WISCONSIN DEPARTMENT OF TRANSPORTATION

Wisconsin Human Service Transportation Coordination Model

TECHNICAL MEMO 2 FINAL

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Chapter 1.   Introduction

Project Summary

The State of Wisconsin has been pursuing coordination as a strategy to enhance transportation service efficiency and increase the mobility of Wisconsin residents for several years. In recent years, legislative actions at both the federal and state levels, have increased the prominence of coordination as a key strategy:

- The revised Federal Transportation Act, SAFETEA-LU, signed into law on August 10, 2005 requires all entitles receiving federal program money for three federal funding programs – Capital Assistance Program for Elderly Persons and Persons with Disabilities (Section 5310), Job Access and Reverse Commute Program (Section 5316) and New Freedom Program (Section 5317)—to have a "locally developed coordinated public transit human services transportation plan."

- In 2005, Governor James Doyle charged a group of individuals from a number of state agencies to form the Interagency Council on Transportation Coordination (ICTC). The ICTC is dedicated to "creating a coordinated, accessible, affordable, dependable, safe, statewide system providing the best transportation services to transportation disadvantaged individuals in Wisconsin".

- Presidential Executive Order 13330 on the Coordination of Human Service Programs issued by the President on February 24, 2004, created an interdepartmental Federal Interagency Coordinating Council on Access and Mobility (CCAM). The mission of the CCAM is to undertake collective and individual departmental actions to reduce duplication among federally-funded human service transportation services, increase the efficient delivery of such services and expand transportation access for older individuals, persons with disabilities, persons with low income, children and other disadvantaged populations within their own communities.

In response to these initiatives and the on-going coordination efforts in the state, the ICTC, in conjunction with the Wisconsin Department of Transportation (WisDOT), retained the consulting team of Nelson\Nygaard Consulting Associates and RLS & Associates to develop a Human Service Transportation (HST) Coordination Model for the state of Wisconsin. Key goals for this research are to collect data, assess needs and recommend actions towards a state model of transportation coordination with prioritized implementation strategies. This effort is partially funded with United We Ride (UWR) Implementation Grant Funds and is part of the ICTC work plan. There are four major tasks associated with developing the coordination model for Wisconsin:

- Document state agency programs – The objective of this task is to identify and document state agency programs that fund human service transportation and the extent to which these funded services are used and coordinated.

- Identify gaps and barriers – There are two key objectives associated with this task: (1) develop, test and finalize an assessment process that can be used throughout the

state to gauge and evaluate coordination status; and (2) as the assessment process is tested in the field, evaluate current coordination efforts in the ten counties and two mini-regions that have been selected by the ICTC for inclusion in this study and develop an understanding of coordination perspectives and priorities in these areas.

- Identify and compare Wisconsin with other states' coordination models – Building on data collection and analysis of both state agency and local level coordination efforts in Wisconsin, we will look externally to consider approaches adopted by other states and associated effectiveness at improving HST coordination.

- Recommend HST Coordination Models – Our final task will be to recommend a HST coordination model for the state of Wisconsin. This model will be crafted around appropriate and effective strategies that can realistically be implemented based on the socio-demographic characteristics of the state and working within the local political environment.

Task Goals

This technical memo reports on the second task, identifying gaps and barriers in transportation services and coordination efforts in counties and regions across the state. The objective was to examine coordination efforts in eight counties and two mini-regions to identify problems, gaps, and barriers, and describe coordination status within each county. Through this process, the Nelson\Nygaard team would be able to understand coordination efforts and where successes and challenges lie.

In addition, through the process of reviewing local and regional coordination work efforts and working closely with the Wisconsin State Department of Transportation (WisDOT), Nelson\Nygaard developed an assessment process and communication strategy that could be used statewide.

Task Methodology

This task involved extensive field work and site visits to eight counties and two mini-regions around Wisconsin (see Figure 1-1). We also worked closely with WisDOT to review and discuss key assessment tools, processes and findings. The methodology employed consisted of the following steps:

1. Craft a county/min-region assessment tool to be used when visiting and interviewing staff at various local and regional agencies. A copy of this assessment tool is included with this technical memorandum as Appendix A.

2. Review existing available plans and studies relevant to selected counties and mini-regions; identify key stakeholders in each area.

3. Conduct sites visits and stakeholder interviews with staff associated with the state transportation funding programs. A total of 62 individuals were interviewed; a list of individuals and agencies contacted is included as Appendix B.

4. Review, compile and evaluate data collected from interviews and reports and data pertaining to individual areas. Compare results across counties and mini-regions to identify key needs and opportunities with regards to coordination, both at the local and state level.

5. Develop a draft strategy to continue coordination locally. Review and share the proposed process with WisDOT. Staff from WisDOT reviewed and tested the strategy with sample counties and ultimately shaped the process to meet their needs.

Technical Memo Organization

This memo is organized into six chapters immediately following this introductory section, including:

Chapters 2 - 11: County and Mini-Region Assessments:

- Chapter 2: Ashland County
- Chapter 3: Clark County
- Chapter 4: Dane County
- Chapter 5: Fox Valley Mini-Region
  (Calumet, Outagamie, and Winnebago Counties).
- Chapter 6: Green Lake County
- Chapter 7: Manitowoc County
- Chapter 8: Marathon, Wood, and Portage Mini-Region
- Chapter 9: Ozaukee County
- Chapter 10: Pierce County
- Chapter 11: Rusk County

Chapter 12: Key Findings – Compares and contrasts coordination experience in the individual counties and mini-regions.

Chapter 13: Recommendations for Future Assessments – Identifies key coordination successes and barriers observed in the counties and regions and discusses the implications for the state coordination model.

Figure 1-1 Wisconsin HST Coordination Model - Assessed Counties

Ashland

Rusk

Pierce

Clark

Marathon

Portage

Wood

Outagamie

Winnebago

Calumet

Manitowoc

Green Lake

Ozaukee

Dane

N

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consulting associates

GIS Data Source: WiDNR; ESRI
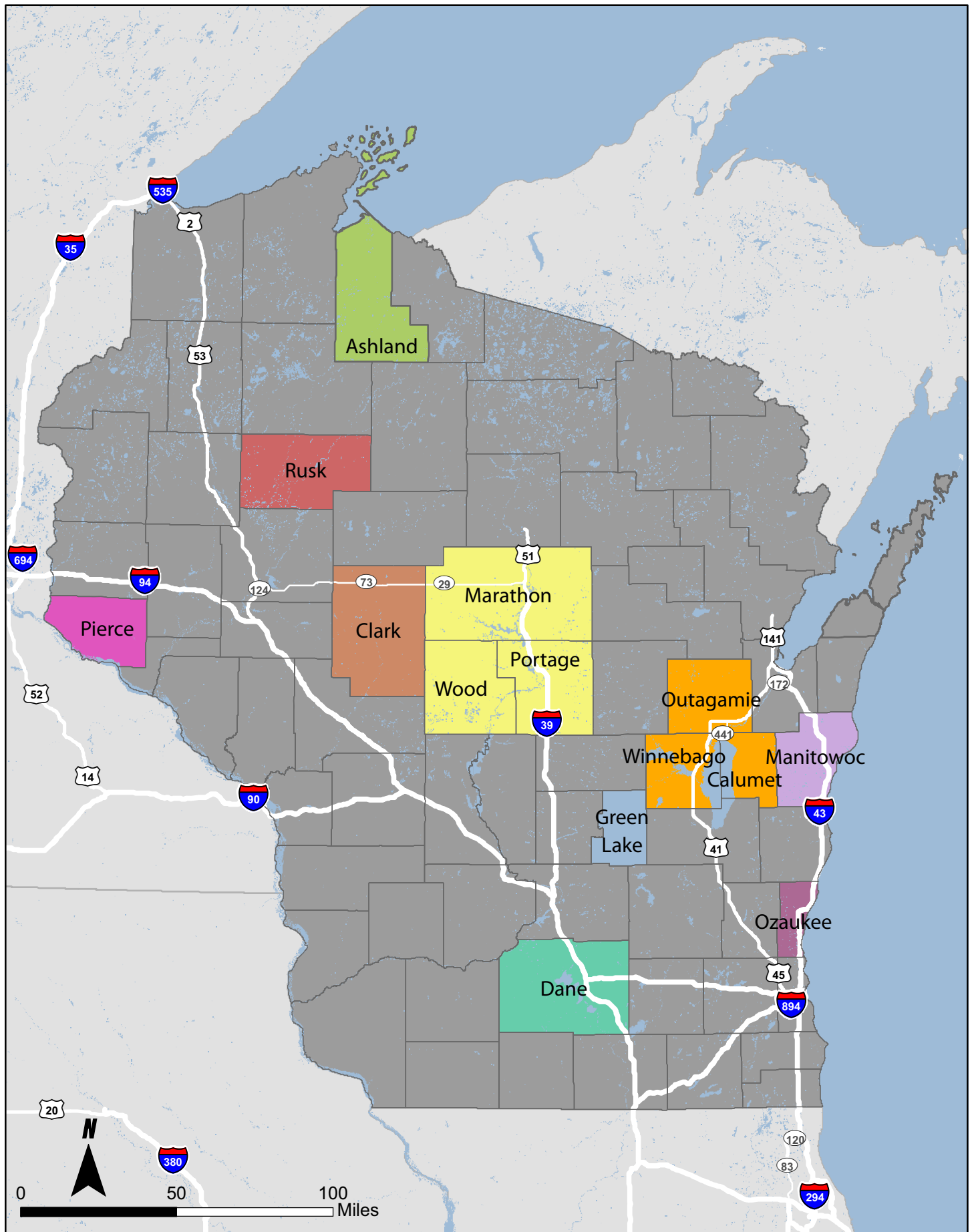
Chapter 2. Ashland County

Overview

Ashland County is a largely rural county located in northwest Wisconsin along the coast of Lake Superior (see Figure 2-1). The county's geographic area includes the Apostle Islands and a portion of the Bad River Indian Reservation. In 2006, the U.S. Census Bureau estimated the population in Ashland County at 16,511 people; slightly more than half (8,600) of whom live in the city of Ashland. The city of Ashland is located in the northernmost part of the county and is also the county seat. Other larger communities in Ashland County include Mellen, Glidden and Butternut; all of these towns are located on Route 13, the primary north-south route in Ashland County.

The city of Ashland is approximately 90 miles from the nearest metropolitan area—the Superior-Duluth metro area (Superior, Wisconsin and Duluth, Minnesota). The closest major medical center and commercial airport are also located in the Superior-Duluth metro area.

Figure 2-1 Ashland County

Inventory of Existing Services

There are several transportation services available in Ashland County, including a regional public transportation operator and privately operated taxi service. There is also a variety of specialized transportation services available to special populations within the community and/or individuals associated with specific social service programs. In addition to the Ashland County services, the Bad River Tribe operates public transportation service within the reservation. There are also several medical assistance transportation providers available to Ashland County residents. The largest providers are listed here with additional information provided in Figure 2-2:

- **Bay Area Rural Transit (BART)** – BART runs two buses daily from Odanah on the Bad River Reservation via Ashland to Red Cliff in Bayfield, Wisconsin. Service is provided as a fixed-route, but the bus will deviate for customers with special needs. Funding for BART (2006) was $323,267, inclusive of federal 5311 and state 85.20 grants, local contributions and farebox revenues. For the same year, BART carried 24,116 passengers.

- **Ashland County Specialized Transportation Program** – The Ashland County Aging Unit operates a combination of door-to-door and fixed-route transportation for persons aged 60 and older and persons with disabilities of any age. Priority is given for transportation to medical, nutritional and work-related activities; quality of life trips are permitted as the schedule allows. The primary source of funding for the Aging Unit's transportation program is state 85.21 resources. Approximately 10,000 passenger trips were provided in 2006.

- **Bay Area Taxi** – Taxi services are available 24 hours a day, 7 days a week. Bay Area Taxi currently provides some transportation services for clients using Medical Assistance. The taxi carried approximately 13,000 passengers in 2006.

- **Laurie Jean Zach Center** – Provides transportation to its clients and, working with the Ashland County Aging Unit, offers medical transportation to seniors (aged 60 and older). This is provided on a demand response basis to seniors in the southern part of Ashland County. The Laurie Jean Zach Center operates a vehicle funded with FTA 5310 funds; transportation services for clients are funded through program resources and demand response trips for senior are paid with an 85.21 grant.

Figure 2-2 Community Transportation Services in Ashland County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/ State Funds
Laurie Jean Zach Center	Human Service	Clients for agency programming; Medical trips for Seniors (aged 60+)	Door-to-door	M – F 8:30 am – 3:30 pm	2 vans, one of which is accessible	5310 for vehicles Grant from county (85.20) for senior medical service
Bay Area Rural Transit (BART)	Public Transit	General public in Ashland and Bayfield Counties	Combination of fixed-route, point deviation and some demand responsive service	Weekdays 7 am – 7 pm; limited weekend service	5 medium cut away vans; 2 small vans – entire fleet is accessible	5311; 85.20
Ashland County Aging Unit	Human Service	Older adults aged 60+, persons with disabilities of any age, and family care givers; Priority to medical, then employment	Flexible, fixed-route; inter-city, demand response and volunteer driver services; Recommended 24 hour advance booking (5 days for volunteer drivers); Passenger pays fee	Weekdays 7 am – 4:30 pm	2 accessible vans	Operations funded by 85.21 and local resources; 5310 funds for vehicles
Bay Area Taxi	Taxi	Any	Taxi service	24/7	2 sedans; 2 vans	None
Bad River Chippewa Band	Public Transit	General public	Fixed-route	Varies (currently not operating)	N/A	5311 for operations; 5310 for vehicles
VA Volunteer Medical	Medical	Persons with disabilities	Demand response	Depends on volunteers	N/A	Medicaid
New Horizons North	Human Service	Persons with disabilities in Ashland and Bayfield Counties	Demand response	Weekdays	N/A	5310
Pathways	Human Service	Persons with disabilities	Demand response	Varies	N/A	5310
Abby Vans	Non-Emergency Medical (NEMT)	Medicaid recipients	Demand response	Varies	Statewide operator with access to large fleet	Medicaid

Existing Coordination Efforts

There are currently two groups working on improving public and specialized transit in Ashland County and northern Wisconsin:

- **The Ashland County Transportation Coordinating Council** – led by the Ashland County Aging Unit, the Transportation Coordinating Council (TCC) has been meeting for several years. Historically, the Council met annually to review applications associated with 85.21 funded projects. In 2006, the TCC played a leading role in the United We Ride (UWR) meeting and has met twice since. Committee participants gave the committee different levels of support. Some individuals said it has helped improve turf issues; others noted that the top-down requirements worked to build momentum and support for the committee.

- **The Tri-county Transit Team** – A multi-county group of individuals interested in developing transportation options between Ashland, Bayfield and Douglas Counties. The team includes representatives from each county plus the Department of Transportation and other agencies. The group is currently chaired by the United Way of Douglas County. The objective of this group is to examine regional transportation needs and assess the most appropriate service delivery models.

Other less formalized, ad hoc coordination efforts include:

- The Ashland County Aging Unit and BART are working together to created a combined community transportation service plan for 2009 where the Aging Unit would operate as a subcontractor to BART. The joint service plan and service organization represents considerable effort towards coordinating service and meeting customer needs. Plans also include establishing a customer access number for travel reservations and questions.

- BART operates a regional route that connects Redcliff in Bayfield County with the city of Ashland and destinations in Ashland County. This regional route also connects with Odanah, the administrative center of the Bad River Chippewa Band. The Bad River Tribe received a STRAP grant to expand evening services, including service to the city of Ashland. Staffing and administrative changes at Bad River have stalled implementation; BART is working with staff at Bad River to help initiate and support this service and ensure BART routes connect with new services.

- Ashland and Bayfield Counties publish a Senior Resource Directory annually that includes a listing of regional transportation resources. The Ashland County Aging Unit is also in the process of developing a survey that will help improve and update this information.

- The Ashland County Aging Unit is coordinating with the Laurie Jean Zach Center to make better use of existing resources and enhance the availability of transportation services in southern Ashland County. The Laurie Jean Zach Center receives 5310 funding for vehicles used to transport clients to/from their day programs. Under the agreement with the Aging Unit, these vehicles are available between client transportation to take seniors to medical appointments. The Ashland Aging Unit

markets this transportation option and processes all ride requests; once a request is made, trip details are faxed to the Laurie Jean Zach Center, who then provides the trip. The Ashland Aging Unit pays Laurie Jean Zach center a fixed cost per trip.

Service Redundancies, Gaps, and Needs

There are considerable community transportation services available in Ashland County especially in consideration of the county's population. Most services, including BART and County Aging Unit rides are concentrated around the city of Ashland, although some regional services are available. Many of the service redundancies, gaps and needs are reported in this section based on conversations and analysis conducted during the summer of 2007. Since that time, transportation stakeholder in Ashland County have increased efforts to coordinate services; we anticipate that many of the current (2007) redundancies, gaps and needs may be addressed through these -going planning efforts.

Some service redundancies exist where deviated fixed-routes overlap with specialized demand response transportation services. Existing redundancies occur when both public and specialized transportation provide service to similar destinations within the city of Ashland such as shopping centers and medical facilities. While the demand response service provides a higher level of service (typically door-through-door), there are likely individuals using specialized services who are able to use public transportation, which is typically provided on a curb-to-curb basis. Travel training resources in Ashland County are limited, thus agencies are not able to determine exactly who needs door-through-door service and when and which individuals could be encouraged to use public transportation.

In addition to service redundancies, there are under-utilized transportation resources in the community. Some services are not being used due to a lack of awareness while other barriers include stigma associated with using public transit, especially human service transportation. In addition, several available services, such as taxi services, are not fully integrated as part of the portfolio of potential transportation options.

Despite the redundancies and under-utilized services, there are also service gaps in Ashland County:

- **Rural areas south of the city of Ashland have few services.** Community transportation services tend to focus on the northern part of the county and regional services primarily make connections across the northern tier of the region. While the population in southern Ashland County is small, their access to transportation services is limited.

- **Public transportation within the city of Ashland is insufficient.** BART's public transit service is good at providing transportation to the city of Ashland. Once an individual arrives in the city of Ashland, however, there are fewer resources to transport them around town.

- **Transportation options during evenings and weekend is limited.** There are significantly fewer services available in Ashland County during evenings and

weekends. While some public transit services are available on Saturday, individuals needing specialized transportation are dependent on volunteer driver schedules and willingness to drive during evening and weekend hours.

- **There are not enough resources to provide quality of life trips for seniors and persons with disabilities.** Trip priorities are for medical, client participation and employment; therefore, there are gaps in the "quality of life" trips.

Ideas to improve service delivery and coordination

Historically coordination efforts in Ashland have been hampered by skepticism among organization staff about sharing resources, resulting from a desire to protect clients, service and resource. Most recently, however, new partnerships have been formed with new attention and efforts placed on working together, coordinating resources and improving services. These efforts will build on other local innovative solutions that have successfully increased the availability and quality of transportation services.

The Ashland County Aging Unit and BART are working to create a "home" organization that offers consumers a single point of contact for community transportation services, including public, private and specialized resources. Once this single coordination organization becomes operational, it will reduce customer confusion and create efficiencies in the service portfolio.

Opportunities for improving community transportation services, therefore, lie in strengthening and widening the scope of the existing on-going multi-agency committee devoted to improving coordination efforts in Ashland County. Ideally the committee would widen its membership, foster trust among participating organizations, clarify its objectives and guide the county to a more coordinated system. It should also be the primary link between Ashland County and regional collaboration efforts. Short-term tasks and goals for an Ashland County transportation coordination committee may include:

- Developing a complete inventory of local and regional transportation resources, including private, public, non-profit and for-profit organizations. Once an inventory is established, this could be published as a directory to existing services.

