



MaineDOT

Transportation Needs of Maine's Veterans

Final Report to the 128th Maine Legislature

February 5, 2018

VetsRide Maine
Pilot Project Recommendation

**Final Report to the 128th Maine Legislature
per
RESOLVE Chapter 77 of
127th Maine Legislature
To
Implement the Recommendations of the
Commission to Strengthen and Align the Services Provided to Maine’s Veterans
to Address the Transportation Needs of Maine’s Veterans**

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VetsRide Maine

Pilot Project Recommendation

Executive Summary

Introduction

Chapter 77 of the Resolves of 2016 directs the Maine Department of Transportation (MaineDOT) to determine the need for locally available transportation for veterans for employment or employment-related services, medical appointments, mental health services, social services and community activities. The purpose of the study is to inform the development of a pilot project for veterans' transportation. The goal of the study and the pilot project is to inform potential future development of a long-term transportation policy designed to enable the delivery of cost-effective, sustainable and veteran-focused transportation services to meet the current and future needs of veterans in the state.

Stakeholder Involvement and Research

The Maine Department of Transportation undertook this study with the assistance of consultant Rothe Associates and in conjunction with the Public Transit Advisory Council (PTAC). This effort included making presentations to the PTAC and receiving input from PTAC members and general public attendees at meetings held at MaineDOT on June 8, 2016, November 3, 2016, January 12, 2017 and December 14, 2017. The Council endorsed the report's recommendations. Individual meetings were also held with staff of the Veterans Administration, the Maine Department of Defense, Veterans and Emergency Management and the Maine Department of Labor. Pilot project working group meetings were held at Western Maine Transportation Services in Auburn on October 28, 2017 and at MaineDOT on November 28, 2017. An outreach meeting was held at the Lewiston-Auburn Maine Military and Community Network meeting on November 22, 2017. Enthusiasm for the proposed pilot project has been palpable since its inception in October 2017. Documentation of research performed is provided in Appendix A.

Summary of Findings

A. Transportation Needs of Maine Veterans

- **Medical Transportation.** Approximately 117,000 veterans reside in Maine, but only about 56,000, or 48%, are enrolled in the VA system. Veterans who are enrolled with the VA can receive medical services at Togus or one of 11 Community Based Outreach Clinics (CBOCs). A subset of these veterans who meet very specific criteria are eligible for VA-sponsored transportation services or travel reimbursement. Anecdotally, there are numerous examples of unmet veterans' medical transportation needs, but through our research, we have not found any source of consistent, dependable data that documents the unmet need.
- **Employment and Training.** It is estimated that about 50 to 75 veterans per year are not able to be served by the state's Career Center programs because of the lack of transportation.
- **General Purpose Transportation.** Maine has an existing system of public transportation (bus) services that could be enhanced to better serve veterans, as well as other members of the public. Because of funding limitations, there is very little bus service in rural areas, and practically none in remote rural areas. There is little to no data on the number of veterans transported by existing systems because most transit providers do not track whether riders are veterans or not, and when it is tracked, it is only through self-reporting.
- **Homeless Veterans Transportation.** The Veterans Administration reports that it uses federal Homeless Assistance Funds to purchase tickets on existing transit systems, including Portland Metro, ShuttleBus-Zoom and Concord Coach Lines. Private groups have purchased tickets for homeless veterans on several systems.

B. Pilot Project Recommendation

Establish a two and a half year veterans' transportation pilot program in Maine Transit Region 7 (Androscoggin, Oxford and Franklin Counties) to be administered by Western Maine Transportation Services (WMTS). The pilot program would be designed and administered so as not to duplicate public transit services that already exist, but to utilize existing services and supplement those services to fill gaps. WMTS would be directed to document trips and the numbers of veterans served, to survey system users, to evaluate the service and to report on the success of the program and how it could be improved to better serve veterans. WMTS would also be required to work closely with the Veterans Administration, Tri-County Mental Health and other veterans' organizations to coordinate services and minimize duplication. **Estimated Cost = \$150,000.**

Chapter 77 Resolves of 2016 (L.D. 1602), Key Portions

Resolve, To Implement the Recommendations of the Commission to Strengthen and Align the Services Provided to Maine's Veterans to Address the Transportation Needs of Maine's Veterans.

Sec. 1. Veterans' transportation study to determine need. Resolved: That the Department of Transportation, in conjunction with the Department of Defense, Veterans and Emergency Management, the Department of Health and Human Services and the Department of Labor, shall conduct a study, using available federal funds, to determine the need for locally available transportation services that convey veterans to and from employment or employment-related services, medical appointments, mental health services, social services and community activities; and be it further

Sec. 2. Study purpose. Resolved: That the purpose of the study is to inform the development of a pilot project to be established in a location served by a regional transportation network to provide transportation for veterans. The goal of the study and the pilot project is to improve access to essential programs and services for veterans, including, but not limited to, employment or employment-related services, medical appointments, mental health services, social services and community activities, and to inform potential future development of a long-term transportation policy designed to enable the delivery of cost-effective, sustainable and veteran-focused transportation services to meet the current and future needs of veterans in the State; and be it further

