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Appendix A: Transit Propensity Methodology

Within each region, every indicator is rescaled so the lowest observed value equals 0 and the highest equals 1; this prevents rural areas from being overshadowed by higher-density urban outliers while keeping comparisons region-specific. The rescaled percentage and density values are then combined into three component scores (representing older adults, individuals with disabilities, and zero-car households).

For each demographic group, percentage accounts for 70 percent of the component score and density accounts for 30 percent, ensuring that areas with high relative shares of transit-critical residents still rate highly even when spread over larger areas. The three component scores receive equal weight (33 percent each) and are averaged to form a single Transit Propensity Score ranging from 0 (lowest relative need) to 1 (highest).

It should be noted that cities and more urbanized areas will generally have block groups that score high to very-high for transit propensity due to higher population density, and larger populations of older adults, individuals with disabilities, and zero-car households. These urbanized areas also tend to have more transportation providers. The scale of the Transit Propensity maps do not emphasize the urbanized areas (e.g. by enlarging or offering insets) as a means of allowing attention to be drawn to regional patterns, rather than hyper-local conditions. Data compiled will allow more granular review and assessment following completion of this CHSM update process, as appropriate.

Appendix B: Virginia Navigator

The **Virginia Navigator** website and database provides the most current and complete information about human service transportation services in the Commonwealth of Virginia, including a directory of public transit, human service, and specialized transportation providers, programs, and services.

This directory categorizes all transportation providers into 19 subtypes. A selection of 12 key subtypes, including a count by region was conducted however, these counts are not representative of unique transit providers and aren't necessarily an indicator of a Region's coverage or service. Unique providers, especially large public transit agencies, are usually categorized into more than one program type, as they provide a range of services and functions. For example, Greater Richmond Transit Company in the Central Region is listed under ten different subtypes including unique types of fixed routes and paratransit services. Additionally, some public transit agencies such as District Three Governmental Cooperative (or Mountain Lynx Transit) in the Southwest Region, have a subtype listed separately multiple times due to different service area jurisdictions.

OBSERVATIONS

» The Central Region has the most provider types of all regions under Medicaid, Medical, accessible, and public transit.
» Medical transportation providers are the most common, followed by Public Accessible and Public Fixed Route providers.
» Medical transportation providers are the most common type for the Central, Northern and Tidewater Regions, underscoring the need for specialized transportation services for a range of medical conditions and needs.
» The least common categories are Private Paratransit and Flexible Schedule (found only in the Central and Northern Regions), followed by Taxi Services and Ride App Service Networks, indicating a consolidation of services within that category.
» The Central and Northern Regions have a combined 15 Ride Share & Commuting providers (other regions had 0-2).
» The Central and Northern Regions have the most Passenger Assisted (PA) providers with 10 and 17 providers, respectively. Alleghany and Tidewater have three and two PA providers, respectively, but Southwest and Western have none. This indicates the Central and Northern Regions have the highest demand for transportation from people with disabilities in the state.
» The Central and Tidewater Regions have the most number of Medicaid providers (19 and 11 respectively), which mean people in these regions have comparatively higher potential risk of losing transportation formerly funded by Medicaid.
» The Northern Region has seven Taxi Service providers, likely as a result of services needed for both Reagan National Airport and Dulles International Airport. The Central Region has the second highest number of taxi providers, with three total.
» The Western Region lacks any mobility managers.

Appendix C: References

DATA SOURCES

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» Centers for Disease Control and Prevention. (April 2025). Disability and Health Overview. U.S. Department of Health and Human Services. Webpage link
» ESRI. ArcGIS Living Atlast of the World. Webpage link
» Replica. (2025). Weekly Mobility Trends Model.
» U.S. Census Bureau. (2023). 2019-2023 American Community Survey 5-year Block Group Samples.
» Virginia Department of Rail and Public Transportation. Open Data Portal. Commonwealth of Virginia. Webpage link
» Weldon Cooper Center for Public Service. (2024). Virginia Population Projections. University of Virginia. Webpage link

PHOTO SOURCES

» National Aging and Disability Transportation Center (used with permission)
» Virginia Department of Rail and Public Transportation (grantee photos used with permission)
» Unsplash.com and Pexels.com (open-source)

