

Same Day Ride Program Questions (revised 4/4/2024)

Responses from Paratransit Taxi Task Force Subcommittee

March 5 2024 meeting participants: Kevin Meyers, Don Natzke, Danita Jackson, Cheryl Orgas, Adrian Klenz, Barbara Beckert

March 9 2024 meeting participants: Kevin Meyers, Don Natzke, Danita Jackson, Cheryl Orgas, Emily Cadman, Brian Peters, Barbara Beckert

April 3rd meeting participants: Don Natzke, Kevin Fortune, Cheryl Orgas, Rebecca Rabatin, Barbara Beckert (Kevin Meyers also contributed via email)

Paratransit Taxi Task Force Subcommittee members met on March 5th, March 9th, and April 3rd to work on defining criteria for the same day on demand program. Meeting time was primarily spent discussing and responding to the questions provided by Fran Musci, MCTS. This document has our responses updated as of April 4th

1. Is the goal for the program to provide a new service needed by paratransit riders or to generate cost savings for paratransit, or both?

Response: The goal is to bring back the paratransit taxi program with changes to comply with federal requirements and the limited budget. To improve service options for a same day service that is

fiscally responsible. It is not a primary goal to save paratransit money.

2. Is this a same day safety net type service or is it designed to be a primary mode of transportation?

Response: It is a primary mode of transportation as a safety net for same day service for employment, health and wellness, for rides that cannot effectively be provided by paratransit or other alternatives.

3. Service limited to paratransit eligible riders?

Response: Yes – service will be limited to paratransit eligible riders

4. Is there some sort of limit on trip purpose? (Ex: Medical, Employment, Groceries only?) What types of trips are specifically allowed?

Response:

As indicated by the county board resolution, the program will limit trip purpose to employment related rides and to health/medical related rides that cannot be scheduled ahead of time.

Examples are listed below. This is not an exhaustive list and will be at the discretion of the rider.

Health

- Hospital discharge
- Same day medical or dental appointment for the consumer or a family member that the consumer must accompany such as a child.
- Urgent care visit.
- If you see a doctor and must go back for a test the next day.
- Same day pharmacy trip
- Emergency shelter, domestic abuse, natural disaster fire etc.
- Same day transportation for a food emergency. Examples include transportation to emergency food shelter, grocery or meal site

Employment:

- If employee is called to come in to work on same day
- If other transportation for work does not show up
- If employee needs to leave work without advance notice due to illness or family responsibilities

5. What is the service area? A small “pilot” area? All of MKE County? Beyond MKE Co?

Response: The service area should be all of Milwaukee County at this time. We believe that aligns with the intent of the County Board. Longer term it could be helpful to explore going across county lines especially for medical transportation. The task force does not support restricting the service area for the pilot due to equity.

6. How are trips requested and dispatched? Call provider directly? App? Centralized call center? – Who staffs call center?

Can call takers be national/ international or do they have to be local? Specify how handle non-English speaking callers.

Response: Assuming the service is provided by a contracted agency, we would want them to set up a responsible system to receive and dispatch the rides.

We support the options to have an accessible app and to offer online options for riders to schedule rides. However, other options for scheduling, including telephone access to schedule rides, must also be offered to provide access to riders who do not have computer access or a smart phone.

The system should incorporate standards for accessibility including linguistic accessibility for deaf and hard of hearing and non-English speakers, as well as screen reader accessibility for any app or online platform. The contract should follow the standards MCTS has for serving non-English speakers, including deaf and hard of hearing. Should an outside vendor not be found, services would be provided by MCTS using their systems.

7. Booking: If the program has an online option, it must also have a telephone option for those without smartphones/computers. The program cannot be structured for online bookings only.

Response: Agree

8. Do the various providers use their own scheduling software? If so how does MCTS/MCDOT get data for reporting

Response: These are important operational issues, but outside the scope of what consumer and advocate task force members can address.

9. Will they be private or shared rides? (There may be Title VI concerns with different fares for private vs shared rides. It could be considered discriminatory to charge a person a higher fare for a private ride. Those with lower incomes would be forced to share rides which would not be equitable. More discussion probably needed on this?)

Response:

Shared rides are acceptable, if the rider arrives at scheduled time and the ride is not unduly long. There should be the option to provide private rides when needed to ensure timeliness.

A sliding scale for fares would be too complex to administer. However, we are concerned about equitable access for low income community members. As an alternative, we recommend considering providing subsidized tickets or coupons for low income riders, to be distributed by key community agencies.

10. How will riders who need a WAV be accommodated? Will MKE Co contract with one vendor to provide WAVs or will we require each vendor to provide WAVs or contract with a subcontractor for WAVs?

Response: We would want any respondent to demonstrate how they would provide equivalent service to people requiring an accessible vehicle. Whether they do it themselves directly or through a subcontract does not matter as long as it is comparable.

