

Modification A to Contract #21-20-01

This contract modification is between BEHAVIORAL HEALTH SERVICES OF RACINE COUNTY whose business address is 1717 Taylor Avenue, Racine, Wisconsin 53403 and KTOWN TRANSPORTATION INC., whose principal business address is 6946 46<sup>th</sup> Street, Kenosha, Wisconsin 53144

The modification to this agreement will be in effect from March 1, 2021 to December 31, 2021. The Provider agrees to abide by all of the terms of the original agreement dated January 1, 2021 through December 31, 2021 with addition of the following:

**Specialized Transportation Eastern Racine County:**

**Change from Covid rates to Standard Rates with no change to program allocation**

**Added 15,000 annual ride minimum to Evaluation Outcomes**


  
GZ

Any modifications to the total amount allocated for provision of the services outlined in this contract are indicated on the attached Budget Sheet (Attachment A).

In accordance with the Contract Administration Manual of Racine County, (Section III. A.1. Contract Modification and Extension), the approval for this change is executed by the Human Services Department Director, Finance Director, Corporation Counsel and County Board Chairperson with signatures affixed.

(signed) Lynda Orsburn  
Lynda Orsburn (Apr 5, 2021 11:13 CDT)  
Provider's Authorized Representative

Apr 5, 2021  
Date

(signed)   
2021-03-31 15:57 CDT  
Racine County Human Services Director

Mar 31, 2021  
Date

(signed)   
Racine County Executive

04-21-2021  
Date

(signed)   
Racine County Corporation Counsel

04-20-2021  
Date

(signed)   
Racine County Finance Director

4/15/21  
Date

(signed) Heidi M. Clinteros  
Racine County Clerk

4/21/2021  
Date

(signed) \_\_\_\_\_  
Racine County Board Chairperson

\_\_\_\_\_  
Date

**XII. COST AND SERVICES TO BE PROVIDED**

- A. Provider and Purchaser understand and agree that the eligibility of individuals to receive the services purchased under this agreement will be determined by the Purchaser.
- B. Purchaser agrees to pay Provider for the actual services which are described in Exhibit A and which are rendered by Provider and authorized by Purchaser at the contracted amount.
- C. The total amount to be paid to Provider by Purchaser for programs and services as specified in this section will not exceed the total contracted dollar amount.

Account #	Program	Total	*Covid 19 Rate	**Standard Rate	Method of Payment
71716.008.107.404500	Transportation - East	\$ 124,001	\$32.45/net	\$18.63/net	unit rate
	Ambulatory - East I94 to West I94 Racine-Burlington/Rochester/Waterford		\$78/net	\$49/net	unit rate
	Wheelchair - East I94 to West I94 Racine-Burlington/Rochester/Waterford		\$88/net	\$59/net	unit rate
	<b>Total</b>	<b>\$ 176,303</b>			
71716.008.107.404500	Inter-County Transportation - East	\$ 52,302			
	Kenosha - Ambulatory		\$47.40/net	\$28.60/net	unit rate
	Kenosha - Wheelchair		\$57.40/net	\$38.60/net	unit rate
	Milwaukee - Ambulatory		\$97.50/net	\$62/net	unit rate
	Milwaukee - Wheelchair		\$112.50/net	\$72/net	unit rate

\*Covid 19 rate will remain in effect until both parties agree to reduce to \*\*Standard rate as of 3/1/2021

*Steven Zimmer*

Mar 25, 2021

Approved by HSD Fiscal Manager \_\_\_\_\_

*Lynda Orsburn*  
Lynda Orsburn (Apr 5, 2021 11:13 CDT)

Apr 5, 2021

Approved by Contract Agency \_\_\_\_\_

## **PROGRAM DESCRIPTION**

### **Eastern Racine County Specialized Transportation Non-ADA**

#### **Mode of Service**

Specialized Transportation shall be provided on a door-to-door basis. Assistance with coats and packages shall only apply from vehicle to building and from building to vehicle. Providers will not be responsible for lifting or handling clients in order for them to use the service. Provider may schedule block trips for riders who go from a destination to a common point or from a common point to home destination.

#### **Waiting Time**

Drivers shall wait five (5) minutes for riders after the scheduled pickup time.

#### **Attendants**

1. Attendant is defined as any person whose assistance is required by the passenger. Attendant requirement must be indicated on the physician's certification.
2. One attendant shall be permitted to accompany any passenger at no additional cost provided that they have the same points of origin and destination.
3. Attendants with different origin/destination points than certified rider will pay the full fare.

#### **Scheduling**

All reservations including attendants and other accompanying persons are to be scheduled in accordance with policies established by the Racine County Human Services Department and set forth in the User's Guide. Emergency transportation with less notification may occur based upon space availability and scheduling. Provider shall attempt to keep the number of trips per day within the limits of HSD funds. Riders are urged to notify transportation Provider when scheduled ride is not required.

The policy of advance scheduling for all transportation shall remain in effect with advance scheduled return trips also scheduled in all areas except medical. If waiting time for pickup is to be longer than 20 minutes from scheduled times, the transportation Provider shall advise the rider by phone contact and advise of the pickup time.

Persons who have scheduled rides and do not notify transportation Provider of cancellation shall receive a written warning that this is a violation of the transportation regulation.

Provider shall ensure that vehicles are available to meet demand.