Appendix D: Engagement Summary

The Virginia Department of Rail and Public Transportation (DRPT) and WSP collaborated for public participation on the Coordinated Human Services Mobility Plan (CHSM) update by engaging riders, service providers and regulatory partners. Public participation goals included:
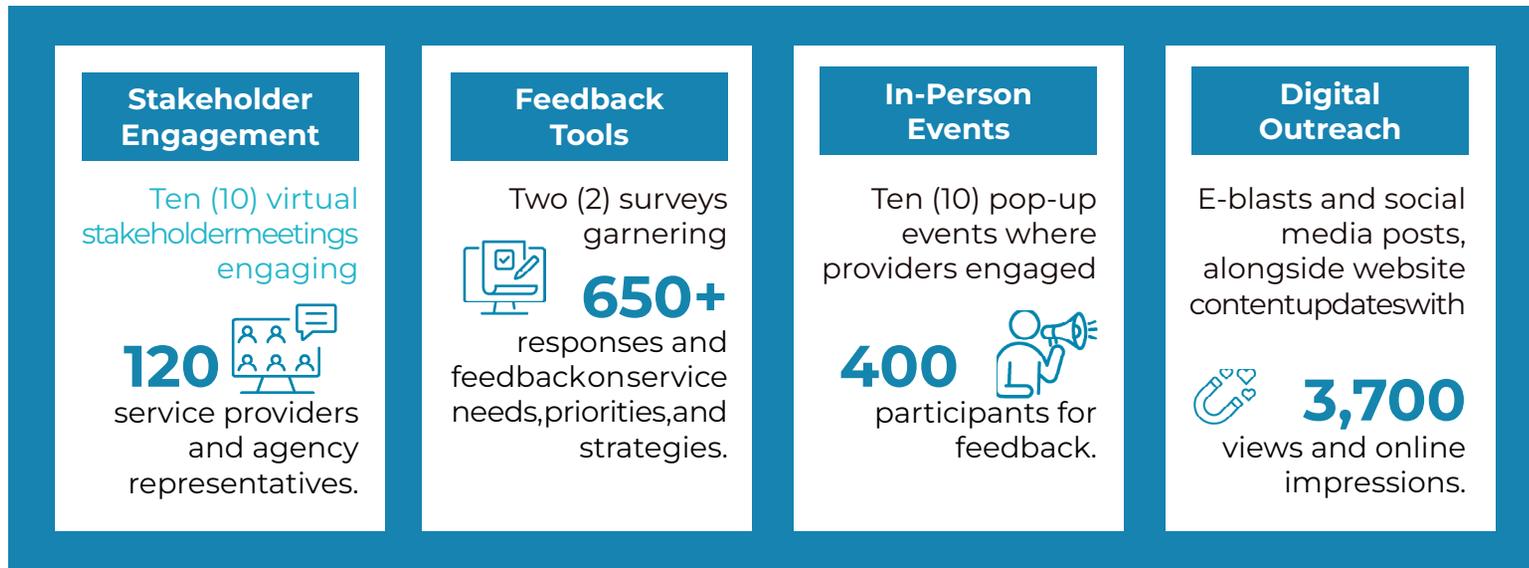
» **Partnering with stakeholders** – to collect feedback to inform the plan update and identify service gaps and needs.
» **Making engagement accessible** – for older adults and people with disabilities by meeting people where they are.
» **Having conversations in real time** – fostering engaging dialogue with community members and stakeholders.
» **Offering various channels for information access and input** – using in-person outreach in addition to digital methods.

The project team identified individuals with disabilities, seniors, veterans, people with low incomes, and their service providers as key stakeholders to inform the plan update. These included community members, mobility management professionals, private and volunteer transportation providers, community service boards, and public and human service transit agency management and board members. Engagement was organized into two phases. The first focused on understanding existing human service transportation conditions and concerns. The second prioritized understanding needs and identifying gaps, then defining goals, strategies, and actions to address them. Elements of the two-phased program are shown below.

Phase 1 Engagement	Phase 2 Engagement	
Task 3: Exisiting Conditions	**Task 4,5,6: Gap Analysis / Implementation Priorities / Mobility Management**	**Task 7: Final Report**
• Understand current conditions • Initial Statewide Survey #1 • Inter-Agency Advisory Group meeting	• Understand gaps and needs, then develop goals and strategies • Inter-Agency Advisory Group meetings • Regional Mobility Focus Group meetings • CTAV Conference, Providers Workshop Session • Service provider pop-up-in-a-box engagements • Goals and Priorities Public Survey #2 • Website updates • Close-out with stakeholders	• Final reports • Website updates
March - May 2025	**June - December 2025**	**January 2026**

Stakeholder Engagement

From learning about current service to prioritizing strategies, stakeholders provided key insights that shaped the CHSM plan. Each phase employed tools and strategies to inform target audiences of the update and to solicit their feedback. The following section describes each stakeholder group, engagement activities, and key takeaways from discussions. The CHSM team gave an overview of upcoming IAG presentations to an InterDRPT working group, which helped refine content and strategies for the following engagements. The team also engaged service providers at the 2025 Community Transportation Association of Virginia Conference and Expo to solicit pop-up in a box event hosts and collaboration for feedback on service needs and priorities. Stakeholders were engaged directly during virtual meetings featuring interactive polls and breakout group discussions. Between March and December 2025, the engagement team achieved the following:

Stakeholder Engagement	Feedback Tools	In-Person Events	Digital Outreach
Ten (10) virtual stakeholder meetings engaging **120** service providers and agency representatives.	Two (2) surveys garnering **650+** responses and feedback on service needs, priorities, and strategies.	Ten (10) pop-up events where providers engaged **400** participants for feedback.	E-blasts and social media posts, alongside website content updates with **3,700** views and online impressions.

Inter-DRPT Working Group

A core group of DRPT staff were assembled as a working group to help guide the planning process and preview findings in advance of the IAG presentations. Members of the working group also convened periodically to receive updates and provide input on outreach and communication efforts. This group met four times.

Interagency Advisory Group

An interagency advisory group (IAG) was instituted and continually updated for this campaign. This group consisted of 31 members from a range of public, human service, and transit entities. The IAG was engaged throughout the study to explore solutions to regional and statewide coordination for providing transportation services and funding, and also to inform the recommendations and implementation strategies developed by this study. The IAG provided critical input during the planning process, and shaped findings. Engagements included four meetings and invitations to participate in surveys and pop-up events.

In the initial IAG meeting, held in April, the project team introduced the DRPT and WSP team members to the group and outlined the role of the IAG. The team interacted with IAG members to learn who they are and what their roles entail. The project team shared details about upcoming group engagement efforts and the schedule, and encouraged IAG members to help spread the word about the study within their networks. In the second meeting, held in June, the team reviewed results from the first survey and examined existing conditions, including the range and demand for transportation services, funding, and challenges related to service length and availability. The group expressed a shared appreciation for these services.

In the third meeting, held in October, IAG members helped develop and refine goal statements. During breakout discussions, key IAG feedback related to strategies for these goals included:

» **Help increase funding** by leveraging nonmedical factors like social determinants of health.
» **Improve trip accessibility** by communicating vehicle lift specifications, supporting transfers, and keeping providers informed.
» **Enlist help from other transport providers** to help expand service capacity, especially for non-traditional trips.
» **Share information** such as available transportation services, staff turnover, and increase door-to-door assistance.

