

October 5, 2023

Hon. Angela Alsobrooks
Executive Prince George's County
1301 McCormick Drive, Wayne K. Curry Administration Building
Largo, MD 20774

RE: A better design for the I-495/Medical Center Drive interchange project

Dear County Executive Alsobrooks:

We support the exciting vision you have laid out for a vibrant, walkable Downtown Largo and Blue Line corridor. In order to achieve this vision, the Maryland State Highway Administration (SHA) must wholly rethink their current proposal for a greatly expanded I-495/Medical Center Drive interchange.

SHA's proposal for a massive, complex, high-speed \$90+ million interchange is completely at odds with a vibrant, walkable Downtown Largo. The proposal would severely degrade walk and bike access on the only I-495 crossing to Downtown Largo that even has a sidewalk or path.

The proposed I-495/Medical Center interchange would increase the current number of travel lanes from five to either eight or eleven lanes, plus a protected shared use path on one side. Despite a new barrier protection along the route, people walking or biking would have increased risk by having to cross between 5 to 10 travel lanes of high speed traffic entering and exiting the Capital Beltway. Consuming acres of land, all SHA's larger interchange alternatives would also create a hotter, miserable environment, and effectively cut off the only walk and bicycle access between the Largo and Morgan Boulevard Metro stations. No one would walk if they had another choice, which is antithetical to a vision of a connected Blue Line corridor.

We believe the proposed interchange alternatives, all of which degrade the pedestrian environment, stem from old approaches at SHA, including justifying their capacity on 20-year traffic projections generated by flawed traffic models. These models overproject future traffic and fail to adequately model the benefits of walkable, transit-oriented communities.

Given the importance of supporting, rather than undermining the Blue Line corridor vision, and the new opportunities with the Moore administration, we urge you to ask MDOT to work with the County to:

1. Develop multimodal urban boulevard design alternatives for the Medical Center Drive/I-495 interchange. These alternatives should provide wider, buffered sidewalks,

protected bike lanes or shared use paths, and streetscaping. The interchange design should use the current number of travel lanes rather than expand them;

2. Develop and construct safe, comfortable pedestrian and bicycle access for Downtown Largo's other two interchanges at MD 214 (Central Ave.) and MD 202 (Landover Road);
3. Reallocate funding to expedite the construction of the Central Avenue Connector Trail and bridge providing the direct walk/bike connection from Downtown Largo to Morgan Boulevard (labeled "Phase III" shown in yellow);
4. Develop and deploy a Transportation Systems Management (TSM) approach that distributes vehicle trips to all three of the interchanges that serve Downtown Largo, the stadium, and the Blue Line corridor. The TSM approach would include tools like I-495 electronic information signs, real time app mapping directions, and parking management.

We believe in the grand vision for Downtown Largo and the Blue Line corridor, thus we ask that you champion investments in multimodal connections and a true urban boulevard linking Downtown Largo and future mixed-use redevelopment around Fedex field, rather than a massive third interchange that degrades and effectively blocks walk and bicycle access.

Thank you for your consideration.

Sincerely,



Cheryl Cort
Policy Director

CC:

Prince George's Council Member Wala Blegay, District 6

Prince George's Council Member Jolene Ivey, District 5

Prince George's Council Chair Tom Dernoga, District 1

Prince George's Council Member Eric Olson, TIEE Committee chair

Director Michael D. Johnson, P.E., Prince George's DPW&T

Assistance Chief Administrative Officer Angie Rodgers

State General Assembly Delegation Districts 24 & 25

MDOT Joe McAndrew, Assistant Secretary

MD SHA Administrator William Pines

Enclosures

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1. Proposed revised language for the Prince George's County FY 24-29 CTP Priority Letter
2. Fact sheet: A better approach to the I-495/Medical Center Drive interchange project
3. Project map location showing three interchanges serving Downtown Largo
4. Bridge Typical Sections of No-Build and Alternative 3 Diverging Diamond
5. Alternative 3 Diverging Diamond interchange design
6. Alternative 3 - Diverging Diamond highlights A, B, C and D shared use path crossings
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8. Proposed 6.5-mile Central Avenue Connector Trail (CACT) with direct bridge connection in yellow

