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June 23, 2014

TO: Lafayette County Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Meeting Announcement

The Lafayette County Transportation Disadvantaged Coordinating Board will meet **Monday, June 30, 2014 at 1:00 p.m.** in the meeting room of Suwannee River Economic Council located on State Road 27 in Mayo, Florida. This is an important meeting of the Board. At this meeting, the Board will review Suwannee River Economic Council's proposed Fiscal Year 2014/15 service rates. All Board members are encouraged to attend this meeting.

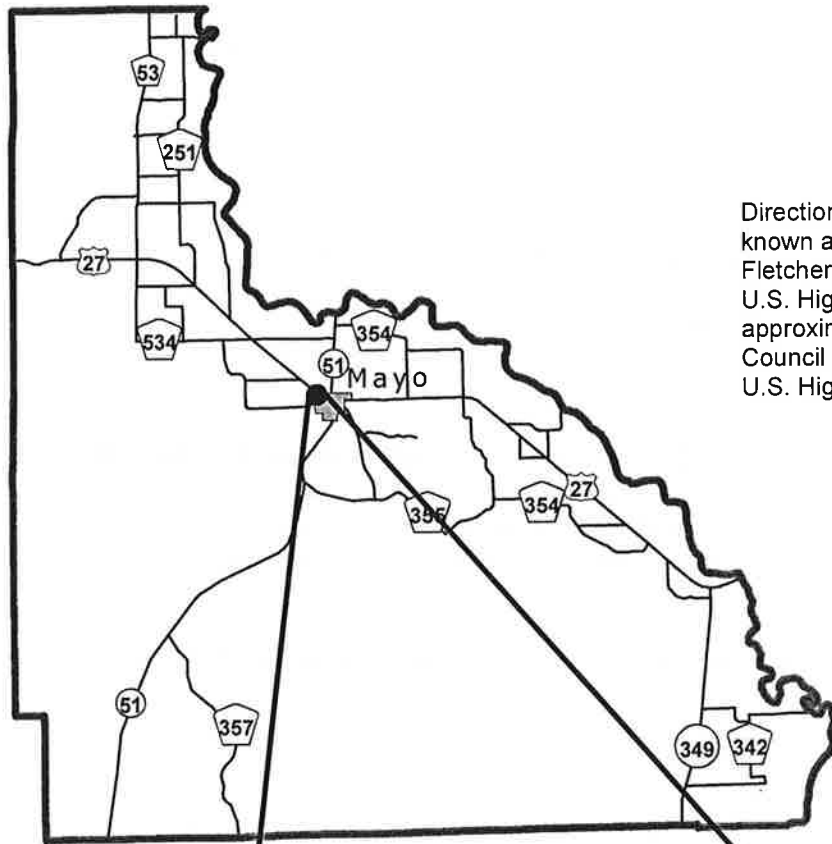
Attached is a meeting agenda and supporting materials. If you have any questions, please do not hesitate to contact me at extension 110.

Attachments

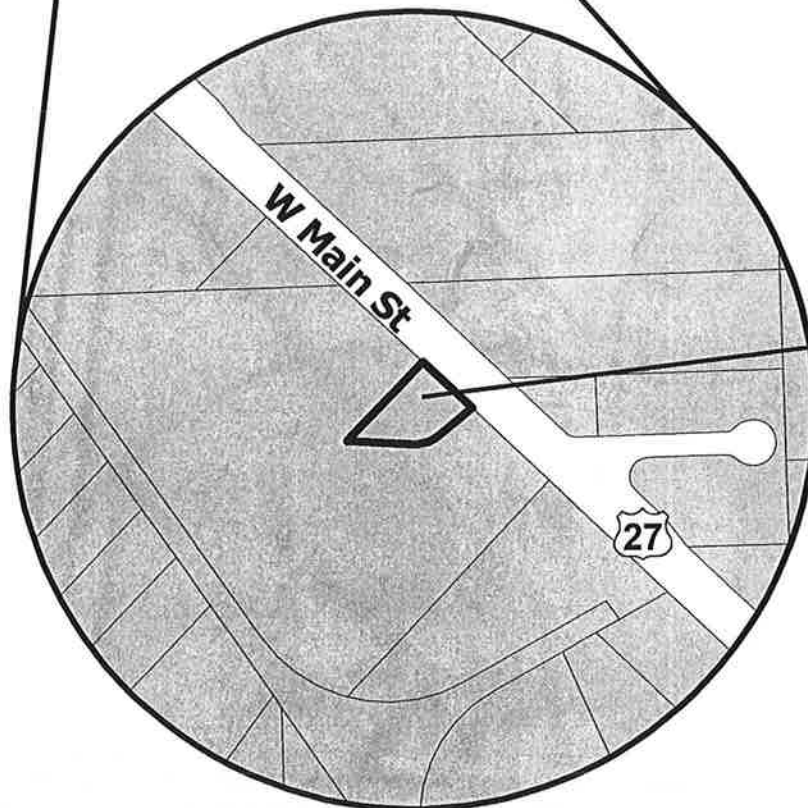
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Suwannee River Economic Council

114 SW Community Circle
Mayo, FL 32066



Directions: From the intersection U.S. Highway 27 (also known as Main Street) and State Road 51 (also known as Fletcher Avenue) in the Town of Mayo, turn West onto U.S. Highway 27 (also known as Main Street), travel approximately 0.5 miles and the Suwannee River Economic Council will be on the left, on the Southwestern side of U.S. Highway 27 (also known as Main Street).



1 inch = 500 feet

Suwannee River
Economic Council





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LAFAYETTE COUNTY
TRANSPORTATION DISADVANTAGED COORDINATING BOARD
MEETING ANNOUNCEMENT AND AGENDA

Meeting Room
Suwannee River Economic Council
Mayo, Florida

Monday
June 30, 2014
1:00 p.m.

I. BUSINESS MEETING – CALL TO ORDER

- A. Invocation**
- B. Pledge of Allegiance**
- C. Introductions**
- D. Approval of the Meeting Agenda**
- E. Approval of the March 24, 2014 Minutes**

Page 7

II. NEW BUSINESS

- A. Lafayette County Transportation Disadvantaged Service Plan Amendment**

Page 11

The Board needs to review and approve Suwannee River Economic Council's Fiscal Year 2014/15 service rates

- B. Medicaid Non-Emergency Medical Transportation**

Page 23

Enclosed is information concerning Medicaid Non-Emergency Medical Transportation Program

- C. Operations Reports**

Page 31

III. OTHER BUSINESS

A. Comments

- 1. Members**
- 2. Citizens**

IV. FUTURE MEETING DATES

- A. September 22, 2014 at 1:00 p.m.**
- B. November 17, 2014 at 1:00 p.m.**

* Please note that this is a tentative meeting schedule, all dates and times are subject to change.

If you have any questions concerning the enclosed materials, please do not hesitate to contact me at 1-800-226-0690, extension 110.

