

Coordinated Public Transit - Human Services
Transportation Plan

Region 8: Dearborn, Decatur, Jefferson, Jennings,
Ohio, Ripley and Switzerland Counties



Prepared for Indiana
Department of Transportation

January, 2022

Prepared by:
RLS & Associates, Inc.

3131 S. Dixie Hwy, Suite 545
Dayton, OH 45439
(937) 299-5007
rls@rlsandassoc.com



Region 8 Coordinated Public Transit-Human Services Transportation Plan

A RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN UPDATE TO BE SUBMITTED TO THE INDIANA DEPARTMENT OF TRANSPORTATION, OFFICE OF TRANSIT

WHEREAS, people with specialized transportation needs have rights to mobility. Older adults, individuals with limited incomes and people with disabilities rely on public and specialized transportation to live independent and fulfilling lives. These services which are provided by public and private transportation systems and human service agency programs are essential for travel to work and medical appointments, to conduct essential errands, or to take advantage of social or cultural opportunities; and

WHEREAS, under the Infrastructure Investment and Jobs Act (IIJA), projects funded by the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program must be included in a locally developed, coordinated public transit-human services transportation plan; and

WHEREAS, the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program provides operating and capital assistance funding to provide transit and purchase of services to private nonprofit agencies, and to qualifying local public bodies that provide specialized transportation services to elderly persons and to people with disabilities; and

WHEREAS, a local committee with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation providers met on January 26, 2022; and

WHEREAS, the local committee reviewed and recommended through consensus the Coordinated Public Transit – Human Services Transportation Plan to be submitted to the Indiana Department of Transportation, Office of Transit.


NOW, THEREFORE, BE IT RESOLVED BY THE TRANSPORTATION ADVISORY COMMITTEE:

That this resolution takes effect immediately upon its adoption.

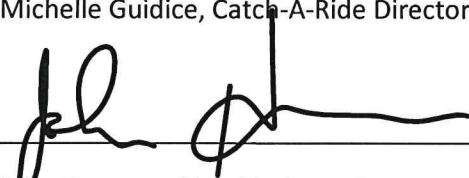
ADOPTED BY THE TRANSPORTATION ADVISORY COMMITTEE THIS 7th DAY OF FEBRUARY 2022 AS EVIDENCED BY THE AUTHORIZING SIGNATURES BELOW.




Michelle Guidice, Catch-A-Ride Director



Date



John Hammer, New Horizons Transportation Manager



Date



Moving Public Transportation Into the Future

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INTRODUCTION

OVERVIEW

This plan updates the Coordinated Public Transit-Human Services Transportation Plan for Dearborn, Decatur, Jefferson, Jennings, Ripley, Ohio, and Switzerland Counties that was initially developed in 2008; updated in 2012 to fulfill the planning requirements for the United We Ride initiative and the Federal Transit Administration's (FTA) Safe, Accountable, Flexible, and Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU); and updated in 2014 to meet the planning requirements for Moving Ahead for Progress in the 21st Century (MAP-21). The SAFETEA-LU and MAP-21 were the Federal surface transportation authorizations effective through September 30, 2015.

On December 4, 2015, the Fixing America's Surface Transportation (FAST) Act, was signed into law as a reauthorization of surface transportation programs through Fiscal Year 2020. The FAST Act applied new program rules to all FTA funds and authorized transit programs for five years. According to requirements of the FAST Act, locally developed, coordinated public transit-human services transportation plans must be updated to reflect the changes established by the FAST Act Federal legislation. The Coordinated Plan was updated again in 2017 to meet the new FAST Act requirements and reflect the changes in funding programs.

On November 15, 2021, the Infrastructure Investment and Jobs Act (IIJA) was enacted into law. The IIJA continues the policies set forth by the FAST Act and provides \$937 billion over five years from FY 2022 through 2026, including \$550 billion in new investments for all modes of transportation, including \$284 billion for the U.S. Department of Transportation, of which \$39 billion is dedicated to transit. The IIJA directs the U.S. Department of Transportation to apply the funding toward modernizing and making improvements.

Funding to update this locally-developed regional Coordinated Public Transit-Human Services Transportation plan was provided by the Indiana Department of Transportation, Office of Transit (INDOT) and involved active participation from local agencies that provide transportation for the general public, older adults, and individuals with disabilities.

Section 5310 Program: Enhanced Mobility for Seniors and Individuals with Disabilities

The program most significantly impacted by the plan update is the Section 5310 Program because participation in a locally developed Coordinated Plan is one of the eligibility requirements for Section 5310 Program funding.

The Section 5310 Program provides formula funding to states for the purpose of assisting public and private nonprofit groups in meeting the transportation needs of older adults and people with disabilities when transportation service provided is unavailable, insufficient, or inappropriate to meeting those needs. The FTA apportions Section 5310 Program funds to direct recipients based on the population within the recipient service area. For rural and small urban areas in Indiana, the INDOT is the direct

recipient. As the direct recipient, INDOT solicits applications and selects Section 5310 Program recipient projects for funding through a formula-based, competitive process which is clearly explained in the INDOT Transit State Management Plan.

In Indiana, eligible activities for Section 5310 Program funds include purchasing buses and vans, wheelchair lifts, ramps, and securement devices.

Section 5310 Program projects are eligible to receive 80 percent Federal share if the 20 percent local match is secured. Local match may be derived from any combination of non-U.S. Department of Transportation Federal, State, or local resources. The FAST Act also allows the use of advertisement and concessions revenue as local match. Passenger fare revenue is not eligible as local match.

PLAN DEVELOPMENT METHODOLOGY

Some human service agencies transport their clients with their own vehicles, while others may also serve the general public or purchase transportation from another entity. Regardless of how services are provided, transportation providers and human service agencies are all searching for ways to economize, connect, increase productivity, and provide user-friendly access to critical services and community amenities. In an era of an increasing need and demand for shared-ride and non-motorized transportation and stable or declining revenue, organizational partnerships must be explored and cost-saving measures must be made to best serve the State's changing transportation demands. Interactive coordinated transportation planning provides the best opportunity to accomplish this objective.

According to FTA requirements, the coordinated plan must be developed and approved through a process that includes participation by older adults and individuals with disabilities. And, INDOT and FTA also encourage active participation in the planning process from representatives of public, private, and nonprofit organizations that provide or support transportation services and initiatives, and the general public. The methodology used in this plan update includes meaningful efforts to identify these stakeholders and facilitate their participation in the planning process.

The fundamental element of the planning process is the identification and assessment of existing transportation resources and local/regional unmet transportation needs and gaps in service. This was accomplished by receiving input from the stakeholders noted above through a public meeting, telephone interviews, email conversations, and completion of a public survey available both online and on paper. Social distancing protocols led to changed public engagement and outreach methods.

The coordination plan update incorporated the following planning elements:

1. Review of the previous regional coordination plan updates to develop a basis for evaluation and recommendations;
2. Evaluation of existing economic/demographic conditions in each county;

3. Conduct of a survey of the general public. It must be noted that general public survey results are not statistically valid, but are intended to provide insight into the opinions of the local community. The survey also includes distribution to agencies that serve older adults and individuals with disabilities and their consumers. A statistically valid public survey was beyond the scope of this project. However, U.S. Census data is provided to accompany any conclusions drawn based on general public information;
4. Conduct of one local, virtual meeting for stakeholders and the general public for the purpose of soliciting input on transportation needs, service gaps, and goals, objectives and implementation strategies to meet these deficiencies;
5. Update of the inventory of existing transportation services provided by public, private and non-profit organizations;
6. Update of the assessment of unmet transportation needs and gaps in service obtained through meetings, interviews, and surveys; and
7. Development of an updated implementation plan including current goals, strategies, responsible parties and performance measures.

GLOSSARY OF TERMS

Bus and Bus Facilities Grants Program (Section 5339 Program) – The Grants for Buses and Bus Facilities program makes Federal resources available to States and direct recipients to replace, rehabilitate and purchase buses and related equipment and to construct bus-related facilities including technological changes or innovations to modify low or no emission vehicles or facilities. Funding is provided through formula allocations and competitive grants. Eligible recipients include direct recipients that operate fixed route bus service or that allocate funding to fixed route bus operators; State or local governmental entities; and Federally recognized Indian tribes that operate fixed route bus service that are eligible to receive direct grants under Sections 5307 and 5311. Subrecipients may allocate amounts from the grant to subrecipients that are public agencies or private nonprofit organizations engaged in public transportation.

Coordinating Council on Access and Mobility (CCAM) – a Federal interagency council that works to coordinate funding and provide expertise on human service transportation for three targeted populations: people with disabilities, older adults, and individuals of low income. The CCAM works at the Federal level to improve Federal coordination of transportation resources and to address barriers faced by States and local communities when coordinating transportation. The CCAM’s mission is to issue policy recommendations and implement activities that improve the availability, accessibility, and efficiency of transportation for CCAM’s targeted populations, with the vision of equal access to coordinated transportation for all Americans. Additional information is available at <https://www.transit.dot.gov/coordinating-council-access-and-mobility>.

Direct Recipient – Federal formula funds for transit are apportioned to direct recipients; for rural and small urban areas, this is the Indiana Department of Transportation. In large urban areas, a designated recipient is chosen by the governor. Direct recipients have the flexibility in how they

select subrecipient projects for funding. In Indiana, their decision process is described in the State or Metropolitan Planning Organization's Program Management Plan.

Enhanced Mobility for Seniors and Individuals with Disabilities (Section 5310 Program) – The program provides formula funding to improve mobility for seniors and individuals with disabilities by removing barriers to transportation service and expanding transportation mobility options. This program supports transportation services planned, designed, and carried out to meet the special transportation needs of seniors and individuals with disabilities in all areas – large urbanized, small urbanized, and rural. The Indiana Department of Transportation, Office of Transit (INDOT) administers the Section 5310 Program in Indiana. The Federal share is 80 percent for capital projects. In Indiana, the program has historically been utilized for capital program purchases. Additional information is available at <https://www.transit.dot.gov/funding/grants/enhanced-mobility-seniors-individuals-disabilities-section-5310>.

Fixing America's Surface Transportation (FAST) Act – On December 4, 2015, President Obama signed the Fixing America's Surface Transportation (FAST) Act, reauthorizing surface transportation programs through Fiscal Year 2020. Details about the Act are available at www.transit.dot.gov/FAST.

Infrastructure Investment and Jobs Act - The Bipartisan Infrastructure Law, as enacted in the Infrastructure Investment and Jobs Act, represents the largest Federal investment in public transportation in the nation's history. The legislation will advance public transportation in America's communities through four key priorities: safety modernization, climate, and equity. <https://www.transit.dot.gov/BIL>

Indiana Department of Transportation, Office of Transit (INDOT) administers the Section 5311 program in Indiana, as well as the Section 5310 program for rural and small urban areas. The Federal share is 80 percent for capital projects. The Federal share is 50 percent for operating assistance under Section 5311.

Individuals with Disabilities – This document classifies individuals with disabilities based on the definition provided in the Americans with Disabilities Act implementing regulations, which is found in 49 CFR Part 37.3. This definition, when applied to transportation services applications, is designed to permit a functional approach to disability determination rather than a strict categorical definition. In a functional approach, the mere presence of a condition that is typically thought to be disabling gives way to consideration of an individual's abilities to perform various life functions.

Local Matching Funds – The portion of project costs not paid with the Federal share. Non-Federal share or non-Federal funds includes the following sources of funding, or in-kind property or services, used to match the Federal assistance awarded for the Grant or Cooperative Agreement: (a) Local funds; (b) Local-in-kind property or services; (c) State funds; (d) State in-kind property or services, and (e) Other Federal funds that are eligible, under Federal law, for use as cost-sharing or matching funds for the Underlying Agreement. For the Section 5310 Program, local match can come from other

Federal (non-DOT) funds. This can allow local communities to implement programs with 100 percent Federal funding. One example is Older Americans Act (OAA) Title III-B Support Services.

Public Mass Transportation Fund (PMTF) – The Indiana State Legislature established the Public Mass Transportation Fund (I.C. 8-23-3-8) to promote and develop transportation in Indiana. The funds are allocated to public transit systems on a performance-based formula. The actual funding level for 2021 was \$38.25 million. PMTF funds are restricted to a dollar-for-dollar match with Locally Derived Income and are used to support transit systems' operations or capital needs.

Rural Transit Program (Section 5311 Program) – The Formula Grants for Rural Areas program provides capital, planning, and operating assistance to States to support public transportation in rural areas with populations of less than 50,000, where many residents often rely on public transit to reach their destinations. The program also provides funding for State and national training and technical assistance through the Rural Transportation Assistance Program. Additional information is available at www.transit.dot.gov/funding/grants/grant-programs/formula-grants-rural-areas-5311.

Seniors – For the purposes of the Section 5310 Program, people who are 65 years of age and older are defined as seniors.

Subrecipient – A non-Federal entity that receives a subaward (grant funding) from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. Subrecipient programs are monitored by the direct or designated recipient for grant performance and compliance.

Transit Demand – Transit demand is a quantifiable measure of passenger transportation services and the level of usage that is likely to be generated if passenger transportation services are provided. Refer to the following website for a toolkit and more information on methods for forecasting demand in rural areas: www.trb.org/Publications/Blurbs/168758.aspx.

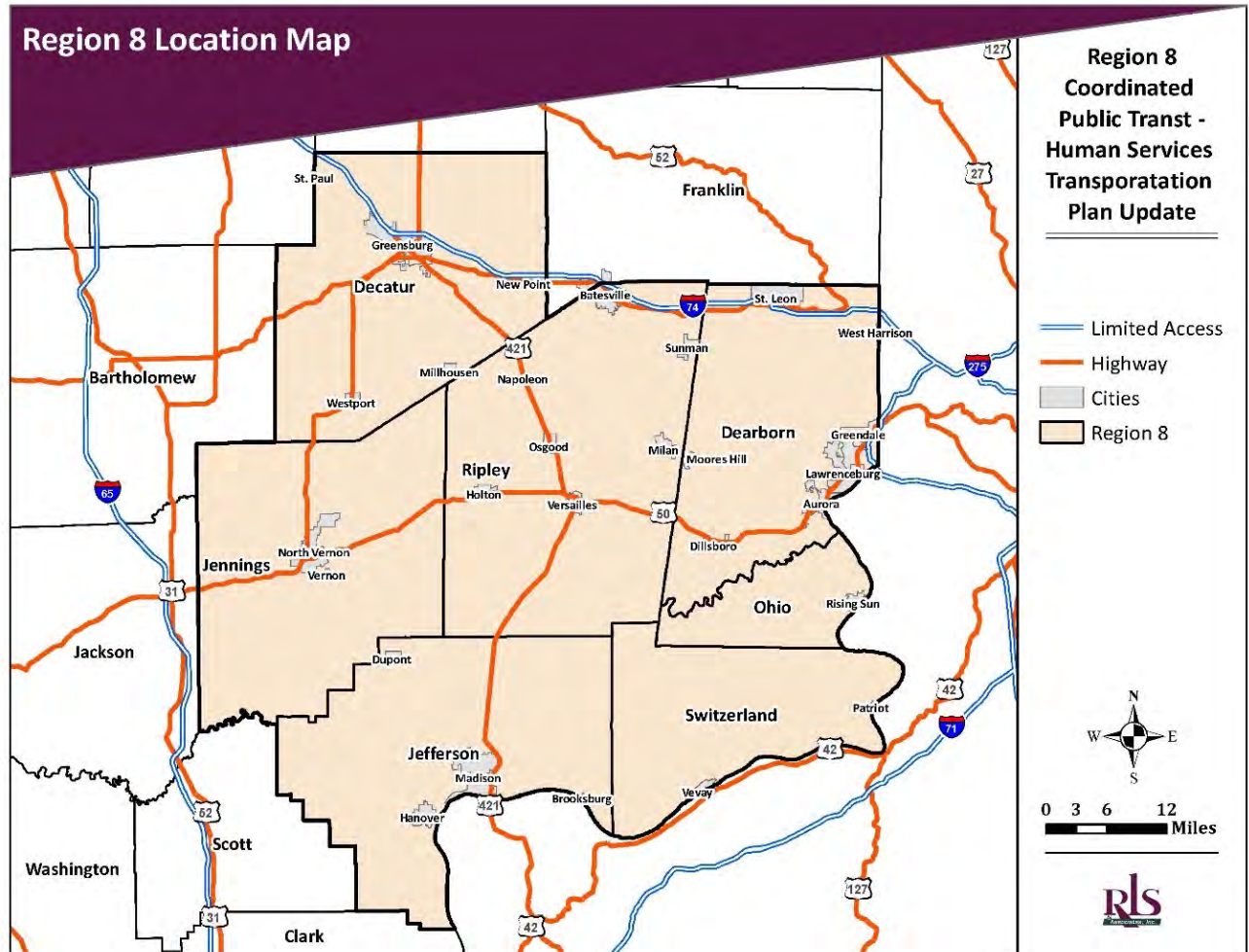
Urbanized Area Formula Grants Program (Section 5307 Program) - The Urbanized Area Formula Funding program makes Federal resources available to urbanized areas and to governors for transit capital and operating assistance in urbanized areas. An urbanized area is an incorporated area with a population of 50,000 or more. Eligible expenses are typically limited to capital purchases and planning, but operating assistance can be provided under certain conditions, including to systems operating fewer than 100 vehicles. Additional information is available at <https://www.transit.dot.gov/funding/grants/urbanized-area-formula-grants-5307>

Zero Vehicle Households – No vehicles available to a housing unit, according to U.S. Census data. This factor is an indicator of demand for transit services.

EXISTING CONDITIONS

Region 8 is located in northwest Indiana and includes the counties of Dearborn, Decatur, Jefferson, Jennings, Ripley, Ohio, and Switzerland. The map in Figure 1: Location Map provides a depiction of the area included in this study.

Figure 1: Location Map

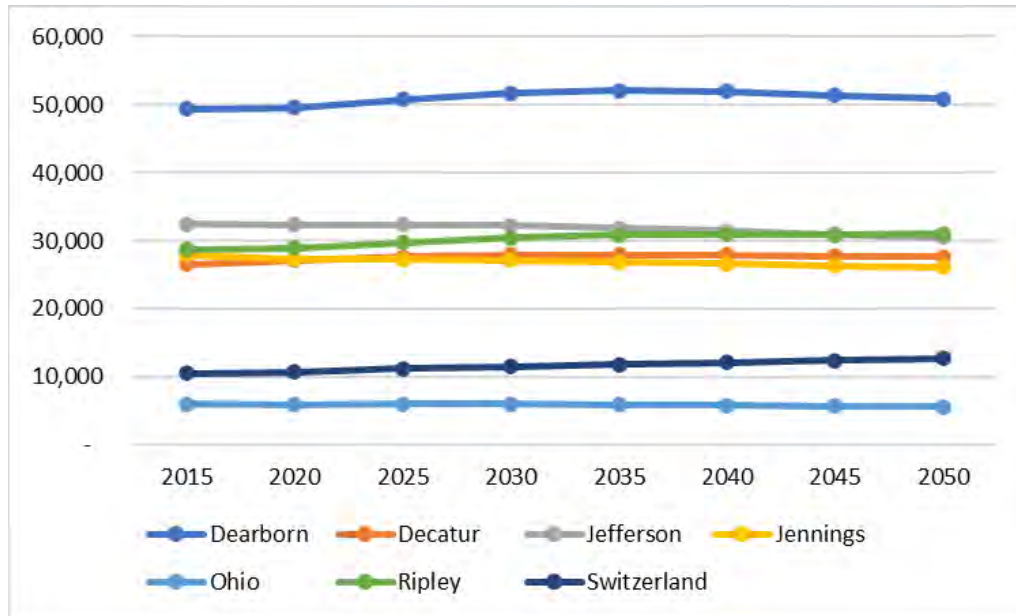


The demographics of an area are a strong indicator of demand for transportation service. Relevant demographic data was collected and is summarized in this section. The data provided in this chapter was gathered from multiple sources including the U.S. Census Bureau’s 2019 American Community Survey (ACS) Five-Year Estimates and the State of Indiana. These sources are used to ensure that the most current and accurate information is presented. As a five-year estimate, the ACS data represent a percentage based on a national sample and does not represent a direct population count.

POPULATION PROJECTIONS

STATS Indiana, using data from the Indiana Business Research Center, IU Kelley School of Business projects the Region's population will grow to 184,512 by 2050, an estimated growth of 1.4 percent from the year 2020 population projection. Figure 2 shows population trends between 2020 and 2050 for each county in Region 8.

Figure 2: Population Trends, 2020 – 2050



Source: STATS Indiana using data from the Indiana Business Research Center, IU Kelley School of Business

OLDER ADULT POPULATION

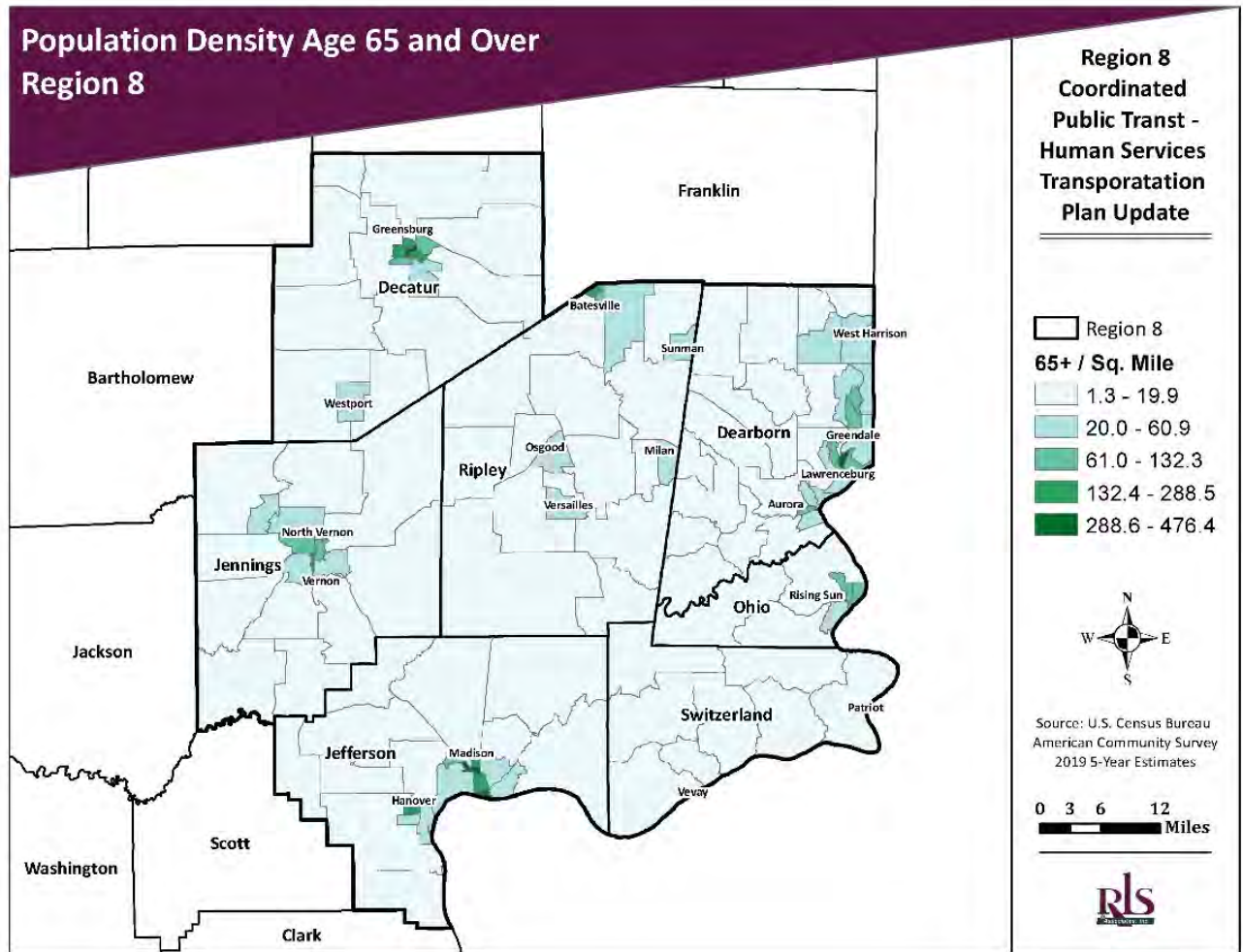
Older adults are most likely to use transportation services when they are unable to drive themselves or choose not to drive. This may include self-imposed limitations including driving at night and trips to more distant destinations. Older adults also tend to be on a limited retirement income and, therefore, public or agency sponsored transportation services are a more cost-effective alternative to owning a vehicle. For these reasons, the population of older adults in an area is an indicator of potential transit demand.

There is a trend occurring in the United States relating to the aging of the population. People primarily born during the post-WWII "baby boom" era defined by the Census Bureau as persons born from 1946 through 1964 are over the age of 65 and are more likely to need an alternative to driving personal vehicles. Further, the Administration on Aging (U.S. Department of Health and Human Services) reports that, based on a comprehensive survey of older adults, longevity is increasing and individuals in this category are younger and healthier than in all previously measured time in our history. Quality of life issues and an individual's desire to live independently will put increasing pressure on existing

transit services to provide mobility to this population. As older adults live longer and remain independent, the potential need to provide public transit is greatly increased.

Figure 3 illustrates the population percentage of persons over 65 years of age by block group, and the projected growth in population by age group, are provided for each county in the Region in the County Profile section.

Figure 3: Older Adult Population Density



INDIVIDUALS WITH DISABILITIES

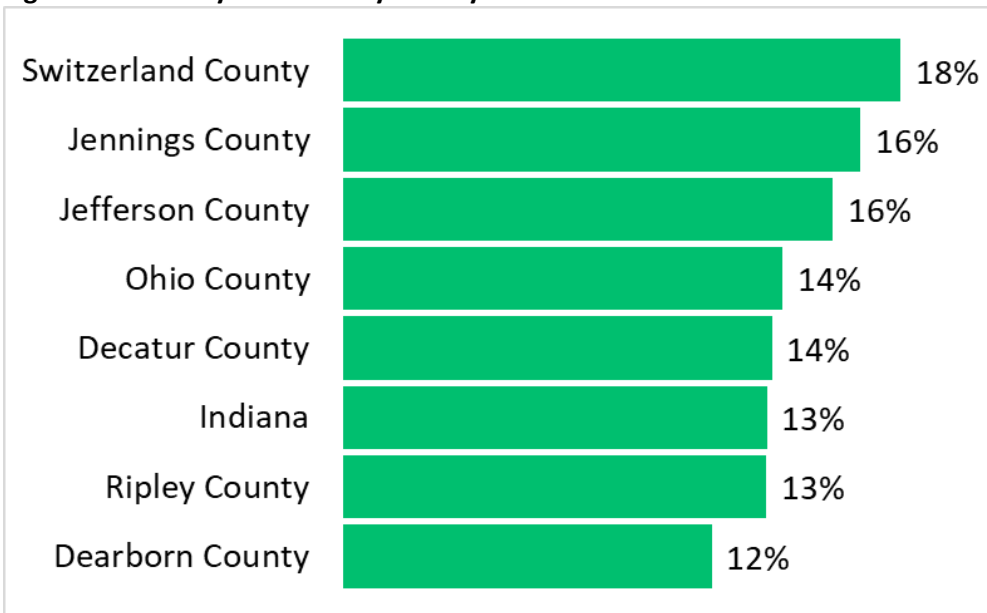
Enumeration of the population with disabilities in any community presents challenges. First, there is a complex and lengthy definition of a person with a disability in the Americans with Disabilities Act implementing regulations, which is found in 49 CFR Part 37.3. This definition, when applied to transportation services applications, is designed to permit a functional approach to disability determination rather than a strict categorical definition. In a functional approach, the mere presence of a condition that is typically thought to be disabling gives way to consideration of an individual's

abilities to perform various life functions. In short, an individual’s capabilities, rather than the mere presence of a medical condition, determine transportation disability.

The U.S. Census offers no method of identifying individuals as having a transportation-related disability. The best available data for Region 8 is available through the 2019 ACS Five-Year Estimates of disability for the non-institutionalized population. Figure 4 is intended to provide a comparison of the population count of individuals with disabilities in each county within the Region.

The chart identifies that the highest percent population of individuals with a disability resides in Switzerland County at 18 percent. Dearborn County has the lowest percent population of individuals with a disability in Region 8 with 12 percent, being lower than that of the state of Indiana (13 percent).

Figure 4: Disability Incidence by County



Source: 2019 ACS Five-Year Estimates

HOUSEHOLD INCOME

The household income ranges for the study area according to the 2019 ACS Five-Year Estimates can be found for each county in the County Profile section. According to the 2019 ACS Five-Year Estimates survey, there are a total of 70,543 households in Region 8. Of those households, 29.3 percent earn less than \$35,000 annually. Of the households earning less than \$35,000, 10.3 percent earned between \$25,000 and \$34,999. Another 13.5 percent earned between \$10,000 and \$24,999 and about 5.5 percent earned less than \$10,000 per year. The median household income for each area is shown in Table 1.

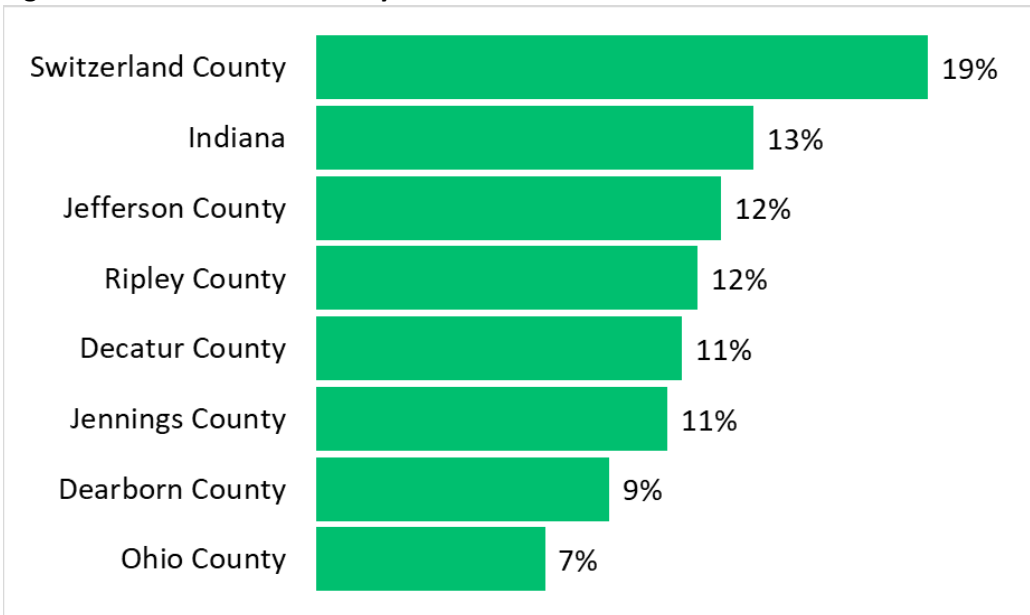
Table 1: Median Household Income by County

Geography	Median Household Income
Dearborn County	\$68,658
Decatur County	\$57,949
Jefferson County	\$52,718
Jennings County	\$54,191
Ohio County	\$60,128
Ripley County	\$56,332
Switzerland County	\$49,383
Indiana	\$56,303

POVERTY STATUS

Figure 5 illustrates the percentage of the population in each county that is living below the poverty level. Switzerland County has the highest percent of population living below the poverty level with 19 percent. Jefferson County has the second highest percentage of population living in poverty with 12 percent, while Ohio County has the lowest at seven percent.

