

Testimony before the Senate Committee on Banking, Housing, and Urban Affairs

March 25, 2004

Witness: Dale J. Marsico, CCTM
Executive Director
Community Transportation Association of America
1341 G Street N.W., 10th Floor
Washington, DC 20005
Phone: 202-247-1922
Fax: 202-737-9197

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Prepared by Dale J. Marsico, CCTM

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Mr. Chairman and Members of the Committee:

Let me begin by expressing my appreciation to you, Mr. Chairman, for allowing me to be here today to discuss the Fiscal Year 2005 budget proposals for the Federal Transit Administration and how they relate to both our nation's transportation needs and to the Senate's recently passed legislation, S. 1072.

The Community Transportation Association and its over 7,000 members represent transportation providers of every type, size and location. Some of our members serve small rural communities, some have deep roots in the non-profit and faith-based service sectors, some are large more-traditional transit agencies, and some clearly characterize themselves as independent businesses. All of them – just like all Americans – have an important stake in how we finance America's transportation future.

In many ways our members reflect the changing nature of transit: one that recognizes that no one solution works for every community in a nation as diverse as ours, and one where the traditional

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 2*

definitions of mass transit have been replaced by a new form of flexibility you recognized in both TEA-21 and in your recent legislation, S. 1072, as public transportation.

This diversity gives us strength as we seek additional innovation and investment to continue to meet the mobility challenges of the 21st century.

This hearing comes on the second anniversary of this committee's first hearing to discuss the reauthorization of TEA-21, held in this very room in March of 2002. To paraphrase the poet T. S. Eliot, we have returned to the place we started, and know many of the things we said then remain true and just as important today.

We knew then and we know now that federal investment in public transportation is an investment that returns real dividends to the American people. For every dollar provided in transit spending and investment, transit returns 8 dollars to the American people. We also know that every dollar invested in transit creates jobs.

But there are other kinds of returns on investment that do not lend themselves to numbers or statistics. They are the real stories of individual success and achievement that we cite later in this testimony.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 3*

Our testimony supports what we knew then and know now – that investments in public transit helped end welfare as we know it, that transit is a primary way that millions of our fellow Americans go to work every day and will be the primary way that Americans go back to work as part of any economic recovery.

We know that over the last 10 years public transit agencies and their services – regardless of their locations – are powerful tools that guarantee the independence of many of our older citizens and that strong transportation programs in rural areas allow America’s seniors to maintain their mobility independence. Together with programs and services in urban and suburban communities, transit is the safe choice for all of our older Americans.

We know that investments in America’s rural and small urban communities are as essential as transportation investments anywhere else. Because these investments have all the beneficial benefits in terms of employment and economic growth that transit provides in larger communities.

And we know that in times of great distress, whether it be what we lived through on September 11, or the role transit played last year during the major power disruptions, or assisting communities in natural disasters, transit was there doing what it always does in such times of uncertainty – moving people out of harm’s way and literally offering shelter in the storm.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 4*

Despite our success, we are faced with the challenge of not just maintaining our current level of federal investment, but we face the larger issue of finding greater resources that will allow transit and the communities it serves to move forward to address our critical unmet mobility needs in this new century.

Therefore we must respectfully disagree not just with proposals that reduce transit's current investment but those who would maintain transit's financial status quo. Make no mistake about it, freezing transit investment – or holding transit to last year's funding level – is a reduction in investment. Critical areas of transit's overall cost structures, like fuel and maintenance, safety and security, as well as capital improvements, are rising faster than the current rate of inflation.

Is the mediocrity of maintaining current conditions acceptable, given the need to motivate people to ride community and public transportation? Or, do we encourage a visionary approach that secures the introduction of substantial private-sector capital to be brought into the capital equipment investment formula – an innovative way to solve the budget shortfall situation?

Passage of substantive TEA-21 reauthorization law is the single most important element essential to persuading the private-sector to commit investment dollars within the context of innovative financing that is indeed necessary to meet the need for capital replacement so necessary in community and public transportation. The increased use of innovative financing is the only way to bring the nation's bus fleet up to safety, accessibility and quality standards.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 5*

Faced with the growing needs of our older citizens, as well as closing the continuing unmet needs of rural communities, making further inroads in the fight against congestion, or doing our share to improve air quality, these are all at risk without higher levels of investment.

Although our investments and success are greater than what they were, there is much more that needs to be done. There is still much unmet transit need, and demand for public and community transportation services outstrips supply. What follows are the real success stories of community and public transportation, the real successes.

Extending the Economic Benefit of Transit to Rural and Small-Urban Communities

In our estimation, the success of community and public transportation ought not to be measured in vehicle miles, unduplicated trips or even overall ridership totals, important though they are.

No, the success of community and public transportation must be measured by its impact on the American people and on the local economy. The impact of public and community transportation is all about moving people – to jobs, to school, to the doctor, to the mall, to social services and anywhere else.

