Central Louisiana

2023

Coordinated Human Services Transportation Plan

Contents

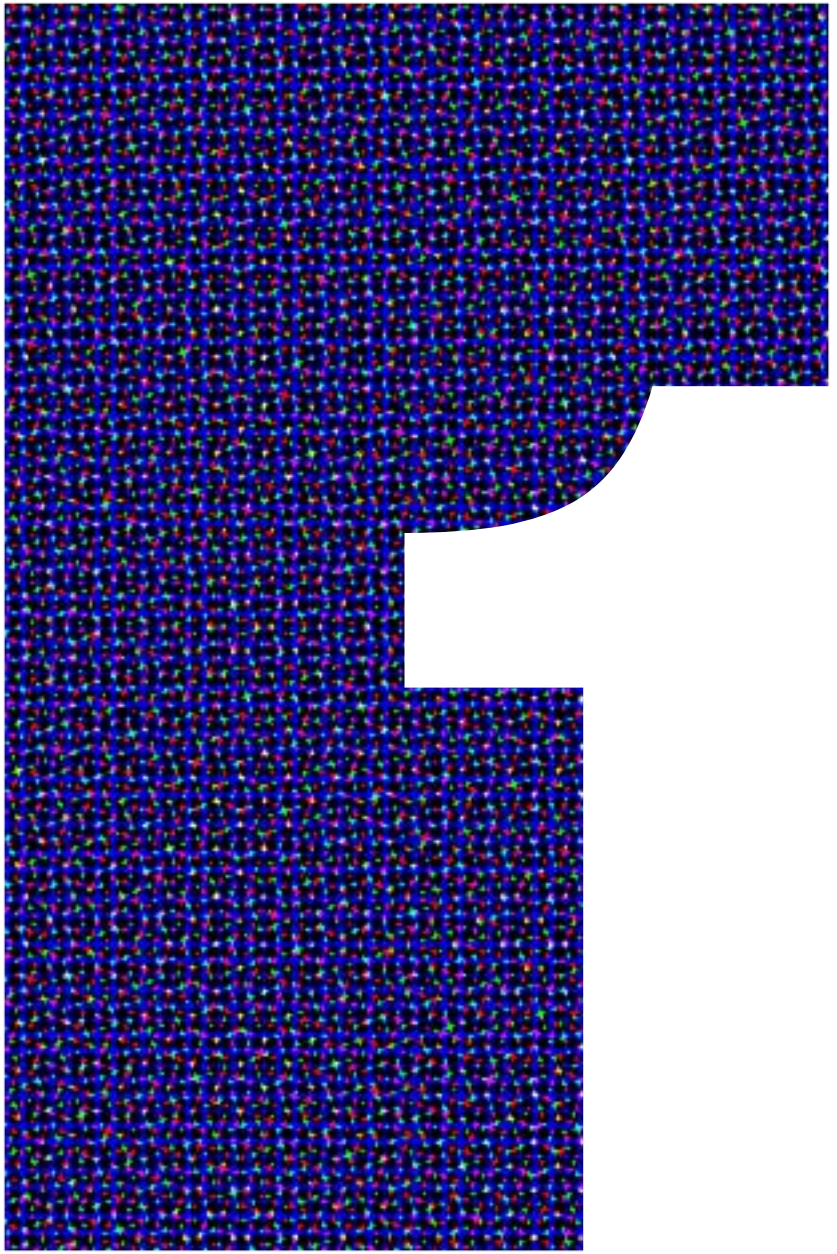
Appendices

Introduction & Methodology

The 2023 Coordinated Human Services Transportation Plan (Plan) sets regional priorities for transportation investments and initiatives for human services and public transit coordination to serve the needs of seniors, people with disabilities, those with low incomes, and veterans, in Avoyelles, Catahoula, Concordia, Grant, LaSalle, Rapides, Vernon, and Winn Parishes (Region VI). It also serves as a federally required update to the 2020 Coordinated Public Transit-Human Services Transportation Plan.

This Plan considers numerous existing or ongoing planning efforts focused on the transportation needs of low-income, senior, disabled, and veteran residents throughout the region. Extensive targeted outreach to regional stakeholders identified the transportation gaps that strategies and projects were designed to address.

This Plan continues implementation of existing regional coordination efforts and meets the requirements of the FTA's rules regarding development of a coordinated transportation plan for any locale to receive funds from the FTA, a very important resource for funding.



Plan Goals

The Plan provides an opportunity for a diverse range of stakeholders with a common interest in human service transportation to convene and collaborate on how best to provide transportation services for these targeted populations. Specifically, stakeholders are called upon to identify service gaps and barriers, strategize on solutions most appropriate to meet these needs based on local circumstances, and prioritize these needs for inclusion in the planning process.

Stakeholder outreach and participation was a key element to the development of the Coordinated Plan; federal guidance issued by FTA specifically requires this participation and recommends that it come from a broad base of groups and organizations involved in the coordinated planning process, including (but not limited to):

- Area transportation planning agencies
- Transit riders and potential riders
- Public transportation providers
- Private transportation providers
- Non-profit transportation providers
- Human service agencies funding and/or
- supporting transportation services
- Other government agencies that administer programs for targeted population, advocacy organizations, community-based organizations, elected officials, and tribal representatives[1].

This Plan is intended both to capture those local stakeholder discussions, and to establish the framework for potential future planning and coordination activities.

The Plan also provides an opportunity for RAPC to prioritize strategies that can be approached on a regional level. This plan offers potential strategies and priorities for projects that target transportation-disadvantaged populations.

This document will inform priorities and certify projects receiving funds authorized under both Moving Ahead for Progress in the Twenty-First Century Act (MAP-21) (the previous federal transportation funding authorization) and the Fixing America's Surface Transportation (FAST) Act.

[1] Federal Register: March 15, 2006 (Volume 71, Number 50, pages 13459-60)

Planning Requirements

Enhanced Mobility of Seniors and Individuals with Disabilities Program (Section 5310)
The FAST Act retains the same planning requirements identified under MAP-21 for the Enhanced Mobility of Seniors and Individuals with Disabilities Program (Section 5310). Section 5310 remains the only funding program with coordinated planning requirements under the FAST Act.

In relation to the locally developed Coordinated Public Transit-Human Services Transportation Plan, the FAST Act requires[2]:

1. That projects selected are "included in a locally developed, coordinated public transit-human services transportation plan."

2. That the coordinated plan "was developed and approved through a process that included participation by seniors, individuals with disabilities, representatives of public, private, and nonprofit transportation and human service providers, and other members of the public."

3. That "to the maximum extent feasible, the services funded will be coordinated with transportation services assisted by other Federal departments and agencies," including recipients of grants from the Department of Health and Human Services.

Funds are apportioned based on each state's share of the population of seniors and individuals with disabilities. Funding decisions must be clearly noted in a program management plan.

Rural Areas Program (Section 5311)
Projects proposed for Section 5311 funding must be a product of the statewide and nonmetropolitan transportation planning process and/or the metropolitan planning process specified in the joint Federal Highway Administration (FHWA)/FTA planning regulations at 23 CFR part 450 and 49 CFR part 613.

The selection process for 5310 and 5311 may be formula-based, competitive or discretionary, and sub-recipients can include states or local government authorities, private non-profit organizations, and/or operators of public transportation.

Federal and State Roles to Promote Human Service Transportation Coordination

Federal
Incentives and benefits to coordinating human services transportation programs are defined and elaborated upon in numerous initiatives and documents. Coordination can enhance transportation access, minimize duplication of services, and facilitate cost-effective solutions with available resources. Enhanced coordination also results in joint ownership and oversight of service delivery by both human service and transportation service agencies. Technical assistance related to the FAST Act built on earlier initiatives from the Safe, Accountable, Flexible, and Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) and MAP-21[3].

[2] https://www.transit.dot.gov/funding/grants/grantprograms/section-5310-%E2%80%93-enhanced-mobilityseniors-and-individuals-disabilities

[3] MTC Coordinated Public-Transit Human Services Transportation Plan. 2018. https://mtc.ca.gov/sites/default/files/MTC_Coordinated_Plan.pdf

These initiatives include:

- **United We Ride:** In February 2004, President George W. Bush signed an Executive Order establishing an Interagency Transportation Coordinating Council on Access and Mobility (CCAM) to focus 10 federal agencies on the coordination agenda.

- **A Framework for Action:** The Framework for Action is a self-assessment tool that states and communities could use to identify areas of success and highlight the actions still needed to improve the coordination of human service transportation.

- **Medicaid Transportation Initiatives:** Transit Passes – Federal regulations require that Medicaid eligible persons who need transportation for non-emergency medical care be provided transportation. For many people, the most cost effective way to provide this transportation is with public transportation. Expansion of Medicaid under the Patient Protection and Affordable Care Act increased the number of persons eligible for Medicaid in Louisiana.

- **Rides to Wellness:** An initiative to increase partnerships between health and transportation providers and show the positive financial benefit to such partnerships. The initiative's goals are to increase access to care, improve health outcomes, and reduce healthcare costs. In March 2015, FTA hosted the Rides to Wellness summit, representatives from FTA, HHS, USDA and the Department of Veterans Affairs attended.

  The Rides to Wellness initiative also oversees the FAST Act's competitive pilot program for innovative coordinated access and mobility to help finance innovative projects for the transportation disadvantaged that improve the coordination of transportation services and non-emergency medical transportation (NEMT) services.

- **Veterans Transportation Community Living Initiative (VTCLI):** FTA has awarded $64 million in competitive grants to help veterans, military families, and others connect to jobs and services in their communities by improving access to local transportation options[4].

- **Healthcare Access Mobility Design Challenge** (and other National Center for Mobility Management projects): The Design Challenge was part of the Federal Transit Administration's Rides to Wellness initiative, a key component of the agency's Ladders of Opportunity program. Sixteen communities were awarded grants to design innovative transportation solutions related to healthcare access; their work was completed in March 2016[5].

---

[4] https://www.transit.dot.gov/ccam/about/initiatives

[5] http://nationalcenterformobilitymanagement.org/challenge/

- **National Aging and Disability Transportation Center (NADTC):** The National Aging and Disability Transportation Center is a national technical assistance center funded by FTA to promote the availability and accessibility of transportation options that serve the needs of people with disabilities, seniors and caregivers with a focus on the Section 5310 program and other transit investments. The NADTC provides technical assistance, information and referral; develops field training; implements interactive communication and outreach strategies; and supports communities in assessing their needs and developing innovative transportation solutions.

- **National Center for Mobility Management (NCMM):** The National Center for Mobility Management supports FTA's Rides to Wellness Initiative and is funded through a cooperative agreement with FTA. NCMM provides capacity building technical assistance and training; catalogs and disseminates best practice information on innovative mobility management programs around the country; and works to improve and enhance the coordination of federal resources for human service transportation, especially for people with disabilities, older adults and people with lower incomes.

- **National Rural Transportation Assistance Program (RTAP):** The National Rural Transportation Assistance Program provides outreach and training to each state's RTAP and coordinates with other organizations involved in rural transit, operates a national toll-free telephone line, a webpage, a national peer-to-peer technical assistance network and various presentations and publications and fulfillment services for National RTAP products.

- **Intelligent Transportation System (ITS) Peer-to-Peer Program:** The ITS Peer-to-Peer Program helps urban and rural clients create solutions for a variety of highway, transit, and motor carrier interests, in virtually all areas of ITS planning, design, deployment and operations.

- **National Transit Institute:** The National Transit Institute (NTI) at Rutgers University was established in 1992 to conduct training and educational programs related to public transportation. Funded by FTA, NTI's mission is to provide training, education, and clearinghouse services in support of public transportation and quality of life in the United States.

- **Transit Cooperative Research Program:** The Transportation Cooperative Research Program (TCRP) is funded by DOT and FTA. TCRP offers practical research that yields near-term results and can help agencies solve operational problems, adopt useful technologies from related industries and, find ways for public transportation to be innovative.

Plan Development

The four required elements of a coordinated plan are: (1) an assessment of current transportation services; (2) an assessment of transportation needs; (3) strategies, activities and/or projects to address the identified transportation needs (as well as ways to improved efficiencies); and (4) implementation priorities based on funding, feasibility, and time, among other criteria. This section describes the steps taken by RAPC to develop these elements of Region VI's coordinated plan.

Region VI Demographic Trends
An updated demographic profile of the region was prepared using data from the Census Bureau's American Community Survey and other relevant planning documents, to determine the local characteristics of the study area as they relate to the four population groups the Plan focuses on: persons with low incomes, persons with disabilities, veterans, and older adults.

Regional Transportation Resource Inventory
To assist parish- and local-level organizations in improving local mobility, the Plan defines mobility management, and describes the range of transportation services that exist in the region. These services include public fixed-route and paratransit services and transportation services provided or sponsored by social service agencies. Information about options were gleaned from existing resources and the CTC.

Stakeholder Outreach
Input was sought from the region's seniors, people with disabilities, people with low incomes, and veterans through various forms of outreach. Together with findings from the demographic analysis, stakeholder input informed the development of a comprehensive list of transportation gaps and a summary of possible solutions. Outreach efforts also focused on conversations with individuals, advocates, and agencies.

Twenty-eight organizations from all eight parishes of the Region VI provided input, captured in more than 180 individual comments. These comments were individually classified as either identifications of existing transportation gaps or suggestions of potential solutions; further, each comment was categorized according to its overarching theme—temporal or spatial gaps, for example. These comments, along with their themes, are provided as Appendix B and Appendix C.

Summary of Gaps and Solutions
Each comment was categorized as either a gap or a solution, and further assigned a theme. In total, 34 themes emerged. Discussions to develop locally implementable projects and regionally relevant strategies focused on the ten most common themes heard through all engagement channels. In addition to gaps, stakeholders also offered solutions — either things that have been discussed in their parish or new ideas. This input was incorporated into the strategy recommendations.

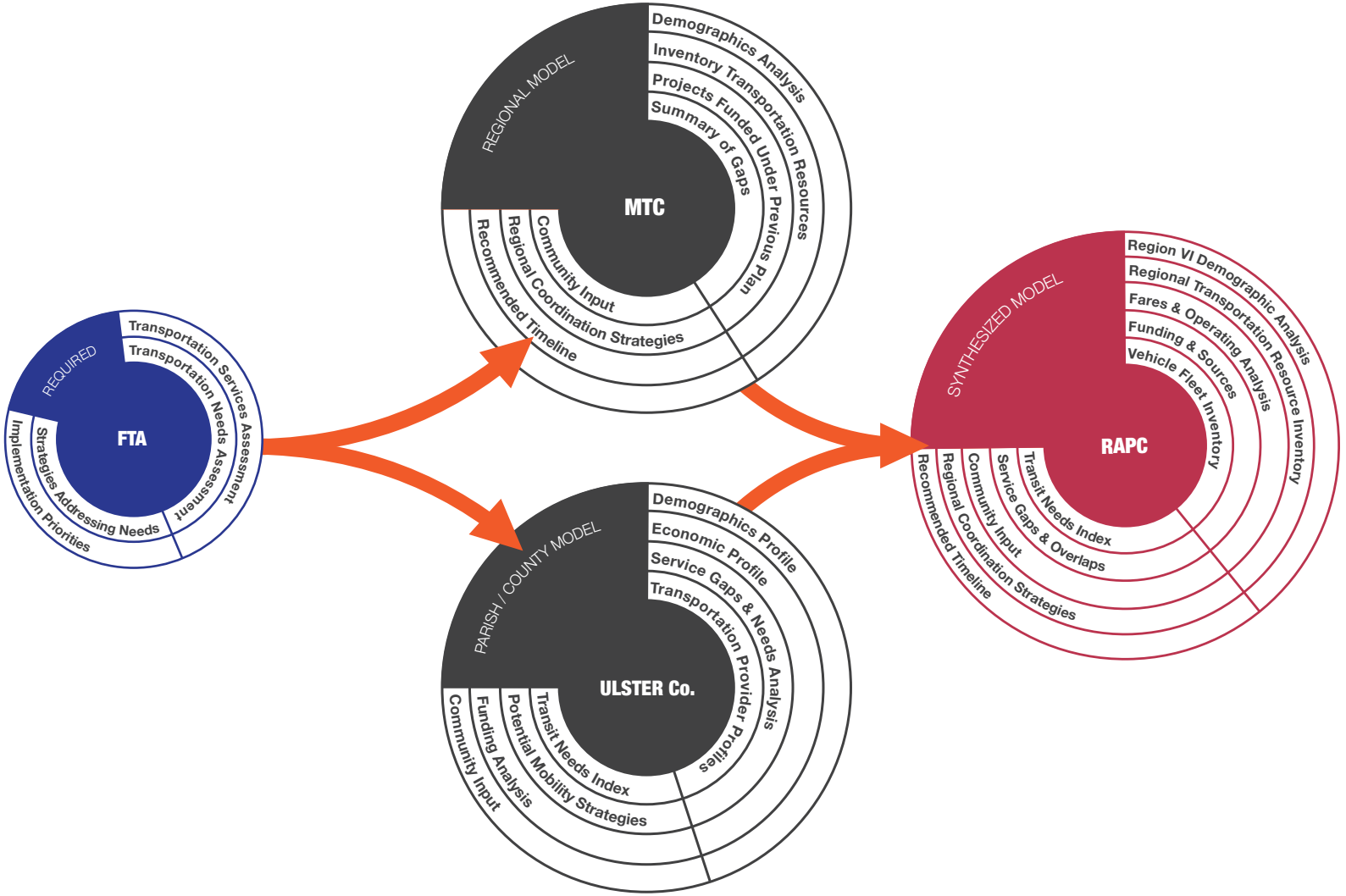
Projects Eligible for Funding
Feedback received through the outreach process was combined with demographic and service gaps analysis to identify specific eligible project types; these projects become eligible for funding sources that require or encourage proposals to refer to this Plan. Projects eligible for funding can be found in Appendix F. Project types include Mobility Management and Travel Training, Improvements to Demand-Responsive Services, such as Paratransit, and other solutions.

Strategies for Addressing Mobility Gaps
Potential initiatives that RAPC can facilitate or implement; informed by information gathered throughout the planning process.

Implementation Recommendations
Next steps for RAPC, transit providers, and human services providers to address mobility gaps.

Based on literature review, RAPC synthesized elements from the Metropolitan Transportation Commission's 2018 Coordinated Public Transit Human Services Plan and the Ulster County 2017 Coordinated Human Services Transportation Plan with FTA Planning Requirements into a comprehensive planning process for the 2023 Update, see Figure 1.1.

Figure 1.1 FTA, MTC, Ulster Co., RAPC Planning Elements

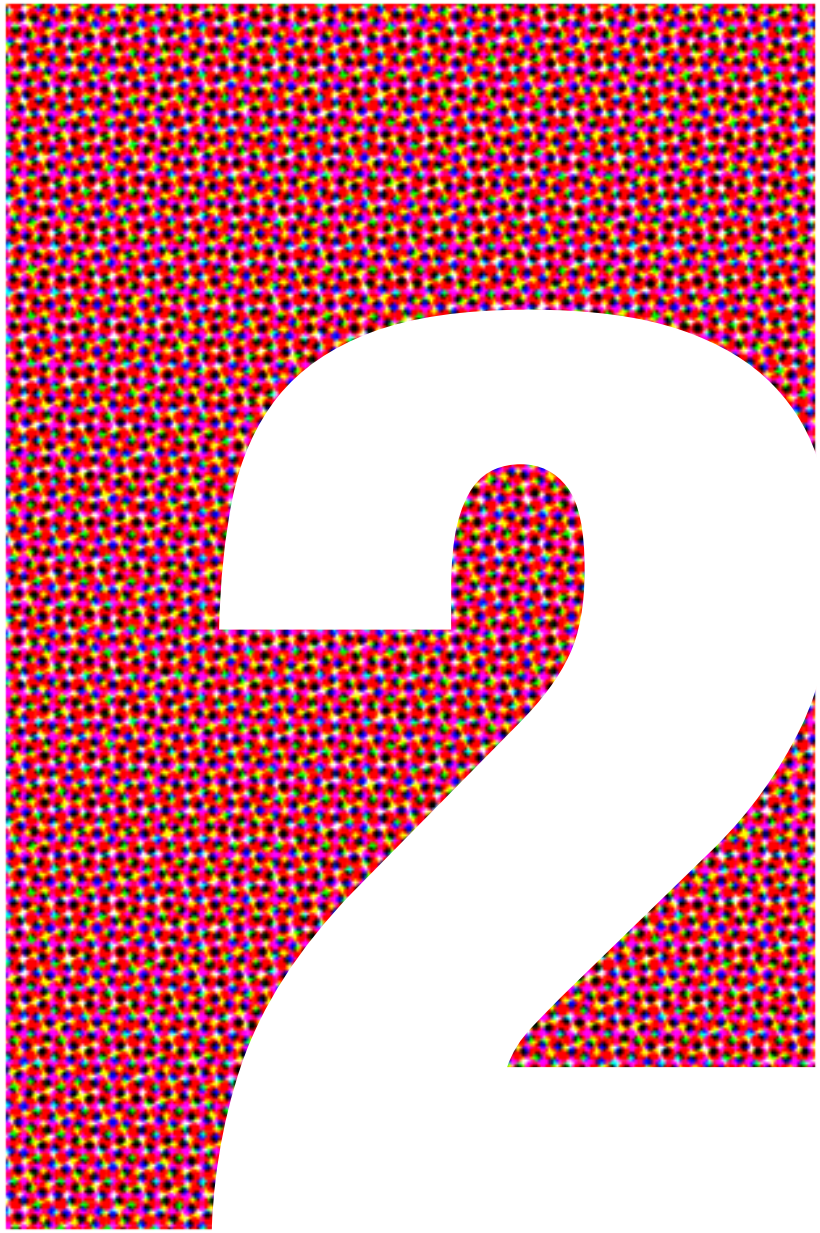


Region VI Demographics

This Plan update focuses on the demographic characteristics of Region VI and its eight parishes. This demographic profile provides a context for transportation needs in the region.

