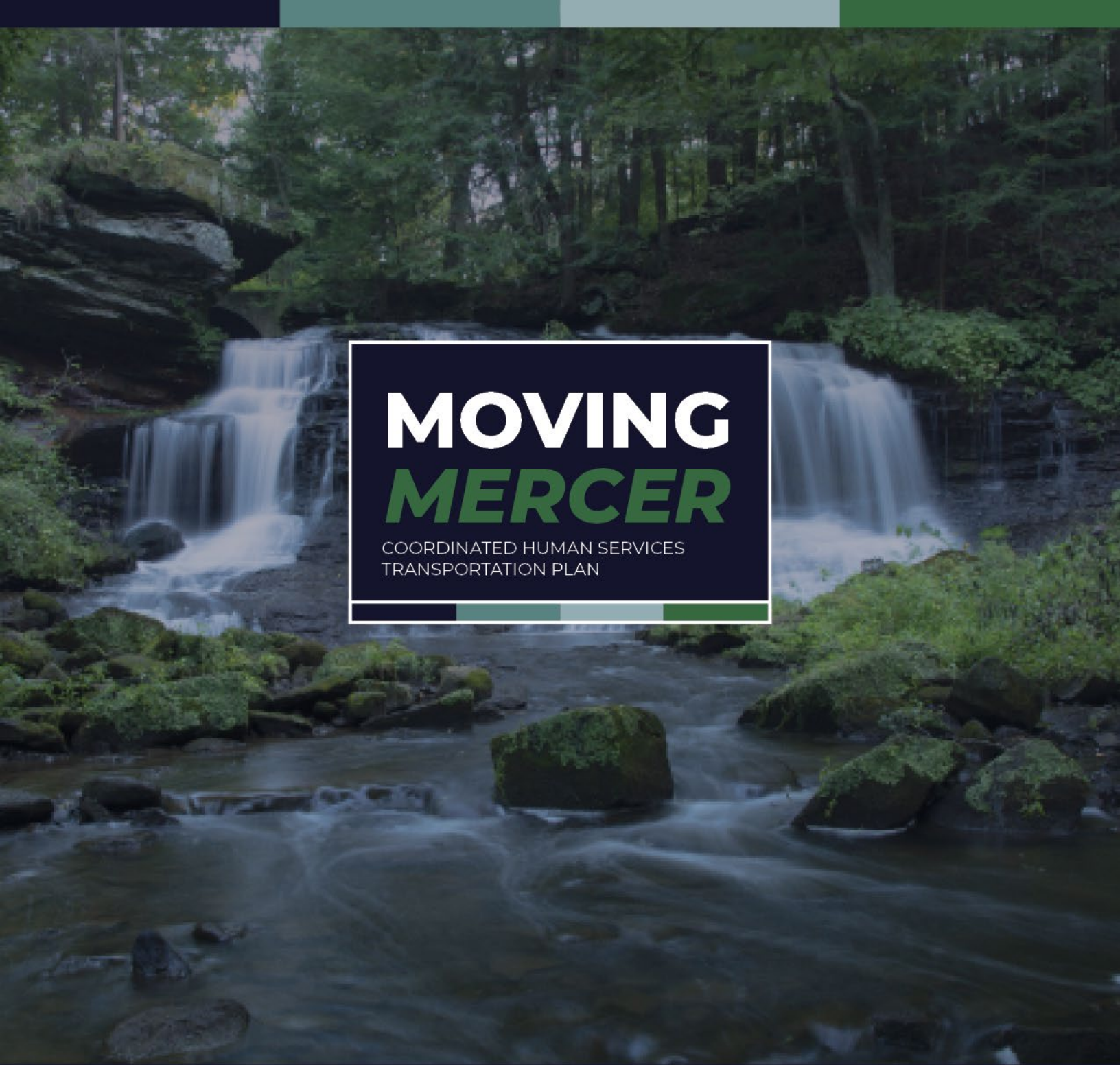




MOVING **MERCER**

COORDINATED HUMAN SERVICES
TRANSPORTATION PLAN

MERCER COUNTY, PA **COORDINATED HUMAN SERVICES** **TRANSPORTATION PLAN**

DRAFT

OCTOBER 19, 2026



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1. Introduction

1.1. About SVATS

The Shenango Valley Area Transportation Study (SVATS) is the federally designated Metropolitan Planning Organization (MPO) for the Mercer County, Pennsylvania metropolitan area, encompassing all 47 municipalities in Mercer County, Pennsylvania (**Figure 1**). Nineteen municipalities are voting members of the MPO, as well as Mercer County, the Mercer County COG, and two voting members from PennDOT. SVATS was officially designated as the MPO for Mercer County in 1982.

1.2. About the Plan

Coordinated Human Services Transportation Plans (CHSTPs) identify and address the transportation needs of individuals with disabilities, older adults, and people with low incomes by fostering collaboration among public, private, and non-profit transportation providers. The plan aims to improve mobility, eliminate service gaps, and maximize resources through coordinated strategies and investments. It also fulfills Federal Section 5310 program requirements by ensuring that funding for enhanced mobility is directed to projects developed through a coordinated, community-driven process. By engaging stakeholders and analyzing local needs, Mercer County's CHSTP guides the development of accessible, efficient, and equitable transportation connecting residents to essential destinations such as healthcare, employment, education, and community activities.

1.3. Federal Section 5310 Program

The **Enhanced Mobility of Seniors and Individuals with Disabilities program** (49 U.S.C. 5310) provides formula funding to states and designated recipients to meet the transportation needs of older adults and people with disabilities when the transportation service provided is unavailable, insufficient, or inappropriate to meeting these needs.¹

The program aims to improve mobility for older adults and people with disabilities by removing barriers to transportation services 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 areas of all sizes.

¹ More information is available on the [FTA's Section 5310 Webpage](#).

Eligible Recipients

Direct recipients of 5310 funding include states, local government authorities, and designated recipients who then distribute funds to eligible projects and subrecipients within their areas. In Mercer County, the Mercer County Regional Council of Governments (MCRCOG) is the sole eligible recipient for 5310 funds.

Eligible subrecipients include private nonprofit organizations, local government authorities, and operators of public transportation. Operators of public transportation are eligible as subrecipients for nontraditional Section 5310 projects.

Eligible Activities

5310 funding can be used for “traditional” or “nontraditional” projects. “Traditional” projects are capital projects as defined in 49 U.S.C. 5302(3). “Nontraditional” projects are capital and/or operating projects that go beyond the scope of the Americans with Disabilities Act (ADA) complementary paratransit services or public transportation alternatives designed to assist older adults and people with disabilities.

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
- Non-emergency medical transportation
- 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 way-finding technology
- Incremental cost of providing same day service or door-to-door service
- Purchase of vehicles to support new accessible taxi, rides sharing and/or vanpooling programs
- Mobility management programs
- Non-emergency medical transportation



MERCER COUNTY MUNICIPALITIES



Figure 1. Mercer County Region and Municipalities

2. Transportation in Mercer County Today

Mercer County's transportation landscape is shaped by its unique geography and population distribution. The majority of the county's population, employment centers, and key destinations are concentrated in the Shenango Valley, located in the southwest corner of the county. In contrast, much of the remaining area is rural, with small towns and dispersed communities where daily needs – such as healthcare, employment, and shopping – may require long trips, sometimes as far as 40 miles. For residents in these rural areas, getting around without a personal vehicle can be particularly challenging.

Transportation options are fairly limited in Mercer County, particularly for seniors, individuals with disabilities, and those from low-income households. Rural areas of the county have fewer options for transportation due to limited fixed-route transit service coverage and gaps in pedestrian infrastructure.

The MCRCOG administers the Mercer County Community Transit (MCCT) shared-ride paratransit service, as well as the Shenango Valley Shuttle Service (SVSS) fixed-route bus service. In addition to these public transit options, other transportation services are available through local organizations, nonprofits, and private providers such as taxi companies. However, coverage and availability can vary widely, especially outside the Shenango Valley. As a result, many residents – especially those in rural areas or with limited mobility – face significant barriers in accessing essential services and opportunities.

2.1. Mercer County Community Transit

MCCT is the primary provider of Human Services Transportation in the county (**Figure 2**). MCCT operates a door-to-door, advance-scheduled service available to all Mercer County residents.

Service operates between 8:00am and 4:00pm in the Shenango Valley; outlying areas have a shorter span of service. Rides typically must be reserved by a certain time the day before, depending on the trip type. MCCT operates select trips to Pittsburgh, Butler, and New Castle which require at least a week's advance scheduling. As reported in the PennDOT Bureau of Public Transportation's 2023-2024 Annual Performance Report², approximately 53% of MCCT's shared ride trips were riders aged 65+. **Figure 3** shows MCCT's total shared ride trips for each fiscal year between 2020 and 2025.

² https://www.pa.gov/content/dam/copapwp-pagov/en/pennndot/documents/programs-and-doing-business/transit/informationandreports/annual-performance-reports/recent-reports-2017-present/pennndot_bpt_annualperformancereport_2023-2024.pdf



Source: MCRCOG

Figure 2. Mercer County Community Transit (MCCT) Shuttle

MCCT operates on a distance-based fare structure. Trips may be fully or partially subsidized for qualifying riders and trip purposes, bringing the cost per ride to \$2 or less for riders who meet eligibility requirements. The service is funded by state and federal grants, and the Mercer County Area Agency on Aging, Inc. Fares are based on the length of the trip and can be paid in cash or via Transit pass. Senior riders and persons with disabilities are eligible for reduced fares. **Table 1** below shows the full-cost fares for 2026. Fares are expected to rise by 30% in 2027, pending PennDOT approval.

Table 1: Full-Cost MCCT Fares

Trip Distance	Fare
Under 2 miles	\$18.20
2-5 mi	\$20.80
5-10 mi	\$32.50
10-20 mi	\$45.40
20-30 mi	\$58.50
Over 30 miles	\$65.00

MCCT receives their human services transportation funding from PennDOT from the Shared Ride and Persons with Disabilities (PwD) Programs, which is funded by a mix of



sources that includes PennDOT for operating costs and subsidizing fares, and state and federal social safety net programs like the Pennsylvania Lottery and Medicaid. Funding is also supplemented at the local level by agencies like the Area Agency on Aging and the Department of Human Services (DHS), through programs like the Medical Assistance Transportation Program (MATP). The MATP is facing a substantial funding shortfall due to post-COVID ridership loss, decreasing productivity, and rising costs.

The future of the Shared Ride Program is critical to the mobility of the aging population of Mercer County (**Figure 4**), and it will be imperative that the MCRCOG and partners work with PennDOT and its State Legislature representatives to ensure these programs are funded in Mercer County.

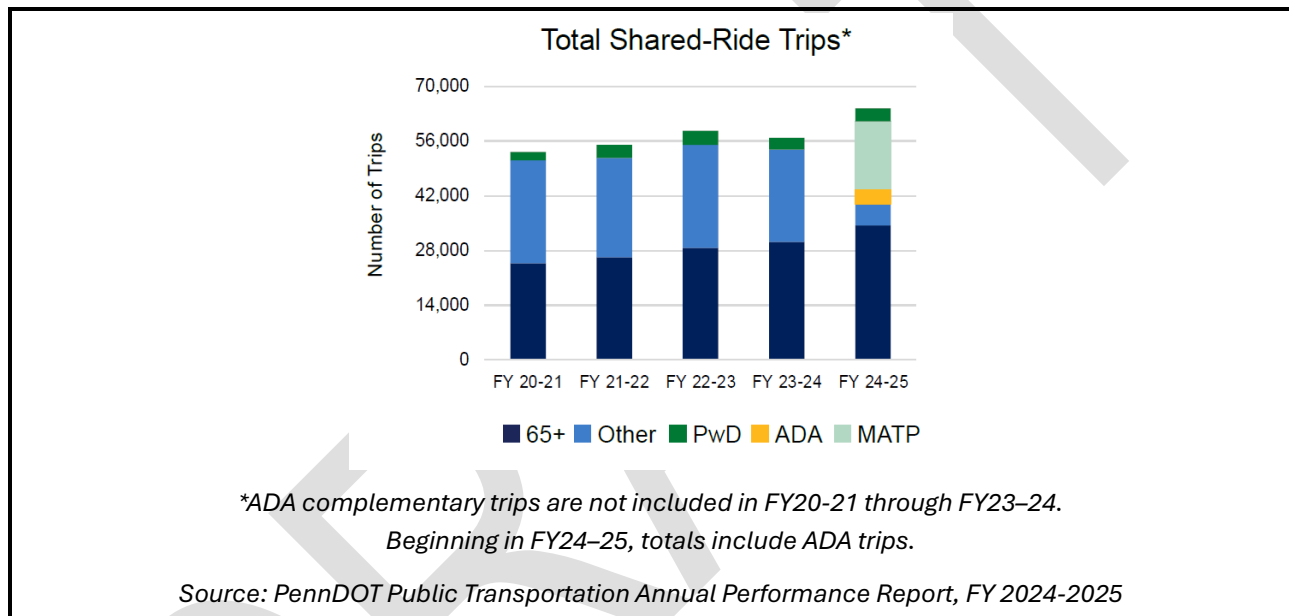
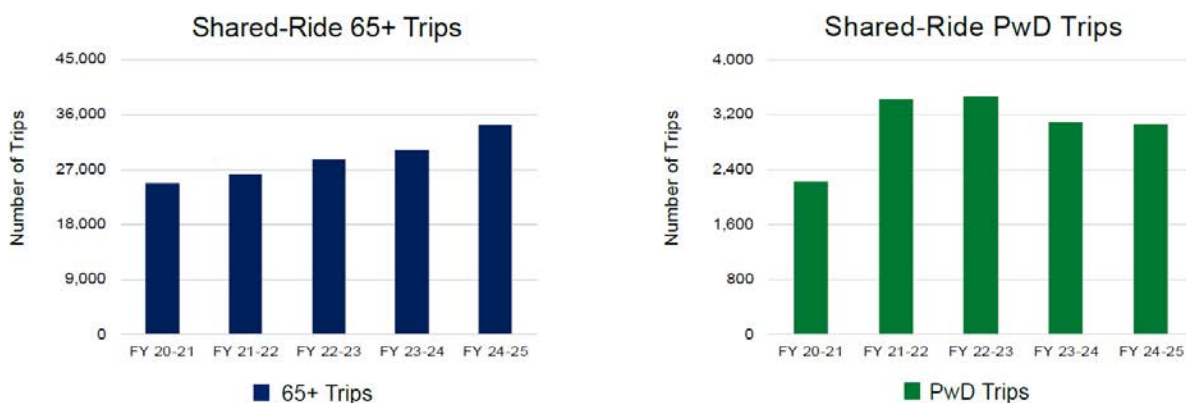


Figure 3. MCCT Total Shared Ride Trips (FY 2021-2025)



Source: PennDOT

Figure 4: MCCT Rides for 65+ and People with Disabilities Categories (FY 2021-2025)



MCCT Trip Characteristics

Mercer County Community Transit (MCCT) provides a door-to-door, advance-scheduled service available to all Mercer County residents. Evaluating MCCT trip characteristics helps explain how the service supports the mobility needs of Mercer County residents, including older adults, individuals with disabilities, and those without access to a personal vehicle. MCCT collected detailed trip data over 11 months between July 2025 and May 2026, including information on day of the week, trip purpose, pick-up and drop-off locations, and trip mileage.

Analysis of the MCCT trip purposes indicates that medical purposes are the most common trip purpose for those using MCCT services, followed by senior center, employment, and recreational purposes (**Table 3**). This highlights the role of MCCT in providing critical connections to medical and healthcare services, community organizations, employment opportunities, and recreational activities.

Table 2: MCCT Trips by Purpose

Trip Purpose	Percent of All Trips	Percent of Total Trip Mileage
Medical	43.1%	32.3%
Senior Center	13.6%	12.2%
Employment	12.1%	18.4%
Recreation	10.4%	9.0%
Dialysis	8.6%	8.1%
Methadone Treatment	6.6%	16.3%
Shopping	4.2%	2.7%
Pharmacy	0.57%	0.3%
Sheltered Workshop	0.53%	0.6%
Peer Recovery Support	0.32%	0.2%
Other	<0.1%	<0.1%

MCCT data also provides information about trip distances. Most trips occur within 10 miles of the pick-up location, with a median trip distance of 5.2 miles and an average trip distance of 10.4 miles. However, as shown in **Table 4**, a portion of riders rely on MCCT for trips over 10 miles, with some trips near or over 50 miles. This shows that residents are using MCCT to access both local and regional destinations. Longer-

distance trips may also reflect travel from more rural parts of the county to urban areas where healthcare, community, or employment are concentrated.

Table 3: MCCT Trips by Distance

Trip Distance	Percent
Under 2 miles	13%
2-5 mi	35%
5-10 mi	19%
10-20 mi	17%
20-30 mi	7.20%
30-40 mi	4.40%
40-50 mi	3.30%
50-100 mi	0.70%
Over 100 miles	0.10%

Trip activity also varies by day of the week. Wednesday is the busiest day for trips, recording nearly 11% more trips than the weekday average. On the other hand, Friday is the lightest day for trips, recording about 7% fewer trips than the weekday average (**Table 5**). Tuesdays record the overall lowest mileage traveled, at roughly 7% below the weekday average. These patterns show that the number and distance of trips vary between weekdays. Differences in travel patterns are specifically evident for dialysis-related trips, which are most common on Monday, Wednesday, and Friday, with trips on Tuesday, Thursday, and Saturday being about half of that. Trips not only vary between weekdays, but also between seasons. MCCT experienced about 10% higher trip volumes over the Spring and Summer months compared to the Fall and Winter.

Table 4: MCCT Trips and Total Mileage by Day of Week

Day of Week	Percent of Trips	Percent of Reported Mileage
Monday	19%	21%
Tuesday	20%	19%
Wednesday	22%	22%
Thursday	19%	19%
Friday	19%	19%
Saturday	1%	1%
Sunday	0%	0%

MCCT data also provided pick-up and drop-off ZIP codes, providing insight on where residents are traveling to and from. Nearly 97% of trips occurred within Mercer County, while about 3% were to destinations in neighboring counties, including Allegheny, Butler, Crawford, and Lawrence counties. To better understand travel patterns and the number of trips between specific ZIP codes, two origin-destination maps are shown below.

Figure 5 illustrates the travel flow between ZIP code pairs within Mercer County, with the thickness of the line representing the volume of trips. A higher concentration of trips occurred in the southwest region of the county and in more densely populated areas. In contrast, there are few trips originating from or traveling to the county's more rural and sparsely populated areas.

Since MCCT requires riders to schedule trips at least one day in advance, residents with limited transportation options, particularly those in northern and more rural portions of the county without access to fixed-route public transportation, may face challenges meeting last-minute travel needs. **Figure 6** illustrates the travel flow within and outside of Mercer County, showing that a majority of trips occur within the county, but a notable number of riders use MCCT to access destinations outside of the county, including Pittsburgh and elsewhere in Allegheny County, Butler County (particularly to employment in Boyers), and Lawrence County. These longer-distance trips highlight the important role of MCCT connecting residents to regional destinations that may not be available locally, such as specialized medical services, employment opportunities, government services, and more.

