

AS OF MAY 2025

NEBRASKA
RURAL TRANSIT

GAP ANALYSIS

North Central Region



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EXECUTIVE SUMMARY



The Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha (UNO) conducted a comprehensive analysis of rural transit in Nebraska’s North Central region at the request of the Nebraska Department of Transportation (NDOT). This region encompasses 12 counties in north central Nebraska and is served by four transit providers. By analyzing data from the U.S. Census Bureau’s American Community Survey, NDOT records, and local transit providers, the study provides insights into ridership by agency, identifies common rider destinations, and examines service gaps and overlaps across the region. Based on these findings, we recommend strategies for coordination and expansion to improve access to rural transit.

A key finding is the essential role of rural transit in supporting the region’s increasingly transit-dependent population. Over 25% of residents are aged 65 or older, nearly 15% live with disabilities, and close to 12% live below the poverty line, indicating a growing need for accessible and reliable transit services. Currently, more than 90% of the region’s population lives in areas served by at least one provider.

However, there is a notable service gap in Blaine and Loup counties. No providers currently operate in these areas, leaving nearly 2,500 residents without rural public transportation.

To address these issues, the report offers several actionable recommendations. Extending service to Blaine and Loup counties would close the largest current gap. Strengthening connections to essential destinations — especially medical facilities, housing, and grocery stores — is critical for transit-dependent populations. Additionally, better coordination among providers traveling to Grand Island, Kearney, and Norfolk could reduce redundancy and improve efficiency. We also recommend exploring intercity routes, particularly to Grand Island and Kearney and along U.S. Highways 20/275 between Valentine and Norfolk.

This study highlights the need for continued investment in rural transit. Enhancing intercity services, fostering regional coordination, and planning strategically will help ensure that all residents, especially those who depend on transit, can access the services and opportunities they need.

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INTRODUCTION



This analysis examines the gaps and overlaps in Nebraska’s rural transit services to help ensure reliable access to transit across rural areas of the state. By identifying areas where service can be optimized, the study aims to improve the efficiency, reach, and effectiveness of rural transit. This work is supported by the Nebraska Department of Transportation (NDOT), which administers funding from the Federal Transit Administration’s Formula Grants for Rural Area Programs (49 U.S.C. 5311) to public transit providers in areas with populations under 50,000. NDOT has contracted with the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha (UNO) to conduct this gap analysis as part of its commitment to strengthen Nebraska’s rural transit system.

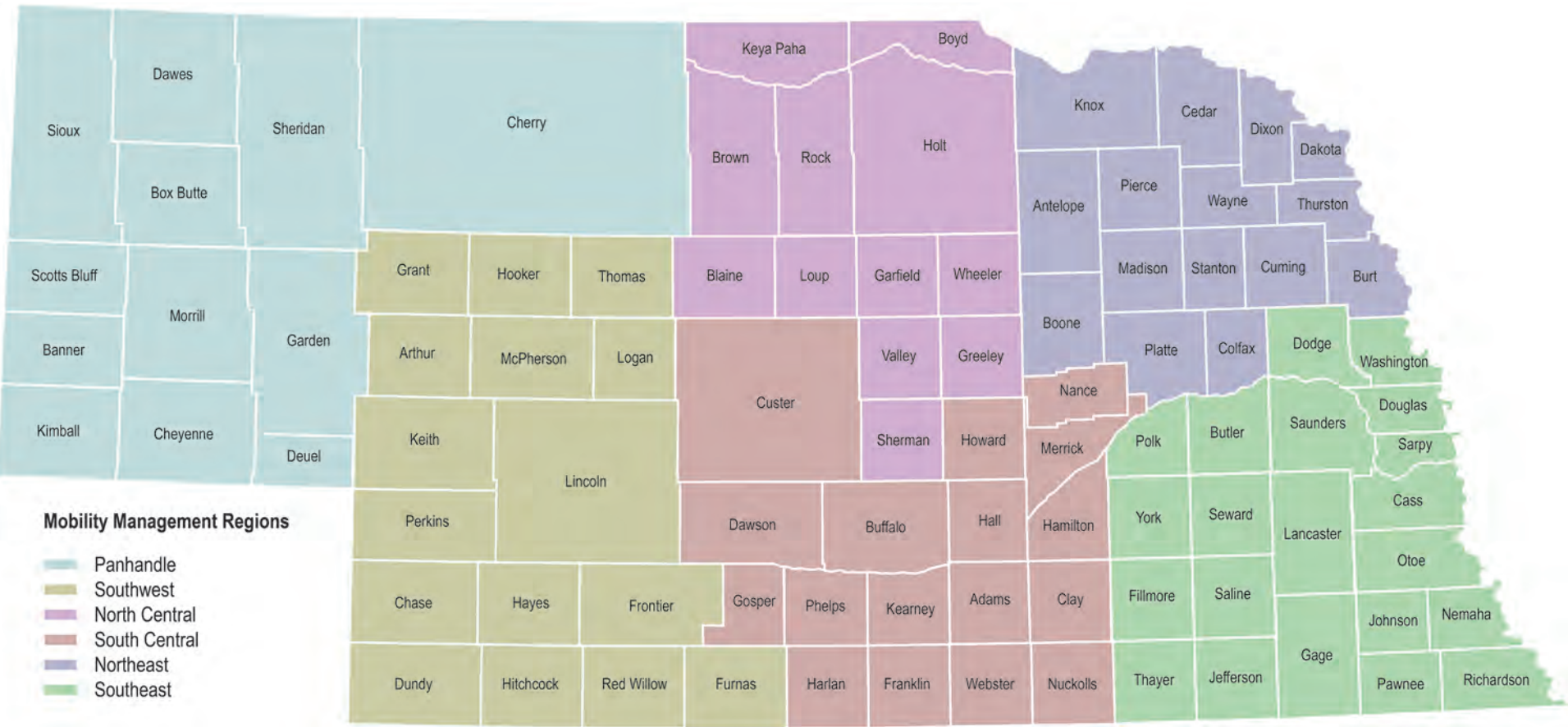
- This gap analysis has several key components:
- An overview of Section 5311 rural transit providers in the region, including their reported coverage area.
 - A summary of the most common drop-off destinations served by these providers.
 - An assessment of gaps and overlaps across providers in each region.
 - Evidence-based recommendations to support and expand efficient, effective rural transit across Nebraska.

The analysis is conducted using data from the U.S. Census Bureau and data about coverage areas, drop-off and pickup locations provided by service providers across Nebraska receiving Section 5311 funds as described in the About the Analysis section.

NEBRASKA MOBILITY MANAGEMENT REGIONS

As part of the management of Federal Transit Administration funding, NDOT divides Nebraska into six Mobility Management regions. A distinct analysis for each region is provided.

Figure 1. Nebraska Mobility Management regions, 2023



Source: (1) Nebraska Public Transit website, retrieved 2024

NORTH CENTRAL REGION

- Avera St. Anthony’s Hospital
- Community Memorial Health Center
- Loup City Public Transportation
- Valley County Transit System

NORTHEAST REGION

- Avera Creighton Hospital
- Cedar County Transit
- City of Neligh Dial-A-Ride Public Transit
- City of Plainview Handivan
- Columbus Area Transit System
- Good Samaritan Society-Albion Public Transit
- JoyRide Public Transit
- North Fork Area Transit
- Oakland Public Transit
- Ponca Express
- Schuyler Public Transit
- Wayne Public Transit

PANHANDLE REGION

- Alliance Public Transit
- Chadron City Transit
- City of Sidney Transportation System
- Crawford Public Transportation
- Garden County Public Transportation
- KCTS
- Open Plains Transit
- Tri-City Roadrunner

SOUTH CENTRAL REGION

- Callaway District Hospital Public Transit Service
- Hall County Rural Transportation
- Harlan County Public Transportation
- Midland Public Transit
- Nance Trans, Inc.
- Phelps County Public Transit
- RYDE Transit

SOUTHEAST REGION

- Blue Rivers Transportation System
- Butler County Rural Transit Service
- City of Tecumseh/Johnson County Public Transit
- Fillmore County Rural Transit Service
- Fremont Transit Program
- Lancaster County Public Rural Transit
- Saline County Area Transit
- Saunders County Public Transportation
- Seward County Public Transit
- Southeast Nebraska Community Action
 - Cass County Transit
 - Pawnee County Transit
 - Richardson County Transit
- York County Public Transportation

SOUTHWEST REGION

- Chase County Transportation System
- City of Benkelman Handi Bus
- City of McCook Transit
- City of Ogallala Public Transit
- Grant Arthur Handi Bus
- Hitch & Hay Public Transit
- Hooker County Handi Bus
- North Platte Public Transit System
- Perkins County Public Transit
- Tri Valley Public Transportation

ABOUT THE ANALYSIS



Our analysis uses a range of data and methods to examine rural transit services in each mobility region. We built this approach by drawing on existing rural transit analyses from other states (e.g., DRPT, 2023 [Source 2]; MCDOT, 2020 [Source 3]; MOOver, 2022 [Source 4]; SWRPC, 2022 [Source 5]; Wave Transit, 2023 [Source 6]) and leveraging our own expertise.

Data for this analysis comes from three primary sources.

- The first is the 2022 American Community Survey 5-year estimates from the U.S. Census Bureau. These estimates provide detailed information about population characteristics and help us estimate transit demand for each region.
- The second source is data from rural transit agencies, provided through the Nebraska Transit Invoice Portal. This data enabled us to analyze transit offerings, ridership, and geographic service coverage.
- Third, we requested samples of completed rides from transit providers. Not all agencies provided samples over the same time periods or same length of time. However, they are all illustrative of agency service. These samples included pick-up and drop-off locations in 2024. Using the U.S. Census Geocoder (Source 7), we geocoded these locations to generate latitude and longitude coordinates, which were key in creating visual representations like heatmaps and coverage maps.

The metrics we examine for each agency include: provider coverage area (e.g., city-specific, county-wide, regional), boardings per vehicle per fiscal year, miles per vehicle per fiscal year, miles per boarding per fiscal year, drop-offs at or near reported locations in the sample, observed coverage area in square miles, vehicles per square mile of the observed coverage area, and boardings per square mile of the observed coverage area.

The analysis begins with an exploration of the population characteristics and transit demand in each region. This step uses demographic and socioeconomic data to understand the needs of rural transit users. Next, we profile each transit agency’s services, detailing ridership statistics, geographic coverage, and operational metrics. These profiles offer insights into the capacity of existing transit systems.

