



# CUTR

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## Transportation Disadvantaged State-Wide Service Analysis



agency for persons with disabilities  
*State of Florida*

Prepared for  
**The Agency for Persons with Disabilities**  
**December 2017**



Center for Urban Transportation Research  
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# **Transportation Disadvantaged State-Wide Service Analysis**

**Prepared for:**

**The Agency for Persons with Disabilities**



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## List of Acronyms

ACS	American Community Survey
ADA	Americans with Disabilities Act
AHCA	Agency for Health Care Administration
APD	Agency for Persons with Disabilities
ASD	Autism Spectrum Disorder
ATI	Association of Travel Instructors
AVL	Automatic Vehicle Locator
BEBR	Bureau of Economic and Business Research
CTC	Community Transportation Coordinator
CTD	Commission for the Transportation Disadvantaged
CUTR	Center for Urban Transportation Research
DART	Dallas Area Regional Transit
DOPA	Designated Official Planning Agency
FDDC	Florida Developmental Disabilities Council
FDOH	Florida Department of Health
FDOT	Florida Department of Transportation
FPTA	Florida Public Transportation Association
FS	Florida Statutes
FR	Fixed Route Transit
FTA	Federal Transit Administration
FY	Fiscal Year
HART	Hillsborough Area Regional Transit Authority
IDD	Intellectual and Developmental Disabilities
ITS	Intelligent Transportation Systems
LCB	Local Coordinating Board
MDT	Mobile Data Terminal
MIC	Mobility Information Centers
MMA	Managed Medical Agencies
MPO	Metropolitan Planning Organization
MOA	Memorandum of Agreement

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NADTC	National Aging and Disabilities Transportation Center
NCMM	National Center for Mobility Management
NCSL	National Conference of State Legislatures
NCTR	National Center for Transit Research
NET	Non-Emergency Transportation
NTD	National Transit Database
PSTA	Pinellas Suncoast Transit Authority
QR	Quick Response Code
RPC	Regional Planning Council
RTAP	Rural Transit Assistance Program
RTC	Regional Transit Connection
SMMC	Statewide Medicaid Managed Care
SOW	Statement of Work
STS	Special Transportation Services
TD	Transportation Disadvantaged
TD/IDD	Transportation Disadvantaged/Intellectual and Development Disabilities
TDS	Transportation Disadvantaged Services
TDSP	Transportation Disadvantaged Service Plan
TNC	Transportation Network Companies
TRB	Transportation Research Board
USF	University of South Florida
VTA	Santa Clara Valley Transportation Authority

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## Executive Summary

### Project Overview

The Florida Agency for Persons with Disabilities (APD) was directed by the Florida Legislature to contract with an independent consultant to examine the state's transportation disadvantaged services (TDS), how such services are provided in urban and non-urbanized areas and how to assist in the development and use of different provider models. APD subsequently engaged the University of South Florida's Center for Urban Transportation Research (CUTR) which has broad experience and knowledge in the subject matter. This project was designed to examine the design and provision of the state's transportation disadvantaged services in urban and non-urbanized areas, identify "gaps" in service accessibility/connectivity and examine strategies of how to assist in the development of integrated services that include the use of the different provider service models.

The study service goal was to provide an examination of the state's transportation disadvantaged populations, with specific emphasis on individuals with intellectual and developmental disabilities (IDD).

### Legislative Proviso Charge

Effective upon this act becoming a law, to implement Specific Appropriation 249 of the 2017-2018 520 General Appropriations Act:

- (1) The Agency for Persons with Disabilities shall contract with an independent consultant to examine the state's transportation disadvantaged services, how such services are provided in urban and non-urbanized areas and how to assist in the development and use of different provider models.
- (2) There is created the Task Force on Transportation Disadvantaged Services, a Task Force as defined in s. 20.03, Florida Statutes. The Task Force is assigned to the Agency for Persons with Disabilities; however, the Commission for the Transportation Disadvantaged shall also assist the Task Force in carrying out its duties and responsibilities. The purpose of the Task Force is to examine the design and use of transportation disadvantaged services, considering at least the following:
  - (a) The use of regional fare payment systems;
  - (b) The improvement of transportation disadvantaged services in both urban and non-urbanized areas;
  - (c) The use of intercity and inter-county bus transportation; and
  - (d) The use of private providers or transportation network companies.
- (3) The Task Force is composed of the following members:

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- (a) The director of the Agency for Persons with Disabilities or his or her designee.
  - (b) The executive director of the Commission for the Transportation Disadvantaged or his or her designee.
  - (c) The community transportation coordinators for Alachua, Jackson, Miami-Dade, and Pinellas Counties.
  - (d) Two individuals who currently use transportation disadvantaged services, one appointed by the agency director and the other appointed by the executive director of the commission.
  - (e) A representative of the Florida Developmental Disabilities Council.
  - (f) A representative of Family Care Council Florida.
- (4) At a minimum, the Task Force shall consider:
- (a) Routing improvement to minimize passenger transfers or wait times;
  - (b) The ability to provide transportation disadvantaged services between specific origins and destinations selected by the individual user at a time that is agreed upon by the user and the provider of the service; and,
  - (c) The provision of transportation disadvantaged services to individual users to allow them to access health care, places of employment, education, and other life-sustaining activities in a cost-effective and efficient manner, while reducing fragmentation and duplication of services.
- (5) The Task Force shall submit a report that, at a minimum, includes its findings and recommendations to the Governor, the President of the Senate, and the Speaker of the House of Representatives by December 15, 2017, at which time the Task Force shall terminate.

### **Transportation Task Force**

A Task Force on transportation was established and assigned to the Agency for Persons with Disabilities (APD) along with the Florida Commission for the Transportation Disadvantaged (CTD). The APD and CTD assisted the Task Force in carrying out its duties and responsibilities. The Transportation Task Force was organized in late June 2017 and was convened for four meetings. Task Force members presented background on their areas of expertise, provided input to CUTR staff, and reviewed and commented on progress reports and drafts of the final report.

### **CUTR Project Approach**

CUTR's approach to the project was a three-phase effort: assessment of the issues and operating environment; research of national and state best practices and identification of innovative examples of mobility options; and, definition and

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development of opportunities for mobility approaches that provide potential to serve the Florida IDD community.

### **Florida Mobility**

The second chapter provides an overview of the existing public transportation services in Florida that are available to provide mobility options to the transportation disadvantaged community, including the IDD population. Additionally, it details the trends of the transportation disadvantaged population groups and the differences between Florida's urban and rural areas.

There are a variety of public transportation services and systems in the State of Florida that have the potential to provide mobility options for individuals with intellectual and developmental disabilities.

- Fixed Route Services – traditional bus service that transports the general public on a regular basis on vehicles that travel a designated route on a fixed schedule.
- Demand Response and Dial-a-Ride Service – transit agencies dispatch vehicles in response to a patron's request while accommodating other patrons with similar geographical requests.
- Taxi Services – vehicles usually fitted with a taximeter that may be hired, along with its driver, to carry passengers to any specified destination.
- Flex Route and Route Deviation Services – a hybrid service that combines fixed route and paratransit by operating on a set course, but has the ability to go off route and provide door-to-door or curb-to-curb service.
- Coordinated Systems – a collaboration of various transportation providers, local officials, and those working for customer interests to collectively use limited resources to provide transportation services. In Florida, coordination is achieved through the active involvement of the Commission for the Transportation Disadvantaged as the policy development and implementation agency, local governments, Community Transportation Coordinators, and metropolitan planning organizations to balance local flexibility and comprehensive state planning.
- Voucher Systems – a method of payment that enables people to obtain and afford transportation. Federal, state or local agencies that fund transportation develop a "purchase of service agreement" with a voucher site or broker. The funding source reimburses the voucher site at an agreed-upon rate. Vouchers are an effective solution for the challenges of high cost and inadequate resources that impact many seniors, people with disabilities, and/or those with limited income who do not have a personal vehicle or the ability to drive.

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- Volunteer Services – a service where the passenger has the opportunity to utilize a volunteer driver (could include family members), who is then reimbursed for transporting the person.
  - Transportation Network Companies (TNC) – On-demand ride services such as Uber or Lyft, also called transportation network companies (TNCs) or “ride-sourcing,” that use smartphone applications to connect drivers with passengers.

Additional background and detail is provided for Florida’s urbanized fixed route and rail services, Americans with Disabilities Act (ADA) complementary paratransit services, the Florida Commission for the Transportation Disadvantaged services, and Florida Medicaid services.

### **Florida Agency for Persons with Disabilities**

The third chapter provides an overview of the APD waiver transportation services. The Florida Agency for Persons with Disabilities (APD) works with local communities and private providers to assist people who have intellectual and developmental disabilities and their families. APD also provides assistance in identifying the needs of people with developmental disabilities for support and services. The agency serves more than 50,000 Floridians with intellectual and developmental disabilities (IDD).

As of July 2017, 34,095 customers were served on the waiver with 20,707 customers on the waiting list. The factors that affect enrollment include: funding availability, legislative requirements, and people in crisis given first priority and children in the child welfare system given second priority.

APD waiver transportation is transportation to and from the customer’s home and community-based waiver services when such services cannot be accessed through natural or unpaid supports.

The APD provides \$28 million in transportation services for slightly more than 11,000 customers, spending approximately \$2,556 per client per year. The cost per customer varies by APD region and county.

### **Assessment of Issues**

The fourth chapter provides an assessment and findings in response to the specific issues detailed by the Legislative Proviso language as well as the issues and concerns raised by members of the Transportation Task Force during their deliberations.

The Transportation Task Force convened four times to discuss and provide insight on the mobility service issues facing the transportation disadvantaged and particularly IDD customers. Each Task Force member was asked to provide a presentation to share a brief overview of their organization, describe mobility issues for the transportation disadvantaged population and suggest opportunities that might improve accessibility and mobility services. A number of issues were discussed among the Task Force that enhanced or expanded upon the issues presented in the Proviso language.

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## Recommendations

The approach taken in formulating recommendations was to first broaden the bandwidth to understand all the issues. Building upon the Legislative Proviso language the Transportation Task Force provided insight on related issues and potential solutions. Recommendations were then developed by categorizing the issues and refining recommendations that would address bundles of issues.

A significant finding that addressed early study interests of potentially formulating a new overall transportation disadvantaged process model was that Florida has the nationally leading model concept for coordinated services and that the TD Program structure affords opportunities to address the identified issues.

A common theme embedded within all the recommendations is Mobility Management – a basic approach of focusing on the needs of the customers and providing various options of travel that push the envelope for creative transportation services. Transportation services for the transportation disadvantaged and particularly the IDD customer can be especially complex and require expertise in matching the right service for the customer that may be challenged by different operating environments.

Several preliminary recommendations were prepared and presented to the Transportation Task Force on Transportation Disadvantaged Services for discussion, refinement and prioritization. The following section describes the four (4) recommendations in order of priority approved by the Task Force:

1. Redesign of the APD Transportation Business Model
2. Develop and Implement Mobility Management Single Point Information Center (MIC) Pilot Projects
3. Establish an Innovative Services Development Discretionary Grant Program for Transportation Services for Persons with Intellectual and Developmental Disabilities
4. Establish a TD / IDD Transportation Sensitivity Training and Travel Training Resource Program

## Prioritized Recommendations

- 1. Redesign of the APD Transportation Business Model Toward a Collaborative Partnership with the TD Coordinated System and Community Transportation Coordinators Providing Mobility Management Services.**

*Brief Description:* As noted in the introduction of this chapter, APD provides transportation services to a limited IDD customer base (approximately 11,000 existing eligible consumers) and represents a small percentage of statewide



coordinated service trips (7.62%). APD, however, has a great understanding of the IDD customer's travel purpose and needs through its close relationships in

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coordinating eligible Medicaid services to IDD customers. This recommendation is the result of an open and transparent exchange of information that allowed a better understanding of how APD IDD customers utilize transportation services, generalized types of trips, mobility need challenges and business relationships with Community Transportation Coordinators (CTCs) throughout the state.

Currently, APD waiver support coordinators arrange for individualized customer transportation services. APD has six regions that independently assign and negotiate transportation without a formal rate structure process, consistent definition of trip types, a detailed data collection process that could proactively address transportation needs and sustainable rates, and without the capacity to effectively provide oversight management of contracted transportation services. There is limited coordination with the CTCs throughout the state, due in part to the low trip rates. The waiver support coordinators have the challenging responsibility of managing APD customer iBudgets for various essential living, social, residential, and behavioral services. Transportation service management requires a unique expertise. It is recommended that a thorough reassessment of APD transportation service responsibilities be conducted in accordance with state and federal requirements. A new APD transportation business model should be developed in collaboration with the CTCs.

The detailed analysis of data CUTR has conducted could provide significant insight in changing APD's business model and build a mobility management role with the CTCs. In developing a new business approach, APD should seek consultant support for APD transportation services management and work in collaboration with CTD leadership to provide a detailed implementation plan. Consultant services should address a complete analysis of the existing transportation services provided by APD, an assessment of service performance requirements and particular care in addressing current service providers which include private for profit operators and non-profit providers, particularly group facility providers. This assessment would be a foundation for developing contractual relationships between APD and CTCs, promoting use of services directly operated by CTCs as well as CTC's performing a mobility manager role in securing and managing services from existing APD operators or new providers with the objective of providing the appropriate level of service for specific customer needs in the most effective and efficient coordinated manner.

### **Issues Addressed and Outcomes**

This recommendation contributes to the overall set of recommendations to address the Proviso language and enhance the coordinated system.

*Resources:* In 2017, APD budgeted \$28 million for transportation services for approximately 11,000 customers with a continuing demand from new customers in need of transportation to access waiver funded services. It is imperative to refine the APD transportation model and a collaborative effort should be established by APD with the support of the CTD.

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*Funding Estimates:* An assessment and development of a new transportation business model to establish a collaborative partnership with CTCs should be conducted with additional internal staff and consultant support provided to APD at the funding level of \$250,000.

## **2. Develop and Implement Mobility Information Center (MIC) Pilot Projects that would provide a Single Point of Contact for Transportation Disadvantaged Customers with Particular Care for Persons with Disabilities / Intellectual and Developmental Disabilities.**

*Brief Description:* Single point of contact mobility information centers (MIC) would be established with selected Community Transportation Coordinators (CTCs) and provide mobility management and travel planning services specifically for TD / IDD customers. Personnel would be trained with a focus on customer care and sensitivity protocols and etiquette for persons with disabilities. Training guidance created by the Florida Developmental Disabilities Council could be utilized if



available. Customers would be provided with personalized travel planning options and eligibility opportunities for available transportation programs. These MIC travel centers would be an asset to existing APD regional districts in providing service options for APD transportation clients. A Mobility Management program approach would be established to explore and develop expanded service options for customers including opportunities that may be available for on demand services such as those provided by transportation network companies (TNCs) and other private providers. Centers would be appropriately equipped with necessary hardware, software, telecommunication and internet accessibility features. A minimum of one (1) urban and one (1) rural candidate pilot CTC would be selected to design and implement a comprehensive mobility management program and travel center. Eligible funding activities would include technical support to design, develop, equip, staff and implement the mobility management program and travel planning center services.

### **Issues Addressed and Outcomes**

1. Minimize passenger transfer or wait times; ✓
2. Provide timely transportation as agreed upon by the user and provider; ✓
3. Allow access to health care, employment, education and other life-sustaining activities; ✓
4. Improve the design and use of transportation disadvantaged services in both urban and non-urbanized areas; ✓
5. Utilize intercity and inter-county bus transportation; and ✓
6. Utilize regional fare payment systems or develop fare payment processes that are seamless to customers and easily utilized operationally from one mode or service operator to another. ✓

The MIC would have the potential to address numerous issues including customer care and sensitivity, coordination among and between localized programs and

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providers, simplified and compatible fare payment, and seamless transitions in various operational environments. A single point of contact for customer travel information would assist both the customer and the provider of transportation services of the specific travel expectations and requirements for the trip requested. Travel information supports the fundamental reason for establishing a coordinated service and the Proviso language regarding providing access to various life endeavors and actually promotes awareness of the coordinated service to new customers. This recommendation may be especially helpful for rural regional travel to facilitate an understanding of existing services over county lines and the availability of intercity services. Travel centers would enhance the understanding of consumer needs for fare payment options and service provider fare acceptance exchanges. Anticipated outcomes of this recommendation would be model travel information centers that would provide one stop customer information, promote a regional perspective for service opportunities between and beyond jurisdictional boundaries, develop seamless fare processes, coordinate between service modes and service providers, and support existing CTC efforts for overall service coordination and collaboration among CTCs.

