

FTA Report No. 0272



Annual Report on FAST Act Section 3006(b) Pilot Program for Innovative Coordinated Access and Mobility Fiscal Year 2024

PREPARED BY
Federal Transit Administration
Office of Program Management
Rural and Targeted Programs Division



U.S. Department of Transportation
Federal Transit Administration

DECEMBER

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Office of Research, Demonstration, and Innovation
U.S. Department of Transportation
1200 New Jersey Avenue, SE
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Metric Conversion Table

| SYMBOL | WHEN YOU KNOW | MULTIPLY BY | TO FIND | SYMBOL |
|--|----------------------|--|--------------------------------|----------------|
| LENGTH | | | | |
| in | inches | 25.4 | millimeters | mm |
| ft | feet | 0.305 | meters | m |
| yd | yards | 0.914 | meters | m |
| mi | miles | 1.61 | kilometers | km |
| VOLUME | | | | |
| fl oz | fluid ounces | 29.57 | milliliters | mL |
| gal | gallons | 3.785 | liters | L |
| ft ³ | cubic feet | 0.028 | cubic meters | m ³ |
| yd ³ | cubic yards | 0.765 | cubic meters | m ³ |
| NOTE: volumes greater than 1000 L shall be shown in m ³ | | | | |
| MASS | | | | |
| oz | ounces | 28.35 | grams | g |
| lb | pounds | 0.454 | kilograms | kg |
| T | short tons (2000 lb) | 0.907 | megagrams (or "metric ton") | Mg (or "t") |
| TEMPERATURE (exact degrees) | | | | |
| °F | Fahrenheit | $\frac{5(F-32)}{9}$ or $\frac{(F-32)}{1.8}$ | Celsius | °C |

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TABLE OF CONTENTS

| | |
|----|--|
| 1 | Executive Summary |
| 3 | Section 1 - Legislative Background |
| 4 | Section 2 - FY 2016 Selected Projects |
| 5 | Section 3 - FY 2018 Selected Projects |
| 8 | Section 4 - FY 2020 Selected Projects |
| 10 | Section 5 - FY 2021 Selected Projects |
| 12 | Section 6 - FY 2024 Selected Projects |
| 13 | Section 7 - Program Evaluation |
| 15 | Appendix A - FY 2016 Rides to Wellness Demonstration Program: Summary of Reported Data and Outcomes |
| 18 | Appendix B - FY 2018 Access and Mobility Partnership Grants: Summary of Proposed Performance Measures and Targets |
| 31 | Appendix C - FY 2020 Mobility for All Pilot Program Grants: Summary of Proposed Performance Measures and Targets |
| 38 | Appendix D - FY 2021 Innovative Coordinated Access and Mobility Pilot Program Grants: Project Descriptions |
| 40 | Appendix E - FY 2024 Innovative Coordinated Access and Mobility Pilot Program Grants: Project Descriptions |

TABLES

| | |
|----|--|
| 3 | Table 1 ICAM Funding, FY 2022–2026 |
| 4 | Table 2 FY 2016 Rides to Wellness Demonstration Projects (ICAM-funded) |
| 7 | Table 3 FY 2018 Access and Mobility Partnership Grants (ICAM-funded) |
| 8 | Table 4 FY 2020 Mobility for All Pilot Program Awards |
| 10 | Table 5 FY 2021 Innovative Coordinated Access and Mobility Pilot Program Awards |
| 12 | Table 6 FY 2024 Innovative Coordinated Access and Mobility Pilot Program Awards |

Executive Summary

Section 3006(b) of the Fixing America's Surface Transportation (FAST) Act, Pub. L. 114-94, created the Pilot Program for Innovative Coordinated Access and Mobility (ICAM Pilot Program). ICAM Pilot Program funds must be used for capital projects to improve the coordination of transportation services and non-emergency medical transportation (NEMT) for persons who are transportation disadvantaged.

Section 3006(b) further requires that:

The Secretary shall make publicly available an annual report on the pilot program carried out under this subsection for each fiscal year, not later than December 31 of the calendar year in which that fiscal year ends.

The ICAM Pilot Program was authorized for \$2.00 million in Fiscal Year (FY) 2016, \$3.00 million in FY 2017, \$3.25 million in FY 2018, and \$3.50 million in FY 2019, FY 2020, and FY 2021. The Infrastructure Investment and Jobs Act (Pub. L. 117-58, Nov.15, 2021), also known as the Bipartisan Infrastructure Law (BIL), authorized additional funding for the ICAM Pilot Program. The BIL authorized an additional \$4.60 million in FY 2022, \$4.70 million in FY 2023, \$4.82 million in FY 2024, \$4.92 million in FY 2025, and \$5.05 million in FY 2026.

To date, FTA has awarded projects under five separate funding opportunities for the ICAM Pilot Program. FTA will issue a sixth funding opportunity by FY 2026. A map showing the locations of pilot projects funded from 2018 to the present can be found [here](#).

In FY 2016, FTA issued a Notice of Funding Opportunity (NOFO) (81 FR 17549) for the ICAM Pilot Program called the Rides to Wellness Demonstration Program. From the FY 2016 NOFO, 11 capital-only projects were funded with \$4,346,285 in FY 2016 and FY 2017 ICAM Pilot Program funding. A summary of these 11 projects is included in this report.

In FY 2018, FTA issued a NOFO (83 FR 46534) for Access and Mobility Partnership Grants for transit coordination projects that improve access to healthcare. From the FY 2018 NOFO, 23 capital-only projects were funded with \$7,394,124 in FY 2016, FY 2017, FY 2018, and FY 2019 ICAM Pilot Program funding. A summary of these 23 projects is included in this report.

In FY 2020, FTA issued a third NOFO (84 FR 58819) for the ICAM Pilot Program called the Mobility for All Pilot Program. From the FY 2020 NOFO, 17 capital-only

projects were funded with \$3,502,820 in FY 2019 and FY 2020 ICAM Pilot Program funding. A summary of these 17 projects is included in this report.

In FY 2021, FTA issued a fourth NOFO (86 FR 55907) for the ICAM Pilot Program. Applications were due by December 6, 2021, and selections were announced on June 16, 2022. Seventeen capital-only projects were funded with \$8,404,279 in FY 2021 and FY 2022 funding. A summary of these 17 projects is included in this report.

In FY 2024, FTA issued a fifth NOFO (88 FR 78457) for the ICAM Pilot Program. Applications were due by February 13, 2024, and selections were announced on June 10, 2024. Seventeen capital-only projects were awarded. A summary of these 17 projects is included in this report.

Section 1

Legislative Background

Section 3006(b) of the FAST Act created a new Pilot Program for Innovative Coordinated Access and Mobility (ICAM Pilot Program). ICAM Pilot Program funds must be used for capital projects to improve the coordination of non-emergency medical transportation (NEMT) for persons who are transportation disadvantaged. Funding intended for organizations that focus on coordinated transportation solutions was authorized for \$18.75 million between FY 2016 through FY 2021. The BIL authorized \$24,102,620 in funding from FY 2022 through FY 2026 for the ICAM Pilot Program. The BIL authorized

\$4.60 million in FY 2022, \$4.70 million in FY 2023, \$4.82 million in FY 2024, \$4.92 million in FY 2025, and \$5.05 million in FY 2026. A summary of the ICAM funding for FY 2022 – FY 2026 is shown in Table 1.

Table 1 ICAM Funding, FY 2022–2026

| | FY 2022 (mil \$) | FY 2023 (mil \$) | FY 2024 (mil \$) | FY 2025 (mil \$) | FY 2026 (mil \$) |
|--------------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| Competitive ICAM Pilot Program | 4.61 | 4.70 | 4.82 | 4.92 | 5.05 |

Additionally, Section 3006(b) requires that:

The Secretary shall make publicly available an annual report on the pilot program carried out under this subsection for each fiscal year, not later than December 31 of the calendar year in which that fiscal year ends. The report shall include a detailed description of the activities carried out under the pilot program and an evaluation of the program, including an evaluation of the performance measures described in paragraph (3)(D).

In accordance with Section 3006(b)(3)(D), each applicant must identify specific performance measures the eligible project will use to quantify actual outcomes against expected outcomes.

Section 2

FY 2016 Selected Projects

In FY 2016, FTA issued a NOFO (81 FR 17549) for the ICAM Pilot Program called the Rides to Wellness Demonstration Program. As a result of this NOFO, 11 capital-only projects were funded with \$4,346,285 in FY 2016 and FY 2017 FAST Act Section 3006(b) ICAM Pilot Program funding. A summary of these 11 projects is included in this report.

An additional eight projects were funded through FTA's Public Transportation Innovation program (49 U.S.C. 5312) in the amount of \$2,865,233. An annual report, FTA Annual Report on Public Transportation Innovation Research Projects for FY 2021, describes these projects in the Rides to Wellness Initiative section on page 27: <https://www.transit.dot.gov/research-innovation/fta-annual-report-public-transportation-innovation-research-projects-fiscal-0>

The Rides to Wellness Demonstration Grants Program Evaluation, detailing the project outcomes, lessons learned, findings, and recommendations, can be found at <https://www.transit.dot.gov/research-innovation/rides-wellness-demonstration-grants-program-evaluation-report-0190>.

Final Results: While the majority of the 2016 Rides to Wellness projects were successful in meeting their goals, some were unable to sustain their projects beyond the pilot period due to funding or other implementation challenges. Final reports describing each project's long-term sustainability were not required. Regardless, each individual project increased access to much needed healthcare services for vulnerable communities and individuals in need of affordable and reliable transportation services.

The outcomes of each individual project can be found in Appendix 1.