In the fourth and final IAG meeting, held in December, group discussions included feedback on the practicality, incentives, technical assistance, and resource needs for implementing core strategies. Key IAG feedback on the final recommended strategies included:

» **Coordinating to build capacity**, specifically including persons with disabilities in planning, ensuring training for shared scheduling software, and addressing the practicality of regional coordination, with suggestions for dedicated facilitators and state supplemental insurance for volunteer drivers.
» **Expanding services, partnerships and contracted services**, including more clarification around funding mechanisms and strategies to incentivize agency coordination and collaboration.
» **Supporting riders and resource distribution** by linking existing meetings, and enhancing marketing and outreach for available resources and their distribution at the state and local level.
» **Improving technical assistance for mobility managers** for targeted content writing and service marketing.
» **Employing alternative funding** such as fund braiding, collaboration among state agencies, and increased volunteer usage.

Mobility and Case Manager Advisory Group

This focus group was developed to better understand organizations that rely on transportation but may not directly provide it, and to identify opportunities for coordination and collaboration. This advisory group included Mobility Managers who are members of VAMM (Virginia Association of Mobility Managers) or perform mobility management as their primary function, as well as case managers who perform mobility management functions as part of their course of work. Goals for advisory group engagement included providing context on the CHSM Plan and understanding the challenges and priorities of participants in accessing transportation and service managers.

Mobility managers were convened in groups based on which CHSM region they primarily worked within (i.e., Allegany, Central, Northern, Southwest, Tidewater, or Western). Five regional focus group meetings were held to gather input, with a total of 88 participants representing a range of roles. Focus group meetings presented a regional overview, including population density, senior adults, individuals with disabilities, and work trip patterns. Meetings included interactive polling questions and invitations to participate in surveys and pop-up events. This stakeholder group's feedback was used to help inform the existing conditions report, identify gaps and needs, and formulate goals to alleviate service challenges.

The bulk of the meetings were spent discussing the work participants do and the challenges they face, specifically relating to accessing transportation and the overlap between transportation and human services. Key feedback by region follows.

6 Advisory Groups   **88** Members   **6** Meetings

ALLEGHANY REGION

General Overview:
- » Participating mobility managers indicated their primary role is to connect individuals with needed resources or services.
- » Family, friends, and neighbors are the most common transportation options in the region, followed by ADA complementary paratransit services and public transit.
- » Clients are only somewhat aware of transportation options.

Challenges:
- » Providers are unreliable, with instances of providers not showing up on time, leading to missed appointments.
- » Services have limited stops, which do not cover all necessary destinations, such as food banks and specific doctor's offices, and for general activities such as social events and grocery shopping.
- » Issues with Medicaid and Medicare transportation benefits, including low reimbursement rates and limited mileage coverage, which impact the ability to provide quality of life trips.

CENTRAL REGION

General Overview:
- » Mobility managers selected connecting individuals with needed resources or services as their primary role.
- » Clients have access to various types of transportation in the region, including public transit, Medicaid-funding transportation, Uber/Lyft and other ride-sharing services, and family, friends, and neighbors.
- » Most clients are somewhat aware of transportation options.

Challenges:
- » Rural seniors' access to reliable transportation due to long distance, poverty levels, and lack of friends and family.
- » Powered mobility aids cannot be accommodated at times due to size.
- » Scheduling transportation for non-medical trips and the challenges posed by driver shortages, with an emphasis on the need for more drivers and better coordination to meet the demand.

NORTHERN REGION

General Overview:
- » Over half the participating mobility managers chose helping groups work together as their primary role, while the others chose providing transportation, procurement, and funding coordination.
- » Clients have access to public transit, rail, Medicaid-funding transportation, ADA and volunteer services.
- » Clients are somewhat aware of transportation options, with some gaps in information and varying levels of awareness.

Challenges:
- » Gaps in transportation services, particularly for older adults with memory, cognitive, and mobility issues, as well as dialysis patients who may need more assistance after treatment. These gaps present challenges for public transit and volunteer systems. These gaps present challenges for public transit and volunteer systems.
- » Difficulty accommodating social trips like grocery shopping due to high demand for medical appointments and transportation for third-shift workers—an issue exacerbated by driver shortages.
- » Reliability issues and difficulty for users navigating Medicaid-funding transportation systems.

SOUTHWEST AND WESTERN REGION (CONVENED TOGETHER)

General Overview:
- » When asked to identify their primary role, participating mobility managers chose helping provide information and training, connecting people with services and resources, and providing transportation.
- » Clients have access to public transit, Medicaid-funding transportation, ADA, taxis, and other private providers.
- » Managers believed clients were slightly aware of transportation services in the area.

Challenges:
- » Limited service hours and access in rural areas, including areas served by Mountain Lynx Transit and Pittsylvania County.
- » The need for more accessible transportation options for medical appointments and work trips.
- » While volunteers help meet transportation needs not covered by public services, challenges arise when providing transport for people with mobility devices that do not fit in with transportation vehicles.

TIDEWATER REGION

General Overview:
- » When asked to identify their primary role, participating mobility managers chose helping individuals and groups work together, developing policy and guidance for organizational use, and assisting people to connect with needed services and resources.
- » Clients mainly had access to public transit, ADA complementary paratransit services, and Uber/Lyft and other ride-sharing companies.
- » Clients were believed to be very aware of transportation options in the region.

Challenges:
- » Out-of-reach areas, limited-service hours, and the need for smaller vehicles for individuals with disabilities.
- » Driver shortages, geographic distances.
- » The need for additional funding.

Key Takeaways

» **Resource and Funding Constraints**: Participants consistently cited limited funding and resource availability as a primary barrier to expanding and improving transportation services, with agencies often needing to pool resources or coordinate across funding streams to maximize impact.

