

# *Administration and County Services Committee*

*Laura Stanek*

*Ed Boettcher, Chairman*

*David Heeres*

October 5, 2016

TO: **Administration and County Services Committee**  
FROM: **Pete Garwood, County Administrator**  
SUBJECT: **Meeting Agenda**

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**Revised**

The Administration and County Services Committee meeting is scheduled for

**Thursday, October 6, 2016 @ 9:00 a.m.**  
**In Room 211, 2<sup>nd</sup> Floor, Antrim County Building,**  
**203 E. Cayuga Street, Bellaire**

**Agenda items will include:**

- 9:00 a.m. Public Comment
- 9:01 a.m. Leelanau Professional Business Services Contract – *attached pgs. 2-6* - Valerie Craft
- 9:15 a.m. IT Password Policy – *attached pgs. 7-10* - Valerie Craft
- 9:30 a.m. Dining Out Contract – *attached pgs. 11-17* – Judy Parliament
- 9:45 a.m. Health Insurance – *attached pg. 18* – Janet Koch – *attached pgs. 19-23*
- 10:00 a.m. Various Matters as Appropriate
- 10:30 a.m. Public Comment

Please contact the Administration & Planning office if you have any questions or concerns.  
If you wish to attend this meeting and require special assistance, please contact the Administration Office  
by writing P.O. Box 187, Bellaire, MI 49615; email: [countyadmin@antrimcounty.org](mailto:countyadmin@antrimcounty.org);  
or via phone 231-533-6265.



## *Memorandum Administration Office*

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September 30, 2016

TO: Administration Committee

FR: Janet Koch, Associate Planner

JK

RE: Leelanau Professional Business Services Contract

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Following is a communication from IT Director Valerie Craft describing the need for a contract with Leelanau Professional Business Services. Her communication also describes the nature of the contract, which is that it automatically renew for an additional year unless either party requests out of the contract.

In the past, oversight committees have asked that they be notified by department heads on an annual basis about recurring contracts. Ms. Craft is requesting approval to continue the contract through 2017.

**Motion by \_\_\_\_\_, seconded by \_\_\_\_\_, to recommend the Board of Commissioners approve the continuation of the contract with Leelanau Professional Business Services through December 31, 2017.**

## CONTRACT FOR SERVICES

This Contract is made as of December 23, 2014, between Leelanau Professional Business Services, LLC ("Leelanau"), of 2561 N. Setterbo Road, Suttons Bay, Michigan 49682, and the County of Antrim, ("County"), of 203 E. Cayuga Street, PO Box 520, Bellaire, MI, 49615, for the provision of technical support and assistance for Antrim County's Network.

### SECTION I LEELANAU'S OBLIGATIONS AND DUTIES

Leelanau, when requested, shall provide onsite and offsite technical support for all computer hardware, software, servers and infrastructure needs. This includes direct and indirect support and assistance of all routers, switches, network cabling, network interfaces and communication devices throughout the County.

### SECTION II COUNTY'S OBLIGATIONS AND CONTRACT SUM

The County shall pay Leelanau an hourly rate of \$90.00.

### SECTION III TERM AND TERMINATION

This Contract shall commence January 1, 2015 and continue through December 31, 2015. The Contract will renew automatically for an additional year unless either party notifies the other at least thirty (30) days in advance of their intention not to renew.

### SECTION IV PAYMENT METHOD

Leelanau shall submit a detailed monthly invoice to the County at the beginning of each month, setting-forth the services provided in the preceding month with a detailed time record indicating the date and number of hours of service. The County will pay within thirty (30) days of receipt of invoice.

### SECTION V TERMINATION

This Contract may be terminated with thirty (30) days notice in writing by either party.

In the event of termination, the County shall continue to pay for the services being provided by Leelanau as it winds up its service to the County.

**SECTION VI  
CONFIDENTIALITY**

Leelanau acknowledges that it will come into possession of proprietary information belonging to the County during the course of providing the professional services under this Contract. Leelanau agrees on behalf of itself and its employees and agents to safeguard this information and prevent its disclosure to any parties other than the County and its employees.

**SECTION VII  
REVISION AND AMENDMENTS**

This Contract shall not be revised or amended, unless it is in writing and signed by both parties.

**SECTION VIII  
GENERAL PROVISIONS**

- a. Indemnification: Leelanau will pay any claims made against the County and its elected officials, agents, representatives, volunteers and employees arising out of the services under this Contract.
- b. Independent Contractor: Leelanau is an independent contractor and will not hold themselves out to be employees of the County. Leelanau will pay all payroll taxes and insurance for its employees.
- c. Conflicts of Interest: Leelanau affirms that it has no interest which would conflict with the performance of services required by this Contract. If a possible conflict of interest arises, Leelanau will immediately inform the County regarding same.
- d. Binding Effect: This Contract will be binding upon and inure to the benefit of Leelanau and the County and their respective legal representatives.
- e. Waiver: No provision of this Contract will be deemed waived and no breach excused, unless such waiver or consent is in writing and signed by the party claimed to have waived or consented. Any consent by any party or waiver of, a breach of the other party, whether express or implied, will not constitute consent to, waiver of, or excuse for any different or subsequent breach.
- f. Invalid Provisions: If any provision of this Contract is held to be invalid by a court of competent jurisdiction, it will be considered to be deleted and the remainder of the Contract will not be affected thereby. Where the deletion of the invalid provision would result in the illegality and/or unenforceability of this Contract, this Contract will be considered to be terminated as of the date on which the provision was declared invalid.
- g. Section Titles: The titles of the sections set-forth in this Contract are inserted for convenience only and will be disregarded when construing or interpreting any of the provisions of this Contract.

h. Choice of Law and Forum: This Contract will be governed by and interpreted according to the laws of the State of Michigan. The parties agree that the proper venue for litigation arising out of this Contract is Antrim County, Michigan.

i. Entire Contract: This Contract contains all the terms and conditions agreed upon by the parties. No other negotiations, representations, understandings or contracts, whether written or oral, regarding the subject matter of this Contract shall bind the parties in any way.

j. County Employees: Leelanau will not hire any County employee to perform any of the services covered by this Contract without written authorization from the County for one (1) year after the conclusion of this Contract or any extension of this Contract.

