Expanding Mobility Through FTA New Initiatives and New Staff

CTAA Expo 2015     June 3
Mary Leary, FTA Division Chief
Rural and Targeted Programs
Panel Moderator

U.S. Department of Transportation
Federal Transit Administration
Agenda

- 3:15pm Opening Remarks – **Henrika Buchanan-Smith**
- 3:20pm-3:25pm Introductions – **Mary Leary**
- 3:25pm-3:40pm SuperCircular & TrAMS - **Valencia McFerrin**
- 3:40pm-4:00pm 5310 & Rides to Wellness - **Danielle Nelson**
- 4:00pm-4:10pm FTA Technical Assistance - **Rik Opstelten**
- 4:10pm-4:25pm FTA Mobility Enhancing Research - **Jeff Spencer**
- 4:25pm-4:45pm Summary and Q&A - **ALL**
The OMB SuperCircular & TrAMS Update

June 3, 2015

Valencia McFerrin
Director
Office of Grant Management and Guidance
What is the SuperCircular?

On December 26, 2013, the Office of Management and Budget (OMB) published final guidance in the Federal Register entitled, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards" ("Final Guidance"), to be located at Title 2 of the Code of Federal Regulations ("C.F.R.").

- All Federal and non-Federal entities expending Federal funds, including direct recipients, subrecipients or pass-through entities, are affected by these changes. (200.101)

What’s in the SuperCircular?

The Super Circular standardizes:
✓ Definitions;
✓ General provisions; and
✓ Pre- and Post-award requirements across the OMB Circulars.

The SuperCircular also:
✓ focuses on performance rather than compliance as a means for fiscal accountability;
✓ encourages the use of Information Technology and shared services, and
✓ strengthens oversight requirements.
Federal awarding agencies are required to conduct a **financial risk assessment** of all applicants prior to making an award. (200.205)

Pass-through entities must also evaluate each **subrecipient's potential risk and monitor awards** accordingly. (200.331)

**Special conditions** are applied that correspond to the type and degree of risk to the federal funds. (200.207 & 200.331)
Administrative Changes – SAM.gov

• SAM streamlines 8 federal acquisition systems, including CCR and EPLS, is required at the time of application, and is used to initially evaluate grantee risk.
• Awards may not be issued until recipient has complied with the requirement to provide a valid unique entity identifier and maintain an active SAM registration.
• The unique entity identifier is the recipient’s DUNS number.
Administrative Changes

- Awarding agencies need to update internal controls to ensure CFDA number and FAIN are listed on all Federal award documents. (200.210 & 200.331)

- Grantees and subgrantees must comply with all Federal award requirements, including FFATA, DUNS, and SAM Registration. (200.210, 200.211 & 200.300)

- The DOT Component making a financial assistance award must establish conflict of interest polices. Grantees and subgrantees must disclose, in writing, any potential conflict of interest to the DOT Component or pass-through entity. (1201.112)
Changes in Indirect Costs

- Indirect Costs are included under the Cost Principles included under section 200.414 and for pass through entities under 200.331.

- A de minimis indirect cost rate of 10% of modified total direct costs is now allowable for non-federal entities that have never had a negotiated indirect cost rate.

- Federal agencies are required to accept negotiated indirect cost rates unless there is an exception.

- If a non-federal entity receives more than $35 Million in Federal funds, they must negotiate an indirect cost rate.
The SuperCircular & FTA

✓ FTA is updating its guidance, FTA Circular 5010.1D, “Grant Management Requirements” to ensure consistency with the new Common Rule and MAP-21.

✓ The Apportionment Notice is available.

✓ Master Agreement will undergo a revision.

Questions or Concerns:
Regional Office Contact or
Headquarters Email: FTASuperCircularGuidance@dot.gov
TrAMS Testing

FTA and its Contractors:

• Ongoing testing and evaluation of TrAMS
• Ongoing development and testing of FTA’s financial systems
• Testing of migrated information between the system and conducting quality check
• Preparation of User Resources
TrAMS Training

- In the Fall of 2014, FTA conducted a series of Hands on Training session in each of our Regional Office areas.

- More Training to Come
  - Future Webinars
  - User Resources
  - Help Desk

- FTA is working to develop videos or “how to use” TrAMS, in the system. They will be completed by module to focus on the areas you use most. (e.g. How to create an application or complete an FFR).

- FTA is working to provide grantees time to work directly in the system in advance of deployment to get familiar with TrAMS.
TrAMS Schedule

- TEAM is open for grant making, business as usual for the remainder of FY 2015.

- FTA closes TEAM at the end of each fiscal year to conduct year end close out. FTA will use this time to finalize financial actions and migrate information from TEAM to TrAMS.

