

**Locally Operated Transit Systems (LOTS)
Funding Related to
Non-Emergency Medical Transportation (NEMT)
(2021 JCR, pg. 79)**

**A Report to the Maryland General Assembly
Senate Budget and Taxation Committee
And
House Appropriations Committee**

December 2021

Maryland Transit Administration
Maryland Department of Transportation

Introduction

The Maryland Department of Transportation Maryland Transit Administration (MDOT MTA) offers this report in response to budget bill language contained in the 2021 Joint Chairmen’s Report (JCR). The language states:

Provided that \$100,000 of this appropriation made for the purpose of general administration may not be expended until the Maryland Transit Administration submits a report to the budget committees on the services provided by Locally Operated Transit Systems (LOTS), including Non-Emergency Medical Transportation (NEMT), to determine if these services are adequate to meet the local transportation requirements of the areas they serve. The study shall include the sources of funding and the amount of the funding provided by each source, by fiscal year, for fiscal 2015 through 2020. The study shall include a detailed examination of the NEMT services provided by Maryland LOTS during these fiscal years to determine whether adequate funding is available to meet the current and projected future service demands. The report shall be submitted by November 15, 2021, and the budget committees shall have 45 days from the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall be canceled if the report is not submitted to the budget committees.

Background of LOTS

Local public transportation systems (LOTS) are operated throughout Maryland in all 23 counties, as well as in Baltimore City, the City of Annapolis, and Ocean City (Table 1-1). Additionally, LOTS include organizations that receive Statewide Special Transportation Assistance Program (SSTAP) funding for transportation services for seniors and people with disabilities. In most counties, but not all, the same department or organization that operates public transportation services is also the SSTAP service provider. The exceptions are Anne Arundel County, Somerset County, Worcester County, and the City of Baltimore.

Table 1-1: LOTS Organizations by County

Jurisdiction	Locally Operated Transit System (LOTS) Organizations Serving Each County
Anne Arundel County	Anne Arundel County City of Annapolis
Allegany County	Allegany County
Baltimore City	City of Baltimore
Baltimore County	Baltimore County
Calvert County	Calvert County
Caroline County	Delmarva Community Transit
Carroll County	Carroll County
Cecil County	Cecil County
Charles County	Charles County
Dorchester County	Delmarva Community Transit
Frederick County	Frederick County
Garrett County	Garrett Community Action Agency, Inc.

Harford County	Harford County
Howard County	Howard County (operated by RTA of Central Maryland)
Kent County	Delmarva Community Services, Inc.
Montgomery County	Montgomery County
Prince George's County	Prince George's County
Queen Anne's County	Queen Anne's County
Somerset County	Somerset County (SSTAP only) Tri-County Council for the Lower Eastern Shore of Maryland – Shore Transit
St. Mary's County	St. Mary's County
Talbot County	Delmarva Community Transit
Washington County	Washington County
Wicomico County	Tri-County Council for the Lower Eastern Shore of Maryland – Shore Transit
Worcester County	Tri-County Council for the Lower Eastern Shore of Maryland – Shore Transit Town of Ocean City Worcester County Commission on Aging (SSTAP only)

LOTS Organizations and Services

LOTS are usually managed by local governments, operated by larger city or county transportation programs that address multiple modes of transportation, such as part of a Department of Transportation or a Department of Public Works, or maintained by a Department of Aging or a transportation office in the County Executive's Department of Administration. Additionally, some are based in a county planning office that contracts with a private operator or within a nonprofit organization that provides a variety of community services, or within a regional council of governments.

LOTS also operate a variety of different service modes, including:

- **Fixed route service** – service that operates along a prescribed route according to a fixed schedule. Typically, fixed route service is characterized by features such as printed schedules or timetables, designated bus stops where passengers board and disembark, and the use of larger transit vehicles.
- **Demand-response service** – service on which individual passengers can request door-to-door or curb-to-curb transportation from a specific location to another specific location at a certain time. These services may require advanced reservations.
- **Route deviation service** – service that operates along established routes and schedules but permits user-initiated deviations. Such routes typically have designated stops. Between these stops, vehicles deviate (depart) from an established route to pick up or drop off riders within a defined off-route service area, sometimes called flexible-route service.
- **ADA complementary paratransit service** – origin-to-destination service required by the Americans with Disabilities Act (ADA) for individuals with disabilities who are unable to use fixed route transportation systems. This service must be comparable to the fixed route system and meet the U.S. DOT requirements specified in 49 CFR Part 37.

- **User-side taxi subsidy** – subsidy in the form of a sum or a discount paid or applied directly to riders of a transportation system. For example, riders purchase taxi vouchers at a reduced cost from an entity which has purchased them at full value from a taxi system and redeem the vouchers for full face value with the taxi system.

Riders may travel to and from healthcare services using any of these modes, and thus the LOTS are serving NEMT needs with each of these modes. Because the LOTS operate public transit services, for any trip purpose, the extent to which LOTS services are addressing NEMT needs is not comprehensively tracked. Four LOTS provide Medicaid-funded NEMT services: Delmarva Community Transit, Frederick County, Garrett County Community Action, and Montgomery County. Others may provide NEMT that is not Medicaid-funded through contracts with human service agencies, but such contracts may represent a small portion of the LOTS services and NEMT trips. Except for services which require pre-scheduling a ride and indicating trip purpose, LOTS are not likely to have records on number of NEMT trips provided.

LOTS Planning and Budget Development

The LOTS are responsible for their own operational planning and grants submission, as well as ensuring compliance with federal and state requirements. As required by the MDOT MTA as part of its role administering FTA funding, the MDOT MTA provides program guidance to the LOTS regarding federal and state requirements and policies. As part of its management of the statewide program, the MDOT MTA requires the LOTS to conduct periodic five-year transit development plans (TDPs) with funding and consultant assistance through the MDOT MTA. Input for service changes include the TDP, other local plans, input from advisory groups and additional public input, all of which is considered in the development of annual budget plans.

The LOTS grant levels are set by the MDOT MTA, and the LOTS budgets are developed with anticipated MDOT MTA grants, which may be augmented with additional local funding as determined by each county's budget. Any additional funds used to support the LOTS are identified locally and allocated from local general revenue funds. In all cases, these decisions are made by the local elected legislative body. Some but not all LOTS also have transit advisory groups.

Linkage Between the MDOT MTA and the LOTS

The MDOT MTA's Office of Local Transit Support (OLTS) administers federal and State grants to the LOTS. This includes management of the Annual Transportation Plan (ATP) grant application process, monitoring quarterly reporting and performance assessment, compliance monitoring (both federal and state programs), assistance in vehicle procurement (by state contract), funding and participation in local TDPs and other technical assistance. However, the LOTS are independent in terms of determining services offered, fares, technology, branding, etc. The LOTS have generally provided significant local funding beyond the amounts required to match the MDOT MTA grants to address their local-developed needs. The MDOT MTA makes no commitments that inclusion of a service, program, or capital need in a TDP will be supported by state or federal funding, though TDPs are considered by the MDOT MTA.

The MDOT MTA is Maryland's designated recipient for Federal Transit Administration (FTA) funding statewide, as well as for the Baltimore Urbanized Area. As the designated recipient, the MDOT MTA administers federal formula funds for the small, urbanized areas, rural areas, and specialized programs statewide. Additionally, the MDOT MTA administers several state-only funding programs for the LOTS. The MDOT MTA funding programs that support LOTS operations include:

Large Urban Program – Funding under this state program is discretionary. Currently, the following jurisdictions are eligible for funding under the Large Urban Program: Anne Arundel County, Cecil County, City of Annapolis, Howard County, Montgomery County, Prince George's County and Queen Anne's County. Large urban-funded services are open to the public.

- **Section 5307 Urbanized Area Formula Program** – The MDOT MTA awards FTA Section 5307 program grants to LOTS operating in Maryland's small urbanized areas as defined by the FTA (population 50,000-200,000). Currently, the following jurisdictions are eligible for funding under this program: Allegany County (Cumberland), Calvert County, Carroll County (Westminster), Charles County (St. Charles), Frederick County (City of Frederick), St. Mary's County, Washington County (Hagerstown), Tri-County Council of Lower Eastern Shore, and Queen Anne's County. Section 5307-funded services are open to the public. At the federal level, funds are apportioned to each urbanized area on a formula basis.
- **Section 5311 Formula Grants for Rural Areas Program** – The MDOT MTA awards FTA Section 5311 program grants to LOTS operating in Maryland's rural (nonurbanized) areas. Currently, each county in Maryland, as well as Ocean City, are eligible for funding under the Section 5311 program for the nonurbanized portions of the county, as well as Ocean City. At the federal level, funds are apportioned to each State on a formula basis.

Americans With Disabilities Act (ADA) Funding Program – Eligibility for this discretionary state funding program is limited to the LOTS that operate ADA complementary paratransit (one applicant per county). Maryland's ADA program funds ADA complementary paratransit, which transports those with disabilities who are unable to ride fixed route services due to their disability.

Statewide Special Transportation Assistance Program (SSTAP) – This state funding program is apportioned annually to each county in Maryland and the City of Baltimore. SSTAP funds specialized transportation services for seniors and those with disabilities.

To apply for all potential funds, the LOTS submit one comprehensive Annual Transportation Plan (ATP) to the MDOT MTA. The ATP is also used to apply for capital and planning grants that support facilities and vehicles for the LOTS, planning and development of future services, and other activities that are essential to the LOTS operations.

NEMT Services Provided in Maryland

The term NEMT has been associated specifically with the Medicaid program, but it can be viewed from a much broader perspective to include transportation for all medical needs. For this report, the term is used in a broader sense to refer to trips to medical appointments, regardless of Medicaid trip eligibility. When referring to specific Medicaid requirements for NEMT, the term Medicaid NEMT is used.