**SECTION VII  
EQUAL OPPORTUNITY**

Contractor, Subcontractor and Suppliers, in performing under this Contract, shall not discriminate against any worker, employee, or applicant for employment because of race, color, religion, height, weight, marital status, national origin, ancestry, sex, age (except where requirements as to age is based upon a bona fide occupational qualification), or handicap (that is unrelated to the individual's ability to perform the duties of a particular job or position) pursuant to 1976 PA 453, as amended, MCL 37.2101 et seq. (Employers engaging in Unfair Labor Practices Act).

**LEELANAU PROFESSIONAL BUSINESS SERVICES, LLC**

**COUNTY OF ANTRIM**

*Susan Joneypud*  
By:  
Its: *Member/Mgr*  
Date: *December 12, 2014*

*Michael Crawford*  
By: Michael Crawford  
Its: Chairman  
Date: *12-22-2014*

*Sheryl Guy*  
By: Sheryl Guy  
Its: Antrim County Clerk  
Date: *12-23-2014*

*Valerie Craft*  
By: Valerie Craft  
Its: IT Director  
Date: *12/18/14*

S/Civil/IT/#14-0170 2015 Network Support & Assistance  
Contract 11-25-2014

3.

Approved as to form.  
*AR*  
Date *11/26/2014*

ANTRIM COUNTY  
DEPARTMENT OF INFORMATION TECHNOLOGY



P.O. Box 187  
203 E. Cayuga Street  
Bellaire, Michigan 49615

*Valerie Craft, Director*

Phone: 231-533-3600  
Fax: 231-533-8111  
craftv@antrimcounty.org

September 29, 2016

To: Administration & County Services Committee

From: Valerie Craft, Information Technology Director

RE: Contract Between Leelanau Professional Business Services, LLC and Antrim County

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Attached, please find the contract between Leelanau Professional Business Services, LLC and Antrim County for technical support and assistance for Antrim County's network. As the contract is written, it will automatically renew for an additional year unless either party notifies the other to end the contract.

I would like to continue working with Leelanau Professional Business Services, LLC and request approval to continue the contract for technical support and assistance for Antrim County's network for January 1, 2017 through December 31, 2017.

I greatly appreciate your assistance with this matter.



## *Memorandum Administration Office*

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September 30, 2016

TO: Administration Committee

FR: Janet Koch, Associate Planner JK

RE: Password Policy

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The Administration Committee briefly reviewed the proposed Password Policy at their September 1, 2016 meeting, but opted to discuss the policy more fully in October after the department heads had reviewed it.

Since that time, IT Director Valerie Craft has provided the proposed policy to the department heads for comments. After receiving the comments, Ms. Craft revised the policy, which is included in your packets.

The following motion is for your consideration:

**Motion by \_\_\_\_\_, seconded by \_\_\_\_\_, to recommend the Board of Commissioners adopt the Password Policy as drafted by the IT Director.**

# **ANTRIM COUNTY PASSWORD POLICY**

**Adopted:**

## **1.0 Overview**

Passwords are an important aspect of computer security. They are the front line of protection for user accounts. A poorly chosen password may result in a compromise of Antrim County's entire network. As such, all Antrim County employees are responsible for taking the appropriate steps, as outlined below, to select and secure their password.

## **2.0 Objective**

The purpose of this policy is to establish a standard for the creation of strong passwords, the protection of those passwords, and the frequency of change.

## **3.0 Scope**

The scope of this policy includes all personnel who have or are responsible for an account (or any form of access that supports or requires a password) on any system that resides at any Antrim County facility, has access to the Antrim County network, or stores any non-public Antrim County information.

## **4.0 Policy and Procedures**

### **4.1 General**

- All systems-level passwords (e.g., root, enable, network administrator, application administration accounts, etc.) must be changed at least every 90 days.
- All user-level passwords (e.g., email, web, desktop computer, etc.) must be changed at least every 90 days and cannot reuse the past 10 passwords.
- Passwords must not be inserted into email messages or other forms of electronic communication.
- All user-level and system-level passwords must conform to the guidelines described below.

### **4.2 Guidelines**

#### **4.2.1 Password Construction Requirements**

- a. Passwords must be a minimum of 8 characters in length
- b. Not be a dictionary word or proper name.
- c. Not be the same as the User ID.

- d. Incorporate a minimum complexity that includes the following characteristics:
  - i) at least one lower case letter (a-z)
  - ii) at least one upper case letter (A-Z)
  - iii) at least one number (0-9)
  - iv) at least one punctuation or non-alphanumeric characters (e.g. ! @ # \$ % ^ & \* ( ) \_ - + = { } [ ] ; : ; " ` | \ / ? < > , .).
- e. Expire within a maximum of 90 calendar days.
- f. Not be identical to the previous ten (10) passwords.
- g. Not be displayed when entered.

#### **4.2.2 Password Deletion**

All passwords that are no longer needed must be deleted or disabled immediately. This includes, but is not limited to, the following:

- a. When a user retires, quits, is reassigned, released, dismissed, etc.
- b. Default passwords shall be changed immediately on all equipment.
- c. Contractor accounts, when no longer needed to perform their duties.