Our colleagues at the American Public Transportation Association have compiled many years'

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 6*

worth of statistical data that show the positive effects of public transportation in our nation's cities and their surrounding suburbs. We commend them on this work, and stand with them in their findings. But, you may well wonder what value does public transportation have for that other half of our nation's population, the residents of smaller cities and rural areas? To better assess the positive effect of transit in rural areas and smaller cities, we turn to the Transportation Research Board. The report, *Assessment of the Economic Impacts of Rural Public Transportation*, highlights that because of the guarantees that you and your colleagues helped assure for our nation, many more small cities and rural areas were able to use to the connections made possible by transit to strengthen their communities.

● **Blacksburg, Va.**

Federal transit funding to this small, university-oriented city, the home of Virginia Polytechnic University, has yielded demonstrable benefits in reduced congestion and reduced demand for parking lots and garages both on campus and in the city of Blacksburg. Indeed, city and college officials have reported that it would cost the community twice as much simply to construct more automobile-oriented roads, lots, garages and facilities than what is spent in combined federal and local transit investments.

● **Hagerstown, Md.**

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 7*

According to Washington County, Md., officials, 80 percent of the users of the county's transportation services do not own a car; these same people are riding the public transit system's vehicles to get to and from jobs on a reliable basis. The net impact on the county's economy, were these hundreds of predominately lower-income commuters forced to either purchase and operate automobiles, or leave their jobs and risk return to dependence on public assistance, has been estimated at a loss of \$2.4 million a year, which is a far greater cost than the county's annual transit budget of \$1.1 million.

● **Lee County, N.C.**

This rural county's transit program began strictly as a means of providing basic mobility for the area's senior citizens and medically under-served populations. The system has grown mightily over the years, and now provides a full range of transportation services to link residents with work, job training, health care and social services. Interestingly, one of the greatest economic benefits that this transit program brings is the spending power of the county's senior citizens. Thanks to the modest, but steady, federal transportation investment in Lee County, every dollar spent by the transit program has yielded two dollars spent by senior citizens in local stores, restaurants, pharmacies, and other businesses. Prior to the creation of the transit program, these dollars were not being spent in the community.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 8*

● **Clarksdale, Miss.**

The economy in this portion of the rural Mississippi Delta region has changed tremendously over the past decade, and the area's economic growth would have been severely limited without the local public transportation network. This region's transit program began as an offshoot of the local community health center, which needed to assure access to basic health care for the large numbers of low-income and no-income families in the area. More recently, this region has seen the sudden employment demands of newly constructed casinos, and the transit program has proven vital to getting these casinos the round-the-clock workforce they need. Public transportation cannot meet such demands for employers unless its resources are stable and its services reliable.

● **Pee Dee, S.C.**

Health care is another realm in which public and community transportation, when it has a stable foundation, helps assure health and vitality for individuals and local economies. For a moment, imagine the alternatives: individuals who must either drive themselves, even when ill or debilitated, to medical care, or who must use ambulances as an expensive alternative for reaching hospitals and physicians, or – in the case of many seniors – must otherwise contend with the choice of leaving their homes, and even leaving their home towns, to go spend weeks,

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 9*

months, years, or the remainder of their lives in nursing homes and institutional care. Public and community transportation frequently serves as that lifeline that connects people with critical services, such as renal dialysis. Its access to other health services also is a central consideration in helping seniors, persons with disabilities, and others remain in their homes as they continue leading lives in their own communities. The regional transit program in this largely rural portion of South Carolina is representative of so many such transit systems in its role as a transporter to doctors, dialysis, and health care facilities. Without the transit service, the annual costs of health care just in this one region of one state would increase \$5 million, a burden that largely would fall on other federal and state programs such as Medicare and Medicaid, that can ill afford such costs.

Thanks to the stable, assured transit funding of TEA-21, we have seen similar economic and social benefits throughout the nation over the past five years. Seniors and others in rural areas of South Dakota now are able to take public transportation to health services, stores, and other places they never before could access. Rural regions such as the Upper Cumberland area in Tennessee, the counties surrounding Charlottesville, Va., and countless other areas across the country now have 24-hour transit service, linking late night workers with their jobs. Such a notion would be unthinkable without the resources of TEA-21, and we are certain this reliability of transportation helped many communities, and many individuals, weather the most recent downturns in the economy.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 10*

Not only do we find economic progress in the traditional areas of transit funding – we also find it in programs like the Job Access and Reverse Commute Program.

We find in the Job Access and Reverse Commute program the same commitment to public transportation that one might expect in a federally funded public transportation program, and also a unique commitment to individuals, helping them reach the first rung on the ladder of the American dream. Community and public transportation were instrumental in helping to end welfare as we knew it. As part of this testimony, we have selected several communities, such as Chattanooga, Tenn., and Santa Clara County, Calif., to spotlight specific success stories in helping Americans get to work.

● **Chattanooga, Tenn.**

The Chattanooga Area Regional Transportation Authority (ARTA) used multi-year Job Access and Reverse Commute program funds to expand transit services that connect low-income people with jobs in both rural and urban parts of Hamilton County, Tennessee. Hamilton County includes the city of Chattanooga and surrounding suburban communities rich with entry-level employment opportunities.