**LAFAYETTE COUNTY
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

MEMBER/REPRESENTING	ALTERNATE/REPRESENTING
Commissioner Donnie Hamlin Local Elected Official/Chair	Not Applicable
Sandra Collins Florida Department of Transportation	Janell Damato Florida Department of Transportation
Kay Tice Florida Department of Children and Families	Vacant Florida Department of Children and Families
Vacant Florida Department of Education	Vacant Florida Department of Education
Vacant Florida Department of Elder Affairs	Vacant Florida Department of Elder Affairs
Alana McKay Florida Agency for Health Care Administration	Andrew Singer Florida Agency for Health Care Administration
Sheryl Rehberg Regional Workforce Board	Vacant Regional Workforce Board
Ricky Lyons Florida Association for Community Action Term ending June 30, 2014	Vacant Florida Association for Community Action Term ending June 30, 2014
Ritchie Page Public Education	Vacant Public Education
Carlton Black Veterans Term ending June 30, 2014	Vacant Veterans Term ending June 30, 2014
Cindy Morgan, Vice-Chair Citizen Advocate Term ending June 30, 2015	Vacant Citizen Advocate Term ending June 30, 2015
Vacant Citizen Advocate - User Term ending June 30, 2015	Vacant Citizen Advocate - User Term ending June 30, 2015
Vacant Persons with Disabilities Term ending June 30, 2015	Vacant Persons with Disabilities Term ending June 30, 2015
Martha Humphries Elderly Term ending June 30, 2014	Vacant Elderly Term ending June 30, 2014
Ginger Calhoun Medical Community Term ending June 30, 2016	Vacant Medical Community Term ending June 30, 2016
Vacant Children at Risk Term ending June 30, 2016	Vacant Children at Risk Term ending June 30, 2016
Vacant Private Transit Term ending June 30, 2016	Vacant Private Transit Term ending June 30, 2016

Note: Unless specified, members and alternates serve at the pleasure of the North Central Florida Regional Planning Council.

**LAFAYETTE COUNTY
TRANSPORTATION DISADVANTAGED COORDINATING BOARD
MEETING MINUTES**

Meeting Room
Suwannee River Economic Council
Mayo, Florida

Monday
March 24, 2014
1:00 p.m.

VOTING MEMBERS PRESENT

Commissioner Donnie Hamlin, Chairman
Carlton Black, Veterans Representative
Martha Humphries, Elderly Representative
Anthony Jennings representing Sheryl Rehberg, Workforce Development Board Representative
Ricky Lyons, Florida Association for Community Action Representative
Richie Page, Public Education Representative
Kay Tice, Florida Department of Children and Families Representative

VOTING MEMBERS ABSENT

Ginger Calhoun, Medical Community Representative
Sandra Collins, Florida Department of Transportation Representative
Alana McKay, Florida Agency for Health Care Administration Medicaid Representative
Cindy Morgan, Citizen Advocate

OTHERS PRESENT

Chuck Hewett, Suwannee River Economic Council
Matthew Pearson, Suwannee River Economic Council

STAFF PRESENT

Lynn Godfrey, North Central Florida Regional Planning Council

I. PUBLIC HEARING CALL TO ORDER

Chairman Hamlin called the public hearing to order at 1:00 p.m.

A. Pledge of Allegiance

Chairman Hamlin led the Board in reciting the Pledge of Allegiance.

B. Invocation

Mr. Ricky Lyons gave the invocation.

C. Introductions

Chairman Hamlin asked everyone to introduce themselves.

D. Receive Public Testimony

There was no public testimony received.

E. Close Public Hearing

Chairman Hamlin closed the public hearing at 1:01 p.m.

II. BUSINESS MEETING CALL TO ORDER

Chairman Hamlin called the meeting to order at 1:02 p.m.

A. Introductions

Chairman Hamlin asked everyone to introduce themselves.

B. Approval of the Meeting Agenda

ACTION: Martha Humphries moved to approve the meeting agenda. Carlton Black seconded; motion passed unanimously.

C. Approval of the November 18, 2013 Meeting Minutes

ACTION: Ricky Lyons moved to approve the November 18, 2013 meeting minutes. Martha Humphries seconded; motion passed unanimously.

III. NEW BUSINESS

A. Lafayette County Transportation Disadvantaged Service Plan

Ms. Godfrey stated that Chapter 427, Florida Statutes requires Suwannee River Economic Council to prepare a Transportation Disadvantaged Service Plan in cooperation with the North Central Florida Regional Planning Council for the Board's approval. She said this plan provides information needed by the Board to continually review and assess transportation disadvantaged needs for the service area. She said the Service Plan must be submitted to the Florida Commission for the Transportation Disadvantaged annually.

The Board reviewed the Lafayette County Transportation Disadvantaged Service Plan.

Mr. Matthew Pearson, Suwannee River Economic Council Executive Director, explained that, with the Medicaid Program changes occurring on May 1, 2014, the rates charged for other transportation services will change. He said Suwannee River Economic Council will provide the Board with the proposed rates for Fiscal Year 2014/15 at the next meeting.

ACTION: Kay Tice moved to approve the Lafayette County Transportation Disadvantaged Service Plan. Carlton Black seconded; motion passed unanimously.

B. Florida's Managed Medical Assistance Program

Mr. Pearson stated that, beginning May 1, 2014, the majority of Medicaid non-emergency transportation services will be provided through four Health Maintenance Organizations in Medicaid Region 3. He explained that the Health Maintenance Organizations have contracted with three Transportation Management Organizations to broker Medicaid transportation services.

Mr. Pearson explained that this change may eliminate the cost savings of coordinating transportation services. He said by the next Board meeting, he will know more how this change will affect the provision and cost of providing transportation services in Lafayette County.

Mr. Pearson stated that the Suwannee River Economic Council Board of Directors will sign agreements with the Transportation Management Organizations to provide Medicaid transportation services. However, he said the Board of Directors will cancel those agreements if providing Medicaid transportation services is a financial burden to the agency.

C. Operations Reports

The Board reviewed the operations reports.

IV. OTHER BUSINESS

A. Comments

1. Members

There were no member comments.

2. Citizens

There were no citizen comments.

V. FUTURE MEETING DATES

Chairman Hamlin stated that the next Board meeting will be held Monday, June 23, 2014 at 1:00 p.m.

ADJOURNMENT

The meeting adjourned at 1:30 p.m.

Chair

Date



2009 NW 67th Place, Gainesville, FL 32653-1603 • 352.955.2200

June 23, 2014

TO: Lafayette County Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Lafayette County Transportation Disadvantaged Service Plan Amendment

STAFF RECOMMENDATION

Approve Suwannee River Economic Council's Fiscal Year 2014/15 service rates as an amendment to the Lafayette County Transportation Disadvantaged Service Plan amendment.

BACKGROUND

The Lafayette County Transportation Disadvantaged Service Plan includes the rates charged for Transportation Disadvantaged and Medicaid Non-Emergency Medical Transportation Program sponsored services. Enclosed are Suwannee River Economic Council's proposed Fiscal Year 2014/15 service rates.

If you have any questions concerning this matter, please do not hesitate to contact me.

Attachment

t:\lynn\td2014\lafayette\memos\tdspamendrates.docx

Appendix B: Cost/Revenue Allocation and Rate Structure Justification

COMMUNITY TRANSPORTATION COORDINATOR: Suwannee River Economic Council, Inc.

COUNTY: Lafayette

CONTRACT PERIOD: July 1, 2014 - June 30, 2015

PURCHASING AGENCY: Florida Commission for the Transportation Disadvantaged

PROGRAM/SERVICE TYPE	COST PER PASSENGER MILE
Transportation Disadvantaged Program Ambulatory	\$1.63 \$1.84/passenger mile
Transportation Disadvantaged Wheelchair	\$2.79 \$3.16/passenger mile
Transportation Disadvantaged Program Stretcher	\$5.82 \$6.59/passenger mile
Medicaid Non-Emergency Transportation Program Ambulatory	\$2.34/passenger mile
Medicaid Non-Emergency Transportation Program Wheelchair	\$4.02/passenger mile
Medicaid Non-Emergency Transportation Program Stretcher	\$8.37/passenger mile

Preliminary Information Worksheet

Version 1.4

CTC Name: Suwannee River Economic Council, Inc.

