



Assessment of Virginia's Disability Services System: Transportation



Virginia Board for
People with Disabilities

2018 Assessment of Disability Services in Virginia Transportation

First edition

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The Virginians with Disabilities Act § 51.5-33 directs the Virginia Board for People with Disabilities (VBPD), beginning July 1, 2017, to submit an annual report to the Governor, through the Secretary of Health and Human Resources, that provides an in-depth assessment of at least two major service areas for people with disabilities in the Commonwealth. In June 2017, the Board selected Housing and Transportation as the service areas to be covered in the 2018 Assessments. The Board, as part of its authority and responsibility as a Developmental Disabilities (DD) Council under the federal Developmental Disabilities and Bill of Rights Act (42 U.S.C. §15021-15029), is also required to complete a similar analysis as it develops and amends its federal State Plan goals and objectives.

The Assessments on Housing and Transportation, respectively, are not intended to be a comprehensive inventory of housing and transportation services and supports available to individuals with disabilities in the Commonwealth and should not be relied upon as such. Rather, in this Assessment, the Board seeks to identify critical issues, data trends, and unmet needs of people with developmental disabilities, and offer recommendations for improving the delivery of housing and transportation services for people with developmental disabilities in the Commonwealth. Although the focus of the analysis and recommendations is on individuals with developmental disabilities, the recommendations would also benefit the broader population of people with disabilities and other populations with similar housing and transportation needs, such as elderly and low-income individuals.

The data for this Assessment was obtained from a variety of sources, including state and federal agency websites and reports, legislative studies, regional analyses of impediments to fair housing, national nonpartisan policy and research organizations, and various other research publications. We appreciate the assistance of the state agencies that provided information and clarification on the services relevant to their agencies. The policy recommendations contained within this Assessment were developed by an ad hoc committee of the Board and approved by the full Board at its December 6, 2017, meeting.

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Statement of Values

"And today, America welcomes into the mainstream of life all of our fellow citizens with disabilities. We embrace you for your abilities and for your disabilities, for our similarities and indeed for our differences, for your past courage and your future dreams."

— President Gorge H. W. Bush at the Signing of the Americans with Disabilities Act

The Virginia Board for People with Disabilities serves as Virginia's Developmental Disability Council. In this capacity, the Board advises the Governor, the Secretary of Health and Human Resources, federal and state legislators, and other constituent groups on issues important to people with disabilities in the Commonwealth. The following assessment of transportation services and outcomes is intended to serve as a guide for policymakers who are interested in increasing transportation options for people with disabilities in the Commonwealth of Virginia. The Board's work in this area is driven by its vision, values, and the following core beliefs and principles:

Inherent Dignity: All people possess inherent dignity, regardless of gender, race, religion, national origin, or disability status.

Presumed Capacity: All people should be presumed capable of obtaining a level of independence and making informed choices.

Self-determination: People with disabilities and their families are experts in their own needs and desires. They must be included in the decision making processes that affect their lives. People with disabilities should be included in the decision making processes that drive transportation policy decisions, as well as in decisions about their own transportation needs and supports.

Integration: People with disabilities have a civil right to receive services and supports in the most integrated setting appropriate to their needs and desires, consistent with the Supreme Court's Olmstead decision. Transportation systems must be designed so as to afford people with all abilities to access those systems whenever possible.

Diversity: Diversity is a core value. All people, including people with disabilities should be valued for contributing to the diversity of our communities and our Commonwealth.

Freedom from Abuse and Neglect: People with disabilities must be protected from abuse and neglect in all settings where services and supports are provided.

Fiscal Responsibility: Fiscally responsible policies are beneficial for the Commonwealth, and they are beneficial for people with disabilities.

Executive Summary

Demand for alternatives to personal automobile transportation, which many people with disabilities and the elderly are unable to access, currently exceeds available resources. Virginia's human services and transportation providers identified several transportation challenges in a recent survey by the Virginia Department of Rail and Public Transportation, including funding limitations, the need for improved transportation coordination, physically inaccessible transportation services, and limited transportation options, particularly in rural regions (see Appendix 1). Regional Coordinated Human Services Mobility Plans have also identified similar unmet transportation needs which limit access to employment, community activities, and other services (see Appendix 2).

Virginia will face even more transportation challenges and opportunities in the years ahead. Virginia's aging population and increasing community integration of people with disabilities are placing increased strain on already overburdened public and human services transportation infrastructure and resources. Rapidly changing technology and the emergence of new transportation models are disrupting existing transportation services and systems. Funding declines loom in the very near future, calling into question the availability of sufficiently stable funding to maintain Virginia's existing public transit systems, even as the demand for public and special needs transportation is increasing.

Efforts to address transportation barriers at the local, state, and federal level have too often been piecemeal, geographically limited, and insufficiently informed by the individuals who confront transportation barriers on a day-to-day basis. As Virginia's population ages, and transportation-related technology and business models continue to rapidly evolve, it is more important than ever to develop interrelated statewide, regional, and local strategies for meeting the transportation needs of people with disabilities.

There are several areas where additional research is needed to adequately address the transportation needs of people with disabilities in the Commonwealth. More data is needed about the potential return on investments in fixed route accessibility improvements. There are also a number of recent and unfolding changes to transportation markets and transportation services, the effects of which will not be able to be adequately assessed at this point. New Medicaid Waiver funded transportation services, for example, are not yet implemented, and the implications of the rapid emergence of transportation network companies and other new transportation technologies and business practices are not yet fully known.

To ensure that the Commonwealth can meet the transportation needs of people with disabilities in the years ahead, the Virginia Board for People with Disabilities offers thirteen recommendations. While the primary purpose of this Assessment is to inform state-level policymakers, many of the decisions that affect transportation access are made at the local and regional level. It is important that local decision makers also receive input from their affected constituents, including people with disabilities and the elderly, about their transportation needs. The Board's thirteen recommendations are grouped into four main goals:

1. *Provide stable long-term funding for public transportation and special needs transportation capital investments that accounts for projected increases in demand and need for expansion of transit availability*
 - a. Provide sustainable state-level funding of public transit consistent with the recommendations of the Transit Capital Project Revenue Advisory Board (RAB) to not only maintain existing levels of funding, but also to accommodate needed expansion
 - b. Educate local and state decision makers about the unmet transportation needs of people with disabilities, the elderly, and other transportation-disadvantaged citizens and the importance of adequate local funding for public transportation infrastructure
 - c. Continue to seek flexibility from the federal government in Section 5310 funds to allow for the



shifting of more funding to rural communities where the need for human services transportation capital investment is needed most

- d. Define “disadvantaged populations” for the purposes of prioritizing transportation projects in the Commonwealth to include persons with disabilities

