



Commonwealth of Massachusetts
Executive Office of Health and Human Services

Human Service Transportation Office

FY2012 Annual Report

HST Office
100 Hancock St., 6th Floor
Quincy, MA 02171

www.mass.gov/hst

Deval Patrick, Governor

Timothy P. Murray, Lieutenant Governor

John W. Polanowicz, Secretary
Executive Office of Health and Human Services

Message from the Director

FY12 proved to be another busy year for the EOHHS HST Office. In FY12, consumer trips increased by 8% (approximately ½ million trips) to 6.3M trips. Despite the increase in trip volume, average cost per trip only increased by 2.6%, or \$0.42 per trip to \$20.46. This rate reflects the full spectrum of HST consumer trips serving five separate agencies and accounts for ambulatory, non-ambulatory, local and long distance services. We also officially began services for the Massachusetts Commission for the Blind in FY12, bringing the total agencies served under the HST system to five, including six program models. While market-driven demand-response MassHealth PT-1 trip costs increased slightly from FY11, the FY12 average cost per trip of \$15.17 is still over \$0.30 less than the FY05 average cost per trip of \$15.50

Additionally in FY12, the HST Office launched the Mobility Management Information Network, a two-year federally-funded initiative, grounded in our previous work in mobility management and community transportation coordination, to expand mobility management resources and increase community transportation coordination by building the capacity of local and regional stakeholders across the Commonwealth. Accomplishments included identifying topics of interest to community stakeholders and beginning to develop resources and tools for mobility managers and community transportation coordination leaders. We disseminated these tools and resources through the HST website (www.mass.gov/hst) and through our relationships with regional coordinating efforts around Massachusetts, and look forward to continuing this important work through FY13 and beyond.

Finally, I would like to express my appreciation and thanks to the HST Advisory Board and participating agencies for their guidance and support of the Office in FY12. I would like to also extend a sincere thank you to recently retired HST Director Jim Flanagan for his outstanding leadership and vision, as well as to the HST staff and brokers for their dedication and hard work in achieving the outcomes outlined in this report.

Sincerely,
Christine Newhall

Who We Are

The EOHHS Human Service Transportation (HST) Office operates within the Executive Office of Health and Human Services (EOHHS) and reports to the EOHHS Chief Administrative Officer. The HST Office receives policy guidance and support from its Advisory Board comprised of key stakeholders and participating agencies. The HST Office provides services for participating agencies through a statewide brokerage system by contracting with six (6) Regional Transit Authorities who act as brokers to provide direct transportation services for EOHHS consumers.

HST Advisory Board

Chair - Catherine Mick, Chief Administrative Officer, Executive Office of Health and Human Services (EOHHS)
 Sandra Albright, Undersecretary, Executive Office of Elder Affairs (EOEA)
 Cheryl Poppe, Deputy Secretary, Department of Veterans' Services (DVS)
 Michael Lambert, Special Assistant to the MBTA General Manager (MassDOT)
 Amy Andrade, Director of Member and Provider Services, MassHealth (Medicaid)
 Larry Tummino, Deputy Commissioner, Department of Developmental Services (DDS)
 Kasper Goshgarian, Deputy Commissioner, Massachusetts Rehabilitation Commission (MRC)
 Ron Benham, Bureau Director, Department of Public Health (DPH)
 John Oliveira, Assistant Commissioner, Massachusetts Commission for the Blind (MCB)
 Heidi Paulson, Legal Advisor, EOHHS

HST Participating Agencies

Department of Developmental Services (DDS)
 Department of Public Health (DPH)
 MassHealth (Medicaid)
 Massachusetts Commission for the Blind (MCB)
 Massachusetts Rehabilitation Commission (MRC)

HST Brokers

Berkshire Regional Transit Authority (BRTA)
 Cape Ann Transit Authority (CATA)
 Cape Cod Regional Transit Authority (CCRTA)
 Franklin Regional Transit Authority (FRTA)
 Greater Attleboro/Taunton Regional Authority (GATRA)
 Montachusett Area Regional Transit (MART)

HST Staff

Ed Bailey
 Rachel Fichtenbaum
 Theadora Fisher
 Perry Fong
 Gail Hill
 Vera Kirrane
 Ronni Lieberman
 William McGuinness
 Sandra Mulcahy
 Tanya Pina
 Taysha Rivera
 Tanja Ryden

Who We Are

The Executive Office of Health and Human Services (EOHHS) comprises 16 agencies that collectively deliver and administer most of the Commonwealth's health and human services. We support the health and well-being of residents through services that include Medicaid, nutrition assistance, mental health, public health, and transitional assistance. EOHHS has an operating budget which represents approximately half of the Commonwealth's budget and makes us one of the largest state government organizations in the country.

EOHHS' work touches the lives of all Massachusetts residents. We provide targeted services to approximately 1.5 million of the Commonwealth's most vulnerable populations. We also protect, preserve, and improve the health of all the Commonwealth's residents through our public health, safety, and quality programs, and other initiatives, including a coordinated human service transportation system.

The EOHHS HST Office reflects our commitment to ensuring access to care and helping individuals live in their community of choice by improving access to community-based supports.

HST Mission: To promote access to health and human services, employment and community life by managing a statewide transportation brokerage network for eligible consumers and by providing technical assistance and outreach strategies in support of local mobility and transportation coordination efforts especially for transportation disadvantaged Massachusetts residents.

HST Vision: A system where all transportation disadvantaged residents of the Commonwealth have adequate transportation options allowing access to all facets of daily life.

HST Core Values:

- Support/ensure consumers' transportation access to the full range of human services they need to be healthy and self-sufficient
- Provide human service transportation in a safe, professional, on-time manner
- Maintain and enhance transportation service quality and cost effectiveness
- Treat all consumers with dignity and respect
- Use the least intensive level of transportation required, based on the consumer's needs
- Promote and facilitate public transit options
- Support the coordination of human service transportation on federal, state and community levels
- Develop transportation policies and programs that promote the safety, health and well being of the consumer

What We Do: HST Brokerage

The HST Office contracts with six regional brokers to manage the transportation services of six programs within five EOHHS agencies:

- **MassHealth (Medicaid)** non-emergency medical transportation system (PT-1)
- **MassHealth** funded **Day Habilitation** (DayHab) programs
- **Department of Developmental Services** (DDS) supported employment workshops and residential supports
- **Department of Public Health's** (DPH) Early Intervention programs for children and families
- **Massachusetts Rehabilitation Commission's** (MRC) vocational rehabilitation and community services
- **Massachusetts Commission for the Blind's** (MCB) social and rehabilitative programs and services

Through the HST Office's brokerage operation, human service transportation is generally provided to eligible consumers via two models: "demand-response" and "program-based" (a third model is under development that incorporates elements of both):

- **Demand-Response** ("dial-a-ride") transportation is provided on an as-needed basis for consumers to and from varying locations. This model is used primarily for MassHealth PT-1 non-emergency medical transportation services
- **Program-Based** transportation operates on a daily or regularly scheduled basis in which consumers are picked up from their homes and transported to the same program facility, on a grouped or shared-ride basis. This includes transportation for Department of Developmental Services, MassHealth-funded Day Habilitation programs, and the Department of Public Health's Early Intervention programs

EOHHS contracts with select Regional Transit Authorities (RTAs) that function as brokers to provide direct transportation services to EOHHS consumers in nine distinct HST Areas (HST1-9), which encompass all cities and towns within the Commonwealth. Each HST broker administers transportation services through subcontracting with qualified transportation providers in their HST Area(s).

