



**HERNANDO COUNTY TRANSPORTATION DISADVANTAGED
LOCAL COORDINATING BOARD (TDLCB)**

REGULAR MEETING

Thursday, May 8, 2025, at 1:30 p.m.

MEETING LOCATION: Hernando County Building Training Facility, 1661 Blaise Drive, Brooksville, FL

AGENDA - Revised

A. CALL TO ORDER

1. Moment of Silence
2. Pledge of Allegiance
3. Introduction of Board Members and Staff
4. Declaration of Quorum
5. Enter Proof of Publication into the Record

B. APPROVAL/MODIFICATION OF AGENDA (Limited to Board and Staff comment only)

C. REVIEW/APPROVAL OF MINUTES

1. February 13, 2025, TDLCB Annual Public Workshop
2. February 13, 2025, TDLCB Regular Public Meeting

D. ACTION ITEMS

1. Review and Approval of the Annual Evaluation of the Community Transportation Coordinator (CTC)
2. Review and Comment on the Innovative Service Development (ISD) Grant Application by the Community Transportation Coordinator (CTC)
3. Review and Ratification of the Shirley Conroy Grant Application by the Community Transportation Coordinator (CTC)
4. Review and Approval of the FY 2026 Rate Calculation for Services

E. REPORTS

Quarterly Report for January 1 through March 31, 2025, by the Community Transportation Coordinator (CTC) Agency – Jeff Cottrell, You Thrive Florida

F. FEATURE PRESENTATION

1. Darlene Lollie, Transit Administrator for Hernando County's TheBus
2. Casey Ladd, Florida Department of Elder Affairs

G. CITIZEN COMMENTS

H. BOARD MEMBER COMMENTS

I. MPO STAFF COMMENTS

J. ADJOURNMENT AND NEXT MEETING – The next regular meeting of the Hernando County Transportation Disadvantaged Local Coordinating Board (TDLCB) is scheduled for Thursday, September 11, 2025, beginning at 1:30 p.m., at the Hernando County Building Training Facility, 1661 Blaise Drive, Brooksville, Florida.

The meeting agenda and back-up materials are available online at:

www.hernandocounty.us/hernandocitrusmpo.

REVIEW/APPROVAL OF MINUTES – FEBRUARY 13, 2025, TDLCB ANNUAL PUBLIC WORKSHOP

Attached for approval are the Annual Public Workshop Minutes of the Thursday, February 13, 2025, meeting of the Hernando County Transportation Disadvantaged Local Coordinator Board (TDLCB).

Staff Recommendation: It is recommended the TDLCB review and approve the Minutes of the February 13, 2025, workshop.

Attachment: Minutes from Thursday, February 13, 2025, Annual Public Workshop



HERNANDO COUNTY TRANSPORTATION DISADVANTAGED LOCAL COORDINATING BOARD (TDLCB)

Thursday, February 13, 2025

ANNUAL PUBLIC WORKSHOP MINUTES

The Hernando County Transportation Disadvantaged Local Coordinating Board (TDLCB) held its Annual Public Workshop on February 13, 2025, at 1:30 p.m. at the Hernando County Building Training Facility, 1661 Blaise Drive, Brooksville, Florida. The meeting was advertised in the Hernando Sun newspaper, on the Hernando/Citrus MPO website and the Hernando County website. The agenda was available on the Hernando/Citrus MPO website.

MEMBERS PRESENT

Gretchen Samter, Vice Chair, Person with a Disability
Michelle Sikavitsas, Florida Department of Transportation, District 7
Sam Kinard, Representative from the Public Educational Community
Kevin Bargerstock, Florida Division of Vocational Rehabilitation or Blind Services
Robert Werts, Alternate, Veterans Service Representative
Gerry Whitted, Citizen Advocate – Transit User as Primary Means
Melissa Arceneaux, Citizen Advocate
Darlene Lollie, Public Transit System
Casey Ladd, Florida Department of Elder Affairs
Riley Larsen, Florida Department of Health Care Administration
Jose Infante, Regional Workforce Development Board
Jeannette Estes, State of Florida Agency for Persons with Disabilities

MEMBERS ABSENT

John Allocco, Chair, Hernando County Board of County Commissioner
Shanika Figueroa Rodriguez, Local Representative for Children at Risk
Elizabeth Alacci, Florida Department of Children and Family Services

OTHERS PRESENT

Mary Elwin, MPO Coordinator
Joy Turner, MPO Executive Assistant
Jeff Cottrell, You Thrive, Community Transportation Coordinator
Dave Newell, Florida Department of Transportation, District 7
Maria DeJesus, Florida Department of Transportation, District 7

MEETING CALLED TO ORDER

- Vice Chair Samter called the meeting to order at 1:30 p.m.
- The Pledge of Allegiance and the introductions of Board, staff, and attendees followed the Invocation.
- A quorum was declared, and the affidavit of publication was read into the record.

APPROVAL/MODIFICATION OF AGENDA

Motion: A motion was made by Ms. Arceneaux to approve the agenda. The motion was seconded by Mr. Larsen and the motion passed 12-0.

PRESENTATION

Presentation by the Community Transportation Coordinator (CTC) Agency on the Services Provided by You Thrive Florida.

Jeff Cottrell, Director of Transportation, made a presentation on the mission of You Thrive Florida and summarized the many programs offered by You Thrive: Early Learning, Early Head Start, Voluntary Prekindergarten Program (VPK), Head Start, School Readiness, Senior Services, Children's Advocacy

Center, Paratransit, House to Home, Weatherization, Family Self-Sufficiency and Continuing Education, Energy Assistance, and Emergency/Support Services. Ms. Elwin stated that the presentation would be available on the MPO website at www.HernandoCitrusMPO.us.

The Board members thanked Mr. Cottrell as some members mentioned they were unaware of all the services You Thrive Florida provides.

CITIZEN COMMENTS - There were no citizen comments.

BOARD MEMBER COMMENTS – There were no further Board member comments.

MPO STAFF COMMENTS – There were no MPO staff comments.

ADJOURNMENT AND NEXT MEETING

The next regular meeting of the Hernando County Transportation Disadvantaged Local Coordinating Board (TDLCB) immediately followed the Annual Public Workshop.

Vice Chair Samter adjourned the meeting at 1:58 p.m.

DRAFT

REVIEW/APPROVAL OF MINUTES – FEBRUARY 13, 2025, TDLCB REGULAR PUBLIC MEETING

Attached for approval are the Regular Public Meeting Minutes of the Thursday, February 13, 2025, meeting of the Hernando County Transportation Disadvantaged Local Coordinator Board (TDLCB).

Staff Recommendation: It is recommended the TDLCB review and approve the Minutes of the February 13, 2025, meeting.

Attachment: Minutes from Thursday, February 13, 2025, Regular Public Meeting



HERNANDO COUNTY TRANSPORTATION DISADVANTAGED LOCAL COORDINATING BOARD (TDLCB)

Thursday, February 13, 2025

MINUTES

The Hernando County Transportation Disadvantaged Local Coordinating Board (TDLCB) held a regular quarterly meeting on February 13, 2025, at 1:45 p.m. at the Hernando County Building Training Facility, 1661 Blaise Drive, Brooksville, Florida. The meeting was advertised in the Hernando Sun newspaper, on the Hernando/Citrus MPO website, and on the Hernando County website. The agenda was available on the Hernando/Citrus MPO website.

MEMBERS PRESENT

Gretchen Samter, Vice Chair, Person with a Disability
Michelle Sikavitsas, Florida Department of Transportation, District 7
Sam Kinard, Representative from the Public Educational Community
Kevin Bargerstock, Florida Division of Vocational Rehabilitation or Blind Services
Robert Werts, Alternate, Veterans Service Representative
Gerry Whitted, Citizen Advocate – Transit User as Primary Means
Melissa Arceneaux, Citizen Advocate
Darlene Lollie, Public Transit System (TheBus)
Casey Ladd, Florida Department of Elder Affairs
Riley Larsen, Florida Department of Health Care Administration
Jose Infante, Regional Workforce Development Board
Jeannette Estes, State of Florida Agency for Persons with Disabilities

MEMBERS ABSENT

John Allocco, Chair, Hernando County Board of County Commissioner
Shanika Figueroa Rodriguez, Local Representative for Children at Risk
Elizabeth Alacci, Florida Department of Children and Family Services

OTHERS PRESENT

Mary Elwin, MPO Coordinator
Joy Turner, MPO Executive Assistant
Jeff Cottrell, You Thrive, Community Transportation Coordinator
Dave Newell, Florida Department of Transportation, District 7
Maria DeJesus, Florida Department of Transportation, District 7
Miranda Burke, Workforce Specialist, CareerSource Pasco/Hernando

MEETING CALLED TO ORDER

[It is noted for the record that TDLCB member, Gerry Whitted, excused himself temporarily from the meeting.]

- Vice Chair Samter called the meeting to order at 1:59 p.m., immediately following the Annual Public Workshop.
- The Board, staff, and attendees introduced themselves.

[It is noted for the record that TDLCB members, Gerry Whitted, returned to the meeting.]

- A quorum was declared, and the affidavit of publication was read into the record.

APPROVAL/MODIFICATION OF AGENDA

Motion: A motion was made by Mr. Werts to approve the agenda, as amended. The motion was seconded by Mr. Whitted and the motion passed 12-0.

ELECTION OF VICE CHAIR FOR 2025

Motion: A motion was made by Ms. Lollie to elect Ms. Samter as the TDLCB Vice Chair for 2025. The motion was seconded by Ms. Arceneaux and the motion passed 12-0.

ELECTION OF GRIEVANCE COMMITTEE MEMBERS FOR 2025

After Board discussion the following TDLCB Board members were nominated as the Grievance Committee for 2025:

1. Melissa Arceneaux, Chair
2. Gretchen Samter, Vice Chair
3. Darlene Lollie, member
4. Jeannette Estes, alternate member

Motion: A motion was made by Ms. Lollie to approve the nominated TDLCB Grievance Committee members and positions for 2025. The motion was seconded by Mr. Werts and the motion passed 12-0.

REVIEW/APPROVAL OF MINUTES – NOVEMBER 14, 2024, TDLCB REGULAR PUBLIC MEETING

Motion: A motion was made by Ms. Lollie to approve the November 14, 2024, Minutes of the TDLCB's Regular Public Meeting. The motion was seconded by Ms. Arceneaux and the motion passed 12-0.

ACTION ITEM

Annual Review and Approval of the TDLCB Grievance Procedures

Ms. Elwin reviewed the annual update of the LCB Grievance Procedures incorporating the process to report adverse incidents involving Persons with Disabilities. The Board discussed the time limit to report an Adverse Service Incident and requested to amend "*submitted within two business days of the occurrence*" to "*submitted within three-to-five business days of the occurrence*" and to add *Any adverse service complaint submitted at any time will be processed.*

Motion: A motion was made by Mr. Bargerstock to approve the TDLCB Grievance Procedures as amended. The motion was seconded by Mr. Whitted and the motion passed 12-0.

REPORTS

Quarterly Report for October 1 through December 31, 2024, by the Community Transportation Coordinator (CTC), You Thrive Florida

Jeff Cottrell, the Director of Transportation at You Thrive Florida, reported that improved route planning and better communication with medical and dialysis facilities resulted in more trips being provided last quarter compared to the previous quarter. He noted that medical insurance companies are reducing or eliminating benefits for medical transportation, which may lead to an increase in medical trip requests to You Thrive Florida. Medical trip requests take precedence over recreational trips, so an increase in medical requests could affect the availability of recreational trips. In response to Ms. Arceneaux's inquiry, Mr. Cottrell stated that there are currently no plans to offer Saturday trips for dialysis patients.

