April 10, 2020

The Honorable Susan Collins  
Chair  
Committee on Appropriations  
Transportation and Housing Subcommittee  
United States Senate  
Washington, D.C. 20510

The Honorable David Price  
Chair  
Committee on Appropriations  
Transportation and Housing Subcommittee  
United States House of Representatives  
Washington, D.C. 20515

The Honorable Jack Reed  
Ranking Member  
Committee on Appropriations  
Transportation and Housing Subcommittee  
United States Senate  
Washington, D.C. 20510

The Honorable Mario Diaz-Balart  
Ranking Member  
Committee on Appropriations  
Transportation and Housing Subcommittee  
United States House of Representatives  
Washington, D.C. 20515

Dear Chair Collins and Price and Ranking Members Reed and Diaz-Balart:

On behalf of the Community Transportation Association of America’s nearly 1,400 members, comprised of non-emergency medical transportation (NEMT), rural, small-urban and specialized transportation providers, we are writing to you regarding the unprecedented challenges these vital community assets are facing during this COVID-19 pandemic.

We’d first like to acknowledge Congress for their leadership in including $25 billion for public transit in the last COVID-19 stimulus package. Thanks to the relief under the CARES Act, urban and rural transit agencies are beginning to recover the costs they're incurring in response to the pandemic.

As Congress works to craft the next COVID-19 relief package, we ask that you support: Operating funds for Section 5310 agencies, the addition of Section 5310 formula guidance into the expanded eligibility concepts included in the Section 5307 and 5311 formula programs, the creation of Medicaid waivers to meet social determinants of health, the protection of the NEMT benefit in the Medicaid Program and adjusted volunteer driver reimbursement rates.

As you may know, the 5310 formula program provides funds to safely and cost-effectively transport older adults, persons with disabilities, mobility management, contracts for provision
of transportation and other uses deemed appropriate by the Federal Transit Administration (FTA). Many CTAA members, along with their potential network of providers, rely on 5310 funds to serve the nation’s most vulnerable populations. We believe the following items should be taken into consideration when deliberating the next COVID-19 relief package, to offer financial and regulatory relief for Section 5310 recipients:

- **Flexibility in allowable expenses to maintain service by:**
  - Implementing social distancing, transit agencies have had to add vehicles and drivers to routes.
  - Increasing sanitization of vehicles, they’ve had to rotate vehicles more often.
  - Expanding the definition of disability to include those with autoimmune disorders who are not able to access essential services.
  - Contracting with an ambulance company that has PPE and training to provide rides of community members who are COVID-19 positive and/or need a ride to a testing facility.

- **Flexibility in the definition of service delivery:**
  - Mobility management – expand definition to include wellness checks. For example, calling customers the night before their ride to verify they are not showing symptoms of COVID-19. Social isolation will grow during the stay-at-home order. Expanding wellness checks for all customers will prevent the further spread of the virus.
  - Delivery of goods supporting at-risk populations – Requests are mounting for the delivery of goods; groceries, meals, food boxes, prescriptions and supplies. For example, a CTAA member in Portland, Oregon (Ride Connection) observed in their community that an ethnically specific partner teamed up with local Chinese food restaurants to provide 120 meals a day to clients that would otherwise visit their meal site. They need Ride Connection drivers and vehicles to deliver the meals.

- Temporarily relieve formula requirements for traditional/non-traditional split
- Reduce match requirements
- Fund administrative leave salaries for operations personnel
- Fund lost revenue due to COVID-19 public health emergency
- Fund purchase of personal protective equipment associated with response to the pandemic

Without the flexibility to utilize these funds during this crisis, systems are in jeopardy of significantly reducing (or even eliminating) services at a time when they are needed more than ever. In addition to these regulatory concerns, we estimate that $500 million is needed in Section 5310 operating assistance. This is urgently necessary as it would help these providers stay afloat. With this level of enhanced flexibility, along with operating funding, transit agencies and their nonprofit partners would be best suited to work quickly in order to help ensure that COVID-19 response and recovery reaches out to the vulnerable populations of older adults and individuals with disabilities.
CTAA members also rely on funds distributed from Medicaid. Medicaid is an essential and effective source of care for the most at-risk individuals in our country. The Medicaid NEMT benefit is an essential component of this critical safety net program, as it requires state Medicaid programs to provide necessary transportation for beneficiaries to access care and positively impacts an individual’s health care outcomes.

As COVID-19 continues to sweep across the country, NEMT providers are a part of the health care workforce that is on the front lines of the response. Those beneficiaries who rely on NEMT don’t have the luxury of deferring an appointment, like a dialysis session, or finding other transit options. NEMT providers and their partners are acting aggressively to ensure this vital service remains available while taking measures to prevent the potential spread of COVID-19. These measures include reducing the number of beneficiaries in multi-load transports, ensuring appropriate cleaning of vehicles as supplies exist, adjusting routes to account for health care facilities that may be accepting only those patients with the virus and supporting the overall response.