» **Provider and Organizational Capacity**: There are widespread challenges related to provider capacity, including driver shortages, staff turnover, and the administrative burden of managing programs and grant requirements, which impact the ability to meet growing demand. Additional challenges included finding drivers with clean records or specialized training, training drivers to understand the needs of the disability community, and high rates of no-shows and last-minute cancellations.

» **Service Limitations and Accessibility**: Service gaps include limited availability of non-medical trips, insufficient same-day or next-day service, lack of weekend service, and inadequate vehicle accessibility for those with mobility aids or special needs.

» **Coordination and Communication Barriers**: Coordination between transportation providers, human service agencies, and medical facilities is often inconsistent, with a need for formalized collaboration to address cross-jurisdictional travel needs.

» **Urban-Rural Differences**: Challenges vary by geography, with rural areas facing administrative capacity issues and difficulties crossing jurisdictional boundaries. Urban areas report higher demand for medical assistance during trips and less awareness of available services. This includes discrepancies such as ride-sharing services like Uber and Lyft not being universally available.

Key Strategies

» **Potential Statewide Strategies**: Seeking new funding sources, increasing use of volunteer networks, creating time banks, and enhancing participation of nonprofit organizations to expand service capacity.

» **Regional Mobility Management**: The establishment of regional mobility managers who can assist providers with funding opportunities, reporting, administrative tasks, and facilitate coordination between transportation and human service agencies.

» **Technical Assistance and Coordination**: Medicaid reimbursement, vehicle procurement, technology upgrades, and public engagement, with strategies tailored to regional needs based on focus group input.

» **Stakeholder Prioritization**: New or improved local public transit, acquisition of new vehicles, and increased use of volunteer drivers are top priorities for stakeholders. These priorities were followed by coordination and technology improvements.

Community Transportation Association of Virginia Workshop

In August, the DRPT team attended the Community Transportation Association of Virginia (CTAV) Workshop Event and presented on the CHSM Plan and engagement efforts. The team provided an overview of DRPT's role, the CHSM Plan update purpose and goals, stakeholder and public engagement strategies used to help inform the plan, and feedback on the top barriers and provider challenges from surveys.

Stakeholders provided feedback through active discussion and activities including a worksheet to "Spend $20" on select service improvement categories and line items, a brainstorming session to solve transportation gaps, an activity to provide feedback on transportation barriers and improvement strategies in corners around the room, and an invitation to host a pop-up event and remain in touch with the project team.

Key feedback included:

1. Service Capacity

   » Services must follow funding source requirements
   » Unrealistic expectations of transportation
   » More requests for rides than can be provided
   » Working around transit service areas

2. Organizational Capacity

   » Driver shortages, staff turnover
   » Limited staffing, staff stretched thin
   » Focus on urgent needs limits time for thinking about future, strategically

3. Human Services

   » Coordination with medical facilities
   » 'Screening' destinations to ensure riders will receive care
   » Limited assistance that can be provided to riders, particularly at destinations

Digital Tools

	1 Social Media Post		**1** Website		**10** Pop-Up Events		**2** Surveys

DRPT and WSP worked together to ensure the public's understanding of the Plan's purpose and objectives. WSP developed content for the project website and social media posts, in addition to pop-up materials and handouts. These items were shared with riders to encourage participation and with stakeholder organizations for distribution to their networks.

PLAN WEBSITE

Link: https://drpt.virginia.gov/coordinated-human-service-mobility-plan/

The CHSM webpage, hosted on the Virginia DRPT's existing website, was used to publish background information about the CHSM Plan, share the update process, and promote each public engagement activity. The webpage provided a convenient hub for the public to access all educational materials and surveys, was available via computer or mobile device, and ADA accessible for visually impaired visitors. WSP provided DRPT with webpage content at key phases of the Plan update to highlight development, milestones, and materials of the CHSM. The CHSM Plan project website garnered 854 unique visits.

SOCIAL MEDIA

- » Program background information
- » Links to surveys
- » Pop-Up in a box packets
- » Goal and Prioritization Summary handouts

E-BLASTS

E-blasts, or mass email messages, were also distributed using Constant Contact to share information with those who elect to receive updates through DRPT's email subscription service, reaching members of the public and DRPT's inner network. In conjunction with the program website and social media posts, e-blasts helped publicize the plan update, pop-up events, and the survey. This approach increased reach, especially for service provider sign-ups to host pop-up events. DRPT distributed the e-blasts to 1,539 subscribers and garnered an average 31.2% open rate.

Pop-Up in a Box Events

10 In-person Events   **400** People Engaged   September – October 2025

WSP and DRPT partnered with the IAG and mobility managers to host pop-up events, informing riders of the Plan update and collecting feedback on service needs and improvements. Stakeholders hosted pop-ups to gather feedback on the CHSM Plan at the time and place of their choice. Hosts were provided with a pop-up engagement kit with the following items:

» **"How to Host" Instructions** – providing guidance on selecting a location, time and place, staffing, and reporting on key takeaways.
» **Pop-up Sign** – with project branding, background information, and a QR code to share comments.
» **CHSM Plan Factsheet** – providing background on the CHSM planning process, existing conditions, service gaps, and ways to contact the project team.
» **Participant Feedback Form** (digital form and paper copy) – collecting information on respondent ages, locations, transportation usage and preferred improvements.
» **Host Event Report** – to share insights and comment forms.