Table 2 FY 2016 Rides to Wellness Demonstration Projects (ICAM-funded)

| Recipient | Recipient Location | Federal Award |
|--|--------------------|---------------|
| Jacksonville Transportation Authority | Jacksonville, FL | \$399,200 |
| Rides Mass Transit District | Harrisburg, IL | \$518,844 |
| Montachusett Regional Transit Authority | Fitchburg, MA | \$200,000 |
| Maryland Transit Administration | Baltimore, MD | \$103,334 |
| Michigan Department of Transportation | Lansing, MI | \$1,006,387 |
| Flint Mass Transportation Authority | Flint, MI | \$310,040 |
| Research Triangle Regional Public Transportation Authority | Durham, NC | \$65,600 |
| New Hampshire Department of Transportation | Concord, NH | \$182,880 |
| Pennsylvania Department of Transportation | Harrisburg, PA | \$1,190,000 |
| Knoxville Area Transit | Knoxville, TN | \$200,000 |
| Vermont Agency of Transportation | Montpelier, VT | \$170,000 |

Section 3

FY 2018 Selected Projects

On September 13, 2018, FTA issued a NOFO for Access and Mobility Partnership Grants for transit coordination projects that improve access to healthcare.

The two competitive grant programs included in the NOFO (83 FR 46534) were designed to improve options for people with limited transportation choices and bridge the gap between service providers in the transportation and health sectors. Two funding sources supported the NOFO: The ICAM Pilot Program, which funds eligible capital projects, and the Public Transportation Innovation Program (49 U.S.C. 5312), which funds projects that may include operating expenses.

FTA's Access and Mobility Partnership Grants focus on transportation and technology solutions to reach medical appointments, access healthy food, and improve paratransit services. The program emphasizes better coordination between health care providers and transit agencies, as well as technology improvements such as mobility-on-demand, shared transportation services, and smart phone apps for booking services.

On May 22, 2019, FTA announced project selections totaling approximately

\$9.6 million to 37 projects led by transit agencies, governmental authorities, and nonprofit organizations to support innovative transportation solutions to expand access to health care.

Of these 37 projects, FTA selected 23 projects for funding under the ICAM Pilot Program, totaling \$7,394,124. The ICAM Pilot Program finances innovative capital projects for the transportation disadvantaged, with the goal to improve the coordination of transportation and NEMT services.

The pilot projects are 18 months long. All of the ICAM projects awarded under this NOFO have been obligated, and 22 of the 23 projects have been completed. Each grant recipient must report progress on key performance measures and submit a detailed final report of its results to FTA within 90 days of project completion.

FTA also awarded \$2,207,857 for 14 Human Services Coordination Research (HSCR) projects funded through FTA's Public Transportation Innovation program (49 U.S.C. 5312). Research activities awarded under this competitive program support the implementation of innovative strategies in the coordination of human services transportation to provide more effective and efficient public transportation services to seniors, individuals with disabilities, and low-income individuals. Two projects funded under this program have since been withdrawn. The FTA Annual Report on Public Transportation Innovation Research Projects for FY 2023 describes these projects in the Human Service

Coordination Research Deployment Program section on page 20:

<https://www.transit.dot.gov/sites/fta.dot.gov/files/2024-02/FTA-Annual-Report-on-Public-Transportation-Innovation-Research-Projects-for-FY-2023-Report-0261.pdf>

Final Results: Eighteen of the 23 FY 2018 ICAM-funded projects successfully met or exceeded their targeted goals and were sustained beyond the pilot period through additional funds provided from other sources, including but not limited to: FTA's Enhanced Mobility of Seniors and Individuals with Disabilities Formula Program (Section 5310), FTA's Formula Program for Rural Areas (Section 5311), local human service transportation grants, and donations. Two of the recipients, Envida in Colorado and Geisinger Clinic in Pennsylvania, used funding from the Centers for Medicare and Medicaid Services (CMS) to sustain NEMT service initiated with ICAM pilot funding. CMS is the largest funder of NEMT in the United States. One project has been granted an extension and is not yet complete.

Three of the 23 FY 2018 ICAM-funded projects were not sustainable or successful. They cite the following reasons for failing to be sustainable or successful: inability of the subrecipient or partner to integrate with the recipient's technology; staffing challenges due to COVID-19; and lack of additional funding.

All projects, except for the Indiana University Health project, which was terminated prior to completion, improved access to healthcare and/or improved public transportation access for older adults, people with disabilities, and people of low-income.

FTA has not received final reports for the remaining two of the 23 FY 2018 ICAM-funded projects and their sustainability has not yet been determined.

Lessons learned and promising practices reported by recipients include:

1. Building partnerships and trust is essential when providing access to healthcare services.
2. Older adults have varying levels of need and a program success depends on engaging, responding, and adapting to the needs of the individuals in the community;
3. The success of a mobility management project depends on the partners and referrals. Having partnerships within the medical community or human service communities can greatly improve the success of a program dedicated to NEMT.
4. Transportation coordination services can be resource intensive. Additional funding and staff, such as a dedicated mobility manager or coordinator and

dedicated call-center staff, are required to successfully meet the specific needs of the community.

Final performance measures and outcomes for the 23 ICAM Pilot Program projects are contained in Appendix 2. Each recipient was required to describe potential measures and outcomes in their original competitive proposal. Upon project selection, each recipient worked with the National Aging and Disability Transportation Center (NADTC), a technical assistance center that operates under a cooperative agreement with FTA, to refine and finalize their project evaluation strategies. Final Reports from the recipients can be found on the following website: <https://www.nadtc.org/fta-discretionary-grant-technical-assistance/>

Table 3 FY 2018 Access and Mobility Partnership Projects (ICAM Pilot Program Projects)

| Recipient | Recipient Location | Federal Award |
|---|----------------------|--------------------|
| Aaron E. Henry Community Health Services Center, Inc. | Clarksdale, MS | \$360,540 |
| Boat People S.O.S., Inc. | Falls Church, VA | \$101,928 |
| Capacity Builders, Inc. | Farmington, NM | \$130,000 |
| Capitol Hill Village | Washington, DC | \$290,500 |
| Central Midlands Regional Transit Authority | Columbia, SC | \$249,912 |
| Council on Aging of Southwestern Ohio | Cincinnati, OH | \$470,000 |
| Disability Services Inc., dba Envida | Colorado Springs, CO | \$249,526 |
| Flint Mass Transportation Authority | Flint, MI | \$734,752 |
| Geisinger Clinic | Danville, PA | \$499,484 |
| Indiana University Health, Inc. | Indianapolis, IN | \$208,352 |
| Missouri Rural Health Association | Jefferson City, MO | \$592,328 |
| North Central Texas Council of Governments | Arlington, TX | \$511,106 |
| People For People | Yakima, WA | \$206,846 |
| Pinellas Suncoast Transit Authority | St. Petersburg, FL | \$100,000 |
| Pioneer Valley Transit Authority | Springfield, MA | \$333,000 |
| Ride Connection, Inc. | Portland, OR | \$96,921 |
| San Diego Metropolitan Transit System | San Diego, CA | \$536,000 |
| Southern Highlands Community Mental Health Center, Inc. | Princeton, WV | \$194,944 |
| SouthWest Transit | Eden Prairie, MN | \$290,500 |
| Southwestern WI Community Action Program, Inc. | Dodgeville, WI | \$205,360 |
| The C. W. Williams Community Health Center, Inc. | Charlotte, NC | \$112,000 |
| Utah Transit Authority | Salt Lake City, UT | \$700,125 |
| West River Transit Authority, Inc. | Spearfish, SD | \$220,000 |
| Total: | | \$7,394,124 |

Section 4

FY 2020 Selected Projects

On November 1, 2019, FTA issued a NOFO for the FY 2020 Mobility for All Pilot program. On June 3, 2020, FTA announced its selections of 17 projects in 16 states totaling \$3,502,820. Through improved coordination of transportation services and enhanced collaboration, these projects will provide more efficient service to people in rural and small urban areas and individuals affected by healthcare challenges, such as the opioid epidemic. Selected projects support coordination among programs funded by members of the Coordinating Council on Access and Mobility (CCAM), an interagency partnership which includes representatives from USDOT and 10 other Federal agencies to coordinate efforts and improve the quality, efficiency, and availability of transportation services for targeted populations.

The list of funded projects is shown in Table 4. Stillaguamish Tribe of Indians of Washington decided not to pursue funding due to impacts caused by the coronavirus disease 2019 (COVID-19) pandemic.

Progress: Upon project selection, each recipient worked with the NADTC to refine and finalize their project evaluation strategies. The Final Results of nine of the 16 projects that were obligated can be found in Appendix 3. The proposed performance measures and targeted outcomes for the seven remaining projects that are still in-progress can also be found in Appendix 3. Final Reports from completed projects can be found on the following website: <https://www.nadtc.org/fta-discretionary-grant-technical-assistance/>

Table 4 FY 2020 Mobility for All Pilot Program Projects

| Recipient | Recipient Location | Federal Award |
|--|--------------------|---------------|
| Access Services | El Monte, CA | \$330,000 |
| Metropolitan Washington Council of Governments | Washington, DC | \$151,200 |
| Georgia Department of Transportation | Atlanta, GA | \$120,000 |
| Iowa Department of Transportation | Ames, IA | \$70,720 |
| Regional Transit Authority | New Orleans, LA | \$300,000 |
| MetroWest Regional Transit Authority | Framingham, MA | \$300,000 |
| Maryland Transit Administration on Behalf of Bayside Community Network, Inc. | Baltimore, MD | \$40,000 |
| Maine Department of Transportation | Augusta, ME | \$187,855 |
| Flint Mass Transportation Authority | Flint, MI | \$545,696 |
| Missouri Rural Health Association | Concordia, MO | \$391,709 |
| N.C. Department of Transportation | Raleigh, NC | \$280,000 |

| Recipient | Recipient Location | Federal Award |
|---|--------------------|--------------------|
| Regional Transportation Commission of Southern Nevada | Las Vegas, NV | \$128,624 |
| Lane Transit District | Eugene, OR | \$76,000 |
| Oregon Department of Transportation | Salem, OR | \$40,000 |
| Greenville Pickens Area Transportation Study | Greenville, SC | \$326,000 |
| Virginia Department of Rail and Public Transportation | Richmond, VA | \$79,016 |
| Stillaguamish Tribe of Indians of Washington ¹ | Arlington, WA | \$136,000 |
| Total: | | \$3,502,820 |

¹ This recipient withdrew from the pilot program.

