Minnesota Council on Transportation Access

January 2014
This report is issued to comply with Minn. Stat. 174.285, subd. 5:

By January 15 of each year, beginning in 2012, the council shall report its findings, recommendations, and activities to the governor's office and to the chairs and ranking minority members of the legislative committees with jurisdiction over transportation, health, and human services, and to the legislature as provided under section 3.195.

The cost of preparing this report is under $5,000.
Summary

The Minnesota State Legislature created the Minnesota Council on Transportation Access in 2010 to study, evaluate, oversee and make recommendations to improve the coordination, availability, accessibility, efficiency, cost-effectiveness and safety of transportation services provided to the transit public (Minn. Stat. 174.285).

In this annual report, the council provides a summary of 2013 activities that advance MCOTA’s legislatively outlined duties to improve transportation coordination throughout the state. This document also offers the council’s recommendations for further improvements for transportation coordination in Minnesota and highlights initiatives the council will work on in the next year.

The need for greater transportation coordination in Minnesota is primarily driven by demographic population changes. Federal transit funding programs continue both to require and encourage the coordination of federal resources for human services transportation, and especially transportation for people with disabilities, older adults and people with lower incomes. The implementation of Minnesota’s new Olmstead plan offers another opportunity for MCOTA to help state agencies take advantage of coordination in expanding the opportunities for people with disabilities. Minnesota’s Olmstead plan describes how state agencies will provide services to individuals with disabilities in order for the individuals to be as integrated in their community as is desirable and appropriate.

This year, MCOTA developed a working definition of coordination to guide its work, as well as guidelines for research studies to facilitate greater input and communication between the researchers and the council. MCOTA published three studies that focused on several aspects of transportation coordination in Minnesota: economic benefits, vehicle sharing and non-emergency medical transportation coordination. The council provided input and advice to the Metropolitan Council, Dakota County, DARTS and the NEMT Advisory Committee. Finally, MCOTA’s funding partnership through the Veterans Transportation and Community Living Initiative helped enhance the transportation section of the MinnesotaHelp.info website.

In order to accomplish its duties, the legislature appropriates $100,000 per year for the work of the council. In addition, MnDOT and the Department of Human Services devote staff to support the activities of the council. The appropriation of funds enables MCOTA to engage independent researchers and consultants to carry out the MCOTA projects and activities that require significant effort.
Introduction

The ability to get where you need to go is crucial to all aspects of life. However, the lack of adequate transportation services is a real and persistent barrier for those unable to use a personal vehicle as they attempt to earn a living, get an education, access medical care, purchase groceries or fulfill many other basic daily needs. To give people without personal vehicles the freedom to accomplish these essential tasks, the state of Minnesota makes a substantial investment in transit services. Despite this investment, available transportation services are often fragmented and difficult for consumers to navigate. Transit services are costly to operate, a problem that is sometimes exacerbated by inconsistent, duplicative or restrictive federal and state rules and regulations. In some cases, transportation services are simply not available to meet the public’s needs. This is especially true in rural areas, where many residents lack access to public transportation. Improving coordination and efficiencies among providers of transportation services is critical to helping seniors, persons with disabilities, persons with low incomes, veterans and others enjoy independence and participate fully in our state’s economy.

Fostering communication and cooperation among different governmental agencies and stakeholder groups can enhance transportation services and enable the more efficient use of public resources. To better coordinate public transit and human service transportation activities, most states have created coordinating councils at one or more levels of government.

In Minnesota, the state-level coordinating council is the Minnesota Council on Transportation Access. MCOTA serves as an advisory group and a clearinghouse to address transportation coordination topics from a statewide perspective. The Minnesota State Legislature established the group in 2010. It includes representatives from 13 agencies, listed in Appendix B. MCOTA’s work focuses on increasing capacity to serve unmet transportation needs, improving the quality of transit service, improving understanding and access to these services by the public, and achieving more cost-effective service delivery.

MCOTA Duties

Under Minn. Stat. 174.285, the purpose of the Minnesota Council on Transportation Access is to study, evaluate, oversee and make recommendations to improve the coordination, availability, accessibility, efficiency, cost-effectiveness and safety of transportation services provided to the transit public.

To make progress in improving transit coordination and accessibility, the statute gives the council 20 duties:
1. Compile information on existing transportation alternatives for the transit public, and serve as a clearinghouse for information on services, funding sources, innovations and coordination efforts.

2. Identify best practices and strategies that have been successful in Minnesota and in other states for coordination of local, regional, state, and federal funding and services.

3. Recommend statewide objectives for providing public transportation services for the transit public.

4. Identify barriers prohibiting coordination and accessibility of public transportation services and aggressively pursue the elimination of those barriers.

5. Recommend policies and procedures for coordinating local, regional, state and federal funding and services for the transit public.

6. Identify stakeholders in providing services for the transit public, and seek input from them concerning barriers and appropriate strategies.

7. Recommend guidelines for developing transportation coordination plans throughout the state.

8. Encourage all state agencies participating in the council to purchase trips within the coordinated system.

9. Facilitate the creation and operation of transportation brokerages to match riders to the appropriate service, promote shared dispatching, compile and disseminate information on transportation options, and promote regional communication.

10. Encourage volunteer driver programs and recommend legislation to address liability and insurance issues.


12. Identify methods to eliminate fraud and abuse in special transportation services.

13. Develop a standard method for addressing liability insurance requirements for transportation services purchased, provided or coordinated.

