

MSB Coordinated Human Services Transportation Plan 2018-2022

MATANUSKA-SUSITNA BOROUGH
MAT-SU HEALTH FOUNDATION

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EXECUTIVE SUMMARY

Access to effective transportation services fulfills several basic needs for many of the Matanuska-Susitna Borough's residents. This includes access to healthcare, employment, and basic nutrition for those who would otherwise have no way of accessing critical services.

The Mat-Su Borough has partnered with the Mat-Su Health Foundation (MSHF) to update the Borough's Coordinated Human Services Transportation Plan (CHSTP) and advance Borough-wide service coordination. This plan will be used to further the community vision and mission for public transit and human service transportation:

| Vision | Mission |
|--|---|
| A sustainable, multi-modal transportation network that effectively meets the transportation needs of Mat-Su Borough residents of all ages and abilities. | To enhance mobility for senior citizens, individuals with disabilities, individuals with low incomes, and other groups lacking adequate transportation in the Mat-Su Borough through improved public transit and human service transportation coordination. |

Plan Requirements

In order to be eligible for Federal Transit Administration (FTA) or Alaska Mental Health Trust funds through the Alaska DOT&PF Alaska Community Transit office (ACT), projects must be derived from a locally developed, coordinated plan that is updated at least every five (5) years. The 2018-2022 Coordinated Human Services Transportation Plan (CHSTP) serves this purpose. The plan was developed using demographic data, information on available transportation resources & services, and stakeholder engagement. FTA 5310 grants through the Fixing America's Surface Transportation (FAST) Act and Alaska Mental Health Trust funding each focus on the transportation needs of disadvantaged persons and those with special transportation needs that cannot be met through traditional personal automobile or public transportation means.

Population and Transportation Need

The Matanuska-Susitna Borough is the fastest-growing borough in Alaska¹, with an estimated population of 106,532 in 2017.² This is projected to grow to 169,418 by 2040.³

The **2016 Mat-Su Community Health Needs Assessment** found that transportation is the number one factor that affects the health of Mat-Su residents. The lack of public transportation is a barrier to accessing both primary care and specialty services. The report found that many residents are unaware of the transportation resources that do exist. Some cannot afford to use them, even when they are

¹ Neal Fried, "The Matanuska Susitna Borough: Growth continues to eclipse rest of Alaska," *Alaska Economic Trends*, December 2010, 12.

² American Community Survey, 2017 Population Estimates Program. Accessed 2018.

³ Alaska Department of Labor and Workforce Development, Research and Analysis Section

offered. Residents reported that there are limited hours of operation that make it difficult to schedule, especially when needing multiple healthcare appointments on the same day.

Key Findings on Populations Often in Need of Transportation

- Seniors: The number of seniors is expected to continually increase through 2045. Currently, the highest concentration of seniors is in the Borough's core area, especially southwest of Wasilla (2016).⁴
- Disabled Residents: In 2016, 12.1% of Borough residents had a disability - 39.3% of Borough residents age 65 and over had a disability, as well as 23.3% of Mat-Su veterans.
- Low Income Residents: 9.7% of the Borough population has an income below the poverty level – including 5% of Mat-Su older residents over age 65.
- Zero Vehicle Households: 3.3% of occupied housing units did not have an available vehicle in 2016. The highest general concentration of zero-vehicle households in the core area.

Available Transportation Resources

There are several categories of public transit and health and human service transportation in the Mat-Su Borough:

- Non-profit Transit Providers (Valley Transit, Chickaloon Area Transit System, Sunshine Transit)
- Private Providers (e.g. J&J Independent Living, A Cab, Alaska Cab)
- Health and Human Services Providers:
 - Providers who help clients/patients obtain and use Medicaid and other vouchers or provide subsidized transportation
 - Providers who bring their clients in to their services (Client Access providers);
 - Providers who transport their clients where they need to go in the community (Community Access providers);
 - Providers who use transportation in their service delivery (Service-related providers)

Organizations that provide transportation for their clients to access their services or services in the community range from early learning centers to senior centers. Some of these organizations claim that the nonprofit transit system does not adequately serve their clients, and they need to provide this service. Many of these organizations serve specialized populations (e.g. homeless youth, seniors, Alaska Native people, Prisoner re-entry population).

Key Findings Related to Available Transportation Resources

- The overall ridership of the three nonprofit transit providers totals 80,028 rides per year. The majority of these rides are provided by Valley Transit for commuter riders to and from Anchorage. Sunshine Transit provides the most non-commuter rides each year (16,124) followed by Valley Transit (10,944) and CATS (2,500).
- For-profit providers provide a significant number of rides to Borough residents each year—well over the amount provided by nonprofit providers (300,000 rides per year) – many of these are Medicaid funded and for residents to access health and human services.

⁴ 2012-2016 American Community Survey 5-Year Estimates.

- In the last year, almost 4 out of 10 calls to 911 for emergency medical services were of a low severity – 1,619 of these calls resulted in EMS transportation being provided to the Emergency Department. Using EMS for non-emergency transportation is very expensive.
- Health and human service providers have a larger combined vehicle fleet than the nonprofit transit providers.
- There is little or no coordination between transit providers and health and human service providers in terms of sharing a dispatch platform, vehicle maintenance, route coordination, or contracting for services and resources they all need.

Recipient and Provider Stakeholder Feedback

Stakeholder engagement is central to the Coordinated Human Services Transportation Plan (CHSTP). Community input has informed all aspects of this CHSTP, and significant efforts went into seeking broad and equitable representation throughout the plan development process. To collect data for this plan, stakeholder meetings and interviews were conducted with consumers, advocates, transit organizations, human service organizations, government agencies, and elected officials.

Key Stakeholder Feedback Findings

Challenges to providing public transit identified by transit providers:

- Funding concerns: there are mixed sources, not enough options to acquire funding, and existing resources are in a constant state of drying up.
- The Borough and cities do not financially support public transit with local match funds.
- Providers have high costs due to the size of the Borough and distance between people and services —they must choose between raising prices or cutting services.

Challenges reported by residents to access nonprofit transit:

- Limited service hours and infrequent trips.
- Transportation costs are too high for people who do not qualify for Medicaid but have lower incomes.
- Public transit is not very accessible.
- Resources to consult transportation type, availability and schedules are not well known.
- There are safety concerns with public transit.
- There are long waits, long trips (many stops), and high costs per trip.
- Transportation services are centrally located while the community is spread out.
- The distance to catch rides or limited ability to enter/exit the vehicle can be a barrier to transit use for riders with certain disabilities.
- Homeless youth have difficulty accessing the shelter in Anchorage.
- Some minors who cannot get a ride from a parent/guardian have difficulty accessing jobs, the DMV, court appointments, and extracurricular activities.

Challenges reported by providers to getting Medicaid reimbursement for patient rides:

- The process for Medicaid ride approval and billing is cumbersome and time consuming.
- A doctor's office can spend over an hour on the phone trying to get authorization to pay for a Medicaid ride. Some doctors have stopped doing this because it takes so long.
- The need for rides to and from the hospital happens at all hours of the day and night when nonprofit providers are not providing services and Medicaid approval may not be possible.

- Hospital social workers report that 20% of their time is spent coordinating transportation.

Other Concerns reported by residents and/or providers:

- Concern for transportation services that can adequately provide for the specialized needs of a given organization's clients (i.e. "Can they serve our clients like we can?").
- Providers are working in silos; there is a need for complementary services and coordination.
- Ambulances are overused for non-emergency medical transportation—this type of transportation is very expensive.

Strategies and Next Steps

The Coordinated Human Services Transportation Plan (CHSTP) is a tool that will be used in a process of improving system-wide transportation services in the Borough to achieve the mission: *"To enhance mobility for senior citizens, individuals with disabilities, individuals with low incomes, and other groups lacking adequate transportation in the Mat-Su Borough through improved public transit and human services transportation coordination."*

The Mat-Su Health Foundation will continue to partner with the Mat-Su Borough and has committed to help further the next phase of this process—the Implementation Phase, which will be led and executed by community partners, including the private and nonprofit transportation providers, health and human service organizations and Borough, tribal, and city governments. Implementation will begin following adoption of the CHSTP by the Borough Assembly. This chapter includes a menu of strategies which will need to be prioritized during the implementation phase and executed by community champions and the involved organizations.

Strategies to Improve Coordination

1. Centralize Mobility Management Services

- Centralize dispatch with ride brokering.
- Client sharing—providers serving their traditional clients (e.g. senior centers serving seniors) would expand passenger eligibility.
- Borough-wide travel training—lowers costs for individual providers by multiple providers contributing to travel training programs for those inexperienced in using transit or human services transportation services.
- Coordinate Service Planning—coordinating the planning and implementing of projects, programs, and service expansions to improve system-wide effectiveness.
- Centralize customer service monitoring—customer complaints and inquiries can go to a single location using a single phone number or web application.
- Coordinate contract administration, compliance and performance monitoring for shared services and resources between providers.
- Coordinate driver, partner and staff training and development.
- Coordinate data management and reporting support.
- Coordinate fleet management and maintenance—reduces costs to individual providers and—funding pending—helps ensure timely vehicle procurement, maintenance, and retirement.

2. Reduce Operations Costs While Maintaining Service Levels

- a. Joint vehicle & equipment procurement, where possible.
- b. Maintenance & facilities sharing agreements.
- c. Coordinate driver training—potentially lowers the cost of training individual drivers. This also helps improve training consistency and ensuring that drivers are able to meet a wider range of passenger needs.

3. Determine the Appropriate Combination of Transportation Services

- a. Some provider organizations transition to paying for services.
- b. Fleet and personnel consolidation.

4. Generate New Revenue

- a. Providers coordinate grant proposals.
- b. Identify additional funding sources—this can include grants from local government, State, and Federal sources.

Strategies to Improve Services

1. Improve Information Access & Quality

Simplifying the process of obtaining high-quality information can greatly improve recipients' experience obtaining and using public transit and human services transportation.

- a. Implement One-call/one-click services—A single phone number phone application, and website for recipients to obtain transportation information.
- b. Address Non-Emergency Medical Transportation (NEMT) provision—many individuals call ambulances for medical transportation in non-emergency situations, which is very expensive.
- c. Offer targeted transportation information at key locations.
- d. Make real-time information available—recipients would be able to track current information, such as the location of their ride, delays, and the availability of wheelchair spaces on the next bus. This recommendation can be fulfilled using certain dispatch software.

2. Improve Medicaid Approval Process for Providers & Recipients

- a. Medicaid “clearinghouse”—a single entity processing all of the Medicaid waiver requests can save significant time for many stakeholders.

3. Improve Affordability for Recipients

- a. Subsidize fares for target populations (e.g. seniors, individuals with disabilities). Some providers in the Mat-Su Borough already do this.
- b. Implement a consistent fare system across providers—creating a “zoned” fare system that providers collectively use would enable recipients to utilize multiple services based on the nearest availability, rather than cost being the only factor.
- c. Encourage major employers to purchase public transit passes for employees.

4. Improve Service Availability

- a. Expand hours of operation—recipients expressed that evenings, nights, and weekends were major temporal gaps in service.
- b. Expand service areas—similar to expanding hours of operation, cost-effectiveness should be considered when determining whether this service will be provided by current transportation providers, or by using taxis or other ride sharing services.

5. Improve Marketing

- a. Coordinate marketing and fund a marketing campaign—reduce confusion regarding available transportation services by crafting a consistent message.
- b. Rebrand Valley Transit rolling stock—following the merger of Valley Mover and MASCOT, Valley Transit requires rebranding of rolling stock to eliminate confusion (from recipients and other providers) regarding the primary transit service in the Mat-Su Valley.

I. INTRODUCTION & METHODOLOGY

Access to effective transportation services fulfills several basic needs for many of the Matanuska-Susitna Borough's residents. This includes access to healthcare, employment, and basic nutrition for those who would otherwise have no way of accessing critical services.

The need for sufficient access remains unmet for many Borough residents, due to a lack of adequate transportation options for those who do not drive or own a vehicle. This is most common with older adults, individuals with disabilities, and low-income households. An effective public transit and human service transportation system enhances the quality of life for those who cannot drive.

The Mat-Su Borough has partnered with the Mat-Su Health Foundation (MSHF) to update the Borough's Coordinated Human Services Transportation Plan (CHSTP) and advance Borough-wide service coordination. This plan will be used to further the community vision and mission for public transit and human service transportation:

| Vision | Mission |
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| A sustainable, multi-modal transportation network that effectively meets the transportation needs of Mat-Su Borough residents of all ages and abilities. | To enhance mobility for senior citizens, individuals with disabilities, individuals with low incomes, and other groups lacking adequate transportation in the Mat-Su Borough through improved public transit and human service transportation coordination. |

Coordination is a technique for better resource management that can lead to increased funding, decreased costs, and improved services; however, it can take significant time and energy before realizing the benefits.⁵ This is because service coordination requires:

- Shared power (responsibility, management, funding)
- Focus on the entire community (managing competing goals & interests)
- Agencies willing to change long-standing operating procedures.⁶

Plan Requirements

In order to be eligible for Federal Transit Administration (FTA) or Alaska Mental Health Trust funds through the Alaska DOT&PF Alaska Community Transit office (ACT), projects must be derived from a locally developed, coordinated plan that is updated at least every five (5) years.

These funding sources substantially support transit operations in the Borough. The Borough's previous plan update was in 2011 and required significant changes to reflect current community needs and opportunities, in addition to meeting federal and state requirements.

⁵ Federal Transit Administration, *TCRP Report 91: Economic Benefits of Coordinating Human Service Transportation and Transit Services* (Washington, D.C. Transportation Research Board, 2003).

⁶ Ibid.

The 2018-2022 Coordinated Human Services Transportation Plan (CHSTP) serves this purpose. It must document community efforts to coordinate public and human service transportation for the Borough's residents—especially older adults and individuals with disabilities.

FTA 5310 grants through the Fixing America's Surface Transportation (FAST) Act and Alaska Mental Health Trust funding each focus on the transportation needs of disadvantaged persons and those with special transportation needs that cannot be met through traditional personal automobile or public transportation means.

Required Plan Elements:

- Community Demographics
- Inventory of Available Resources & Services
- Assessment of Needs, Duplications, & Gaps in Service
- Strategies to Address Needs, Duplications, and Gaps in Service
- Implementation Priorities
- Signature Page of Participating Stakeholders

Plan Goals

State plan requirements provide a useful basis for identifying public and human service transportation needs; however, the goal of the Borough's Coordinated Human Services Transportation Plan (CHSTP) is to exceed requirements.

Serve a Wider Audience

While keeping an emphasis on older adults and individuals with disabilities, regional research showed that individuals with low incomes, homeless and unaccompanied youth, and post-incarceration reentrants had similar needs inadequately met by existing transit and paratransit. Excluding their voice would mean missing valuable opportunities for coordination and fostering a system that works for those who rely on public transportation the most.

Identify Coordination Strategies & Service Improvement Strategies

Effectively implementing strategies requires an understanding of each strategy's basic purpose.

Coordination strategies—focus on improving efficiency or productivity for transportation providers. These strategies generally lead to cost savings for providers and reduced reliance on outside funding.

Service improvement strategies—focus on improving the passenger's experience. These strategies generally increase costs for providers.

Improve Services Using Cost Savings

The expectation of outside funding can often reinforce the status quo. It can prevent organizations from innovating and changing ineffective practices. Instead of relying fully on funding to improve transportation service, the CHSTP emphasizes improving services using internal cost savings. Many coordination strategies save time and money for transportation providers, and those additional resources may be used to improve services.

How Was This Plan Developed?

The Mat-Su Borough and Mat-Su Health Foundation (MSHF) formed a strategic partnership in response to the clear and urgent need to (1) improve the effectiveness of transportation services and (2) improve access to transportation services. MSHF's 2016 Mat-Su Community Health Needs Assessment identified transportation as a primary factor affecting health.⁷ Insufficient transportation services form a barrier to health by limiting individuals' access to primary care, specialty services, outdoor recreational activities, and social interaction.⁸

Both entities have significant stake in the outcome of the Coordinated Human Services Transportation Plan (CHSTP) and serve as plan co-sponsors. The Mat-Su Borough determines local policy affecting the transportation environment and is the local governing body responsible for maintaining a current CHSTP. MSHF is a key organization concerned with the health and quality of life of the Borough's residents. MSHF understands the role of public transportation in improving public health and quality of life and is a key funding source for Valley Transit and Sunshine Transit as well as several human service transportation providers. Encouraging service coordination enables MSHF to maximize the impact of their contributions to improving transit and human service transportation access.

Demographic Data

A profile of transit dependency in the Mat-Su Borough was created using demographic data from the Census Bureau's American Community Survey, the Alaska Department of Commerce, Community, and Economic Development, the Alaska Department of Labor and Workforce Development, and relevant Borough planning documents. Maps and corresponding data are depicted in later sections.

Available Transportation Resources & Services

Specialized surveys were distributed to public transit and human service transportation providers to collect data regarding operations and maintenance, capital assets, and finances. This information was used to inform the feasibility of coordination strategies. These surveys are included in the appendix.

Stakeholder Engagement

Open house meetings created opportunities to gather input from individuals who rely on transportation services, especially older adults, individuals with disabilities, and people with low incomes.

Meetings and interviews with transit organizations, human service agencies, senior centers, non-profit organizations, and local government officials provided valuable insight and discussion regarding (1) transportation service gaps, (2) service duplication, and (3) coordination solutions.



⁷ 2016 Mat-Su Community Health Needs Assessment (Wasilla: Mat-Su Health Foundation, 2016), 25.

⁸ Ibid.

Data Collection

Effective coordination requires access to good information. Good information helps decision makers answer key questions necessary for making the best use of limited resources. As such, data collection and analysis formed a significant portion of the CHSTP update. The data gathered helped answer the following questions:

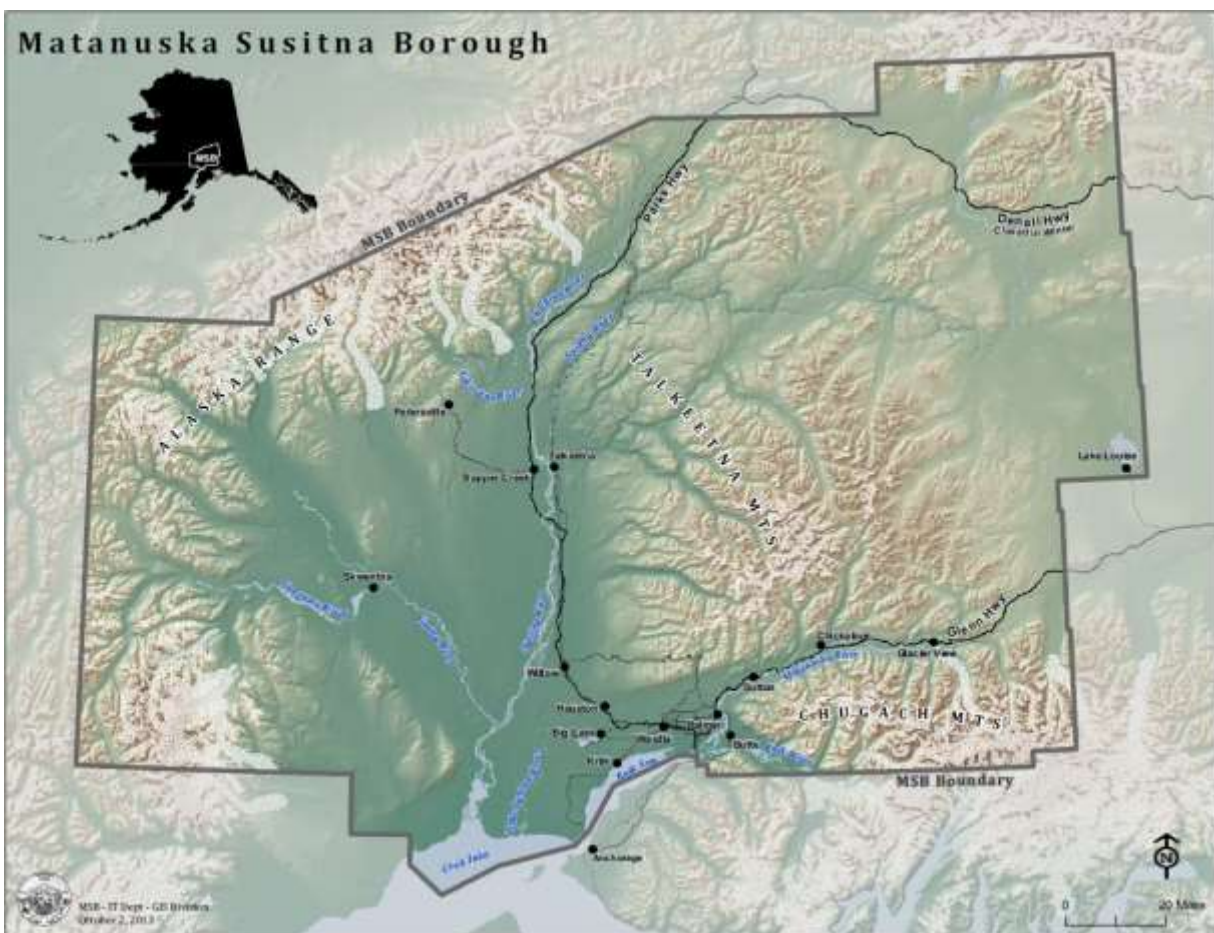
| Data Type | Associated Questions |
|------------------------|--|
| Community Demographics | <ul style="list-style-type: none">- How extensive are transportation needs?- How might these needs change over time? |
| Geospatial | <ul style="list-style-type: none">- Where are the greatest needs?- Where are the existing services?- Do the areas of needs and services correspond well to each other? |
| Operational & Asset | <ul style="list-style-type: none">- What is the capacity of each provider to meet transportation needs?- Where are the duplications or gaps in service? |
| Financial | <ul style="list-style-type: none">- What are the costs of providing public and human service transportation?- How does this differ between organizations and types of service? |
| Ridership | <ul style="list-style-type: none">- How well is each service utilized?- How does ridership change, based on the day and time? |
| Economic | <ul style="list-style-type: none">- How do economic trends affect coordination? |
| Case Study Research | <ul style="list-style-type: none">- How are other communities and regions improving coordination?- What can the Mat-Su Borough learn from others' successes and failures? |

II. MATANUSKA-SUSITNA BOROUGH DEMOGRAPHICS

Overview of Study Area

The Mat-Su Borough lies in the heart of South Central Alaska, encompassing more than 25,000 square miles (approximately the size of West Virginia). The geographically diverse landscape contains mountains, valleys, wetlands, lakes, rivers, and streams. The borough includes portions of the Chugach Mountains to the southeast; portions of the Alaska Range to the northwest; and essentially the entire Talkeetna and Clearwater Ranges in the interior. The Municipality of Anchorage, upper Cook Inlet, and Knik Arm delineate the Borough's southern boundary.

Figure 1: Map: Mat-Su Borough



Climate

The Mat-Su Borough falls within the transitional climate zone, characterized by a semi-arid atmosphere, long, cold winters, and mild summers.⁹ Climate is a key factor affecting mobility for many residents in the Mat-Su Borough. Long winters and snowy conditions create a need for bus shelters and maintained sidewalks near bus stops. Inadequately provided and maintained infrastructure is a barrier to transportation for many older adults and individuals with disabilities.

⁹ Alaska Community Database Online, Communities Attribute Query for Mat-Su Borough. Accessed 2018.

Road, Rail & Air Infrastructure

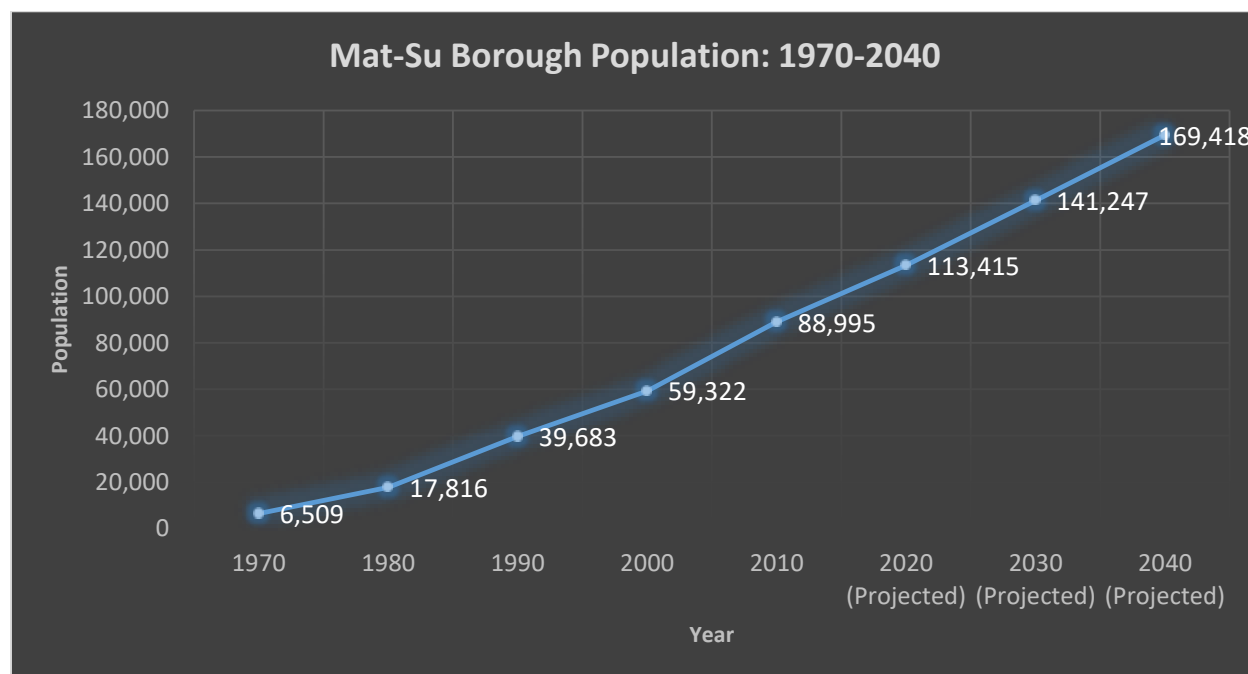
The Mat-Su Borough can be accessed via the Glenn Highway, George Parks Highway, and Denali Highway. The Alaska Railroad Corporation (ARRC) has approximately 185 miles of mainline track in the Borough, with three stations (Palmer State Fair Ground,¹⁰ Wasilla, and Talkeetna) and several whistle stops providing freight and passenger rail service.¹¹ Commercial airlines serve the nearby Anchorage International Airport, but chartered and private flights utilize the 29 public-use and approximately 200 private-use aviation facilities.

Population

This section describes Borough-wide population trends and existing conditions for disadvantaged populations including senior citizens, people with disabilities, low-income households, and households without vehicles. These population groups tend to exhibit a greater dependency on public transit and human services transportation.

The Matanuska-Susitna Borough is the fastest-growing borough in Alaska¹², with an estimated population of 106,532 in 2017.¹³ This is projected to grow to 169,418 by 2040.¹⁴

Figure 2: Population: 1970-2040



Data Source: Alaska Department of Commerce, Community, and Economic Development; Alaska Department of Labor and Workforce Development, Research and Analysis Section

¹⁰ This station is used to support special events at the State Fair Ground. There is no regular service to this station.

¹¹ 2035 Matanuska-Susitna Borough Long Range Transportation Plan.

¹² Neal Fried, "The Matanuska Susitna Borough: Growth continues to eclipse rest of Alaska," *Alaska Economic Trends*, December 2010, 12.

¹³ American Community Survey, 2017 Population Estimates Program. Accessed 2018.

¹⁴ Alaska Department of Labor and Workforce Development, Research and Analysis Section

Senior Citizens

As residents age, many are no longer able to drive and must rely on alternative means of transportation. Understanding trends in the Borough's aging population provides one of several measures for determining public transit and human services transportation needs.

The 65+ age group represents 10.27% of the total Borough population.

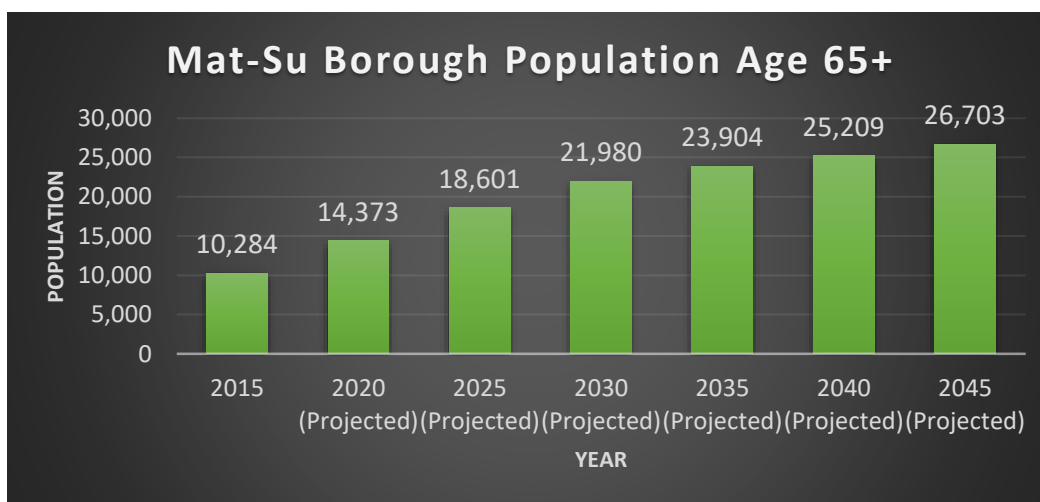
In 2015, the Mat-Su Borough had an estimated 10,284 people age 65 and over.¹⁵ The 65+ age group represents 10.27% of the total Borough population. Both the number and proportion of residents age 65 and over is expected to increase between now and 2045.

This change will present new challenges to addressing mobility issues for seniors. Senior-targeted services will need to increase proportionally to the population growth. Identified gaps in transportation service indicate that current public and human service transportation is not sufficiently growing and adapting to meet long-term needs.

Key Findings

- The number of seniors is expected to continually increase through 2045.¹⁶
- The percentage of seniors in the total population is expected to increase through 2030.¹⁷
- The highest concentration of seniors is in the Borough's core area, especially southwest of Wasilla (2016).¹⁸

Figure 3: Population 65+



Source: Alaska Department of Labor and Workforce Development, Research and Analysis Section

The following maps show the percentage of the population age 65+ for each census block group. Note that 96% of the Borough population resides within the gridded area (shown on the first map).

¹⁵ Alaska Department of Labor and Workforce Development, Research and Analysis Section

¹⁶ Alaska Department of Labor and Workforce Development, Research and Analysis Section

¹⁷ Alaska Department of Labor and Workforce Development, Research and Analysis Section

¹⁸ 2012-2016 American Community Survey 5-Year Estimates.

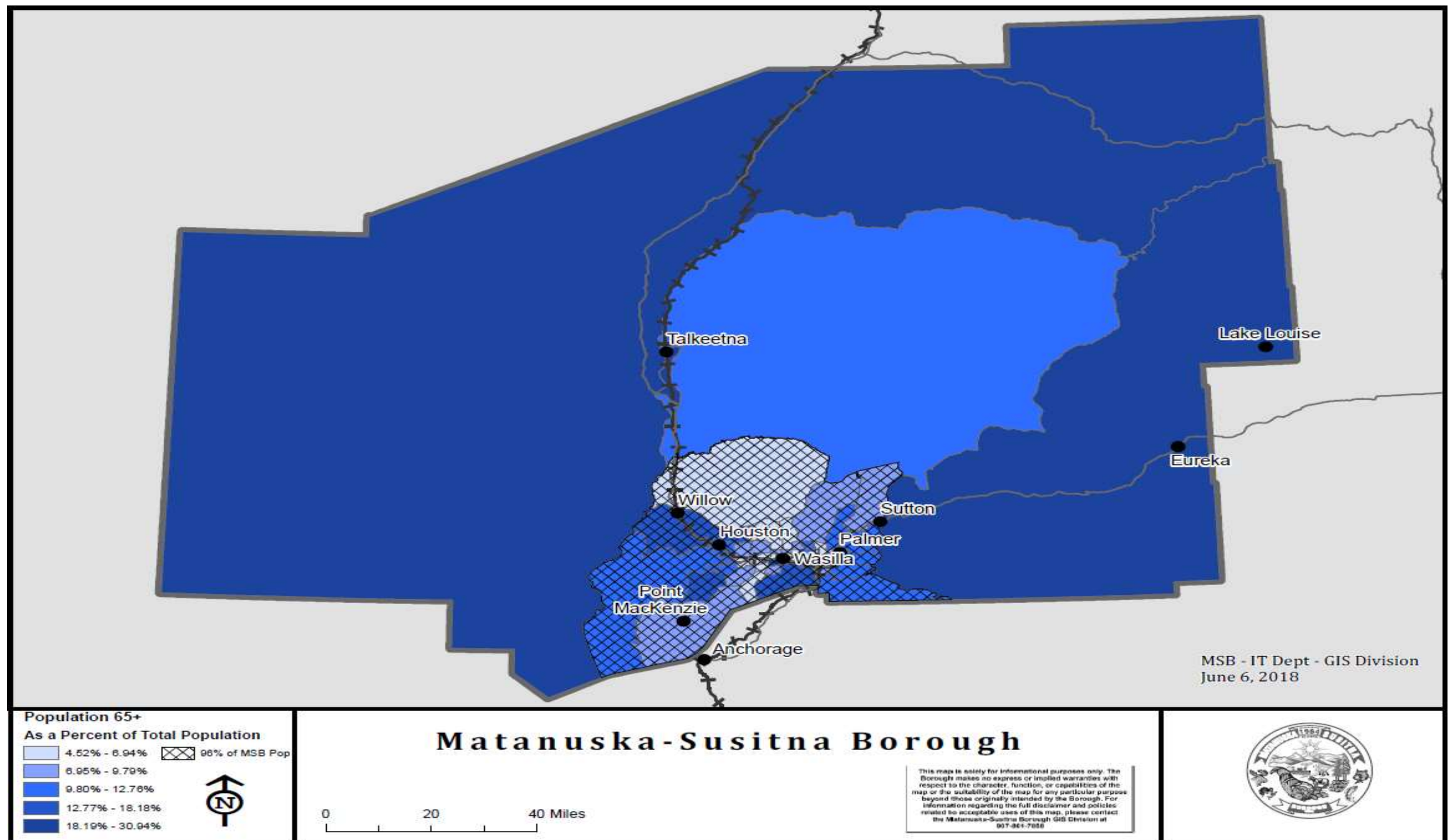


Figure 4: MSB Population 65+

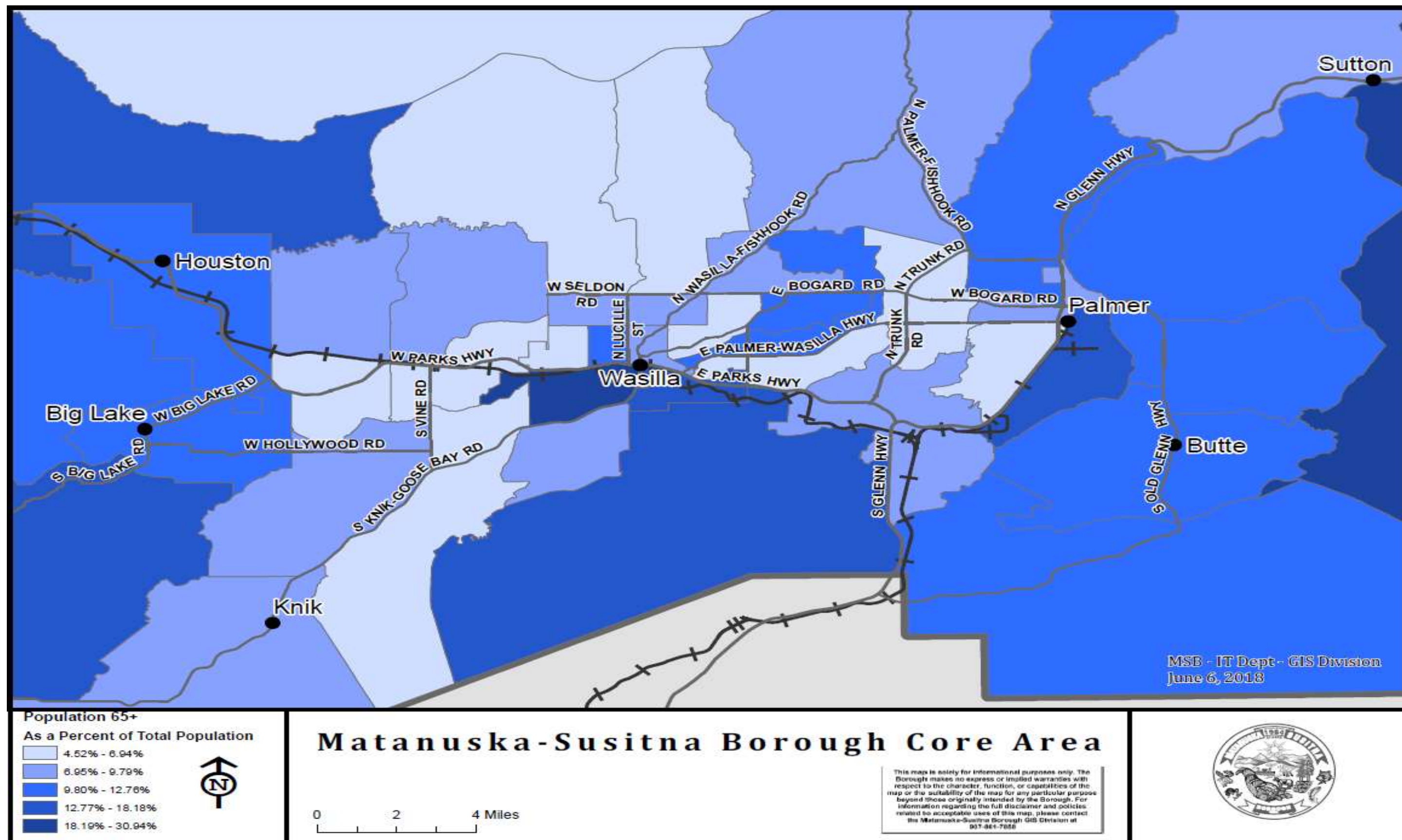


Figure 5: MSB Core Area Population 65+

People with Disabilities

Certain disabilities can prevent individuals from operating personal vehicles, either fully or under certain conditions (e.g. snow, low light conditions). As such, disability status can be a useful indicator of reliance on public or human services transportation.

