one-way trip. The City's current agreement with 10/10 Taxi provides for $10.50 taxi services, but requires riders to only pay $2.00 for the service. The City supplements the remaining cost. Riders pay fare using a “credit-card” system.

Method of Operation
The service operates through a contract with 10/10 Taxi. It is operated as a provider-side taxi subsidy service.

Ridership
The service has 272 registered riders. The service provided approximately 5,000 one-way trips.
**Fleet Size and Composition**
The contractor, 10/10 Taxi, has taxis and wheelchair lift vans available.

**Annual Operating Budget and Funding**
The annual operating budget is approximately $45,000. Based on the number of one-way trips provided, the operating cost for the service is $9.00 per trip. Sources of funding include the City general fund and donations from businesses.
Agency: City of Liberty
Service: Liberty Access Bus
Website: www.ci.liberty.mo.us/access
Contact: Mary Narron
Address: 1600 S. Withers Road, Liberty, MO 64069
Phone: (816) 439-4397
Email: mnarron@ci.liberty.mo.us

General Description
The Liberty Access Bus provides demand responsive service for medical and shopping purposes to riders.

Eligibility Requirements and Application Process
Eligible riders must be seniors 60 years or older or persons with disabilities 18-59 years. Eligible riders must be residents of the City of Liberty. Applications may be submitted over the phone. Persons with disabilities must provide documentation of a disability (i.e. SSDI approval letter).

Trip Purposes
The Liberty Access Bus serves essential trips that include medical appointments and trips to pharmacies or grocery stores. Non-essential trips to non-grocery stores are permitted as availability permits.

Service Area
The service area is within the City of Liberty. Once a month, The Liberty Access Bus provides transportation to Walmart (outside the city limits) for a nominal fee of three coupons. An annual trip to the Independence Mall during the holidays may be offered depending on interest for a nominal fee of three coupons.

Days and Hours of Service
The service operates Monday to Friday from 8:30 AM - 4:30 PM.

Trip Reservation Policies
Trips are scheduled up to two weeks in advance for medical appointments. All other trips are scheduled 48 hours in advance.

Fare
The service is provided at no charge for essential trips. A coupon book with ten one-way trips can be purchased for $10.00 for non-essential trips.

Method of Operation
The service operates in-house with city employees.

Ridership
The service has approximately 100 registered riders. Annual ridership was not readily available, but the City explained that some riders use the service once per year while others use the service several times per month.

Fleet Size and Composition
The service maintains three vehicles. All vans are equipped to provide wheelchair accessible services. The part-time vans may be operating at the same time to help provide greater coverage within the service area.

Annual Operating Budget and Funding
The annual operating budget is $134,380. Sources of funding include: Clay County Senior Services, the City of Liberty, farebox revenue, and grants from the Mid-America Regional Council.
General Description
The Omni Bus is a deviated fixed-route with minor deviations for curb-to-curb service within a two-mile radius.

Trip Purposes
The Omni Bus serves any trip purpose. However, common route deviations include doctor’s offices, nursing homes, convalescent/care centers, grocery stores, swimming pools, the Y Shopping Center, and individual homes when possible.

Service Area
The service area is within the City of Excelsior Springs. Some merchants participate in a Ride Share program that provides return transportation from their location, Monday through Friday: Excelsior Springs Hospital, Brown’s Drugs, North American Savings Bank, National Bank of Kansas City, Price Chopper, Red Cross Pharmacy, Walmart, Family Vision, Dr. Craven/Dr. Houck, and Dr. Powell.

Days and Hours of Service
The service operates Monday, Wednesday, and Friday at 9:00 AM, 10:00 AM, 11:00 AM, 1:00 PM, 2:00 PM, and 3:00 PM. Service is not available on holidays. The scheduled stops include: Hall of Waters, Saratoga Towers, Ruey Ann High Rise, Colony Plaza, Excelsior Springs Hospital, Crown Hill Plaza, Walmart, Price Chopper, and Hall of Waters. The service also operates Tuesday and Wednesday from 5:30 PM - 7:00 PM to serve the following locations: Job Corps Center, Mid-Continent Public Library, Crown Hill Plaza, Burger King, McDonald’s, and Price Chopper.

Trip Reservation Policies
Deviation reservations from the fixed-route must be made at least 15 minutes in advance of travel time. No other advance reservation requirements or subscription services are offered.

Fare
The service is provided for $2.00 per one-way trip. Ten card passes are available for $18.00

Method of Operation
The service operates in-house with city employees.

Ridership
The service provides approximately 10,000 trips.

Fleet Size and Composition
The service maintains two ADA compliant 20-passenger buses with one additional spare bus.

Annual Operating Budget and Funding
The annual operating budget is approximately $180,000. Based on the number of one-way trips provided, the operating cost for the service is $18.00 per trip. Sources of funding include 5311 grant from MoDOT and the City’s General Fund.
**Agency:** Platte County Board for the Developmentally Disabled  
**Service:** Transportation for Individuals with Disabilities  
Website: www.pcbsdd.org/transportation  
Contact: Janice Tilman  
Address: 7900 NW 106th Street, Kansas City, MO 64153  
Phone: (816) 891-0990  
Email: janice.tilman@pcbsdd.org

**General Description**  
Platte County Board of Services provides transportation to and from workshops, day habilitation programs, community employment sites, and agency activities for adult citizens of the County that have a developmental disability. The service is provided door-to-door.

**Eligibility Requirements and Application Process**  
Eligible riders must be persons with developmental disabilities. Eligible riders must also be residents of Platte County. The Kansas City Regional Center determines eligibility as a person with a developmental disability for the State of Missouri.

**Trip Purposes**  
Platte County Board of Services provides service to workshops, day habilitation, and community employment sites. As part of the Day Habilitation and Residential programs, vehicles are available during program times for community integration, medical appointments, and other activities.

**Service Area**  
The service area is the Kansas City metropolitan area.

**Days and Hours of Service**  
The service generally operates Monday to Friday during the daytime.

**Trip Reservation Policies**  
Typically, the service is a daily service with specific pick-up and drop-off times. For transportation to employment where the schedule varies, the rider needs to update the schedule with the Transportation Department when the work schedule is available to the employee.

**Fare**  
The service is provided at no charge.

**Method of Operation**  
The service is operated in-house with Platte County Board of Services employees as drivers.

**Ridership**  
The service has 130 registered riders. Annual ridership was not readily available.

**Fleet Size and Composition**  
The service maintains 34 vehicles: 3 sedans, 8 raised roof vans, 5 15-passenger vans, 14 minivans, and 4 lift-equipped vans.

**Annual Operating Budget and Funding**  
The annual operating budget is $900,000. Sources of funding include the Platte County tax levy and grants.
Platte County Board provides service within the Kansas City metropolitan area. Illustrated boundary is approximate.
Agency: Platte County Senior Fund
Service: Transportation for Seniors
Website: platteseniors.org
Contact: Kathy Macken
Address: 11724 NW Plaza Circle, Suite 600, Kansas City, MO 64153
Phone: (816) 270-2800
Email: kmacken@plattesenior.org

General Description
Platte County Senior Fund provides transportation for seniors to medical and essential business appointments.

Eligibility Requirements and Application Process
Eligible riders must be 60 years of age or older and a resident of Platte County.

Trip Purposes
Platte County Senior Fund serves trips to medical, dental, mental health, and essential business appointments. Up to eight trips per month are provided to destinations within the service area. Unlimited rides are provided for dialysis, physical and occupational therapy, cardiac, and chemotherapy patients.

Service Area
The service area is within a 50-mile radius of the Platte County Senior Fund office.

Days and Hours of Service
The service operates Monday to Friday from 6:00 AM - 6:00 PM. Exceptions are made for Saturday dialysis appointments.

Trip Reservation Policies
Trip reservation is available Monday to Friday from 8:00 AM - 3:00 PM. Trips must be requested at least 24 hours in advance. There is no restriction on how far in advance trip requests can be placed. Same day trip request are not permitted. Platte County Senior Fund staff handles trip reservations and scheduling. Staff utilizes a Microsoft CRM database for tracking client services.

Fare
The service is provided for $4.00 per one-way ambulatory trip and $6.00 per one-way wheelchair trip.

Method of Operation
The service operates through contracts with Assisted Transportation, Northland Taxi, and Twin Coach.

