

Blending Funding From Public and Private Sources

Presented by Jack Salo, Interim Executive Director, Rural Health Network of SCNY, CTAA, December 11, 2023

Jack Salo Consulting: jsaloconsult@gmail.com

Phone: 607 743 0120

Services Provide by Rural Health Network SCNY & Getthere – Mobility Management

Community Health:

- Community Health Education
- Community Health Worker
- Rural Aging Services

Food & Health Network:

- Produce Prescription Program
- Farm to School

Rural Health Service Corps:

- AmeriCorps
- VISTA

Rural Health Planning & Technical Assistance.

Getthere Mobility Management:

- **Call Center (7:00 Am – 5:30 Pm)**
- **Website Trip Planner**
<https://gettherescny.org/>
- **Connection to Care (Trans. To Health appts., primarily rural Medicare population)**
- **Travel Training**
- **Transportation to Employment**
- **Volunteer Driver (partnership with VTC, Watertown, NY)**
- **Medical Answering Service navigation (Medicaid appts.).**
 Complex system – users need help.

What Kind of Populations Do You Serve Most?

Getthere has a five county, predominantly rural service area in South Central New York, part of Northern Appalachia. Four of the five counties have populations of 50,000 or less. Broome County has a population of 200,000 and includes the City of Binghamton

- Rural
- Elderly
- Low Income
- Individuals with Disabilities

How Are Your Core Services Funded?

Revenue	Budgeted for Fiscal Year 2021-2022	Percentage of Total Budget
Getthere		
(FTA) 5311	343,160	32%
(FTA) 5311 CARES Act	167,357	16%
FTA 5310	140,795	13%
Connection To Care Funding	74,000	7%
Private sources of funding. Conservative proj.		
NYS Medicaid Reform Innovation Funding	25,966	2%
Medicaid voucher program, etc.		
ARC Transportation to Employment	75,000	7%
Appalachian Regional Commission Grant		
Dev. Dis. Planning Council (Travel Training)	137,150	13%
NYS grant to develop travel training curriculum		
Transportation to Employment Contracts	50,865	5%
Contracts with County Gov't (2 counties)		
Broome County COVID Grants	41,000	4%
Office for Aging Grants to support elderly		
RTAP (Fed Trans. Training & TA \$)	10,000	1%
Total	1,065,293	100%

The Percentages and funding mix changes each year:

- **Federal Transit Administration: 50% +**
- **Non-FTA Federal**, e.g. Appalachian Regional Commission: 0 – 20%
- **New York State** (Some NYS \$ and some pass through of federal funding, e.g., Medicaid Reform \$) 0 – 20%
- **Philanthropic & Getthere Rider Donations:** 6% - 8%
- **County Contracts:** e.g., transportation to employment; aging transportation services 5% - 10%

Are There Special Projects For Which You've Used Less Traditional Funding Sources?

Private Funding Used as Match to FTA 5311 – 5310 and Supporting Connection to Care:

- * **United Way Broome County** (\$35K)
- * **Chenango United Way** (\$16 K)
- * **Community Foundation For South Central NY** (\$25K a year for 5 years)
- * **Rider Donations** (\$5K - \$10K)
- * **Miscellaneous Donations:** (\$1K – 5K)

NYS DSRIP (Medicaid Reform) Innovation Funding, 2016 - 2018: \$225,808 to **expand Call Center hours; build website and trip planner, and provide social care transportation** (transportation to Medicaid population for rides to destinations that are not Medicaid eligible, e.g., to Rx, food, renewal of services and benefits.

Binghamton-Broome Anti-Poverty Initiative (Contract with United Way of Broome County, NYS funding). 2018 – 2019: \$169,000: This funding was used to purchase Two vans for transportation to employment services and to support related program expenses.

Tompkins County COVID-19 Vaccination Transportation Services: March 2021 – January 2022: Paid for service brokered plus 15%. Brokered transportation services for Tompkins County residents travelling to the Binghamton, NY State Vaccination Center.

For Those Non-Traditional Funders, How Did You Make The Connection With Them?

- “It’s All About Relationships”
- Local philanthropic, government and other private sector interests have a responsibility to provide meaningful financial support of mobility services to transportation disadvantaged populations: You need to make the case for their support.
- Stop looking only for “transportation funding” and start looking at the role transportation plays in all health, human service and economic activities. How can you access funding through non-transportation partners and non-transportation specific funding sources?

Do You See A Difference In How Different Funders Approach Funding Mobility & Transportation Services?

- **Federal Transit Administration:** The rock upon which you build your non-federal funding
- **Philanthropic Organizations:** Maintaining the health, mobility and independence of vulnerable populations. Look for alignment with their mission. Show leveraging of FTA\$
- **Local Government** (Primarily funding for older residents and transportation to employment services). Show leveraging of FTA \$
- **State Funding** (Special Projects)
- **Medicaid Reform** (Medicaid population – targeting access to “Social Care” or Social Determinants of Health destinations like food, benefits, etc.)