Figure 5: Percent Below Poverty



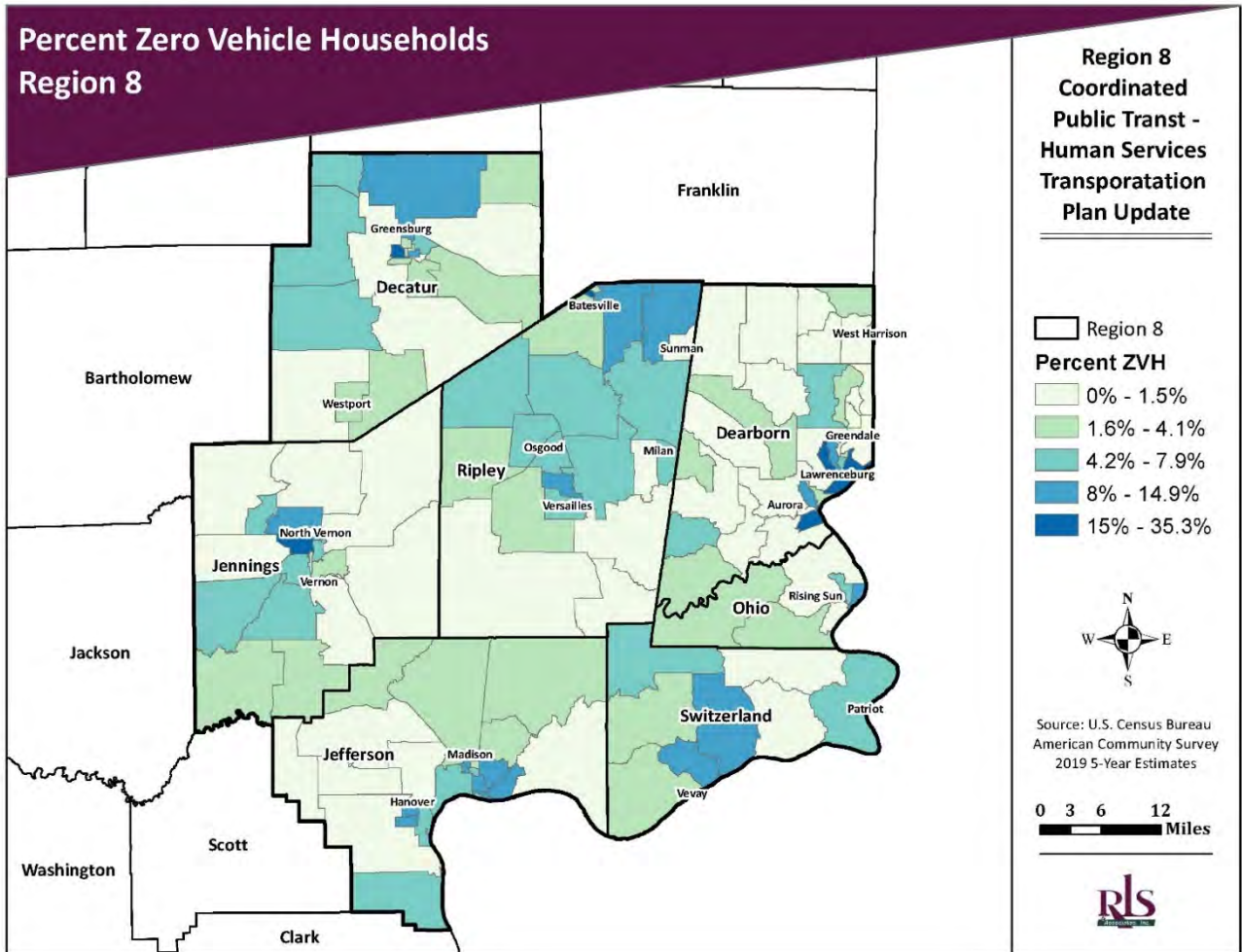
Source: 2019 ACS Five-Year Estimates

ZERO VEHICLE HOUSEHOLDS

The number of vehicles available to a housing unit is also used as an indicator of demand for transit service. There are 3,277 households in the Region that have no available vehicles. This is 4.6 percent of all households in the Region. An additional 17,594 or 24.9 percent of households in

the Region have only one vehicle. The total number of vehicle availability per household in each county can be found for each county in the County Profile section.

Figure 6: Zero Vehicle Households



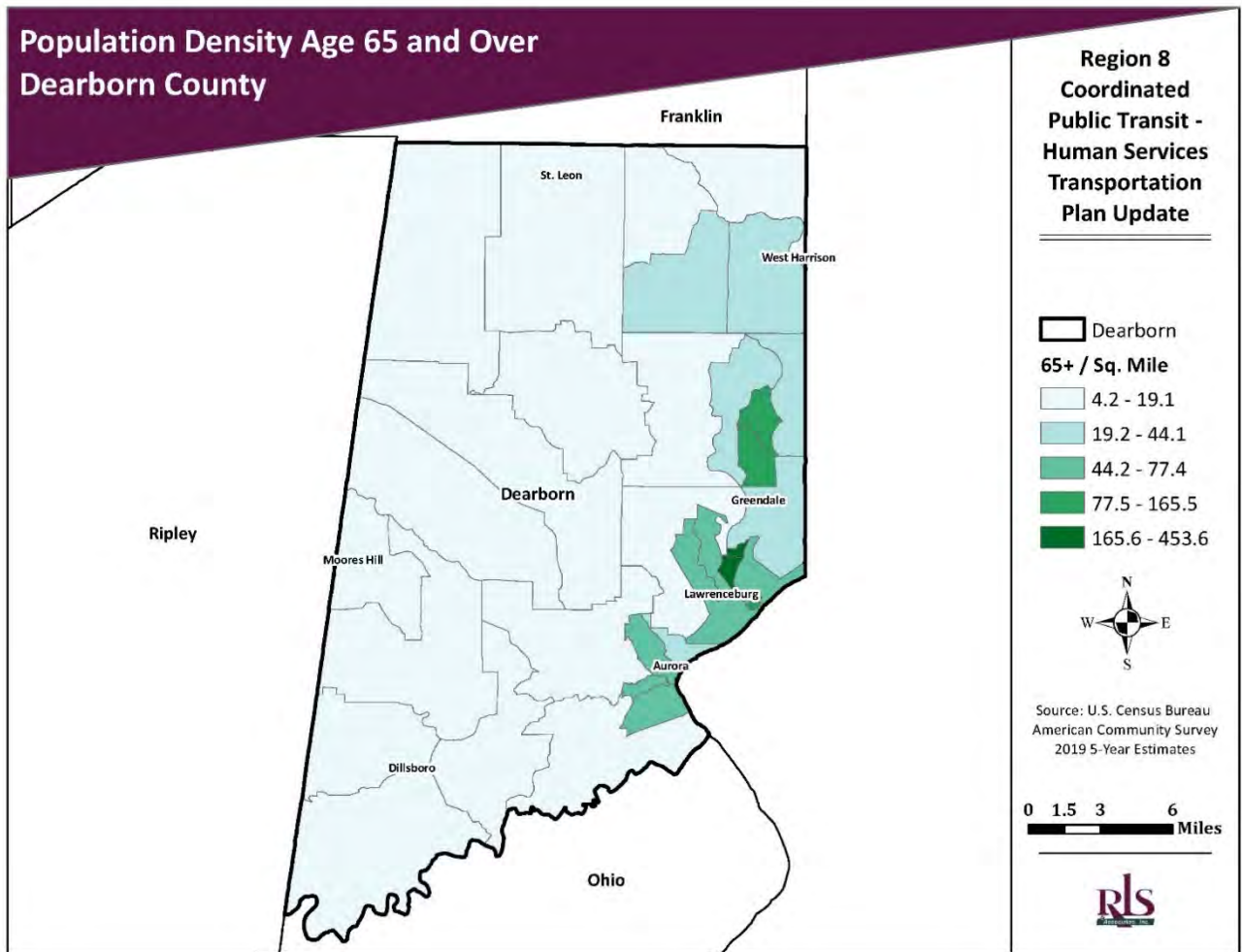
COUNTY PROFILES

Dearborn County

Older Adult Population

Figure 7 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Dearborn County residents aged 65 and older are Lawrenceburg. These block groups have densities of older adults between 165.6 and 453.6 persons per square mile. Areas in eastern Dearborn County have moderate densities of persons age 65 and older (77.5 to 165.5). The remainder of the county has low to very low densities of persons age 65 and older.

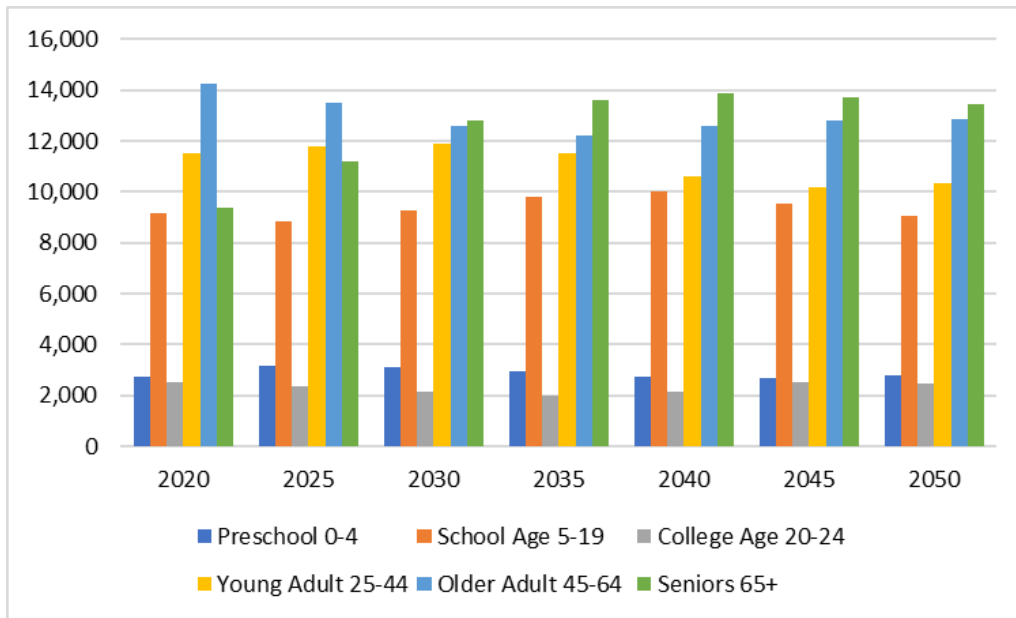
Figure 7: Dearborn County Older Adult Population Density



Population by Age

Figure 8 shows that the largest age cohort for Dearborn County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Dearborn County over the next 30 years, though decreasing over time. Seniors (65+), who make up the third largest age group in 2020, are projected to grow to be the largest age group by 2050. Currently, the smallest age group in Dearborn County is college age individuals (20 to 24), who are expected to see little to no change between 2020 and 2050.

Figure 8: Dearborn County Population by Age



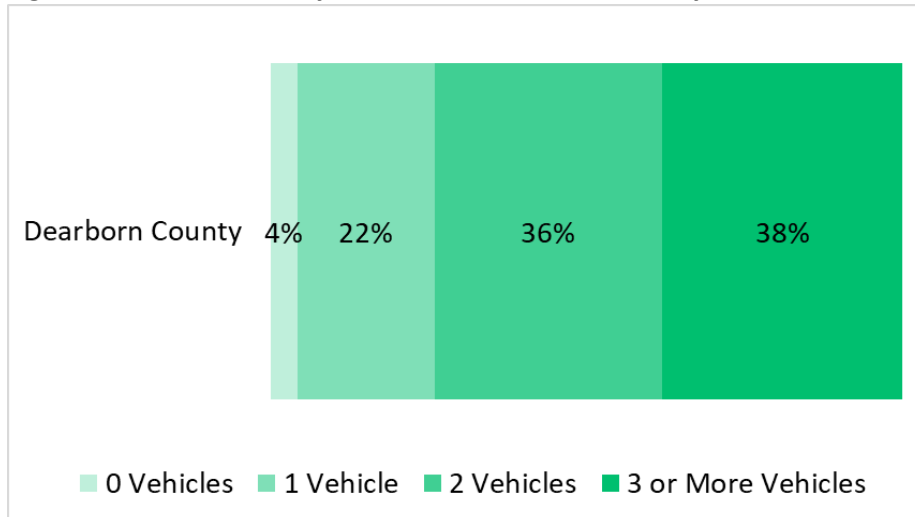
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 9 shows the breakdown of vehicle availability by household within Dearborn County. Of all households in the county, only four percent of the households do not have a vehicle and an additional 22 percent only have one vehicle.

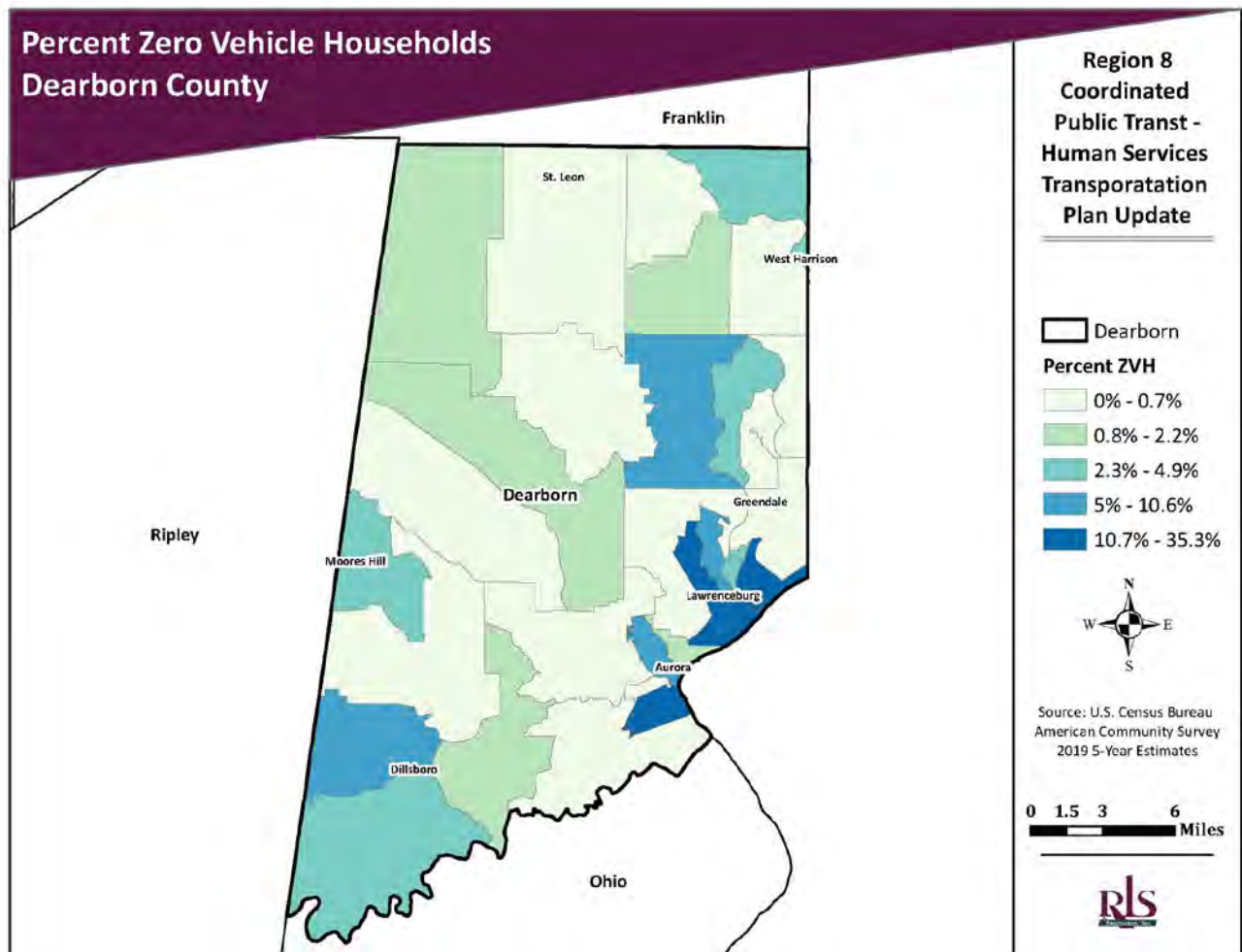
Figure 10 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in and around Aurora and Lawrenceburg. Over 10.7 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 5 to 10.6 percent of zero vehicle households can be found in and around Aurora, Greendale, and Lawrenceburg. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 9: Dearborn County Household Vehicle Availability



Source: 2019 ACS Five-Year Estimates

Figure 10: Dearborn County Zero Vehicle Households

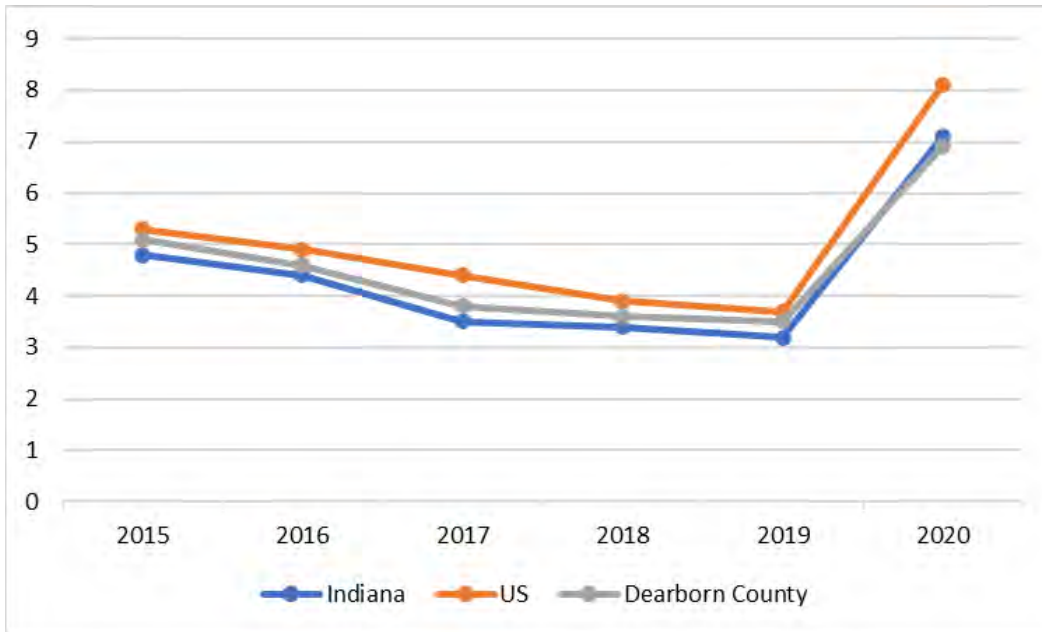


Unemployment

Dearborn County’s unemployment rate reached a high in 2020 of 6.9 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) and the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Dearborn County paralleled the national unemployment average trend and continually stayed lower than the U.S. rate but was higher than the Indiana rate until 2020. Figure 11 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 11: Dearborn County Comparison of Unemployment Rates

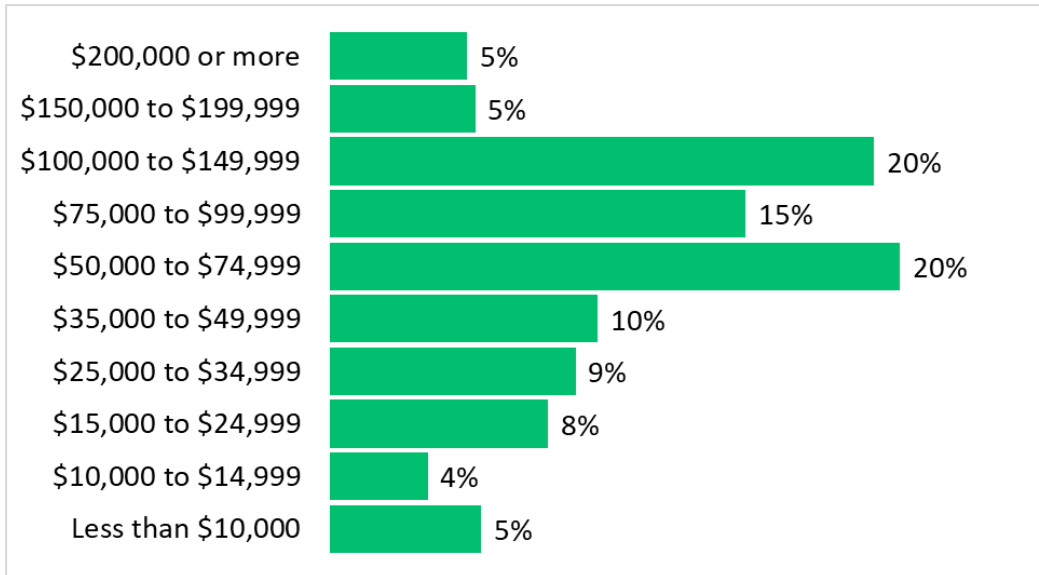


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 12 shows the annual household income breakdown by percentage of total households in the county. Out of 18,870 households in the county, 26 percent make less than \$35,000 per year. Of these households, five percent earn less than \$10,000 per year.

Figure 12: Dearborn County Annual Household Income



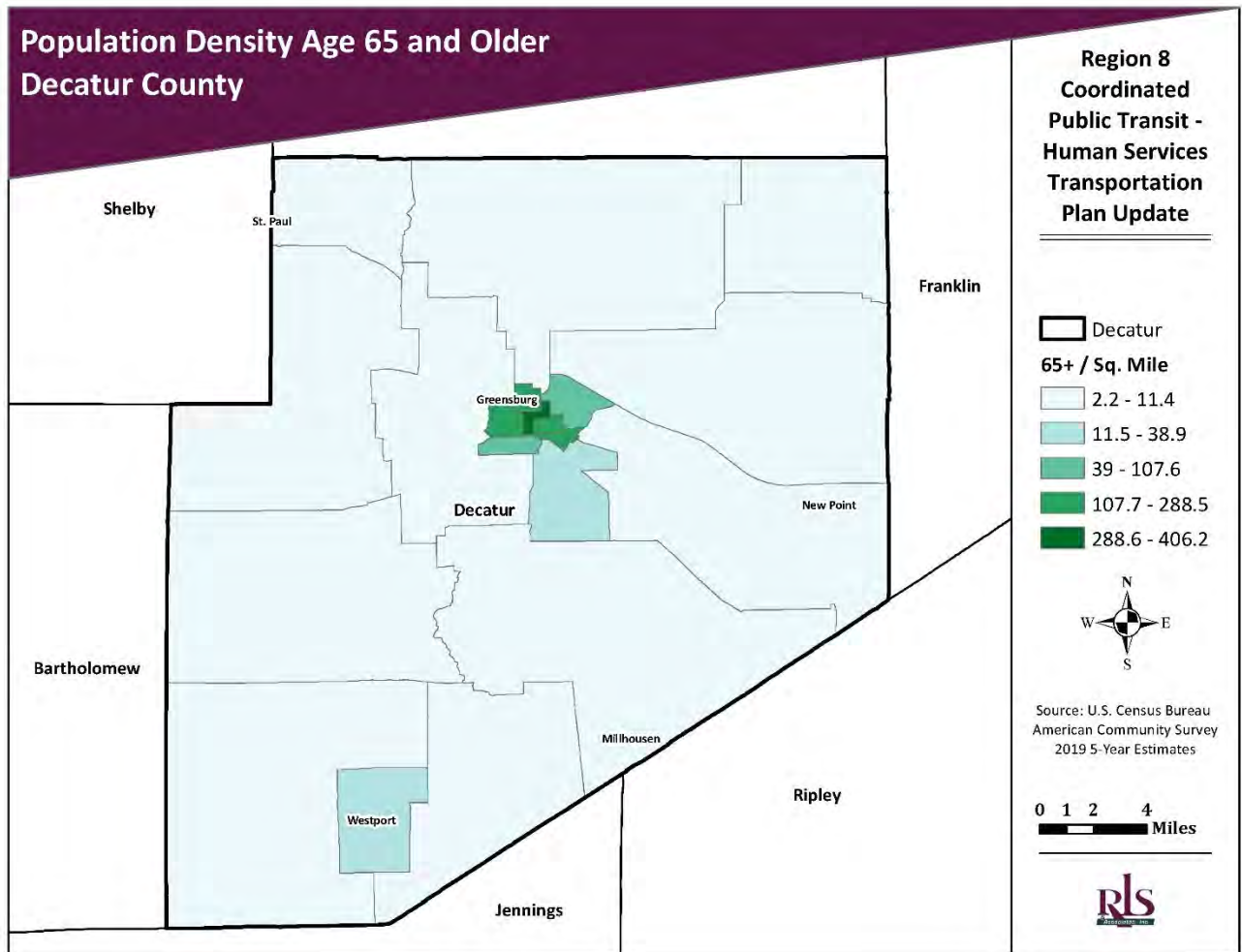
Source: 2019 ACS Five-Year Estimates

Decatur County

Older Adult Population

Figure 13 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Decatur County residents aged 65 and older are in Greensburg. These block groups have densities of older adults between 288.6 and 406.2 persons per square mile. Areas around Greensburg have moderate densities of persons age 65 and older (107.7 to 288.5). The remainder of the county has low to very low densities of persons age 65 and older.

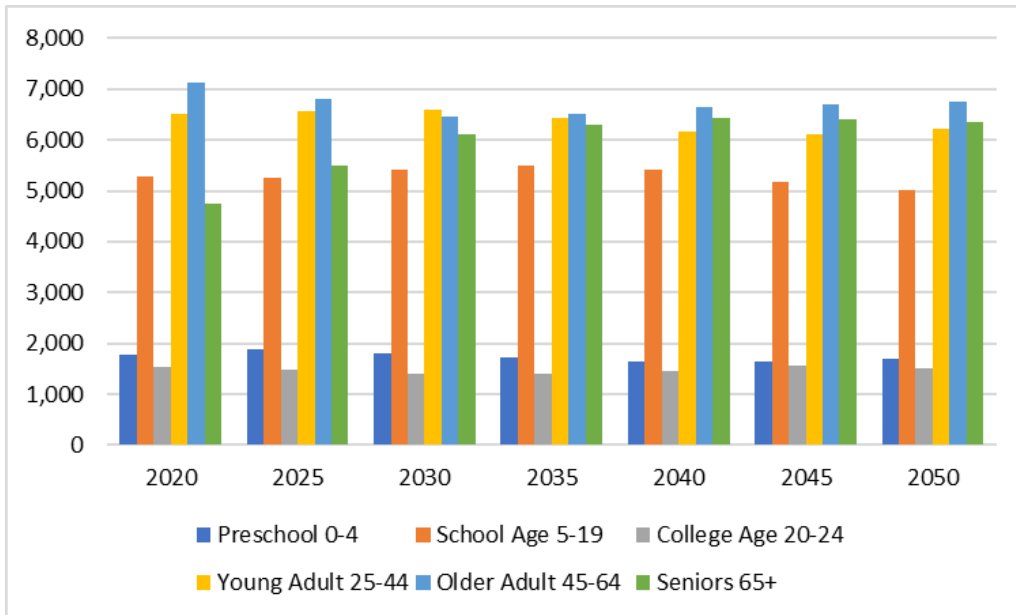
Figure 13: Decatur County Older Adult Population Density



Population by Age

Figure 14 shows that the largest age cohort for Decatur County is between the ages of 45 and 64. This age group is expected to be the largest group in Decatur County over the next 30 years. Seniors (65+) are expected to grow from being the fourth largest age group in 2020 to the second largest in 2050. Currently, the smallest age group in Decatur County is college age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

Figure 14: Decatur County Population by Age



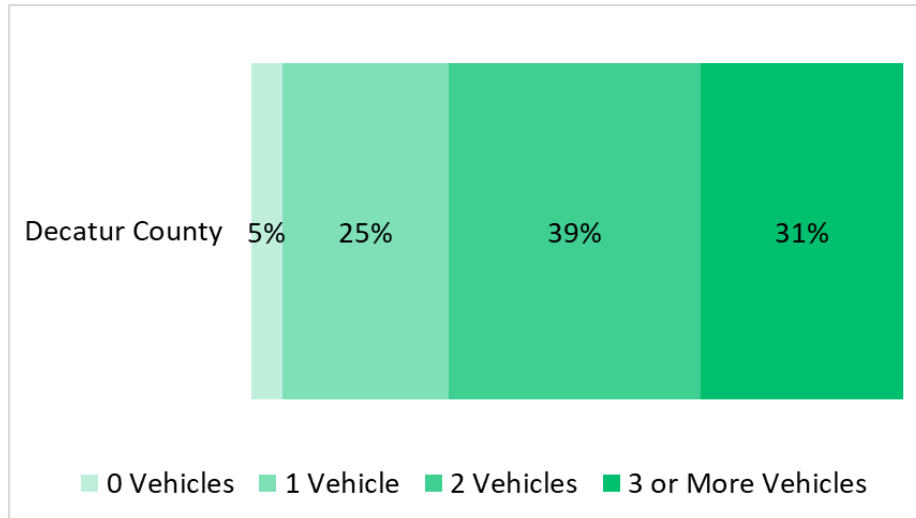
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 15 shows the breakdown of vehicle availability by household within Decatur County. Of all households in the county, five percent of the households do not have a vehicle and an additional 25 percent only have one vehicle.