*Resources:* Pilot MICs would be developed utilizing the existing TD Coordinated System by selecting candidate CTCs that would provide an organizational structure foundation that is service and customer oriented. Built upon existing CTC functions would be this expanded mobility management services and single point travel planning functions.

*Funding Estimates:* Based upon a minimum of two (2) pilot projects and consultant technical support to design, develop and support the implementation of a mobility management / single point of contact travel center to include necessary staffing, communication equipment and technology, it is estimated that a budget of up to \$500,000 for each pilot project, or a total of \$1,000,000 would be required to implement this recommendation.

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### **3. Establish an Innovative Service Development Discretionary Grant Program for Transportation Services for Persons with Intellectual and Developmental Disabilities.**

*Brief Description:* The 2016 Florida Legislature authorized \$1,750,000 of non-recurring funds to be competitively awarded by the CTD to support projects that address several of the issues identified in this study.



It is recommended that a similar program be established but with recurring multi-year discretionary grant program allocations for innovative service development projects specifically relevant to the IDD customer market.

The focus of this new grant program would address the cognitive and communication disability issues that customers face in utilizing transportation services. Competitive grants would be awarded to proposals that target the needs of the IDD customer market and enhances operator procedures that improve the customer’s travel experience. Technology improvements would also be considered within the grant program particularly those that contribute to improved customer care, safety and mobility management coordination. The program would be housed in the CTD because of the existing experience with such a grant program and to optimize overall system coordination, however, an advisory selection committee partnership would be established with the APD and FDDC to be included in the grant evaluation and selection recommendation process. This program would have a significant impact on improving mobility services as a commitment to innovation and incubation of service improvements for IDD customers throughout Florida.

#### **Issues Addressed and Outcomes**

1. Minimize passenger transfer or wait times; ✓
2. Provide timely transportation as agreed upon by the user and provider; ✓
3. Allow access to health care, employment, education and other life-sustaining activities; ✓
4. Enhance the design and use of transportation disadvantaged services in both urban and nonurban areas; ✓
5. Utilize intercity and inter-county bus transportation; ✓
6. Utilize regional fare payment systems or specifically develop fare payment processes that are seamless to customers and easily utilized operationally from one mode or service operator to another; and ✓
7. Utilize private providers or TNCs. ✓

The grant program selection criteria could address the following types of objectives:

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1. Enhancement of the access of persons with intellectual and developmental disabilities to healthcare, shopping, education, employment, public services, and recreation;
  2. Assistance in the development, improvement, and use of transportation systems in non-urbanized areas;
  3. Improvement to the travel experience of persons with IDD, this would include personal safety of customers and perception / awareness of surroundings from trip origin to destination;
  4. Demonstration of the use of technology to improve service operations and customer information and care; and
  5. Encouragement of private transportation provider participation.

*Resources:* The CTD staff would administer this grant program and establish a formal process in which APD and FDDC would participate in the evaluation and recommendation of grant proposals.

*Funding Estimates:* It is recommended that this grant program be provided with additional funding above existing resources and not impact formula allocations currently provided at the county level. This new IDD focused program would be funded at the level of \$500,000 annually allowing awarded grant projects to be active up to three (3) years.

#### **4. Establishment of a Persons with Disabilities Transportation Sensitivity Training and Travel Training Resource Program to Include Specific Modules to Address Persons with Intellectual and Developmental Disabilities.**

*Brief Description:* A comprehensive sensitivity and travel training program should be developed that serves as a Florida standard resource for persons with disabilities that includes a specific module oriented to persons with IDD. Sensitivity training must go beyond just transportation operator training and include all transportation personnel functions serving the customer, from customer care reservationist, dispatch, outreach programs and community communications. When asked to describe high quality public transportation services, individuals often cite characteristics such as high frequency, reliability, convenience, affordability, and safety. While these are important features of any transportation system and desired by all customers, successfully meeting the specialized communication and disability etiquette needs of seniors and persons with disabilities are sometimes overlooked.



The clear emphasis of this program would be a resource for sensitivity training and travel training focused on transportation providers and customers in Florida.

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## Issues Addressed and Outcomes

1. Allow access to health care, employment, education and other life-sustaining activities; and ✓
2. Enhance the design and use of transportation disadvantaged services in both urban and nonurban areas. ✓

This program specifically addresses issues related to customer care and the relationship between customers and all service provider personnel. Relative to the Proviso issues, this program would have an impact on better understanding and communication with customers to facilitate improved awareness of service options, access to destinations and tailored service design for IDD customers.

*Resources:* There are numerous national and local resource examples that will support the development of such a training program. Additionally, there may be collaborative opportunities with FDOT, CTD and the Florida Public Transportation Association (FPTA) to partner with this program, including opportunities for grant applications.

Consistent with its state plan objective to enhance travel training services, it is recommended that the Florida Developmental Disabilities Council (FDDC) would take the lead role in establishing and implementing a sensitivity and travel training curriculum program.

*Funding Estimates:* The development of a curriculum, training modules and an initial course and instructional materials is estimated to be a one-time expense of \$150,000. The basis for this estimate is comparisons to similar training program development.

This estimate does not address the delivery of the training program which would be dependent upon the training techniques utilized (i.e. workshops, classes, computer based modules, remote training, etc.). There are opportunities for a collaborative training program between the major transportation stakeholders and advocates for IDD customers.

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## Chapter 1 Background

### Project Overview

The Florida Agency for Persons with Disabilities (APD) was directed by the Florida Legislature to contract with an independent consultant to examine the state's transportation disadvantaged (TD) services, how such services are provided in urban and non-urbanized areas and how to assist in the development and use of different provider models. APD subsequently engaged the University of South Florida's Center for Urban Transportation Research (CUTR) which has broad experience and knowledge in the subject matter. This project was designed to examine the design and provision of the state's TD services in urban and non-urbanized areas, identify "gaps" in service accessibility/connectivity and examine strategies of how to assist in the development of integrated services that include the use of the different provider service models.

The study's goal is to provide an examination of the state's transportation disadvantaged populations, with specific emphasis on individuals with intellectual and developmental disabilities (IDD).

The following definitions of service specific terms were detailed in the project contract document:

- Transportation Disadvantaged – As per Chapter 427.01, F.S., those persons who because of physical or mental disability, income status, or age are unable to transport themselves or to purchase transportation and are, therefore, dependent upon others to obtain access to health care, employment, education, shopping, social activities, other life-sustaining activities, or children who are handicapped or high-risk or at-risk as defined in s. 411.202.
- Developmental Disability – As per Chapter 393.063, a disorder or syndrome that is attributable to intellectual disability, cerebral palsy, autism, spina bifida, Down syndrome, Phelan-McDermid syndrome, or Prader-Willi syndrome; that manifests before the age of 18; and that constitutes a substantial handicap that can reasonably be expected to continue indefinitely.
- Intellectual Disability – As per Chapter 393.063, significantly sub average general intellectual functioning existing concurrently with deficits in adaptive behavior which manifests before the age of 18 and can reasonably be expected to continue indefinitely. For the purposes of this definition, the term:
- "Adaptive behavior" means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of his or her age, cultural group, and community.

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- “Significantly sub average general intellectual functioning” means performance that is two or more standard deviations from the mean score on a standardized intelligence test specified in the rules of the agency.

### **Legislative Proviso Charge**

Effective upon this act becoming a law, to implement Specific Appropriation 249 of the 2017-2018 520 General Appropriations Act:

(1) The Agency for Persons with Disabilities shall contract with an independent consultant to examine the state’s transportation disadvantaged services, how such services are provided in urban and non-urbanized areas and how to assist in the development and use of different provider models.

(2) There is created the Task Force on Transportation Disadvantaged Services, a Task Force as defined in s. 20.03, Florida Statutes. The Task Force is assigned to the Agency for Persons with Disabilities; however, the Commission for the Transportation Disadvantaged shall also assist the Task Force in carrying out its duties and responsibilities. The purpose of the Task Force is to examine the design and use of transportation disadvantaged services, considering at least the following:

- (a) The use of regional fare payment systems;
- (b) The improvement of transportation disadvantaged services in both urban and non-urbanized areas;
- (c) The use of intercity and inter-county bus transportation; and
- (d) The use of private providers or transportation network companies.

(3) The Task Force is composed of the following members:

- (a) The director of the Agency for Persons with Disabilities or his or her designee.
- (b) The executive director of the Commission for the Transportation Disadvantaged or his or her designee.
- (c) The community transportation coordinators for Alachua, Jackson, Miami-Dade, and Pinellas Counties.
- (d) Two individuals who currently use transportation disadvantaged services, one appointed by the agency director and the other appointed by the executive director of the commission.
- (e) A representative of the Florida Developmental Disabilities Council.
- (f) A representative of Family Care Council Florida.

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(4) At a minimum, the Task Force shall consider:

- (a) Routing improvements to minimize passenger transfers or wait times;
- (b) The ability to provide transportation disadvantaged services between specific origins and destinations selected by the individual user at a time that is agreed upon by the user and the provider of the service; and,
- (c) The provision of transportation disadvantaged services to individual users to allow them to access health care, places of employment, education, and other life-sustaining activities in a cost-effective and efficient manner, while reducing fragmentation and duplication of services.

(5) The Task Force shall submit a report that, at a minimum, includes its findings and recommendations to the Governor, the President of the Senate, and the Speaker of the House of Representatives by December 15, 2017, at which time the Task Force shall terminate.

### **Transportation Task Force**

- The Transportation Task Force members included: Barbara Palmer, Director, Agency for Persons with Disabilities (APD)
- Steve Holmes, Executive Director, Commission for Transportation Disadvantaged
- Valerie Breen, Executive Director, Florida Developmental Disabilities Council
- Mary Smith, Chair, Family Care Council
- Edward Griffin, MV Transportation, Inc. (Alachua County) - CTC contact
- Sharon Peeler, JTrans (Jackson County) - CTC contact
- Ross Silvers – Pinellas Suncoast Transit Authority (Pinellas County) - CTC Contact
- Robert Villar (Miami-Dade Board of County Commissioners) - CTC contact
- David Darm – User appointed by Commission for Transportation Disadvantaged
- Danielle McGill – User appointed by Agency for Persons with Disabilities

The Transportation Task Force was organized in late June 2017 and was convened for four meetings:

- July 6, 2017 – Via Conference Call

- 
- August 2, 2017 – Face-to-Face Meeting in Tallahassee
  - October 5, 2017 – Face-to-Face Meeting in Tallahassee
  - November 28, 2017 – Face-to-Face Meeting in Tallahassee

During these meetings, the Transportation Task Force members presented background on their areas of expertise, provided input to CUTR staff, and reviewed and commented on progress reports and drafts of the final report.

### **CUTR Project Approach**

Figure 1-1 displays CUTR’s approach to the project: assessment of the issues and operating environment; conduct of research regarding national and state best practices and identification of innovative examples of mobility options; and, definition and development of opportunities for mobility approaches that offer the potential to serve the Florida IDD community.



**Figure 1-1. Project Approach**

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## Chapter 2 Florida Mobility

This chapter provides an overview of existing public transportation services available in Florida that provide mobility options to the TD community, including the IDD population. The demographic and socio-economic trends of TD population groups and the differences between Florida’s urban and rural areas are also detailed.

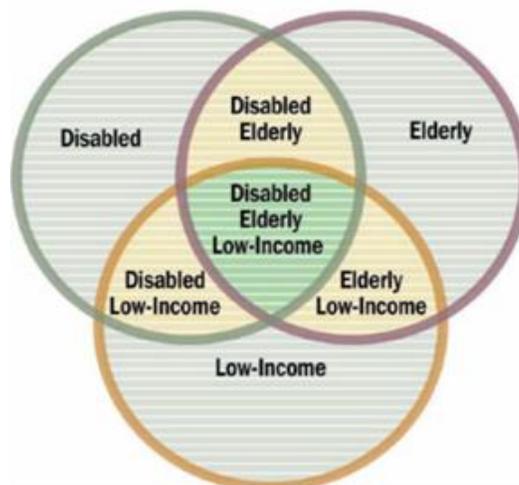
### Transportation Disadvantaged Definitions

Chapter 427, Florida Statutes defines “transportation disadvantaged” as “those persons who because of physical or mental disability, income status, or age are unable to transport themselves or purchase transportation and are, therefore, dependent on others to obtain access to health care, employment, education, shopping, social activities, or other life-sustaining activities or children who are handicapped or high-risk or at-risk as defined in s. 411.202, Florida Statutes.”

The general TD populations are those individuals who fall within the transportation categories of elderly, disabled or low income. These individuals, however, may or may not meet the second criteria of being unable to transport themselves.

Elderly has been defined as individuals 65 years of age and older. Disability refers to physical or mental limitations that may prevent a person from transporting him or herself, while income refers to the financial capacity of a person to purchase transportation. Similar relationships associated with age that limit mobility are not as apparent. Age alone should not affect a person’s ability to transport him or herself. It may, however, relate to other factors that are associated with the aging process or to the demographic characteristics of the elderly population; namely, the higher incidence of disability and poverty among the elderly.

The Venn diagram in Figure 2-1 details the three primary TD population groups and their overlap.



**Figure 2-1. TD Population**

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## **Emerging Environment for Transportation Disadvantaged Populations**

In a June 2017 report prepared for the CTD entitled “Florida Transportation Disadvantaged Program Strategic Planning Assessment Framework”, the emerging trends in Florida’s general TD population were examined. Several key findings are summarized below.

### ***Population Trends***

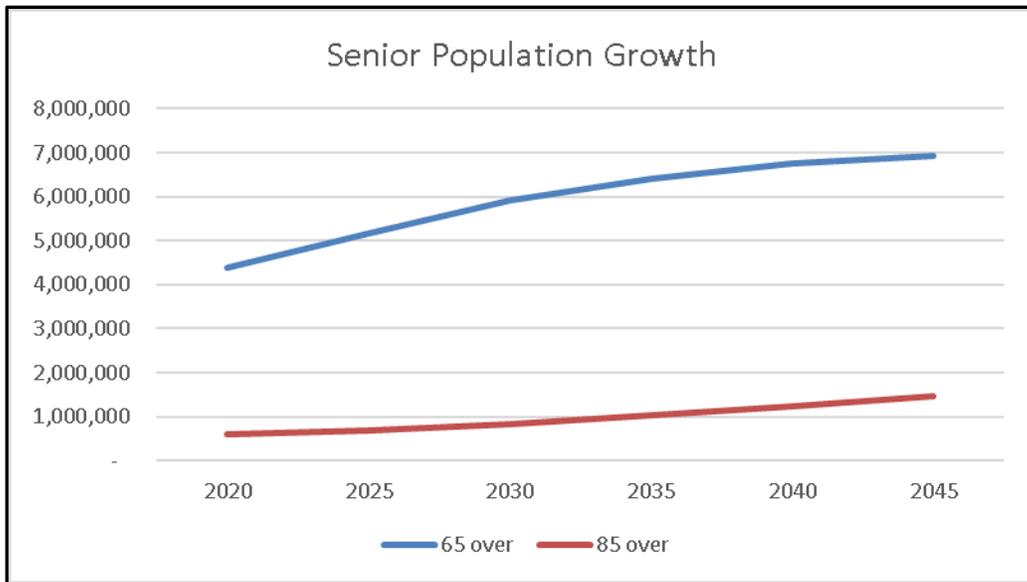
The growth and change of specific demographic groups impact the TD population as well as the type of mobility service necessary and the type of service provided (e.g. fixed route bus service versus paratransit services). The demographic characteristics in Florida offer unique conditions that are important to examine. Rapid population growth and increasing elderly, disabled and impoverished populations affect the delivery and availability of TD services.

An article from the Pepper Institute on Aging and Public Policy at Florida State University titled Florida’s Aging Population states, “Florida experienced tremendous population growth from 1970 to 2010, growing from just under 16 million residents in 2000 to almost 19 million residents in 2010. In fact, Florida’s population is expected to grow to over 23 million people by 2030.”

### ***Aging Population***

The demographics of the nation and Florida have changed dramatically in the past two decades. In the Administration on Aging’s A Profile of Older Americans: 2016, the population of the United States age 65 years and older increased from 36.6 million in 2005 to 47.8 million in 2015. Studies based on census data project the 65 years and older segment to continue to increase to 55 million in 2020, 72.1 million in 2030 and 98 million in 2060. The impact is compounded by the increased longevity with the over age 80 segment increasing by 180% by 2060.