County (Service Area): Lafayette

Contact Person: Matt Pearson

Phone # 386-362-4115

Check Applicable Characteristic:

ORGANIZATIONAL TYPE:

☐

Governmental

☒

Private Non-Profit

☐

Private For Profit

NETWORK TYPE:

☐

Fully Brokered

☒

Partially Brokered

☐

Sole Source

*Once completed, proceed to the Worksheet entitled
"Comprehensive Budget"*

Comprehensive Budget Worksheet

Version 1.4

CTC: Suwannee River Economic Council, Inc.
County: Lafayette

1. Complete applicable GREEN cells in columns 2, 3, 4, and 7

	Prior Year's ACTUALS from July 1st of 2012 to June 30th of 2013	Current Year's APPROVED Budget, as amended from July 1st of 2013 to June 30th of 2014	Upcoming Year's PROPOSED Budget from July 1st of 2014 to June 30th of 2015	% Change from Prior Year to Current Year	Proposed % Change from Current Year to Upcoming Year	Confirm whether revenues are collected as a system subsidy VS a purchase of service at a unit price Explain Changes in Column 6 That Are > ± 10% and Also > ± \$50,000
1	2	3	4	5	6	7

REVENUES (CTC/Operators ONLY / Do NOT include coordination contractors!)

Local Non-Govt

Farebox	\$ 868	\$ 742	\$ -	-23.3%	-100.0%	
Medicaid Co-Pay Received						
Donations/Contributions						
In-Kind, Contributed Services						
Other	\$ 21,553	\$ 87,674	\$ 15,782	308.8%	-82.0%	
Bus Pass Program Revenue						

Local Government

District School Board						
Compl. ADA Services						
County Cash						
County In-Kind, Contributed Services						
City Cash						
City In-Kind, Contributed Services						
Other Cash						
Other In-Kind, Contributed Services						
Bus Pass Program Revenue						

CTD

Non-Spons. Trip Program	\$ 119,040	\$ 126,946	\$ 142,038	6.1%	11.9%	
Non-Spons. Capital Equipment						
Rural Capital Equipment	\$ 55,378	\$ 59,400		7.3%	-100.0%	
Other TD (specify in explanation)						
Bus Pass Program Revenue						

USDOT & FDOT

49 USC 5307		\$ 59,400			-100.0%	
49 USC 5310						
49 USC 5311 (Operating)	\$ 79,443	\$ 50,700	\$ 52,000	-36.2%	2.6%	
49 USC 5311(Capital)						
Block Grant						
Service Development						
Commuter Assistance						
Other DOT (specify in explanation)						
Bus Pass Program Revenue						

AHCA

Medicaid	\$ 70,174	\$ 86,116	\$ 8,820	-5.8%	-86.7%	Other AHCA = HMO Medicaid
Other AHCA (specify in explanation)			\$ 23,748			
Bus Pass Program Revenue						

DCF

Alcohol, Drug & Mental Health						
Family Safety & Preservation						
Comm. Care Dis./Aging & Adult Serv.						
Other DCF (specify in explanation)						
Bus Pass Program Revenue						

DOH

Children Medical Services						
County Public Health						
Other DOH (specify in explanation)						
Bus Pass Program Revenue						

DOE (state)

Carl Perkins						
Div of Blind Services						
Vocational Rehabilitation						
Day Care Programs						
Other DOE (specify in explanation)						
Bus Pass Program Revenue						

AWI

WAGES/Workforce Board						
Other AWI (specify in explanation)						
Bus Pass Program Revenue						

DOEA

Older Americans Act	\$ 4,512	\$ 2,000	\$ 2,000	-55.7%	0.0%	
Community Care for Elderly						
Other DOEA (specify in explanation)						
Bus Pass Program Revenue						

DCA

Community Services						
Other DCA (specify in explanation)						
Bus Pass Admin. Revenue						

Comprehensive Budget Worksheet

Version 1.4

CTC: Suwannee River Economic Council, Inc.
County: Lafayette

1. Complete applicable **GREEN** cells in columns 2, 3, 4, and 7

	Prior Year's ACTUALS from July 1st of 2012 to June 30th of 2013	Current Year's APPROVED Budget, as amended from July 1st of 2013 to June 30th of 2014	Upcoming Year's PROPOSED Budget from July 1st of 2014 to June 30th of 2015	% Change from Prior Year to Current Year	Proposed % Change from Current Year to Upcoming Year	Confirm whether revenues are collected as a system subsidy VS a purchase of service at a unit price. Explain Changes in Column 6 That Are > ± 10% and Also > ± \$50,000
1	2	3	4	5	6	7

APD

Office of Disability Determination
Developmental Services
Other APD (specify in explanation)
Bus Pass Program Revenue

DJJ

(specify in explanation)
Bus Pass Program Revenue

Other Fed or State

XXX
XXX
XXX
Bus Pass Program Revenue

Other Revenues

Interest Earnings
XXXXX
XXXXX
Bus Pass Program Revenue

Balancing Revenue to Prevent Deficit

Actual or Planned Use of Cash Reserve

Balancing Revenue is Short By =

Total Revenues = \$351,668 \$452,980 \$244,388 28.8% -46.0%

EXPENDITURES (CTC/Operators ONLY / Do NOT include Coordination Contractors!)

Operating Expenditures

Labor	\$ 88,678	\$ 101,663	\$ 91,004	14.6%	-10.5%
Fringe Benefits	\$ 49,609	\$ 58,540	\$ 49,800	18.0%	-14.9%
Services	\$ 9,873	\$ 18,500	\$ 10,150	87.4%	-45.1%
Materials and Supplies	\$ 42,721	\$ 58,900	\$ 44,600	37.9%	-24.3%
Utilities	\$ 5,202	\$ 12,350	\$ 5,400	137.4%	-56.3%
Casualty and Liability	\$ 9,753	\$ 12,626	\$ 10,775	29.5%	-14.7%
Taxes	\$ 150	\$ 200	\$ 177	33.3%	-11.5%

Purchased Transportation:

Purchased Bus Pass Expenses					
School Bus Utilization Expenses					
Contracted Transportation Services					
Other	\$ 2,076	\$ 20,000	\$ 5,400	863.4%	-73.0%
Miscellaneous	\$ 461	\$ 254	\$ 500	-44.9%	96.9%

Operating Debt Service - Principal & Interest

Leases and Rentals	\$ 10,729	\$ 11,452	\$ 10,800	6.7%	-5.7%
Contrib. to Capital Equip. Replacement Fund					
In-Kind, Contributed Services	\$ -	\$ -	\$ -		
Allocated Indirect	\$ 19,448	\$ 26,493	\$ 15,782	36.2%	-40.4%

Capital Expenditures

Equip. Purchases with Grant Funds	\$ 66,000	\$ 132,000		100.0%	-100.0%
Equip. Purchases with Local Revenue					
Equip. Purchases with Rate Generated Rev.					
Capital Debt Service - Principal & Interest					

ACTUAL YEAR GAIN

Total Expenditures = \$304,700 \$452,980 \$244,388 48.7% -46.0%

See NOTES Below.

Once completed, proceed to the Worksheet entitled "Budgeted Rate Base"

ACTUAL year GAIN (program revenue) MUST be reinvested as a trip or system subsidy. Adjustments must be identified and explained in a following year, or applied as a Rate Base Adjustment to proposed year's rates on the next sheet.

Budgeted Rate Base Worksheet

Version 1.4

CTC: Suwannee River Economic Council, Inc.