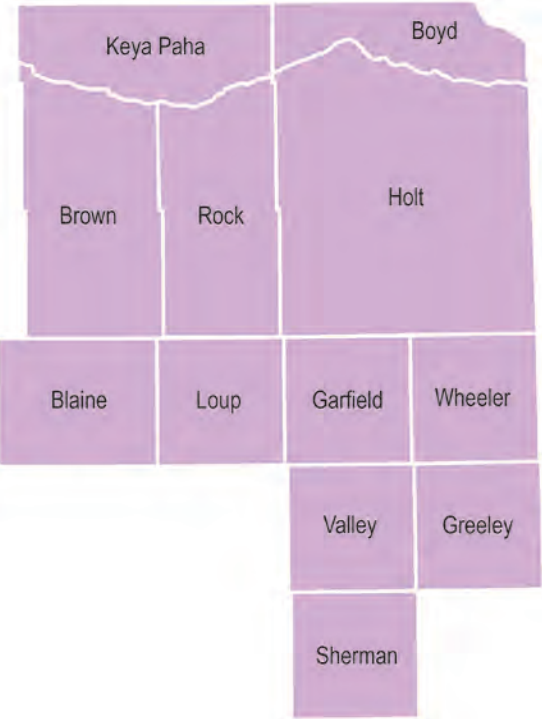
To illustrate the state of rural transit services, we present maps derived from the geocoded ride sample data. Heatmaps highlight the density of drop-off destinations, while polygon maps delineate the observed coverage areas. These visual tools help convey the extent and uses of transit services. In addition to visual analysis, we conduct a detailed review of trip destinations and service patterns to identify gaps in coverage and overlaps between agencies. This helps assess how well current transit services meet regional needs and highlights opportunities for improvements.

Finally, we synthesize these findings into a regional summary that evaluated transit availability, accessibility, and coverage gaps. The report concludes with a set of actionable recommendations aimed at enhancing rural transit services in the region.

NORTH CENTRAL REGION OVERVIEW

This document focuses on rural transit agencies in the North Central Mobility Management region, comprising 12 counties in northern Nebraska, including counties bordering South Dakota.

Figure 2. North Central Mobility Management region

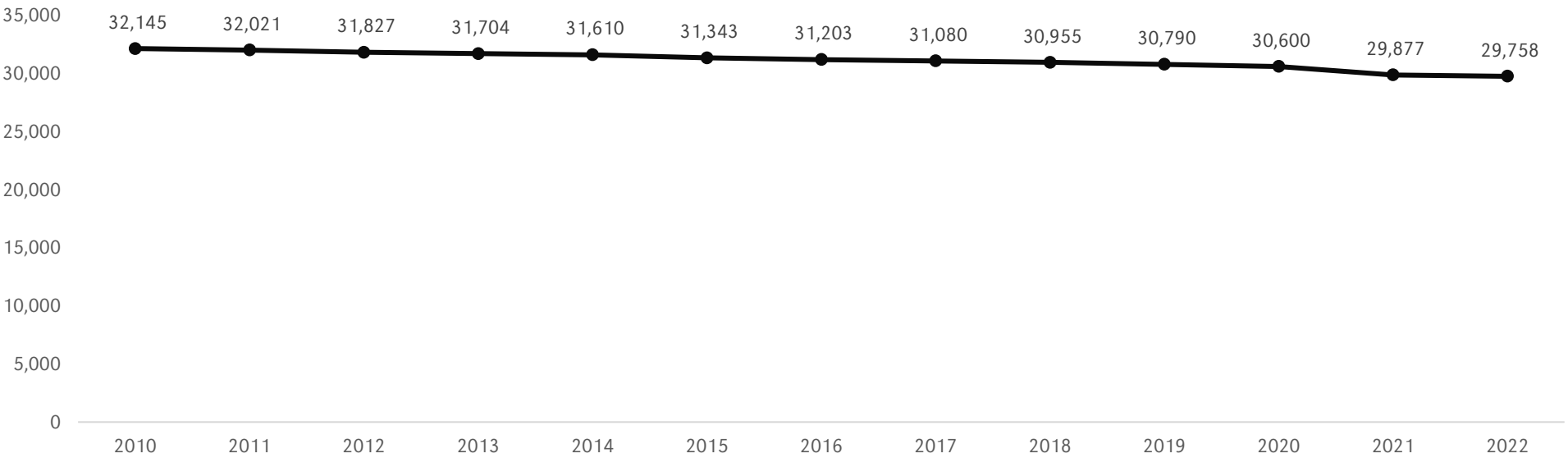


Source: (1) Nebraska Public Transit website, retrieved 2024

POPULATION TRENDS

The population of the North Central region has steadily declined since 2010, with the sharpest drop occurring between 2020 and 2021. In 2010, the region’s population was 32,145. By 2022, it had decreased to 29,758.

Figure 3. Total population in the North Central region, 2010-2022



Source: (8) U.S. Census Bureau American Community Survey, 5-year Estimates 2010-2022

TRANSIT DEPENDENT POPULATION

In addition to evaluating the overall population, we analyzed the transit-dependent population in the region. The transit-dependent population includes those who cannot drive due to age, lack financial resources to own a vehicle, or have physical disabilities (Jiao & Dillivan, 2013; Jiao & Wang, 2021). Reports from other state DOTs, such as those in Arkansas, Iowa, Vermont, and New Hampshire, as well as local reports from agencies like DuPage County in Chicago, Illinois, and the Northwest Arkansas Regional Planning Commission, consider the following groups as transit-dependent:

- a. Individuals aged 65 or older.
- b. Individuals below the poverty level.
- c. Individuals with hearing, vision, ambulatory, or other physical difficulties.
- d. Households without access to a private vehicle.

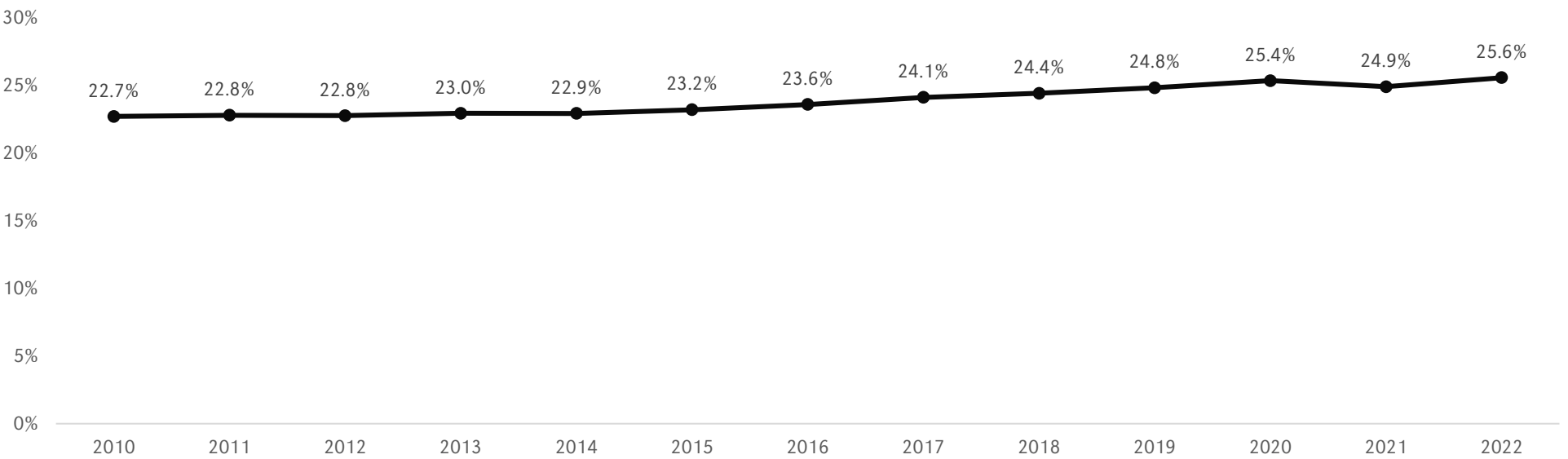
Table 1. Transit-dependent population in the North Central Region, 2022

Region	Total Population	Percent of Population 65 Years or Older	Percent of Population Below Poverty	Percent of Population with a Disability	Occupied Housing Units	Percent of Occupied Housing Units with No Private Vehicle
Nebraska	1,958,939	16.2%	10.4%	12.0%	776,379	5.1%
North Central	29,758	25.6%	11.7%	14.5%	12,474	3.2%
Blaine	384	37.5%	11.5%	23.4%	201	1.5%
Boyd	1,767	33.3%	11.6%	18.7%	807	1.4%
Brown	2,691	28.9%	8.9%	14.0%	1,217	2.9%
Garfield	1,833	27.2%	12.2%	13.7%	775	5.9%
Greeley	2,212	25.7%	12.5%	16.0%	907	1.8%
Holt	10,149	22.1%	9.9%	12.5%	3,996	3.0%
Keya Paha	987	20.5%	8.6%	11.3%	323	0.6%
Loup	629	25.6%	7.9%	16.1%	272	1.8%
Rock	1,312	25.4%	9.1%	11.8%	577	3.6%
Sherman	2,970	27.6%	10.9%	15.9%	1,303	5.0%
Valley	4,053	25.2%	8.8%	16.7%	1,750	4.2%
Wheeler	771	33.1%	10.2%	17.4%	346	1.7%

Source: (8) U.S. Census Bureau American Community Survey, 5-year Estimates 2022

As shown in Table 1, the North Central region has a higher percentage of transit-dependent individuals compared to Nebraska overall. The share of residents aged 65 or older — 25.6% in 2022 — is nearly double the statewide average and has increased steadily since 2010 (up from 22.7%).