Ridership
The service provided 5,746 trips in 2013.

Fleet Size and Composition
All vehicles are owned by the providers under contract. Assisted Transportation operates a fleet of ADA compliant ambulatory minivans, wheelchair lift vans (approximately 50 percent of fleet), wheelchair ramp vans, non-emergency stretcher vehicles, and special event vans or activity buses.

Annual Operating Budget and Funding
In 2013, the annual operating budget was $233,264. Based on the number of one-way trips provided, the operating cost for the service is $40.60 per trip. Sources of funding include the Platte County special fund. The funding is tax based with 5 cents of every $100 of assessed property value set aside for the special fund.
Agency: Clay County Senior Services  
Service: Transportation for Seniors  
Website: www.claycoseniors.org  
Contact: Tina Uridge  
Address: 4444 N. Belleview, Suite 108, Gladstone, MO 64116  
Phone: (816) 595-0087  
Email: tina@claycoseniors.org

General Description  
Clay County Senior Services provides transportation for medical appointments and essential business to seniors.

Eligibility Requirements and Application Process  
Eligible riders must be 60 years or older and live in an independent residence. Eligible riders must be residents of Clay County. Individuals who qualify for Medicaid or Veterans Affairs services are not eligible.

Trip Purposes  
Clay County Senior Services serves trips to medical appointments, essential business for legal or tax purposes, to apply for housing, to attend adult daycare, or to visit a spouse in a nursing home.

Service Area  
The service area is within a 50-mile radius of the rider’s home, establishing a service area of Clay County and up to 50 miles beyond Clay County.

Days and Hours of Service  
The service operates Monday to Friday from 6:00 AM - 5:00 PM.

Trip Reservation Policies  
Trip reservation is available Monday to Friday from 7:00 AM - 6:00 PM. Trips must be requested no later than 12:00 PM the business day before the trip. Online reservations must be requested at least 24 hours in advance and a representative will call to confirm the trip. Riders may use the service up to four round trips per month.

Fare  
The service is provided for $5.00 per one-way ambulatory trip and $10.00 per on-way trip for wheelchair trips.

Method of Operation  
The service operates through a contract with Assisted Transportation. New and existing clients call Assisted Transportation directly to enroll and schedule all appointments.

Ridership  
The service provided 6,128 trips in 2013.

Fleet Size and Composition  
Assisted Transportation operates a fleet of ADA minivans, wheelchair lift vans (approximately 50 percent of fleet), wheelchair ramp vans, non-emergency stretcher vehicles, and special event vans or activity buses.

Annual Operating Budget and Funding  
In 2013, the annual operating budget was $182,783. Based on the number of one-way trips provided, the operating cost for the service is $29.57 per trip. The average operating cost for the service is $27.00 per ambulatory trip and $42.00 for wheelchair trips. Sources of funding include Clay County Senior Services general fund and farebox revenue.
Agency: Developmental Disability Services of Jackson County
Service: EITAS (Empowering Individuals Through Advocacy and Support)
Website: www.eitas.org/services/transportation
Contact: Jake Jacobs
Address: 8511 Hillcrest, Suite 300, Kansas City, MO 64138
Phone: (816) 363-2000
Email: jjacobs@eitas.org

General Description
EITAS provides paratransit transportation to persons with developmental disabilities. As a tax-funded County government sub-division, EITAS is bound by the state statute that created the Boards: Missouri Revised Statutes Chapter 205. Typical transportation is from one’s residence to work or other day services, but a small demand response program for other types of trips is also provided.

Eligibility Requirements and Application Process
Eligible riders must meet be persons with developmental disabilities that meet either or both of the following requirements:
(a) A disability which is attributable to mental retardation, cerebral palsy, autism, epilepsy, a learning disability related to a brain dysfunction or a similar condition found by comprehensive evaluation to be closely related to such conditions, or to require habilitation similar to that required for mentally retarded persons; and a. Which originated before age eighteen; and b. Which can be expected to continue indefinitely;
(b) A developmental disability as defined in section 630.005 of the Missouri Revised Statute

Eligible riders must also be residents of Jackson County. Individuals must apply by contacting the administrative offices for an eligibility determination. Applications must be verified by the Department of Mental Health or a medical professional.

Trip Purposes
EITAS serves trips between home and work/day services.

Service Area
The service area is Jackson County.

Days and Hours of Service
The service operates Monday to Friday from 6:00 AM - 6:00 PM.

Trip Reservation Policies
Routine riders are typically on daily routes that take the rider to work or day services. Demand response riders must call 48 hours in advance of the trip.

Fare
The service is provided at no charge for routine riders. Demand response riders pay $5.00 per round trip.

Method of Operation
The service is managed and operated in-house with EITAS employees as the drivers.
**Ridership**
The service has approximately 450 registered riders. The service typically serves the same 450 registered riders every week. At minimum, the service provided approximately 234,000 trips.

**Fleet Size and Composition**
The service maintains 40 vehicles. The vehicles are primarily 15-20 passenger, ADA accessible buses.

**Annual Operating Budget and Funding**
The annual operating budget is approximately $3.4 million. Based on the number of one-way trips provided, the operating cost for the service is $14.53 per trip. Sources of funding include Jackson County personal property tax levy, Medicaid for those eligible, and MoDOT grants.
Agency: Johnson County
Service: Catch-a-Ride
Website: www.jocogov.org/dept/human-services/accessibility/catch-ride
Contact: Anna Collins
Address: 111 S. Cherry Street, Olathe, KS 66061
Phone: (913) 715-8900
Email: anna.collins@jocogov.org

General Description
Catch-a-Ride is a volunteer driver program that provides general demand responsive service for medical and shopping purposes to eligible riders.

Eligibility Requirements and Application Process
Eligible riders must be adults 60 years or older, persons with disabilities 18 to 59 years, or adults who cannot drive and do not have another means of transportation. Riders must be able to transfer into and out of a vehicle on their own or with limited assistance (hand to elbow).

All new riders are provided with a one-time courtesy ride and are then mailed an application for the program. Any further trip requests will not be accepted until application approval. The approval process may take up to 7 to 10 business days.

Trip Purposes
Catch-a-Ride serves trips to medical appointments, grocery shopping, and social service appointments. Priority is given for medical appointments. Catch-a-Ride volunteer drivers provide hand-on-elbow assistance only. The drivers may carry groceries or packages but they do not enter the home.

Service Area
The service area is generally within Johnson County. Out-of-county trips are scheduled for some medical appointment destinations such as University of Kansas (KU) Medical Center, St. Joseph Hospital, St. Luke’s Hospital, and University of Missouri-Kansas City (UMKC) Dental School. Out of county trips are based on volunteer availability and are not guaranteed.

Days and Hours of Service
The service operates Monday to Friday from 8:00 AM - 5:00 PM, excluding County observed holidays. In the event of inclement weather, rides may be cancelled for safety purposes.

Trip Reservation Policies
Trips must be scheduled at least four business days in advance with the service coordinator during business hours. Trips are scheduled based on driver availability and are not guaranteed to be filled.

Fare
Riders are not required to be income eligible and are not means tested. Johnson County provides basic funding for the program, but riders are asked to make donations. The suggested donation is $3.00 per one-way trip. Riders will not be denied service because they cannot afford to make a donation. Donation letters are mailed bi-monthly to riders.
Method of Operation
The service, administered and managed by the Human Services Department of Johnson County, operates through volunteer drivers. Volunteers must meet the following requirements: at least 25 years or older and possess a valid driver's license, good driving record, and auto insurance. Criminal history checks and driver's license record checks are conducted on all drivers. Volunteers also attend a general orientation training and specific Catch-a-Ride training.

Volunteers have the option of claiming mileage reimbursement. Mileage reimbursement is paid by Johnson County at $0.50 per approved mile. Volunteers also have the option of claiming mileage on income taxes.

Ridership
The service has 177 registered riders. The service averages 50 to 55 round-trip ride requests each week.

Fleet Size and Composition
Volunteer drivers use their own personal vehicle. Most of the volunteer vehicles are sedans with a few SUVs. There are no trucks or wheelchair accessible vehicles. The service currently has 72 volunteers, of which 57 are actively driving.

