

Health Care - AND - Public Transit

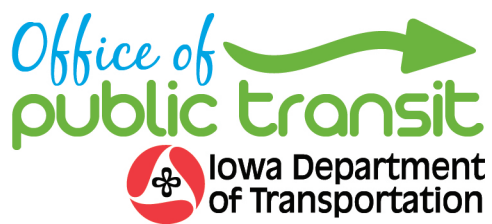
A Spotlight on Transportation & Access to Care



2012

This publication was created by the Iowa Department of Public Health - Bureau of Oral and Health Delivery Systems and the Iowa Department of Transportation - Office of Public Transit in an effort to promote collaboration to improve health care access for all citizens through the use of public transit.

Funding for this publication was supported in part by the State Office of Rural Health through the Health Resources and Services Administration, Office of Rural Health Policy.



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The purpose of this document is to assist public health professionals, community leaders and other health care providers in understanding the link that transportation plays in enabling Iowans to access health care services. Transportation is an important health care issue. It touches us in every aspect of life by way of how we access where we eat, work, live and play. In the report, *Understanding Community Health Needs in Iowa*, an analysis of the state's Community Health Needs Assessment and Health Improvement Plan (CHNA&HIP), 41 counties identified access to transportation as one of their top 10 health needs. For more information on this process check www.idph.state.ia.us/chnahip/default.asp.

While the majority of the population here in Iowa has ready access to and typically use private automobiles to access health care and other community services, there also is a significant segment of the population that either does not have access to a personal automobile or is not currently capable of driving. This can limit their access to health care, but it has greater health implications because it can also limit access to nutrition and other community services, as well as involvement in social activities. Limiting this access deprives people of the opportunity to make the choices that allow them to live a long, healthy life, regardless of their age, income, education or ethnic background.

For people unable to drive themselves, the alternatives generally include reliance on family, friends, volunteer groups, and public transit. Many choose public transit because it gives them a degree of independence. Public transit is often used to supplement other options. It becomes critical in circumstances where the other options are not available. In many cases there may be no family available or they may not always be able to get off work when travel needs arise during the day. Friends may be in similar circumstances and volunteer groups may be either unavailable or overwhelmed.

The fact that many patients depend on public transit to get to and from health care appointments makes it beneficial for health care professionals to get to know more about public transit and how and when it operates here in Iowa.

Working with local public transit systems

Working with your local transit system can mean several things. It can mean getting to know the services that are offered in order to help patients or staff figure out how they can make the best use of them. It can mean getting involved in the planning and decision-making processes to help shape new transit services so that they will provide maximum benefits to patients, staff, and the community as a whole. It can also mean helping to advocate for expanded funding of public transit to increase the travel opportunities for everyone in your community. It might also mean encouraging local agencies that currently operate non-coordinated transportation programs to consider coordinating with the public transit program to increase the availability of services in the community.

Working with local mobility coordinators

Where available, health care professionals should get to know their local mobility coordinator. Mobility coordinators, also known as mobility managers, help individuals get from point A to point Z by knowing the transportation options available in a community. Mobility coordinators may offer travel training courses to help persons learn to ride the bus. They know various funding sources which can help pay for transportation under certain circumstances. Mobility coordinators are also available to speak to interested groups on transportation resources, options, and coordination opportunities in the area.

If a mobility coordinator does not work in your area, the Statewide Mobility Manager can also be a resource for health professionals wanting to know more about transportation options in Iowa.

More mobility coordinators are being hired all the time around Iowa. To determine if a mobility coordinator works in your area or to contact the Statewide Mobility Manager, check www.iowadot.gov/iowamobilitymanagement for the most up-to-date list of mobility coordinators in Iowa.

Working with existing routes and schedules

In most cases, the easiest way to achieve more benefits from the public transit system is to become familiar with where and when the buses already run. Check out any published schedules and/or route maps. These may be available at various locations around the community, via the intranet or you may need to call the public transit system to request copies. Besides reading the schedule, it may be beneficial to talk with transit system personnel to clarify the information presented in the printed materials. It is also an opportunity to inquire about other trip offerings that may not show up in the printed materials.

