

**AITKIN COUNTY HEALTH & HUMAN SERVICES
BOARD MEETING AGENDA
November 27, 2012**

- 9:00 A.M.**
- I. Call to Order**
 - II. Pledge of Allegiance**
 - III. Approval of Agenda**
 - IV. Review October 23, 2012 Health & Human Service Board Minutes**
 - V. Review Bills**
 - VI. General/Miscellaneous Information**
 - A. Review of Proposed 2013 Health & Human Services Board Meeting dates.**
 - B. Purchase of CHAMPS Software System through the CHS Board - FYI**
 - C. DHS Adoption and Foster Care Recruitment Grant (10/12/12-6/30/13) for the reimbursement of costs of LexisNexis Accurint licenses - FYI**
 - D. MACSSA 2013 Legislative Initiatives - FYI**
 - VII. Contracts**
 - A. Purchase of Service Agreement to provide Minnesota Family Investment Program (MFIP) Employment & Training Services and Diversionary Work Program services (DWP) for the period January 1, 2013 to December 31, 2013 between ACHHS and:**
 - 1. Arrowhead Economic Opportunity Agency**
 - 2. Northeast Minnesota Office of Job Training**
 - B. Ambulance Service Contracts for the period January 1, 2013 to December 31, 2013, between ACHHS and:**
 - 1. McGregor Area Ambulance Service, McGregor**
 - 2. Meds-1 Ambulance Service Inc.**
 - 3. Mille Lacs Health System Ambulance**
 - 4. North Memorial Medical Transportation**
 - C. Purchase of Service Agreement to provide mental health services for the period January 1, 2013 to December 31, 2013 between ACHHS and:**
 - 1. George Tetreault, Baxter**
 - 2. CORE Professional Services, P.A., Brainerd**
 - 3. Northern Psychiatric Associates, Baxter**
 - D. Agreement between Northland Counseling Center, Inc. and ACHHS for Detoxification Services for the period January 1, 2013 to December 31, 2013**
 - E. Purchase of Service Agreement between ACHHS and New Pathways, Inc., Brainerd Facility, to provide case management services for the period January 1, 2013 to December 31, 2013.**
 - F. Letter of Agreement between ACHHS and Dr. Mark Heggem, MD, a medical doctor practicing at Riverwood Healthcare Center, Aitkin, for the purpose of Public Health Medical Consultant for the period January 1, 2013 through December 31, 2013.**

VIII. Administrative Reports:

- A. **Caseload Update & Graph** – Eileen Foss, Income Maintenance Supervisor
- B. **Financial & Transportation Reports** – Kathy Ryan, Fiscal Supervisor

IX. Joint Powers Board Reports:

- A. **Tri-County Community Health Services Board (CHS) – Commissioner Westerlund / Tom Burke / Cynthia Bennett
Minutes of the October 11th meeting.**

X. Committee Reports from Commissioners

- A. **H&HS Advisory Committee** - Commissioners Westerlund and/or Marcotte
Meeting updates from Committee Members: Cheryl Meld & Roberta Elvecrog
Minutes of the September 5th and November 7th meetings.
- B. AEOA / NEMOJT Committee Updates – Commissioner Napstad
- C. CJI (Children’s Justice Initiative) – Commissioner Westerlund

XI. Adjournment:

Next Meeting – December 18, 2012

**AITKIN COUNTY HEALTH & HUMAN SERVICES
BOARD MEETING MINUTES
October 23, 2012**

NOTE: This meeting was scheduled from 8:30 to 8:55 a.m. with a condensed Agenda.

I. Call to Order

The Aitkin County Board of Commissioners met this 23rd day of October, 2012, at 8:32 a.m. as the Aitkin County Health & Human Services Board, beginning with the Pledge of Allegiance, with the following members present: Chairperson Commissioner Mark Wedel; Commissioners Anne Marcotte, Brian Napstad, Don Niemi and Laurie Westerlund; and others present included: County Administrator Patrick Wussow; H&HS Director Tom Burke; Staff Members Cynthia Bennett, Public Health Supervisor; Kathleen Ryan, Fiscal Supervisor; Julie Lueck, Clerk to the Health & Human Services Board; and guests; Roberta Elvecrog, DAC & HHS Advisory; and Nanci Sauerbrau, Aitkin Independent Age.

