

Presentations/Information Items

- **Operator Retention and Industry Trends – handout at the meeting**
- **Strategic Plan Update**
- **Updated Tax Floor Revenue Projections – handout at the meeting**
- **Economics Presentation for Western Service Plan and New Positions – handout at the meeting**



Strategic Plan Update PRTC Commission Meeting October 4, 2018

Chuck Steigerwald
Director of Strategic Planning

Mobility-on-Demand Feasibility Study

- Funded by Potomac Health Foundation
- Consider improving healthcare access using Transportation Network Companies
- Began November 2017, Completed June 2018

Research

- Identify planned and existing programs
- Interviews with peers and industry experts
- Literature review

Program Review Considerations

- Program Delivery and Operations
- Funding and Payment Process
- Challenges and Barriers
- Lessons Learned

Peer Programs

- Brookdale Senior Living & Lyft
- City of Gainesville, Florida "Freedom in Motion" Senior Transportation Pilot
- City of Laguna Beach Senior Mobility Pilot Program
- GRTC Transit System (Richmond) - UZURV/Roundtrip
- MBTA (Boston) - Uber and Lyft
- Metropolitan Atlanta Rapid Transit Authority (MARTA) Rides to Wellness
- Fairfax County Human Services
- MedTrans Network
- PSTA (Pinellas County) - Transportation Disadvantaged Program
- NV Rides

Research Conclusions

- Leverage partnerships to expand mobility options
- Pilot programs allow proof of concept and scaling
- Technology can be a barrier
- Grassroots promotion
- Healthcare access is a BIG issue

Preliminary Alternatives



Evaluation Criteria

- Mobility - reach, mode options, capacity
- Accessibility - ease of use, user focus
- Program Delivery - administrative burden, scalability
- Funding - cost, sustainability

Preferred Alternative

- Reservation company maintains relationships with service providers
- Software/Smartphone application for scheduling and payment
- Allows for trip scheduling by third parties (healthcare providers, etc.)
- Includes a range of modal options

Next Steps

- Form stakeholder working group
- Define pilot scope
- Pursue funding opportunities
- Contractor Procurement
- Transition plan
- Promotion

Coming Up Next

TDP/TDMP Public Participation

JUNE 2018

Mobility On Demand Healthcare Access

FEASIBILITY STUDY

Executive Summary

Prepared For:



Prepared By:

Kimley»»Horn

Introduction

Purpose Statement

The goal of the project described in this study is to develop a feasible solution for flexible transportation to and from non-emergency medical appointments for the residents of the Prince William area of Virginia. The solution should be reliable, accessible, equitable, and sustainable for PRTC and its customers.

Background

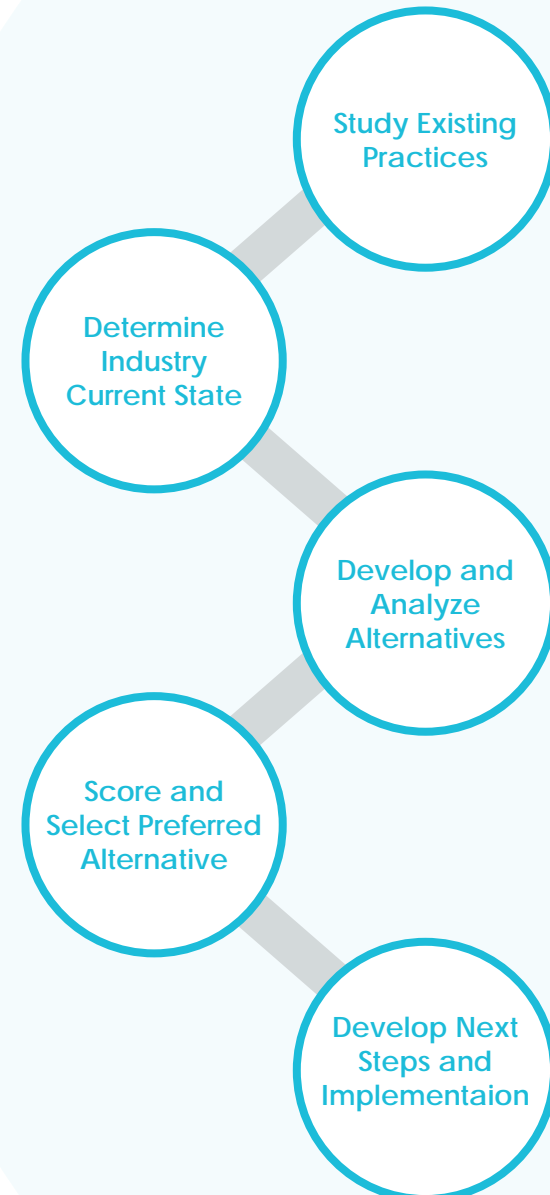
The intersection of the healthcare and transportation industries has always been a complex web of stakeholders, challenges, and opportunities. Changing travel patterns influenced by advancing technology and demographic trends is sparking renewed interest into how transportation can help improve accessibility to healthcare. For traditionally underserved populations across the nation, barriers are becoming more evident for the populations which need reliable and effective means of transportation for non-emergency medical needs.