Sometimes making sure a patient can get to a health care appointment is just a matter of matching up an appointment time with public transit service availability. This is often an issue in rural settings where service into larger communities, or even local service, may not be available every day of the week. Sometimes health care staff scheduling appointments may offer a date or time when no public transit connection is available, but the patient is too intimidated or embarrassed to ask for an alternative date or time.

Getting to know which patients may rely on public transit helps. This can be achieved by asking the patient whether a particular appointment time works with the public transit schedule. It may be appropriate to keep a supply of public transit schedules that patients can use and take. Even better, if staff has familiarized themselves with the public transit schedules, they may be able to assist in deciding if service is available. Sometimes the best move might be to call the public transit system to confirm whether service would be available, possibly even letting the patient reserve their trip on the spot. (Many of the regional systems have toll-free phone numbers for people throughout their service area to obtain service information and to make reservations.)

Service planning and design

Public transit system staffs want to accomplish as much benefit as possible with the transportation services they can afford to provide. As such they are interested in knowing if their schedule does not match up with the schedule for other services available in a particular community. For example, if certain specialists are only available at the local clinic on specific days of the week, which do not match up with the public transit schedule, it would be appropriate to bring this up with public transit management staff to explore their ability to change the schedule. This said, it is important to understand that public transit service schedules are not always flexible. The day it is not available locally may be because there are other passengers scheduled for service that day or because the bus is busy elsewhere. In a coordinated system, scheduling is somewhat of a juggling act, but it is important to keep the public transit management informed of unmet needs or changes in needs, so that they can optimize the schedule as much as possible.

Sometimes it may be helpful to get representatives from various service or activity centers together to try to work out service needs in the community. The group may then be able to coordinate this need among themselves, as well as with public transit personnel.

Promoting public transit coordination

In cases where agencies other than the public transit system also operate vehicles in and around the area, one possibility for improved access to public transit services may be to encourage increased coordination between that agency and the designated public transit system. Many times other agencies operating their own transportation programs view overtures by the public transit system proposing coordination of transportation services as a “turf” dispute from a competitor. Having another local party raise the option of public transit coordination, as a potential solution to transportation needs within the community, may help to overcome such barriers. Quite often when other human service transportation is consolidated into the public transit operation, everyone ends up with more travel options.

Advocacy for funding

It seems the need for public transportation is always larger than the amount of service that can be provided with the limited funding available. Integrating client transportation services into the public transit programs can help to address this shortfall. Often there will still be needs that cannot be met without increased funding.

Chances are the public transit system has already asked for additional funding, but has not been successful. Often potential funders discount such requests, unless others in the community are also speaking out about the need for public transportation. Local health care professionals, not seen as directly involved with the public transit system, can be of immense help in convincing elected officials at all levels of government that there is truly a need for more public transit service and that increased public funding of public transit is appropriate.

Many Iowans think of public transit as something that is only an issue in the nation’s largest cities. Stories about local residents that rely on public transit to get to their health care appointment, the senior nutrition site, or to the grocery store can carry a great deal of weight with elected public officials at all levels, as an “outside” assessment indicating there is a need for more public transit services.

Here in Iowa, in particular, it has been one of our long held values to help individuals maintain health and independence in their homes and communities. It is important that policy-makers realize that providing means for these persons to reach community services such as health care must be considered as part of that strategy. This is critical both in urban settings and especially in rural settings where fairly long trips may be required to access services that are increasingly available only in larger communities.

Who are the public transit systems?

Under Iowa law, local elected officials can establish two kinds of public transit systems. Urban public transit systems must each serve at least one community with 20,000 or more population. Regional public transit systems serve multicounty areas outside the major cities.

There is considerable flexibility in how the public transit systems are organized and how they operate, but one common element is that their services must be open to the general public.