#### **4.2.3 Password Protection Standards**

All passwords are to be treated as sensitive, confidential Antrim County information.

Here is a list of "Do Not's":

- Do not reveal a password over the phone to anyone
- Do not reveal a password in an email message
- Do not reveal a password to your supervisor
- Do not reveal a password with anyone, including administrative assistants or secretaries.
- Do not talk about the specifics of a password in front of others
- Do not hint at the format of a password (e.g., "my family name")
- Do not reveal a password on questionnaires or security forms
- Do not share a password with family members
- Do not reveal a password to a co-worker while on vacation
- Do not use the "Remember Password" feature of applications
- Do not write passwords down and store them anywhere in your office.
- Do not use the same password for Antrim County accounts as for other non-Antrim County access

If someone demands a password, refer them to this document or have them call the Information Technology Department.

If an account or password is suspected to have been compromised, report the incident to the Information Technology Department and change all passwords.

Password cracking or guessing may be performed on a periodic or random basis by the Information Technology Department. If a password is guessed or cracked during one of these scans, the user will be required to change it.

### 4.3 Remote Access Users

Access to the Antrim County networks via remote access is to be controlled by using either a Virtual Private Network (in which a password and user ID are required) or a form of advanced authentication (i.e., Biometrics, Tokens, Public Key Infrastructure (PKI), Certificates, etc.).

### ~~5.0 Penalties~~

~~Any employee found to have violated this policy may be subject to disciplinary action, up to and including termination of employment.~~

*\*NOTE: Jim Rossiter – What about elected officials or their employees not subject to discipline by Board of Commissioners?*

### 5.0 Review

The Information Technology Department shall review this policy as needed or at least once every 3 years.

DRAFT



## *Memorandum Administration Office*

September 30, 2016

TO: Administration Committee

FR: Janet Koch, Associate Planner JK

RE: Dining Out Contract

The Dining Out contract was presented to the Health and Public Safety Committee at their September 27 meeting for their recommendation, however, civil counsel's review was not available until the day before the meeting, and civil counsel did suggest some changes. It was the consensus of that Committee to have the revised contract reviewed by the Administration Committee, which follows.

COA Director Judy Parliament indicates that: "An agreement is required to participate with our Dining Out program - which is an extension of our Congregate Meal program and gets counted as such when we are reimbursed through State and Federal funds administered by the Area Agency on Agency of Northwest Michigan. I have several restaurants that are showing interest in participating in this program. The same contract will be utilized, inserting the proper restaurant name, as they become eligible participants. All other terms and dates would remain consistent for ease of function and future renewals."

Ms. Parliament will use the same agreement to renew a purchase of service agreement for the dining-out meal program with G's Pizzeria & Deli.

The following motion for your consideration:

**Motion by \_\_\_\_\_, seconded by \_\_\_\_\_, to recommend the Board of Commissioners authorize the Board Chairman to execute purchase of service agreements for the dining-out meal program with Shirley's Café and G's Pizzeria & Deli for a term of two years from 10/1/16 – 9/30/18.**

**NUTRITION PURCHASE OF SERVICE (POS) CONTRACT  
DINING-OUT MEAL PROGRAM**

**THIS AGREEMENT** effective October 1, 2016 by and between SST Enterprises, Inc. (Shirley's Café & Shirley's Cafe in The Woods) (hereinafter referred to as "Restaurant"), located at 306 Elm Street, Kalkaska, MI 49646, and Antrim County, on behalf of Antrim County Commission on Aging, (hereinafter jointly referred to as "COA") whose mailing address is P.O. Box 614, Bellaire, Michigan 49615.

COA and Restaurant agree as follows:

**1. Term of Agreement**

This term of agreement is from October 1, 2016 to September 30, 2018, unless terminated earlier as provided below.

**2. Scope of Services**

Upon request from COA, the Restaurant shall provide COA participants with meals pursuant to the Dining Out Meal Program agreement. ~~To participate, the person must be 60 years of age or older or be the spouse of a person 60 years of age or older.~~ The Restaurant will provide meals meeting the standards of COA and Area Agency on Aging of Northwest Michigan (AAA NM) Requirements of Purchase of Service (POS) Congregate Meals Providers as more fully set forth in Attachment I.

**3. COA Responsibilities**

- a. COA shall provide meal certificates to eligible participants. ~~A participant can pick up certificates for themselves and a spouse. There is currently no maximum number of certificates a participant may purchase at any one time.~~ Meal certificates will be provided subject to available funding. ~~Additional certificates may be purchased as a gift for an eligible participant so long as the participant has a current NAPIS on file with COA.~~ Certificates are only valid for a ninety (90) day period.
- ~~b. COA will assist prospective participants complete the NAPIS registration to verify eligibility and shall keep a record of the completed registrations on file.~~
- c. COA will provide nutrition education in the form of a newsletter to all participants.
- d. COA will monitor the program and service of meal to participants.
- e. COA will assess the Restaurant's performance and provide feedback, as deemed appropriate, during the period of the agreement. The assessment will include but not be limited to a review of the most recent Health Department inspection report, participant satisfaction surveys, site visits and a review of all programmatic and fiscal information that is pertinent to this agreement. COA will advise the Restaurant of the assessment findings. COA may suspend or terminate this agreement based upon the assessment, including, but not limited to, the Health Department Inspections report.
- f. **PAYMENT and REPORTING.** The amount to be reimbursed is established from the costs presented in this Agreement (See Attachment II). Payment to the Restaurant will occur monthly upon receipt and approval of reporting from (See Attachment III) by COA. Reporting forms received after the 6th day of the month will be processed and paid the following month. No reporting form will be accepted nor paid if it is submitted more than three (3) months following the month the service (meal) was provided.