The region's specific demographic characteristics have a direct impact on the demand for transit and paratransit services. The following analysis focuses on the location and concentration of population groups who have a higher propensity to use, and possibly rely upon, public transportation: people with disabilities, adults aged 65 and older, people living without access to an automobile, veterans, and people living in households below the poverty line. All demographic information presented in this chapter is derived from 2016-2021 American Community Survey (ACS) Five-year Estimates.

The following summarizes each population group and identifies areas that have a higher concentration of these individuals. Findings associated with each of the target population groups are also included.



Key Findings

This section presents the existing conditions for disadvantaged populations including seniors (those 65 and over), people with disabilities, those living in poverty and/or without access to a vehicle, and veterans. Some of these populations overlap and some parishes have higher concentrations of people that fall into one or more of these groups. Some key findings reflecting the mobility needs of these groups are listed below.

- The region's total population decreased by 3.6% declined since 2016.
- The region's population is aging. Specifically, Concordia, LaSalle, and Winn Parishes have the highest increase in proportion of individuals who are age 65 and over since 2016.
- The percentage of people living below the 200% poverty level in the region has decreased since 2016.
- Overall, the population with a disability has decreased throughout the region.
- Avoyelles, Concordia, and Rapides Parishes continue to have the largest portion of households without vehicle access. While Concordia has the highest persistent rate of zero vehicle households. Rapides, the most urban and with the greatest density of transit services of all parishes in the region, had the highest increase in the percentage of households without access to a vehicle. The increase in households without access to a vehicle suggests large investments in transit and infrastructure that supports multi-modal mobility is needed.
- Avoyelles, Catahoula, and Grant Parishes have the highest percentage of seniors living below the Federal Poverty Level (FPL).
- The growing portion of the region's disabled population are seniors — aged 65 and over.
- Growing demand for mobility programs that target seniors, low income households, and people with disabilities will generate increased funding requirements.
- As the retirement population grows, fewer resources will be available to provide services and facilitate mobility among the aging population. New technology and innovative mobility strategies are key to fill the gaps in mobility services.
- Percentage of the region's total population enrolled in Louisiana Medicaid increased by 11.5% — with Avoyelles, Catahoula, and Concordia Parishes having the highest average percent enrolled between 2016 and 2021[1].

[1] Louisiana Department of Health, Medicaid Annual Reports 2012-13, 2013-14, 2014-15, 2015-16, 2016-17, 2017-18, accessed June 2023

Older Adults

Current Conditions

According to the 2021: ACS 5-Year Estimates Data Profiles, the total population of Alexandria, LA Urbanized Area is estimated to be 80,311. Making up 17.1% of the total population, ages 65 years and over is on the rise compared to the 15.6% that made up the population in 2021.

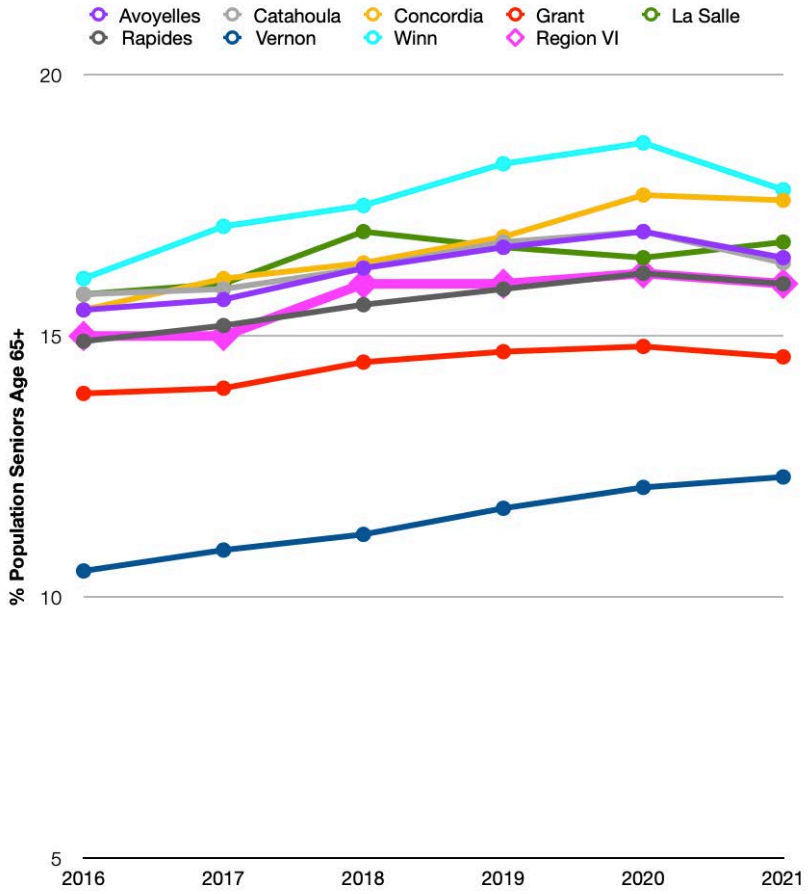
La Salle, Concordia, and Winn Parishes - three of the region's four least populated parishes have the largest percentage of seniors. Winn has the highest percent of seniors in the region. Avoyelles and Catahoula have the highest percent of seniors living at 200% below FPL, as well as households without access to a vehicle. Twenty percent of all seniors in the region were veterans.

Grant, Rapides, and Vernon had the lowest proportion of seniors of Region VI Parishes in 2021. These percentages can be seen in Figure 2.1.

Trends

America is graying. The nation's 65-and-older population is projected to nearly double in size in coming decades, from 49 million in 2016 to 95 million people in 2060. As a result, the share of people aged 65 and older will grow from about 15 percent in 2016 to nearly a quarter of the population in 2060.[2] La Salle and Winn Parishes are projected to have the highest percentage of seniors, with almost a quarter or more 65 or older. Services for seniors will need to increase at or ahead of the rate at which the senior population is growing.
Mobility will continue to be a challenge for seniors and for transportation planners as a far greater proportion of the population loses their ability to drive.

Figure 2.1 Change in Senior Population (2016-2021)



[2] U.S. Census Bureau, Demographic Turning Points for the Unites States, March 2018

People with Disabilities

Current Conditions

According to 2021 ACS data, nineteen percent of the region's population have a disability. Avoyelles and Concordia Parishes have the highest proportion of people currently living with a disability. Forty-two percent of the region's senior population have a disability, with Avoyelles, Winn, and Vernon Parishes have the largest proportion. By contrast, Catahoula and LaSalle Parish's senior population has the lowest proportion of seniors living with a disability, suggesting that while there is a large population of seniors in the parish, they are more likely not to have a disability or be as dependent on accessible services.

Trends

According to the demographic data gathered from ACS, the overall percentage of people with a disability in the region decreased almost four percent between 2016 and 2021.

Figure 2.2 Change in Population with a Disability (2016-2021)

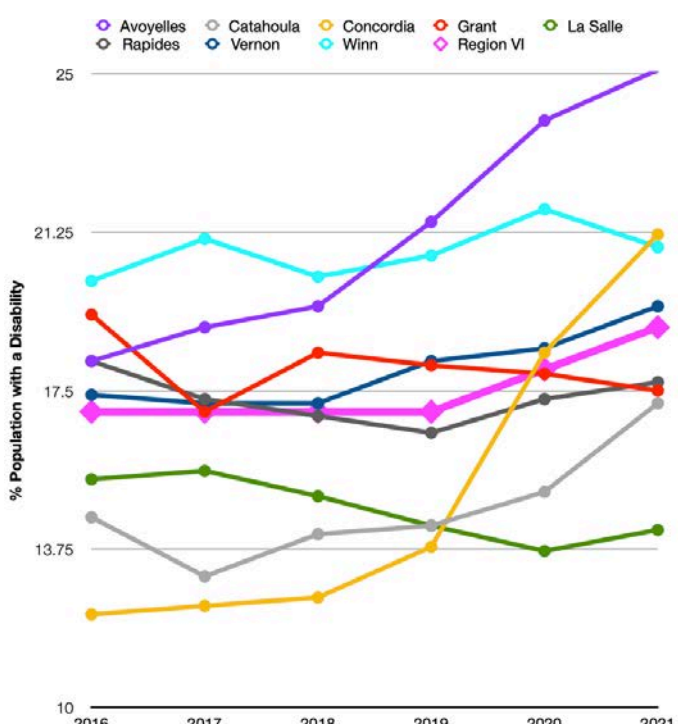
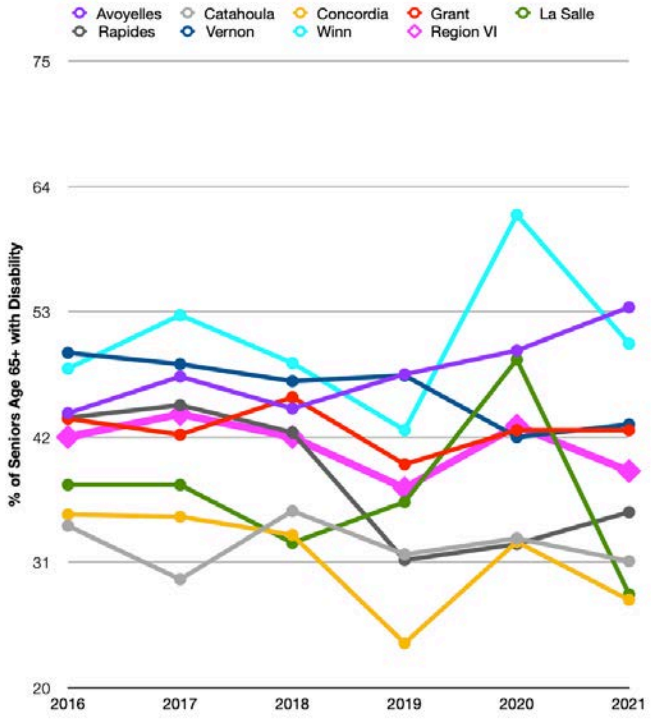


Figure 2.3 Change in Seniors with a Disability (2016-2021)



* New disability questions were introduced in 2008, along with new questions on Health Insurance, Marital History, and Veterans' Service-connected Disability Ratings. Because of the changes to the questions, the new ACS disability questions should not be compared to the previous ACS disability questions or the Census 2000 disability data.

Poverty

Current Conditions

Figure 2.4 illustrates percentage of the region's population living below FPL in 2021. Almost twenty-two percent of the region's population live below the FPL, with forty-four percent of those living 200% below FPL. The largest concentration of people living below FPL line are found in Avoyelles and Concordia Parishes. Those living in poverty are less likely to be able to afford a car and are more reliant on public transportation than those with high incomes.

Trends

As can be seen in Figure 2.5, percentages for years 2016 to 2021 represent those living under 200 percent of FPL. The 200 percent threshold was used to identify Qualified Disabled and Working Individuals (QDWI).

Federal poverty level (FPL) provides a reasonable benchmark to understand trends over time relative to the share of population that may be considered low-income.

Rural parishes have historically had fewer resources to provide services for those living in poverty. Figure 2.4 displays the poverty rates by parish in 2021 and Figure 2.5 shows the change in population living 200% below FPL from 2016 to 2021.

Figure 2.4 Percent of Population Living Below FPL (2021)

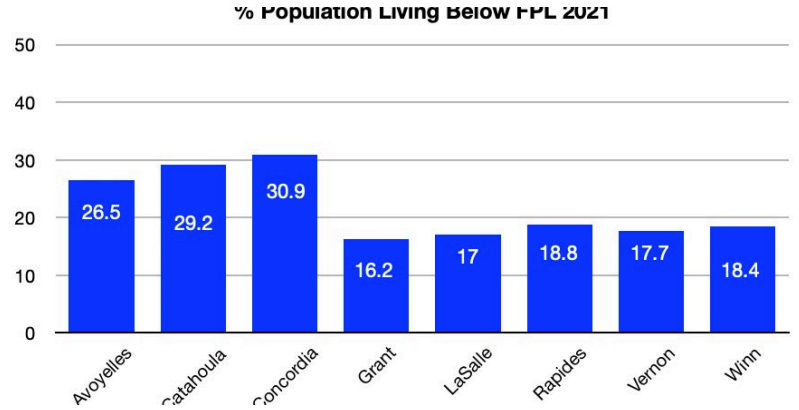
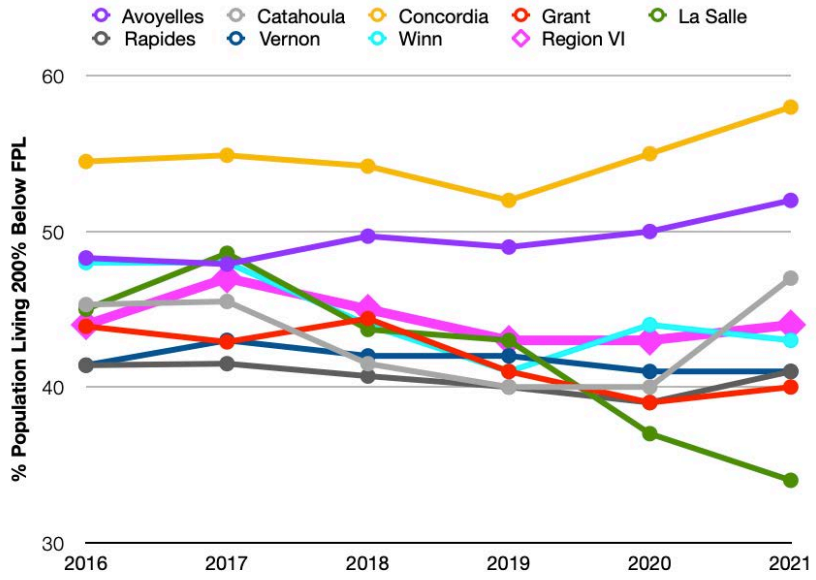


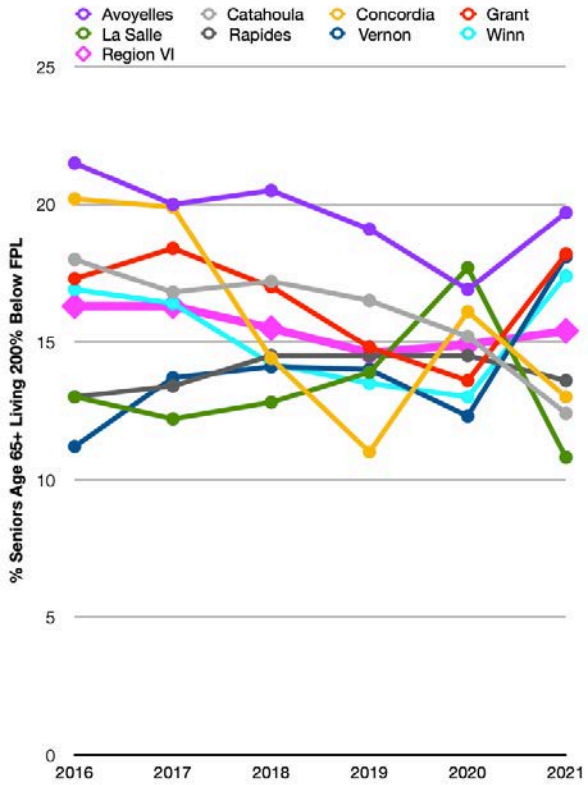
Figure 2.5 Change in Population Living 200% Below FPL (2016-2021)



Seniors Living in Poverty

Sixteen percent of the region's senior population live below the FPL, with forty-two percent of those living 200% below FPL. As illustrated in Figure 2.6, Avoyelles, Catahoula, and Grant Parishes had highest percentage of seniors living below FPL. Grant and Catahoula saw the largest increase in senior population living in poverty, while Concordia and Winn Parishes saw the largest decrease between 2016 and 2021.

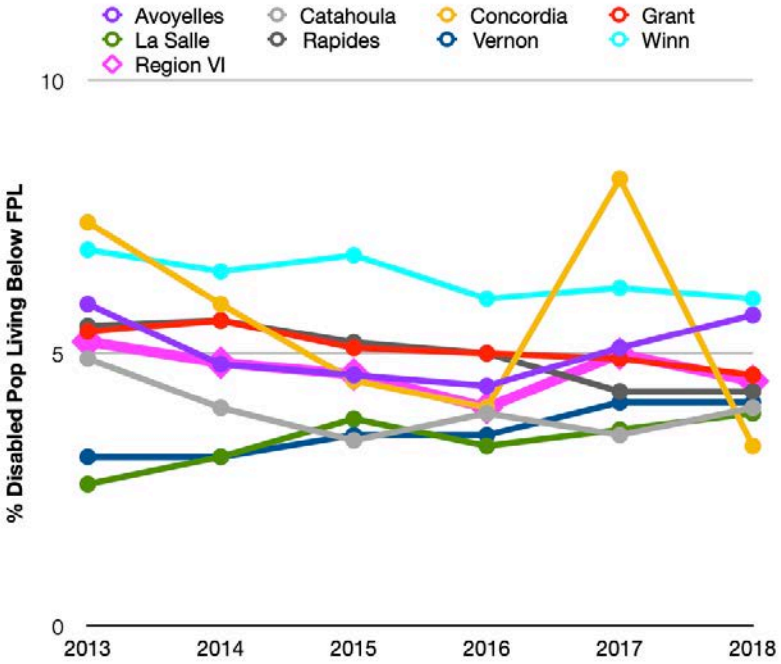
Figure 2.6 Change in Seniors Living in Poverty (2016-2021)



Population with Disability Living in Poverty

The average percentage of the region's disabled population living in poverty slightly decreased from five to four percent between 2016 to 2021. Concordia Parish had the most significant change during that same time period with a four percent decline in the percentage of population with a disability living below the FPL, whereas LaSalle and Vernon Parishes increased by one percent. Avoyelles and Winn Parishes have consistently had the highest percentage of disabled individuals living in poverty in the region at six percent.

Figure 2.7 Change in Disabled Living in Poverty (2016-2021)



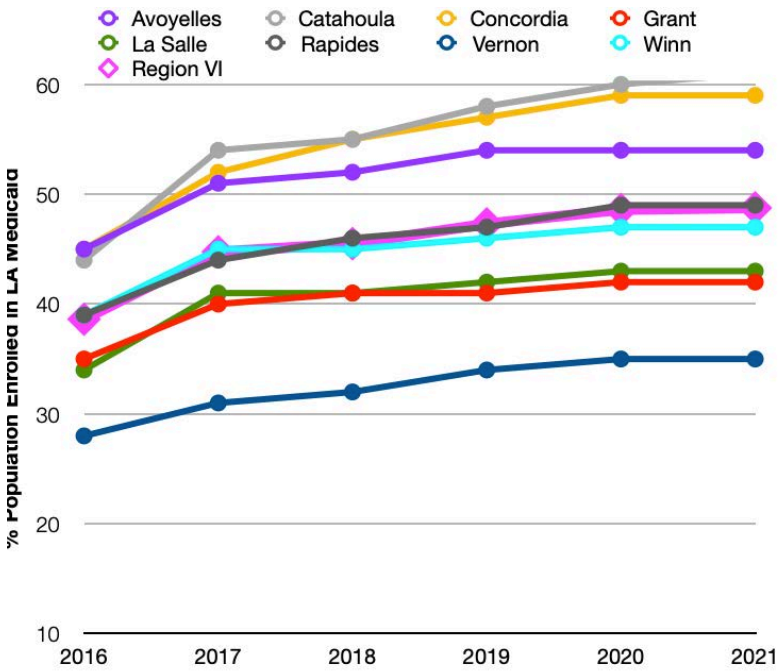
Population Enrolled in Medicaid

Lack of transportation can be a barrier to accessing health care, particularly for elderly, disabled, or low-income individuals. Adults with Medicaid coverage are more likely than those with private coverage to delay care because of a lack of transportation (5.8 percent versus 0.7 percent). This may be due to differences in health status and income, as, in general, transportation disadvantaged individuals are age 65 and older, have disabilities, or have low incomes.[3]

Region VI had 139,981 individuals or forty-seven percent of the region's population were enrolled in Louisiana Medicaid in 2021. Avoyelles, Catahoula, and Concordia Parishes had the highest percentage with each having over fifty percent of population enrolled.

Figure 2.8 illustrates the percentage of the region's total population enrolled in Louisiana Medicaid between 2016 and 2021. Catahoula, Concordia, and LaSalle Parishes had significant increases in population enrolled in Medicaid, increasing seventeen, sixteen, and thirteen percent respectively from 2016 to 2021. The combined regional population enrolled increased by eleven and a half percent during the same period.