County: Lafayette

1. Complete applicable **GREEN** cells in column 3; **YELLOW** and **BLUE** cells are automatically completed in column 3
2. Complete applicable **GOLD** cells in column and 5

	Upcoming Year's BUDGETED Revenues from July 1st of 2014 to June 30th of 2015	What amount of the Budgeted Revenue in col. 2 will be generated at the rate per unit determined by this spreadsheet, OR used as local match for these type revenues?	Budgeted Rate Subsidy Revenue EXCLUDED from the Rate Base	What amount of the Subsidy Revenue in col. 4 will come from funds to purchase equipment, OR will be used as match for the purchase of equipment?
1	2	3	4	5

REVENUES (CTC/Operators ONLY)

Local Non-Govt

Farebox	\$ -
Medicaid Co-Pay Received	\$ -
Donations/ Contributions	\$ -
In-Kind, Contributed Services	\$ -
Other	\$ 15,782
Bus Pass Program Revenue	\$ -

Local Government

District School Board	\$ -
Compl. ADA Services	\$ -
County Cash	\$ -
County In-Kind, Contributed Services	\$ -
City Cash	\$ -
City In-Kind, Contributed Services	\$ -
Other Cash	\$ -
Other In-Kind, Contributed Services	\$ -
Bus Pass Program Revenue	\$ -

CTD

Non-Spons. Trip Program	\$ 142,038
Non-Spons. Capital Equipment	\$ -
Rural Capital Equipment	\$ -
Other TD	\$ -
Bus Pass Program Revenue	\$ -

USDOT & FDOT

49 USC 5307	\$ -
49 USC 5310	\$ -
49 USC 5311 (Operating)	\$ 52,000
49 USC 5311(Capital)	\$ -
Block Grant	\$ -
Service Development	\$ -
Commuter Assistance	\$ -
Other DOT	\$ -
Bus Pass Program Revenue	\$ -

AHCA

Medicaid	\$ 8,820
Other AHCA	\$ 23,748
Bus Pass Program Revenue	\$ -

DCF

Alcohol, Drug & Mental Health	\$ -
Family Safety & Preservation	\$ -
Comm. Care Dis./Aging & Adult Serv	\$ -
Other DCF	\$ -
Bus Pass Program Revenue	\$ -

DOH

Children Medical Services	\$ -
County Public Health	\$ -
Other DOH	\$ -
Bus Pass Program Revenue	\$ -

DOE (state)

Carl Perkins	\$ -
Div of Blind Services	\$ -
Vocational Rehabilitation	\$ -
Day Care Programs	\$ -
Other DOE	\$ -
Bus Pass Program Revenue	\$ -

AWI

WAGES/Workforce Board	\$ -
AWI	\$ -
Bus Pass Program Revenue	\$ -

DOEA

Older Americans Act	\$ 2,000
Community Care for Elderly	\$ -
Other DOEA	\$ -
Bus Pass Program Revenue	\$ -

DCA

Community Services	\$ -
Other DCA	\$ -
Bus Pass Program Revenue	\$ -

\$ -	\$ -
\$ -	\$ -
\$ -	\$ -
\$ 15,782	\$ -
\$ -	\$ -

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\$ 142,038	\$ -
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\$ 52,000	\$ -
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\$ 8,820	\$ -
\$ 23,748	\$ -
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\$ -	\$ -

\$ 2,000	\$ -
\$ -	\$ -
\$ -	\$ -
\$ -	\$ -

\$ -	\$ -
\$ -	\$ -
\$ -	\$ -

YELLOW cells
are **NEVER** Generated by Applying Authorized Rates

BLUE cells
Should be funds generated by rates in this spreadsheet

local match req

\$ 15,782
\$ -
\$ -

GREEN cells
MAY BE Revenue Generated by Applying
Authorized Rate per Mile/Trip Charges

Fill in that portion of budgeted revenue in Column 2 that will be **GENERATED** through the application of authorized per mile, per trip, or combination per trip plus per mile rates. Also, include the amount of funds that are Earmarked as local match for Transportation Services and **NOT** Capital Equipment purchases.

If the Farebox Revenues are used as a source of Local Match Dollars, then identify the appropriate amount of Farebox Revenue that represents the portion of Local Match required on any state or federal grants. This does not mean that Farebox is the only source for Local Match.

Please review all Grant Applications and Agreements containing State and/or Federal funds for the proper Match Requirement levels and allowed sources.

GOLD cells

Fill in that portion of Budgeted Rate Subsidy Revenue in Column 4 that will come from Funds Earmarked by the Funding Source for Purchasing Capital Equipment. Also include the portion of Local Funds earmarked as Match related to the **Purchase of Capital Equipment** if a match amount is required by the Funding Source.

County: Lafayette

- | | | |
|---|---|--|
| <p>What amount of the <u>Subsidy Revenue</u> in col. 2 will be generated at the rate per unit determined by this spreadsheet, OR used as local match for these type revenues?</p> | <p>Budgeted Rate
<u>Subsidy Revenue</u>
Excluded from the Rate Base</p> | <p>What amount of the <u>Subsidy Revenue</u> in col. 4 will come from funds to purchase equipment, OR will be used as match for the purchase of equipment?</p> |
| <p>3</p> | <p>4</p> | <p>5</p> |

[illegible]

If necessary and justified, this cell is where you could optionally adjust proposed service rates up or down to adjust for program revenue (or unapproved profit), or losses from the Actual period shown at the bottom of the Comprehensive Budget Sheet. This is not the only acceptable location or method of reconciling for excess gains or losses. If allowed by the respective funding sources, excess gains may also be adjusted by providing system subsidy revenue or by the purchase of additional services at a price below the Actual period. If such an adjustment has been made, provide notation in the respective explanation area of the Comprehensive Budget tab.

Once Completed, Proceed to the Worksheet entitled "Program-wide Rates"

Worksheet for Program-wide Rates

CTC: Suwannee River Et Version 1.4
County: Lafayette

1. Complete Total Projected Passenger Miles and ONE-WAY Passenger Trips (**GREEN** cells) below

Do **NOT** include trips or miles related to Coordination Contractors!

Do **NOT** include School Board trips or miles UNLESS.....

INCLUDE all ONE-WAY passenger trips and passenger miles related to services you purchased from your transportation operators!

Do **NOT** include trips or miles for services provided to the general public/private pay UNLESS..

Do **NOT** include escort activity as passenger trips or passenger miles unless charged the full rate for service!

Do **NOT** include fixed route bus program trips or passenger miles!

PROGRAM-WIDE RATES

Total Projected Passenger Miles = 96,000

Rate Per Passenger Mile = \$ 2.00

Total Projected Passenger Trips = 4,100

Rate Per Passenger Trip = \$ 46.92

Fiscal Year

2014 - 2015

Avg. Passenger Trip Length = 23.4 Miles

Rates If No Revenue Funds Were Identified As Subsidy Funds

Rate Per Passenger Mile = \$ 2.55

Rate Per Passenger Trip = \$ 59.61

Once Completed, Proceed to the Worksheet entitled "Multiple Service Rates"

Vehicle Miles

The miles that a vehicle is scheduled to or actually travels from the time it pulls out from its garage to go into revenue service to the time it pulls in from revenue service.

Vehicle Revenue Miles (VRM)

The miles that vehicles are scheduled to or actually travel while in revenue service. Vehicle revenue miles exclude:

Deadhead
Operator training, and
Vehicle maintenance testing, as well as
School bus and charter services.

Passenger Miles (PM)

The cumulative sum of the distances ridden by each passenger.

Worksheet for Multiple Service Rates

CTC: Suwannee River Version 1.4
County: Lafayette

1. Answer the questions by completing the GREEN cells starting in Section I for all services
2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers

SECTION I: Services Provided

1. Will the CTC be providing any of these Services to transportation disadvantaged passengers in the upcoming budget year?