II. Pledge of Allegiance

III. Approval of Agenda

Motion by Commissioner Westerlund, seconded by Commissioner Napstad, and carried; the vote was to approve the agenda as mailed/posted.

**IV. Review August 28, 2012 Health & Human Service Board Minutes
The September 25th, 2012 H&HS Board Meeting was canceled.**

Motion by Commissioner Napstad, seconded by Commissioner Niemi, and carried; the vote was to approve the August 28, 2012 Health & Human Services Board Meeting Minutes as mailed/posted.

V. Review Bills

Motion by Commissioner Napstad, seconded by Commissioner Westerlund, and carried; the vote was to approve the Bills as presented this date.

VI. General/Miscellaneous Information

- A. NACO – Health Steering Committee Appointment – Tom Burke updated the Board that his nomination as a member of the NACO Health Steering Committee has been confirmed and explained his participation/involvement on this committee. Motion by Commissioner Niemi, seconded by Commissioner Marcotte, and carried, the vote was to approve and authorize Tom Burke to serve as a member on the NACO Health Steering Committee which will include attendance at NACO meetings as well as participation in phone conferences.**
- B. IT for Public Health – CHAMPS – FYI – Tom Burke updated the Board on the use of CHAMPS for case record management which will be web based. This system will be housed in a central location, so none of the counties will have equipment housing issues. The rough estimate of the cost is 72,188. The CHS will cover the first \$20,000 and the counties will each pay approximately \$17,396. The CHAMPS system will meet the federal and state guidelines/mandates required to be in place by 2015. The contract will be between CHAMPS and the CHS joint powers. There will need to be agreements put into place for counties to pay their respective portions. Maintenance of the system is presently at \$13,322**

which will be divided amongst the three counties. This will be brought back to Board for approval in November.

VII. Contracts

- A. WIC Agreement – Malmo – between ACHHS and the Bethesda Lutheran Church of Malmo for the period January 1, 2013 to December 31, 2013.** *Motion by Commissioner Niemi, seconded by Commissioner Westerlund, and carried, the vote was to approve and authorize the Board Chair to sign the WIC Agreement – Malmo – between ACHHS and the Bethesda Lutheran Church of Malmo for the period January 1, 2013 to December 31, 2013.*

VIII. Administrative Reports:

- A. Income Maintenance Caseload Update & Graph – FYI**
B. Financial & Transportation Reports – *Kathy Ryan, Fiscal Supervisor noted we are on track.*

IX. Adjournment:

Next Meeting – November 27, 2012

Motion by Commissioner Westerlund, seconded by Commissioner Napstad, and carried; the vote was to adjourn the meeting at 8:52 a.m.

Mark Wedel, Chairperson

Tom Burke, Director
Aitkin County Health & Human Services

Julie Lueck, Clerk to Aitkin County Health & Human Services Board

**The Statistical Reports for the third quarter of 2012
for Income Maintenance, Social Services and Public Health were included in this packet.**

Aitkin County

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

<u>Vendor Name</u>	<u>Accr</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
42 6094 AADA 05-430-710-3190-6020		90.00	Supervised visit/phone contact 10/10/2012 10/24/2012 1 Transactions		Court Related Services & Activities
6094 AADA		90.00	1 Transactions		
3 88284 AITKIN CO RECORDER 05-430-710-3930-6020		26.00	Birth certificate for driver's 10/26/2012 10/26/2012 1 Transactions		General Case Management
88284 AITKIN CO RECORDER		26.00	1 Transactions		
26 8125 BACKSTROM/MARILYN 05-430-750-3950-6020		17.50	Public guardianship 10/01/2012 10/31/2012 1 Transactions		Public Guardianship Dd
8125 BACKSTROM/MARILYN		17.50	1 Transactions		
25 9791 BIEGANEK/JOAN M 05-430-760-3950-6020		105.00	Guardianship/Conservator Acti v 10/01/2012 10/31/2012 1 Transactions		Guardianship/Conservatorship
9791 BIEGANEK/JOAN M		105.00	1 Transactions		
59 87882 Central MN Mental Health Ctr 05-430-730-3710-6080		1,260.00	Detoxification (Category I) 10/03/2012 10/05/2012 1 Transactions		Detoxification - Other
87882 Central MN Mental Health Ctr		1,260.00	1 Transactions		
38 11572 COOPERATIVE SOLUTIONS 05-430-710-3660-6020		25.00	Family group decision making- r 10/23/2012 10/23/2012		Family Group Decision Making
39 05-430-710-3660-6020		91.96	Family group decision making- m 10/21/2012 10/22/2012		Family Group Decision Making
40 05-430-710-3660-6020		96.03	Family group decision making- c 10/23/2012 10/23/2012		Family Group Decision Making
41 05-430-710-3660-6020		730.00	Family group decision making 10/23/2012 10/23/2012		Family Group Decision Making
11572 COOPERATIVE SOLUTIONS		942.99	4 Transactions		
54 11051 Department of Human Services 05-430-720-3110-6069		361.42	BSFE County Match		Bsf Child Care