Annual Operating Budget and Funding
The annual operating budget is $47,000, including volunteer mileage reimbursement and cost of one part-time employee. Based on the number of one-way trips provided, the operating cost for the service is $18.8 per trip. The service is funded through Johnson County government.
Agency: Jewish Family Services  
Service: JET Express and JET Express Plus  
Website: www.jfskc.org  
Contact: Dawn Staton  
Address: 9233 Ward Parkway, Suite 125, Kansas City, MO 64114  
Phone: (913) 327-8239  
Email: dawn@jfskc.org

General Description
JET Express and JET Express Plus are volunteer driver programs whose goal is to help older adults remain active and independent by accessing safe and reliable transportation.

Eligibility Requirements and Application Process
Eligible riders must be 65 years or older, without readily available transportation, able to use a standard, non-accessible automobile (including people who can transfer from a wheelchair to a car seat and have the wheelchair placed in the trunk).

Trip Purposes
JET Express and JET Express Plus serve any trip that “helps older adults with the activities of daily living.” Riders are eligible for up to two round trips per week.

Service Area
The service area is southern Johnson and Jackson Counties. Trips are limited to 30 miles round-trip.

Days and Hours of Service
The service operates Sunday to Thursday from 8:00 AM - 9:00 PM and Friday to Saturday from 8:00 AM - 10:00 PM.

Trip Reservation Policies
Trips must be scheduled at least five business days in advance. Medical trips can be scheduled the same day.

Fare
For JET Express, the service is provided for $5.00 per one-way trip. Fare can be reduced to $2.50 for financial hardship exceptions. For JET Express Plus, the service is provided for $10.00 per one-way trip. Fare can be reduced to $5.00 for financial hardship exceptions.

Method of Operation
The service operates through volunteer drivers. Volunteers have flexible time commitment and receive a 33 cents per mile reimbursement.

Ridership
The service provides riders for approximately 200 riders (shared between JET Express and JET Express Plus), resulting in approximately 2,000 trips per year.

Fleet Size and Composition
Volunteer drivers use their own personal vehicle. JET Express Plus maintains one minivan.

Annual Operating Budget:
The annual operating budget is approximately $128,000 (shared between JET Express and JET Express Plus).

Sources of Funding
Sources of funding include private funds as well as limited public funds.
ADA Paratransit and Other Demand Responsive Services
Jewish Family Services, JET Express and JET Express Plus

JET Express and JET Express Plus serve southern Jackson and Johnson Counties. Illustrated boundary is approximate.
APPENDIX B
Mobility Advisory Committee
Meeting Notes
OPEN MEETING NOTICE

Mobility Advisory Committee

Jim Courtney, Chair
Sara Davis, Vice-Chair

There will be a meeting of the Mobility Advisory Committee, Wednesday, October 29, 2014 at 9:00 AM in the Westview Room of the Mid-America Regional Council on the 2nd Floor of the Rivergate Building, 600 Broadway, Kansas City, MO. This meeting is to serve as the first stakeholder meeting of the regional mobility management study.

AGENDA

1. Welcome and Introductions
2. Overview of the Study
3. Information about Current Services
   a. Data Collected to Date
   b. Presentations by Service Representatives
4. Discussion of Current Regional Services
   a. Strengths
   b. Challenges
5. Opportunities for Coordination
   a. Awareness and Understanding of Services
   b. Access to Services
   c. Regional Travel
   d. Other
6. Next Steps

Getting to MARC: Information on transportation options to the MARC offices, including directions, parking, transit, carpooling, and bicycling, can be found online. If driving, visitors and guests should enter the Rivergate Center parking lot from Broadway and park on the upper level of the garage. An entrance directly into the conference area is available from this level.

Parking: Free parking is available when visiting MARC. Visitors and guests should park on the upper level of the garage. To enter this level from Broadway, turn west into the Rivergate Center parking lot. Please use any of the available spaces on the upper level at the top of the ramp.

Special Accommodations: Please notify the Mid-America Regional Council at (816) 474-4240 at least 48 hours in advance if you require special accommodations to attend this meeting (i.e., qualified interpreter, large print, reader, hearing assistance). We will make every effort to meet reasonable requests.

MARC programs may not discriminate against anyone on the basis of race, color or national origin, according to Title VI of the Civil Rights Act of 1964. For more information or to obtain a Title VI Complaint Form, see http://marc.org/Transportation/Equity/Programs/Title-VI or call 816-474-4240.
Meeting Summary for October 29, 2014

Co-Chairs
Jim Courtney, Mr. Goodcents Foundation

Attendees
Pete Henschke, Johnson County Transit
Mary Hunt, City of Independence
Irvin Jackson, Unified Government Transit
Carrol Ramseyer, City of Olathe
Jake Jacobs, EITAS
Dawn Staton, Jewish Family Services
Charlotte Melson, ITN Kansas City
Bill George, KCTG
Terry O’Toole, KCTG
Larry Hicks, KU Medical Center
Linda Redford, KU Medical Center
Nicole Palmer, KU Medical Center
Tanya Bishop, KU Medical Center
Kelvin Owens, Truman Medical Center
Linda Sharp, Truman Medical Center
Patrick Palmer, The Whole Person
Sheila Styron, The Whole Person
Barbara Koirtyohann, Truman Heartland Community Foundation
Phil Hanson, Truman Heartland Community Foundation
Andres Domínguez, Health Care Foundation of Greater Kansas City
Cindy Laufer, Midwest Center for Nonprofit Leadership
Dan Goodman, Johnson County Area Agency on Aging
Jim Huffman, Concerned Care Inc.
Susie Haake, Kansas City CARE Clinic
Mark Green, Kansas City Foot and Ankle
Jon Moore, Olsson Associates
Mark Swope, Olsson Associates

KCATA Staff
Jameson Auten
Lisa Womack
Lewis Lowry
Donna Brown

MARC Staff
Karen Clawson
Cathy Boyer-Shesol

TranSystems Staff
Russell Thatcher
Deanne Petersen
Sara Clark
1. Welcome and Introductions
Jim Courtney (Mr. Goodcents Foundation) opened the meeting with a brief history of the development of the Mobility Advisory Committee. All attendees were introduced. Minutes from the previous meeting will be reviewed and adopted at a future meeting.

2. Overview of the Study
Jameson Auten (KCATA) provided an introduction to the meeting purpose. He stated that he was pleased that the room was full and that there is enthusiasm for a system that helps provides services to access all trip purposes for all riders in the region. He indicated that the Regional Transit Coordinating Council was formed with the intent to improve transit in the region. It started with the fixed-route system but evolved into a discussion of how to provide comprehensive services. They took a snapshot of all the current services and the difficulty of using the system. Therefore, an effort was undertaken to develop a plan to identify actionable ways to improve access for customers. The goal is to develop a local plan of action to better coordinate services.

Russell Thatcher (TranSystems) provided an introduction to the study team. He indicated that the high level of attendance at the meeting is beneficial to the study. He indicated the main reason for the meeting is to get feedback from attendees on the issues with services and opportunities for improved coordination.

3. Information about Current Services
Russell Thatcher (TranSystems) began the slide show with an introduction to the study scope.

**Question: Who are the members of the Mobility Advisory Committee (MAC)?**
Jim Courtney (Mr. Goodcents Foundation) stated that membership has not yet been finalized but there will be 20 members and 20 alternates. The membership will be announced at the December meeting. Russell Thatcher (TranSystems) reiterated that at this meeting, consensus of all attendees is desired to help guide the study forward.

There are four categories of services in the region: ADA Paratransit required by regulation with related non-ADA services, agency/municipal services, Senate Bill services, and volunteer-based services. Issues were preliminarily identified through data collection. Possible coordination options were preliminarily identified through matching the services researched with nationally known methods and efficiencies.

**Comment:** There is another service called MetroFlex provided by KCATA that is a curb-to-curb demand responsive service. This is available in Raytown. (Charlotte Melson, ITN Kansas City)

**Comment:** In Clay County, programs may have their own fleet of vehicles that provide services to developmentally disabled individuals that are funded by the Senate Bill.

4. Discussion of Current Regional Services
Kansas City Area Transportation Authority (KCATA): KCATA provided an overview of Share-a-Fare services. The most important part of the service is getting the customer to their destination on time. There is a need to get customers to destinations in other areas where they do not provide service. A great opportunity would be a single call center for customers to use. A coordination challenge is that agencies use different scheduling software and they would like to better understand the cost of syncing up software and determine a fair way to allocate cost. Issue is customer identification of vehicles and the opportunity may be the regional branding effort applied to these vehicles. Regional
eligibility is underway and anticipated to be launched in early 2015. Regional travel training is available but underutilized. (Lewis Lowry and Jameson Auten)

Comment: Share-a-Fare is a help to program participants and the regional concept will create a great opportunity for program participants (Jim Huffman, Concerned Care Inc.)