Section 5

FY 2021 Selected Projects

On October 1, 2021, FTA issued a NOFO for the FY 2021 ICAM pilot program. FTA announced the selection of 17 projects in 16 states totaling \$8,404,279 in funding, on July 16, 2022. Fourteen of the 17 projects have been obligated to date. Two projects (GIVE Atlanta and Disability Services, Inc, dba Envida) withdrew from the program prior to obligating funding. This funding supports innovative capital projects on a regional and statewide level to improve access to non-emergency medical transportation and comprehensive community access for the transportation disadvantaged. Selected projects support coordination among programs funded by the agencies of the CCAM and the availability of transportation services for older adults, people with disabilities, and individuals of low-income. The list of funded projects is shown in Table 5. Appendix 4 contains a summary of these projects.

Progress: Many of the FY 2021 ICAM recipients obligated their grants and began their projects in 2024. These projects are currently establishing their performance and targeted outcome measures. A summary of the projects can be found in Appendix 4.

Table 5 FY 2021 Innovative Coordinated Access and Mobility Pilot Program Projects

| Recipient | Recipient Location | Federal Award |
|--|----------------------|---------------|
| Full Access and Coordinated Transportation Inc. (FACT) | Sacramento, CA | \$240,000 |
| Disability Services, Inc, dba, Envida ² | Colorado Springs, CO | \$260,000 |
| Southwest Colorado Council of Governments | Durango, CO | \$350,000 |
| Metropolitan Washington Council of Governments | Washington, DC | \$100,000 |
| GIVE Atlanta ³ | Marietta, GA | \$500,000 |
| City of Salem | Salem, MA | \$367,225 |
| Michigan Department of Transportation | Lansing, MI | \$711,594 |
| Missouri Rural Health Association | Jefferson City, MO | \$725,387 |
| City of Winston-Salem/ Winston Salem Transit Authority ⁴ | Winston-Salem, NC | \$320,000 |
| Lifespan of Greater Rochester Inc. | Rochester, NY | \$240,000 |
| Ohio Department of Transportation | Columbus, OH | \$2,813,123 |
| Central Oklahoma Transportation and Parking Authority (COPTA) dba Embark | Oklahoma City, OK | \$325,000 |

² This recipient withdrew from the pilot program.

³ This recipient withdrew from the pilot program.

⁴ This recipient received a one-year extension to obligate their grant.

| Recipient | Recipient Location | Federal Award |
|--|--------------------|--------------------|
| Pennsylvania Department of Transportation | Harrisburg, PA | \$750,000 |
| Rhode Island Public Transit Authority (RIPTA) | Providence, RI | \$96,000 |
| Panhandle Regional Planning Commission | Amarillo, TX | \$160,200 |
| Summit County | Coalville, UT | \$345,250 |
| Virginia Department of Rail and Public Transportation (DRPT) | Richmond, VA | \$100,500 |
| Total: | | \$8,404,279 |

Section 6

FY 2024 Selected Projects

On November 15, 2023, FTA issued a NOFO for the FY 2024 Innovative Coordinated Access and Mobility pilot program. On July 10, 2024, FTA announced the selection of 17 projects in 15 states totaling \$7,833,610 in funding. This funding supports innovative regional or statewide capital projects to improve access to non-emergency medical transportation and comprehensive community access for the transportation disadvantaged. Selected projects support coordination among programs funded by CCAM partner agencies and transportation services for older adults, people with disabilities, and individuals of low-income. The list of funded projects is shown in Table 6.

Progress: These projects were awarded in June 2024 and will have until October 1, 2026, to obligate and begin their projects. Appendix 5 contains a summary of these projects. Table 6 FY 2024 Innovative Coordinated Access and Mobility Pilot Program Projects

Table 6 FY 2024 Innovative Coordinated Access and Mobility Pilot Program Projects

| Recipient | Recipient Location | Federal Award |
|--|--------------------|--------------------|
| Paratransit, Inc. | Sacramento, CA | \$134,400 |
| Horizons, A Family Service Alliance | Cedar Rapids, IA | \$357,868 |
| Iowa Department of Transportation | Ames, IA | \$441,096 |
| Illinois Department of Transportation | Springfield, IL | \$1,824,640 |
| Rapides Area Planning Commission | Alexandria, LA | \$384,000 |
| Massachusetts Department of Transportation | Boston, MA | \$360,800 |
| Maine Department of Transportation | Augusta, ME | \$436,000 |
| Michigan Department of Transportation | Lansing, MI | \$480,000 |
| Capacity Builders Inc. | Farmington, NM | \$184,670 |
| Fallon Paiute Shoshone Tribe | Fallon, NV | \$73,600 |
| Central Oklahoma Transportation and Parking Authority (EMBARK) | Oklahoma City, OK | \$415,900 |
| Pennsylvania Department of Transportation | Harrisburg, PA | \$925,000 |
| Community Coordinated Transportation Systems (River Cities Public Transit) | Pierre, SD | \$281,760 |
| West River transit Authority, Inc. (Prairie Hills Transit) | Spearfish, SD | \$269,280 |
| Concho Valley Transit District | San Angelo, TX | \$166,700 |
| Bear River Association of Governments | Logan, UT | \$578,400 |
| Hopelink | Redmond, WA | \$519,496 |
| Total: | | \$7,833,610 |

Section 7

Program Evaluation

The ICAM Pilot Program participants are required to evaluate the progress of their pilot projects through performance measures and prepare a final report that summarizes the outcomes of their pilot projects.

FTA has received final reports for 21 of the 40 FY 2018 – FY 2019 grants and FY 2020 grants. The FY 2016 ICAM grants were not required to provide a final report. The final reports include a project description, summary of the performance measures and outcomes, lessons learned, project sustainability, and the impact of COVID-19. The intent of the ICAM Final Reports, in addition to providing performance measure and outcome data, is to provide a blueprint that organizations interested in replicating the ICAM projects can use to prepare similar projects. Final reports can be found at <https://www.nadtc.org/fta-discretionary-grant-technical-assistance/>.

The majority of ICAM grants are awarded to organizations such as State departments of transportation and FTA grantees in other programs, who are already familiar with FTA's processes. However, several recipients that were new to FTA indicated a need for additional explanation of FTA requirements.

Over the course of the ICAM Program, one or two project awardees decide not to pursue their awarded funds each year. Funds are available for obligation for two fiscal years after the year of allocation, and as a result awardees typically have about 2.5 years from the announcement of project selection to obligate the funding. Failure to obligate funding can occur for a variety of reasons including: the grant recipient is new to FTA funding and does not understand the requirements to become a new recipient or subrecipient; the grant recipient no longer has the local match required to obligate the funding; and/or the grant recipient no longer has the capacity to undertake the project. FTA has developed “New Grant Recipient” resources in order to provide additional technical assistance to our recipients and to expedite the onboarding process.

NADTC conducts an annual, internal independent evaluation of projects and activities that they are involved in. In the 2023-2024 NADTC evaluation report, FTA received the following feedback on the ICAM funding:

1. Grantees desire operating expenses to be eligible under the ICAM program, and
2. Grantees desire the ability to use other Federal funds as the local match on their ICAM grant, similar to FTA's Urbanized Area Formula (Section 5307), Section 5310, and Section 5311 Formula Programs.

The lack of operating funds and the inability to use other Federal funds as local match has been a limitation of the ICAM Program since the Program's inception.

FTA received 42 applications during the FY 2024 ICAM NOFO solicitation period. Of those applications, 18 were ineligible. FTA attributes this increase in ineligible projects to the following two reasons: 1) a lack of understanding that mobility management does not include the cost of operating transportation services and 2) a lack of understanding of the differences between the ICAM Program and FTA's Mobility for Seniors and Individuals with Disabilities formula program (Section 5310). Many of the ineligible ICAM projects proposed would have been eligible as non-traditional Section 5310 Projects. In addition to the issues listed above, several NEMT providers who were applicants did not understand what type of vehicles and equipment were eligible for public transportation funding.

FTA receives a few ineligible applications each year; however, this is the first year the ICAM Program received a significant number of ineligible proposals. To address this, FTA will be creating several new resources to help potential applicants better understand the eligibility requirements under ICAM, including but not limited to: mobility management as a capital expense, the difference between ICAM and FTA's Section 5310 Program, and the type of NEMT vehicles and equipment eligible for FTA funding.

In March 2020, the COVID-19 pandemic began to significantly disrupt the public transportation industry. ICAM Pilot Program participants already operating their pilots faced unexpected barriers to continuing transportation service safely. Some participants suspended or reduced service. Several noted significant ridership declines. As of 2024, some of the grant recipients are still experiencing delays due to low ridership and nationwide supply chain issues with new vehicle purchases. FTA staff worked with each individual ICAM Pilot Project recipient to find implementation solutions during the onset of the pandemic. This included granting project extensions and revisions to budgets and performance measures as well as providing individualized technical assistance. The NADTC is working with each individual project to find innovative ways to sustain their projects after the grant period ends. FTA continues to provide technical assistance to ensure timely completion of the projects.

