Study to Design a Mobility Management Program in New York State

Recommendations Briefing

May 11, 2017
Meeting Purpose

• Revisit project goals
• Provide project findings
• Discuss project recommendations
Agenda

• Introductions
• Project overview
• Stakeholder engagement
• Definitions
• Need for coordinated transportation
• Gap analysis findings
• Best practice research
• Recommendations
• Questions
Introductions

Public Consulting Group (PCG)
• Sarah Salisbury, Project Manager
• Christine Newhall, Subject Matter Expert
Background and Purpose of the Mobility Management Program Study

- Olmstead Development and Implementation Cabinet (2012) identified the need for mobility management
- SFY 15/16 budget authorized an assessment of NYS’ current transportation system and how it meets, or fails to meet the needs of individuals with disabilities
- **Primary Goal:** To identify promising practices or models that utilize natural supports, shared ride and/or other resources to address the transportation needs (especially employment-related) of individuals with developmental, mental or physical disabilities who receive services from OPWDD, OMH and DOH
### Project Overview

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description</th>
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<tbody>
<tr>
<td>Phase I</td>
<td>Project Management Plan Development</td>
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<tr>
<td>Phase II</td>
<td>Stakeholder Input, Existing Conditions Analysis and Future Needs Assessment</td>
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<td>Phase III</td>
<td>Identify and Analyze the Applicability of National and International Best Practices</td>
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<td>Phase IV</td>
<td>Recommendations Final Report</td>
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Stakeholder Engagement

- Interagency Committee
  - Office for People With Developmental Disabilities (OPWDD)
  - Office of Mental Health (OMH)
  - Department of Health (DOH)
  - Department of Transportation (DOT)
  - State Office for the Aging (SOFA)
  - Developmental Disabilities Planning Council (DDPC)
  - Office of Alcoholism and Substance Abuse Services (OASAS)
  - State Education Department (SED)
- Most Integrated Settings Coordinating Council (MISCC)
- OPWDD Provider Association
- Focus groups, interviews and surveys
Stakeholder Engagement

Conducted over 40 interviews

Distributed over 1,000 surveys

Facilitated 5 focus groups
Definitions

**Mobility management** is a customer-focused approach that CONNECTS riders with transportation services so that seniors, people with disabilities, low-income workers, and youth can access the trips they need to get to jobs, services and community life.

**Human Service Transportation Coordination** programs for individuals with disabilities, seniors and persons with low income are usually state and/or federally funded and PROVIDE critical transportation services to individuals who are unable to access either public or paratransit services.
Need for Coordinated Transportation

- Increased need for accessible and specialized transportation resources
- Greater demands and mandates for person-centered planning and community inclusion for individuals with disabilities, which requires access to more transportation options

Without transportation to and from services and activities, *people cannot be fully integrated.*
Gap Analysis Findings
Gap Analysis Findings

High Level Observations

• No consistency or clarity in transportation or funding mechanisms

• Limited or nonexistent data on transportation costs, rates, number of trips provided and individuals served

• Limited mobility management best practice sharing

• Restricted transportation options in rural areas
Gap Analysis Findings

Transit Infrastructure Gaps

- Availability and Accessibility of Public Transit
- Availability and Affordability of Paratransit and Accessible Taxis
- Access to Employment Opportunities
- Long and/or Unreliable Trips

Laws and Regulations

- Restrictions on Hiring Drivers and Who Can Transport Specific Individuals with Disabilities
- Difficult to Meet Funding Source Requirements
- Medicaid-Only Transport Available
Gap Analysis Findings

Vehicle Use Gaps

- Age of Fleet
- Replacement and Back-up Vehicle Availability
- High Mileage on Vehicles
- Vehicles Not Maximized
- Accessibility of Vehicles

Business Operations Gaps

- Staffing and Driver Challenges
- Increasing Costs
- Decreased Funding
- Data Management
- Insurance Cost and Liabilities
Best Practice Research
Review of over 40 articles and websites with the following findings:

<table>
<thead>
<tr>
<th>Theme</th>
<th>Key Findings</th>
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<tbody>
<tr>
<td><strong>Human Service Transportation (HST) Coordination</strong></td>
<td>1. Human service transportation programs are often fragmented</td>
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<td></td>
<td>2. Human service transportation needs are increasing</td>
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<td>3. Coordination between HST Providers, or between HST and public transit services, can generate many benefits</td>
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<td>4. While beneficial, coordination presents challenges</td>
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<td>5. Medicaid NEMT (Non-Emergency Medical Transportation) plays an important role in coordinated services</td>
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<td>6. There are many documented coordination success factors</td>
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<td></td>
<td>7. Resources are available that can be used to address HST coordination challenges</td>
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<tr>
<td><strong>Mobility Management</strong></td>
<td>8. Mobility management activities are essential to HST and HST/transit coordination</td>
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State – Level Coordination Case Studies