Johnson County Transit (JCT): JCT provided an overview of their services based on the information in the handout. The service is relatively low cost with an easy application process available online. Their biggest challenge is that demand exceeds their capacity (deny about 100 trips per month). An opportunity would be to provide additional services by extending their service area based on development and growth in the County. One issue reported by customers is that they cannot get to desired destinations (i.e. airport). (Pete Henschke)

JCT and KCATA management of services will merge. Services will not change but the management of the services will be consolidated. Policy decisions will remain with the County. Staff sees this as an improvement and the first step. There may be opportunities into the future to combine call centers and operations.

Question: What is the difference between Special Edition and SWIFT?
SWIFT is a service dedicated to program participants with Johnson County Developmental Services.

Question: Is there reciprocity for ADA services for Share-a-Fare?
Yes, if a person is eligible in another place (i.e. out of town and here for vacation) they are eligible to ride ADA services in this region.

Question: How is capacity defined for JCT?
Capacity is defined by budget requirements. The increase in age requirement for JCT is one way to reduce demand but it is also to bring the age in line with other regulations and providers in the region.

City of Independence: While their service area is defined by regulation they do, by policy, provide service city-wide. City contracts with KCATA to provide paratransit service in the small required area southwest of the city limits. Fare is low because they have made many changes and did not want to add any other changes to customers; however, as more regional services are considered, an increase in fare may be necessary. Free rides on fixed-routes for ADA-eligible riders are stressing their fixed-route service but it is lessening cost for paratransit. Challenges are changing demographics, non-dedicated funding, and managing rider expectations and how changes will impact their lives. Opportunities exist in willingness to compromise. (Mary Hunt)

Comment: A true issue is that service hours are limited in areas outside of Kansas City, Missouri.

Unified Government Transit (UGT): Demand Response has grown and seen the need to increase hours and service because when riders turn 60 they will transfer from Dial-a-Ride to Demand Response because the fare is $1.00 versus $3.00. Service extends 3/4 of a mile into Johnson County but they are getting requests to go farther into Johnson County. GPS provides added service to customers so that they can identify idle vehicles and move vehicles to customers faster. (Irvin Jackson)
OATS: OATS was unable to attend but a handout was provided outlining their services, issues, and opportunities.

Comment: OATS has several limitations in their services depending on where the customer resides (i.e. eligibility, cannot bring child).

Comment: There is a desire for more data on number of people served not just number of trips.

City of Olathe: Taxi Coupon program was developed in 1977. It includes three programs: work-related trips, medical trips, personal trips (riders could be eligible for all programs). In response to budget restraints, they have identified group trips. Due to their contract with 10/10 Taxi, their customers can take trips 24 hours a day and the customer can work with driver to pay for additional length of trip if a trip goes outside the City of Olathe. Olathe is door-to-door while JCT is curb-to-curb. Olathe will be increasing eligibility age to 65 because Section 5310 funds are now only able to be used with participants 65 and older. Olathe funding is from the Federal Transit Administration, Community Development Block Grant, and general fund. Current grants are 50/50 match. They have issues with expanding geography, for instance Gardner has a dialysis center and DeSoto has a need for service. Olathe sees opportunities with a one-call center and ways to work with smaller, community-based organizations. (Carroll Ramseyer)

City of Shawnee: Eligibility will be increased to 65 on January 1. Funding is primarily from general fund but have fare recovery around 15-20 percent. Riders have a “debit” card that can be swiped in vehicle and provide rider a balance. Riders can negotiate with driver for additional miles on trip. There is a committee that provides oversight to the program and what it is trying to achieve. Technology is allowing them to better understand where riders are going. They are considering adding the Mission Transit Center outside of the city as an approved destination to allow riders to gain access to more regular fixed-route transit. A current challenge is with expansion of the aging population and changing demographics that has recently increased the number of riders. An opportunity that they have identified is to add an option for business to check a box to donate to CityRide when they apply for a business license.

Comment: Using a card-based system would be beneficial to riders and has been a suggestion provided by riders during other forums.

Comment: Olathe and Shawnee are beginning to target businesses with frequent riders to ask for assistance with funding.

City of Liberty: Could not attend.

City of Excelsior Springs: Could not attend.

Comment: There are numerous limitations in their service.

Platte County Board: They are a funding source and a program transportation provider. There have been no formal discussions with OATS to coordinate services. Their limitations include geography and hours of operation. There is limited fixed-route services in the area so ADA services are not available. Their vehicles are utilized by programs during other hours.

Comment: In every county, there are still cities that are not served at all, other than Medicaid.
Comment: Separate data for ambulatory from non-ambulatory. This is important for vehicle demand or vehicle funding.

Question: What is more expensive? Is developing a more comprehensive fixed-route service a more cost-effective investment?
Fixed-route would be expensive in low-density areas.

Question: Are there any plans in cities like Blue Springs, Liberty, etc. to provide more funding for paratransit services?
Yes, there is a constant effort to dialogue with communities in the region to discuss transportation issues, primarily at the community’s request.

Clay County Board: Could not attend

Jackson County Board: Every county is different even though they are operated under the same state statute. There is limited hours but have some charters. They have recently initiated an advance call program for medical trips and personal trips with a charge. Their regular routes have no fare so coordination will be complicated if a fare is charged. There is a waiting list. (Jake Jacobs)

Johnson County Catch-a-Ride: Started within the Area Agency on Aging but has now transitioned to Johnson County Human Services department. It now serves, to the extent it can, a greater population with door-to-door service. Its greatest strength but greatest weakness is that it is volunteer based. Because volunteers use their own vehicles, customers that use adaptive equipment cannot find rides. (Dan Goodman)

Jewish Family Services: JET Express started in 2008 providing rides in both states for medical rides. The service area is 30 miles from riders home for medical ride with driver reimbursement of 33 cents per mile as an incentive to keep drivers. Riders are charged $5.00 for volunteer trip but can be subsidized. They are only able to provide ambulatory rides unless non-ambulatory riders can get themselves in/out of vehicle. They now have a van with three paid staff. They have 200 riders and give 2000 annual rides. Their greatest challenge is finding volunteers. Their opportunities are that they work with agencies to do what they can to assist participants. They don’t market the program because they fluctuate in the number of rides available each month. (Dawn Staton)

ITN Greater Kansas City: Volunteer-based service in Lee’s Summit, initially. There must be at least fifteen trained drivers before they will begin service. Average ride cost is $6.00 one-way for rider. Rider is billed monthly so no cash changes hands. The service received a New Freedom grant for wheelchair trips and are working with OATS to provide that service. Ride sponsorship by business allows a business to pay for rides to their location. Challenge is identifying volunteers and volunteers with flexible schedules. Branding and marketing is a need because they are getting calls from riders that need services but do not know what is available. (Charlotte Melson)

5. Issues and Opportunities for Coordination
While participants were outlining their services, a list was recorded to summarize the challenges and opportunities discussed. The number of times the challenge or opportunity was mentioned was tallied and is displayed in the Frequency column.
<table>
<thead>
<tr>
<th>Challenges</th>
<th>Frequency</th>
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<tbody>
<tr>
<td>Regional travel (i.e. service boundaries, accessing commuter routes, eligibility)</td>
<td>6</td>
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<tr>
<td>Demand exceeds financial capacity</td>
<td>5</td>
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<tr>
<td>Non-dedicated funding</td>
<td>5</td>
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<tr>
<td>Limitations with services (i.e. trip purpose, passengers, coordination opportunities)</td>
<td>3</td>
</tr>
<tr>
<td>Volunteer drivers and limitations with personal vehicles</td>
<td>3</td>
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<tr>
<td>Changing demographics</td>
<td>2</td>
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<tr>
<td>Trip fare</td>
<td>2</td>
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<tr>
<td>Marketing and awareness</td>
<td>2</td>
</tr>
<tr>
<td>Service hours (nights, weekends)</td>
<td>1</td>
</tr>
<tr>
<td>Rider expectations</td>
<td>1</td>
</tr>
<tr>
<td>Fleet (i.e. parking, maintenance)</td>
<td>1</td>
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<tr>
<td>Driver training</td>
<td>1</td>
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<tr>
<td>Cost effective options</td>
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<tr>
<td>Statutory requirements</td>
<td>1</td>
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<tr>
<td>Driver assistance (i.e. curb-to-curb, door-to-door, through door)</td>
<td>1</td>
</tr>
<tr>
<td>Data for number of trips vs. number of riders served</td>
<td>1</td>
</tr>
<tr>
<td>Data for ambulatory riders vs. non-ambulatory riders (i.e. fleet composition, funding)</td>
<td>1</td>
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</table>