14. Design and develop a contracting template for providing coordinated transportation services.

15. Recommend an interagency uniform contracting, billing and accounting system for providing coordinated transportation services.

16. Encourage the design and development of training programs for coordinated transportation services.

17. Encourage the use of public school transportation vehicles for the transit public.

18. Develop an allocation methodology that equitably distributes transportation funds to compensate units of government and all entities that provide coordinated transportation services.

19. Identify policies and necessary legislation to facilitate vehicle sharing.

20. Advocate aggressively for eliminating barriers to coordination, implementing coordination strategies, enacting necessary legislation and appropriating resources to achieve the council’s objectives.
Legislative Appropriation

In order to accomplish the duties listed above, the legislature appropriates $100,000 per year for the work of the council. In addition, MnDOT and DHS devote staff to support the activities of the council. The appropriation of funds enables MCOTA to engage independent researchers and consultants to carry out the MCOTA projects and activities that require significant effort. For the FY 2012-2013 biennium, MCOTA used the funding for the activities listed in Table 1.

Table 1. FY12-13 Biennium MCOTA Expenditures

<table>
<thead>
<tr>
<th>Activity</th>
<th>Legislative Duties Addressed (Minn. Statute 174.285)</th>
<th>FY12 Expenditures (excluding member and staff time)</th>
<th>FY13 Expenditures (excluding member and staff time)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document coordination case studies</td>
<td></td>
<td>$15,000</td>
<td></td>
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<tr>
<td>Coordination plan guidelines</td>
<td></td>
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<td>Local Coordination Plans synthesis</td>
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<td></td>
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<td>Definition of coordination</td>
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<td></td>
<td>N/C*</td>
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<tr>
<td>MAD workplan preparation</td>
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<td></td>
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<td>MCOTA research study guidelines</td>
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<td></td>
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<td>Website maintenance and updating</td>
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<td>MinnesotaHelp.Info website improvements</td>
<td>1, 8</td>
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<td>$65,000</td>
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<td>Economic Cost-Benefit Case Studies</td>
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<td>NEMT coordination study</td>
<td>1, 2, 3, 4, 16</td>
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<td>NEMT Advisory Committee support</td>
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<td>Olmstead plan advice and input</td>
<td>3, 7, 20</td>
<td></td>
<td>N/C</td>
</tr>
<tr>
<td>Support for greater transportation coordination in Dakota County</td>
<td>2, 4, 5, 6, 9</td>
<td></td>
<td>N/C</td>
</tr>
<tr>
<td>Travel reimbursements</td>
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<td>$1,500</td>
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<tr>
<td>CTS meeting participation</td>
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<td></td>
<td>$1,500</td>
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<tr>
<td>Total cost</td>
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<td>$49,225</td>
<td>$145,708</td>
</tr>
</tbody>
</table>

*N/C = no cost
The Transportation Coordination Environment

Personal mobility continues to be a timely and critical issue in Minnesota and nationally, given projected growth among transportation-disadvantaged populations during the next 20 years. Demographic projections indicate that the number of individuals relying on transportation services is growing rapidly. In Minnesota, the state demographer forecasts the share of the population over age 65 will grow from approximately 13 percent in 2010 to more than 20 percent in 2030. Households made up of empty nesters and elderly individuals living alone have the largest projected growth between 2010 and 2020. Annual growth in the population with disabilities is expected to outpace total population growth, and low-income populations are also experiencing growth.

Coordination of transportation services offers cost-effective benefits for transportation users and for providers—chief among them ease of use and greater flexibility. Recent events affecting transportation coordination in Minnesota include:

- Federal coordination activities and funding consolidation
- Minnesota’s Olmstead plan development

Federal Coordination Activities and Funding Consolidation

The Government Accountability Office issued a report on transportation coordination for the transportation disadvantaged in November 2013. The report, Transportation-Disadvantaged Populations: Coordination Efforts are Underway, but Challenges Continue, identified ongoing challenges to coordination, including insufficient leadership and limited financial resources at the federal level and growing unmet needs at the state and local level. It also identified continuing efforts to address those challenges, such as providing state and local entities with improved guidance on transportation coordination, especially instructions on how to share costs across programs.

Coordination continues to be a core component of federal transportation funding. The federal transportation act, Moving Ahead for Progress in the 21st Century, requires coordination with human services in statewide and metropolitan transportation planning, and coordination of service delivery is also required in Federal Transit Administration grant programs. Job access and reverse commute activities are now eligible under the Urbanized Area Formula program (5307) as well as the Rural Area Formula program (5311). Activities eligible under the former New Freedom program are now eligible under the 5310 Enhanced Mobility of Seniors and Individuals with Disabilities program. See the FTA’s MAP-21 website for more information on these federal programs.
Minnesota’s Olmstead Plan Development

In 1999, the United States Supreme Court ruled in *Olmstead v. L.C.* that “unjustified segregation of persons with disabilities constitutes discrimination in violation of Title II of the Americans with Disabilities Act. The court held that public entities must provide community-based services to persons with disabilities when (1) such services are appropriate; (2) the affected persons do not oppose community-based treatment; and (3) community-based services can be reasonably accommodated, taking into account the resources available to the public entity and the needs of others who are receiving disability services from the entity.”

In response to a 2011 federal lawsuit, the state of Minnesota agreed to develop an Olmstead plan, which is a way to document the state’s “plans to provide services to individuals with disabilities in the most integrated setting appropriate to the individual. Effective Olmstead plans include analysis of current services, concrete commitments to increase integration (and to prevent unnecessary institutionalization), and specific and reasonable timeframes, among other components.”