**Massachusetts**
- Statewide coordinated, brokered transportation system for multiple state human service agencies including Medicaid non-emergency medical transportation (NEMT)

**Florida**
- Human service transportation and community transportation coordination, excluding Medicaid non-emergency medical transportation

**Georgia**
- State Department of Human Services transportation coordinated regionally; Medicaid NEMT coordinated regionally as well, but separately
New York Mobility Management Best Practices

- At least **26 counties** have Mobility managers/ mobility management programs or services in place.
- Mobility management activities are documented in local public transit-human service transportation coordination plans, required for use of FTA’s Section 5310 funding.
- Local coordination plans are prepared at the county level.

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<thead>
<tr>
<th>Mobility Management Strategy</th>
<th>County/ City</th>
<th>Program Name</th>
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<tr>
<td>One – Call/ One – Click</td>
<td>Statewide</td>
<td>511-NY</td>
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<td></td>
<td>Schuyler</td>
<td>Transportation Link-Line</td>
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<td>Vehicle Sharing Among Providers</td>
<td>Otsego</td>
<td>Otsego Express</td>
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<td>Agency Tailored Transportation</td>
<td>Essex</td>
<td>Essex County Public Transit</td>
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<tr>
<td>Travel Training</td>
<td>NYC</td>
<td>DOE Travel Training</td>
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<tr>
<td>Volunteer Driver Programs</td>
<td>Westchester</td>
<td>RideConnect</td>
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<tr>
<td>Taxi/ Transportation Network Company (TNC)</td>
<td>North Hempstead</td>
<td>Project Independence</td>
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<td>Voucher Program</td>
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Recommendations

Recommendation 1
Establish a statewide human service transportation coordination infrastructure

Recommendation 2
Establish Regional Coordinating Councils (RCCs)

Recommendation 3
Pilot three mobility management strategies in three regions in New York State
Paving the Way to Coordination…

All of the recommendations put forth by PCG:

• Would be a major paradigm shift in New York, but one that furthers the objectives of person-centered planning, the charge of MISCC, the Olmstead Cabinet, and HCBS waiver programs

• Will be challenging to implement and will require collaboration among many stakeholders, but will result in efficiencies, improvements and greater quality of life for New Yorkers served

• Will mean greater access to housing, employment, social activities and community life in general

*New York would be at the forefront of reform that very few states have undertaken, but which shows great promise in improving quality of life and access to essential services and activities for individuals with disabilities and those with other specialized needs.*
1) Statewide Human Service Transportation Coordination Infrastructure

Recommendation Summary:

• Establish a statewide human service transportation coordination office that would be responsible for managing the transportation programs of multiple NYS agencies

• Establishment of the coordination office would create centralization of transportation programs and would create management and operational efficiencies across agencies.

• The statewide coordination office would:
  • Involve a transportation brokerage model
  • Necessitate transportation rate carve-out from agency services
  • Require determination of funding
  • Require regulatory and waiver review
2) Regional Coordinating Councils (RCCs)

Recommendation Summary:
• Establish a statewide, regional infrastructure for mobility management activities
• RCCs would mirror the boundaries of 10 Regional Economic Development Councils

• RCCs would provide an organized forum for:
  • Information sharing
  • Replicable best practices
  • Coverage of urban, suburban and rural areas
  • Encourage participation from the respective regions

• RCCs will have diverse membership of organizations and will each employ a regional mobility manager
• Will coordinate closely with the statewide human service transportation coordination office
3) Mobility Management Pilot Project

Recommendations Summary:
• Three mobility management pilot programs to be implemented initially in three regions of New York state
  • Initially located in regions with urban, suburban, small urban and rural characteristics
  • Good candidates: Western NY, Central NY or Capital Region

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Large Urban</th>
<th>Suburban</th>
<th>Small Urban</th>
<th>Rural</th>
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<tbody>
<tr>
<td>1. One-Call / One-Click</td>
<td>★</td>
<td>★</td>
<td>★</td>
<td>★</td>
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<td>2. Travel Training</td>
<td>★</td>
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<td>★</td>
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<td></td>
<td></td>
<td></td>
<td>Where transit exists</td>
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<td>3. Travel Vouchers</td>
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<td>★</td>
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Questions