To the Graduate Council:

I am submitting herewith a thesis written by Leanne Cox entitled "User-Side Transportation Subsidies: The Evansville, Indiana, Transportation Remuneration and Incentive Program." I have examined the final copy of this thesis for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Master of Science in Planning.

Patricia L. Fisher

Patricia L. Fisher, Major Professor

We have read this thesis
and recommend its acceptance:

James A. Spencer

Fredrick J. Wegman

Accepted for the Council:

Lee Minkel

The Graduate School

USER-SIDE TRANSPORTATION SUBSIDIES: THE EVANSVILLE, INDIANA, TRANSPORTATION REMUNERATION AND INCENTIVE PROGRAM

A Thesis

Presented for the

Master of Science in Planning

Degree

The University of Tennessee, Knoxville

Leanne Cox

August 1984

DEDICATION

This thesis is dedicated to Edna Quissenberry.

ACKNOWLEDGEMENTS

In the course of my thesis research, a number of individuals have assisted me. I would like to thank my advisor and friend, Dr. Pat Fisher for giving me advice and encouragement, my family for lovingly supporting me, and Joseph Horne for attempting to preserve my sanity. I would also like to show my appreciation to Kathy Muller, the Director of the Evansville TRIP. Without her help, this research would not have been possible.

ABSTRACT

Many elderly and handicapped individuals, due to economic or physical constraints, do not have access to an automobile. For these individuals who cannot utilize the automobile, public transportation is the obvious alternative; however, transit also presents difficulties to the elderly and handicapped. The alternative to public transportation is the door-to-door service provided by specially equipped vans or taxis. The problem with these services is the cost.

User-side subsidies are being increasingly used to provide transportation at a reduced cost to special target groups such as the elderly, handicapped or individuals with low incomes. The user-side subsidy concept works on the premise that providers are only reimbursed for trips actually taken.

Most user-side subsidy programs provide transportation subsidies to individuals only for use on the taxi. This thesis documents and evaluates certain aspects of the Transportation Remuneration and Incentive Program (TRIP) of Evansville, Indiana, which provides subsidies to individuals in order that they can utilize a wide variety of transportation modes. This work documents the Evansville TRIP from the administrative standpoint, and also profiles the TRIP clients and eligible transportation carriers.

TABLE OF CONTENTS

CHAPTER		PAGE
I.	TRANSPORTATION HANDICAPPED	1
	Introduction	1
	Purpose of Research	6
	Organization of Thesis	7
II.	BACKGROUND OF USER-SIDE SUBSIDY PROGRAMS	8
	Introduction	8
	Overview of Programs Using User-Side Subsidies	10
	State of West Virginia	10
	Milwaukee, Wisconsin	15
	Lafayette, California	16
	Los Gatos, California	16
	Palo Alto, California	16
	Oroville, California	17
	Malvern, Arkansas	17
	Canon City, Colorado	18
	Differences Among the Programs	18
	Eligibility	18
	Transportation Mode	20
	Subsidy Mechanisms	21
	Amount of Subsidy	24
	Restrictions	24
	Service and Methods Demonstration Programs	25
	Danville, Illinois	26
	Kinston, North Carolina	28
	Lawrence, Massachusetts	28
	Montgomery, Alabama	30
	Summary	30
III.	TRANSPORTATION REMUNERATION AND INCENTIVE PROGRAM OF EVANSVILLE, INDIANA	32
	Background	32
	Program Initiation	33
	Funding Sources	34
	Program Administration	36
	Transportation Carriers	37
	Program Eligibility	39
	Program Operation	40
	Restrictions	43
	System Abuse	44
	Summary	44

CHAPTER PAGE

IV. METHODOLOGY 45

V. FINDINGS 49

TRIP Clients 49
General Characteristics 49
Nonwheelchair Bound Questionnaire Results 51
Nonwheelchair Bound Usage Sheet Results 54
Wheelchair Bound Questionnaire Results 57
Wheelchair Bound Receipt Results 61
TRIP Evaluation 63
Attrition 65
Transportation Carriers 65
TRIP Impacts 66
Problems 67
Additional Comments 68
TRIP Agency 69
TRIP XX Dollars Claimed 69
TRIP XX One-Way Trips Provided 71
TRIP III Dollars Claimed 71
TRIP III One-Way Trips Provided 74
Cost per Passenger Trip 76
Number of Clients Served 78
Problems 84
Benefits 85

VI. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS FOR FUTURE RESEARCH 86

TRIP Clients 86
Transportation Carriers 87
TRIP Agency 88
Future Research 90
Transferability 91

LIST OF REFERENCES 94

APPENDICES 100

A. ORGANIZATIONAL CHART OF THE EVANSVILLE TRIP 101

B. ELIGIBILITY PRIORITIES 103

C. MAXIMUM INCOME LEVELS 105

D. TRIP APPLICATION 107

E. LETTERS ADVISING OF TRIP ELIGIBILITY 110

PAGE

F. TRIP III SUGGESTED DONATIONS 116

G. 1982 AND 1984 TRIP SURVEYS 118

H. RECERTIFICATION LETTER AND FINAL NOTIFICATION 122

I. AMBULATORY AND NONAMBULATORY USAGE SHEETS 125

J. TRIP DIRECTOR QUESTIONNAIRE 128

K. TRIP CARRIER QUESTIONNAIRE AND COVER LETTER 134

L. 1982 TRIP EVALUATION SURVEY 139

M. POINT SYSTEM FOR DETERMINING TRIP ELIGIBILITY 142

VITA 145

LIST OF TABLES

TABLE		PAGE
1.	Summary of Programs Using User-Side Subsidies	11
2.	Summary of SMD User-Side Subsidy Projects	27
3.	Distribution of Clients by Race, Sex and Marital Status	50
4.	Distribution of Clients by Household Size	51
5.	Distribution of Clients by Handicap Code	51
6.	Distribution of Nonwheelchair Bound TRIP XX Clients by Ability to Use Transit	52
7.	Distribution of Nonwheelchair Bound TRIP XX Clients by Ability to Use Transit and Transportation Service Choice	53
8.	Distribution of Nonwheelchair Bound TRIP XX Clients by Trip Purpose (Questionnaire)	55
9.	Average Amount Spent per Month by Nonwheelchair Bound TRIP XX Clients by Transportation Carrier (Usage Sheets), Fiscal Year 1982	56
10.	Average Number of One-Way Trips Taken per Month by Nonwheelchair Bound TRIP XX Clients by Transportation Carrier (Usage Sheets), Fiscal Year 1982	58
11.	Distribution of Wheelchair Bound TRIP XX Clients by Service Used Most Frequently (Questionnaire)	59
12.	Distribution of Wheelchair Bound TRIP XX Clients by Purpose (Questionnaire)	60
13.	Distribution of Wheelchair Bound TRIP XX Clients by Service Used Most Frequently (Receipts)	61
14.	Distribution of Wheelchair Bound TRIP XX Clients by Trip Purpose (Receipts)	62
15.	Amount Spent per Month by Wheelchair Bound TRIP XX Clients by Transportation Carrier (Usage Sheets), Fiscal Year 1982	64

TABLE PAGE

16. Distribution of TRIP Clients in Sample Currently Off Program by Reason for Removal 66

17. Average Cost per Passenger Trip, 1979-1983 76

18. Cost-Effectiveness of Existing User-Side Subsidy Programs 77

19. Cost-Effectiveness of Existing Specialized Transportation Services 79

20. Client Totals, 1979-1983. (At End of Year, December 31.) 84

LIST OF FIGURES

FIGURE		PAGE
1.	Distribution of Dollars Claimed from TRIP XX by Month (1979-1983)	70
2.	Distribution of One-Way Trips Taken by TRIP XX Clients by Month (1979-1983)	72
3.	Distribution of Dollars Claimed from TRIP III by Month (1979-1983)	73
4.	Distribution of One-Way Trips Taken by Trip III Clients by Month (1979-1983)	75

CHAPTER I

TRANSPORTATION HANDICAPPED

Introduction

Since World War II, the private automobile has come to the forefront as the preferred transportation mode. This increased mobility has stimulated the growth of the suburbs. The resulting dispersion of the population has caused a shift in the location of retail businesses, including chain supermarkets, large shopping centers, and discount stores (Koutsopoulas & Schmidt, 1976). Recreational, educational, and cultural activities have also followed this pattern. "The emerging distribution of households, jobs, and services is predicated upon an unparalleled level of mobility" (Brail, Hughes, & Arthur, 1976, p. 18). There are some groups of society which, due to physical or economic constraints, do not have access to an automobile. Two major groups included in the carless population are the handicapped and the elderly.

Any number of physical disabilities can prevent a handicapped individual from obtaining a driver's license. Even for those who can drive, the sprawling design of many shopping centers, with parking lots located a considerable distance from the center's activities, presents difficulties to those persons with ambulatory problems (Koutsopoulos & Schmidt, 1976).

Many individuals, as they grow older, encounter physical problems which prevent them from driving an automobile. These include: "(1) farsightedness and loss of peripheral vision, (2) hearing loss, (3) poor coordination and slowed reactions, (4) decreased and slower movement in general, and (5) use of medication" (Libow cited in Brail et al., 1976, pp. 23-24). Some states require more strenuous testing before renewing the driver's license of an elderly individual. In addition, the elderly, if able to purchase insurance at all, must pay a higher premium. Thus, for the older person, owning and operating an automobile may be infeasible.

"According to national census estimates, there are significant overlaps between handicapped and elderly populations" (Brail et al., 1976, p. 44). In 1970 in the United States, there were 7,030,000 handicapped elderly; 6,340,000 handicapped nonelderly; and 13,036,000 elderly nonhandicapped making a total of 26,406,000 individuals who were elderly and/or handicapped.

For the elderly and handicapped who cannot utilize the automobile, public transportation is the obvious alternative; however, transit also presents difficulties for these groups. It is estimated that 19 percent of the transportation handicapped in the United States cannot use public transportation at all, with 30 percent able to use transit only with great difficulty (Public Technology, Inc., 1979b; Grey Advertising, Inc., 1978). Many handicapped persons are afraid of crowds because they force these individuals to function at a rate faster than that at which they are comfortable (Koutsopoulos & Schmidt,

1976). In addition, the handicapped may have a fear of embarrassment created from the impatience of others. Waiting for the bus may expose the elderly to bad weather conditions which may endanger their health (Koutsopoulos & Schmidt, 1976; UMTA, 1981). Many older persons lack the stamina to stand for long periods of time. In addition, "they also feel particularly vulnerable to street crime" (UMTA, 1981, p. 29). The elderly and handicapped may encounter problems with crowding and stop-and-go lurching of the bus. For the elderly individual who has travelled only by automobile in the past, transferring buses may be confusing. Some handicapped and elderly individuals are not able to make themselves understood well enough to obtain desired information (Koutsopoulos & Schmidt, 1976). Even for those who can utilize public transportation, routes do not always serve the outlying areas in which many services are located (UMTA, 1981).

The alternative to public transportation is the door-to-door service provided by specially equipped vans or taxis. It is estimated that only 7 percent of the transportation handicapped are not able to use the taxi at all, with 30 percent able to use taxis as much as they like (Sahaj, 1978). A greater percentage, 63 percent, could use the taxi, but are prevented to some degree due to the cost of the service, difficulty obtaining the service, and problems with the vehicle. "Transportation handicapped persons use taxis nearly three times as often as those who are not handicapped" (Public Technology, Inc., 1979b, p. 4). In addition, the elderly value the comfort, door-to-door service, and ease of getting in and out of a vehicle that can be provided by a taxi (Kirby, Bhatt, Kemp, McGillivray, & Wohl, 1974).

The major problem with specialized door-to-door transportation services such as taxis or specially equipped vans utilized by the elderly and handicapped is the cost of the service. Sixty percent of the transportation handicapped have identified the high cost of taxis as a major problem (Sahaj, 1978). Eliminating this problem would help 13.2 percent of the transportation handicapped.

The elderly and handicapped overlap with another group of the carless population, the poor. The income of the elderly is usually limited, and in the form of pensions rather than wages (Brail et al., 1976). Testimony during Senate hearings in 1971 revealed that older families had incomes of approximately half of that of younger families (Koutsopoulos & Schmidt, 1976). After housing and food, transportation represents the next largest item in the budget for older persons (Golant, 1976).

"This segment of the population, because of reduced income or physical constraints, is faced with a form of discrimination through lack of the means of mobility available to the great majority of the population for earning a living, shopping, obtaining health care, visiting friends and relatives, and engaging in cultural and recreational activities" (Polonsky, 1978, p. 632). For the elderly, the lack of adequate transportation can have a more severe impact than simply the loss of the service alone (Koutsopoulos & Schmidt, 1976). Problems with transportation may be one of the first signals to an older person that he or she will no longer be able to carry on their customary way of life (Golant, 1976). Cutler (cited in Golant,

p. 282) has suggested in his research that there is a "direct relationship between the quality of transportation services and the psychological well-being of older persons."

There has been much legislation aimed at promoting the transportation needs of the elderly and handicapped, beginning in 1970, when the Urban Mass Transportation Act of 1964 was amended to include Section 16. Urban Mass Transportation Administration (UMTA) and Federal Highway Administration (FHWA) joint regulations require "the urban transportation planning process to include special efforts to plan mass transportation facilities and services that can be utilized effectively by elderly and handicapped persons" (Hood, Bell, Sovchen, & Heathington, 1978, p. ix). Each Transportation Improvement Program (TIP) submitted after September 30, 1976, must contain "projects or project elements designed to benefit elderly and handicapped persons, specifically including wheelchair users and those with semiambulatory capabilities" (Kirby & Tolson, 1977, p. 22). The UMTA Service and Methods Demonstration Program addresses the need to improve public transportation services, with one of the goals of the program being the improvement of transportation for the transit dependent (Public Technology, Inc., 1979b).

There is now evidence to support the premise that, by increasing the income of older persons or by directly subsidizing the elderly and handicapped to obtain services they require, their overall mobility will be increased (Golant, 1976; Rosenbloom, 1978).

Purpose of Research

The purpose of this thesis is to evaluate certain aspects of one program designed to aid the transportation handicapped, the Transportation Remuneration and Incentive Program (TRIP) in Evansville, Indiana. TRIP employs user-side subsidies in assisting elderly and handicapped individuals to obtain affordable transportation. It differs from most user-side subsidy programs in that clients are not limited to one transportation mode. Evansville TRIP clients may choose from several transportation carriers including bus, taxi, and specialized wheelchair services.

The Evansville TRIP is a smaller version of the statewide user-side subsidy program of West Virginia. Revis (1975) has stated in his documentation of the West Virginia TRIP that elements of the program lend themselves to trial on a much smaller scale. He stated that a simplified local version, without efforts to establish new provider systems, could be more simply and cheaply administered than a state program. With this premise in mind, this research also explores the potential transferability of the procedures of the Evansville program to other communities wishing to initiate the user-side subsidy concept in providing affordable transportation to the elderly, handicapped, or other disadvantaged groups.

Organization of Thesis

This work documents the Evansville TRIP from the administrative standpoint, and also profiles the TRIP clients and eligible transportation carriers.

Chapter II presents an overview of the user-side subsidy concept and a literature review of user-side subsidy programs. Chapter III provides an in-depth description of the Evansville TRIP including history, program eligibility, and administrative procedures. The methodology utilized in the study is described in Chapter IV, while Chapter V contains a discussion of the major findings of the study. Chapter VI includes research conclusions and recommendations for future research.

CHAPTER II

BACKGROUND OF USER-SIDE SUBSIDY PROGRAMS

Introduction

The concept of the user-side subsidy as applied to transportation appears to have originated in the early 1970's, and the method is increasingly used to provide transportation at a reduced cost to special target groups such as the elderly, handicapped or individuals with low incomes. In a user-side subsidy, tickets are purchased by an eligible individual at a discounted rate, with these tickets used as payment for the standard fare on eligible transportation services. The suppliers of the services are then reimbursed by the program sponsor.

The user-side subsidy concept works on the premise that providers are only reimbursed for trips actually taken. This differs from the provider-side subsidy whereby the transportation supplier receives the same amount of subsidy regardless of the demand. Although most transportation programs utilize the provider-side subsidy technique, Kirby and McGillivray (cited in Kirby & Tolson, 1977) argue that this type of subsidy tends to deny many transportation suppliers the chance to participate in these publicly-funded programs. In a provider-side subsidy, an exclusive contract is usually negotiated with one transportation carrier. Because of this, they contend that

"provider-side subsidies tend to reduce competition among providers and remove some of their incentives to operate efficiently" (p. 19).

In contrast, with the user-side subsidy the user may choose the transportation supplier that best serves his or her needs. In addition, at low levels of demand, the user-side subsidy may provide a substantial savings over provider-side subsidies to the subsidizing agency (Spear, Casey, Damm, Doxsey, Freilich, Heaton, Loo, Page, Slavin, & Waksman, 1981).

Another advantage of user-side subsidies is that in communities with multiple transportation funding, resources can be disbursed efficiently without duplication of existing services (Chatterjee, Sommerkorn, & Wegmann, 1980; Kirby & Tolson, 1977). With the federal government moving towards less intervention in private enterprise, the concept of user-side subsidies provides a means of supplying transportation to certain groups without disrupting existing operating conditions (Spear, 1982). In fact, in some cases user-side subsidies may have the potential to increase the ridership of existing transportation suppliers.

The concept of user-side subsidies is analogous to the food stamp program with transportation instead of food being the target commodity (Curry, 1982). Tickets or some other form of subsidy mechanism are utilized to provide transportation to those who cannot afford it, such as the elderly or handicapped, who often require specialized door-to-door transportation which has a much higher fare than conventional bus transit. Although this type of approach

constitutes public assistance, in areas where there have been demonstration studies little public criticism has been encountered (Spear, 1982).

One disadvantage that may occur with the user-side subsidy is the possibility of abuse. This problem can exist with both the client and provider; however, it has not been a major problem with existing programs (Spear, 1982).

Overview of Programs Using User-Side Subsidies

In 1981, the consulting firm of Crain and Associates was asked to undertake a survey of existing user-side subsidies (UMTA, 1982). Information was obtained on 111 programs in 29 states. Table 1 provides a summary of some of the data that were obtained. The following are but a few examples of user-side subsidy programs existing at the time of the survey.

State of West Virginia

The Transportation Remuneration and Incentive Program (TRIP) of West Virginia initiated a statewide user-side subsidy program in conjunction with a provider-side subsidy in order to meet the goals of fulfilling the transportation needs of elderly and handicapped individuals with low incomes, and "providing the transportation industry with customers and revenues to keep transportation functioning" (Curry, 1982, p. 3).

Individuals who were over 60 or handicapped and had incomes lower than guidelines set by the Office of Economic Opportunity were eligible to participate in the program. Tickets were distributed

Table 1. Summary of programs using user-side subsidies

Location	Subsidizing Agency	Providers	Eligible Persons	Restrictions	Amount of Subsidy	Total Trips Subsidized	Mechanism
Malvern, Arkansas	Various social service agencies	South Central Arkansas Transit (SCAT)	Over 60; work-study participants; persons involved in mental health rehabilitation; low-income children	Sponsoring agency decides who can ride and for what purpose	36/Pass.-mile (Title 19); $4.25/pass.-hr and .35/pass.-mile (senior citizens) $5.00/trip (mental health); $2.00/trip (rehabilitation services participants)	5,400 trips/month	All eligible riders ride free. SCAT contracts with subsidizing agencies
Sacramento, California	Various social service agencies	Regional Transit (RT)	Agency clients	None	100%	Unknown	Passes
Sacramento, California	San Francisco Federal Savings and Loan (SFF)	Sacramento Regional Transit (RT)	Account holders who maintain $2,500 min. savings account or who automatically deposit their Social Security checks	None	100% (Social Security); $1.00/pass (min. balance)	75 Passes/month	Monthly passes
San Jose, California	Santa Clara County Welfare Department	Santa Clara County Transit	Recipients of general assistance	None	100%	1000-1100 tickets/month	Punchcard tickets
Canon City, Colorado	Canon City	Canon City Taxi	Anyone	First-come, first-served; fixed amount/month; no travel restrictions	50%/Coupon	1200/Month	Coupons
Hartford, Connecticut	City of Hartford, Project Find	Any mode	Clients collecting public assistance	None	$15.00/Month	Approximately 100 people participate	Monthly subsidy provided with each public assistance check
Hartford, Connecticut	Hartford Employment and Training Administration	Connecticut Transit	CETA participants	None	100% (Bus passes) or fixed dollar amount	170 People	Bus passes; fixed dollar amount
Hartford, Connecticut	Employment Training Service (ETS)	Yellow Cab	Clients of various agencies	Job interview	100%	80-100 Clients (some of which utilize vanpooling program which is not a user-side subsidy)	Taxi trips are billed to ETS
Hartford, Connecticut	Connecticut DOT	Connecticut Transit	Members of the Camimenos Adult Learning Center (must also meet other requirements)	None	50%/Pass	43 Participants	Pass

Table 1 (continued)