FEATURE PRESENTATIONS

1. Jeannette Estes, Regional Operations Manager at Florida Agency for Persons with Disabilities (APD), gave a feature presentation on the services provided by APD, how to apply for services, navigating the APD website (www.apdcares.org), and who potentially qualifies for APD services. She relayed that an individual has to have one or more statutorily defined developmental disabilities: Spina bifida, intellectual disability, Downs syndrome, Cerebral Palsy, severe forms of autism, Prader-Willi syndrome, and Phelan-McDermid syndrome.
2. Jose Infante, the Local Veterans' Employment Representative, and Miranda Burke, a Workforce Specialist from CareerSource Pasco/Hernando, provided an overview of the programs and resources available for job seekers and employers. CareerSource helps with resume writing and development programs to help individuals acquire new skills. They also provide targeted support for veterans and

workers with disabilities, as well as services for local businesses seeking candidates. Mr. Infante highlighted the need for a bus stop at the newly relocated Brooksville office on Spring Hill Drive. In response, Ms. Lollie noted that bus service would be extended along Spring Hill Drive, between California Street and US 41. The CareerSource office is within $\frac{3}{4}$ of a mile of the fixed-route transit system, and she encouraged eligible residents who are unable to access service due to a disability, to apply for and use the *Demand Response* paratransit service.

Darlene Lollie, Hernando County Transit Administrator, and Casey Ladd, Florida Department of Elder Affairs, will provide the Feature Presentations for the May 8, 2025, meeting.

CITIZEN COMMENTS

Andras Serpozo, the Hernando County Transit Operations Coordinator, distributed a handout titled "Hernando County Transportation Disadvantaged FAQs." This document was created to clarify the differences between TheBus, the ADA-mandated paratransit services, and the services offered by You Thrive Florida, the Community Transportation Coordinator (CTC). The Board expressed gratitude to Hernando County Transit for providing this information and for their efforts in compiling it.

BOARD MEMBER COMMENTS

- Ms. Arceneaux thanked Ms. Estes for her feature presentation and the services provided by the Florida Agency for Persons with Disabilities (APD). Having this information available online is life changing for individuals with disabilities. Ms. Arceneaux also acknowledged TheBus drivers for the care and respect that has been provided to her sister.
- Ms. Lollie shared that two bus routes will be added mid-March; a micro-transit service that will operate within a 5-mile radius from the downtown center in Brooksville and a fixed-route service on SR50 between Broad Street and US 301 (Ridge Manor). Two additional routes are scheduled to begin service the end of September 2025: US 41 south to County Line Road and the Mermaid route on Shoal Line Boulevard.
- Ms. Samter requested an update on the progress of a request made during the last TDLCB meeting regarding the reestablishment of an on-demand, after-hours, and cross-county trip service for the transportation disadvantaged in Hernando County. The Pinellas Suncoast Transit Authority (PSTA) has officially launched TD Tampa Bay, a regional transportation service for the disadvantaged, in partnership with Pinellas, Hillsborough, and Pasco counties. Ms. Elwin reported that the TD Tampa Bay service is funded through a grant from the Florida Commission for Transportation Disadvantaged. She will also investigate whether Hernando County qualifies for a similar grant to provide these services.

MPO STAFF COMMENTS

Ms. Elwin provided the following updates:

- Mr. Esposito is attending the February 13, 2025, Gulf Streets Safe Summit Dignitary Panel in Tampa, Florida. Commissioner Bays (Citrus) and Todd Crosby, Assistant County Engineer for Hernando County, also are attending as panelists.
- Mr. Esposito hosted a telephone call with State Senator Nick DiCeglie and Commissioner Bays on February 3, 2025, to advocate for rural arterial funds for Hernando and Citrus Counties.
- Mr. Esposito hosted a Microsoft Teams meeting with FDOT, Pasco County, and Hernando County staff members on January 27, 2025, to discuss County Line Road. The Florida Department of Transportation (FDOT) has agreed to include funding for the design portion between Mariner Boulevard/Shady Hills Road to the Suncoast Parkway in the FY2025 Work Program. The construction phase will be programmed in FY2033 with FDOT incurring one-half of the cost and Hernando and Pasco counties sharing the other half. The next follow-up Microsoft Teams meeting is scheduled for April 28, 2025.
- Ms. Elwin noted that the Sun Coast Transportation Planning Alliance (SCTPA) is working on the Regional 2050 LRTP. County Line Road was recently added to the Regional Priorities List and Mr. Esposito is going to ask to have SR200 (Citrus) added later this summer.

- Mr. Esposito participated in a second radio interview (WWJB) [on January 15, 2025] to help educate and inform the public on how funding occurs for improvements on local county roads.

ADJOURNMENT AND NEXT MEETING

The next regular meeting of the Hernando County Transportation Disadvantaged Local Coordinating Board (TDLCB) is scheduled for Thursday, May 8, 2025, beginning at 1:30 p.m., at the Hernando County Building Training Facility, 1661 Blaise Drive, Brooksville, Florida. The meeting agenda and back-up materials are available online at: www.hernandocounty.us/hernandocitrusmpo.

Vice Chair Samter adjourned the meeting at 3:48 p.m.

DRAFT

REVIEW AND APPROVAL OF THE ANNUAL EVALUATION OF THE COMMUNITY TRANSPORTATION COORDINATOR (CTC)

Attached is the Annual Evaluation of the Community Transportation Coordinator (CTC) conducted by the Hernando/Citrus MPO staff (Planning Agency). Based on the review, the CTC appears to be operating consistent with the Florida Statutes Chapter 427, and Rule 41-2 of the Florida Administrative Code.

Staff Recommendation: It is recommended the TDLCB review the 2025 Annual CTC Evaluation, provide comments, and approve for submittal to the Florida Commission for the Transportation Disadvantaged (CTD).

Attachment: CTC Annual Evaluation

CTC

EVALUATION WORKBOOK

Florida Commission for the



Transportation Disadvantaged

CTC BEING REVIEWED: Mid Florida Community Services dba Youth Thrive FL

COUNTY (IES): Hernando County

ADDRESS: 1122 Ponce De Leon Blvd., Brooksville, FL 34601

CONTACT: Jeff Cottrell **PHONE:** 352-799-1510

REVIEW PERIOD: SFY 2025 **REVIEW DATES:** 3/3/25-5/8/25

PERSON CONDUCTING THE REVIEW: Robert Esposito and Mary Elwin

CONTACT INFORMATION: 352-754-4082

FORMATTED 2011 – 2012

LCB EVALUATION WORKBOOK

ITEM	PAGE
REVIEW CHECKLIST _____	3
EVALUATION INFORMATION _____	5
ENTRANCE INTERVIEW QUESTIONS _____	6
GENERAL QUESTIONS _____	9
CHAPTER 427, F.S. _____	13
RULE 41-2, F.A.C. _____	22
COMMISSION STANDARDS _____	32
LOCAL STANDARDS _____	33
AMERICANS WITH DISABILITIES ACT _____	36
FY GRANT QUESTIONS _____	42
STATUS REPORT _____	43
ON-SITE OBSERVATION _____	45
SURVEYS _____	47
LEVEL OF COST WORKSHEET # 1 _____	52
LEVEL OF COMPETITION WORKSHEET #2 _____	53
LEVEL OF AVAILABILITY WORKSHEET #3 _____	55

REVIEW CHECKLIST & SCHEDULE

COLLECT FOR REVIEW:

- APR Data Pages
- QA Section of TDSP
- Last Review (Date: 2025)
- List of Omb. Calls
- QA Evaluation
- Status Report (from last review)
- AOR Submittal Date
- TD Clients to Verify
- TDTF Invoices
- Audit Report Submittal Date

ITEMS TO REVIEW ON-SITE:

- SSPP
- Policy/Procedure Manual
- Complaint Procedure
- Drug & Alcohol Policy (see certification)
- Grievance Procedure
- Driver Training Records (see certification)
- Contracts
- Other Agency Review Reports
- Budget
- Performance Standards
- Medicaid Documents

ITEMS TO REQUEST:

- REQUEST INFORMATION FOR RIDER/BENEFICIARY SURVEY** (Rider/Beneficiary Name, Agency who paid for the trip [sorted by agency and totaled], and Phone Number)
- REQUEST INFORMATION FOR CONTRACTOR SURVEY** (Contractor Name, Phone Number, Address and Contact Name)
- REQUEST INFORMATION FOR PURCHASING AGENCY SURVEY** (Purchasing Agency Name, Phone Number, Address and Contact Name)
- REQUEST ANNUAL QA SELF CERTIFICATION** (Due to CTD annually by January 15th).
- MAKE ARRANGEMENTS FOR VEHICLES TO BE INSPECTED** (Only if purchased after 1992 and privately funded).

INFORMATION OR MATERIAL TO TAKE WITH YOU:

- Measuring Tape
- Stop Watch

EVALUATION INFORMATION

An LCB review will consist of, but is not limited to the following pages:

1	Cover Page
5 - 6	Entrance Interview Questions
12	Chapter 427.0155 (3) Review the CTC monitoring of contracted operators
13	Chapter 427.0155 (4) Review TDSP to determine utilization of school buses and public transportation services
19	Insurance
23	Rule 41-2.011 (2) Evaluation of cost-effectiveness of Coordination Contractors and Transportation Alternatives
25 - 29	Commission Standards and Local Standards
39	On-Site Observation
40 – 43	Surveys
44	Level of Cost - Worksheet 1
45- 46	Level of Competition – Worksheet 2
47 - 48	Level of Coordination – Worksheet 3

Notes to remember:

- **The CTC should not conduct the evaluation or surveys. If the CTC is also the PA, the PA should contract with an outside source to assist the LCB during the review process.**
- **Attach a copy of the Annual QA Self Certification.**

ENTRANCE INTERVIEW QUESTIONS

INTRODUCTION AND BRIEFING:

- Describe the evaluation process (LCB evaluates the CTC and forwards a copy of the evaluation to the CTD).
- The LCB reviews the CTC once every year to evaluate the operations and the performance of the local coordinator.

The LCB will be reviewing the following areas:

- Chapter 427, Rules 41-2 and 14-90, CTD Standards, and Local Standards
 - Following up on the Status Report from last year and calls received from the Ombudsman program.
 - Monitoring of contractors.
 - Surveying riders/beneficiaries, purchasers of service, and contractors
- The LCB will issue a Review Report with the findings and recommendations to the CTC no later than 30 working days after the review has concluded.
 - Once the CTC has received the Review Report, the CTC will submit a Status Report to the LCB within 30 working days.
 - Give an update of Commission level activities (last meeting update and next meeting date), if needed.

USING THE APR, COMPILE THIS INFORMATION:

1. OPERATING ENVIRONMENT:

- RURAL URBAN

2. ORGANIZATION TYPE:

- PRIVATE-FOR-PROFIT
- PRIVATE NON-PROFIT
- GOVERNMENT
- TRANSPORTATION AGENCY

6. NAME THE ORGANIZATIONS AND AGENCIES THAT PURCHASE SERVICE FROM THE CTC AND THE PERCENTAGE OF TRIPS EACH REPRESENTS?
(Recent APR information may be used)

Name of Agency	% of Trips	Name of Contact	Telephone Number
Mid Florida Senior Serv	21%	Melanie Harrison	352-796-1426

7. REVIEW AND DISCUSS TD HELPLINE CALLS:

	Number of calls	Closed Cases	Unsolved Cases
Cost	0		
Medicaid	0		
Quality of Service	0		
Service Availability	0		
Toll Permit	0		
Other	0		

GENERAL QUESTIONS

Use the TDSP to answer the following questions. If these are not addressed in the TDSP, follow-up with the CTC.