Figure 2.8 Change in Population Enrolled in LA Medicaid (2016-2021)



[3] Medicaid and CHIP Payment and Access Commission Issue Brief, May 2019

Access to Vehicles

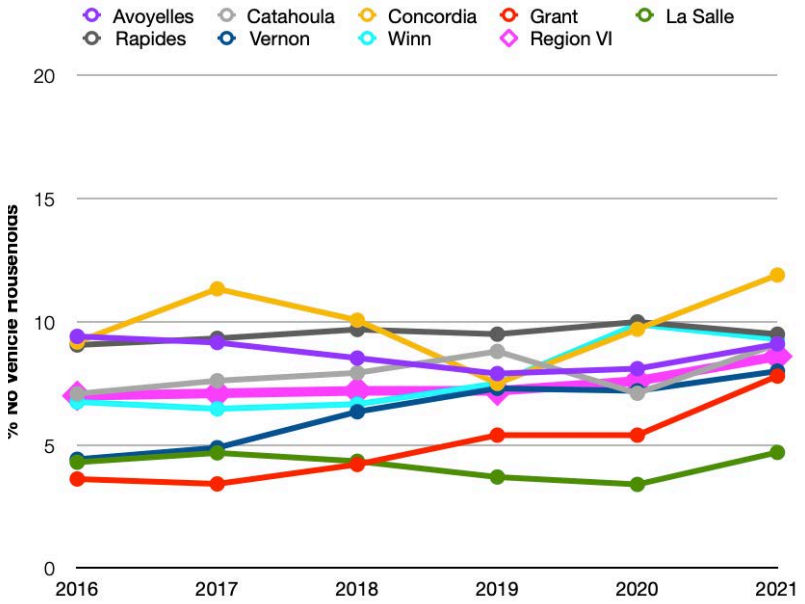
Current Conditions

Roughly seven percent of Region VI households do no have access to a vehicle. In 2018, Concordia and Rapides Parishes had the highest, with nearly 10 percent of households having no access to a vehicle. Percentages of Region VI households without access to a vehicle by parish can be seen in Figure 2.9.

Trends

The number of people in the US living in households without access to a vehicle has been on the rise since 2007[4]. Between 2016 and 2021, the overall percentage of total Region VI households in this category remained the same. The percentage of Avoyelles, Concordia, Grant, LaSalle, and Winn Parish households without access to a vehicle decreased, while Concordia, Rapides, and Grant Parishes saw an increase in households without access to a vehicle from 2016 to 2021.

Figure 2.9 Change in Households without Access to a Vehicle (2016-2021)



[4] Hitchin' a ride: Fewer Americans have their own vehicle | University of Michigan News. (2014). Retrieved 12 July 2016, from http://ns.umich.edu/new/releases/21923-hitchin-a-ride-fewer-americans-have-their-own-vehicle

Veterans

Current Conditions

Veterans face similar mobility access issues as other transportation disadvantaged populations. In 2021, there were about 20,376 veterans in the eight parish region comprising ten percent of the total population[5].

The majority of the region's veterans can be found in Rapides, Vernon, and Grant Parishes. There is an overlap between the populations of those with a disability, those with veteran status, and those who are seniors.

Trends

In Figure 2.10, the percent change in the veteran population can be seen at a local level over the 2016 to 2021 period. This data from the same source as the previously reported data, but it is summarized at local geographic levels instead of at the parish geographic level. The percentage of adult veterans decreased three percent from 2016 to 2021. Veteran populations with mobility needs tends to fluctuate with military activity abroad — a difficult trend to project.

A quarter of the veteran population in the same year were seniors aged 65 or older. Parishes with substantial populations of retirees have significant percentages of veterans among their senior populations. The veteran population in Vernon Parish, which has a large military base (Fort Polk), is younger than in other parishes. The parish also has a low percentage of seniors. The percentage of veterans who were seniors in 2021 for each parish and the region is presented in Figure 2.11.

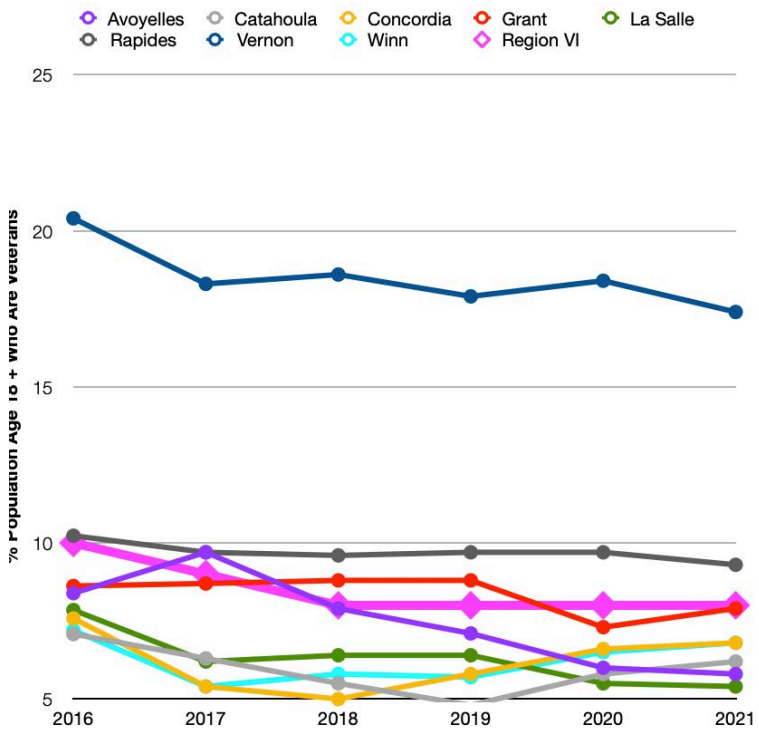


Figure 2.10 Population Change in Veterans (2016-2021)

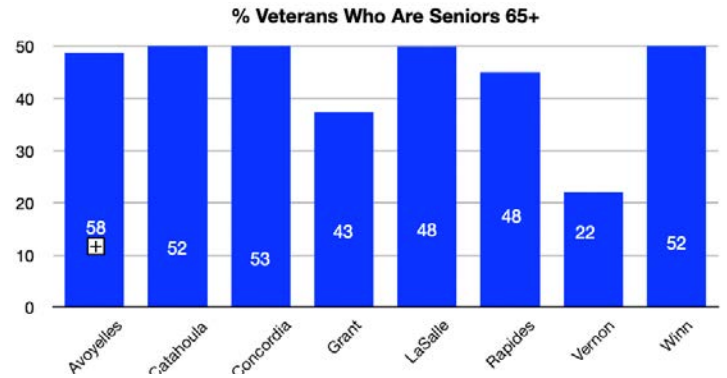


Figure 2.11 Percent of Veterans who are Seniors (2021)

[5] American Community Survey 2016 – 2021, 5 year estimates

Transportation Resources

Data compiled from the National Transit Database (NTD), DOTD's Statewide Transit Tracking and Reporting System (STTARS), and transit provider interviews documents existing regional transportation resources for low-income populations, seniors, people with disabilities, and veterans provided by public and non-profit agencies.

Regional Transportation Resources

Region VI offers several transportation options for low-income populations, seniors, people with disabilities, and veterans. These populations are often less likely to have access to an automobile and need to rely on transit and other modes of transportation. In addition to fixed-route transit, riders might use Americans with Disabilities Act (ADA) - mandated paratransit, city-provided paratransit, non-profit transportation services, private providers like taxis, or other options[1]. Transportation Network Companies (TNCs) are currently unavailable in the region.

Coordination between service providers is essential because all of these providers should be able to refer an individual to mobility management resources if needed. Riders often are unaware of the different transportation options available to them or unsure which to use for a particular trip. Mobility management strategies can assist riders in accessing an array of transportation options, and can assist providers in coordinating their services. The region's population is aging. Specifically, Rapides, Vernon, and Grant Parishes have the highest increase of individuals who are age 65 and over since 2016.

Mobility Management
Transportation disadvantaged populations should be able to access mobility management services through a number of different "entry points." In addition to contacting a mobility manager directly, individuals might begin with an information and referral provider (such as a 211 service), a non-profit organization (such as an independent living program), a social service provider (such as the Central Louisiana Human Services District), a community service (such as the Cenla Area Agency in Aging), or a transportation provider (paratransit provider, for example).

Types of Transportation Resources in Region VI
Although limited, there are different transportation resources that low-income populations, seniors, people with disabilities, and veterans can access in the region.

These include different types of transportation services and a range of mobility management related resources, described in detail in Figure 3.1. Transportation options also available to these groups not described in detail include walking, biking, and driving.

[1] http://www.projectaction.com/glossary-of-disability-and-transit-terms/

Figure 3.1 Types of Transportation Resources in Region VI ([2],[3])

Support Services	Short Definition
Fixed-Route Transit / ADA-Mandated Paratransit	Buses, vans, etc., operated by transit agencies that run on regular, predetermined, pre-scheduled routes, usually with no variation. ADA-mandated paratransit is required as part of the American with Disabilities Act (ADA) to complement, or serve in addition to, already available fixed-route transit service.
Specialized Transportation	Transportation services offered outside of the transit agencies (often by parishes, public sector agencies, or non-profit organizations) that address the transit needs of the community, including the general public and special populations in both urban and rural areas.
Private Transportation	Transportation provided by a private for-profit entity in the business of transporting people. These services are often demand-responsive and initiated and paid for by the rider. Examples are taxis, motor coach services. TNCs (Uber, Lyft, etc.) are currently unavailable in the region.
Subsidized Fare Programs/ Voucher Programs	Programs typically administered through a social service agency, that enable qualified people to purchase fares/vouchers for transportation services at a reduced rate from providers such as taxis, public transit, or volunteer driver programs. Recipients are often low-income.
Information & Referral	Programs that provide community information and referral, and connect people with resources that can help them. Agencies may be independent non-profit organizations, libraries, faith-based organizations, or government agencies at every level.
Travel Training	Programs designed to teach people with disabilities, seniors, veterans, and/or low-income populations to travel safely and independently on fixed-route public transportation in their community.
Mobility Management Services	Mobility management services cover a wide range of activities, such as travel training, coordinated services, trip planning, brokerage, and information and referral. For the purposes of this resource list, mobility management services refer to the provision of individual transportation information and assistance, and service linkage. Related to information and referral.

[2] ESPA Webinar on Private Transportation and the ADA

[3] http://www.airs.org/i4a/pages/index.cfm?pageid=3500

Fixed-Route Transit/ADA-Mandated Paratransit
Fixed-route transit offers services that run on regular, pre-determined, pre-scheduled routes, usually with no variation. All fixed-route transit providers are legally required as part of the ADA to provide paratransit to complement, or serve in addition to, already available fixed-route transit service.

Fixed-route service is only available in the urbanized area of Rapides Parish (Alexandria and Pineville). From a mobility management perspective, it should provide a base level of affordable service to access major destinations like school, work, medical appointments, shopping, etc.

ADA-mandated paratransit is best utilized as a replacement for fixed-route transit only when it is impossible for an individual with a disability to use transit for a trip. The other transportation resources listed are best utilized to supplement or assist individuals in using fixed-route transit. Other transportation resources will often not have the same capacity as fixed-route transit and offer limited rides.

Alexandria Transit (ATRANS) is the only fixed-route public transit provider in the region. It is required to provide accessible service on its fixed-route vehicles and complementary ADA-mandated paratransit service.

Accessibility features on fixed-routes include[4]:

- Buses equipped with low floor ramps to allow easy access for people with disabilities.
- Priority seating for those who need it.
- Bus drivers trained to provide assistance in securing wheelchairs in designated spaces.
- Drivers trained to allow passengers time to be seated, and to get on and off the vehicle.
- Announcement of stops and major intersections, transfer points and, at the request of passengers, specific destinations.
- Stations with ADA accessible boarding platforms.
- Route and schedule information provided by transit agencies, available in accessible formats, if needed.

For people who, due to their disability, are unable to ride regular buses, ADA-mandated paratransit is offered. ADA-mandated paratransit is meant to replicate fixed-route transit. This means paratransit services operate in the same area, on the same days and during the same hours as the public transit operates. Paratransit service may be provided on small buses, vans, taxis, or even sedans. It is generally a shared ride, door-to-door, or curb-to-curb service that must be reserved at least one day in advance.

Specialized Transportation
For low-income populations, seniors, people with disabilities, and veterans in Region VI - community-based transportation is the only resource. These are often sponsored by parishes, public-sector agencies, or non-profit organizations, and address unmet transportation needs of the community.

Funding provided for these transportation services is usually dedicated for a specific clientele (i.e., Veterans, Medicaid eligible persons, seniors attending meal programs, etc.) and cannot easily be co-mingled with other funding sources.

[4] MTC Coordinated Public-Transit Human Services Transportation Plan. 2018. https://mtc.ca.gov/sites/default/files/MTC_Coordinated_Plan.pdf

For the most part, social service agencies who are providing the service are not primarily in the transportation industry; rather, transportation is an extension or part of a program.

Riders are often referred to these programs by an agency they are receiving services from, such as a human service agency or senior center. Mobility managers and information and referral services can be invaluable here. Examples of specialized transportation services are listed below.

Community-Sponsored Services
Some towns or parishes sponsor transportation for seniors and people with disabilities that supplements fixed-route transit or ADA-mandated service. Rapides, Vernon, and Avoyelles Parishes sponsor rural transportation services offering accessible door-to-door service during the day on weekdays for seniors and the general public.

Services Provided by Non-Profit Organizations
Non-profit organizations in the region also offer transportation service to fill unmet transportation needs. The Rapides Senior Citizen's Center serves as a rural transportation provider for seniors and the general public; offering demand responsive transportation for parish residents for all trip types.

Private Transportation
Private transportation providers have always been an integral partner in the provision of transportation resources for low-income populations, seniors, people with disabilities, and veterans. Private transportation providers are for-profit entities in the business of transporting people. In some instances, riders do not request or access the transportation directly from the private company, but through the agency sponsoring the service.

Although limited, taxis have filled gaps in service for transportation-disadvantaged populations. Other options such as Transportation Network Companies (Uber and Lyft, for example) are available in the region, however are highly limited in service and at a much higher cost.

Figure 3.2 Region VI Public and Non-Profit Transportation Providers

Parish	Operator	Population Served	Trip Type	Monday - Friday Hours	Wheelchair Accessible?
Avoyelles	Avoyelles Public Transit	General Public, ADA Eligible Individuals Medicaid Eligible Individuals	All Trip Types	5AM-7PM	Yes
	Avoyelles Society Developmentally Disabled	People with Disabilities	Program Related, Shopping	5:45AM-4:15PM	Yes
Catahoula	Catahoula ARC	People with Disabilities	All Trip Types	6AM-4:00PM	Yes
	Catahoula COA	Seniors	Program Related	9AM-3PM	No
Concordia	Concordia Council on Aging	Seniors, Medicaid Eligible Individuals	All Trip Types	9AM-2PM	Yes
Grant	Rural Public Transit Pilot	General Public	All Trip Types	7AM-5PM	Yes
LaSalle	LaSalle ADD	People with Disabilities	Program Related, Shopping	6:30AM-3:30PM	Yes
	LaSalle COA	Seniors	Program Related, Shopping	7AM-3PM	No
Rapides	Alexandria Transit (ATRANS)	General Public, ADA Eligible Individuals Medicaid Eligible Individuals	All Trip Types	6AM-10PM. (6AM-6PM Saturdays)	Yes
	Rapides ARC/J.Eskew Center	People with Disabilities	All Trip Types	6AM-8AM 3PM-5PM	Yes
	Rapides COA	Seniors	Program Related, Shopping	8AM-12PM	No
	Rapides Senior Citizens Center	General Public, ADA Eligible Individuals Medicaid Eligible Individuals	All Trip Types	8AM-2PM	Yes
	St. Mary Residential Training School	People with Disabilities	All Trip Types	On-call	Yes
	Alexandria VA Health Care System	Veterans with Disabiliies	Medical	6AM-6PM	Yes
	Town of Ball	Seniors	Program Related	8AM-12PM	No
Vernon	Vernon COA	General Public, ADA Eligible Individuals, Medicaid Eligible Individuals	All Trip Types	6AM-5PM	Yes
Winn	Winn COA	Seniors, General Public	All Trip Types	6AM-3:30PM	No

Other Transportation Resources

Subsidized Fare Programs / Voucher Programs
Subsidized fare or voucher programs are typically administered through a social service agency, and enable qualified individuals to purchase fares/vouchers for transportation services at a reduced rate from providers such as volunteer programs or taxis. Recipients are often low-income.

As noted earlier, cost can be a barrier to accessing transportation for low-income populations, seniors, people with disabilities, and veterans. Fixed-route transit offers reduced fares to seniors 62 and above and people with disabilities. For example, ATRANS offers half-fares to riders aged 62 years or over[5]. Some agencies, such as Families Helping Families, offer subsidies for particular groups independent of income.

Taxi subsidy programs allow eligible participants to use taxis at a reduced fare by reimbursing a percentage of the fare, or by providing a low-cost fare medium which can be used to cover a portion of the fare.

Jurisdictions and non-profit organizations may offer paratransit subsidies dependent on available funding. However, these programs are not always widely publicized and availability is limited.

Information and Referral
Information and referral (I&R) programs provide community information and referral, and connect individuals with resources that can help them. There is a spectrum of I&R services, ranging from a simple website and database listing resources, to a fully customized trip planner and referral service. While most I&R systems function mainly as lists, there are several examples of more fully featured platforms. I&R agencies may be independent non-profit organizations, libraries, faith-based organizations, or government agencies at every level.

Information and referral is the key "entry point" for individuals accessing transportation services. An information and referral database or list is only useful with a sufficiently large pool of resources. Historically, 211 is the primary free, confidential referral and information helpline and website that connects individuals to health and human services. Although currently unavailable, a regional 211 service is under development.

Travel Training
Travel training programs generally fall under mobility management and are designed to teach people with disabilities, seniors, veterans, and/or low-income populations to travel safely and independently on fixed-route public transportation in their community, but can include other modes and services.

> ***Travel Training***
> Travel training covers one-to-one short-term instruction provided to an individual who has previously traveled independently and needs additional training or support to use a different mode of travel, a different route, mode of transit, or travel to a new destination. It also covers one-to-one comprehensive instruction, specially designed instruction in the skills and behaviors necessary for independent travel on public transportation provided to an individual who does not have independent travel concepts or skills to go from point of origin of trip to destination and back.

[5] https://www.cityofalexandriala.com/bus-transit-atrans, accessed August 18, 2018.

Travel training in rural areas brings both unique challenges and opportunities to the professionals who currently deliver those services, or to those who are seeking to begin a new type of program.

Non-profits organizations, transit agencies, and cities or parishes can sponsor travel training programs.Travel training can help low-income populations, seniors, people with disabilities, and veterans access this transportation resource effectively.

Mobility Mangement
Although a few parishes in the region have some sort of information and referral service, mobility management services are not yet available throughout the region. Mobility management services are closely related to information and referral, but go further by providing more individually tailored information and providing service linkage. Where available, mobility management is an ideal “entry point” for low income populations, seniors, people with disabilities, and veterans to the range of transportation resources available.

Mobility management services cover a wide range of activities, such as travel training, coordinated services, trip planning, brokerage, and information and referral.
For the purposes of this resource list, mobility management services refer to the provision of individual transportation information and assistance as well as service linkage.

Rider and Trip Eligibility
The majority of transportation providers serve clients who are over a certain age, as well as have a disability. As shown in Figure 3.2 ATRANS, Avoyelles COA, Rapides Senior Citizen Center, and Vernon COA serve the general public, while the ARC Rapides serves people with disabilities of all ages enrolled in waiver services through the Louisiana Office of Citizens with Developmental Disabilities (LA-OCDD).

Days and Hours of Service
Many transportation providers hours of operation vary as shown in Figure 3.2 Service for the general public operate Monday-Friday starting around 6:30 am and ending between 4-6:00 pm. ATRANS is the only provider in the region that offers late service on weekdays ending at 10 pm.

Transportation service for older adults start around 7am with most ending service between 12-2 pm. Transportation service for people with disabilities ranges from 7am to 3 pm. ATRANS is the only provider that operates on Saturdays. No transportation service is available on Sundays.

Fares

Only four providers charge a fare for transportation services. ATRANS charges $0.75 for a one-way fixed route trip and ADA $0.35 for a one-way trip (1/2 fare). The Avoyelles COA (also known as Avoyelles Public Transit) charges $18.00 for trips inside Avoyelles Parish ($10.00 for seniors 60+) and $25.00 for out of parish service. Vernon COA charges $8.00 for a one-way demand-response trip inside Vernon Parish (free for seniors 60+). Rates for out of parish service vary on location, starting around $25.00. Rapides SCC charges $5 for adults $3 for children with paying adults ($2 for seniors 60+) for trips inside the incorporated limits of trip's point of origination, with a max of three stops. Rates for out of parish service start at $10 ($6 for seniors 60+) and location-based.

Figure 3.3 Provider Fares for Regular & Outside Parish Trips[6]

Provider	Base Fare	Trips Outside Parish
Avoyelles COA	**$18** (round trip/inside parish)	**$25** (round trip/outside parish)
	$10 (seniors 60+) (round trip/inside parish)	
ATRANS (fixed-route)	**$0.75 / $0.35 (1/2 fare)** (one-way/service area)	n/a
ATRANS (demand response)	**$0.75** (one-way/service area)	n/a
Rapides SSC	**$5** Adults / **$3** Children (one-way/inside parish)	**$10** (one-way/outside parish)
	$2 (seniors 60+) (on-way/inside town/minimum 3 stops)	**$6** (seniors 60+) (one-way/outside parish)
Vernon COA	**$8** (one-way/inside parish)	**$25** (round trip/outside parish)
	Free (seniors 60+) (one-way/inside parish)	

Operating Trends

The level of service varies widely among transportation providers and types of service in the region, see Figure 3.4. The ARC of Rapides and ATRANS provide the highest number of one-way trips in an average month — 3,504 and 56,294, respectively.