Ambulatory	Wheelchair	Stretcher	Group
<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes	<input type="radio"/> Yes
<input type="radio"/> No	<input type="radio"/> No	<input type="radio"/> No	<input checked="" type="radio"/> No
Go to Section II for Ambulatory Service	Go to Section II for Wheelchair Service	Go to Section II for Stretcher Service	STOP! Do NOT Complete Sections II - V for Group Service

SECTION II: Contracted Services

1. Will the CTC be contracting out any of these Services TOTALLY in the upcoming budget year?

Ambulatory	Wheelchair	Stretcher	Group
<input type="radio"/> Yes	<input type="radio"/> Yes	<input checked="" type="radio"/> Yes	<input type="radio"/> Yes
<input checked="" type="radio"/> No	<input checked="" type="radio"/> No	<input type="radio"/> No	<input checked="" type="radio"/> No
Skip # 2, 3 & 4 and Go to Section III for Ambulatory Service	Skip # 2, 3 & 4 and Go to Section III for Wheelchair Service	Answer # 2 for Stretcher Service	Do Not Complete Section II for Group Service

2. If you answered YES to #1 above, do you want to arrive at the billing rate by simply dividing the proposed contract amount by the projected Passenger Miles / passenger trips?

Ambulatory	Wheelchair	Stretcher	Group
<input type="radio"/> Yes	<input type="radio"/> Yes	<input type="radio"/> Yes	<input type="radio"/> Yes
<input checked="" type="radio"/> No	<input checked="" type="radio"/> No	<input checked="" type="radio"/> No	<input checked="" type="radio"/> No

3. If you answered YES to #1 & #2 above, how much is the proposed contract amount for the service?
How many of the total projected Passenger Miles relate to the contracted service?
How many of the total projected passenger trips relate to the contracted service?

Ambulatory	Wheelchair	Stretcher	Group
Leave Blank	Leave Blank	Leave Blank	Do NOT Complete Section II for Group Service

Effective Rate for Contracted Services:
per Passenger Mile =
per Passenger Trip =

Ambulatory	Wheelchair	Stretcher	Group
Go to Section III for Ambulatory Service	Go to Section III for Wheelchair Service	Go to Section III for Stretcher Service	Do NOT Complete Section II for Group Service

4. If you answered # 3 & want a Combined Rate per Trip PLUS a per Mile add-on for 1 or more services, INPUT the Desired per Trip Rate (but must be less than per trip rate in #3 above) =
Rate per Passenger Mile for Balance =

Combination Trip and Mile Rate			
Leave Blank and Go to Section III for Ambulatory Service	Leave Blank and Go to Section III for Wheelchair Service	Leave Blank and Go to Section III for Stretcher Service	Do NOT Complete Section II for Group Service

Worksheet for Multiple Service Rates

CTC: Suwannee River Version 1.4
County: Lafayette

1. Answer the questions by completing the GREEN cells starting in Section I for all services

2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers

SECTION III: Escort Service

1. Do you want to charge all escorts a fee?

☐ Yes
☒ No

Skip #2 - 4 and
Section IV and
Go to Section V.

2. If you answered Yes to #1, do you want to charge the fee per passenger trip OR

☒ Pass Trip
☐ Pass Mile

Leave Blank

per passenger mile?

3. If you answered Yes to #1 and completed #2, for how many of the projected
Passenger Trips / Passenger Miles will a passenger be accompanied by an escort?

Leave Blank

4. How much will you charge each escort?

Leave Blank

SECTION IV: Group Service Loading

1. If the message "You Must Complete This Section" appears to the right, what is the projected total
number of Group Service Passenger Miles? (otherwise leave blank)

Do NOT
Complete
Section IV

..... And what is the projected total number of Group Vehicle Revenue Miles?

Loading Rate
0.00 to 1.00

SECTION V: Rate Calculations for Multiple Services:

1. Input Projected Passenger Miles and Passenger Trips for each Service in the GREEN cells and the Rates for each Service will be calculated automatically

* Miles and Trips you input must sum to the total for all Services entered on the "Program-wide Rates" Worksheet, MINUS miles

and trips for contracted services IF the rates were calculated in the Section II above

* Be sure to leave the service BLANK if you answered NO in Section I or YES to question #2 in Section II

Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 96,000

Rate per Passenger Mile =

RATES FOR FY: 2014 - 2015				
Ambul	Wheel Chair	Stretcher	Group	
87,000	8,000	1,000	Leave Blank	
\$1.84	\$3.16	\$6.59	\$0.00	\$0.00
			per passenger	per group

Projected Passenger Trips (excluding totally contracted services addressed in Section II) = 4,100

Rate per Passenger Trip =

Ambul	Wheel Chair	Stretcher	Group	
3,700	390	10	Leave Blank	
\$43.68	\$74.88	\$156.01	\$0.00	\$0.00
			per passenger	per group

2. If you answered #1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services,...

INPUT the Desired Rate per Trip (but must be less than per trip rate above) =

Rate per Passenger Mile for Balance =

Combination Trip and Mile Rate				
Ambul	Wheel Chair	Stretcher	Group	
			Leave Blank	
\$1.84	\$3.16	\$6.59	\$0.00	\$0.00
			per passenger	per group

Rate per Passenger Mile =

Rate per Passenger Trip =

Rates if No Revenue Funds Were Identified As Subsidy Funds				
Ambul	Wheel Chair	Stretcher	Group	
\$2.34	\$4.02	\$8.37	\$0.00	\$0.00
			per passenger	per group
Ambul	Wheel Chair	Stretcher	Group	
\$55.49	\$96.12	\$198.17	\$0.00	\$0.00
			per passenger	per group

Program These Rates into Your Medicaid Encounter Data



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2009 NW 67th Place, Gainesville, FL 32653-1603 • 352.955.2200

June 23, 2014

TO: Lafayette County Transportation Disadvantaged Coordinating Board
FROM: Lynn Godfrey, AICP, Senior Planner
SUBJECT: Medicaid Non-Emergency Medical Transportation Program

RECOMMENDATION

For information only. No action is required.

BACKGROUND

Attached information concerning the Medicaid Non-Emergency Medical Transportation Program.

Please do not hesitate to contact me if you have any questions.

Attachment

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Transportation Service Requirements in the Managed Medical Assistance Program

Overview

The Statewide Medicaid Managed Care (SMMC) program consists of two components: the Managed Medical Assistance (MMA) program and the Long-term Care (LTC) program. The MMA program provides medical services to infants, children and adults on Medicaid, while the LTC program provides nursing facility and home and community-based services to adults who meet nursing home level of care.

MMA plans¹ are required to provide transportation services, including emergency transportation, to their enrollees who have no other means of transportation available to any covered service. This document provides an overview of the transportation requirements for the MMA program and the expectations established by contract for MMA plans and transportation providers.

Contract Language

Attachment II, Section V. D.3.f., Managing Mixed Services

Managed Care Plans shall provide non-emergency transportation (NET) services to enrollees with both MMA benefits and LTC benefits as follows:

- (1) MMA Managed Care Plans shall provide NET to all MMA benefits.*
- (2) LTC Managed Care Plans shall provide NET to all LTC benefits.*
- (3) Comprehensive LTC Managed Care Plans shall provide NET to enrollees with both MMA and LTC benefits, and provide NET to [sic] all MMA benefits for enrollees with only MMA benefits.*

Attachment II, Exhibit II-A, Section V.A.28., Transportation Services

The Managed Care Plan shall provide transportation services, including emergency transportation, for its enrollees who have no other means of transportation available to any covered service, including enhanced benefits.

The Managed Care Plan shall comply with provisions of the Medicaid Transportation Services Coverage and Limitations Handbooks. In any instance when compliance conflicts with the terms of this Contract, the Contract prevails. In no instance may the limitations or exclusions imposed by the Managed Care Plan be more stringent than those in the Medicaid Transportation Services Coverage and Limitations Handbooks.