The plan, *Putting the Promise of Olmstead into Practice: Minnesota’s 2013 Olmstead Plan*, was released on Nov. 1, 2013. The purpose of the Olmstead plan is to expand opportunities for individuals with disabilities, and transportation is critical for access to those opportunities. MCOTA will play an integral part in the state’s implementation of the transportation components of the Olmstead plan.

MCOTA’s Role in Transportation Coordination

In Minnesota, MCOTA is the state-level coordinating council. It serves as both an advisory group and a clearinghouse to address transportation coordination topics from a statewide perspective. For background about the establishment of MCOTA and its predecessor, the Interagency Council on Transportation Coordination, see MCOTA’s 2011 and 2012 Annual Reports on the MCOTA website.

MCOTA addresses the need for cost-effective transportation services by promoting public transit and human services coordination throughout the state. Through its ongoing efforts, the council aims to achieve more cost-effective service delivery, improve quality of service, improve understanding and access to services by the public, and increase transportation capacity to serve unmet needs.

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1 United States Department of Justice, Americans with Disabilities Act website, *About Olmstead* (accessed Nov. 27, 2013)

2 Minnesota Governor’s news release: *Minnesota’s new Olmstead Plan improves opportunities for people with disabilities* Nov. 1, 2013, (accessed Nov. 27, 2013)
Since its creation in 2010, MCOTA has pursued projects and activities to improve transportation coordination in Minnesota. Below are brief descriptions of key council activities and accomplishments during 2013.

Table 2: Key MCOTA 2013 Activities and Accomplishments

<table>
<thead>
<tr>
<th>Activity</th>
<th>Legislative Duties Addressed (Minn. Statute 174.285)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definition of coordination</td>
<td>7</td>
</tr>
<tr>
<td>MCOTA Research Study guidelines</td>
<td>2</td>
</tr>
<tr>
<td>Economic benefits study</td>
<td>1, 2</td>
</tr>
<tr>
<td>Vehicle-sharing study</td>
<td>2, 13, 19</td>
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<td>1, 2, 3, 4, 16</td>
</tr>
<tr>
<td>NEMT advisory committee support</td>
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<td>Support for greater transportation coordination in Dakota County</td>
<td>2, 4, 5, 6, 9</td>
</tr>
</tbody>
</table>

See Appendix A for a list of all initiatives, grouped by legislative duty, since the council’s inception.

**Definition of Coordination**

The term transportation coordination has multiple meanings. The council agreed on a working definition of transportation coordination in order to clarify what is meant when the council or members use the term, and to have a common definition that applies to the council’s guidelines and recommendations. The definition is:

- Coordination is a strategy for managing resources. It is applied within community political environments. Fundamentally, coordination is about shared power and accountability among organizations that are working together to achieve common goals.
- Coordination focuses on management, resources, cost-effectiveness, broad perspectives, multiple stakeholders, cooperation, action and accountability.
- Coordination can be used to address problematic transportation situations, such as duplication of effort and opportunities for improving transportation resource efficiency. Coordinating transportation means doing better (obtaining more results,
like trips) with existing resources by working together with persons from different agencies and backgrounds.

This definition addresses the objective of MCOTA legislative duty 7 by describing what transportation coordination means in order to have a clearer understanding of what transportation coordination plans might include.

**MCOTA Research Study Guidelines**

MCOTA adopted a structure and process to guide future research projects. The guidelines lay out roles for MCOTA, the research team and the project panel. The council will review and approve the final research project statement before the project begins.

These guidelines relate to MCOTA legislative duty 2 by creating a clearer process for defining research and data-gathering questions in order to identify best practices, strategies and barriers to transportation coordination.

**Economic Benefits Study**

The MCOTA study, *Calculating Benefits of Transit Coordination*, was completed in 2012 and published early in 2013. The study found economic and other benefits from three coordination strategies. This information was included in last year’s annual report.

This study addresses MCOTA legislative duties 1 and 2 by compiling information and best practices about the benefits of coordination.

**Human Service Vehicle Sharing Study**

MCOTA published a report based on a study conducted by researchers at the University of Minnesota’s Humphrey School of Public Affairs. *Vehicle Sharing Among Human Service Providers in Minnesota: Steps to Address Barriers* provides an initial review of the regulatory, policy and operational barriers to vehicle sharing among private human services providers in Minnesota. The report also discusses potential ways to address these barriers.

Vehicle sharing among human service providers generally refers to one or more organizations operating the same vehicle at different times (time sharing) or an HSP using its vehicle to provide transportation for the clients of another organization (ride sharing). The aim of vehicle sharing is to maximize the use of available vehicles and drivers in order to save on transportation-related costs and expand services.

Increased vehicle sharing is an objective among the government agencies and private organizations that fund HSPs. It also is an objective among HSPs seeking to more efficiently use their resources, further their respective missions, or increase funding opportunities. This report identifies five barriers to increased vehicle sharing among
HSPs in Minnesota and discusses solutions to each of these barriers, which are listed in the Findings and Recommendations section of this report.

This study addresses MCOTA legislative duties 2, 13 and 19 by identifying best practices, barriers and insurance requirements for vehicle-sharing.

**MinnesotaHelp.Info Website Improvements**

The Minnesota Department of Transportation received two federal grants totaling $1.774 million to expand an existing one-call, one-click center to include statewide transportation service information. The MinnesotaHelp.Info website will allow more than 68,000 veterans, military families and others living in Minnesota to easily access information about public and private transportation options. MCOTA provided the $65,000 local match for the “one-click” phase of the grant.