Transportation brokers are required to adhere to high quality performance standards with specific outcome measures that have been established and are monitored by the HST Office. The primary responsibilities of brokers include:

- Arranging consumer trips and contracting for services with local providers
- Monitoring and ensuring service quality (on-site inspections, consumer surveys, etc.)
- Developing routing and other strategies to increase system efficiency and cost effectiveness
- Tracking and reporting system usage and costs and monitoring performance benchmarks

What We Do: Technical Assistance to State Agencies

The HST Office offers a range of technical assistance to state agencies – from assessing current transportation programs to developing innovative solutions to consumer transportation needs, we are able to use our experience to assist other agencies whose primary mission is not transportation. In FY12, the HST Office provided technical assistance to both MassHealth as an EOHHS agency participating in the HST brokerage, as well as to the Department of Early Education and Care, within EOHHS' sister Secretariat, the Department of Education and to the Massachusetts Developmental Disabilities Council.

MassHealth:

- Recommended to MassHealth that the agency could realize upwards of \$1M in savings if non-emergency fee-for-service (chair car and non-emergency ambulance) transportation was transitioned to the HST brokerage.
- Recommended to MassHealth that the agency update its PT-I processing system to include PT-I submission for MassHealth-funded Day Habilitation and eligible MassHealth Early Intervention consumers in order to bolster programmatic internal controls in terms for the transportation authorization process.
- Provided recommendations to MassHealth in devising a site visit form for non-brokered, non-emergency transportation providers for Affordable Care Act implementation.
- Participated in MassHealth Provider Forums by giving an overview of how transportation services are provided through the EOHHS HST brokerage.

Department of Early Education and Care:

- In September of 2011, the Department of Early Education and Care (EEC) reached out to EOHHS through its HST Office for its assistance to provide information regarding the operations of the HST brokerage system to see if any applicable aspects of the system could be replicated at EEC. Through this effort, HST staff assisted EEC with developing a survey to assess current transportation programming at the Department.

Massachusetts Developmental Disabilities Council:

- In June of 2012, HST staff worked with the Massachusetts Developmental Disabilities Council to offer possible transportation strategies for employment transportation options for staff members who provide weekly trainings to adults with developmental disabilities at a range of locations across the Commonwealth. The Council, residing within the Executive Office of Administration and Finance, works to effect changes in policy and practice so that people with developmental disabilities and their families are empowered and supported to be more personally independent and economically productive. Transportation options offered included a potential pilot program through the HST brokerage system.

What We Do: Mobility Management Support and Outreach

In FY12, the HST Office began implementation of a two-year \$600,000 federal grant to build and sustain a statewide mobility management information network. This grant enabled us to expand and increase our previous work in mobility management and community transportation coordination. Our goal is to assist agencies, community partners, consumers and other stakeholders in facilitating efficient, coordinated transportation resources that improve access to services and maximize travel independence for seniors, people with disabilities, low income individuals, veterans and other populations. Key activities in each of the three components of our work include the following:

Information Hub:

- Hired Mobility Information Specialist to research and develop resources to help community agencies around Massachusetts provide more efficient and effective community transportation services and to help their consumers find transportation options.
- Updated the HST website, including launching new webpages on veterans transportation services, resources on transportation for workforce development, and a calendar of upcoming events.
- Developed and disseminated resources on veterans transportation as part of our participation in the Massachusetts Veterans Transportation Coalition (MVTC), including an updated brochure on services offered by Regional Transit Authorities and a fact sheet on federal tax incentives for employers that hire veterans (see Appendix 2).

Outreach:

- Hired Mobility Outreach Coordinator to help increase the number of stakeholders involved in mobility management and transportation coordination efforts across the state and foster new efforts in underserved regions.
- Expanded the membership of the MVTC and attended many outreach events on behalf of the Coalition. MVTC members include state agencies, Regional Transit Authorities, Veterans' Service Officers, and other stakeholders committed to improving veterans' access to transportation services in Massachusetts.
- Built a partnership with Easter Seals Project ACTION, a national provider of technical assistance on issues related to accessible transportation. Worked together to raise awareness in Massachusetts of the value of travel instruction.
- Maintained and deepened our relationships with the cross-sector regional transportation coordination teams that originated in the Work Without Limits (Work Without Limits is a CMS-funded statewide network of engaged employers and innovative, collaborative partners that aims to increase employment among individuals with disabilities) Transportation Coordination Institute of 2009. Partnered with Work Without Limits to plan and run the bi-annual meetings of these teams in October 2011 and April 2012.

Technical Assistance and Policy:

- Responded to direct inquiries from consumers and community agency staff seeking help identifying transportation services in their areas.
- Subcontracted Work Without Limits to assist with policy research and technical assistance grant activities.
- Identified key topics to research in FY13 in order to help community partners across the state overcome barriers to providing more effective and efficient services to their consumers. Topics include vehicle share agreements, volunteer driver programs, travel instruction and insurance products.

