Transportation Coordination in Iowa

Report to the Iowa General Assembly and Governor Kim Reynolds, per 2018 Iowa Code section 324A.4

Prepared by the Iowa Department of Transportation, in cooperation with the Iowa Transportation Coordination Council

December 14, 2018
Introduction
The Code of Iowa, Section 324A.4, subsection 2, Code 2011, states the Iowa Department of Transportation (DOT) “shall biennially prepare a report to be submitted to the general assembly and the governor prior to December 15 of even-numbered years. The report shall recommend methods to increase transportation coordination and improve the efficiency of federal, state, and local government programs used to finance public transit services and may address other topics as appropriate.”

Iowa has long been a leader in transportation coordination, from designated public transit agencies covering the 99 counties with little duplication, to requiring any agency receiving public dollars for the provision of transportation to first coordinate with the local public transit agency before providing the transportation on their own, to the creation of the Iowa Transportation Coordination Council. Coordination allows Iowa to provide much needed transportation services to the citizens of Iowa with the most efficient use of public funds. Coordination has been an important topic in Iowa for many years, but during these times of economic constraint and restraint and Iowa’s changing demographics, coordination of transportation services becomes even more critical.

Background
Iowa has 35 public transit systems, covering all 99 counties, served by 19 urban systems in cities and 16 regional systems that are multi-county in nature. These public transit systems provided over 24.9 million rides in Fiscal Year 2018. All transit services are open to the general public; trips are made to work, shopping, meal sites, medical appointments, social events, for any purpose a person desires.

The 19 urban systems typically operate as a department of their respective cities, with three systems as exceptions: CAMBUS as a department of the University of Iowa, Metropolitan Transit Authority of Black Hawk County as a stand-alone 28E organization, and the Des Moines Area Regional Transit Authority as a stand-alone 28M organization. Service in the urban areas can be classified as fixed route or ADA complementary paratransit. Fixed route operates along a set course with passengers accessing the service via the nearest bus stop, or, in some communities, flagging the bus down along the route. ADA complementary paratransit is available in zones around the fixed routes to those who meet certain disability qualifications under the Americans with Disabilities Act (ADA), with service provided as origin-destination with the bus picking the passenger up at their home, or other site, and delivering them to their desired location. ADA complementary paratransit trips are scheduled the day before the desired trip. Two of the regional systems, 10-15 Transit and East Central Iowa Transit, also operate fixed routes and ADA complementary paratransit service in the cities of Oskaloosa and North Liberty, respectively. These communities are not included in the count of 19 fixed route systems, however, as the cities are not large enough in terms of population to receive funding directly from the Iowa DOT for the service.
The 16 regional systems, ranging in coverage from three counties to ten, are set up either independently as non-profit organizations, by 28E agreement, or are housed within another agency such as a council of governments. Regional systems operate on a demand-response basis, with curb-to-curb service for passengers typically scheduling trips 24-hours in advance.

For more information on Iowa’s public transit systems, please visit [http://www.iowadot.gov/transit/](http://www.iowadot.gov/transit/).

**Iowa Transportation Coordination Council**

Meeting bi-monthly, the Iowa Transportation Coordination Council (ITCC), established by the Iowa Legislature, discusses passenger transportation issues affecting Iowa. The Iowa DOT Office of Public Transit chairs and staffs the meetings. Members include representatives from Iowa Department on Aging (IDA), Iowa Department of Human Services (DHS) – Iowa Medicaid Enterprise (IME), Iowa DHS – Bureau of Refugee Services, Iowa Department of Public Health, Iowa Vocational Rehabilitation Services, Iowa Developmental Disabilities Council, Iowa Department of Corrections, American Cancer Society, Iowa Public Transit Association, Iowa’s Metropolitan Planning Organizations (MPOs) and Regional Planning Affiliations (RPAs), AARP, Access2Care, Iowa Mobility Managers Network, Epilepsy Foundation Iowa, and the Federal Transit Administration (FTA). As mentioned in the 2016 coordination report, in 2017 the ITCC added a member who is a public transit user and advocate. She also uses a mobility device making her
input very valuable to the coordinated passenger transportation discussion. Joining in 2018 was a representative from the Iowa Department of Corrections.