- TrAMS will be active for FFY 2016.
Where to get TrAMS information

FTA’s Website:
http://www.fta.dot.gov/grants/16260.html

Sign up for Alerts to stay current

If you have any questions, please notify your FTA Regional Office
Section 5310 Trends and the New Rides to Wellness Initiative

Danielle Nelson, MPH
Transportation Analyst
Office of Transit Program Management
Rural and Targeted Programs

CTAA Expo
June 3, 2015
Outline

- Coordinated Planning
- Section 5310 Trends
- Rides to Wellness Initiative
Summary of Current Practice

• Are you satisfied with the level of involvement of people with disabilities in your local transportation planning process?
  
  – Total Respondents (Organizations): 125
    • 44% Yes
    • 65% No
  
  – Total Respondents (People of Disabilities): 63
    • 24% Yes
    • 76% No
Summary of Current Practice

• Have you encountered barriers in gaining participation in the transportation planning process by people with disabilities?

  – Total Respondents (Organizations): 90
    • 33% Yes
    • 40% No
    • 20% Unknown

• Persons with disabilities and organizations related barriers in participating in the planning process: Inconvenient time and location; lack of understanding of roles; apathy from organizers
Enhance mobility for seniors and persons with disabilities by providing funds for programs to serve the special needs of transit-dependent populations beyond traditional public transportation services and Americans with Disabilities Act (ADA) complementary paratransit services.
Coordinated Planning – Inclusion of Persons of Limited Income

5310 requires that all projects are included in a coordinated plan with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation and human service providers, and other members of the public.

Through JARC no longer requires inclusion in a coordinated plan as it did in the past, FTA encourages the inclusion of persons of limited income in all coordinated plans.
COORDINATED PLAN

Locally developed, coordinated public transit-human service transportation plan

- Development of Plan
  - Participation by Seniors and Individuals with Disabilities
  - Representation from Public/Private and Non-profit Trans. Providers
  - Human Service Trans. Providers

- Projects must be included in the plan
- Project selection criteria consistent with the plan
Document the procedures in a Management Plan

- Each DR is required to have an approved SMP 5310/5311 small UZA rural, PMP large UZA on file with the appropriate regional office and to update it regularly to incorporate any changes in program management or new requirements.
- The DR shall provide an opportunity for review by stakeholders when it develops a new plan or significantly revises an existing plan.
- Certain contents of the PMP, such as the project selection criteria, should be coordinated with the statewide transportation plan.
- All public documents developed under a grant must be prepared and submitted in electronic format.
- Approved by FTA
Key State Plans

- **Program of Projects (POP)** – recipients and designated recipients must have POP that lists subrecipients and descriptive information about all 5310 projects
- **UZA’s** – **TIP Transportation Improvement Plan**, 4 year plan of federally supported projects developed and adopted by the MPO as part of the transportation planning process & must connect to the coordinated plan and list 5310 projects
- **Rural** – **STIP State Transportation Improvement Plan** must connect to the coordinated plan and list 5310 projects
- **Metropolitan Transportation Plan (UZA’s) & State-wide Long-Range Transportation Plan (rural)** – 20 years out, multi-modal must include coordination plan projects or strategies serving human services transportation needs
- **Coordinated Public Transit-Human Services Transportation Plan**
- **State Management Plan (rural/small UZA)/Program Management Plan (large UZA)** – policies and procedures for administering 5310 and 5311 programs
APPORTIONMENT & AVAILABLE FUNDING

- FY 2014 Apportionment
  - UZAs 200,000 or more in population $154,478,816
  - UZAs 50,000 – 199,999 in population 51,492,938
  - Rural 51,492,938
  - National Total $257,464,692

http://www.fta.dot.gov/apportionments
ELIGIBLE PROJECTS

• Administration, Capital, and Operating

• At least 55 percent must be used on capital, public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable (“Traditional” 5310 Projects)

• Remaining percent can be spent for other eligible purposes, including capital and operating expenses and New-Freedom-type projects

• At most, 10 percent is allowed for Program Administration
ELIGIBLE PROJECTS

1. Public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable*

2. Public transportation projects that exceed the requirements of ADA

3. Public transportation projects that improve access to fixed route service and decrease reliance on complementary paratransit

4. Alternatives to public transportation projects that assist seniors and individuals with disabilities with transportation

* SAFETEA-LU Eligibility / “Traditional” 5310 Projects
ELIGIBLE PROJECTS

I. Public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable

- Rolling stock: Replacement or expansion of buses, and vans
- Vehicle rehabilitation or overhaul
- Preventive maintenance, as defined in the NTD
- Vehicle wheelchair lifts, ramps, and securement devices
- Vehicle shelters
- Computer hardware and software
- Transit related ITS
- Dispatch systems
- Mobility management programs
ELIGIBLE PROJECTS