- Building on the inventory, agency staff in Ashland County can continue to identify and document remaining transportation needs in the community. The committee may also evaluate needs to determine if existing resources can address these needs and/or if a lack of awareness results in some unmet need.

- Work as a community to determine how service gaps could be most efficiently and effectively filled and/or how to make existing services available to a wider segment of the population. Given the number of service providers, it may be reasonable to start discussions on creating a single point of access to screen transportation calls.

- Next steps would be to agree on local funding sources and apply as a region for state and federal resources to support agreed changes.

Lessons from Ashland County

- **Coordination is happening at the local and regional level.** Ashland County, not unlike other counties in the state, is working to coordinate services on both a local and regional level. Working on coordination on multiple fronts creates opportunities for a wider cross-section of agencies and organizations to work together to craft an improved service network locally and regionally.

- **Services can be fragmented, even when the number of services is relatively small.** Ashland County has a well established set of transportation resources that includes human service, public transit, medical assistance and private taxi transportation services. These services, however, tend to operate independently and, while well organized internally, are not well cross-referenced and coordinated, especially for users.

- **Organizations and agencies are able to work together to coordinate and improve services.** Ashland County provides an example of organizations that are able to work together to coordinate service despite historical difference among service providers. Not unlike many counties in Wisconsin, historical disagreements over service delivery frustrated coordination efforts. Despite these differences, local partners were able to find New efforts to coordinate services

Chapter 3.   Clark County

Overview

Clark County is a predominantly rural county with a population of 34,094 (2006 Census estimate). It is located southwest of Eau Claire in the west-central portion of the state (see Figure 3-1). Neillsville, with a population of 2,682 (2005 est.), is the county seat and is located in the southern portion of the county.

Neillsville is approximately 50 miles from the nearest metropolitan area and commercial airport, Eau Claire in Eau Claire County. Marshfield, approximately 30 miles to the east in Wood County, is the location of the region's major medical facilities and hospitals. Other larger communities in Clark County include Thorp, Greenwood, Colby and Abbotsford. Black River Falls in Jackson County to the south is a major destination for services and jobs.

Figure 3-1 Clark County
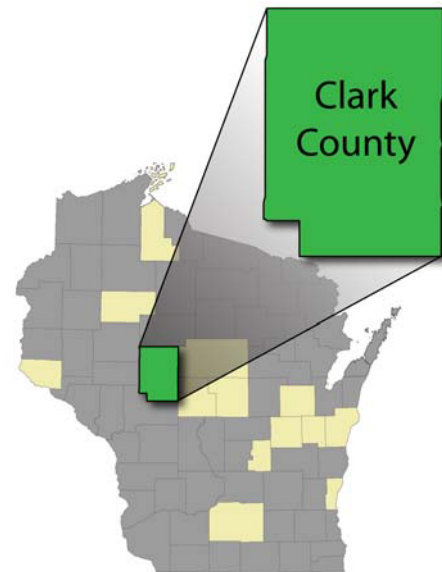
Inventory of Existing Services

There are a variety of community transportation services in Clark County. General public transportation is available within the city of Neillsville and provided by the Neillsville shared-ride taxi service. Human service transportation is available through the County departments of Community Services, Social Services, and the Office of Aging. These agencies provide transportation through county-owned vehicles plus through a contract with Abby Vans, Inc., a private provider. Abby Vans, together with other independent private operators, provides medical assistance transportation. Information on the main services is included below with additional details shown in Figure 3-2.

- **Neillsville Shared-ride Taxi** – Shared-ride taxi service in Neillsville is available to residents of Neillsville for travel anywhere in the city and destinations up to 10 miles out of town. Adult fares are $3.00 base fare for the first five miles plus $1.25 for each additional mile. Adults aged 62 and over, plus persons with disabilities and children pay $1.50 for the first mile and $1.25 for each additional mile. The service is contracted to Abby Vans, which also provides demand response services for other county programs. The Neillsville shared-ride taxi program provided over 13,134 trips and was funded with $170,344 in 2006; funding includes federal (5311) and state (85.20) grants, municipal contributions and farebox revenues.

- **Clark County Human Services Transportation** – Clark County Office of Aging, Department of Social Services and Department of Community services provide a combination of transportation services to agency clients as well as older adults and persons with disabilities needing rides. Transportation services include a volunteer driver program, subscription trips and demand response services. Much of the service is provided in-house but the county also holds a contract with Abby Vans for human service and medical assistance trips. Semi-annual reports submitted as part of the 85.21 grants show that only medical trips are purchased with State resources. Remaining transportation funding is provided by program fees, county resources and user fees/donations. Capital purchases are made through saved 85.21 resources.

Figure 3-2 Community Transportation Services in Clark County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/State Funds
County Social Services	Human service	Physically disabled	Dial-a-ride for physically disabled riders	Varies	8 vans (county-shared) + accessible contract	85.21
County Office of Aging	Human service	60+	Travel to day treatment centers, nutrition sites, and grocery shopping	Weekdays	8 vans (county-shared) + accessible contract	85.21
County Community Services	Human service	Mental/developmental disabilities and substance abuse program participants	Contract through Abby Vans, Day-ahead reservations	N/A	Contract with Abby Vans + occasional county van use	85.21
Neillsville Shared-ride Taxi	Shared-ride taxi	Individuals with trip beginning or ending in Neillsville	Shared-ride Taxi service contracted with Abby Vans	Weekdays	Uses Abby Van vehicles	85.20; 5311
Abby Vans	Contract and NEMT	Varies – operates shared-ride taxi, human service and medical transportation	Demand response	24/7	N/A	Medicaid: Various federal and state through contracts
Comfort Carriers	NEMT	Agency program participants; Medicaid; private-pay (no restrictions)	Agency program trips, Medicaid NEMT trips; private-pay trips may go anywhere; No advance reservations required	Any hours	N/A	Medicaid
Local interfaith providers; local health center	Human service	Varies; primarily elders	Provide transportation services through church, health care center	Varies	Volunteer	N/A

Existing Coordination Efforts

With Clark County government, the three county agencies that provide transportation work to be as open and flexible about transportation as possible. The Office of Aging is the primary user of the vehicles owned by the county, while Community Services and Social Services programs park vans at their service centers and use them as needed. Social Services are responsible for all driver screening, rider eligibility screening, ride arrangement and administrative functions for the volunteer program.

There is a Transportation Coordination Committee in Clark County that meets annually. It is spearheaded by the Director of Aging/Nutrition and consists also of the Director of Social Services, Director of Community Services, a Social Services Administrative Assistant/Transportation Coordinator and other staff from Social Services. This committee meets annually to discuss budgetary issues and 85.21 grant applications as well as any other transportation concerns. Given the small number of total providers in the county, this effort represents the majority of human service providers, but does not include representatives from the shared-ride taxi service. The work of the agencies together has resulted in some administrative benefits; for example, when the Office of Aging needs a wheelchair or accessible services, it simply piggybacks on the Social Services contract—the contract is written to allow the same rate for both agencies.

In spite of the internal on-going coordination efforts, Clark County did not participate in statewide efforts to meet SAFETEA-LU coordination requirements. The County did not hold a planning meeting, nor did they submit a coordination plan. In addition, Clark County did not apply for 5310 funding; instead the County uses saved 85.21 resources for capital purchases.

Service Redundancies, Gaps, and Needs

In general, the basic transportation needs of older adults and persons with disabilities are being met. With the exception of people living in Neillsville, however, there are virtually no transportation services to members of the general public, including individuals with low incomes. Services are coordinated and individuals are assessed a co-pay, based on an individual's ability to pay, for up to the full price of providing that ride; these strategies help stretch transportation funding. Despite these efforts, however, there are situations in which a person may find that they are unable to access transportation in Clark County:

- **Public transportation services are very limited and only available in Neillsville**. The only public transportation service available for members of the general public, including individuals with low incomes, is the shared-ride taxi service operating in Neillsville.

- **There are no resources for job training and employment trips.** There are few transportation services available to individuals with low incomes who cannot afford a car or who have outstanding fines or penalties that hinder driving ability.

- **There are few resources available for quality of life trips.** Older adults and persons with disabilities wishing to make recreational or shopping trips have few options outside the designated grocery shuttle services.

Ideas to improve service delivery and coordination

Clark County does a good job integrating transportation services among county departments and ensuring a high level of service quality within the services provided. There is potential, however, for additional new partnerships to be brought into the existing service coordination to make more extensive use of existing resources. For example, faith-based organizations wishing to gain access to additional (or occasional-use) vehicles to expand services could tap this pool. This could be facilitated through the already-existing Transportation Coordination Committee if meetings were advertised and opened to non-profits and others.

As discussed, there are very limited services available for members of the general public and individuals with low incomes who are not participating in specific human service programs. Stakeholders representing these groups need to be included in the coordination and transportation planning process so that needs and service gaps are included in planning and funding discussions.

Lessons from Clark County

- **Human services transportation can be well coordinated within County departments.** Clark County provides a case study where county level agencies work together to increase the flexibility and amount of human service transportation. By working together Clark County departments have created a system where vehicles and contracted service are available and accessible to multiple programs and services. This flexibility greatly increases the amount of service that can be provided.

- **Demand for services is increasing.** Agencies and providers in Clark County generally felt that the system is effective in meeting current needs of clients. Stakeholders, however, felt almost unanimously that the pressures of the aging baby boomer population and a growing number of persons on Medicaid would strain future federal and state budgets. They urged that program development and funding need to reflect increasing enrollment.

- **Coordination strategies that encourage pooling transportation offer potential in some regions.** One recommendation from Clark County is to pool or aggregate transportation funding at a regional level, and allow regional authorities to guide and disperse all monies. This strategy offers the potential to break down walls between the current separately channeled funding programs, which create multiple, parallel services. It would also significantly reduce the need to coordinate in order to overcome these issues.

- **Private sector providers are an important part of the coordination dialogue.** Private sector operators play a large role in community transportation services, often

responsible for a significant share of the number of rides provided. Oftentimes, however, they are not included in coordination discussions. While it may not always be appropriate to include private sector operators in coordination meetings, their attendance at key discussions, such as service planning, is warranted.

Chapter 4. Dane County

Overview

Dane County is the second most populated county in Wisconsin with 463,826 people recorded in the 2006 U.S. Census. As shown in Figure 4-1, Dane County is located in south central Wisconsin. The city of Madison, the largest city in Dane County, is both the Dane County seat and the capital of the State of Wisconsin. Madison is also home to the University of Wisconsin Madison (UW). In 2003, the U.S. Census recorded the population of Madison and the surrounding urbanized areas at approximately 278,000; approximately 60% of all Dane County residents, therefore, live in the Madison metropolitan area. Not counting Madison, there are four cities in Dane County with a population of more than 10,000 people; two of these cities, Fitchburg and Middleton, are Madison suburbs. The other two cities, Stoughton and Sun Prairie, are located in rural Dane County.

Figure 4-1 Dane County
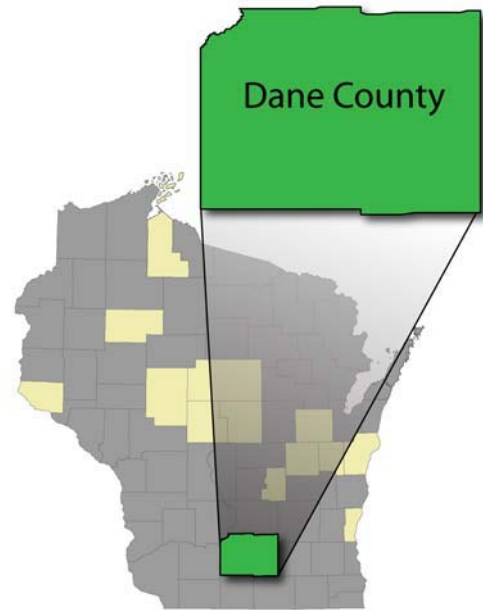
Dane County is one of the fastest growing counties in Wisconsin and in the United States, with an 8.7% growth recorded by the US Census between 2000 and 2006. Much of this growth has occurred outside of the City of Madison in the suburbs. Within the Madison area, the population is becoming increasingly dispersed as suburban communities grow at a faster rate as compared with the city of Madison. The Madison area has experienced strong economic growth over the past several years; the local economy has steadily diversified from a government-oriented employment base to include more jobs in the high tech and medical and health care sectors.

Inventory of Existing Services

There are several transportation services available in Dane County, including both fixed-route operators and human service providers. In 2006, there were five public transit operators in Dane County. Information on the main services is listed below with additional details provided in Figure 4-2:

- **Madison Metro Transit** – Metro Transit, owned by the city of Madison, is the major transit operator in the Madison metro area. Metro Transit service includes local, commuter and circular routes brought together in a timed transfer point system, with core routes. Metro Transit operates services directly on weekdays and

contracts with private providers for weekend and weeknight service. Metro Transit provided 11.5 million trips in 2006. Funding for the service was $41.4 million, including 5307 and 85.20 grants, local contributions and passenger revenues.

- **Metro Plus** – Metro Transit also operates Metro Plus, demand responsive paratransit service for passengers who are unable to use the fixed-route bus system. Metro Plus is available within ¾ of a mile on each side of regular fixed-route service, excluding commuter routes. Metro Plus operates the paratransit service directly on weekdays and assigns weekend and overflow ambulatory trips to Badger Cab and Laidlaw, who hold contracts with Metro Plus. A third contractor, Transit Solutions, carries overflow non-ambulatory trips. Metro Plus also contracts with other communities (Village of Shorewood Hills) and public institutions (UW-Madison and Madison Metropolitan School District) to provide paratransit service.

- **Monona Lift** – The city of Monona contracts with Laidlaw for two transportations services: 1) Monona Express: commuter service from Monona to downtown Madison and the UW campus and 2) Monona Lift: accessible circulator service designed for older adults and persons with disabilities but is also available to the general public. The Monona Lift operates a deviated fixed-route; buses will deviate up to ¾ of a mile to pick up/drop off seniors and disabled passengers with an advance reservation. In 2006, the Monona Lift provided nearly 12,700 rides and was funded with $176,009 in federal (5307) and state (85.20) grants as well as local resources and farebox revenue.

- **City of Sun Prairie Shared-ride Taxi** – The city of Sun Prairie contracts with a private provider (Sun Prairie Taxi) for shared-ride taxi services available to Sun Prairie residents. This shared-ride taxi service provided over 90,900 rides in 2006; funding for the service was $565,311. Resources included state 85.20 grants, municipal contributions and passenger fares.

- **City of Stoughton Shared-ride Taxi** – The city of Stoughton also contracts with a private provider for shared-ride taxi services in the city of Stoughton. The shared-ride taxi service carried 35,600 rides and was funded with $286,581 in 2006. Funding included state 85.20 grants, local resources and passenger fares.

- **City of Waterloo/Marshall Shared-ride Taxi** – The cities of Waterloo and Marshall contract with Lazers Bus Service to provide shared-ride taxi services in the cities of Waterloo and Marshall. In 2006, the shared-ride taxi services provided 3,817 rides and operated using $55,546; funding sources include federal 5311, state 85.20, local resources and passenger fares.

In addition to public transit services, there are several human service transportation providers. The largest providers of specialized and human service transportation are described in the following text with additional providers listed in Figure 4-2.

- **Dane County Services for the Elderly and Persons with Disabilities** – the Adult Community Services Division of the Dane County Department of Human Services (DCDHS) administers four different specialized transportation services for the

elderly, persons with disabilities and low-income persons who live or need to travel outside the service boundaries of Metro Transit:

❍ Group subscription services to adults aged 60 or more to nutrition sites, senior center activities, adult daycare centers and shopping areas. Persons with disabilities may also use these services. This includes the Group Access Services (GAS) (see below) and Rural Group Transportation.

❍ Group ride program to adults aged 18 or older attending work or day programs; most participants have a developmental disability or chronic mental illness.

❍ Limited demand response paratransit services primarily for employment, volunteer-related, educational or training related and medical trips.

❍ Transportation for individuals with low incomes with no other means of transportation to necessary services.

DCDHS funds these programs through a combination of federal, state, county, city of Madison and other pass-through funding. Services are provided by private contractors. DCDHS also administers Community Development Block Grant (CDBG) funds to communities developing or enhancing specialized services and helps funds other transportation programs, including Retired Senior Volunteer Driver Escort Program (RSVP) services.

● **Group Access Services (GAS)** – GAS provides regularly scheduled group trips for seniors aged 60 or more to nutrition sites, senior adult daycare centers, shopping centers and public libraries. Persons with a disability may also use the service. Service is provided within five geographical areas in the Madison area. GAS functions much like a neighborhood circulator service connecting residential areas with the above mentioned destinations. The service is managed by Dane County and funded with 85.20 grants, and county resources.

● **Employment Transportation for Low-Income Persons** – The DCDHS Job Center has been receiving funding from the State Employment Transportation Assistance Program for several years. Currently, these funds are used to provide Metro bus tickets; support a staff person to coordinate transportation activities, and provide funding for emergency car repair.

● **Retired Senior Volunteer Driver Escort Program (RSVP)** – RSVP provides individual rides for seniors when other options are not available. Most rides are for medical purposes.

● **Care Wisconsin (formerly ElderCare) –** Care Wisconsin is a private, non-profit health care organization that provides services to older adults living in Dane County. Programs include adult daycare and home care services; Care Wisconsin also provides services for Medicaid-eligible clients. All Care Wisconsin clients receiving transportation are Medicaid-eligible, due to insurance restrictions. Costs associated with transportation are provided primarily through program fees, although the agency's vehicles are purchased using 5310 funds.

- **Focuscorp** – Focuscorp is a private non-profit social service organization that provides services to individuals with developmental disabilities. They provide transportation services to clients via subscription services and also contract services and charter vehicles to other service providers and provide medical assistance trips.

Figure 4-2 Community Transportation Services in Dane County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/ State Funds
Madison Metro Transit	Urban fixed-route	General public	Fixed-route	Weekdays 6:15 am – 6 pm; Sat. 8 am – 4:30 pm; Sun/Hol: 12:30 pm – 4:30 pm	210 large buses (est.)	5307; 85.20; 5309
Metro Plus	ADA Paratransit	Based on ADA rules	Demand response	Same as fixed-route	Approx 20 small buses; 4 with ramps and 16 lift equipped	5307; 85.20; 5309; 85.21
Monona Lift Monona Express	Senior route and commuter service	Lift: aged 65 or older; persons with disabilities; Express: general public	Lift is deviated fixed-route and Express is express loop service	Lift: 7:55 am – 3:15 pm; Express – 2 am and 2 pm loops in each direction	Under contract to Laidlaw	85.20; 85.21
City of Sun Prairie	Shared-ride taxi	General public	Demand response	Weekdays 6 am – 12:00 am; Weekends 6 am – 2:30 am	Under contract to Sun Prairie Taxi	85.20
City of Stoughton	Shared-ride taxi	General public	Demand response	N/A	Contracted to Stoughton Cab Service	85.20
City of Waterloo	Shared-ride taxi	General public	Demand response	N/A	Contract with Lazers Bus	5311; 85.20
Dane County Department of Human Services	Services for older adults, persons with disabilities and agency clientele	Agency clients; older adults, persons with disabilities, medical assistance, etc.	Demand response; Flexible fixed-route	Varies with service	Varies	5311; CDBG, Older Americans Act Title IIIB
Retired Senior Volunteer Driver Escort Program	Volunteer driver	Varies	Volunteers	Varies by volunteer	N/A	
Care Wisconsin	Human service	Clients	Subscription; demand response	Monday – Friday 6 am – 5:30 pm		5310
Focuscorp	Human Service; Charter & medical assistance	Clients; Other services per authorizing agency	Subscription Group Charter Demand Response	Monday - Friday 7:30 am – 5:30 pm		Medicaid
A-Lift Services;	NEMT	Medicaid eligible and private pay	Demand response	24/7	N/A	Medicaid
American Cancer Society	Medical	Cancer patients	Volunteer	Varies	Volunteer vehicles	N/A

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/ State Funds
Catholic Charities	Medical and quality of life	Dane County residents aged 55+ for companion care and 65+ for other services ; persons with disabilities	Volunteer	Varies	Volunteer vehicles	N/A
Capital Express	NEMT	Medicaid eligible and private pay	Demand response	N/A	N/A	Medicaid
CareVan	NEMT	Medicaid eligible and private pay	Demand response	N/A	N/A	Medicaid
Meister's Special Care	NEMT	Medicaid eligible and private pay	Demand response	N/A	N/A	Medicaid
MLS Transportation	NEMT	Medicaid eligible and private pay	Demand response	N/A	N/A	Medicaid
Union Cab Accessible Transportation Services	NEMT	Medicaid eligible and private pay	Demand response	N/A	3 accessible vans	
We Care Transportation	NEMT	Medicaid eligible and private pay	Demand response	N/A	N/A	Medicaid
Transit Solutions	NEMT	Medicaid eligible and private pay	Demand response	N/A	N/A	Medicaid

Existing Coordination Efforts

Coordination efforts in Dane County are multi-faceted; while some groups of providers and stakeholders are working together and have achieved considerable success other stakeholders are less engaged in coordination efforts. In addition, historical divides between the urbanized city of Madison with the rural parts of Dane County result in persistent barriers to collaboration.