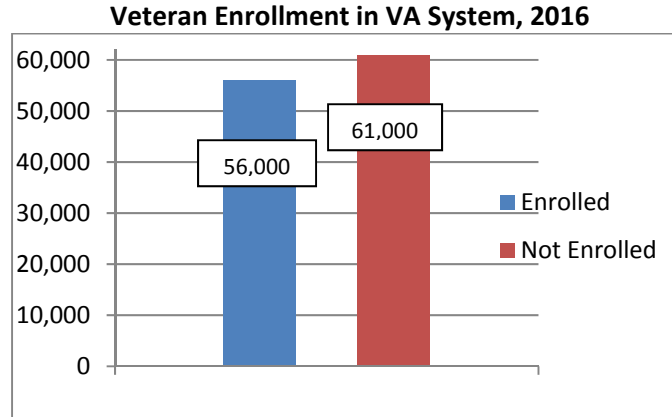
Sec. 3. Participants. Resolved: That the Department of Transportation shall invite the participation of various stakeholders in the study and in the development of the pilot project, including, but not limited to, the Public Transit Advisory Council, established in the Maine Revised Statutes, Title 23, section 4209-A; and be it further

Sec. 4. Reports. Resolved: That by February 1, 2017, the Department of Transportation shall submit an initial written report on the progress of the study and by January 15, 2018, the Department of Transportation shall submit a final written report, including findings and recommendations, to the joint standing committee of the Legislature having jurisdiction over transportation, health and human services and labor matters and veterans and legal affairs. The joint standing committees may each submit a bill to the Second Regular Session of the 128th Legislature relating to the subject matter of the final report.

Section A. Transportation Needs of Maine's Veterans

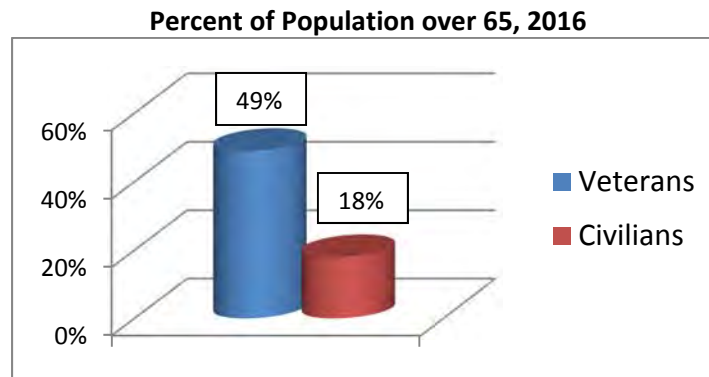
I. Medical Transportation

According to the National Center for Veterans Analysis and Statistics, 116,782 veterans resided in Maine in 2016. It estimated that 56,000, or 48%, were enrolled in the VA system. This means that more than half of Maine veterans are not receiving federal VA health benefits to which they are legally entitled. The Maine Bureau of Veterans Services believes that the discrepancy between enrollees and actual patients treated is, at least in part, due to access/transportation issues.



Source: VA Annual Benefits Report, U.S. Census Bureau, American Community Survey

Furthermore, the latest Census estimates show that Maine veterans are much older than non-veterans in the state. In 2016, almost half of veterans in Maine were over the age of 65, compared to 18 percent of non-veterans. This statistic illustrates that Maine veterans who are unenrolled may be taking advantage of health insurance provided by employers, Medicaid or Medicare services rather than veterans' medical services.



Source: VA Annual Benefits Report, U.S. Census Bureau, American Community Survey

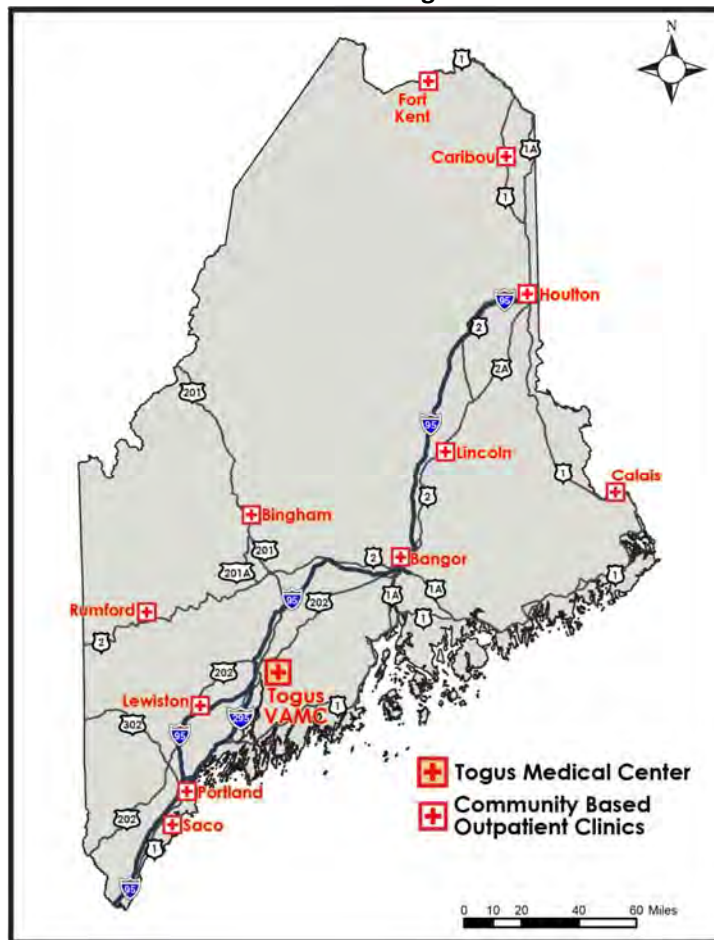
Veterans who are enrolled with the VA can receive medical services either at Togus or one of 11 Community Based Outreach Clinics (CBOCs). Two of the clinics, at Bangor and Lewiston, provide a number of services that are not available at the smaller CBOCs. The CBOCs in Rumford, Lincoln and Bingham operate on a part-time basis. The CBOCs are located in the following communities as shown on the map on the following page:

Caribou	Calais	Bingham	Rumford
Fort Kent	Bangor	Portland	Saco
Houlton	Lincoln	Lewiston	

Through our research, we have not found any source of consistent, dependable data that document an unmet veterans' medical transportation need. Most veterans provide their own transportation to Togus or one of the CBOCs. However, the VA does provide a great deal of medical transportation for veterans who need it and relies on a number of organizations, agencies and volunteer programs to help meet the demand. The VA supports the transportation needs of veterans through the Disabled American Veterans and the Veterans Transportation Service (#1 and #2, below). Other transportation services include those listed below numbered 3 through 7 which are also discussed on the following pages.

