Tioga

Bradford

Susquehanna

Wyoming

Sullivan

**northern tier
regional planning &
development
commission**

Local Coordinated Transit Plan
2025

PREPARED BY:
Rockland Planning Inc.

Northern Tier Regional Planning & Development Commission
Local Coordinated Transit Plan – 2025

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Introduction

The Northern Tier Region

The Northern Tier region encompasses five counties in northeastern Pennsylvania: Bradford, Sullivan, Susquehanna, Tioga, and Wyoming. Three of the counties border New York State. The region is primarily rural with low population density. All five counties have public and private transportation services, with the more densely populated areas having a higher level of service. There are many private transportation services with most only offering one vehicle, but there are larger private services like Trojan Transport Inc, Lewis Bussing Inc, Brown Vans Service, and Wilson Transport Inc that offer twelve or more vehicles each. There are two public transportation agencies:

- **BeST** provides fixed route and shared-ride services in Bradford, Sullivan, and Tioga counties
- **Susquehanna–Wyoming County Transportation (SWCT)** provides shared-ride services in Susquehanna and Wyoming counties

The Northern Tier Regional Planning and Development Commission (NTRPDC) serves as the Rural Planning Organization for the Northern Tier. NTRPDC also leads the region's Rural Transportation Advisory Committee (RTAC).

About this Plan

This plan updates and amends the Coordinated Public Transit–Human Services Transportation Plan (referred to as the "Coordinated Plan") of the Northern Tier Regional Planning & Development Commission (NTRPDC). The last update occurred in 2018. Since then, the NTRPDC has collaborated with the region's public transportation and human service providers to implement improvements and use resources more efficiently and effectively.

Public transportation serves as a vital lifeline for many people, providing essential connections to medical appointments, food access, government services, and employment opportunities. Recognizing the critical need for reliable transportation among the region's most vulnerable populations, the Federal Transit Administration (FTA) mandates planning and coordination to enhance mobility for seniors, individuals with disabilities, veterans, and other clients of human services. To this end, the Fixing America's Surface Transportation (FAST) Act of 2015 expanded upon previous federal transportation legislation by requiring that all projects eligible for FTA funding be included in a Coordinated Public Transit–Human Services Transportation Plan (Local Coordinated Plan).

The FTA has established that Local Coordinated Plans must contain an assessment of available transportation services, whether public, private, or nonprofit; an evaluation of transportation options for seniors, individuals with disabilities, and low-income individuals; policies and projects to address gaps between existing services and future needs; as well as implementation priorities based on available resources, timelines, and feasibility.

The purpose of this plan is to help improve transportation services for individuals with disabilities, older adults, and low-income individuals in the region by creating a more coordinated transportation system.

For additional information on Federal Transit Programs used in this plan, see Appendix A.

Plan Approach

The Coordinated Plan was developed in coordination with key human service stakeholders, including:

- Public transit providers
- Human service agencies
- Veterans and Veteran groups
- Senior citizens and senior citizen groups
- Persons with disabilities and groups who represent and work with persons with disabilities

One-on-one interviews and focus group meetings were held with stakeholders to lay the groundwork for updating the transportation inventory. This process involved identifying key destinations in the region, defining the transportation challenges faced by human services clients across the five-county area, and developing strategies to enhance human services transportation. Additionally, a public survey was conducted to identify barriers in the transportation system further and to gather additional insights from riders regarding their needs, challenges, and desires related to accessing efficient and reliable transportation.

Demographic, economic, and travel pattern data were also collected, mapped, and analyzed.

All the gathered data was examined, and the transportation needs and gaps were identified and summarized. The result is a proposed action plan designed to address these identified needs and gaps.

NTRPDC considers all of the transit agencies, stakeholders, and project ideas listed in this Plan to be compliant with and eligible for subrecipient application for grant funds under 49 U.S.C. Section 5310 awarded at the discretion of the Federal Transit Agency and the Pennsylvania Department of Transportation (Enhanced Mobility of Seniors and Individuals with Disabilities grants).

Demographics

This section provides demographic highlights of the Northern Tier's five counties, as relevant to transit service. The Northern Tier region encompasses five counties in northeastern Pennsylvania: Bradford, Sullivan, Susquehanna, Tioga, and Wyoming. Three of the counties border New York State. The region is primarily rural with low population density. All five counties have public and private transportation services, with the more densely populated areas having a higher level of service. There are two public transportation agencies: BeST provides fixed-route and shared-ride services in Bradford, Sullivan, and Tioga counties; Susquehanna–Wyoming County Transportation (SWCT) provides shared-ride services in Susquehanna and Wyoming counties.

Total Regional Population Trends

Estimates from the US Census Bureau's 2023 Five-Year American Community Survey data indicate that the region's population stands at 171,322, a decrease of seven percent over the past ten years. Figure 1 displays a visual of this decline.

Figure 1: Regional 10-Year Population Trend, 2014–2023
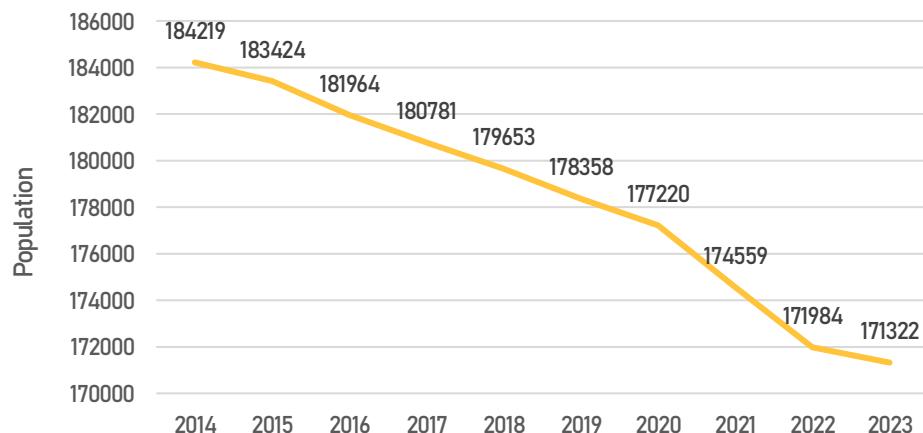
Source: U.S. Census Bureau, ACS 5-Year Estimates

As displayed in the table below, Bradford County is the most populous county in the region, followed by Tioga, Susquehanna, Wyoming, and, finally, Sullivan County, with a population of only 5,849 people.

Population forecasts indicate that the region's population is expected to decline to 156,282 by 2050, representing a 9.6 percent decrease from 2023. Each county in the Northern Tier region is projected to experience a population decline of over 3 percent, with the most significant decrease anticipated in Susquehanna County, which could experience a 15.6 percent decline. In contrast, Pennsylvania, as a whole, is expected to experience slight growth of approximately 3 percent between 2023 and 2050, according to estimates by Penn State University. Table 1 displays further population data for the region.

Table 1: Change in Population, 2014-2050 (Historic & Forecasted)

	2014	2019	2023	2050	5-Year Change (2019-23)	10-Year Change (2014-23)	Forecasted Change (2023-50)
Bradford	62,510	60,963	59,971	57,080	-1.7%	-4.2%	-5.1%
Sullivan	6,400	6,135	5,849	5,663	-4.9%	-9.4%	-3.3%
Susquehanna	42,708	40,970	38,349	33,184	-6.8%	-11.4%	-15.6%
Tioga	42,358	40,944	41,078	37,011	+0.3%	-3.1%	-11.0%
Wyoming	28,229	27,327	26,075	23,344	-4.8%	-8.3%	-11.7%
Region	184,219	178,358	171,322	156,282	-4.1%	-7.5%	-9.6%
Pennsylvania	12,758,729	12,791,530	12,986,518	13,384,960	+1.5%	+1.8%	+3.0%

Source: U.S. Census Bureau, ACS 5-Year Estimates; Penn State University

Figure 2 shows a visual representation of the Northern Tier's regional population using figures from the U.S. Census Bureau (2020) and forecasted population estimates from Penn State University (2030, 2040, and 2050). The population is expected to continue to decline.

Figure 2: Regional Population, 2020-2050 (Historic & Forecasted)
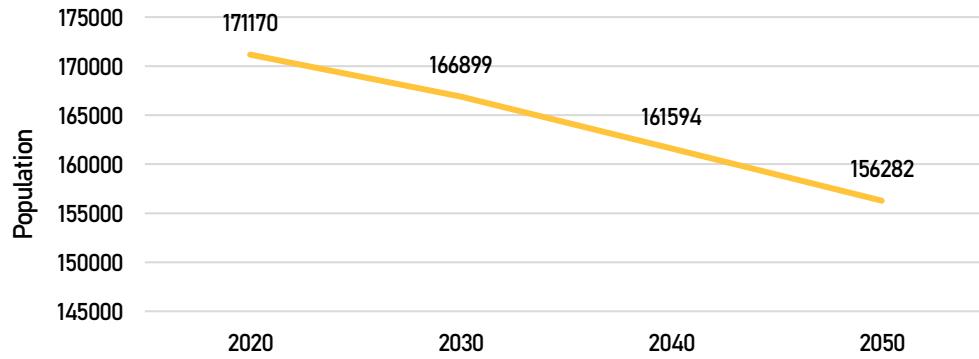
Source: U.S. Census Bureau, ACS 5-Year Estimates; Penn State University

Population Density

Public transportation operates most effectively in areas with high population density and understanding population density is essential for developing public and human service transportation. Bradford County covers 1,147.4 square miles of land area and is the 2nd largest county in Pennsylvania by total area. Tioga County has 1,133.9 square miles of land area and is the 4th largest county in Pennsylvania by total area. Despite the large land areas, the population density throughout these two counties and the rest of Northern Tier is much lower than the Pennsylvania average. In 2023, the region's population density was 43 individuals per square mile, well below the statewide average of 290. The highest population density is in Wyoming County with 66 persons per square mile. Sullivan County's population density is the lowest in the region with only 13 persons per square mile (Table 2).

Table 2: Population Density, 2023

	Population		Land Area		Density
	Total Population	Percent of the Regional Population	Total Land Area (Sq. Mi.)	Percent of Regional Land Area	Persons per Square Mile
Bradford	59,971	35.0%	1,147.4	29.0%	52.3
Sullivan	5,849	3.4%	449.9	11.4%	13.0
Susquehanna	38,349	22.4%	823.5	20.8%	46.6
Tioga	41,078	24.0%	1,133.9	28.7%	36.2
Wyoming	26,075	15.2%	397.3	10.1%	65.6
Region	171,322		3,952		43.4
Pennsylvania	12,986,518		44,742.1		290.3

Source: U.S. Census Bureau, ACS 5-Year Estimates

Figure 3 illustrates the highest populated municipalities in the Northern Tier Region.

Figure 3: Population Density by Municipality, 2023
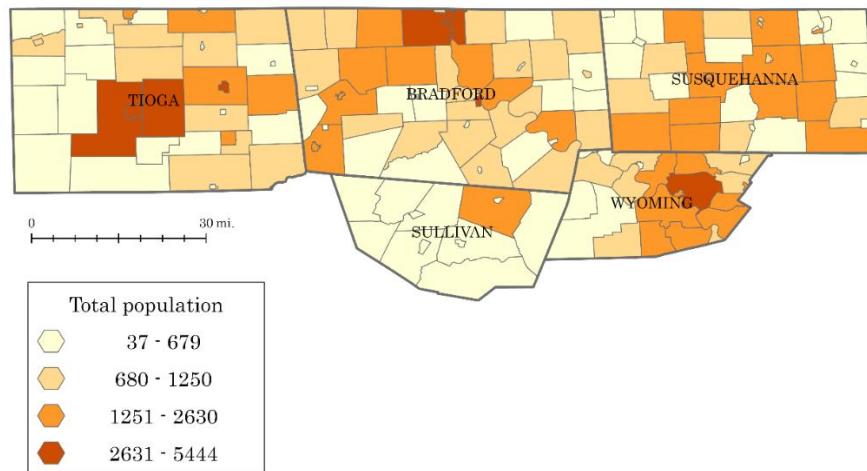
Source: U.S. Census Bureau, ACS 5-Year Estimates

Population 65 Years and Older

The statewide population of people over the age of sixty-five is estimated to be 2,476,241, or nearly one in five people (19.1 percent). In the Northern Tier Region, the percentage of senior citizens is slightly higher, at 22.7 percent. Sullivan County in particular has the region's highest proportion of seniors at 30.4 percent, exceeding the statewide average by over ten percentage points. All five counties within the region have a higher percentage of residents aged sixty-five and older compared to the statewide average. By county, the municipalities with the highest concentrations of seniors are:

- **Bradford County** – Townships of Athens and Ridgebury with the Boroughs of Athens, Sayre, Towanda (29.1 percent)
- **Sullivan County** - Townships of Cherry and Elkland (34.9 percent)
- **Susquehanna County** – Townships of Bridgewater, Clifford, Lenox, New Milford and Forest City Borough (29.2 percent)
- **Tioga County** – Townships of Charleston, Delmar, and Richmond and Boroughs of Mansfield and Wellsboro (40.9 percent)
- **Wyoming County** – Townships of Eaton, Falls, Nicholson, and Tunkhannock and Tunkhannock Borough (24.2 percent)

Figure 4 illustrates the senior population in the Northern Tier over the last decade compared to forecasted senior populations through 2050. At the last census in 2023 the senior population was 39,802. Penn State University forecasts the senior population in 2030 to be 50,496, an increase of 26.9 percent increase in seven years. The senior population is then expected to decline. However, the 2040 predicted senior population is still higher than the most recent census. Penn State predicts that by 2050, the senior population will fall even lower than the population in 2014 with an estimated 31,312 seniors living in the Northern Tier.

Figure 4: Regional Population Aged 65 Years and Older, 2014–2050 (Historic & Forecasted)
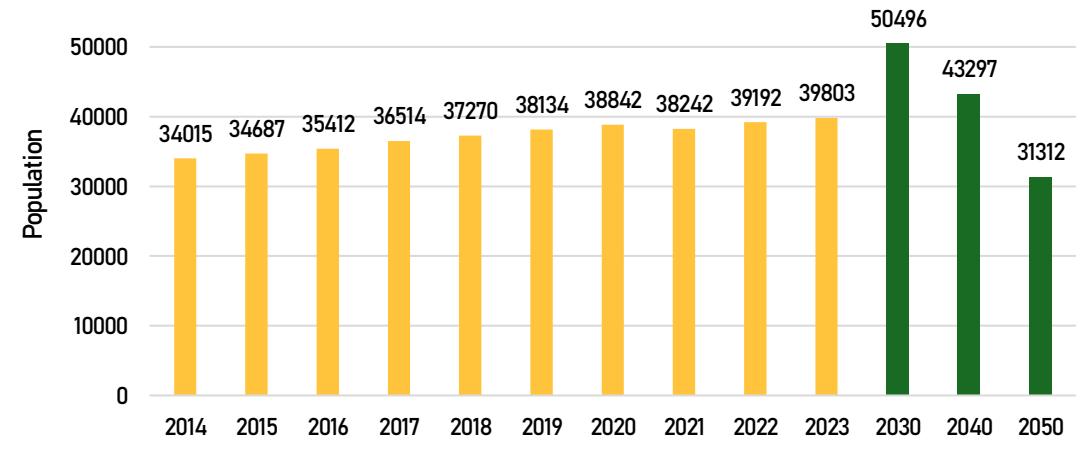
Source: U.S. Census Bureau, ACS 5-Year Estimates, Penn State University

Senior populations can also overlap with other groups, such as disadvantaged populations including those with a disability and those living in poverty. In the Northern Tier Region, 31 percent of the senior population is disabled. The highest percentage of seniors with a disability in the Northern Tier reside in Tioga County (33.1 percent). Statewide the percentage of senior citizens with a disability is 31.8 percent.

Senior populations in the region generally fall above the poverty line, however 9.2 percent of the region's seniors are living below the poverty level. Bradford County seniors have the highest percentage of individuals living below the poverty level at 11.5 percent, which is two percentage points higher than the Pennsylvania average of 9.4 percent. Table 3 displays further analysis into the senior population in the Northern Tier.

Table 3: Senior Population, 2023

	Total Population	Total Senior Population	Percent of Population Aged 65+	Percent of Seniors with a Disability	Percent of Seniors Below Poverty Level
Bradford	59,971	13,252	22.1%	30.5%	11.5%
Sullivan	5,849	1,781	30.4%	27.1%	7.1%
Susquehanna	38,349	9,482	24.7%	31.9%	7.9%
Tioga	41,078	9,442	23.0%	33.1%	7.7%
Wyoming	26,075	5,846	22.4%	28.4%	8.8%
Region	171,322	39,803	22.7%	31.0%	9.2%
Pennsylvania	12,986,518	2,476,241	19.1%	31.8%	9.4%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Figure 5 illustrates the municipalities within the region that have the highest population density of residents aged 65 and older.

Figure 5: Population Aged 65 Years and Older, 2023
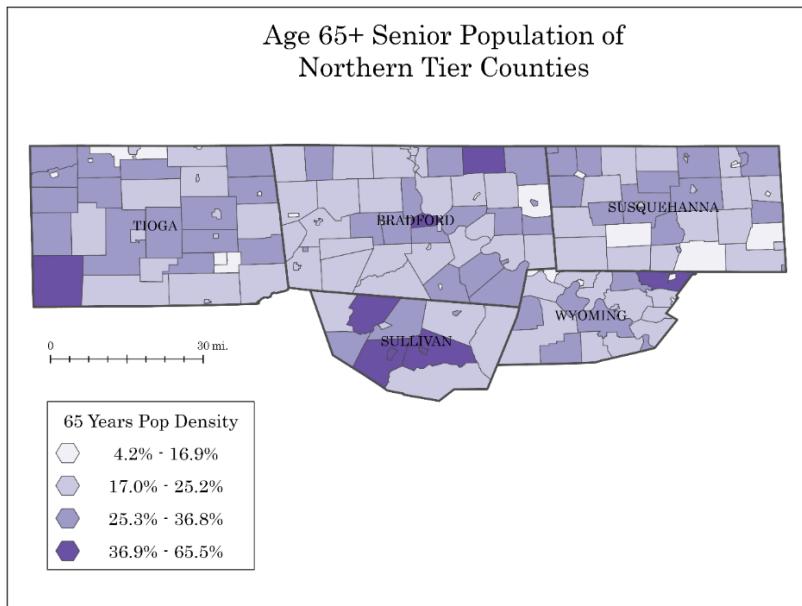
Source: U.S. Census Bureau, ACS 5-Year Estimates

The region also has a high number of seniors who live alone. On average, Pennsylvania has an estimated 235,619 households with a senior living alone. This equates to about 4.5 percent of households. The Northern Tier region however, has an average of 6.2 percent of homes with a senior citizen living alone. Table 4 displays further statistics on seniors living alone in the region.

Table 4: Households with a Senior Living Alone, 2023

	Total Number of Households	Number of Households with a Senior Living Alone	Percent of Households with a Senior Living Alone
Bradford	24,487	1,463	6.0%
Sullivan	2,536	201	7.9%
Susquehanna	15,639	1,036	6.6%
Tioga	16,639	938	8.3%
Wyoming	10,892	681	6.3%
Region	70,193	4,319	6.2%
Pennsylvania	5,235,339	235,619	4.5%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Low-Income Population

Low-income households are more likely to depend on public transportation because they may be unable to afford a vehicle. Compared to the statewide percentage of the population living in poverty (10.6 percent), Bradford and Tioga Counties exceed the statewide percentage. Bradford County's population has 12.2 percent living in poverty. In Tioga County, 11.2 percent of the population live in poverty. The regional impoverished population is also 11.2 percent, just slightly higher than the statewide rate of impoverished population. These figures are shown in Table 5.

Table 5: Poverty Status in the Last Year Between Ages 18–64, 2023

	Total Population Between 18–64	Population in Poverty Between 20–64	Percentage of Population in Poverty Between 20–64
Bradford	32,322	3,952	12.2%
Sullivan	3,336	341	10.2%
Susquehanna	20,958	2,200	10.5%
Tioga	22,328	2,491	11.2%
Wyoming	14,494	1,464	10.1%
Region	93,438	10,448	11.2%
Pennsylvania	7,476,572	795,626	10.6%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Figure 6 illustrates the municipalities with the highest percentage of population in poverty between the ages of 18 and 64.

Figure 6: Poverty Status in the Last Year Between Ages 18–64, 2023
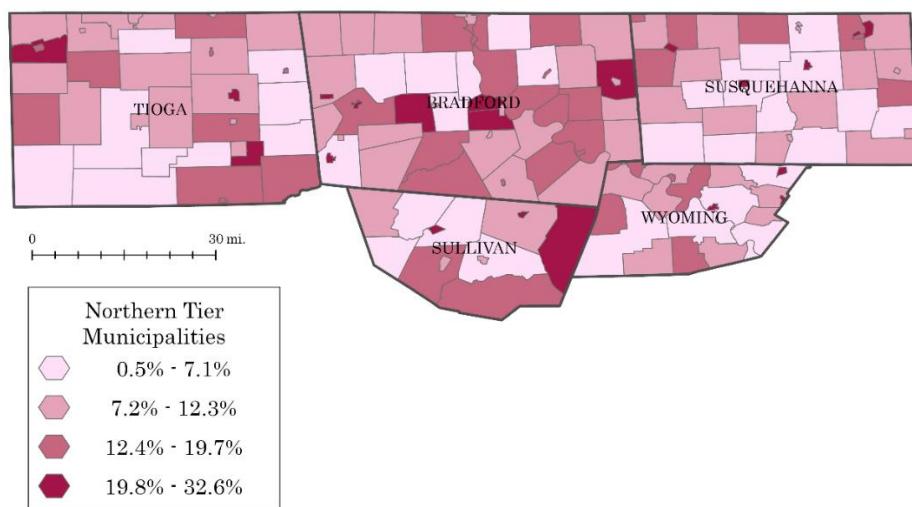
Source: U.S. Census Bureau, ACS 5-Year Estimates

Individuals with Disabilities

As part of the ACS, a person is considered to have a disability if they report experiencing any of the following six types of disabilities: hearing difficulty, vision difficulty, cognitive difficulty, ambulatory difficulty, self-care difficulty, or independent living difficulty. Individuals who fall into one or more of these categories may have a greater reliance on public transportation due to the challenges associated with driving. This group may also be eligible for transit fare discounts. It is important to note that being categorized this way does not necessarily imply that individuals face additional hardships affecting their mobility; it simply indicates a greater potential for mobility challenges compared to other groups.

The region's share of individuals with a disability is 26,846 (15.7 percent) one and a half percentage points higher than the statewide average (14.2 percent). Among the five counties, Tioga County has the highest percentage (18.4 percent) of persons with disabilities, but Bradford County has the highest number of persons with a disability (8,630). Wyoming County has the lowest percentage of persons with disabilities (14.1 percent), but Sullivan has the lowest population of persons with a disability (892). Table 6 displays statistics on the region's noninstitutionalized population with a disability.

Table 6: Total Civilian Noninstitutionalized Population with a Disability, 2023

	Noninstitutionalized Population with a Disability	Percent of Population with a Disability
Bradford	8,630	14.5%
Sullivan	892	15.7%
Susquehanna	6,195	16.3%
Tioga	7,487	18.4%
Wyoming	3,642	14.1%
Region	26,846	15.7%
Pennsylvania	1,820,613	14.2%

Source: U.S. Census Bureau, ACS 5-Year Estimates

By county, the municipalities with the highest percentage of persons with disabilities:

- **Bradford County** – North Towanda Township (23.5 percent)
- **Sullivan County** – Davidson Township (21.8 percent)
- **Susquehanna County** – Townships of Jessup (26.2 percent) and Thompson (25.0 percent)
- **Tioga County** –Elk Township (54.1 percent)
- **Wyoming County** – Townships of Nicholson (23.3 percent) and Windham (23.0%)

Figure 7 displays a map of the noninstitutionalized population with a disability living in the region.

Figure 7: Noninstitutionalized Population with Disability, 2023
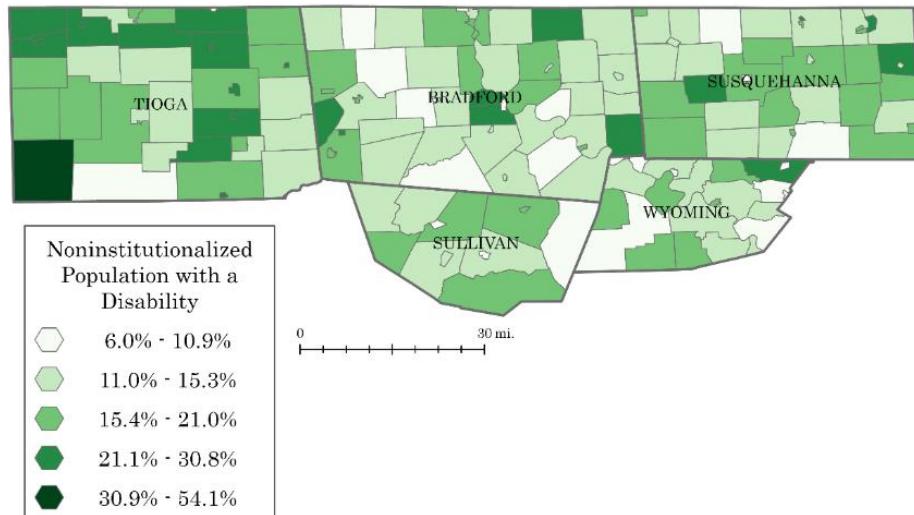
Source: U.S. Census Bureau, ACS 5-Year Estimates

Veteran Population

Veterans often experience transportation barriers due to service-related disabilities, limited mobility, or the need to travel long distances to reach Veterans Affairs (VA) facilities and specialized care. In rural areas such as the Northern Tier, these challenges are no exception. The percentage of veterans in the five-county region at 7.2 percent is slightly higher than the statewide average of 6.4 percent. Tioga County has the highest percentage of veterans (10.7 percent), followed by Sullivan County (9.1 percent).

