Learning from the Taxi, Livery, and Hackney Grant Program

November 2022

Context

Our transportation options play a powerful role in shaping the choices we make every day. Having reliable and convenient transportation to a grocery store or doctor, for example, will increase access to healthy food options or consistent health care. When planners think about transportation services, however, they often think about creating transportation options to get the 9am-5pm commuter to and from work. This creates challenges for individuals who rely on the same transportation services and networks to get to the grocery store, doctor's office, or community center, particularly if the individual experiences mobility challenges.

The Taxi, Livery, and Hackney Grant provided grantees an opportunity to partner with taxi, livery, and hackney businesses to meet transportation and delivery needs not being met by existing transportation networks or services. Grantees included municipalities, regional transit authorities (RTAs), health and human service agencies, and non-profits. The program provided approximately 125,000 trips and deliveries across Massachusetts through 130 partnerships with taxi and livery businesses. The services provided include non-emergency medical trips, connections with workforce training, daily transportation for persons with disabilities, grocery trips, supporting the needs of persons experiencing homelessness, food/grocery deliveries for homebound individuals, and more.

The types of services that the Taxi, Livery, and Hackney Grant supported provide insight into residents' unmet transportation needs, and how we as transportation stakeholders can build or enhance services to meet them.

Process and Purpose

Throughout the Taxi, Livery, and Hackney grant program, MAPC requested that grantees submit bi-monthly reports about the number of rides and types of services that the grant was supporting. During the grant evaluation process, MAPC conducted focus groups with Regional Transit Authorities (RTAs) and municipal partners about their experience with the grant. These sources generated information and ideas for how to connect some of the region's most vulnerable residents to essential services, such as food and health care.

MAPC collected these findings in this memorandum to share recommendations for future policies and programs to improve access to these critical resources with municipalities, regional transit authorities, health and human service agencies, and non-profits.

We explored the qualitative and quantitative data collected by program participants to answer two main questions:

- 1. What are the opportunities for policy, program, and systems changes across organizations and local and regional transit providers to improve access to food and medical care, both locally and regionally? What is the role for the taxi industry in filling these transportation gaps?
- 2. What did we learn from the taxi partnerships about access to food, medical care, and other public health resources in the MAPC region?

In the following sections, we share findings to these questions based off trip data, surveys of and discussions with grant recipients, as well as from research on similar programs around the Commonwealth.

Opportunities for Policy, Program, and Systems changes

From the monthly reports and focus groups, grantees identified several opportunity areas for how to continue connecting residents to public health services once the Taxi, Livery, and Hackney grant ended. Below, we share both near-term and long-term that were discussed. As a note, opportunity areas are not intended as replacements for any existing services or taxi/livery partnerships, but as opportunities for grantees to expand or improve their transportation options while continuing to partner with taxi/livery businesses.

Near-term opportunities

Pursuing Grants to Continue Providing Transportation Services

There are several grant opportunities available to help municipalities and other agencies address transportation needs. Some state programs exist to help cover operating expenses, capital expenses, and mobility management expenses. For example, MassDOT's Community Transit Grant Program offers grant funding to municipalities (including Councils on Aging), transit authorities, and nonprofits. Eligible capital expenses include Wheelchair Accessible Vans (WAVs), a resource we found was lacking for many of the taxi grantees.

Municipalities can also consider a tax program that helps to fund additional transportation options for vulnerable residents or other specific populations. For example, the Town of Acton uses the local meal tax to fund a fixed-route shuttle operated by CrossTown Connect, their regional Transportation Management Agency (TMA). This tax was implemented in 2015 and the money goes into the transportation enterprise fund to support Acton's transportation services. For more sources of funding, please refer to the Appendix.

Vans or Volunteer Drivers

Many municipalities have or operate vans to transport a subset of the population, oftentimes elders or individuals with disabilities. One benefit of this option is that it can provide door-to-door or curb-to-curb transportation for certain populations.

Several grantees used taxi/livery partnerships in coordination with van services and volunteer drivers. For example, taxis helped expand options when existing van services and volunteer drivers were reduced during the peak of the pandemic, while others used vans for in-town medical trips and taxis for select out-of-town medical trips. Others used taxis for one leg of a long medical trip, and then volunteer drivers for the second leg to reduce travel costs.



Councils on Aging (COA) are municipal agencies that coordinate paid drivers to operate a COA-owned van for elders, families or caregivers, or individuals with disabilities of any age. Most COA vans are WAVs. Residents typically must make a reservation for the van a few days in advance in order to use them. Depending on the municipality, the COA van can take residents to different locations, including medical appointments, grocery shopping, or to social activities. These rides are typically subsidized.

In addition to Council on Aging vans, some municipalities have volunteer driver programs. For example, Friendly Independent Sympathetic Help (FISH) of Lexington coordinates rides between volunteers and residents with transportation needs. A resident calls FISH of Lexington two business days in advance, and FISH will connect them to a volunteer driver. The volunteers drive their own cars and rides are free of charge.

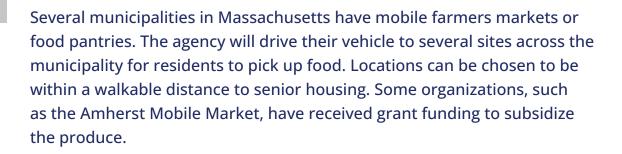
Scheduling/Dispatch Software

Scheduling software can save agencies time by reducing the number of calls between the resident, non-profit or municipal agency, and taxi/livery partner. Some agencies that are interested in continuing the taxi program have invested in scheduling software. A lower cost option is using a shareable spreadsheet, such as Google Sheets, to track ride requests and rides provided. After a resident calls the non-profit or municipal agency for a ride, the agency can then put that ride in a spreadsheet for the taxi/livery partner to view and book rides.