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Frequency</th>
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</thead>
<tbody>
<tr>
<td>Service areas (i.e. expand boundaries, underserved areas)</td>
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<tr>
<td>Technology (i.e. software, GPS systems, card-based fare systems)</td>
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<tr>
<td>Regional call center</td>
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<tr>
<td>Increase efficiency</td>
<td>4</td>
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<tr>
<td>Willingness to cooperate among large and small operations</td>
<td>4</td>
</tr>
<tr>
<td>Eligibility requirements</td>
<td>4</td>
</tr>
<tr>
<td>Funding opportunities (i.e. ride sponsorship, funding from private businesses)</td>
<td>3</td>
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<tr>
<td>Regional branding</td>
<td>2</td>
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<tr>
<td>Cost allocation</td>
<td>1</td>
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<tr>
<td>Combined management</td>
<td>1</td>
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<tr>
<td>Integrated services</td>
<td>1</td>
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<tr>
<td>Work with contractors (i.e. allocate designated drivers, familiarity with riders)</td>
<td>1</td>
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<tr>
<td>Organize group trips</td>
<td>1</td>
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</tbody>
</table>

6. **Next Steps**

Russell Thatcher (TranSystems) closed the meeting by briefly summarizing the issues and opportunities discussed. Next meeting of the committee will be the second week of December. The committee will also likely convene in January to participate in the second stakeholder session for the study.
OPEN MEETING NOTICE

Mobility Advisory Committee

Jim Courtney, Chair
Sara Davis, Vice-Chair

There will be a meeting of the Mobility Advisory Committee, Wednesday, February 11, 2015 at 9:00 AM in the Board Room of the Mid-America Regional Council on the 2nd Floor of the Rivergate Building, 600 Broadway, Kansas City, MO. This meeting is to serve as the second stakeholder meeting of the regional coordination study.

AGENDA

1. Welcome and Introductions
2. MAC Membership Update – Tyler Means, MARC
3. Section 5310 Program Update – Tyler Means, MARC
4. Second Coordination Study Stakeholder Meeting – TranSystems
   a. Review of Study Purpose and Objectives
   b. Work Performed to Date
   c. Overview of Current Paratransit and Demand Response Services
   d. Possible Coordination Options
   e. Identification of Short-term Priority Coordination Options
   f. Next Steps
5. Other Business

Getting to MARC: Information on transportation options to the MARC offices, including directions, parking, transit, carpooling, and bicycling, can be found online. If driving, visitors and guests should enter the Rivergate Center parking lot from Broadway and park on the upper level of the garage. An entrance directly into the conference area is available from this level.

Parking: Free parking is available when visiting MARC. Visitors and guests should park on the upper level of the garage. To enter this level from Broadway, turn west into the Rivergate Center parking lot. Please use any of the available spaces on the upper level at the top of the ramp.

Special Accommodations: Please notify the Mid-America Regional Council at (816) 474-4240 at least 48 hours in advance if you require special accommodations to attend this meeting (i.e., qualified interpreter, large print, reader, hearing assistance). We will make every effort to meet reasonable requests.

MARC programs may not discriminate against anyone on the basis of race, color or national origin, according to Title VI of the Civil Rights Act of 1964. For more information or to obtain a Title VI Complaint Form, see http://marc.org/Transportation/Equity/Programs/Title-VI or call 816-474-4240.
**MOBILITY ADVISORY COMMITTEE**

Meeting Summary for February 11, 2015

**ATTENDANCE**

<table>
<thead>
<tr>
<th>Co-Chair</th>
<th>KCATA Staff</th>
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<tbody>
<tr>
<td>Jim Courtney, Mr. Goodcents Foundation</td>
<td>Jameson Auten</td>
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<tr>
<td>Sara Davis, OATS</td>
<td>Lisa Womack</td>
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<td>Lewis Lowry</td>
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<td>Margaret Brown</td>
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<td>Shawn Strate (JCT)</td>
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<table>
<thead>
<tr>
<th>Attendees</th>
<th>MARC Staff</th>
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<tbody>
<tr>
<td>Mary Hunt, City of Independence</td>
<td>Tyler Means</td>
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<td>Irvin Jackson, Unified Government Transit</td>
<td>Karen Clawson</td>
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<td>Meg Conger, City of Kansas City Missouri</td>
<td>Whitney Morgan</td>
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<td>Carroll Ramseyer, City of Olathe</td>
<td>Cathy Boyer-Shesol</td>
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<td>Stephen Powell, City of Shawnee</td>
<td>Jacquelyn Moore</td>
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<td>LeAnn Lawler, City of Liberty</td>
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<tr>
<td>Charlotte Melson, City of Raytown</td>
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<td>John Benson, City of Raytown</td>
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<td>Justin Wieberg, City of Pleasant Hill</td>
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<tr>
<td>Jake Jacobs, EITAS</td>
<td>TranSystems Staff</td>
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<tr>
<td>Marilyn Bell, Johnson County</td>
<td>Russell Thatcher</td>
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<td>Tina Uridge, Clay County Senior Services</td>
<td>Deanne Petersen</td>
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<td>Christine Hardison, Platte County Board of Services</td>
<td>Sara Clark</td>
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<td>Dawn Staton, Jewish Family Services</td>
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<td>Veronica Wynn, MTM</td>
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<td>Jenny Jones, MTM</td>
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<td>Teresa Wolken, KCTG</td>
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<td>Terry O'Toole, KCTG</td>
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<td>Jane Johns, KU Medical Center</td>
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<td>Barbara Koirtyohann, Truman Heartland Community Foundation</td>
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<td>Phillip Hanson, Truman Heartland Community Foundation</td>
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<td>Linda Sharp, Truman Medical Center</td>
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<td>Kelvin Owens, Truman Medical Center</td>
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<td>Patrick Palmer, The Whole Person</td>
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<td>Sheila Styron, The Whole Person</td>
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<td>Jim Huffman, Concerned Care Inc.</td>
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<td>Amy Wright, Coalition for Independence</td>
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<td>Yuri Van Dierendonck, Kansas City Veterans Administration</td>
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<td>Janet Rogers, Transit Action Network</td>
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<td>Kite Singleton, Kansas City Regional Transit Alliance</td>
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<td>Kim Green, Full Employment Council</td>
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<td>Jon Moore, Olsson Associates</td>
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<td>Mark Swope, Olsson Associates</td>
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<td>Tamara Klein, Olsson Associates</td>
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<td>Allan Zafft, CDM Smith</td>
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1. Welcome and Introductions

Jim Courtney (Mr. Goodcents Foundation) welcomed the committee members and attendees to the meeting. The attendees made introductions and were asked to sign the attendance sheet.

2. MAC Membership Update

Tyler Means (MARC) presented on the MAC membership structure. The representative groups that will form the membership and administrative details were discussed including specific task forces. The committee will present new by-laws at the next MAC meeting for adoption.

3. Section 5310 Program Update

Tyler Means presented the Section 5310 Program funding recommendations. The schedule for programming funds, background information, and amounts of funding were presented. The Mobility Management Vision was reviewed and information presented on how the vision helped to define the funding recommendations. A total of 26 applications for funding were received for the $4.6 million available. He reviewed the prioritization exercise completed by the MAC and the resulting list of projects ranked by the committee score. A review of the future steps for concluding the funding recommendation cycle was made.

4. Second Coordination Study Stakeholder Meeting

Jameson Auten (KCATA) introduced the next item on the coordination study. He introduced Russell Thatcher (TranSystems) who will present the information to the committee. Russell Thatcher provided a brief overview of the project purpose and reviewed the schedule. He stated that the objective of the meeting is to review the coordination options and narrow the list of options to a set of committee priorities. For each of the options, existing conditions and possible options were presented.