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56 05- 430- 720- 3110- 6069		361.42	10/01/2012 10/31/2012 BSFE County Match	Bsf Child Care
53 05- 430- 720- 3140- 6020		31.25	09/01/2012 09/30/2012 MEC2 MFIP Recoveries	Other Child Care
55 05- 430- 720- 3140- 6020		31.25	10/01/2012 10/31/2012 MEC2 MFIP Recoveries	Other Child Care
57 05- 430- 730- 3590- 6072		2,402.27	09/01/2012 09/30/2012 CCDTF Maintenance of Effort	Ccdtf County % State Billings
58 05- 430- 730- 3590- 6072		5,099.65	10/01/2012 10/31/2012 CCDTF Maintenance of Effort	Ccdtf County % State Billings
11051 Department of Human Services		8,287.26	09/01/2012 09/30/2012 6 Transactions	
9220 DHS- MSOP				
7 05- 430- 745- 3721- 6081		1,010.60	10/01/2012 10/31/2012 State- operated inpatient	Commitment Costs - Poor Relief
14 05- 430- 745- 3721- 6081		1,010.60	10/01/2012 10/31/2012 State- operated inpatient	Commitment Costs - Poor Relief
36 05- 430- 745- 3721- 6081		2,526.50	10/01/2012 10/31/2012 State- operated inpatient	Commitment Costs - Poor Relief
9220 DHS- MSOP		4,547.70	3 Transactions	
89965 DHS- ST PETER- SEE LIST				
16 05- 430- 745- 3721- 6081		1,714.30	10/01/2012 10/31/2012 State- operated inpatient	Commitment Costs - Poor Relief
18 05- 430- 745- 3721- 6081		732.20	10/01/2012 10/14/2012 State- operated inpatient	Commitment Costs - Poor Relief
89965 DHS- ST PETER- SEE LIST		2,446.50	2 Transactions	
91345 ELVECROG/ROBERTA C				
10 05- 430- 750- 3950- 6020		70.00	10/01/2012 10/31/2012 Public guardianship	Public Guardianship Dd
13 05- 430- 750- 3950- 6020		70.00	10/01/2012 10/31/2012 Public guardianship	Public Guardianship Dd
15 05- 430- 750- 3950- 6020		105.00	10/01/2012 10/31/2012 Public guardianship	Public Guardianship Dd
91345 ELVECROG/ROBERTA C		245.00	3 Transactions	

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<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
28 10030 GORDON/DOROTHY 05- 430- 710- 3820- 6040		587.00	Relative custody assistance 11/01/2012 11/30/2012 1 Transactions		Relative Custody Assistance
10030 GORDON/DOROTHY		587.00	1 Transactions		
37 12311 HURD/ADRIENNE 05- 430- 710- 3890- 6020		162.26	Respite care 09/04/2012 11/06/2012 1 Transactions		Respite Care - Non Foster Care
12311 HURD/ADRIENNE		162.26	1 Transactions		
2 11589 Lutheran Social Service of MN- Mankato 05- 430- 750- 3950- 6020		38.58	Public guardianship 10/01/2012 10/22/2012 1 Transactions		Public Guardianship Dd
11589 Lutheran Social Service of MN- Mankato		38.58	1 Transactions		
19 11072 Lutheran Social Service Of Mn- St Paul 05- 430- 760- 3950- 6020		307.99	Guardianship/conservatorship 10/12/2012 10/31/2012 1 Transactions		Guardianship/Conservatorship
11072 Lutheran Social Service Of Mn- St Paul		307.99	1 Transactions		
17 91221 McCormick/John 05- 430- 710- 3820- 6040		192.26	Relative custody assistance 11/01/2012 11/30/2012 1 Transactions		Relative Custody Assistance
91221 McCormick/John		192.26	1 Transactions		
5 9759 MISQUADACE/ANITA 05- 430- 710- 3820- 6040		149.89	Relative custody assistance 11/01/2012 11/30/2012		Relative Custody Assistance
6 05- 430- 710- 3820- 6040		149.89	Relative custody assistance 11/01/2012 11/30/2012		Relative Custody Assistance
21 05- 430- 710- 3820- 6040		163.02	Relative custody assistance 11/01/2012 11/30/2012		Relative Custody Assistance
9759 MISQUADACE/ANITA		462.80	3 Transactions		
34 10593 Morrison/Debra 05- 430- 710- 3820- 6040		208.33	Relative custody assistance 11/01/2012 11/30/2012		Relative Custody Assistance
35 05- 430- 710- 3820- 6040		28.33	Relative custody assistance		Relative Custody Assistance