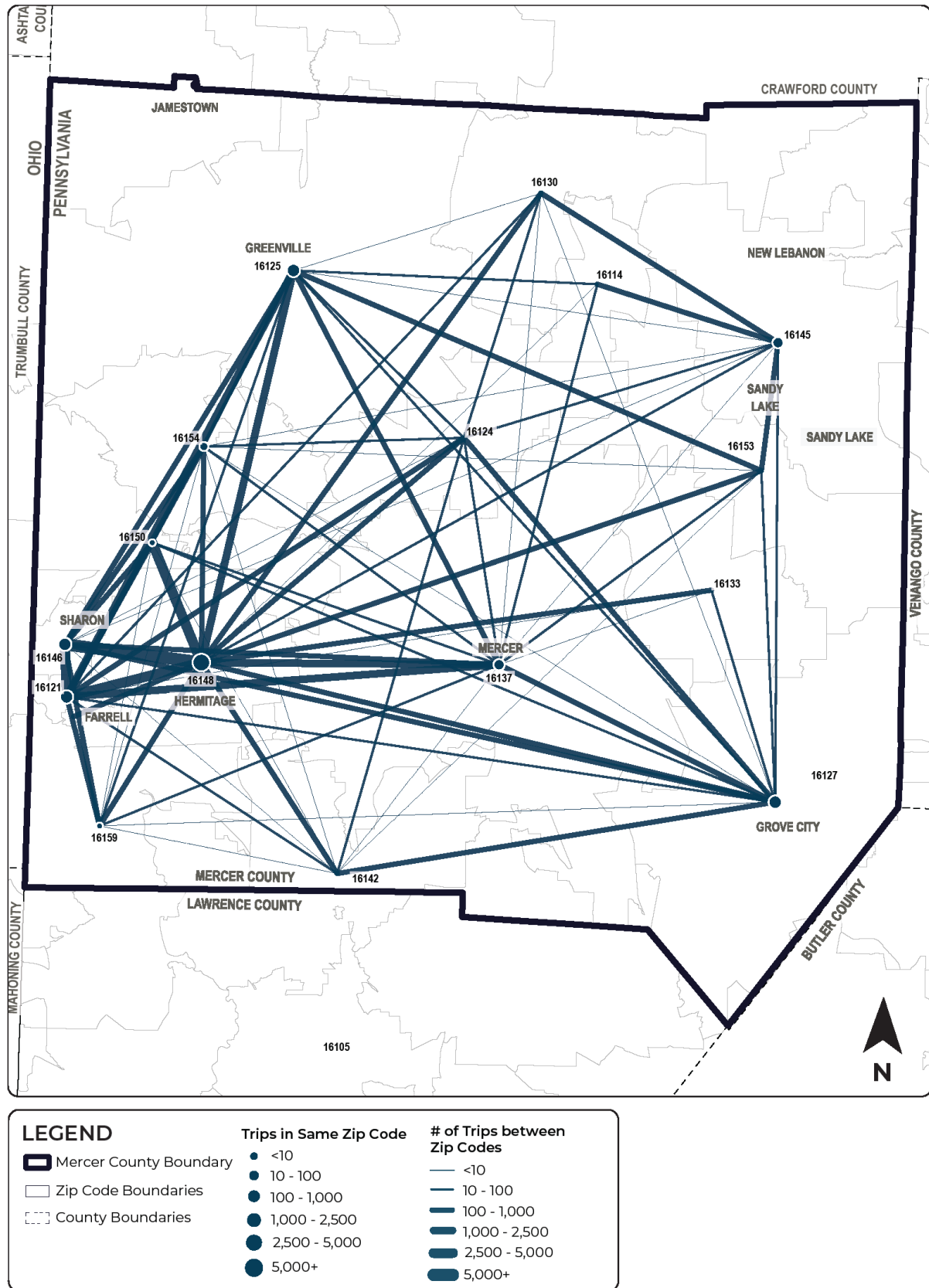


Figure 5: MCCT Trips within Mercer County by ZIP Code

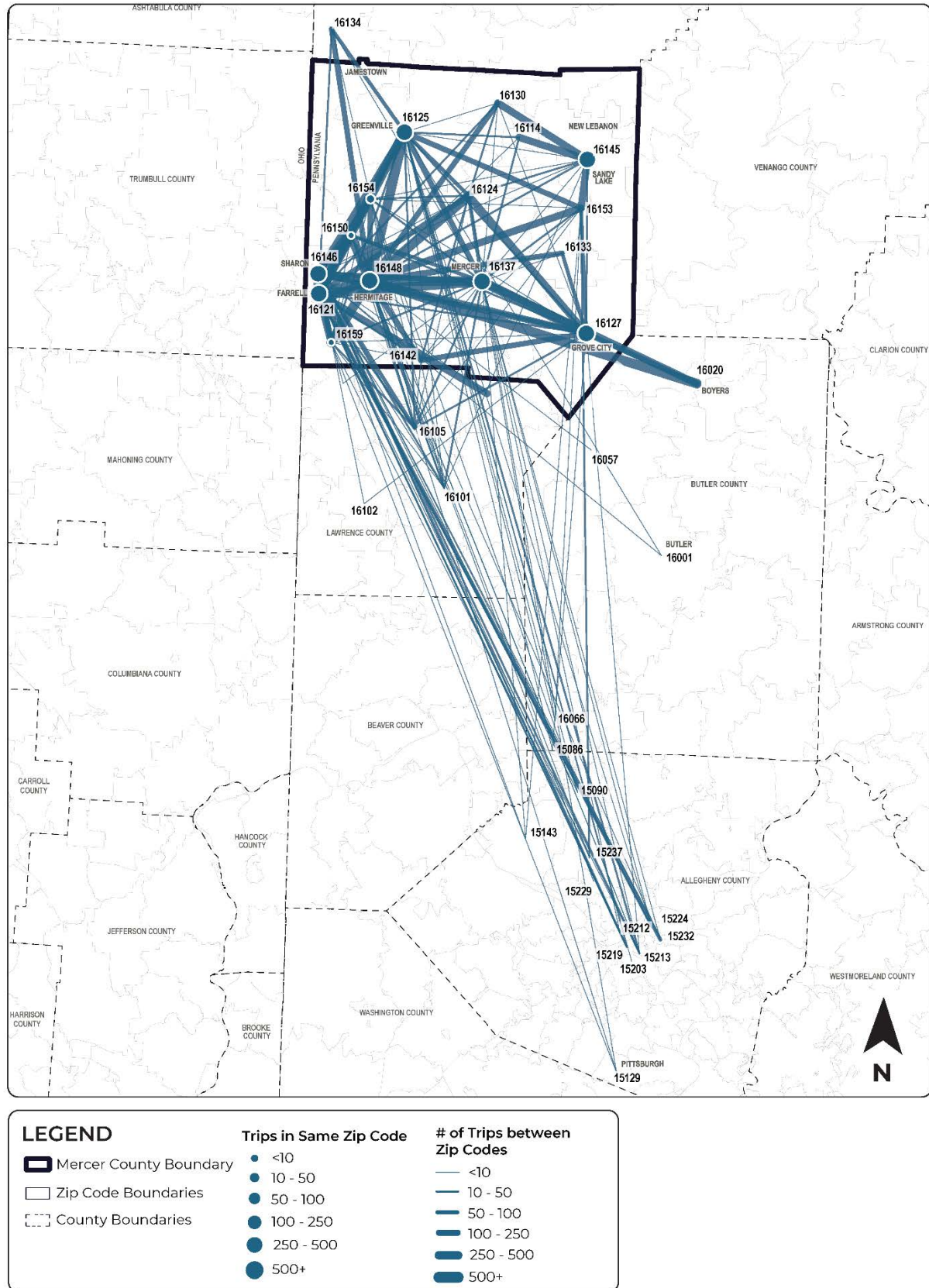


Figure 6: MCCT Trips Across Region by ZIP Code



2.2. Shenango Valley Shuttle Service

The Shenango Valley Shuttle Service (SVSS) is a fixed-route transit system operating on four routes (**Figure 8**). Service is concentrated in the Southwest region within Mercer County known as the Shenango Valley (**Figure 9**). The SVSS operates along five established routes: the Central Route, which provides service between Downtown Sharon and Walmart along the State Street Corridor; the Courthouse Route, which provides early morning through late afternoon service to Mercer County Courthouse and around the Shenango Valley; the Express Route, which offers morning school service in Farrell during the academic year; the Northern Route, which offers service between Downtown Sharon and the Shenango Valley Mall via Sharpsville; and the Southern Route, which provides service between Downtown Sharon and Walmart via Farrell and Wheatland.

Some Human Services providers purchase transit passes which they provide to clients in need. However, SVSS service is not always available from the areas, or at the times of day, needed by potential riders. Northern and rural portions of the county do not have access to fixed-route public transportation. In addition, there are currently no direct connections to intercity bus or passenger rail services, which limits regional connectivity for residents without access to a personal vehicle. Human services transit like MCCT helps to fill gaps in service and is often used by elderly or populations with disabilities to get to medical appointments or to access other services and shopping.



Figure 7: An SVSS Bus

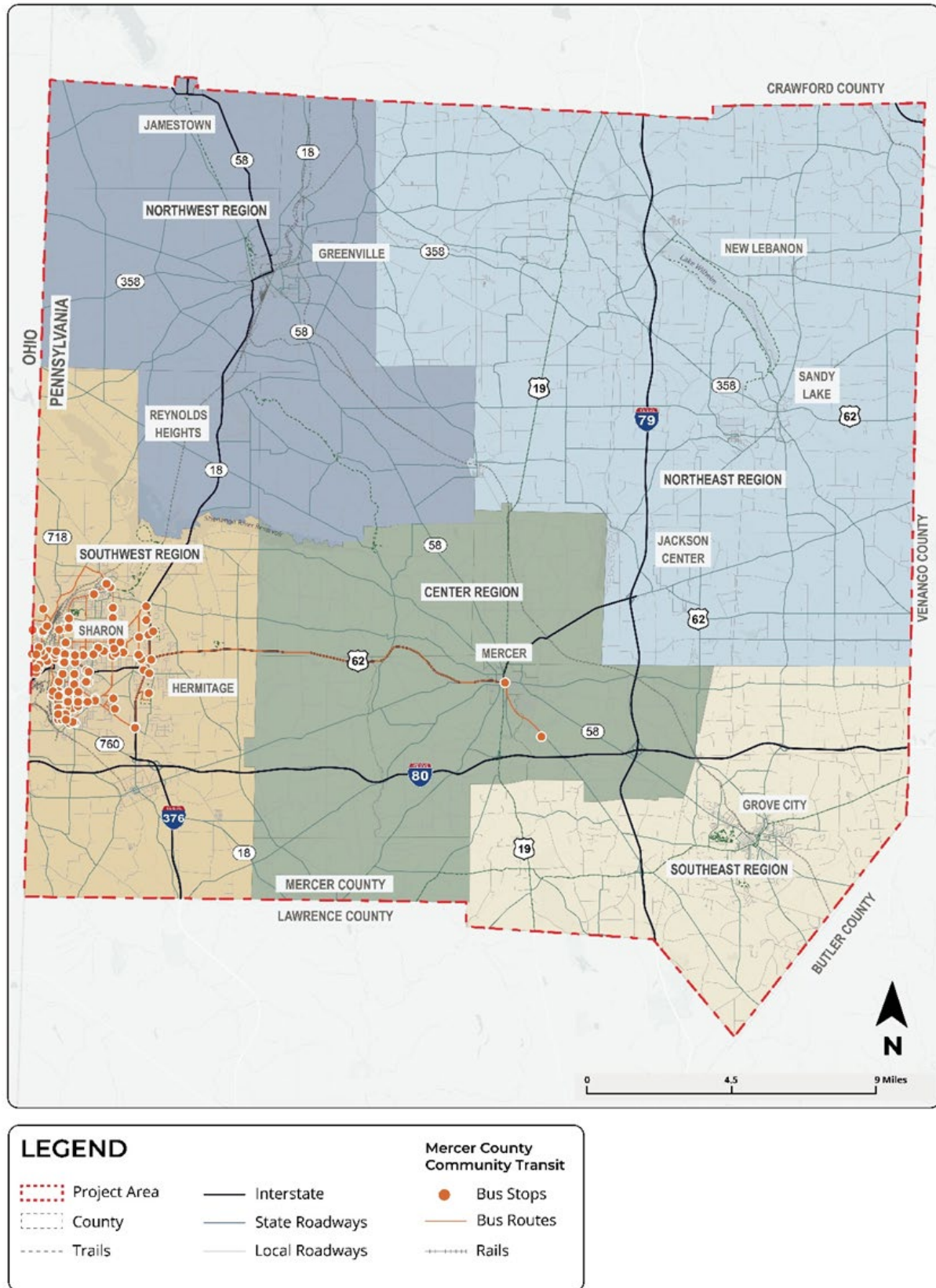


Figure 8. Mercer County Regional Map showing SVSS bus routes and stops



Figure 9. SVSS routes and stops within the Sharon-Hermitage area



SVSS Transit Development Plan

In 2025, the MCRCOG undertook a Transit Development Plan (TDP) to evaluate the existing fixed-route SVSS service routes and identify ways to improve service coverage and efficiency. Short-term improvements and other proposed changes are contingent on available funding. Some proposed changes include:

- Increased service and shorter wait times on all routes (<90 minutes on weekdays for Northern, Central, and <60 minutes for Southern routes and every 3 hours on Saturday)
- New on-demand shuttle service to replace the Courthouse route
- New numbering system for School Route
- New branding, maps, and schedules
- Improvements to bus shelters

2.3. Transit Funding Sources & Sponsors

Transit services in Mercer County are supported by a diverse mix of funding sources and sponsoring organizations, each designed to address the mobility needs of specific populations such as seniors, persons with disabilities, low-income residents, and those requiring medical transportation (**Table 7**). These funding streams include federal and state programs, local agency contributions, and targeted subsidies that help keep transit affordable and accessible for eligible riders.

Key programs – such as the Pennsylvania Lottery-funded Senior Shared Ride, the Medical Assistance Transportation Program (MATP), and the Persons with Disabilities (PwD) program – provide substantial fare subsidies for qualifying trips, while local agencies like the Area Agency on Aging and community organizations may sponsor additional services or rider co-payments. In some cases, nonprofit and hospital foundations, as well as private ambulance and taxi services, supplement public transit options for specific needs or client groups.

The sustainability of transit services depends on the ongoing coordination of these funding sources, the ability to adapt to changing eligibility and regulatory requirements, and the continued support of local sponsors. Understanding the landscape of available funding and sponsorship is essential for maintaining and expanding transit access for Mercer County's most vulnerable residents, ensuring that transportation remains a vital link to healthcare, employment, community life, and essential services.

Transit Funding Programs

Table 6 shows the anticipated amount of available operating funding over the next 23 years. Operating revenues are assumed to remain stable over the life of the plan but are subject to state and federal funding authorizations.

Senior Free Transit Program

The Free Transit Program for Seniors provides a pass to seniors 65 or older, and some 60-64, to ride for free on all public transportation bus service in Pennsylvania, funded by the Lottery and the Area Agency on Aging.

Senior Shared Ride Program

The Senior Shared-Ride Program pays for seniors 65 or older to get picked up at their residence and travel to locations within their county or, in some cases, to locations outside of the county. The vehicles used may have other riders onboard and will be wheelchair accessible. A fare may be charged for the trip.

Medical Assistance Transportation Program

The Medical Assistance Transportation Program (MATP) provides transportation assistance to medical appointments for persons covered by Medical Assistance, also

known as Medicaid. The transportation assistance may consist of mileage reimbursement, public transportation bus passes, or getting picked-up by a vehicle at a person's home depending on need and the availability of service.

Persons with Disabilities

The Persons with Disabilities (PwD) Program pays for persons with disabilities aged 18 to 64 to get picked up at their residence and travel to locations within their county or, in some cases, to locations outside of the county. The vehicles used may have other riders onboard and will be wheelchair accessible.

Americans with Disabilities Act

The Americans with Disabilities Act (ADA) complementary paratransit provides accessible transportation for persons with disabilities. Anyone who needs to travel along public transportation bus routes that cannot use the bus due to a disability can use this service. A fare will be charged for the trip.

Veterans

Mercer County funds rides for veterans under 60 through grants from the State Veterans' Trust Fund.

Table 6. Public Transit Operating Revenues

Program	Short-Term 2027-2030	Mid-Term 2031-2038	Long-Term 2039-2050	Total
State Operating	\$4,667,876	\$9,335,752	\$14,003,628	\$ 28,007,256
Federal Operating	\$2,886,000	\$5,772,000	\$8,658,000	\$ 17,316,000
PwD	\$612,000	\$1,224,000	\$1,836,000	\$ 3,672,000
Senior Citizen-SRP	\$2,800,000	\$5,600,000	\$8,400,000	\$ 16,800,000
Local	\$413,000	\$1,113,000	\$2,740,000	\$ 4,266,000
Fares	\$356,000	\$712,000	\$1,068,000	\$2,136,000
Total	\$ 11,734,876	\$ 23,756,752	\$ 36,705,628	\$ 72,197,256

Source: PennDOT 2027 Financial Guidance

Table 7: Rider and Trip Type Funding Sources & Restrictions

Category / Program	Age / Eligibility	Trip Types Allowed	Fare / Cost	Key Restrictions & Notes	Funding Source / Sponsor
Senior (65+)	65+	No trip restrictions	\$1/way; \$0.50 to Senior Center	Can schedule 1 month ahead; cancel anytime; escort rules apply; must reserve by 2pm day before	Lottery/Area Agency on Aging
Senior (60–64)	60–64	No employment, workshops, or out-of-county (except New Castle)	\$1/way; \$0.50 to Senior Center	No employment/workshops; no out-of-county except New Castle; must reserve by 2pm day before	Area Agency on Aging
MATP (Medical Assistance Transportation Program)	Under 65 with State Access Card	Medical, pharmacy, dialysis, methadone	\$0	No shopping/recreation; out-of-county for medical only; must reserve by 12pm day before; late cancels penalized	PA Department of Human Services
ADA	18–64; ADA application on file	SVSS route + ¾ mile	\$2/way	No trip purpose restrictions; escort is PCA (free); reserve by end of day before	PennDOT
PwD (Persons with Disabilities)	18–64; application on file	At least ¾ mile off shuttle route	15% co-pay, mileage based	No sheltered workshops; escort is PCA (free); reserve by 2pm day before; with MATP, medical trips booked under MATP	PennDOT
Veterans	Veterans 18–60	No trip restrictions	\$1/way	Check escort needs with staff	County
Nursing Home Residents	Varies by age & pay status	Medical, recreation, shopping	Varies	Funding source and sponsor depend on age, Medicaid/self-pay, and trip type	Varies
Hospital & Medical Network Patient Transportation	Patients with no other options	Specific hospital & medical appointments only	\$0	Last resort option. Healthcare provider must arrange.	Healthcare networks and foundations via donations and grants

2.4. Other Transportation Services

Several other transportation services are available from community organizations and private companies. These are often contracted out by human service organizations. Fares may be fully or partially covered only for riders with specific needs or eligibility, with ineligible riders paying the full cost.

Hospital & Healthcare Foundation Patient Transportation Services

Regional healthcare networks and their associated foundations can often provide patients without other options free transportation to and from their facilities. Trips must be arranged by their in-network healthcare provider and are generally restricted to local trips. Services are funded through donations and grants, including funding pools restricted to specific conditions like cancer treatments.

Nonprofit & Volunteer Services

Some nonprofit organizations are able to provide transportation to their clients, such as HOPECAT, which has a passenger van available for its clients, a service it is seeking to expand. In some cases, volunteer ride programs like that through the American Cancer Society, and community organizations provide rides for specific needs, such as prenatal appointments, medical treatments, or workforce development.

Taxi & Rideshare Services

For trips outside the MCCT service area or operating times, human service organizations contract rides out to taxi companies or Transportation Network Companies (TNCs) like Uber and Lyft. Taxis and TNCs are able to provide more flexible scheduling and direct service within a larger operating area, but can be substantially more expensive, and currently lack wheelchair-accessible vehicles.