Florida’s senior population growth is more pronounced than the nation. “In 2010, 51 of Florida’s 67 counties exceeded the U.S. percent of the population aged 65 and older.” Projections from the Florida Bureau of Economic and Business Research (BEBR), produce population projections for the State through 2045. The BEBR projections reveal Florida’s over 65 population (see Figure 2-2) will increase by approximately 3 million to over 7 million by 2045, and the 85-year-old and above population is projected to increase to nearly 1.5 million increasing by nearly 1 million by 2045.

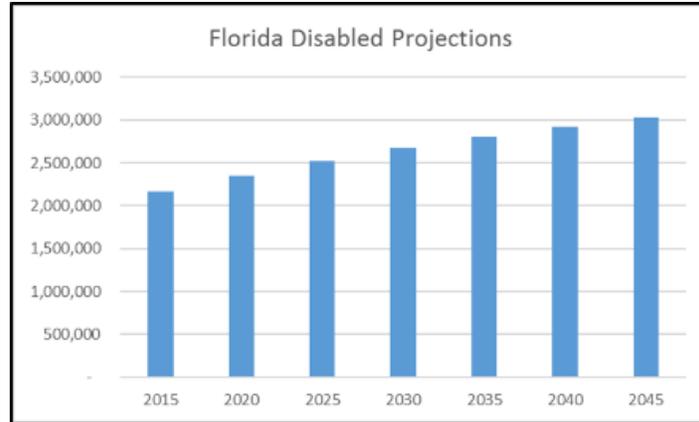


**Figure 2-2. Projected Senior Population Growth**

### ***Populations with Disabilities***

A person can have a disability at any age. Whether these individuals live by themselves or in a family setting, the household may not be able to accommodate a person who is disabled without the aid of public transportation services. "Transportation provides a vital lifeline for people with disabilities to access employment, education, healthcare, and community life. Transportation services allow individuals with disabilities to live independently within their communities." The 2000 Census found that 12 percent of people that have a disability have difficulty finding transportation due to limited public transportation, no access to a vehicle, inability to use regular fixed route service because of their disability or no one they can depend on for transportation. According to the 2015 Cornell University Disability Statistics Report for the state of Florida, 13.3% of Floridians have a disability.

Research by the National Academies' Institute on Health reports that the disability rates in the United States are expected to increase. Figure 2-3 below illustrates the disability projections for the State of Florida.



**Figure 2-3. Florida Disabled Projections**

### ***Low Income Population Distribution***

People living below the poverty level are a target market of the TD Commission. According to the 2015 American Community Survey (ACS), Florida’s poverty rate is higher (16.5%) than the U.S. poverty rate (15.5%). This pattern holds true among older populations in the state. Slightly more than 10% of persons over age 65 are living in poverty in Florida compared to 9.4% in the U.S. In Florida, 3.4% or 205,000 persons living below the poverty level work full time; another 669,000 work part-time. Given that 16% of the state’s TD trips are for employment purposes, TD services are critical to the working poor.

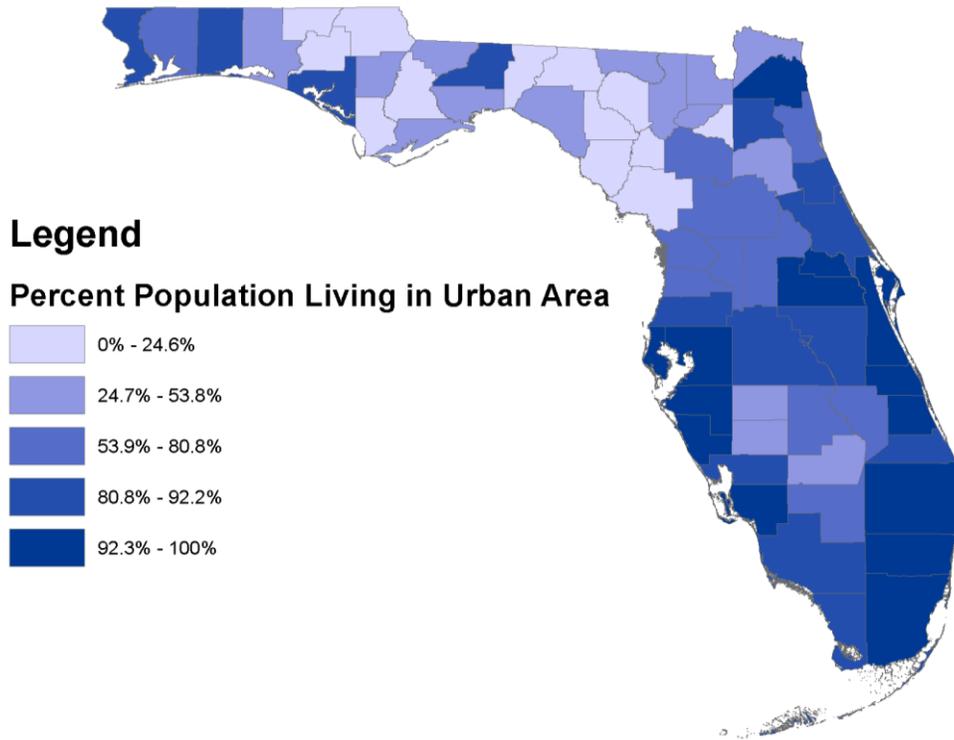
### ***Florida’s Urbanization***

Providers of TD transportation services confront unique situations when operating in urban and rural counties. To illuminate the conditions, challenges and needs associated with urban and rural environments, the population and demographic patterns in urban and rural counties were examined.

Accompanying Florida’s population growth is the expansion of Florida’s urban population. In 2000, 89% of Florida’s 15.9 million people lived in urban areas. Florida’s total urban population increased to 17.1 million in 2010, representing 91% of the population.

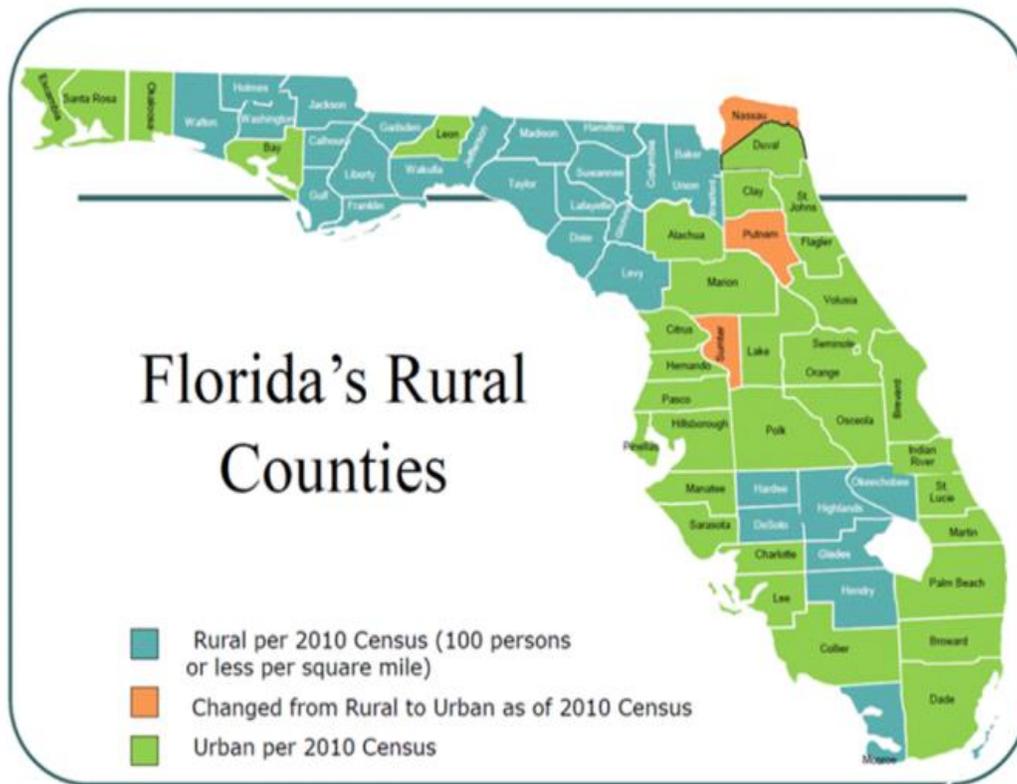
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An increase in the urban geographic areas is associated with the population growth and urbanization trend. Since 2000, Florida's urban areas have increased by 23%. Forty-two of Florida's 67 counties have more than 50% of the population living in urban areas and 27 counties have more than 85% living in urban areas (Figure 2-4).



**Figure 2-4. Urban/Rural Demographics**

To classify the Florida counties as either primarily urban or rural, the Florida Department of Health's (FDOH) definition of rural counties was utilized (see Figure 2-5). The FDOH uses the 100+ persons per square mile threshold for the urban designation. The FDOH designation classifies 37 of Florida's counties as urban and 30 as rural.



**Figure 2-5. Florida's Rural Counties**

Urban and rural populations have different experiences based on the availability and proximity to life sustaining activities. Rural areas have lower access to transportation due to the dispersed nature of rural environments and the limited local service opportunities.

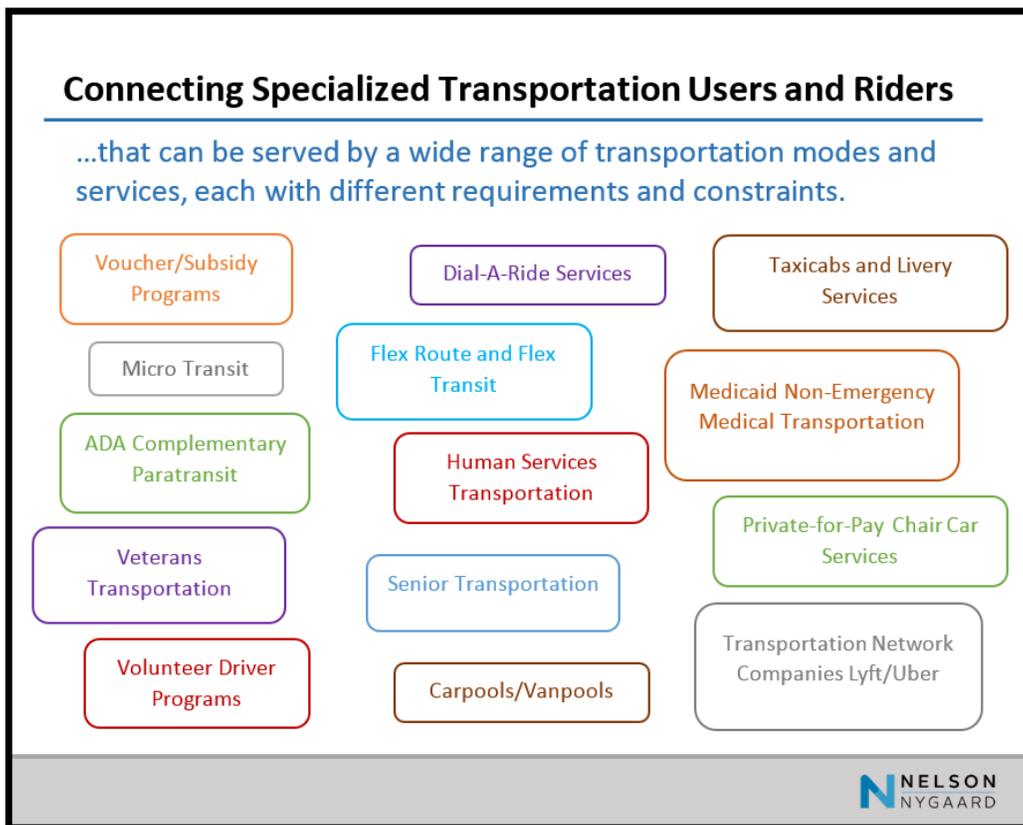
Employment and income differences within urban and rural areas provide greater insight into where higher and lower income Floridians reside. The employment and population ratio reported by the U.S. Census indicates a higher employment rate among urban residents (65.8%) compared to rural residents (54.7%) in Florida. This challenge is compounded by the higher disability rate in rural areas (16.5%) compared to urban areas (13.1%). Perhaps because of the reduced access and availability to services, including employment opportunities, persons with disabilities in rural areas are employed at lower rates than their urban counterparts; 31% in urban areas compared to 26.3% in rural areas. Given that 16% of TD trips are for employment purposes these types of trips are vital for persons with disabilities to gain personal and financial independence.

Urban and rural areas of Florida are aging but there are differences in the percentage of older populations. The median age in rural areas is 4 years above the urban median age. The targeted demographic of 65 years and older continue to illustrate that trend. The percent of Florida’s total population that are 65 years and over is higher in rural areas than in urban areas (21.3% and 19.3%) respectively. The urban areas still have far more of the older population; however, the rural population has limited access to local healthcare and employment opportunities.

When personal incomes are falling, the less likely a person is to be able to afford their own personal transportation. The employment and population ratio reported by the U.S. Census indicates a higher employment rate among urban residents (65.8%) compared to rural residents (54.7%) in Florida.

### Mobility Options

As depicted in Figure 2-6, there are a variety of public transportation services and systems in the State of Florida that provide, or have the potential to provide mobility options for individuals with IDD.



**Figure 2-6. Connecting Specialized Transportation Users and Riders**

- 
- Fixed Route Services – traditional bus service that transports the general public on a regular basis on vehicles that travel a designated route on a fixed schedule.
  - Demand Response and Dial-a-Ride Service – vehicles dispatched by a transit agency in response to a patron’s request while accommodating other patrons requesting transportation to similar origins or destinations.
  - Taxi Services – vehicles usually fitted with a taxi meter that are hired, along with a driver, to carry passengers to any specified destination.
  - Flex Route and Route Deviation Services – a hybrid service that combines fixed route and paratransit by operating on a set course, but with the ability to go off route and provide door to door or curb to curb service.
  - Coordinated Systems – a collaboration of various transportation providers, local officials, and those working for customer interests to collectively use limited resources to provide transportation services.
  - Voucher Systems – a method of payment that enables people to obtain and afford transportation, subsidized by Federal, state or local agencies through “purchase of service agreement” based upon an agreed-upon rate.
  - Volunteer Services – transportation is provided by a volunteer (could include family members), who receive compensation in exchange for services provided.
  - Transportation Network Companies – On-demand ride services such as Uber or Lyft, also called transportation network companies (TNCs) or “ride-sourcing,” that use smartphone applications to connect drivers with passengers.

