



The NFRMPO Coordinated Public Transit /Human Services Transportation Plan

Prepared By
The North Front Range
Metropolitan Planning Organization



Adopted
December 2013





RESOLUTION NO. 2013 - 26
OF THE NORTH FRONT RANGE TRANSPORTATION & AIR QUALITY PLANNING COUNCIL
APPROVING THE 2013 COORDINATED PUBLIC TRANSIT/HUMAN SERVICES TRANSPORTATION PLAN

WHEREAS, the North Front Range Transportation & Air Quality Planning Council (NFRMPO) is designated as the Metropolitan Planning Organization (MPO) in cooperation with local elected officials; authorized to carry out the continuing, cooperative, and comprehensive transportation planning process resulting in plans and programs that consider all transportation modes and supports community development, the local economy, and social goals; and

WHEREAS, the MPO has been designated by the U.S. Department of Transportation and the Colorado Department of Transportation (CDOT) to direct, coordinate, and administer programs mandated by the Congress in Titles 23 and 49 U.S.C.; and

WHEREAS, North Front Range Transportation & Air Quality Planning Council as the Metropolitan Planning Organization (MPO) is the agency responsible for development of the Coordinated Public Transit/Human Services Transportation Plan in accordance with the mobility coordination provision in MAP-21 for Metropolitan Planning (49 USC 5303(g)(3)); and

WHEREAS, MAP-21 requires that human service transportation coordination is required for all non-rail FTA programs and for statewide and metropolitan transportation planning; and

WHEREAS, the 2013 Coordinated Public Transit/Human Services Transportation Plan has been developed through an extensive process of data collection, stakeholder involvement and public outreach that complies with all federal regulations for development of metropolitan transportation plans; and

WHEREAS, the 2013 Coordinated Public Transit/Human Services Transportation Plan will help to enhance access to transportation to improve mobility, employment opportunities, and access to community services for persons who are transportation-disadvantaged as outlined in Executive Order 13330 – Human Service Transportation Coordination (February 24, 2004); and

WHEREAS, the Larimer County and Weld County Mobility Councils (LCMC & WCMC) and the NFRMPO Technical Advisory Committee (TAC) have recommended approval of the 2013 Coordinated Public Transit/Human Services Transportation Plan to the North Front Range Transportation & Air Quality Planning Council; and

THEREFORE, BE IT RESOLVED, the North Front Range Transportation & Air Quality Planning Council approves and adopts the 2013 Coordinated Public Transit/Human Services Transportation Plan.

Passed and adopted at the regular meeting of the North Front Range Transportation & Air Quality Planning Council held this 12th day of December 2013.

ATTEST:

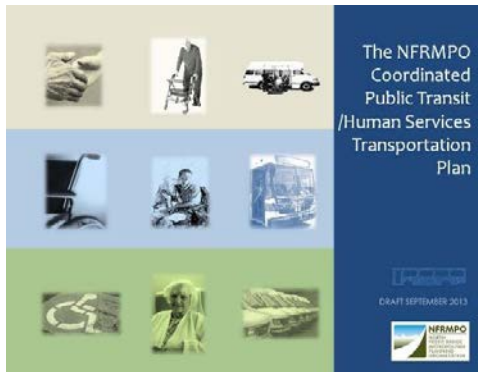

Terri Blackmore, Executive Director


Lyle Achziger, Chair

NFRMPO 2013 Coordinated Public Transit/Human Services Transportation Plan

The 2013 NFRMPO Coordinated Plan provides a framework for coordination of transportation services in the North Front Range ensuring individuals have the transportation services they need to be self-sufficient and live independently.

EXECUTIVE SUMMARY



The 2013 Coordinated Plan includes updates, new information and program components detailed below.

- Identifies the primary challenges that underscore the need for coordinated transit/human service agency planning.
 - Summarizes NFRMPO mobility coordination successes and challenges over the last five years.
 - Updates the 2007 Coordinated Plan transit and human service agency characteristics, regional demographics and current conditions.
- Replaces 2007 goals and strategies with objectives reflecting the regions current transit and human service agency needs and funding.
 - Identifies 14 types of local transportation strategies that directly further the goal of transportation self-sufficiency.
 - Reflects the ongoing involvement of the Larimer and Weld Mobility Councils in outlining current conditions and needs.
 - Details the expanded public outreach efforts and comments received from over 350 people in the North Front Range area.
 - Provides samples of current NFRMPO mobility coordination program materials.

EXECUTIVE SUMMARY

Keeping it Current

Critical to the success of any coordination effort is a comprehensive understanding of current conditions and local needs. The 2013 Coordinated Plan details available services, agency needs and the federal, state and local funding that shape transit and human service agencies ability to serve their clients.

Funding Flexibility

Within two years of printing the 2007 Plan approximately 25% of the projects listed for funding were already funded or obsolete. The 2013 Plan replaces specific projects with objectives and strategies that allow flexibility in selection of projects that fulfill Plan goals.

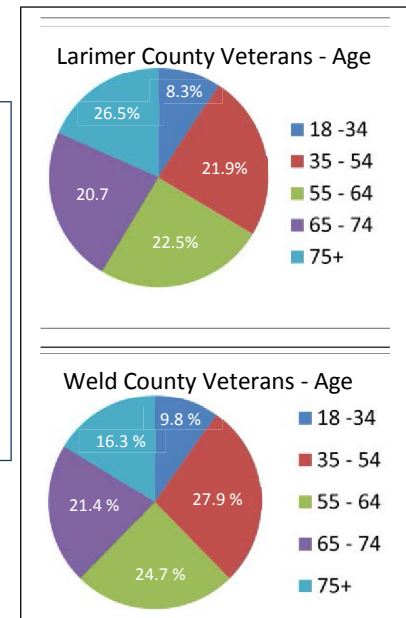
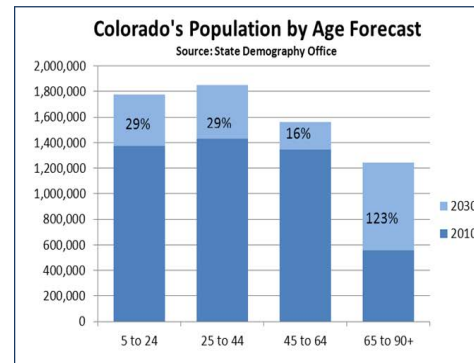
Transit to Transit Connectivity

Objective – Increase connectivity between existing transit services.

Strategy – Support funding for transit service that connects communities and helps to eliminate gaps in service. Examples include transit agency connections between Fort Collins and Loveland, Greeley and Loveland and to destinations to the south. Currently, the success of the FLEX commuter service which connects Fort Collins, Loveland, Berthoud and Longmont could be used as a template for future transit service connections.

Outcome – Increased transit service between communities within the North Front Range area and to destinations to the south including Longmont and the Denver Metro area.

track and poised to continue the regional program work of ensuring transportation self-sufficiency for all individuals in the North Front Range MPO.



Staying the Course

The 2013 Plan provides the backbone for fulfilling mobility coordination goals and strategies during the next five years.

The mobility councils will use the Plan to create their annual work plans and guide the work of MPO mobility coordination staff. In 2018, the Plan along with the work of the mobility councils will be evaluated to ensure that the mobility coordination program is on



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Prepared by the **North Front Range Metropolitan Planning Organization**

2013 NFRMPO Coordinated Public Transit/Human Services Transportation Plan

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NFRMPO Mobility Management Program Publications and Outreach Materials:

- o 2012 NFRMPO Riders Guide
- o Mobility Coordination Newsletter
- o LCMC Symposium Brief & Coordination Survey Report
- o WCMC “Transit In Our Community” Forum & Coordination Survey Report
- o Larimer County Travel Training Brochure
- o Weld County Travel Training Brochure
- o NFRMPO Mobility Management Brochure

Chapter 1 INTRODUCTION

Purpose

This study will result in a new *Coordinated Public Transit/Human Services Transportation Plan* for the North Front Range Metropolitan Planning Organization.

The purpose of the new Coordinated Plan is to address federal mobility management goals established in 2005 with the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) and continued in 2012 with Moving Ahead for Progress in the 21st Century (MAP-21) for the NFRMPO region.

Additionally the Plan will help, through implementation of identified goals and strategies in each county, to address the underlying transportation issues identified by the mobility councils.

In Larimer County, the primary challenge is limited access and utilization of services to needed transportation, especially for seniors, low-income individuals and people with cognitive and/or physical disabilities.

In Weld County, the primary challenge is connectivity, accessibility and gaps in services, especially between Greeley and communities to the west and north.

Also, of importance is the need to address a lack of awareness of the transportation problems facing many in Weld County and the lack of agency coordination that impedes efficient service delivery.



The 2013 Plan will replace the 2007 Coordinated Public Transit/Human Services Transportation Plan and will:

- Create a new strategic five-year plan that will meet the Federal requirements for a Coordinated Public Transit/Human Services Transportation Plan.
- Describe the current socio-economic characteristics of each county and how it impacts local coordination efforts.
- Detail the human service transportation issues that each council has researched and identified for mobility management strategies in each county.
- Describe recent changes to federal transportation legislation contained within MAP-21 which received congressional approval in July 2012.
- Provide a summary of the strategies implemented since NFRMPO Planning Council approval of the 2007 Coordinated Plan.
- Update mobility management priorities, goals and strategies for the NFRMPO region.
- Identify specific types of projects that are consistent with mobility management priorities and will help to achieve mobility management goals in the NFRMPO area.

At the federal level there is continued emphasis on creating efficiencies between the federal programs which fund transportation services and on the importance of coordinating a wide range of transportation resources as a means of creating strong and viable transportation networks in communities for all riders.

MAP-21 defines a “Coordinated Plan” as one that:

- “Identifies the transportation needs of individuals with disabilities, older adults, and individuals with limited incomes,
- Provides strategies for meeting those local needs, and
- Prioritizes transportation services for funding and implementation.”

The new regulations encourage coordination and remind recipients of Federal Transit Administration grants that they need to provide for coordination with Federal Human Service programs that provide support for transportation services.

This document describes the planning process and coordination activities for the North Front Range Metropolitan Planning Organization. It is the third phase of addressing human service transportation and public transit coordination in Larimer and Weld counties.

The first two phases included creation of the 2007 Coordinated Plan and the implementation of the goals and strategies defined therein.

The 2013 Coordinated Plan will also identify criteria for projects that may be considered for transit funding through Federal Transit Administration programs and local funding sources and will assist the region in building, at the local level, the capacity to coordinate other programs.

Historical Perspective

Comprehensive bus and trolley networks were big business in the first half of the twentieth century, the most common way of traveling in cities. After World War II, the automobile became the predominant mode of transportation in the United States. Trolley and bus systems went into a decline and services were reduced. It was no longer a profitable business in most areas and operations were shut down.

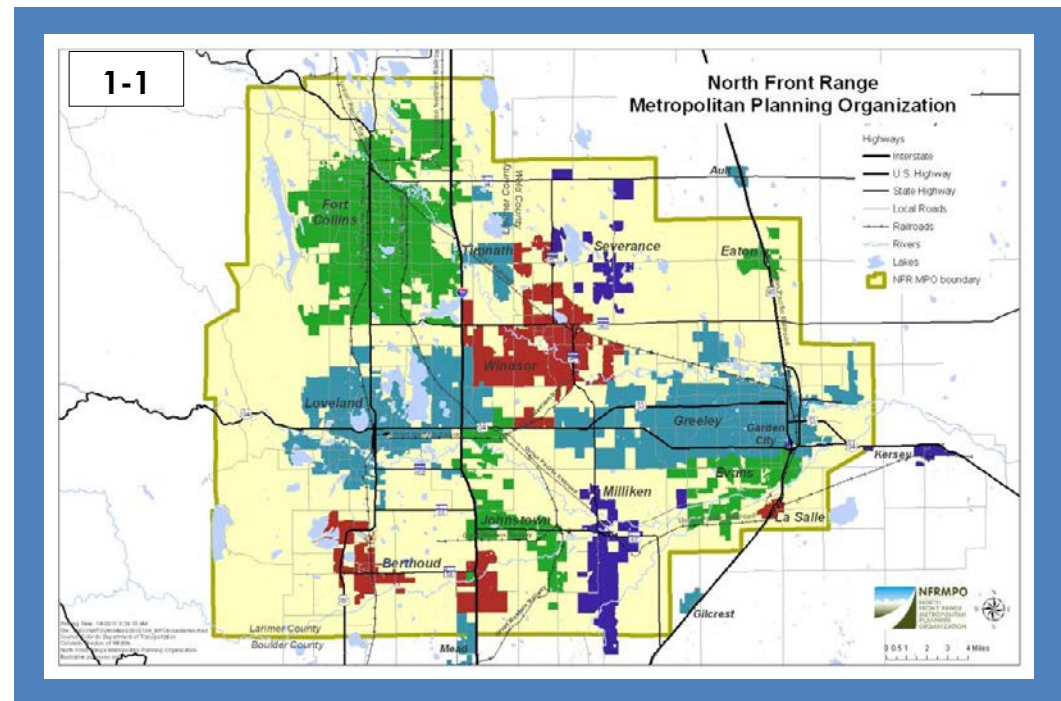
By the 1960s, many private bus operations had ceased or were taken over by local governments and public transit services were quite limited. In 1964, the “Urban Mass Transit Act” was passed to provide financial support for continuing transit services.

Given such limited public transportation services, most agencies running human service programs found that clients were unable to find transportation services. The accepted practice was to provide targeted transportation funding as part of each program to meet the specific needs of each program. In some cases, agencies operated direct services for their clientele. In others, the program provides vouchers for gas or automobile repairs, bus tickets or passes.

As transportation networks have matured over time, a wide range of transportation programs and services have evolved, each with different eligibility requirements.

Some communities, regions, and states have been able to coordinate efforts that blend funds to provide a comprehensive network of services. Where this has been done, the overall costs are lower and service levels are higher than with independent programs.

In recognition of these efficiencies, the Federal government has incorporated mandates for cooperation between transit and human service agency services to promote coordination. Both SAFETEA-LU, which was approved in 2005 and MAP-21 approved in 2012 are supportive of coordination. MAP-21 carries through from the original 2005 legislation to require localities to work together to provide services that meet the needs of many human service programs.



Legislative Background/Federal Direction

In July 2012, Congress approved a new transportation bill titled Moving Ahead for Progress in the 21st Century or MAP-21. The definition of mobility management is unchanged from the previous transportation legislation bill, SAFETEA-LU. Mobility Management continues to be a capital expense in every Federal Transit Administration (FTA) grant program other than Section 5309 (funding for transit capital investment).

Coordination with human services remains a requirement for FTA grantees across the range of all non-rail FTA programs. MAP-21 legislation continues transportation coordination with human service agencies for statewide and metropolitan transportation planning. Planning Issues for FTA Programs are further explained in Chapter 5.

Planning Process

The Coordinated Public Transit/Human Services Transportation Plan covers the North Front Range Metropolitan Planning Organization boundaries as illustrated in *Figure 1-1* (page 4).

The underlying assumption with the new 2013 Coordinated Plan is that coordination activities will continue to be different in each county and that each county will have a separate local coordinating council.

Local coordinating council involvement in the planning process throughout implementation of the 2007 Coordinated Plan has consisted primarily of research to fully understand the issues facing each county and raising awareness in each county of the transportation issues facing transit and human service agencies.

Partnerships on each council have been established and several projects are underway that combine resources to increase efficiency in delivery of services. A listing of accomplishments and challenges of each council are detailed in Chapter 6.

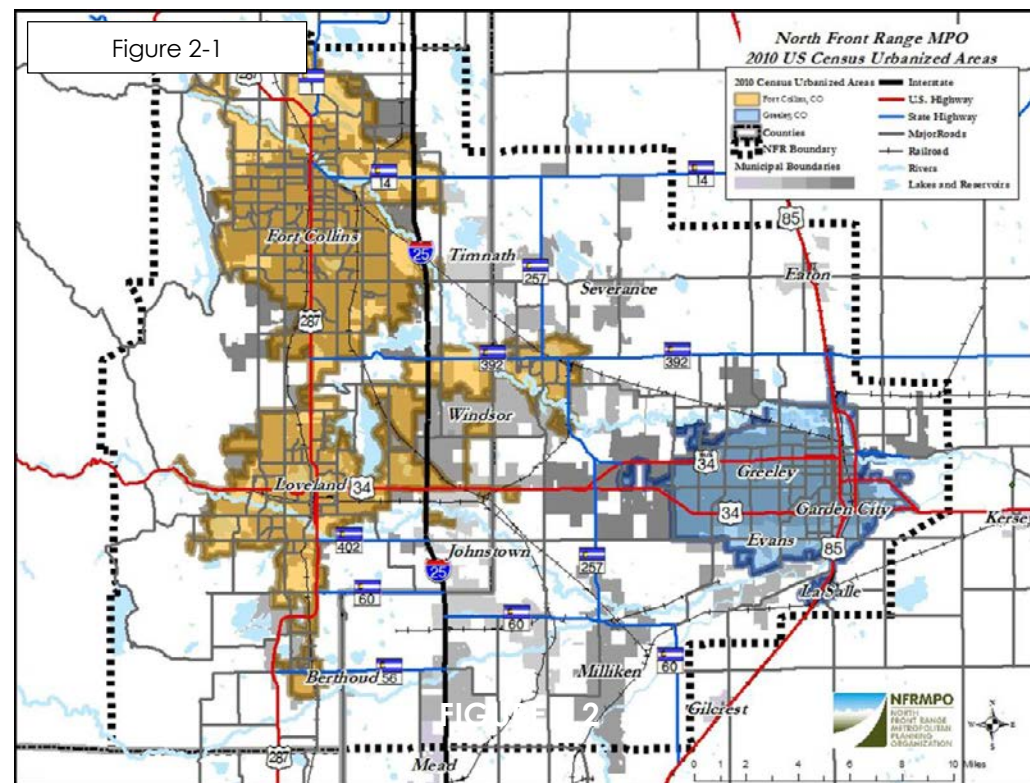
The Greeley Urbanized Area and the Fort Collins Transportation Management Area each have quite different characteristics (Figure 1.2). This is reflected in the population, demographic characteristics, the structure for delivering human services, and transit service characteristics, as described in chapters two and three of this report.