Medicaid NEMT

The federal Medicaid program provides medical assistance for qualified low-income individuals, families and children, pregnant women, the elderly, and people with disabilities. Federal guidelines require that states assure the transportation of Medicaid recipients to health care services, and a portion of each state's Medicaid funds are used to fund NEMT for Medicaid recipients. Under federal regulations, transportation services must be provided to qualified and eligible participants who have no other means of transportation available. These federal requirements are incorporated into COMAR (10.09.19) - Transportation Grants.

In Maryland, the Medicaid transportation program is funded on the State level by the Maryland Department of Health's (MDH) Division of Community Support Services. The MDH has a Medicaid Transportation Grant Program that funds NEMT for eligible trips on the county level. These funds awarded to the local jurisdictions are used for the "safety net" funding of transportation to eligible participants who have no other available source of transportation. Since Medicaid is the payer of last resort, all other sources of transportation must be accessed and exhausted prior to the expenditure of the grant funds for transportation services. The grants have a base funding level of nearly \$44M in FY2022. Counties can request additional funds if needed based on demand for NEMT; the program is funded by a combination of federal Medical Assistance and state matching funds. Table 2-1 shows Maryland Medicaid NEMT funding for each county and the City of Baltimore in FY2022.

Except for Montgomery County¹, Maryland Medicaid NEMT services are administered through the County Health Departments, who certify patient eligibility and typically contract with one or more private transportation providers. In some counties, the health department contracts with the LOTS to provide a portion of the Medicaid NEMT services.

¹ In Montgomery County, the Medicaid Transportation Grant funds are administered by the County Department of Transportation.

Table 2-1: Medicaid NEMT Funding by Jurisdiction for FY2022

Jurisdiction	NEMT FY2022 Base Award
Allegany County	\$1,404,866
Anne Arundel County	\$2,942,870
Baltimore City	\$7,227,878
Baltimore County	\$4,801,500
Calvert County	\$896,185
Caroline County	\$456,088
Carroll County	\$1,344,541
Cecil County	\$1,069,704
Charles County	\$933,295
Dorchester County	\$1,070,606
Frederick County	\$844,497
Garrett County	\$790,417
Harford County	\$2,929,922
Howard County	\$1,754,664
Kent County	\$617,210
Montgomery County	\$3,879,386
Prince George's County	\$3,510,543
Queen Anne's County	\$786,273
St. Mary's County	\$769,151
Somerset County	\$835,732
Talbot County	\$433,034
Washington County	\$1,353,932
Wicomico County	\$2,109,444
Worcester County	\$1,010,712
Statewide Total	\$43,772,450

Source: Maryland Department of Health, Division of Community Support Services

LOTS as NEMT Providers

The services provided by the LOTS represent only a portion of the NEMT services provided in Maryland. There generally are no restrictions or priorities on trip purpose (so they cannot prioritize medical trips). Except for ADA-eligible trips, public transit services are not required at a specific service level and can be constrained by the capacity of the system – trips can be denied if services meet their limits.

LOTS may operate NEMT services under contract to other organizations, including Medicaid NEMT contracted from the local county health department. At least four LOTS operate some Medicaid NEMT under contract. It is important to note that the LOTS are not responsible for meeting Medicaid NEMT needs, and in many counties, play a very small role in providing Medicaid NEMT. Private medical transportation providers, human service agencies, residential facilities for seniors and those with disabilities, and other private organizations may also provide NEMT for program participants above and beyond what is provided by the LOTS. However, since Medicaid NEMT is a safety-net program, the County Medicaid providers rely partially on local public transportation to provide needed trips for Medicaid clients to Medicaid-approved medical appointments.

Examining Medicaid NEMT and LOTS

NEMT regulations require County Health Departments to screen for the availability of public transportation for specific Medicaid NEMT trips and refer clients to those services. The range of services provided by the LOTS vary greatly depending on the area served. Many of the LOTS have at least some fixed routes (and complementary ADA paratransit), but large portions of the State have only general public demand response services and/or demand response services limited to seniors and people with disabilities (e.g., SSTAP-funded service).

When referrals are made to the fixed route services, no additional transit costs are incurred. However, referrals made to the paratransit services provided by the LOTS increase costs and create significant challenges for the LOTS and the County Health Departments:

1. LOTS systems are unable to meet an unlimited demand for Medicaid NEMT trips and as noted above, most of the LOTS paratransit services are capacity constrained. This excludes ADA paratransit provided in those limited areas with fixed routes. Under the ADA requirements, all eligible trips requested by all ADA paratransit-eligible riders must be provided without regard to trip purpose. In cases where an individual is eligible for both ADA paratransit and Medicaid NEMT, for whom the ride to a medical appointment is within the ADA paratransit geographic boundaries and days and hours of service, the LOTS is obligated to provide the trip as an ADA paratransit trip.
2. The LOTS paratransit service may not meet the Medicaid NEMT requirements to serve all eligible trips at no charge to the rider. The LOTS do not prioritize medical trips; Medicaid clients are served on a “first come, first serve” basis and trips can be denied if services are at capacity. Furthermore, the LOTS paratransit generally charge a fare (up to twice the fixed route fare for the same trip is allowed under the U.S. DOT ADA regulations).
3. LOTS services rely significantly more on State and local dollars than Medicaid NEMT.

LOTS Funding and Programs that Support NEMT

This section provides a description and information on the LOTS funding programs, particularly those that support NEMT services provided by the LOTS. Data on LOTS grant awards and expenditures were obtained from OLTS, as were service statistics reported by the LOTS to OLTS. All LOTS that receive Public Transportation Program (PTP) funds were surveyed in July 2021 seeking information on sources of funding for NEMT provided by the LOTS, and unmet needs for NEMT. Survey responses were received from 20 (out of 23) LOTS organizations listed in Table 3-1.

Table 3-1: LOTS Which Responded to the July 2021 NEMT Survey

Jurisdiction/Organization	Transit System Name
Allegany County	Allegany County Transit
Baltimore City Health Department Division of Aging	Baltimore City TaxiCard Program
Baltimore County Department of Public Works and Transportation	County Ride
Calvert County	Calvert County Public Transportation (CCPT)
Carroll County	Carroll Transit System (CTS)
Cecil County Department of Community Services	Cecil Transit
Charles County	VanGO
City of Annapolis	Annapolis Transit
Frederick County	TransIT Services of Frederick County (TSFC)
Garrett County Community Action	Garrett Transit Service
Harford County	Harford Transit LINK
Howard County Office of Transportation	Regional Transportation Agency of Central Maryland (RTA)
Montgomery County Department of Transportation	Ride On Transit Services
Prince George's County Department of Public Works and Transportation	Call-A-Bus
Queen Anne's County	County Ride
Somerset County Commission of Aging	Dial-A-Ride
St. Mary's County	St. Mary's Transit System (STS)
Town of Ocean City	Ocean City Transportation (OCT)
Tri-County Council for the Lower Eastern Shore of Maryland	Shore Transit
Washington County	Washington County Transit (WCT)

As previously described, the LOTS receive ADA, SSTAP, and/or PTP funding from MDOT MTA. The PTP funding is allocated to programs that support service provision, including the State Large Urban and the Federal Section 5307 (Small Urban) and Section 5311 (Rural) programs. The State also provides matching funds for the Sections 5307 and 5311 programs. The MDOT MTA grant programs that the LOTS may use to provide NEMT services include:

- ADA Funding Program
- (SSTAP
- Section 5307 Urbanized Area Formula Program
- Section 5311 Formula Grants for Rural Areas Program
- Large Urban Program

These programs fund either capital and/or operating projects. Operating grants fund ongoing operating expenses (labor, fuel, supplies, insurance, contract operations, overhead expenses, etc.). Capital grants generally fund vehicles, technology, facility construction, leasing of equipment or facilities, and other equipment. Under the Federal Section 5307 and 5311

programs, preventive maintenance is also funded as a capital project, as are such activities as mobility management and ADA complementary paratransit under certain circumstances.

Each of the LOTS grant programs requires a minimum local match, or local share of the total project cost. Table 3-2 shows the minimum local match for each program profiled in this report, based on the most recent LOTS grant application package (the FY 2022 Annual Transportation Plan Instructions). While each program has a minimum local match, many of the LOTS provide more local funds than is necessary to meet the match in order to maintain a certain level of services. The expression “net operating deficit” means that the match is calculated after fares and other operating revenues are subtracted from the total project cost.

Table 3-2: Minimum Local Match Requirements for MDOT MTA Programs that Fund NEMT Services Provided by the LOTS

Program	Type of Grant	Federal Share	State Share	Local Share
ADA	Operating	None	Up to 90%	10% minimum
SSTAP	Operating	None	Up to 75% of the net operating deficit	Minimum 25% of the net operating deficit
SSTAP	Capital	None	Up to 95%	5% minimum
Large Urban	Operating	None	Typically 75%	Typically 25%
Large Urban	Capital	None	Up to 90%	10% minimum
Section 5307	Operating	Up to 50% of the net operating deficit	Typically 25% of the net operating deficit	Typically 25% of the net operating deficit
Section 5307	Capital	Up to 80%	Up to 10%	10% minimum
Section 5311	Operating	Up to 50% of the net operating deficit	Typically 25% of the net operating deficit	Typically 25% of the net operating deficit
Section 5311	Capital	Up to 80%	Up to 10%	10% minimum

It should be noted that the MDOT MTA also administers other public and specialized transportation grant programs for which a LOTS may be eligible, but which are not profiled in this report as they typically do not fund NEMT services provided by the LOTS.

Table 3-3 displays the various types of services currently operated by the LOTS, as identified in the 20 LOTS survey responses received.

