

Lee County Transportation Disadvantaged  
Local Coordinating Board

10:00 AM, December 4, 2015  
City of Cape Coral Public Works – Green Room  
815 Nicholas Pkwy E, Cape Coral FL 33990  
239-330-2240



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## AGENDA

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### Call to Order

### Pledge of Allegiance

### Introductions

### New Business

1. \*Approval of the Minutes from the September 4, 2015 Meeting
2. Public Comments for Items on or not on the Agenda

### Other Business

3. \*Election of a Vice-Chair (Brian Raimondo)
4. \*Appointment of the Annual CTC Evaluation Committee (Brian Raimondo)
5. \*Amend TD Program Eligibility Criteria (Brian Raimondo)
6. Program Updates and Distribution Items (Brian Raimondo)
  - Calendar of events
  - TDSP
7. Good Wheels' Updates and Reports (Good Wheels)
  - Operator Payments
  - Ridership and complaints for July through September
8. Member Comments

### Adjournment

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\*Action Items    +May Require Action

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**MINUTES OF THE LEE COUNTY LOCAL COORDINATING BOARD  
MEETING FOR THE TRANSPORTATION DISADVANTAGED**

**Held on September 4, 2015 @ 10:00 am**

City of Cape Coral Annex Building, Conference Room A200, 815 Nicholas Pkwy E, Cape Coral, FL

<b>A Representative of:</b>	<b>Voting Members</b>	<b>Agency</b>	<b>Alternates to Voting Members</b>	<b>Agency</b>
An elected official from the MPO Board to serve as the official Chairpersons.	Rick Williams (Present)	City of Cape Coral	No alternate	
A. A local representative of the Florida Department of Transportation (DOT)	Debi Stephens (Present)	FDOT	Richard Shine (Absent)	FDOT
B. A local representative of the Florida Department of Children and Families (DCF)	Donna Torres (Absent)	DCF	Nathan Santos (Absent)	DCF
C. A local representative of the Public Education Community which could include, but not be limited to, a representative of the District School Board, School Board Transportation Office, or Headstart Program in areas where the School District is responsible	Roger Lloyd (Absent)	Lee County School Board	Vacant	
D. In areas where they exist, a local representative of the Division of Vocational Rehabilitation Services or the Division of Blind Services, representing the Department of Education	Mary Watford (Absent)	DOE	Flora Gonzalez (Present)	DOE
E. A person recommended by the local Veterans Service Office, representing Veterans of the county	Jerry Conway (Absent)		Frank Greulich (Absent)	
F. A person recognized by the Florida Association for Community Action representing the economically disadvantaged	Kim Hustad (Absent)	Lee County Human Services	Robin Jewett (Absent)	
G. A person representing the Elderly in the county	Linda Carter (Present)		(Vacant)	
H. A person with a disability representing the disabled in the county	(Vacant)		(Vacant)	
I-1. [One of Two] Citizen Advocates in the County	Michael Pierce (Present)		(Vacant)	
I-2. [One of two] Citizen Advocates this one must be a person who uses the transportation service(s) of the system as their primary means of transportation.	David Lane (Absent)		(Vacant)	
J. A local representative for children at risk	Lorena Rodriguez (Present)	Lee Memorial-Children's Hospital	Mark Tesoro (Absent)	Lee Memorial-Children's Hospital

K. In areas where they exist, the Chairperson or designee of the local Mass Transit or Public Transit Systems Board, except in cases where they are also the Community Transportation Coordinator.	Steve Myers (Absent)	LeeTran	Peter Gajdjis/ Jill Brown (Present)	LeeTran
L. A local representative of the Florida Department of Elder Affairs	Vacant		Vacant	
M. An experienced representative of the local private for profit transportation industry. In areas where such representative is not available, a local private non-profit representative will be appointed, except where said representative is also the CTC.	Michael Griffin (Absent)	SWFL Transportation	Priscilla Hardaway (Absent)	Creative Resources
N. A local representative of the Florida Agency for Health Care Administration	Joe Martinez (Present)	AHCA	Patricia Brooks (Absent)	AHCA
O. A representative of the Regional Workforce Development Board established in Chapter 445, <i>Florida Statutes</i> .	Jim Wall (Absent)	Career Source SWFL	Deb Reardon (Absent)	Career Source SWFL
P. A representative of the local medical community, which may include, but not be limited to, kidney dialysis centers, long term care facilities, hospitals, local health department or other home and community based services, etc.	Heidi Shoriak (Present)	Lee Memorial Health Systems	Vacant	Lee Memorial Health Systems

