

The logo for Kalamazoo County Government is a shield-shaped emblem. The top arc of the shield contains the text "KALAMAZOO COUNTY GOVERNMENT" in a light blue, sans-serif font. The interior of the shield is divided into three horizontal sections: a top blue section, a middle green section with a yellow silhouette of a city skyline, and a bottom blue section with a white silhouette of a river or road. The text "Board of Commissioners' Meeting" is overlaid in a large, bold, black sans-serif font across the center of the logo.

**Board of  
Commissioners'  
Meeting**

**September 20, 2016**

**NOTICE AND AGENDA FOR  
SEPTEMBER 20, 2016 MEETING  
OF THE  
KALAMAZOO COUNTY BOARD OF COMMISSIONERS**

**PLEASE TAKE NOTICE** that a regular meeting of the Kalamazoo County Board of Commissioners is scheduled for Tuesday, September 20, 2016, at 7:00 p.m. in the Board of Commissioners Room, second floor, County Administration Building, 201 West Kalamazoo Avenue, Kalamazoo, Michigan, for the purpose of considering the following items:

- ITEM 1      Call to Order
- ITEM 2      Invocation
- ITEM 3      Pledge of Allegiance
- ITEM 4      Roll Call
- ITEM 5      Approval of Minutes
- ITEM 6      Communications
- ITEM 7      Citizens' Time
- ITEM 8      For Consideration

- A.      Request for Approval of 25 Year Resolution Honoring Bonnie Love

**CONSENT AGENDA**

Circuit Court

- B.      Request for Approval an Agreement with Maria Majeski
- C.      Request for Approval of 2016-2017 Child Care Budget
- D.      Request for Approval of FY 2017-2021 Title IV-D Cooperative Reimbursement Contract with the Michigan Department of Health & Human Services (MDHHS)

Finance

- E.      Request for Approval of Realignment of K Band and Applicable Personnel Policies

Health & Community Services

- F.      Request for Approval to Terminate Contract with Peak Performers
- G.      Request for Approval of Amendment to Addendum Letter of Renewal with Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS)
- H.      Request for Approval of Amendment to Addendum Letter of Renewal with Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS)
- I.      Request for Approval of Agreements with Various Providers of Service for Area Agency on Aging Program
- J.      Request for Approval of Business Associate Agreement with Covered Bridge Healthcare of St. Joseph County
- K.      Request for Approval of Partner Agreements with Safe Kids Kalamazoo County and Bronson Hospital
- L.      Request for Approval of Business Agreement with Kalamazoo Regional Education Service Agency (KRESA)
- M.      Request for Approval to Submit a Grant Application to the United Way of Battle Creek & Kalamazoo Region for a Fatherhood Initiative
- N.      Request for Approval to Accept Grant Award from United Way of Battle Creek &

## Kalamazoo Region and the Creation of a Position

### Human Resources

- O. Request for Approval of 2017 Health Benefit Changes
- P. Request for Approval of Annual Rate Renewal with Blue Cross Blue Shield of Michigan (BCBS) – Active Employees and Pre-Medicare Retirees
- Q. Request for Approval of Administrative Services Agreement with Nulty Agency, Inc.
- R. Request for Approval of 2017 Wellness Solution Summary Form Agreement with Blue Cross Blue Shield of Michigan (BCBS)

### Michigan Works!

- S. Request for Approval of Bylaws for the Michigan Works! Southwest Workforce Development Board
- T. Request for Approval of Intergovernmental Transfer of Function & Responsibilities Agreement
- U. Request for Approval of Reappointments to the Workforce Development Board for Michigan Works! Southwest
- V. Request for Approval of Capacity Building & Professional Development Allocations for PY 16, PI 16-14

### Prosecuting Attorney

- W. Request for Approval of FY 2016-2017 Crime Victim Rights Grant Agreement with the Michigan Department of Human Services (MDHHS)
- X. Request for Approval of FY 2017-2021 Title IV-D Cooperative Reimbursement Contract with the Michigan Department of Human Services (MDHHS)
- Y. Request for Approval of 2017 Victims of Violence – Assistance Program (VOCA) Crime Victim Assistance Agreement with the Michigan Department of Human Services (MDHHS) and the Elimination/Creation of Positions (Grant Funds)

### Sheriff

- Z. Request for Approval of Creation of Temporary Position Due to Leave of Absence (General Fund)
- AA. Request for Approval of a Contract with Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS)

### Board of Commissioners

- BB. Request for Approval of Transfers and Disbursements
- CC. Request for Approval of the Appointment of Ms. Karen Longanecker to the Kalamazoo Community Mental Health & Substance Abuse (KCMHSAS) Advisory Board
- DD. Request for Approval of the Appointment of Commissioner John Gisler to the Gourdneck Lake Governmental Lake Board
- EE. Request for Approval of Resolution Setting Annual Meeting and Public Hearing

### **NON-CONSENT AGENDA ITEMS**

**The following Items are Non-Consent Agenda Items and will be voted on individually.**

- ITEM 9 Old Business
- ITEM 10 New Business
- ITEM 11 County Administrator's Report

- ITEM 12 Chairperson's Report
- ITEM 13 Vice Chairperson's Report
- ITEM 14 Members' Time
- ITEM 15 Adjournment

*Dina Sutton*

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Dina Sutton  
Office Manager for Administrative Services

SEPTEMBER 14, 2016

MEETINGS OF THE KALAMAZOO COUNTY BOARD OF COMMISSIONERS ARE OPEN TO ALL WITHOUT REGARD TO RACE, SEX, COLOR, AGE, NATIONAL ORIGIN, RELIGION, HEIGHT, WEIGHT, MARITAL STATUS, POLITICAL AFFILIATION, SEXUAL ORIENTATION, GENDER IDENTITY OR DISABILITY. KALAMAZOO COUNTY WILL PROVIDE NECESSARY REASONABLE AUXILIARY AIDS AND SERVICES, SUCH AS SIGNERS FOR THE HEARING IMPAIRED AND AUDIO TAPES OF PRINTED MATERIALS BEING CONSIDERED AT THE MEETING/HEARING, TO INDIVIDUALS WITH DISABILITIES AT THE MEETING/HEARING UPON FOUR (4) BUSINESS DAYS' NOTICE TO THE COUNTY. INDIVIDUALS WITH DISABILITIES REQUIRING AUXILIARY AIDS OR SERVICES SHOULD CONTACT THE COUNTY BY WRITING OR CALLING:

Dina Sutton  
Office Manager for Administrative Services  
KALAMAZOO COUNTY GOVERNMENT  
201 West Kalamazoo Avenue  
Kalamazoo, Michigan 49007  
TELEPHONE: (269)384-8111



**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** September 20, 2016

**DEPARTMENT:** 9<sup>th</sup> Circuit Court

**PREPARED BY:** Sara Green

**SUBJECT:** Drug Treatment Court Contract

**SPECIFIC ACTION REQUESTED:**

The 9<sup>th</sup> Circuit Court is requesting permission to enter into an agreement with Maria Majeski to provide Life Skills Coaching to participants of the Women’s Drug Treatment Court Program.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

Maria Majeski provides life skills coaching to women of the Drug Treatment Court Program in the amount of \$50 per one hour session.

**TIME FRAME OF ACTION:**

August 26, 2016-December 31, 2016

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

Local

**PERSONNEL IF REQUIRED:**

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

**NEW OR RENEWAL OR AMENDMENT:**

(If an amendment to a contract/agreement please provide the date in which the original was approved by the Board of Commissioners)

New

**ANY OTHER PERTINENT INFORMATION:**

**PROCUREMENT INFORMATION:**

(indicate if the contract was bid out, if not, state reason(s) why; indicate last time contract was bid out; indicate if awarded bidder was the lowest bidder, if not, indicate why)

**CONTACT PERSON WITH PHONE NUMBER:**

Sara Green (269) 383-6469

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF: September 20, 2016**

**DEPARTMENT: Circuit Court**

**PREPARED BY: Susan Sayles**

**SUBJECT: Child Care Fund Budget**

**SPECIFIC ACTION REQUESTED:**

The 2016-2017 Child Care Budget needs to be approved. This grant provides 50% of the funding for fund 292 the Child Care Fund.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

The total budget is \$10,199,650.

**TIME FRAME OF ACTION:**

Year October 1, 2016 through September 30, 2017

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

State of Michigan \$5,099,825  
Kalamazoo County General Fund \$5,099,825

**PERSONNEL IF REQUIRED:**

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

No changes

**NEW OR RENEWAL OR AMENDMENT:**

(If an amendment to a contract/agreement please provide the date in which the original was approved by the Board of Commissioners)

This is a renewal for year 2016-2017

**ANY OTHER PERTINENT INFORMATION:**

**PROCUREMENT INFORMATION:**

(indicate if the contract was bid out, if not, state reason(s) why; indicate last time contract was bid out; indicate if awarded bidder was the lowest bidder, if not, indicate why)

**CONTACT PERSON WITH PHONE NUMBER:**

Susan Sayles 383-6415

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016

DEPARTMENT: Circuit Court- Friend of the Court

PREPARED BY: Nigel Crum

SUBJECT: IV-D Contract

SPECIFIC ACTION REQUESTED:

The Office of the Friend of the Court requests KCBOC approval and signature of the FY2017-2021 Title IV-D Cooperative Reimbursement Contract. This is a renewal contract that extends the current contract for the Friend of the Court Office for FY 2017-2021.

DESCRIPTION OF ACTION (dollar amount, purpose):

FY 2017-2021 Title IV-D Cooperative Reimbursement Contract in the amount of \$14, 751, 562, 53 from the Federal Government and State to pay for Friend of the Court Operations.

TIME FRAME OF ACTION:

October 1, 2016 through September 30, 2021.

FUNDING SOURCE IF REQUIRED (Federal, State, or local):

Federal/State

PERSONNEL IF REQUIRED:

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

NEW OR RENEWAL OR AMENDMENT:

(If an amendment to a contract/agreement please provide the date in which the original was approved by the Board of Commissioners)

Renewal of present contract for 5 years.