Additionally, the region's rate of veterans with a disability is 29 percent, which is nearly double the statewide average of 16.6 percent. Tioga County has the highest percentage of veterans that are disabled at 32.2 percent. The lowest percentage of disabled veterans is in Sullivan County, but even there, one in four veterans is disabled.

Alternatively, when reviewing the regional share of veterans living in poverty, the Northern Tier has a smaller percentage of veterans that are below the poverty line (7.1 percent) compared to the statewide rate (10.7 percent). The only county in the region that has a higher percentage of low-income veterans is Bradford County where 12.2 percent of veterans are in poverty. Table 7 displays data related to veterans in the region.

Table 7: Veteran Population, 2023

	Civilian Population Over the Age of 18	Veteran Population	Percent of Population that are Veterans	Percent of Veterans with a Disability	Percent of Veterans with Low-Income
Bradford	46,663	4,036	8.6%	27.3%	12.2%
Sullivan	5,254	500	9.5%	25.1%	7.7%
Susquehanna	31,121	2,817	9.1%	29.3%	6.9%
Tioga	32,957	3,517	10.7%	32.2%	7.8%
Wyoming	21029	1,538	7.3%	29.2%	8.7%
Region	137,024	12,408	7.2%	29.0%	7.1%
Pennsylvania	10,303,342	656,112	6.4%	16.6%	10.7%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Figure 8 shows the veteran population in the Northern Tier Region.

Figure 8: Veteran Population
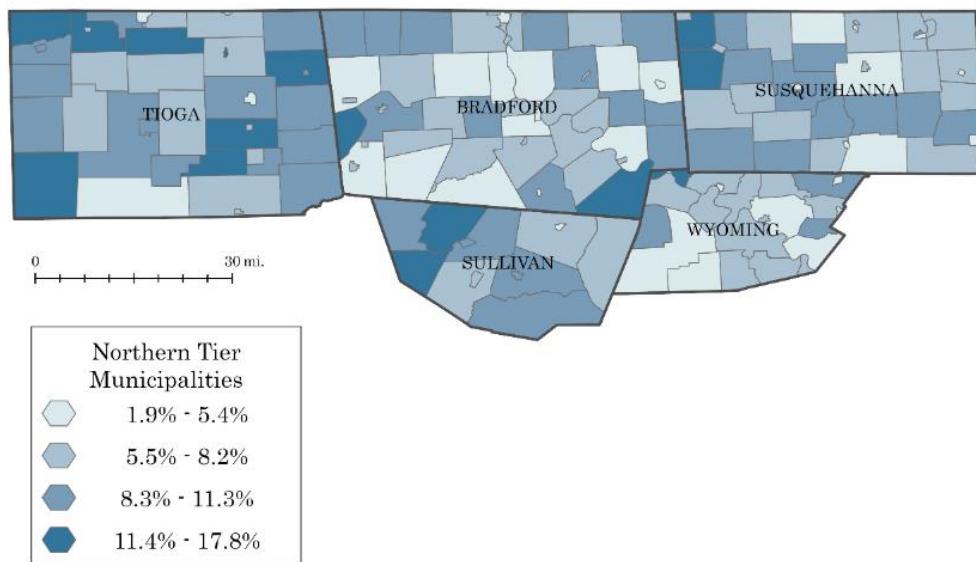
Source: U.S. Census Bureau, ACS 5-Year Estimates

Vehicle Availability

In the Northern Tier, the percentage of households with no vehicle is estimated to be about 6.1 percent. Overall, all five counties have a lower percentage of households without a vehicle compared to the statewide average of 10.5 percent. Bradford County has the highest number of households and percentage of households without a vehicle in the region at 7.7 percent. The higher vehicle availability in the region could be a correlation to the lack of available public transportation. Table 8 displays the region's statistics on households without access to a vehicle.

By county, the municipalities with the highest percentages of households with no vehicle access are:

- **Bradford County** – North Towanda Township (16.3 percent)
- **Sullivan County** – Dushore Borough (27.2 percent)
- **Susquehanna County** – Oakland Township (16.6 percent)
- **Tioga County** – Westfield Township (7.2 percent)
- **Wyoming County** – Exeter Township (12.1 percent)

Table 8: Households with No Vehicle Available, 2023

	Occupied Households	Households without a Vehicle	Percent of Households without a Vehicle
Bradford	24,487	1,879	7.7%
Sullivan	2,536	129	5.1%
Susquehanna	15,639	788	5.0%
Tioga	16,639	915	5.5%
Wyoming	10,892	591	5.4%
Region	70,193	4,302	6.1%
Pennsylvania	5,235,339	547,253	10.5%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Limited English Proficiency Households

Pennsylvania's percentage of Limited English Proficient (LEP) households is 4.7 percent. The percentage in the Northern Tier is much lower at only 0.7 percent. Sullivan County has the highest percentage of limited English Proficiency households at 1.2 percent, which is still quite low. See Table 9 for more information on the LEP households in the region.

Table 9: Limited English-Speaking Population, 2023

	Population Aged 5 and Older	Population that Speaks Non-English at Home*	Percentage of Population that Speaks Non-English at Home*
Bradford	56,626	429	0.8%
Sullivan	5,691	68	1.2%
Susquehanna	36,527	266	0.7%
Tioga	39,041	240	0.6%
Wyoming	24,867	162	0.7%
Region	162,752	1,165	0.7%
Pennsylvania	12.301,139	580,080	4.7%
* Over 5-Years-Old and Do Not speak English Well			

Source: U.S. Census Bureau, ACS 5-Year Estimates

Figure 9 displays a visual of the regional LEP population by county.

By county, the municipalities with the highest percentages of LEP households are:

- **Bradford County** – Orwell Township (2.5 percent)
- **Sullivan County** – Colley Township (5.4 percent)
- **Susquehanna County** – Rush Township (4.3 percent)
- **Tioga County** –Charleston Township (2.3 percent)
- **Wyoming County** – Braintrim Township (5.1 percent)

Figure 9: Distribution of Regional LEP Population by County
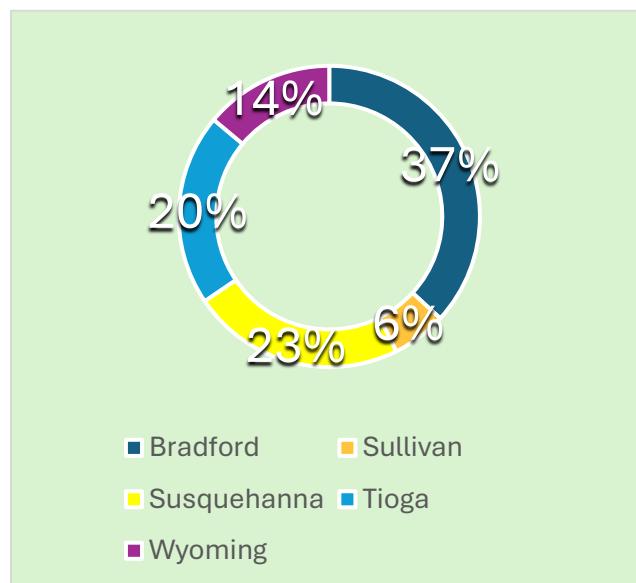
Female Head of Household with Children

This ACS dataset includes female-headed households in which no husband is present, specifically those with at least one child under the age of 18. This includes biological children, stepchildren, or adopted children residing with the householder. The inclusion of this factor in the plan is based on its demonstrated correlation with transit dependency. In the region, there are a total of 2,274 such households, accounting for 3.2 percent of the population, which is comparatively lower than the statewide rate of 4.7 percent. Sullivan County reports the lowest figures, with 37 households, representing only 1.5 percent of the local population. Bradford County reports the highest figures with 915 households, representing 3.7 percent of the local population, which is still lower than the statewide average of 4.7 percent as shown in Table 10.

Table 10: Households Headed by Single Females with Children, 2023

	Total Households	Households Held by Female Householder, No Husband Present, with Own Children Under 18 Years-Old	
		Number	Percentage
Bradford	24,487	915	3.7%
Sullivan	2,536	37	1.5%
Susquehanna	15,639	440	2.8%
Tioga	16,639	588	3.5%
Wyoming	10,892	294	2.7%
Region	70,193	2,274	3.2%
Pennsylvania	5,235,339	244,264	4.7%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Non-Hispanic Minority Population

The MPO adhered to the USDOT's Order 5610.2(a) regarding Environmental Justice when defining "minority" populations.[1] According to this order, "minority" refers to individuals who are:

- Black: a person having origins in any of the black racial groups of Africa
- Hispanic or Latino: a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race
- Asian American: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent
- American Indian and Alaska Native: a person having origins in any of the original people of North America, South America (including Central America), and who maintains cultural identification through tribal affiliation or community recognition
- Native Hawaiian and Other Pacific Islander: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

The U.S. Census Bureau does not classify Hispanic or Latino as a racial category, since it is an ethnicity; people of Hispanic origin can belong to any racial group. However, the Census Bureau does include two other categories in its race data: Some Other Race Alone and Two or More Races.

Identifying the locations and needs of minority communities is essential for ensuring equitable access to transportation. These communities often experience disparities in infrastructure, safety, and resources. The total regional population for this analysis was 171,322, with 6,103 individuals identified as minorities, comprising 3.6 percent of the population. Among the five counties, Sullivan has the highest proportion of minority residents at 4.2 percent and Tioga has the lowest proportion of minority residents at 3.1 percent. A comparison of these statistics can be seen in Table 11.

Table 11: Non-Hispanic Minority Population, 2023

	Total Population	Total Non-Hispanic/Latino Minority Population	
		Number	Percentage
Bradford	59,971	2,322	3.9%
Sullivan	5,849	247	4.2%
Susquehanna	38,349	1,223	3.2%
Tioga	41,078	1,271	3.1%
Wyoming	26,075	1,040	4.0%
Region	171,322	6,103	3.6%
Pennsylvania	12,986,518	2,313,333	17.8%

Source: U.S. Census Bureau, ACS 5-Year Estimates

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[1] This order has since been rescinded, as of January 21, 2025

Hispanic or Latino Minority Population

As noted previously, the USDOT views Hispanic or Latino individuals as part of a minority group, while the U.S. Census Bureau acknowledges that Hispanic or Latino is technically classified as an ethnicity, with individuals of Hispanic origin potentially belonging to any race. Data related to Hispanic-origin populations is used in many social justice initiatives and plays a crucial role in shaping policy decisions. There may be a link between Hispanic origin and reliance on public transportation. Moreover, Hispanic migrant or seasonal workers who occasionally live in the area might depend on public transit.

The 2023 data presents the total Hispanic minority population in the region: individuals, regardless of their race, who identify as Mexican, Puerto Rican, Cuban, or of any other Hispanic, Latino, or Spanish origin. The percentage of the Hispanic minority population in the region is 1.9 percent, significantly less compared to the state average of 8.4 percent. Wyoming and Sullivan Counties have the largest percentages of total Hispanic/Latino populations, though it still is a very small percentage at 2.3 percent. Table 12 shows more information on the Hispanic or Latino population in the region.

Table 12: Hispanic or Latino Population, 2023

	Total Population	Total Hispanic or Latino Population (of any race)	
		Number	Percentage
Bradford	59,971	942	1.6%
Sullivan	5,849	117	2.0%
Susquehanna	38,349	875	2.3%
Tioga	41,078	670	1.6%
Wyoming	26,075	612	2.3%
Region	171,322	3,216	1.9%
Pennsylvania	12,986,518	1,087,732	8.4%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Access to Technology

Access to technology can be a barrier for citizens in the Northern Tier in their attempts to use public transportation. Without access to the internet, either at home or while on-the-go, residents do not have as many avenues to access route information and must rely on landline phones to make travel arrangements. In Pennsylvania, it is estimated that 88.8 percent of the state's population has an internet subscription. The regional average is slightly lower, at 86.3 percent. Sullivan County has the lowest rates of technological access as only 81.5 percent of households have an internet subscription and only 60.9 percent have a cellphone with a data plan. Within Pennsylvania, 81 percent of households have a cellphone with a data plan, and the region has an average of 72.7 percent, proving that technology access is particularly limited in this region. Table 13 provides more information on the region's access to technology.

Table 13: Access to Technology, 2023

	Total Number of Households	Number of Households with Internet Subscriptions	Percent of Households with Internet Subscriptions	Households with Cellular Data Plans	Percent of Households with Cellular Data Plans
Bradford	24,487	20,808	85.0%	17,155	70.1%
Sullivan	2,536	2,066	81.5%	1,545	60.9%
Susquehanna	15,639	13,773	88.1%	12,053	77.1%
Tioga	16,639	14,428	86.7%	12,076	72.6%
Wyoming	10,892	9,491	87.1%	8,187	75.2%
Region	70,193	60,566	86.3%	51,016	72.7%
Pennsylvania	5,235,339	4,647,572	88.8%	4,240,177	81.0%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Employment

Key business and community activity hubs are distributed throughout the region. These hubs act as significant destination points or origins for various trips. Notable attractions include employers, healthcare facilities, large retail businesses and shopping malls, educational institutions, and governmental offices. Data from the PA Department of Labor & Industry's Center for Workforce Information & Analysis was used to pinpoint major employers in each county. The information is sourced from the 4th Quarterly Census of Employment and Wages, Q4 2024 (see Table 14). By comparing the locations of these employers with areas that show higher transit-dependent characteristics insights can be gained into probable travel patterns and destinations for individuals relying on public transportation to fulfill their mobility needs.

Table 14: Major Employers, 4th Quarter 2024

Rank	Bradford County	Sullivan County	Susquehanna County	Tioga County	Wyoming County
			Employer Name		
1	Robert Packer Hospital Inc	State Government	Montrose Area School District	UPMC Wellsboro	The Procter & Gamble Paper Products
2	C1argill Meat Solutions Corporation	Highlands Rehabilitation and Health	Barnes-Kasson County Hospital	Northern Tioga School District	Exel Inc
3	Guthrie Medical Group PC	Sullivan County School District	Endless Mountains Health Systems	Ward Manufacturing LLC	Tunkhannock Area School District
4	The Guthrie Clinic	Adams & Associates Inc	State Government	Westlake Management Services Inc	Wal-Mart Associates Inc
5	Jeld-Wen Inc	Arbor E & T LLC	Elk Lake School District	PA State System of Higher Education	Williams WPC-I Inc
6	GTP Corp	Darway Nursing Care Center LLC	Susquehanna County	State Government	Manpower US Inc
7	Dandy Mini Marts Inc	Eagles Mere Country Club	Blue Ridge School District	Wal-Mart Associates Inc	Lackawanna Trail School District
8	Wal-Mart Associates Inc	Sullivan County	Mountain View School District	Southern Tioga School District	Wyoming County
9	Bradford County	North Mountain Supply	Forest City Regional School District	Tioga County	State Government
10	Athens Area Schools	Dwight Lewis Lumber Company	Susquehanna Community School District	Wellsboro Area School District	Meshoppen Stone Inc

Source: PA Department of Labor & Industry's Center for Workforce Information & Analysis, Quarterly Census of Employment and Wages, 4th Quarter 2024; Federal and State Government Entities Aggregated

According to the Longitudinal Employer-Household Dynamics (LEHD) Quarterly Workforce Indicators (QWI) for the first quarter of 2024, the region had a total of 46,969 jobs. The distribution of jobs by county reflects the population distribution, with Bradford and Tioga counties together comprising 59 percent of the region's total population and 63 percent of its total employment (see Table 15).

Table 15: Beginning of Quarter Employment Counts, 2024

	Jobs	Percentage of Regional Total	Total Population	Percent of the Regional Population
Bradford	19,453	41.4%	59,971	35.0%
Sullivan	1,229	2.6%	5,849	3.4%
Susquehanna	7,314	15.6%	38,349	22.4%
Tioga	10,143	21.6%	41,078	24.0%
Wyoming	8,830	18.8%	26,075	15.2%
Region	46,969	100%	171,322	
Pennsylvania	5,329,711	N/A	12,986,518	

Source: U.S. Census Bureau. QWI Explorer. Longitudinal Employer-Household Dynamics Program 2024

Table 16 displays the Northern Tier Region's Unemployment statistics as of April 2025.

Table 16: Local Area Unemployment Statistics, April 2025

	Employed	Unemployed	Unemployment Rate
Bradford	25,400	900	3.5%
Sullivan	2,600	100	3.5%
Susquehanna	16,600	700	4.0%
Tioga	17,400	700	3.6%
Wyoming	11,900	500	3.7%
Region	73,900	2900	3.9%

Source: PA Department of Labor & Industry, Bradford, Sullivan, Susquehanna, Tioga, & Wyoming County Profiles, May 2025; U.S. Census Bureau, ACS 5-Year Estimates

Means of Transportation to Work

In the five-county region, the majority of the population (workers 16 years of age and older) drove to work alone. Susquehanna County has the lowest percentage of workers who drive alone (76.3 percent) and Sullivan County has the highest (80.8 percent). All counties in the region exceeded Pennsylvania's rate of workers who drive alone (69.6 percent). As the COVID-19 pandemic has lessened its impact on work arrangements, many workers have returned to in-person jobs, although 13.8 percent of the state's population continues to work from home. In contrast, only 8.4 percent of the region's workforce is working remotely, with Susquehanna County having the highest share at 12.5 percent. More information on the means of primary transportation to work appears in Table 17.

Table 17: Means of Primary Transportation to Work

	Bradford	Sullivan	Susq	Tioga	Wyo	NT	PA
Car, truck, or van	87.5%	87.0%	83.9%	86.5%	89%	86.7%	77.2%
Drove alone	79.0%	80.8%	76.3%	79.4%	80.5%	78.8%	69.6%
Carpooled	8.5%	6.2%	7.6%	7.1%	8.5%	7.9%	7.6%
2-person carpool	7.1%	5.4%	6.3%	5.4%	7.1%	6.5%	5.9%
3-person carpool	0.8%	0.7%	0.6%	0.8%	0.5%	0.7%	1.0%
4-or-more person carpool	0.6%	0.1%	0.7%	0.9%	0.8%	0.7%	0.7%
Workers per car, truck, or van	1.06	1.04	1.05	1.05	1.05	1.05	1.06
Public transportation (excluding taxicab)	0.1%	0.1%	0.4%	0.4%	0.1%	0.2%	3.9%
Walked	4.5%	3.8%	2.4%	4.8%	2.5%	3.8%	3.3%
Bicycle	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.4%
Taxicab, Motorcycle, or Other Means	0.8%	2.9%	0.7%	0.9%	0.6%	0.8%	1.3%
Worked at home	7.1%	6.2%	12.5%	7.3%	7.7%	8.4%	13.8%
Brad=Bradford County, Sul=Sullivan County, Sus=Susquehanna County, Tio=Tioga County, Wyo=Wyoming County, NT=Northern Tier Region, PA=Pennsylvania							

Source: U.S. Census Bureau, ACS 5-Year Estimates

Travel Time to Work

The mean travel time to work, measured in minutes, represents the average time that workers take to commute from home to their workplace (one way).

The time workers spend commuting serves as an indicator of the spatial distribution of where they live in relation to their workplaces. Changes in commuting times can also provide insights into community characteristics, such as shifts in workforce participation rates, improvements in infrastructure, and variations in the availability and use of different transportation modes. Table 18 compares the mean travel time to work for the region's workers by county, contrasted with that of the state.

Overall, commute times for Northern Tier workers are similar. The majority of workers in the region (63.8 percent) have a commute time of less than 30 minutes. For most, travel time to work is between 10 and 29 minutes (ranging from 33.4 percent in Sullivan County to 49.3 percent in Wyoming County). The percentage of commute times exceeding 60 minutes ranged from 5.8 percent in Wyoming County to 12.6 percent in Sullivan County, which is 4.2 percent higher than the Pennsylvania average of workers that travel over an hour to work.

Table 18: Mean Travel Time to Work

	Bradford County	Sullivan County	Susquehanna County	Tioga County	Wyoming County	Region	PA
Mean Travel time to work (minutes)	24.1	30.6	26.7	25.1	26.3	25.5	26.6
Less than 10 minutes	21.3%	20.3%	16.3%	20.5%	14.1%	18.8%	13.3%
Between 10 – 29 minutes	45.0%	33.4%	42.6%	45.9%	49.3%	45.0%	49.2%
Between 30 - 59 minutes	27.6%	33.7%	33.6%	25.9%	30.8%	29.2%	29.1%
60 or more minutes	6.1%	12.6%	7.5%	7.7%	5.8%	7.0%	8.4%

Source: U.S. Census Bureau, ACS 5-Year Estimates

Commutation Patterns

Most Northern Tier workers have jobs in Pennsylvania; however as a region that borders another state, there are a number of workers who commute to destinations out-of-state. Sullivan County had the highest percentage of in-state workers (98.9 percent) and Susquehanna County had the lowest percentage (82.0 percent) of workers employed within the state, followed by Bradford County at 83.5 percent. Table 19 displays the place of work for residents in the Northern Tier Region.

Table 19: Place of Work, 2023

	Bradford County	Sullivan County	Susquehanna County	Tioga County	Wyoming County	Region	PA
Worked in state of residence	83.5%	98.9%	82.0%	87.0%	98.5%	87.0%	95.5%
Worked in the county of residence	75.3%	56.8%	54.4%	77.0%	55.7%	67.3%	73.5%
Worked outside county of residence	8.2%	42.2%	27.5%	10.0%	42.9%	19.7%	22.0%
Worked outside state of residence	16.5%	1.1%	18.0%	13.0%	1.5%	13.0%	4.5%

Source: U.S. Census Bureau, ACS 5-Year Estimates

As expected, each county's largest commute destination is within the county of residence. This analysis uses Longitudinal Employer-Household Dynamics (LEHD) data and includes the top five commuting locations for each of the five counties.

Bradford County leads the region with 61.9 percent of resident workers employed within the county where they live. In contrast, Wyoming County has the lowest percentage of such workers, at 38.8 percent.

The data on commuting patterns reveals that the highest percentage of resident workers commuting to another county also comes from Wyoming County, where 13.6 percent of residents travel to neighboring Luzerne County for work. Additionally, the highest total number of resident workers commuting to a neighboring county is 1,420, with Bradford County residents traveling to Tioga County in New York for employment. Table 20 shows the distribution of journey-to-work trips by county, underscoring the importance of transportation to the region's economy and connecting workers to employment opportunities.

Table 20: Top Five Commute Destinations by County, 2022

Resident County	Commuting County	Number of Commuters	Percentage of Resident County Commuters
Bradford County	Bradford County, PA	13,445	61.9%
	Tioga County, NY	1,420	6.5%
	Tioga County, PA	1,009	4.6%
	Chemung County, NY	927	4.3%
	Luzerne County, PA	403	1.9%
Sullivan County	Sullivan County, PA	654	50.9%
	Bradford County, PA	149	11.6%
	Lycoming County, PA	124	9.6%
	Luzerne County, PA	53	4.1%
	Columbia County, PA	23	1.8%
Susquehanna County	Susquehanna County, PA	5,242	60.4%
	Lackawanna County, PA	823	9.5%
	Broome County, NY	401	4.6%
	Wyoming County, PA	381	4.4%
	Wayne County, PA	325	3.7%
Tioga County	Tioga County, PA	7,448	61.0%
	Bradford County, PA	764	6.3%
	Lycoming County, PA	550	4.5%
	Steuben County, NY	385	3.2%
	Potter County, PA	317	2.6%
Wyoming County	Wyoming County, PA	3,501	38.8%
	Luzerne County, PA	1,224	13.6%
	Lackawanna County, PA	1,059	11.7%
	Susquehanna County, PA	944	10.5%
	Bradford County, PA	650	7.2%

Source: U.S. Census Bureau. OnTheMap. Longitudinal Employer-Household Dynamics Program 2022

Existing Transportation Services

Introduction

There are several primary transportation services in the Northern Tier's five-county region. The primary services include traditional public transportation, emergency medical services transportation for non-emergency medical services, taxi services, and hospital related transportation. The region also has agency/organization transportation programs. summarizes the primary transportation services.

Transit Terminology

- **Fixed-route service** operates along a predefined route and time schedule (regular bus service)
- **Deviated fixed route** is service that operates a prescribed base route on a designated fixed schedule but can deviate off course to destinations and origins as requested or reserved by rider
- **Shared-ride service** is point-to-point pick-up and drop-off transportation services requiring passengers to share the vehicle with other riders and make advance reservations
- **Intercity bus service** is a public service that is regularly scheduled and operates on a designated path with limited stops and typically uses over-the-road vehicles which generally have elevated passenger decks and luggage compartments. Typically, the service operates on arterial roadways connecting between or to urbanized areas

Traditional Public Transportation Services and Fare Programs

The traditional public transportation services available in the Northern Tier are fixed route, deviated fixed route, shared ride. Table 21 lists transportation services by county as well as public transportation fare programs.

Table 21: Traditional Public Transportation Services and Fare Programs

	Bradford County	Sullivan County	Susquehanna County	Tioga County	Wyoming County
Transportation Services					
Intercity Passenger Rail	No	No	No	No	No
Intercity Passenger Bus	No	No	No	No	No
Fixed Route Bus (including deviated fixed route)	Yes	Yes	No	Yes	No
Fixed Route Rail	No	No	No	No	No
Shared-Ride/Demand-Response	Yes	Yes	Yes	Yes	Yes
Fare Programs					
Senior Fixed Route Free Transit	Yes	Yes	No	Yes	No
ADA Complementary Paratransit	Yes	Yes	No	Yes	No
Persons with Disabilities Fixed Route Half-Fare Program	Yes	Yes	No	Yes	No
Senior Paratransit Discount	Yes	Yes	Yes	Yes	Yes
Persons with Disabilities Paratransit Discount	Yes	Yes	Yes	Yes	Yes

Source: Bureau of Public Transportation

Transit Operator Profiles

There are two traditional public transportation agencies in the Northern Tier. Endless Mountains Transportation Authority doing business as BeST (Bradford, Sullivan, and Tioga Transit) provides fixed route, deviated fixed route and shared-ride services in Bradford, Sullivan, and Tioga counties. Susquehanna–Wyoming County Transportation (SWCT) operates shared-ride services in Susquehanna and Wyoming counties.