Key Findings

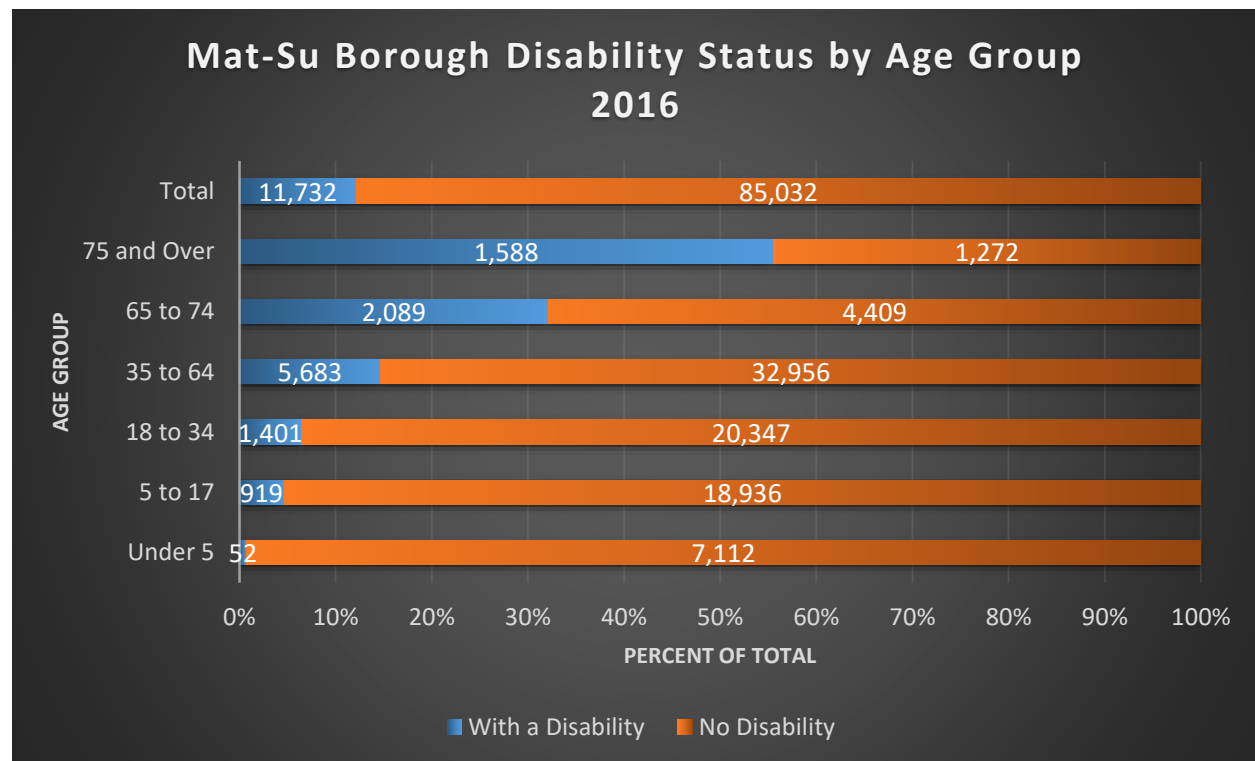
- 12.1% of Borough residents had a disability in 2016.¹⁹
- 39.3% of Borough residents age 65 and over had a disability in 2016.²⁰
- 23.3% of veterans residing in the Borough had a disability in 2016.²¹

Figure 6: Disability Status by Age Group

| Age Group | Under 5 | 5 - 17 | 18 - 34 | 35 - 64 | 65 - 74 | 75 and Over | Total |
|-----------------------|---------|--------|---------|---------|---------|-------------|--------|
| Population | 7,164 | 19,855 | 21,748 | 38,639 | 6,498 | 2,860 | 96,764 |
| With a Disability | 52 | 919 | 1,401 | 5,683 | 2,089 | 1,588 | 11,732 |
| With a Disability (%) | 0.7% | 4.6% | 6.4% | 14.7% | 32.1% | 55.5% | 12.1% |

Source: 2012-2016 American Community Survey 5-Year Estimates

Figure 7: Disability Status Proportions by Age Group



Source: 2012-2016 American Community Survey 5-Year Estimates

¹⁹ "Population 65 Years and Over in the United States," 2012-2016 American Community Survey 5-Year Estimates.

²⁰ Ibid.

²¹ "Veteran Status," 2012-2016 American Community Survey 5-Year Estimates.

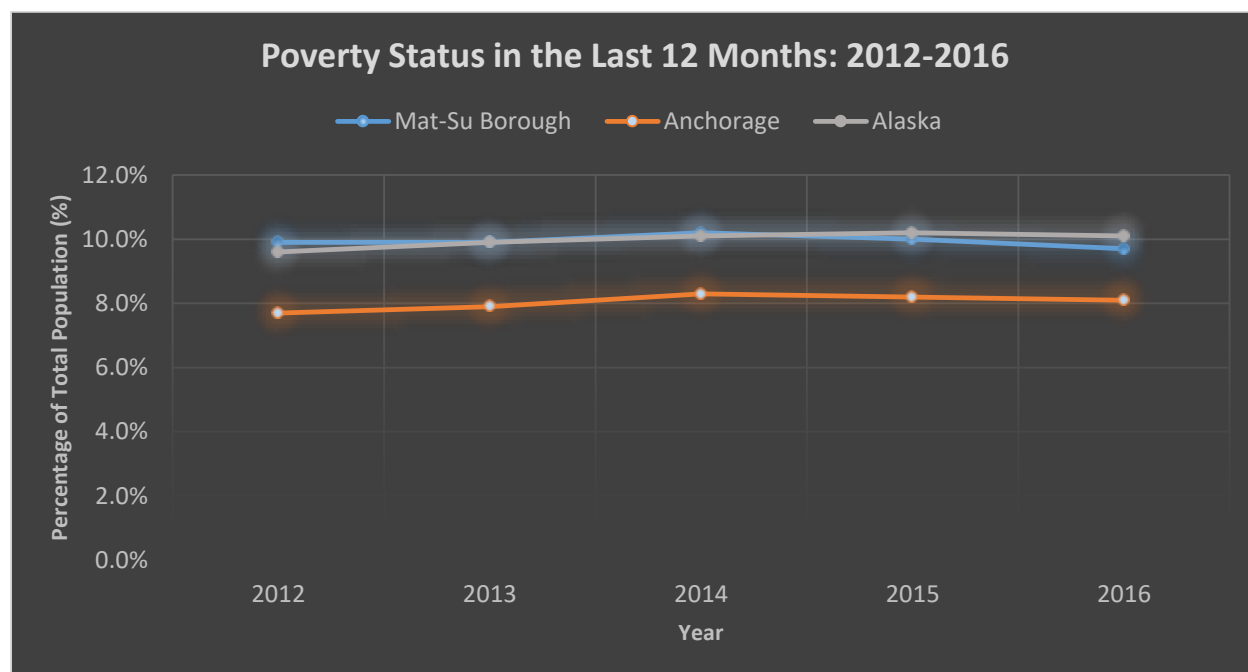
Low-Income Status

Household income can affect transportation options. Households with lower incomes are proportionally more dependent upon public transit and non-motorized transportation (e.g. walking, bicycling) to meet their mobility needs. For many of these households, either purchasing and maintaining a vehicle is too expensive, or they can only afford a single vehicle while multiple household members work.

Key Findings

- 9.7% of the Borough population has an income below the poverty level.²²
- 5% of residents age 65 and older have incomes below the poverty level.²³
- Poverty is concentrated in the Borough's core area, especially east of the Butte, in the Big Lake area, east of Houston, and between Palmer and Wasilla.

Figure 8: Poverty Status in the Last 12 Months: 2012-2016



Source: 2012-2016 American Community Survey 5-Year Estimates

The following maps show the percentage of households in each census block group with incomes below the poverty level. Note that 96% of the Borough population resides in the gridded area.

²² "Population 65 Years and Over in the United States," 2012-2016 American Community Survey 5-Year Estimates.

²³ Ibid.

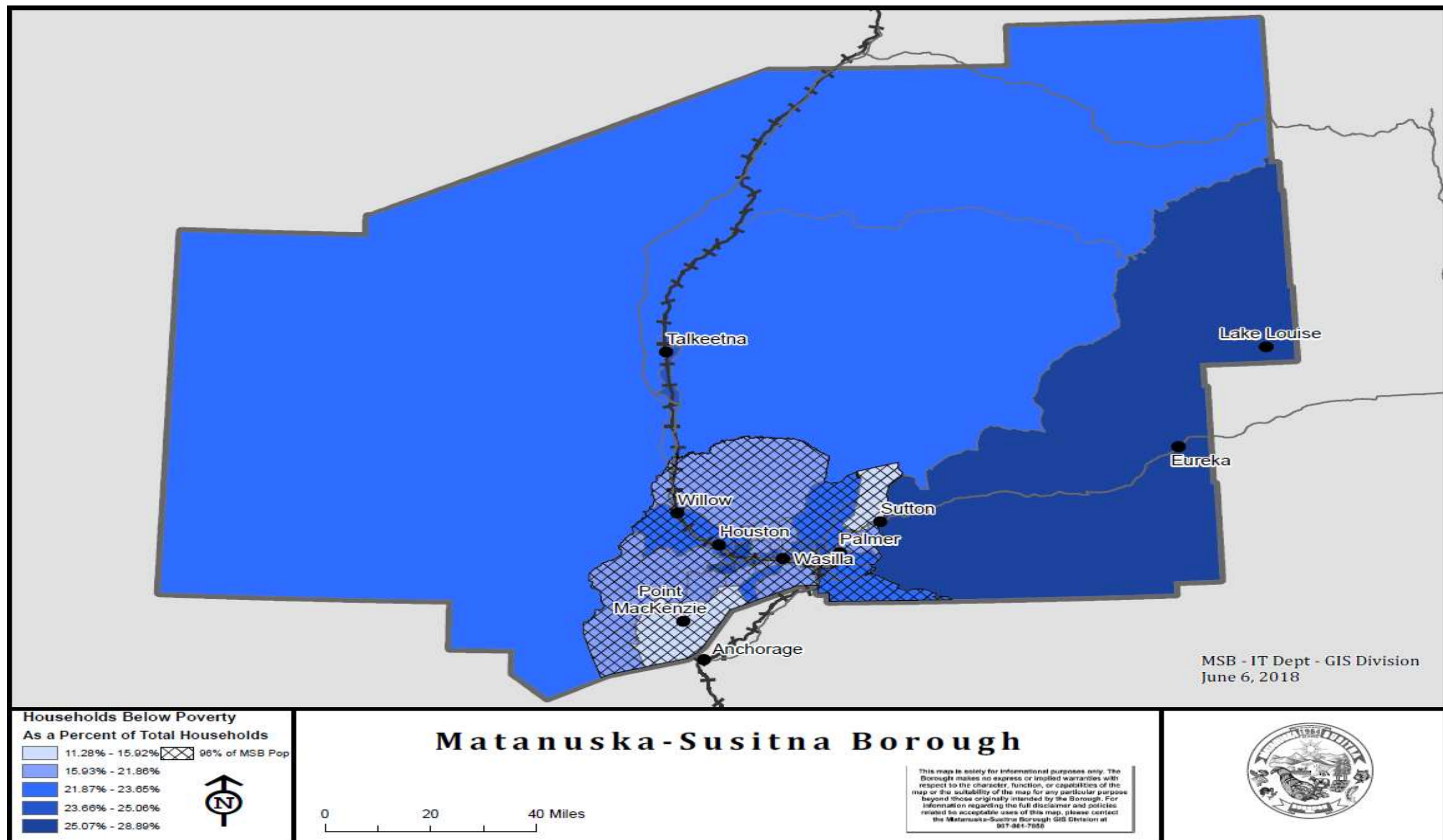


Figure 9: MSB Households Below Poverty

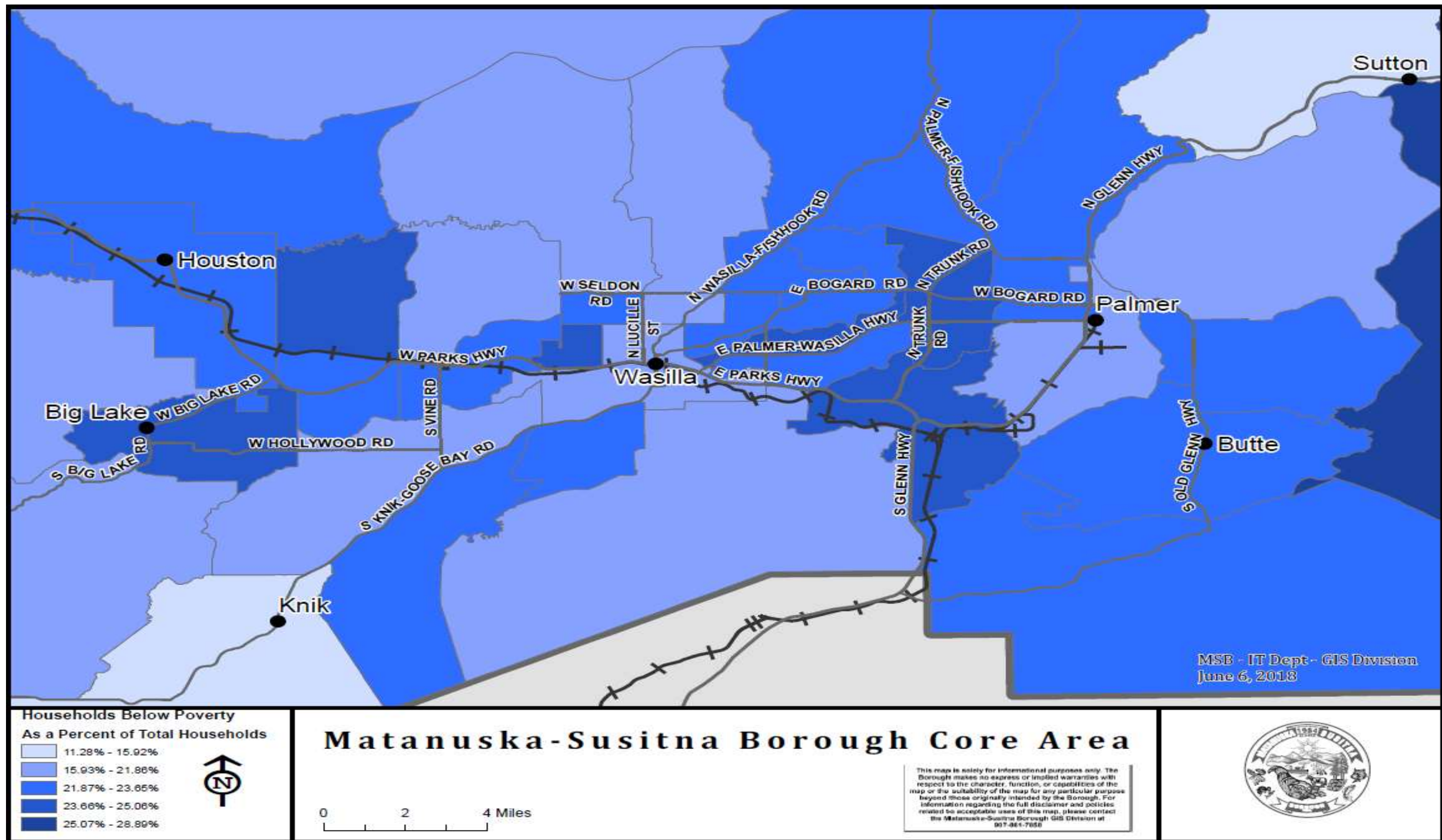


Figure 10: MSB Core Area Households Below Poverty

Zero-Vehicle Households

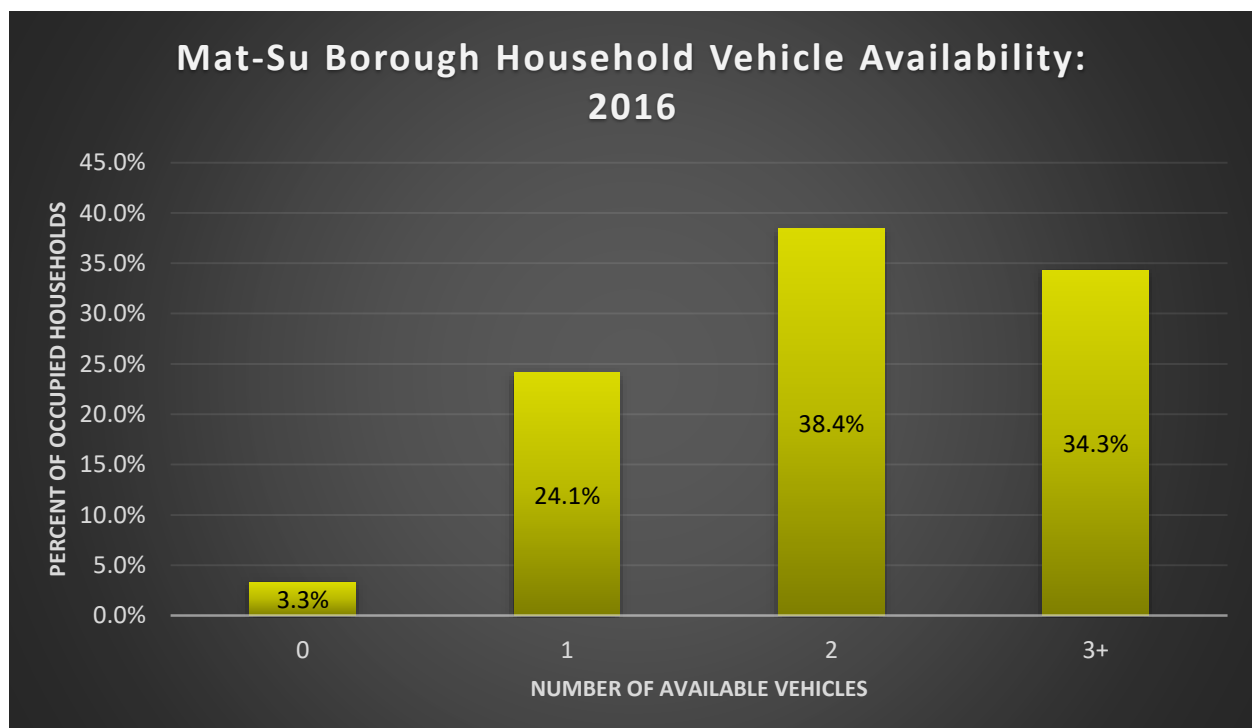
Households without vehicles are another potential indicator of dependency on public transit or human services transportation; however, the reasons for not owning a vehicle are highly influenced by the geographic context and intensity of development. Residents living in a highly urbanized setting might choose not to own a vehicle because of the greater convenience or cost savings from using alternative transportation modes.

In the Mat-Su Borough, vehicle ownership is more likely affected by income, ability, or access to the road system. Size and low population density make much of the Borough vehicle-centric, except for the populated areas that are off the road system. Communities like Skwentna are accessible only by water and air, or by snow machine in the winter.

Key Findings

- 3.3% of occupied housing units did not have an available vehicle in 2016.
- The highest general concentration of zero-vehicle households is in the Borough's core area.
- The block group with the highest percentage of zero-vehicle households is the massive area west and north of the Susitna River; however, only 516 people reside in this area, and only 55 of those residents do not own a vehicle.

Figure 11: Household Vehicle Availability: 2016



Source: 2012-2016 American Community Survey 5-Year Estimates

The following maps show the percentage of occupied households in each census block group that have zero available vehicles.

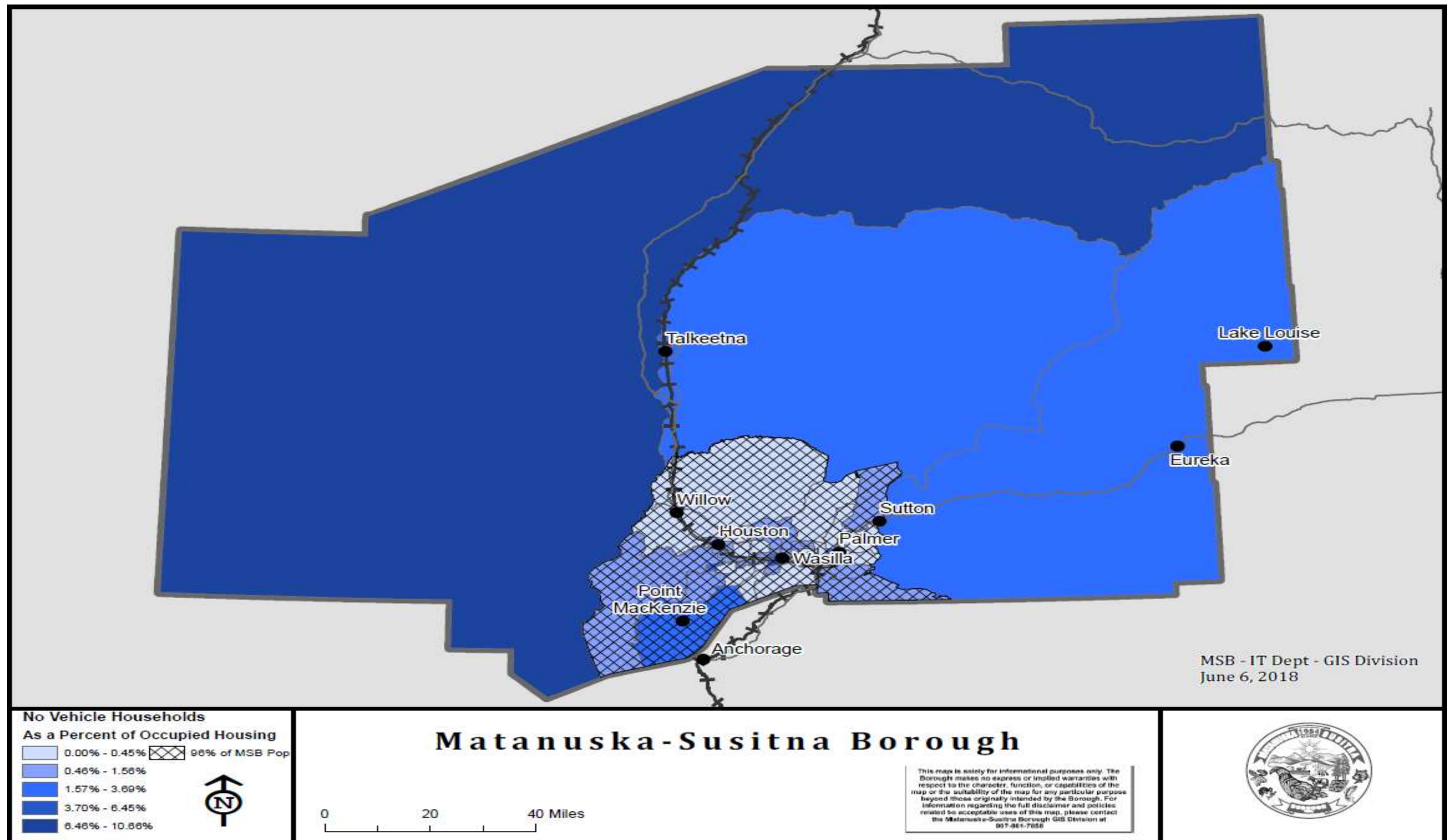


Figure 12: MSB No Vehicle Households

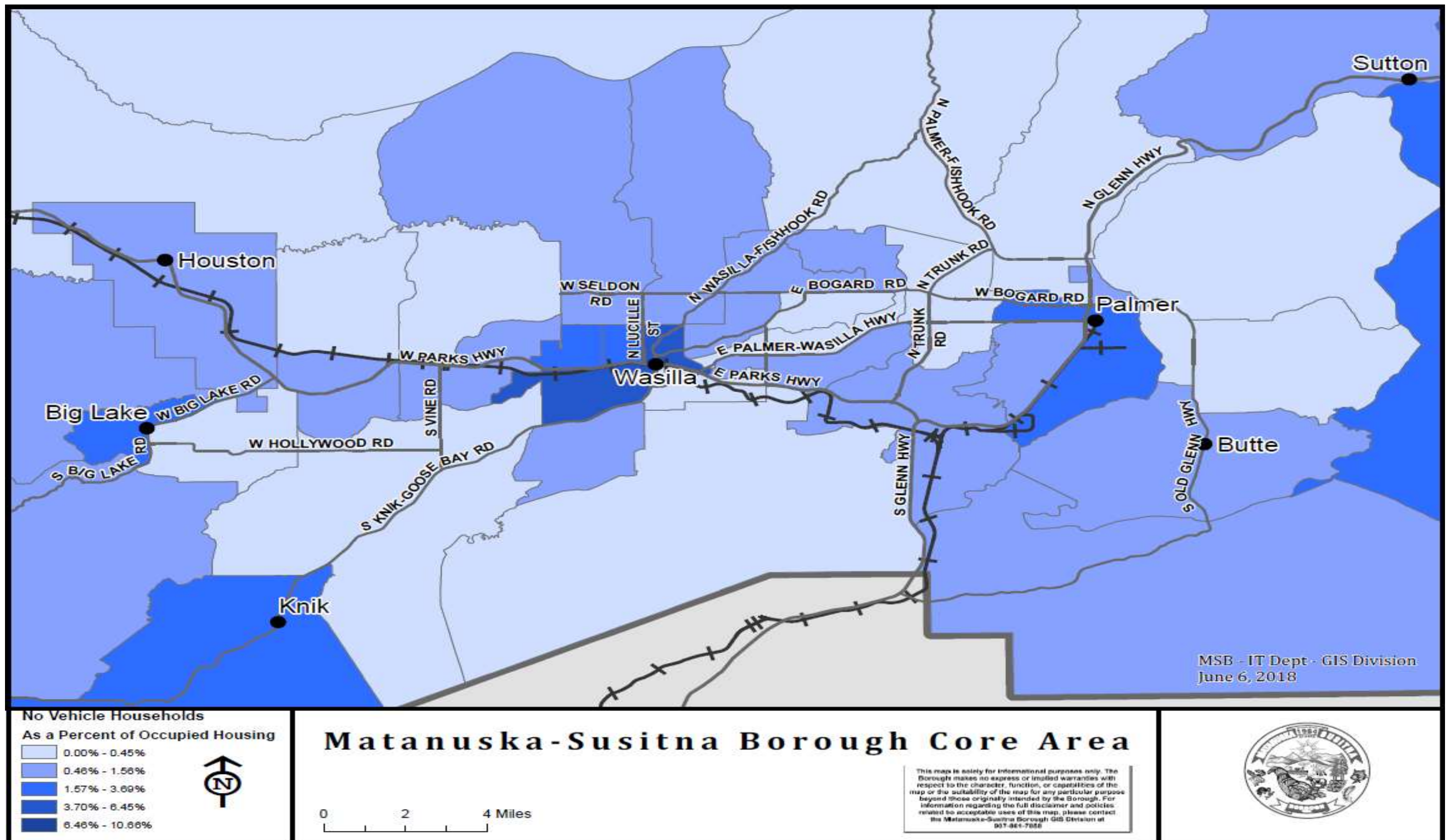


Figure 13: MSB Core Area No Vehicle Households

Transportation Needs Index

Many factors affect a community's need for coordinated public transit and human services transportation. Age, physical ability, income, and the built environment can provide valuable contextual information for assessing transit dependency, but each indicator reveals only a portion of the community need. Because of this, indicators of public and human services transportation dependency should be considered as a whole.

The following map is a weighted index that combines 2016 data for the Borough's older adult population density, density of households below the poverty line, and density of zero-vehicle households to create a more complete view of where transit needs are greatest.

Where the previous maps calculated the percentage of individuals or households in a selected demographic group, this index calculates the number of individuals per acre in each census block group for those demographic groups. This is to mitigate data biases from only using percentages. This is especially important outside of the Borough's core area, where there may be a higher percentage of individuals or households of a certain demographic group, but a total number that is very small compared to that in the core area.

A higher index score indicates a greater concentration of residents who are more likely to be dependent on public transit or human services transportation.

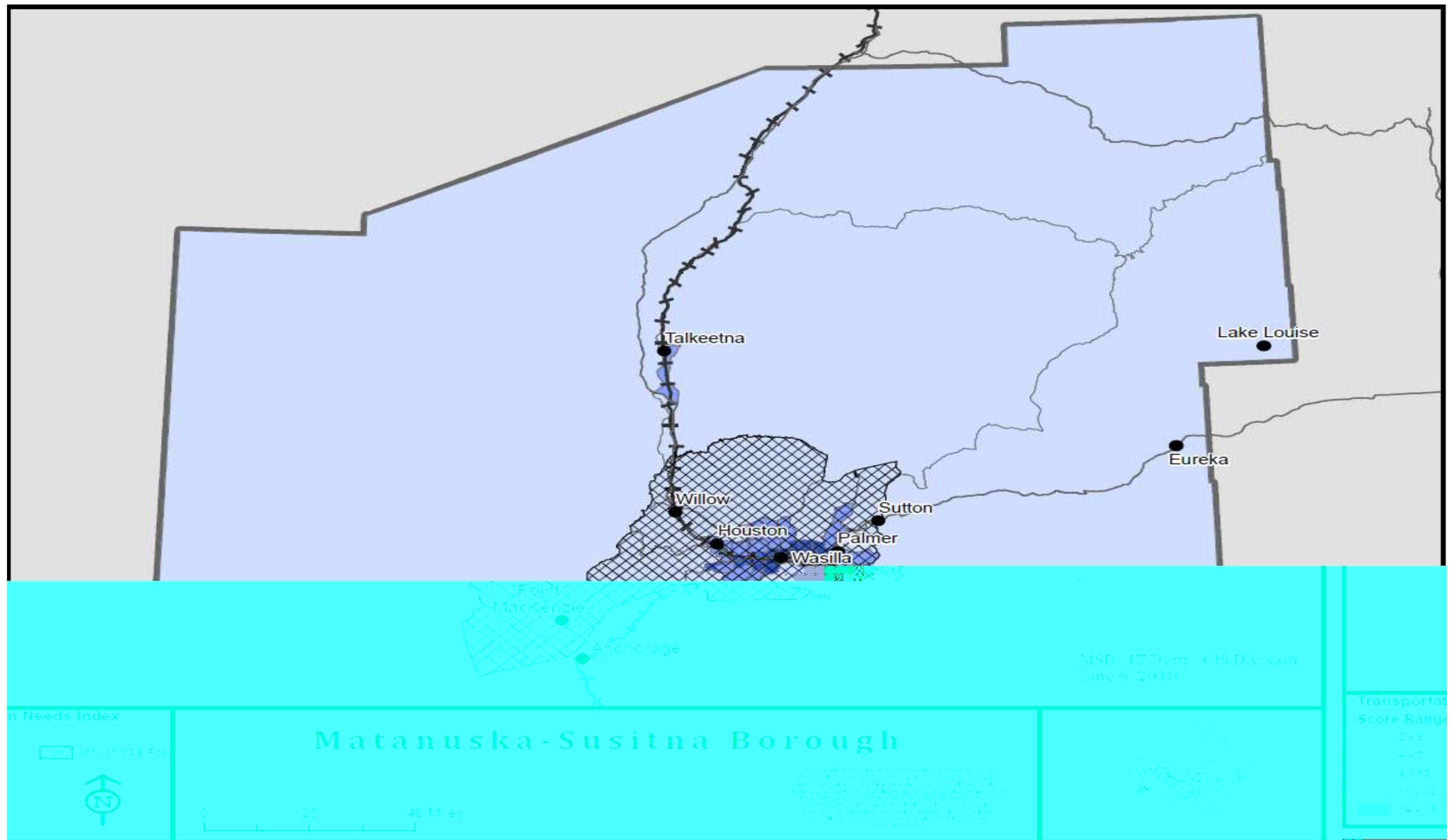


Figure 14: MSB Transportation Needs Index

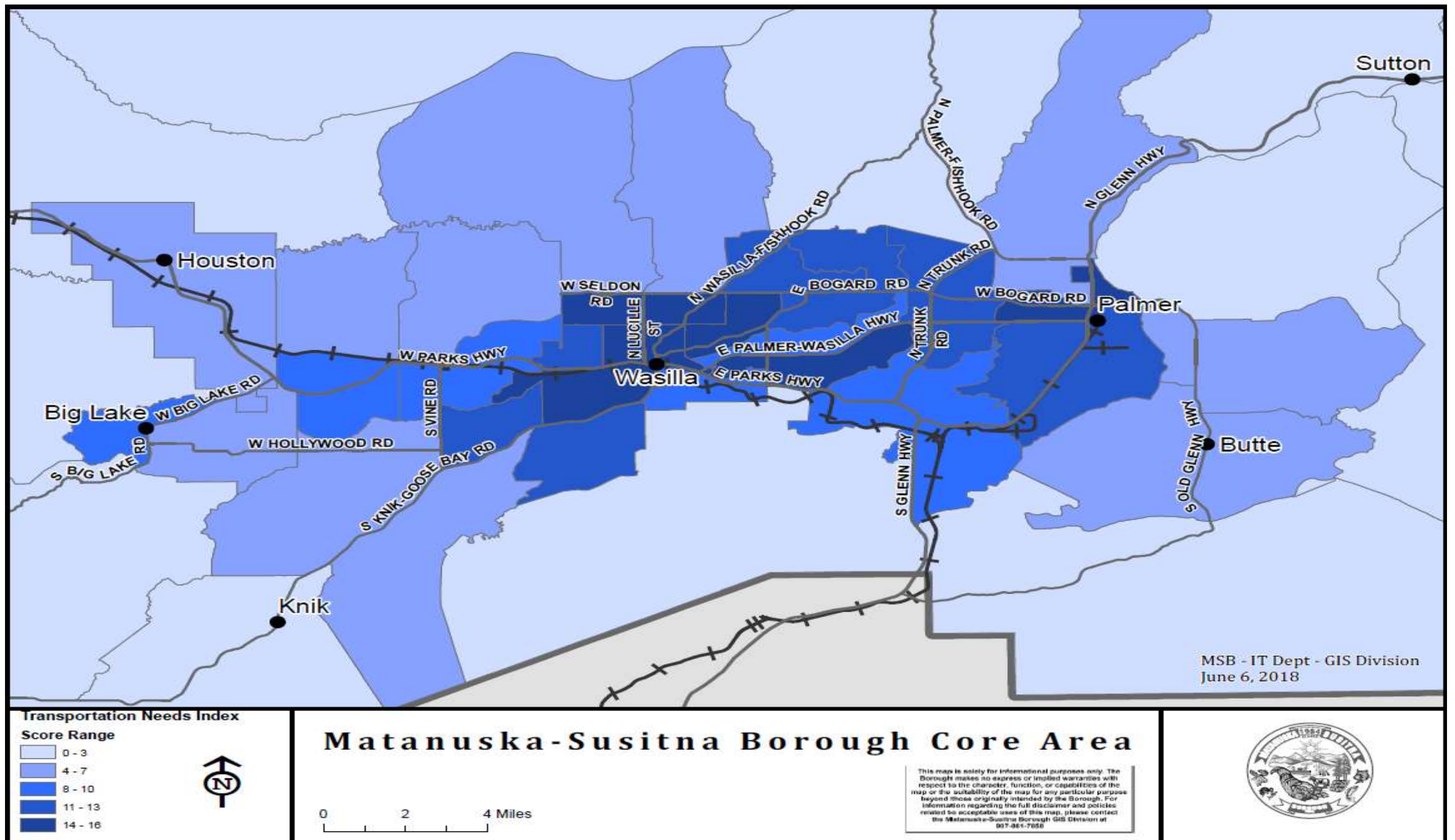


Figure 15: MSB Core Area Transportation Needs Index

Economic and Labor Force Profile

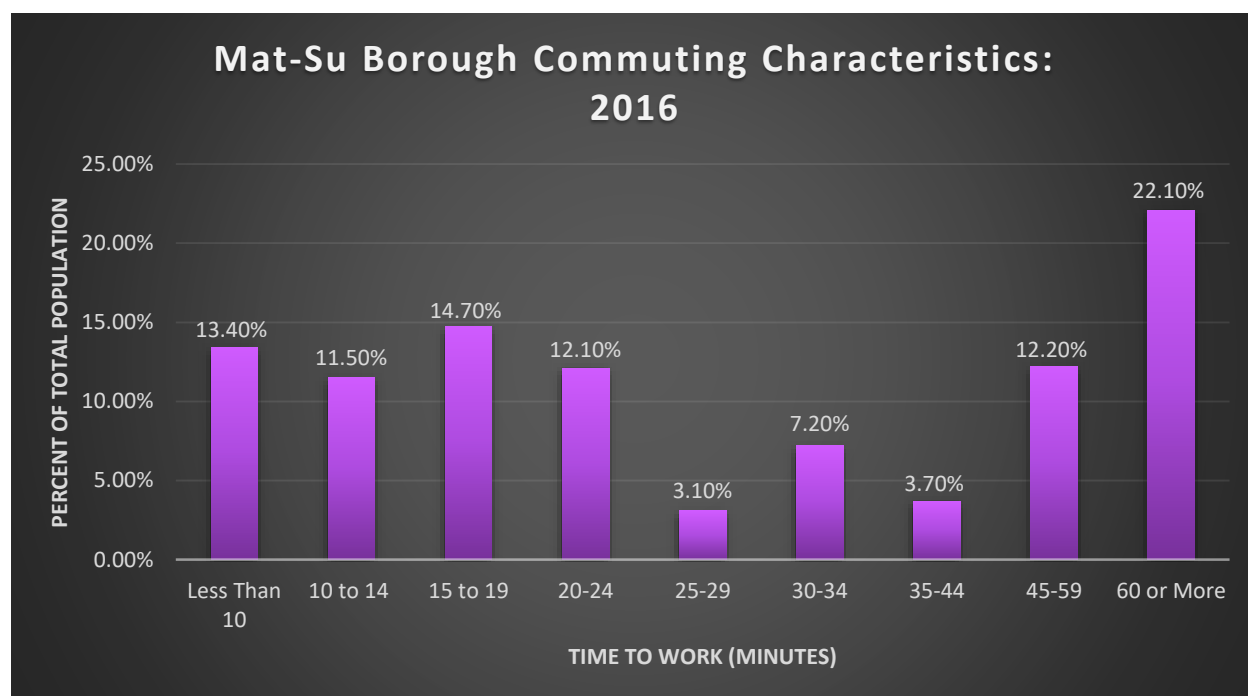
While the Mat-Su Borough has experienced job growth for many years, it still functions largely as a bedroom community. “Jobs pay more in Anchorage and housing is more affordable in Mat-Su, making the roughly 45-minute commute worthwhile for many.”²⁴ In 2016, the Borough accounted for 44% of Alaska’s new housing units.²⁵

“Jobs pay more in Anchorage and housing is more affordable in Mat-Su, making the roughly 45-minute commute worthwhile for many.”

Commuting

In 2016, 35.6% of Mat-Su Borough workers 16 years and over worked outside of the Borough. 45.2% of Borough workers commuted 30 minutes or more to their jobs, and 22.1% commuted for 60 or more minutes. The average travel time was 34.1 minutes.²⁶

Figure 16: Commuting Characteristics: 2016



Source: 2012-2016 American Community Survey 5-Year Estimates

Unemployment

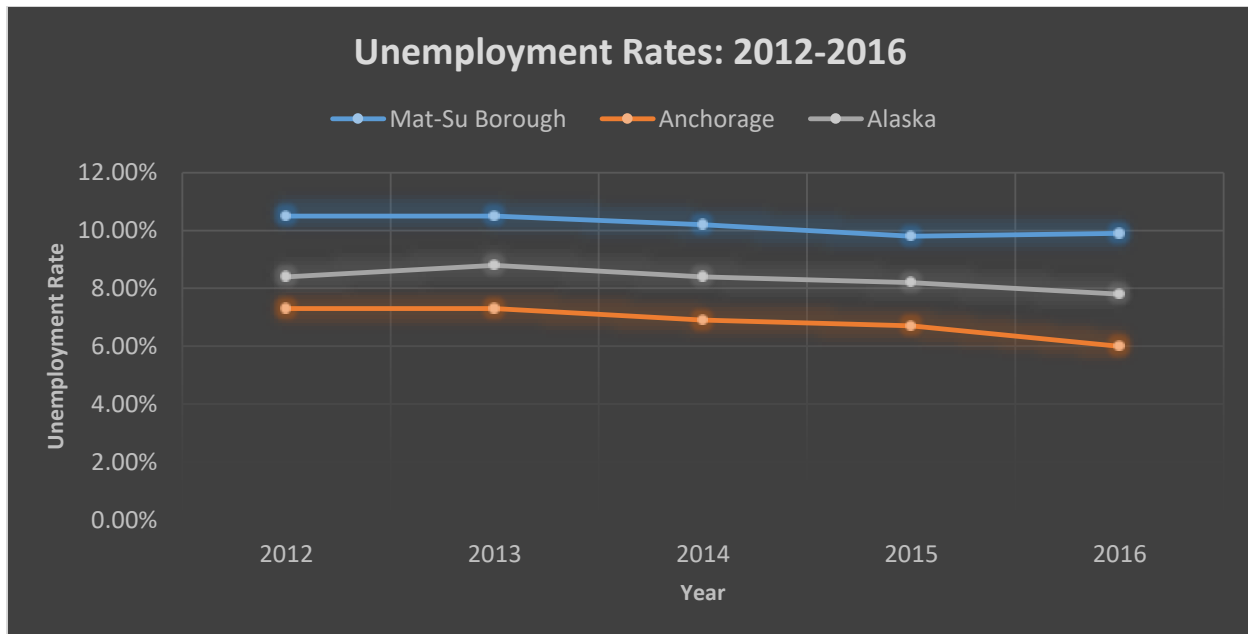
In 2016, the Borough unemployment rate was 9.9% in a labor force of approximately 66,621 people. The Borough’s unemployment rate has been consistently higher than that of the Municipality of Anchorage or State of Alaska average.

²⁴ Neal Fried, “The Mat-Su Economy,” *Alaska Economic Trends*, September 2017, 5-6.

²⁵ Neal Fried, “The Mat-Su Economy,” *Alaska Economic Trends*, September 2017, 4.

²⁶ 2012-2016 American Community Survey 5-Year Estimates.