ANY OTHER PERTINENT INFORMATION:

PROCUREMENT INFORMATION:

(indicate if the contract was bid out, if not, state reason(s) why; indicate last time contract was bid out; indicate if awarded bidder was the lowest bidder, if not, indicate why)

Not applicable.

CONTACT PERSON WITH PHONE NUMBER:

Nigel Crum 269-384-8172



**OFFICE OF INTERNAL SERVICES**

Tracie L. Moored, Controller

201 WEST KALAMAZOO AVENUE  
KALAMAZOO, MI 49007  
PHONE: (269) 384-8088  
FAX: (269) 383-6448

DATE: September 6, 2016  
TO: Board of Commissioners  
FROM: Tracie Moored, Director of Internal Services / Controller  
RE: K Band Restructure / FLSA

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In reviewing the K bands and the application of the revised Fair Labor Standards Act (FLSA) requirements, the attached K Band restructure is recommended, effective December 1, 2016.

This adjustment of the K bands will produce the following benefits:

- ❖ The elimination of step A and B will allow the starting point of the FLSA minimum threshold to be reflected for the entire K8 Band. There has been much concern over the impact of this band becoming non-exempt as several in this band are at a supervisory level.
- ❖ This adjustment will allow those who meet all FLSA exempt standards to remain an exempt employee.
- ❖ The recruitment process will be strengthened, potentially generating a larger candidate pool.

Administration has also taken into consideration:

- The specific adjustment to the new step K8 A will adjust as the FLSA threshold continues to change.
- This restructure will have an implementation cost of \$24,000 (\$32,000 initial - \$8,000 cost avoidance). This cost will be covered for 2016 within remaining contingency of the Genreal Fund. The 2017 cost is budgeted in the upcoming recommended budget.
- Personnel policy for new hires will be adjusted to a maximum B step versus a D step and nurse maximum hire will be C D E step versus the E F G step.

This revised structure has been reviewed and supported by our Elected Officials, Court Administrators and Department Heads.

Please feel free to contact me with questions.

**KALAMAZOO COUNTY GOVERNMENT**

**K Band Salary Schedule**

**Effective : 12/1/2016**

	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>
<b>K01</b>	\$ 12.10	\$ 12.66	\$ 13.21	\$ 13.75	\$ 14.30	\$ 14.85
<b>K02</b>	\$ 12.72	\$ 13.31	\$ 13.89	\$ 14.47	\$ 15.04	\$ 15.62
<b>K03</b>	\$ 13.49	\$ 14.09	\$ 14.70	\$ 15.32	\$ 15.93	\$ 16.54
<b>K04</b>	\$ 14.35	\$ 14.99	\$ 15.64	\$ 16.29	\$ 16.95	\$ 17.61
<b>K05</b>	\$ 16.10	\$ 16.83	\$ 17.58	\$ 18.29	\$ 19.02	\$ 19.76
<b>K06</b>	\$ 17.57	\$ 18.34	\$ 19.15	\$ 19.95	\$ 20.76	\$ 21.54
<b>K07</b>	\$ 19.42	\$ 20.31	\$ 21.20	\$ 22.08	\$ 22.97	\$ 23.85
<b>K08</b>	\$ 22.83	\$ 23.47	\$ 24.49	\$ 25.51	\$ 26.53	\$ 27.56
<b>K09</b>	\$ 24.52	\$ 25.63	\$ 26.75	\$ 27.86	\$ 29.00	\$ 30.11
<b>K10</b>	\$ 26.91	\$ 28.13	\$ 29.35	\$ 30.57	\$ 31.79	\$ 33.01
<b>K11</b>	\$ 30.46	\$ 31.84	\$ 33.24	\$ 34.61	\$ 35.99	\$ 37.38
<b>K12</b>	\$ 33.68	\$ 35.20	\$ 36.74	\$ 38.26	\$ 39.80	\$ 41.33
<b>K13</b>	\$ 37.40	\$ 39.09	\$ 40.80	\$ 42.48	\$ 44.19	\$ 45.90
<b>K14</b>	\$ 42.84	\$ 44.80	\$ 46.74	\$ 48.68	\$ 50.63	\$ 52.59
<b>K15</b>	\$ 47.89	\$ 50.08	\$ 52.25	\$ 54.43	\$ 56.62	\$ 58.78
<b>K16</b>	\$ 53.68	\$ 56.13	\$ 58.56	\$ 61.00	\$ 63.45	\$ 65.88
<b>K17</b>	\$ 60.36	\$ 63.10	\$ 65.85	\$ 68.59	\$ 71.33	\$ 74.07



**KALAMAZOO COUNTY  
HEALTH AND COMMUNITY SERVICES DEPARTMENT**

*Promoting Health For All*

F.-N.

**DATE:** September 20, 2016  
**TO:** County Board of Commissioners  
**FROM:** Gillian A. Stoltman, Ph.D, M.P.H, Director/Health Officer  
**RE:** **ITEMS FOR YOUR CONSIDERATION**

**A. APPROVAL OF CONTRACT TERMINATION BETWEEN PEAK PERFORMERS AND HEALTH AND COMMUNITY SERVICES/DENTAL CLINIC**

**ACTION REQUESTED**

HCS Administration requests Board approval to terminate the contract between PEAK Performers and HCS- Dental Clinic to be effective November 14, 2016.

**DESCRIPTION OF SUBJECT**

The contract with PEAK Performers provided placement support for Dentists at the HCS-Dental Clinic. The HCS Dental Clinic will be closing on December 5<sup>th</sup> of this year and all services will be transferred to and subsequently provided by the Family Health Center immediately after that time. Due to this change, there will no longer be a need for temporary dentist support or placement and as such, HCS Administration requests Board approval to terminate this agreement.

**RELATIONSHIP TO GOALS**

This action does not directly relate to any HCS goals.

**FUNDING SOURCE**

There is no funding associated with this request.

**PERSONNEL**

There are no new or current personnel affected by this action.

**PROCUREMENT**

There is no procurement associated with this action.

**CONCERNS/ISSUES**

There are no concerns or issues. If there are any questions please contact Gillian Stoltman, Director/ Health Officer, at 373-5260 / [gastol@kalcounty.com](mailto:gastol@kalcounty.com).

**B. APPROVAL OF AN AMENDMENT TO ADDENDUM LETTER OF RENEWAL FOR 2015-2016 SUBLEASE WITH KALAMAZOO COMMUNITY MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES**

**ACTION REQUESTED**

HCS Administration requests Board approval of an amendment to addendum letter of renewal for the sublease between the County and Kalamazoo Community Mental Health and Substance Abuse Services (KCMHSAS) for the term of September 1, 2016 through September 30, 2016.

**DESCRIPTION OF SUBJECT**

The sublease amendment conveys a per square foot rate of twelve dollars and fifty cents (\$12.50), to be paid monthly, effective for the period of September 1, 2016 through September 30, 2016. This is a monthly rental rate of \$6,350 for the total rental space of 6,096 sq. ft. The total of the one month sublease term is \$6,350.

**RELATIONSHIP TO GOALS**

The services and programs provided by KCMHSAS are consistent with the HCS goal of improving the health and wellbeing of the Kalamazoo community. The mission of this agency aligns with that of the Health and Community Services Department and the presence of these services at Nazareth provides mutually beneficial resources for both HCS and KCMHSAS programs.

**FUNDING SOURCE**

No County funds are required as a result of this request.

**PERSONNEL**

There are no new personnel associated with this request.

**PROCUREMENT**

There is no procurement associated with this request.

**ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Ryan Post, Deputy Director – Financial Management and Administration, at 373-5254 or [rjpost@kalcounty.com](mailto:rjpost@kalcounty.com).

**C. APPROVAL OF AN AMENDMENT TO ADDENDUM LETTER OF RENEWAL FOR 2016-2017 SUBLEASE WITH KALAMAZOO COMMUNITY MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES**

**ACTION REQUESTED**

HCS Administration requests Board approval of an amendment to addendum letter of renewal for the sublease between the County and Kalamazoo Community Mental Health and Substance Abuse Services (KCMHSAS) for the term of October 1, 2016 through December 31, 2016.

**DESCRIPTION OF SUBJECT**

The sublease amendment conveys a per square foot rate of thirteen dollars (\$13.00), to be paid monthly, effective for the period of October 1, 2016 through December 31, 2016. This is a monthly rental rate of \$6,604 for the total rental space of 6,096 sq. ft. The total of the three month sublease term is \$19,812.

**RELATIONSHIP TO GOALS**

The services and programs provided by KCMHSAS are consistent with the HCS goal of improving the health and wellbeing of the Kalamazoo community. The mission of this agency aligns with that of the Health and Community Services Department and the presence of these services at Nazareth provides mutually beneficial resources for both HCS and KCMHSAS programs.

**FUNDING SOURCE**

No County funds are required as a result of this request.

**PERSONNEL**

There are no new personnel associated with this request.

**PROCUREMENT**

There is no procurement associated with this request.

**ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Ryan Post, Deputy Director – Financial Management and Administration, at 373-5254 or [rjpost@kalcounty.com](mailto:rjpost@kalcounty.com).

**D. APPROVAL OF AN AGREEMENT WITH HEALTH AND COMMUNITY SERVICES DEPARTMENT / AAA3A AND VARIOUS PROVIDERS OF SERVICE**

**ACTION REQUESTED**

HCS Administration requests Board approval of a Purchase of Service (POS) agreement with the HCS/AAA3A and **various service providers noted below**. This is a three year agreement which coincides with the AAA3A multi-year plan, beginning October 1, 2016 and ending September 30, 2019.