Attachment 1: CSG proposed revisions to CTP FY24-29 draft letter

The County is appreciative of the State’s advancing of critical projects to the County, including the continued funding for the planning, design, and construction of the **Medical Center Drive Interchange**, and additional construction funding for the **Blue Line Corridor Improvements**. We ask SHA to reconsider their design approach to the Medical Center Drive interchange. All current build alternatives are so expansive that they would divide rather than connect Downtown Largo, the stadium area, and the Blue Line corridor. They lack safe and comfortable bicycle and pedestrian facilities and would undermine rather than support transit-oriented economic development in the corridor. The County requests that SHA work with stakeholders to design an urban boulevard across the Beltway to enhance walk and bicycle connectivity, additional walk/bike access through Downtown Largo’s other two interchanges - MD 214 and MD 202, expedited funding for the Central Avenue Connector Trail for a bicycle and pedestrian connection directly to the Largo Medical Center campus over the Beltway, and a Transportation Systems Management (TSM) approach that distributes vehicle trips to all three of the interchanges that serve Downtown Largo, the stadium and the Blue Line corridor. While movement of traffic in these vital transit-oriented developments is important, it should not be done at the expense of non-motorized mobility and safety. Particularly regarding the crossing of the Beltway at Largo.] In addition to bicycle and pedestrian access as part of the Medical Center Drive bridge currently in design, it is also important to leverage the new FY24 RAISE grant that includes the Central Avenue Connector Trail Study for a bicycle and pedestrian connection directly to the Largo Medical Center campus over the Beltway.]

CSG proposed revisions to FY24-29 CTP Priority List

II. STATE HIGHWAY ADMINISTRATION (SHA) PRIORITY PROJECTS

A. Construction Priorities:

<p>1. I-95 / I-495 at Medical Center Drive [Widening] Interchange and Blue Line Corridor Improvements</p>	<p>Provide funding to: (1) Improve interchange <u>to create a multimodal boulevard and capacity/reduce congestion</u>; (2) Improve corridor connectivity and mobility; (3) Improve safety for vehicles, bicycles, and pedestrians <u>with buffered, landscaped protected walk and bicycle facilities with minimized crossing distances</u>; (4) <u>provide additional pedestrian and bicycle access to Downtown Largo’s other two interchanges: MD 214 and MD 202</u>; (5) <u>manage congestion and vehicle access with a Transportation Systems Management (TSM) approach that distributes vehicle trips to all three of the interchanges that serve Downtown Largo and the Blue Line corridor including I-495 electronic information signage, real time mapping directions, and parking management</u>; and (5) Promote economic development serving as a gateway for Downtown Prince George’s County. Advance improvements for all Blue Line Corridor Stations to support the County platform for economic development including an iconic bike-ped facility connecting the west side of I-495 to the Largo Metro / Medical Center Campus as part of the Central Avenue Connector Trail.</p>
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Attachment 2

Fact Sheet: A better approach to the I-495/Medical Center Drive interchange project

Maryland State Highway Administration's (SHA) proposal for a massive, complex, high-speed \$90+ million I-495/Medical Center Drive interchange is completely at odds with a vibrant, walkable Downtown Largo. The proposed walk/bike accommodations would provide a new barrier protection on one hand, but increase risk to people traveling by foot or bicycle by forcing more high-speed travel lane crossings on the other. The proposal would degrade and virtually eliminate walk and bike access on the only I-495 crossing to Downtown Largo that even has a sidewalk or path.

The proposed I-495/Medical Center interchange would increase the current number of travel lanes from five to either eight or eleven lanes, plus a protected shared use path on one side. Despite a new barrier protection along the route, people walking or biking would have increased risk by having to cross between 5 to 10 travel lanes of high speed traffic entering and exiting the Capital Beltway. Consuming acres of land, all the larger interchange alternatives would also create a hotter, miserable environment, and effectively cut off the only walk and bicycle access between the Largo, the stadium, and Morgan Boulevard Metro stations. No one would walk if they had another choice.

The project is antithetical to the County's vision to create vibrant walkable places around Metro stations, and a connected Blue line/Central Avenue Corridor to Morgan Boulevard Metro station, the stadium, and beyond. It would also set back the County's efforts to achieve Vision Zero traffic deaths and severe injuries on its roadways with more hazardous designs for those braving to walk or bicycle this route. Plan 2035 directs planners to accommodate more traffic congestion in vibrant, growing transit station areas where travel is to be by many modes - not only driving, but also riding the bus, Metro, walking and bicycling.