1. The Disabled American Veterans (DAV) van service
2. The Veterans Transportation Service
3. Veterans Service Organizations
4. Transit providers
5. Highly Rural Transportation Grant – Piscataquis County only
6. Rural Veterans Coordination Pilot Project
7. Choice Card

General Location of Togus and 11 CBOCs



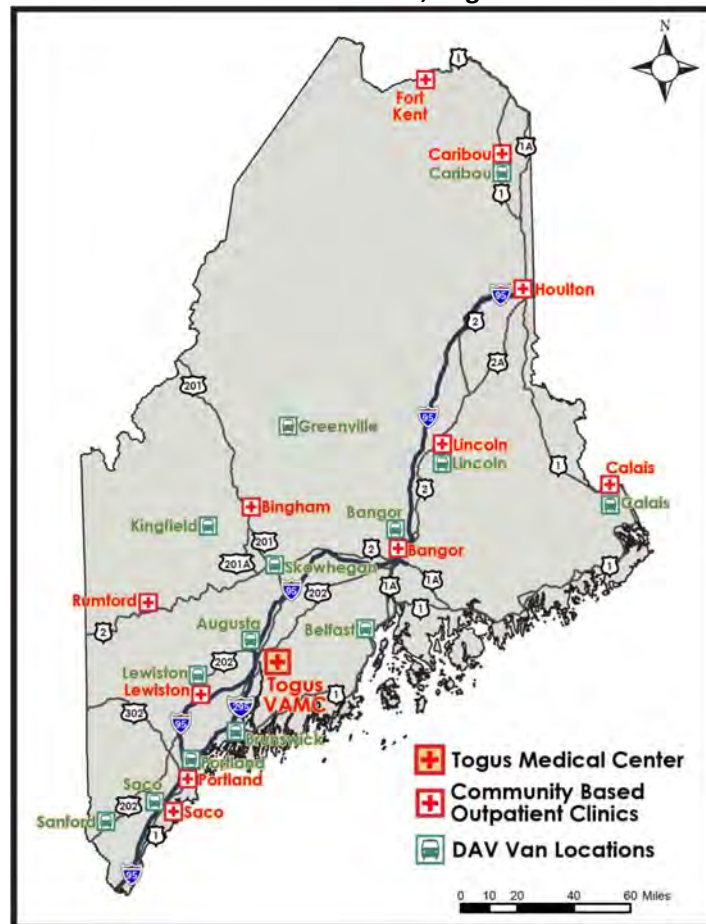
1. Disabled American Veterans (DAV)

Based on information provided by the VA's DAV Transportation Network Hospital Service Coordinator, the DAV operates a volunteer transportation network with 12 VA vans and approximately 34 volunteers (the number of volunteers varies over time). The DAV is able to provide rides to most ambulatory veterans who call, provided service is requested on a day the DAV van serves their area. The DAV, under contract to the VA, provides rides only to Togus in VA vans operated by volunteers. The volunteers are not permitted to take a veteran to a CBOC, even if the van travels past one. As a result, veterans do not always go to the facility of their choice, nor at the time they desire. The exception to this restriction on transportation to a CBOC is the Veterans Transportation Service (VTS) Caribou van which transports veterans to CBOCs in Caribou, Fort Kent, Houlton and Bangor, utilizing two volunteer drivers. For FY 2018, VTS has provided funding to Togus to hire a three day/week employee driver. At the date of this report, the position description is in Human Resources being processed for job posting.

There is no cost to veterans who ride a DAV van. Vans are stationed throughout rural Maine and approximately five to eight DAV vans travel to Togus each day. The DAV receives \$15,000 of state funding annually, derived from proceeds of casino table games in Bangor. Riders on DAV vans are not eligible for MaineCare medical and transportation reimbursement.

Veterans who cannot be served by the DAV system are referred to the Veterans Transportation Service. In 2015, the DAV provided 4,900 rides to veterans. The map below shows the general location of DAV vans. Please note that many of the DAV vans are located in close proximity to the 11 CBOCs.