Figure 4. Percent of population age 65 or older in the North Central region, 2010-2022



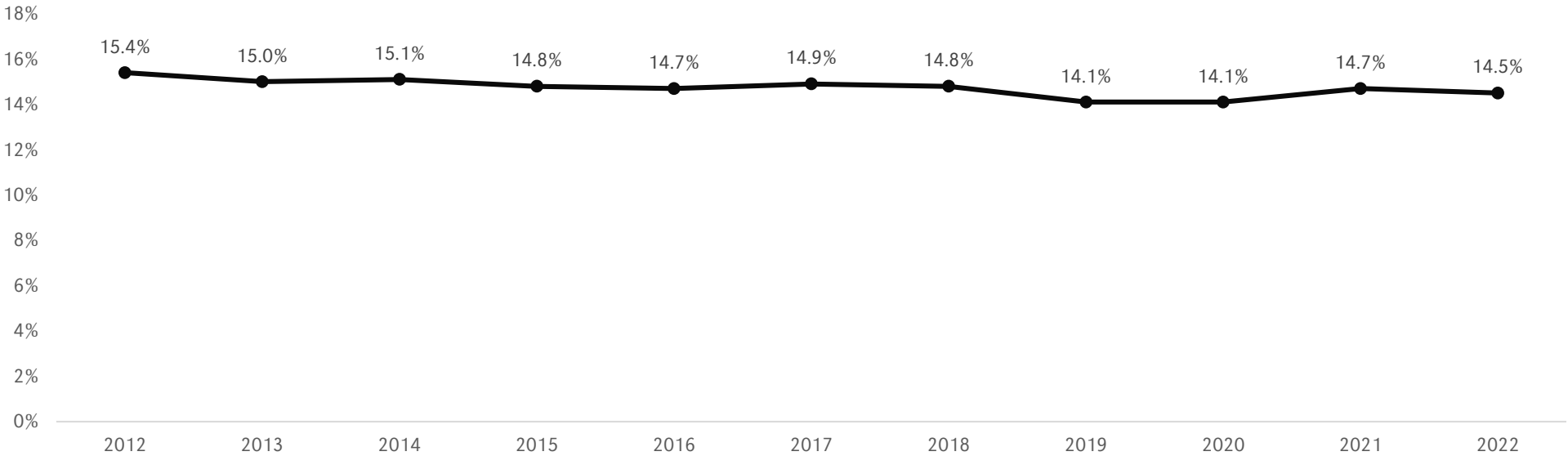
Source: (8) U.S. Census Bureau American Community Survey, 5-year Estimates 2010-2022

The poverty rate in the North Central region (11.7%) slightly exceeds the Nebraska average (10.4%), with Greeley County showing the highest poverty level at 12.5%.

Between 2012 and 2022, the proportion of residents with difficulties ranged between 14% and 16%, consistently higher than the statewide average. In 2022, this group represented 14.5% of the region’s population compared to 12.0% statewide. Blaine County had the highest percentage of individuals with disabilities at 23.4%.

Meanwhile, 3.2% of occupied housing units in the region lacked access to a private vehicle in 2022, which is lower than the statewide average of 5.1%. Within the region, Keya Paha County had the lowest rate (0.6%), while Garfield County had the highest (5.9%).

Figure 5. Percent of population with difficulties in the North Central region, 2012-2022



Source: (8) U.S. Census Bureau American Community Survey, 5-year Estimates 2012-2022

NORTH CENTRAL TRANSIT PROVIDERS

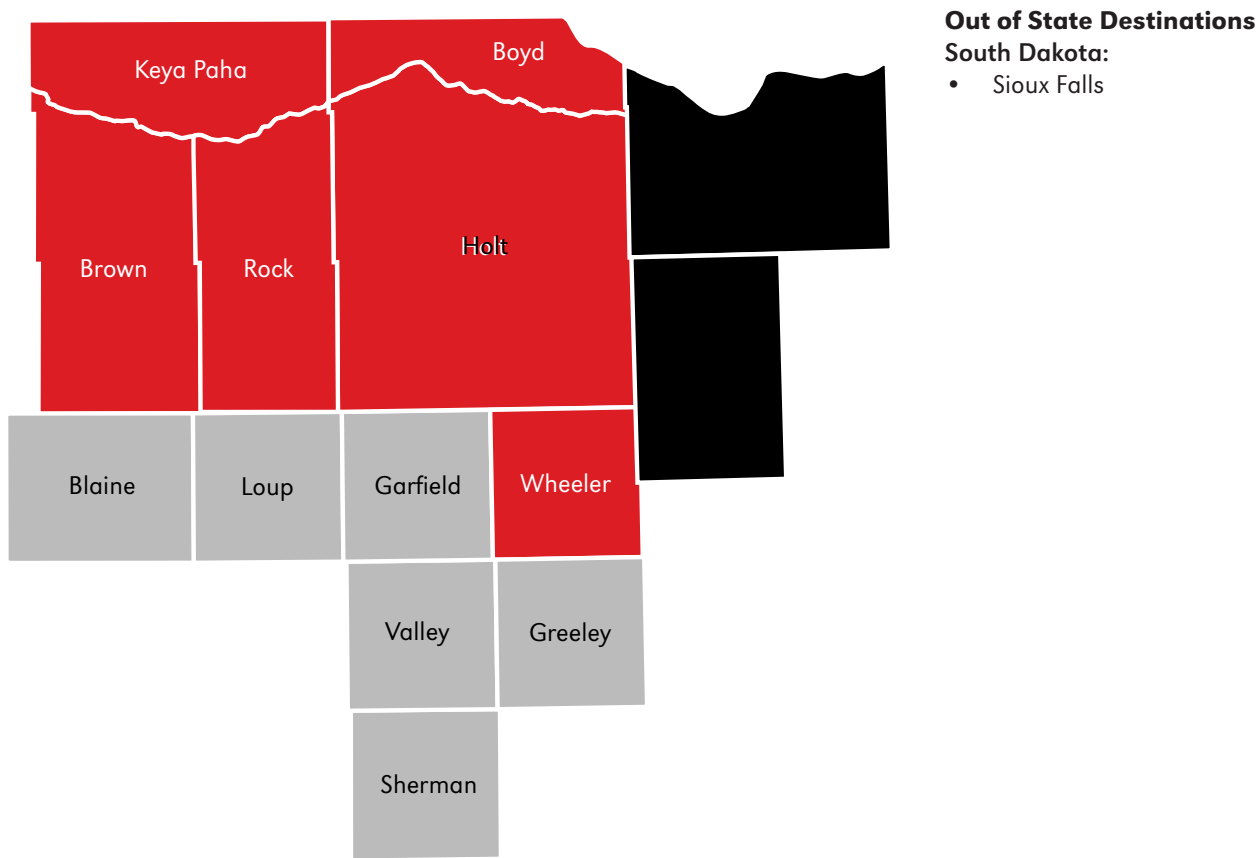
To respond to the growing transit needs of the region, the North Central region is currently served by four rural transit providers. This section provides an overview of the service provided by each of those providers.



AVERA ST. ANTHONY’S HOSPITAL

Avera St. Anthony’s Hospital, based in O’Neill, offers regional demand response transit services to residents within Antelope, Boyd, Brown, Holt, Keya Paha, Knox, Rock, and Wheeler counties. Antelope and Knox counties are in the Northeast Mobility Management region.

Figure 6. Map of North Central region with Avera St. Anthony’s Hospital service area counties shaded in red and Northeast region service area counties shaded in black



Source: (1) Nebraska Public Transit website, retrieved 2024



Source: (13) Avera St. Anthony’s Hospital website, retrieved 2025

According to the Nebraska Transit Invoice Portal, Avera St. Anthony’s Hospital operated five vehicles and provided 11,464 rides in FY 2024. Since FY 2022, the provider has expanded services, increasing both boardings and mileage. Two vehicles were added in FY 2023, which helped reduce the load on each individual vehicle.

Table 2. Ridership statistics for Avera St. Anthony’s Hospital, FY 2022 to FY 2024

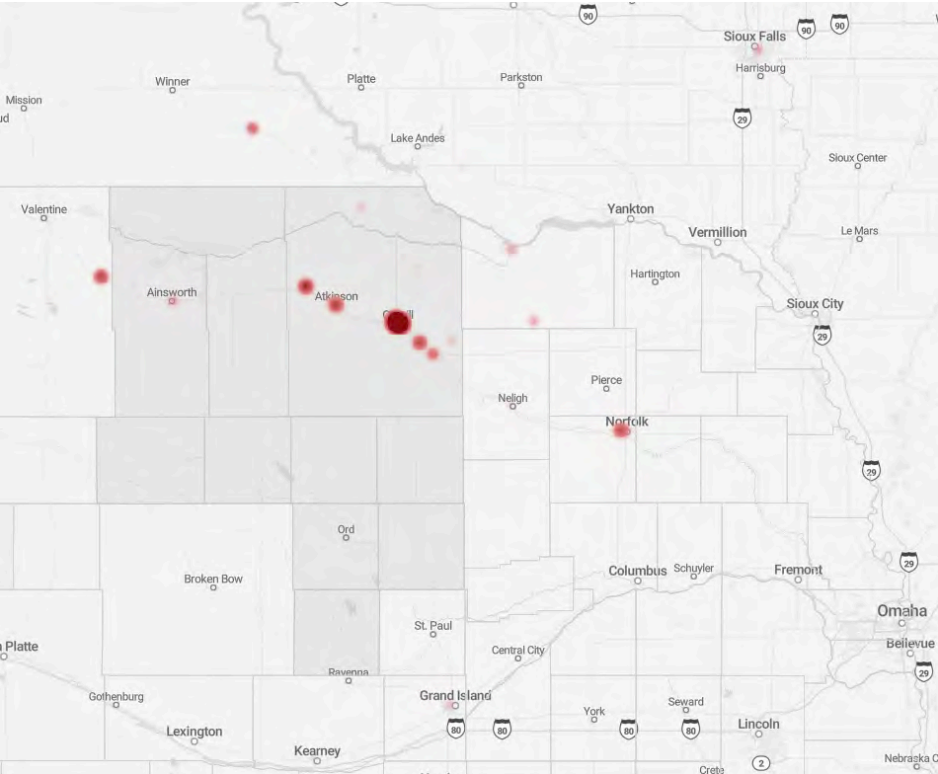
	FY 2022	FY 2023	FY 2024	Percent Change FY 2022 to FY 2024
Vehicles	3	5	5	66.7%
Boardings	8,709	10,057	11,464	31.6%
Mileage	53,434	50,756	61,075	14.3%
Boardings Per Vehicle	2,903.0	2,011.4	2,292.8	-21.0%
Miles Per Vehicle	17,811.3	10,151.2	12,215.0	-31.4%
Miles Per Boarding	6.1	5.0	5.3	-13.2%

Source: (9) Nebraska Transit Invoice Portal

The hospital submitted a sample of 2,656 rides from May 2024 to July 2024. These were used to assess common drop-off locations and overall service coverage. As shown in Figure 7, most trips were clustered around O’Neill but also extended to other parts of Nebraska and into South Dakota. Notable destinations included medical centers in Norfolk and Grand Island and a hospital in Sioux Falls, South Dakota.

The most frequent drop-off was Avera St. Anthony’s Hospital itself, accounting for 14.6% of reported trips. The other top destinations were assisted living facilities, senior housing, and low-income housing units in O’Neill.