The Potomac and Rappahannock Transportation Commission (PRTC), a transit provider in the Prince William County area, received a grant from the Potomac Health Foundation (PHF) in June 2017 to perform a feasibility study to determine how new and emerging transportation service models may enhance and/or improve access to healthcare for underserved populations in their service area. Through the following

year, the project team consisting of PRTC and their consultant, Kimley-Horn worked to review programs and interview industry experts to develop a preferred alternative for implementation in the coming years.

PRTC currently operates a program called Wheels to Wellness, designed to meet the transportation needs of seniors, persons with disabilities, and low-income households. Since its start in 2012, the program has experienced a decline in funding and support, with increases in eligibility restrictions in order to maintain program fiscal viability. Thus, PRTC's goal through this study is to identify augmentations or to propose a replacement of the existing program for the continued service of the populations in need.

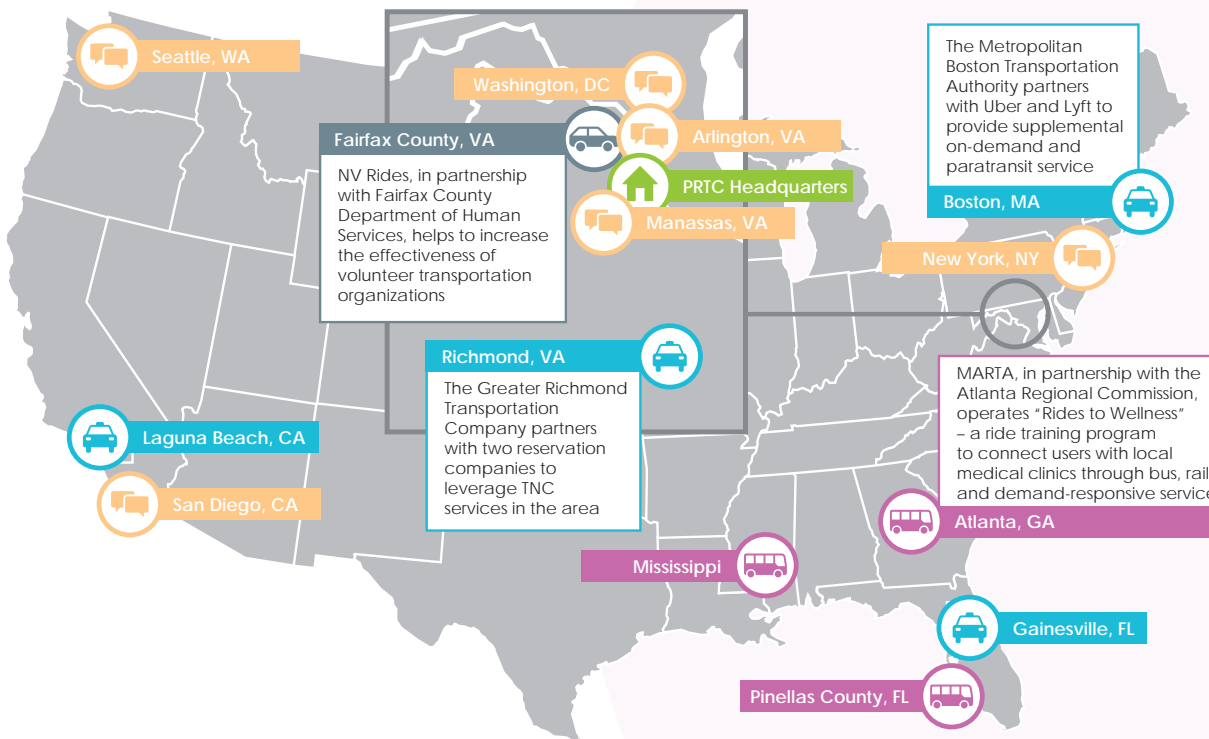
Study Process



Research

Programs Reviewed and Service Models

Through the review of various programs around the nation, a set of three distinct service models was developed to categorize and describe the opportunities for PRTC to implement a new model for its own uses.