Coordination in Dane County includes a formalized process managed by a commission, as well as other less formalized and more dynamic efforts, often created through partnerships between one or more stakeholders. The formalized process is more comprehensive and inclusive, but the partnerships often realize greater gains faster. The challenge for coordination in Dane County, therefore, is to support and encourage independent partnerships and, at the same time, facilitate increased participation and authority within the formalized process.

There are currently two groups working on improving community transportation in Dane County:

- **Dane County Specialized Transportation Commission (DCSTC)** – The DCSTC is the oversight body for specialized transportation services in Dane County and sets policy direction, helps coordinate and oversees the administration and funding of specialized transportation services in Dane County. The DCSTC also holds bimonthly meetings in communities around the county to gather input on effectiveness of existing services, identify needs and provide information on available resources.

- **Dane County Transportation Coordination Meeting** – Human service and transportation providers in Dane County meet annually to review and discuss grant applications associated with the 85.21 and/or the 5310 program (5310 grants are awarded biennially).

Other less formalized, ad hoc coordination efforts include:

- Dane County shares 85.21 funds with Metro Plus to help support paratransit services. Madison, in turn, shares 85.20 funds with the county to support GAS.

- Metro Plus ADA paratransit service is operated through a combination of in-house and contracted resources. The service has significant peak periods when service demands spike, straining agency resources. The Dane County Aging Unit works closely with Metro Plus to help alleviate peak period dilemma, such as scheduling program start times outside of Metro Plus peaks and sharing trips during peak periods.

- Focuscorp is a private non-profit human service organization that provides job training services to adults with disabilities. Focuscorp provides transportation to agency clients. In order to offset transportation costs, Focuscorp contracts with other agencies, including the state of Wisconsin, to provide transportation to support

other program. As the schedule permits, Focuscorp also provides medical assistance trips.

Service Redundancies, Gaps, and Needs

Coordination efforts and service designs in Dane County balance the needs of the highly urbanized area in Madison, which has a relatively large population of older adults, persons with disabilities and individuals with low incomes with the fast growing suburban areas and the needs of the rural population. Demand for transportation services must also be balanced between the city of Madison and surrounding suburban communities that lie within the metropolitan area, such as Monona, Stoughton and Sun Prairie. In addition, the presence of large institutions such as the state of Wisconsin government and University of Wisconsin campus further complicate service needs and resource allocation. As a result, despite innovations and outstanding coordination efforts, some service redundancies, gaps and needs persist.

In terms of service redundancies, there are several human service organizations in the city of Madison and Dane County that operate independently of existing services and thus, travel to overlapping origins and destinations during similar time periods. In addition because there are three layers of public transportation services (public transit, human service and medical assistance), segments of these services are redundant. And, despite the multi-layer system, some populations and geographic areas in Dane County have access to no service at all.

At the same time, there are service needs and gaps in the city of Madison and Dane County. Key gaps and needs in the current portfolio of services include:

- **Limited rural services, especially for employment.** Residents of rural Dane County are limited in the types and amount of transportation available. While basic needs for older adults and persons with disabilities are met, individuals with low incomes are much more challenged to get to work, access health care, and find ways to get around.

- **Limited public transit in suburban areas, especially connections with urban services.** In most cases, public and specialized transportation has not kept pace with development and population increases in the Madison suburbs. This is true for services in and around individual communities as well as connections to Madison's urban network.

- **Lack of transportation in urban fringe.** Individuals living in areas that are within the Madison urbanized area, but outside of the Madison city limits are attractive to individuals and families with low incomes because they are close to services but outside of the most expensive parts of the city. Many new services and housing units are likewise located in the urban fringe. Many of these areas, however, are outside of (and/or do not participate) in the Madison Metro service area, thus their access to services is very limited, especially for daily transportation needs, such as employment.

- **Few options for older adults to make quality of life trips.** Older adults who are not eligible for medical assistance, or who can participate in the group ride programs tend to have very limited transportation resources available to them. In most cases, medical transportation is available but making trips for shopping, errands and quality of life purposes is challenging.

- **Lack of service on weekends.** Service is considerably more limited on weekend days. This is true in rural, suburban and urban areas and for older adults, persons with disabilities and individuals with low incomes.

Ideas to improve service delivery and coordination

As discussed, coordination in Dane County includes high levels of innovation in some parts of the service network and significantly less success in others. The challenge with Dane County, therefore, is to build on existing coordination activities and expand coordination energies to include a much larger geographic area and broader mix of service providers. Imbedded in this challenge is crafting a system that mandates participation among reluctant partners yet takes advantage of the innovation and creativity achieved by the smaller group of partners already working together. In addition, as described, Dane County faces considerable challenges associated with historical divisions among the different service providers. Some ideas to improve service delivery and coordination recommended and/or observed during the county assessment include:

- There is a comprehensive directory of services that outlines the availability and use of services, including private, public, non-profit and for-profit organizations. The inventory could become an information resource for clients as well as a platform for increased coordination and could help individuals living in rural areas access suburban and urban services and help individuals living in suburban and urban areas travel to rural areas.

- Historically, WisDOT has awarded private non-profit organizations 5310 funds to purchase vehicles but has attached few coordination requirements on these grants. As a result, several organizations are not participating in any coordination efforts, including participation in coordination discussions, either by design or because they have not been included. Before SAFETEA-LU, this arrangement was permitted but with the new coordination requirements associated with 5310, 5316 and 5317, participation in coordination efforts has become mandatory. A key step to improving coordination, therefore, will be to enforce coordination requirements as a prerequisite to receiving future funds.

- There are several administrative obstacles that hamper coordination efforts and strain financial resources. Many of these administrative obstacles relate to the medical assistance program. For example, Medicaid-eligible individuals are currently not allowed to receive a free bus pass, even though taking trips by transit would greatly reduce costs because individuals may use the bus for non-Medicaid types of activities. In addition, Madison Metro has only a very limited ability to identify individuals eligible for Medicaid transportation; increased access to the list

of eligible individuals would allow Metro to serve them more fluidly within existing services.

Lessons from Dane County

- **Coordination requires participation from all key stakeholders.** Dane County provides an example where some elements within the coordination stakeholder group work together closely and achieve considerable success, while other stakeholders divest from the problem. While this approach has meant that many services are successfully coordinated, limited participation by some stakeholder groups ultimately limits coordination.

- **Medicaid needs to fully participate in coordination.** Medicaid is not fully engaged in the coordination discussion, but medical assistance trips are a large market and thus offer considerable opportunities for coordination. In addition, changes to some of the service delivery models for Medicaid (i.e., family care) will likely result in increasing costs for transportation providers. Medicaid can make a substantial, positive impact on coordination.

- **Coordination requirements should be enforced.** Although federal mandates require participation in coordination as a prerequisite to receiving funding through the 5310, 5316 and 5317 program, these requirements have largely not been enforced. Allowing some agencies to continue to receive funding without participating in coordination efforts undermines other efforts to promote coordination.

- **Travel between rural and suburban areas to/from urban areas is essential.** Coordination in Dane County requires two simultaneous and overlapping efforts. While transportation services within the urbanized area need to be coordinated and streamline where possible, services among and between rural, suburban and urban areas need to be coordinated, both internally and with the urbanized services.

Chapter 5. Fox Valley Mini-Region (Calumet, Outagamie and Winnebago Counties)

Overview

For purposes of this study, the Fox Valley mini-region is defined as Calumet, Outagamie, and Winnebago counties. The three counties surround Lake Winnebago, in east central Wisconsin (see Figure 5-1).

Figure 5-1 Fox Valley Mini-Region

In 2006, the U.S. Census showed the region's population at 379,038, comprised of Outagamie County (172,734), Winnebago County (160,593) and Calumet County (45,711). The Fox Valley region includes what is locally known as the Fox Cities communities, which are Appleton, Kaukauna, Menasha, Neenah, Buchanan, Clayton, Grand Chute, Greenville, Harrison, Hortonville, Kimberly, Little Chute and Sherwood. According to the Fox Cities Chamber of Commerce, the largest of these communities, in terms of population, are the cities of Appleton (72,000) and Oshkosh (63,237) and the towns of Neenah (25,430) and Grand Chute (20,425).

The population total of the Fox Cities area grew by 8.2% between 2000 and 2006, increasing in population from 207,660 to 224,795. Population projections for 2010 and 2020 reflect a continuation of the increasing trend. As the region population increases, it is likely that the area may be re-categorized for federal transportation funding purposes, resulting in a reduction in funding levels.

Inventory of Existing Services

There are several transportation services available in the Fox Valley, including public transportation, privately-operated taxi services, and a variety of specialized transportation services. In addition to the transportation providers, the region also benefits from a full-time transportation coordinator sponsored by "Making the Ride Happen", a non-profit organization funded by private donor. The largest transportation providers are listed here with additional information provided in Figure 5-2:

- **Valley Transit** – The city of Appleton operates Valley Transit (VT) within the Fox Cities urbanized area and serves the cities of Appleton, Kaukauna, Menasha and Neenah; the towns of Buchanan, Grand Chute and Menasha; and the villages of Kimberly and Little Chute. The system is owned and operated by the city of Appleton, but the Fox Cities Transit Commission, consisting of eight members representing the participating municipalities, governs its policies and procedures. Valley Transit's paratransit service, Valley Transit II, is operated through a contract with a private operator, Kobussen Buses, Ltd. Valley Transit assists the other counties in the Fox Valley mini-region by providing additional paratransit services including rural, meal-site and older adult transportation under separate contracts. In 2006, Valley Transit provided 725,425 trips and was funded with $6.5 million; resources for the agency included federal 5307 and state 85.20 grants as well as local contributions and farebox revenue.

- **Oshkosh Transit** – The city of Oshkosh operates a fixed-route/deviated fixed-route transit system within the city of Oshkosh and to Neenah. The deviated fixed-routes stop at senior complexes, grocery stores, and the inter-city bus station. Countywide ADA paratransit service is available for ADA-certified individuals; the service is provided by Cabulance under contract to Oshkosh Transit. Oshkosh Transit also provides transportation for low-income individuals through the Department of Health and Human Services (DHHS) Access to Jobs program. The Access to Jobs program provides qualified individuals trips to job sites with the city of Oshkosh boundaries using local taxi services. The individual pays $3.00 per trip and Oshkosh Transit pays the $8.00 to the taxi provider. In 2006, Oshkosh Transit provided 900,808 trips and had operating expenses of $4.3 million. Funding sources included federal 5307, state 85.20, local contributions and passenger fares.

- **Red Cross - Oshkosh** – Red Cross provides a variety of specialized transportation services to older adults, persons with disabilities and persons with low incomes, and Red Cross clients living in Winnebago County. Travel may be to anywhere in the state. Transportation services include a contract with DHHS to fund 1.5 employees to manage a staff of volunteer drivers. The Red Cross also operates a fleet of four vehicles to provide demand response non-emergency medical transportation in the local area and a volunteer driver service for medical trips that have destinations outside of the city of Oshkosh. The Red Cross also reviews ADA paratransit eligibility applications for Oshkosh Transit.

- **Cabulance and Cab Company** – This is a private, for-profit taxi service based in Oshkosh providing regular taxi service, paratransit and Access to Jobs trips. Cabulance also contracts with Winnebago County to be a provider of rural demand-response trips that include origins and destinations outside of Oshkosh municipal boundaries but within the county borders. Local cities and townships subsidize the rural trips through annual appropriations from their budgets. Cabulance and Cab Company also provides trips for the Department of Mental Health that are paid through Winnebago County DHHS.

- **Aging and Disability Resource Center (ADRC)** – Calumet, Outagamie, and Waupaca Counties have a shared ADRC that provides transportation, social

services, nutrition programs, employment services and information/referrals to individuals aged 60 and older and persons with cognitive or physical disabilities (including temporary physical disabilities). The ADRC operates a fleet of vehicles and manages a volunteer driver program to provide transportation for clients and medical assistance trips.

- **New Hope Center** – The New Hope Center is a non-profit social service agency that operates three fixed-routes that connect Chilton in Calmut County with Manitowoc County. New Hope Center receives operating revenue from Manitowoc and Calumet County government appropriations, Valley Transit, and private donations. It also received a federal 5310 grant in September 2007. The New Hope Center fixed-routes are open to the general public and to New Hope consumers. One route running between Chilton and Appleton connects with Valley Transit at a bus stop in Appleton. In addition to fixed-route service, New Hope Center provides countywide general public and client demand response transportation in Calumet and Manitowoc Counties. New Hope also has contracts with the Century Ridge Assisted Living Facility and Vocational Rehabilitation to provide client transportation.

Figure 5-2 Community Transportation Services in Fox Valley Mini-region

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/State Funds
Valley Transit	General public transit	General public	Fixed-route. ADA paratransit. Also provide other paratransit for rural meal-site and older adult transportation under separate contracts.	Weekdays 5:30 am – 10:30 pm; Saturdays 7:30 am – 10:30 pm; Sundays 7:30 am – 2:00 pm (ADA paratransit only)	20 buses plus 10 buses in a contingency fleet for special events (all accessible) (Totals do not include Kobussen vehicles)	85.20; 5307; 85.21 (for senior service)
Oshkosh Transit	General public transit	General public in Oshkosh and Neenah	Combination of fixed-route, deviated fixed-route, and ADA paratransit	Weekdays and Saturdays 6:15 am – 6:15 pm.	17 full size 35 to 40 foot buses (all accessible)	5307; 5309; 85.20
Red Cross Oshkosh	Specialized transportation	Older adults; persons with disabilities of any age, low-income individuals, and agency program consumers	Demand response	Monday through Sunday as needed	3 sedans 1 minivan (all non-accessible)	None
Cabulance and Cab Co.	General public taxi; Medicaid	General public: Medical assistance	Demand response and taxi service	24/7	12 vans and 3 minivans (accessible) 2 minivans (non-accessible)	Medicaid
ADRC	Specialized transportation	Older adults (60 +), persons with physical disabilities (including temporary), persons with cognitive disabilities, Medicaid-eligible	Demand response Priority trip purposes as follows: Medical Nutrition Employment Social	Weekdays 8 am – 4:30 pm	2 vans 2 mini-buses 1 back-up vehicle (all accessible)	85.21, Title III, Title XIX, FTA Section 5310

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/State Funds
New Hope Center	Human Service	Persons with disabilities and agency program consumers	Flex route and demand response	Weekdays 6 am – 8 am and 3:30 pm – 5:30 pm (routes); Weekdays 7 am – 4 pm (demand response)	3 sedans 2 vans (non-accessible) 1 van 2 buses (accessible) 1 back-up van (non accessible)	5310
Making the Ride Happen	Human Service	Primary mission is older adults (age 60+) but consultation available for people under age 60 as well.	Demand response with volunteer drivers	As-needed	Volunteer drivers use their personal vehicles	None

Existing Coordination Efforts

Communities in the Fox Valley are focused on creating a well-designed regional transportation system. These efforts are supported through multiple coordination committees, which are actively discussing methods to improve the efficiency of transportation through regionalized service structures. On-going coordination efforts include:

- **The Tri-County Transportation Board** is comprised of representatives from Winnebago, Outagamie, and Calumet Counties and the United Way of Fox Cities. The Board has conducted extensive work to address transportation needs in the Fox Valley. Past efforts include assembling experts and concerned parties including human service collaboration groups from across the region to assess needs and define potential solutions to mutual unmet transportation needs.

- **"Making the Ride Happen"** is a private, non-profit organization that developed out of a May 2003 "life study" of the local population that revealed affordable transportation was a primary 'quality of life' issue for older adults. This study combined with contributions from an anonymous donor led to a new program called, "Making the Ride Happen" designed to help older adults get access to transportation services. A key aspect of the program is funding of a transportation coordinator position, who works directly with seniors to help them find the transportation services they need. The organization has a board of directors that focuses on coordinating transportation among transportation providers in Calumet, Outagamie, and Winnebago counties.

- **The East Central Wisconsin Regional Planning Commission** (ECRPC) facilitates transportation coordination meetings for the region and is developing a plan to support regional transportation. Participants in the transportation meetings include representatives from local public and human service agency transportation providers. Planning discussions are focused on better use of local resources through coordinating information, schedules, and trips. ECRPC also coordinates regular on-going transportation meetings including review of grant applications.

- **The Winnebago County Specialized Transportation Coordination Council** is an on-going coordination council working to improve transportation service delivery. One of the products of the council is a directory of transportation services available for older adults and persons with disabilities in Winnebago County. The directory includes contact information and a brief explanation of services and transportation providers in municipal and rural areas.

- **Valley Transit's new "Connector" service** is an innovative service model designed to extend the regular bus routes beyond standard route boundaries and hours. The service is funded by Valley Transit and the United Way and is designed to connect individuals from a location outside of the bus route to one of four bus transfer points. The service is available 20 hours a day, six days a week and is contracted to the service provider managing Valley Transit's ADA paratransit service. The Connector is available to members of the general public and is an excellent community transportation resource for all members of the community.

Service Redundancies, Gaps, and Needs

There are a multitude of community transportation services in the Fox Valley region, most of which are concentrated around Appleton and Oshkosh. While there are currently no regional service providers, the coordination committees and the East Central Wisconsin Regional Planning Commission are developing plans for a regional transportation program; this plan includes community transportation services. While coordination efforts in the area have been significant in terms of sharing information, barriers to expanding strategies beyond the status quo persist, primarily caused by restrictive agency policies, and a reluctance to share financial resources. In addition, there are several committees in the region that are working to improve the coordination of transportation resources, with many transportation providers participating in more than one of the committees. While some stakeholders want to consolidate committees, others feel the multi-faceted efforts are warranted.

Despite such an extensive network of service and coordination efforts, service redundancies and gaps exist. Redundancies in the system occur where there is overlap between specialized demand response transportation services provided by human service agencies and public transportation providers. On a typical day, for example, both public and specialized transportation providers could travel to similar destinations in Appleton, Oshkosh, or Neenah. This suggests that more effort could be made to encourage sharing trip schedules among agencies and with the public demand response services. Gaps in service include the following:

- **There is a need for regional services.** Local transportation providers reported a need for regional services that carry travelers across county boundaries. Providing these services is difficult because policies tied to local funding prohibit traveling across municipal boundaries, thereby limiting options for inter-city trips. This is also true for demand response transportation, which are typically limited to origins and destinations outside of city limits but within the county boundaries.