This project involves making improvements and enhancements to the existing www.MinnesotaHelp.info provider directory. This directory is used by the Veterans Linkage Line, Senior Linkage Line and the Disability Linkage Line, all three housed under the MinnesotaHelp™ Network. The improved website went live at the end of June 2013.

This project relates to MCOTA legislative duties 1 and 20 by compiling information about existing alternatives and by serving as a platform for carrying the message of coordination forward.

**NEMT Coordinators Study**

Under Minnesota’s fee-for-service Medical Assistance program, Minnesota counties are responsible for providing transportation assistance to MA recipients so they can obtain healthcare services. This assistance is commonly referred to as non-emergency medical transportation.

MCOTA sponsored a study conducted by researchers at the University of Minnesota’s Humphrey School of Public Affairs. NEMT Coordinators in Minnesota: A Survey of How Minnesota Counties Use Coordinators to Deliver Non-Emergency Medical Transportation documents how select Minnesota counties use transportation coordinators in providing and administering NEMT under the state’s fee-for-service MA program.

In the surveyed counties, the use of a coordinator generally made the delivery of NEMT more efficient and streamlined than it was with previous approaches. Coordinators have increased efficiency principally by centralizing both transportation expertise and the ride arrangement processes, either internally within the county government or externally with an outside coordinator.
This study relates to MCOTA legislative duties 1, 2, 3, 4 and 16 by compiling information about NEMT practices, including best practices, in Minnesota, recommending statewide objectives, identifying barriers and encouraging training programs related to NEMT.

**Olmstead Plan Advice and Input**

Several MnDOT staff working on the Olmstead plan briefed MCOTA throughout the year about the developments of the plan, which aims to “ensure that Minnesotans with disabilities have choices about where they live and are served in community settings more suitable to their needs and desires.”

This is a summary of the transportation area goal within the Olmstead plan, with the four strategies to achieve the goal:

Transportation: People with disabilities will have access to reliable, cost-effective, and accessible transportation choices that support the essential elements of life such as employment, housing, education and social connections.

- Establish a baseline of transit expenditures and types of service provided across state agencies to better support people with disabilities
- Engage community members to expand flexibility in transportation systems
- Integrate Olmstead principles into transportation plans
- Inform the Minnesota Council on Transportation Access about the Olmstead goals as the council prepares its workplan.

This activity relates to MCOTA legislative duties 3 and 7 by developing statewide objectives and guidelines.

**NEMT Advisory Committee Support**

In 2012, the Minnesota Legislature directed the Non-emergency Medical Transportation Advisory Committee to advise the commissioner of the Minnesota Department of Human Services on the administration of non-emergency medical transportation services provided to recipients of Minnesota health care programs. The legislature also directed the NEMT Advisory Committee to coordinate its activities with the Minnesota Council on Transportation Access. MCOTA provided recommendations about potential solutions for the management of non-emergency medical transportation services to DHS through its request for information in 2012 (see Findings and Recommendations section). The committee has been extended into 2013 and staff continued to brief MCOTA on the NEMT Advisory Committee’s activities. MCOTA also provided input about policies such as the use of transit passes for NEMT.

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This support addresses MCOTA legislative duties 1, 2, 3, 4, 16 and 20 by providing information to the committee, identifying best practices, recommending statewide objectives, identifying barriers and ways to eliminate barriers and encouraging training, and advocating for implementation of recommendations.

**Support for Greater Coordination in Dakota County**

With input from MCOTA members, Dakota County is moving forward with a transportation coordination strategic plan and a mobility management project. The county is engaging stakeholders, including members and staff of MCOTA, to develop an action plan for improving access and coordination for transit-dependent populations served by Dakota County. The county anticipates having a strategic plan completed in the spring 2014.

The Metropolitan Council issued a request for proposals for a mobility management project in Dakota County. Mobility management focuses on meeting the needs of individual customers, including older adults, people with disabilities and individuals with lower incomes, through a wide range of coordinated transportation options and service providers. MCOTA sent the Metropolitan Council a letter of support for the concept of mobility management. DARTS submitted a proposal and was awarded the grant for the project. The new mobility manager at DARTS is working with the team on the county’s transportation coordination strategic plan so these efforts are coordinated.

This study addresses MCOTA legislative duties 2, 4, 5, 6 and 9 by identifying best practices, identifying barriers and ways to eliminate them, engaging stakeholders, and supporting the creation of a brokerage.
Below are findings from the three studies MCOTA published in 2013.

**Economic Benefits Study**
The case studies in [Calculating Benefits of Transit Coordination](#) showed the economic benefits of transportation coordination activities. In addition, they demonstrated other societal benefits, including increased passenger safety, greater productivity, expanded service coverage, growth in transit ridership and improved service quality. This study included only three cases, and more research is needed to quantify the benefits from a greater variety of coordination strategies.

Table 3 summarizes the cost savings and benefits from the report.