Coordination of ADA Paratransit Services

This area of coordination focuses on the federally mandated ADA service provided by three agencies in the region: KCATA, Unified Government Transit, and IndeBus. There is overlap of services due to the location of the fixed-route services provided by these agencies. Two options were presented including coordination of trip reservation and scheduling and coordination of service delivery. These options could happen sequentially.

Question: Would this increase the time passengers remain on the vehicle?

Trip time should not be affected because of the parameters used to develop the trip plan for each passenger. Jameson Auten added that the higher density of trips may make trips more efficient.

Question: Would a one-click/one-call center encompass ADA services?

The one-click/one-call center is an information and referral line but may not necessarily be the scheduling center. Tyler Means indicated that call forwarding is currently available from some services.

Coordination of Other Demand Response Services

This area of coordination focuses on the several agencies providing other demand response services, some of which have overlapping service boundaries. There are currently some coordination activities including KCATA managing Johnson County Transit, KCATA-Johnson County Transit coordination with local City of Olathe trips, and city/county service provided by OATS. Options include improving public awareness and increasing service.
Question: How will Johnson County Transit’s Special Edition be incorporated since they only allow county residents to ride?
Cost allocation will be an important component of drafting an implementation plan for coordinated services.

Question: What are the low cost services?
Services provided in the counties by OATS are very efficient. Many cities are efficient because overhead or administrative services are donated in-kind or absorbed in other budgets.

Question: Will there be any coordination between ADA and demand response services? How will people from Johnson County be integrated?
The vision for Johnson County Transit services is to integrate it with KCATA, but that will be determined as the management structure is refined further. Jameson Auten added that even with the consolidation, Johnson County remains the decision-making entity for policy issues such as residency requirements. It likely would not be financially feasible to incorporate some of the city/county services.

Coordination of Agency-specific Services
This area of coordination focuses on the agency-specific services in areas where there is a targeted need. Options for coordination include improved public awareness, expanded travel training, and vehicle sharing.

No comments or questions.

Volunteer Driver Programs
This area of coordination focuses on the three volunteer services described in the memo; however, only two of the three are currently operating as ITN Kansas City has recently ceased operations. Volunteers are highly prized by organizations but coordinating recruitment may be an option. Volunteers can be ambassadors to assist passengers with fixed-route services or placed at transit centers to assist with transfers.

Comment: There is a volunteer service for seniors in Clay County through the Northland Shepherd’s Center. Shepherd’s Center in Midtown does senior meal delivery. Shepherd’s Center in Raytown provides Wheels to Care and Meals on Wheels.
The study team will look into incorporating these services into the memo and study.

Comment: The best practices for volunteer services in the memo were very helpful and provided ideas that have not been discussed at the MAC in the past.

Regional Eligibility Determination
This area of coordination focuses on possible coordination between eligibility determination and the application process. Background on how eligibility is determined was discussed. KCATA is working with Unified Government Transit to conduct their eligibility determination. First Transit conducts eligibility determination for Independence. OATS does eligibility in-house but allows for use of all of their provided services. Options include more regional eligibility partners, providing a single location to go to for eligibility, or creating a mobility center for more broader mobility management services.
Question: Seems like some of the ideas discussed are duplicative. For instance, if traveling to a different city you can be a visitor under your current eligibility. For longer-term, you would need to have eligibility for all agencies. Visitor status is only for 21 days.

Comment: IndeBus honors ADA eligibility from KCATA.

Expanded Travel Training
This area of coordination focuses on the travel training and in-person assessments conducted by MTM and others providing training for their services. Options include linking eligibility with travel training, providing group training, expansion of free fare for fixed-route service, and assessment of trip accessibility (passengers are less likely to take a trip to a new location if they are unaware of the barriers of the location).

No comments or questions.

Expanded Information and Referral Services (One-Call/One-Click Services)
This area of coordination focuses on the currently separate services for one-click and one-call along with trip planning services at the KCATA customer service line. The options presented were supporting the integration of the one-click (Link for Care) and one-call (Care Connection) services, which will be occurring in the short term, and further linking this with KCATA customer service.

Comment: The two organizations have entered into an agreement to combine their service.

Question: Will the one-call/one-click be staffed by “real” people or an automated services? This will be operated by staff with the Ride KC brand.

Question: Could a confirmation number be included? This could be used with a smartphone app to see when a ride would be available. This is not the information that is being discussed but that could be included in other options. However, it is difficult or provide real-time ride confirmation because the assignment of a passenger to a certain vehicle or manifest is very dynamic. A confirmation number would be more easily integrated into the reservation/cancellation of service based on smart technology.

Comment: Many passengers have limited income and no access to smartphones or internet. If those things are prioritized, the issues such as technology limitations will be covered in the implementation plan. Public library staff is currently trained for assisting with transportation and that would be expanded if these options were selected.

Questions: Two-clicks, two-calls. Is there a way to integrate the public information and scheduling/reservation activities into one-click and one-call? Link for Care/Care Connection has a broader impact than just transportation so completely combining it with KCATA would not cover all the services.

Comment: The integrated one-call/one-click center is fully intended to have links to KCATA. Every provider has links but in the same way that Link for Care has twelve different service categories. Link for Care has encompassed all transportation options beyond public transportation.

Comment: When someone calls the KCATA call center, the operators can recommend or use Link for Care to identify other options.
Improved Public Information Services
This area of coordination focuses on coordination with the regional transit brand, RideKC. Options are including paratransit and demand responsive services into the branding effort, developing a regional guidebook, broader dissemination of materials, and establishing the MAC as a forum for information sharing and community feedback.

No comments or questions.

Regional Electronic Fare Payment
This area of coordination focuses on fare payment options. Current ADA services are cash-based but other services have other payment types like coupons, debit cards, passenger accounts, etc. There is a parallel study for regional fare payment. Options would be to include paratransit with the regional fare payment and a universal ID used for fare payment.

No comments or questions.

Identification of Priority Coordination Options
After all nine of the areas for coordination and subsequent options were presented, meeting attendees were asked to rank their 1st, 2nd, and 3rd priority. The results of the exercise resulted in the following weighted ranking:

<table>
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<tr>
<th>Area of Coordination</th>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
<th>Score</th>
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<tbody>
<tr>
<td>A. Coordination of ADA Services</td>
<td>20</td>
<td>4</td>
<td>9</td>
<td>77</td>
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<tr>
<td>B. Coordination of Demand Response Services</td>
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<td>7</td>
<td>4</td>
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<tr>
<td>C. Coordination of Agency-Specific Services</td>
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<td>4</td>
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<td>D. Expand Volunteer Driver Programs</td>
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<td>10</td>
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<tr>
<td>E. Regional Eligibility Determination</td>
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<td>7</td>
<td>5</td>
<td>37</td>
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<tr>
<td>F. Expand Travel Training</td>
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<td>4</td>
<td>2</td>
<td>10</td>
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<tr>
<td>G. Expand Information and Referral Services (One-Call/One-Click)</td>
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<td>8</td>
<td>7</td>
<td>35</td>
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<td>H. Improve Public Information</td>
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<td>I. Implementation of Advanced Technology</td>
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</tbody>
</table>

The final report will include all coordination activities but more detailed implementation for the top ranked activities.

Comment: Fare payment could be tied to eligibility, which was top ranked, so that could be integrated into that option.

Question: When we talk about short-term implementation, what is the timeframe?
The report will be completed by this summer but implementation would take between 2-3 years for these activities.
Comment: The activities are real and do overlap. The one-click service has been of great benefit for VA patients to find options for transportation. Putting it in one location, under one roof, cuts down on overhead costs and streamlines the process. One standard to go by is helpful to users.

Comment: If you are going to have a physical location for eligibility, it would be beneficial for it to be expanded to a place where there is information on other benefits for the public.

Next steps will be to post the presentation online and provide a meeting summary. Any additional comments should be sent to Tyler Means.

5. Other Business
No other new business was identified. Jim Courtney thanked the audience for attending and adjourned the meeting.
OPEN MEETING NOTICE

Mobility Advisory Committee

Jim Courtney, Chair
Sara Davis, Vice-Chair

There will be a meeting of the Mobility Advisory Committee, Wednesday, October 29, 2014 at 9:00 AM in the Westview Room of the Mid-America Regional Council on the 2nd Floor of the Rivergate Building, 600 Broadway, Kansas City, MO. This meeting is to serve as the first stakeholder meeting of the regional mobility management study.