2. *Improve transportation coordination and planning efforts in the Commonwealth*

- a. Reconvene an interagency transportation coordination council, which should include representatives of the Department of Rail and Public Transportation (DRPT), Virginia Department of Transportation (VDOT), Department for Aging and Rehabilitative Services (DARS), Department of Behavioral Health and Developmental Services (DBHDS), Department of Medical Assistance Services (DMAS), Virginia Board for People with Disabilities (VBPD), the statewide non-emergency medical transportation (NEMT) broker, and each of the managed care organizations (MCOs) with responsibility for providing NEMT services to Medicaid beneficiaries in the Commonwealth and/or the transportation brokers employed by these MCOs, the Virginia Department of Emergency Management, as well as other relevant stakeholders
- b. Educate individuals with disabilities and their families and caregivers about how to engage in the transportation planning process at the local level
- c. Increase the number of people with disabilities and the agencies that serve people with disabilities represented on local transportation planning bodies
- d. Collect and analyze claims and use data related to new Employment and Community Transportation Waiver service on an ongoing basis and make refinements as appropriate

3. *Ensure that transportation network companies (TNCs) and other non-traditional transportation companies offer services that are accessible to people with disabilities*

- a. Establish a TNC Accessibility Task Force to analyze and advise on how to maximize accessibility and integrated transportation services for people with disabilities in the TNC market, make recommendations related to the regulation of TNCs who provide services to individuals with disabilities, and to study success of existing pilot programs and other efforts to provide transportation options for persons with disabilities
- b. Establish state funding for innovative pilot programs in the Commonwealth that provide accessible transportation options to persons with disabilities using TNCs
- c. Establish accessibility requirements for TNCs that are recipients of state funds, such as a minimum number of accessible vehicles, or a minimum percentage of a TNC fleet that must be accessible

4. *Improve accessible bus stops and pedestrian infrastructure*

- a. VDOT and localities should continue and expand investment in increasing the accessibility of bus stops and pedestrian infrastructure, such as wide sidewalks, curb cuts, and pedestrian signals that are accessible to individuals with hearing and vision impairments
- b. Local planning bodies should work with stakeholders to identify first and last mile barriers at bus stops in their localities and invest in the removal of those barriers



**Virginia Board for
People with Disabilities**

Background

An aging population and increasing community engagement of people with disabilities are placing increasing strain on Virginia's already stressed human services transportation infrastructure.

Access to reliable, physically accessible, affordable transportation is a prerequisite for living a fully integrated life in America's dispersed communities. Access to healthcare, employment, housing, education, voting facilities, grocery stores, and recreational activities all depend on the availability of transportation. Transportation barriers, therefore, are barriers to the fulfillment of all other domains of an integrated life.

America's transportation infrastructure has evolved, for various reasons, to prioritize travel by personal automobile over other forms of transportation (Where We Need to Go, 2011). This creates access barriers for people with disabilities, the elderly, and others with similar transportation challenges, many of whom cannot own or operate a personal automobile due to limited income and/or physical or cognitive limitations. As the United States Department of Transportation explains:

The interaction between the current surface transportation system and the low-density development patterns typical in the United States has meant that those who are unable to drive (e.g., because of age or disability) and those who cannot afford or do not want to own a car have fairly limited mobility options or are constrained in their choices of living and working locations. This presents a very large societal cost in terms of foregone employment opportunities, limited access to services, and more broadly in reduced community cohesion. (US Department of Transportation, 2017)

Demand for alternative transportation is out-pacing growth in available transportation resources. In 2017, the Virginia Department of Rail and Public Transportation (DRPT) conducted a survey of human services and transportation providers to obtain insight into the transportation challenges that people with disabilities and the elderly face in Virginia today (DRPT, 2017). Survey respondents included Community Services Boards, Area Agencies on Aging, public transit providers, taxi service providers, adult day care providers, senior centers, non-emergency medical transportation providers, employment services providers, local governments, and other human services and transportation providers. Survey results highlighted what many in the disability and elderly community already know: the growth in accessible transportation demand is out-pacing the growth in available funding and resources (see Appendix 1). The following are some of the specific challenges noted by survey respondents:

- We need to purchase more vehicles so that we can transport all of our participants as we are growing and the need for transportation is increasing
- Fast growing population and increasing transportation needs, but very limited to no other transportation options in most areas of the district
- Not enough transportation to meet the needs of the individuals when they need it
- Passenger demand will exceed Aging funds to pay for trips
- Lack of transportation resources
- Aging population and increased need
- We have closed our workshop and transitioned to a community employment services provider. Now that the clients are working at multiple locations, days, and hours; most are from rural area; and most don't have other transportation methods then (sic) going forward a big concern will be the ability for clients to get to their work site
- Difficulty placing individuals in competitive or supported employment in locales outside areas where public transportation available

As these survey responses indicate, changing demographics and recent policy developments are placing increased strain on the already taxed transportation resources available to individuals with disabilities and the elderly.

Similar trends are reported by Virginia's Metropolitan Planning Organizations (MPOs). The Virginia Board for People with Disabilities (VBPD) reviewed six Coordinated Human Services Transportation Plans, which regions are required to develop in order to be eligible for certain federal transportation grant opportunities (see Appendix 2 for more information). These plans, among other things, must identify the transportation challenges that the region faces. Each of the six plans identified unmet needs for transportation for specific purposes, including for employment, access to services, and community activities. Each of the six plans also noted a need for expanded transportation in the evenings and weekends, especially for individuals who obtain employment during these hours. These and other transportation challenges hamper ongoing efforts to increase the community integration of individuals with disabilities in the Commonwealth.

Virginia's aging population will continue to strain transportation services for years to come. The Demographics Research Group at the University of Virginia (UVA) Weldon Cooper Center projects that by 2030, one in five Virginians will be over the age of 65. The growth of Virginians over the age of 65 will account for over

half of the total population growth in the state (Houp, 2017). This trend is felt most acutely in Virginia's most rural reaches, where transportation resources are limited and distances between homes and places of employment, recreation, medical services, and groceries are often great. Indeed, in some rural regions of the Commonwealth, individuals living alone who are over the age of 75 account for 10 percent or more of the population (Housing Virginia, 2016).

More Virginians with disabilities and elderly Virginians are choosing to live in the community today than ever before. The aging in place movement, coupled with the commitment and ongoing efforts to enable people with disabilities to live fully integrated lives in their communities mean that there are more people with transportation challenges navigating the Commonwealth's communities. Federal and state policies in recent years have shifted to promote integrated competitive employment and active community engagement by people with disabilities who receive state-funded services and supports. The shift from center-based services models to dispersed, community-based service models creates new demands for transportation options to provide individuals access to employment opportunities and personalized community activities. These are positive developments, but they create yet unmet demands for additional transportation resources for individuals with disabilities and people with mobility limitations.