Location	Subsidizing Agency	Providers	Eligible Persons	Restrictions	Amount of Subsidy	Total Trips Subsidized	Mechanism
Hartford, Connecticut	Division of Vocational Rehabilitation (DVR)	Connecticut Transit	DVR clients	None	70¢/Day	25 Clients	Transportation allowance
Connecticut (statewide)	Department of Human Resources	Various taxi companies	Department of Human Resources clients	Medical trips only	$8.00/Taxi trip	15-20 Clients/day	State pays taxi
Connecticut (statewide)	Department of Labor Work Incentive Program	Various modes	Clients collecting public assistance	N/A	$1.00/Day or 14¢/mile	N/A	Transportation allowance
Connecticut (statewide)	Federal Work Incentive Program	Various modes	Welfare recipients	None	$3.00/Day (lunch and transportation)	300 Individuals have participated	Transportation allowance
Connecticut (statewide)	Private Sector Employment Assistance Corp.	Various bus transportation agencies	Clients of subsidizing agency	None	100%	N/A	Bus pass
Wilmington, Dover, and Lewes, Delaware		Various cab companies	60+ or Ambulatory handicapped unable to drive an automobile	None	50%	Wilmington—2,500/month; Dover—650/month; Lewes—N/A	Tickets
Danville, Illinois	City of Danville	American Transit Corp. and Red Top Cab Co. (operators of fixed-route bus service)	Everyone; elderly, handicapped and students eligible for further subsidy	Only fixed-routes and schedules	$1.25/.40 ticket $1.45/.20 ticket $1.15/.50 cash fare	360,000/Year	Tickets; cash fare
Champaign, Illinois	Champaign-Urbana Mass Transit District	Various cab companies	Elderly and handicapped	$40.00/Eligible person/month	50%	61,000/Year (1982)	Voucher
Baton Rouge, Louisiana	Baton Rouge Jobs Program	Local bus company	Clients of Jobs Program	Travel to job interviews and training programs	100%	N/A	Tokens
New Orleans, Louisiana	New Orleans Public Schools (and some private schools)	New Orleans Public Service, Inc. (NOPSI)	High school students living over a mile from school	Must be taken during normal school travel hours	100% (.40/Ride)	4,885,387/Year (1980)	Tickets
Bangor, Maine	Eastern Task Force on Aging	The Bus (a municipal operator)	All persons eligible for Title XX monies	Medical and other necessary trips	50%	N/A	Tickets
Greater Portland, Maine	Regional Transportation Program, Inc.	Greater Portland Transit District, Greyhound, Trailways, Delta Airlines, two taxi companies	All persons eligible for Title III, XIX, and XX monies	Must be medically related if trips are by town taxi, Greyhound, Trailways, or Delta	50%	1,450,000/Year	Tickets
Lawrence, Massachusetts	City of Lawrence Transfare Office	Nine privately owned taxi companies	65+ and Handicapped	System may only be used four times per week	50%	10,000 Trips/month	Tickets
Van Buren County, Michigan	County Department of Social Services (DSS)	Rural Public Transit	DSS clients	Medical and dental trips; trips to a DSS facility	100%	N/A	DSS is billed monthly

Table 1 (continued)

Location	Subsidizing Agency	Providers	Eligible Persons	Restrictions	Amount of Subsidy	Total Trips Subsidized	Mechanism
Columbia Heights, Minnesota	City of Columbia Heights	Town taxi	All residents	Two-hour advance notice	85% (65+, or Under 12); 60% all others	1,000/Month	Coupons
Hopkins, Minnesota	City of Hopkins	Town Taxi, Inc.	Everyone	None	45%-82% (Depending on use)	32,000/Year	Tickets
Red Wing, Minnesota	City of Red Wing	Local taxi company	Low-income residents	Trips within city limits	~ 63%	1,209/Month (July 1981)	Tickets
Excelsior Springs, Missouri	City of Excelsior Springs	One cab company (three taxicabs)	65+	City limits	50%	3,898 Trips (Oct., Nov., Dec., 1980)	Tickets
Joplin, Missouri	City of Joplin	One cab company (10 taxicabs)	65+ and making less than $6,500/year; also an unemployed person	City limits	60%/Coupon	5,000-6,000/ Year	Coupons
Kansas City, Missouri	City of Kansas City	Medicab, Northeast Dial-a-Ride, Toedman Cab, Westport Express, Yellow Cab, City Van and Shalon Playa	62+; Handicapped users 16+	1 Day advance reservation	$2.55/Coupon	109,932 (1979-1980); 297,550 (1/1980-2/1981)	Coupons
Nevada, Missouri	City of Nevada	One taxicab	60+, or physically or mentally handicapped	16 One-way trips/ month	50%/One-way trip	N/A	Coupons
Billings, Montana	Social Services; School District	Billings MET (city bus)	Social service clients; school children living outside the school district	None	100%	N/A	Passes
Glasgow, Valley County, Montana	Council on Aging	Taxi	60+	Two books of tickets/ month	Sliding scale	N/A	Tickets
Helena, Montana	Indian Alliance	Helena Bus (City Dial-a-Ride)	Indians	Trips involved in Indian Alliance programs	100%	N/A	Tokens
Kalispell, Flathead County, Montana	Council on Aging	Taxi	60+	None	50%	N/A	Tickets
Miles City, Custer County, Montana	Council on Aging	Taxi	60+	4 Tickets/month	Less than $1.00/ ride	N/A	Tickets
Missoula, Montana	Human Resources Development Council (HRDC)	Mountain Line (city bus)	Low-income and disabled clients of HRDC	None	100%	N/A	Punchcard Tickets
Missoula, Montana	Council on Aging	Taxi	60+	None	50%	N/A	Tickets
New Jersey (statewide)	N/A	Most bus and rail operators	62+ and handicapped	9:30 a.m.-4:00 p.m. and 7:00 p.m.-6:00 a.m. weekdays; all day weekends	50%	14,000,000/Year	Tickets

Table 1 (continued)

Location	Subsidizing Agency	Providers	Eligible Persons	Restrictions	Amount of Subsidy	Total Trips Subsidized	Mechanism
Exeter, New Hampshire	Council on Aging	J & L Cab Company	62+	Limit on number of tickets	60¢/Ticket; (43% of one-way fare)	300-350 Currently use the system	Tickets
Santa Fe, New Mexico	City of Santa Fe	Three privately owned taxi companies	General public	$6.00/Trip maximum; city limits	50% Up to $6.00/ trip	Approximately 37,500/year	Coupons
Kinston, North Carolina	City of Kinston	Various cab companies	65+ or handicapped	Work/school, shopping, medical, recreation, social service, or religious related	50%	3,000/Month	Tickets
Swain County, North Carolina	City of Franklin	Privately owned taxi-cabs	60+	Must be shopping- and medical related	$4,082 Annually	3,000/Year	Tickets
Delaware, Ohio	City of Delaware	Delaware Cab Co., Inc.	65+ with Golden Buckeye card)	One ticket per trip per person	$.50/Trip	8,000/Year (1980)	Tickets
Lancaster, Ohio	Lancaster Parks and Recreation Department	Safeway Cab Co.	65+	None	$.50/Trip	27,453/Year	Tokens
Oklahoma City, Oklahoma	Oklahoma City, The Village, Midwest City Warr Acres	Various cab companies	62+ or handicapped	Purchase limit	50%/Trip	3,600/Month	Coupons
Portland, Oregon	Various social service agencies	Tri-Met	Clients of the social service agencies	For welfare clients, only medical trips are allowed	100%	N/A	Tickets or passes
Pennsylvania (statewide)	State of Pennsylvania	72 Private and public agencies	65+	Transit rides can be made all day on weekends and holidays, but only on the off-peak hours during weekdays	100%	64,729,554/ Annually (FY1979-1980)	Identification card
Sioux Falls, South Dakota	City of Sioux Falls	Yellow Cab, Sioux Falls Wheelchair Transportation Service	Handicapped individuals unable to use fixed-route service	Length of trips are modified	$2.99/One-way wheelchair ride; 50% (taxi)	23,000/Year (1980)	Voucher
Alcoa, Tennessee	Blount County Community Action Program	Two cab companies	60+	Medical and grocery trips only	Approximately $1.25/trip	25-30 Regular users	Coupons
Oak Ridge, Tennessee	City of Oak Ridge	Three taxi companies	Residents 60+	N/A	.65/Trip (city) .10/trip (taxi company)	41,000/Year	Coupons
Arlington County, Virginia	Arlington County	WMATA	Households on any form of public assistance with one member employed, seeking work, or in a training program	None	50%	720 Households	Passes
West Virginia (statewide)	State Transportation Remuneration and Incentive Program (TRIP) in the State Department of Welfare	Various carriers certified by the state	Annual income of less than $3,200 and either 60+ or handicapped	Maximum of four books per month	N/A	12,000 Individuals/month	Tickets

Source: National User-Side Subsidy Inventory, UMTA, 1982.

in an $8.00 book containing thirty-two tickets. After a series of policy changes, ticket books were sold at $1.00 with a limit of one book per month. In April 1976 a change was instituted which allowed participants who incurred high transportation costs because of frequent medical trips or who lived in isolated areas to purchase up to four books a month. Tickets could be used on a wide range of transportation modes, including bus, taxi, rail, and air. In addition, tickets could be used for travel anywhere within the state or even out of state as long as the total fare was paid for in the State of West Virginia.

Approximately 90 percent of existing providers volunteered to participate in TRIP (Sahaj, 1978). In order to be involved in the program, providers had to be authorized and meet Public Service Commission standards.

TRIP was administered by the Department of Welfare with approximately 12,000 trips per month subsidized. In 1979 there was a total subsidy of $1.1 million (UMTA, 1982).

Milwaukee, Wisconsin

A taxicab-van user-side subsidy program for wheelchair users in Milwaukee County was developed in response to the demands of handicapped persons for public transportation and the availability of funds from the State of Wisconsin to implement a handicapped transportation demonstration program (Mayer, 1982). Initially each user paid $1.00 for a one-way trip with the county subsidizing the remaining portion of the cost. The program was expanded to include the blind and those persons utilizing walkers. In 1981 the cost to users

was increased to $1.50, with the maximum subsidy limited to $9.50 for wheelchair users and to $6.50 for other eligible users.

Lafayette, California

Lafayette, California, instituted a user-side subsidy, The Senior Citizen's Taxi Program, with a minimum age requirement of sixty-five (Chatterjee et al., 1980). In June 1977, there were 140 senior citizens enrolled. This program utilized a coupon payment system in which coupons were sold to eligible persons at 50 percent of their value with no limit on the number. The Senior Citizen's Taxi Program was funded by the city's general fund with an average subsidy of $.63 per trip.

Los Gatos, California

Elderly and disabled residents of Los Gatos, California, could purchase ten tickets, each good for a taxi trip anywhere within the city limits (Kirby & Tolson, 1977). The city reimbursed the taxi operator $2.10 per ticket out of revenue sharing funds, with the city paying the provider one month in advance based on average ticket use.

Palo Alto, California

In April 1975, Palo Alto, California, initiated a user-side subsidy program for mobility-impaired, low-income Palo Alto residents over eighteen years of age with funds appropriated by the city council from the general fund (Chatterjee et al., 1980). The enrollment grew to 685 residents with the transportation service being provided by the Yellow Cab Company. Books valued at $20.00 were sold to

eligible users at reduced prices with subsidies amounting to 50 percent, 70 percent, or 90 percent based on family income. There was a limit of one book per month; however, the book did not have to be used during the month it was purchased. The average meter fare was $2.70 with the average cost to users being $.45.

Oroville, California

The Oroville Express in Oroville, California, began in December 1977, using a private operator who utilized three taxis, one station wagon, one minibus, and one van with lift equipment in providing the service. Individuals who were older than sixty-five or handicapped could purchase tickets at no limit for $.65 a ticket (Chatterjee et al., 1980). There was no restriction on trip purpose, and the operator could redeem tickets for $1.75 each, except in the case of wheelchair trips which could be redeemed for $5.50 a ticket. In 1978, the average number of tickets used in a weekday was 200.

Malvern, Arkansas

In Malvern, Arkansas, a unique system existed wherein individuals over sixty, persons involved in mental health rehabilitation or work-study programs, and low-income children could ride free on South Central Arkansas Transit (SCAT) (UMTA, 1982). SCAT was subsidized by various agencies using several different funding sources in the amounts of $.36 per passenger-mile for Title 19 participants, $4.25 per passenger-hour and $.35 per passenger-mile for all eligible senior citizens, $5.00 per trip for all Saline mental health

clients, and $2.00 per trip for all eligible rehabilitation services. Approximately 5400 trips per month were subsidized. This program has been classified as a user-side subsidy because, although the subsidy was not placed directly in the hands of the individuals, only trips actually taken were subsidized.

Canon City, Colorado

Canon City, Colorado, operated a user-side subsidy program for all residents utilizing city, county, and Section 18 funds (UMTA, 1982). Books of ten coupons worth $20.00 were sold for half price throughout the city with a limit of one book per customer per month on a first-come, first-served basis. This was due to the limit on the number of coupon books printed monthly. The Canon City Taxi Company provided the service. The city was divided into zones with travel in one zone requiring one coupon, travel in two zones requiring two coupons, etc. There were no trip restrictions, and an average of 1200 trips per month were subsidized.

Differences Among the Programs

Although all the programs discussed above utilized the user-side subsidy concept, they varied in regard to client eligibility, available transportation mode, subsidy mechanism, amount of subsidy, and restrictions. Each of these characteristics is discussed below.

Eligibility

Most existing user-side subsidy programs have been initiated to provide service for the elderly and handicapped. Of the systems

inventoried, eighty-four projects provided a subsidy to elderly and/or handicapped individuals to ride taxis (UMTA, 1982). Due to physical limitations, these groups often encounter problems utilizing conventional transit. However, if specialized door-to-door service is available, the cost is usually prohibitive.

Examples of communities which had user-side subsidy programs for both elderly and handicapped include Wilmington, Dover, and Lewes, Delaware, Champaign, Illinois, and Lawrence, Massachusetts. For some user-side subsidy programs, eligibility is restricted only to elderly individuals. Examples of these included Lancaster, Ohio, Exeter, New Hampshire, and Alcoa, Tennessee. Sioux Falls, South Dakota, provided a subsidy only to handicapped individuals unable to use fixed-route service.

User-side subsidies are also used to ameliorate high transportation costs for persons with low incomes. For some programs an income test is applied to determine eligibility. For the West Virginia TRIP, in addition to being elderly or handicapped, participants also had to meet an income requirement. In the inventory conducted by Crain and Associates (UMTA, 1982), four user-side subsidy programs were restricted to low-income individuals. For example, Red Wing, Minnesota, utilized a local taxi company to provide transportation within the city limits to low-income residents.

For many social service organizations which are acting as the subsidizing agency, participation in the user-side subsidy program is limited specifically to their clients. In Van Buren County in

Michigan, the county department of social services subsidized the medical and dental trips of its clients.

In areas where there is not a government-operated transit system, user-side subsidies play an important role in providing transportation to all residents of the community via private suppliers. This is especially true in rural communities. User-side subsidy programs in Columbia Heights, and Hopkins, Minnesota, and Canon City, Colorado, had no restrictions on user eligibility.

Transportation Mode

As has already been mentioned, eighty-four programs were identified which provided user-side subsidies to elderly and/or handicapped individuals to ride taxis. Of these, three states, California, Kansas, and Wisconsin, accounted for forty-nine (UMTA, 1982). Taxis are the most widely utilized public transportation mode for these programs because they are the most accessible to the handicapped individual. As was previously mentioned, only 7 percent of the transportation handicapped population are unable to use taxis at all whereas 30 percent are able to use taxis as much as they like (Sahaj, 1978). "Currently about one-third of the trips taken by severely disabled individuals are by taxi" (Karash, 1976, p. 25).

User-side subsidies utilizing taxis have been implemented in a variety of operating environments. However, often changes must be made to local ordinances, especially those prohibiting shared-rides (Spear, 1981). These are done in order for the taxis to qualify as

mass transit and receive UMTA demonstration funds. In addition, changing the regulations could provide an incentive to the taxi operator to participate in these programs.

Although taxis provide the vast majority of the transportation service in user-side subsidy programs, Crain and Associates (UMTA, 1982) found in their inventory twenty-one programs that provided user-side subsidies for utilizing other transportation modes. Seventeen of these were for conventional bus service. In San Jose, California, the Santa Clara County Welfare Department provided subsidies to recipients of general assistance in order that they may utilize the transportation services of Santa Clara County transit. Other examples of communities which provided subsidies to individuals so that they may take advantage of bus services included Billings, Montana, and Baton Rouge, Louisiana. The previously described West Virginia Transportation Remuneration and Incentive Program is perhaps the best example of a user-side subsidy that made available a wide variety of transportation modes.

Subsidy Mechanisms

User-side subsidy programs differ in respect to the method of subsidy payment, with three types of mechanisms being most widely utilized (Spear et al., 1981). These are tickets, scrip, and vouchers. These methods differ in complexity and compatibility with existing transportation systems.

Tickets or coupons are purchased in advance with one ticket usually good for a one-way trip. In a zonal fare system, a ticket may be equal to a single zone fare. Canon City, Colorado, utilized

tickets with a zonal system. The tickets may be printed by the subsidizing agency and redeemed later by the transportation providers, or they may be purchased from the supplier and then sold to agency clients at a reduced rate. The former is more desirable from the standpoint of cash flow (Spear et al., 1981). The advantage of tickets or coupons is that they are easy to use by the client. However, problems arise when the fares vary according to trip length, such as with many taxi systems. Examples of user-side subsidy programs which provided tickets to their clients include Exeter, New Hampshire, Bangor, Maine, and Nevada, Missouri. The city of Oak Ridge also utilized coupons with its program; however, instead of a ticket being good for one trip, it was worth $1.00 with the client paying the difference if the fare was greater than this amount.

"Scrip is similar to tickets except that it is issued in multiple face-value denominations" (Spear et al., 1981, p. 215). It has the advantage over tickets in that it is more compatible with systems that have varied fares. However, it is somewhat more complex than tickets or coupons because the client and transportation operator must be responsible for multiple denominations, which creates a greater potential for mistakes. In addition, the burden on the subsidizing agency to keep track of the amount needed to reimburse the transportation operator may be increased.

Vouchers are different from tickets and scrip in that they are not prepurchased by the client. Instead, when a trip is made, the transportation operator fills out a voucher indicating the amount of

the fare, and the client then signs it. The voucher may be in the form of a charge slip with information such as trip purpose required. (These data can then be used to analyze the trip characteristics of the clients.) The inherent functional advantage of vouchers is that they are compatible with systems utilizing complex fares. Vouchers have another advantage in that, unlike tickets or scrip, there is no need for distribution outlets (Spear et al., 1981). Also they make third-party billing easier. The primary disadvantage of utilizing a voucher system is that the administration requirements of both the subsidizing agency and the transportation operator are increased. In addition, cash flow problems may be encountered by the subsidizing agencies. The Champaign-Urbana Mass Transit District, Champaign, Illinois, utilized vouchers in subsidizing elderly and handicapped individuals travelling by taxi. Sioux Falls, South Dakota, also employed a voucher system.

Besides the three main types of subsidy mechanisms already discussed, other variations of subsidy payments are also used. These are often utilized for nontaxi transportation modes. In Sacramento, California, passes were purchased by social service agencies for their clients in order that they may use regional transit. User-side subsidy programs in Arlington County, Virginia, and Billings, Montana, also employed passes as a subsidy payment mechanism. In some cases multi-ride tickets may be purchased by the subsidizing agency and then given or sold at a reduced rate to its clients. In Helena, Montana, and Baton Rouge, Louisiana, clients were given

bus tokens, and in Hartford, Connecticut, many programs provided their clients with a cash subsidy.

Amount of Subsidy

Another variable among the user-side subsidy programs is the amount of subsidy per trip. Many agencies limit this amount in order to control costs. For the states inventoried, subsidies ranged from 45 percent to 100 percent (UMTA, 1982). For the Glasgow, Montana, program, a sliding scale was used whereby the amount of subsidy was dependent on the client's ability to pay.

Restrictions

Limitations on which individuals are eligible for user-side subsidy programs have already been discussed; however, there may be additional restrictions imposed. In addition to limiting the amount of the subsidy to control the costs of the program, there are often limits on the number of subsidized trips that a client may take during a given time period. For example, if the subsidy mechanism is in the form of tickets, then the number of tickets a client may receive and utilize during a month may be limited. The city of Nevada, Missouri, limited its clients to sixteen one-way trips per month while Miles City, Montana, limited the number of tickets its clients could utilize to four per month.

A constraint sometimes imposed by certain user-side subsidy programs to limit demand is on the type of trip allowed to be taken by the client. Often trips are restricted to those for medical

purposes such as was the case with the programs in Bangor, Maine, and Van Buren County, Michigan (UMTA, 1982). In addition, the area in which trips may be taken is very often limited to the jurisdictional boundaries of the service supplier or the subsidizing agency. In the case of the programs in Excelsior Springs, Missouri, Red Wing, Minnesota, and Santa Fe, New Mexico, trips had to be taken within the city limits.

Two other limitations that are often incorporated into user-side subsidy programs are on the hours that a client may utilize the subsidy and the reservation procedures. The Pennsylvania program and the New Jersey program required their clients to utilize public transit only on off-peak hours while programs in Kansas City, Missouri, and Columbia Heights, Minnesota, required advance reservation when utilizing services subsidized by them. The Columbia Heights program required a two-hour advance notice while the Kansas City program advance reservation requirement was one day.

Service and Methods Demonstration Programs

The Office of Service and Methods Demonstrations (SMD) of the Urban Mass Transportation Administration, in order to evaluate the user-side subsidy concept, undertook studies of subsidized taxi programs in the San Francisco Bay area, the statewide TRIP in West Virginia, and two locally funded user-side subsidy projects in Kansas City, Missouri, and the Los Angeles Harbor area. In addition, SMD funded demonstration programs in Danville, Illinois, Kinston,

North Carolina, Lawrence, Massachusetts, and Montgomery, Alabama. Table 2 shows a comparison of the characteristics of these demonstration projects.

Danville, Illinois

The user-side subsidy demonstration in Danville, Illinois, began in December 1975 with shared ride taxis for the elderly and handicapped (Kirby & Tolson, 1977). Twenty-five percent of the fare was paid for with the client signing a voucher for the remainder. Each client was limited to a maximum of twenty dollars worth of service per month. By December 1976, a third of the 7500 individuals eligible for the service had registered.

In addition, Danville tested the feasibility of a fixed-route transit service by contracting with private providers utilizing the user-side subsidy concept (Public Technology, Inc., 1977, 1978a, 1978b, 1978c, 1978d, 1978e, 1978f, 1978g, 1978h, 1978i, 1979a, 1980a, 1980b, 1980c, 1980d). For this service, called the Runaround, everyone could ride for a subsidized fare of forty cents with students, elderly, and handicapped eligible for a further subsidized fare in the amount of twenty cents. The amount of subsidy for the transit service was $1.25 for $.40 ticket users and $1.45 for $.20 ticket users. Tickets were sold at thirty-two outlets including banks, groceries, and drugstores. Although these were problems with attracting ridership due to service changes every four months, state and federal funds were acquired to continue the program when demonstration funds ended in July 1979.