The public transit providers within the NFRMPO including three in Larimer County and one in Weld County will need to work together with human service agencies in each county to coordinate services. In Colorado the counties are given responsibility for administering many human service programs.

Any effort to coordinate must address the entire county in order to meet the needs of these human service programs.

A single coordination plan has been prepared however - identified Larimer and Weld county needs are addressed separately to reflect the unique characteristics of each county. It is also important to address service needs across county boundaries based on location of services, geography, and travel patterns.

Formal responsibility for meeting the coordination plan requirements for the rural portions of each county remains the responsibility of CDOT.



An important objective of this planning process is to support the human service councils in each county as they continue the conversation about coordination of transportation services. A list of human service agencies and transit providers participating on each council is included in Appendix A. A description of the public process, detailed survey information and events attended to develop this plan are included as Appendix D.

Boundaries and their Impacts

Political and planning boundaries affect the way in which decisions are made: who is responsible for what area and how services are delivered. There are four sets of boundaries that impact both transit planning and coordination of transit services in the region.

- Political Jurisdiction - The county, city and town boundaries within the MPO are identified in Figure 1-1. Larimer County has relatively few incorporated cities and towns. Weld County has many small towns, although most are located in rural Weld County and outside the MPO boundary.
- Urbanized Areas - The Urbanized Area Boundaries are determined by the US Census Bureau, based on population density. These boundaries play a critical role in transportation funding as the boundaries can factor into the amount of allocated funds based on formula funding methods.
- Colorado Transportation Planning Regions - The State of Colorado has split Larimer & Weld counties into two transportation planning regions. One is the North Front Range area which basically covers the urbanized portion. The other portions of Larimer and Weld counties (primarily rural areas) are in the Upper Front Range Transportation Planning Region (TPR), along with Morgan County.
- Metropolitan Planning Organization - The Metropolitan Planning Organization (MPO) is designated for transportation planning in urbanized areas over 50,000. MPOs also have larger modeling boundaries that include areas where the population is anticipated to grow over the next 20 years.

Colorado relies upon local entities to provide matching funds for federal transit dollars and there is a reasonable concern that each community's dollars be spent within each community. However, in an area like the North Front Range, residents often need to cross jurisdictional boundaries to access employment as well as medical and educational services.

While most communities are willing to pay the local matching funds for trips made by its residents to other localities, this funding situation discourages them from carrying people from other jurisdictions on their vehicles.

Planning is needed to design programs that weigh the benefits and costs of entities to share resources while maintaining an equitable financial benefit for all involved. Mobility management strategies are designed with this premise in mind.

Another coordination issue in the NFRMPO is the different federal transit regulations that apply to each urbanized area because of the difference in their size. As a large urbanized area, the Fort Collins TMA receives 5310 and 5307 funds directly from the Federal Transit Administration and is responsible for a variety of program management activities.

The Greeley area as a small urbanized area and the rural portions of Larimer and Weld County apply to the State for FTA funds since the Colorado Department of Transportation (CDOT) is responsible for project management in these areas.



Report Organization and Contents

Chapter 2 describes the characteristics of the region with 2010 US Census demographic information, current MPO studies and research that has taken place in each county by the Larimer and Weld Mobility Councils.

Chapter 3 documents the organizations and structures for the delivery of human services and transit services along with the current level of service each sector is providing.

Chapter 4 continues with an assessment of local, state and federal funding needs and identifies basic issues to consider as the region moves forward with coordination.

Chapter 5 discusses the planning and program management issues for the Federal Transit Administration programs.

Chapter 6 describes the successes and challenges in each county along with the goals and strategies developed by examining the challenge each council is working to address.

Most chapters are divided into two sections, with one for each county, since the needs, structure of services, planning requirements, and actions to improve mobility are significantly different in Larimer and Weld Counties.

Chapter 2 Socio-Economic Characteristics

Introduction

A picture of the demographic characteristics of the region is needed to understand travel patterns and who needs service to what areas within the region. The picture also needs to include how the region will grow and possibly change.

Over the next five years, the North Front Range area population is forecast to grow 1.9% as compared to Colorado's overall forecasted population growth rate of 1.5%¹. When considered with Colorado's overall growth of 1.4% between July 2010 and July 2011 (twice the national growth rate over the same time period²), the area transit and human service agencies need to be prepared for a much larger than average change to the local populations.

Additionally, as the population continues to grow and travel patterns extend outside the region, understanding which corridors are most traveled to points outside the region is important. SH287, SH 34, SH85 and Interstate 25 represent significant regional corridors to consider when planning for the future.

This chapter will identify the populations and regional travel patterns central to the overall transportation challenges in each county as outlined in Chapter One.



Demographic Characteristics

Seniors

From 2010 through 2030 the population over 65 will be the fastest growing age group in the state as shown in the bar chart shown below (2-1).

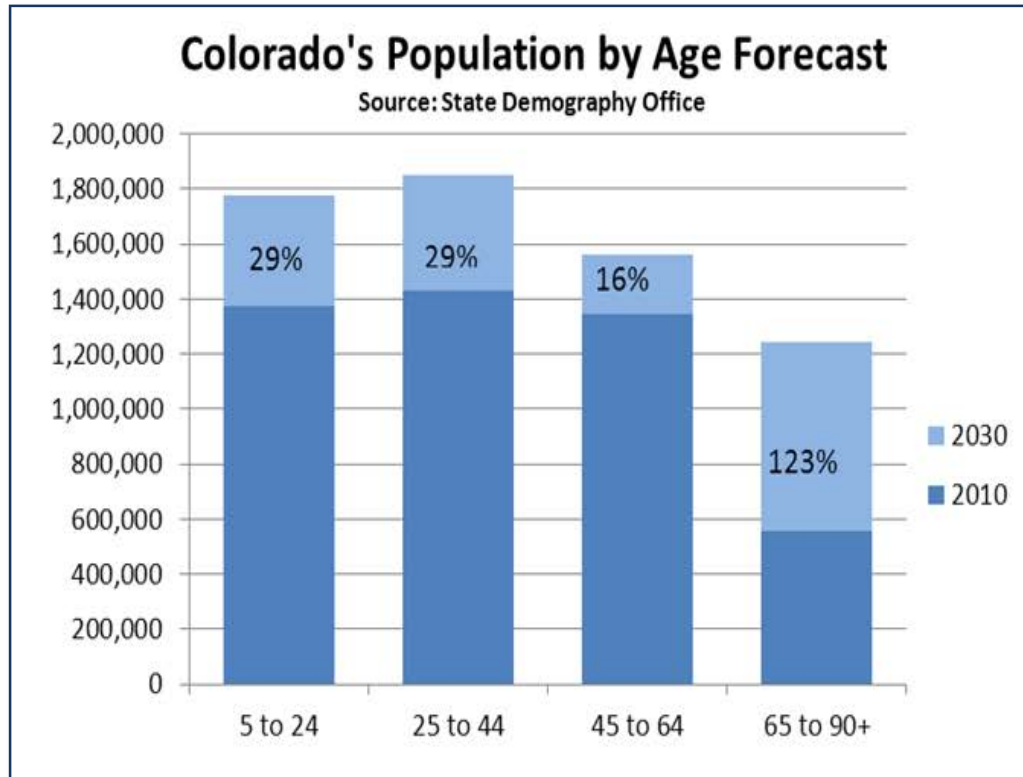


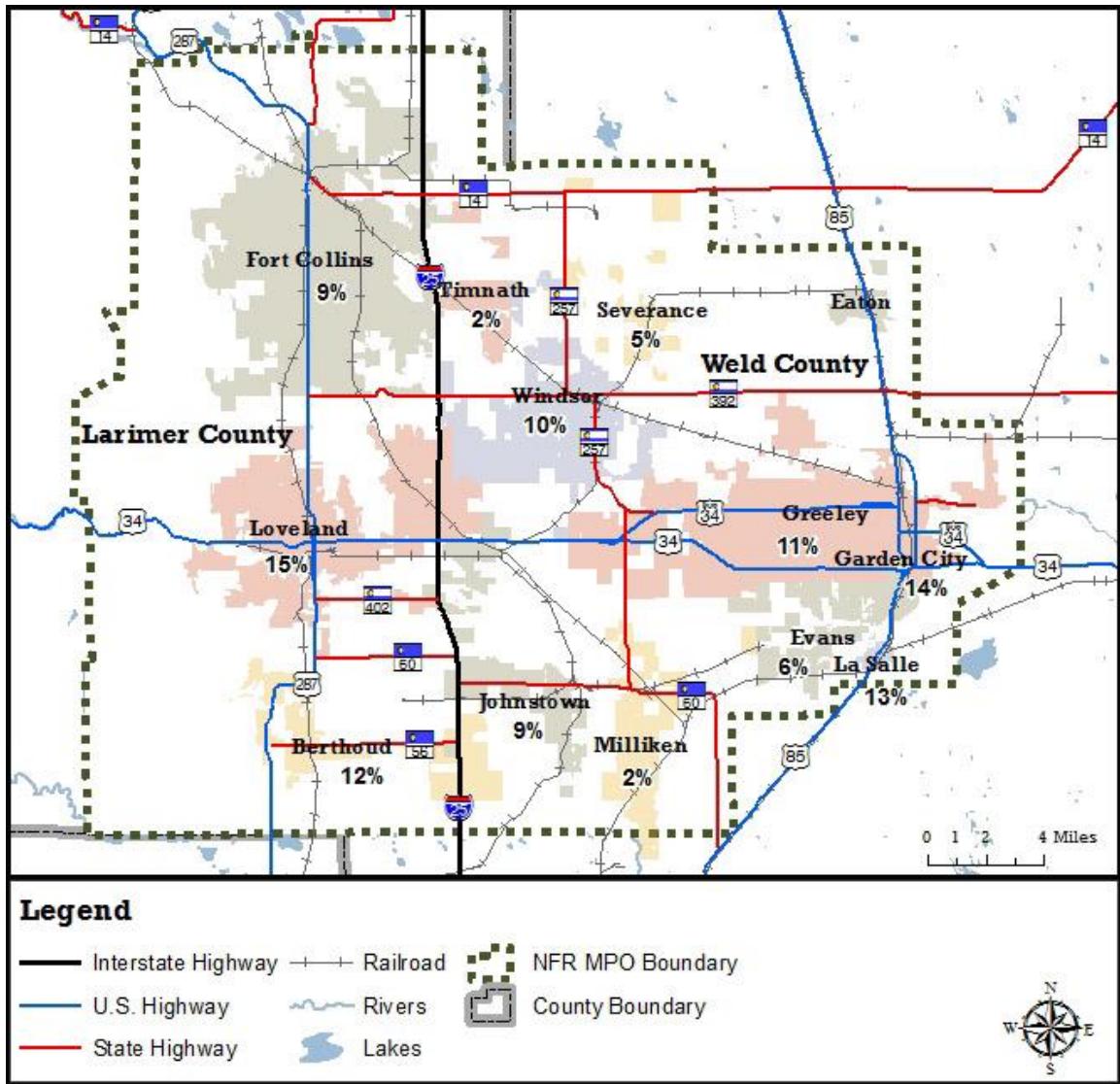
Figure 2-1 State Demography Office, CO Department of Local Affairs – 2012

The population over 65 is expected to increase by 123% by 2030 compared to the 45-64 population only increasing by 16%³.

Both Larimer and Weld counties have significant senior populations.

More of these individuals reside in urban areas, but many rural areas have relatively high concentrations of seniors.

Map 2-2, from the NFRMPO 2035 Regional Transportation Plan shows the percentage of seniors.



MAP 2-2 Population 65 and Older by City in the NFRMPO
 NFRMPO 2035 Regional Transportation Plan

Veterans

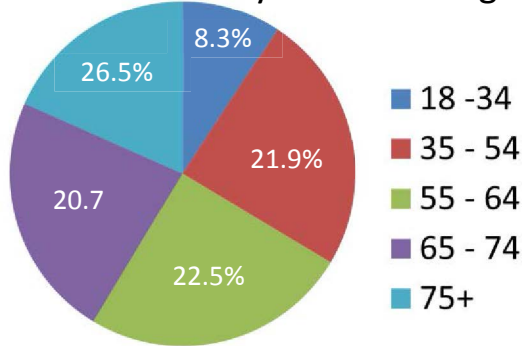
In Larimer and Weld counties, disabled veterans often rely on Disabled American Veterans (DAV) shuttle services which provide transportation to local veterans needing services at VA hospitals in Cheyenne and Denver.

However, medical transportation is not the only transportation issue facing veterans as they navigate health, employment and aging issues.

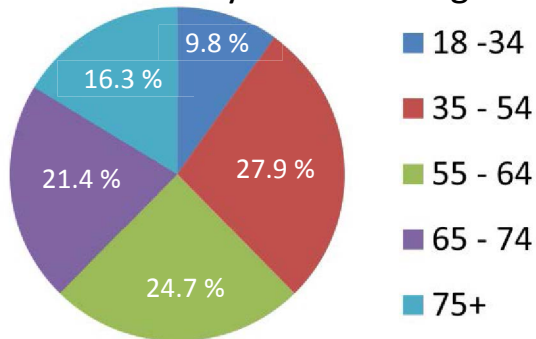
Veterans reintegrating onto society after active duty also face transportation issues. Seeking employment and securing jobs often hinges on transportation or lack thereof. In Larimer and Weld, veterans have a higher unemployment rate than the general population.

In February 2013, over 22,000 Veterans were unemployed in Larimer and Weld County which represents a higher rate of unemployment than the general population as indicated by the chart below.

Larimer County Veterans - Age



Weld County Veterans - Age



	Larimer	County	Weld	County
Subject	Total	Veterans	Total	Veterans
Population 18 years and over	241,737	22,628	187,590	17,396
Male	49%	89.4%	49.8%	94.4%
Female	51%	10.6%	50.2%	5.6%
Unemployment Rate	9.2%	10.4%	6.4%	7.6%
Disability Status	10.2%	20%	13.1%	29.9%

All Veterans data from U.S. Department of Labor and Employment 2013 reports.

Zero Auto Households

Figure 2-3 – The number of vehicles per household varies slightly between Larimer and Weld Counties. As defined by the U.S. Census Bureau, “A household includes all the persons who occupy a housing unit.” With regard to household vehicle ownership, the regional average was 2.22 vehicles per household. The households with the most vehicles were in the outlying counties, while those in Greeley/Evans had the smallest reported number of vehicles per household.

Figure 2-3 Number of Vehicles Available In Households by County

Number of Vehicles	Larimer County	Weld County
None	4.0%	5.6%
1	28.3%	26.8%
2	42.3%	40.5%
3 or more	25.5%	27.1%

Source: 2010 U.S. Census Bureau

Populations with Disabilities

Figure 2-4 lists the disability status by area as reported in the Front Range Travel Counts Survey. The survey completed in 2010, was a comprehensive study of the demographic and travel behavior characteristics of residents in the Front Range area including the NFRMPO area.

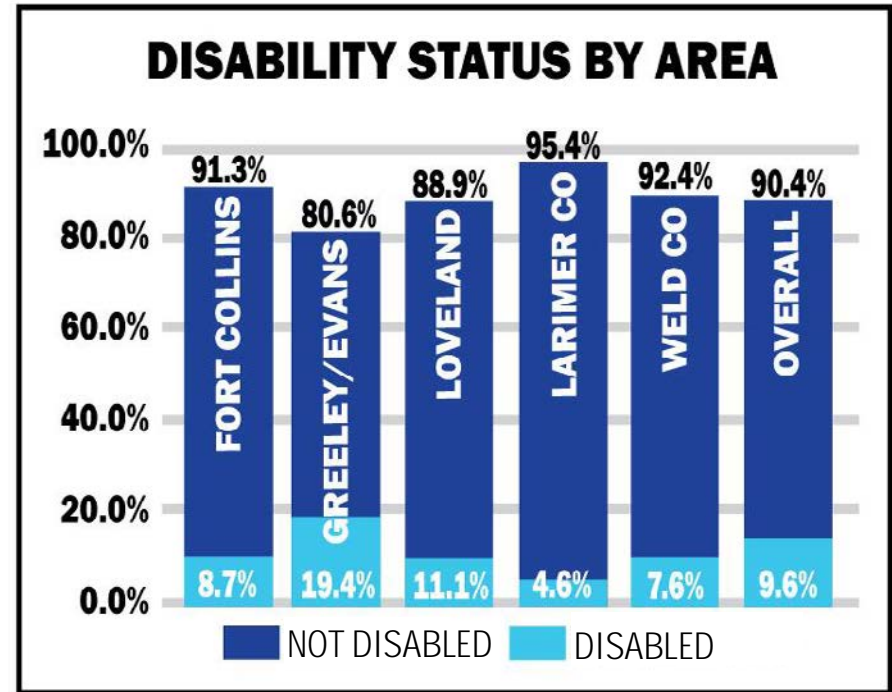
The survey followed the American Community Survey (ACS) approach to documenting disability levels in the region. If at least one disability was present, the household member was identified as disabled.

Disability rates track closely with aging, as the older an individual is the more likely the person has a disability. While Colorado is younger than the nation as a whole, both Larimer and Weld counties have significant populations of people who are over age 65, particularly in the rural communities.

The Front Range Travel Counts survey requested that people identify if they had any of six types of disabilities. As with the U.S. Census, the type and level of disabilities is identified by the respondent.