BeST Transit

BeST Transit (formerly the Endless Mountains Transportation Authority) is the public transportation provider serving the rural counties of Bradford, Sullivan, and Tioga in north-central Pennsylvania. Established in 1985, BeST Transit has played a critical role in connecting rural communities in the mountainous, low-density region. The agency delivers accessible and affordable transportation options that support mobility for all residents – especially older adults, persons with disabilities, and individuals with low incomes—through coordinated services and partnerships with human service agencies.

Headquartered in Athens, with additional service centers located in Towanda and Wellsboro, BeST Transit operates a mix of fixed-route/deviated-fixed route and demand-response services. The organization is overseen by a board of directors led by the Executive Director. BeST Transit currently has 70 employees agency wide. Table 22 shows a breakdown of employees and the vehicle fleet. The agency coordinates closely with local government, regional planners, and human service organizations to ensure services remain responsive to community needs.

Table 22: BeST Agency Statistics

	FY 2022	FY 2023	FY 2024
Employees			
System–Wide	70	70	70
Agency Full–Time	52	52	52
Agency Part–Time	18	18	18
Fleet Size			
System–Wide	66	66	68
Diesel/Gasoline Motor Bus	13	13	13
Diesel/Gasoline Paratransit Vehicle	52	52	55
CNG Paratransit Vehicle	1	1	0

Source: Pennsylvania Public Transportation Annual Performance Reports FY 2022, 2023, 2024

According to the Federal Transit Authority's (FTA) most recent data, BeST fare revenue has increased 37 percent between 2022 and 2023. Expenses for BeST also show an increase between 2022 and 2023, but at only 15.5 percent. In 2023, about 49.3 percent of operating funds came from fare revenue, whereas in 2022, only 41.6 percent of operating funds came from fare revenue, and even smaller yet, 36.8 percent in 2021. Fare revenue reflects the impacts of COVID and recovery from those impacts. This financial data can be found in Table 23.

Table 23: BeST Transit Revenue, Expenses, and Operating Funds

	2022	2023	2024
Revenues			
Total Fare Revenue	$2,172,603	$2,976,184	$2,901,377
Fixed-Route Fare Revenues	$41,455	$111,166	$112,281
Shared-Ride	$2,131,148	$2,845,722	$2,789,096
Expenses			
Total Expenses	$5,217,553	$6,027,755	$7,005,536
Fixed-Route	$1,852,367	$1,961,782	$2,354,307
Shared-Ride	$3,365,186	$4,065,973	$4,651,229
Source of Operating Funds			
Total Operating Funds Expended	$5,217,553	$6,027,755	$7,005,536
Federal	$1,334,103	$1,700,000	$1,900,006
State	$1,214,877	$1,267,255	$2,065,537
Local	$80,301	$84,316	$97,098
Directly Generated	$2,588,272	$2,976,184	$2,942,895

Source: Federal Transit Administration NTD Transit Agency Profiles 2022-2024

Fixed-Route and Deviated Fixed-Route Service

BeST Transit offers fixed-route bus service throughout Bradford and Tioga counties, with limited service in Sullivan County. These routes are open to the general public and provide consistent weekday transportation along scheduled loops and corridors. The service connects many of the region's boroughs and townships including Sayre, Athens, Towanda, Troy, Canton, Mansfield, and Wellsboro.

The fixed-route system routes are designed to link high-demand destinations like hospitals, shopping plazas, social service agencies, and employment centers. A list of these destinations is shown in Table 25. Seasonal routes via the Mountie Express also provide expanded access to Mansfield University, including on weekends, offering students and staff a reliable alternative to personal vehicles. More route information can be found in Table 24.

Table 24: Summary of BeST's Fixed Route and Deviated Fixed Route Services

Route Description	County	Span of Service	Number of Daily Departures
Bradford and Sullivan County Routes			
Route 1 – Work Express *Athens, Sayre, Towanda*	Bradford	5:15 – 9:12 a.m. / 4:40 – 6:00 p.m.	8
Route 10 – Valley Loop *Athens, Sayre, Waverly*	Bradford	8:05 a.m. – 4:40 p.m.	9
Route 11 – Towanda/Valley Connector *Towanda, Valley*	Bradford	9:12 a.m. – 4:00 p.m.	7
Route 12 – Towanda Loop *Athens, Ulster, Towanda*	Bradford	8:30 a.m. – 4:00 p.m.	7
**Route 15 – Sullivan County *Towanda, Dushore*	Bradford Sullivan	6:00 a.m. –6:00 p.m.	12
Route 16 – Sullivan County *Dushore, Mildred, Laporte*	Bradford Sullivan	8:20 a.m. – 3:30 p.m.	5
Route 20 – Towanda-Troy-Canton *Athens, Canton, Troy, Sayre, Ulster*	Bradford	5:40 a.m. to 5:45 p.m.	3
**Route 25 – Towanda-Wysox-Wyalusing *Towanda, Wyalusing, Wysox, Ulster*	Bradford	6:00 a.m. to 6:00 p.m.	13
Tioga County Routes			
Route 30 – Mansfield-Wellsboro *Mansfield, Blossburg, Wellsboro,*	Tioga	6:25 a.m. to 6:16 p.m.	11
**Route 45 – Mansfield-Lawrenceville-Wellsboro *Knoxville, Elkland, Nelson, Lawrenceville, Tioga Junction,*	Tioga	6:00 a.m. to 6:00 p.m.	2
*Route 80 – Mountie Express (MU Shuttle) *Mansfield University, Mansfield*	Tioga	M–F 7:30 a.m. – 3 p.m. / 5-10 p.m. Sat & Sun 5-10 p.m.	M–F 23 Sat. & Sun. 10

*Route 80 operates only during the school year and is the only route that runs on weekends

**Deviated / Off-route arrangements can be made for those under the ADA that live within ¾ mile of the fixed route, or others that live within ¼ mile of the route for curbside pickup at twice the cost of the fare

Table 25: BeST Transit Important Bus Stops

Healthcare Providers/Suppliers	Specialized Housing	Shopping/Essential Errands	Other Important Locations	
Hospitals	**Housing for Elderly or Disabled Persons**	**Food Shopping**	**County Offices**	**Employers/Employment Centers**
Guthrie Robert Packer Hospital – *Troy, Sayre, & Towanda*	McCallum Manor – *Canton*	Walmart – *Mansfield, Sayre*	*Bradford County* Action,	The Main Link – *Towanda*
Soldiers & Sailors/UPMC *Wellsboro*	Sullivan Terrace – *Dushore*	Family Dollar – *Lawrenceville, Towanda, Dushore, Troy*	*Bradford County* Assistance Office	Dupont – *Towanda*
Sullivan County Community Hospital – *Laporte*	Page Manor – *Athens*	Tops Friendly Market – *Troy, Canton*	Housing Authority– *Tioga County, Bradford County*	Global Tungsten & Powders – *Towanda*
Health Centers	Park Place – *Wyalusing*	Dandy Mini Mart – *Ulster, Monroeton, New Albany, Mildred, Troy*	*Tioga County* Human Services	PA Careerlink – *Towanda*
Guthrie Health Centers – *Canton, Wellsboro*	Keystone Manor – *Sayre*	Ashi's Market - *Towanda*	*Tioga County* Veteran Affairs	Penn York Opportunities - *Athens*
Laurel Health Centers – *Troy, Blossburg, Wellsboro*	Chemung View Apartments - *Athens*	Kwik Fill – *Dushore, Tioga Junction, Tioga*	Courthouse – *Bradford, Sullivan County*	SERVE Inc. – *Monroe*
Rehab & Intermediate Care Facilities	Forestview Manor – *Elkland*	Hurley's Fresh Market – *Dushore*	*Sullivan County* Mattern Building	Highland Chocolate Factory– *Wellsboro*
Smith's Personal Care Home - *Wyalusing*	Park Hill Manor – *Wellsboro*	Pump & Pantry– *Tioga, Dushore*	Central *Bradford County* Chamber of Commerce	**Other Community Destinations**
Bradford Hills Nursing and Rehabilitation – *Burlington*	**Housing for Low-Income Individuals**	Dollar General – *Mansfield, Dushore, Canton*	*Tioga County* Health Department	Potter-Tioga Library System
Martha Lloyd Intermediate Care Facility– *Troy*	Elizabeth Square – *Waverly, NY*	Connie's Supermarket – *Wyalusing*	Social Security Office – *Bradford County, Towanda*	St. Francis Senior Center
Highlands Healthcare and Rehabilitation Center – *Laporte*	Wilbur House - *Sayre*	Pen-Mart – *Wyalusing*	WIC – *Towanda*	Township/Borough Building – Ulster, Tioga
Pharmacies	Gateway Commons - *Athens*	Dollar Tree - *Towanda*	*Tioga County* Health Department	River Valley YMCA (Mansfield Inn)
Brown's Pharmacy – *Troy*	Overton Apartments - *Dushore*	**Other Shopping**	*B/S/S/T* Area Agency on Aging – *Towanda*	Montessori Children's Center
Rite Aid - *Towanda*	Colonial Towers - *Towanda*	Bloss Hardware - *Blossburg*		DMV – *Wellsboro, Laporte*
CVS – *Mansfield, Towanda*	Towanda Terrace - *Towanda*	Baldwin's Hardware - *Canton*		Post Office– Knoxville, Osceola, Lawrenceville, Canton, Wellsboro
Counseling	Hillcrest Apartments - *Troy*	Sinclair's Hardware - *Dushore*		Concern
Northern Tier Counseling - *Towanda*	Wyalusing Meadows - *Wyalusing*	Agway - *Dushore*		C&N Bank – Laporte, Knoxville
Crossroads Counseling – *Wellsboro*	Riverside Manor - *Blossburg, Westfield*	Wilson's Supply Center- *Wellsboro*		First Citizen's Bank – Mansfield
Harbor Counseling – *Wellsboro*	Wapiti Apartments - *Elkland*	Label Shopper - *Towanda*		
Other		Goodwill– *Wellsboro, Elkland*		
Sullivan County Dental Clinic – *Laporte*				

Source: BeST Transit Website

All buses are ADA-compliant and equipped to serve passengers with mobility impairments. Seniors aged 65 and older ride free on fixed-route services with a valid senior ID card, while children under five also ride for free with an accompanying adult. BeST Transit strives to keep fares affordable. The last fare increase was in July 2005. Fixed-route fare information for the general public can be found in Table 26.

Table 26: BeST Fixed-Route Fares

BeST Transit General Public Fixed Route Fares and Passes	
*Fares are based on the number of zones you travel	
One Zone Fare	$1.00
Two or More Zone Fare	$2.00
All-You-Can-Ride Pass	$4.00
Reduced Fare Tickets	
10-Ride Ticket – One Zone	$8.00
10-Ride Ticket – Two or More Zones	$16.00
40-Ride Ticket – One Zone	$28.00
40-Ride Ticket – Two or More Zones	$56.00
*Fare is Doubled for Deviated Routes	

Source: BeST Transit Website

According to the Public Transportation Annual Performance Reports released by PennDOT, there was a large increase (21.9 percent) in total passengers between FY 2022-23. This trend, however, did not continue into FY 2024 where the ridership showed a slight decline of 2.3 percent. Despite the decline in total passengers, the senior ridership has shown an increase year-to-year. In FY 2024, senior citizens took an additional 671 trips on BeST fixed-route services. A similar increase of 623 senior passenger trips was experienced the year prior. Additional performance metrics including operating expenses and revenue can be found in the Table 27.

Table 27: BeST Fixed Route and Deviated Fixed Route Data Summary

	FY 2022	FY 2023	FY 2024
Service Data			
Total Passengers	66,504	81,065	79,189
Senior Passengers	10,063	10,686	11,357
Revenue Vehicle Miles	507,278	528,917	556,807
Revenue Vehicle Hours	22,730	23,392	24,050
Performance Metrics			
Total Fixed-Route Operating Expense	$1,898,000	$2,030,000	$2,400,000
Total Ridership per Revenue Vehicle Hour	2.93	3.47	3.29
Operating Expense per Passenger	$28.54	$25.04	$30.31
Operating Expense per Revenue Vehicle Hour	$83.50	$86.78	$99.79
Total Fixed-Route Operating Revenue	$41,455	$111,166	$112,281
Operating Revenue per Revenue Vehicle Hour	$1.82	$4.75	$4.67

Source: Pennsylvania Public Transportation Annual Performance Reports FY 2022, 2023, and 2024

Shared-Ride Service

In addition to fixed-route service, BeST Transit provides shared-ride services that offer door-to-door service for the general public. This service is particularly vital for those living in outlying rural areas, where fixed routes are not feasible due to low population density or geographic barriers. Riders schedule trips in advance, by 11:00 a.m. on the previous business day, and vehicles are routed daily to accommodate the reserved trips by picking up and dropping off passengers along optimized paths. Discounted shared-ride fares are available to individuals age 65 and older, persons with disabilities, and Medical Assistance recipients. These discounts are supported by state and federal funding sources, including the Pennsylvania State Lottery, the Medical Assistance Transportation Program (MATP), and PennDOT.

BeST's shared-ride services support a wide range of trip purposes like non-emergency medical appointments and pharmacy visits, grocery and other shopping, senior center activities, and banking.

Service is available Monday through Friday, with some exceptions for out-of-county medical trips on designated days that can be found in Table 28.

Table 28: BeST between Counties and Out-of-County Shared-Ride Services

	Monday	Tuesday	Wednesday	Thursday	Friday
Bradford County/Sullivan County to Tioga County	✓	✓	✓	✓	✓
Tioga County to Bradford County/Sullivan County	✓	✓	✓	✓	✓
Owego, NY, Binghamton, NY, Coudersport	✓				
Scranton/Wilkes-Barre, Elmira, Williamsport, and Danville		✓			
Williamsport and Danville			✓		
Bath, Elmira, Williamsport, and Danville				✓	

Source: BeST Transit Website

Fares are mileage based. Unsubsidized fares for the general public range from $20.00 to $50.00 per one-way trip. Cost-sharing and funding structures are in place to keep fares low for those that qualify for fare discount programs. The fare structure for BeST is displayed in Table 29 below.

Table 29: BeST Shared-Ride Fare Structure

Zone	Distance (miles)	One-Way Fare	85% PennDOT Share	15% Agency Share	PwD Copay	AAA Boarding Fee	Trip Cost to AAA
1	0.00-4.99	$20.00	$17.00	$3.00	$3.00	$1.00	$2.00
2	5.00-8.99	$23.30	$19.80	$3.50	$3.50	$1.00	$2.50
3	9.00-13.99	$30.00	$25.50	$4.50	$4.50	$1.00	$3.50
4	14.00+	$41.65	$35.40	$6.25	$6.25	$1.00	$5.25
5	Inter-County	$50.00	$42.50	$7.50	$7.50	$1.00	$6.50
6	Out-of-County	$50.00	$42.50	$7.50	$7.50	$1.00	$6.50

Source: BeST Transit Website

Comparing FY 2023-24, every category experienced an increase. The average shared-ride fare increased from $34.18 to $34.79, or by 1.8 percent. The total number of shared ride trips increased from 66,753 to 73,326, or by 9.8 percent. Operating expenses increased by 16.3 percent. The average cost per trip also increased by 5 percent. Table 30 displays further data on BeST's shared-ride service.

Table 30: BeST Shared-Ride Data Summary

	FY 2022	FY 2023	FY 2024
Fare vs. Cost			
Average Shared-Ride Fare	$33.89	$34.18	$34.79
Average Shared-Ride Cost per Trip	$54.57	$59.89	$62.86
Fare Structure Implementation Date	February 2018		
Trip Data			
65+ Trip	28,354	32,028	33,551
PwD Trips	5,892	5,906	6,062
Other Shared-Ride Trips	26,580	28,819	33,713
Total Shared-Ride Trips	60,826	66,753	73,326
Non-Public Trips	1,299	859	1,244
Operating Expenses			
Estimated Total	$3,961,000	$4,237,000	$4,927,000

Source: Pennsylvania Public Transportation Annual Performance Reports FY 2022, 2023, and 2024

Susquehanna Wyoming Community Transportation (SWCT)

SWCT and Its Role Within Trehab

Susquehanna-Wyoming County Transportation (SWCT) is not a standalone transit agency. It is operated by Trehab which is responsible for several vital programs servicing Susquehanna and Wyoming counties. Trehab is a long-established Community Action Agency serving a seven-county region in northeastern Pennsylvania. As part of Trehab, SWCT benefits from a broader organizational mission that centers on empowering individuals and families, promoting self-sufficiency, and addressing poverty through coordinated service delivery.

Founded in 1965 as part of the national War on Poverty, Trehab provides a wide array of human services including workforce development, housing assistance, energy conservation, addiction recovery, re-entry services, and community outreach. Its integrated, client-centered model allows SWCT to serve as more than just a transportation provider; it acts as a bridge between vulnerable residents and the full spectrum of support services available through Trehab and its partners.

Additionally, the shared administrative structure allows SWCT to benefit from Trehab's organizational capacity in areas such as grant management, planning, compliance, and public outreach. This helps ensure that transportation services remain sustainable, effectively marketed, and aligned with evolving community needs. Trehab's longstanding presence in the community also builds trust and awareness among residents, many of whom are more likely to engage with services when they are connected through a familiar and trusted organization.

Shared-Ride Service

SWCT exclusively operates shared-ride transportation, meaning multiple passengers with similar travel needs may be grouped into the same vehicle for efficiency. Trips must be scheduled at least two business days in advance, allowing dispatchers to plan routes that accommodate several passengers while minimizing travel time.

The shared ride service uses accessible vans and vehicles operated by trained drivers, many of whom assist passengers with mobility limitations or other special needs. The service operates within county boundaries and, on designated days, to out-of-county destinations such as regional medical centers in Scranton, Wilkes-Barre, or Binghamton, NY, depending on the trip type and funding eligibility. Table 31 displays the service days, hours, and areas offered by SWCT.

Table 31: SWCT Service Days and Service Area by County

Service Days	Appointments Can Be Accommodated During the Following Hours	Service Area
Wyoming County Service		
Mon – Fri	8 a.m. – 4 p.m.	Tunkhannock to Tunkhannock
	11 a.m. – 1 p.m.	Tunkhannock to Noxen, Falls
	Arrive 8 a.m., 9 a.m., or 1 p.m. Return 12 p.m. or 3 p.m.	Mehoopany, Meshoppen, Laceyville to Tunkhannock
Mon, Wed, Fri	10 a.m. and 1 p.m. – 2:30 p.m.	Nicholson, Factoryville to Tunkhannock
Tues, Fri	10 a.m. to 12 p.m.	Wyoming County to Scranton
Tues	9 a.m. to 11 a.m.	Wyoming County to Wilkes-Barre
Susquehanna County Service		
Mon – Fri	7 a.m. – 4 p.m.	Montrose to Montrose
	7 a.m. – 4 p.m.	Susquehanna to Susquehanna
	9 a.m. – 12 p.m.	Susquehanna, Hallstead, New Milford to Montrose
	9:30 a.m. – 12:30 p.m.	Susquehanna, Forest City, Clifford to Carbondale
	1:30 p.m.	Forest City, Clifford to Greenfield Twp
	10 a.m. – 12 p.m.	Montrose, New Milford, Hop Bottom to Scranton, Dunmore
	10 a.m. – 12 p.m.	Harford, Kingsley, Hop Bottom to Montrose
	10:30 a.m.	Friendsville to Montrose
Mon, Wed, Fri	10 a.m. – 12 p.m.	Hallstead, Susquehanna, Thompson, Forest City to Scranton, Dunmore
	Arrive at 10:30 a.m. Return at 11:30 a.m. or 3 p.m.	Montrose to Tunkhannock
Wed, Fri	1:00 p.m. – 2:30 p.m.	Forest City, Clifford to Susquehanna
Tues, Thurs	9 a.m. – 11 a.m.	Montrose to Vestal, JC, Bing
Tues	10:00 a.m.	Susquehanna County to Wilkes-Barre
Wed	Arrive at 9 a.m. or 10 a.m. Return at 11 a.m. or 12 p.m.	Susquehanna, Hallstead, New Milford to Vestal, JC, Bing

Source: SWCT Website

Like other transit agencies, SWCT participates in a variety of state and federal funding programs including the Senior Shared-Ride Program, Medical Assistance Program, and Persons with Disabilities program to make shared-ride services more affordable for individuals who qualify for a funding program. Shared-ride services are available to the general public at full fare. Riders may pay fares using cash, tokens, or vouchers. Trehab staff assists with program enrollment and trip coordination. The fare structure can be seen in Table 32.

Table 32: SWCT's Shared-Ride Fare Structure

			Seniors 65+		PwD (18-64)	
Zone	Distance (miles)	Full Fare	Senior Co-Pay	PennDOT Share	PwD Co-Pay	PennDOT Share
1	0-2.9	$16.65	$2.50	$14.15	$2.50	$14.15
2	3-7.9	$26.65	$4.00	$22.65	$4.00	$22.65
3	8-14.9	$36.65	$5.50	$31.15	$5.50	$31.15
4	15-25.9	$46.65	$7.00	$39.65	$7.00	$39.65
5	26-35.9	$66.65	$10.00	$42.50	$10.00	$42.50
6	36+	$100.00	$15.00	$42.50	$15.00	$42.50

Source: PennDOT

Overall, SWCT's shared-ride services saw some decline between FY 2023 and 2024. There was a slight decline of 1.3 percent of total shared-ride trips. However, there was an increase of 2.3 percent in the number of trips taken by seniors. The cost per trip in FY 2024 increased from the prior year by $3.57, or 10.1 percent. Despite the increased cost per trip, the overall operating expense for shared-ride services decreased by 0.9 percent for FY 2024. Table 33**Error! Not a valid bookmark self-reference.** further summarizes shared-ride data.

Table 33: SWCT Shared-Ride Data Summary

	FY 2022	FY 2023	FY 2024
Costs			
Average Shared-Ride Fare	$34.53	$35.23	$35.27
Average Shared-Ride Cost per Trip	$36.16	$35.42	$38.99
Fare Structure Implementation Date	March 2019		
Trip Data			
65+ Trip	15,903	15,559	15,924
PwD Trips	5,605	7,302	6,870
Other Shared-Ride Trips	10,991	11,651	11,284
Total Shared-Ride Trips	32,499	34,512	34,078
Non-Public Trips	14,941	15,341	13,738
Operating Expenses			
Estimated Total	$1,733,000	$1,874,000	$1,857,000

Source: Pennsylvania Public Transportation Annual Performance Reports FY 2022, 2023, and 2024

Intercity Bus Services

Due to the rural nature of the Northern Tier, intercity bus services are limited. Subsidized Pennsylvania Intercity Bus Services are provided by Fullington Trailways, Greyhound where unsubsidized carrier routes are also provided by: Adirondack Trailways, Martz, New York Trailways, Trans-Bridge Lines, and Peter Pan Bus Lines. The services closest to the Northern Tier are operated by Fullington Trailways with pickup stops in neighboring counties. Luzerne County, neighbor of Sullivan and Wyoming counties, has stops in Dallas and in Wilkes-Barre. Lackawanna County, a neighbor of Susquehanna and Wyoming counties, has a stop in Scranton. Scranton is also serviced by Greyhound. Lycoming County, a neighbor of Bradford, Sullivan, and Tioga county has stops in Hughesville and Williamsport. Figure 10 includes a map of the Northern Tier region's relationship to the availability of intercity bus service available in Pennsylvania.

Figure 10: Intercity Bus Service Routes in Pennsylvania

Emergency Medical Services that Provide Non-Emergency Medical Transportation

Emergency Medical Services (EMS) providers play an important, but often under-recognized role in meeting non-emergency medical transportation (NEMT) needs across the Northern Tier. While their primary mission is to respond to urgent, life-threatening situations, many EMS agencies in the region also offer scheduled wheelchair or stretcher transport for individuals who require medical supervision or mobility assistance to reach routine healthcare appointments. These trips typically include transport to dialysis, wound care, cancer treatments, hospital discharges, rehabilitation centers, and specialized medical appointments that cannot be safely served by standard demand-response paratransit. NEMT services can place strain on already limited staffing and resources. Many agencies operate with volunteer or part-time personnel, and high demand for medical trips can reduce the availability of units for emergency response. A table has been compiled below of the EMS that have the capacity to complete occasional NEMT.

Table 34: Northern Tier EMS Services with NEMT

County	
Bradford	Guthrie EMS – Sayre Greater Valley Emergency Medical Services – Sayre Western Alliance Emergency Services – Troy H.O.P.S. Ambulance Association – Wyalusing
Sullivan	Dushore Fire-Rescue – Dushore Eagles Mere Volunteer Fire Company – Eagles Mere
Susquehanna	Susquehanna Fire Department – Susquehanna, PA Forest City EMS United Fire Company – Montrose Great Bend Hose Co – Great Bend Clifford Township Volunteer Ambulance – Clifford
Tioga	Wellsboro Firemen's Ambulance Association – Wellsboro Mansfield Ambulance – Mansfield Blossburg Fire & Ambulance – Blossburg Lawrenceville Fire Department – Lawrenceville Tioga Ambulance – Tioga
Wyoming	Tunkhannock Ambulance – Tunkhannock Lake Winola Fire Co. Ambulance – Lake Winola Meshoppen Volunteer Ambulance – Meshoppen

Taxi, Limousine, & Private Car Companies

Like other transportation services in the region, taxi and private car transportation services are extremely limited.

Canyon Country Cabs, Wellsboro

Canyon Country Cabs is a family owned and operated taxi and limousine service that is based out of Wellsboro in Tioga County. The business writes that they are regulated by the Pennsylvania Public Utility Commission and the Federal Department of Transportation on their website. The service "strives to provide safe, reliable, dependable on-demand transportation to customers in Tioga & Potter County, Troy, &

Canton" – with hopes to expand services in the future. Canyon Country Cabs is a drug/alcohol free workplace and drivers employed by Canyon Country Cabs are required to pass a criminal background check, obtain child abuse clearances, and maintain a clean driving record.