Figure 3.4 Transportation Service Ridership and Cost

2021	Annual One-way Trips	Cost/Trip	Cost/Mile
Avoyelles COA	5,105	$52.52	$2.27
Avoyelles SDD	10,755	n/a	n/a
Catahoula ARC	2,113	n/a	n/a
LaSalle ADD	16,270	n/a	n/a
ATRANS	325,969	$8.69	$7.58
Rapides ARC	42,048	n/a	n/a
Rapides SCC	604	$162.07	$2.19
St. Mary's	10,800	n/a	n/a
Vernon COA	8,939	$42.12	$2.09
Winn COA	6,102	n/a	n/a

Avoyelles Public Transit made 3,587 senior and 29 disabled passenger trips in 2019 — of those, 565 were non-ambulatory. Vernon COA made 5,589 senior and 433 disabled passenger trips in 2019 — of those 2 were non-ambulatory.

[6] 2016 National Transit Database Agency Profile Reports, Transit Provider Interviews, 2018, 2018 DOTD Statewide Transit Tracking and Reporting System, https://transit.dotd.la.gov/login.aspx, 2017 HSTP Transit Provider Survey.

Public Transportation Funding

Due to the COVID-19 pandemic an increase in federal funding have made many of our 5311 transportation providers were 100% federally funded with no required match. While it is projected that this increase in funding will end sometime in 2024, it does mean that finding sources to create the necessary match to acquire federally funding has not been an issue.

However, while this increase in funding drastically helped 5311 programs - there was no such funding available for 5310 programs many of which have either drastically reduced services or have ceased providing services altogether. On the next page, we will look at potential funding options moving forward and other opportunities to assist in funding agencies, particularly the Justice40 initiative which looks at certain factors to determine areas that are disadvantaged - of which many of our regions block groups are.

Operational funding sources in the region vary between urban and rural public transit providers. The majority of funding for public transportation comes from local and federal sources. As shown in Figure 3.6, almost half of all operational funding for rural public transportation providers comes from federal sources (FTA and Medicaid, for example), forty-six percent from local, and four percent from fare revenues. Some agencies also receive funding assistance from state agencies (Governor's Office of Elderly Affairs for senior transportation, OCDD for disabled transportation, for example). The state also contributes matching funds for FTA Formula grants. Inside the Alexandria urbanized area, local sources account for forty-eight percent of operational funding for ATRANS fixed-route and demand response service, twenty-six percent from federal, fifteen percent from fare revenues, and ten percent from the state, see Figure 3.6.

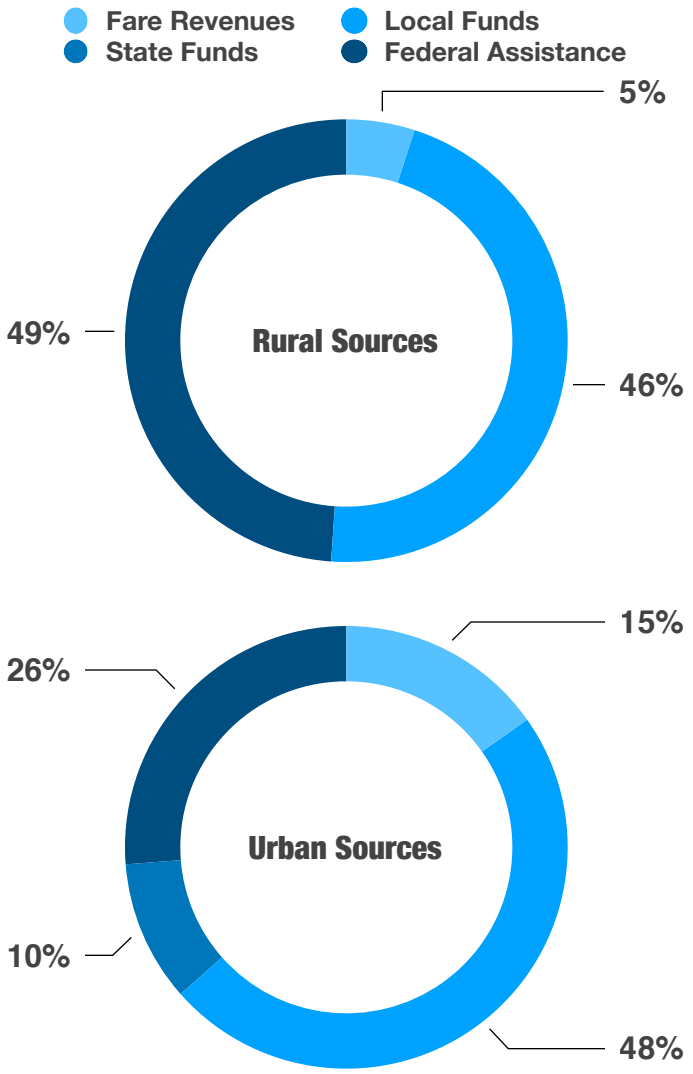


Figure 3.6 Rural & Urban Operational Funding (2016-2021)

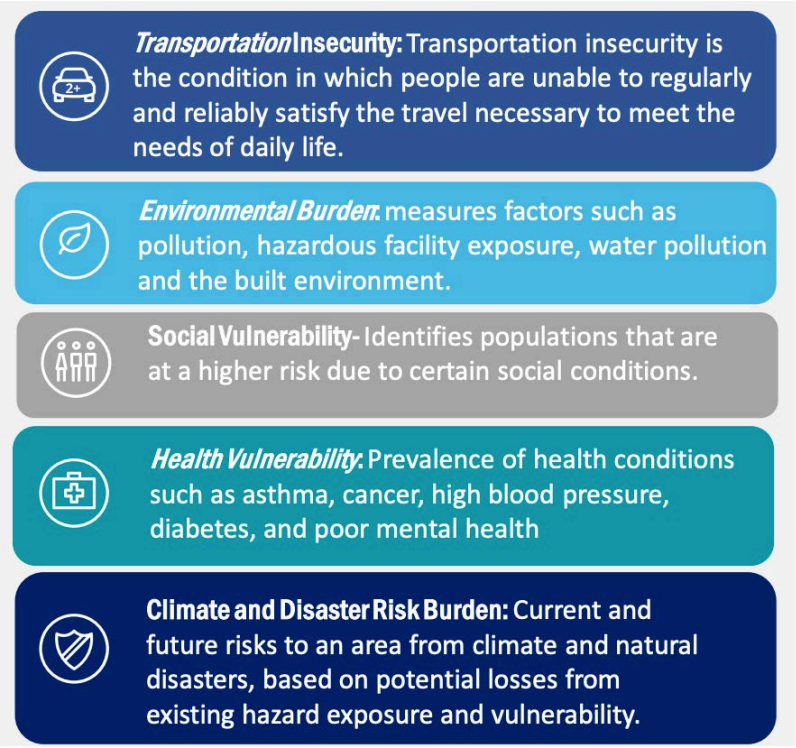
Justice40 Initiative

The Biden-Harris Administration created the Justice40 Initiative to confront and address decades of underinvestment in disadvantaged communities. The initiative will bring resources to communities most impacted by climate change, pollution, and environmental hazards.

The Justice40 (J40) is an opportunity for the Department of Transportation (USDOT) to address gaps in transportation infrastructure and public services by working toward the goal that at least 40% of the benefits from many of our grants, programs, and initiatives flow to disadvantaged communities.

Justice40 is not a one-time investment, nor is it a single pot of money. Rather it is a government wide initiative that makes a series of changes to ensure benefits reach communities most in need. Through Justice40, USDOT will work to increase affordable transportation options, that connect Americans to good-paying jobs, fight climate change, and improve access to resources and quality of life in communities in every state and territory in the country.

The initiative allows USDOT to identify and prioritize projects that benefit rural, suburban, tribal, and urban communities facing barriers to affordable, equitable, reliable, and safe transportation.
Through Justice40, USDOT will also assess the negative impacts of transportation projects and systems on disadvantaged communities and will consider if local community leaders have been consulted in a meaningful way during the project's development.



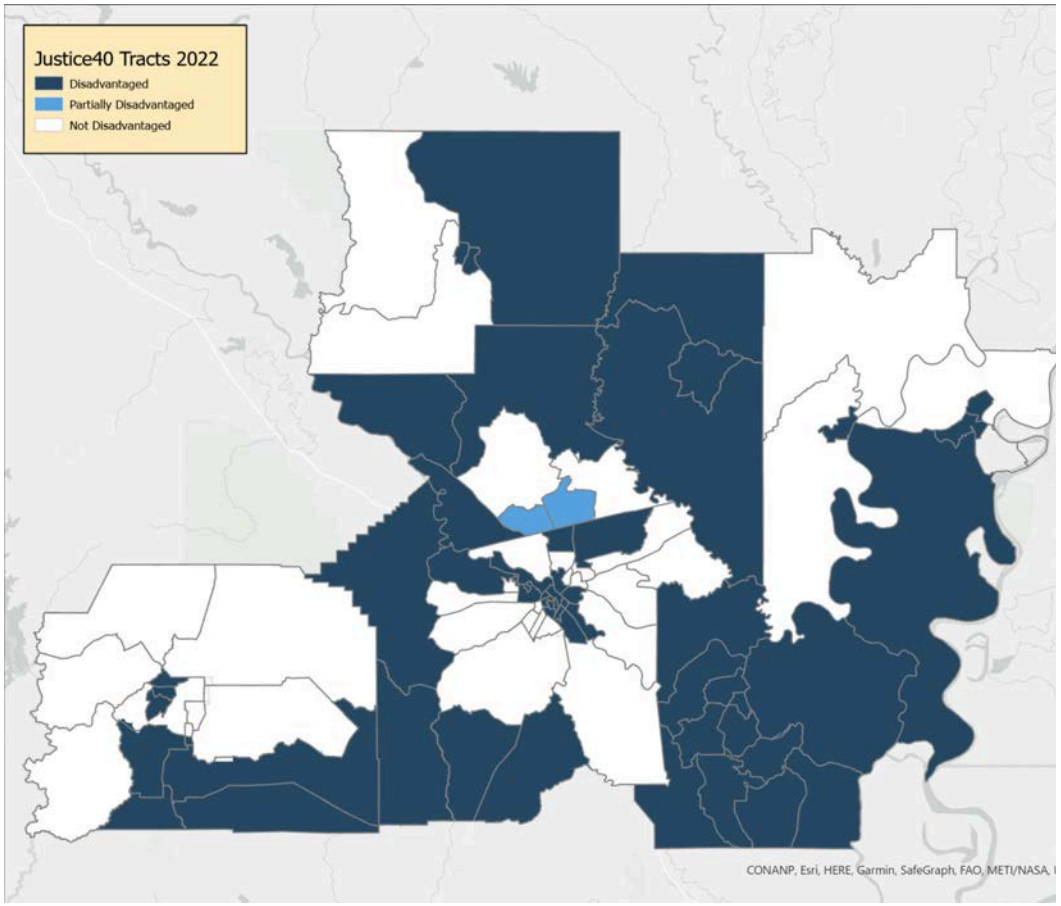
Pulled from: https://www.transportation.gov/sites/dot.gov/files/2023-05/Justice40%20Fact%20Sheetupdated.pdf

Justice40 Contributing Factors:

According to Federal guidelines, there are 8 major factors that are looked at to determine whether an area is Disadvantaged, Partially Disadvantaged, or Not Disadvantaged:

1. Climate Change
2. Water and Wastewater
3. Housing
4. **Transportation**
5. Workforce
6. Energy
7. Legacy Pollution
8. Health

From looking at the map which breaks down Region VI, there are many census tracts that qualify as Disadvantaged. Avoyelles and LaSalle Parishes are the most disadvantaged as the map shows, their entire parishes have been denoted as such. All areas that are disadvantaged or partially disadvantaged have an opportunity to receive extra funding in order to help curb some of aforementioned issues that these tracts are facing.



Since 2020, declining fare revenues, higher operating costs, and funding limitations have resulted in the reduction of transportation resources (staff and vehicles, for example) and a reduced level of service, such as reduced service hours, for both public and non-profit providers throughout the region. Additional dedicated local funding for public transportation operations is need to maintain and potentially expand transportation, especially paratransit, service throughout the region.

Vehicle Fleets

Figure 3.7 shows the number and type of vehicles available for transportation service. In June 2023, the total number of public transportation vehicles available for service in the region is sixty-five — of those 58 are able to assist wheelchair passengers. The primary type of vehicle is a passenger bus with an average of 10-16 seats, followed by 6-10 passenger vans, then 3-5 passenger mini-vans. The average vehicle age in the region is 4.7 years.

The average fleet size for providers in the region is five. The ARC of Rapides has the largest fleet with eighteen vehicles. Vernon COA has the second largest fleet with ten vehicles. ATRANS has a total of eight buses for fixed-route and two vans for demand response service[8]. Four providers in the region have only one available vehicle providing limited transportation service to an entire parish. Aside from ATRANS, all vehicle maintenance is conduced off site.

Figure 3.7 Available Public and Non-Profit Vehicles for Transportation in Region VI[9]

LA_DOTD Vehicle Fleet Update (2022)					
Agency	Total Vehicles	FTA	Agency Owned	Lifts	Funding Source
ARC of Rapides	18	13	5	16	5310
Avoyelles COA	6	6	0	6	5311
ASDD	4	4	0	4	5310
Catahoula ARC	3	2	1	3	5310
LaSalle ADD	6	2	4	3	5310
RSCC	5	5	0	5	5311
St Mary's Residential Training School	4	3	1	4	5310
Town of Ball	1	1	0	1	5310
Vernon COA	10	7	3	9	5311
Winn COA	4	1	3	3	5310
RAPC Transit Pilot	4	4	0	4	5311
Totals	65	45	17	58	

[8] ATRANS Transit Asset Management Plan, July 2018

[9] DOTD Statewide Transit Tracking and Reporting System, https://transit.dotd.la.gov/login.aspx, accessed July 10, 2020.

Provider Destinations
Transportation providers were asked to note the top five destinations to/from which they transport their customers. The top destinations for providers are subject to the provider, their customers' needs, and service restrictions.

Most non-profit transit providers that operate demand response transportation for seniors and people with disabilities operate within their respective parish and provide trips as part of their programming (such as a senior center) or for essential shopping (pharmacy, groceries, banks, for example).

Most out of parish trips in the region are for non-emergency medical transportation and specialized care. Alexandria, Shreveport, and New Orleans were the top out of parish trip locations. In Alexandria, the top designations are Rapides Regional Medical Center, Christus St.Frances Cabrini Hospital, Alexandria VA Medical Center, and the Freedman Clinic. In Shreveport, the top destinations are Shreveport Charity Hospital, LSU Health Shreveport, and Feist-Weiller Cancer Center. LSU Health New Orleans was another top out of parish trip destination[10].

For this 2023 update, the question what was your top five destinations was posed again - in addition to the locations listed in the previous paragraph, most of our providers trip largely focused on the biggest city within their respective parish (i.e., Leesville, Alexandria, etc.) or were specific to a passengers home or their local COA.

[10] Transit Provider Interviews 2018

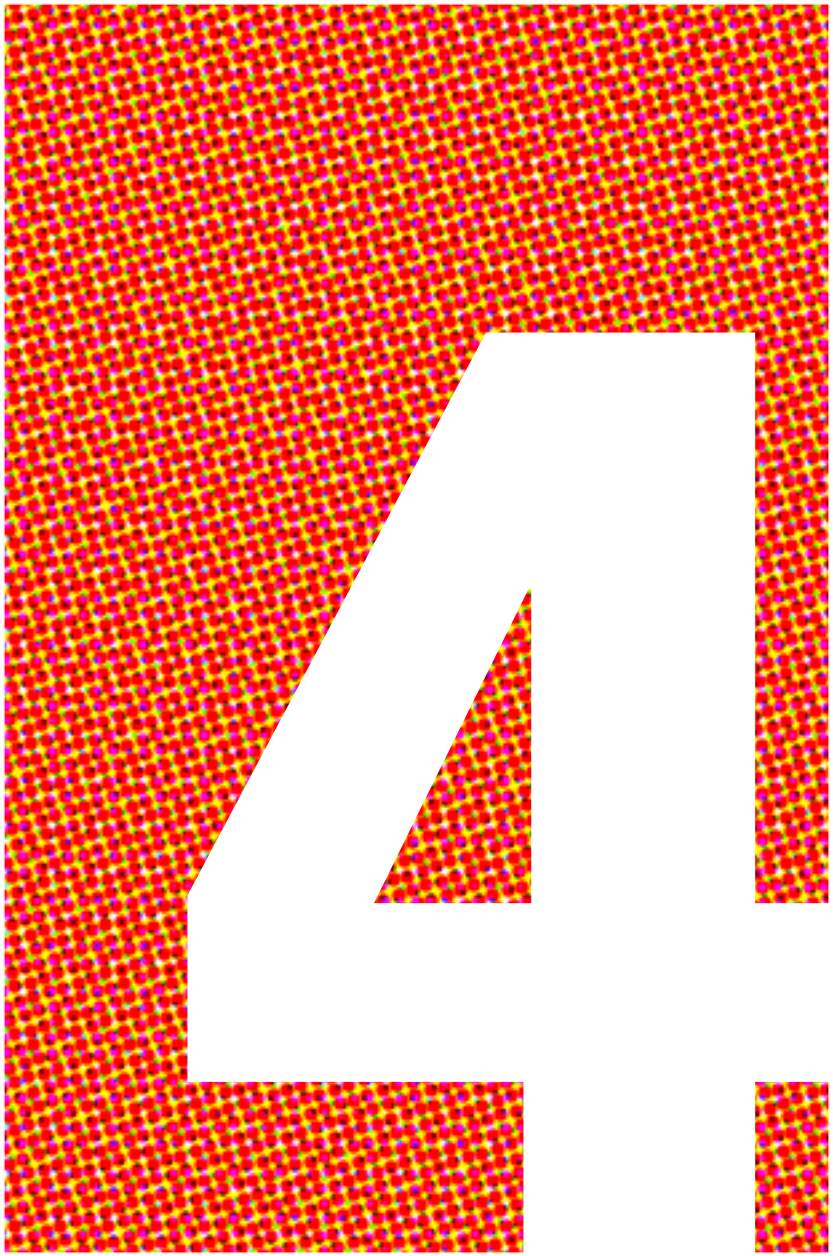
Outreach, Stakeholder Gap Identification and Analysis

As part of this update, 2023 feedback was combined with 2023 demographic assessments and service analysis to reveal high-level gaps in the region's transportation network experienced by seniors, people with disabilities, people with low incomes, and veterans.

- First, 2023 feedback received through conversations with individuals, advocates, and the agencies who serve them, were categorized as either a gap or a solution, and further assigned a theme. Many themes emerged and presented below are the top ten gaps and top five solutions.

- Second, a transit needs index identifies geographic areas of high need within the region using composite data for the four transit dependent population groups, major destinations and employment locations, and existing transit routes. The resulting maps show where clusters of high-need populations live relative to existing transportation services.

- Third, service gaps and overlaps analysis identifies missing service and redundant service in terms of geography, eligibility, day and time, trip type, and accessibility, and presents information related to vehicle utilization and transportation costs. This analysis is used in the next phase of the coordination plan update to identify opportunities for more coordinated services and more efficient use of existing transportation resources so that unmet needs may be addressed.



Summary of Gaps

1. **Funding needs are growing faster that revenues — funding is constrained to support regional mobility.** In the 2020 Coordinated Plan update, a top theme was funding. This continued to be true in feedback gathered for this 2023 Update. Increasing pressure on programs that provide mobility for target populations as additional safety and funding requirements strain available, limited resources. However, many programs at this moment are being fully federally funded due to legislation made to help transit agencies return to pre-COVID service levels. However, this level funding will not be available for much longer. Funding available for transit programs and services are limited or non-existent in parishes without local sales taxes or dedicated funding for transportation. As a result, some providers had reduced service delivery, hours of operation, or discontinued transportation service.

2. **Demand for healthcare access in the region is increasing.** Comments regarding medical transportation needs focused on three types of needs: dialysis transportation, the trend of medical facilities locating in areas difficult to serve by fixed-transit or no fixed-transit available, and lack non-emergency medical transportation options. These needs are highlighted by the fact that the region's population is aging, especially in rural areas where mobility resources are limited. Comments also noted the need for same-day demand-responsive transportation services in the region.

3. **Lack of transportation awareness and information availability and associated referral services.** Also noted in the 2020 Update, additional transportation information and associated referral services is needed. Comments also focused on the need for more real-time information about available transit and paratransit services. A need to increase public awareness of all services and available mobility options was also noted.

4. **Transit access — many comments focused on the lack of availability and accessibility of transit service in the region.** Public transit, fixed-route and demand response, is limited, or unavailable, throughout the region. Transportation access for job, childcare, counseling, and adult education trips were frequently noted. There is also concern about the ability of communities with large disadvantaged populations to sponsor and sustain transportation services due to cost and low availability of local resources. Comments also focused on the lack of accessibility of taxis and regional transit service.

5. **Level of service has declined.** Many agencies do not provide specialized transportation because they cannot afford accessible equipment, qualified drivers, or cannot afford additional fleet insurance. Some agencies have discontinued providing transportation service for shopping and NEMT, since 2015. Many agencies would expand daily number and types of trips provided, but cannot due to a lack of local resources.