Urban public transit systems

Iowa has nineteen urban public transit systems. Urban public transit systems generally operate buses along fixed routes. The routes are designed to serve a majority of neighborhoods and the major activity centers, such as large employers, government offices, medical clinics, grocery stores, senior centers, shopping malls, etc. Persons wanting to ride simply stand at the curb at points along the route designated as bus stops and ride to the bus stop nearest their desired destination, or transfer point connecting with other routes. All fixed-route buses in Iowa are accessible to persons with disabilities.

The urban systems with fixed route services are also required to provide ADA paratransit services for persons with disabilities who may not be able to physically ride or navigate the fixed route system. ADA paratransit services are typically curb to curb, operating on a reservation basis, with ride requests made the day before the planned trip. At a minimum, paratransit is available between any points that are within $\frac{3}{4}$ mile of a fixed route. Paratransit services are specifically designed to serve persons qualifying under the ADA eligibility guidelines, plus their aides and companions, but a few offer the service to the elderly and/or the general public as well. Individual public transit systems should be contacted for their specific qualification requirements. Some of the urban public transit systems provide the paratransit services with their own vehicles and drivers, but many purchase the paratransit services from another operator. In a number of cases the urban paratransit services are purchased from the regional public transit system.

A listing of Iowa's urban public transit systems with contact information is included at the back of this brochure. [Current contact information and service descriptions can always be found on the web at www.iowadot.gov/transit/index.aspx.]



Regional public transit systems

Iowa has sixteen public transit regions that cover all of the state's ninety-nine counties. Some regions provide direct service, meaning all dispatching and vehicle operations are done by the transit agency. Other regions have contractors providing 100% of the public transit service for the agency. Still others are a mix of the two.

Most public transit services by Iowa's regional public transit systems are provided on a demand-response, rather than a fixed route basis. This means that a passenger must call in to request each ride. Most also allow "standing reservations" or "subscriptions" that allow a person to request the same ride every weekday (such as for work trips) or on a certain day every week or every other week.

Most regional public transit service is "curb-to-curb" with the driver assisting riders to and from the vehicle, if needed. All regional public transit services are required to be accessible to persons with disabilities.

A few of Iowa's regional public transit systems offer a volunteer driver program, with a pool of volunteer drivers who will transport individuals in the volunteer's own car. The public transit system may send a volunteer for passengers that do not require the use of a lift-equipped vehicle and need to travel a long distance, to a medical appointment for example, without tying up a larger bus and driver for a long-period of time.

In many rural areas, depending on funding levels and demand, public transit services may only be available on certain days of the week, and certain connections (to other specific communities) may only be available a couple times per month.

At the back of this brochure you'll find a map of Iowa's public transit regions, with a listing of the regional public transit systems and their contact information. [Current contact information can always be found on the web at www.iowadot.gov/transit/index.aspx.]

Medicaid and IowaCare transportation

Medical transportation assistance is available to those with full Medicaid benefits. Medicaid beneficiaries must arrange for their medical transportation needs through Iowa's Medicaid transportation broker, TMS Management Group (TMS). TMS will find an available transportation provider, either public transit or private entity, to provide the trip at the time needed. Medicaid will cover the cost of these medical trips, as approved in the client's benefits package. Nearly all of Iowa's 35 public transit systems have contracts with TMS to provide these trips. Several of the fixed route transit systems have worked with TMS to provide bus passes to Medicaid clients, if it is more cost effective than paying for single trips. The client must use the pass for their medical appointments, but also may use the pass for other quality of life trips – shopping, socializing, etc. More information on TMS and Medicaid transportation can be found at: <http://tmsmanagementgroup.com/index.php/iowa-medicaid-net-program>.

Persons covered under Medicaid's waiver programs do not receive transportation assistance through TMS; they instead work with their county to determine transportation eligibility. Most public transit systems have contracts with their respective counties to provide Medicaid waiver trips and individuals with waivers schedule trips directly with the public transit system.