Through the Job Access program, and funds from the Departments of Transportation, Human

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 11*

Services and Labor, CARTA sought to fill gaps identified in a regional study on transportation needs, a study that incorporated many neighborhood meetings designed to get input from riders and potential riders in low-income areas. Job Access funds enabled the system to expand service on five fixed-route bus routes to improve the availability of transportation to residential neighborhoods. CARTA extended these neighborhood routes to operate up to 19 hours a day in order to accommodate those working earlier and later shifts and on Saturdays.

The regional provider also was able to improve transit service to employment corridors in suburban areas. As with the neighborhood routes this service operates 19 hours a day and provides frequent service: every 10 minutes morning and afternoon peak, every 20 minutes mid-day and every 30 minutes during evening hours. CARTA also used Job Access funds to purchase vehicles for a new vanpool service to be operated by Special Transit Services, a private nonprofit specialized provider. These funds were also used to acquire a new vehicle for Hamilton County Rural Transportation so it could add a flexible employment transportation route from a suburban residential area to jobs in a neighboring city.

CARTA also initiated a travel training program at a rehabilitation hospital so that people with disabilities could learn to ride on fixed-route buses, and implemented an integrated fare and transfer fare systems with the Hamilton County Rural Transportation Service, for service between the rural demand-response routes that link with CARTA fixed routes.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 12*

CARTA's Job Access expansions helped Aimee Nelligan, a mother of seven who had been on welfare for years, to gain employment in a commercial district that was previously inaccessible from her low-income public housing community. Prior to the change in routing, this 15-minute trip took over an hour, was not possible past 5:00 p.m. on weekdays or on Sundays. The trip is now available from 4:55 a.m. to 11:45 p.m. Mondays through Saturdays and from 11:30 a.m. to 7:45 p.m. on Sundays.

Another CARTA rider, George Bryan, a father who works in a restaurant in a regional mall, is able to take a Dial-A-Ride Neighborhood Route with his children, see them dropped off in front of their elementary school, and then transfer to a Main Line route and continue on to his place of employment. CARTA's Neighborhood Routes were instituted after consultation with the system's riders, job training, human service, and employment agencies during the Job Access planning process. At least three other sets of parents and children have ridden to work and school together during the three years this route has been in existence.

As a result of Job Access-funded expansions, CARTA created 64 added stops within a half-mile of employment sites with the two new routes, and 271 new stops within a half-mile of employment sites during times not previously served – that is, late night and evening. The regional transit agency was also able to reach more than 2,000 employers and 20,000 entry-level jobs, add 1,400 new stops within a half mile of residences of welfare recipients, and reach 65

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 13*

child care facilities with capacity for 2,200 children within a half mile of new stops.

Overall, ridership on expanded routes has increased 15 percent since the Job Access projects began in 1999. CARTA services now reach 67 percent of Hamilton County's welfare recipients and their families who are within a half-mile of CARTA services. The system has provided more than 12,000 fixed route trips on five new and expanded routes and more than 7,000 child care demand-response trips.

● **Southeast Missouri**

The Workforce Investment Board of Southeast Missouri is using funds from the Job Access and Reverse Commute Program along with a match of U.S. Department of Labor Welfare-to-Work dollars to provide transportation services in Southeastern Missouri. This service area covers seven of the most impoverished counties in the state, and most are very rural.

The Missouri Bootheel Transportation Program, as the project is called, creates an opportunity for residents to go to work at sites they normally would not be able to access. Some of these job sites are located out of state in northwestern Tennessee and northeastern Arkansas, where the job market is richer.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 14*

Workforce Investment Board staff work with area transportation providers to set up routes to select employment sites. Workforce staff target employment opportunities for clients that meet strict criteria: jobs are in the \$8.00 per hour range, workers receive benefits, and working conditions are safe. Staff assist their clients in obtaining positions and guarantee them a way to reach these targeted job sites. The Workforce Investment Board contracts to provide transportation services with county and regional rural transit providers and one private operator. The transit providers carry individuals from central locations convenient to their homes, such as public housing community buildings and churches, to employment sites.

The Workforce Investment Board and the Missouri Department of Social Services support half of the operating budget with federal Welfare-to-Work funds and TANF funds, respectively. The JARC grant covers the balance of the operating budget. In addition, the contracted transportation provider uses vehicles made available under the rural transportation program.

On first day of work at Proctor and Gamble, one rider describes his experience: “The bus picked me up down the road from my home. This was very convenient for me. Knowing that the bus would be there every morning to pick me up gave me the will to get up and get dressed to go to work. They expected me to be there. I would feel guilty if they came to pick me up and I didn’t go. I enjoyed the encouragement I got from others on the bus on the way to work and after a hard day’s work. They knew exactly what I was going through because they were going through the

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 15*

same thing. My family gained respect for me and supported me too. It's nice knowing there are people behind you. I would love to see other projects like this one so that others can be helped the way I have been. There are lots of people in rural areas who haven't worked before, and just receive assistance from the state because the job opportunities are not good where they live. Not only has the transportation helped us financially, but it has also helped my self-esteem 100 percent. My dream is to one day be their bus driver; maybe give back a little of what was restored in me – HOPE!”