The six types include:

- Sensory
- Physical
- Mental
- Self-care
- Disabilities affecting their ability to go outside the home
- Employment disabilities.



It is common for individuals to have more than one type of disability and transit services often carry people with several types of disabilities.

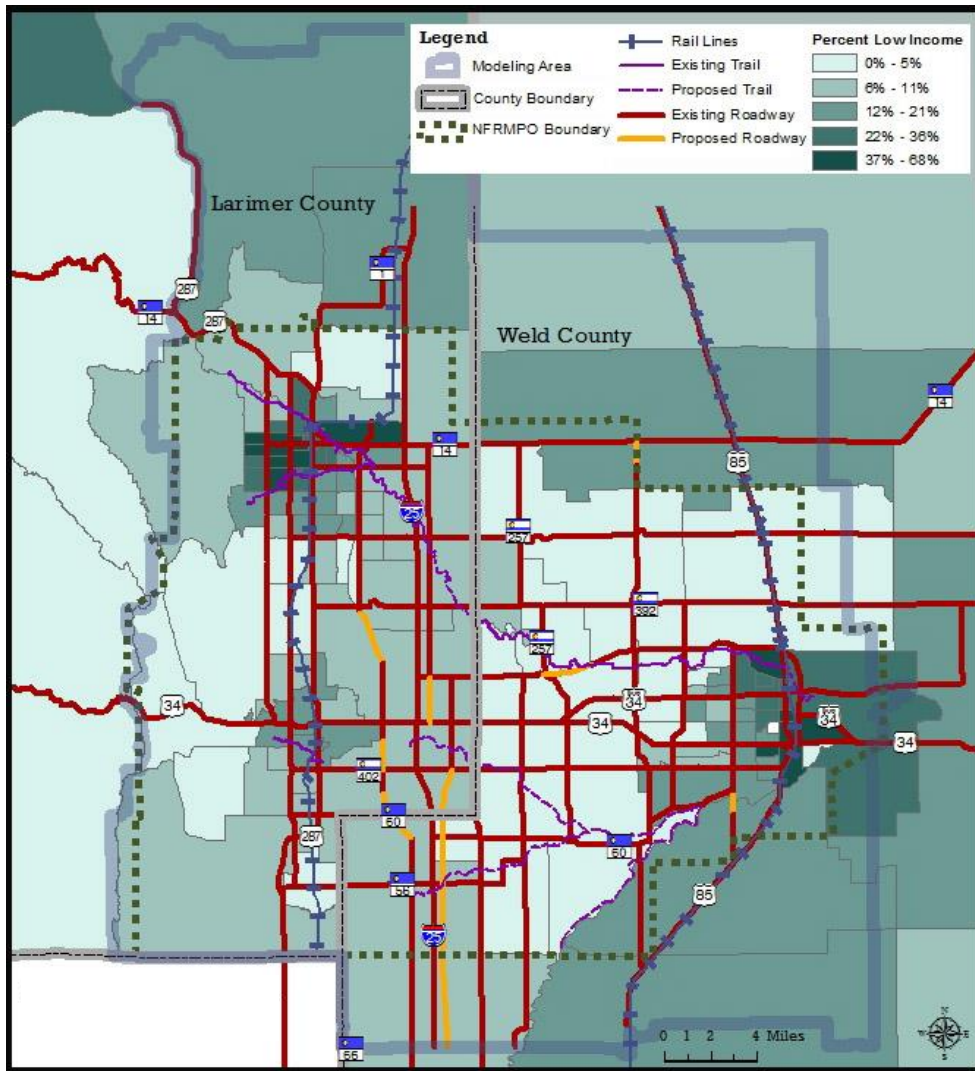


Figure 2-5 Map Source: American Community Survey

Low Income Population

The low-income population is frequently comprised of individuals who are dependent upon public transit.

Several human service programs (such as Temporary Assistance to Needy Families, Food Stamps, and Medicaid) are geared to individuals with low-incomes.

There are a variety of measures of income and Figure 2-5 illustrates the areas in the region by census block group.

Some areas, such as the area east of Fort Collins near I-25 and around Evans indicate relatively low incomes but do not have many households without autos.

These are also areas where limited or no transit service is available. Figure 2-6 shows the three areas of fixed route service in the North Front Range.

Transit Services

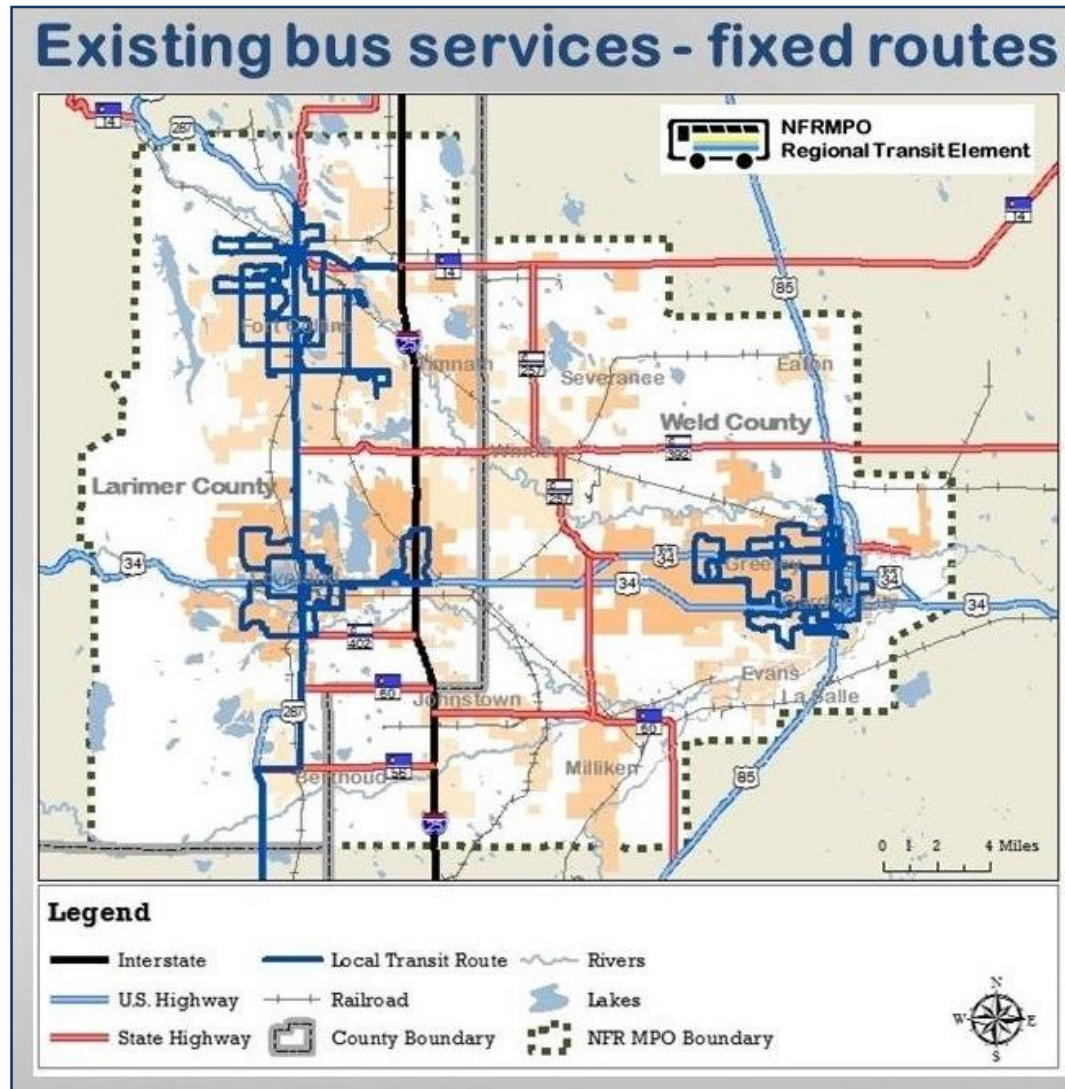


Figure 2-6 Map Source: NFRMPO Regional Transit Element Study

Transit Services

Transit services in the region are comprised of a mix of public, private and non-profit providers.

The four public providers are structured to serve residents within the respective communities including Fort Collins, Loveland, Berthoud and Greely-Evans.

Figure 2-7 shows the growth in ridership from 2007 to 2012. Figure 2-8 provides a closer look at the two smaller transit providers in the region. Including the Loveland-Fort Collins based Volunteer Driver Program, SAINT (Senior Alternatives in Transportation).

In general, transit services do not cross jurisdictional lines except for the FLEX commuter route that runs along SH287 through three of the communities.

Private providers and non-profit human service and volunteer driver programs are the exception crossing jurisdictional boundaries for their riders but these services often have limited ridership based on rider eligibility, service area or cost.

Figure 2-7 NFRMPO 2012 Congestion Management Plan

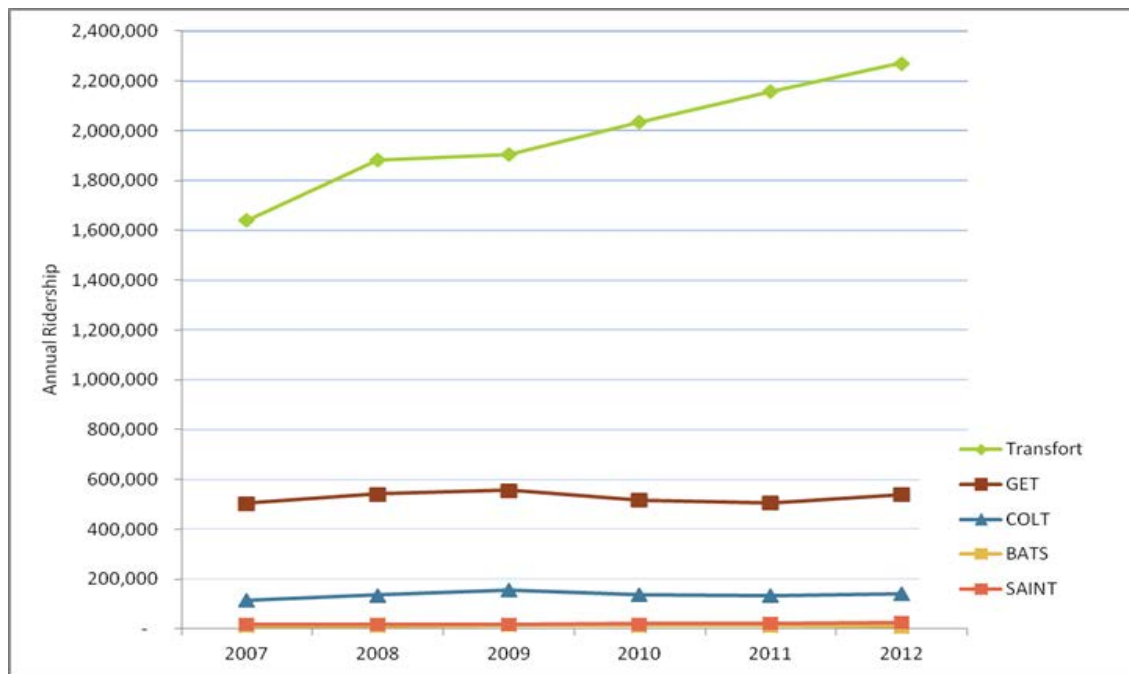
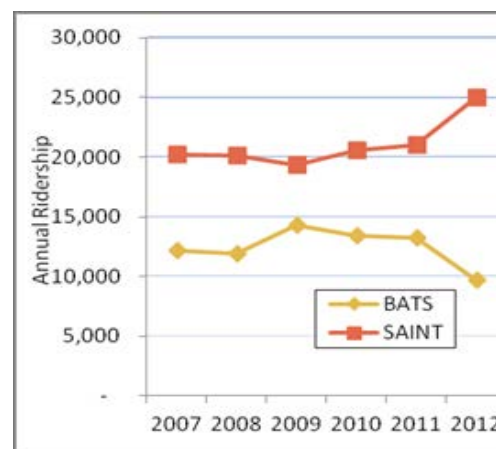


Figure 2-8 NFRMPO 2012 Congestion Management Plan



Major gaps in transit service include new development along the I-25 corridor (only Loveland provides service to the Centerra Shopping Center) and on the west side of Greeley. This area has a large shopping destination and more importantly, is home to a large hospital and multiple regional medical centers. Transportation to this area without a vehicle is very limited.

Residents on the east side of Loveland living south of State Highway 34 – an area with relatively low auto ownership and per capita incomes – only have transit service on State Highway 34. Some low-income neighborhoods to the east and north of Greeley do not have access to viable transit services.

Table 2-9 below shows the most recent ridership changes from 2011 to 2012.

Transit Agency	Total Ridership	% Change from 2011 to 2012
Transfort	2,271,732	5.3%
GET	539,515	6.4%
COLT	142,287	6.7%
BATS	9,739	-26.5%
SAINT	25,000	19.0%
TOTAL	2,988,273	5.5%

Table 2-9 NFRMPO 2012 Congestion Management Plan

Despite geographic service gaps and limited hours of operations, all the transit providers except Berthoud have seen ridership growth in the last five years. Berthoud ridership has been affected by service area cuts and increases in fares.

Employment and Activity Centers

Many employment opportunities for low-income workers are in the commercial and retail corridors along major thoroughfares.

In addition, there are low-wage jobs at many industrial facilities and medical facilities (nurses aid, janitorial workers, cafeteria workers, etc.), which may be on a shift basis. While commercial employment occurs throughout the region, significant new development has occurred in the I-25 corridor where there is limited transit service.

Map 2-10 shows the 2009 density of employment in the NFR area. Labor and employment placement agencies in both the Greeley urbanized area and the Fort Collins /Loveland/Berthoud TMA report that transit services are often limited in neighborhoods where their clients live, or that long and circuitous trips are required for their clients to access jobs.

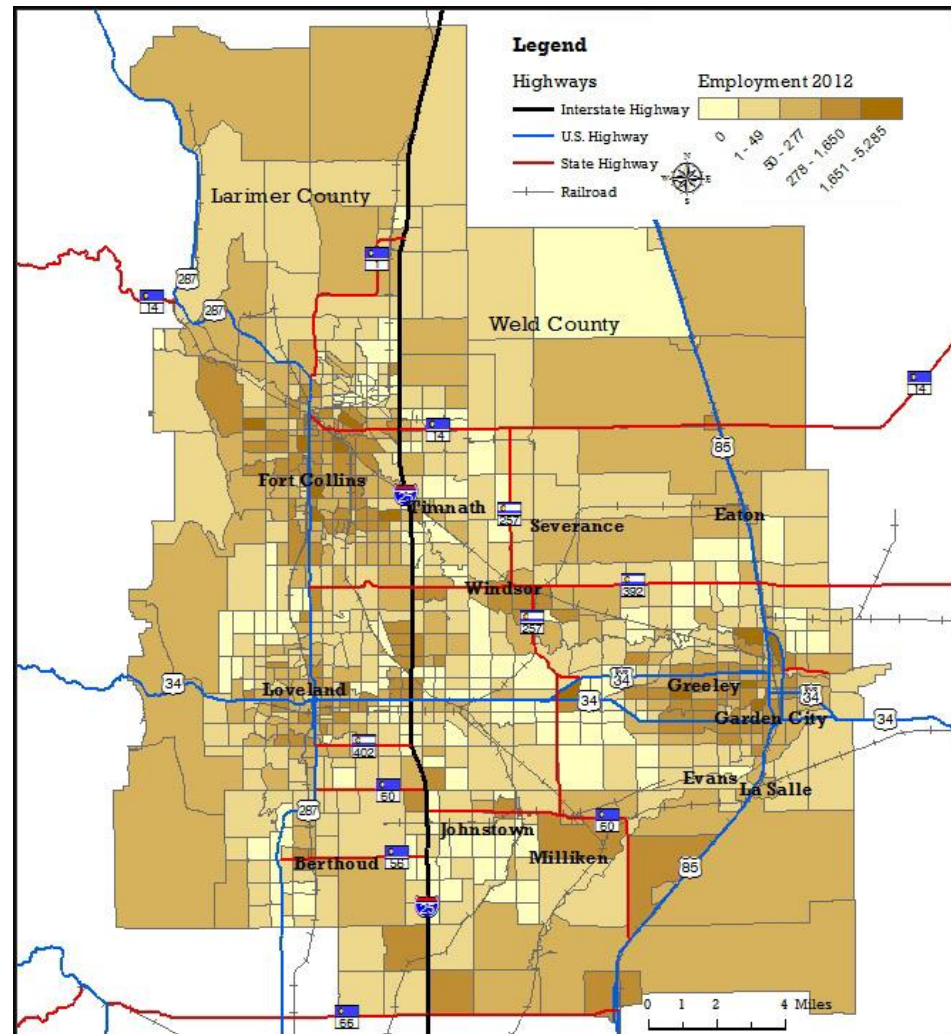


Figure 2-10 NFRMPO 2035 Regional Transportation Plan

Summary

The growth in the region, changing demographic characteristics, and changing land use patterns are having significant impacts on travel patterns and the ability of the existing transit networks to serve those travel patterns. The following trends are impacting mobility:

- The trend of development occurring at the center of the region and along the I-25 corridor has continued and from a residential and business perspective, the three major cities (Fort Collins, Loveland, and Greeley) continue to function more as a region. Significant travel movements between these communities and the surrounding rural towns are putting pressure on transit agencies to provide services that bridge the gaps between the cities.
- Shifts in medical facilities and retail development towards the center of the region are impacting the ability of people who depend on transit services to get to these destinations. Also, major medical partnerships which share resources in different communities are creating regional transportation needs for client services.
- Transit services have remained largely centered within the cities that fund the services and have been unable to keep up with the growth. The exception is the regional commuter route FLEX which provides a backbone of transit service connecting Fort Collins, Loveland, Berthoud and Longmont which enable riders to access transit service to Denver.