AGENDA

1. Welcome and Introductions
2. MAC Membership and Bylaws Update – Tyler Means, MARC
3. Section 5310 Program Update – Tyler Means, MARC
4. Third Coordination Study Stakeholder Meeting – TranSystems
5. Other Business

Getting to MARC: Information on transportation options to the MARC offices, including directions, parking, transit, carpooling, and bicycling, can be found online. If driving, visitors and guests should enter the Rivergate Center parking lot from Broadway and park on the upper level of the garage. An entrance directly into the conference area is available from this level.

Parking: Free parking is available when visiting MARC. Visitors and guests should park on the upper level of the garage. To enter this level from Broadway, turn west into the Rivergate Center parking lot. Please use any of the available spaces on the upper level at the top of the ramp.

Special Accommodations: Please notify the Mid-America Regional Council at (816) 474-4240 at least 48 hours in advance if you require special accommodations to attend this meeting (i.e., qualified interpreter, large print, reader, hearing assistance). We will make every effort to meet reasonable requests.

MARC programs may not discriminate against anyone on the basis of race, color or national origin, according to Title VI of the Civil Rights Act of 1964. For more information or to obtain a Title VI Complaint Form, see http://marc.org/Transportation/Equity/Programs/Title-VI or call 816-474-4240.
MOBILITY ADVISORY COMMITTEE

Meeting Summary for April 23, 2015

ATTENDANCE

Co-Chair
Jim Courtney, Mr. Goodcents Foundation
Sara Davis, OATS

Attendees
Mary Hunt, City of Independence
Marcie Gragg, City of Independence City Council
Irvin Jackson, Unified Government Transit
Carroll Ramseyer, City of Olathe
Stephen Powell, City of Shawnee
Christine Hardison, Platte County Board of Services
Tina Uridge, Clay County Senior Services
Jerry Nolte, Clay County Presiding Commissioner
Bob Rice, EITAS
Dawn Staton, Jewish Family Services
Terry O'Toole, KCTG
Jane Johns, KU Medical Center
Phillip Hanson, Truman Heartland Community Foundation
Sheila Styron, The Whole Person
Patrick Palmer, The Whole Person
John Whalex, Concerned Care, Inc.
Jim Huffman, Concerned Care Inc.
Kelvin Owens, Truman Medical Center
Amy Wright, Coalition for Independence
Stephen Glassner, Coalition for Independence
Matthew Ramset, Coalition for Independence
Clay Berry, Alphapointe
Yuri Van Dierendonck, Kansas City Veterans Administration
Kim Green, Full Employment Council
Tamara Klein, Olsson Associates

KCATA Staff
Jameson Auten
Kristen Emmendorfer
Lisa Womack
Donna Brown
Margaret Brown
Shawn Strate (JCT)

MARC Staff
Tyler Means
Karen Clawson
Martin Rivarola
Jacquelyn Moore

TransSystems Staff
Russell Thatcher
Deanne Petersen
Sara Clark
1. Welcome and Introductions
Jim Courtney (Mr. Goodcents Foundation) welcomed the attendees to the meeting. The attendees made introductions and were asked to sign the attendance sheet.

2. MAC Membership and Bylaws Update
Tyler Means (MARC) presented on the MAC membership structure and proposed bylaws. The bylaws will be presented at the next MAC meeting for adoption. Further comments and edits should be directed to Tyler Means. Tyler also discussed the concept of two task forces:
   1. A task force of riders to communicate challenges and opportunities to providers
   2. A task force of members to assist with “packaging” the message for policymakers

3. Section 5310 Program Update
Tyler Means (MARC) presented the Section 5310 Program funding recommendations that have been now approved by the Regional Transit Coordinating Council (RTCC) and Total Transportation Policy Committee (TTPC). Jewish Family Services, which originally requested funds for a vehicle, was able to fulfill the request via a grant. As a result, the funding set aside for Jewish Family Services was redistributed to the other selected recipients that had not been granted full funding.

Jameson Auten (KCATA) mentioned that they will need to begin drafting an RFP for the Taxi Voucher pilot program. Jim Courtney (Mr. Goodcents Foundation) would like Jameson to present the program to the MAC as more details are finalized.

4. Third Coordination Study Stakeholder Meeting
Tyler Means (MARC) introduced the next item on the coordination study. He introduced Russell Thatcher (TranSystems) and Deanne Petersen (TranSystems). Russell Thatcher provided a brief overview of the project purpose and reviewed the schedule. He stated that the objective of the meeting is to review the proposed implementation plans for the selected priorities and provide feedback on the proposed plans. The three priorities were:
   1. Coordination of ADA Paratransit Services
   2. Regional Eligibility
   3. Information and Referral (One-Call/One-Click Service and Public Information)

Current services, proposed changes, implementation considerations, and proposed schedules were presented for each of the three priorities.

Coordination of ADA Paratransit Services
This area of coordination focuses on the federally mandated ADA service provided by three agencies in the region (KCATA, Unified Government Transit, and the City of Independence) as well as another core service provider, Johnson County Transit. The implementation plan outlines a three-phase approach that addresses the coordination of trip reservation/scheduling/dispatch and the commingling of trips for service delivery.

Question: Will Johnson County be providing ADA paratransit service? (Shelia Styron)
ADA paratransit service in Johnson County is dependent on how the fixed-route system advances. The routes are currently commuter routes, which are not required to provide complementary ADA paratransit service under federal regulation. However, Johnson County Transit is in a better position to accommodate ADA paratransit service under this approach. Shawn Strate (Johnson County Transit) indicated that there are no near-term plans to provide ADA paratransit service, but the long-term plan expands the fixed-route system to the point where ADA paratransit would be required.
Question: How will coordination work with trip purposes? (Amy Wright)
The proposed coordination does not change the type of service provided, including trip purposes. Each community selects their own priorities; however, it would be easier to implement changes in the future under this coordination approach. Shawn Strate (Johnson County Transit) reiterated that decisions, such as trip purpose, are policymaking decisions that rest with elected officials.

Question: How do various government entities budget for paratransit? Can they limit service based on these budgets?
ADA paratransit service, because it is regulated by federal law, cannot have any capacity limits. Most government entities try to project future demand based on data to estimate the annual budget for the service. Non-ADA service can be limited to a first-come, first-serve basis. As a result, government entities can determine the amount of funds they are willing to provide and will cap the non-ADA service as necessary. Typically, budgets are set to meet the ADA demand and the remainder is available to fulfill non-ADA service. Mary Hunt (City of Independence) clarified that the 30 service hours IndeAccess uses each week is more of a productivity target than a capacity constraint. IndeAccess currently does not limit capacity.

Question: As we go through standardization and coordination, is this when we start the “packaging” piece to communicate with policymakers? (Jim Courtney)
Shawn Strate (JCT) expressed that it would be appropriate to begin discussions with policymakers now to begin the process. Jameson Auten (KCATA) indicated that they would like to have a short, one to two page summary with basic information and benefits to bring to policymakers during discussions.

Question: Has Johnson County Transit considered looking at the Mission Transit Center as a Special Edition transfer point to fixed-route? (Jim Courtney)
Jameson Auten (KCATA) indicated that they had not looked at this possibility in detail at this point but are hoping to consider it. They are more focused on the messaging component to advance some of these coordination initiatives.

Question: Will there be a cost savings to service providers? (Yuri Van Dierendonck)
Radio dispatch will not be a service provider function under the coordination plan, which would provide some cost savings.

Question: Will the call and control center incorporate eligibility? (Yuri Van Dierendonck)
That is a great transition to the next proposed coordination plan.

Regional Eligibility
This area of coordination focuses on coordination between eligibility determination for the four core services. The implementation plan outlines a four-phase approach that addresses a common application process, region-wide eligibility, and establishing a Transportation Resource Center.

Question: Are there models of incentivizing smaller service providers to buy in to the idea of a common application form? (Shelia Styron)
San Francisco and some agencies in Florida have used a model to incentivize this.