Restaurant understands that meals provided under this Agreement are tax-exempt under the authorization of the Michigan Department of Treasury) and that Restaurant shall not collect sales taxes.

#### 4. **Restaurant Responsibilities**

- a. Restaurant agrees to provide meals listed in Attachment II at the prices specified. COA shall not be responsible for the cost of any meal not specifically applicable to this agreement or the AAANM POS Agreement (See Attachment I). Restaurant shall be responsible for meeting all COA standards as provided in AAANM Requirements of Purchase of Service (POS) Congregate Meals Providers (See Attachment I). COA reserves the right to change the terms of the POS.
- b. Restaurant understands that being included in a pool of potential POS meal providers does not guarantee that the Restaurant will be called upon to provide meals service to COA participants, nor is the Restaurant guaranteed any specific amount of funding through this Agreement.
- c. Restaurant shall notify COA immediately if, for any reason, it will be unable for any reason to continue to provide the quality or quantity of meals.
- d. Restaurant agrees to provide meals under this Agreement to all participants presenting a certificate issued by COA, subject only to Restaurant's ability to serve the meals.
- e. Restaurant shall maintain on file, records and documents at all times and make available to COA the following as applicable: Personnel Records, all Certifications and/or Licenses, Equal Opportunity Statement, Liability Insurance, Health Department Inspections, and Annual Internal Evaluations.
- f. Restaurant agrees to allow COA and AAANM staff to have access to all reports and records noted in this agreement for the purpose of assessment. Assessments may be conducted by COA and/or AAANM staff at the restaurant to evaluate compliance with this Agreement and AAANM Requirements of Purchase of Service (POS) Congregate Meals Providers (See Attachment I).
- g. PAYMENT and REPORTING. The Restaurant will receive payment for meals provided under this Agreement based on monthly reimbursement reports (See Attachments II and III). The monthly reporting forms are to be submitted to COA on or before the 61h day of each month following the month in which services (meal) were provided. The Restaurant must establish and maintain record systems acceptable to COA to verify all programmatic and fiscal information reported and make such records available for review by COA.
- h. Restaurant agrees to submit its final reporting form to COA for services rendered under this Agreement by the 6<sup>th</sup> day of the month following termination of this Agreement.

#### 5. **Termination**

Either party may terminate this agreement upon thirty (30) days written notice **without any cause or reason.**

#### 6. **Hold Harmless/Indemnification**

Restaurant shall indemnify and hold harmless the COA, their public officials, **board members, officers, agents, employees, representatives,** and insurers from any damages of any kind, **including attorneys' fees and costs,** which arise out of this agreement for any liability of any and all suits for damages, including damages sustained by any person, including any participant or property, resulting in whole or in part arising for performance of this agreement and from any act or omission of any employee, agent, invitee, or representative of the Restaurant.

#### 7. **Insurance**

Restaurant agrees to maintain and provide proof of public liability insurance as will fully protect the Restaurant and COA from any and all claims of whatsoever kind or nature, for the damage to property or for personal injury, including death, made by anyone whomsoever, which may arise from operations carried out under this Agreement, either by the Restaurant, or by anyone directly or indirectly engaged or employed by the Restaurant. Restaurant further agrees to indemnify all of the foregoing liabilities and any and all costs of expenses, including attorney's fees, incurred by COA on account of any claims therefore.

**Independent Contractor**

The parties agree that Restaurant is an independent contractor. Restaurant and its employees will in no way be deemed, nor hold themselves out to be, an employee, agent or joint venture partner of the COA for any purpose, and will not be entitled to any fringe benefits of the COA, such as, but not limited to, health and accident insurance, retirement plans, life insurance, paid sick or vacation leave, or longevity pay. Restaurant will be responsible for withholding and payment of all -applicable taxes, including income and social security and unemployment taxes, to the proper federal, state and local governments, and maintaining the required workers' compensation insurance, in connection with services rendered by Restaurant and its employees pursuant to this Agreement, and agrees to protect, defend and indemnify the COA against such liability.

**8. Compliance with Laws**

Restaurant will comply with all federal, state and local laws, including, but not limited to, all applicable OSHA/MIOSHA requirements, health and food requirement and the Americans with Disabilities Act. Restaurant agrees to protect, defend and indemnify the COA against liability for loss, cost or damage resulting from actual or alleged violations of law by COA.

**9. Nondiscrimination**

Restaurant will adhere to all applicable federal, state and local laws, ordinances, rules and regulations prohibiting discrimination. Restaurant, as required by law, will not discriminate against a person to be served or any employee or applicant for employment because of race, color, religion, national origin, age, sex, disability, height, weight, marital status, or any other factor prohibited by applicable law.

**10. Attachments**

Attached hereto and made a part hereof are the following attachments:

- Attachment I: AAANM Requirements of Purchase of Service (POS) Congregate Meals Providers
- Attachment II: Schedule of Costs
- Attachment III: Reporting Form

WHEREFORE, both parties have examined this contract and its provisions and are hereby in agreement.

\_\_\_\_\_  
Michael Crawford, Chairman  
Antrim County Board of Commissioners

\_\_\_\_\_  
Shirley Tracy, Owner  
Shirley's Café & Shirley's in The Woods Café

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

## **Requirements of a Purchase of Service Meal Provider**

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Being a Purchase of Service (POS) meal provider places you on a list of providers that the Antrim County Commission on Aging (ACCOA) uses to offer Congregate Meal Services for eligible clients. Below is a brief summary of what is involved in participating as a POS meal provider.