1. DESIGNATION DATE OF CTC: JUNE 20, 2023 (Renewed as CTC 7-1-24)
2. WHAT IS THE COMPLAINT PROCESS?
The complaint process is in the TDSP and was adopted on February 13, 2025.

IS THIS PROCESS IN WRITTEN FORM? Yes No
(Make a copy and include in folder)

Is the process being used? Yes No

3. DOES THE CTC HAVE A COMPLAINT FORM? Yes No
(Make a copy and include in folder) **The complaint process includes adverse incidents and accidents per CTD requirements.**

4. DOES THE COMPLAINT FORM INCORPORATE ALL ELEMENTS OF THE CTD'S UNIFORM SERVICE REPORTING GUIDEBOOK?

Yes No

5. DOES THE FORM HAVE A SECTION FOR RESOLUTION OF THE COMPLAINT?

Yes No

Review completed complaint forms to ensure the resolution section is being filled out and follow-up is provided to the consumer.

6. IS A SUMMARY OF COMPLAINTS GIVEN TO THE LCB ON A REGULAR BASIS?

Yes No **No complaints have been received to forward to TDLCB.**

7. WHEN IS THE DISSATISFIED PARTY REFERRED TO THE TD HELPLINE?

Issues that cannot be addressed at the local level will be referred to the TD Helpline or to the Ombudsman per the adopted procedures.

8. WHEN A COMPLAINT IS FORWARDED TO YOUR OFFICE FROM THE OMBUDSMAN PROGRAM, IS THE COMPLAINT ENTERED INTO THE LOCAL COMPLAINT FILE/PROCESS?

Yes No **No complaints have been received; however, they would be processed according to policy.**

If no, what is done with the complaint?

9. DOES THE CTC PROVIDE WRITTEN RIDER/BENEFICIARY INFORMATION OR BROCHURES TO INFORM RIDERS/ BENEFICIARIES ABOUT TD SERVICES?

Yes No If yes, what type?

Written information is contained in brochures, on vehicles, and also on the website.

10. DOES THE RIDER/ BENEFICIARY INFORMATION OR BROCHURE LIST THE OMBUDSMAN NUMBER?

Yes No

11. DOES THE RIDER/ BENEFICIARY INFORMATION OR BROCHURE LIST THE COMPLAINT PROCEDURE?

Yes No

12. WHAT IS YOUR ELIGIBILITY PROCESS FOR TD RIDERS/ BENEFICIARIES?

An application is required for eligibility of TD service and upon approval is valid for a two-year period. A current application is available on the You Thrive website and is on file in the Planning Agency to support this review.

Please Verify These Passengers Have an Eligibility Application on File:

TD Eligibility Verification			
Name of Client	Address of client	Date of Ride	Application on File?
April Raio	24189 Balmoral Lane	3/28/25	Yes
Barbara Wright	7322 Windy Way	4/8/25	Yes
Brandon Place	7417 Tarrytown Drive	4/17/25	Yes
Debbie Cunio	5329 Gazebo Way	1/9/25	Yes
Maria Oyola	11436 Long Hill Court	4/14/25	Yes
Royce Burns	27465 Old Trilby Road	4/17/25	Yes
Russell Walls	11319 Cortez Boulevard	4/15/25	Yes

13. WHAT INNOVATIVE IDEAS HAVE YOU IMPLEMENTED IN YOUR COORDINATED SYSTEM?

14. ARE THERE ANY AREAS WHERE COORDINATION CAN BE IMPROVED?

The CTC and MPO coordinate effectively.

15. WHAT BARRIERS ARE THERE TO THE COORDINATED SYSTEM?

There are no known barriers to the system. Vehicle repairs continue to be impacted by the ability to get necessary parts from manufacturers on a timely basis..

16. ARE THERE ANY AREAS THAT YOU FEEL THE COMMISSION SHOULD BE AWARE OF OR CAN ASSIST WITH?

The CTD is responsive to questions and with assistance when needed.

17. WHAT FUNDING AGENCIES DOES THE CTD NEED TO WORK CLOSELY WITH IN ORDER TO FACILITATE A BETTER-COORDINATED SYSTEM?

The CTC works with the CTD, FDOT, and the MPO effectively to operate its system.

18. HOW ARE YOU MARKETING THE VOLUNTARY DOLLAR?

The donation of \$1.00 for TD is being updated on the new website and in the new brochures.

GENERAL QUESTIONS

Findings:

There are updates in progress since the re-branding of Trans-Hernando to You Thrive Florida.

Recommendations:

Continue the updating of related resources from Trans-Hernando to You Thrive Florida.

COMPLIANCE WITH CHAPTER 427, F.S.

**Review the CTC last AOR submittal for compliance with 427. 0155(2)
"Collect Annual Operating Data for submittal to the Commission."**

REPORTING TIMELINESS

Were the following items submitted on time?

a. Annual Operating Report Yes No

Any issues that need clarification? Yes No

Any problem areas on AOR that have been re-occurring?

List: N/A

b. Memorandum of Agreement Yes No

c. Transportation Disadvantaged Service Plan Yes No

d. Grant Applications to TD Trust Fund Yes No

e. All other grant application (____%) Yes No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

No comments.

COMPLIANCE WITH CHAPTER 427, F.S.

**Review the CTC monitoring of its transportation operator contracts to ensure compliance with 427.0155(3), F.S.
“Review all transportation operator contracts annually.”**

WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS OPERATOR(S) AND HOW OFTEN IS IT CONDUCTED?

Not applicable.

Is a written report issued to the operator? Yes No

If **NO**, how are the contractors notified of the results of the monitoring?

WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS COORDINATION CONTRACTORS AND HOW OFTEN IS IT CONDUCTED?

Not applicable.

Is a written report issued? Yes No

If **NO**, how are the contractors notified of the results of the monitoring?

WHAT ACTION IS TAKEN IF A CONTRACTOR RECEIVES AN UNFAVORABLE REPORT?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

ASK TO SEE DOCUMENTATION OF MONITORING REPORTS.

COMPLIANCE WITH CHAPTER 427, F.S.

Review the TDSP to determine the utilization of school buses and public transportation services [Chapter 427.0155(4)]

“Approve and coordinate the utilization of school bus and public transportation services in accordance with the TDSP.”

HOW IS THE CTC USING SCHOOL BUSES IN THE COORDINATED SYSTEM?

School buses are not used in the system.

Rule 41-2.012(5)(b): *"As part of the Coordinator's performance, the local Coordinating Board shall also set an annual percentage goal increase for the number of trips provided within the system for ridership on public transit, where applicable. In areas where the public transit is not being utilized, the local Coordinating Board shall set an annual percentage of the number of trips to be provided on public transit."*

HOW IS THE CTC USING PUBLIC TRANSPORTATION SERVICES IN THE COORDINATED SYSTEM?

N/A

IS THERE A GOAL FOR TRANSFERRING PASSENGERS FROM PARATRANSIT TO TRANSIT?

Yes No

If YES, what is the goal?

3%, TDSP page 31

Is the CTC accomplishing the goal? Yes No

IS THE CTC IN COMPLIANCE WITH THIS REQUIREMENT? Yes No

Comments:

The use of the fixed-route public transit system is encouraged and promoted in the TDSP and service brochures. The goal was be updated in the TDSP.

COMPLIANCE WITH CHAPTER 427, F.S.

Review of local government, federal and state transportation applications for TD funds (all local, state or federal funding for TD services) for compliance with 427.0155(5).

“Review all applications for local government, federal, and state transportation disadvantaged funds, and develop cost-effective coordination strategies.”

IS THE CTC INVOLVED WITH THE REVIEW OF APPLICATIONS FOR TD FUNDS, IN CONJUNCTION WITH THE LCB? (TD Funds include all funding for transportation disadvantaged services, i.e. Section 5310 [formerly Sec.16] applications for FDOT funding to buy vehicles granted to agencies who are/are not coordinated)

Yes No

If Yes, describe the application review process.

The CTC is doing business as You Thrive FL which utilizes TD funding (Section 5310) in its operations. Applications for the Trip Equipment grants, Shirley Conroy Grants, and Innovative Service Development funding are made directly to the CTC with review of the applications by the LCB. The rate calculation workbook is reviewed and approved by the CTC and then by the TDLCB.

If no, is the LCB currently reviewing applications for TD funds (any federal, state, and local funding)? Yes No

If no, is the planning agency currently reviewing applications for TD funds?

Yes No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:
None

COMPLIANCE WITH CHAPTER 427, F.S.

**Review priorities listed in the TDSP, according to Chapter 427.0155(7).
“Establish priorities with regard to the recipients of non-sponsored transportation disadvantaged services that are purchased with Transportation Disadvantaged Trust monies.”**

REVIEW THE QA SECTION OF THE TDSP (ask CTC to explain):

WHAT ARE THE PRIORITIES FOR THE TDTF TRIPS?

Prioritized services are medical, nutritional, grocery shopping, educational, employment, and social activities, respectively.

HOW ARE THESE PRIORITIES CARRIED OUT?

All riders must have a Transportation Disadvantaged application on file prior to their first ride. Transportation for Disadvantaged services are provided through a geographical assignment of vehicles based on current trip demand history. Scheduling requires twenty four hour advanced notice and vehicles multi-load medical, nutritional, shopping, education and other riders in a time certain pickup and drop off system. All vehicles begin picking up riders county wide Monday through Friday 7:00 am with guaranteed appointment arrival times. Cross county services require return trip by 2:00 pm The last or latest return available for local traffic, city to same city, is 3:00 pm.

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:
No comments.

COMPLIANCE WITH CHAPTER 427, F.S.

Ensure CTC compliance with the delivery of transportation services, 427.0155(8).

“Have full responsibility for the delivery of transportation services for the transportation disadvantaged as outlined in s. 427.015(2).”

Review the Operational section of the TDSP

1. Hours of Service:

7:00 AM to 4:00 PM

2. Hours of Intake:

7:30 am to 3:00 pm

3. Provisions for After Hours Reservations/Cancellations?

An answering machine may be utilized for cancellations.

4. What is the minimum required notice for reservations?

24-hour notice by noon of the prior day.

5. How far in advance can reservations be place (number of days)?

14 days/2 weeks

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

None

COMPLIANCE WITH CHAPTER 427, F.S.

Review the cooperative agreement with the local WAGES coalitions according to Chapter 427.0155(9).

“Work cooperatively with local WAGES coalitions established in Chapter 414 to provide assistance in the development of innovative transportation services for WAGES participants.”

WHAT TYPE OF ARRANGEMENT DO YOU HAVE WITH THE LOCAL WAGES COALITION?

N/A

HAVE ANY INNOVATIVE WAGES TRANSPORTATION SERVICES BEEN DEVELOPED?

N/A

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:
None

CHAPTER 427

Findings:

No findings.

Recommendations:

None.

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.006(1), Minimum Insurance Compliance
“...ensure compliance with the minimum liability insurance requirement of \$100,000 per person and \$200,000 per incident...”

WHAT ARE THE MINIMUM LIABILITY INSURANCE REQUIREMENTS?

The CTC maintains \$200,000 per person and \$300,000 per occurrence.

WHAT ARE THE MINIMUM LIABILITY INSURANCE REQUIREMENTS IN THE OPERATOR AND COORDINATION CONTRACTS?

N/A

HOW MUCH DOES THE INSURANCE COST (per operator)?

Operator	Insurance Cost

DOES THE MINIMUM LIABILITY INSURANCE REQUIREMENTS EXCEED \$1 MILLION PER INCIDENT?

Yes No

If yes, was this approved by the Commission? Yes No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

None

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.006(2), Safety Standards.
“...shall ensure the purchaser that their operations and services are in compliance with the safety requirements as specified in Section 341.061(2)(a), F.S. and 14-90, F.A.C.”