- **Rural transportation is limited.** Most rural transportation service is provided by human service agencies for client populations and agency-related programming. As a result, services are not readily available for quality of life activities or for members of the general public.

- **Increasingly, private providers will not serve medical assistance trips.** Several organizations noted that Medicaid reimbursement rates in rural areas are too low, thus operators are increasingly unwilling to provide services. Cabulance, for example, no longer provides long distance Medicaid trips, except for dialysis treatment, because reimbursement rates do not cover fuel expenses. Consequently, Medicaid consumers are increasingly challenged to find transportation options for longer distance medical trips.

- **Several fixed-routes in the Fox Valley are underutilized.** Several of the existing fixed-route services in the Fox Valley are underutilized due, at least in part, to a lack of awareness or incorrect public perception that the service is not for them. A need identified by Valley Transit was to undertake efforts to improve the image of public

transportation among the general population. They indicated that there is a stigma that Valley Transit buses are only for people with low incomes or disabilities, and therefore the general public does not choose to use the bus for social or employment transportation. Valley Transit is attempting to address the incorrect public perception through renovated marketing efforts and public education.

Ideas to improve service delivery and coordination

Local coordination committees have been successful in improving the information sharing activities and identifying gaps in service. Efforts to coordinate more fully, especially in areas that involve sharing financial resources, however, have been less successful. Several existing agencies are protective of their client needs and thus are reluctant to combine service or resources. In order to improve service delivery and coordination in the Fox Valley, existing coordination committees need to continue current efforts but also strengthen commitments and consider sponsoring demonstration projects that test and evaluate advanced coordination techniques. Accordingly, initial ideas to support coordination progress in the Fox Valley include:

- Create a regional database of local and regional transportation resources, including private, public, non-profit and for-profit organizations. This database could become a key resource in publicizing existing services, sharing resources and potentially support a coordinated scheduling effort.

- Examine strategies to streamline administrative and operational functions of independent services. Several of the smaller service providers may be better served by shared administrative services and/or joint purchasing. The University of Wisconsin Oshkosh has resources to support the research and design of technological solutions for operational functions such as shared schedules.

- The "Making the Ride Happen" transportation coordinator is an excellent resource to educate the public about existing transportation services. The transportation coordinator also creates an essential link between the client perspective and coordination efforts. Coordination efforts can build on this resource to help streamline service delivery and respond to client requests.

- Address the service area boundaries around the Fox Cities and Oshkosh in an effort to redesign each transit system's routes to improve productivity and expand the possibilities for inter-city travel.

- Implement a public education campaign to improve the image of public transportation and attract new riders. Focus on giving the fixed-route transportation providers an image of being a safe, user-friendly, convenient resource for anyone in the community for any trip purpose.

Lessons from Fox Valley

- **Innovations such as the Connector service offer potential for Fox Valley and other parts of Wisconsin.** While brand new, the Connector route expands community transportation resources both in terms of service hours and geographic coverage,

thus significantly increasing area mobility. The Connector also supports older adults and persons with disabilities' demand for quality of life trips as well as residents working second and third shift schedules. Depending on service costs, it has the potential to offer an exciting service model for other parts of Wisconsin.

- **Private non-profit organizations are interested in transportation issues**. Non-profit organizations recognize transportation as an increasingly important issue both for the general public and older adults, persons with disabilities and persons with limited incomes. Successful coordination efforts can harness these resources to improve service delivery and help meet gaps not easily funded by federal and state programs.

- **Travelers want to be able to travel across county boundaries and between urbanized areas.** The Fox Valley is comprised of several cities and three counties. While many services are regional in nature and serve a multi-county area, restrictions on funding sources means transportation services are challenged to cross political borders.

- **Marketing is essential.** Providing clear information on available services in a format that is accessible and easily understood is essential to matching individuals with travel needs to appropriate services. This is true for fixed-route services as well as demand response.

Chapter 6. Green Lake County

Overview

Green Lake County is a largely rural county located in central Wisconsin (See Figure 6-1). It is named for Green Lake County, Wisconsin's deepest natural inland lake at 237 feet. In the 2006 US Census, 19,147 people lived in Green Lake, most of whom (74%) reside in rural areas. The city of Green Lake is the county seat (population 1,100) and the city of Berlin is the county's largest community with a population of 5,305 people (2000 Census).

Inventory of Existing Services

There are several human service transportation options available in Green Lake County plus one shared-ride taxi service operating in the city of Berlin. Human service transportation consists of services managed by the Green Lake Department of Health and Human Services (DHHS), which receives state 85.21 grant funds and uses these resources to fund various transportation programs. These providers are listed in the following text with additional information provided in Figure 6-2:

Figure 6-1 Green Lake County

- **City of Berlin Shared-Ride Taxi** – the City of Berlin sponsors a shared-ride taxi service available to anyone with a trip origin or destination within the city limits. One-way fares are $2.50 for adults and $1.50 for older adults, persons with disabilities and students. Trips out of town are charged at $1.00 per mile. The service is contracted to Classic Cabs and carried 23,837 shared-ride trips in 2006. Classic Cabs also provides some medical assistance trips as needed. The service was funded with $191,862 in 2006; inclusive of federal 5311 and state 85.20 grants, municipal contributions and passenger fares.

- **Fox River Industries** – Fox River Industries is a human service agency serving people with developmental disabilities. It operates four subscription routes through Green Lake County to a sheltered workshop in Berlin as well as demand response service to Appleton, Fond du Lac, Oshkosh, Madison, and Milwaukee. Transportation service provided by Fox River is one of the DHHS funded programs.

- **Berlin Senior Center** - The Berlin Senior Center provides transportation, nutrition, outreach, benefit assistance, and recreational activities for people aged 50 and

older, and people of any age with disabilities. The Center is a department of the city; but is a DHHS (County) funded program. The transportation service area is provided within a five-mile radius of the Berlin city boundaries, and upon request to the edge of Waushara and Winnebago Counties. In addition to this local service area, the center will transport consumers anywhere in the state for medical appointments. During FY 2006, the center provided 2,128 passenger trips, of which 373 required wheelchair transportation.

- **City of Green Lake** – The City of Green Lake manages a volunteer driver service to provide transportation for persons age 55 and older. Trip purposes are primarily for medical appointments, but shopping and other personal trip purposes are also eligible if the vehicle and a volunteer driver are available. Funding for this program is provided by DHHS.

- **Princeton Senior Transportation** – Princeton Senior Transportation administers a volunteer driver program for adults age 60 and older, and persons with disabilities of any age. Funding for this program is provided by DHHS.

- **South Green Lake County** – South Green Lake County provides the Access to Vans demand response transportation service for adults aged 60 and older, and persons with disabilities of any age. The organization operates four vehicles that are part of the Green Lake County DHHS fleet of vehicles. Transportation is provided primarily for medical appointments, but as available, service is offered to nutrition sites, shopping, and social/recreational activities.

- **Veterans Services** – Veterans Services organizes and manages volunteer drivers to provide transportation to veterans. Transportation is available to veterans of any age who live in Green Lake County and are eligible to enroll in the Veterans Administration health care system. Veterans Services also reimburses qualified veterans for taxi fares in southern Green Lake County, when necessary. The organization provides approximately 200 to 260 trips per year.

Figure 6-2 Community Transportation Services in Green Lake County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Size	Use of Federal/ State Funds
City of Berlin	Shared-Ride Taxi	General Public	Demand response	8:00 am to 5:30 pm (Mon. – Fri.) 8:00 Am to 3:00 PM (Sun.)	Non-accessible: 3 minivans Accessible: 1 van	5311; 85.20
Green Lake Department of Health and Human Services	Human service/ Specialized	Persons age 55 and older; Persons with a disability (any age)	Program-specific transportation. DHHS offers transportation to meet the needs of five agency programs.	Program-specific	Non-accessible: 1 van Accessible: 3 buses and 8 vans. (Vehicles operated by Fox River Industries, Berlin Senior Center, south Green Lake County)	85.21; 5310
Fox River Industries	Human service/ Specialized	Agency consumers; Persons with disabilities	Four fixed-routes bring passengers to/from the workshop in Berlin. Demand-response transportation is available for other trips.	Routes: Long Routes – 6:30 to 9:15 am and 3:30 to 5:45 pm (Mon. – Fri.) Short Routes – 7:00 to 8:00 am and 3:30 to 4:30 pm (Mon. – Fri.) Demand Response: 9:30 am to 3:30 pm (Mon. – Fri.)	Non-accessible: 1 van (purchased through DHHS) Accessible: 3 buses and 3 vans (purchased by DHHS)	85.21; 5310
Berlin Senior Center	Human service/ Specialized	People age 50 and older; People with a disability (any age).	Demand-response transportation within Berlin for any purpose. Out-of-county for medical purposes.	8:00 am to 4:30 pm (Mon. – Fri.)	Accessible: 1 van	85.21
Southern Green Lake County	Human service/ Specialized	People age 60 and older; People with a disability (any age)	Demand-response transportation in southern Green Lake County for any purpose.		Accessible: 2 vans 2 minivans (purchased by DHHS)	85.21
Veterans Administration	Medical	Veterans of any age	Demand-response for medical appointments. Out-of-county service available.	Based on appointment and volunteer driver availability	Volunteer drivers use personal vehicles	VA grants

Existing Coordination Efforts

The Green Lake County Transportation Coordination Committee leads coordination efforts in Green Lake County. Committee participants include Green Lake County DHHS, Fox River Industries, and Berlin Senior Center. Committee discussions have included a variety of coordination opportunities, including the potential for a brokerage agreement. The broker agreement has not been carried forward at this time.

DHHS manages the majority of human service transportation in Green Lake County. The county is currently involved in several sophisticated coordination strategies including:

- Grant writing among transportation agencies is coordinated. DHHS, Fox River Industries, city of Green Lake, city of Berlin, Princeton Senior Transportation, and southern Green Lake County work together to write transportation grants. Fox River Industries writes the capital grant for FTA Section 5310. DHHS writes and administers the 85.21 grant. Each grant benefits programs in all organizations.

- Training is coordinated. Fox River Industries coordinates training for all local transportation providers with the University of Wisconsin – Milwaukee.

- Agencies share clients and will provide rides for one another. DHHS occasionally provides trips for local nursing homes, Veterans Services, or Classic Cab to avoid canceling trips when maintenance problems or other issues create a temporary gap in vehicle availability.

- The ADRC acts a clearing house for transportation providers. When an individual calls the ADRC and indicates that he or she needs transportation, it makes a referral to an appropriate transportation provider in the county. In this sense, the ADRC channels calls to the most appropriate resource and consolidates information dissemination functions, although it plays no role in the coordination of actual trips.

- DHHS shares its formal policies and procedures, such as descriptions of service mode, policies of behavior on vehicles, and grievance or complaint policies with other transportation providers in an effort to reduce the duplication of time among administrative staff members of all local organizations.

Green Lake County has a countywide transportation coordination committee that was created as part of the SAFETEA-LU planning process. During the SAFETEA-LU meetings, a brokerage plan was discussed for Green Lake County, but no action has been taken because many organizations, especially volunteers, did not have a clear understanding of how to proceed and what the impacts would be on the individual programs.

Service Redundancies, Gaps, and Needs

There are five, coordinated human service agencies in Green Lake County providing transportation to older adults and persons with disabilities. These services are well coordinated and thus few service redundancies exist. Needs for transportation and gaps in existing services persist, however, most strongly for low-income populations and members

of the general public, who have few or no service options. Among these populations, transportation to essential services, such as employment, is not available.

Ideas to improve service delivery and coordination

Despite excellent coordination taking place among the DHHS funded agencies, coordination efforts in Green Lake County may be improved initially with some local efforts and ultimately, by forming greater links and partnerships with Fox River coordination efforts. Ideas to improve community transportation service delivery and coordination efforts locally include:

- Publish a comprehensive directory of transportation providers, categorized by eligibility that can be distributed through Green Lake County agencies, businesses and human service providers.

- Continue to identify and document general public transportation needs in Green Lake County through community surveys and public meetings.

- Designate a representative from the Green Lake County Transportation Coordination Committee to participate in Fox Valley coordination efforts and represent Green County in that mini-region's coordination committees.

- Examine possibilities for including portions of Green Lake County in regional Fox Valley coordination plans. For example, explore the feasibility of including Green Lake County, or portions of the county, into the Fox Valley mini-region in an effort to increase availability of general public transportation to major shopping and entertainment areas.

- Gather commitments from local elected officials who will actively support transportation coordination efforts by committing local funds to match available federal grant dollars for FTA Section 5310, and possibly Section 5317 if coordination plans with the Fox Valley mini-region are successful

Lessons from Green Lake County

- **Rural counties can achieve a high degree of coordination.** Green Lake Countyis a small, rural county with a population of approximately 20,000 people. It has achieved a high level of coordination among human service partners including sharing efforts to write grants, passenger requests, policies and procedures and capital resources such as vehicles. These efforts, largely managed by DHHS, provide a local best practice example for other rural counties in Wisconsin.

- **Even among well-coordinated counties, some stakeholders can be left out.** Despite so much coordination, several stakeholders involved in transportation service delivery are left out. In Green Lake County, individuals with low incomes and individuals involved in workforce development activities are largely missing from coordination efforts. As a result, outside of the city of Berlin few services are available for these populations.

- **In some regions, the best potential for expanded coordination may be through regional partnerships.** In Green Lake County, as discussed, local human service transportation is well coordinated. While local efforts need to expand to include workforce development efforts and individuals with low incomes, potential for improved coordination and service expansion also lies with forming increased partnerships with nearby counties. In the case of Green Lake, the Fox Valley communities, which are also well coordinated, offer an attractive potential partner.

Chapter 7. Manitowoc County

Overview

Manitowoc County is a largely rural county located in eastern Wisconsin along the coast of Lake Michigan (see Figure 7-1). According to the U.S. Census Bureau, the county has a total area of 1,494 square miles, of which 60.4% is water. The 2006 US Census estimated the population in Manitowoc County at 81,911 people.

Figure 7-1 Manitowoc County

About 40% (34,244) of the county's population lives in the county seat and largest municipality, the city of Manitowoc, which is located along Lake Michigan. Directly north of Manitowoc is the city of Two Rivers, the county's second largest municipality (population 12,161). Other larger communities in Manitowoc County include Kiel and Cleveland.
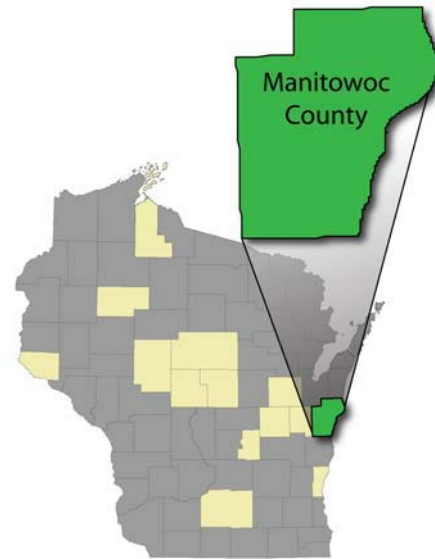
Inventory of Existing Services

The transportation services available in Manitowoc County include a public transportation system within the city limits of Manitowoc and Two Rivers. Human service transportation is provided by the Manitowoc County Aging and Disabled Resource Center (ADRC) plus faith-based organizations and private non-profit service providers. The largest transportation providers are listed below with additional information provided in Figure 7-2:

- **Maritime Metro Transit** – Maritime Metro Transit is a general public transportation system managed by the city of Manitowoc. Maritime Metro offers fixed-route and ADA paratransit service in the Manitowoc and Two Rivers urbanized area. Maritime Metro operates the fixed-route service with three buses running Monday through Saturday within and between the municipalities of Manitowoc and Two Rivers. ADA paratransit services are operated by a private provider, Assist to Transport. Assist to Transport provides one bus for consumers with cerebral palsy and has six vehicles available for paratransit. In 2006 Maritime Metro carried 239,514 passengers and was funded with $1.4 million. Resources included federal 5311, state 85.20, local sources and passenger fares.

- **Manitowoc County Aging and Disability Resource Center (ADRC)** – The Manitowoc County ADRC provides rural demand response transportation for adults aged 60 and older, and persons with disabilities of any age. ADRC prioritizes demand

response trip purposes in the order of medical, nutrition, sheltered employment, and social activities. In addition to the demand response service, ADRC also operates three fixed-route subscription trips to transport consumers to sheltered employment locations as far as Green Bay, as well as to Manitowoc Senior Center for nutrition.

- **Holy Family Medical** – Holy Family provides specialized transportation service to individuals with disabilities. Through its CareVan Service, the hospital provides personalized door-to-door service for medical appointments, personal needs, and social events. The CareVan fleet is wheelchair accessible and equipped with oxygen. CareVan provides local and long distance services.

- **Aurora Medical Center** – Aurora Medical Center in Two Rivers operates a privately funded demand response transportation program for medical purposes within Manitowoc County. Service is available 24-hours a day/ 7-days a week. Demand response medical transportation is provided using two full size vans with capacity for one wheelchair each. Approximately 75% of trips each year are for consumers with wheelchairs.

Figure 7-2 Community Transportation Services in Manitowoc County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Size	Use of Federal/State Funds
Maritime Metro Transit (Operated by Assisted Transport)	General public transit	General Public for metropolitan fixed-routes. Approved ADA qualification from city of Manitowoc for paratransit service. Agency consumer for cerebral palsy.	Fixed-route, flex route, demand response, and subscription service.	Weekdays 5:00 am – 8:00 pm Saturdays 9:00 am – 4:00 pm	3 accessible vans 4 non-accessible vans 1 accessible mini-bus 4 accessible buses	Section 5311 and CMAQ; 85.20 Also, local Tax Levy and grant from city of Manitowoc and Two Rivers.
Manitowoc County Aging and Disabled Resource Center (ADRC)	Specialized service	Older adults age 60 and older, and persons aged 18 and older with disabilities in Manitowoc County	Combination of demand response and subscription service	Weekdays 8:00 am – 4:00 pm (Demand response) Weekdays 7:00 am – 5:00 pm (subscription)	2 vans 4 mid-size buses	85.21; 5310; Title III (Older Americans Act)
Holy Family	Specialized service	Persons with disabilities	Door-to-door demand response	As needed	N/A	None
Aurora Health Care	General public transit	Hospital patients	Demand response – Medical	24 hours/7 days	2 vans – both accessible	Hospital and private donations only
Red Cross	Human service	As needed	Volunteer driver	As needed	N/A	None

Existing Coordination Efforts

In 2006, several of the local transportation providers participated in the SAFETEA-LU meetings. Since that time, however, coordination planning efforts have been led by the Office on Aging and Disability:

- **Manitowoc County Transportation Committee** is comprised of transportation providers, human service agencies, municipalities, passengers, and local businesses. They have been meeting since 2000. Some stakeholders noted that communication among the general membership is low; however a coordination sub-committee that formed from the group has strong commitments. A key player in this group, the Manitowoc ADRC, recently submitted a grant application for New Freedom resources to fund a regional mobility manager.

Other local coordination efforts include:

- This is the initial year of a joint agreement between the city of Manitowoc and ADRC, whereby ADRC reimburses the city for providing countywide paratransit service for ADA eligible clients. To date, the success of this coordination effort is considered moderate by both the city and ADRC representatives. The effort is challenged because of confusion surrounding a new eligibility process for ADA paratransit service on Maritime Metro Transit.