General Location of DAV Vans, Togus and 11 CBOCs



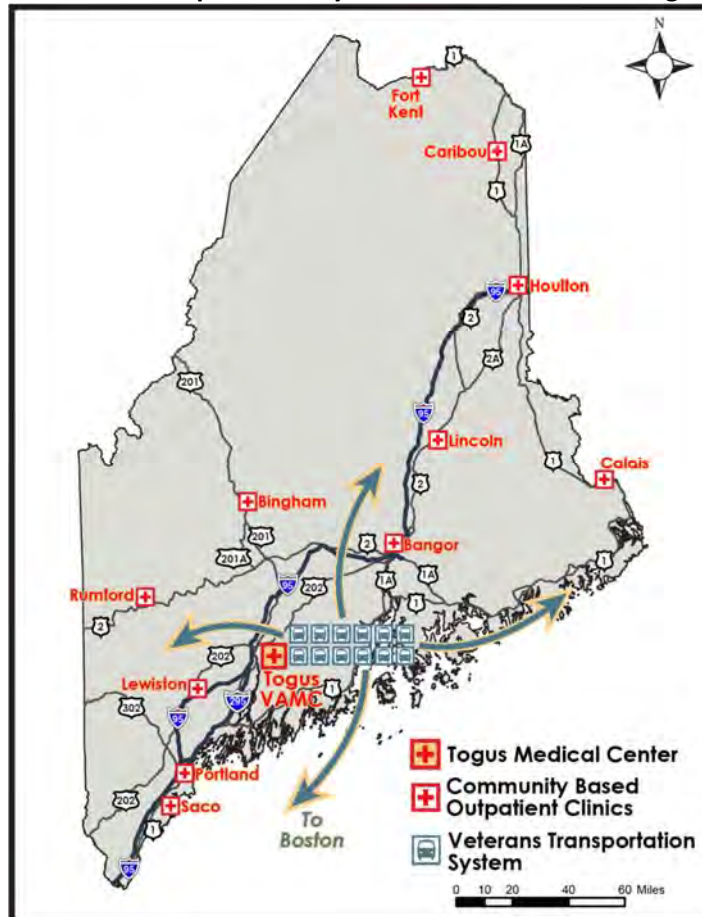
2. Veterans Transportation Services (VTS)

According to the mobility manager with the VA Maine Healthcare System, VTS has 12 wheelchair accessible vans operated by paid VA drivers. The service operates vans from Togus throughout the state and daily to Boston. There are no ride denials, but filling all ride requests is challenging. The VTS mobility manager fills most ride requests through VA vans, but also uses existing transit providers where feasible including the Piscataquis County Highly Rural Transportation Grant (described below #5), veterans service groups, volunteers, as well as private ambulance, Angel Flight and the VA Maine Togus Fire Department.

The VTS can take non-ambulatory veterans to Togus and to the CBOCs. The VTS also provides medical transportation to veterans in community living centers, contract nursing homes, veterans needing dialysis, homeless veterans and veterans with no other transportation options. Special mode (curb-to-curb) transportation is also provided in central and southern Maine (in 2015, 1,167 veterans received curb-to-curb service). The VTS also provides for ambulance transport and Angel Flight. There is no cost to veterans.

Veterans are also able to access a daily shuttle to Boston that transports 15-25 veterans per day. The shuttle makes three stops in Southern Maine on its way to Boston; veterans are able to access the shuttle at these stops in Freeport, Westbrook and Kennebunk. In 2015, 2,160 veterans were transported to medical facilities in the greater Boston metropolitan area.

Veterans Transportation System Vans Stationed at Togus



3. Veterans Service Organizations (VSOs)

Based on information obtained from the Bureau of Veterans Services, the VA, the Maine Military and Community Network and a number of veterans' service organizations (e.g. VFW, AMVETS, American Legion, Maine Military and Community Network), as well as individual members of those organizations, provide veterans medical transportation to Togus and CBOCs, often at their own expense. There is no data on the number of veterans served by the VSOs or the number of trips made by groups or individuals.

4. Maine Public Transit Providers

The following bullets outline veterans' medical transportation by public transit provider (see Region map Appendix B):

- Transit Region 1/Aroostook County: The Aroostook Regional Transportation System (ARTS) provides demand response service to the Caribou CBOC/hospital and the Houlton CBOC/hospital. ARTS does not collect data on the number of veterans receiving this service.
- Transit Region 3/Penobscot/Piscataquis Counties: The Community Connector (Bangor) provides fixed route service that stops near the Bangor CBOC (physical barriers at the CBOC prevent service to the front door). There are no data on the number of veterans served. As described below (see #5), Penquis Transportation Program's Lynx Bus provides veterans medical transportation from Piscataquis County to the Bangor and Lincoln CBOCs and Togus.
- Transit Region 3/Penobscot- LYNX PROGRAM: Penquis dedicates a portion of its federal transit allocation to support rides for those who cannot afford regular fares. This includes providing transportation services for veterans traveling from the rural area of Penobscot County for VA clinics, non-VA care appointments and for general errand needs in the community.
- Transit Region 4/Kennebec/Somerset Counties: The Kennebec Explorer, operated by KVCAP, provides M-F service to Togus three times per day.
- Transit Region 5//Knox/Lincoln/Sagadahoc/Waldo Counties and the Towns of Brunswick and Harpswell in Cumberland County: Waldo Community Action Partners, doing business as Mid-Coast Public Transportation (MCPT), utilizes funds from a variety of sources to transport veterans to Bangor and Togus.
- Transit Region 6/Cumberland County: The Portland METRO provides fixed-route bus service within ¼ mile of the Portland CBOC. There are no data on the number of veterans transported.
- Transit Region 7/Androscoggin/Franklin Counties: citylink (Lewiston/Auburn) provides fixed route service to the Lewiston CBOC, and Western Maine Transportation Services provides about 250 trips annually from outlying areas to the Lewiston CBOC. Community Concepts uses grant money to transport veterans to the Lewiston CBOC.
- Transit Region 8/York County: The York County Community Action Corporation (YCCAC) has partnered with the local veterans' centers to provide rides to veterans needing transportation to vital medical appointments. The current funding sources for these transports have come from the local VFW Chapter, the Patriot Riders and AMVETS. ShuttleBus-Zoom works with several veterans' organizations to provide discounted passes to be used by veterans riding buses in the Biddeford-Saco-Old Orchard Beach service area, as well as the Portland Intercity and Zoom Turnpike Express.