<table>
<thead>
<tr>
<th>Program</th>
<th>Location</th>
<th>Annual Cost Savings</th>
<th>Other Benefits</th>
</tr>
</thead>
</table>
| Hubbard County Heartland Express contracts with Paul Bunyan Transit for Dispatch Services | Park Rapids | $22,300 | • More efficient dispatching  
• Hubbard County received state-of-the-art dispatch equipment  
• Additional revenue for Paul Bunyan Transit  
• Increased efficiency allowing expanded coverage within service area  
• Reduced driver distraction during dispatching |
| MNET’s “On the Move!” Travel Training shifts riders from paratransit to Metro Transit’s fixed-route system | Anoka, Chisago, Dakota, Hennepin, Isanti, Ramsey, Sherburne and Washington counties | $11,910 (first year) $67,680 (subsequent years) | Greater independence, mobility and engagement for persons who traditionally only rode paratransit service and can now ride Metro Transit’s fixed-route system with more options and frequencies |
| SmartLink Transit coordinates Medical Assistance travel | Scott and Carver counties | $139,740 (split between state and federal governments) | Improved efficiency in vehicle use |
NEMT Coordinators Study

Below are findings from the study, *NEMT Coordinators in Minnesota: A Survey of How Minnesota Counties Use Coordinators to Deliver Non-Emergency Medical Transportation*, published by MCOTA in 2013.

- There is a diversity of operational models for non-emergency medical transportation coordinators to accommodate and take advantage of specific organizational capacities and resources with each county and region.
- The counties surveyed took a variety of paths to develop their respective coordinator models.
- The Minnesota system for delivery of Access Transportation Service is formally county-based. However, among the surveyed counties, the use of coordinators allows the system to operate effectively as a regional system in many respects.
- There are synergies and conflicts with managed Medical Assistance. In some counties there was considerable overlap in how ATS rides for managed MA and fee for service MA are coordinated. MTM, the for-profit coordinator for the metro consortium, only provides ATS coordination services for FFS MA. MA health plans coordinate ATS through other channels. This division can create confusion for MA clients. It can also create a different transportation experience for clients.
- The lack of reimbursement from DHS for no-load miles is a major challenge for greater Minnesota counties.
- All of the counties surveyed try to control costs by using the least costly transportation mode for each ride.
- Counties monitored their own performance with respect to MA client satisfaction and transportation use.
- Best practices that offer clear benefits and are transferable:
  - Have an NEMT coordinator manage multiple transportation programs
  - Cooperate across counties to achieve greater economies of scale and opportunities to enhance coordination of services
  - Use software systems to handle ride requests, billing and record-keeping
  - Have an outside coordinator, rather than county staff, bill DHS directly
  - Formalize procedures for collecting and assessing client feedback and transportation usage data
  - Share a coordinator for both managed MA and fee-for-service MA

Vehicle-Sharing Study

*Vehicle Sharing Among Human Service Providers in Minnesota: Steps to Address Barriers* identifies five barriers to increased vehicle sharing among human service providers in Minnesota.

- Acquiring the technical information for how to set up a vehicle-sharing arrangement (e.g., documentation, risk management, cost allocation) can be costly for individual HSPs, relative to the benefits of vehicle sharing.
• Identifying a potential vehicle-sharing opportunity requires HSPs to have information about the resources, capacities and needs of other HSPs. Currently, there are no structured forums (e.g., a website) for HSPs to share this information. Consequently, there are substantial information gaps among HSPs about what sharing opportunities exist within the HSP community. For example, San Mateo County, California, developed an Internet registry through which HSPs can exchange information about sharing opportunities.

• With time sharing, each HSP operating a vehicle under the sharing arrangement must independently comply with the applicable state vehicle safety regulations. Compliance with these regulations can be a deterrent to time sharing because secondary operators of shared vehicles often have limited resources and/or transportation expertise, and their limited use of the vehicle may not justify the information and economic costs involved with regulatory compliance.

• Providing transportation services in a ride-sharing arrangement may cause HSPs to become subject to a different set of state vehicle safety regulations. HSPs may view such a change as a reason not to ride-share due to the cost of understanding and complying with a new set of safety regulations.

• HSPs wanting to engage in vehicle sharing can encounter insurance policy terms or prohibitively expensive premiums that discourage or prevent vehicle sharing.
Based on the findings from its 2013 studies, MCOTA makes the following recommendations, and continues its recommendations from 2012 and 2011.

### 2013 Recommendations

#### Recommendations regarding NEMT coordination

The council will follow up on these recommendations by notifying the applicable agencies and organizations.

- The pending statewide NEMT reforms should leverage the rich local knowledge and organizational capacities that have arisen under the county-based system for access transportation services. In general, the current county-based system for delivering ATS system appears to work relatively well.

- Increase and regularize opportunities for information exchanges among counties and DHS regarding operational practices. DHS, through its bulletins and other channels, provides counties with guidance on how to structure their NEMT program to be in compliance with state statutes and rules. However, it appears the state provides relatively little regular guidance on the “soft” operational aspects of the NEMT programs discussed in the NEMT coordination study. Guidance from the state as to what operational practices work better than others would be of considerable value to the counties. Along these lines, greater information exchange among the counties themselves regarding NEMT operational practices would be beneficial.

- Streamline the DHS reimbursement process. It appears the Twin Cities metro consortium coordinator is the only outside coordinator able to bill DHS directly for transportation provider reimbursements.

- Use coordinators to improve statewide data collection for the NEMT program. In its report evaluating the NEMT program, the Minnesota Office of the Legislative Auditor recommended DHS improve its data collection with respect to the NEMT program. DHS will be able to gather some of the recommended data (e.g., number of trips provided, cost of trips) using the process by which it collects billing information for reimbursements. However, certain types of non-cost data (e.g., client satisfaction information) will not be available to DHS through the reimbursement process. Coordinators should be used to collect this data and transmit it to DHS. While some coordinators already collect this data, for it to be useful for statewide and cross-county analysis, DHS should standardize the format and methodology for collecting and organizing it.