Mobile Services

The most needed transportation service across all grantees was for non-emergency medical services, which represented 29% of all trips in the Urgent Taxi Program and 26% of all trips in the second taxi grant round. Food access was also a significant need addressed through this grant program. In the Urgent taxi grant program, 20% of trips were for food pantry deliveries, 16% were for grocery and other essential shopping trips, and 1% were for meal deliveries. For the second grant round, food access totaled 32% of all trips.

Mobile health and food vans can increase accessibility to public health services by bringing resources closer to the populations they serve. Agencies could use taxis, vans, and volunteer drivers to make first and last mile connections to mobile health and food services locations, avoiding longer trips.



Many medical centers or community health centers operate mobile health vans, which bring services out of health care institutions and into the community. Whitter Street Health Center has a Mobile Health Van that provides primary care services, oral health care, and screening/testing for chronic and infectious diseases. However, mobile health services are more common in urban settings.

Home Services and Supportive Housing

Home services can also be an option for individuals with mobility challenges. Several grantees, such as the City of Methuen and People Acting in Community Endeavors (PACE) in New Bedford used partnerships with taxi/livery businesses to provide home services of food and medicine.

Like mobile health vans, home service programs are operated by medical institutions, and bring health care and other supportive services to the people who need them. For example, Boston Medical Center operates a Geriatrics Home Care program for individuals aged seventy and older, living in Boston, and receiving care from Boston Medical Center. In addition, supportive housing combines housing with on-site, coordinated services.

In terms of food access, there are several organizations that provide home meal delivery. The Executive Office of Elder Affairs funds many Elder or Senior Services across the state to deliver meals to individuals who are home-bound. Non-profit organizations, such as Meals on Wheels, also provide home meal deliveries.

Long-Term opportunities

Regionalization

Many of the taxi program grantees experienced challenges with running the taxi grant program due to staffing capacity, and cross-municipal trip needs of clients and residents. Smaller municipalities have limited funding and limited staff to dedicate to a program that requires a significant amount of time and effort. In addition, many municipalities lack necessary services such as medical facilities, grocery stores, and transit connections. These challenges could be addressed by regionalizing services such as dispatch systems and transportation options.

Some options currently exist for regional services. <u>Regional Transit Authorities</u> in Massachusetts serve most, but not all, municipalities in the state. RTAs serve a large area, covering multiple municipalities which allow them to lower the per trip costs for riders by combining trips to common destinations. Many RTAs provide additional services beyond fixed route services, including long-distance medical shuttles into Boston, microtransit services, paratransit, and more. With additional funding, RTAs could expand these options as needed to additional areas or populations.

<u>Transportation Management Associations</u> work regionally to create transportation solutions for commuters. Their goal is to reduce congestion, improve air quality, and make the state a better place to live, work, and build a business. Some TMAs offer services beyond typical commuting needs such as shuttle services with a town for daily needs.

Within these existing structures, there may be opportunities for grantees to partner with RTAs or TMAs to address unmet transportation needs, or regionalize select services, like a dispatch system, to reduce costs and increase opportunities for people to get where they need to go. Grantees may need to pay an additional assessment to the RTAs or TMAs to undertake the booking and dispatching, but a regional service could be more efficient by coordinating pick-ups and drop offs for multiple agencies/municipalities.

Examples exist in other sectors of regional services, such as regional high schools and regional public health services. Municipalities may consider partnering with other municipalities for shared transportation services, such as a transportation staff member, a shared transportation service or pooling resources to share a program.

Health Insurance

Another long-term opportunity area would be for more insurers to fund medical rides. In Massachusetts, MassHealth and some insurers that cover dual-eligible individuals (meaning those who are on MassHealth and Medicare) pay for transportation to medical appointments. However, grantees of the Taxi, Livery, and Hackney Grant Program desired for insurer-funded medical rides to be expanded to all payers. One grantee noted, "For medical rides, I am exploring more of how the insurance industry can pay for these. Some managed care plans and insurance options do allow this... but other insurers are lagging behind. I think this is something we should push for with legislators." More insurers paying for medical rides could increase access to medical services, particularly for those that live further away from medical institutions.

What the taxi partnerships taught us about access to food, medical care, and other public health resources

Although the taxi grant program was designed pre-pandemic to help taxi companies compete with Transportation Network Companies like Uber and Lyft, the grant program became an essential pandemic response tool during the pandemic. Both grant rounds highlighted the need for additional transportation services for vulnerable populations. Some of the needs developed because of the pandemic due to existing services, such as a Council on Aging Van or Volunteer Driver Program decreasing or stopping altogether. However, many needs existed pre-pandemic and will continue to persist in the future, regardless of the pandemic's status. Among the challenges listed for residents accessing public health services, grantees most frequently cited were the following.

Non-emergency medical appointments

Challenges getting to and from non-emergency medical appointments were mentioned regularly by the taxi grantees. The types of challenges varied depending on the situation. Many residents and clients who used the taxi service had previously relied on a friend or family member to take them to an appointment, used the local volunteer driver program, or a van service provided by the town. Some people had put off medical appointments all together until the taxi program became available.

The timing of transportation services was often cited as a challenge, since they didn't always match up with the timing of appointments. Access, such as wheelchair-accessible vans (WAVs) and the inability of drivers to provide door-to-door services (or bring clients

into appointments) made it difficult for many more vulnerable people to use existing services. For some people, the frequency of necessary medical appointments proved challenging to find options that met their needs. In addition, the affordability of existing services, especially if they were needed often, proved challenging. Many individuals needed specialized care, including dialysis or cancer treatment, which required a long-distance trip to the specialist or treatment center that worked best for them, particularly for those in rural areas. As one grantee noted, "Though good healthcare can be found throughout the state - the best care and specialists are found in metropolitan areas, and being able to help those most in need of this access was wonderful."

Overall there is a great need across the state for additional transportation services that help people get to and from medical appointments, especially elders, people with disabilities, and anyone with medical conditions or going for medical treatment in which it would be difficult to take existing public transportation services.