Table 2. Summary of SMD user-side subsidy projects

	Danville	Montgomery	Kinston	Lawrence
Eligible Target Groups	over 65 handicapped	over 65 handicapped	over 65 handicapped	over 65 handicapped
Eligible Population (est.)	7500	21,000	4000	12,600
Taxi Service Area (sq. mi.)	12.9	46.4	6.1	6.8
Subsidy Mechanism	vouchers	vouchers	scrip	tickets
Subsidy Distribution Arrangements	none needed	none needed	1 main office and 8 rotating outlets[1]	1 main office
Taxi Fare Structure	4 zones	400 zones	4 zones	2 zones
Discounted Taxi Fare with Subsidy	50% off	50% off	50% off	50% off
Monthly Purchase Limit[2]	$20 (14-16 trips)	$30 (16-20 trips)	$35 (16-20 trips)	$20 (13-16 trips)
Maximum Subsidy per Trip	anywhere in city	anywhere in city	anywhere in city	anywhere in city
Advanced Reservation Requirements	none	none	none	none

[1] In Kinston, ticket outlets were established at senior citizen and handicapped activity centers and manned on a rotating schedule during the week.

[2] Total undiscounted value of tickets or vouchers.

Source: User-Side Subsidies: Delivering Special Needs Transportation Through Private Providers by Bruce D. Spear, 1982, 2.

Kinston, North Carolina

Kinston, North Carolina, with a population of 26,000, had no public transportation system, but was served by eight independent taxi companies (Public Technology, Inc., 1978j, 1978k, 1979c, 1979d, 1980e, 1980f, 1980g, 1980h, 1980i, 1980j, 1980k). In addition, the Community Action Agency provided some limited van service for senior citizens travelling to medical appointments.

Persons eligible for the user-side subsidy program had to be over sixty-five or handicapped. By November 1978, out of the 2500 individuals then eligible for the service, over 600 had registered. A maximum of $25.00 worth of scrip could be purchased a month with clients paying 50 percent of the face value. The scrip was sold in denominations of $1.00 and $.50 at sites located near large concentrations of the elderly. These sites were open on a rotating basis.

At the end of the demonstration, the City of Kinston, in order to continue the project, applied for federal funds for non-urbanized areas available under Section 18 of the Urban Mass Transportation Act as amended.

Lawrence, Massachusetts

Lawrence, Massachusetts, with a population of 67,000, was served by nine taxi companies and one privately-owned bus company (Public Technology, Inc., 1978l, 1979e, 1979f, 1980l, 1980m, 1980n, 1981, 1982a, 1982b). Its user-side subsidy program, which began as a service and methods demonstration project, was called TRANSFARE, with the elderly and/or handicapped being the recipients of the subsidy.

Originally eight of the nine taxi companies and the bus company participated in the program with the other taxi company excluded due to potential conflict of interest by the owner. In September 1979, one company added two cabs, and in January 1979, the previously excluded taxi service was allowed to participate, bringing the number of taxis available for TRANSFARE service to seventy-four.

Clients could purchase a book of twenty-five bus tickets for $.25 a ticket book, or $.01 a ride, with a book containing ten dollars worth of taxi tickets being sold for half-price. Each taxi ticket was worth $.25. There was no limit on the number of bus trips. The clients were limited to four one-way taxi trips a week with each one-way trip limited to a total cost of $2.50; however, in July 1979, this limit was raised to $2.75.

In April 1979, a special service which utilized two lift-equipped vans was instituted as part of the user-side subsidy program. In order to participate in this program individuals needed special approval and certification. By October 1979, seventy-seven persons had registered for this special service. The fare was $7.50 with TRANSFARE contributing $5.00 and the client supplying the rest. This service was discontinued in late 1979 by the provider.

At the end of the Service and Methods Demonstration, the City of Lawrence and the Merrimack Valley Regional Transit Authority (MVRTA) assumed joint funding of the user-side subsidy program. In addition, MVRTA reinstated the van service that had been discontinued; however, this time five companies owning a total of thirty vans were involved.

Montgomery, Alabama

In Montgomery, Alabama, individuals who were over 65 or handicapped were eligible for the user-side subsidy program. Taxi service had to be requested from one of the participating companies at least one hour in advance with clients paying for the service by signing a voucher. The total undiscounted value of the vouchers per eligible person was limited to $30.00 a month with the amount of the subsidy set at 50 percent.

Problems were encountered with taxi companies failing to participate. Only three out of sixteen companies in the area were involved with the program (Spear et al., 1981). Reasons cited for declining to participate or for dropping out included not wanting to convert from the existing meter system to a more complex mechanism, and problems with utilizing vouchers, which were thought to cause delay in the service. In addition, there were complaints of not being promptly reimbursed.

Montgomery also utilized the user-side subsidy concept with its bus system. Tickets could be obtained at a central office or through the mail. Eligible individuals could ride on the buses free during the off-peak and for $.15 during the peak.

Summary

As can be seen from the previous discussion, there have been many programs utilizing user-side subsidies in the United States. The inventory by Crain and Associates (UMTA, 1982) provides a cursory view of

these programs, most of which provide subsidies to the elderly and/or handicapped in order that they may utilize taxis. These include most of those user-side subsidy programs funded by the Office of Service and Methods Demonstration of the Urban Mass Transportation Administration and are therefore well documented.

In contrast to those programs that provide transportation subsidies to individuals only for use on taxis, the Transportation Remuneration and Incentive Program (TRIP) of West Virginia provided subsidies to individuals in order that they could utilize a wide variety of transportation modes. This program has also been examined extensively; however, most such programs are not administered on as large a scale, and those programs that are similar but smaller are not well documented. This thesis documents and evaluates certain aspects of one of these programs, the Transportation Remuneration and Incentive Program (TRIP) of Evansville, Indiana.

CHAPTER III

TRANSPORTATION REMUNERATION AND INCENTIVE PROGRAM OF EVANSVILLE, INDIANA

Background

The City of Evansville is the county seat of Vanderburgh County and is located in southwestern Indiana on the Ohio River. It occupies forty-seven of the 236 square miles of the county. Major industries in the area include Whirlpool, Mead Johnson, and the Alcoa Warrick Operations.

Evansville has an elected mayor with a nine-member common council that passes on all city appropriations. Vanderburgh County has an elected three-member Board of Commissioners and nine-member council.

The 1980 Census shows the city having a population of 130,496, a decrease of almost 6 percent from 1970, with Vanderburgh County having a population of 167,515. A 1977 study done by the Evansville Urban Transportation Study (EUTS) indicated 21,537 elderly individuals living in the city with an additional handicapped population of 10,671. The 1980 Census shows a similar number of elderly, 22,995, which included elderly handicapped.

There are three airlines, two private bus lines, one public bus service, and one taxicab company serving the city. In addition, two private companies provide specialized transportation services to those

individuals utilizing wheelchairs. Two public agencies also supply transportation to elderly and/or handicapped individuals.

Program Initiation

The Transportation Remuneration and Incentive Program, a user-side subsidy project patterned after the West Virginia program of the same name, grew out of discussions between the city administration and the Southwestern Indiana Regional Council on Aging (SWIRCA). The original program was a pilot designed to assist individuals with arrangements for transportation to facilitate their mobility. The elderly and handicapped were chosen as the target population because of the EUTS report identifying them as transportation disadvantaged. The primary goal of TRIP is the provision of means for these individuals living in Vanderburgh County to remain independent as long as possible (City of Evansville, 1982).

The original proposal was submitted to SWIRCA in 1977. Because SWIRCA operates on a yearly basis, the contract awarded from the proposal was for the final six months of that year. A director was hired who served as TRIP's only employee from the beginning of the program until March 1979.

Potential clients were first contacted at meetings held at senior citizen sites and housing developments. In addition, applications were distributed to social service agencies. The first 100 elderly or handicapped individuals who applied were accepted, with the breakdown between the elderly and handicapped based on national percentages.

Title III provided $10,000 for start-up costs with all but $1000 utilized for transportation; therefore, TRIP operated on excess transit capital assistance (city funds) until 1979 when they began to utilize federal funds to cover administration.

In 1978, when the program was deemed eligible to expand to include additional federal funding sources, a planning committee was established. Its purpose was to respond to the city's problem of duplicating separate transportation services and the perceived inefficiency that this represented. The original focus of this committee was to design a program that coordinated the underutilized vans owned by various agencies in order to make more efficient use of available transportation. However, the agencies that used vans hesitated to provide transportation for any purpose other than transporting their clients to their facilities. Therefore, the planning committee developed instead a larger version of the pilot that had been developed to assist the elderly and handicapped with their transportation needs.

Funding Sources

TRIP is actually two programs, TRIP III and TRIP XX, based on the two main funding sources, Title III of the Older Americans Act and Title XX of the Social Security Act of 1935 as amended.

Title III, the original funding source of TRIP, is a federal-state formula grant program (Institute of Public Administration, 1975) administered in Indiana by the Council on Aging, which provides funds

to services which help the elderly to live at home as long as possible. TRIP III began in July of 1977 as the original pilot program. Currently additional funding sources for this program include the City of Evansville, Community Development Block Grant (CDBG) Funds, and the Older Hoosiers (state funds used as a match for local funds). The city portion, including CDBG funds, makes up 9 percent of the total.

TRIP XX began in March of 1979 with the addition of Title XX funding. Title XX is also a federal-state formula grant program providing for social services to those persons who meet specific income criteria or who receive supplemental security insurance (SSI) or aid to families of dependent children (AFDC) (Institute of Public Administration, 1975). In Indiana Title XX funds are administered by the Social Services Fiscal Office (SSFO). Any service is eligible as long as it helps to meet one of the goals of the Title XX program. TRIP XX is directed toward the goal of "achieving or maintaining self-sufficiency, including reduction or prevention of dependency" (City of Evansville, 1982). The funding contract for TRIP XX is renegotiated each spring prior to the beginning of the fiscal year on July 1. Each agency utilizing Title XX funds is evaluated by a point system based on an actual cost statement, yearly audit by the SSFO, use of current contract, and a quality review. If TRIP XX maintains 95 percent of the total point value, they are eligible for 100 percent of the current contract for the following year; however, SSFO can decrease funding to TRIP if the federal government reduces the amount of Title XX monies available. The City of Evansville makes

up 12.5 percent of the total contract, including CDBG funds, with the state matching this amount. Actual city monies make up 10.3 percent.

Program Administration

TRIP XX receives money for administration only by serving clients. Currently for every $1.00 that is spent for transportation, they receive $.36 for administration. This amount has changed almost yearly from 1979 when they received $.20 for every dollar spent.

TRIP is a city agency and is responsible to the mayor. TRIP employs two full-time employees which include the Director, and an Assistant Planner, and two part-time secretary-clerks. (An organizational chart of the agency is located in Appendix A.) TRIP personnel are supplemented through the use of two part-time volunteers.

There is also a TRIP advisory board and a TRIP technical board. The advisory group consists of representatives of social service agencies that serve the elderly and handicapped. The official function of the advisory board is "to make recommendations about existing and proposed programs and to assist in quality assurance functions" (Muller, January 1984). The technical group consists of the transportation carriers. This board advises TRIP personnel on problems concerning the program, clients, etc. In addition, the board assists in controlling abuse.

Transportation Carriers

A list of known carriers was compiled and each was contacted by the planning committee about participating in TRIP. Originally six of the eight transportation carriers chose to become involved. The two companies that did not participate were Chair-Lance and Aid-Care Van. Chair-Lance went out of business prior to the end of 1977. In March 1979, TRANSCORT, a new carrier, became involved in the program with Aid-Care Van deciding to participate in January 1980. Two of the original carriers, Cab-U-Lance, also known as the Evansville Shuttle Service, and Herbie's Wheelchair Vans, have since gone out of business. The remaining transportation carriers include the Metropolitan Evansville Transit System (METS), Yellow Taxi, Supportive Services for the Independent Living for the Elderly (SMILE) and Bassemiers Transportation Service, Inc.

The Southwestern Indiana Regional Council on Aging, Inc. (SWIRCA) utilizes one automobile sedan in providing the elderly with transportation to medical appointments within Vanderburgh County. The service, known as TRANSCORT, is operated forty hours a week, Monday through Friday. Clients must contact the SWIRCA office as soon as they have made a doctor's appointment in order to schedule transportation. No fare is required, but a donation of $5.00 is suggested.

Aid-Care Van utilizes five wheelchair vans and three automobiles in providing its door-to-door transportation service. Aid-Care operates twenty-four hours a day, seven days a week, with

the fare for a one-way wheelchair trip being $10.00. The cost of a one-way ambulatory trip is $7.50. Trips are limited to Vanderburgh County.

The Metropolitan Evansville Transit System (METS) operates fifteen buses out of a twenty-nine bus fleet on thirteen fixed routes. Sixteen of the buses in the fleet are equipped with wheelchair lifts. The transit service operates Monday through Saturday from 5:45 a.m. to 6:15 p.m. and is confined to the Evansville city limits. Service frequency is sixty minutes on eight routes and thirty minutes on five routes. Fares are $.50 for adults and $.25 for students. The elderly and handicapped are also offered a reduced fare of $.25 during the off-peak hours of 8:45 a.m. to 2:15 p.m. Transfers are $.10.

Yellow Taxi operates thirty-six vehicles of which twelve are Chryslers and the rest are Checkers. The door-to-door service is provided seven days a week, twenty-four hours a day and is limited to within twenty-five miles of the Evansville City Limits. The fare is $1.30 plus $1.90 for the first mile and $1.00 for each additional mile. There is no advance reservation requirement.

Supportive Services for the Independent Living for the Elderly (SMILE) is a transportation service for disadvantaged individuals operated by the Community Action Program of Evansville (CAPE). SMILE operates seven 14-passenger vans of which three are equipped with wheelchair lifts. Service is provided Monday through Friday from 8:00 a.m. until 5:30 p.m. There is no advance reservation requirement or restriction on trip purpose; however, trips must be taken within Vanderburgh County. TRIP clients pay $1.00 per one-way trip.

Bassemier's Transportation Service, Inc. operates a door-to-door service utilizing six vans seven days a week, twenty-four hours a day including holidays. All vehicles are wheelchair-lift equipped; however, the service is not limited to those individuals who are handicapped. In addition, clients are not required to obtain an advance reservation although a twenty-four hour notice is preferred. The fare for the service is $10.00 per one-way trip.

In addition to the six regular transportation carriers, the city department of parks and recreation operates a 1978 Ford van that is occasionally used for senior citizen activities. TRIP tickets may be utilized for this service also; however, there is no set fare, but a donation of $.50 is requested.

Program Eligibility

Eligibility for TRIP has narrowed since the beginning of the program in 1977. Originally all elderly or handicapped individuals were eligible; however, due to limited funding, TRIP could not meet the demand for its services. Therefore, priorities had to be established. In May 1980, the TRIP advisory board developed a list of eligibility requirements to be utilized in accepting new clients into the program. (A list of these priorities may be found in Appendix B.) An additional priority was added in January 1981 which included those individuals who "because of physical or mental disability cannot use public transportation without assistance" (City of Evansville, 1982). Beginning July 1, 1981, fiscal

year 1982, TRIP was advised by the SSFO that they could no longer serve the mentally disabled. In addition, TRIP was informed that beginning in fiscal year 1983, TRIP XX clients must be physically handicapped; therefore, nonhandicapped elderly clients were excluded.

Before individuals can be accepted into TRIP, they must also meet certain income requirements. Originally for TRIP XX, the maximum income for nonhandicapped persons was 50 percent of the median income of Indiana; for handicapped persons of any age, the maximum income was 80 percent of the median income. Nonhandicapped individuals are no longer eligible for TRIP XX and the maximum income for handicapped is now 150 percent of poverty level. (See Appendix C.)

The current eligibility requirements for both programs are applicant must be equal to or under 150 percent poverty income level; applicant must be in "need" of transportation assistance (Advisory Board Guidelines); and applicant must not have alternative available transportation. For TRIP III only the applicant must be over sixty, and for TRIP XX only the applicant must be handicapped.

Public service radio commercials were distributed in 1981 to advertise TRIP; however, since that time it has not been necessary to solicit clients for the program.

Program Operation

All applicants must fill out an application and be interviewed to determine need. The application contains questions concerning

current access to transportation, requested means of transportation, income, financial aids and subsidies, and requested destinations. (A copy of this application is located in Appendix D.) At the time of the interview a staff member or a volunteer "visually" evaluates the applicant's general health and his or her need for mobility aids. Income is verified through the Department of Welfare and the Social Security office. In addition, in order for the applicant to receive TRIP tickets, it must be ascertained that neither the individual nor anyone in his or her household can perform the needed service.

Once program eligibility has been determined, the applicant is sent a letter describing the program for which he or she qualifies, instructions for obtaining tickets, rules and regulations and information concerning the transportation carriers, their available services and fares. (See Appendix E.)

TRIP clients receive scrip, referred to as tickets by the TRIP office, which they may use in place of cash for various transportation services. Persons funded through Title III receive books of tickets and are asked for a donation based on income. (See Appendix F.) These client donations help to fund TRIP III. In contrast, TRIP XX clients are not asked to donate, since this would be against federal regulations.

Originally TRIP III clients could receive up to six four-dollar books each month; however, this has been reduced to five books monthly if the individual is unable to utilize the city bus or three books if they are able to use public transit. Tickets are in $.25

denominations. Nonambulatory clients receive books worth $40.00 with tickets in $5.00 denominations. Tickets may be received by mail or picked up at the TRIP office.

TRIP XX clients are assigned a number and are mailed a specified amount of tickets, with the dollar value based on the recommendation of the staff member conducting the initial interview. This recommendation is based on an estimation of the cost of transportation needed to access medical care and life support needs. Each ticket is marked with the client's number. TRIP XX clients receive books worth $4.00 for ambulatory and semiambulatory clients, and $40.00 for nonambulatory clients. The TRIP XX client's usage is reviewed quarterly with the potential for a reduction in the number of books if the actual usage is less than first anticipated. In addition, a survey is conducted annually before recertification to determine changes in the client's needs. (This survey form is similar to the application form. A copy of this form is located in Appendix G.) TRIP III clients must also complete a survey annually.

The date of recertification is determined by the anniversary of the date that the client's application was signed. TRIP III clients are recertified yearly. TRIP XX clients are recertified yearly if they are over sixty or on a fixed income. Clients who do not meet these qualifications are recertified every six months. Clients are notified sixty days in advance of the recertification date by a letter mailed with their tickets. (See Appendix H.) If the client does not respond to the letter within thirty days, the

tickets are held and the person is sent a final notification. (See Appendix H.) Individuals who are unable to come to the TRIP office to be recertified may send a relative, counselor, or friend to complete the necessary paperwork, or may complete the paperwork by mail.

After use, tickets are returned to the TRIP office at the end of each month by the carrier for cash value reimbursement. For TRIP XX, the tickets are assembled in numerical order by carrier, and the dollar value is entered in the appropriate column on the client's usage sheet. (See Appendix I.)

Restrictions

There is no limit on the amount of tickets that may be used monthly out of the individual's allotments; therefore, tickets may be carried over as needed. However, at the beginning of TRIP XX's fiscal year, the color of the tickets is changed and the old color voided. Because most TRIP III clients give a donation for tickets, they may exchange their old tickets for the new ones.

Although the advisory committee has issued within its eligibility requirements guidelines concerning the priorities of trips taken with TRIP tickets, it has been recognized by the TRIP office that limiting the tickets by priority "creates a means for the client to request services on that basis, and then contend that the continued need of service is based on those priorities" (City of Evansville, 1982). Therefore, TRIP places no restrictions on the types of trips that must be taken with TRIP tickets; however, all

clients are advised that, due to restrictions in allotments and TRIP's budget, necessary trips must be made before recreational trips.

System Abuse

Fraud is guarded against in several ways. The primary protection is by screening and documenting the need, handicap, illness, and income of each client and by informing each client of the rules and regulations. Receipts are required on any trip costing more than $5.00. In addition, recently receipts have begun to be required for all trips taken by taxi. METS and SMILE drivers are also asked to note any suspicious users of TRIP tickets.

Summary

The Evansville TRIP is basically two programs, TRIP III and TRIP XX, designed to facilitate transportation for the elderly and/or handicapped. Through a user-side subsidy, the program provides qualified individuals the opportunity to utilize the services of various transportation carriers including bus, taxi, and specialized wheelchair services.

CHAPTER IV

METHODOLOGY

The purpose of this research is to examine the Evansville TRIP in detail, and to subject to evaluation three areas of the program. These include the TRIP agency, the transportation carriers, and the TRIP XX clients. The TRIP XX clients were chosen for study due to the Title XX reporting requirements, which provided in-depth data concerning transportation usage. Permission for access to client records was granted by the Indiana Social Services Fiscal Office, funding source for TRIP XX (Muller, December 8, 1981).

A sample size of 226 was determined to be minimal to provide a confidence level of 95 percent associated with statistical estimates accurate within 5 percent (Hendel, 1977). The first 270 individuals who came to the TRIP office for recertification during March of 1972 and who had been on the program since January 1, 1981, were chosen for the sample. The date of recertification is determined by the anniversary of the signature date on the client's application. The time at which the client chooses to apply to TRIP is determined by the individuals themselves. Therefore the sample can be considered essentially random. Of the 270 individuals initially chosen for the sample, twelve were deleted due to insufficient data.

The sample was divided into two groups: those clients who were ambulatory or semiambulatory and those clients who utilized

wheelchairs. Sources of data analyzed to obtain information about the TRIP XX client were the 1982 questionnaires and client usage sheets. In addition, transportation receipts were examined for those clients utilizing wheelchairs.