Table 3-3: Types of Services Provided by the LOTS

Type of Transportation System	Number of Responses	Percent of Respondents
Demand response transportation for seniors and people with disabilities (including SSTAP)	17	81.0%
Fixed route service for the general public	15	71.4%
ADA paratransit	13	61.9%
Route deviation service for the general public	7	33.3%
Taxi subsidy	7	33.3%
Demand response transportation for general public	6	28.6%
Service provided on contract basis to one or more human service agencies	4	19.0%
Micro-transit/on-demand app-based service	3	14.3%
Medicaid NEMT on fixed route or route deviation	1	4.8%
Medicaid NEMT on ADA paratransit/demand response service	1	4.8%
Mobility management services	1	4.8%

Americans with Disabilities Act Funding Program

The primary goal of the Maryland ADA funding program is to provide general-purpose transportation for persons with disabilities who are unable to use traditional fixed-route public transit due to the nature of their disability. Eligibility for this discretionary State funding program is limited to LOTS that operate ADA complementary paratransit, which is only a requirement for LOTS that operate fixed route services. The ADA program funds operating projects and requires a minimum of 10 percent local match. Table 3-4 shows ADA grant awards and Table 3-5 shows actual ADA project expenditures.

Table 3-4: ADA Grant Awards, FY 2015-2021

ADA Grant Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$1,276,068	\$1,058,450	\$1,058,450	\$1,058,450	\$1,058,450	\$958,450	\$958,450
Local	\$1,345,712	\$1,261,182	\$1,423,614	\$1,772,598	\$1,395,650	\$2,737,697	\$1,071,368
Total	\$2,621,780	\$2,319,632	\$2,482,064	\$2,831,048	\$2,454,100	\$3,696,147	\$2,029,818
Percent of Total:							
State	48.7%	45.6%	42.6%	37.4%	43.1%	25.9%	47.2%
Local	51.3%	54.4%	57.4%	62.6%	56.9%	74.1%	52.8%

Table 3-5: ADA Grant Expenditures, FY 2015-2021

ADA Grant Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$1,262,842	\$1,050,432	\$1,027,989	\$1,050,562	\$1,058,450	\$941,787	\$606,913
Local	\$1,449,283	\$1,270,759	\$851,691	\$935,359	\$576,917	\$2,673,023	\$1,109,199
Total	\$2,712,125	\$2,321,191	\$1,879,680	\$1,985,920	\$1,635,367	\$3,614,810	\$1,716,112
Percent of Total:							
State	46.6%	45.3%	54.7%	52.9%	64.7%	26.1%	35.4%
Local	53.4%	54.7%	45.3%	47.1%	35.3%	73.9%	64.6%
Percent of Awards Spent:							
State	99.0%	99.2%	97.1%	99.3%	100.0%	98.3%	63.3%
Local	107.7%	100.8%	59.8%	52.8%	41.3%	97.6%	103.5%
Total	103.4%	100.1%	75.7%	70.1%	66.6%	97.8%	84.5%

Statewide Special Transportation Assistance Program

SSTAP grants are apportioned annually to each county in Maryland and the City of Baltimore. The goals of the SSTAP are:

- To provide general-purpose transportation for both elderly persons and persons with disabilities, and
- To encourage and facilitate the efficient use of funds through the coordination of programs and services.

While medical trips are included in the SSTAP, service cannot be restricted to a particular program or activity, and trip purposes may not be prioritized. While the intent of the program is to serve seniors and people with disabilities, SSTAP service may also be available to the general public.

Projects funded under SSTAP can be either capital (requiring a minimum 5 percent local match) or operating (requiring at least 25 percent local match of the net operating deficit). During FY 2015-2021, SSTAP funds were only used for Operating projects.

Table 3-6 shows the total SSTAP grant awards statewide for FY2015-2021, while Table 3-7 shows actual SSTAP project expenditures.

Table 3-6: SSTAP Grant Awards, FY2015-2021

SSTAP Grant Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$4,305,908	\$4,305,908	\$4,305,908	\$4,405,908	\$4,305,908	\$4,305,908	\$4,305,908
Local	\$7,051,570	\$7,293,594	\$7,958,735	\$6,847,021	\$6,931,003	\$8,312,628	\$4,282,789
Total	\$11,357,478	\$11,599,502	\$12,264,643	\$11,252,929	\$11,236,911	\$12,618,536	\$8,588,697
Percent of Total:							
State	37.9%	37.1%	35.1%	39.2%	38.3%	34.1%	50.1%
Local	62.1%	62.9%	64.9%	60.8%	61.7%	65.9%	49.9%

Table 3-7 SSTAP Grant Expenditures, FY2015-2021

SSTAP Grant Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$4,276,007	\$4,272,312	\$4,287,084	\$4,372,164	\$4,268,480	\$4,206,289	\$2,529,325
Local	\$7,455,979	\$5,382,843	\$4,834,852	\$4,779,971	\$5,916,436	\$6,005,819	\$2,968,221
Total	\$11,731,986	\$9,655,156	\$9,121,936	\$9,152,136	\$10,184,916	\$10,212,108	\$5,497,546
Percent of Total:							
State	36.4%	44.2%	47.0%	47.8%	41.9%	41.2%	46.0%
Local	63.6%	55.8%	53.0%	52.2%	58.1%	58.8%	54.0%
Percent of Awards Spent:							
State	99.3%	99.2%	99.6%	99.2%	99.1%	97.7%	58.7%
Local	105.7%	73.8%	60.7%	69.8%	85.4%	72.2%	69.3%
Total	103.3%	83.2%	74.4%	81.3%	90.6%	80.9%	64.0%

Section 5307 Urbanized Area Formula Program

The Federal Section 5307 program provides funding for LOTS operating in urbanized areas (population 50,000 or more). At the federal level, funds are apportioned to each urbanized area on a formula basis. The MDOT MTA administers these funds for the small urbanized areas (population 50,000-200,000) in Maryland, which are eligible for capital and operating funds. Currently, the following jurisdictions are eligible for Section 5307 small urbanized funding: Allegany County (Cumberland), Calvert County, Carroll County (Westminster), Charles County (St. Charles), Frederick County (City of Frederick), St. Mary's County, Washington County (Hagerstown), Tri-County Council of Lower Eastern Shore, and Queen Anne's County.

Operating projects are eligible for federal funding up to 50 percent of net operating expenses. According to the MDOT MTA's most recent Annual Transportation Plan application instructions, the State typically provides a 25 percent match, while a local match of 25 percent is typically needed for operating projects. Capital projects are eligible for a maximum of 80 percent federal share; State funding typically provides 10 percent with a local share of typically 10 percent.

Operating

Table 3-8 shows the total Section 5307 operating grant awards statewide for FY2015-2021, while Table 3-9 shows actual Section 5307 operating project expenditures.

Table 3-8: Section 5307 Operating Grant Awards, FY2015-2021

Section 5307 Operating Grant Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$9,134,981	\$8,718,825	\$9,352,003	\$10,168,715	\$10,024,232	\$10,523,047	\$10,523,047
State	\$3,400,594	\$2,998,023	\$3,082,890	\$3,053,685	\$2,981,318	\$3,065,459	\$2,385,049
Local	\$7,362,122	\$7,024,052	\$7,682,051	\$8,369,244	\$8,065,142	\$8,773,307	\$9,461,527
Total	\$19,897,697	\$18,740,900	\$20,116,944	\$21,591,644	\$21,070,692	\$22,361,813	\$22,369,623
Percent of Total:							
Federal	45.9%	46.5%	46.5%	47.1%	47.6%	47.1%	47.0%
State	17.1%	16.0%	15.3%	14.1%	14.1%	13.7%	10.7%
Local	37.0%	37.5%	38.2%	38.8%	38.3%	39.2%	42.3%

Table 3-9: Section 5307 Operating Grant Expenditures, FY2015-2021

Section 5307 Operating Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$8,393,079	\$8,047,330	\$8,804,877	\$9,675,365	\$9,811,874	\$9,974,300	\$5,977,042
State	\$2,872,368	\$2,610,734	\$2,885,072	\$2,996,097	\$2,942,085	\$2,906,246	\$1,691,734
Local	\$6,820,347	\$6,058,473	\$6,927,223	\$8,019,477	\$8,779,510	\$8,483,681	\$4,623,730
Total	\$18,085,795	\$16,716,537	\$18,617,172	\$20,690,939	\$21,533,469	\$21,364,228	\$12,292,506
Percent of Total:							
Federal	46.4%	48.1%	47.3%	46.8%	45.6%	46.7%	48.6%
State	15.9%	15.6%	15.5%	14.5%	13.7%	13.6%	13.8%
Local	37.7%	36.2%	37.2%	38.8%	40.8%	39.7%	37.6%
Percent of Awards Spent:							
Federal	91.9%	92.3%	94.1%	95.1%	97.9%	94.8%	56.8%
State	84.5%	87.1%	93.6%	98.1%	98.7%	94.8%	70.9%
Local	92.6%	86.3%	90.2%	95.8%	108.9%	96.7%	48.9%
Total	90.9%	89.2%	92.5%	95.8%	102.2%	95.5%	55.0%

Capital

Table 3-10 shows the total Section 5307 capital grant awards statewide for FY2015-2021, while Table 3-11 shows actual Section 5307 capital project expenditures.