"[A] challenge is our patients that need dialysis three days/week. For example, one client's appointments were for Saturdays and he didn't have family to bring him. This grant allowed us to get him to his appointments without him having to worry about how he was going to get there each week or how he was going to pay for these multiple recurring visits."

Food access

Food insecurity existed for many people throughout the state before the COVID-19 pandemic began and was further exasperated during COVID when many services and social supports decreased or stopped all together. For many vulnerable residents, getting consistent access to food is difficult. Transportation to and from grocery stores or food pantries often does not exist, and public transportation, if available, is challenging to use when bringing home multiple bags of food.

Many of the taxi grantees provided rides to grocery stores or food pantries. Some municipalities in the state do not have a grocery store, and therefore residents need to travel further for their weekly shopping trips. For other people, the closest grocery store did not meet their needs because it was too expensive or did not have culturally appropriate food, and so they needed to travel further away to go grocery shopping.

Some of our grantees developed food delivery programs in response to the COVID-19 pandemic. Coordinating a large food delivery program that operated on a daily or weekly basis required a significant amount of staff time, coordination, and hands-on work. Delivering fresh or cold products presented additional levels of planning that proved more difficult than expected.

On-going food insecurity, especially in more rural areas with less access to food pantries, grocery stores, and other food services, will need sustainable solutions to address. Proper staffing at key agencies, data on food insecurity, and coordination across departments or regions will be key to developing the infrastructure needed to ensure individuals and families have access to healthy, affordable, and culturally specific foods.



Availability and accessibility of public transit

Although public transportation is available through regional transit authorities throughout the state, not every community has service, and not all services work well for the people who need them. There are nearly 20 municipalities that are not currently covered by RTA service, and many more without services that are frequent enough or match the locations that many residents need.

In rural areas, lack of public transportation is particularly prevalent. Many of the RTAs have fixed route bus service with stops at major areas, job centers, or transportation hubs. Connections from residential areas to transit, or "last-mile connections," are a barrier to many people wanting to use existing services. If a destination is outside of an RTA's service area, the trip can become a patchwork of services, leading to long wait times and tricky connections.



"Rides for the general public where there is a lack of transit service and connectivity will remain an issue. Rides to medical appointments for those who cannot use public transit will remain an issue and the long waits on paratransit will remain an issue."

Cost of private transportation

The taxi grant provided free or discounted transportation for residents and clients the grantees served. Many of the trips would be prohibitively expensive if individuals chose to book these trips themselves. Uber, Lyft, taxis, and other forms of private transportation often charge by the minute and/or mile, making long-distance trips too expensive for regular use. Recent fluctuations in the fuel prices have increased these prices.

In addition, many municipalities have ordinances that allow only licensed taxi/livery companies to pick up passengers. This creates a situation where the taxi company often must wait for the passenger to make the return trip, adding an additional charge; or must send a second vehicle for the return trip. In more rural areas, medical trips are also much further than grocery or shopping trips, creating higher per trip costs than more urban areas with a higher concentration of medical facilities. As one grantee noted, "...without the grant it has been a challenge. Many people cannot afford to pay privately for a taxi and can't even afford our discounted taxi voucher program."

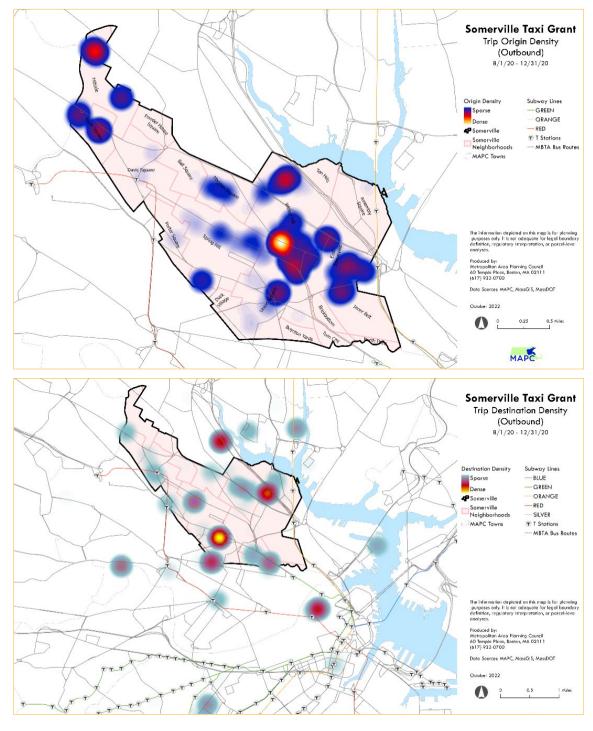
Mapping Origins and Destinations

In addition to quantitative and qualitative data acquired through bimonthly reports and focus groups, a select group of grantees provided trip data* from their taxi programs. MAPC cleaned and mapped this data to identify trends and key focus areas for future programs and research. Below are the results of the mapping evaluation.

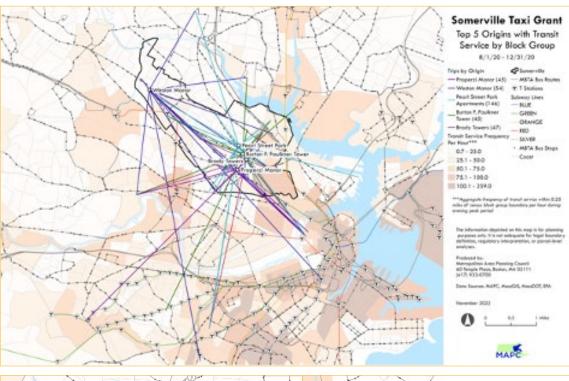
*Note: No trip data provided by grantees included personal identifying information.