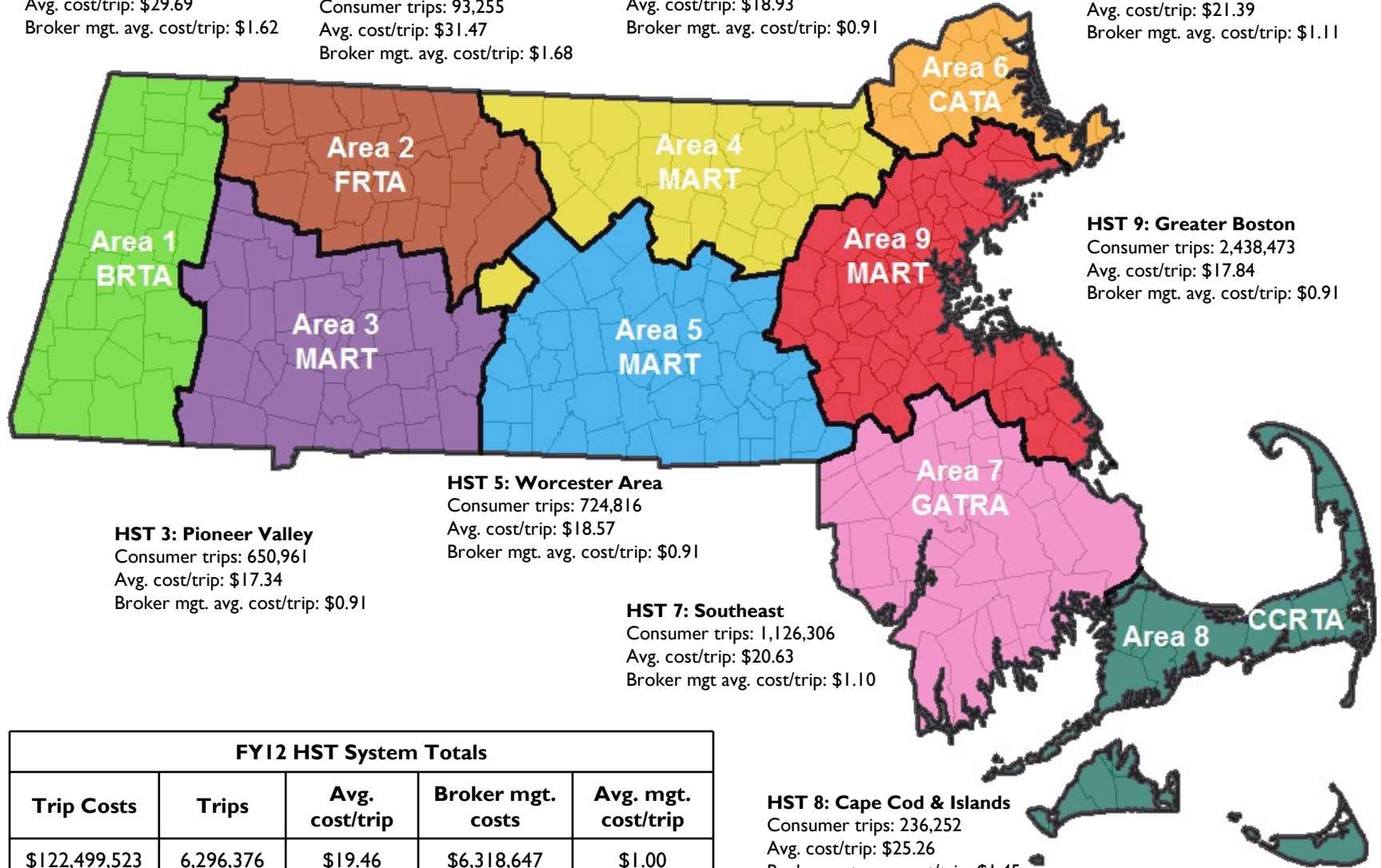
FY2012 HST Brokerage: FY12 Snapshot

HST 1: Berkshires
 Consumer trips: 164,792
 Avg. cost/trip: \$29.69
 Broker mgt. avg. cost/trip: \$1.62

HST 2: Franklin County
 Consumer trips: 93,255
 Avg. cost/trip: \$31.47
 Broker mgt. avg. cost/trip: \$1.68

HST 4: Fitchburg/Leominster Area
 Consumer trips: 492,488
 Avg. cost/trip: \$18.93
 Broker mgt. avg. cost/trip: \$0.91

HST 6: Northeast
 Consumer trips: 369,034
 Avg. cost/trip: \$21.39
 Broker mgt. avg. cost/trip: \$1.11



HST 3: Pioneer Valley
 Consumer trips: 650,961
 Avg. cost/trip: \$17.34
 Broker mgt. avg. cost/trip: \$0.91

HST 5: Worcester Area
 Consumer trips: 724,816
 Avg. cost/trip: \$18.57
 Broker mgt. avg. cost/trip: \$0.91

HST 7: Southeast
 Consumer trips: 1,126,306
 Avg. cost/trip: \$20.63
 Broker mgt. avg. cost/trip: \$1.10

HST 9: Greater Boston
 Consumer trips: 2,438,473
 Avg. cost/trip: \$17.84
 Broker mgt. avg. cost/trip: \$0.91

HST 8: Cape Cod & Islands
 Consumer trips: 236,252
 Avg. cost/trip: \$25.26
 Broker mgt. avg. cost/trip: \$1.45

FY12 HST System Totals				
Trip Costs	Trips	Avg. cost/trip	Broker mgt. costs	Avg. mgt. cost/trip
\$122,499,523	6,296,376	\$19.46	\$6,318,647	\$1.00

FY2012 HST Brokerage: System Data

Brokerage Finance and Operations

Brokerage fiscal and operations data is compiled from the monthly operations and revenue expenditure reports submitted by the six brokers to the HST Office and include the five agency programs operated under the HST brokerage system.

Financial Summary		Operational Summary	
Total Operating Costs	\$128,818,170	Consumer one-way trips	6,296,376
Consumer Trip Expenditures	\$122,499,523	Chair car trips	900,649
Broker Management Expenditures	\$6,318,647	% of total trips	14%
Average direct service cost per trip	\$19.46	Shared trips	4,213,422
Average broker management cost per trip	\$1.00	% of total trips	67%
Average total cost per trip	\$20.46	Consumers Served	36,278
		Local Transportation Providers	365
		Vehicles (including chair cars)	2,676
		Drivers	2,746
		Monitors	329

FY2012 HST Brokerage: System Data

Brokerage Performance Quality

The HST system consistently achieves a rate of 99% or better on contract performance standards (i.e., accident-free trips, on-time trips and complaint-free trips). For example, HST contract standards require that there be no more than three (3) vehicle accidents per 10,000 consumer trips, and in FY12 the performance outcome was less than one (1) accident per 25,000 trips. Additionally, the HST system achieved a greater than 99% performance rate of completed on-time trips and complaint-free trips (based on consumer complaints received and on-site inspections performed).

As part of ensuring service quality, the brokers are required to perform on-site service inspections at consumer destination facilities (clinics, doctor’s offices, program sites, etc.). In FY12, the brokers completed 4,395 inspections. This equates to an average of 18 on-site service inspections taking place each weekday across the Commonwealth.

The HST Office strives to continually improve the brokerage system’s performance, and receiving input from consumers is a crucial component to this effort. In FY12, the brokers conducted 18,854 consumer surveys (representing 52% of the HST system consumer population) and achieved an 88% positive response rate.