Figure 17: Unemployment Rates: 2012-2016

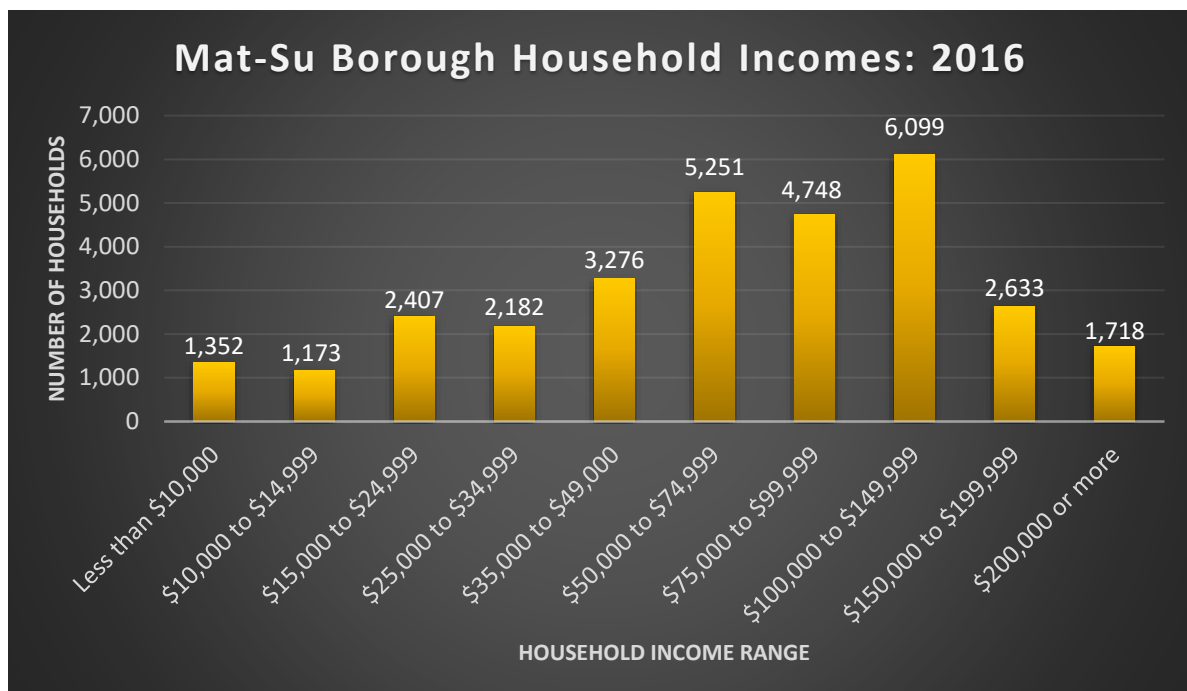


Source: 2012-2016 American Community Survey 5-Year Estimates

Households

- The Borough's 2016 median household income is \$73,908.
- 75.8% of occupied housing units are owned, and 24.2% are rented.
- For rented units, 40.2% of households are paying 35% or more of their income on rent.

Figure 18: Household Income Distribution: 2016



Source: 2012-2016 American Community Survey 5-Year Estimates

III. ASSESSMENT OF AVAILABLE RESOURCES & SERVICES

Public transit and human service transportation options in the Mat-Su Borough are limited largely due to current land use and a lack of local government financial support. A general lack of higher density, mixed-use development in the Borough has created a significant financial barrier to effective transit and paratransit provision, and funding sources for public and human service transportation have been limited to federal grant programs, State matches and grants, and nonprofit organizations.

The **2016 Mat-Su Community Health Needs Assessment** found that transportation is the top factor affecting the health of Borough residents. The lack of public transportation is a barrier to accessing both primary care and specialty services. The report found that many residents are unaware of the transportation resources that do exist. Some cannot afford to use them, even when they are offered. Residents reported that there are limited hours of operation that make it difficult to schedule, especially when needing multiple health care appointments on the same day.

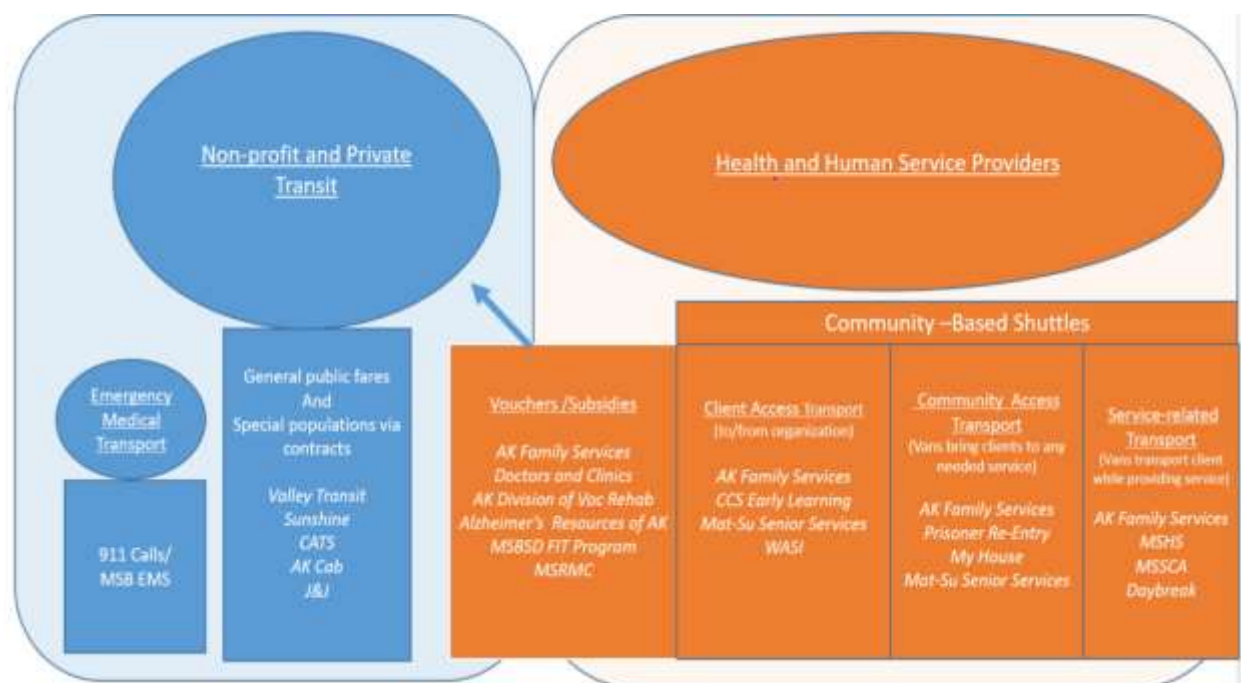
The system of health and human services transportation developed in the Borough based on need, funding patterns, and policy/regulations. The following is a categorization of types of nonprofit and private transit providers, human services transportation providers, and organizations that purchase or arrange transportation for their clients. Examples of organizations that provide each type of transportation are provided. The full stakeholder list of organizations that provide or assist with transportation is included in the appendix. The comprehensiveness of this inventory is dependent on the response rate of stakeholder organizations providing information; therefore, this chapter does not include a full data profile for all organizations serving the transportation needs of Borough residents.

This chapter describes the following types of transportation services:

1. Transit Providers and Private Transportation – These nonprofit providers receive state and local transportation funding to provide fixed route, deviated fixed route, and demand response service for borough residents. There are also for-profit entities whose core business is transportation.
 - a. Subsidized Fare Programs/Voucher Programs including Medicaid funded transportation are used by “arrangers” to purchase transportation by nonprofit/private transit providers for their patients/clients.
2. Emergency Transportation- This form of transportation is provided by Borough Emergency Medical Services to patients.
3. Health and Human Service Provider Transportation
 - a. Client Access Transportation – These organizations use their vehicles to transport clients to agency service locations, and back. The purpose is to provide easier access to services for these clients, as well as reduce no-shows and late arrivals.
 - b. Community Access Transportation – These organizations provide transportation to their clients to go to various needed services in the community.
 - c. Service-related Transportation –These organizations use vehicles incidentally in the provision of therapeutic services in the community. For example, a case manager may

be working with a client in pursuit of goals on their treatment plan and will drive them to various destinations in the community, working on skill building.

Figure 19 Provider Types



Nonprofit and Private Transit Providers

There are no publicly owned or managed transit providers based in the Mat-Su Borough—all transit is operated by nonprofit organizations. The following is a short description of these organizations, with data and information pertinent to each organization.

Chickaloon Area Transit System (CATS)

CATS was established in 2006 using a Federal Transit Authority (FTA) Bus and Operating grant, with operations beginning in 2011. It is operated by the Chickaloon Village Traditional Council—the traditional sovereign government for the Chickaloon Native Village. CATS provides demand response service between Chickaloon and Palmer for all residents of the area. Funding for this transportation comes from Tribal Federal Transportation 5311 funds.

Chickaloon provides rides for students to the Tribal School and for other residents who are seeking services locally and in the core area of the Borough. They report that they serve both Alaska Native people and non-Native people and, since their funding is limited, they encourage riders to use Valley Transit if their transportation needs allow. They noted that since the cost of a CATS ride is cheaper than that of Valley Transit, riders often seek to ride only CATS.

Sunshine Transit

Sunshine Transit was established in 2009 by the Sunshine Transit Coalition under the umbrella of the Sunshine Community Health Center, although Sunshine Transit is operating as an independent subsidiary as of July 2018. Since the 2011 Coordinated Human Services Transportation Plan (CHSTP),

Sunshine Transit has expanded service into Willow and Wasilla on select days. Sunshine Transit provides deviated fixed route and demand response service between Talkeetna and Wasilla.

Sunshine Transit reports that health and human service-related transportation is a large part of the demand in the area they serve. They meet this demand by allowing riders to do “water runs” with jugs attached to the top of their vehicles, picking up children for rides from after-school programs, providing transportation to Talkeetna and Willow health clinics and other destinations. They report that demand is growing fast and they are having difficulties meeting the demand. Sunshine Transit has the highest ridership for non-commuter routes among the three nonprofit transit organizations.

Valley Transit

Valley Transit was created in a merger between Valley Mover and Mat-Su Community Transit (MASCOT), finalized in July 2017. In 2014, The State of Alaska Transit Office mandated a consolidation between Valley Mover, MASCOT, and Sunshine Transit; however, Sunshine Transit was later exempted. Valley Transit provides a fixed route commuter route between the Mat-Su Valley and Anchorage, as well as demand response within the Valley. Deviated fixed route service within the Valley was discontinued due to funding cuts and low ridership, but there are plans to open a new fixed route between Palmer and Wasilla.

Valley Transit reports that they are in the process of rebranding their buses with recently available State funding. They are anticipating the need to replace their existing bus fleet in the next few years because every vehicle they own has approximately 700,000 miles on it. They provide demand response service in the core area; however, their vehicle fleet for this service needs to be replaced by smaller vehicles due to a lack of rider capacity. The majority of rides (82%) they provide are for commuter service to and from Anchorage.

Soaring Eagle Transit

An established public transit provider with service in the Copper River Basin, also providing connecting service to Chickaloon, Palmer, Sutton, and Anchorage.

People Mover

An established public transit provider operated by the Municipality of Anchorage providing fixed route service in the Anchorage area. People Mover coordinated schedules and curb space with Valley Mover and Mascot before they merged into Valley Transit, and is expected to coordinate with Valley Transit moving forward.

Private Transportation Providers

Organizations providing private transportation services are for-profit entities whose core business is transportation. Taxi and ride-sharing companies are primary examples. Clients typically contact these companies directly; however, private transportation companies often contract with human service agencies to offer discounted services, with clients contacting the human service agency for vouchers or subsidized fares.

An example of the amount of transportation provided by a private company is Alaska Cab which, similar to Valley Transit, provides transportation to and from Anchorage and within the Mat-Su Borough. Alaska Cab owns and operates Redi Rides, a specialized transportation service for riders needing wheelchair accessibility and other specialty medical-oriented transportation. They report having an annual weekly ridership of 1000 and delivering a total of 300,000 rides a year. Another private provider

that recently began providing transportation services along with their service-related transportation is J&J Independent Living, providing the “J&J Spin” program. J&J Spin operates from 4:00 PM to 8:00 AM Monday through Friday, and 24-hours per day on weekends, serving from Houston to the Butte area. The fare for this service is \$5 one way or \$7.50 round trip. J&J Spin also offers an after-hours airport shuttle for \$60 one way.

Coordination: The coordination of services of these providers and their Anchorage partners are limited to assisting riders with transfers. The overlap in the service areas between the three nonprofit transit providers are:

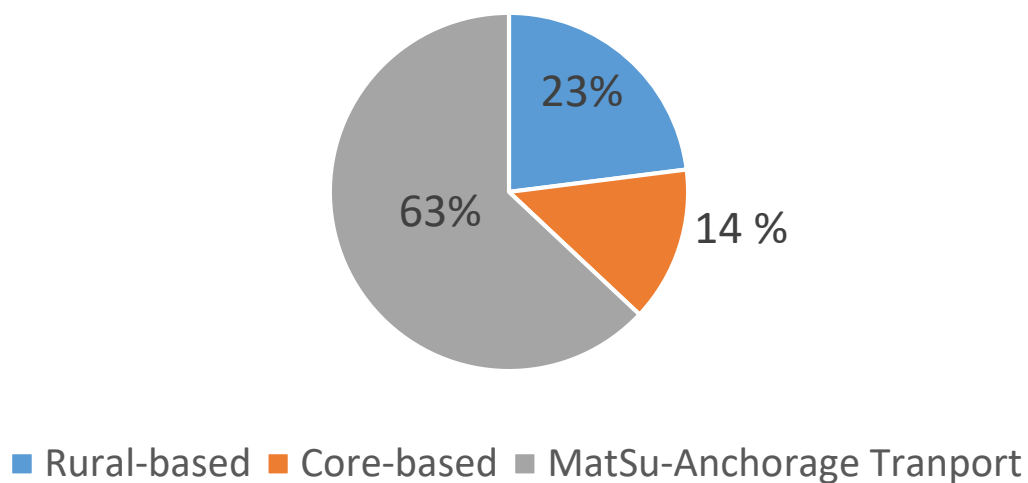
- Sunshine provides transportation to Houston and Wasilla; both areas served by Valley Transit.
- CATS provides transportation to Palmer – an area served by Valley Transit
The Alaska Cab company serves the entire borough and J&J serves from Pt. McKenzie to Houston, Palmer and the Butte areas. Additionally, People Mover, an established public transit provider operated by the Municipality of Anchorage provides fixed route service in the Anchorage area. People Mover coordinated schedules and curb space with Valley Mover and Mascot before they merged into Valley Transit, and is expected to coordinate with Valley Transit moving forward.

Figure 20 Nonprofit and Private Transit Providers

| Provider | Annual Ridership | # of Vehicles | # of Drivers | Dispatch | ADA capacity | Funding | Service Region |
|--|--------------------------|---------------|--------------|-------------|--------------|---------------------|--|
| Non-profit Transit Providers | | | | | | | |
| CATS | Demand Response: 2500 | 3 | 2 | Staff | 4 | FTA 5311, Tribal | Chickaloon, Sutton, Palmer |
| Sunshine Transit | Demand Response: 16,124 | 11 | 11 | Call center | 12 | DOT Medicaid Grants | Talkeetna, Trapper Creek, Willow, Houston to Wasilla |
| Valley Transit | Commuter: 50,460 | 18 | 11 | Call center | Yes | Valley Transit | Palmer, Butte, Wasilla to Pt. MacKenzie, Big Lake, Houston, Meadow Lakes |
| For-profit Transportation Providers | | | | | | | |
| A Cab | Demand Response | DNA | DNA | Call center | DNA | Private | Wasilla, Palmer, Big Lake, Sutton, Houston |
| Alaska Cab/Redi Rides | Demand Response: 300,000 | 21 | 20 | Call center | 16 | Private Medicaid | Mat-Su Borough and to Anchorage |
| J & J Independent Living, LLC | DNA | 2 | 2 | Call center | Yes | Private, Medicaid | Pt. MacKenzie, Houston, Big Lake, Meadow Lakes, Wasilla, Palmer, Butte |

DNA – data not available

Figure 21 Types of Rides Provided Annually by Mat-Su Nonprofit Providers



Key Findings

- **Ridership:** The overall ridership of the three nonprofit transit providers totals 80,028 rides per year. The majority of these rides are provided by Valley Transit for commuter riders to and from Anchorage. Sunshine Transit provides the most non-commuter rides each year (16,124) followed by Valley Transit (10,944) and CATS (2,500).
- For-profit providers provide a significant number of rides to Mat-Su residents each year—well over the amount provided by nonprofit providers (300,000 rides per year).
- **Funding:** The funding for these providers comes from Federal and State grants, private grants and contracts, and Medicaid reimbursement. All of these providers face funding challenges to meet the growing demand in Mat-Su. Valley Transit will need new vehicles soon, Sunshine Transit has recently separated from the Sunshine Community Health Center and they are struggling to keep up with demand, and all have a significant match requirement for drawing down federal funds. Currently there is no Borough or city government local match contribution for any of these transit providers. The MSHF has been assisting Valley Transit and Sunshine Transit with their organizational transformations in anticipation of the cost savings that may be realized as the results of this assessment and plan.
- **ADA Capacity:** Most providers have some level of ADA capacity.

Emergency Medical Services

Emergency medical transportation services are provided by the Mat-Su Borough to residents with emergency medical needs. The Mat-Su borough Emergency Medical Services (EMS) is staffed by a combination of paid on-call responders and full-time paramedics. The Borough's EMS service covers the entire Borough, including Trapper Creek, Talkeetna, Willow, Butte, and Sutton. Lake Louise is a first response area but does not have a licensed ambulance service.

Some of the calls that EMS responds to are not of a high level of severity. The EMS dispatch classifies these call as Alpha Calls. When transportation and available medical and other human services in a community are limited or residents don't understand the proper use of emergency services there are a high number of Alpha calls.

From September 2017 to August 2018, 38% of calls for EMS were classified as Alpha calls. There were 3,264 calls from 3,223 unique households. Fifty percent (1619) of these calls were transported to the hospital, 105 of the calls required a lift for a patient only, 135 required no treatment, and for 428 calls the patient refused treatment. Insurance, Medicare, and Medicaid will pay for this type of transport if the patient is eligible.

Key Findings

- In the last year, almost 4 out of 10 calls to 911 for emergency medical services were of a low severity.
- 1,619 of these calls resulted in EMS transportation being provided to the Emergency Department.

Human Service & Private Transportation Providers – Community-Based Shuttles

Several human service agencies and private companies directly provide transportation for their clients. Full profiles and service area maps were created for the organizations that responded to data requests – these can be found in Appendix D.

These services are often operated by organizations serving their specific clients, such as seniors or individuals with disabilities. They often address unmet transit needs in a community—generally by providing service in areas that are cost prohibitive for public transit or providing specialized services to meet client needs, such as door-through-door service. These organizations typically are not primarily transportation organizations, but they provide transportation as an auxiliary function to meet a wider range of client needs. Services can be provided free of charge, on a donation basis, as a benefit of membership, or for a fee. There are three types of Community-Based Shuttle services: (1) client access transportation, (2) community access transportation, and (3) service-related transportation.

Client Access Transportation

These organizations use their vehicles to transport clients between their homes and agency service locations. The purpose is to provide easier access to services for these clients, as well as reduce no-shows and late arrivals. Examples of this type of transportation include CCS Early Learning which contracts with First Student to provide fixed route transportation to centers in Chugiak, Sutton, Palmer, Meadow Lakes, and Wasilla. This transportation is funded by Federal Head Start funds. The two senior centers in the core area also use this type of transportation for their clients as well as to bring meals to the homes of their clients.

Figure 22 Organizations that Provide Client Access Transportation

| Provider | Organization Services | Transport | # of Vehicles | # of Drivers | Dispatch | ADA capacity | Funding |
|--|--|------------------------------|---------------|--------------|---------------|--------------|----------------------|
| CCS Early Learning | 0-5 early learning centers/home visiting | Contract with First Students | 12 | n/a | First Student | No | Federal funds |
| Mat-Su Senior Services | Aggregate meals, health, promotion/disease prevention | Own Vans | 24 | 17 | Staff | 2 | Medicaid, grants |
| Wasilla Area Seniors, Inc. (WASI) | Aggregate meals, fitness gym, isolation prevention, information and assistance | Own Vans | 1 | 1 | Staff | 20 | Grants and donations |

Mat-Su Senior Services in Palmer has the largest fleet consisting of 24 vehicles with 17 drivers. They provide service in Houston, Point MacKenzie, Knik River up to Sutton and make medical trips to Anchorage. They prefer to provide this service because it is “door through door,” and their drivers are specially trained in providing this service. This service is funded through typical Medicaid funding, as well as Medicaid Waiver funding; however, this will not cover the whole cost, and the center devotes 30% of

their overall funding to provide this service. They suggest a donation of \$6 (Palmer seniors) and \$8 (Wasilla seniors) for each ride.

Wasilla Area Seniors (WASI) offers a much smaller demand response transportation program with one van that consists of transportation to and from lunch at WASI. They also provide meals on wheels to homebound seniors.

Community Access Transportation

This type of transportation consists of providing transportation to clients to go to other providers and services in the community. This can range from the Boys and Girls Club who drop their youth off at four elementary schools every morning after before-school programming and bring the students out for field trips to destinations in the community. This organization has 4 vehicles and three drivers and the transportation is funded by grants and membership fees.

Another example of community access transportation is MyHouse, which serves unaccompanied youth. They report that their drivers have traveled from Fairbanks to Homer 23 times in the past year and they regularly drive to Glenallen, Sutton and Butte to serve people in dry cabin living. Their clients are isolated and they have no transportation options available to them. Their transportation needs are related to school, basic needs, Department of Motor Vehicle visits, court, work, and social places.

Figure 23 Organizations that Provide Community Access Transportation

| Provider | Organization Services | Transport | # of Vehicles | # of Drivers | Dispatch | ADA capacity | Funding |
|----------------------------------|--|------------------------------|---------------|--------------|-------------|--------------|----------------|
| Boys and Girls Club | Before and after school programming for children 7-18 years | Own vans | 3 | 3 | Pre-planned | 0 | Grants, dues |
| Knik Tribal Council | Supports Tribal members with housing, transportation to medical facilities, social services and other programs | Own vans | DNA | DNA | Pre-planned | DNA | Tribal funding |
| MyHouse | Working to support youth 14-24 years who are homeless or at risk for homelessness | Own vans | 6 | 4 | Staff | 0 | Grants |
| Nugen's Ranch | Residential substance use disorder treatment | Own vans | DNA | DNA | Staff | DNA | State grants |
| Valley Re-Entry Coalition | Assists individuals who are coming out of prison to avoid recidivism | Contract with Mat-Su Seniors | n/a | n/a | DNA | yes | Grants |

DNA: Data not available

Service-Related Transportation

These organizations use vehicles incidentally in the provision of therapeutic services in the community. For example, a case manager may be working with a person in pursuit of goals on their treatment plan and will drive them to various destinations in the community, working on skill building throughout.

An example of this service is provided by Mat-Su Services for Children and Adults (MSSCA). They have a 32 vehicle fleet, 2 ADA vehicles, and various personal vehicles and 200 rehabilitation staff. They provide services which include transportation and support at community-based locations for social, employment, medical, shopping and entertainment services. Their home and community care program is state and federally funded through grants and Medicaid.

Figure 24 Organizations that Provide Service-related Transportation

| Provider | Organization Services | Service area | # of Vehicles | # of Driver/ rehab staff | Dispatch | ADA capacity | Funding |
|-------------------------------|---|--|---------------|--------------------------|----------|--------------|---------------------|
| CoDI | Behavioral health services for children and families | Core area | DNA | DNA | Staff | DNA | Medicaid |
| Daybreak | Case management and support for individuals with mental illness to achieve their goals and maximize long-term success | Mat-Su Borough from Willow to Butte | 7 | 7 | n/a | 0 | Medicaid and grants |
| Denali Family Services | Behavioral health services for children | Core area and Anchorage | DNA | DNA | Staff | DNA | Medicaid |
| Mat-Su Health Services | Psychosocial rehabilitation Services including case management, skills development, etc. | Wasilla to Palmer | 19 | 22 | n/a | 0 | Medicaid and grants |
| MSSCA | Provides home and community-based services for Mat-Su residents with intellectual or developmental disabilities | Mat-Su Borough up to Talkeetna an south to Fort Richardson | 32 | 200 | n/a | 16 | Medicaid and grants |

Key Findings

- Organizations that provide transportation for their clients to access their services range from early learning centers to senior centers. Some of these organizations claim that the nonprofit transit system does not adequately serve their clients, and they need to provide this service.
- Some organizations who serve specialized populations (i.e. homeless youth, seniors, Alaska Native people, Prisoner re-entry population) provide transportation for their clients to access services they need in the community rather than rely on the nonprofit transit system to do this.
- There is a category of health and human service organizations that combine providing other services while providing transportation.
- Health and human service providers have a larger combined transportation fleet than nonprofit transit providers.
- There is little or no coordination between transit providers and health and human service providers in terms of sharing a dispatch platform, vehicle maintenance, route coordination, or contracting for services and resources they all need.

Medicaid Transportation

Medicaid has a substantial role in transportation provision for individuals and families with low incomes in the Mat-Su Borough. Medicaid funds eligible medical trips for Medicaid clients and, if necessary, an escort by reimbursing private and human service transportation providers.

Medicaid will reimburse for eligible emergency and non-emergency trips; however, Medicaid may not pay an ambulance bill if a trip is determined not to be an emergency. Non-emergency medical transportation (NEMT) is requested by the medical provider, and Medicaid's Service Authorization Unit determines medical necessity and unavailability of other means of transportation before providing a waiver. Participating providers accept the waiver in lieu of direct payment and will provide the trip.²⁷ The Alaska Medicaid Recipient Handbook provides detailed directions for Medicaid recipients and escorts to arrange transportation.

²⁷ Alaska Medicaid Recipient Handbook.

IV. ASSESSMENT OF TRANSPORTATION NEEDS

Community Input Opportunities

Stakeholder engagement is central to the Coordinated Human Services Transportation Plan (CHSTP). Community input has informed all aspects of this CHSTP, and significant efforts went into seeking broad and equitable representation throughout the plan development process.

Meetings with larger groups of stakeholders fostered an environment where public transit and human services transportation providers, consumers, and advocates could come together to share their diverse experiences. Despite their differences, common ideas, concerns, challenges, and aspirations frequently emerged.

Interviews with transit organizations, human service organizations, advocates, government agencies and elected officials provided further insight to compliment information received from the larger stakeholder and public meetings. The interviews conducted provided opportunities to improve stakeholder representation.

Notifications, advertising, and informational materials for stakeholder engagement included:

- Electronic newsletters
- Facebook event shared to Borough and MSHF Facebook pages
- Facebook advertisement targeting Borough residents
- Flyers distributed to transit and human service organizations for their clients
- Notices published in the Frontiersman Newspaper
- Notice on the Borough's Public Events Calendar
- Plan website for information, updates, and soliciting comments
- Stakeholder mailing list

Figure 25: Outreach Opportunities

| Organization(s)/ Individuals | Stakeholder Type (Provider, Recipient, Government) | Outreach Type (Meeting, Interview) | Date |
|---|--|--|-----------------|
| <ul style="list-style-type: none"> Chickaloon Area Transit Services (CATS) Sunshine Transit Valley Transit | Provider | Interview | May 15, 2018 |
| <ul style="list-style-type: none"> MY House | Recipient | Interview | May 15, 2018 |
| <ul style="list-style-type: none"> Mat-Su Senior Services | Provider | Interview | May 15, 2018 |
| <ul style="list-style-type: none"> Borough Manager | Government | Interview | May 15, 2018 |
| <ul style="list-style-type: none"> Mat-Su Regional Medical Center | Recipient | Interview | May 15, 2018 |
| <ul style="list-style-type: none"> LINKS (Aging & Disability Resource Center) | Recipient | Interview | May 16, 2018 |
| <ul style="list-style-type: none"> Mat-Su Services for Children and Adults (MSSCA) | Recipient | Interview | May 16, 2018 |
| <ul style="list-style-type: none"> City of Wasilla | Government | Interview | May 16, 2018 |
| <ul style="list-style-type: none"> Mat-Su Reentry Coalition | Recipient | Interview | May 16, 2018 |
| <ul style="list-style-type: none"> Mat-Su Borough School District, Families in Transition | Recipient | Interview | May 16, 2018 |
| <ul style="list-style-type: none"> All Providers | Provider | Meeting | May 17, 2018 |
| <ul style="list-style-type: none"> All Stakeholders | Provider, Recipient | Public Open House | May 17, 2018 |
| <ul style="list-style-type: none"> Daybreak Mental Health Service Coordination | Provider | Interview | June 28, 2018 |
| <ul style="list-style-type: none"> All Stakeholders | Provider | Meeting | July 26, 2018 |
| <ul style="list-style-type: none"> Mat-Su Senior Services | Provider | Meeting | August 21, 2018 |
| <ul style="list-style-type: none"> LINKS | Recipient | Meeting | August 21, 2018 |
| <ul style="list-style-type: none"> Mat-Su Health Services | Provider | Interview | August 30, 2018 |

See Appendix C for more meeting and interview details, including meeting attendance, agendas, and the full list of comments.

Major themes identified by stakeholders were categorized as:

- Challenges (Gaps)
- Issues to Be Addressed by the Plan
- Aspirations & Measures of Success

Stakeholders were generally categorized as transportation **providers** or **recipients**. This was based on the different types of data collected and the varying levels of responsibility for plan implementation.

Provider Gaps & Solutions

Overview

Providers are the organizations that directly provide and/or fund public transit or human services transportation for their clients. Providers are ultimately responsible for making most of the organizational and operational changes associated with coordination. These organizations must incorporate (1) user feedback, (2) regulatory parameters, and (3) resource constraints into their decisions concerning shared responsibility, shared operations, shared assets, and shared funding.



The primary objectives of stakeholder engagement for providers were to:

- Facilitate discussion & gather data to inform the CHSTP update.
- Encourage coordination between transit stakeholders for plan implementation.
- Develop a shared, regional vision to inform a sustainable, multimodal transportation network that effectively meets the transportation needs of Borough residents of all ages and abilities.

Feedback

Challenges

- Funding concerns: there are mixed sources, not enough options to acquire funding, and existing resources are in a constant state of drying up.
- The Borough and cities do not financially support public transit.
- High costs to providers—they must raise prices or cut services.
- The size of the Borough and distance between people and services.
- Concern for transportation services that can adequately provide for the specialized needs of a given organization's clients (i.e. "Can they serve our clients like we can?").
- Cumbersome Medicaid ride approval and billing process.
- Confusion regarding who to call for transportation and the range of transportation options—this applies to both providers and recipients.
- Providers are working in silos; there is a need for complementary services and coordination.
- Lack of education and marketing to create awareness of services.
- Ambulances are overused for non-emergency medical transportation—very expensive.
- Providers' and riders' ability/willingness to use new or existing services.

Issues to Be Addressed by the Plan

- Role of the Borough, cities, non-profits, and if possible, for-profits needs to be defined to allow coordination of resources and to encourage cooperation.
- Secure stable funding sources.
- Building trust among providers to enable effective resource sharing.
- Lack of safe, reliable infrastructure.
- Underutilized assets, duplicative services, high cost of operations.
- Access to technology to meet the wide variety of needs throughout the Borough.
- Address data gaps to improve decision making.
- Education and marketing for the services that currently exist.
- Affordability and funding of services at all levels.
- Client sharing.

Aspirations & Measures of Success

- Safe, reliable, dignified, affordable transportation for everyone throughout the Borough for extended hours, including evenings and weekends.
- Accessible and affordable transportation services for at-risk populations 24/7.
- Variety of transportation options including ride-sharing, door-to-door and door-through-door services, fixed route public transit, on-demand, etc.
- Success metrics: lower per-ride costs, increased job access, improved nutritional outcomes, fewer mental health ER visits, less criminal recidivism, fewer EMT transports, few non-emergency trips via ambulance.
- Move transportation out of the top “10 barriers to health” in the Borough.
- Central dispatch system and transportation hub for transferring riders.
- Increased ridership.

Recipient Gaps & Solutions

Overview

A significant number of Borough residents struggle daily to obtain transportation to meet their diverse needs, or those of their clients. They are often the most aware of service gaps and quality issues.

In this CHSTP, recipients include the general public, focusing particularly on individuals that directly utilize public transit or human service transportation as well as caregivers, advocates, and organizations whose clients rely on transportation services to participate in their programs, services, and events. This also includes relevant government agencies & elected officials with an interest in health and human service transportation.



Obtaining input from recipients about the available transportation services is necessary for gaining a comprehensive understanding of service needs and implementation priorities, including needs for specialized transportation, frequent travel routes, and on-demand service. The first-hand knowledge and experience that older adults, individuals with disabilities, and other disadvantaged residents bring applies not only to transportation issue identification, prioritization, and plan implementation, but to the overall design of the planning process itself.

The primary objectives of stakeholder engagement for recipients were to:

- Inform residents about the project.
- Identify the needs of current and potential users, gaps in service experienced by users, and priorities for improvements from the standpoint of users and advocates.
- Develop a shared, regional vision to inform a sustainable, multimodal transportation network that effectively meets the transportation needs of Borough residents of all ages and abilities.

Feedback

Challenges

- Limited service hours and infrequent trips.
- Transportation costs are too high for people who do not qualify for Medicaid but have lower incomes.
- Medicaid-approved cab vouchers are limited to pick up/drop off locations.
- Public transit is not very accessible.
- Resources to consult transportation type, availability and schedules are not well known.
- Safety concerns with public transit.
- Long waits, long trips (many stops), and high costs per trip.
- Transportation services are centrally located while the community is spread out.
- The distance to catch rides or limited ability to enter/exit the vehicle can be a barrier to transit use for riders with certain disabilities.
- Having to prioritize doctor appointments because of the difficulty of accessing transportation.
- Homeless youth have difficulty accessing the shelter in Anchorage.
- Some minors who cannot get a ride from a parent/guardian have difficulty accessing jobs, the DMV, court appointments, and extracurricular activities.

Issues to Be Addressed by the Plan

- Link between housing and transportation.
- Transportation availability (hours of operation and service areas).
- Additional support between exiting the vehicle and reaching the destination; hand off service.
- Costs for seniors, people with disabilities, people with low incomes, college students, and minors.
- Response rates from transit services.
- Education—knowing who to call for transportation and the range of transportation options.

Aspirations & Measures of Success

- Reliability—the ride showing up within a few minutes of the expected time.
- Multiple local neighborhood gathering spots for transit stops, rather than a few bus stops spread far apart.
- Improved affordability of services.
- School transportation availability.
- Trips to Anchorage for entertainment, medical purposes, etc.
- More frequent trips.
- Taxi vouchers subsidizing costs, using a copay structure.
- Greater selection of services.
- Ride sharing.
- Improved transportation options for church and social functions.
- Affordable housing close to transportation services.
- Ability to set up rides via text or mobile application.

V. RECOMMENDED STRATEGIES & NEXT STEPS

The Coordinated Human Services Transportation Plan (CHSTP) is a tool that will be used in a process of improving system-wide transportation services in the Borough to achieve the mission: *“To enhance mobility for senior citizens, individuals with disabilities, individuals with low incomes, and other groups lacking adequate transportation in the Mat-Su Borough through improved public transit and human services transportation coordination.”*

The Mat-Su Health Foundation will continue to partner with the Mat-Su Borough and has committed to help further the next phase of this process—the Implementation Phase, which will be led and executed by community partners, including the private and nonprofit transportation providers, health and human service organizations and Borough, tribal, and city governments. Implementation will begin following adoption of the CHSTP by the Borough Assembly. This chapter includes a menu of strategies which will need to be prioritized during the implementation phase and executed by community champions and the involved organizations.

The strategies recommended in this chapter directly address needs, gaps, and inefficiencies experienced by either providers or recipients of public transit and human services transportation. These strategies were formed using:

- Feedback from providers of public transit or human services transportation
- Feedback from recipients of public transit or human services transportation
- Demographic trends in the Mat-Su Borough
- Asset, operational, and financial data from providers
- Case study research

The following strategies are generally categorized as (1) strategies to improve coordination and (2) strategies to improve services.

The purpose of coordination strategies is to increase efficiency, increase productivity, reduce operating costs, generate new revenue, or any combination of these. Strategies to improve coordination are generally less cost dependent. They reduce total system costs and should be implemented before the following CHSTP update.

Strategies to improve services are intended to enhance mobility for recipients, generally by increasing the service area and hours, improving affordability, and improving access to information. Strategies to improve services are highly cost dependent. Their implementation often relies on external funding or from using the cost savings generated by implementing coordination strategies.

Supporting each strategy is a series of action items. There may be some overlap where specific action items improve both coordination and services. These were placed in the strategy category that more closely fits the effect on system-wide costs.

Strategies to Improve Coordination

5. Centralize Mobility Management Services

A single organization would oversee elements of mobility management in the Mat-Su Borough for both public transit and human service transportation providers. Mobility management can include a broad spectrum of services, detailed in the following action items. While many providers offer some mobility management services, greater efficiencies can be gained by centralizing more of these services.

- a. Centralize Dispatch with Ride Brokering—a single organization would manage dispatch services and refer recipients to transportation providers based on a system agreed upon by participating providers. This organization would also serve as the primary point of contact for information resources and technical support.

For demand response services, this improves efficiency by assigning passengers to the nearest eligible provider. For fixed route services, managing mobility ensures that recipients close to transit routes use this service when possible. This would either reduce labor costs by right-sizing the system-wide number of drivers and dispatch personnel required, or allow providers to repurpose personnel for other important tasks. It would also reduce the time passengers wait for a ride as well as idle time for demand-response personnel.

A number of dispatch programs automate elements of dispatch, ride brokering, data collection, and related services, greatly improving overall efficiency.

- b. Client sharing—providers serving their traditional clients (e.g. senior centers serving seniors) would expand passenger eligibility. Client sharing reduces operating costs by increasing the revenue generated per trip or shortening the distance of trips overall.
- c. Borough-wide travel training—lowers costs for individual providers by multiple providers contributing to travel training programs for those inexperienced in using transit or human services transportation services. Travel training also helps recipients choose more cost-effective options (e.g. utilizing a senior center van instead of an ambulance for non-emergency medical transportation).
- d. Coordinate Service Planning—coordinating the planning and implementing of projects, programs, and service expansions to improve system-wide effectiveness.
- e. Centralize customer service monitoring—customer complaints and inquiries can go to a single location using a single phone number or web application. The central entity could use surveys to solicit regular feedback from recipients. Centralized call centers reduce costs to individual providers and improves consistency and accountability for providers.
- f. Coordinate contract administration, compliance and performance monitoring—fosters the long-term efficacy of coordination efforts. It improves consistency and accountability at a lower cost to individual providers. A single entity primarily

responsible for contract administration can navigate the complexity of contracts involving multiple organizations while retaining the benefit of reduced costs.

Examples of this include maintenance or procurement agreements. Multiple organizations may receive lower costs for maintenance and equipment without the responsibility of negotiating a multi-party agreement. Similarly, a single entity responsible for monitoring contract compliance and performance can reduce the burden on smaller providers that may lack the time or expertise to ensure that all parties uphold contractual agreements.

- g. Coordinate driver, partner and staff training and development—creates a more consistent level of training between providers, reducing the barrier to client sharing. Coordinated training and development can also lower costs to individual providers.
- h. Coordinate data management and reporting support—ensures consistency in data collection and reporting for local decision making, improving the quality and usefulness of collected data. Using a shared program (e.g. central dispatch program) can lower costs to individual providers. Many human service providers in the Borough do not track the data required to inform coordination decisions, and they absorb the costs of transportation provision using general funds. A minimum standard would be established to allow for progress tracking as coordination strategies are implemented. Data to be collected includes (1) ridership data, (2) operational & asset data, and (3) financial data relevant to transportation service provision.
- i. Coordinate fleet management and maintenance—reduces costs to individual providers and—funding pending—helps ensure timely vehicle procurement, maintenance, and retirement.

6. Reduce Operations Costs While Maintaining Service Levels

This strategy focuses on creating economies of scale to reduce operating costs to individual providers. The supporting recommendations help providers become more efficient without sacrificing the quality of their services. This closely relates to the previous strategy—centralizing mobility management services—as a mobility manager can coordinate the following action items.