The Managed Care Plan is not obligated to follow the requirements of the Commission for the Transportation Disadvantaged (CTD) or the Transportation Coordinating Boards as set forth in Chapter 427, F.S., unless the Managed Care Plan has chosen to coordinate services with the CTD.

¹ Includes Comprehensive Long-term Care Plans

The Managed Care Plan may provide transportation services directly through its own network of transportation providers or through a provider contract relationship, which may include the Commission for the Transportation Disadvantaged. In either case, the Managed Care Plan is responsible for monitoring provision of services to its enrollees.

The Managed Care Plan shall ensure transportation services meet the needs of its enrollees including use of multiload vehicles, public transportation, wheelchair vehicles, stretcher vehicles, private volunteer transport, over-the-road bus service, or, where applicable, commercial air carrier transport;

The Managed Care Plan shall be responsible for the cost of transporting an enrollee from a non-participating facility or hospital to a participating facility or hospital if the reason for transport is solely for the Managed Care Plan's convenience.

The Managed Care Plan shall approve and process claims for transportation services in accordance with the requirements set forth in this Contract.

The Managed Care Plan shall establish a minimum twenty-four (24) hour advance notification policy to obtain transportation services, and the Managed Care Plan shall communicate that policy to its enrollees and transportation providers.

The Managed Care Plan shall establish enrollee pick-up windows and communicate those timeframes to enrollees and transportation providers.

Managed Medical Assistance (MMA) Plans' Responsibilities

Continuity of Care Period

- The continuity of care period is defined as: a period of 60 days after the effective date of enrollment, or until the enrollee's primary care provider or behavioral health provider (as applicable to medical care or behavioral health care services, respectively) reviews the enrollee's treatment plan, whichever comes first. This period is in effect during both the initial implementation of the MMA program and for any new enrollments in a plan after implementation.

Coordination of Care

- MMA plans are responsible for providing non-emergency transportation (NET) to all enrollees who have no other means of transportation to any covered service including expanded benefits.
- MMA plans are required to ensure that the mode of transportation provided to each enrollee is most appropriate to meet the enrollee's needs (e.g., a wheelchair vehicle versus public transportation).
- MMA plans are required to ensure that enrollees receive NET services safely, by complying with the provisions of Attachment II, Exhibit II-A, Section V.A.28.(e).

Authorization Requirements

- MMA plans are required to cover any NET services that were **previously authorized or prescheduled prior to the enrollee's enrollment in the plan** with the recipient's existing NET provider during the continuity of care period, even if that provider does not participate in the plan's network. (Providers that are not enrolled in a plan's network are sometimes referred to as "non-participating" providers.)
- If NET services were previously authorized, the MMA plan may not require additional authorization in order for the enrollee to obtain the service. However, the plan may require the NET provider to submit written documentation of the prior approved or prescheduled appointment prior to the payment of any claims.
- MMA plans must establish timeframes for picking up enrollees (also referred to as the pick-up window) when NET services are requested. Pick-up window timeframes must be communicated to both the enrollee and the transportation provider.
- MMA plans are responsible for communicating any authorization requirements for NET services to its enrollees and providers. Prior authorization is not required for emergency transportation services.

Payment

- MMA plans are responsible for the costs of any NET services provided during the continuity of care period that were **authorized or prescheduled prior to the implementation of MMA** in the region. This is true whether such services are provided by participating or non-participating providers.
- For services provided in the first 30 days of the continuity of care period, the MMA plan must pay non-participating providers at the rate they received for services rendered to the enrollee immediately prior to the enrollee transitioning to MMA, unless the provider agrees to an alternative rate.
- MMA plans are responsible for approving and processing claims submitted for NET services in accordance with the requirements established in contract.
- If the MMA plan transports an enrollee from a non-participating facility to a participating facility solely for the plan's convenience, the MMA plan is responsible for paying for the cost of the transport.

Provider Responsibilities During the Continuity of Care Period

- Existing NET service providers (this includes those contracted with the Commission for Transportation Disadvantaged) should continue providing NET services to MMA enrollees during the continuity of care period for any NET services **that were previously authorized or prescheduled prior to the MMA implementation in their region**, regardless of whether the provider is participating in the plan's network.

- The NET provider should continue providing NET services to recipients through the continuity of care period or until it is contacted by the MMA plan and directed to discontinue services, whichever comes first.
- NET providers should notify the enrollee's MMA plan as soon as possible of any prior authorized or prescheduled NET trips.
- During the continuity of care period, non-participating NET providers will continue to be paid at the rate they received for services rendered to the enrollee immediately prior to the enrollee transitioning to the MMA plan for a minimum of 30 days, unless the provider agrees to an alternative rate. Providers will need to follow the process established by the managed care plans for getting these claims paid appropriately.
- NET providers may be required to submit written documentation of any prior authorized prescheduled services, along with their claim(s) in order to receive payment from the plan.

Recipient/Enrollee Responsibilities

- Enrollees are encouraged to contact their MMA plan as soon as possible to notify the plan of any prescheduled or prior approved NET services.
- For any new transportation service requests, enrollees must request NET services from the MMA plan at least 24 hours in advance of the desired trip.

Frequently Asked Questions

1. Do the MMA plans have to cover NET services that were prescheduled prior the Medicaid recipient enrolling in their plan?

Yes. If the prescheduled NET trip occurs during the continuity of care period, the MMA plan should pay for the NET service without requiring any additional authorization.

2. A Medicaid recipient is receiving an ongoing course of treatment, like dialysis, and requires non-emergency transportation multiple times per week to attend his appointments. He receives NET services through a local NET provider, but his local NET provider is not in his new MMA plan's network. How will the recipient's NET services be covered during his 60 day continuity of care period?

The non-participating NET provider should continue providing NET services to the recipient during the continuity of care period for any NET services that were previously authorized or prescheduled prior to the MMA implementation. The NET provider should check the recipient's eligibility prior to rendering services. Once the NET provider has verified that the recipient has selected a new MMA plan, the NET provider should contact the recipient's new MMA plan to notify the MMA plan of any prior authorized or prescheduled trips. During the continuity of care period, the NET provider should continue providing NET services to recipients until it is contacted by the MMA plan and directed to discontinue services.

3. A Medicaid recipient is receiving non-emergency transportation (NET) services multiple times per week for an ongoing course of treatment from his local Community Transportation Coordinator (CTC) through the Florida Commission for the Transportation Disadvantaged. The local CTC is not in his new MMA plan's network. Should the CTC provider continue providing NET services to the recipient once the recipient has transitioned to his new MMA plan?

Yes. The CTC provider (and all previously authorized transportation providers) should continue providing the recipient's NET services even after the recipient has transitioned to his MMA plan. After the first date of the regional transition to the MMA program, the CTC provider should check the recipient's eligibility. Once the CTC provider has verified that the recipient has selected a new MMA plan, the CTC provider should contact the recipient's new MMA plan or the MMA plan's transportation broker, to notify the MMA plan or broker of any prior authorized, prescheduled or upcoming trips. During the continuity of care period, the CTC provider should continue providing NET services to recipients until it is contacted by the MMA plan and directed to discontinue services.

A list of the MMA plans' transportation broker's contact information is provided below:

<i>MMA Plan</i>	<i>Transportation Appointment Phone Number</i>
<i>AHF / Positive</i>	<i>888- 997-0979</i>
<i>Amerigroup</i>	<i>866-372-9794 866-288-3133 (TTY)</i>
<i>Better</i>	<i>866-201-9970</i>
<i>Clear Health</i>	<i>866-201-9971</i>
<i>Coventry</i>	<i>866-411-8912</i>
<i>FCA</i>	<i>866-201-9967</i>
<i>Humana</i>	<i>866-779-0565</i>
<i>Integral</i>	<i>866-258-4326</i>
<i>Magellan</i>	<i>877-796-5843</i>
<i>Molina</i>	<i>866-528-0454</i>
<i>Preferred</i>	<i>866-779-0564 866-288-3133 (TTY)</i>
<i>Prestige</i>	<i>855-381-3778</i>
<i>SFCCN</i>	<i>866-306-9358</i>
<i>Simply</i>	<i>866-201-9969</i>
<i>Sunshine</i>	<i>866-790-8817</i>
<i>United</i>	<i>800-698-8457</i>
<i>Wellcare</i>	<i>866-591-4066</i>



June 23, 2014

TO: Lafayette County Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Operations Reports

RECOMMENDATION

No action required. This agenda item is for information only.