Figure 7. Drop-off locations for Avera St. Anthony’s Hospital, May 2024 to July 2024

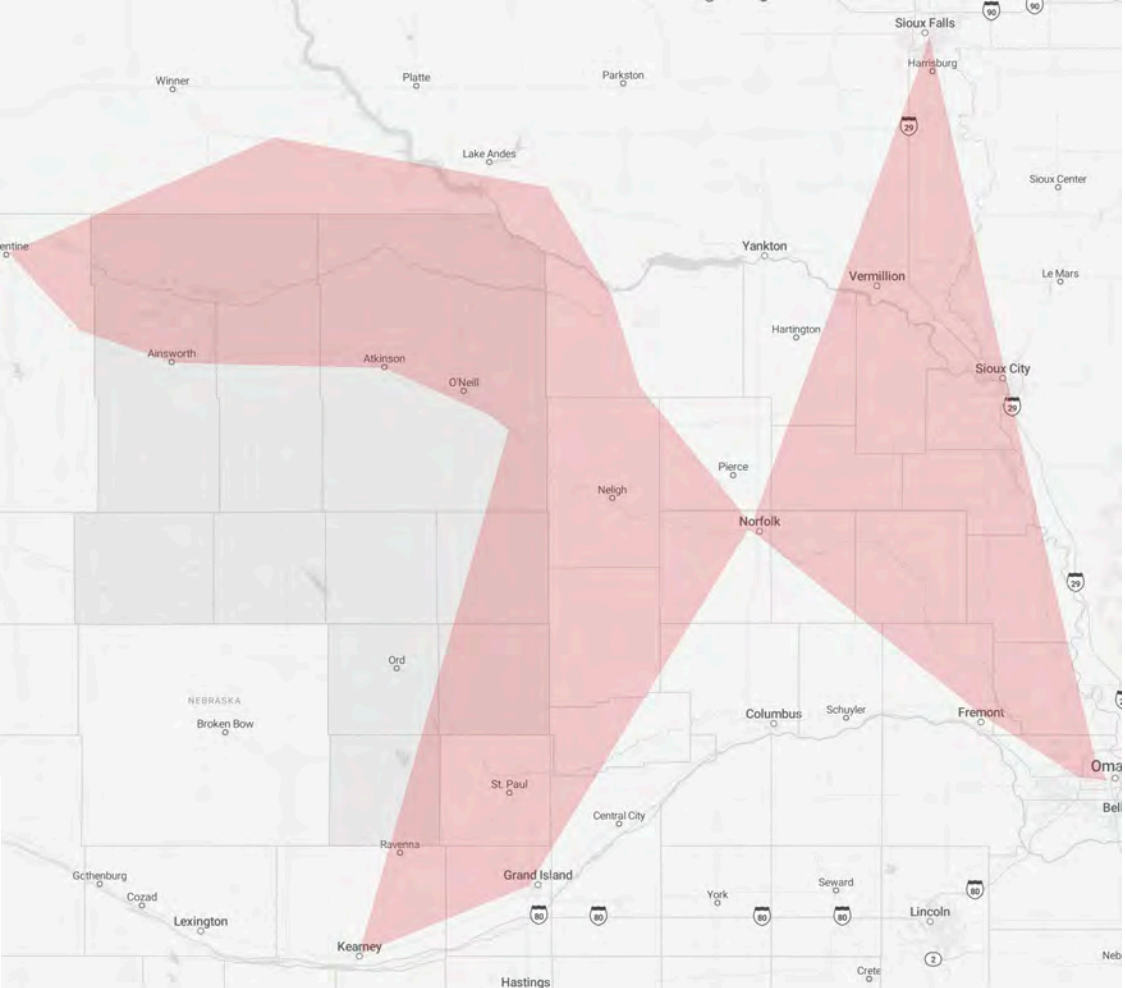


Source: (10) Avera St. Anthony’s Hospital reported ride data, May 2024 to July 2024

Top Five Drop-off Locations	City/Town	Number of Drop-offs
Avera St. Anthony’s Hospital	O’Neill	390
Evergreen Assisted Living	O’Neill	231
Shannon Apartments	O’Neill	97
Arbor Care Centers	O’Neill	74
North Park Homes	O’Neill	72

The observed coverage area spans approximately 14,819.8 square miles, including northern portions of the North Central region and much of the Northeast. Pickup locations were concentrated along U.S. Highway 20, with additional trips reaching Valentine, Kearney, Grand Island, Norfolk, Omaha, and Sioux Falls. There is significant overlap in service areas with Northeast region providers, especially Avera Creighton Hospital.

Figure 8. Observed pick-up area for Avera St. Anthony’s Hospital, May 2024 to July 2024



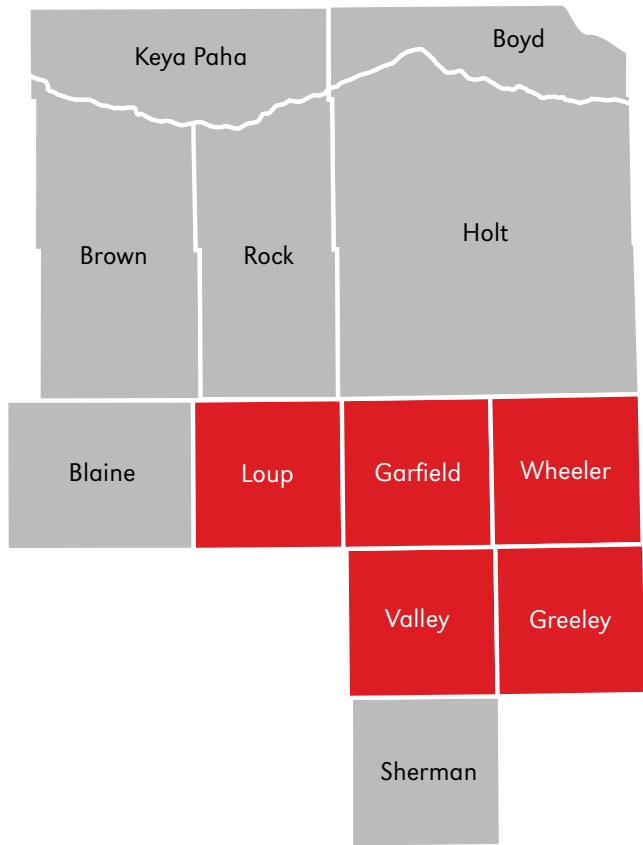
Source: (10) Avera St. Anthony’s Hospital reported ride data, May 2024 to July 2024

Service by Avera St. Anthony’s Hospital has expanded since FY 2022. Reported trip patterns and coverage align with advertised operations. **While no major service gaps were identified, coordination with Northeast region providers — particularly Avera Creighton Hospital — could improve efficiency and coverage.**

COMMUNITY MEMORIAL HEALTH CENTER

Community Memorial Health Center in Burwell provides regional, demand response service to residents of Garfield, Greeley, Loup, Valley, and Wheeler counties. They make trips to nearby cities upon request.

Figure 9. Map of North Central region with Community Memorial Health Center service area counties shaded in red



Source: (1) Nebraska Public Transit website, retrieved 2024



Source: (9) Nebraska Transit Invoice Portal

According to the Nebraska Transit Invoice Portal, the agency operated four vehicles in FY 2024 and provided 399 rides. While boardings increased from FY 2022 to FY 2023, they declined in FY 2024, resulting in an overall decrease of 18.9% over the three-year period. Total miles traveled also dropped by 11.0%. The agency added a fourth vehicle in FY 2024. The number of rides per vehicle correspondingly declined, indicating decreased utilization per vehicle.


The average miles per boarding is significantly higher than that of other providers in the region, suggesting that Community Memorial Health Center focuses more on long-distance, intercity trips than short local travel.

Table 3. Ridership statistics for Community Memorial Health Center, FY 2022 to FY 2024

	FY 2022	FY 2023	FY 2024	Percent Change FY 2022 to FY 2024
Vehicles	3	3	4	33.3%
Boardings	492	516	399	-18.9%
Mileage	28,775	23,778	25,617	-11.0%
Boardings Per Vehicle	164.0	172.0	99.8	-39.2%
Miles Per Vehicle	9,591.7	7,926.0	6,404.3	-33.2%
Miles Per Boarding	58.5	46.1	64.2	9.8%

Source: (9) Nebraska Transit Invoice Portal

Community Memorial Health Center does not currently use software or other measures to track rides and did not provide a ride sample for use in our analysis.

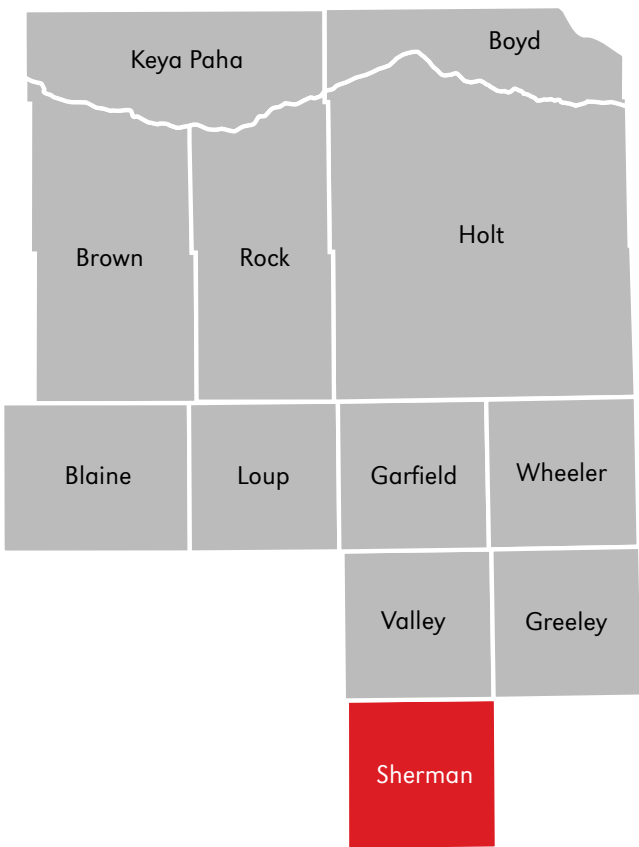


Community Memorial Health Center has shown a decrease in annual boardings and mileage since FY 2022 despite adding an additional vehicle to their fleet in FY 2024. They tend to take much longer trips than other providers in the region, suggesting that **they may be providing fewer, longer-distance rides**, possibly prioritizing intercity trips over local demand-response services.

LOUP CITY PUBLIC TRANSPORTATION

Loup City Public Transportation provides a county-wide demand response service to residents of Loup City and Sherman County.