- Investigate how DHS can provide counties more incentives to control NEMT costs and otherwise innovate. Currently, counties generally only have two direct incentives
for controlling NEMT costs: (1) limit coordination/administration expenses because they are generally responsible for half those costs; and (2) reduce the amount of no-load volunteer miles in those counties paying for those miles with county dollars. This study has shown that counties have responded to these incentives by innovating and altering their coordination practices to control these costs. Beyond these two incentives, though, the counties generally are not responsible for NEMT costs and thus do not have a direct incentive to reduce costs. DHS should examine whether additional incentives could be developed to encourage counties to innovate further, to increase cost-effectiveness and otherwise improve the quality of their NEMT programs.

Recommendations related to vehicle-sharing programs
Actions to implement these recommendations are included in the FY14-15 MCOTA work plan.

- Outreach and education: State agencies should work to increase education and outreach within the HSP community about vehicle sharing. This could be led by an organization within the HSP community working in partnership with the state. The education and outreach should focus on the “how to” of vehicle sharing and include guidance documents and training that cover:
  - Types of sharing models
  - How vehicle safety regulations apply to HSPs in the context of vehicle sharing
  - Technical aspects of setting up a vehicle-sharing arrangement, including insurance, risk management, documentation and compensation structures. These materials should be developed in consultation with HSPs that have successfully established sharing arrangements and should be made available on the Internet.

- Forums for HSPs to exchange information about sharing opportunities: State or local government agencies should work with the HSP community to develop structured forums in which HSPs can exchange information about sharing opportunities. The case study from San Mateo County, California, provides an example of a web-based forum. A grant under the Section 5310 program could be used to fund the development of such a website in Minnesota by an organization or a group of organizations within the HSP community.

- Data collection: Efforts by state or local governments to promote vehicle sharing need to be supported by quantitative data collection about the nature and scale of the opportunities for sharing among HSPs. Currently no such information exists. Such information could be acquired through surveys of HSPs and should seek to differentiate among the different types of HSPs (e.g., large v. small organizations, senior-focused HSPs v. disabled-focused).

Recommendations from 2012
The council submitted recommendations on potential solutions for the management of non-emergency medical transportation services provided to recipients of Minnesota
health care programs to DHS through its request for information on nonemergency medical transportation for Minnesota health care programs, published in the State Register Oct. 1, 2012.

**Status:** The recommendations are being addressed by the NEMT Committee, whose report is due to the legislature by January 2014.

The following is an abbreviated list of MCOTA recommendations:

- A single administrative structure should be administered at the local level by a county or, if they so choose, a group of counties.
- Local administration includes the counties and state working together to establish greater consistency across Minnesota.
- The state provides ongoing technical assistance to the NEMT coordinators in the form of sample policies and procedures, contract templates and distribution of best practices.
- MnDOT Commercial Vehicle Operations’ Special Transportation Services requirements for driver training and vehicle inspections should be required for any NEMT transportation services providing more than curb-to-curb service.
- Counties or groups of counties should use NEMT coordinators to implement the program.
- Counties or groups of counties have the option of selecting local units of government, non-profit organizations, for profit businesses or public transportation programs to carry out the NEMT coordinator role.
- The assessment process should include fully functional level-of-need assessments for individuals referred by the NEMT coordinators. The assessors who administer the fully functional assessments should be overseen and certified by the state.
- NEMT clients only have to complete one fully functional assessment.
- Equivalent ADA-compliant accessible service should be available for persons with disabilities. There should not be any denials of service because of the lack of accessible vehicles.
- Demand-response public transportation providers should be entitled to full cost ride reimbursement (not limited to published fares).
- The Department of Human Service should create a separate funding category for volunteers. It should include both a mileage fee and an administrative fee for administering volunteer trips.
- NEMT coordinators should competitively procure transportation services.
- The Department of Human Services should build financial incentives into the NEMT program to encourage grouping clients in order to improve cost efficiency.
- NEMT coordinators should assign rides to the least costly appropriate provider/resource.
- All NEMT coordinators use scheduling and dispatching software, which should interface with a DHS client referral and tracking system.
• The NEMT program aligns its transportation terminology with Minnesota’s public transportation programs, based on the Federal Transit Administration’s National Transit Database.

Recommendations from 2011
Table 4 lists the Council’s 2011 recommendations and their implementation status.

Table 4. Status of MCOTA 2011 Recommendations

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>State agencies should conduct demonstration projects to investigate coordinated planning, vehicle/client sharing and cost sharing.</td>
<td>State agencies have funded local projects.</td>
</tr>
<tr>
<td>The legislature should support the recommendation made by the Minnesota Non-Emergency Medical Transportation Committee to use bus passes for NEMT clients to increase the use of public transportation when it is accountable and cost effective.</td>
<td>In NEMT Advisory Committee’s proposed policy manual.</td>
</tr>
<tr>
<td>Vehicles used in human service transportation should be made available to other state, federal or publicly funded programs. State agencies should not restrict grantees to serving only their own parent programs through barriers to billing and accounting structures or liability concerns.</td>
<td>2013 vehicle-sharing study identified issues and potential solutions. Two projects in the FY14-15 workplan will expand understanding.</td>
</tr>
<tr>
<td>State agencies should work together to create funding mechanisms that support their shared funding responsibilities while completing reporting and tracking requirements for various funding streams.</td>
<td>To be addressed in FY14-15 workplan.</td>
</tr>
<tr>
<td>State agencies should support the implementation of strategies identified by regions in local human service transit coordination plans.</td>
<td>State agencies require grant applicants for JARC, NF and 5310 to meet identified local strategies. These strategies will be integrated in the Dakota County projects as well.</td>
</tr>
<tr>
<td>State agencies dealing with transportation services should agree upon common measurements and definitions for tracking and reporting the cost of transportation services.</td>
<td>To be addressed in FY14-15 workplan.</td>
</tr>
</tbody>
</table>
MCOTA has identified the following priority activities for 2014-2015