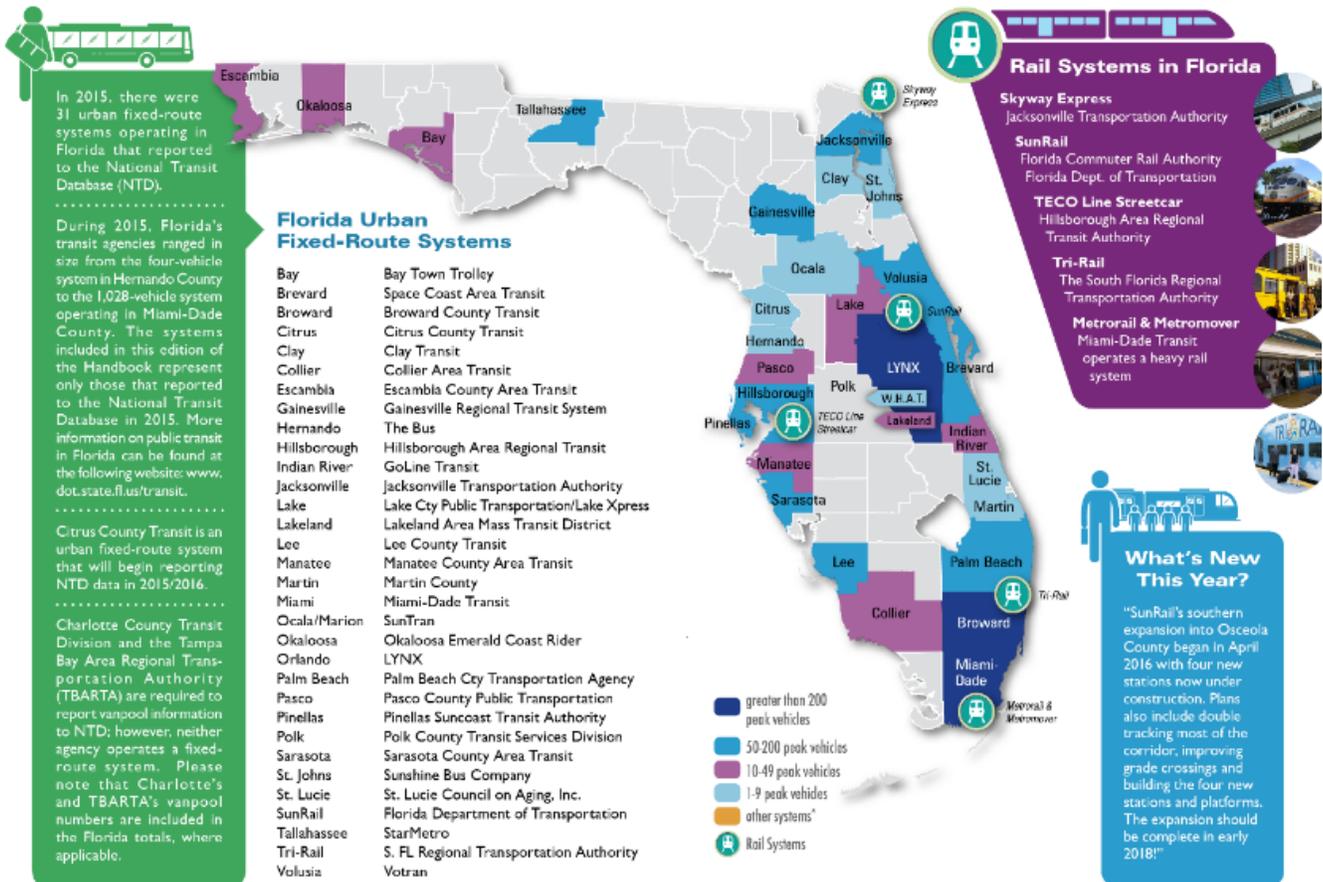
### ***Urban Fixed-Route Transit and Rail Systems***

Public transportation plays a critical role in meeting the mobility and accessibility needs of transit-dependent Floridians and visitors who, due to physical disability, age, or economic circumstances, cannot drive or own an automobile. By providing mobility and accessibility to millions of Florida’s residents and visitors, public transportation helps to improve the overall quality of life in Florida’s communities.

According to the Florida Department of Transportation’s 2016 Florida Transit Information and Performance Handbook, in 2015, there were 33 urban fixed-route systems operating in Florida that reported to the National Transit Database (NTD). During 2015, Florida’s transit agencies ranged in size from the four-vehicle system in Hernando County to the 1,028-vehicle system operating in Miami-Dade County.

Figure 2-7 below displays a summary of the 33 urbanized transit systems providing fixed route and rail transit services.

# Florida's Transit Systems



**Figure 2-7. Florida's Transit System**

The 2016 Florida Transit Information and Performance Handbook also provides a summary of a variety of performance measures from Fiscal Years 2014 and 2015. These are detailed in Figure 2-8 below. In Fiscal Year 2015, close to 271 million passenger trips were provided on Florida's fixed-route bus, rail and vanpool services.

GENERAL INFORMATION	Service Area Population	15,801,180	16,641,353
	Service Area Population Density	1,163.0	1,285.2
	Operating Expense	\$1,108,863,708	\$1,191,866,309
	Operating Revenue	\$313,981,819	\$315,765,393
SERVICE SUPPLIED	Total Annual Revenue Miles	143,421,564	145,701,039
	Total Annual Revenue Hours	9,861,182	10,054,298
	Total Revenue Vehicles	4,005	4,122
	Peak Vehicles	3,174	3,238
	Route Miles	15,945.0	15,612.6
SERVICE USAGE	Annual Passenger Trips	277,464,779	270,776,337
	Annual Passenger Miles	1,589,902,688	1,569,808,344
	Average Trip Length	5.7	5.8
QUALITY OF SERVICE	Resident Access to Transit*	n/a	40.61%
	Weekday Span of Service (hours)	17.5	17.5
COST EFFICIENCY	Operating Expense per Revenue Mile	\$7.73	\$8.18
	Operating Expense per Revenue Hour	\$112.45	\$118.54
	Operating Revenue per Operating Expense	28.32%	26.49%
	Passenger Trips per Employee FTE	29,832	27,684
COST EFFECTIVENESS	Operating Expense per Passenger Trip	\$4.00	\$4.40
	Operating Expense per Passenger Mile	\$0.70	\$0.76
	Operating Expense per Capita	\$70.18	\$71.62
	Farebox Recovery Ratio	25.40%	23.29%
	Average Fare	\$1.02	\$1.03
SERVICE EFFECTIVENESS	Passenger Trips per Revenue Mile	1.93	1.86
	Passenger Trips per Revenue Hour	28.14	26.93
	Passenger Trips per Capita	17.56	16.27
	Revenue Miles Between Safety Incidents	142,425	149,437
	Revenue Miles Between Failures	3,974	3,965

**Figure 2-8. Performance Measures**

### ***Americans with Disabilities Act (ADA) Complementary Paratransit Service***

The Americans with Disabilities Act of 1990 (ADA) requires public transit agencies that provide fixed-route service to provide “complementary paratransit” service to people with disabilities who cannot use the fixed-route bus because of a disability.

Complementary ADA paratransit services must be provided by all transit systems receiving Federal assistance to provide fixed-route transit services. No additional Federal or state transit financial support is provided to transit agencies for the provision of the complementary ADA paratransit services.

The ADA regulations specifically define a population of customers who are entitled to this service as a civil right. The regulations also define minimum service characteristics that must be met for this service to be considered equivalent to the fixed-route service it is intended to complement. The ADA complementary paratransit trips must be provided as requested and cannot be limited or prioritized by trip purpose.

In general, ADA complementary paratransit service must be provided within 3/4 of a mile of a bus route or rail station, during the same hours and days the fixed route operates and for no more than twice the regular fixed route fare.

While the transit agency is required to provide paratransit for trips with origins and destinations within 3/4 of a mile of a route/station, paratransit eligible customers who are outside the service area can still use the service if they are able to access the paratransit service area.

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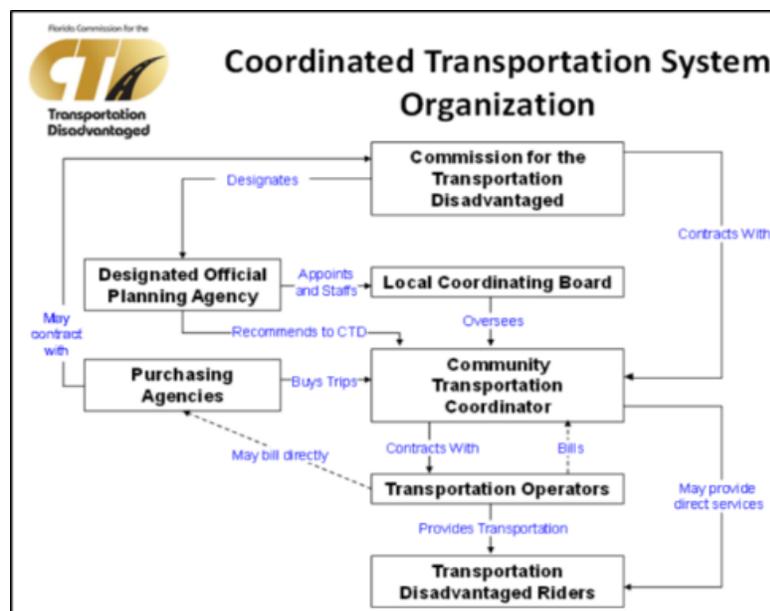
## **Florida Commission for the Transportation Disadvantaged**

The Florida Commission for the Transportation Disadvantaged (CTD) is an independent state agency serving as the policy development and implementation agency for Florida's Transportation Disadvantaged Program. The CTD is administratively housed within the Florida Department of Transportation. The CTD's mission is: "To ensure the availability of efficient, cost-effective and quality transportation services for TD persons."

The Legislature created Florida's Transportation Disadvantaged program in 1979 and re-enacted it in 1989. The 1989 legislation created the Florida Transportation Disadvantaged Commission (currently the Florida Commission for the Transportation Disadvantaged) and enhanced local participation in the planning and delivery of coordinated transportation services through the creation of local coordinating boards (LCBs) and Community Transportation Coordinators (CTCs). Each of Florida's 67 counties have designated CTCs and LCBs, providing local policy direction for the TD services in their communities.

The CTCs are business units or local public transportation providers that are responsible for providing or arranging the delivery of transportation services to the TD population. The designated CTC may provide all trips as a sole source, may provide some trips and subcontract some (partial brokerage), or may function as a complete brokerage subcontracting all trips to approved operators.

Local planning organizations, such as Metropolitan Planning Organizations and Regional Planning Councils, perform long-range planning, and assist the Commission and LCBs in implementing the TD program in designated service areas. In most situations, a designated service area is a single county. Figure 2-9 displays the organizational structure of the Florida CTD coordinated system.



**Figure 2-9. Coordinated Transportation System Organization**

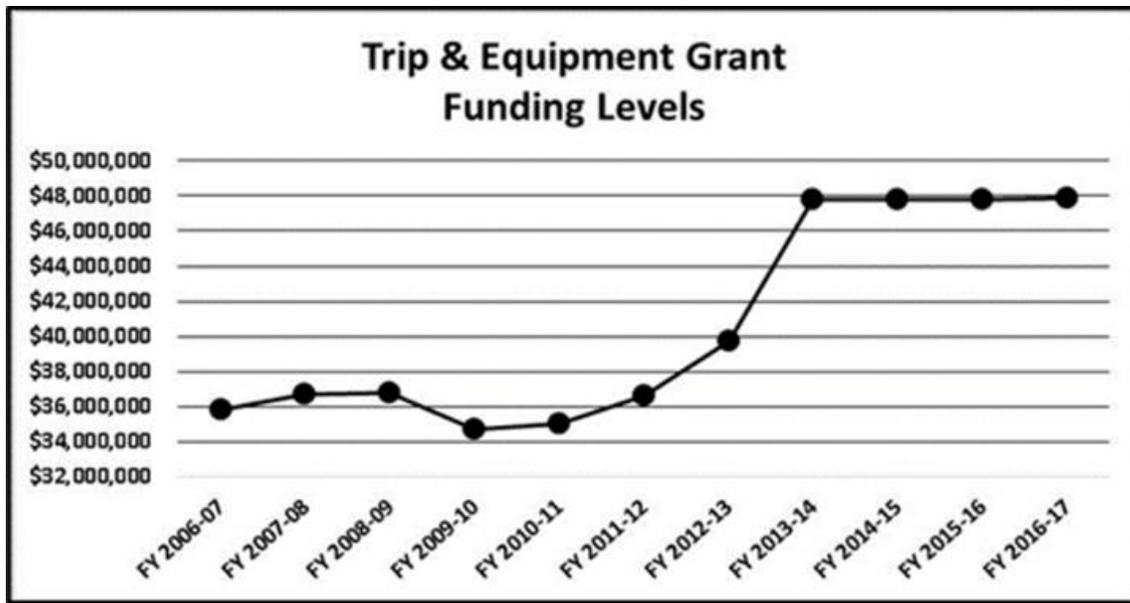
In 2016, the CTD's Annual Performance Report (see Figure 2-10) indicated that statewide over 21 million trips were provided. Fixed route or deviated fixed route services constituted over 52% of the trips with the remaining 48% served via paratransit services. Thirty-four percent of the trips were for life sustaining/other purposes and nearly one-quarter of the trips were for medical purposes. Approximately 16% of the trips provided took clients to employment and another 16% were for education/training/daycare services. The remaining 9% of the trips served nutritional purposes. Additional details on county level categorical trips can be found at: <http://www.fdot.gov/ctd/docs/AORAPRDocs/AOR2015-16Final20161221.pdf>

County:	Florida Commission for the	<u>Demographics</u>		<u>Number</u>					
CTC:	Transportation Disadvantaged	Statewide Population		20,271,272					
Contact:	605 Suwannee Street, M-S 49 Tallahassee, FL 32399-0450 850.410.5700 800.983.2435	Potential TD Population		8,447,071					
Website:	<a href="http://www.dot.state.fl.us/ctd">www.dot.state.fl.us/ctd</a>	UDPHC		834,602					
<b>Trips By Type of Service</b>		<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>Vehicle Data</b>		<b>2014</b>	<b>2015</b>	<b>2016</b>
Fixed Route (FR)		16,639,202	6,747,821	10,481,518	Vehicle Miles		117,941,581	88,717,630	93,048,270
Deviated FR		809,481	864,141	796,354	Revenue Miles		97,732,682	74,892,108	75,642,955
Ambulatory		9,105,589	8,295,589	8,431,669	Roadcalls		2,976	2,651	2,404
Non-Ambulatory		2,436,311	1,735,076	1,742,608	Accidents		1,311	1,243	1,601
Stretcher		27,103	7,419	2,591	Vehicles		5,296	4,691	4,142
School Board		137,473	130,908	167,398	Driver Hours		7,780,427	6,457,470	6,859,501
<b>TOTAL TRIPS</b>		<b>29,155,159</b>	<b>17,780,954</b>	<b>21,622,138</b>					
<b>Passenger Trips By Trip Purpose</b>						<b>Financial and General Data</b>			
Medical		7,356,578	5,440,070	5,164,765	Expenses		\$312,801,916	\$250,425,496	\$273,667,057
Employment		2,928,875	2,703,968	3,471,560	Revenues		\$324,987,622	\$252,248,677	\$267,320,111
Ed/Train/DayCare		3,251,236	3,210,375	3,433,064	Commendations		4,227	4,514	5,428
Nutritional		1,365,065	1,322,867	2,022,764	Complaints		15,048	9,603	5,910
Life-Sustaining/Other		14,253,405	5,103,674	7,529,985	Passenger No-Shows		295,588	231,708	242,049
<b>TOTAL TRIPS</b>		<b>29,155,159</b>	<b>17,780,954</b>	<b>21,622,138</b>	Unmet Trip Requests		169,577	155,607	726,932
<b>Passenger Trips By Funding Source</b>						<b>Performance Measures</b>			
CTD		6,543,611	4,706,186	8,487,760	Accidents per 100,000 Miles		1.11	1.40	1.72
AHCA		1,776,708	592,394	839,705	Miles between Roadcalls		39,631	33,466	38,706
APD		1,552,406	1,828,939	1,647,992	Avg. Trips per Driver Hour		1.61	1.71	1.62
DOEA		736,906	1,176,605	797,485	Avg. Trips per Para Pass.		44.65	30.26	25.67
DOE		334,279	274,893	202,449	Cost per Trip		10.73	14.08	12.66
Other		18,223,144	9,201,937	9,646,747	Cost per Paratransit Trip		24.17	21.91	23.19
<b>TOTAL TRIPS</b>		<b>29,155,159</b>	<b>17,780,954</b>	<b>21,622,138</b>	Cost per Driver Hour		38.88	37.44	37.66
					Cost per Total Mile		2.56	2.73	2.78

**Figure 2-10. CTD Annual Performance Report**

The Florida CTD established the Trip and Equipment Grant Program to provide opportunities for non-sponsored (not funded by other Federal, state or local sources) TD persons to obtain access to transportation for daily living needs. The CTCs use Trip and Equipment Grant funds to support operating and eligible capital expenses.

As depicted in Figure 2-11, over the past ten years the legislature increased funding for the Trip and Equipment Grant program from \$35,858,198 in Fiscal Year 2006-07 to \$47,877,372 (+34%) in Fiscal Year 2016-2017. Since FY 2013-2014 funding levels have remained relatively constant.



**Figure 2-11. Trip & Equipment Grant Funding Levels**

***Florida Agency for Health Care Administration Non-Emergency Transportation (NET) Medicaid Program***

Non-Emergency Transportation (NET) program services are provided to Medicaid recipients to access medical care if they are unable to drive, cannot afford to own or maintain a vehicle, or do not have access to affordable transportation. Multiple modes of transportation are available, including vans, wheelchair/stretchers, and public transportation.

From 2004 through 2014, the Florida Agency for Health Care Administration (AHCA) contracted with the CTD to provide NET services throughout Florida. The CTD, in turn, contracted with the CTCs or private for-profit transportation providers.