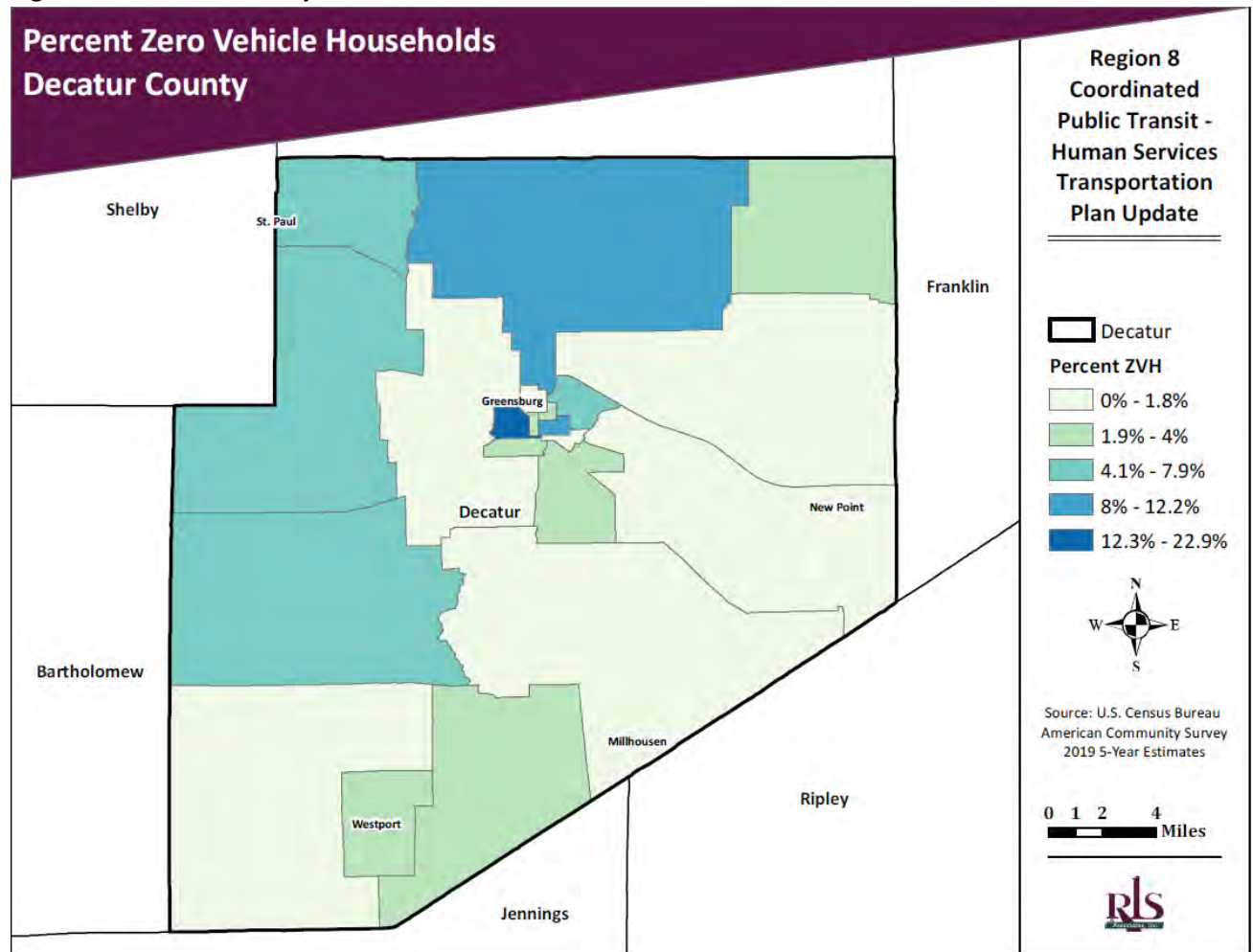
Figure 16 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in Greensburg. Over 12.3 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 8 to 12.2 percent of zero vehicle households can also be found in Greensburg and northern Decatur County. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 15: Decatur County Household Vehicle Availability



Source: 2019 ACS Five-Year Estimates

Figure 16: Decatur County Zero Vehicle Households

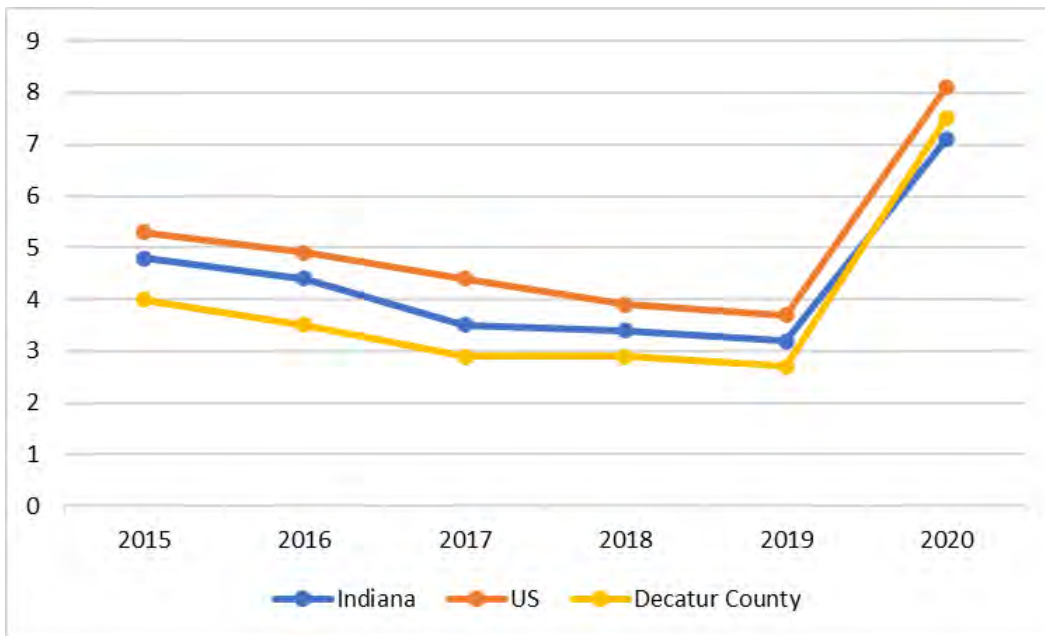


Unemployment

Decatur County’s unemployment rate reached a high in 2020 of 7.5 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) but slightly higher than the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Decatur County paralleled the national unemployment average trend, but continually stayed lower than the U.S. and Indiana rate until raising above the Indiana rate in 2020. Figure 17 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 17: Decatur County Comparison of Unemployment Rates

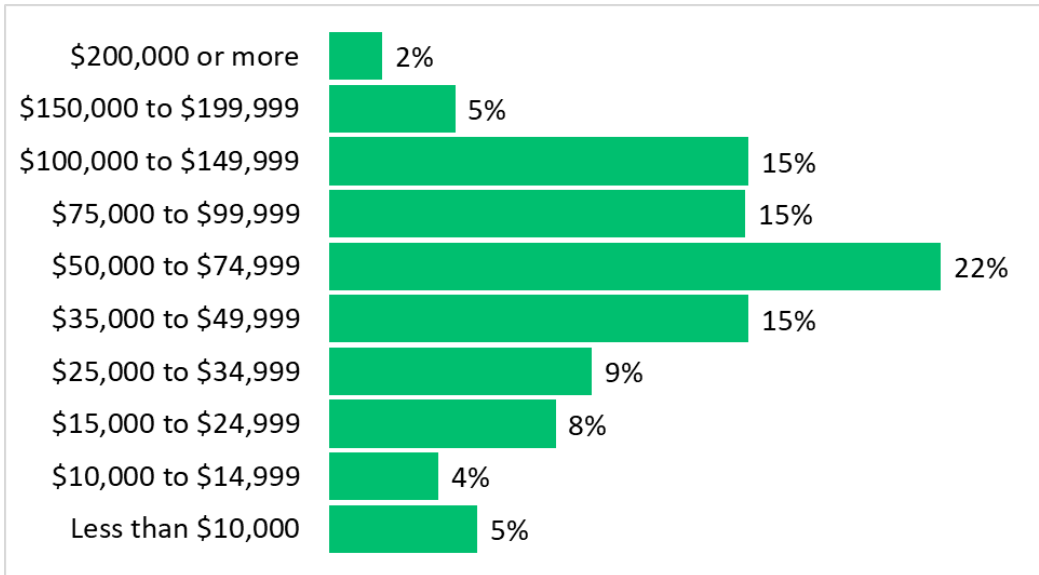


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 18 shows the annual household income breakdown by percentage of total households in the county. Out of 10,353 households in the county, 26 percent make less than \$35,000 per year. Of which, five percent earn less than \$10,000 per year.

Figure 18: Decatur County Annual Household Income



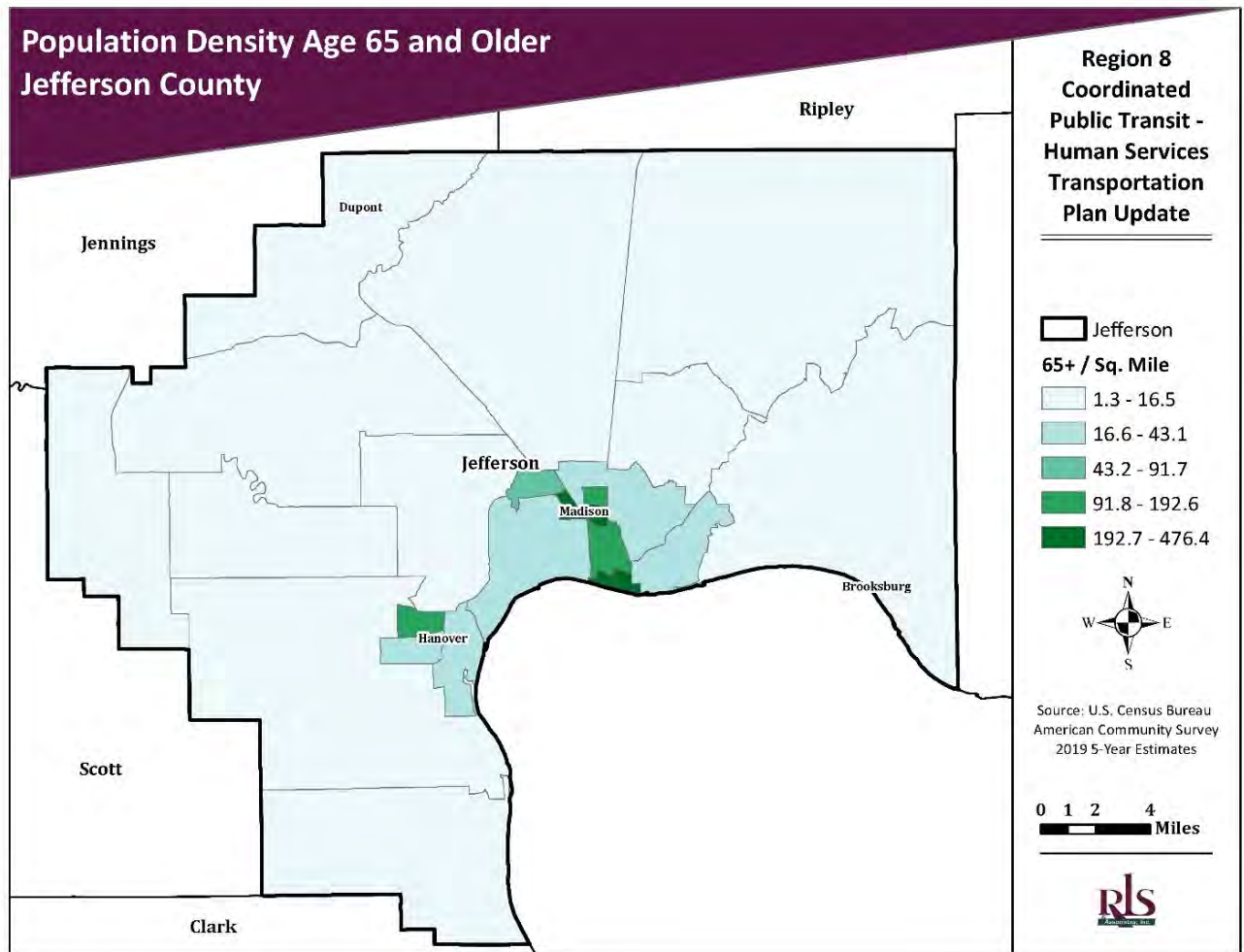
Source: 2019 ACS Five-Year Estimates

Jefferson County

Older Adult Population

Figure 19 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Jefferson County residents aged 65 and older are in and around Madison. These block groups have densities of older adults between 192.7 and 476.4 persons per square mile. Areas in and around Madison also have moderate densities of persons age 65 and older (91.8 to 192.6). The remainder of the county has low to very low densities of persons age 65 and older.

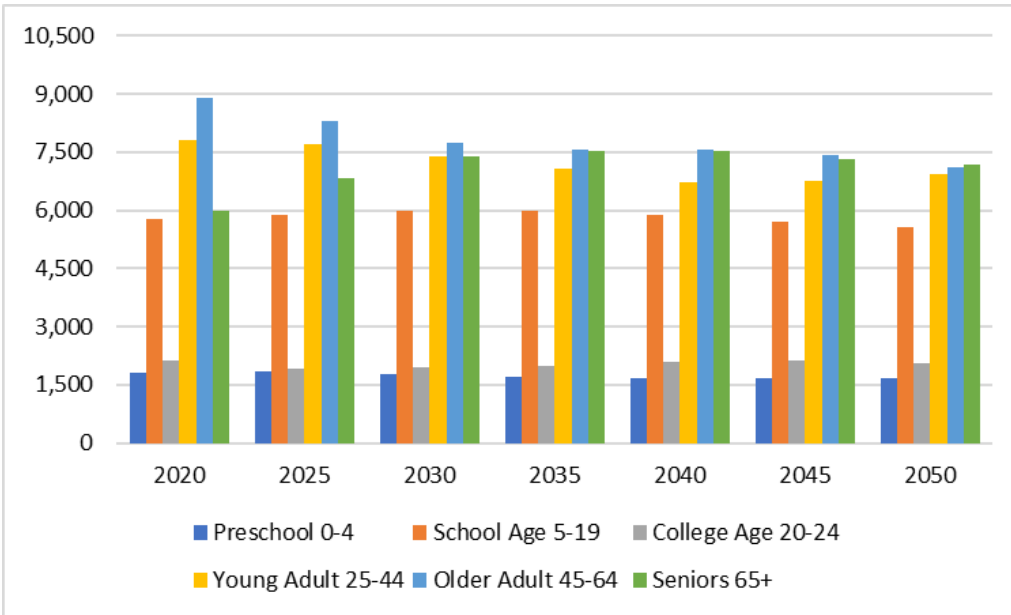
Figure 19: Jefferson County Older Adult Population



Population by Age

Figure 20 shows that the largest age cohort for Jefferson County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Jefferson County over the next 30 years. Seniors (65+) are expected to grow from being the third largest age group in 2020 to the largest in 2050. Currently, the smallest age group in Jefferson County is children under the age of 5, who are expected to see little to no change between 2020 and 2050.

Figure 20: Jefferson County Population by Age



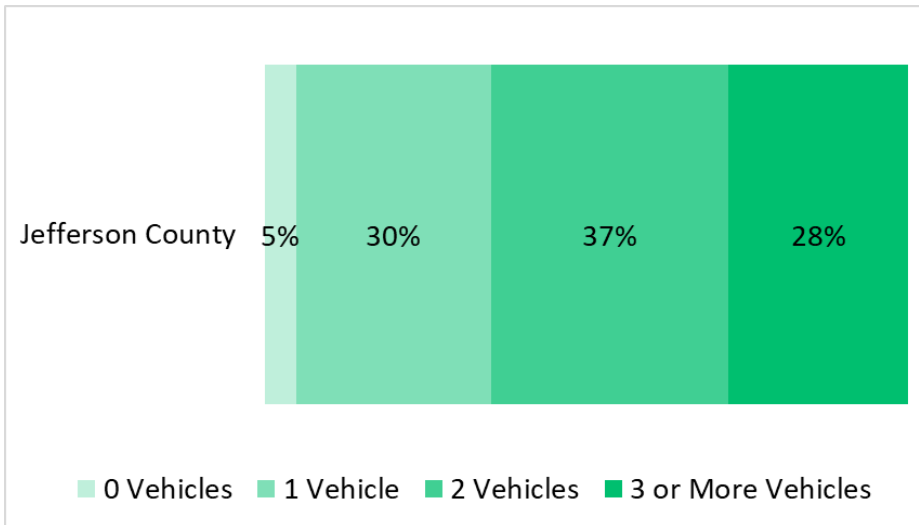
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 21 shows the breakdown of vehicle availability by household within Jefferson County. Of all households in the county, only five percent of the households do not have a vehicle and an additional 30 percent only have one vehicle.

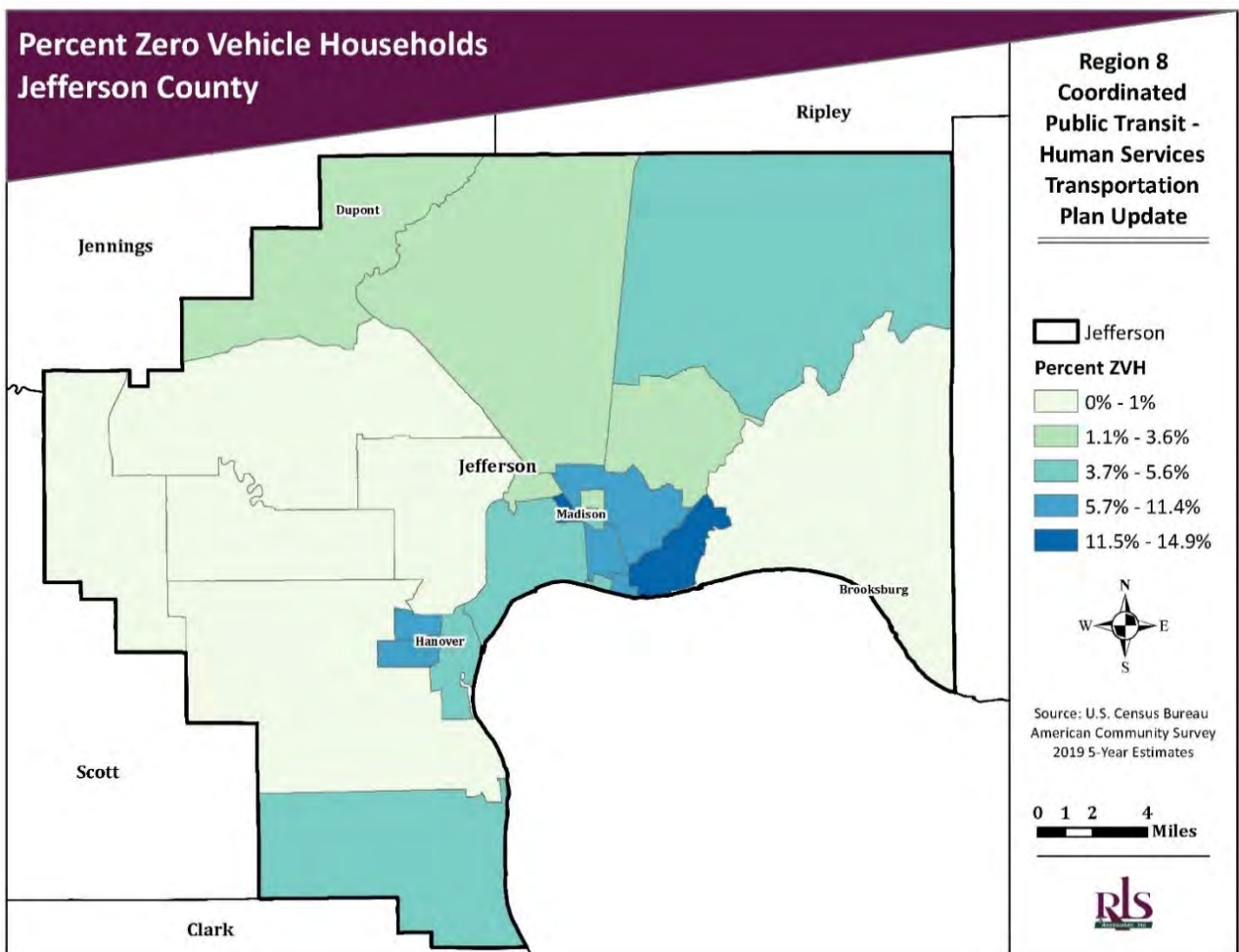
Figure 22 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in and east of Madison. Over 11.5 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 5.7 to 11.4 percent of zero vehicle households can be found around Madison and Hanover. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 21: Jefferson County Household Vehicle Availability



Source: 2019 ACS Five-Year Estimates

Figure 22: Jefferson County Zero Vehicle Households

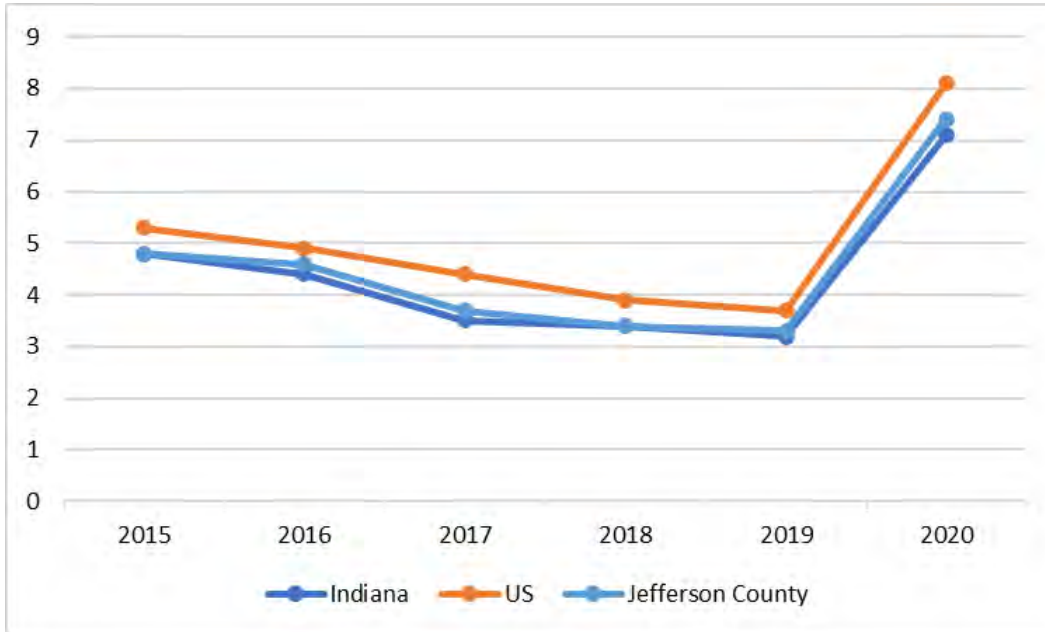


Unemployment

Jefferson County’s unemployment rate reached a high in 2020 of 7.4 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) but slightly higher than the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Jefferson County paralleled the national unemployment average trend, but fluctuated between being higher and matching the Indiana rate. Figure 23 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 23: Jefferson County Comparison of Unemployment Rates

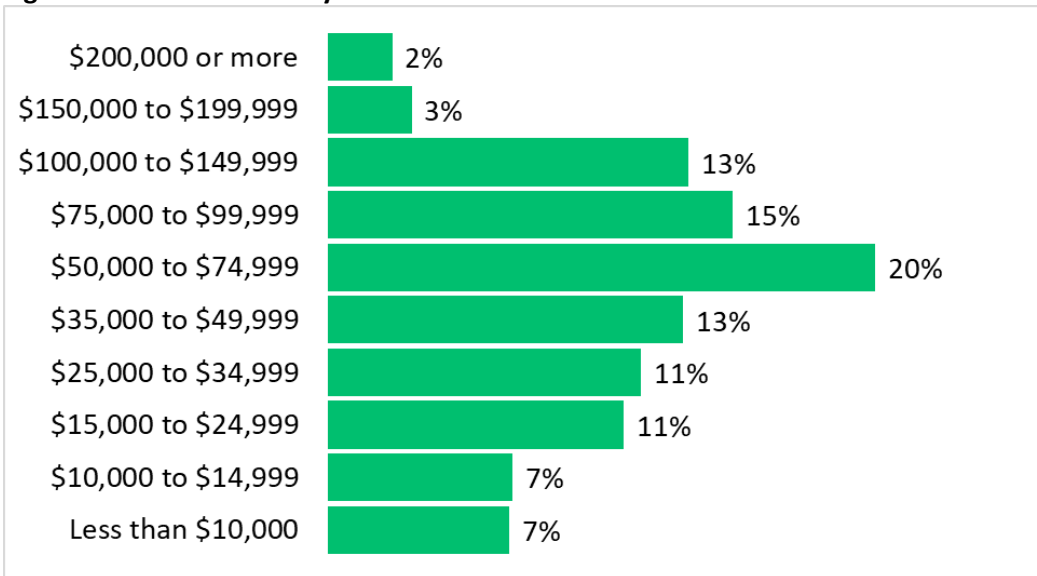


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 24 shows the annual household income breakdown by percentage of total households in the county. Out of 12,632 households in the county, 36 percent of them make less than \$35,000 per year. Of which, seven percent earn less than \$10,000 per year.

Figure 24: Jefferson County Annual Household Income



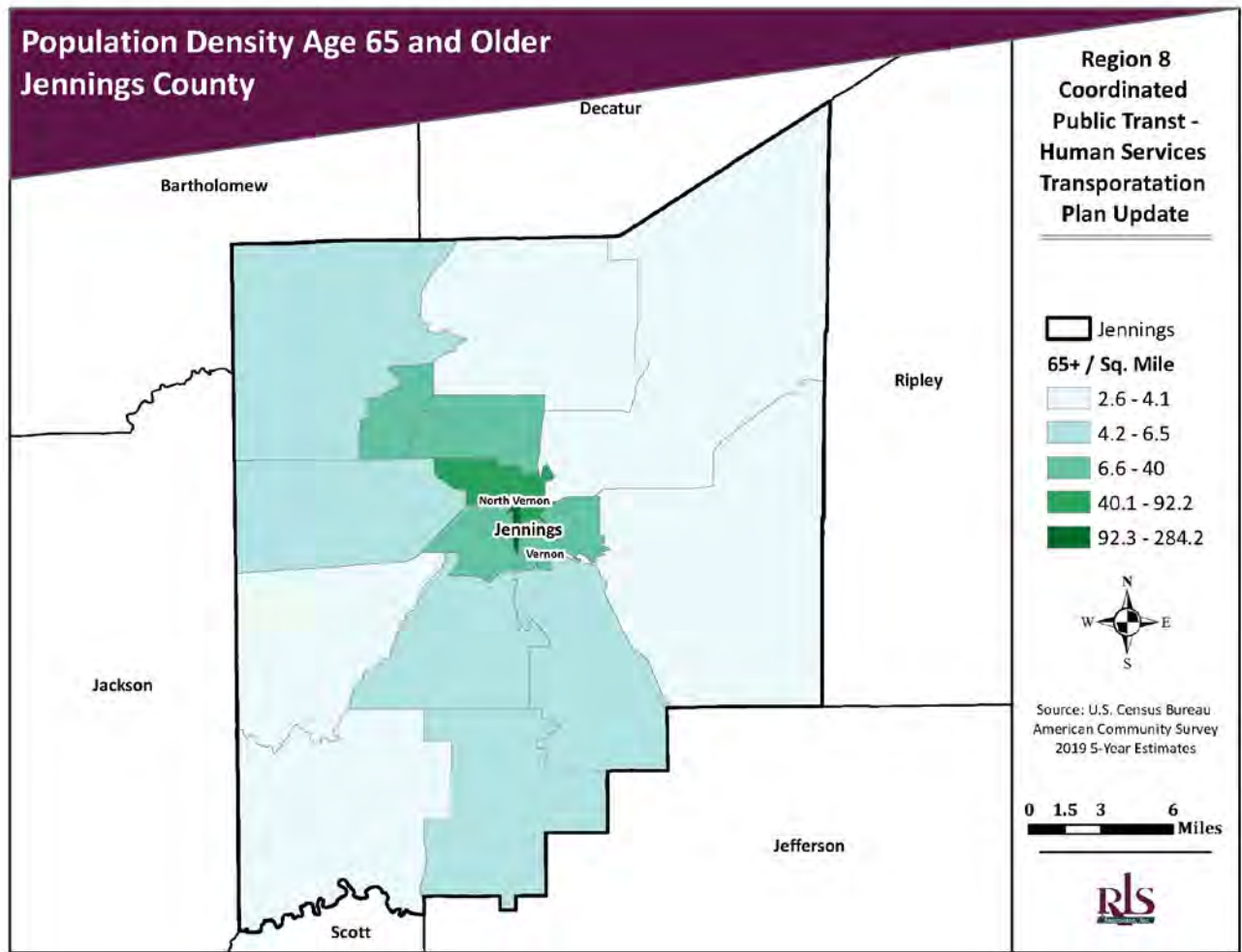
Source: 2019 ACS Five-Year Estimates

Jennings County

Older Adult Population

Figure 25 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Jennings County residents aged 65 and older are in and around North Vernon. These block groups have densities of older adults between 92.3 and 284.2 persons per square mile. Areas in and around North Vernon also have moderate densities of persons age 65 and older (40.1 to 92.2). The remainder of the county has low to very low densities of persons age 65 and older.

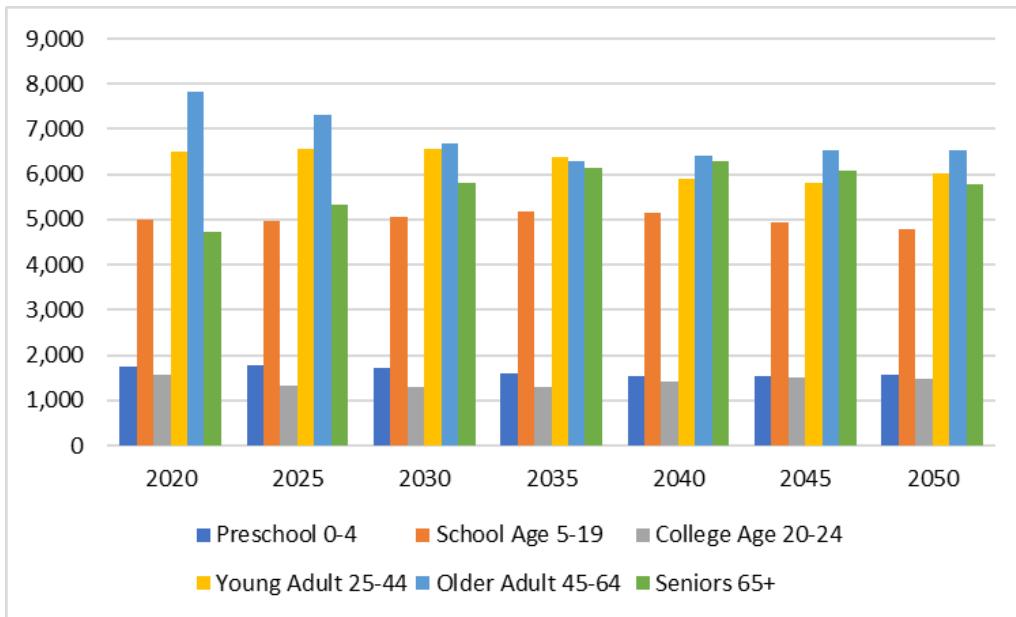
Figure 25: Jennings County Older Adult Population Density



Population by Age

Figure 26 shows that the largest age cohort for Jennings County is between the ages of 45 and 64. This age group is expected to be the largest group in Jennings County over the next 30 years. The second largest group in the county is Young Adults (25 to 44), who are expecting to slightly decrease in size but still be the second largest group by 2050. Currently, the smallest age group in Jennings County is college age individuals (20 to 24), who are expected to see little to no change between 2020 and 2050.

Figure 26: Jennings County Population by Age



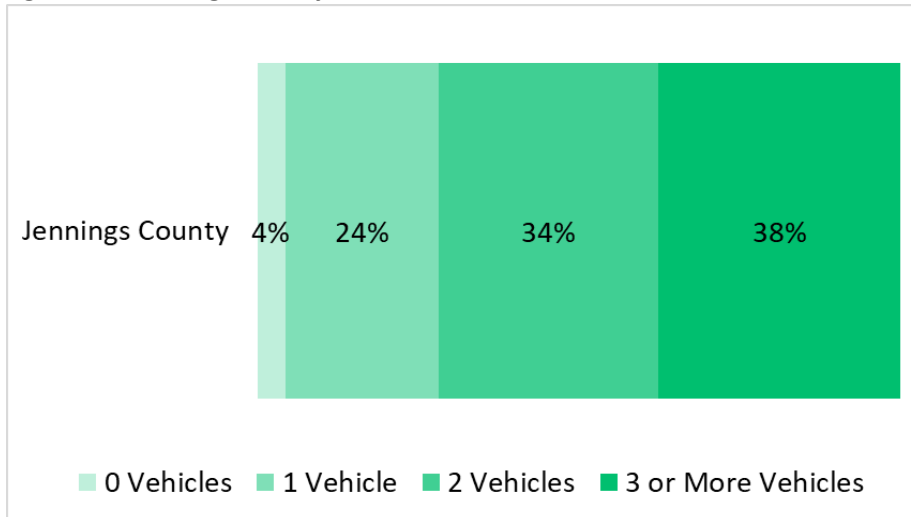
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 27 shows the breakdown of vehicle availability by household within Jennings County. Of all households in the county, four percent of the households do not have a vehicle and an additional 24 percent only have one vehicle.