No.	Organization	Days	Pop-Up Location(s)
1	West Piedmont Planning District Commission	1	Danville Transit Hub (Danville, Va.)
2	Giles Health and Family Center	1	Pearishburg, Va.
3	GWRideConnect	2	FXBGO! Central (Fredericksburg, Va.)
4	GWRideConnect	2	25 Chalice Ln (Fredericksburg, Va.)
5	GWRideConnect	1	Regional Housing Summit, Fredericksburg Convention Center (Fredericksburg, Va.)
6	CVPDC	1	GLTC (Lynchburg, Va.)
7	Roanoke County	1	Ft. Lewis Elementary (Salem, Va.)
8	Resources for Independent Living Inc.	~	Mobility Works (Alexandria, Va.)
9	Thomas Jefferson Planning District Commission/ PATH	2	The Center at Belvedere (Charlottesville, Va.)
10	New River Valley Senior Services/Pulaski Area Transit	2	44 Third Street NW (Pulaski, Va.)

Events and Feedback Overviews

Mobility managers and service providers held 10 in-person events and gathered feedback from over 400 participants. Events were held for one or two days, generally lasting 2 - 2.5 hours. Stakeholders used tables to present engagement materials and increase visibility. Participants were mainly from the Roanoke-Alleghany area, predominantly older, low-income residents who were largely unaware of the CHSM Plan. Participants favored better transportation option eligibility information as a recommended improvement. Feedback highlights include:

» Requests for more weekend and evening service
» Request for more buses to reduce headway
» Request for more bus stops
» Drivers generally helpful to help riders understand routes
» Issues with route availability and time to make appointments
» Transportation barriers to receiving care and housing
» Printed schedules needed at stops

Online Comment Form Feedback

The digital and physical comment form provided the following feedback from 234 respondents. These results were used as part of IAG meeting discussion points to further support the development of goals and definition of core strategies for transportation improvements.

» 43% were 65 or older
» Over half (52%) had someone in their household with a disability that limits mobility
» Respondents used families, friends, and neighbors, public transit, among other types of transportation (e.g., personal vehicle) most frequently
» Most travelled to grocery or other retail shopping, one-time/annual medical, dental, or other health services, among other medical trips.
» #1 strategy to improve mobility: Better information for residents on transportation option eligibility (43%)
» #2 strategy to improve mobility: New or improved local bus and public transit service (38%)
» #3 strategy to improve mobility: More drivers (29%)
» Other suggested improvements included:
» Public transportation in rural areas
» Wider coverage areas

SURVEYS

Platforms: SurveyHero and Survey Monkey
Total Respondents: 655

WSP developed and implemented two (2) surveys to collect input from the public and stakeholders, deploying one survey at the beginning of the project and one near the end. WSP worked with DRPT to develop content and graphics and deployed the survey on SurveyMonkey and SurveyHero.com, gathering input from 655 riders and service providers. Surveys were written clearly and kept concise to respect participants' time, using survey logic to ensure respondents were only required to answer questions related to their specific experiences.

INITIAL STATEWIDE SURVEY

577 Respondents

April – May 2025

The initial statewide survey was launched to gather information on access to services and transportation needs and enhancements. The survey was conducted among Virginia transportation providers and riders, receiving 577 responses, with 241 from riders and 332 from providers. Key findings include:

- 40% of providers operate transportation directly and 34% provided case management services.
- 67% of riders rely on family, friends, and neighbors for transportation while 37% use public transit, and 36% use ride sourcing services.
- The most needed enhancements identified were service accessibility and expansion, service frequency and reliability, and affordability.
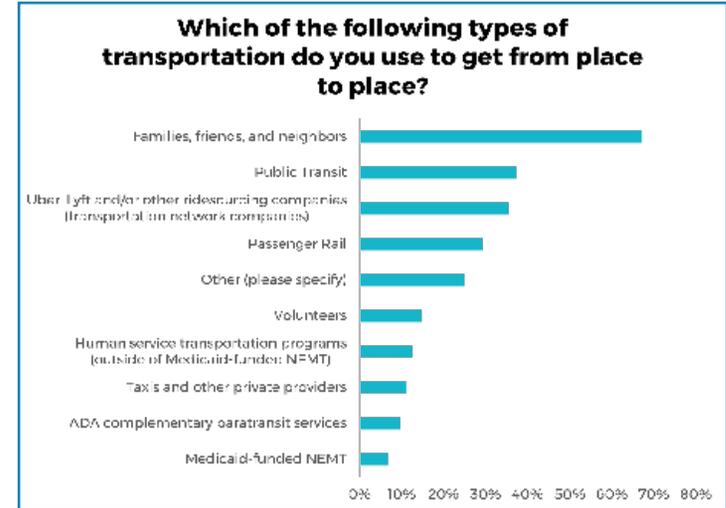

Figure 7: All rider responses to question from Initial Statewide survey regarding transportation types utilized
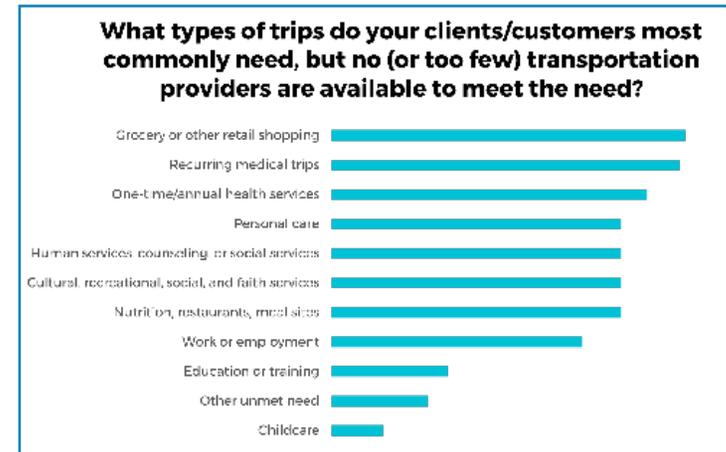

Figure 8: All provider responses to question from Initial Statewide survey regarding most needed trip

