

STATEMENT OF
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Chairman Nelson, Ranking Member Collins, and Members of the Committee:

Thank you for the opportunity to discuss the Administration's efforts to address the transportation and mobility needs of today's seniors living in urban, suburban, and rural communities around the nation, and to anticipate the related economic and social challenges that an aging America poses for our nation as a whole. This is an issue that cuts across party lines and geographic boundaries, as the majority of us will one day confront the health care and quality of life issues that are a natural part of the aging process, even as many of us wrestle today with caring for an aging loved one.

Our nation is undergoing a significant demographic shift that will profoundly affect our policies and priorities for years to come. By 2050, the number of Americans aged 65 and older is projected to more than double, from 40.2 million in 2010 to 88.5 million in 2050, and in particular, the number of men and women 85 and older is expected to increase fivefold by mid-century. The states with the fastest-growing percentage of older residents over the next two decades will see that growth in both urban and rural communities, from California to Texas, Florida to Virginia, and Maine. The challenges facing this population are significant. For instance, U.S. Census data indicate that nearly half of rural elders live below 200 percent of the federal poverty level, compared to roughly one-third of urban residents. Many seniors combat isolation and struggle to obtain access to medical care and other vital social services, especially in geographically dispersed areas. And yet while many elderly people face similar challenges, strategies to address the needs of elderly populations in rural and urban settings are not identical; there is no one-size-fits-all solution.

The Role of Federally Coordinated Transportation to Address Elders' Needs

Challenges such as these require a carefully coordinated continuum of services at the federal, state, and local level, involving both public and private resources. Transportation, in particular, cuts across every aspect of elder care, from health care and housing to employment and social activities. Transportation is an indisputable lifeline for aging Americans in urban and rural settings alike, and is therefore a major focus of federally coordinated efforts. Nearly one in five Americans over the age of 70 does not hold a driver's license, and those who do drive benefit from enhanced road safety provisions that also protect the rest of the driving public. As older residents cut back on or relinquish driving, they still need to stay connected to their communities, access healthcare services, and other destinations. Transportation can foster livable communities, allowing residents safe and convenient ways to travel by automobile, foot, bicycle, and transit for everyone in the community regardless of age or ability.

The U.S. Department of Transportation (DOT) is committed to taking into account the mobility needs of aging Americans across its core programs and in coordination with other federal departments. Specifically, the Federal Interagency Coordinating Council on Access and Mobility (CCAM), which is chaired by the U.S. Secretary of Transportation, includes representatives from 11 federal agencies, including the U.S. Departments of Health and Human Services, Labor, and Education. The CCAM's mission focuses on developing and implementing initiatives that improve mobility and community accessibility for seniors, individuals with disabilities, and low-income individuals and their families. The CCAM's Strategic Action Plan encourages the creation and growth of coordinated transportation networks that provide streamlined access to health and wellness care, jobs, and community services. The plan's objectives range from improving health outcomes by enhancing coordination of transportation services to promoting local business, economic, and transportation partnerships on behalf of seniors, dislocated workers, and others seeking to rejoin the workforce and access economic opportunities and training.

The most significant CCAM-led outcome in the Obama Administration is the Veterans Transportation and Community Living Initiative. This initiative, launched in Fiscal Year (FY) 2011, and led by the DOT's Federal Transit Administration (FTA), in collaboration with the U.S. Department of Veterans Affairs, the U.S. Department of Health and Human Services (HHS), and the Department of Labor, benefits *all* users of public transportation resources, including veterans, people with disabilities, and seniors. It particularly addresses the Administration's challenge to improve access to jobs and services for America's military veterans and members of the Armed Forces returning from Iraq and Afghanistan, along with their families. The Veterans Initiative has committed over \$63 million in competitive grant funds for 86 innovative projects in 38 states, the Northern Mariana Islands, and Guam that help communities to develop or enhance one-call/one-click access to locally coordinated transportation services, ranging from fixed-route buses to on-demand paratransit taxi service.

For example, the Veterans Initiative awarded \$1.4 million to Lee County, Florida, to enable the installation of new information kiosks at a new Department of Veterans Administration outpatient clinic in Cape Coral and other locations, where veterans—many of them elderly—will eventually be able to readily obtain real-time information on transit rides and schedules, day or night.

Another important CCAM accomplishment is the United We Ride initiative, which improves the availability, quality, and efficient delivery of transportation services for older adults, people with disabilities, and low-income individuals and families. Established in 2004, United We Ride has been a driver of the movement toward inclusive planning of transportation services, pushing for communities to ensure that the people using these systems, including older Americans, have a say in how and where they are developed. Under FTA's direction, this high-profile initiative encourages states to integrate transportation and social service needs in major urban areas as well as improve citizens' access at the local level to federally funded programs such as Medicaid, aging assistance, workforce training, and other services. The initiative emphasizes coordination that cuts across providers. For example, if there is room for a Medicaid beneficiary on a bus or van operated by the local Administration on Aging bus or van (which in turn benefits from federal transportation dollars awarded to the state), the passenger can hop aboard.