These trends mean that taking a regional approach to mobility and examining the travel needs of populations with a high level of reliance on public transit is more important than ever before. It also underscores the need for communication between services that create demand such as medical facilities and transit/human service agencies that provide the trips to meet the demand.

References – Chapter 2

- 2.1 State Demography Office, CO Department of Local Affairs – 2012 Population Overview Report
- 2.2 NFRMPO 2035 Regional Transportation Plan
- 2.3 2010 U.S. Census Bureau
- 2.4 U.S. Census Bureau 2000
- 2.5 Chart Source: Front Range Travel Counts Survey
- 2.6 Map Source: NFRMPO Regional Transit Element Study
- 2.7, 2.8 & 2.9 Source: NFRMPO 2012 Congestion Management Plan
- 2.10 Map Source: NFRMPO 2035 Regional Transportation Plan

Chapter 3 PUBLIC TRANSIT AND HUMAN SERVICE PROGRAMS

Introduction

An understanding of human services program delivery and provision of public transit service is a foundation for this plan. It will help stakeholders understand the needs and resources of both parts of the human service and transit provider equation. In turn, broad based knowledge of transportation needs and resources will enable the region to identify ways to improve mobility and access.

This chapter is divided into two sections; one for each county in which human service programs and transit services are described. Appendix C identifies the vehicle resources used by both public and private organizations in meeting the needs for human services transportation and public transit.

For each county, the major *public*, *quasi-public* and *private human service* programs are described. *Public* programs are operated at the county, state and federal levels. Funding for most of these programs originates at the federal level. With federal funding, regulatory requirements for these programs are passed on to states and in some cases to large urban areas (those over 200,000 in population). The state then implements the programs. Colorado works in partnership with counties for many social service programs which administer the programs on behalf of the State.

The *quasi-public* and *private* programs are described together under the heading “Community Partners.”



Quasi-public programs are those set up as part of the way in which human service programs are delivered – an example is the community-centered boards that oversee the delivery of services to individuals with developmental disabilities.

Each community-centered board is a private non-profit entity, but they are established by State law and charged with specific duties.

A wide range of *private non-profit* organizations form an important part of human services delivery in Colorado, and many receive significant public funding for the services they provide. In addition, many *private for-profit* organizations deliver needed services, such as medical or nursing home care.



Public transit providers are primarily public agencies which operate transit services at a nominal charge. There are also public transportation providers such as Greyhound that charge a market rate for services, but

these are considered a resource for contracting transportation services rather than an organization that can participate in coordinating the public investment in transit services.

Larimer County

Human Services Programs – City of Fort Collins.

The City of Fort Collins is responsible for allocation of two federal transit administration funding programs which serve human service clients. FTA 5307 funding is for transit operations and capital acquisitions as well as the newly consolidated JARC activities which serve low-income employment transportation needs. Fort Collins also administers FTA 5310 which provides funding for projects and activities that enhance mobility for seniors and people with disabilities.

Human Services Programs – County

County human service programs are provided through the Human Services Department. Services are provided either directly by department personnel, and/or through collaborations or contracts with other community agencies. Within Human Services, various departments work closely to develop, coordinate and evaluate the total package of human services provided by Larimer County. There are eight primary service areas within the Human Service department:

- **Office on Aging (OOA)** is the Area Agency on Aging and is within the Larimer County Human Services Department. The OOA provides services to Larimer County residents who are 60 years of age and older with the mission of maintaining health, dignity, independence and quality of life by advocating, planning, coordinating and delivering services and programs with an emphasis on meeting the needs of those who are socially and/or economically disadvantaged.
- **Adult Protective Services** responds to reports of mistreatment or neglect of at-risk adults who are, due to age or disability, unable to advocate for themselves. Services include risk assessment, crisis resolution, individual and family counseling, service provider referral, financial management, guardianships, placement and care coordination.
- **Child Support Services** provides financial support to children and custodial parents through TANF (Temporary Assistance for Needy Families). Related services within this department including Child Support Enforcement and Resources for Employers which helps employers with reporting and withholding requirements.
- **Children, Youth and Family Services (CYF)** works with children who are at risk of being abused, have been abused or neglected, are delinquent and/or have violated the law. CYF has a number of specialized programs that provide an integrated approach to serving children and families in Larimer County.
- **Food, Medical & Financial Assistance** provides assistance in obtaining funding from eleven federal funding sources for eligible residents.
- The Human Services Department also has specialized services for **Foster Care, Fraud Investigation and Recovery, and Options for Long Term Care.**



Human Services Programs – State

Three key departments and their programs are important to the overall provision of human service transportation and public transit services.

- **Health Care Policy and Finance - Medicaid Transportation Services** First Transit operates the State's brokerage and is responsible for scheduling non-emergency medical transportation for eligible Larimer County residents. First Transit works with providers in Larimer County to provide the needed services. All providers must meet vehicle requirements and private providers must have a PUC Permit.
- **Department of Vocational Rehabilitation** provides a variety of rehabilitative services to individuals with disabilities. The Vocational Rehabilitation field office works with other agencies in the county to provide training for employment and to work with clients and transportation providers to enable them to access employment.
- **Colorado Department of Transportation – Division of Transit and Rail** is responsible for funding a variety of Federal Transit Administration (FTA) programs for both rural and urban areas. CDOT managed programs include the FTA 5310 program for elderly and disabled individuals and the FTA 5311 program for public transit in non-urbanized areas. FTA 5317 New Freedom program funds available for serving people with disabilities have been consolidated with FTA 5310 funds.

Human Services Programs – Federal

Many Federal programs work with State and local governments. Two key programs that *do not* are:

- **Veteran's Administration** Veteran's health services are provided through hospitals in Cheyenne and Denver, and through an out-patient clinic in Fort Collins. Vet Centers and Veteran's Benefit offices are also located in Cheyenne and Denver.
The local Disabled American Veterans (DAV) group in Fort Collins is hosted by the non-profit provider Elderhaus and provides transportation service to Denver and Cheyenne most weekdays for veterans.



- **Head Start** promotes school preparation by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services. There are 23 Head Start programs in Larimer County; 15 in Fort Collins, 6 in Loveland, and one each in Berthoud and Wellington that provide services for eligible children who are 3 to 5 years.

Human Services Programs - Community Partners

- **Foothills Gateway** is a non-profit 501 (c)(3) corporation, that provides a broad range of services to Larimer County individuals with developmental disabilities. Their services are funded through Federal Medicaid funds, state matching funds and a mill levy passed by Larimer County voters.
- Established in 1972 to provide a community-based alternative to institutional care, Foothills Gateway has been designated by the State of Colorado as the community centered board, or single entry point, for these services in Larimer County.

Utilizing 51 vehicles, Foothills Gateway provides transportation throughout Larimer County for program individuals who are adults with developmental disabilities qualifying for comprehensive services (24-hour) or for support services.

Peak hours for transporting are 6:30 a.m. 6:30 p.m. Monday through Friday, with

approximately 1,000 trips per week provided for individuals 18 years and older between their home/program and or work settings. In addition, individuals who work on weekends may use a taxi or Dial-A-Ride for transportation. The majority (95%) of Foothills Gateway clients live within Fort Collins and Loveland.



- **Disabled Resource Center** is a center for independent living committed to hiring qualified disabled people to fill staffing positions. Services emphasize three major areas of impact: advocacy, awareness and access as it relates to disabled people leading dignified, productive lives that maximize their independence and equal participation in society. Services include: peer counseling, information and referral, advocacy, case management, elderly blind support group, high school job skills training, employment assistance, equipment loans, housing assistance, financial help, Braille instruction and transportation assistance.
- **Elderhaus** provides therapeutic programs for individuals 18 years of age and over with special needs in Larimer County. Mindset Creative Community Resources in south Fort Collins providing services to higher energy levels individuals and Elderhaus in north Fort Collins provides services for those diagnosed with Alzheimer and other dementias. Programs focused on challenges related to Traumatic Brain Injury are available at both locations.



Elderhaus has six wheelchair accessible vehicles and provides approximately 10,000 transportation trips per year.

Elderhaus also serves as a host agency for the Larimer County Disabled American Veterans (DAV) which provides transportation for veterans to medical services in Cheyenne Wyoming and Denver. A Veteran's Benefits Helper also assists military persons in Larimer County to complete an application for benefits to the Veteran Administration free of charge.

- **Center for Community Partnerships (CCP)** are the direct service and outreach arm of the Department of Occupational Therapy at Colorado State University. It is a fee-for-service program that provides comprehensive and individualized services for youth and adults with disabilities and/or challenges as they pursue employment, educational, independent living, recreational and community access goals.

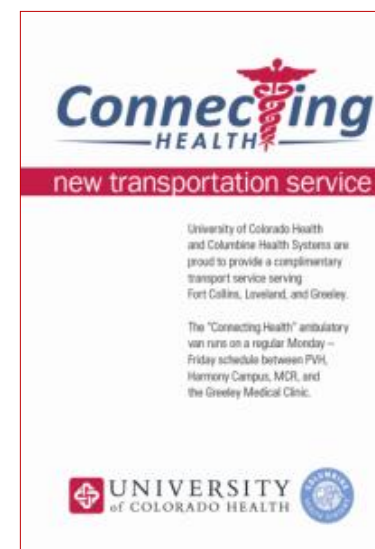
While based at CSU, the program provides services in many areas of Colorado and has programs with a variety of educational institutions from K-12 to college. Colorado individuals may be referred to CCP for services via the Colorado Division of Vocational Rehabilitation, the Colorado Division for Developmental Disabilities (Foothills Gateway, Inc.), the Colorado Workforce Center, private insurance, grants and school systems, as well as through self-referral/self-pay.

- **Larimer County Criminal Justice Services, Community Corrections Department** program works to re-integrate felony offenders into the local community. Community Corrections provides services in residential and non-residential settings to offenders such as individual and group counseling, life skills training, financial planning and management, and crisis intervention.

They assist individuals with mental health needs through the AIM program (Alternatives to Incarceration for Individuals with Mental Health Needs) and Mental Health Intervention for Pre-Trial Services and also operates transportation services for its clients.

Alternative Sentencing Department: The primary function of the Alternative Sentencing Department is to provide programs that allow low-level, mostly misdemeanor, offenders to serve court ordered county jail sentences yet remain productive members of the community. The Alternative Sentencing department is comprised of six programs: Pretrial Services, Community Service, Workenders, Midweeks, Work Release, and Electronic Home Detention.

- **Columbine Health Systems** provides a range of senior services including assisted and independent living facilities, home care and nursing services. Columbine has a fleet of 35 vehicles and provides transportation for their clients to destinations in Fort Collins and Loveland. Columbine recently partnered with the University of Colorado Health to provide weekday shuttle service between four primary health centers in Northern Colorado. The shuttle service is a circulator route called Connecting Health that provides rides to all ambulatory individuals regardless of purpose of trip. There is no charge to riders.



- **University of Colorado Health** is a **network** of hospitals and healthcare providers in Northern Colorado that recently became a transportation provider through its partnership service with Columbine Health Services (described above).
- **Touchstone Health Partners** provides community behavioral health resources for those living with mental health and addictive disorders at 22 facilities in Larimer County including Fort Collins, Loveland and Estes Park. Touchstone serves more than 7,000 people annually including individuals and families representing all ages from children to seniors.
- Touchstone client services include the Namaqua Center for Children providing care for children in need of behavioral and emotional supports; the Spirit Crossing Clubhouse, a vocational support program assisting adults pursuing personal, recovery and wellness goals; and a Peer Specialist program which trains and empowers those with a mental illness. The Sister Mary Alice Murphy Center for Hope, a touchstone partner, provides resources for homeless individuals or those at risk of becoming homeless. Touchstone also offers addiction treatment services for individuals and families.
- The **Salud** system provides a full spectrum of primary medical and dental care, including obstetrics and out-patient care in north-central and northeast Colorado. Based in Fort Lupton, the Salud program has a medical clinic located in Fort Collins.
- **Sunrise Community Health Center** has a clinic in Loveland and offers comprehensive and preventative adult and pediatric medical services, dental care, and pharmacy as well as on-site lab and x-ray services. Sunrise accepts all patients, including clients who are Medicaid and Medicare enrolled, un-insured, and fully insured, and offers clients who are at or below 200% of the federal poverty level a sliding fee scale. In the fall of 2013, the Loveland clinic will be expanding to its new location at 302 3rd St SE, Loveland.

An initiative of United Way of Larimer County



- **United Way** sponsors projects including food services, shelter and housing, medical, employment, family and youth programs, and aid for the elderly and disabled. The United Way supports transportation services through their financial support of Human Service agencies that are transportation providers. They also distribute free bus passes from their respective public transit providers to individual agencies for their clients in both Larimer and Weld County.

Larimer County Transit Providers

Transfort/Dial-A-Ride

The City of Fort Collins, through Transfort, operates fixed-route and paratransit services in Fort Collins and a regional commuter route between Fort Collins and Longmont. On its fixed-route system, Transfort carries over two million one-way passengers annually, with a strong emphasis on providing transit services to Colorado State University students and local youth.

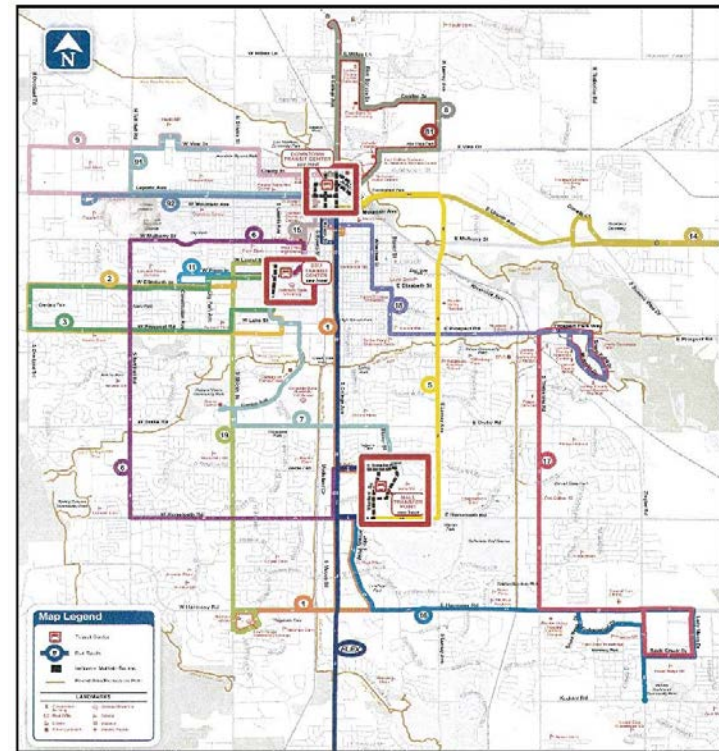
The fixed-route services are available primarily on major arterial streets throughout the city where trip origins and destinations are most concentrated. There are two existing transit centers – the Downtown Transit



Center located in downtown Fort Collins and the CSU Transit Center located in the Lory

Student Center on CSU's main campus. A South Transit Center is currently under construction near College Avenue and Harmony Road with plans to be complete and operational in 2014.

The paratransit service is branded as Dial-A-Ride (DAR). Individuals who are unable to use fixed-route services due to a disability may use DAR for door-to-door transportation services.



FLEX

Provides regional bus service and is the only regional bus route in Northern Colorado. It serves stops in Fort Collins, Loveland, Berthoud, and Longmont. FLEX provides a direct connection to the Denver Metro area by linking with the Denver area's Regional Transportation District (RTD) service in Longmont.