Question: Are there recommendations for moving toward functional assessments for eligibility determination? (Patrick Palmer)
The technical memorandum describes the ability to have thorough in-person assessments through the Regional Transportation Center. Patrick Palmer expressed that he would support the process of using functional assessments. He realizes the expense associated with paratransit service and believes many people could be comfortable using the fixed-route in certain circumstances.

*Comment: If we move towards functional assessments when people are required to come to the Transportation Resource Center to obtain eligibility, Johnson County will need to expand paratransit service to get people to the Center. (Amy Wright)*

Lisa Womack (KCATA) mentioned that while functional assessments is an idea, there would be significant time and effort before implementation to make sure the process is feasible. She reassured the group all the challenges would be addressed.

*Comment: As we move forward, we should consider what other funding sources and grants are available (i.e. Medicaid, Community Development Block Grant, etc.). These sources may have additional qualifications that would have to be incorporated into the regional eligibility process in the future. (Carroll Ramseyer)*

**Expanded Information and Referral Services (One-call/One-click Services)**

This area of coordination focuses on integration of the one-click Link for Care, the one-call Care Connection hotline, and a greater partnership with KCATA’s Mobility Management staff. The three-phase approach includes new features to enhance Link for Care, integrating with the Transportation Resource Center, and other outreach recommendations.

*Question: What are the quality control recommendations to ensure that the providers listed on Link for Care are appropriate and qualified? (Jacquelyn Moore)*

The project manager at Link for Care must approve all edits to information before publication on the site, allowing for a quality control check. A qualifications section could also be added to the provider profile, but some due diligence would need to be performed on the part of the user. The Care Connection hotline staff also is cautious with transferring callers directly to a specific provider – they have more of a conversation with the caller to verify information and will follow-up as necessary.

Jane Johns (KU Medical Center) mentioned that there is a service feedback function on the site. Over time, the hope is that others will review the services, just like reviews on many websites.

*Question: Will the calls be taken by a live person or a computer system? (Amy Wright)*

Currently, the hotline number goes directly to the desk of the hotline staff. Managing the hotline is only 50 percent of the staff person’s job, so there are times when she is unavailable. However, her schedule is typically flexible enough that she can take calls as needed. If this is not the case, callers leave a voicemail message and typically receive a follow-up call the same day or early the next day. As call volume increases and this function migrates to the Transportation Resource Center, there is the desire to keep this process as personal interaction with a live person. Like today, there will still be business operating hours when staff is available to take calls.

5. **Other Business**

Terry O’Toole (KCTG) brought attention to the topic of Uber in Kansas City and the organization’s lack of compliance with ADA paratransit.

Jim Courtney (Mr. Goodcents Foundation) thanked the audience for attending and adjourned the meeting.
APPENDIX C
Sample Combined Application Form
Dial-A-Ride and ADA Paratransit Eligibility Application Form

- - - PLEASE PRINT - - -

PART A (This part must be completed by all applicants)

First Name_____________________________________________ Middle Initial_____
Last Name_____________________________________________________________
Street Address______________________________________________ Apt #_______
Mailing Address (if different)__________________________________________________________________________
City________________________________________ State_____ Zip____________
Phone (daytime)__________________________
(evening)______________________________
Date of Birth (month/day/year)______________________________
Sex(M/F)________
Social Security Number (Optional): _______________________________.

Please give us the name and phone number of a friend or relative we can call in case we are unable to reach you at your regular number:

Name______________________________________________________________
Relationship________________________________________________________
Phone #______________________________

Do you have a disability or health condition that prevents you from sometimes using CATA fixed route buses?

☐ NO, I am applying based only on my age (60 or older). ATTACH A COPY OF DOCUMENTATION OF YOUR AGE (government ID). STOP HERE. You do not need to complete PARTS B and C below. Return this form to CATA at the address shown above to become eligible for Dial-A-Ride service.

☐ YES, I am applying for “ADA Paratransit Eligibility.” Complete PARTS B and C below.
PART B
This part only needs to be completed if you have a disability or health condition that prevents you from sometimes or always using CATA’s fixed route bus service. Persons completing this section will be considered for “ADA Paratransit Eligibility.” Information about disability or health condition will be kept strictly confidential.

1. What is the disability or health condition that prevents you from using CATA fixed route buses? Please describe all disabilities or health conditions that affect your travel.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

2. How does this disability or health condition prevent you from using CATA fixed route service? Please explain completely. Use additional sheets if needed.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

3. Do you use any of the following mobility aids? (Check all that apply)

☐ Manual Wheelchair        ☐ Electric Wheelchair        ☐ Powered Scooter
☐ Cane                       ☐ Walker                      ☐ Crutches                ☐ Braces
☐ Service Animal (describe): _______________________________________________
☐ Other (describe): _______________________________________________________
☐ No, I do not use any mobility aids

4. Do you ever need to bring someone else with you to help you when you travel (a “personal assistant” or “personal attendant”)?

☐ No                    ☐ Yes, always              ☐ Yes, sometimes
5. **Without** the help of someone else can you...

- Request and understand written or spoken instructions?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Cross streets and intersections?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Stand for 10 minutes if there is no place to sit?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Step on and off a sidewalk from the curb?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Find your own way to the bus stop if someone shows you the way once?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Walk up and down three steps if there is a handrail?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Stand on a moving bus holding onto a handrail?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure
- Transfer from one fixed route bus to another?
  - Always  ☐  Sometimes  ☐  Never  ☐  Not sure

6. Under the best of conditions, what is the **farthest** you can walk (or travel using your mobility aid) without the help of another person?

- Less than 1 block  ☐  6 blocks (3/4 mile)  ☐
- 1 block  ☐  more than 6 blocks  ☐
- 2 blocks (1/4 mile)  ☐  I cannot travel outdoors alone at all  ☐
- 4 blocks (1/2 mile)  ☐

7. Is there anything else you want to tell about your disability or health condition that might help us to better understand your travel abilities and limitations?

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
Signature

I understand that the purpose of this form is to determine if I am eligible to use ADA Paratransit Services. I certify that the information provided in this application is true and correct. I understand that falsification of information could result in a review of my eligibility and possible loss of ADA Paratransit Services.

I agree to notify the Cape Ann Transportation Authority if I no longer need to use ADA Paratransit Services.

___________________________________________________ Date____________________
(Signature of Applicant or Responsible Party)

If someone assisted in completing this application, please provide the following information:

Print name_______________________________________________________________

Relationship to applicant__________________________________________________

Address______________________________________________________________

Agency_________________________________________Phone_____________________

Authorization for Release of Information

I authorize the professional who has completed PART C of this application to release to CATA information about my disability or health condition and its effect on my ability to travel on the CATA bus service. I understand that I may revoke this authorization at any time. Unless earlier revoked, this form will permit the professional completing PART C to release the information described up to 60 days from the date below. I understand that all medical information which is provided about my disability or health condition will be kept strictly confidential.

______________________________________________ Date____________________
(Signature of Applicant or Responsible Party)

* * * GO TO PART C * * *
PART C
This part of the form must be completed by a professional familiar with your disability or health condition and your functional abilities.

This part only needs to be completed if you are applying for “ADA Paratransit Eligibility.”

1. Name of applicant:__________________________________________________________

2. Capacity in which you know the applicant:_______________________________________
                                                                                       _____________________________________________________________________

3. When was the applicant last treated or seen by you? ______________________________

4. On average, how frequently is the applicant seen by you? __________________________

5. Has the applicant been diagnosed with a physical, cognitive, mental, or other disability that would prevent him or her from using fixed route CATA bus service?

☐ No
☐ Yes
Diagnosis and date of onset:________________________________________________________

ICD-9 codes:_____________________________________________________________________

DSM-IV codes:____________________________________________________________________

6. The applicant’s disability is:

☐ Permanent       ☐ Temporary (until when)____________________________________________

7. Do the applicant’s functional abilities to travel change due to medical treatments, environmental conditions (heat, humidity, cold, ice and snow) or other related factors?

☐ No
☐ Yes
(explain):_____________________________________________________________________
                                                                                       ______________________________________________________________________

8. Additional comments (prognosis, functional abilities, etc.): __________________________
                                                                                       ______________________________________________________________________

________________________________________________________________________________

Professional’s Name and Title:______________________________________________________

License, Registration, or Certificate #:______________________________________________

Signature:________________________________________________________________________

Company or Agency Name:___________________________________________________________

Address:__________________________________________________________________________

Phone #:__________________________ Fax #:___________________________________________