- Step 1.** Lunch, dinner and breakfast meals must meet the meal pattern requirements. Each meal must provide 1/3 RDA. See below for details:
- 3 ounces meat/meat alternate
  - 2 - 1/2 cup serving's fruit or vegetable
  - 1 serving bread/bread alternate
  - 1/2 cup dessert
  - 1 teaspoon butter, margarine, fat or oil
  - 8 ounces milk
- Step 2.** The ACCOA will pre-approve eligible meals prior to implementation of meal program. There will be ongoing evaluations of the meals served during the term of contract.
- Step 3.** The ACCO A will review recent Health Department inspections for verification of food safety and inspections.
- Step 4.** Proceed with POS negotiation, through signing of a Subcontractor Agreement with ACCOA.
- Step 5.** The seniors pick up meal vouchers at one of the four (4) ACCOA meal sites located in Bellaire, Central Lake, Elk Rapids and Mancelona, Michigan.
- Step 6.** The recipient dines at your restaurant, choosing selections according to the meal pattern (above).
- Step 7.** The voucher is turned in to the cashier, similar as a gift certificate. The cashier verifies the following:
- The meal is eligible, meets the RDA requirements
  - The type of meal consumed, i.e. breakfast, lunch or dinner
  - The recipients' signature
  - The voucher expiration date
- The recipient would be responsible for paying for all items not part of the meal pattern, as well as the tip/gratuity.
- Step 8.** At the end of the month, the restaurant submits a bill along with the submitted vouchers. The restaurant would then be reimbursed by ACCOA at the contracted rate based on the number of meals provided.

There are many benefits to becoming a Purchase of Service Meal Provider. Below are just a few:

- 1 . Capturing new customers
2. Seniors tend to eat smaller portion sizes (buffets and salad bars)
3. Family and friends may join the recipient, increasing customer numbers
4. Great community outreach and support

Thank you for your interest in participating as a POS meal provider with ACCOA. We look forward to working closely with you.

## Dining Out Meal Program

### Schedule of Costs

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Reimbursement will be figured as follows:

Shirley's Café  
528 S. Williams, Mancelona, MI 49659  
(231) 587-1210

and

Shirley's in The Woods Cafe  
I 0945 M-72, Kalkaska, MI 49646  
(231) 258-7955

Contact: Shirley Tracy, Owner

|            |         |
|------------|---------|
| Breakfast: | \$6.00* |
| Lunch:     | \$6.00* |
| Dinner:    | \$6.00* |

\* Costs are based on a per meal basis

**“DINING OUT” MONTHLY REPORT**

Restaurant: Shirley's Café

Address: 528 S. Williams, Mancelona, MI 49659

Service Period: Month(s) \_\_\_\_\_ Year \_\_\_\_\_

Meals Served:

Breakfast \_\_\_\_\_ X \$5.25 = \_\_\_\_\_

Lunch \_\_\_\_\_ X \$5.25 = \_\_\_\_\_

Dinner \_\_\_\_\_ X \$5.25 = \_\_\_\_\_

TOTAL = \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Restaurant: Shirley's Café

Address: 10945 M-72, Kalkaska, MI 49646

Service Period: Month(s) \_\_\_\_\_ Year \_\_\_\_\_

Meals Served:

Breakfast \_\_\_\_\_ X \$5.25 = \_\_\_\_\_

Lunch \_\_\_\_\_ X \$5.25 = \_\_\_\_\_

Dinner \_\_\_\_\_ X \$5.25 = \_\_\_\_\_

TOTAL = \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Certification: For payment all certificates for the above service MUST be attached**



## *Memorandum Administration Office*

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September 30, 2016

TO: Administration Committee

FR: Janet Koch, Associate Planner JK

RE: Health Insurance

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As noted at the September 19, 2016 Special Administration Committee meeting, the Administration Office provided a compiled spreadsheet on September 26 to the employee representatives that contained dollar amounts from the different insurance agencies and their available plans.

Also at the September 19 meeting, it had been the Committee's consensus that the cost of health care premiums will drive the recommendations for the Antrim County employee hard caps.

On Monday, October 3, Pete Garwood, County Administrator, is scheduled to meet with employee representatives with the goal of bringing recommendations to the Committee regarding health insurance.

The results of that meeting will be provided to the Committee before your meeting on October 6.



## *Memorandum Administration Office*

October 4, 2016

TO: Administration Committee

FR: Peter Garwood, Administrator

RE: Health Insurance

The health insurance committee made up of members of each of the employee groups and bargaining units (sanctioned by the Board of Commissioners) and I met on Monday, October 3. We discussed the options from West Michigan Health Pool, the self-funding option provided by C & M Insurance Services and the new options provided by Dewey Insurance Agency.

It was the consensus of the Committee that the County Board of Commissioners approve switching from the current Priority Health plans to the two plans offered by Blue Care Network (BCN) through Dewey Insurance Agency. These two plans illustrated on the attached spreadsheets are most similar in the provision of the current benefits: Option 1 – BCN 4 HMO in place of the current Priority Health 100% Traditional or “High Plan”, and Option 1 – BCN 5 HMO in place of the current Priority Health 80/20 or “Low Plan”.