Table 5. Top MCOTA projects for 2014-2015

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Legislative Duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primer of funding sources for the “transit public” in Minnesota</td>
<td>1, 5</td>
</tr>
<tr>
<td>Common standards for financial data collection related to transportation coordination</td>
<td>15, 18</td>
</tr>
<tr>
<td>Data collection and analysis of vehicle sharing</td>
<td>6, 19</td>
</tr>
<tr>
<td>Maps of human service transportation provider service areas in Minnesota</td>
<td>4, 19</td>
</tr>
<tr>
<td>Mobility management webinar about the Travel Management Coordination Center in Paducah, KY</td>
<td>9</td>
</tr>
<tr>
<td>Input and guidance for implementation of Minnesota’s Olmstead plan</td>
<td>3, 7</td>
</tr>
<tr>
<td>Training for common standards for financial records</td>
<td>15, 16, 18</td>
</tr>
<tr>
<td>Outreach to providers about the options and benefits of vehicle sharing</td>
<td>19</td>
</tr>
<tr>
<td>Minnesota mobility management case studies</td>
<td>2, 9, 16</td>
</tr>
<tr>
<td>Minnesota mobility management handbook</td>
<td>16</td>
</tr>
<tr>
<td>A survey and selected case studies of volunteer driver programs in Minnesota, including faith-based programs</td>
<td>10</td>
</tr>
</tbody>
</table>
Conclusion

Through its ongoing efforts as a state-level coordinating council, MCOTA continues to advance the goal of transportation coordination in Minnesota. Not only has it created numerous tools and resources for local use and served as a valuable single-source coordination resource for the transportation community, its existence fosters interagency connections that promote a heightened level of transportation-related cooperation and communication within state and local government.

This year, MCOTA developed a working definition of coordination to guide its work, as well as guidelines for research studies to facilitate greater input and communication between the researchers and the council. MCOTA published three studies that focused on several aspects of transportation coordination in Minnesota: economic benefits, vehicle sharing, and NEMT coordination. The council provided input and advice to the Metropolitan Council, Dakota County, DARTS and the NEMT Advisory Committee. Finally, transportation information improvements were made to the MinnesotaHelp.Info website.

The council’s economic cost-benefit case studies illustrate actual cost reductions and other benefits attributable to specific coordination efforts throughout the state. MCOTA’s recommendations for non-emergency medical transportation have the potential to generate significant savings and create consistent levels of service for recipients of Minnesota health care programs.

The implementation of Minnesota’s new Olmstead plan offers another opportunity for MCOTA to help state agencies take advantage of coordination in expanding the opportunities for people with disabilities. The council’s 2014-2015 workplan will create more specific guidance for high-impact projects that can be adopted in local communities.

With sustained support for MCOTA, the state of Minnesota will work toward its important objective of removing obstacles that prevent the successful coordination of transportation programs and resources, giving Minnesotans access to transportation services that meet their mobility needs.
Appendix A: MCOTA Legislative Duties and Accomplishments