Consumer trips	6,289,372
Percentage of completed on-time trips	99.8%
Percentage of complaint-free trips	99.6%
<hr/>	
Broker on-site service inspections performed	4,395
Average number of inspections occurring every weekday	18
<hr/>	
Broker consumer surveys conducted (phone & written)	18,854
Percentage of surveys with a positive response	88%

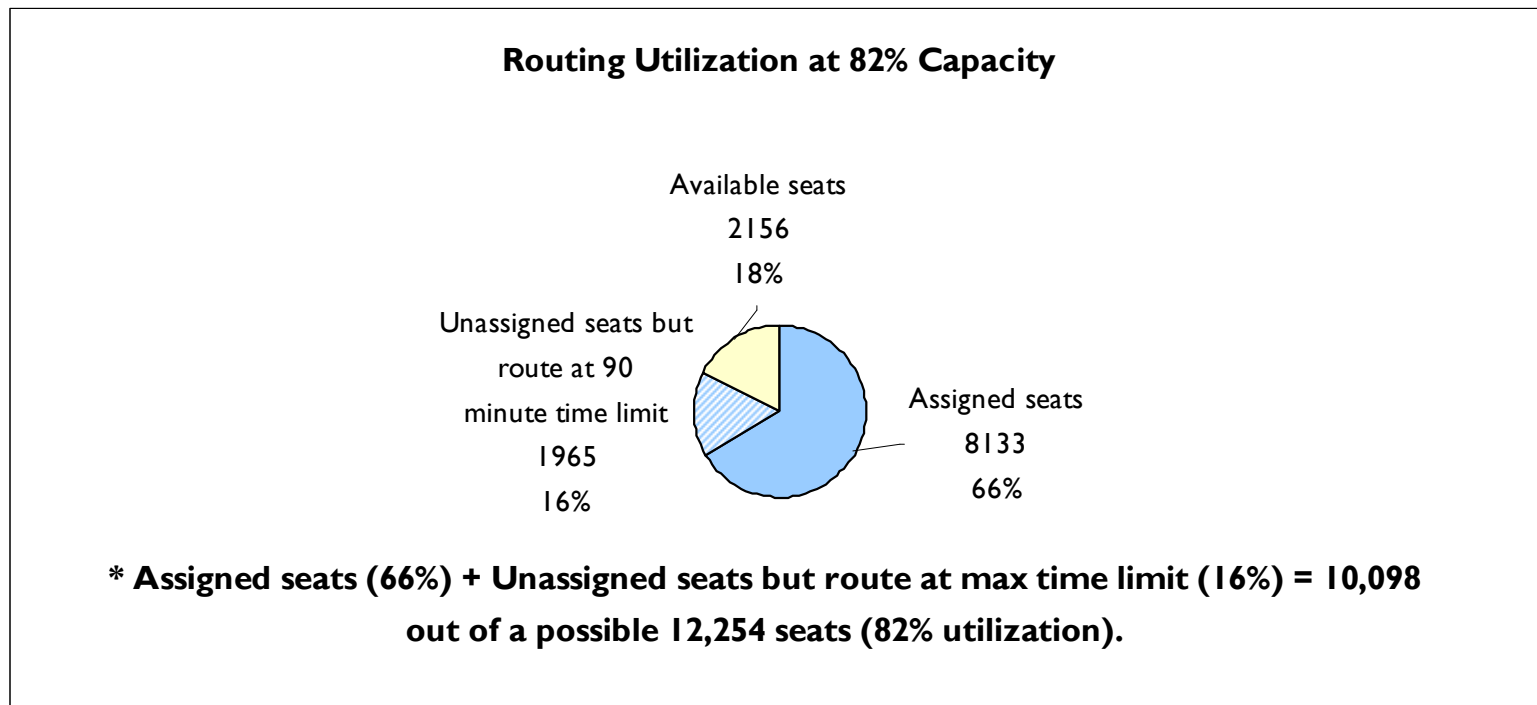
Although the HST brokerage system regularly achieves high quality performance, inevitably there are occasions where brokers have removed drivers, monitors and vendors from the system due to performance issues. In FY12:

Vendor fines assessed by brokers - Fines are reflected in reduced costs to the agencies	\$143,937
Drivers/monitors removed from service	86
Vendor contracts terminated	2

FY2012 HST Brokerage: System Data

Brokerage Operations Efficiency

The HST Office and its brokers are committed to managing transportation for the EOHHS consumers we serve as efficiently as possible. The goal of this analysis was to identify routing efficiency as it relates to vehicle capacity versus ridership. This analysis represents program-based routes serving MassHealth-funded Day Habilitation and DDS-funded Day Programs from four or our six brokers (CCRTA, BRTA, GATRA and MART) representing 92% of these statewide services. This data indicates that when factoring in both ridership and routing time restrictions, the system is operating at 82% of vehicle capacity.