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<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf # On Behalf of Name</u>
10593 Morrison/Debra		236.66	11/01/2012 11/30/2012 2 Transactions	
52 89163 NORTHEAST MN OFFICE OF JOB 05-430-720-3370-6038		385.28	Transportation/Innovations Pro 07/01/2012 09/30/2012	Mfip- Employment Services
89163 NORTHEAST MN OFFICE OF JOB		385.28	1 Transactions	
4 10977 NORTHERN PSYCHIATRIC ASSOCIATES 05-430-740-3050-6020		414.67	Child outpatient diagnostic as 10/12/2012 10/12/2012	Child Outpat Assess/Psyc. Testing
43 05-430-740-3050-6020		414.67	Child outpatient diagnostic as 10/12/2012 10/12/2012	Child Outpat Assess/Psyc. Testing
50 05-430-740-3900-6020		180.00	Clinical supervision- Child Rul 10/05/2012 10/05/2012	Child Rule 79 Case Mgmt
51 05-430-745-3340-6071		180.00	Clinical supervision- CSP 25% 10/05/2012 10/05/2012	Pyschosocial Rehab/Ind Living Skills Csp
49 05-430-745-3910-6020		360.00	Clinical supervision- Adult Rul 10/05/2012 10/05/2012	Adult Rule 79 Case Mgmt
10977 NORTHERN PSYCHIATRIC ASSOCIATES		1,549.34	5 Transactions	
48 3639 NORTHLAND COUNSELING CTR INC 05-430-730-3710-6020		6,825.00	Detoxification (Category I) 09/29/2012 10/30/2012	Detoxification - Grand Rapids
3639 NORTHLAND COUNSELING CTR INC		6,825.00	1 Transactions	
11 90748 OAKRIDGE HOMES SILS 05-430-750-3340-6073		630.00	Semi- Independent Living Servic 10/01/2012 10/31/2012	Semi- Independent Living Serv (Sils)
29 05-430-750-3340-6073		725.88	Semi- Independent Living Servic 10/01/2012 10/31/2012	Semi- Independent Living Serv (Sils)
27 05-430-750-3350-6020		710.10	Family support program 10/01/2012 10/31/2012	Family Support Program
90748 OAKRIDGE HOMES SILS		2,065.98	3 Transactions	
31 89879 OCCUPATIONAL DEVELOPMENT CENTER 05-430-745-3160-6050		108.75	Transportation for employment 10/01/2012 10/31/2012	Adult Transportation

