Statement of

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Committee on Banking Housing, and Urban Affairs

United State Senate

Regarding

Improving Transportation in Rural States and Tribal Areas MAP-21 and Beyond

> Sioux Falls, South Dakota March 28, 2013

Senator Johnson:

Good afternoon. I am Barb Cline, the Executive Director of Prairie Hills Transit located in Spearfish, SD. I direct a transit agency operating within a 12,000 sq. mile service area, and like to think that I represent in large part many of the rural transit system operators that provide much needed trips to an array of destination in rural and small town America daily.

I would like to sincerely thank you and FTA Administrator Rogoff for supporting community and public transit. We appreciate the increased formula funding in MAP-21 and the ongoing dialog you have permitted us.

Today I would like to discuss how the new federal surface transportation law, MAP-21, is impacting rural transportation operators and their constituents.

Prairie Hills Transit is a company that grew from a single "old" green van that was not lift equipped and operated 4 hours daily in Spearfish for seniors. A short 23 years later our company operates and receives local support in 15 communities located in 6 counties in the Black Hills of western South Dakota. With 38 vehicles, 50 employees and a new transit facility our growth has been solid and stable. With your help Prairie Hills Transit can continue to grow and meet the ever increasing transportation service requests.

You asked that we let you know our feelings regarding the affect specific programs might have. Let me begin with the Bus and Bus Facilities Program. The program is much smaller than the version that existed under SAFETEA-LU. While the formula based bus funds are appreciated, ultimately that dollar amount doesn't begin to touch the replacement needs of PHT or other agencies in our state. It is important for you to understand that many of these vehicles consistently travel 100-200 miles daily for medical and employment.

Of the 38 vehicles Prairie Hills Transit operates 22 are 2005 or older and 17 of the 38 have 130,000 miles or more on their odometers. A significant commitment in the investment must be made in coming years.

The safety & security requirements of MAP-21 are of real concern. Both have been a long standing commitment of Prairie Hills Transit and the Community Transportation Association of America (CTAA) even before MAP-21. We are currently pursuing a three year accreditation (Community Transportation Safety and Security Accreditation) offered

by CTAA that meets the Federal Transit Administration endorsed standards. I would encourage FTA guidance to use a common sense approach so an undue burden wouldn't be placed on smaller agencies. State DOT's could easily use the National Transit Database (NTD) as a safety reporting mechanism. Guidance should not require a safety officer at each agency nor should a part time or full time safety officer be required. Perhaps planning funds could be used to complete the safety plan training implementation.

I believe that asset management plans could and should be managed by the State Department of Transportation. Guidance would make the State accountable for their sub-recipients and this information could be entered into the National Transit Database. Having each recipients report on the condition of their system/systems would be particularly burdensome for smaller agencies

Meeting the current needs

Nearly two years ago the major healthcare company in our area came to us and initiated discussion regarding a discharge contract for patients at their primary hospital in Rapid City. This partnership has been working extremely well for over a year and is a model that could and should be emulated with any transit agency. With every challenge comes an improved way of providing high quality transportation service to patients who need hospital discharge transportation.

Often medical discharges are trips that travel long distances with patients crossing state lines to be returned to their homes. Previously these people who didn't have transportation were sent home by ambulance incurring bills they could not afford to pay. If transportation was not available longer stays in the hospital often took beds and rooms that were needed for new patients. Recent feedback from a spokesperson at the major hospital in our area says "The staff very much appreciates the collaborative partnership that has been developed with you and your team. Ultimately, the patients benefit the most".

Non emergency medical transportation is one of the fastest growing services we provide. There is a vital role we all must play in healthcare transportation. It ultimately impacts our South Dakota residents who are a proud and independent population who won't ask for help but will take it if it is offered. The impact of outpatient services in relationship to hospitalization or patients being readmitted because they have no transportation to follow up care is monstrous. As a Medicaid provider we help young families with children, individuals with disabilities and a growing number or wheelchair bound persons residing in residential living facilities, nursing homes and assisted livings. Many are fiercely independent and take great pleasure in having Prairie Hills Transit and its drivers as their ride of choice.

Daily needs being met:

- National Guard van pool taking employees to their jobs. The route begins in Spearfish and ends in Rapid City.
- Transport minimum security prisoners from Rapid City to Custer for employment.
- Dialysis appointments and cancer treatments- between communities
- Job Access routes for mentally and physically challenged adult-between communities-multiple agencies
- Hospital discharges-daily and with destinations often in other states

- Children from daycare and schools allowing parents to remain at work
- Disabled children integrated with
- Seniors to nutrition sites, social outings, medical, hair appointments
- Essential public transportation in every community
- Medicaid, Medicaid, Medicaid
- Advocacy for our riders and their unmet needs.
- Veterans receiving medical transportation and assuming volunteer roles

We must begin to place a definable value and measurable outcomes for our critical medical needs. We must continue to be innovative and diversify programs our transit systems already work with. How do we measure and meet the need of a small community with a 40 bed nursing home filled with Medicaid residents that is 153 miles from the closest major medical center? Even more importantly how do we fund their transportation, provide a vehicle and ensure residents a quality of life?

Proud to note

Recently we logged our youngest rider at 8 days old. The other end of the life cycle is 103 year old Helen who rides daily to the senior meals program in a town of 600 people. Helen has averaged over 35 rides a month getting her out of her home, allowing her an independent lifestyle and making sure she receives a well balanced meal each day.

In closing

The Prairie Hills Transit system represents high professional standards, excellence in safety and security of passengers, and organizational quality and commitment. We exemplify a business persona that the public respects and recognizes as consistently

and continuously meeting the needs of all communities in its service area. We strive to serve as a reflection of every other small rural agency in the nation. No one can deliver transportation options better than rural transit.

Just this week we were called to take a man from the hospital to his home town. He had been involved in a car accident where his granddaughter, the driver, died in the seat next to him. His wife passed away the day before his discharge from complications of the accident. I personally take great pride in the compassion our drivers show every day and the humility it requires for us to make a difference for our cities, counties, state and country. We need your help to fight the battle rural systems fight each day. Thank You