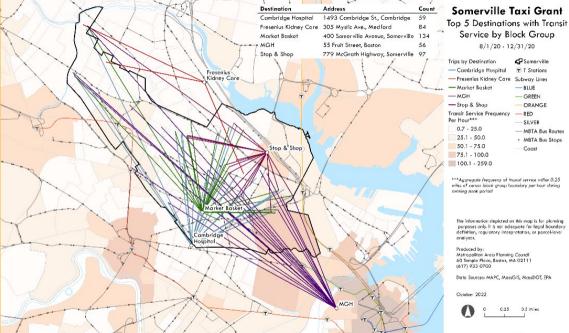
Somerville

The City of Somerville received grant funds in both rounds of the Taxi, Livery, and Hackney Transportation Partnerships Grant Program. The data shown in the maps below reflect trips from their first grant in 2020. Their program provided transportation for older adults and persons with disabilities to grocery stores, food pantries, pharmacies, and non-emergency medical appointments. The City also provided deliveries of food boxes, protective equipment and prescription medications to homebound, immunocompromised, and vulnerable older adults.

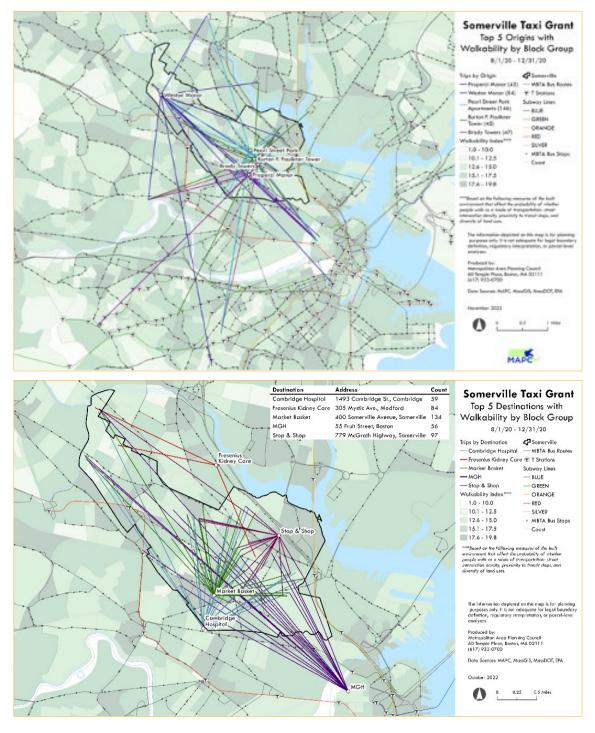


The origin and destination heat maps below show the number of trips started and ended at each location. The circles with yellow and red centers reflect a higher number of trips that started and ended in those locations. The top origin locations in Somerville are multi-unit residential buildings which present an opportunity for the City to further explore the transportation and resource needs of residents living in these locations. The top destinations were grocery stores and medical facilities. These destinations could represent places that may be difficult to get to with public transit or may be places that residents need a door-to-door service to access.





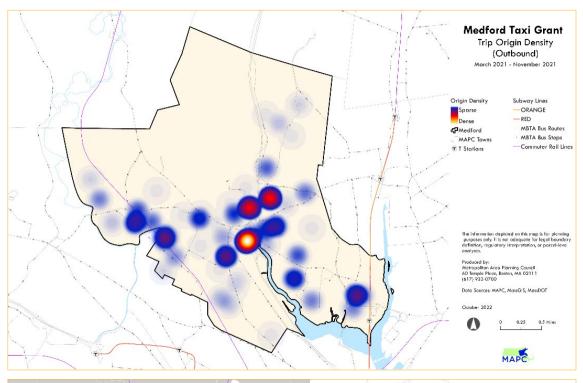
The City of Somerville is a transitrich area with multiple bus lines as well as rapid transit options. Transit stops and level of service are overlapped on the maps below to show potential for transit use for these trips in the future. The lighter colors represent less frequent service. The top five origins and destinations were identified from the data to explore patterns of frequent trips. All the origin points shown are multi-unit residential buildings. Although Somerville has many transit options, many of the trips shown below do not fall on existing transit routes, meaning that these trips would likely need multiple transfers for individuals to get from their homes to their destinations. For example, to go from Weston Avenue to the Fresenius Kidney Care Center, a person would need to take two different buses and then walk 17 minutes. This trip would take 30 minutes to travel 1.7 miles.

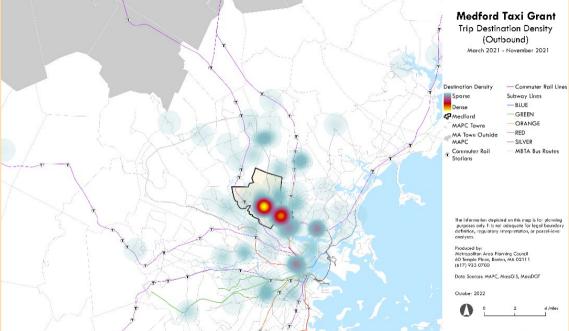


The City of Somerville is a dense, walkable community. Transit stops and walkability by block group are included in the map below to show potential for frequent trips to be walkable in the future. The darker colors represent more walkable areas. Many of the trips shown below have a mix of walkability scores, and many would be over a mile to walk. This could pose challenges for seniors, people with disabilities, anyone who may be receiving intensive medical care, or someone carrying groceries home. For example, a trip from Warren Avenue to Mount Auburn Hospital would take approximately 47 minutes to walk 2.3 miles.