Table 3-10: Section 5307 Capital Grant Awards, FY2015-2021

Section 5307 Capital Grant Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$12,132,750	\$7,631,271	\$6,302,861	\$8,269,295	\$3,289,462	\$6,903,348	\$7,779,564
State	\$2,266,596	\$1,189,602	\$773,548	\$994,770	\$396,870	\$848,608	\$250,000
Local	\$766,597	\$718,225	\$802,170	\$1,072,555	\$425,495	\$877,235	\$1,694,891
Total	\$15,165,943	\$9,539,098	\$7,878,579	\$10,336,620	\$4,111,827	\$8,629,191	\$9,724,455
Percent of Total:							
Federal	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%
State	14.9%	12.5%	9.8%	9.6%	9.7%	9.8%	2.6%
Local	5.1%	7.5%	10.2%	10.4%	10.3%	10.2%	17.4%

Table 3-11: Section 5307 Capital Grant Expenditures, FY2015-2021

Section 5307 Capital Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$11,876,115	\$6,911,498	\$5,697,361	\$6,982,328	\$3,137,060	\$5,779,625	\$2,052,275
State	\$2,236,153	\$1,099,754	\$699,238	\$834,427	\$377,820	\$708,142	\$0
Local	\$1,203,552	\$631,677	\$772,230	\$1,036,086	\$468,351	\$777,325	\$533,177
Total	\$15,315,820	\$8,642,929	\$7,168,829	\$8,852,841	\$3,983,231	\$7,265,093	\$2,585,452
Percent of Total:							
Federal	77.5%	80.0%	79.5%	78.9%	78.8%	79.6%	79.4%
State	14.6%	12.7%	9.8%	9.4%	9.5%	9.7%	0.0%
Local	7.9%	7.3%	10.8%	11.7%	11.8%	10.7%	20.6%
Percent of Awards Spent:							
Federal	97.9%	90.6%	90.4%	84.4%	95.4%	83.7%	26.4%
State	98.7%	92.4%	90.4%	83.9%	95.2%	83.4%	0.0%
Local	157.0%	87.9%	96.3%	96.6%	110.1%	88.6%	31.5%
Total	101.0%	90.6%	91.0%	85.6%	96.9%	84.2%	26.6%

Section 5311 Formula Grants for Rural Areas Program

At the federal level, funds are apportioned to each state according to a formula that factors in rural population. Within Maryland, the MDOT MTA awards Section 5311 grants to LOTS operating in Maryland’s rural (nonurbanized) areas, with allocations based on the annual application process. Currently, each county in Maryland is eligible for funding under the Section 5311 program for the nonurbanized portions of the county. Additionally, the town of Ocean City is eligible for the service through the town. The Tri-County Council of Lower Eastern Shore is the eligible applicant for Worcester, Wicomico, and Somerset counties. Talbot County is also the eligible applicant for Caroline and Kent counties. In accordance with FTA regulations, Section 5311-funded services are open to the public and can only serve nonurbanized areas.

Section 5311 funds both operating and capital projects. As with Section 5307, operating projects are eligible for federal funding up to 50 percent of net operating expenses. Likewise, according to the MDOT MTA’s most recent Annual Transportation Plan application instructions, the State typically provides a 25 percent match, while typically a 25 percent local match is needed for operating projects. Capital projects are eligible for a maximum of 80 percent federal share; State funding typically provides 10 percent with a typical local share of 10 percent.

Operating

Table 3-12 shows the total Section 5311 operating grant awards statewide for FY2015-2021, while Table 3-13 shows actual Section 5307 operating project expenditures.

Table 3-12: Section 5311 Operating Grant Awards, FY2015-2021

Section 5311 Operating Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$3,583,008	\$3,926,191	\$4,462,184	\$4,422,789	\$5,023,302	\$3,930,101	\$5,273,977
State	\$1,153,646	\$1,427,313	\$1,101,537	\$1,035,332	\$1,035,332	\$1,035,332	\$828,264
Local	\$9,348,009	\$8,515,115	\$8,548,090	\$5,183,448	\$8,984,429	\$4,729,205	\$7,229,458
Total	\$14,084,663	\$13,868,619	\$14,111,810	\$10,641,568	\$15,043,063	\$9,694,638	\$13,331,699
Percent of Total:							
Federal	25.4%	28.3%	31.6%	41.6%	33.4%	40.5%	39.6%
State	8.2%	10.3%	7.8%	9.7%	6.9%	10.7%	6.2%
Local	66.4%	61.4%	60.6%	48.7%	59.7%	48.8%	54.2%

Table 3-13: Section 5311 Operating Grant Expenditures, FY2015-2021

Section 5311 Operating Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$3,577,291	\$3,869,225	\$4,451,269	\$4,389,438	\$5,013,478	\$3,751,272	\$2,227,617
State	\$1,133,679	\$1,395,987	\$1,096,523	\$1,032,286	\$1,035,332	\$1,014,593	\$413,714

Local	\$9,877,952	\$6,167,523	\$6,703,641	\$6,483,561	\$6,651,684	\$5,500,943	\$4,387,794
Total	\$14,588,923	\$11,432,734	\$12,251,433	\$11,905,286	\$12,700,493	\$10,266,808	\$7,029,125
Percent of Total:							
Federal	24.5%	33.8%	36.3%	36.9%	39.5%	36.5%	31.7%
State	7.8%	12.2%	9.0%	8.7%	8.2%	9.9%	5.9%
Local	67.7%	53.9%	54.7%	54.5%	52.4%	53.6%	62.4%
Percent of Awards Spent:							
Federal	99.8%	98.5%	99.8%	99.2%	99.8%	95.4%	42.2%
State	98.3%	97.8%	99.5%	99.7%	100.0%	98.0%	49.9%
Local	105.7%	72.4%	78.4%	125.1%	74.0%	116.3%	60.7%
Total	103.6%	82.4%	86.8%	111.9%	84.4%	105.9%	52.7%

Capital

Table 3-14 shows the total Section 5311 capital grant awards statewide for FY2015-2021, while Table 3-15 shows actual Section 5311 capital project expenditures.

Table 3-14: Section 5311 Capital Grant Awards, FY2015-2021

Section 5311 Capital Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$1,591,484	\$2,025,885	\$1,907,820	\$6,368,948	\$7,454,172	\$6,298,966	\$3,123,452
State	\$198,936	\$253,240	\$232,582	\$171,118	\$127,120	\$141,119	\$0
Local	\$198,936	\$253,239	\$244,376	\$1,421,119	\$1,736,423	\$1,433,623	\$780,863
Total	\$1,989,356	\$2,532,364	\$2,384,778	\$7,961,185	\$9,317,715	\$7,873,708	\$3,904,315
Percent of Total:							
Federal	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%
State	10.0%	10.0%	9.8%	2.1%	1.4%	1.8%	0.0%
Local	10.0%	10.0%	10.2%	17.9%	18.6%	18.2%	20.0%

Table 3-15: Section 5311 Capital Grant Expenditures, FY2015-2021

Section 5311 Capital Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
Federal	\$1,524,951	\$1,975,322	\$1,833,310	\$6,322,438	\$7,436,421	\$5,933,124	\$1,997,614
State	\$190,615	\$248,491	\$225,576	\$165,305	\$127,080	\$113,757	\$0
Local	\$191,567	\$250,482	\$246,203	\$1,423,115	\$1,746,696	\$1,372,368	\$499,403
Total	\$1,907,133	\$2,474,295	\$2,305,089	\$7,910,857	\$9,310,197	\$7,419,249	\$2,497,017
Percent of Total:							
Federal	80.0%	79.8%	79.5%	79.9%	79.9%	80.0%	80.0%
State	10.0%	10.0%	9.8%	2.1%	1.4%	1.5%	0.0%
Local	10.0%	10.1%	10.7%	18.0%	18.8%	18.5%	20.0%
Percent of Awards Spent:							
Federal	95.8%	97.5%	96.1%	99.3%	99.8%	94.2%	64.0%
State	95.8%	98.1%	97.0%	96.6%	100.0%	80.6%	-
Local	96.3%	98.9%	100.7%	100.1%	100.6%	95.7%	64.0%
Total	95.9%	97.7%	96.7%	99.4%	99.9%	94.2%	64.0%

Large Urban Program

The State Large Urban Program provides discretionary funding to counties in large, urbanized areas. Currently, the following jurisdictions are eligible for funding under this program: Anne Arundel County, Cecil County, City of Annapolis, Howard County, Montgomery County, Prince George’s County, and Queen Anne’s County. The Large Urban Program funds both operating and capital projects. Operating projects are eligible for up to 75 percent State share and require at least 25 percent local match. Capital projects are typically funded 90 percent by State funds with a minimum local match of 10 percent.

Operating

Table 3-16 shows the Large Urban Program operating grant awards statewide for FY2015-2021, and Table 3-17 shows actual Large Urban Program operating project expenditures.

Table 3-16: Large Urban Operating Grant Awards, FY2015-2021

Large Urban Operating Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$5,719,445	\$5,937,063	\$7,653,061	\$7,814,253	\$7,354,253	\$6,454,253	\$5,163,402
Local	\$6,838,196	\$6,644,651	\$6,651,498	\$7,484,705	\$7,361,333	\$9,068,921	\$6,760,053
Total	\$12,557,641	\$12,581,714	\$14,304,559	\$15,298,958	\$14,715,586	\$15,523,174	\$11,923,455
Percent of Total:							
State	45.5%	47.2%	53.5%	51.1%	50.0%	41.6%	43.3%
Local	54.5%	52.8%	46.5%	48.9%	50.0%	58.4%	56.7%

Table 3-17: Large Urban Operating Grant Expenditures, FY2015-2021

Large Urban Operating Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$5,562,212	\$5,937,063	\$7,653,061	\$7,814,253	\$7,354,253	\$6,443,838	\$3,027,146
Local	\$6,479,197	\$11,275,537	\$8,595,166	\$7,979,960	\$7,377,557	\$7,715,445	\$1,913,739
Total	\$12,041,409	\$17,212,600	\$16,248,228	\$15,794,213	\$14,731,810	\$14,159,283	\$4,940,885
Percent of Total:							
State	46.2%	34.5%	47.1%	49.5%	49.9%	45.5%	61.3%
Local	53.8%	65.5%	52.9%	50.5%	50.1%	54.5%	38.7%
Percent of Awards Spent:							
State	97.3%	100.0%	100.0%	100.0%	100.0%	99.8%	58.6%
Local	94.8%	169.7%	129.2%	106.6%	100.2%	85.1%	28.3%
Total	95.9%	136.8%	113.6%	103.2%	100.1%	91.2%	41.4%

Capital

Table 3-18 shows the total Large Urban Program capital grant awards statewide for FY2015-2021. Table 3-19 shows actual Section 5311 capital project expenditures.