Canyon Country Cabs operates seven days a week with varying hours. Monday through Thursday, rides can be accommodated between the hours of 6:00 a.m. and 9:00 p.m. Extended hours are offered on Fridays and Saturdays, with operations from 6:00 a.m. through 3:00 a.m. On Sundays, Canyon Country Cabs have limited operating hours from 9:00 a.m. until 5:00 p.m. The rates for booking a ride are as follows:

- **Start Fee =** $2.35
- ***Per Mile =** $1.85
- **Minute Waiting =** $1.00
- ***Airport Trip Rates =** $2.00/mile

Canyon Country Cabs also offers a frequent rider card. Customers receive a free ride up to ten miles after booking nine trips. Courier rates for on-demand package delivery and same-day delivery are also available. To reserve a trip, passengers have the option to call directly, or to fill out a form on their website to submit a request. The website also provides service expectations for new passengers. Due to the rural nature of the area, Canyon Country Cabs asks passengers to allow for a 20-minute buffer from their quoted pickup time for drivers to arrive either early or late. The website also suggests that passengers tip their drivers for their service.

Other private for-profit companies that have or do offer service in the area are:

- **Betty Hottenstein School Busing, Mildred, 5 Drivers, 4 Vehicles, AFH School**
- **Strickland Bussing, Towanda, 1 Driver, 1 Vehicle, School Bus**
- **Discover the World Children's Center, Sayre, 2 Drivers, 3 Vehicles, PPB**
- **Little Stars Learning Academy, Sayre, 3 Drivers, 1 Vehicle, PPB**
- **Trojan Transport Inc, 17 Drivers, 34 Vehicles, AFH, School**
- **Niles Transportation, Wellsboro, 8 Drivers, 8 Vehicles, PPB, School**
- **Lewis Bussing Inc, Susquehanna, 20 Drivers, 16 Vehicles, AFH**
- **Laura Fuller, Hop Bottom, 2 Drivers, 1 Vehicle, PPB, School**
- **Dan Anthony INC, Brooklyn, PA, 2 Drivers, 2 Vehicles PPB**
- **Strohl Family Farm Transportation, 3 Drivers, 5 Vehicles, AFH**
- **Guthrie Robert Packer Hospital Towanda, Towanda, 15 Drivers, 7 Vehicles, PPB**
- **Wilson Transport INC, Mansfield, 26 Drivers, 12 Vehicles, Applying for School**
- **Brown Vans Service, Tunkhannock, 28 Drivers, 28 Vehicles, AFH School**
- **Endless Mountains Transportation Inc, Tunkhannock, PA, 4 Drivers, 4 Vehicles, AFH**
- **Dan Towner School Busing, Rome, PA, 1 Driver, 1 Vehicle, PPB, School Bus**
- **Chilson's Transport, Rome, PA 2 Drivers, 3 Vehicles, PPNB**

Hospital-Related Transportation Services

The Northern Tier Region has six hospitals. Table 35 displays a list of the hospitals across the five-county region. Two of the five counties - Sullivan and Wyoming – must travel to neighboring counties to access a hospital. Of the six hospitals, only one offers non-emergency transportation via ambulance services. According to Guthrie's website, "Guthrie Robert Packer Hospital, Towanda Campus EMS offers patients

safe, reliable, and cost-effective non-emergency transportation to or from any hospital, nursing facility, personal care home, doctor appointments, dentist appointments, return trips home. The experienced Emergency Medical Services staff at Guthrie Robert Packer Hospital, Towanda Campus is on duty 24 hours a day to respond to pre-hospital medical or trauma-related emergencies. [Guthrie Robert Packer Hospital, Towanda Campus provides] both basic and advanced levels of care to residents of Bradford County and parts of Sullivan County." Non-emergency transportation can be arranged by calling ambulance services.

Table 35: Northern Tier Hospitals

	Community	County
Guthrie Robert Packer Hospital	Sayre	Bradford
Guthrie Robert Packer Hospital, Towanda Campus (Memorial Hospital)	Towanda	Bradford
Guthrie Troy Community Hospital	Troy	Bradford
Barnes-Kasson County Hospital	Susquehanna	Susquehanna
Endless Mountains Health Systems	Montrose	Susquehanna
UPMC Wellsboro (Soldiers + Sailors Memorial Hospital)	Wellsboro	Tioga

Source: Rockland

Public Outreach and Data Collection

Stakeholder Focus Group Meetings

An important step in developing this Coordinated Plan was to meet with and gather input from key stakeholders who are involved in delivering transportation or are agencies/providers who work with senior citizens, persons with disabilities, and/or veterans on a daily basis. Stakeholders who depend on public transportation to provide their clients with access to the services they offer are integral to understanding current transportation options as well as the challenges, unmet needs, and service gaps that confront their clients. The planning team invited individuals to focused meetings of the following stakeholder categories:

- **Transportation Providers**
- **Area Agencies on Aging and Senior Advocates**
- **County Planners & Human Service Agencies**
- **Healthcare Providers**
- **Advocates of Children and Persons with a Disability**
- **Advocates of Veterans**
- **Housing & Workforce Representatives**

Appendix B: Stakeholder Interview Guide provides the list of questions used to guide the meetings. Over two dozen people participated in the seven virtual meetings, and two written responses were received from people unable to participate in the scheduled discussions. The following summarizes the findings from the meetings with the stakeholders.

Transportation Providers

The first stakeholder interview for the Northern Tier LCTP involved leadership from BeST Transit that serves Bradford, Sullivan, and Tioga Counties; and Trehab/SWCT serving Susquehanna and Wyoming counties. Participants discussed the current state of transportation services, key challenges, and potential improvements across the region. The conversation offered a mix of practical insights and forward-thinking ideas, especially relevant for serving rural populations, older adults, and individuals with low income or disabilities.

The providers currently operate shared-ride services, participate in shared ride funding programs, contract with the Medical Assistance Transportation Program (MATP), and manage some limited third-party transportation contracts. Both agencies noted their systems are under financial strain, with operating losses in shared-ride services increasing annually. Fare increases have been minimal, or last implemented several years ago, due to concerns about affordability for vulnerable populations.

Participants emphasized strong working relationships with third-party sponsors such as local Area Agencies on Aging and small nonprofits. However, they highlighted concerns about future instability in these partnerships due to shifting funding and political changes. One notable loss discussed was the expiration of the Geisinger GMCO transportation funding program, which had helped cover non-medical, essential trips for low-income residents.

Emerging service gaps and evolving community needs were central to the conversation. Both providers expressed strong interest in exploring microtransit models to support more flexible, same-day, and short-

distance trips, particularly for hospital discharges, court appearances, or counseling services. These trips often need to be scheduled too quickly to qualify for traditional scheduling yet are critical for the individual's wellbeing.

Additionally, providers identified increasing difficulty transporting individuals to distant medical appointments, as specialized medical services are often one to two counties away. This results in inconsistent service schedules and puts a burden on both agencies and passengers. Transportation barriers were also linked to missed medical care, with providers noting that clients, especially seniors and those with disabilities, sometimes give up on appointments due to frustration or lack of options.

The discussion also touched on rising operational costs, stagnant state funding, and the need for greater coordination with health and human service providers. Although there were no major communication issues reported, both agencies expressed a desire for more collaborative solutions and targeted assistance for underserved populations.

Key Takeaways
- Microtransit is a top priority for improving service flexibility and meeting unmet needs in smaller communities across the region
- Rising costs and flat funding are placing strain on rural transportation operations, with shared ride programs increasingly running at a deficit
- Loss of non-medical trip funding, such as the discontinued Geisinger GMCO program, has negatively impacted low-income residents
- Medical trips to out-of-county facilities remain a persistent challenge due to distance, limited-service days, and appointment scheduling conflicts
- Transportation barriers can lead to missed care, especially for seniors and individuals with disabilities who may struggle to navigate complex scheduling systems

Area Agency on Aging and Advocates of Senior Citizens

Stakeholders representing senior services in the Northern Tier region shared their perspectives on human service transportation during a group interview. Participants acknowledged that while formal transportation services exist, such as shared-ride programs operated by Susquehanna-Wyoming County Transportation (SWCT), BeST and contracts with local agencies like Luzerne County Transportation Authority, significant challenges persist, especially in rural areas.

Senior centers commonly assist with trip planning and provide informational brochures to participants. However, awareness of available transportation services remains limited in many rural communities. Stakeholders noted that most older adults and individuals with disabilities rely heavily on the shared-ride program, which is generally viewed as affordable and dependable for medical appointments and senior center visits. Still, the shared-ride model often leads to dissatisfaction among riders due to extended travel times and scheduling inefficiencies, particularly when appointments require early arrivals or long wait-times for return trips.

Weekend and evening transportation is largely unavailable, leaving significant gaps for those wishing to attend personal events or appointments outside of typical service hours. While technology like smartphones and internet access is common among many older adults, limited digital literacy may restrict their ability to navigate transit information independently.

From a workforce perspective, employers in the region struggle with the geographic spread of workers and job sites, which makes coordinating consistent, reliable transportation difficult. Efforts like employer-sponsored vanpools have been tried but are not widespread. Participants discussed the potential benefits of expanding rideshare-type models, like Uber or Lyft, and suggested exploring strategies to recruit local drivers in rural communities.

Cost was not identified as a major barrier for seniors in Wyoming County, thanks to recent fare reductions. However, limited vehicle availability and constrained budgets continue to affect service flexibility. Some unmet needs include lack of transportation for grocery trips, recreational activities, and other errands beyond medical appointments. Stakeholders emphasized the value of regular, scheduled group trips to essential services and suggested that even one or two days a week could significantly improve quality of life for older adults.

Key Takeaways

- Shared-ride programs are affordable and widely used, but scheduling and long ride times are significant challenges for users

- Weekend, evening, and on-demand transportation options are limited or nonexistent, creating access gaps

- There is a need for greater awareness of available transportation services, especially in rural and outlying areas

- Additional support for errands like grocery shopping or attending events would better serve older adults and improve social connectedness

County Planners & Human Service Agencies

Representatives from human service agencies, planning departments, and county assistance offices in Bradford, Sullivan, and Susquehanna counties gathered to discuss transportation needs and challenges faced by their clients. Many of the agencies assist with transportation through a mix of direct service, contracted providers, public transit subsidies, mileage reimbursement, and distribution of bus passes, often utilizing County General Funds or specific program allocations. However, participants emphasized that despite these supports, transportation barriers persist, particularly due to the rural nature of the region, limited transit coverage, high costs, and lack of service frequency.

Agencies expressed concern over clients' inability to access appointments, employment training, and critical services due to geographic isolation or transit system limitations. Clients are sometimes dropped off hours before or picked up hours after their appointments, resulting in long, inefficient trips for brief services. Several agencies noted that travel costs frequently exceed the cost of the actual service provided, especially for clients with intellectual or physical disabilities who live outside shared ride service areas. Others mentioned that programmatic funding caps further limit how much transportation can be supported, leading to reductions in other essential services.

There was consensus on the need for expanded door-to-door and on-demand services, particularly during evening and weekend hours, which are currently unavailable. Some participants cited successful, but short-lived, partnerships, such as a vanpool with Enterprise for workforce clients, which ended due to lack of ongoing funding. Participants also mentioned using local taxi services, although coverage and availability remain inconsistent. While ideas like Uber or Lyft services were discussed as ideal models,

most agreed these are not financially viable in the region due to long travel distances and low population density.

Communication methods with clients vary, including face-to-face meetings, phone, e-mail, and increasingly, virtual platforms like Zoom. Despite improved digital access, many clients, especially those who are homeless or lack stable internet, still rely heavily on in-person contact and have difficulty accessing online resources.

Key Takeaways

- Transportation gaps are especially pronounced in rural and outlying areas where trip costs often exceed the cost of services being accessed
- Clients face long wait-times before and after appointments due to limited transit schedules and shared-ride inefficiencies
- Many agencies rely on limited or temporary funding streams to subsidize transportation, often leading to difficult trade-offs in client services
- There is a strong desire for more on-demand, door-to-door transportation services, including in the evenings and on weekends
- Communication with clients is mixed—some agencies rely on digital tools, while others maintain high levels of in-person engagement due to client needs and access limitations

Healthcare Providers

Healthcare and drug and alcohol service providers from Tioga, Bradford, Sullivan, Wyoming, and Susquehanna counties met to discuss the transportation needs of clients they serve, particularly those in substance use recovery and behavioral health programs. These agencies support transportation through multiple means, including public transit partnerships, cab services, Uber Health, and the distribution of bus tokens or gas cards. Several counties have developed contracts with providers like BeST Transit to support recovery ride-share programs, often funded through opioid settlement dollars. This transportation is essential for enabling access to treatment and recovery-related services, especially for those who are uninsured or not eligible for Medical Assistance Transportation Program (MATP) support.

Despite creative efforts, significant barriers persist, especially for those in rural areas where public transportation is limited or nonexistent. Participants noted that in some areas, only one side of a county may have consistent bus routes, while other areas are effectively cut off from service. In counties like Sullivan and Susquehanna, entire communities are miles from the nearest transit route. Even when public transportation is available, restrictive service hours (typically 6 AM to 6 PM, Monday through Friday) fail to support recovery meetings, work schedules, or life-sustaining tasks like grocery shopping and childcare. Clients often spend an entire day traveling for a one-hour appointment due to routing that does not address their travel needs, and limited pickup options.

Providers also highlighted the disconnect between the transportation programs currently available (such as MATP) and the broader daily needs of their clients. While transportation is generally available for medical treatment, it is not provided for other critical aspects of wellness and recovery such as grocery shopping, community service, or late-night recovery meetings. These gaps make it difficult for clients to build independence and maintain a stable routine. Some agencies are beginning to address this gap by modeling programs after services like Danny's Ride or Uber Health, though success is hindered by the absence of rideshare infrastructure in the region.

Communication with clients is generally effective through in-person meetings, phone calls, and occasional outreach via stakeholders. However, access to broadband internet remains unreliable in rural areas, and many clients rely solely on smartphones with limited data plans.

Participants agreed that ideal transportation in the Northern Tier would be affordable, on-demand, and flexible—more like urban rideshare systems. However, low population density and long distances make such a solution difficult to scale.

Key Takeaways

- Transportation services often end by 6 PM and do not support evening recovery meetings, employment, or daily errands such as grocery shopping
- Rural communities are especially underserved, with many clients living far from any transit routes or facing long travel times for short appointments
- Most programs only cover transportation for medical treatment, leaving gaps in support for broader recovery and daily life needs
- Agencies use creative solutions (e.g., Uber Health, gas cards, cab contracts), but limited funding and lack of infrastructure constrain effectiveness
- An ideal transportation system would offer affordable, on-demand service with extended hours and rural coverage, but feasibility remains a key challenge

Advocates for Children and Disabled Persons

Representatives from various agencies serving individuals with disabilities, low-income populations, and vulnerable residents across Bradford, Tioga, and Susquehanna counties participated in the stakeholder interviews to discuss transportation needs within the region. Participants included human services professionals, healthcare providers, employment specialists, youth and family service organizations, and regional nonprofit staff.

The conversation highlighted the persistent and widespread barriers to transportation in the Northern Tier, particularly in rural and remote communities. Participants emphasized that although fixed-route services such as BeST Transit are available in some areas, the reach of public transit remains limited. Many clients reside on back roads or in communities not served by transit routes, leaving them to rely on friends, neighbors, or walking long distances to access the nearest bus stop. Stakeholders shared examples of individuals who must travel several miles to reach even the closest point of service which is an insurmountable obstacle for those with mobility challenges or no access to personal vehicles.

Service availability was also cited as a major concern. BeST Transit was noted to operate only until 5:00 PM on weekdays, with no service on weekends. This creates a serious gap for individuals who need early morning, evening, or weekend transportation for employment, medical appointments, or other essential activities. In some cases, clients had to wait many hours at a service location, sometimes with young children, because of limited pick-up and drop-off scheduling options. These situations result in not only logistical burdens but financial ones as well, especially if clients are required to pay for additional children to accompany them.

Another issue raised was the difficulty that many clients face in understanding how to use the transportation system. Scheduling requirements, such as the need to book rides 24 hours in advance, and the complexity of bus routes were described as overwhelming and inaccessible to some individuals, especially those with intellectual or developmental disabilities. Misunderstandings about scheduling rules and trip eligibility often result in missed appointments, leading to disruptions in care or services.

Technology access was another common theme. Although some clients can navigate online forms or communicate via text, others, especially those in rural pockets of the region, lack consistent access to internet or smartphone service. Stakeholders reported that many individuals continue to depend on in-person support, printed applications, and personal guidance to understand and navigate transit options. This digital divide also affects access to telehealth, which has become a critical alternative to in-person medical and mental health services. Where broadband and communication devices are available, telehealth offers much-needed flexibility; but where it is not, clients are left without alternatives.

The high cost of transportation, even when subsidized, was identified as another barrier. Several participants shared that clients sometimes forgo rides, even those priced at just one dollar, due to financial constraints. In cases where sponsoring agencies (such as Area Agencies on Aging) reduce or end fare assistance, even small increases in out-of-pocket costs can lead to significant drops in ridership.

Stakeholders expressed strong interest in expanding and diversifying transportation models in the region. Suggestions included piloting on-demand or microtransit services to address short-distance, time-sensitive needs such as hospital discharges or local appointments, and developing partnerships with hospitals or nonprofits to support low-income residents. Flexible funding sources and multi-agency collaboration were identified as essential components of long-term solutions. Without expanded services and more accessible systems, agencies reported that clients often fail to receive necessary care, miss work opportunities, or disengage from programs due to transportation-related stress and complications.

Key Takeaways

- Rural isolation and limited-service hours significantly restrict access to transportation, especially for medical, employment, and social service trips
- Understanding and navigating the transit system is a challenge for many clients, resulting in missed appointments and increased dependence on staff or family
- Lack of internet and smartphone access continues to be a major barrier for utilizing transportation technology and telehealth services
- No-show appointments due to transportation issues negatively affect service agencies financially and reduce client access to critical care
- Stakeholders recommend more flexible and collaborative transportation models, including on-demand services and partnerships with healthcare providers or local nonprofits

Advocates of Veterans

The Veterans Affairs Directors of each county in the region were invited to participate in the stakeholder interviews, however only Sullivan County was available for the interview. The discussion offered insights into how transportation barriers impact access to healthcare, benefit programs, and housing stability in the region, particularly in Sullivan County.

Currently, the office does not provide direct transportation services or subsidies, but frequently refers individuals to BeST Transit and offers printed or digital materials to help them navigate available options. Staff will assist with application forms and referrals, especially for clients who lack internet access or struggle to understand the process. However, the office has limited capacity to provide in-depth trip planning or direct logistical support.

Veterans in rural communities often face significant obstacles in accessing VA healthcare. The closest VA Medical Center is located in Wilkes-Barre, approximately 90 minutes away, while satellite clinics in Sayre and Williamsport are also a considerable distance. For veterans without a personal vehicle and not

enrolled in Medicaid, options are extremely limited. Many do not qualify for Medical Assistance Transportation Program (MATP) services and are unaware they need to enroll separately in shared-ride programs. This leads to missed appointments and, in some cases, the inability to complete benefits eligibility exams.

A recent and promising development is the creation of a nonprofit arm under the regional transit authority (BeST Transit), which will focus specifically on transporting veterans to essential healthcare appointments and exams. Although the program was still in its early stages at the time of the interview, the participant expressed optimism about its potential to address longstanding gaps in veteran mobility services.

While the introduction of a fixed-route loop in Sullivan County was praised, it serves only a limited portion of the community. The participant noted that most residents remain far from the established route and are unable to benefit from it unless they can reach a central pick-up location. Cost is also a prohibitive factor for individuals who do not qualify for discounted fare programs, especially for out-of-county trips.

Another key concern was public awareness. Many veterans are unaware of transportation options, discount eligibility, or the process for registering with transit providers. The stakeholder emphasized the importance of outreach and communication, noting that printed materials and personalized referrals help bridge the information gap. Internet and smartphone access is mixed in the county, and even a small number of clients without connectivity represent a significant portion of the population given the small overall client base.

Transportation barriers also impact service delivery. Some benefit programs require in-person applications as a fraud prevention measure, which becomes a hurdle when clients cannot travel to the office. When possible, staff attempt to meet clients at common spaces or alternate county buildings closer to the client's home.

The stakeholder acknowledged that limited staff, vehicles, and geography make it difficult for small counties like Sullivan to independently offer transportation. Instead, regional collaboration, targeted funding, and programmatic outreach may present the most realistic opportunities to fill existing gaps.

Key Takeaways
- Veterans face unique transportation barriers due to long travel distances to VA medical facilities and lack of Medicaid eligibility
- A new nonprofit initiative through BeST Transit aims to provide dedicated transportation for veterans, but was still in development at the time of the interview
- Fixed-route service in Sullivan County is helpful but limited, as most rural residents live too far from established bus routes
- Lack of awareness and difficulty registering for programs like shared-ride services prevent many clients from accessing transportation they may qualify for

Housing and Workforce Representatives

As part of the Northern Tier Local Coordinated Transit Plan update, a stakeholder interview was conducted with representatives from the Progress Authority and the Tioga County Homeless Initiative to gather perspectives on regional transportation needs and challenges. The participants provided valuable insights into how transportation, or the lack thereof, impacts access to education, housing, workforce opportunities, and supportive services in Bradford, Susquehanna, and Tioga counties.

The Progress Authority, an economic development agency serving Bradford and Susquehanna counties, hosts the BeST Transit bus depot at its facility in downtown Towanda. This central location historically offered convenient access for community members needing public assistance, particularly when the State Assistance Office was co-located in the same building. However, the relocation of that office to a less accessible site on Route 6, outside of town and only served by two fixed bus routes, has created new barriers for clients who now struggle to reach critical services. Staff at the Progress Authority report that individuals often still arrive at the old location confused or frustrated, indicating a communication and access gap resulting from the move.

The Tioga County Homeless Initiative shared challenges from the perspective of a housing and human service provider. The agency owns a small vehicle but frequently relies on staff using personal cars to transport clients to medical appointments, housing interviews, and employment opportunities. The agency utilizes BeST Transit's fixed-route and medical ride programs, and bus tokens are provided to clients as needed. However, the requirement to schedule medical transportation by 11:00 a.m. the day before creates delays, especially when urgent prescription pick-ups or last-minute appointments arise. Furthermore, no service availability after hours or on weekends severely limits mobility for shelter residents.

A primary area of concern discussed by both stakeholders was transportation to employment, particularly for clients seeking jobs at manufacturing plants located in remote communities such as Westfield, Elkland, and Tioga. These areas are not adequately served by public transportation, and factory shifts often begin before the first buses run and end after the last. Past attempts by the shelter to coordinate carpool systems or volunteer rides fell short due to cost constraints, scheduling conflicts, and the need for compensation. A $10/day fee structure was piloted but became unsustainable without ongoing funding or dedicated staff.

Both agencies praised the effectiveness of communication with BeST Transit, which has responded promptly to special transportation needs, such as accommodating clients with disabilities or behavioral challenges. Stakeholders emphasized the strong potential of partnerships between employers, service providers, and transit agencies but stressed that funding limitations remain a major barrier to implementing reliable and scalable transportation solutions. The discussion underscored the critical role of transportation in supporting housing stability, job access, and healthcare for vulnerable populations in rural communities.

Key Takeaways
- Transportation gaps are particularly acute for rural employment access, with shift-based jobs located in areas not covered by fixed transit routes
- BeST Transit's medical ride program is effective but inflexible, limiting its utility in urgent or same-day situations
- Relocation of key services outside transit-accessible zones has created confusion and reduced access for low-income and vulnerable populations
- Volunteer ride and informal carpool programs are not sustainable without dedicated funding and staffing
- There is strong collaboration with local transit providers, but expanded service capacity depends on increased and stable funding sources

Passenger Experience Interviews

To understand actual passenger experiences of people with disabilities, senior citizens, and veterans in using public transportation/shared ride or other means of transportation we interviewed passengers who use public transportation. An interview guide was developed to help ensure consistent discussion topics. This can be found in Appendix B: Stakeholder Interview Guide. Stakeholders identified individuals who would be willing to be interviewed. Each individual volunteered to be interviewed with the understanding that they would not be identified by name in the report. The planning team used the interview guide to conduct one-on-one interviews with the volunteers to discuss their transportation needs, experiences, and the challenges they face in using public transportation to access shopping, medical facilities, and other services.   The following summarizes highlights from each interview.

Mr. A – 71-Year-Old with a Disability

Mr. A, a 71-year-old resident of Great Bend Borough, has long relied on public transportation to navigate his daily life. Though he once needed a walker due to a foot injury, he currently manages without mobility aids. His primary mode of transportation is shared-ride services, which he uses regularly for medical appointments and other essential trips.

Every other week, Mr. A boards a shared-ride vehicle to visit his doctors and integrative counseling sessions. He also depends on public transit for trips to the DMV. While he appreciates the convenience of these services, he wishes they extended to more recreational destinations—places like Boscov's for shopping, the Christmas Tree Forest and Lights, coal mining tours in Scranton, museums in Wyoming County, and even bowling or mini golf outings.

Scheduling a ride is a straightforward process for Mr. A. He calls by telephone, often giving a month's notice but sometimes booking as late as noon the day before. His ride is confirmed at the time of booking, and if he ever needs to reschedule due to a doctor's change, the service is accommodating. He finds the reservation process easy and appreciates the reliability.

On the day of his ride, an automated system calls him the night before and again in the morning with a 15-minute warning. This gives him time to make his way to the elevator and wait in the lobby. Boarding is simple—he enters the vehicle unassisted, using a lowered step provided by the driver. The ride itself is comfortable, in a clean, and well-maintained vehicle. He feels safe with the drivers, who are always congenial.

While there are occasional stops along his route, they never feel unreasonable. For his return trip, arrangements vary—sometimes the driver schedules pickup at drop-off, while other times Mr. A or a security guard calls for his ride. He typically waits about an hour, using the time to grab a coffee.