- a. Joint vehicle & equipment procurement, where possible.
- b. Maintenance & facilities sharing agreements.
- c. Coordinate driver training—potentially lowers the cost of training individual drivers. This also helps improve training consistency and ensuring that drivers are able to meet a wider range of passenger needs.

7. Determine the Appropriate Combination of Transportation Services

An overabundance of providers in an area can inhibit economies of scale, resulting in collectively lower transportation service quality and higher operations costs. Several human service organizations in the Borough directly provide transportation to their clients because they are either

unaware of more cost-effective services, or those services do not fully meet their clients' needs. Service types provided by these organizations can be optimized to meet first and last mile barriers to transportation, or to ensure that each ride is provided using the most appropriate service.

- a. Provider organizations transition to paying for services—providers who (1) have a low capacity and cannot achieve economies of scale, (2) have low productivity (e.g. significant personnel idle time, underutilized assets) or (3) have high per-trip costs that can be achieved at a lower cost by other providers should consider transitioning out of their role as transportation providers.

For many of these providers, transportation is not the core function. Transportation provision was a means of helping their clients access their primary services. These organizations can better utilize limited resources by referring (or even funding) their clients to use more cost-effective transportation services. This increases ridership revenue for the remaining providers—lowering per-passenger costs—and creating opportunities to improve services for recipients.

- b. Fleet and personnel consolidation—part of human service organizations transitioning out of transportation service provision may include phasing out older vehicles and equipment as well as facilitating personnel shifts to remaining provider organizations.

8. Generate New Revenue

While the previous strategies can help reduce costs for providers and boost productivity, external funding is still necessary to maintain operations. Farebox revenue cannot fully cover the cost of operations and remain affordable for many residents who depend on these services.

- a. Providers coordinate grant proposals—this would help mitigate problematic competition for limited funds within the Borough and encourage complementary uses of funds.
- b. Identify additional funding sources—this can apply to grants used to improve transportation for specific recipients served (e.g. senior citizens, individuals with disabilities) or to implement specialized transit improvements (e.g. Intelligent Transportation Systems improvements).

Strategies to Improve Services

6. Improve Information Access & Quality

Many providers and recipients have expressed that they do not know the range of services available to them or their clients, or who to contact for certain transportation needs. Simplifying the process of obtaining high-quality information can greatly improve recipients' experience obtaining and using public transit and human services transportation.

- a. Implement One-call/one-click services—A single phone number phone application, and website for recipients to obtain transportation information. This solution would be improved by combining it with dispatch services as well as services to determine eligibility for specialized transportation and reduced fares.
- b. Address Non-Emergency Medical Transportation (NEMT) provision—many individuals call ambulances for medical transportation in non-emergency situations, which is very expensive. Public transit providers, human service transportation providers, and organizations serving clients requiring NEMT should know the options available to recipients, and ensure that their clients have the necessary understanding and incentives to use more affordable NEMT options.
- c. Offer targeted transportation information at key locations—anticipating specific transportation information needs at various locations can minimize uncertainty in getting home or to the next destination (e.g. senior centers, hospitals for discharged patients, job placement centers, community buildings).
- d. Make real-time information available—recipients would be able to track current information, such as the location of their ride, delays, and the availability of wheelchair spaces on the next bus. This recommendation can be fulfilled using certain dispatch software.

7. Improve Medicaid Approval Process for Providers & Recipients

Many providers and recipient organizations have expressed frustration with the time required for Medicaid approvals. These organizations can spend over an hour on the phone waiting to connect with a representative; however, once connected, multiple requests can be processed.

- a. Medicaid “clearinghouse”—a single entity processing all of the Medicaid waiver requests can save significant time for many stakeholders.

An additional option would be to fund a Medicaid approval “bank” and reimbursement system. To reduce the waiting time for recipients, the clearinghouse would receive the required passenger information and pre-approve trips. In the event that Medicaid does not approve the trip, the cost of the trip would be covered with funds in the Medicaid approval bank. Funds could be replenished by billing the organizations whose clients did not receive Medicaid approval, or by participating organizations paying a regular fee.

8. Improve Affordability for Recipients

Many costs of running transportation operations are fixed—costs like driver wages for a certain number of hours or the fuel costs to drive a certain number of miles remain relatively constant. These can have a large impact on the fare recipients pay. While there is a basic cost of providing transportation services, revenue can change significantly based on ridership. Higher ridership enables transportation providers to charge less per passenger, while retaining the same total revenue. Increasing ridership is the most sustainable way of managing affordability; however, some residents require immediate financial assistance with securing transportation.

- a. Subsidize fares for target populations (e.g. seniors, individuals with disabilities). Some providers in the Mat-Su Borough already do this.
- b. Implement a consistent fare system across providers—creating a “zoned” fare system that providers collectively use would enable recipients to utilize multiple services based on the nearest availability, rather than cost being the only factor.
- c. Encourage major employers to purchase public transit passes for employees.

9. Improve Service Availability

- a. Expand hours of operation—recipients expressed that evenings, nights, and weekends were major temporal gaps in service. Cost-effectiveness should be considered when determining whether this service will be provided by current transportation providers, or by using taxis or other ride sharing services.
- b. Expand service areas—similar to expanding hours of operation, cost-effectiveness should be considered when determining whether this service will be provided by current transportation providers, or by using taxis or other ride sharing services.

10. Improve Marketing

- a. Coordinate marketing and fund a marketing campaign—reduce confusion regarding available transportation services by crafting a consistent message. The end goal is to increase transit ridership through awareness of available services. Coordination and service improvements resulting from this CHSTP should be advertised.
- b. Rebrand Valley Transit rolling stock—following the merger of Valley Mover and MASCOT, Valley Transit requires rebranding of rolling stock to eliminate confusion (from recipients and other providers) regarding the primary transit service in the Mat-Su Valley.

VI. PROJECT IMPLEMENTATION

This chapter provides an approximate timeline to guide transportation providers' implementation of the strategies and supporting recommendations described in the previous chapter. Note that many strategies to improve services are dependent on funding, which can affect the implementation timeline.

Each action item has a corresponding suggested timeline and expected level of effort. The expected implementation timeframe for short range action items is 3-12 months, 1-2 years for mid-range action items, and 3-5 years for long range action items.

The level of effort is a basic estimate of the time and energy required for successfully implementing an action item. Low-effort action items can be accomplished in a short time frame and require fewer hours of input from individual organizations. Moderate-effort action items require a significant amount of dedicated staff time for individual organizations, or simple agreements between providers. High-effort action items require significant dedicated staff time coordinating between organizations as well as more complex agreements and contracts between providers.

Figure 26: Priority of Projects

| Strategies to Improve Coordination | | | |
|--|--|---------------------------|-----------------|
| Strategy | Action Item | Timeline | Level of Effort |
| Centralize Mobility Management Services | Centralize Dispatch with Ride Brokering | Long Range (3-5 years) | High |
| | Client Sharing | Short Range (3-12 months) | Moderate |
| | Borough-Wide Travel Training | Mid-Range (1-2 years) | Moderate |
| | Coordinate Transportation Service Planning | Long Range (3-5 years) | High |
| | Centralize Customer Service monitoring | Long Range (3-5 years) | High |
| | Coordinate Contract Administration, Compliance, & Performance Monitoring | Long Range (3-5 years) | High |
| | Manage Coordination of Driver & Staff Training and Development | Mid-Range (1-2 years) | Moderate |
| | Coordinate Data Management & Reporting Support | Mid-Range (1-2 years) | High |
| | Manage Coordination of Fleet Management & Maintenance | Mid-Range (1-2 years) | High |
| Reduce Operations Costs While Maintaining Service Levels | Joint Vehicle & Equipment Procurement | Long Range (3-5 years) | High |
| | Maintenance & Facilities Sharing Agreements | Mid-Range (1-2 years) | Moderate |
| | Coordinate Driver Training | Short Range (3-12 months) | Moderate |

| | | | |
|---|---|----------------------------|------------------------|
| Determine the Appropriate Combination of Transportation Services | Provider Services Transition Into Paying for Services | Mid-Range (1-2 years) | Low |
| | Fleet & Personnel Consolidation | Long Range (3-5 years) | Moderate |
| Generate New Revenue | Providers Coordinate Grant Proposals | Long Range (3-5 years) | High |
| | Identify Additional Funding Sources | Long Range (3-5 years) | Moderate |
| Strategies to Improve Services | | | |
| Strategy | Action Item | Timeline | Level of Effort |
| Improve Information Access & Quality | Implement One-Call/One-Click Services | Mid-range (1-2 years) | High |
| | Address Non-Emergency Medical Transportation (NEMT) provision | Short (3-12 Months) | High |
| | Offer Targeted Information at Key Locations | Short Range (3-12 months) | Low |
| | Make Real-Time Information Available | Long Range (3-5 years) | High |
| Improve Medicaid Approval Process for Providers & Recipients | Medicaid Clearinghouse | Mid-Range (1-2 Years) | High |
| Improve Affordability for Recipients | Subsidize Fares for Target Populations | Long Range (3-5 years)* | Moderate |
| | Implement a Consistent Fare System Across Providers | Long Range (3-5 years) | High |
| | Encourage Major Employers to Purchase Public Transit Passes for Employees | Short Range (3-12 months) | Low |
| Improve Service Availability | Expand Hours of Operation | Mid-Range (1-2 years)* | Moderate |
| | Expand Service Areas | Mid-Range (1-2 years)* | Moderate |
| Improve Marketing | Coordinate marketing and fund a Marketing Campaign | Short Range (3-12 months)* | High |
| | Rebrand Valley Transit Rolling Stock | Short Range (3-12 months) | Low |

An asterisk () indicates that implementation of this recommendation is subject to funding constraints.*

VII. APPENDIX

STAKEHOLDER ENGAGEMENT PLAN: COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

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Appendix A: Overall Project Schedule

Appendix B: Stakeholder Contact List

PROJECT OVERVIEW

The Mat-Su Health Foundation (MSHF) is partnering with the Matanuska-Susitna Borough (MSB) to improve coordination between public transportation and human service providers within the Borough. Data collection is ongoing, and this Stakeholder Engagement Plan (SEP) sets forth the strategies and activities necessary to engage transit stakeholders and the public in coordinated transportation planning.

BACKGROUND

MSB planning staff is currently working to update the Coordinated Human Services Transportation Plan (CHSTP), with the intent of coordinating transportation services among participating stakeholders to fulfill the requirements of the United We Ride initiative and the Federal Transit Administration's (FTA) Fixing America's Surface Transit (FAST) Act. An updated, complete, and effective CHSTP with associated implementation strategies is essential in obtaining FTA 5310 grant funding through the FAST Act, which requires projects to be derived from a locally developed, coordinated plan. With a coordinated system, transportation programs would share resources, facilities, and information; and coordinate trip reservations, scheduling, dispatching, and passenger trips.

VISION

A sustainable, multi-modal transportation network that effectively meets the transportation needs of all MSB residents.

MISSION

To enhance mobility for senior citizens, individuals with disabilities, and low-income individuals in the Mat-Su Borough through improved public and human service transportation coordination.

STAKEHOLDER ENGAGEMENT STRATEGY

The primary goal of this SEP is to facilitate discussion and data gathering to inform the MSB CHSTP update and encourage coordination between transit stakeholders to implement the Plan. Coordination is about shared responsibility, shared management, shared power, and shared funding. Among transportation services, coordination is best seen as a process in which two or more organizations interact to jointly accomplish their transportation objectives. Coordinated transportation systems leverage shared resources to increase rides, reduce costs, streamline access, and increase customer satisfaction. Engaging representative members of the community in the coordinated planning process at all levels—national, state, and local, however, is essential for success. This SEP presents strategies to achieve this success, including, but not limited to:

- Transportation Stakeholder Meetings
- Facilitated Public Meeting(s)
- Transit Provider Workshops
- Strategic User Survey

PROJECT TEAM

MSHF has engaged the services of R&M Consultants, Inc. (hereafter "R&M") and Nelson\Nygaard Consulting Associates, Inc. (hereafter "NN") to perform data collection to inform the plan update, facilitation and planning functions for stakeholder engagement, and plan implementation. R&M has also engaged experts at the McDowell Group to assist with data collection and interpretation. The project team includes:

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STAKEHOLDERS

Stakeholders have been identified by those providing strictly public transit services as well as those human health service entities who also provide transportation services to their clients, and private transportation services such as taxi cabs. Because the intent of a coordinated plan is for public transportation and human service transportation entities to work together, many non-profit advocacy groups and others representing those experiencing low-income, disabilities, people on public assistance who need to work, seniors, and beneficiaries of the Alaska Mental Health Trust who are the mentally ill, sufferers of chronic alcoholism and mental illness, people afflicted with Alzheimer's or other dementias, and those who are developmentally disabled have also been identified as stakeholders. A complete Stakeholder List is included as Appendix B and will be continually updated throughout the stakeholder engagement process.

TRANSPORTATION PROVIDERS

PUBLIC TRANSIT SERVICE PROVIDERS

Two transit providers – MASCOT and Valley Mover – consolidated in 2017 under a DOT&PF mandate in order to meet FTA requirements for coordinated human services, and now operate as one entity – Valley Transit – to provide public transportation to much of the MSB. Because Valley Transit has an established fleet of vehicles and operational structure, much of the data needed from the public transit service provider relates to financials and cost of operation. Evaluating operating cost, level of service, and transit route data while considering the needs of the public and potential opportunities for coordination with health and human services providers will inform the CHSTP update and help identify implementation strategies.

Other transit providers who will be coordinated with include Chickaloon Area Transportation Services (CATS), Soaring Eagle Transit, and Sunshine Transit. CATS operates public transit demand response services for residents of Chickaloon, Sutton, and Palmer. Soaring Eagle Transit services the Copper River Basin and provides multiple weekly transportation to Anchorage and Valdez, as well as a call-out service for residents within a 50-mile radius from Gulkana. Sunshine Transit, which was established by the Sunshine Transit Coalition under the umbrella of the Sunshine Community Health Center. Sunshine Transit provides services for the communities of Talkeetna, Susitna, and the Sunshine Area.

HEALTH AND HUMAN SERVICES TRANSIT PROVIDERS

At least 20 non-profit health and human services providers also provide transportation services to their clients in the MSB directly. Health and human services providers who currently provide transportation to their clients are senior centers, Hope Community Resources, and Nugen's Ranch.

OTHER PROVIDERS

Other transportation providers with a stake in the MSB are various private taxi cab and rideshare companies, hospitals, private primary care providers, vocational rehabilitation institutions, Mat-Su Health Services, vanpools, institutions of higher learning, and religious institutions providing transportation.

TRANSPORTATION USERS

For purposes of this Data Collection Plan and the associated Stakeholder Engagement Plan, users of the health and human services transportation network are defined as those who need transportation, their

caregivers, their advocates, and those organizations whose clients rely on transportation services to participate in programs, therapy, social events, etc. Users of the specific transportation services discussed in this plan are the general public, and more specifically those individuals with disabilities and/or mobility challenges associated with age, veteran status, etc. who require regular transportation assistance.

GENERAL PUBLIC

The population of the MSB is currently estimated at 104,166 (State of Alaska Community Database Online). Three incorporated cities and 25 communities are located within the 25,000 square mile borough. Health and human services are primarily located in the larger cities of Palmer and Wasilla, and due to the size of the borough, reliable transportation is essential.

SPECIALIZED TARGET POPULATION

According to the 2011 CHSTP, a significant number of residents struggle daily to obtain transportation mobility to meet their diverse needs. This includes mobility-limited, elderly, and low-income individuals and families requiring specialized transportation services, as well as residents seeking behavioral health care or substance disorder treatment, young adults, and unaccompanied youth. Surveying members of the public with disabilities or medical dependencies, patients or clients and staff of healthcare facilities, and caretakers to gain an understanding of needs for specialized transportation, frequent travel routes, and on-demand service is key to developing a truly coordinated plan with effective implementation strategies. The first-hand knowledge and experience that older adults and people with disabilities bring applies not only to transportation issue identification, project prioritization, and plan implementation but to the overall design of the planning process itself.

ADVOCACY GROUPS

Various non-profit advocacy groups represent and advocate for users of the transportation services discussed in the CHSTP. These include but are not limited to:

- R.O.C.K. Alaska
- Behavior Health Integration Team
- My House
- Families in Transition (Mat-Su Borough School District)
- Transit Coalition

HEALTH ORGANIZATIONS

Organizations providing services such as behavioral and vocational therapy, social programs, rehabilitation, and transition support to residents of the MSB have a vested interest in how their clients get to and from their appointments, events, meetings, etc.

GOVERNMENT AGENCIES & ELECTED OFFICIALS

Government agencies in the region involved with transportation, funding, and coordination will be included in the CHSTP update process. This will include Mat-Su Borough agencies and elected officials, City Governments, community councils, and Tribal Councils with interest in health and human service transportation providers.

OUTREACH AND ENGAGEMENT STRATEGIES

FACILITATING FOR A COORDINATED PLAN

A locally developed, coordinated public-transit human-services transportation plan (i.e., coordinated plan) identifies the transportation needs of individuals with disabilities, seniors, and people with low incomes; provides strategies for meeting those local needs; and prioritizes transportation services and projects for funding and implementation. Projects selected for funding shall be included in a coordinated plan that minimally includes the following elements at a level consistent with available resources and the complexity of the local institutional environment.

1. An assessment of available services that identifies current transportation providers (public, private, and nonprofit).
2. An assessment of transportation needs for individuals with disabilities, seniors, young adults and unaccompanied youth, and residents seeking specialized treatments. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data-collection efforts, and gaps in service.
3. Strategies, activities, and/or projects to address the identified gaps between current services and needs, as well as opportunities to achieve efficiencies in service delivery.
4. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

This engagement effort will address the first three elements, with the goal of generating the fourth element as 'next steps' of the coordinated plan.

OUTREACH AND NOTIFICATION

A key component of public, agency, and stakeholder involvement is the timely communication of important project information and process milestones. To ensure stakeholders are informed at key project milestones, notifications will be provided through a variety of avenues regarding project and schedule updates, opportunities for participation, and ways to provide comment. Surveys and data collection efforts are further outlined in the Data Collection Plan (R&M, 2018).

STAKEHOLDER MAILING LIST

The stakeholder mailing list has been developed and an email invitation for the first Stakeholder Meeting, on May 17th, 2018 has been sent. Email addresses that were undeliverable have been rectified. The list will be a living document, to be updated and expanded based on the meeting, public open house, and feedback from stakeholders.

NOTIFICATION, ADVERTISEMENT AND INFORMATIONAL MATERIALS

Notifications to the mailing list and electronic newsletters will be sent out prior to the public open houses and at other important project milestones. MSB staff will publish a notification of the public meeting to the Frontiersman Newspaper and the Borough's Public Events Calendar. R&M will develop specialized

graphics and visuals to support outreach objectives, including a flyer for distribution and posting to advertise the public meeting. Ideally, stakeholders will agree to providing transportation to meeting attendees (as described in the following section). This information would also be included on the flyer, such as shuttle pick up/drop off locations, times, and/or contact information for demand-response transportation to the public meeting.

FACEBOOK EVENTS

Both the Stakeholder Meeting and the Public Open House will also be advertised as events on Facebook created by R&M, and shared to the MSHF and MSB Facebook pages. This method of advertising through social media facilitates sharing of the event and ideally increased awareness of the meeting and as such, attendance.

TRANSIT STAKEHOLDER FOLLOW UP AND INTERVIEWS

Following invitation to the Stakeholder Meeting on May 17th, MSB Planning Staff will reach out to the four primary transit providers in the MSB to confirm attendance and discuss next steps:

- Valley Transit
- Sunshine Transit
- Chickaloon Area Transportation Services (CATS)
- Soaring Eagle Transit

A substantial amount of data associated with these providers' existing transit operations is needed to inform the plan update and identify gaps in service. Identifying these gaps and potential strategies for increasing coordination before the Stakeholder Meeting is ideal to facilitate a productive meeting and a path forward. MSB will also request the transit stakeholders offer transportation to meeting attendees for the Public Open House on the evening of May 17th.

Based on these conversations, R&M, with input from NIN, will develop a list of talking points to guide future discussions in a direction of increased coordination between providers, including human services providers. During the follow up or in future interviews, stakeholders will be asked to define who they service, why their clients need service, and how well they are currently serving them. This honest establishment of current service vs. needs of users will bring stakeholders to a level playing ground, where ideas for improvement through increased coordination are the focus of conversation.

In addition to the four primary transit providers listed above, providers and stakeholders who may be interviewed before the May 17th meeting as part of the site visit and network familiarization tour with NIN include but are not limited to the following:

- Sunshine Clinic
- Chickaloon Clinic
- Mat-Su Health Services
- Knik Tribal Council
- State of Alaska Office of Children's Services
- My House
- Mat-Su Coalition on Housing and Homelessness
- Mat-Su Borough School District, Families in Transition Program

- Hospital Personnel
- Mat-Su Food Coalition
- Reddington School
- Mat-Su Re-entry Coalition
- State of Alaska Division of Vocational Rehabilitation
- LINKS/Aging and Disability Resource Center
- Wasilla Mayor Bert Cottle
- Borough Mayor Vern Halter
- Borough Manager John Moosey
- Valley Pastors Prayer Network

TRANSPORTATION STAKEHOLDER MEETING

This meeting will serve as an official project kickoff with both transit providers and health and human service transportation providers working together with the project team. A commonly defined regional vision and set of goals and objectives for the plan update and following implementation will be developed through input from all providers represented. Remaining data collection needs will also be defined and requests for cooperation will be made from the project team.

FACILITATED PUBLIC MEETING

The facilitated public meeting will aim to identify the needs of current and potential users, gaps in service experienced by users, and priorities for improvements from the standpoint of users and their advocates. A short presentation will be given by R&M and NIN, with input from MSHF and MSB, to inform attendees of the purpose of the meeting, brief them on the status of the CHSTP update, and guide the discussion to yield beneficial feedback.

TRANSIT PROVIDER WORKSHOPS

A series of workshops with transit providers – both public and health and human services – will provide opportunity for greater input, particularly in regards to financial information and identifying opportunities for potential resource sharing. Smaller workshops also create an opportunity to begin an ongoing dialogue with representatives on key issues, strategies, and plans for implementation. These will piggy-back on the stakeholder interviews mentioned previously, in a face-to-face working group setting.

The need for smaller, targeted workshops and the structure of such discussions will be identified following the initial large Transportation Stakeholder meeting. Matters with a common theme, specific gaps in service that need to be addressed, and resource sharing opportunities such as combining fleets or sharing dispatch services are examples of topics that may require further discussion and coordination to evaluate fully. As such, these workshops will be scheduled on an as needed basis following the initial meeting. Outreach and notification will be conducted as outlined in this plan.

STRATEGIC USER SURVEY

Surveys will be distributed to stakeholders in the 'user' or 'rider' segment following the first public meeting (via email provided in the sign-in sheet and through advocacy group contacts). Providing a rider survey will

allow for the general public, or service users to provide direct input into the plan and its development, in addition to the owners and operators of human service providers and public transportation services. The purpose of the survey is to understand who needs human services transportation, why they are using the service and how well their needs are being met. Customer accepted standards and practices may also be surveyed through this process.

COORDINATION AND OUTREACH SCHEDULE

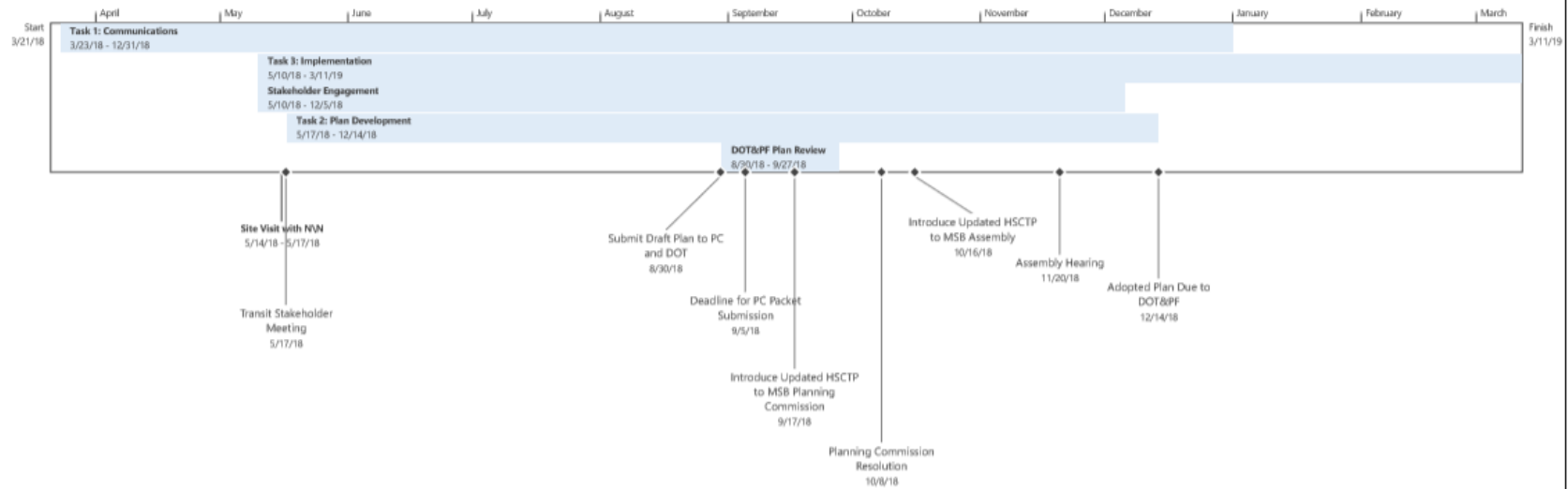
The general timeline for stakeholder engagement is presented in the following table. An overall project schedule is included in Appendix A.

| Stakeholder Group | Outreach Task/Activity | Method of Notification | Date(s) | Responsible Party |
|---|---|--------------------------------------|---------------------------|-------------------|
| Transit Providers | Meeting Notice | Constant Contact Email | 4/20/18 and 4/25/18 | R&M |
| Human Service Providers | | | | |
| Stakeholder Meeting: 10:00 AM to 2:00 PM on May 17, 2018 @ the Wasilla Public Library | | | | |
| Transit Providers | Notice of workshops | Constant Contact Email | 5/18/18 – 7/30/18 | R&M |
| Human Service Providers | | | | |
| ALL | Milestone Updates Regarding Plan Update | Constant Contact Email | 5/18/18 – 12/30/18 | |
| Public Meeting: 5:00 PM to 7:00 PM on May 17, 2018 at the MSHF | | | | |
| Public | Advertise Open House | Facebook Event with Push Ad | 5/4/18 | R&M |
| | | Posted Hard Copy Flyer | 5/7/18 – 5/17/18 | R&M |
| Public | Advertise Open House | Frontiersman Newspaper Ad | 5/7/18 – 5/17/18 | MSB |
| | | Public Events Calendar (matsugov.us) | | |
| | | MSB Facebook Page | | |
| Public (particularly specialized target population) | Advertise Open House | MSHF Facebook Page | 5/7/18 – 5/17/18 | MSHF |
| | | Email/Post Flyer | | |

APPENDICES

|

CHSTP Update - Overall Project Schedule



| Company/Organization | First Name | Last Name | Email Address |
|---|----------------|-------------|--|
| (Chickaloon) Life House Clinic Community Health Center | Lisa | Wade | lisaw@chickaloon.org |
| A-Cab | | | |
| Aging and Disability Resource Center (ADRC) | Derrick | Pennington | |
| Alaska 2-1-1 | Sue | Brogan | alaska211@ak.org |
| Alaska Cab Valley | Ashley | | alaskacab99654@yahoo.com |
| Alaska Families in Transition (FIT) Court | Jessica | Clarkson | jclarkson@akcourts.us |
| Alaska Family Services | Donn | Bennice | donn@akafs.org |
| Alaska Housing Finance Corp. | Jay | McInerney | jmcinern@ahfc.us |
| Alaska Job Corps / Palmer | | | |
| Alaska Legal Services | Maggie | Humm | mhumm@ahsc-law.org |
| Alaska Mental Health Trust Authority | Mike | Abbott | mike.abbott@alaska.gov |
| Alaska Mobility Coalition | John | Kern | ohnakern@outlook.com |
| Alaska Veterans and Pioneers Home | Joshua | Shaver | joshua.shaver@alaska.gov |
| Alaska Wellness (Therapeutic?) Court | Kristin | Hull | khull@akcourts.us |
| Alaska Youth and Family Network | Paul | Cornils | paul@ayfn.org |
| Alzheimer's Resource of AK | Karl | Garber | kgarber@alzaska.org |
| AnchorRides | | | |
| Big Brothers Big Sisters / Mat-Su | Amy | Lalor | amy.lalor@bbbsak.org |
| Boys & Girls Club of Mat-Su | William | Hurr | whurr@bgakalaska.org |
| CCS Early Learning / Head Start | Mark | Lackey | mlackey@ccsalaska.org |
| Chickaloon Area Transportation Services (CATS) | Gary | Hay | ghay@chickaloon.org |
| Chickaloon Area Transportation Services (CATS) | Louis | Friend III | louisf@chickaloon.org |
| Chickaloon Area Transportation Services (CATS) | Marilyn | Staggs | marilyn@chickaloon.org |
| Chickaloon Area Transportation Services (CATS) | Gary | Stevig | roads@chickaloon.org |
| Chickaloon Village Traditional Council (CVTC) | Lukae | Hwnax | cvtransportation@chickaloon.org |
| Chugliak Senior Citizens Inc | Transportation | Services | csctrans@mtaonline.net |
| Chugliak Senior Citizens Inc | Linda | Hendrickson | exedir@mtaonline.net |
| Church on the Rock | Hannah | Nyreen | info@churchak.org |
| City of Houston | Sonya | Dukes | sdukes@houston-ak.gov |
| City of Palmer | Mayor Edna | DeVries | edevries@palmerak.org |
| City of Palmer | Nathan | Wallace | nwallace@palmerak.org |
| City of Wasilla | Mayor Bert | Cottle | cityofwasilla@ci.wasilla.ak.us |
| Coalition of Mat-Su Senior Centers | Chuck | Foster | chuckf@alaskaseniors.com |
| Community Medical Service | Echo Brandy | Wyche | echowyrhe@yahoo.com |
| Connect Palmer | Sherry | Carrington | northernlights_17@rocketmail.com |
| Co-Occurring Disorders Institute (CoOI) | Aaron | Clements | aaronc@codi-ak.org |
| Cook Inlet Tribal Council (CITC) | | | info@citi.org |
| Daybreak Mental Health Coordination Services | Polly Beth | Odum | daybreakmhsc@mtaonline.net |
| Denali Family Services | Chris | Gunderson | cgunderson@denali.org |
| EMS | Gary | Klink | gary.klink@matugov.us |
| Enterprise Rideshare | Stacey | Lawrence | stacey.l.lawrence@ehi.com |
| Fiend 2 Clean | Karl | Soderstrom | fiend2clean@gmail.com |
| First Student | David | Dickerson | |
| Fred Meyer | | | |
| Frontline Mission | Nanette | Rogers | help@frontlinemission@gmail.com |
| Full Circle Counseling | | | |
| Glacier View Transportation | Lee | Althens | |
| Hope Community Resources | | | |
| J&J Independent Living, LLC | Christina | Hart | christina.hart@jintlv.com |
| Knik Tribal Council | Richard | Porter | rporter@kniktribe.org |
| LaMarr Anderson | LaMarr | Anderson | lamarr05@gmail.com |
| LINKS/ADRC, High Utilizer Mat-Su (HUMS) | Eric | Wade | eric@linksprc.org |
| LINKS/ADRC, High Utilizer Mat-Su (HUMS) | Derrick | Pennington | derrick@linksprc.org |
| Mat-Su Borough | Mayor Vern | Halter | vern.halter@matugov.us |
| Mat-Su Borough EMS | Otto | Feather | otto.feather@matugov.us |
| Mat-Su Borough School District, Families in Transition Program | Kathryn | Rose | kathryn.rose@matuk12.us |
| Mat-Su Coalition on Housing and Homelessness | Dave | Rose | matshousing@gmail.com |
| Mat-Su Council on Aging | | | mcoaging@gmail.com |
| Mat-Su Health Services (MSHS) | Kevin | Munson | kmunson@matshhealthservices.org |
| Mat-Su Re-entry Coalition | Janice | Weiss | janice.valleycharities@gmail.com |
| Mat-Su Regional Medical Center (Emergency Department) (ride vouchers) | Pat | Patzke | p.patzke@msrhc.com |
| Mat-Su Regional Medical Center Senior Circle | | | |
| Mat-Su Senior Services (Palmer Senior Center) | Fred | Traber | fredtraber@gmail.com |

| Company/Organization | First Name | Last Name | Email Address |
|---|------------|-------------|--|
| Mat-Su Services for Children & Adults (MSSCA) | Jean | Kincaid | jean.kincaid@msvca.org |
| Mat-Su Transit Coalition | John | Rozzi | johnrozzi@gmail.com |
| Mid-Valley Senior Center | Patsy | Tampke | mysc@mtaonline.net |
| MY House | Michelle | Overstreet | myhouseed@myhousematsu.org |
| Native Village of Eklutna | Richard | Farber | rwa.farber@mtaonline.net |
| Neighborworks | Jim | Nordlund | jnordlund@nvaalaska.org |
| Nugen's Ranch | Karen | Nugen-Logan | k.nugen-logan@nugensranchak.org |
| Onward & Upward | Randy | Dowd | info@onwardandupward.org |
| Palmer Chamber of Commerce | Ralph | Renzi | director@palmerchamber.org |
| People Mover | | | |
| Primrose Retirement Community | Tauna | Norman | |
| Redi-Rides of Alaska | | | |
| Reliable Transportation | | | |
| Set Free Alaska | Philip | Licht | philip@setfreealaska.org |
| Soaring Eagle Transit | Sandra | | stsinnie@gulkanaacouncil.org |
| Soaring Eagle Transit | | | soaringeagletransit@gulkanaacouncil.org |
| Southcentral Foundation/Valley Native Primary Care Center (VNPCC) | Nicole | Jenkins | njenkins@southcentralfoundation.com |
| State of Alaska Commission on Aging | Lesley | Thompson | hss.acoa@alaska.gov |
| State of Alaska Department of Labor job services | | | |
| State of Alaska Division of Public Assistance | | | |
| State of Alaska Division of Vocational Rehabilitation | Mercedes | Henry | mercedes.henry@alaska.gov |
| State of Alaska Offices of Children's Services (OCS) | | | |
| Sunshine Community Health Center | Melody | West | mwest@sunshineclinic.org |
| Sunshine Transit | Kim | Schlosser | kschlosser@sunshineclinic.org |
| Target | | | |
| Uber | | | support@health.uber.com |
| United Way of Mat-Su | Stephanie | Allen | sallen@unitedwaymatsu.org |
| Upper Susitna Seniors, Inc. | Herman | Thompson | lolam@mtaonline.net |
| Upper Susitna Seniors, Inc. | | | ussi.irc@outlook.com |
| Valley Charities | John | Rozzi | johnrozzi@gmail.com |
| Valley Pastors Prayer Network | | | |
| Valley Residential Services | John | Weaver | j.weaver@valleyres.org |
| Valley Residential Services | Ron | Fassett | rfassett@valleyres.org |
| Valley Transit | Jennifer | Tew | jtew@valleytransitak.org |
| VPSI (Vanpool) | | | |
| Walmart | | | |
| Wasilla Area Seniors, Inc. (WASI) | Chuck | Foster | chuckf@alaskaseniors.com |
| Wasilla Behavioral Health (Family Centered Services of AK) | John | Regitano | fcsa@familycenteredservices.com |
| Wasilla Behavioral Health (Family Centered Services of AK) | Angela | Calcaterra | acalcaterra@fcsa-ak.com |
| Wasilla Chamber of Commerce | Ina | Mueller | essca@wasillachamber.org |
| Willow United Methodist Church | | | willowum@mtaonline.net |

Appendix B: Public Notice of Events & Meetings



**MAT-SU HEALTH
FOUNDATION**



**MATANUSKA-SUSITNA
BOROUGH**

Do you provide transportation for your clients or patients? Does your organization use taxi vouchers or public transit to help your consumers access services?

If so, we hope you join us for this important opportunity to improve coordination and transportation options in the Mat-Su.

WHEN: Thursday, May 17, 2018
from 10:00 AM to 2:00 PM

WHERE: Wasilla Library, Multi-Purpose Room
500 N Crusey St, Wasilla, AK 99654

Mat-Su Health Foundation (MSHF) and the Mat-Su Borough are assembling organizations that provide client or patient transportation, along with our public transportation organizations in the Mat-Su, to assist with updating the Coordinated Human Services Transportation Plan (CHSTP).

The Mat-Su Borough is updating the existing CHSTP to fulfill state and federal requirements for continued funding. The Mat-Su Health Foundation is using this opportunity to facilitate coordination between transit providers and improve access to health and human service providers.

Please join us to be part of the plan development process and to ensure your organization and clients are represented.

A meeting for the general public will be held later in the evening on May 17, at a location to be confirmed.

Project Contacts:

Ben Coleman, Transportation Planner
Mat-Su Borough
ben.coleman@matrugov.us
(907)861-7865

Jim Beck, Senior Program Officer
Mat-Su Health Foundation
jbeck@healthymatsu.org
(907)373-2811

Van Le, AICP, Project Manager
R&M Consultants

Are you coming to the Stakeholder Meeting?

LOCATION
Wasilla Public Library

DATE AND TIME
05/17/18 10:00am-05/17/18 2:00pm

Learn about the plan's goals, development process, and how you and your organization can participate to help improve transit services!

vle@rmconsult.com
(907) 646-9659

Maybe

Not
this
one,
but
keep
me
involved!

Van Le, AICP | R&M Consultants, Inc. | 907-646-9659 | vle@rmconsult.com

STAY CONNECTED





MAT-SU HEALTH FOUNDATION

Dear Colleagues,

The Mat-Su Health Foundation's 2016 Community Health Needs Assessment identified Transportation as the #1 factor that affects Mat-Su residents' access to healthcare and to supports for a healthy life. We would like to join with you to build a better transportation system in the borough that gives every resident access to the health, work, and play opportunities they want and need.

To start addressing this issue, we are partnering with the Mat-Su Borough to update the Coordinated Human Services Transportation Plan. As part of this process, we are convening organizations, employers, and providers who offer transportation for their clients or have their clients use public transit or taxi vouchers.

We would like to hear your voice, concerns, and suggestions on this plan at a meeting at the Wasilla Public Library on Thursday, May 17, from 10:00 AM to 2:00 PM. Please make this a priority to attend—your expertise, experience and voice on these matters is critical to building a transportation plan that will serve Mat-Su. A public meeting will follow in the evening where individuals can share input.

Jim Beck, Senior Program Officer is leading this effort for the Foundation. Please don't hesitate to contact him by phone at 373-2811 or email (jbeck@healthymatsu.org) if you have questions or would like more information. Thanks again for your help in building a healthy Mat-Su!

Sincerely,

Elizabeth Ripley

Elizabeth A. Ripley
Chief Executive Officer
Mat-Su Health Foundation
907-352-2863
eripley@healthymatsu.org

WHEN: Thursday, May 17, 2018
from 10:00 AM to 2:00 PM

WHERE: Wasilla Library, Multi-Purpose Room
500 N Crusey St, Wasilla, AK 99654

Project Contacts:

Ben Coleman, Transportation Planner
Mat-Su Borough
ben.coleman@matsugov.us
(907)861-7865

Jim Beck, Senior Program Officer
Mat-Su Health Foundation
jbeck@healthymatsu.org
(907)373-2811

Van Le, AICP, Project Manager

Are you coming to the Stakeholder Meeting?

LOCATION
Wasilla Public Library

DATE AND TIME
05/17/18 10:00am-05/17/18 2:00pm

Learn about the plan's goals, development process,
and how you and your organization can participate to

R&M Consultants
vl@rmconsult.com
(907)646-9659

help improve transit services!

Maybe

Not
this
one,
but
keep
me
involved!

Van Le, AICP | R&M Consultants, Inc. | 907-646-9659 | vl@rmconsult.com

STAY CONNECTED



Do you have a need for Transportation Services?
Join us for a Public Meeting | May 17, 2018



**MAT-SU HEALTH
FOUNDATION**

**DO YOU HAVE A NEED FOR
TRANSPORTATION SERVICES?**

How can we improve transportation for all ages and abilities in our community? We are interested in learning what those in need of public transit, taxi, or on-demand ride help get around the Mat-Su Valley or to get an appointment? If you are would like to hear from you and what your needs are.