Also in attendance: Alan Mandel- Good Wheels, Rosalie Berlin – Citizen, Renee Sluzalis- CILGC and Don Scott and Brian Raimondo – Lee MPO.

The meeting was called to order by Chairman Williams at 10:02am. There was a quorum. The Pledge was recited and introductions were made.

**Agenda Item #1 – Approval of the Minutes from the September 4, 2015**

**Motion by Ms. Carter and seconded by Mr. Pierce to approve the minutes from the September 4, 2015 meeting. Motion carried unanimously.**

**Agenda Item #2 – Public Comments on Items on the Agenda**

None

**Agenda Item #3 – Public Comments on Items Not on the Agenda**

None

**Agenda Item #4 – Amend TD Program Eligibility Criteria**

Mr. Raimondo mentioned that he talked to John Irvine about the Good Wheels eligibility criteria that is no longer sufficient or correct. This is due to the change in Medicaid.

Mr. Mandel said in the past most trips were chemo/dialysis, but many TD clients are now HMO/Medicaid. Good Wheels is no longer at full capacity on the buses. In the past they turned down trips, but over the last 3-4 months they have space and need riders. He talked to John Irvine and John questioned the eligibility for Good Wheels. Mr. Mandel said it's up to the LCB to make the decision.

Ms. Stephens asked if Good Wheels isn't using the TD trust funds completely. Mr. Mandel replied that they didn't use it all for 3-4 months last year. Alan said this year is different, they are just about even and should be using it all. Ms. Stephens said in the past there were way more TD trips than funds, but many tried to utilize the Medicaid funds. Mr. Scott talked to other communities and found out Miami and Collier didn't spend all their money either. There was discussion if Good Wheels needed a certain amount of trips, to which Mr. Mandel replied, they fund a certain amount of trips per month. If they use it, they get all the money. However, in subsequent months they can recapture money not spent in previous months.

Ms. Carter said in the evaluations there has always been enough money for chemo/dialysis. Mr. Mandel said that wasn't true, because they spent money out of pocket in the past to cover the unfunded chemo/dialysis trips. Ms. Carter said they should be doing other trip types. Mr. Mandel said they are doing marketing for the first time, since they have unused funding. He asked to keep the hierarchy of trips in the event they get back to full trips. Mr. Scott asked if they are doing all types of trips, and Mr. Mandel said they are.

Mr. Mandel asked if they can cross a county line if a TD person needs to. Ms. Stephens said in the past they did cross county lines, but Mr. Mandel said that was typically for Medicaid. Ms. Gonzalez said the trips from Lehigh to the school in Immokalee have been working great. She said she can collaborate with Good Wheels to get more of these trips, because it's a great service. Mr. Gajdjis said it was a good idea as long as it's monitored, but the out of county trips could really eat up the money. He said try not to do the out of county trips for a year, or try it and then cut it off if it costs too much. Mr. Gajdjis said there is a difference between individual trips and agency trips. He asked if the agency trips can be paid for with different money. Ms. Gonzales said it was possible. Ms. Carter said Flora would need a contract with Good Wheels in order to meet the guide lines that come from Tallahassee.

Mr. Mandel said they have been working with Glades and Hendry to run a route from Belle Glade to Palm Beach County. He wants to run a route from LaBelle to Immokalee. He thought a route from Lehigh to Labelle would then hook them up with the other existing routes. Ms. Carter wanted to know what the standard fare would be to use this, but that would need to be determined.

Mr. Mandel said there is an \$88,000 New Freedom Grant from LeeTran, but they need a match for this from either the agency or the individual.