Appendix A

FY 2016 Rides to Wellness Demonstration Program: Summary of Reported Data and Outcomes

All projects in this table are complete. Final reports describing the sustainability of these projects beyond the initial round of ICAM funding were not required.

| Recipient | Project Description | Project Outcome |
|---|--|--|
| Jacksonville Transportation (Jacksonville, FL) | The Jacksonville Transportation Authority (JTA) received funding to develop a software interface connecting medical scheduling programs and transit schedules to estimate transit travel times and costs for health care receptionists and patients as they choose appointments. The project aims to improve health outcomes by connecting patient appointments with transit availability. | To address the COVID-19 pandemic and recovery process, JTA made a determination to refocus the project on providing itineraries for those with COVID-19 symptoms that would help such passengers maintain social distancing. The redesigned software is also equipped with several tools to facilitate analysis of no-show rates and has several reports that can be downloaded. |
| Rides Mass Transit District (Harrisburg, IL) | The Rides Mass Transit District (RMTD) received funding to establish a One-Call/One-Click Center, expand mobility management services for patients at risk of re-hospitalization, and initiate transportation coordination for patients seeking drug abuse and mental health services in an area with a disproportionately low number of health care providers. | The accessibility improvements offered by adding mobility managers to RMTD call centers were significant enough to warrant adopting the model as part of ongoing operations after the initial project was completed. There was a 36% increase in the number of trips. |

| Recipient | Project Description | Project Outcome |
|--|--|--|
| Montachusett Regional Transit Authority (Fitchburg, MA) | <p>The Montachusett Regional Transit Authority (MART) received funding to implement technology to analyze routing/ dispatching among several providers to integrate management of rides to health care in western Massachusetts and boost underused fixed route and paratransit services. Software will allow paratransit and Council on Aging systems to bid on demand-response, long- term, and shared-ride contracts so people seeking fixed-route, paratransit, and senior ride services can request additional rides or mix rides to maximize efficiencies. It will also determine if a provider has capacity to deliver service.</p> | <p>Overall, the pilot program for MART was unsustainable. Despite outreach, MART was unable to secure the partnerships needed to make the pilot successful. Most of the hospitals/ medical centers were located along MART's fixed bus routes, and the majority of unmet needs were outside of normal service hours. After the program ended, MART launched a Microtransit Project in the City of Fitchburg in FY 2020 that used the concept of building micro-routes around Medicaid rides using a better scheduling engine. This project was a bit more successful, and MART was able to fit some of those non- Medicaid, non-senior rides. However, this was still within normal service hours.</p> |
| Maryland Transit Administrative (Baltimore, MD) | <p>The Maryland Transit Administration received funding to increase capacity of the mobility management program (MMP) that addresses barriers for low-income individuals in Allegany County in western Maryland who lack reliable access to transportation. The project coordinates and provides transportation to and from non-emergency medical appointments at no cost to the individuals and includes transportation coordination software.</p> | <p>This program has helped fill the gap for people who could not afford to pay for transportation or those who had dialysis and medical appointments scheduled at times before local bus companies began running. The MMP program has increased partnership with local UMPC-WM Hospital to get clients to their routine doctor visits, treatments, and surgeries to prevent Emergency Department visits. Program coordinators estimate a 46% decrease in readmission rate for users of MMP who have demonstrated improved health outcomes.</p> |
| Michigan Department of Transportation (Lansing, MI) | <p>The Michigan Department of Transportation received funding to expand a brokerage-based program previously available only in certain parts of the State to a statewide model. The program manages and delivers non- emergency medical transportation for older adults, people with low incomes, and people with disabilities, ensuring they have access to non-emergency health care.</p> | <p>The project sponsor found that it was important to build an infrastructure to find more providers and partners to have a comprehensive transportation program and to be sustainable. The project covered some of the cost of the rides with partners, who will, in the future, pick up that cost to help sustain the service, so people from Michigan have ongoing access to where they need to go for their mental and physical wellness.</p> |

| Recipient | Project Description | Project Outcome |
|---|--|---|
| <p>Flint Mass Transportation Authority (Flint, MI)</p> | <p>The Flint Mass Transportation Authority (MTA) received funding to develop a mobility- management program, including coordinated non-emergency medical transportation, trip planning, and training. The program provides rides to wellness appointments for behavioral health patients, dialysis patients, primary/ urgent care for families, elderly, and elderly disabled patients in Flint and Genesee County, both impacted by Flint's municipal water crisis.</p> | <p>The Flint Mass Transportation Authority (MTA) received funding to develop a mobility- management program, including coordinated non-emergency medical transportation, trip planning, and training. The program provides rides to wellness appointments for behavioral health patients, dialysis patients, primary/ urgent care for families, elderly, and elderly disabled patients in Flint and Genesee County, both impacted by Flint's municipal water crisis.</p> |
| <p>Research Triangle Regional Public Transportation Authority (Durham, NC)</p> | <p>The Research Triangle Regional Public Transportation Authority received funding to expand GoTriangle's Regional Call Center to improve coordinated transit planning and application assistance for paratransit riders who are low income, uninsured, or have mental health special needs.</p> | <p>Project staff trained clinicians in the variety of transportation options available in the area and their eligibility requirements, significantly increasing their comfort with lesser-known modes of transportation and increasing their comfort with booking rides for clients. GoTriangle hired, trained, and supervised a call center operator to be housed at its Regional Call Center. This operator was equipped to help callers determine the best mode of transportation for their individual needs and to connect them directly by phone to those services that required an application process.</p> |
| <p>New Hampshire Department of Transportation (Concord, NH)</p> | <p>The New Hampshire Department of Transportation received funding for technology that bridged the gap between Medicaid-funded transportation brokers and New Hampshire DOT's coordination software vendor system. This innovation is being tested at three pilot sites with the goal of increasing access to transportation for health care appointments for Medicaid recipients, older adults, and people with disabilities.</p> | <p>Of the three pilot sites for the program, only the Cooperative Alliance for Regional Transportation (CART) completed the project. CART accepted 9,420 trips, performed 8,692 trips, and declined 2,154 trips. 22.72% of the trips were shared. The other pilot sites reported difficulty with the software or rates provided and dropped out.</p> |

| Recipient | Project Description | Project Outcome |
|--|---|--|
| <p>Pennsylvania Department of Transportation (Harrisburg, PA)</p> | <p>The Pennsylvania Department of Transportation received funding for a One-Call/ One-Click Center and real-time transportation service serving a three-county area in central Pennsylvania. The project can be broken into three parts: an online eligibility application for human service programs, enhancements to the FindMyRidePA trip planning service, and a collection of educational content intended to inform people how to use human service transportation.</p> | <p>PennDOT successfully implemented the online eligibility application, enhanced the FindMyRidePA trip planner, and developed education content intended to inform people on how to use human service transportation. After the pilot program ended, PennDOT received additional ICAM funds to continue to make improvements to the applications and content developed during the pilot program.</p> |
| <p>Knoxville Area Transit (Knoxville, TN)</p> | <p>Knoxville Area Transit (KAT) received funding to expand the 2-1-1 call center as a single point of entry for older adults and people with disabilities to access transit to health care facilities in the region. The project will improve local coordination and access in the community and train public information staff, health care providers, and residents on how to use KAT buses.</p> | <p>The 2-1-1 call center saw a 54% increase in transit inquiries over the same 9-month period in the previous year (June-Feb). KAT ridership at clinic stops increased after implementation. Western Ave had 548 riders (+11%), Fifth Ave had 584 riders (+12%), Dameron Ave had 33 riders (+0.6%), and Martin Luther King Jr. Ave had 472 riders (+10%).</p> |
| <p>Vermont Agency of Transportation (Montpelier, VT)</p> | <p>The Vermont Agency of Transportation (VTrans) received \$170,000 to establish pilot projects for a program to ensure that patients of partner healthcare agencies are able to attend their medical and wellness appointments. The project included funds to develop the program with the assistance of a consultant and working with local partner committees, and funds to provide transportation—through taxis, volunteer drivers, gas cards, and transit agency vans and buses—when no other funding program was applicable or available.</p> | <p>The project has provided 328 rides and/or gas cards to Northeast Kingdom Human Services, Mt. Ascutney Hospital and Health Center, Gifford Health Care, and Community Health Services of the Lamoille Valley. COVID-19 had a major impact on transportation demand and greatly reduced the need for assistance through the Rides to Wellness program.</p> |

Appendix B

FY 2018 Access and Mobility Partnership Grants: Summary of Proposed Performance Measures and Targets

All projects in this table are complete except where indicated in the footnotes. Final reports for the completed projects can be found [here](#).