We recognize that COVID-19 will have significant short- and long-term consequences on these important Medicaid providers, as well as this critical safety net program itself. Further, we expect NEMT providers to be under significant stress, with resources, funding, and staff stretched to the limit. Many NEMT providers are facing new challenges around ensuring driver safety, costs of increased sanitation measures, and how and when to prioritize trips.

Given, these significant challenges, we ask that the following items be taken into consideration:

- **Creation of Medicaid waivers to meet Social Determinants of Health during the public health emergency.** The current crisis is creating increased pressures for critical services, particularly transportation, at a time when the supply of these services is being stretched. Allowing Medicaid, through the waiver process, to pay for basic services for vulnerable populations, such as non-emergency medical transportation, provides immediate assistance to beneficiaries in the community, while extending a new and needed financial stream to key community-based organizations and Medicaid providers that deliver these services.

- **Ensure the protection of the NEMT benefit in the Medicaid Program: Bi-partisan legislation that would authorize the NEMT benefit in the Social Security Act – including requirements for states to maintain programs to ensure appropriate use of the benefit – is pending in both the House and Senate, with a House bill recently clearing a key subcommittee. With our nation’s health care system straining to address the needs of COVID-19 atop of other demands, now is the time for Congress to act to ensure the NEMT benefit is available for Medicaid’s most vulnerable beneficiaries.**

Finally, many CTAA members rely on volunteer driver networks to cost-effectively assist in the completion of trips, as well to bolster their existing driver pools. We encourage you to consider
reimbursing their volunteers’ expenses at the IRS business mileage rate without incurring a tax liability for the volunteer. This would ensure that volunteer drivers would be offered appropriate incentives and allow many rural transit agencies to provide better, more cost-effective services.

In light of the above, we strongly encourage you to support additional operating funds for Section 5310 operations, the addition of Section 5310 formula guidance into the expanded eligibility concepts included in the Sections 5307 and 5311 formula programs, the creation of Medicaid waivers to meet social determinants of health, the protection of the NEMT benefit in the Medicaid program and adjusted volunteer driver reimbursement rates.

Attached to this letter are transportation agencies across the country that are supportive of these concepts.

If you have any questions, please don’t hesitate to reach out to me at bogren@ctaa.org or 202.247.1921. Thank you for your consideration and support.

Sincerely,

Scott Bogren
Executive Director

Cc: Senate Committee on Banking
House Transportation and Infrastructure Committee
River Bend Transit
Davenport, Iowa

Stanwood Community and Senior Center
Stanwood, Washington

Potomac Valley Transit Authority
Petersburg, West Virginia

Huron Transit Corporation
Bad Axe, Michigan

Southeast Missouri Transportation service
Fredericktown, Missouri

Sovereign Medical Transport
Oregon City, Oregon

Brookings Area Transit Authority
Brookings, South Dakota

Ripley County Transit
Doniphan, Missouri

Cottonwood Area Transit
Cottonwood, Arizona

Eras Senior Network
Waukesha, Wisconsin

Love’s House
Virginia Beach, Virginia

Tri-County Council for the Lower Eastern Shore of Maryland
Salisbury, Maryland

City of Cripple Creek
Cripple Creek, Colorado

Onslow United Transit System
Jacksonville, North Carolina

Access Johnson County Public Transit
Franklin, Indiana

Community Action Program Belknap and Merrimack Counties
Concord, New Hampshire

People’s Express
Whitmore Lake, Michigan

Healthy Generations Area Agency on Aging
Fredericksburg, Virginia

KI BOIS Area Transit System
Stigler, Oklahoma

Community Volunteer Transportation Company
Peterborough, New Hampshire

ComfortCare Transportation
San Antonio, Texas

KERT LLC
Tampa, Florida

Central Midlands Regional Transit Authority
Columbia, South Carolina

Calhoun County Senior Citizens Association
Blountstown, Florida

River Cities Public Transit
Pierre, South Dakota

Vermillion Public Transit
Vermillion, South Dakota

Fresno County Rural Transit Agency
Fresno, California

Macon County Transit Franklin, North Carolina

Interurban Transit Authority
Douglas, Michigan

Natchez Transit System
Natchez, Mississippi

Natchez Senior Citizen's Multipurpose Center
Natchez, Mississippi

Ames Transit Agency (CyRide)
Ames, Iowa

Heart of Iowa Regional Transit Agency (HIRTA)
Urbandale, Iowa

Sunset Empire Transportation District
Astoria, Oregon

Benzie Transportation Authority
Beulah, Michigan
Clovis Area Transit System  
Clovis, New Mexico