Research Conclusions

The research process focused on the review of existing models of service across the nation and the consideration of input from industry experts and documentation.

- Agencies are leveraging partnerships to **expand mobility options, not replace** existing ones. This provides users alternatives depending on their needs.
- Healthcare providers have identified non-emergency transportation as a treatment barrier with financial ramifications to their operations and look to address the issue.
- Many programs are started as **pilots which scale as demand grows**.
- Payment processes vary. Examples:
 - Users pay directly, sometimes at fixed/variable rates
 - Agency-provided payment method, such as a fare or debit card
 - User reimbursement by agency
- Joining with multiple entities and larger geographic areas can make large TNC companies more open to partnership.
- Providing subsidies for **local transit options** and **"travel training"** can help address travel needs with a standalone specialized program.
- Communication gaps and barriers exist between transportation and healthcare providers. Bridging of the gap can help to understand user needs.
- Individual level of **need can dictate variable fare rates** and subsidies.
- Grassroots efforts are more effective than others at engaging senior and low-income populations.
- Third party reservation companies help to **mitigate technology barriers**.

Service Models

Taxi/TNC/transit subsidy program



Through various methods, a transit provider subsidizes rides for the end user
Transit provider may support an alternative booking method

On-demand flexible transit



End users request transit rides which may or may not have co-pay/fee
Includes first-mile, last-mile to transit connections

Aggregate provider



Various companies (private or volunteer) organized and booked through central agency
Usually non-profit or other benevolent organization

Information Sources

Other Information Source



Discussions with public agencies or industry experts

Preferred Alternative

Key Summary

The preferred alternative is framed around a partnership between PRTC and a contracted reservation company. The reservation company receives and assigns rides to various service providers based on the needs of the user. This model has the potential to be expanded in the future to include the full suite of PRTC services.

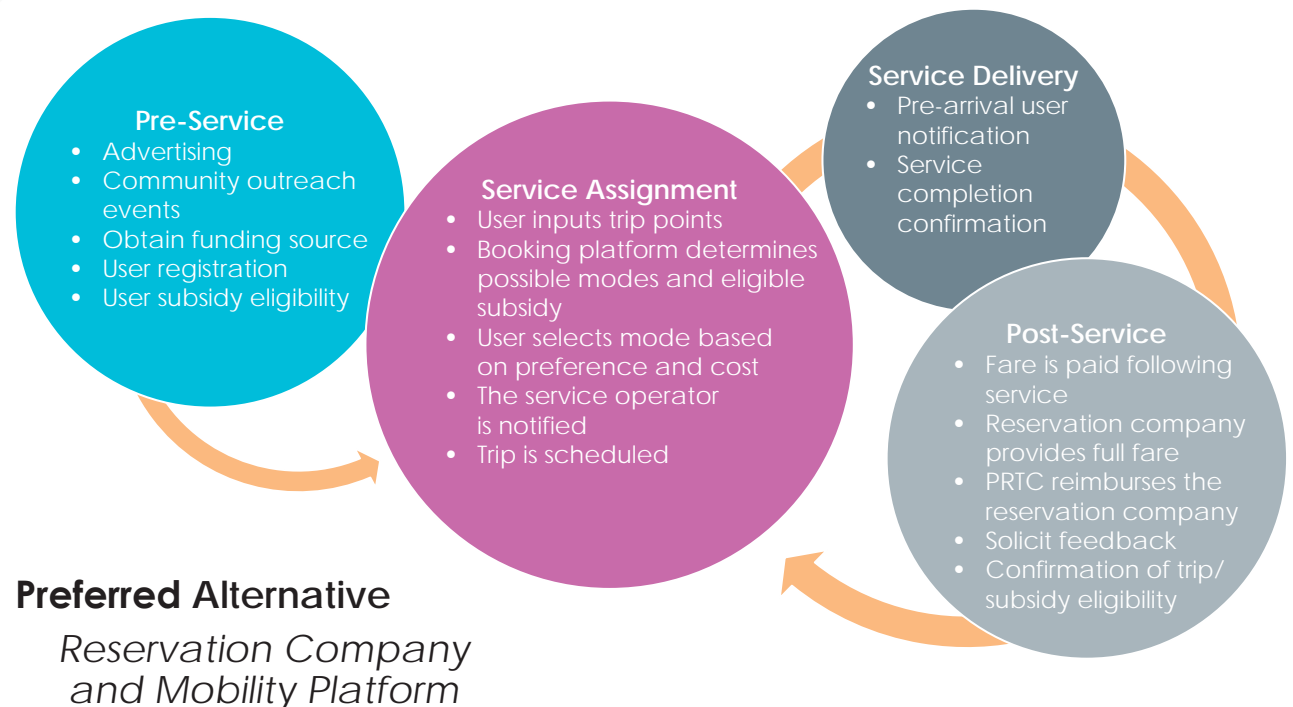
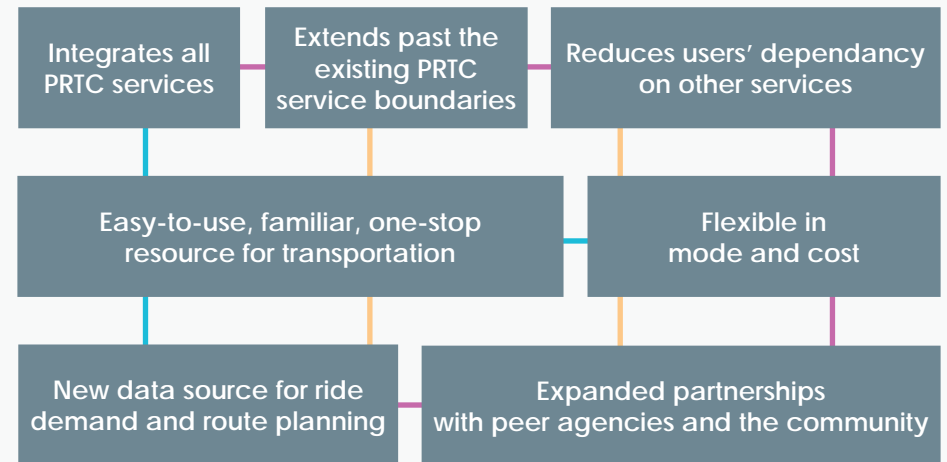
Some of the key features of the preferred alternative are:

- Advance ride scheduling and booking
- Diverse payment options, both banked and unbanked
- Volunteer network component
- A digital mobility platform
- Use of existing PRTC transit services
- Need-based fare structures based on individuals
- The ability to cross jurisdictional boundaries
- Leveraging both existing and new service providers

In order to balance a user's level of need and desire for mode choice, a hierarchy of service provider preference is given to the user as options, created in order of least cost and greatest efficiency to highest cost and least efficiency:

1. PRTC bus service
2. TNC
3. Livery company
4. Volunteer organization
5. Paratransit

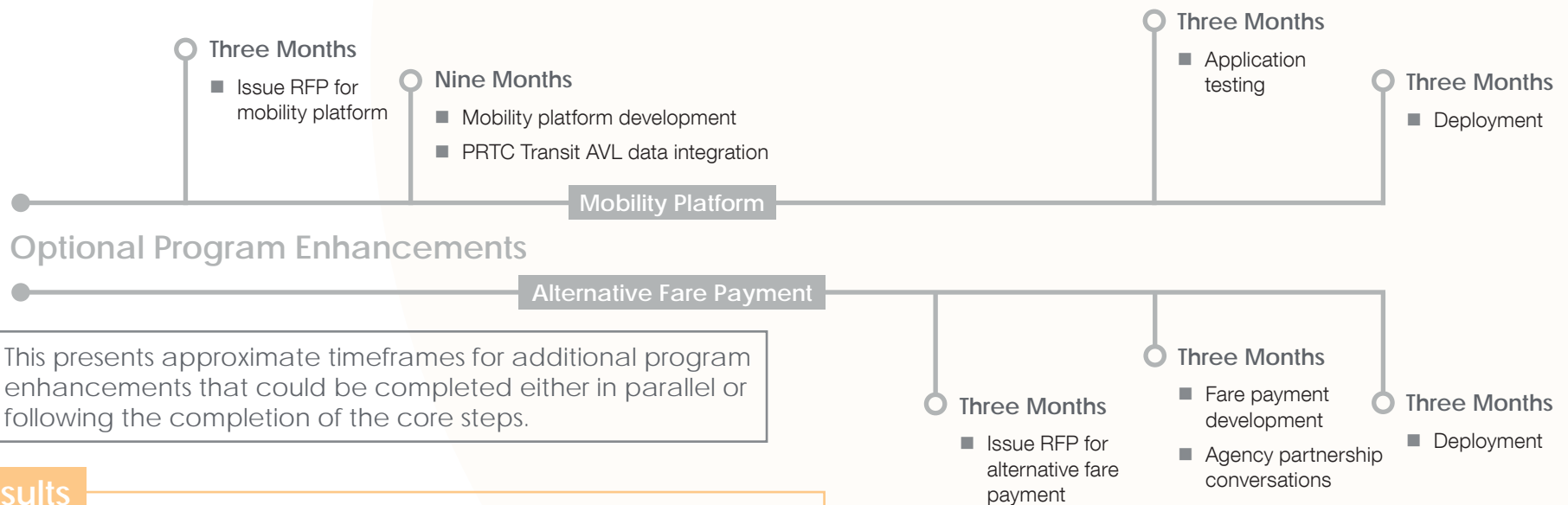
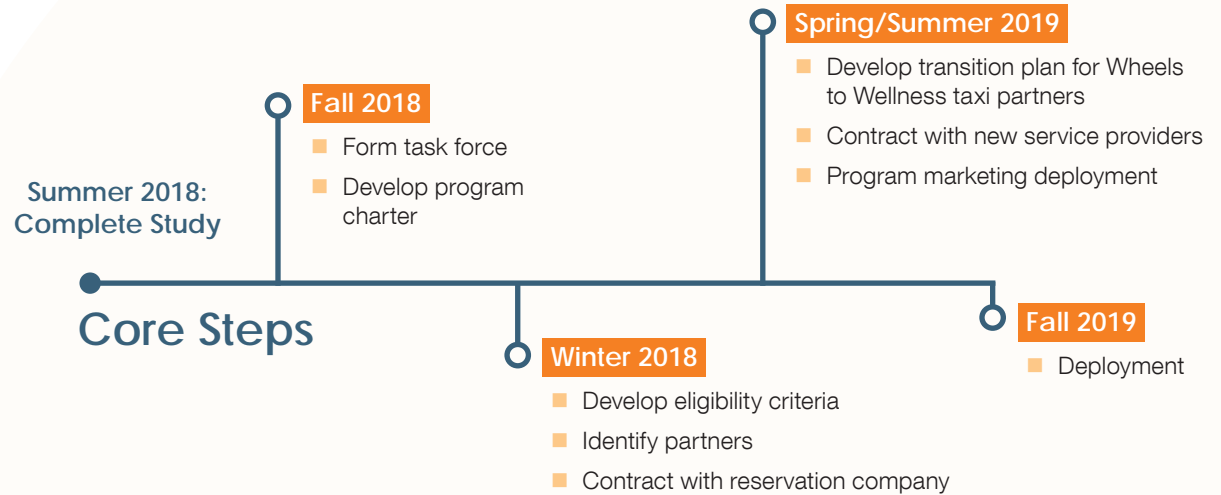
Benefits



Next Steps

Implementation

In order to implement the preferred alternative, several tasks are required to lay groundwork and prepare for implementation. The timeline below describes the next steps for PRTC and its partners to move the preferred alternative forward towards implementation, as well as an estimated timeframe in which each may occur. Note that it is divided into Core Steps (components of the preferred alternative which are required for the commencement of service), and optional steps (which are not mandatory for the commencement of service). Given the current operational funds for the Wheels to Wellness program, funds are expected to last through summer of 2019. It is anticipated that the Preferred Alternative will be able to near substantial completion for the deployment of the mobility platform in the Fall of 2019.



Results

The healthcare access mobility platform as described in the Preferred Alternative not only serves the purpose and need of this study, but advances the strategic goals of PRTC.

Next Steps

Opportunities

The host of services offered by PRTC including paratransit, local and commuter bus, and ride matching services has the ability to follow the framework presented for the preferred alternative, and integrate into the mobility platform as described. This may develop such that the healthcare mobility and access service described in this study becomes a component of a more comprehensive service.

Using the mentality of the Healthcare Access Platform, PRTC may be able to realize a larger system efficiency across the entirety of its services. This would align well with the direction of current transportation trends, and would aid PRTC in advancing the following goals from its strategic plan:

- Transitioning from being seen as a bus company to more of a mobility agency to improve mobility and quality of life
- Investigating new service models that allow for the development of easily scalable demand based service
- Expand local transit by leveraging partnerships with TNCs/other service models

Growing a Comprehensive System