2. Public transportation projects that exceed the requirements of ADA

- Expansion of paratransit service beyond the $\frac{3}{4}$ mile requirement
- Expansion of current hours of operation for ADA paratransit
- Incremental cost of providing same day service
- Incremental cost of providing door-to-door service
- Acquisition of vehicles and equipment designed to accommodate mobility aids that exceed the dimensions and weight ratings for wheelchairs
ELIGIBLE PROJECTS

3. Public transportation projects that improve access to fixed route service and decrease reliance on complementary paratransit

- Feeder service to commuter rail, commuter bus, intercity rail, and intercity bus stations, for which complementary paratransit service is not required under the ADA
- Building an accessible path to a bus stop including curb-cuts, sidewalks, accessible pedestrian signals or other accessible features
- Improving signage, or way-finding technology
- Implementation of other technology improvements that enhance accessibility including ITS
- Travel training
4. Alternatives to public transportation projects that assist seniors and individuals with disabilities with transportation

- Volunteer driver and aide programs
- Purchasing vehicles to support new accessible taxi, ridesharing and/or vanpooling programs
- Supporting the administration and expenses related to new voucher programs for transportation services offered by human service providers
5310 Performance Measures

• Current indicators:
  – Gaps in service filled
  – Ridership (actual or estimated # rides one-way trips for people with disabilities and seniors)
  – Service improvement in geo. coverage, service quality, service times
  – Physical improvements
5310 High Level Takeaways

• There are at least 2,520 subrecipients, given past reporting data
• 269 (10%) 5310 Subrecipients also receive 5307 or 5311 funds
• The remaining two thirds of 5310 funds were spread between at least 2251 subrecipients
• Mostly small human services agencies – both non-profit and local government operated.
  – Disability services providers
  – Aging services providers
  – Health services providers
  – Community Action Agencies
  – Faith based organizations
• Most buy vehicles
Rides to Wellness

- Why should we focus on the intersection between health and transportation?
- What is the Rides to Wellness Initiative?
- How will FTA proceed with creating the initiative?
- How does it relate to United We Ride and the Coordinated Council on Access and Mobility?
- How will we know we have succeeded?
Why Have a Health and Transportation Initiative?

Address health disparities

Support better health access that leads to:

- lower costs for chronic conditions
- improved quality of life for those with chronic conditions like diabetes, heart disease, etc.

Public Transit has resources to be a good partner to Healthcare providers & insurers
Healthcare Costs and Chronic Conditions

• 84% healthcare spending in 2006 for only 50% of population who have one or more chronic condition (Robert Wood Johnson, Chronic Care Study, 2010)

• 2009 US Healthcare total cost $2.5T (Health Affairs Blog Chris Fleming, 2010)

• Total cost of chronic conditions = $2.1T
  – Screening for chronic conditions can make a difference and the Affordable Care Act mandates 15 different ones
  – AARP recent report noted one study showing that 3.6M Americans miss at least one medical trip for lack of transportation (AARP, January 2015)
  – The people who need the screening the most may not be able to get there due to lack of transportation
Hospital Readmissions

- 18% of patients discharged from hospital are readmitted within 30 days, one third within 90 days
- In Illinois alone a newspaper article in September of 2014 noted that hospitals were fined $16.3M for unnecessary hospital readmissions
- Medicare spends $15B annually for hospital readmissions
- Centers for Medicare and Medicaid services created a “Hospital Readmissions Reduction Program” that when fully implemented hopes to reduce Medicare costs by $8.2B over the next ten years
- Hospitals know and track these rates...
Access to Healthcare Transportation Initiative Vision & Impact

Through rides people and community health thrive

• Improve healthcare access including access for disadvantaged individuals
• Reduce healthcare costs
• Leverage Public Transportation assets
How will we accomplish this initiative?

Three-pronged Strategy for FTA’s ACCESS TO HEALTH CARE TRANSPORTATION LADDERS OF OPPORTUNITY INITIATIVE

- Build Commitment
  - Healthcare Transportation Summit
- Stimulate Investment
  - Community Grants to link Healthcare and Transportation
- Drive Change
  - Identify and promote promising practices in Healthcare Transportation
Rides to Wellness Executive Summit: March 11, 2015

- NCMM and FTA team collaborated to bring together 100 professionals across the health and transportation industries
- Acting Administrator McMillan hosted the event and had two other Federal officials join her
- Major Healthcare providers Kaiser Permanente and CareSource provided invaluable input on why transportation is critical to supporting their clients
- Attendees helped FTA develop a set of actions for Rides to Wellness

http://nationalcenterformobilitymanagement.org/rides-to-wellness/
NCMM will soon release Rides to Wellness Healthcare Access Challenge Grants