Table 3-18: Large Urban Capital Grant Awards, FY2015-2021

Large Urban Capital Awards	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
State	\$162,000	\$495,000	\$665,340	\$538,200	\$546,439	\$500,893	\$437,080
Local	\$18,000	\$55,000	\$38,371	\$59,800	\$151,946	\$55,655	\$109,270
Total	\$180,000	\$550,000	\$703,711	\$598,000	\$698,385	\$556,548	\$546,350
Percent of Total:							
State	90.0%	90.0%	94.5%	90.0%	78.2%	90.0%	80.0%
Local	10.0%	10.0%	5.5%	10.0%	21.8%	10.0%	20.0%

Table 3-19: Large Urban Capital Grant Expenditures, FY 2015-2021

Large Urban Capital Expenditures	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020*	FY2021
State	\$162,000	\$477,561	\$632,521	\$537,345	\$546,376	\$501,805	\$360,000
Local	\$26,561	\$53,062	\$96,301	\$258,385	\$321,596	\$315,682	\$98,273
Total	\$188,561	\$530,623	\$728,822	\$795,730	\$867,971	\$817,487	\$458,273
Percent of Total:							
State	85.9%	90.0%	86.8%	67.5%	62.9%	61.4%	78.6%
Local	14.1%	10.0%	13.2%	32.5%	37.1%	38.6%	21.4%
Percent of Awards Spent:							
State	100.0%	96.5%	95.1%	99.8%	100.0%	100.2%	82.4%
Local	147.6%	96.5%	251.0%	432.1%	211.7%	567.2%	89.9%
Total	104.8%	96.5%	103.6%	133.1%	124.3%	146.9%	83.9%
*Grant tracking data included \$306,147 in Federal funding in FY2020 expenditures, excluded in this table.							

LOTS Service Statistics Reported to MDOT MTA

LOTS grantees report operating statistics to MDOT MTA by service/grant type including trips (passenger boardings), service miles, service hours, and operating expenses. Operating revenues, including farebox, advertising, and other operating revenue are also reported by service/grant type. Statewide statistics reported by the LOTS by service/grant type are presented in the following series of tables.

It should be noted that, due to changes in services and ridership with the onset of the COVID-19 pandemic in FY2020, the LOTS may have experienced lower ridership (as “choice” riders reduced use of public transportation across the nation) and lower fare revenues. Many LOTS also temporarily reduced the services they operated, often due to staffing and ridership reductions, and some temporarily converted fixed route services to demand response.

ADA Program Operating Statistics

Table 3-20 presents operating statistics reported to MDOT MTA by the LOTS statewide for the ADA Program. As previously noted, ADA paratransit must be provided to eligible individuals without capacity constraints and with no restrictions on trip purposes. As such, the Maryland ADA Program funds NEMT as well as trips to any other type of destination requested, such as employment, education, shopping, recreation, and any other purpose.

Many ADA paratransit riders need a high level of passenger assistance to use the service (such as being escorted between the vehicle and the door of their origin or destination, as well as wheelchair securement). While ADA paratransit is typically a shared ride service, it can be challenging to service efficiently due to the operating requirements under the U.S. DOT ADA regulations.

Table 3-20: Statewide Operating Statistics for ADA Program-Funded Paratransit Services

ADA Program Total	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020
Passenger Trips	86,648	93,272	101,154	96,352	85,944	113,903
Service Miles	775,194	815,716	795,460	835,605	773,205	814,586
Service Hours	53,984	56,423	56,843	62,394	56,684	71,238
Operating Costs	\$3,042,309	\$2,956,547	\$2,831,405	\$3,103,444	\$2,530,384	\$3,834,335
Farebox	\$165,459	\$198,014	\$172,440	\$170,813	\$207,932	\$194,792
Other Operating Revenue	\$1,134,921	\$1,171,222	\$1,156,196	\$841,073	\$127,461	\$116,560
Advertising Revenue	\$17,318	\$27,019	\$22,513	\$10,594	\$13,407	\$20,006
Total Operating Revenue	\$1,317,698	\$1,396,256	\$1,351,149	\$1,022,480	\$348,800	\$331,358
Net Operating Deficit	\$1,724,611	\$1,560,291	\$1,480,256	\$2,080,964	\$2,181,584	\$3,502,977
Trips per Hour	1.61	1.65	1.78	1.54	1.52	1.60
Trips per Mile	0.11	0.11	0.13	0.12	0.11	0.14
Cost per Mile	\$3.92	\$3.62	\$3.56	\$3.71	\$3.27	\$4.71
Cost per Hour	\$56.36	\$52.40	\$49.81	\$49.74	\$44.64	\$53.82
Cost per Trip	\$35.11	\$31.70	\$27.99	\$32.21	\$29.44	\$33.66
Deficit per Trip	\$19.90	\$16.73	\$14.63	\$21.60	\$25.38	\$30.75
Farebox Recovery	5.4%	6.7%	6.1%	5.5%	8.2%	5.1%
Operating Revenue Recovery	43.3%	47.2%	47.7%	32.9%	13.8%	8.6%

SSTAP Operating Statistics

SSTAP operating statistics, aggregated statewide, are presented in Table 3-21. As noted earlier, SSTAP funds general purpose transportation for seniors and people with disabilities. As with the ADA Program, SSTAP is meant to serve any trip purpose, although unlike ADA paratransit, prioritizing trip purposes (such as medical) is permitted. LOTS may also use SSTAP funding to fund operating expenses for ADA paratransit. SSTAP riders may also need a higher level of passenger assistance to use the service than is needed on general public transit. Because SSTAP is typically a form of demand response service, it can result in a relatively higher cost per trip than on fixed route or deviated fixed route, although on average with higher productivity and lower cost per trip than ADA paratransit.

Table 3-21: SSTAP Statewide Operating Statistics

SSTAP Total	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020
Passenger Trips	576,620	591,398	530,662	464,703	424,866	315,589
Service Miles	3,773,838	3,910,918	3,322,625	2,879,297	2,991,115	2,294,009
Service Hours	264,294	233,252	223,625	200,329	187,355	162,841
Operating Costs	\$11,932,171	\$11,502,859	\$9,719,165	\$8,584,560	\$9,346,387	\$7,496,778
Farebox	\$1,009,449	\$956,516	\$1,041,454	\$951,003	\$1,063,358	\$464,840
Other Operating Revenue	\$4,487,815	\$4,457,780	\$4,334,567	\$3,690,557	\$2,791,717	\$1,951,802
Advertising Revenue	\$23,716	\$69,354	\$30,174	\$12,622	\$25,344	\$47,625
Total Operating Revenue	\$5,520,980	\$5,483,651	\$5,406,196	\$4,654,182	\$3,880,419	\$2,464,267
Net Operating Deficit	\$6,411,191	\$6,019,208	\$4,312,969	\$3,930,378	\$5,465,968	\$5,032,510
Trips per Hour	2.18	2.54	2.37	2.32	2.27	1.94
Trips per Mile	0.15	0.15	0.16	0.16	0.14	0.14
Cost per Mile	\$3.16	\$2.94	\$2.93	\$2.98	\$3.12	\$3.27
Cost per Hour	\$45.15	\$49.32	\$43.46	\$42.85	\$49.89	\$46.04
Cost per Trip	\$20.69	\$19.45	\$18.32	\$18.47	\$22.00	\$23.75
Deficit per Trip	\$11.12	\$10.18	\$8.13	\$8.46	\$12.87	\$15.95
Farebox Recovery	8.5%	8.3%	10.7%	11.1%	11.4%	6.2%
Operating Revenue Recovery	46.3%	47.7%	55.6%	54.2%	41.5%	32.9%

Public Transportation Programs Operating Statistics (Section 5307, Section 5311 and Large Urban Programs)

LOTS public transportation service data are grouped into three service types - fixed route, deviated fixed route, and general public demand response services - rather than specific grant programs. Tables 3-22, 3-23, and 3-24 display the operating statistics for these three service types respectively. Services funded by the Section 5307, Section 5311, and Large Urban Programs are aggregated in these tables.

Table 3-22: Statewide Operating Statistics for LOTS PTP - Funded Fixed Route Services.

Fixed Route Total 5307, 5311, Large Urban	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020
Passenger Trips	15,707,536	13,721,087	16,642,674	13,782,514	10,377,518	7,507,270
Service Miles	12,181,590	12,127,554	12,572,620	13,279,304	11,684,713	10,732,059
Service Hours	809,305	825,900	845,854	904,643	784,423	694,245
Operating Costs	\$66,930,525	\$66,899,013	\$66,005,230	\$71,920,863	\$65,306,142	\$60,095,877
Farebox Revenue	\$8,320,769	\$7,915,098	\$7,737,170	\$8,416,360	\$7,192,465	\$4,778,760
Other Operating Revenue	\$7,118,646	\$7,024,206	\$7,003,266	\$8,632,498	\$3,844,130	\$3,307,278
Advertising Revenue	\$176,002	\$279,063	\$423,489	\$496,413	\$362,307	\$273,001
Total Operating Revenue	\$15,615,418	\$15,218,367	\$15,163,925	\$17,545,271	\$11,398,902	\$8,359,039
Net Operating Deficit	\$51,315,107	\$51,680,646	\$50,841,305	\$54,375,592	\$53,907,240	\$51,736,838
Trips per Hour	19.41	16.61	19.68	15.24	13.23	10.81
Trips per Mile	1.29	1.13	1.32	1.04	0.89	0.70
Cost per Mile	\$5.49	\$5.52	\$5.25	\$5.42	\$5.59	\$5.60
Cost per Hour	\$82.70	\$81.00	\$78.03	\$79.50	\$83.25	\$86.56
Cost per Trip	\$4.26	\$4.88	\$3.97	\$5.22	\$6.29	\$8.01
Deficit per Trip	\$3.27	\$3.77	\$3.05	\$3.95	\$5.19	\$6.89
Farebox Recovery	12.4%	11.8%	11.7%	11.7%	11.0%	8.0%
Operating Revenue Recovery	23.3%	22.7%	23.0%	24.4%	17.5%	13.9%