Appendix E: Service Providers

Service Provider	Type	Eligibility	Service Area
Alexandria Transit Company (DASH)	🚌	All	Alexandria city
Altavista Community Transit System (ACTS)	🚌	All	Campbell County
American Cancer Society (Road to Recovery)	♥	Demographic	Chesterfield County, Henrico County, Richmond city
Arlington County Transit (ART)	🚌	All	Arlington County
Autism Sanctuary*	♥	Client Based	Albemarle County, Augusta County, Charlottesville city, Fluvanna County, Greene County, Harrisonburg city, Nelson County, Rockingham County, Staunton city, Waynesboro city
Bay Transit	🚌	All	Charles City County, Essex County, Gloucester County, King William County, King and Queen County, Lancaster County, Mathews County, Middlesex County, New Kent County, Northumberland County, Richmond County, Westmoreland County
Bedford Ride (administered by CVAAA)	♥	Demographic	Bedford County
Blacksburg Transit	🚌	All	Montgomery County
Blackstone Area Bus System (BABS)	🚌	All	Amelia County, Brunswick County, Buckingham County, Cumberland County, Dinwiddie County, Lunenburg County, Nottoway County, Petersburg city, Prince Edward County
Blue Ridge Behavioral Healthcare	♥	Client Based	Botetourt County, Craig County, Roanoke County, Roanoke city, Salem city
Blue Ridge Opportunities	♥	Client Based	Warren County
Botetourt County Senior Citizens	♥	Demographic	Botetourt County, Roanoke County, Roanoke city, Salem city
Bristol Virginia Transit	🚌	All	Bristol city
Capital Area Health Network (CAHN)	♥	Client Based	Richmond city
Capital Area Partnership Uplifting People (CAP-UP)*	♥	Demographic	Goochland County, Hanover County, Powhatan County
Central Shenandoah Planning District Commission (BRITE)	🚌	All	Albemarle County, Augusta County, Charlottesville city, Harrisonburg city, Rockingham County, Staunton city, Waynesboro city
Central Virginia Alliance for Community Living (CVACL)*	♥	Demographic	Amherst County, Appomattox County, Bedford County, Campbell County, Lynchburg city
Charlottesville Area Transit (CAT)	🚌	All	Albemarle County, Charlottesville city

🚌 Public Transportation Provider

♥ Human Services Transportation Provider

* Current Recipient of FTA 5310 Funding

Service Provider	Type	Eligibility	Service Area
Chesterfield Community Services Board (CSB)*	♥	Client Based	Chesterfield County
Chesterfield County Access*	♥	Demographic	Chesterfield County, Colonial Heights city, Goochland County, Hanover County, Henrico County, Hopewell city, Petersburg city, Powhatan County, Prince George County, Richmond city
Chincoteague Pony Express	🚌	All	Accomack County
City of Fairfax (CUE)	🚌	All	Fairfax city
City of Martinsville Senior Center*	♥	Demographic	Martinsville city
Colonial Behavioral Health*	♥	Client Based	James City County, Poquoson city, Williamsburg city, York County
County of Roanoke (CORTRAN)*	♥	Demographic	Roanoke County, Roanoke city, Salem city
Crater District Area Agency on Aging*	♥	Demographic	Colonial Heights city, Dinwiddie County, Greensville County, Hopewell city, Petersburg city, Prince George County, Surry County, Sussex County
Crossroads Community Services*	♥	Client Based	Amelia County, Buckingham County, Charlotte County, Cumberland County, Lunenburg County, Nottoway County, Prince Edward County
Danville Parks & Recreation - Ballou Recreation Center*	♥	Demographic	Danville city
Danville Parks & Recreation - Stonewall Therapeutic Recreation Center*	♥	Demographic	Danville city
Danville Transit	🚌	All	Danville city, Pittsylvania County
Danville-Pittsylvania Community Services*	♥	Client Based	Danville city, Pittsylvania County
Eastern Shore Area Agency on Aging (AAA)*	♥	Demographic	Accomack County, Northampton County
Eastern Shore Center for Independent Living	♥	Demographic	Accomack County, Northampton County
Eastern Shore Community Services Board	♥	Client Based	Accomack County, Northampton County
Edwards Adult Day Center*	♥	Client Based	Franklin County, Henry County, Martinsville city, Patrick County, Pittsylvania County
Eggleston Services*	♥	Client Based	Norfolk city
enCircle*	♥	Client Based	Amherst County, Bedford County, Campbell County, Lynchburg city

🚌 Public Transportation Provider

♥ Human Services Transportation Provider

* Current Recipient of FTA 5310 Funding

Service Provider	Type	Eligibility	Service Area
Encompass Community Supports*	♥	Client Based	Culpeper County, Fauquier County, Madison County, Orange County, Rappahannock County
Every Citizen Has an Opportunity (ECHO)	♥	Client Based	Loudoun County
Fairfax Connector	🚌	All	Alexandria city, Arlington County, Fairfax County, Falls Church city, Loudoun County
Fairfax County TOPS (Transportation Subsidy)	♥	Demographic	Fairfax County
Families of Autistic Children of Tidewater (FACT)*	♥	Client Based	Chesapeake city, Franklin city, Hampton city, Newport News city, Norfolk city, Portsmouth city, Suffolk city, Virginia Beach city, Williamsburg city
Farmville Area Bus (FAB)	🚌	All	Prince Edward County
Fastran	♥	Demographic	Fairfax County, Fairfax city, Falls Church city
Four County Transit	🚌	All	Buchanan County, Dickenson County, Russell County, Tazewell County
Franklin County Department of Aging Services*	♥	Demographic	Franklin County, Martinsville city, Roanoke city, Salem city
Fredericksburg Regional Transit (FXBGO!)	🚌	All	Fredericksburg city, Spotsylvania County, Stafford County
Giles Health and Family Center*	♥	Demographic	Craig County, Giles County, Montgomery County, Pulaski County, Radford city, Wythe County
GoochlandCares*	♥	Demographic	Goochland County, Henrico County, Richmond city
Grafton School*	♥	Client Based	Chesterfield County, Clarke County, Frederick County, Richmond city, Winchester city
Graham Transit	🚌	All	Tazewell County
Greater Lynchburg Transit Company (GLTC)	🚌	All	Amherst County, Campbell County, Lynchburg city
Greater Richmond Transit Company (GRTC)	🚌	All	Chesterfield County, Henrico County, Richmond city
Greensville-Emporia Transit	🚌	All	Emporia city, Greensville County
GRTC's CARE	🚌	Demographic	Chesterfield County, Henrico County, Richmond city
Hampton Newport News Community Services Board (HNNCSB)*	♥	Client Based	Hampton city, Newport News city
Hampton Roads Transit (HRT)	🚌	All	Chesapeake city, Hampton city, Isle of Wight County, Newport News city, Norfolk city, Portsmouth city, Suffolk city, Virginia Beach city

