

# MANATEE COUNTY GOVERNMENT

## AGENDA MEMORANDUM

<b>SUBJECT</b> Medicaid Transportation Services	<b>TYPE AGENDA ITEM</b> Consent
<b>DATE REQUESTED</b> December 15, 1998	<b>DATE SUBMITTED/REVISED</b> December 1, 1998
<b>BRIEFINGS?/WHO?</b> None	<b>CONSEQUENCES IF DEFERRED</b> None
<b>DEPARTMENT/DIVISION</b> Financial Management/Purchasing	<b>AUTHORIZED BY TITLE</b> Jim Seuffert <i>JS</i> Director
<b>CONTACT PERSON TELEPHONE/EXTENSION</b> Dennis Reynolds 3045	<b>PRESENTER/TITLE TELEPHONE/EXTENSION</b> Fred Loveland, Director, Comm Svcs 3030

**ADMINISTRATIVE APPROVAL**



**ACTION DESIRED**

INDICATE WHETHER "REPORT or "DISCUSSION, "FORM OF MOTION, or "OTHER ACTION REQUIRED:

Authorization for Chairman to execute an Agreement with AMBU-VAN Inc., Sarasota, Florida, for the purpose of providing transportation services to qualified Medicaid clients in Manatee County per negotiated Agreement.

**ENABLING/REGULATING AUTHORITY**

Federal/State law(s), administrative ruling(s), Manatee County Comp Plan/Land Development Code, ordinances, resolutions, policy.)

Ordinance 84-02, Procurement Code Section 3-102, Competitive Sealed Proposals

**BACKGROUND/DISCUSSION**

- 9/15/98 Board authorized the Community Services Department to proceed with interim Medicaid transportation coordination consistent with the Community Transportation Interim Service Plan submitted to the State Agency for Health Care Administration (ACHA) and to have full implementation in place by January 1, 1999.

See Page 2

**HAS COUNTY ATTORNEY REVIEW BEEN REQUESTED?** Indicate "NO" or "YES" @ right.  
If "NO," proceed to 1A/1B below. If "YES," proceed to 2A/2B below

NO

1) IF "NO" TO ABOVE.

A) PLEASE EXPLAIN BELOW: (see also following section 1B re: contract, agreement, lease, etc.)

Form of Agreement was developed by CAO. Attachments reflect the Scope of Services, compensation and special conditions of the Agreement.

B) IF A CONTRACT, AGREEMENT, LEASE OR OTHER DOCUMENT WAS PREVIOUSLY APPROVED, STATE YEAR OF LAST USE @ RIGHT:

2) IF "YES" TO FIRST QUESTION IN THIS SECTION.

A) HAS ENTIRE MATTER, OR ONLY A PORTION, BEEN REVIEWED? IF ONLY A PORTION, WHICH PORTION?

B) HAVE ALL COMMENTS/SUGGESTIONS RAISED BY COUNTY ATTORNEY BEEN ADDRESSED/INCORPORATED; IF NOT, PLEASE EXPLAIN. A COPY OF FINAL COUNTY ATTORNEY MEMO RE THIS MATTER MUST BE ATTACHED (If comments were verbal, so indicate.)

**ATTACHMENTS:** (List in order as attached)

1. Agreement - Two (2) original copies
2. Memorandum to AHC/A

**INSTRUCTIONS TO BOARD RECORDS:**

Originals to Board Records and Firm. Signature page to Dennis Reynolds, Purchasing

**COST** N/A. Grant Funded

**SOURCE (ACCTR & NAME)** N/A

**COMMENTS** None

AMT./REQ. OF RECURRING COSTS  
(ATTACH FISCAL IMPACT STATEMENT) N/A  
**APPROVED IN OPEN SESSION**

*fc*

DEC 15 1998

19.

- The State Agency for Health Care Administration (ACHA) has represented its desire for Manatee County Government, as the Community Transportation Coordinator (CTC) in Manatee County to assume certain duties with respect to the provision of non-emergency Medicaid transportation services in the County. The State Transportation Disadvantaged Commission has indicated that this function is consistent with Manatee County's continuing role as the CTC.
- 10/02/98 through 11/25/98 appropriate proposal procedures were followed, with Notice Of Proposal's availability sent to seventeen (17) potential proposers; two (2) proposals were received.
- On 11/23/98 staff met with the two (2) proposers, AMBU-Van, Inc., and Yellow Med Transportation to negotiate an agreement with the proposers. As a result of these negotiations, only one proposer, AMBU-VAN, Inc., was willing to accept terms offered by the County. Yellow Med Transportation was unwilling to lower its proposed rates which were more than double the rate AMBU-VAN, Inc., agreed to accept. As an example of the rate difference between the two proposers, a ten (10) mile trip with Yellow Med Transportation would cost \$25.00 (a flat fee of \$15.00 plus \$1.00 per mile) as compared \$10.80 for a ten (10) mile trip with AMBU-VAN, Inc. Yellow Med Transportation is currently a Medicaid transportation provider for Sarasota County and is compensated at rates similar to the rates it had proposed to Manatee County.
- The negotiated agreement is a three (3) year agreement with the option to renew for two (2) additional one (1) year terms.
- There is no actual cost to Manatee County associated with this Agreement as funds are made available through Medicaid grant funds.

*Manatee County*  
*Clerk of the Circuit Court and Comptroller*

*R.B. Clays Shore*

XXXX  
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December 17, 1998

AMBU-VAN, Inc.  
Attn: Penny Goettlich, President  
1366 Roberts Bay Lane  
Sarasota, Florida 34242

Dear Ms. Goettlich:

Enclosed for your records is an original executed Agreement for Medicaid Transportation Services that was approved by the Board of County Commissioners in open session on December 17, 1998.

R. B. Shore  
Clerk of the Circuit Court

*Susan G. Romine*  
By: Susan G. Romine  
Deputy Clerk

RBS/SGR/pat.

Enclosure (1)