<b>Organization</b>	<b>Services</b>
A+ Nursing, Inc	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
Absolute Homecare	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
ADL Home Care, Inc.	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
Advantage Private Nursing	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
Arcadia Homecare Inc	Homemaking, Personal Care, In-Home Respite
Bronson at Home	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management, Personal Emergency Response System
CareLinc	Liquid Nutrition Supplements, Durable Medical Equipment
Care N Assist	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
Counseling at Home	In-Home Counseling
Critical Signal Technologies	Personal Emergency Response System
Fresh Perspective Home Care	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
Guardian Medical Monitoring	Personal Emergency Response Systems and Automated Medication Dispensing Systems
Homewatch Caregivers of SW MI	Homemaking, Personal Care, In-Home Respite Services, Transportation
Hospice Care of Southwest Michigan	Adult Day Care With and Without Transportation
PurFoods, LLC dba Mom's Meals	Home Delivered Meals hot, cold and pureed
Right at Home	Homemaking, Personal Care, In-Home Respite, Transportation

Senior Home support	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
Senior Services	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management; Meals on Wheels; Liquid Nutritional Supplements
Stay Home Companions	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management
United Nursing Services, Inc.	Homemaking, Transportation, Personal Care, In-Home Respite, Medication Management.
Valued Relationships, Inc	Personal Response Systems and Automated Medication Dispensing Systems

### **DESCRIPTION OF SUBJECT**

The POS agreement is for a period of three years and providers are continually added to the pool during the three year time frame. The providers contracted become a part of the purchase of service pool for the Choices for Independence Programs, providing clients a choice of various service providers. The services available will assist Kalamazoo County older adults (60 and over) to obtain/maintain the ability to stay in their own home for as long as possible, thus avoiding costly institutional care.

### **RELATIONSHIP TO GOALS**

This action will allow residents at risk to strengthen their capacity to take control of their lives and remain living as independently as possible in the community.

### **FUNDING SOURCE**

No County funds are required. Funds are from federal and state grants.

### **PERSONNEL**

There are no personnel associated with this request.

### **PROCUREMENT**

County Purchasing Policy is followed for these subcontractors.

### **ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Judy Sivak, Area Agency on Aging 3A Director at 373-5153 or at [jasiva@kalcounty.com](mailto:jasiva@kalcounty.com).

## **E. BREAST AND CERVICAL CANCER CONTROL NAVIGATION PROGRAM (BCCNP) AGREEMENT AND BUSINESS ASSOCIATE AGREEMENT WITH**

**COVERED BRIDGE HEALTHCARE OF ST. JOSEPH COUNTY, INC.**

**ACTION REQUESTED**

HCS Administration requests Board approval of new Agreement and Business Associate Agreement with Covered Bridge Healthcare of St. Joseph County, Inc. This agreement is effective August 1, 2016 and will automatically renew each year.

**DESCRIPTION OF SUBJECT**

The Breast and Cervical Cancer Control Navigation Program (BCCCNP) is a Center for Disease Control and Prevention funded program under Title XV, which seeks to reduce the unacceptably high prevalence of breast and cervical cancer among poor, older women in the country. Kalamazoo County Health and Community Services Department serves an eight-county region through contracted providers who screen the targeted population. Medical providers who have agreed to participate in BCCCNP will provide all or a portion of the enrollment, screening examination, diagnostic and consultation services for eligible women. Payment for the services described in the contract will be made by the State of Michigan at the standard Medicare based rates set annually by the Michigan Department of Health and Human Services.

**RELATIONSHIP TO GOALS**

HCS works to improve the overall health of the community by reducing preventable disabilities and deaths. Deaths from breast and cervical cancer are preventable, and this program allows us to assist low-income women in obtaining early diagnosis of breast and cervical cancer.

**FUNDING SOURCE**

No County funds are required as a result of this action. Funding for this agreement is from the Michigan Department of Community Health through the CPBC Agreement.

**PERSONNEL**

There are no personnel associated with this request.

**ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Tammy Vander Horst, Women's Health Supervisor at 269-373-5383 or at [tkvand@kalcounty.com](mailto:tkvand@kalcounty.com).

**F. APPROVAL OF PARTNER AGREEMENTS WITH SAFE KIDS KALAMAZOO COUNTY, BRONSON HOSPITAL AND THE HEALTH & COMMUNITY SERVICES DEPARTMENT THROUGH ITS MATERNAL & CHILD HEALTH (MCH) DIVISION**

### **ACTION REQUESTED**

HCS Administration requests Board approval of Partner Agreements between Kalamazoo County Health & Community Services and Safe Kids Kalamazoo County and Bronson Hospital for the provision of outreach and educational activities as defined through the Safe Sleep Initiative MDHHS grant. This agreement will set the funding amounts for the 2016/2017 funding year and cover the period of October 1, 2016 to September 30, 2017. Funding of \$15,400.00 is available for outreach and educational activities.

### **DESCRIPTION OF SUBJECT**

The Maternal & Child Health Division continues the collaborative effort toward reduction of the infant mortality rate in Kalamazoo County by focusing on those geographic areas with the highest concentration of infant and fetal deaths. The mini-grant award from the Michigan Department of Community Health, Division of Family & Community Health is for \$22,500 and is allocated through the CPBC grant system.

### **RELATIONSHIP TO GOALS**

HCS has a goal to improve the overall health of the community by reducing preventable deaths. The Maternal & Child Health Division works to reduce the fetal and infant deaths in Kalamazoo County through its programs.

### **FUNDING SOURCE**

No County funds are required as a result of this action. The funding source for this agreement comes from the MDHHS – Family & Community Health Division through the CPBC grant.

### **PERSONNEL**

There are no new personnel associated with this request.

### **PROCUREMENT**

There is no procurement associated with this request.

### **ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Deb Lenz, Maternal & Child Health Division Manager at 373-5024 or [dllenz@kalcounty.com](mailto:dllenz@kalcounty.com).

## **G. APPROVAL OF BUSINESS AGREEMENT BETWEEN KALAMAZOO REGIONAL EDUCATION SERVICE AGENCY (KRESA) AND THE HEALTH &**

**COMMUNITY SERVICES DEPARTMENT THROUGH ITS MATERNAL &  
CHILD HEALTH DIVISION**

**ACTION REQUESTED**

HCS Administration requests Board approval for the Business Agreement between Kalamazoo Regional Education Service Agency (KRESA) and Maternal & Child Health Division. The agreement is effective September 1, 2016 with automatic annual renewals.

**DESCRIPTION OF SUBJECT**

This is a renewal agreement that will provide continuation to a project that began in July 2014. HCS-Maternal & Child Health Division (MCH) will provide data sharing from MCH home visitation programs to KRESA. This is to supplement the KRESA Efforts to Outcomes (ETO) research spearheaded by the Upjohn Institute. Research looks to study ways to improve educational outcomes in Kalamazoo County. HCS-MCH will ensure all data sharing is completed after client knowledge and consent is obtained and documented.

**RELATIONSHIP TO GOALS**

The acceptance of this Business Agreement will further HCS's goal to improve the overall health of the community by reducing preventable disabilities and deaths and promoting healthy lifestyles and choices.

**FUNDING SOURCE**

No County funds are associated with this request.

**PERSONNEL**

There are no new personnel associated with this request.

**PROCUREMENT**

There is no procurement associated with this request.

**ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Deb Lenz, MCH Division Manager at 373-5024 or [dllenz@kalcounty.com](mailto:dllenz@kalcounty.com)

**H. APPROVAL TO APPLY FOR GRANT FUNDING FROM THE UNITED WAY OF  
BATTLE CREEK & KALAMAZOO REGION**

**ACTION REQUESTED**

HCS Administration requests Board approval to submit a grant application to the United Way of Battle Creek & Kalamazoo Region to create funding for a Fatherhood Initiative. The Fatherhood Initiative will be housed within the Maternal & Child Health Division and will work alongside the Home Visitation programs. The total request is \$100,000.00 for the period of November 1, 2016 through October 31, 2017.

### **DESCRIPTION OF SUBJECT**

The Fatherhood Initiative is a national initiative that believes the involvement of responsible fathers is essential to the economic, emotional, and social health of children.

Grant funding will be used to support this initiative in Kalamazoo County as we engage fathers and families to improve relationships within the family unit. The fatherhood role has been identified as an essential component in reducing the number of infant deaths in Kalamazoo County.

### **RELATIONSHIP TO GOALS**

This funding provides services consistent with the HCS goal to improve the overall health of the community by reducing preventable disabilities and death, and promoting healthy lifestyles and choices.

### **FUNDING SOURCE**

No additional County funds are required as a result of this action. Funding would be requested from the United Way of Battle Creek & Kalamazoo Region.

### **PERSONNEL**

This initiative would create two (2) positions: a community educator position and a care coordination position.

### **ISSUES/CONCERNS**

If you have any questions or concerns regarding the above requested action, please feel free to call Deb Lenz, MCH Division Manager at [dllenz@kalcounty.com](mailto:dllenz@kalcounty.com) or 373-5024

## **I. APPROVAL OF GRANT AWARD ACCEPTANCE AND POSITION CREATION IN THE NURSE FAMILY PARTNERSHIP (NFP) PROGRAM**

### **ACTION REQUESTED**

HCS Administration requests Board approval and acceptance of grant award from United Way of the Battle Creek & Kalamazoo Region (UWBCKR) in the amount of \$99,600.00 in support of the Kalamazoo County Nurse Family Partnership (NFP) project, and approval to create a 1.0 FTE Nurse Home Visitor position for in the NFP program, effective November 1, 2016. Approval to apply for this grant was granted March 15, 2016.

**DESCRIPTION OF SUBJECT**

The Nurse Family Partnership (NFP) program is an evidence-based, proven approach to improving the health and life-course of low-income, first-time mothers and their children. Visits occur during the first pregnancy of a woman and throughout the first two years of her child's life.

Grant funding will be used to support an additional RN home visitor to the current team, which will allow an additional 25 families to be served in our community

**RELATIONSHIP TO GOALS**

This funding provides services consistent with the HCS goal to improve the overall health of the community by reducing preventable disabilities and death, and promoting healthy lifestyles and choices.