Overall, Mr. A has had positive experiences with public transit. He recalls how drivers have always been kind when he needed a restroom stop. The only frustration he has encountered is when other passengers bring excessive belongings, making the ride feel cramped.

Public transit plays a crucial role in Mr. A's independence. While a friend occasionally takes him shopping, he prefers not to rely on others. If the service were no longer available, he admits he wouldn't have another way to travel.

To attract more riders, Mr. A suggests advertising group trips through bulletin boards and direct mailings. He believes local elected officials should support public transportation because it is vital to people like him. If

asked to encourage a friend or family member to try public transit, he would simply share his own positive experiences—because for him, it has been a lifeline.

Key Takeaways

- Public transit is essential to Mr. A's independence, enabling him to attend medical appointments and other necessary outings without relying on friends or family
- He finds the shared-ride service reliable and easy to use, with a user-friendly scheduling system, helpful notifications, and courteous drivers
- Mr. A sees opportunities to expand transit access and awareness, suggesting recreational destinations and promotional efforts to attract more riders and garner local support

Mr. B – 44-Year-Old with a Disability

Mr. B, a 44-year-old resident of Powell, Monroe Township in Bradford County, has built a routine that relies heavily on public transportation. While he holds a driver's license, his medical condition—marked by seizures—prevents him from driving. Instead, he depends on the transportation services provided by BeST, to access SERVE adult daycare facility, with additional support from his parents and sister when needed.

Mr. B's journey with public transit spans years, with a structured schedule that ensures he arrives at SERVE three days a week by 8:30 a.m., with a designated pickup at 2:30 p.m. His introduction to the service came through his MHMR caseworker, who helped establish his transportation arrangements.

Public transit has been a reliable resource for Mr. B, offering free rides that alleviate the burden on his senior parents, especially during the harsh winter months when driving can be dangerous. His experience with the service has generally been positive—rides are comfortable, drivers are professional, and vehicles are well-maintained. However, there have been occasional frustrations.

One recurring issue arises when drivers take an alternate route leaving the daycare center, extending what should be a three-minute ride to as long as 45 minutes. His mother voiced concerns about these extended trips, explaining that Mr. B is susceptible to seizures and should not have to endure unnecessarily long rides. Fortunately, his MHMR caseworker has been a strong advocate in resolving such concerns with the transit agency.

Another challenge has been unexpected schedule changes. On occasion, the van arrives earlier than usual, making it difficult for Mr. B to rush outside in time due to his disability. Conversely, when the service runs late, the family appreciates the courtesy of a phone call, allowing them to step in and transport him to SEEVE if needed. Despite these occasional setbacks, Mr. B values public transit for the independence it provides. Without it, he would rely solely on his retired parents, who work from home, or his sister, who lives next door—but they are not always available.

His mother, who works at Northern Tier Counseling Mental Health Facility, has witnessed firsthand the challenges faced by others in the community. She notes that while public transit is a lifeline for many, more drivers are needed before additional riders can be accommodated. Some clients have been forced to wait hours for shared rides, highlighting the need for improved service capacity.

Mr. B's family believes that local elected officials should support public transportation, recognizing its vital role in the community. They would encourage others to try public transit by sharing their largely positive experience, emphasizing the convenience and reliability it offers.

For Mr. B, public transit is more than just a ride—it is a means of maintaining his routine, staying connected to his community, and ensuring his well-being. While there are areas for improvement, the service remains an essential part of his daily life, providing him with the freedom to navigate his world with confidence

Key Takeaways

- Public transit is crucial to Mr. B's daily routine and independence, allowing him to attend adult daycare regularly despite his medical condition preventing him from driving
- While the service is generally reliable and appreciated, occasional route deviations and scheduling inconsistencies have caused stress and safety concerns, particularly due to his health needs
- Mr. B's family advocates for improved service capacity, noting that more drivers are needed to better meet community demand and reduce long wait times for riders

Mr. C – 22-Year-Old with a Disability

At just 22 years old, Mr. C of Springville, Susquehanna County navigates his professional life with determination and structure, thanks to public transportation. The shared-ride service ensures he can get to his job every Monday, Wednesday, and Friday, a routine he's maintained for over three years. Without a personal vehicle and family unavailable during the school year, public transit is his only viable option. It's not just a convenience, it's a necessity.

His rides are arranged by his case manager through SWCT/Trehab, which coordinates his weekly schedule: picked up early and brought home after his shift ends. While this consistency removes the burden of booking individual trips, it comes with unpredictable timing. Mr. C receives an automated call the night before with an estimated pickup time, but the reality can differ. Some mornings he is picked up far earlier than expected, as early as 6:15 a.m., and arrives at work up to an hour before his shift. Other times, he is late and starts behind schedule. While the drivers are understanding—occasionally knocking on his door if he's not ready—the inconsistency can leave Mr. C scrambling. He does not appreciate feeling rushed when he should be starting his day with calm and focus.

The transit itself is safe, clean, and comfortable. Mr. C boards easily and settles in for a ride that, depending on the number of stops, can stretch well beyond the expected 15-minute journey. On his way home, the wait times vary just as much. There have been days he's spent an hour waiting after work, depending on when and how quickly other passengers are dropped off first. He is patient, but admits the unpredictability can wear on him.

Despite the logistical frustrations, Mr. C is grateful. He describes the experience as "pretty decent candy"— a quirky and endearing nod to the sweetness of freedom that transportation brings. Without these rides, his job—and the independence that comes with it—would be out of reach.

When asked what transit providers could do better, he points to better marketing and communication. He suggests platforms like Facebook and notices at local businesses in Montrose as effective ways to raise awareness. And while he'd gladly encourage others to use transit, he admits he'd caution them about the automated calls, which sometimes lead to rushed mornings and misaligned pickups.

Through all of this, Mr. C remains positive. He believes in public transportation's potential—efficient, necessary, and worth supporting by elected officials. His routine may not be perfect, but it is real, and it is working for now.

Key Takeaways

- Public transit is the sole method Mr. C has to reach his job, reinforcing its role in supporting persons with a disability without personal vehicles
- Automated notifications can misalign with actual pickup times, resulting in rushed mornings or long waits
- Mr. C suggests using local businesses and social media to promote services and reach new riders more effectively

Ms. D – 47-Year-Old with a Disability

Ms. D, a 47-year-old resident of Wyalusing in Bradford County, depends heavily on transportation services to attend the SERVE adult day program. While she does not currently require a wheelchair-accessible vehicle, Ms. D is disabled and cannot drive. As such, reliable transportation is not just a convenience, it is essential for maintaining her routine, independence, and connection to the community.

Historically, Ms. D has used public transportation provided by BeST Transit to travel to SERVE, a service she has attended since she was 21 years old. However, during the COVID-19 pandemic, her family transitioned her to a shared-ride arrangement through BeST. While this service met her needs for a time, the family ultimately sought an alternative due to inconsistent scheduling and delays. In the spring, with the help of Ms. D's case manager, they began using a private transportation provider—Daum's Transport—which has delivered a significantly improved experience for Ms. D and her family.

According to her mother, the current transportation process is "reliable and perfect." Ms. D is picked up promptly at 7:30 a.m. each day and returned home by 2:30 p.m. The vehicle arrives consistently on time, allowing her to maintain her routine without the anxiety of late arrivals or uncertain pickups. The ride takes about 30 minutes and is direct, without unnecessary detours or additional stops. Drivers are courteous, the vehicles are clean and safe, and the overall experience has been smooth and dependable. Ms. D does not require assistance boarding, but her mother appreciates that the drivers are prepared to help if needed.

The transportation cost is covered through Ms. D's waiver, which helps ease the financial burden on the family. Her mother also noted that this reliable transportation arrangement is especially important given that the family has no backup transportation available. Without the current service, Ms. D would have no way to get to SERVE.

While the family is grateful for the current arrangement, they remain concerned about broader transportation access for others in the community and the long-term sustainability of relying on a private provider. Ms. D's mother emphasized the need for BeST Transit to dedicate a specific bus and trip line to SERVE, recognizing how many individuals like Ms. D rely on consistent transportation to attend these essential programs. She believes that without this type of targeted service, families are forced to seek alternatives that may not be accessible or affordable for everyone.

In her view, public transit should not only support medical or essential needs but should also be structured around the routines of those with disabilities who rely on adult day programs for socialization, care, and stability. Ms. D's mother expressed strong support for public transportation and believes that local elected officials should champion efforts to improve and expand these services. Doing so would help ensure that people like Ms. D can remain active in their communities and continue to receive the care they need.

Key Takeaways

- Ms. D relies on transportation to attend the SERVE adult day program, with her current provider (a private company) offering consistent, timely, and dependable service since spring
- She previously used BeST Transit but transitioned to a private company after dissatisfaction with the service, highlighting the need for more dedicated and reliable transportation options to key destinations like SERVE
- Her mother emphasized that Ms. D has no alternative transportation, and recommended that BeST Transit dedicate a specific route to SERVE to better meet the needs of individuals with disabilities in the region

Ms. E – 77-Year-Old Senior Citizen

Ms. E is a 77-year-old resident of Steinbeck Corners in Susquehanna County who has been using public transportation since 1985, following the passing of her father-in-law. Over the years, it has become a critical lifeline for her, allowing her to remain active and independent despite not having regular access to a car. She uses shared-ride van services once or twice a week, typically for trips to medical appointments, the grocery store, or Walmart. The service enables her to maintain a level of mobility that would otherwise be difficult to achieve given her rural location and limited personal transportation options.

Ms. E schedules her trips by calling the transit provider a day or two in advance, and she finds the process easy and accommodating. She uses a basic cell phone and prefers phone calls for trip confirmations. Although she doesn't use apps or online platforms, the system works well for her needs. The transit agency confirms her pickup time when she books, and they usually call again about ten minutes before the van arrives. She appreciates this courtesy, which helps her prepare. Boarding can occasionally be a bit difficult due to the vehicle's steps.

While the ride can be lengthy, sometimes over an hour due to other passenger pickups, Ms. E is understanding and grateful for the service. She finds the vehicles clean and the drivers friendly and helpful when she needs assistance. The rural routes can be winding, which makes the ride less comfortable at times, but she sees this as just part of living in Pennsylvania. On rare occasions, she has experienced a delay of up to an hour for her return trip, but these instances are infrequent and do not overshadow her overall positive experience.

Public transit plays a crucial role in Ms. E's ability to live independently. Without it, she believes she would seldom leave home since she has no other transportation options. While a neighbor is available in emergencies, she prefers not to impose. Ms. E strongly believes that public transportation should be supported by elected officials and the broader community to ensure that senior citizens and others without cars can remain mobile and healthy. She enthusiastically recommends the service to others and believes better advertising through newspapers, radio, or television could help more people become aware of its benefits.

Key Takeaways:

- Public transportation has been a reliable resource for Ms. E for nearly four decades, helping her maintain independence and access essential services
- She finds the reservation process simple and the drivers courteous, though occasional delays and long ride times are part of rural transit life
- Increased awareness through local media could help others benefit from a service Ms. E views as indispensable

Journey Maps

What is a Journey Map

A journey map is a graphic representation of an experience or "journey" through the process of scheduling and taking a trip on public transportation.

Trip Personas

For this section, three different passengers were selected from the passenger experience interviews. The passengers were selected to represent a variety of different passengers in the Northern Tier region. The passengers live in different towns and use different transportation services. Within the yellow oval is a brief description of each passenger and their experience with public transportation. The first journey map (Figure 11) displays a trip taken by Mr. A – 71-Year-Old with a Disability to the health clinic. The second journey map (Figure 12) displays a trip taken by Mr. B – 44-Year-Old with a Disability to SERVE, adult daycare. The third journey (Figure 13) map shows a trip taken by Ms. E – 77-Year-Old Senior Citizen to Walmart. See the following figures for these visual journeys.

Figure 11: Mr. A's Journey Map

One Month Before the Trip…

Mr. A calls SWCT to schedule his medical trip when he makes his appointment.

The Evening Before the Trip…

Mr. A receives an automated call with an estimated pickup window for his trip in the morning

Mr. A is a 71-year-old resident of Great Bend Borough who relies on shared-ride public transportation to maintain his independence. He travels without mobility aids. Mr. A uses public transit regularly for medical appointments, counseling sessions, and essential errands. He appreciates the reliability of the service, the ease of scheduling by phone, and the courteous drivers who help make each trip comfortable and stress-free.

1 — The driver calls Mr. A when he is 15 minutes away. Mr. A makes his way down to the apartment lobby.
8:15 AM

2 — Mr. A boards the shared-ride vehicle without assistance
8:30 AM

3 — The shared ride is a bit longer than a direct trip due to picking up two other riders, but Mr. A remains comfortable

4 — Mr. A arrives at the health clinic early for his appointment
9:15 AM

5 — Mr. A is seen by the doctor
9:30-10:30 AM

6 — Mr. A checks out, returns to the lobby, and asks the security guard to call for his return ride. Mr. A is quoted a one-hour wait.
10:30 AM

7 — While he waits for his ride, Mr. A walks next door to a cafe and enjoys a cup of coffee
10:30-11:30 AM

8 — Mr. A returns to the health clinic lobby where he is picked up a few minutes later than expected
11:45 AM

9 — On the return trip there are three other passengers, adding additional time on board the vehicle
11:45 AM-12:45 PM

10 — Mr. A is dropped off at his apartment complex, again unassisted
12:45 PM

MR. A'S JOURNEY

Montrose Health Clinic

POTENTIAL CHALLENGES

1. Mr. A would also like to complete shopping errands while out for medical appointments.
2. Mr. A has experienced cramped conditions when other riders have too many belongings
3. The wait times for the return ride can sometimes exceed an hour
4. Mr. A is dependent on others for making a phone call for his return ride

Figure 12: Mr. B's Journey Map

Mr. B's caseworker coordinated with BeST Transit to establish a recurring schedule for his transportation needs to SERVE, though he still receives a notification the evening before with an estimated pickup window

Mr. B is a 44-year-old resident of Powell in Monroe Township, Bradford County, who relies on public transportation to maintain his daily routine and independence. Although he holds a driver's license, a seizure disorder prevents him from driving. With help from his MHMR caseworker, Mr. B was connected to BeST Transit and now uses the service to attend the SERVE adult daycare center three times a week. He also receives support from his aging parents and sister, who live nearby, but prefers to use transit to avoid burdening them.

BeST Transit arrives with one other passenger on board
8:00 AM

1 Mr. B is prepared for his day and waits for his pre-scheduled ride to SERVE
7:45 -8:00 AM

2

Mr. B is not due to be at SERVE until 8:30, so the driver drops off the other passenger first, leaving Mr. B anxious
8:00-8:15 AM

3

The driver assures Mr. B that he will arrive on time, but road construction caused a five-minute delay
8:15-8:35 AM

4

OH NO...

POTENTIAL CHALLENGES

1. The pickup window is not accurate, sometimes causing Mr. B to feel rushed when the ride arrives early
2. Drivers occasionally take alternate routes, lengthening the trip time
3. Mr. B is susceptible to seizures
4. Mr. B has limited alternatives for transportation options
5. Mr. B has been late to SERVE

MR. B'SJOURNEY

SERVE

5 Mr. B is dropped off at SERVE, 5 minutes late. His supervisor is understanding
8:35 AM

6 Mr. B spends his morning and early-afternoon at SERVE
8:35 AM-2:30 PM

10 Mr. B arrives home late to a concerned mother
3:15 PM

9 The driver drops off the other passengers before taking Mr. B home. The return trip took 45 minutes.
2:30 - 3:15 PM

8 Mr. B lives only a short, three-minute drive away from SERVE, but the driver took a different route due to road work
2:35 PM

7 Mr. B and several other riders are picked up promptly from SERVE at the scheduled time
2:30 PM

SERVE INC.
Secure Rehabilitation and Vocational Enterprise

Figure 13: Ms. E's Journey Map

At 11 AM or earlier the day before she wants to go shopping, Ms. E calls SWCT to schedule her ride. The dispatcher then gives her an estimated pickup window

Ms. E is a 77-year-old resident of Steinbeck Corners in Susquehanna County who has relied on public transportation since 1985. Living in a rural area without a car, she depends on shared-ride transit services to reach medical appointments, grocery stores, and Walmart once or twice a week. With a strong sense of independence and gratitude for the service, Ms. E values the ability to stay mobile without relying on neighbors or family.

The driver gives Ms. E a call at home to give her a 10-minute notice of their arrival

9:00 AM

Ms. E is ready for her day and waits to be picked up by her shared-ride driver

8:45-9:15 AM

1

2

SWCT arrives at Ms. E's home. She boards the shared ride with four other passengers

9:15 AM

3

Two of the other passengers are also going to Walmart, but two riders need dropped off at medical appointments first

9:10-10:30 AM

4

POTENTIAL CHALLENGES

1. The long rides can be physically taxing on aging Ms. E
2. Ms, E occassionally has to wait up to an hour for her return ride, leaving her groceries vulnerable
3. Ms. E is limited in the amount of groceries she can bring on board and carry back to her residence
4. She sometimes has to wait outside in poor weather
5. No trips on the weekends

MS. E'SJOURNEY

Walmart

Ms. E is dropped off at home safely with her groceries for the week

3:15 PM

10

Ms. E and the other passengers arrive to Walmart

10:30 AM

5

6

Ms. E completes her shopping for essentials and groceries

10:30-11:30 AM

The driver drops off one rider, picks up another from their doctor's office to immediately take them home, and then continues the route to Ms. E's home

12:00 - 1:15

9

8

Ms. E and two other riders are picked up

12:00 PM

7

After shopping, Ms. E waits on a bench in front of the store for her return ride

11:30-12:00 PM

Total Time of Trip
6 HOURS 5 MINUTES

Public Survey

A public survey was developed and conducted as part of the planning process to gather input from the general public, transit riders, seniors, veterans, low-income individuals, and people with disabilities regarding transportation needs and challenges. The survey consists of thirty-three total questions. The first eighteen questions probe participants about their public transportation use, or lack of use. The survey also poses questions about costs associated with transportation, the purpose and preferred time-of-day to travel, shortcomings in the current transportation services, and suggestions for how the services can be improved. The remainder of the questions cover demographics. Most questions were multiple choice or involved selecting priorities from lists. The survey questions are provided in Appendix C: Public Survey Questions

The survey was conducted as an online survey in Microsoft Forms. The survey kit included email communications, QR code links, and flyers that could be posted or distributed to people to complete the surveys. The survey was distributed along with the promotional material to the following groups for further distribution via email and social media:

- Northern Tier Regional Planning and Development Commission
- Susquehanna Wyoming Community Transportation
- BeST Transit
- Community health centers and hospital discharge planners
- Behavioral health organizations
- Dialysis centers
- PA Association of County Drug and Alcohol Administrators

The survey opened on August 6, 2025, and closed on September 8, 2025. The effort resulted in 87 completed surveys. All surveys were completed online via Microsoft Forms by participants. The full survey results are included in Appendix F: Online Survey Results.

Survey Respondent Profile

The majority of survey respondents—39—reside within Bradford County. Tioga, Susquehanna, and Sullivan counties collectively had 41 respondents while Wyoming County had the least number of respondents with five. Two respondents did not answer the item on residence.

RESPONDENTS COUNTY OF RESIDENCE
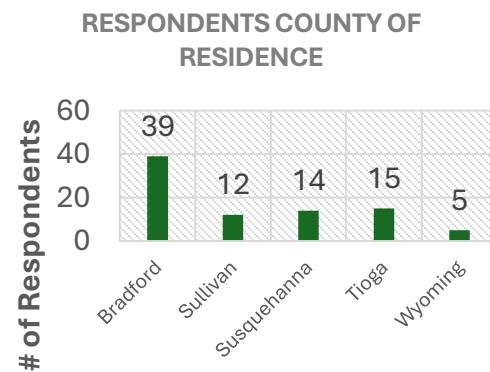
Figure 14: Survey Respondents' County of Residence

The age range of participants is broad. Fifty-eight participants are between the ages of 18 and 64. The other twenty-six participants that provided an age are above the age of 65. Seventeen participants fell in the age range of 65-74, and seven participants fell into the age range of 75-84. Only two participants were aged 85 or older. Five percent of participants do not own a smartphone, whereas ninety-five percent of those surveyed do.


Figure 15: Survey Respondents' Age

Participants were asked to self-identify ethnicity, race, and their ability to speak English. When asked to identify race, 5 participants did not answer. Of the remaining participants that answered, eighty-one of them are white or Caucasian and one participant is American Indian or Alaskan Native. All participants identified their ethnicity as non-Hispanic. All participants responded that they speak English either well or very well.
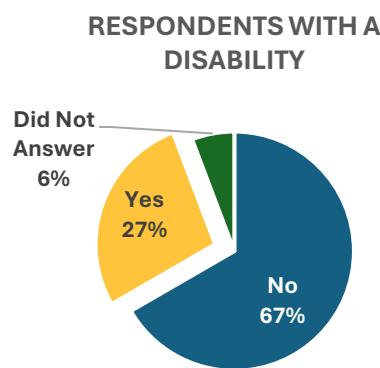

Figure 16: Survey Respondents with a Disability

A total of 27 percent of survey respondents shared that they are a person with a disability or chronic condition. Six percent of respondents preferred not to answer, and the remaining 67 percent indicated that they are not a person with a disability or chronic condition.

With regard to government services, participants were asked to indicate all services they participate in. Two participants receive Veterans Affairs (VA) benefits. Two participants are in the Housing Assistance (HUD) program. Twenty-six survey participants work with the Area Agency on Aging (AAA). Sixteen participants are enrolled in the Supplemental Nutritional Assistance Program (SNAP). Twenty participants are enrolled in Medicaid (Medical Assistance). Twenty-three participants are enrolled in Medicare.

When participants were polled about access to a vehicle, 85 percent either own a vehicle or have access to one to borrow and drive themselves. Of the 85 percent, 83 percent of participants own a car themselves, while only two percent have a family member or friend to drive them. The remaining 15 percent of participants do not have access to a car that is running, licensed, and insured. This correlates with the household incomes reported. Nine percent of participants make less than $15,000 annually. Ten percent of participants make between $15,001 and $25,000 annually. Fifteen percent earn between $25,001 and $40,000 annually. Twenty-one percent reported
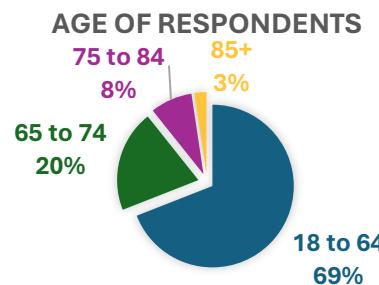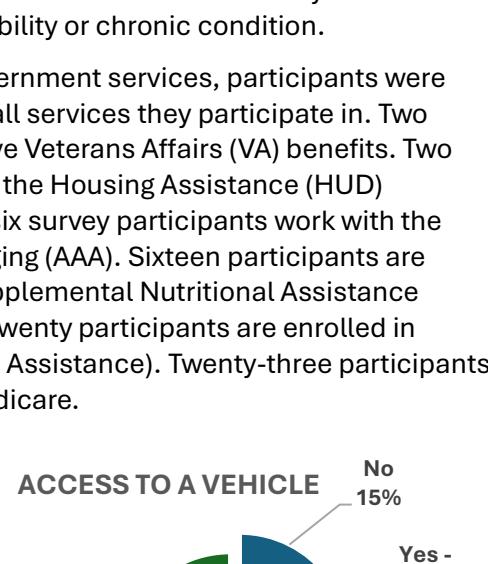

Figure 17: Survey Respondents' Access to a Vehicle

annual income between $40,001 and $75,000. Finally, 15 percent of those surveyed have an income over $100,000 a year. Fifteen participants left the question blank.

Survey Transportation Results

With regard to the use of public transportation, 82 percent of those surveyed do not use public transportation while 18 percent do use public transportation. Of the 16 participants that do use public transportation, 50 percent use it a few times a year, 25 percent said they use public transportation weekly, 19 percent said they use it monthly, and just one participant answered they used it daily. BeST Transit fixed-route bus was the transportation used by the most participants with seven. Three respondents normally use the BeST Transit shared-ride van.

FREQUENCY OF PUBLIC TRANSPORTATION USE

Figure 18: Frequency of Public Transportation Use by Survey Respondents

Three respondents use SWCT/Trehab fixed-route service. Three participants use Uber/Lyft services.

**PRIMARY METHOD OF TRANSPORTATION**
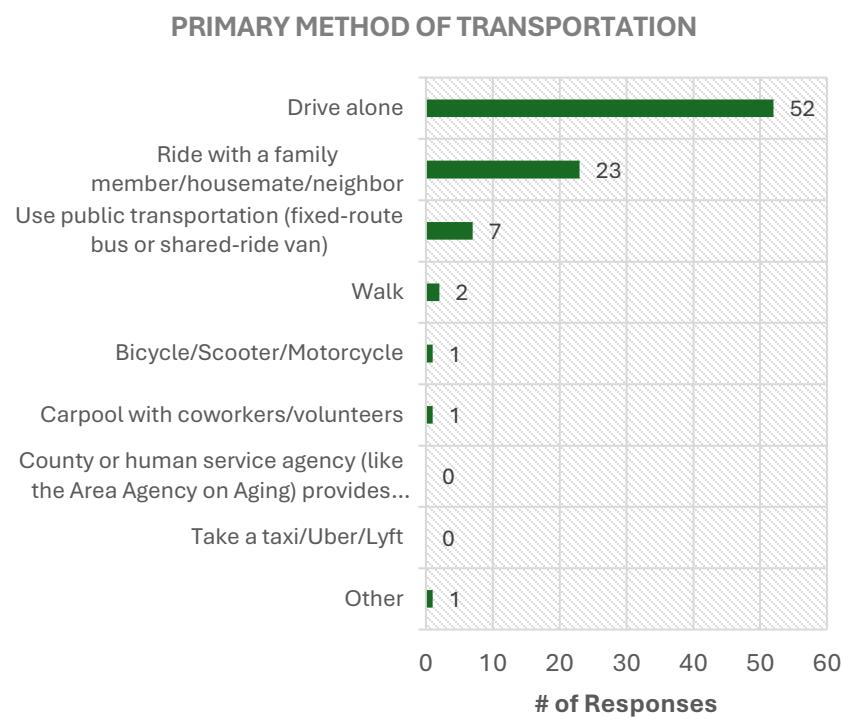
Figure 19: Primary Method of Transportation by Survey Respondents

Most of the survey respondents, 60 percent, drive alone as their preferred method of travel. Twenty-six percent reported riding with a spouse or family member. Seven percent reported using public transportation as their preferred method of transportation. Two percent like to walk to their destination. As a secondary choice of travel, most respondents, 45 percent, opt to ride with a spouse or family member. Fifteen percent of respondents would drive alone. Five percent would carpool with

coworkers or volunteers. Five percent would use public transportation. Twenty-two percent of participants said they would cancel their trip if they could not use their primary method of travel.