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|--|---|--|
| Aaron E. Henry Community Health Services Center, Inc. (Clarksdale, MS) | Aaron E. Henry Community Health Services Center, Inc. received funding to launch a Rides to Recovery (R2R) Program to address NEMT services by increasing focus on preventive care, mental health, and substance abuse treatment in response to the opioid epidemic. | Access to services using mobile technology; Customer satisfaction for Rides to Recovery service; Healthcare related trips; Emergency room rate of use for health center patients. | Final Results: Rides to Recovery decreased emergency room utilization by 31%; provided 1,231 one-way trips to health care related wellness services and a 15% decrease in the number of missed appointments. Due to the pandemic, there was a 90% reduction in ridership. The R2R program provided other support services to address social determinants of health, partnering with local non-profit organizations to address food insecurity, delivering meals to older adults daily. |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|---|---|---|
| <p>Boat People S.O.S., Inc. (Falls Church, VA)</p> | <p>Boat People S.O.S., Inc. received funding for the Health Awareness and Promotion Program (HAPP). This transportation project will increase access to public transportation for 200 Vietnamese American older adults with limited English and individuals with disabilities residing in Northern Virginia by improving the coordination of transportation services and non-emergency medical transportation services and expanding public transportation options.</p> | <p>Number of referrals using e-referral system; Number of participants who gain access to preventive health services; Number of participants who utilize preventative services; Number of guidebooks distributed to the seniors and people with disabilities; Number of participants who are connected to wrap-around services; Number of trainings provided to participants; Number of participants who use the transportation services.</p> | <p>Final Results: 171 clients served; 1,016 guidebooks and 13,498 flyers distributed; 27 workshops conducted with a total of 534 participants; placed 240 ads in local newspapers; and posted 175 PSAs estimated to reach to 94,000 people.</p> |
| <p>Capacity Builders, Inc. (Farmington, NM)</p> | <p>Capacity Builders, Inc. received funding for a project focusing on transportation services to non-emergency medical services for older adults and people with disabilities populations in Northwest New Mexico and Montezuma County, Colorado. The project will increase affordable access to care, improve health outcomes, and reduce healthcare costs in a predominantly rural region.</p> | <p>Number of unduplicated rides; Number of medical trips provided; Percent of rides that arrive to destination on time.</p> | <p>Final Results: 7,509 unduplicated rides by new riders; 740 medical trips; 77% of rides arrived to destination on time; 85% of riders said they would continue to use the Let's Go – Safe Ride App.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|---|---|--|
| <p>Capitol Hill Village (Washington, DC)</p> | <p>Capitol Hill Village received funding to improve health outcomes of low-income seniors and persons with disabilities by developing transportation skills through a travel training program designed to increase clients' transportation awareness, knowledge, and confidence. Peer Support Health Educators will work one-on-one with clients to assess transportation needs, enroll in appropriate transportation, and assist in planning medical visits.</p> | <p>Number of project partners; Number of peer health educators; Number of volunteers from community members; Engagement in Capitol Hill Village programs.</p> | <p>Final Results: 4 Key Partnerships (Capitol Hill Towers, DC Wellness Centers and DACL Community Dining Sites, Transportation Service Providers, and Sharp Insight LLC); 17 peer partners; 3 peer health educators (PHE); the PHE supported 35 individuals in a total of 49 encounters.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|--|--|---|
| <p>Central Midlands Regional Transit Authority (Columbia, SC)</p> | <p>The Central Midlands Regional Transit Authority established best practices in transportation for coordinated care in serving veterans, seniors, and single parents with Mobility-as-a-Service. They will create a first- and last-mile shuttle system to increase use of the fixed route transit services for accessing medical care as well as a door-to-door shuttle for those needing critical care.</p> | <p>Number of nurses, social workers, and Medical Support Personnel Trained to use the AARP Ride@50+ platform to book rides for patients; Number of unique passengers using the first/last mile service provided by the partnership to book rides; Number of taskforce meetings for Medical and Health Community Members held; Number of non-profit/agency partners collaborating with the COMET/Feonix; Number of trips booked; Number of community public meetings held to educate members of the public.</p> | <p>Final Results: 37 Nurses, Social Workers, and Medical Support personnel were trained to use the AARP Ride@50+ platform to book rides for patients; 120 Unique passengers used the first/last mile and door-to-door service provided by the partnership to book rides online; 18 Taskforce meetings for Medical and Health Community members were held throughout the grant to discuss the technology and implementation; 12 Non-profit/agency partners collaborated with The COMET/ Feonix to provide supportive service for individuals to access medical facilities; 1,735 trips were booked by community health workers/medical personnel; 1,250 trips completed.</p> |
| <p>Council on Aging of Southwestern Ohio (Cincinnati, OH)</p> | <p>The Council on Aging of Southwestern Ohio received funding to implement an On-Demand Transportation service and Coordination of NEMT for older adults in the Cincinnati Region titled home52 Transportation.</p> | <p>Number of rides; Number of rides that arrive on time; Customer satisfaction survey.</p> | <p>Final Results: A total of 8,585 one-way trips were coordinated; 87.8% of rides arrived to the destination on time; 82.4% of clients rated the quality of home Transportation excellent or very good.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|--|--|---|
| <p>Disability Services Inc., dba Envida (Colorado Springs, CO)</p> | <p>Disability Services, Inc. received funding to purchase vehicles and scheduling and routing software to increase access to health-care. Additionally, a Mobility Manager will increase coordination and foster partnerships with the healthcare services in the community.</p> | <p>Number of monthly NEMT rides for behavioral health (BH) delivered by Envida; No- shows to BH appointments; Canceled BH appts; The grant recipient will also conduct pre- and post-BH quantitative and qualitative patient & provider surveys.</p> | <p>Final Results: 581 total rides were delivered; 7 clients were no- shows; 37 clients canceled; 59 new clients were enrolled; 30 clients were surveyed. Envida reduced emergency transport (healthcare) costs per ride by 40 percent; Envida increased access to care for its riders monthly by 20 percent; 50 percent of Envida riders said their behavioral health outcomes have improved.</p> |
| <p>Flint Mass Transportation Authority (Flint, MI)</p> | <p>Flint Mass Transportation Authority received funding to increase access to a highly responsive, on-demand non-emergency medical transportation services for seniors and person with disabilities.</p> | <p>Number of rides provided for hospitals and related organizations; Number of rides provided to seniors; Number of trips booked through online scheduling; Number of senior living facilities utilizing Rides to Wellness for clients; Mobility Navigator hired for coordination with hospital.</p> | <p>Final Results: Rides to Wellness increased service to seniors by 218%, increased services to hospitals by 105%, increased rides booked via the portal by 227%. A Mobility Navigator was hired and the service is partnered with 13 dialysis centers.</p> |
| <p>Geisinger Clinic (Danville, PA)</p> | <p>Geisinger Clinic received funding to employ an innovative approach to increase access to healthcare by combining Mobility Management and Technology Solutions.</p> | <p>Expand to community planner; hire a second mobility manger; number of discharge trips; secure relationship with AI vendor; Customer satisfaction survey distributed to participants; Number of rides provided to unique patients.</p> | <p>Final Results: Geisinger expanded to 1 community planner; hired a second mobility manager; provided 490 discharge trips; secured a relationship with an AI vendor; surveyed 323 total riders; and provided 10,371 total trips.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|---|---|--|
| <p>Indiana University Health, Inc. (Indianapolis, IN)</p> | <p>Indiana University Health Inc. (IU Health) received funding to purchase an innovative software platform that will reduce transportation barriers to healthcare for patients in numerous locations in Indiana through the deployment of patient transportation assistance coordination technology at Indiana University Health.</p> | <p>Indiana University Health, Inc will track: Trips booked through scheduling software; Number of Patients served (unique encounters); Number of Rides for hospital inpatient/emergency room discharges to home or extended care; Number of Trips to/from rural areas; Number of trips to/from high-risk zip codes; Number of non-emergency medical transportation rides (use of specialty vehicles).</p> | <p>Final Results: IU Health's proposed outcomes included increasing access to healthcare services by 25% through the use of transportation coordination technology. However, the project ultimately failed due to the local nonemergency medical transportation provider's inability to meet IU Health's security requirements to integrate the provider's scheduling platform with IU Health's medical record system. The program was terminated prior to being launched and before the outcomes could be realized.</p> |
| <p>Missouri Rural Health Association (Jefferson City, MO)</p> | <p>Missouri Rural Health Association (MRHA) received funding to enhance Health Care Access in rural Missouri through the employment of Mobility Management strategies.</p> | <p>Number of ride referrals; Size of service area; Number of HealthTran memberships.</p> | <p>Final Results: More than two thirds of the State (82 counties) are familiar with the service and benefits of health providers supporting transportation. 3,360 ride referrals; service area increased by 44 counties; and 20 new health provider memberships.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|--|---|--|
| <p>North Central Texas Council of Governments (Arlington, TX)</p> | <p>The North Central Texas Council of Governments received funding to implement My Ride North Texas 2.0, a regional mobility management program to improve the coordination of transportation and medical services. Leveraging healthcare and transportation-focused partnerships in the North Central Texas 16-county region, the project will support new and current mobility management efforts to identify and address specific populations that lack transportation to wellness resources.</p> | <p>Number of trips counseled; Number of individuals connected to a transit provider; Number of outreach events and presentations to promote services; Number of Regional Partner Meetings; Number of Mobility Management trainings and presentations; Number of new Regional Mobility Management members.</p> | <p>Final Results: 3,207 trips counseled; 1,540 individuals connected to a transit provider; 236 outreach events and presentations; 8 Regional Partner Meetings; 4 mobility management trainings and presentations; 5 new Regional Mobility Management members Increased access to transit navigation services and referrals by 55 percent; Improved coordination of transit services and increase regional engagement by 75 percent.</p> |
| <p>People For People (Yakima, WA)</p> | <p>People for People received funding to improve coordination of patient access to healthcare using the software platform Goin. Goin provides real-time coordination for transportation and healthcare partners to monitor whether a client was picked up or not, vehicle capacity, expected time of arrival, weather, and travel conditions. Transportation and healthcare costs are reduced by filling vacant seats and accurately scheduling medical teams.</p> | <p>Number of rides; Number of no-shows/canceled trips to Seattle Children's hospital; Number of Patients called by Greater Columbia 2-1-1 to verify trips; Customer survey of service provided.</p> | <p>Final Results: 510 trips were made to Seattle Children's Hospital in 2021; 587 trips were made to Seattle Children's Hospital in 2022; there were 21 no-shows and 132 cancelled trips in 2021; there were 30 no-shows and 155 cancelled trips in 2022; 50 percent of patients were called by Greater Columbia 2-1-1; 50 percent of customers were satisfied with the service provided.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|--|--|--|
| <p>Pinellas Suncoast Transit Authority (St. Petersburg, FL)</p> | <p>Pinellas Suncoast Transit Authority received funding to purchase software technology that integrates accessible vehicles into the existing on-demand dispatch platform. This project is a partnership with the Transit Authority and several health and human services agencies in the region.</p> | <p>Average trips per month; Survey of clients' satisfaction with the transportation service; Average duration between trip request and pick-up for wheelchair/ scooter users; Number and type of users who use the mobility on demand program.</p> | <p>Final Results: 10% increase in monthly wheelchair use of the Mobility on Demand Program. There was no change in their satisfaction surveys or the average wait time between trips. However, they learned that fare equity and same-day service are valued more than Estimate Time of Arrival disparities for their customers.</p> |
| <p>Pioneer Valley Transit Authority (Springfield, MA)</p> | <p>Pioneer Valley Transit Authority received funding for a pilot program to purchase transportation services through brokerage system in partnership with Ride-Care of Pioneer Valley. This service will connect vulnerable patients to the best transportation option available, and thereby reduce waste in the Medicaid system.</p> | <p>Percentage of no-shows at Be Healthy Accountable Care Organization facilities; Understanding of transportation options among medical staff; Reported stress and discouragement from trying to navigate the transportation system among patients; Number of patients reached through Transportation Specialist services.</p> | <p>Final Results: The Transportation Specialist at Caring Health Center served 508 patients and helped schedule 1,817 appointments on their dedicated van services. More than 70% of patients served used the service 1-3 times and about 5 percent used the service 12 times or more. The Transportation Specialist at Baystate Health directly served 79 patients and scheduled 257 appointments. More than half (54%) of the appointments arranged by the transportation specialist were successfully completed and only 7% resulted in no-shows (much lower than the 20% norm for the whole patient population in 2019).</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|--|---|--|
| <p style="text-align: center;">Ride Connection, Inc. (Portland, OR)</p> | <p>Ride Connection, Inc. received funding to increase access to health-care services by providing mobility management services, in partnership with Providence Health Services, a major regional healthcare system. A Ride Connection Mobility Specialist will collaborate with staff from two hospital locations and local social services provider to provide individual travel options, counseling, and clinic level support to integrate transportation referrals.</p> | <p>Number of clients/patient interactions; Number of clinical staff and other stakeholder interactions; Number of transportation champions engaged; Number of rides provided; Number of completed surveys; Number of total members of cohort; Number of cohort members with positive health outcomes.</p> | <p>Final Results: 430 clients/patient interactions; 180 clinical staff and other stakeholder interactions; 31 transportation champions engaged; 3505 Rides provided; 158 Completed surveys; 38 Total members of cohort tracked; 29 cohort members with positive health outcomes.</p> |
| <p style="text-align: center;">San Diego Metropolitan Transit System (San Diego, CA)⁵</p> | <p>San Diego Metropolitan Transit System received funding to enhance the automated and web reservation system for arranging Non-Emergency Medical Transportation trips.</p> | <p>San Diego Metropolitan will track: Number of clients registered to use PASS WEB; Number of trips booked through PASS WEB; Number of fares paid through cashless fare system; IVR notifications sent to clients on a monthly basis.</p> | <p>Target: This recipient is currently revising their outcomes measures. The project period of performance has been extended to June 30, 2025.</p> |