The questionnaires completed by the clients during the recertification process were used to obtain pertinent data about the client, such as handicap code, race, sex, number in household, and marital status. These data were tabulated and descriptive statistics were calculated to get an indication of the characteristics of the TRIP XX clients.

Other information obtained from these questionnaires included data concerning trip purpose. Descriptive statistics were employed in order to ascertain the distribution of types of trips taken by the TRIP XX client. The 1982 questionnaire also included a question concerning the type of transportation mode utilized most frequently by these individuals. The answers to this question were tabulated in order to determine what transportation service is used most often by the TRIP XX clients.

A better indication of the transportation carrier utilized most frequently is obtained by analyzing the usage sheets. These sheets report for each client the amount spent on each transportation mode. In addition, these cost figures are given by month and then summed by quarter. This allows for identification of the months in which more trips are taken and determination of services used most frequently during certain times of the year.

The trip purpose and the mode of transportation used can be determined specifically for wheelchair bound individuals by examining receipts indicating trip origin and destination, client name, date, and cost of the trip. Although receipts were required of the providers of service for the clients using wheelchairs by the state contract beginning July 1, 1981, the TRIP office initiated the procedure in January of that year in order to familiarize the carriers. Receipts for trips made between March 1, 1981, and February 28, 1982, were inspected for wheelchair bound clients in the sample to gather data on trip origins and destinations. These data were analyzed to determine the most frequently utilized transportation service and trip purpose for those TRIP XX clients using wheelchairs.

In order to obtain information concerning TRIP itself, a questionnaire was mailed to Kathy Muller, the director of the program. (A copy of this questionnaire is in Appendix J.) Questions dealt with the history of the program, eligibility requirements, registration and recertification procedures, organizational makeup, funding sources, costs, ticket distribution and reimbursement, restrictions imposed, and problems. In addition to the questionnaire, several meetings and phone conversations were held with Ms. Muller between March 1982 and March 1984 in order to clarify issues concerning TRIP III and TRIP XX. In addition, Ms. Muller answered many questions through written correspondence during this time period.

A questionnaire was also sent to the six transportation carriers that presently supply service to TRIP clients with a cover

letter from the director of TRIP. (A copy of this questionnaire and the cover letter are in Appendix K.) (The city parks and recreation department was not included due to their limited participation in TRIP.) This questionnaire provided a description of the services available to TRIP clients and the problems or benefits that may be received by these carriers from their participation in TRIP. Areas covered by the questionnaire included the services provided, TRIP participation, administration, effects of TRIP, and problems.

CHAPTER V

FINDINGS

TRIP Clients

General Characteristics

The descriptive statistics used in this discussion are based on sample data. Inferences to the TRIP XX population are accurate within 5 percent with a 97.5 percent degree of confidence.

The majority of TRIP XX clients, 67.1 percent, are single white females. (See Table 3.) This category includes those women who were married at one time, but are now divorced or widowed. Single black females account for the second largest category of TRIP XX clients, 16.7 percent. Females outnumber males approximately six to one. There are no married black females in the sample and only a small percentage, 0.7, are married black males. Married clients account for only 6.5 percent of the total TRIP XX sample. A large percentage, 78.3, of TRIP XX clients are the sole person in their household; however, single clients make up 93.5 percent of the total. (See Table 4.) Therefore, this appears to indicate that approximately 15 percent of the single clients are living in households with other individuals.

Those TRIP XX clients who are classified by the agency as handicapped, semiambulatory comprise 34.9 percent of the sample with nonhandicapped, ambulatory clients accounting for 27.9 percent.

Table 3. Distribution of clients by race, sex and marital status

Sex / Race	Female			Male			
	Single	Married	Total	Single	Married	Total	Totals
Black	43 (16.7%)	0 (0.0%)	43 (16.7%)	3 (1.2%)	2 (0.7%)	5 (1.9%)	48 (18.6%)
White	173 (67.1%)	7 (2.7%)	180 (69.8%)	22 (8.5%)	8 (3.1%)	30 (11.6%)	210 (81.4%)
Totals	216 (83.7%)	7 (2.7%)	223 (86.4%)	25 (9.7%)	10 (3.9%)	35 (13.6%)	258 (100.0%)

Table 4. Distribution of clients by household size

Number in Household	Number of Clients	Percentage of Total
1	202	78.3
2	42	16.3
3	7	2.7
4+	7	2.7
	258	100.0

(See Table 5.) The smallest group of TRIP XX individuals is the nonhandicapped semiambulatory, 5.8 percent. The handicapped nonambulatory (wheelchair bound) clients total 9.3 percent.

Table 5. Distribution of clients by handicap code

Classification	Number of Clients	Percentage of Total
Nonhandicapped ambulatory	72	27.9
Nonhandicapped semiambulatory	15	5.8
Handicapped ambulatory	57	22.1
Handicapped semiambulatory	90	34.9
Handicapped nonambulatory (wheelchair)	24	9.3
	258	100.0

Nonwheelchair Bound Questionnaire Results

On the 1982 survey, 68.8 percent of the nonwheelchair bound TRIP XX clients disclosed that they were able to use the bus. (See Table 6.) Of these individuals, 50.9 percent indicated that they primarily use the public bus service, METS. (See Table 7.) The inability to use transit was mentioned by 23.1 percent of the TRIP XX clients not confined to wheelchairs. SMILE, with

Table 6. Distribution of nonwheelchair bound TRIP XX clients by ability to use transit

Able to Use Bus?	Number of Clients	Percentage of Total
Yes	161	68.8
No	54	23.1
N/A	19	8.1
	234	100.0

Table 7. Distribution of nonwheelchair bound TRIP XX clients by ability to use transit and transportation service choice

	Able to Use Bus?							
	Yes		No		N/A		Total	
	Number of Clients	Percentage of Total	Number of Clients	Percentage of Total	Number of Clients	Percentage of Total	Number of Clients	Percentage of Total
METS	82	50.9	0	0.0	2	10.5	84	35.9
Yellow Taxi	31	19.3	21	38.9	3	15.8	55	23.3
SMILE	30	18.6	29	53.7	3	15.8	62	26.7
Bassemiers	0	0.0	1	1.9	1	5.3	2	0.9
N/A	18	11.2	3	5.6	10	52.6	31	13.2
	161	100.0	54	100.1	19	100.0	234	100.0

53.7 percent, was the service most utilized by these individuals. Yellow Taxi was designated by 38.9 percent of TRIP XX clients unable to use transit as the service used most frequently. Of all the clients not confined to wheelchairs, METS was the most widely utilized transportation carrier (35.9 percent). SMILE was indicated by the second largest percentage of TRIP XX clients, 26.7 percent, followed closely by Yellow Taxi with 23.3 percent.

From the results of the 1982 questionnaire, TRIP tickets were used for grocery shopping by the greatest percentage of nonwheelchair bound TRIP XX clients. (See Table 8.) Of the clients who answered this question, 80.6 percent specified that they used TRIP tickets for this purpose. For these individuals the average number of trips per month for grocery shopping was 4.14. Following grocery shopping, TRIP XX tickets were used most frequently for transportation to doctor's appointments. This purpose was indicated by 55.9 percent of those answering this question, for an average number of trips per month of 2.14. Although only 6.5 percent of the individuals who answered this question designated TRIP tickets for the purpose of volunteer work, those who did had the highest average number of trips per month, 9.36.

Nonwheelchair Bound Usage Sheet Results

From analyzing the client usage sheets for fiscal year 1982 (July 1982 to June 1983), the amount spent per month per nonwheelchair bound client was determined with the greatest amount spent for Yellow Taxi transportation services. (See Table 9.) The peak month for

Table 8. Distribution of nonwheelchair bound TRIP XX clients by trip purpose (questionnaire)

Trip Purpose	Percentage of Clients	Average Number of Trips per Month
Grocery	80.6	4.14
Doctor	55.9	2.14
Other shopping	50.0	3.19
Visit	43.5	2.97
Medicine	35.3	2.03
Business	31.8	2.07
Church	22.9	3.86
Welfare/Food stamps	21.2	1.00
Senior citizens	19.4	5.79
Beauty/Barber	15.9	2.91
Laundromat	14.1	2.56
Recreation	11.8	4.35
Nutrition	8.8	6.73
Volunteer	6.5	9.36
Work	2.9	7.20
Other	2.4	1.63
Therapy	0.6	3.00

Note: Sixty-four clients did not respond to this question.

Table 9. Average amount spent per month by nonwheelchair bound TRIP XX clients by transportation carrier (usage sheets), Fiscal Year 1982

	Transportation Carrier				
	METS	Yellow Taxi	SMILE	Transcort[1]	Other
1982 July	$2.76[2]	$5.17	$2.14	$.02	$.04
August	3.04	4.44	2.14	.00	.03
September	2.97	4.80	2.01	.03	.00
October	3.25	5.30	1.81	.00	.02
November	2.59	4.86	1.96	.00	.04
December	2.13	5.91	2.27	.06	.05
1983 January	1.96	5.26	1.79	.00	.12
February	2.31	5.24	1.56	.00	.01
March	2.49	6.09	1.94	.00	.09
April	2.46	5.55	1.97	.00	.17
May	2.47	6.12	1.74	.00	.13
June	2.60	6.37	2.10	.00	.05

[1]Transcort and Other were included for completeness.

[2]Averages based on 234 clients.

for taxi trips was June ($6.37) followed closely by May ($6.12). Although the greatest amount of tickets per month was used for the taxi, the greatest number of trips per month taken with TRIP XX tickets was with METS, with the peak month being October, followed by August. (See Table 10.) The fewest number of METS trips were taken during January.

Wheelchair Bound Questionnaire Results

From the 1982 questionnaire, 66.7 percent of the TRIP XX clients who utilized wheelchairs revealed that Bassemier's was the service used most frequently with TRIP XX tickets, with 20.8 percent designating Aid-Care. (See Table 11.)

Grocery shopping was the trip purpose mentioned by the greatest number of both wheelchair clients and nonwheelchair bound clients. (See Table 12.) The individuals utilizing wheelchairs who used TRIP XX tickets for this purpose indicated an average number of 2.4 grocery trips per month. Shopping, not including grocery, was mentioned by the second greatest number of wheelchair bound clients (50.0 percent) for an average of 2.1 trips per month. This trip purpose ranked third for nonwheelchair bound clients. The highest average number of trips per month was for therapy, 9.0; however, only 6.3 percent of the wheelchair bound clients who answered this question specified this trip purpose.

Table 10. Average number of one-way trips taken per month by non-wheelchair bound TRIP XX clients by transportation carrier (usage sheets), Fiscal Year 1982

	Transportation Carrier				
	METS	Yellow Taxi	SMILE	Transcort[1]	Other
1982 July	7.89[2]	1.29	2.52	0.00	--
August	8.69	1.11	2.52	0.00	--
September	8.49	1.20	2.36	0.01	--
October	9.29	1.33	2.13	0.00	--
November	7.40	1.22	2.31	0.00	--
December	6.09	1.48	2.67	0.01	--
1983 January	5.60	1.32	2.12	0.00	--
February	6.60	1.31	1.84	0.00	--
March	7.11	1.52	2.28	0.00	--
April	7.03	1.39	2.32	0.00	--
May	7.06	1.53	2.05	0.00	--
June	7.43	1.59	2.47	0.00	--

[1]Transcort and Other were included for completeness.

[2]Averages based on 234 clients.

Table 11. Distribution of wheelchair bound TRIP XX clients by service used most frequently (questionnaire)

Transportation Service	Number of Clients	Percentage of Total
Bassemiers	16	66.7
Aid-Care	5	20.8
SMILE	1	4.2
N/A	2	8.3
	24	100.0

Table 12. Distribution of wheelchair bound TRIP XX clients by trip purpose (questionnaire)

Trip Purpose	Percentage of Clients	Average Number of Trips per Month
Grocery	62.5	2.4
Other shopping	50.0	2.1
Doctor	31.3	1.7
Business	31.3	1.4
Visit	31.3	2.5
Beauty/Barber	25.0	2.0
Recreation	18.8	4.5
Church	18.8	3.3
Laundromat	6.3	4.0
Welfare/Food stamps	6.3	1.0
Nutrition	6.3	1.0
Medicine	6.3	4.0
Therapy	6.3	9.0
Volunteer	6.3	8.0
Work	0.0	0.0
Senior citizens	0.0	0.0
Other	0.0	0.0

Note: Eight clients did not respond to this question.

Wheelchair Bound Receipt Results

From analyzing the actual receipts of wheelchair trips, Bassemiers was the service most frequently utilized (70.4 percent). (See Table 13.) This is consistent with the information obtained from the 1982 survey. Aid-Care provided the transportation for 29.4 percent of the wheelchair trips.

Table 13. Distribution of wheelchair bound TRIP XX clients by service used most frequently (receipts)

Transportation Service	Percentage of Trips
Bassemiers	70.4
Air-Care	29.4
Other	0.2
	100.0

Note: Receipts were not located for two clients.

The most frequently taken trips by wheelchair bound TRIP XX clients, according to actual receipts, were for the purpose of visiting or shopping (other than grocery). (See Table 14.) The receipts showed 81.8 percent of the clients utilizing wheelchairs participating in these trip purposes for an average number of 18.17 visit trips a year and 16.94 shopping trips a year. This is somewhat different from the questionnaire which showed shopping trips ranking second and visit trips ranking third. Grocery shopping, which ranked first in the questionnaire results, came in fourth by the actual

Table 14. Distribution of wheelchair bound TRIP XX clients by trip purpose (receipts)

Trip Purpose	Percentage of Clients	Average Number of Trips per Year
Other shopping	81.8	16.94
Visit	81.8	18.17
Recreation	68.2	13.73
Grocery shopping	54.5	7.83
Other	54.5	7.33
Church	45.5	19.50
Doctor	40.9	6.44
Business	31.8	7.71
Therapy	27.3	22.33
Welfare	18.2	8.25
Medicine	13.6	2.67
Volunteer	13.6	5.33
Social services	9.0	3.00
Laundromat	4.5	10.00
Work	0.0	0.00
Senior citizens	0.0	0.00
Beauty/Barber	0.0	0.00

Note: Receipts were not located for two clients.

receipts. Although only 27.3 percent of the wheelchair bound clients utilized trip tickets for therapy, these individuals did so an average of 22.33 trips per year.

As has been previously mentioned, the service used most frequently by clients utilizing wheelchairs was Bassemiers with the peak month being September. (See Table 15.) The lowest usage was during the month of November. For Aid-Care, the highest usage was in June with the low also being in November.

TRIP Evaluation

A questionnaire concerning an evaluation of TRIP was distributed by the TRIP agency to their clients in 1982. (See Appendix M.) Approximately 500 questionnaires were mailed to TRIP III clients with 350 given to TRIP XX clients during the recertification process. The total response was 641.

The results of this survey showed that 99 percent of the clients who responded perceived the TRIP staff to be courteous and helpful, and asserted that there were never problems with the staff.

Forty-nine percent of the clients that responded answered that they received sufficient tickets for their needs. Twenty-eight percent did not think they were receiving nearly enough tickets, with 23 percent of the TRIP clients indicating that they received almost enough tickets. Ninety-nine percent of the clients thought that the tickets arrived promptly each month.

A question was included on the survey concerning the amount the clients have gone out since being on the program. Seventy-nine

Table 15. Amount spent per month by wheelchair bound TRIP XX clients by transportation carrier (usage sheets), Fiscal Year 1982

	Transportation Carrier		
	Aid-Care	Bassemiers	SMILE (Wheelchair)
1982 July	$29.17[1]	$57.71	$2.50
August	40.00	66.42	2.50
September	29.38	91.65	2.71
October	27.08	67.67	2.71
November	12.71	33.38	2.29
December	17.08	68.08	1.46
1983 January	15.42	37.85	0.00
February	21.67	64.79	0.42
March	26.04	77.00	0.00
April	25.00	71.75	0.00
May	29.38	71.25	0.63
June	44.17	50.00	0.63

[1]Averages based on 24 clients.

percent of the clients responded that they had gone out more often since they had participated in TRIP. (It should be noted that the clients were not given the choice of marking that they had gone out less.)

There was very little input by the clients concerning ways to mitigate the impacts of program cuts. Most individuals did not answer the questions concerning contributions and volunteer work.

The Advisory Board felt that since it was asked that the questionnaires be returned directly to the TRIP office the responses were potentially biased, and, therefore, it is anticipated that this questionnaire will be handled differently in the future.

Attrition

Since the beginning of this research, 27.9 percent of the sample (seventy-two clients) have been taken off TRIP XX. (See Table 16.) Thirty-five (13.6 percent) of these clients were transferred to TRIP III due to a change in TRIP XX eligibility. Nineteen clients (7.4 percent) were not physically handicapped and sixteen (6.2 percent) were over income. Seventeen clients (6.6 percent) were transferred off the program due to low usage.

Transportation Carriers

Of the six questionnaires sent to the transportation carriers all were returned. Two important areas were covered in this survey. These were the impacts that TRIP had on their businesses or agencies and problems that were encountered with different aspects of TRIP.

Table 16. Distribution of TRIP clients in sample currently off program by reason for removal

	Number of Clients	Percentage of Total
Still on program	186	72.1
Off program due to:		
Over income	16	6.2
Not physically handicapped	19	7.4
Low usage	17	6.6
Other	20	7.8
	258	100.0

TRIP Impacts

All but one carrier stated that their ridership increased after participating in TRIP. One respondent, SMILE, specified that the number of their clients had increased by one-third.

Out of the six respondents, all but one disclosed that their revenues had increased due to participation in the program; however, the private carriers noted that this increase was slight due to the limitation on what they can charge. Kathy Muller, the TRIP director, stated that the agency does not limit what the carriers may charge, but they were limited by their competition with other carriers. The one transportation carrier that did not answer that revenues had increased stated that the data are inconclusive. TRANSCORT, which does not charge a fare but requests a donation, stated that TRIP, although not increasing their ridership, allowed their clients to make a donation more in keeping with what they would like to give.

Two of the carriers indicated that there were no additional costs generated by participation in TRIP; however, two carriers did note there was an increase in administrative costs, and the remaining two carriers asserted that there were increased costs mainly associated with providing service at night. One of these transportation carriers stated that an additional employee was needed to operate the station at night because some of the TRIP clients stay out late. In addition, the other carrier pays their drivers at night half of the payment from the TRIP client.

Only one carrier added vehicles to its fleet due to increased patronage from TRIP, and none of the respondents noted a change in service hours.

Problems

One problem disclosed by three of the six transportation carriers was the delay in reimbursement and its negative effect on cash flow. One respondent remarked that this was especially a problem when combined with the difficulties of the Medicaid reimbursement procedures.

The carriers collect tickets from the beginning of the month until the end of the month and turn them into TRIP by the 5th day of the following month with an invoice for reimbursement. The invoices are checked by the TRIP staff for accuracy, and the claims are then submitted to the Controller. These are forwarded to the Internal Board of Public Works for payment authorization and are then sent back to the Controller's office. State law gives the city up to forty-five

days to pay from the date of invoice, or the municipality must pay a penalty of an additional 1.5 percent. This has never occurred with payments to the TRIP carriers (Muller, 1984).

Two of the carriers have also experienced problems with the TRIP clients. One carrier asserted that some clients transfer their tickets to ineligible individuals. Another carrier had difficulties with TRIP clients who, after running out of tickets, wanted to charge their trips thus running up big bills; however, this appears to be a problem with the carrier not being able to say "no."

One respondent complained that the city had been very poor at establishing and maintaining signed contracts. In addition, the same carrier stated that there had been conflicts between the carrier and the TRIP personnel, and that there was "seemingly prejudicial treatment to some clients and providers." However, in examining the number of trips provided by this carrier and the amount of money that was claimed by them from TRIP XX, it does not appear that this transportation carrier is receiving any less of the TRIP XX business than the other carriers.

Additional Comments

The respondents were also given an opportunity to suggest recommendations and provide additional comments. There were no negative observations except those already mentioned, and many of the carriers voiced the opinion that TRIP provided a valuable service. This is reflected in statements provided by two of the questionnaire

respondents. One carrier stated that TRIP was a "good program for the elderly and handicapped because it gives them the opportunity to do things they could not do otherwise. To some of them this is the only way they have of going anywhere." Another transportation carrier added the comment that TRIP "has definitely been an asset to this community. It has brought the seniors out of the house and made them independent."

TRIP Agency

TRIP XX Dollars Claimed

Figure 1 shows the dollars claimed from TRIP XX for the years 1979 through 1983. The patterns for 1982 and 1983 are very similar. The greatest amount claimed for a one-month period was in February 1981 ($14,650.15) followed closely by March 1982 ($14,505.45). Excluding 1979, the year the program started, the least amount claimed for a one-month period was June 1980 ($7,748.60). The drop in the amount claimed from June to July 1982 can be accounted for by the taxi strike that occurred during this time frame. The drop in the amount spent in March 1981 was due to cutbacks because of overspending. Bad weather was a deterrent in November of the same year. In addition, there was a transfer of some clients from TRIP XX to TRIP III during this month. The major transference of clients is reflected in the decrease in July 1982.