**Virginia's aging population
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Key Findings and Recommendations

Funding for Public Transportation

There is a need for stable long term funding for public transportation in Virginia that not only allows for maintenance of current transportation infrastructure, but also expansion to meet increased need.

State, Federal, and Local Public Transit Funding in Virginia

Virginia's level of funding for Public Transit has been above average in recent years compared to other states, but absent action by the legislature will decrease substantially in the near future. In 2015, the last year for which data is available, Virginia ranked 11th in state public transportation funding among the 50 states and Washington D.C.; and it ranked 14th in per capita state transportation funding (\$35.72 per person, see Figure 1) (AASHTO, 2017). This places Virginia in the top third of states in terms of its investment in public transit. Still, the growth in funding over recent years has not kept pace with increased demand, and the Commonwealth faces significant challenges to maintain even its current level of investment.

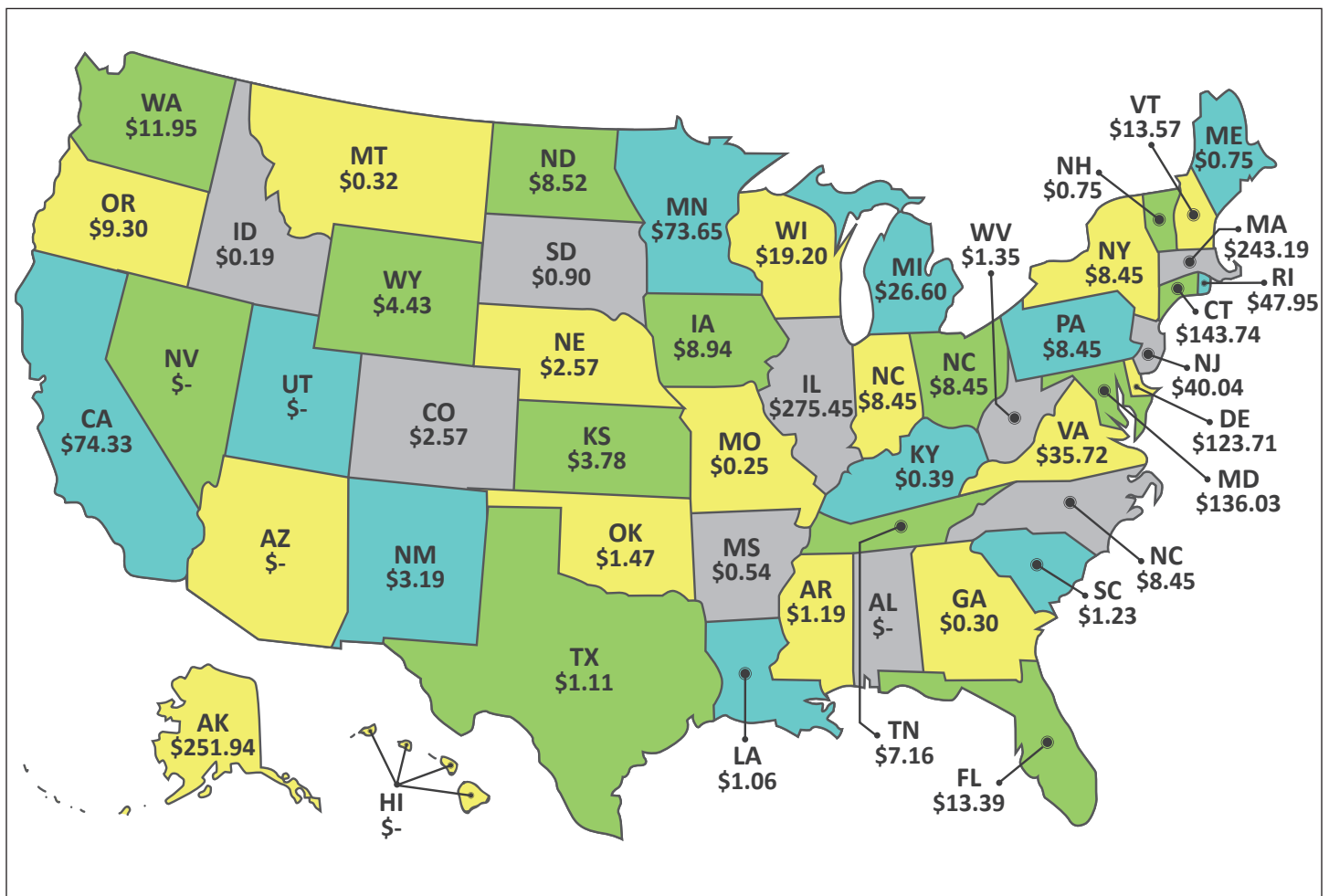


Figure 1: Per Capita Funding For Public Transportation by State in 2015 (AASHTO, 2017)

A sizable portion of Virginia’s funding for public transit in recent years has come from an unsustainable source. The General Assembly authorized \$3 billion in Capital Project Revenue bonds in 2007, 20 percent of which were to be used for transit, 4.3 percent for rail, and the balance to be used for enhanced revenue sharing and regional projects. Because the bonds have a ten-year life, this funding will taper off if it is not replaced, beginning in 2019. If not replaced, DRPT would eventually lose 44 percent of its program funding (\$110 million).

In recognition of this problem, the General Assembly established the Transit Capital Project Revenue Advisory Board (RAB) which recommended in 2017 that the Commonwealth identify “replacement funding” before the Capital Project Revenue bond funding declines (RAB, 2017). The RAB offered a series of options for funding public transit going forward. A permanent and stable funding stream that not only sustains current levels of funding, but also allows for increased funding to meet the Commonwealth’s growing transportation needs, is a critical component of ensuring that Virginians with disabilities and Virginia’s elderly citizens have access to the transportation resources that they need to access their communities.

Moreover, a large majority of Virginians support investing in Virginia’s transportation system, including investments in alternative transportation options. According to a 2015 statewide survey conducted by DRPT, 83 percent of respondents said that it is important to invest in alternative transportation options to provide workers with affordable travel options (Martin, 2016).