The ITCC serves as the statewide coordination advisory group, identifying gaps in transportation needs, barriers to coordination, and developing partnerships for solutions and transportation options. ITCC agenda items have included: American Cancer Society Transportation Needs Assessment, Medicaid Integrated Settings Rule effect on public transit in Iowa, ITCC Member Agency Spotlights, passenger transportation-related legislation, ITCC Mission and Purpose, Iowa Cancer Consortium Implementation Grant, LifeLong Links project, Passenger Transportation Plan Guidance, Iowa DOT’s Driving Retirement brochures, content for Iowa DOT’s Get There Your Way webpage, and the 2017 and 2018 Passenger Transportation Summits.

Because of relationships formed during these ITCC meetings, other cooperative and coordinated efforts occur. For instance, representatives from the Iowa DOT Office of Public Transit are contributing to the American Cancer Society’s Iowa Cancer Consortium Implementation Grant effort to increase outreach and understanding around patient resources and to increase the number of rides met through increased transportation options and to engage stakeholders in the design of solutions for sustainable transportation resources. ITCC members also have frequently included Iowa DOT Office of Public Transit staff as speakers at various human service-related conferences to further educate attendees on public transit and mobility coordination in Iowa. For more information on the ITCC, please visit: http://www.iowadot.gov/transit/itcc/index.html.

**ITCC Retreat, March 2018**

In late 2017, the Iowa DOT Office of Public Transit applied for and received a grant from the National Center for Mobility Management through Easterseals to examine and define strategies to implement a coordinating council on access and mobility (CCAM) model at the state level. With this grant, the Iowa DOT Office of Public Transit hosted a retreat for the ITCC at Honey Creek Resort. Held March 26-27, 2018, the retreat’s purpose was:

- To explore the next stages of passenger transportation coordination in Iowa
  1. Identify questions, ideas, strategies, and objectives for following the federal CCAM goals:
     a. Improve Access to the Community through Transportation
     b. Enhance Cost-Effectiveness of Coordinated Transportation
     c. Strengthen Interagency Partnerships and Collaboration with State, Local and Industry Groups
  2. Assess the viability of ideas/strategies.
Attendees included representatives from the Iowa DOT, Iowa Department on Aging, Iowa Department of Corrections, Iowa Department of Human Services – Bureau of Refugee Services, Iowa Workforce Development, Iowa Economic Development Authority, Epilepsy Foundation Iowa, American Cancer Society, a public transit advocate, Ames Area Metropolitan Planning Organization, Iowa Mobility Manager’s Network, and Iowa Public Transit Association.

Many ideas arising from the retreat surrounded giving ITCC a new Mission and Purpose, increasing visibility to state agencies and human service organizations and the public, and working on projects with quick, positive results to continue the momentum of the retreat.

A report about passenger transportation coordination in Iowa and the retreat process was written for the National Center for Mobility Management as a case study for other states, it can be accessed at: https://iowadot.gov/transit/publications/Implementing%20a%20State%20Coordination%20Council%20Info%20Brief.pdf.

**2017 and 2018 Passenger Transportation Summits**

Since 2014, the ITCC and Iowa DOT Office of Public Transit have organized an annual Passenger Transportation Summits. Held in Marshalltown the first three years, the Summit was held in Ankeny in 2017 and 2018, at the suggestion of summit attendees. The purpose of the annual summit is to bring many different disciplines together, from employment to health care, to discuss passenger transportation issues in hopes that attendees will learn they have more in common when it comes to planning for passenger transportation than they have differences.

The issues discussed during the May 18, 2017, summit were:

- Panel Discussion: Riders: Why do they use Public Transit?
- Panel Discussion: Technology in Passenger Transportation
- Keynote: “Speak for Yourself”
- Panel Discussion: Transportation under Medicaid
- Panel Discussion: Mobility Management in the Midwest
- Topics from the Audience

The May 24, 2018, summit topics included:

- Panel Discussion: Innovations in Rural Public Transit
- Panel Discussion: Elected Officials Perspective
- Keynote: “What’s so Great about Coordination?”
- Report Presentation: Strategies to Implement a Statewide Coordinating Council
- Topics from the Audience
Attendance at these summits continues to reach over 100 each year. These summits are important for conveying information about all passenger transportation options in the state, coordination efforts that work and those that do not, and for the networking opportunity they provide.