Table 3-23: Statewide Operating Statistics for LOTS PTP - Funded Deviated Fixed Route Services

Deviated Fixed Route Total 5307, 5311, Large Urban	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020
Passenger Trips	708,133	643,100	540,565	502,826	502,677	199,174
Service Miles	1,711,208	1,874,580	1,844,880	1,779,211	1,892,902	1,115,181
Service Hours	111,935	112,228	110,984	109,147	120,950	70,296
Operating Costs	\$5,400,148	\$6,240,775	\$6,086,831	\$6,254,354	\$6,677,671	\$3,698,857
Farebox	\$705,612	\$609,376	\$563,087	\$506,334	\$525,745	\$191,368
Other Operating Revenue	\$1,233,407	\$1,185,535	\$1,281,920	\$1,324,866	\$1,368,621	\$738,160
Advertising Revenue	\$158	\$7,217	\$2,062	\$10,400	\$44,383	\$51,908
Total Operating Revenue	\$1,939,176	\$1,802,128	\$1,847,069	\$1,841,600	\$1,938,749	\$981,435
Net Operating Deficit	\$3,460,972	\$4,438,646	\$4,239,762	\$4,412,754	\$4,738,922	\$2,717,422
Trips per Hour	6.33	5.73	4.87	4.61	4.16	2.83
Trips per Mile	0.41	0.34	0.29	0.28	0.27	0.18
Cost per Mile	\$3.16	\$3.33	\$3.30	\$3.52	\$3.53	\$3.32
Cost per Hour	\$48.24	\$55.61	\$54.84	\$57.30	\$55.21	\$52.62
Cost per Trip	\$7.63	\$9.70	\$11.26	\$12.44	\$13.28	\$18.57
Deficit per Trip	\$4.89	\$6.90	\$7.84	\$8.78	\$9.43	\$13.64
Farebox Recovery	13.1%	9.8%	9.3%	8.1%	7.9%	5.2%
Operating Revenue Recovery	35.9%	28.9%	30.3%	29.4%	29.0%	26.5%

Table 3-24: Statewide Operating Statistics for LOTS PTP - Funded Demand Response Services

Demand Response Total 5307, 5311, Large Urban	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020
Passenger Trips	244,498	209,786	212,579	231,730	281,484	238,623
Service Miles	1,715,767	1,899,643	1,920,466	2,054,250	2,090,638	1,771,886
Service Hours	129,350	226,970	123,238	139,263	160,565	133,251
Operating Costs	\$5,953,342	\$7,670,550	\$4,885,504	\$5,315,064	\$5,876,259	\$5,517,914
Farebox	\$559,914	\$379,689	\$427,783	\$430,017	\$496,006	\$421,867
Other Operating Revenue	\$782,151	\$1,598,426	\$1,531,392	\$1,933,030	\$2,814,082	\$2,055,595
Advertising Revenue	\$23,112	\$13,325	\$28,028	\$16,921	\$17,124	\$11,696
Total Operating Revenue	\$1,365,177	\$1,991,439	\$1,987,203	\$2,379,968	\$3,327,212	\$2,489,158
Net Operating Deficit	\$4,588,165	\$5,679,111	\$2,898,301	\$2,935,096	\$2,549,047	\$3,028,756
Trips per Hour	1.89	0.92	1.72	1.66	1.75	1.79
Trips per Mile	0.14	0.11	0.11	0.11	0.13	0.13
Cost per Mile	\$3.47	\$4.04	\$2.54	\$2.59	\$2.81	\$3.11
Cost per Hour	\$46.03	\$33.80	\$39.64	\$38.17	\$36.60	\$41.41
Cost per Trip	\$24.35	\$36.56	\$22.98	\$22.94	\$20.88	\$23.12
Deficit per Trip	\$18.77	\$27.07	\$13.63	\$12.67	\$9.06	\$12.69
Farebox Recovery	9.4%	4.9%	8.8%	8.1%	8.4%	7.6%
Operating Revenue Recovery	22.9%	26.0%	40.7%	44.8%	56.6%	45.1%

NEMT Services Provided by the LOTS

The LOTS do not track trip purposes and do not report NEMT services to OLTS. Information on NEMT services provided by the LOTS was obtained from responses to the July 2021 survey.

Medicaid NEMT

Three of the LOTS survey respondents reported that they had a contract to provide Medicaid NEMT during FY 2019 or FY 2020. Table 4-1 shows the number of Medicaid trips provided by these three LOTS (in Frederick, Garrett, and Montgomery Counties). Montgomery County is unique in Maryland in that the Medicaid Transportation Grant funds from the Maryland Department of Health are administered by the County Department of Transportation rather than the County's Health Department.

Table 4-1: LOTS with Medicaid NEMT Contracts

LOTS	No. of Medicaid NEMT Trips Provided Under Contract	
	FY2019	1st half of FY2020
Transit Services of Frederick County	8,360	4,185
Garrett County Community Action (Garrett Transit Service)	6,606	2,941
Montgomery County Department of Transportation (Ride On)	76,227	45,000

In addition to the above three LOTS, Delmarva Community Transit (serving Dorchester, Caroline, Kent, and Talbot counties) provides Medicaid NEMT under contract to Dorchester County Health Department² and Talbot County Health Department³.

Other LOTS Provided NEMT Services

The survey asked the LOTS if they tracked the number of trips to or from medical appointments provided by their specialized transportation/paratransit services. Ten LOTS replied affirmatively, and nine LOTS provided data on the number of NEMT trips provided in FY2019 and the first half of FY 2020, as shown in Table 4-2.

² Dorchester County Health Department, Medical Assistance Transportation web page, <https://dorchesterhealth.org/medical-assistance-transportation/>, as accessed Aug. 31, 2021.

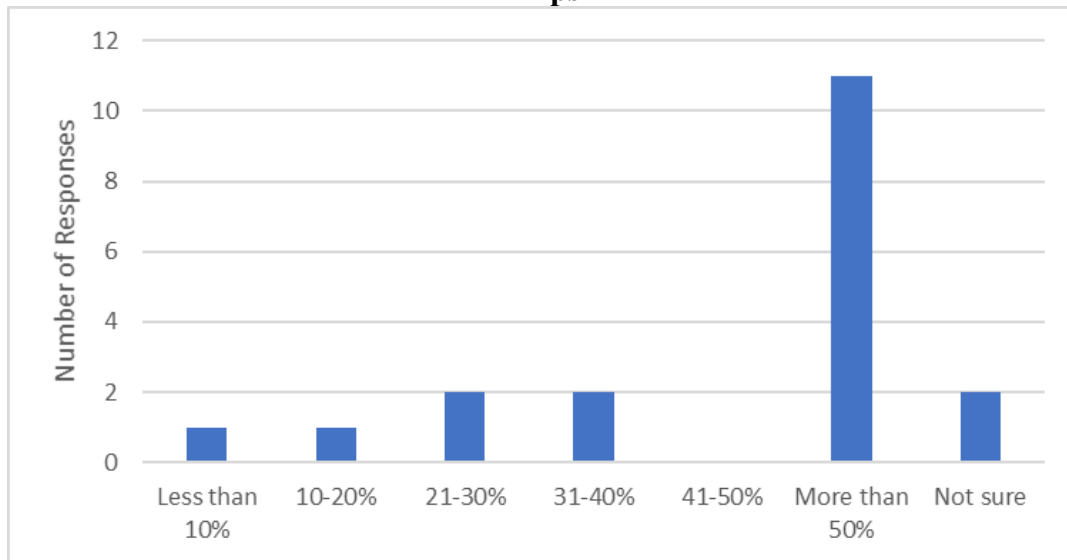
³ Maryland Department of Health, Talbot County Medical Assistance Transportation web page (<https://health.maryland.gov/talbotcounty/Pages/Transportation.aspx>), as accessed Aug. 31, 2021.

Table 4-2: LOTS which Track Trips for Medical Appointments

LOTS which Track Trips on Specialized Transportation or Paratransit Services to and from Medical Appointments	Services on which Medical Trips Are Tracked	No. of NEMT Trips Provided on these Services	
		FY2019	1st half of FY2020
Calvert County Public Transportation	ADA and SSTAP	3,914	2,011
Carroll Transit System	Demand Response	8,538	4,337
Cecil Transit	SSTAP (Demand Response), Micro-transit	2,564	674
County Ride (Baltimore County)	Demand Response	37,525	23,801
County Ride (Queen Anne's County)	SSTAP	not specified	not specified
Garrett Transit Service	not specified	13,906	6,210
Harford Transit LINK	Demand Response	14,624	7,958
Howard County / RTA of Central Maryland	Paratransit Trips	25,749	17,436
Shore Transit	ADA and SSTAP	14,014	5,032
Transit Services of Frederick County	Transit-plus paratransit	35,962	19,673

Eleven of the 20 LOTS respondents estimated that more than 50 percent of their current specialized transportation/paratransit services are medical trips (Figure 4-1).

Figure 4-1: Estimated Percent of Specialized and Paratransit Services that Are Medical Trips



Ability to Meet the Needs for NEMT

The LOTS were asked if they turned away any medical trip requests in FY2019, and if so, approximately how many trips, and why. They are also asked about medical trips turned away during the periods July to December 2019 (before the pandemic) and June 2021 (when the

pandemic appeared to be abating). A summary of responses about numbers of medical trip denials is presented in Table 4-3. Tracking trip denials is only required for ADA paratransit.