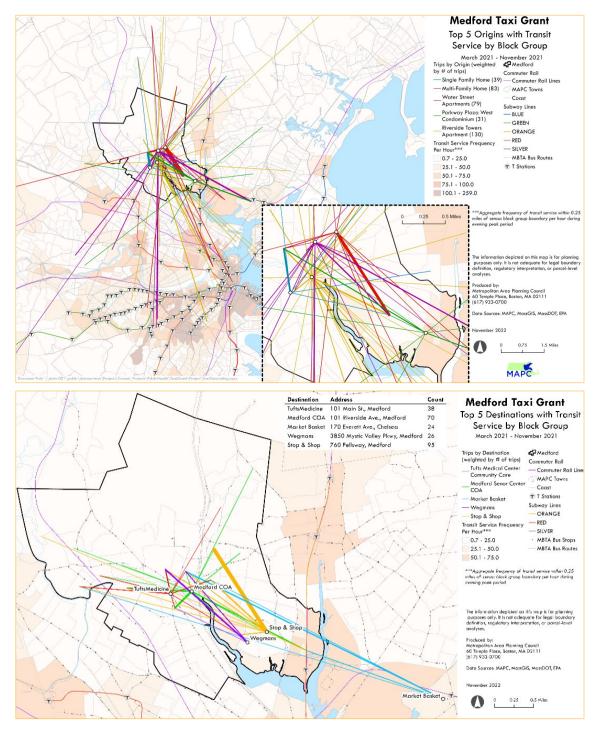
Medford

The City of Medford received grant funds in the second round of the Taxi, Livery, and Hackney Transportation Partnerships Grant Program. The data shown in the maps below reflect trips from their second grant program that took place in 2021. Their program provided transportation for seniors including non-emergency medical trips, grocery store trips, and food deliveries.

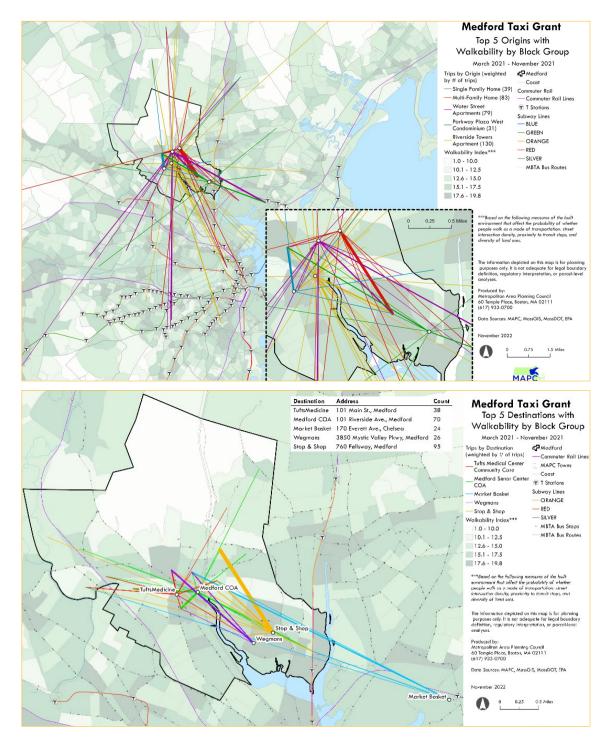




The origin and destination heat maps below show the number of trips started and ended at each location. The circles with yellow and red centers reflect a higher number of trips that started and ended in those locations. The top origin locations are a mix of single family, multifamily, and multi-unit residential buildings. These locations where a high number of trips started present an opportunity for the City to further explore the transportation and resource needs of residents living in these locations. The top destinations were grocery stores, medical facilities, and the Medford Council on Aging. These destinations could represent places that may be difficult to get to with public transit or may be places that residents need a door-to-door service to access.



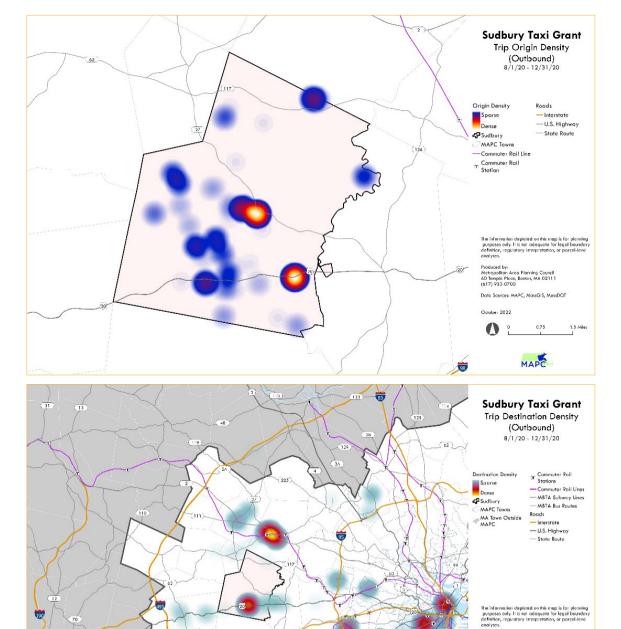
The City of Medford has many transit options available to residents, including multiple bus routes and rapid transit options. In addition, the Green Line extension will add additional rapid transit service to the southern end of the city when it opens at the end of 2022. Transit stops and service frequency are included with the top five origins and destinations on the maps below to show potential for transit use for these trips in the future. The darker colors represent more frequent service. Many of the trips shown below do not fall on existing transit routes, meaning that these trips would likely need multiple transfers for individuals to get from their homes to their destinations. For example, to go from Water Street to the Wegmans Grocery Store, a person would need to walk for 0.4 miles to a bus stop, take the 95 bus to Mystic Ave at High Street, then walk another 0.6 miles. The one mile of walking would be challenging for someone returning from the grocery store with multiple bags of groceries. This trip would take 26 minutes to travel 1.5 miles.



Similar to the maps above, the top five origins and destinations are shown in the maps below, but with transit stops and walkability by block group included to show potential for walkable trips in the future. The darker colors represent more walkable areas. Many of the trips shown below have a mix of walkability scores, and many would be over one mile to walk. This could pose challenges for seniors, people with disabilities, anyone who may be receiving intensive medical care, or someone carrying groceries home. For example, a trip from Riverside Avenue to Stop and Shop would take approximately 28 minutes to walk 1.4 miles.

