



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
COMMONWEALTH KEYSTONE BUILDING
400 NORTH STREET
HARRISBURG, PENNSYLVANIA 17120
<http://www.puc.pa.gov>

July 15, 2024

A-6427276
A-2024-3050062

KENA CARE HOME HEALTH AGENCY LLC
5915 PALMER DRIVE
HARRISBURG PA 17112

RE: Application of Kena Care Home Health Agency LLC

To Whom It May Concern:

On July 12, 2024, the application of Kena Care Home Health Agency LLC, at A-2024-3050062, as a motor carrier was accepted for filing and docketed with the Public Utility Commission. In order for the Commission to proceed with the application, additional information is required.

Please forward the information to the Secretary of the Commission at the following address **within ten (10) working days** from the date of this letter.

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street
Harrisburg, Pennsylvania 17120

ALL Parties to proceedings pending before the Commission are advised to open and use an e-filing account through the Commission's website. If a filing contains confidential or proprietary material, the filing is required to be submitted by overnight delivery.

Your answers should be verified per 52 Pa Code § 1.36. Accordingly, you must provide the following statement with your responses:

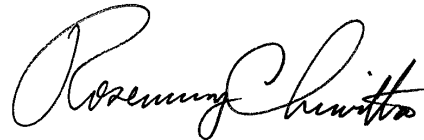
I, _____, hereby state that the facts above set forth are true and correct to the best of my knowledge, information and belief, and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

The blank should be filled in with the name of the appropriate company representative, and the signature of that representative should follow the statement.

Failure to comply with this request within 10 working days from the date of this letter will result in the denial of the application.

Please direct any questions to David Canzoneri, Bureau of Technical Utility Services at (717) 346-9738. Faxed or emailed filings are **not** accepted.

Sincerely,

A handwritten signature in cursive script that reads "Rosemary Chiavetta".

Rosemary Chiavetta
Secretary

Enclosure

Docket No. A-2024-3050062
Kena Care Home Health Agency LLC

Request for Information

- 1.) In your answer to question #10 of the application, you stated that you intend to transport people “from points in the counties of Dauphin, Lebanon, Cumberland, Juniata, Lancaster, Northumberland, Schuylkill, Snyder and Perry to points in Pennsylvania, and return.” Will you be exclusively transporting clients who are utilizing Kena Care Home Health Care services, or is it your intention to transport individuals of the general public?

Also, in your application you mention that transportation services will be arranged via contracts with County personnel working with the ID/A (Intellectual Disabilities/Autism) population. Who is scheduling these rides, and who is paying who? Please elaborate on this process, and who exactly you plan on transporting with your service.

- 2.) You failed to adequately answer all aspects of question #5 of the Verified Statement of Applicant. Please review Title 52 Pa Code §29.501-509 Driver Regulations to see what is required of motor carriers.
 - a. Age Restrictions;
 - i. In your employee qualification attachment, you mention a minimum age for drivers of 18 years of age. However, you fail to identify any of the stipulations that allows for a person aged 18 years old but under 21 years of age to operate a motor vehicle in paratransit service as required by Title 52 Pa. Code §29.503(b). If you intend to hire drivers 18 years of age but under 21 years of age, then please provide a policy that adheres to above mentioned regulation. Otherwise, please revise the minimum age for employees of your paratransit service.
 - b. Your system for conducting criminal background checks;
 - i. How often will the criminal background checks be conducted?
 - ii. How will you maintain records (record retention) of the criminal background checks performed?
 - c. Your system for conducting driver license/history checks;
 - i. How often will these checks be performed?
 - ii. How will you maintain records (record retention) of such checks?
- 3.) In question #7 of the Verified Statement of Applicant you are asked to describe your vehicle safety program. You stated that staff is expected to preform daily inspections and a more thorough monthly inspection, but you failed to identify any type of service schedule for your vehicles. Nor did you provide your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175.) Please provide the aforementioned information.

PLEASE ANSWER THESE QUESTIONS THOROUGHLY ON A SEPARATE SHEET OF PAPER