In addition, ShuttleBus-Zoom is launching a new program called “Transit Angel Project,” to which businesses and organizations can contribute by purchasing passes. The passes are donated to organizations in need, including those supporting veterans.

- Paratransit Services: Fixed route transit providers, including METRO (Portland), South Portland Bus Service, citylink (Lewiston/Auburn) and Community Connector (Bangor/Brewer area) are required by the Federal Transit Administration to provide complementary, door-to-door, wheelchair-accessible service to people within ¼ mile of a bus line who are not able to access the fixed route system. Paratransit service for the state’s four fixed route systems is provided by Regional Transportation Program (based in Portland), Western Maine Transportation Services (based in Auburn) and Penquis Transportation Program/The Lynx, (based in Bangor). There are no data on the number of veterans who are transported by paratransit systems.

5. Highly Rural Transportation Grant (HRTG) – Piscataquis County Only

According to the mobility manager of the VA Maine Healthcare System, Piscataquis County is the only Maine county with a population density low enough to qualify for this federal grant program. It was funded as a pilot project for \$50,000 for calendar year 2015. The program is administered by Togus VA and offers transit service provided by Penquis Transportation Program on the Lynx from Piscataquis County to Togus or the Bangor or Lincoln CBOCs. In 2015, Penquis provided 209 one-way trips for the VA, totaling 20,657 miles at a cost of \$13,010.52. The average cost per trip was \$62.25; this figure included two trips to Boston. The program has continued, spending approximately \$25,000/year transporting 142 veterans a total of over 30,000 miles/year.

6. Rural Veterans Coordination Pilot Project

The Rural Veterans Coordination Pilot Project was supported by a federal grant to the Maine Department of Labor to help transitioning veterans by removing barriers to employment. The grant expired in May 2017. It was limited to veterans discharged after August 26, 2012 and provided funding for transportation. However, only a few veterans took advantage of this program.

7. Veterans Administration Choice Card

Veterans, who live 40 miles or more from any VA facility with a full-time physician, may be eligible for care through the Choice Program, and do not require any type of additional authorization from the VA. These veterans can call (866)606-8198 and request care directly from Health Net which administers the program.

Veterans, who cannot be seen within the VA within 30 days of the clinically indicated date for that care, will be offered an opportunity to be seen in the community through the Choice Program. This determination is made within the VA, and the veteran will have the option presented to them at the time of scheduling an appointment within the VA if appropriate. These veterans cannot call Choice directly. Rather the VA or Choice will contact them if they choose to exercise this option at the time of scheduling.

Using this program does not impact veterans’ existing VA health care or any other VA benefit. However, the Choice Card does not pay for transportation.

Anecdotal Examples of Unmet Medical Transportation Needs

A number of agencies, such as the Maine Bureau of Veterans Services and organizations such as the Maine Military and Community Network, report receiving calls from veterans inquiring about medical transportation. However, these agencies and organizations do not appear to have quantified or compiled a record of such calls. For example, the types of calls reported anecdotally include late night calls from veterans needing next-day medical procedures, younger veterans unable to take time off from work to go to Togus by DAV van for a minor procedure but who could go to a nearby CBOC if transportation were available, older veterans complaining about the long van ride to Togus, and, veterans who must wait one or more days for a DAV ride, but may need medical attention sooner than that.

II. Employment and Training

According to the Maine Department of Labor, there are 12 Career Centers in Maine. Each one utilizes a “Jobs for Veterans” State Grant to help veterans plan and train for future employment. Career Centers sponsor workshops that are helpful to veterans on career topics such as preparing a resume and getting ready for a job interview. The Career Centers also provide one-on-one assistance for veterans, such as help focusing on career choices.

While no specific records exist, it is estimated that 50 to 75 veterans statewide per year are not able to be served by the state’s Career Center programs because of the lack of transportation. Eight of the Career Centers appear to be served by one or more flex or fixed route transit systems. The estimated 50 to 75 unserved veterans live outside the service areas of the state’s transit systems. The Maine Department of Labor does not have transportation funds for these veterans to participate in these services. Moreover, the unserved estimate includes only the veterans known to the department. It is impossible to know how many veterans who might avail themselves of services are limited due to transportation.

Beyond the information provided by Career Center staff, it is impossible to know how many veterans are unable to access training or employment opportunities due to lack of transportation.

III. General Purpose Transportation

Maine has an existing system of public transportation (bus) services that could be enhanced to better serve veterans.

Veterans needing transportation for employment, mental health services, social services and community activities, as well as use of the state's criminal justice system, must rely upon existing transit systems for service. The strengths and weaknesses of existing transit services are the same for veterans and civilians alike. Fixed route and flex route systems are focused on the larger communities. Because of funding limitations, there is very little service in rural areas, and practically none in remote rural areas. There is little to no data on the number of veterans transported by existing systems. Transit providers do not track whether or not riders are veterans. Based on data compiled by the Maine Department of Transportation in FY 2016, there were over 6.5 million one-way trips on existing transit systems. Since veterans make up about 10% of Maine's population, veterans may account for about 10% of transit trips provided, or about 650,000 one-way trips in FY 2016.

MaineDOT's Strategic Transit Plan 2025 is a 10-year comprehensive public transit strategic plan for the period 2015 – 2025. It assists MaineDOT in prioritizing service improvements for addressing the need for public bus and van type transit services. According to the plan, meeting 20% of the theoretical demand for transit is an acceptable level of service for transit in Maine. The 20% level of service is supported by national research and is based on the trip needs of no-vehicle households.