IowaCare is a health care program that provides limited services for people who are not otherwise eligible for Medicaid. The purpose of IowaCare is to provide some health care coverage to people who would otherwise have none. While IowaCare does not have a transportation benefit associated with it, IowaCare clients may utilize public transit to access their appointments. Several public transit systems have received grants from the Iowa DOT to help reduce the cost of medical appointment transportation for IowaCare clients. IowaCare clients are encouraged to contact their local public transit agency as soon as a medical appointment is scheduled to determine if transportation can be arranged and the passenger fares associated with that transportation.

Public transit service funding

The state of Iowa and the federal government provide some funding for support of public transit services. Other funding comes from passenger fares, from local city or county support, and from contracts with local social service agencies, hospitals, businesses, schools, etc. The public transit systems are encouraged to coordinate with other groups interested in passenger transportation in order to maximize the amount of open-to-the-public service available in the community.

State funding for public transit comes from a share of the use-tax collected on the sale of motor vehicles and accessory equipment. These funds are administered by the Iowa Department of Transportation (DOT) and distributed to each urban and regional public transit system on the basis of a formula that considers the amount of rides, miles, and local funding support that each public transit system has generated. The state funds are provided to support and improve public transit services, and can be applied to either operating needs or capital needs, but most systems use the state funds for support of operating costs. State funding is equivalent to approximately 7.5 percent of total operating costs for the average urban public transit system and 16.5 percent for the average regional public transit system.

Federal transit assistance

Federal funding for public transit comes partially from the federal motor fuel tax and partly from general revenues. The actual funding mechanism varies with the size of the community. Urban public transit systems in small communities (under 50,000 population) and regional systems get a formula allocation of federal transit assistance based on the amount of service they provide (rides and miles) relative to their peers. Urban systems in mid-sized communities (50,000 to 200,000) receive formula funding based strictly on population factors. Urban systems, in areas over 200,000 population, receive formula funds on the basis of both population and service factors. The bulk of the formula funding is used to support ongoing operating costs for public transit services. On average, federal assistance makes up about 26 percent of the operating budget for Iowa's urban public transit systems, and 24 percent in regional public transit systems.

Funding for major capital needs under the recently-passed Federal transportation bill, MAP-21, comes to Iowa through a formula. Iowa's large urban systems each receive a small direct allocation each year, while areas under 50,000 population, along with the rural areas, will receive \$1.25 million annually to be allocated by the State. This amount is far less than the discretionary awards Iowa had been successful in receiving in past years, and therefore, replacement of older public transit vehicles will be extremely difficult throughout the life of this bill.

Local funding

User fees paid by riders are a significant source of funding for most Iowa public transit systems. This includes fares or contributions paid when boarding the vehicle, as well as funds collected from sales of monthly passes, tickets or tokens. Passenger revenues cover an average of about 12.8 percent of total public transit operating costs for urban public transit systems and about 13.5 percent for regional public transit systems.

Most public transit systems also receive a portion of their funding from local tax dollars, through either city or county government or a mixture. Cities and the Des Moines Area Regional Transit Authority are allowed to levy a special public transit levy for support of public transit services. They may also use general funds, as well as special levies to pay for employee benefits, etc. Counties do not have the ability to levy specifically for public transit, but they can and do use general fund revenues for this purpose. Local tax support covers an average of 45 percent of operating costs for urban public transit systems and 7.7 percent for regional systems.

Much of the local funding for regional public transit systems comes from contracts with individual social service agencies to transport their clients. Such services are provided open to the public, but can be tailored around the specific needs of those clients. Many social service agencies have found that contracting for such services from the designated public transit systems is more cost effective than operating their own separate transportation services. By integrating their clients into the open-to-the-public transit services, they receive benefit of the state and federal public transit assistance funds. On average, revenues from service contracting covers about 39 percent of the operating costs for Iowa's regional public transit systems. Iowa's urban public transit systems do not typically do as much service contracting, but contract revenues still account for 7.5 percent of the average urban public transit system's operating budget.

Leveraging funds

Iowa DOT policy encourages each public transit system to leverage funding from other agencies by partially underwriting client rides provided as part of the open-to-the-public transit services, as a way to promote public transit coordination.