**FUNDING SOURCE**

No County funds are required as a result of this action.

**PERSONNEL**

*Create:*

<u>Account #</u>	<u>Position #</u>	<u>Grade</u>	<u>FTE</u>	<u>Pay Range</u>	<u>Effective</u>
304-160	Nurse Home Visitor #10790	K08	1.0	\$50,939 - \$57,324	11/1/2016

**PROCUREMENT**

There is no procurement issue associated with this request.

**ISSUES/CONCERNS**

There are no issues or concerns. If you have questions please contact Deb Lenz at 373-5024 or at [dllenz@kalcounty.com](mailto:dllenz@kalcounty.com).

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016

DEPARTMENT: Human Resources Department

PREPARED BY: Kristine Cunningham, Human Resources Director

SUBJECT: 2017 Health Benefit Changes

**SPECIFIC ACTION REQUESTED:**

Approval to make changes to the active employee benefit plans.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

Throughout the year, the Plan Design Committee meets frequently to review health plan benefits for employees and retirees. The goal of this committee is to structure the benefit levels equally amongst the various employee groups while ensuring that Kalamazoo County Government remains a competitive employer. The 2017 recommended plan changes help us move closer to that goal of moving KalFlex employees to the same level of benefits as the Sheriff's Office employees.

The Plan Design Committee has the following recommendations for the 2017 plan year:

- Improvement to the dental plan for KalFlex employees: changing the percentage of coverage for class 2 dental services (fillings, root canals, crowns, extractions) to 75% vs 50%. The estimated cost of this benefit change is \$53,357 annually.
- Improvement of the vision plan for KalFlex employees: increasing the hardware (frames, lenses, etc) allowance from \$80 to \$130 and allowing participants to purchase hardware every 12 months vs every 24 months. The estimated cost of this benefits change is \$34,189 annually.
- Addition of hearing coverage for KalFlex employees: currently there is no hearing coverage on the health plan for KalFlex employees. We recommend adding coverage to this plan. The estimated cost of this benefit change is \$27,489 annually.
- An increase to the emergency room co-pay from \$75/visit to \$100/visit. This benefit change will result in an estimated savings of \$9,400 annually.
- Expansion of the Blue Cross Blue Shield step therapy/prior authorization program for prescription drugs. This change will include the more expensive specialty drugs and enhance the program for current drugs on the initiative. This expansion will be for all

active employees and pre-Medicare retirees. This benefit change will result in an estimated savings of at least \$63,725 annually.

The net result in the above changes is expected to be an increase of \$41,907.

TIME FRAME OF ACTION:

Effective January 1, 2017

FUNDING SOURCE IF REQUIRED (Federal, State, or Local):

Employee Benefits Fund

PERSONNEL IF REQUIRED:

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

N/A

NEW OR RENEWAL:

New

PROCUREMENT INFORMATION:

N/A

CONTACT PERSON WITH PHONE NUMBER:

Kristine Cunningham, [kdcunn@kalcounty.com](mailto:kdcunn@kalcounty.com) or 269-384-8100 or Jean Michaud, [jmich@kalcounty.com](mailto:jmich@kalcounty.com) or 269-383-8953.

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016

DEPARTMENT: Human Resources Department

PREPARED BY: Kristine Cunningham, Human Resources Director

SUBJECT: Annual Rate Renewal for Blue Cross Blue Shield of Michigan – Active Employees & Pre-Medicare Retirees

**SPECIFIC ACTION REQUESTED:**

Approval of the annual administration and stop loss rate between Kalamazoo County and Blue Cross Blue Shield of Michigan (BCBS) for the active employee population and the pre-Medicare retiree population.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

Kalamazoo County, in coordination with Nulty Insurance, was able to negotiate a renewal with Blue Cross Blue Shield of Michigan (BCBS) to continue the administration of health, pharmacy, wellness, dental and vision insurance for all active employees and pre-Medicare retirees for the plan year that begins 1/1/2017.

- The 2017 monthly administration rate is \$60.94/subscriber (up 2% from \$59.75 in 2016)
- The 2017 monthly stop loss rate is \$61.34/subscriber (up 5% from \$58.42 in 2016)
- The 2017 monthly wellness rate is \$3.96/subscriber

**TIME FRAME OF ACTION:**

January 1, 2017 through December 31, 2017.

**FUNDING SOURCE IF REQUIRED (Federal, State or Local):**

Employee Benefits Fund

**PROCUREMENT INFORMATION:**

An RFP was performed in 2014 for health insurance and ancillary products. We will complete another RFP in 2017 as required by the appropriate Public Act.

**NEW OR RENEWAL:**

Renewal

**CONTACT PERSON WITH PHONE NUMBER:**

Kristine Cunningham, [kdcunn@kalcouny.com](mailto:kdcunn@kalcouny.com) or 269-384-8100 or Jean Michaud, [jmich@kalcouny.com](mailto:jmich@kalcouny.com) or 269-383-8953.

## Kalamazoo County Government Your Renewal Summary

**Renewal rating period: January 2017 thru December 2017**

### Your Renewal Fees

#### Fixed administrative fee

Fixed administrative fee:	\$60.94
Additional fees:	\$3.96
<b>Total fee:</b>	<b>\$64.90</b>

*\*Additional fees may include:  
additional wellness fees, prescription drug  
accumulator fees, third party stop-loss vendor  
fees, and other fees*

#### Stop-loss premium rates

Specific:	\$61.34
Aggregate:	NA
<b>Total rate:</b>	<b>\$61.34</b>

Specific attachment: \$200,000  
Aggregate attachment: No Aggregate

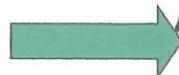
#### Experience period:

**Apr-2015 to Mar-2016 paid through May-2016**

*The Experience Period is the time period where data is collected for the renewal calculations.*

#### Annual trends:

Medical:	5.71%
Prescription Drugs:	19.30%
Dental:	0.90%
Vision:	3.80%



**Annual trend of all lines of  
business combined: 8.75%**

#### Financial Estimates

Total illustrative rate change: 4.41%

Subscribers enrolled in the most recent month: 870  
*This count is used to estimate the number of monthly subscribers in the rating period.*

**Estimated total cost for the rating period (less taxes) \$11,916,935**  
**Estimated Michigan claims tax for the rating period: \$88,712**

Claim and discount amounts are estimates based on historical data and actual results may be substantially different. All claim estimates use historical data provided by Group and assumes that Group's benefit design and plan enrollee utilization will remain the same as during the time period of the historical data. Therefore the figures shown are not guaranteed.

# Kalamazoo County Government

## Renewal Rating for January 2017 thru December 2017

**Experience period:** Apr-2015 to Mar-2016  
**Paid through:** May-2016

**New rating period:** Jan-2017 to Dec-2017  
**Specific stop-loss limit:** \$200,000  
**Payment arrangement:** Weekly invoiced

**Average monthly subscribers enrolled in experience period** 874  
**Subscribers enrolled at end of the experience period** 870

1. Experience period reported claims		\$17,831,949
Less: specific stop-loss claims exclusions		(\$470,415)
Plus: adjustment for benefit changes within experience period.		\$0
Less: hospital discount savings		(\$5,079,337)
Less: physician discount savings		(\$3,734,457)
<hr/>		
2. Experience period net claims cost	<i>See note.</i>	<b>\$8,547,739</b>
Plus: Estimated incurred but not reported claims		\$109,522
<i>{this is an estimate of additional payments for claims incurred during the experience period}</i>		
<hr/>		
3. Experience period estimated incurred claims payments		<b>\$8,657,262</b>
4. Annualized fully incurred claim payments		<b>\$8,657,262</b>

*The amounts above show claims in the experience period. The amounts below are these claims projected forward 21 months to the new rating period.*

5. Composite annual trend factor		8.75%
6. Composite effective trend factor		15.82%
7. Trended claims expense		\$10,026,543
Plus: Large claims up to specific attachment point		\$400,000
Plus: Adjustment for credibility		\$201,386
<hr/>		
8. Total estimated claims expense	<i>See note</i>	<b>\$10,627,930</b>

*The amounts below are based on current enrollment of 870 Subscribers.*

9. Total estimated claims expense adjusted for enrollment and benefit changes		<b>\$10,598,989</b>
Plus: projected fixed administrative charge		\$677,556
Plus: projected specific stop-loss premium		\$640,390
Plus: projected aggregate stop-loss premium		\$0
<hr/>		
10. Total estimated costs for the new rating period		<b>\$11,916,935</b>

*Note: Claim payments include BlueCard access fees charged by Blue Cross Blue Shield host plans which use BlueCa processing.*

*Claim and discount amounts are estimates based on historical data and actual results may be substantially different. All claim estimates use historical data provided by Group and assumes that Group's benefit design and plan enrollment utilization will remain the same as during the time period of the historical data. Therefore, the figures shown are not guaranteed.*

## Kalamazoo County Government

### Renewal Rating for January 2017 thru December 2017

Estimated claim cost	Estimated current number of subscribers	Estimated monthly cost per subscriber	Estimated annual cost based on current enrollment
Hospital	870	\$397.39	\$4,148,783
Physician	870	\$271.74	\$2,836,916
Prescription Drugs	870	\$272.94	\$2,849,534
Dental	1092	\$52.08	\$682,423
Vision	1061	\$6.39	\$81,334
Hearing	207	\$0.00	\$0
<b>Total estimated claim cost</b>	<b>870</b>	<b>\$1,000.54</b>	<b>\$10,598,989</b>
<i>Amounts above are estimates based on historical data and actual results may be substantially different. Therefore, the figures shown are not guaranteed.</i>			
<b>Estimated fixed Cost</b>			
Stop-Loss premium	870	\$61.34	\$640,390
Administrative fee	870	\$64.90	\$677,556
<b>Total estimated fixed cost</b>	<b>870</b>	<b>\$126.24</b>	<b>\$1,317,946</b>
<i>These costs will be settled using actual enrollment in the Contract Year.</i>			
<b>Total estimated rating period cost</b>			<b>\$11,916,935</b>
<b>Total estimated monthly cost per subscri</b>			<b>\$1,141.47</b>