Bootheel staff undertook an intensive outreach program to find the riders for the transportation services. This outreach program has been compared to a grassroots voter registration drive in that job developers and other partners set up outreach booths in public housing communities, church basements and anywhere else where the targeted populations spend their time. This outreach allowed individuals without transportation to come in and apply for jobs and register for transportation services.

Staff also market the program, its services and successes within the community-at-large, communicating that this program is taking people to locations they could not otherwise have gone and that it is creating a new opportunity for job development and economic development. With Job Access funds, Missouri Bootheel has been able to provide rides to over 700 individuals in the past year. It has allowed individuals who have never worked to go to work and go off of

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 16*

public assistance. Currently, about 160 people a day are riding the vans, taking workers to approximately 10 employee sites.

Bootheel's project manager has attested to the Job Access program's success: "Many long-term welfare recipients have become company people with benefits, vacation and an income to support their family. People who had very little hope for the future now have an opportunity to work because of transportation."

The Bootheel transportation program also benefits other members of the community. For instance, area rural transit providers have increased the number of riders on their services due to the contracts with the Southeast Missouri Workforce Investment Board.

Additionally, the transportation program has given employers an opportunity to tap into a new job market that was not previously available to them. Since the transportation service brings new employees from other counties and other states, employers have found a new and valuable labor resource. For example, the Tyson poultry plant currently employs approximately 80 of Bootheel Transportation's participant riders and continually gives the Workforce Investment Board orders for new positions. Lastly, with more families earning steady incomes, the Bootheel transportation program has also benefited the local economy.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 17*

Another success of the Bootheel project has been tackling a challenge that comes with the territory of workforce development: job retention. Bootheel staff and employers created techniques to help employees who were riding the vans stay in their jobs. Among the techniques include: free bus pass vouchers, stipends, raffles and leadership trainings.

● **Santa Clara County, Calif.**

Santa Clara County, California, home to Silicon Valley high-tech, manufacturing, construction, trade and service industries, offers a range of employment, training and educational opportunities to welfare recipients and other low-income people. However, these opportunities are just out of grasp for those who cannot access them. While there are a myriad of transportation options available in the Silicon Valley – a countywide bus and light-rail system, intercity and commuter trains, a host of shuttle services, and connections to out-of-county transportation – their routes and schedules do not always match the mobility needs of low-income workers.

A Santa Clara public/private partnership responded to this transportation gap when it formed the Guaranteed Ride Program (GRP). GRP offers CalWORKs (California's Temporary Assistance for Needy Families program) participants and other low-income individuals a short-term transportation service should they need a back-up ride. GRP is a temporary, transitional service that provides participants with up to 60 rides to work-related destinations, including childcare

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 18*

and school. Job Access and Reverse Commute funds support this service, along with CalWORKs funds from the county Department of Social Services. GRP provides its door-to-door service 24 hours a day, 7 days a week.

Many of the nearly 2,500 enrolled Guaranteed Ride Program participants have used the service to leave work to pick up a sick child, get home after working beyond the operating hours of area transportation services, access a job interview or training site, or reach a job when one's car is disabled. Since its inception, GRP has provided more than 60,000 trips to CalWORKs participants and other low-income riders.

OUTREACH, a private nonprofit that provides outreach and support to Santa Clara County senior citizens and people with disabilities, operates the Guaranteed Ride Program. As the community based transportation broker for the Santa Clara Valley Transportation Authority, OUTREACH takes advantage of its expertise in the transportation field, particularly serving people with disabilities, and the technology it routinely uses to schedule trips, track vehicle locations and map travels patterns and needs.

Peggy was already a passenger on OUTREACH's ADA service when she enrolled in the Job Access-sponsored Guaranteed Ride Program. She used the program for free rides to employment training and job interviews, saving the monthly transportation assistance from the county for

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 19*

ADA service. Peggy now has a part-time job and continues to look for additional employment. She feels that the program served her needs very well, and in her words, this helped, "make an incredible difference for people who have no other options."

Another rider enrolled in the Guaranteed Ride Program while attending a local Community College. Like all GRP clients, she is able to take her children to school and childcare on her way to college. Taking advantage of this program simplified transportation for her family while she completes her education.

As part of the Guaranteed Ride Program, OUTREACH staff provides individualized transportation planning service, promoting job access, retention and self-sufficiency through one-on-one management of client mobility needs. County social service and workforce development staff participate in ongoing training to understand the various transportation options available, including GRP, and how to help clients learn about and obtain long-term transportation solutions. Multilingual transportation resource guides are available to CalWORKs participants and agencies, and transportation resource centers have been established in four of Santa Clara County's one-stop centers.

"Simply stated," adds OUTREACH Chief Executive Officer Kathryn Heatley, "The Guaranteed Ride Program expands effective existing resources to reduce transportation barriers and increase

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 20*

accessibility for CalWORKs participants.”