**Passenger transportation planning process**

Iowa’s MPOs and RPAs have facilitated a coordinated planning process to create passenger transportation plans and submit them to the Iowa DOT.

The goals of the passenger transportation planning process are to:

1. Improve transportation services to Iowans;
2. Increase passenger transportation coordination;
3. Create awareness of unmet needs;
4. Develop new working partnerships;
5. Assist decision-makers, advocates, and consumers in understanding the range of transportation options available;
6. Develop justification for future passenger transportation investments; and
7. Save dollars and eliminate overlapping of services.

Public transit projects to be funded with FTA Section 5310 (Enhanced Mobility of Seniors and Individuals with Disabilities) monies must be derived from a coordinated planning process. While only Iowa’s large urban transit systems (over 50,000 in population) and two regional public transit systems receive Section 5310 funds annually, the Iowa DOT requires a coordinated passenger transportation plan from all areas of the state. This coordinated planning process brings together local stakeholders in transportation to identify transportation needs in the community. Projects such as medical shuttles, employment shuttles, a one-call/one-click project in eastern Iowa, transportation coordination summits and workshops, and the hiring of local mobility coordinators have come from the passenger transportation planning process. Bringing the right organizations together to discuss transportation needs incites coordination of ideas and resources and enhances the mobility of Iowans.

For a list of Iowa’s MPOs and RPAs, please visit: [http://www.iowadot.gov/systems_planning/distplannercontact.htm](http://www.iowadot.gov/systems_planning/distplannercontact.htm).

**Coordination efforts**

Public transit agencies strive to coordinate transportation services within their community to the greatest extent possible, to the benefit of all involved. By partnering with the RPAs and local human service providers they work to create more efficient use of the public transit vehicles, cost savings to the coordinating agencies, and access to needed transportation services for the community. One of the biggest barriers to coordination in rural areas is the federal Charter rules (49 CFR Part 604). These rules prevent local public transit agencies from providing group trips to their local community members, groups such as daycares and social service organizations can no longer utilize public transit for trips because they are considered exclusive use of the vehicle for a negotiated price. These trips may only be provided if none of the registered charter companies in an area respond as able to perform a trip or if the public
transit agency is able to provide the service for free. While large event transportation should be provided by private charter companies if available, small daycares cannot afford charter rates to transport their children to the local pumpkin patch, library, or zoo. In recent years, several of the regional public transit agencies in Iowa have had luck in notifying the local registered charter providers of requested trips, with none responding, and then providing these trips. However, it is still often the case that the public transit systems shy away from charter work because of the cumbersome rules, so these trips do not occur and learning opportunities are lost.

Another rule hindering the provision of public transit, especially in rural areas, is the Federal Transit Administration’s School Bus Operations rule (49 CFR Part 605). Written with urban fixed routes in mind, this rule does apply to rural, demand response systems. With many school districts limiting the areas in which transportation to students is provided, including within city limits or with limited stops along a route, parents look to the public transit agencies to provide transportation for their children. Public transit agencies must be careful, however, to ensure this service does not look exclusive to school children, even though parents are individually scheduling and paying for their own children and does not cause other general public riders from being denied rides. Like the Charter rule, explained above, some public transit agencies turn down requests for school transportation from parents to ensure compliance with the rule.

**Social service agencies**

Human service agencies, counties, nursing homes, sheltered workshops, etc. are all able to transport their clients to medical appointments, work, and social activities by public transit without the expense of purchasing, maintaining, fueling, and insuring a vehicle. Staff time is also saved because an employee is not required to take time out of their work day to transport perhaps as few as one person to an appointment. Unfortunately, public transit days and hours of service do not always provide enough coverage for social service agencies to take full advantage of this coordination effort and sometimes funding sources may dictate the transportation provider to be used. Overall public transit demand, driver availability, vehicle availability, and operational funding factor into hours and days public transit is available to assist social service agencies with their transportation needs. Discussions are always on-going to increasing all of those factors. Working to eliminate funding silos where funding sources prescribe the transportation provider or have restrictions about who may ride a vehicle would also boost coordination in this area.