Private Ambulance Services

A number of private ambulance services provide emergency and non-emergency medical transportation in Mercer and nearby counties, typically offering specialized medical support in transport. Some offer plans or memberships for frequent riders which provide discounted rides, and costs may be partly covered by insurance for qualifying trips.



3. People & Demographics

3.1. Demographic Overview and Trends

Mercer County is home to about 109,000 residents. According to the 2026 Mercer County Comprehensive Plan, the County's population has steadily declined since reaching its peak in the 1970s. While the population is declining, the population of residents aged 65 or older has been increasing. According to the 2024 American Community Survey (ACS) 5-Year Estimates, the senior population (65 years and older) accounts for nearly 23% of the County's population, which is greater than the State's percentage (**Table 8**). According to the Center for Rural Pennsylvania's population projections, the percentage of residents over the age of 65 will continue to rise through 2030 (26.7%) and then will begin a gradual decrease to 2050 (23.9%). An increasing population can have significant implications for the county's transportation network.

Additionally, 10% of i do not have access to a vehicle, making safe and accessible public transit connections particularly important for these residents. **Figure 16** and **Figure 21** show that disabled individuals and no-car households are concentrated in Greenville, Mercer, Grove City, and the southwest portion of the county.

Income and poverty levels provide additional context for the County's demographic and socioeconomic conditions. Mercer County's unemployment rate dropped slightly from 5.8% in 2020 to 5.3% in 2024, and the median household income increased from \$50,529 in 2020 to \$59,976 in 2024. The percentage of households below the poverty level has declined by nearly 9% since 2020, accounting for nearly 13% of households in Mercer County. Households below poverty level are concentrated in Jamestown, Greenville, Fredonia, Mercer, Grove City, and the southwest portion of the County.

Table 8: Subregion, County, State Demographic Comparison (ACS 5-Year Estimates)

Demographic Indicator	Center	Northeast	Northwest	Southeast	Southwest	Mercer County	PA State
Households Below Poverty Level	15%	10%	14%	10%	15%	13%	12%
Population with Disability	18%	15%	19%	11%	19%	17%	14%
Senior Population (65+)	24%	21%	26%	19%	24%	23%	19%
Households with No Vehicle	13%	6%	9%	6%	11%	10%	10%
Medicaid Allocation	15%	15%	17%	19%	13%	15%	18%

3.2. Health and Disability

In Mercer County, 17% of the population reports having a disability, which is slightly greater than the State (**Table 8**). An increasing aging population could also contribute to an increase in the city's disabled population, including those with ambulatory difficulty, cognitive difficulty, independent living difficulty, and more. These populations may have trouble navigating infrastructure that is not fully accessible, and areas with limited public transit and incomplete pedestrian pathways can create barriers to independent mobility and daily travel.

People receiving means-tested medical assistance (such as Medicare and CHIP) and veterans represent additional groups with distinct transportation needs. According to ACS data, nearly 15% of Mercer County residents rely on Medicaid, with means-tested Medicaid allocations increasing by 27% between 2020 and 2024. Residents enrolled in Medicaid often require access to healthcare facilities, social services, and other essential destinations, increasing the importance of reliable transportation options. Veterans also represent about 9% of the county's population, some of whom may have unique mobility needs related to aging, disabilities, healthcare access, and connections to employment and community services.

Compared to other Pennsylvania counties, Mercer County has an above-average rate of people facing health issues like complications from pregnancies or addiction to drugs or alcohol.³ While these people often do not fall neatly into other categories that qualify for transportation subsidies, accessing the services they need is critical to ensuring the health and well-being of people and families throughout the county.

3.3. Equity and Accessibility

Many vulnerable population groups – such as individuals with disabilities, seniors, households below the poverty line, Medicaid-dependent residents, carless households, and veterans – are distributed across Mercer County, with particularly high concentrations in the southwest region. To address this, the MCRCOG operates a fixed-route transit system (SVSS) focused on serving the southwest, providing critical connections for residents in this area. Despite this coverage, significant numbers of these groups also reside in rural communities like Jamestown, Greenville, Fredonia, Grove City, and Mercer, where transportation options are much more limited due to sparse service and gaps in pedestrian infrastructure (see **Figures 10-24**).

While SVSS does not extend into rural areas, the MCCT system offers on-demand service countywide. However, MCCT typically requires riders to schedule trips at least

³ [Pennsylvania Department of Health](#)

one day in advance, which can be a barrier for those with unpredictable schedules or urgent travel needs. This structure can make it difficult for rural residents to access timely transportation, particularly for last-minute appointments or essential errands.

Regional connectivity is further challenged by the absence of direct links to intercity bus or passenger rail services, making it difficult for those without a personal vehicle to travel beyond the county. In areas with limited or no transit service, residents who are unable to drive may become isolated, losing access to critical goods, services, and social opportunities. This isolation can negatively impact both individual well-being and the broader community's health.

To ensure equitable mobility, it is essential to expand accessible pedestrian infrastructure, improve rural transit connections and ease of travel to urban areas in Mercer County, and enhance coordination between fixed-route and paratransit services. Strengthening these systems will also enhance mobility and autonomy for seniors, individuals with disabilities, and those with limited or no access to personal transportation.

According to the Pennsylvania Public Transportation Performance Report, transit trips made by individuals aged 65 and older increased by approximately 10,000 trips from 2020 to 2024 (**Figure 4**), representing a nearly 40% increase. While Mercer County's aging population may partially explain this increase, the senior population has grown by only 5.3% during the same period. This disparity suggests that demographic growth alone does not account for the significant rise in ridership. In addition to an increasing number of senior adults, a larger share of the senior population appears to be choosing public transit for their travel needs. Both a growing population that relies on alternative modes and an increasing preference for transit over other modes emphasize the importance of maintaining and expanding reliable and accessible transit connections, especially in rural areas of the county.

3.4. Aging Population

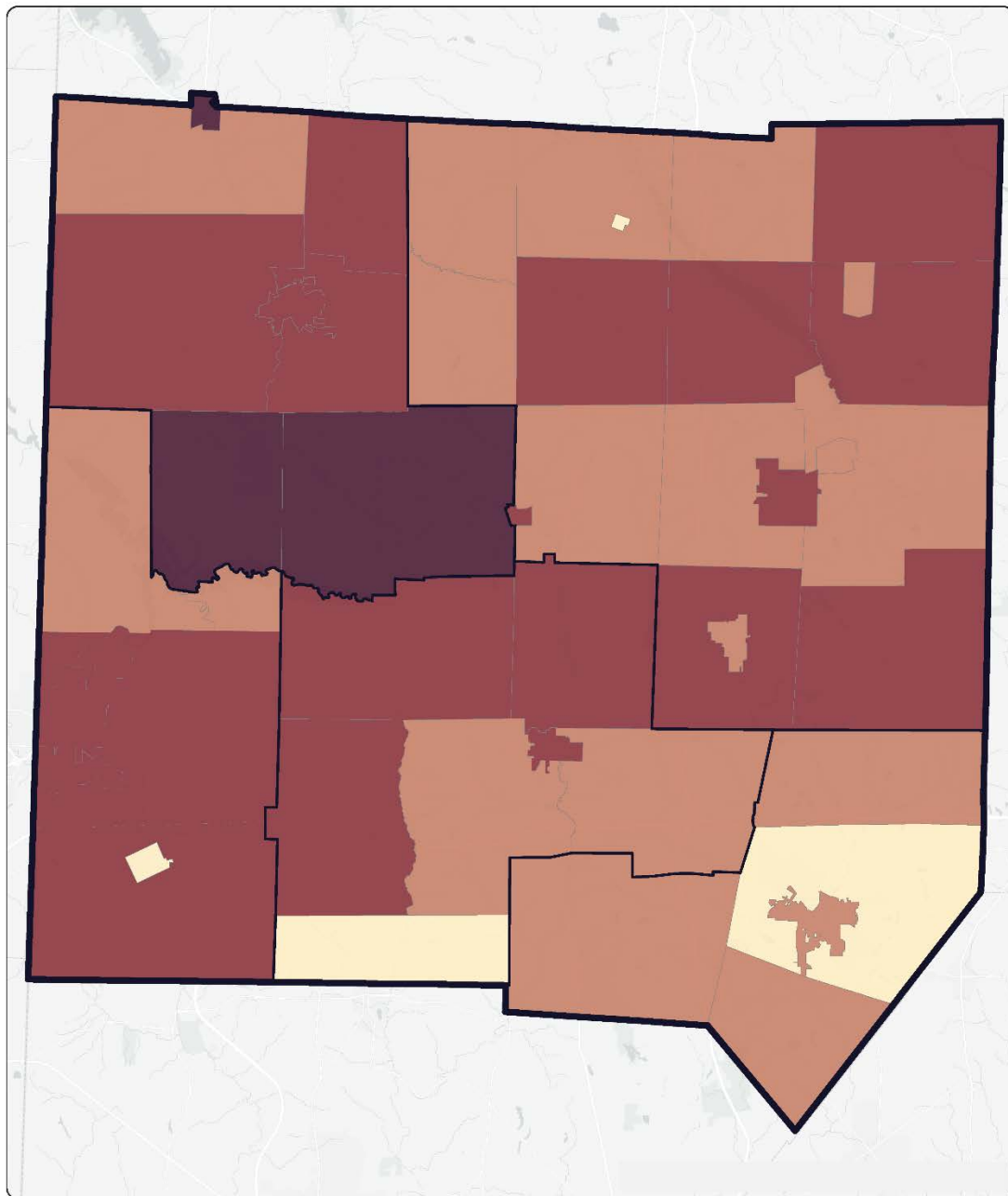
Like Pennsylvania as a whole, the population of Mercer County is getting older. U.S. Census Bureau data from 2024 shows that nearly 23% of Mercer County's population is 65 years and older. As the County's overall population has been declining, the percentage of the population aged 65 or older has been steadily increasing. According to the Center for Rural Pennsylvania's population projections, the percentage of residents over the age of 65 will continue to rise through 2030 (26.7%) and then will begin a gradual decrease to 2050 (23.9%).

The aging of our population impacts transportation and transportation services in a variety of ways. Many older Pennsylvanians are no longer able to drive; therefore, the

need for human services transit is increasing, particularly in rural areas. This also affects the ability of older Pennsylvanians to age in place. In cases where transit services are limited or non-existent in the rural areas of the County and residents are no longer able to drive, people can become isolated and unable to access critical goods and services, which creates negative impacts to the health and well-being of the individuals and the overall community. Finally, the rising cost of car ownership, in conjunction with a large portion of the aging population living on fixed incomes, has impacted the mobility and well-being of older Pennsylvanians.