#### Michigan Hospital Advance (MHA)

In exchange for unmatched hospital discounts, Blue Cross pre-pays Michigan hospitals one month of their expected claims. **This amount is calculated for the Michigan portion of your group only.**

MHA for the January 2017 thru December 2017 rating period	\$343,161
MHA for the January 2016 thru December 2016 rating period	\$330,084
<b>Additional charge for January 2017 thru December 2017</b>	<b>\$13,077</b>

#### Total annual estimated Michigan claims tax

*This amount is Blue Cross and BCN's estimate and is subject to change.* **\$88,712**

# Kalamazoo County Government

## Administrative Charges for January 2017 thru December 2017

**Current period:** January 2016 thru December 2016  
**New rating period:** January 2017 thru December 2017

### Administrative Charge

Monthly charge per subscriber	New Period	Current Period	Change
Blue Cross administrative charge	\$60.94	\$59.75	\$1.19
Additional wellness fees	\$3.96	\$3.34	\$0.62
Prescription drug accumulator fee	\$0.00	\$0.00	\$0.00
Third-party stop-loss vendor Fee	\$0.00	\$0.00	\$0.00
<b>Total administrative charge</b>	<b>\$64.90</b>	<b>\$63.09</b>	<b>\$1.81</b>

### BCBSM Value Added Services

Your BCBSM Administrative Fee covers a wide range of services. The specific services for your group are stated in your agreement with BCBSM, but they typically include:

- Account Management
- Actuarial/Underwriting Services
- Anti-Fraud Services
- Clinical Programs
- Coordination of Benefits
- Customer Service/Claims Processing
- Eligibility Maintenance
- Grievances/Appeals
- Health Fair Webinars
- Health Risk Assessments (HRAs)
- Legislative Compliance
- Medical Policy
- National Health Care Reform Services
- Online Benefit Books
- Online Provider Directories
- Open Enrollment Webinars
- Provider Networks
- Subrogation
- Standard ID Cards
- Utilization Management

***Please contact your Account Manager for pricing of non-standard services.***

## Kalamazoo County Government

### Stop-Loss Premium Rates for January 2017 thru December 2017

#### Current Stop-Loss Selection

Specific stop-loss: \$200,000  
Aggregate stop-loss: No Aggregate

Specific stop-loss applies to medical coverage only.

Monthly premium rates per subscriber	New Period	Current Period	Change
Specific stop-loss	\$61.34	\$58.42	\$2.92
Aggregate stop-loss	NA	NA	NA
<b>Total stop-loss rate</b>	<b>\$61.34</b>	<b>\$58.42</b>	<b>\$2.92</b>

Aggregate annual attachment Point	No Aggregate	No Aggregate	NA
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Blue Cross will charge an additional administrative fee of \$6.00 per contract per month if an ASC customer obtains stop-loss coverage from a third-party stop-loss vendor.

#### Stop-Loss Protection Options

Specific attachment point	Specific monthly premium rate	Aggregate attachment point	Aggregate monthly premium rate	Total monthly premium rate with specific and aggregate coverage
\$175,000	\$70.23	\$9,550	\$3.61	\$73.84
\$200,000	\$61.34	\$9,635	\$3.68	\$65.02
\$250,000	\$48.39	\$9,735	\$3.68	\$52.07
\$300,000	\$39.66	\$9,835	\$3.95	\$43.61

**Why  
choose  
Blue Cross  
for your  
stop-loss  
carrier?**

- No need to coordinate reimbursement with a third party
- Expeditious reimbursement of stop-loss credits
- Administered on a paid basis, eliminating any gaps in coverage
- Specific stop-loss: applied to a family's total claims rather than per member
- Blue Cross case management teams interact with high cost claimants in an attempt to reduce costs
- Annual and lifetime limits do not apply

#### **Blue Cross stop-loss disclosures**

Stop-Loss Policy provisions will apply and we do not reimburse for any of the following:

- Expenses for medical services rendered to a covered person by the covered person's family member or relative*
- Expenses that are payable or reimbursable under any worker's compensation law or similar legislation*
- Expenses for any transplant not included in the definition of transplant (avoid tandem transplant charges)*
- Expenses for any treatment administered outside of the United States if the covered person traveled to the location where the treatment was received for the purpose of obtaining the treatment*
- Expenses for benefits in excess of your plan's limits or expenses that are excluded under your plan (litigation expenses, administrative expenses, etc.)*

Expenses that are reimbursable to you under:

- Another group health benefit program; or*
- A government or privately supported medical research program; or*
- Medicare; or*
- Any coordination of benefits or non-duplication of benefits provision of your plan; or*
- Workers compensation; or*
- Any other source*

*Expenses incurred for any illness or injury due to or aggravated by war or an act of war, whether declared or undeclared*

### BOARD AGENDA REQUEST FORM

PROPOSED FOR BOARD MEETING OF: September 20, 2016

DEPARTMENT: Human Resources Department

PREPARED BY: Kristine Cunningham, Human Resources Director

SUBJECT: Benefits Agent/Broker of Record

SPECIFIC ACTION REQUESTED:

Approval for selection of the Nulty Agency, Inc. as the health and benefits agent/broker of record.

DESCRIPTION OF ACTION (dollar amount, purpose):

We are requesting approval to continue to partner with the Nulty Agency, Inc. for our health and benefits lines of business. We are requesting the agreement be in place for 3 years beginning January 1, 2017 and ending December 31, 2019, with the option to have three 1-year extensions.

Kalamazoo County completed a Request for Proposal (RFP) process for its brokerage services as part of the due diligence process. An internal team with representation from Finance, Purchasing and Human Resources reviewed the seven responses we received to our RFP. We have been working with a local agent/broker, the Nulty Agency, Inc., since April 2013 and have been very pleased with their services and recommended changes to our insurance offerings and partnerships. After reviewing the responses to our RFP, the internal team convened and determined the best qualified candidate for continued services is the Nulty Agency, Inc.

The Nulty Agency, Inc. is a local brokerage firm, serving the Kalamazoo area since 1945. They have a very experienced team of professionals to serve Kalamazoo County with its benefits and insurance programs. While the County continues to navigate the complexities of Health Care Reform, we are excited to continue to partner with a broker who understands the potential challenges and changes we must undertake to conform with Health Reform. As you are aware, Kalamazoo County is required to comply with most of the requirements of the Affordable Care Act (ACA). We will need to partner with a group that receives legislative information timely, so we can react appropriately and remain in compliance. The ACA will continue to evolve over the next few years, with potential changes required each year. This will require Kalamazoo County to review benefits structures, complete claims analysis, project for future expenses and communicate significant changes to employees. We will ensure compliance with the ACA with the assistance of the Nulty Agency, Inc..

While working with the Nulty Agency, Inc. these past few years, the County has made significant changes to plan design for both the active and retiree populations. The County has realized significant savings in making these changes.

The cost of this partnership is \$150,000 annually. Nulty will receive some commissions from the insurance carriers directly, which will be deducted from the \$150,000 annual fee with Kalamazoo County paying the balance annually.

TIME FRAME OF ACTION:

Effective January 1, 2017

FUNDING SOURCE IF REQUIRED (Federal, State, or Local):

Employee Benefits Fund

PERSONNEL IF REQUIRED:

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

N/A

NEW OR RENEWAL:

New

PROCUREMENT INFORMATION:

N/A

CONTACT PERSON WITH PHONE NUMBER:

Kristine Cunningham, [kdcunn@kalcounty.com](mailto:kdcunn@kalcounty.com) or 269-384-8100 or Jean Michaud, [jmmich@kalcounty.com](mailto:jmmich@kalcounty.com) or 269-383-8953.

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016

DEPARTMENT: Human Resources Department

PREPARED BY: Kristine Cunningham, Human Resources Director

SUBJECT: 2017 Wellness Solution Summary Form Agreement

SPECIFIC ACTION REQUESTED:

Approval of 2017 Wellness Solution Summary Form agreement between Kalamazoo County and Blue Cross Blue Shield of Michigan (BCBS) for the active employee population.

DESCRIPTION OF ACTION (dollar amount, purpose):

We are asking for approval of the 2017 Wellness Solution Summary Form Agreement. The Agreement states Blue Cross Blue Shield will continue to administer the employee wellness incentive and offer the Blue Cross Health and Wellness Online platform for all active employees for 2017.

It also states that Blue Cross will provide a welcome letter to employees starting in Fall 2016 and will provide bi-monthly wellness incentive reports of compliant employees to the Kalamazoo County Wellness Coordinator throughout 2017.

The 2017 monthly administration rate for employees with health insurance is \$2.50/per member/per month. The 2017 administration rate for employees without health insurance (but are still eligible for the wellness incentive) is \$1.50/per member/per month.

TIME FRAME OF ACTION:

January 1, 2017 – December 31, 2017

FUNDING SOURCE IF REQUIRED (Federal, State, or Local):

Employee Benefit Fund

PERSONNEL IF REQUIRED:

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

N/A

NEW OR RENEWAL:

Renewal

CONTACT PERSON WITH PHONE NUMBER:

Kristine Cunningham, 384-8100 or kdcunn@kalcouny.com

S. & T.



A Private-Public Partnership  
222 S. Westnedge Avenue, Kalamazoo, Michigan 49007-4628  
P: 269-349-1533 F: 269-349-5505  
<http://www.michiganworkssouthwest.org>

**DATE:** September 7, 2016  
**TO:** Kalamazoo County Board of Commissioners  
**FROM:** Ben Damerow  
**SUBJECT:** Inter-Governmental Agreement and WDB Bylaws

Enclosed for Kalamazoo County Board consideration and approval, please find the *Intergovernmental Transfer of Functions and Responsibilities Act of 1967 (P.A. 8) Agreement* between the Branch County Board of Commissioners for the County of Branch, the Calhoun County Board of Commissioners for the County of Calhoun, the Kalamazoo County Board of Commissioners for the County of Kalamazoo, and the St. Joseph County Board of Commissioners for the County of St. Joseph, for the administration of the Michigan Works! system and activities of the Michigan Works! Southwest Workforce Development Board for the Michigan Works! Southwest Area. This agreement is for the period October 1, 2016 through September 30, 2018.