Service Redundancies, Gaps, and Needs

Maritime Metro Transit serves the cities of Manitowoc and Two Rivers, while the ADRC provides specialized transportation to rural areas in Manitowoc County. Hospitals, medical facilities, Red Cross, and taxi services are also available for specialized and/or medical assistance transportation in both urban and rural areas. In addition, both Holy Family and ADRC provide out-of-county transportation for medical appointments.

The existing network of service contains some overlapping services, especially in cases where public and specialized transportation provide service to similar destinations such as hospitals and medical offices. There are some gaps in community transportation services available in Manitowoc County including:

- **Rural areas do not have adequate transportation.** Public transportation service is focused primarily around Manitowoc and Two Rivers. While rural areas have some specialized transportation services, options are limited and primarily oriented around medical trips. Individuals not affiliated with any particular program and members of the general public, therefore, have very few public transportation resources.

- **Changes in ADA eligibility rules have shifted demand from transit to specialized transportation providers.** The city of Manitowoc recently adjusted the eligibility process for applicants to the ADA paratransit service making it harder for some individuals to qualify for service. The eligibility process was revised to ensure that individuals use fixed-route service if they are able and reduce demand for

paratransit services. An unintended consequence of this change has meant that many people, including those who continue to be eligible for ADA paratransit, are seeking services from other specialized demand response transportation. Consequently, reductions in ridership for Maritime's service has been matched by an increase in ridership among the demand response transportation services.

- **There is a need to travel across county boundaries.** Several travelers in Manitowoc live closer to services in other counties but, due to service restrictions, are not able to cross county borders. The need to travel cross county is especially strong among individuals living in the western part of the county.

- **Evening and weekend service hours are limited**. There are few transportation services after 5:00 pm on weekdays and even fewer options on Saturdays. Neither Maritime Metro Transit nor ADRC operates on Sundays.

Ideas to improve service delivery and coordination

Several agencies in Manitowoc County have a good referral process and service network, but in most cases organizations operate within their own service policies, such as billing procedures and eligibility requirements, and are reluctant to adjusting policies to encourage a higher level of cooperation. Improving coordination, therefore, will require a stronger transportation coordinating council, which has firm commitments from participants to work towards increased resource sharing and consolidation of efforts. If the ADRC is funded to staff a mobility manager, this individual could help support such efforts. Additional steps to support coordination include:

- Build on the inventory of transportation resources established in this document by identifying which agencies have capacity in their current operations and how the capacity may be better utilized. As transportation needs are established, some underutilized resources may be directed towards these needs.

- Strengthen the existing transportation coordination committee. Ask members for formal, written commitments to work towards resource sharing in an effort to support coordination of specialized and general public trip scheduling.

- If funded, take advantage of the ADRC's mobility manager to lead coordination efforts as well as an education campaign about potential applicable coordination strategies.

- Consider establishing a call-in center so that individuals that need transportation can use a single number for information and/or referral to participating human service agency, public and private transportation providers.

Lessons from Manitowoc County

- **Coordination efforts are easily stalled without clear mandates or strong leadership.** Manitowoc County has the required elements to develop a well-coordinated and highly efficient community transportation network. The population is small and service providers are accustomed to working together. The county has been reluctant to move forward to implement new, or more challenging coordination strategies, in part because there has been a lack of leadership locally and no clear requirements to coordinate (or repercussions for not coordinating) from the state.

Chapter 8.   Marathon, Wood and Portage Mini-Region

Overview

The Marathon, Wood and Portage mini-region Counties are located in central Wisconsin (see Figure 8-1). Combined these three counties contain some 270,000 people and five urbanized areas, the largest of which is the city of Wausau in Marathon County. Key characteristics of the individual counties include:

Figure 8-1 Marathan, Wood and Portage Counties

- Marathon County is the largest county, in terms of land area, in the state of Wisconsin. As of the 2006 U.S. Census update, there were 125,031 people living in Marathon County, about half of whom (65,200) live in the Wausau urbanized area. The local economy in Marathon County is oriented around agricultural, food processing and the wood and paper products industries.

- Wood County had a population of 74,774 people in the 2006 U.S. Census update. About half of the population is located in Wood County's two largest urban areas: Wisconsin Rapids (18,435) and Marshfield (19,136). Wisconsin Rapids is the county seat and Marshfield is a regional medical and health care center.

- The 2006 population of Portage County was estimated as 67,500 in the 2006 U.S. Census update. Not quite half of Portage County residents lived in the city of Stevens Point (24,557) and surrounding communities. Stevens Point is the home of the University of Wisconsin Stevens Point (UWSP), one of the University of Wisconsin's 13 four-year campuses, with a student population of approximately 9,000.
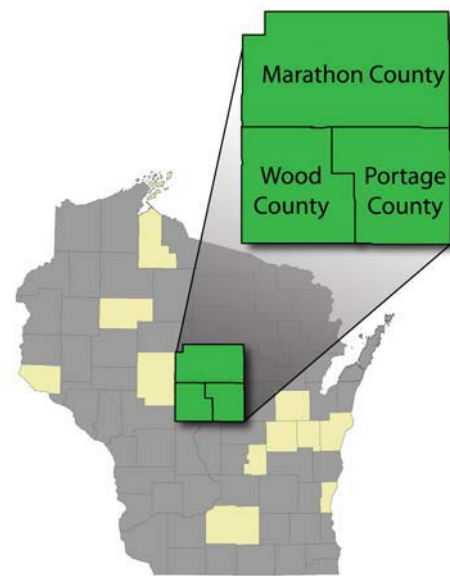
These three counties were identified as a mini-region, in part because Marathon County and Wood County recently consolidated their Aging and Disability Resource Centers (ADRC) into a single operating unit. These consolidation efforts are working their way to the program level, thus Marathon and Wood Counties are currently discussing consolidating transportation programs. Both counties already have highly coordinated independent human service transportation programs, but are just starting to work together

on the bi-county program. The two counties jointly applied for a STRAP grant to examine existing services, identify strategies and develop a process to help them consolidate and coordinate services.

While invited to participate in both the joint ADRC and combined transportation programs, Portage County opted not to consolidate its ADRC operations with Marathon and Wood Counties and thus, is also not participating in discussions about consolidating transportation services. Portage County was included as part of the mini-region, however, because it is participating in other cross-county coordination efforts and has longer term potential to be included in regional transportation planning efforts.

Inventory of Existing Services

There are several transportation services available in Marathon, Wood, and Portage Counties, with most services provided by a handful of public transportation and human service operators: The largest providers are listed here with additional information provided in Figure 8-2:

- **Wausau Area Transit Service** – The Wausau Area Transit Service (WATS) or MetroRide provides fixed-route and complementary paratransit service in the city of Wausau and parts of the surrounding urbanized area. WATS is owned by the city of Wausau. Fixed-routes are operated in-house and ADA complementary paratransit services are provided by Abby Vans. WATS provided 765,000 trips in 2006 with operating expenses for the same year at $3.8 million. Funding is provided through a combination of fares, WisDOT programs (including 85.21 for paratransit), and municipality resources.

- **Marathon County Transportation Program** – Marathon County Transportation Program is a consolidated specialized transportation program, operated by North Central Health Care on behalf of Marathon County. It provides services to veterans, social services clients, Medicare-eligible residents, elderly and disabled residents of Marathon County. The program also provides semi-fixed/subscription route bus services to disabled residents traveling for adult day services and employment opportunities. Funding is provided by Medicaid, Disabled American Veterans (private non-profit), private pay sources, county tax levy, social service block grant and youth aids and WisDOT funding.

- **Wood County Transportation Program** – The Wood County Transportation Program is a consolidated specialized transportation program that provides demand response, volunteer driver and semi-fixed/subscription route bus transportation services to Wood County residents. The service is operated by the Aging and Disability Resource Center (ADRC) of Central Wisconsin. Funding for the program is provided by passenger donations and fares, contracts with private non-profits and local retailers, Medicaid, county taxes, and WisDOT funding (5310 and 85.21).

- **River City Cab (Wisconsin Rapids)** – Wisconsin Rapid's general public shared-ride taxi service. The city of Wisconsin Rapids (and participating communities) contracts with River City Cab to provide shared-ride taxi service in the greater Wisconsin

Rapids area. River City Cab provided over 85,000 rides in 2006; funding for the same year was $906,710 inclusive of federal 5311, state 85.20, local resources and passenger fares.

- **Radio Cab (Marshfield)** – Radio Cab contracts with the city of Marshfield and participating local communities to provide general public shared-ride taxi service. The taxi service is available to residents of all participating communities. In 2006, Radio Cab provided slightly more than 80,000 trips; the service operated with $518,154 comprised of federal 5311, state 85.20, local funds and passenger fares.

- **Portage County ADRC Transportation Program** – Portage County provides transportation services to older adults and adults with disabilities through the Portage County ADRC. The program is funded through a combination of passenger donations, Older American Act resources, county appropriations, and state 85.21 funds. The ADRC provided an estimated 28,000 trips in 2006.

- **Stevens Point Transit** – Stevens Point Transit (Point Transit) provides fixed-route and complementary ADA paratransit services within the urbanized area of Stevens Point and surrounding participating communities. Point Transit is part of the city of Stevens Point municipal services; agency operating expenses were $1.4 million and the service provided nearly 182,000 trips in 2006. Funding sources included federal 5311, state 85.20, local resources and farebox revenue.

- **Plover Shared-ride Taxi** – The village of Plover contracts with a private operator, Courtesy Carriers, to provide shared-ride taxi service. The service is available to members of the general public for any trip originating or finishing in the village of Plover. The agency carried approximately 12,300 riders in 2006 and was funded with $146,089. Sources of revenue include federal 5311, State 85.20, local contributions and passenger fares.

Figure 8-2 Key Community Transportation Services in Marathon, Wood and Portage Counties

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/State Funds
Marathon County						
Marathon County Transportation Program (MCTP)	Specialized	Various	Flexible fixed-route Demand response (door-to-door) Volunteer driver	M-F 7:30 am – 4:30 pm; Weekend and evening service per volunteer driver willingness	38 vehicles - 6 sedans and 32 accessible vans	85.21 5311 5310 Title XIX (Medicaid0 Wisconsin Works Social Service Block Grants
MetroRide (Wausau Area Transit Services- WATS)	Public transit	General public Specific eligibility for ADA paratransit	Fixed-route ADA complementary paratransit (curb-to-curb)	M-F 6 am to 6:30 pm; Sat. service 8:30 am - 5:30 pm (part year)	26 Buses	5307 5309 85.21
Opportunity of North Central Wisconsin, Inc.	Specialized	Individuals with disabilities	Demand response (door-to-door)	Weekday, evening and weekend service	35 vehicles – 16 leased to MCTP	5310
Portage County						
ADRC Transportation Program	Specialized	Older adults; Adults with disabilities	Demand response; semi fixed-route; volunteer driver			85.21
Stevens Point Transit	Public Transit	General Public	Fixed-route; deviated fixed-route and ADA complementary paratransit	M-F 6:45 am - 10 pm; Campus shuttle on Saturday	7 30-ft buses; 3 modified accessible vans	5311; 85.20 5310 (for paratransit vehicles)
Village of Plover Shared-ride Taxi	Public Transit	General public – any trip beginning or ending in Plover	Shared-ride taxi	M-F 6:30 am to 6 pm; Sat 8 am – 4 pm Sun 7:30 am – 12:30 pm winter only	2 sedans; 1 accessible mini van	5311; 85.20
Portage County Human Services	Specialized	Agency clients	Volunteer drivers	Flexible	Volunteer vehicles	85.21
Head Start	Human Service	Agency clients	N/A	Support agency programming	N/A	
Community Industries	Human Service	Agency clients	N/A	Support agency programming	Vans	5310
Interfaith Caregiver	Medical; Quality of Life	Older adults	Volunteer drivers	Varies	N/A	N/A
Ambulift	NEMT	Medicaid eligible	Demand response	24/7	N/A	Medicaid
Veterans	Medical	Veterans medical trips	Demand response			

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Information	Use of Federal/State Funds
Wood County						
ADRC of Central Wisconsin (Wisconsin Rapids)	Demand Response	Seniors (aged 60+) Persons with disabilities	Demand Response and fixed-route; Prioritized by medical, nutritional, shopping and quality of life	Weekdays 7 am – 5 pm; Bus is at 9 am; Volunteer drivers as available	5 mini-buses; 2 buses and 2 vans – all accessible	85.21; Medicaid; 5310
River City Cab (Wisconsin Rapids)	Shared-ride Taxi	General public	Shared-ride taxi - $3.75 one-way within Wisconsin Rapids; mileage based outside. Seniors and disabled half-fare ($1.75)	Mon – Thurs. 5 am – midnight; Fri and Sat 5 am – 2 am; Sun 7:30 am – 4:30 pm	N/A (Contracted)	5311; 85.20
Radio Cab (Marshfield)	Taxi		Shared-ride taxi - $3.90 one-way within Wisconsin Rapids; mileage based outside. Seniors and Disabled half-fare ($1.95)	24 hours/day; 7 days per week	N/A (Contracted)	5311; 85.20
Wheels of Independence	NEMT plus some specialized	Seniors (aged 60+) Persons with disabilities	Demand response/taxi	24 hours/day; 7 days per week	N/A (Contracted)	Medicaid; 5310
Multi-County						
Courtesy Carriers	MA	Medical assistance	Demand response	N/A	6 vans and 6 accessible vans	Medicaid
Abby Vans	Medical and ADA paratransit	Medical assistance ADA elegibility for paratransit	Accessible demand response	M-F 6 am to 6:30 pm; Sat. service 8:30-5:30 (part year)	N/A	Medicaid and via contractor with WATS for ADA service and MCTP for non-ambulatory

Existing Coordination Efforts

There are several groups working on coordination and transportation in Central Wisconsin:

- **Human Services Committee of Marathon County** – This committee met monthly to develop coordinated transportation services for Marathon County and was expanded to include WATS and private providers. While the committee met the definition of the transportation coordinating council (TCC) and developed a locally-developed public transit – human services coordination study and met the SAFETEA-LU requirements, it has not been involved in on-going coordination efforts.

- **Marathon-Wood Counties Consolidated Transportation Program (MWCCTP)** – This is a newly formed committee designed to oversee and approve all actions regarding the development and formation of a consolidated Marathon and Wood Counties transportation program. The committee started meeting in September 2007 and hopes to have a coordination and consolidation plan by December 2007. The committee will report directly to the county Boards of Supervisors for Marathon and Wood Counties. Membership in the committee includes:
  - Board of Supervisors from Wood and Marathon Counties
  - Consumers
  - Local private healthcare organizations
  - Marathon and Wood County ADRC
  - Social Services Department of Marathon and Wood Counties
  - Wood County Unified Services Department
  - North Central Health Care

- **Portage County Specialized Coordination Committee** – This was originally established to approve and manage 85.21 grants. The group is co-chaired by Stevens Point Transit and Portage County ADRC. More recently, this group has taken a more active role in coordination. The group received STRAP funding to conduct planning work and has developed a service inventory and is discussing ideas to improve service coordination as a strategy to improve the effectiveness and efficiency of existing services. Some members recently (August, 2007) participated in a coordination training program. Since the first STRAP grant ended, the coordination committee is re-organizing and will start implementing some of the planning recommendations in the upcoming year.

Other un-formalized coordination efforts observed in the mini-region include:

- MetroRide and MCTP share Marathon County 85.21 resources. The two organizations also jointly contract with Abby Vans for non-ambulatory transportation and ADA complementary paratransit service in Marathon County.

● Several community transportation providers will pick up residents in neighboring counties and transport them to their home county if the trip makes sense.

Service Redundancies, Gaps, and Needs

Community transportation services in the Marathon, Wood and Portage Counties are well organized and coordinated and offer a variety of service types. Despite ongoing efforts to improve the quality and quantity of services, however, there are redundancies, gaps and needs in existing services. Likewise, despite the fact that each county organizes their transportation program differently, our assessment suggests that many of the service redundancies, gaps and needs in each county are similar. For example, in nearly every case, municipal public transit services exist, human/social service transportation programs (i.e., ADRC, MCTP, etc) and medical assistance transportation programs overlap. As mentioned above, several operators carry each others clients.

Service gaps and needs across the mini-region also share similarities, including:

● **Evening and weekend services are limited.** Significantly fewer services are available during evenings and weekends. While most public transit and shared-ride taxi services offer some weekend day services, there are fewer hours as compared with weekdays. Specialized human service transportation is typically not available during evenings or weekends, unless volunteer drivers are willing to drive during those times.

● **Employment needs are under-served.** Employment trips tend to be under-served, especially for retail and service sector jobs. This service gap parallels the need for evening and weekend services; second and third shift workers who wish to use community transit rarely find transportation services that can accommodate both the start and end of their shift.

● **More rural and inter-city services are needed.** Rural and inter-town services that connect residents in the rural areas with regional service centers are needed. Low population densities mean rural routes are difficult to provide cost-effectively, but there are transit dependent individuals living in rural areas.

● **People want to travel across county boundaries.** Stakeholders noted that many travelers need to travel across county boundaries to access the nearest medical, employment and shopping centers. Most funding sources restrict service providers from cross county borders, however. Part of this service gap will be addressed when Marathon and Wood Counties combine programs.

Ideas to improve service delivery and coordination

The individual transportation programs in Marathon, Wood and Portage Counties are well coordinated. They also offer interesting case studies because each county has taken a different approach to coordination. Each county, therefore, provides different lessons and opportunities for coordination.

Marathon County, for example, has combined nearly all human service transportation services under a single contract that is operated by the North Central Health Care. The program has achieved a high level of coordination, combining a wide range of federal and state funding resources into a streamlined service delivery system that is able to meet the demand for transportation cost-effectively. This system is also customer-friendly; individuals needing a ride are able to use a single point of contact to access a wide range of human services oriented transportation. Despite such success, however, some stakeholders are left out of the coordination dialogue and thus service coordination starts to break-down between these organizations.

Wood County is also well organized and coordinated. ADRC specialized transportation is efficient, using a combination of agency resources and volunteer drivers to stretch limited funding. The ADRC also works well with other (shared-ride taxi and private, for-profit) providers, sharing clients and resources as needed. Similar with Marathon County, coordination efforts are being led by the ADRC and are largely focused on improving transportation to human service clients. Consequently, medical assistance and trips for job training and employment are not folded into the coordinated system, nor are they adequately served.

Portage County is currently undertaking increased efforts to improve the coordination of transportation resources. The existing network is challenged by divisions between some service providers that have led to service overlaps and multiple systems serving similar clients.

Despite differences in each county, there are several ways coordination could be improved:

- In all three counties, key stakeholders are left out of coordination discussions and planning. As a result, despite improving service delivery for some populations, access to service for other groups is diminishing. Interested stakeholders should be included in coordination planning.

- Some counties have multiple volunteer driver programs providing similar services. Consolidating programs offers potential to strengthen the pool of volunteers, creates potential for increase for ridesharing and offers potential to improve benefits extended to volunteers.

- Despite political boundaries, in many ways the communities in Marathon, Wood and Portage Counties function as a single region. Several services, including medical care, shopping and human services are shared between Wausau, Stevens Point, Wisconsin Rapids and Marshfield. While some public transportation service will cross county lines, most services that cross county borders are provided by volunteer drivers and are largely limited to medical trips.

- Examine the potential to permit fixed-route operators to run regularly scheduled urban, rural and shuttle services; paratransit and demand response services may be operated through human services; encourage travel training to ensure lowest costs modes; integrate taxi services in portfolio.