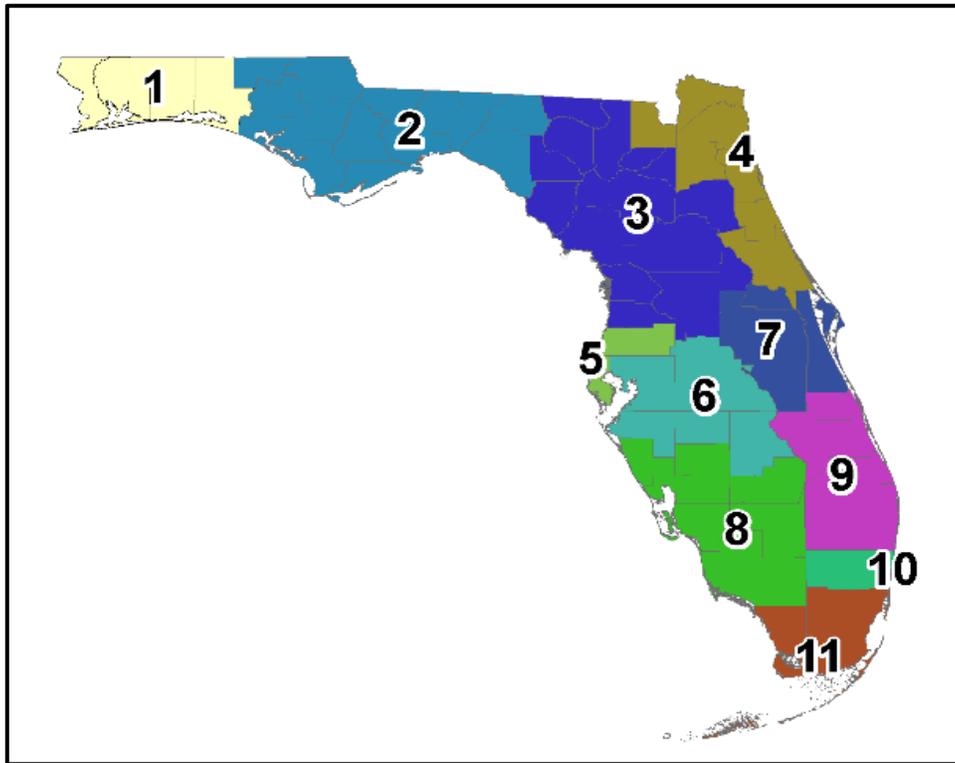
In 2011, the Florida Legislature created Part IV of Chapter 409, Florida Statutes, directing AHCA to develop the Statewide Medicaid Managed Care (SMMC) program for the purpose of providing Medicaid benefits in a more efficient and cost effective manner. The SMMC program was fully implemented in 2014 and requires mandatory enrollment in a managed care plan for most Medicaid recipients. Individuals enrolled in a managed care plan receive NET services through their plan as a covered service.

As a result of the transition to SMMC, the CTD and the local CTCs no longer have oversight of Medicaid-sponsored NET, unless the designated NET vendors elect to coordinate their services with the CTD or CTC.

The SMMC program is organized by eleven regions as detailed in Figure 2-12. Within each region, AHCA contracts with Managed Medical Agencies (MMA) to manage and provide the Medicaid services. For those Medicaid recipients requiring NET services to reach their medical appointments, each MMA contracts with transportation brokers to oversee the provision of the NET services. The NET brokers may provide the

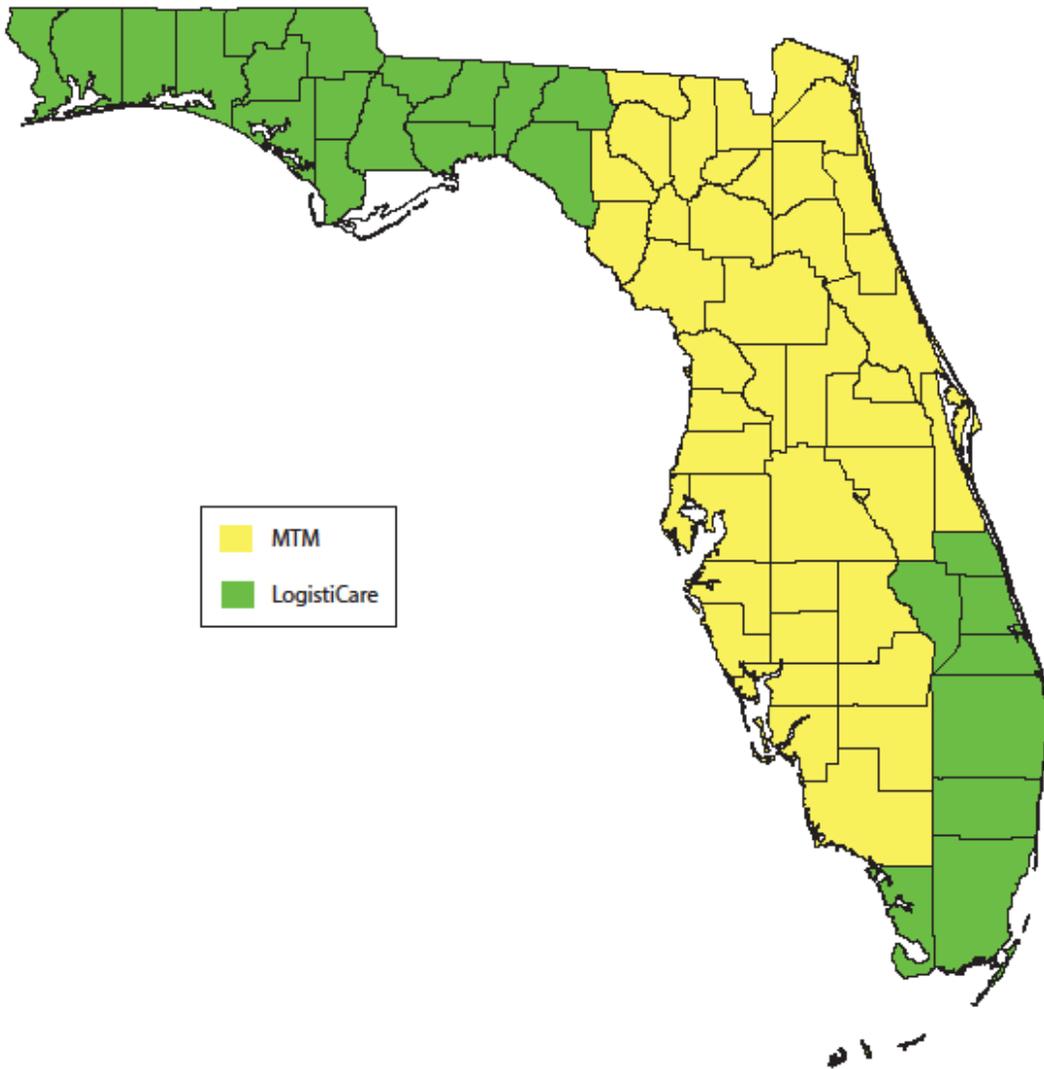
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transportation services directly, but normally contract with other non-profit, for-profit or private providers. Under this arrangement, the NET brokers are responsible for the provision of safe, reliable services to Medicaid clients.



**Figure 2-12. SMMC Regions**

In addition to the SMMC program, there are additional Medicaid recipients who are not enrolled in Florida’s SMMC program and who have no other means of transportation to access a Medicaid-covered service (see Figure 2-13). To serve these individuals, AHCA has contracted with two vendors - LogistiCare and Medical Transportation Management, Inc. [MTM]). These vendors must ensure the provision of NET services and provide oversight and quality improvement programs.



**Figure 2-13. Non-SMMC NET Brokers**

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## Chapter 3 APD Waiver Transportation

### Florida Agency for Persons with Disabilities

The Florida Agency for Persons with Disabilities (APD) works with local communities and private providers to assist people who have intellectual and developmental disabilities and their families. APD also provides assistance in identifying the needs of people with developmental disabilities for support and services. The agency serves more than 50,000 Floridians.

APD Waiver Transportation is transportation to and from the customer's home and community-based waiver services when such services cannot be accessed through normal support systems. Waiver support coordinators are responsible for making travel arrangements for the IDD customers.

The process to determine what type and amount of waiver transportation provided by APD include:

1. Customers receive individualized budgets based on an allocation formula or algorithm.
2. Customers choose transportation and other service providers based on their health and safety needs.
3. Waiver transportation providers must have valid service authorization prior to beginning services and billing via the Medicaid fiscal agent.
4. Transportation providers are reimbursed by month, mile or trip.
5. All transportation rates are negotiated.

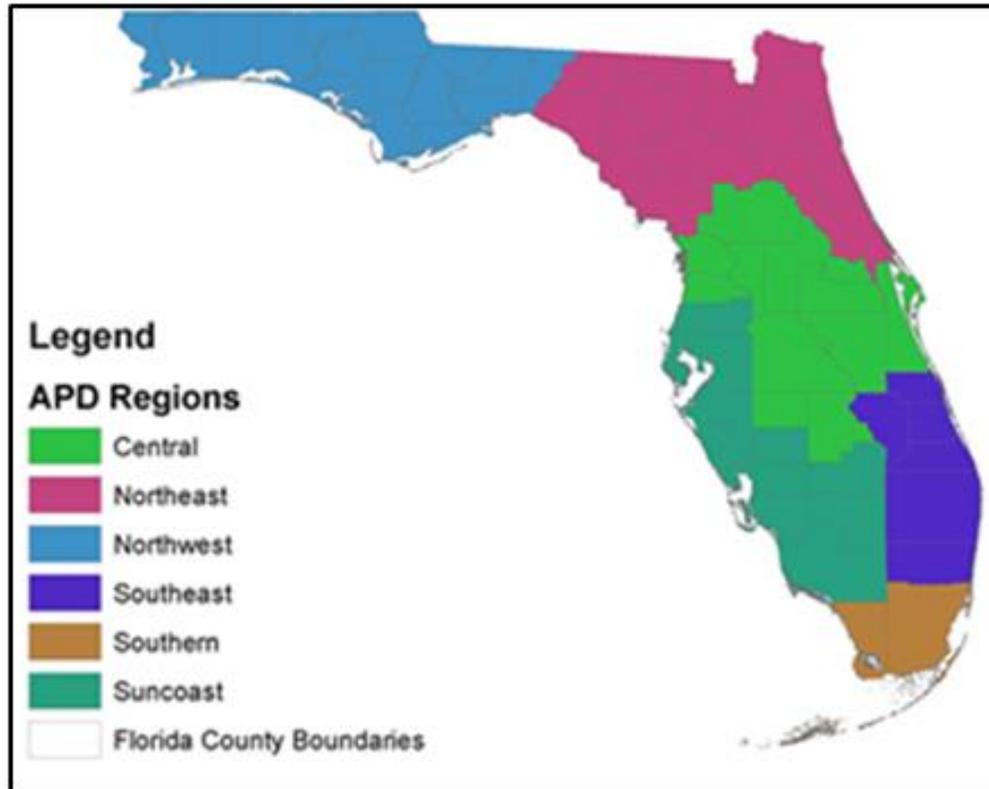
Eligible waiver transportation providers include:

1. Community Transportation Coordinators
2. Community fixed-route and paratransit services
3. Group homes and residential facilities
4. Adult day programs
5. Private for-profit and not-for-profit entities
6. Limited transportation providers (relatives, friends and neighbors that are not "for hire" entities)

As of July 2017, 34,095 customers were served on the waiver with 20,707 customers on the waiting list. The factors that affect enrollment include: funding availability, legislative requirements, prioritization given to people in crisis (first) and children in the welfare system (second).

## APD Waiver Transportation Services

The APD provides services to its customers on a regional level with six APD regions as detailed in Figure 3-1. Each region is responsible for determining and negotiating waiver transportation services and rates.

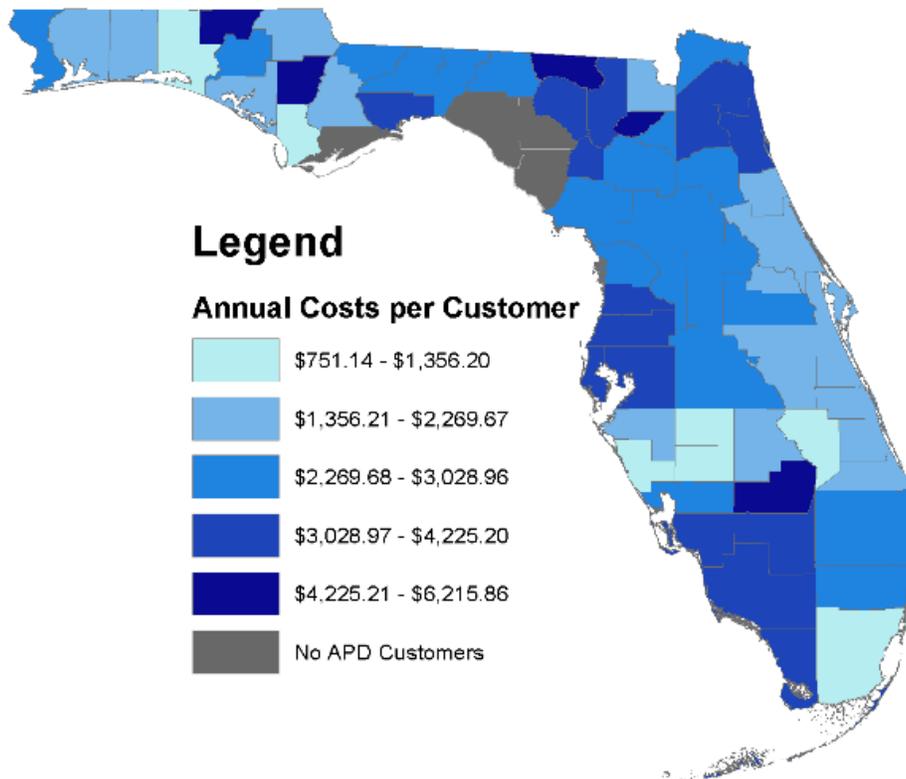


**Figure 3-1. APD Regions**

The APD provides \$28 million in transportation services for slightly more than 11,000 customers, spending approximately \$2,556 per client per year. The cost per customer varies by APD region and county. Table 3-1 illustrates the differences between the statewide rate and each of the six regions. Figure 3-2 is a map of the cost per customer for each county.

**Table 3-1. Transportation Cost per APD Customer**

Region	Total Customers	Total Costs	Cost Per Customer
Statewide	11,028	28,188,683.55	\$ 2,556.10
Suncoast	2,931	9,512,525.20	\$ 3,245.49
Central	2,156	5,211,552.91	\$ 2,417.23
Northeast	1,709	5,071,233.49	\$ 2,967.37
Northwest	1,073	2,715,960.63	\$ 2,531.18
Southeast	1,499	3,364,781.14	\$ 2,244.68
Southern	1,660	2,312,630.18	\$ 1,393.15



**Figure 3-2. Map of Costs per Customer by County**

Transportation costs are typically impacted by factors such as volume of passengers transported, trip distance, and the availability of services. In the case of the APD transportation services, the inconsistent impact of these factors on transportation costs reflects the non-typical needs of each of the customers served. This is compounded by the lack of a systematic approach by APD to select trip providers and set trip rates. The result is over 1,100 negotiated transportation statewide rates are currently being charged by the 354 service providers.

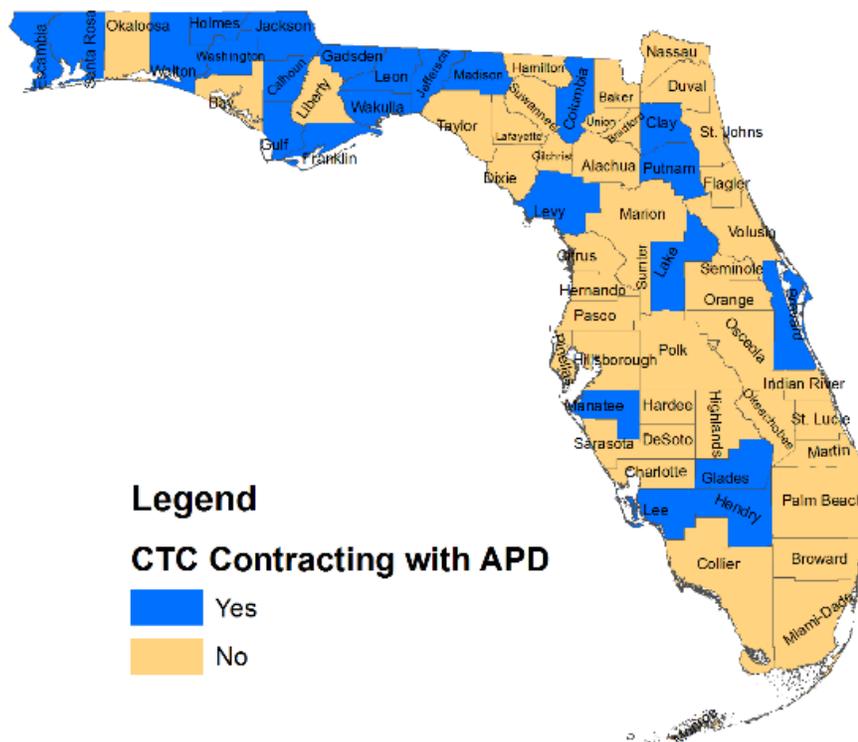
Understanding the forces that affect the cost per customer may offer insight into APD's transportation program and help identify opportunities to improve service. Factors such as urban and rural surroundings, number of transportation providers available, number of APD transportation clients, availability of group home transportation services and existing transportation systems impact the costs associated with delivering transportation services to APD customers.