Mr. Williams said we can approve an eligibility change, amend it or push this back to the next meeting since this is new and has a lot of potential change. Ms. Carter said it would be nice to let it sit until December, but she wants to see the trip hierarchy and didn't want to wait that long.

**Ms. Carter made a motion to do the trip hierarchy, but the motion was rescinded since there is already a trip hierarchy that Good Wheels follows from the TDSP.**

Mr. Mandel asked if we had poverty level for Lee County and Mr. Scott said we can look it up for next meeting. Ms. Stephens asked if Good Wheels would still service TD trips under low income and Mr. Mandel said yes. Mr. Mandel said his issue was they may be turning down trips if the house hold income was \$2600. Mr. Gajdjis replied that there is a chart for this. Ms. Stephens said they never do a verification for the actual house hold income.

The Chair said he would like to table this and get more information.

#### **Agenda Item #5 – Review and Approve the 2014-15 AOR**

Mr. Mandel said for the AOR you will notice it will say ‘Saved with issues’, but it has been saved correctly and submitted without that error.

Ms. Carter said, regarding item #4 one way passenger trips by purpose, it looks like employment purpose is zero and life sustaining is 414. She said every person could be transported in this category to not lose funds and Mr. Mandel agreed. Mr. Mandel said people on the LCB need to go back to their agencies and mention there is funding for trips.

Mr. Gajdjis said it doesn’t make sense why some agencies have zero for trips, where as in the past they had trips.

**Motion by Ms. Carter to approve the AOR and seconded by Ms. Gonzalez. Motion passed unanimously.**

#### **Agenda Item #6 – Review and Approve By-Laws**

Mr. Raimondo mentioned annually they need to approve the by-laws.

**Motion by Ms. Carter and seconded by Mr. Pierce. Approved unanimously.**

Ms. Carter wanted to know if Mr. Williams would continue as chair and he believes he would. However, that is decided by the MPO Board.

#### **Agenda Item #7 – Program Updates and Distribution Items**

Mr. Raimondo distributed the calendar of events and quarterly reports.

#### **Agenda Item #8 Good Wheels’ Updates and Reports**

No report on operator payments.

Mr. Mandel discussed the complaints, saying there was only one. It involved a driver hitting a mailbox, which Good Wheels replaced. The ridership numbers should be around 2,000. He expects the ridership numbers to go up.

Mr. Mandel said there is a shift in Medicaid, stating The Wall Street Journal said the Medicaid numbers are 60 million and will be 80 million in the future. Medicaid brokers are asking GW to provide other trips not only in Lee County. Ms. Stephens said on the ridership page it says Hendry/Glades under Medicaid. She questioned if this was Lee County or Hendry/Glades numbers. Mr. Raimondo looked up the Hendry/Glades LCB agenda package online and their numbers were different than what was provided to the Lee LCB. Therefore, what was provided to the Lee LCB should be correct.

Ms. Carter asked how does Lee Memorial provide patient trips? Ms. Shoriak said transportation is very important to them. They prefer to get patients home, because the hospital doesn’t have enough beds. They need 72 hours to let the Brokers know they need an upcoming ride and they don’t always know 72 hours

in advance. Good Wheels has been leasing or buying used vehicles to meet demand. Ms. Carter asked if Lee Memorial can get a van? Ms. Shoriak said Lee Memorial isn't in the transportation business; they are in the health care business. Mr. Martinez said hospital discharge trips are considered emergency and don't need the 72 hour notice. He said to fill out complaint forms each and every time Lee Memorial has a complaint with AHCA. She said they don't have time to fill out every complaint and then to follow up on them. Mr. Martinez said the state legislature will meet in January for the budget, and that would be a good time to contact them to voice concerns. He also said he gets most of the complaints and responds to them.

**Agenda Item #9 Member's Comments**

Ms. Stephens said a grant workshop is coming up on November 4<sup>th</sup> in Fort Myers at the SWIFT center.

Meeting adjourned at 11:12





## **ELECTION OF A VICE-CHAIRPERSON**

**RECOMMENDED ACTION: Elect a Vice-Chairperson.**

Currently, David Lane is the LCB Vice-Chair.