The following table provides an overview by county of the annual transit need, the number of trips provided, and the number of trips provided as a percentage of the annual need. The total number of trips includes both general public and social service supported trips: fixed route, flex route, and MaineCare or social service trips provided by agency vehicles, volunteers, and friends and family programs. Trips on ferries are not included, nor are trips on seasonal services. Intercity trips are counted in the county of origin. Veterans' unmet transit needs were not estimated separately, but were included in the total of unmet transit needs (last column).

The strategic plan documents that Maine is in the lowest quartile of states providing state funding for public transit during the most recent reporting period for which data is available for all states, providing 40 cents per capita, compared to a seven-state peer group weighted average of \$2.82. The peer group states include Idaho, Montana, New Hampshire, North Dakota, Vermont, West Virginia and Wyoming. To expand services at the best cost levels to meet a minimum 20% of theoretical level of demand would cost an additional \$7.4 million annually and at the higher average cost it would require an additional \$14 million annually.

The strategic plan notes that Maine is the oldest state in the nation by median age. Almost 18% of Mainers are age 65 or older. Due in large part to one of the largest concentrations of baby boomers per capita in the country, Maine's population is also aging faster than any other state. During the past 20 years, Maine's median age rose by almost 9 years, from 33.9 to 42.7 years. By 2030, it is projected that one out of every four Mainers will be over 65 years old. Many of these older Mainers will age out of their vehicles and will need public transportation.

County Summary of Transit Need and Trips Provided FY 2012

County	Total Annual Trip Need Based on No-vehicle Households	20% of Trip Need - National Measure of Transit Success And Maine Goal in Strategic Plan	Trips Provided by Maine Transit Providers	Trips Provided by Maine Transit Providers as a % of Annual Need	Total Unmet Need (20% of Need Minus Trips Provided)
Androscoggin	6,025,200	1,205,040	654,002	11%	551,038
Aroostook	1,260,600	252,120	278,172	22%	--
Cumberland	11,696,100	2,339,220	2,099,781	18%	239,439
Franklin	410,100	82,020	90,833	22%	-
Hancock	705,330	141,066	115,027	16%	26,039
Kennebec	2,131,290	426,258	310,322	15%	115,936
Knox	532,440	106,488	37,166	7%	69,322
Lincoln	191,250	38,250	23,178	12%	15,072
Oxford	772,800	154,560	178,367	23%	-
Penobscot	5,788,600	1,157,720	1,420,462	25%	-
Piscataquis	276,930	55,386	43,029	16%	12,357
Sagadahoc	486,000	97,200	40,507	8%	56,693
Somerset	766,540	153,308	136,829	18%	16,479
Waldo	540,000	108,000	115,009	21%	-
Washington	594,600	118,920	81,317	14%	37,603
York	3,535,800	707,160	607,019	14%	100,141
Total, Maine	35,713,580	7,142,716	6,231,020	17%	1,240,117

Source: (Maine Strategic Transit Plan 2025, Maine Department of Transportation, American Community Survey 5-Year Estimates Table B08201, Transit Cooperative Research Program, Federal Transit Administration Report 161, and Locally Coordinated Transit Plans for all transit providers receiving MaineDOT financial support)

IV. Homeless Veteran Needs

The Maine State Housing Authority (MSHA) reports that the number of homeless veterans has been declining since 2009, when there were 450 homeless veterans in Maine. Approximately 90% of homeless veterans in 2016 were found in Cumberland, Kennebec and Penobscot Counties. There were 84 homeless veterans noted in MSHA's "Point in Time Survey," January, 2016, which is down 12% from 95 in 2015.

There were 238 veterans utilizing emergency shelters in 2015, 204 of whom were located in five shelters: Bread of Life - Augusta (22), Oxford Street Shelter - Portland (102), Bangor Area Homeless Shelter (15), Hope House - Bangor (21) and Milestone Substance Abuse Shelter - Portland/OOB (44). These five shelters are on or near scheduled transit routes.

The Veterans Administration reports that it used federal Homeless Assistance Funds to purchase transit tickets for homeless veterans in the past year, including \$2,025 to purchase Portland Metro Tickets, \$1,025 to purchase ShuttleBus Zoom Bus Passes, and \$160 to purchase Concord Coach Line tickets. In addition, the VA reported that \$1,725 worth of ShuttleBus-Zoom Portland Intercity and Zoom Tickets or 345 tickets were donated by the Cape Elizabeth Rotary Club, and \$468 worth of Zoom bus Tickets; Biddeford-Saco-Old Orchard Beach Transit, and Community Connector Shuttle bus were donated by Maine Elks Association.

The transportation need of homeless veterans was not specifically mentioned in Chapter 77, but the Public Transit Advisory Committee requested that veterans' homelessness and transportation should be addressed in the interim report.

Section B. Pilot Project Recommendation

I. Introduction

Lack of transportation is universally acknowledged by clinical, employment and other professionals working with Maine's veteran population as a significant barrier to veterans accessing health care, training, employment and basic services. A significant number of anecdotes shared during extensive interviews with agencies, organizations and individuals during this study further support the need for more veterans' transportation but still do not provide specific documentation of the extent and location of the needs. The regional pilot project contemplated in RESOLVE Chapter 77 (2016) will not only provide an opportunity to test targeted transportation service provision to veterans, but will enable the focused collection of veteran-specific data to inform development of a sustainable means to meet veterans' transportation needs statewide.