6. **Spatial gaps — areas of our region that are either difficult of impossible to reach by public transportation — continue to be a key need expressed throughout the region.** Comments regarding spatial gaps generally highlight the lack of connectivity either within or between urban and rural areas or exacerbated by demographic trends, such as the proportion of the regional population composed of seniors and households with no vehicle

access has increased since 2013.

7. **Long waiting lists for community-based waiver programs limits transportation program eligibility.** Eligibility comments vary by types clients served. Providers noted a long waiver enrollment process for special needs clients seeking transportation. For older adults, eligibility focused on the lack of Medicaid eligibility awareness and eligible trip types.

8. **Temporal gaps — points in time that lack service — also constrain the mobility of target populations.** There is an overall lack of transit and paratransit availability in the evenings and weekends throughout the region. Long travel times also affect those who rely on transit earning hourly wages. Requests for dialysis transportation services at times when transportation is unavailable continue to increase. Wait times for non-emergency medical appointments, long travel times, and limited transit provider hours of operation also limit the availability of transit service. Other comments noted lack of on-time performance and the need to confirm NEMT medical transportation appointments and that the service will be provided.

9. **Lack of available drivers limits transportation access and expansion.** Finding and retaining qualified drivers to operate existing fleets was noted throughout the region. Aside from additional funding, providers noted high driver turn-over rates, lack of back-up drivers, and the need for local driver training opportunities to sustain and expand service delivery. A lack of volunteer driver programs in the region further limits service delivery.

10. **Barriers facilitating trips between the urban and rural ADA paratransit service providers remain.** Also noted in 2018, this is more of a problem for paratransit providers as they often require close coordination between different providers and sometimes different parishes. This has a greater impact on seniors and low-income individuals who require service between rural and urban areas (for employment or specialized non-emergency medical treatment, for example). Other noted challenges regarding reimbursement for trips across parish lines, penalties for trip reroutes or declining trips that fall outside their service area, and a need for patient preferred service assignments.

2020 until Now

In 2020, it was projected that many of the issues transportation agencies were facing had been exacerbated by the COVID-19 pandemic and the restrictions therein. However, many of the issues that had plagued transportation agencies in the past (both before, during, and after COVID)- continue to do so. Although, it has been noted that some of these issues such as driver availability have become less salient since COVID restrictions have been lifted. In addition, for the past three years - for 5311 transit agencies funding has not been a cause for concern - however, this gap still remains as the most prominent as 5310 did not receive the same type of funding and the 100% funding that was available during the pandemic is soon due to end.

Summary of Solutions

In addition to gaps, stakeholders also offered solutions — either things that have been discussed in their parish or new ideas. The summary below describes the top five solutions for emerging mobility services, access to automobiles, fare media, and others. This input was incorporated into the Plan's ultimate strategic recommendations.

Creating new funding streams and increasing the sustainability of other funding streams is a top priority. Comments suggested creating new revenue through local measures, such as a millage. Commenters also advocated for lessening the administrative burden associated with applying for and receiving 5310 and 5311 funds through DOTD, longer-term grants, and new funding for mobility management and coordination activities to ensure that local priorities receive funding.

I**ncrease the availability of non-ADA services for the target populations, and ensure their coordination with ADA paratransit and public transit to address healthcare access and spatial gaps.** Also noted was the need for better coordination to ensure individuals are assigned services closest to their homes and that quality transportation was confined and provided on-time.

Consistent with the information gaps highlighted above, stakeholders also provided several ideas for increasing the availability and efficacy of transportation information. These include:

a. Making comprehensive information about available transportation services available to all human service providers.

b. Offering targeted mobility information at key points of contact (i.e. for seniors at COAs; for discharged patients or families of patients at hospitals)

c. Increasing the availability of real-time information (i.e. "where's my ride?")

Coordination and cooperation could increase cost efficiency and improve service for end users. Underutilized resources, such as school buses at midday, or paratransit vehicles off-peak, could be made available to serve other mobility gaps if a central agency coordinated across various providers. Increased coordination between regional centers and public transit agencies could respond to specific spatial gaps. Transfers between ADA paratransit and fixed-route service could improve the transportation access and reduce travel times.

Rural Public Transit Pilot (RPTC)

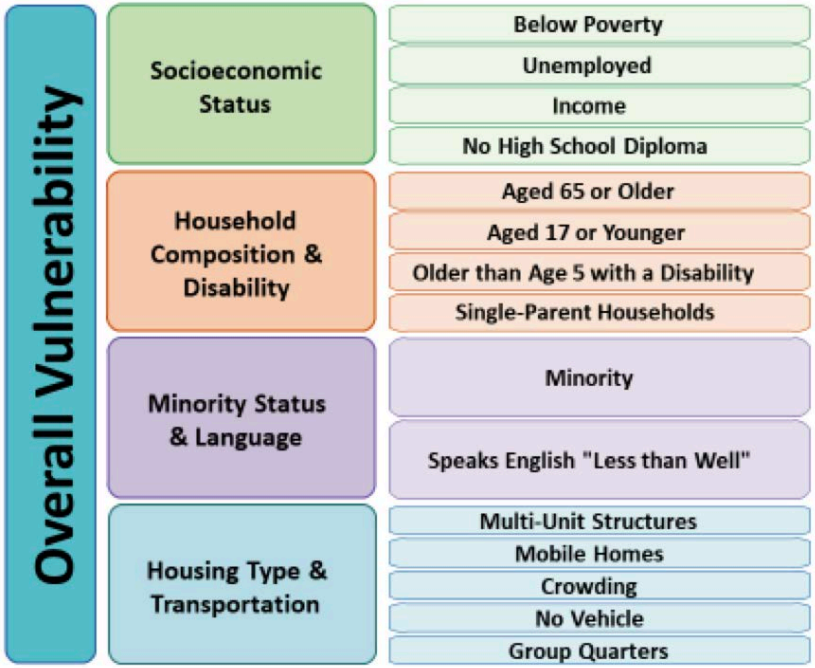
In 2021, our agency drafted a Rural Public Transit Study with The Goodman Corporation. The study highlighted several areas in our region that we highly underserved. Specifically, Grant Parish, which had a high Transit Need and underserved community - yet, had no transit provider. Our agency decided to apply and create our own transit agency to serve the most underrepresented areas in the region and one outside the region. The decision was made to start the pilot program in Grant Parish and Natchitoches Parish, two neighboring parishes with high transit need and no transit providers. Service began in March of 2023 and has continued to show promise.

Transit Needs

The Transit Need is a relative measure that combines the proportion of each of the identified vulnerable population groups that indicate a higher than average likelihood to need, or reliance on public transportation.

The SVI indicates the relative vulnerability of every U.S. Census tract on 15 social factors, including unemployment, minority status, disability, etc., groups them into four related themes: Socioeconomic, Household Composition and Disability, Minority and Language Status, as well as Housing Type and Transportation. Tract rankings are based on percentiles. Percentile ranking values range from 0 to 1, with higher values indicating vulnerability. Percentiles for variables comprising each themes were summed and ordered for each to determine theme-specific rankings for each theme.

Figure 4.X SVI Themes & ACS Data Elements



The transit need index provides an indication of the relative need for transit throughout the market area. It is important to remember that in some cases there may be double counting, as some demographic characteristics are highly correlated, such as age and disability.

Major destinations and major employers are also shown on the transit needs index map, Figure 4.2. This layer helps explain where target population groups want to travel, and if they are able to utilize public transit to get there.

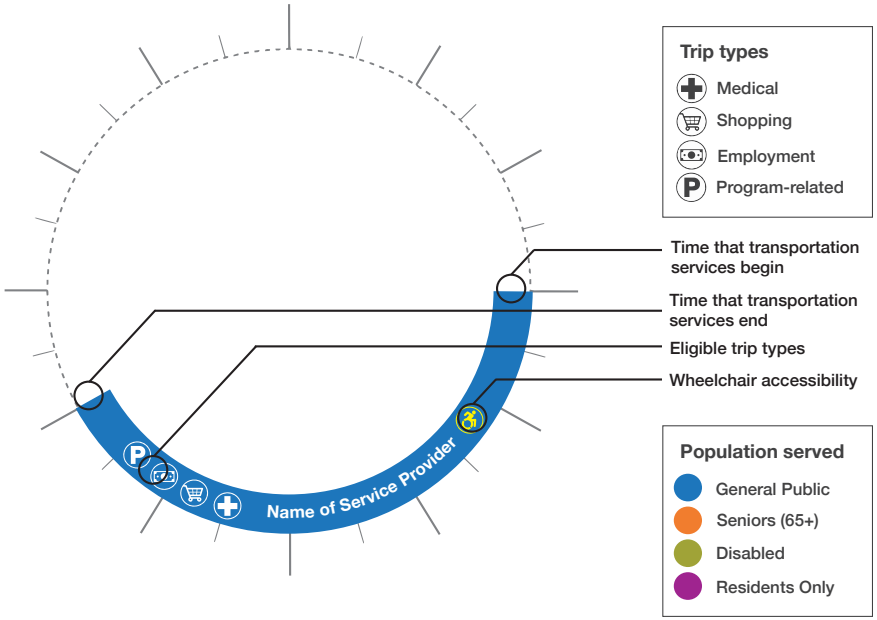
Results of this analysis are shown in Figure 4.2. Key findings include:

- Locations with the highest transit need based on the Transit Need Index (13+ points) are primarily located in Winnfield, Boyce, Pineville, and Alexandria.
- The greatest concentration of census tracts with a transit need of 10 points or greater are found in Rapides, Avoyelles, Winn, and Concordia Parishes. This indicates a high proportion of residents from several of the subgroups with a higher propensity for transit use.
- Most major employers in the region are not accessible by public transportation. For many individuals within the target populations, these employment locations are either not accessible or very expensive to access without assistance from human service organizations.
- Nearly all census tracts with a Transit Need Index score of greater than ten (meaning at least two subgroups live in the census tract in greater densities than the general distribution of the subgroup across the parish) fall outside of the fixed-route service.

Service Gaps and Overlaps

Reducing or eliminating service gaps through coordination or mobility management strategies can make additional resources available for addressing these gaps; showing transportation services and their characteristics together is an easy way to make them apparent. When transportation services and their characteristics are represented together on a graphic or map, it is not unusual to find service gaps or overlaps in terms of the geographic areas, days and hours, or trip purposes that are served, or gaps in the options that are available to certain customer groups because of geographic, temporal, eligibility, or trip purpose restrictions.

The service gaps and overlaps visual model from the Ulster County Coordinated Plan 2016 Update was used to visualize service gaps in Region VI[1]. The graphics below show when services are available for certain population subgroups in Region VI. In addition to presenting the time these services are viable, the graphics also show the legible trip types and whether or not the service providers wheelchair-accessible vehicles.



(Monday-Friday)

[1] Nelson/Nygaard. Ulster County Coordinated Plan 2016 Update. UCTC. 2017. http://ulstercountyny.gov/sites/default/files/documents/planning/ULSTER%20CO%20HSTCP%20Update%202016%20FINAL.pdf

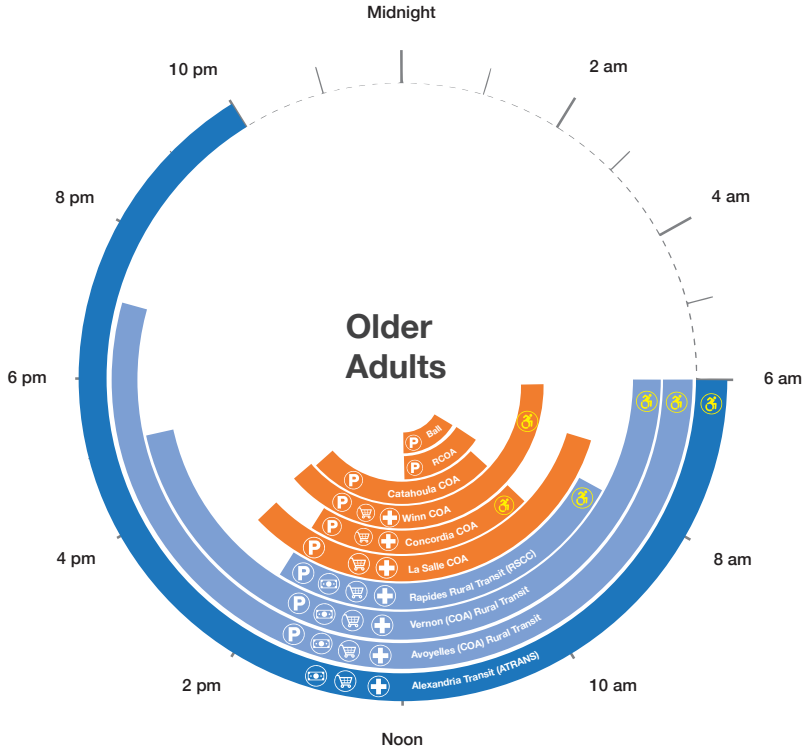
Older Adults

Figure 4.4 shows the availability of transportation services for older adults aged 60 or older in the region. The type and level of service varies by provider and available resources. The average transportation service provided for older adults is for program related, shopping, or non-emergency trips between 7am and 1pm Monday-Friday. There are no transportation service providers for older adults in Grant Parish.

Three providers, Avoyelles COA, Rapides Senior Citizens Center, and Vernon COA, expanded operations to include service for the general public. These providers have resources and offer transportation for all trip types between 6am 3pm, Monday-Friday. ATRANS is the only fixed-route service provider in the region offering demand-response transportation for all trip types with service from 6am-10pm Monday-Friday and the only service in the region on Saturdays. No transportation service for older adults is available on Sundays.

Most providers use wheelchair accessible vehicles except for Catahoula COA, LaSalle COA, Rapides COA, and the Town of Ball.

Figure 4.4 Availability of Services for Older Adults

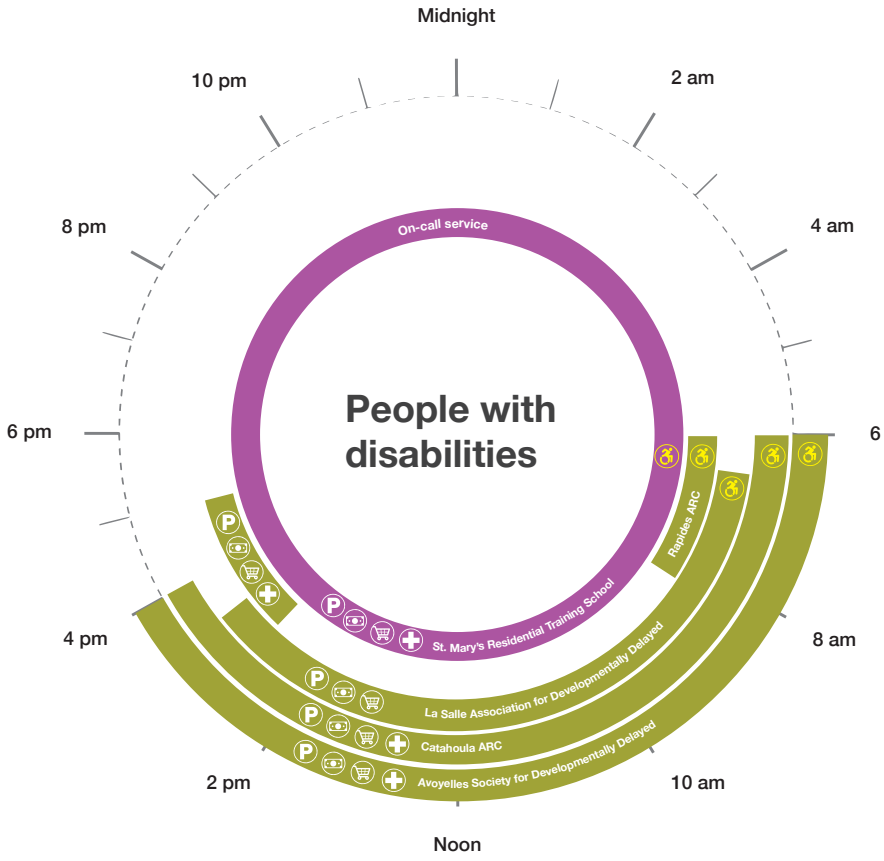


(Monday-Friday)

People with Disabilities

Figure 4.5 shows the availability of transportation services for people with disabilities. The type and level of service varies by provider and available resources. The average transportation service provided for people with disabilities ranges from all trip types to program related and shopping between 7am and 4pm, Monday-Friday. There are no transportation providers for people with disabilities in Winn and Vernon Parishes. CARC provides service for Catahoula and Concordia Parishes.

ARC Rapides, St. Mary's, and Catahoula ARC provide service for all trip types, while ASDD and LADD provide service for program and shopping trips. St. Mary's only serves program residents, providing daily on-call transportation. All providers use wheelchair accessible vehicles.



(Monday-Friday)

(Monday-Friday)

Figure 4.5 Availability of Services for People with Disabilities

RAPC GIS, RAPC Transit Needs Index Summary File, August 2018

Veterans

Figure 4.6 shows when transportation services are available for veterans in the region. Inside the Alexandria-Pineville urban area, ATRANS provides fixed route service to the VA Medical Center between 7am and 9pm Monday-Saturday.

Outside the urbanized area, the Alexandria VA Health Care System operates a special service for disabled veterans between 6am and 5pm Monday-Friday. On-call service is available on Saturdays and no service on Sundays. The service is only for non-emergency medical trips, such as and medical and dialysis appointments.

All vehicles are wheelchair accessible vehicles.

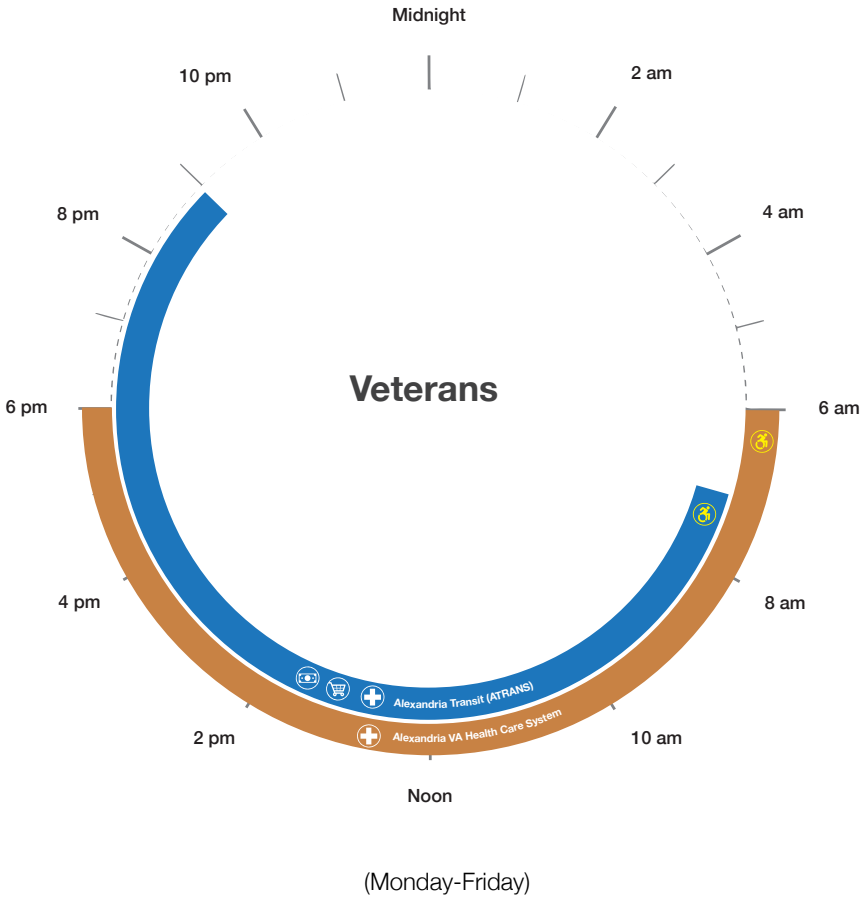


Figure 4.6 Availability of Service for Veterans

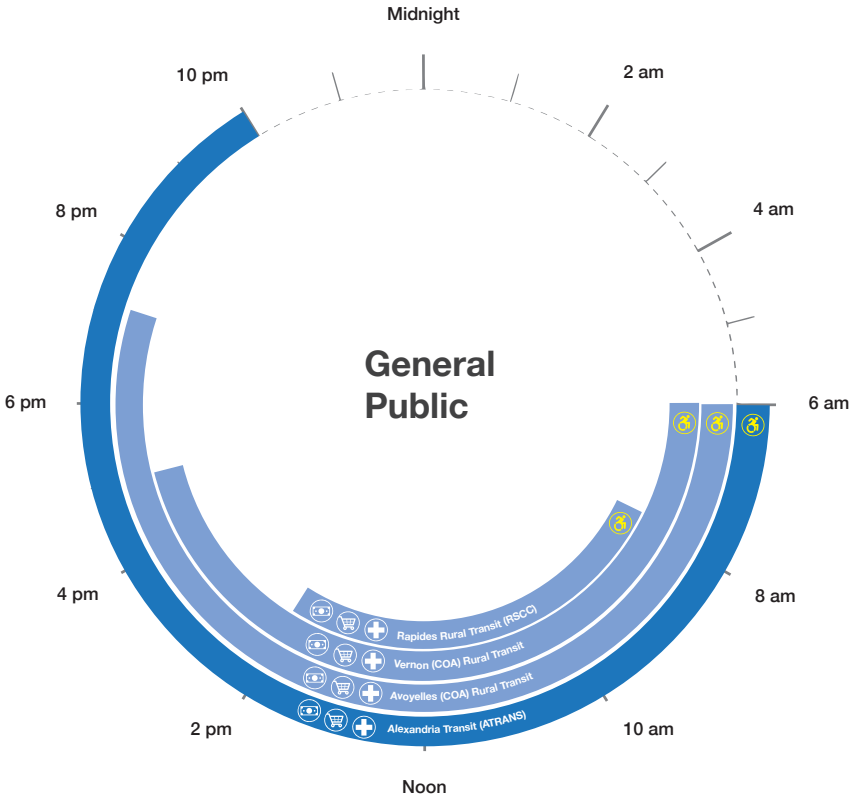
General Public

Figure 4.7 shows the availability of transportation services for the general public from the one fixed-route and three demand responsive transportation providers in Region VI. All four offer transportation service to the general public in different service areas. The ATRANS service area covers the Alexandria-Pineville urbanized area and the RSCC covers rural Rapides Parish. ACOA covers all of Avoyelles Parish and VCOA covers all of Vernon Parish. There are transportation service providers to the general public in Catahoula, Concordia, Grant, LaSalle, and Winn Parishes.