BACKGROUND

Attached are the following reports for the Board's review:

1. Quarterly Operations Report January - March 2014;
2. Fiscal Year 2013/14 Transportation Disadvantaged Trust Fund Status Report;
3. Medicaid Non-Emergency Transportation Program Encounter Data Report July 2013-April 2014;
4. Trip Denial Report January - March 2014; and
5. Complaint/Commendation Report January - March 2014.

If you have any questions regarding the attached information, please contact me.

Attachments

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**QUARTERLY OPERATING REPORT
SUWANNEE RIVER ECONOMIC COUNCIL, INC.
LAFAYETTE COUNTY
JANUARY 2014 - MARCH 2014**

OPERATING DATA	SREC	DIXIE COUNTY EMS	TOTAL	1/1/13 - 3/31/13
NUMBER OF INVOICED TRIPS	787	0	787	1,012
Medicaid	150	0	150	256
TD Trust Fund	567	0	567	627
S.R.E.C. - Title III-B Meal Site	70	0	70	129
TOTAL VEHICLE MILES	10,530	0	10,530	13,537
TOTAL REVENUE VEHICLE MILES	8,255	0	8,255	10,617
TOTAL VEHICLE HOURS	417	0	417	535
TOTAL DOLLARS INVOICED	\$58,942.19	\$0.00	\$58,942.19	\$65,259.81
Medicaid	\$17,489.31	\$0.00	\$17,489.31	\$29,875.15
TD Trust Fund	\$40,892.88	\$0.00	\$40,892.88	\$34,352.66
S.R.E.C. - Title III-B Meal Site	\$560.00	\$0.00	\$560.00	\$1,032.00
AVERAGE COST PER TRIP	\$74.89	#DIV/0!	\$74.89	\$64.49
Medicaid	\$116.60	#DIV/0!	\$116.60	\$116.70
TD Trust Fund	\$72.12	#DIV/0!	\$72.12	\$54.79
S.R.E.C. - Title III-B Meal Site	\$8.00	#DIV/0!	\$8.00	\$8.00
AVERAGE COST PER VEHICLE MILE	\$5.60	#DIV/0!	\$5.60	\$4.82
AVERAGE COST PER REVENUE VEHICLE MILE	\$7.14	#DIV/0!	\$7.14	\$6.15
AVERAGE COST PER VEHICLE HOUR	\$141.35	#DIV/0!	\$141.35	\$121.98
TRIP PURPOSE*				
Medical	717	0	717	883
Employment	0	0	0	0
Education/Training	0	0	0	0
Shopping	0	0	0	0
Meal Site	70	0	70	129
Recreation	0	0	0	0
Other	0	0	0	0
NUMBER OF TRIPS DENIED	0	0	0	0
NUMBER OF SINGLE PASSENGER TRIPS PROVIDED	47	0	47	59
PERCENT OF SINGLE PASSENGER TRIPS	6%	#DIV/0!	6%	6%
NUMBER OF ACCIDENTS	0	0	0	0
NUMBER OF VEHICLES	7	0	7	6
AVERAGE TRIPS PER VEHICLE	112	#DIV/0!	112	169
AVERAGE MILES PER TRIP	13	#DIV/0!	13	13
NUMBER OF ROADCALLS	0	0	0	0
MILES BETWEEN ROADCALLS	10,530	0	10,530	13,537

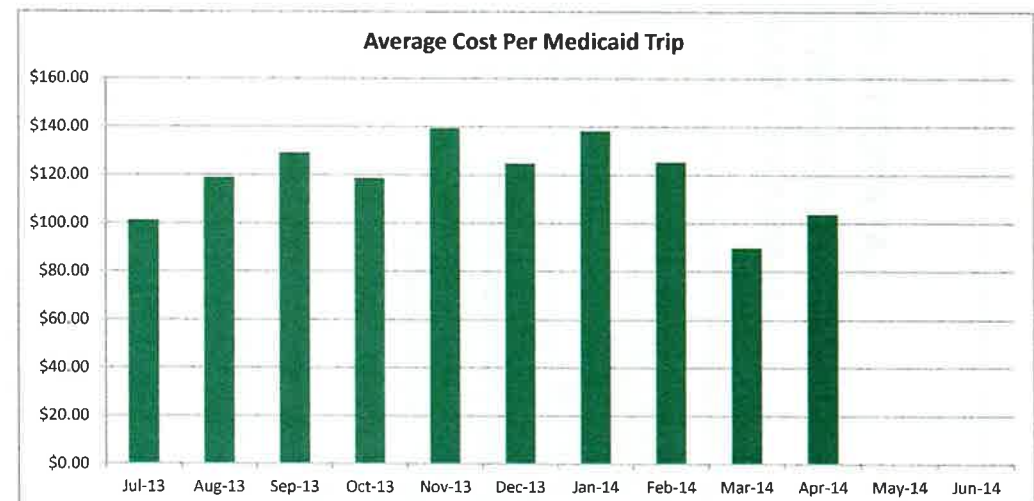
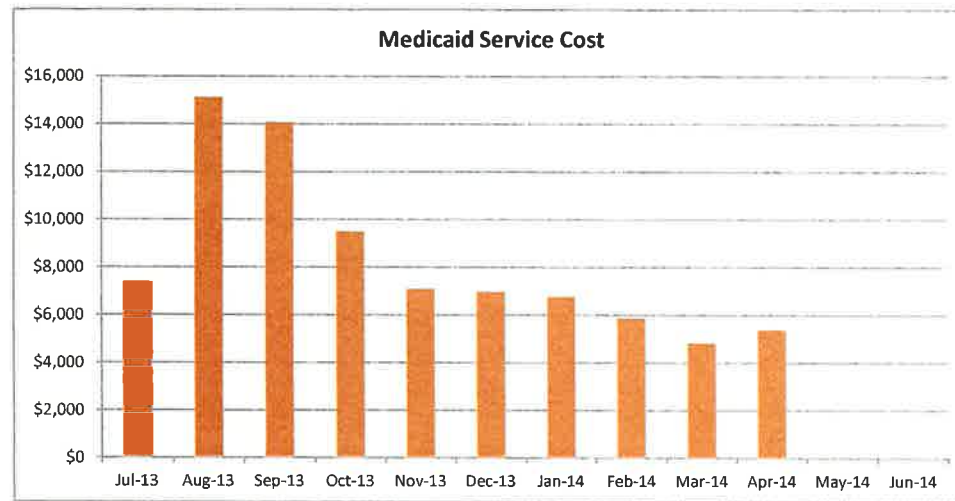
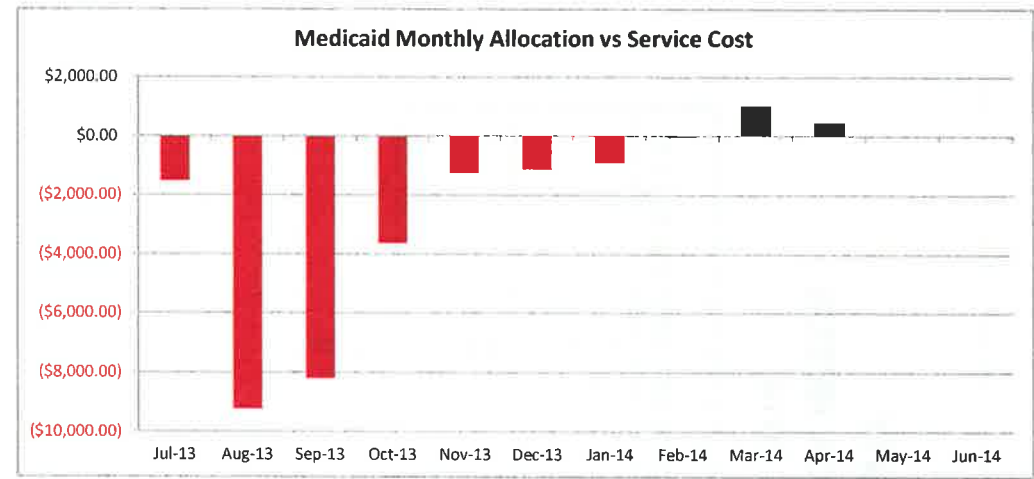
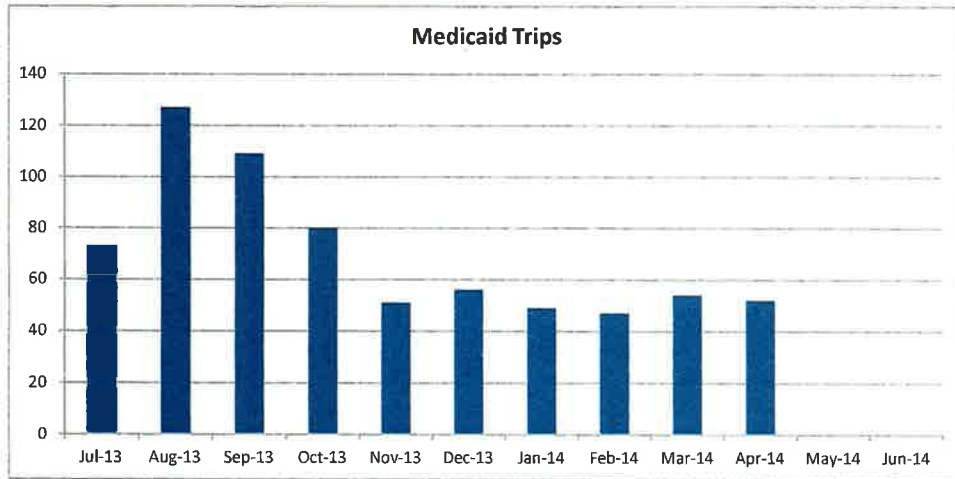
Source: Suwannee River Economic Council