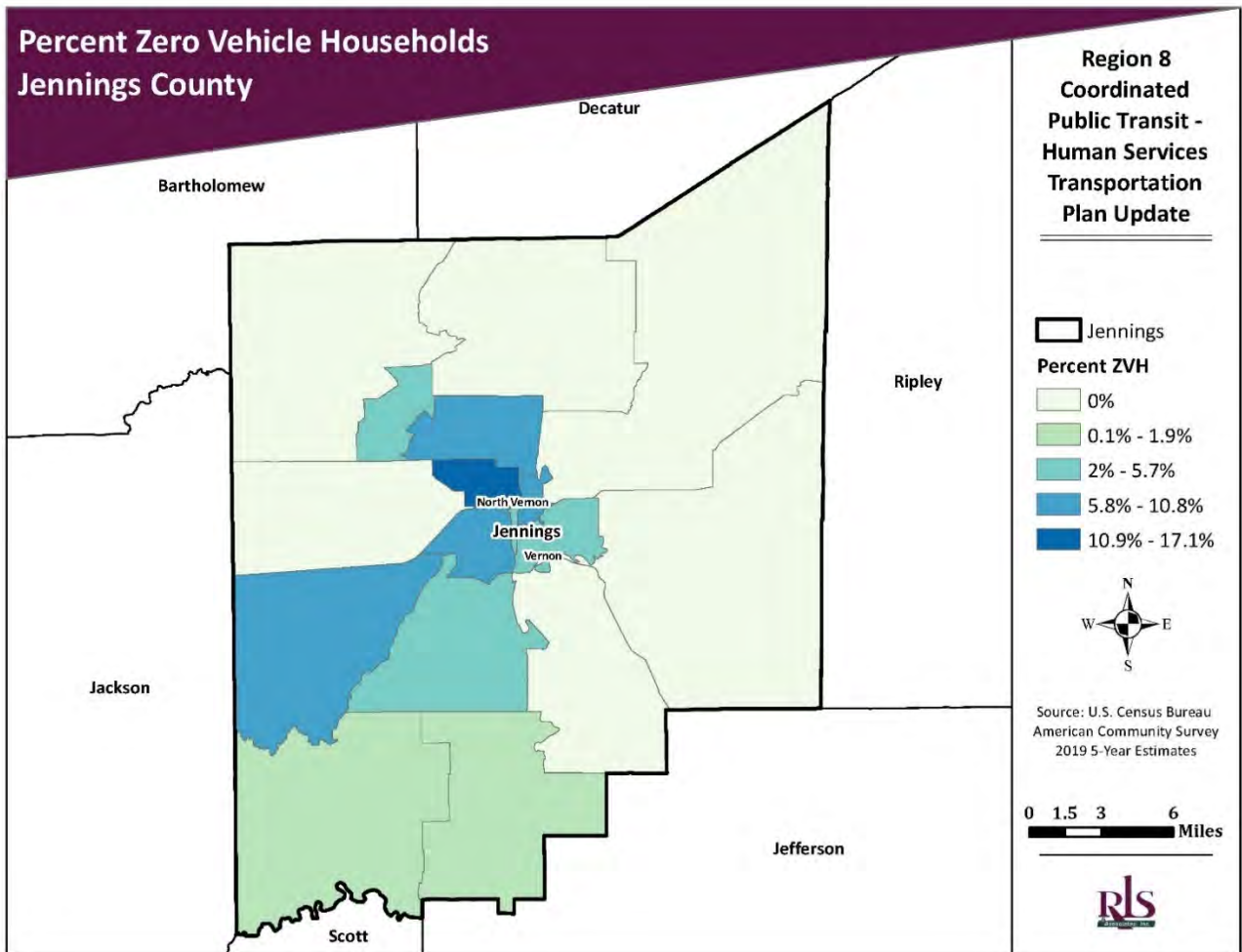
Figure 28 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in North Vernon. Over 10.9 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 5.8 to 10.8 percent of zero vehicle households can also be found in and around North Vernon and in western Jennings County. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 27: Jennings County Percent Zero Vehicle Households



Source: 2019 ACS Five-Year Estimates

Figure 28: Jennings County Zero Vehicle Households

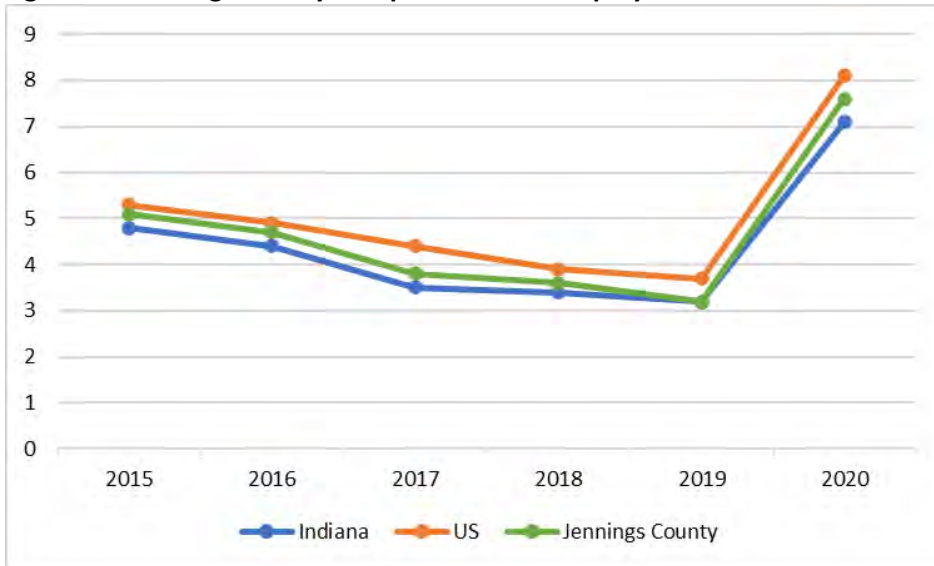


Unemployment

Jennings County’s unemployment rate reached a high in 2020 of 7.6 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) but higher than the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Jennings County paralleled the national unemployment average trend, but was consistently higher or the same as the Indiana rate. Figure 29 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 29: Jennings County Comparison of Unemployment Rates

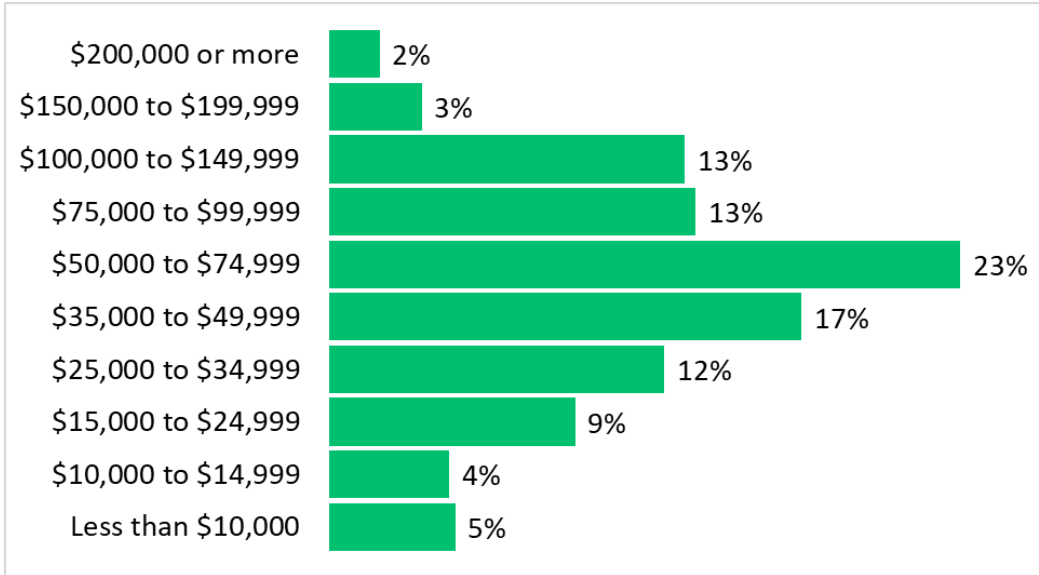


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 30 shows the annual household income breakdown by percentage of total households in the county. Out of 10,792 households in the county, 30 percent of them make less than \$35,000 per year. Of which, five percent earn less than \$10,000 per year.

Figure 30: Jennings County Annual Household Income



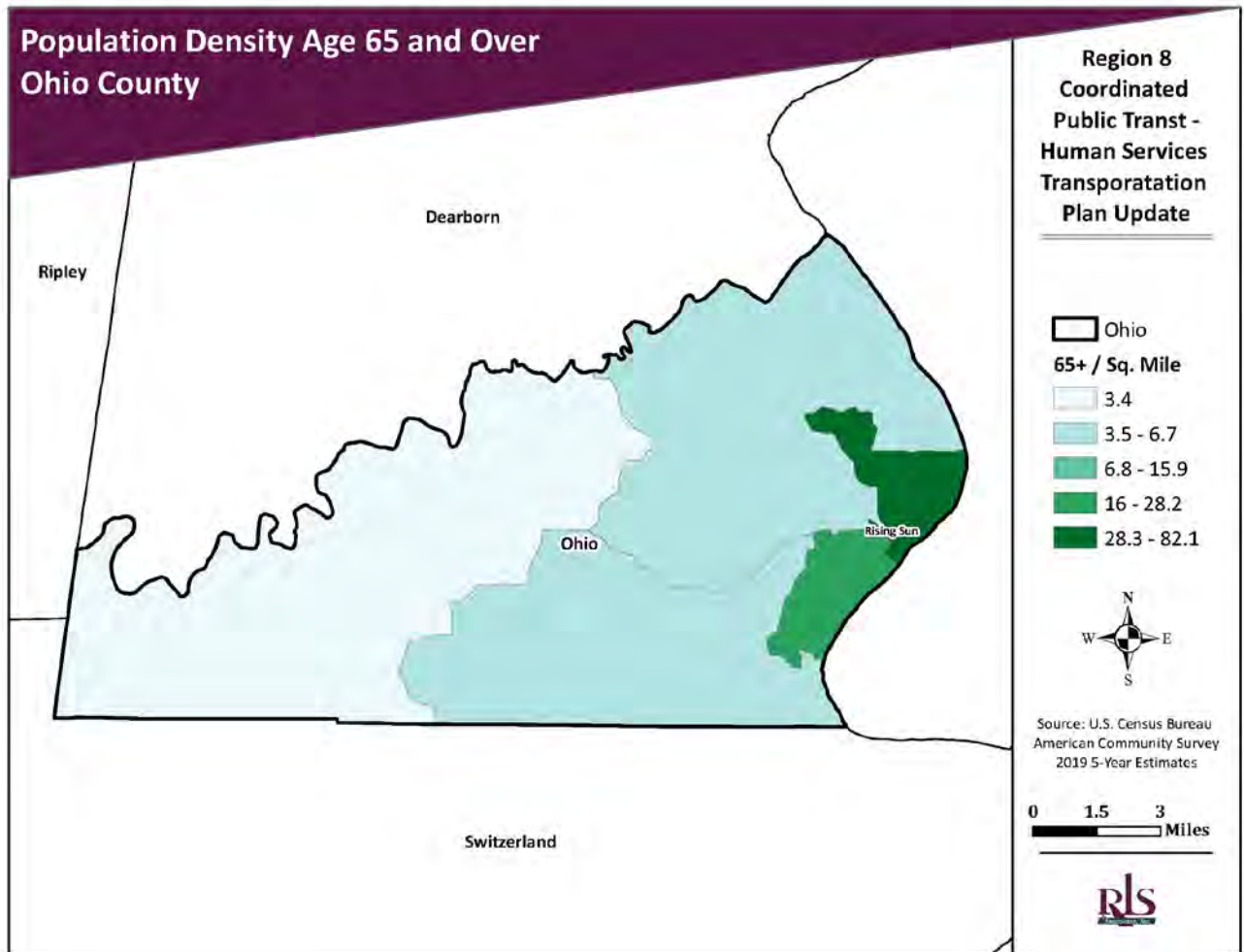
Source: 2019 ACS Five-Year Estimates

Ohio County

Older Adult Population

Figure 31 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Ohio County residents aged 65 and older are in Rising Sun. These block groups have densities of older adults between 28.3 and 82.1 persons per square mile. Areas around Rising Sun also have moderate densities of persons age 65 and older (16 to 28.2). The remainder of the county has low to very low densities of persons age 65 and older.

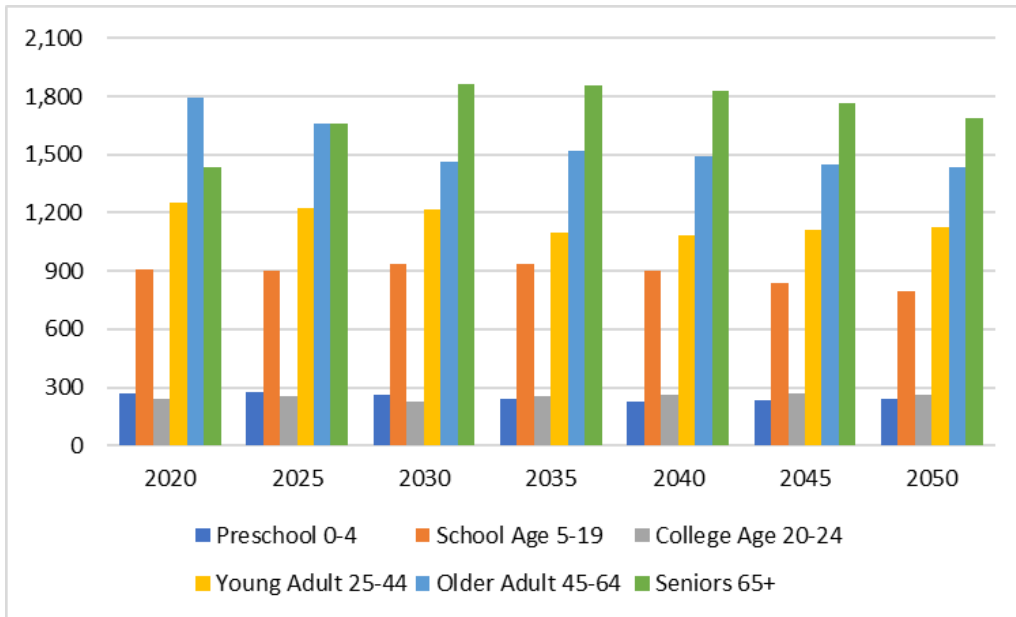
Figure 31: Ohio County Older Adult Population Density



Population by Age

Figure 32 shows that the largest age cohort for Ohio County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Ohio County over the next 30 years while declining over that time. Seniors (65+) will become the county’s largest age group after 2025. Currently, the smallest age group in Ohio County is College Age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

Figure 32: Ohio County Population by Age



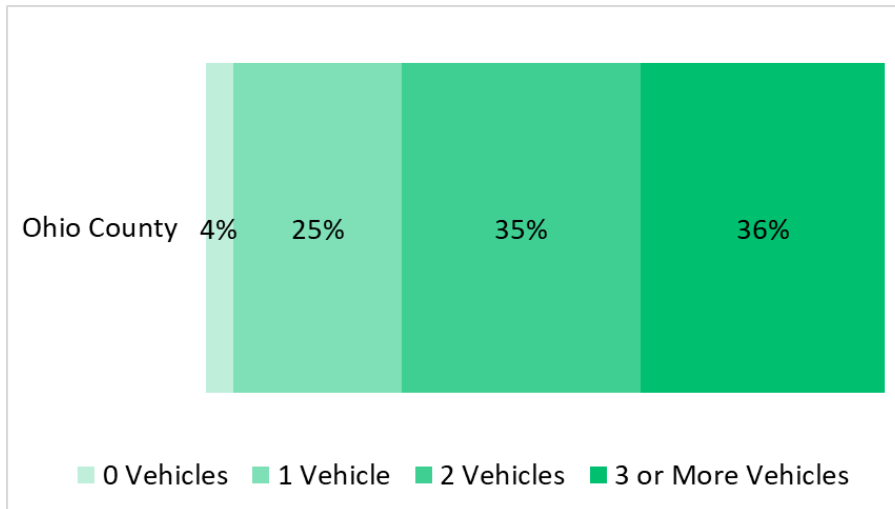
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 33 shows the breakdown of vehicle availability by household within Ohio County. Of all households in the county, only four percent of the households do not have a vehicle and an additional 25 percent only have one vehicle.

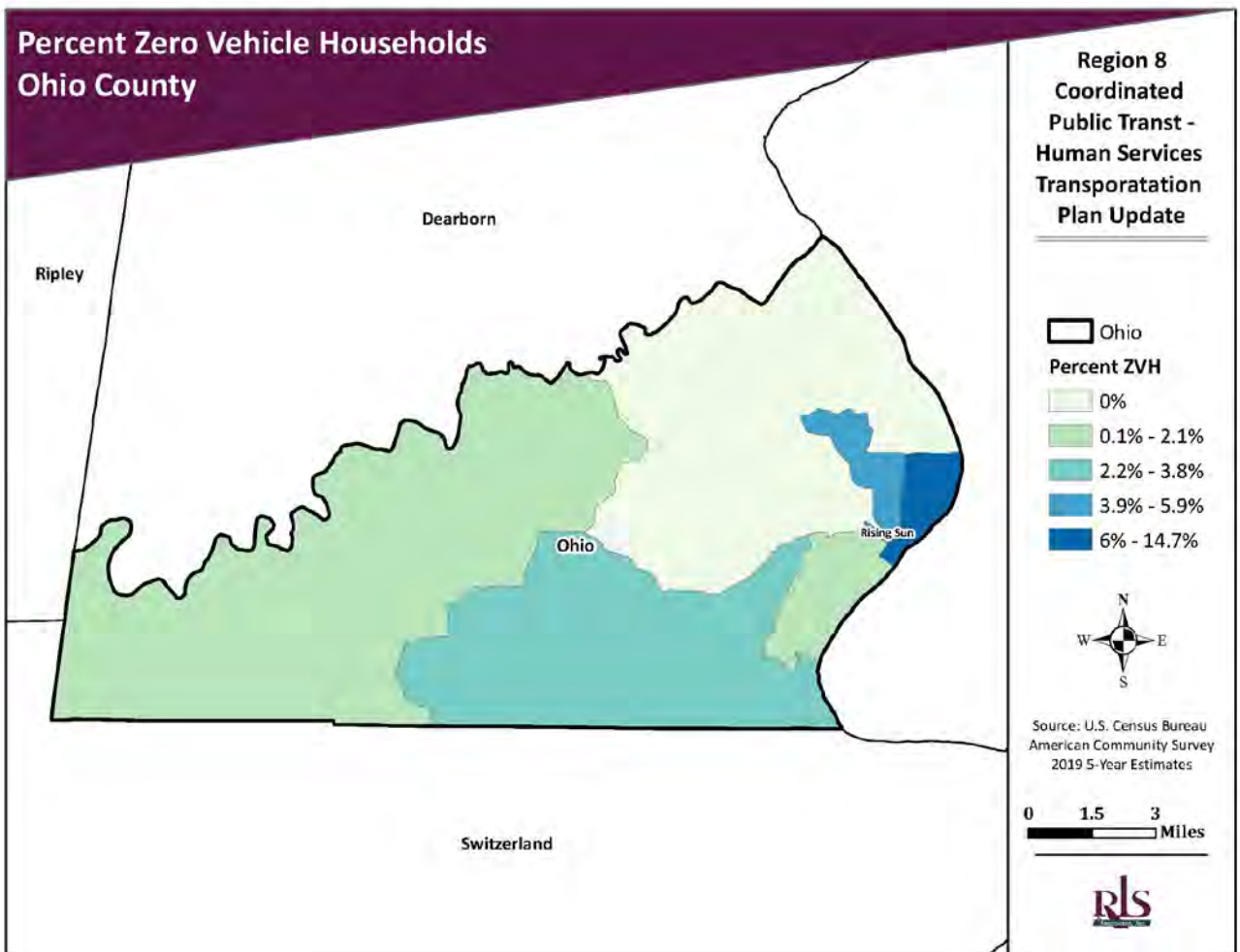
Figure 34 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in Rising Sun. Over 6 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 3.9 to 5.9 percent of zero vehicle households can also be found in Rising Sun. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 33: Ohio County Household Vehicle Availability



Source: 2019 ACS Five-Year Estimates

Figure 34: Ohio County Zero Vehicle Households

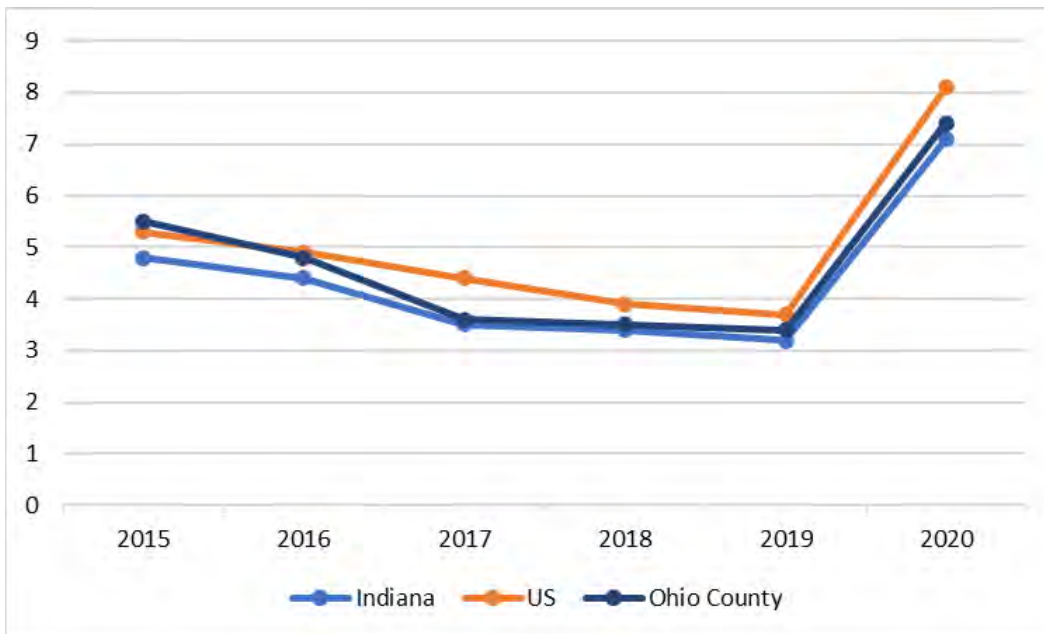


Unemployment

Ohio County's unemployment rate reached a high in 2020 of 7.4 percent, due to the COVID-19 pandemic, which tied their 2015 rate. This was lower than that of the United States (8.1) but higher than the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Ohio County paralleled the national unemployment average trend, but fluctuated with matching and being lower than the U.S. rate. Figure 35 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 35: Ohio County Comparison of Unemployment Rates

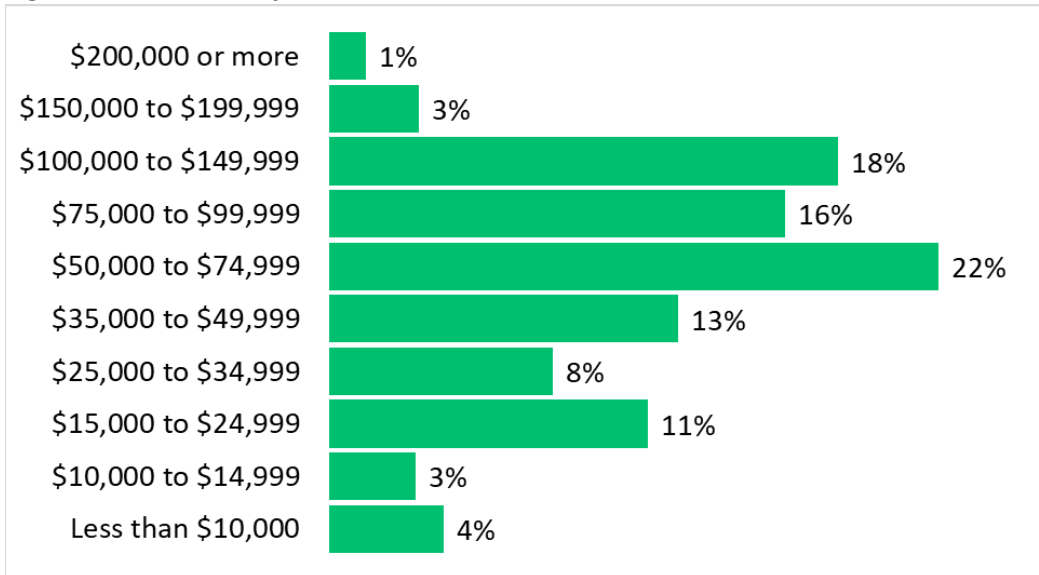


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 36 shows the annual household income breakdown by percentage of total households in the county. Out of 2,555 households in the county, 26 percent of them make less than \$35,000 per year. Of which, four percent earn less than \$10,000 per year.

Figure 36: Ohio County Annual Household Income



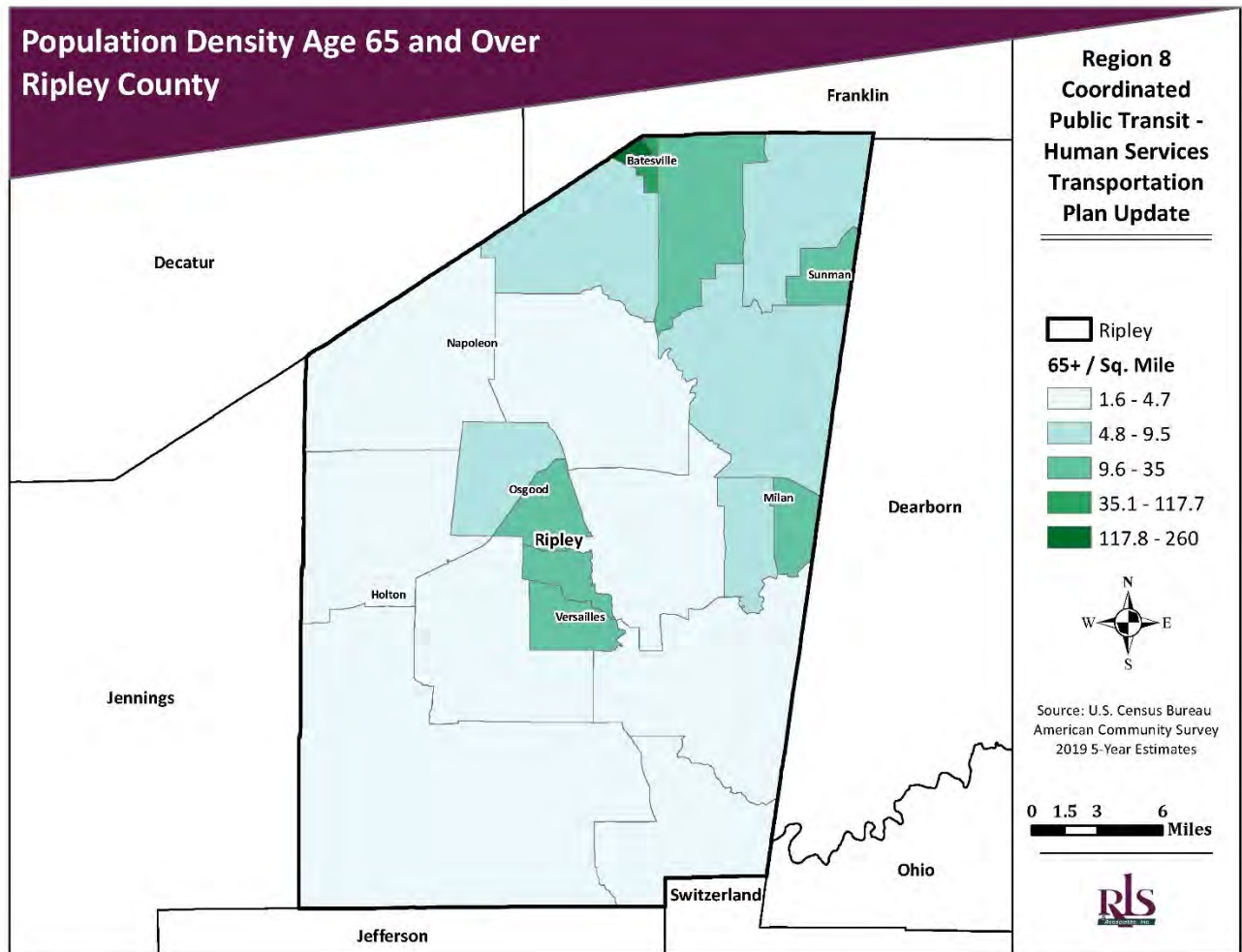
Source: 2019 ACS Five-Year Estimates

Ripley County

Older Adult Population

Figure 37 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Ripley County residents aged 65 and older are in Batesville. These block groups have densities of older adults between 117.8 and 260 persons per square mile. Areas around Batesville also have moderate densities of persons age 65 and older (35.1 to 117.7). The remainder of the county has low to very low densities of persons age 65 and older.

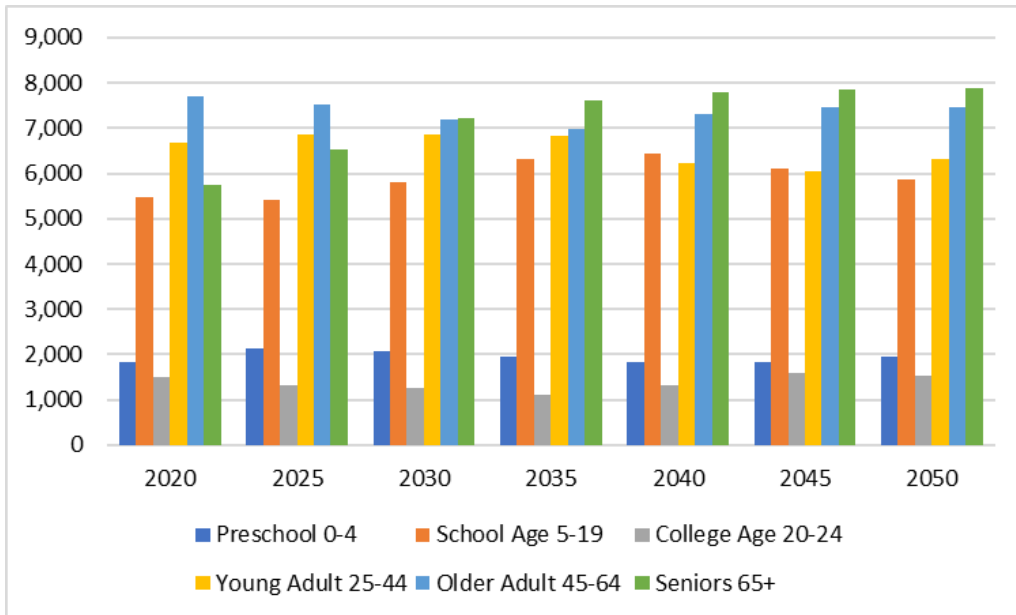
Figure 37: Ripley County Older Adult Population Density



Population by Age

Figure 38 shows that the largest age cohort for Ripley County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Ripley County over the next 30 years. In 2030, Seniors (65+) will become the county’s largest age group. Currently, the smallest age group in Ripley County is college age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

Figure 38: Ripley County Population by Age



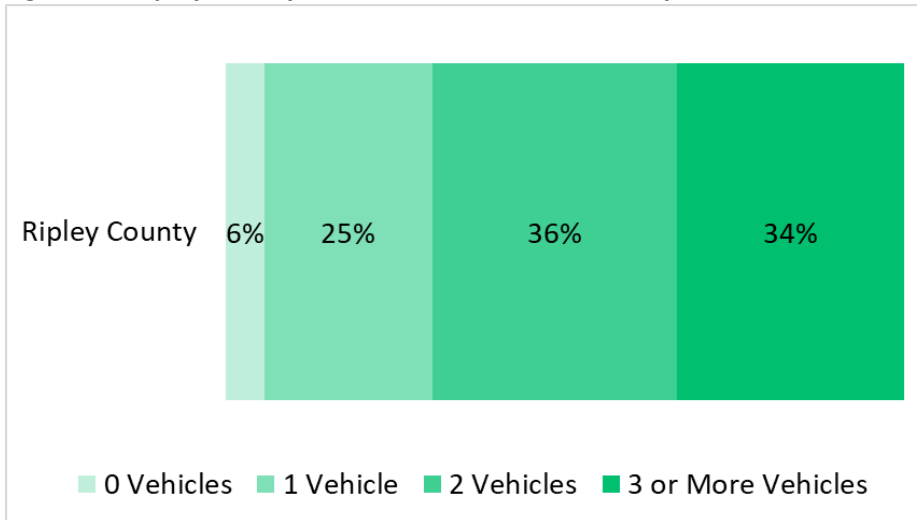
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 39 shows the breakdown of vehicle availability by household within Ripley County. Of all households in the county, only six percent of the households do not have a vehicle and an additional 25 percent only have one vehicle.