Public transit coordination refers to the idea that all parties involved and the community as a whole generally benefit when client transportation needs are coordinated with public transit. Generally the cost to the client agency for each client's ride will be less, and more members of the community have access to public transit service without increasing the overall level of public expenditure.

The potential benefits of public transit coordination are great enough that Chapter 324A of the Iowa Code mandates that any agency or organization using public funds to purchase or provide passenger transportation must coordinate with one of the designated public transit systems.

Planning and decision making

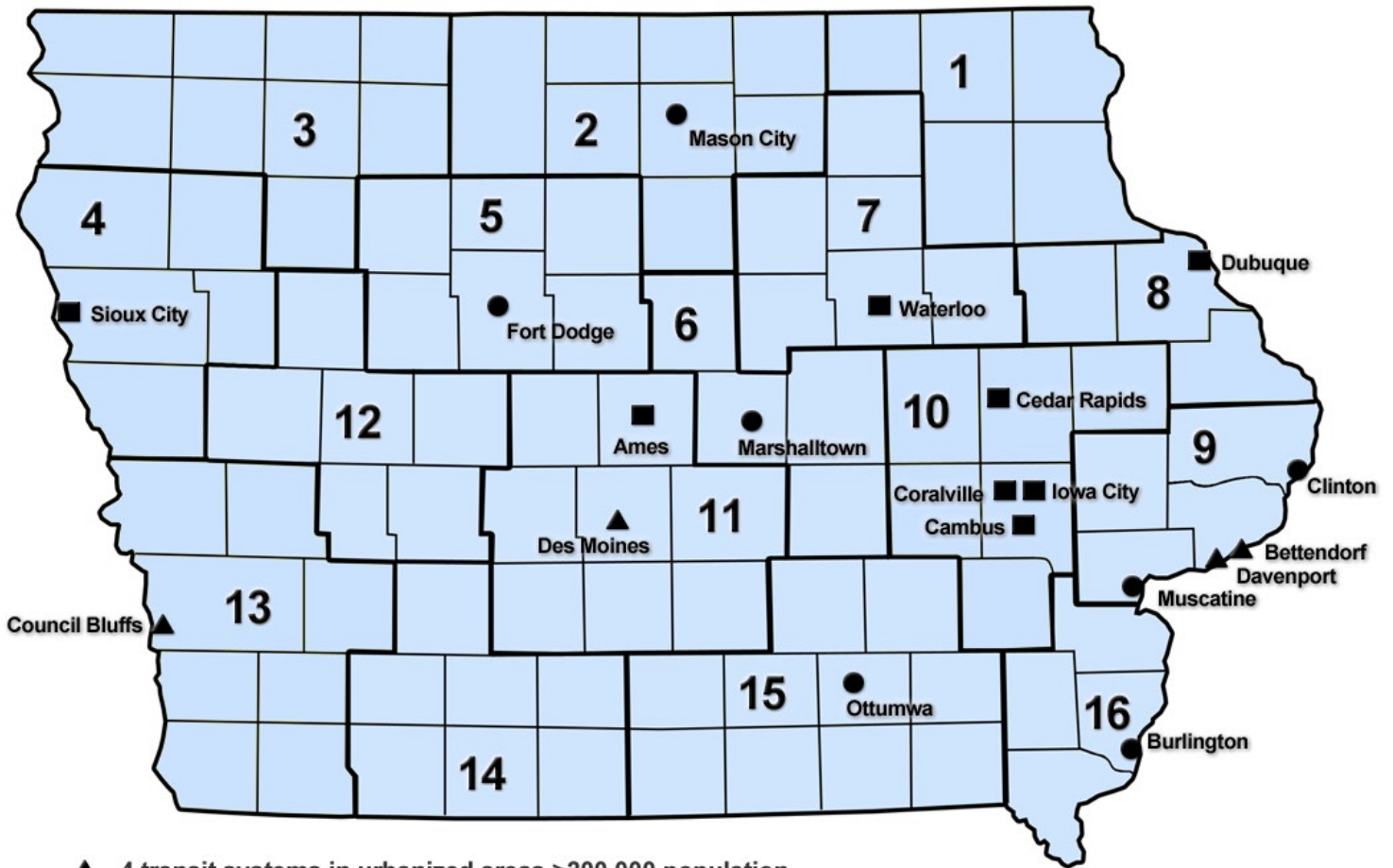
Each public transit system has an individual who is identified as the public transit manager. In stand-alone public transit systems, whether public agencies or private not-for-profit corporations, this is generally the executive director. When public transit is part of a larger organization, such as a city, council of governments, area agency on aging or a community action agency, the public transit manager is likely to be a department or program director who reports to a city manager or executive director. Decisions related to the public transit program will normally involve the public transit manager and the public transit staff, but may require action by higher management levels as well, and often may involve the agency's board of directors or the city council. Even when other parties are involved, the most appropriate starting point for discussion of public transit-related matters is usually the public transit manager. [Current contact information can always be found on the web at www.iowadot.gov/transit/index.aspx.]