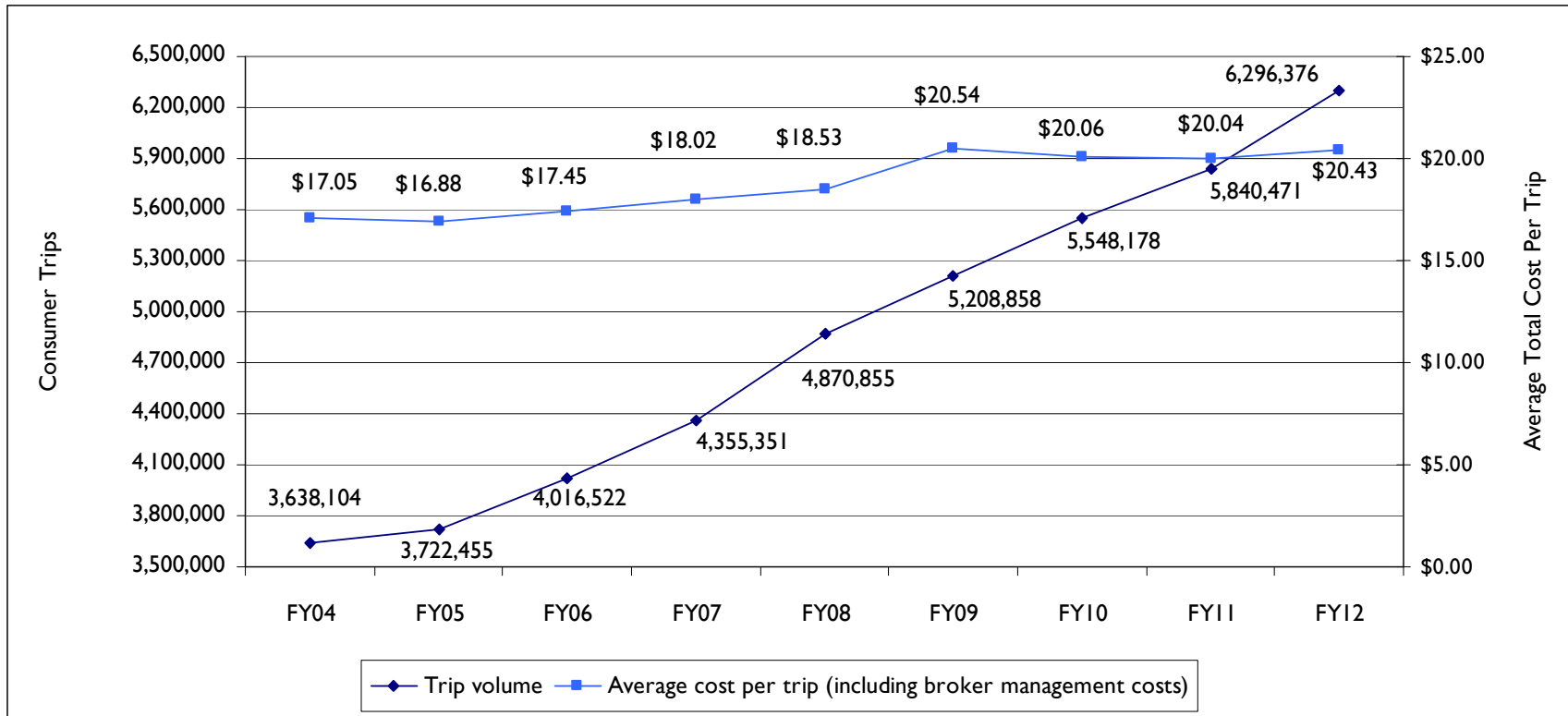


By ensuring that as many seats as possible are filled within the time constraints outlined in our specifications, we are not only able to maintain a stable cost structure, but we also reduce fuel consumption contributing to cleaner, healthier communities.

FY2012 HST Brokerage: Cost Containment

HST Brokerage System Growth & Cost Containment

The HST Office is committed to stabilizing costs in the brokerage system. In looking at the HST system since FY04, we note that the system has experienced an average annual growth in consumer trips of 8.1% per year, while average total costs per trip have been held to roughly 2% per year. Since FY04, the system has nearly doubled in size (trip volume) while average total cost per trip has only increased by approximately \$3/trip.



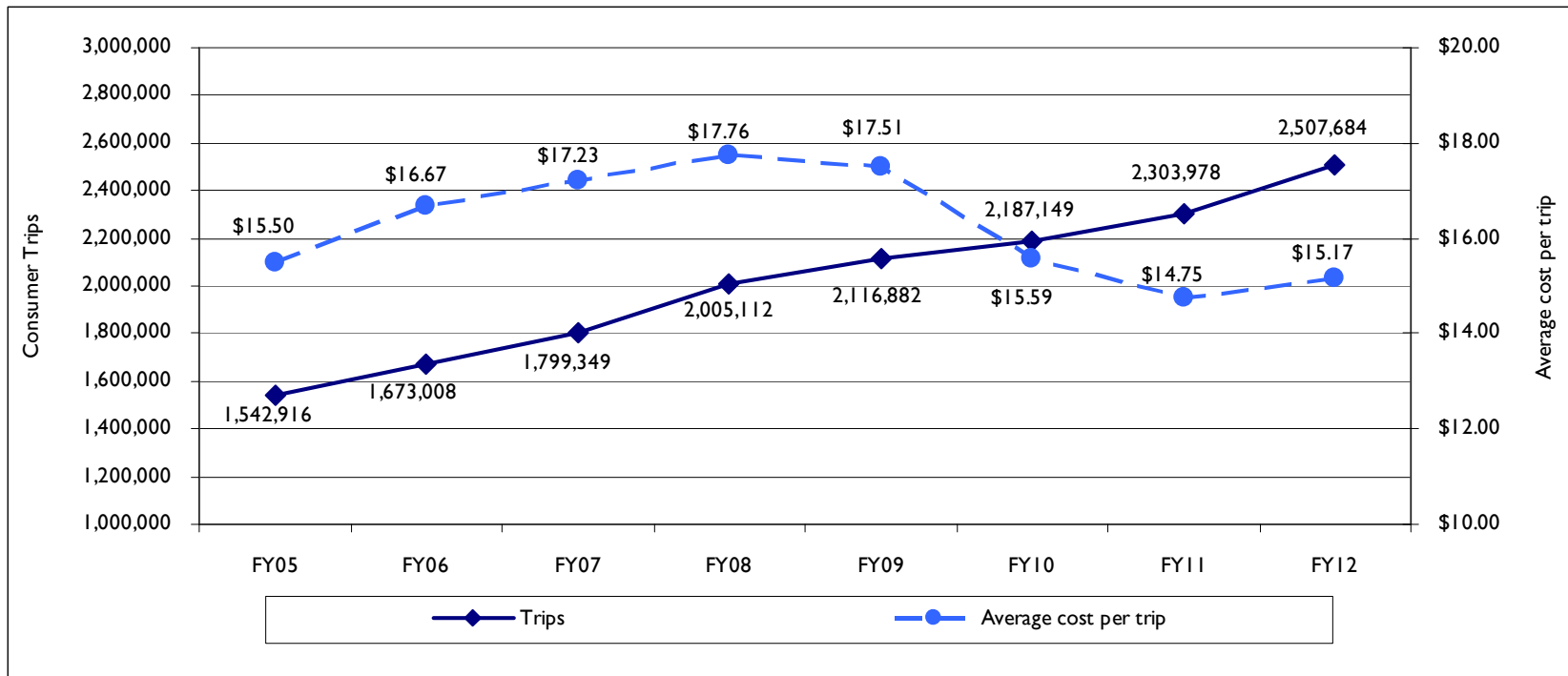
Average annual increase in consumer trips (FY04-FY12)	8.1%
Average annual increase in total cost per trip (FY04-FY12)	2.2%

FY2012 HST Brokerage: Cost Savings

MassHealth PT-I Rates

In FY12, the PT-I demand-response average cost per trip rose slightly (2.8%) from the FY11 rate. Nonetheless, the FY12 average cost per trip of \$15.17 is still over \$0.30 less than the FY05 average cost per trip of \$15.50. Between FY11 and FY12, PT-I trip volume increased by almost 9% statewide compared with an approximate 5% increase between FY10 and FY11. In a closer analysis, PT-I trip volume increased by an average of over 17% in three HST areas (HST 2, 7 & 8), which typically have less access to medical services and thus provide more costly, longer-distance trips. Nonetheless, the PT-I rates are still extremely competitive and contributing factors for this performance include the introduction of a shared cost savings incentive in FY09 and the fact that these rates are established through a near real-time, competitive, market-based system.