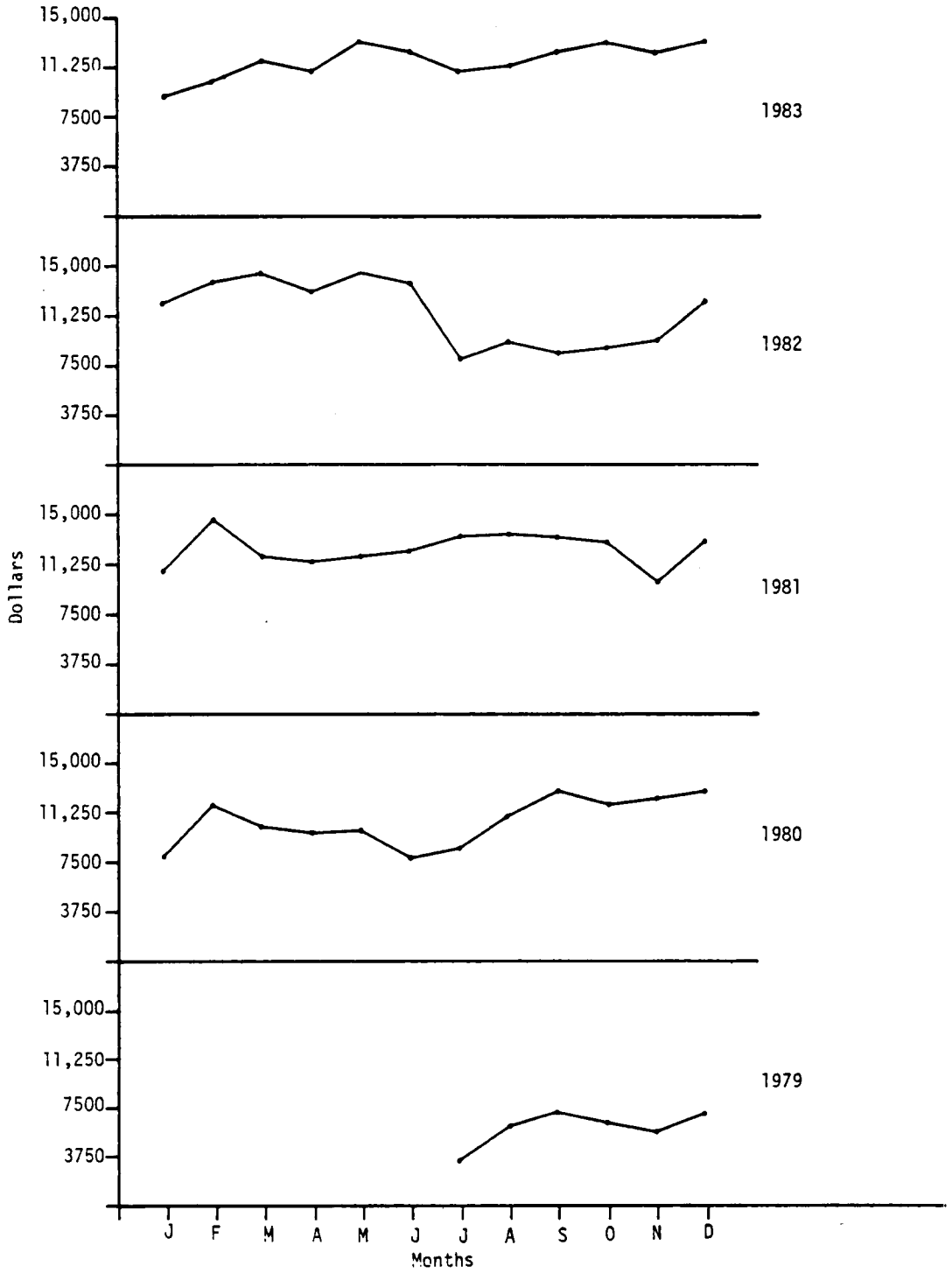


Figure 1. Distribution of dollars claimed from TRIP XX by month (1979-1983).

TRIP XX One-Way Trips Provided

Figure 2 shows the one-way trips provided for TRIP XX clients for the years 1979 through 1983. As can be seen, the peak months for one-way trips do not always correspond to those of dollars claimed. This is due to the fact that when a large amount of money is claimed, the more expensive transportation carriers are most likely being utilized, and fewer trips are provided.

The patterns of one-way trips in 1980 and 1981 are similar to each other, as are those of 1982 and 1983. (There are not sufficient data to draw conclusions about 1979.) In actuality, it appears that 1982 and 1983 follow the same pattern as 1981 and 1982 only shifted, beginning in May rather than January. As has been previously mentioned, the significant decrease in the summer of 1982 was due to the transfer of many TRIP XX clients to TRIP III. October was the month in which the greatest number of one-way trips were provided for every year except 1982 in which it ranked eighth. The peak occurred in 1980 when 10,230 one-way trips were provided in a one-month period. The fewest number of trips per one month was 5,653 in July 1982.

TRIP III Dollars Claimed

Figure 3 shows the dollars claimed from TRIP III for the years 1979 through 1983. The pattern of dollars claimed from TRIP III is more difficult to explain than that of TRIP XX. Dollars claimed follow similar patterns in 1979 and 1981. A slight variation of this seems to occur in 1980; however, the pattern is very different in

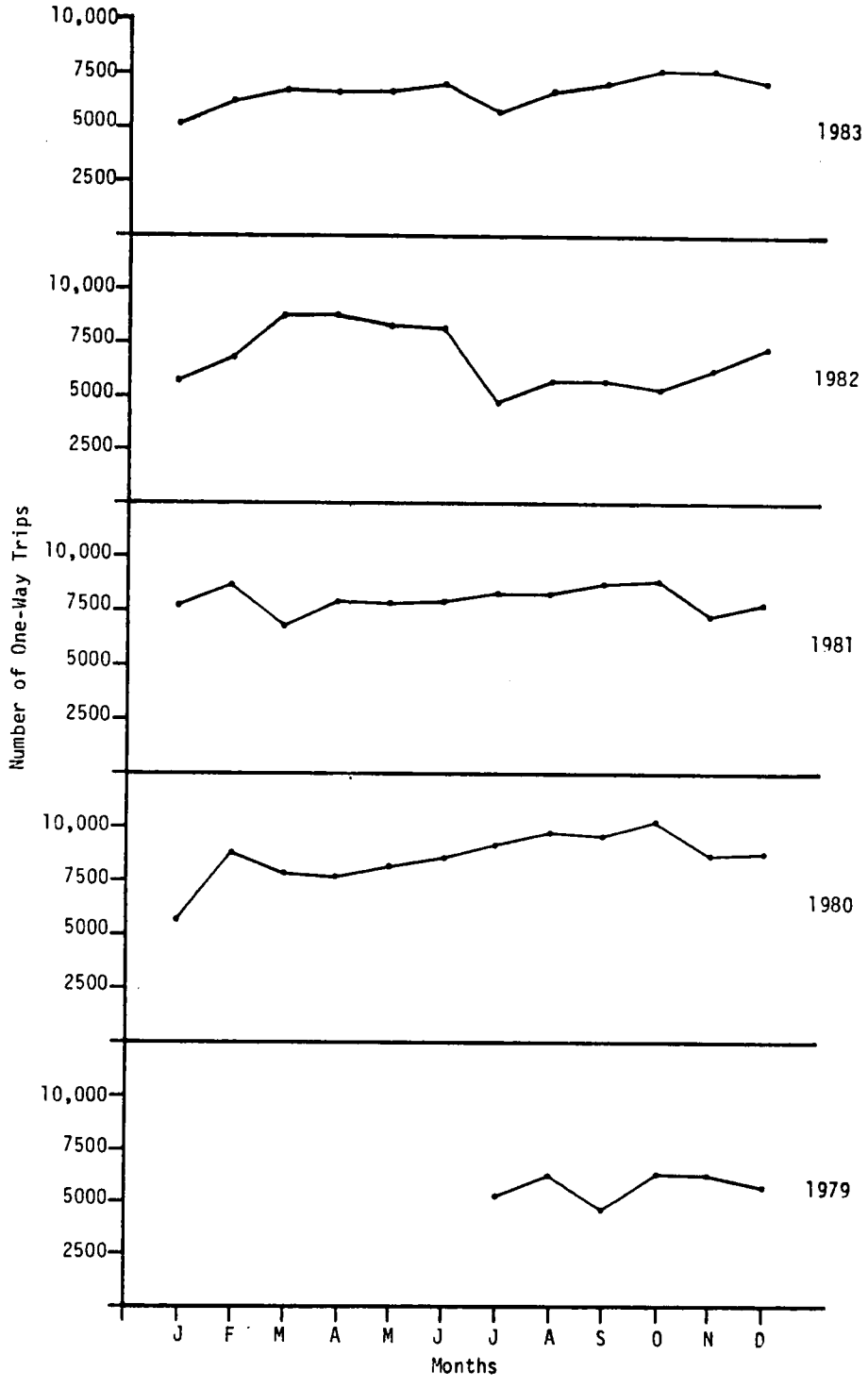


Figure 2. Distribution of one-way trips taken by TRIP XX clients by month (1979-1983).

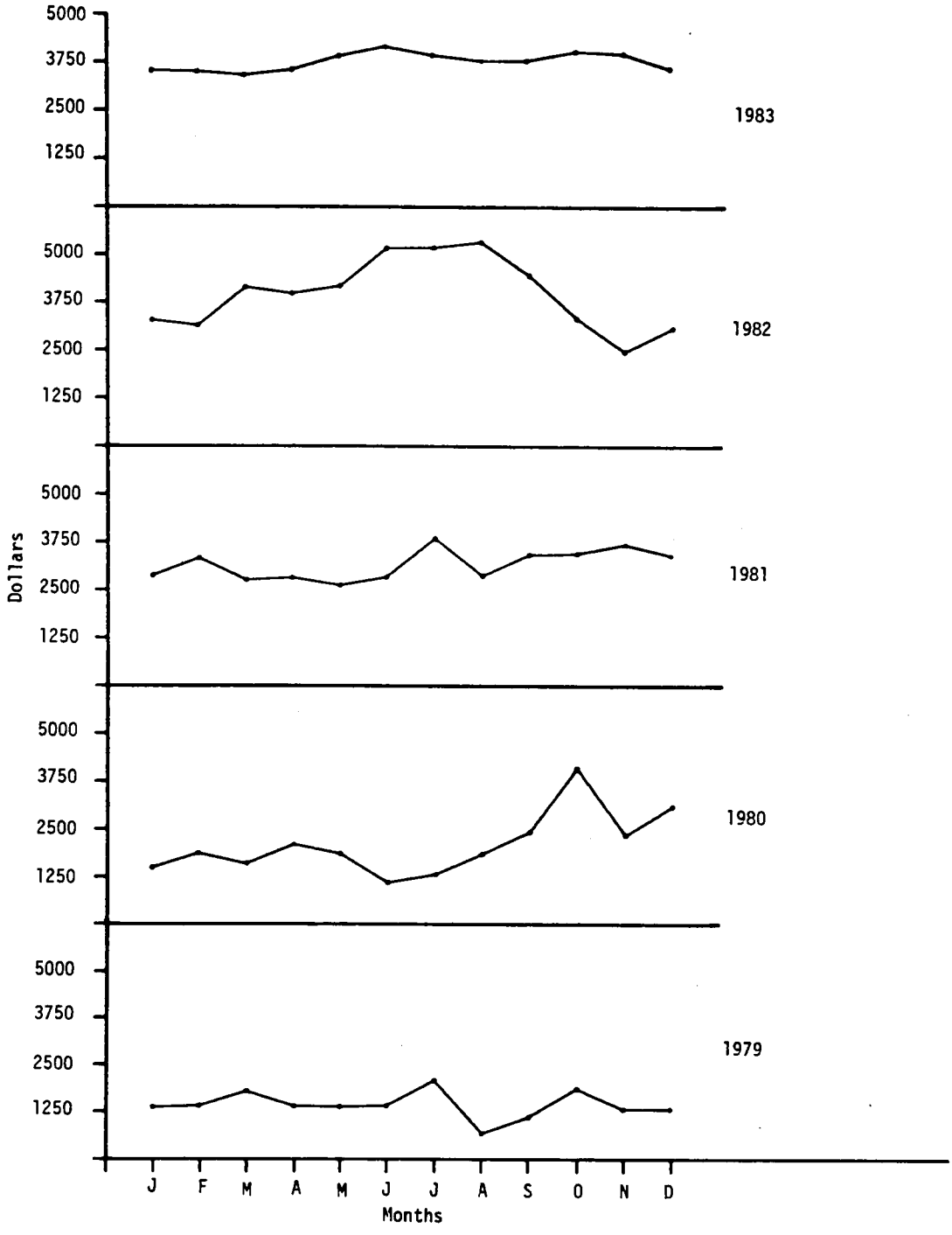


Figure 3. Distribution of dollars claimed from TRIP III by month (1979-1983).

1982, and the pattern of dollars claimed in 1983 has the least variation.

Except for 1980 the month of July always ranked among the top three for dollars claimed from TRIP III. The greatest amount claimed for a one-month period was in August 1982 ($5,261.20). The least amount claimed was in August 1979 ($730.80).

TRIP III One-Way Trips Provided

One-way trips provided to TRIP III clients for the years of 1979 through 1983 are displayed in Figure 4. The peak in July 1981 was due to the introduction of new air-conditioned buses. After the "newness" wore off, many clients returned to their former preferred transportation mode. As has been previously discussed, the increase in one-way trips in the summer of 1982 was due to the transfer of a large number of TRIP XX clients to TRIP III. Emergency reductions in ticket allotments were instituted in September through November 1982 with a corresponding result.

Because TRIP III clients do not have to be handicapped in order to qualify for TRIP III tickets and therefore do not utilize the more expensive wheelchair services as much as TRIP XX clients, the number of one-way trips more closely corresponds to the amount claimed. The month of July ranked first or second in every year except 1980. The fewest number of one-way trips provided to TRIP III clients occurred in March 1980 (1567).

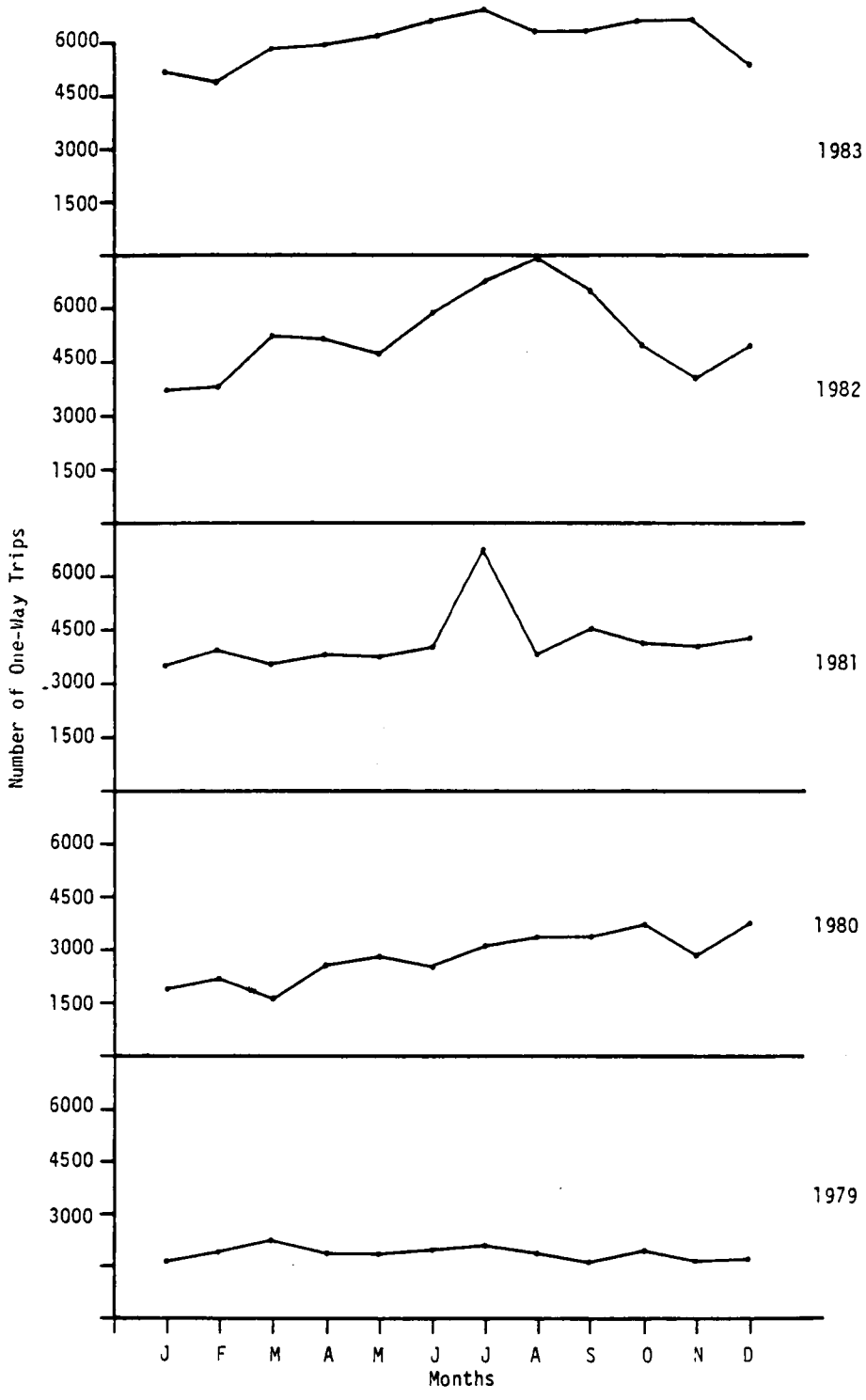


Figure 4. Distribution of one-way trips taken by TRIP III clients by month (1979-1983).

Cost per Passenger Trip

The TRIP agency calculates a cost per passenger trip figure by dividing the dollars claimed by the total number of trips provided. As can be seen from Table 17, the cost per passenger trip for TRIP XX is much higher than that for TRIP III. This is due to the high cost of transportation for handicapped TRIP XX clients. The average cost per passenger trip has ranged over time from $0.62 to $0.78 and from $1.05 to $1.74 for TRIP III and TRIP XX, respectively, with the average cost per passenger trip for the two programs combined ranging over time from $0.96 to $1.27. The cost per passenger trip for TRIP III did not take into account client donations. The drop in the cost per passenger trip for TRIP III in 1983 was due to the transferance of clients who largely utilized METS, a low cost service, from TRIP III to TRIP XX.

Table 17. Average cost per passenger trip, 1979-1983

	Average Cost per Passenger Trip		
Year	TRIP III	TRIP XX	Total
1979	$0.74	$1.05	$0.96
1980	0.75	1.24	1.12
1981	0.78	1.50	1.25
1982	0.76	1.68	1.27
1983	0.62	1.74	1.21

Costs for various user-side subsidy programs are included in the 1983 report, Cost-Effectiveness of Transportation Services For Handicapped Persons (Middendorf, Heathington, Wegmann, Redford, Chatterjee, & Bell, 1983). (See Table 18.) In comparison to these

Table 18. Cost-effectiveness of existing user-side subsidy programs

Site of Program	Period Covered by Cost Data	Cost per Passenger Trip
Milwaukee, WI	1980	$7.26
Portland, OR	Sept.-Nov. 1978	5.64[1,2]
Austin, TX	FY 1978	4.50[1,2]
Seattle, WA	1980	4.46
Santa Clara County, CA	1976	3.24
Montgomery, AL	1979	3.05
Akron, OH	Oct. 1978	2.96[1,2]
Kansas City, MO	May 1977-April 1978	2.92
Los Angeles Harbor Area	1978/79	2.83
Sunnyvale, CA	FY 1977	2.30[2]
Palo Alto, CA	FY 1977	2.25[2]
Fremont, CA	1976	2.11
San Leandro, CA	1977	1.85
Kinston, NC	1979	1.47
Lawrence, MA	1979	1.24
Danville, IL	1976	1.22
Lafayette, CA	FY 1976	0.63[2]

[1]The user-side subsidy program in this city supplements the publicly operated specialized transportation service.

[2]Subsidy cost per trip; does not include the administrative cost.

Source: From Cost-Effectiveness of Transportation Services For Handicapped Persons by Middendorf et al., 1983, p. 300.

programs, the cost per passenger trip for the Evansville program was relatively low; however, administrative costs are not included by the Evansville agency when calculating this figure. "Administrative costs can increase the average cost per trip by $0.20 to $1.60" (Middendorf et al., 1983, p. 301). According to the TRIP director, the administrative cost is approximately $0.32 per trip. With the addition of administrative costs, the cost per passenger trip is still low in comparison with many of the other user-side subsidy programs. In addition, when Middendorf compared these user-side subsidy programs to specialized transportation services, the most expensive user-side subsidy project was more cost effective than many of the specialized transportation services examined. (See Table 19.) When the Evansville TRIP III and TRIP XX are combined, the cost per passenger trip is less than all but one of the specialized transportation services examined in the Middendorf report.

Number of Clients Served

The greatest number of clients served has been 638 and 669 for TRIP III and TRIP XX, respectively. (See Table 20.) For TRIP III the largest number of clients was in 1982 with a very slight decrease occurring in 1983. For TRIP XX, the greatest number served was in 1983. For both programs the largest percentage increase occurred in 1980. The greatest number of clients for both programs combined was 1299 in 1983.