Assistance in public transit planning is generally provided to the public transit staff by the local planning agency. The planning agencies are usually intergovernmental agencies formed by cities or counties to plan for the transportation needs within their jurisdictions. They are responsible for determining what projects will be funded with federal transportation funds. Most also provide some level of assistance to the public transit system in the determination of transportation needs of the community, and sometimes in the design of public transit services. The transportation planning agencies are responsible for putting together the area's passenger transportation plan (PTP), a coordinated plan between human service agencies and public transit. PTPs are to determine the passenger transportation needs for a region and identify projects to meet the needs. Health care professionals are strongly encouraged to become involved in their area's PTP planning process. Contact information for Iowa's transportation planning agencies is provided at the end of this brochure. [Current contact information can always be found on the web at www.iowadot.gov/systems_planning/distplannercontact.htm.]

Outlook

The overall need for transportation services, by persons trying to access health care, is likely to continue to increase as our population ages. While involvement in such issues may not be part of the traditional responsibilities of health care workers, helping patients or clients deal with such issues may be one of the simplest ways to contribute to their overall well-being. Improved understanding of public transit services available can help staff to be more effective in scheduling patients' appointments. Even greater benefits can be gained by working with the public transit system and the planning agency, as well as other service providers in the community, to try to achieve the best match of schedules between public transit and the need for access to community services. In the long run, our hope is to increase the overall availability of public transit services to meet the needs of our changing communities.

Iowa's Public Transit System



- ▲ 4 transit systems in urbanized areas >200,000 population
- 8 transit systems in urbanized areas 50,000 to 200,000 population
- 7 transit systems in small urban areas <50,000 population
- 16 regional transit systems

Transit agencies list

Agency	Service Area	Phone Number	Website
Small Urban			
Burlington Urban Service	Burlington and West Burlington	319-753-8162	www.burlingtoniowa.org/publicworks/bus.html
Clinton Municipal Transit Administration	Clinton	563-242-3721	www.ci.clinton.ia.us/html/MTA.html
Fort Dodge, DART	Fort Dodge	515-573-8145	www.midascog.net/transit/dart
Marshalltown Municipal Transit	Marshalltown	641-754-5719	www.ci.marshalltown.ia.us/static/departments/works/transit.php
City of Mason City	Mason City	641-421-3616	www.masoncity.net/pview.aspx?id=18070&catid=477
City of Muscatine	Muscatine	563-263-8152	www.muscatineiowa.gov/index.aspx?NID=75
Ottumwa Transit Services	Ottumwa	641-683-0695	www.cityofottumwa.org/OTHome