Another important source of funding for human services transportation is the federal Enhanced Mobility for Seniors and Individuals with Disabilities (Section 5310) grant program, which is administered in Virginia by DRPT. This funding, while insufficient to meet the Commonwealth’s human services transportation needs, does provide much needed capital for the purchase of vehicles for human services transportation. Between 2012 and 2016, Section 5310 funds were used to purchase 401 vehicles for human services transportation providers across the Commonwealth, or an average of 80 vehicles per year. Each year, however, there are more vehicle purchase requests than can be purchased with available funds. The number of vehicles requested that could not be funded

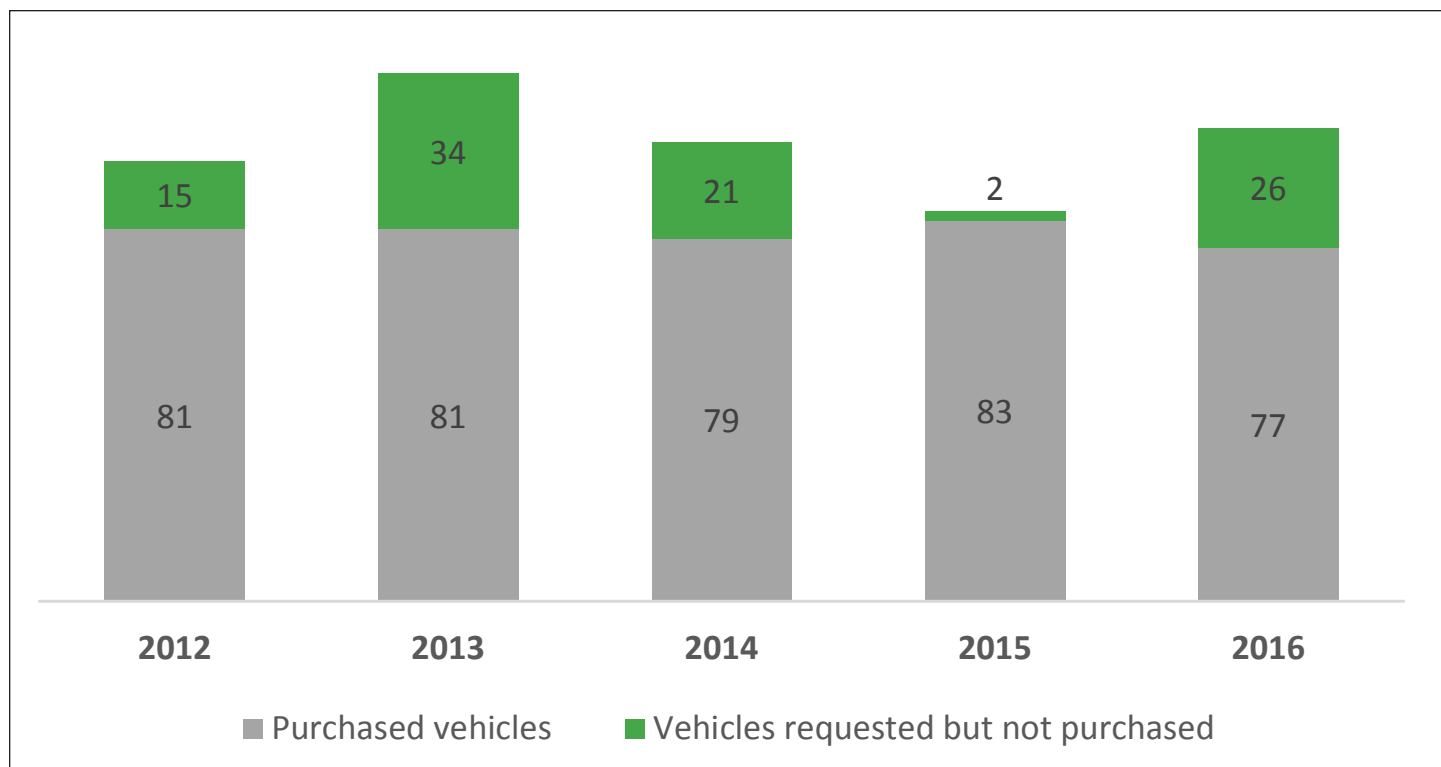


Figure 2: Section 5310 Vehicle Requests and Purchases, 2012-16 (Department of Rail and Public Transportation, 2015)

between 2012 and 2016 ranged from a low of two in 2015 to a high of 34 in 2013, for an average of 20 vehicles per year (see Figure 2).

Federally-imposed program requirements prevent the Commonwealth from utilizing these funds to support human transportation capital investments where they are most needed. Federal regulations require that Section 5310 funds be distributed between large urban, small urban, and rural localities according to a prescribed formula, with 60 percent of funds supporting individuals in large urban areas, 20 percent in small urban areas, and 20 percent in rural areas. The prescribed distribution of these funds does not line up with actual demand. DRPT routinely receives more funding requests than it can satisfy for rural and small urban localities, resulting in DRPT only being able to fund an estimated 83 percent and 86 percent of their requests in FY 2016, respectively. At the same time, it struggles to attract sufficient funding requests from large urban areas to match the available funds for

these areas. Additional flexibility in the distribution of these grants would greatly enhance their usefulness.

Prioritization of Transportation Projects in Virginia **Virginia prioritizes transportation projects based on a number of factors, one of which is accessibility.**

The Virginia General Assembly directed the Commonwealth Transportation Board to begin using a new prioritization process in 2016 for the approval of transportation projects in the Commonwealth. The process, called SMART SCALE, rates projects based on objective, quantifiable criteria. While development of much of the process was delegated to the Commonwealth Transportation Board, the General Assembly identified five factors that must be considered when rating projects, including the project's impact on accessibility (see Exhibit 1). A sixth factor, land use, is also considered in areas with populations greater than 200,000.