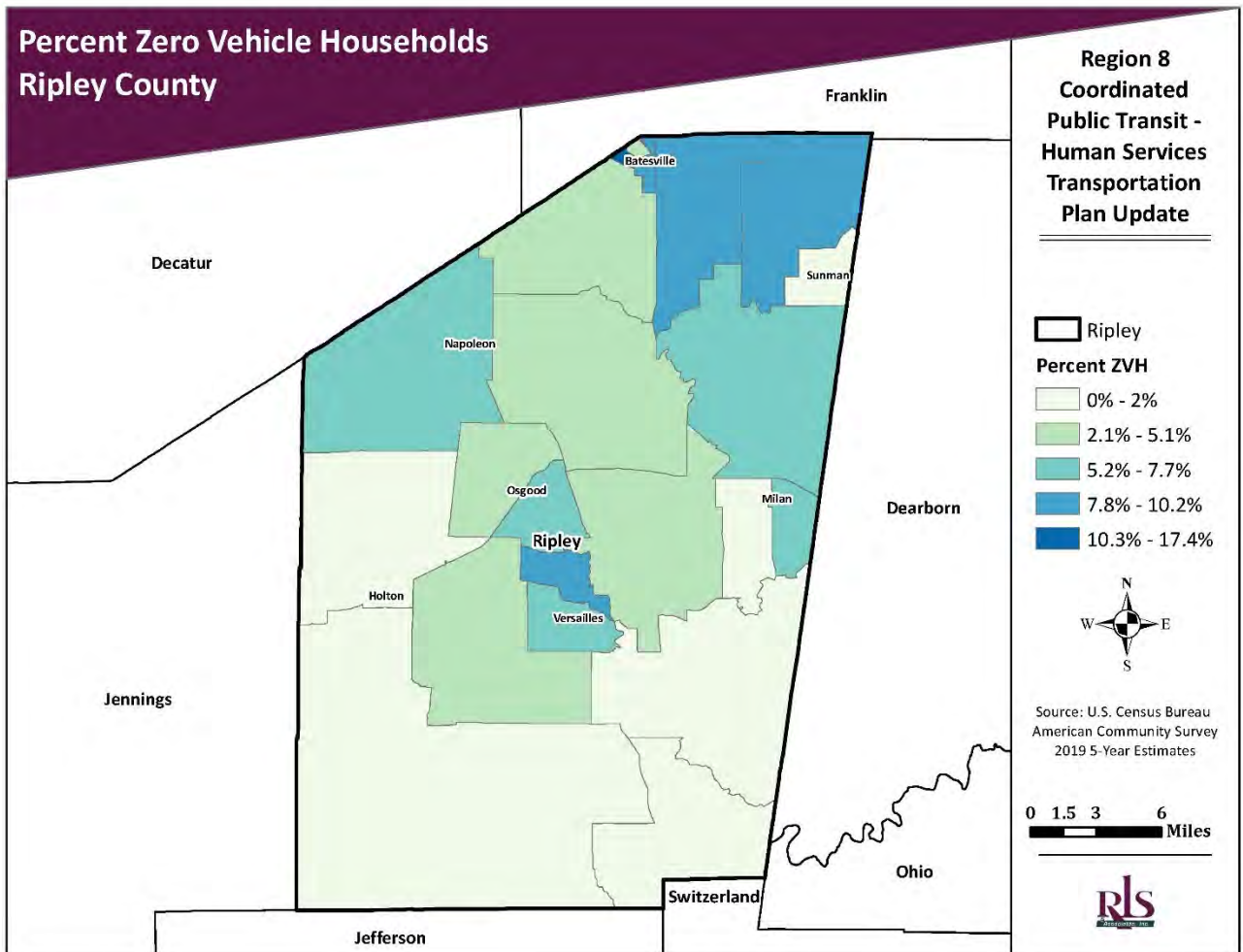
Figure 40 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in Batesville. Over 10.3 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 7.8 to 10.2 percent of zero vehicle households can also be found in northern and central Ripley County. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 39: Ripley County Household Vehicle Availability



Source: 2019 ACS Five-Year Estimates

Figure 40: Ripley County Zero Vehicle Households

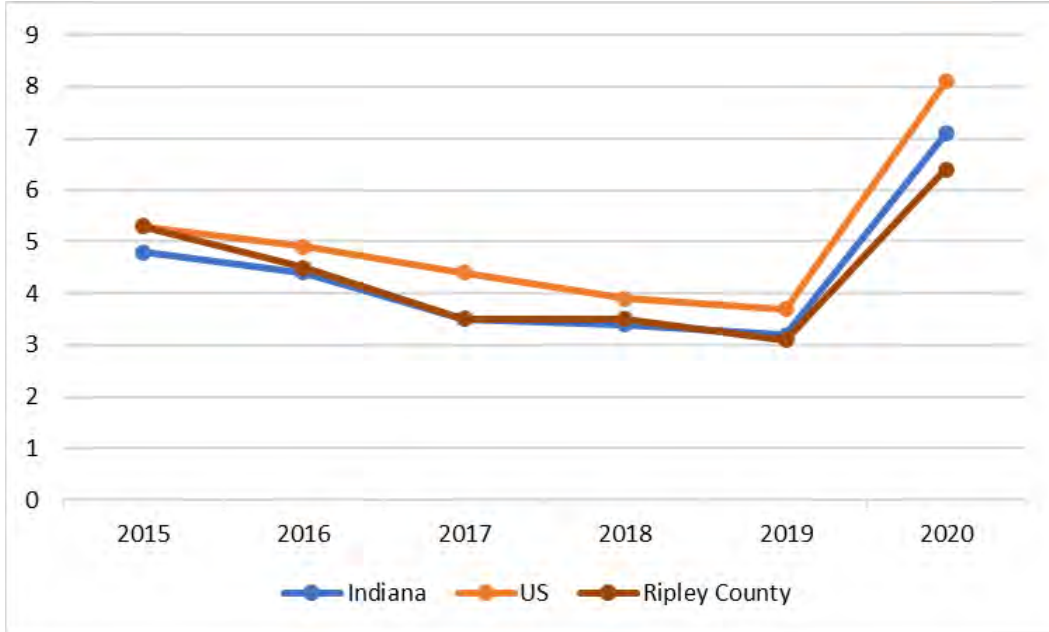


Unemployment

Ripley County's unemployment rate reached a high in 2020 of 6.4 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) and the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Ripley County paralleled the national unemployment average trend, but fluctuated between being higher and lower than the Indiana rate. Figure 41 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 41: Ripley County Comparison of Unemployment Rates

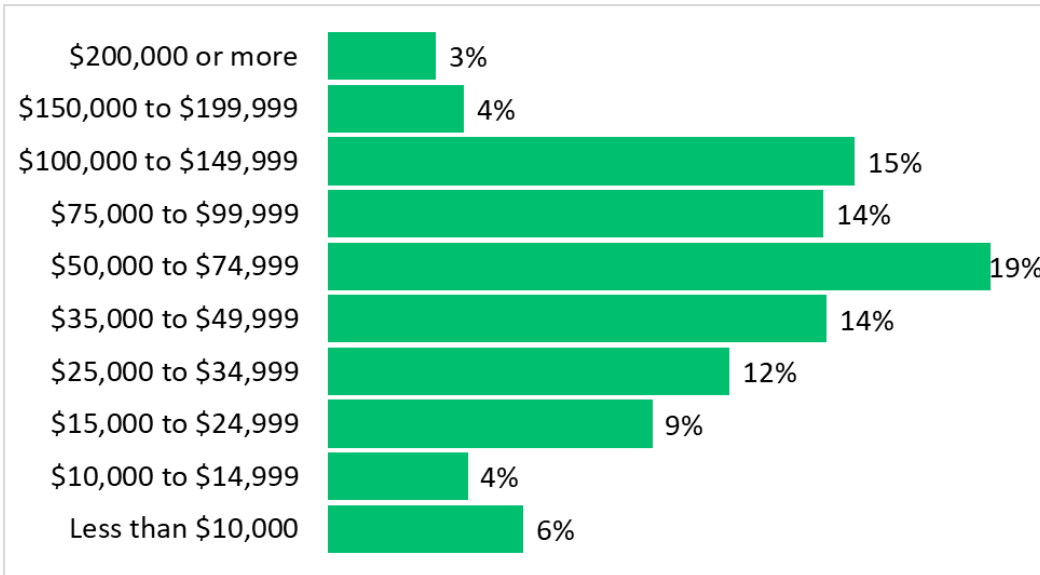


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 42 shows the annual household income breakdown by percentage of total households in the county. Out of 10,992 households in the county, 31 percent of them make less than \$35,000 per year. Of which, six percent earn less than \$10,000 per year.

Figure 42: Ripley County Annual Household Income



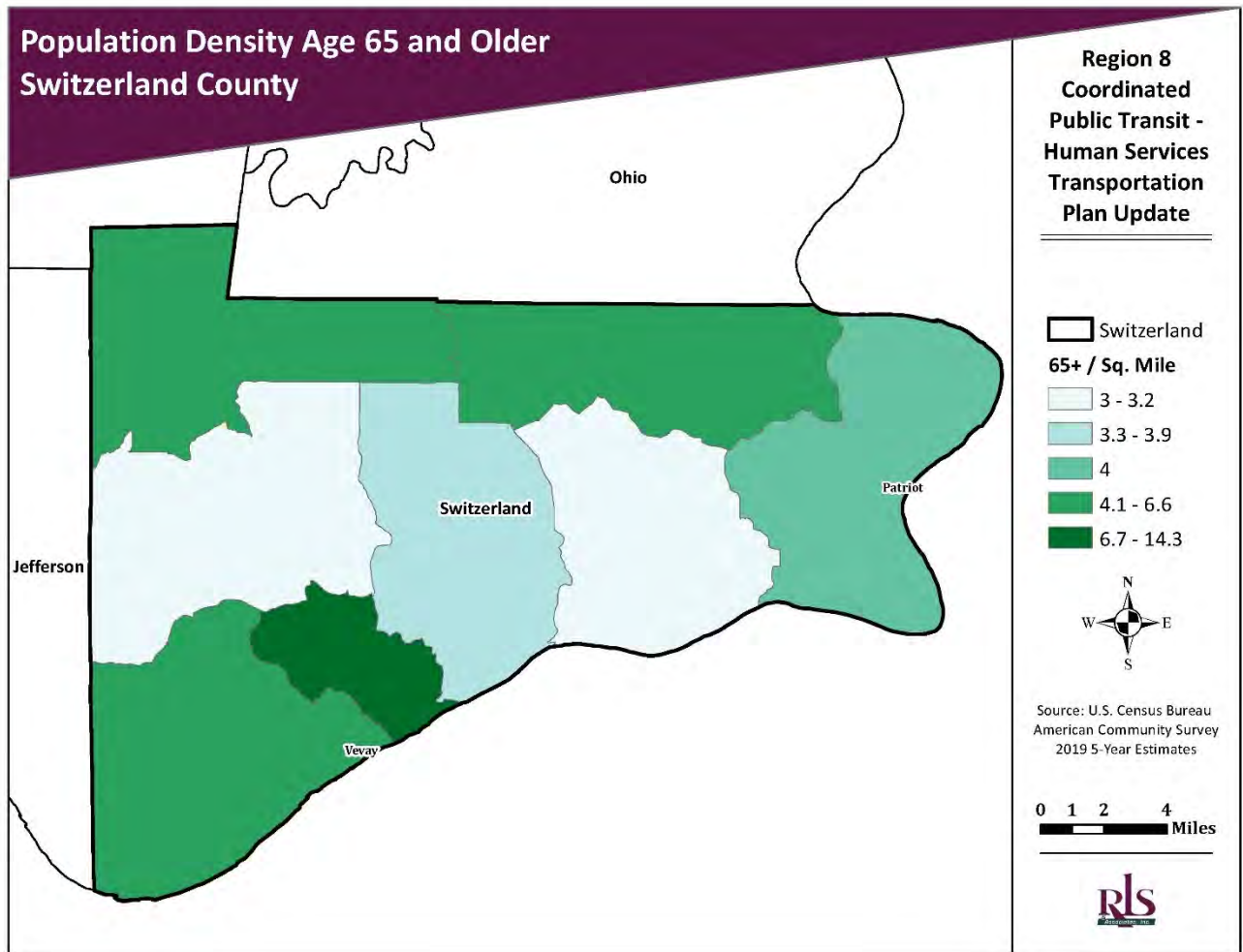
Source: 2019 ACS Five-Year Estimates

Switzerland County

Older Adult Population

Figure 43 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Switzerland County residents aged 65 and older are around Vevay. These block groups have densities of older adults between 6.7 and 14.3 persons per square mile. Areas northern and southern Switzerland County also have moderate densities of persons age 65 and older (4.1 to 6.6). The remainder of the county has low to very low densities of persons age 65 and older.

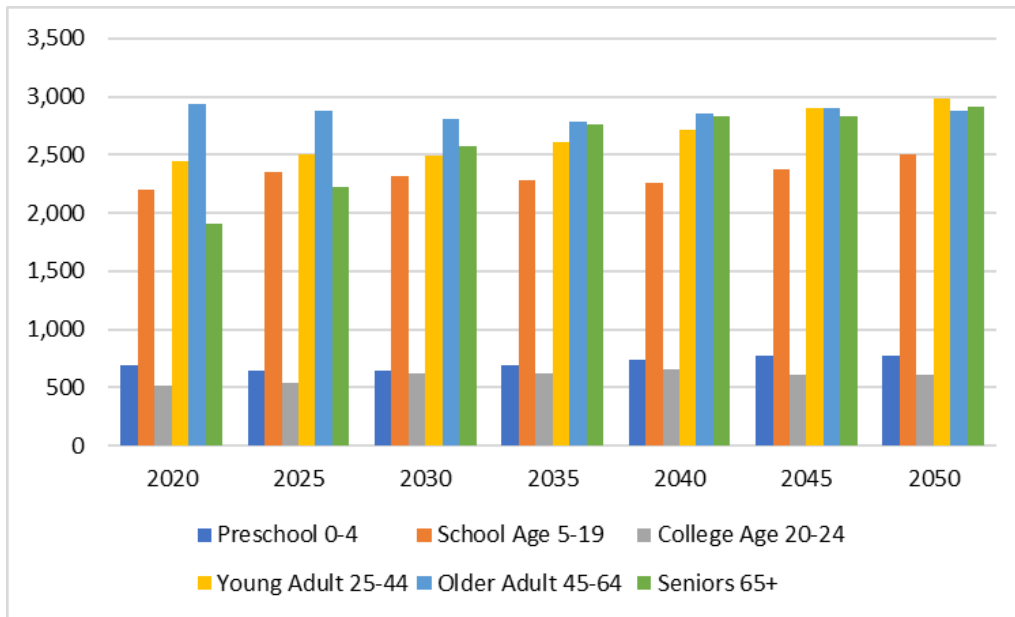
Figure 43: Switzerland County Older Adult Population Density



Population by Age

Figure 44 shows that the largest age cohort for Switzerland County is between the ages of 45 and 64. This age group is expected to be the third largest group in Switzerland County by 2050. Over the next 30 years, Young Adults (25-44) and Seniors (65+) are expected to become the two largest age groups. Currently, the smallest age group in Switzerland County is college age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

Figure 44: Switzerland County Population by Age



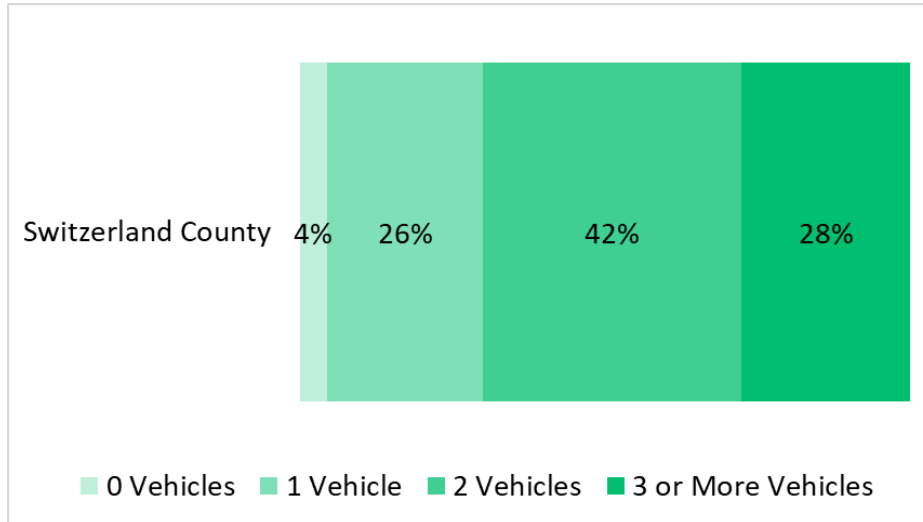
Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 45 shows the breakdown of vehicle availability by household within Switzerland County. Of all households in the county, only four percent of the households do not have a vehicle and an additional 26 percent only have one vehicle.

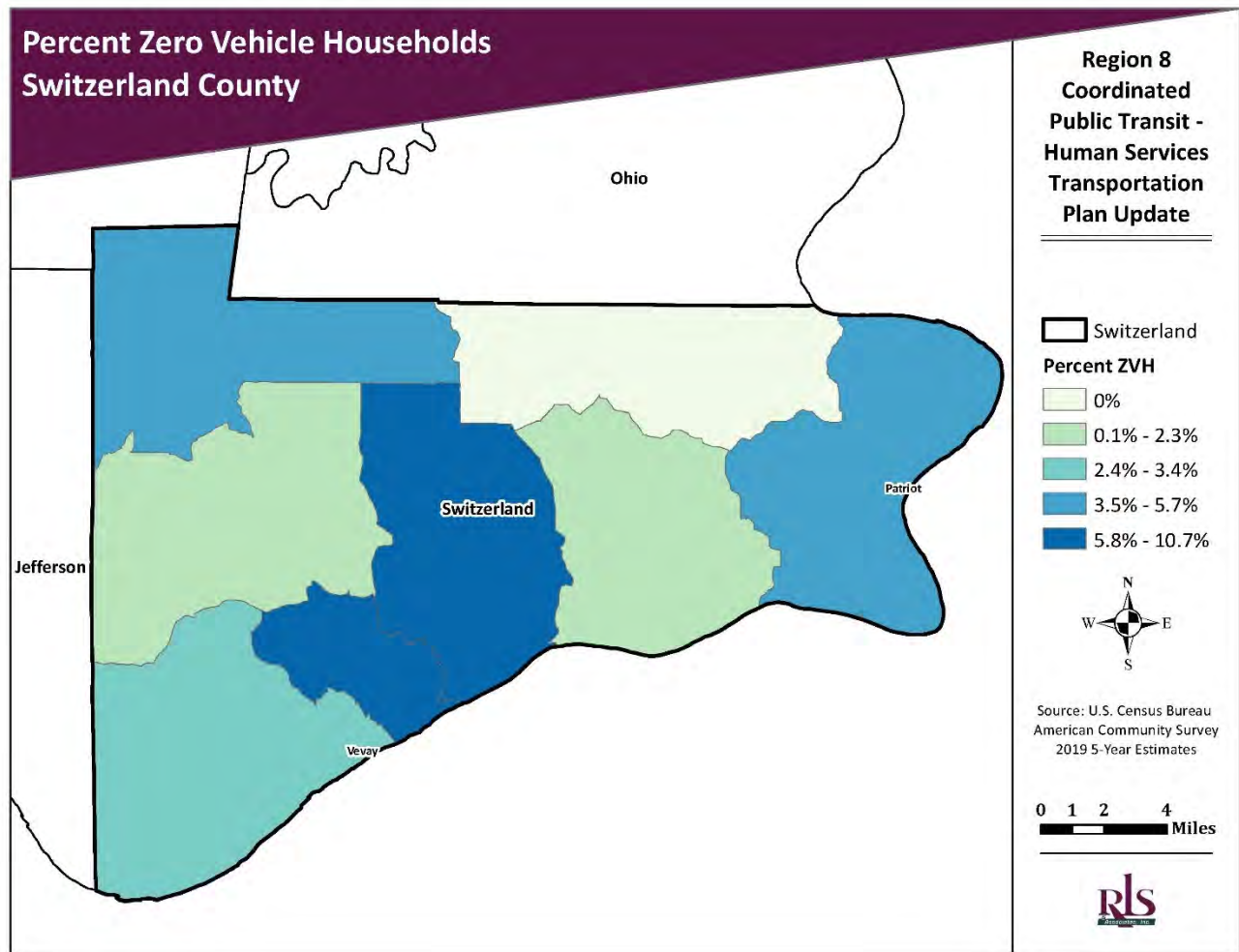
Figure 46 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in central Switzerland County. Over 5.8 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 3.5 to 5.7 percent of zero vehicle households can also be found in northern and eastern Switzerland County. The remainder of the county has moderate to very low percentages of zero vehicle households.

Figure 45: Switzerland County Household Vehicle Availability



Source: 2019 ACS Five-Year Estimates

Figure 46: Switzerland County Zero Vehicle Households

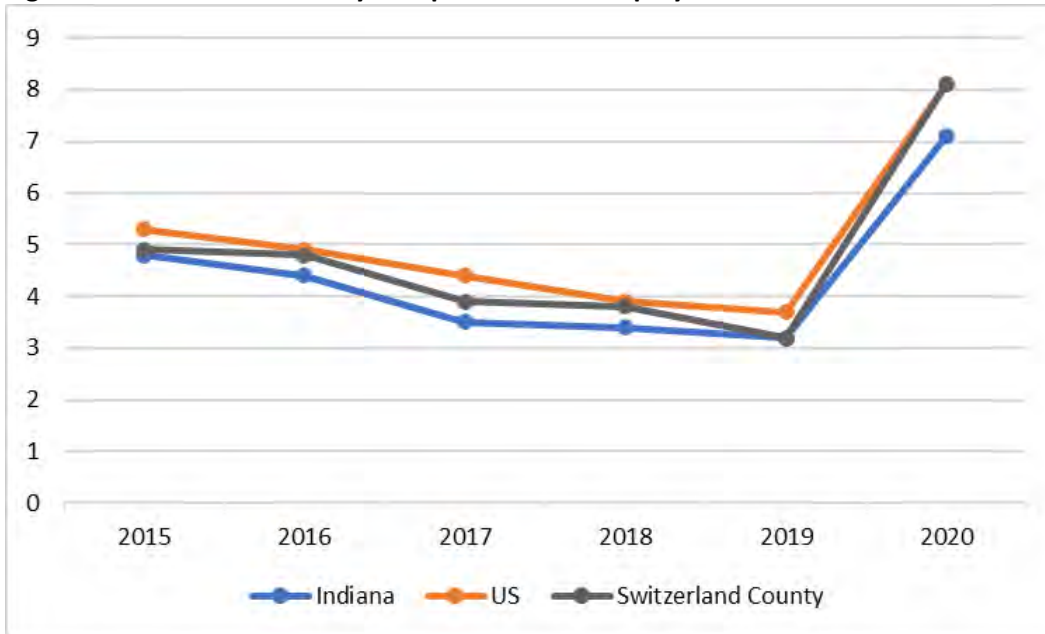


Unemployment

Switzerland County’s unemployment rate reached a high in 2020 of 8.1 percent, due to the COVID-19 pandemic. This matched that of the United States (8.1) and was higher than the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Switzerland County paralleled the national unemployment average trend, but fluctuated with matching and being higher than the Indiana rate. Figure 47 illustrates a comparison of the unemployment rates in the county, state, and nation.

Figure 47: Switzerland County Comparison of Unemployment Rates

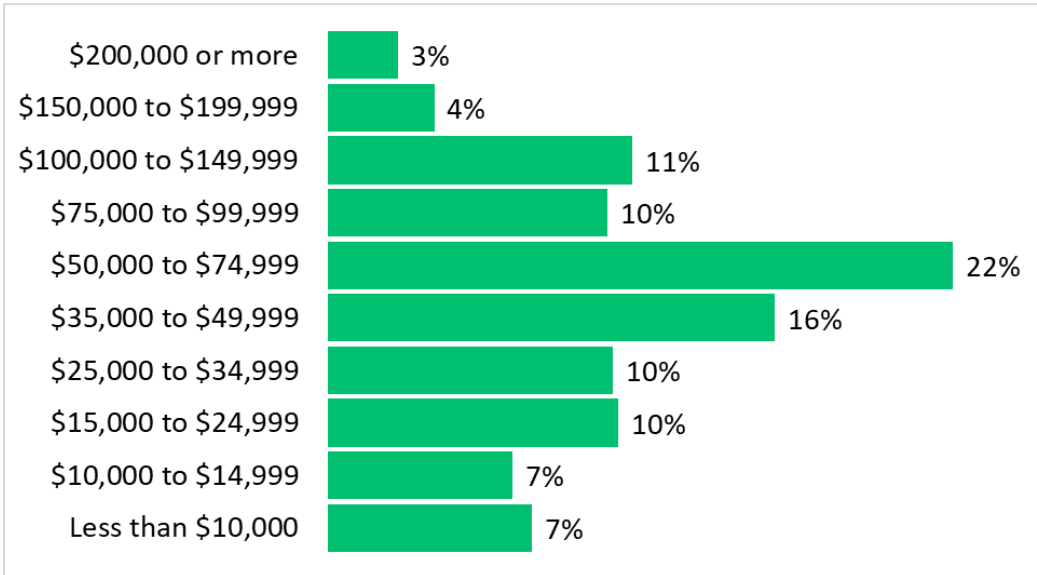


Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 48 shows the annual household income breakdown by percentage of total households in the county. Out of 4,349 households in the county, 35 percent of them make less than \$35,000 per year. Of which, seven percent earn less than \$10,000 per year.

Figure 48: Switzerland County Annual Household Income



Source: 2019 ACS Five-Year Estimates

INVENTORY OF EXISTING TRANSPORTATION PROVIDERS

INTRODUCTION

Providers of public and human service transportation were asked to provide service and asset data to for the purpose of updating the transportation provider inventory for the Region. Provider agencies were also invited to participate in a public meeting to evaluate unmet human service transportation needs and service gaps. The public meeting included a discussion of goals and strategies/projects to address unmet needs and service gaps, and promote coordination in the delivery of transportation services to maximize the use of resources.

An update of the inventory of provider services and vehicle inventory was obtained through phone interviews and e-mail requests conducted prior to the public meeting. This was done in order to promote active participation in the public meetings, familiarize the providers with the public meeting process, and stimulate discussion of key mobility issues while updating the description of the types and manner of service delivery (including types of services, funding sources, eligibility, hours of service, ridership and fare/donation policies) for the providers in the Region.

The Region 8 provider summaries listed below include Section 5310-funded providers who serve primarily older adults and individuals with disabilities. These agencies provide transportation primarily to their agency consumers but may have the potential for shared services with other providers in the future.

Rural public transit agencies, those funded with FTA Section 5311 funding, also serve these same older adult and individuals with disability populations. Many of these public and non-profit agencies also receive operating funding through Medicaid and Title III-B of the Older Americans Act which focuses on serving persons 60 and over as well as funding for vehicle replacement through the FTA Section 5310 program. These programs exemplify the goal of promoting mixed client riding and coordinated provision of mobility services for a range of customer categories and trip destinations.

The list also includes agencies that are eligible for Section 5310 vehicle funding but until now experienced limited coordination with other providers and have been focused on providing services to their agency program consumers. However, their participation in the coordination process is essential so that their consumers are afforded the opportunity to access other community transit services.

EXISTING TRANSPORTATION RESOURCES

Region 8 is served by one regional public transit system. In addition, some regional human service agencies' transportation programs operate in some areas of Region 8. Table 2 provides basic information about each service.

Table 2: Region 8 Transportation Providers

	Catch-A-Ride	Developmental Services of Southern Indiana	Margaret Mary Health Rides	New Horizons Rehabilitation, Inc
Service Area	Dearborn, Decatur, Jefferson, Ohio, Ripley, and Switzerland Counties	56-county area of Central and Southern Indiana	Franklin and Ripley Counties	Dearborn, Franklin, Jennings, Ohio, and Ripley Counties
Provider Type	Public Transit	Human Service Agency	Hospital	Human Service Agency
Eligibility	General Public	Agency Clients	Patients	Agency Clients
Days/Hours of Service	Monday – Friday 6 AM – 6 PM	N/A	Monday – Friday 7 AM – 5 PM	N/A
Ridership (2020)	2019: 79,478 2020: 43,558	Not reported	Not reported	Not reported
Fare/Donation Structure	\$2 + \$0.25/mile for 6+ miles; \$1 Reduced + \$0.25/mile for 6+ miles; \$3.50 subscription + 0.25/mile for 6+ miles	N/A	\$3; Free for patients eligible for MMH’s financial assistance program or Medicare Transportation Waiver	N/A
Funding Sources	FTA Section 5311, Indiana PMTF, Contract Revenue, Other Sources	Medicaid; Fees for service	Hospital Revenue	FTA Section 5310; Medicaid; Fees for service
Operating Budget (2020)	\$1,669,358	Not reported	Not reported	Not reported
Fleet by Location and Wheelchair Accessibility	11 – Dearborn 3 – Decatur 8 – Jefferson 2 – Ohio Ripley – 6 Switzerland – 3 All are wheelchair accessible	Not reported	1 (wheelchair accessible) – Ripley	Not reported
Service Type(s)	Demand Response	Demand Response	Demand Response	Demand Response
Scheduling/Dispatching	Easy Rides	Not reported	Not reported	Not reported
Trip Denials	6,600 (2021)	Not reported	Not reported	Not reported

NEEDS ASSESSMENT

OVERVIEW

RLS & Associates contacted local human service agencies, faith-based organizations, employers, and transportation providers serving each county in an attempt to solicit input and request participation from any organization that could potentially be impacted by the coordinated transportation planning process. Meeting invitations were mailed to all identified organizations, those that participated in the 2016-2017 Coordinated Public Transit Human Services Transportation Plan, and agencies that applied for Section 5310 grants from INDOT since 2013. Documentation of outreach efforts included in this project to date and the level of participation from each organization is provided in the Appendix. The following paragraphs outline results from the virtual public and stakeholder input meeting.

GENERAL PUBLIC AND STAKEHOLDER MEETINGS

A virtual meeting was facilitated by RLS to discuss the unmet transportation needs and gaps in service and establish goals for older adults, individuals with disabilities, people with low incomes, and the general public. A virtual meeting was chosen due to the risk of transmission of COVID-19 at an in-person meeting. The meeting was held on March 24, 2021 from 12:00 PM to 1:30 PM on the Zoom online platform.

Invitations to the meeting were distributed via the U.S. Postal Service to more than 78 individuals or organizations that represent transportation providers, older adults, individuals with disabilities, and/or people with low incomes. The general public was invited and notified of the meeting through a variety of public announcements submitted to the following websites and newspapers:

- ◆ Indiana RTAP website
- ◆ Health by Design
- ◆ Dearborn County Register
- ◆ Ripley News
- ◆ Madison Courier
- ◆ Indianapolis Star
- ◆ Vevay News
- ◆ Plain Dealer & Sun
- ◆ Ohio County News/Rising Sun Recorder

A list of all organizations invited to the meeting is provided in the Appendix. Organizations that were represented at the meetings are listed below:

- ◆ Ascension St Vincent Hospital
- ◆ LifeTime Resources/Catch-A-Ride
- ◆ Margaret Mary Health
- ◆ Ripley County YMCA
- ◆ Encore Lifestyle & Enrichment Center (Tipton, IN)

◆ TranSmart/EJM

During the meeting, the RLS facilitator presented highlights of historical coordinated transportation in the Region and discussed the activities since the 2016-17 Coordinated Public Transit Human Services Transportation Plan that have helped to address some of the unmet transportation needs and gaps in services for the area.