Table 4-3: Estimated Number of Medical Trips LOTS Reported They Were Unable to Provide in FY2019, July-December 2019, and June 2021

LOTS	Medical Trip Requests Turned Down		
	FY2019	July-Dec 2019	June 2021
Allegheny County Transit	None	None	None
Annapolis Transit	None	None	None
Baltimore City TaxiCard Program	None	None	None
Call-A-Bus (Prince George's County)	None	None	None
Calvert County Public Transportation (CCPT)	None	None	None
County Ride (Queen Anne's County)	None	None	None
Ocean City Transportation (OCT)	None	None	None
RTA (Howard County)	None	None	None
Shore Transit (Somerset, Wicomico, and Worcester Counties)	None	None	None
St. Mary's Transit System (STS)	None	None	None
VanGO (Charles County)	None	None	None
Washington County Transit (WCT)	None	None	None
Cecil Transit	Not sure	Not sure	Yes (1)
Harford Transit LINK	Not sure	Yes (128)	Yes
Carroll Transit System (CTS)	Yes (approx. 100)	Yes (45)	None
County Ride (Baltimore County)	Yes (approx. 2,000)	Not sure	Yes (137)
Dial-A-Ride (Somerset County)	Yes	Yes	Yes (6)
Garrett Transit Service	Yes	Yes	Yes
Ride On Transit Services (Montgomery County)	Yes	Yes	Yes
Transit Services of Frederick County (TSFC)	Yes (approx. 7,000)	Yes (approx. 6,000)	None

Table 4-4 summarizes the reasons reported by the LOTS for difficulties with meeting demands for medical transportation. In FY2019, having an insufficient number of drivers was the most frequently indicated reason for turning away requests for medical trips, with four LOTS citing this reason. Medical trip requests being outside of the LOTS' service days and hours or service area were the next most frequent responses (3 responses). Less frequent reasons included not having enough operating funds (2 responses), not having enough vehicles (2 responses), and trip requests that were not eligible for Medicaid NEMT (1 response).

Table 4-4: Primary Challenges for LOTS Meeting NEMT Needs, FY2019 and June 2021

Challenges for Meeting NEMT Needs	FY2019	June 2021
Not enough operating funds	2	0
Not enough drivers	4	10
Not enough vehicles	2	3
Medical trip requests are outside service days / hours	3	1
Medical trip requests are outside service area	3	4
Continuing COVID-19 related impacts	--	8
Other	1	2

LOTS were asked for the primary reasons for difficulties in meeting demand for medical transportation in June 2021. A shortage of drivers (10 responses) as well as continuing COVID-19 related impacts (8 responses) were the most frequent reasons during this period. For this period, the following explanations were added:

- Due to capacity and altered alternative times, which were then refused by the client. Inability to hire additional drivers to cover the preapproved seasonal leave. During high peak, we have between 5-8 drivers off due to approved leave and callouts of other types.
- Huge surge in all medical related transportation requests. Schedules during peak hours are regular trips for dialysis, impacting ability to provide other services.
- All eligible requests for Medicaid Transit were met.

Impact of NEMT Demand on LOTS' Ability to Provide Specialized Service for Other Purposes

When asked if the demand for medical trips impacted their ability to provide specialized service for other purposes in FY2019, eight LOTS replied that it did, and twelve indicated that it did not. Those which were impacted indicated the follow types of impacts:

- During an average day, it was difficult to serve other trip purposes because demand for medical trips used so much capacity (4 responses).
- During peak times for medical trips, it was not possible to serve other trip purposes because demand for medical trips used the capacity (4).
- Given the demand for medical trips, they limited trip purposes to specifically defined essential trips only and were unable to serve trips for non-essential purposes (1).
- Other (3) – explanations included limited capacity for other types of trips (including seniors and people with disabilities not eligible for Medicaid) and challenges coordinating services with dialysis centers that have become less cooperative and more demanding with their schedules.

Greatest Unmet Needs for Medical Transportation

The survey next asked the LOTS to indicate the highest unmet needs for medical transportation in their community. Twelve LOTS indicated the greatest need is trips to regional medical

destinations outside of the LOTS service area. The second most frequent response was trips to medical destinations within their service area (6 responses). Three LOTS indicated that the highest need is lower fares or free fares for non-Medicaid eligible riders. Three respondents indicated other high-priority needs: additional operating funding, additional dialysis transportation capacity with more flexibility from the individual centers, and increased awareness of medical transportation resources and how to enroll.

Other Medical Transportation Providers

LOTS were asked if there were other publicly-funded agencies or providers in their community that provide medical transportation. Thirteen respondents indicated there were (other) Medicaid NEMT providers serving their community and 14 indicated there are human service agencies that provide medical transportation. Two LOTS indicated they thought there probably were others but were not sure.

Costs and Funding for LOTS-Provided Medical Transportation

The survey asked for average cost per one-way specialized transportation/paratransit trip in FY2019, as well as from July to December 2019. Responses to these questions are summarized in Table 4-5. There is a wide range of cost per passenger trip among the LOTS, reflecting such variables as different service designs, operating environments, whether service is operated in-house or contracted, whether drivers are unionized, and productivity levels.

Table 4-5: LOTS Cost per Special Transportation / Paratransit Trips

Range of Average Cost per Passenger Trip on Specialized / Paratransit Services	Number of LOTS Responding in this Range	
	FY2019	July-Dec 2019
Under \$10.00	1	1
\$10.00-\$19.99	3	4
\$20.00-\$29.99	3	3
\$30.00-\$39.99	4	3
\$40.00-\$49.99	3	3
\$50.00-\$59.99	0	1
\$60.00-\$69.99	1	1

he survey asked the LOTS to indicate FY2019 and current (as of July 2021) funding sources for medical transportation. The sources and response frequency are shown in Table 4-6. SSTAP is the most frequently reported source of NEMT funding in FY2019 as well as in the current fiscal year, with local funds as the second most frequent response. Federal COVID-19 relief funds, including funding from the federal Coronavirus Aid, Relief, and Economic Security Act (CARES); Coronavirus Response and Relief Supplemental Appropriations Act of 2021 (CRRSAA); and the American Rescue Plan Act of 2021 (ARPA) became important sources of funding for LOTS in the current fiscal year. Only one LOTS reported Medicaid funding in the current fiscal year (Montgomery County Ride On). During FY2019, Garrett Transit Service also received Medicaid funding. The survey responses reported no use of the Large Urban Program to provide medical transportation.

Table 4-6: LOTS Funding Sources for Medical Transportation

Source	FY2019	Current (July 2021)
SSTAP	17	14
CARES Act	--	11
Local funds	14	11
Section 5307	10	6
CRRSAA-ARPA	--	4
Section 5311	8	4
State ADA Paratransit	4	2
Section 5310	2	2
Medicaid Funds	2	1
Human service agency contracts	1	1
Other	1	0
State Senior Rides Program	0	0
State Large Urban Program	0	0

The LOTS were asked to report their total operating expenses (administration, operations, and maintenance) for the transit system for FY2015-FY2020. The instructions for this question requested costs for services funded by all sources, not just those funded by MDOT MTA grants. Respondents indicated that they reported their entire transportation operating budget to MDOT MTA in FY2019 in the ATP. Additionally, respondents were asked to include preventive maintenance, even if funded by a capital grant. The responses are compiled in Table 4-7.

Table 4-7: Total LOTS Operating Expenses, FY2015-FY2020

Organization	FY2016 Total	FY2017 Total	FY2018 Total	FY2019 Total	FY2020 Total
Annapolis Transit	\$4,843,263	\$4,872,975	\$4,893,335	\$4,530,423	\$4,596,450
Baltimore City TaxiCard Program	--	--	--	\$55,780	\$505,780
Call-A-Bus (Prince George's County)	\$3,989,405	\$3,573,575	\$3,519,183	\$3,830,482	\$3,794,891
Calvert County Public Transportation (CCPT)	\$1,359,849	\$1,365,234	\$1,492,344	\$1,762,148	\$1,524,805
Carroll Transit System (CTS)	\$2,240,128	\$2,510,103	\$2,511,752	\$2,477,809	\$2,186,272
Cecil Transit	--	\$1,479,240	\$1,824,370	\$2,076,028	\$2,030,119
County Ride (Baltimore County)	\$1,945,964	\$1,960,487	\$1,863,551	\$1,793,329	\$1,756,897
County Ride (Queen Anne's County)	\$967,726	\$1,108,246	\$1,058,588	\$1,079,169	\$1,936,417
Dial-A-Ride (Somerset County)	\$183,254	\$183,599	\$160,052	\$160,099	\$158,785
Harford Transit LINK	\$5,089,696	\$5,125,771	\$6,231,139	\$5,017,519	\$5,342,723
Ride On Transit Services (Montgomery County)	\$108,986,149	\$112,932,119	\$118,857,849	\$124,622,335	\$126,723,743
RTA (Howard County)	\$8,302,360	\$8,815,039	\$11,459,106	\$14,035,280	\$14,825,717
Shore Transit	\$5,959,091	\$5,624,449	\$5,431,976	\$5,991,787	\$5,563,593
St. Mary's Transit System (STS)	\$2,040,771	\$2,110,541	\$2,139,560	\$2,313,396	\$2,108,597
Transit Services of Frederick County (TSFC)	\$7,523,577	\$7,039,700	\$7,321,887	\$7,202,500	\$8,002,577
VanGO (Charles County)*	\$7,270,298	\$7,480,447	\$7,548,542	\$7,258,193	\$7,136,182
Washington County Transit (WCT)	\$2,615,800	\$2,754,400	\$2,818,700	\$2,807,700	\$2,849,300

*IGA with Dept. of Health terminated during FY2019

Additional Funding Needed for Medical Transportation

The final survey question was aimed at LOTS that were currently having difficulty meeting demands for medical transportation (or other specialized transportation trip purposes to accommodate medical transportation demand). As shown earlier in Table 4-3, six LOTS reported that they were unable to provide all medical trips requested during June 2021. Two other LOTS were unable to provide all medical trips requested during both FY2019 and July-Dec 2019. These LOTS were asked how much additional funding per month or year would be needed to fully accommodate the demand for medical transportation, along with an explanation. The responses to this question are below.