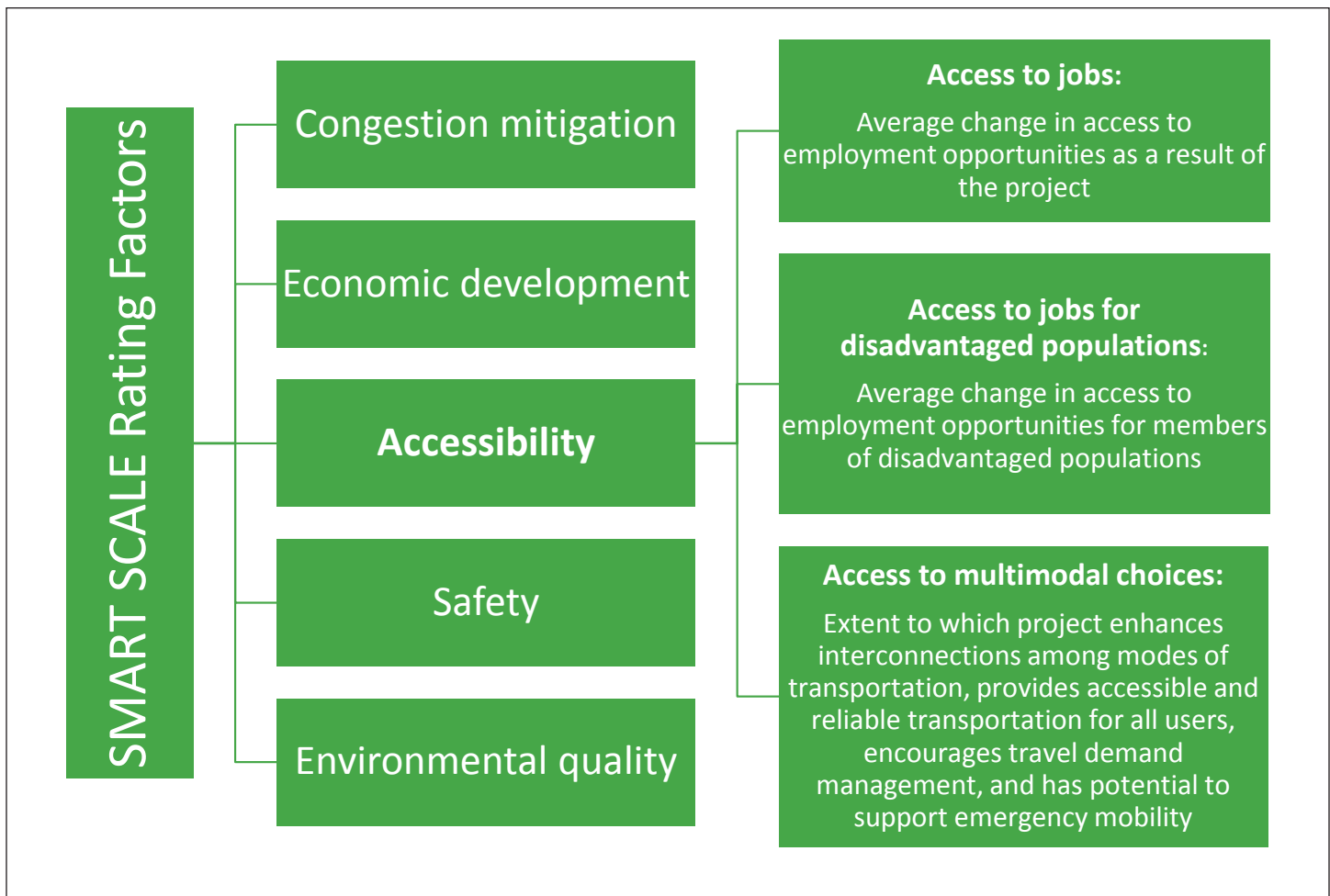


Exhibit 1: SMART SCALE Rating Factors (Commonwealth Transportation Board, 2016)

Although accessibility is one of the prioritization factors, the SMART SCALE process does not consider people with disabilities. The process considers three sub-measures for accessibility, one of which is access to jobs for disadvantaged populations (see Exhibit 1). Disadvantaged populations are defined to include low-income minority, or limited English-speaking persons. However, this sub-measure does not include people with disabilities, a group of individuals who are vastly under-represented in the Commonwealth’s workforce, and who face substantial transportation barriers that limit their capacity to obtain employment.

Recommendation I

Recommendation 1: Provide stable long term funding for public transportation and special needs transportation capital investments that accounts for projected increases in demand and need for expansion of transit availability:

Sub-recommendation		Responsible Party
1A.	Provide sustainable state-level funding of public transit consistent with the recommendations of the Transit Capital Project Revenue Advisory Board (RAB) to not only maintain existing levels of funding, but also to accommodate needed expansion	General Assembly
1B.	Educate local and state decision makers about the unmet transportation needs of people with disabilities, the elderly, and other transportation disadvantaged citizens and the importance of adequate local funding for public transportation infrastructure	Virginia Board for People with Disabilities (VBPD)
1C.	Continue to seek flexibility from the federal government in Section 5310 funds to allow for the shifting of more funding to rural communities where the need for human services transportation capital investment is needed most	Department of Rail and Public Transportation (DRPT)
1D.	Define “disadvantaged populations” for the purposes of prioritizing transportation projects in the Commonwealth to include persons with disabilities	Commonwealth Transportation Board (CTB)

Coordination of Public Transportation

There is a need for improved stakeholder engagement in the planning process and increased transportation coordination in the Commonwealth of Virginia.

Virginia's Fragmented Public Transportation System
Transportation services for people with disabilities in Virginia are fragmented and not always well coordinated.

Multiple state and local agencies, private companies, nonprofits, and volunteers provide transportation services. There are also multiple funding streams that support transportation services, typically depending on the purpose of the transportation being provided. Transportation options and resources can vary greatly between regions. The impact of this is a fragmented and confusing system of transportation for individuals with disabilities, and the potential for inefficiencies, service gaps, and redundancies.

Localities in Virginia have identified a lack of coordinated transportation as a barrier to effectively transporting individuals with disabilities. VBPD reviewed six regional Coordinated Human Services Mobility Plans, which regions are required to develop in order to receive federal grants through the Mobility for Seniors and Individuals with Disabilities program (see Appendix 2 for more information). Three of the six plans (New River Valley, Richmond/Petersburg, and Hampton Roads) identified the continuing need for greater coordination between transit agencies, human services agencies, and other related local and state agencies. Medicaid representatives and inter-jurisdictional local agencies were specifically identified as key partners whose presence in coordination efforts is presently lacking. One district, Hampton Roads, specifically noted the problem of unused excess capacity, which can result from the inability to easily redirect resources when a trip is canceled. In addition to the regional Coordinated Human Services Mobility Plans, a 2017 survey by DRPT of human services transportation stakeholders also identified a need for improved transportation coordination (DRPT, 2017).

The fragmented nature of transportation services for individuals with disabilities is in part a product of how transportation services have evolved over the years. Human services transportation has largely

evolved as an adjunct to some other core service. For instance, Medicaid-funded non-emergency medical transportation (NEMT) may be provided to eligible Medicaid beneficiaries as an adjunct to a core Medicaid service, such as acute medical care or a Medicaid waiver service. Human services agencies may provide transportation to allow individuals to access their services. Additionally, the Commonwealth's vocational rehabilitation programs, through the Department for Aging and Rehabilitative Services and the Department for the Blind and Vision Impaired, may provide for the transportation of eligible individuals receiving vocational rehabilitation services.

Virginia's Fragmented Medicaid Transportation System
Virginia is transitioning people with disabilities from a Medicaid fee-for-service system, in which the state directly pays service providers, to a Medicaid managed care system in which private managed care organizations (MCOs) provide Medicaid health insurance on behalf of the state.