Lessons from the Marathon/Wood/Portage Mini-Region

- **Effective coordination efforts require participation from all stakeholders.** Some stakeholders and partners in the transportation service delivery network are not actively working together, often due to historical conflicts between organizations and other times resulting from disagreements about how (and who) should provide services. It is important, therefore, that coordination committees require ongoing participation from all major stakeholders, and members need to pledge to work together through personal differences.

- **STRAP grants offer resources to build momentum and support for coordination.** Both Marathon and Wood Counties and Portage County used STRAP grants to create coordination plans and identify clear strategies that would help them improve transportation services. The momentum to continue with identified efforts was observed among both efforts; Portage County is seeking funds to support a mobility manager and the Marathon/Wood planning efforts to consolidate service are underway.

- **Changes in human service delivery models present both an opportunity and a challenge for human service transportation providers.** As the state of Wisconsin moves forward with new health care and Medicaid initiatives such as family care and care management organizations and as other services consolidate, more individuals will participate in day programs and services, thus creating an increased demand for transportation services. As services rely on the community transportation network, transportation providers will increasingly be required to provide accessible and effective transportation services. Resources for the services, however, are unlikely to keep pace with demand, putting more pressure on existing services. Coordination tools, therefore, are critical to making these programs work.

- **Specialized transportation providers are often leading coordination efforts.** As human service delivery networks change, human service transportation providers are frequently leading coordination efforts, rather than public transit providers. Public transit operators, medical assistance providers and workforce development staff however, need to be involved in coordination efforts, to ensure that new service redundancies are not created and services are designed and operated in the most efficient models possible.

Chapter 9. Ozaukee County

Overview

Ozaukee County is a largely rural county located in eastern Wisconsin along the coast of Lake Michigan (See Figure 9-1). According to the 2006 U.S. Census, the county had a population of 86,321 people. The largest community within Ozaukee County is Mequon with 21,823 people. Other larger communities in Ozaukee County include Grafton and Cedarburg. Port Washington, the county seat, has a population of about 10,467 (2000 Census) and is approximately 30 miles north of downtown Milwaukee; in the past several years Port Washington has increasingly been incorporated into the Milwaukee urbanized area.

Figure 9-1 Ozaukee County
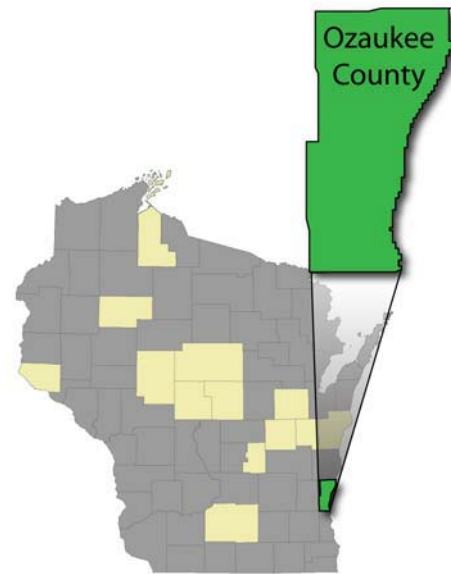
Inventory of Existing Services

The two public transit services available to residents of Ozaukee County are a countywide transit service and a shared-ride taxi program in Port Washington. Older adult facilities also provide transportation in the area, but these services are prioritized for residents or clients of social service programs. The two primary transportation providers operate service as follows, with additional information provided in Figure 9-2:

- **Ozaukee County Transit** – Ozaukee County Transit, administered by Ozaukee County Public Works Department, operates a combination of demand response and fixed-route service for the general public in Ozaukee County. Fixed-route service consists of a weekday express bus route running between Port Washington and Milwaukee. Most passengers use the route to get from Ozaukee County to work in the Milwaukee suburbs and in recent years, ridership has increased. During the first full year of service in 1997, the route provided 80,308 trips. Since that time, annual ridership has nearly doubled with 115,491 one-way trips (CY 2006). Funding for Ozaukee County Transit was $2.2 million in 2006, inclusive of federal 5307, state 85.20, local contributions and passenger fares.

  In addition, Ozaukee County Transit shares operation with a private for-profit transportation company to provide demand response shared-ride taxi service throughout the county. Annual weekday ridership on the shared-ride taxi in 2006 was 64,274. Of those trips, approximately 55% required wheelchair transportation.

- **TransPORT** – The city of Port Washington administers a shared-ride taxi program that is operated by a private transportation company. The service includes trips with both origin and destination within two miles of the city's 3.85 square mile jurisdiction. The City Administrator estimated that TransPORT provided approximately 21,000 trips during 2006 and was funded with $237,565 of federal (5311), state (85.20) and local grants as well as passenger fares.

Figure 9-2 Community Transportation Services in Ozaukee County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Size	Use of Federal/State Funds
Ozaukee County Transit	Fixed-Route and Demand-Response	General Public	Demand response service in Ozaukee County is door-to-door. Fixed-route service includes bus stops in Ozaukee and Milwaukee Counties	Demand Response: Weekdays 6 am to 6 pm; Saturdays 8:30 am to 6 pm; Sundays 8 am to Noon Fixed-route: Weekdays 5 am to 9:30 pm	Non-accessible: 5 cars/wagons 1 van Accessible: 10 vans and 5 buses.	5307; 85.20
TransPORT Taxi	Demand Response	General Public	Demand response service within two miles of Port Washington city limits	Mon.-Thurs. 7:30 am to 6 pm; Friday: 7:30 pm to 9 pm; Saturday 8:30 am to 6 pm; Sunday: 8 am to Noon	Non-accessible: 1 minivan Accessible: 1 van	5311; 85.20

Existing Coordination Efforts

At this time there are no formal coordination efforts in Ozaukee County. A coordination committee was created as part of the SAFETEA-LU process, but no regular meetings have occurred. There is, however, informal coordination activities taking place, including:

- Ozaukee County Transit participates in joint purchasing of tires with the Wisconsin Highway Department. It also purchases vehicles through state contracts to obtain a reduced purchase price.

- Ozaukee County Transit created an express route with Milwaukee County Transit, primarily for employment transportation from Ozaukee County to the Milwaukee suburbs. As employment trends changed and new job opportunities moved into Ozaukee County, the route adjusted to meet the new demands. Currently, most passengers travel from the Milwaukee suburbs to work in Ozaukee County. One-half of the stops for the route are in Milwaukee County and one-half are in Ozaukee County. Ozaukee and Milwaukee County Transit Systems worked together to establish the route in an effort to meet local employment transportation needs for lower-income residents.

Service Redundancies, Gaps, and Needs

Unlike other counties, transportation in Ozaukee County is provided through a countywide demand response and fixed-route system plus municipal based shared-ride taxi operations. Despite such limited options, service redundancies occur. Indeed, there is an overlap in service between TransPORT and Ozaukee County Transit shared-ride services for trips that originate or terminate in Port Washington. TransPORT and Ozaukee County do not coordinate transportation schedules or trips even when service is to common destinations. There is potential, therefore, for trip duplications whenever one end of an Ozaukee County Transit trip is within the TransPORT service area. Through minimal coordination efforts such as sharing schedules and trips, this duplication in service provided within Port Washington and the surrounding areas could be significantly reduced or eliminated.

There are also needs for additional services and gaps in the existing portfolio.

- **Service hours are limited.** Weekday and Saturday services in Ozaukee County and Port Washington are not available after 6:00 pm. Ozaukee County Transit had planned for service increases in 2008, but county funding shortfalls for 2008 will lead to limitations on service hours and a reduction in the number of vehicles and staff available for Ozaukee County Transit's demand-response transportation and express route.

- **There are few services for rural residents**. The only regional transportation option is the express bus route between Ozaukee and Milwaukee Counties, no other rural or inter-city service is available.

- **Lack of medical transportation services** - Ozaukee County Transit provides dialysis transportation and transportation to appointments with medical specialists. Other medical transportation services, however, are provided only by hospitals or ambulance. There is no local medical assistance transportation services located in Ozaukee County.

Ideas to improve service delivery and coordination

Coordination efforts in Ozaukee County are prevented by several issues. The lack of tax levy increases and other local funding constraints, for example, limit an agency's ability to keep pace with increasing demand as well as limit opportunities to expand service hours or increase the number of vehicles available. Another key barrier to coordination efforts are limitations tied to the use of local funding, which do not allow funds to cross jurisdictional boundaries. Consequently, Ozaukee County Transit struggles to meet the demand for transportation services with it's existing local resources while the possibility of sharing trips with TransPORT and local private organizations is weak because local funds are limited by municipal and county boundaries.

A further hindrance is the limited local capacity to devote time and resources to coordination planning. Ozaukee County Transit has limited staff and is consumed by keeping pace with day-to-day responsibilities. A recent tri-annual review found that Ozaukee County Transit was understaffed by five full-time employees. It is possible that with one additional employee, Ozaukee County Transit could shift more time and energy toward improving coordination and cooperation. Despite such limited staff resources, Ozaukee County could benefit from a coordination committee or team that actively works to improve local and regional coordination among transportation providers. Ideally, this committee would include representatives from Milwaukee and Washington Counties so that strategies for coordinating trip schedules that would improve efficiency of all providers and better serve the county as well as the region could be formulated.

Other projects that would offer potential to improve coordination efforts include:

- Conduct local meetings and surveys with transportation providers, the general public, and human service agencies with the goal of understanding unmet transportation needs, and duplications in service, and establishing short- and long-term coordination goals.
- Inform the Public Works Department, which oversees Ozaukee County Transit, about realistic strategies for meeting the identified unmet needs through reducing duplications and overlaps in service, and improving efficiency of the county's resources with actions such as coordinated trip scheduling with TransPORT. Provide tangible cost benefit analysis for the Public Works Department to support this information.
- Obtain funding commitments from local officials to provide local match that supports a mobility manager to lead the coordination efforts.

- Conduct a cost benefit analysis with human service agencies that serve consumers who would benefit from coordinated transportation to demonstrate how that agency's budget for transportation may be more efficiently utilized through coordination strategies.

Lessons from Ozaukee County

- **Without dedicated resources for public transportation, especially in rural areas, funding for community transportation is challenged.** Ozaukee County transportation programs are limited by the ability of local governments to raise funds and prioritize transportation. Funding is always a challenge and it is challenging for local operators to expand programs, even as demand increases.

- **Limited funding means few resources are available for coordination.** As transit agencies are squeezed for funding, there are few, if any, resources available to devote to coordination. This is true, even in cases where staff understands the potential benefits of coordination strategies.

- **Strings attached to local funding limits coordination efforts**. Local jurisdictions often limit where and how locally raised funds can be used. This means that some communities will not pay for services that go beyond their immediate boundaries. Accordingly, developing a coordination transportation service that addresses regional needs is challenged.

Chapter 10. Pierce County

Overview

Pierce County is located on the western edge of the state on the border with Minnesota (see Figure 10-1). It is part of the Minneapolis urbanized area. It is also close to Rochester, Minnesota, location of the Mayo Clinic. In 2006, the US Census recorded the population as 39,373. The county seat of Ellsworth, located in the north-central portion of the county, has a population of 2,909.

Pierce County's largest city is River Falls, which has a population of 12,560; this population is split roughly in half between Pierce County and St. Croix County to the north. Other large communities in Pierce County include Prescott, Trimbelle, Trenton and Clifton.

Figure 10-1   Pierce County
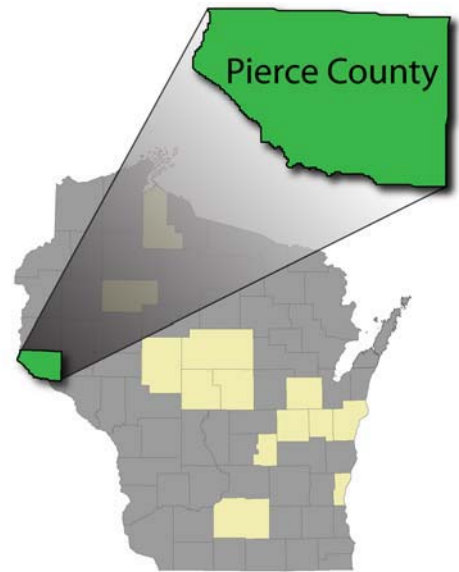
Inventory of Existing Services

There are several transportation operators serving Pierce County, including public transit, medical, and specialized transportation services. The largest providers are described below with additional information provided in Figure 10-2.

- **River Falls Shared-Ride Taxi** – Shared-ride taxi service is available for trips within a 5-mile radius of the limits of the city of River Falls. Clients may call in for a ride, subscribe to a recurring scheduled ride or flag down a ride, all with no advance notice required. The operation serves the general public but most rides are taken by elderly persons and the disabled. The service is operated by the City and contracted to Top Hat Inc. In 2006, service expenses were $256,771, funded with 5311 and 85.20 grants, local resources and passenger fares. In the same year, the service carried 24,967 rides.

- **Pierce County Health and Human Services** – The Health and Human Service (H&HS) Department of Pierce County manages a transportation program that includes county-operated vehicles and a volunteer driver program. Transportation services are funded with a combination of 85.21 grants plus contributions from the Office of Aging, the Veterans Service and other programs. While two vehicles are used exclusively for meal delivery and trips to nutrition sites, there are few limits on trip purposes. Services are available to persons over age 60 and persons with

disabilities, as well as H&HS program participants. Transportation funding comes through federal 5310 grants, state 85.21 grants, and passenger donations.

- **Western Wisconsin Center for Independent Living** – WWCIL uses a combination of van services and volunteer drivers to provide transportation resources to persons with disabilities. WWCIL has an ongoing contract with H&HS such that H&HS provides all rides requiring accessible vehicles. WWCIL will provide trips for any purpose. In 2006, they provided approximately 6,500 trips, of which 17 were lift-equipped rides. Funding for the program is provided by 85.21 grants, Medicaid, and contributions from the United Way and other non-profit organizations.

- **Private providers** – There are a number of private transportation providers who serve Pierce County, and many of these serve multiple county areas. They may offer Medicaid rides as well as services to the general public for private-pay or rides paid by private medical insurers (typically one-time rides). Some of the companies serving Pierce County include New Richmond Transport, Medivan, Pine Creek Transportation and Ambu-Lift Transport.

Figure 10-2   Community Transportation Services in Pierce County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Size	Use of Federal/State Funds
County Health and Human Services	Human service	Elderly (60+) and H&HS program participants	Elderly and disabled dial-a-ride; sheltered workshop transportation	8 am – 5 pm Weekdays	14 (5 accessible, 9 non-accessible)	5310 for vehicles; 85.21 & Title IIIB for operations
River Falls Shared-Ride Taxi	Shared-ride taxi	General public	Door-to-door service within a 5-mile radius of city limits	7 am – 8 pm Weekdays; 8 am – 8 pm Weekends	3 total (2 accessible vans and 1 non-accessible sedan	City of River Falls owns vehicles purchased through 85.21 funds. Operating funds from 5311 and 85.20.
Western Wisconsin Center for Independent Living	Human Service	Persons with disabilities	Demand response service, all trip types	Varies	1 van	85.21, Medicaid
Private Providers	NEMT	Medicaid / none	Door-to-door services for private or Medicaid pay	Varies	Varies	Medicaid
County Veterans Services	Human service	Veterans – trips to VA hospital	Trips to and from VA hospital	Daytime hours, 5 days per week	Uses H&HS vehicle pool	Occasional use of State Veterans Affairs grants

Existing Coordination Efforts

Pierce County coordination efforts include both formal and informal efforts.

- **St. Croix Valley Transportation Coalition** – This formal coordination committee began in early 2007 as an effort to unite transportation services between Pierce and St. Croix Counties. To date it has held five meetings. The committee consists of transportation providers, human service agencies and community stakeholders. Their goal is to extend services to those people who do not qualify for transportation under existing systems – for example, a job-seeker who cannot afford the cost of a car but because of status does not qualify for rides under Elderly and Disabled services provisions. Current efforts include an inventory of available services and a STRAP application to fund a full-time transportation coordinator position.

- **Area Consortium on Transportation** – Another organization, the Area Consortium on Transportation (ACT), is a coordinating body that represents a 10-county area including Pierce and St. Croix. There are some 36 agencies represented on the Consortium, but attendance is usually about 10-12 individuals. This committee has also applied for grant resources to support their efforts and is currently on hold until it can regain a funding stream.

Informal coordination efforts include the pooling of transportation resources internally among county departments, creating a system with shared resources. Transportation needs are channeled through a central resource person at the Office of Aging, who draws upon the common vehicle fleet. This system also extends to other providers; thus some organizations, such as the Western Wisconsin Center for Independent Living (WWCIL), are able to avoid having to purchase a new lift-equipped vehicle or hire a trained driver because of an agreement with the county.

An Aging and Disabilities Resource Center (ADRC) is currently being formed and will include Pierce County. The ADRC will group together certain services for these populations in a "one-stop shop" and may include a number of the surrounding counties. Discussions as to the role and relationship of the ADRC with regards to transportation have not yet been initiated.

Service Redundancies, Gaps, and Needs

Among the most significant service redundancies and service needs are those within the medical assistance transportation program. Services are currently split between the county's volunteer program and multiple private companies, depending on user preferences. Without a unifying service to distribute trips, two similar trips could potentially travel to the same place at the same time. Medicaid reimbursement rates are insufficient for longer distance trips, common in rural areas, and do not cover costs associated with providing service. Increasingly, therefore, private operators are not carrying Medicaid clients.

Pierce County's greatest overall community transportation need is to build a cohesive network of services that spans both urban and rural areas and communicates a clear system for the types of specialized services available. In addition to this broad need, there are additional gaps and needs in the existing portfolio of services:

- **There is lack of rural services, especially for the general public.** Rural areas and most towns in Pierce County do not have access to public transportation. Thus, there is a need for both local and regional transportation in rural Pierce County.

- **Service hours are limited.** Service hours for both the River Falls shared-ride taxi and the H&HS service are limited to weekday, daytime hours. Evening and weekend services, therefore, are not available.

- **There are few resources available for quality of life trips.** Although some basic life maintenance trips are served regularly for elderly and disabled persons through the H&HS programs, there is a gap in affordable social, recreational and other "non-essential" trips.

- **Fewer operators are willing to provide medical assistance trips.** Medicaid reimbursement rates do not cover the costs to provide the services, thus private sector partners are increasingly unwilling to transport these individuals. As private operators drop out of the service network, remaining operators will be increasingly hard pressed to meet the demand.

Ideas to improve service delivery and coordination

One of the strengths of the Health and Human Services programs is that they have a single resource person who handles transportation services delivery, resulting in a higher level of efficiency than could be achieved by multiple departments acting independently with separate vehicle pools. Some of the recommendations to improve other aspects of transportation services in Piece County include:

- **Fund a regional coordinator position** – Several stakeholders indicated the need for a regional coordinator position to support the St. Croix Valley Transportation Coalition. Dedicated staff would add an element of consistency to the process and enhance the regularity of meetings even when the workloads of individual members fluctuate.

- **Integrate private operators into the transportation network** – Pierce County has a significant asset in its numerous private providers, which are currently limited to Medicaid trips. Working more closely with private providers offers potential to expanding the availability and coverage of service. To do this, private providers should be actively included in transportation coordination discussions. In addition, creatively consider where private transportation companies may be able to offer value in service production.

- **Prioritization of coordinated projects** – One respondent suggested that the state of Wisconsin could reward coordination efforts by prioritizing funding for those projects which have come out of actively coordinated systems.

- **Tie together the work of the ACT and the St. Croix Valley Transportation Coalition** – ACT's extensive history and expertise in collaborative transportation could be paired with the Coalition's smaller geographic focus and local partners to help stabilize the latter's effort and create even stronger ideas and solutions than could be accomplished independently.