Change in average cost per trip from FY05 to FY12	-\$0.33
Percentage change in cost per trip from FY05 to FY12	-2.1%
Average annual change in cost per trip over 7-year period	-0.3%
Change in trips from FY05 to FY12	964,768
Percentage change in trips from FY05 to FY12	62.5%
Average annual change in trips over 7-year period	8.9%



FY2012 HST Brokerage: Agency Data – FY11 to FY12 Comparison

Below is a comparison of FY11 and FY12 data for the five agencies and six program models served through the HST brokerage system. The data presents changes from FY11 to FY12 in consumer trips (including number and percentage of chair-car trips and shared trips), expenditures and average cost per trip.

	DDS	MassHealth Day Habilitation	DPH	MassHealth PT-I	MRC	MCB (new HST agency in FY12)	TOTAL
FY11 Trips	827,552	2,603,073	102,418	2,303,978	3,450		5,840,471
FY12 Trips	855,064	2,812,890	113,734	2,507,684	6,911	93	6,296,376
% change in trips FY11-FY12	3.32%	8.06%	11.05%	8.84%	100.32%		7.81%
FY12 Chair car trips	22,314	729,381	4	146,849	2,099	2	900,649
% of total agency trips	2.61%	25.93%	0.00%	5.86%	30.37%	2.15%	15.42%
FY12 Shared trips	845,583	2,618,161	88,948	660,502	228	0	4,213,422
% of total agency trips	98.89%	93.08%	78.21%	26.34%	3.30%	0.00%	72.14%
FY11 Agency Expenditures	\$14,169,656	\$59,544,228	\$2,884,174	\$33,989,773	\$136,656		\$110,724,486
FY12 Agency Expenditures	\$14,821,672	\$66,072,577	\$3,272,356	\$38,048,781	\$280,790	\$3,347	\$122,499,523
% change in expenditures FY11-FY12	4.60%	10.96%	13.46%	11.94%	105.47%		10.63%
FY11 average direct service cost per trip	\$17.12	\$22.87	\$28.16	\$14.75	\$39.61		\$18.96
FY12 average direct service cost per trip	\$17.33	\$23.49	\$28.77	\$15.17	\$40.63	\$35.99	\$19.46
% change in average direct service cost per trip FY11-FY12	1.21%	2.69%	2.16%	2.83%	2.57%		2.62%

HST Accomplishments in FY12

- ✓ Cost Containment:
 - Maintained stable system-wide average trip costs (including broker management costs)
 - Continued to hold the line on MassHealth PT-I trip costs, as average cost per trip in FY12 (\$15.17) is less than it was seven years ago in FY05 (\$15.50)
- ✓ Engaged the Department of Mental Health (DMH) for inclusion in the HST system in FY13
- ✓ Recommended to MassHealth to update its PT-I processing system to include PT-I submission for MassHealth-funded Day Habilitation and eligible MassHealth Early Intervention consumers in order to bolster programmatic internal controls for the transportation authorization process
- ✓ Recommended to MassHealth to transition Non-emergency Fee-for-Service Transportation to the HST system, and worked collaboratively with the agency to develop work plans for the transition
- ✓ Supported the work of Executive Order 530: Commission for the Reform of Community, Social Service and Paratransit Transportation Services
- ✓ Worked collaboratively with other secretariats and their agencies such as the Department of Early Education and Care (EEC) in transportation policy development and technical assistance
- ✓ Developed, facilitated and/or organized training opportunities for broker staff including:
 - RMV broker training to ensure that contracted transportation providers obtain the most complete information on potential or existing drivers such as driver history and driver verification systems
 - Dialysis Center specialists provided training regarding the unique transportation needs of dialysis patients
 - Massachusetts Office on Disability provided training regarding requirements for transporting service animals
 - MassHealth's Customer Service Team (CST) provided training for brokers regarding member eligibility verification
- ✓ Implemented the first two quarters of a two-year federally-funded initiative to build and sustain a robust mobility management information network, including:
 - Hired a Mobility Information Specialist and Outreach Coordinator (contracted employees) to develop and carry out grant responsibilities
 - Expanded resource materials for the HST website
 - Conducted outreach to build additional alliances and networking links among local stakeholders
 - Researched policy briefs (through our grant partner) to address local barriers to coordination
- ✓ Continued partnerships with the Massachusetts Veteran's Transportation Coalition and the UMASS Work Without Limits initiative

HST Broker Accomplishments in FY12

BRTA

- ✓ Implemented RouteMatch software and attended a RouteMatch conference
- ✓ Attended PASS Training: Train the Trainer, Passenger Service and Safety, and Wheelchair Securement
- ✓ Signed on a new vendor for North County
- ✓ Implemented a new phone system
- ✓ Hired a new Compliance Coordinator

CCRTA

- ✓ Launched Cape Cod Accessible Transportation initiative to provide wheelchair-accessible service that is comparable to taxi service on Cape Cod. The initiative is a partnership between CCRTA and Habilitation Assistance Corporation (Access Express) and is funded by a New Freedom grant to purchase seven wheelchair-accessible minivans. This Accessible Transportation initiative is the first on Cape Cod, and is providing accessible transportation services to the many customers who require door-to-door wheelchair and passenger assisted transportation services

GATRA

- ✓ Began a software upgrade to enable integrated scheduling of all program transportation and accommodate the continuing growth in HST services
- ✓ Began development of Ride Match, an online, searchable regional directory of transportation options (private, public, and non-profit) for seniors, people with disabilities or anyone needing to travel in Southeastern Massachusetts and beyond

MART

- ✓ Increased the capacity of the Brokerage Department by hiring an Assistant Administrator and two additional Inspectors
- ✓ Updated Inspection Department vehicles with portable GPS units
- ✓ Increased communications with large facilities to streamline the scheduling of recurring appointments for approximately 1,200 EOHHS consumers
- ✓ Bolstered its training program for inspectors and brokerage staff
- ✓ Purchased new equipment and phone and network upgrades, and invested in automation and IVR upgrades and enhancements