**Aging community**

Many of Iowa’s public transit agencies receive Federal Title IIIIB funding through their respective Area Agencies on Aging (AAA) to provide transportation services to those aged 60 years and over. Eligible passengers living independently typically pay only a donation for the transportation service received. This partnership is valuable, allowing seniors who may not be able to drive or do not want to drive to remain in their homes as long as they desire.

Several public transit agencies also contract with their local AAA for volunteer drivers. These drivers use their own vehicles to transport one or two passengers at a time for the public transit agency. These trips
often are from areas not frequently served by public transit or require great distance of travel which would make the trip cost prohibitive for the passenger if provided by a public transit vehicle and driver.

Another function of Iowa’s AAAs is to serve as their region’s Aging and Disability Resource Center or ADRC. In this role, AAA employees assist and counsel persons who are aging or have disabilities about the benefits for which they are eligible. Understanding the public transit system is useful to this counseling role.

In June 2012, the Iowa DOT was awarded a grant from the FTA’s Veterans Transportation and Community Living Initiative (VTCLI) grant program. With this grant and working with the Iowa Department on Aging and the Iowa Department of Veterans Affairs on the No Wrong Door project, a master information, referral, and assistance (IR and A) database was created, including transportation services available around the state. The database is used by a one-call center of linked sites, typically AAAs, to answer questions and provide “warm” transfers to the appropriate resources and feed a searchable, mobile-friendly website, www.lifelonglinks.org, where persons can locate transportation and social services available in their area. The IR and A database and LifeLong Links website are maintained by the Iowa Department on Aging.

Public health
The Iowa DOT is one of the many partner agencies providing input on and taking responsibility for addressing Iowa’s critical health needs through annual updates to Healthy Iowans: Iowa’s Health Improvement Plan. In addressing the transportation issues in the plan, the Iowa DOT committed to: “Provide transportation to health care services by making available State Transit Assistance Special Project funds to Iowa’s 35 public transit agencies.”¹ The Iowa DOT Office of Public Transit annually sets aside STA funds to provide immediate opportunity grant funding to Iowa’s public transit agencies for start-up of new projects, an example of which could be medical transportation.

Starting in 2017, the Iowa DOT and IDPH partnered with Iowa Healthiest State and Blue Cross Blue Shield’s Healthy Hometown Initiative, to develop the Iowa Walking College.² This effort attracts individuals and organizations who have a passion for creating a more walkable community; through a series of trainings and assignments, participants develop a knowledge of ways to work with local officials to advocate for positive change within their community.

The Statewide Mobility Manager and the ITCC Chair began meeting with the Iowa Department of Public Health staff in 2018 to determine which counties are identifying transportation as a barrier to receiving health care through their Community Health Needs Assessments (CHNA) and Health Improvement Processes (HIP). These discussions will lead to presentations to the county public health officials and

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¹ [http://idph.iowa.gov/Portals/1/userfiles/91/Healthy%20Iowans/2018%20Revisions/Healthy%20Iowans%202017-2021%20Revised%20July%202018.pdf](http://idph.iowa.gov/Portals/1/userfiles/91/Healthy%20Iowans/2018%20Revisions/Healthy%20Iowans%202017-2021%20Revised%20July%202018.pdf), Page 1
others to make the services of public transit in Iowa known and to encourage public transit agencies to seek out local public health staff to discuss coordination possibilities.

**Non-emergency medical transportation**

In April 2016, Iowa’s Medicaid system was contracted out to three managed care organizations (MCO), each responsible for providing non-emergency medical transportation to their respective eligible clients. In November 2017, one of the MCOs ended their contract with the state, leaving the public transit agencies a short window of time to determine which of the two remaining MCOs each transportation client had chosen and ensuring the rides could still be provided and paid. Each MCO has a separate transportation broker. If wanting to fully cover their area, each transit agency must contract with all MCO transportation brokers. In turn, the databases of all brokers’ available rides must be monitored, and transit agencies must bill each of the brokers for the rides provided. Differences in policies from broker to broker is difficult on agencies which contract with both brokers, as procedures can vary. Also, timeliness in receiving payments from the brokers has been an issue for several public transit agencies, making cash-flow tight at times. In Fiscal Year 2016 and Fiscal Year 2017, Iowa’s public transit agencies provided 192,356 and 738,146, respectively, non-emergency transportation rides under contract to the MCO brokers. The one-year change amounts to a 284% increase in non-emergency medical transportation rides. For reference, the non-emergency medical transportation rides totaled 86,219 in Fiscal Year 2015.³