Date of last SSPP Compliance Review 2024, Obtain a copy of this review.

Review the last FDOT SSPP Compliance Review, if completed in over a year, check drivers’ records. If the CTC has not monitored the operators, check drivers’ files at the operator’s site.

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

ARE THE CTC CONTRACTED OPERATORS IN COMPLIANCE WITH THIS SECTION?
 Yes No Not Applicable

DRIVER REQUIREMENT CHART

Driver Last Name	Driver License <small>Check</small>	Last Physical	CPR/1st Aid <small>CPR Not Req'd, Basic First Aid</small>	Def. Driving	ADA Training	Other-
Guerrieri	5/9/25	12/9/24	3/5/24	7/15/23	October 6, 2023	
Kaye	5/9/25	8/1/25	3/5/24	3/31/23	October 6, 2023	
Ocdore	5/9/25	10/1/24	3/5/24		October 6, 2023	
Snyder	5/9/25	10/2/24	3/5/24	4/6/23	October 6, 2023	
Vazquez	5/9/25	6/25/24	4/26/23	10/23/23	October 6, 2023	
Wheeler	5/9/25	3/25/24	4/26/23	1/20/23	October 6, 2023	

Sample Size: 1-20 Drivers – 50-100% 21-100 Drivers – 20-50% 100+ Drivers – 5-10%

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.006(3), Drug and Alcohol Testing
“...shall assure the purchaser of their continuing compliance with the applicable state or federal laws relating to drug testing...”

With which of the following does the CTC (and its contracted operators) Drug and Alcohol Policy comply?

- FTA (Receive Sect. 5307, 5309, or 5311 funding) Receives 5310
- FHWA (Drivers required to hold a CDL)
- Neither

REQUEST A COPY OF THE DRUG & ALCOHOL POLICY AND LATEST COMPLIANCE REVIEW.

DATE OF LAST DRUG & ALCOHOL POLICY REVIEW: 10/5/2022 FDOT

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:
The Drug-Free Work Place Policy is on file.

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.011(2), Evaluating Cost-Effectiveness of Coordination Contractors and Transportation Alternatives.

“...contracts shall be reviewed annually by the Community Transportation Coordinator and the Coordinating Board as to the effectiveness and efficiency of the Transportation Operator or the renewal of any Coordination Contracts.”

1. IF THE CTC HAS COORDINATION CONTRACTORS, DETERMINE THE COST-EFFECTIVENESS OF THESE CONTRACTORS.

Cost [CTC and Coordination Contractor (CC)]

No coordination contracts; section is not applicable.

	CTC	CC #1	CC #2	CC #3	CC #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					

2. DO YOU HAVE TRANSPORTATION ALTERNATIVES? Yes No
 (Those specific transportation services approved by rule or the Commission as a service not normally arranged by the Community Transportation Coordinator, but provided by the purchasing agency. Example: a neighbor providing the trip)

Cost [CTC and Transportation Alternative (Alt.)]

	CTC	Alt. #1	Alt. #2	Alt. #3	Alt. #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

RULE 41-2

Findings:

You Thrive Florida has transitioned from Trans-Hernando. Compliance documents and policies should be updated as appropriate. An example is the Operating Manual.

Recommendations:

Continue updating policies and procedures for consistency with state and federal requirements and conducting business as You Thrive Florida.

COMPLIANCE WITH 41-2, F.A.C.

Compliance with Commission Standards
"...shall adhere to Commission approved standards..."

Review the TDSP for the Commission standards.

Commission Standards	Comments
Local toll free phone number must be posted in all vehicles.	Yes, and per TDSP Page 29 (Item 2), and observation.
Vehicle Cleanliness	Yes, and per TDSP Page 29 (Item 5), and observation.
Passenger/Trip Database	Yes, CTS Software is utilized, and per TDSP Page 18 (Goal 4)

Adequate seating	Yes, and per TDSP (Page 29, Item 6)
Driver Identification	Yes, and per TDSP (Page 29, Item 9) and observation.
Passenger Assistance	Yes, as per TDSP Page 28, Item 2
Smoking, Eating and Drinking	No smoking, eating and drinking are allowed, and addressed per TDSP (Page 29, Item 10)

Two-way Communications	Yes, and per TDSP Page 29 (Item 7)
Air Conditioning/Heating	Yes, and per TDSP Page 29 (Item 7)
Billing Requirements	N/A

COMMISSION STANDARDS

Findings:

No findings.

Recommendations:

None.

COMPLIANCE WITH 41-2, F.A.C.

Compliance with Local Standards
“...shall adhere to Commission approved standards...”

Review the TDSP for the Local standards.

Local Standards	Comments
Transport of Escorts and dependent children policy	TDSP Page 27
Use, Responsibility, and cost of child restraint devices	TDSP Page 28
Out-of-Service Area trips	TDSP Page 29
CPR/1st Aid	TDSP Page 29
Driver Criminal Background Screening	TDSP Page 30
Rider Personal Property	TDSP Page 29
Advance reservation requirements	TDSP Pages 21, 22, and 28
Pick-up Window	TDSP Page 28

Measurable Standards/Goals	Standard/Goal	Latest Figures <small>Period of Review 7/1/24-3/31/25</small>	Is the CTC/Operator meeting the Standard?
Public Transit Ridership <small>TDSP, Page 31, Item 8</small>	CTC <small>3%</small>	CTC <small>1%</small>	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
On-time performance <small>TDSP, Page 30, Item 14</small>	CTC <small>90%</small>	CTC <small>98.6%</small>	YES
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Passenger No-shows <small>TDSP, Page 28, Item 7</small>	CTC <small>3%</small>	CTC <small>2.6%</small>	YES
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Accidents <small>TDSP, Page 30, Item 15</small>	CTC <small>5 per 100,000 miles</small>	CTC <small>0</small>	YES
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Roadcalls <small>TDSP, Page 30, Item 15</small> <i>Average age of fleet: 9 Years</i>	CTC <small>20 per year</small>	CTC <small>2</small>	YES
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Complaints <small>Per TDSP and Policy Adopted in February of 2025</small> <i>Number filed: 0</i>	CTC <small>0</small>	CTC <small>0</small>	YES
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Call-Hold Time <small>TDSP, Page 30, Item 5</small>	CTC <small>2 Minutes</small>	CTC <small>2 Minutes</small>	YES
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	

LOCAL STANDARDS

Findings:

The TDSP goal conversion of riders from Transportation Disadvantaged service to use of the fixed-route is 3%; changed from the prior year from 100%. The CTC was able to achieve 1% conversion.

Recommendations:

Consider revising goal during next update of the TDSP (scheduled for September 2025).

COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

REVIEW COPIES OF THE PUBLIC INFORMATION PROVIDED.

DOES PUBLIC INFORMATION STATE THAT ACCESSIBLE FORMATS ARE

AVAILABLE UPON REQUEST? Yes No Also, CTC has spanish speaking employees on staff.

ARE ACCESSIBLE FORMATS ON THE SHELF? Yes No

IF NOT, WHAT ARRANGEMENTS ARE IN PLACE TO HAVE MATERIAL PRODUCED IN A TIMELY FASHION UPON REQUEST?

DO YOU HAVE TTY EQUIPMENT OR UTILIZE THE FLORIDA RELAY SYSTEM?

Yes No

IS THE TTY NUMBER OR THE FLORIDA RELAY SYSTEM NUMBERS LISTED WITH THE OFFICE PHONE NUMBER? Yes No

Florida Relay System:
Voice- 1-800-955-8770
TTY- 1-800-955-8771

EXAMINE OPERATOR MANUALS AND RIDER INFORMATION. DO CURRENT
POLICIES COMPLY WITH ADA PROVISION OF SERVICE REQUIREMENTS
REGARDING THE FOLLOWING:

Provision of Service	Training Provided	Written Policy	Neither
Accommodating Mobility Aids	Yes	Yes	
Accommodating Life Support Systems (Portable O ₂ Tanks, IV's...)	Yes	Yes	
Passenger Restraint Policies	Yes	Yes	
Standee Policies (persons standing on the lift)	Yes	Yes	
Driver Assistance Requirements	Yes	Yes	
Personal Care Attendant Policies	Yes	Yes	
Service Animal Policies	Yes	Yes	
Transfer Policies (From mobility device to a seat)	Yes	Yes	
Equipment Operation (Lift and securement procedures)	Yes	Yes	
Passenger Sensitivity/Disability Awareness Training for Drivers	Yes	Yes	

RANDOMLY SELECT ONE OR TWO VEHICLES PER CONTRACTOR (DEPENDING ON SYSTEM SIZE) THAT ARE IDENTIFIED BY THE CTC AS BEING ADA ACCESSIBLE AND PURCHASED WITH PRIVATE FUNDING, AFTER 1992. CONDUCT AN INSPECTION USING THE ADA VEHICLE SPECIFICATION CHECKLIST.

INSPECT FACILITIES WHERE SERVICES ARE PROVIDED TO THE PUBLIC (ELIGIBILITY DETERMINATION, TICKET/COUPON SALES, ETC...).

IS A RAMP PROVIDED? Yes No

ARE THE BATHROOMS ACCESSIBLE? Yes No

Bus and Van Specification Checklist

Name of Provider:

Vehicle Number (either VIN or provider fleet number):

Type of Vehicle: Minivan Van Bus (>22')
 Minibus (<= 22') Minibus (>22')

Person Conducting Review:

Date:

Review the owner's manual, check the stickers, or ask the driver the following:

- The lift must have a weight limit of at least 600 pounds.
- The lift must be equipped with an emergency back-up system (in case of loss of power to vehicle). Is the pole present?
- The lift must be "interlocked" with the brakes, transmission, or the door, so the lift will not move unless the interlock is engaged. Ensure the interlock is working correctly.

Have the driver lower the lift to the ground:

- Controls to operate the lift must require constant pressure.
- Controls must allow the up/down cycle to be reversed without causing the platform to "stow" while occupied.
- Sufficient lighting shall be provided in the step well or doorway next to the driver, and illuminate the street surface around the lift, the lighting should activate when the door/lift is in motion. Turn light switch on, to ensure lighting is working properly.

Once the lift is on the ground, review the following:

- Must have an inner barrier to prevent the mobility aid from rolling off the side closest to the vehicle until the platform is fully raised.
- Side barriers must be at least 1 ½ inches high.
- The outer barrier must be sufficient to prevent a wheelchair from riding over it.
- The platform must be slip-resistant.
- Gaps between the platform and any barrier must be no more than 5/8 of an inch.
- The lift must have two handrails.
- The handrails must be 30-38 inches above the platform surface.
- The handrails must have a useable grasping area of 8 inches, and must be at least 1 ½ inches wide and have sufficient knuckle clearance.
- The platform must be at least 28 1/2 inches wide measured at the platform surface, and 30 inches wide and 48 inches long measured 2 inches above the platform surface.

- If the ramp is not flush with the ground, for each inch off the ground the ramp must be 8 inches long.
- Lifts may be marked to identify the preferred standing position (suggested, not required)

Have the driver bring the lift up to the fully raised position (but not stowed):

- When in the fully raised position, the platform surface must be horizontally within 5/8 inch of the floor of the vehicle.
- The platform must not deflect more than 3 degrees in any direction. To test this, stand on the edge of the platform and carefully jump up and down to see how far the lift sways.
- The lift must be designed to allow boarding in either direction.

While inside the vehicle:

- Each securement system must have a clear floor area of 30 inches wide by 48 inches long.
- The securement system must accommodate all common wheelchairs and mobility aids.
- The securement system must keep mobility aids from moving no more than 2 inches in any direction.
- A seat belt and shoulder harness must be provided for each securement position, and must be separate from the security system of the mobility aid.