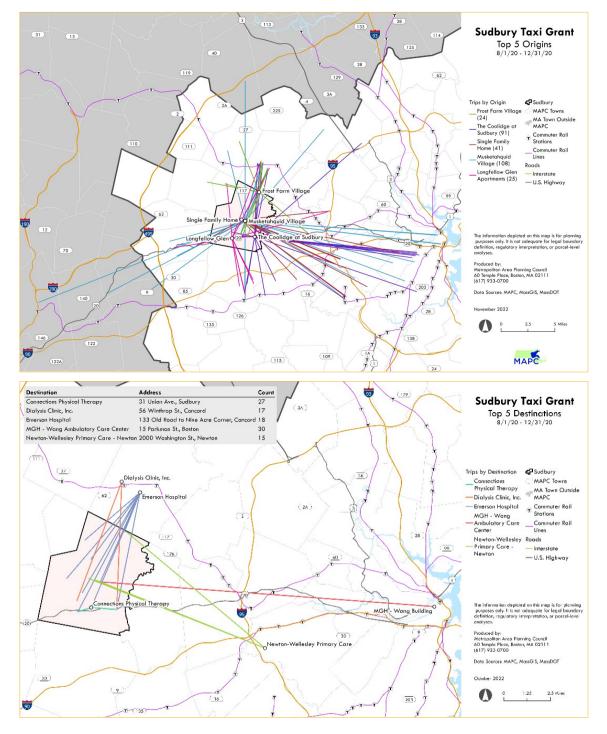
Sudbury

The Town of Sudbury received grant funds in both rounds of the Taxi, Livery, and Hackney Transportation Partnerships Grant Program. The data shown in the maps below reflect trips from their first grant in 2020. Their program provided transportation for older adults, persons with disabilities, essential workers, and financially and food insecure residents, plus healthcare and social services, food and critical supplies, and essential worker transportation.



The origin and destination heat maps below show the number of trips started and ended at each location. The circles with yellow and red centers reflect a higher number of trips that started and ended in those locations. The top origin locations are multi-unit housing buildings and villages, as well as single family homes. These locations present an opportunity for the Town to further explore the transportation and resource needs of residents living in these locations. The top destinations for Sudbury residents are medical facilities, most of which are outside the Town's borders. These destinations may be difficult (or impossible) to get to without a vehicle or may be places that residents need a door-to-door service to access.

Produced by: Methopolitan Area Flaming Council 60 Temple Piece, Boston, MA 02111 (617) 933-0700 Dato Sources: MAPC, MassGIS, MassDOT



The Town of Sudbury is a rural community with no access to public transportation within its borders. Nearby commuter rail stops are overlapped on the maps below to show potential for transit use for these trips in the future. None of the trips shown below would be possible to take on existing transit routes. For example, to go from Hudson Road to Massachusetts General Hospital, a person would need to drive (or be driven) to a nearby commuter rail stop, and then take the commuter rail into Boston. The drive to the Lincoln Commuter rail stop would take 13 minutes to go six miles, and the commuter rail trip would take nearly an hour.

Walkability maps were not created for the Town of Sudbury, as most of the top destinations were well beyond a walkable distance. In addition, Sudbury is a rural community with limited ability to walk between residential areas and key destinations.

Appendix

Proposed resources to fill transportation gaps

November 2022

Background

Through a partnership with Massachusetts Development Finance Agency (MDFA), MAPC managed two rounds of the Taxi, Livery, and Hackney Transportation Partnerships grants. These two rounds have given out 71 grants to municipalities, regional transit authorities, health and human service agencies, and non-profits to partner with taxi, livery, and hackney businesses to provide transportation and/or delivery services to people in their service area or network. From May to August 2020, MAPC and MDFA conducted the Urgent Taxi, Livery and Hackney grant program, with the goal of supporting both the taxi, livery, hackney industry during the COVID-19 pandemic and using their services to support local and regional governments' response to the pandemic. MAPC distributed approximately \$1 million in grant funds to 25 grantees.

At the end of 2020, MAPC released a Notice of Grant Opportunity for the second round of taxi, livery, and hackney grants. In early 2021, 46 grantees received over \$2.5 million throughout the state.

Through June 2022, both rounds of the program provided over 130,000 trips and deliveries across Massachusetts.

An extensive amount of qualitative and quantitative data was collected from the two rounds of the Taxi, Livery, and Hackney Transportation Partnerships grant program. To develop key findings and recommendations for future policies and programs after this program ends, MAPC staff conducted a robust evaluation of existing data. An evaluation of the grant program is noted as a deliverable in MAPC's contract with MDFA.

Proposed Resources

The following proposed resources were gathered in multiple ways. The taxi bi-monthly reports, as well as the final report, were the primary ways we populated this list. We also worked with our internal teams at MAPC and worked with our state partners to learn more about existing resources and services to help address transportation gaps and resource needs. These resources do not represent every possible way to address these gaps, but rather offer a list of possibilities to consider. Grantees may also consider implementing multiple different types of solutions, as well as partnering regionally to address needs.