**2013-2014 TRIP/EQUIPMENT GRANT SUMMARY AR183
LAFAYETTE COUNTY**

CONTRACT AMOUNT: \$157,537.00

MONTH/ YEAR	TOTAL DOLLARS SPENT	TRUST FUND (90%)	LOCAL MATCH (10%)	TOTAL AMOUNT REMAINING	NUMBER OF TRIPS	AVERAGE COST PER TRIP
Jul-13	\$13,130.64	\$11,817.58	\$1,313.06	\$144,406.36	199	\$65.98
Aug-13	\$10,108.32	\$9,097.49	\$1,010.83	\$134,298.04	157	\$64.38
Sep-13	\$11,869.68	\$10,682.71	\$1,186.97	\$122,428.36	140	\$84.78
Oct-13	\$15,899.52	\$14,309.57	\$1,589.95	\$106,528.84	173	\$91.90
Nov-13	\$7,398.72	\$6,658.85	\$739.87	\$99,130.12	102	\$72.54
Dec-13	\$14,236.32	\$12,812.69	\$1,423.63	\$84,893.80	228	\$62.44
Jan-14	\$11,642.40	\$10,478.16	\$1,164.24	\$73,251.40	157	\$74.16
Feb-14	\$16,794.96	\$15,115.46	\$1,679.50	\$56,456.44	221	\$76.00
Mar-14	\$12,455.52	\$11,209.97	\$1,245.55	\$44,000.92	189	\$65.90
Apr-14				\$44,000.92		#DIV/0!
May-14				\$44,000.92		#DIV/0!
Jun-14				\$44,000.92		#DIV/0!

**FLORIDA COMMISSION FOR THE TRANSPORTATION DISADVANTAGED
MEDICAID ENCOUNTER DATA REPORTS JULY 1, 2013 - JUNE 30, 2014
LAFAYETTE COUNTY**



Source: Florida Commission for the Transportation Disadvantaged Medicaid Encounter Data Reports

**LAFAYETTE COUNTY
UNMET TRANSPORTATION NEEDS
JANUARY - MARCH 2014**

REASON FOR TRIP DENIAL	NUMBER OF TRIP DENIALS
Lack of Funding	0
Trip Purpose	0
Out of Service Area Trip	0
Insufficient Advance Notice	0
After Hours Trip Request	0
Weekend Trip Request	0
Other	0
TOTALS	0

Source: Suwannee River Economic Council

LAFAYETTE COUNTY
SERVICE COMPLAINTS/COMMENDATIONS
JANUARY - MARCH 2014

TYPE OF COMPLAINT	TOTAL	Resolved
Vehicle Condition	0	-
Driver's Behavior	0	-
Client Behavior	0	-
Tardiness - Late pickup	0	-
Tardiness - Late dropoff	0	-
No Show by Operator	0	-
Dispatch/Scheduling	0	-
Service Denial	0	-
Other	0	-
TOTALS	0	-
COMMENDATIONS	0	-

Source: Suwannee River Economic Council

ATTENDANCE RECORD

LAFAYETTE COUNTY TRANSPORTATION DISADVANTAGED COORDINATING BOARD

MEMBER/ORGANIZATION	NAME	6/11/13	9/23/13	11/18/13	3/24/14
Chair	Commissioner Donnie Hamlin	P	P	P	P
Florida Department of Transportation Alternate Member	Sandra Collins	P	P	P	A
	Janell Damato	A	A	A	A
Florida Department of Children and Families Alternate Member	Kay Tice	P	P	P	P
	(Vacant)				
Florida Agency for Health Care Administration Alternate Member	Alana McKay	P	P	A	A
	Andrew Singer	A	A	A	A
Florida Department of Education Alternate Member	(Vacant)				
	(Vacant)				
Public Education Alternate Member	Ritchie Page	A	A	A	P
	(Vacant)				
Citizen Advocate Alternate Member	Cindy Morgan	A	P	A	A
	Rhoda Pate	A	A	A	A
Citizen Advocate-User Alternate Member	(Vacant)				
	(Vacant)				
Elderly Alternate Member	Martha Humphries	P	P	P	P
	(Vacant)				
Veterans Alternate Member	Carlton Black	P	A	P	P
	(Vacant)				
Persons with Disabilities Alternate Member	(Vacant)				
	(Vacant)				
Florida Department of Elder Affairs Alternate Member	Ricky Lyons	A	A	P	P
	(Vacant)				
Children at Risk Alternate Member	(Vacant)				
	(Vacant)				
Local Medical Community Alternate Member	Ginger Calhoun	P	A	A	A
	(Vacant)				
Regional Workforce Board Alternate Member	Sheryl Rehberg	P	P	A	Anthony Jennings
	(Vacant)				

LEGEND KEY: P-Present A-Absent - Not Applicable (newly appointed member)

ATTENDANCE POLICY: According to Article III, Section 5 of the Coordinating Board bylaws: "The North Central Florida Regional Planning Council shall review and consider rescinding the appointment of any voting member of the Board who fails to attend three consecutive meetings."