- **Provide incentives for coordination and collaboration** – Current legislation mandates, but does not provide resources or incentives for cooperation between cities, counties, non-profits, for-profits and agencies. Offering a tangible incentive for collaboration will increase the willingness of a broader range of stakeholders to work together, and in a more focused manner.

Lessons from Pierce County

- **Agency staff is busy and coordination requirements, including grant writing, strain available personnel resources** – Several agency staff indicated that the coordination effort, including grant-writing process requires too much time out of daily ongoing job responsibilities. As a result, staff struggle to meet daily responsibilities and coordination requirements. One respondent suggested that, in addition to funding a formal coordination organization position, the state could also help new efforts by aiding in or streamlining the grant process.

- **A guide to State transportation funding could help counties with small staff and limited resources** – A guide to navigating transportation funding options is an absolute necessity for small organizations with a desire to coordinate or extend services but have few extra resources to cover the costly process of researching and understanding grant opportunities. The guide should explain what funds are available, what they cover, what they exclude and why. It should be written for all agency and non-profit audiences.

Chapter 11. Rusk County

Overview

Rusk County is a rural county in the north-west area of Wisconsin (see Figure 11-1) on the Flambeau River. In 2006, the US Census Bureau estimated the population in Rusk County at 15,627. Ladysmith, the county seat, is located in the geographic center with a population of 3,932 (US Census 2000). Other towns include Conrath, Bruce and Weyerhaeuser; most of the major towns are located along State Route 8, the primary east-west route through the county. Ladysmith is approximately 60 miles northwest of Eau Claire, the nearest large urbanized area.

Figure 11-1 Rusk County
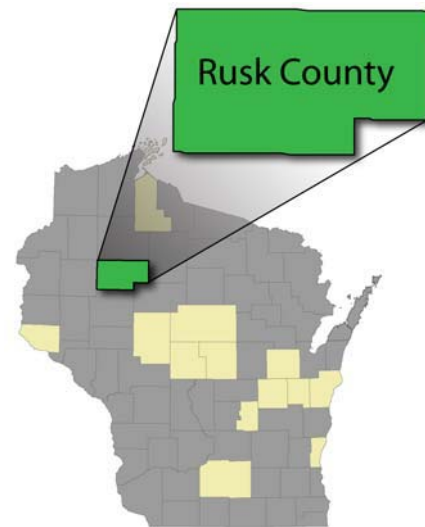
Inventory of Existing Services

Transportation services available to residents of Rusk County include public transit as well as specialized transit services available to certain eligible segments of the population. The largest providers are listed here; additional details regarding funding are provided in the following section:

- **Indianhead Community Action Agency** – Indianhead Community Action Agency ("Indianhead"), a private non-profit social service agency, is the largest provider of transit in Rusk County. It is headquartered in Ladysmith and operates a deviated fixed-route bus service serving major towns along State Route 8 and demand response services for both the general public and for clients requiring accessible services. The service for elderly and disabled customers requires day-ahead reservations and uses volunteer drivers. Any type of trip may be made on these services, although trips made by elderly and disabled customers on the demand response service have booking priority. They also operate a Wednesday morning shopping shuttle specifically for the elderly and disabled.

  Indianhead's general public transit service provided 20,465 rides in 2006, using $291,082 for operating expenses. Funding came via the city of Ladysmith and included federal 5311 and state 85.20 funds as well as local resources and farebox revenue.

- **Keycare** – Keycare, a private company, operates nine vans primarily for Medicaid non-emergency medical transportation as well as transportation for children to a special education school.

- **Westlake Enterprises** – Westlake Enterprises runs transportation to a sheltered workshop for the developmentally disabled.

Some of the other private options for Medicaid transportation in the area include Jerryvan, Health Transport and HandiLift.

Figure 11-2   Community Transportation Services in Rusk County

Service Name or Sponsor Name	Service Type	Passenger Eligibility	Service Description	Hours of Service	Fleet Size	Use of Federal/State Funds
Indianhead Community Action Agency	Public Transit / Non-Profit	General public	1 Deviated fixed-route; demand-response service throughout county; subscription services for nursing home trips; a shopping shuttle	Weekdays 7:15 am – 6 pm; Sundays 8 am – noon	Accessible: 2 sedans, 1 minivan, 1 van, 6 buses. Non-accessible: 2 vans.	5311 for city, county transportation; 85.20 for city transportation; 85.21 for E&D demand response riders; county program contracts. Currently receiving STRAP grant to reduce fares and extend fixed-route service.
Keycare	NEMT	Medicaid; general public private-pay; special education school students	Demand-response	24/7 when needed	9 vans (8 accessible, 1 non-accessible)	Medicaid
Westlake Enterprises	Human service	Mentally handicapped	Day treatment programs for the mentally handicapped	Supports agency programming	N/A	N/A
Saferide	Human service	Nightlife patrons	Alcohol safety – rides to prevent drunk driving	Appropriate hours	N/A	N/A

Existing Coordination Efforts

The Rusk County Transportation Authority (RCTA) is a coordinating committee that meets every two months to discuss transportation service issues such as ridership, complaints and service level as well as funding issues such as finances and grants. The RCTA has been instrumental in the design and on-going development of public transportation services in Rusk County.   The RCTA functions as a Board, with voting members including representatives from the County Board, a City Councilmember, the Indianhead Director and Finance Manager, a rider representative, a local school bus operator, and two participants from the county who act as advisory members (to prevent conflicts of interest). This effort has been ongoing for the past twenty or thirty years.

Regular meetings of the RCTA have resulted in service enhancements over time, including increased service coordination. For example, the committee raised and discussed the issue of affordability of quality-of-life trips for citizens with mobility impairments. Discussions led to the Wednesday shopping center shuttle service. Moreover, an add-on contract for Long-Term Care purposes was tacked on at the recommendation of one of the RCTA board members, an indication that the RCTA is a useful forum for generating ideas. The RCTA also initiated implementation of the deviated fixed-route bus service, an option that has made it much more cost-effective to serve medical trips. Challenges facing the RCTA include maintaining a high energy level and sustaining momentum for new projects and services.

Indianhead received a STRAP grant from the Wisconsin DOT to augment services already being provided. These funds have been used to increase the number of service runs of the deviated fixed-route bus through the communities along Route 8, specifically two more runs through the day and extending services to five days per week (four days per week previously). Additionally, STRAP funds are used to offset the $16 fare, bringing the cost per ride down to $3 for trips for elderly and disabled persons. The latter subsidy will continue until the STRAP funds are depleted for the year.

Service Redundancies, Gaps, and Needs

Few service redundancies exist because Indianhead manages all public and specialized transportation services including public and specialized transit contracted by Rusk County. Moreover, the county is well-served by existing transportation options, relative to its size and rural nature. The initiation of the fixed-route service to connect communities has been a valuable resource for the general public. While Medicaid trips are funded from the state to providers via the county, these trips are organized independently from other transportation, resulting in a somewhat parallel system of arranging these trips.

There are, however, limitations in service between Keycare and Indianhead. Issues include limited service hours and vehicles lying dormant during hours when usage would be low, leading to a lack of service for certain evening and weekend trips and necessitating alternative arrangements that are not always resource-efficient, such as the use of ambulances for non-emergency trips. An example of this would be when the time of a

hospital discharge is unknown and therefore cannot be scheduled in advance. This service limitation may also be due to a lack of widespread understanding that Keycare is able to serve trips 24 hours per day.

In general, most stakeholders felt funding levels are adequate to accommodate existing service needs. Others, however, suggested that the extremely high cost of providing transportation in the rural areas drew funds away from other programs. Challenges for transportation in Rusk County therefore include:

- **Services in rural areas are limited.** Many indicated that the rural nature of the county made trips served under the door-to-door program unavoidably expensive. Some indicated that subsidy of rides to make fares more affordable would result in the unintended effect of inducing more trips to be made, thus increasing the overall deficit more than the sum total of the subsidies.

- **Demand for service is increasing demand.** The proportion of elderly persons in Rusk County is expected to grow quickly and some agencies were concerned that the funding mechanisms will not adequately accommodate the rise in the population with special transportation needs. This is particularly true in the case of the upcoming changes to long-term care provision throughout the state, which will require adjustments in transportation and grant program funding.

- **Travelers need to travel across county boundaries.** Despite proximity to Rusk County, transportation services are not allowed to pick up residents living in neighboring counties and bring them across county boundaries. Although services are fairly well coordinated within Rusk County, coordination with neighboring counties could be improved.

- **Long distance trips are expensive.** The base cost for door-to-door transportation to medical appointments is $16/ride, which has been subsidized for the disabled and elderly to a greatly reduced cost of $3. However, those riders who do not qualify for rides under the county programs and cannot make use of the deviated fixed-route buses face prohibitively high fares. This particularly affects elderly and disabled persons for non-essential "quality of life" trips, as well as the general public. Rural low-income persons are also affected.

Ideas to improve service delivery and coordination

Rusk County is fortunate to have a single coordinating body that covers the majority of transportation services provided in the county, the RCTA. The RCTA ensures that recommendations stemming from its meetings reflect the existing dynamic between stakeholders; involves multiple levels and departments of government; and keeps participation high and players at the table. Partly as a result of the work of the RCTA, the transportation services provided by Indianhead Community Action Agency and Keycare are significant assets to the community and are highly accessible. The availability of services to the general public provides a critical support even for those who do not have an ongoing need for services but do need services temporarily. The local public image of the bus service is very strong.

Our primary recommendation for coordination efforts in Rusk County is to reinforce the strength of the existing RCTA and build upon its successes. Short-term tasks and goals for the RCTA may include:

- Continuing to identify and document remaining transportation needs in the community, particularly with regards to rural clients and groups with fewer financial means. The committee may also evaluate needs to determine if a lack of awareness results in some unmet need and determine if funds are available to meet demand for service and/or make existing services available to a wider segment of the population. Next steps would be to agree on local funding sources and apply as a region for state and federal resources.

- Identifying transportation services available in neighboring counties and explore potential partnerships that may alleviate territorial issues that stymie efficiency, reduce service levels and increase costs. One strategy would be to invite providers from neighboring counties, especially those with whom boundaries are sometimes an issue, to a special meeting of the RCTA to discuss potential options for collaboration.

Lessons from Rusk County

- **Regional transportation resources offer advantages and disadvantages.** Working with multiple counties could be a significant step to improving efficiency and removing service overlaps. This may be especially true in rural areas where the nearest regional services may be in an adjacent county. Conversely, there was concern about regionalizing transportation—by creating services that span multiple counties, services might not reflect local needs.

- **Coordination committees are effective at improving transportation services.** Establishing a strong coordination committee that meets regularly and includes the full range of stakeholders is essential to developing a comprehensive and responsive transportation program. Respondents indicated that getting more voices at the table would be a positive and beneficial step.

Chapter 12. Key Findings

The objective of this task is to examine coordination efforts in eight counties and two mini-regions and to identify problems, gaps, barriers and describe existing coordination efforts within each county and region. While the sample of 14 counties is only a portion of the 72 counties in Wisconsin, we experienced a broad spectrum of service delivery models, a wide variety of coordination activities, and a range of interest and support in coordination. We were also able to appreciate relationships between existing providers and program managers and learn how community transportation service providers are responding to changes in the delivery of human and medical services. While many counties and regions experience unique opportunities and challenges, we also observed considerable commonality among experiences. We observed patterns in the way community transportation services are provided as well as how coordination efforts are approached. We also observed consistent trends in which coordination topics and challenges divided rather than united stakeholders, and in what circumstances coordination can be effective.

We examined these patterns more closely to understand how they may influence the statewide coordination model. Our initial step was to categorize key findings into four main groups:

- **Service Organization and Delivery** – examines how the organization and management of transportation resources supports or detracts from coordination.

- **Funding** – reviews issues associated with how transportation services are funded and the impact of these issues on coordination efforts.

- **Regional Resources** – discusses the opportunities and challenges associated with creating a more regional-based delivery system.

- **Tools and Techniques** – presents the preferred and most successful coordination strategies observed in the field.

Service Organization and Delivery

As discussed in the first technical memorandum issued as part of this study, the state of Wisconsin largely funds transportation services through federal and state grants to public transit operators and through state grants issued to county and tribal Aging Units. Grants to transit operators support public transportation with resources focused on urbanized areas. State transportation funding to Aging Units is intended to provide specialized (usually demand responsive, door-to-door) transportation for older adults and persons with disabilities. Medicaid, the third largest provider of transportation services, does not provide resources to an organization, but certifies providers and allows clients to choose their preferred carrier. Consequently, Medicaid resources are not used to directly fund a particular transportation program.

Service delivery models and service organization refer to the way transportation services are provided to members of the public or special populations. Because the funding sources for the three primary transportation programs (public transit, specialized and

Medicaid) are different, service delivery models are different. In a single county, for example, public transit may be available within an urbanized area, demand response transportation for older adults and persons with disabilities may be provided by the county, and medical assistance transportation by a private contractor. The relationship between these three primary service providers and how the individual services are organized has a direct impact on the current level of coordination. Our field work led us to the following observations:

- Service delivery is fragmented in Wisconsin, even in rural areas with limited services and providers. In nearly every county and region examined, separate services were available to members of the general public, older adults and persons with disabilities, human service agency clients and Medicaid clients.

- In many parts of Wisconsin, there are few services that straddle county boundaries, despite an obvious need for such services. In many cases, it is also difficult to travel between communities within a single county.

- Typically, it is either a human service organization or county department that is leading coordination efforts in many areas. In several counties, county departments have worked together so that all (or most) county-funded transportation services are coordinated through a single department or individual. Frequently, this organization model is successful, increasing the quality and quantity of service. Our experience suggests, however, that the model is less effective at bringing together a wider group of stakeholders such as public transit operators, medical assistance providers and/or workforce development efforts.

- In some parts of the state, public transit operators are either left out of coordination efforts or not sure of their role in coordination efforts. Our experience in the field showed, however, that in other places public transit operators are actively involved in community transportation services and coordination efforts. In these areas, public transit resources both in terms of providing fixed-route transportation and ADA complementary paratransit services, led to a more comprehensive transportation network with fewer unmet needs and duplicative services.

- In most cases, Medicaid and medical assistance transportation programs are provided by private operators. For this and other reasons, most medical assistance transportation services operate independently from other public and specialized programs and do not participate in local coordination efforts. We did observe exceptions, largely when a single private operator held contracts for more than one service and was encouraged to commingle trips. For the most part, however, Medicaid transportation is not coordinated with other transportation resources. Moreover, in many counties, there is little or no attempt to assign trips to carriers in a strategic fashion that allows for commingling. The reasons for this are multi-fold and include historic barriers between programs and different service delivery models (i.e., individuals are funded with transportation resources and choose service). As medical care service delivery models change, however, the need to incorporate medical assistance resources into existing transportation networks will increase.

- Some federally funded programs have included coordination requirements for several years; these coordination requirements are particularly relevant to urbanized areas. Many of these requirements, however, have not been seriously implemented or enforced. Some grant recipients, especially private non-profit organizations, have not felt compelled to participate in coordination efforts and operate their services independent of publicly-sponsored services. By enforcing existing (and future) coordination requirements, some organizations can be encouraged to participate in coordination discussions and efforts.

Funding

Funding is at the heart of coordination. Indeed, coordination strategies are designed as tools to improve the cost effectiveness and efficiency of transportation services. It is not surprising, therefore, that funding is a significant barrier and challenge to coordination efforts. Funding is a barrier to increased coordination in a variety of ways, including:

- Local governments are challenged to raise matching resources for existing services. As a result, despite the availability of federal and state grant programs to expand services, some communities are unable to take advantage of such programs or must use them for capital programming only. Only a handful of communities and service providers have successfully used coordination strategies to leverage the full portfolio of non-federal transportation resources (i.e. 85.21 and Medicaid) to craft new services. Obstacles to linking transportation resources include limited opportunities or willingness to work together and/or a clear understanding of how to link and leverage funding sources.

- Financially stretched local government translates to limited staff resources who, in turn, are challenged to meet the demands associated with increasing coordination requirements. People in the counties do not always have the time to fulfill their existing responsibilities, making it difficult to devote the time and energy required by coordination efforts and requirements.

- Constraints on local funding in terms of how funds may be used and/or where services may be provided make it difficult for services to transport individuals across political boundaries. Accordingly, it also makes pooling resources for programs that straddle political boundaries challenging (including both cross-county and intra-county). This is true for municipalities and county governments.

- Some counties and regions do not fully understand state funding and grant procedures. Developing a guide to transportation funding for human service and workforce development agencies may help expand awareness and increase opportunities.

Regional Resources

Designing regional transportation service systems is an idea that has been at the forefront of transportation planning in the state of Wisconsin for several years. Public transit operators are interested in developing a stable funding source that reflects a logical service catchment area, rather than political boundaries. Despite a strong interest in developing

regional transportation authorities, the state legislature has been reluctant to award authority to create new government entities.

Coordination efforts are likewise intertwined with regional service delivery models and offer potential to both support and undermine efforts. In some parts of the state, especially rural areas, counties are already working together to design and implement regional transportation services to reflect the fact that resources and services, such as hospitals, shopping centers, airports and human services, are provided regionally.

It is essential that as regional transportation systems are designed, they consider and reflect public transit operations, specialized and medical transportation services. There is a multitude of operating models that accommodate individual service requirements to create a regional service network where the service types co-exist and coordinate smoothly. Any number of models may be acceptable. The key ingredient to potential future regional service systems is that they are designed to include rather than exclude partners and services.

Tools and Techniques

Our experience in the field revealed that the single most effective tool at promoting and developing coordinated transportation services is an active coordination committee that meets regularly, has an active membership and is charged with a clear mission. Because coordination requires working together with a variety of funding sources and transportation programs to improve service delivery, it is logical that meeting regularly and working together will lead to coordination success. Without regular interaction, most obstacles stalling coordination increase over time rather than dissolve. While different models exist, the key characteristics of a successful coordination committee include regular on-going meetings, commitments from participants, at least one champion for coordination and a clear process for developing an action plan to address unmet needs and service duplications. Some committees were less inclusive than others, but nearly all were able to improve some aspect of their local transportation services.

Opportunities and Obstacles

Our analysis of these findings has helped us identify opportunities for promulgating, improving, and expanding coordination strategies within the state. The process also led us to key obstacles that appear to be stalling or preventing additional coordination efforts.

- Ongoing coordination committees are essential to developing healthy, well-coordinated community transportation services. Our field work showed that in nearly every county where an organized and managed coordination committee met regularly, there was significantly more communication and cooperation among stakeholders. Thus, the level of service integration and quality of service was considerably higher.

- Wisconsin transportation funding provides resources to different entities for similar purposes (85.20 and 85.21 plus Medicaid and small pots of HS funding for transportation). This has effectively created (in some areas) multiple systems offering

similar services, i.e., service duplication and differentiation has been institutionalized by these funding sources.

- There are federal coordination requirements for organizations that receive federal 5310, 5316 and 5317 grants. These requirements are typically applicable only in the more urbanized counties and regions in Wisconsin; in cases where the requirements exist, they are not always enforced. While the 85.21 grants encourage some coordination between public transit and human service transportation through ADA complementary paratransit services, these links are not strong. Consequently, there are few or no funding or statutory requirements to ensure that human service transportation programs are coordinated with public transit, medical and workforce services.

- Many counties in Wisconsin are not yet seriously pursuing coordination as a strategy to improve community transportation services. Indeed, the State of Wisconsin has not provided clear, consistent direction on their expectations for coordination. From the counties perspective, there is a:

    – Lack of clear direction for what and how to coordinate

    – No rewards/financial incentives for coordination

    – Few meaningful consequences for not coordinating

    – Lack of good operational model of effective transit-human service coordination

    – Lack of administrative support systems for coordination, such as consistent reporting requirements and streamlined grant applications

- Providing transportation resources on a regional level (including both cross-county and intra-county) will become increasingly important for Wisconsin. Coordination discussions and efforts should help communities meet these needs; likewise as longer term regional service delivery models are developed, they should reflect the full range of community transportation needs. Potential strategies include creating regional funding sources, providing financial incentives for collaboration and providing technical assistance to help communities overcome limitations associated with using funds raised locally for services provided regionally.