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<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u> <u>On Behalf of Name</u>
30	05- 430- 760- 3370- 6050		270.00	Employability- supported employ 10/01/2012 10/31/2012	Employability - Txx
89879	OCCUPATIONAL DEVELOPMENT CENTER		378.75	2 Transactions	
87514	Pine Manors Inc				
47	05- 430- 730- 3710- 6080		825.00	Detoxification (Category I) 09/10/2012 09/12/2012	Detoxification - Other
87514	Pine Manors Inc		825.00	1 Transactions	
88878	PRODUCTIVE ALTERNATIVES INC				
1	05- 430- 750- 3380- 6050		209.25	Extended and supported employ 10/01/2012 10/31/2012	Extended Supported Employment
9	05- 430- 750- 3380- 6050		395.25	Extended and supported employ 10/01/2012 10/31/2012	Extended Supported Employment
24	05- 430- 750- 3380- 6050		232.50	Extended and supported employ 10/01/2012 10/31/2012	Extended Supported Employment
88878	PRODUCTIVE ALTERNATIVES INC		837.00	3 Transactions	
9489	REDWOOD TOXICOLOGY LABORATORY,				
32	05- 430- 710- 3181- 6020		6.75	UA- Health- related services 10/31/2012 10/31/2012	Drug Testing - CMCC Juveniles
33	05- 430- 710- 3181- 6020		50.00	UA- Health- related services 10/31/2012 10/31/2012	Drug Testing - CMCC Juveniles
46	05- 430- 710- 3181- 6020		6.75	UA- Health- related services 10/30/2012 10/30/2012	Drug Testing - CMCC Juveniles
9489	REDWOOD TOXICOLOGY LABORATORY,		63.50	3 Transactions	
8599	RRHS UCMC MESABA CLINICS				
12	05- 430- 745- 3730- 6020		9,861.60	Acute care hospital inpatient 10/02/2012 10/07/2012	Adult Acute Care Hospital Inpatient
8599	RRHS UCMC MESABA CLINICS		9,861.60	1 Transactions	
6146	RS Eden				
45	05- 430- 710- 3181- 6020		5.25	Corrections drug testing 09/26/2012 09/27/2012	Drug Testing - CMCC Juveniles
6146	RS Eden		5.25	1 Transactions	
4242	RYAN & BRUCKER LTD				

SLM1
 11/21/12 2:27PM
 Health & Human Services

Aitkin County



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<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
22	05- 430- 750- 3950- 6020		Public guardianship 10/01/2012 10/31/2012		Public Guardianship Dd
23	05- 430- 750- 3950- 6020		Public guardianship 09/01/2012 09/30/2012		Public Guardianship Dd
4242	RYAN & BRUCKER LTD		2 Transactions		
9140	SIMAR/CANDACE				
20	05- 430- 750- 3950- 6020		Public guardianship 10/01/2012 10/31/2012		Public Guardianship Dd
8	05- 430- 760- 3950- 6020		Guardianship/conservatorship 10/01/2012 10/31/2012		Guardianship/Conservatorship
9140	SIMAR/CANDACE		2 Transactions		
10026	Thompson/Mary				
44	05- 430- 740- 3890- 6020		Child respite care 11/02/2012 11/02/2012		Child Mh Respite
10026	Thompson/Mary		1 Transactions		
Final Total			42,969.70	30 Vendors	59 Transactions

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



<u>Recap by Fund</u>	<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
	5	42,969.70	Health & Human Services
All Funds		42,969.70	Total

Approved by,

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<u>No.</u>	<u>Account/Formula</u>						<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
31	85003 Aitkin County DAC			6.14	PAPERSHRED			Services Or Contracts
	05-400-440-0410-6231					10/01/2012 10/29/2012		
31	05-420-600-4800-6231			16.23	PAPERSHRED			Services Or Contracts
						10/01/2012 10/29/2012		
31	05-430-700-4800-6231			21.50	PAPERSHRED			Services Or Contracts
						10/01/2012 10/29/2012		
	85003 Aitkin County DAC			43.87	3 Transactions			
1	86222 Aitkin Independent Age			55.00	CHILD CARE ADV			Community Ed & Prevent/Advertising
	05-430-720-3020-6069					10/17/2012 10/24/2012		
	86222 Aitkin Independent Age			55.00	1 Transactions			
2	8239 Ameripride Linen & Apparel Services			3.94	CLEANING SERVICE			Services Or Contracts
	05-400-440-0410-6231					10/16/2012 10/16/2012		
2	05-420-600-4800-6231			10.42	CLEANING SERVICE			Services Or Contracts
						10/16/2012 10/16/2012		
2	05-430-700-4800-6231			13.80	CLEANING SERVICE			Services Or Contracts
						10/16/2012 10/16/2012		
	8239 Ameripride Linen & Apparel Services			28.16	3 Transactions			
3	5398 CDW Government, Inc			16.55	LASER PRNTR(ACCTG-K.RYAN)		S318180	Furniture, Fixtures, Etc.
	05-400-440-0410-6625							
33	05-400-440-0410-6625			36.18	ACCTG-MONITOR(K.RYAN)		S740499	Furniture, Fixtures, Etc.
32	05-400-440-0410-6405			4.73	OSS-KEYBOARD(L.NELSON)		S835981	Supplies-Computer/Office/Meeting
3	05-420-600-4800-6625			43.72	LASER PRNTR(ACCTG-K.RYAN)		S318180	Office & Other Equipment
33	05-420-600-4800-6625			95.61	ACCTG-MONITOR(K.RYAN)		S740499	Office & Other Equipment
32	05-420-600-4800-6405			12.49	OSS-KEYBOARD(L.NELSON)		S835981	Supplies-Computer/Office/Meeting
3	05-430-700-4800-6625			57.90	LASER PRNTR(ACCTG-K.RYAN)		S318180	Office & Other Equipment
33	05-430-700-4800-6625			126.62	ACCTG-MONITOR(K.RYAN)		S740499	Office & Other Equipment
32	05-430-700-4800-6405			16.54	OSS-KEYBOARD(L.NELSON)		S835981	Supplies-Computer/Office/Meeting
	5398 CDW Government, Inc			410.34	9 Transactions			
4	88628 Dalco			18.08	TOWELS/TISSUE		2522469	Supplies-Computer/Office/Meeting
	05-400-440-0410-6405							
34	05-400-440-0410-6405			23.11	TOWELS		2533674	Supplies-Computer/Office/Meeting