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Service Provider	Type	Eligibility	Service Area
Hampton-Newport News Community Services Board*	♥	Client Based	Hampton city
Hanover DASH*	♥	Demographic	Hanover County
Harrisonburg Department of Public Transportation (HDPT)	🚌	All	Harrisonburg city, Rockingham County
Harrisonburg Rockingham Community Services Board (HRCSB)	♥	Client Based	Harrisonburg city, Rockingham County
Healthy Generations Area Agency on Aging*	♥	Demographic	Caroline County, Fredericksburg city, King George County, Spotsylvania County, Stafford County
Heart Havens*	♥	Client Based	Augusta County, Hanover County, Henrico County, Lynchburg city, Richmond city, Staunton city, Virginia Beach city, Waynesboro city
Henry County Parks and Recreation*	♥	Demographic	Henry County
Human Kind	♥	Client Based	Lynchburg city
Human Kind/Ways to Work	♥	Client Based	Chesterfield County, Henrico County, Richmond city
Independent Living Services for the Piedmont Area (ILSPA)	♥	Client Based	Danville city, Franklin County, Henry County, Martinsville city, Patrick County, Pittsylvania County
Insight Enterprises, Inc. Peninsula Center for Independent Living (IEPCIL)	♥	Demographic	Hampton city, Newport News city, York County
JAUNT	🚌	All	Albemarle County, Buckingham County, Charlottesville city, Fluvanna County, Louisa County, Nelson County
Jefferson Area Board of Aging (JABA)	♥	Demographic	Albemarle County, Buckingham County, Charlottesville city, Fluvanna County, Louisa County, Nelson County
Lake Country Area Agency on Aging	🚌	All	Halifax County, Mecklenburg County
Lets Go Services*	♥	Demographic	Hanover County, Henrico County, Richmond city
Local Office on Aging – Roanoke Valley	♥	Demographic	Botetourt County, Craig County, Roanoke County, Roanoke city, Salem city
Loudoun County (LC Transit)	🚌	All	Fairfax County, Loudoun County
Loudoun County Area Agency on Aging	♥	Demographic	Loudoun County

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Service Provider	Type	Eligibility	Service Area
Loudoun County Department of Family Services	♥	Demographic	Loudoun County
Loudoun Volunteer Caregivers	♥	Demographic	Loudoun County
Mechanicsville Churches Emergency Function Senior Rides	♥	Demographic	Hanover County
Middle Peninsula / Northern Neck CSB	♥	Client Based	Essex County, Gloucester County, King William County, King and Queen County, Lancaster County, Mathews County, Middlesex County, Northumberland County, Richmond County, Westmoreland County
Mount Rogers Community Services Board*	♥	Client Based	Bland County, Carroll County, Galax city, Grayson County, Smyth County, Wythe County
Mountain Empire Older Citizens (MEOC)	🚌	All	Lee County, Norton city, Scott County, Wise County
Mountain Lynx	🚌	All	Bland County, Carroll County, Galax city, Grayson County, Smyth County, Washington County, Wythe County
New River Valley Agency on Aging— MedRide*	♥	Demographic	Floyd County, Giles County, Montgomery County, Pulaski County, Radford city
New River Valley Agency on Aging— Senior Services Inc.*	♥	Demographic	Floyd County, Giles County, Montgomery County, Pulaski County, Radford city
New River Valley Community Services*	♥	Demographic	Floyd County, Giles County, Montgomery County, Pulaski County, Radford city
Norfolk Community Services Board	♥	Client Based	Norfolk city
Northwestern Community Services (CSB)*	♥	Client Based	Clarke County, Frederick County, Page County, Shenandoah County, Warren County, Winchester city
NW Works	♥	Client Based	Winchester city
OmniRide	🚌	All	Arlington County, Fairfax County, Manassas Park city, Manassas city, Prince William County
PARC Workshop, Inc.	♥	Client Based	Patrick County
Peninsula Agency on Aging (PAA)*	♥	Demographic	Hampton city, James City County, Newport News city, Poquoson city, Williamsburg city, York County
Petersburg Area Transit (PAT)	🚌	All	Colonial Heights city, Hopewell city, Petersburg city, Prince George County
Piedmont Community Services (CSB)	♥	Client Based	Martinsville city