HST Goals and Objectives for FY13

- ✓ Successfully plan for transitioning the HST Brokerage System from six brokers to a single statewide broker through a procurement process
- ✓ Begin managing the Department of Mental Health's (DMH) clubhouse transportation services, bringing a total of six agencies and seven program models into the HST system
- ✓ Continue to work collaboratively with MassHealth to transition Non-emergency Fee-for-Service Transportation to the HST system in FY14
- ✓ Develop, facilitate and/or organize training opportunities for broker staff including:
 - MassHealth's Provider Compliance Unit (PCU) – Office of Inspector General (OIG)/ Exclusions Database and Tracking, and training for brokers regarding vendor audit procedures
 - Neutral writing - Efficiency in reporting
- ✓ Support the work of Executive Order 530: Commission for the Reform of Community, Social Service and Paratransit Transportation Services via the Statewide Coordinating Council on Community Transportation (SCCCT)
- ✓ Revitalize and reorient Human Service Transportation Coordination Councils to support local mobility management and coordination efforts and facilitate regional SCCCT efforts
- ✓ Continue implementation of the two-year New Freedom/Job Access Reverse Commute (JARC) grant to build and sustain a robust mobility management information network, including:
 - Launch communications tools and outreach materials, such as a newsletter and social media accounts, and develop an outreach database to track contacts
 - Expand outreach efforts to local and regional organizations across Massachusetts
 - Continue support of existing transportation coordination teams and develop relationships with key stakeholders in new regions of the Commonwealth
 - Foster a community of practice among travel instruction program leaders in Massachusetts
 - Publish technical briefs on vehicle share models, volunteer driver programs and insurance
 - Regularly update the HST website (www.mass.gov/hst) with information for state agency staff, local social service and transportation providers, mobility managers and other stakeholders
- ✓ Continue partnerships with the Massachusetts Veterans Transportation Coalition and the UMASS Work Without Limits initiative
- ✓ Engage EOHHS agencies on the mobility management resources available through the HST Office for those consumers who do not have dedicated state funding for brokered transportation services

Appendix I - Trends by Agency

DDS – Consumer one-way trips increased by 3.3% in FY12, and there was a corresponding increase in expenditures of 4.6%. The average cost per trip increased by 1.2% between FY11 and FY12, which is less than the 2.4% increase seen between FY10 and FY11.

Dept. of Developmental Services (DDS)	FY10	FY11	FY12
Total expenditures	\$14,297,851	\$14,169,656	\$14,821,672
Consumer one-way trips	854,553	827,552	855,064
Average cost per consumer trip	\$16.73	\$17.12	\$17.33
Consumers served	2,408	2,326	2,394
Avg. annual cost per consumer served	\$5,938	\$6,092	\$6,191

DPH – Despite an 11% increase in DPH consumer trips in FY12, average cost per trip only increased 2.2%. The 11% increase in consumer trips is a significantly larger jump than the program experienced over the preceding two fiscal years (FY10, FY11).

Dept. of Public Health (DPH)	FY10	FY11	FY12
Total expenditures	\$2,816,126	\$2,884,174	\$3,272,356
Consumer one-way trips	100,127	102,418	113,734
Average cost per consumer trip	\$28.13	\$28.16	\$28.77
Consumers served	3,224	3,202	3,485

Appendix I - Trends by Agency

DayHab – As in FY10 and FY11, this program saw increases in trips, expenditures and average cost per trip in FY12. Trips increased by 8% and expenditures grew by 11%, while average cost per trip only increased by 2.7%. A high percentage (1 in 4) of Day Habilitation trips are chair car trips, which raises the cost per trip significantly than MassHealth PT-I services.

PT-I – While this program saw modest growth in FY11 (5.3%), consumer trips increased significantly by 8.8% in FY12. Expenditures increased by 11.9%, and average cost per trip also increased by 2.8%. Nonetheless, the FY12 average cost per trip of \$15.17 is still over \$0.30 less than the FY05 average cost per trip of \$15.50. In a closer analysis, PT-I trip volume increased by an average of over 17% in three HST areas (HST 2, 7 & 8), which typically have less access to medical services and thus provide more costly, longer-distance trips, thus contributing to the increase in average cost per trip seen in FY12.

MassHealth (Combined DayHab and PT-I) - MassHealth constitutes 85% of the HST system's total direct service expenditures. Combined expenditures for MassHealth continued to grow in FY12, and broke the \$100 million mark. Despite a 19% increase in total expenditures between FY10 and FY12 and a 16% increase in trips between the same time period, average cost per consumer trip has remained stable and has only increased by 3%.

MassHealth-funded Day Habilitation	FY10	FY11	FY12
Total expenditures	\$53,730,500	\$59,544,228	\$66,072,577
Consumer one-way trips	2,406,349	2,603,073	2,812,890
Chair car trips	570,180	634,080	729,381
Average cost per consumer trip	\$22.33	\$22.87	\$23.49
Consumers served	6,117	6,927	7,474
Avg. annual cost per consumer served	\$8,784	\$8,596	\$8,840

MassHealth PT-I	FY10	FY11	FY12
Total expenditures	\$34,107,570	\$33,989,773	\$38,048,781
Consumer one-way trips	2,187,149	2,303,978	2,507,684
Average cost per consumer trip	\$15.59	\$14.75	\$15.17
Consumers served	24,638	22,317	22,781

MassHealth Combined Summary	FY10	FY11	FY12
Total expenditures	\$87,838,070	\$93,534,000	\$104,121,358
Consumer one-way trips	4,593,498	4,907,051	5,320,574
Average cost per consumer trip	\$18.96	\$18.81	\$19.57
Consumers served	30,755	29,244	30,255

Appendix I - Trends by Agency

MRC – MRC’s number of one-way trips increased dramatically (over 100%) in FY12 as the agency funneled more of its transportation services into the HST system. Nonetheless, MRC saw only a slight increase (2.6%) in cost per trip.

Massachusetts Rehabilitation Commission (MRC) - New HST Agency effective 1/1/11	FY10	FY11	FY12
Total expenditures	\$49,383	\$136,656	\$280,790
Consumer one-way trips	440	3,450	6,911
Average cost per consumer trip	\$112.23	\$39.61	\$40.63
Consumers served	60	131	122

MCB – MCB officially joined the HST brokerage in FY12. Although less than 100 trips were provided and only 13 consumers were served during this fiscal year, we expect to see MCB participation increase over time.

Massachusetts Commission for the Blind (MCB) - New HST Agency effective 7/1/11	FY12
Total expenditures	\$3,347
Consumer one-way trips	93
Average cost per consumer trip	\$35.99
Consumers served	13

Appendix 2 – Sample Resources Developed and Disseminated by the HST Office

In partnership with the Massachusetts Veterans Transportation Coalition, the HST Office revised and updated a brochure on veterans services offered by Regional Transit Authorities (below left) and developed and disseminated information on federal tax benefits available to employers that hire veterans (below right).



PUBLIC TRANSPORTATION AGENCIES IN MASSACHUSETTS



— MBTA commuter rail

- MBTA
- BAT
- BRTA
- CATA
- CCRTA
- FRTA
- GATRA
- LRTA
- MART
- MVRTA
- MVRTA
- NRTA
- PVRTA
- SRTA
- VTA
- WRTA

Your public transportation agency can help you get where you need to go, with safe, reliable, efficient, and affordable transportation services. Although the costs may vary among transit agencies, it is typically inexpensive to use public transportation. *Most agencies offer multiple-ride pass discounts and some offer special discounts or services for veterans.*

Contact the public transportation agency in your community to learn about available transit options.