CCAM members are also moving forward to help ensure that transportation assets are efficiently deployed to help evacuate those without personal transportation resources in times of emergency, and to clarify policies on vehicle sharing and cost sharing between federally funded agencies to facilitate collaborative use of transportation assets on the ground. Progress in this area is important in light of devastating disasters such as Hurricanes Katrina and Sandy.

Outside of the CCAM, at the DOT modal level, many efforts are under way to continue to adapt programs and policies to the needs and concerns of seniors. For example, the Federal Highway Administration (FHWA) is working to make roads safer for older users through various initiatives, including a revised design handbook specifically addressing the needs of older drivers and pedestrians, approving the use of enhanced fonts to increase legibility on road signs, and making roadway crossings safer for pedestrians of all ages and abilities. FHWA also encourages States and local planning organizations to use the full range of existing design flexibility to identify and adopt safe and convenient designs for all pedestrians and bicyclists, particularly in urban areas.

The National Highway Traffic Safety Administration (NHTSA) has also published draft guidance for states to use in addressing older driver safety, including guidance on driver licensing and medical review of at-risk drivers and collaboration with social services and transportation service providers. NHTSA has also solicited and received comments on potential modifications to the New Car Assessment Program, including comments on a potential Silver

Car Rating System for Older Occupants, which would help older people identify and select vehicles that would potentially be safer for them.

Progress to Strengthen Public Transportation Coordination and Access

FTA has long addressed the mobility needs of seniors as part of a broader strategy that seeks to invest in transportation choices to meet the needs of citizens at every stage of life. Indeed, activities addressing seniors' mobility management needs are eligible expenses under FTA's transit assistance programs, with an 80 percent FTA share. The remaining 20 percent in matching funds can be drawn from non-DOT federally funded programs that involve older Americans, Medicaid recipients, those with developmental disabilities, work force investment programs, Department of Housing and Urban Development (HUD) programs, Head Start, and more. Providing access to affordable public transit is especially important to the growing number of older citizens who prefer to maintain independence while remaining connected to their communities. FTA has funded a number of initiatives, and collaborated successfully with non-federal partners, to improve access to transit—and improve the coordination of federal, state, and local resources—in ways that benefit the elderly as well as other populations needing more and better access to transportation choices. These efforts leverage federal investments through private partnerships and cooperative agreements, with new and strengthened programs shaped by MAP-21.

MAP-21 Enhances Funding, Services for Disadvantaged Populations

MAP-21, the two-year transportation authorization that is effective through FY 2014, empowers FTA to implement many bold new policies that strengthen and streamline public transportation for the nation's most vulnerable populations, including the elderly. For example, MAP-21 provides \$28 million more in FY 2013 for the Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities Program than SAFETEA-LU provided in FY 2012 for the Section 5317 New Freedom Program and the Elderly and Individuals with Disabilities Section 5310 Program combined. Projects for this program are developed through a community-based, coordinated planning process that must involve older adults at the outset. Such activities are an eligible capital expense under FTA's transit assistance programs, with an 80 percent FTA share and the remainder from non-DOT sources. This program also leverages private-sector resources. For example, taxicabs that meet the Americans with Disabilities Act (ADA) accessibility requirements are now an eligible expense under this program. Accessible taxis offer many communities greater flexibility, and cost savings, over traditional transit agency paratransit service. In cities such as Houston, TX; Madison, WI; and Daytona Beach, FL, these services have been well received.

Under MAP-21, FTA also provides funding to technical assistance centers, including the National Center for Senior Transportation and the new National Center for Mobility

Management, both of which provide research and technical assistance resources to support transportation options for older adults.

In addition, FTA's 5311 Rural Areas Formula Grant program under MAP-21 increases spending on rural transportation by approximately 25 percent over the previous authorization (SAFETEA-LU), providing capital, planning, and operating assistance to in areas with fewer than 50,000 residents. Total funding is \$600 million in FY 2013 and \$608 million in FY 2014. The program includes \$60 million in funds over two years specifically for Tribal transit, which is also key to reaching elderly citizens.

Cooperative Agreements Strengthen Local Coordination, Innovation

FTA has further leveraged federal investments through local nonprofit partnerships with entities such as Easter Seals Project Action, whose mission is to promote universal access to transportation for people with disabilities, including the elderly. One of the most pivotal partnerships is the National Center for Mobility Management, which engages FTA with the American Public Transportation Association (APTA), the Community Transportation Association of America (CTAA), and the Easter Seals Transportation Group—all industry leaders in fostering and strengthening access to transportation choices serving diverse communities. This new Center will extend FTA's outreach by helping communities to adopt transportation strategies and mobility options that foster independent living, self-sufficiency, and promote healthy outcomes for older citizens and others. For example, the Center will develop a database that identifies and documents best practices on mobility management. It will also support FTA's grantees and other partners in adopting proven, sustainable, and replicable transportation coordination, mobility management and one-call/one-click transportation information services.