An examination of the potential factors impacting transportation costs revealed inconsistent patterns. An analysis of the urban and rural environments revealed there was no correlation between the operating costs associated with urban and rural designations. The number of transportation providers in a region also had little impact on transportation expenditures per customer. Some counties with just one provider had higher than average costs per customer while other single provider counties had lower than average costs. Similarly, the counties with a greater number of providers revealed inconsistent impacts on the average cost per customer. To evaluate the

relationship between costs and APD service and customer characteristics, county average costs related to group homes were examined. Group home transportation services also revealed inconsistent influence on per passenger costs. In rural and urban areas, and in places where group home services were provided by a larger or smaller portion of the total number of providers in the region, as well as locations with few to many APD customers, there was no correlation in cost per customer with any combination of conditions.

Another significant factor contributing to the wide variety of trip rates is related to negotiations between local transportation providers and APD waiver support coordinators working within the financial limitations of the individual's Medicaid iBudget. The waiver support coordinators may be unaware of the various transportation options available in their region or county. The APD does not have a standard or centralized process for the assignment of transportation services and the negotiation of the associated rates.

Additionally, transportation services are often viewed as a secondary item in the iBudget decision process, with primary care services given priority. Transportation budgets are often limited resulting in low trip rates which may limit the availability of transportation providers. An example of this is that only 24 counties/CTCs currently have contractual arrangements with APD as shown in Figure 3-3.



**Figure 3-3. CTCs with APD Contracts – FY 2015-2016**

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## Observations

Several observations related to APD waiver transportation services include:

- The APD is currently operating without a centralized procedure and structure to assign APD waiver transportation services to eligible providers.
- Transportation services are assigned by local waiver support coordinators who may have limited knowledge of available transportation services.
- There is limited coordination with the CTCs throughout the state, due in part to the low APD trip rate reimbursements.
- The lack of common definitions does not provide the ability to gather data on trip types, trips provided and costs on a statewide basis to provide a systematic assessment of the APD waiver transportation program.
- There is not a consistent process to assess the quality of transportation services provided to determine if minimum contractual standards are being met in regard to vehicles, driver training, and other related factors.

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## Chapter 4 Assessment of Issues

Section 13 of the 2017 Senate Bill 2502 established a Task Force on Transportation Disadvantaged Services assigned to the Agency for Persons with Disabilities (APD) for the purpose of examining the design and use of TD services. The Proviso language specified a number of issues to be addressed. The following section presents each issue and concisely describes the assessment and related findings. Chapters 5 of this report addresses opportunities for improvements and recommendations related to these issues.

### **1. Examination of State’s Transportation Disadvantaged Services, How Services are Provided in Urban and Non-urban Areas, and How to Assist in the Development and Use of Different Provider Models.**

#### **Assessment 1**

A thorough examination was conducted of the various stratifications of transportation service types and programs along with the TD population. As discussed in Chapter 2, the mission of the Florida Transportation Disadvantaged Program is “To ensure the availability of efficient, cost-effective and quality transportation services for TD persons.” The service design of this program is somewhat unique and recognized nationally as a model of human services transportation coordination. The National Conference of State Legislatures (NCSL) has tracked state efforts to improve transportation options for people with mobility challenges. The national trend to achieve goals of coordination and enhanced TD services has been following the lead of Florida with the establishment of “coordinating councils” aligning all levels of Federal, state, regional and local governments.

The TD program structure establishes a framework to balance local flexibility with comprehensive state planning, policy and oversight. Specific roles and responsibilities of this structure are provided in Chapter 427.013 F.S. and Rule 41-2 F.A.C.

The TD structure respects local decision making regarding planning, coordination and operational implementation of TD services. Significant collaboration is generally required for Local Coordinating Boards (LCBs), Designated Official Planning Agencies (DOPAs) and Community Transportation Coordinators (CTCs). This localized approach allows for tailoring of TD services based upon specific demographics, trends, urban / rural environments, infrastructure, operational issues and resources. Urban counties generally have more infrastructure investments and public transportation resources with a greater and diverse population to serve. Rural counties generally have more significant challenges with infrastructure and the operational nature of rural geographies. Service provider models vary among all counties depending on local policies and resources.

The CTD requires specific reporting and monitoring of TD services. This has provided standardized information in assessing service performance, trip characteristics and customer comments / complaints. All CTC’s are annually evaluated by the LCB’s with

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findings reported to the CTD. The LCBs are required to maintain and monitor a grievance procedure to address local customer issues and concerns.

In reviewing the TD system structure and annual operating reports, there appears to be great flexibility for local consideration of varied service delivery approaches and new innovative partnerships. These are addressed in a number of study recommendations, emphasizing a mobility management approach that includes a broader effort of coordination and customer care to improve TD services. Recognizing that there are essentially sixty-seven individualized “service systems” (i.e. 67 counties), a regional travel market perspective should be considered where applicable. This perspective is already recognized and being addressed in both urban and rural environments.

An in depth analysis was conducted of APD waiver transportation services to reveal service procedures and options for the IDD population. This study documented APD procedures, providers, and customer utilization throughout the six APD administrative regions. Refer to Chapter 3 for more details of the APD transportation service process.

Transportation services are critical for IDD customers to access vital healthcare, enrichment, social activities, employment and education. The process of identifying transportation providers and assigning transportation services are a critical task for APD staff. The APD provides \$28 million in transportation services for slightly more than 11,000 customers. There are six APD regions designated throughout the state with waiver support coordinators tailoring services to meet individual customer mobility needs. There are 354 transportation service providers and over 1,100 different transportation rates. The APD structure should be re-assessed and streamlined with consideration for further coordination with the TD structure and specifically the CTC representing each county in Florida. A number of recommendations in Chapter 5 are specifically related to re-evaluating and changing APD’s business procedures related to mobility services.

## **2. The Use of Regional Fare Payment Systems**

### **Assessment 2**

In response to the expressed interest in regional fare systems, an industry scan of regional fare policies and fare collection systems was conducted ranging from relatively simple interagency agreements that simplify travel for seniors and persons with disabilities to much more complex multi-agency technology based fare collection programs.

There are a wide variety of transit fare policies for persons with disabilities including but not limited to: federally regulated policies that mandate that no more than half of the regular peak hour fare can be charged on regular fixed services and no more than twice the regular fixed route fare on complementary paratransit services, Medicaid waiver services that do not require a co-payment, Medicaid transportation services which require a \$1.00 fare (co-payment) and a multitude of various fare policies for other community based/social service agency transportation services

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provided to persons with disabilities. Due to the diversity of fare payment requirements and policies, there is inherent complexity in regional fare integration.

Similar to varying fare structures across the United States, many approaches to fare collection systems and technologies are utilized to collect fares from transit customers with and without disabilities. The most common reason for implementing fare coordination practices is to improve the quality of service to customers who travel through areas served by more than one agency, while ensuring the programs are revenue neutral to the participating agencies. Additional opportunities and benefits of regional fare coordination (particularly electronic fare programs) include improved data collection and reductions in cash handling expenses.

It should be noted that a regional fare system requires inter-agency cooperation and in many cases inter-operable technology. With regard to customer travel needs, an important issue is not only the demand to travel from one service area to another but the specific service type or mode that may be utilized. These are important considerations for persons with disabilities, based upon functional capabilities as well as transportation program eligibilities. A customer may be best served with a demand response service that may not require a transfer from vehicle to vehicle, or a specially designed fare system.

Increasingly, mobile payment applications are being implemented to simplify regional fare collection, although there are few examples of mobile based fare systems that accommodate paratransit fare payments at this time. Smart card and magnetic swipe card technology is more commonly used as a mechanism for paratransit fare payment. An even more simplified approach to regional fare payment for persons with disabilities is accomplished through the use of identification cards customers use to receive a discounted fare on multiple regional transportation systems.

Following is a brief overview of fare system approaches with relevance to service type and applicability to persons with IDD.

### ***Regional Fare Payment System Identification Cards***

In the Puget Sound region of the State of Washington 15 regional transportation agencies participate in a regional reduced fare permit as shown in Figure 4-1.

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## Regional Reduced Fare Permit for Senior and Disabled Persons



**Figure 4-1. Puget Sound Reduced Regional Fare Permit**

The Regional Reduced Fare Permit is an identification card that simplifies travel for senior and disabled riders of public transportation by allowing these riders to utilize the permit to receive reduced fares at any of the participating agencies without the need to be individually certified by each agency. The permit has no cash value and may not be used as a transfer between systems. The permit holder must pay the amount of the reduced fare on each system used, and use of the permit is subject to any time restrictions in effect by each system.

A similar program is offered in the San Francisco Bay area. The Regional Transit Connection (RTC) Card is available to qualified persons with disabilities. The RTC Card is issued and honored by fifteen transit providers in the region. The card entitles users to a reduced fare on fixed-route transit, rail and ferry systems throughout the region.

### ***SmartCard/Magnetic Swipe Card Paratransit Fare Payment Technology***

An industry scan of fare payment technology for paratransit services revealed several examples of smart-card/magnetic swipe card applications including: Spokane Transit, MARTA, METRA and SunLine.

*Spokane Transit – Go Smart Card*

In January 2009, Spokane Transit Paratransit began issuing new ADA eligible identification cards (Figure 4-2) that can be converted to smart card payment (Figure 4-3) media embedded with a chip that can be loaded and re-loaded with a monthly pass or as a stored value (pre-paid debit card) up to \$50.00 per transaction.



**Figure 4-3. Identification Card Feature**



**Figure 4-2. Smart Card Feature**

*MARTA – Breeze Card*

MARTA Mobility is the Metropolitan Atlanta Rapid Transit Authority’s ADA paratransit service available to anyone unable to ride or disembark from our regular MARTA transit services. For riders who qualify for MARTA Mobility, all fare and balances must be loaded onto a photo ID Breeze Cards or customers must pay the cash fare of \$4.00. The fares that can be loaded on the Breeze Card include: \$4.00 single one-way, \$68.00 mobility discounted pass (20 trips) or \$128.00 mobility discounted pass (30 days).

*METRA Transit - Columbus, GA*

METRA transit in Columbus, GA offers stored value magnetic swipe cards for purchase with a valid ID card (\$12.50/five rides or \$22.50/nine rides) and reloadable smart cards for a one-time fee of \$5.00 (Figure 4-4).

**SWIPE CARDS - DIAL-A-RIDE**

Value of Card	Number of Rides Stored on Card
\$12.50	<b>5 Rides per Card</b> (\$2.50 One-Way)
\$22.50	<b>9 Rides per Card</b> (\$2.50 One-Way)
\$ 5.00	<b>Smart Card</b> (Reloadable)

**Figure 4-4. METRA Paratransit Fare Media**

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### *SunLine Transit - Taxi Voucher Smart Card*

The SunLine Transit Taxi Voucher Program in Thousand Oaks, CA provides taxi services within the Coachella Valley at a 50% reduced price for seniors (60+) and persons with disabilities. With proof of qualifications, customers submit a voucher program application. Once approved SunLine will mail a taxi smart card. Value can then be loaded on the card which is then doubled by SunLine. Taxis are equipped with smart card readers.

### ***National Examples of Regional Mobile Fare System Technology***

Regional or multi-agency mobile payment systems are somewhat rare at this time. Two national agencies that have (or will soon) implement mobile fare payment options for regional travel through a multi-agency effort include: Dallas Area Regional Transit (DART) and Santa Clara Valley Transportation Authority (VTA). DART offers a regional mobile fare payment option for its services and those of three nearby transit agencies and in 2016, VTA was in the early stages of mobile fare payment integration with the Chicago area commuter rail system and the Pace Suburban bus system although neither system does (or plans) to offer a mobile payment feature for paratransit fare payment in the near future.

### ***Florida Based Regional Fare Payment Systems***

In Florida there are three technology based regional fare payment systems including: South Florida's EASY Card/EASY Ticket/EASY Pay system, the Tampa Bay Hillsborough / Pinellas Counties Flamingo Fares System, and a limited pilot deployment of the StarMetro/Gadsden Express E-Pass mobile payment app.

### *South Florida EASY Card/EASY Ticket/EASY Pay*

Miami's Department of Transportation and Public Works was the first transit system in Florida to introduce a smart card fare payment system in 2009. The system was designed to allow for future integration with Tri-Rail, the commuter rail service operating in Miami-Dade, and the public transit systems operating in neighboring Palm Beach and Broward Counties. In 2011, the system was integrated with Tri-Rail in the first phase of a regionally integrated fare collection system.

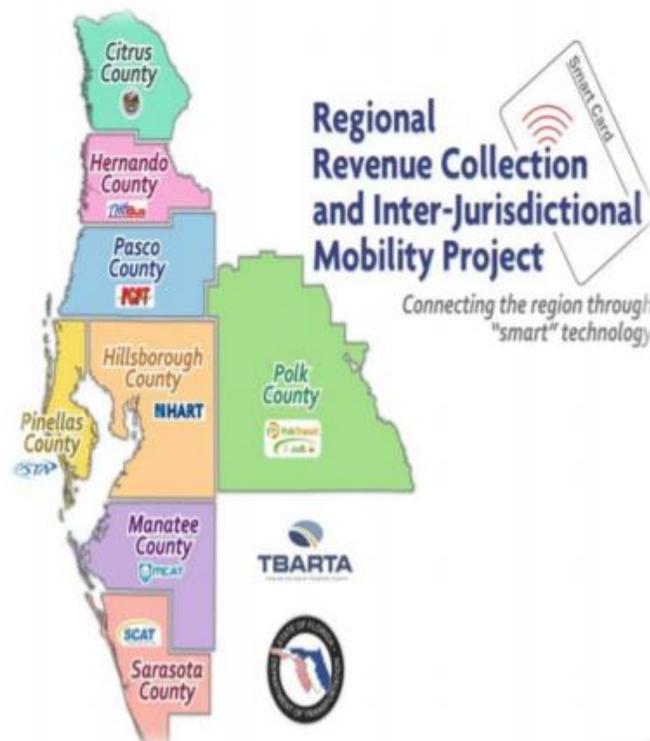
The EASY Card is a reloadable fare card that may contain both cash value and pass products that can be used for parking payment, MetroBus, MetroRail, Tri-Rail and Special Transportation Services (STS) paratransit fare payment.

In 2016, Miami-Dade further enhanced its fare payment system by adding a mobile payment feature. EASY Pay is a mobile payment options that allows users to buy a one-day pass for travel on Miami's MetroBus and Metrorail systems. EASY Pay mobile tickets are visually validated by MetroBus operators and Quick Response (QR) code scanners are used at fair gates to validate train tickets. Currently, EASY Pay can't be used on Miami-Dade's STS paratransit system.

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### *Tampa Bay Region Flamingo Fares*

In September 2016, HART and PSTA rolled out the new HART and PSTA Flamingo Fares Mobile App (see Figure 4-5). Fares are valid on all HART and PSTA buses, including the HART flex-routes, trolleys and streetcars. Flamingo Fares is not available for payment on the agencies' paratransit services. Several pass options are available including seven and three-day regional passes, monthly passes and one-day passes.



**Figure 4-5. Regional Fare Planning Partners**

### *StarMetro E-Pass*

StarMetro, is conducting a pilot project to test the E-Pass regional fare payment system. StarMetro operates the Gadsden Express on behalf of Big Bend Transit in neighboring Gadsden County. This is a limited regional demonstration due to the fact the Gadsden Express is the only regional route the two systems have in common. With relative ease, Big Bend Transit could choose to utilize the new app in the future to fully integrate fare payment on the two systems.