Vehicles under 22 feet must have:

- One securement system that can be either forward or rear-facing.
- Overhead clearance must be at least 56 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.

Vehicles over 22 feet must have:

- Must have 2 securement systems, and one must be forward-facing, the other can be either forward or rear-facing.
- Overhead clearance must be at least 68 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.
- Aisles, steps, and floor areas must be slip resistant.
- Steps or boarding edges of lift platforms must have a band of color which contrasts with the step/floor surface.

COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

Table 1. ADA Compliance Review - Provider/Contractor Level of Service Chart

Name of Service Provider/ Contractor	Total # of Vehicles Available for CTC Service	# of ADA Accessible Vehicles	Areas/Sub areas Served by Provider/Contractor
CTC	13	13	Hernando County

BASED ON THE INFORMATION IN TABLE 1, DOES IT APPEAR THAT INDIVIDUALS REQUIRING THE USE OF ACCESSIBLE VEHICLES HAVE EQUAL SERVICE?

Yes No

ADA COMPLIANCE

Findings:

No findings.

Recommendations:

No recommendations.

FY 2024 / 2025 GRANT QUESTIONS

The following questions relate to items specifically addressed in the FY 2024 / 2025 Trip and Equipment Grant.

DO YOU KEEP ALL RECORDS PERTAINING TO THE SPENDING OF TDTF DOLLARS FOR FIVE YEARS? (Section 7.10: Establishment and Maintenance of Accounting Records, T&E Grant, and FY 2025)

Yes No

ARE ALL ACCIDENTS THAT HAVE RESULTED IN A FATALITY REPORTED TO THE COMMISSION WITHIN 24 HOURS AFTER YOU HAVE RECEIVED NOTICE? (Section 14.80: Accidents, T/E Grant, and FY 2025)

Yes No Not Applicable; no accidents during period!

ARE ALL ACCIDENTS THAT HAVE RESULTED IN \$1,000 WORTH OF DAMAGE REPORTED TO THE COMMISSION WITHIN 72 HOURS AFTER YOU HAVE RECEIVED NOTICE OF THE ACCIDENT? (Section 14.80: Accidents, T/E Grant, and FY 2024)

Yes No Not Applicable; no accidents during period!

STATUS REPORT FOLLOW-UP FROM LAST REVIEW(S)

DATE OF LAST REVIEW: _____

STATUS REPORT DATED: _____

CTD RECOMMENDATION:

CTC Response:

Current Status:

ON-SITE OBSERVATION OF THE SYSTEM

RIDE A VEHICLE WITHIN THE COORDINATED SYSTEM. REQUEST A COPY OF THE MANIFEST PAGE THAT CONTAINS THIS TRIP.

Date of Observation:

Please list any special guests that were present:

Location:

Number of Passengers picked up/dropped off:

Ambulatory

Non-Ambulatory

Was the driver on time? Yes No - How many minutes late/early?

Did the driver provide any passenger assistance? Yes No

Was the driver wearing any identification? Yes: Uniform Name Tag
 ID Badge No

Did the driver render an appropriate greeting?
 Yes No Driver regularly transports the rider, not necessary

If CTC has a policy on seat belts, did the driver ensure the passengers were properly belted?
 Yes No

Was the vehicle neat and clean, and free from dirt, torn upholstery, damaged or broken seats, protruding metal or other objects? Yes No

Is there a sign posted on the interior of the vehicle with both a local phone number and the TD Helpline for comments/complaints/commendations? Yes No

Does the vehicle have working heat and air conditioning? Yes No

Does the vehicle have two-way communications in good working order? Yes No

If used, was the lift in good working order? Yes No

RIDER/BENEFICIARY SURVEY

Staff making call: M Elwin
Date of Call: 05/02/2025

County: Hernando
Funding Source: TD

1) Did you receive transportation service on 4/15/25? Yes or No

2) Where you charged an amount in addition to the co-payment? Yes or No

If so, how much? \$5.00

3) How often do you normally obtain transportation?

Daily 7 Days/Week Other 1-2 Times/Week 3-5Times/Week **Once per month.**

4) Have you ever been denied transportation services?

Yes

No. If no, skip to question # 4

A. How many times in the last 6 months have you been refused transportation services?

None 3-5 Times
 1-2 Times 6-10 Times

If none, skip to question # 4.

B. What was the reason given for refusing you transportation services?

Ineligible Space not available
 Lack of funds Destination outside service area
 Other _____

5) What do you normally use the service for?

Medical Education/Training/Day Care
 Employment Life-Sustaining/Other
 Nutritional

6) Did you have a problem with your trip on 4/15/2025 ?

Yes. If yes, please state or choose problem from below

No. If no, skip to question # 6

What type of problem did you have with your trip?

Advance notice Cost
 Pick up times not convenient Late pick up-specify time of wait
 Assistance Accessibility
 Service Area Limits Late return pick up - length of wait

Drivers - specify

Reservations - specify length of wait

Vehicle condition

Other

7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.
10

8) What does transportation mean to you? (Permission granted by Russell Walls for use in publications.)

Additional Comments:

Mr. Walls indicated the service was great especially in Brooksville where there are ~~limited other options. He lived in Sherman Hills, but to walk to a bus stop would have~~ been a challenge from his home. He made sure he would coordinate his appointments ~~so he could call in advance for service. He thought other people who used it were~~ satisfied as well. Bus drivers and dispatchers were very courteous, he said.

Contractor Survey

_____ County

Form Not Applicable

Contractor name (optional)

1. Do the riders/beneficiaries call your facility directly to cancel a trip?

Yes No

2. Do the riders/beneficiaries call your facility directly to issue a complaint?

Yes No

3. Do you have a toll-free phone number for a rider/beneficiary to issue commendations and/or complaints posted on the interior of all vehicles that are used to transport TD riders?

Yes No

If yes, is the phone number posted the CTC's?

Yes No

4. Are the invoices you send to the CTC paid in a timely manner?

Yes No

5. Does the CTC give your facility adequate time to report statistics?

Yes No

6. Have you experienced any problems with the CTC?

Yes No

If yes, what type of problems?

Comments:

PURCHASING AGENCY SURVEY

Staff making call: _____

Purchasing Agency name: _____

Representative of Purchasing Agency: _____

1) Do you purchase transportation from the coordinated system?

YES

NO If no, why?

2) Which transportation operator provides services to your clients?

3) What is the primary purpose of purchasing transportation for your clients?

Medical

Employment

Education/Training/Day Care

Nutritional

Life Sustaining/Other

4) On average, how often do your clients use the transportation system?

7 Days/Week

1-3 Times/Month

1-2 Times/Week

Less than 1 Time/Month

3-5 Times/Week

5) Have you had any unresolved problems with the coordinated transportation system?

- Yes
- No If no, skip to question 7

6) What type of problems have you had with the coordinated system?

- Advance notice requirement [specify operator (s)]
- Cost [specify operator (s)]
- Service area limits [specify operator (s)]
- Pick up times not convenient [specify operator (s)]
- Vehicle condition [specify operator (s)]
- Lack of passenger assistance [specify operator (s)]
- Accessibility concerns [specify operator (s)]
- Complaints about drivers [specify operator (s)]
- Complaints about timeliness [specify operator (s)]
- Length of wait for reservations [specify operator (s)]
- Other [specify operator (s)] _____

7) Overall, are you satisfied with the transportation you have purchased for your clients?

- Yes
- No If no, why? _____

**Level of Cost
Worksheet 1**

Insert Cost page from the AOR.

<h2 style="margin: 0;">Level of Competition Worksheet 2</h2>
--

1. Inventory of Transportation Operators in the Service Area

	Column A Operators Available	Column B Operators Contracted in the System.	Column C Include Trips	Column D % of all Trips
Private Non-Profit				
Private For-Profit				
Government				
Public Transit Agency				
Total				

2. How many of the operators are coordination contractors? _____

3. Of the operators included in the local coordinated system, how many have the capability of expanding capacity? _____

Does the CTC have the ability to expand? _____

4. Indicate the date the latest transportation operator was brought into the system. _____

5. Does the CTC have a competitive procurement process? _____

6. In the past five (5) years, how many times have the following methods been used in selection of the transportation operators?

	Low bid
	Requests for qualifications
	Negotiation only

	Requests for proposals
	Requests for interested parties

Which of the methods listed on the previous page was used to select the current operators?

7. Which of the following items are incorporated in the review and selection of transportation operators for inclusion in the coordinated system?

Capabilities of operator
Age of company
Previous experience
Management
Qualifications of staff
Resources
Economies of Scale
Contract Monitoring
Reporting Capabilities
Financial Strength
Performance Bond
Responsiveness to Solicitation

Scope of Work
Safety Program
Capacity
Training Program
Insurance
Accident History
Quality
Community Knowledge
Cost of the Contracting Process
Price
Distribution of Costs
Other: (list)

8. If a competitive bid or request for proposals has been used to select the transportation operators, to how many potential operators was the request distributed in the most recently completed process? _____

How many responded? _____

The request for bids/proposals was distributed:

_____ Locally _____ Statewide _____ Nationally

9. Has the CTC reviewed the possibilities of competitively contracting any services other than transportation provision (such as fuel, maintenance, etc...)? _____

Level of Availability (Coordination)
Worksheet 3

Planning – What are the coordinated plans for transporting the TD population?

Public Information – How is public information distributed about transportation services in the community?

Certification – How are individual certifications and registrations coordinated for local TD transportation services?

Eligibility Records – What system is used to coordinate which individuals are eligible for special transportation services in the community?

Call Intake – To what extent is transportation coordinated to ensure that a user can reach a Reservationist on the first call?

Reservations – What is the reservation process? How is the duplication of a reservation prevented?

Trip Allocation – How is the allocation of trip requests to providers coordinated?

Scheduling – How is the trip assignment to vehicles coordinated?

Transport – How are the actual transportation services and modes of transportation coordinated?

Dispatching – How is the real time communication and direction of drivers coordinated?

General Service Monitoring – How is the overseeing of transportation operators coordinated?

Daily Service Monitoring – How are real-time resolutions to trip problems coordinated?

Trip Reconciliation – How is the confirmation of official trips coordinated?

Billing – How is the process for requesting and processing fares, payments, and reimbursements coordinated?

Reporting – How is operating information reported, compiled, and examined?

Cost Resources – How are costs shared between the coordinator and the operators (s) in order to reduce the overall costs of the coordinated program?

Information Resources – How is information shared with other organizations to ensure smooth service provision and increased service provision?

Overall – What type of formal agreement does the CTC have with organizations, which provide transportation in the community?

REVIEW AND COMMENT ON THE INNOVATIVE SERVICE DEVELOPMENT (ISD) GRANT APPLICATION BY THE COMMUNITY TRANSPORTATION COORDINATOR (CTC)

The Hernando County Community Transportation Coordinator (CTC), You Thrive, provides essential transportation services for disadvantaged individuals. However, they are currently facing limitations in traveling across counties due to insufficient staffing. Securing funding would allow You Thrive to hire an additional driver, which would enable them to transport people to important medical appointments in Pasco and Citrus Counties. This expansion could also include transportation for other essential trips, such as those related to employment.

You Thrive is mailing an application to the Florida Commission for Transportation Disadvantaged (CTD) for a \$157,500 ISD grant and will contribute the required local funding match of \$17,500 (10%). The funding will be used to hire an additional driver and cover operating costs. You Thrive estimates that this expansion will allow them to provide between 50 and 100 trips per month, based on making two round trips per day (four trips total) for an average of 20 operating days each month.

Staff Recommendation: It is recommended the TDLCB review and comment on the CTC Innovative Service Development (ISD) grant application.