POPULATION WITH A DISABILITY



LEGEND

- Mercer County Boundary
- Subregion Boundaries

Percent of Population with a Disability

- 0-10%
- 10-15%
- 15-25%
- >25%

0 4.5 9 Miles

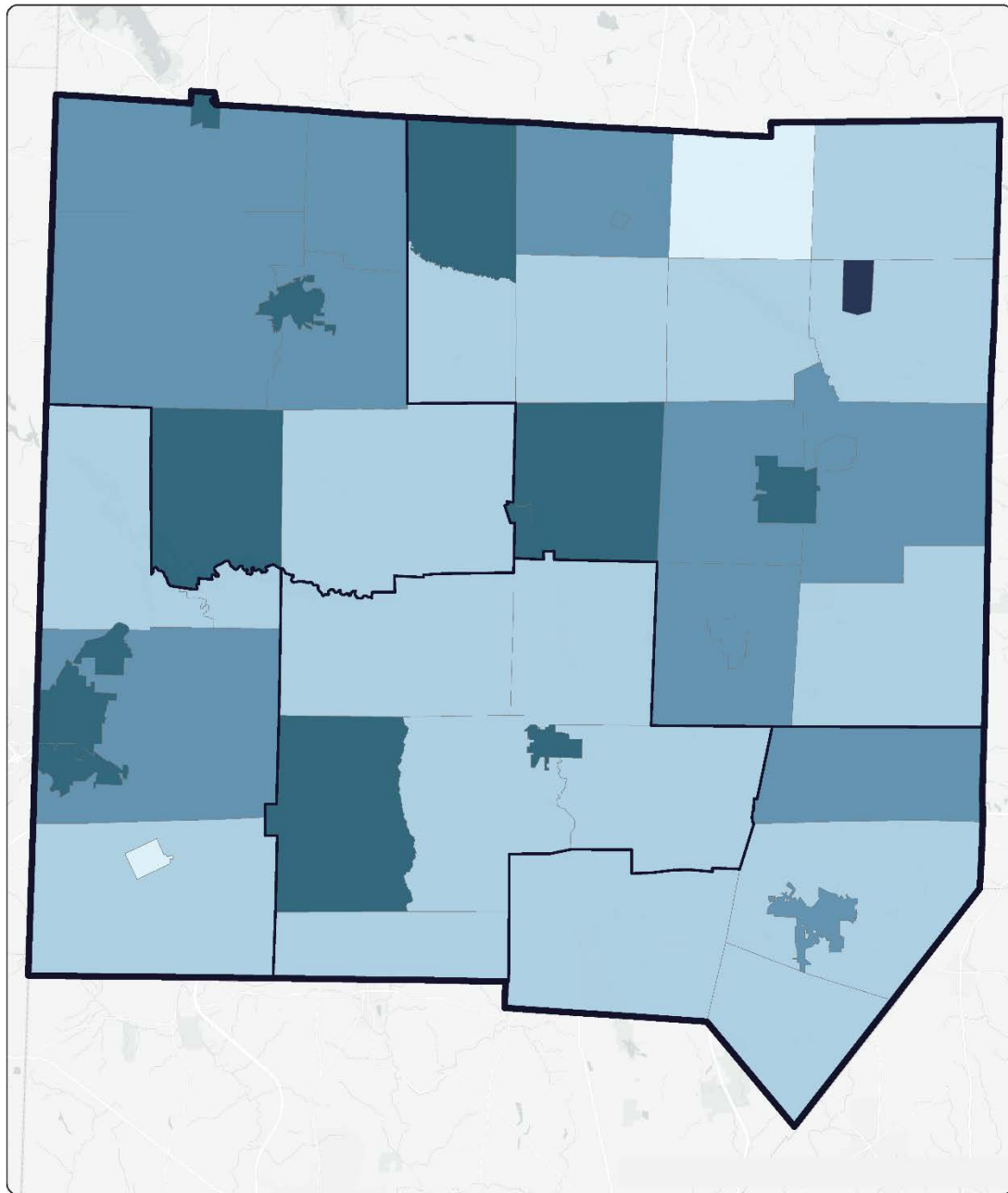


MOVING MERCER
LONG RANGE TRANSPORTATION PLAN

Figure 10. Percent of Population with a Disability



HOUSEHOLDS BELOW POVERTY LEVEL



LEGEND

- Mercer County Boundary
- Subregion Boundaries

Percent of Households Below Poverty Level

- 0-5%
- 5-10%
- 10-15%
- 15-25%
- >25%

0 4.5 9 Miles

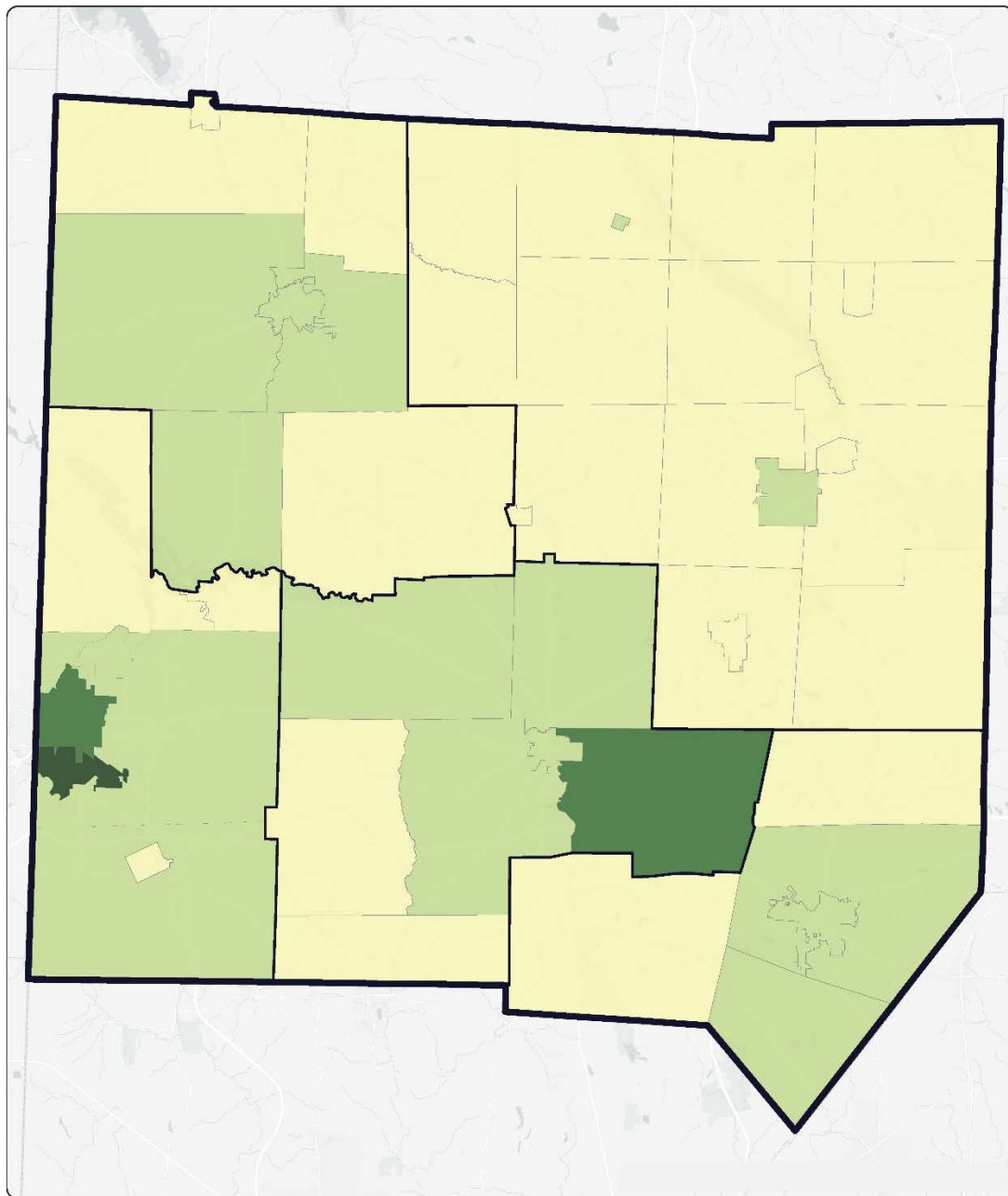


MOVING MERCER
LONG RANGE TRANSPORTATION PLAN

Figure 11. Percent of Households Below Poverty Level



MINORITY POPULATION



LEGEND

- Mercer County Boundary
- Subregion Boundaries

Percent Minority Population

- 0-5%
- 5-15%
- 15-25%
- 25-45%
- >45%

0 4.5 9 Miles



MOVING MERCER
LONG RANGE TRANSPORTATION PLAN

Figure 12. Percent Minority Populations



HOUSEHOLDS WITH NO VEHICLE

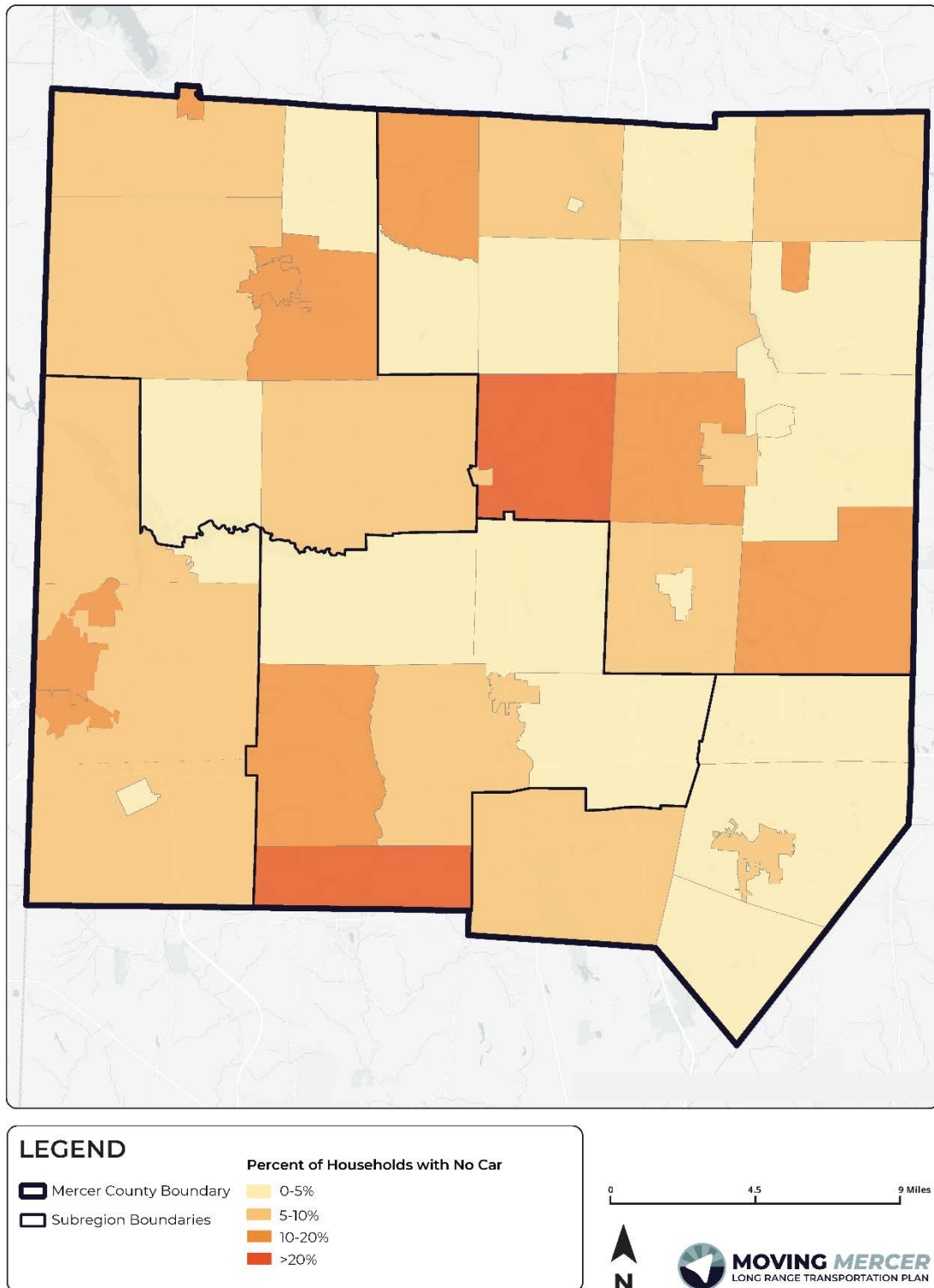
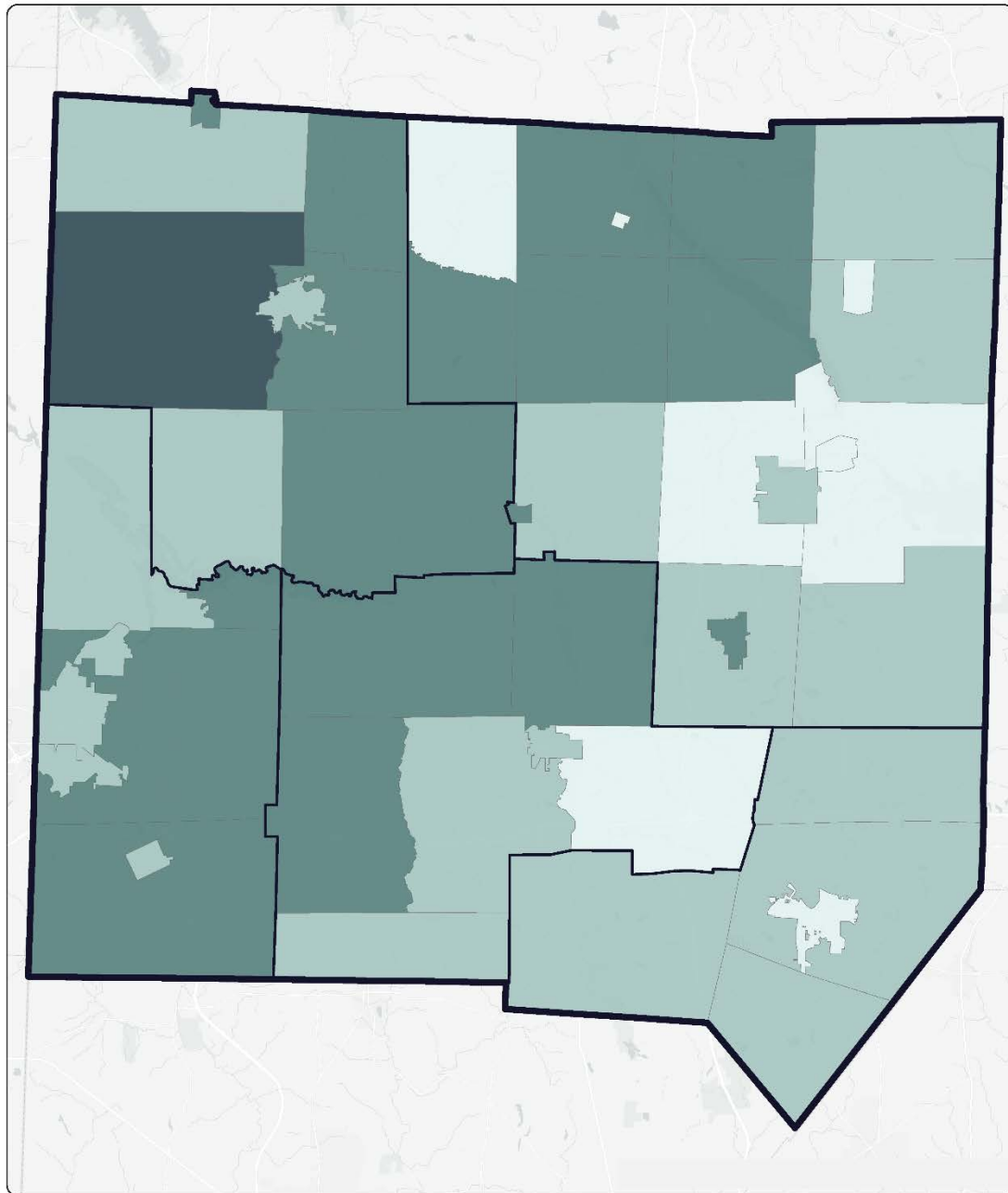


Figure 13. Percent of Households with No Car



SENIOR POPULATION (65+)



LEGEND

- Mercer County Boundary
- Subregion Boundaries

Percent of Population Over 65 Years Old

- 10-15%
- 15-25%
- 25-35%
- >35%

0 4.5 9 Miles

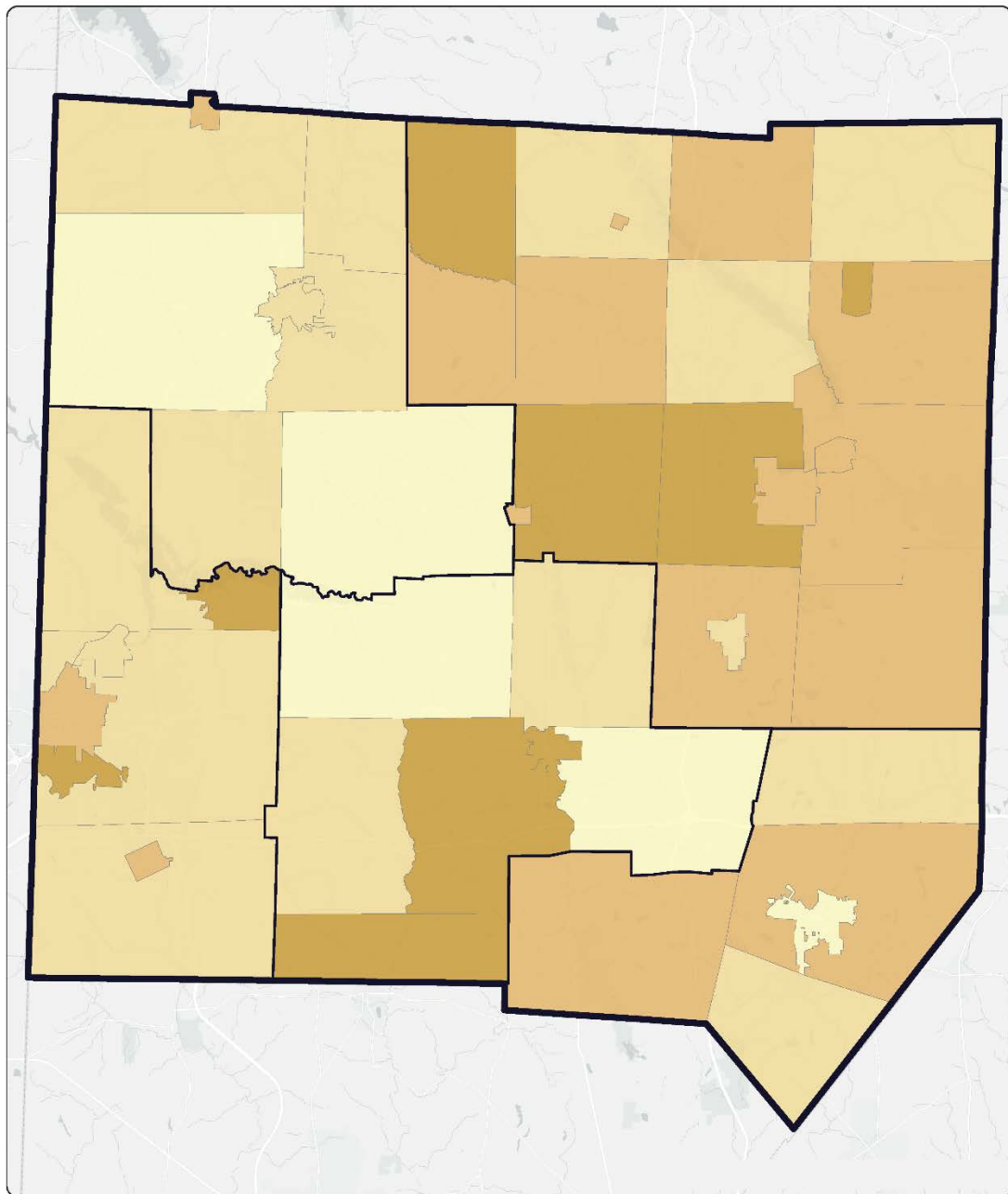


MOVING MERCER
LONG RANGE TRANSPORTATION PLAN

Figure 14. Percent of Population Over 65 Years Old (Senior Population)



MINOR POPULATION (<18)



LEGEND

- Mercer County Boundary
- Subregion Boundaries

Percent of Population Under 18 Years Old

- 5-15%
- 15-20%
- 20-25%
- 25-35%

0 4.5 9 Miles



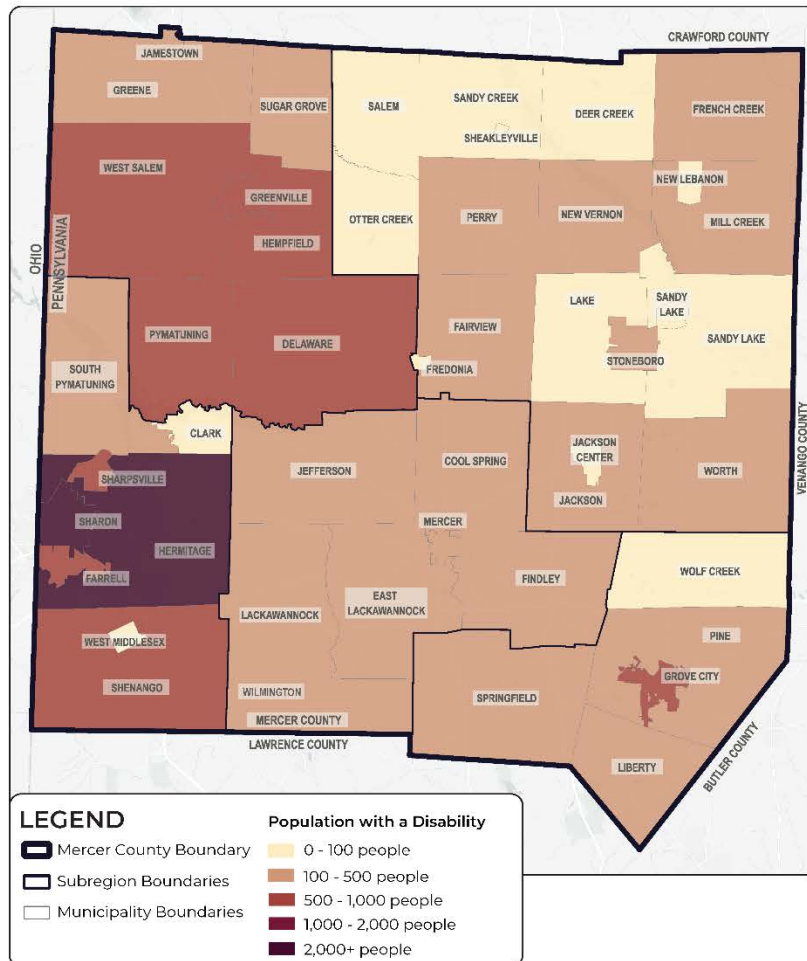
MOVING MERCER
LONG RANGE TRANSPORTATION PLAN

Figure 15. Percent of Population Under 18 Years Old (Minor Population)



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

POPULATION WITH DISABILITY



DENSITY OF DISABLED POPULATION

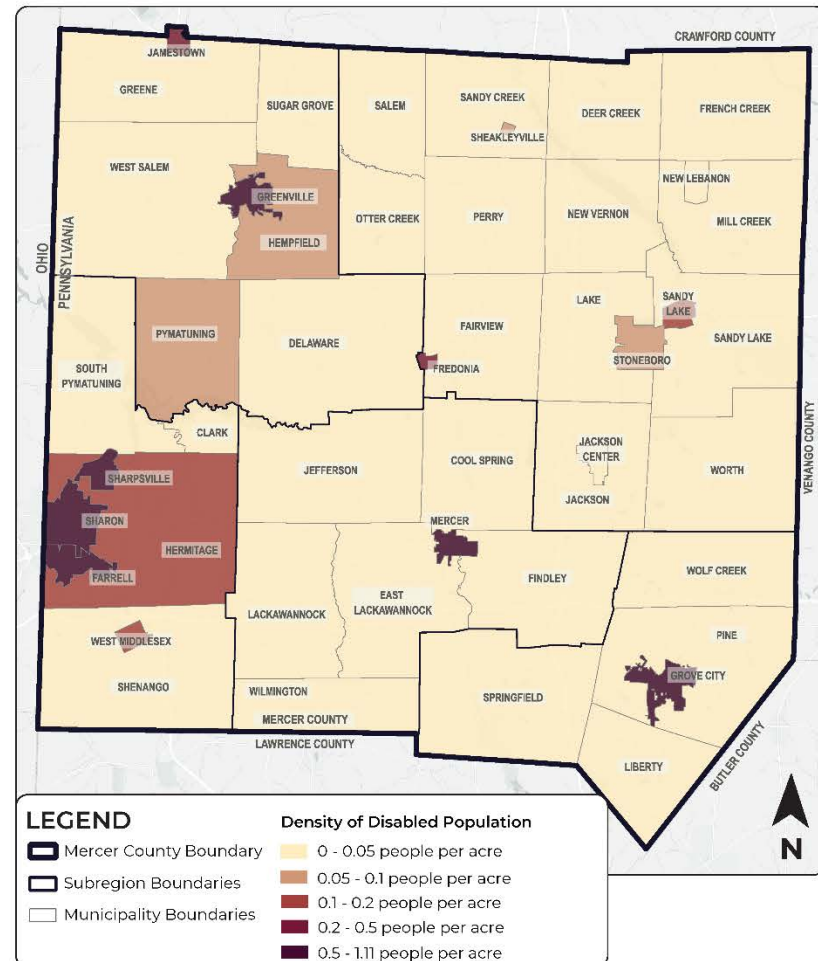
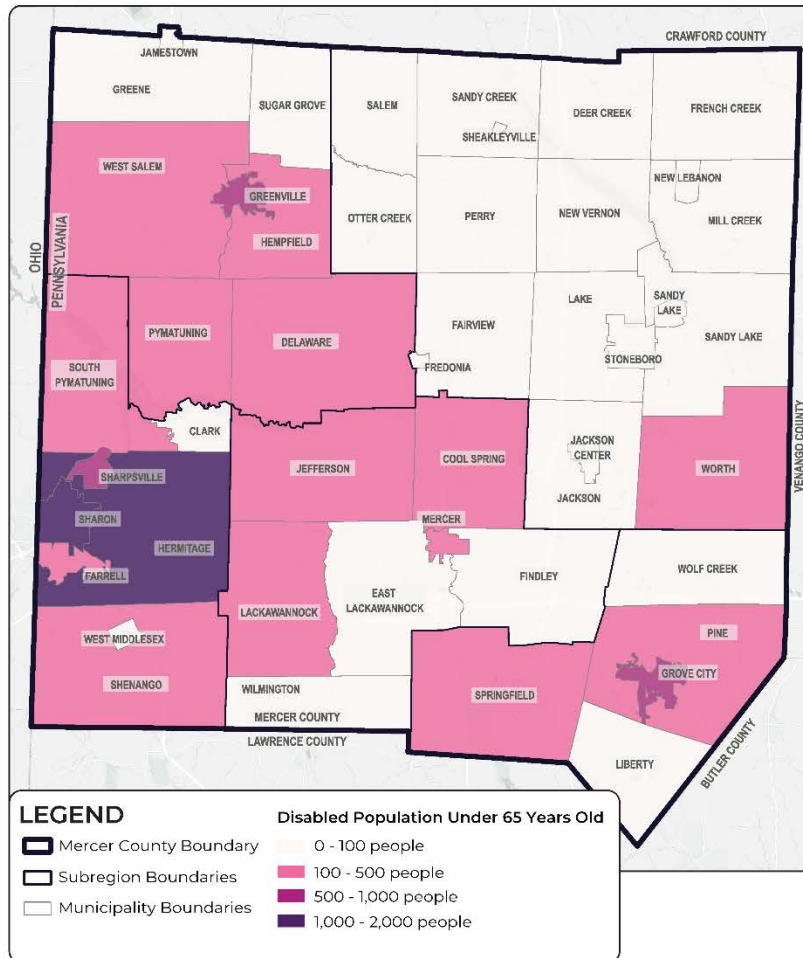