While Virginia has relied on a single statewide NEMT broker, LogistiCare, for years, the transition to managed care allows each of six MCOs to use its own transportation broker, or to manage its own transportation services internally if it chooses. The MCOs were using a total of six different transportation brokers as of January 2018. The proliferation of NEMT brokers allows for competition, and the introduction of new and innovative solutions by new brokers and MCOs. However, it also presents new challenges.

One challenge posed by managed care is that it will further fragment transportation services for people with disabilities, making it more difficult for them to navigate the system. Previously, people with disabilities received all of their NEMT services through LogistiCare. As individuals transition into managed care, however, their MCO takes on the responsibility for providing NEMT to services that are covered by the managed care system, while transportation to services that are "carved out" of the managed care system (such as Developmental Disability waiver services) continues to be provided by LogistiCare. Consequently, a person with a disability will have to use one transportation broker for their DD waiver services, and another transportation broker for their other Medicaid services (see Exhibit 2).

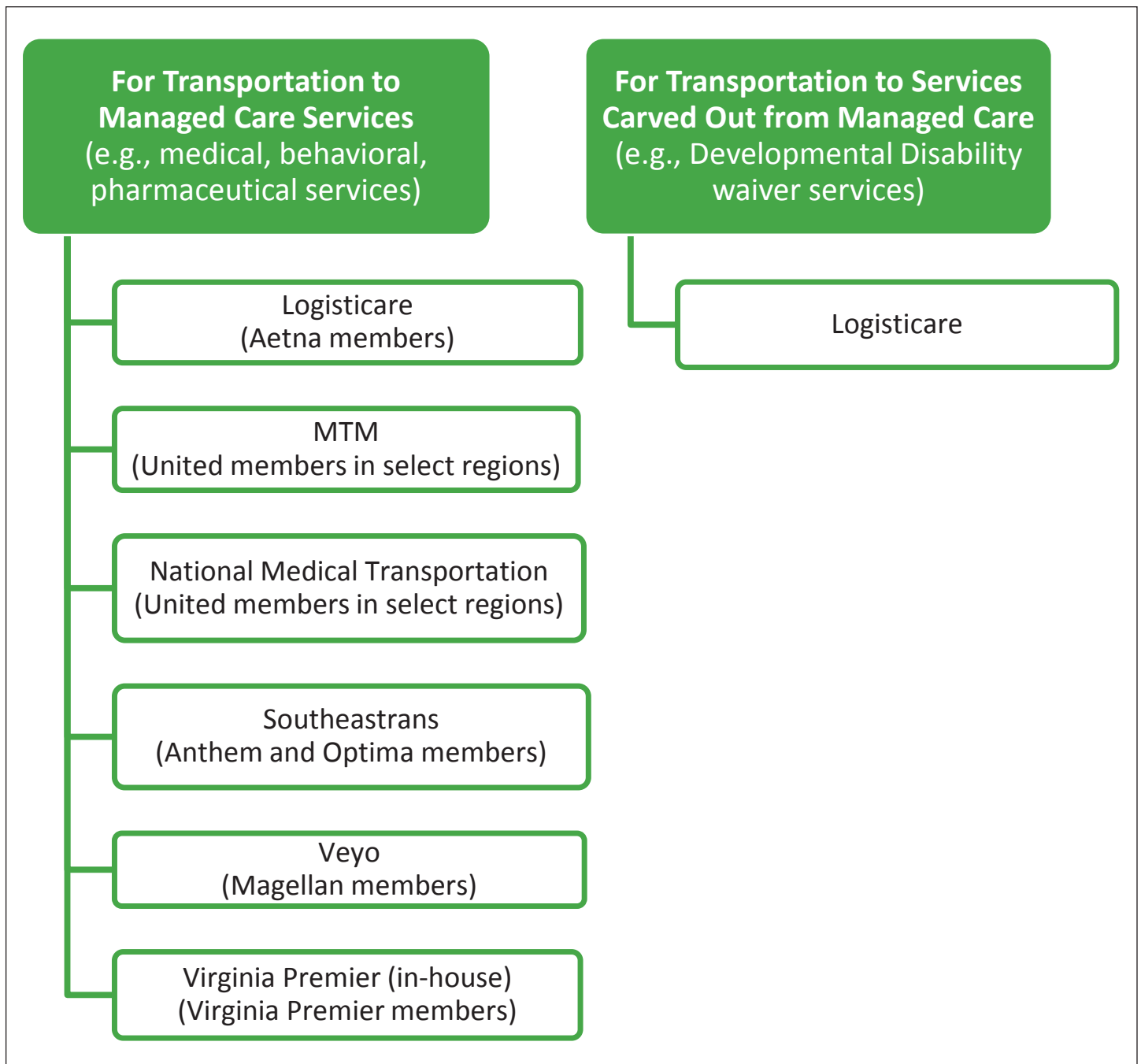


Exhibit 2: NEMT Brokers in Virginia's Medicaid Program, by Type of Service and MCO (Virginia Department of Medical Assistance Services, 2018)

Another challenge posed by managed care is that the diversity of NEMT brokers may make NEMT services more difficult for the state to oversee. The state cannot identify how well the various NEMT brokers are performing individually and collectively unless comparable performance data from each broker is collected. With no single MCO responsible for the provision of NEMT, however, MCOs may not collect the same or comparable data from their NEMT brokers. The Department of Medical Assistance Services can require all MCOs to provide certain data, but performance data require-

ments in the January 2018 contract between the Department and the MCOs were largely limited to missed trips. The state could benefit from also requiring the reporting of performance data such as trip length and the appropriateness of pick-up and drop-off times.

It is important that the lessons the state has learned from overseeing its transportation brokerage in the fee-for-service system, as reflected in the statewide NEMT contract, are not lost when the provision of NEMT transfers from the state to the MCOs. The

Commonwealth has spent years evaluating its NEMT brokerage contract and refining its terms to ensure adequate oversight and accountability for the state-wide NEMT broker and providers. The latest NEMT Request for Proposal (RFP) reflects many of the most recent improvements to the NEMT management and accountability system, including the incorporation of the recommendations from a recent Joint Legislative and Audit Review Commission (JLARC) study. The Department of Medical Assistance Services should apply these lessons learned from its fee-for-service experience to its continued oversight of managed care.

Alongside the shift to managed care, Developmental Disability Waiver services continue to be transformed to promote increased small group (three or fewer people) and individual community engagement. This positive and important trend in the philosophy underlying the disability services system will further strain the already taxed transportation services available to the individuals served through the waivers. Meeting the transportation needs of these individuals will therefore require greater coordination of available transportation resources to ensure efficiency and adequate capacity.

