

Governor Snyder's Special Message on Aging 2014

Western U.P. Regional Transit Mobility Report, Part 1

Documentation of Current Knowledge and Conditions

Prosperity Region 1a



This report is the first of three deliverables in response to Governor Snyder's 2014 Special Message on Aging. The report serves as a baseline for understanding the current status of regional transit service delivery in the Western U.P., Prosperity Region 1a.

WUPPDR has worked extensively with the region's public, private, and nonprofit transportation providers over the past several years. The public transit agencies have also long complemented each other to address unmet needs in the region. Many of the agencies were formed around 35 years ago and have grown and learned from each other.

WUPPDR prepared a three-county Coordinated Human Services – Public Transit Plan in 2011. As an offshoot, WUPPDR developed and launched a transportation resources website in 2013. The website, www.getaroundwup.org, can be used as a supplement to this report for further provider information.

On March 17, 2015, WUPPDR staff met with public transit agencies and MDOT Planning and Passenger Transportation staff to 1) discuss the current status of transit in the region and 2) learn more about the availability of information pertaining to transit in the region. Other transit agencies that provide services primarily to senior citizens and persons with disabilities, were invited but did not attend the meeting. This meeting and subsequent follow-up discussions resulted in excellent feedback from transit providers and provided the necessary information to profile existing regional transit in the Western U.P.

Most counties in the Western U.P. are fairly self-contained in meeting residents' everyday needs. However, it is important to note that the region's larger cities do generate regional ridership needs for special, occasional trips like major shopping and medical care. Where residents' needs are not met within their counties, transit providers do their best to accommodate riders on a case-by-case basis, but their ability to do so is hampered by the limited resources available.

Demographic and economic forces are making it increasingly difficult to provide effective transit services. The overall population and its corresponding tax base in much of the Western U.P. is declining. This issue is compounded by the fact that the part of the population most in need of services is increasing due to aging and disabilities, departure of caregivers, and in-migration of retirees in spite of the general population decline.

Increased funding is needed to address these structural changes. The transit authority, county, and cities that currently provide public transit service have been able to generate some local subsidies, using millages and other tax revenues, and there is opportunity for other agencies and jurisdictions to do the same. These funds give the local agencies "skin in the game," but there are limits to what they can do in the face of myriad mandates to both the state and local residents. Transit agencies also need support to

purchase office equipment and communication radios, in addition to buses which are already fairly well-funded. Additional state and federal funding to meet these needs would be welcome.

Following are WUPPDR's responses to the guidance provided by MDOT for this report.

1. What is known regarding the existence of regional transit mobility in the area – specifically, are existing transit services configured and operated (formally or informally) to facilitate trips across county or transit service area lines?

a. Public Transit

- i. *Baragaland Senior Citizens (BSC)*, Specialized Services provider in Baraga County, provides trips to four destinations outside of the county each once or twice a month.
- ii. *Gogebic County Transit Authority (GCTA)* and *On-Tran*, countywide public transit agencies, have interlocal agreements under which they occasionally transport passengers between county and agency lines. GCTA provides local and long-distance trips along linear routes spanning much of the county. On-Tran provides a regular monthly trip between Ontonagon (the county seat) and Houghton (regional shopping and medical hub) in addition to its regular service throughout the county. GCTA is also a ticket agent and provides bus shelters for Indian Trails intercity service, which county residents occasionally utilize to cross county lines for medium-distance regional trips, but scheduling for this purpose is inconvenient.
- iii. *Cities of Hancock and Houghton*, municipal public transit agencies, each travel slightly outside municipal boundaries on occasion, and have interlocal agreements to do so, but are restricted by the funding jurisdictions. Houghton Public Transit provides seven-mile commuter trips to persons with mental disabilities under contract with Goodwill Industries.
- iv. *Baraga-Houghton-Keweenaw Community Action Agency*, Specialized Services provider in Houghton and Keweenaw Counties, operates one weekly flex route between those two counties and transports passengers between outlying areas within Houghton County several days a week. Some connections are made between the Houghton/Hancock municipal transit service areas and other communities within the county. These trips are regional in nature.
- v. *U.P. Community Services (operating as Dickinson-Iron Community Services Agency [DICSA])*, Specialized Services provider in Iron County, offers limited services within a small cluster of communities in the county and offers one weekly fixed route between that area and Iron Mountain, a hub city 45 miles away in a bordering Region 1b county.

b. Long-Distance Medical Transportation

- i. Through its regular public transit, BSC transports residents to three medical hub cities outside the county, two of which are in Prosperity Region 1b. GCTA has agreements with numerous human services agencies and health plans to provide cost-effective medical transportation. The other public transit providers provide some medical destination trips as part of their regular operations but nothing dedicated to this purpose.
- ii. At least one publicly funded agency each in Gogebic, Houghton, and Ontonagon Counties dedicates a small amount of general funding to transporting passengers to distant medical facilities in private vehicles of volunteers.