Figure 16. Absolute Number and Density of Population with a Disability



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

DISABLED POPULATION UNDER 65



DENSITY OF DISABLED POPULATION UNDER 65

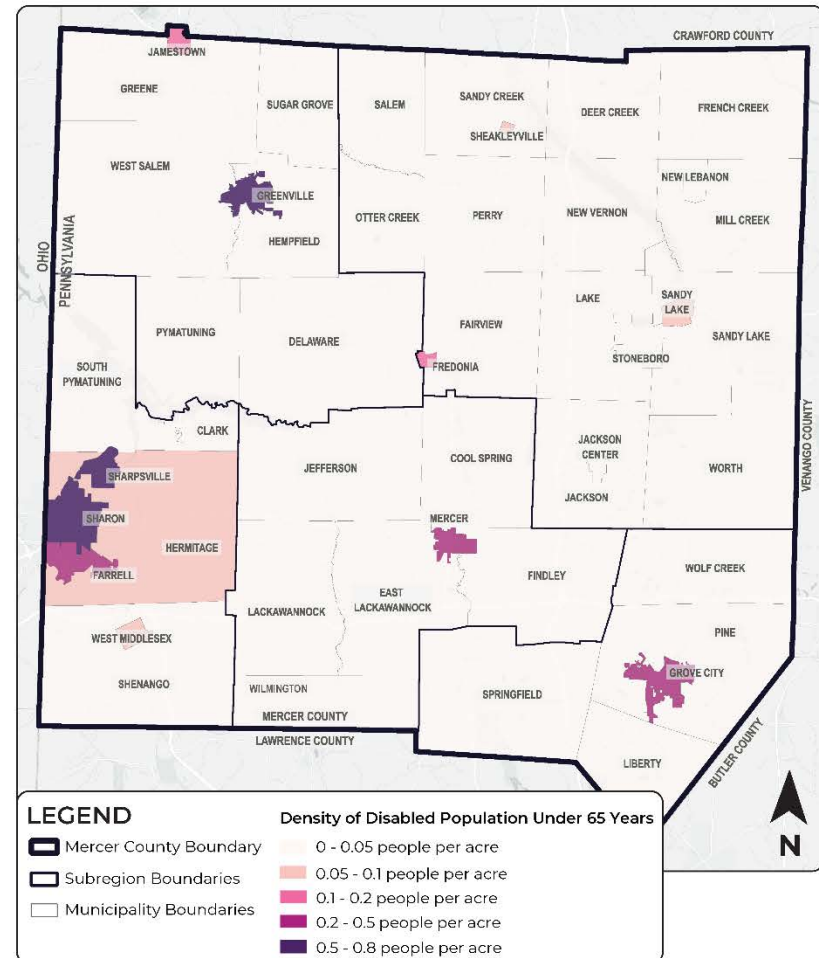
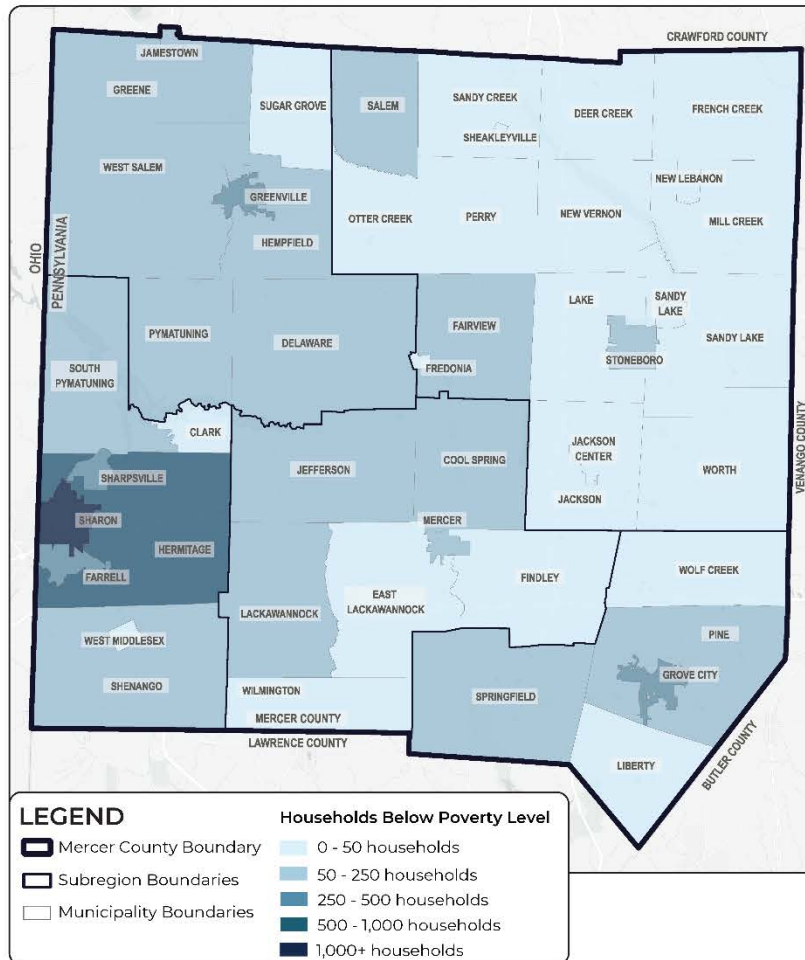


Figure 17. Absolute Number and Density of Disabled Population Under 65 Years Old



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

HOUSEHOLDS BELOW POVERTY LEVEL



DENSITY OF HOUSEHOLDS BELOW POVERTY LEVEL

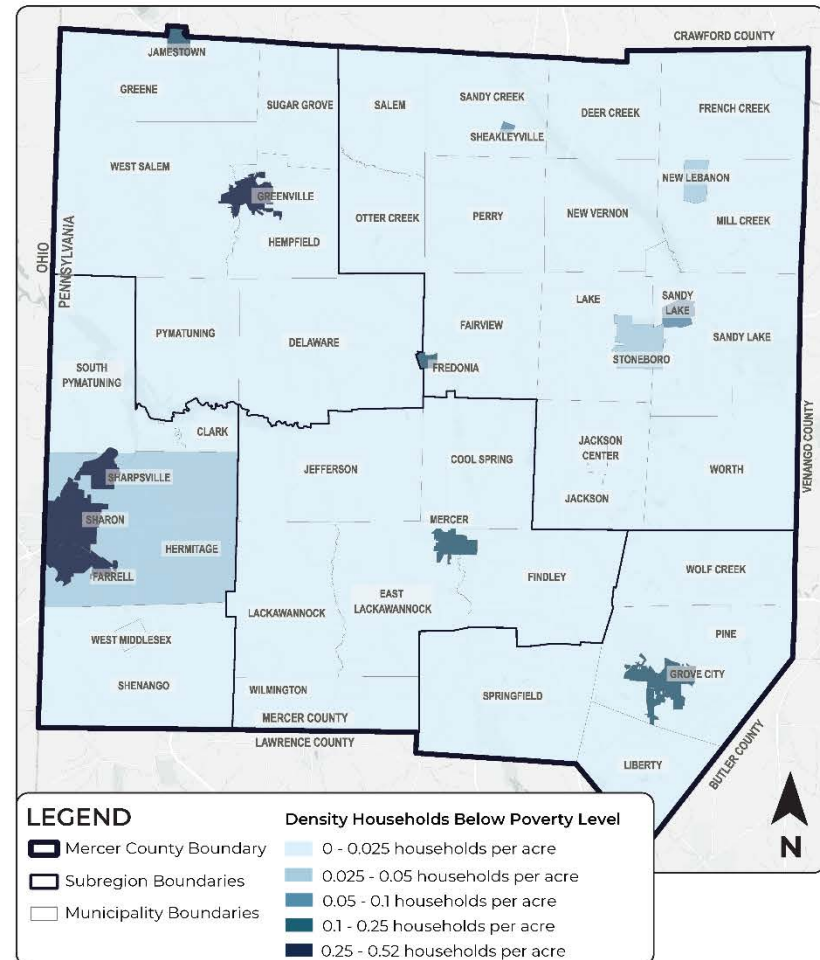
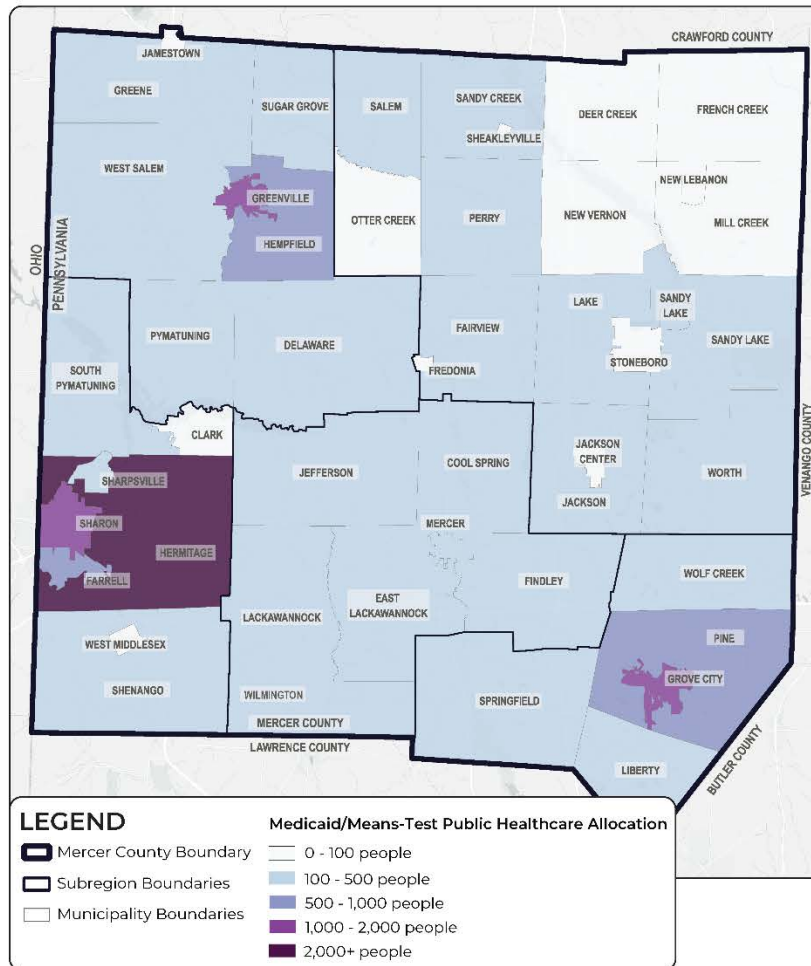


Figure 18. Absolute Number and Density of Households Below Poverty Level



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

MEDICAID ALLOCATION



DENSITY OF MEDICAID ALLOCATION

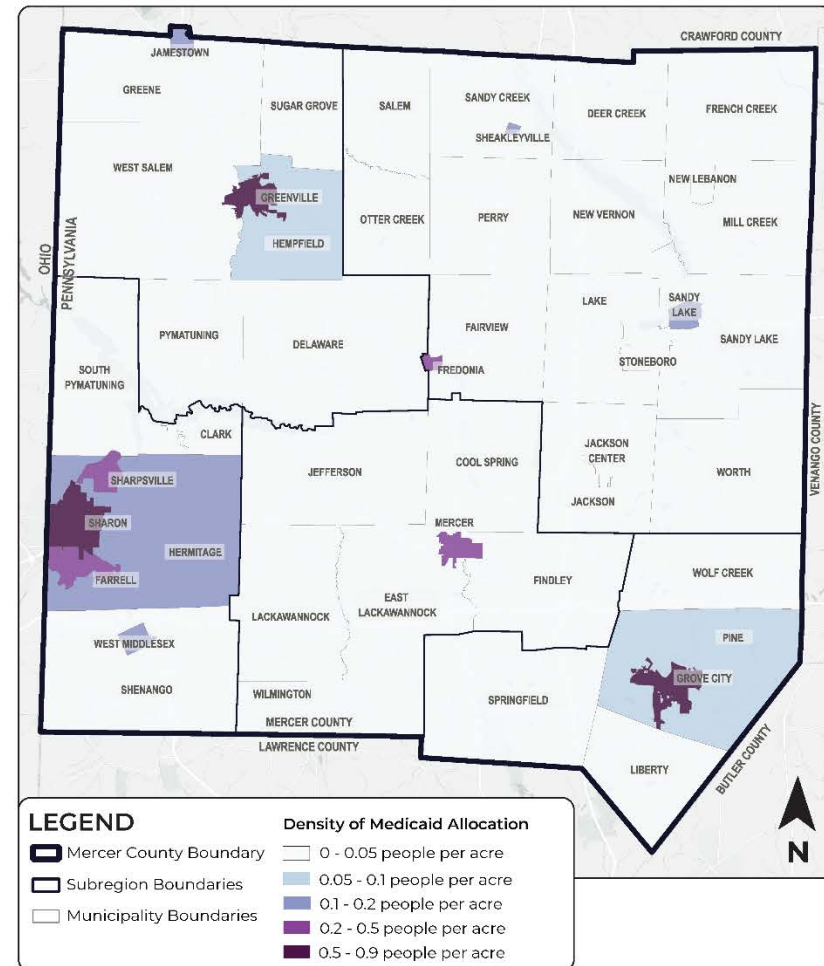
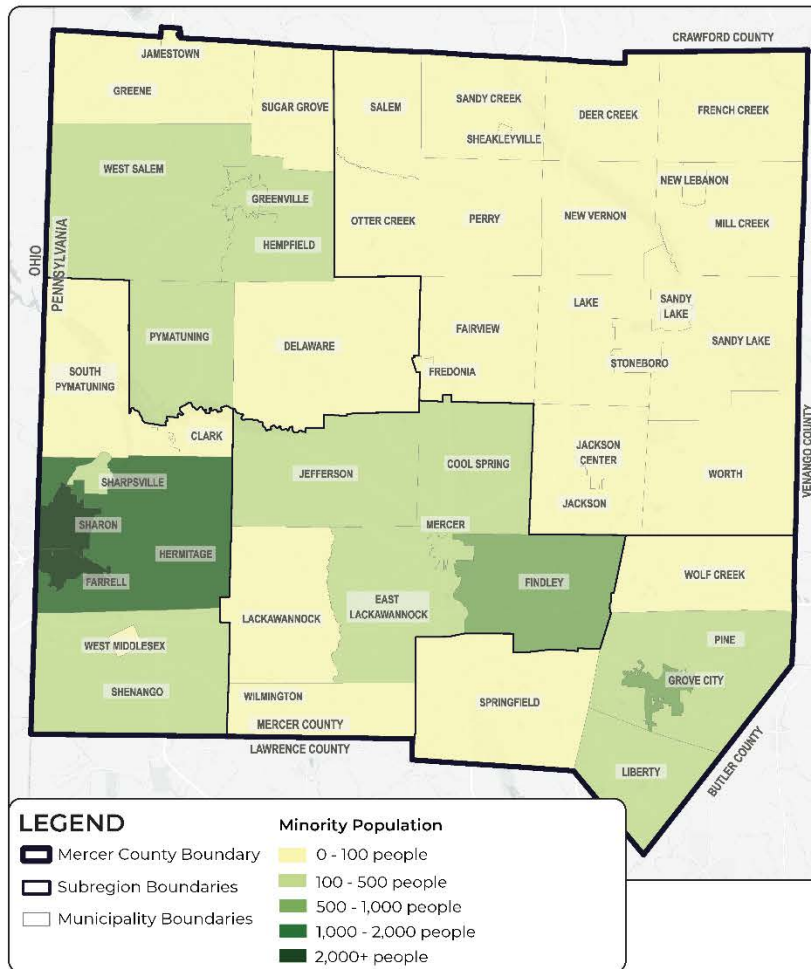


Figure 19. Absolute Number and Density of Medicaid Allocations



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

MINORITY POPULATION



DENSITY OF MINORITY POPULATION

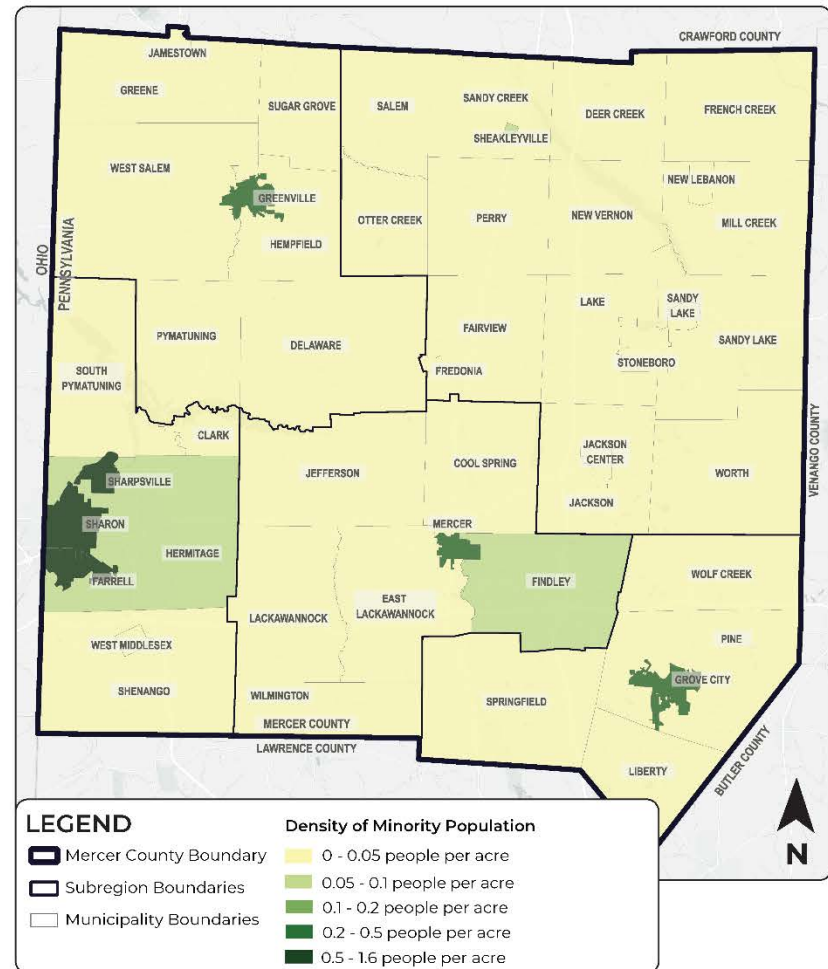
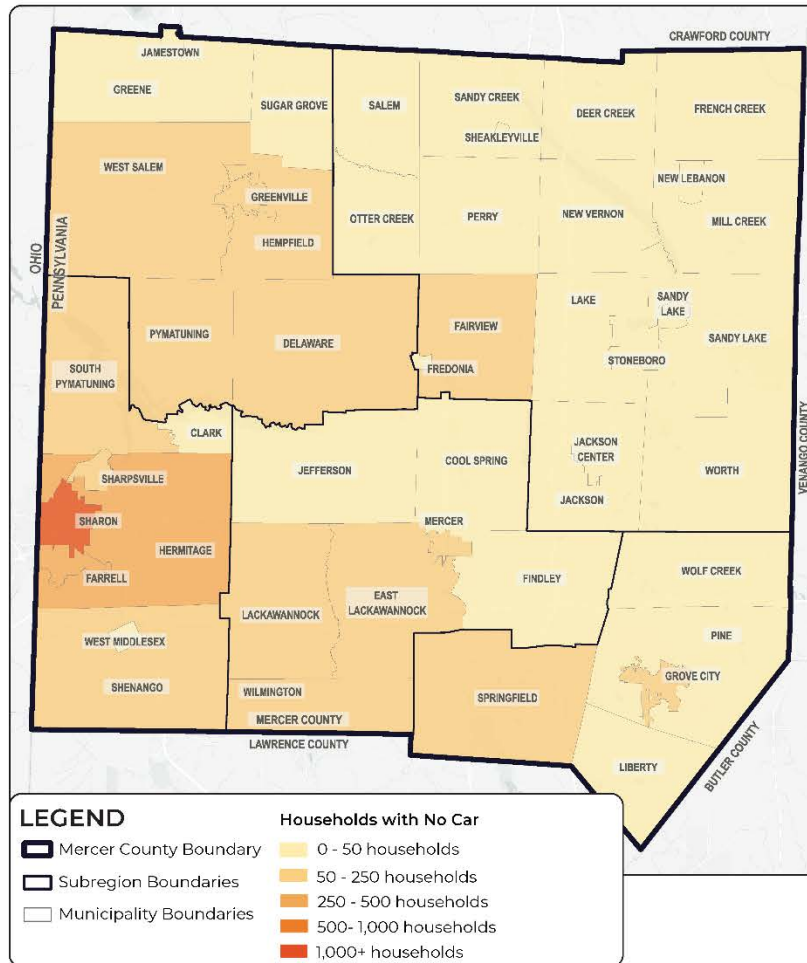