Programs					
Title	Description	Type of Trip/Delivery	Funding (if applicable)	Examples and More Information	
Council on Aging Van	Council on Aging (COA) coordinate paid drivers to operate a COA-owned van. Can be one municipality or regional. Service is usually age restricted but available to residents with disabilities of all ages.	Varies		https://mcoaonline.com/	
Volunteer Driver Program	Volunteers in a municipality drive other residents to desired location, such as medical appointments.	Varies		Fish of Lexington https://fishlexington.org/info-for-fish-clients/	
Mobile medical program	Healthcare institution operates a mobile health van to bring services to patients.	Medical		Whittier Street Health Center https://www.wshc.org/mobile-health-care- programs-and-services/ Mass General Brigham Community Care Vans https://www.massgeneralbrigham.org/ en/patient-care/services-and-specialties/ community-care-van	
Mobile food pantry	Food pantry operates a mobile van or bus that brings food to different points across the municipality for pick-up.	Food Access	One source of funding is town's distribution of ARPA funds, as in Weymouth	Weymouth Mobile Food Pantry https://www.mma.org/weymouth-uses-arpa- funds-to-turn-former-school-bus-into-mobile- food-pantry/ Greater Boston Food Bank mobile markets https://www.gbfb.org/what-we-do/our- programs/mobile-markets/	

Programs					
Title	Description	Type of Trip/Delivery	Funding (if applicable)	Examples and More Information	
Commodity Supplemental Food Program (CSFP) Greater Boston Food Bank (GBFB)	Senior-focused organizations that are trusted in the community request CSFP from GBFB; CSFP boxes with nutritious, senior-focused shelf-stable foods are sent to organization; organization adds fresh produce and distributes boxes to clients. GBFB currently operates CSFP distributions at more than 35 partner sites each month across Eastern Massachusetts.	Food Access	Federal	Greater Boston Food Bank https://www.gbfb.org/what-we-do/our- programs/commodity-supplemental-food- program/	
Subsidized mobile market	Non-profit or public organization runs a subsidized market that visits various locations on a weekly basis. Locations are selected to be walkable to (senior) housing in low food access areas. Food offered is local and culturally affirming.	Food Access	Blue Cross Blue Shield; Mass in Motion (MA DPH)	Amherst Mobile Market https://www.amherstmobilemarket.com/ Tufts Medicine Melrose Wakefield Mobile Food Market https://www.melrosewakefield.org/in-the- community/community-services/community- programs/	
Regional Dispatching/ Trip Coordination	Transportation Management Association, RTA, or similar regional agency coordinates transportation services for multiple municipalities. Municipalities or others pay for regional dispatching services for improved efficiencies.	Medical, Food Access, and more	Varies	MetroWest RTA coordinates various COAs https://www.mwrta.com/senior-and-disabled CrossTown Connect TMA coordinates with Acton, Littleon, Maynard COAs https://www.crosstownconnect.org/Seniors	

Programs						
Title	Description	Type of Trip/Delivery	Funding (if applicable)	Examples and More Information		
Integrate taxis or ride-share with RTA paratransit or on- demand services	Provide taxi or ride-share rides for hours and/or destinations not covered by RTA's paratransit services.	Medical and other destinations	Varies	CATA https://canntran.com/dial-a-ride/		
Integrate taxis with RTA services for 2nd/3rd shift workers	Provide taxi rides for workers who cannot ride RTA fixed route during 2nd/3rd shifts (when RTA does not provide service).	Employment	Varies	Franklin RTA https://www.recorder.com/FRTA-launching-taxi- program-to-help-late-shift-workers-39968422		
Grocery or food pantry delivery to community hubs	Food delivery programs to limited, walkable locations rather than door-to-door delivery. Ideally locations selected are co-located with other HHS services or community spaces.	Food Access		Red Tomato Farm CSA drop off at Somerville Community Growing Center; Red Fire Farm CSA drop offs in park next to city hall and at Reedemer Church in Watertown; etc.		
Meal or grocery home delivery	Nutritious, home delivered meals/ groceries to seniors who are unable to leave their homes. May be medically or culturally tailored.	Food Access		MA Council on Aging https://www.mass.gov/service-details/ congregate-meals-home-delivered-meals Feeding American Pilot Program Meals on Wheels https://www.mealsonwheelsamerica.org/signup/ aboutmealsonwheels		

Programs					
Title	Description	Type of Trip/Delivery	Funding (if applicable)	Examples and More Information	
Enroll residents who have limited or no transportation access in home care services	Medical professionals visit patients who are homebound, rather than having the patient go to a medical facility.	Medical		BMC Geriatric Home Care Program https://www.bmc.org/geriatrics/services/home-care-program	
Supportive housing	Health care system partners with non- profit housing managers to designate units reserved for those with complex medical issues and offer on-site, wrap- around services.	Medical		BMC Supportive Housing General reference to DoN funding: https://www.bmc.org/news/press- releases/2017/12/07/boston-medical- center-invest-65-million-affordable- housing-improve Reference to funding going to CHA: https://www.mass.gov/doc/factor-1- materials-pdf-boston-medical-center- hospitalclinic-substantial-capital- expenditure/download	
Older Adults as priority populations	Identify older adults as a priority population in upcoming planning and implementation efforts (e.g., health needs assessments, community food assessment, transportation plan, physical activity plans, community health improvement plans, etc.)	Varies	Likely public or grant funding	Cambridge Food Action Plan https://www.cambridgepublichealth. org/wp-content/uploads/2022/09/ Services_FFPC_Cambridge-Food-Action- Plan_2022.pdf	

Other potential programmatic options: Referring patients elsewhere (ASAP, FISH, Ride, CoA, WRTA, GATRA, Senior centers, Elder bus), returning old services (van), working with social services.