A newer challenge to passenger transportation coordination in the state relates to a rule change by Iowa Medicaid Enterprise in December 2017 for persons on the Medicaid Intellectual Disability Waiver. Persons on this waiver, and their provider, receive funding under a tiered rate structure. Prior to December 1, 2017, transportation services were paid on top of the tiered rates. After the rule change, transportation costs were included in the tiered rate structure, therefore each person and their respective service agency had less overall funding to spend on a daily basis. To save money, some service providers have ended arrangements with local public transit agencies and have begun providing transportation internally. These agencies have either purchased vans for providing the transportation or are using staff cars. While not intentional, this has created a challenge in fulfilling the transportation coordination requirements of Code of Iowa Section 324A.4.1 which reads in part:

> An organization, state agency, political subdivision, or public transit system, except public school transportation, receiving federal, state, or local aid to provide or contract for public transit services or transportation to the general public and specific client groups, must coordinate and consolidate funding and resulting service, to the maximum extent possible, with the urban or regional transit system.

The public transit agencies are willing and able to provide the needed transportation services for the Intellectual Disability Waiver clients and since ending the contracts with the human service agencies for these services public transit agencies have reported significant loss of revenue that has reduced public transit services for all users. Discussions with Iowa Medicaid Enterprise, their service providers, and the

³ Iowa DOT Office of Public Transit statistics, queried November 2, 2018
public transit agencies may be productive in determining an agreement for providing Medicaid Waiver funded transportation.

**Integrated employment**
The integrated settings rule for Medicaid’s Home and Community Based Services (HCBS) takes effect March 17, 2019. This rule essentially requires all persons with disabilities on HCBS waivers as able to work and live in integrated settings within the community, instead of working in sheltered workshops and living in group homes. Persons covered under these programs should have choices about where to live and work. This rule is wonderful for persons with disabilities and the communities in which they are a part of but will be tricky for public transit providers. Currently, many public transit agencies provide transportation to persons with disabilities from a group home setting to their respective sheltered workshop each morning and afternoon. While the current arrangement is efficient for public transit, it is not ideal for ensuring persons with disabilities are interacting with their community. The integrated settings rule will strive to incorporate more persons with disabilities into communities, into jobs of their own choosing, and into living quarters they select. Public transit and other passenger transportation providers will need to adapt to individualized schedules; working with HCBS entities to solve trip planning requests, plus determining how to make transportation affordable for a person living on a fixed income.

Iowa DOT’s Office of Public Transit, the Iowa Developmental Disabilities Council, and the Iowa Coalition for Integration and Employment have come together to work on this important issue. A facilitated discussion at the local level took place in Dubuque on March 30, 2017, to develop relationships for resolving problems with work hours, work days and payment for transportation.

One example of a public transit agency working to address the need for more hours and days of service and the integrated settings rule is RIDES, the Region 3 public transit system in Northwest Iowa. Using a State Transit Assistance Special Project grant and a match from their Mental Health and Disability Services region, RIDES contracted with the local cab company in Spencer to provide demand response service in the city at times when RIDES did not normally operate – nights, weekends, and holidays. The service is open to the general public and the cab company uses a RIDES lift-equipped bus, ensuring the service is ADA-accessible. Medicaid clients now working in the community because of the integrated settings rule are able to get to their jobs no matter the shift time because of this service. Starting in February 2018, approximately 300 rides were provided each month in the first six months of service.

**Mobility management**
Mobility management has become a major focus area over the past 10 years both nationally and in the State of Iowa. Mobility managers, or mobility coordinators as many are known, assist individuals in navigating beyond Point A to Point B, no matter the number of modes of transportation required, and truly understanding the individual needs of transit riders. Mobility coordinators may provide travel training, showing persons how to ride the bus if they have never had that experience. Mobility coordinators also meet with human service agencies, businesses, and other organizations to inform them of the public transit services available to inspire more collaboration. Currently mobility coordinators are
located in Region 1, Region 4, Region 8, Region 11, Region 13, Council Bluffs/Omaha, Johnson County, Linn County, and Polk County, as shaded in the map below.