The Department of Medical Assistance Services is instituting a new Community and Employment Transportation service for individuals on the Commonwealth's Developmental Disabilities Waivers. This service is intended to allow individuals receiving services through one of the Developmental Disability waivers to access transportation in order to participate in community engagement and employment-related activities for which traditional NEMT or other transportation is not available. It will be important to analyze the usage of this service once it is operational in order to ensure that it is fulfilling its intended purpose.

Approaches to Improving Transportation Coordination

One approach to improving transportation coordination is to have a state transportation coordinating council.

The National Center for State Legislatures (NCSL) considers state transportation coordinating councils a “critical strategy for improving human service trans-

portation services and programs” (Rall, 2015, p. 6). As of 2014, the NCSL counted 20 states and the Mariana Islands with at least one active state coordinating council, but Virginia was not among them. DRPT previously facilitated a statewide state coordinating council called the State Agencies Coordinating Transportation (SACT) Work Group. The SACT was developed in 2003 to promote interagency cooperation at the state level, and one of its outcomes was the development of a Memorandum of Understanding related to Coordinated Human Services Transportation in Public and Nonpublic Transit Systems. The SACT has not met since 2011. In its 2014 Assessment of Disability Services in Virginia, the Virginia Board for People with Disabilities recommended the reestablishment of the SACT, as well as a previously functioning Medicaid transportation advisory committee.

Another means of improving transportation planning is to ensure that individuals with disabilities, the elderly, and other similarly transportation disadvantaged populations are actively engaged in the planning process. Two of the six Coordinated Human Services Mobility plans (West Piedmont and Hampton Roads) reviewed for this Assessment identified the need for increased transportation advocacy. There are a number of ways to engage stakeholders in the planning process. One way is for people with disabilities to attend transportation planning meetings for metropolitan planning organizations and regional transportation planning organizations, all of which are open to the public. Another way is for the metropolitan planning organizations and regional transportation planning organizations to include formal representation of people with disabilities. The Richmond Regional Planning District Commission has a formal Elderly and Disabled Advisory Committee that is staffed by representatives of the elderly, individuals with disabilities, low-income individuals, and transportation service providers. Such a formal structure ensures that the transportation planning body receives input from transportation-disadvantaged communities during the planning process. Based on a review of MPO committee structures in Virginia, as described on MPO websites, the Richmond Regional Planning District Commission's Elderly and Disabled Advisory Committee appears to be unique among MPOs in the Commonwealth.

Recommendation II

Recommendation 2: Improve transportation coordination and planning efforts in the Commonwealth:		
Sub-recommendation		Responsible Party
2A.	Reconvene an interagency transportation coordination council, which should include representatives of DRPT, DOT, DARS, DBHDS, DMAS, VBPD, the statewide NEMT broker, and each of the managed care organizations with responsibility for providing NEMT services to Medicaid beneficiaries in the Commonwealth and/or the transportation brokers employed by these MCOs, Virginia Department of Emergency Management, as well as other relevant stakeholders	Department of Rail and Public Transportation; Department of Transportation; Department for Aging and Rehabilitative Services; Department of Behavioral Health and Developmental Services; Department of Medical Assistance Services; Virginia Board for People with Disabilities
2B.	Educate individuals with disabilities and their families and caregivers about how to engage in the transportation planning process at the local level	Virginia Board for People with Disabilities
2C.	Increase the number of people with disabilities and the agencies that serve people with disabilities represented on local transportation planning bodies	Metropolitan Planning Organizations (MPOs)
2D.	Collect and analyze claims and use data related to new Employment and Community Transportation Waiver service on an ongoing basis and make refinements as appropriate	Department of Medical Assistance Services

Transportation Network Companies

The rapid emergence of transportation network companies presents both challenges and opportunities for the delivery of transportation services to people with disabilities.

Accessibility of Virginia's Transportation Network Companies

As transportation network companies (TNCs) play an increasingly pervasive role in the delivery of transportation services, it is important that they are accessible to people with disabilities.

TNCs, such as Lyft and Uber, pair passengers with drivers via mobile applications and website. Individuals with disabilities and advocates have raised concerns that these companies do not provide services that are accessible to people with disabilities. There have

been an increasing number of cases filed against TNCs around the country alleging violations of the Americans with Disabilities Act (ADA) and state and local civil rights laws. TNCs have begun to enter the disability transportation market with services specifically designed to serve people with disabilities, including Uber Assist.

Virginia enacted statutory requirements for TNCs in 2015 that were aimed at improving accessibility. This law requires TNCs to have anti-discrimination policies, prohibits the TNCs from refusing to provide services

solely due to one's disability or charging extra fees due to a disability, and requires TNCs to accommodate service dogs. It also requires TNCs to allow individuals with mobility impairments to be able to indicate their need for an accessible vehicle when requesting a ride, and if the TNC is unable to provide an accessible vehicle, then it must refer them to another service if one is available.

Multiple studies have recently been conducted of TNCs' compliance with Virginia law. A 2016 legislative report that looked at compliance, including the disability provisions contained in the 2015 TNC statute, provided largely positive conclusions. Virginia's Centers for Independent Living reported that individuals who are deaf or blind, or who have autism have had largely positive experiences using TNCs. However, they also found that individuals with mobility impairments have had difficulty due to a lack of wheelchair accessi-

ble vehicles, and TNCs have referred to other services that also lack the needed accessible vehicles (Virginia Department of Motor Vehicles, 2016).

Virginia could consider adopting additional laws to further improve the accessibility of TNCs in the Commonwealth. Because TNCs are relative newcomers in the transportation market, the regulatory landscape in which they operate continues to evolve. Some examples of recent laws that states have proposed or adopted include statutes requiring TNCs to provide a specified number of disability accessible vehicles in limited location(s) (Pennsylvania); laws requiring TNCs operating in the state to conduct an accessibility pilot program and report results (Texas); and laws establishing a TNC Accessibility Task Force to analyze and advise on how to maximize accessibility and integrated transportation services for people with disabilities in the TNC market (New York).

Recommendation III

Recommendation 3: Ensure that transportation network companies and other nontraditional transportation companies offer services that are accessible to people with disabilities:		
Sub-recommendation		Responsible Party
3A.	Establish a TNC Accessibility Task Force to analyze and advise on how to maximize accessibility and integrated transportation services for people with disabilities in the TNC market, make recommendations related to the regulation of TNCs who provide services to individuals with disabilities, and to study success of existing pilot programs and other efforts to provide transportation options for persons with disabilities	Virginia Department of Transportation; Department of Rail and Public Transportation
3B.	Establish state funding for innovative pilot programs in the Commonwealth that provide accessible transportation options to persons with disabilities using TNCs	General Assembly
3C.	Establish accessibility requirements for any TNCs who are recipients of state funds, such as a minimum number of accessible vehicles, or a minimum percentage of a TNC fleet that must be accessible	General Assembly

Public Infrastructure

There is continued need to invest in improving bus stop and pedestrian infrastructure, such as by widening sidewalks, adding appropriate curb cuts, and ensuring that walk signals are accessible to people with hearing impairments .

