









1,263 Interstate sections

IDOT Districts, central offices, and U of I have on-line access



















D Cracking Adjustment Factors Rate of CRS Loss	
JRCP	1.2
AC / JRCP	1.2
AC / CRCP	1.2
CRCP	1.5
Can be varied in ILLINET for each District.	

*Remaining Life of Interstate Routes and Corridors*  CRS Model Calibration Vertical Shift of Prediction Curve

Curve represents mean predicted CRS

Actual CRS normally distributed about curve

CRS of any given section may differ from mean prediction

Shape of curve (rate of deterioration) assumed appropriate for each section

Age and ESAL data assumed accurate













ILLINET Rehabilitation NEEDS vs IDOT Multi-Year Program

### Rehabilitation NEEDS Analysis with ILLINET

Rehabilitation needs each year for next ten years

No yearly budget constraint

User-set minimum CRS triggers rehabilitation

Purpose of NEEDS is to predict rehab timing

Any rehabilitation type and cost may be used

#### IDOT's Proposed Highway Improvement Program

Proposed expenditures for Interstate highways, state highways, and other facilities

Pavement rehabilitation, bridge rehabilitation or replacement, major highway construction, safety improvements

### **NEEDS vs IDOT Program**

**ILLINET NEEDS Analysis:** 

Sections and total mileage needing rehab each year in next five years, starting 1991, 92, 93, 94

NEEDS run for each of nine Districts

IDOT Program: Programmed Interstate pavement resurfacing and reconstruction

FY 91 - 95, 92 - 96, 93 - 97, 94 - 98













# Conclusions

Remaining Life Analysis

Some routes show high variability in remaining life along length, likely to continue if managed in small sections.

Some routes are more uniform in remaining life: uniformly high or uniformly low.

Corridor management may be better strategic planning approach than uniform section management.

## Conclusions NEEDS vs IDOT Program Comparison of long-range rehab needs and IDOT multi-year program was made using ILLINET.

IDOT program met only 60 percent of rehab needs below "acceptable" level.

Consequences of inadequate funding are: (1) increased maintenance costs,

(2) growing backlog of rehab needs.