Attachment: Innovative Service Development (ISD) Grant Application



Transportation Disadvantaged Innovative Service Development Grant

APPLICATION

Legal Name of Applicant	Mid Floirda Community Services DBA You Thrive Florida		
Federal Employer Identification Number	59-1235202		
Registered Address	820 Kennedy Blvd		
City and State	Brooksville, FL	Zip Code	34601
Contact Person for this Grant	Jeff Cottrell	Phone Number	3527991510
E-Mail Address [Required]	jcottrell@youthrivefl.org		
Project Location [County(ies)]	Hernando, Pasco, Citrus, Hillsborough	Proposed Project Start Date	07/01/25

Proposed Project Funding Request	
<i>Total Proposed Project Amount (100%)</i>	\$175,000
Local Match [10%]	\$17,500
Requested Funding Amount [90%]	\$157,500

As the authorized Grant Recipient Representative, I hereby certify that the information contained in this form is true and accurate and is submitted in accordance with the grant application instructions.

Signature of Grant Recipient Representative

Date

DRAFT



Transportation Disadvantaged Innovative Service Development Grant

PROJECT SCOPE

Applicants are advised to carefully read the entire program manual for additional guidance. Proposals MUST complete the following sections. Applications that are incomplete or do not follow the instructions will not be considered.

Evidence of Need:

- a)** Describe service limitations or gaps within the current transportation system and the resulting mobility access challenge(s). For current funded projects, describe how the project is addressing service limitations or gaps.

The limitations that we are currently experiencing involve cross country travel. As of now we can only operate in Hernando County with the current staff we have. Securing this funding would allow us to add a driver and allow us to take people to crucial doctor appointments in Pasco and Citrus County. We also hope to be able to grow our ability to be able to provide transportation for other important trips i.e. employment. There are also several communities that live on the southern border of the county line who we cannot currently service, but would benefit from this because they are much closer to our infrastructure than that of Pasco or Citrus Counties.

- b)** Provide details regarding the scale or urgency of the challenge and the size of the specific populations that are affected.

The scale and urgency is similar to that of our normal needs within the county. Out of county transit is a request received every day sometimes multiple times due to specialists being in other counties and like stated above employment. It would open up access to the disadvantaged to get employment they would not be able to have right now.

- c)** Provide any documentation or evidence of the challenge(s), such as from a locally developed Transportation Disadvantaged Service Plan (TDSP), other planning document, or other supporting information.

Project Description:

- a)** Provide a detailed description of the proposed project, including the service area and type(s) of service that will be offered. For current funded projects, any changes to the existing project should be clear and easy to identify.

We will provide ambulatory and wheelchair rides to Medical appointments and other necessary trips to Pasco and Citrus counties.

- b)** Identify an estimated number of trips and riders the proposed project will serve. Explain how estimates were determined. For current funded projects, provide the number of trips and riders the project has served to date.

50-100 trips a month is an estimated amount if trips we would receive initially, and hope to grow the service. Estimate was determined from doing 2 round trips a day (4 trips) times 20 average operating days puts us at 80. With demand fluctuation, 50-100 is a reasonable estimate.

- c)** Identify potential or planned destinations such as a' hospital, employment center, educational/training location, or other life-sustaining activities.

Several large medical plazas in Pasco County, as well Career Source Pasco/Hernando locations and other employment opportunities.

- d)** Explain how the project will be or is being implemented, including details on how existing and potential riders will be informed of the proposed service AND how services are being or will be requested and provided.

We will market the new service in our LCB meetings, on the website, update our brochures and website to include this info, and inform our existing clients and frequented locations that service the disadvantaged to get the word spread as quickly as possible.

- e)** If the proposed project will utilize a transportation hub to connect customers to the broader transportation system, explain the coordination of schedules between the services and how the rider will transfer between the two systems.

- f)** Explain the process for ensuring riders are eligible to receive Transportation Disadvantaged services. Include how rider eligibility will be determined and, if not by the applicant, what organization will be determining that a rider is transportation disadvantaged, pursuant to Chapter 427, Florida Statutes.

We will use the same qualifications that we use for 5310 funding. Clients over 65, clients that are disabled, or under the federal poverty level. It will be processed the same way as all the applications

Project Innovation:

- a)** Explain how the proposed project will or will continue to do something in a new or improved way that differs from services already being provided. Information provided should clearly identify what is being tested (on-demand service, new service hours/days, etc.)

We will continue to provide the same service just increasing access to new geographical areas.

- b)** Explain how the proposed project will or will continue to enhance an eligible rider's mobility.

We will offer the same mobility options, just increased access.

Demonstration of Proposed Outcomes:

- a)** Describe the proposed project's intended outcomes, and how they will address at least one of the ISD Program's objectives.

The projects intended outcome will be to increase access to the disadvantaged to Medical appointments and other necessary trips in neighboring counties. Right now we cannot cross the county lines, restricting our clients ability to travel to important appointments. The two objectives we will be addressing are Increase a transportation disadvantaged person's access to daily activities that could include employment, education, medical and shopping, etc.

Enhance regional connectivity and cross-county mobility.

- b)** Provide details regarding the specific performance data that will be collected and analyzed (including customer satisfaction survey results) to demonstrate the project's actual vs. intended outcomes, AND whether the availability of the data has been verified. For current funded projects, highlight achievements made in meeting at least one of the program's objectives. This could include a summary of quarterly progress reports or other performance data as well as lessons learned

You Thrive Florida does consistent surveying of our clients to ensure satisfaction,

- c)** Describe any planning efforts or actions taken to address sustainability.

Other Required Application Elements:

- a) Project Budget:** Provide a Proposed Project Expense Budget to support the total amount of funding requested. Include a budget table here or use the budget worksheet provided. CTCs are encouraged to edit/update the worksheet based on their expense/budget items.

- b) Proposed Service Rates:** Provide the proposed project service rate(s) by mode and unit of service (trip, mile). Demonstrate how the proposed rates were determined.

\$20.83/mile calculated by monthly budget of \$14,853 divided by 700 monthly miles. 700 monthly miles is estimated by choosing a location in Pasco County we will be frequenting and estimating 2 round trips a day.

- c) Project Timeline:** Provide the project timeline, identifying the project start date, project implementation date, and any major milestones.

The project will start on 7/1/2025 and run continuously.

- d) Project Personnel:** Provide the name, current title and summary of work experience for each key staff member who will work on the project.

Jeff Cottrell - Transportstion Director

Kim Kaye- Driver 20+ years

Judy Snyder - Driver 20+ years

Louis Ocdore - Driver 20+ years

Chris Wheeler - Driver 3+ years

Matt Guerrieri - Driver 3+ years

Carmen Vazquez - Driver 3+ Years

- e) Local Match:** Describe the source of the local match and when such funds will be available.

We have funds from our 5310 federal funding and local private donations.

Collaboration and Partnership (Not required but encouraged):

- a)** If the proposed project is collaborative, describe key project partners, their specific role(s) in the project, and how the collaboration increases the likelihood of the project's long-term sustainability and success. For current funded projects that have an established partnership, describe how the partnership supports the accomplishments of the project's goals.

- b)** Applicants may further strengthen their proposals by attaching letters of commitment, cooperative agreements, MOU, or other evidence of strong commitment from partners. Letters of support for the project are not considered a partnership.

Utilization of Non-Traditional Service Providers (Not required but encouraged):

- a)** If the proposed project includes the utilization of transportation network companies (TNCs), taxi and other non-traditional transportation service providers, describe how such services will add value to the existing TD services.

REVIEW AND RATIFICATION OF THE SHIRLEY CONROY GRANT APPLICATION BY THE COMMUNITY TRANSPORTATION COORDINATOR (CTC)

The Hernando County Community Transportation Coordinator (CTC), You Thrive, has applied for the Shirley Conroy Grant in the amount of \$327,016. Additionally, they will provide the required local funding match of \$62,671.60 (10%) for the purchase of a new 12-passenger vehicle with space for 2 wheelchairs. This new vehicle is necessary due to several older vehicles being taken out of service this year.

Staff Recommendation: It is recommended the TDLCB review and ratify the CTC Shirley Conroy Grant application and authorize the Chair's signature thereon.

Attachment: Shirley Conroy Grant Application



**SHIRLEY CONROY RURAL AREA
CAPITAL ASSISTANCE GRANT
REQUEST FOR FUNDING**

DATE SUBMITTED	4/30/25
LEGAL NAME OF REQUESTING CTC	Mid Florida Community Servides dba You Tthirve Florida
FEDERAL IDENTIFICATION NUMBER	59-1235202
REGISTERED ADDRESS	820 Kennedy Blvd
CITY, STATE, ZIP CODE	Brooksville, FL 34601
CONTACT PERSON FOR THIS GRANT	Jeff Cottrell
PHONE NUMBER	3527991510
E-MAIL ADDRESS	jcottrell@youthrivefl.org
PROJECT LOCATION [County(ies)]	Hernando
PROPOSED START DATE	5/1/25
AMOUNT OF FUNDING REQUESTED (90%)	\$294,314.40

<p><u>CTC REPRESENTATIVE AUTHORIZATION AND ACKNOWLEDGEMENT</u></p> <p>I hereby certify that this request has been duly authorized by the governing body of the CTC. The CTC also certifies that it has reviewed and understands the Grant Program Manual and intends to complete the project in compliance with all grant program requirements if the assistance is awarded.</p>	<p><u>LOCAL COORDINATING BOARD APPROVAL</u></p> <p>I hereby certify that this request for funding has been reviewed in its entirety by the Local Coordinating Board.</p>
Signature Of Authorized Representative	Coordinating Board Chairperson's Signature
Date	Date
Jeff Cottrell	
Name of Authorized Representative and Title	Name of LCB Chairperson

JUSTIFICATION FOR EQUIPMENT REQUESTED (must include specific details supporting the need, the impact/value the equipment will provide to the coordinated system. If space provided is not enough for explanation of need, please attach an additional page):

We are requesting 1 new 12 passenger , 2 wheelchair capable vehicle as the few we have are aging and will be out of service this year. When these vehicles go out of service, we will not be able to continue the same level of service unless we have a replacement for them. Our service relies on being able to transport wheelchairs, and bring restricted to being able to transport one at a time severely limits our ability to provide mobility services.

DESCRIPTION OF CAPITAL EQUIPMENT REQUESTED:

Vehicles

1, 2, 3, etc. +	(R) or (E)*	Fuel Type **	Description/Vehicle Type/Procurement Source	Quantity	Estimated Cost (from Order Form)
2	R	G	Cutaway	1	\$327,016.00

+ Prioritization of Need

*Replacement (R) or Expansion (E)

** Fuel Type – D=Diesel G=Gas A=Alternative

Other Equipment Requested (NOT as part of a Vehicle Purchase)

1, 2, 3, etc. +	Description	Quantity	Estimated Cost

+ Prioritization of Need

Total Project Cost	(100%)	\$327,016.00
Less Local Match	(10%)*	\$62671.60
Transportation Disadvantaged Trust Funds	(90%)	\$294,314.40

SOURCE OF REQUIRED LOCAL MATCH:

CTD Trip & Equipment grant, and 5310 operating funds grant



**SHIRLEY CONROY RURAL AREA
CAPITAL ASSISTANCE GRANT
CURRENT VEHICLE INVENTORY**

NAME OF CTC: You Thrive Florida

Model Year	Chassis Make and Model	Vehicle Identification Number (17 Digits)	Maximum Ambulatory/ Wheelchair Passenger Seating	Average Vehicle Miles Per Year	Current Mileage as of (Date)	Anticipated Retirement Year	Source of Funding
2018	Ford 350	1FDVU4XM7J KA33119	8	20000	182315	2025	CTD
2016	Chevy 3500	1GB3G2CL4F 1240573	8	200000	174468	2025	CTD

NOTE: Identify the Vehicle(s) that would be replaced with this or other grants by placing * next to the model year.