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4	05-420-600-4800-6405	47.78	TOWELS/TISSUE	2522469	Supplies-Computer/Office/Meeting
34	05-420-600-4800-6405	61.08	TOWELS	2533674	Supplies-Computer/Office/Meeting
4	05-430-700-4800-6405	63.28	TOWELS/TISSUE	2522469	Supplies-Computer/Office/Meeting
34	05-430-700-4800-6405	80.89	TOWELS	2533674	Supplies-Computer/Office/Meeting
88628	Dalco	294.22	6 Transactions		
11051	Department of Human Services				
48	05-400-440-0410-6231	292.46	MERIT-QE 9/30/12		Services Or Contracts
48	05-420-600-4800-6231	772.93	MERIT-QE 9/30/12		Services Or Contracts
47	05-420-640-4800-6231	29.30	CS-MO FED OFFSET FEE-OCT'12		Services Or Contracts
44	05-420-650-4400-6025	1,592.30	MA ESTATE-OCT'12		State/Fed Share - MA
45	05-420-650-4400-6025	1,174.05	MA LTC UN 65-OCT'12		State/Fed Share - MA
46	05-420-650-4400-6025	75.00	MA/MNCARE RECIP-INELIG-OCT'12		State/Fed Share - MA
48	05-430-700-4800-6231	1,023.61	MERIT-QE 9/30/12		Services Or Contracts
11051	Department of Human Services	4,959.65	7 Transactions		
1491	Dutch's Electric, Inc				
5	05-400-440-0410-6231	13.01	CHANGE BALLAST-LUNCHROOM	20216	Services Or Contracts
5	05-420-600-4800-6231	34.37	CHANGE BALLAST-LUNCHROOM	20216	Services Or Contracts
5	05-430-700-4800-6231	45.52	CHANGE BALLAST-LUNCHROOM	20216	Services Or Contracts
1491	Dutch's Electric, Inc	92.90	3 Transactions		
11984	edocument Resources LLC				
6	05-420-600-4800-6231	2,915.55	EDOCS-APPS IMPLEMENTATION	503638	Services Or Contracts
7	05-420-600-4800-6231	96.27	EDOCS-TRAVEL EXP-PRO SERVICE	503638	Services Or Contracts
29	05-420-600-4800-6231	828.34	EDOCS-TRAVEL EXPENSES	503722	Services Or Contracts
30	05-420-600-4800-6231	4,857.60	EDOCS-PROFESSIONAL SERVICES	503722	Services Or Contracts
49	05-420-600-4800-6231	546.04	EDOCS-TRAVEL EXP-PRO SERV	503752	Services Or Contracts
			09/04/2012 11/05/2012		
11984	edocument Resources LLC	9,243.80	5 Transactions		
2186	Hillyard Inc - Kansas City				
35	05-400-440-0410-6405	66.70	CLEANING SUPPLIES	600455462	Supplies-Computer/Office/Meeting
35	05-420-600-4800-6405	176.31	CLEANING SUPPLIES	600455462	Supplies-Computer/Office/Meeting
35	05-430-700-4800-6405	233.49	CLEANING SUPPLIES	600455462	Supplies-Computer/Office/Meeting
2186	Hillyard Inc - Kansas City	476.50	3 Transactions		
11889	Honeywell International Inc.				