E-Pass allows users to purchase a variety of fare types (1-ride, daily, weekly, monthly etc.) but it is not currently available for fare payment on StarMetro's dial-a ride paratransit system.

Regional payment systems offer transportation agencies operating efficiencies such as reduced cash handling expenses and potentially shorter boarding times. Customers also experience added convenience when there is a need to travel across

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multiple jurisdictions and transfer to another transportation system by eliminating the need to purchase different fare media.

In Summary, before any agency invests in a regional fare payment system, it must carefully analyze whether there are a sufficient number of regional trips to justify the expense of implementing a regional system, as implementation costs can be significant depending upon the selected technology. There must also be agency partners who can make a business case for investments in the system.

Although there is no widespread utilization of regional systems for paratransit fare payment at this time, customers who require bus to bus or bus to rail transfers are afforded a more seamless travel experience. For persons with disabilities who are able to access these modes, regional fare systems provide the same convenience.

### **3. The Improvement of Transportation Disadvantaged Services in both Urban and Non-urban Areas.**

#### **Assessment 3**

There is clearly a difference in the mobility infrastructure of rural areas versus urban areas in Florida, just as other services and utilities are scaled based upon population, land use and funding investment.

Providers of transportation services for the TD population confront unique situations when operating in urban and rural counties. To illuminate the conditions, challenges and needs associated with urban and rural environments, the population and demographic patterns in urban and rural counties were examined.

The U.S. Census Bureau designates areas based on a variety of criteria, most notably population density and total population. The Census uses three types of designations; urbanized area, urban cluster and rural to more precisely describe the characteristics of a community. Each county may contain any combination of urbanized areas, urban clusters or rural areas.

Based upon these classifications, federal grant programs determine eligibility for funding. In effect, urban grant funding provides for greater investment in mobility infrastructure than state and local funding sources. Based on demographics, rural areas do not have access to the same funding levels to address public transportation infrastructure as urban areas can access.

As described in Chapters 2 and 3, there are layers of transportation services and various funding sources that differentiate urban and rural service. The TD program is progressive as a national model, as it provides "gap" support for eligible populations that have limited federal, state and local funding for non-sponsored trip needs.

Further improvements to transportation service in urban or rural areas are dependent upon additional state or local investments. Occasionally, there are opportunities for discretionary grants to enhance services.

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#### **4. The Use of Intercity and Inter-county Bus Transportation and the Use of Private Providers or Transportation Network Companies (TNC).**

##### **Assessment 4**

A review of available information for intercity and inter-county bus transportation, as well as private sector providers of public transportation and TNCs was conducted. A concise overview of the analysis follows.

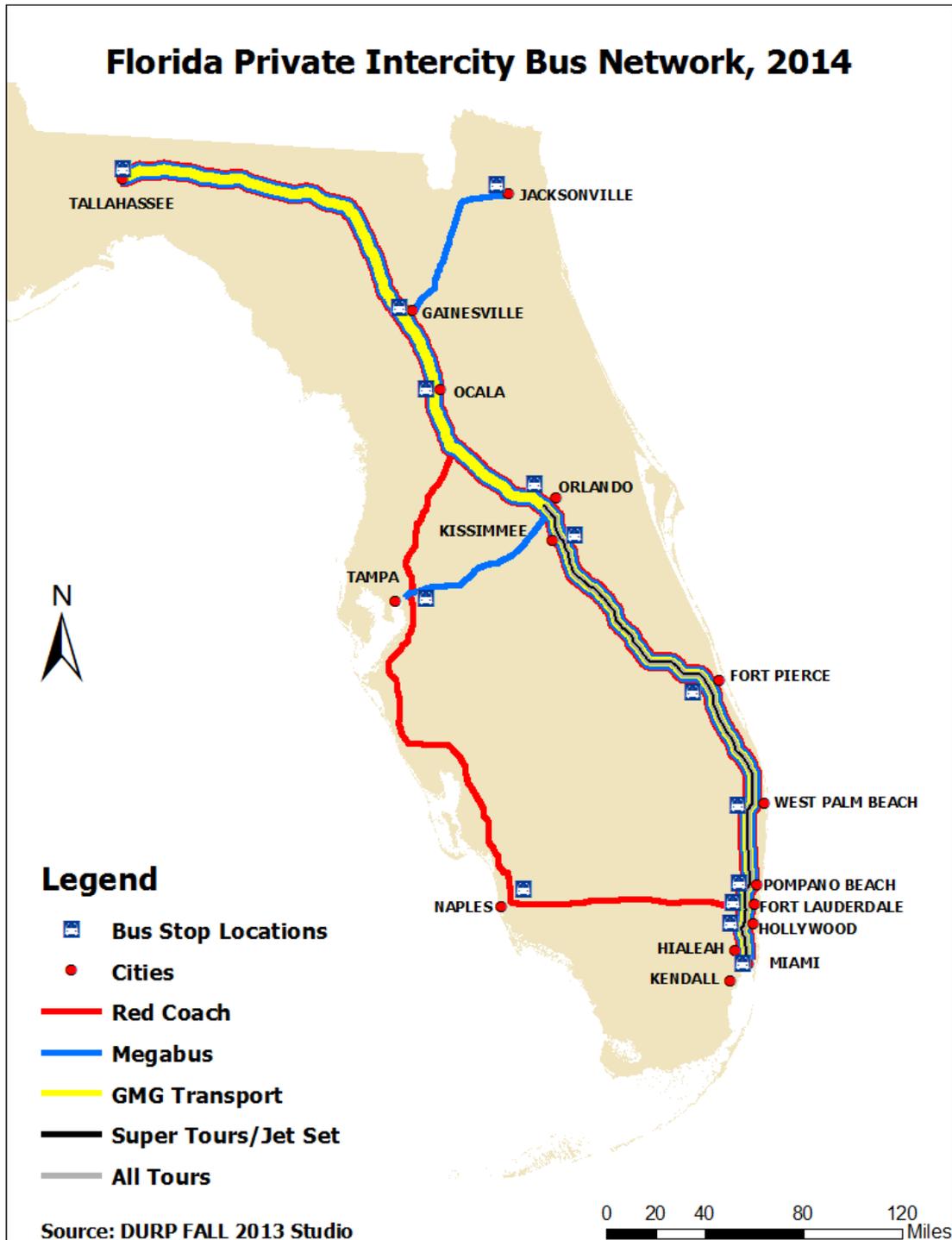
##### ***Intercity Bus Travel***

Intercity service is distributed throughout the state and delivered by a mix of private and public providers. In recent years, intercity bus service has experienced a resurgence in popularity. A FDOT study, "Strategic Intercity Bus System for the State of Florida" reported intercity bus service growing between 5 and 10 percent every year from 2006 to 2012. Much of this resurgence has occurred in private sector service while much of the publicly supported service has experienced little growth. Examining public and private service illustrates the opportunities and challenges associated with utilization by the APD market.

Much of the growth is attributed to emerging privately operated curbside service. Curbside bus service does not operate out of a terminal, instead providing passengers stops along the "curb". Often the stops are in central business districts, parking lots, shopping plazas or other high volume destinations. Researchers have attributed the appeal of curbside service to lower prices, and other amenities such as wireless internet and power outlets. Lower cost fares are due to the lower capital and operating costs associated with curbside based service, with reservations and ticketing occurring online without the use of ticketing agents.

Alternatively, a separate study conducted by FDOT reported on the publicly supported service. In Florida, there are two publically supported intercity transit providers, Greyhound and Ride Solutions. The public support comes through section 5311(f) Federal grant money designated for connections between urban and rural areas. A 2009 study by FDOT reported that Greyhound had 52 locations in 28 counties connecting rural and urban areas. The Ride Solutions intercity service provides stops in five locations in the northeast region of the state. Researchers have indicated that the publicly supported service have begun to alter their service patterns and adopted a service model that more closely reflects the private corporate service by providing more service on express lines between more heavily populated areas that are connected by feeder line service operated by local providers.

As the intercity service is a growing industry, in certain corridors (see Figure 4-6), it presents challenges for persons with disabilities, primarily due to the limited locations served and unknown accessibility features unlike publicly operated services.



**Figure 4-6. Florida Private Intercity Bus Network, 2014**

Florida’s urban fixed route providers offer a better opportunity for connecting persons with disabilities across county and city lines where mutual political agreements exists. Twenty-five of Florida’s fixed route providers serve multiple counties. In some instances, particularly with regional transit providers there are multiple connections for cross county service. In these examples, persons with disabilities gain access to

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a more integrated system that provides service to a greater number of destinations. Nevertheless, these services are limited and are often designed to serve targeted markets such as bedroom communities adjacent to larger urban areas.

The biggest challenges for persons with disabilities related to inter-county and intercity bus service are connectivity to destinations and navigating multiple transfers to reach final destinations. Further, connectivity is severely limited in more rural areas.

The challenge related to demand response service is coordination between service areas and inter-county agreements. In the case of special program funding such as APD, cross jurisdictional travel is addressed by finding the appropriate service provider.

### ***Private Sector Providers of Public Transportation***

In Florida, a significant portion of paratransit service is contracted to the private sector. Throughout the state, there are approximately 20 systems that have contracts with companies including: MV Transportation, First Transit, McDonald Transit, Ameditrans, Crooms, Maruti Transportation, Care Ride, and Ride Right Transit. Using contracted paratransit service providers may help to manage operating costs, and may also have the potential to bring in more expertise to coordinate a complete trip for a passenger.

The public transportation industry is transitioning from service provider to mobility manager to address the mobility needs of its community. Transit agencies in Florida are utilizing new mobility models, recognizing opportunities to collaborate with Transportation Network Companies (TNCs) and other private operators as a way to provide paratransit service to those who may not need the accessibility features of a paratransit vehicle. One example of this is the Pinellas Suncoast Transit Authority (PSTA) in Pinellas County, FL. PSTA has created Direct Connect using private transportation providers which allow riders to request a vehicle to pick them up in one of eight designated zones and then drop them off at their destination. Either the pick up or drop off point must be at a bus stop to help connect people to fixed route services. Hillsborough Area Regional Transit (HART) is providing zone based flexible shuttle service to connect users to the transit network.

Throughout the state, Lyft provides service in 39 cities and surrounding areas, while Uber serves 13 regions. Both TNCs identify their regions and coverage areas as the entire state, however, while it is possible to use the service in almost all areas of the state, there may not be vehicles available at all times. More vehicles will be available for request in urban areas than in rural areas.

With the continued growth of the TNC market there are opportunities for TNCs to play a role in the overall mobility management system. This is recognized and included in recommendations cited in Chapter 5.

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## **5. Routing Improvements to Minimize Passenger Transfers or Wait Times.**

### **Assessment 5**

There are basic variables that impact passenger transfer or wait times depending upon the service type/mode provided. Chapter 2 provides an overview of various service types. Routing issues, vehicle availability, traffic/time of day, passenger boarding and alighting, multi-loading, multiple destinations, and group trips all play a role in travel times.

When it comes to routing issues, every transportation service type is impacted. This can include unexpected detours and high traffic volume. In the case of demand response service time door-to-door service will take more time than curb-to-curb service.

In addition to routing issues, traffic volume and hours of operation impact travel time. If service is operating during peak hours when traffic volume is high, all service types will be impacted. In the early morning or later in the evening, most scheduled passenger services such as fixed route, demand response, flex route, voucher service, and volunteer service are scaled back, with fewer vehicles operating on greater headways. For TNCs such as Uber and Lyft, there may not be as many vehicles available during off-peak times.

Volunteer service, TNCs, and taxis are all impacted by vehicle availability. While fixed route, demand response, flex route, coordinated systems, and voucher services clearly established hours of operation, TNCs, volunteer services, and taxis all depend on vehicle and driver availability. TNCs and volunteer services also rely on drivers who establish their own schedules and availability to drive. While taxis have set hours of operation and can go almost anywhere, they are also dependent on having vehicles available to dispatch.

When it comes to passengers, each mode of travel is impacted in a unique way. For fixed and deviated routes, and voucher services, if the vehicle has reached capacity, it will have to pass stops and miss waiting passengers. Deviated routes, demand response, and volunteer services have the ability to do group pickups and multi-load but if passengers have different destination travel time is impacted. For taxis and TNCs, the time a vehicle is requested and its location at the time of trip request impacts travel times.

How can these variables be mitigated? At the operational level, fixed route, demand response, deviated routes, coordinated systems, voucher services, taxi services, and volunteer services must always have alternate route plans available, and monitor times when service typically runs behind schedule or over capacity in order to adjust accordingly. TNCs and volunteer services should monitor what times trips are requested, but not fulfilled, in order to recruit the necessary number of drivers. Scheduling staff, (which does not apply to TNCs although monetary incentives are provided to TNC drivers to incentivize service provision during peak times) need to be aware of traffic congestion or detours in order to dispatch additional vehicles or provide alternate routing information as needed.

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The use of technology, such as real time traffic and vehicle location systems, can support operation's staff and provide data that can be used to immediately respond to changing conditions or support service planning efforts to enhance service availability and reliability.

## **6. The Ability to Provide Transportation Disadvantaged Services between Specific Origins and Destinations Selected by the Individual User at a Time Agreed Upon by the User and the Provider Service.**

### **Assessment 6**

As previously described in Chapter 2, fixed route services run a designated route usually with designated stops in accordance with a schedule for arrival at key time points along the route. Generally, industry standards call for a vehicle to be considered on time when it is not early and not more than approximately five minutes later than the scheduled arrival at the time point.

Demand response / paratransit services are usually designed to provide door-to-door customer service, however, in an effort to achieve efficiency and lower cost of operations, shared riding is a goal by appropriately multi-loading trips. This means customers are grouped by location and scheduled on a designated route each day. The norm for performance in demand response is based upon a "window" timetable that varies from zero to 30 minutes for pick-up.

Group trips are particularly efficient in that a group of customers are picked up at one location and transported to a common destination and then returned in the same manner. In addition, if a passenger is a no show, it does not impact the transit service or any other person who needs a ride. It also provides a scheduled return trip, where the person does not have to request a ride after an appointment is complete. Instead of waiting for a vehicle to become available, it is already scheduled to arrive at a specified time.

Flex routes and route deviation services also provide group trips that are more efficient than trips provided in individual vehicles for individual riders. Like fixed route service, flex and deviated services have established routes but may leave the route and provide door-to-door or curb-to-curb service when requested by a passenger. Transportation providers have the ability to pick up multiple people at a single meeting point in the event multiple people in the same area request a deviation.

There are options outside the realm of demand response service and group trips. Around the country, there are initiatives to provide a complete trip for persons still able to use fixed route transit, but unable to get to the bus stop on their own. Using transportation network company (TNC) applications such as Lyft and Uber or other local transportation providers, agencies and organizations have the ability to reimburse an individual for the cost of a trip (or up to a certain amount) from their origin to a bus stop or from a bus stop to their destination. An issue with this option, especially in rural areas, is that vehicles are not always guaranteed to be available and accessibility features are not available in every market. In response, taxi and other private transportation management companies are beginning to work with agencies and organizations to provide origin to destination services.