Table 19. Cost-effectiveness of existing specialized transportation services

System	Markets Served	Period Covered By Cost Data	Cost per Passenger Trip
Metropolitan Atlanta Rapid Transit Authority L-Bus	Handicapped	FY 1977	$16.95
Orange County, CA, Dial-A-Lift	Handicapped, except blind, deaf, and mentally retarded	1979	$14.42
Columbus, OH, Project Mainstream	Handicapped	1979	$13.69
Boston, MA, The RIDE	Handicapped	1979	$11.62
Houston, TX, METROLIFT	Handicapped, elderly, low income	1979	$11.57
Austin, TX, Special Transit Service	Handicapped	FY 1978	$10.84
New York City Lower East Side EASYRIDE	Handicapped, elderly	N.A.	$10.83
El Paso, TX, HandySCAT	Handicapped	N.A.	$ 8.87
Naugatuck Valley, CT, Transit District	Handicapped elderly	N.A.	$8.40 Dial-a-Ride $3.05 Subscription
Rochester, NY, PERT Lift Line	Handicapped, elderly	N.A.	$ 7.64

Table 19 (continued)

System	Markets Served	Period Covered By Cost Data	Cost per Passenger Trip
Portland, OR, LIFT	Handicapped, elderly	N.A.	$ 7.31
El Paso, TX, Project Bravo	Handicapped	N.A.	$ 6.01
Proviso Township, IL	Handicapped, elderly	N.A.	$ 5.88
Will County, IL	Handicapped, elderly	N.A.	$ 5.50
Brockton, MA, DIAL-A-BAT	Handicapped,	FY 1978	$5.49 Dial-a-Ride $1.02 Subscription $1.92 Combined
Rochester, NY, Paratransit Enterprises, Inc.	Handicapped, elderly	N.A.	$ 5.08
Tucson, AZ, Handi-Car	Handicapped	1979	$ 4.96
Fairfield, CT, Department on Aging	Elderly, Title XX recipients, wheel-chair users	FY 1978	$ 4.80[1]
Bridgeport, CT, Coordinated System	Elderly, Title XX recipients, wheel-chair users	FY 1978	$ 4.75

Table 19 (continued)

System	Markets Served	Period Covered By Cost Data	Cost per Passenger Trip
Pomona Valley, CA, Senior Citizens and Handicapped Transportation Authority Get About Transportation	Handicapped, elderly	June 1979	$ 4.47
Tucson, AZ, Special Needs Transportation Service	Handicapped	1979	$ 4.43
Broward County, FL, Social Service Transportation	Handicapped, elderly, low income	1979	$ 4.37
Lincoln, NE, Senior Handivan	Handicapped	1979	$ 4.34
Sacramento, CA, Paratransit, Inc.	Handicapped, elderly	1979	$ 4.26
Lubbock, TX, Citizens for Improved Transportation	Handicapped, elderly	N.A.	$ 4.06
Baton Rouge, LA, Special Transportation Service	Handicapped	1979	$ 4.00
Stratford, CT, Senior Citizen Service	Elderly, Title XX recipients, wheelchair users	FY 1978	# 3.80[1]
Lowell, MA, Roadrunner	Handicapped	1979	$ 3.78

Table 19 (continued)

System	Markets Served	Period Covered By Cost Data	Cost per Passenger Trip
Portland, ME, Regional Transportation Program	Handicapped, elderly, low income	1979	$ 3.66
Phoenix, AZ, Mesa Shared Ride Taxi	Handicapped, elderly, low income	1979	$ 3.50
San Bernadino, CA, 6 Dial-A-Lift and Dial-A-Ride Systems	Handicapped, elderly, low income	1979	$ 3.46
Syracuse, NY, Call-A-Bus	Handicapped, elderly	1979	$ 3.00
Des Moines, IA, Paratransit	Handicapped, elderly, low income	1979	$ 2.88
Amarillo, TX, Texas Panhandle Community Action Corp.	Clients of social service agencies	1979	$ 2.65
Corpus Christi, TX, Elderly & Handicapped Transportation Service	Handicapped, elderly	1979	$ 2.50
Phoenix, AZ, Dial-A-Ride	Handicapped, elderly	1979	$ 2.17

Table 19 (continued)

System	Markets Served	Period Covered By Cost Data	Cost per Passenger Trip
Akron, OH, Special Citizens Area Transit	Handicapped, elderly	Oct. 1978	$ 2.13[1]
Tulsa, OK, Elderly & Handicapped Transportation Program	Handicapped, elderly	1979	$ 1.95
Spokane, WA, YMCA Motor Pool	Handicapped, elderly, clients of social service agencies	1977	$ 1.79
Phoenix, AZ, Red Cross Dial-A-Ride	Handicapped, elderly	1979	$ 1.40

[1]Excludes depreciation.

Source: Cost-Effectiveness of Transportation Services for Handicapped Persons, by Middendorf et al., 1983, pp. 292-295.

Table 20. Client totals, 1979-1983. (At end of year, December 31.)

Year	TRIP III	Percent Change	TRIP XX	Percent Change	Total	Percent Change
1979	100	--	150	--	250 (est.)	--
1980	330	230.0	423	182.0	753	201.2
1981	565	71.2	523	23.6	1088	44.5
1982	638	12.9	544	4.0	1182	8.6
1983	630	-1.3	669	23.0	1299	9.9

Problems

The problems of the TRIP agency are varied, but interrelated. The major problem encountered by TRIP is the multiplicity of funding sources and their reporting requirements. This is especially true with the Title XX method of funding. A former Title XX consultant once expressed to the TRIP director that the Evansville program had the most complicated and difficult requirements of any Title XX contract in the state (Muller, 1984). In addition, as has been previously mentioned, the only way TRIP XX can receive money for administration is to serve clients.

According to Kathy Muller (1983), the director of TRIP, the money would be available if not for the program's Title XX funding classification. TRIP was originally classified as a transportation service by the SSFO; however, transportation services were eliminated as an eligible funding category, and TRIP was forced to move to another subservice for which it was eligible or lose its funding. TRIP was then reclassified under the Homemaker/Handyman category. Because this classification is overfunded, TRIP cannot receive additional dollars from Title XX. Also, if TRIP takes clients off

the program due to lack of funding, even to serve more "needy" persons, they will be penalized up to 5 percent of the total contract value.

The complexity of TRIP creates problems in training new employees and in explaining the program to the City Council and Controller's office.

TRIP also experiences identity problems as some individuals confuse them with the transportation carriers. In addition, it is difficult for clients and social service agencies to understand that TRIP does not have unlimited funding.

Benefits

The benefits seen by the TRIP agency relate to the service they provide and the clients they serve. The director of the program feels that TRIP:

1. allows reliable transportation to be accessible financially;
2. provides security in emergency situations (clients know that someone can take them to the hospital or doctor on short notice);
3. frees up income to buy the things clients need instead of buying the means to find them;
4. stretches food dollars by making bargains available (there is no need to shop at nearby smaller markets which are generally higher priced);
5. provides the means to avoid isolation, and to access other needed services; and
6. reduces dependence on the government by allowing independent living for severely handicapped persons.

CHAPTER VI

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS FOR FUTURE RESEARCH

The sample data previously presented provides a basis for descriptive inferences about TRIP and its clients. These inferences, which can be stated with a confidence level greater than 97 percent, are summarized below, along with relevant conclusions about the TRIP agency and the participating transportation carriers.

TRIP Clients

The majority of TRIP XX clients, 62 to 72 percent, are single white females. In addition, those clients that are classified by the TRIP agency as handicapped, semiambulatory account for 30 to 40 percent of the population. Wheelchair bound clients make up a small percentage, 4 to 14, of the total.

Of those TRIP XX clients who are not confined to wheelchairs, 64 to 74 percent are able to use the bus, with the majority of these individuals primarily using METS. Of those TRIP XX clients not confined to wheelchairs but unable to use the bus, the greatest percentage utilize the transportation services of SMILE. Bassemiers is the transportation carrier used most frequently by TRIP XX wheelchair-bound clients.

Nonwheelchair bound TRIP XX clients indicated that they use the majority of their tickets for grocery shopping. Those clients confined to wheelchairs, although reporting that they most frequently utilize their tickets for going to the grocery, actually seem to use their TRIP tickets primarily for visiting and nongrocery shopping.

From the evaluation of the agency by the clients, it appears that overall TRIP XX and TRIP III clients are satisfied with the program and have been able to make more trips since participating.

Transportation Carriers

By becoming involved in TRIP, the ridership of the transportation carriers increased in all but one instance. In addition, the revenues also increased for all but one carrier. Although the private carriers felt constrained in the amount that they could charge, they were actually limited only by their competition; therefore, TRIP also helps to keep costs low for those individuals who are not TRIP clients but also utilize these carriers.

For four of the carriers, there are increased costs due to participation in TRIP; however, for two of these carriers the costs could be reduced by limiting the service hours at night.

The major problem encountered by the transportation carriers is the delay in reimbursement and its effect on cash flow. There are no easy solutions to this problem, as it is dependent on city reimbursement procedures.

Bassemiers and Yellow Taxi claim the greatest amount of money from the TRIP XX program; however, METS provides the greatest number of one-way trips. This may be changing due to the changing priorities of the TRIP agency. TRIP is beginning to provide more specialized transportation on a short-term basis for stroke and cancer victims to get to therapy. TRIP is also currently supplying the means for obtaining transportation to kidney dialysis patients who do not have alternative transportation resources.

The cost per passenger trip for TRIP XX has ranged over time from $1.05 to $1.74 with this figure for TRIP III ranging from $0.62 to $0.78. This cost calculation for TRIP III did not include client donations, which would lower the cost further. For both programs combined, the cost per passenger trip ranged over time from $0.96 to $1.27. This figure (although not including administrative costs) is based on a standard unit of measurement, cost per trip. Therefore, in comparison with other user-side subsidy programs, the Evansville TRIP can be judged to be very cost-effective.

TRIP Agency

The major problem encountered by the TRIP agency is the difficulty in complying with the reporting requirements of the different funding sources, especially those of Title XX. This makes the training of new employees difficult and creates problems with the City Council which, because TRIP is a city agency, also oversees the program.

TRIP has advanced since its inception in 1977, and is still undergoing some changes. TRIP is attempting to respond to the specific needs of its clients. Because funding is limited, a point system has been developed in order to make a more objective determination of an individual's eligibility for TRIP. (See Appendix M.) In order to qualify for TRIP XX, individuals must have a total of 45 points. For TRIP III, this total is 40 points. Clients already on TRIP are currently being reevaluated utilizing this system. Out of the 660 questionnaires sent to TRIP III clients, 472 were returned. Of these, 85, 18 percent, failed to obtain the required number of points, and are therefore being removed from the program (Muller, July 1984). Through this system, TRIP hopes to serve only those individuals actually in need of the program.

In addition, a small portion of TRIP XX clients may now be placed in a "no means" funding category which provides for transportation of individuals, regardless of income, who are in danger of abuse or neglect. Included in this group would be, for instance, unwed mothers needing transportation for prenatal visits and a baby whose mother must attend abuse counseling. The TRIP tickets are utilized for transporting the baby to a doctor for checkups and providing his/her mother with transportation to counseling. An elderly woman who, although she has an income, also has enormous medical bills, is another example of a person who falls into this category.

Future Research

Although TRIP is better managed and more disciplined than in 1977, there are areas which could be improved and areas needing further research.

TRIP XX is presently serving 669 clients with 630 individuals on TRIP III. The 1977 report prepared by the Evansville Urban Transportation Study, identified 32,208 elderly and/or handicapped persons residing in the city. The number of these individuals wanting to use elderly and handicapped transportation services was estimated at 1,932. The difference between this figure and the number of clients presently served by TRIP is 633. It is unknown how many of these individuals would meet TRIP eligibility requirements. The EUTS report utilizes a demand range of .36 trips/person/day to 1.21 trips/person/day. TRIP clients on both programs presently average .33 trips/person/day which is only slightly below the lower end of the range used in the EUTS study. If an additional 633 clients were served by TRIP, an increase of 76,249 trips per year to 279,554 trips per year could be anticipated. This was calculated using the TRIP client trip rate for the lower limit and the EUTS report demand figure for the upper limit. The additional trips would result in an increased annual cost of $116,660 to $427,717 if the cost per trip figure remained as it is presently.

One reason for the development of a point system for use in the determination of an individual's eligibility is TRIP's present inability to serve more clients due to lack of funding. It seems

reasonable to assume that there are persons not presently served who would meet the requirements and would utilize the service if it were made available to them. Therefore, additional areas of funding need to be explored.

The possibility of streamlining the paperwork requirements of the various funding sources is another possible area of future research. Although the TRIP agency collects a lot of data in order to meet certain requirements, much of this information is never analyzed and used to its full potential due to staff limitations. Therefore, the utility of collecting these data is questionable.

Transferability

As has been stated to Curry (1982, p. 106), in his study of the West Virginia TRIP, the concept "is readily transferable to other areas since little administrative effort is needed to monitor such a program." Although the Evansville program encounters problems with the reporting requirements of the funding sources, there is not the additional headache of dealing with the vehicles that is encountered by a program in which the agency, instead of providing a subsidy to cover the costs of the transportation services, actually provides the transportation. In addition, Middendorf et al. (1983) in their research have shown most user-side subsidy programs to be less expensive than providing the specialized transportation services.

Curry states that not every area would want to go to the trouble of administering a program that has an income requirement

for eligibility due to the extra paperwork involved. However, this has not been a problem with the Evansville program. The potential for misuse of the program by the providers and clients has also been pointed out as a disadvantage with user-side subsidy programs. Evansville has not encountered notable problems in this area either.

Spear et al. (1981) contend that there is a question of whether the user-side subsidy concept can be transferred to large cities. The concept has worked in the state of West Virginia, and although Evansville is not a large city, it is bigger in population than many of the user-side subsidy projects funded by the Service and Methods Demonstration Program.

In addition, most of these programs only utilized one transportation mode. The unique characteristic of the Evansville program is that a variety of transportation services may be utilized by the TRIP clients. This has not caused any additional burden on the agency, and has served to stimulate competition and therefore keep the costs of these transportation services low. It may be argued that, because elderly individuals already receive a reduced fare on METS, this provider should not be included in the program. However, the point system already penalizes individuals five points if they are able to use transit. Thus, a majority of transit riders are no longer qualified for the program. TRIP has not removed METS as a service provider because there are still clients eligible for the program who may be able to ride the bus. In addition, METS is a low cost service, and clients must be encouraged to utilize it when possible.

The main ingredient found by this research in providing an effective program is a dedication to the concept by the local government and especially by the agency. The main impetus behind the success of the Evansville TRIP has been the belief of the agency director that the program is meeting a need and her dedication to this purpose.

Overall TRIP has been successful and provides a valuable service. It allows individuals who normally could not afford transportation the means to make short trips and has given them the opportunity to do things that they would not otherwise be able to do. In this way, TRIP has helped its clients to avoid isolation.

LIST OF REFERENCES

LIST OF REFERENCES

Brail, R. K., Hughes, J. W., & Arthur, C. A. Transportation Services for the Disabled and Elderly. New Brunswick, NJ: Center for Urban Policy Research, 1976.

Chatterjee, A., Sommerkorn, W. H., & Wegmann, F. J. User-Side Subsidy Transportation Programs for Small Urban and Rural Areas. Knoxville, TN: University of Tennessee Transportation Center, 1980.

City of Evansville. Transportation Remuneration and Incentive Program: Program Proposal, Fiscal Year 1983. Evansville, IN: Author, 1982.

Crain and Associates (Eds.). Transportation Problems of the Transportation Handicapped (Vol. 1). Menlo Park, CA: Author, 1976.

Curry, D. A. TRIP: The Transportation Remuneration and Incentive Program in West Virginia, 1974-1979. Washington, DC: Urban Mass Transportation Administration, 1982.

Evansville Urban Transportation Study. Elderly and Handicapped Transportation Study. Evansville, IN: Author, 1977.

Gallagher, R. V. Taxis and subsidized programs in rural areas. Transportation Research Record, 1978, 696, 82-84.

Golant, S. F. Intraurban transportation needs and problems of the elderly. In M. P. Lawton, R. J. Newcomer, & T. O. Byerts (Eds.), Community Planning for an Aging Society. Stroudsburg, PA: Dowden, Hutchinson & Ross, Inc., 1976.

Grey Advertising, Inc. Summary Report of the National Survey of Transportation Handicapped People. Washington, DC: Urban Mass Transportation Administration, 1978.

Hendel, D. Presentation for Association of Educational Researchers of America, 1977.

Hood, T. C., Bell, T. L., Sovchen, C. A., & Heathington, K. W. Transportation Services for the Transportation Disadvantaged. Washington, DC: Transportation Research Board, 1978.

Institute of Public Administration. Planning Handbook: Transportation Services for the Elderly. Washington, DC: Author, 1975.

Karash, K. H. Analysis of a taxi-operated transportation service for the handicapped. Transportation Research Record, 1976, 618, 25-29.

Kirby, R. F., Bhatt, K. U., Kemp, M. A., McGillivray, R. G., & Wohl, M. Paratransit: Neglected Options for Urban Mobility. Washington, DC: Urban Institute, 1974.

Kirby, R. F., & Tolson, F. L. Improving the mobility of the elderly and handicapped through user-side subsidies. Transportation Research Record, 1977, 660, 18-24.

Koutsopoulos, K. C., & Schmidt, C. G. Mobility constraints of the carless. Traffic Quarterly, 1976, 30, 67-83.

Mayer, H. M. Section 504: Local Perspectives. Paper presented at annual meeting of the Transportation Research Board, January 1982.

Middendorf, D. P., Heathington, K. W., Wegman, F. J., Redford, M. W., Chatterjee, A., & Bell, T. L. Cost-Effectiveness of Transportation Services for Handicapped Persons. Knoxville, TN: University of Tennessee Transportation Center, 1983.

Muller, K. Personal communication, 1982-1984.

Polonsky, S. I., Jr. Serving transportation needs of the elderly: an overview. Traffic Quarterly, 1978, 32, 621-633.

Public Technology, Inc. User-side subsidy. SMD Briefs: Danville, IL, 1977, 1.

Public Technology, Inc. Increasing ridership is an uphill battle. SMD Briefs: Danville, IL, 1978a, 2.

Public Technology, Inc. Private businesses boost marketing efforts. SMD Briefs: Danville, IL, 1978b, 3.

Public Technology, Inc. Service provider protected against losses. SMD Briefs: Danville, IL, 1978c, 4.

Public Technology, Inc. Bidders get the runaround. SMD Briefs: Danville, IL, 1978d, 5.

Public Technology, Inc. Tickets to runaround. SMD Briefs: Danville, IL, 1978e, 6.

Public Technology, Inc. 13(c) in Danville. SMD Briefs: Danville, IL, 1978f, 7.

Public Technology, Inc. Third time's a charm. SMD Briefs: Danville, IL, 1978g, 8.

Public Technology, Inc. Taxis and minibuses runaround. SMD Briefs: Danville, IL, 1978h, 9.

Public Technology, Inc. Danville ridership update. SMD Briefs: Danville, IL, 1978i, 10.

Public Technology, Inc. Runaround ridership jumps. SMD Briefs: Danville, IL, 1979a, 11.

Public Technology, Inc. Runaround to continue. SMD Briefs: Danville, IL, 1980a, 12.

Public Technology, Inc. Riders take the runaround. SMD Briefs: Danville, IL, 1980b, 13.

Public Technology, Inc. Marketing the runaround. SMD Briefs: Danville, IL, 1980c, 14.

Public Technology, Inc. Results of runaround (final). SMD Briefs: Danville, IL, 1980d, 15.

Public Technology, Inc. Elderly and Handicapped Transportation: Local Government Approaches. Washington, DC: Author, 1979b.

Public Technology, Inc. Kinston's user-side subsidy. SMD Briefs: Kinston, NC, 1978j, 1.

Public Technology, Inc. The search for KITE's market. SMD Briefs: Kinston, NC, 1978k, 2.

Public Technology, Inc. Cab company coordination. SMD Briefs: Kinston, NC, 1979c, 3.

Public Technology, Inc. Keeping everyone honest. SMD Briefs: Kinston, NC, 1979d, 4.

Public Technology, Inc. Kinston nets new riders. SMD Briefs: Kinston, NC, 1980e, 5.

Public Technology, Inc. Get your tickets here. SMD Briefs: Kinston, NC, 1980f, 6.

Public Technology, Inc. Kinston's KITE keeps flying. SMD Briefs: Kinston, NC, 1980g, 7.

Public Technology, Inc. Registrations continue—ridership levels off. SMD Briefs: Kinston, NC, 1980h, 8.

Public Technology, Inc. KITE has helped those who needed it most. SMD Briefs: Kinston, NC, 1980i, 9.

Public Technology, Inc. KITE improved taxicab business. SMD Briefs: Kinston, NC, 1980j, 10.

Public Technology, Inc. KITE demonstration wrap-up (final). SMD Briefs: Kinston, NC, 1980k, 11.

Public Technology, Inc. Lawrence user-side subsidy. SMD Briefs: Lawrence, MA, 1978l, 1.

Public Technology, Inc. Service for the severely handicapped. SMD Briefs: Lawrence, MA, 1979e, 2.

Public Technology, Inc. User-side subsidy program—registration and ridership. SMD Briefs: Lawrence, MA, 1979f, 3.

Public Technology, Inc. Marketing and registration. SMD Briefs: Lawrence, MA, 1980l, 4.

Public Technology, Inc. Taxi companies support TRANSFARE. SMD Briefs: Lawrence, MA, 1980m, 5.

Public Technology, Inc. TRANSFARE to continue. SMD Briefs: Lawrence, MA, 1980n, 6.

Public Technology, Inc. Van service is rolling again. SMD Briefs: Lawrence, MA, 1981, 7.

Public Technology, Inc. Careful preparation necessary to set up a user-side subsidy program. SMD Briefs: Lawrence, MA, 1982a, 8.

Public Technology, Inc. Who uses a user-side subsidy and why? (final—part I). SMD Briefs: Lawrence, MA, 1982b, 9.

Revis, J. S. Transportation for Older Americans: A State of the Art Report. Washington, DC: Institute of Public Administration, 1975.

Rosenbloom, S. Transportation needs and use of social services: a reassessment. Traffic Quarterly, 1978, 32, 333-348.

Sahaj, L. Using taxis to serve the elderly and handicapped. Transportation Research Record, 1978, 696, 85-87.

Spear, B. D. User-side subsidies: delivering special needs transportation through private providers. Paper presented at annual meeting of the Transportation Research Board, January 1982.

Spear, B. D., Casey, R., Damm, D., Doxsey, L., Freilich, J., Heaton, C., Loo, D., Page, E., Slavin, H., & Waksman, R. Service and Methods Demonstrations Program Report. Cambridge, MA: Research and Special Programs Administration, 1981.

Urban Mass Transportation Administration. Moving People: An Introduction to Public Transportation. Washington, DC: Author, 1981.