Pursuant to the By-Laws of the LCB under ARTICLE IV, Section A, Paragraph 2, the election for the Vice-Chairperson shall be at the last regularly scheduled meeting of the year.



## **APPOINTMENT OF A CTC EVALUATION COMMITTEE**

**RECOMMENDED ACTION: Appointment of a CTC Evaluation Committee to conduct the evaluation of Good Wheels, Inc. that will take place in February 2015.**

Pursuant to Chapter 427 *Florida Statutes* 427.015(2), the performance of the coordinator shall be evaluated based on the TD Commission's approved evaluation criteria by the coordinating board at least annually. Although a committee is not required by Rule 41-2, Florida Administrative Code (FAC), in order to conduct the required annual evaluation, sometimes the LCB makes use of a committee to carry out the evaluation.

Committee members and planning staff conduct interviews with the CTC's staff to complete the evaluation. Then, the Committee evaluates the CTC based on the findings obtained during these interviews. The Committee communicates findings, suggestions and develops recommendations which are forwarded through planning staff to the LCB as a draft final report.

The Draft Evaluation Report contains findings, suggestions and recommendations. These are distributed to the Local Coordinating Board, for its review and approval. If the LCB has additional recommendations, planning staff adds these to the Report, and then Planning staff sends the LCB's approved evaluation report on to the Coordinator for the Commission for the Transportation Disadvantaged.



## AMEND TD PROGRAM ELIGIBILITY CRITERIA IN TDSP

### RECOMMENDED ACTION: Review and approve a new Good Wheels' TD Program Eligibility Criteria

During the summer John Irvine, CTD, held discussions with Alan Mandel and MPO staff mentioning that the TD Program eligibility criteria in the TDSP was out of date due to the change in Medicaid. This item was discussed at the September 2015 meeting, but was tabled. After the meeting, MPO staff discussed this item again with Mr. Irvine and he said to review Collier's eligibility criteria. As a side note, Charlotte's was requested, but was nearly two decades old.

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#### Current Lee Eligibility (Taken from the TDSP):

##### Transportation Disadvantaged Program Eligibility:

- ✚ No other means of transport
- ✚ Age
- ✚ Disability
- ✚ Income: The LCB's policy is for the CTC to provide transportation to persons' whose household income is at 200% of the health and human services poverty levels.

Individuals must apply for Transportation Disadvantaged Program eligibility for their transportation to be sponsored by the Florida Commission for the Transportation Disadvantaged. Good Wheels shall implement the application/eligibility process. *Exhibit B* is an example of the application used for Transportation Disadvantaged Program eligibility.

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#### Current Collier Eligibility:

**TD** trips are provided for individuals located in areas where fixed route service is not available and who have no other means of transportation. People who meet the definition of Transportation Disadvantaged (see below) may qualify for sponsorship from the Transportation Disadvantaged Trust Fund. Those seeking sponsorship will be asked to complete an application and should contact CAT at (239) 252-7272 for more information.

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#### Definition of TD:

**Transportation Disadvantaged:** those persons, including children as defined in s. 411.202 F.S. (see below), who because of physical or mental disability, income status, or inability to drive due to age or disability are unable to transport themselves or to purchase transportation and have no other form of

transportation available. These persons are, therefore, dependent upon others to obtain access to health care, employment, education, shopping, or medically necessary or life-sustaining activities.

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## 411.202 F.S

[Title XXX](#)  
SOCIAL  
WELFARE

[Chapter 411](#)  
HANDICAP OR HIGH-RISK CONDITION PREVENTION  
AND EARLY CHILDHOOD ASSISTANCE

[View Entire  
Chapter](#)