Following the initial presentation, the stakeholders were asked to review the gaps in transportation services and needs from the 2016-2017 plan, to identify any gaps that were no longer valid, and any new needs/gaps, which the facilitator deleted/added to/from a list that the stakeholders could view on the screen. The focus of the discussion was transportation for older adults and individuals with disabilities. However, several topics discussed also impact mobility options for the general public.

Prior to the public and stakeholder meeting, public surveys were distributed in each county. Surveys were available for approximately five months. The purpose of the survey was to gather additional input about transportation from the general public and those individuals who may or may not be clients of the participating agencies. In addition to printed surveys that were distributed by local stakeholders and volunteers, the public survey was also available online, and advertised in local newspapers. Survey results are included at the end of this chapter.

Table 3 provides the identified unmet transportation needs and gaps in services that were identified by meeting participants or during the public survey process. The list includes unmet needs and gaps documented during the previous coordinated plan and the status of that need (satisfied, solutions in progress, not addressed) as well as the needs that were documented for the first time in 2016. The table also includes a reference to the goal (explained in the next chapter) that corresponds with each identified need or gap. Coordinated transportation stakeholders will consider these unmet needs and gaps in service when developing transportation strategies and grant applications.

Table 3: Unmet Mobility Needs and Gaps in Service

2016-2017 Need/Gap	2021 Need/Gap	2020-2021 Priority Level	Goal
Younger people do not want to own cars, but the area is so rural that it is unrealistic to live there without access to vehicles. Younger people move to areas with more to offer.	Not discussed as a need during the 2021 plan process.	N/A	N/A
Transportation on weekends and for 2 nd - and 3 rd -shift workers.	Identified as a continuing need in 2021.	Medium	2
Trips are more difficult to book through the Managed Care system, so Medicaid-eligible clients book trips directly	Medicaid non-emergency transportation has gone through major administrative changes	High	4

2016-2017 Need/Gap	2021 Need/Gap	2020-2021 Priority Level	Goal
through Catch-A-Ride (CAR) instead and pays the standard fare. CAR then loses out on the Medicaid reimbursement. Medicabs used by Medicaid do not generally transport people in wheelchairs or long-distance trips, so all those trips go to CAR. Serving the most inefficient trips increases the rate charged to Medicaid and prevents CAR from getting the shorter, easier trips.	since the 2016-17 plan. The administrative burden involved in scheduling NEMT trips is significant. There are ongoing challenges with scheduling-related miscommunication, as well as with billing and payment.		
Older adults want to schedule 30 days ahead, but CAR cannot allow all clients to schedule that far ahead because it overcomplicates the logistics.	This is no longer a need because CAR implemented 30-day advance scheduling.	N/A	N/A
Transportation for prisoners released at midnight and to employment opportunities after release.	Identified as a continuing need in 2021. Public transit is a need at all hours of the day and evening.	High	2
TANK Stop in Lawrenceburg	Identified as a continuing need in 2021. A stop for TANK and/or SORTA Metro located in Lawrenceburg would be beneficial.	High	2
Connections to Cincinnati, Northern Kentucky and Louisville areas	Identified as a continuing need in 2021.		2
Vehicles which match the needs of the agency and the consumers. This takes into account vehicle size and weight capacity of wheelchair lifts.	Not discussed as a need during the 2021 plan process.	N/A	N/A
N/A	Jennings County needs public or expanded human service (e.g., senior) transportation.	Medium	2
N/A	There are not many transportation services in the area, but what we have should be better coordinated. Many trips cover long distances and involve	Medium	3

2016-2017 Need/Gap	2021 Need/Gap	2020-2021 Priority Level	Goal
	significant deadhead/empty miles. More coordination between providers could introduce new efficiencies.		
N/A	Awareness of existing services; Catch-A-Ride is sometimes perceived as for older adults only. It is for the general public.	Medium	4

PROGRESS SINCE THE 2016-2017 COORDINATED PLAN

As indicated in Table 2, several of the unmet needs identified in 2017 continue to exist today. However, some progress has been made. Noteworthy coordinated transportation programs in Region 8 include the following activities in the region:

- ◆ Margaret Mary Health has developed a one-vehicle patient transportation service in partnership with Catch-A-Ride. This service has provided thousands of rides to patients with transportation needs since its inception in 2018. Because Catch-A-Ride is the operator of Margaret Mary Health Rides, when a ride doesn't fit on the schedule of one program and is eligible for the other program, the Catch-A-Ride scheduling/dispatching department can easily look at the open schedule on the other program to see if there is availability.
- ◆ Catch-A-Ride continues to operate service under contract to New Horizons and Developmental Services, allowing for rides for agency clients to be coordinated with rides for the general public. Catch-A-Ride has also expanded the number of NEMT managed care contracts from one to five in recent years.
- ◆ Catch-A-Ride has expanded their reservations window to accommodate requests up to 30 days in advance. They have also begun to implement online ride scheduling.
- ◆ New Horizons provides transportation to individuals who go the Ripley County YMCA after going through physical therapy.

CONTINUING CHALLENGES TO COORDINATED TRANSPORTATION

There are numerous challenges to the coordination of human service agency and public transportation in any community or region. Some of the unmet transportation needs listed in Table 2 are unmet either because of the level of difficulty to implement strategies that will address them or funding to support the activity is not available. While these needs remain top priority, some may take more time to implement because of the necessary steps and changes that must precede them. Additionally, some of the unmet transportation needs may be addressed before the top priority needs simply because they are easily addressed and/or they are a step that will improve the likelihood of implementing a priority improvement.

During the 2021 public and stakeholder meeting as well as in 2013 and 2016, participants mentioned that



inadequate funding, as well as the real and perceived limitations on use of available funding resources create challenges to achieving a higher level of service or service expansions.

While there are challenges to implementing coordination among various transportation providers, services, and funding sources, it is important to note that transportation coordination is being successfully implemented throughout the country and in Indiana. Therefore, issues such as conflicting or restrictive state and Federal guidelines for the use of funding and vehicles, insurance and liability, and unique needs presented by the different populations served, to name a few, should challenge, but not stop, a coordination effort. There are many resources available to assist communities as they work together to coordinate transportation. Contact the Indiana Department of Transportation (INDOT), Office of Transit (<http://in.gov/indot/2436.htm>) for assistance.

RESULTS OF THE GENERAL PUBLIC SURVEY

The following charts outline the public survey results received from individuals living in the Region. Surveys were available on-line, on public transit vehicles, at various non-profits, and distributed by volunteers through organizations that serve seniors and individuals with disabilities. The on-line and paper versions of the survey were also advertised in local newspapers. The survey period was November 2020 through May 2021.

The following survey summary includes the information gained from 43 surveys from the general public. Each chart is based on the number of responses received for individual questions. If an individual skipped a question or did not provide an eligible answer, the distribution of responses for that particular question will be based on fewer than 43 surveys. The survey results are not statistically valid, but do offer insight into the unmet transportation needs and gaps in services for the general public in each county. The distribution of survey results is listed below:

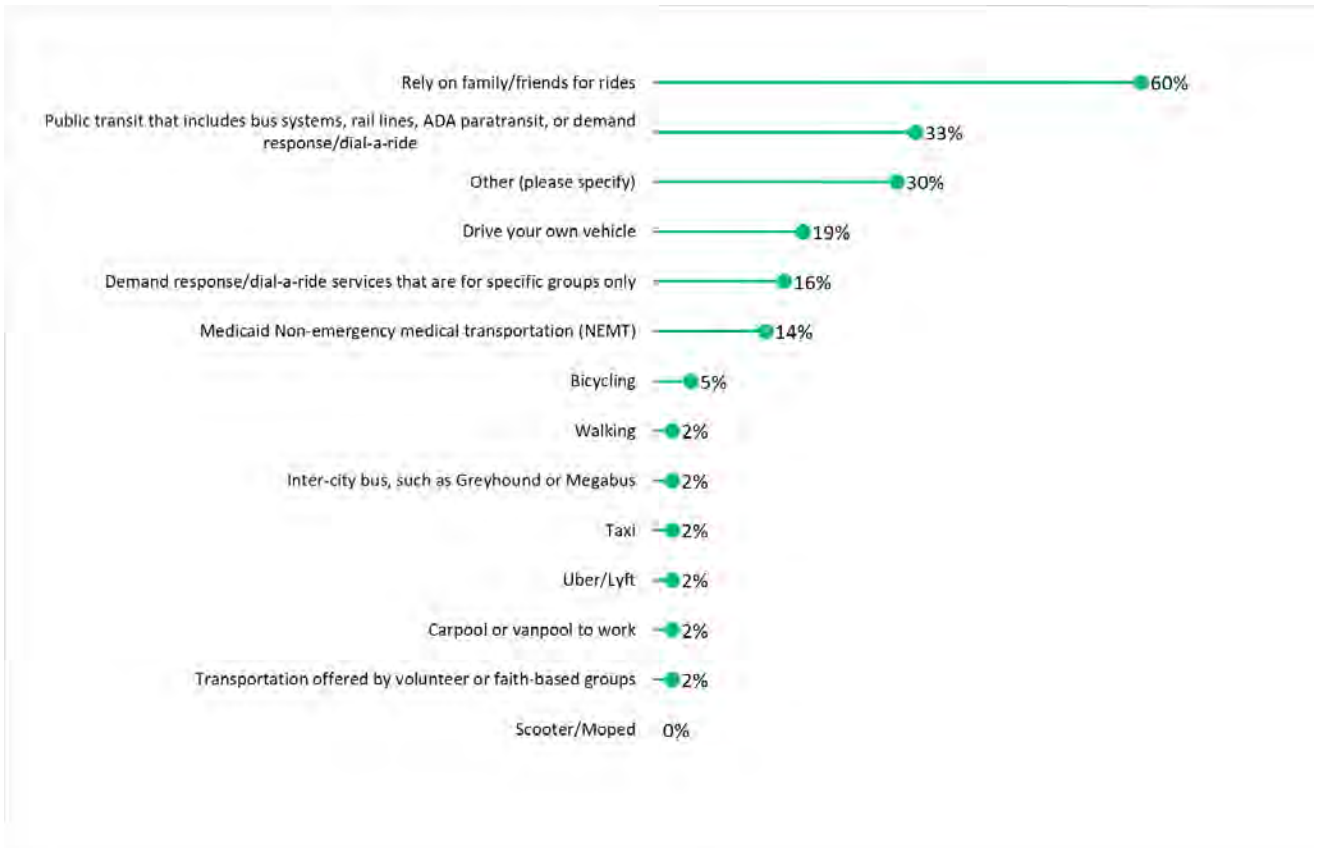
- ◆ Dearborn: 32.56% (14 surveys)
- ◆ Decatur: 23.26% (10 surveys)
- ◆ Jefferson: 2.33% (1 surveys)
- ◆ Jennings: 6.98% (3 surveys)
- ◆ Ohio: 2.33% (1 surveys)
- ◆ Ripley: 32.56% (14 surveys)
- ◆ Switzerland: 0% (0 surveys)

Modes of Transportation Used

Survey respondents were asked to report all forms of transportation they or their family have used in the past 12 months. As indicated in Figure 49, the respondents used all forms of transportation available as response choices, as well as other modes. Those who selected “Other” specified the following forms of transportation:

- ◆ New Horizons Van (4)
- ◆ Other Human Service Transportation (6)
- ◆ Needs transportation (2)
- ◆ Family

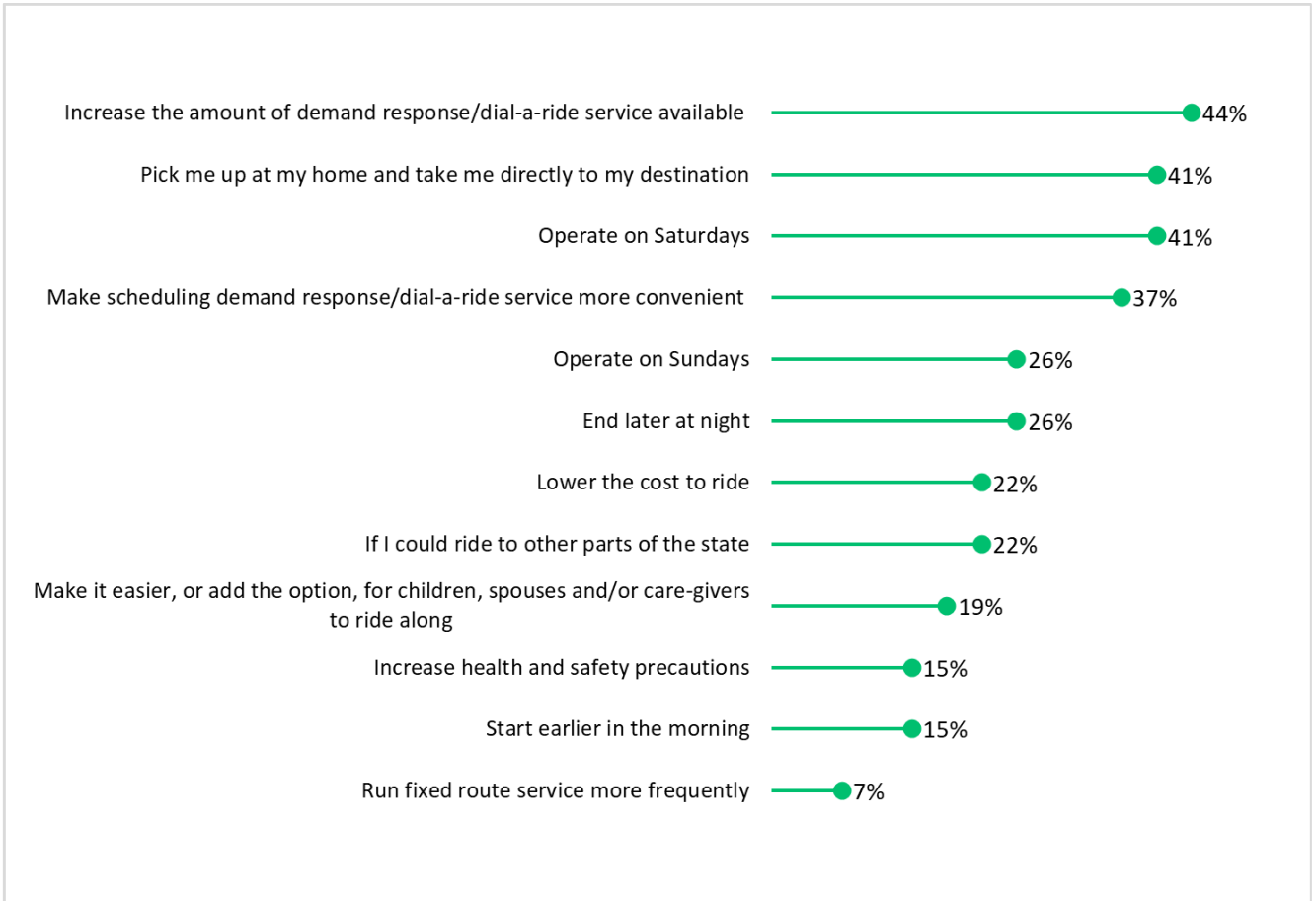
Figure 49: Modes of Transportation Used



Desired Changes to Local Transportation Options

When asked what changes could be made to the local transportation options to make using them more appealing, the most common responses were for fixed routes to run more frequently and the ability to ride to other parts of the state. About 44 percent said that an increase in the amount of demand response/dial-a-ride service available would make transportation options more appealing. All responses to this question are displayed in Figure 50.

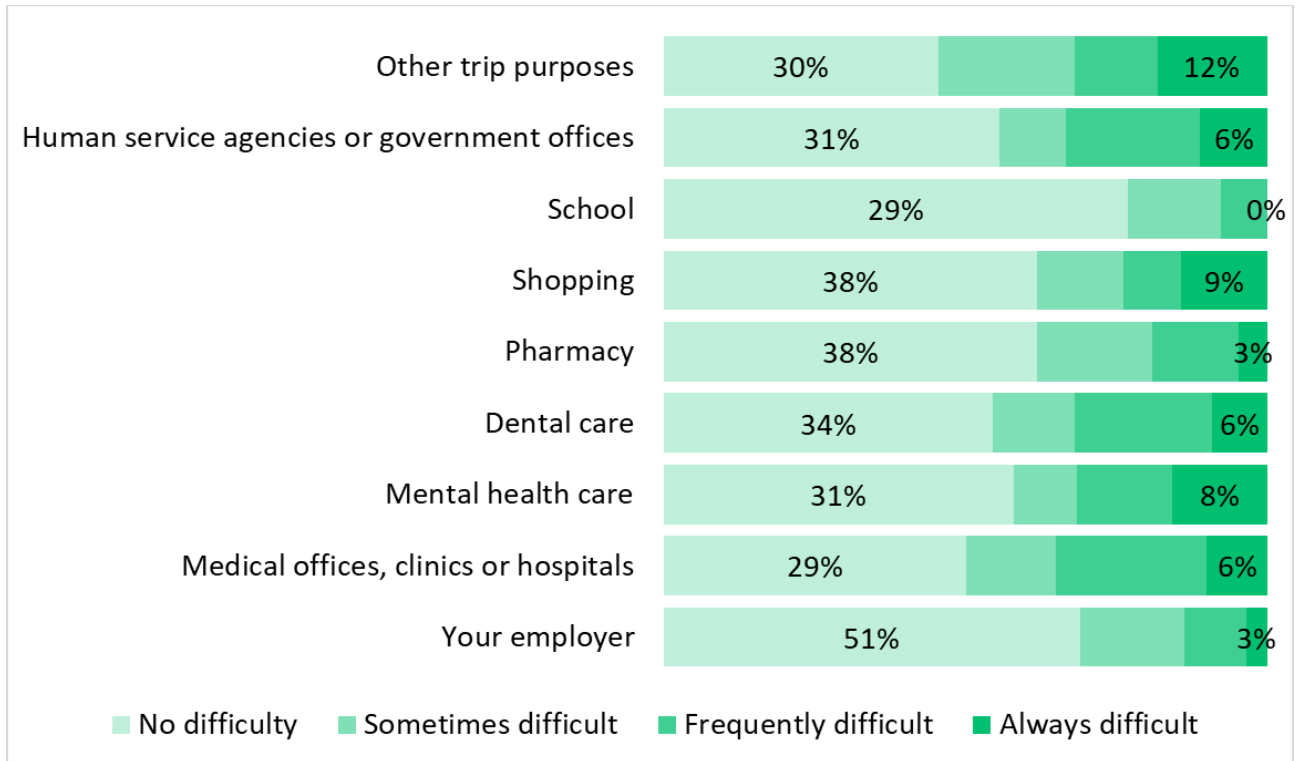
Figure 50: Changes that Would Make Transportation Options More Appealing



Difficulty Getting Needed Transportation

Respondents were asked if they have difficulty getting the transportation they need to a variety of specific types of destinations. The results are provided in Figure 51. The most difficulty was indicated for shopping, multiple respondents selecting ‘sometimes’, ‘frequently’, or ‘always difficult’.

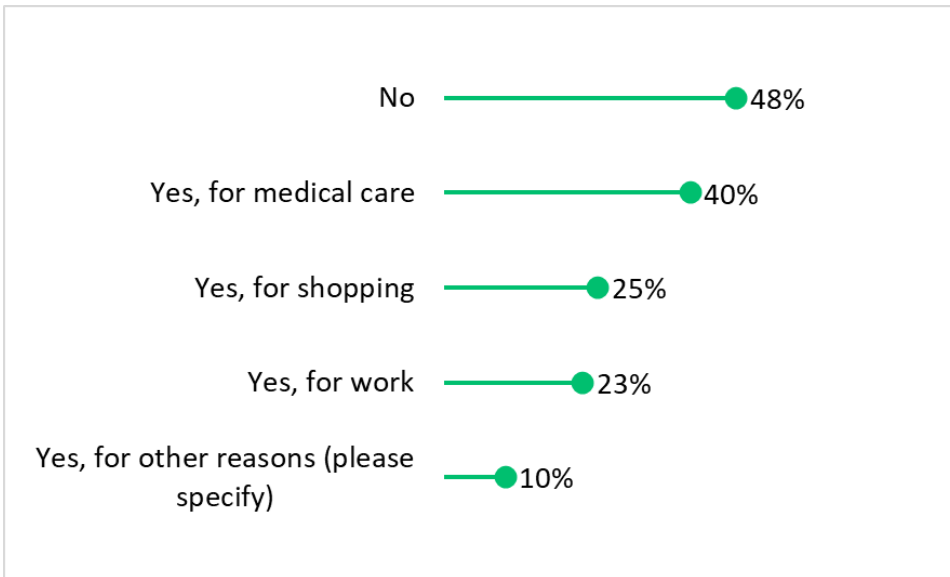
Figure 51: Difficulty with Transportation to Specific Destination Types



Out-of-County Destinations

Two questions concerned travel to out-of-county destinations. Respondents indicated whether they needed to travel outside of the county for work, medical care, shopping, or other reasons. As shown in Figure 52, most of the respondents who need to travel outside of the county either need to for medical care or shopping.

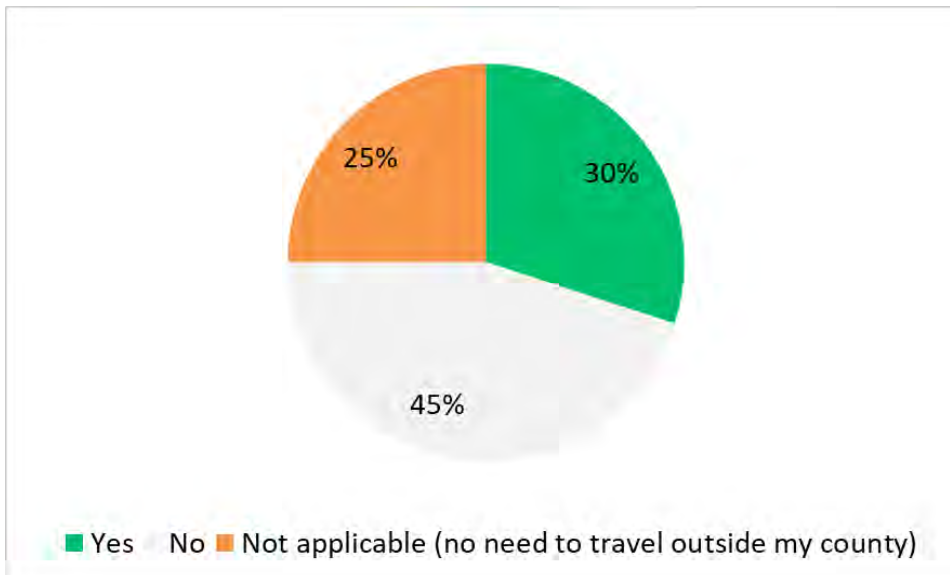
Figure 22: Need for Travel Outside of the County



Respondents also indicated whether it was difficult to travel outside of the county (see Figure 53), and if yes, to provide more information in an open-ended response. 30 percent of the respondents to this question said that they have difficulty leaving the county. Their open-ended responses can be found below:

- ◆ It is too far (3)
- ◆ Transit isn't always available (5)
- ◆ Need work transportation

Figure 53: Is It Difficult for You to Travel Outside Your County?



Other Comments About Community Transportation Services

Finally, the survey included an open-ended question that asked if the respondent had any other comments about transportation services in their community. The following comments were provided.

- ◆ Jennings County doesn't have any public transit, but I wish it did, as it's impossible to get anywhere without a car. At the very least a bus, that goes from Columbus to North Vernon, as most of my family shops in Columbus and sees doctors at the Columbus hospital, and it's a lot to ask of someone to give you a ride 45 minutes there and back.
- ◆ We do not have any... we desperately need help.
- ◆ There is absolutely a need for expanded transportation options. I am an employer and we could put so many people to work if they had transportation to Walesboro. I hope your survey is distributed to the population who is most affected by these challenges.
- ◆ If could pick up past 4:00 pm, which is when I get off work.
- ◆ Run out of state and on weekends.
- ◆ Amber is best driver ever and very good at her job, and the services are good and also it is very well organized and always on time and best transportation ever.
- ◆ I believe it is a necessary service. We are able to drive at this time. The future may be a different story.
- ◆ Inside of Osgood, there are no transportation services of which I am aware.
- ◆ Catch-A-Ride works well in our community.
- ◆ Everyone of the drivers you have are very polite and helpful. I just hope that whoever else you hire is just as polite.
- ◆ We need more available service plus weekends.
- ◆ Have services where the driver immediately retrieves people from doctors and shopping so the ride is one round trip.
- ◆ Desperately need more wheelchair accessible appointments.
- ◆ At this point in my life, my transportation needs are being met by my employer (rehabilitation center) and my family.
- ◆ Currently transportation is provided by my parents. At some point this will not be possible and then I may need transportation assistance.
- ◆ Safer wider roads, curves lessened, improved intersections, more traffic lights to make roads safer for all people in our county. Especially in northern Dearborn County. Too much traffic for the condition of the roads in this area.
- ◆ We do not have very good services in our community - I personally rely on friends and family as other options are very unreliable.
- ◆ Need more availability.

Respondent Demographics

Demographic questions on the survey included age group (Figure 54), status as an individual with a disability that requires a mobility device (Figure 55), and ZIP code (Figure 56).

Figure 54: Age Ranges

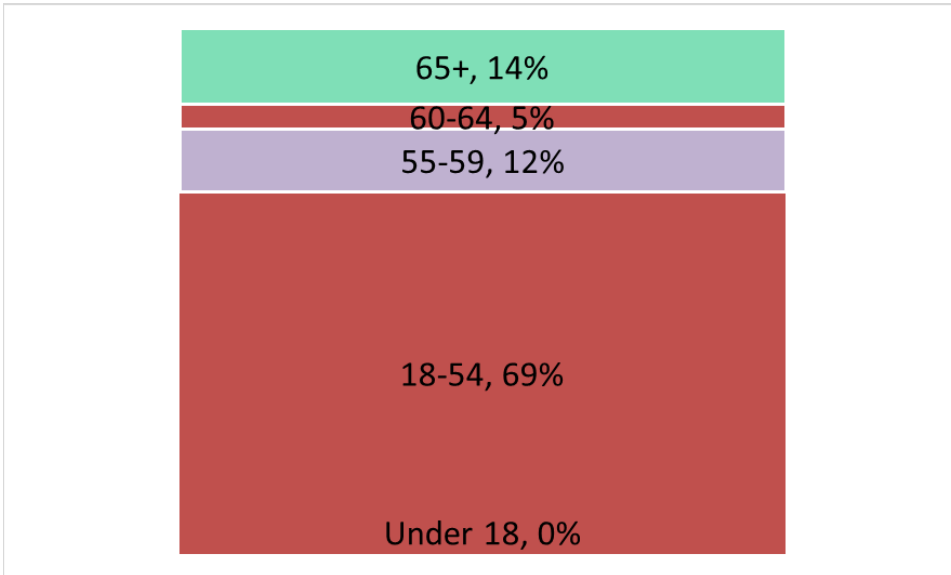


Figure 55: Disability Status that Requires a Cane, Walker, Wheelchair, or Other Device, or a Service Animal

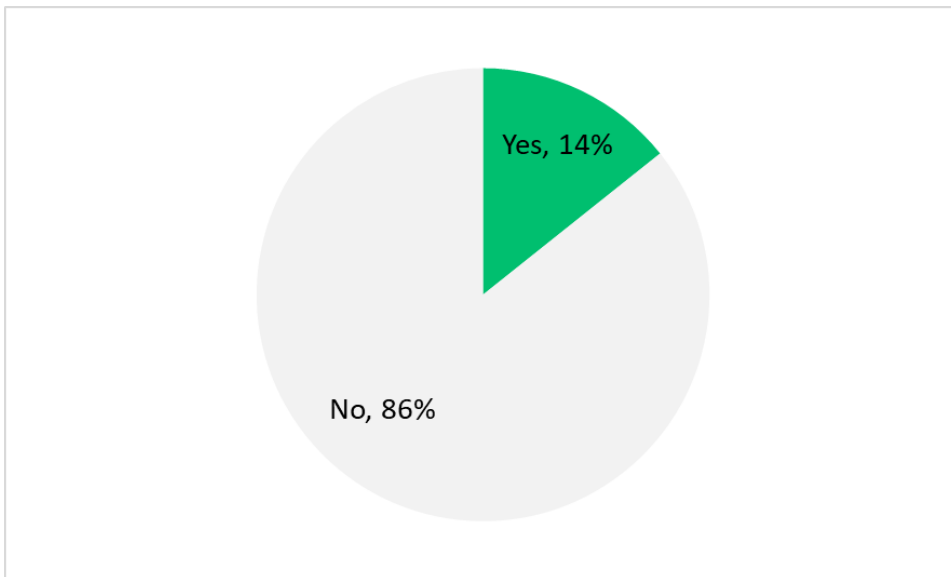
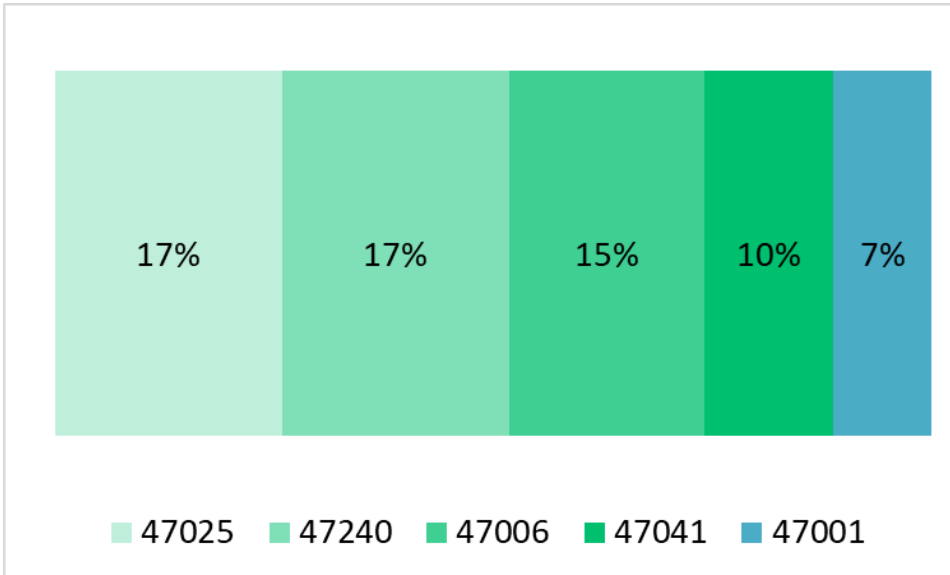


Figure 56: ZIP Code



Note: Top 5 Zip Codes shown; 14 different Zip Codes provided

IMPLEMENTATION PLAN

Stakeholders are willing to continue to work toward coordinated regional transportation services by utilizing existing resources and implementing new projects that fill the service gaps associated with employment related trips, medical trips, education, and general quality of life for older adults, individuals with disabilities, and the general public.

Local stakeholders set four coordinated transportation goals to address the high, medium, and low priority needs. The strategies under each goal should be addressed by the responsible parties, as identified in this chapter. Strategies should be addressed in order of priority, unless funding or other factors are present which make accomplishing a lower priority strategy more feasible than one of higher priority. The coordinated transportation goals are as follows:

Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the General Public

Goal 2: Expand Transportation Service for Older Adults, People with Disabilities, Low-Income Individuals, and the General Public

Goal 3: Adopt New Technologies to Enhance Customer Service and Increase Efficiency

Goal 4: Increase Participation in Statewide Initiatives to Enhance Mobility

GOALS AND STRATEGIES

The following paragraphs outline the timeframe, responsible party, and performance measure(s) for implementation of each of the above noted coordination goals and objectives. The implementation timeframes/milestones are defined as follows:

- ◆ Immediate – Activities to be addressed immediately.
- ◆ Near-term – Activities to be achieved within 1 to 12 months.
- ◆ Mid-term – Activities to be achieved within 13 to 24 months.
- ◆ Long-term – Activities to be achieved within 2 to 4 years.
- ◆ Ongoing - Activities that either have been implemented prior to this report, or will be implemented at the earliest feasible time and will require ongoing activity.