Aitkin County

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



<u>Vendor Name</u>	<u>Accr</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No.</u> <u>Account/Formula</u>		<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
8 05-400-440-0410-6231		138.14	VALVE REPAIR-CONF RM	1027051	Services Or Contracts
8 05-420-600-4800-6231		365.09	VALVE REPAIR-CONF RM	1027051	Services Or Contracts
8 05-430-700-4800-6231		483.49	VALVE REPAIR-CONF RM	1027051	Services Or Contracts
11889 Honeywell International Inc.		986.72	3 Transactions		
2340 Hyytinen Hardware Hank					
9 05-400-440-0410-6405		1.52	AGENCY SUPPLIES	1-1070717	Supplies-Computer/Office/Meeting
9 05-420-600-4800-6405		4.01	AGENCY SUPPLIES	1-1070717	Supplies-Computer/Office/Meeting
9 05-430-700-4800-6405		5.31	AGENCY SUPPLIES	1-1070717	Supplies-Computer/Office/Meeting
2340 Hyytinen Hardware Hank		10.84	3 Transactions		
89078 Mille Lacs Health System					
12 05-400-401-0000-6814		60.00	AMBULANCE-SEPT'12 RUNS		Isle Ambulance/Mille Lacs Health System
36 05-400-401-0000-6814		135.00	OCT'12 RUNS		Isle Ambulance/Mille Lacs Health System
89078 Mille Lacs Health System		195.00	2 Transactions		
89765 Minnesota Elevator Service					
13 05-400-440-0410-6231		21.25	SERVICE-NOV'12	259860	Services Or Contracts
13 05-420-600-4800-6231		56.15	SERVICE-NOV'12	259860	Services Or Contracts
13 05-430-700-4800-6231		74.36	SERVICE-NOV'12	259860	Services Or Contracts
89765 Minnesota Elevator Service		151.76	3 Transactions		
3358 Minnesota State Auditor					
37 05-400-440-0410-6231		913.50	AUDIT	62980	Services Or Contracts
			08/29/2012 09/11/2012		
37 05-420-600-4800-6231		2,414.25	AUDIT	62980	Services Or Contracts
			08/29/2012 09/11/2012		
37 05-430-700-4800-6231		3,197.25	AUDIT	62980	Services Or Contracts
			08/29/2012 09/11/2012		
3358 Minnesota State Auditor		6,525.00	3 Transactions		
3297 Mn Dept Of Health(Ivd)					
50 05-420-640-4800-6379		40.00	IVD PAT ADJ 0015257974-01	362353	Other Iv-D Charges
51 05-420-640-4800-6379		40.00	IVD PAT ADJ 0015201061-03	375910	Other Iv-D Charges
3297 Mn Dept Of Health(Ivd)		80.00	2 Transactions		
86391 Mssa					
10 05-400-440-0410-6208		14.00	MSSA MEMBERSHIP-2013(TOM B.)		Staff Development/Training