- 16 communities
- Coalitions conducted in-depth research pre-application
- Focus areas: preventive care, re-admission prevention, behavioral health access, and dialysis
- Proposed solutions include:
  - Travel navigation for pre-natal care
  - NEMT system integration,
  - Utilizing TNC software backbone in human service system.
Stimulate Investments

Explore technology innovations across the health and transportation sector, examples could be:

- Connect scheduling systems across healthcare/transportation
- Joint smartcards preloaded with eligibility information and benefits
- Create innovative smartphone apps. building upon $60M Veterans Transportation Community Living Initiative One Call Systems which could potentially integrate with personal health & fitness apps.
RIDES TO WELLNESS

618 + 1885 + 50,000 + 1300 + ....
Rides to Wellness Next Steps

- **Create** messaging around Rides to Wellness across the healthcare and transportation industries
- **Convene** the Coordinating Council on Access and Mobility
- **Develop** a jointly funded grant opportunity to encourage the implementation of solutions developed through the community planning grants
- **Harness** the power, perspective and expertise in the research community around Rides to Wellness and health policy experts to inform the development and implementation of a research-driven pilot project
What does success look like?

• Specific actions have helped communities foster strong collaboration and partnerships between transportation providers and healthcare providers
  – Example, cost-allocation model all agree to
  – More partnerships between transportation providers and innovative new CMS programs
• Obstacles to accessing care are removed
  – People get to screenings
  – People get to mental health services
  – Hospital readmissions rates are lower
• People have better health outcomes and the cost of chronic conditions are reduced
Closing Thoughts – Let’s Build this future together
Feedback, ideas, questions?

Thank you!
Feel free to contact me with other thoughts, ideas, or questions: Danielle Nelson
Danielle.Nelson@dot.gov
Technical Assistance Strategy
Supporting People, Programs and Communities to Promote Mobility

Rik Opstelten
Program Analyst

U.S. Department of Transportation
Federal Transit Administration
What is Technical Assistance?

Supporting the field to work more effectively, efficiently and creatively
Key Functions

Training
- Webinars & Online Courses
- In-Person Trainings

TA/I&R
- Quick, or In-depth Assistance
- Peer Networking

Outreach
- Information Sharing
- Best Practice Dissemination

Local Grants*
- Building Connections
- Supporting Innovation

*When funding permits
Apps in the Cloud

Training Products

Briefs and Toolkits

Best Practices
National Aging and Disability Transportation Center: Coming Soon

- Public Transportation Supporting Independent Living
- Bolstering Coordination
- Promoting Inclusive, Integrated Planning
- Finding, Sharing, Replicating Best Practices
Veterans Transportation Community Living Initiative

Ensuring Implementation

Meeting Goals
  • Community Involvement and Outreach

Promoting a Learning Legacy
  • One-Call, One-Click Toolkit
  • Data Integration and Standardization
  • Best Practices and Peer Sharing
<table>
<thead>
<tr>
<th>Category</th>
<th>Programs/Topics</th>
</tr>
</thead>
</table>
| Information Briefs                   | • Service Integration  
• One-Call, One-Click                                                           |
| Peer Networking                      | • Mobility Management Innovation and Practices                                 |
| Training                             | • Performance Measures  
• Design Thinking                                                                |
| Community Technical Assistance Plans | • Amazon Worker Transportation  
• Florida MM Grant Writing                                                        |
| Grant Programs                       | • Healthcare Access Design Challenge                                          |
Mobility Management Information and Practices Database

Narrow your search by making selections below

Select FTA Region(s):
(All) 10 values
Region 1: ME, NH, VT, MA, RI, CT
Region 2: NY, NJ
Region 3: DE, MD, PA, VA, WV, ... Region 4: AL, FL, GA, KY, MS, ... Region 5: IL, OH, MN, WI, IN, MI Region 6: TX, OK, AR, LA, NM

Select Focus of Mobility Management:
(All) 14 values
Bike Share Program
Community Accessibility
Community Outreach and Marke... Cost Sharing Program
Funding Development
One-call - One-Click

Select Demographics:
☑ Rural (<50,000)
Rides to Wellness
Healthcare Access Challenge Grants

16 Communities - $400K in planning grants each around $25K

Coalitions Conducted In-depth Research Pre-application

Focus Areas

• Preventive Care
• Re-admission prevention
• Behavioral health access
• Dialysis

Proposed solutions include:

• Travel navigation for pre-natal care
• NEMT system integration,
• Utilizing TNC software backbone in human service system