Survey respondents were also asked to indicate reasons that they do not take public transportation (Figure 20).

REASONS PUBLIC TRANSPORTATION IS NOT USED

| Reason	# of Responses
Service is not frequent enough/does not align with my schedule	30
Service is not offered to the locations I need	29
I enjoy driving	25
I am not aware of the public transportation service available to me	17
Travel takes too long	12
I feel safer driving	9
The walk to the bus stop is too far	9
Service is not reliable	8
Fares are expensive	5
NA (I use public transportation)	2
I find the ride uncomfortable	0
Other	11

Figure 20: Reasons Survey Respondents Do Not Use Public Transportation

For those who use public transportation, the survey asked what the top three trip purposes are (Figure 21).

TOP TRIP PURPOSES

| Trip Purpose	# of Responses
Social visits (family, friends, social events);	1
Other shopping (clothing, household items, etc.);	4
Grocery shopping;	5
Volunteer work or civic activities;	1
Employment or training;	3
Community services or support programs (food pantry, senior center);	2
Car appointments ;	1
Medical appointments (doctor, dentist, therapy, etc.);	12
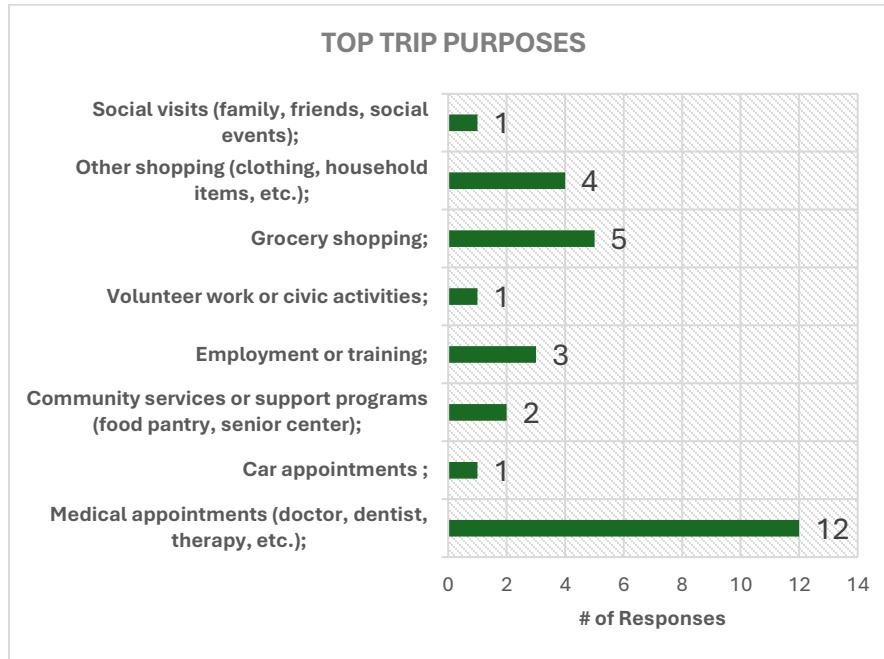
Figure 21: Top Public Transportation Trip Purposes of Respondents

The next section identified the price participants pay per one-way trip on public transportation, the maximum price they would be willing to pay, and an estimated total of public transportation spending per month. The results showed that three people pay around $20 a month for public transportation. One person estimated they spend $10 a week, or about $40 a month. The amounts of $1, $5, $6, $8, $10, and $15 a month each received one response for average spending on public transportation. Three people pay nothing each month for public transportation. Two others are unsure.

MONTHLY SPENDING ON PUBLIC TRANSPORTATION

Amount	# of Responses
Nothing	3
$1.00	1
$5.00	1
$6.00	1
$8.00	1
$10.00	1
$15.00	1
$20.00	3
$40.00	1
Unsure	2
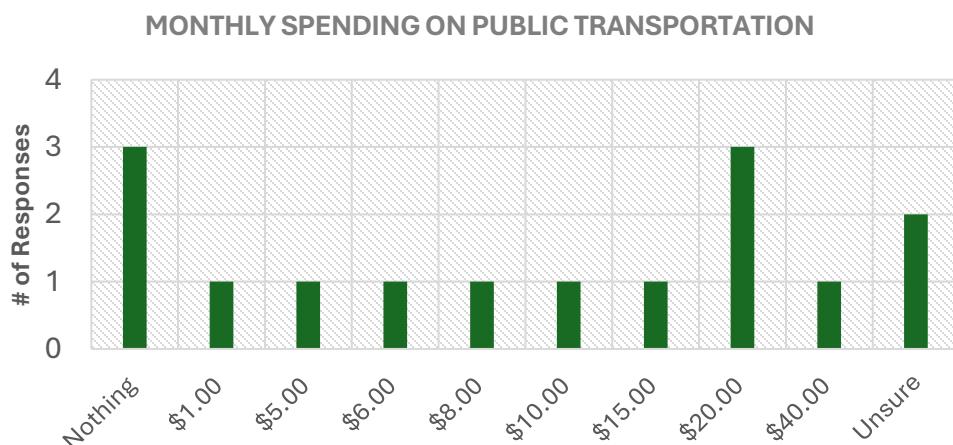
Figure 22: Survey Respondents Monthly Spending on Public Transportation

MAXIMUM ONE-WAY FARE RIDERS WILL PAY

Figure 23: Maximum One-Way Fare Survey Respondents Will Pay

When asked about how much they are willing to pay for a one-way trip, no responses were over $10. Two people said they are willing to pay $5. Two people said they are willing to pay $3, and another two said they are willing to pay $2. One person would pay up to $10, another up to $6, another up to $4, and another up to $1. One person is unsure One person answered that they only ride for free, and the final respondent is unsure.

When asked what they do pay per one-way trip, one person said they pay nothing, and another person said they only pay $1. Two people said they pay $2. Two people said they pay $3. One person said they pay $4. Two people said they pay $5. Another two said they pay $6 and $10.

When polled about missing events due to lack of transportation, 30 percent of participants who answered this item stated that their transportation needs were met. Each participant could submit multiple answers if they missed more than one option. From the 87 survey participants, 113 answers were submitted that they or one of their household members reported missing, as shown in Figure 24.

**MISSED EVENTS DUE TO LACK OF TRANSPORTATION**
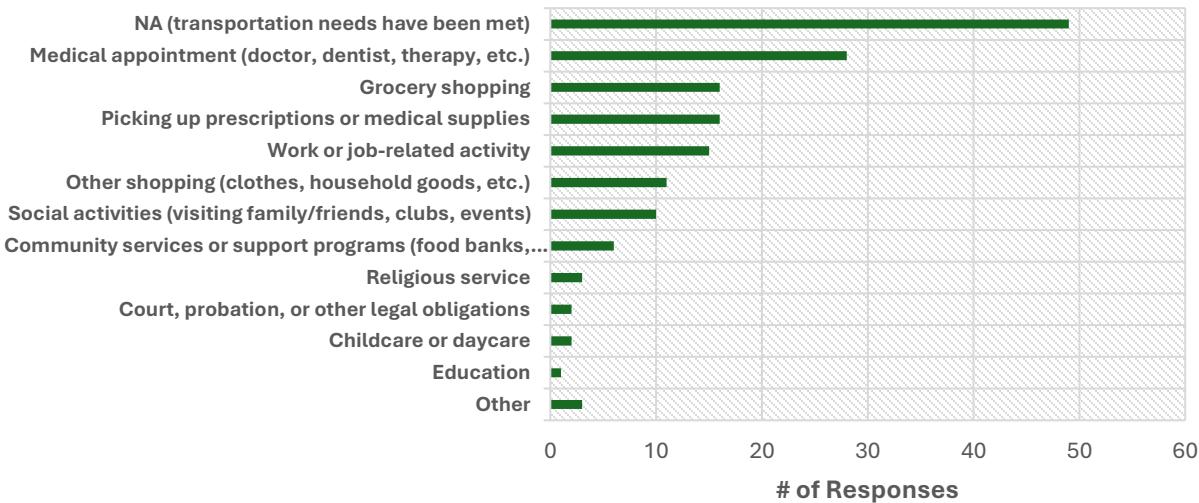
Figure 24: Events Missed by Survey Respondents Due to Lack of Transportation

The most popular time that survey respondents selected to travel is Monday through Friday, during the daytime between 6:00 a.m. and 4:00 p.m. (82%). Figure 25 provides more detail on other times of the day when public transit service is most needed.

TIME OF DAY MOST NEEDED FOR PUBLIC TRANSPORTATION

- Monday through Friday, daytime (6 am to 4 pm)
- Monday through Friday, evenings (4 pm to 11 pm)
- Monday through Friday, overnight/early morning (11 pm to 6 am)
- Weekends (Saturdays and Sundays, anytime)
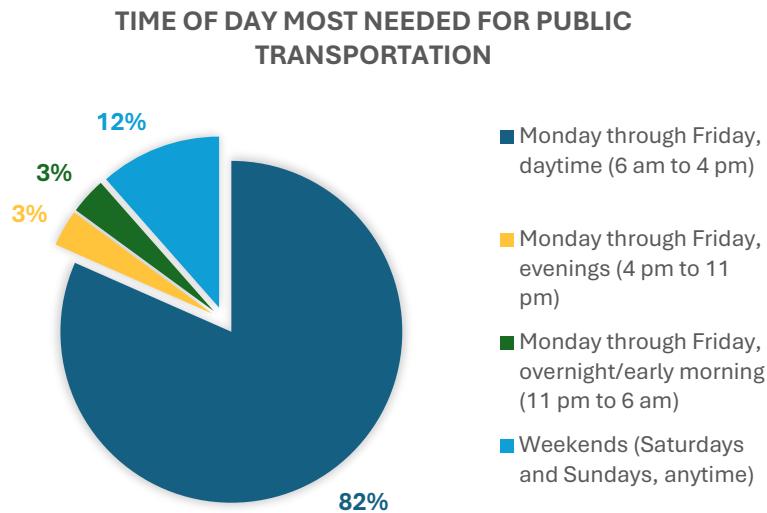
Figure 25: Time of Day Most Needed for Public Transportation
by Survey Respondents

When given suggested strategies to improve public transportation, respondents were asked to rate the importance as "Not Important", "Neutral", or "Very Important". Eighty-seven percent rated the strategy "More service in rural areas" "Very Important". "Increase reliability/provide immediate information if ride will be late" was rated "Very Important" by 71 percent of the participants. Another "Very Important" strategy (69 percent) was "Prioritize medical appointments". The strategies "Improve transit advertising & public outreach", "More service during evenings", and "Shorten wait times for return trips" all had more than 50 percent of participants agree that they were "Very Important". The remaining the strategies were rated "Very Important" by less than 50 percent of the participants. The strategy "Improve the comfort of ride" was the only strategy that had over 50 percent of the participants answer neutral with a nearly even split between the "Very Important" and "Not Important" answers.

In another open-ended section of the survey, participants were asked if they had any specific locations that they would like or need to travel to and cannot get access to currently. Table 35 shows the locations that participants wanted access to.

Table 35: Specific Locations that are Currently Unreachable by County

	Specific Locations that Participants Need or Would Like to Travel to That is Inaccessible
Bradford	Sayre, Towanda, Athens, Campton, Wyalusing, Stevensville, Galeton, Meadville, Reading, Pittsburgh, Philadelphia, New York, local and state Parks, Rome, Gillet, Gransville Summit, Canton, LeRaysville, Elmira, Binghamton, Laceyville, Tunkhannock, and Troy
Sullivan	Williamsport, Sunbury, Lock Haven, Laporte, Forksville, Dushore, and Mildred, or "anywhere in Sullivan County"
Susquehanna	Scranton, Wilkes-Barre, Uniondale, Vestal, New York, and Binghamton
Tioga	Sayre and "more options"
Wyoming	N/A

Participants were polled on ways that they believe transportation services should be advertised (Figure 26).

HOW TRANSPORTATION AGENCIES SHOULD ADVERTISE

| Category	Value
Social media (Facebook, Twitter/X, Instagram, etc.)	60
Information shared by community organizations or service…	51
Flyers, posters, or brochures at local businesses, post…	50
Information at senior centers, community centers, or…	47
Local newspaper or radio advertisements	46
Word of mouth from friends, family, or neighbors	40
Direct mail to households	39
Transit provider website or app	32
Community events or information fairs	27
Text alerts or automated phone calls	21
Public presentations or workshops	19
School newsletters or communications	15
Other	3

Figure 26: How Transportation Agencies Should Advertise According to Survey Respondents

The last open-ended question asked the participants to describe a time when transportation was a challenge. Survey participants responded with challenges with health, availability, and timeliness. Examples of three different challenging experiences are as follows:

One participant described a Bradford County couple who lacked transportation after hitting a deer on their commute to work and totaling their only vehicle. They had no way to get to their work and tried biking, even in the winter. They had just moved to Bradford County, had no access to public transportation and no ability to get outside help from others. They lost their jobs and apartment and were forced to move back to their home state.

Another from Mansfield describes their own experience going to a therapy appointment. Their shared-ride commute usually takes an hour but was lengthened by another passenger. The other passenger did not understand that they would travel with another passenger, which caused delays and frustrations. Ultimately, the survey participant was late to their appointment and almost had their appointment cancelled. Overall, they were upset that the shared ride for medical appointments made them late.

Yet another participant had a challenge with comfortability on the shared ride. They described themselves as needing a cane and recently having surgery while suffering from a lot of pain if sitting on a bus for too long. They were upset that their ride took a longer time than needed and even drove past their house two separate times. This ride caused them pain and soreness, which ultimately led them to cancel their trip for the following day to recover.

Identified Gaps, Strategies to Address Gaps, and Implementation Ideas

This section highlights an action plan with strategies to address service gaps identified across the Northern Tier region. These strategies were developed based on feedback from residents, transit users, county agencies, healthcare providers, employers, and human service organizations as well as data from demographic and travel pattern analyses. Collectively, these efforts highlight recurring challenges such as limited-service hours, geographic coverage constraints, coordination gaps among providers, lack of public awareness, and technology access barriers. Strategies to address these limitations have been organized into five different areas:

1. Pursue Sustainable Funding and Funding for New Initiatives
2. Explore Service Expansion Opportunities
3. Enhance Coordination and Collaboration
4. Improve Public Awareness and Accessibility of Information
5. Leverage Technology and Data for Efficiency

Transportation needs will always be greater than the funding available to address them. This plan aims to institute a more coordinated approach to satisfying transportation needs, minimizing inefficiencies, spurring collaboration in service delivery, and prioritizing warranted improvements. Coordination and collaboration begin with regional communication. A key to implementing this Human Service Transportation Plan is establishing an ongoing forum for dialog and coordination between the RPO, transit providers, human service agencies and the consumers or riders. This regional plan will not be successful without this formalized communication forum. It is recommended that the RPO reconstitute the transit operators committee and broaden it to include human service agencies and consumers.

Ideally, this expanded committee could discuss transit and multimodal issues, promote regional coordination strategies, and plan for human service transportation needs. A joint multimodal/transit advisory committee should meet at least twice per year with a focus on transit and human service transportation needs and tracking an action plan to address the needs. The committee would be a primary owner of this plan and other multimodal initiatives in the region. A model for this type of committee is the regional freight advisory committee at Delaware Valley Regional Planning Commission (DVRPC) or the transit operators committee at Southwestern Pennsylvania Commission (SPC). This committee could also be tasked with reviewing multimodal Long-Range Transportation Plan and TIP projects and making recommendations to the RPO for action.

Upon the establishment of the committee, the strategies and the accompanying suggested action items can be assigned and completed as needed. Each action has a timeframe suggested for implementation as follows:

- Short Term: 1- 2 years
- Medium Term: 2-5 years
- Long Term: 5 or more years.

The following sections provide more detail on the five strategies and outline a menu of actions to be considered for implementation.

Strategy 1: Pursue Sustainable Funding and Funding for New Initiatives

Cost constraints are a major limitation to expanding and improving service across the Northern Tier region. Rural distances and low population densities raise per-trip costs, making effective coverage difficult without significant public investment. Grant-funded service such as shared-ride services, microtransit, and veterans' transit have proven successful but require stable, long-term funding to be sustainable. Ongoing investment is necessary to prevent increases in out-of-pocket fare to maintain affordability for low-income residents and people with disabilities.

The Pennsylvania Shared-Ride Program is in financial crisis. A program that started out as a model for the country to provide low out-of-pocket cost service for senior citizens in rural and/or non-fixed route covered areas of the state is now financially challenged at both the State and local levels. Shared ride service in Pennsylvania is funded by subsidizing 85 percent of the fare for senior citizens and persons with disabilities. The remaining 15 percent must be paid by the rider or a sponsoring agency. As costs increase, the transit agency must increase fares to generate additional revenue to cover increased costs. The populations being served are often living on low, fixed incomes. When fares increase and these low-income people need to pay more out of pocket, they cannot afford it and take fewer trips. As a result, the amount of funding expected from the State to cover the 85 percent portion of the fare is reduced because the overall number of trips is reduced while operating costs remain the same or increase with inflation.   In turn, it becomes very difficult for a transit agency facing increasing costs to find increasing sources of revenue to cover those costs. Transit agencies then use their fixed-route operating subsidies to help cover shared-ride costs or counties contribute an increased amount of local tax dollars to cover those costs. Shared-ride only transit systems have no operating subsidies to draw on making their struggle even harder to balance the budget. PennDOT recently released a Human Services Transportation Report that highlights this challenge and identifies new potential ways to fund shared-ride services. The transit agencies in this region need to work with PennDOT to identify and support a legislative change to create a sustainable solution to fund shared ride services going forward.

Long-term transit improvement depends on stable, adequate funding. While grant programs have enabled innovative projects like microtransit and specialized shared-ride services, these remain vulnerable to budget fluctuations. Protecting affordability for low-income residents, veterans, and seniors also requires deliberate investment. Regional funding strategies should prioritize equity, innovation, and sustainability to ensure all Northern Tier residents have access to essential transportation.

Transit providers and planning organizations should coordinate to identify and pursue new funding sources at the state, federal, and private levels. This includes writing collaborative grants, exploring public-private partnerships, and advocating for policy changes that expand eligibility or funding caps. Programs with proven success should be institutionalized into core transit offerings. At the same time, agencies should work to incorporate transit considerations into land development and zoning reviews, ensuring that future growth supports long-term transit viability and funding alignment. Table 36 provides a menu of potential actions to support this strategy.

Table 36: Strategy 1 Actions

Actions:	Suggested Timeline:
Coordinate and Pursue Regional Discretionary Grants – Coordinate between the transit agencies in the region to pursue both federal and state discretionary grant funding for regional projects. Secure regional grant writing support to assist with preparing and strategizing for grant application.	Short Term
Pool Funding and Purchasing – Pooling funding among agencies to provide transportation services for compatible user populations and types of rides may help to relieve some funding strains while maintaining or increasing service levels. This could be particularly helpful for out-of-area trips that might require transfers between operators. Agencies could also pursue cooperation on supplies, purchasing, training, facilities, etc.	Short Term
Identify Match Funds – Form a task force to build and develop support for traditional local match from counties and local governments as well as non-traditional local match including private donations, foundation support, and advertising revenue.	Short Term
Support a Statewide Funding Solution – Work with PennDOT and other systems in the State to secure recurring funding sources and develop sustainability strategy for shared ride and human service transportation.	Short and Long Term
Coordinate Shared-Ride Fare Structure for Regional and Cross-County Trips – Develop a fare interoperability plan for the region to support trips transferring between transit agencies in the region and improve customer service for regional long-distance trips. This can be supported by building fare reciprocity into the long-distance fare categories for each agency to facilitate more efficient trips and service.	Medium Term
Advocate for Free/Reduced-Cost Fares – Public transit agencies and human service agencies should coordinate and provide a position paper to PennDOT and the General Assembly on the benefits of making free or reduced-cost fares available to low-income youth or adults.	Long Term

Strategy 2: Explore Service Expansion Opportunities

Geographic isolation and long travel distances remain major challenges for residents across the Northern Tier region. While fixed-route and shared-ride services provide critical mobility options, large portions of the region, particularly in Sullivan, Wyoming, and rural parts of Bradford and Susquehanna counties, lack regular or frequent service. Many residents, especially older adults, individuals with disabilities, and low-income workers, have trouble accessing medical appointments, grocery stores, and employment opportunities.

Stakeholders consistently cited the lack of evening, weekend, and on-demand service as a leading barrier to independence and economic participation. Riders often face limited trip windows, long wait times, and circuitous routing due to the rural nature of the region and the shared-ride system's need to group passengers. For those working second-shift or attending social, community, or religious events, service gaps leave few or no transportation options.

Expanding coverage requires creative and incremental approaches. Opportunities include targeted microtransit pilots, vanpool programs for workforce transportation, and volunteer driver initiatives in low-density areas. Coordinated efforts between BeST Transit, SWCT, and neighboring systems could also extend access along county lines and reduce duplication of service. Public-private partnerships, such as collaborations with healthcare networks, major employers, or community centers, can also supplement traditional transit offerings and build local investment.

Future service expansion should be data-driven and responsive to demonstrated demand. Pilot projects should include measurable goals related to ridership, access equity, and cost-effectiveness, with outcomes informing regional TIP and LRTP updates. Table 37 outlines potential actions to support this strategy.

Table 37: Strategy 2 Actions

Actions:	Suggested Timeline:
Pilot evening and weekend shared-ride or microtransit routes serving key population centers.	Short Term
Expand volunteer driver and mileage-reimbursement programs	Short Term
Coordinate with employers for vanpools or workforce shuttles	Short Term
Explore inter-county route coordination between BeST and SWCT	Short Term
Evaluate service demand and ridership potential through GIS and trip data analysis	Ongoing

Strategy 3: Enhance Coordination and Collaboration

Effective coordination among transit providers, human service agencies, and county planners is critical to sustaining efficient, equitable transportation service throughout the Northern Tier region. Currently, each county and provider manages its own scheduling, eligibility, and outreach systems, resulting in duplicated efforts, communication gaps, and challenges for riders who cross county lines or receive services from multiple programs.

Stakeholder feedback highlighted that **human service agencies often operate in isolation**, even when serving overlapping populations. These silos limit opportunities to pool funding, align schedules, or share vehicles and drivers. Improved coordination would not only reduce administrative burden but also enhance customer service, enabling riders to access multiple programs seamlessly through shared resources and centralized information.

A key recommendation is to establish a Regional Mobility Management Function, potentially housed at NTRPDC or supported jointly by BeST Transit and SWCT. A Mobility Manager (or Mobility Coordination Team) would serve as the region's central point of contact for transportation coordination—helping clients, agencies, and providers navigate available services, broker trips, and develop new partnerships. The role could also include maintaining a regional transportation

inventory, managing outreach and education, tracking unmet needs, and facilitating coordination meetings. This position would help unify fragmented programs under one coordination framework and support the objectives of the statewide PennDOT Mobility Management Network.

In parallel, participating agencies should develop Memoranda of Understanding (MOUs) to formalize the sharing of vehicles, drivers, and maintenance facilities. Many human service agencies and non-profits maintain small fleets that remain idle for portions of the day. Through MOUs, these underutilized vehicles could supplement public transit services during off-peak hours or fill geographic coverage gaps. Agreements could define responsibilities related to insurance, maintenance, driver training, and cost recovery, ensuring accountability and compliance with federal funding requirements.

Together, the Mobility Management function and shared-resource MOUs would create a more integrated, efficient, and sustainable transportation network across the Northern Tier. Table 38 outlines recommended actions to support this strategy.

Table 38: Strategy 3 Actions

Actions:	Suggested Timeline:
Establish a Regional Mobility Management Function housed within NTRPDC or jointly operated by BeST/SWCT to coordinate trip brokering, outreach, and agency communication	Short Term
Develop Memoranda of Understanding (MOUs) to allow shared use of agency-owned vehicles, drivers, and maintenance resources while defining insurance, cost allocation, and scheduling responsibilities	Short Term
Create a Regional Transportation Coordination Committee that meets quarterly to align funding priorities, share performance data, and plan joint projects	Short Term
Coordinate with healthcare systems, veterans' organizations, and workforce agencies for cross-sector trip planning and funding partnerships	Short Term
Host an annual Coordination and Innovation Summit to review progress and identify emerging opportunities	Short Term

Strategy 4: Improve Public Awareness and Accessibility of Information

Even the best transportation system cannot meet its full potential if residents are unaware of available services. Across the Northern Tier, many stakeholders reported that residents, especially seniors, veterans, and new residents, lack clear and consistent information about transportation options, eligibility requirements, and how to schedule trips. Limited broadband access and digital literacy compound this problem, particularly in remote rural communities where online tools are less accessible.

Transit providers rely heavily on websites and social media to distribute information, yet many potential riders do not have smartphones or high-speed internet access. Meanwhile, physical outreach through flyers, libraries, senior centers, and municipal offices remains inconsistent across counties. Stakeholders suggested that human service agencies, healthcare providers, and local governments could play a greater role in disseminating information if equipped with accurate, easy-to-share materials.