- **Allegan County, Mich.**

Lack of public transit prevented many residents of Allegan County, Michigan, a large rural area bordering Lake Michigan, from securing jobs, and subsequently, prolonged their reliance on welfare and other government services. The transit service created in 2000, however, provided new connections. With investment from the Job Access and Reverse Commute grant program, Allegan County is now meeting employment transportation needs with benefits that have reached many of the county’s low-income, including employees with disabilities.

The new service – funded with Job Access dollars, matching funds from the Michigan Department of Transportation and Family Independence Agency, and operating dollars from a fee-for-service contract with the Allegan County Community Mental Health and Work First – offers transportation to jobs and other destinations Monday through Friday from 5:00 a.m. until midnight. Allegan County Transportation rolled out its Job Access operating with two vehicles donated by the Community Mental Health and Allegan County Resource Development Committee. Currently, the system runs six vehicles, four of which are lift-equipped. While the service is demand responsive, Allegan County Transportation offers subscription service for regular commuters, and will deviate out of its service area on request. In addition, drivers will

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 21*

pick up passengers who flag down the bus at stores and other locations.

Shannon is one beneficiary of the new Job Access-funded Allegan County Transportation service. Shannon gave up her driver's license when her epilepsy started to impair her driving abilities. As a respite from walking to and from work, she began taking Allegan Transportation. She learned about the service from her mother and her Family Independence Agency caseworker. Prior to the service, Shannon would walk to and from her job in all weather conditions and in the early morning darkness. After being followed by an unknown man one day at 4:00 a.m., Shannon began taking rides to work from her co-workers. Today, Shannon's new husband drives her to work and the Allegan bus takes her home after a stop at day care to pick up her child. Shannon says her job provides her with steady employment and keeps her busy.

Over the past year, Allegan County Transportation has carried an average of 1,200 passengers a month. Sixty-five percent of these riders are people with disabilities, most using the service to reach jobs both in and out of the county. These employment destinations are largely in the service industry at hotels, restaurants, stores, gas stations and other locations.

● **Rhode Island**

The Rhode Island Public Transit Authority (RIPTA) has started an employment transportation

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 22*

service for people with disabilities using Job Access and Reverse Commute funds from the Federal Transit Administration. RIPTA has implemented five flexible service demonstration programs in Rhode Island's low-density suburban and rural communities that provide disabled individuals with a reliable zoned-based system. Called Flex Service, this program takes riders to work and other destinations in their community. Passengers can also travel outside their communities using Flex Service, then transferring to RIPTA's specialized service.

The need for Flex Service became apparent when a statewide survey revealed the unmet work-related transportation needs of Rhode Island residents with disabilities. The results showed that 20 percent of the respondents lived in the five suburban and rural areas of Woonsocket, Coventry, West Warwick, Narragansett, or Westerly; 81 percent of those people found reliable transportation an obstacle to accepting a job. For these people, transportation services are key to employment and self-sufficiency.

Maria, who is visually impaired, has been using RIPTA's Job Access-funded Flex Service to get to work for about a year. Flex Service picks her up in front of her house and brings her to work at two different nursing homes. Her hours and work location vary each day of the week, but a standing reservation with RIPTA meets the mobility needs of a variable work schedule. Without the service, her husband would have to drive her to work. Because their work hours don't match, Maria would not have the flexibility her position currently requires. When asked about Flex

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 23*

Service, Maria reported, “The new system is great! It costs less and the door-to-door service is wonderful. Thanks to all who made it possible.”

As a wheelchair user, Martin qualifies for ADA complementary transit service. His job as a customer service representative, however, is located a mile outside of the 3/4-mile service corridor. The situation forced Martin to take a taxi from the edge of the corridor to work. Not only expensive, taxis in the area were not wheelchair accessible, and the trip was so short that he was having difficulty getting the taxi companies to provide the trip each day on a timely basis. He began using Flex Service the day the service started, and, in combination with a ADA bus, has been using it to get to work each day for fourteen months.

RIPTA is providing 160 trips per month to people with disabilities, who use Flex Service to get to work and other destinations such as shopping at the local mall. Passengers take transportation from any one of the five Flex Service locations and transfer to RIPTA’s paratransit service to go to the Amtrak station in Providence.

Voices from the Community

As mentioned earlier in this testimony, there are unique connections to individuals that we don’t usually find in federally supported transportation programs. We were able to gather information

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 24*

from some of these individuals to better articulate the different kinds of economic impact that these services make.

“People Who are Ill Need Transportation”

Dorothy Bougie is 73 years old, and lives in rural Alfred, Maine. Her home, in which she’s lived for the past 50 years, is somewhat isolated in the southern-most part of the state, about 40 miles southwest of Portland.

Three times a week, Dorothy heads to Sanford for dialysis. She’s been a dialysis patient for three years now. Up until recently, Dorothy still drove anywhere she needed to go, including to her dialysis treatments. But then she had an accident, totaling the car. She bought a new car, and then had another accident, totaling another car.