11. How is the program limited so that it does not undermine paratransit van service and stay within budget? Is there some sort of trip cap (XX trips/month). Do we set trip cap based on paratransit use (Ride van more = more rides on alternative service)

Response(s):

During the initial pilot we recommend a cap of 4 roundtrip rides per month during ramp up. This may need to be adjusted as the program goes forward and we have a better idea of utilization. The pilot should provide data about utilization which will be important for provider planning purposes.

It will be important to have strong performance from the paratransit van service so people are not turning to the same

day cab program due to performance problems with the van service.

12. Fares: Will the service charge a premium fare? What amount? Will payment be account based, cash, tickets (Transit Plus or other tickets)? How will app-based programs plan for riders who use cash?

Response: Yes, the service will charge a premium fare.

There should be a modest upcharge for this service. We suggest that the fare be \$2 higher than paratransit.

Provider(s) must be able to handle cash and other payment forms.

The provider must be able to accept debit card, cash, or ticket. If the provider can't handle cash, transit company should handle the responsibility. If the provider does not accept cash, consumers should be able to purchase tickets using cash through MCTS as is the case for other programs.

Additional recommendation: Reinstitute free bus pass for people who are paratransit eligible – this has saved money in the past and could incentivize more people to use the fixed route service.

13. What is the expectation for driver assistance? Curb to curb, door to door? Do they assist with packages and/or mobility aids?

Response:

We had a lot of discussion on this item. Some consensus around the following recommendation:

Curb to curb with option for door to door as a reasonable accommodation.

Yes, should require drivers to provide assistance with mobility aids Assistance with mobility aids is a requirement for an accessible system. This is consistent with Transit Plus policy.

Drivers could provide assistance with packages as an accommodation following the Transit Plus policy – limit to 2 bags and 40 pounds.

Having communication with driver is important to the success of curb to curb – using an app and/or by phone.

14. What type of driver training is required?

Response: Disability awareness, etiquette and courtesy that addresses the diverse needs of the people with disabilities. Trainers should include people with disabilities. People with

disabilities should have a role in the development and approval of the curriculum.

Training on safety and legal requirements such as securing mobility devices, sighted guide, use of service animals, and communication.

Training should also be provided for all client contact staff.

15. What is the policy for packages, additional riders, Personal Care Attendants, service animals?

Response: We recommend using the Transit Plus policy for packages, additional riders, personal care attendants, and service animals, including the Transit Plus policy for fares. Access for PCA and service animals is a requirement and non-negotiable. They must be able to ride and at no additional charge. A parent, relative or guardian who is paratransit eligible should be able to ride with the child who they are accompanying to a medical appointment. A child who is paratransit eligible should be able to ride with their companion (parent, guardian or other caregiver) who is accompanying them to a medical appointment or other eligible service. As consistent with the Transit Plus policy, companions should pay the same fare as the rider.

Assistance with carrying packages to door as an accommodation within the Transit Plus restrictions for packages

16. What hours will the service operate? What days of the week?

Response: Same as the fixed bus route

Our initial recommend was 7 days a week/ hours 6 AM – 10 PM; as a compromise based on staff feedback at the Task Force meeting, we would accept 7 – 7

Need dispatch and reservation to be available during these times and voicemail to be available 24 hours a day.

Questions:

What is the Transit Plus policy for timeline to respond to consumer voicemails?

How will the provider handle the pick-up of consumer if it is after call center hours – hospital discharge, or going home from urgent care?

17. What standards will be in place for pick up times, drop off times, wait times, ride durations?

Response:

Assume the same standards as for the Transit Plus program but need to explore other same day program

If you need a ride to get you there on time – must call two hours in advance. Other wise if the vendor can provide the service more quickly and it is comparable between accessible and otherwise, that would be agreeable.

Need to check on federal standards for pick up times.

18. Can you specify a pickup time in advance, or do you call when ready to travel? How soon after your call will the vendor be expected to pick up? How do you ensure equity between pick up times for ambulatory riders and those who need WAVs?

Response: Can you specify a pickup time in advance, or do you call when ready to travel? We want to encourage people to call in advance, but there is also a need to call when ready to travel. Example: same day medical appointment

Vendor should provide expected arrival time at your pick up spot and at your drop off destination.

19. How soon after your call will the vendor be expected to pick up? (referring to the phone?)

Response: need to clarify the question If it's referring to the phone, someone should answer with a wait time of no more than 2 minutes and arrival should be within 30 minutes

How do you ensure equity between pick up times for ambulatory riders and those who need WAVs? have a “no strand” policy?

Response: Have enough vehicles to ensure equity and monitor performance with clear expectations and consequences in the contract.

20. Will the program have a no-strand policy?

Response: Yes, the program will have a no-strand policy.

** Keep in mind that the program must have at least two providers in order to qualify for the “taxi exception” for drug testing. Funds allocated for the program must cover cost of transportation as well as administrative costs.