A Better Alternative

Using the same number of travel lanes (five), a multimodal urban boulevard could be designed to carry both vehicular traffic, and people walking and bicycling. Future potential increased traffic can be managed through better information, and better utilization of all nearby connections to I-495.

Downtown Largo is already served by three interchanges that cross the Capital Beltway -- at Central Avenue (MD 214) to the south, Landover Road (MD 202) to the north, and Medical Center Drive in the middle, providing options for drivers and dispersing vehicle traffic. Today, there are minimal to modest delays for drivers even during rush hour and on football game days.

At the same time, all three interchanges should be retrofitted with buffered sidewalks and protected bike paths. The Central Avenue and Landover Road/I-495 crossings currently have no sidewalks or bike paths. The Medical Center Drive crossing of the Beltway has an unbuffered sidewalk on one side.

Rather than greatly expanding vehicle access at Medical Center Drive and effectively cutting off walk and bicycle access across the Capital Beltway, we recommend dispersing vehicle trips among the three interchanges, along with adding enhanced walk and bicycle facilities to each interchange, and accelerating funding and construction of the Central Avenue Connector Trail and iconic bridge directly connecting Downtown Largo to Morgan Boulevard Metro station. This alternative could be accomplished for far less than the \$90+ million considered for the current interchange options.

Flawed goals and flawed traffic models lead to wide roads and undermine communities

According to SHA, “the goals of the project are to address existing congestion and accommodate increasing traffic volumes associated with future growth, as well as to improve pedestrian and bicycle connectivity.” But this is an unduly narrow goal focused overwhelmingly on moving cars, inadequately addressing the walk/bike environment, and ignoring the transit-oriented economic development goals of the County.

SHA’s project goals are also based on flawed traffic models. SHA states that their traffic models predict that in 20 years (2045), at the two points of the intersection where vehicles are getting on and off the beltway, the delay will result in a level of service (LOS) F -- or stop and go traffic with potentially minutes of delay for drivers. We’ve worked with traffic modelers who note that the DC regional model overpredicts future car traffic volumes to levels that would not realistically happen, and officials then overbuild streets and intersections for these future predicted driving trips. The models do not adequately account for transit-oriented communities, and increased walking, biking, and transit use.

As a result, roads are designed to be overly-wide, with excess capacity based on future forecast traffic volumes, assuming everyone continues to drive more and more. Designing only for

projected vehicle travel becomes a self-fulfilling prophecy. The wider and faster the road, the more driving it attracts (see CSG's [fact sheet on induced demand](#)) and the less inviting it is for people walking, biking or taking transit. The higher speeds generated by wider roads also make them less safe for all road users, including drivers.

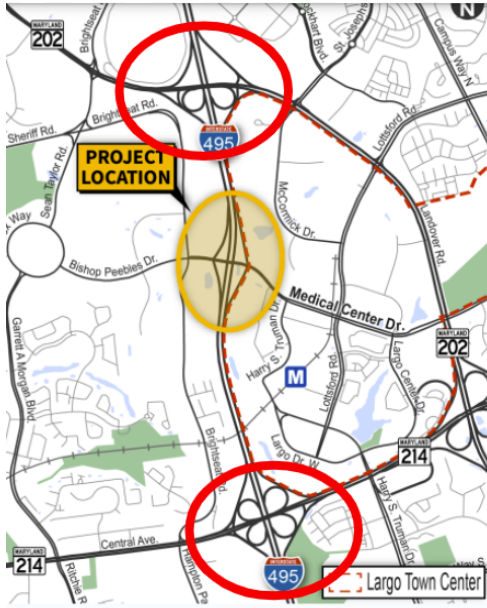
This approach is inconsistent with Plan 2035 and the Planning Department's transportation review standards which seek to create more walkable streets around mixed use transit centers. It also undermines the County's economic development objectives to create competitive and vibrant walkable places to attract visitors with iconic public facilities, and the next generation workforce and new economy businesses.