“I got a lecture from my son when I had the second accident,” says Dorothy. “He made me feel like a highway menace. But I did think that, perhaps, it was a sign that I shouldn’t be driving. Problem was, there was no other way to go.”

Dorothy doesn’t qualify for Medicaid, as her income puts her just over the limit. With her husband’s pension from General Electric and Social Security, her modest income makes her

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 25*

ineligible for Medicaid, which she's come to learn is a distinct disadvantage.

“The people who make the rules in Washington - and in Maine - they should focus on the need and not the income guidelines,” says Dorothy. “People who are ill need some transportation if they need it.”

Thankfully for Dorothy, just when she couldn't figure how to get around anymore, she found a solution. She had begun to really hate having to ask neighbors and friends for rides, most of whom are as old as she and experiencing their own medical challenges. What's more, her two sons live too far away in New Hampshire and Connecticut, and there was no church service to provide the service.

Enter the York County Community Action Agency in nearby Sanford, riding to the rescue offering a regular trip to dialysis

“The service is great and I was getting desperate. You know, the only good thing about dialysis is that if you ever decide that you just can't deal with getting there anymore, you've only got five days before you lapse into a coma,” says Dorothy.

But more than anything else, Dorothy has grown to learn just as critical mobility is to both her

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 26*

independence and quality of life.

“Living in my home is important to me,” says Dorothy. “It’s peaceful and quiet and the idea of moving into one of those... facilities where everyone just sits around and complains, well, it’s not for me.”

“How to Get Around?”

The car wreck was enough. James Mearnf, 69, of Clarksburg, W.V. (in the central part of the state) recalls. “I couldn’t feel the brake pedal, and I didn’t want to kill anyone.”

So he stopped driving two years ago. But that raised another quandary: how to get around? And for James, it was a matter of life and death because he is diabetic and has been receiving dialysis treatments at the local dialysis clinic about 15 minutes from his house.

His wife does not drive, and they both rely on Central West Virginia Transit Authority (CWVTA) for much of their transportation needs.

“You can’t beat it,” says the former Sports Editor of the Clarksburg Exponent who also spent 30 years as a social studies teacher. “I’d seen the vehicles around town for years but never really

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 27*

knew what they were doing. Now I rely upon them.”

Besides allowing James to access life-sustaining dialysis treatment, the transit authority allows him and his wife to get just about anywhere they need to in the county.

“People who have readily available transportation take it for granted. But you like to get out a little bit,” says James. He also adds that community transportation services have helped him and his wife remain in the house they have lived in for the past 36 years, which to him is crucial.

James acknowledges that they are fortunate to have such services available at a reasonable cost.

“It’s a really great help to our overall quality of my life. Without it, I couldn’t take part in anything at all.”

“You Have No Choice”

“After four hours hooked up to that machine, you’re pretty weak,” says Norman Naimey, 72, of Cape Elizabeth, Maine, about his thrice-weekly dialysis treatments in nearby Portland. “I used to drive, but it just go to be too much.”

Norman knows that it’s hard for most people to understand what it means to be dependent upon

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 28*

dialysis to stay alive. The four-hour treatments leave him weak-legged and terribly chilled. But he knows that literally he has no choice.

Today, Norman relies on Portland's Regional Transportation Program to get to his dialysis. It is an agency for which he has much admiration.

"I really depend on the Regional Transportation Program; it helps my wife and me remain independent and it's helping to keep me alive," he says.

"When you go on dialysis, you pretty much go on for life. And you go three times a week, period. You can't put it off. You can't postpone it. You have no choice," says Norman.

What the local transit program does three times a week, according to Norman, is save his life and help maintain his independence.

"I don't have to worry about transit at all now. They get me there and back," says Norman. "I'd like to see the system get some newer vehicles. The small bus I rode yesterday had 175,000 miles on it."

"I Don't Know What We'd Do"

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 29*

Eloise and Donald Beuhring live in Huntington, W.V., not far from the Kentucky and Ohio borders. Married since 1945, the couple had retired to Florida, but returned to West Virginia to be closer to family and the help they could provide.

Eloise, 79, has been on dialysis since December 1997.

“I used to drive her myself, but I can’t do that anymore,” says Donald, an 82-year-old former postal worker and WWII veteran. Physically, Donald can no longer manage to transport Eloise, who requires the use of a wheelchair. They now rely on the Wayne County Transportation Authority to access the treatments that keep her alive.

Unlike Medicaid, which the Beuhrings are not eligible for, Medicare does not cover the cost of transportation to and from dialysis treatment. If it weren’t for the services provided by Wayne County, Donald says he and Eloise would have few options.

“I don’t know what we’d do. We’d have to get help from somebody.” Their daughter works full time, but still makes time to help out with sorting their bills, do Eloise’s hair and “get her all prettied up,” according to Donald. But she would not be able to take the time off from work to drive Eloise to dialysis three times per week even if she had the physical ability, and Donald says the couple would not feel good about having to rely on neighbors.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 30*

Donald is grateful for the service provided for his wife by Wayne County Transit Authority.