Figure 20. Absolute Number and Density of Minority Population



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

HOUSEHOLDS WITH NO CAR



DENSITY OF NO CAR HOUSEHOLDS

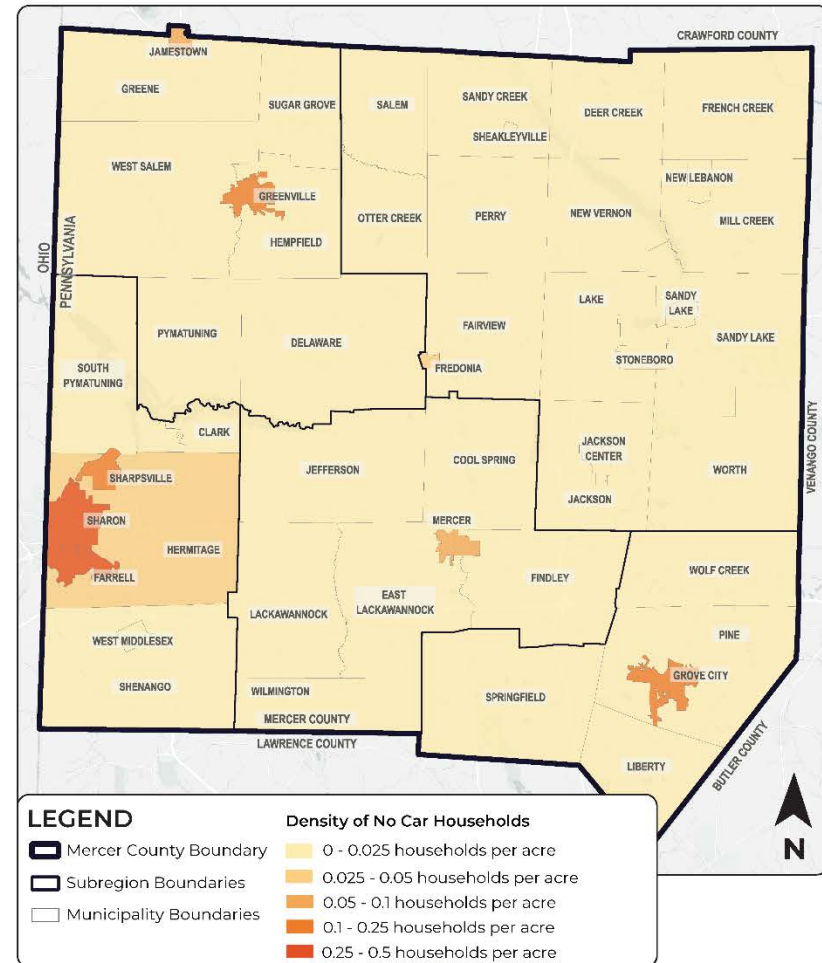
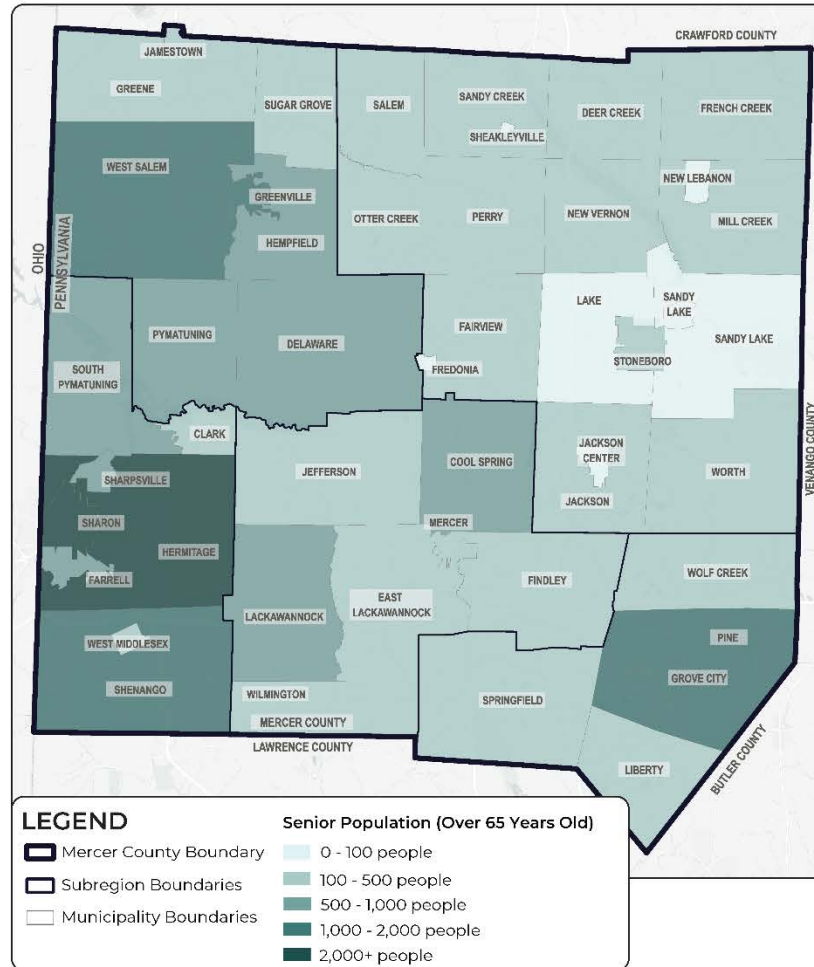


Figure 21. Absolute Number and Density of No Car Households



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

SENIOR POPULATION (OVER 65)



DENSITY OF SENIOR POPULATION (OVER 65)

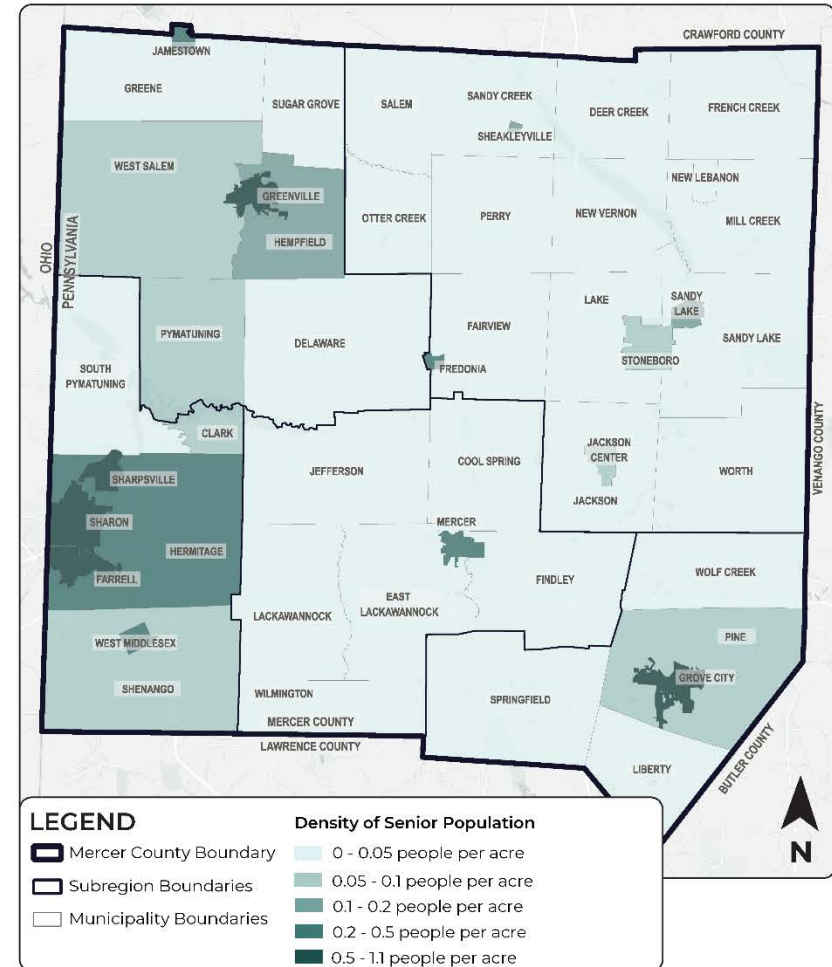
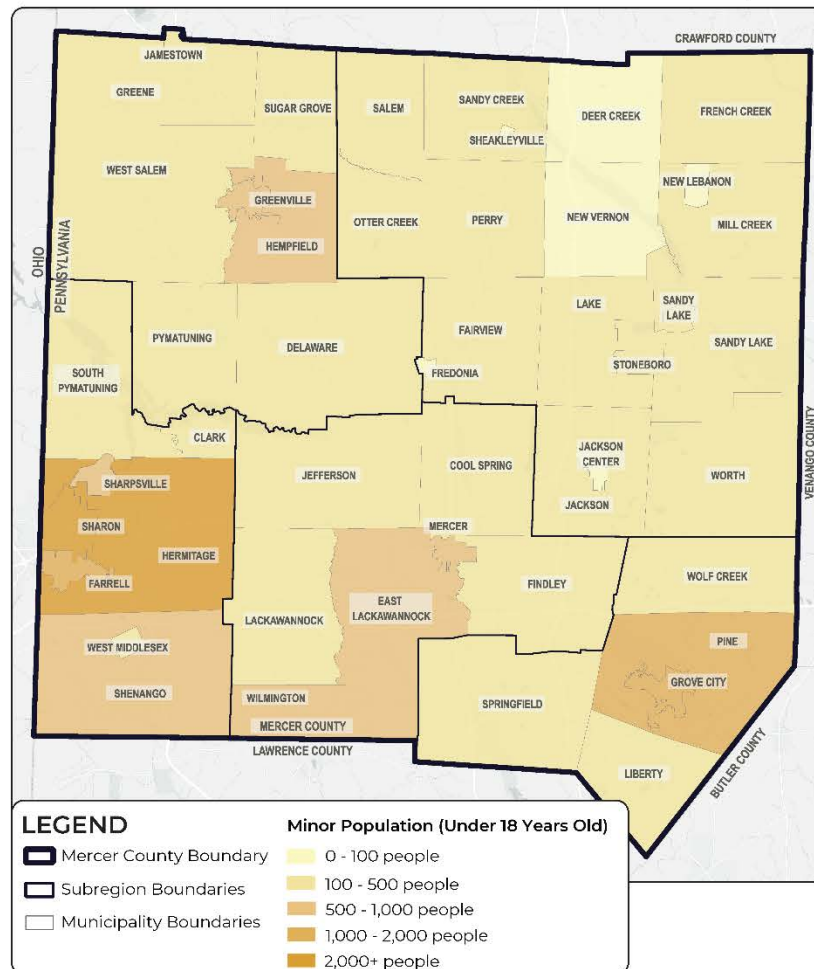


Figure 22. Absolute Number and Density of Population over 65 Years Old (Senior Population)



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

MINOR POPULATION (UNDER 18)



DENSITY OF MINOR POPULATION (UNDER 18)

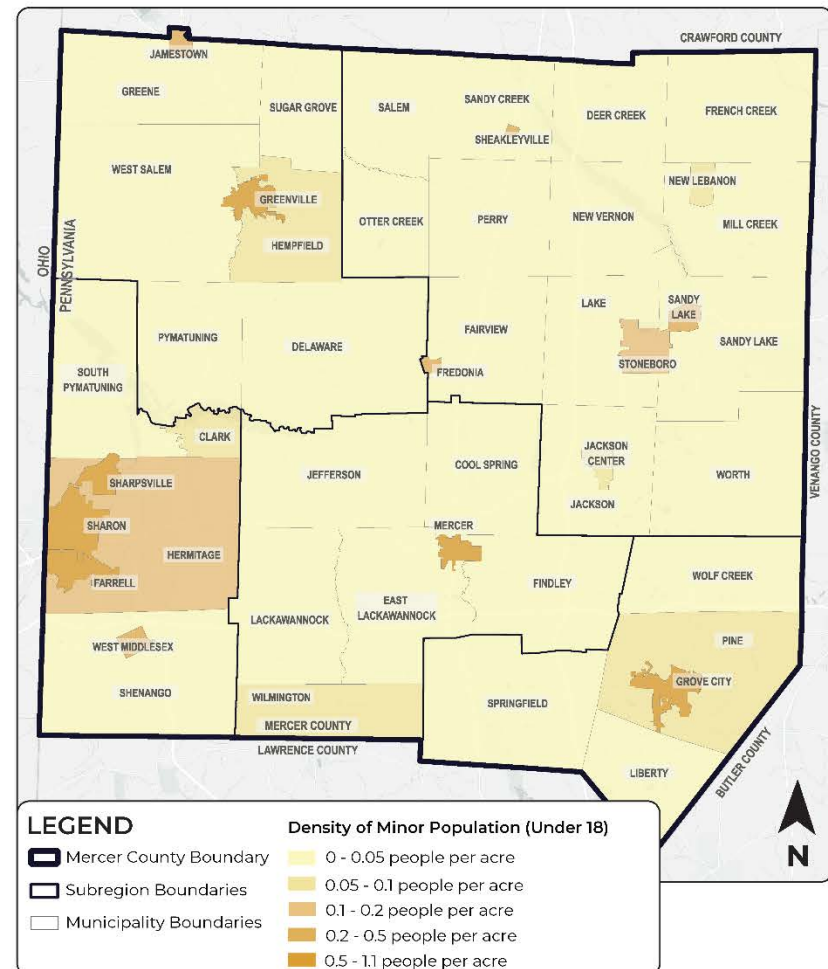
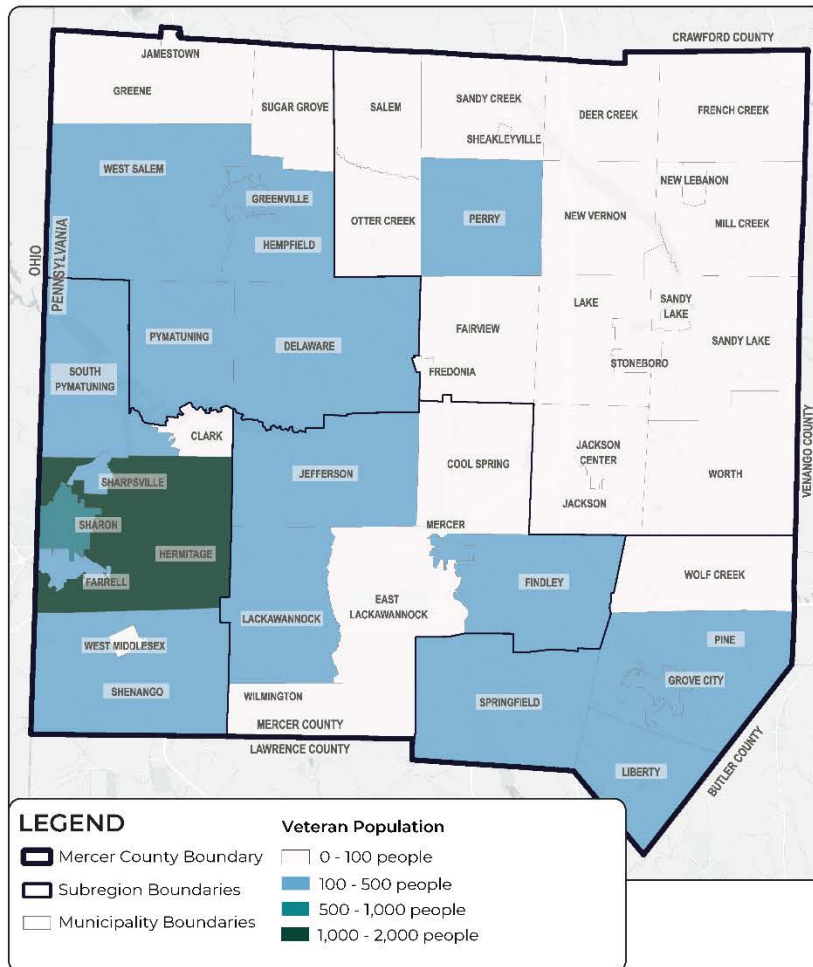


Figure 23. Absolute Number and Density of Population Under 18 Years Old (Minor Population)



COORDINATED HUMAN SERVICES TRANSPORTATION PLAN

VETERAN POPULATION



DENSITY OF VETERAN POPULATION

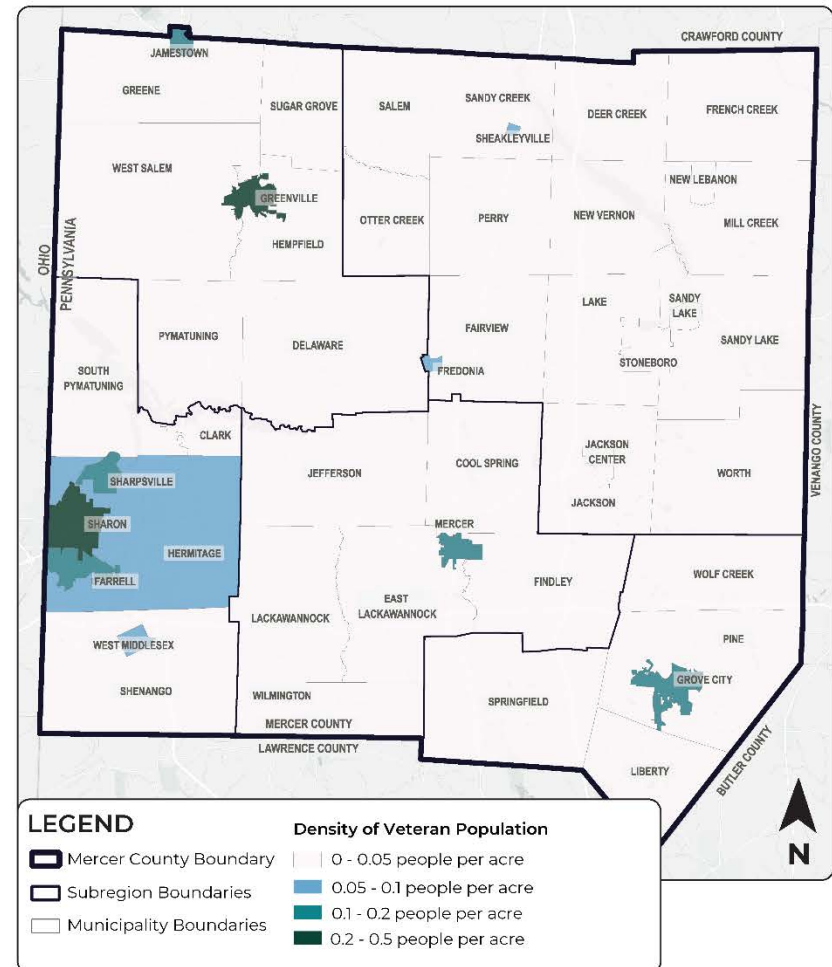


Figure 24. Absolute Number and Density of Veteran Population

4. Public Engagement

Public engagement is a key component of the planning process in Mercer County. Meaningful involvement of riders, stakeholders, service providers, and community organizations ensures that the plan reflects the real transportation needs, challenges, and priorities of the county's diverse populations. Through a combination of public meetings, surveys, and direct outreach, the planning process gathered valuable input about seniors, individuals with disabilities, low-income residents, and other key groups who rely on human services transportation.