411.202 Definitions.—As used in this chapter, the term:

- (1) “Assistance services” means those assessments, individualized therapies, and other medical, educational, and social services designed to enhance the environment for the high-risk or handicapped preschool child, in order to achieve optimum growth and development. Provision of such services may include monitoring and modifying the delivery of assistance services.
- (2) “Case management” means those activities aimed at assessing the needs of the high-risk child and his or her family; planning and linking the service system to the child and his or her family, based on child and family outcome objectives; coordinating and monitoring service delivery; and evaluating the effect of the service delivery system.
- (3) “Community-based local contractor” means any unit of county or local government, any for-profit or not-for-profit organization, or a school district.
- (4) “Developmental assistance” means individualized therapies and services needed to enhance both the high-risk child’s growth and development and family functioning.
- (5) “Discharge planning” means the modification of the written individual and family service plan at the time of discharge from the hospital, which plan identifies for the family of a high-risk or handicapped infant a prescription of needed medical treatments or medications, specialized evaluation needs, and necessary nonmedical and educational intervention services.
- (6) “Drug-exposed child” means any child from birth to 5 years of age for whom there is documented evidence that the mother used illicit drugs or was a substance abuser, or both, during pregnancy and the child exhibits:
  - (a) Abnormal growth;
  - (b) Abnormal neurological patterns;
  - (c) Abnormal behavior problems; or
  - (d) Abnormal cognitive development.
- (7) “Early assistance” means any sustained and systematic effort designed to prevent or reduce the assessed level of health, educational, biological, environmental, or social risk for a high-risk child and his or her family.
- (8) “Handicapped child” means a preschool child who is developmentally disabled, mentally handicapped, speech impaired, language impaired, deaf or hard of hearing, blind or partially sighted, physically handicapped, health impaired, or emotionally handicapped; a preschool child who has a specific learning disability; or any other child who has been classified under rules of the State Board of Education as eligible for preschool special education services, with the exception of those who are classified solely as gifted.
- (9) “High-risk child” or “at-risk child” means a preschool child with one or more of the following characteristics:
  - (a) The child is a victim or a sibling of a victim in a confirmed or indicated report of child abuse or neglect.
  - (b) The child is a graduate of a perinatal intensive care unit.
  - (c) The child’s mother is under 18 years of age, unless the mother received necessary comprehensive maternity care and the mother and child currently receive necessary support services.

- (d) The child has a developmental delay of one standard deviation below the mean in cognition, language, or physical development.
- (e) The child has survived a catastrophic infectious or traumatic illness known to be associated with developmental delay.
- (f) The child has survived an accident resulting in a developmental delay.
- (g) The child has a parent or guardian who is developmentally disabled, severely emotionally disturbed, drug or alcohol dependent, or incarcerated and who requires assistance in meeting the child's developmental needs.
- (h) The child has no parent or guardian.
- (i) The child is drug exposed.
- (j) The child's family's income is at or below 100 percent of the federal poverty level or the child's family's income level impairs the development of the child.
- (k) The child is a handicapped child as defined in subsection (8).
- (l) The child has been placed in residential care under the custody of the state through dependency proceedings pursuant to chapter 39.
- (m) The child is a member of a migrant farmworker family.
- (10) "Impact evaluation" means the provision of evaluation information to the department on the impact of the components of the childhood pregnancy prevention public education program and an assessment of the impact of the program on a child's related sexual knowledge, attitudes, and risk-taking behavior.
- (11) "Individual and family service plan" means a written individualized plan describing the developmental status of the high-risk child and the therapies and services needed to enhance both the high-risk child's growth and development and family functioning, and shall include the contents of the written individualized family service plan as defined in part H of Pub. L. No. 99-457.
- (12) "Infant" or "toddler" means any child from birth to 3 years of age.
- (13) "Interdisciplinary team" means a team that may include the physician, psychologist, educator, social worker, nursing staff, physical or occupational therapist, speech pathologist, parents, developmental intervention and parent support and training program director, case manager for the child and family, and others who are involved with the individual and family service plan.
- (14) "Parent support and training" means a range of services for families of high-risk or handicapped preschool children, including family counseling; financial planning; agency referral; development of parent-to-parent support groups; education relating to growth and development, developmental assistance, and objective measurable skills, including abuse avoidance skills; training of parents to advocate for their child; and bereavement counseling.
- (15) "Posthospital assistance services" means assessment, individual and family service planning, developmental assistance, counseling, parent education, and referrals which are delivered as needed in a home or nonhome setting, upon discharge, by a professional or paraprofessional trained for this purpose.
- (16) "Prenatal" means the time period from pregnancy to delivery.
- (17) "Preschool child" means a child from birth to 5 years of age, including a child who attains 5 years of age before September 1.
- (18) "Prevention" means any program, service, or sustained activity designed to eliminate or reduce high-risk conditions in pregnant women, to eliminate or ameliorate handicapping or high-risk conditions in infants, toddlers, or preschool children, or to reduce sexual activity or the risk of unwanted pregnancy in teenagers.
- (19) "Preventive health care" means periodic physical examinations, immunizations, and assessments for hearing, vision, nutritional deficiencies, development of language, physical growth, small and large muscle skills, and emotional behavior, as well as age-appropriate laboratory tests.
- (20) "Process evaluation" means the provision of information to the department on the breadth and scope of the childhood pregnancy prevention public education program. The evaluation must identify