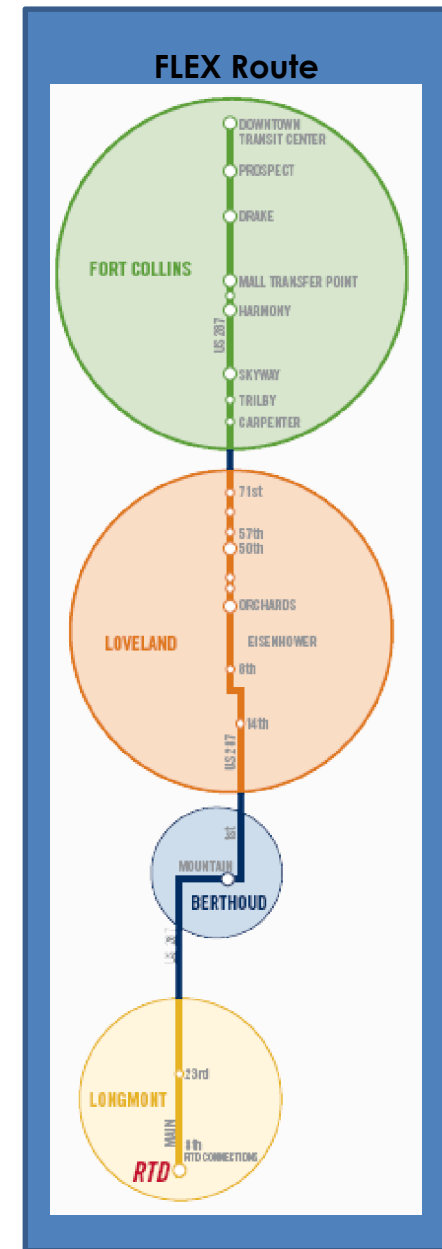
MAX

In 2014, Transfort will begin operating the region's first Bus Rapid Transit (BRT) service, which is branded as MAX. BRT is characterized as combining the flexibility of buses with the efficiency of rail. Some highlights of MAX are:

- 10 minute frequencies
- Extended service hours between 5 a.m. and midnight
- Real-time bus arrival information
- A bus-only guideway along segments of the route
- Pre-paid fare collection
- Enhanced stations



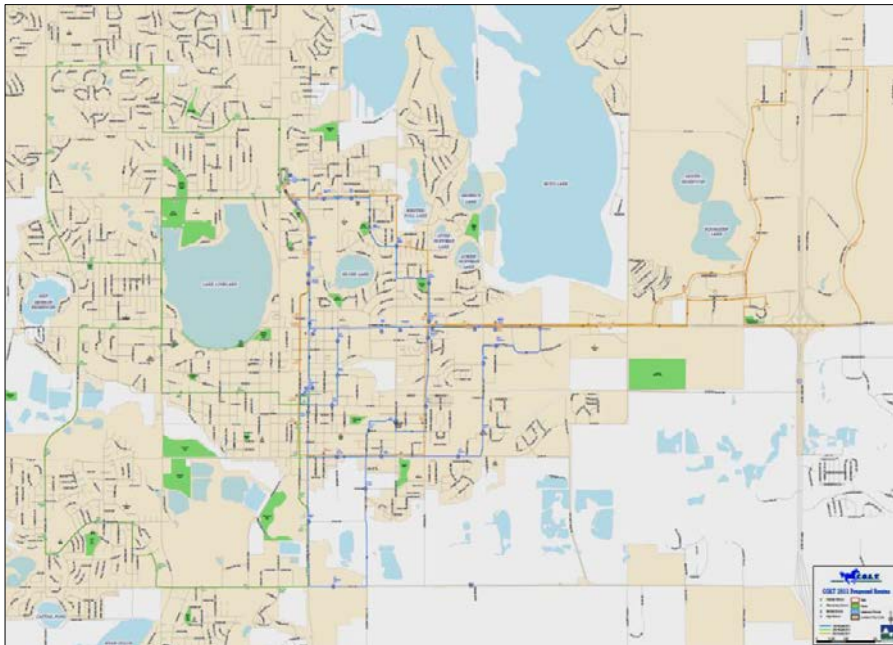
MAX will operate on the Mason Corridor between the Downtown Transit Center and the South Transit Center connecting many major activity centers throughout the city. The MAX guideway is currently under construction with service scheduled to begin in mid-2014.



Senior Alternatives in Transportation (SAINT)

SAINT is a non-profit, volunteer driver program that operates on weekdays. This program has 575 individual clients and provides over 25,000 rides per year to ambulatory clients. Most rides are for medical purposes followed by recreation/entertainment and beauty/barber shop visits.

The majority of riders are disabled and over 60 years of age. Peak operating hours are in the middle of the day, and many of these trips involve taking passengers to dialysis treatment and local community senior centers. SAINT provides service within the cities of Fort Collins and Loveland.



City of Loveland Transit (COLT)

COLT services include both fixed-route and paratransit services. Three fixed-routes, illustrated in Figure 3-3, operate Monday through Saturday and carry an average of 150,000 passengers annually.

Two paratransit vehicles also operate Monday through Saturday. The system serves the urban growth area, but most clients live within city limits. Approximately 10,000 paratransit trips are provided annually with medical appointments, including dialysis, being an important component of the provided trips.

Berthoud Area Transportation Services (BATS)

The BATS system was started by the Berthoud Senior Center in 1991 and developed into a demand-response system serving the Town of Berthoud and residents in the Berthoud Fire Protection District. Recently the Town of Berthoud, which had been providing a significant amount of funding, took over operation of the service. It is a client-based transportation system.

BATS provided 9,739 trips in 2012, and is operated exclusively with town funding. Of those trips, approximately 2,608 are for senior riders and 1,662 for people with disabilities.

In 2013, due to funding constraints BATS changed their service plan and discontinued transit service to areas outside the Town of Berthoud except four times a week to Loveland and once a week to Longmont. Daily service connects FLEX and Berthoud residents can travel on fixed-route service to points north ending in Fort Collins and south ending in Denver.

Estes Park

Via Mobility Services (formerly Special Transit) is a Boulder-based private, non-profit organization that offers paratransit service for older adults and people with disabilities of all ages. Low-income individuals may use some of these programs, and Estes Park, residents needing transportation can arrange a ride for a small fare. Reduced-fare and no-fare options are also available.

Estes Park Shuttles

Residents and visitors to Estes Park can board a shuttle or trolley at any of the 59 stops, Park and Rides or at the Visitor Center. There are five routes that cover the town and valley which connect to Rocky Mountain National Park. There is no charge to ride to use this seasonal service which runs yearly from June to mid-September.

Weld County

County

In 2008, the Weld County Departments of Human and Social services merged to create the Weld County Department of Human Services with the vision of creating a culture that empowers people to improve their quality of life. Human Services programs are administered under the supervision of the State and the Board of Weld County Commissioners. The main areas of program support include:

Social Services

- **Adult Protection:** Provide protective services to adults, age 18 and over, who are being exploited, abused, neglected, or are incompetent and need supervision. The services are available to at-risk adults and to individuals who are unable to perform or obtain services necessary for health, safety or welfare.
- **Child Support Enforcement:** Provides help in locating parents, establish paternity, establishing a child support order and enforcing child support obligations.
- **Child Welfare Services:** Has the mission "To be a comprehensive, family-focused, and community-based system that promotes the safety, permanency and well-being for children, youth and their families in Weld County through efficient interventions and service delivery." Specific services revolve around Child Welfare, Child Protection, the Multidisciplinary Youth Assessment Team (MYAT), the Parenting Education Center, the Youth in Conflict (YIC), and providing a confidential resource for reporting abuse and neglect.
- **Foster Care/Adoption:** Provides support services to families that offer abused and neglected children a safe home.



- **Employment Services of Weld County:** Is a comprehensive workforce center which connects resources for employment, education and training services at the local, state and national level. Self-service resources promote personal and career development, furnish access to Internet tools for employment and training opportunities, and provide information about local and regional employers and labor markets.

The employment services department offer workshops and career development tools for job seekers, business services to employers, unemployment insurance benefits and youth services including services to help with completing high school or a GED program.

Veteran's employment services are also offered. Public Law 107-288, section 2(a) of the Act 38 U.S.C. 4215 (a) creates a priority of service for veterans (and eligible spouses) "who otherwise meet the eligibility requirements for participation" in Department of Labor (DOL) training programs and services. Weld County has a Veteran's Service Officer which connects Veterans to multiple services in Weld County.

- **Financial, Food, and Medical Services:** Provides assistance in the form of financial and medical programs to help individuals and families in Weld County that qualify. Program areas include Child Care, Elderly or Disabled Adult Financial and Medical programs, Energy Assistance, Family Financial Services, Family and Children's medical programs, and Food Assistance.
- **Area Agency on Aging (AAA):** Supports services for seniors either through contracts with community agencies or by providing the service directly. The Weld County AAA is a HelpSource for seniors and may be contacted for a wide range of information and referral questions.
- **Family Educational Network of Weld County:** Provides comprehensive services for children ages 3-5 years old in the areas of early childhood education, health, mental health, and family and community partnerships. Head Start has a federally funded enrollment of approximately 500 children. A total of 16 programs operate in Weld County including; 6 in Greeley, 2 in Evans, 2 in Frederick, 2 in Hudson, and one each in Fort Lupton, Gilcrest, Milliken and Platteville.

- During the summer, the Migrant Head Start Program serves infants, toddlers and preschool age children. This program has a federally funded enrollment of approximately 250 children statewide. Both programs encourage the enrollment of children with disabilities and will provide special services.

A key activity of the Human Services Department is serving as the **Single Entry Point** assisting clients in accessing long-term care information, screening, needs, and referral to appropriate long-term care programs and case management services.

The **Weld County Department of Public Health & Environment** also provides key human services, and the purpose of the department is to prevent disease, disability and death, and to promote healthy behaviors by developing health programs which meet the needs of the people of Weld County. The main goals and focus are promoting health and the prevention of disease rather than treatment.

- **Client Health Services:** Has the primary responsibility for programs for which client mobility and access to services is important. This division employs public health nurses, health educators, dietitians, a social worker, and office technicians who function in a variety of health promotion, health protection, and disease prevention roles. Programs provided include immunizations, family planning, communicable disease follow-up, health care program for children with special needs, abstinence education, tobacco prevention, cancer prevention, as well as other programs.

**All information regarding Weld County Services is derived from www.co.weld.co.us*

State

Three state-level programs are important in Weld County:

- **Medicaid Transportation Services** NEMT Services are provided to Medicaid eligible individuals who require transportation to a Medicaid funded medical appointment. Weld County is part of the regional/state broker system that works with First Transit and handles all Medicaid transportation for Weld County and other surrounding counties as well.

- **Vocational Rehabilitation** works closely with Human Services to provide supportive services to help clients attain employment goals. An individual who becomes disabled may need re-training for employment, assistance in obtaining employment, and transportation to and from work.
- **Colorado Department of Transportation – Division of Transit and Rail** is responsible for funding a variety of Federal Transit Administration (FTA) programs for both rural and urban areas. CDOT managed programs include the FTA 5310 program for elderly and disabled individuals and the FTA 5311 program for public transit in non-urbanized areas. FTA 5317 New Freedom program funds available for serving people with disabilities have been consolidated with FTA 5310 funds and are requested as part of the FTA 5310 program funding application.

Federal

Many Federal programs work with State and local governments. Two key programs that *do not* are:

- **Veteran's Administration** Veteran's health services are provided through hospitals in Cheyenne and Denver, and through an out-patient clinic in Greeley. Vet Centers and Veteran's Benefit offices also are located in Cheyenne and Denver. The local Veteran's group in Fort Collins provides a shuttle bus to Denver and Cheyenne for individuals needing services that are not available locally; however, a shuttle directly from the Greeley area to Denver and Cheyenne is not currently available.

Community Partners

This section describes the quasi-public and private organizations that are key to the delivery of human services. The identified organizations represent programs and services that are often involved with the provision of human services transportation or serving individuals who often need transportation to access services or employment.

- **Envision** is the community-centered board serving Weld County, and is one of the largest human services organizations in the area. Envision provides comprehensive services to individuals with developmental



disabilities, working with a variety of affiliated agencies in providing for their clients. Services include early intervention, children's and family support, adult services, employment and residential services and supported living services. As part of their program, Envision provides extensive transportation services for their clients.

- **North Range Behavioral Health** provides a variety of services for individuals and families experiencing mental illnesses. Services include outpatient treatment, residential programs, transitional housing and supported living. The Frontier House Clubhouse has an active supported employment program, providing multicultural services to support the ethnic population in Weld County. North Range operates its main offices in Greeley and a south county office in Fort Lupton.
- **Connections for Independent Living** provides services to people with disabilities regardless of their age or type of disability. Connections is a certified independent living center that promotes full inclusion and integration of people with disabilities into all levels of society and works towards independence and equality for people with disabilities. Services include individual and systems advocacy, peer support, skills training, information and referral, housing, and employment. Services also include specialized programs for youth, people with multiple sclerosis, seniors with vision loss, people desiring to move out of a nursing facility, and services for the Deaf.
- **Island Grove Regional Treatment Center** offers substance abuse and detoxification services - both residential and out-patient - to adults, adolescents and men or women in both Weld and Larimer counties. It also provides approved domestic violence and offender programs. The main program is located in Greeley, and there are additional sites in Fort Lupton, Fort Collins and Loveland.

- **GCI** offers several programs that focus on the development of nursing home alternatives to achieve a better quality of life for people needing daily health care services. GCI has multiple facilities and offers therapy, housing and a brain injury campus. The programs include the Hope Therapy Center, Stephens Brain Injury Campus, and housing facilities including the Camelot and Hope apartments for people with disabilities. GCI is certified as a Medicare/Medicaid Home Health Agency, Free-standing Out-patient Rehabilitation Clinic, a Specialized Adult Daycare Program and coordinates with many community agencies in providing care to people of disability.
- **Medical and Dialysis Facilities** are centered in Greeley, and have been expanding to the west as Greeley has grown. Northern Colorado Medical Center is located downtown and has a facility on West 10th Street and 71st Avenue. The FMC Dialysis center is located in Greeley. There are also facilities in neighboring counties which may be closer to Weld County residents living in the southwest or western parts of the county. The new medical facilities in Loveland also serve some Weld County residents.
- **Housing Authorities** are located in Erie, Fort Lupton, Greeley, Johnstown and Windsor. Weld County also operates a county-wide housing authority.
- **Adult Day Care, Assisted Living or Nursing Facilities**
A variety of programs are located in Greeley and throughout the county. The Eldergarden program in Greeley serves the elderly in many small communities in addition to residents of Greeley and Evans.
- **Sunrise Community Health Center** has clinics in Greeley and Evans and offers comprehensive and preventative adult and pediatric medical services, dental care, and pharmacy as well as on-site lab and x-ray services.



Sunrise accepts all patients including clients who are Medicaid and Medicare enrolled, un-insured, and fully **insured**, and offers clients who are at or below 200% of the federal poverty level a sliding fee scale.

The **new** Sunrise Clinic expansion is located off Highway 85 at 2930 11th Avenue in Evans, in the old State Farm building.

- **The United Way** supports projects including food services, shelter and housing, medical, employment, family and youth programs, and aid for the elderly and disabled. In Weld County, the United Way facilitates transportation services through their financial support of Human Service agencies that are transportation providers.

They also distribute free bus passes from Greeley-Evans Transit (GET) the areas fixed-route and paratransit provider to individual agencies for their clients.

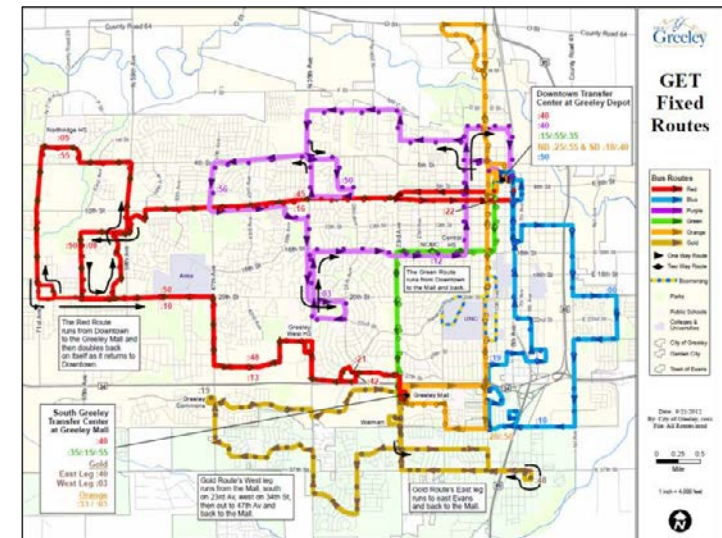
Transit Providers

Greeley-Evans Transit

The Cities of Greeley and Evans operate this fixed-route service, paratransit services, and evening demand-response services. Six fixed-routes operate on a modified grid system Monday through Friday from 6:45 a.m. to 6:45 p.m. and from 9:00 a.m. to 5:50 p.m. on Saturdays. It also operates a complementary paratransit service and a demand-response service during evenings and on Sundays.

The Boomerang route serves UNC students and operates only during the fall and spring semesters when the university is in session. The remainder of the system operates year-round.

Figure 3.1 GET Routes



As the City of Greeley has expanded to the west, the GET program has extended routes to serve major activity centers. The routes currently serve as far west as 65th Avenue. The current fixed-route serves the urbanized areas in illustrated in Figure 3-1, and the city of Evans.

Senior Resource Services (SRS) - Volunteer Transportation Program Volunteers provide transportation to the doctor's and dentist's offices, grocery shopping, senior centers, and special events for those seniors in need. As of November 2012, SRS has 172 volunteer drivers serving 360 clients. Total trips provided in 2012 was approximately 15,000.



Summary

Both counties have multiple human service agencies that provide services which cover the needs of multiple populations within each county. What constrains these agencies is the lack of funding, particularly with respect to transportation.

With few exceptions, transportation is not covered by traditional human service funding streams; however, the transportation services or lack thereof, often affect an individual's ability to seek and receive the lifestyle and medical services they need.

Compounding transportation difficulties in each county is the current lack of rural transportation. Both Larimer and Weld counties discontinued their rural paratransit services. Many agencies have stepped in to help cover the gap, particularly the larger city transit systems, but for the most part rural residents struggle to secure needed services if they do not have reliable transportation.

Finding transportation outside urban areas and during the evening hours continues to be a struggle for those who have a disability, some senior populations and for low-income individuals and families. Bridging the transportation gap both geographically and financially is critical to ensuring autonomy and independence for all citizens in the North Front Range area.

Chapter 4 LOCAL AND STATE HUMAN SERVICE MOBILITY ISSUES

State issues affecting mobility coordination are the same for both counties, and when local issues are examined, there are marked differences between Larimer and Weld. However, after local issues are discussed on a county level, state issues impacting coordination are identified for the entire region.