4.1. Public Meeting

A public meeting was held on June 25, 2026, with two stakeholders and three Steering Committee members. Participants emphasized that transportation is a critical link to health and human services in Mercer County, including services tied to broader “vital conditions” for health and well-being (such as dental care). Attendees noted that while shared-ride programs cover a substantial portion of costs for seniors and people with disabilities, the remaining rider co-pay can still be unaffordable for some residents, and participants stated it cannot be covered through sponsorship. Stakeholders also stressed that adding more service is difficult given constraints related to driver availability and funding.

Participants described additional barriers that affect whether people use available services, including apprehension about riding (especially for families with children), difficulty managing scheduling requirements, and the need for clearer information for residents experiencing housing instability or frequent moves. Several comments focused on system legibility—limited bus stop signage, confusion due to route changes over time, and the need for easy-to-understand route mapping and communication—while also noting that real-time tracking tools (such as the MyStop app for SVSS) can help some riders.

The discussion also included potential service approaches such as designated-stop services requiring advance booking and interest in flex-route concepts, recognizing that flex service would likely require new software. Participants referenced existing coordination efforts, including organizations purchasing passes to support client transportation, and noted upcoming route changes scheduled for Monday, July 6, 2026, with a free-ride day intended to encourage awareness and adoption.

4.2. Public Survey

An online public survey was conducted between June 5 and 26, 2026, with twenty responses collected. Recurring themes from open-ended responses include:

Extended service hours (evenings, weekends, shift work compatibility)

Multiple respondents noted that service hours impact their ability to access employment.

- *"Transportation is one of the most significant barriers to employment and community participation for many Mercer County residents, particularly individuals with disabilities, mental health challenges, and those with limited financial resources."*
- *"Currently, some individuals are unable to accept employment opportunities because transportation routes do not align with their work location or schedule."*
- *"We need affordable transportation options that operate during standard business hours AND outside of standard business hours... when I need to get to work, my work schedule fluctuates. I can work weekends and evenings and I need transportation options that will allow me to maintain employment."*
- *"Many employers require employees to work evenings, weekends, or shifts that fall outside of traditional transportation hours. Extending service hours and increasing route availability would help individuals maintain employment and reduce absenteeism related to transportation barriers."*

Geographic expansion (rural areas, outer townships)

Respondents outside the Shenango Valley have fewer transportation options.

- *"To get a bus line in Mercer that goes more places than just busy areas."*
- *"Busing that runs to outer lying areas, grove city, greenville, etc."*
- *"I would include a regular bus that operates strictly in Greenville... many of our regular patrons have no access to vehicles."*
- *"I would also like to see additional transportation options between rural communities and major employment hubs throughout Mercer County."*

Faster, more frequent service

Respondents noted operating and scheduling limitations result in long wait times.

- *"It would be better to expand the network for the transportation area, as well as reduce the wait time for transportation. As I have to wait hours sometimes to get picked up after an appointment."*



- *"It's hard to get places with bus/public transportation that doesn't run often enough or close to where I need to be."*

More Flexible Options

60% of respondents expressed desire for more affordable, flexible options that accommodate non-traditional schedules and multi-stop trips. Service models must accommodate trip chaining (medical, pharmacy, and grocery) efficiently, or users will face excessive wait times and travel burdens.

Better Information About Available Services

About 40% of respondents noted that lack of knowledge about available services makes it more difficult to get around.

Table 9: "What challenges have you encountered using transportation services?"

Issue	Count
Operating hours of service	9
Knowledge of available options	8
Service not available where I need to go	5
Weekends or Holiday service	5
Cost too expensive	4
Reservations and scheduling	4
Need a ride outside of Mercer County	3
Too difficult to travel with children, pets, or items.	2
Not eligible for subsidy	2
Payment options (no exact change, or cannot use card/app)	2
Other	2
Provider cancellation	1

4.3. Stakeholder Interviews

Meetings were held with nine stakeholders, including an in-person meeting on June 25, virtual meetings in July, and a series of one-on-one calls.

Stakeholders noted that while several transportation programs exist for seniors, people with disabilities, and those with medical needs, significant gaps remain for low-income residents, those under 60, and people needing transportation for employment, social, or after-hours activities. Driver shortages, funding limitations, regulatory barriers, and lack of clear information and coordination were identified as major challenges. There is a



strong need for affordable, accessible, and well-communicated transportation options to support health, employment, and social inclusion across the county.

Table 10: Stakeholders Contacted

Organization	Attended Discussion
Area Agency on Aging	✓
Buhl Foundation	✓
Butler County Community College	
Community Action Partnership of Mercer County	
Community Counseling Center Mercer County	
Farrell City Manager	
Hermitage City Manager	
Hope Center for the Arts & Technology	✓
Laurel Technical Institute	
Mercer County Behavioral Health Commission	✓
Mercer County Commissioners	
Mercer County Housing Authority	✓
PA House District Offices	
PA Senate District Office	
Penn State Shenango	
Phil's Taxi	✓
Primary Health Network	
Prince of Peace Center	✓
Salvation Army	
Sharon City Manager	
Sharpsville Boro Manager	
Shenango Valley Chamber of Commerce	
Tina's Taxi	✓
United Way of Mercer Co	
UPMC Horizon Foundation	✓
Urban League	
Whole Life Services	

Overview of Stakeholder Insights

Stakeholders interviewed include transportation providers, workforce development organizations, and human services agencies serving Mercer County residents. These stakeholders collectively serve thousands of vulnerable county residents annually and provide ground-level perspectives on transportation barriers directly impacting access to employment, healthcare, education, and basic needs.

Consistent themes emerged across all stakeholder groups: transportation gaps disproportionately impact rural residents, individuals with disabilities, low-income populations, and those requiring non-traditional service hours. After-hours and employment-focused transportation was identified as the most critical unmet need, with current services operating primarily during business hours and leaving second and third shift workers without reliable options.

Geographic coverage gaps in rural and outlying townships create high costs and limited availability, while regulatory constraints prevent existing providers from serving demonstrated demand—including same-day trips, service to individuals under 18 or aged 60–65 seeking employment, and flexible crisis transportation. Stakeholders also highlighted significant information and communication gaps, with both users and providers lacking accessible materials about available transportation options, schedules, and eligibility requirements.

A critical insight from stakeholders is that visible demand likely underestimates actual need. As one workforce development provider observed, it is "hard to gauge how big the problem is—perhaps people just don't apply for workforce development because they can't get there." Residents self-select out of employment, education, and treatment opportunities based on assumptions about transportation unavailability, creating hidden demand that traditional metrics like waitlists or trip denials cannot capture. Stakeholders emphasized that for some populations, particularly those in rural areas or experiencing mental health crises, "there's no access point" at all.

Additional barriers include insufficient wheelchair-accessible vehicles, technology gaps (lack of app-based booking, limited dispatch hours), driver workforce shortages, complications with longer-distance or service across state borders, and difficulty accommodating multi-stop trips that low-income families require to access food pantries, medical appointments, pharmacies, and other essential services in a single outing.

5. Transportation Needs & Gaps

Identifying transportation needs and gaps is central to developing an effective Coordinated Human Services Transportation Plan (CHSTP) for Mercer County. This section examines the mobility challenges faced by seniors, individuals with disabilities, low-income residents, and other vulnerable populations. Drawing on public input, stakeholder feedback, and service data, the plan highlights areas where current transportation services may fall short – such as limited geographic coverage, infrequent service, unmet demand for medical or employment trips, and barriers related to affordability or accessibility.

Understanding these needs and gaps provides a foundation for targeted strategies and improvements. By pinpointing where and why transportation services are insufficient, the CHSTP can recommend solutions that expand access, enhance reliability, and ensure that all residents have the opportunity to connect with essential destinations and community resources.

5.1. Spatial Gaps

With population, jobs, and community resources concentrated in the Shenango Valley in the southwest corner of Mercer County, other parts of the County become more difficult to reach due to increased distances.

- **Rural Access:** Transportation providers are mainly located in the denser southwest region of the county. Vehicles frequently must dead-head to and from these bases, adding unproductive trip time and reducing overall capacity for trips.
- **Travel Across County & State Borders:** Some transportation services are not permitted to cross county, and especially state, borders. Services that are permitted to operate across these borders typically require reservations substantially longer in advance or may have more limited operating hours for these longer trips.
- **Long-Distance Trips:** Trips outside Mercer County, typically to access specialized medical services, are on average much longer than those within the county, increasing travel time, distance, and cost. Trips to Pittsburgh and Allegheny County average over 72 miles each way, and trips to Bulter County average nearly 37 miles each way, compared to under 10 miles for the average trip within Mercer County. More efficient or affordable long-distance travel options are not available or accessible.

5.2. Temporal Gaps

The hours of operation for transportation services can be a hindrance to accessing transportation, particularly in the late afternoon and evening as well as on weekends, and for accessing evening employment or longer-distance trips.

- **Trip Time Restrictions:** Regulations for most rider and trip types restrict same-day trips, reducing flexibility for riders.
- **Advance Reservation Requirements:** Most trips require advance reservations, usually by a certain time the day prior depending on the type of trip, reducing flexibility for last-minute or emergency needs. Some longer-distance trips, such as those outside of Mercer County, may require riders to make reservations weeks in advance.
- **Trip Scheduling Hours:** Schedulers may only be able to take reservations during business hours.
- **Long Wait Times:** Residents in rural areas face longer wait times and greater difficulty accessing transportation. Trips can take a long time, including long waits for vehicle dispatch from what may be a far-flung depot or garage.
- **Hours of Service:** The most affordable transportation options operate only during weekday daytime hours, which limits availability in the evenings, including trips to or from evening-hour employment, and reduces access to longer-distance destinations.

5.3. Policy & Institutional Gaps

Eligibility Gaps

A rider's out-of-pocket cost for a trip varies depending on the type of rider (e.g. senior over 65, disabled person) and trip purpose (e.g. medical visit, trip to work). While riders who meet certain eligibility requirements may qualify for a free or low-cost trip, others may be required to pay full fare. While providers attempt to make transportation options available to as many people as possible, available funding for many categories of rider and trip limit access to many in need. The multiple, often overlapping, categories can be unclear or confusing for riders and present a barrier to knowing residents' transportation options.

- **Eligibility and Regulatory Barriers:** Many residents, especially those under 65, lack options for everyday trips. Regulations prevent certain trips, such as same-day or employment-related rides for some age groups. Complex and overlapping eligibility for trip subsidies can be confusing.

- **Complex Eligibility Categories:** Eligibility for transportation and subsidies varies greatly depending on the type of rider (see Table 2), adding confusion about who qualifies for services and at what cost. The variety of rider types and applicable funding streams can make it difficult for riders or providers to understand available options.
- **Affordable Access for Vulnerable Populations:** The remaining 15% co-pay for shared-ride services is a barrier for low-income residents and cannot be sponsored by outside organizations. Those aged 60-64 pay full fare, which is often unaffordable.
- **Desire for Trip Chaining:** Riders identified a desire for trip chaining—visiting multiple stops in sequence during a day—which can save them time and energy by completing various tasks in one outing. However, current trip time and purpose restrictions make that difficult to arrange.
- **Access to Transportation for Other Needs:** Funding is also needed for trips beyond medical and grocery needs, which often take place outside of standard weekday service hours, including recreation, social events, and religious services, to help keep residents active and reduce isolation.
- **Conditions Not Covered by Disability or Other Categories:** While many riders qualify for transportation services and subsidies, some Mercer County residents with significant needs—such as those seeking pre- and post-natal care, substance use disorder treatment, or mental healthcare without a formal diagnosis—often do not meet current eligibility criteria. These gaps highlight the need for more flexible and inclusive eligibility to ensure all residents with critical health and social needs can access essential transportation services.

Infrastructure Gaps

- **Accessible Vehicles and Expanded Coverage:** There is a need for more wheelchair-accessible vehicles and expanded service coverage, particularly in rural areas and for those with mobility challenges.
- **Driver Shortages and Funding Constraints:** Expanding service is difficult due to a shortage of drivers and limited funding, affecting both public and private providers.
- **Sidewalk and Active Transportation Infrastructure Gaps:** Lack of safe and comfortable paths may prevent people from accessing existing services on foot, bike, or transit services like SVSS.



Awareness & Information Gaps

- **Clear Information and Coordination:** Stakeholders report a lack of clear, accessible information about available transit options, schedules, and eligibility. Real-time tracking apps are helpful but not universally accessible. Printed materials and better communication are needed, especially for those experiencing housing instability or crisis.
- **Knowledge Gaps about Existing Resources:** While existing tools like PennDOT's Find My Ride tool allow people to find and apply programs they qualify for in one place, those seeking services may not know they are available. Stakeholders noted that even within large organizations like healthcare networks, staff may not be aware of all available resources, resulting in unmet needs and inefficient or duplicative services.
- **Lack of Centralized Coordination:** Stakeholders expressed a desire for a county-wide mobility coordinator to help residents of all ages and situations find rides, but current efforts are fragmented.
- **Rider Communication Challenges:** Clients with changing phone numbers, full mailboxes, and limited outreach make it hard to notify riders about bus arrivals or service changes. Clients do not always notify providers of cancellations, resulting in wasted travel time.
- **Hidden Demand Likely Exists:** People who are unable to drive themselves may choose to withdraw from the workforce or community life, assuming they do not have affordable transportation options.

6. Strategies & Implementation

Mercer County envisions a seamless, inclusive, and resilient transportation network that connects all residents—regardless of age, ability, income, or location—to essential destinations and opportunities. Our vision is to maintain and expand reliable mobility options by investing in accessible vehicles, modern technology, and coordinated service delivery, while ensuring that information is clear and easily available for everyone. We are committed to closing gaps in service hours, geographic coverage, and eligibility, so that low-income individuals, people with disabilities, seniors, and those with unique or emerging needs can travel affordably and confidently for work, healthcare, education, and community life. Through strong partnerships and continuous engagement, we will foster a flexible, efficient, and sustainable transportation system that supports independence, well-being, and quality of life for all who call Mercer County home.

To achieve this vision, the following strategies have been developed to address the specific needs, barriers, and priorities identified through public input, stakeholder feedback, and service analysis.

6.1. Maintain and Expand on Existing Resources

Maintain and Enhance Existing Section 5310 Program Services

Sustaining and improving Section 5310 program services ensures that older adults and individuals with disabilities continue to have reliable transportation. This includes timely replacement of vehicles, maintaining service levels, and supporting coordinated service delivery models. Ongoing investment in maintenance and operations safeguards the effectiveness and safety of the fleet. By prioritizing these core services, agencies can meet current needs while preparing for future demand.

Reduce Information Barriers to Make Best Use of Existing Resources

Centralize information through a regional mobility management center or online portal to simplify trip planning and scheduling. Ensure materials are accessible to all by making them available in both digital and printed formats. Conduct targeted outreach and education campaigns throughout the County to raise awareness among eligible riders and caregivers. Train partner agency staff and partners to provide accurate, up-to-date information on available services.

Simplify and Clarify Program Rules

Complex and inconsistent program rules can create confusion for both riders and providers. Streamline rules and eligibility criteria to provide clear, accessible information to the public. Regular training for staff and partners ensures consistent application of

rules. Transparent policies build trust and increase program participation, while reducing administrative burden.

Continue Investment in Technological Resources and Capabilities

Leveraging technology, such as Ecolane scheduling software and PennDOT's Fixed Route Intelligent Transportation System (FRITS) real-time vehicle tracking, has already shown benefits for operational efficiency, improved service reliability, and customer experience. Investments should prioritize systems that facilitate coordination among providers and streamline administrative processes. Technology can also support data-driven decision making and performance monitoring. Ensure that resources are accessible to all users, including those with limited digital literacy. Ongoing staff training and technical support are key to maximizing the benefits of these investments.

Improve Existing Transit Accessibility

Enhancing connections to existing fixed-route and demand-response transit services can significantly expand mobility options. Infrastructure improvements such as sidewalks, safe crossings, shelters, and wayfinding signage can make transit more accessible and comfortable. Partner with state, regional, county, and local agencies and community organizations to help identify and address concerns, and support planning and grant application processes.

6.2. Increase Access to Underserved Populations

Maintain and Expand Service Coverage and Hours

Expanding geographic coverage and extending service hours addresses critical mobility gaps for low-income individuals, people with disabilities, and those in rural or underserved areas. Piloting evening, weekend, and holiday services, as well as flex-route and other innovative service models, can better meet the needs of shift workers and residents with non-traditional schedules, ensuring equitable access to essential destinations. Work with PennDOT and funding agencies to identify potential sources of funding for expanded service.

Enhance Outreach and Travel Training

Proactive outreach and travel training programs inform and empower new and existing riders to use available services confidently. These initiatives can include in-person training, instructional materials, and peer ambassador programs. Travel training reduces anxiety, increases independence, and can boost ridership. Continuous feedback from participants helps refine and improve these programs.

Expand Accessible Vehicle Fleets

Increasing the number and geographic distribution of wheelchair-accessible vehicles is vital for serving individuals with disabilities. Transportation providers should prioritize accessible vehicle acquisition in fleet replacement plans and seek funding to support these purchases. Partnerships with human service agencies can help identify specific accessibility needs.

Address Gaps for Special Populations

Many individuals fall outside the eligibility criteria for existing programs but still face significant transportation barriers. Strategies include developing locally funded voucher programs, partnering with nonprofits, and piloting flexible and innovative service models for those not covered by traditional funding streams. Regular engagement with community organizations helps identify emerging needs and ensures that addressing these gaps promotes social equity and community well-being.

6.3. Improve Coordination and Efficiency

Strengthen Relationships with Regional Human Services Providers

Build partnerships with human services providers and regional organizations for shared services, joint procurements, and coordinated scheduling. Hold regular stakeholder roundtables to address challenges, share best practices, and coordinate service to ensure existing resources are most effectively utilized. Regional collaboration maximizes resources and strengthens funding applications.

Centralize Mobility Management

A regional mobility manager can coordinate trip brokering, eligibility screening, and customer support across multiple providers. Centralization enables better data collection and performance monitoring. It also facilitates the implementation of technology solutions and regional marketing efforts to support a seamless rider experience and more efficient use of resources.

Utilize Technology for Coordination

Shared scheduling platforms, real-time data sharing, and integrated communication tools enable providers to coordinate trips, pool resources, and optimize routes. Technology can also support cross-agency billing and reporting, reducing administrative burden. Regular training ensures that all partners can effectively use these systems. Data analytics can identify inefficiencies and inform service improvements. Technology-driven coordination enhances both operational efficiency as well as accessibility and rider satisfaction.

Expand Collaboration with Non-Traditional Providers

Partnering with transportation network companies (TNCs), taxis, volunteer driver programs, and other non-traditional providers can increase flexibility and coverage. These partnerships can fill gaps in service hours, geographic reach, or specialized needs. Clear agreements and protocols ensure quality and safety standards are met. Pilot programs can test innovative models and inform future expansion. Leveraging non-traditional providers supports a more resilient and responsive mobility network.