Goals and implementation strategies are offered in this chapter as a guideline for leaders in the coordination effort as well as the specific parties responsible for implementation. Goals and strategies should be considered based upon the available resources for each county during the implementation time period.

GOAL 1: MAINTAIN EXISTING TRANSPORTATION SERVICES FOR HUMAN SERVICE AGENCY CLIENTS AND THE GENERAL PUBLIC

Strategy 1.1: Replace and Maintain Vehicles through FTA/INDOT Funding and Local Sources

Transportation is a vital link to health care, nutrition, employment, and quality of life in each county and community. As there are relatively few providers active in the region, keeping their services active and running is critical for older adults and individuals with disabilities in the community. The FTA grant programs managed by INDOT provide the best leverage of local matching dollars in terms of acquiring and maintaining a fleet of accessible vehicles.

Local organizations serving the rural areas will strategically apply for funding through Sections 5310 and 5311 programs to replace aging vehicles and to expand vehicle fleets or the number of providers serving individuals with disabilities, older adults, people with low incomes, and the general public.

Priority: High

Counties Included: All Region 8 counties

Responsible Parties: Agencies and organizations eligible for FTA Section 5310/11 program grants

Implementation Time Frame:

Ongoing

Staffing Implications:

Staff time to prepare applications, to maintain vehicles, and to monitor service, safety, and reporting.

Implementation Budget:

Minimal expenses to develop applications but significant time to manage and administer services.

Potential Funding Sources: FTA Section 5311 (public transit)/5310; Local match funding from agency funds, county or municipality general fund, dedicated tax, or private fundraising. Local match for FTA Section 5310 may also be derived from State programs or other non-U.S. DOT Federal funding programs.

Performance Measures:

- ◆ Tally of vehicles applied for and received in region.
- ◆ Percent of fleet in region that is accessible to individuals with disabilities.
- ◆ Average annual passenger trips provided per vehicle should demonstrate that vehicles are actively used in service delivery for older adults and individuals with disabilities.

GOAL 2: EXPAND TRANSPORTATION SERVICE FOR OLDER ADULTS, PEOPLE WITH DISABILITIES, LOW-INCOME INDIVIDUALS, AND THE GENERAL PUBLIC

Strategy 2.1: Expand the Days and Hours that Transportation is Available

Evening and weekend service was mentioned by survey respondents as a desired improvement. Stakeholders also confirmed that residents of the region need transportation outside of the available providers’ regular hours of operations.

Transportation providers are encouraged to consider expanding their hours and days of service to facilitate access to employment opportunities for older adults, individuals with disabilities, and people with low incomes. Expansions of hours and days of service would depend on the availability of funding as well as the ability to hire and retain drivers.

Priority: High

Counties Included: All Region 8 counties

Responsible Parties: Catch-A Ride and human service transportation providers. Representatives from local and regional human service agencies with clients that need travel outside of regular operating hours.

Implementation Time Frame:

Mid-Term (13 – 24 months)

Staffing Implications:

Staff would need to be increased to cover additional shifts or days. Part time or volunteer drivers may be able to provide long-distance trips.

Implementation Budget:

The cost of service hour expansions would be based on the actual changes to be implemented.

Potential Funding Sources: Human service transportation contracts; local charitable or governmental funding.

Performance Measures:

- ◆ New hours and days of service provided.
- ◆ Ridership on expanded service.

Strategy 2.2: Offer Public or Senior Transportation in Jennings County

Survey respondents and stakeholders attending the input meeting indicated that there is an unmet need for transportation in Jennings County. In particular, residents of Jennings County often need to travel to Columbus for medical appointments, jobs, and other trip purposes. Additionally, there is a high concentration of job opportunities in Walesboro, which is south of Columbus. Columbus and Walesboro

are located in Bartholomew County, northwest of Jennings County. Bartholomew County does not currently have public transportation outside of the City of Columbus.

This strategy should be led by transportation stakeholders in Jennings County. These stakeholders should consult Catch-A-Ride, the past operator of public transit in the county, and CAMPO (Columbus Area Metropolitan Planning Organization), about coordinating with neighboring areas to meet regional travel needs, such as taking riders to medical appointments in Columbus.

If funding was secured, there are various providers who may be willing to expand from other areas into Jennings County, or, a local human service transportation provider could expand their services to older adults or the general public. Potentially, a coordinating entity could administer the transportation program and contract with multiple providers. There are multiple options for structuring a transportation program. If stakeholders would like to understand more about these options, they may want to consider commissioning a transportation feasibility study.

Priority: Medium

Counties Included: Jennings County

Responsible Parties: Representatives from Jennings County human service agencies with clients with transportation needs, and other local transportation stakeholders.

Implementation Time Frame:

Long-Term (2 – 4 years)

Staffing Implications:

Staffing needs are minimal during the visioning and planning stages. Operating transportation would require drivers and administrative staff.

Implementation Budget: To operate service, the costs would depend on the specific operator and the amount of service provided. Small transportation programs typically cost \$200,000 to \$400,000 in annual operating expenses. A feasibility study would cost between \$20,000 and \$40,000.

Potential Funding Sources: FTA Section 5311/5310; Human service transportation contracts; local charitable or governmental funding.

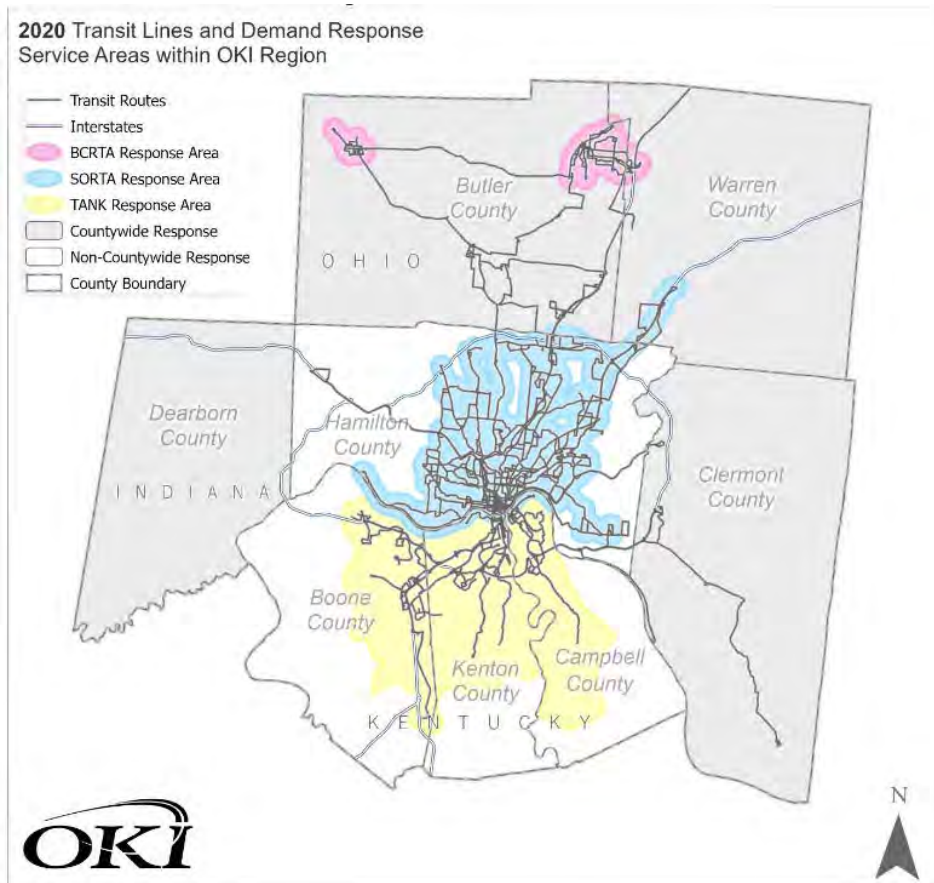
Performance Measures:

- ◆ Initiation of Jennings County service.
- ◆ Ridership on Jennings County service.

Strategy 2.3: Provide Services that Allow Residents to Connect with TANK or SORTA Fixed Routes

Demand for transportation into the Cincinnati metropolitan area is high in some areas of Region 8, especially the Lawrenceburg area. SORTA operates fixed routes in Cincinnati and surrounding Ohio suburbs, while TANK operates in Boone, Campbell and Kenton Counties in northern Kentucky. Figure 3 is a map of transit service areas provided in the Coordinated Public Transit-Human Services Transportation Plan for the Cincinnati urbanized area, adopted in 2020 by Ohio-Kentucky-Indiana Regional Council of Governments (OKI). The OKI Coordinated Plan includes strategies to expand transportation availability throughout the region and establish a regional mobility management system. Catch-A-Ride and other Dearborn County transportation stakeholders should participate in these efforts to ensure that interstate connectivity needs are addressed.

Figure 3: OKI Coordinated Plan Map of Transit Providers



Priority: High

Counties Included: Dearborn County

Responsible Parties: Catch-A-Ride, SORTA, and TANK should discuss this strategy in future regional public and human service transportation conversations. Representatives from Dearborn County human service agencies with clients with transportation needs, and other local transportation stakeholders, should participate in potential future planning efforts for this strategy.

Implementation Time Frame:

Long-Term (2 – 4 years)

Staffing Implications:

Staffing needs are minimal during the visioning and planning stages. Operating transportation would require drivers and administrative staff.

Implementation Budget: To operate service, the costs would depend on the specific operator and the amount of service provided.

Potential Funding Sources: FTA Section 5307, 5311 and/or 5310; Human service transportation contracts; local charitable or governmental funding.

Performance Measures:

- ◆ Initiation of new connecting service.
- ◆ Ridership on new connecting service.

GOAL 3: ADOPT NEW TECHNOLOGIES TO ENHANCE CUSTOMER SERVICE AND INCREASE EFFICIENCY

Strategy 3.1: Develop and Implement a Technology-Supported Coordinated Provider Network

Strategy 3.1 is to develop and implement trip-sharing arrangements. Trip-sharing is a type of joint use arrangement that may require a new level of policymaking and management. When one demand response provider operates with empty seats, the opportunity to develop trip-sharing is present. By matching unfilled seats with another participant’s clients, vehicle capacity is maximized. This results in reducing the cost per one-way trip for all riders. To set up a trip-sharing program, a method to collect and share information about unfilled seats must be developed. That information will be used to identify the specific service areas, times of the day, and days of the week when any unfilled seats are available. A lead agency—Catch-A-Ride or an alternate provider—would collect this information from each participating transportation provider, then distribute it to all participants. The participants would use this information to request a trip for a client on one of the other participant’s vehicles. Scheduling and dispatching software can be used to make the trip-sharing process more convenient, potentially making it possible to trip-share instantaneously in real time.

A more formalized approach involves the lead agency collecting information from all participants on available capacity and, also, collecting information from all participants on transportation needs. The lead agency is then responsible for matching unmet needs and available seats. One advantage of this approach is that often it is possible to identify service duplications. The lead agency can then work with the participants to eliminate duplicate service.

Trip sharing arrangements require detailed coordination. Due to liability issues and the need to share costs, it is recommended that this activity be formalized. Formal arrangements should include the following elements:

- ◆ A policy-making body should be selected to set overall policy for the joint use arrangement. The body may be a new entity established for transportation coordination, or it could be the board of an existing organization. The policy-making body will be responsible for monitoring the performance of the trip sharing arrangement to determine if it is achieving its intended goals. The participating transportation providers should be represented on the policy-making body and/or should pass resolutions or adopt formal agreements that endorse the administrative structure.
- ◆ Guiding policies for the trip sharing arrangement should be established by the policy-making body. It must be someone's responsibility to manage the trip-sharing arrangement and ensure that policies are followed. The actual operations of the trip-sharing arrangement may be performed by the managing entity, or by another participant. The structure should be what makes the most sense in the local context.
- ◆ A trip accounting system must be developed to ensure that shared trips are accurately billed to the appropriate agency. This system may be based, for example, on cost-per-passenger trip or cost-per-passenger mile. Each provider must determine the fully-allocated costs of their transportation service, and bill at the appropriate unit rates. Fundamental principles for cost-sharing between Federally funded transportation providers are set forth in the Coordinating Council on Access and Mobility Cost-Sharing Policy Statement, which is included in the appendix to this plan.

A helpful resource for agencies pursuing trip sharing arrangements is Transit Cooperative Research Program (TCRP) Report 144: Sharing the Costs of Human Services Transportation, which explores issues and potential solutions for identifying and sharing the cost of providing transportation services for access to community-based human services programs. The report examines current practices and offer strategies for collecting necessary data, addressing administrative and policy-related issues, and establishing cost allocation procedures.

Implementation Time Frame:

Long-Term (2 – 4 years)

Staffing Implications:

The program described in this strategy would require significant additional administrative time within a lead agency.

Implementation Budget: The purchase or upgrade of scheduling and dispatching software would be a significant cost, if the strategy incorporates the use of technology. Scheduling and dispatching software packages for small or medium transit systems typically require investments of \$50,000-\$100,000 or more.

For the additional transportation that may be provided as part of this initiative, demand response transportation services typically range in cost from \$45 to \$100 per vehicle service hour, depending on the type of operator. Operators would bill the program for rides based on their fully allocated costs.

Potential Grant Funding Sources: FTA Section 5311, contracted human service transportation revenue, hospitals, or other sources identified by local stakeholders. One-time technology acquisitions and pilot transportation projects of non-profit organizations may be eligible for local philanthropic funding or discretionary Federal grants.

Priority: Medium

Counties Included: All Region 8 counties

Responsible Parties: Catch-A-Ride, New Horizons, and other providers would conduct initial meetings to discuss this strategy. A lead organization would need to be identified to secure funding and develop the program.

Performance Measures

- ◆ Policies and procedures for coordinated transportation network operations developed.
- ◆ Funding secured.
- ◆ Technology acquired.
- ◆ Number of passenger trips provided.

GOAL 4: INCREASE PARTICIPATION IN INITIATIVES TO ENHANCE MOBILITY

Strategy 4.1 Participate Actively in the Indiana Council on Specialized Transportation (INCOST) and Other Statewide Organizations

INCOST is the most active statewide association for rural and specialized transportation providers. Participation is not limited to public transit systems; human service agencies may also participate. INCOST meets on a regular basis to discuss statewide policy issues and network to find solutions to common problems. The organization holds an annual conference. The Indiana Transportation Association (ITA) as another statewide transportation organization that focuses on public transit.

There are many other interest groups and advocacy organizations that discuss transportation issues and advocate for improvements. The Governor’s Council for People with Disabilities, for example, conducted a statewide study revealing that transportation is one of the top needs for their constituents, prompting new policy and program discussion. The National Federation for the Blind has similar state and local chapters. The American Planning Association organizes professionals that care deeply about filling infrastructure gaps. Health by Design advocates for increased transportation funding and built environment changes that increase accessibility and quality of life. Participation in these and other statewide networks which may lead to opportunities for new grants, pilot projects and funding partnerships.

Implementation Time Frame:

Immediate and Ongoing

Staffing Implications:

Staff time to provide meaningful participation in meetings.

Implementation Budget:

Minimal expense for staff time to participate in meetings and contribute leadership to initiatives.

Potential Grant Funding Sources: Not required.

Priority: Medium

Counties Included: All Region 8 counties

Responsible Parties: Catch-A-Ride and human service transportation providers

Performance Measures

- ◆ Number of representatives from Region 8 representatives who attend meetings of INCOST and other statewide organizations.
- ◆ Number of contacts with state-level policymakers about transportation needs and funding concerns.

Strategy 4.2 Educate Local Elected Officials About Transportation Needs

It is critical that transportation providers and stakeholders educate County Commissioners, City Council members, and other local elected officials about the value of public transit and human service transportation. The disconnect between transit and other transportation programs (roads and bridges) can be resolved by bringing transit conversations and trainings to the notice of elected officials.

<u>Implementation Time Frame:</u> Immediate and Ongoing	<u>Staffing Implications:</u> Staff time to communicate transportation needs and value.
<u>Implementation Budget:</u> Minimal expense for staff time to participate in meetings.	
<u>Potential Grant Funding Sources:</u> Not required.	

Priority: Medium

Counties Included: All Region 8 counties

Responsible Parties: Catch-A-Ride and human service transportation providers

Performance Measures:

- ◆ Number of networking and outreach activities that are used to educate local policymakers about transportation needs.

Strategy 4.3 Track and Communicate Concerns About Brokered Service Delivery to FSSA and INDOT

As noted previously, problems with the statewide NEMT brokerage have included missed trips, customers who are told by the brokerage they have a trip but no provider shows up, and difficulties receiving payment for provided trips. The brokerage contract is held by the Indiana Family and Social Services Administration (FSSA). While contract oversight is carried out by FSSA, the Indiana Nonemergency Medical Transportation Commission provides a state-level forum for discussing problems within NEMT service delivery. These entities need to be made aware of ongoing difficulties experienced by customers and providers. With better awareness of the existing challenges, FSSA, the NEMT Commission, or state legislators can make policy improvements and changes based on local feedback.

Address information for the FSSA/NEMT Commission:

Office of Medicaid Policy and Planning
MS 07, 402 W. Washington St., Room W382
Indianapolis, IN 46204-2739

Address information for NEMT brokerage as of December 2021:

Southeastrans, Inc.
4751 Best Road, Suite 300
Atlanta, GA 30337

Complaint form available at <https://www.southeastrans.com/facilities-file-a-complaint-form>.

<u>Implementation Time Frame:</u> Immediate and Ongoing	<u>Staffing Implications:</u> Staff time to document problems.
<u>Implementation Budget:</u> None	
<u>Potential Grant Funding Sources:</u> Not required	

Priority: High

Counties Included: All Region 8 counties

Responsible Parties: Providers of NEMT

Performance Measures

- ◆ Number of NEMT brokerage complaints and incidents documented by transportation providers.
- ◆ Number of communications relayed to the NEMT brokerage, FSSA, NEMT Commission members, or state legislators.

POTENTIAL GRANT APPLICATIONS

The following table outlines the strategies and objectives designated to achieve the locally identified transportation goals that are intended to meet local unmet transportation needs, reduce duplication, and improve coordination of human service agency and transportation provider resources. The table includes all strategies that are currently for implementation with the assistance of a grant from the Transportation for Enhanced Mobility of Seniors and Individuals with Disabilities (Section 5310) and the Formula Grants for Rural Areas (Section 5311) for rural public transportation providers. Page numbers are provided in Table 4 for quick reference to detailed information for each objective.

All Section 5310 grant funds will be available through a competitive process. Please also note that each grant application for Section 5310 and Section 5311 will be considered individually to determine if the proposed activities to be supported by the grant adequately meet the requirements of the intended funding program. Grant applications for strategies that do not meet the intended requirements of the Federal transportation law will not be awarded, regardless of the designated eligibility in this report.

The implementation timeframe for each strategy ranges from the date of this report through 2024. It is noted that a coordinated transportation working group (such as a regional coordination committee) should update this plan on an annual basis and as new coordinated transportation strategies and objectives are developed.

Table 1: Implementation Key

Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the General Public			
Page Number	Strategy Number	Objective/Strategy Description	Priority
62	1.1	Replace and Maintain Vehicles through FTA/INDOT Funding and Local Sources	High
Goal 2: Expand Transportation Service for Older Adults, People with Disabilities, Low-Income Individuals, and the General Public			
63	2.1	Expand the Days and Hours that Transportation is Available	High
64	2.2	Offer Public or Senior Transportation in Jennings County	Medium
65	2.3	Provide Services that Allow Residents to Connect with TANK or SORTA Fixed Routes	High

(Table continues on following page)

Goal 3: Adopt New Technologies to Enhance Customer Service and Increase Efficiency

Page Number	Strategy Number	Objective/Strategy Description	Priority
66	3.1	Develop and Implement a Technology-Supported Coordinated Provider Network	Medium

Goal 4: Increase Participation in Initiatives to Enhance Mobility

Page Number	Strategy Number	Objective/Strategy Description	Priority
69	4.1	Participate Actively in the Indiana Council on Specialized Transportation (INCOST) and Other Statewide Organizations	Medium
70	4.2	Educate Local Elected Officials About Transportation Needs	Medium
70	4.3	Track and Communicate Concerns About Brokered Service Delivery to FSSA and INDOT	High

Coordinated Public Transit - Human Services
Transportation Plan

Region 8: Dearborn, Decatur, Jefferson, Jennings,
Ohio, Ripley and Switzerland Counties

Appendix – Outreach Documentation



Prepared for Indiana
Department of Transportation

January, 2022

Prepared by:
RLS & Associates, Inc.

3131 S. Dixie Hwy, Suite 545
Dayton, OH 45439
(937) 299-5007
rls@rlsandassoc.com



COORDINATED PLAN OUTREACH CHECKLIST

Focus Groups, Workshops, and Public Meetings

Stakeholder Focus Group Meetings (held on Zoom)

Date: March 24, 2021 from 12:00 PM to 1:30 PM

Invitations Distributed

- ✓ Email: Postcards sent to regional stakeholders on March 8, 2021; Email sent to all public and human service transportation providers on March 4, 2021
- ✓ Information was provided in alternative formats, upon request
- ✓ Events were open to all individuals, including hearing impaired and limited English proficient
- ✓ Press release included; sent to:
 - Indiana RTAP website
 - Health by Design
 - Dearborn County Register
 - Ripley News
 - Madison Courier
 - Indianapolis Star
 - Vevay News
 - Plain Dealer & Sun
 - Ohio County News/Rising Sun Recorder

Number of Attendees: 7

- ✓ Invitation emails and mailing list included
- ✓ Attendee list included
- ✓ Public Meeting Presentation included

Public Input Survey

Date(s) Surveys Were Distributed/Available Online: January 1, 2021 through May 11, 2021

- ✓ Web Posting: Survey Monkey
- ✓ E-mail and hard copy of survey provided upon request (hard copy included)
- ✓ Information was provided in alternative formats, upon request

Total number of electronic and paper surveys completed: 43

Other Outreach Efforts

- ✓ Interviews with major transportation providers to collect input about their services and coordination

Organization Contact List

Contact Person	Organization
Bob Goodwin	New Horizons Rehabilitation, Inc.
County Council President	Dearborn County Council
County Council President	Decatur County Council
County Council President	Jefferson County Council
County Council President	Jennings County Council
County Council President	Ohio County Council
County Council President	Ripley County Council
County Council President	Switzerland County Council
Craig Beckley	Heart House, Inc.
Debbie Horton	LifeTime Resources
Erin Thomas	LifeTime Resources
Executive Director	Decatur County Senior Citizens Center
Executive Director	Community Mental Health Center, Inc.
Executive Director	Dearborn County RSVP
Executive Director	Developmental Services, Inc.
Executive Director	ILCEIN Independent Living Center
Executive Director	Quinco Behavioral Health Systems
Executive Director	SIEOC
Executive Director	Dearborn & Ohio Counties United Fund
Executive Director	Decatur County United Fund
Executive Director	Jennings County United Way, Inc.
Executive Director	United Fund of Switzerland County
Executive Director	VA Medical Center
Executive Director	Dearborn County YMCA
Executive Director	Decatur County Family YMCA
Executive Director	Jennings County Family YMCA
Executive Director	Southeaster IN YMCA
Executive Director	YMCA of Switzerland County
Executive Director	Chateau of Batesville
Executive Director	CHOICE Assisted Living Christian Home
Executive Director	Davis Elderly Care
Executive Director	Hanover Health and Rehabilitation Center
Executive Director	Jewel House
Executive Director	Manderly Health Care Center
Executive Director	Pink Knoll Assisted Living Center
Executive Director	Ridgewood Health Campus
Executive Director	Ripley Crossing
Executive Director	Romweber Flats
Executive Director	Silver Memories Nursing Home

Contact Person	Organization
Executive Director	St. Andrews Health Campus
Executive Director	Thornton Terrace
Executive Director	The Waters of Batesville
Executive Director	The Waters of Rising Sun
Highway Supervisor	Dearborn County Highway Department
Highway Supervisor	Decatur County Highway Department
Highway Supervisor	Jefferson County Highway Department
Highway Supervisor	Jennings County Highway Department
Highway Supervisor	Ohio County Highway Department
Highway Supervisor	Ripley County Highway Department
Highway Supervisor	Switzerland County Highway Department
Michelle Guidice	LifeTime Resources
Transportation Director	Batesville School Corporation
Transportation Director	Decatur County School Corp.
Transportation Director	Greensburg School Corporation
Transportation Director	Jac-Cen-Del School Corporation
Transportation Director	Jennings County School Corp.
Transportation Director	Lawrenceburg School Corporation
Transportation Director	Madison Area Education Special Services Unit
Transportation Director	Madison Consolidated Schools
Transportation Director	Milan Community Schools
Transportation Director	Rising Sun-Ohio Co Com
Transportation Director	South Dearborn School Corp.
Transportation Director	South Ripley School Corp.
Transportation Director	Southeastern Career Center
Transportation Director	Southwestern-Jefferson County Consolidated Schools
Transportation Director	Sunman Dearborn School Corp.
Transportation Director	Switzerland County School Corp
Transportation Director	Muscatatuck Special Education Center
Transportation Director	New Horizons
Transportation Director	Sandstone Industries
Transportation Director	Catch-A-Ride Public Transportation
Transportation Director	Classic Medicab
Transportation Director	Genesis Transportation
Transportation Director	Hilltop Taxi
Transportation Director	Nite Out Transportation
Transportation Director	OKI Regional Council of Governments
Transportation Director	R&R Taxi
Transportation Director	Tri County Ambulance

Coordinated Public Transit-Human Service Transportation Plan Meetings

Please join RLS & Associates and the INDOT Office of Transit for a virtual meeting on the Coordinated Public Transit-Human Service Transportation Plan for your INDOT rural coordination region. The Federal Transit Administration (FTA) requires that projects selected for funding under the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program be included in a coordinated plan. Please attend and provide your input and insights to discuss unmet transportation needs, gaps in transportation services, and recommended strategies to improve mobility options in and around the area. **Meetings will be held March 17-31, 2021.**



Who Should Attend?

Stakeholders (transportation providers, social service agencies, older adults, individuals with disabilities, people with low income, etc.) and the general public.

To find the date, time, and log-in/dial-in information for your region's meeting, please visit

tinyurl.com/783czmmm

For more information, contact RLS & Associates at 937-299-5007 or email ccampoll@rlsandassoc.com

For Immediate Release

Date: March 8, 2021

Contact: Christy Campoll, Associate, RLS & Associates, (317) 439-1475 (mobile)
Brian Jones, Section 5310 Program Manager, Indiana Department of
Transportation, (317) 426-8541

Subject: Public meeting to focus on transportation needs in rural areas of Indiana for older adults, individuals with disabilities and the general public

The Indiana Department of Transportation (INDOT) is updating the coordinated human services transportation plans for the state's rural coordination planning regions. A series of virtual public meetings will be held to inform interested individuals about the possibilities of coordinated public and human service agency transportation and, more importantly, to listen to anyone who rides, would like to ride, and/or operates public, private or human service agency transportation resources.

The meetings will begin with a brief presentation of research conducted by RLS and Associates, Inc. about residents' needs for transportation to work, medical appointments, entertainment, or any other reason. There will be an open discussion about gaps in available transportation service and strategies for increasing mobility. Public, private and non-profit transportation providers, human service agencies, and any individual who needs transportation should attend.

The public is encouraged to attend the following meeting to learn more and share their input. Agencies who receive or intend to receive funding under the Federal Transit Administration Section 5310 Program must participate in coordination planning. Anyone who requires an auxiliary aid or service for effective communication to participate in a meeting should call (800) 684-1458 at least one week in advance on the meeting.

Coordinated Transportation Plan Input Meeting for Dearborn, Decatur, Jefferson, Jennings, Ohio, Ripley and Switzerland Counties (Region 8)

Wednesday, March 24, 2021, 12:00 PM - 1:30 PM Eastern Time
Obtain Zoom meeting link or dial-in phone number by visiting
<http://tinyurl.com/783czmmm>

Residents are asked to provide their input through the public survey available online at: https://www.surveymonkey.com/r/Indiana_Transportation. Paper versions of the survey are available upon request by calling (800) 684-1458.

For additional information, contact Christy Campoll with RLS & Associates at (800) 684-1458 or Brian Jones, Section 5310 Program Manager, Indiana Department of Transportation, (317) 426-8541.

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Christy Campoll <ccampoll@rlsandassoc.com>

Rural Regional Coordinated Transportation Plan Meetings

Christy Campoll <ccampoll@rlsandassoc.com>

Thu, Mar 4, 2021 at 3:13 PM

Cc: Kjirsten Frank Hoppe <kfrankhoppe@rlsandassoc.com>, Laura Brown <lbrown@rlsandassoc.com>, Vicky Warner <vwarner@rlsandassoc.com>, Megan Gatterdam <mgatterdam@rlsandassoc.com>, "Jennings, Todd" <TJennings@indot.in.gov>, "Jones, Brian (INDOT)" <BJONES@indot.in.gov>

Bcc: Becky Guthrie <bguthrie@frs.org>, Bryan Sergesketter <streetcomm@washingtonin.us>, Debbie Neukam <dneukam@washingtonin.us>, crmartindale@comcast.net, Kathy Fowler <kfowler@washingtonin.us>, greenfield.safsinc@sbcglobal.net, Jacque Lueken <jlueken@huntingburg-in.gov>, Stan Keepes <Stan.Keepes@arcswin.org>, Julia Rahman <juliarahman6@gmail.com>, Joel Sievers <jsievers@vincennesymca.org>, Janelle Lemon <jllemon@gshvin.org>, Jesse Watkins <pccacan@gmail.com>, cimes@pcrsinc.org, MONICA EVANS <monica.edpcca@yahoo.com>, sccoa@att.net, Patricia Glenn <pat.glenn@sirs.org>, Roland Lemus <brtrdir@brsinc.org>, Jenny Bowen <brpdc@brsinc.org>, Catherine Strother <cstroth@firstchancecenter.com>, Greg Mahuron <greg@oasc.us>, Rebecca Kemple <rkemple@firstchancecenter.com>, Kim Robinson <kimrobinson@browncountyyymca.org>, Seymour Transit Dept <seytransit@seymourin.org>, Eric Frey <ericfrey@aracities.org>, Dennis Parsley <dparsley@bedford.in.us>, Lisa Salyers <lsalyers@area10agency.org>, Angie Purdie <apurdie@co.monroe.in.us>, Chris Myers <cmyers@area10agency.org>, btabeling@seymourin.org, twayt@seymourin.org, Kelly Bauer <kbauer@yourjccs.org>, Holly Porter <dir@nccs-inc.org>, Jacki Frain <pchsfrain@embarqmail.com>, Charmaine Dunkel <cdunkel@starkecs.com>, Lynette Carpenter <lcarpent@urhere.net>, dbrown@areaivagency.org, Elva James <ejames@areaivagency.org>, Dawn Layton <dlayton@clintoncountytransit.org>, Gale Spry <gspry@wcoa.comcastbiz.net>, juanita@wcoa.comcastbiz.net, mary.nichols@asipages.com, kclark@crawfordsville-in.gov, Roxanne Roman <rroman@cdcreources.org>, trickle@capwi.org, ccsfs@frontier.com, kdecamp@lifestreaminc.org, bwashler@lifestreaminc.org, Dave Benefiel <dave@heartlandmpo.org>, newcastlettransit@yahoo.com, betsy@wellsonwheels.com, bonnie@councilonaginginc.com, Tim Ramsey <tramsey@adifferentlight.com>, jedwards@cityofmarion.in.gov, Pam Leming <pleming@cityofmarion.in.gov>, gmaynard@careyservices.com, traci.gross@jrds.org, "Horton, Debbie" <dhorton@lifetime-resources.org>, mguidice@lifetime-resources.org, "Thomas, Erin" <ethomas@lifetime-resources.org>, rgoodwin@nhrinc.org, aankney@mcymca.org, smcbride@mcymca.org, Beverly Ferry <beverlyf@livingwellinwabashcounty.org>, vickik@livingwellinwabashcounty.org, tiffanym@livingwellinwabashcounty.org, jpatton@arcwabash.org, bcalhoun@casstransit.com, Cathy <cleigh@casstransit.com>, hsmith@peakcommunity.com, fcoa@rtcol.com, transpo1@rtcol.com, Cara Kellerman <director@encorecenter.org>, becky@wcoa.biz, Bernie King <bernie@wcoa.biz>, Cheri Perkins <cperkins@lagrangecoa.org>, kstoltzfus@arcopportunities.org, director.ncoa@outlook.com, slwilson@nec.org, rgreen@nec.org, kcraig@thearcfoundations.com, dkreais@steubenco.org, mzenk@dccoa.net, dblankenship@dccoa.net, Holly Saunders <hsaunders@huntingtoncountycoa.org>, lcarr@pathfinderservices.org, Cathy Franklin Co Pelsor <fcpt@frontier.com>, Dave Lingg <fayetteseniorcenter@comcast.net>, grants@connersvillein.gov, transit@fayetteseniorcenter.com, Terri Quinter <tquinter@richmondindiana.gov>, johanna@adcofrichmond.com, rushseniorcenter1@gmail.com, Union County <withamtrisha_ucaa@yahoo.com>

Dear Transportation Providers,

Please circulate this announcement in your communities! The INDOT Office of Transit is updating the coordinated human services transportation plans for the state's rural coordination planning regions. Over March 17th through 31st, a series of virtual public meetings will be held to inform interested individuals about the possibilities of coordinated public and human service agency transportation and, more importantly, to listen to anyone who rides, would like to ride, and/or operates public, private or human service agency transportation. The meetings will focus on the open discussion about gaps in available transportation service and strategies for increasing mobility. Public, private and non-profit transportation providers, human service agencies, and any individual who needs transportation should attend.