WESTERN MASSACHUSETTS

- Berkshire Regional Transit Authority (BRTA)**
www.berkshirerta.com
Fixed Route & Paratransit: 1-800-292-BRTA
TTY: 413-499-2782
- Franklin Regional Transit Authority (FRTA)**
www.frta.org
Fixed Route, Paratransit, & TTY: 413-774-2262
- Pioneer Valley Transit Authority (PVRTA)**
www.pvta.com
Fixed Route: 413-781-7882
Paratransit: 1-877-779-7882, x 214

CENTRAL MASSACHUSETTS

- Montachusett Regional Transit Authority (MART)**
www.mrta.us
All Services & TTY: 1-800-922-5636
- Worcester Regional Transit Authority (WRTA)**
www.therta.com
Fixed Route & Paratransit: 508-791-9782
TTY: 1-800-439-0183

NORTHERN MASSACHUSETTS

- Cape Ann Transportation Authority (CATA)**
www.cantran.com
General: 978-283-7916
- Lowell Regional Transit Authority (LRTA)**
www.lrta.com
Fixed Route: 978-452-6161
Paratransit: 978-459-0152
TTY: 1-800-439-2370
- Merrimack Valley Regional Transit Authority (MVRTA)**
www.mvrta.com
Fixed Route (option 2) & Paratransit (option 3): 978-469-6878

BOSTON AREA

- Massachusetts Bay Transportation Authority (MBTA)**
www.mbta.com
Fixed Route: 617-222-3200
Paratransit: 617-222-5123
TTY for Fixed Route: 617-222-5146
TTY for Paratransit: 617-222-5415
- Metro West Regional Transit Authority (MVRTA)**
www.mwrta.com
General: 1-888-996-9782
TTY: 508-935-2242

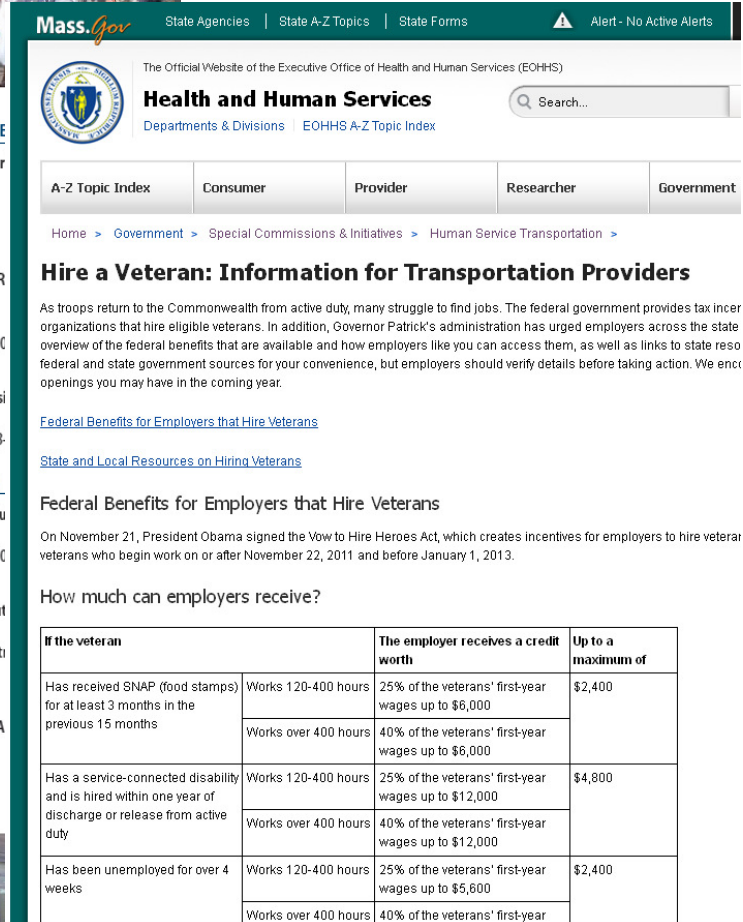
SOUTHEASTERN MASSACHUSETTS

- Brockton Area Transit Authority**
www.ridebat.com
Fixed Route: 508-588-1000
Paratransit: 508-588-2240
TTY: 508-580-0873
- Greater Attleboro-Taunton R Authority (GATRA)**
www.gatra.org
Fixed Route & Paratransit: 1-800-824-7439
- Southeastern Regional Transit**
www.srtaabus.com
Fixed Route & Paratransit: 508-

CAPE COD AND THE ISLANDS

- Cape Cod Regional Transit Au**
www.capecodrta.org
Fixed Route & Paratransit: 1-800-693-9440
TTY: 1-800-439-0183
- Martha's Vineyard Transit Aut**
www.vineyardtransit.com
Fixed Route (option 1) & Paratransit: 508-693-4633
- Nantucket Regional Transit A**
www.shuttlenantucket.com
Fixed Route: 508-325-9571
TTY: 508-325-7516





Mass.gov State Agencies | State A-Z Topics | State Forms Alert - No Active Alerts

The Official Website of the Executive Office of Health and Human Services (EOHHS)

Health and Human Services

Departments & Divisions EOHHS A-Z Topic Index

A-Z Topic Index Consumer Provider Researcher Government

Home > Government > Special Commissions & Initiatives > Human Service Transportation >

Hire a Veteran: Information for Transportation Providers

As troops return to the Commonwealth from active duty, many struggle to find jobs. The federal government provides tax incentives for organizations that hire eligible veterans. In addition, Governor Patrick's administration has urged employers across the state to offer the federal benefits that are available and how employers like you can access them, as well as links to state, federal, and state government sources for your convenience, but employers should verify details before taking action. We encourage you to explore the opportunities you may have in the coming year.

[Federal Benefits for Employers that Hire Veterans](#)

[State and Local Resources on Hiring Veterans](#)

Federal Benefits for Employers that Hire Veterans

On November 21, President Obama signed the Vow to Hire Heroes Act, which creates incentives for employers to hire veteran veterans who begin work on or after November 22, 2011 and before January 1, 2013.

How much can employers receive?

If the veteran	The employer receives a credit worth	Up to a maximum of
Has received SNAP (food stamps) for at least 3 months in the previous 15 months	Works 120-400 hours	25% of the veterans' first-year wages up to \$6,000
	Works over 400 hours	40% of the veterans' first-year wages up to \$6,000
Has a service-connected disability and is hired within one year of discharge or release from active duty	Works 120-400 hours	25% of the veterans' first-year wages up to \$12,000
	Works over 400 hours	40% of the veterans' first-year wages up to \$12,000
Has been unemployed for over 4 weeks	Works 120-400 hours	25% of the veterans' first-year wages up to \$5,600
	Works over 400 hours	40% of the veterans' first-year wages up to \$5,600