6.4. Address Regulatory & Funding Barriers

Identify and Leverage New Funding Streams

Diversifying funding sources is essential for program sustainability and growth. Agencies should pursue federal, state, and local grants, as well as public-private partnerships and philanthropic support. Innovative funding models, such as mobility funds or community benefit agreements, can supplement traditional sources. Building relationships with local businesses, health systems, and community organizations fosters a proactive approach to ensure the efficacy and resilience of mobility programs and pursue funding opportunities.

Advocate for More Flexible Federal and State Funding

Rigid program rules and funding silos often limit the ability to meet local needs such as trip chaining. Advocacy efforts should be coordinated with other shared-ride providers across the Commonwealth and focus on increasing flexibility for fund use, blending of funding streams, and supporting pilot programs. Engaging with policymakers and participating in statewide coalitions amplifies local needs. Flexibility enables agencies to respond to changing needs and test innovative solutions. Ongoing dialogue with funders is key to achieving meaningful policy change.

Explore Rider Subsidy, Voucher, and Mobility Fund Programs

Subsidy and voucher programs can reduce out-of-pocket costs for low-income, disabled, and otherwise underserved riders. Mobility funds can provide flexible support for trips not covered by traditional programs. Agencies should pilot and evaluate these models to determine effectiveness and equity impacts. Partnerships with local governments, healthcare providers, philanthropic organizations and nonprofits can help administer and fund these programs. Rider-focused subsidies promote greater access and independence.

Expand Eligibility and Trip Purposes

Expanding eligibility criteria and allowable trip purposes increases access for those who need transportation for employment, education, social, and other essential activities. Agencies should advocate for policy changes at the state and federal level to allow

broader use of program funds. Again, advocacy efforts should be coordinated with other shared-ride providers across the Commonwealth. Pilot projects can demonstrate the benefits of expanded eligibility. Clear communication with riders and stakeholders about changes is essential. Greater flexibility ensures programs remain responsive to diverse community needs.

6.5. Build for the Future

Support Driver Recruitment and Training

Recruiting and retaining qualified drivers is critical to service reliability and safety. Agencies should offer competitive wages, benefits, and ongoing training, including customer service and disability awareness. Carpool or volunteer ride programs can supplement other transportation services, especially in rural areas. Partnerships with workforce development organizations can support recruitment efforts.

Promote Alternative Fuel Vehicle Programs

Expand use of alternative fuel vehicles and infrastructure for current public transportation and human service transportation providers. Consider mutual cooperation agreements between public transportation providers and human service transportation providers to share alternative fuel infrastructure. Training for maintenance staff and drivers is essential for successful adoption. Long-term planning should include strategies for fleet replacement and infrastructure expansion.

Advocate for Riders and Transit-Supportive Policies

Agencies should champion the needs of seniors, people with disabilities, and other vulnerable groups by highlighting their transportation challenges in community and policy forums. Promoting zoning and development standards that support walkability and transit-oriented design ensures accessible communities. By collaborating with local governments and integrating transportation planning with land use policy, agencies can help create sustainable, equitable mobility solutions for all residents.

Gather Ongoing Data and Feedback to Monitor Progress

Continuous engagement with riders and stakeholders ensures that services remain responsive and effective. Tools such as surveys and advisory committees can provide valuable insights. Performance metrics should be tracked and reported regularly to guide improvements. Ongoing feedback loops drive continuous improvement and innovation.

Promote Innovation and Adaptability

Embracing new service models, technologies, and partnerships allows agencies to respond to changing needs and opportunities. Pilot projects, demonstration grants, and



ongoing evaluation support a culture of innovation. Agencies should stay informed about national best practices and emerging trends. Flexibility and adaptability are key to long-term success, ensuring that mobility systems remain relevant and resilient in a changing region.

DRAFT



7. Appendix


Table A: Mercer County Human Services Transportation Provider Inventory

Provider name	5310 Funding?	Service Type	Description
Shenango Valley Shuttle Service (SVSS)	Yes	Fixed Route	Bus service operated by MCRCOG
Mercer County Community Transit (MCCT)	Yes	Shared Ride (Demand-Response)	MCCT is a door-to-door advanced registration program that services all persons of Mercer County. Transit is funded by state and federal grants and the Mercer County Area Agency on Aging, Inc. Discounted service is available to Senior Citizens age 60 or older and qualified disabled residents
Mercer County Area Agency on Aging (MCAAA)	No	Seniors	Medical Assistance Transportation Program (MATP) - Under a contract with Mercer County Community Transit (MCCT), the Agency provides transportation services to medical services, senior community centers, social services, and to shopping and banking facilities. Discounted service is available to Senior Citizens age 60 or older and qualified disabled residents.
Primary Health Network (PHN) Charitable Foundation	No	Healthcare	Provide the Ride patient transportation program offers free door-to-door transportation to appointments for Primary Health Network patients who have no other means of transportation. “Provide the Ride” has been instrumental in building access to care in PHN’s service areas. Existing patients are able to keep their appointments, which increases continuity of care, and new patients are able to receive preventive and/or early treatment. Patient transportation services are currently offered in Beaver, Clarion, Mifflin, Erie, Lawrence, and Mercer counties.
CF Transportation Solutions (contracted through PHN)	No	Healthcare	Primary Health Network works to partner with local community agencies to serve their consumers’ transportation needs. CF Transportation Solutions is committed to safely providing an on-time and personal system of transportation for all residents of Mercer, Lawrence, Crawford and Trumbull Counties.
Veterans' Administration (VA)	No	Veterans	



Provider name	5310 Funding?	Service Type	Description
Disabled American Veterans (DAV) Vans	No	Veterans	
Life NW PA	No	Seniors	Transportation to all medical appointments & to and from the Day Center is provided. LIFE-NWPA has a fleet of vans equipped with lifts & trained staff to accommodate special transportation needs
Whole Life	No	Disabled	Whole Life Services, Inc. is dedicated to providing quality supports to people with disabilities and their families. We provide these supports in community-integrated settings, in their homes, and in non-traditional facility- based services.
HopeCAT	No	Training Program Participants	Hope Center for Arts and Technology, Inc. (HopeCAT) is a 501(c)(3) non-profit institution in the city of Sharon, Pennsylvania, where education, mentorship, and inspiration converge to transform lives in our region. We improve lives through education, mentorship, and inspiration for people in the region. Our programs are led by experts in their field, contributing to workforce development for employers and creating experiences through arts and culture.
Phil's Dependable Taxi	No	Taxi	
J&B Taxi	No	Taxi	
Tina's Taxi	No	Taxi	
McGonigle Ambulance Service	No	Healthcare	
Life Force Ambulance Service	No	Healthcare	



Table B: County and State Demographic Factors (ACS 5-Year Estimates)

Demographic Indicator	Mercer County	PA State	Census Table Source
Households Below Poverty Level	13%	12%	B17017
Population with Disability	17%	14%	S1810
Senior Population (65+)	23%	19%	S0101
Households with No Vehicle	10%	10%	B08201
Medical Assistance Allocation	15%	18%	B992707

Table C: Public Survey Responses by Place of Residence

Municipality	Responses
City of Hermitage	4
City of Sharon	1
Findley Township	1
Grove City Borough	1
Hempfield Township	1
Jefferson Township	1
Perry Township	1
Pymatuning Township	2
Sharpsville Borough	2
Town of Greenville	6
TOTAL	20

Table D: Survey Responses: What are your main reasons for using public transportation or shared ride services?

Reason	Responses
Work	6
Medical Appointments	4
Family, social or community eve	2
Shopping and errands	1
Other: "all of the above"	1
No response	6



Table E: Survey Responses: How do you get around? (all that apply)

Reason	Responses
Private Vehicle	13
Bus/Public Transportation	4
Friends/Family	3
Walk/Bike	3
Medical Transportation	2
Taxi/Uber/Lyft	1

Table F: Survey Responses: Do you have access to a personal vehicle?

Response	Responses
Yes	14
Yes, a friend or family member's	2
No	4

Table G: Survey Responses: When you travel, do you typically require stops at multiple destinations?

Response	Responses
Yes	12
No	8

Table H: Survey Results: What is your age?

Range	Responses
18-24	2
25-34	4
35-49	5
50-64	6
65 or older	3



Table I: Demographics by Municipality

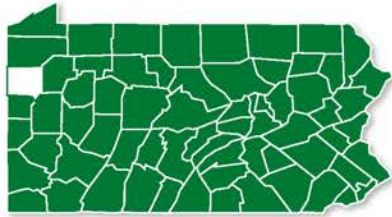
Municipality, County, and State Demographic Comparison (2024 ACS 5-Year Estimates)								
	Households Below Poverty Level	Population with Disability	Population with Disability (Under 65)	Senior Population (Over 65)	Minor Population (Under 18)	Households with No Car	Veteran Population	Medical Assistance Allocation
Mercer County	13%	17%	10%	23%	19%	10%	9%	15%
Pennsylvania	12%	14%	8%	19%	21%	10%	6%	18%
Clark borough	7%	14%	6%	28%	25%	2%	10%	13%
Coolspring township	8%	16%	8%	26%	19%	5%	4%	13%
Deer Creek township	3%	13%	5%	26%	21%	2%	8%	15%
Delaware township	6%	26%	15%	27%	14%	7%	14%	13%
East Lackawannock township	8%	11%	5%	19%	28%	8%	6%	13%
Fairview township	19%	14%	8%	18%	31%	22%	6%	22%
Farrell city	22%	18%	11%	23%	26%	18%	5%	16%
Findley township	7%	13%	6%	12%	7%	2%	10%	12%
Fredonia borough	22%	17%	13%	26%	22%	7%	7%	20%
French Creek township	8%	18%	10%	20%	18%	9%	8%	9%
Greene township	13%	14%	7%	22%	19%	7%	12%	11%
Greenville borough	18%	17%	11%	20%	17%	11%	7%	19%
Grove City borough	13%	12%	9%	14%	14%	9%	5%	20%
Hempfield township	11%	18%	11%	26%	17%	10%	9%	22%
Hermitage city	12%	19%	8%	28%	16%	6%	11%	16%
Jackson township	10%	12%	5%	30%	16%	5%	10%	20%
Jackson Center borough	12%	19%	11%	22%	22%	6%	6%	8%
Jamestown borough	18%	25%	10%	27%	21%	16%	12%	12%
Jefferson township	10%	17%	9%	27%	14%	3%	9%	14%
Lackawannock township	15%	16%	6%	28%	19%	16%	9%	16%
Lake township	10%	12%	9%	12%	32%	20%	6%	21%
Liberty township	6%	12%	7%	24%	20%	2%	10%	13%
Mercer borough	18%	23%	16%	19%	25%	7%	9%	11%



	Households Below Poverty Level	Population with Disability	Population with Disability (Under 65)	Senior Population (Over 65)	Minor Population (Under 18)	Households with No Car	Veteran Population	Medical Assistance Allocation
Mill Creek township	6%	16%	8%	24%	20%	3%	9%	10%
New Lebanon borough	32%	12%	9%	15%	28%	13%	9%	11%
New Vernon township	5%	23%	11%	35%	20%	8%	16%	11%
Otter Creek township	6%	11%	2%	26%	24%	5%	8%	19%
Perry township	7%	20%	7%	30%	21%	2%	14%	27%
Pine township	8%	9%	4%	23%	22%	3%	7%	19%
Pymatuning township	18%	26%	16%	22%	15%	5%	13%	16%
Salem township	19%	11%	8%	14%	34%	11%	8%	15%
Sandy Creek township	15%	13%	6%	26%	20%	8%	12%	16%
Sandy Lake borough	12%	10%	7%	12%	24%	0%	5%	15%
Sandy Lake township	12%	20%	9%	27%	19%	3%	17%	17%
Sharon city	21%	21%	15%	18%	21%	19%	7%	12%
Sharpsville borough	15%	22%	12%	24%	20%	11%	4%	10%
Sheakleyville borough	15%	9%	6%	15%	23%	5%	9%	11%
Shenango township	10%	16%	8%	34%	18%	7%	13%	13%
South Pymatuning township	6%	15%	8%	23%	18%	6%	9%	10%
Springfield township	9%	14%	7%	21%	22%	10%	9%	18%
Stoneboro borough	16%	17%	9%	22%	24%	9%	6%	6%
Sugar Grove township	11%	17%	10%	26%	19%	2%	11%	13%
West Middlesex borough	2%	9%	4%	17%	24%	3%	6%	7%
West Salem township	11%	21%	9%	39%	15%	8%	10%	15%
Wheatland* (Merged with Hermitage 2024)	32%	22%	13%	20%	22%	17%	7%	11%
Wilmington township	6%	8%	4%	17%	34%	24%	5%	21%
Wolf Creek township	11%	11%	7%	19%	20%	3%	12%	23%
Worth township	10%	21%	14%	22%	23%	11%	8%	18%
Reference Table	B17017	S1810	S1810	S0101	S0101	B08201	B21001	B992707



Figure A: Pennsylvania Public Transportation Performance Report: Mercer County Profile (page 1/2)

**OPERATING
PROFILES****MERCER COUNTY REGIONAL COUNCIL OF
GOVERNMENTS (MCRCOG-SVSS/MCCT)****MERCER****CNG****FRITS**The Mercer County Regional
Council Of Governments

Operators Of

Shenango Valley
Shuttle ServiceMercer County
Community Transit**MCRCOG-SVSS/MCCT**2495 Highland Road
Hermitage, PA 16148
724-981-1562 ext. 3103
Jill Boozer, Executive Director
www.mcrcoog.com**RURAL SYSTEM****Service Area Statistics (2020 Census)**

Square Miles:	673
Population:	110,652

Act 44 Fixed Route Distribution Factors

Total Passengers:	69,239
Senior Passengers:	12,895
Revenue Vehicle Miles:	190,513
Revenue Vehicle Hours:	14,269

Act 44 Operating Assistance

Section 1513 Allocation:	\$1,166,969
Required Local Match:	\$86,936

Current Fleet Size

Diesel/Gasoline Motor Bus:	6
CNG Motor Bus:	1
Diesel/Gasoline Paratransit Vehicle:	26
System-Wide:	33

House District

Mercer:	17, 17
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Senate District

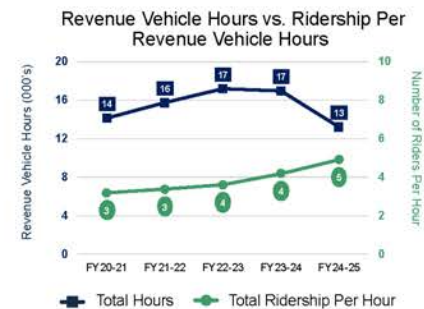
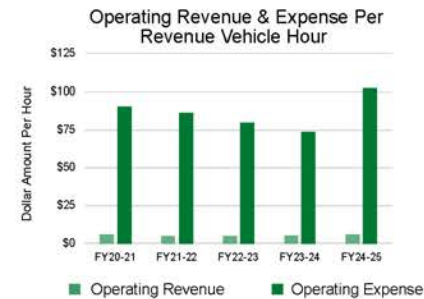
Mercer:	50
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Current Fare Information

Fixed Route Base:	\$1.25
Last Base Fare Increase:	July 2014

Current Employees

Agency Full-Time:	9
Agency Part-Time:	6
System-Wide:	15

**OPERATING EXPENSES (000'S)
\$1,352****OPERATING FUNDS (000'S)
\$1,352**

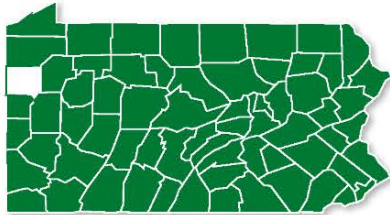
ADA complementary trips are included in FY20-21 through FY23-24. Beginning in FY24-25, totals do not include ADA trips.

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Figure B: Pennsylvania Public Transportation Performance Report: Mercer County Profile (page 2/2)

**OPERATING
PROFILES**

**MERCER COUNTY REGIONAL COUNCIL OF
GOVERNMENTS (MRCOG-SVSS/MCCT)**



MERCER

CNG

MRCOG-SVSS/MCCT
2495 Highland Road
Hermitage, PA 16148
724-981-1562 ext. 3103
Jill Boozer, Executive Director
www.mrcog.com

COMMUNITY TRANSPORTATION

Service Area Statistics (2020 Census)

Square Miles:	673
Population:	110,652
65+ Population:	25,007
% of Population 65 and older:	22.6%

Trip Information

65+ Trips:	34,300
PwD Trips:	3,070
ADA Trips:	4,034
MATP Trips:	17,428
Other Shared-Ride Trips:	5,533
Total Shared-Ride Trips:	64,365

House District

Mercer: 7, 17

Senate District

Mercer: 50

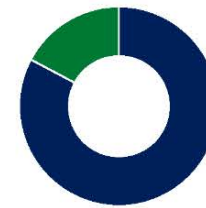
Current Fare Information

Average Shared-Ride Fare:	\$22.05
Average Shared-Ride Cost per Trip:	\$38.44
Fare Structure Implementation Date:	July 2016

Vehicles Operated in Maximum Service

Community Transportation:	18
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**OPERATING EXPENSES (000'S)*
\$2,474**



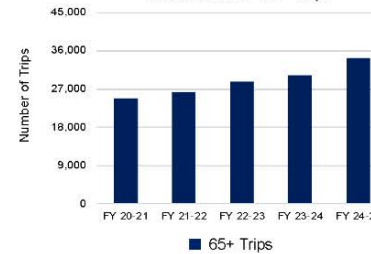
■ Shared-Ride Operating
■ Shared-Ride Admin

**OPERATING FUNDS (000'S)*
\$2,479**



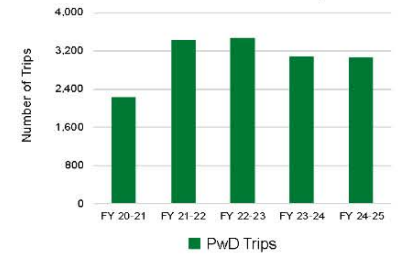
■ Passenger Fares ■ Lottery
■ PwD Program ■ MATP
■ Other ■ Subsidy

Shared-Ride 65+ Trips



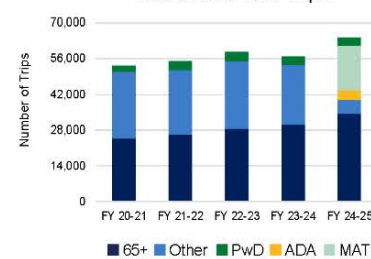
■ 65+ Trips

Shared-Ride PwD Trips



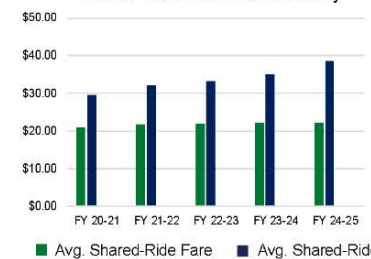
■ PwD Trips

Total Shared-Ride Trips*



■ 65+ ■ Other ■ PwD ■ ADA ■ MATP

Shared-Ride Farebox Recovery



■ Avg. Shared-Ride Fare ■ Avg. Shared-Ride Cost Per Trip

*ADA complementary trips are not included in FY20-21 through FY23-24. Beginning in FY24-25, totals include ADA trips.

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The Mercer County Regional
Council Of Governments



Operators Of



Shenango Valley
Shuttle Service



Mercer County
Community Transit