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Service Provider	Type	Eligibility	Service Area
Piedmont Senior Resources Area Agency on Aging*	♥	Demographic	Amelia County, Buckingham County, Charlotte County, Cumberland County, Lunenburg County, Nottoway County, Prince Edward County
Pittsylvania County Community Action*	♥	Demographic	Pittsylvania County
Pleasant View*	♥	Client Based	Harrisonburg city, Rockingham County
PORTCO, Inc.*	♥	Client Based	Norfolk city, Portsmouth city, Virginia Beach city
Powhatan County DSS*	♥	Demographic	Powhatan County
Prince William Area Agency on Aging	♥	Demographic	Manassas Park city, Manassas city, Prince William County
project:HOMES*	♥	Client Based	Richmond city
Pulaski Area Transit	🚌	All	Pulaski County
RADAR	🚌	All	Alleghany County, Buena Vista city, Covington city, Franklin County, Henry County, Lexington city, Martinsville city, Rockbridge County
Radford Transit	🚌	All	Montgomery County, Pulaski County, Radford city
Rappahannock Area Community Services Board (RACSB)*	♥	Client Based	Caroline County, King George County, Spotsylvania County, Stafford County
RappRides	♥	Demographic	Fauquier County, Page County, Warren County
Region 10 Community Services Board (CSB)	♥	Client Based	Albemarle County, Fluvanna County, Greene County, Louisa County, Nelson County
Rockbridge Area Community Services Board (RACS)	♥	Client Based	Rockbridge County
Rockbridge Area Occupational Center, Inc.	♥	Client Based	Rockbridge County
Rockbridge Area Transportation System (RATS)*	♥	All	Alleghany County, Bath County, Rockbridge County
Rockingham County Transportation (Department of Social Services)	♥	Demographic	Rockingham County
Senior Services of Southeastern VA, SSSEVA (I-Ride)*	♥	All	Caroline County, Chesapeake city, Franklin city, Hanover County, Henrico County, Isle of Wight County, King George County, Newport News city, Norfolk city, Poquoson city, Portsmouth city, Southampton County, Suffolk city, Suffolk city, Virginia Beach city, Windsor town, York County

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Service Provider	Type	Eligibility	Service Area
Shenandoah Area Agency on Aging – Senior Center Transportation*	♥	Demographic	Clarke County, Frederick County, Page County, Shenandoah County, Warren County, Winchester city
Shenandoah Area Agency on Aging – Well Tran*	♥	Demographic	Caroline County, Charlottesville city, Harrisonburg city, King George County, Spotsylvania County, Stafford County
Acti-Kare in Home Care	♥	Demographic	Chesterfield County, Goochland County, Hanover County, Henrico County, Petersburg city, Richmond city
Angels for Hire/Angel Ride	♥	Demographic	Chesterfield County, Henrico County, Richmond city
Colonial Transit	♥	All	James City County, Williamsburg city
First Choice Transport, Inc.	♥	Demographic	Harrisonburg city, Rockingham County
Helping Hands Transit	♥	All	Floyd County
Mobility Transportation, LLC	♥	All	Chesterfield County, Henrico County, Richmond County
New Freedom Transportation, LLC	♥	All	Richmond city
Pink Transportation	♥	All	Colonial Heights city, Hopewell city, Petersburg city
Seniors Helping Seniors	♥	Demographic	Henrico County, Richmond city
Tendercare Transport	♥	Demographic	Goochland County, Hanover County, Henrico County, Louisa County, Richmond County
Van Go	♥	Demographic	Chesterfield County, Colonial Heights city, Goochland County, Hanover County, Henrico County, Hopewell city, Petersburg city, Powhatan County, Richmond city
VIP & Associates	♥	Demographic	Charles City County, Chesterfield County, Colonial Heights city, Goochland County, Hanover County, Henrico County, Hopewell city, New Kent County, Petersburg city, Powhatan County, Richmond city
Shen-Paco Industries*	♥	Client Based	Page County, Shenandoah County
Shepherd's Center of Chesterfield	♥	Demographic	Chesterfield County, Colonial Heights city, Dinwiddie County, Hopewell city, Prince George County, Richmond city
Shepherd's Center of Richmond	♥	Demographic	Richmond city
SOAR 365*	♥	Client Based	Chesterfield County, Goochland County, Hanover County, Henrico County, Powhatan County, Richmond city

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Southern Area Agency on Aging (SAAA)*	♥	Demographic	Danville city, Franklin County, Henry County, Martinsville city, Patrick County, Pittsylvania County
Southside Behavioral Health*	♥	Client Based	Brunswick County, Halifax County, Mecklenburg County
Southside Training Employment and Placement Services (STEPS)	♥	Client Based	Prince Edward County
St. Joseph's Villa*	♥	Client Based	Hanover County, Henrico County, Louisa County , Petersburg city, Powhatan County, Richmond city, Williamsburg city
St. Joseph's Villa*	♥	Client Based	Richmond city
STAR Transit	🚌	All	Accomack County, Northampton County
STEPS, Inc.*	♥	Client Based	Cumberland County, Prince Edward County
Suffolk Transit	♥	All	Chesapeake city, Suffolk city
Support to Eliminate Poverty (STEP)	♥	Demographic	Patrick County
The Arc of Augusta	♥	Client Based	Augusta County, Staunton city, Waynesboro city
The Arc of Central Virginia	♥	Client Based	Amherst County, Appomattox County, Bedford County, Campbell County, Lynchburg city
The Arc of Greater Prince William/ INSIGHT, Inc,	♥	Client Based	Manassas Park city, Manassas city, Prince William County
The Arc of Greater Williamsburg	♥	Client Based	Williamsburg city
The Arc of Harrisonburg and Rockingham*	♥	Client Based	Augusta County, Harrisonburg city, Harrisonburg city, Page County, Rockingham County
The Arc of the Virginia Peninsula	♥	Client Based	Essex County, Gloucester County, Hampton city, King William County, King and Queen County, Lancaster County, Mathews County, Middlesex County, Newport News city, Northumberland County, Poquoson city, Richmond County, Westmoreland County, York County
The SPAN Center*	♥	Demographic	Charles City County, Chesterfield County, Goochland County, Hanover County, Henrico County, New Kent County, Powhatan County, Richmond city

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