Join us for light refreshments and conversations.

THURSDAY MAY 17, 2018

Mat-Su Health Foundation
777 N Crusey Street, Wasilla AK 99654

5 PM TO 7 PM



Transportation in this community event will be available from Valley Transit
Coordinated Human Services Transportation Plan (CHSTP)



CONTACT

Ben Edmonds Transportation Services
ben@mshf.org
907.333.1111

Jon Bork Social Services
jon@mshf.org
907.333.1111

Van La BOP Program Manager
van@mshf.org
907.333.1111

Do your clients or patients have a need for transportation services such as public transit, taxi, or on-demand rides to help them get around the Valley or to appointments?

If so, we would like to hear from them!

[We hope you share this invitation to the](#)

[Public Meeting](#) for improving

coordination and transportation options in the Mat-Su with your clients and the general public.

WHEN: Thursday, May 17, 2018
from 5:00 PM to 7:00 PM

WHERE: Mat-Su Health Foundation (at our new office)
777 N Crusey Street, Wasilla AK

Mat-Su Health Foundation (MSHF) and the Mat-Su Borough are assembling organizations that provide client or patient transportation, along with our public transportation organizations in the Mat-Su, to assist with updating the Coordinated Human Services Transportation Plan (CHSTP).

The Mat-Su Borough is updating the existing CHSTP to fulfill state and federal requirements for continued funding. The Mat-Su Health Foundation is using this opportunity to facilitate coordination between transit providers and improve access to health and human service providers.

Please join us to be part of the plan development process and to ensure your organization and clients are represented.

Reminder: You are invited to the
Transportation and Health and Human Services
Providers Stakeholder Meeting to represent your
organization

WHEN: Thursday, May 17, 2018
from 10:00 AM to 2:00 PM

WHERE: Wasilla Library, Multi-Purpose Room
5000 N Crusey St, Wasilla, AK 99654

Project Contacts:

Ben Coleman, Transportation Planner
Mat-Su Borough
ben.coleman@matasu.gov.us
(907)861-7865

Jim Beck, Senior Program Officer
Mat-Su Health Foundation
jbeck@healthymatsu.org
(907)373-2811

Van Le, AICP, Project Manager
R&M Consultants
vl@rmconsult.com
(907)646-9659

Are you coming to the Stakeholder Meeting?

LOCATION

Wasilla Public Library

DATE AND TIME

05/17/18 10:00am-05/17/18 2:00pm

Learn about the plan's goals, development process, and how you and your organization can participate to help improve transit services!

Maybe

Not
this
one,
but
keep
me
involved!



MATANUSKA-SUSITNA BOROUGH

Van Le, AICP | R&M Consultants, Inc. | 907-646-9659 | vl@rmconsult.com

STAY CONNECTED





**MAT-SU HEALTH
FOUNDATION**



**MATANUSKA-SUSITNA
BOROUGH**

**Please join us for a follow up meeting to identify and
prioritize coordination strategies, review draft
recommendations, and discuss solutions to the issues and
challenges we identified in the first Stakeholder meeting
for the Coordinated Human Services Transportation Plan.**

**We hope you can attend to provide your input on
improving coordination and transportation options in the
Mat-Su.**

WHEN: Thursday, July 26, 2018
from 10:00 AM to 2:00 PM
Lunch will be provided!

WHERE: Mat-Su Health Foundation Office, First Floor Meeting Rooms
777 N Crusey St, Wasilla, AK 99654

Project Website is live!

You can review the summaries from the first Stakeholder and Public meetings and submit comments online! Additional resources available on the website include the 2011 Coordinated Transportation Plan for the Mat-Su Area and the 2016 Mat-Su Community Health Needs Assessment.

www.MatSuCoordinatedTransportation.com

Project Contacts:

Ben Coleman, Transportation Planner
Mat-Su Borough
ben.coleman@matrugov.us
(907)861-7865

Jim Beck, Senior Program Officer
Mat-Su Health Foundation
jbeck@healthymatsu.org
(907)373-2811

Van Le, AICP, Project Manager
R&M Consultants
vl@rmconsult.com
(907)646-9659

Are you coming to Stakeholder Meeting #2?

LOCATION

Mat-Su Health Foundation, 777 N Crusey St, Wasilla,
AK 99654

DATE AND TIME

07/26/18 10:00am-07/26/18 2:00pm

Review and provide input on draft plan
recommendations!

Maybe

Not
this
one,
but
keep
me
involved!

Mat-Su Health Foundation (MSHF) and the Mat-Su Borough are assembling organizations that provide client or patient transportation, along with our public transportation organizations in the Mat-Su, to assist with updating the Coordinated Human Services Transportation Plan (CHSTP).

The Mat-Su Borough is updating the existing CHSTP to fulfill state and federal requirements for continued funding. The Mat-Su Health Foundation is using this opportunity to facilitate coordination between transit providers and improve access to health and human service providers.

Please join us to be part of the plan development process and to ensure your organization and clients are represented.

Van Le, AICP | R&M Consultants, Inc. | 907-648-9659 | vle@rmconsult.com

STAY CONNECTED



Remember to RSVP for Stakeholder Meeting #2 | July 26, 2018



**MAT-SU HEALTH
FOUNDATION**



**MATANUSKA-SUSITNA
BOROUGH**

Reminder to RSVP for Stakeholder Meeting #2

(use the RSVP buttons below or send us an email)

Please join us for a follow up meeting to identify and prioritize coordination strategies, review draft recommendations, and discuss solutions to the issues and challenges we identified in the first stakeholder meeting for the Coordinated Human Services Transportation Plan.

We hope you can attend to provide your input on improving coordination and transportation options in the Mat-Su.

WHEN: Thursday, July 26, 2018
from 10:00 AM to 2:00 PM
Lunch will be provided!

WHERE: Mat-Su Health Foundation Office, First Floor Meeting Rooms
777 N Crusey St, Wasilla, AK 99654

Project Website is live!

You can review the summaries from the first Stakeholder and Public meetings and submit comments online! Additional resources available on the website include the 2011 Coordinated Transportation Plan for the Mat-Su Area and the 2016 Mat-Su Community Health Needs Assessment.

www.MatSuCoordinatedTransportation.com

Project Contacts:

Ben Coleman, Transportation Planner
Mat-Su Borough
ben.coleman@matsugov.us
(907)861-7865

Jim Beck, Senior Program Officer
Mat-Su Health Foundation
jbeck@healthymatsu.org

Are you coming to Stakeholder Meeting #2?

LOCATION
Mat-Su Health Foundation, 777 N Crusey St, Wasilla,
AK 99654

DATE AND TIME

(907)373-2811

Van Le, AICP, Project Manager
R&M Consultants
yle@rmconsult.com
(907)646-9659

07/26/18 10:00am-07/26/18 2:00pm

Review and provide input on draft plan recommendations!

Maybe

Not
this
one,
but
keep
me
involved!

Mat-Su Health Foundation (MSHF) and the Mat-Su Borough are assembling organizations that provide client or patient transportation, along with our public transportation organizations in the Mat-Su, to assist with updating the Coordinated Human Services Transportation Plan (CHSTP).

The Mat-Su Borough is updating the existing CHSTP to fulfill state and federal requirements for continued funding. The Mat-Su Health Foundation is using this opportunity to facilitate coordination between transit providers and improve access to health and human service providers.

Please join us to be part of the plan development process and to ensure your organization and clients are represented.

Van Le, AICP | R&M Consultants, Inc. | 907-646-9659 | yle@rmconsult.com


STAY CONNECTED



Promotions Summary for Your Ad Account

You've spent **\$300** on 2 promotions in the last 60 days.

Last 60 days •

 People Reached



5,232

Reaching more people helps you build brand awareness.

 Event Responses

105

The number of people who responded Interested or Going to your Facebook event, attributed to your ads. [Learn More](#)

Recent Promotions on R&M Consultants, Inc.

Ads activity is reported in the time zone of your ad account.

[+ Create New Promotion](#)



Event Promotion

Community Open House #1 - Chugiak-Eagle Ri...
Thursday, May 24, 2018, 7 PM - 9 PM

Promoted by Sarah Hall on 05/08/2018

Completed

1,465

People Reached

40

Event Responses

\$100.00

Spent of \$100.00

[View Results](#)



Event Promotion

Open House - Human Services Transportation ...
Thursday, May 17, 2018, 5 PM - 7 PM

Promoted by Sarah Hall on 05/04/2018

Completed

3,882

People Reached

65

Event Responses

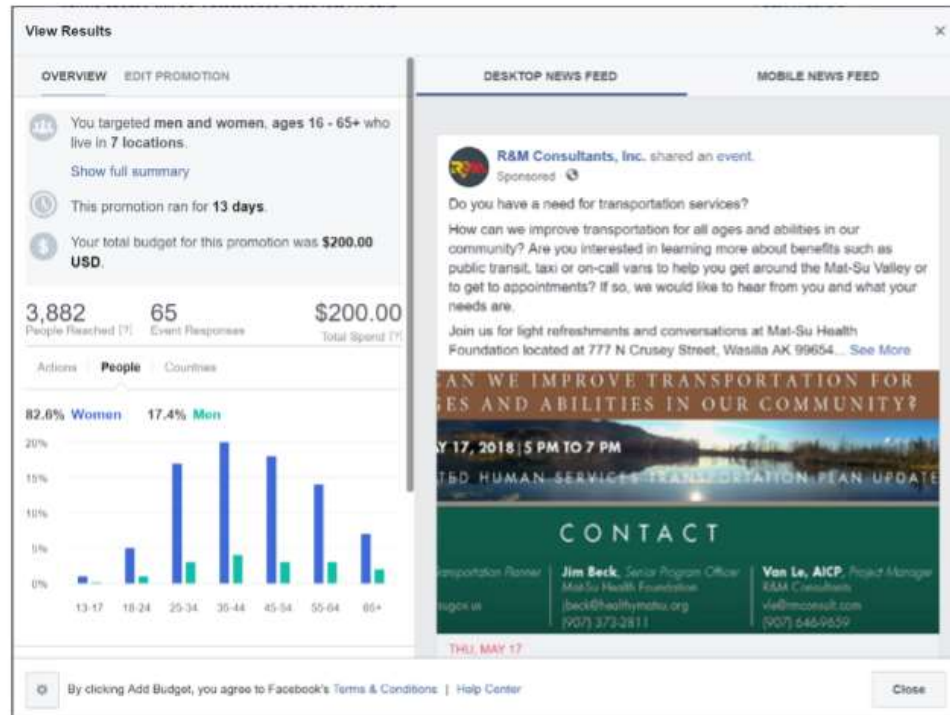
\$200.00

Spent of \$200.00

[View Results](#)

[See All](#) >

MSHF HUMAN SERVICES TRANSPORTATION PLAN UPDATE –



From: [Van Le](#)
To: [Taryn Oleson](#)
Subject: FW: Mat Su Health Event
Date: Wednesday, August 29, 2018 2:58:28 PM
Attachments: [IMG_3587.PNG](#)
[IMG_3588.PNG](#)
[IMG_3589.PNG](#)

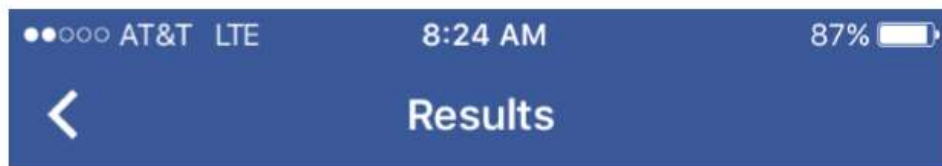
Van Le, AICP *Group Manager – Planning*

R&M CONSULTANTS, INC. | 9101 Vanguard Drive | Anchorage, Alaska 99507
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Innovating Today for Alaska's Tomorrow

From: Sarah Hall
Sent: Thursday, May 17, 2018 8:28 AM
To: Van Le <VLe@rmconsult.com>
Subject: Mat Su Health Event



Results



May 4, 2018 - May 17, 2018

3,830

People Reached

63

Event Responses

Cost per Event Response

\$3.09

\$194.97 spent

\$200.00

[Show Details](#)

Audience



Gender

Age

Location

Women

| | |
|-------------------------|--------|
| Event Responses | 54 |
| Cost per Event Response | \$3.08 |
| Reached | 3,125 |

Men

| | |
|-------------------------|--------|
| Event Responses | 8 |
| Cost per Event Response | \$3.24 |
| Reached | 657 |

●●○○ AT&T LTE

8:24 AM

87%



Results

Results



May 4, 2018 - May 17, 2018

3,830

People Reached

63

Event Responses

Cost per Event Response \$3.09

\$194.97 spent \$200.00

[Show Details](#)

Audience



Gender

Age

Location

25-34

Event Responses 8
Cost per Event Response \$3.96
Reached 805

35-44

Event Responses 19
Cost per Event Response \$2.32
Reached 936

●○○○○ AT&T LTE

8:25 AM

86%



Results

Results



May 4, 2018 - May 17, 2018

3,830

People Reached

63

Event Responses

Cost per Event Response

\$3.09

\$194.97 spent

\$200.00

Event Responses per Day



[Hide Details](#)

Audience



Appendix C: Stakeholder Meeting & Interview Summaries

Coordinated Human Services Transportation Plan Facilitation Stakeholder Meeting

Date | Time: May 17, 2018 (10:00 am to 2:00 pm) |

Location: Wasilla Library Multi-Purpose Room, 500 N Crusey St, Wasilla

Project Team

Mat-Su Health Foundation:

Jim Beck, MPA, Senior Program Officer

Mat-Su Borough:

Ben Coleman, Transportation Planner

Nelson\Nygaard:

Meredith Greene, AICP, Expert Facilitator

R&M Consultants, Inc:

Van Le, AICP, Project Manager

Emily Benti, Planner & Stakeholder
Engagement

Taryn Oleson, Planner & Stakeholder
Engagement

Objectives

- Facilitate discussion and gather data to inform the MSB CHSTP update.
- Encourage coordination between transit stakeholders for plan implementation.
- Develop a shared, regional vision to inform a sustainable, multi-modal transportation network that effectively meets the transportation needs of MSB residents of all ages and all abilities.

Schedule

10:15 am **INTRODUCTIONS**

10:45 am **PRESENTATION**

- Background and Context
- Prepare for Group Exercise
- Introduce Goal of Regional Visioning

11:00 am **GROUP EXERCISE**

Small Group Breakouts on Issues + Opportunities Identification

Pink: Aspirations & Measures of Success for the Plan

Yellow: Issues to be addressed by the Plan

Blue: Challenges

12:15 pm **BREAK FOR LUNCH**

- Story Telling

1:00 pm **VISIONING**

- Presentation to introduce concept and goals, circle back to results from group exercise
- Small group breakouts to develop regional vision

"Dream big", if money were no object, what would the ideal transportation network look like?

1:30 pm **NEXT STEPS**

2:00 PM Adjourn

Meeting Summary

The Stakeholder Meeting began at the scheduled time of 10:00 AM, with attendee networking and familiarization. As attendees entered the multi-purpose room, they were greeted by Ben Coleman and Taryn Oleson who encouraged them to find a seat with people they may not know yet and help themselves to the breakfast pastries and coffee provided. Tables with large plotted maps of the Mat-Su Borough (MSB) and Core Area, pens, markers, and sticky notes were arranged to seat five to six people per table.

At 10:15 AM, when most stakeholders had arrived and settled at a table, Jim Beck gave a short presentation introducing the project, the project team, and how and why the Mat-Su Health Foundation (MSHF) became involved in the Coordinated Human Services Transportation Plan (CHSTP) update. Van Le then presented the agenda and an overview of the stakeholder meetings and interviews the project team had conducted earlier in the week. Individual stakeholders then introduced themselves and the organization they were representing. Meredith Greene asked for a raise of hands for who provides direct transportation to their clients, for which approximately half raised their hand, and who coordinates rides for their clients. Between the two questions, every stakeholder in the room had raised their hand.



Meredith and Ben Coleman continued the presentation with an overview of what a CHSTP is, the federal mandate to have one, and the importance of a coordinated, comprehensive, inclusive plan. Meredith stressed the coordination success already achieved by the large attendance of diverse stakeholders. Van and Meredith provided an overview of MSB demographics, emphasizing growth in the senior population, and reminded attendees who we are planning for: seniors, youth, disabled, veterans, low-income, and at risk citizens, as well as the general public. Improved connections to the many great resources throughout the Mat-Su are needed to serve these populations. The 2016 MSHF Health Needs Assessment identified transportation as a primary barrier to improved health. The CHSTP will include existing conditions, a needs assessment, and recommendations for a better coordinated transportation system; the purpose of this meeting was to kick off coordination between transit providers to inform the Plan.

Small Group Breakout Exercise

Following the presentation and a brief question and answer session, a small group breakout activity was conducted to discuss issues, challenges, and ideas. Each table was given three different colored pads of post-it notes and were asked to write their aspirations and measures of success on pink post-its, issues to be addressed on the yellow post-its, and challenges on the blue post-its.

Van, Emily and Meredith walked around the room collecting post-it submissions from tables and handed them to Taryn, who was sorting the notes into categories on the wall in the front of the room (see *Issues + Opportunities Identified: Small Group Breakout Exercise* below). The breakout activity lasted approximately 45 minutes, after which the project team reported back some of the main themes heard.



Major themes identified as a result of the activity included:

| Challenges | Issues | Aspirations and Measures of Success |
|---|--|---|
| <ul style="list-style-type: none"> ▪ High costs to providers and riders, continuing decreases in funding, and cumbersome Medicaid ride approval/billing process. ▪ The size of the borough and distance between people and services. ▪ Limited service hours and infrequent trips. ▪ Confusion, duplication, and inefficiencies regarding who provides what services is a challenge for riders/public as well as providers. ▪ Providers are working in silos and there is a need for complementation and coordination. ▪ Lack of education, marketing, and potential ability/willingness to use existing or new services. ▪ People who could use services the most do not know how to access or afford them. | <ul style="list-style-type: none"> ▪ Role of the borough, cities, non-profits, and if possible for-profits needs to be defined to allow coordination of resources and to encourage cooperation. ▪ No one wants to work together if their own organization will lose money, so trust and assurance for improvements is essential. ▪ Lack of safe, reliable infrastructure and access to technology to meet the wide variety of needs throughout the Borough, as well as education and marketing for the services that currently exist. ▪ Affordability and funding of services at all levels. | <ul style="list-style-type: none"> ▪ Safe, reliable, dignified, affordable transportation for everyone throughout the Borough for extended hours, including weekend and evenings. ▪ Accessible and affordable transportation services for at-risk populations 24-7. ▪ Variety of transportation options including ride-sharing, door-to-door services, fixed-route public service, on-demand, etc. ▪ Success metrics: increased employment, decreased suicide, track nutritional outcomes, decreased mental health ER visits, less child maltreatment, healthier people, less criminal recidivism, less EMT transports, ▪ Move transportation out of the top "10 barriers to health". ▪ Central dispatch system and transportation hub for transferring riders. |

Following the breakout activity, the meeting broke for lunch provided by the MSB, and Meredith prompted discussions with a "What If?" game, challenging tables to build on a single person's idea or concept about coordinated transportation by adding a "and what if..." after each idea. Attendees were encouraged to play the "What If?" game and network with others in the room to further explore ideas resulting from the previous small group breakout exercise. After half an hour, Emily shared some stories that were included in the MSFH Needs Assessment as well as her own personal stories of the importance of access to reliable transportation. One stakeholder added that *"a vehicle means independence, and when you don't have transportation, you lose your independence."* Stakeholders began sharing some of their own stories and ideas on how transportation could be improved.

There was not a road to Skwentna, where I grew up, in the 90s. There were 25 kids at the K-12 school and the school was really the hub of the community. It was where we could shower, do our laundry, and hold community events. When the school closed down, so did the public airport due to reductions in state funding. Transportation is essential, including the health flights, as well as access to general goods and services. **How do people who live on the fringe of the grid, with difficult access needs or neglected transportation needs, get access to healthcare and other social services?**

| |
|---|
| <p>"What If" table game results: What if people who are discharged from the Emergency Room at night could call and get a ride, and what if it was cost effective, and what if we got a grant to fund it, and what if we could provide a greater service to meet more than the specific niche goal of 'off hour' ER patient release, and what if we had a coordinated service throughout the valley.</p> |
| <p>The faith based community network uses Facebook regularly to schedule volunteers to meet transportation needs of their clients. It's informal but effective for the population they are trying to help.</p> |
| <p>What if this faith based community resource could be expanded beyond their faith based areas? Including accessibility for all (car seats available, ADA/wheelchair accessible, etc.)</p> |
| <p>United Way 211 dispatch system currently connects a caller to a service they need (call dispatcher determines what service they need). What if we have a dispatch system to connect people to a general hub that would get them to where they needed to go? Include a report back/confirmation system from drivers that track "Yes, these at risk clients/patients/riders got where they needed to go."</p> |
| <p>Resource sharing through physical marketing and social media marketing for specific program availability is heavily relied upon.</p> |
| <p>Question: <i>Would the MSB be willing to mitigate liability (such as background checks and coordination) for a volunteer based transit needs system?</i> Response by Jessica Smith, MSB Planning Services Division Manager: <i>It's possible. A similar volunteer based model was used for the lake water quality monitoring program the borough is soon retiring, so it is a possibility.</i></p> |

Ben and Meredith explained the importance and need for consistent data collection and how it will support plan development, opening the door for more coordination. Data collection forms had been submitted by a few stakeholders before the meeting, but Ben informed the group that they would be receiving a follow-up email after this meeting that would include a data collection form for each transportation and health and human service provider to fill out.

Visioning Exercise

Following lunch and story sharing, participants returned to their small groups to complete a visioning exercise. Each table was tasked with developing a comprehensive statement to capture the long term-overarching goals and vision for coordinated transportation within the MSB. The following was reported back by the three small groups:

"Dependable, accessible, easy to navigate, available (evenings/nights and weekends), and keeps dignity and respect a priority."

"Dignified, non-discriminate access to quality care for all that recognizes the reality of individual situations (24-hours, regardless of status) and is sustainably funded."

"Whatever it takes to creatively get people where they need to go."

Issues + Opportunities Identified: Small Group Breakout Exercise Results

The attached detailed results from the small group exercise were recorded from all post-it notes collected during the Stakeholder meeting. A word cloud illustrating the top 50 most frequent words in each category is also included. The project team then reviewed next steps, referring back to the timeline illustration, and the meeting adjourned at the scheduled time of 2:00 pm.

CHALLENGES

Funding, Costs, Billing, Monetary Considerations:

- How to bill for transportation?
- Access to funding – nonprofit v for profit providers
- Medicaid budget shortfall
- Medicaid and insufficient payment
- Cost to ridership (almost any cost can be prohibitive)
- Affordable vehicles to meet needs
- High cost cab rides
- Taxis cost a lot of money
- Cost of liability/insurance for agency and staff
- Cost of transportation
- People losing grant funding, so they have to quit jobs, because no transportation to work, job doesn't pay enough to pay existing high transportation costs
- Reliability, cost, safety
- Increasing income inequality national and at the state level
- Funding
- Funding
- Funding- rural areas, changing/overlapping schedules, communication to clients with delays have trouble coordinating

Service Type and Operational Considerations:

- Who will provide the transportation?
- Public transportation is not reliable
- Limited hours and days of available service
- Door-to-door needs (and no funding), due to disabilities, taxis are not reliable
- Limitations to HCBW services. Funding for services. Transportation built into some services but not for others – supported employment
- Ride share times to/from Anchorage

- Duplication of services
- Multimodal transit center, visibility, accessibility, convenient
- Bus system east side of Glenn Highway and Parks – KGB, Lucille, Bogard, Seldon, Wasilla Fishhook, Trunk, etc.



- "Hub" access for needs decreasing
- Increase frequency along routes, increase transfer locations, increase MSB monetary contributions/investment
- Systems access overlap (off-grid v paved)
- Medicaid process for Cab vouchers

Geographic, Environmental, and "Alaska Factor"

Challenges:

- Too much space to cover. Cities need to engage and help coordinate
- Park & Ride Security
- 1,200 + miles of road system for Mat-Su
- Lack of Borough support
- MSB does not have health powers

- It's Alaska...
- Distance from affordable housing to core services
- Distance- huge gaps
- Sheer volume and distances
- Living far from city centers
- Inappropriate vehicles for terrain (need 4x4s)
- Winter transportation

Demographics, At-Risk Populations Considerations:

- Homeless – can't schedule taxi rides because they don't know where they will be next
- Non-profit clients who are low income and in-need are often considered last
- Probation and parole call for drug tests in the AM so not a lot of time to plan rides
- People keep thinking heroin is the only problem; meth, alcohol, misuse of Rx are all serious health issues
- Discrimination
- Connectivity or access to technology

Coordination, Education, Perception/Willingness:

- Complementation and coordination, follow through with referrals
- Communication between providers and riders
- Silo thinking among providers
- Silos
- Getting all agencies to work together to make this work
- Communication to public
- Marketing and expanding public knowledge
- Lack of education regarding ride sharing
- Ability/willingness to ride share
- People thinking that this is too hard – everything has a path!

ISSUES

Stakeholder Cooperation and Coordination:

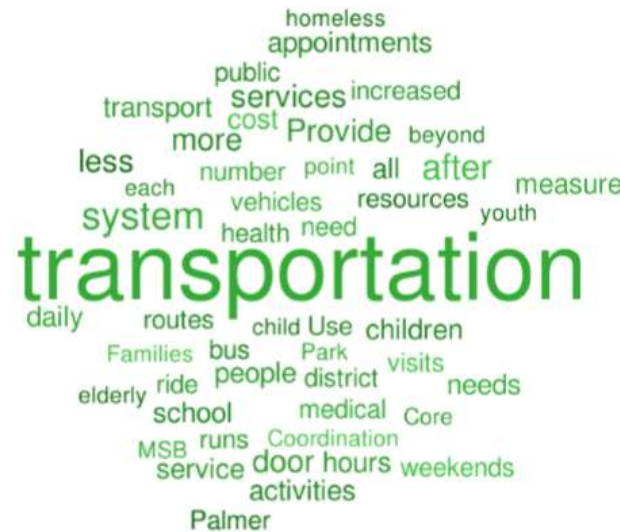
- No one wants to play nice if they will lose money
- Help cities engage with nonprofits to meet client transportation needs
- Help borough support city plans and coordinate outlying areas
- Integration of Palmer in the plan
- Cooperation between resources
- Increase employment
- Unused resources with other providers
- Increase actually making attending referrals

Infrastructure:

- Bike and walking paths (more of them) and no ATVs
- Address access to technology and internet access
- Need bus routes to coordinate with school buses for services for homeless students
- Empty vehicles that could be filled
- Safety
- Safe and frequent drop off areas
- Designated ATV paths for transportation
- Remote areas need coverage (Chase and Skwentna)

Service Type and Operational Considerations:

- Winter/inclement weather transportation
- Appropriate vehicle for weather conditions
- Ride services for low income people/families
- Not enough on-demand taxi services available for Medicaid vouchers to be useful
- Must be geared towards poor people
- Information privacy



- Liability – cant' have certain people in the same vehicle
- One dispatch/information center

Cost, Funding, Billing Considerations:

- Cost to maintain a fleet of cars on a small non-profit
- Folks cannot afford taxi rides to work, need door to door services due to disabilities
- Discount rides for seniors, disabled, and low income
- Affordability- people who use public transportation can't pay for it
- Medical transportation escort costs/funding
- Funding
- Cost saving for health and justice
- Funding for security for Park & Rides

- Looking at the highest populated areas of the Borough as needing a public bus service
- Staffing/ability to collectively bargain
- Time to travel to consumer and return that is not covered by Medicaid

Community Health, Education, and Perception/Willingness:

- Educate ride sharing
- Marketing and public awareness
- Independence/self sufficiency
- Huge opportunities for lots of healthy safe and sober events/supports
- Improved community health
- Transportation as it links to housing – plan new housing and transportation together (land use/transportation connection and dependence)

ASPIRATIONS & SUCCESS MEASURES

Regional Vision:

- Safe, reliable, transportation for those with disabilities at after hour times
- Dignity, affordability and safety in transportation
- Sustainable group transport
- Door to connect Mat-Su
- People over 60, anyone experiencing a disability and all kids get to all appointments and activities they WANT (beyond minimum/required needs)
- Transportation leads to new and fantastic businesses that make people's lives better

Demographics, At-Risk Populations Transportation Considerations:

- No restrictions
- Access for wheelchair bound to health and social activities
- Transportation to and from homeless camps
- Safe transportation for children to appointments
- After school transport for kids and parents together
- Transport to lots of education and resources for families to decrease child maltreatment
- Transportation options for OCS visitations, transportation to therapy/groups/court
- Provide transportation for medical needs from 6 pm – 6 am and weekends
- Free transport for homeless to gain stable independence

Measures of Success:

- Full vehicles on every trip (increased ridership and number of daily runs)
- Success metrics: increased employment, decreased suicide, track nutritional outcomes, decreased mental health ER visits
- Measure: less child maltreatment, healthier people, less criminal recidivism, less EMT transports, less loneliness
- Daily visitation between parents and their children: measure: daily visits actually happening
- Coordinated public transportation system measure: person on KGB can get to Palmer, number of people are able to go to appointments on their own.
- Move transportation out of the top 10 barriers in the MSHF needs assessment
- Various forms of transportation to meet various needs
- Families are completing maintenance health checks at a higher rate, and using less emergency services
- Decrease pedestrian accidents (ped/vehicle collisions)

Service Type and Operational Considerations:

- Regular, coordinated routes organized by service type
- Public bus along major routes
- Vehicles to meet all need types
- Reliable consistent public transportation on a schedule, before and after "work hours" and weekends – with wheelchair accessibility
- Provide off hours transportation outside of the Core Area
- Provide transportation for employment 24/7

- Dependable transportation after hours and weekends
- Weekend transportation system
- After hours/weekend non-emergency medical transportation
- Door to door service for those not able to walk any distance at little to no cost
- House to destination on call and affordable transportation
- Trauma informed transportation companies (more people beyond EMTs who could appropriately provide transportation)
- Feeder system with main routes
- Ride sharing
- Uber/Lyft service
- Transportation escort (medical)
- Imbedded or trained drivers to point riders to resources
- MSB School district has bus contracts with First Student and Banker & Banker
- After hours transportation
- Monorail
- Regulated cab services

Destinations and Route Connections:

- Butte, Big Lake, and Houston need to be included in the plan (currently underserved)
- Willow and Trapper Creek need more coverage and days
- More runs to Wasilla from TKS – multiple runs daily with increased ridership as a performance measure
- Students outside the Core area can get home after extracurricular activities
- Farmers Market transportation

Infrastructure and Technology:

- Singular dispatching point for all providers
- Bike paths on Palmer Wasilla Fishhook Rd
- More “Hubs” – bus shelter, park n’ ride, indoor station
- Have a dead center transportation center that has support services and activities for a healthy life (and healthy food) where transportation to special things can also be provided
- Safety at Park & Rides
- Teledoc system to subsidize the face to face office visit for some instances
- Use technology to reduce the number of in person visits by 20% for a cost savings to borough
- Use virtual appointments and meetings, stay connected to children and the incarcerated
- Job search door to door

Coordination, Education, Perception/Willingness:

- Collaboration with services in Palmer with Upper Mat-Su
- Coordination between agencies
- Borough buy in
- Easy access to benefits and elected officials
- Are the cities engage and planning? Goal: each city has a system that coordinates valley-wide
- Sharing resources
- “Pipe Dream” combined youth and senior system (use existing vehicles to offset costs for each other)
- Super strong partnership with CIT = fewer unnecessary arrests
- Short School District busses could be contracted out for evening and weekend communities transportation

- Medicare handicap ride services (DVR or elderly)
- Easily understandable system will lead to more usage
- I wonder if the community could contract with the MSB school district busing system to provide ongoing-strategic transportation to children throughout the summer months (neighborhood and strategic locations).

Cost & Funding:

- Cheap transportation – cabs and buses
- Low cost cabs
- Affordable transportation and the ability to get to work
- Help elderly and youth with costs of rides



Stakeholder Meeting 1 Sign-in Sheets | 5.17.18



MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation Stakeholder Meeting # 1

Date | Time: May 17th, 2018 from 10:00 AM to 2:00PM

| Location: Wasilla Public Library, 500 N Crusey St., Wasilla

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-------------------|------------------------|----------------------------|----------------|
| Billie Jo Hansen | J&J Independent Living | billie.hansen@jjinliv.com | 907-373-3953 |
| Christina Hart | J&J Independent Living | christina.hart@jjinliv.com | 907-375-5534 |
| Carol Dulinsky | KNIK HOUSE | KNIKHOUSE@MTAONLINE.NET | (907) 203-1333 |
| Josh Shaver | Alaska Pioneer Homes | joshua.shaver@alaskagov | 907 751-6523 |
| Sherry Carrington | Connect Palmer | sherry@connectpalmer.org | 907-746-9675 |
| Jennifer Tu | Valley Transit | jtu@valleytransit.org | 907 232-2276 |
| Sharon Klein | LINKS | sharon@LinksPRC.org | 373-3632 |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

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Location: Wasilla Public Library, 500 N Crusey St., Wasilla

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|------------------|---|----------------------------------|----------|
| Joe Pulver | Matsu Senior Services | Rides@MTAonline.net | 745-5454 |
| Sherry Hill | Set Free Alaska | sherry@setfreealaska.org | 373-1732 |
| Janice Weiss | Matsu Peer Support | janice.valleycharities@gmail.com | 441-4077 |
| Vickie Knapp | Mat-Su Health Services | knapp@matkuhealthservices.org | 352-3251 |
| Louise H. Friend | Chickaloon Native Village Chickaloon Area Transit Sys. | Louise@chickaloon.org | 745-2287 |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation Stakeholder Meeting # 1

Date / Time: May 17th, 2018 from 10:00 AM to 2:00PM

Location: Wasilla Public Library, 500 N Crusey St., Wasilla

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|------------------|---------------------------------|----------------------------|----------|
| Polly-Beth Odom | Daybreak Inc. | Pollybeth@daybreakmhsc.com | 745-6012 |
| Barb Worley | Neigaborworks Alaska | bworley@nwalaska.org | 242-5628 |
| Miranda Aiken | Alaska Youth + Family | m.randa@ayfn.org | 748-7317 |
| Kristal Hermon | Alaska Youth + Family | khermon@ayfn.org | 538-3690 |
| Jessica Clarkson | FIT Court / Alaska Court System | jclarkson@akcourts.us | 746-8183 |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation Stakeholder Meeting # 1

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| Location: Wasilla Public Library, 500 N Crusey St., Wasilla

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-----------------|----------------------|-------------------------------|--------------|
| Kim Schlosser | Sunshine Transit | kschlosser@sunshineclinic.org | 907-495-8411 |
| Aaron Clements | CODI | aaronc@codi-ak.org | |
| Shelby Shaffer | Valley Transit | sshaffer@valleytransitak.org | 907-521-3899 |
| Herman Thompson | Sunshine Transit | hthompson@sunshineclinic.org | 907-733-2626 |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation Stakeholder Meeting #1

Date / Time: May 17th, 2018 from 10:00 AM to 2:00PM

Location: Wasilla Public Library, 500 N Crusey St., Wasilla

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-----------------|---------------------------------------|---------------------------|----------|
| Scott Kubacki | mat-su Services for children + Adults | Scott.Kubacki@mssca.org | 352-1220 |
| Donn Bennick | AK Family Service | donn@akats.org | 746-6231 |
| Cynthia Norvell | Mat Su Services for Children + Adults | Cynthia.Norvell@mssca.org | 352-1272 |
| Lauren Newton | AK Legal Services | lnewton@alxc-law.org | 887-9949 |
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MAT-SU HEALTH
FOUNDATION



~~SIGN IN~~

Coordinated Human Services Transportation Plan Facilitation
Stakeholder Meeting #1

Date / Time: May 17th, 2018 from 10:00 AM to 2:00PM

Location: Wasilla Public Library, 500 N Crusey St., Wasilla

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-------------------|----------------------|---------------------------|----------|
| Heather Resz | Links ADRC | heather@linksprc.org | 373-3670 |
| Michele Harmeling | United Way of Mat-Su | admin@unitedwaymat-su.org | 745-5824 |
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SUMMARY

Coordinated Human Services Transportation Plan Facilitation Public Open House

Date | Time: May 17, 2018 (5:00 pm to 7:00 pm) |

Location: Mat-Su Health Foundation Building Foyer, 777 N Crusey St, Wasilla

Project Team

Mat-Su Health Foundation:

Jim Beck, MPA, Senior Program Officer

Mat-Su Borough:

Ben Coleman, Transportation Planner

Nelson\Nygaard:

Meredith Greene, AICP, Expert Facilitator

R&M Consultants, Inc:

Van Le, AICP, Project Manager

Emily Bentti, Planner & Stakeholder
Engagement

Taryn Oleson, Planner & Stakeholder
Engagement

Objectives

- Inform residents of the project;
- Identify the needs of current and potential users, gaps in service experienced by users, and priorities for improvements from the standpoint of users and their advocates;
- Develop a shared, regional vision to inform a sustainable, multi-modal transportation network that effectively meets the transportation needs of MSB residents of all ages and all abilities.

Schedule

5:00 pm OPEN HOUSE BEGINS

- One-on-one welcome and sign in
 - PowerPoint showing information about the project background and goals looping for attendees to read at their leisure.
 - Distribute rider surveys for completion
- Project Team

5:45 pm PROJECT OVERVIEW & GROUP EXERCISE

Small Group Breakouts on Issues + Opportunities
Identification

Pink: Aspirations & Measures of Success for the Plan

Yellow: Issues to be addressed by the Plan

Blue: Challenges

Table facilitation by Meredith, Van, Ben,
Jessica, Emily, Taryn

As Post-Its are generated, staff will post
on wall in themes (refer to attached
example)

6:45 pm Collect rider surveys

Project Team

7:00 pm Adjourn

Meeting Summary

The Public Open House began at the scheduled time of 5:00 PM, with three participants arriving a few minutes early via Valley Transit, who provided complimentary transportation to the meeting. As attendees entered the foyer of the Mat-Su Health Foundation (MSHF) building, they were greeted by Taryn Oleson who encouraged them to sign in and find a seat to participate in the presentation and discussion. Large plotted maps of the Mat-Su Borough, Core Area, and demographic information were displayed on easels. Comment forms, Rider Surveys, post-it notes, and pens were provided at each table.



At approximately 5:30 PM, Meredith Greene and Ben Coleman introduced the project team and provided an overview of what a Coordinated Human Services Transportation Plan is and how the public can participate in the plan update process. Van and Meredith provided an overview of the growing MSB population, especially the senior population, and reminded attendees who we are planning for; seniors, youth, disabled, veterans, low-income, and at risk citizens, as well as the general public. There are a lot of great resources throughout the Mat-Su, but connecting people to those resources is a barrier that needs to be overcome. The MSHF Health Needs Assessment that was conducted in 2017 identified transportation as a primary barrier to improved health. The CHSTP will include existing conditions, a needs assessment, and recommendations for a better coordinated transportation system.



Following the presentation, a small group breakout activity on identifying issues and opportunities was conducted. Each table was given three different colored pads of post-it notes and were asked to write their aspirations and measures of success on pink post-its, issues to be addressed on the yellow post-its, and challenges on the blue post-its. Van, Emily, and Taryn walked around the room collecting post-it submissions and engaging in discussion with the public, asking and answering questions. The post-its were displayed on the wall to show recurring themes among the public. The breakout activity lasted about 45 minutes, when the project team collected rider surveys. Valley Transit picked up the last attendees at approximately 7:15 PM.

A reporter from the Frontiersman Newspaper attended the meeting and interviewed Chuck Foster from WASI, Meredith

Greene, and Van Le, as well as took photos.

Issues + Opportunities Identified: Small Group Breakout Exercise Results

The results of the small group breakout exercise are listed below. The rider surveys and comment forms are attached to this summary. Comments and survey responses generally indicated a need for affordable, reliable, and coordinated transportation services at all hours across the MSB.