The average of transportation service provided for the general public is for all trip types between 6am and 4pm, Monday-Friday. Rural providers, such as the RSCC, ACOA, and VCOA, average hours of operation are between 5am and 5pm, Monday-Friday. ATRANS operates between 6am and 10pm, Monday-Saturday. No transportation service for general public is available on Sundays.

All providers for general public use wheelchair accessible vehicles.

Figure 4.7 Availability of General Public Transit Service

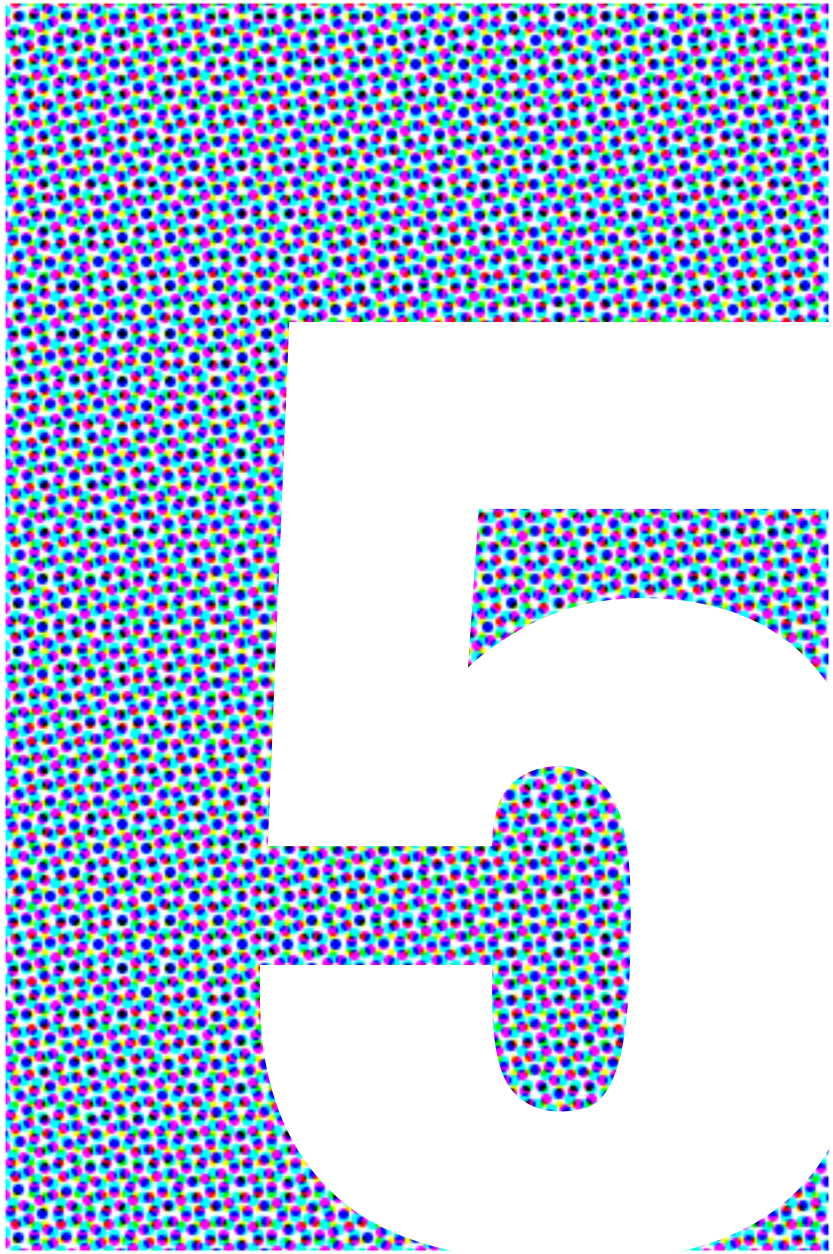


(Monday-Friday)

Overall Service Gaps and Overlaps Findings

Analysis of available transportation providers shows that there are significant disparities among population groups in terms of when services are available, where they live and travel to, and what types of trips are eligible. The main issues include:

- Prior to the pandemic, older adults and people with disabilities are fairly well served by the existing service providers, as long as they are clients of the service provider (i.e. they are eligible for program-related trips). Older adults who are not clients of human service providers are limited to trips provided by the public transit operators and council on aging, which only offers service until 3pm and only serves medical trips and limited shopping trips. People with disabilities who are not clients of human service providers are limited to the public transit operators, which have limited service areas.
- Outside the urbanized area, transportation service for veterans is limited to only one provider, which operates demand-response and on-call service, but only for disabled veterans. In addition, transportation is only available for medical trips.
- Weekend transportation service is limited in the region outside of service for ATRANS (only in Alexandria and Pineville) on Saturdays. Sunday service is not available anywhere in the region. On-call services are available for program residents of St. Mary's, but on a very limited basis.
- Wheelchair-accessible vehicles are generally available for all population groups, except for older adults.
- A lack of transportation services available for target populations outside of program based human service providers that only transport for program or medical trips with limited hours.
- No service available in the evening and on the weekend outside of the fixed route and paratransit service, which is limited geographically.
- A deficiency of transportation for older adults and veterans, especially those living in rural areas and who need to travel for all trip purposes.
- Challenges with the fixed route/paratransit system related to accessibility, coordination, frequency, and hours of operation.
- A lack of transportation options throughout the region.
- Accessibility issues related to infrastructure, information, travel training, wheelchair accessible vehicles.
- Limited options for veterans and for individuals who need to travel for non-medical trips.
- Funding constraints and shortage of qualified drivers limits paratransit service operation and expansion.



Regional Strategies for Coordination

An overview of mobility management strategies that are appropriate for addressing service gaps in Region VI and best practices are presented in this chapter.

Transportation gaps and solutions identified in this Coordinated Plan become eligible for funding through federal funds to regional partners, as well as other funds from state and parish agencies. These eligible solutions are referred to as strategies, and are outlined in Appendix F. Projects are concrete solutions—new vehicles, improved sidewalk infrastructure or accessible bus stops, and software systems are some examples.

Strategies are bigger picture initiatives that stakeholders and RAPC can implement or facilitate. These strategies grow directly from feedback received from user groups, their advocates, and existing local providers of transportation and human services. They are bounded by regional policies, and the powers that RAPC and transit agencies, cities, parishes, non-profits, providers, and other stakeholders have to fund and implement initiatives.

Figure 5.1 Strategies & Implementation Timeline

Ranking	Strategy	Recommendation	Timeline	Outcomes	Evaluation
3	**Close Transportation Gaps**	Create one or more new transportation options, expand current transportation options, or build awareness of existing transportation options to meet transportation needs. To do this, we will need to partner with local funders, social service agencies, the military, and those with transportation challenges to develop and fund transportation solutions in targeted communities throughout the next five years.	BUILD OUT the PROGRAM (next 3 - 5 years)	In accomplishing these objectives, we believe we will have closed at least one transportation gap in Central Louisiana	In 2022, RAPC made the decision to apply for funding to become a 5311 provider for two of the most underserved and in need parishes in our region (Grant and Natchitoches). We were approved for funding and have began service in those two parishes. Our plan is to expand in the next 1-2 years to other parishes that have large underserved populations.
		Provide technical assistance to local governments and non-profits to increase availability of wheelchair accessible transit vehicles to expand the level of service.	MOMENTUM (ongoing)		
2	**Connect the System**	Promote increased coordination between transportation providers and human service agencies to provide more seamless service and increase mobility options. Convene a Task Force to Address Tips between rural and urban transit service providers.	MOMENTUM (ongoing)	In accomplishing these objectives, we believe we will be collaborating together to "connect the system."	In addition to creating a new transportation agency that works to close gaps - we have also enhanced what was once just a coordination effort and adopted a mobility management system - which allows us to work in a more protracted effort to solve long-term issues with coordination within the position of Regional Mobility Manager
		Develop service area agreements and partnerships for collaboration of transportation resources.	INITIAL STEPS (next 1 - 2 years)		
1	**Close Awareness Gaps**	Promote customer-friendly travel training and information referral and assistance services to educate people with special transportation needs on available mobility options and how to use them to meet their mobility needs.	INITIAL STEPS (next 1 - 2 years)	In accomplishing these objectives, key audiences - such as developmental disabilities case managers, and elected officials - are seeing the social, health, and economic benefits of accessing transportation - and are playing an active role in telling the story.	We have continued to host quarterly meetings that remina open to the public as well aas have created a database online that allows the public to go into their region and look at their clostest transportation providers information. In addition to that, we also have created "transit provider profiles" which will allow citizens to see information such as operating hours, types of services, and service area
		Invite discussion and learning with elected officials in cities outside of the public transportation benefit area, specifically within the targeted communities in 2018.	MOMENTUM (next 6 - 12 months)		
		Identify best ways to engage medical and social service agencies in helping people connect with transportation.	MOMENTUM (next 6 - 12 months)		
		Cultivate 4 champions, two from each party, within the state legislature who carries a consistent voice for the Coalition by the end of 2018.	INITIAL STEPS (next 1 - 2 years)		

Recommendations Timeline

The recommended timeline for the immediate and longer-term steps required for RAPC, transit providers, and human services providers to adopt and implement this plan. Figure 5.1 lists each component of the previously described strategies. The recommended timeline for implementing each recommendation is included in the figure. The timeline categorizes the recommendations into the following periods: Keep the Momentum (next 6-12 months), Implement the Basics (next 1-2 years), and Build Out the Program (next 3-5 years). Each recommendation is also marked with the anticipated level of effort required for implementation. These are categorized as minimal, moderate, and high. Additionally, Stakeholders at the Region VI Transportation Community Workshop further ranked strategies by priority and level effort required for implementations.

Progress Reporting

Prior to the next Coordinated Plan Update, RAPC should address progress made to implement strategies listed in this Coordinated Plan. This assessment should include an update to the Commission. The evaluation will provide valuable input the Coordinated Plan's next update, and should not wait until the next planning phase commences, rather an annual progress reporting schedule is recommended.

Best Practice Examples

Regional Mobility Plan (Mid-Ohio Regional Planning Commission):

The Central Ohio Region is home to a diverse group of residents ranging from rural to urban dwellers. It is also a thriving region with growth potential for the future and a need to focus mobility planning on equity for all residents. MORPC population estimates have the region growing from 2.2 million people to a possible 3 million by 2050. The surge of population comes from a growing sector of jobs from fi nance to distribution[1].

Moving Forward (Hudson Valley, NY)[2]:

The New York Metropolitan Transportation Council (NYMTC) has developed its next regional transportation plan, Moving Forward, Your Region Connected (Moving Forward or the Plan). The Plan covers all modes of surface transportation from a regional perspective including highways, streets, public transportation, bicycle and pedestrian facilities, goods movement, and special needs transportation. In addition, it addresses key transportation activities such as operations and management of the transportation system, safety, security, and regional finances.

[1] https://www.morpc.org/wordpress/wp-content/uploads/2022/03/Regional-Mobility-Plan2.pdf

[2] https://www.nymtc.org/movingforward/

Regional Mobility and Accessibility Plan (Arizona DOTD)[3]:
The Regional Mobility and Accessibility Plan (RMAP) is a performance-based, long-range transportation plan for Pima Association of Governments' (PAG) designated planning area, which covers Pima County, Arizona. The 2045 RMAP serves as the federally mandated planning tool for the region's long-range transportation needs and was developed under the regulatory framework of the 2015 Fixing America's Surface Transportation (FAST) Act. The plan provides a framework for the investment of anticipated federal, state and local funds, based on needs, regional goals and objectives.

Coordinated Mobility Plan (Puget Sound Regional Council):
The Coordinated Mobility Plan serves as a coordinated, comprehensive strategy for transportation service delivery that identifies the mobility needs of individuals with transportation challenges due to their age, income, or ability. It lays out strategies for meeting those needs and prioritizes ways to improve them. The plan serves as the central Puget Sound region's Coordinated Transit-Human Services Transportation Plan, meeting federal requirements, and its Human Services Transportation Plan (or HSTP).

[3]https://pagregion.com/wp-content/docs/pag/2021/08/2045_RMAP_Update-2.pdf

APPENDIX A

DEMOGRAPHICS

Figure A.1 Existing 2021 Population Breakdown

2021	Avoyelles Parish		Catahoula Parish		Concordia Parish		Grant Parish		LaSalle Parish		Rapides Parish		Vernon Parish		Winn Parish		Region 6	
	Total	65+	Total	65+	Total	65+	Total	65+	Total	65+	Total	65+	Total	65+	Total	65+	Total	65+
Total Population	38,751	6,975	8,566	1,627	18,116	3,442	22,000	3,520	14,729	2,504	127,189	21,622	47,247	6,142	13,205	2,509	289,803	48,341
% over 65	18%		19%		19%		16%		17%		17%		13%		19%		15%	
% with disability	21%	45%	12%	36%	17%	33%	13%	46%	10%	33%	13%	42%	15%	47%	14%	49%	17%	42%
% below 200% of poverty level	50%	53%	42%	53%	55%	50%	44%	41%	44%	45%	41%	36%	42%	41%	44%	45%	44%	42%
% population who are veterans	8%	18%	6%	15%	5%	13%	9%	18%	6%	18%	10%	21%	19%	26%	6%	16%	10%	20%
% households without vehicle	9%		8%		10%		4%		4%		10%		6%		7%		7%	

SOURCE: 2016 - 21 American Community Survey (ACS), U.S. Census Bureau

APPENDIX B

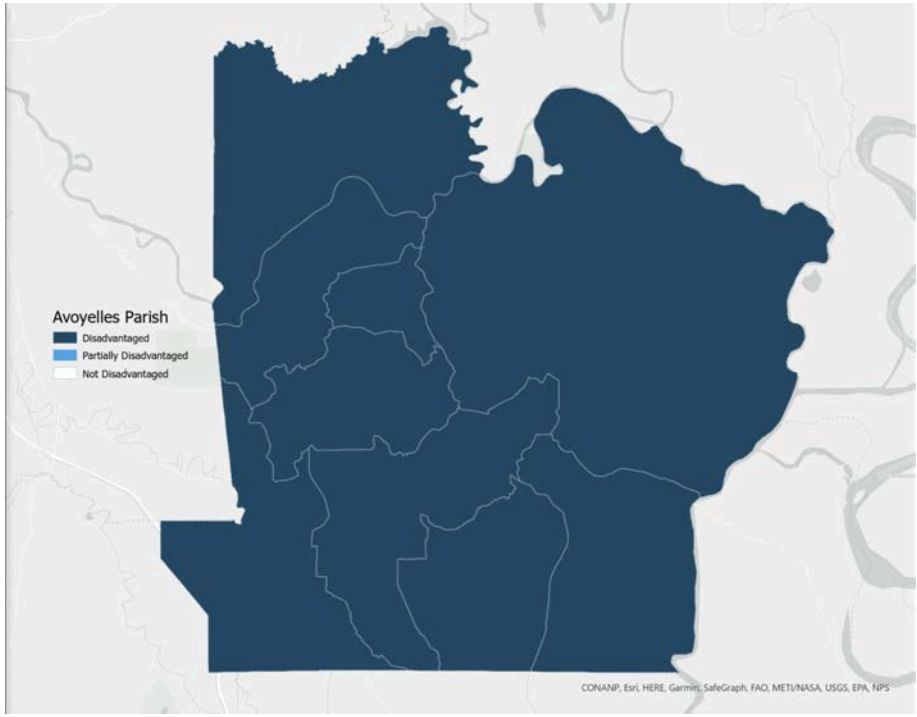
PARISH PROFILES

Figure D.1 Avoyelles Parish Profile

The total population of Avoyelles Parish is 38,751. The median age is 38[1]. The majority of the population in Avoyelles Parish has a high school degree, and 13.9% have a college degree. Avoyelles Parish has a labor force of 15,982 people, with an unemployment rate of 5.1%. Avoyelles Parish has a total of 1,340 businesses. In 2020, the industry in Avoyelles Parish was Agriculture, Forestry, Fishing and Hunting.

2021	Avoyelles Parish	
	Total	65+
Total Population	38,751	6,975
% over 65	18%	
% with disability	21%	45%
% below 200% of poverty level	50%	53%
% population who are veterans	8%	18%
% households without vehicle	9%	

Households in Avoyelles Parish earn a median yearly income of $37,903. Household expenditures average $46,975 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 33 minutes commuting to work[1].

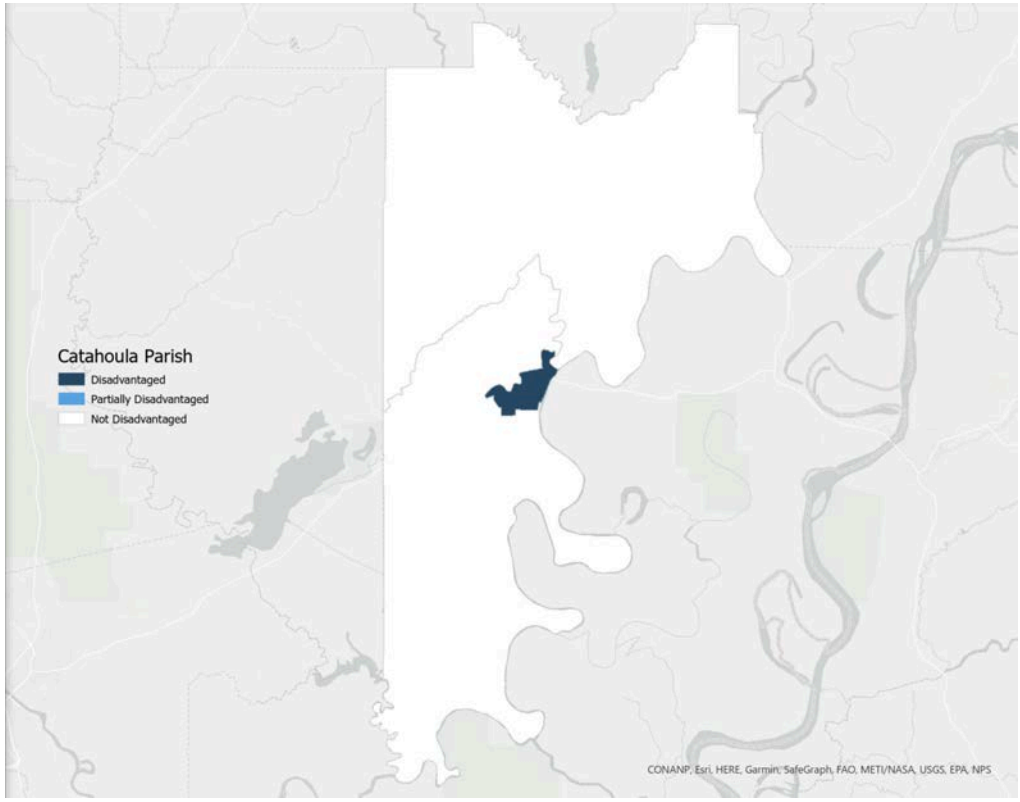


[1] https://www.indexmundi.com/facts/united-states/quick-facts/louisiana/average-commute-time#map

Figure D.2 Catahoula Parish Profile

2021	Catahoula Parish	
	Total	65+
Total Population	8,566	1,627
% over 65	19%	
% with disability	12%	36%
% below 200% of poverty level	42%	53%
% population who are veterans	6%	15%
% households without vehicle	8%	

The total population of Catahoula Parish is 8,566. The median age is 39[1]. The majority of the population in Catahoula Parish has a high school degree, and 14.9% have a college degree. Catahoula Parish has a labor force of 3,863 people, with an unemployment rate of 6.3%. Catahoula Parish has a total of 321 businesses. In 2020, the leading industries in Catahoula Parish were Health Care and Social Services, Public Administration, Retail, and Education. Households in Catahoula Parish earn a median yearly income of $40,973. Household expenditures average $51,487 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 34 minutes commuting to work[2].