Agency	Service Area	Phone Number	Website
Large Urban			
Ames Transit Agency, CyRide	Ames	515-292-1100	www.cyride.com
Bettendorf	Bettendorf and downtown Moline, IL	563-344-4085	www.bettendorf.org/departments/?fDD=22-0
University of Iowa, CAMBUS	University of Iowa campus, facilities, and research park	319-335-8633	www.uiowa.edu/~cambus
Cedar Rapids Transit	Cedar Rapids, Marion, and Hiawatha	319-286-5573	www.cedar-rapids.org/resident-resources/Transit/Pages/default.aspx
Coralville Transit System	Coralville	319-248-1790	www.coralville.org/transit
Council Bluffs	Council Bluffs	402-341-0800	www.councilbluffs-ia.gov/index.aspx?NID=354
Davenport Public Transit, Citibus	Davenport and downtown Rock Island, IL	563-888-2151	www.cityofdavenportiowa.com/departments/?fDD=27-0
Des Moines Area Regional Transit Authority, DART	All of Polk County including the cities of: Des Moines, Altoona, Ankeny, Clive, Johnston, Urbandale, West Des Moines, Windsor Heights, Mitchellville, Bondurant, Pleasant Hill, Carlisle, Alleman, Polk City, Granger, and Grimes	515-283-8100	www.ridedart.com
Dubuque, The Jule	Dubuque and East Dubuque, IL	563-589-4196	www.cityofdubuque.org/thejule
Iowa City Transit	Iowa City and University Heights	319-356-5151	www.icgov.org/default/?id=1515
Sioux City Transit System	Sioux City, South Sioux City, NE, and North Sioux City, SD	712-279-6404	www.sioux-city.org/transit
Metropolitan Transit Authority of Black Hawk County, Waterloo MET	Cedar Falls and Waterloo	319-234-5714	www.mettransit.org

Agency	Service Area	Phone Number	Website
Regional			
Region 1 NEICAC-T	Allamakee, Clayton, Fayette, Howard, and Winneshiek counties	866-382-4259	www.neicac.org/transport.html
Region 2 Region 2 Transit	Cerro Gordo, Floyd, Franklin, Hancock, Kossuth, Mitchell, Winnebago, and Worth counties	641-423-2262	www.r2bus.org
Region 3 RIDES	Buena Vista, Clay, Dickinson, Emmet, Lyon, O'Brien, Osceola, Palo Alto, and Sioux counties	800-358-5037	www.nwiarides.org
Region 4 SRTS	Cherokee, Ida, Monona, Plymouth, Woodbury counties and Southern Union County, SD	800-881-2076	www.simpco.org/srts/
Region 5 MIDAS	Calhoun, Hamilton, Humboldt, Pocahontas, Webster, and Wright counties	800-BUS-RIDE	www.midascog.net/transit/ region-v
Region 6 PeopleRides	Hardin, Marshall, Poweshiek, and Tama counties	888-616-4298	www.region6planning.org
Region 7 RTC	Black Hawk, Bremer, Buchanan, Butler, Chickasaw, and Grundy counties	319-233-5213	www.inrcog.org/rtc.htm
Region 8 RTA	Delaware, Dubuque, and Jackson counties	563-588-4592	www.rta8.org
Region 9 River Bend Transit	Cedar, Clinton, Muscatine, Scott counties, and the Illinois Quad City area	800-292-8959	www.riverbendtransit.org
Region 10 ECIT	Benton, Iowa, Johnson, Jones, Linn, and Washington counties	319-365-9941	www.ecicog.org/ectransit
Region 11 HIRTA	Boone, Dallas, Jasper, Madison, Marion, Story, and Warren counties	877-686-0029	www.ridehirta.com
Region 12 WITS	Audubon, Carroll, Crawford, Greene, Guthrie, and Sac counties	712-792-9914	www.region12cog.org/western_iowa_ public_transit/public_transit.asp
Region 13 SWITA	Cass, Fremont, Harrison, Mills, Montgomery, Page, Pottawattamie, and Shelby counties	800-842-8065	www.swipco.org/Transportation/ Transit.html
Region 14 SIT	Adair, Adams, Clarke, Decatur, Ringgold, Taylor, and Union counties	866-782-6571	www.southerniowatrolley.org
Region 15 10-15 Transit	Appanoose, Davis, Jefferson, Keokuk, Lucas, Mahaska, Monroe, Van Buren, Wapello, and Wayne counties	800-227-6390	www.1015transit.com
Region 16 SEIBUS	Des Moines, Henry, Lee, and Louisa counties	866-753-5107	www.seirpc.com/seibus/route.html