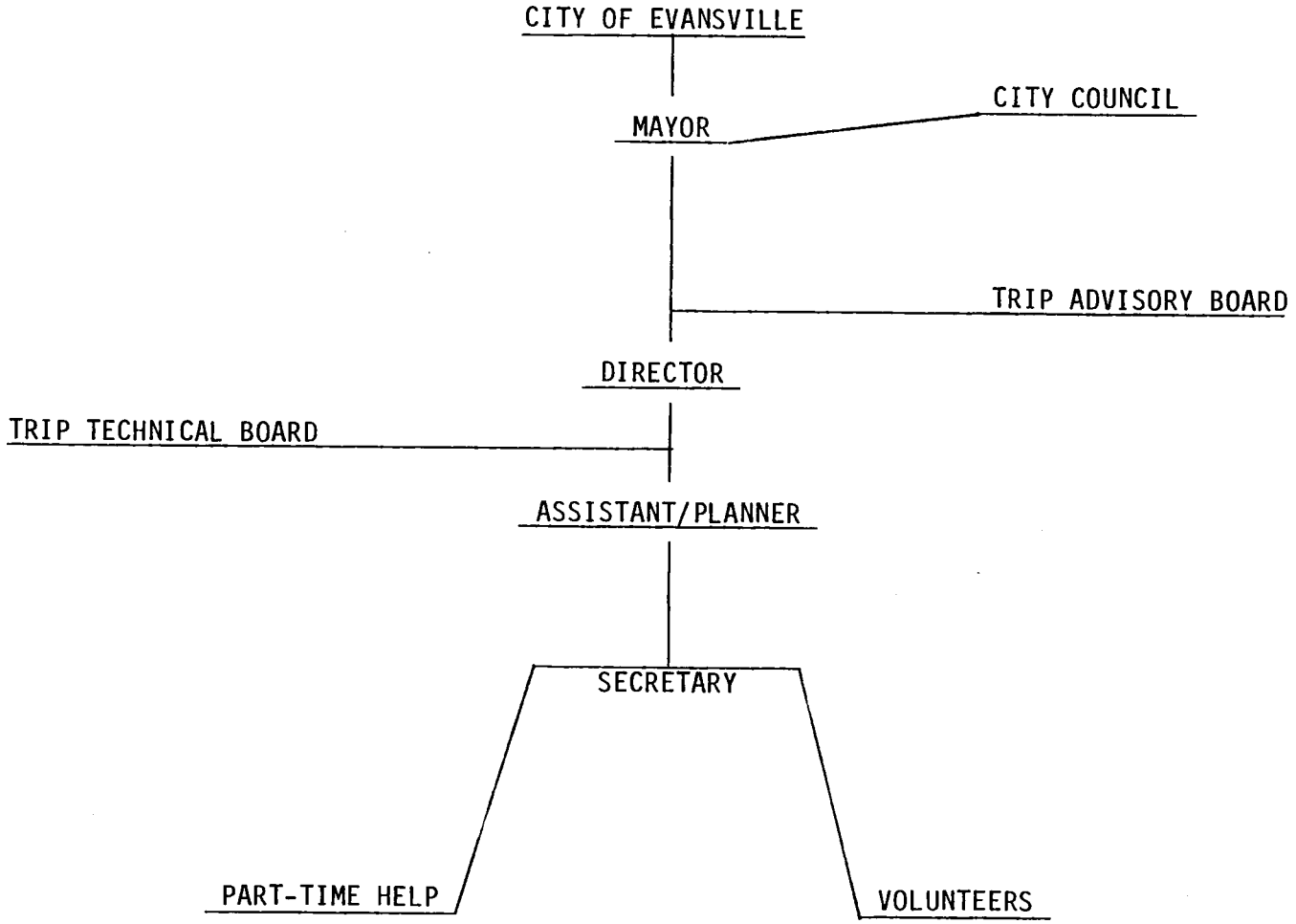
Urban Mass Transportation Administration. National User-Side Subsidy Inventory. Washington, DC: Author, 1982.

Wachs, M. Transportation for the Elderly: Changing Lifestyles, Changing Needs. Berkeley, CA: University of California Press, 1979.

APPENDICES

APPENDIX A

ORGANIZATIONAL CHART OF THE EVANSVILLE TRIP


CITY OF EVANSVILLE
MAYOR
CITY COUNCIL
TRIP ADVISORY BOARD
DIRECTOR
TRIP TECHNICAL BOARD
ASSISTANT/PLANNER
SECRETARY
PART-TIME HELP
VOLUNTEERS

APPENDIX B

ELIGIBILITY PRIORITIES

1. Persons who either physically or financially are not able to own or operate a car.

2. Persons who are either:

   A. Over the age of 60.

   B. Under 60 and physically handicapped.

3. Persons who do not have either

   A. Financial access to transportation, and/or

   B. Geographical access to mass transportation and/or

   C. Physical access to mass transportation.

4. Persons whose need for transportation falls into these prioritized categories:

   1. Medical runs not reimbursable by Medicare or Medicaid:

      --Medical care including psychiatric care
      --Counseling services
      --Caring for relatives confined because of illnesses

   2. Access to Human Services

   3. Shopping for essential daily living items.

   4. Work-site transportation.

   5. Recreation activities or volunteer work.

5. Persons whose income is less than 130% of poverty, unless there is danger of abuse or neglect.

January 14, 1981

7. Those who, because of physical or mental disability cannot use public transportation without assistance.

APPENDIX C

MAXIMUM INCOME LEVELS

FISCAL YEAR 1984
MAXIMUM MONTHLY AND ANNUAL GROSS INCOME LEVELS
BY FAMILY SIZE

Family Size	Maximum Income Levels					
	130% of Poverty		150% of Poverty		215% of Poverty	
	Monthly	Annual	Monthly	Annual	Monthly	Annual
1	$ 527	$ 6,318	$ 608	$ 7,290	$ 871	$10,449
2	707	8,502	818	9,810	1,172	14,061
3	891	10,686	1,028	12,330	1,473	17,673
4	1,073	12,870	1,238	14,850	1,774	21,285
5	1,255	15,054	1,448	17,370	2,075	24,897
6	1,437	17,238	1,658	19,890	2,376	28,509
7	1,619	19,422	1,868	22,410	2,677	32,121
8	1,801	21,606	2,078	24,930	2,978	35,733
For Each Additional Family Member Add:	182	2,184	210	2,520	301	3,612

Note: Based upon poverty level for a family of four, $9,900.

APPENDIX D

TRIP APPLICATION

TRIP 1984 APPLICATION

Room 304 Civic Center
Evansville, IN 47708
426-5524

Use one Application per person

Please fill out completely
To avoid delay in processing

Print Clearly

Name: _____ Address: _____ Apt./ Room #_____

Zip Code:_____ Phone Number : _____ Date of Birth: _____ Age: _____

Check One:
☐ Single ☐ Divorced ☐ Widowed
☐ Married (Spouse's Name:_____)
☐ Seperated (Length of Seperation: _____)

SEX:
☐ Female
☐ Male

RACE:
☐ Black
☐ White
☐ Other _____)

Last School Grade Completed:

Number of persons in your Household:

Name and ages of Children living with you:

Total Monthly Gross Income: _____

Your Income: _____
Spouse's Income: _____
Children Under 18 Years Old Income: _____

Source's of Income: _____
Source's of Income: _____
Source's of Income: _____

Unusual Expenses:

Welfare Worker's Name:
Phone Number: 426-

Social Security Numbers:
Your's _____
Spouse's: _____

Rent/ House Payment:

Amt. Food Stamps:

Medicaid Numbers: (Date of Card)
Your's: _____ (_____)
Spouse's: _____ (_____)
Children's: _____ (_____)

DESCRIBE ILLNESS/HANDICAP MOBILITY *PROBLEMS:*
ESTIMATED LENGTH OF PROBLEM: _____ IS PROBLEM PERMANENT? _____
ESTIMATED DOCTOR VISITS PER MONTH: _____ TREATMENT PROVIDED AT VISITS:_____
DESCRIBE CURRENT THERAPY: _____ FREQUENCY: _____
HOW PROBLEM AFFECTS WALKING: _____
MOBILITY AIDS USED INDOORS: _____ OUTDOORS: _____

ESTIMATE NUMBER OF TRIPS MADE EACH MONTH NOW FOR THE FOLLOWING:

DOCTOR	_____ X MONTH	FOOD SHOPPING	_____ X MONTH	VISITING	_____ X MONTH
THERAPY	_____ X MONTH	OTHER SHOPPING	_____ X MONTH	RECREATION	_____ X MONTH
MEDICINE	_____ X MONTH	LAUNDROMAT	_____ X MONTH	CHURCH	_____ X MONTH
NUTRITION	_____ X MONTH	BUSINESS	_____ X MONTH	BEAUTY/BARBERS	_____ X MONTH
WELFARE/FOODSTAMPS	_____	WORK/VOLUNTEER	_____ X MONTH	SENIOR CENTERS	_____ X MONTH
CARE FOR CONFINED/ILL PERSONS	_____ X MONTH			OTHER (WHERE)	_____ X MONTH

HOW YOU GET TO ABOVE PLACES NOW: _____
WHERE YOU NEED TO GO _____ *FREQUENCY:* _____
DO YOU CALL MEDICAID FOR MEDICAL TRANSPORTATION? _____
DO YOU OWN, OPERATE, OR HAVE ACCESS TO A CAR? _____

CHECK TRANSPORTATION YOU USE:
_____CAR (OWNED BY_____)
_____AID – CARE VAN (COMAIER)
_____BASSEMIER'S
_____METS (CITY BUS)
_____SMILE
_____TAXI
_____OTHER (NAME)_____)

TRANSPORTATION YOU USE MOST? _____
WHY YOU USE THIS SERVICE MOST: _____
ARE YOU ABLE TO USE THE CITY BUS? _____
IF NOT, WHY NOT? _____
DO YOU HAVE A BUS – DISCOUNT CARD? _____
*D*ISTANCE OF BUS STOP FROM YOUR HOME: _____
DOES THE BUS GO WHERE YOU NEED TO GO _____

DO FRIENDS/RELATIVES RUN ERRANDS FOR? _____
HOW OFTEN? _____ WHAT KIND? _____

HOW MUCH DOES TRANSPORTATION COST MONTHLY NOW? _____

HOW DO YOU NEED TO SPEND? _____
WHAT TRANSPORTATION SERVICE DO YOU PREFER? _____

APPLICANTS COMMENTS: _____

I AFFIRM THAT THE INFORMATION ON THIS FORM IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____

COMPLETED BY _____ (Agency: _____)

PHONE: _____

FOR OFFICE/COUNSELOR USE ONLY

MOBILITY _____

HEALTH _____

COMMENTS _____

FORMS:	REQUESTED	RECEIVED
604	☐ _____	☐ _____
MOBILITY/THERAPY	☐ _____	☐ _____
S.S. RELEASE	☐ _____	☐ _____
INCOME VERIF.	☐ _____	☐ _____
OTHER _____	☐ _____	☐ _____

RECOMMENDATIONS (DIRECTOR ONLY) _____

THIS SIDE FOR OFFICE USE ONLY - DO NOT FILL OUT

NAME_____ AUTH. REP._____

ADDRESS_____ I.D._____ 84 ☐ 85 ☐

ZIP_____PHONE_____ DONATION LEVEL_____

SPECIAL CONSIDERATIONS: ALLOTMENT_____

DATE	AMT. R'CD.	BOOKS ISSUED	MAILED OUT	DBL CKD	COMMENTS

APPENDIX E

LETTERS ADVISING OF TRIP ELIGIBILITY

CITY OF EVANSVILLE

Transportation Remuneration Incentive Program

323 Civic Center Complex
EVANSVILLE, INDIANA 47708
(812) 426-5934

Date_____

Dear

You applied for TRIP tickets on _____. We regret to inform you that we cannot accept your application because you did not meet the Advisory Board's minimum qualifications for transportation assistance. The reasons you did not qualify are checked below:

1. _____ Not geographically isolated from life-support services.
2. _____ Lives with capable spouse/children.
3. _____ Total household income is over 150% poverty level ($_____ for _____persons).
4. _____ Shares expenses, or has most life-supporting needs paid.
5. _____ Not mobility-impaired (able to ride the City Bus).
6. _____ Requires few life-supporting runs. (Requested little or no assistance for medical runs, groceries or medicine pick-ups; or family/medicaid currently provides most needs in these areas).
7. _____ Family/friends run errands frequently.
8. _____ Requested transportation for life-support runs costs less than $12.00 a month.
9. _____ Did not respond to request for further information sent _____. (_____
10. _____ _____

However, you are eligible for the following if checked below:

(A) _____ S.M.I.L.E. Door-to-Door transportation for $1 per round trip. (425-4247)
(B) _____ MET's City Bus Discount Card.
(C) _____ Medicaid-paid medical transportation: Call 426-5366 the day before doctor or therapy appointments to schedule transportation.
(D) _____ _____
_____

Should you feel that we have not assessed your needs fairly, please call us and we will review your application with you.

Thank you

The TRIP Staff

CITY OF EVANSVILLE
Transportation Remuneration Incentive Program
323 Civic Center Complex
EVANSVILLE, INDIANA 47708
(812) 426-5524

MICHAEL D. VANDEVEER
MAYOR

Date_____

Dear

Upon reviewing your application dated _____, we find that your need for transportation assistance meets the criteria of the TRIP Advisory Board. The program you are eligible for is the TRIP III program, designed to be a cost-saving program. The following paragraphs should help to explain the program.

DONATIONS: According to the information on your application your donation level is _____ per ____value book. You may request the books even if you cannot afford to give anything. Please keep in mind, however, that the donations we receive help TRIP to assist more persons like you.

HOW TO GET TICKETS: Most persons send in a check for the donation they can afford to the above address, and include a note asking for the books they need. (Please do not send cash through the mail). You may come into the office to pick them up, or let us know if someone else will pick them up for you. You may also call for tickets if you are unable to donate (or if you need them quickly), and donate later if you are able.

RULES AND REGULATIONS:

(1) You are the only person who may use your tickets.
(2) Tipping with TRIP tickets is not allowed.
(3) If you are on Medicaid call 426-5366 the day before doctor's appointments to schedule medicaid-paid transportation.
(4) All persons must complete and return a confidential survey yearly to stay on TRIP.
(5) All persons are limited to a certain number of books per month, depending on their ability to use the City bus. Your limit is _____ books a month if you need them.

GENERAL INFORMATION: On the back of this letter is a telephone sticker with our phone number and the numbers of the services that accept TRIP tickets. Also on the back is a chart of these services' charges and other information. Please do not hesitate to call us if you need more information. We are always happy to serve you. We hope you will benefit from the TRIP program; please let us know if we may help you in any way.

Sincerely,

KATHLEEN S. MULLER
DIRECTOR

COST PER ONE-WAY TRIP

CARRIER/ NUMBER	HOURS OPEN	DAYS OPEN	NON-MEDICAL WALK-ON	MEDICAL WALK-ON	NON-MEDICAL WHEELCHAIR	MEDICAL WHEELCHAIR	NOTES
Aid-Care Van 422-8515	24	ALL	$7.50	$7.50	$10.00	$25.00	Add $5.00 for County runs
Bassemier's 423-3200	24	ALL	$10.00	$8.00	$10.00	$23.00	Add $10.00 for County runs
METS 423-4856	(A)	M-Sa.	25¢	25¢	25¢	25¢	Add 25¢ for transfer
SMILE 425-4247	8-5	M-F	$1.00[B]	$1.00[B]	$7.50	$7.50	Call 24 hours ahead if need wheelchair lift van
Trans-Cort 464-7805	8-4	M-F		(C)			
Yellow Taxi 425-8112	24	ALL	$1.30 plus $1.90 for first mile; add $1.00 for each mile after				

A. MET's - Hourly routes start at 6:15 a.m., half-hourly routes start at 5:45 a.m. All routes leave Downtown for final run at 5:15 p.m. Cash discount rates with half-fare card is 8:45 a.m. to 2:15 daily. TRIP users pay 25¢ ticket at any time.

B. SMILE - Fare increase to $1.25 on Sept. 1, 1984.

C. TRANSCORT - A door to door service for frail, ill elderly persons to get to medical-related appointments. Call when you make your doctor appointments to get on their schedule. Donations are needed and appreciated.

AID-CARE, BASSEMEIRS, SMILE, TRANSCORT, and YELLOW TAXI are all door-to-door service.

ALL CARRIERS ACCEPT CASH OR TRIP TICKETS OR A COMBINATION OF BOTH, EXCEPT MET'S; USE CASH OR TICKETS ONLY ON MET'S.

CITY OF EVANSVILLE
Transportation Remuneration Incentive Program
323 Civic Center Complex
EVANSVILLE, INDIANA 47708
(812) 426-5524

MICHAEL D. VANDEVEER
MAYOR

Date_____

Dear

Upon reviewing your application dated _____, we find that your need for transportation assistance meets the criteria of the TRIP Advisory Board. Therefore, we are placing you on the TRIP XX program, specifically designed for low-income, handicapped persons. The following should help to explain it.

DONATIONS: By law, we do not ask for donations.

HOW TO GET THE TICKETS: You will receive the tickets by mail once a month beginning _____.

RULES AND REGULATIONS:

1. No-one but you is allowed to use your tickets.
2. Tipping with TRIP tickets is not allowed.
3. TRIP will only pay for your transportation, not the delivery of items, or having the Taxi wait for you.
4. If you are on Medicaid, call 426-5366 the day before your medical appointment to schedule medicaid-paid transportation.
5. You must re-apply _____ times a year. We will notify you well in advance to let you know the information we will need.
6. Your allottment of tickets is based on your need. If you are receiving a large amount of tickets for therapy or medical runs, you must notify our office when you no longer need them for that reason. Your allottment will be ____ books worth _____ each or _____ per month.

YOUR RIGHTS: If your tickets are reduced, held or stopped for any reason, or you feel you have been discriminated against by our office; you have the right to appeal this action. You may expect full cooperation of TRIP in your appeal.

GENERAL INFORMATION: On the back of this letter is a phone sticker with our number and the numbers of the services that accept TRIP tickets. Also on the back is a chart explaining these services charges, hours, etc. Please call us if you need any further information. We hope you will benefit from the TRIP Program.

Sincerely,

KATHLEEN S. MULLER
Director.

COST PER ONE-WAY TRIP

CARRIER/ NUMBER	HOURS OPEN	DAYS OPEN	NON-MEDICAL WALK-ON	MEDICAL WALK-ON	NON-MEDICAL WHEELCHAIR	MEDICAL WHEELCHAIR	NOTES
Aid-Care Van 422-8515	24	ALL	$7.50	$7.50	$10.00	$25.00	Add $5.00 for County runs
Bassemier's 423-3200	24	ALL	$10.00	$8.00	$10.00	$23.00	Add $10.00 for County runs
METS 423-4856	(A)	M-Sa.	25¢	25¢	25¢	25¢	Add 25¢ for transfer
SMILE 425-4247	8-5	M-F	$1.00[B]	$1.00[B]	$7.50	$7.50	Call 24 hours ahead if need wheelchair lift van
Trans-Cort 464-7805	8-4	M-F		(C)			
Yellow Taxi 425-8112	24	ALL	$1.30 plus $1.90 for first mile; add $1.00 for each mile after				

A. MET's - Hourly routes start at 6:15 a.m., half-hourly routes start at 5:45 a.m. All routes leave Downtown for final run at 5:15 p.m. Cash discount rates with half-fare card is 8:45 a.m. to 2:15 daily. TRIP users pay 25¢ ticket at any time.

B. SMILE - Fare increase to $1.25 on Sept. 1, 1984.

C. TRANSCORT - A door to door service for frail, ill elderly persons to get to medical-related appointments. Call when you make your doctor appointments to get on their schedule. Donations are needed and appreciated.

AID-CARE, BASSEMEIRS, SMILE, TRANSCORT, and YELLOW TAXI are all door-to-door service.

ALL CARRIERS ACCEPT CASH OR TRIP TICKETS OR A COMBINATION OF BOTH, EXCEPT MET'S; USE CASH OR TICKETS ONLY ON MET'S.

