

Transportation Toolkit

Market Rate Increase Request Letter Template – Annual Request

Suggested use: Use this template when making a subsequent year request to a county or when subjected to a rate increase from a contracted transportation service provider. Alter or add information tables and dialog as needed. Attach as an addendum any rate increase notice received from a contracted service provider or other supporting documentation.

[Program Name]

[Street Address]

[City, State, Zip]

[Telephone]

[Fax]

Month XX, 20XX

[name]

[title]

[county & department name]

[street address]

[city, state, zip]

Dear [courtesy title/name],

[program name] is seeking an adjustment to its agreed-upon “Market Rate” transportation rate with [county & department name] in order to continue to provide person-centered transportation services to the persons we serve. [provide reason for request with supporting documentation. example: In [month] of this year, we received notice from our contracted transportation services provider, [vendor name], of an [percent] increase to our subscription rates beginning on [month, day, year]. A copy of this notice is attached.]

[program name] relies heavily upon [vendor name] to provide safe and reliable transportation for many of its routes. Without this service, we would not be able to guarantee a ride to persons served on all of our routes. We must therefore request an adjustment to our existing transportation rates so that persons served can continue to receive the Employment and Day Support services they need. Our current and adjusted fiscal year [2025, 2026, etc.] transportation rate framework is attached.

[program name’s] Mission, Vision and Values require that persons served receive services that are safe and in keeping with their assessed needs. Transportation is an essential component of the services a person receives and this adjustment will allow those services to continue. Should you have any questions or comments, please do not hesitate to contact us. We thank you for your understanding and greatly value your continued support.

Sincerely,

[name]

[title]

[program name]

[telephone]

[email address]

A. – Current 2025 “Market Rate” Transportation Rate Framework

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Does the individual need a lift? | Is a lift used? | Shared or Individual? | Distance in miles: 0-10 | Distance in miles: 11-20 | Distance in miles: 21-50 | Distance in miles: 51 or more |
| Yes | Yes | Individual |  $00.00  | $00.00  | $00.00  | $00.00  |
| Yes | No | Individual | $00.00  | $00.00  | $00.00  | $00.00  |
| Yes | Yes | Shared | $00.00  | $00.00  | $00.00  | $00.00  |
| Yes | No | Shared | $00.00  | $00.00  | $00.00  | $00.00  |
| No | Yes | Individual | $00.00  | $00.00  | $00.00  | $00.00  |
| No | No | Individual | $00.00  | $00.00  | $00.00  | $00.00  |
| No | Yes | Shared | $00.00  | $00.00  | $00.00  | $00.00  |
| No | No | Shared | $00.00  | $00.00  | $00.00  | $00.00  |

B. – Requested 2026 “Market Rate” Transportation Rate Framework

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Does the individual need a lift? | Is a lift used? | Shared or Individual? | Distance in miles: 0-10 | Distance in miles: 11-20 | Distance in miles: 21-50 | Distance in miles: 51 or more |
| Yes | Yes | Individual |  $00.00  | $00.00  | $00.00  | $00.00  |
| Yes | No | Individual | $00.00  | $00.00  | $00.00  | $00.00  |
| Yes | Yes | Shared | $00.00  | $00.00  | $00.00  | $00.00  |
| Yes | No | Shared | $00.00  | $00.00  | $00.00  | $00.00  |
| No | Yes | Individual | $00.00  | $00.00  | $00.00  | $00.00  |
| No | No | Individual | $00.00  | $00.00  | $00.00  | $00.00  |
| No | Yes | Shared | $00.00  | $00.00  | $00.00  | $00.00  |
| No | No | Shared | $00.00  | $00.00  | $00.00  | $00.00  |

[attach rate increase notice from contracted transportation service provider or other supporting documentation]