CHALLENGES

- Cost of cabs is too high for people on limited income. Bus is not accessible due to mobility.
- Cost of cab services
- Limited services for transportation
- Resources to consult type, availability and schedules of transportation
- Regular public bus systems are not safe for people with some intellectual disabilities
- I don't like long waits, long trips (many stops), high cost per mile
- Medicaid approved cab vouchers being limited to pick up/drop off locations
- Centralized transportation in a spread out community
- Amputee may have special needs; distance to catch rides, challenge of getting into vehicles, etc.

ISSUES TO BE ADDRESSED BY THE PLAN

- Where people live
- Labor and liability costs
- Spread out community with limited resources outside city limits
- Available transportation almost non-existent
- When my son deploys I need help every Monday and Thursday
- Underutilized assets, separated dispatch (many providers), high cost of operations (fuel, etc.)
- A lot can happen (negative) between getting off the bus and getting to your job/appointment/store; need support/hand off service
- Can't get through to People/Valley mover, ever!
- Because of transportation [I] have to decide which doctor appointment is a priority
- Mr. Taxi charges \$250 for a monthly pass then the pass holder can get up to 10 rides anywhere in the valley for \$5.00 per ride; consider the expense for a full-time college student!

ASPIRATIONS & MEASURES OF SUCCESS

- I want reliability; my ride shows up within a few minutes of expected time and arrives on time also
- Multiple local neighborhood gathering spots for meeting with public transport [getting picked up]. Better than a bus stop out in the snow but not quite door to door.
- I want sustainable; the network creates revenue, yet attracts many users, so costs are kept low enough.
- Monorail from Willow to Wasilla and Wasilla to Anchorage
- I want affordability; costs less than I would have to pay if I drove myself
- A school transporting system. Kids would collect together and be taken to all schools in route.
- Be able to go to Anchorage for entertainment.
- Transportation available at least in four hour increments and affordable.
- Food stamp recipients should get \$250 vouchers every month to supplement [subsidize] taxi fares. \$10.00 copay per trip and the rest on the voucher.
- Trips to Anchorage and the two hospitals in Anchorage
- I want options [several]; ride share, common carrier (bus, van, rail, etc.), supported or non-supported, available lots of times to lots of places.
- Priority rides based on funding but able to pick up others:
- Call at the moment and receive door to door transportation service for less than \$5 per ride.
- Church and church activities; Willow to visit family
- Build affordable housing close to services
- Ride share with multiple providers for all health care riders, Willow to Palmer.
- Set up rides (similar to AnchorRides) via text

Comment Forms



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FOUNDATION



COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name: Julia Mettler

Email: jmettler@hopealaska.org

Phone: 907-631-3701

IF door to door public transportation options are not possible (or extremely limited) perhaps neighborhood "drop" sites, indoors, safe, not full of snow - could be established so that people might be able to join / connect up closer with transport providers within their neighborhoods. In the past some bus routes were available, but people needed to drive too far from home to use them. It defeated the purpose.

* The Region likely has many ^{small} transportation providers (Senior Centers, Church Vans, Youth Centers) If these were already certified vehicles w/ ^{appropriate} licensed drivers - could the borough (or a private agency) serve as a dispatcher and alert all drivers to a call. Similar to cabs but funded differently to take advantage of Medicaid / or grants - Rules need to be ^{reasonable} formidable



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COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name:

Fiend 2 Clean

Email:

Phone:

110 day treatment plan, housing off KGB mile 10
Medicaid provider (treatment centers) is contracting
and referencing patients.

Transportation is a necessity.

Lack of transportation is biggest reason people don't
get help, get worse.

One month of vouchers approved the month before, must
must use 75% of previous month to apply for next month

16 months as an LLC providing Sober-Living

"Set Free Alaska" - peer support section of Medicaid
that is highly unused

United Way grant funding

Clients who are in treatment during the day but can't
find rides for their evening job.



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COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name: Susan E. Lawler

Email: slawler@gci.net

Phone: 631-0770
315-8541

Make transportation available seven days a week and later hours for at least weekends. Also affordable enough that seniors can afford.

I use to live out on KGB - and the majority of the population live out there. Transportation out there was available but not always.

Don't like the new way Valley Transit is operating. I liked MASCOT's schedule better.



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COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name:

Email: Ron@IH Matsu.com

Phone: 907-232-6200

Ron Eggleston

We need senior health rides.

I am an amputee living at the Wasie Senior Center. I do drive at present but at 78 years old that could end soon.

I need to be able to go to doctor appointments and some shopping.



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*Notes recorded by Tanya Olson
during conversation with Terry, Suzi
& Pat.

COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name: Terry, Suzi, Pat

*email Suzi
People Mover/
Valley Transit
Schedule

Email: check Sign in!
Phone:

- * Taxi vouchers used to be effective
- * don't go to the movies any more because of transportation barriers (service times & cost) - used to use MASCOT
- * Would like more frequent bus times 1 hr headways.
- * no way to get to special needs daughter to her favorite activities - can't afford it.
- * getting to the airport is difficult with scheduling restrictions.
- * Pharmacy policy changes are increasing demand for trips into town & to the pharmacy.
- ① Be able to call one number & have the person on the other end find me the correct ride, arrange it & have someone pick me up at the door.
- ↳ * non-emergency medical transportation needs.
- ② * MSHF Grand Opening celebration → want to go but can't get here. * Access to PRC & Anchorage events. → For PRC
- * We don't have access to Fun THINGS! n/a then just medical needs @ WASI but use Palmer Services.

least, tell you who to call



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Page 1 of 3 email - tetarozmaryka@yahoo.com



SURVEY: TRANSPORTATION NETWORK USER

| | | |
|--------------------|----------------------------------|------------------------|
| Name: | Rosemary VARKIN | |
| Address: | Wasilla | Phone Number: 715-6672 |
| Specific Interest: | More, More, More Transit Service | |

Do you currently use any of the following transit services?

Valley Transit Commuter ☒ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☒

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☒ Other ☐ Friends! ; Anchorage: People Mover

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☒

Do you own a vehicle? Yes ☐ No ☒

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

yes -

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

I want to be able to go all over the Borough - for events like this, for shopping, for Farmer's Markets, for big Special Events, for meetings, to visit friends, religious events

How much is too much to pay for a ride?

from where to where?

Would you be interested in a multi-provider pre-paid punch card?

depends on the rules!

Other ideas, comments, concerns

over

5/17/2018 -

The buses in the Wasilla/Palmer area are only Demand-Response now. The company needs more new buses (modern buses) and more drivers. It needs some fixed routes - schedules - so we do not always have to always call ahead for each ride.

We also need bus service on Saturday and Sunday. I use a cab on the weekends & late evenings M-F.

Going to Anchorage from the Park & Ride to the Anchorage Transit Center is fine & dependable - BUT the Problem is getting to the Bus Stop at the Park & Ride. And then - getting into Anchorage - and figuring out which bus & where, ??? Icy sidewalks in winter are a major challenge!

For safety sake - I take a cab from my apt. building to my destination in Anchorage. That way it ~~is~~ only one hour and \$40. It's worth the money for safety !!! Riding all 3 buses takes 3 1/2 hours to get to my destination. But I can only do it once a month!

We need Express Buses between Wasilla & Palmer. We need buses to Sutton and Talkeetna, and Big Lake, Willow & Houston.

We need one phone number - to learn about all the transit options! Now it is word of mouth.

Page 2



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FOUNDATION



Page 2 of 3

COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name: Rosemary Varrin

Email: tetarozmaryko@yahoo.com

Phone: 715-6672

We need to help college & ~~un~~ university students go to their classes at Mat-Su College and UAA.

Many senior citizens do not ride the ^{various} bus options:

1. they don't know what the options are.
2. they don't know how to get information on where and when and prices & rules.
3. many need or want someone to go with them.

Summer visitors to the Valley want to ride the local bus to meet local people.

In the past 5 years there have been many & numerous transit & transportation meetings - they all ask for feedback & everyone claims they are interested & supportive - but there is little improvement. It's like the "Groundhog Day" movie = the same thing over & over & over & over & over

Everyone says they are supportive & everyone says the problem is lack of money!

Bus drivers need to be paid a fair wage!
We need modern, up-to-date buses. These old buses are not safe.

WHY is there money for surveys & consulting companies but no money for modern buses and a fair & living wage for bus drivers ????

We need modern communication technology for dispatch. We need to have the dispatch office open & answering the phone all the hours the buses are on the road.

We need to have the phone answered by a real dispatch person — not using the voice mail recording as a crutch.

We need someone to do marketing & publicity of the current bus services. Knowledge of how to use the bus service is ^{now} limited to a small group of people. The Valley's population is growing & growing & growing!!!!

I've heard so many people say they would ride the bus if it went more places and more places and more places all over the Borough!

There needs to be more sharing of information between Wasilla Senior Center and Palmer Senior Center, and Valley Transit, and CATS & Sunshine Transit.



MAT-SU HEALTH
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COMMENT FORM

COORDINATED HUMAN SERVICES TRANSPORTATION PLAN UPDATE

How can we improve transportation for all ages and abilities in our community?

Name:

Rosemary VAVRIN

Email:

tetarozmaryka@yahoo.com

Phone:

715-6672

Saturday bus service is badly needed - for shopping, for employment, for special events, to run errands.

Sunday bus service is badly needed for all the above Saturday reasons - plus some folks need or want to get to church. Considering the opiate drug problem, I say let's get people to the church of their choice.

Other religious faiths meet on other days - Buddhist, Hindu, Bahai, - Jewish - or other.

Many families only have one car - other family members need bus service - for jobs, education, medical + shopping.

Also, the bus drivers need to be trained to be courteous & have a service attitude. University students have a different schedule every semester.

We also need some discounts — for senior citizens on a fixed income — for folks with disabilities — for folks looking for a job or starting a new job. For university students

Also, there needs to be a consistent set of rules — for courteous behavior, no smoking on bus, no eating, no bad words, etc., etc., etc., etc.

Also, we need buses — not small white cars — with no room for packages when a person has been shopping, no room for walkers or wheelchairs. Also, in the winter — the stench of cigarettes is bad in an enclosed small car. It's bad in the summer, too.

Bus drivers need a GPS or a map. The bus rider is not the driver's boss. The office or dispatch needs ^{to} make sure new drivers and demand response drivers know where to go.

Drivers need to keep their hands on the steering wheel at all times — not checking their schedules or discussing their hobbies — with lots of gestures and hands off the steering wheel.

Despite all my comments I am very grateful for Valley Transit. I just wish it was a bigger transit company.

Rider Surveys



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SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|-----------------------|---------------|--------------------------|
| Name: | Chuck Foster | | |
| Address: | 1301 S. Century | Phone Number: | 907-352-8650 |
| Specific Interest: | Senior Transportation | Email: | chuckf@alaskaseniors.com |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other:

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

Only once was I unable to get where I needed to be. My car was disabled and I could not arrange any other transport - not even a cab.

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

Ideally, the users would be blended along the economic scale: not all poor, not all rich. The network offers options: from single rider to common carrier. Affordable and reliable are key objectives. (I assume it is safe.) I must generate revenue, but fares must be supplemented.

How much is too much to pay for a ride?

Too much is "more than the cost of driving my own car", about \$1 to \$5 by distance

Would you be interested in a multi-provider pre-paid punch card?

I would do that.

Other ideas, comments, concerns

I would love to have a card that bills me according to miles between boarding and disembarking. Maybe prepaid, scan in, scan out. Also, providers need to collaborate.



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SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|----------------------------------|---------------|----------|
| Name: | Roberta Tew | | |
| Address: | PO Box 521314 | Phone Number: | 841-7171 |
| Specific Interest: | Email: rtew@valleytransit.ak.org | | |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐
Health Care Provider Transportation ☐ Community Organization Transportation ☐
Taxi Cab ☐ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

→ Suggestion should have
Valley Transit Demand Response ☒

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

VT would like to provide regularly
scheduled transit within the Valley.

How much is too much to pay for a
ride?

Would you be interested in a multi-
provider pre-paid punch card?

Other ideas, comments, concerns

I work for Valley Transit



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FOUNDATION



SURVEY: TRANSPORTATION NETWORK USER

| | |
|---|---------------------------------------|
| Name: <u>Julie Mettler</u> | |
| Address: | Phone Number: <u>907-631-3701</u> |
| Specific Interest: <u>Transport for people w/ intellectual & developmental disabilities</u> | Email: <u>jmettler@hopealaska.org</u> |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

Not personally. But many of the people my Agency supports have missed appointments due to limited transportation options in a given moment. Or they have had to change appointments due to group home (Assisted Living Home) resources being tight.

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

I work for a Medicaid Provider Agency. Our support recipients are very much in need of specialized, regularly scheduled, transportation options. Many use wheelchairs, most are "vulnerable" due to intellectual or developmental disabilities. The Valley needs safe transportation options - including door to door options for those unable to walk/wait at bus stops.

How much is too much to pay for a ride?

\$5 max

Would you be interested in a multi-provider pre-paid punch card?

Yes

Other ideas, comments, concerns

Dispatch existing small transport providers to serve all users, not just their tiny piece of the pie



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SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|------------------------|---------------|---------------------|
| Name: | Patricia E. Lawler | | |
| Address: | 105 E. Frank Smith Way | Phone Number: | 631-0770 / 315-8541 |
| Specific Interest: | transportation 304 | Email: | slawler@pci.net |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☒ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other ☒ Mat-Su Service

How frequently do you require transportation?

Once per week ☐ Once per month ☒ Multiple times per week ☐

Do you own a vehicle? ☐ Yes ☒ No

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

Same as sister Susan Lawler

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

Same as sister Susan Lawler

How much is too much to pay for a ride?

over \$5⁰⁰ each way

Would you be interested in a multi-provider pre-paid punch card?

Yes

Other ideas, comments, concerns



SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|---------------------------------|---------------|---------------------------|
| Name: | Sherry Carrington - for clients | | |
| Address: | 920 Hilltop | Phone Number: | 841-7429 |
| Specific Interest: | Transportation for homeless | Email: | sherry@connectedpalmer.or |

Do you currently use any of the following transit services?

Valley Transit Commuter ☒ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☒ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☒

Do you own a vehicle? Yes ☐ No ☒

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

yes - on demand Valley Transit unable to
to pick up - Cab not affordable

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

Easily accessible, affordable, transportation

How much is too much to pay for a ride?

the 6.5 \$ 12.5 is not too much
if it can be dependable.

Would you be interested in a multi-provider pre-paid punch card?

possibly

Other ideas, comments, concerns

| |
|--|
| |
|--|



MAT-SU HEALTH
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SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|------------------|---------------|------------------|
| Name: | Howard Bess | | |
| Address: | P.O. 2885 Palmer | Phone Number: | 746-1889 |
| Specific Interest: | Housing | Email: | HBESS@mat-su.org |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

No

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

How much is too much to pay for a ride?

Would you be interested in a multi-provider pre-paid punch card?

Other ideas, comments, concerns



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FOUNDATION



SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|--|---------------|------------------|
| Name: | Mary Jo Towne | | |
| Address: | 752 N Northshore | Phone Number: | 373-1924 |
| Specific Interest: | transportation for ^{Washilla} seniors | Email: | dr.goldc.gci.net |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☒ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

No

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

Anchorage - bus, train.
Anchorage International Airport

How much is too much to pay for a ride?

to Anchorage - \$25⁰⁰

Would you be interested in a multi-provider pre-paid punch card?

Other ideas, comments, concerns



MAT-SU HEALTH
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SURVEY: TRANSPORTATION NETWORK USER

| | |
|--------------------------------|---------------------------------------|
| Name: <u>Ashley Polston</u> | |
| Address: <u>300 N. Main St</u> | Phone Number: <u>982-0408</u> |
| Specific Interest: | Email: <u>ashley@friend2clean.com</u> |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☐ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

On a daily basis I provide clients transportation to appointments they are unable to reach on their own. Each one struggles to reach doctors, treatment, and even the grocery store.

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

A bus system that transports people near and far at an affordable rate.

How much is too much to pay for a ride?

Would you be interested in a multi-provider pre-paid punch card?

Other ideas, comments, concerns



MAT-SU HEALTH
FOUNDATION



SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|--|---------------|----------------------------|
| Name: | Susan E. Hawler | | |
| Address: | 105 E. Frank Smith | Phone Number: | 631-0710 / 345-8541 (cell) |
| Specific Interest: | Affordable and convenient transportation. #304 Email: slawler@gninet | | |

Do you currently use any of the following transit services?

Valley Transit Commuter ☒ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☒ Other ☐ Mat-Su Services

How frequently do you require transportation?

Once per week ☐ Once per month ☒ Multiple times per week ☐

Do you own a vehicle? Yes ☐ No ☒

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

Yes -

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

hourly transportation - daily and weekends and reasonably affordable

How much is too much to pay for a ride?

anything over \$5.00 a way

Would you be interested in a multi-provider pre-paid punch card?

Yes

Other ideas, comments, concerns



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SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|--------------------------|---------------|-----------------|
| Name: | Tennence Mungley "Tenny" | | |
| Address: | 5753 W Joli, CA | Phone Number: | 907 203 1988 |
| Specific Interest: | Transport | Email: | flyaa@gmail.com |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other ☒ Self / Friends

How frequently do you require transportation?

Once per week ☒ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

Yes, unable to leave due to conditions

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

Two places - Palmer - Wasilla Rd (Algonie - Abena)
Matsu Regional Offices

How much is too much to pay for a ride?

400

Would you be interested in a multi-provider pre-paid punch card?

Yes

Other ideas, comments, concerns



MAT-SU HEALTH
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SURVEY: TRANSPORTATION NETWORK USER

| | |
|--|-------------------------------------|
| Name: <u>James Savage</u> | |
| Address: <u>2550 E Wainango</u> | Phone Number: <u>(907) 775-0234</u> |
| Specific Interest: <u>Behavioral Health Provider</u> | Email: _____ |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☒

Taxi Cab ☒ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☒

Do you own a vehicle? Yes ☐ No ☒

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

Our clients regularly miss things
Due to transportation issues

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

a system that accomidates residents
from Willow to Palmer

How much is too much to pay for a ride?

Would you be interested in a multi-provider pre-paid punch card?

yes

Other ideas, comments, concerns



SURVEY: TRANSPORTATION NETWORK USER

| | |
|--|-----------------------------------|
| Name: <u>THOMAS BRASS</u> | |
| Address: <u>WASILLA</u> | Phone Number: <u>907-232-9364</u> |
| Specific Interest: <u>Helping Others</u> | Email: <u>tbrass68@gmail.com</u> |

Do you currently use any of the following transit services?

Valley Transit Commuter ☐ Sunshine Transit Fixed Route ☐ Sunshine Demand Response ☐

Health Care Provider Transportation ☐ Community Organization Transportation ☐

Taxi Cab ☐ Other

How frequently do you require transportation?

Once per week ☐ Once per month ☐ Multiple times per week ☐

Do you own a vehicle? Yes ☒ No ☐

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

N/A

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

TAXI CAB - SOMETHING THAT CAN BE AVAILABLE WHEN THE CLIENT NEEDS, WHERE THE CLIENT CAN CALL AND MAKE AN APPOINTMENT AND BE ASSURED THE RIDE WILL BE THERE.

How much is too much to pay for a ride?

\$10.00

Would you be interested in a multi-provider pre-paid punch card?

Other ideas, comments, concerns



MAT-SU HEALTH
FOUNDATION

Page 1 of 3

e-mail - tetarozmaryka@yahoo.com



SURVEY: TRANSPORTATION NETWORK USER

| | | | |
|--------------------|----------------------------------|---------------|----------|
| Name: | Rosemary VARKIN | | |
| Address: | Wasilla | Phone Number: | 915-6672 |
| Specific Interest: | More, More, More Transit Service | | |

Do you currently use any of the following transit services?

Valley Transit Commuter

☒

Sunshine Transit Fixed Route

☐

Sunshine Demand Response

☒

Health Care Provider Transportation

☐

Community Organization Transportation

☐

→ what is this?

Taxi Cab

☒

Other

Friends! ; Anchorage: People Mover

How frequently do you require transportation?

Once per week

☐

Once per month

☐

Multiple times per week

☒

Do you own a vehicle?

Yes

☐

No

☒

Have you missed or cancelled an appointment in the last year due to a lack of transportation? Please explain.

yes -

If money were no object, what is your ideal transportation network for the Mat-Su Valley? Where would you like to be able to go and how would you be willing to get there?

I want to be able to go all over the Borough - for events like this, for shopping, for Farmer's Markets, for big Special Events, for meetings, to visit friends, religious events

How much is too much to pay for a ride?

from where to where?

Would you be interested in a multi-provider pre-paid punch card?

depends on the rules!

Other ideas, comments, concerns

over

Public Meeting Sign-in | 5.17.18



MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation: Public Meeting #1

Date / Time: May 17th, 2018 from 5:00 PM to 7:00 PM

Location: Mat-Su Health Foundation Office, 777 N Crusey St, Wasilla

| NAME | EMAIL | YOUR RESIDENT COMMUNITY | HOW DID YOU HEAR ABOUT THE MEETING? |
|-------------------|-------------------------------|-------------------------|-------------------------------------|
| Terrence Murphy | flyna@eml.com | Wasilla | Internet |
| Christina Hart | christina.hart@jijilive.com | Wasilla | Internet |
| Roberta Tew | rtew@valleytransitak.org | Wasilla | Valley Transit |
| David Wilson | sen.david.wilson@shelbyga.gov | Wasilla | ??? |
| Julie Mettler | jmettler@hopeofalaska.org | Wasilla | FB |
| Steve Carrington | scarrington@palmerak.org | Palmer | Wife |
| Sherry Carrington | sherry@connectpalmer.org | Palmer | E-mail |
| Tony Dodge | gtdodgett@gmail.com | Wasilla | wife |
| | | | |
| | | | |



MAT-SU HEALTH
FOUNDATION



SIGN IN

Human Services Coordinated Transportation Plan Facilitation: Public Meeting # 1

Date / Time: May 17th, 2018 from 5:00 PM to 7:00 PM

| Location: Mat-Su Health Foundation Office, 777 N Crusey St, Wasilla

| NAME | EMAIL | YOUR RESIDENT COMMUNITY | HOW DID YOU HEAR ABOUT THE MEETING? |
|-----------------|--------------------------|-------------------------|-------------------------------------|
| Rosemary VAVRIN | tetarozmaryka@yahoo.com | | |
| James Savage | James@fiendzclean.com | valley | Ray |
| Howard Bess | hdbess@mtaonline.net | Palmer | email |
| Chuck Foster | chuckf@alaskaseniors.com | Wasilla | facebook |
| Jennifer Tew | Jennifer@transitak.org | Big Lake | VT |
| Sam Corrigan | Jurassic.sand@gmail.com | Palmer | mother |
| | | | |
| | | | |
| | | | |
| | | | |



MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation: Public Meeting # 1

Date | Time: May 17th, 2018 from 5:00 PM to 7:00 PM

| Location: Mat-Su Health Foundation Office, 777 N Crusey St, Wasilla |

| NAME | EMAIL | YOUR RESIDENT COMMUNITY | HOW DID YOU HEAR ABOUT THE MEETING? |
|--------------------|-------------------------------|-------------------------|-------------------------------------|
| Susan E. Lawler | slawler@gsi.net | Wasilla | WASA |
| Patricia E. Lawler | | WASILLA | WASA |
| Thomas Brass | tbrass68@gmail.com | WASILLA | FACEBOOK |
| Ginger Bear | ginger@familypromise.mtsu.org | Wasilla | Facebook |
| Asnley Polstrom | asnley@friend2clean.com | wasilla | Ray |
| Mary Jo Towne | drgold@gsi.net | Wasilla | Facebook |
| | | | |
| Don Eggen | don@in.mtsu.com | WASILLA | WASA |
| | | | |
| | | | |



MAT-SU HEALTH
FOUNDATION



SIGN IN

Coordinated Human Services Transportation Plan Facilitation: Public Meeting # 1

Date | Time: May 17th, 2018 from 5:00 PM to 7:00 PM

| Location: Mat-Su Health Foundation Office, 777 N Crusey St, Wasilla

| NAME | EMAIL | YOUR RESIDENT COMMUNITY | HOW DID YOU HEAR ABOUT THE MEETING? |
|-------------------|-----------------------|-------------------------|-------------------------------------|
| Jo & Jakob Hansen | bjhwassilla@yahoo.com | Wasilla | Friend |
| | | | |
| | | | |
| | | | |
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SUMMARY

Coordinated Human Services Transportation Plan Facilitation Stakeholder Meeting

Date | Time: July 26, 2018 (10:00 am to 2:00 pm) |

Location: Mat-Su Health Foundation Building, First Floor Meeting Rooms | 777 N Crusey St, Wasilla

Project Team

Mat-Su Health Foundation:

Jim Beck, MPA, Senior Program Officer
Dr. Melissa Kemberling, Director of Programs

Mat-Su Borough:

Ben Coleman, Transportation Planner

R&M Consultants, Inc:

Van Le, AICP, Project Manager
Emily Bentti, Planner & Stakeholder
Engagement
Taryn Oleson, Planner & Stakeholder
Engagement

Objectives

- Recap issues and challenges identified in first meeting, review data collection to date and remaining data needs
- Discuss solutions and draft recommendations for the updated Plan
- Encourage coordination between transit stakeholders for ongoing plan implementation.

Schedule

- 10:15 am **INTRODUCTIONS**
- The Foundation's Role
- 10:30 am **PRESENTATION**
- Recap of Stakeholder Meeting #1
 - The need for coordinated services
 - Data Collection
- 11:00 am **RECOMMENDATIONS**
- Service Improvements
 - Availability
 - Accessibility
 - Affordability
- 11:30 am **BREAKOUT EXERCISE: METHODS BRAINSTORMING**
- 12:00 pm **LUNCH**
- 12:30 pm **COORDINATION OF SERVICES**
- Benefits & Success Stories
- 12:45 pm **ACHIEVING IMPROVED SERVICE**

Meeting Summary

The Stakeholder Meeting began at the scheduled time of 10:00 AM, with attendee networking and familiarization. As attendees entered the meeting room, they were greeted by members of the project team who encouraged them to find a seat with people they may not know yet and help themselves to the breakfast pastries and coffee provided. Tables were arranged to seat four to six at a table and had sign in sheets, name tags, and blank comment forms available.

Welcome & Foundation's Role

At 10:15 AM, when most stakeholders had arrived and settled at a table, Jim Beck began the meeting by introducing the project, the project team, and Mat-Su Health Foundation CEO, Elizabeth Ripley. Ms. Ripley discussed the Health Foundation's origin and recent activity. She stressed the foundation's role is to work with the community, especially the people in the room, to address the primary barrier to health identified in the 2016 MSHF Health Needs Assessment. A healthier community will not be achieved without improved transportation; which is why the Mat-Su Health Foundation (MSHF) became involved in the Coordinated Human Services Transportation Plan (CHSTP) update.

Ms. Ripley shared that this is a new area for the MSHF board and it's one where they could invest a lot of resources and not see any return or improvement in the system. As such, the board has decided they will no longer be investing in vehicle grants. MSHF will be more diligent in vetting grants in the future, and will focus more resources at the systems level (to facilitate coordination) and on certain at risk populations. Ms. Ripley thanked the stakeholders in attendance for all their hard work throughout the process so far, for the data they've shared and for showing up to participate today.

Introductions & Plan Purpose

Stakeholders went around the room introducing themselves and the organization or interest group they were representing. Some attendees took the opportunity to share their ideas, struggles, or desire for change in the existing transportation system, including the following:

- The Hospital (Mat-Su Regional) spends about \$2,000 per month for regularly provided transportation: shuttles @ 8 pm, midnight, and 4 am for discharged patients. The Hospital is looking to start a Medicaid voucher approvals program where they would obtain vouchers in bulk ahead of specific requests to reduce wait times, and if a ride ended up being denied after it was already given, the program would pay for that ride.
- Many stakeholders indicated their eagerness to "have the rubber hit the road", explaining how they have attended meetings in the past on this very matter and it's time to actually do something about the problems they have been talking about for years.
- Geographical challenges are significant and it is important to include valley residents who live outside the Core area, as well as the increasing need for commuter transit.

Emily Bentti then introduced the project team and presented the agenda for the meeting. She asked if there had been any organic cooperation or collaboration regarding transportation among the stakeholders in the room, or any changes to their own services. J&J Independent Living shared that they were now operating two to three vehicles seven days a week in the core area, providing service from 4:00 pm to 8:00 am on weekdays and 24-hour coverage on the weekends. Side conversations and some excitement spread through the room as J&J shared their pricing, which was perceived as a low cost ride.

One attendee spoke up and said that while great things are happening here, this does throw up a red flag because it reinforces the silos that are already forming again. He called for coordination and networking for one system, not just a business model for one organization here and one over there. He also presented the rhetorical question if J&J had coordinated with Valley Transit to find out if they were already providing that service.

This statement led Emily into the Vision and Mission of the draft plan and the reason we called this second meeting.

VISION: a sustainable, multi-modal transportation network that effectively meets the transportation needs of the Mat-Su Borough residents of all ages and abilities.

MISSION: to enhance mobility for senior citizens, individuals with disabilities, individuals with low incomes, and other groups lacking adequate transportation in the Mat-Su Borough through improved public transit and human service transportation coordination.

Presentation & Data Collection

Emily then gave a presentation on the CHSTP plan update process, outcomes of the first meeting, identified transportation needs, and data collected to date as well as gaps in existing data. Data on the existing conditions of the transportation system will inform the plan, allow the team to identify challenges and opportunities using the resources already within the system, ultimately leading to realistic, accurate recommendations to be made in the Plan. Further, data provided will serve as performance measures later on, after coordination strategies are implemented, to see if the strategies were successful and how the system has improved. This can also help provide incentive for future funding. Emily and Van Le stressed that the data received to date was not complete and some known large players in the health and human service transportation provider category had not provided any information. Stakeholders in the room were supportive of providing or continuing to provide up-to-date data.

Cost per ride data and vehicle data providers was shown and discussed. Comments and concerns provided by stakeholders included:

- Polly-Beth Odom with Daybreak, Inc. spoke about the vehicle tracking system they use to geo-locate their staff and assist them with dispatching rides for their clients.
- Ridership limitations are a significant barrier to combining and coordinating shared resources, especially trip sharing.
 - Confidentiality of patients/riders is a really important thing to consider and will likely be a barrier to coordination and consolidation.
 - Ex. Transportation of substance abuse patients may require searches of the client, driver and other riders.
 - Ex. CCS kids are not allowed to ride with anyone else due to their age and CCS funding limitations.
- Senior centers run on social security (?) and hold to ridership requirements that they cannot provide a ride to anyone under the age of 62. Is this true? More investigation into funding sources and requirements is needed.
- Funding needs to not be in close-doored siloes.

Draft Recommendations

Emily and Ben Coleman then provided an overview of the Draft Plan Recommendations, which are generally categorized into Service Improvements and Coordination Improvements. Service Improvement goals come down to three main categories: availability, accessibility, and affordability. Emily provided example strategies to improve service and introduced a breakout exercise. Taryn Oleson passed around handouts with a list from the draft plan of identified strategies to improve coordination that included strategies, action items, timelines and an anticipated level of effort to implement. Stakeholders were encouraged to reach consensus at each table and use the handout to prompt ideas and discussion. Each table was tasked with the following:

With your table, brainstorm methods for improving transportation services in the borough. Think of at least 2 to 3 changes or improvements to the existing transportation system that your organization might be willing to participate in. List specific steps that would be required to make the improvement.

Small Group Breakout Exercise

After half an hour of small group brainstorming, Van asked each group to select a speaker and report back the strategies for improved service they identified to participate in. The strategies discussed within and between groups are summarized below.

Consistent rate structure across all providers. Consider implementing something like the former Purple Pass program again.

Subsidized fares for targeted populations.

Medicaid voucher clearing house that is available online; pre-authorized vouchers in bulk.

FTA recommended that Valley Transit not be a Medicaid ride provider, so the routes of discounted rates could still address the concern for mass public transit options.

Centralized Dispatch Center.

Centralized dispatch will coordinate the marketing and education aspects of transportation services as well. To implement, examples of how it works are needed, why it works, and building trust with transportation stakeholders is key. The benefit/carrot needs to be clear and must ensure any one business will get their fair share of rides to help them make money.

We have a dynamic transportation system and centralized dispatch would allow the system to adopt a more Uber/Lyft type demand-response where the closest available vehicle to you would likely be the one called to provide the service.

Defined Levels of Service is key to getting stakeholders on board and for creating a system that is effective. Emergency Services dispatch is a general model to consider and the data requirements are going to be similar. We all need to participate in this and emergency services are a great example of shared resources and services.

Customer training and education on transportation options available and how to use them.

Need a central one-stop-shop for transportation information. Currently people are getting information on transportation options from drivers providing them rides on the service they already use; meaning they are likely missing out on other options and important information.

On-Demand transportation service like Uber/Lyft model is appealing, but funding them is difficult. We need a system that uses a similar approach but isn't a national, private, for profit business.

Consistent data collection forms, processing and reporting. And a promise to share all the findings with all providers is important for cooperation and transparency.

Have coordination and collaboration be a requirement to receive funding. Funding source requirements have been a perceived barrier in the past and instilled siloes in the transportation community. Mat-Su Health Foundation should require/encourage coordination and collaboration to provide grants for any transportation related project or initiative.

Inter-agency cooperation and coordination. We need more open communication between providers and need to work to lift each other up and look at this more as “match-making” than competition.

Presentation on Coordination of Services

Emily picked up the presentation following the breakout exercise by discussing strategies to improve coordination, including better resource management techniques and sharing examples of where those techniques had been implemented successfully in other areas. Ben gave an overview of two potential coordination strategies and discussed funding potential for service improvements. “Moving forward, we are looking to find our champions, teams of people and organizations who are willing to work towards implementing strategies,” Ben stated. Melissa Kemberling added that the stakeholders in this room are not alone, R&M and the MSHF are here to support you and bring these ideas to fruition, but it starts with collecting outstanding data to determine the process moving forward. Ben suggested a working group for a centralized dispatch system would be one of the first implementation tasks. Stakeholders requested specifics for working group commitments; what groups need to be formed, a time line to complete provided action items, etc.

Comments

Conversations throughout the second portion of the meeting and ideas submitted on comment forms included the following:

- **More open communication and coordination between transit agencies**
 - We need to use what we have, define the baseline and not reinvent the wheel
 - Use existing agencies (Palmer Senior Center, WASI, Valley Transit) to collaborate rides in the Core community
 - Coordinate a transportation system for individuals to match their mental health and medical needs
 - Deadheading Coordination; ‘deadheading’ is when a vehicle is returning to its base/home without a rider
 - We need to think about the transportation of goods and services as well as people (if we’re running a long route to Talkeetna for riders, could you put a pharmaceutical delivery on there as well).
 - Salvation Army has weekly food box deliveries that could be coordinated with transit
- **Centralized Dispatch is needed**
 - Centralized dispatch is a branch of coordination, and it will not make sense for every health and human services provider to participate. It also does not mean to supply everyone’s needs through one ‘business’
 - Customers can call in to schedule rides with existing transportation providers and the dispatchers would determine which service would best meet their needs and hail the ride.
 - Level of service will determine what the product will look like
 - There is no one size fits all solution and we shouldn’t aim for that.
 - Throughout today’s meeting “Uber” has been used as a reference to a model of transportation, and could be a new business or a reallocation of existing resources – “Mat-Suber”
 - Uber/Lyft would increase the number of drivers in the valley
- **Medicaid** to allow MSRMC to be a trail hospital: obtain Medicaid vouchers without waiting on line for over an hour, if a voucher is denied MSRMC will pay for a taxi, trial of 10-15 pre-authorized vouchers which will be in control of case management department only (win/win situation)
- Valley Transit’s on-demand services does not want to be providing private rides for anyone; always looking to maximize riders

- **Discounted Rates**
 - Valley Transit applied for a grant through United Way to be able to provide discounted rates.
 - Fairbanks offers free rides of seniors on every day they run service. We need to find out how they fund that
 - “Purple Pass” or prepaid cards for ease of ridership, insurance of payment for transportation providers, and ease of riders to not carry cash.
- **Public perception that there are not enough providers and finding transportation is difficult.**
 - “Reduce Number of Providers seems like a strange strategy to improve the system, given the public perception”
 - The general public needs to see more “Where to find a ride” options out there; flyers, a website, etc.
 - Better marketing and communication to the public for more ridership
 - Work with the consumer to understand the transportation system changes
- **Restrictions on who can provide rides to who** is important to address
 - We need to map out everyone’s funding stream and determine who actually has restrictions.
 - Would background check be needed for safety of vulnerable riders?
 - Could we provide jobs to returning citizens as drivers? (of course we would need reliable vehicles)
- **More Complete Data Is Needed**
- Consistent methods should be used by everyone to identify where ridership lacks/flourishes, costs and where funds are needed, and availability of services
 - Data collection forms should be streamlined and reworked to be more user-friendly for all types of providers.
 - Sales force platform for resource database?
 - As MSHF is approached for funding, require participation in whatever coordination strategy we decide to pursue.
- **Expanded Service Areas Needed**
 - Mat-Su college has been excluded in the past but they are a higher need destination
 - Bus stop in front of the hospital and urgent care (Wasilla and Palmer) with discounted bus passes
 - Fixed route stop ideas: Palmer State building/court house, MSRMC, Walmart, 3 Bears PW, Seward Meridian/Capstone/Geneva Woods, MSHF college, Palmer Fred Meyer, from KGM, Urgent Care, Settlers Bay, 3 Bears KGB, Carrs Wasilla, Public Assistance, up Parks to Vine, 3 Bears Meadow Lakes, Wasilla Fred Meyer

Next Steps

Van and Ben presented next steps for moving forward. Ben will be updating the draft plan which will be going to the Department of Transportation & Public Facilities for their review and comment by the end of August. The Plan then will be submitted to the Planning Commission and the MSB Assembly for a public hearing which Ben encouraged stakeholders to attend to express support. The plan submittal and approval is just the beginning of this process. Melissa stated “there are three things that drive change; 1. A sense of urgency, 2. Champions, and 3. Resources,” and we have the right people in the room to make change in our transportation system.

The meeting adjourned at 1:36 pm.

Attachments

1. Stakeholder Meeting #2 Presentation Slides
2. Strategies to Improve Coordination Handout
3. Comment Forms submitted

DRAFT

Coordinated Human Services Transportation Plan Facilitation Stakeholder Interviews

Date / Time: May 15th and 16th, 2018 (see Schedule for specific times) |

Location: Matanuska-Susitna Borough (see Schedule for specific locations)

Project Team

Mat-Su Health Foundation:

Jim Beck, MPA, Senior Program Officer

Mat-Su Borough:

Ben Coleman, Transportation Planner

Nelson\Nygaard:

Meredith Greene, AICP, Expert Facilitator

R&M Consultants, Inc:

Van Le, AICP, Project Manager

Emily Benti, Planner & Stakeholder
Engagement

Taryn Oleson, Planner & Stakeholder
Engagement

Objectives

- Facilitate discussion and gather data to inform the MSB CHSTP update.
- Develop a more comprehensive understanding of stakeholder organization's existing conditions, who they serve, why their clients need service, barriers to providing service, and what role their organization wants to plan in transportation in the future

Interview Schedule

Tuesday, May 15th, 2018

| | |
|--|--|
| 10:00 AM – 11:30 AM at Valley Transit | Preliminary Transit Meeting with Valley Transit, Sunshine Transit and Chickaloon Transit |
| 12:00 PM – 1:00 PM at Gathering Grounds Cafe | Meeting with Michelle Overstreet, MY House |
| 1:30 PM – 2:30 PM at Mat-Su Senior Services | Meeting with Fred Traber of the Palmer Senior Center |
| 3:00 PM – 3:30 PM at MSB Offices | Meeting with Borough Manager Moosey |
| 4:30 PM – 5:00 PM at | Meeting with Erin Lusk (MSRMC) |

Wednesday, May 16th, 2018

| | |
|--|--|
| 9:00 AM – 9:30 AM at Community Assets | Meeting with Kathryn Rose, MSB School District |
| 9:30 AM – 10:00 AM at MSHF Office | Meeting with Derrick Pennington, LINKS-ADRC |
| 12:00 PM – 1:00 PM at MSSCA | Meeting with MSSCA |
| 1:30 PM – 2:00 PM at Wasilla City Hall | Meeting with Wasilla Mayor Cottle |
| 2:30 PM – 3:00 PM at Valley Charities | Meeting with Janice Weiss, Reentry Coalition |

Common Interview Themes

Each stakeholder the project team interviewed represents and services specialized demographics and has an independent mission. Despite their differences, common ideas, concerns, challenges, and aspirations frequently emerged. Those commonalities are summarized as follow:

- Funding concerns; there are mixed sources, not enough options to acquire funding, and existing resources are in a constant state of drying up
- The size of the borough and lack of density of people in need of services is a barrier for effective, efficient service
- Concern for transportation services that can adequately provide for the specialized needs of a given organization's clients
- The Mat-Su Valley has health and transportation resources, they just aren't being coordinated or optimized as they should.
- There is clear need. A need for an updated, coordinated plan and system for residents and visitors of the Valley would improve quality of life.