Figure 10. Map of North Central region with the Loup City Public Transportation service area county shaded in red



Source: (1) Nebraska Public Transit website, retrieved 2024



Source: (9) Nebraska Transit Invoice Portal

According to data from the Nebraska Transit Invoice Portal, Loup City Public Transportation operated two vehicles in FY 2024 and completed 719 rides. While boardings dropped significantly in FY 2023, both ridership and vehicle fleet size increased overall from FY 2022 to FY 2024. Total mileage rose by 88.2% suggesting expanded coverage or longer trips. Average trip length also increased by over 50% during this period.

Table 4. Ridership statistics for Loup City Public Transportation, FY 2022 to FY 2024

	FY 2022	FY 2023	FY 2024	Percent Change FY 2022 to FY 2024
Vehicles	1	1	2	100%
Boardings	578	271	719	24.4%
Mileage	7,284	7,366	13,705	88.2%
Boardings Per Vehicle	578.0	271.0	359.5	-37.8%
Miles Per Vehicle	7,284.0	7,366.0	6,852.5	-5.9%
Miles Per Boarding	12.6	27.2	19.1	51.3%

Source: (9) Nebraska Transit Invoice Portal

Loup City Public Transportation does not currently use any ride tracking software but provided a sample of their ride scheduling calendar from August 2024 to October 2024. We were able to identify 100 unique trips from the calendar, although most trips only include the city as the destination rather than a complete address.

Figure 11 shows a heatmap of all drop-offs by Loup City Public Transportation and lists the top five most frequent destination cities.

Most trips (59%) occurred within Loup City, while the remainder were to larger regional cities including Kearney, Grand Island, Ord, and Holdrege. Due to limited address-level detail, we could not identify precise drop-off locations for most rides.

Figure 11. Drop-off locations for Loup City Public Transportation, August 2024 to October 2024



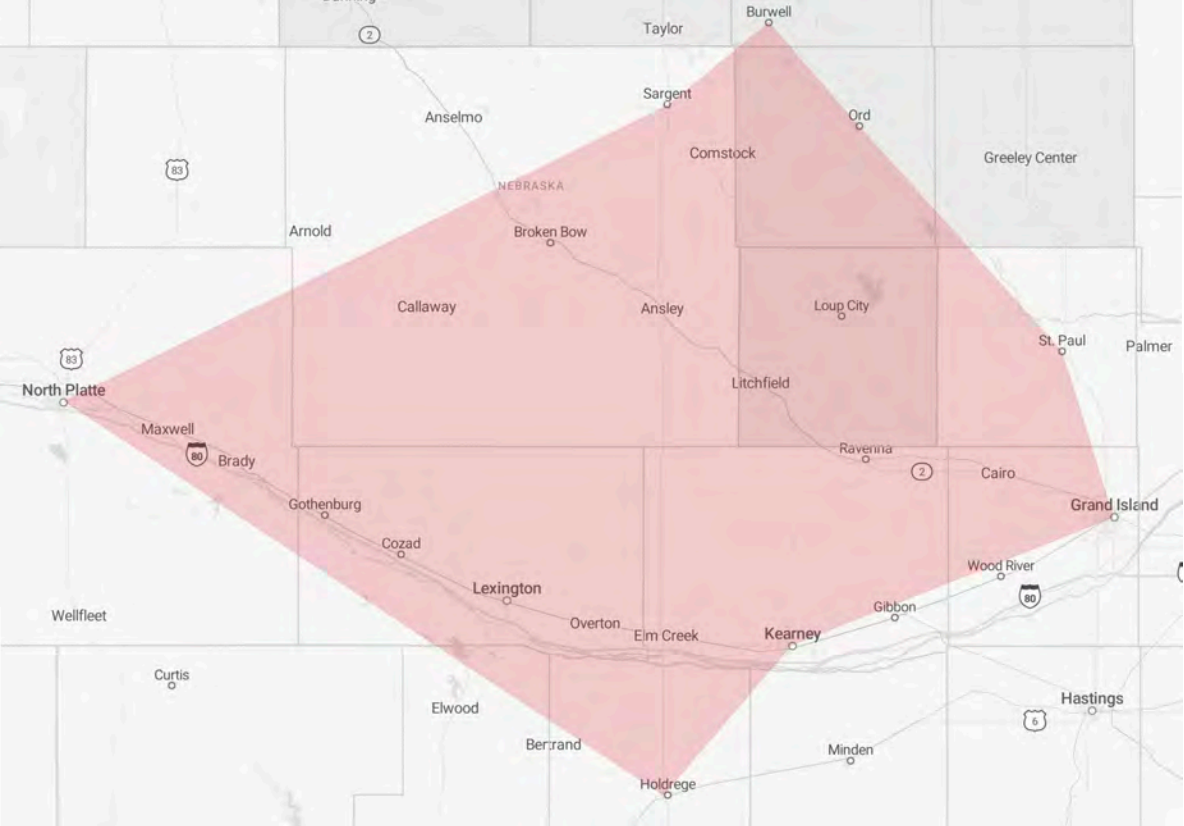
Top Five Drop-off Locations	City/Town	Number of Drop-offs
	Loup City	59
	Kearney	14
	Grand Island	13
	Ord	8
	Holdrege	2

*Loup City did not include specific destinations for most rides, only the city.

Source: (11) Loup City Public Transportation reported ride data, August 2024 to October 2024

The observed coverage area spans approximately 5,807.0 square miles and includes all of Sherman County, much of Valley County, and portions of the South Central region along Interstate 80.

Figure 12. Observed pick-up area for Loup City Public Transportation, August 2024 to October 2024



Source: (11) Loup City Public Transportation reported ride data, August 2024 to October 2024



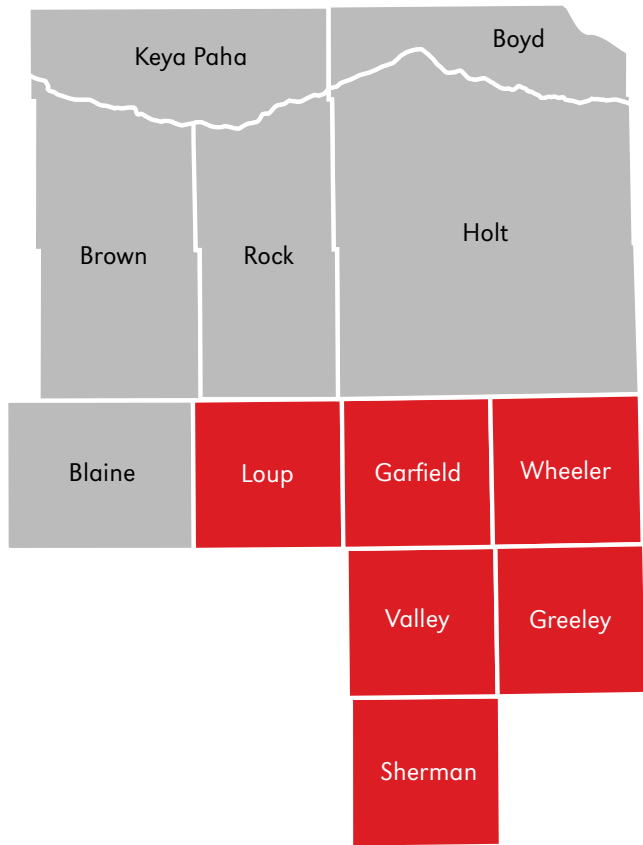
Loup City Public Transportation has expanded service since FY 2022, particularly in terms of annual mileage. The reported and observed coverage align with its advertised service. While no major gaps were identified, **improved coordination with South Central region providers could enhance access to cities like Grand Island and Kearney.**



VALLEY COUNTY TRANSIT SYSTEM

Valley County Transit System provides demand response transit services to residents of Garfield, Greeley, Loup, Sherman, Valley, and Wheeler counties.

Figure 13. Map of North Central region with Valley County Transit System service area counties shaded in red



Source: (1) Nebraska Public Transit website, retrieved 2024



Source: (14) Valley County Transit System website, retrieved 2024

According to the Nebraska Transit Invoice Portal, the agency operated three vehicles in FY 2024 and provided 2,451 rides. Both annual boardings and mileage increased significantly from FY 2022 to FY 2024. The agency added a third vehicle in FY 2024 to meet growing demand. Average trip length also rose slightly, suggesting that the service area may be expanding or trips are becoming longer.

Table 5. Ridership statistics for the Valley County Transit System, FY 2022 to FY 2024

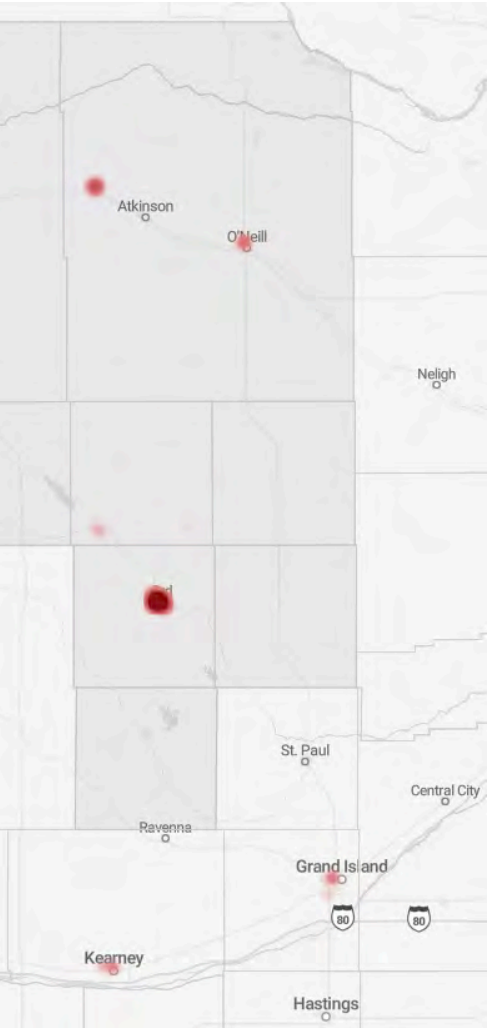
	FY 2022	FY 2023	FY 2024	Percent Change FY 2022 to FY 2024
Vehicles	2	2	3	50.0%
Boardings	1,355	1,881	2,451	80.9%
Mileage	10,171	13,272	20,327	99.9%
Boardings Per Vehicle	677.5	940.5	817.0	20.6%
Miles Per Vehicle	5,085.5	6,636.0	6,775.7	33.2%
Miles Per Boarding	7.5	7.1	8.3	10.5%

Source: (9) Nebraska Transit Invoice Portal

Valley County Transit System provided a sample of trips taken from December 2024 through February 2025. Figure 14 shows a heatmap of drop-offs, along with the five most common destinations.