REVIEW AND APPROVAL OF THE FY 2026 RATE CALCULATION FOR SERVICES

The Commission for the Transportation Disadvantaged (CTD) has approved the attached 2025-2026 Rate Calculation as submitted by the Community Transportation Coordinator (CTC). The CTC utilizes the CTD's Rate Calculation Workbook which contains methodology that considers aspects of the operations and is the basis of the fees charged for services by the CTC for the upcoming year. The CTD requires the Rate Calculation to be reviewed and approved by the Transportation Disadvantaged Local Coordinating Board. The Rate Calculation will be inserted into the Transportation Disadvantaged Service Plan that is annually reviewed and updated. The annual update of the TDSP is scheduled for the next meeting of the Transportation Disadvantaged Local Coordinating Board to be held on September 11, 2025.

Staff Recommendation: It is recommended the TDLCB review and approve the FY 2026 Rate Calculation as reviewed and approved by the Commission for Transportation Disadvantaged.

Attachment: 2025-2026 Rate Calculation Workbook

Preliminary Information Worksheet

Version 1.4

CTC Name: Mid Florida Community Services, Inc DBA
You Thrive Florida

County (Service Area): Hernando

Contact Person: Jeff Cottrell

Phone # 352-799-1510

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: Mid Florida Community Services, Inc DBA You Thrive Florida
County: Hernando

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

	Prior Year's ACTUALS from July 1st of 2023 to June 30th of 2024	Current Year's APPROVED Budget, as amended from July 1st of 2024 to June 30th of 2025	Upcoming Year's PROPOSED Budget from July 1st of 2025 to June 30th of 2026	% 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	\$ 43,993	\$ 45,000	\$ 46,500	2.3%	3.3%	
Medicaid Co-Pay Received						
Donations/ Contributions						
In-Kind, Contributed Services						
Other						
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	\$ 262,135	\$ 418,295	\$ 418,295	59.6%	0.0%	
Non-Spons. Capital Equipment						
Rural Capital Equipment						
Other TD (specify in explanation)	\$ 90,637			-100.0%		
Bus Pass Program Revenue						
USDOT & FDOT						
49 USC 5307						
49 USC 5310		\$ 196,975	\$ 196,975		0.0%	
49 USC 5311 (Operating)	\$ 511,988			-100.0%		
49 USC 5311(Capital)			\$ 162,000			
Block Grant						
Service Development						
Commuter Assistance						
Other DOT (specify in explanation)						
Bus Pass Program Revenue						
AHCA						
Medicaid						
Other AHCA (specify in explanation)						
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						
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: Mid Florida Community Services, Inc DBA You Thrive Florida
County: Hernando

1. Complete applicable GREEN cells in columns 2, 3, 4, 5, and 7

	Prior Year's ACTUALS from July 1st of 2023 to June 30th of 2024	Current Year's APPROVED Budget, as amended from July 1st of 2024 to June 30th of 2025	Upcoming Year's PROPOSED Budget from July 1st of 2025 to June 30th of 2026	% 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						
Insurance Recovery	\$ 46,181			-100.0%		
xxxx						
Bus Pass Program Revenue						
Balancing Revenue to Prevent Deficit						
Actual or Planned Use of Cash Reserve	\$ 9,130	\$ 158,609	\$ 159,542			
Balancing Revenue is Short By = <input type="text"/> None <input type="text"/>						
Total Revenues =	\$964,064	\$818,879	\$983,312	-15.1%	20.1%	

EXPENDITURES (CTC/Operators ONLY / Do NOT include Coordination Contractors!)						
Operating Expenditures						
Labor	\$ 367,558	\$ 321,101	\$ 329,736	-12.6%	2.7%	
Fringe Benefits	\$ 125,636	\$ 100,304	\$ 101,851	-20.2%	1.5%	
Services	\$ 15,035	\$ 14,852	\$ 14,607	-1.2%	-1.6%	
Materials and Supplies	\$ 134,046	\$ 214,229	\$ 170,859	59.8%	-20.2%	
Utilities	\$ 23,149	\$ 21,025	\$ 21,145	-9.2%	0.6%	
Casualty and Liability	\$ 216,501	\$ 65,000	\$ 108,734	-70.0%	67.3%	
Taxes						
Purchased Transportation:						
Purchased Bus Pass Expenses						
School Bus Utilization Expenses						
Contracted Transportation Services						
Other	\$ -	\$ -	\$ -			
Miscellaneous						
Operating Debt Service - Principal & Interest						
Leases and Rentals						
Contrib. to Capital Equip. Replacement Fund	\$ 18,199	\$ 20,000	\$ 20,000	9.9%	0.0%	
In-Kind, Contributed Services	\$ -	\$ -	\$ -			
Allocated Indirect	\$ 63,939	\$ 62,368	\$ 54,380	-2.5%	-12.8%	
Capital Expenditures						
Equip. Purchases with Grant Funds	\$ -	\$ -	\$ 162,000			
Equip. Purchases with Local Revenue						
Equip. Purchases with Rate Generated Rev.						
Capital Debt Service - Principal & Interest						
Total Expenditures =	\$964,063	\$818,879	\$983,312	-15.1%	20.1%	
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.

Comprehensive Budget Worksheet

Version 1.4

CTC: Mid Florida Community Services, Inc DBA You Thrive Florida
 County: Hernando

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

1	2	3	4	5	6	7
	Prior Year's ACTUALS from July 1st of 2023 to June 30th of 2024	Current Year's APPROVED Budget, as amended from July 1st of 2024 to June 30th of 2025	Upcoming Year's PROPOSED Budget from July 1st of 2025 to June 30th of 2026	% 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

Budgeted Rate Base Worksheet

Version 1.4

CTC: Mid Florida Community Services, Inc DBA You Thrive Florida

County: Hernando

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
	2025
	to
	June 30th of
	2026
1	2

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?
3	4	5

REVENUES (CTC/Operators ONLY)

Local Non-Govt

Farebox	\$	46,500
Medicaid Co-Pay Received	\$	-
Donations/ Contributions	\$	-
In-Kind, Contributed Services	\$	-
Other	\$	-
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	\$	418,295
Non-Spons. Capital Equipment	\$	-
Rural Capital Equipment	\$	-
Other TD	\$	-
Bus Pass Program Revenue	\$	-

USDOT & FDOT

49 USC 5307	\$	-
49 USC 5310	\$	196,975
49 USC 5311 (Operating)	\$	-
49 USC 5311(Capital)	\$	162,000
Block Grant	\$	-
Service Development	\$	-
Commuter Assistance	\$	-
Other DOT	\$	-
Bus Pass Program Revenue	\$	-

AHCA

Medicaid	\$	-
Other AHCA	\$	-
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	\$	-
Community Care for Elderly	\$	-
Other DOEA	\$	-
Bus Pass Program Revenue	\$	-

DCA

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

\$	46,500	
\$	-	
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\$	418,295	\$	-	\$	-
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\$	-	\$	-	\$	-
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\$	-	\$	162,000	\$	162,000
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\$	-	\$	-	\$	-

YELLOW cells
are NEVER Generated by Applying Authorized Rates

BLUE cells
Should be funds generated by rates in this spreadsheet

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 NQT 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.

local match req.
\$ 46,477
\$ -
\$ -
\$ -
\$ 21,886
\$ 18,000

Worksheet for Program-wide Rates

CTC: Mid Florida Comm Version 1.4
County: Hernando

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 <u>Projected</u> Passenger Miles =	188,554
Rate Per Passenger Mile = \$	2.22
Total <u>Projected</u> Passenger Trips =	13,388
Rate Per Passenger Trip = \$	31.24

Fiscal Year

2025 - 2026

Avg. Passenger Trip Length = 14.1 Miles

Rates If No Revenue Funds Were Identified As Subsidy Funds

Rate Per Passenger Mile = \$	5.22
Rate Per Passenger Trip = \$	73.45

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: Mid Florida County
 County: Hernando

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 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
Answer # 2 for Ambulatory Service	Answer # 2 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?.....

<input type="radio"/> Yes	<input type="radio"/> Yes	<input type="radio"/> Yes	<input type="radio"/> Yes
<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: Mid Florida Con Version 1.4
 County: Hernando

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
 per passenger mile?.....
 Pass. Trip **Leave Blank**
 Pass. 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

		RATES FOR FY: 2025 - 2026				
		Ambul	Wheel Chair	Stretcher	Group	
Projected Passenger Miles (excluding totally contracted services addressed in Section II) =	188,554 =	99,933	+ 88,620	+ <input type="text"/>	+ Leave Blank	0
Rate per Passenger Mile =		\$1.66	\$2.85	\$0.00	\$0.00	\$0.00
				per passenger	per group	
Projected Passenger Trips (excluding totally contracted services addressed in Section II) =	13,388 =	7,095	+ 6,293	+ <input type="text"/>	+ Leave Blank	
Rate per Passenger Trip =		\$23.39	\$40.10	\$0.00	\$0.00	\$0.00
				per passenger	per group	
2. If you answered # 1 above and want a COMBINED Rate per Trip <u>PLUS</u> a per Mile add-on for 1 or more services,...						
Combination Trip and Mile Rate						
		Ambul	Wheel Chair	Stretcher	Group	
...INPUT the Desired Rate per Trip (but must be less than per trip rate above) =		<input type="text"/>	<input type="text"/>	<input type="text"/>	Leave Blank	\$0.00
Rate per Passenger Mile for Balance =		\$1.66	\$2.85	\$0.00	\$0.00	\$0.00
				per passenger	per group	

		Rates if No Revenue Funds Were Identified As Subsidy Funds				
		Ambul	Wheel Chair	Stretcher	Group	
Rate per Passenger Mile =		\$3.90	\$6.69	\$0.00	\$0.00	\$0.00
				per passenger	per group	
Rate per Passenger Trip =		\$54.99	\$94.26	\$0.00	\$0.00	\$0.00
				per passenger	per group	
Program These Rates Into Your Medicaid Encounter Data						

Worksheet for Multiple Service Rates

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

CTC: Mid Florida Con Version 1.4

County: Hernando

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

Mary Elwin

From: Mills, Kyle <Kyle.Mills@dot.state.fl.us>
Sent: Monday, May 5, 2025 3:25 PM
To: Jeff Cottrell; KRIS BATES
Cc: Mary Elwin
Subject: 2025-2026 Hernando Rate Model Approved
Attachments: 2025-2026 Hernando Rate Model Approved.xls

CAUTION: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good Afternoon Jeff,

I have reviewed the attached 2025-26 Rate Model Calculation Spreadsheet for some of the most common procedural and utilization errors. All questions have been addressed and it is approved for further review at the local level as appropriate.

By copy of this email, I am advising your planning agency on our completion of this effort and the readiness to advance the spreadsheet to the LCB for approval and inclusion in the TDSP update, if not already done.

When the time comes, I will produce your Trip and Equipment grant agreement with the passenger trip rates from this spreadsheet presuming no further changes by you or the LCB.

Projected Passenger Trips (excluding totally contracted services addressed in Section II) =	13,388	=	
			

Let me know if you have any questions.

Thank You,



Kyle Mills

Area 4 Project Manager

Phone (850) 410-5713

Email: Kyle.Mills@dot.state.fl.us

Website: www.fdot.gov/ctd

Florida Commission for the Transportation Disadvantaged

605 Suwannee Street, MS 49

Tallahassee, Florida 32399-0450

Phone (850) 410-5700 Fax (850) 410-5752

TD Helpline 1-800-983-2435

AGENDA ITEM E

**QUARTERLY REPORT FOR JANUARY 1 THROUGH MARCH 31, 2025, BY THE COMMUNITY
TRANSPORTATION COORDINATOR (CTC) AGENCY – Jeff Cottrell, You Thrive Florida**

As an informational item, attached is the Community Transportation Coordinator (CTC) Quarterly Report for the period of January 1, 2025, through March 31, 2025.

