Shared Ride Advisory Committee (SRAC) – Meeting #4 Highlights

Overview

The Shared Ride Advisory Committee (SRAC) met for the fourth time on Thursday, October 22, 2026, from 9:30 am to noon. It is tasked with developing a sustainable funding and service delivery model for Pennsylvania's Shared Ride Program. During the meeting, members reviewed the high-level impacts of seven alternative models developed in response to feedback from previous meetings. The discussion narrowed the options to three models that account for annual inflation. Following the meeting, Committee members were asked to rank the three inflation-adjusted alternatives, while the shared ride service providers were tasked with providing a rationale for a more robust funding level.

Feedback Used to Develop Alternative Models

The committee feedback used to guide the development of the alternative models primarily revolved around two main themes:

1. **A Revised Funding Model** – restructure funding and policies of the current trip-based reimbursement model, transitioning to formula-based funding, or adopting a hybrid approach that combines the two.
2. **Demand Management** – ensure management has the tools to align available funding, service cost, and local priorities.

Data Sources and Key Insights

Data were compiled to identify service and demographic trends across Pennsylvania Share-Ride agencies and to inform comparisons among the alternative models. The analyses drew from *PennDOT's PennTD Fiscal Year End (FYE) 2025*, *FYE 2025 Merged Shared Ride Database* (combining Ecolane, PRT, and SEPTA data), and the *U.S. Census Bureau*. Key insights from these sources on service delivery and area demographics were presented to provide a snapshot of the current shared-ride environment.

- A large majority of shared-ride trips are provided Monday through Friday during the core service hours of 7 a.m. to 7 p.m.
- The lottery was the largest major funding source for demand response trips, followed by the Medical Assistance Transportation Program (MATP) and the Americans with Disabilities Act (ADA).
- Medical trips far outnumber trips for other purposes. Trips to senior centers and for employment are the next most common purposes.
- About 30 percent of shared-ride trips involved a passenger using a mobility device.

These are not an exhaustive list of insights, but rather a sample of the level of detail available upon request by Committee members. Results can be presented at the statewide or individual agency level.

Alternative Models Considered

The alternative models included in the comparisons of three fiscal year end (FYE) 2025 funding approaches—fare reimbursement, formula-based, and a hybrid of the two—and three funding levels: the FYE 2025 actual, removal of approximately $70 million in subsidies, and FYE 2025 actual, but adjusted by an annual inflation factor. The seven alternatives included:

- A.1 – Fare-based reimbursement without the current $70 million subsidy.
- A.2 – Fare-based reimbursement as it operates today (baseline).
- A.2 – Fare-based as it operates today, plus an annual inflation increase.
- B.2 – Hybrid of formula and fare-based reimbursement
- B.3 – Hybrid of formula and fare-based reimbursement plus an annual inflation increase.
- C.2 – Formula-based funding
- C.3 – Formula-based funding plus an annual inflation increase.

A comparison matrix presented quantitative and qualitative indicators for all alternatives. The inflation-adjusted formula-based funding model (C.3) offered the greatest potential to increase service hours and passenger trips, maximize local operators' flexibility, and minimize administrative complexity. These gains are expected to stem from operators' ability to increase demand through fare restructuring and by making shared-ride service less costly for unsubsidized travelers. However, this flexibility shifts more financial risk to shared-ride agencies, which must manage the costs of increased demand and potential revenue losses from programs that currently provide trip-based reimbursement.

Alternative Evaluation Discussion

Committee members were asked to comment on the alternatives to help narrow and refine them. Key discussion points included:

- The Committee agreed to eliminate alternatives that do not account for inflation: A.1, A.2, B.2, and C.2.
- Some members noted that a hybrid model may be somewhat challenging to set up but not necessarily more complex to administer in the medium term.
- Guidance was offered that the current Section 1513 grant for fixed-route operating funding could be used as a model for shared-ride formula funding.

- A proposal to combine the existing fixed-route operating grant and a potential shared-ride grant into a single grant that the transit agency could use at its discretion was provided. Concerns were raised that agencies might not adequately support shared-ride and that approach could trigger increases in local matching contributions.
- Concerns were raised about the flexibility shared-ride agencies would have under a formula-based funding model, including the potential for rapid fare increases in response to demand. The group agreed that a new formula model should include guidelines and oversight, particularly regarding fares. 1513 was provided as a potential model.
- It was cautioned that formula grants, if funded like many block grants (e.g., AAA), could be easier to reduce or not grow to account for inflation. A "hold harmless" component, like that in 1513 funding, would be an important element of a formula-based funding model.
- The Shared-Ride provider members agreed that the transit agencies should not be responsible for trip prioritization.
- It is difficult to estimate unmet demand for shared rides because of the current program restrictions and fare structure.
- Special consideration will be needed to assess how the alternatives and demand management tools might affect MATP-funding and trips—an impact not yet addressed in the modeling refinement.
- An idea was discussed that arose at the previous day's (10/21/2026) Shared Ride Summit organized by PPTA. The general concept was to provide employers with a tax credit for covering the transportation costs of employees with disabilities who commute using shared-ride services.
- Some trips, such as medical, may need to be provided outside of a locally defined service period, but not necessarily by shared-ride service.
- Shared-ride users have limited flexibility, particularly for medical appointments, so service availability restrictions should be carefully considered. The current trend of consolidating health services may limit provider availability and increase travel distances to appointments.

Action Items

Action items for Committee members to complete following the meeting include:

- Complete the online form to rank your preferred alternative models, excluding the models that do not account for future inflation.
- Shared-ride provider members were tasked with providing a rationale for a more robust funding level.