More than 91% of trips ended within the City of Ord. Top destinations included Valley County Health System Hospital, senior housing facilities, a major local employer (Loup Valley Redi Mix), and Ord High School. These destinations reflect a strong local focus on essential services including health care, employment, and education.

Figure 14. Drop-off locations for the Valley County Transit System, December 2024 to February 2025

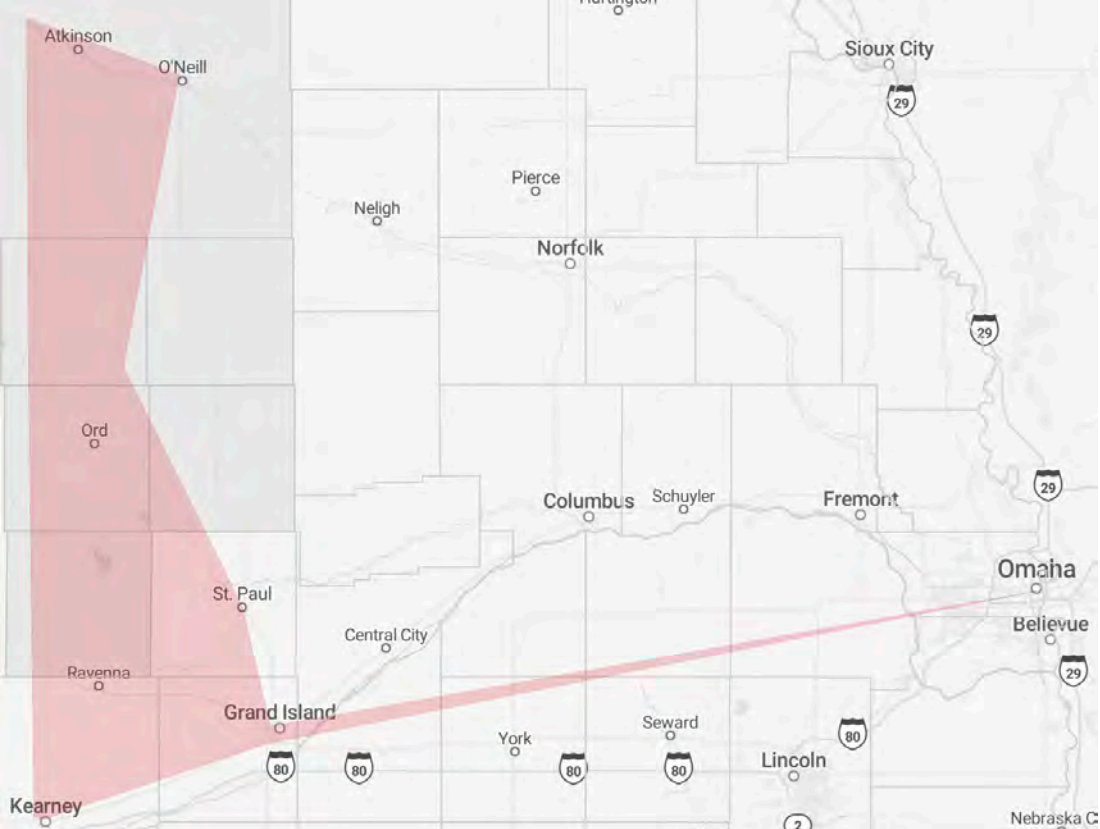


Source: (12) Valley County Transit System reported ride data, December 2024 to February 2025

Top Five Drop-off Locations	City/Town	Number of Drop-offs
Valley County Health System Hospital	Ord	114
Valley View Senior Village	Ord	58
Loup Valley Redi Mix	Ord	37
Ord High School	Ord	29
Parkview Village Apartments	Ord	23

The observed coverage area spans approximately 3,332.8 square miles and includes Valley, Sherman, and Garfield counties, with limited service into Holt County. Additional trips to Grand Island, Kearney, and Omaha suggest occasional long-distance service beyond the region.

Figure 15. Observed pick-up area for the Valley County Transit System, December 2024 to February 2025



Source: (12) Valley County Transit System reported ride data, December 2024 to February 2025



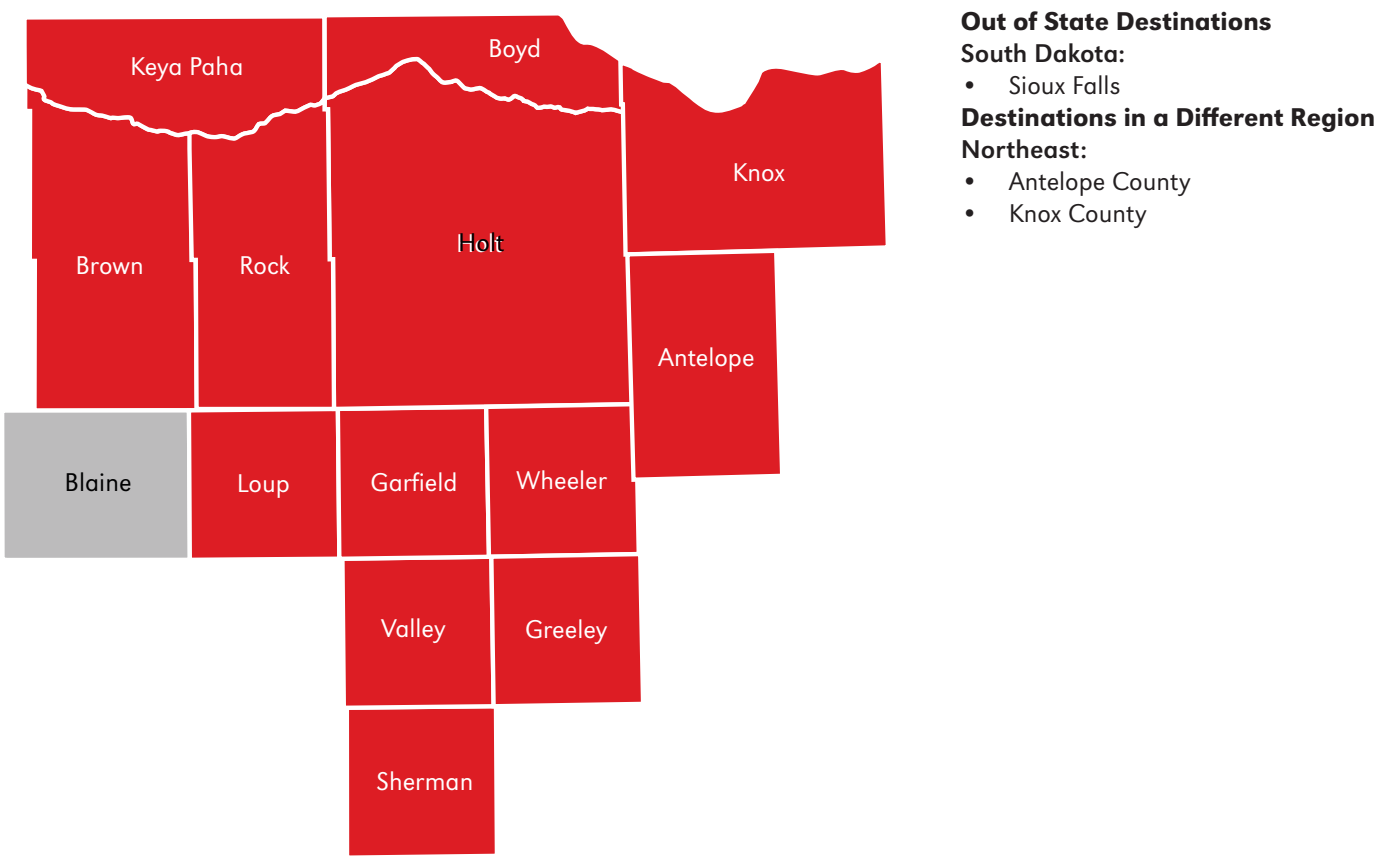
Valley County Transit System has significantly expanded its transit services since FY 2022, nearly doubling total mileage. **The data suggests that it is meeting local demand effectively, although limited service on weekends may constrain access for some riders.** Coordinating with intercity providers could further improve connectivity, particularly to Grand Island and Kearney.

REGIONAL OVERVIEW

This section summarizes the overall services these providers offer, including miles traveled, passenger boardings, and vehicle usage. Additionally, it analyzes service changes across all four providers and offers insights into regional trends.

The four transit providers in the region serve 11 of the 12 counties, as well as two counties in the Northeast Mobility Management region (Antelope and Knox), as shown in Figure 16. They also serve cities outside the region and Sioux Falls, South Dakota.

Figure 16. Service area of North Central region transit providers



Source: (1) Nebraska Public Transit website, retrieved 2024

Each fiscal year, Nebraska’s rural transit providers report the total number of passenger miles traveled. This metric is critical for evaluating rural transit services, as the area served by each provider may be very large. Table 6 summarizes the mileage and estimated coverage area for each provider in FY 2024, based on sample ride data.

Table 6. Summary of total miles traveled and observed coverage area

Provider	Service Category	Total Miles (FY 2024)	Percent Total Miles	Observed Coverage Area (Square Mile)
Avera St. Anthony’s Hospital	Regional	61,075	50.6%	14,819.8
Community Memorial Health Center*	Regional	25,617	21.2%	2,859.2
Loup City Public Transportation	County-wide	13,705	11.4%	5,807.0
Valley County Transit System	Regional	20,327	16.8%	3,332.8
Totals		120,724	100%	

*Note: Community Memorial Health Center did not provide any sample ride data for this analysis. Coverage area is computed based on reported coverage area.
Source: (9) Nebraska Transit Invoice Portal, (10-12) provider reported ride data

In FY 2024, Avera St. Anthony’s Hospital recorded the highest mileage of 61,075 miles, accounting for 50.6% of all reported miles in the region. Community Memorial Health Center reported 25,617 miles (21.2% of total), despite the fewest boardings and smallest reported coverage area, indicating frequent long-distance trips.

Loup City Public Transportation was the only provider classified as county-wide based on their reported service area. Their observed service extended into Hall, Buffalo, and Lincoln counties, suggesting a more regional role. The three other providers, classified as regional, all reported higher total annual mileage in FY 2024.

- In summary, the data reveals two key findings regarding the annual mileage and coverage area:
- There is no clear relationship between total mileage and the size of a provider’s observed coverage area.
 - Regional providers consistently logged more miles than the one county-wide provider.