This is an informational item; no action is required.

Staff Recommendation: It is recommended the TDLCB review the quarterly report and provide comments as desired. No action is required by the TDLCB at this time.

Attachment: CTC Quarterly Report will be sent under separate cover

COMMUNITY TRANSPORTATION FOR DISADVANTAGED REPORT

Hernando County, Florida

**Quarterly System Report for Fiscal Period
JULY 1, 2024 THROUGH JUNE 30, 2025**

PREPARED FOR:

Hernando County Transportation Disadvantaged Coordinating Board

PREPARED BY:

You Thrive Fl Paratransit

You Thrive Fl

Phone (352) 799-1510 Fax: (352) 754-9390

INTRODUCTION

Introduction to Hernando County's Transportation Disadvantaged System:

You Thrive Florida Paratransit, a department within Mid Florida Community Services, Inc., operates as the Community Transportation Coordinator (CTC) for the Transportation Disadvantaged program in Hernando County. As the coordinator, You Thrive Florida Paratransit has the responsibilities to provide transportation to all Hernando County residents in a safe and cost effective manner. System priorities, established by members of a Local Coordinating Board, include the provision of transportation county-wide for medical, nutritional, educational, work, and recreational trips, respectively. Services are for senior citizens (over 60), physically or mentally challenged individuals, and economically or transportation disadvantaged general public.

The system utilizes a shared ride multi-load approach with guaranteed arrival times to rider destinations. Because many citizens are wheelchair bound, all service fleet vehicles are equipped and in compliance with American with Disabilities Act (ADA) recognized wheelchair lifts and securement devices. You Thrive Florida Paratransit provides physically challenged the system utilizes a shared ride multi-load approach with guaranteed arrival times to rider.

Fare Box Fees:

Non sponsored clients are required to pay a fare box fee. Individual fare box fee is \$5.00 per one way trip. State assistance for fare box fees are available and can be applied for by individuals to offset financial hardships.

Office Hours:

Office hours are Monday through Friday from 7:30 a.m. to 4:30 p.m. except County recognized holidays.

Service Hours-Transportation Disadvantaged:

Transportation Disadvantaged service hours are Monday thru Friday from 6:00 a.m. to 4:00 p.m. except for county recognized holidays.

Scheduling Hours:

Scheduling is provided by telephone Monday thru Friday, excluding County recognized holidays. by calling (352) 799-1510 between the hours of 8:00 a.m. and 4:00 p.m.

YOU THRIVE FLORIDA
MID FLOIRDA COMMUNITY SERVICES, INC.
QUARTERLY SYSTEM REPORT
FOR FISCAL PERIOD
July 1, 2024 through June 30, 2025

<i>Month</i>		<i>Jul-24</i>	<i>Aug-24</i>	<i>Sep-24</i>	<i>Oct-24</i>	<i>Nov-24</i>	<i>Dec-24</i>	<i>Jan-25</i>	<i>Feb-25</i>	<i>Mar-25</i>	<i>Apr-25</i>	<i>May-25</i>	<i>Jun-25</i>	<i>TOTAL</i>
Work Days		20	23	20	22	19	18	21	20	21	21	22	19	246
Overview of Total Trip Requests	Total incoming calls received	2752	2660	2654	3026	2506	2706	3224	3256	3718				26,502
	Average number calls received per day	138	116	133	138	132	150	154	163	177				
	Total trip requests received	1376	1330	1327	1513	1253	1353	1612	1628	1859				13,251
	Total cancelled trips	292	324	305	404	206	233	256	282	397				2,699
	Total ASAP Trips	10	17	45	26	15	29	39	25	24				230
	Total NS trips	40	28	20	18	17	46	38	35	39				281
	Total trip requests provided	1034	961	957	1065	1015	1045	1279	1286	1399				10,041
% of Trip Requests Provided	75.1%	72.3%	72.1%	70.4%	81.0%	77.2%	79.3%	79.0%	75.3%	#DIV/0!	#DIV/0!	#DIV/0!		
% of Trip Requests Cancelled	21.2%	24.4%	23.0%	26.7%	16.4%	17.2%	15.9%	17.3%	21.4%	#DIV/0!	#DIV/0!	#DIV/0!		
% of No Show Trip Requests	2.9%	2.1%	1.5%	1.2%	1.4%	3.4%	2.4%	2.1%	2.1%	#DIV/0!	#DIV/0!	#DIV/0!		

**YOU THRIVE FLORIDA
MID FLOIRDA COMMUNITY SERVICES, INC.
QUARTERLY SYSTEM REPORT
FOR FISCAL PERIOD
July 1, 2024 through June 30, 2025**

Month	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Work Days	20	23	20	22	19	18	21	20	21	21	22	19	246
REASON FOR UNPROVIDED REQUESTS													
% of Trip Requests unable to Provide	0.00%	0.00%	0.00%	1.98%	1.76%	2.00%	2.30%	2.33%	2.26%	#DIV/0!	#DIV/0!	#DIV/0!	
Same day Request				12	9	10	15	10	13				69
Out-of-county request				6	5	7	10	12	9				49
Stretcher				1	0	2	0	1	0				4
Holiday/Weekend				3	1	2	4	6	9				25
Before 8 a.m./after 3:00 p.m. appointments				8	7	6	8	9	11				49
Total Unprovided	0	0	0	30	22	27	37	38	42	0	0	0	196
TRIP PURPOSE	Medical	634	605	579	648	608	613	826	835	925			6,273
	Nutritional/Shop	203	166	160	192	204	192	182	170	226			1,695
	Connector	0	0	0	0	0	0	0	0	0			0
	Education	79	74	101	90	85	68	99	81	70			747
	Employment	84	80	69	86	60	65	70	74	105			693
	Other	34	36	48	49	58	107	102	126	73			633
	Total	1,034	961	957	1,065	1,015	1,045	1,279	1,286	1,399	0	0	0

YOU THRIVE FLORIDA
MID FLOIRDA COMMUNITY SERVICES, INC.
QUARTERLY SYSTEM REPORT
FOR FISCAL PERIOD
July 1, 2024 through June 30, 2025

	Month	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
	Work Days	20	23	20	22	19	18	21	20	21	21	22	19	246
TRIP TYPE	Elderly (Over 60)	752	673	710	794	770	781	947	951	1,053				7,431
	Adult	282	288	247	271	245	264	332	335	346				2,610
	Child (Under 16)	0	0	0	0	0	0	0						0
	Total	1,034	961	957	1,065	1,015	1,045	1,279	1,286	1,399	0	0	0	10,041
UNDUPLICATED COUNT	Elderly (Over 60)	108	102	102	105	104	107	122	126	132				900
	Percent %	80.6%	77.9%	80.3%	79.5%	79.4%	79.3%	80.8%	82.9%	81.5%	#DIV/0!	#DIV/0!	#DIV/0!	71.7%
	Adult	26	29	25	27	27	28	29	26	30				247
	Percent %	19.4%	22.1%	19.7%	20.5%	20.6%	20.7%	19.2%	17.1%	18.5%	#DIV/0!	#DIV/0!	#DIV/0!	19.7%
	Child (Under 16)	0	0	0	0	0	0							0
	Percent %	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	#DIV/0!	#DIV/0!	#DIV/0!	0%
Total	134	131	127	132	131	135	151	152	162	0	0	0	1,255	
TRIP MODE	AMBI	490	490	512	549	483	514	698	693	711				5,140
	WHLI & SCOI	544	471	445	516	532	531	581	593	688				4,901
	AMBO	0	0	0		0	0							0
	Total	1,034	961	957	1,065	1,015	1,045	1,279	1,286	1,399	0	0	0	10,041
FUNDING SOURCE	TRIP & EQUIP	845	813	823	911	850	889	1,051	1,097	1,224				8,503
	ISD													
	DOEA	189	148	134	154	165	156	228	189	175				1,538
	Total	1,034	961	957	1,065	1,015	1,045	1,279	1,286	1,399	0	0	0	10,041
NO SHOW	CTD - T&E	34	19	11	11	12	20	18	14	16				155
	DOEA	6	9	9	7	5	26	20	21	23				126
	Total No Shows	40	28	20	18	17	46	38	35	39	0	0	0	281

**YOU THRIVE FLORIDA
MID FLOIRDA COMMUNITY SERVICES, INC.
QUARTERLY SYSTEM REPORT
FOR FISCAL PERIOD
July 1, 2024 through June 30, 2025**

<i>Month</i>	<i>Jul-24</i>	<i>Aug-24</i>	<i>Sep-24</i>	<i>Oct-24</i>	<i>Nov-24</i>	<i>Dec-24</i>	<i>Jan-25</i>	<i>Feb-25</i>	<i>Mar-25</i>	<i>Apr-25</i>	<i>May-25</i>	<i>Jun-25</i>	<i>TOTAL</i>	
Work Days	20	23	20	22	19	18	21	20	21	21	22	19	246	
OPERATING DATA	Suspended	0	0	0	0	0							0	
	System Miles	15352	18610	12948	14965	13891	14452	16910	16758	17530			141,416	
	Revenue Miles	12248	12267	9162	12310	12103	12226	15069	15263	16210			116858	
	Average System Miles per trip	11.8	12.8	9.6	11.6	11.9	11.7	11.8	11.9	11.6	#DIV/0!	#DIV/0!	#DIV/0!	11.6
	System Hours	786.48	860.65	764.62	827.08	776.88	786.13	958.60	848.82	976.45				7,586
	Revenue Hours	678.30	694.77	646.88	701.85	648.53	661.52	809.83	732.57	852.42				6,427
	Cost Per Trip	\$25.95	\$26.02	\$25.77	\$25.92	\$25.95	\$25.94	\$25.94	\$25.95	\$25.93	#DIV/0!	#DIV/0!	#DIV/0!	
	System Cost per Mile	\$2.17	\$2.01	\$2.67	\$2.21	\$2.14	\$2.18	\$2.17	\$2.15	\$2.21	#DIV/0!	#DIV/0!	#DIV/0!	

COMPLIMENTS/COMPLAINTS

		Month	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
		Work Days	20	23	20	22	19	18	21	20	21	21	22	19	TOTAL
TRANS HERNANDO	COMPLIMENT	Driver	4	4	5	8	5	7	4	8	5				50
		Vehicle	0	0	0	0	0	0	0	0	0				0
		Service	0	1	0	2	0	2	1	0	1				7
		Policy	1	0	0	0	0	0	0	0	0				1
		Other	0	0	0	0	0	0	0	0	0				0
	COMPLAINT	Driver	0	0	0	0	1	0	0	0	0				1
		Vehicle	0	0	0	0	0	0	0	0	0				0
		Service	0	0	0	0	0	0	1	2	0				3
		Policy	0	1	1	0	0	0	0	1	0				3
		Other	0	0	0	0	0	0	0	0	0				0

BREAKDOWNS/ACCIDENTS

		Month	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL	
		Work Days	20	23	20	22	19	18	21	20	21	21	22	19	TOTAL	
TRANS HERNANDO	TOWS	0	3	0	1	2	1	1	0	0					8	
	ROAD CALLS	0	0	2	0	0	0	1	0	1					4	
	INCIDENT & ACCIDENTS	CHARGEABLE	0	0	0	0	0	0	0	0	0					0
		NON-CHARGEABLE	0	0	0	0	0	0	0	0	0					0