Conclusion

Given the special importance of Downtown Largo as the anchor of a transit-oriented economic development strategy for the Blue Line Metro corridor, it's particularly important to revise the goals and design of this project. Rather than create a new barrier to walk/bike access to Downtown Largo so that it's virtually impossible to move on foot or bicycle between Largo and the stadium area and Morgan Boulevard Metro, the county has a new opportunity to work with the state to create safer, people-friendly access that fosters sustainable and competitive, transit-oriented economic development. We recommend the County and state work together to:

1. Develop multimodal urban boulevard design alternatives for the Medical Center Drive/I-495 interchange. These alternatives should provide wider, buffered sidewalks, protected bike lanes or shared use paths, and streetscaping. The interchange design should retain the current number of travel lanes rather than expand them.
2. Develop and construct safe, comfortable pedestrian and bicycle access for Downtown Largo's other two interchanges at MD 214 (Central Ave.) and MD 202 (Landover Road)
3. Reallocate funding to expedite the construction of the Central Avenue Connector Trail and bridge providing the direct walk/bike connection from Downtown Largo to Morgan Boulevard (labeled "Phase III" shown in yellow);
4. Develop and deploy a Transportation Systems Management (TSM) approach that distributes vehicle trips to all three of the interchanges that serve Downtown Largo, the stadium, and the Blue Line corridor. The TSM approach can include tools such as I-495 electronic information signs, real time app mapping directions, and parking management.

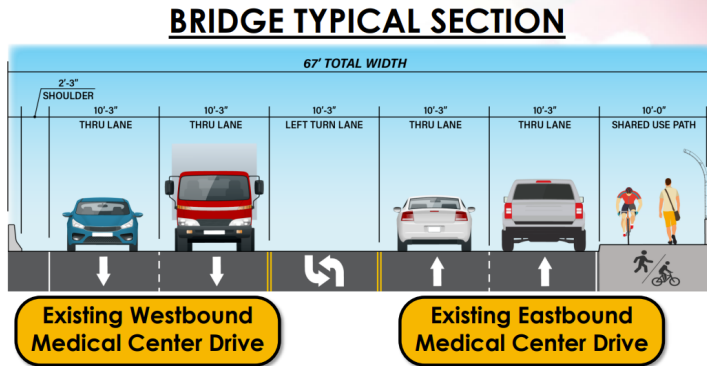
Attachment 3



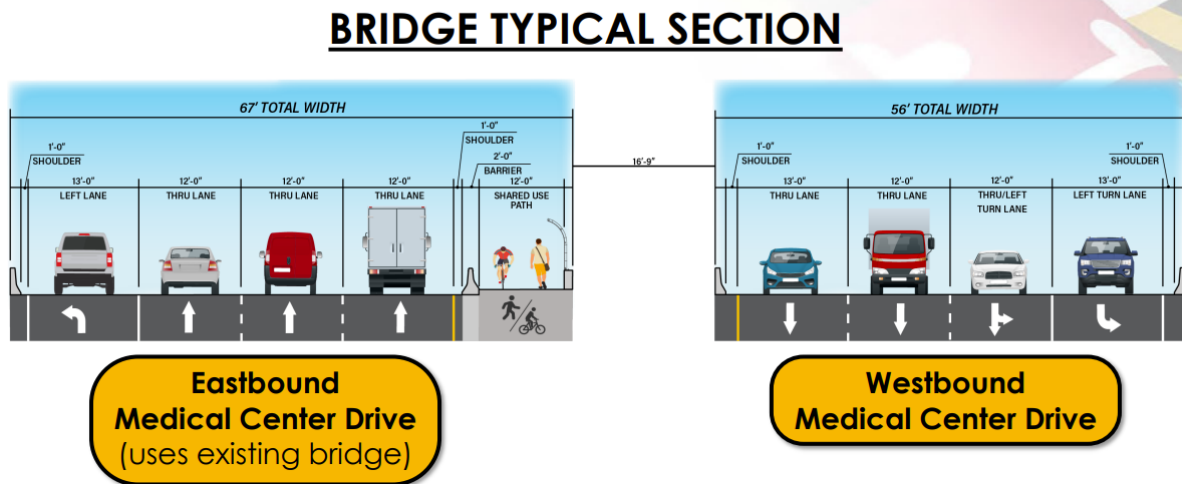
Downtown Largo, the stadium and Morgan Boulevard Metro are served by three I-495 interchanges: MD 202, MD 214, and Medical Center Drive. Only Medical Center Drive has walk/bike accommodations. Image modified from source: [MDSHA](#)

Attachment 4 - Bridge Typical Sections of No-Build and Alternative 3 Diverging Diamond