II. Eligibility

There is broad agreement that the term "veteran" itself is confusing with regards to both (a) official VA program eligibility, and (b) the self-identification of clients we believe the program is intended to serve. The intent of this pilot program is to serve veterans defined in the broadest possible sense, as those ineligible for VA medical benefits are suspected to be among those most in need for outreach and access to a variety of services. The following definition used by the VA Homeless Program seems to fit the intent of this pilot program: ***veteran = an adult who served on active duty in the armed forces of the United States, including persons who served on active duty from the military reserves or the National Guard regardless of discharge and character of service and inclusive of active duty for training purposes.***

Eligibility for the pilot program will include any veteran plus one care-giver/dependent. Depending on available capacity, funding and utilization of the pilot program by targeted veterans, the program might also be opened more broadly to serve other needy individuals with similar circumstances. The data captured by any such extension will contribute to the overall knowledge of serving needy populations.

III. Region

Transit Region 7 (Oxford, Franklin and Androscoggin Counties) was chosen for the pilot project in part because Androscoggin County has the highest number of estimated unmet transit needs of any county in the state (551,000 trips per year, based on data contained in MaineDOT's Maine Strategic Transit Plan 2025). Veterans' unmet transit needs were not estimated separately, but were included in the estimated total and are likely to be higher than in other counties. The region was also found to contain a vibrant and enthusiastic network of veterans' service organizations and provider agencies, including a capable transit provider. A critical number have made commitments to participate in the project with in-kind resources, providing the ingredients needed to successfully conduct the pilot.

IV. Name

The name "VetsRide Maine" is suggested, allowing room for the project to become permanently established statewide. "VetsRide" is a similar program currently operating in Washington, DC.

V. Administrator

Western Maine Transportation Services (WMTS) is uniquely qualified to administer the pilot program because it is the MaineDOT-designated regional transportation provider for Region 7, and it also runs the citylink fixed-route transit service which serves Lewiston-Auburn. WMTS has extensive experience and an existing administrative system for documenting services provided for numerous funding sources, and was actively engaged in informing the Commission to Strengthen and Align the Services Provided to Maine Veterans. Furthermore, the numerous service providers and VSOs energized to participate in this pilot are in agreement that WMTS is the most qualified party to administer the project. This does not mean that WMTS would provide 100% of the trips delivered. The use of all available transportation services, including private sources such as taxis, uber and lyft, will be explored and evaluated.

VI. Program Description

WMTS would use pilot project funding to provide veterans' transportation with buses, vans, volunteers and alternative modes when existing services, including citylink and WMTS' general public buses, cannot meet the need. Eligible veterans' transportation would include, but not be limited to:

- Medical transportation to the community-based outpatient clinics in Lewiston and Rumford, other qualifying clinics and public health facilities when and where applicable, when the only alternative for a veteran is transportation to Togus by the VA for a service that could be provided at the local CBOC or other healthcare setting.
- Medical transportation to Togus on a day when DAV vans or Togus station cars do not serve the area where the veteran lives.
- Transportation to local Career Centers for training and career assistance.
- Employment and job training transportation.
- Travel to mental health services and social service assistance offices.
- General transportation for homeless veterans.
- Travel for court appearances and legal services.

VII. Timeframe and Projected Cost

The 2.5-year pilot project is designed to provide sufficient start-up and marketing time on the front end, as well as evaluation and reporting time on the tail end. Project partners have pledged an impressive amount of in-kind support, including capital (vehicles and transit stops), dispatch services, trained drivers and mobility managers, experienced veteran service provider and membership organization outreach networks, and post-service client evaluation services. In addition, the Steering Committee and Maine Military and Community Network will further strengthen ties among providers to fill gaps and leverage existing resources. The combined estimated value of these services cannot reasonably be calculated at this time, but will be estimated during the course of the program.

Beyond the in-kind donations of participating agencies, it is estimated that \$150,000 will need to be raised and committed to support a successful launch of the pilot project. This estimate is based on anticipated direct costs of providing 10,000 rides (approximately 714 days x 14 rides/day x \$12/ride = \$119,952) plus 20% of the total amount (\$30,000) for project administration (see activities below), totaling \$149,952.

VIII. Schedule of Activities

The following is a suggested schedule of activities associated with administering the pilot project. Far more detail would be created should the pilot be funded and launched.

Phase I. Pilot Set Up (July – September 2018)

- Assemble Steering Committee
- Confirm roles, budget and timeline
- Set up administrative procedures (dispatch, funding, rides, policies)
- Design ride types and prioritization protocols
- Create Marketing Plan (by September start advertising)
- Engage service providers
- Create performance measures, data collection strategy & evaluation plan

Phase II. Pilot Operation (October 2018 – September 2020)

- Launch program, test procedures
- Providers batch appointments by geography to facilitate van-sharing
- Hold regular Steering Committee meetings
- Survey customers & providers
- Hold mid-term evaluation with all partners – Write interim report
- Tweak program as needed
- Seek sources of ongoing financial support (public and private)
- Research ways to continue service if felt warranted

Phase III. Pilot Wrap-up & Evaluation (October – December 2020)

- Conduct final participant survey (riders, providers and VSO's)
- Analyze all data
- Assess effectiveness and efficiencies of various strategies
- Make recommendations regarding continuation and replication
- Prepare final report (see below) and public presentation to share results

IX. Deliverables

In addition to delivering rides and regular financial reports, WMTS will be required to prepare a written report and public presentation that:

- Describes how the services were marketed to veterans;
- Summarizes survey results;
- Documents the number of trips provided by location, type of service and cost;
- Evaluates the overall need and the extent to which the pilot project meets those needs;
- Assesses outcomes (impact of service on quality of life);
- Analyzes which types of services are more effective than others and what it costs to deliver them;
- Reviews and documents barriers to use of the service by veterans;
- Quantifies available funding sources and identifies gaps;
- Provides a complete pilot financial report including the estimated value of in-kind contributions;
- Includes recommendations for extending the pilot in Region 7 and throughout the rest of the state, including funding recommendations.