Keeping Families Connected  
Indianapolis, Indiana

RADAR/UHSTS  
Roanoke, Virginia

Brazos Transit District  
Bryan, Texas

Penquis C.A.P., Inc.  
Bangor, Maine

New River Valley Community Services  
Radford, Virginia

Transportation Lincoln County  
Lincolnton, North Carolina

Transport Central  
Plymouth, New Hampshire

VNA@HCS  
Keene, New Hampshire

Vermont Public Transportation Association  
Bennington, Vermont

Florida Public Transportation Association  
Tallahassee, Florida

Ellsworth County Council on Aging, Inc  
Ellsworth, Kansas

North Carolina Transit Association  
Greenville, North Carolina

HARTransit  
Danbury, Connecticut

People’s Transit  
Huron, South Dakota

Lincoln County General Public Transportation  
Lincoln, Kansas

Michigan Public Transit Association  
East Lansing, Michigan

Kennebec Valley Community Action Program  
Waterville, Maine

Prairie Hills Transit  
Spearfish, South Dakota

Southern Iowa Trolley  
Creston, Iowa

Solomon Valley Transportation, Inc.  
Beloit, Kansas

Kentucky Public Transit Association  
Louisville, Kentucky

Oklahoma Transit Association  
Oklahoma City, Oklahoma

Malheur Council On Aging And Community Services  
Ontario, Oregon

Frankfort Transit  
Frankfort, Kentucky

Creative Bus Sales  
Irving, Texas

Tulsa Transit  
Tusla, Oklahoma

MAGB Transportation, Inc.  
Fairview, Oklahoma

Minnesota Public Transit Association  
St. Paul, Minnesota

Ottawa County Transportation  
Minneapolis, Kansas

Mountain Express  
Crested Butte, Colorado

Colorado Valley Transit District  
Columbus, Texas

James River Senior Center and Public Transit  
Jamestown, North Dakota

ASBDC, Inc.  
Aspermont, Texas

Pennyrille Allied Community Services  
Hopkinsville, Kentucky

ROCS  
Wagner, South Dakota

Northeast Kentucky Community Action Agency  
Olive Hill, Kentucky
Middle Kentucky Community Action Partnership, Inc. Jackson, Kentucky
Harlan County CAA Harlan, Kentucky
RTEC Mount Vernon, Kentucky
Medical Motor Service of Rochester and Monroe County Inc. Rochester, New York
Sunset Home Inc Concordia, Kansas
Sussex County Skylands Ride/Transit Newton, New Jersey
Saline County Area Transit Western, Nebraska
Murray Calloway Transit Authority Murray, Kentucky
CT Association for Community Transportation Canton, Connecticut
Bluefield Area Transit Bluefield, West Virginia
Arrowhead Transit/AEOA Virginia, Minnesota
Imoveu Inc. Port Sainte Lucia, Flordia
Cadillac-Wexford Transit Authority Cadillac, Michigan
Warren County Department of Human Services - Division of Administration Belvidere, New Jersey
Pelivan Transit Big Cabin, Oklahoma
Easy Ability, LLC Grayslake, Illinois
Region 6 Planning/Peoplerides Marshalltown, Iowa
Charlevoix County Transit Boyne City, Michigan
Freedom Road Transportation Authority Lake Orion, Michigan
Indian River Transit/Senior Resource Association Vero Beach, Florida
rabbitransit York, Pennsylvania
Community Transit of Watertown/Sisseton, Inc., Inc. Watertown, South Dakota
Aberdeen Ride Line Aberdeen, South Dakota
Marshalltown Municipal Transit Marshalltown, Iowa
South West Transit Association Fort Worth, Texas
Cecil Transit Elkton, Maryland
Buckwheat Express Kingwood, West Virginia
Southern Area Agency on Aging Martinsville, Virginia
Delmarva Community Services, Inc. Cambridge, Maryland
Panhandle Trails Intercity Public Transit Alliance, Nebraska
Dunn County Menomonie, Wisconsin
Volunteer Transportation Center Watertown, New York
Michael Jordan Transportation Service Ridgeland, Mississippi
Clare County Transit Harrison, Michigan
Specialty Care Transportation Greensboro, North Carolina
ITCurves
Gaithersburg, Maryland

Daniel Boone Community Action Agency, Inc.
Manchester, Kentucky

Lincoln County Transit
Newport, Oregon

Golden Spread Rural Frontier Express Coalition
Clayton, Michigan

BAWAC, INC
Florence, Kentucky

Fresno Economic Opportunities Commission
Fresno, California

Northfield's Human Services, Inc.
Whitmore Lake, Michigan

Harford Transit LINK - Harford County Government
Abingdon, Maryland

Okanogan County Transit Authority
Okanogan, Washington

Metropolitan Family Service
Portland, Oregon

Paratransit Services
Bremerton, Washington

Virginia Regional Transit
Purcellville, Virginia

Bennett’s Transportation Co. LLC
Falmouth, Kentucky

Pawnee Mental Health Services
Concordia, Kansas

Housing Authority
Norfolk, Virginia

Fairmont-Marion County Transit Authority
Fairmont, West Virginia

OATS, Inc.
Columbia, Missouri

Project Amistad
El Paso, Texas

CASTA
Denver, Colorado

Nashua Transit System
Nashua, New Hampshire

Scotts Bluff County Public Transit
Gering, Nebraska

Community Development Inc.
Richton, Mississippi

Perry JFS
New Lexington, Ohio

California Association for Coordinated Transportation (CALACT)
Sacramento, California