APPENDIX F

TRIP III SUGGESTED DONATIONS

Monthly Income	Donation
$ 0 to $200	$0 to $.50
$201 to $300	$ .50
$301 to $400	$1.00
$401 to $500	$1.50
$501+	$2.00

APPENDIX G

1982 AND 1984 TRIP SURVEYS

TRIP 1982 SURVEY

1. NAME_____ 2.TICKET NUMBER_____ 3.DATE_____

4. ADDRESS _____ 5. ZIP_____6.PHONE_____

7. DO YOU OWN A CAR?_____8.RACE_____9.DATE OF BIRTH_____

10. NUMBER IN HOUSEHOLD_____11.MARITAL STATUS_____

12. ARE YOU HANDICAPPED?_____13. DESCRIBE HANDICAP._____

14. ARE YOU CURRENTLY UNDER DOCTOR'S CARE FOR YOUR HANDICAP?_____

15. HOW OFTEN DO YOU RECEIVE TREATMENTS FOR YOUR HANDICAP?_____

16. HOW DOES YOUR HANDICAP AFFECT YOUR ABILITY TO WALK?_____

17. LENGTH OF DISABILITY_____ 18. KIND OF MOBILITY AID YOU USE._____

19. TOTAL MONTHLY INCOME OF YOUR HOUSEHOLD_____20. WHAT IS YOUR SOURCE OF INCOME?_____21. PLACE OF EMPLOYMENT_____

22. ARE YOU ON MEDICAID?_____23. WHAT AMOUNT OF FOOD STAMPS DO YOU GET?_____

24. AMOUNT OF RENT/HOUSE PAYMENTS_____ 25. UNUSUAL EXPENSES_____

26. NUMBER OF TRIPS MADE EACH MONTH WITH TRIP TICKETS FOR THE FOLLOWING:

LAUNDROMAT _____	FOOD SHOPPING _____	VISIT FRIENDS _____
WELFARE/FOOD STAMP ____	OTHER SHOPPING _____	RECREATION _____
NUTRITION _____	BUSINESS _____	CHURCH _____
MEDICINE _____	WORK _____	BEAUTY/BARBER _____
THERAPY _____	VOLUNTEER WORK _____	OTHER _____
DOCTOR _____	SENIOR CENTERS _____	WHERE? _____

27. WHERE DO YOU GO WITHOUT TRIP TICKETS? (HOW OFTEN)_____

---

28. HOW DO YOU GET THERE WITHOUT TRIP TICKETS?_____

29. CHECK TRANSPORTATION YOU USE: CAR ___ (OWNED BY_____)SMILE_____
AID-CARE_____ B&H _____METS (CITY BUS)_____TAXI ____ OTHER (NAME) _____

30. WHAT SERVICE DO YOU USE THE MOST?_____31. ARE YOU ABLE TO USE THE CITY BUS?_____ 32. DISTANCE OF BUS STOP FROM YOUR HOME_____

33. DOES THE BUS TAKE YOU WHERE YOU NEED TO GO? _____34. DO YOUR RELATIVES OR FRIENDS RUN ERRANDS FOR YOU?_____ 35. WHAT KIND?_____

36. HOW OFTEN?_____37. DO YOU GET ENOUGH TICKETS TO MEET YOUR NEEDS?____

38. HOW MANY MORE DOLLARS WORTH OF TICKETS DO YOU NEED?_____

39. IF YOU HAD MORE TICKETS, WHERE WOULD YOU GO?_____

TRIP 1984 SURVEY
Room 304 Civic Center
Evansville, IN 47708
426-5524

Please fill out completely
To avoid delay in processing

Print Clearly

Name: _____ Address: _____ Apt./ Room #_____

Zip Code: _____ Phone Number: _____ Date of Birth: _____ Age: _____

Check One:
☐ Single ☐ Divorced ☐ Widowed
☐ Married (Spouse's Name: _____)
☐ Seperated (Length of Seperation: _____)

SEX: ☐ Female ☐ Male

RACE: ☐ Black ☐ White ☐ Other _____

Last School Grade Completed:

Number of persons in your Household:

Name and ages of Children living with you:

Total Monthly Gross Income: _____

Your Income: _____
Spouse's Income: _____
Children Under 18 Years Old Income: _____

Source's of Income: _____
Source's of Income: _____
Source's of Income: _____

Unusual Expenses:

Welfare Worker's Name:
Phone Number: 426-

Social Security Numbers:
Your's _____
Spouse's: _____

Rent/ House Payment:

Amt. Food Stamps:

Medicaid Numbers: (Date of Card)
Your's: _____ (_____)
Spouse's: _____ (_____)
Children's: _____ (_____)

DESCRIBE ILLNESS/HANDICAP MOBILITY *PROBLEMS:* _____
ESTIMATED LENGTH OF PROBLEM: _____ IS PROBLEM PERMANENT? _____
ESTIMATED DOCTOR VISITS PER MONTH: _____ TREATMENT PROVIDED AT VISITS: _____
DESCRIBE CURRENT THERAPY: _____ FREQUENCY: _____
HOW PROBLEM AFFECTS WALKING: _____
MOBILITY AIDS USED INDOORS: _____ OUTDOORS: _____

ESTIMATE NUMBER OF TRIPS MADE EACH MONTH WITH TRIP TICKETS FOR THE FOLLOWING:

DOCTOR	_____ X MONTH	FOOD SHOPPING	_____ X MONTH	VISITING	_____ X MONTH
THERAPY	_____ X MONTH	OTHER SHOPPING	_____ X MONTH	RECREATION	_____ X MONTH
MEDICINE	_____ X MONTH	LAUNDROMAT	_____ X MONTH	CHURCH	_____ X MONTH
NUTRITION	_____ X MONTH	BUSINESS	_____ X MONTH	BEAUTY/BARBERS	_____ X MONTH
WELFARE/FOODSTAMPS	_____	WORK/VOLUNTEER	_____ X MONTH	SENIOR CENTERS	_____ X MONTH
CARE FOR CONFINED/ILL PERSONS	_____ X MONTH			OTHER (WHERE)	_____ X MONTH

WHERE YOU GO WITHOUT TRIP TICKETS: _____ FREQUENCY: _____
HOW YOU GET THERE WITHOUT TRIP TICKETS: _____
DO YOU CALL MEDICAID FOR MEDICAL TRANSPORTATION? _____
DO YOU OWN, OPERATE, OR HAVE ACCESS TO A CAR? _____

CHECK TRANSPORTATION YOU USE:
_____ CAR (OWNED BY _____)
_____ AID – CARE VAN (COMAIER)
_____ BASSEMIER'S
_____ METS (CITY BUS)
_____ SMILE
_____ TAXI
_____ OTHER (NAME) _____)

TRANSPORTATION YOU USE MOST? _____
WHY YOU USE THIS SERVICE MOST: _____
ARE YOU ABLE TO USE THE CITY BUS? _____
IF NOT, WHY NOT? _____
DO YOU HAVE A BUS – DISCOUNT CARD? _____
DISTANCE OF BUS STOP FROM YOUR HOME: _____
DOES THE BUS GO WHERE YOU NEED TO GO _____
DO FRIENDS/RELATIVES RUN ERRANDS FOR YOU? _____
HOW OFTEN? _____ *WHAT KIND?* _____

WHEN YOU RUN OUT OF TRIP TICKETS:
HOW DO YOU GET AROUND? _____
WHAT TRANSPORTATION DO YOU USE? _____
HOW MUCH MONEY (NOT INCLUDING TICKETS) DO YOU SPEND ON TRANSPORTATION MONTHLY? _____
AMOUNT OF TICKETS NEEDED: _____
YOUR COMMENTS: _____

I AFFIRM THAT THE INFORMATION ON THIS FORM IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____

COMPLETED BY _____ (Agency: _____)

PHONE: _____

FOR OFFICE/COUNSELOR USE ONLY

MOBILITY _____

HEALTH _____

COMMENTS _____

FORMS:	REQUESTED	RECEIVED
804	☐ _____	☐ _____
MOBILITY/THERAPY	☐ _____	☐ _____
S.S. RELEASE	☐ _____	☐ _____
INCOME VERIF.	☐ _____	☐ _____
OTHER _____	☐ _____	☐ _____

RECOMMENDATIONS (DIRECTOR ONLY) _____

THIS SIDE FOR OFFICE USE ONLY - DO NOT FILL OUT

NAME_____ AUTH. REP._____

ADDRESS_____ I.D._____ 84 ☐ 85 ☐

ZIP_____PHONE_____ DONATION LEVEL_____

SPECIAL CONSIDERATIONS: ALLOTMENT_____

DATE	AMT. R'CD.	BOOKS ISSUED	MAILED OUT	DBL CKD	COMMENTS

APPENDIX H

RECERTIFICATION LETTER AND FINAL NOTIFICATION

CITY OF EVANSVILLE
Transportation Remuneration Incentive Program
304 CIVIC CENTER COMPLEX
EVANSVILLE, INDIANA 47708
(812) 426-5524

MICHAEL D. VANDEVEER
MAYOR

DATE_____

DEAR TRIP XX CLIENT:

STATE REGULATIONS REQUIRE YOU TO REAPPLY FOR TRIP TICKETS AT LEAST YEARLY. ACCORDING TO OUR RECORDS, WE NEED YOU TO FILL OUT AND SIGN THE REQUIRED PAPERS WITHIN THE NEXT 30 DAYS, IN ORDER TO CONTINUE RECEIVING TICKETS.

PLEASE NOTE THE FOLLOWING CHECKED INFORMATION WE NEED TO DETERMINE YOUR CONTINUED ELIGIBILITY:

_____ PROOF OF INCOME (_____

_____ PROOF OF CONTINUED DISABILITY TO BE FILLED OUT BY DOCTOR (ENCLOSED)

_____ PROOF OF CONTINUED THERAPY TO BE FILLED OUT BY DOCTOR (ENCLOSED)

IF YOU ARE SEVERLY HANDICAPPED OR ILL AND YOU WISH US TO MAIL YOU THE NECESSARY PAPERS SO YOU OR YOUR COUNSELOR CAN FILL THEM OUT, PLEASE LET US KNOW. OTHERWISE, PLEASE COME INTO OUR OFFICE WITHIN THE NEXT 30 DAYS. IF YOU ARE UNABLE TO COME IN OR RETURN THE REQUIRED PAPERS, WE MUST HOLD YOUR TICKETS NEXT MONTH DUE TO THE FACT YOUR APPLICATION WILL EXPIRE AND WE WILL BE UNABLE TO CHARGE THE GOVERNMENT FOR YOUR TICKETS. YOU WILL, THEREFORE, BE RESPONSIBLE FOR ALL CHARGES BEYOUND THE EXPIRATION OF YOUR APPLICATION.

THANK-YOU

THE TRIP STAFF

TRIP Twenty
Room 304
Civic Center Complex
Evansville, Indiana 47708

FINAL NOTICE

Dear TRIP Client;

You have been asked to come in to reapply to continue receiving TRIP tickets in 1983. We are now unable to bill the government for your tickets because your application has expired, therefore, we cannot send you any more tickets until you come in our office.

You will receive all tickets held when you come in. If you are unable to come in because of illness, please call, or send your counselor or a relative to sign up for you.

We also need verification of your income if you are under 60 years old, and you receive any income other than SSI or Social Security. You must come in this month to continue on TRIP.

Thank-you,
The TRIP Staff

APPENDIX I

AMBULATORY AND NONAMBULATORY USAGE SHEETS

TRIP FY85
AMBULATORY

NAME: _____

ADDRESS: _____

ZIP: _____

PHONE: _____

BOOK: _____

CASE: _____

ABLE TO RIDE BUS: _____

DATE OF BIRTH: _____

DISABILITY: _____

DUE DATE: _____

EVERY 12 MO: ____ EVERY 6 MO: ____

DATE/AMT SENT	Special Considerations:					
Recert Due		OTHER (NAME)	METS	SMILE	YELLOW TAXI	TOTAL
7-1						
8-1						
9-1						
Recert Due	Total Rec'd $_____		Total Spent $_____	Balance $_____		
10-1						
11-1						
12-1						
Recert Due	Total Rec'd $_____		Total Spent $_____	Balance $_____		
1-1						
2-1						
3-1						
Recert Due	Total Rec'd $_____		Total Spent $_____	Balance $_____		
4-1						
5-1						
6-1						

TRIP FY85
NON-AMBULATORY

NAME: _____
ADDRESS: _____
ZIP: _____
PHONE: _____

BOOK: _____
CASE: _____
ABLE TO RIDE BUS: _____
DATE OF BIRTH: _____
DISABILITY: _____
DUE DATE: _____
EVERY 12 MO: ____ EVERY 6 MO: ____

DATE/AMT SENT	Special Considerations:					
Recert Due	COMMENTS	Other (Name)	AID-CARE	B & H	SMILE	TOTAL
7-1						
8-1						
9-1						
Recert Due	Total Rec'd $_____		Total Spent $_____	Balance $_____		
10-1						
11-1						
12-1						
Recert Due	Total Rec'd $_____		Total Spent $_____	Balance $_____		
1-1						
2-1						
3-1						
Recert Due	Total Rec'd $_____		Total Spent $_____	Balance $_____		
4-1						
5-1						
6-1						

APPENDIX J

TRIP DIRECTOR QUESTIONNAIRE

TRIP QUESTIONNAIRE
(Director)

How did the idea of TRIP evolve? _____

_____

_____

Who was the main impetus behind the program? _____

_____

When did the program begin? TRIP III _____

TRIP XX _____

How were the carriers first contacted? _____

_____

_____

What carriers were involved? _____

_____

_____

Have any carriers withdrawn from the program? _____

If yes, which carriers were involved and why did they withdraw? _____

_____

_____

Have any additional carriers decided to participate in the program? _____

_____

_____

How were potential clients first contacted? _____

_____

_____

When the program first began, what were the eligibility requirements? _____

_____

_____

How have the requirements changed? _____

_____

_____

When did these changes occur? _____

What is the largest number of clients to date? TRIP III _____

TRIP XX _____

How many clients are now on the program? TRIP III _____

TRIP XX _____

Is there room for new clients? _____

If no, what are the procedures for individuals to get on the program once others have dropped off? _____

_____

_____

Describe the registration process. _____

_____

_____

_____

_____

How often are clients recertified? TRIP III _____

TRIP XX _____

Describe the recertification process. _____

_____

_____

_____

_____

Does TRIP do any marketing? _____

_____

What is the organization of TRIP? _____

_____

_____

How many staff members are there? _____

What are the job titles? _____

_____

Is there any advisory committee? _____

If yes, how is the membership made up? _____

_____

_____

What are the funding sources and the amount of funding for the program?

TRIP III _____

TRIP XX _____

Have the funding sources always been constant? _____

If no, please explain. _____

_____

What are the costs of TRIP? (Administration, subsidy, etc.)

TRIP III _____

_____

TRIP XX _____

_____

Describe the documentation you must keep concerning TRIP for funding purposes. ____

_____

_____

_____

How are TRIP tickets distributed? TRIP III _____

TRIP XX _____

How many tickets do TRIP clients receive a month?

TRIP III _____

TRIP XX _____

How is the amount of subsidy determined? _____

_____

_____

What is the process of utilizing TRIP tickets? _____

_____

_____

_____

How are carriers reimbursed? _____

_____

_____

Is there a limit on the amount of tickets that may be used in a month? _____

If yes, please describe. _____

_____

_____

Is there a limit on the types of trips that may be taken with TRIP tickets? _____

_____

If yes, please describe. _____

_____

_____

Is there a limit on the hours in which trips may be taken with TRIP tickets? _____

_____

If yes, please describe. _____

_____

_____

How do you guard against fraud? _____

_____

_____

_____

Is there abuse? _____

If yes, please describe. _____

_____

_____

APPENDIX K

TRIP CARRIER QUESTIONNAIRE AND COVER LETTER

CITY OF EVANSVILLE
Transportation Remuneration Incentive Program
304 CIVIC CENTER COMPLEX
EVANSVILLE, INDIANA 47708
(812) 426-5524

MICHAEL D. VANDEVEER
MAYOR

January 11, 1984

To: The Carriers

From: Kathy Muller, Director, TRIP

Enclosed you will find a survey that is being conducted by the University of Tennessee for TRIP at no cost to the program. This survey is an important part of the total study of TRIP's impact on our community. I ask that you take the time to fill out this survey and return it to the person listed on the last page as soon as possible. This survey may assist TRIP in gathering ammunition to appeal for additional funding to other federal agencies eventually.

Please, however, do not hesitate to be honest with your answers. If you have problems with TRIP, voice those problems. This study may also assist you by offering workable solutions to existing difficulties.

Thank you in advance for your assistance in this important project.

TRIP QUESTIONNAIRE
(Carriers)

Business _____

Contact Person _____ Phone _____

SERVICE

Number and types of vehicles _____

_____

Hours and days of operation _____

_____

Service boundary _____

_____

Description of service _____

_____

_____

Special services offered (ie escorts, wheelchair lift equipped vehicles) _____

_____

Description of fare structure _____

_____

Is advance reservation required? _____
If yes, please describe. _____

_____

PARTICIPATION

How long have you participated in TRIP? _____

How were you first contacted to participate in the program? _____

_____

_____

Why did you decide to participate? _____

_____

_____

ADMINISTRATION

How many individuals do you employ? _____

Please list their job titles and the number of employees at each position. ___

_____

_____

_____

What records must you maintain for TRIP? _____

_____

_____

_____

Please describe the reimbursement procedures. _____

_____

_____

_____

EFFECTS OF TRIP

Has participating in TRIP affected any of the following? If yes, please describe.

Number of clients _____ _____

_____

Revenue _____ _____

_____

Costs _____ _____

_____

Vehicles or equipment _____ _____

_____

Service hours _____ _____

_____

PROBLEMS

Have you encountered any problems with the following? If yes, please describe.

Legislative restrictions _____ _____

_____

Insurance _____ _____

_____

Contract with the City _____ _____

_____

Reimbursement procedures _____ _____

_____

TRIP clients _____ _____

_____

TRIP personnel _____ _____

_____

ADDITIONAL COMMENTS AND RECOMMENDATIONS

_____

_____

_____

_____

_____

Please return this questionnaire to:

Leanne Cox
Apt. 606
5266 Edmondson Pike
Nashville, TN 37211
(615) 259-6264 (work)

Thank you for your cooperation.

APPENDIX L

1982 TRIP EVALUATION SURVEY

1982 TRIP SURVEY
EVALUATION OF THE TRIP PROGRAM BY CLIENTS

THIS PART OF THE 1982 SURVEY IS ANONYMOUS--DO NOT PUT YOUR NAME ON THIS SHEET.

PART I EMPLOYEE EVALUATION:
(Check one or more choice to complete sentences.)

1. The TRIP office staff usually is:

____(A) courteous
____(B) helpful
____(C) indifferent
____(D) rude
____(E) not helpful

2. I have had problems with the TRIP staff:

____(A) never
____(B) once
____(C) several times
____(D) always

COMMENTS OR COMPLAINTS ABOUT TRIP'S STAFF:_____

_____

PART II PROGRAM EVALUATION: (Check one or more)

1. My tickets usually arrive each month:

____(A) promptly
____(B) late

2. I receive

____(A) sufficient tickets for my needs
____(B) Almost enough for my needs
____(C) Not nearly enough for my needs

3. Since I have been using TRIP it is

___(A) more efficient
___(B) less efficient
___(C) more helpful
___(D) less helpful
___(E) same as before

4. Since I have been on TRIP I go out

___(A) a lot more often
___(B) more often
___(C) about the same

5. TRIP tickets are:

___(A) Very helpful
____(B) somewhat helpful
___(C) not much help

6. I believe TRIP should serve only:

____(A) Low-income persons
____(B) Elderly
____(C) Handicapped
____(D)_____

7. I have been on TRIP for _____
8. If I could write the rules, I would allow _____
_____
9. I would not allow_____

PART III TRIP's FUTURE: CLIENT SUGGESTIONS TO AVOID PROGRAM CUTS.

TRIP is affected by federal cuts, especially by the elimination of the Workfare, CETA and Senior Aide programs. If we were to hire persons to replace these people, 300 of our 1600 clients would have to be removed on July 1. We are recruiting volunteers and attempting to seek extra money, but we need your opinion, too.

1. If TRIP removes 300 people it will:___(A) not harm anyone who really needs help. ___(B) Only harm a few persons. ____(C) harm many people.

2. TRIP should ___(A) recruit volunteers from the clients.
___(B) Solicit donations from clients. ___(C) _____.

TURN PAGE OVER TO COMPLETE

3. I would be able to contribute each month $_____

4. I would be able to volunteer each month_____hours.

COMMENTS OR SUGGESTIONS TO HELP CUT COSTS:_____

PART IV SPEAKOUT!

PLEASE FEEL FREE TO USE THIS SPACE TO VOICE YOUR OPINION ON ANYTHING TO DO WITH THE TRIP PROGRAM: THE QUALITY OF TRANSPORTATION YOU GET, THE RULES AND REGULATIONS, ETC. THANK-YOU FOR YOUR OPINIONS!!

APPENDIX M

POINT SYSTEM FOR DETERMINING TRIP ELIGIBILITY

I. Geographic Location
+5 Geographically isolated
(No immediate neighbors, isolated from two or more life supporting needs, e.g. medical care, drugstores, groceries.)
+3 Isolated from one of above.
0 Close to all services.

II. Support System
+5 Living alone or with incapacitated spouse/children.
+3 Living with capable children over 14, but not over 18.
0 Living with capable spouse/children over 18.

III. Monthly Income
+10 Total household income under 130% poverty.
+ 5 Total household income under 150% poverty.
- 5 Total household income over 150% poverty.

IV. Unusual Expenses
+10 Pays own utilities, medical insurance (or has none), housing costs, food expenses, telephone, nursing care, etc.
+10 Pays most living expenses, then deduct -1 each for food-stamps, rent supplement, Medicaid, Project Safe, VNA housekeeping, nursing service, other supplements.
0 Has all life support expenses paid by others.
÷ If utilities and/or living expenses are shared by others divide 10 by the percentage of the cost the client pays.

V. Handicaps (Physical/Mental/Emotional)
+10 Severe (even if temporary) incapacitating illness.
+10 Disability resulting in inability to ambulate.
+10 Disability/illness resulting in frequent or permanent severe problems with ambulation (use of crutches, walker, person to assist).
+ 8 Disability/illness resulting in frequent or permanent moderate problems with ambulation (uses quad-cane, cane, severe shortness of breath).
+ 3 Permanent disability slightly affecting ambulation (carries cane, limps, short of breath).
+ 2 Disability not affecting ambulation.
0 No diability or handicap.

VI. Need for Transportation
+5 Per run up to 20 -- medical runs.
+2 Per run up to 10 -- life supporting runs: drugstore, nutrition sites, foodstamp office, caring for confined/ill persons, food shopping.
+1 Per run up to 5 -- laundromat, other shopping, business, work, volunteer work, trips to avoid isolation.

VII. Availability of Transportation
+5 Family/friends do not run life-support errands.
+5 Unable to use city bus.
+5 Requested/needed transportation costs $12.00 per month or more.
-5 Each medical run paid by Medicaid or provided by friends/ family.
-5 Able to use city bus.
-5 Requested transportation costs less than $12.00 per month.
-2 Each run provided by family/friends for life-essential needs.
-1 Each run provided by family/friends for other needs.

Possible points: 90
Minimum points:
TRIP III - 40
TRIP XX - 45
No Means - 55

VITA

Leanne Cox was born in Evansville, Indiana on July 9, 1957. She attended elementary schools in that city and was graduated from William Henry Harrison High School in 1975. The following August she entered the University of Evansville, and in May 1979 she received a Bachelor of Science degree in Environmental Science.

After she graduated, Ms Cox was employed by the Evansville Urban Transportation Study as an Environmental Planner. In September 1980 she entered the Graduate School of The University of Tennessee, Knoxville. In August 1984, Ms Cox received the Master of Science in Planning degree.

The author is a member of the American Planning Association and is presently employed as a transportation planner by the Metropolitan Planning Commission of Nashville and Davidson County.