2. Where are the gaps in regional transit mobility – i.e. is there a need that existing services are not meeting?

All counties need long-distance transportation to regional medical centers in Marquette and northern Wisconsin. Continued state support for shifting non-emergency medical transportation from specialized agencies (community mental health, Department of Human Services, Michigan Works!, health insurers, etc.) to public transit providers would improve availability and effectiveness. Michigan Transit Pool insurance coverage for out-of-state trips, which is currently not available, would make Michigan-to-Wisconsin travel possible, though for most agencies probably not feasible.

Ontonagon County has a particularly high need for transportation to larger hospitals outside the county (mainly in Hancock and Marquette [Region 1b]). This is a result of the community hospital's low level of service and long distance (1-2 hours drive) from other medical facilities.

No service is available in Iron County outside of the City of Iron River vicinity; this problem is regional even though it is contained within the county boundaries.

Travel within Houghton County outside of Hancock/Houghton is difficult. This is the county with by far the largest population outside of public transit service areas.

Where occasional inter-county services are already offered (especially between Hancock/Houghton and other counties), frequency increases may be warranted.

There is a possible need for increased service between population/economic centers in Houghton County and small communities in bordering Keweenaw County.

From time to time, extended hours of service – even, for example, 24/7/365 service in Ontonagon County for trips to casinos in other Western U.P. counties – might not be considered true needs. Meanwhile, Houghton Public Transit's evening service (until 11 pm) was discontinued in 2014 due to low ridership.

- a. **Is there sufficient information to list needs in priority order?** Yes, this is done above.
- b. **Is there sufficient information to categorize the need as one that can be addressed through:**

i. Increased coordination of transit providers?

There is sufficient information, but coordination is already strong, and few of the needs above could be addressed by improving upon it. One notable opportunity is that better coordination of Hancock and Houghton Transit with BHKCAA might reduce service deficiencies in outlying areas of the county. Also, development of fixed routes and a transfer point between the Cities of Hancock & Houghton would produce benefits but are not essential to facilitating intercity travel.

On the state level, the developing plan to route all non-emergency medical transportation requests through a central call center that will then give public transit agencies the first opportunity to provide the trips is good for coordination and efficiencies; however, transit agencies that are already stretched for funds have limited availability to provide additional medical trips and would require additional capital funding for vehicles, in addition to operations funding depending on fare revenues.

ii. Increased local transit service, either more service in existing service areas or new services in areas not currently served?

Access to regional service, particularly fixed routes, could be increased by improving local transit to origin and destination points. Shortcomings in local transit service are most prominent as follows: 1) Iron County needs new services outside of the Iron River area, and the Iron River area needs more service; 2) outlying areas of Houghton County need more service within and between communities; and 3) all of Keweenaw County may see some benefit from occasional services within or between the county's small communities.

iii. Other methods?

Opportunities for commuter transportation that could produce benefits but might not be considered needs include: 1) Job Access/Reverse Commute (JARC) in certain areas, such as Hancock/Houghton (should funding become available); and 2) routes connecting major employers in the region with employment bases outside the county/region (e.g. Baraga Correctional Facility).

As this report indicates, the deficiencies in regional and local transit in the region are well-known and have been for quite some time. The major impediment to addressing them is funding.

3. Can unmet regional mobility needs be categorized in relationship to unmet local needs?

Local and regional service go predictably hand-in-hand in almost all respects, and thus, categorizing does not seem necessary. Strong local service is a prerequisite for strong regional service. As earlier explained, regional transit is ineffective unless it is accessible to a large population through local service. That is, a point-to-point regional route does little good when only a relatively small part of the population has access to the origin. This relationship is an important consideration in potential development of long-distance medical transportation in particular.

The relationship of local to regional-level service is most evident when countywide is viewed as regional. Iron County is a prime example of this, and Houghton County is another such case, both as described previously.

4. Where information is insufficient to respond, what actions would be necessary to provide a response?

Although it appears sufficient information is available, the issues and priorities in this report are based mainly on feedback from providers and, indirectly, their existing riderships. Thus, a large-scale public opinion survey about transit in the region might be useful – one that is directed to a broad spectrum of the general public rather than current transit ridership. Some ridership surveys have been done in recent years, but these are not necessarily a fair representation of the needs of the population overall – and the general public is who pays the taxes that support transit. If support from the general public is evident, requests for increased funding might be more successful and defensible.

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