Interview Meeting Summaries

Interview 1: Transit Providers

- Valley Transit – Jennifer Tew & Shelby Shaffer
- Sunshine Transit – Kim Schlosser
- Chickaloon Village – Louis H Friend III

The purpose of the interview is to hold an informal dialog about the services you provide and to specifically discuss the pains and challenged to providing your service, dreams you have if money was no object, and anything you want to see come out of this coordinated process.

Valley Transit

- State funding just came through for the consolidation of MASCOT and Valley Mover and that money will be used for rebranding of our buses. We are hopeful other dollars will come through to replace our existing bus fleet in the next few years, every vehicle we run has about 700,000 miles on them.
- Vehicle type we are using is really meant to be for urban transit, not highway commuting. The commuter buses carry 59 people and we are hoping to get 6 new buses.
- Demand response vehicles should be replaced with smaller vehicles because they are hardly ever at capacity.
- Use TripSpark software right now and we are hoping to get drivers tablets soon; right now it's all paper manifest from drivers and Dispatch gives drivers directions which is not efficient.
- Demand response doesn't seem to be used as much as it could be – we're not looking to hire more drivers for that need either
- Funding – \$1 million cap, which was reduced by more than \$200,000 from when MASCOT and Valley Mover were separate entities
 - Zero local funding from MSB or Cities for transit services.
 - If/When Borough becomes an MPO costs should really become 50/50 responsibility

Sunshine Transit

- Updating the plan since the 2011 one is needed – we've gained 12 more vehicles and have added routes since the last update.
- Demand is growing so fast we're having a hard time keeping up

- Talkeetna route operates 6 days a week and health related transportation is a big part of the demand. *Caswell run should be added to the route service map.
 - Demand response vehicle capacity needs to increase because we are operating at capacity
- Sunshine Transit is not meeting their required spare vehicle ration – we’re running demand response vehicles out all the time
- The people who need our service the most rely on ATVs and can’t get out of their house easily
 - We have regular runs where there are water jugs on the tops of vehicles on the way back from the food bank
 - We really are providing a service to the people who need it most, and also serving everyone else – demand is really high
- Routes are broken down by rider community origin
- Medicaid rides are provided and transit can be billed through Medicaid, but they take forever to get authorized
 - A doctor’s office on the phone for over an hour at a time trying to get Medicaid to pay for a ride authorize Dr. authorize a Medicaid ride
 - This takes too long, doctor offices have just stopped doing it and patients can’t pay so some people don’t ever go.
- Future plan is to have the Wasilla route run multiple times a day – right now there’s only one that leaves Wasilla to go back to Talkeetna at 2:00 PM which is extremely limiting for people.
- School district funding would be appreciated (kids and school runs are a regular part of our trips provided) but budgets are tight always. School provides no transportation for students, but right now our school run can only fit 14 people and its first come first serve to the sign-up. There are days were we can’t take all the kids and they have to find a different way to school.
- Seniors do ride the bus socially. We had to end a monthly/daily pass because people wouldn’t get off the bus and we needed the seats to actually provide people point A to point B transportation.
- We do provide kids summer lunch program runs.
- On dispatch/recording: Want to keep the ridership attributes if we go to an electronic system (who are we providing the service for, ADA, where the trip starts and ends, etc.)
 - We tried radios for dispatch, but it just doesn’t work in our area because radio signals are not consistent.
- Cost is \$3.00 per ride, Willow run is \$5.00, Wasilla run is \$20.00 (\$15.00 for seniors and those with disabilities)
- We do provide a lot of service to seasonal workers who don’t have personal vehicles
- Sunshine transit used to be a department of Sunshine clinic, but as of July 1, 2018 we will be our on organization

Chickaloon

- We are funded through the tribal portion of 5311 at the state.
- Servicing Palmer to just before Chickaloon
- Providing service to kids for school – MSB does provide some service (one kid was picked up by the school district this past year and that was to bring the child from Palmer to the tribal school in Chickaloon)
- 20 passenger vehicle hasn’t been used in a few (2) years because there isn’t demand for that large of a vehicle.
- With federal dollars there is no limitation on who service is provided to
 - Valley transit is still call #1 to see if we can get a transition for a rider from Chickaloon to transfer onto Valley Transit.
- There needs to be a change in the fee structure for rider so that one service isn’t cheaper than the other (Chickaloon tends to be cheaper so people will call us when there are other more practicable options available, but they are more expensive)
- Tribal transit money is paying indirect costs – example is the \$150,000 grant we received but needed a match from the tribe to use it.

Issues anticipated to encounter during this process and barriers to improved services:

- The doubt and questioning of “Can you serve our people as well as we can?” and “are you going to help pay?”
 - Ex. Senior Center offers door-to-door service and extra personal care that they don’t trust another organization to do as well as they do. It’s also easier to finding from others for elderly care.
- Hesitation is widespread to rock the boat until someone else puts in the funding to make it happen and can prove that it works without hindering their existing services.
- Securing a stable funding source
- Number of people/stakeholders/providers to coordinate with
- There is limited coordination now, so there is not a way to centralize that

Interview 2: MY House

MY House – Michelle Overstreet

MY House is an organization missioned to end youth homelessness and has started the local opioid task force. Gathering Grounds Café trains and employs homeless youth, offering job skills and experience. Profits from the café support client services and help provide sustainability to the organization.

- Services and Resources:
 - Main clients are unaccompanied youth
 - Some have children of their own
 - Only have one van
 - Area we provide services for is the size of the entire state of West Virginia
 - Drivers have traveled from Fairbanks to Homer 23 times, regularly drive Glenallen to Mat-Su Valley and Sutton and Butte to serve people dry cabin living.
 - 97% success rate of internships
 - 80% job/housing
- Needs:
 - Clients are isolated because there are no transportation options available to them –its’ a missed opportunity
 - Reliable transportation is critical for getting and holding a job
 - Transportation = independence
 - Transportation needs are to school, art supplies, basic needs, DMV, appointments, court, field trips, social places like the theatre, bowling alley, library, etc.
 - Parent signatures are needed for license
 - Mat-Su Health Services is a 45 minute walk one-way
 - Each sub-area of the borough should have transit stops that enable young people to opportunities for transportation so they can be to be employable
 - Bus tour/tutorial and travel training may be beneficial for clients to know/feel that this is an option
 - Railroad commuter route to Anchorage would be an improvement
 - Buses are crowded, service isn’t provided when needed, and there can be creepy people
- Challenges:
 - Houston and Big Lake area are far away and that population of youth is missed
 - Outreach is difficult and needs to be improved
 - Affordable housing is further away - Housing/transportation connection is essential
 - Grants don’t see this youth age group as a population in need so there aren’t many funding options available
 - Access to technology is a barrier

Interview 3: Palmer Senior Center

Fred Traber, Interim Executive Director

Joe Pulver – Transportation Coordinator

Nels Anderson – Maintenance Director

The Palmer Senior Center is a non-profit senior services organization providing programs for those 60 years and older and eligible individuals who require services to support their well-being, safety and independence. They offer services and programs including: senior citizen housing, congregate and home-delivered meals, transportation services, adult day services, chore and respite services, family caregiver support, informational and referrals, health promotion/disease prevention, and social and recreational activities.

- Services and Resources:
 - 150 Day/116 average
 - Operating 7-8 vans
 - 6-7 vans providing people with 116 rides
 - Meals on wheels delivery usually delivers 200 meals a day, 5 days a week
 - Drivers are paid employees
 - We can only provide transportation to seniors
 - Van capacity with wheelchair accessibility; 2, 4, 4 with 4 drivers and 15-20 riders at a time
 - Adult day service has about 50 clients, some are dropped off and about 30 of them are picked up by our transportation services
 - Daily permit and hand written manifests
 - Coordinate rides for clients from Chickaloon to Palmer, to bring people to Palmer
 - Fueling issue on Chickaloon side
- Challenges:
 - Hard to cover entire value
 - Are trying to service a large area
 - Senior Services: HPAA Issues, medical transport
 - Wait Times: try keep it under 30 minutes
 - Drivers are seniors with the average age of 60
- Trip Routes Information:
 - Area we service is about the size of Delaware
 - Houston, Point MacKenzie, Knik River up to Sutton but don't travel north of Sutton
 - 5 days a week
 - Door-to-door service
 - Call for service 24 hours a day
 - Run 7 meal routes and we have special vans specifically for the meal runs
 - Medical runs to Anchorage
 - Medicaid and waver non-emergent trips provided
 - Cost to ride is \$6 Palmer and \$8 Wasilla by donation
- Funding:
 - Grants/Medicaid doesn't fully fund our operations, they are difficult to obtain and reissuance is not always a guarantee
 - 30% of our annual budget goes to transportation
 - Cost to operate is high, starting low (with grants and donations at the beginning), insurance costs are increasing
- Coordination:
 - Sunshine Transit coordination did happen a year ago, but then stopped due to low demand.
 - No coordination with Valley Transit

- Issue with coordination is that no other major provider is providing door-to-door service that our clients need
- Paratransit is highly specialized that require additional training with drivers for walking to the door
- Interim battle: competition with other transportation companies (call providers to ask for specific), specifically "Redi Rides"

Interview 4: MSB Officials

MSB - Dan Mayfield, John Moosey, Jessica Smith

- 4 years updated or fund not allowed to transit authorities
- Presentation to Assembly on June 9?

Interview 5: Mat-Su Regional Medical Center (MSRMC)

MSRMC – Erin Lusk

Mat-Su Regional Medical Center is a community healthcare provider; a 74-bed facility with a wide range of inpatient and outpatient care, diagnostic imaging and emergency, medical and surgical services. MSRMC also offers a sleep lab, cardiac catheterization lab, off-site urgent care facility, robotic surgery and the advanced total hip replacement procedures.

Erin Lusk

- Disability and mental illness
- Transportation is confusing and limited
- Ambulance transportation is an option, but there is no wheelchair and getting them home is a burden and oftentimes expensive
- Use non-emergent life med transportation to get home
 - Redi-Rides is a popular one, but there's not enough coverage or after hours service
- For many with mental illness the transportation challenge is overwhelming
- When they are discharged, where do they go? They use AK cab
 - Medicaid
 - Hospital costs are high because there are no appointments the at ER
 - The need is there at all times of the day or night

Margaret Brodie, Medicaid Coordinator

- The Mat-Su Valley is a huge area to provide service to
- People are stuck here
- Chickaloon (checkmark?)
- Sunshine – not too much
- ER social
- Group homes, assisted living use ambulance – ask for cab if you can
- TLC transportation – PCA

Director Patrice Patzke

- Ambulance is overused
- Services for disabilities
- Limited transportation options? Redi-Rides, Valley Transit, Park and Ride
- Public transit bus with driver and assistant

- 20% of time is spent coordinating transportation
- Collect info on mode of transportation (personal vehicle, ambulance, troopers)
- Youth, under 18, are dispatched to OCS, can take a cab to MY House if between 18-24
- Valley Transit contracted with OCS

Interview 6: LINKS Mat-Su Parent Resource Center/Aging & Disability Resource Center

LINKS/ADRC – Derrick Pennington

ADRC provides free information and referral services that promote health, well-being and safety for individuals with disabilities, seniors and vulnerable adults by connecting them to quality services and supports that foster independence, personal choice and dignity. They assist individual with access to the following: affordable housing, assistive technology, caregiver resources, food resources, heating assistance, Medicaid, Medicare, senior and disability resources, social security, public transportation, and veteran's resources.

- Services and Resources:
 - LINKS/ADRC has been a parent resource center for kids with disabilities for the past 25 years
 - Provide referrals for information, if they don't have a disability, provide options consulting, and short term service coordination (case management)
 - ADRC long term care services include social security and Medicare assistance
 - Heating assistance and transportation costs are paid by the faith based community
 - 2500-2800 individuals served last year
 - Non-emergent medical transportation
- Funding:
 - Funding comes from the State, MSHF, Medicare and Medicaid reimbursements form senior and disability services
- Needs:
 - Transportation is a key need and one of the top components of people needs
 - There is a gap in service south of the Little Su and Big Lake
 - Need a clearing house for Medicaid voucher requests – can be housed under Links
 - Upfront \$ by MSHF
 - Then Medicaid admin reimbursement
 - Fairbanks has a similar model
- Future System Improvements:
 - Sunshine and Chickaloon have a good model – clinic \$ (though not after July 1, 2018), prevention model and they provide people with access to clean water and hygiene facilities.
 - How can Valley Transit be more like Sunshine/Chickaloon?
 - Demand response
 - Public perception
 - Where are people going?

Interview 7: Mat-Su Services for Children and Adults (MSSCA)

MSSCA - Melissa Muldoon, Susan Garner, Scott Kubacki

MSSCA's mission is to partner with individuals and families, delivering excellent support services, and building community by promoting dignity, respect, independence, and diversity. MSSCA provides a range of home and community based services for Mat-Su residents with intellectual or developmental disabilities, families with children experiencing developmental delays or disabilities and parents with questions about child safety and development.

- Resources and Services:
 - 40 vehicle fleet, 2 ADA vehicles, plus personal vehicles
 - Sutton to Talkeetna
 - Residential services: social services, medical, shopping entertainment
- Challenges:
 - Young adults can't get or hold employment because transportation to work after hours isn't available
 - People are more independent in Anchorage, they can use the public bus system
 - Jobs, limited transportation needs are increasing
 - Respite care versus day rehabilitation
- Transportation:
 - Redi Rides if independent, if under plan of care
 - Family rehabilitation can't use Redi Rides
 - Group rides can't use Redi Rides so we have to provide transportation to those families
 - Transit - \$3 per zone can be expensive, but we have no funding to take on some of that burden.
 - 80% of our transportation services use a Medicaid waiver
 - DVR – vocational rehab – day habilitation billing – Redi Rides and cab
 - Hope Community Resource, JJ, Hearts and Hands are helping
 - Barrier to employment
- Funding:
 - Home and Community Care program is federally funded
 - Funding is limited
 - \$ needed - thousands in mile reimbursement
 - \$1 million in funding is going away from grants
 - When people use the Medicaid voucher we can't get reimbursed

Interview 8: City of Wasilla

City of Wasilla Mayor Cottle, Archie Giddings, Lyn Carden

- Services & Existing Resources:
 - Food pantries are a frequented destination and regular ride users make the rounds there
 - WASI, Primrose, Vista Rose – want to own vans but need to coordinate
 - Palmer Senior Center – 16 fleet
 - Bought land for transit station
 - Valley Transit – building owned by the City of Wasilla
 - 47/75 vans go to JBER from the Mat-Su Valley
 - Share a Ride (van pools)
 - MY House bus riders – no left turns, can't get drivers licenses
- Get things done
- Wasilla – we'll do our thing, "you do yours"
- Partnerships can get a lot done
- Government can't do everything

- Start at the universities and schools for transportation of students
 - UAA – Kendra goes there, Lamar Anderson from Palmer
- There is one shelter housing for older women in the Valley but not for youth

Interview 9: Mat-Su Reentry Coalition

Janice Weiss - Director

Brian Galloway – Case worker

As part of the Governor's Recidivism Reduction Plan, the coalition works to ensure successful offender reentry in the Valley, to reduce recidivism, to enhance public safety and to assist in ensuring the appropriate and responsible use of cost savings realized by judicial reforms.

- Services:
 - Bring people together with similar needs and goals of reentry
 - services are available to both incarcerated and non-incarcerated
 - As a case worker, Brian direct services, works with in the system before people are released
 - Two biggest request are for housing and transportation
- Funding:
 - MHTA – Mental Health Trust Authority
 - Foundation structured coalition
- Transportation:
 - Coalition contracted with Palmer Senior Center for Transportation because they could dedicate a van to reentry program and route from Palmer to Wasilla
 - On demand services are centralized but took too long because the vans are federally funded and are limited in who they can contract out to
 - Can't use Valley Transit because the cost per zones make it unaffordable to many
- Challenges:
 - Mat-Su Valley and its resources are spread out
 - Jobs in restaurants/trades/fishing are in the core area which is typically not where people can afford to live

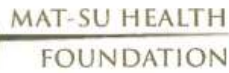
Interview 10: Mat-Su Borough School District, Families in Transition

MSBSD – Kathryn Rose

Families in Transition is a program of the Federal Programs Department and exists to meet the district's requirements to serve homeless students as stipulated under the McKinney-Vento Homeless Assistance Act. This federal law requires all school districts to provide homeless students with the same educational rights as other students.

- Services:
 - 600 kids are homeless in the MSD out of 18,000 total MSD enrolled
 - Work to keep kids in school of origin
 - Access to extra-curricular activities – kids have to use cabs but have to be pre-certified to do so, or we can cover gas to get them there if they have their own vehicle.
 - Pays for gas if they have a car
 - Unaccompanied, not physical custody
- Funding
 - McKinney-Vento Act – sub-grant through the state every 3 years
- Challenges:
 - Geographic distance is an issue
 - Cabbig is a temporary solution

- Needs and Desires:
 - Extended bus routes if feasible
 - First Student bus company
 - We need to work with the shelters.

Human Services Coordinated Transportation Plan Facilitation
Stakeholder Interview

Date / Time: 5/10/8

| Location: Palmer Senior Ctr

[illegible]



MAT-SU HEALTH
FOUNDATION



SIGN IN

Human Services Coordinated Transportation Plan Facilitation Stakeholder Interview

Date / Time: 9:30 AM 5/16/18

Location: MSHF 1st floor

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|--------------------|----------------------|-------|-------|
| Derrick Pennington | Links-ADRC | | |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

Human Services Coordinated Transportation Plan Facilitation Stakeholder Interview

Date | Time: 5/16/18

| Location: MSSCA

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-----------------|----------------------|---------------------------|----------------|
| VAN LE | R+M Consult. | | |
| Melissa Muldoon | MSSCA | melissa.muldoon@mssca.org | (907) 352-1200 |
| SUSAN GARNER | MSSCA | susan.garner@mssca.org | 352-1200 |
| Scott Kubaek | MSSCA | Scott.Kubaek@mssca.org | 352-1200 |
| Ben Coleman | MSB MSB | | |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

Human Services Coordinated Transportation Plan Facilitation Stakeholder Interview

Date | Time: 5/16/18 1:30 pm

| Location: City of Wasilla
City Hall.

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-----------------|----------------------|----------------------------|----------|
| Lyn Carden | city of wasilla | lcarden@ci.wasilla.ak.us | 373-9057 |
| Archie Giddings | city of Wasilla | agiddings@ci.wasilla.ak.us | 373 9012 |
| Mayer Cottle | City of Wasilla | mcottle@ci.wasilla.ak.us | 373 9050 |
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MAT-SU HEALTH
FOUNDATION



SIGN IN

Human Services Coordinated Transportation Plan Facilitation Stakeholder Interview

Date | Time: 2:30pm 3:00 Reentry Coalition.
MSB School Distr. | Location: Valley Charities

| NAME | COMPANY/ORGANIZATION | EMAIL | PHONE |
|-------------------|---|-----------------------------------|------------------|
| Brian M. Galloway | Valley Charities / Daybreak MAT-SU REENTRY PROGRAM | reentry.valleycharities@gmail.com | 902 232-7125 |
| Janice Weiss | Mat Su Reentry Coalition Coordinator | Janice.valleycharities@gmail.com | 907- 441-4077 |
| KATHRYN ROSE | Mat Su Borough School District | Kathryn.Rose@matసుk12.us | 907.746.9228 |
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Appendix D: Data Collection Plan

DATA COLLECTION PLAN: COORDINATED HUMAN SERVICES TRANSPORTATION PLAN (CHSTP)

Prepared for:



Mat-Su Health Foundation
777 N Crusey Street, Suite A201
Wasilla, Alaska 99654



Matanuska-Susitna Borough
350 East Dahlia Street
Palmer, Alaska 99645

Prepared by:



R&M Consultants, Inc.
9101 Vanguard Drive
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May, 2018

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PROJECT OVERVIEW

The Mat-Su Health Foundation (MSHF) is partnering with the Matanuska-Susitna Borough (MSB) to improve coordination between public transportation and human service providers within the Borough. MSB planning staff is currently working to update the Coordinated Human Services Transportation Plan (CHSTP), with the intent of coordinating transportation services among participating stakeholders to fulfill the requirements of the United We Ride initiative and the Federal Transit Administration's (FTA) Fixing America's Surface Transportation (FAST) Act. An updated, complete, and effective CHSTP with associated implementation strategies is essential in obtaining FTA 5310 grant funding through the FAST Act, which requires projects to be derived from a locally developed, coordinated plan.

MSHF has engaged the services of R&M Consultants, Inc. (hereafter "R&M") and Nelson\Nygaard Consulting Associates, Inc. (hereafter "NN") to perform data collection to inform the plan update, facilitation and planning functions for stakeholder engagement, and plan implementation. R&M has also engaged McDowell Group to assist with data collection and interpretation. The MSB has also engaged E-terra to support geo-spatial data management and application development to implement innovative and 'real-time' data collection of the transportation network, ridership, and dispatching.

To establish a comprehensive understanding of needs during the data collection and stakeholder engagement phase of the CHSTP update, transportation will be viewed in the context of the Borough as a whole. All current providers of transportation for health and human services in the MSB will be surveyed and engaged, including those funded by subsidies and public transportation. Ridership, demographic, geographic (i.e. route, origin, destination), operational, and financial data will be collected in accordance with this plan to gain an understanding of needs, coordination opportunities, and priority projects for implementation.

PROJECT TEAM

Mat-Su Health Foundation

Jim Beck, MPA, Senior Program Officer

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Matanuska Susitna Borough

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McDowell Group

Donna Logan, Economist

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Meredith Greene, AICP, Expert Facilitator

MGreene@nelsonnygaard.com

STAKEHOLDERS

The purpose of this Data Collection Plan is to outline a strategy for collecting comprehensive operational, financial, geographic (route), and ridership data from transportation service providers and users to inform the Coordinated Human Services Transportation Plan (CHSTP) update and implementation priorities. Stakeholders have been identified by those providing strictly public transit services as well as those human health service entities who also provide transportation services to their clients, and private transportation services such as taxi cabs and private ride sharing services such as Uber and Lyft. Users of the transportation system are also important stakeholders and represent a more specific segment of data collection. A complete list of stakeholders can be found in the Stakeholder Engagement Plan (SEP).

TRANSPORTATION PROVIDERS

Below is a summary of current transportation provider stakeholders in the Matanuska-Susitna Borough (MSB). These stakeholders will receive surveys and questionnaire's requesting the information outlined in this Data Collection Plan, and will be encouraged to attend stakeholder meetings. Further detail on stakeholder engagement strategies is provided in the SEP.

PUBLIC TRANSIT SERVICE PROVIDERS

Two transit providers – MASCOT and Valley Mover – consolidated in 2017 to meet the FTA's mandate for coordinated human services, and now operate as one entity – Valley Transit – to provide public transportation to much of the MSB. Valley Transit provides commuter service between the Mat-Su Valley and Anchorage, and demand response transportation within the MSB. Beyond the Mat-Su Valley core area, Chickaloon Area Transit System (CATS) provides demand response public transit services to Chickaloon Village residents and Soaring Eagle Transit (SET) provides mostly fixed route services the Copper River Basin. SET provides public transportation services throughout the Copper River Basin on a scheduled route Monday through Friday, allowing for limited off route pick-ups and drop-offs, as well as call-out services. SET also operate services to Anchorage and Valdez weekly on a reservation basis.

Because public transit service providers have established vehicle fleets and operational structures, much of the data needed from the public transit service provider relates to financials and cost of operation. Evaluating operating cost, level of service, and transit route data while considering the needs of the public and potential opportunities for coordination with health and human services providers will inform the CHSTP update and help identify implementation strategies.

HEALTH AND HUMAN SERVICES PROVIDERS

At least 20 non-profit health and human services providers also provide transportation services to their clients in the MSB directly. Among these is Sunshine Transit, which was established in March of 2009 by the Sunshine Transit Coalition under the umbrella of the Sunshine Community Health Center. Sunshine Transit provides services for the communities of Talkeetna, Susitna, and the Sunshine Area. Other health and human services providers who currently provide transportation to their clients are senior centers, Hope Community Resources, and Nugen's Ranch.

OTHER PROVIDERS

Other transportation providers with a stake in the MSB are various private taxi cab and rideshare companies, hospitals, private primary care providers, vocational rehabilitation institutions, Mat-Su Health Services, vanpools, institutions of higher learning, and religious institutions providing transportation.

TRANSPORTATION USERS

For purposes of this Data Collection Plan and the associated Stakeholder Engagement Plan, users of the health and human services transportation network are defined as those who need transportation, their caregivers, their advocates, and those organizations whose clients rely on transportation services to participate in programs, therapy, social events, etc. A full stakeholder list is provided in the SEP and further defined by anticipated areas of need and concern.

RIDERS

Obtaining input from users of the transportation services discussed in the CHSTP is important to gain a comprehensive understanding of service needs and prioritize implementation projects. Users of the specific transportation services discussed in this plan are the general public, and more specifically those individuals with disabilities and/or mobility challenges associated with age, veteran status, etc. who require regular transportation assistance, low income populations, unaccompanied youth, those seeking behavioral health services, and caregivers.

ADVOCACY GROUPS

Various non-profit advocacy groups represent and advocate for users of the transportation services discussed in the CHSTP. These organizations are a valuable resource for ridership data including needs and gaps in service.

HEALTH ORGANIZATIONS

Organizations providing services such as behavioral and vocational therapy, social programs, rehabilitation, and transition support to residents of the MSB have a vested interest in how their clients get to and from their appointments, events, meetings, etc.

GOVERNMENT AGENCIES & ELECTED OFFICIALS

Government agencies in the region involved with transportation, funding, and coordination will be included in the CHSTP update process. This will include Mat-Su Borough agencies and elected officials, City Governments, community councils, and Tribal Councils with interest in health and human service transportation providers.

DATA COLLECTION STRATEGY

To inform the CHSTP update, a myriad of data parameters are needed. To obtain this information, a comprehensive data collection strategy will accompany the stakeholder engagement process. By analyzing this data, the MSHF and MSB will be able to identify unmet transportation needs and duplications in human service agency and public transportation services, which can then be addressed in the updated CHSTP as implementation strategies. Obtaining GIS data for fixed and common routes from primary transportation providers (Valley Transit, Sunshine Transit, and Chickaloon Tribal Council) will be essential in building a data collection application for further data gathering. Questionnaires and surveys will be provided to users for completion, key stakeholders will be interviewed, and operational and financial data will be collected from transportation and health and human service providers (introduced in the previous section), as outlined below and in the referenced appendices.

DATA CATEGORIES

Specific data related to the day-to-day operations and maintenance programs of transportation service providers, both public and through health and human services, will reveal gaps in service across providers as well as overlap, both of which could be addressed by increased coordination, resource sharing, improvement projects such as a central dispatch program, etc. Financial and capital inventory data will assist in identifying opportunities for resource sharing or transfer among providers, and community demographics and ridership information are essential for determining the level of service required. The following preliminary list of data parameters is included in the data collection strategy; full detail can be found in the attached Data Parameter Matrix and survey forms.

OPERATIONS AND MAINTENANCE

Management and Operations

- Service Type: fixed route, demand response, express service, etc.
- Service area
- GIS Data for all routes and stops
- Number and location (GIS) of stops
- Dispatch method(s)
- Days/hours of operation
- Average ridership counts (on/off-boarding data by stop and/or route)
- Staffing required to maintain current level of service
- Current funding source(s)
- Seasonal limitations

Facilities

- Location
- Lease or own
- Landlord
- Seasonal limitations
- Vehicle maintenance capabilities

Vehicle Inventory

- Vehicle Type (make/model)
- Number of vehicles
- Age of fleet
- Wheelchair accessible
- Passenger capacity
- Comparison of vehicle usage
- Cost of fleet maintenance

Operational/Organization Plans

- Plans for expansion, consolidation, future business development

FINANCES AND CAPITAL INVENTORY**Transportation Related Administrative Personnel Cost**

- Number of Employees
- Annual Labor Cost
- Benefits

Operations and Maintenance

- Administrative/Overhead Costs
- Personnel Salaries and Benefits

Capital Expenses

- Vehicles
- Equipment
- Other

Funding Sources (by Medicaid Vouchers or Other Programs)

- Capital Funding Sources
- Operational Funding Sources
- Use of Medicaid Vouchers or other program contributions

COMMUNITY DEMOGRAPHICS AND GEOSPATIAL NEEDS**Trip Details**

- Origin
- Destination(s)
- Route
- Frequency
- Time of day
- Number of Riders
- Method of payment/reimbursement (Medicaid voucher, cash, etc.)
- Method of requesting ride

- Return service (was the same mode/driver/service used to get client from destination back home)

Demographics

- Population Density
- Major Employers (including shift work to capture 2nd and 3rd shift transportation needs)
- Households with no vehicles
- Income
- Age
- Disability
- Veteran Status

NEXT STEPS

1. IDENTIFY & ORGANIZE HEALTH AND HUMAN SERVICE TRANSPORTATION PROVIDER STAKEHOLDERS

The preliminary list of stakeholders for the CHSTP update will be expanded with more detailed information on the services offered by each provider, allowing for more targeted data collection. Large, key stakeholders will be identified for the first phase of base data collection and smaller, more specialized or targeted transportation service providers will be identified for the second phase of data collection. This distinction between the two collection phases is intended to reflect the anticipated level of data available from the organizations; with organizations that may require new data collection included in phase two. MSHF and R&M will lead this task.

2. DATA COLLECTION FORMS

The project team will create a list of attributes needed at a minimum to create primary fields of data that can be accurately geocoded and maintained over time (see Data parameters above). Data should be collected and recorded in a sustainable format so that reporting to the MSB, MSHF, and FTA could become standardized in the future. Additional attributes will be identified beyond the minimum that could be included into the GIS database and application model, but would be helpful for plan development.

R&M and MSHF, with assistance from MSB, will draft data collection forms, based on the data collection topics identified above and selected required attributes, designed for each main type of service provider. These forms will serve as a checklist and provide consistent messaging for MSHF and R&M to use when requesting data from transportation providers. Data requests from major service providers will also serve as an introduction to the CHSTP update and an opportunity to create positive working relationships.

3. BASE DATA COLLECTION

R&M, with assistance from MSHF and MSB, will begin collecting data on the operations and maintenance, finances, and capital inventory for organizations that have paid staff dedicated to client transportation. Evaluation of the data generated from this initial survey effort will provide indicators of gaps in service, overlaps in service, route demand, and ridership to inform the updated CHSTP and implementation strategies.

TRANSPORTATION PROVIDERS

Data provided by the public transportation service providers will be managed by the MSB with support from E-Terra. These parameters and trends observed will serve as a base for not only the plan itself, but potentially for an application designed to collect trip-based community demographic and geospatial data for both on-demand and health and human service transportation providers.

E-Terra will use the initial data provided by the public transportation providers, and any health and human service providers with reliable record keeping on regular operations and maintenance, to create a base map. The base map will then be expanded upon as more data is collected; including data collected via a GPS based live recording application that service providers will use on a volunteer bases.

Base Data Collection will be targeted to the following organizations, based on their regularly providing functional transportation services.

- Valley Transit
- Sunshine Transit
- Chickaloon Area Transportation Services (CATS)
- Soaring Eagle Transit
- VPSI (Vanpool) - Enterprise
- Wasilla Area Seniors, Inc.
- Mat-Su Senior Services (Palmer Senior Center)
- CCS/Early Learning/Head Start
- Alaska Family Services
- Alaska Youth & Family Network
- Co-Occurring Disorders Institute (CoDI)
- Knik Tribal Council
- Mat-Su Health Services
- Mat-Su Services for Children and Adults (MSSCA)
- MY House
- Nugen's Ranch
- Onward and Upward
- Set Free Alaska
- Southcentral Foundation/Valley Native Primary Care Center

Data will be requested by email distribution of survey forms for completion by providers, as well as in person during the transit stakeholder interviews and meetings (refer to SEP).

4. TRIP RECORDING, GEOSPATIAL & RIDER DATA COLLECTION (PHASE II)

E-Terra and the MSB will work to develop a geospatial data gathering application that human service organizations providing transportation services can voluntarily use to record and report rides and trips provided. It will be the task of the project team to instill a need and desire for these organizations to participate. Geospatial and rider data collection will include the following attributes: origin and destination, route, mode choice/provider, frequency, times, number of riders/passengers, method of payment, and whether a return service was used. This information will provide the missing pieces in the creation of an implementable and sustainable CHSTP, by allowing stakeholders to actually see where services overlap or identify areas that are being underserved to encourage efficient cooperation and collaboration between providers.

This phase of data collection may also include a community or rider survey to fill in data gaps for existing service needs and perceived future needs in transportation services. Providing a community or rider survey will allow for the general public, or service users to provide direct input into the plan and its development, in addition to the owners and operators of human service providers and public

transportation services. Customer accepted standards and practices may also be surveyed through this process.

SCHEDULE FOR DATA COLLECTION

| Task | Timeframe | Responsibility |
|---|--|---------------------------------|
| Stakeholder List Reorganization & Expansion | April 18 continue to end of project | R&M |
| Data Collection Form Creation- necessary attribute identification | April 20-26 | R&M, E-Terra review by MSB/MSHF |
| Outreach and Data Collection for Phase I Public Transit Providers | April 30 - May 14 | R&M, MSB |
| Demographic and Community Data | April 30 – May 14 | R&M, MSB, E-Terra |
| Outreach and Data Collection for Phase I Human Service Providers | May 7- May 14 | R&M, MSHF |
| Stakeholder Interviews and Stakeholder/Public Meeting | May 15-17: Large Stakeholder Meeting on 17 th | R&M, NIN, MSB, MSHF |
| Base GIS Data and Application Development | Ongoing – Base data before May 17 th meeting. | E-Terra, MSB |

APPENDIX A



SURVEY: TRANSPORTATION SERVICE PROVIDER

| | |
|-----------------------|---------------|
| Organization Name: | Contact Name: |
| Headquarter Location: | Number: |
| Primary Services: | Title: |

Management and Operations

Types of service you provide:

Fixed Route ☐ Demand Response ☐ Other: ☐ Describe: _____

Describe area serviced (provide maps or GIS data if available):

Describe primary routes, including number and location of stops (provide maps or GIS data if available):

Days/hours of operation:

Dispatch method(s):

Staffed call center ☐ Calls taken by general staff member ☐ Other (describe):

Average number of riders:

Per day Per week Per month Per year

Number of administrative staff:

Number of drivers:

Number of support staff:

Current funding source(s):

Seasonal limitations/scheduling:

Other information relative to management and operations of the transportation services you provide:



SURVEY: TRANSPORTATION SERVICE PROVIDER

| | |
|-----------------------|---------------|
| Organization Name: | Contact Name: |
| Headquarter Location: | Number: |
| Primary Services: | Title: |

Management and Operations (Continued)

Vehicle Inventory (if more space is needed, please attach additional forms):

| Vehicle Make/Model | Number of Vehicles | Year | Wheelchair (Y/N) | Passenger Capacity |
|--------------------|--------------------|------|------------------|--------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Support Facilities

Location(s) _____

Lease or own _____

Landlord _____

Seasonal limitations _____

Vehicle maintenance capabilities _____

Staff _____

Other information

| |
|--|
| |
|--|

Alaska Cab Valley, LLC

(Coordinated Human Services Transportation Plan)



Including Glennallen



- Main office
- Maintenance facility
- Service area
- Highway
- Road

| HUMAN SERVICE PROVIDER – MANAGEMENT AND OPERATIONS DATA | | | | |
|---|--|---------|---------|-------|
| Alaska Cab Valley, LLC | | | | |
| Service Characteristics | | | | |
| Type | Demand Response | | | |
| Rider Characteristics | Taxi service, non-emergency medical transportation for the general public. | | | |
| Service Description | Transportation between Matanuska-Susitna Borough and Anchorage | | | |
| Common Origins & Destinations | As requested from clients. | | | |
| Funding | Patron and Medicaid | | | |
| Operations | | | | |
| Vehicles | Model (Pass. Cap.) | Year | # | ADA? |
| | Dodge Grand Caravan (7) | 2010 | 1 | N |
| | Dodge Grand Caravan (2) | 2009 | 3 | Y (2) |
| | Dodge Grand Caravan (2) | 2008 | 1 | Y (2) |
| | Ford Crown Victoria (4) | 2008 | 1 | N |
| | Ford Crown Victoria (4) | 2009 | 2 | N |
| | Ford Crown Victoria (4) | 2010 | 1 | N |
| | Ford Crown Victoria (4) | 2011 | 9 | N |
| | Chrysler Town & Country (2) | 2008 | 1 | Y (2) |
| | Chrysler Town & Country (2) | 2010 | 1 | Y (2) |
| | Ford Transit (4) | 2013 | 1 | Y (4) |
| Staff | Admin. | Drivers | Support | |
| | 2 | 20 | 0 | |
| Maintenance | In-house | | | |
| Hours | 24/7/365 | | | |

0 10 20 Miles



MAT-SU HEALTH
FOUNDATION

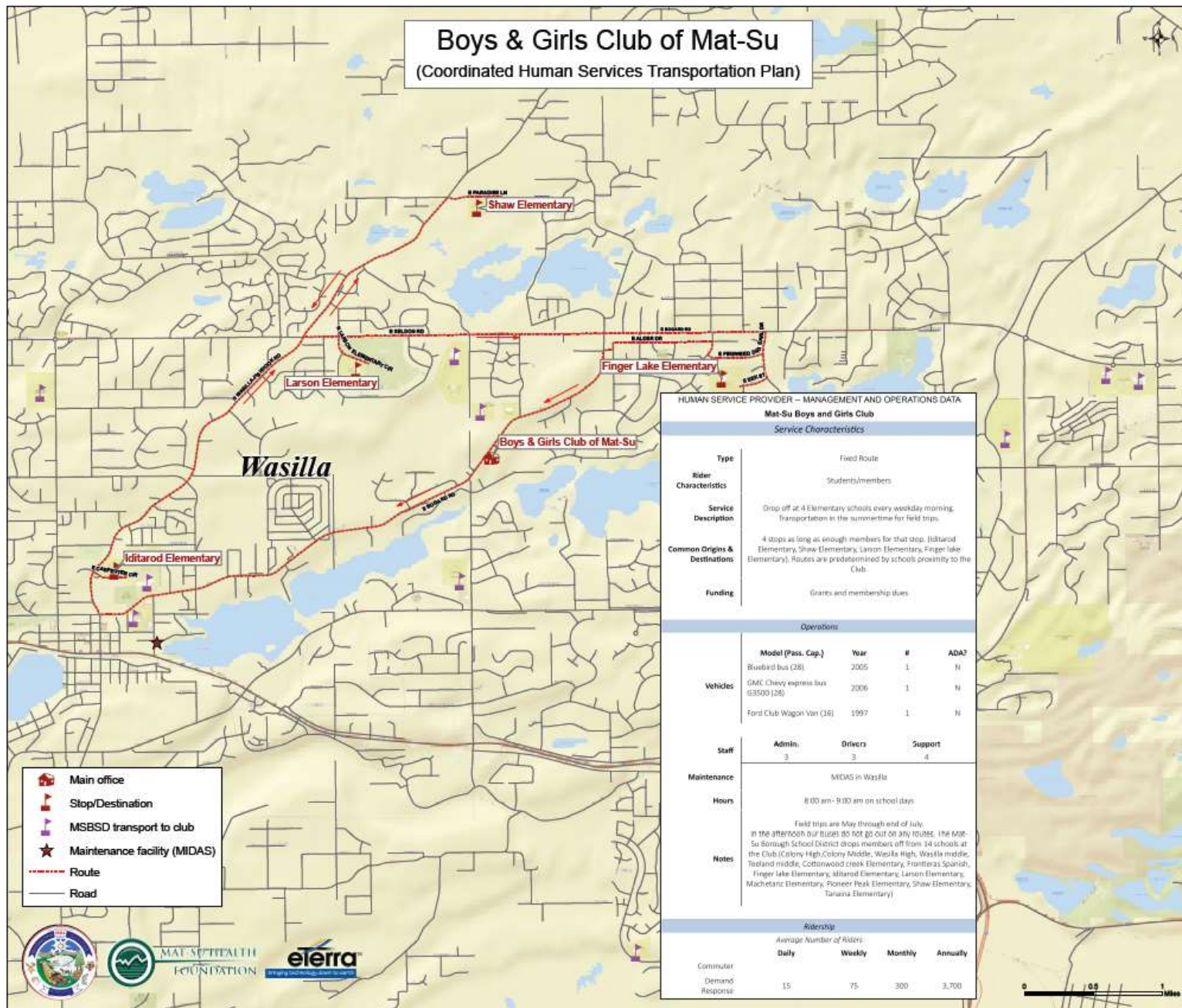
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Alaska Family Services (Coordinated Human Services Transportation Plan)