Agency	Planning Area	Phone Number	Website
Regional Planning Affiliations			
Region 1 - UERPC	Allamakee, Clayton, Fayette, Howard, and Winneshiek counties	563-382-6171	www.uerpc.org
Region 2 - NIACOG	Cerro Gordo, Floyd, Franklin, Hancock, Kossuth, Mitchell, Winnebago, and Worth counties	641-423-0491	www.niacog.org
Region 3 - NWIPDC	Buena Vista, Clay, Dickinson, Emmet, Lyon, O'Brien, Osceola, Palo Alto, and Sioux counties	712-262-7225	www.nwipdc.org
Region 4 - SIMPCO	Cherokee, Ida, Monona, Plymouth, and Woodbury counties	712-279-6286	www.simpco.org
Region 5 - MIDAS COG	Calhoun, Hamilton, Humboldt, Pocahontas, Webster, and Wright counties	515-576-7183	www.midascog.net
Region 6 - Region Six Planning Commission	Hardin, Marshall, Poweshiek, and Tama counties	641-752-0717	www.nationalrtap.org/region6/Home.aspx
Region 7 - INRTA	Black Hawk, Bremer, Buchanan, Butler, Chickasaw, and Grundy	319-235-0311	www.inrcog.org
Region 8 - ECIA	Clinton, Delaware, Dubuque, and Jackson counties	563-556-4166	www.ecia.org
Region 9 - BiState Regional Commission	Scott and Muscatine counties	309-793-6300	www.bistateonline.org
Region 10 - ECICOG	Benton, Cedar, Iowa, Johnson, Jones, Linn, and Washington counties	319-365-9941	www.ecicog.org
Region 11 - CIRTPA	Boone, Dallas, Jasper, Madison, Marion, Polk, Story, and Warren counties	515-334-0075	www.dmampo.org/cirtpa.html
Region 12 - Region XII COG	Audubon, Carroll, Crawford, Greene, Guthrie, and Sac counties	712-792-9914	www.region12cog.org
Region 13 - SWIPCO	Cass, Fremont, Montgomery, and Page counties	712-243-4196	www.swipco.org
Region 14 - ATURA	Adair, Adams, Ringgold, Taylor, and Union counties	641-782-8491	www.sicog.com
Region 15 - Area 15 RPC	Jefferson, Keokuk, Mahaska, Van Buren, and Wapello	641-684-6551	www.area15rpc.com
Region 16 - SEIRPC	Des Moines, Henry, Lee, and Louisa counties	319-753-5107	www.seirpc.com
Region 17 - Chariton Valley Planning and Development	Appanoose, Clarke, Davis, Decatur, Lucas, Monroe, and Wayne counties	641-437-4359	www.charitonvalleyplanning.com/
Region 18 - MAPA	Harrison, Mills, Pottawattamie, and Shelby counties	402-444-6866	www.mapacog.org
Metropolitan Planning Organizations			
Ames - AAMPO	Ames metropolitan area	515-239-5165	www.cityofames.org/index.aspx?page=1098
Cedar Rapids - Corridor MPO	Cedar Rapids metropolitan area	319-286-5041	www.corridormpo.com
Council Bluffs - MAPA	Omaha/Council Bluffs metropolitan area	402-444-6866	www.mapacog.org
Davenport - BiState Regional Commission	Iowa-Illinois Quad Cities metropolitan area	309-793-6300	www.bistateonline.org
Des Moines - DMAMPO	Des Moines metropolitan area	515-334-0075	www.dmampo.org
Dubuque - ECIA	Dubuque metropolitan area	563-556-4166	www.ecia.org
Iowa City - MPO of Johnson County	Iowa City metropolitan area	319-356-5230	www.mpojcc.org
Sioux City - SIMPCO	Sioux City metropolitan area	712-279-6286	www.simpco.org
Waterloo - INRCOG	Waterloo metropolitan area	319-235-0311	www.inrcog.org