Funding Sources				
Title	Description	Eligibility	Link for more information	
MassDOT Community Transit Grant Program	Awards funds to help meet the transportation and mobility needs of seniors and people with disabilities. The annual competitive program distributes FTA Section 5310: Enhanced Mobility of Seniors & Individuals with Disabilities funds and State Mobility Assistance Program (MAP) funds.	See link for more information	https://www.mass.gov/service-details/community- transit-grant-program-details-and-eligibility	
Community Compact Best Practices Program	A community will agree to implement at least one best practice. Best Practice Areas include Age and Dementia Friendly, Diversity, Equity, and Inclusion (DEI), Public Accessibility, Public Health, Public Safety, Regionalization/Shared Services, Transportation / Public Works.	Municipalities	https://www.mass.gov/best-practices-program	
Efficiency and Regionalization Grant Program	Efficiency and Regionalization (E&R) competitive grant program provides financial support for governmental entities interested in implementing regionalization and other efficiency initiatives that allow for long-term sustainability.	Municipalities, regional planning agencies, councils of governments.	https://www.mass.gov/efficiency-regionalization- grant-program	
Municipal funding	Local funding for transportation, including local option meals tax. For example, since 2015 the Town of Acton uses local meals tax to fund local transportation operated by CrossTown Connect (regional TMA).	Municipalities	http://archive.constantcontact.com/ fs191/1110714961086/archive/1121077313767.html	

Funding Sources					
Title	Description	Eligibility	Link for more information		
Friends on the Council on Aging or similar non-profit	A non-profit organization that financially supports local Council on Aging or similar programs, including transportation needs.	Municipalities	https://www.westonma.gov/933/Friends-of-the- Council-on-Aging https://www.town.duxbury.ma.us/senior-center/ get-involved/pages/friends-council-aging		
Insurers (MassHealth, United, Medicare Advantage)	Insurer pays for patients' medical transportation.	This benefit is often only available on MassHealth or Medicare.	MassHealth: https://www.mass.gov/transportation-for- masshealth-members United HealthCare: https://www.uhccommunityplan.com/dual-eligible/ benefits/dual-plan-transportation-assistance		
Local businesses, chamber of commerce, or other anchor institutions	Donations from private businesses or anchor institutions to Council on Aging for capital purchases (e.g. shuttle van) or to support a program. See Friends of the Council on Aging or similar non-profits above.				
Hospital Community Health Improvement Plans/ Community Health Improvement Initiatives	Many health entities, like hospitals, public health departments, and community action agencies are required to regularly conduct health needs assessment of the populations they serve. Transportation and food security are topics health care systems could consider as part of the "Social Determinants of Health" in their assessment. Assessments inform community benefit spending and programming.	Reach out to the health care systems in your region to figure out what initiatives they have to support food security and nonemergency medical transportation (NEMT).	https://www.mapc.org/resource-library/community- health-needs-assessments-in-the-mapc-region/		

Funding Sources					
Title	Description	Eligibility	Link for more information		
MassDOT Shared Streets and Spaces	Funding to municipalities and public transit authorities to quickly implement improvements to plazas, sidewalks, curbs, streets, bus stops, parking areas, and other public spaces in support of public health, safe mobility, and strengthened commerce. Eligible projects include those that support safe routes for seniors, including safe walking and bicycling facilities within one mile of senior centers, housing for elders, and travel corridors used by seniors; Projects located in a Census Block Group identified as an Environmental Justice Community; and Projects located in a Census Block Group identified as having a median household income below the statewide median income.	Municipalities and public transit authorities	https://www.mass.gov/info-details/program- overview-shared-streets-and-spaces-grant-program		
Massachusetts Community Health and Healthy Aging Funds	Funds focused on improving community health and advancing health equity in Massachusetts.	Massachusetts- based non-profit 501(c)3 organizations and municipalities	https://mahealthfunds.org/		
Massachusetts Rural Transit Assistance Program (MArtap)	 Mini Grants directly related to the agency's transportation program and may include: Computer hardware and software, new and upgrades Marketing and promotional materials Community surveys on transportation needs 	Contact MassDOT for eligibility	https://www.mass.gov/how-to/apply-for-a-helping- hand-mini-grant		

Funding Sources					
Title	Description	Eligibility	Link for more information		
Transportation for Massachusetts Transportation Justice Grant Funding Opportunity	Grants available to groups organizing and advocating to improve walking, cycling, rolling, public transportation, and transportation access to help reverse racial and economic inequities in Massachusetts.	Community-based organizations with 501(c)3 designation or a fiscal sponsor	https://www.t4ma.org/tj_rfp		

Other potential funding sources: non-profit organizations, philanthropic organizations, own budget (CoA, Bay State Community Services, CHA).

Technology					
Title	Description	Type of Trip/Delivery	Costs (if applicable) and Links for more Information		
GoGoGrandparent	Ride and delivery software for individuals who do not have smartphones	Rides and deliveries	https://gogograndparent.com/		
Bring Food App	Software for planning multiple stop food deliveries	Food pantry or other multistop deliveries	Advertised as free for government and not-for-profit organizations https://bringfood.care/		
Google Forms	Online spreadsheet to track ride requests and rides provided, shared by the trip planner and taxi/livery provider; reduces calls/back and forth between ride provider and ride planner	Rides	https://www.google.com/ forms/about/		

Other potential technology options: regional dispatch system, ride scheduling software, self-scheduling apps, electronic/alternative fare payment, GPS technology.

Resources and Management					
Title	Description	Type of Resource	Cost (if applicable) and Links for more Information		
Mass RideMatch	A one-stop searchable directory of public, private and accessible transportation options in Massachusetts	Searchable database for transportation options	Free for public use https://massridematch.org/		
MassMobility	MassMobility is an initiative to increase mobility for older adults, people with disabilities, veterans, low-income commuters, and others who lack transportation access in Massachusetts.	Information sharing	Free for public use https://www.mass.gov/orgs/massmobility		
Massachusetts Human Service Transportation Office	The Human Service Transportation (HST) Office oversees an efficient, high-quality system of coordinated transportation services for eligible EOHHS consumers to access medical, social, and day services across Massachusetts.	Information sharing, scheduling rides for MassHealth medical appointments	https://www.mass.gov/orgs/ human-service-transportation- office		
National Aging and Disability Transportation Center	The National Aging and Disability Transportation Center (NADTC) promotes the availability and accessibility of transportation options that meet the needs of older adults, people with disabilities, and caregivers.	Informational webinars, grant opportunities	https://www.nadtc.org/		

MAPC does not endorse any of these companies or organizations. This list is for informational purposes only.