Also enclosed for County Board consideration and approval, please find the updated *Workforce Development Board (WDB) Bylaws* for the execution of responsibilities of the Michigan Works! Southwest Workforce Development Board for the administration of the Michigan Works! System in the Michigan Works! Southwest Area that includes Branch, Calhoun, Kalamazoo and St. Joseph Counties.

These documents will also be on the Branch, Calhoun and St. Joseph County Board agendas this month.

Upon approval by each county, we will be securing signatures on five (5) originals of both documents. Once all signatures are obtained, original, fully executed signed copies of both documents will be transmitted to each County Board office.

Enclosures

BRANCH COUNTY  
(517) 278-0200 FAX (517) 278-0221

CALHOUN COUNTY  
(269) 660-1412 FAX (269) 965-3653

KALAMAZOO COUNTY  
(269) 383-2536 FAX (269) 383-3785

ST. JOSEPH COUNTY  
(269) 273-2717 FAX (269) 273-3002



An equal opportunity employer / program supported by the State of Michigan. 1-800-285-WORK (9675).  
Auxiliary aids and services are available upon request. Dial 711 for Relay Center and TTY.

u.



A Private-Public Partnership  
222 S. Westnedge Avenue, Kalamazoo, Michigan 49007-4628  
P: 269-349-1533 F: 269-349-5505  
<http://www.michiganworkssouthwest.org>

**DATE:** September 7, 2016  
**TO:** Kalamazoo County Board of Commissioners  
**FROM:** Ben Damerow  
**SUBJECT:** Workforce Development Board Renewal Appointments

We are requesting consideration and approval from Kalamazoo County for the individuals listed below for reappointment to the Workforce Development Board for Michigan Works! Southwest (Branch, Calhoun, Kalamazoo, and St. Joseph Counties).

<u>Name</u>	<u>Sector</u>	<u>Representing</u>
Lisa Godfrey	Private Sector-Kalamazoo County	Attorney at Law
David Maurer	Private Sector-Kalamazoo County	Humphrey Products
Jan Opalewski	Private Sector-Kalamazoo County	Fabri-Kal Corp
Sabrina Pritchett-Evans	Private Sector-Kalamazoo County	State Farm Insurance
Julie Rogers	Private Sector-Kalamazoo County	Borgess Health

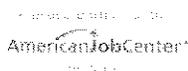
The above appointments are for regular members representing the private sector. The appointments are for two-year terms, beginning October 1, 2016 and ending on September 30, 2018.

BRANCH COUNTY  
(517) 278-0200 FAX (517) 278-0221

CALHOUN COUNTY  
(269) 660-1412 FAX (269) 965-3653

KALAMAZOO COUNTY  
(269) 383-2536 FAX (269) 383-3785

ST. JOSEPH COUNTY  
(269) 273-2717 FAX (269) 273-3002



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Auxiliary aids and services are available upon request. Dial 711 for Relay Center and TTY.

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016

DEPARTMENT: Michigan Works! Southwest – Upjohn Institute

PREPARED BY: Amy Meyers

SUBJECT: Capacity Building and Professional Development Allocations for PY16, PI 16-14

SPECIFIC ACTION REQUESTED: Review and approval signature of the Workforce Development Agency (WDA) Policy 16-14

DESCRIPTION OF ACTION (dollar amount, purpose): \$156,250

The Workforce Development Agency (WDA) is providing Workforce Innovation and Opportunity Act Statewide Activity funds to the Michigan Works! System for enhancing skills of Michigan Works! Agency professionals in the development of skills and abilities that will address the changing program and technological needs presented in the Michigan Works! System. Capacity building funding, which will benefit the entire system, is allocating funding using a regional approach. Michigan Works! Southwest was selected as one of four MWAs in the state who are awarded these funds and will serve as project manager for these funds.

Capacity Building and Professional Development funds shall be used to address a number of critical areas within the Michigan Works! System, including, but not limited to:

- Supporting state and local partnership,
- Developing and improving local program performance and achieving goals, and
- Assisting ongoing system development and proficiency including professional development and technical assistance.

Capacity building and professional development activities will be achieved for this through the membership fee to the Michigan Works! Association.

TIME FRAME OF ACTION: July 1, 2016 through June 30, 2017

FUNDING SOURCE IF REQUIRED (Federal, State, or Local): Workforce Innovation and Opportunity Act, Statewide Activities

PERSONNEL IF REQUIRED: NA

NEW OR RENEWAL: New

ANY OTHER PERTINENT INFORMATION: The W.E. Upjohn Institute served as a regional project manager of these funds in program years 2012-2015.

CONTACT PERSON WITH PHONE NUMBER: Amy Meyers; 269-385-0414

**PLEASE ATTACH ALL NECESSARY INFORMATION**  
i.e. Agreements/Contracts/Applications

## Capacity Building and Professional Development Allocations for PY2016

### PI 16-14

The Workforce Development Agency (WDA) is providing Workforce Innovation and Opportunity Act Statewide Activity funds to the Michigan Works! System for enhancing skills of Michigan Works! Agency professionals in the development of skills and abilities that will address the changing program and technological needs presented in the Michigan Works! System. Capacity building funding, which will benefit the entire system, is allocated using a regional approach. Michigan Works! Southwest was selected as one of four MWAs in the state who are awarded these funds and will serve as project manager for these funds.

Capacity Building and Professional Development funds shall be used to address a number of critical areas within the Michigan Works! System, including, but not limited to:

- Supporting state and local partnerships,
- Developing and improving local program performance and achieving goals, and
- Assisting ongoing system development and proficiency, including professional development and technical assistance.

Utilizing this funding, the Michigan Works! Association will be able to:

- Provide support to the state and the system in the design, development, implementation and operation of policy and state-level initiatives.
- Serve as a clearinghouse/conduit of information for procedures, policy and updates on a multitude of topics.
- Provide information exchange activities – The Association’s well-established, public portal of information for Michigan’s workforce eco-system requires action/responses to convene, connect and communicate with a unified voice.
- Provide professional development, technical assistance and training delivered through both classroom and web-based settings.

Activities supported by this funding will assist in addressing the goals of local and/or regional strategic plans and the needs of local and regional employers for a skilled workforce.

Capacity building and professional development activities will be achieved through the membership fee to the Michigan Works! Association. The Association was established in 1987 by Michigan Works! Agencies to foster high-quality employment and training programs serving employers and workers by providing support activities and a forum for information exchange for Michigan’s workforce development system. That system has been recognized as one of the most innovative membership and training association in the country.

### Funding Levels Summary

<b>PY2016 Allocation</b>	<b>\$156,250</b>
Administration	0
Program Support	\$156,250

### Technical Information

Program Title/Number	Capacity Building/Professional Development, 16-14
Funding Source	Workforce Innovation and Opportunity Act (WIOA) of 2015, Statewide Activities
Funding Level	\$156,250
Period of Performance	Program Year (PY) 2016 (July 1, 2016 - June 30, 2017)
Source Reference	WDA Policy Issuance: 16-14 (emailed 9/2/2016)
CFDA Number	17.258, 17.259, 17.260

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016  
DEPARTMENT: Office of the Prosecuting Attorney  
PREPARED BY: Lisa Henthorn, Administrator  
SUBJECT: FY1617 Crime Victim Rights Grant

**SPECIFIC ACTION REQUESTED:**

Accept and approve the FY 2016-2017 "Crime Victim Rights Grant (CVR) Grant Agreement (no signatures required) with the Michigan Department of Health and Human Services (MDHHS).

**DESCRIPTION OF ACTION (dollar amount, purpose):**

The amount of the agreement is \$203,357. This agreement allows us to retain 2.5 Victim Advocates and a .50 FTE Legal Assistant II, that provide constitutionally mandated and critical services to victims of crime (i.e., notices of court hearings, escort to court, information and support regarding the court process, referrals for counseling, etc). These services ensure compliance with the law and reduce victimization.

**TIME FRAME OF ACTION:**

10/1/2016 through 9/30/2017.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

The application includes \$203,357 in State funds.

**PERSONNEL IF REQUIRED:**

This grant provides continued funding for 2.5 FTE Victim Advocates (Diane Klauer – K7 ½ FTE), (Stella Chivikas – K7), and (Rhonda Baxter-Todd, K7), and .5 FTE Legal Assistant II (Lacey Clapper – K4) from account #278-000-704.00.

**NEW OR RENEWAL:**

Renewal

**CONTACT PERSON WITH PHONE NUMBER:**

Lisa Henthorn, Administrator, (269) 383-8965

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** September 20, 2016

**DEPARTMENT:** Office of the Prosecuting Attorney

**PREPARED BY:** Jennifer Granzow

**SUBJECT:** Renewal of Prosecutor's CRP Contract

**SPECIFIC ACTION REQUESTED:**

The Office of the Prosecuting Attorney requests KCBOC approval and signature of the FY2017-2021 Title IV-D Cooperative Reimbursement Contract. This is a renewal contract that extends the current contract for the Office of the Prosecuting Attorney for FY 2017-2021.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

FY 2017- FY 2021 Title IV-D Cooperative Reimbursement Contract, in the amount of \$5,142,212.00 to fund the establishment of paternity and child support orders for families and children in Kalamazoo County. The Office of the Prosecuting Attorney is statutorily mandated to provide Title IV-D services to children and families.