⁵ This project is still underway.

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|--|---|--|
| <p>Southern Highlands Community Mental Health Center, Inc. (Princeton, WV)</p> | <p>The Southern Highlands Community Mental Health Center, Inc. received funding to increase access to health-care with the purchase of accessible vans and the employment of a mobility manager. The center will implement the Transportation for Rural Appalachian Communities Program (TRAC), which will transport a vulnerable, underserved population in rural southern West Virginia by coordinating and providing non-emergency medical home-to-service transport for clients via a 7-vehicle fleet.</p> | <p>Missed appointment rate; Agency census; Transportation for Rural Appalachian Communities Program (TRAC) usage.</p> | <p>Final Results: Outpatient visits increased and the rate of missed appointments decreased. Trac usage reached 21% of agency clients in counties served. A total of 661 rides were provided between July 2021 and April 2023.</p> |
| <p>SouthWest Transit (Eden Prairie, MN)</p> | <p>SouthWest Prime MD received funding to implement an innovative approach to providing NEMT through public microtransit services to hospitals, medical centers, and clinics in and around the designated service area.</p> | <p>Number of riders dropped off on time for their scheduled medical appointment; Passengers per service mile; Fulfilled trips; Average customer satisfaction score.</p> | <p>Target: 80% of riders dropped off on time for scheduled appointment; At least 2 passengers per service mile; 80% of requested trips fulfilled; Average customer satisfaction score is at least 4.0 out of 5.0.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|---|---|--|
| <p>Southwestern WI Community Action Program, Inc. (Dodgeville, WI)</p> | <p>Southwestern WI Community Action Program, Inc. received funding to implement a travel management Coordination Center. The Center will improve coordination of NEMT transportation in nine counties of WI through the implementation of a technology solution with a NEMT-focused mobility manager.</p> | <p>Number of new, unduplicated passengers per month; Average monthly rides provided; Number of missed follow-up appointments after hospital stays.</p> | <p>Final Results: Average monthly increase of 2 unduplicated passengers; 46 average monthly rides provided; reduced missed appointment by 10 percent.</p> |
| <p>The C. W. Williams Community Health Center, Inc. (Charlotte, NC)</p> | <p>The C. W. Williams Community Health Center, Inc. (CWWCHC) received funding to expand access to quality healthcare for transportation disadvantaged populations in Mecklenburg County and surrounding communities.</p> | <p>Number of unique clients receiving rides to primary and preventative healthcare; Rate of program participants keeping appointments with primary care provider; Number of program participants reporting improved adherence to medication and treatment plans; Number of Program Participants reporting CWWCHC as their medical home.</p> | <p>Final Results: 720 unduplicated clients received rides to primary and preventative healthcare; 78% of program participants kept appointments with primary care provider 80% of the time; 76% of program participants reported improved adherence to medication and treatment plans; 82% of program participants reported CWWCHC as their medical home; 93% of program participants reported improved health status.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|--|---|--|
| <p>Utah Transit Authority (Salt Lake City, UT)</p> | <p>Utah Transit Authority received funding to purchase Electronic Voucher (E-Voucher) Software Development in partnership with Jacksonville Transit Authority (JTA), Community Health IT (CommHIT), and Cambridge Systematics (CS).</p> | <p>Number of clients served; Number of canceled medical appointments.</p> | <p>Final Results: 671 unlinked trips were provided for 128 riders.</p> |
| <p>West River Transit Authority, Inc. (Spearfish, SD)</p> | <p>West River Transit Authority, Inc. received funding to expand services for medical and other rides by increasing customer access via smartphone apps for ride booking, cancellation and confirmation, with ease of use enabling access for more people.</p> | <p>Total ride requests, changes and cancellations received through the app or online customer portal; average rides per active customer; number of unique active customers.</p> | <p>Final Results: 2040 total rides; 750 trips were cancelled or changed; the app had 120 active users.</p> |

Appendix C

FY 2020 Mobility for All Pilot Program Grants: Summary of Proposed Performance Measures and Targets

As of September 2024, all projects in this table are in progress, except where the outcomes have been noted as “Final Results”. Projects with “Final Results” are complete.