A coordinated regional communications strategy could significantly enhance awareness and utilization of available transit services. This could include developing a unified Northern Tier Transit Resource Guide, expanding outreach through local radio and newspapers, and training human service and municipal staff as "Transportation Ambassadors." Improving signage and wayfinding at key stops and destinations—such as hospitals, grocery stores, and senior centers—would further enhance visibility and user confidence.

Improving public awareness not only increases ridership but also ensures equitable access for residents who depend on transit most. Table 39 provides a menu of potential actions to implement this strategy.

Table 39: Strategy 4 Actions

Actions:	Suggested Timeline:
Develop unified Northern Tier Transit Resource Guide (print + digital)	Short/Mid Term
Launch multi-platform outreach campaign using radio, social media, libraries, and senior centers	Short Term
Train municipal and human-service staff as Transportation Ambassadors to assist clients	Short Term
Improve bus-stop signage, shelters, and wayfinding at key community destinations	Mid Term
Maintain updated regional transit web portal with maps, eligibility info, and links to scheduling	Ongoing

Strategy 5: Leverage Technology and Data for Efficiency

Technology plays a pivotal role in improving service efficiency, coordination, and rider experience. However, many systems in the Northern Tier region operate with limited or outdated scheduling and dispatch tools, making it difficult to optimize routes or share data between agencies. In addition, some riders—particularly older adults—lack the digital literacy needed to access online trip-planning tools or mobile booking platforms, further widening the equity gap.

Investing in technology should be approached as both an operational improvement and a customer service enhancement. Upgrading software to integrate real-time scheduling, vehicle tracking, and automated trip notifications can help reduce wait times and improve coordination among

providers. Similarly, regional data dashboards can support performance monitoring and grant reporting while identifying inefficiencies or unmet needs.

To ensure technology benefits all users, digital literacy programs and outreach sessions should be developed to help riders learn to navigate apps, schedule trips, or access real-time information. Partnerships with local libraries, senior centers, and community colleges could provide low-cost venues for technology training. Over time, data-driven analysis should guide system design, helping the region adjust routes, hours, and policies based on actual usage trends and community feedback.

The long-term goal is a technology-enabled, data-informed transportation network that is both efficient and inclusive. Table 40 outlines specific actions to support this strategy.

Table 40: Strategy 5 Actions

Actions:	Suggested Timeline:
Upgrade to integrated routing and scheduling software compatible with PennDOT systems	Mid Term
Develop regional data-dashboard to track ridership, trip denials, and on-time performance	Mid Term
Provide digital-literacy workshops through libraries, senior centers, and partner agencies	Short Term
Pilot mobile trip-booking and real-time notifications for riders with smartphones	Mid Term
Use performance metrics to guide route adjustments and funding requests	Ongoing

Action Plan Template

The Transit Providers and Human Service Agencies provide support for the Northern Tier region's most vulnerable residents. Access to services, medical facilities and life needs is critical to many individual families and to the health and quality of life for residents of the region. A reliable transportation network is essential to allow seniors to age in place and individuals with disabilities and veterans to fully participate in the life of the community. This plan documents the collaborative efforts of stakeholders with both a vested interest in human services, and potentially the influence and resources to implement change.

The Northern Tier Regional Planning and Development Commission will continue to evaluate solutions and coordinate with the region's human services agencies and transportation providers to continue to identify transportation gaps and potential solutions to those gaps. The Coordinated Public Transit - Human Services Transportation Plan can only be effective if the region's transportation providers work together to select strategies and actions from this plan that they believe they can implement. It is critical that the providers and NTRPDC work together to ensure that the prioritized strategies/actions for implementation are financially sustainable with measurable outcomes.

An action plan template is provided to assist the NTRPDC and regional providers to prioritize and track the strategies and actions that they want to work on together to implement. It is recommended that this action plan be limited to five to eight strategies and actions that the region's providers, human service agencies, and the NTRPDC can work on together. The action plan can be coordinated and progress tracked at the committee meetings with an annual update.

Strategy	Action(s)	Responsibility	Due Dates	Comments/Progress

Appendices

Appendix A: Federal Transit Programs

The federal transit programs that are included in this plan are:

- Enhanced Mobility of Seniors and Individuals with Disabilities Program (Section 5310)
- Urbanized Area Formula Program (Section 5307)
- Formula Program for Rural Areas (Section 5311)

The following sections provide an overview of each federal transit program.

Enhanced Mobility of Seniors and Individuals with Disabilities Program (Section 5310)

The program aims to improve mobility for older adults and people with disabilities by removing barriers to transportation service and expanding transportation mobility options. This program supports transportation services planned, designed, and carried out to meet the transportation needs of older adults and people with disabilities in all areas: large urbanized (over 200,000), small urbanized (50,000-200,000), and rural (under 50,000). Section 5310 funds are available for both traditional capital investment and non-traditional investment beyond the Americans with Disabilities Act (ADA) complementary paratransit services.

Traditional Section 5310 project examples include:
- Buses and vans
- Wheelchair lifts, ramps, and securement devices
- Transit-related information technology systems, including scheduling/routing/one-call systems
- Mobility management programs
- Acquisition of transportation services under a contract, lease, or other arrangement

Nontraditional Section 5310 project examples include:

- Travel training
- Volunteer driver programs
- Construction of an accessible path to a bus stop, including curb cuts, sidewalks, accessible pedestrian signals, or other accessible features
- Improvements to signage, or wayfinding technology
- Incremental cost of providing same-day service or door-to-door service
- Purchase of vehicles to support new accessible taxi, ride-sharing, and/or vanpooling programs
- Mobility management programs

As mentioned earlier, the Section 5317 New Freedom program was a formula grant program that provided funding for capital and operating expenses that support new public transportation services beyond those required by the ADA and designed to assist individuals with disabilities with accessing transportation services. New Freedom was formerly to be addressed specifically in

Coordinated Plans, but it was repealed by MAP-21. Nevertheless, New Freedom activities are now an eligible project type under the Section 5310 program. A minimum of 55 percent of Section 5310 funds must be spent on traditional 5310 projects, while the remaining 45 percent may be spent on other projects, such as were eligible under the New Freedom program.

Federal/Local Matching Requirements: The Section 5310 federal share for eligible capital projects is up to 80 percent of the net cost of the activity (exceptions: vehicle acquisitions to support compliance with ADA or the Clean Air Act have an 85 percent and 90 percent federal match, respectively, for vehicle-related equipment and facilities). The federal share for eligible operating costs may not exceed 50 percent of the activity's net operating costs. Recipients may use up to 10 percent of their apportionment to support program administrative costs, including administration, planning, and technical assistance. The local share of eligible capital costs shall be not less than 20 percent of the activity's net cost, and the local share for eligible operating costs shall be not less than 50 percent of the net operating cost. The local share may be provided from an undistributed cash surplus, a replacement or depreciation cash fund or reserve, a service agreement with a state or local service agency or private social service organization, or new capital. Some examples of these sources of local match include state or local appropriations; dedicated tax revenues; private donations; revenue from service contracts; transportation development credits; and net income generated from advertising and concessions. Non-cash share such as donations, volunteered services, or in-kind contributions is eligible to be counted toward the local match if the value of each is documented and supported, represents a cost which would otherwise be eligible under the program, and is included in the net project costs in the project budget.

Eligible Recipients: The eligible recipients include states (for all areas under 200,000 in population) and designated recipients for large urban areas chosen by the Governor of each state. Eligible subrecipients include states or local government authorities, private non-profit organizations, or operators of public transportation that receive a Section 5310 grant indirectly through a recipient. Private operators of public transportation are eligible subrecipients. The definition of "public transportation" includes shared-ride surface transportation services. Private taxi companies that provide shared-ride taxi service to the public or to special categories of users (such as seniors or individuals with disabilities) regularly are operators of public transportation, and thus eligible subrecipients. "Shared ride" means two or more passengers in the same vehicle who are otherwise not traveling together. Similar to general public and ADA demand-response service, every trip does not have to be shared ride for a taxi company to be considered a shared-ride operator, but the general nature of the service must include shared rides.

Urbanized Area Formula Program (Section 5307)

This program provides grants to Urbanized Areas (UZAs) and to states for public transportation capital, planning, job access, and reverse commute projects, as well as operating expenses in certain circumstances. These funds constitute a core investment in the enhancement and revitalization of public transportation systems in the nation's urbanized areas, which depend on public transportation to improve mobility and reduce congestion. Examples of eligible activities include:

- Capital projects
- Planning, engineering, design, and other technical transportation-related studies

- Job access and reverse commute projects that provide transportation to jobs and employment opportunities for welfare recipients and low-income workers
- Operating costs in urbanized areas with populations less than 200,000

A partial list of eligible Section 5307 projects includes:

a) Replacement or overhaul of buses
b) Expansion of bus fleets
c) Purchase and installation of service and support equipment
d) Accessory and miscellaneous equipment such as mobile radio units, bus stop signs, supervisory vehicles, fareboxes, computers, and garage equipment
e) Construction or rehabilitation of maintenance facilities
f) Construction of other facilities (e.g., transfer facilities, intermodal terminals, and bus shelters)
g) Construction or renovation of intercity bus and intercity rail stations
h) Capital support equipment, including computer hardware, software, bus diagnostic equipment, and other equipment that enhances operating efficiency
i) Pedestrian access and walkways
j) Bicycle access, including bicycle storage facilities and installing equipment for transporting bicycles on public transportation vehicles
k) Signage
l) Vehicles, equipment, and facilities to comply with ADA
m) Crime prevention and security projects
n) Studies relating to management, operations, capital requirements, and economic feasibility
o) Late-night and weekend service
p) Guaranteed ride home service
q) Shuttle service
r) Demand-responsive van service
s) Ride-sharing and carpooling activities
t) Expanding fixed-route public transit routes, including hours of service or coverage
u) Promotion and marketing of transit use
v) Subsidizing the purchase or lease by a non-profit organization or public agency of a van or bus dedicated to shuttling employees from their residence to a suburban workplace
w) Supporting local car loan programs
x) Implementing intelligent transportation systems (ITS), including customer trip information technology, vehicle position monitoring systems, or geographic information systems software
y) Supporting mobility management and coordination programs among public transportation providers and other human service agencies providing transportation

The Section 5316 Job Access and Reverse Commute Program (JARC) was a former formula grant program for projects that improve access to employment-related transportation services for welfare recipients and eligible low-income individuals, and that transport residents of urbanized

and non-urbanized areas to suburban employment opportunities. JARC was formerly to be addressed specifically in Coordinated Plans, but it was repealed by MAP-21. Nevertheless, job access and reverse commute projects are now an eligible project type under the Urbanized Area Formula Program. Although the coordinated planning process is no longer required for job access and reverse commute projects, FTA encourages public transit systems in all areas to continue to participate in the coordinated public transit–human service transportation planning process to identify and develop job access and reverse commute projects for funding under Section 5307.

Federal/Local Matching Requirements: The Section 5307 federal share for eligible capital and planning projects is up to 80 percent of the net cost of the activity. The federal share may be 85 percent for the acquisition of vehicles and 90 percent for the cost of vehicle-related equipment or facilities (including clean fuel or alternative fuel vehicle-related equipment or facilities) for the purpose of complying with, or maintaining compliance with, the Americans with Disabilities Act and the Clean Air Act. The federal share may not exceed 50 percent of the net project cost of operating assistance. The local share of eligible capital and planning costs shall be not less than 20 percent of the activity's net cost, and the local share for eligible operating costs shall be not less than 50 percent of the net operating cost. The local share may be derived from essentially any source other than the U.S. Department of Transportation (USDOT).

Eligible Recipients: The eligible recipients include states and designated recipients for urbanized areas, which then suballocate funds to governmental authorities, including public transportation providers. A state is responsible for administering the program on behalf of all UZAs under 200,000 in population, or portions thereof that are located within its boundaries. A designated recipient is responsible for administering the program on behalf of a UZA with a population of 200,000 or more.

Formula Program for Rural Areas (Section 5311)

This program provides capital, planning, and operating assistance to states to support public transportation in rural areas with populations less than 50,000. Examples of eligible activities include:

- Capital projects
- Planning
- Job access and reverse commute projects that provide transportation to jobs and employment opportunities for welfare recipients and low-income workers
- Operating assistance
- Acquisition of public transportation services, including agreements with private providers of public transportation

A partial list of eligible Section 5311 projects includes:

a) Buses
b) Vans or other paratransit vehicles
c) Radios and communications equipment
d) Passenger shelters, bus stop signs, park and ride lots, and similar passenger amenities
e) Wheelchair lifts and restraints
f) Vehicle rehabilitation, remanufacture, or overhaul

g) Preventive maintenance
h) Computer hardware or software
i) Pedestrian and bicycle access to public transportation facilities
j) Mobility management techniques
k) Transportation plans, programs, studies, and designs
l) Job access and reverse commute projects

MAP-21 created a new eligible project category for "job access and reverse commute projects" under Section 5311. This category includes all types of projects that were formerly eligible under the Section 5316 Job Access and Reverse Commute Program. Examples of eligible projects are listed as items (o) through (y) in the Section 5307 project listing starting on page 20.

Federal/Local Matching Requirements: The Section 5311 federal share for eligible capital and planning projects is up to 80 percent of the net cost of the activity. The federal share for eligible operating costs may not exceed 50 percent of the activity's net operating costs. The local share of eligible capital and planning costs shall be not less than 20 percent of the activity's net cost, and the local share for eligible operating costs shall be not less than 50 percent of the net operating cost. The local share may be derived from essentially any source other than the USDOT. Recipients may count non-cash shares such as donations, volunteered services, or in-kind contributions toward the local match only if the recipient formally documents the value of each non-cash share, and if this value represents a cost that would otherwise be eligible under the project.

Eligible Recipients: The eligible recipients include states and Indian tribes. Eligible subrecipients include state and local governmental authorities, non-profit organizations, operators of public transportation services, and intercity bus operators.

Project Solicitation and Award

Generally, solicitation and approval for the Section 5310, Section 5307, and Section 5311 program projects is conducted by PennDOT. The NEPA MPO historically cooperated with PennDOT to promote the JARC/New Freedom program funding rounds, collect applications from area agencies, and provide funding recommendations to PennDOT. Since those programs have been repealed, the MPOs no longer participate to that extent. However, the MPO is committed to active involvement with the consolidated Section 5310 program and in situations where PennDOT desires to include the MPO in project evaluations and collaborative transit asset management approaches.

Regarding Section 5310, PennDOT leads the development of the program of projects for FTA review and approval of grant funding. PennDOT ensures that local applicants and project activities are eligible and in compliance with federal requirements, that private not-for-profit transportation providers have an opportunity to participate as feasible, and that the program provides for coordination of federally assisted transportation services. After FTA approves PennDOT's application, funds are available for state administration of the program and for allocation to individual subrecipients within the state. PennDOT has established selection criteria by which applications for Section 5310 program funding are reviewed and scored:

1. **Eligible Applicant and Eligible Project Type –** The applicant is a private, non-profit organization and has a proposed project that falls into one of the three eligible project types: vehicle replacement, fleet expansion, or new service. Vehicle replacement

projects receive priority consideration for funding, providing all other selection criteria thresholds are met.

2. **Project Need and Justification –** The applicant provides sufficient and compelling evidence to demonstrate a need for the purchase or replacement of vehicles to provide service for seniors and/or individuals with disabilities that could not be provided through existing resources. Items of consideration include projected utilization of proposed vehicles, existing utilization of fleet, and existing age and condition of existing fleet.

3. **Positive Mobility Improvements –** The proposed service to be provided by 5310 vehicles will provide a positive benefit to the mobility of senior citizens and/or individuals with disabilities and provides a service that is necessary for the quality of life of those persons. The applicant demonstrates how the project is needed to fill an identified gap in transportation for senior citizens and/or individuals with disabilities that cannot be reasonably filled otherwise and meets the requirements and intent of the FTA Section 5310 program.

4. **Local and Regional Coordination –** The applicant has coordinated with the local county shared-ride coordinator to ensure the service is not duplicative (a support letter is required). Furthermore, the applicant has stakeholder support for the project. Stakeholders may include local non-profit human service organizations, the Area Agency on Aging, local public transit agencies, and local healthcare providers, among others.

5. **Technical and Maintenance Capability to Provide Transportation –** The applicant demonstrates sufficient experience in providing human services and/or transportation and has the technical and financial capacity to operate the service for the life of the vehicle. In addition, the applicant demonstrates a comprehensive vehicle maintenance plan to ensure proper operation and maintenance for the useful life of the vehicle.

6. **Organizational, Financial, and Grant Administration Capacity –** The applicant demonstrates sufficient financial wherewithal to implement the project and operate the service for the vehicle's life. In addition, the applicant demonstrates sufficient experience in grant administration and has the organizational capacity to expend grant funding and issue quarterly reports to PennDOT on a timely basis.

7. **Matching Funds –** The applicant has demonstrated that a 20 percent non-federal match is secured and committed to the proposed project.

The FAST Act required that Section 5310 projects selected for funding must be included in a locally developed, Coordinated Public Transit–Human Services Transportation Plan. For purposes of the Coordinated Plan, FTA is willing to consider that a project is a strategy, activity, or specific action addressing an identified service gap or transportation coordination objective articulated and prioritized within the plan. Therefore, individual projects for which Section 5310 funding is sought do not need to be specifically listed in the Coordinated Plan. However, regional applicants can ensure their project's eligibility by noting how it addresses an identified service gap, goal, or transportation coordination objective listed within the Coordinated Plan. Therefore, the gaps and priorities included in this plan are intended to be comprehensive; the plan can be amended if valid projects being submitted by applicants do not relate to a gap or priority listed in the plan.

Appendix B: Stakeholder Interview Guide

Agency Role in Transportation

1. **How does your agency currently assist clients with transportation?** Do you do any of the following:

   - Operate agency vehicles
   - Contract with third-party transportation providers *(please specify)*:
   - Provide subsidies (e.g., bus passes, mileage reimbursement, direct cash assistance)
   - Assist clients with trip planning or providing transportation information. If yes, what providers do your clients typically use?

Service Performance & Client Needs

2. **What transportation programs or services are working well for your clients?**

3. **Which transportation services are not meeting client needs?**

   o Are these issues specific to certain client populations (e.g., based on disability, age, income, or location)?

4. **What major transportation challenges do your clients face?**

   o Access for persons with disabilities

   o Access to employment or job training

   o Language or cultural barriers

   o Transportation gaps by time of day/week/year

5. **Are there areas in your county that are particularly underserved by transportation? If yes, please describe.**

6. **What unmet transportation needs do your clients have that your agency does not currently assist with?**

   o Are they able to find other services to meet those needs?

Information & Outreach

7. **How do you currently inform clients about available transportation options?**

   o Are there communication methods that might be more effective?

8. **Do most of your clients have access to the internet or a smartphone?**

Affordability & Adaptation

9. **How has the cost of transportation affected your services or your clients' ability to travel?**

o   Has your agency changed how it supports transportation in the past year?

o   Have your clients reduced or changed how they travel?

Collaboration & Solutions

10. **Are there successful transportation initiatives or partnerships you've seen or been involved with that could be replicated here?**

11. **What changes or solutions would help better serve persons with disabilities, older adults, veterans, or low-income individuals in your area?**

12. **What would an ideal transportation solution look like for your clients?**

13. **Are there coordination or communication challenges between your agency and local transit providers?**

14. **How do transportation barriers impact your agency's ability to deliver services or your clients' ability to access care/support?**

Outreach & Further Engagement

15. **Are there specific clients you know who would be willing to be interviewed about their transportation experiences? If yes, please provide their name and contact (with consent).**

16. **We're also conducting a public survey. Would you be willing to help promote it via your social media, newsletters, or direct communication with clients?**

Appendix C: Passenger Experience Interview Guide

Basic Information
1. What is your age?
2. What town or borough do you live in?
3. Are you a veteran?
4. Do you require wheelchair accessible vehicles?
5. Do you have regular access to a car, or do you primarily rely on public transportation?

Transit Use Patterns
6. How often do you use public transportation services (bus or shared ride)?
7. Do you prefer fixed route service or shared-ride? (only if BeST)
8. How long have you been using public transportation?
9. What types of places do you typically travel to using these services? (Examples: doctor's appointments, grocery stores, senior center, hairdresser, work, etc.)
10. How did you first learn about public transportation in your area?

Service Coverage & Scheduling
11. Are there places you wish the transit service would take you that it currently doesn't?
12. What time of day do you most need transportation?
13. Would you use transit more often if service was available in the evenings or on weekends?

Cost & Affordability
14. Do you pay for your rides?
    15. If yes, how much is each ride?
    16. How do you pay?
17. Are there trips you would take if they weren't too expensive?

Trip Planning Process & Technology Use
18. When you decide to reserve a shared ride, can you walk me through how make the reservation? Do you call someone, use a website, or use an app?
19. Do you use a smartphone? What types of devices do you use regularly?
20. Do you prefer updates by text message, phone call, or app notification?
21. If a mobile app were available to schedule, manage, and track trips, would you use it?
22. Have you ever used "Find My Ride" (PA's one-call, one-click transportation resource)? If yes, what was your experience like?
23. How far in advance do you need to reserve your ride?
24. When is your ride confirmed?
25. Have you ever had to cancel or reschedule a trip? If so, how was that process?
26. Is there anything you appreciate—or find frustrating—about making reservations?

Boarding & Ride Experience

27. How do you usually know when your vehicle is coming or about to arrive?
28. Do you need assistance exiting your home and entering the vehicle? Does the driver assist you if needed?
29. Is it easy for you to board and exit the vehicle?
30. Do you find the ride comfortable?
31. Do you feel safe with the driver?
32. Are the vehicles clean and well-maintained?
33. How long does the ride usually last?
34. Are there usually other stops along your route?
35. Do those stops feel reasonable or do they make the trip significantly longer?
36. For your return trip, do you have a designated pickup time, or do you you have to call a driver?
37. How long do you usually wait for your return ride, is it ever late?
38. Is there anything during the ride that bothers you?

Overall Experiences

39. Overall, how would you describe your experience using public transit services?
40. Can you share a time when you had a particularly good or helpful experience?
41. How about a time when the experience was frustrating or difficult?

Alternatives & Impact

42. Do you feel that public transit helps you stay independent?
43. Do you have another option for getting around if public transportation isn't available, if yes, how would you travel?

Public Perception & Outreach

44. In your opinion, what could public transit providers do to attract more riders?
45. Would you encourage a family member or friend to try public transit? How?
46. Do you think local elected officials should support public transportation? Why or why not?
47. Is there anything else you would like to comment on in regards to public transportation in your region?

Appendix D: Public Survey Questions

Thank you for your willingness and interest in completing this survey! The Northern Tier Regional Planning and Development Commission is working in coordination with consultants from Rockland Planning and Michael Baker International to update their Local Coordinated Transit Plan. The Northern Tier region encompasses Bradford, Sullivan, Susquehanna, Tioga, and Wyoming Counties in Northern Pennsylvania. The plan aims to identify different needs and gaps within the transportation services in the region by completing a series of public outreach efforts, including this survey. The results of the survey will be used to make improvements in public transportation services. Your responses will remain confidential, and your feedback is greatly appreciated!

Public Transportation Use

1. Do you have access to a car or other vehicle? *Circle one*
    a. Yes, I own a car and drive myself
    b. Yes, a family member friend, or neighbor has a car and drives me
    c. Yes, I borrow a car and drive myself
    d. No, I do not have access to a car that is running, licensed, and insured
2. Do you currently use public transportation services (fixed-route buses or shared-ride vans) at least once a year? *Circle one*
    a. Yes
    b. No

STOP. PLEASE READ.
IF YOU ANSWERED, 'a. Yes' MOVE TO QUESTION #4. SKIP QUESTION #3.
IF YOU ANSWERED, 'b. No', ANSWER QUESTION #3 AND THEN SKIP TO QUESTION #12.