Accessibility of Virginia's Public Infrastructure

It is important for states to ensure that their public infrastructure is accessible to people with disabilities. Individuals with mobility impairments must have accessible pathways to and from transit stops in order to access fixed route transit systems.

There is also some support in the research literature and in individual case studies that investments in bus station and pedestrian infrastructure can yield positive returns on investment by increasing ridership and diverting people with mobility impairments from expensive ADA paratransit to less expensive fixed route transit systems (Transit Cooperative Research Program, 2014).

Virginia is already investing in improving the accessibility of its pedestrian infrastructure for people with mobility impairments. The Virginia Department of Transportation, for instance, has taken a number of steps including the following:

- Dedicated funding of approximately \$6 million per year to improve 1,400 to 1,500 curb ramps annually, which enabled the Department to improve nearly 5,000 curb ramps between October 2014 and December 2017;
- Planning a workshop for early 2018 to convene statewide curb ramp stakeholders and decision

makers to share best practices in delivering the program, promote the use of mobile tools, and provide further understanding of the criticality of curb ramps and other accessibility features for road users with disabilities;

- Working to share curb ramp information with the public through the Virginia Roads portal; and
- Partnering with the Virginia Department for Aging and Rehabilitation Services (DARS) and the Virginia Department for the Blind and Vision Impaired (DBVI) to improve the accessibility of pedestrian signals for people with visual impairments by deploying communication technology that delivers WALK and DON'T WALK signals in audible and other non-visual formats.

Despite these investments, there is an ongoing need for additional efforts to identify and modify inaccessible pedestrian infrastructure and bus stops. Two of the six Coordinated Human Services Mobility Plans reviewed for this Assessment (Richmond/Petersburg and Central Shenandoah) identified a need for improved accessibility of bus stops, pedestrian infrastructure and other elements of the built environment. For such efforts to be truly successful, they must involve local investment of time, effort, and resources, as well as participation in the planning and implementation of such efforts by individuals with disabilities who utilize this infrastructure.

Recommendation IV

Recommendation 4: Improve accessible bus stops and pedestrian infrastructure:		
Sub-recommendation		Responsible Party
4A.	VDOT and localities should continue and expand investment in increasing accessibility of bus stops and pedestrian infrastructure, such as wide sidewalks, curb cuts, and pedestrian signals that are accessible to individuals with vision and hearing impairments	Virginia Department of Transportation; Local Governments
4B.	Local planning bodies should work with stakeholders to identify first and last mile barriers at bus stops in their localities and invest in the removal of those barriers	Metropolitan Planning Organizations (MPOs); Local Governments

Appendix 1: DRPT Transportation Challenges Survey

Challenges/Needs	Examples
Growth in demand outpacing available resources	<ul style="list-style-type: none"> • <i>We need to purchase more vehicles so that we can transport all of our participants as we are growing and the need for transportation is increasing</i> • <i>Fast growing population and increasing transportation needs, but very limited to no other transportation options in most areas of the district</i> • <i>Not enough transportation to meet the needs of the individuals when they need it</i> • <i>Passenger demand will exceed Aging funds to pay for trips</i> • <i>Lack of transportation resources</i> • <i>Aging population and increased need</i>
Funding challenges	<ul style="list-style-type: none"> • <i>Cost</i> • <i>Having the financial ability to purchase vans that are safe and reliable</i> • <i>The continued cost and inability to serve everyone's needs</i> • <i>Funding transportation to individuals with mobility issues/limited resources</i> • <i>Our service cannot meet the demand due to limited local funding</i>
Need for improved transportation coordination	<ul style="list-style-type: none"> • <i>We need to expand our services throughout the region and coordinate with other agencies</i> • <i>Transportation across jurisdictional lines & coordination of existing services</i>
Demands of meeting new community engagement and employment goals	<ul style="list-style-type: none"> • <i>We have closed our workshop and transitioned to a community employment services provider. Now that the clients are working at multiple locations, days, and hours; most are from rural area; and most don't have other transportation methods then (sic) going forward a big concern will be the ability for clients to get to their worksite</i> • <i>Difficulty placing individuals in competitive or supported employment in locales outside areas where public transportation available</i>

Challenges/Needs	Examples
Accessibility challenges	<ul style="list-style-type: none"> • <i>Having enough wheelchair accessible vehicles to accommodate all clients who wish to attend our programs</i> • <i>ADA accessibility for bus stops</i> • <i>Focusing on public transportation, it is the first and last mile issue for passengers to get to and from the bus stops</i> • <i>DD/ID* clients have an increase in need for specialized transportation needs (more wheelchairs; newer wheelchairs are often longer or wider and often take up more room that displaces other riders; aging population and those with physical limitations need low riding vehicles to be able to get in and out of seats</i>
Challenges unique to rural areas	<ul style="list-style-type: none"> • <i>Access/convenience for clients in rural area</i> • <i>Still gaps in service for dialysis patients and some people who live in very rural areas. Not enough volunteer drivers to meet the need</i> • <i>We are very rural so if we aren't able to pick consumers up for programs they often are unable to attend</i> • <i>Large service area, a lot of rural areas</i>

* Developmental Disability / Intellectual Disability

Appendix 2: Common Challenges/Barriers Identified in Six Regional Coordinated Human Services Mobility Plans

	New River Valley (PDC 4)	West Piedmont (PDC 12)	Thomas Jefferson (PDC 10)	Richmond & Petersburg MPOs	Central Shenandoah (PDC 6)	Hampton Roads (PDC 23)
Insufficient local funding /need for stable funding source	X	X	X	X		X
Need for education/public awareness (individuals, public, and local officials)	X	X	X		X	
Need for expanded or improved travel training for individuals	X	X	X		X	
Unmet needs for transportation for specific purposes (e.g. work, recreation, access to services)	X	X	X	X	X	X
Difficulty navigating multiple transportation services				X		X
Need for expanded hours and weekends	X	X	X	X	X	X
Need for more services in rural areas	X	X			X	X
Better connections between cities and outside immediate service area			X	X	X	X

More accessible vehicles (especially for larger wheelchairs, etc.)		X			X
Technology needs (e.g. dispatch, Mobile Data Terminals, etc.)			X		X
Barriers to accessible taxi-cabs					X
Better use of "excess capacity," i.e., unused vehicles due to passenger cancellations					X
Increased transportation coordination (Need Medicaid reps involved)	X			X	X
Need for transportation/transit advocacy		X			X
Make bus stops, pedestrian infrastructure, built environment accessible				X	X



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