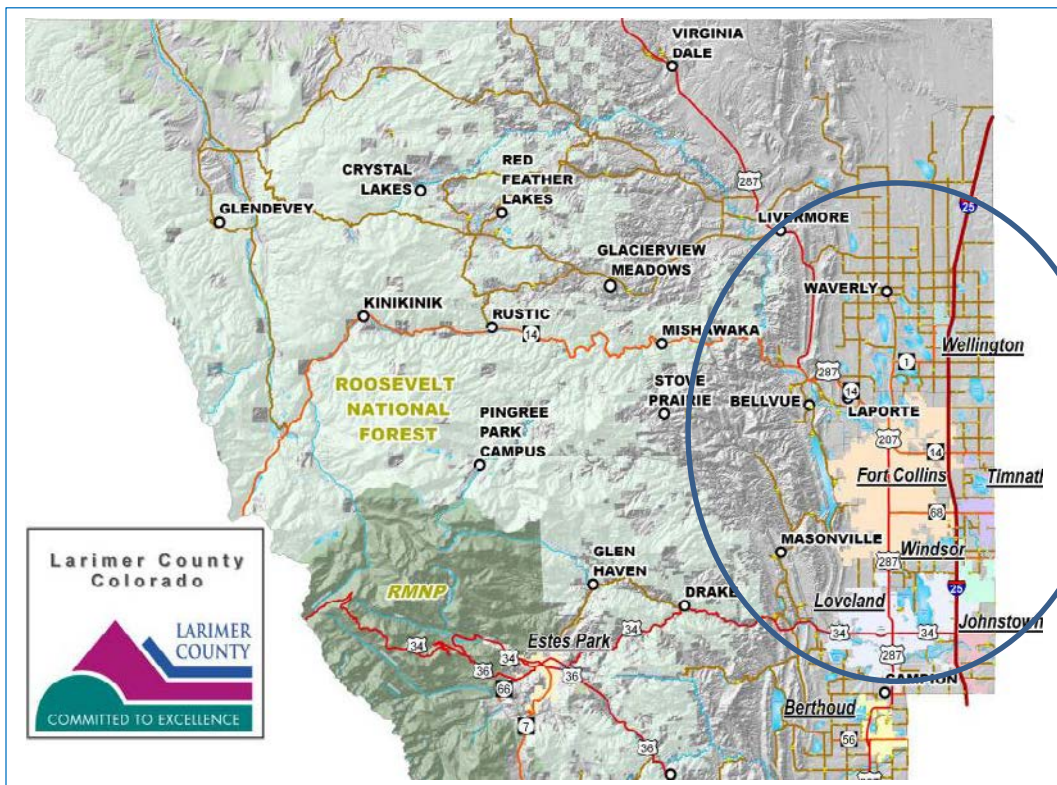
The needs and issues identified in this chapter have come from a combination of the Larimer and Weld Mobility Councils' input and work on coordination challenges over the last five years, as well as from public feedback generated through surveys and public events held by each council. Issues are identified as relating to the urban areas, rural areas or county wide.

Local Level Issues

Larimer County

Larimer County has one large urbanized area and limited rural population centers (Wellington, Estes Park and Red Feather Lakes) with different needs in each however; there is a commonality across much of the county. Local funding, improved employment and specialized transportation services on a regional basis being key issues.

The North Front Range Transit Vision Feasibility Study is under consideration in Larimer County with the "aim to identify the feasibility for an

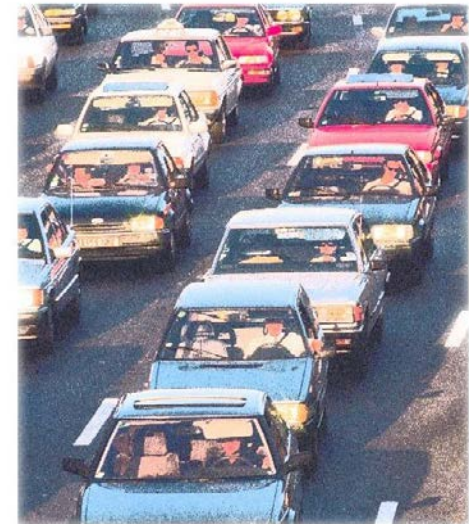


integrated regional transit governance and decision-making model for the North Front Range communities of Berthoud, Fort Collins, Larimer County, and Loveland, as well as a related funding and operational structure.”

The feasibility study included a public outreach process that focused on stakeholders, transit users, and the general public to develop a recommendation on a path forward for potential transit service integration in Larimer County with improved service and cost-effectiveness. The study underscores one of the primary obstacles to mobility coordination which is a coordinated and seamless transit system.

Urbanized Area Issues

- **Lack of funding** that can be used for operating public transit services, due in large part to FTA regulations and funding requirements in MAP-21 for a large (over 200,000 in population) urbanized area.
- **Fixed-route services in Fort Collins and Loveland are fiscally constrained** with many areas lacking coverage. Fort Collins has steadily expanded transit service since 2007, but employment trips are still a challenge for many low-income workers because of the route structure, frequency of service, and travel-time to access viable jobs.
- **Specialized transportation services within Fort Collins are limited** to the ADA-required service area. These services also are not available in the larger Fort Collins growth management area or in unincorporated Larimer County.
- **Many locations with transit service need accessibility improvements** Sidewalk connections and accessibility to bus stops can be problematic with maintenance issues such as snow removal, landscape trimming and uneven sidewalk and pavement surfaces, to name a few.



- **Broader coverage and more frequent service for fixed-routes may be needed** in urban areas to provide effective employment transportation. Night time and weekend service hours are limited and can have an impact on the amount of riders who use transit later in the day and/or on weekends.

Rural Area Issues

- There is no public transit service in the rural parts of Larimer County.
- A stable long-term provider and service plan is needed for North Larimer County, including Wellington and Laporte.
- There is a need to strengthen the capacity to handle federal funding for small rural providers in an integrated management system.

County-wide Issues

- A regional cross-jurisdictional approach is needed for rural and specialized services.
- A wide range of services are required to address human service transportation needs. This might include mileage reimbursements, vouchers or vehicle-sharing for low-income workers.
- Employment transportation needs extend beyond the fixed-route networks and cross into rural areas.
- Costs for transit services need to be shared by the participating agencies.
- Capacity needs to be developed for coordination among agencies.

Local Level Issues

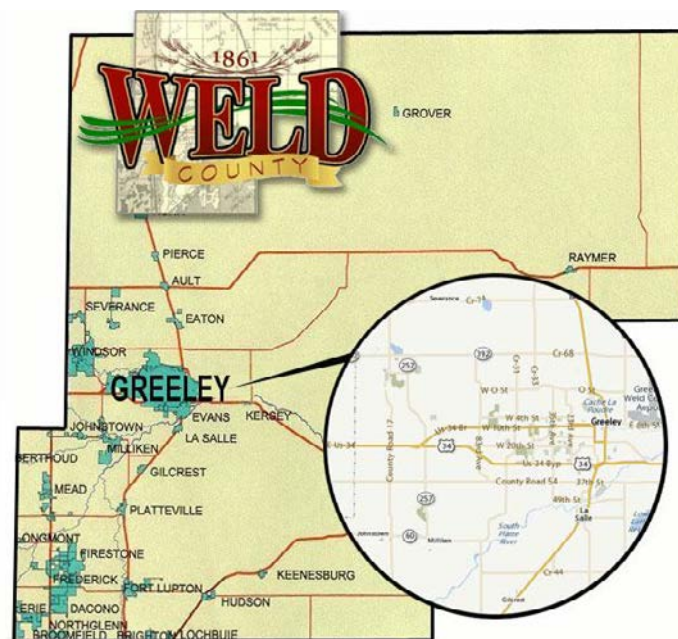
Weld County

The primary urban area in Weld County is the Greeley-Evans area. Multiple smaller communities such as LaSalle, Eaton, Severance, Ault and Kersey have their own community resources but often need to rely on services, particularly medical, in the Greeley-Evans area.

Growth that is shifting away from the downtown area and to new developments on the west side of town is also creating a demand for services and expanding the geographic area that needs to be served. Additionally, since the beginning of 2012, the large rural county area no longer has a demand-response transportation service, leaving many residents without transportation services.

Key issues in Weld County include:

- The size of the County, rapid growth of the region and changing demographics that includes a large portion of jobs becoming available to the south and west.
- The areas to which residents need to travel for services, particularly medical services vary, and include Greeley, Loveland, Fort Collins, Longmont, Boulder and Denver.
- Travel needs vary significantly depending on whether one is in the rural areas surrounding Greeley, the non-urbanized communities in the southwest corner of Weld County, in the DRCOG area of influence or within the City of Greeley.



Urbanized Area Issues

- **Service needs of new population and activity centers** With the population growth to the west, the fixed-route service needs to be expanded and re-oriented to serve the employment and medical sites near Promontory in west Greeley and I-25.
- **Changing paratransit needs** Paratransit trips are lengthier than before and access is needed to access what is becoming a more regional medical system. Several major medical providers have hospital systems in multiple locations that are on both the east and west side of I-25 and the care referral system often leaves clients with no way to navigate between related services.
- **Service needs on east side of Greeley** The majority of human service agencies are located on the east side of town. However, the overall trend is to move service from the east side of town to the west where more growth is occurring. Transportation service funding is constrained, thus creating a demand for services that is not being met.
- **Funding** is not adequate to meet the growing transit needs of the urbanized area. A limited amount of funding is available and as the Greeley area grows, it is essential that new options for financing transit services be explored. Public-private partnerships along with maximizing existing funding through utilization of shared resources are two options that can be explored through coordination efforts.
- **Extended Transportation Service** is needed to assist people with disabilities to gain access to employment, including late night and early morning shifts as well as for recreation trips.

Rural Issues

- **Southern Weld County** This rapidly developing portion of Weld County faces transportation requirements that are more characteristic of urban areas. This includes a need for employment transportation, primarily into Loveland, Longmont, and the Denver-Boulder metropolitan area.
- **Demand Response and Paratransit Service** Prior to January 2012, rural area residents had demand-response transportation service provided by Weld County. Rural residents that do not have a vehicle or are not able to drive no longer have affordable transportation options since rural area service was discontinued.
- **Local Transportation Needs** As the Tri-Town area population grows so do local transportation needs for all types of trips. Trips are becoming longer as the job market spreads throughout the region and medical services become more complex and regional in their services.
- **Senior Needs** Rural communities have long relied on volunteers to meet the local transit needs of senior citizens. While there is a Volunteer Driver Program (Senior Resource Services) that serves residents in a broad range of Weld County communities, more funding is needed to meet the growing demand.



County-wide Issues

- **Employment Transportation** There is a need for employment transportation, primarily into Fort Collins, Loveland, Longmont and the Denver – Boulder Metropolitan Area. Job seekers, including a large

- veterans population, are aware of and trying to adjust to the greater availability of jobs in Larimer, Boulder and the Denver Metro area.
- **Local Transportation Needs** Growing communities outside of the Greeley urbanized area have a need for local transit services, and communities of over 5,000 generally have a need for limited local transit services. However, there is no service to rural Weld areas and smaller towns that are outside the Greeley and Evans urban area.
- **Information Availability** There is a necessity for improved information about the availability of transit services. The North Front Range Riders Guide provides basic regional public transit information for agency staff (medical providers, human service agencies, 211 center, etc.) and the public.

An online database containing this information is in development in partnership with the Denver Regional Mobility and Access Council. The database will further assist staff to become knowledgeable about what is available how to use services, and what eligibility requirements are needed for their clients. Improved availability of information extends across the urban and rural communities.

- **Medicaid Transportation Requirements** The State rules for Non-emergency Medical Transportation do not provide adequately for people who need to access medical services from rural areas where no locally funded transportation services exist. The Colorado Medicaid reimbursement is not adequate to fully cover the cost of these services for the paratransit provider (GET).
- **Long Distance Transportation** Individuals with disabilities often need specialized transportation to medical services that may not be locally available. A diverse range of regional medical providers including University of Colorado Health, Banner, McKee and Kaiser Permanente often send clients to other areas for specialized services including but not limited to Longmont, the Denver Metro area and Cheyenne, WY. While some transit options exist including Yellow Cab and FLEX, which connects residents to Longmont and the RTD service area, these are not always an option based on financial constraints or geographic limitations.

Regional – Cross-County Issues

Perhaps the greatest need identified in all areas is to continue to develop “capacity” for coordination. The “capacity” can be measured by the ability of a wide range of people and agencies to identify, understand and work through the concerns involved with the coordination of human service transportation. While connections have been made further work is needed in the following areas:

- Developing knowledge among a wide range of agencies at the policy level and at the staff level;
- Developing knowledge on how specific activities would benefit stakeholders;
- Identifying barriers to specific activities and possible solutions;
- Developing institutional and financial structures to support coordinated and cost-effective service provision;
- Developing “capacity” for managing a federally funded transit program and devising an effective system for doing this. Federal funding is a key part of how Colorado funds transit and specialized transportation services. Knowledge of federal regulatory and recordkeeping requirements, as well as potential local matching funds, is a crucial to sustaining a coordinated specialized transit system.

Financing and decision making for determining what services are provided can evolve to be more regionally based, to consider the needs of a broader market group, and to consider cost trade-offs between providing demand -response services operated through separate networks and a unified transit network that serves many market groups.

State Level Issues

This section moves from specific issues in Larimer and Weld to look at broader issues that impact coordination in the region. The State financing and regulatory network affects the choices the region has for funding, delivering, and coordinating transit networks.

Major challenges facing the region involve local funding requirements for matching Federal Transit Administration funds, how Medicaid Non-Emergency Medical Transportation is funded and provided in Colorado, and funding for programs serving people with developmental disabilities – another Medicaid program.

This section reviews the various programs with an eye towards identifying if the State regulations and funding are supportive of creating strong and well-coordinated transportation networks. Most of the Colorado regulatory structure for specific programs is built on the federal program foundation.

MAP-21 legislation has provided some new opportunities for flexibility and it will be useful for Colorado to evaluate how its structures can be modified to support coordination.

As the region works to coordinate transportation services it will be important to weigh in on issues at the State level to encourage changes that will support more effective uses of Colorado's transportation resources.

Table 4-1 on the following page provides summary information on the degree to which different programs provide benefits or challenges to coordination in Colorado. Full descriptions for each of the major programs follow table 4-1.



Table 4-1: Colorado State Level Coordinated Transportation - Challenges and Benefits

Program Area	Challenges	Benefits
General Public Transportation	- No State Matching Funds	- Provides for Regional Transportation Authorities and County Mass Transit Districts
Medicaid Transportation	<ul style="list-style-type: none"> - Transfers costs to local governments through reimbursement process; - Does not claim all federal funds - Recordkeeping is extensive 	
Developmental Disabilities	<ul style="list-style-type: none"> - Many regulations require CCBs to use public services when practical, transferring costs to local entities. - Separate fleets are maintained for remaining services in order to meet client needs. 	
Public Utilities Commission	- Policies don't encourage variety of private providers, especially those crossing jurisdictional lines.	- Provides for "people service orgs" across jurisdictions w/out PUC authority.
Area Agencies on Aging	Councils on Aging don't have adequate funding to pay for the actual costs of transportation. Remaining costs are transferred to localities.	- Most Council on Aging put high level of resources into transportation. Many encourage shared services.
School Pupil Transportation	State laws prohibit many types of coordination; school districts are also short on vehicles and money. DOT and DOE regulations conflict.	
Work Force Centers	Utilize public transit for their clients, but do not fund the full trip cost. Most recognize transit services aren't widely available & cars are necessary.	

General Public Transportation

Colorado, as a strong local government state, has not historically funded public transit services at the local level. It is most common for states to provide matching funds for the available Federal Transportation Administration funds, however, in Colorado, the responsibility for matching these funds belongs to the local governments.

In rural areas, there is a need for medical trips that cross numerous local and regional boundaries. A cohesive way of serving these medical trips is necessary to address some Medicaid issues revolving around coordination, as well as the needs of residents who may access VA services or who may look to Older Americans Act programs to meet their medical transportation needs.

By relying on local entities for funding of transit services, Colorado shifts the costs of programs from the federal and state levels to local governments. Local governments providing fixed-route transit are also obligated to provide ADA paratransit services. Both community-centered boards and Medicaid programs take advantage of the fixed-route and paratransit services operated by local entities. Their clients ride for the cost of the cash fare with local governments subsidizing the remaining cost of these trips. This has several negative consequences for local governments and their residents including:

- Financial hardship for local governments.
- Local governments may end up limiting transportation services in terms of coverage and only provide the paratransit services they are legally required to operate based on the ADA – not the services that make the most sense for residents or from the standpoint of coordination.
- A lack of trust between local governments and human service agencies as other programs shift financial responsibility to local governments, and therefore not paying their fair share of program costs.
- The state loses millions of dollars annually in federal reimbursement for the Medicaid program as these local funds do not provide eligible match for the available federal dollars.

One of the challenges is that the system is entrenched at both the State and local levels. Those local entities taxing themselves for transportation services – the Denver metropolitan counties that are included in RTD, the various areas that have established Regional Transportation Authorities (El Paso County and a small portion of Teller, Gunnison, and the areas included in Roaring Fork Transportation Authority), and the counties that have established Mass Transit Districts (Summit and Eagle) are invested in the current system. If the State were to support operating expenses it would likely need to be overlaid on the existing system.

Medicaid

On a national basis NEMT is the largest human service transportation program, spending approximately \$2 billion annually^[1]. The focus of this section is Non-Emergency Medical Transportation (NEMT), part of Title XIX of the Social Security Act (Medicaid). It is an entitlement program so, as with ADA paratransit service, there are no limits on trips for legitimate service needs however budget constraints limit the availability of service. Unlike the ADA, the program is funded with the Federal and State governments sharing financial responsibility. The program is state run, so Colorado has significant choice in how the program is operated.

In Colorado, effective January 1, 2012 First Transit became the NEMT contractor for CDOT in nine counties including Arapahoe, Adams, Boulder, Broomfield, Denver, Douglas, Jefferson, Larimer and Weld.

As of the publication date of this Plan, multiple difficulties exist with First Transit's service delivery; long wait times (20 – 45 minutes) to schedule a ride have posed problems for clients; and, several key staff changes have resulted in some confusion for transit providers in communicating their service needs.

^[1] (TLPA)Taxicab, Limousine and Paratransit Association - DRAFT Medicaid Transportation Paper - 2009.

The authors of *TCRP Synthesis 65: Transit Agency Participation in Medicaid Programs* note that “The importance of Medicaid’s NEMT program in any coordination effort cannot be stressed enough.” Yet cost sharing or the reimbursement process is not coordinated or equitable for transit providers as Medicaid pays only the cash fare for these rides, not the total cost.