- **Transit Services of Frederick County:** Due to pandemic-related reduction in demand, we are able to meet the needs of our community with existing resources. However, prior to the pandemic we were denying up to 40% of trip requests on our paratransit service due to lack of available resources.
- **Washington County Transit:** Within Washington County: (expansion of service) Please see WCT's most recent TDP for full details about transit service provided by WCT. Total estimate to expand service including staffing and vehicles = \$1.1m annually for operating and \$.6/m for Capital procurements (vehicles). Outside

Washington County but within the State of Maryland: hard to decipher since we currently do not provide any such service. The Washington County Health Dept manages all NEMT transportation utilizing a third-party provider (AAA transport) for both in-County and in-State service.

- **County Ride - Queen Anne's County:** Three additional drivers \$175,000 and two additional buses \$160,000.
- **VanGO:** We currently have the fleet, operational and budget capacity to meet our paratransit demand for any trip purpose. Where we are really seeing our resources strained is meeting the demand for the steady, relentless increase in transportation to dialysis centers. In less than 13 years we have gone from two dialysis centers to five and the number of dialysis clients in our database has gone from 35 to 150 (not all of them ride regularly). Prior to the pandemic, total paratransit resources dedicated to dialysis represented about 55% of that service mode. With ADA ridership down and senior center ridership nonexistent during the pandemic, dialysis represents about 80% of the paratransit effort. Note in budget numbers above, our IGA with health department for Medicaid transportation was terminated in FY-19 and they contract that service directly.
- **Cecil Transit:** Although not an issue at this time, as the demand for trips continues to recover, I foresee an issue in being able to meet the demand for medical trips. Cecil County's total overmatch for SSTAP is forecasted to be nearly \$300,000.
- **Harford Transit LINK:** Currently, the SSTAP budget requires the County to provide \$1.2 million dollars to "Match" a \$170,000 state investment in serving the elderly and disabled residents of Harford County. The State in this case provides 12% of our SSTAP operations budget. Currently, there is a national CDL driver shortage which has become a priority impact for current and future service. Even though our base salary is now in the upper 20% of salaries paid for CDL drivers in Maryland. Additionally, we hire all drivers as full time to offer our benefits package which is an additional \$20,000 per driver as an incentive to work for our organization. Unfortunately, over the past 12 months we have hired approximately 12 drivers with a turnover rate of approximately 75%. Equipment is also an issue. Due to the limited capital funding availability and a period of time where viable procurement avenues to purchase/replace rolling stock was unavailable. This has encouraged us to take another direction, applying for and securing discretionary funding for low emission vehicles and out of state procurements for rolling stock. We have had to develop dynamic methods/approaches to operations and Asset Management to meet the needs of our riders and ensure safe and reliable transportation. This current environment we are operating in is unsustainable with the growth in medical transportation requests. Also, the level of care some riders require is beyond the scope of public transit operating guidelines. MA transportation is better suited for these trips; however, they have legislated that they are not required to provide the trips if a public transit provider can. We must take these trips without investment from the Dialysis centers and only a small fare collected from the rider.
- **Allegany County Transit:** EMT provides this type of specialized transportation in this area.
- **Shore Transit:** To add drivers & buses, \$1,000,000 for 15 drivers & 10 buses to add 200 hours a week.

- **Montgomery County:** We currently meet the demand of Medicaid Transportation by all eligible Medicaid recipients.
- **St. Mary's Transit System:** The driver shortage is really affecting STS. A reduction of fares for the SSTAP and fixed income elderly would greatly assist. To reduce ADA and SSTAP fares we would need an estimated \$40,000. Hiring more drivers, even non-CDL that we could train would provide more flexibility in the transportation of ADA and SSTAP riders for medical transportation. To purchase 2 non-CDL buses and 1 paratransit van with 3 non-CDL drivers would cost \$175,000 for the vehicles (one-time payment) and \$115,000 for the drivers (annually). To provide more medical transportation and reduce the cost of the transportation, STS would need an estimated \$155,000 annually (plus the cost of fuel and maintenance) and \$175,000 to purchase the additional vehicles.
- **Baltimore City:** Baltimore City Health Department Division of Aging contracts with a management company to operate a subsidized taxi service; passengers register with the service and use a debit card to purchase trips from participating cab companies. The service is completely consumer driven, and participants are not required to document trip purposes. In our experience, however, one of the primary barriers to non-emergency medical transportation is that consumers do not know what resources are available or how to navigate systems to find the services they need.

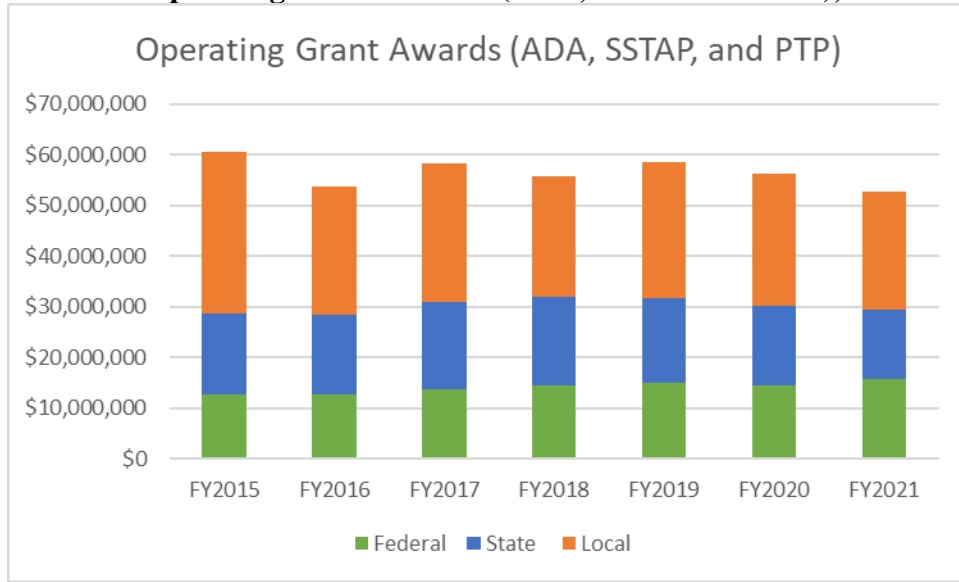
Operating Grant Awards

Table 5-1 provides a snapshot of the funding levels of total operating grant awards from the key MDOT MTA LOTS programs from FY2015 through FY2021, including federal, State, and local shares, that could be used to provide medical transportation: ADA, SSTAP, and the three PTP grant programs (Section 5307, Section 5311, and Large Urban). Figure 5-1 displays the total amounts awarded to the LOTS each year.

Table 5-1: Operating Funding Grant Awards for ADA, SSTAP and PTP, FY2015 - FY2021

Grant Program	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	FY2021
ADA:							
State	\$1,276,068	\$1,058,450	\$1,058,450	\$1,058,450	\$1,058,450	\$958,450	\$958,450
Local	\$1,345,712	\$1,261,182	\$1,423,614	\$1,772,598	\$1,395,650	\$2,737,697	\$1,071,368
SSTAP							
State	\$4,305,908	\$4,305,908	\$4,305,908	\$4,305,908	\$4,305,908	\$4,305,908	\$4,305,908
Local	\$7,051,570	\$7,293,594	\$7,958,735	\$6,847,021	\$6,931,003	\$8,312,628	\$4,282,789
Public Transportation Program (PTP):							
Section 5307							
Federal	\$9,134,981	\$8,718,825	\$9,352,003	\$10,168,715	\$10,024,232	\$10,523,047	\$10,523,047
State	\$3,400,594	\$2,998,023	\$3,082,890	\$3,053,685	\$2,981,318	\$3,065,459	\$2,385,049
Local	\$7,362,122	\$7,024,052	\$7,682,051	\$8,369,244	\$8,065,142	\$8,773,307	\$9,461,527
Section 5311							
Federal	\$3,583,008	\$3,926,191	\$4,462,184	\$4,422,789	\$5,023,302	\$3,930,101	\$5,273,977
State	\$1,153,646	\$1,427,313	\$1,101,537	\$1,035,332	\$1,035,332	\$1,035,332	\$828,264
Local	\$9,348,009	\$8,515,115	\$8,548,090	\$5,183,448	\$8,984,429	\$4,729,205	\$7,229,458
Large Urban							
State	\$5,719,445	\$5,937,063	\$7,653,061	\$7,814,253	\$7,354,253	\$6,454,253	\$5,163,402
Local	\$6,838,196	\$1,287,355	\$1,526,021	\$1,585,401	\$1,432,068	\$1,465,401	\$1,187,800
TOTAL							
Federal	\$12,717,989	\$12,645,016	\$13,814,187	\$14,591,504	\$15,047,534	\$14,453,148	\$15,797,024
State	\$15,855,661	\$15,726,757	\$17,201,846	\$17,267,628	\$16,735,261	\$15,819,402	\$13,641,073
Local	\$31,945,609	\$25,381,298	\$27,138,511	\$23,757,712	\$26,808,292	\$26,018,238	\$23,232,942
Total	\$60,519,259	\$53,753,071	\$58,154,543	\$55,616,843	\$58,591,087	\$56,290,788	\$52,671,039

Figure 5-1: Total Operating Grant Awards (ADA, SSTAP and PTP), FY2015-FY2021



While the scope of this study did not include an assessment from the perspective of the Maryland Medicaid Transportation Grant Program or the local health departments that administer NEMT grants, the State’s Medicaid Transportation Grant Program provides nearly \$44 million statewide; only a small portion of this funding is available to the LOTS, as only 4 of the 23 LOTS have contracts to provide Medicaid NEMT.