



Northwest Pavement Management Association - Comments

This is a Comment on the **Federal Highway Administration (FHWA)**
Proposed Rule: **National Performance Management Measures:
Assessing Pavement Condition for the National Highway
Performance Program and Bridge Condition for the National
Highway Performance Program**

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Submitter Information

Submitter Name:

Ryan Miles

Mailing Address:

PO Box 1995

City:

Vancouver

Country:

United States

State or Province:

WA

ZIP/Postal Code:

98668

Organization Name:

Northwest Pavement Management
Association

Submitter's Representative:

Ryan Miles

Comment

The Northwest Pavement Management Association (NWPMA) understands that the new requirements in the proposed rulemaking for MAP 21 roads on the National Highway System (NHS) will require International Roughness Index (IRI) data to be collected and used to determine pavement condition. We do not believe that this is an appropriate measure to be used on low speed streets and roads and appreciate the opportunity to comment on behalf of our local agency members throughout Oregon, Washington, and Idaho.

The large majority of agencies that are part of the association currently collect condition assessment data that they use to prioritize work on their streets including NHS routes. In addition, many of these agencies utilize pavement management systems (PMS) to determine their condition scoring, system needs by street, long term funding needs, and long term network analyses. The pavement condition for these systems does not utilize the IRI in the condition calculation and only some use rutting and faulting. Instead, they utilize the distress methodologies that are built into the PMS programs or based on the defect measures in the Pavement Surface Condition Field Rating Manual for Asphalt Pavements that was developed by the NWPMA and the Washington State Department of Transportation. The primary distresses that are captured by local agencies in all of these are alligator cracking, transverse and longitudinal cracking, patching, and aging/raveling to come up with a condition score on a scale of 0-100 (with 100 being the best).

Local agencies use the condition score along with other data, such as average daily traffic and truck percentages, to determine which streets need treatment and what the appropriate treatment is, based upon the available funding to try to maximize the life of our street networks with the limited resources we have. NHS routes will naturally rise to the top of local agency priorities due to these factors and the importance of the streets to the system and those using them. As a result, this additional condition data that is currently proposed is not necessary to ensure that NHS routes are being managed properly. In addition, most

local agencies do not have the resources to collect IRI, rutting, and faulting data, so this will add an additional burden to our already limited budgets.

Since part of the proposed MAP21 rule making requires any local agency street on the NHS system to collect and have IRI data and targets, this portion of the proposed rulemaking really needs to be looked at more closely. The IRI is appropriate for vehicles traveling at a high rate of speed such as freeways and highways. However, the IRI is not an appropriate condition assessment measure for streets with slower speeds and fixtures within the pavement such as utility manholes and valve cans that would affect the IRI ratings adversely to the point of making this data invalid. Our suggested recommendation is that if the posted speed is less than 50 MPH, then the IRI should not be used for the condition assessment of the streets. This is one of the reasons why, nationwide, local agencies do not collect IRI data since it isn't necessary, or needed, to operate with good pavement management practices on these types of streets. Instead, we should consider developing a standard for determining condition scores for local agencies that would also apply to NHS routes on local agency streets. Since many local agencies already utilize a condition scoring of 0-100 based on the primary defects of alligator cracking, longitudinal and transverse cracking, and patching, we should utilize these as a starting point for the standard.

In conclusion, based upon our experience, the proposed MAP21 rulemaking requiring IRI data to be collected for streets on the National Highway System (NHS) is not an appropriate criteria for measuring the condition of lower speed, local agency streets but should be applied to streets with a 50 mph or higher speed limit. Instead, an alternate condition scoring standard should be developed for local agency streets. Until this is resolved, we would request that these new proposed MAP21 requirements be put on hold. We also would be happy to be included in any discussion to change this criteria for ones that are more useful and applicable for local agency streets.

Sincerely,

Ryan Miles
Northwest Pavement Management Association Chair
Operations Superintendent
City of Vancouver
PO Box 1995
Vancouver, WA 98668
360-487-7708