“They do it very well; there’s nothing they could really do to improve. They do it very well.”

“I’d Rather Be Home”

“I’d rather be home, here with my wife and family,” says Benjamin Leighton of Windham, Maine. “Going into one of those senior homes just isn’t for me.”

But it seemed that remaining independent and in his own home was increasingly not realistic for Benjamin. Already reliant on portable oxygen, last August he was placed on dialysis treatments three times a week. At first, his wife drove him, but she soon underwent surgery on her arm that made driving unbearable. Thankfully, a nurse and a social worker had both spoken to Benjamin about transportation through Portland’s Regional Transportation Program.

“Thankfully, I knew about the transportation, so they were able to set me up with a volunteer driver in his own car, who takes me and another gentleman from Yarmouth down to Portland for treatments,” says Benjamin. “He’s an 80-year old former World War II fighter pilot in amazingly good health.” All told, the trip is 45 minutes, one-way.

“Some people I know are able to drive after dialysis, but I really don’t know how they do it,”

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 31*

says Benjamin. "I'm right dead after it."

For Benjamin, the only problem he's had with his transportation is that the ride down to Portland often aggravates his bad back, and then he has to sit in the chair for dialysis for four-to-five hours. But he's hesitant to complain too loudly.

"Hey, I can't complain because I had no other way to get there and their trip is much better than nothing," he says.

"It's Saving My Life"

When told that some areas of the country don't have the kind of community transportation she relies on to get to her dialysis treatments, Sylvia Thompson's reply was simple: "Tell them to get it. It's saving my life."

Sylvia, like many dialysis patients, suffers from diabetes and has not been able to drive for over two years. She cannot get into or out of the car and receives door through door transportation from the Wayne County (W.V.) Transit Authority.

Three times per week she makes the nearly 80 mile roundtrip to the dialysis clinic for the

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 32*

three-to-four-hour treatments that remove toxins from her blood and keep her alive. The treatments, however, take a toll.

“By the time it’s done, I’m ready for bed,” says Sylvia. She has been doing this for the past year.

Sylvia is 72 and has lived in her current home with her husband Clifford for the past 22 years. She recently became eligible for Medicaid and it covers the cost of her dialysis transportation, which Medicare did not.

“The van service is wonderful,” says Sylvia. “The drivers are excellent. They come no matter what the weather... I couldn’t be treated any better.”.

Sylvia also notes that “a lot of people rely on Wayne Co. Transit for cancer treatment and things like that.” She says, “I don’t know what would have happened if they weren’t there.”

“Transit is Something Great”

Randall Pierce lives 10 minutes from the dialysis center that he must visit three times per week, but since he can no longer drive, the distance might as well be 1,000 miles.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 33*

He lives with his wife in Clarksburg, W.V. A former heavy equipment operator, Randall is paraplegic and has been on dialysis for a year and a half. He had to stop driving his own lift-equipped van last year because of medical complications exacerbated by driving, and his wife tried driving him to his treatments - but that interfered with her job. The Central West Virginia Transit Authority (CWVTA) now helps Randall access dialysis.

The transit authority also allows Randall to go other places when his wife is not available to drive him. "It's county-wide transportation," he says. "They have many lift-equipped vehicles."

To Randall, and others with similar needs, community transportation is "Something great. Especially in the more rural counties."

An Avoidable Tragedy

Our final story is too real. A veteran of the Korean War, a decorated sailor who reached the rank of Ship's Serviceman, Third Class, recently died in Shelburne Falls, Mass. He was 68 years old, and he was ill - his kidneys were failing and he needed dialysis treatments three times a week.

"He'd still be alive today if he had adequate transportation," says Leo Parent, director of Veterans Services with the Central Franklin County (Mass.) District in Turners Falls.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 34*

This gentleman - whose name we will not use out of respect for his privacy - lived too far outside the service area of any public or community transit systems and didn't qualify for Medicaid.

The veteran used to drive himself the 10 miles, one-way, to his dialysis appointments on Tuesdays, Thursdays and Saturdays. This much we know, because it was the local police department that first notified the local Veterans Administration that some alternate form of transportation was necessary. According to the police, he was simply too weak to safely drive home from his four-hour dialysis sessions. A home health care worker agreed, noting that the veteran was at-risk for automobile accidents and falls. They were forced to take away his driver's license.

"Now I can't go anywhere, I'm stuck in this house," says Parent, recalling the gentleman's reaction to having his driving privileges revoked.

The VA contracted with a driver to take him into Greenfield, Mass., and for a little while all seemed well. But officials with the VA didn't realize that she, too, was ill and uncomfortable driving in the snow and ice that is inevitable in Western Massachusetts in the winter. Sometimes, when she couldn't take him, Parent himself would actually go and get the veteran and take him to dialysis.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 35*

“He didn’t want to call and be an inconvenience,” recalls Parent.

Tragically, the volunteer driver died of her illness, and the veteran was stranded once again, this time with dire results. Parent estimates he missed two-to-three weeks of treatments before the VA could contract with a local taxi company to reinstate the life-saving transportation services.