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---------------------------------------|---|---|--|
| Access Services (El Monte, CA) | Access Services received funding for an Accessible Traveler Mobile App (ATMA) with a focus primarily on Americans with Disabilities Act (ADA) transportation services that is fully compliant with the ADA Section 508 Accessibility and Web Content. | Access to services using mobile technology; Customer satisfaction for Rides to Recovery service; Healthcare related trips; Emergency room rate of use for health center patients Access Services will procure, develop/design, and integrate a paratransit app within its existing service. | Final Results: More than 9,700 users downloaded and registered to use the Where's My Ride App and an average of 10,000 estimated time of arrival were requested. The app had a 93% repeat user rate. Access Services expanded its Where's My Ride app to include the following functions: trip planning, trip booking, trip cancellation and integrated mobile fare payment solutions. |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|---|---|--|
| <p>Metropolitan Washington Council of Governments (MWCOG) (Washington, DC)</p> | <p>The Rides to Health pilot project received funding to develop a technology platform which will integrate and synchronize transportation services to/from dialysis centers for underserved populations.</p> | <p>Number of pickups from dialysis centers; Number of pickups from patient homes; Improvement in one-time performance (5-min increments); Reduction in wait time for transportation home following dialysis treatment; Number of patients serviced with the Rides to Health platform.</p> | <p>Final Results: 7,742 pickups from the dialysis center; 5,418 pickups from patient homes; 36.7 percent of trips to the dialysis center arrived within 5 minutes of requested time; 55.6 percent of trips to the dialysis center arrived within 10 minutes of the requested time; 67.2 percent of trips to the dialysis center arrived within 15 minutes; 30.9 percent of trips home from the dialysis center arrived within 5 minutes; 41.4 percent of trips home from the dialysis center arrived within 10 minutes; 48.2 percent of the trips home from the dialysis center; 646 patients utilized the Rides to Health platform.</p> |
| <p>Georgia Department of Transportation (Atlanta, GA)</p> | <p>Georgia Department of Transportation received funding to implement a new Rural Transit and Human Services Transportation (RHST) Regional Program and a trip scheduling app and website, with a pilot in Coastal Georgia.</p> | <p>Increase in unduplicated riders utilizing Coastal Regional Commission (CRC) services; Increase the number of transit partners within the community; Develop and launch tailored outreach events; Develop rider satisfaction and provider surveys.</p> | <p>Target: 75% of the Department of Human Services (DHS) Regional Transportation Coordinating Committee agree that coordination has improved. 75% of the DHS Regional Transportation Coordinating Committee agree that accessibility has improved. The project period of performance has been extended to September 2025.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|---|---|--|
| <p>Iowa Department of Transportation (Ames, IA)</p> | <p>The Iowa Department of Transportation received funding on behalf of Heart of Iowa Regional Transit Agency (HIRTA) to implement a travel training program designed to make a powerful impact, through education, marketing and partnerships on the benefits of keeping people mobile.</p> | <p>Number of program website views; Number of local facility partnerships; Implement travel training; Number of social media post and views.</p> | <p>1,369 website views, 20 local facility partnerships; implemented 3 travel trainings; hosted 7 social media events.</p> |
| <p>Regional Transit Authority (RTA) (New Orleans, LA)</p> | <p>New Orleans RTA received funding for a program entitled MOVE East NOLA. Mobility On- Demand Vehicle Express (MOVE) is a pilot that will provide better connectivity for people with low income, older adults, and people with disabilities.</p> | <p>Number of passengers who board per Vehicle per Hour; Percent of rides that arrive on time; The average travel time in minutes; The average cost of rides; customer satisfaction.</p> | <p>Target: 80% customers satisfied with RTA Flex meeting community needs.</p> |
| <p>MetroWest Regional Transit Authority (MWRTA) (Framingham, MA)</p> | <p>MWRTA received funding to test a new accessibility model with complementary technology for demand response services.</p> | <p>Number of trips provided to otherwise ineligible individuals; Rides Provided-Trips booked for same day medical; Satisfaction with Smartphone App-Average rating through in-app feedback.</p> | <p>Final Results: 7,423 Same Day Medical Trips Provided; 10,924 Trips Provided to Otherwise Ineligible Individuals; 3.65 out of 5 Smartphone App-Average rating. MWRTA expanded microtransit services to other communities due to the success of this project and continues to expand their services as funding becomes available.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|---|---|--|
| Maryland Transit Administration (MTA) on Behalf of Bayside Community Network, Inc. (Baltimore, MD) | The MTA received funding on behalf of Bayside Community Network, Inc. to hire a Mobility Manager that will serve to increase community coordination of transportation efforts to serve the disabled community in Cecil County. | Number of direct referrals of Cecil Transit customers. | Final Results: Bayside hired a mobility manager who was able to develop a direct referral process with Cecil Transit to provide NEMT rides to customers who needed specialized transportation services/vehicles. 3 Bayside Consumers were identified for the Travel Training Program. |
| Maine Department of Transportation (DOT) (Augusta, ME) | Maine DOT received funding for Flex route bus system pilot program which will be launched in three phases with strong emphasis on technology, safety, inclusion for disadvantaged populations, enhanced mobility for seniors and individuals with disabilities. | Increase general public transit ridership. | Target: Increase general public ridership by 10%. |
| Flint Mass Transportation Authority (Flint, MI) | A pilot project that will improve coordination and increase access to highly responsive, on-demand NEMT with a primary focus on both Veterans and individuals with substance use disorders. | Number of trips provided to Veterans who are accessing health and wellness services; Number of trips provided to passengers accessing substance abuse and/or mental health treatment; Number of partnerships with substance abuse treatment programs. | Final Results: 9,348 trips provided to Veterans; 5,492 trips provided to passengers accessing substance abuse and/or mental health treatment; 6 vehicles procured; 2 partnerships with substance abuse treatment programs was developed. The project increased access to care, improved health outcomes, and reduced healthcare costs. |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|--|---|---|
| <p>Missouri Rural Health Association (Concordia, MO)</p> | <p>Funding will be used to implement a Statewide Rural Mobility Manager and Statewide Transportation Manager to form a state-wide technical assistance platform for rural mobility management and transportation coordination.</p> | <p>Increase number of certified mobility managers, volunteer drivers, and rides.</p> | <p>Final Results: A Mobility Management Certificate Program was fully implemented. A total of 46 students were enrolled at project closeout. 103 volunteer drivers, provided 8,391 rides for 965 unduplicated individuals, and provided services in 55 Missouri counties.</p> |
| <p>North Carolina Department of Transportation (NCDOT) (Raleigh, NC)</p> | <p>NCDOT received funding for the acquisition of scheduling software and integration of that software with NCCARE360, creating an efficient point of entry to connect underserved populations with transportation.</p> | <p>The number of same day trips; The number of trips with an NCCARE360 case number; The number of clients originating from NCCARE360; The number of unduplicated active riders.</p> | <p>Target: Increase the percentage change in average # of individual quarterly trips by 5%.</p> |
| <p>Regional Transportation Commission (RTC) of Southern Nevada (Las Vegas, NV)</p> | <p>RTC received funding to build a mobile learning lab to train and educate transportation disadvantaged individuals on technology and resources to improve mobility access to services in our community.</p> | <p>Percentage of new customers trained through the Mobility Lab; Percentage of new riders.</p> | <p>Target: 25% increase in customers trained through the Mobility Lab on emerging technology and the use and benefits of affordable fixed route transportation; 25% of previous non-riders trying fixed route for the first time.</p> |
| <p>Lane Transit District (LTD) (Eugene, OR)</p> | <p>LTD received funding for its technology innovation project to eliminate barriers to transportation to improve health outcomes and decrease health disparities experienced by disadvantaged communities.</p> | <p>Number of phone calls; Number of customer service complaints; Arrival and departure data from external providers.</p> | <p>Target: 30% decrease in RideSource no-show trips per year (less than 10,000).</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|---|--|---|--|
| <p>Oregon Department of Transportation (Salem, OR)</p> | <p>Funding will be used to extend existing transit data standards (GTFS, GTFS-flex) to serve all. The project will build open- source transit discovery and analysis tools on a data foundation of standardized transit data.</p> | <p>Number of Advisory Group members participating; Number of Members on project communication and outreach email list; Number of Webinar Views.</p> | <p>Final Results: ODOT has a total of 34 people on their Advisory Group; 136 signed- up for their project communication and outreach email list; and 117 views of their webinar.</p> |
| <p>Greenville Pickens Area Transportation Study (GPATS) (Greenville, SC)</p> | <p>GPATS received funding on behalf of Carolinas Access & Mobility for All Coordination (CAMAC) which serves as the lead agency to increase Mobility for All, partnering with Human Services Agencies to implement a coordinated system for older adults, persons with a disability, and low- income citizens utilizing Mobility as a Service Model with the installation of a demand response software application.</p> | <p>Percentage of new riders utilizing RIDES+.</p> | <p>Target: 25% increase in ridership of users going to work, utilizing RIDES.</p> |

| Recipient | Project Description | Performance Measures | Targeted or Final Outcomes |
|--|--|--|--|
| <p>Virginia Department of Rail and Public Transportation (VDRPT) (Richmond, VA)</p> | <p>VDRPT received funding to develop and implement a one-click directory of public, human service, and specialized transportation mobility management travel training and transportation-supportive programs and services.</p> | <p>Number of visits to VirginiaNavigator, including its subsites, SeniorNavigator, disAbilityNavigator, and VeteransNavigator, to TransportationNavigator.</p> | <p>Final Results: Of the visits to Transportation Navigator, less than 1% were from the Senior/Veterans/Disability Navigator pages; the TransportationNavigator widget had 577 visits (almost 6 times 100 visit goal) by the end of the project; the transportation resources were viewed on average 23,000 times per month.</p> |

Appendix D

FY 2021 Innovative Coordinated Access and Mobility Pilot Program Grants: Project Descriptions

Grants for the projects in this section have been obligated except where indicated. Two of the projects withdrew from the program. Grants for these projects were obligated in FY 2024 and will establish performance measures and targeted outcomes in FY 2025.

| Recipient | Project Description |
|---|---|
| Full Access and Coordinated Transportation Inc. (FACT) (Sacramento, CA) | Develop contactless payment and reservation app. |
| Disability Services, Inc, dba, Envida (Colorado Springs, CO)⁶ | Design, test, and implement a software that streamlines the Medicaid reimbursement process. |
| Southwest Colorado Council of Governments (Durango, CO) | Build a software platform to support a regional one-call/one-click digital mobility hub to digitize information from providers across the region. |
| Metropolitan Washington Council of Governments (Washington, DC) | Convene a consortium of regional stakeholders to move the existing Reach a Ride platform towards a one-call, one-click Information and Referral/Assistance tool for transportation options in the region. |
| G1VE ATLANTA (Marietta, GA)⁷ | Obtain the software, hardware, and training necessary to schedule rides for partners throughout Georgia. |
| City of Salem (Salem, MA)⁸ | Improve the coordination of transportation services by allowing providers to book scheduled and on-demand rides for distinct or recurring appointments. |
| Michigan Department of Transportation (Lansing, MI) | Place electric vans and charging stations in rural areas to allow for expanded Rides To Wellness transportation for non-emergency medical purposes. |
| Missouri Rural Health Association (Jefferson City, MO) | Improve Access for All through a centralized location housing education, information, and resources for mobility management and coordination. |

⁶ This project withdrew.

⁷ This project withdrew.