With fixed-route transit services these trips can often be absorbed using existing capacity and result in no additional cost. However, with paratransit services, additional capacity is required for almost all trips and the fares only cover a small portion of the operating cost – an average of less than 5%.

At a cost of approximately \$35 for a trip and a transit fare of \$2.50, local governments are subsidizing on average \$32.50 for every trip taken. This effectively transfers the majority of cost of the Medicaid transportation program in urbanized areas where ADA paratransit services are provided from Federal and State budgets to local budgets.

There has been a common misperception that the Medicaid mandate to use the lowest cost alternative means that the State Medicaid agency can only pay the cash fare for transit services. However, it is permissible for Medicaid programs to negotiate a rate higher than the cash fare for the general public. First Transit, the Medicaid Transportation broker for many metro area counties does pay higher rates to public providers – Transfort receives such payments.

Medicaid is a complex insurance program, and decision makers at the Colorado Department of Health Care Policy and Financing need to stay on top of the intricacies of the program. The provision of transportation services, particularly the demand responsive services that many Medicaid recipients require, is likewise one of the more complex services provided by the public sector.



This is especially true when these services are operated as part of a brokerage system that serves clients funded through a variety of programs and uses a wide range of alternatives to transport clients to provide low-cost yet effective service.

It is up to Colorado to determine how best to use the flexibility that does exist in the Medicaid program to restructure the Colorado Medicaid program in a manner that supports mobility at reasonable costs, leverages the available Federal funds, and does not impose undue burdens on local governments.

Services for People with Developmental Disabilities

Services for people with developmental disabilities are provided on a service area basis, with Community Centered Boards (CCBs) holding primary responsibility for guiding the programs serving this population. For people under the age of 21, the Department of Education and local school districts also share some responsibility for service provision.

Budget constraints in these programs generally create long wait lists for services. Most CCBs have their own transportation services client mobility which often extends well beyond that of public transit providers due to the need to have transportation available for both daily needs and emergencies.

As a Medicaid funded program, the system is a complex one. Funding is most often limited to one round-trip per day to training or employment, leaving funding for other trips needed as part of daily living on the provider or individual. Recent changes include a switch to billing on a fee-for-service basis which was implemented as a means to contain costs; however, that benefit has not yet been realized.

Financial resources for services and Medicaid funding caps are also significant issues for CCB's and many counties have client waiting lists. A number of counties (including Larimer) have passed mill levy's to support agencies that serve individuals with developmental disabilities, augmenting the state funding.

A goal of the services is to integrate individuals into the daily life of communities as much as possible and their travel needs reflect diverse origins and destinations as they travel to school, work, shopping, services and recreation.

Clients with developmental disabilities are encouraged to ride public transit because it serves the goals for accessing services whenever possible, integrating individuals into the community and meets Federal and State requirements.

As with Medicaid NEMT transportation, when CCB clients use generic transportation, the cost of funding the trip gets transferred to local governments for a human service program that is otherwise a Federal and State responsibility. As with the NEMT program, this results in financial hardships, a lack of trust and the decision by some local governments to limit their provision of public transit services.

Public Utilities Commission

Local governmental jurisdictions have the right to transport passengers, for a fare, within their jurisdictional boundaries. To travel between jurisdictions, either Public Utilities Commission (PUC) authority or an intergovernmental agreement with the other jurisdictions is required. Colorado law also allows "People Service Organizations" to transport passengers across jurisdictional lines. These are generally non-profit organizations such as Community Centered Boards serving individuals with developmental disabilities and their funding comes primarily from public entities and passenger donations.

Once an entity has a PUC Authority, they have the right to file an "intervention" when a request for new authority is filed in the same area. An intervention hearing if they believe that allowing a new authority will have an impact on their existing business. Small providers may be reluctant to engage in what can be a costly process (an intervention hearing can involve an attorney to present the case) for the limited returns expected by carrying, for example, Medicaid transportation clients.

As a result, most specialized services are provided by governmental organizations or private non-profit organizations that are funded by government programs or private foundations. This structure does not support the development of private for-profit firms that would both provide transportation services for a fee to the general public and contract with governmental or non-profit programs as one of several providers.

Area Agencies on Aging

These programs are a bright spot in the transportation coordination picture. In both urban and rural areas, the Area Agencies on Aging have made transportation a priority and are often active participants in funding services that leverage Older Americans Act funds, Federal Transit Administration funds, and local funds to meet local (and sometimes regional) travel needs of people who are age 60 and above.

In Larimer County, the Area Agency on Aging provides limited funding for several senior center and rural transit programs. However, funding for senior transportation must compete with funding for other critical needs such as nutrition. A challenge is that the magnitude of needs is far greater than available funding and is rapidly changing due to the exponential growth of the senior population.

School Pupil Transportation



School districts provide transportation for students living outside a “walk distance” as established by the local district and for students with disabilities. It is common practice for Boards of Cooperative Educational Services, rather than individual districts, to provide transportation and other services to students with disabilities.

The state also plays a significant role in defining how school pupil transportation services are provided, including adopting minimum standards for vehicles legislation, driver training, operation of school pupil transportation services, and annual inspections & preventative maintenance requirements.

It makes sense in many areas to maintain separate public and school transportation systems. School bus vehicles are special purpose and the cost of purchasing and operating them is far less than standard transit vehicles. They are built to transport children in a safe manner and are not intended for adult transport. Most school vehicles have steep steps, narrow aisles and don't have wheelchair lifts.

New “multipurpose” buses have been developed that could serve students and adult populations but some obstacles remain. Additionally, current Colorado legislation does not allow such coordination. However, some transit providers are working with their local school districts to coordinate services.

In Larimer County, both the school districts and Transfort have participated in the effort to improve youth mobility. There may be opportunities to coordinate or work together in the provision of transportation for students who attend after-school programs.

Work Force Centers

Work Force Centers have funds that can be used for job access for their clients, however, these funds typically only cover partial trip costs and provide funding for a limited time. There are challenges to enabling employment and labor force programs to work effectively with transit programs. Work Force programs are client specific and tied to specific clients. Transit services function more like basic infrastructure. Once in place, a wide variety of passengers use the service, and there is no documentation tying a particular client (or their funding eligibility) to the service.

Another barrier has to do with boundaries and decision-making structures. The Work Force Centers have clients throughout the counties they serve and many clients need to travel from rural to urban areas for jobs, education or other services. The decision-making structure for transit is based on city limits and local funding. From a political perspective, the cities that provide matching funds for transit services have every reason to keep the services within their city limits.

Work Force Centers require services that meet the travel needs of a wide range of clients, oriented to mobility rather than a single mode. While transit services might be the best choice for some workers, gas vouchers or a carpool might be better suited to other clients.

Conclusion

Analysis of local transit plans and discussion in stakeholder meetings points to significant need for improved transportation services in the urbanized areas and a need for mobility from rural to urbanized areas. There is a consensus that a county-level approach should be taken initially while building networks between human service agencies and transit providers.

Longer term, it will be important to have the ability to move to a regional approach or at least serve trips seamlessly across county boundaries.

Because of the importance of mobility to human service agencies, it will be important to develop a broad based approach that includes transit services, but also addresses the travel needs of individuals needing to travel by other means – from volunteer drivers to mileage reimbursement.

- In Weld County, the emphasis is on information and training, developing employment transportation options and addressing policy issues with the State.
- In Larimer County, the emphasis is on building relationships between human service agencies and public transit providers, as well as between public agencies providing transit services.

A stable and adequate funding source for public transit is an issue throughout the region. The Fort Collins-Loveland Transportation Management Area has already had to contend with the restrictions of federal funding once the urbanized area reached a population of 200,000. In addition, services in rural areas are limited by funding constraints.

It will be important to develop a broad based approach to human services mobility that not only includes public transit but also other travel means such as volunteer drivers, multi-agency voucher programs and mileage reimbursements.

The county level is the logical starting point since so many human services are delivered on a county-basis and because the needs in Larimer and Weld County are significantly different. It is also recommended that there be a strong effort to work on underlying State level issues.

While the NFRMPO only covers the urbanized areas of Larimer and northern Weld County, for the purposes of transportation coordination the area extends into the rural portions of each county, with a separate emphasis for the Greeley urbanized area and surrounding Weld County and the Fort Collins-Loveland TMA and surrounding Larimer County.

Chapter 5 Planning Issues for Federal Transit Administration Programs

Introduction

Chapter 5 focuses on Federal Transit Administration (FTA) programs that are key to funding a coordinated transportation network. Preparation of this Public Transit/Human Services Coordination Plan is one requirement for accessing these funds and FTA planning requirements provide an important part of the framework for developing an action plan. The FTA views the programs it funds as the “public transit” in the Public Transit/Human Services Coordination Plan. As such, all FTA-funded programs are expected to participate in the coordination efforts.

With the approval of MAP-21 both section 5316 JARC/Job Access Reverse Commute and section 5317 New Freedom were transformed from being distinct funding programs to becoming eligible activities in other FTA funding pools. JARC-type projects are now eligible for funding under rural section 5311 and urban section 5307. New Freedom-type projects will be allowable under section 5310.

This plan focuses on these programs which most directly impact coordination efforts:

- **Section 5307: Urbanized Area Formula Program**
- **Section 5310: Elderly Individuals and Individuals with Disabilities**
- **Section 5311: Rural Transit Assistance Program**

The requirements for other FTA programs funding general public transit (Section 5307 in the urban area and Section 5311 in the rural area) are not addressed in detail, but they are considered the “public transit” in the “Coordinated Public Transit/Human Service Transportation Plan.”

This chapter begins with an overview of the programs, and then describes the requirements and recommendations in more detail for each area.

Section 5307: Urbanized Area Formula Grant

The largest of FTA's grant programs, this program provides grants to urbanized areas to support public transportation. Funding is distributed by a formula that takes into account the population and population density of an area, and the vehicle revenue miles and passenger miles generated by the local transit service agencies. FTA 5307 funds do not typically fund mobility management activities; however, MAP-21 consolidated the FTA 5316 (JARC) program with the FTA 5307 program with the intention to provide 25% of the available funding for services that would have been funded through the original JARC program. The focus of JARC activities was to “improve access to transportation services to employment & employment related activities for welfare recipients and eligible low-income individuals” FTA 5307 funds comprise a large portion of operating funds for the transit agencies in the TMA.

Section 5310: Elderly Individuals and Individuals with Disabilities

This program focuses on funding capital projects for programs serving the elderly and people with disabilities. With MAP-21 the allocation was changed from a statewide allocation to a formula-based allocation for the Fort Collins TMA. Both counties are eligible for FTA 5310 funds however, the funding comes from the City of Fort Collins for the entities located within the TMA or from CDOT in the Greeley-Evans area. The Larimer and Weld County regions has typically received about \$200,000 each year for vehicle replacements, and with MAP-21 the funding amounts will increase by approximately 30%.

The FTA 5310 program provides funding to increase the mobility of seniors and persons with disabilities. Funds are apportioned based on each state's share of the targeted populations and are now apportioned to states (for all areas under 200,000) and large urbanized areas (over 200,000).

MAP-21 designates 55% of FTA 5310 funds for capital and 45% for services. The variety of projects that are eligible for funding covers a broad spectrum from purchasing vans to providing targeted transit services to public education regarding available services.

Section 5311: Non-Urbanized Area Formula Program

This program provides capital, planning, and operating assistance to support public transportation in rural areas, defined as areas with fewer than 50,000 residents. Funding is based on a formula that takes into account land area, population, and transit service.

General Program Requirements

Each of these programs supports efforts to coordinate transportation networks and to move towards mobility management by permitting expenses such as:

- Mobility management and coordination programs;
- Supporting local coordination policy bodies; and,
- Developing and operating one-stop transportation call centers to coordinate information on travel modes and manage eligibility requirements for customers.

Mobility Management is treated as a capital item and funded at an 80% Federal/20% Local matching rate. An important change in the matching requirements is Federal funds (from other than FTA programs) can be used in lieu of local match. In the FTA 5316 and 5317 programs, all of the local match may be from eligible sources of federal funds.

Small Urban and Rural Area Programs

The Greeley/Evans Urbanized area and the rural portions of Weld and Larimer counties fall into this category. CDOT administers the FTA 5310 & 5311 funding that is allocated to these areas. Strong competition for these funds is anticipated as projects in rural Weld and Larimer counties have to compete with projects from rural regions across the state. Annual appropriations for the two funding programs in FY 2013 are anticipated to be \$980,000 for FTA 5310 and \$3,000,000 for FTA 5311.

Projects for Greeley, a small urban area, compete with proposals from the other small urban areas such as Pueblo, Boulder, Louisville/Lafayette, Longmont and Grand Junction. CDOT evaluation criteria for these programs are listed in the table below.

Large Urban Area Program – TMA

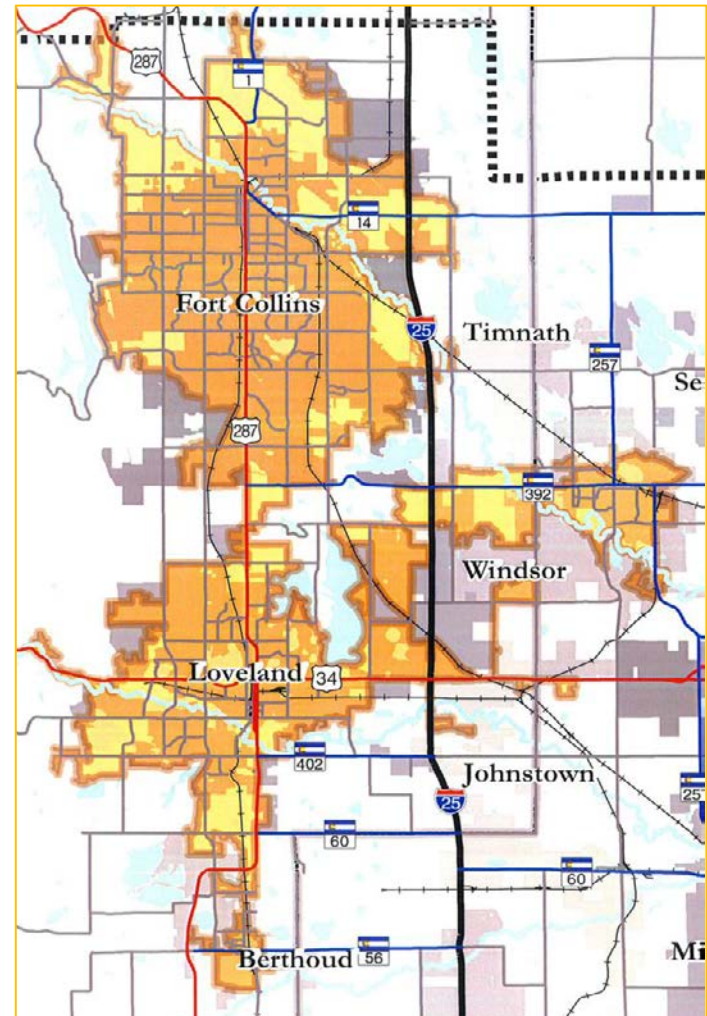
The Fort Collins/Loveland /Berthoud Transportation Management Area (TMA), as a large urbanized area, follows the guidelines in this section. The TMA applies directly to the FTA for the 5307 and 5310 programs.

The TMA must identify both a lead planning agency and designated recipient (DR) to carry out these programs. The lead Planning Agency is the North Front Range MPO and the City of Fort Collins is the DR for FTA 5307 and FTA 5310 funds. The table below shows the amounts projected to be available in FY 2013 and FY 2014 in the TMA area.

Allocation of 5307 & 5310 in TMA	FFY 2013*	FFY 2014*
5307	\$1,900,000	\$2,100,000
5310	\$310,000	\$318,000

* Estimated per each year.

Fort Collins TMA



Lead Planning Agency

The NFRMPO is responsible for comprehensive, coordinated and continual transportation planning in the TMA. One of the organization's goals is: "To foster regional coordination, cooperation and transportation system continuity".

This plan recommends a regional approach to specialized and rural transit services, with the NFRMPO incubating this function until there is another agency to which the function can be transferred.

The Lead Planning Agency undertakes the following for the Coordinated Plan:

- Prepares the Coordinated Plan that
 - Identifies services
 - Assesses needs
 - Identifies goals and strategies
 - Sets priorities for funding
- Identifies how the coordinated plan will be integrated into the regional planning process and implemented.
- Selects project evaluation criteria

Project Evaluation Criteria

To facilitate the evaluation of projects that cross urban and rural boundaries, the NFRMPO has adopted the same Project Evaluation Criteria that CDOT uses for similar programs, as listed in the table on the next page.

Funding Evaluation Criteria: Seniors, Low-Income Employment Transportation and ADA Enhancements

Criteria	Description
Collaboration:	<ul style="list-style-type: none"> - Was the project developed based on collaboration with others in the community? - Did the project grow out of a locally derived coordination plan? - Have agencies serving low-income riders such as the Work Force Center and area employers been consulted? - Have agencies that serve the disabled been consulted? - Are there sufficient local matching funds available?
Coordination:	<ul style="list-style-type: none"> - How will the project coordinate with other organizations in the actual delivery of services? - Does the project use existing resources such as vehicles, dispatching, bus facilities, etc.? - Has applicant developed contracts or agreements with other cooperating agencies?
Identification of Need:	<ul style="list-style-type: none"> - Has the need been specified? - Is the financial need justified? - Have the existing services been identified as inadequate and does the project clearly meet these identified needs?
Effectiveness of Strategy:	<ul style="list-style-type: none"> - How likely is it that the program will be a success? - To what degree does the project support the goals? - Is it likely to serve a waiting clientele?