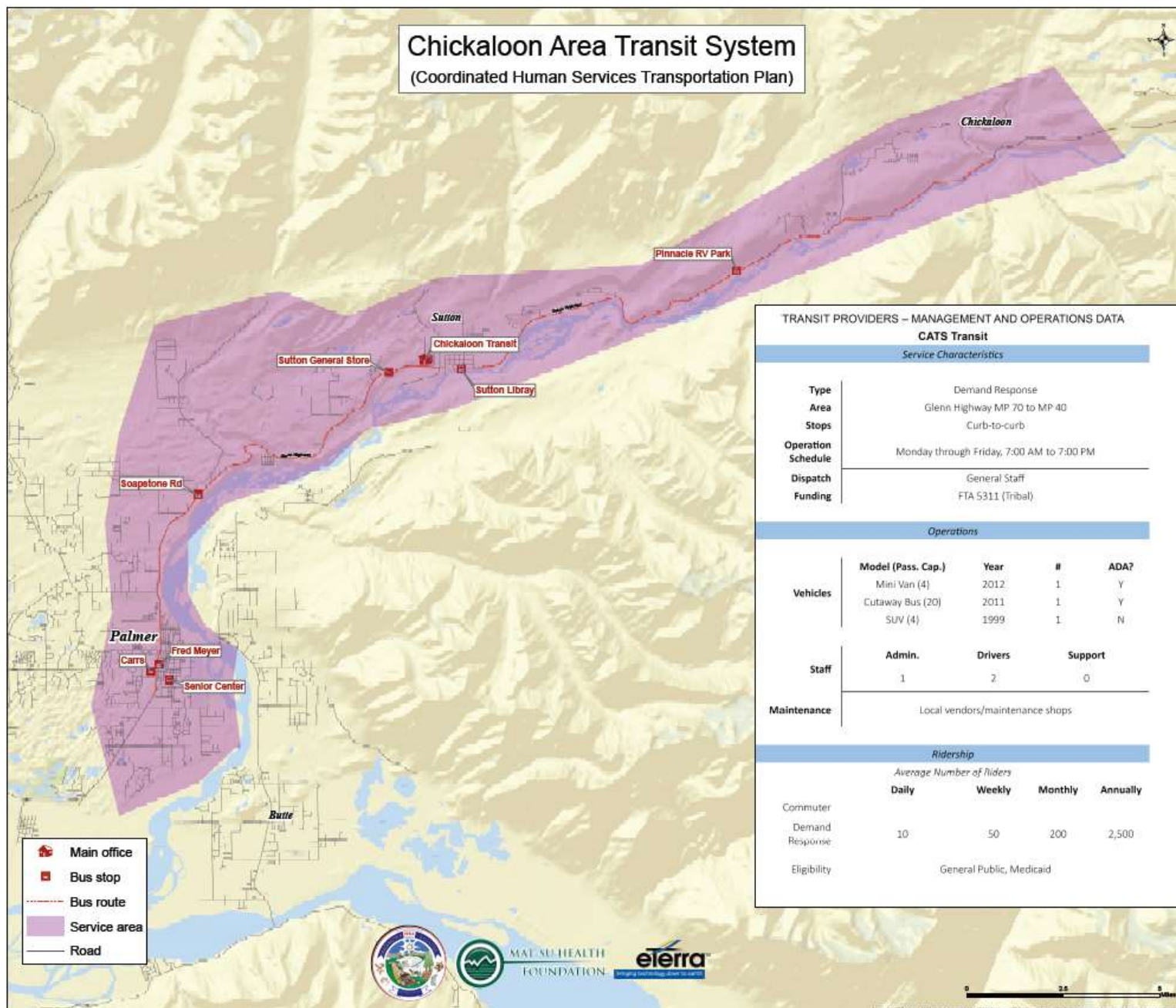
| HUMAN SERVICE PROVIDER – MANAGEMENT AND OPERATIONS DATA | | | | |
|---|--|------|---|------|
| Alaska Family Services (AFS) | | | | |
| Service Characteristics | | | | |
| Type | Demand Response | | | |
| Rider Characteristics | Program clients with barriers to attending services (i.e. behavioral health treatment, legal appointments, medical). | | | |
| Service Description | No or low cost transportation on an individual basis. | | | |
| Common Origins & Destinations | Domestic Violence Shelter, AFS Behavioral Treatment Center, AFS Family Contact Centers | | | |
| Funding | Agency (Medicaid) | | | |
| Notes | Services have decreased in recent years due to a lack of program funding. | | | |
| Operations | | | | |
| Vehicles | Model (Pass. Cap.) | Year | # | ADA? |
| | Van (6) | | 5 | N |
| | Express Van (12) | | 1 | N |
| Hours | 8:00 AM- 8:00 PM | | | |
| Staff | Half time driver, ¼ time dispatch/admin | | | |

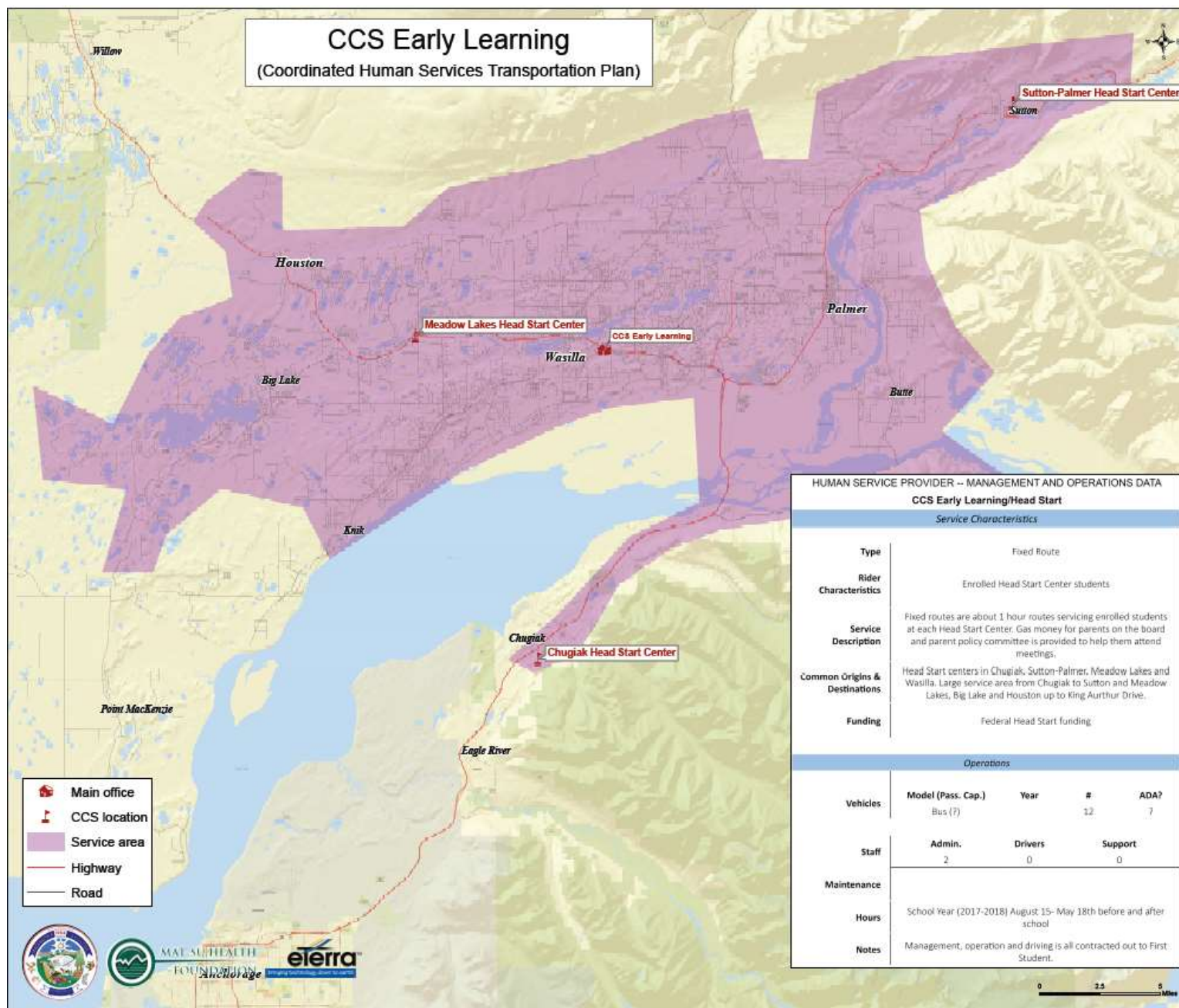
- Main office
- Stop/Destination
- Service area
- Highway
- Road

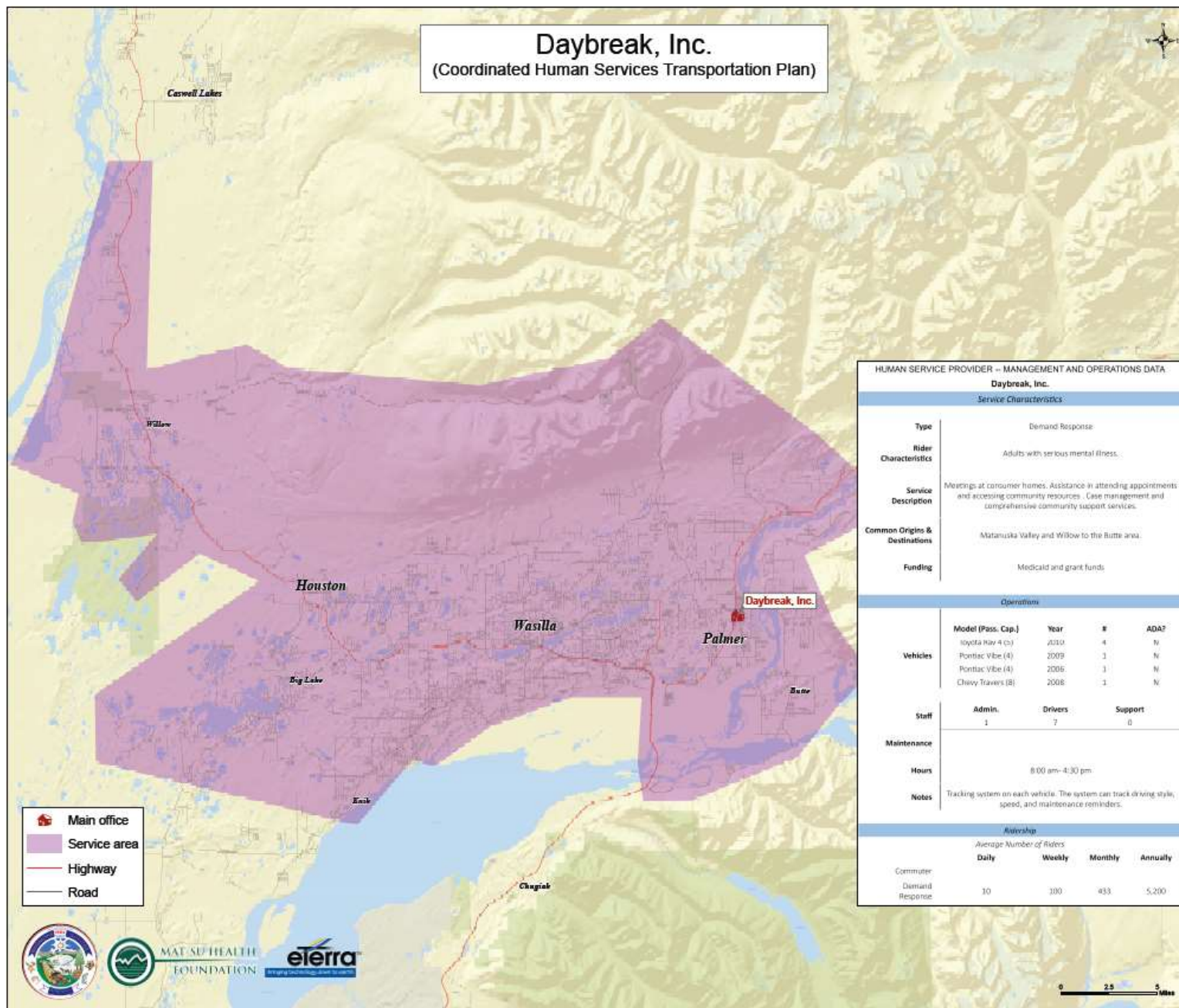


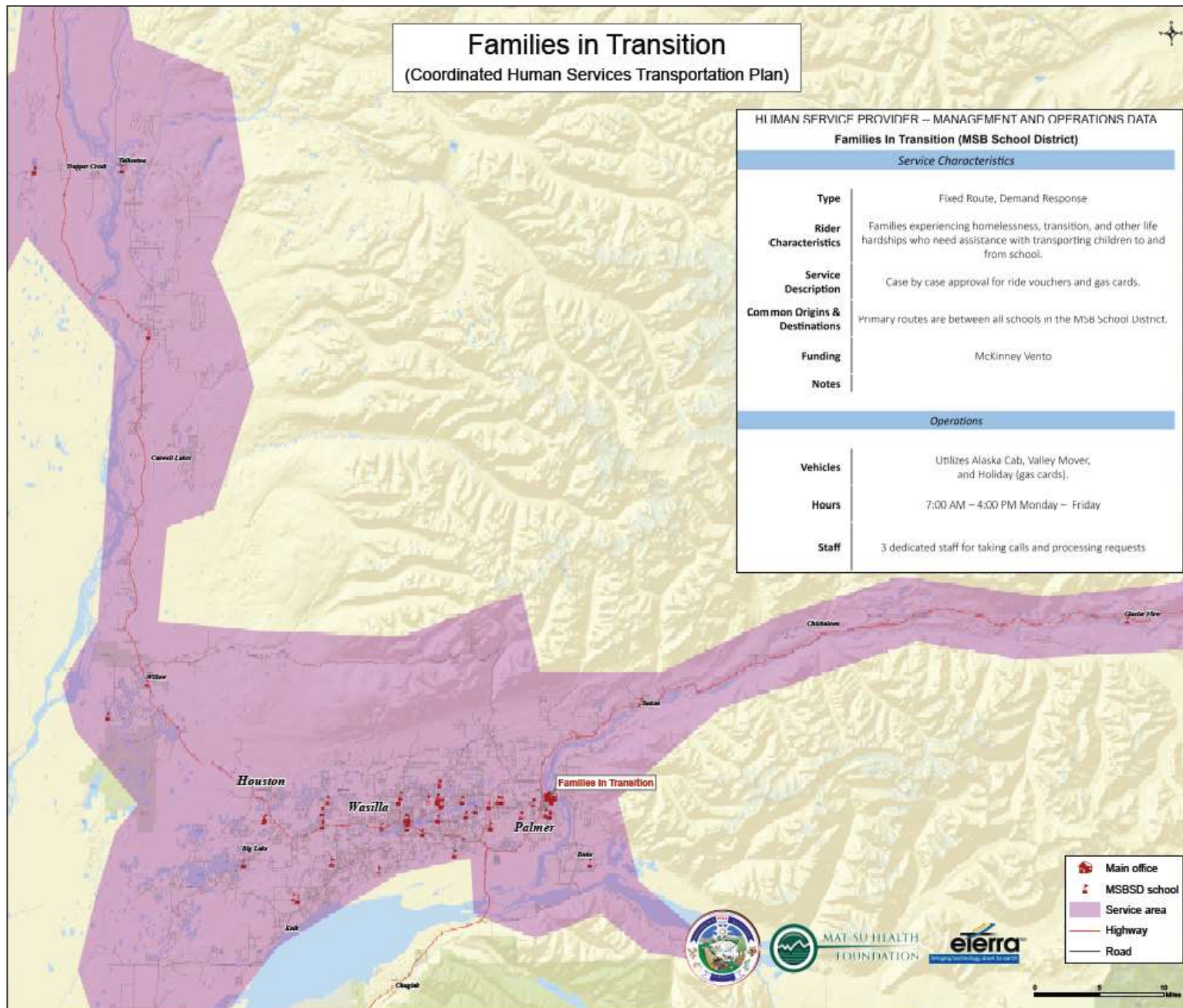


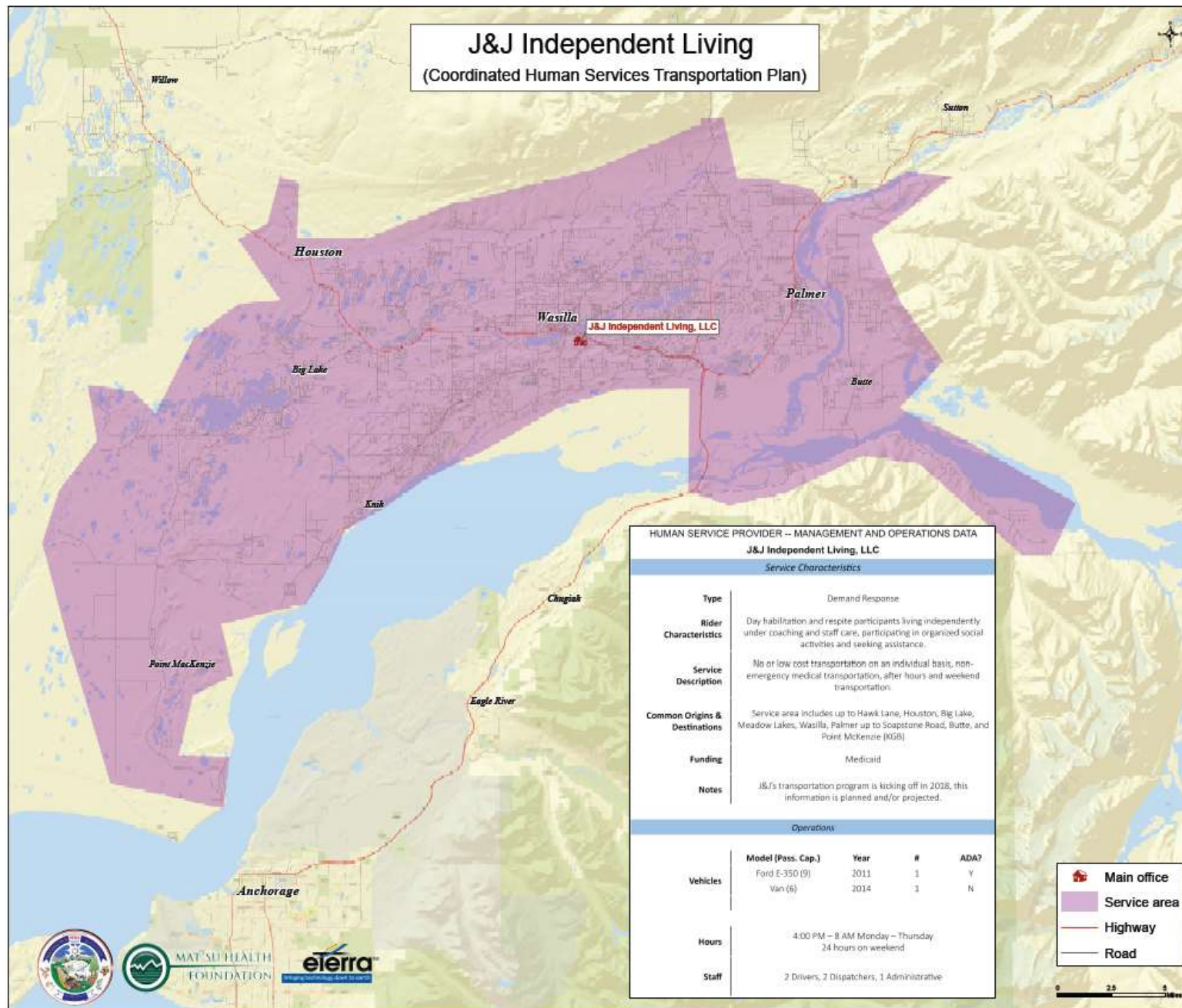
| HUMAN SERVICE PROVIDER – MANAGEMENT AND OPERATIONS DATA | | | | |
|---|---|------------|------------|----------|
| Mat-Su Boys and Girls Club | | | | |
| Service Characteristics | | | | |
| Type | Fixed Route | | | |
| Rider Characteristics | Students/members | | | |
| Service Description | Drop off at 4 Elementary schools every weekday morning. Transportation in the summertime for field trips. | | | |
| Common Origins & Destinations | 4 stops as long as enough members for that stop. (Iditarod Elementary, Shaw Elementary, Larson Elementary, Finger lake Elementary). Routes are predetermined by schools proximity to the Club. | | | |
| Funding | Grants and membership dues | | | |
| Operations | | | | |
| Vehicles | Model (Pass. Cap.) | Year | # | ADA? |
| | Bluebird bus (28) | 2005 | 1 | N |
| | GM/Chevy express bus (3500 (28) | 2006 | 1 | N |
| | Ford Club Wagon Van (16) | 1997 | 1 | N |
| Staff | Admin: 3 | Drivers: 3 | Support: 4 | |
| Maintenance | MIDAS in Wasilla | | | |
| Hours | 8:00 am- 9:00 am on school days | | | |
| Notes | Field trips are May through end of July. In the afternoon our buses do not go out on any routes. The Mat-Su Borough School District drops members off from 14 schools at the Club (Colony High, Colony Middle, Wasilla High, Wasilla middle, Tedland middle, Cottonwood creek Elementary, Frontiers Spanish, Finger Lake Elementary, Iditarod Elementary, Larson Elementary, Machetanz Elementary, Pioneer Peak Elementary, Shaw Elementary, Tanana Elementary). | | | |
| Ridership | | | | |
| Commuter Demand Response | Average Number of Riders: | | | |
| | Daily | Weekly | Monthly | Annually |
| | 15 | 75 | 300 | 3,700 |

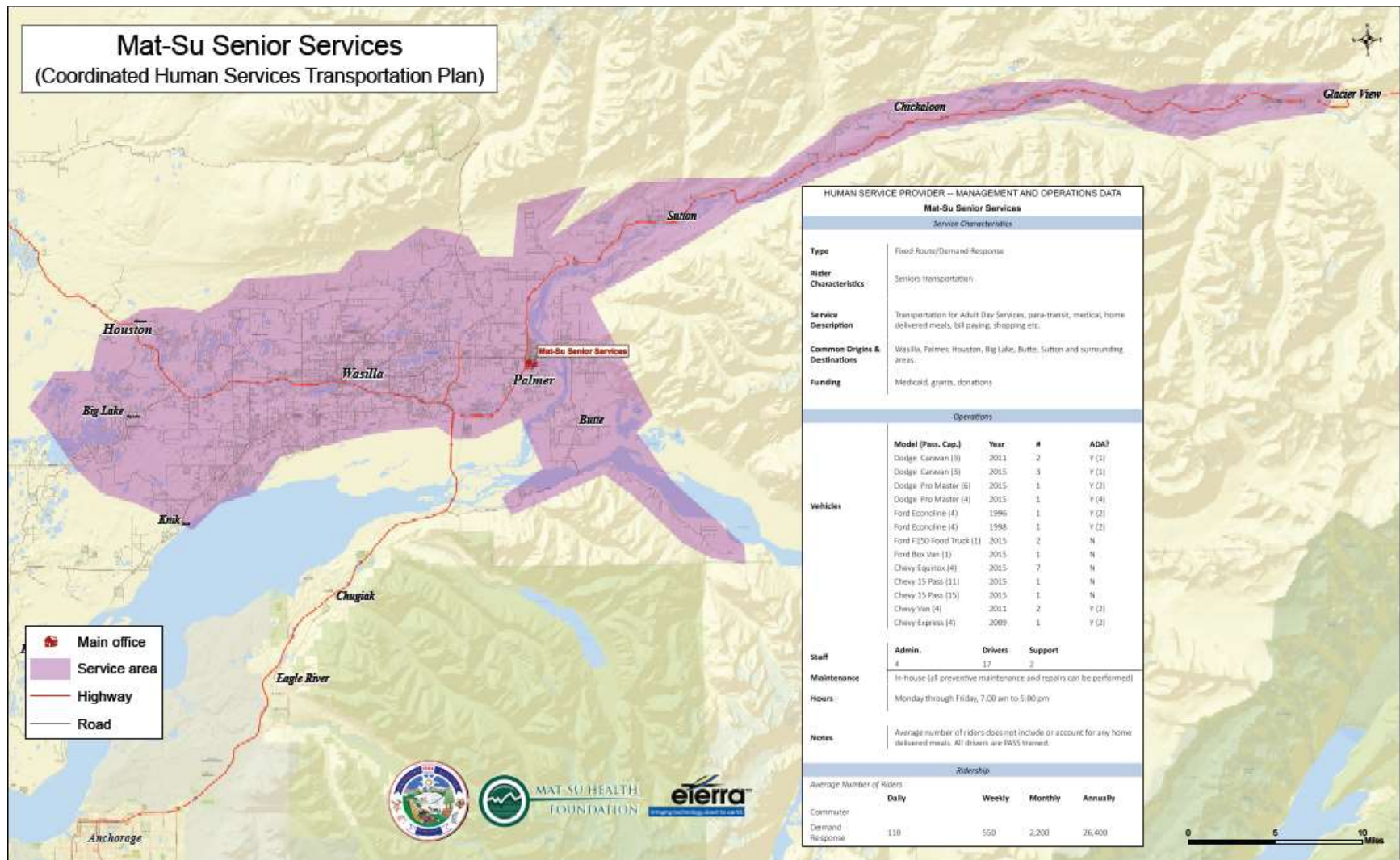


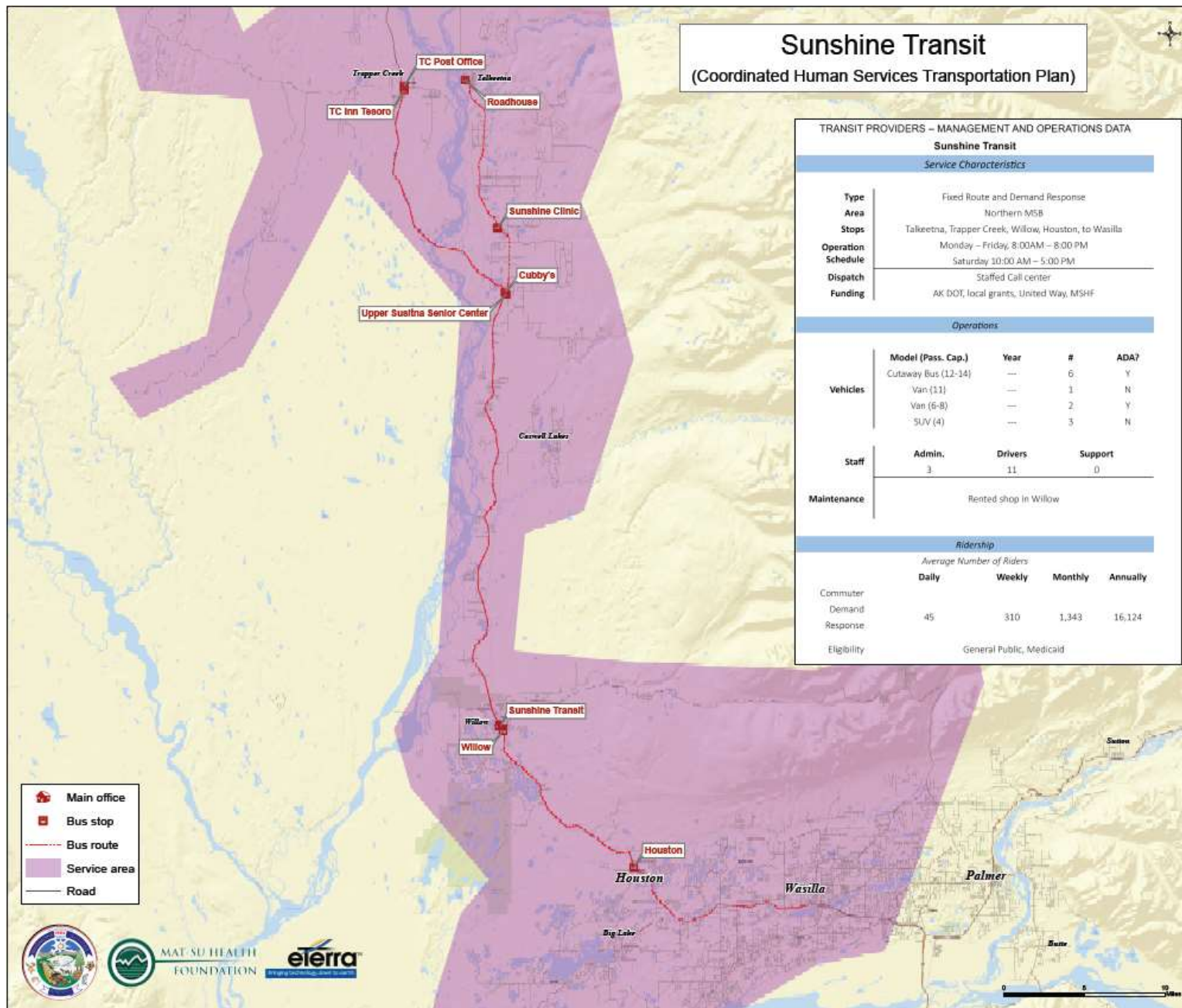


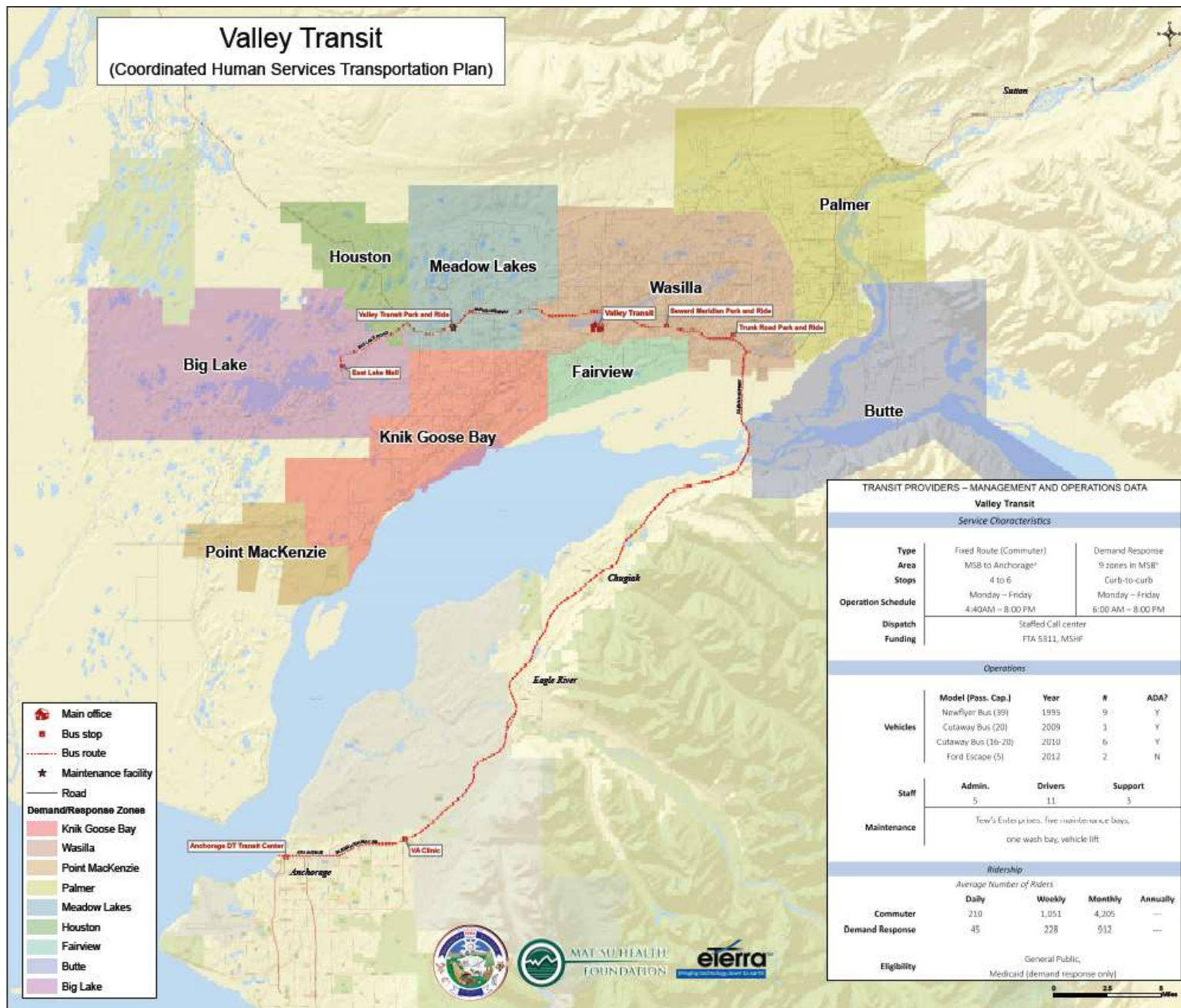




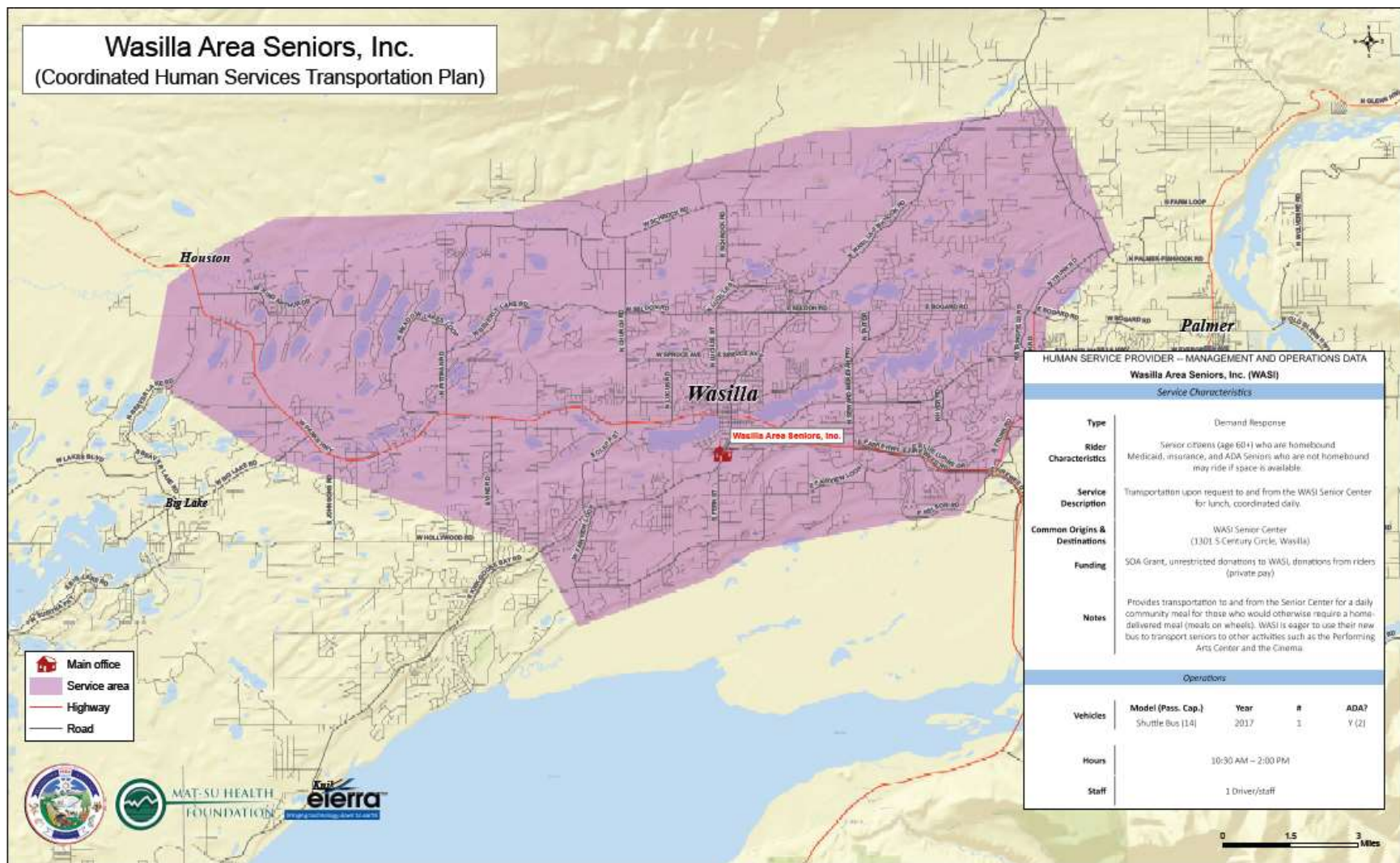








Wasilla Area Seniors, Inc.
(Coordinated Human Services Transportation Plan)



Appendix E: Local Resolution Approval

CODE ORDINANCE

By: Borough Manager
Introduced: 10/30/18
Public Hearing: 11/27/18
Adopted: 11/27/18

**MATANUSKA-SUSITNA BOROUGH
ORDINANCE SERIAL NO. 18-098**

AN ORDINANCE OF THE MATANUSKA-SUSITNA BOROUGH ASSEMBLY ADOPTING
THE 2018-2022 COORDINATED HUMAN SERVICES TRANSPORTATION PLAN.

WHEREAS, access to effective transportation services fulfills basic needs for many Borough residents, including access to healthcare, employment, and basic nutrition for those who would otherwise have no way of accessing critical services; and

WHEREAS, the need for sufficient access to effective transportation services remains unmet for many Borough residents, especially older adults, individuals with disabilities, and low-income households; and

WHEREAS, the Alaska State Department of Transportation requires a locally developed, coordinated plan updated at least every five years addressing mobility for senior citizens and individuals with disabilities in order for organizations serving these demographic groups to be eligible for Federal Transit Administration (FTA 5310) pass-through funds and Alaska Mental Health Trust funds; and

WHEREAS, FTA 5310 and Alaska Mental Health Trust funds substantially support transit operations in the Borough; and

WHEREAS, the 2018-2022 Coordinated Human Services Transportation Plan was developed with significant public and stakeholder participation throughout plan development; and

WHEREAS, the Coordinated Human Services Transportation Plan outlines strategies to (1) improve coordination among public transit and human service transportation providers and (2) improve both access to transportation and transportation service quality for Borough residents; and

WHEREAS, the Coordinated Human Services Transportation Plan is a living document and is to be updated every 5 years, or as required by the Federal Transit Administration.

BE IT ENACTED:

Section 1. Classification. This ordinance is of a general and permanent nature and shall become a part of the Borough Code.

Section 2. Amendment of Section. MSB 15.24.030 (B) is hereby amended as follows:

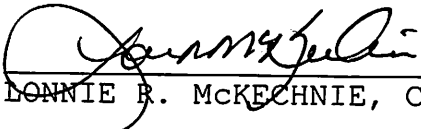
**(43) 2018-2022 Coordinated Human Services
Transportation Plan, adopted November 2018.**

Section 3. Effective date. This ordinance shall take effect upon adoption.

ADOPTED by the Matanuska-Susitna Borough Assembly this 27 day of November, 2018.


VERN HALTER, Borough Mayor

ATTEST:


DONNIE R. McKECHNIE, CMC, Borough Clerk
(SEAL)

PASSED UNANIMOUSLY: Sykes, Beck, McKee, Leonard, Mayfield, and Boeve

RECUSED: Sumner