- Resource constraints and increasing demand are encouraging human service agencies to coordinate transportation as part of consolidation of other human service programs (mainly through the creation of ADRC, family care and care management organizations). As human service programs coordinate, there are few incentives to encourage them to work with external partners (such as public transit or workforce development), thus these efforts tend to be insular to agency partners. This approach, while improving some programs, creates barriers and undermines coordination efforts among other programs and stakeholders.

- Regional Planning Commissions (RPC) frequently are not directly involved with the administration or oversight of human service transportation programs. They do, however, offer critical resources in terms of brokering partnerships among stakeholders, bringing a regional perspective to the table, preparing data and mapping analyses and, playing an important role in longer term solutions via their

role in regional land use planning. Future coordination models, therefore, should actively involve RPCs in coordination strategies and efforts.

Chapter 13. Recommendations for Future Assessments

As part of the county assessment field work, Nelson\Nygaard and RLS & Associates developed an "assessment tool" that we used to guide our interviews and data collection efforts as we visited counties and regions across the state. A copy of this tool is included in Appendix A. The assessment tool was largely effective at ensuring our team of researchers collected consistent information from a variety of stakeholders operating in different circumstances. At the same time, the assessment tool allowed researchers flexibility to probe in different areas and explore unique coordination elements as they were uncovered.

While the assessment tool supported the field work carried out for this study, it was not, in and of itself, an adequate tool for counties to examine their own coordination efforts, nor would it stimulate coordination planning. As a result, the Nelson\Nygaard and RLS team worked with WisDOT staff to develop a communication/assessment process that could be used by regional planning commissions to work with coordination stakeholders and help stakeholders assess current needs and gaps in services, identify service redundancies and prioritize future coordination strategies. This communication strategy is also designed to support counties as they update their coordination plans in 2008. Lastly, as counties are led through the assessment process, it is our hope that the process will have a catalytic effect on stakeholders and encourage them to establish ongoing coordination meetings. The process is not, however, a guide to creating ongoing coordination councils.

Overview of Communication Strategy

The process includes two meetings, each with its own agenda and objective. It is understood that regional planning commission (RPC) staff will be primarily responsible for organizing and facilitating these meetings, as well as administering a survey, tabulating data and creating maps as needed. WisDOT staff will assist by providing a toolkit detailing the process. In addition, if multiple counties ban together to conduct coordination planning, DOT staff will support meetings at a greater level, including attending and participating in discussions.

Meeting 1

The objective of the first meeting is to provide an overview of the coordination committee purpose and goals, establish federal and state requirements for coordination and explain the coordination planning process. Meeting participants will also discuss existing transportation resources, current coordination efforts, and will discuss what the committee feels are current service needs and gaps. At the end of the first meeting, facilitators will distribute a questionnaire, which is based on the assessment tool included in Appendix A. This meeting will require approximately two hours.

Data Analysis after Meeting 1

As participants leave the first meeting, they will be asked to fill out a questionnaire. In addition, RPC staff will send the questionnaire to other known transportation providers, including human service, medical, workforce and private operators. The RPC will tabulate survey results and if necessary, create maps of services.

In addition, between meetings, WisDOT will give RPC staff a 'menu' of coordination strategies that provide fundable options future coordination actions. The coordination strategy handbook will be provided to meeting participants at the second meeting.

Meeting 2

The objective of the second meeting is to develop and prioritize a list of potential strategies for the county or region. To achieve this objective, RPC staff will present the survey results and lead a discussion of existing services. This discussion will be based on real data and should include an examination of areas where services overlap and where there are needs and gaps in existing options. Results from the data can be compared with perceived gaps and needs identified in the first meeting. Building on this discussion, RPC or WisDOT staff will present some coordination strategies and lead brainstorming sessions to identify locally appropriate strategies that address current challenges. Through this process, the committee will generate and prioritize a list of potential projects. The need for future meetings and follow up actions may also be discussed. This meeting will require a minimum of two hours.

APPENDIX A
ASSESSMENT TOOL

Assessing Coordination at the Local Level

Objective: *To develop, test and finalize an assessment process to gauge and evaluate coordination status. Use assessment tool to evaluate current coordination efforts at selected counties and mini-regions and develop an understanding of coordination perspectives and priorities in these areas.*

This assessment tool is intended to elicit information that is designed to help us examine three aspects of county-wide or regional coordination efforts:

- **Document and Assess Current Status** – Inventory existing community transportation services and the type/extent of ongoing coordination efforts; and assess service redundancies, gaps and unmet needs

- **Identify Opportunities** – Identify new and upcoming transportation and coordination projects, initiatives and opportunities for improved coordination

- **Identify and Assess Challenges** – Assess organizational, political, funding, and service delivery challenges that might thwart prospective coordination efforts

ORGANIZATION CHARACTERISTICS AND SERVICES PROVIDED

Contact and Organization Information

Person Interviewed: _____

Title: _____

Organization: _____

Address: _____

City: _____ Zip: _____

Contact Phone: _____ Fax _____

Contact E-mail: _____

Agency Website: _____

Type of Organization

- ☐ Publicly Sponsored Transit Agency
- ☐ Social Service Agency – Public
- ☐ Social Service Agency – Nonprofit
- ☐ Municipal Office on Aging
- ☐ Nonprofit Senior Center
- ☐ Social Service Agency – Public

- ☐ Social Service Agency – Nonprofit
- ☐ Faith Based Organization
- ☐ Neighborhood Center
- ☐ Taxi/Wheelchair/Stretcher Service
- ☐ Other: _____

Major Functions/Services

☐ Transportation   ☐ Diagnosis/Evaluation
☐ Health Care   ☐ Job Placement
☐ Social Services   ☐ Residential Facilities
☐ Nutrition   ☐ Income Assistance
☐ Counseling   ☐ Screening
☐ Day Treatment   ☐ Information/Referral
☐ Job Training   ☐ Recreation/Social
☐ Employment   ☐ Homemaker/Chore
☐ Rehabilitation Services   ☐ Other _____

Organizational Structure

☐ Local government department or unit (city or county)
☐ Transportation authority
☐ Private, non-profit organization
☐ Private, for-profit organization
☐ Other: _____

Clients/Customers

☐ Persons with disabilities; qualifiers _____
☐ Older adults
☐ Low-income / Medicaid recipients
☐ Agency/program clients
☐ General Public
☐ Other: _____

Geographic Service Area / Catchment Area

☐ Regional (Specify Counties): _____
☐ Countywide (Specify County): _____
☐ Specific Municipalities (Specify): _____
☐ Other (Specify): _____

Involvement/Role in Transportation or Transportation Assistance

☐ Fund transportation programs
☐ Directly operate public transportation services
☐ Hire contractors to provide public transportation services
☐ Directly operate human service agency transportation services
☐ Hire contractors to provide human service agency transportation services
☐ Arrange/provide volunteer driver and/or escort services
☐ Reimburse/subsidize transit/taxi fares/personal car mileage
☐ Do not fund or provide (directly or through contractors) transportation services
☐ Provide information referral services
☐ Other: _____

Type of Transportation Provided

- [ ] Fixed-route transit (fixed path, fixed schedule, with designated stops)
- [ ] Flex-route transit (deviations permitted off fixed path or between fixed, scheduled stops)
- [ ] Subscription service (determined by residences of customers/program participants and daily/regular trips to/from same location (e.g., agency, school, program site or medical provider)
- [ ] Demand response (includes casual appointments and subscription service)
- [ ] Other: _____

Eligibility Certification Required for Transportation?

- [ ] Yes   Eligibility requirements: _____
- [ ] No   Notes: _____

Type of Trip Purposes Allowed

- [ ] Any trip purpose
- [ ] Agency program only
- [ ] Medical
- [ ] Shopping
- [ ] Recreational
- [ ] Employment/Training
- [ ] Other: _____

Additional Trip Eligibility / Service Availability Qualifiers

- [ ] None (anywhere/anytime)
- [ ] Only within this specific area: _____
- [ ] Only on these days and at these times: (specify below)
- [ ] Other: _____

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
Transportation service begins:	____	____	____	____	____	____	____
Transportation service ends:	____	____	____	____	____	____	____

Reservation Requirements

- [ ] There are no advance reservation requirements.
- [ ] Clients/customers must make an advance reservation (e.g., by telephone, fax, internet, arrangement through a third party) _____ day(s) in advance

Fleet Size (for Direct Operations or Dedicated Contract Operations only)

Number of non-accessible vehicles: __ sedans/wagons | ___ minivans | ___ vans | ___ buses | ___ total
Number of w/c accessible vehicles: __ sedans/wagons | ___ minivans | ___ vans | ___ buses | ___ total

Annual Ridership

Number of total trips per year (CY/FY 200__): _____ trips
Number of wheelchair trips per year (CY/FY 200__): _____ wheelchair trips
- [ ] Check if ridership figures are estimates
Notes: _____

Operating Revenues

Category	Yes/No	Actual, FY 2006
Transportation Operating Revenues – List Individually		
a) Fare revenues (cash); fare structure:		
b) Fare revenues (ticket/tokens purchased by third parties for customers)		
c) Passenger donations		
d) City government appropriations		
e) County government appropriations		
f) State government appropriation (s85.21)		
g) Grants directly received		
1) FTA Section 5307		
2) FTA Section 5311		
3) FTA Section 5316 (JARC)		
4) FTA Section 5317 (New Freedom)		
5) STRAP		
6) Title III (Older Americans Act)		
7) Title XIX (Medicaid)		
8) Other (List)		
9) Other (List)		
h) Contributions from charitable foundations, etc.		
i) Other miscellaneous fundraising		
j) Other, not listed above (Explain)		
Total Transportation Revenues – Total		

Capital Revenues

Category	Actual, FY 2006
Transportation Capital Revenues – List Individually	
a) FTA	
1) FTA Section 5307	
2) FTA Section 5309	
3) FTA Section 5310	
4) FTA Section 5317 (New Freedom)	
5) FTA Other (list)	
b) Governmental Revenues	
c) Passenger Donations	
1) State	
2) County (list county)	
3) City (list city)	
d) Fundraising	
e) Contributions from Charitable Foundations, etc.	
f) Other, not listed above (Explain)	
Total Transportation Capital Revenues – Total	

Operating Expenses

Category	Actual, FY 2006
Transportation Operating Expenses – Total	
a) Administration	
b) Operations	
c) Maintenance	
d) Contracted Services: Contractor(s): _____ Rate structure(s):	
e) Total	

Notes:

Service Reductions/Non-Expansion

Are there services you formerly provided but had to cut due to operational or funding challenges? Or, are there expansions to service that are needed or desired but which you cannot provide? Why?

_____

_____

_____

Other Existing Community Transportation Services?

Organization	Type of Service	Customers	Service Area	Service Times

Most Useful Options (for persons with disabilities (PWD), older adults, persons with low income)

Service	PWD	Older Adults	Low Income	Other
Public Transit				
ADA Paratransit				
Taxis				

Greatest Constraints/Obstacles to Increased Mobility

Service	Limited Service Area	Limited Service Times	Limited Eligibility	Limited Trip Purposes	Funding Shortfall	High Service Cost	High Fares	Other
Public Transit								
Taxis								
Non-profit services								
ADA Paratransit (if appropriate)								

Greatest Unmet Needs in Area

Unmet need	PWD	Older Adults	Low Income	Other
Greater geographic coverage (including cross boundary/ jurisdictional service)				
Better hours				
Expand client/trip elig.				
Centralized information				

Current, Planned, or Former Involvement in Coordination (indicate C or P or F in boxes)

- ☐ Lead/Participate on a Coordination Committee/Council (see also below)
- ☐ Share service information, policies, procedures with other agencies
- ☐ Provide information to a centralized directory of community transportation services
- ☐ Will occasionally serve a trip for another agency
- ☐ Regularly share vehicles, staff, and/or training resources
- ☐ Participate in joint purchasing
- ☐ Purchase from/sell transportation service to other agencies
- ☐ Utilize same contractors and allow co-mingling of sponsored clients from different contracts
- ☐ Have consolidated call center, operational, and/or maintenance functions with other organizations
- ☐ Purchase service through a common broker
- ☐ Other: _____
- ☐ None

Effectiveness of Implemented Coordination Efforts

Not Effective ⟶ Very Effective
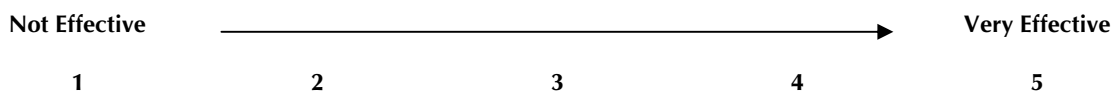
1   2   3   4   5

Governing Board Interest in Coordination

Little interest ⟶ Strong interest
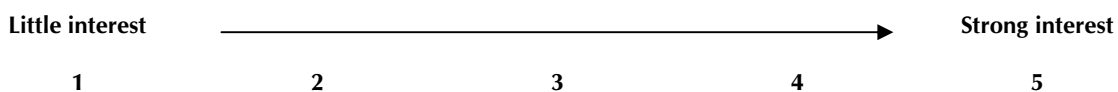
1   2   3   4   5

Region/Countywide Interest in Coordination (Elected Officials, Agency Administrators, Other Leaders)

Little interest ⟶ Strong interest
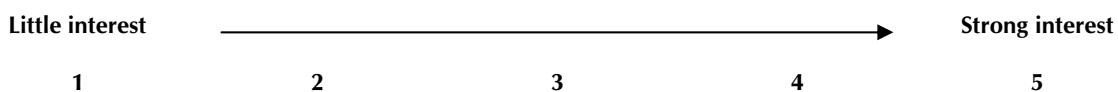
1   2   3   4   5

State Interest in Coordination

Little interest	⟶			Strong interest
1	2	3	4	5

Coordination Organizations or Committees Formed/Forming in Community

☐ Yes Name: _____

Participating organizations: _____

_____

_____

_____

☐ Yes, but disbanded Reason: _____
☐ No

Effectiveness of Coordinating Council/Committee

Not Effective	⟶			Very Effective
1	2	3	4	5

Challenges to Implementing Coordination/Mobility Improvement Strategies (Asterisk Greatest Challenge)

☐ Statutory barriers to pooling funds
☐ Restrictions placed on the use of vehicles
☐ Liability/insurance concerns
☐ Turf issues among providers
☐ Billing/accounting issues
☐ Unique characteristics of client populations
☐ Other (Define): _____

Most significant improvement needed to enhance coordination and/or improve mobility in the County/Region.

_____

_____

_____

_____

Under-utilized Services in the Community

Organization	Type of Service	Customers	Service Area	Service Times

Plans to expand or enhance your or other transportation services in the County/Region?

_____

_____

_____

_____

_____

Do plans involve other organizations?

☐ Yes Names of other organizations: _____

☐ No

Coordination incentives/rewards?

☐ Yes Specify: _____

☐ No

Ideas for how County or State could better support local coordination efforts

_____

_____

_____

Other Issues/Comments/Concerns/Ideas

_____

_____

_____

Thank you for your cooperation.

APPENDIX B

COMPLETED INTERVIEWS

Completed Interviews

No.	Name	Organization	County
1	Kathy Sankey	Plover Shared Ride Taxi Courtesy Cab Courtesy Carriers	Portage
2	Jim Riggenbach	Health and Human Services	Portage
3	Carrie Placeway	Aging and Disability Resource Center	Portage
4	Susan Lemke	Stevens Point Transit	Portage
5	Wade Rudolph	North Central Health Care	Marathon
6	Greg Seubert	MetroRide (Wausau Area Transit)	Marathon
7	Lonnie Cole	Wood County ADRC	Wood
8	Kathy Olson	Senior Employment Program	Central Wisconsin
9	Jackie Bodette	Wood County ADRC	Wood
10	Jim Brown	Wheels of Independence Wisconsin Rapids Shared Ride Taxi (River City Taxi)	Wood
11	Dorothy Miller	Job Center	Central Wisconsin
12	Liz Emmer	Laurie Jean Zach Center	Ashland
13	Tom Waby	Bay Area Rural Transit	Ashland
14	Deb Hipsher	Ashland Aging Unit	Ashland
15	Scott Bretting	Bay Area Taxi	Ashland
16	Bill Schaefer	Madison MPO	Dane
17	Norah Cashin	Dane County Aging	Dane
18	Crystal Martin	Madison Metro	Dane
19	Barb Thompson	CareWisconsin	Dane
20	Barb Thoni	Dane County AAA	Dane
21	Karl Shulte	Union Cab	Dane
22	Catherine Murray	Focuscorp	Dane
23	Mark Jones	Abby Vans, Inc.	Clark
24	Brent Shoup	Clark County Community Services	Clark
25	Mary Sladich	Clark County Office of Aging	Clark
26	Bob Goetter	Clark County Department of Social Services	Clark
27	Jody Conner	Clark County Workforce Resource	Clark
28	Rob Tankersley	Indianhead Community Action Agency	Rusk
29	Mike Kelley	Keycare & Ladysmith Nursing Home	Rusk
30	Erica Robinson	Rusk County Health & Human Services	Rusk

No.	Name	Organization	County
31	Mike Hraban	City Council; Rusk County Long-Term Support	Rusk
32	Gary Rivers	Rusk County	Rusk
33	Irene Lehman	Clark County W-2	Rusk
34	Kris Pawlowski	West Central Wisconsin Workforce Development Board	Regional (including Pierce and Clark Counties)
35	Kathy Hass	Pierce Council Department on Aging	Pierce
36	Laurie Unseth	Pierce County Veterans Services	Pierce
37	Bev Scott	River Falls RideShare	Pierce
38	Rob Mooney	River Falls RideShare	Pierce
39	Tami Weber	Pierce County ADRC	Pierce
40	Jason Pape	New Richmond Transport & Pape Taxi	Regional (including Pierce)
41	Coleen Wisnicky	Aurora Van Service	Manitowoc
42	Val Mellon	Maritime Metro Transit	Manitowoc
43	Judy Rank	ADRC	Manitowoc
44	Steve Roekle	Assist to Transport	Manitowoc
45	Michelle Zoberalski	DVR	Manitowoc
46	Dan Witt	New Hope, Inc.	Manitowoc/Calumet
47	John Meissner	Options for Independent Living	Calumet (NE Wisconsin)
48	Mary Schlautman	Calumet Co. Senior Resource Ctr.	Calumet/Outagamie/ Waupaca
49	Holly Keenan	Making The Ride Happen	Calumet Winnebago, Outagamie
50	Deborah Wetter	Valley Transit	Calumet (Appleton)
51	Suzie Giesen	Green Lake DHHS	Green Lake
52	Ed Shuhe	Fox River Industries	Green Lake
53	Jerry Beuthin	Veterans Services	Green Lake
54	Julie Boeck	Classic Cab	Green Lake
55	Karen Neuman	Berlin Sr. Center	Green Lake
56	Mary Farrell	Ozaukee Co. Aging	Port Washington
57	Penny Seidl	Ozaukee Co. Transit	Port Washington
58	Mark Gram	City Administrator (city taxi)	Port Washington
59	Bev Malon	City of Oshkosh Transit	Winnebago
60	Beckie Pinnow	Red Cross	Winnebago
61	Paula	Oshkosh City Cab	Winnebago
62	Gary Wilner	Wisconsin Interfaith Needs Response	Regional (Winnebago)