⁸ This project is unobligated.

| Recipient | Project Description |
|---|---|
| City of Winston-Salem / Winston-Salem Transit Authority (Winston-Salem, NC) | Improve the notification and tracking of para-transit services and implement a regional fare system. |
| Lifespan of Greater Rochester Inc. (Rochester, NY) | Expand the capabilities of the Finger Lakes regional 1-Click web portal to include scheduling and payment of trips provided by public transit and non-transit community transportation providers. |
| Ohio Department of Transportation (Columbus, OH) | Select and fund a local lead agency to implement and pilot the Regional Transportation Resource Center (RTRC) in a four-county area. |
| Central Oklahoma Transportation and Parking Authority (COTPA) dba EMBARK (Oklahoma City, OK) | Replace the existing paratransit scheduling software system with a next generation mobility coordination and scheduling software system. |
| Pennsylvania Department of Transportation (Harrisburg, PA) | Extend Pennsylvania's Find My Ride (FMR) platform by allowing Medicaid consumers to submit requests for fixed route tickets and reimbursements for out-of-pocket travel expenses. |
| Rhode Island Public Transit Authority (RIPTA) (Providence, RI) | Enhance statewide mobility for the Rhode Island Travel Training Network. |
| Panhandle Regional Planning Commission (Amarillo, TX) | Purchase an accessible van and build a program for ride share/taxi vouchers. |
| Summit County (Coalville, UT) | Expand the existing High Valley Transit (HVT) service into areas of the County where communities currently face significant healthcare access challenges. |
| Virginia Department of Rail and Public Transportation (DRPT) (Richmond, VA) | Expand and enhance Virginia's One-Call/One-Click directory of public, human service, and specialized transportation; mobility management; travel training; and transportation-supportive programs and services. |

Appendix E

FY 2024 Innovative Coordinated Access and Mobility Pilot Program Grants: Project Descriptions

The projects in this section were selected in June 2024 and grants have not been obligated yet. Performance measures and targeted outcomes will be established after the grants for the projects are obligated and the recipients begin implementing the projects.

| Recipient | Project Description |
|--|--|
| <p>Paratransit, Inc. (Sacramento, CA)</p> | <p>Paratransit, Inc., located in Sacramento, CA., received funding to make dispatching technology investments focused on real-time coordination and efficient routing, that will improve service delivery. This project will expand a digital platform for enhancing service coordination, data-gathering, and operational efficiencies for mobility services offered to older adults, persons with disabilities, and community members that experience severe mobility barriers throughout Sacramento County.</p> |
| <p>Horizons, A Family Service Alliance (Cedar Rapids, IA)</p> | <p>Horizons, A Family Service Alliance (Horizons Neighborhood Transportation Service), located in Cedar Rapids IA., received funding to purchase vehicles equipped with the latest on-demand software and to integrate advanced ride booking portal systems across the service area. This project will ensure safe, affordable, on-demand transportation for individuals in need of services when fixed route public transportation is not available.</p> |
| <p>Iowa Department of Transportation (Ames, IA)</p> | <p>The Iowa Department of Transportation on behalf of Heart of Iowa Regional Transit Authority (HIRTA) received funding to upgrade its on-demand scheduling software, purchase new hybrid-electric vehicles, and hire a mobility manager. This project will ensure continued mobility for older adults and riders with disabilities who utilize HIRTA services in Boone, Dallas, Jasper, Madison, Marion, Story and Warren counties in central Iowa.</p> |

| Recipient | Project Description |
|---|--|
| <p>Illinois Department of Transportation (Springfield, IL)</p> | <p>The Illinois Department of Transportation (IDOT) received funding to design and implement an integrated technology system for trip scheduling and fare collection that will facilitate non-emergency medical transportation trips and interagency passenger transfers. This program will initiate technology enhancements to improve mobility access to more than 20 rural counties in southern Illinois, through IDOT's transit partners, Shawnee Mass Transit, Rides Mass Transit, South Central Mass Transit, and Monroe Randolph Mass Transit.</p> |
| <p>Rapides Area Planning Commission (Alexandria, LA)</p> | <p>The Rapides Area Planning Commission, located in Central Louisiana, received funding to address socio-economic and mobility issues in the region by constructing a centrally-located maintenance and training facility. The facility will be used by six rural transit providers and 13 providers of transportation for older adults and people with disabilities, enhancing the coordinated delivery of service across a multi-parish service area.</p> |
| <p>Massachusetts Department of Transportation (Boston, MA)</p> | <p>The Massachusetts Department of Transportation (MassDOT) received funding to pilot a Statewide Mobility Management Program. MassDOT will work closely with a steering committee that includes partner State agencies which lead and manage statewide programs and initiatives related to aging and disability. The goal of the statewide mobility management pilot is to improve the accessibility, efficiency and availability of transportation services for residents of the Commonwealth, focused on older adults, people with disabilities and people of low income.</p> |
| <p>Maine Department of Transportation (Augusta, ME)</p> | <p>The Maine Department of Transportation, on behalf of York County Community Action Corp, received funding to establish a Mobility Management Hub with a dedicated full-time Mobility Manager; facilitate coordination and provide technical assistance to develop a one-call one-click service, and launch the York County Mobility Network, a regional multi-sector work group.</p> |

| Recipient | Project Description |
|---|---|
| <p>Michigan Department of Transportation (Lansing, MI)</p> | <p>The Michigan Department of Transportation, in cooperation with the Michigan Transportation Connection, Inc., received funding to purchase electric/hybrid vehicles and charging stations in Delta, Ionia, Benzie, Clare and Ludington/Mason Counties to allow for expanded Rides To Wellness coordinated transportation for non-emergency medical purposes.</p> |
| <p>Capacity Builders Inc. (Farmington, NM)</p> | <p>Capacity Builders, a nonprofit organization in Farmington, New Mexico, received funding to purchase new vehicles to expand the capacity of the coordinated transportation services for low-income individuals, older adults, and people with disabilities, mainly in San Juan County and McKinley County New Mexico. The regional mobility pilot project enables comprehensive community access through coordination and centralized management of resources, including access to non-emergency medical transportation.</p> |
| <p>Fallon Paiute Shoshone Tribe (Fallon, NV)</p> | <p>The Fallon Paiute Shoshone Tribe, located in northwestern Nevada, received funding to purchase an ADA-compliant passenger van that will increase the capacity and reliability of the existing coordinated transportation service provided by the Tribe. The Fallon Paiute Shoshone Tribal Transit Program partners with the Fallon Tribal Health Center to provide non-emergency medical transportation, and the purchase of this vehicle will strengthen that partnership and partnerships with other human service agencies in the region, by enabling more service to be provided.</p> |
| <p>Central Oklahoma Transportation and Parking Authority (Oklahoma City, OK)</p> | <p>The Central Oklahoma Transportation and Parking Authority (EMBARK) received funding to support the expansion of the existing coordinated transportation services through the purchase of two vehicles and associated vehicle technology systems. This project will meet the growing transportation demand for older adults, people with disabilities, low-income and transit-dependent populations with improved access to social services, education programs, workforce development programs, non-emergency medical treatment, and wellness and nutrition services throughout Oklahoma City.</p> |

| Recipient | Project Description |
|---|--|
| <p>Pennsylvania Department of Transportation (Harrisburg, PA)</p> | <p>The Pennsylvania Department of Transportation received funding to enhance its Find My Ride (FMR) program, a web-based platform system designed to serve as a one stop shop for Human Services Transportation in the State. This project will create usability enhancements, incorporate mobility management tools, and integrate the current system with the statewide PA 211 system.</p> |
| <p>Community Coordinated Transportation Systems (River Cities Public Transit) (Pierre, SD)</p> | <p>The Community Coordinated Transportation Systems (River Cities Public Transit) received funding to purchase three vehicles to expand the availability of medical transportation services to older adults, people with disabilities, and the general public. This project will improve service and reliability for residents located in Martin, South Dakota (Pine Ridge Indian Reservation), Philip, South Dakota, and Eagle Butte, South Dakota (Cheyenne River Sioux Tribe Reservation).</p> |
| <p>West River Transit Authority (Prairie Hills Transit) (Spearfish, SD)</p> | <p>The West River Transit Authority, (Prairie Hills Transit) received funding to purchase a new contactless payment technology system that will enhance safety, improve reliability and the rider experience, and make transit more accessible to all residents in the Black Hills region in rural South Dakota. A trip planning mobile app and website will help facilitate these inter county connections and regional service by linking riders with providers for trips across multiple service areas. The platform will improve coordination of services for Veteran Service Organizations, education institutions, healthcare facilities, women and homeless shelters, home healthcare organizations, and workforce centers.</p> |
| <p>Concho Valley Transit District (San Angelo, TX)</p> | <p>The Concho Valley Transit District, which serves San Angelo, Texas, and 12 rural counties in West Texas, received funding to invest in technology to enhance existing paratransit scheduling systems and establish a robust travel training network to familiarize vulnerable populations with transportation services. In addition, a series of travel training videos targeting older adults, people with disabilities, and low-income populations will be created. The software will incorporate automated translation services to ensure information accessibility for individuals from diverse linguistic backgrounds and those with hearing impairments.</p> |

| Recipient | Project Description |
|---|--|
| <p>Bear River Association of Governments (Logan, UT)</p> | <p>The Bear River Association of Governments, which serves several counties in Northern Utah, received funding to purchase new software to improve efficiency, sustainability, and safety for entities providing transportation to underserved populations and fill transportation gaps in the region. The coordination of services enabled by the software will allow riders to get to medical services, community services, education, and employment.</p> |
| <p>Hopelink (Redmond, WA)</p> | <p>Hopelink, a non-profit, Community Action Agency serving King and Snohomish counties, received funding to purchase software to significantly improve the user experience for new riders seeking specialized transportation services to key destinations, such as medical facilities and social connectivity in the Puget Sound area. This project is part of a multi-phased approach to an accessible and inclusive one call/one click system.</p> |



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