The Mobility Councils participated in the selection process with the FTA 5316 and 5317 funding, however MAP-21 legislation has changed the process. How the Mobility Councils will participate in the consolidated FTA 5307 and 5310 selection process has yet to be determined. The Coordinated Plan remains the central document for determining which projects are selected for FTA 5316 and 5317-type of project activities.

Summary

There are significant differences in the travel needs of residents of the urbanized and rural areas in the North Front Range. However, the critical factor is the need for mobility between rural and urbanized areas.

As such, a regional approach to planning and development of mobility coordination projects is essential. The recommendation that the NFRMPO continue to take an active role as the lead planning agency, in cooperation with the City of Fort Collins as the designated recipient for the Fort Collins TMA and the City of Greeley as the small urban provider, recognizes the importance of developing a regional approach to administering these program

Chapter 6 Goals and Strategies

Introduction

The goals and strategies identified in Chapter 6 are intertwined with each county's transit services.

In Larimer County, Fort Collins, Loveland and Berthoud are oriented to their respective cities as the primary funding source for operations.

In Weld County, Greeley-Evans Transit (GET) serves the more populated areas of the two communities but no public transit service exists outside the Greeley-Evans urbanized area.

This creates a gap in transit services between population and service centers, leaving residents of smaller communities and rural county areas faced with finding transportation services that enables them to live independently. The FLEX service on the Highway 287 corridor, which is jointly funded by Fort Collins, Loveland, Berthoud, City of Longmont and Boulder County, is the only transit service in the region that connects separate communities.

There are also significant needs to connect residents of outlying areas to employment or other services in cities, particularly along the I-25 corridor. Specialized transportation services among residents living within and outside city limits or urban growth areas are requiring more assistance than the existing paratransit systems can provide.

Implementing the goals and strategies identified for each county will help to address issues and enhance existing services while promoting regional needs as identified in Chapters 1 - 5.



This chapter also looks back at the success and challenges of the 2007 Coordinated Plan to provide an understanding of the foundational work that has occurred over the last five years in each county and at the regional level.

In addition, Chapter 6 outlines the fundamental steps needed to make progress towards coordination between transit and human service agencies in each county and at the regional level.

2007 Plan Implementation – Successes and Challenges

Successes

There have been several accomplishments since the NFRMPO Planning Council July 2007 approval of the Coordinated Plan. Specifically, success with several goals and strategies identified in the plan has been achieved including;

- Implementation of Mobility Councils in each county that are working to build capacity for coordination. The Larimer County Mobility Council currently has 16 member organizations and the Weld County Mobility Council has 10 member organizations. Each council meets monthly to work on program goals.
- Hired a Mobility Coordinator to support the activities of the mobility councils which include outreach and program and project work related to the goals outlined in the Coordinated Plan. This includes expansion of the program to include a part-time assistant.
- Each council has established advocacy roles by taking positions on local, regional and state issues related to mobility coordination.
- Participated in community outreach events and surveys to gain a better understanding of the conditions for human service clients. Each council has hosted larger public events that garnered valuable input regarding coordination priorities in each county.
- The focus of the outreach was different in each county and the knowledge gained helped to shape the projects that have been pursued.

- Implemented a multi-agency travel training program to enable riders to have greater transportation autonomy while also working to move funding for more expensive paratransit services to less costly fixed-route alternatives.
- Development of the NFRMPO Riders Guide which provides basic transit/transportation information of public transportation services in the North Front Range area. Over 12,000 copies of the guide have been distributed and demand for the guide is increasing on a monthly basis. The guide is also available online at www.nfrmpo.org

Challenges

The challenges faced by the mobility councils in working towards greater coordination of services have primarily stemmed from financial limitations and concerns about funding sustainability.

Examples include;

- Work towards forming a one-call transit center which would be designed to enable riders and human service agencies to arrange transit services in a more streamlined approach. The one-call center concept is a fundamental tool for achieving coordination goals and technical support at the national level was provided to help realize this important goal.

In Larimer County, a one-call center was pursued through sub-committee work and research. A one-year action plan was developed and included basic details of the phases of research, planning, public outreach, and recommendation which were scheduled to be completed by the end of 2010.

After multiple meetings of the LCMC sub-committee, the project was put on hold for two primary reasons; the first was a lack of sustainable operational funding for the center and the second was a lack of consensus as to what type of call center it should be.

A regional transit discussion is currently underway in Larimer County regarding the best way to achieve operational efficiency and service delivery. The culmination of these discussions may provide insight to the council as to how to proceed with a call center type project.

- Advocacy has been constrained due to the governance structure of the NFRMPO which manages the mobility management program. NFRMPO staff works with 15 different local governments and maintaining autonomy from the local decision-making process is a factor in advocacy efforts. Both mobility councils have opted, as a group of representatives of different agencies, to take positions that reflect their respective organizational perspectives as well as those of their mobility council.
- Funding constraints – *Often the primary issue, the funding constraints that each member organization faces can make or break implementation of the programs and projects.*

Establishing trust, though time consuming, is instrumental to sharing agency time and resources, and pursuing jointly funded projects which is critical for achieving many of the Coordinated Plan goals. Additionally, new regulations in MAP-21 as well as the shorter two-year timeframe have created uncertainty regarding funding stability.

Summary

The successes and challenges of the past five years have provided the mobility councils with the knowledge of which strategies have helped to realize the coordination goals that were implemented, and which strategies may require more foundational work to accomplish the Coordinated Plan goals.

As a result, the goals and strategies each council has developed for the next five years are based on experience and the understanding of where best to invest time and energy towards improving coordination of transportation services.



The goals and strategies for each county are outlined on the following pages and reflect the experience each council has had over the last five years.

Specifically, all the goals underscore the primary purpose of working to ensure that every individual in the Larimer and Weld County area of the North Front Range MPO has the transportation services they need to be self-sufficient and to live independently.

Coordination Goals

Larimer County

The 2007 Coordinated Plan established five primary goals of the Larimer County Mobility Council (LCMC) which remain priorities.

1. Continue to foster the coordinated efforts of the LCMC which consists of human service agencies, a variety of jurisdictions, and transit providers, representing the entire County.

An important focus of the LCMC is to build capacity for coordination.

- This includes activities on a management level and on a service level that increase mobility options on a county-wide basis. The emphasis is to educate the public on the mobility options needed for human services transportation and to address travel needs that cross jurisdictional lines.

Specific activities include a range of options such as:

- Joint decision making process supporting regional specialized transportation services.
- Establishing agreements between providers, assure costs are fully covered by the responsible agencies, and similar coordination activities.
- Oversee mobility coordination activities, working with existing agencies to provide a range of mobility options that can be used throughout Larimer County.

- Participate in selection process for FTA 5310 Mobility Management projects.
- Identify how existing resources can be leveraged to improve services within a framework in which agencies pay for the fully allocated costs of service.

2. Garner support for policy level changes that would improve mobility options.

Work to build stable and adequate funding for fixed-route transit, demand response transit and other mobility options.

Funding availability affects urban and rural mobility services. Securing adequate funding will be important to achieving goals related to improving mobility for special populations – those needing specialized transportation services or access to fixed-route services for employment or other activities.

3. Build capacity for coordination through activities on a management level and on a service level, with the goal of increasing mobility options on a regional basis.

4. Improve regional mobility among people requiring specialized transportation services, whether it is for dialysis or other medical treatments, employment, childcare or activities of daily living. Services are needed that cross jurisdictional boundaries and a range of mobility options are needed to address these human service transportation needs.

5. Improve employment transportation for low-income workers, especially from areas that do not have transit services. In addition, services that are more direct with shorter travel times are needed within Fort Collins. Areas where additional services are needed include Wellington to Fort Collins, services to employers in the I-25 corridor and on Hwy 287 between Loveland and Longmont.

Weld County

The four primary goals of the Weld County Mobility Council (WCMC) stem from the core challenge of not having enough transportation service to adequately cover the large geographic area in Weld County.

The goals have shifted slightly since 2007 to reflect the on-going challenges the large and diverse geographic areas of Weld County pose to transportation providers. Additionally, the goals have been greatly impacted by the loss of transit service in rural Weld County and between Greeley & the Loveland area around I-25 & Hwy 34 in Larimer County.

1. **Improve employment transportation and access.** This is especially true for trips that cross the county. Service from Greeley to the employment base around I-25 and Highway 34 is one area. Another is to the Denver area along SH85 that runs through the east side of Greeley. Service from many small towns into either Greeley or other major employment centers in Adams or Boulder counties is another gap in service. This could be accomplished through peak hour transit services, car sharing, or van pools, depending on the area and needs for services.

Areas where there are significant transportation needs include:

- Fort Lupton, Erie, and other southern towns
- From Greeley west along Hwy 34 to the I-25 corridor
- Johnstown/Milliken/Windsor service for employment and other transit needs

2. **Improve Medical Transportation Services.** Transportation to medical services in the Greeley area for urban residents that live outside the transit service area and for rural residents in the surrounding Weld County area is a necessity. Medical transportation is often complicated by the immediacy of the medical attention needed, short notice to providers and requests outside of normal service hours. Lack of transportation services for needed medical services can create health issues for those that are not able to seek regular care.

Additionally, as the medical community becomes more regional in nature, medical trips often require the patient to go between communities for care within their providers system. Transportation between medical centers or clusters of medical providers is needed to resolve many health and accessibility issues that Weld County residents face.



3. **Education and awareness of transportation services.** This two-fold goal is intended to inform residents of the existing services that help them with their employment, medical and daily living related transportation needs. Additionally, it underscores needed transportation services and guides the council in pursuing strategies such as public/private partnerships, agency coordination and collaborative transportation services to populations in need.
4. **Identify funding and develop steady funding resources.** Securing adequate local matching funds for projects and programs, particularly in the face of dwindling federal funds for human service programs, and can limit service provision. Creating awareness of the benefits of increased services and need to support the services through increased local funding for transportation is critical.

Coordination Strategies

Program and Projects Supporting Program Objectives

The programs and projects of the mobility councils represent a mix of strategies that can be specific to one of the counties or more regional in scope.

The following list combines the strategies of both councils and includes current as well as future types of programs and projects each of which focuses on an identified objective.

Each objective is the backbone of the individual strategies and keeps each strategy focused on achieving the larger Coordinated Plan goals.

However, specific actions such as project details, program direction and timelines may change to reflect larger community issues or direction, transit and human service agency participation and funding realities.

All of the strategies, whether county specific or more regional in nature, can be combined to form a larger scope of work to guide the region in achieving the goals identified in the Plan.



- **Mobility Coordinator/Mobility Coordination Program Staff**

Objective – To support the effort of the mobility councils and work on the goals and strategies of the Coordinated Plan.

Strategy – Seek funding each year for a half-time mobility manager and part-time mobility coordination assistant under the FTA Section 5310 program. Total annual expenses are anticipated to be \$40,000 for a half-time position.

Outcome – On-going mobility council and program support.

- **Employment Transportation**

Objective – Continued support of transit services that serve areas with high concentrations of low-income employment areas.

Strategy – Council support or direct agency work on projects that address employment transportation for low-income individuals including fixed-route transit service, programs supporting carpools, community vehicles and other types of transit services.

Additionally, a planning project to identify transportation options for low-income workers who need to access jobs would be beneficial. This would include a Job Access group that would include job placement professionals, employers and agencies serving low-income workers who would identify a range of options and strategies to improve mobility among this population.

Outcome – Continued transit services that primarily benefit employment areas that have a high ratio of low income employment positions.

- **Improved Accessibility of Fixed-route Bus Stops and Signage**

Objective – Improvements that make the stops more accessible to seniors or people with disabilities.

Strategy – On-going support of funding for transit agencies and other entities that would undertake bus stop accessibility projects. Matching funds would come from the communities where the bus stops are located. This might include various cement pads, connections to existing sidewalks, enhanced shelters, additional schedule information, new signage and other improvements.

Outcome – Fully accessible bus stops and signage and/or facilities.

- **Communication Equipment for Volunteer or Non-profit organizations**

Objective – Procurement of radios, cell phones or other equipment that enhance communication between dispatch services and organization volunteers or staff.

Strategy – Seek funding for initial capital expenses and/or ongoing operating costs of potential project costs. Local matching funds are needed for any equipment acquisition.

Outcome – Enhanced communication equipment and/or administrative support that help organizations providing alternative transit services.

- **Transit to Transit Connectivity**

Objective – Increase connectivity between existing transit services.

Strategy – Support funding for transit service that connects communities and helps to eliminate gaps in service. Examples include transit agency connections between Fort Collins and Loveland, Greeley and Loveland and to destinations to the south. Currently, the success of the FLEX commuter service which connects Fort Collins, Loveland, Berthoud and Longmont could be used as a template for future transit service connections.

Outcome – Increased transit service between communities within the North Front Range area and to destinations to the south including Longmont and the Denver Metro area.

- **Transit Connectivity to Areas Currently without Transit Services.**

Objective – Increase connectivity to communities outside the North Front Range urban area boundaries.

Strategy – Support funding for transit service that connects communities and helps to eliminate gaps in service. An example would be to connect senior center shuttles from communities such as Wellington, Windsor and Johnstown to transit services that go to the larger urban areas.

Outcome – Increased transit service between communities within the North Front Range area and foster connections with residents that have limited transportation options.

- **Expansion of Fixed-route Service**

Objective – Help to expand fixed-route services.

Strategy – Support funding for transit service that increases the frequency of bus service on existing routes and/or provides expansion of service area boundaries or.

Outcome – Increased fixed-route services in areas that have a demonstrated need for additional fixed-route services.

- **Additional Service Hours for Fixed-route & Paratransit Service**

Objective – Help to eliminate the service gap that exists when fixed-route and paratransit stops providing service in the evening and on weekends.

Strategy – Support funding for transit service that operates before or after fixed-route service hours. Extended service could include options must be public in nature and service for those that might normally use paratransit services.

Outcome – Extended hours of operation for paratransit service that serves individuals who have transportation needs that fall outside of fixed-route transportation operating hours.

- **Multi-Agency Coordinated Travel Training Program**

Objective – To expand travel training from one or two transit programs to multiple agency capacity that offers more flexibility and demand responsive training.

Strategy – Host workshops which provide participating agencies with the following services in order to further the program goal.

- Tracking and maintenance of participants programs ensuring agencies have the tools to help their clients with the travel needs.
- Creating a system for understanding the larger programs effect on the paratransit services in each county.
- Support to program agencies including materials, data tracking and additional training if needed.

Outcome – Have one primary transit agency with group training as well as individual human service agency travel training offering demand based training for their clients.

- **Continue to address issues identified in the LCMC Transportation Goal Project**

Objective – The goal of the LCMC in partnering with The United Way was to work on the best way to eliminate barriers to transportation for those in poverty. An action plan was developed based on research and public outreach that outlines multiple strategies for addressing the barriers identified at the outset of the sub-committees work.

Strategy – To create positive public perception of transit in both counties and to work on implementing the three highest priorities/matrix options including partnership with existing city programs (Transfort/PassFort program & GET Business Outreach), education and community shuttle.

Outcome – Work on the strategies outlined in the LCMC Committee's Options Matrix. Partnership with local transit agency's business outreach programs will be the first strategy to pursue. Education through expanded outreach to business groups will also be pursued dependent on individual opportunities with human service contacts.

- **Coordination Event(s) in partnership with groups or organizations that share human service transportation issues and/or challenges**

Objective – To enhance outreach efforts and educate residents on the human service transportation issues that need to be addressed.

Strategy – Partner with other agencies, organizations or groups to reach a large audience interested in understanding and/or helping to address the problems identified in the plan.

Outcome – An event or series of outreach opportunities that presents an issue that needs to be addressed to participants, participant feedback and a direction and/or targeted plan of action as a result of lessons learned at the event.

- **Online Resource Guide**

Objective – Continue partnership with Denver Regional Mobility and Access Council (DRMAC) to provide Northern Colorado data and information to the DRMAC online guide.

Strategy – Hire a consultant to complete the database component of the project and to train mobility coordination staff to continue database maintenance. (Additional \$20K in 5310 funding has been secured for set-up of database and training.)

Outcome – A user friendly online resource guide for consumers and agency representatives to plan transit trips within the NFRMPO region and to the Denver Metro area. The database will incorporate individual transit agency trip planning/online tools through links and program promotion. A longer term goal is to use the guide as a data collection point for demonstrating the need for transit connections between the two regions.

- **Regular Mobility Council Meetings**

Objective – To keep the mobility councils up to date with the project information necessary to make progress towards their goals and to keep them current of relevant mobility coordination, human service/transit provider and funding information.

Strategy – Develop annual Work Plans for each county that details key elements and objectives of primary projects based on the goals and strategies outlined for each county in the Coordinated Plan. Work Plan charts are distributed monthly and used to track project progress and form the basis for monthly discussion of projects.

Outcome – Accomplishment of plan goals and strategies as well as discussion and understanding of the ongoing human service transportation accomplishments and challenges in each county.

- **Expanded Community Outreach**

Objective – To inform larger community groups of the issues surrounding human services transportation and awareness of the mobility council's goals and strategies.

Strategy – To address community and civic groups with updated information that focuses on examples of successes through current projects and coordinated efforts of the council. Program materials have also been created to educate agency staff and the general public about mobility coordination and the work of the Larimer and Weld mobility councils. The latest program materials are grouped together at the end of the attachments.

Outcome – Increased community awareness of the need for coordination and multiple transportation options in each county as well as to destinations outside the county.

Summary

The strategies outlined in Chapter 6 provide the concepts intended to help each county get closer to achieving the primary goals identified in the Coordinated Plan. Monitoring of program and project challenges and success will be conducted annually to ensure resources are being used effectively.

The Coordinated Plan, as the guiding document for regional mobility coordination, will be revisited in five years so that all stakeholders in the regional mobility coordination program can have an opportunity to evaluate the health and success of the program.