The following motion for your consideration:

**Motion by \_\_\_\_\_, seconded by \_\_\_\_\_, to recommend the Board of Commissioners approve switching from the current Priority Health plans to the two plans offered by Blue Care Network (BCN) through Dewey Insurance Agency, BCN 4 HMO and BCN 5 HMO as the only two health plans offered to all Antrim County employees eligible for the health insurance benefit.**

The health insurance committee is also recommending the Board of Commissioners exempt the County from the PA 152 employer caps for the 2017 benefit plan year beginning January 1, 2017. The committee agreed on a recommended set of replacement employer caps. The caps recommended by the committee are attached on an attached spreadsheet which also includes a set of employer caps recommended by me, the County Administrator (lower chart – columns 2 and 3). The caps recommended by the committee are the same caps approved by the Board of Commissioner for the last three months of 2016. Because the BCN 5 (Low Plan) premiums are substantially lower than the Priority Health 80/20 (Low Plan), the caps recommended by the committee would be higher than the premiums by \$84.65 for a single subscriber, \$37.19 for a double subscriber and \$97.87 for a family subscriber.

The employer caps I am recommending are more closely aligned with the BCN 5 (low plan) premiums, and result in a \$0 payroll deduction for the single subscriber, \$43.73 for the double and \$\$38.79 for the family subscribers (much less than the current payroll deductions). The Board of Commissioners must take action to exempt the County from the PA 152 caps with this option as well, because it raises the two person cap higher than the PA 152 caps.

The following motion for your consideration:

**Motion by \_\_\_\_\_, seconded by \_\_\_\_\_, to recommend the Board of Commissioners approve exempting the County from the PA 152 of 2011 Employer health insurance premium caps for the 2017 benefit plan year beginning January 1, 2017 and adopt the following Employer health insurance premium caps; Single \$\_\_\_\_\_, Double \$\_\_\_\_\_ and Family \$\_\_\_\_\_.**

If you have any questions please do not hesitate to contact me.

| <b>HIGH Plans<br/>(In-Network)</b> | <b>Deductible<br/>Individual/<br/>Family</b> | <b>Coinsurance<br/>(NOT office<br/>visits, scripts,<br/>preventative)</b> | <b>Coinsurance<br/>Max<br/>Individual/<br/>Family</b> | <b>Out-of-Pocket<br/>Annual Limit<br/>Individual/Family<br/>(Includes DD,<br/>Coins, Copays)</b> | <b>Hospital<br/>Inpatient</b> | <b>Office Visits<br/>Primary/<br/>Specialist/<br/>Urgent Care</b> | <b>Emergency<br/>Copay</b> | <b>Prescription-<br/>Generic/<br/>Formulary/<br/>Non-Formulary</b> | <b>SINGLE<br/>PA152 CAP<br/>2017<br/>\$528.73</b> | <b>2 PERSON<br/>PA152 CAP<br/>2017<br/>\$1,105.75</b> | <b>FAMILY<br/>PA152 CAP<br/>2017<br/>\$1,442.00</b> | <b>Change<br/>from<br/>2015-<br/>2016<br/>Plan</b> |
|------------------------------------|--|---|---|--|-------------------------------|---|----------------------------|--|---|---|---|--|
| Priority Hlth - CURRENT HMO        | \$0/\$0                                      | 100%  | 0/0   | \$6,600/\$13,700   | 100%                          | \$25/\$25/\$25  | \$50                       | \$10/\$40/\$40   | \$772.31  | \$1,737.55  | \$2,085.01  | 14.39%   |

**Western Michigan Health Insurance Plan - Doug Derks with Arthur J. Gallagher & Co.**

|                                    |             |      |                 |                 |               |      |                          |                |          |            |            |         |
|------------------------------------|-------------|------|-----------------|-----------------|---------------|------|--------------------------|----------------|----------|------------|------------|---------|
| Option 1<br>BCBS - PPO             | \$0/\$0     | 100% | NA              | \$2,250/\$4,500 | 100% after DD | \$20 | \$25-waived if admitted  | \$10/\$40/NA   | \$694.48 | \$1,562.53 | \$1,944.50 | 4.7%    |
| Option 2<br>BCBS - PPO             | \$250/\$500 | 100% | NA              | \$2,250/\$4,500 | 100% after DD | \$20 | \$25-waived if admitted  | \$10/\$40/NA   | \$675.27 | \$1,519.30 | \$1,890.70 | 1.8%    |
| Option 3<br>BCBS Simply Blue - PPO | \$250/\$500 | 90%  | \$1,000/\$2,000 | \$2,250/\$5,000 | 90% after DD  | \$20 | \$150-waived if admitted | \$10/\$40/\$60 | \$577.67 | \$1,299.72 | \$1,617.45 | - 12.9% |

1. Plans require a 3-year commitment with adoption of resolution by the BOC.
2. Premiums include taxes and fees.
3. Prescription Mail Order (90 days, 2 copays)

**Dewey Insurance Agency - Pat Dewey & Darci Fitch**

|                                    |             |                      |                 |                  |      |                |       |   |          |            |            |         |
|------------------------------------|-------------|----------------------|-----------------|------------------|------|----------------|-------|---|----------|------------|------------|---------|
| Option 1<br>BCN-4 - HMO            | 0/0         | 100% - most services | NA              | \$6,600/\$13,200 | 100% | \$25/\$25/\$25 | \$50  | \$10/\$40/\$80                          | \$602.60 | \$1,446.23 | \$1,807.79 | - 4.05% |
| Option 2<br>BCN-1 - HMO            | 0/0         | 90% - most services  | \$1,000/2000    | \$5,000/\$10,000 | 90%  | \$20/\$30/\$35 | \$150 | \$4-\$15/<br>\$40/<br>\$80/<br>20%-20%* | \$568.40 | \$1,364.15 | \$1,705.19 | - 9.5%  |
| Option 3<br>BCBS Simply Blue - PPO | \$250/\$500 | 80%- most services   | \$1,500/\$3,000 | \$6,350/\$12,700 | 80%  | \$20/\$20/\$20 | \$150 | \$10/\$40/\$80                          | \$625.13 | \$1,500.31 | \$1,875.38 | - .47%  |