**TIME FRAME OF ACTION:**

October 1, 2016 through September 30, 2021.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

66% Federal and State allocation with a 34% county match

**PERSONNEL IF REQUIRED:**

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

**NEW OR RENEWAL OR AMENDMENT:**

(If an amendment to a contract/agreement please provide the date in which the original was approved by the Board of Commissioners)

Renewal of the present contract for five years.

**ANY OTHER PERTINENT INFORMATION:**

**PROCUREMENT INFORMATION:**

(indicate if the contract was bid out, if not, state reason(s) why; indicate last time contract was bid out; indicate if awarded bidder was the lowest bidder, if not, indicate why)

Not applicable, the Office of the Prosecuting Attorney is statutorily mandated to provide Title IV-D services.

**CONTACT PERSON WITH PHONE NUMBER:**

Jennifer Granzow, Assistant Prosecuting Attorney 385-8403

Lisa Henthorn, Administrator 383-8965

Y.

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: September 20, 2016  
DEPARTMENT: Office of the Prosecuting Attorney  
PREPARED BY: Lisa Henthorn, Administrator  
SUBJECT: FY1617 Victims of Violence – Assistance Program

**SPECIFIC ACTION REQUESTED:**

Accept and approve the FY 2016-2017 "Victims of Violence – Assistance Program" Victim of Crime Act (VOCA) Grant Agreement (no signatures required) with the Michigan Department of Health and Human Services (MDHHS).

**DESCRIPTION OF ACTION (dollar amount, purpose):**

The total amount of the FY1617 agreement is \$183,074 and allows the OPA to 1) retain one current full-time Victim Advocate 2) add one full-time Victim Advocate and 3) add .275 FTE to a current Victim Advocate Assistant position. The application includes a required 20% match of County funds which will be provided through .5 FTE of a Victim Advocate position. The VOCA grant agreement renewal allows the OPA to continue working with victims of domestic violence and sexual assault. This is the 30<sup>th</sup> year that the OPA has received this grant.

**TIME FRAME OF ACTION:**

10/1/2016 through 9/30/2017.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

The application includes \$146,459 in Federal funds and \$36,615 in County match funds. The VOCA Grant is currently assigned to the 277 Fund.

**PERSONNEL IF REQUIRED:**

***Eliminate:***

<u>Account#</u>	<u>Position Title#</u>	<u>Grade</u>	<u>FTE</u>	<u>Pay Range</u>	<u>Effective</u>
101-229	Victim Advocate #10160-007	K7	.225	\$11,161 - \$11,329	10/01/16

***Create:***

<u>Account#</u>	<u>Position Title#</u>	<u>Grade</u>	<u>FTE</u>	<u>Pay Range</u>	<u>Effective</u>
277-160	Victim Advocate #10160-007	K7	.225	\$11,161-\$11,329	10/01/16
277-160	Victim Advocate #10160-TBD	K7	1.00	\$36,753-\$40,393	10/01/16
277-160	Victim Advocate Asst #10898-001	K4	.275	\$ 8,507-\$ 8,634	10/01/16

**NEW OR RENEWAL:**

Renewal

**CONTACT PERSON WITH PHONE NUMBER:**

Lisa Henthorn, Administrator, (269) 383-8965

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF: September 20, 2016**

**DEPARTMENT: Sheriff's Office**

**PREPARED BY: Paul Matyas, Undersheriff**

**SUBJECT: Temporary Position – Corrections Deputy**

**SPECIFIC ACTION REQUESTED:**

Approve a temporary Corrections Deputy NF-17 position to replace a Deputy who is on a leave of absence.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

One of our Deputies has been on an extended leave of absence with no anticipated return date at this time. His position needs to be covered as are unsure of an estimated return date but know that it could be as long as three years.

**TIME FRAME OF ACTION:**

Immediately until June 30, 2018.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

Sheriff's Office General Fund

**PERSONNEL IF REQUIRED:**

1 FTE at NF-17 Step A starting wage

**NEW OR RENEWAL OR AMENDMENT:**

NA

**ANY OTHER PERTINENT INFORMATION:**

This employee is currently supplementing their pay with 7.25 hours per pay period and the rest is unpaid.

**PROCUREMENT INFORMATION:**

**CONTACT PERSON WITH PHONE NUMBER:**

Paul Matyas, Undersheriff ph: 385-6176

**BOARD AGENDA REQUEST FORM****PROPOSED FOR BOARD MEETING OF:** September 20, 2016**DEPARTMENT:** Sheriff's Office**PREPARED BY:** Terra Mickolatcher, Financial Administrator**SUBJECT:** Accept the Contract for Kalamazoo County Mental Health and Substance Abuse Services (KCMHSAS) & the Kalamazoo County Sheriff's Office**SPECIFIC ACTION REQUESTED:**

Approve the contract between KCMHSAS and the Kalamazoo County Sheriff's Office

**DESCRIPTION OF ACTION (dollar amount, purpose):**

The contract is to provide mental health services as granted by Act 258 of the Public Acts of 1974 (also referred to as the "Michigan Mental Health Code"). KCMHSAS & the Kalamazoo County Sheriff's Office agree to a work plan, whereas each employee that completes a 40 hour Crisis Intervention Team Training (CIT) - the Sheriff's Office will be reimbursed \$1,560.00 per employee. This training will emphasize training methods regarding behavioral conditions, which the officers(s) may face in practical situations. The funding is contingent upon the allocation of sufficient funds from the payer's funding sources.

**TIME FRAME OF ACTION:**

Immediate

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

Grant, State Revenue (CIT Reimbursement)

**PERSONNEL IF REQUIRED:**

N/A

**NEW OR RENEWAL OR AMENDMENT:**

New

**ANY OTHER PERTINENT INFORMATION:***Contract Attached for Review*

Contract term: January 1, 2016- December 1, 2016

**CONTACT PERSON WITH PHONE NUMBER:** Terra Mickolatcher, ph: 383-8763



## ADMINISTRATIVE SERVICES MEMORANDUM

**TO:** Board of Commissioners

**FROM:** Tina Becker

**DATE:** September 7, 2016

**SUBJECT:** Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS) appointment recommendation

Interviews were conducted for the Family Sector vacancy on KCMHSAS Advisory Board September 6, 2016.

It was the recommendation of the Board to appoint Ms. Karen Longanecker to assume a 3-year term commencing April 1, 2015 to March 31, 2018.

KALAMAZOO COUNTY BOARD OF COMMISSIONERS

APPLICATION FOR APPOINTMENT TO:  
KALAMAZOO COMMUNITY MENTAL HEALTH & SUBSTANCE ABUSE SERVICES

Name Karen Longanecker Occupation Retired

Home Address [Redacted] [Redacted] [Redacted]  
Street City Zip

Home Telephone [Redacted] Business Telephone \_\_\_\_\_

Cell Number [Redacted] E-mail address [Redacted]

Length of residency in Kalamazoo County 50 years

How many hours could you commit to the Board per week/month? 4-6 hrs per week

Certain categories need to be represented on the Community Mental Health & Substance Abuse Services. Please check the categories which you believe apply to you:

- a. Mental health services provider \_\_\_\_\_
- b. General Public \_\_\_\_\_
- c. Agencies/occupations having a working involvement with mental health services \_\_\_\_\_
- d. Primary consumer (defined as an individual who has received or is receiving services from the private sector equivalent to those offered by the Department or a Community Mental Health & Substance Abuse Service). \_\_\_\_\_
- e. Recipient (defined as an individual who is currently directly receiving mental health services from the Department of Community Mental Health, a community mental health services program, or a facility or from a provider that is under contract with the Department or a community mental health service). \_\_\_\_\_
- f. Family member (defined as a parent, stepparent, spouse, sibling, child, or grandparent of a primary consumer, or an individual upon whom a primary consumer is dependent for at least 50% of his/her financial support). X

If you checked category a, c, d, e or f above, please explain how you represent that category.

I am the parent/POA of a 43 year old man that has an Intellectual/Developmental Disability, and receives services from Kalamazoo Community Mental Health and Substance Abuse Services through a Self Determination/Self Directed agreement

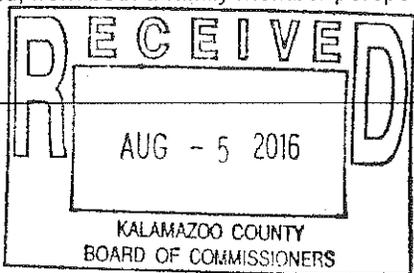
What personal or professional experiences have you had with the target populations served by the Community Mental Health & Substance Abuse Services?

Please see above for my personal experience. I was, at one time, employed by Community Mental Health in developing the Self Determination Initiative. I believe they recognized the contribution I was able to make in the development of the Initiative. I was able to work with, and along side of, many individuals with disabilities, in assisting them as they explored life in their community, and how Community Mental Health was able to assist with this journey.

Why do you desire to serve on the Community Mental Health & Substance Abuse Services?

It is an area of expertise that I believe I am able to share, and understand, from both a family member perspective, as well as a systems perspective.

I have realized, since retiring, that I still have a lot to offer.



State law prohibits an individual from being appointed to a Community Mental Health & Substance Abuse Services if he/she is a party to a contract with the community mental health services program or administers or benefits financially from such a contract; or (2) serves in a policy-making position with an agency under contract with the community mental health services program. Listed below is a list of agencies that contract with the Kalamazoo County Community Mental Health Authority Board. This list is not all-inclusive. Do any of these restrictions apply to you? YES\_\_\_\_ NO X

- |                            |                                    |
|----------------------------|------------------------------------|
| Catholic Family Services   | Bridgeways                         |
| Community Living Options   | Douglass Community Association     |
| Family & Children Services | Gryphon Place                      |
| Community Healing Center   | HomeLife                           |
| Hope Network               | Housing Resources                  |
| InterAct of Michigan       | Keystone                           |
| MRC Industries, Inc.       | Residential Opportunities, Inc.    |
| Senior Services            | WMU/Center for Disability Services |
| Ministry with Community    |                                    |

There is a limit of six "public officials" who can serve on the Community Mental Health Authority Board. "Public officials" are those persons serving in an elected or appointed public office or employed more than 20 hours per week by an agency of federal, state, city or local government. This includes public schools/colleges/universities. YES\_\_\_\_ NO X

If YES, explain:

List membership on other boards or commissions:

I am currently serving on the Board of 'ARC Community Advocates, which is an organization that provides advocacy support to individuals with Intellectual/Developmental Disabilities. I do not believe that this would be a conflict of interest since the ARC is not a contract provider with KCMHSAS.