MCOTA legislative duties and corresponding accomplishments/activities

|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|------|------|------|---------------|---------------|
| 1. Compile information on existing transportation alternatives for the transit public and serve as a clearinghouse for information on services, funding sources, innovations and coordination efforts. | - Minnesota coordination website  
- Economic cost-benefit studies  
- Veterans Transportation and Community Living Initiative grant  
- NEMT Advisory Committee support  
- NEMT Coordination Study  
- Local Transit Coordination Case Studies  
- Primer of funding sources for “transit public” in Minnesota | X   | X    | X    | X        | X             |
| 2. Identify best practices and strategies that have been successful in Minnesota and in other states for coordination of local, regional, state and federal funding and services. | - NEMT Advisory Committee support  
- NEMT Coordination Study  
- Vehicle-sharing Study  
- Successful Local Transit Coordination Case Studies  
- Minnesota mobility management case studies | X   | X    | X    | X        | X             |
|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|------|------|------|----------------|----------------|
| 3. Recommend statewide objectives for providing public transportation services for the transit public. | • NEMT Advisory Committee support  
• NEMT Coordination Study  
• Definition of coordination                                                             |      |      | X    | X              |                |
| 4. Identify barriers prohibiting coordination and accessibility of public transportation services and aggressively pursue the elimination of those barriers. | • NEMT Advisory Committee support  
• NEMT Study  
• Synthesis of 2011 Greater Minnesota regional transportation coordination plans  
• Planning guidance for the 2011 Local Human Service Transit Coordination Plans in Minnesota  
• Maps of human service transportation providers’ areas of service in Minnesota | X    | X    | X    | X              | X              |
| 5. Recommend policies and procedures for coordinating local, regional, state and federal funding and services for the transit public. | • Synthesis of 2011 Greater Minnesota regional transportation coordination plans  
• Successful Local Transit Coordination Case Studies  
• Primer of funding sources for “transit public” in Minnesota | X    | X    | X    | X              | X              |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|------|------|------|----------------|----------------|
| 6. Identify stakeholders in providing services for the transit public and seek input from them concerning barriers and appropriate strategies. | • Synthesis of 2011 Greater Minnesota regional transportation coordination plans  
• Participation in the Minnesota State Council on Disability’s annual Town Hall Meeting  
• Data collection and analysis of vehicle sharing | X    |      |      |     |                |                |
| 7. Recommend guidelines for developing transportation coordination plans throughout the state. | • Synthesis of 2011 Greater Minnesota regional transportation coordination plans  
• Planning guidance for the 2011 Local Human Service Transit Coordination Plans in Minnesota  
• Successful Local Transit Coordination Case Studies | X    | X    | X    | X   | X              | X              |
| 8. Encourage all state agencies participating in the council to purchase trips within the coordinated system. | • This model of centralized purchasing is not in place in Minnesota. |      |      |      |                |                |
| 9. Facilitate the creation and operation of transportation brokerages to match riders to the appropriate service, promote shared dispatching, compile and disseminate information | • Mobility management webinars  
• Planning guidance for the 2011 Local Human Service Transit Coordination Plans in Minnesota  
• Successful Local | X    | X    |      |     |                | X              |
<table>
<thead>
<tr>
<th>Legislative Duty</th>
<th>Supporting Activities</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
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<tbody>
<tr>
<td>on transportation options, and promote regional communication.</td>
<td>Transit Coordination Case Studies</td>
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<td>[planned]</td>
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<td></td>
<td>• Minnesota mobility management case studies</td>
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<tr>
<td>10. Encourage volunteer driver programs and recommend legislation to address</td>
<td>Successful Local Transit Coordination Case Studies</td>
<td></td>
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<td>X</td>
<td>X</td>
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<tr>
<td>liability and insurance issues.</td>
<td>• A survey and selected case studies of volunteer driver programs in Minnesota,</td>
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<td>including faith-based programs</td>
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<td>11. Recommend minimum performance standards for delivery of services.</td>
<td>To be addressed in future work plans</td>
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<td>12. Identify methods to eliminate fraud and abuse in special transportation</td>
<td>To be addressed in future work plans</td>
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<td>services.</td>
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<tr>
<td>13. Develop a standard method for addressing liability insurance requirements</td>
<td>Vehicle-sharing Study</td>
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<td>for transportation services purchased, provided, or coordinated.</td>
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<td>14. Design and develop a contracting template for providing coordinated</td>
<td>Development of contract template</td>
<td>X</td>
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<td>transportation services.</td>
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<td>--------------------------------------------------------------------------------</td>
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</table>
| 15. Recommend an interagency uniform contracting, billing and accounting system for providing coordinated transportation services. | • Collaboration on the development of a Unified Transit Data Center pilot project in Scott and Carver counties.  
• Common standards for financial records  
• Training for common standards for financial records | X    |      |      | X               | X              |
| 16. Encourage the design and development of training programs for coordinated transportation services. | • NEMT Advisory Committee support  
• NEMT Study  
• Mobility management webinars  
• Training for common standards for financial records  
• Minnesota mobility management case studies  
• Minnesota Mobility Management Handbook | X    | X    | X    | X               | X              |
| 17. Encourage the use of public school transportation vehicles for the transit public. | • To be addressed in future work plans |      |      |      |                |                |
| 18. Develop an allocation methodology that equitably distributes transportation funds to compensate units of government and all entities that provide coordinated transportation services. | • Common standards for financial records  
• Training for common standards for financial records | X    |      |      |                |                |
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<tbody>
<tr>
<td>19. Identify policies and necessary legislation to facilitate vehicle sharing.</td>
<td>• Vehicle-sharing study&lt;br&gt;• Data collection and analysis of vehicle sharing&lt;br&gt;• Maps of human service transportation providers' areas of service in Minnesota&lt;br&gt;• Outreach to providers about options and benefits of vehicle sharing</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>20. Advocate aggressively for eliminating barriers to coordination, implementing coordination strategies, enacting necessary legislation, and appropriating resources to achieve the council's objectives.</td>
<td>• NEMT Advisory Committee support&lt;br&gt;• Veterans Transportation and Community Living Initiative grant&lt;br&gt;• Input and guidance for implementation of Minnesota’s Olmstead plan&lt;br&gt;• Primer of funding sources for “transit public” in Minnesota</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
Appendix B: MCOTA Members during 2013

Tim Henkel, Chair
Minnesota Department of Transportation

Joan Willshire, Vice Chair
Minnesota State Council on Disability

Erin Cambell
Office of the Governor

Gerri Sutton
Metropolitan Council

Harlan Tardy
Minnesota Board on Aging

Mary Koep (past member)
Minnesota Board on Aging

Tina Armstrong
Minnesota Department of Commerce

Kelly Wosika
Minnesota Department of Education

Chuk Hamilton
Minnesota Department of Employment and Economic Development

Tim Held
Minnesota Department of Health

Steve Masson
Minnesota Department of Human Services

Ron Quade
Minnesota Department of Veterans Affairs

Keith Bogut
Minnesota Management and Budget

Britta Reitan (past member)
Minnesota Management and Budget

Tiffany Collins
Minnesota Public Transit Association

Tony Kellen (past member)
Minnesota Public Transit Association