The meeting schedule is attached and is also available at <http://tinyurl.com/783czmmm>. The schedule includes links to participate in the virtual meetings, as well as dial-in numbers to participate by phone. There is information in the flyer about requesting language translation, closed captioning, or other meeting services for people with disabilities.

We would like to get the word out to as many people as we can, so please forward this to your TAC committees, board members, local elected officials, senior centers, agencies serving people with disabilities, CAP agencies, Head Start, community foundations, and any others you can think of!

Please let me know if you have any questions or concerns.

Thank you,
Christy Campoll

Christy Campoll | Senior Associate

3131 S. Dixie Hwy. Suite 545, Dayton, OH 45439

Office: 937.299.5007 | Direct: 317.439.1475 | www.rlsandassoc.com

RLS & Associates, Inc...Celebrating 33 Years of Service to the Transit Industry



Coordination Meeting Flyer.pdf

132K



Public Transit-Human Services Transportation Plan Update

Why: To update the Coordinated Public Transit-Human Service Transportation Plan for your INDOT rural coordinated planning region. The Federal Transit Administration (FTA) requires that projects selected for funding under the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program be included in a coordinated plan. Please participate and provide your input and insights to discuss unmet transportation needs, gaps in transportation services, and recommended strategies to improve mobility options in and around the area.

Who: Stakeholders (transportation providers, social service agencies, older adults, individuals with a disability, people with low income, etc.) and the general public.

Region	Date	Time	Link	Dial-In Number
Region 1 (Davies, Dubois, Gibson, Greene, Knox, Martin, Perry, Pike, Posey, Spencer, Sullivan, Warrick)	March 19, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 96830626318; Pass: 429323
Region 2 (Crawford, Harrison, Orange, Scott, Washington)	March 17, 2021	11AM-12:30PM EDT	Click Here	1-646-558-8656 ID: 97382822074; Pass: 634410
Region 3 (Brown, Jackson, Lawrence, Monroe, Owen)	March 18, 2021	12-1:30PM EDT	Click Here	1-872-240-3412 Access: 210-438-509
Region 4 (Jasper, Newton, Pulaski, Starke)	March 30, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 99496904659; Pass: 023077
Region 5 (Benton, Carroll, Clinton, Fountain, Montgomery, Warren, White)	March 31, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 91364207144; Pass: 248613
Region 6 (Clay, Parke, Putnam, Vermillion)	March 24, 2021	4:30-6PM EDT	Click Here	1-646-558-8656 ID: 92814488640; Pass: 262526
Region 7 (Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph, Wells)	March 23, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 97640193471; Pass: 810787
Region 8 (Dearborn, Decatur, Jefferson, Jennings, Ohio, Ripley, Switzerland)	March 24, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 91434469707; Pass: 382493
Region 9 (Cass, Fulton, Howard, Miami, Tipton, Wabash)	March 25, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 97515530161; Pass: 625782
Region 10 (DeKalb, Huntington, LaGrange, Noble, Steuben, Whitley)	March 29, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 98456315651; Pass: 925517
Region 11 (Fayette, Franklin, Rush, Union, Wayne)	March 25, 2021	4:30-6PM EDT	Click Here	1-646-558-8656 ID: 96970251584; Pass: 792145

Please call Kjirsten Frank Hoppe at 937-299-5007 or email kfrankhoppe@rlsandassoc.com to RSVP or if have any questions. If language translation or closed captioning services are needed, please call Kjirsten at 937-299-5007 one week in advance of the meeting if possible. Thank you in advance for your consideration and willingness to participate in this planning effort!

Please complete our public input survey! https://www.surveymonkey.com/r/Indiana_Transportation

Region 8 HSTP Meeting Attendance List

March 24, 2021

1. Julie Boggs, Ascension St Vincent Hospital in Jennings County
2. Geralyn Litzinger, Margaret Mary Health
3. Erin Thomas, Catch A Ride
4. Tara Britton, Ripley County YMCA
5. Bill Gossard, Tipton Encore Senior Center
6. Brian McGowan, Transmart
7. Michelle Guidice, Catch A Ride

Notes – meeting for Region 8. 3/24/2021

Julie Boggs, Ascension St Vincent Hospital in Jennings County – we currently have 1 taxicab and no public transportation available. No only for appointments, but for shopping for groceries and work.

Geralyn Litzinger, Margaret Mary Health - Margaret Mary Health Rides works with Catch A Ride to provide these services.

Erin Thomas – public transit Catch A Ride

Tara Britton, Ripley County YMCA, their clients use Catch A Ride and Margaret Mary Health Rides.

Bill Gossard – on the board of our local Tipton Encore Senior Center a 5310 grantee; we're very grateful to INDOT for their grants for buses. Our rural county is aging and the demand and need for transportation is ever growing. This is not Tipton's region but he had a conflict.

Brian McGowan, Transmart – transportation provider. Lives in Chicago. They are a MBE/DBE in Indiana.

Michelle with Catch A Ride.

Erin said that the Amish population is in Switzerland County. It can be difficult for them to schedule rides because they do not have frequent access to phones.

Needs Discussion

Erin – we implemented 30-day advance scheduling. Right now due to COVID we just take 7 days in advance. But normally it's 30 days. The remainder of the needs in the presentation probably still exist.

Erin – intro of Southeasttrans around 2017 was difficult. People could no longer schedule directly with us. People are reluctant to schedule with them. Also, for us as a provider, because there are so many different plans that have transportation brokers, we have 5 different brokers and sets of reporting and training requirements. It is taxing to deal with 5 different ones, it's very strenuous. We have to get trips from 5 portals. Many systems choose not to do Medicaid. We've had to hire a FT time person to manage Medicaid reservations and billing.

Geralyn: as a hospital, we have issues with transportation to medical appointments. Coordinating the transportation times and office visit times is difficult. Oncology and rehab patients are the bulk of our appointments. We serve 2 counties, and the hospital only has 1 vehicle. Ripley and Franklin Counties are serviced.

We get a lot of complaints because we set the expectation that transportation will be provided.

Because Catch A Ride runs their program, we can still look at availability in public transit when M. Mary can't fit a trip in.

Erin sees a lot of vehicles out and about and wishes the transportation could be more coordinated. Would 5310 be available for operating? She wants to serve these populations better.

She knows a grant came out recently and wants to find creative solutions they could try. Catch A Ride needs to expand, but there is no funding.

Julie Boggs – in Jennings, we have constant issues with people being able to get to appointments or getting home from the ER. Ascension has a contract with Lyft in which people need to schedule rides through her department. They've had it for several rides but they've never been able to schedule a ride with Lyft. Even though we have that option, we've never been able to successfully utilize that. There are not really Uber-Lyft drives in Jennings County.

Jennings County really has a great need for services.

Erin has advocated for a SORTA stop in Lawrenceburg. There are ongoing discussions.

Erin said they used to service Jennings County – they no longer do – they often needed to go to Columbus for trips. Erin coordinates with Franklin County to serve people at that county line.

Erin said Catch A Ride has attempted to be more visible, and awareness is better than it used to be. She still feels they are misunderstood. People think they are just for older adults or medical trips. Maybe because they are associated with LifeTime Resources.

Geralyn: for us, being in rural Indiana, the drive time to and from medical appointments can be burdensome. There is a lot of empty van time between trips. This is difficult to manage. Margaret Mary's facilities are very spread out.

Providers

Centerstone occupies the same service area as the county in this plan area. No longer called Quinco. <https://centerstone.org/locations/indiana/#nav-locations>

Per Brian – Developmental Services from Columbus serves this area. Lifestream also comes into this region. <https://www.dsiservices.org/servicearea>

Envision Jefferson County was looking at transportation from a planning standpoint. But they are not a provider.

Thrive Alliance is not a provider.

Historic Hoosier Hills is the pass-thru to LifeTime which operates CatchARide.

Erin said there are a couple taxi cab services. Ladybug and Night Out. In Madison there is Speedy Cab. Richland EMS provides medical transportation (non emergency).

There is a little Uber/Lyft activity but the drivers mostly go to Cincinnati because there is more money to be made there.

Genesis Transportation is a provider.

Goals/Strategies

Catch A Ride has become a provider for multiple Medicaid plans since the last plan.

Catch A Ride has something called Web Rides for online scheduling. They are trying to roll it out to more people.

Their partnership with Margaret Mary started since the last plan.

Erin thinks the existing goals are good to continue.

Jennings County has a Senior Resource Center that was looking into a grant to get transportation going there again. But there was turnover and the initiative didn't go forward. We can't seem to make any progress here on transportation.

Julie: services available through the Medicaid MCEs (managed care entities?) get a lot of complaints.

The YMCA has people who come here after going through PT. We have a program with New Horizons in which rides are provided to clients who need to come here. We don't get a lot of communication from people who have trouble getting here. Some employees use CAR to get here. If they need to work earlier in the morning, they would have difficulty. CAR does a good job from what they see.

Bill in Tipton

He doesn't have a lot of knowledge of their program but they have 2 buses. We have difficulty with dialysis scheduling. Usually, the patient has to go out of the county. It takes a lot of time for a vehicle to provide that type of ride. Another major issue is that our transportation system which is operated by our local senior center – it is challenged for funding. For payroll, or repairs, insurance, etc. We periodically try to collaborate with systems in surrounding counties but they are also stressed.

Future Goals

Michelle in CAR said that the same goals apply. They want to try to partner with different community members and agencies to make sure they get the service they need.

CAR has applied for a grant through OKI for some cameras. They are looking into electronic fare media or debit card type system to offer a form of payment aside from cash.

Michelle says there is certainly a need for expanded services in our area. We have trouble finding the 50% local match for 5311. The limit lies there. The pandemic is hurt funding more, and it was already difficult.

Geralyn – we'd love to add more vehicles to meet the needs but it comes down to funding. The number of trips we can provide, and the cost-per-trip, is difficult. Our regular operations and capital budget at M. Mary are not able to support expansion.

CAR does have a voucher program that started in 2017/8 – agencies purchase vouchers and give them to the people to ride with CAR. The vouchers are \$3. We also work closely with the local CARE initiative which helps people with gas money or car repairs.

Bill in Tipton County – we don't have a lot of social type services. In the past year, we started a LLC – Council to address mental health and substance use. As it developed, it increased the demand for transportation. People need rides because they have lost their licenses, or just are unable to drive, and people need rides to mental health and recovery services. We've also become involved in a regional mental health program at the state level. The state is bringing this to the counties around the state. It's DHMA – Bill will send us the name of the program.



Moving Public Transportation
Into the Future

Coordinated Public Transit – Human Service Transportation Plan 2021 Update

**TRANSPORTATION FOR OLDER ADULTS,
INDIVIDUALS WITH DISABILITIES, PEOPLE WITH
LOW INCOMES, & GENERAL PUBLIC**

MARCH 2021

A background map showing a street grid with several colored overlays: a red outline on the left, a yellow line running diagonally, and an orange outline on the right. The word "Agenda" is centered in a dark red font.

Agenda

- ◆ Introductions
- ◆ Project Overview/Section 5310 Program
- ◆ Discussion
 - Unmet Needs and Gaps in Service
 - Potential Solutions
- ◆ Next Steps

A background map showing a street grid with several colored overlays: a red outline on the left, a yellow outline in the top right, and a purple outline in the center. The title 'Introductions' is centered over the map.

Introductions

- ◆ Please share a little about yourself!
 - What is your name?
 - Are you representing an organization today?
 - What is your primary mode of transportation (or that of the person you are advocating for today)



What Is A Coordinated Plan?

- ◆ Identifies Unmet Transportation Needs and Gaps in Service in the Community
- ◆ Prioritizes Goals and Strategies to address Unmet Needs
- ◆ Identifies Opportunities for Collaboration and Coordination of Services
- ◆ Must be Locally Developed and Adopted



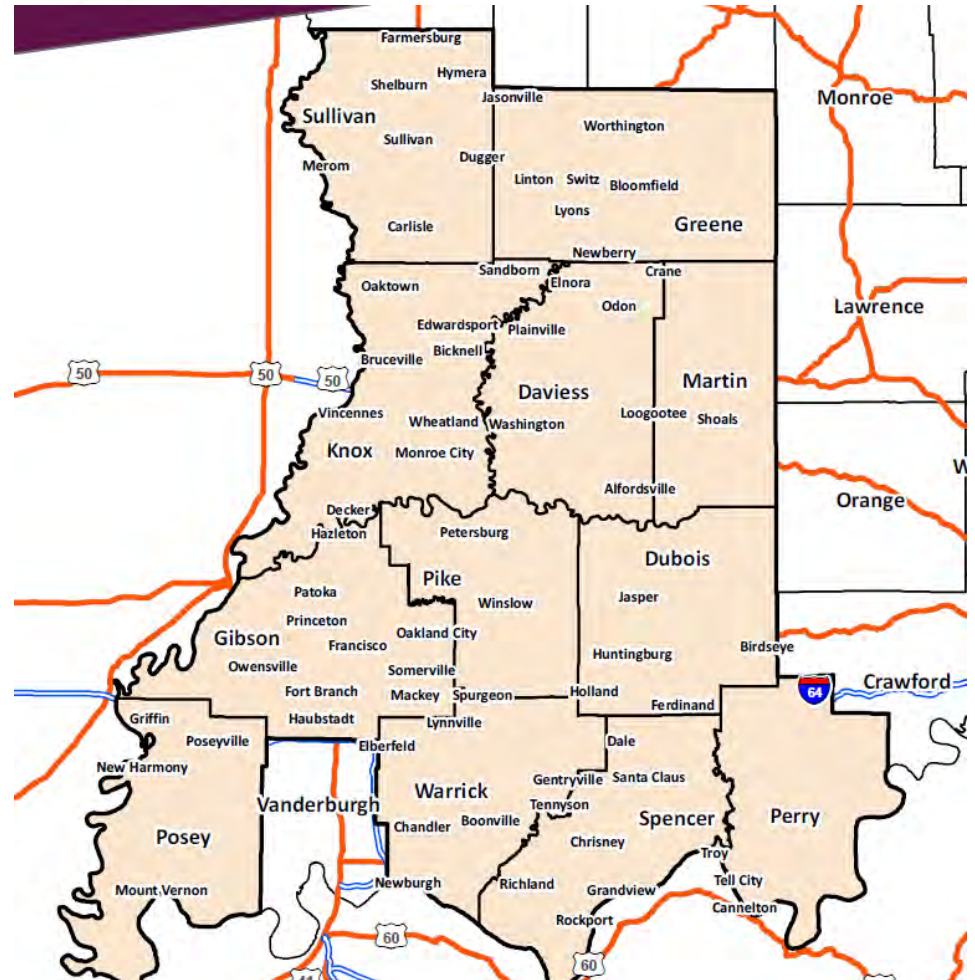
Section 5310 Funding

Projects Must Be Included in the Coordinated Plan

- ◆ Enhanced Mobility for Seniors and Individuals with Disabilities
 - 49 U.S.C. Section 5310
- ◆ Provides Formula Funding to Improve Mobility for Seniors and Individuals with Disabilities
 - Removing Barriers to Transportation Service
 - Expanding Mobility Options

Study Area

- ◆ Last Updated in 2017, the Plans are Available at <https://www.in.gov/indot/2825.htm>





Region 1 5310 Projects (2016-20)

- ◆ Accessible Vehicles (51)

- 2016-2020

- \$2,057,920 Total (Local Share = \$411,584)

- ◆ Rural Areas

- Historically, Demand for Vehicles in Indiana's Rural Areas Exceeds Available Funding



Transportation Public Survey

AVAILABLE NOW

- ◆ We Need to Hear from You and Your Neighbors, Consumers, and Friends

https://www.surveymonkey.com/r/Indiana_Transportation

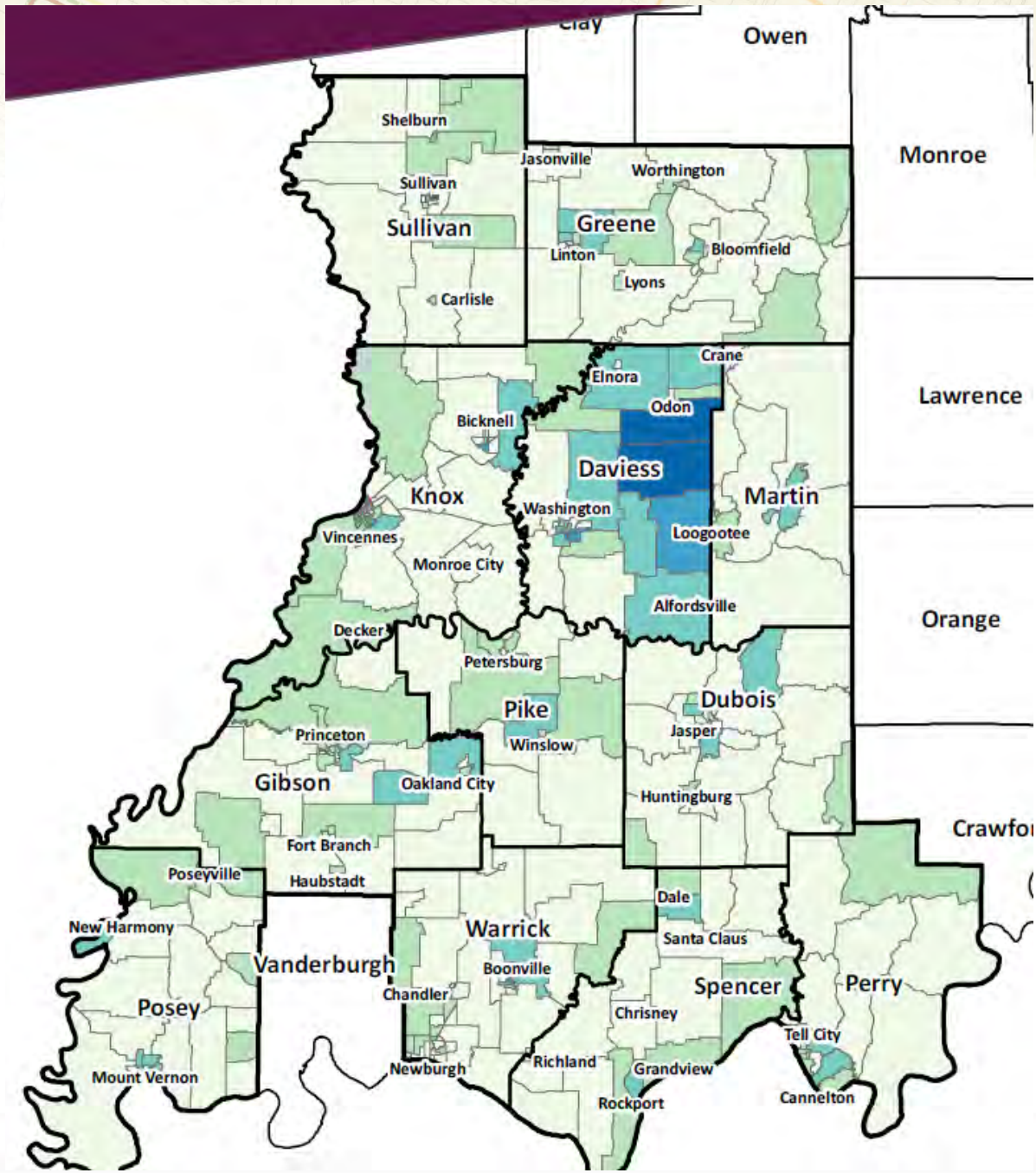
- Spanish Version Available
- Print and Large Print Available

A background map showing a street grid with several colored overlays: a red outline, a yellow line, a green line, and a purple line. The map is semi-transparent and serves as a background for the title and list.

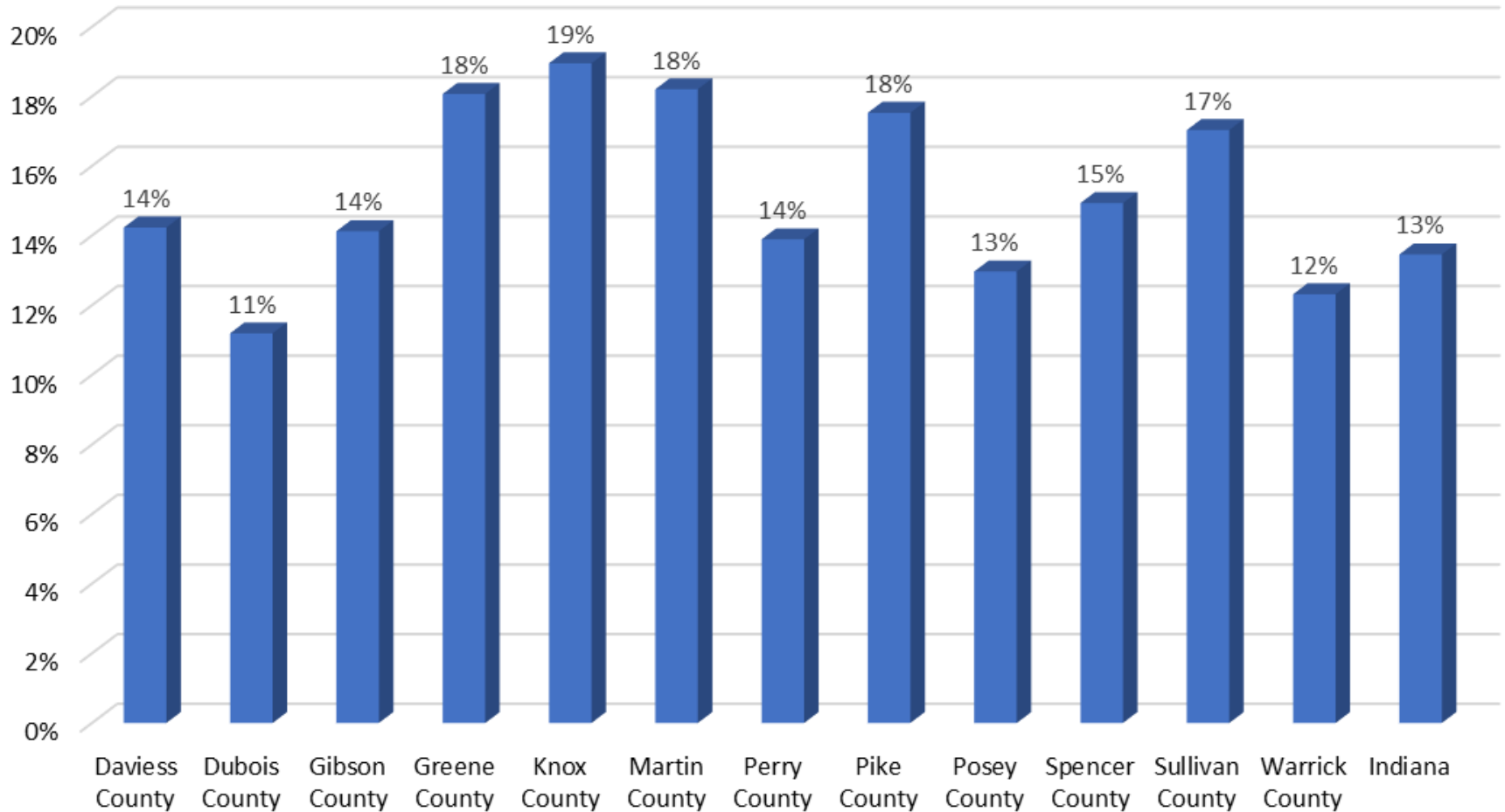
Transportation Public Survey

- ◆ I wish GCCOA could be funded or hired by American Cancer Society to provide rides for chemo and radiation only patients. I only request GCCOA.
- ◆ Dispatch is difficult and getting a ride is not easy. Too many rules. Wont take calls after 3 or before 8.
- ◆ I went to the ER with LCP Services, but I was down there too long and when I called to get a ride home everyone was closed. I had to pay \$60 to get home.





Individuals with Disabilities





Transportation Providers

- ◆ Providers include ALL Public, Private, Non-Profit, Volunteer, Government, and Human Service Agency Programs
 - Participation is Not Limited to Organizations that Serve Older Adults and Individuals with Disabilities
 - Every Part of the Network of Services is Important

A faint, stylized map of a region with various colored lines (red, yellow, green, purple) representing roads or transit routes. The map is overlaid on a light beige background.

Transportation Providers

- ◆ City of Huntingburg
- ◆ EasterSeals – Posey Co
- ◆ Gibson Council on Aging
- ◆ Older Americans/Ride Solution
- ◆ Perry Co COA
- ◆ Perry Co Veterans Van
- ◆ ARC of SW Indiana/Ride Solution
- ◆ Posey Co COA
- ◆ Sr and Family Svcs
- ◆ SIDC – Ride Solution and WATS
- ◆ Specer Co COA
- ◆ SIRS LinkNGo/Ride Solution
- ◆ Tri CAP
- ◆ Warrick Co COA
- ◆ Washington Transit System
- ◆ YMCA VanGo



Mobility Needs - 2017

- ◆ Medicaid – long wait times/managed care broker issues
- ◆ Gibson County rides to Evansville
- ◆ Crossing state lines
- ◆ Vehicle tracking tech
- ◆ Communication at the county level
- ◆ Veterans transportation?
- ◆ Vehicle replacement needs



2017 Goals

- ◆ **Goal #1: Increase Participation of Community Transit Providers as Contract Providers for Medicaid Brokers**
- ◆ **Goal #2: Expand Provider Use of New Technology**
- ◆ **Goal #3: Promote the Efficient Use of Resources at the Local and Regional Level**
- ◆ **Goal #4: Improve the Perception of Public Transit by Educating the Local Officials and the General Public**
- ◆ **Goal #5: Expand Transportation Service Availability Within and Outside of the Region**
- ◆ **Goal #6: Coordinate Transportation Resources to Promote Expansion of Service Within and Outside of the Region**
- ◆ **Goal #7: Incorporate New Capital to Improve Existing Mobility Options and Serve More People**



Discussion

- ◆ Have Transportation Needs in the Community Changed?
- ◆ What Strategies Could Help Meet Needs?
- ◆ What Plans are on the Horizon?
- ◆ Would More Coordination Help?
 - Within Counties
 - Inter-County Transportation

A background map showing a street grid with several colored overlays: a red outline, a yellow line, and an orange outline. The title 'Next Steps' is centered over the map.

Next Steps

- ◆ Continue the Needs Assessment and Analysis
 - Demographics, Survey Input
 - Existing Services
 - Geographic, temporal and eligibility gaps
- ◆ Develop Draft Coordinated Plan Goals & Strategies
- ◆ Prioritize Goals and Strategies
- ◆ Ongoing Work Toward Implementation



We appreciate your participation!

THANK YOU FOR YOUR TIME!



Please complete this survey about your transportation needs and preferences. This information will be used in your local area's Coordinated Public Transit-Human Service Transportation Plan. For more information please contact RLS & Associates at (937) 299-5007. Thank you!

1. What forms of transportation do you use: (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Public transit that serves your city or county, including bus systems, rail lines, ADA paratransit, or general public demand response/dial-a-ride | <input type="checkbox"/> Uber/Lyft |
| <input type="checkbox"/> Medicaid Non-emergency medical transportation (NEMT) | <input type="checkbox"/> Taxi |
| <input type="checkbox"/> Demand response/dial-a-ride services that are for specific groups only – for example, older adults or people with disabilities (this excludes ADA complementary paratransit provided by public transit systems) | <input type="checkbox"/> Inter-city bus, such as Greyhound or Megabus |
| <input type="checkbox"/> Transportation offered by volunteer or faith-based groups | <input type="checkbox"/> Bicycling |
| <input type="checkbox"/> Drive your own vehicle | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Rely on family/friends for rides | <input type="checkbox"/> Scooter/Moped |
| <input type="checkbox"/> Carpool or vanpool to work | |
| <input type="checkbox"/> Other (please specify) | |

2. If you use any transportation services, such as public transit or demand response/dial-a-ride, please tell us the name(s) of the services you use:

Name of Service 1	<input type="text"/>
Name of Service 2	<input type="text"/>
Name of Service 3	<input type="text"/>

3. What changes could be made to your local transportation options to make using them more appealing to you?

- | | |
|---|--|
| <input type="checkbox"/> If I could ride to other parts of the state (such as Indianapolis or other cities/towns) | <input type="checkbox"/> Pick me up at my home and take me directly to my destination |
| <input type="checkbox"/> Lower the cost to ride | <input type="checkbox"/> Increase health and safety precautions |
| <input type="checkbox"/> Start earlier in the morning | <input type="checkbox"/> Run fixed route service more frequently (for example, make a bus route run every 30 minutes instead of every 60 minutes) |
| <input type="checkbox"/> End later at night | <input type="checkbox"/> Increase the amount of demand response/dial-a-ride service available (for example, operate more vehicles so there are fewer turn-downs for trip requests) |
| <input type="checkbox"/> Operate on Saturdays | <input type="checkbox"/> Make scheduling demand response/dial-a-ride service more convenient (for example, allow for same-day or on-demand trip requests) |
| <input type="checkbox"/> Operate on Sundays | <input type="checkbox"/> Make it easier, or add the option, for children, spouses and/or care-givers to ride along |

Other (please specify)

4. Do you have difficulty getting the transportation you need to any of the following types of destinations?

	No difficulty	Sometimes difficult	Frequently difficult	Always difficult	Not applicable to me
Your employer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical offices, clinics or hospitals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental health care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shopping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Human service agencies or government offices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other trip purposes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Do you need to travel to destinations outside of your county for work, medical care, shopping, or other reasons?

- No
- Yes, for work
- Yes, for medical care
- Yes, for shopping
- Yes, for other reasons (please specify)

6. Is it difficult for you to travel outside of your county? If yes, please indicate what makes it difficult.

- Yes
- No
- Not applicable (no need to travel outside my county)

If yes, please provide more information:

7. What is your age group?

- Under 18
- 18-54
- 55-59
- 60-64
- 65+

8. Do you have a disability which requires you to use a cane, walker, wheelchair, and/or another device, or a service animal to help you get around?

- Yes
- No

9. What county do you live in?

10. What is your zip code?

11. Do you have any comments or suggestions regarding the transportation services in your community?