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**7. The Provision of Transportation Disadvantaged Services to Individual Users to Allow Them to Access Health Care, Places of Employment, Education, and other Life-sustaining Activities in a Cost-effective and Efficient Manner, while Reducing Fragmentation and Duplication of Services.**

**Assessment 7**

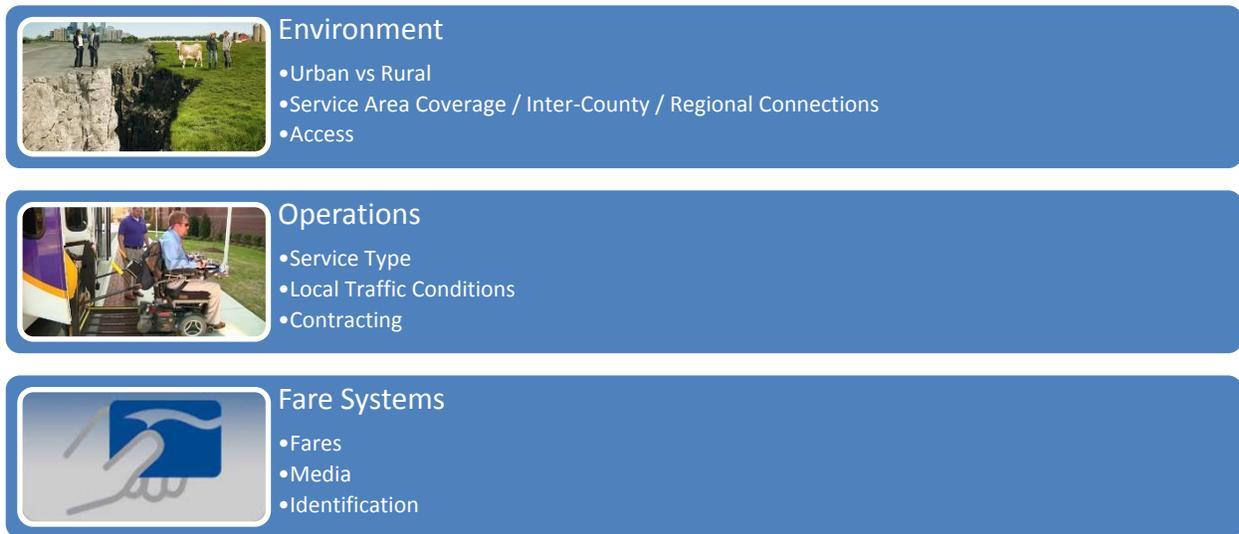
Chapter 2 provides an overview of the existing public transportation services available in Florida that provide mobility options to the TD community. The creation of the TD program and its overall structure of state-wide guidance with local flexibility and coordination with CTCs, LCBs and DOPAs directly addresses mobility issues limited to funding availability which in 2017 reached \$49M. This again presents a national model that has a specific CTD and a dedicated funding source.

The APD Transportation Task Force convened four times to discuss and provide insight on the mobility service issues facing the TD population and particularly IDD customers. Each Task Force member was asked to provide a presentation to share a brief overview of their organization, describe mobility issues for the TD population and to suggest some opportunities that might improve accessibility and mobility services.

A number of issues were discussed among the Task Force that enhanced or expanded on the issues presented in the Proviso language and included concerns listed below:

1. Multiple Funding Sources
2. Complicated Transportation System
3. Limited Mobility Options and Providers
4. Limited Inter-County Connections
5. Reliable and Adequate Funding
6. Access and Expansion of Transportation Services
7. Transportation Cost, Quality and Collaboration
8. Client (Rider) Awareness and Understanding of the Transportation System
9. Other Accessibility Issues
10. Lack of Travel Training Education
11. Long Wait Times
12. Notification for Pick-up
13. Wrong Destinations
14. Secure Identification
15. Safety of Transfer/Bus Stops
16. Driver Courtesy
17. Equipment Maintenance
18. Travel time
19. APD Rate Structure and Business Procedures

These issues were captured and categorized in preparation for the development of recommendations that could address multiple issues in a comprehensive mobility management approach.



**Figure 4-7. Environment**



**Figure 4-8. Customer Experience**



### Funding

- Eligibility
- Compliance Requirements
- Access
- Awareness



### Management

- Budget
- Efficiency
- Contracting



### Customer Care

- Driver Training
- Sensitivity and Etiquette
- Customer Service

**Figure 4-9. Funding**

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## Chapter 5 Recommendations

It should be noted that these are recommendations relative to the overall coordinated system created per Florida Legislature defined in Chapter 427, Florida Statutes to provide transportation disadvantaged services. A recommendation specifically for APD to consider redesigning their transportation service process is provided as a result of open and transparent exchanges of information of the very unique customer base APD serves. APD's customers are not inclusive of all existing or potential IDD customers and represent a small portion of the customer base served by the overall coordinated system. APD is part of the coordinated transportation system and provided valuable insight and understanding of the IDD customers who were the focus of this analysis.

The TD coordinated system has a very detailed structure as described in Chapter 2 as well as a comprehensive data reporting and oversight process. The structure and use of the coordinated system was utilized in developing recommendations to enhance coordination and customer services for the general TD population, including IDD customers.

In researching national concepts of serving this customer market and assessing the coordinated transportation system structure, it was found that the 1979 Florida legislation and the subsequent creation of the Commission for the Transportation Disadvantaged, the design of the coordinated system, and the establishment of dedicated funding for the TD Program is recognized as a national model.

Senate Bill 2502 provided specific Proviso language regarding the purpose of this study, the role of the Transportation Task Force and assessment and issues to consider toward improving the design and use of TD with an emphasis on individuals with IDD. Recommendations are cognizant of the strengths and challenges of the coordinated system recognizing statewide guidance and local flexibility. The TD Program emphasizes local flexibility provided to the combined responsibilities of the CTC, LCB and DOPA in formulating the appropriate service design and level of service for local communities.

Building upon the Legislative Proviso language the Transportation Task Force members provided insight on related issues and potential solutions. Recommendations were then developed by categorizing the issues and refining recommendations that would address bundles of issues. The common theme embedded within all the recommendations is Mobility Management – a basic approach to focus on the needs of the customer and provide various travel options that push the envelope for creative transportation services. The recommendations seek to advance innovative solutions that embrace technology and new approaches to transportation solutions. Transportation services for the TD population, and particularly IDD customers, can be especially complex and require expertise in matching the right service for customers that may be challenged by different operating environments.

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Several preliminary recommendations were prepared and presented to the Transportation Task Force on Transportation Disadvantaged Services for discussion, refinement and prioritization. The following section describes the four (4) recommendations in order of priority approved by the Task Force:

1. Redesign of the APD Transportation Business Model
2. Develop and Implement Mobility Management Single Point Information Center (MIC) Pilot Projects
3. Establish an Innovative Service Development Discretionary Grant Program for Transportation Services for Persons with Intellectual and Developmental Disabilities
4. Establish a TD / IDD Transportation Sensitivity Training and Travel Training Resource Program

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## Prioritized Recommendations

### **1. Redesign of the APD Transportation Business Model Toward a Collaborative Partnership with the TD Coordinated System and Community Transportation Coordinators Providing Mobility Management Services.**

*Brief Description:* As noted in the introduction of this chapter, APD provides transportation services to a limited IDD customer base (approximately 11,000 existing eligible consumers) and represents a small percentage of statewide



coordinated service trips (7.62%). APD, however, has a great understanding of the IDD customer's travel purpose and needs through its close relationships in coordinating eligible Medicaid services to IDD customers. This recommendation is the result of an open and transparent exchange of information that allowed a better understanding of how APD IDD customers utilize transportation services, generalized types of trips, mobility need challenges and business relationships with CTCs throughout the state.

Currently, APD waiver support coordinators arrange for individualized customer transportation services. APD has six regions that independently assign and negotiate transportation without a formal rate structure process, consistent definition of trip types, a detailed data collection process that could proactively address transportation needs and sustainable rates, and without the capacity to effectively provide oversight management of contracted transportation services. There is limited coordination with the CTCs throughout the state, due in part to the low trip rates. The waiver support coordinators have the challenging responsibility of managing APD customer iBudgets for various essential living, social, residential, and behavioral services. Transportation service management requires a unique expertise. It is recommended that a thorough reassessment of APD transportation service responsibilities be conducted in accordance with state and federal requirements. A new APD transportation business model should be developed in collaboration with the CTCs.

The detailed analysis of data CUTR has conducted could provide significant insight in changing APD's business model and build a mobility management role with the CTCs. In developing a new business approach, APD should seek consultant support for APD transportation services management and work in collaboration with CTD leadership to provide a detailed implementation plan. Consultant services should address a complete analysis of the existing transportation services provided by APD, an assessment of service performance requirements and particular care in addressing current service providers which include private for profit operators and non-profit providers, particularly group facility providers. This assessment would be a foundation for developing contractual relationships between APD and CTCs, promoting use of services directly operated by CTCs as well as CTC's performing a mobility manager role in securing and managing services from existing APD operators or new providers with the objective of

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providing the appropriate level of service for specific customer needs in the most effective and efficient coordinated manner.

***Issues Addressed and Outcomes***

This recommendation contributes to the overall set of recommendations to address the Proviso language and enhance the coordinated system.

Resources: In 2017, APD budgeted \$28 million for transportation services for approximately 11,000 customers with a continuing demand from new customers in need of transportation to access waiver funded services. It is imperative to refine the APD transportation model and a collaborative effort should be established by APD with the support of the CTD.

Funding Estimates: An assessment and development of a new transportation business model to establish a collaborative partnership with CTCs should be conducted with additional internal staff and consultant support provided to APD at the funding level of \$250,000.

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## **2. Develop and Implement Mobility Information Center (MIC) Pilot Projects that would provide a Single Point of Contact for Transportation Disadvantaged Customers with Particular Care for Persons with Disabilities / Intellectual and Developmental Disabilities.**

*Brief Description:* Single point of contact mobility information centers (MIC) would be established with selected Community Transportation Coordinators (CTCs) and provide mobility management and travel planning services specifically for TD / IDD customers. Personnel would be trained with a focus on customer care and sensitivity protocols and etiquette for persons with disabilities. Training guidance created by the Florida Developmental Disabilities Council could be utilized, if available.



Customers would be provided with personalized travel planning options and eligibility opportunities for available transportation programs. These MIC travel centers would be an asset to existing APD regional districts in providing service options for APD transportation clients. A Mobility Management program approach would be established to explore and develop expanded service options for customers including opportunities that may be available for on demand services such as those provided by transportation network companies (TNCs) and other private providers. Centers would be appropriately equipped with necessary hardware, software, telecommunication and internet accessibility features. A minimum of one (1) urban and one (1) rural candidate pilot CTC would be selected to design and implement a comprehensive mobility management program and travel center. Eligible funding activities would include technical support to design, develop, equip, staff and implement the mobility management program and travel planning center services.

### ***Issues Addressed and Outcomes***

1. Minimize passenger transfer or wait times; ✓
2. Provide timely transportation as agreed upon by the user and provider; ✓
3. Allow access to health care, employment, education and other life-sustaining activities; ✓
4. Improve the design and use of transportation disadvantaged services in both urban and non-urbanized areas; ✓
5. Utilize intercity and inter-county bus transportation; and ✓
6. Utilize regional fare payment systems or develop fare payment processes that are seamless to customers and easily utilized operationally from one mode or service operator to another. ✓

The MIC would have the potential to address numerous issues including customer care and sensitivity, coordination among and between localized programs and providers, simplified and compatible fare payment, and seamless transitions in various operational environments. A single point of contact for customer travel information would assist both the customer and the provider of transportation services of the specific travel expectations and requirements for the trip

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requested. Travel information supports the fundamental reason for establishing a coordinated service and the Proviso language regarding providing access to various life endeavors and actually promotes awareness of the coordinated service to new customers. This recommendation may be especially helpful for rural regional travel to facilitate an understanding of existing services over county lines and the availability of intercity services. Travel centers would enhance the understanding of consumer needs for fare payment options and service provider fare acceptance exchanges. Anticipated outcomes of this recommendation would be model travel information centers that would provide one stop customer information, promote a regional perspective for service opportunities between and beyond jurisdictional boundaries, develop seamless fare processes, coordinate between service modes and service providers, and support existing CTC efforts for overall service coordination and collaboration among CTCs.

*Resources:* Pilot MICs would be developed utilizing the existing TD Coordinated System by selecting candidate CTCs that would provide an organizational structure foundation that is service and customer oriented. Built upon existing CTC functions would be this expanded mobility management services and single point travel planning functions.

*Funding Estimates:* Based upon a minimum of two (2) pilot projects and consultant technical support to design, develop and support the implementation of a mobility management / single point of contact travel center to include necessary staffing, communication equipment and technology, it is estimated that a budget of up to \$500,000 for each pilot project, or a total of \$1,000,000 would be required to implement this recommendation.

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### **3. Establish an Innovative Service Development Discretionary Grant Program for Transportation Services for Persons with Intellectual and Developmental Disabilities.**

*Brief Description:* The 2016 Florida Legislature authorized \$1,750,000 of non-recurring funds to be competitively awarded by the CTD to support projects that address several of the issues identified in this study.



It is recommended that a similar program be established but with a recurring multi-year discretionary grant program allocation for innovative service development projects specifically relevant to the IDD customer market.

The focus of this new grant program would address the cognitive and communication disability issues that customers face in utilizing transportation services. Competitive grants would be awarded to proposals that target the needs of the IDD customer market and enhances operator procedures that improve the customer's travel experience. Technology improvements would also be considered within the grant program particularly those that contribute to improved customer care, safety and mobility management coordination. The program would be housed in the CTD because of the existing experience with such a grant program and to optimize overall system coordination, however, an advisory selection committee partnership would be established with the APD and FDDC to be included in the grant evaluation and selection recommendation process. This program would have a significant impact on improving mobility services as a commitment to innovation and incubation of service improvements for IDD customers throughout Florida.

#### *Issues Addressed and Outcomes:*

1. Minimize passenger transfer or wait times; ✓
2. Provide timely transportation as agreed upon by the user and provider; ✓
3. Allow access to health care, employment, education and other life-sustaining activities; ✓
4. Enhance the design and use of transportation disadvantaged services in both urban and nonurban areas; ✓
5. Utilize intercity and inter-county bus transportation; ✓
6. Utilize regional fare payment systems or specifically develop fare payment processes that are seamless to customers and easily utilized operationally from one mode or service operator to another; and ✓
7. Utilize private providers or TNCs. ✓

The grant program selection criteria could address the following types of objectives:

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1. Enhancement of the access of persons with intellectual and developmental disabilities to healthcare, shopping, education, employment, public services, and recreation;
  2. Assistance in the development, improvement, and use of transportation systems in non-urbanized areas;
  3. Improvement to the travel experience of persons with IDD, this would include personal safety of customers and perception / awareness of surroundings from trip origin to destination;
  4. Demonstration of the use of technology to improve service operations and customer information and care; and
  5. Encouragement of private transportation provider participation.

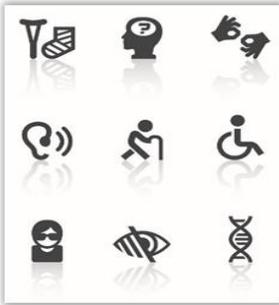
*Resources:* The CTD staff would administer this grant program and establish a formal process in which APD and FDDC would participate in the evaluation and recommendation of grant proposals.

*Funding Estimates:* It is recommended that this grant program be provided with additional funding above existing resources and not impact formula allocations currently provided at the county level. This new IDD focused program would be funded at the level of \$500,000 annually allowing awarded grant projects to be active up to three (3) years.

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#### **4. Establishment of a Persons with Disabilities Transportation Sensitivity Training and Travel Training Resource Program to Include Specific Modules to Address Persons with Intellectual and Developmental Disabilities.**

*Brief Description:* A comprehensive sensitivity and travel training program should be developed that serves as a Florida standard resource for persons with disabilities that includes a specific module oriented to persons with IDD. Sensitivity training must go beyond just transportation operator training and include all transportation personnel functions serving the customer, from customer care reservationist, dispatch, outreach programs and community communications. When asked to describe high quality public transportation services, individuals often site characteristics such as high frequency, reliability, convenience, affordability, and safety. While these are important features of any transportation system and desired by all customers, successfully meeting the specialized communication and disability etiquette needs of seniors and persons with disabilities are sometimes overlooked.



The clear emphasis of this program would be a resource for sensitivity training and travel training focused on transportation providers and customers in Florida.

#### ***Issues Addressed and Outcomes***

1. Allow access to health care, employment, education and other life-sustaining activities; and ✓
2. Enhance the design and use of transportation disadvantaged services in both urban and nonurban areas. ✓

This program specifically addresses issues related to customer care and the relationship between customers and all service provider personnel. Relative to the Proviso issues, this program would have an impact on better understanding and communication with customers to facilitate improved awareness of service options, access to destinations and tailored service design for IDD customers.

*Resources:* There are numerous national and local resource examples that will support the development of such a training program. Additionally, there may be collaborative opportunities with FDOT, CTD and FPTA to partner with this program, including opportunities for grant applications.

Consistent with its state plan objective to enhance travel training services, it is recommended that the Florida Developmental Disabilities Council (FDDC) would take the lead role in establishing and implementing a sensitivity and travel training curriculum program.

*Funding Estimates:* The development of a curriculum, training modules and an initial course and instructional materials is estimated to be a one-time expense of

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\$150,000. The basis for this estimate is comparisons to similar training program development.

This estimate does not address the delivery of the training program which would be dependent upon the training techniques utilized (i.e. workshops, classes, computer based modules, remote training, etc.). There are opportunities for a collaborative training program between the major transportation stakeholders and advocates for IDD customers.