Nebraska’s transit providers also report annual boarding figures. Table 7 summarizes the number of boardings reported in FY 2024, the percentage of the region’s total boardings, the miles traveled per boarding (calculated using the total miles reported earlier), and the boardings per square mile of observed coverage area.

Table 7. Summary of passenger boardings and trip length

Provider	Service Category	Number of Boardings (FY 2024)	Percent Total Boardings	Miles Per Boarding	Boardings Per Covered Square Mile
Avera St. Anthony’s Hospital	Regional	11,464	76.3%	5.3	0.8
Community Memorial Health Center*	Regional	399	2.7%	64.2	0.1
Loup City Public Transportation	County-wide	719	4.8%	19.1	0.1
Valley County Transit System	Regional	2,451	16.3%	8.3	0.7
Totals		15,033	100%	8.0	

*Note: Community Memorial Health Center did not provide any sample ride data for this analysis. Coverage area is computed based on reported coverage area.
Source: (9) Nebraska Transit Invoice Portal, (10-12) provider reported ride data

Avera St. Anthony’s Hospital accounted for 76.3% of total boardings in the region. In contrast, Community Memorial Health Center reported the fewest boardings but the longest average trip length (64.2 miles), highlighting its focus on long-distance travel. Loup City Public Transportation had moderate boardings and a relatively long average trip length of 19.1 miles.

- These data reveal two patterns:
- Providers in the North Central region typically offer fewer, longer rides rather than frequent short trips.
 - There is no clear relationship between trip length and the size of a provider’s coverage area.

In addition to tracking miles traveled and boardings, NDOT monitors the vehicles each transit provider uses in their services. Table 8 lists the number of vehicles in service for each provider in FY 2024.

Table 8. Summary of provider vehicles and vehicle usage

Provider	Service Category	Number of Vehicles (FY 2024)	Percent Total Vehicles	Boardings Per Vehicle	Miles Per Vehicle	Covered Square Mile Per Vehicle
Avera St. Anthony’s Hospital	Regional	5	35.7%	2,292.8	12,215.0	2,964.0
Community Memorial Health Center*	Regional	4	28.6%	99.8	6,404.3	714.8
Loup City Public Transportation	County-wide	2	14.3%	359.5	6,852.5	2,903.5
Valley County Transit System	Regional	3	21.4%	817.0	6,775.7	1,110.9
Totals		14	100%	1,073.8	8,623.1	

*Note: Community Memorial Health Center did not provide any sample ride data for this analysis. Coverage area is computed based on reported coverage area.
Source: (9) Nebraska Transit Invoice Portal, (10-12) provider reported ride data

In FY 2024, the four providers operated a combined total of 14 vehicles. Avera St. Anthony’s Hospital, with the largest fleet, also reported the most boardings and the highest miles per vehicle (12,215). The other providers averaged about 6,500 miles per vehicle, with significantly fewer boardings per vehicle.

Boardings per vehicle tended to vary across all providers, driven by the difference in the number of boardings reported by each provider. Avera St. Anthony’s Hospital reported the highest number of boardings per vehicle (2,292.8). Together with their shorter average trip length, this indicates that their vehicles are making more, shorter trips than those taken by the other providers.

- In summary:
- Avera St. Anthony’s Hospital vehicles are more intensively used, supporting more frequent and shorter trips.
 - Other providers operate fewer trips per vehicle, typically over longer distances.

Table 9 summarizes ridership changes across the region from FY 2022 to FY 2024. Overall, most providers increased their total boardings and mileage. All four providers expanded their fleets. Boardings and mileage per vehicle declined slightly, likely due to added capacity. Lastly, average trip length increased for most providers, except for Avera St. Anthony’s Hospital.

Table 9. Summary of changes in service from FY 2022 to FY 2024

Provider	Vehicles	Boardings	Miles Traveled	Boardings Per Vehicle	Miles Per Vehicle	Miles Per Boarding
Avera St. Anthony’s Hospital	66.7%	31.6%	14.3%	-21.0%	-31.4%	-13.2%
Community Memorial Health Center	33.3%	-18.9%	-11.0%	-39.2%	-33.2%	9.8%
Loup City Public Transportation	100.0%	24.4%	88.2%	-37.8%	-5.9%	51.3%
Valley County Transit System	50.0%	80.9%	99.9%	20.6%	33.2%	10.5%
Overall	55.6%	35.0%	21.1%	-13.2%	-22.1%	-10.3%

Source: (9) Nebraska Transit Invoice Portal

In summary:

- Demand for rural transit appears to be growing across the region.
- Providers are investing in additional vehicles and expanding service reach.
- Trip patterns suggest a continued need for intercity service options to accommodate longer-distance travel.

TRIP DESTINATIONS



To better understand the state of rural transit across the region, we examined the most frequent drop-off destinations for all the regional providers who shared a sample of their rides. We first geocoded each reported drop-off using the U.S. Census Geocoder to determine a latitude and longitude for each destination and counted the number of drop-offs that occurred at or very near that location. We then determined the “point of interest” nearest each location to report a name for each destination, excluding locations that we determined to be single-family homes.

Three of the four regional providers submitted sample ride data, representing a total of 3,212 individual trips between May 2024 and February 2025. These trips corresponded to 281 unique destinations. Table 10 summarizes the number of sampled rides, unique destinations, and total boardings for FY 2024 by provider.

Table 10. Number of rides, unique destinations, and boardings reported by each provider, May 2024 to February 2025

Provider	Number of Rides in Sample	Percent Total Rides	Number of Unique Destinations	Percent Total Unique Destinations	Number of Boardings (FY 2024)	Percent Total Boardings
Avera St. Anthony’s Hospital	2,664	82.5%	199	70.8%	11,464	76.3%
Community Memorial Health Center*	N/A	N/A	N/A	N/A	399	2.7%
Loup City Public Transportation	100	3.1%	16	5.7%	719	4.8%
Valley County Transit System	467	14.5%	66	23.5%	2,451	16.3%
Totals	3,231	100%	281	100%	15,033	100%

*Note: Community Memorial Health Center did not provide a detailed sample containing individual rides.
Source: (9) Nebraska Transit Invoice Portal, (10-12) provider reported ride data

Although Avera St. Anthony’s Hospital is overrepresented in the ride sample relative to its share of total boardings, all three participating providers submitted samples from the same duration. As a result, the data still provides a representative view of regional ridership patterns.

Table 11. Top 10 drop-off locations for three out of four North Central region transit providers, May 2024 to February 2025

Drop-off Location	City/Town	Number of Combined Drop-offs
Avera St. Anthony’s Hospital	O’Neill	390
Evergreen Assisted Living	O’Neill	231
Valley County Health System Hospital	Ord	114
Shannon Apartments	O’Neill	97
Arbor Care Centers	O’Neill	74
North Park Homes	O’Neill	72
O’Neill Public Library	O’Neill	70
O’Neill Superfoods	O’Neill	67
Torpin’s Rodeo Market	O’Neill	65
Country Lane Retirement Village	O’Neill	60

Source: (10-12) provider reported ride data, various dates

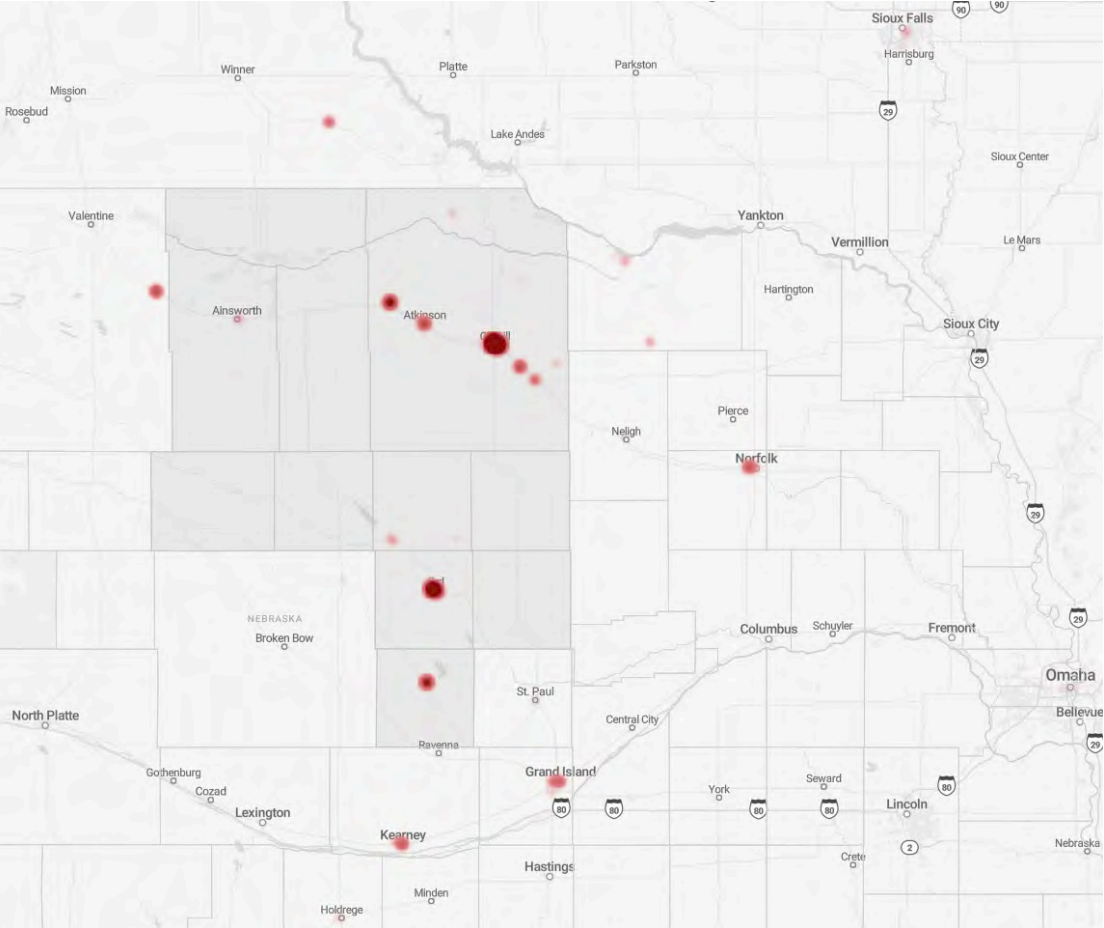
Table 11 lists the 10 most frequently reported drop-off locations. The top destinations are heavily concentrated in O’Neill and Ord, the region’s two largest cities, and primarily include medical facilities, elder care homes, subsidized housing, and grocery stores.