One position unique to the State of Iowa is the statewide mobility coordinator. These responsibilities are provided by an Iowa DOT Office of Public Transit staff member, in additional to his regular duties as Transit Programs Administrator. In the past two years, the statewide mobility coordinator has worked with the Iowa Department of Public Health, Iowa Department of Corrections, Iowa DOT Motor Vehicle Division, United Way of Central Iowa, and the Iowa Cancer Consortium to understand the value of and ways public transit can improve for their constituents.

The statewide mobility coordinator administers the Iowa Mobility Manager’s Network, providing technical assistance to mobility coordinators and associated staff around the state, and serves as a contact for customers not served by a regional or urban mobility coordinator, assisting with travel navigation and providing referrals to local transportation providers.

While mobility management is an eligible expense under several Federal Transit Administration programs available to Iowa’s public transit agencies, these funding sources are often fully committed to funding public transit operational activities rather than mobility coordination. Separate, specific funding programs for mobility management no longer exist under the current federal transportation law, therefore creation of new positions requires a real local commitment to the mobility management concept. Many transit systems believe mobility management to be a good idea but are unable to free up already committed
funding to pay for an additional staff person. Several transit agencies have realized mobility management is a function of the work performed by existing transit agency staff through community outreach and educational duties, allowing the mobility management network to expand and grow.

Starting in FY2019, the statewide mobility coordinator will work with each transit agency to determine if current staffing can allow for increased community outreach to provide additional assistance when needed. Additionally, the statewide mobility coordinator will be working with various other state agencies to develop ways to include public transit within partner agency websites, literature, and/or performance measures within contractual agreements to enhance local level knowledge of public transit. If other state agencies can generate data regarding access to public transit, Iowa DOT can then better align funding and/or services to the needs of its riders statewide.

For more information about mobility management, please visit:

RideShare and commuting options
Included in the previously mentioned VTCL grant was statewide ride matching software, where veterans and the general public can locate others with similar origins and destinations in order to share transportation costs. www.iowarideshare.org went live October 20, 2016, to serve as Iowa’s ride matching resource. In the past two years, 1,852 have become registered users and there are 118 total vanpools in the system.

Over the past couple years, the Iowa DOT has focused on coordinating efforts across offices and divisions to address mobility and accessibility challenges. One such coordinated effort is the 380 Express commuter bus. Intended to relieve congestion during the reconstruction of I-380 between Cedar Rapids and Iowa City, the 380 Express began operation on October 1, 2018. 380 Express is a service of CorridorRides (public transit Region 10) and is operated by a private company under contract. In its first three weeks of service, approximately 120 rides per day were provided. Ridership is expected to continue increasing as construction-related traffic impacts begin and more people become familiar with the service. More information on 380 Express can be found at https://380express.com/.

Assisting those unable to drive
Iowa DOT’s Office of Public Transit and Office of Driver and Identification Services have collaborated to create a more inclusive online experience for customers seeking driver licensing assistance. While all the information provided is current, a typical customer needs to visit several pages to gather useful information regarding licensing renewals, restrictions, reinstatement or medical suspensions.

Customers will be able to access information on a web-based landing page, online or via the 511 mobile application. Efforts are not to recreate webpages, but simply bringing them all together into one easy-to-use location, allowing customers to access vital information before arriving at a driver license station. If driving is not an option or choice, alternative modes will be highlighted as a safe option to get around, including additional resources for life services provided by various other state agencies. Discussion of this
‘one-stop’ webpage started with the Statewide Mobility Manager presenting brochures at an ITCC meeting regarding conversations with loved ones when they are too aged or are too infirm to drive safely. That discussion lead to the ITCC encouraging the Iowa DOT to take those brochures a step further, making them all encompassing for those unable to drive for a number of reasons such as seizures, age, legal issues, disability, etc. The beta version of the Get There Your Way website can be found at www.iowadot.us/getthereyourway.

Recommendations

1. In order to increase transportation coordination and improve efficiency, the Iowa DOT recommends consideration of legislation that allows transportation costs to be eligible expenses for all state human service programs. If a person requires assistance from a human service-type program, it is likely they have difficulty securing transportation to access the benefits afforded to them. For instance, if a person is on a Medicaid waiver, with medical and employment-training transportation covered, it is very likely that person will also need transportation to a job once the training period has ended. Often the limited hours worked and low wages make paying for transportation a burden. However, this transportation is vital for including all persons within their communities. The Iowa DOT and ITCC will encourage agencies providing those services for state human service programs to coordinate transportation needs with the local public transit provider. These transportation services are not without cost, however, and solutions for making the transportation to work and other quality of life activities affordable must be found.