8/04/2016

Date of Application

**Dina P. Sutton**

---

**From:** Tina M. Becker  
**Sent:** Tuesday, September 13, 2016 8:07 AM  
**To:** Dina P. Sutton  
**Subject:** FW: Gourneck Lake Governmental Lake Board

**From:** John Taylor [mailto:taylorjt91@yahoo.com]  
**Sent:** Friday, September 09, 2016 1:51 PM  
**To:** Thom M. Canny <tmcann@kalcouny.com>; Tina M. Becker <tmbeck@kalcouny.com>  
**Subject:** Fwd: Gourneck Lake Governmental Lake Board

Sent from my iPhone

Begin forwarded message:

**From:** Terry Urban <trurban@hotmail.com>  
**Date:** September 9, 2016 at 12:31:54 PM EDT  
**To:** John Taylor <taylorjt91@yahoo.com>  
**Subject:** RE: Gourneck Lake Governmental Lake Board

John,

Hqve you made an appoitment yet? We need to get moving so we can hopefully do a weed survey and olan this year.

Terry

Get [Outlook for Android](#)

**From:** Terry Urban  
**Sent:** Wednesday, August 24, 10:03 AM  
**Subject:** RE: Gourneck Lake Governmental Lake Board  
**To:** John Taylor

The new board has not yet met and can't meet until you appoint a member. It was created by resolution of the Portage city council and the Schoolcraft Township board in the last 6 weeks. The membership is defined in the governing state statute which I have attached. Schoolcraft Township has appointed a representative. Portage has appointed me. The Drain commisioner is a member by law. The last appointee we need is from the County Commision. Until appointed the Gourneck Lake governmental lake board doesn't fully exist.

No bylaws exist until the board creates them.

I had hoped to have the first meeting last week, then this week. There is some urgency that we get far enough this year to have whichever consultant we hire survey the weeds before winter.

Scott is a member of the Long Lake GLB and the Austin Lake GLB. This is a completely new separate, independant GLB. Both Scott and John represent parts of the lake that will be assessed by the GLB.

I have been on the Long Lake GLB since 1998. That's why I'm so familiar with how these boards operate.

After you appoint someone the four of us will meet and determine how to select the fifth member, a reparian. The Gourdneck lake association does not represent 50% so the four governmental members of the board will determine how to select the reparian. We then have to organize and start the business of the GLB.

Please call me if you need further explanation. I also expect that the board, when it does meet will ask the County administration and Commission if the County will loan the Gourdneck Lake GLB enough funds to do the things required by statute until the GLGLB has special assesment revenue of its own. The county has done this with other Lake Boards. But that discussion is for another day.

Terry Urban

269 569 5440

Sent from my Verizon Wireless 4G LTE smartphone

----- Original message -----

From: John Taylor <[taylorjt91@yahoo.com](mailto:taylorjt91@yahoo.com)>  
Date: 08/24/2016 8:56 AM (GMT-05:00)  
To: Terry Urban <[trurban@hotmail.com](mailto:trurban@hotmail.com)>  
Subject: Re: Gourdneck Lake Governmental Lake Board

Terry can you send me the Bylaws of this new board. The only information I have received about this new board is your emails.

John Taylor

Sent from my iPhone

On Aug 23, 2016, at 8:01 PM, Terry Urban <[trurban@hotmail.com](mailto:trurban@hotmail.com)> wrote:

We'te NOT talking about Long Lake. We are talking about the NEW Gourdneck Lake Governmental Lake Board. Scott isn't on the Gourdneck Lake GLB unless you appointed him. He is on Long Lake and Austin Lake governmental lake boards.

Terry

Sent from my Verizon Wireless 4G LTE smartphone

----- Original message -----

From: John Taylor <[taylorjt91@yahoo.com](mailto:taylorjt91@yahoo.com)>

Date: 08/23/2016 7:54 PM (GMT-05:00)  
To: Terry Urban <[trurban@hotmail.com](mailto:trurban@hotmail.com)>  
Subject: Re: Gourdneck Lake Governmental Lake Board

I'm sorry about the delay Terry, I asked John Gisler to serve and he agreed, I made an announcement during our work group and Scott McGraw informed us that he was already on the board and did not want to be removed. So until I get a recommendation from either the long lake board or a resignation from Scott I would rather keep it as is. Sorry again about the delay.

John Taylor

Sent from my iPhone

On Aug 22, 2016, at 1:29 PM, Terry Urban <[trurban@hotmail.com](mailto:trurban@hotmail.com)> wrote:

John

Any decision?

Terry

Sent from my Verizon Wireless 4G LTE smartphone

----- Original message -----

From: John Taylor <[taylorjt91@yahoo.com](mailto:taylorjt91@yahoo.com)>  
Date: 08/15/2016 12:25 PM (GMT-05:00)  
To: Terry Urban <[trurban@hotmail.com](mailto:trurban@hotmail.com)>  
Subject: Re: Gourdneck Lake Governmental Lake Board

Thank you Terry I will check on that later this afternoon and if he's willing I will appoint John to the board. Thanks for the heads up.

John Taylor

Sent from my iPhone

On Aug 11, 2016, at 11:48 AM, Terry Urban <[trurban@hotmail.com](mailto:trurban@hotmail.com)> wrote:

John,

On Tuesday I was appointed to the new Gourdneck Lake Governmental Lake Board. I know Schoolcraft Township has appointed their member although I don't know who it is. I writing to find out if you have appointed the County Commission representative yet. I expect that it would be either Scott McGraw or John Gessler, the two commissioners with area affected. Scott is on the Long Lake GLB. But I might suggest John. There will be quite a bit of work in the next year and I believe John's availability

might be greater. I have worked with both but know John for much longer through KATS.

Thanks,

Terry Urban

Portage City Council

269-569-5440

**ADMINISTRATIVE  
SERVICES  
MEMORANDUM**

TO: BOARD OF COMMISSIONERS

FROM: THOM CANNY, CORPORATE COUNSEL

DATE: SEPTEMBER 7, 2016

SUBJECT: RESOLUTION TO SET ANNUAL MEETING DATE AND PUBLIC HEARING FOR PROPOSED 2017 BUDGET

Attached is a proposed resolution to set the Annual Meeting date for Tuesday, October 4, 2016 as well as setting a public hearing on the same date for the proposed 2017 Budget. Since the Truth in Taxation law was modified a number of years ago, we no longer have to publish the complicated and expensive notice of a public hearing to increase property taxes (rollback restoration) as long as the notice of a public hearing on the proposed 2017 Budget contains the following language in 11 point bold face type:

**THE PROPERTY TAX MILLAGE RATE PROPOSED TO BE LEVIED TO SUPPORT THE PROPOSED BUDGET WILL BE A SUBJECT OF THIS HEARING.**

In addition, the actual General Appropriation Act (Budget) must set forth the total number of mills of ad valorem property taxes to be levied and the purposes for which that millage is to be levied. Our budget document has been modified to reflect those changes.

In order to provide the staff the lead time to have the attached notice published in the Kalamazoo Gazette, we respectfully request that the Board approve this resolution at your September 20 meeting.

**RESOLUTION TO SET ANNUAL MEETING DATE  
AND  
PUBLIC HEARING  
FOR PROPOSED 2017 BUDGET**

WHEREAS, the statutes in such case made and provided require a municipal corporation to hold an Annual Meeting and a Public Hearing on its proposed budget; and

WHEREAS, the statute further provides that the Annual Meeting shall be held after September 14 but before October 16 of each year.

NOW, THEREFORE, BE IT RESOLVED that the Kalamazoo County Board of Commissioners does hereby designate the date of Tuesday, October 4, 2016 as the date of its Annual Meeting, and Tuesday, October 4, 2016 as the date for the Public Hearing on the 2017 Proposed Budget.

BE IT FURTHER RESOLVED that the County Clerk/Register is hereby authorized and directed to publish in the Kalamazoo Gazette, a newspaper of general circulation in Kalamazoo County, at least six days prior to the Public Hearing, a notice of such Public Hearing, which notice shall be substantially in the following form:

**NOTICE OF PUBLIC HEARING ON PROPOSED 2017 BUDGET  
OF KALAMAZOO COUNTY, MICHIGAN**

Notice is hereby given that a Public Hearing will be held on the proposed Budget of Kalamazoo County, Michigan, for the fiscal year commencing January 1, 2017 and ending December 31, 2017, on Tuesday, October 4, 2016 at 7:00 p.m., in the County Administration Building, second floor, Board of Commissioners' Room 204, located at 201 West Kalamazoo Avenue, Kalamazoo, Michigan.

A copy of the proposed Budget is available for public inspection during normal business hours at the Offices of the Board of Commissioners and County Clerk/Register, 201 West Kalamazoo Avenue, Kalamazoo, Michigan.

**THE PROPERTY TAX MILLAGE RATE PROPOSED TO BE LEVIED TO SUPPORT THE  
PROPOSED BUDGET WILL BE A SUBJECT OF THIS HEARING**

STATE OF MICHIGAN            )  
  ) SS  
COUNTY OF KALAMAZOO    )

I, Timothy A. Snow, County Clerk/Register, do hereby certify that the foregoing is a true copy of a Resolution adopted by the Kalamazoo County Board of Commissioners at a regular session held on September 20, 2016.

\_\_\_\_\_  
Timothy A. Snow  
County Clerk/Register