Among the 281 unique destinations, none were shared across providers, meaning each location appeared in only one agency’s sample. However, Loup City Public Transportation did not include specific addresses in most of its entries, listing only the city. Some of its trips may have overlapped with destinations reported by other agencies.

In summary, we make two main observations from our analysis of the drop-off data:

- The most common destinations are medical facilities, public or affordable housing developments for low-income or elderly residents, and grocery or discount department stores.
- Most of the rides end along or near U.S. Highway 20/275, which passes through O’Neill between Norfolk and Valentine. A fixed route or flex route service along U.S. Highway 20/275 with stops in O’Neill may be of value to the region.

Figure17. Drop-off locations within and around the North Central region (shaded light gray)



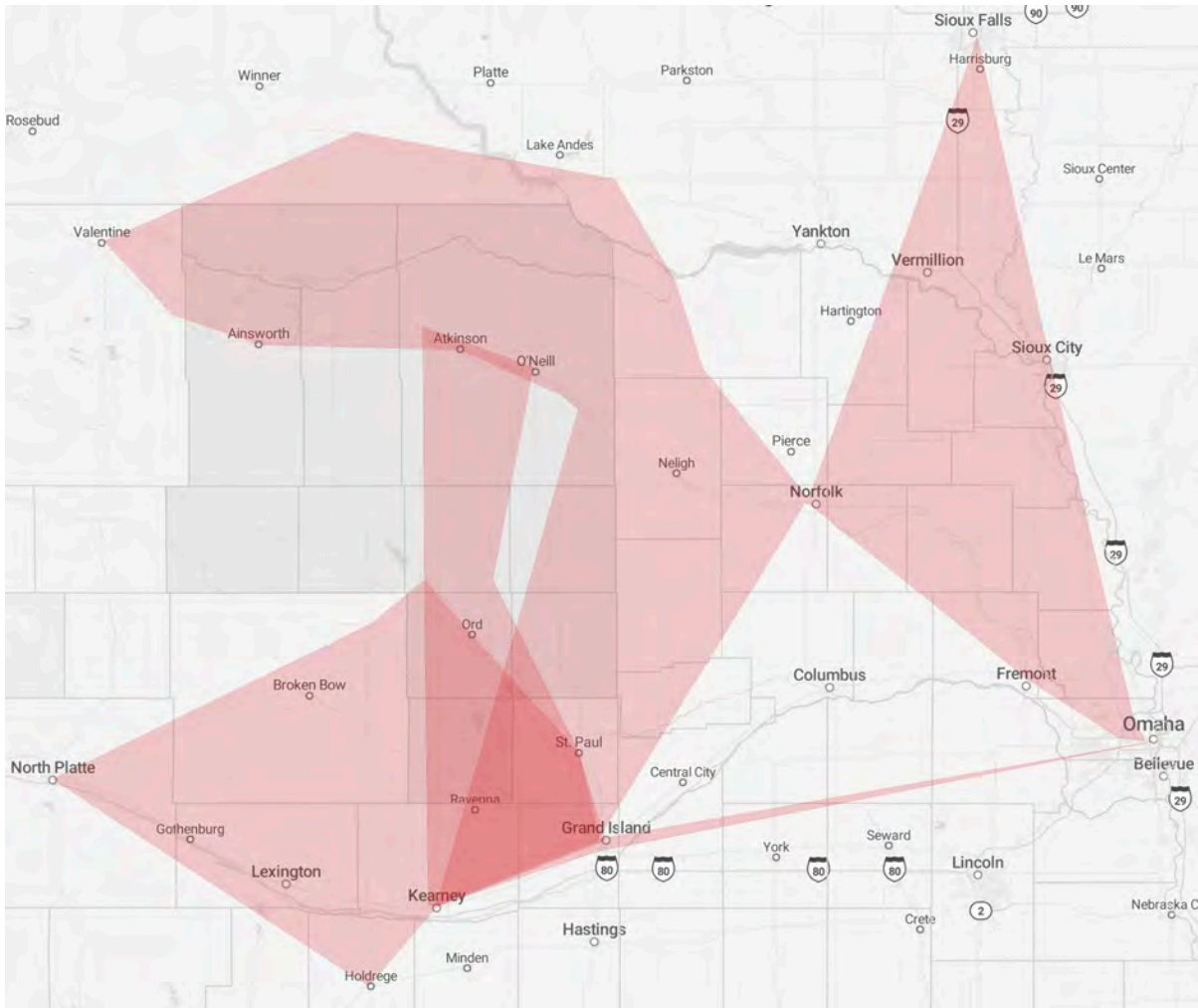
Source: (10-12) provider reported ride data

AVAILABILITY OF TRANSIT

Along with frequent destinations, we also analyzed the areas in which riders were picked up by each transit provider as reported by the samples of ride data obtained from the providers. We analyzed the pickup data by first determining the observed area served by each provider and computing the estimated total and transit dependent populations that fall within each area. We then used that information to identify gaps and overlaps in service areas and any populations that may be underserved.

Figure 18 shows the observed coverage map based on reported pick-up locations. The analysis reveals a major coverage gap in the southwestern portion of the region. Specifically, Blaine and Loup counties, and parts of Brown and Rock counties south of U.S. Highway 20 lack any observed service. This area represents approximately 2,884 people, or 9.7% of the North Central region’s population. While Community Memorial Health Center may serve some of this area, it did not provide ride data for this analysis. No current provider reports serving Blaine County at all.

Figure 18. Overlaid pick-up areas within and around the North Central region for all reported rides by North Central region transit providers; darker areas indicate overlap among pick-up areas



Source: (10-12) provider reported ride data, various dates

The remainder of the region has substantially better service coverage. An estimated 90.3% of the total population is served by at least one provider. Furthermore, 40.6% of residents are covered by two or more providers, and 12.7% are covered by three or more. These overlaps are most common in the southeastern portion of the region, where both Valley County Transit System and Loup City Public Transportation operate and make trips to Grand Island and Kearney.

Table 12 summarizes coverage by provider and population type including total population, population aged 65 years or older, and individuals with disabilities. While most of the transit-dependent population has access to at least one provider, approximately 9% to 10% live in areas with no observed transit coverage.

Table 12. Population of reported pick-up regions, by number of providers, 2022

	Total Population	Percent of Total Population	65 years or older	Percent 65 years or older	With a Disability	Percent With a Disability
North Central	29,758	100.0%	7,616	100.0%	4,322	100.0%
Covered by...						
4 Transit Providers	41	0.1%	11	0.1%	5	0.1%
3 Transit Providers	3,779	12.7%	937	12.3%	628	14.5%
2 Transit Providers	12,073	40.6%	3,158	41.5%	1,895	43.8%
1 Transit Providers	26,874	90.3%	6,846	89.9%	3,927	90.9%
0 Transit Providers	2,884	9.7%	770	10.1%	395	9.1%
Avera St. Anthony’s Hospital	16,396	55.1%	4,119	54.1%	2,392	55.3%
Community Memorial Health Center	9,498	31.9%	2,505	32.9%	1,517	35.1%
Loup City Public Transportation	5,729	19.3%	1,531	20.1%	923	21.4%
Valley County Transit System	11,143	37.4%	2,797	36.7%	1,623	37.6%

Source: (8) U.S. Census Bureau American Community Survey, 5-year Estimates 2022

In summary:

- Blaine and Loup counties represent the largest service gap, with no reported transit coverage.
- Approximately 90% of the region’s population is served by at least one provider.
- Overlapping service exists in areas with higher demand, particularly in the southeast.
- Most transit-dependent individuals have access to service, though 9% to 10% remain unserved.

KEY FINDINGS



Our analysis shows that the population of the North Central region is more dependent on transit than the population of Nebraska as a whole. This includes 25.6% of residents aged 65 or older, 11.7% living in poverty, and 14.5% with a disability. These percentages are growing, highlighting an increasing need for public transit in the region.

Ridership has increased since FY 2022 for three of the four providers in the region. All four agencies expanded their fleets during this time, indicating rising demand. Average trip length also grew for most providers, suggesting a need for additional intercity transit options. Many agencies reported frequent trips to larger cities outside the region, including Grand Island, Kearney, and Norfolk.

Together, the four transit providers connect residents to essential destinations such as healthcare, housing, grocery stores, schools, and workplaces, underscoring the crucial role of rural transit in supporting quality of life.

Currently, transit coverage reaches about 90.3% of the region’s population. However, Blaine and Loup counties, along with parts of Brown and Rock counties south of U.S. Highway 20, remain unserved. These areas represent an estimated 2,884 residents with no access to rural public transportation.

RECOMMENDATIONS



SOURCES



Based on our analysis, we offer the following recommendations:

- 1. Expand Coverage to Blaine and Loup Counties**
As of this report, none of the region’s four transit providers serve Blaine or Loup counties. This creates a significant service gap, leaving nearly 10% of the region’s population and a similar share of its transit-dependent residents without public transit access to critical destinations such as medical facilities, grocery stores, and housing.
- 2. Explore Intercity Transit Routes**
Transit providers in the region frequently travel to nearby cities. Loup City Public Transportation and Valley County Transit System regularly serve riders going to Grand Island and Kearney. Avera St. Anthony’s Hospital often provides rides along U.S. Highway 20/275, serving cities like Ainsworth, Atkinson, Neligh, Norfolk, and O’Neill. We recommend investigating possible intercity routes connecting the region to Grand Island and Kearney as well as a route along U.S. Highway 20/275.
- 3. Prioritize Access to Essential Destinations**
Medical facilities, public or affordable housing, and grocery or discount stores are the most common destinations for transit riders. Maintaining reliable service to these critical locations is essential, especially for low-income, elderly, and transit-dependent populations. Moreover, given that the North Central region has a growing proportion of elderly residents and individuals with disabilities than the state average, transit agencies may need to develop programs specifically tailored to these populations and destinations.
- 4. Enhance Coordination with Nearby Areas**
The four providers in the North Central region all travel outside the region to some degree, primarily to Grand Island and Kearney in the South Central region and to Norfolk in the Northeast region. Direct coordination with South Central region providers may improve the efficiency of those trips and may also alleviate the gap presented by the lack of service to Blaine and Loup counties.
- 5. Improve Data Collection and Performance Metrics**
Standardizing how transit providers collect and report ride data could provide clearer insights into service usage and unmet demand. Incorporating performance metrics such as on-time performance, rider satisfaction, and trip frequency would help providers refine operations and identify gaps more effectively.

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