He died, not long after, from complications that most assuredly arose from his missing dialysis. He died for a lack of transportation.

“If our vets don’t drive, then it’s a serious transportation problem, particularly in the rural areas of Western Massachusetts,” says George Ponte of the Veterans Administration office in Northampton, Mass. “We need to find the resources to make sure this doesn’t happen again.”

Dialysis patients are not the only ones in dire need of transportation. The recent health care trend of increasing outpatient services, coupled with the overall aging of the American population, make for a serious disconnect. How to get people to continuing and life-saving care they need? Public and community transportation are the only answer

There is a price for progress – and there is a bottom line for transit investment. Your number, the numbers in S. 1072, represent our bottom line for assuring transit’s robust ability to respond

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 36*

to our nation's needs.

According to the research firm Cambridge Systematics, "Every \$1 billion invested in public transit capital projects generates 30,000 jobs, and the same amount invested in public transit operations generates 60,000 jobs. The return on investment could be as high as 9 to 1." (source: APTA, "The Economic Importance of Public Transit," November 2003). Another APTA paper, "The Benefits of Public Transportation: Essential Support for a Strong Economy," cites similar work by Cambridge Systematics, with local economic benefits ranging up to \$6 billion in benefits for every \$1 billion invested.

In the FY 2005 budget request, President Bush, Secretary Mineta and Administrator Dorn are requesting that Federal Transit Administration programs be funded at \$7.3 billion for a third consecutive year. During this same period, inflation is averaging 2.0 percent a year, and the passenger Transportation Services Index, as reported by the Bureau of Transportation Statistics, has been slipping at an annualized rate of 3.5 percent per year. Keeping the transit program on frozen ground, as the Administration proposes to do, will only lead to further degradation of our nation's public transportation infrastructure and will erode the transit ridership gains that we, APTA and FTA all were so proud to share with the Banking Committee in our past years' testimonies.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 37*

We know it is common to attack S. 1072 and legislation that seeks to close the gap between our needs both to maintain and expand transit investment by calling these efforts as pork barrel spending, budget busters, extravagant, or unnecessary.

These attacks ignore the information gathering of the last two years that started when this committee took its first reauthorization testimony, and it ignores the information contained in the Administration's own Conditions and Performance Report, all of which tell us that we must invest, or else we settle for the degradation of the existing infrastructure that continues to serve the American people.

At current dollars, the Administration's Conditions and Performance Report estimates it would take a total of \$89 billion over six years simply to maintain the current public transportation infrastructure, or \$124 billion to improve the nation's transit infrastructure in ways that address its present demands. If the federal government's share of these investments were to continue at 80 percent of project expenses, the Administration's numbers suggest that a 6-year authorization bill's totals for FTA programs should be between \$71.0 and \$98.9 billion.

That's why S. 1072 and its proposed investment are so important.

We need the level of investment in the Senate Bill to increase public transit access for America's

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 38*

rural communities.

We need the level of investment in the Senate Bill to expand transit's capacity to help our senior citizens and help them cope with the continuing use of outpatient medicine for their health care.

We need the level of investment in the Senate Bill to help Americans return to full employment.

We need the level of investment in the Senate Bill to reduce congestion and making going to work faster and more efficient for all Americans.

We need the level of investment in the Senate Bill as an incentive to encourage state and local governments to do their share in making their commitment to transit's future.

We need the guarantees for investment that are found in your bill to give us the same kind of success we've seen from the guarantees Congress provided in TEA-21 which are highlighted above in this testimony.

And we need the investments in S. 1072 to maintain the capacity of transit that we continue to require in light of the uncertain implications caused by natural and unnatural disasters. TEA-21 is recognized today as a great success in transit and in highways. Your bill builds on this success.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 39*

We know that inevitably there will be a bill passed in the House of Representatives that will require conferencing with the work of the Senate.

We hope that your representatives will continue to uphold the important elements of S. 1072 as those efforts are joined.

Lastly, Mr. Chairman, in light of the recent events that have occurred since S. 1072 was passed, we hope that in that conference both the Senate and the House might consider improving transit's capacity to further respond to a natural disaster or a major terrorist attack.

Part of this improvement should include the establishment of National Reserve Fleet of transit vehicles and rail cars, stockpiled for use in local communities should the need arise.

This fleet, kept in a fully operational standby status would be able to respond to emergencies as needed. We also believe that some indigenous fueling capacity for this fleet should be developed, as well as a stockpile of common transit fuels provided for not just its use, but for transit's general use in an emergency. In light of the New York experience, we also think that a standby reserve of ferry boats for use in emergencies should also be given full consideration.

And, we believe that this fleet should be created in addition to – and not at the expenses of – the program you envisioned in S. 1072.

*Testimony: Dale J. Marsico, CCTM
Community Transportation Association
March 25, 2004, page 40*

I want to close by thanking you for your leadership, your recognition of transit's role and potential for our country – but most of all for making S. 1072 the right first piece of transportation legislation to be passed by either House of Congress in the 21st Century.