X. Key Partners and Roles

Western Maine Transportation Services: Pilot Administrator and Lead Ride Provider

Tri-County Mental Health Services: Outreach, program guidance and evaluation (specifically calling clients), steering committee

L/A Maine Military and Community Network (Oxford/Franklin/Androscoggin Chapter): Outreach, program guidance and evaluation in conjunction with its **65 organizational members**

Community Concepts: Outreach/referrals, ride provision, steering committee, data collection, program evaluation

Lewiston-Auburn Transit Committee: Program outreach, ride provision (citylink), data collection, program evaluation, steering committee

VA Maine: Project collaborator, CBOC and Togus coordination, steering committee, some ride funding to transit providers (statewide)

Penquis: Program design and evaluation, steering committee, coordination with Piscataquis/Penobscot programs

Androscoggin Transit Resource Center: Program outreach, data collection, steering committee

Seniors Plus: Program outreach, data collection, program evaluation, steering committee

United Way of the Tri-Valley Area: Outreach, client data collection

Appendix A: Research

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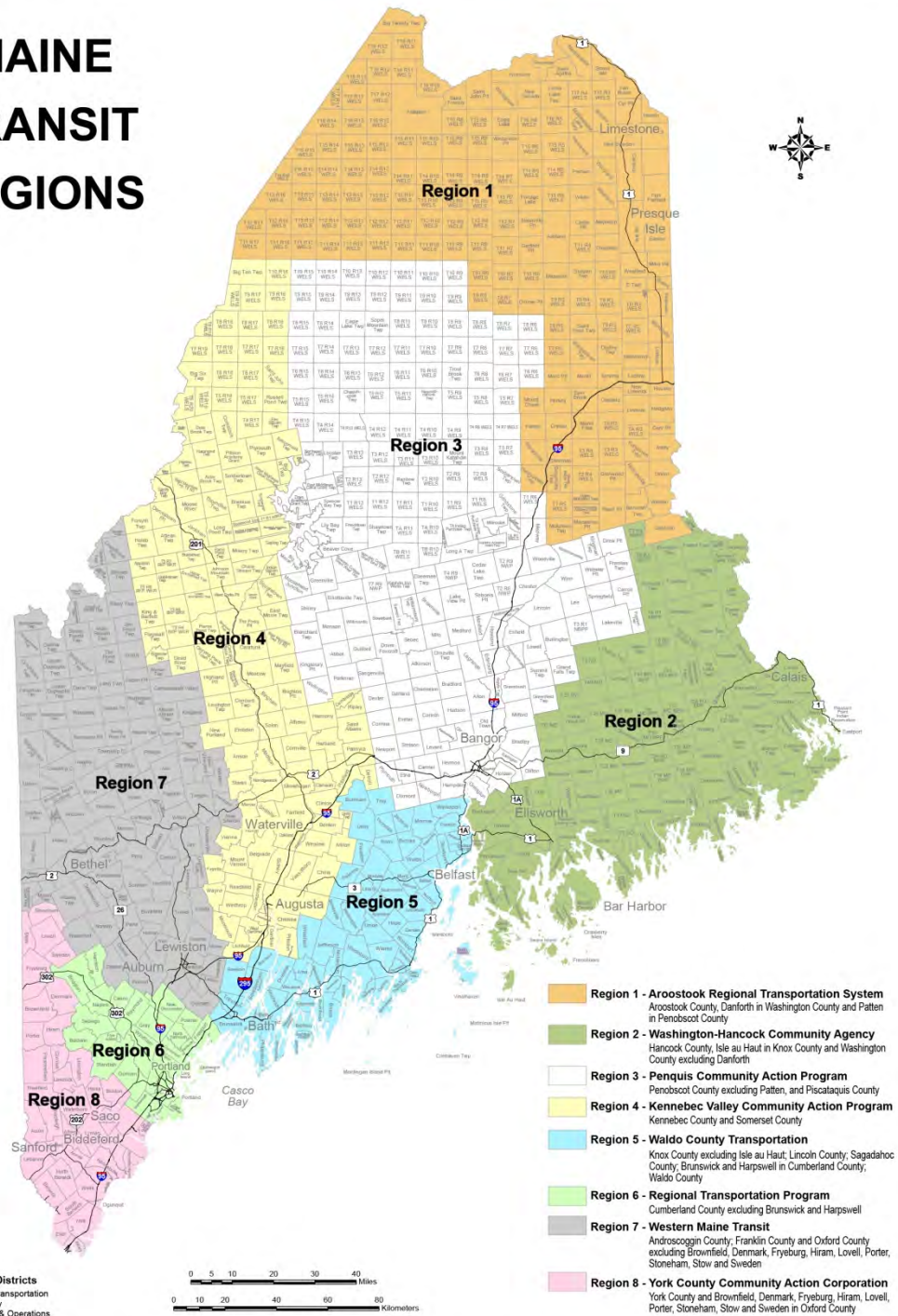
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Appendix B

MAINE TRANSIT REGIONS



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