Alternative 1 – No-Build



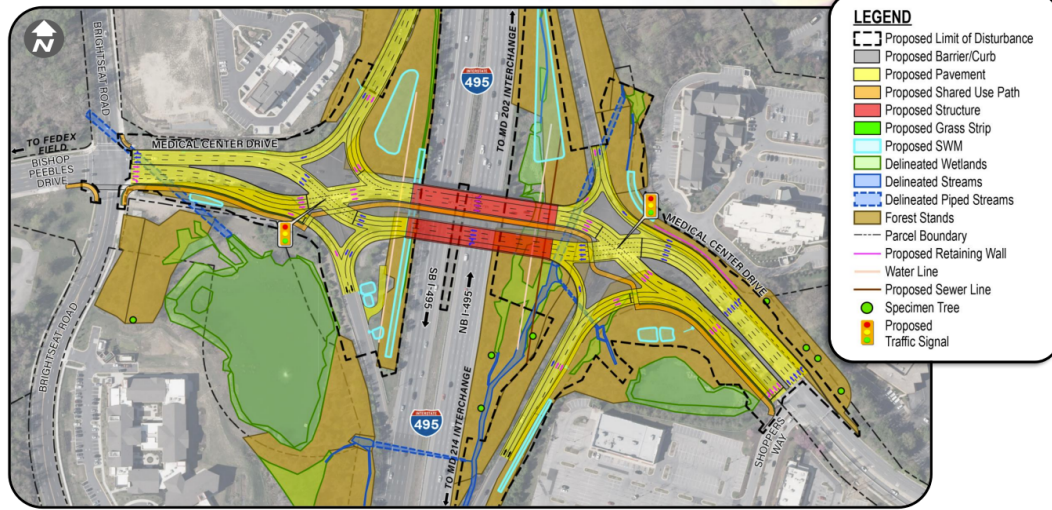
Alternative 3 – Diverging Diamond



Caption: Alternative 1 No-Build and Alternative 3 - Diverging Diamond shows a change from 5 to 8 wider travel lanes. Alternative 3 improves the walk/bike path with a vertical barrier but increases risk by expanding the number of travel lane crossings from 5 to 8, with multilane crossings in three of the four crossings. Source: [MDSHA](https://www.mds.gov/).

Attachment 5

Alternative 3 – Diverging Diamond



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Virtual Public Meeting – 05/18/2023

Caption: State Highway Administration’s Alternative 3 - Diverging Diamond interchange design would create 10 lanes of traffic for people to cross and an 8-lane cross section. Source: [MDSHA](https://www.mdt.state.md.us/MDSHA)

Attachment 6



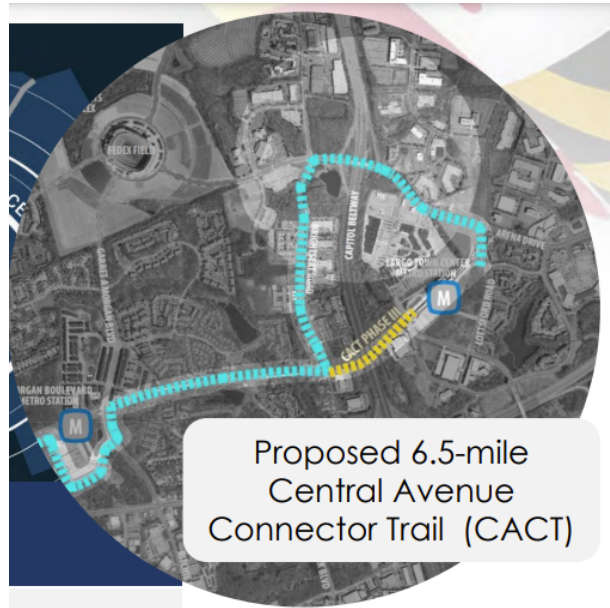
Caption: Alternative 3 - Diverging Diamond highlights A, B, C and D shared use path crossings, many of which are multilane. Source: [MDSHA](https://www.mdt.state.md.us/MDSHA) (Round 2 Design Assessments)

Attachment 7



Caption: Prince George’s County [Economic Development strategy](#) calls for an “Iconic Bridge Connecting Largo and Morgan Boulevard” but this is considered Phase III, and funding for the facility has not been identified.

Attachment 8



Caption: Proposed 6.5-mile Central Avenue Connector Trail (CACT) image of two routes of the Central Avenue Connector Trail. The blue line trail route crosses the Beltway on Medical Center Drive between Downtown Largo, the stadium. The yellow line (labeled CACT Phase III) shows a direct trail route across the Beltway from Largo to Morgan Boulevard Metro stations. Source: [MDSHA](#)