2. As shown by the ridership statistics stated earlier in this report, Iowa’s public transit agencies provided over 738,000 non-emergency medical transportation trips to Medicaid clients in Fiscal Year 2017. That number shows just how important having a transportation benefit under the Medicaid program is, and that number does not include rides provided by private non-emergency medical transportation providers also under contract to Iowa’s Medicaid Managed Care Organizations. Lawmakers are encouraged to continue covering transportation as a Medicaid benefit to ensure clients can travel to their medical appointments and treatments, even if the Federal government offers waivers to this requirement. Providing transportation to the routine, non-emergency appointments reduces emergency room visits and costly ambulance trips, saving the Medicaid program in the long-run.

3. Another barrier to coordination are state and federal rules surrounding funding of transportation. Efficiency of the passenger transportation system could be improved by allowing a cross-section of the population to ride a publicly-funded transportation service, whether those funds are originally intended for veterans, aging Iowans, various human service agencies, or the general public. Iowa DOT will evaluate the viability of estimating the cost savings that could be realized if rides could be shared between the various agencies providing and funding transportation.

4. At the city and county level, transportation access – public transit, in addition to roads – should be considered when new services are being started and when new developments are being proposed. Businesses will only survive if their employees and customers can get to work. The
Iowa DOT recommends developers and community planners to consider public transit availability early in the approval process when considering new commercial developments. One step in the right direction is Iowa Economic Development Authority’s (IEDA) Certified Sites program. IEDA asks the Iowa DOT for input on available transportation in the area of a potential certified site, including public transit services, prior to the site’s approval.

5. Iowa has one of the oldest transit fleets in the nation. The state needs a funding mechanism for replacing and expanding public transit vehicle fleets. The federal government, through the transportation reauthorization bill, FAST Act, provides minimal formula dollars to Iowa and a highly competitive grant program for replacement vehicles. Public transit services are only as good as the vehicles providing them. Iowa’s public transit systems work hard to keep vehicles in a state of good repair well beyond their useful lives, but eventually vehicles wear out and must be replaced. A reliable funding stream for this purpose is needed and options should be explored at the federal, state, and local level.

6. Federal charter rules (49 CFR Part 604) are stifling some coordination efforts in the state of Iowa. Since its adoption in 2008, the federal charter rule has put an end to many community group trips which had been provided by public transit. Efforts to change these rules are ongoing and support from legislators and other parties to work with Iowa’s Congressional delegation would show the importance of this issue to Iowa and enhance the likelihood of change.

7. Likewise, Iowa’s rural, demand response systems need clarification on the applicability of the Federal Transit Administration’s School Bus Operations rule (49 CFR Part 605). If rides are properly, individually, scheduled and paid for and trips to a local school fill the better part of a bus at a couple times a day, this service may not pass the ‘reasonable person’ test – viewing the service as exclusive to school. It is the opinion of the Iowa DOT this is simply efficient scheduling by the rural public transit system and is not exclusive school service. Efforts to change these rules are ongoing and support from legislators and other parties to work with Iowa’s Congressional delegation would show the importance of this issue to Iowa and enhance the likelihood of change.

Conclusion
Many coordination efforts are in place in Iowa with efficiencies being realized. This fact can be touted and celebrated. However, more work can be done. Funding silos at the federal and state level must be reduced for the efficient funding of transportation services for those that need it. Greater coordination can be achieved if the various agencies charged with providing services to citizens work together to provide the necessary funding and coordinated transportation services. A majority of the example successes seen to date, started with a conversation. With transit managers and mobility coordinators out talking in the community and engaging human service providers barriers have been eliminated, opportunities have been realized and Iowans have been better served. The conversations need to continue, and participation needs to be broader. Government programs must be allocated the necessary funding to provide these important services and the rules must be flexible enough to allow for innovation.
in coordination. Through the coordinated efforts of the agencies, Iowans will experience enhanced quality of life and mobility and Iowa will continue to be a great place to live.