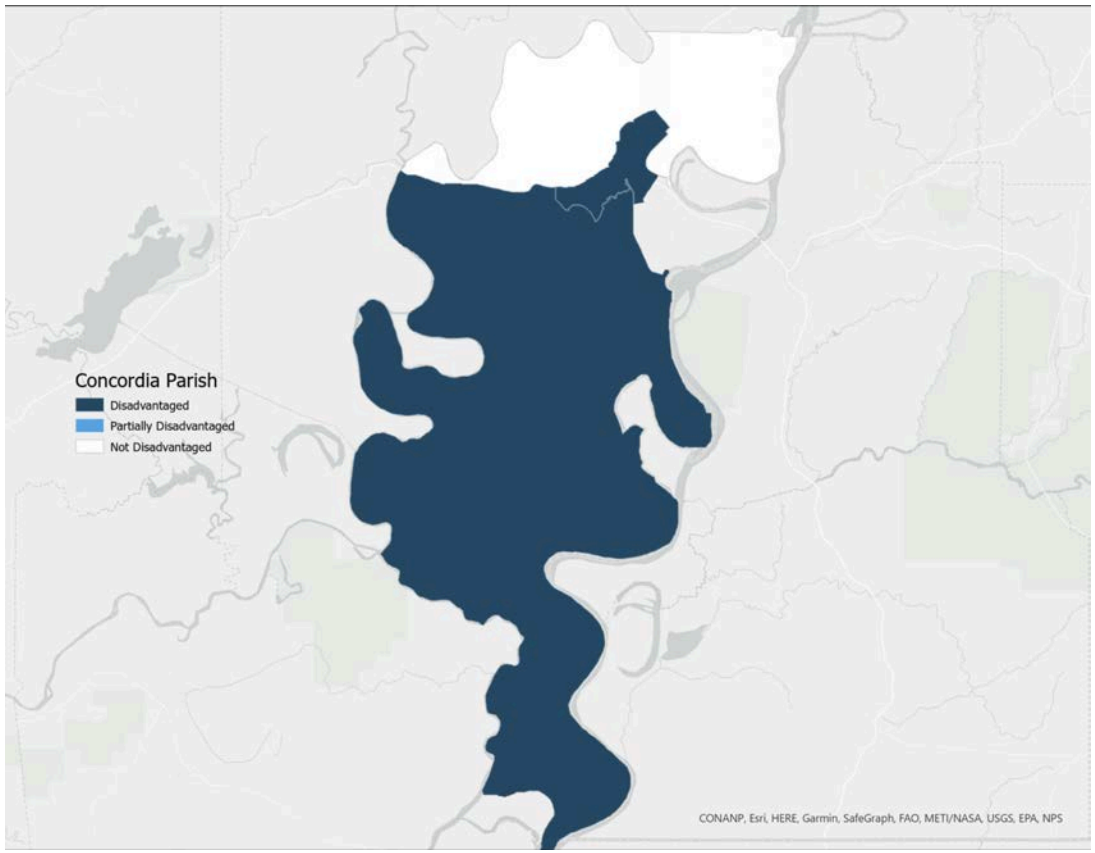


[2] https://www.indexmundi.com/facts/united-states/quick-facts/louisiana/average-commute-time#map

Figure D.3 Concordia Parish Profile

2021	Concordia Parish	
	Total	65+
Total Population	18,116	3,442
% over 65	19%	
% with disability	17%	33%
% below 200% of poverty level	55%	50%
% population who are veterans	5%	13%
% households without vehicle	10%	

The total population of Concordia Parish is 18,116. The median age is 37[1]. The majority of the population in Concordia Parish has a high school degree, and 16% have a college degree. Concordia Parish has a labor force of 7,437 people, with an unemployment rate of 6.2%. Concordia Parish has a total of 814 businesses. In 2020, the leading industries in Concordia Parish were Health Care and Social Services, Retail, Public Administration, and Manufacturing. Households in Concordia Parish earn a median yearly income of $36,157. Household expenditures average $44,585 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 26.2 minutes commuting to work[3].

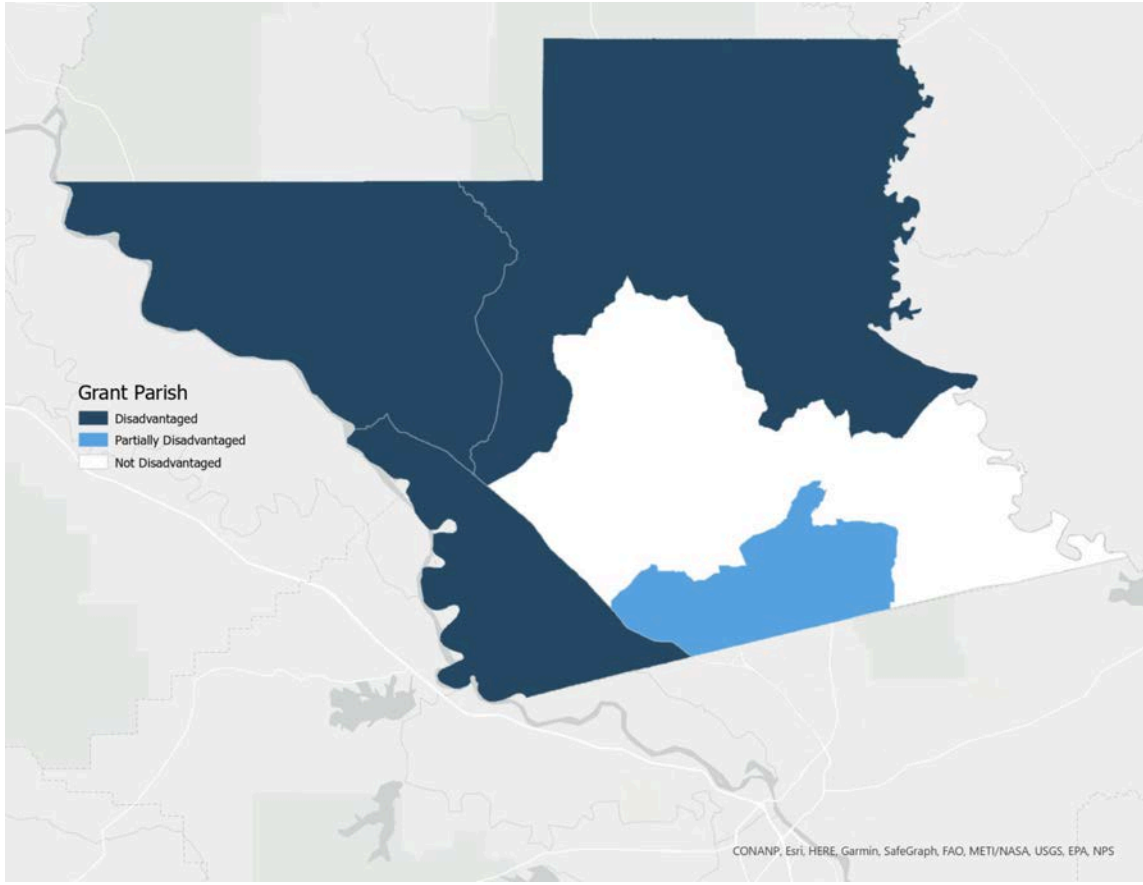


[3] https://www.indexmundi.com/facts/united-states/quick-facts/louisiana/average-commute-time#map

Figure D.4 Grant Parish Profile

2021	Grant Parish	
	Total	65+
Total Population	22,000	3,520
% over 65	16%	
% with disability	13%	46%
% below 200% of poverty level	44%	41%
% population who are veterans	9%	18%
% households without vehicle	4%	

The total population of Grant Parish is 22,000. The median age is 38[1]. The majority of the population in Grant Parish has a high school degree, and 18.6% have a college degree. Grant Parish has a labor force of 7,589 people, with an unemployment rate of 5.1%. Grant Parish has a total of 357 businesses. In 2017, the leading industries in Grant Parish were Public Administration, Retail, Education, and Health Care and Social Services. Households in Grant Parish earn a median yearly income of $52,779. Household expenditures average $45,992 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 34 minutes commuting to work[4].

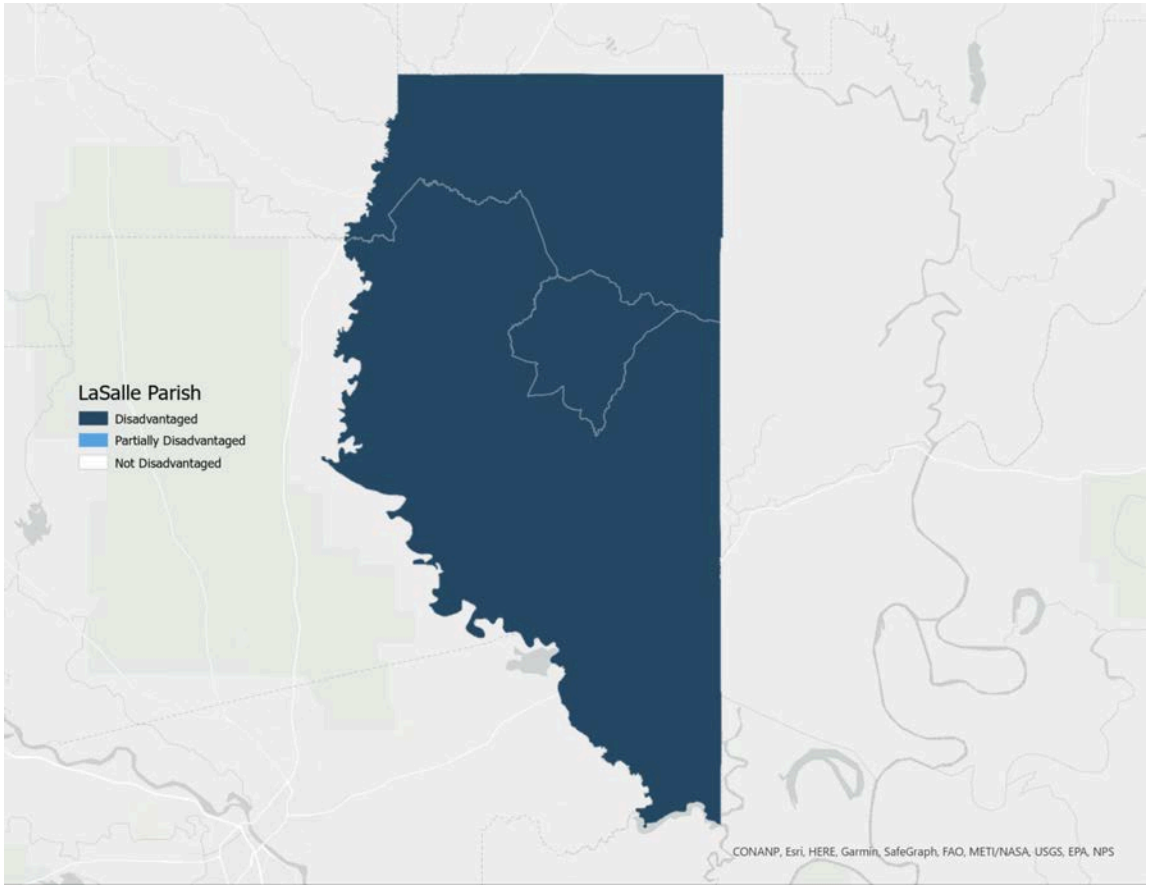


[4] https://www.ksla.com/2022/04/27/parishes-with-worst-commutes-louisiana/

Figure D.5 LaSalle Parish Profile

2021	LaSalle Parish	
	Total	65+
Total Population	14,729	2,504
% over 65	17%	
% with disability	10%	33%
% below 200% of poverty level	44%	45%
% population who are veterans	6%	18%
% households without vehicle	4%	

The total population of LaSalle Parish is 14,729. The median age is 38[1]. The majority of the population in La Salle Parish has a high school degree, and 18.59% have a college degree. La Salle Parish has a labor force of 5,303 people, with an unemployment rate of 4.1%. La Salle Parish has a total of 499 businesses. Households in La Salle Parish earn a median yearly income of $52,205. Household expenditures average $46,366 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 36.9 minutes commuting to work[5].

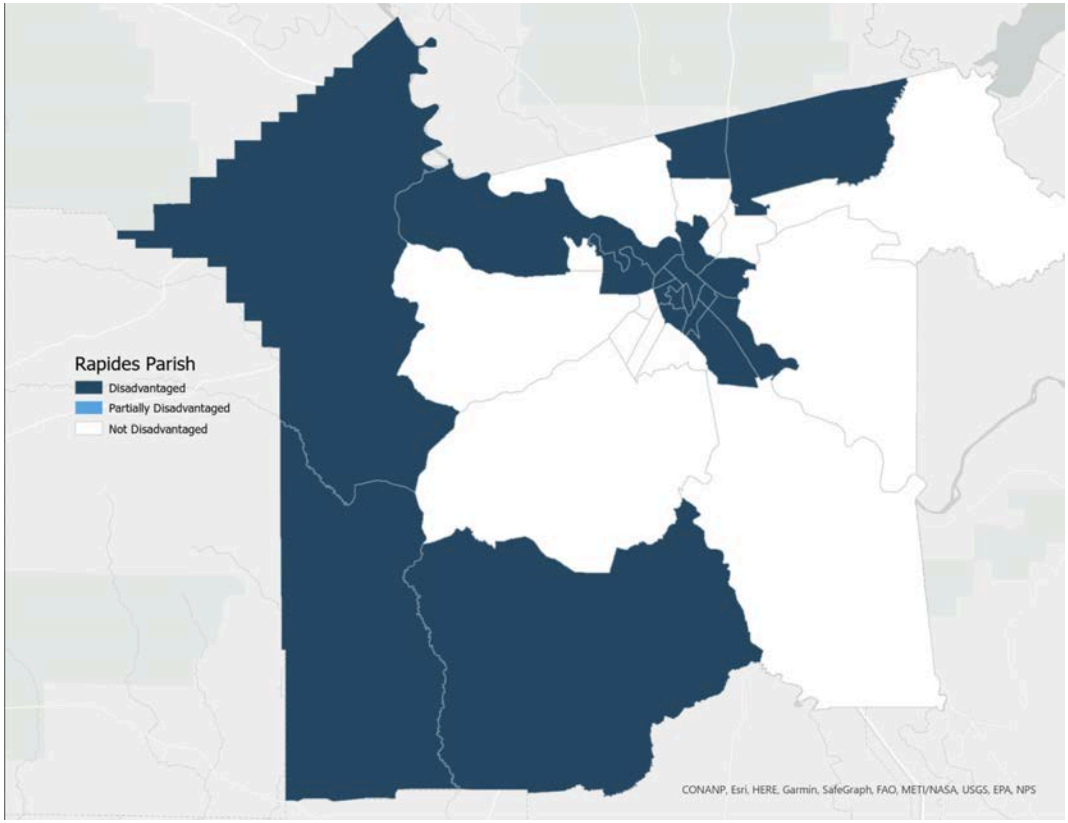


[5] https://www.ksla.com/2022/04/27/parishes-with-worst-commutes-louisiana/

Figure D.6 Rapides Parish Profile

The total population of Rapides Parish is 127,189. The median age is 37[1]. The majority of the population in Rapides Parish has a high school degree, and 25.13% have a college degree. Rapides Parish has a labor force of 57,493 people, with an unemployment rate of 4.6%. Rapides Parish has a total of 5,956 businesses. In 2017, the leading industries in Rapides Parish were Health Care and Social Services, Retail, Public Administration, and Other Services - Repair, Personal Care, Laundry, Religious, etc. Households in Rapides Parish earn a median yearly income of $49,639. Household expenditures average $49,574 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 23 minutes commuting to work[6].

2021	Rapides Parish	
	Total	65+
Total Population	127,189	21,622
% over 65	17%	
% with disability	13%	42%
% below 200% of poverty level	41%	36%
% population who are veterans	10%	21%
% households without vehicle	10%	

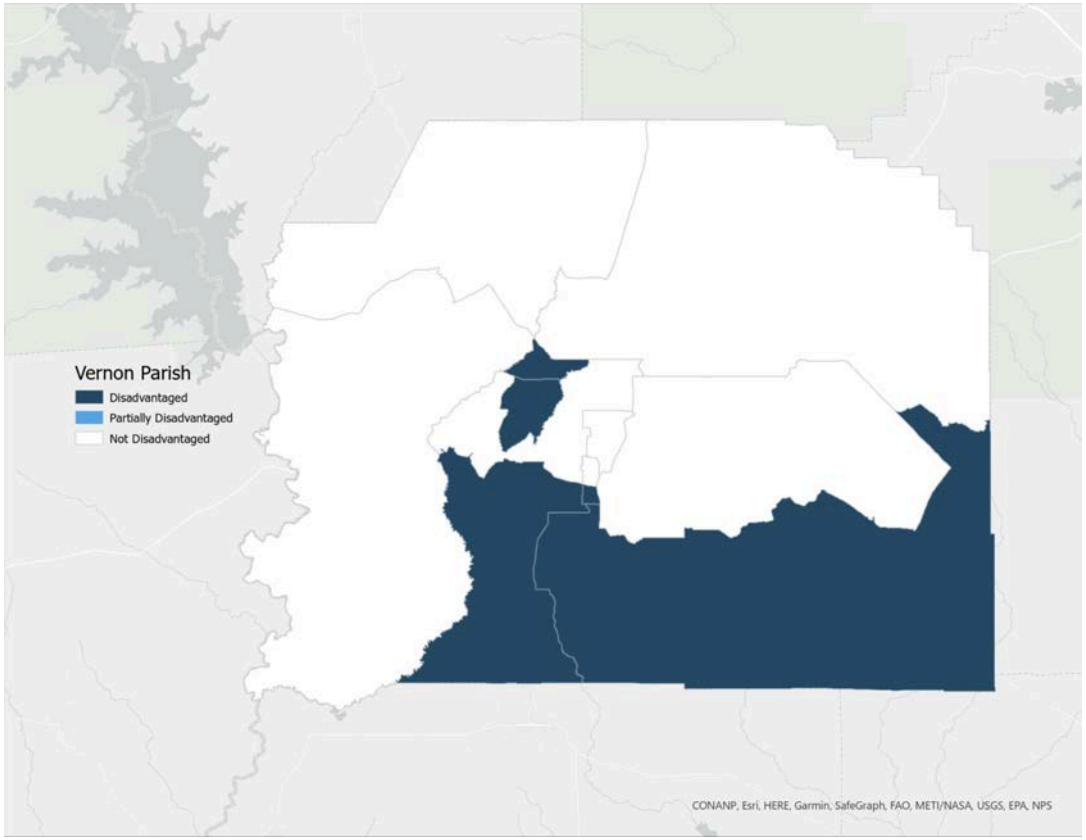


[6] https://www.indexmundi.com/facts/united-states/quick-facts/louisiana/average-commute-time#map

Figure D.7 Vernon Parish Profile

The total population of Vernon Parish is 47,247. The median age is 30[1]. The majority of the population in Vernon Parish has a high school degree, and 25.18% have a college degree. Vernon Parish has a labor force of 23,522 people, with an unemployment rate of 5.5%. Vernon Parish has a total of 1,475 businesses. In 2017, the leading industries in Vernon Parish were Health Care and Social Services, Public Administration, Retail, and Education. Households in Vernon Parish earn a median yearly income of $53,215. Household expenditures average $49,282 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 22 minutes commuting to work[7].

2021	Vernon Parish	
	Total	65+
Total Population	47,247	6,142
% over 65	13%	
% with disability	15%	47%
% below 200% of poverty level	42%	41%
% population who are veterans	19%	26%
% households without vehicle	6%	



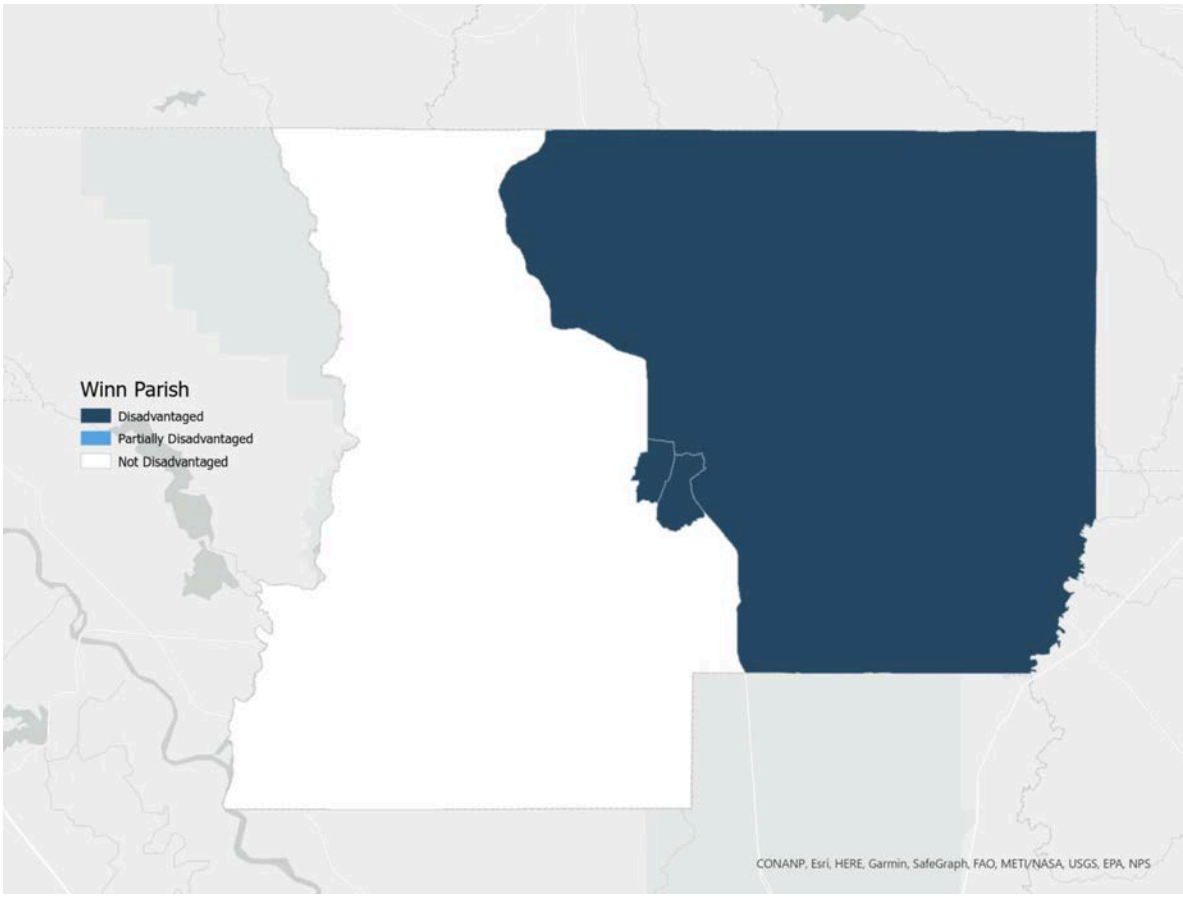
[7]https://www.indexmundi.com/facts/united-states/quick-facts/louisiana/average-commute-time#map

Figure D.8 Winn Parish Profile

The total population of Winn Parish is 13,205. The median age is 41[1]. The majority of the population in Winn Parish has a high school degree, and 19.89% have a college degree. Winn Parish has a labor force of 5,297 people, with an unemployment rate of 5.6%. Winn Parish has a total of 495 businesses. In 2017, the leading industries in Winn Parish were Health Care and Social Services, Wholesalers, Retail, and Manufacturing.