3. Why do you not use public transportation? *Circle all that apply*
    a. Service is not frequent enough/does not align with my schedule
    b. Travel takes too long
    c. Service is not offered to the locations I need
    d. Service is not reliable
    e. Fares are expensive
    f. The walk to the bus stop is too far
    g. I find the ride uncomfortable
    h. I feel safer driving
    i. I enjoy driving
    j. I am not aware of the public transportation service available to me

STOP. PLEASE READ
IF YOU HAVE JUST COMPLETED QUESTION #3, PLEASE SKIP TO QUESTION #12. THE NEXT SECTION WILL NOT BE RELEVANT TO YOU.
IF YOU SKIPPED QUESTION #3, PLEASE CONTINUE TO QUESTION #4
STOP. PLEASE READ
ONLY ANSWER QUESTIONS #4-#11 IF YOU USE PUBLIC TRANSPORTATION

4. How often do you currently use public transportation (fixed-route buses or shared-ride vans)? *Circle one*
    a. Daily (when service is operating)

b. Weekly

c. One to three times a month

d. A few times a year at most

5. What transportation service(s) do you ride/use in the region? ***Circle <u>all that apply</u>***

    a. BeST Transit - Fixed-Route Bus

    b. BeST Transit - Shared-Ride Van

    c. Susquehanna-Wyoming County Transportation (SWCT/Trehab) - Shared-Ride Van

    d. Uber/Lyft - Smartphone App-Based Ride Reservation Service

    e. Taxi/Private Car - Phone Call-Based Ride Reservation Service

6. Which transportation service do you use **<u>most</u>** frequently? ***Circle <u>one</u>***

    a. BeST Transit - Fixed-Route Bus

    b. BeST Transit - Shared-Ride Van

    c. Susquehanna-Wyoming County Transportation (SWCT) - Shared-Ride Van

    d. Uber/Lyft - Smartphone App-Based Ride Reservation Service

    e. Taxi/Private Car - Phone Call-Based Ride Reservation Service

7. When you use public transportation, what are your <u>top three</u> trip purposes? ***Circle 3 Choices***

    a. Medical appointments (doctor, dentist, therapy, etc.)

    b. Picking up prescriptions or medical supplies

    c. Employment or training

    d. Education

    e. Childcare or daycare

    f. Grocery shopping

    g. Other shopping (clothing, household items, etc.)

    h. Social visits (family, friends, social events)

    i. Religious

    j. Community services or support programs (food pantry, senior center)

    k. Volunteer work or civic activities

    l. Other_____

8. How much do you currently pay for each one-way trip when using fixed-route services? (Bus) ***Circle one***

    a. I have never ridden the bus

    b. $0.00 (Free)

    c. $0.01 - $1.00

    d. $1.01 - $2.00

    e. More than $2.00

    f. I cannot remember, it has been awhile since I have used the service

9. How much do you currently pay for each one-way trip when using shared-ride services? (Van) ***Circle one***

    a. I have never used shared-ride services

    b. $1.00

    c. $1.01- $3.00

    d. $3.01-$5.25

    e. $5.26 - $7.50

    f. $7.51-$19.99

g. $20.00-$30.00

h. More than $30.00

i. I cannot remember, it has been awhile since I have used the service

10. What is the most you are willing to pay for a one-way public transportation trip? *(Please write "N/A" if you are unwilling to use public transportation, at any cost, enter "0" if you are willing to ride, but only for free)* ***Write your answer in the space below***

11. About how much do you spend on public transportation each month? (Bus and shared-ride vans) ***Please write the amount below, please write"N/A' if you are unwilling to use public transportation and write "0" if you are willing to ride for free.***
****

12. For majority of your trips, how do you travel most often? ***Circle one***
  a. Drive alone
  b. Ride with a family member/housemate/neighbor
  c. Carpool with coworkers/volunteers
  d. Use public transportation (fixed-route bus or shared-ride van)
  e. Take a taxi/Uber/Lyft
  f. County or human service agency (like the Area Agency on Aging) provides transportation
  g. Walk
  h. Bicycle/Scooter/Motorcycle

13. Other ***Please use the space below to share how you travel***
    If your primary source of transportation is not available, how do you travel? ***Circle one***
  a. Drive alone
  b. Ride with a family member/housemate/neighbor
  c. Carpool with coworkers/volunteers
  d. Use public transportation (fixed-route bus or shared-ride van)
  e. Take a taxi/Uber/Lyft
  f. County or human service agency (like the Area Agency on Aging) provides transportation
  g. Walk
  h. Bicycle/Scooter/Motorcycle
  i. I would cancel my trip

14. Other ***Please use the space below to share how you would travel***
    In the past year, have you or any household members missed any of the following due to a lack of transportation? **(Circle "N/A" if no events were missed)** ***Circle all that apply***
  a. N/A (transportation needs have been met)
  b. Medical appointment (doctor, dentist, therapy, etc.)
  c. Picking up prescriptions or medical supplies
  d. Work or job-related activity
  e. Education
  f. Childcare or daycare
  g. Grocery shopping
  h. Other shopping (clothes, household goods, etc.)
  i. Social activities (visiting family/friends, clubs, events)
  j. Religious service

k. Community services or support programs (food banks, senior centers)

l. Court, probation, or other legal obligations

m. Other *Please use the space below to share other events that were missed*

15. During which time of day do you most need public transportation services available? *Circle one*

a. Monday through Friday, daytime (6 am to 4 pm)

b. Monday through Friday, evenings (4 pm to 11 pm)

c. Monday through Friday, overnight/early morning (11 pm to 6 am)

d. Weekends (Saturdays and Sundays, anytime)

16. In the table below, there are several strategies to improve public transportation, but there are limited amounts of funding. *Please mark the importance to you of the following strategies with an "X" in the appropriate column:*

Strategy	Not Important	Neutral	Very Important
More service on the weekends			
More service in the evenings			
More service in rural areas			
More out-of-county service			
Shorten wait times for return trips			
Prioritize medical appointments			
Improve Transit Advertising & Public Outreach			
Increase reliability/provide immediate information if ride will be late			
Lower the cost of public transportation			
Improve the comfort of the ride			

17. How do you hear about the transportation services that are available to you? *Circle all that apply*

a. Word of mouth (friends, family, neighbors)

Health care providers or clinics

School or educational institution

Social media (Facebook, Twitter/X, Instagram, etc.)

Transit provider (BeST Transit, SWCT) website

At a senior center, community center, or library

Printed materials (flyers, brochures, posters)

Bus driver or transit staff

I've never heard about available transportation services

Local newspaper or radio

Call center or customer service or PA 211

Other:
_____
_____

Community organizations or agencies (like the Area Agency on Aging, human services)

Apps Like Find My Ride/PA 511

_____
_____
_____

18. Which of the following are the best ways to let people know about transportation services in your community? *Circle all that apply*

Word of mouth from friends, family, or neighbors

Information shared by community organizations or service providers

Social media (Facebook, Twitter/X, Instagram, etc.)

Local newspaper or radio advertisements

Flyers, posters, or brochures at local businesses, post offices, or libraries

Information at senior centers, community centers, or health clinics

Direct mail to households

School newsletters or communications

Community events or information fairs

Text alerts or automated phone calls

Transit provider website or app

Public presentations or workshops

Other:_____

19. Please identify any specific locations that you need or would like to travel to that you cannot get access today. *Please use the space below*

20. Please share a time when you, or someone you assist, had a challenging travel day. *Please include where the trip started, where you were going, and why this was a challenge, or why you could not*

complete the trip in the space below.

Technology Access

21. Do you have a working cell phone? *Circle one*
    a. Yes
    b. No

    (*IF YOU ANSWERED, 'b. No', SKIP TO QUESTION #24)

22. Do you have a data plan (access to the internet) on your cell phone? *Circle one*
    a. Yes, I have a data plan with internet access on my cell phone
    b. No, but I can connect to the internet using Wi-Fi
    c. I'm not sure
    d. No, I do not have internet access on my cell phone

    (*IF YOU CIRCLED 'd', SKIP THE NEXT QUESTION (#23))

23. Do you have apps on your cell phone that you use? (e.g. Facebook, Find My Ride, Uber, Lyft, Wells Fargo/Other Mobile Banking, etc.) *Circle one*
    a. Yes, and I know how to download other apps
    b. Yes, but someone assisted me to install them
    c. No

24. Do you have an internet subscription at home? *Circle one*
    a. Yes, I use a laptop, tablet/iPad, or computer to use the internet at home
    b. Yes, but only through my cell phone
    c. Yes, but I need assistance using the internet
    d. No

    (*IF YOU CIRCLED 'a, b, or c, SKIP THE NEXT QUESTION (#25))

25. Do you have regular access to the internet elsewhere? *Please write, "Yes" or "No" and if yes, include where in the space below*

Demographic Characteristics

*We ask demographic questions to ensure that survey responses accurately reflect the diverse perspectives of the community being studied. Your responses help us identify trends, address disparities, and improve our services. However, **this section is NOT required**. All responses remain confidential. *

26. What is your zip code?
27. What county do you reside in?
    a. Bradford
    b. Sullivan
    c. Susquehanna
    d. Tioga
    e. Wyoming
28. What is your age?

a. Under 18

b. 18 to 64

c. 65 to 74

d. 75 to 84

e. 85+

29. From the list below, select which race(s) best describe you. ***Please circle one or more***

a. American Indian or Alaska Native

b. Asian

c. Black or African American

d. Native Hawaiian or Other Pacific Islander

e. White/Caucasian

f. Other ***(Please use the space below to write in other race(s))***

30. Are you of Hispanic, Latino, or Spanish origin?

a. Yes

b. No

31. Are you a person with a disability or other chronic condition?

a. Yes

b. No

32. Are you a military veteran?

a. Yes

b. No

33. How well do you speak English?

a. Not at all

b. Not well

c. Well

d. Very well

34. What is your annual household income?

a. Less than $15,000

b. $15,001 to $25,000

c. $25,001 to $40,000

d. $40,001 to $75,000

e. $75,001 to $100,000

f. Over $100,000

35. What government services do you participate in? ***Please circle all that apply***

Medical Assistance (Medicaid)	Social Security Disability Insurance (SSDI)	Free or reduced-price school meals
Medicare	Social Security Retirement Benefits	Head Start or Early Head Start
Supplemental Nutrition Assistance Program (SNAP / Food Stamps)	Veterans benefits or services (VA)	Public transportation assistance (e.g., MATP, senior shared-ride)
Women, Infants, and Children Program (WIC)	Low-Income Home Energy Assistance Program (LIHEAP)	None of the above
Temporary Assistance for Needy Families (TANF / Cash Assistance)	Housing assistance (Section 8, public housing, etc.)	Other: _____
Supplemental Security Income (SSI)	Unemployment compensation	

Appendix E: Public Survey Results

Responses Overview   Closed

Responses

87

Average Time

11:59

Duration

175 Days

1. Do you have access to a car or other vehicle?

● Yes, I own a car and drive myself	72
● Yes, a family member, friend, or neighbor has a car and drives me	2
● Yes, I borrow a car and drive myself	0
● No, I do not have access to a car that is running, licensed, and insured	13
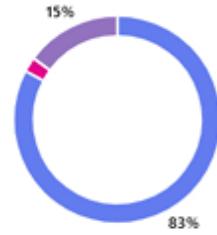
15%

83%

2. Do you currently use public transportation services (fixed-route buses or shared-ride vans) at least once a year?

● Yes	16
● No	71

18%

82%
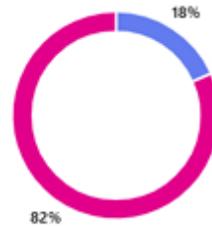
3. How often do you currently use public transportation (fixed-route buses or shared-ride vans)?

● Daily (when service is operating)	1
● Weekly	4
● One to three times a month	3
● A few times a year at most	8

6%

25%

50%

19%
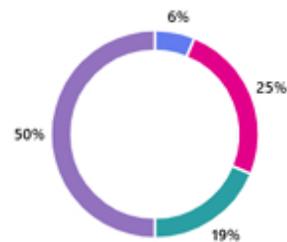
4. What transportation service(s) do you ride/use in the region? *Check all that apply*

- BeST Transit - Fixed-Route Bus — 8
- BeST Transit - Shared-Ride Van — 7
- Susquehanna-Wyoming County Transportation (SWCT/Trehab) - Shared-Ride Van — 3
- Uber/Lyft - Smartphone App-Based Ride Reservation Service — 3
- Taxi/Private Car - Phone Call-Based Ride Reservation Service — 2

9%
13%
35%
13%
13%
30%
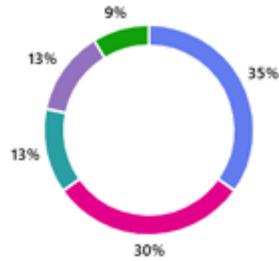
5. Which transportation service do you use **most** frequently? *Select one*

- BeST Transit - Fixed-Route Bus — 3
- BeST Transit - Shared-Ride Van — 7
- Susquehanna-Wyoming County Transportation (SWCT/Trehab) - Shared-Ride Van — 3
- Uber/Lyft - Smartphone App-Based Ride Reservation Service — 3
- Taxi/Private Car - Phone Call-Based Ride Reservation Service — 0

19%
19%
19%
19%
44%
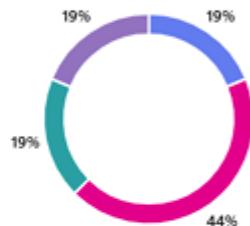
6. When you use public transportation, what are your **top three** trip purposes?

- Medical appointments (doctor, dentist, therapy, etc.) — 11
- Picking up prescriptions or medical supplies — 3
- Employment or training — 3
- Education — 0
- Childcare or daycare — 0
- Grocery shopping — 5
- Other shopping (clothing, household items, etc.) — 4
- Social visits (family, friends, social events) — 1
- Religious — 0
- Community services or support programs (food pantry, senior center) — 2
- Volunteer work or civic activities — 1
- Other — 1
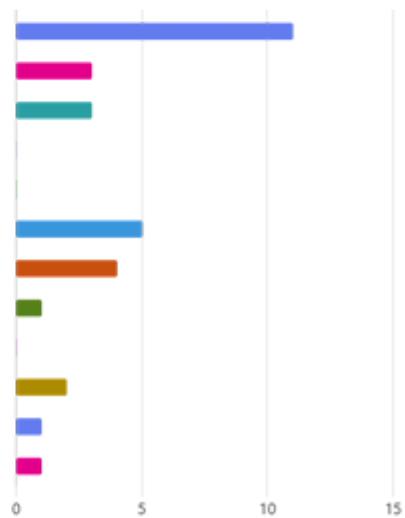
7. What is the most you are willing to pay for a one-way public transportation trip? (Please enter "NA" if you are unwilling to use public transportation, Enter "0" if you are willing to ride, but only for free)

16
Responses

Latest Responses
...

2 respondents (13%) answered 1000 for this question.

5 **rate** **1000** 2 300

8. About how much do you spend on public transportation each month? (Bus and Shared-Ride Vans)

16
Responses

Latest Responses
...

2 respondents (13%) answered 10 for this question.

Not sure 1500 **10** ^{000} 20 limit on the bus
groceries bag limit week brother

9. If you are not a user of public transportation, please indicate why. *Check all that apply* (Please select "NA" if you use public transportation)

Service is not frequent enough/does not align with my schedule	30	
Travel takes too long	12	
Service is not offered to the locations I need	29	
Service is not reliable	8	
Fares are expensive	5	
The walk to the bus stop is too far	9	
I find the ride uncomfortable	0	
I feel safer driving	9	
I enjoy driving	25	
I am not aware of the public transportation service available to me	17	
NA (I use public transportation)	2	
Other	11	
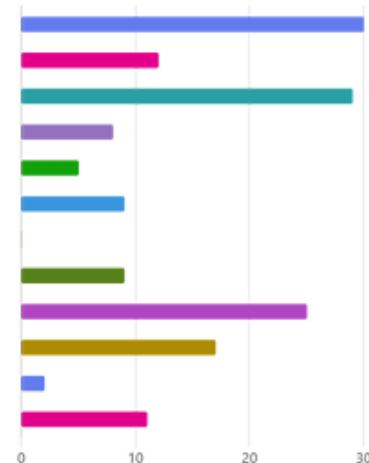
10. For majority of your trips, how do you travel **most** often? *Please select one.*

● Drive alone	52
● Ride with a family member/housemate/neighbor	23
● Carpool with coworkers/volunteers	1
● Use public transportation (fixed-route bus or shared-ride van)	7
● Take a taxi/Uber/Lyft	0
● County or human service agency (like the Area Agency on Aging) provides transportation	0
● Walk	2
● Bicycle/Scooter/Motorcycle	1
● Other	1
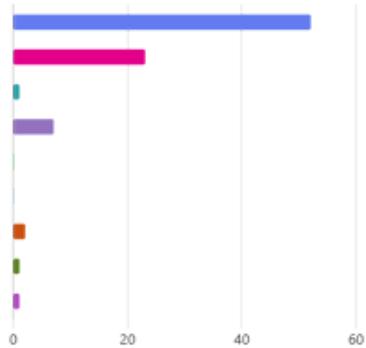
11. If your primary source of transportation is not available, how do you travel? *Please select one*

● Drive alone	13
● Ride with a family member/housemate/neighbor	39
● Carpool with coworkers/volunteers	4
● Use public transportation (fixed-route bus or shared-ride van)	4
● Take a taxi/Uber/Lyft	3
● County or human service agency (like the Area Agency on Aging) provides transportation	0
● Walk	3
● Bicycle/Scooter/Motorcycle	0
● I would cancel my trip	19
● Other	2
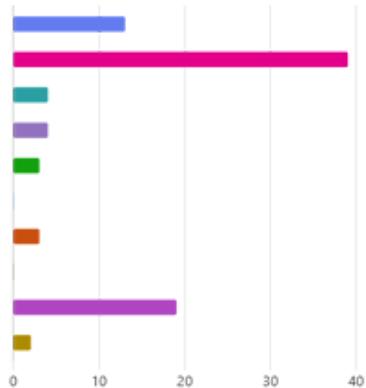
12. In the past year, have you or any household members missed any of the following due to a lack of transportation? *Please check all that pply* (Select "NA" if no events were missed)

● Medical appointment (doctor, dentist, therapy, etc.)	28
● Picking up prescriptions or medical supplies	16
● Work or job-related activity	15
● Education	1
● Childcare or daycare	2
● Grocery shopping	16
● Other shopping (clothes, household goods, etc.)	11
● Social activities (visiting family/friends, clubs, events)	10
● Religious service	3
● Community services or support programs (food banks, senior centers)	6
● Court, probation, or other legal obligations	2
● NA (transportation needs have been met)	49
● Other	3
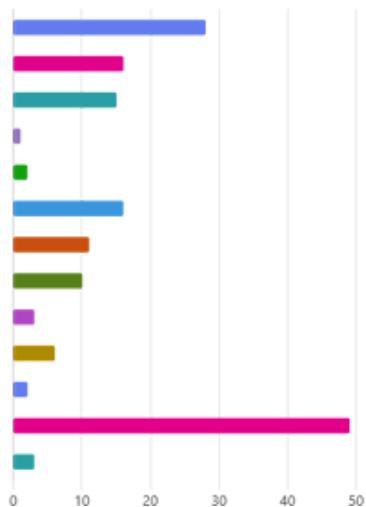
13. During which time of day do you **most** need public transportation services available?

- ● Monday through Friday, daytime (6 am to 4 pm) — 71
- ● Monday through Friday, evenings (4 pm to 11 pm) — 3
- ● Monday through Friday, overnight/early morning (11 pm to 6 am) — 3
- ● Weekends (Saturdays and Sundays, anytime) — 10
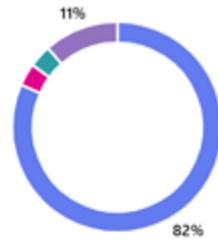
14. There are many strategies to improve public transportation and a limited amount of funding.
   Please mark the importance to you of the following strategies:

● Not Important ● Neutral ● Very Important

Improve information about available public transportation services and routes (Transportation Advertising)

More service in rural areas

More service during evenings

More out-of county/out-of region service

Lower the cost of public transportation

Improve comfort of ride/bus

Provide immediate information if ride will be late

Shorten wait times for return trips

Prioritize medical appointments

More service on weekends

15. How do you hear about the transportation services that are available to you? *Please check all that apply*

Word of mouth (friends, family, neighbors)	37
Social media (Facebook, Twitter/X, Instagram, etc.)	18
Printed materials (flyers, brochures, posters)	24
Local newspaper or radio	12
Community organizations or agencies (like the Area Agency on Aging, human services)	27
Health care providers or clinics	3
Transit provider (BeST Transit, SWCT) website	23
Bus driver or transit staff	4
Call center or customer service or PA 211	1
Apps Like Find My Ride/PA 511	0
School or educational institution	2
At a senior center, community center, or library	6
I've never heard about available transportation services	18
Other	3

16. Which of the following are the best ways to let people know about transportation services in your community? *Please check all that apply*

Word of mouth from friends, family, or neighbors	40
Information shared by community organizations or service providers	51
Social media (Facebook, Twitter/X, Instagram, etc.)	60
Local newspaper or radio advertisements	46
Flyers, posters, or brochures at local businesses, post offices, or libraries	50
Information at senior centers, community centers, or health clinics	47
Direct mail to households	39
School newsletters or communications	15
Community events or information fairs	27
Text alerts or automated phone calls	21
Transit provider website or app	32
Public presentations or workshops	19
Other	3

17. Please identify any specific locations that you need or would like to travel to that you cannot get access today.

39
Responses

Latest Responses

"Binghamton/Vestal area"

"I live in Laceyville, but in Bradford County. I've known several people without car ... "

. . .

5 respondents (13%) answered area for this question.

weekends car way need Barre area County area Vestal area
bus Towanda area appointments Gillet area
able grocery County Transportation Rome area
summit area Sayre common areas

18. Please share a time when you, or someone you assist, had a challenging travel day. Please include **where the trip started, where you were going, and why this was a challenge, or why you could not complete the trip.**

37
Responses

Latest Responses

"N/A"

"A few years ago a young couple moved into the apartment above the store wher... "

. . .

7 respondents (19%) answered appointments for this question.

grandmother had an appointment therapy appointment appointments and groceries
transportation rides work reason for appointment
late to my appointment times appointments buses bus stop
going home got home car medical appointments
appointment times doctors appointments appointment in Mansfield
appointments and opportunities

19. Do you have a working cell phone?

- Yes   83
- No   4

5%

95%
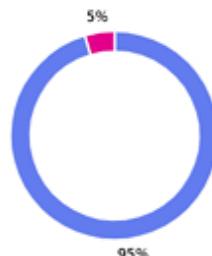
20. Do you have a data plan (access to the internet) on your cell phone?

● Yes, I have a data plan with internet access on my cell phone	74
● No, but I can connect to the internet using Wi-Fi	1
● No, I do not have internet access on my cell phone	5
● I'm not sure	3

6% 4%
89%
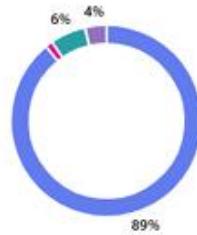
21. Do you have apps on your cell phone that you use? (e.g. Facebook, Find My Ride, Uber, Lyft, Wells Fargo/Other Mobile Banking, etc.)

● Yes, and I know how to download other apps	68
● Yes, but someone assisted me to install them	3
● No	7

9%
4%
87%
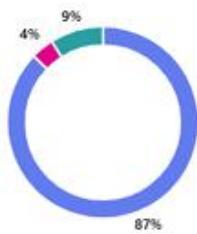
22. Do you have an internet subscription at home?

● Yes, I use a laptop, tablet/iPad, or computer to use the internet at home	71
● Yes, but only through my cell phone	8
● Yes, but I need help using the internet	2
● No	6

7%
9%
82%
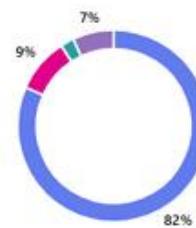
23. Do you have regular access to the internet elsewhere? If yes, please share where

6
Responses

Latest Responses
. . .

3 respondents (50%) answered no for this question.

Daughters **no**
family Yes library

24. What is your zip code? *(optional)*

76
Responses

Latest Responses
"18830"
"18465"
"18623"
...

6 respondents (8%) answered 16901 for this question.

19614 16920 18801 18822 18614
17724 18840 **16901** **18848** 18845
18837 18846 18810
16933 18623 16926 18853
18829 18629 18616

25. What county do you reside in? (optional)

● Bradford	39
● Sullivan	12
● Susquehanna	14
● Tioga	15
● Wyoming	5

6%
18%
46%
16%
14%
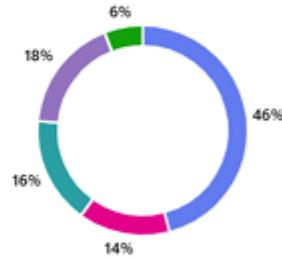
26. What is your age? (optional)

● Under 18	0
● 18 to 64	58
● 65 to 74	17
● 75 to 84	7
● 85+	2

8%
20%
69%

27. From the list below, select which race(s) best describe you. *Please select one or more* (optional)

● American Indian or Alaska Native	1	
● Asian	0	
● Black or African American	0	
● Native Hawaiian or Other Pacific Islander	0	
● White/Caucasian	81	
● Other	0	
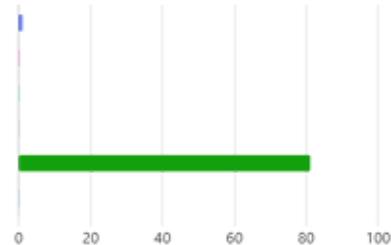
28. Are you of Hispanic, Latino, or Spanish origin? (optional)

● Yes	0
● No	81

100%

29. Are you a person with a disability or other chronic condition? (optional)

● Yes	24
● No	58

29%

71%
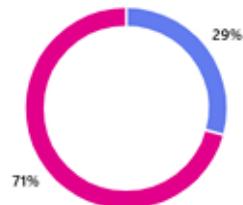
30. Are you a military veteran? (optional)

● Yes	4
● No	80

5%

95%
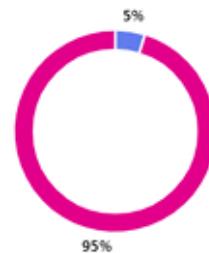
31. How well do you speak English? (optional)

● Not at all	0
● Not well	0
● Well	8
● Very well	75

10%

90%

32. What is your annual household income? (optional)

● Less than $15,000	8
● $15,001 to $25,000	9
● $25,001 to $40,000	13
● $40,001 to $75,000	18
● $75,001 to $100,000	11
● Over $100,000	13
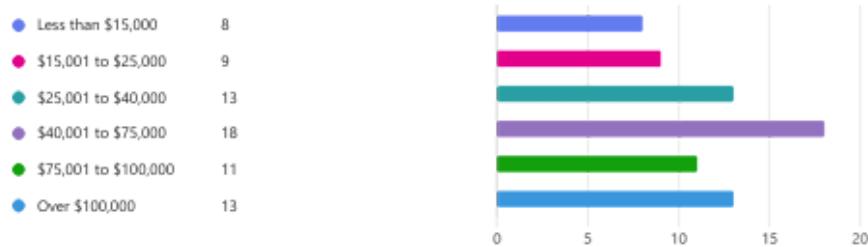
33. What government services do you participate in? *Please check all that apply* (optional)

● Medical Assistance (Medicaid)	19
● Medicare	23
● Supplemental Nutrition Assistance Program (SNAP / Food Stamps)	16
● Women, Infants, and Children Program (WIC)	1
● Temporary Assistance for Needy Families (TANF / Cash Assistance)	2
● Supplemental Security Income (SSI)	3
● Social Security Disability Insurance (SSDI)	3
● Social Security Retirement Benefits	16
● Veterans benefits or services (VA)	3
● Low-Income Home Energy Assistance Program (LIHEAP)	7
● Housing assistance (Section 8, public housing, etc.)	2
● Unemployment compensation	0
● Free or reduced-price school meals	3
● Head Start or Early Head Start	0
● Public transportation assistance (e.g., MATP, senior shared-ride)	2
● None of the above	34
● Other	0