program areas that need modification and identify community-based local contractor strategies and procedures which are particularly effective.

(21) “Strategic plan” means a report that analyzes existing programs, services, resources, policy, and needs and sets clear and consistent direction for programs and services for high-risk pregnant women and for preschool children, with emphasis on high-risk and handicapped children, by establishing goals and child and family outcomes, and strategies to meet them.

(22) “Teen parent” means a person under 18 years of age or enrolled in school in grade 12 or below, who is pregnant, who is the father of an unborn child, or who is the parent of a child.

History.—s. 1, ch. 89-379; s. 7, ch. 90-358; s. 2, ch. 91-229; s. 1, ch. 95-321; s. 51, ch. 97-103; s. 62, ch. 2000-153.

**TD Co-Pay Rate Table with 2014 Federal Poverty Guidelines \* (Effective October 1, 2014)**

<b>Family Size</b>	<b>Passenger pays \$1.00 if household income is at or under: Poverty Level</b>	<b>Passenger pays \$3.00 if household income is: &gt;100%-150% of Poverty</b>	<b>Passenger pays \$4.00 if household income is: &gt;150%-225% of Poverty</b>	<b>Passenger pays \$5.00 if household income is: &gt;225%-337% of Poverty</b>	<b>Passenger pays \$7.00 if household income is: &gt;337% of Poverty Level</b>
1	\$11,670	\$11,671 - \$17,505	\$17,506 - \$26,258	\$26,259 - \$39,328	\$39,329
2	\$15,730	\$15,731 - \$23,595	\$23,596 - \$35,393	\$35,394 - \$53,010	\$53,011
3	\$19,790	\$19,791 - \$29,685	\$29,686 - \$44,528	\$44,529 - \$66,692	\$66,693
4	\$23,850	\$23,851 - \$35,775	\$35,776 - \$53,663	\$53,664 - \$80,375	\$80,376
5	\$27,910	\$27,911 - \$41,865	\$41,866 - \$62,798	\$62,799 - \$94,057	\$94,058
6	\$31,970	\$31,971 - \$47,955	\$47,956 - \$71,933	\$71,934 - \$107,739	\$107,740
7	\$36,030	\$36,031 - \$54,045	\$54,046 - \$81,068	\$81,069 - \$121,421	\$121,422
8	\$40,090	\$40,091 - \$60,135	\$60,136 - \$90,203	\$90,204 - \$135,103	\$135,104

\* As of January 22, 2014 <http://aspe.hhs.gov/poverty/14poverty.cfm>



## PROGRAM UPDATES AND DISTRIBUTION ITEMS

<b>Calendar of Upcoming Events for the Lee County Local Coordinating Board</b>	
December 2015	Meeting December 4th at 10:00am. Election of Vice-Chair, review grant applications and appointment of CTC Evaluation Committee. Begin draft TDSP preparation.
January 2016	Planning Agency staff to schedule Evaluation Committee meeting at Good Wheels to conduct evaluation. Preparation of the draft minor update to the TDSP.
February 2016	Evaluation Committee meets at Good Wheels to conduct evaluation.
March 2016	LCB Public Hearing Meeting and Regular Business meeting @ 10:00 AM TBD. Planning Agency staff submits TDSP minor update draft and evaluation to LCB for review and approval. Also submitted are 5310 grants for endorsement.
April 2016	Draft minor update of TDSP submitted to Lee County MPO Technical Advisory Committee, Citizen Advisory Committee and Lee County MPO Board for their endorsement.
May 2016	LCB meeting at 10:00 AM.
June 2016	June meeting (if needed). Planning Agency staff submits final approved TDSP to the Commission for the Transportation Disadvantaged.