Through the United We Ride initiative, FTA also supports technical assistance centers such as the National Center for Senior Transportation, jointly operated by Easter Seals and the National Association of Area Agencies on Aging, and funded, in part, with \$1.8 million from FTA in FY 2011 and FY 2012. The Center is a collaborative effort with the HHS Administration on Aging and is instrumental in assessing the real transportation needs of older adults and delivering appropriate technical assistance and training (such as travel training, which helps seniors and others learn how to navigate their transit systems); volunteer transportation resources and training; and new tools and resources to connect seniors with accessible transportation.

Mobility Management

Mobility management improves customer service by developing partnerships among transportation providers to expand the range of viable transportation options within communities. Mobility management programs, funded by combinations of federal, state, local, and nonprofit resources, often target the needs of seniors, people with disabilities and low-income families.

FTA has a long-standing tradition of supporting the evolution and proliferation of mobility management programs.

The National Center for Mobility Management, referenced above, is the newest component of FTA's ongoing commitment to community-based mobility management programs that often target the needs of seniors, people with disabilities, and low-income families. The majority of FTA formula-based programs under MAP-21 can fund mobility management expenses, including, for example, one-call centers, travel navigators and trainers, and local trip-planning services. In FY2012, FTA programs provided over \$40 million in funding for mobility management projects—a four percent increase over FY 2011 funding of \$38 million. Since 2006, when mobility management became an eligible capital expense in FTA's formula programs, total annual spending for this activity has grown from just \$300,000 to over \$40 million. The impacts of these investments are both strengthening and extending FTA's reach and ability to improve access to transit services at the community level. For example, the effort has enabled APTA to work with CTAA on a five-year strategic plan promoting mobility management in the transit industry nationwide; develop a national education program and materials; and make a business case for local mobility managers. Today, there are over 400 mobility managers operating across the country. Over half the states are planning or implementing one-call centers in urban or rural areas.

Programs and initiatives such as these go a long way to help communities assess specific needs to fill gaps in transportation for seniors and others. Determining the appropriate range of options, based on demographic and socioeconomic needs of a particular community, is important to enhancing choices for all residents. The ride-sharing and volunteer driver programs that work in one community may not be the right fit for other communities where fixed-route service is abundant, as it is in urban areas. Very importantly, seniors and others simply may not know what services and transportation options are available to them and do not know how to connect to them. That's why we need to vigorously develop nationwide transportation one-call-/one-click centers that can successfully connect older adults and others to the rides they need. We need to continue advocating for the formation of these centers and use of technology, along with replicating the presence of mobility managers across the country.

By coordinating access to and information about transportation choices, reducing duplication of services, and generally increasing the efficiency of our transportation networks, FTA can help to maximize the impact of taxpayer dollars.

Barriers and Challenges to Future Progress

DOT has made tremendous progress working within and across agencies to improve coordinated access to transportation for seniors and disadvantaged populations, but barriers related to funding and coordination remain. With respect to coordination generally, in 2011, the Government Accountability Office identified 80 federal programs as having great potential to be

coordinated and maximized through the United We Ride initiative, to help “transportation-disadvantaged” populations. But there are legal barriers to maximizing this potential. In order to make the most of each federal dollar and reduce duplication of services, the various players in the transportation sphere, from any part of the federal government, should be required to take part in coordinated planning efforts guided by the populations served. That level of cross-cutting coordination is not now in place. Moreover, some human service agencies still do not coordinate their services with others. States, in particular, need to analyze these impacts on overall delivery of transportation services that older adults depend on. Only by truly working together can we make the most of our efforts. In the meantime, as a result of these barriers, many seniors may be left unserved or underserved, even if local transportation providers have the capacity to serve them.

Effective coordination is key to this effort, and will continue to require hard work at the local level to change traditions, attitudes, and relationships among the many community organizations and agencies that provide human service transportation. Fortunately, there are a growing number of states and local communities that have embraced this notion. DOT is committed to working with our partners at every level to share best practices and to help break down the remaining barriers to effective coordination. We want to maximize independence and economic opportunity by providing the most cost effective and most appropriate rides for those in need.

Our best efforts at coordination, however, are only successful to the degree that actual programs can be implemented and sustained. Notably, significant funding reductions beginning in FY 2013 have reduced FTA’s ability to promote transportation coordination through its technical assistance centers.

These funding challenges must also be viewed in the context of rising demand for public transit services, which are at their highest level in over half a century. In addition to making do with less, communities around the country continue to submit proposals for federally funded capital transit projects that far exceed FTA’s available resources; demand greatly outstrips supply. Additionally, the largest and oldest transit systems around the nation are in desperate need of billions of dollars in postponed maintenance and modernization. Yet as our population ages, we cannot afford the social costs of ignoring the transportation needs of older Americans. We must find ways to continue investing in transit services that provide safe, reliable rides. These are challenges that the executive and legislative branches of government must solve together if we are to preserve a lifecycle of services—and mobility choices—that Americans need at every stage of life.

We at FTA look forward to working with members of this special committee, along with our federal, state, and local partners, to meet the needs and address the challenges of America’s aging population.

Mr. Chairman, this concludes my testimony and I would be happy to answer any questions.