- \*20% of the allowed amount for preferred specialty and non-preferred specialty
1. BCBS and BCN will provide a \$2,500 implementation credit if the County signs with them.
  2. Premiums include taxes and fees

**C&M Insurance Services - Lew Wolters**

|                        |     |      |    |                  |      |                |      |                |          |            |            |  |
|------------------------|-----|------|----|------------------|------|----------------|------|----------------|----------|------------|------------|--|
| Option 1<br>BCBS - PPO | 0/0 | 100% | NA | \$6,350/\$12,700 | 100% | \$30/\$30/\$30 | \$50 | \$10/\$40/\$80 | \$612.38 | \$1,471.91 | \$1,839.90 |  |
|------------------------|-----|------|----|------------------|------|----------------|------|----------------|----------|------------|------------|--|

1. Premiums do not include PICORI fee (.19 per member per month).
2. Two-year contract; rates stay the same.

**ADDITIONAL NOTES:**

1. **Preventative care** is a provision of the Affordable Care Act and is covered at 100% on all plans.
2. **Simply Blue:** More costs hit the deductible amount. In addition to the office visit copay, any office procedures would be coded as a diagnostic procedure and would be billed to the plan-holder and apply to their deductible. Out of network referrals would be considered out of network costs and emergency room fees would hit the deductible even if the patient was admitted.

| <b>LOW Plans (In-Network)</b> | <b>Deductible Individual/Family</b> | <b>Coinsurance (NOT office visits, scripts, preventative)</b> | <b>Coinsurance Max Individual/Family</b> | <b>Out-of-Pocket Annual Limit Individual/Family (Includes DD, Coins, Copays)</b> | <b>Hospital Inpatient</b> | <b>Office Visits Primary/Specialist/Urgent Care</b> | <b>Emergency Copay</b> | <b>Prescription- Generic/Formulary/Non-Formulary</b> | <b>SINGLE PA152 CAP 2017 \$528.73</b> | <b>2 PERSON PA152 CAP 2017 \$1,105.75</b> | <b>FAMILY PA152 CAP 2017 \$1,442.00</b> | <b>Change from 2015-2016 Plan</b> |
|-------------------------------|-------------------------------------|---|--|--|---------------------------|---|------------------------|--|---------------------------------------|---|---|-----------------------------------|
| Priority Hlth - CURRENT HMO   | \$750/\$1,500                       | 80%   | \$1,500/\$3,000                          | \$6,850/\$13,700   | 80% after DD              | \$30/\$45/\$75                                      | \$150-DD applies       | \$10/\$50  | \$599.55                              | \$1,348.86                                | \$1,647.39                              | 15.53%                            |

**Western Michigan Health Insurance Plan - Doug Derks with Arthur J. Gallagher & Co.**

|                                 |                 |     |                 |                 |              |                |                                 |   |          |            |            |      |
|---------------------------------|-----------------|-----|-----------------|-----------------|--------------|----------------|---------------------------------|---|----------|------------|------------|------|
| Option 1 BCBS - PPO             | \$1,000/\$2,000 | 80% | \$2,500/\$5,000 | \$4,500/\$9,000 | 80% after DD | \$20           | \$50-waived if admitted         | \$10/\$40/NA                              | \$553.62 | \$1,245.60 | \$1,550.09 | 8.1% |
| Option 2 BCBS Simply Blue - HSA | \$1,300/\$2,600 | 80% | \$1,000/\$2,000 | \$2,300/\$4,600 | 80% after DD | 80% after DD   | 80% after DD-waived if admitted | \$20 after DD/\$40 after DD/\$80 after DD | \$535.87 | \$1,205.66 | \$1,500.40 | 4.6% |
| Option 3 BCBS Simply Blue - PPO | \$1,000/\$2,000 | 80% | \$2,500/\$5,000 | \$4,500/\$9,000 | 80% after DD | \$30/\$50/\$60 | \$150-waived if admitted        | \$10/\$40/\$80 15%/25%*                   | \$525.94 | \$1,183.32 | \$1,472.59 | 2.6% |

\*15% of allowed amount, max \$200/25% of allowed, max \$300 - formulary/non-formulary

1. Plans require a 3-year commitment with adoption of resolution by the BOC.
2. Premiums includes taxes and fees.
3. Prescription Mail Order (90 days, 2 copays)

**Dewey Insurance Agency - Pat Dewey & Darci Fitch**

|                                 |                 |                       |                 |                  |              |                               |                               |  |          |            |            |         |
|---------------------------------|-----------------|-----------------------|-----------------|------------------|--------------|-------------------------------|-------------------------------|--|----------|------------|------------|---------|
| Option 1 BCN-5 - HMO            | \$750/\$1,500   | 80% - select services | \$1,500/\$3,000 | \$6,600/\$13,200 | 80% after DD | \$30/\$45/\$65                | 0-after DD                    | \$15/\$50/50%* after DD                      | \$493.60 | \$1,184.63 | \$1,480.79 | 2.63%   |
| Option 2 BCN-3 - HMO            | \$1,000/\$2,000 | 80% - select services | \$2,500/\$5,000 | \$6,600/\$13,200 | 80% after DD | \$20/\$40/\$50                | \$150 after DD                | \$4-\$15/\$40/\$80/20%-20%**                 | \$487.59 | \$1,170.21 | \$1,462.77 | 1.38%   |
| Option 3 BCBS Simply Blue - PPO | \$1,000/\$2,000 | 80% - most services   | \$2,500/\$5,000 | \$6,350/\$12,700 | 80% after DD | \$30/\$50/\$60                | \$150                         | \$15/\$50/50%* after DD                      | \$519.56 | \$1,246.95 | \$1,558.69 | 8.03%   |
| Option 4 Priority HSA - HMO     | \$2,000/\$4,000 | 80%                   | N/A             | \$4,000/\$8,000  | 80% after DD | subject to DD and coinsurance | subject to DD and coinsurance | ***\$15 after DD/\$50 after DD/\$80 after DD | \$435.04 | \$978.76   | \$1,195.36 | -15.62% |