2021	Winn Parish	
	Total	65+
Total Population	13,205	2,509
% over 65	19%	
% with disability	14%	49%
% below 200% of poverty level	44%	45%
% population who are veterans	6%	16%
% households without vehicle	7%	

Households in Winn Parish earn a median yearly income of $43,710. Household expenditures average $47,002 per year. The majority of earnings get spent on Shelter, Transportation, Food and Beverages, Health Care, and Utilities. Residents spend an average of 35 minutes commuting to work[8].



[8]https://www.indexmundi.com/facts/united-states/quick-facts/louisiana/average-commute-time#map

APPENDIX C

TRANSIT PROVIDER PROFILES

TRANSPORTATION PROVIDER PROFILE

1. Organization/Agency Information

Name of agency/organization: Avoyelles Society for the Develop Disabled

Type of organization: ☐ Public ☐ Private ☑ Nonprofit

Name of transportation program: Day hab transportation

Address: 377 Moreau St Marksville, La 71351

Telephone: 318-253-6955 **TTY:** 133 677 **Fax:** 318-240-8373

Website: NA

Member of
☐ Local/national chamber of commerce ☑ Better Business Bureau
☐ Professional membership organization (e.g., CTAA, TLPA, APTA)
Org. name: _____

Receives
☐ federal funding ☐ state funding ☐ local funding ☐ private funding
☑ Medicaid ☐ Veterans-related funding

Contact name: Chasity Cole **Title:** Executive Director

Telephone: 318-253-6955 **E-mail:** asdd@kricket.net

Schedules:
☐ Published schedules/ride guide ☐ on Internet
☐ Recorded information number: _____

Where updates during inclement weather are posted: via phone

2. Service Characteristics

Service area: ☑ local ☐ long distance ☐ commuter/express ☐ shuttle/feeder route

Areas served in the community: Avoyelles Parish

Days/hours of operation:

☑ Monday	Hours:	6A - 3:30p
☑ Tuesday	Hours:	6A - 3:30p
☑ Wednesday	Hours:	6A - 3:30p
☑ Thursday	Hours:	6A - 3:30p
☑ Friday	Hours:	6A - 3:30p
☐ Saturday	Hours:	
☐ Sunday	Hours:	
☐ Holidays	Hours:	

Provides ADA-complementary service? ☐ Yes ☐ No

Type of route:
☑ fixed route ☐ deviated fixed route ☐ demand-response
☐ flexible route ☐ shuttle/circulator ☐ other: _____

Type of schedule: ☑ fixed stops ☐ demand-response scheduling

Type of service: ☐ transit stop ☐ door-through-door ☑ door-to-door ☐ curb-to-curb

Service fee:
☐ sliding scale $ _____
☐ flat rate $ _____
☐ mileage rate $ _____
☐ in-kind payment
☐ discounts available
☐ free
☐ donations accepted
☑ other: Medicaid Rate Waiver

Form of payment accepted:
- ☐ cash
- ☐ debit/credit card
- ☐ transit pass
- ☐ contract only
- ☐ token only
- ☐ transfer coupon
- ☐ ID only (e.g., military, work ID)
- ☐ direct billing to agency
- ☐ smart card
- ☐ voucher

bill Medicaid

Reservations:
- ☐ no reservations needed
- ☐ schedule ____hours/days in advance
- ☐ Cancellation policy: NA
- ☐ same day reservations

3. Vehicles

Average age of fleet: 2018 **Size of fleet:** 4 vans

Insurance?	☑ Yes	☐ No
State/local certification?	☐ Yes	☐ No NA
Head Start compliant?	☐ Yes	☐ No NA

Exp. date: 6/30/2023

Type of vehicles:
- ☐ bus (capacity: _____)
- ☐ taxi
- ☐ private vehicle
- ☑ van (capacity: 12 seat - 2 wheel chair)
- ☐ other

Features:
- ☐ low-floor
- ☐ wheelchair ramp
- ☐ bike rack
- ☐ seat belts
- ☑ 4-wheel drive
- ☑ seat belts
- ☐ talking signs
- ☑ wheelchair lift (weight limit: 1000)
- ☑ wheelchair securement system
- ☑ # of wheelchair spaces: 2
- ☑ accommodates scooters/oversize wheelchairs
- ☐ other _____
- ☐ visual display

4. Drivers

Type of drivers:
- ☑ paid, regular employees
- ☐ volunteer drivers

Driver training:
- ☑ first aid/CPR
- ☑ CDL
- ☑ sensitivity/awareness training
- ☐ child passenger safety
- ☑ wheelchair securement
- ☑ medical emergency procedures
- ☑ PASS (Passenger Service and Safety)
- ☑ defensive driving

Driver testing:
- ☑ Drug/alcohol
- ☑ Criminal background
- ☑ Motor vehicle record
- ☐ Other: _____

Languages spoken (incl. sign language): English

5. Riders

Riders served:
- ☐ general public
- ☑ adults only
- ☐ older adults
- ☑ people w/disabilities
- ☐ teens
- ☐ veterans
- ☐ children
- ☐ other: _____

Rider eligibility criteria: Recipient of ASDD Only

Purpose of rides:
- ☐ medical/health care
- ☑ employment
- ☑ volunteer activities
- ☐ religious events
- ☑ social/recreational activities
- ☐ any purpose
- ☐ childcare
- ☑ shopping

Escorts:
- ☐ escorts provided
- ☐ escorts ride for free
- ☐ escorts NOT provided
- ☐ escorts pay fare $ _____(amount)

Policy on animals: Service Animal allowed

6. Other Features

- ☐ **Travel orientation**
- ☐ **Travel training**
- ☑ **Guaranteed ride home program**

Other: _____

TRANSPORTATION PROVIDER PROFILE

1. Organization/Agency Information

Name of agency/organization: AVOYELLES COUNCIL ON AGING

Type of organization: ☐ Public ☐ Private X Nonprofit

Name of transportation program: AVOYELLES COUNCIL ON AGING, INC./PUBLIC TRANSIT

Address: 224 S. Preston Street Marksville, La. 71351

Telephone: 318-253-9771 **TTY:** 318-253- 9796 **Fax:** 318-253-0267

Website: wwwavoycoa.com

Member of X Local/national chamber of commerce ☐ Better Business Bureau
☐ Professional membership organization (e.g., CTAA, TLPA, APTA)
Org. name:

Receives X federal funding X state funding X local funding ☐ private funding
X Medicaid ☐ Veterans-related funding

Contact name: Sabrina Sonnier **Title:** Executive Director

Telephone: 318-253-9771 **E-mail:** acoasabrinas@bellsouth.net

Schedules: X Published schedules/ride guide ☐ on Internet
☐ Recorded information number:

Where updates during inclement weather are posted: KALB and radion

2. Service Characteristics

Service area: X local X long distance ☐ commuter/express ☐ shuttle/feeder route

Areas served in the community: Avoyelles Parish

Days/hours of operation:

X Monday	Hours: 5:00am to 6:00pm
X Tuesday	Hours: 5:00am to 6:00pm
X Wednesday	Hours: 5:00am to 6:00pm
X Thursday	Hours: 5:00am to 6:00pm
X Friday	Hours: 5:00am to 6:00pm
☐ Saturday	Hours: Closed
☐ Sunday	Hours: Closed
☐ Holidays	Hours: Varies

Provides ADA-complementary service? X Yes ☐ No

Type of route: ☐ fixed route ☐ deviated fixed route X demand-response
☐ flexible route ☐ shuttle/circulator ☐ other:

Type of schedule: ☐ fixed stops X demand-response scheduling

Type of service: ☐ transit stop ☐ door-through-door ☐ door-to-door X curb-to-curb

Service fee: ☐ sliding scale $ ☐ discounts available
☐ flat rate $ See attached ☐ free

☐ mileage rate $ _____ X donations accepted
☐ in-kind payment X other: _____

Form of payment accepted: X cash ☐ token only ☐ smart card
☐ debit/credit card ☐ transfer coupon ☐ voucher
☐ transit pass ☐ ID only (e.g., military, work ID)
☐ contract only ☐ direct billing to agency

Reservations: ☐ no reservations needed X same day reservations
x schedule 1 day hours/days in advance
☐ Cancellation policy: _____

3. Vehicles

Average age of fleet: 4 years old **Size of fleet:** 6

Insurance? X Yes ☐ No **Exp. date:** 7/1/2023
State/local certification? ☐ Yes ☐ No
Head Start compliant? ☐ Yes ☐ No

Type of vehicles: X bus (capacity: 12)
☐ taxi X van (capacity: 5)
☐ private vehicle ☐ other

Features: X low-floor ☐ talking signs ☐ visual display
X wheelchair ramp X wheelchair lift (weight limit: _____)
☐ bike rack X wheelchair securement system
X seat belts # of wheelchair spaces: 2
☐ 4-wheel drive X accommodates scooters/oversize wheelchairs
X seat belts ☐ other _____

4. Drivers

Type of drivers: 4 paid, regular employees ☐ volunteer drivers

Driver training: X first aid/CPR X wheelchair securement
X CDL X medical emergency procedures
X sensitivity/awareness training X PASS (Passenger Service and Safety)
X child passenger safety X defensive driving

Driver testing: X Drug/alcohol X Motor vehicle record
X Criminal background ☐ Other: _____

Languages spoken (incl. sign language): English

5. Riders

Riders served: X general public X people w/disabilities
☐ adults only X teens X children
X older adults X veterans ☐ other: _____

Rider eligibility criteria: _____

Purpose of rides: X medical/health care ☐ religious events ☐ childcare
X employment X social/recreational activities X shopping
☐ volunteer activities X any purpose

Escorts: ☐ escorts provided ☐ escorts NOT provided
X escorts ride for free ☐ escorts pay fare $ _____(amount)

Policy on animals: _____

6. Other Features

☐ **Travel orientation** ☐ **Travel training** ☐ **Guaranteed ride home program**

AVOYELLES COUNCIL ON AGING/PUBLIC TRANSIT

TRANSPORTATION FARES

EFFECTIVE: DECEMBER 1, 2022

SENIOR TO ANY SENIOR CENTER DONATION	$ 1.00
SENIORS IN PARISH DONATION	$15.00
SENIOR GOING OUT OF PARISH DONATION	$30.00
NON-SENIOR (UNDER AGE 60) WITHIN PARISH	$23.00
NON-SENIOR (UNDER AGE 60) OUT OF PARISH	$40.00

TRANSPORTATION PROVIDER PROFILE

1. Organization/Agency Information

Name of agency/organization: Catahoula Council On Aging

Type of organization: ☐ Public ☐ Private ☑ Nonprofit

Name of transportation program: Medical Transportation

Address: 901 First St. Jonesville, LA 71343

Telephone: 318-339-8111 **TTY:** _____ **Fax:** 318-339-8911

Website: catahoulacoa901@gmail.com

Member of ☐ Local/national chamber of commerce ☐ Better Business Bureau
☐ Professional membership organization (e.g., CTAA, TLPA, APTA)
Org. name: _____

Receives ☐ federal funding ☑ state funding ☐ local funding ☐ private funding
☐ Medicaid ☐ Veterans-related funding

Contact name: James Johnson **Title:** Executive Director

Telephone: 318-339-8111 **E-mail:** catahoulacoa901@gmail.com

Schedules: ☐ Published schedules/ride guide ☐ on Internet
☐ Recorded information number: _____

Where updates during inclement weather are posted: _____

2. Service Characteristics

Service area: ☑ local ☐ long distance ☐ commuter/express ☐ shuttle/feeder route

Areas served in the community: Jonesville and surrounding area

Days/hours of operation:

☑ Monday	Hours:	9-3
☑ Tuesday	Hours:	9-3
☑ Wednesday	Hours:	9-3
☑ Thursday	Hours:	9-3
☑ Friday	Hours:	9-3
☐ Saturday	Hours:	
☐ Sunday	Hours:	
☐ Holidays	Hours:	

Provides ADA-complementary service? ☑ Yes ☐ No

Type of route: ☐ fixed route ☐ deviated fixed route ☐ demand-response
☑ flexible route ☐ shuttle/circulator ☐ other: _____

Type of schedule: ☐ fixed stops ☑ demand-response scheduling

Type of service: ☐ transit stop ☐ door-through-door ☐ door-to-door ☑ curb-to-curb

Service fee: ☐ sliding scale $ _____ ☐ discounts available
☐ flat rate $ _____ ☑ free
☐ mileage rate $ _____ ☐ donations accepted
☐ in-kind payment ☐ other: _____

Form of payment accepted:
☐ debit/credit card
☐ cash
☐ transfer coupon
☐ transit pass
☐ contract only
☐ token only
☐ voucher
☐ ID only (e.g., military, work ID)
☐ direct billing to agency
☐ smart card

Reservations:
☐ no reservations needed
☐ schedule 7 hours/(days) in advance
☐ Cancellation policy: _____
☐ same day reservations

3. Vehicles

Average age of fleet: 4 years
Size of fleet: 3

Insurance? ☑ Yes ☐ No
Exp. date: May 2023
State/local certification? ☐ Yes ☐ No
Head Start compliant? ☐ Yes ☐ No

Type of vehicles:
☐ bus (capacity: _____)
☐ taxi
☐ private vehicle
☑ van (capacity: 8)
☐ other

Features:
☐ low-floor
☐ wheelchair ramp
☐ bike rack
☑ seat belts
☐ 4-wheel drive
☐ seat belts
☐ talking signs
☐ wheelchair lift (weight limit: _____)
☐ wheelchair securement system
☐ # of wheelchair spaces: _____
☐ accommodates scooters/oversize wheelchairs
☐ other Step down ramp
☐ visual display

4. Drivers

Type of drivers:
☑ paid, regular employees
☐ volunteer drivers

Driver training:
☐ first aid/CPR
☐ CDL
☐ sensitivity/awareness training
☐ child passenger safety
☐ wheelchair securement
☐ medical emergency procedures
☐ PASS (Passenger Service and Safety)
☐ defensive driving

Driver testing:
☑ Drug/alcohol
☑ Criminal background
☑ Motor vehicle record
☐ Other: _____

Languages spoken (incl. sign language): _____

5. Riders

Riders served:
☐ general public
☐ adults only
☑ older adults
☐ people w/disabilities
☐ teens
☐ veterans
☐ children
☐ other: _____

Rider eligibility criteria: Persons must be clients of Catahoula Council On Aging

Purpose of rides:
☑ medical/health care
☐ employment
☐ volunteer activities
☐ religious events
☑ social/recreational activities
☐ any purpose
☐ childcare
☐ shopping

Escorts:
☐ escorts provided
☐ escorts ride for free
☑ escorts NOT provided
☐ escorts pay fare $ _____(amount)

Policy on animals: Only medical assist

6. Other Features

☐ **Travel orientation** ☐ **Travel training** ☐ **Guaranteed ride home program**

Other: _____

TRANSPORTATION PROVIDER PROFILE

1. Organization/Agency Information

Name of agency/organization: Catahoula ARC

Type of organization: ☐ Public ☐ Private ☑ Nonprofit

Name of transportation program: _____

Address: 810 First Street (P.O. Box 789) Jonesville, LA 71343

Telephone: (318) 339-8176 **TTY:** _____ **Fax:** (318) 339-7716

Website: _____

Member of
☐ Local/national chamber of commerce ☐ Better Business Bureau
☐ Professional membership organization (e.g., CTAA, TLPA, APTA)
Org. name: _____

Receives
☐ federal funding ☐ state funding ☐ local funding ☐ private funding
☑ Medicaid ☐ Veterans-related funding

Contact name: Cathy Tullos/Debbie Manning **Title:** Transportation Clerk/Administrator

Telephone: (318) 339-8176 **E-mail:** carccenter@bellsouth.net

Schedules:
☐ Published schedules/ride guide ☐ on Internet
☐ Recorded information number: N/A

Where updates during inclement weather are posted: Facebook Page

2. Service Characteristics

Service area: ☑ local ☐ long distance ☐ commuter/express ☐ shuttle/feeder route

Areas served in the community: Catahoula & Concordia Parishes

Days/hours of operation:

☑	Monday	Hours: 6:30 - 4:30
☑	Tuesday	Hours: 6:30 - 4:30
☑	Wednesday	Hours: 6:30 - 4:30
☑	Thursday	Hours: 6:30 - 4:30
☑	Friday	Hours: 6:30 - 4:30
☐	Saturday	Hours:
☐	Sunday	Hours:
☐	Holidays	Hours:

Provides ADA-complementary service? ☐ Yes ☐ No

Type of route:
☑ fixed route ☐ deviated fixed route ☐ demand-response
☐ flexible route ☐ shuttle/circulator ☐ other: _____

Type of schedule: ☑ fixed stops ☐ demand-response scheduling

Type of service: ☐ transit stop ☐ door-through-door ☑ door-to-door ☐ curb-to-curb

Service fee:
☐ sliding scale $ _____ ☐ discounts available
☐ flat rate $ _____ ☐ free
☐ mileage rate $ _____ ☐ donations accepted
☐ in-kind payment ☑ other: Paid by Medicaid

Form of payment accepted:
- ☐ cash
- ☐ debit/credit card
- ☐ transit pass
- ☐ contract only
- ☐ token only
- ☐ transfer coupon
- ☐ ID only (e.g., military, work ID)
- ☑ direct billing to agency
- ☐ smart card
- ☐ voucher

Reservations:
- ☑ no reservations needed
- ☐ schedule ____hours/days in advance
- ☐ Cancellation policy: _____
- ☐ same day reservations

3. Vehicles

Average age of fleet: 2016 **Size of fleet:** 5

Insurance?	☑ Yes	☐ No
State/local certification?	☐ Yes	☐ No
Head Start compliant?	☐ Yes	☐ No

Exp. date: 6/30/2023

Type of vehicles:
- ☑ bus (capacity: 2018/12+Driver,2019/8+Driver)
- ☐ taxi
- ☐ private vehicle
- ☑ van (capacity: 2012/8+Driver)
- ☐ other 2015/4+Driver, 2016/12+Driver

Features:
- ☐ low-floor
- ☑ wheelchair ramp
- ☐ bike rack
- ☑ seat belts
- ☐ 4-wheel drive
- ☑ seat belts
- ☐ talking signs
- ☑ wheelchair lift (weight limit: _____)
- ☑ wheelchair securement system
- ☑ # of wheelchair spaces: 2019/2 Spaces
- ☐ accommodates scooters/oversize wheelchairs
- ☐ other_____
- ☐ visual display

4. Drivers

Type of drivers:
- ☑ paid, regular employees
- ☐ volunteer drivers

Driver training:
- ☑ first aid/CPR
- ☐ CDL (Chauffeur's License)
- ☑ sensitivity/awareness training
- ☐ child passenger safety
- ☑ wheelchair securement
- ☑ medical emergency procedures
- ☐ PASS (Passenger Service and Safety)
- ☑ defensive driving

Driver testing:
- ☐ Drug/alcohol (we have a policy)
- ☑ Criminal background
- ☑ Motor vehicle record
- ☑ Other: Rights,Abuse,Discrimination

Languages spoken (incl. sign language): English

5. Riders

Riders served:
- ☐ general public
- ☐ adults only
- ☐ older adults
- ☑ people w/disabilities
- ☐ teens
- ☐ veterans
- ☐ children
- ☐ other: _____

Rider eligibility criteria: Developmentally Delayed Adults

Purpose of rides:
- ☑ medical/health care
- ☑ employment
- ☑ volunteer activities
- ☑ religious events
- ☑ social/recreational activities
- ☐ any purpose
- ☐ childcare
- ☑ shopping

Escorts:
- ☐ escorts provided
- ☐ escorts ride for free
- ☐ escorts NOT provided
- ☐ escorts pay fare $ _____(amount)

Policy on animals: N/A

6. Other Features

- ☐ **Travel orientation**
- ☐ **Travel training**
- ☐ **Guaranteed ride home program**

Other: N/A

APPENDIX D

MOBILITY MANAGEMENT DEFINED

APPENDIX E

PROJECT ELIGIBLE FOR FUNDING

APPENDIX F

PLAN ADOPTION