## **GOOD WHEELS UPDATES AND REPORTS**

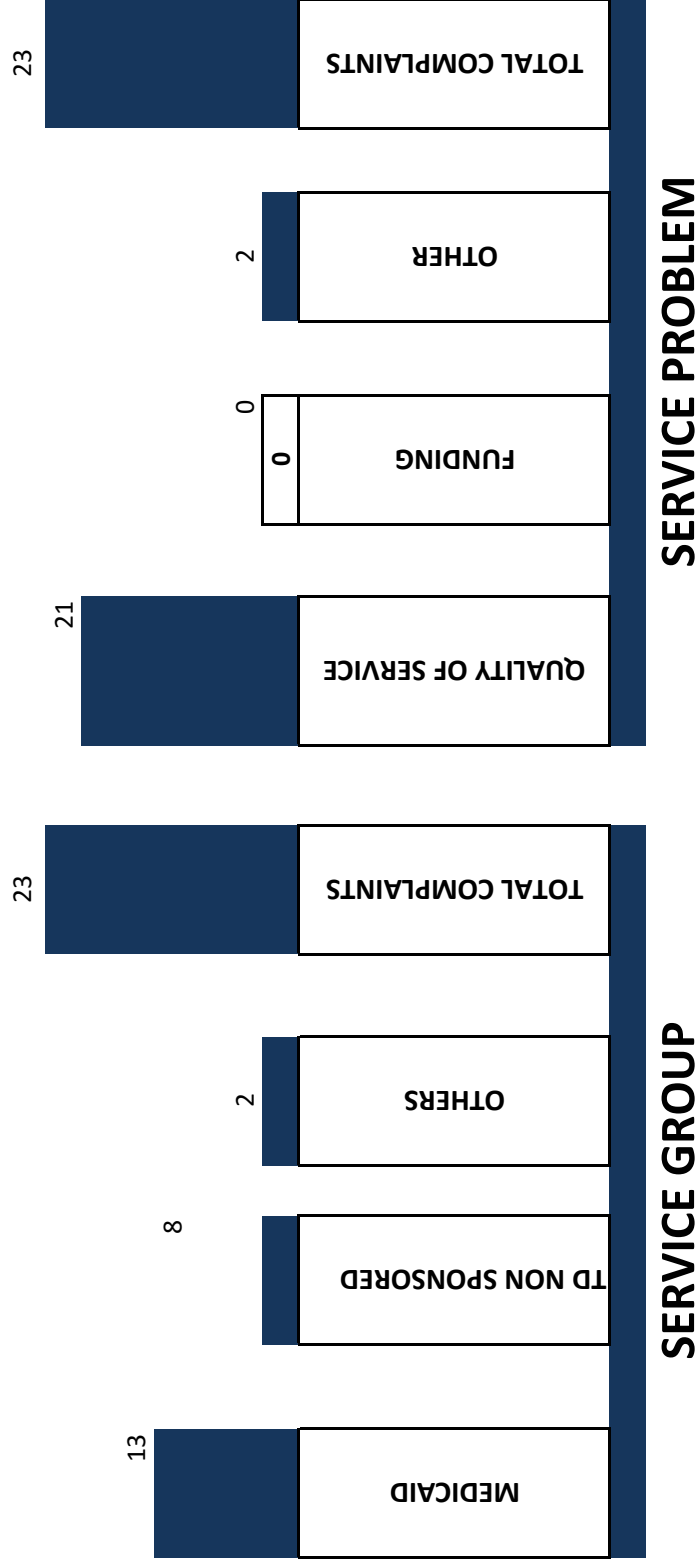
- Operator Payments
- Ridership and complaints for July through September





# COMPLAINTS RECEIVED JULY 2015 - SEPTEMBER 2015

LEE





# LEE RIDERSHIP JULY 2015 - SEPTEMBER 2015