## **PROGRAM REQUIREMENTS**

1. Provider must meet all requirements of TRANS 301, Human Services Vehicle (HSV) Standards and Chapter 221, Laws of 1979, Commercial Motor Vehicle Safety Act of 1986, and subsequent policies relating to TRANS 301 and Chapter 221.
2. Provider will meet all requirements of the State Department of Health and Social Services and the State Department of Transportation.
3. Service Provider must be a legally incorporated organization whose primary business is transportation services and can demonstrate at least two years experience in providing specialized transportation services to the targeted population.
4. Provider must be Title XIX certified, capable of generating third-party revenue from eligible Title XIX certified trips and billing Title XIX for reimbursable trips.
5. All riders with disabilities must file an application with a physician's certification that they are eligible for specialized transportation. Eligibility criteria will be determined by the Racine County Human Services Department. Racine County and/or Provider will process applications for eligibility and notify the applicant within 21 days of their approval or denial of the application. For all other unauthorized passengers, HSD will assume no liability.

6. Provider cannot bill Racine County for any rides provided under Title XIX covered recipients. All Title XIX covered recipients, including recipients enrolled in a Title XIX HMO, should be directed through the State's Medicaid transportation broker.
7. Provider shall establish a system to provide fee-for-service rides paid for privately by riders. This system would be for non-priority rides when space is available. The rider will pay an amount to be determined by Provider and RCHSD and may be up to the full cost of the ride.
8. Provider must have computer capability to schedule routes and provide monthly printout reports that detail required billing and program reports. A sample schedule and detail of computer capability must accompany application.
9. Provider shall provide a detailed description of current driver hiring, application and practice.
10. Provider shall provide a copy of the current driver training plan available to all drivers performing services under contract to Racine County upon request.
11. Provider must provide written description of manner in which they will receive and handle passenger revenues.
12. All vehicles utilized in the provision of HSD contract services will have a mechanism, approved by HSD for the collection of fares. Drivers will not be required to make change.
13. Rates may not exceed approved HSD gross cost per trip as determined by Program Specification. Racine County will only pay the net cost per trip. It is the Provider's responsibility to collect passenger revenues.
14. Provider will provide transportation to all persons certified by the Racine County Human Services Department as transportation disadvantaged. Racine County will not accept liability for riders transported but not certified.
15. The Provider agrees to the provision of transportation in compliance with the routes, passenger lists, time schedules, and days of operation specified by HSD.
16. Provider must complete a Program Application and respond to specific criteria for Specialized Transportation included in Program Specification and Program Description.
17. Provider will secure required licenses for the operation of the vehicles utilized as may be required by law.
18. Copies of Insurance Liability Coverage and Inspection Certification vehicles must be attached to proposal.
19. Provider must assume and pay for all maintenance and operation expenses of vehicles utilized.
20. Provider shall describe method available for handling disabled vehicles and indicate comparable backup vehicles. It is expected that the Provider should provide a quick and efficient response capability to vehicle breakdown.
21. The Provider assures that restraint devices for wheelchair-bound recipients shall consist of a separate restraint for the wheelchair and a separate restraint for the passenger. Passenger restraints are desirable but remain the responsibility of the passenger.
22. Provider must provide a user's guide that is available to all certified riders regarding activities and information about specialized transportation.
23. Provider must have computer capacity to log all trips by the following categories and to provide HSD with monthly printouts detailing the information needed.

**One Way Trips**

Ambulatory Elderly  
Non-ambulatory elderly  
Ambulatory non-elderly  
Non-ambulatory non-elderly

**Trip Purpose**

Medical  
Employment  
Nutrition sites  
Nutrition other  
Education / training  
Social / recreation  
Personal business  
Adult Day Care  
Other  
Cancellations  
No-Shows

24. Provider must also have capacity to generate monthly client lists that indicate the number of trips taken by each rider of specialized transportation and to make that information available to HSD monthly.
25. The Provider agrees to comply with all applicable State, County and City laws and regulations governing the conduct of company business.
26. Provider understands that the units of service provided and the contract dollars available is the maximum funding level available for Racine County and may not be exceeded. Cost for trips in excess of contract shall be responsibility of provider.
27. Provider will ensure two-way radio communication that will be adequate for the range of the vehicles utilized.
28. The Provider agrees to the provision of backup vehicles substantially equivalent carrying capacity to replace vehicles down for repairs.
29. The Provider agrees that services will not be provided nor charged to HSD for the following legal holidays: New Year's Day, Memorial Day, 4th of July, Labor Day, Thanksgiving Day, Christmas Day. Observance shall be consistent with the bus policies.
30. The Provider agrees that services shall be provided on a door-to-door basis. Assistance with coats and packages shall only apply from vehicle to building and from building to vehicle. Providers will not be responsible for lifting or handling clients in order for them to use the service. Provider may schedule block trips for riders who go from a destination to a common point or from a common point to home destination.

**EVALUATION OUTCOMES:**

1. Riders will be picked up within 20 minutes of their scheduled pickup time.
2. Clients being transported to HSD services (work related, adult day care, and nutrition) will arrive at the agency site no earlier than 15 minutes and no later than 5 minutes prior to the start of the agency's program.
3. 95% of customers surveyed will indicate satisfaction with the service.
4. 15,000 ride minimum/annually

An Evaluation Outcome Report must be submitted to the Behavioral Health Services Administrator and the Racine County HSD Contract Compliance Monitor by the 15<sup>th</sup> of the month following the quarter.












# KTown #21-20-01 Spec Tran Eastern RC Mod A

Final Audit Report

2021-04-05

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