\*50% of the allowed amount (minimum \$70, maximum of \$100)

\*\*20% of the allowed amount for preferred specialty and non-preferred specialty

\*\*\*certain preventive drugs covered with copay prior to deductible

**NOTES:**

1. BCBS and BCN will provide a \$2,500 implementation credit if the County signs with them.
2. Premiums include taxes and fees

**C&M Insurance Services - Lew Wolters**

|                         |               |     |                 |                  |              |                |       |                |          |            |            |  |
|-------------------------|---------------|-----|-----------------|------------------|--------------|----------------|-------|----------------|----------|------------|------------|--|
| C&M - Option 1 BCBS PPO | \$500/\$1,000 | 80% | \$1,500/\$3,000 | \$6,350/\$12,700 | 80% after DD | \$10/\$40/\$80 | \$150 | \$10/\$40/\$80 | \$457.68 | \$1,098.44 | \$1,373.06 |  |
|-------------------------|---------------|-----|-----------------|------------------|--------------|----------------|-------|----------------|----------|------------|------------|--|

1. Premiums do not include PICORI fee (.19 per member per month).

2. Two-year contract; rates stay the same.

**ADDITIONAL NOTES:**

1. **Preventative care** is a provision of the Affordable Care Act and is covered at 100% on all plans.
2. **Simply Blue Plans:** More costs hit the deductible amount. In addition to the office visit copay, any office procedures would be coded as a diagnostic procedure and would be billed to the plan-holder and apply to their deductible. Out of network referrals would be considered out of network costs and emergency room fees would hit the deductible even if the patient was admitted.
3. **HSA accounts:** If one person on the plan reaches the deductible for a 2-person or family, he still will have to reach the family deductible before the plan begins to pay at the next level. Contribution Limits are \$3,350 self-only, \$6,750 family, \$1,000 catch up age 55+

| Final Quarter of 2016 |                                 |                                     |                                       |  |                                   |
|-----------------------|---------------------------------|-------------------------------------|---------------------------------------|--|-----------------------------------|
| 100% Plan             | Priority Health Monthly Premium | 2016 Caps (BOC Opted out of PA 152) | Employee Contribution (froze at 2015) | Total Monthly Cost to County (BOC Opted Out of PA 152) | Cost to County Over the 2016 Caps |
| Single                | 778.93                          | 511.84                              | 185.39                                | 593.54   | 81.70                             |
| Double                | 1,751.82                        | 1,070.42                            | 495.62                                | 1,256.20   | 185.78                            |
| Family 3+             | 2,103.60                        | 1,395.94                            | 487.46                                | 1,616.14   | 220.20                            |
| 80/20 Plan            | Priority Health Monthly Premium | 2016 Caps (BOC Opted out of PA 152) | Employee Contribution (froze at 2015) | Total Monthly Cost to County (BOC Opted Out of PA 152) | Cost to County Over the 2016 Caps |
| Single                | 604.51                          | 511.84                              | 26.26                                 | 578.25   | 66.41                             |
| Double                | 1,359.42                        | 1,070.42                            | 137.60                                | 1,221.82   | 151.40                            |
| Family 3+             | 1,661.62                        | 1,395.94                            | 82.96                                 | 1,578.66   | 182.72                            |

| 2017 Plan Options |                                       |  |   |                           |  |  |  |
|-------------------|---------------------------------------|--|---|---------------------------|--|--|--|
| 100% Plan         | 2017 PA 152 Caps (BOC NOT Opting Out) | Employee Proposed 2017 Caps (BOC Opting Out) | Administrator Proposed 2017 Caps (BOC Opting Out) | BCN-4 HMO Monthly Premium | BCN-4 HMO Employee Contribution 2017 PA 152 Caps | BCN-4 HMO Employee Contribution Proposed BOC 2017 Caps | BCN-4 HMO Employee Contribution Administrator Proposed BOC 2017 Caps |
| Single            | 528.73                                | 578.25                                       | 528.73  | 602.60                    | 73.87  | 24.35  | 73.87  |
| Double            | 1,105.75                              | 1,221.82                                     | 1,140.90  | 1,446.23                  | 340.48   | 224.41   | 305.33   |
| Family 3+         | 1,442.00                              | 1,578.66                                     | 1,442.00  | 1,807.79                  | 365.79   | 229.13   | 365.79   |
| 80/20 Plan        | 2017 PA 152 Caps (BOC NOT Opting Out) | Employee Proposed 2017 Caps (BOC Opting Out) | Administrator Proposed 2017 Caps (BOC Opting Out) | BCN-5 HMO Monthly Premium | BCN-5 HMO Employee Contribution 2017 PA 152 Caps | BCN-5 HMO Employee Contribution Proposed BOC 2017 Caps | BCN-5 HMO Employee Contribution Administrator Proposed BOC 2017 Caps |
| Single            | 528.73                                | 578.25                                       | 528.73  | 493.60                    | -35.13   | -84.65   | -35.13   |
| Double            | 1,105.75                              | 1,221.82                                     | 1,140.90  | 1,184.63                  | 78.88  | -37.19   | 43.73  |
| Family 3          | 1,442.00                              | 1,578.66                                     | 1,442.00  | 1,480.79                  | 38.79  | -97.87   | 38.79  |