Aitkin County

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



<u>Vendor Name</u>	<u>Accr</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No. Account/Formula</u>			<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
10 05-420-600-4800-6208			37.00 MSSA MEMBERSHIP-2013(TOM B.)		Staff Development/Training
10 05-430-700-4800-6208			49.00 MSSA MEMBERSHIP-2013(TOM B.)		Staff Development/Training
11 05-430-700-4800-6208			600.00 MSSA MEMBERSHIP-2013 (SS-6)		Staff Development/Training
86391 Mssa			700.00 4 Transactions		
89081 North Ambulance Brainerd					
14 05-400-401-0000-6809			1,395.00 OCT'12 RUNS		No. Memorial Ambulance-Aitkin
89081 North Ambulance Brainerd			1,395.00 1 Transactions		
86235 Office Shop Inc/The					
16 05-400-440-0410-6405			14.06 FAX TONER(OSS)		Supplies-Computer/Office/Meeting
15 05-400-440-0410-6231			78.79 COPIER CONTRACT(OSS)	IRC5035	Services Or Contracts
16 05-420-600-4800-6405			37.17 FAX TONER(OSS)		Supplies-Computer/Office/Meeting
17 05-420-600-4800-6405			171.78 IM-LASER TONER(E.FOSS)		Supplies-Computer/Office/Meeting
15 05-420-600-4800-6231			208.23 COPIER CONTRACT(OSS)	IRC5035	Services Or Contracts
16 05-430-700-4800-6405			49.22 FAX TONER(OSS)		Supplies-Computer/Office/Meeting
15 05-430-700-4800-6231			275.77 COPIER CONTRACT(OSS)	IRC5035	Services Or Contracts
86235 Office Shop Inc/The			835.02 7 Transactions		
3810 Paulbeck's County Market					
18 05-400-440-0410-6405			6.29 AGENCY SUPPLIES		Supplies-Computer/Office/Meeting
18 05-420-600-4800-6405			16.61 AGENCY SUPPLIES		Supplies-Computer/Office/Meeting
18 05-430-700-4800-6405			22.00 AGENCY SUPPLIES		Supplies-Computer/Office/Meeting
3810 Paulbeck's County Market			44.90 3 Transactions		
84172 Riverwood Healthcare Center					
38 05-400-430-0407-6262			355.50 FAM PLAN-STI TEST		Family Planning Approp
84172 Riverwood Healthcare Center			355.50 1 Transactions		
5774 Riverwood Healthcare Clinic					
39 05-400-430-0407-6262			11.70 FAM PLAN-DEPO INJ		Family Planning Approp
5774 Riverwood Healthcare Clinic			11.70 1 Transactions		
11760 RON MICHAELS CONSULTING INC					
19 05-420-600-4800-6231			1,290.26 EDOCS-APPS IMPLEMENTATION	89862	Services Or Contracts
11760 RON MICHAELS CONSULTING INC			1,290.26 1 Transactions		

Aitkin County

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



<u>Vendor Name</u>	<u>Accr</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No. Account/Formula</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>	
20 6146 RS Eden	324.93		SS-RAPID TEST SUPPLIES	43475	Supplies-Computer/Office/Meeting
6146 RS Eden	324.93		1 Transactions		
4233 S & T Office Products Inc					
52 05-400-440-0410-6405	53.35		OFFICE SUPPLIES		Supplies-Computer/Office/Meeting
54 05-400-440-0410-6405	41.18		PH-VACUUM		Supplies-Computer/Office/Meeting
52 05-420-600-4800-6405	140.99		OFFICE SUPPLIES		Supplies-Computer/Office/Meeting
53 05-420-640-4800-6405	15.44		CS-SUPPLIES		Supplies-Computer/Office/Meeting
52 05-430-700-4800-6405	186.72		OFFICE SUPPLIES		Supplies-Computer/Office/Meeting
4233 S & T Office Products Inc	437.68		5 Transactions		
89003 Seven County Process Servers Llc					
40 05-420-640-4800-6379	55.00		IVD SERV 0015235573-01	20131	Other Iv-D Charges
89003 Seven County Process Servers Llc	55.00		1 Transactions		
86177 Sheriff Aitkin County					
55 05-430-720-3980-6020	80.00		DAYCARE BKGRD CHECK		License And Resource Development
86177 Sheriff Aitkin County	80.00		1 Transactions		
86474 Sheriff Carlton County					
21 05-420-640-4800-6379	40.00		IVD SERVICE 0010881277-03	1221173	Other Iv-D Charges
86474 Sheriff Carlton County	40.00		1 Transactions		
86944 Sheriff Crow Wing County					
22 05-420-640-4800-6379	70.00		IVD SERVICE 0012068631-03	75678	Other Iv-D Charges
86944 Sheriff Crow Wing County	70.00		1 Transactions		
87016 Sheriff Itasca County					
23 05-420-640-4800-6379	55.00		IVD SERVICE 0014668326-01	2959	Other Iv-D Charges
41 05-420-640-4800-6379	55.00		IVD SERV 0014451005-01	2968	Other Iv-D Charges
87016 Sheriff Itasca County	110.00		2 Transactions		
4438 Simplexgrinnell-II					
24 05-400-440-0410-6231	54.76		FIRE ALARM INSPECTION	75688624	Services Or Contracts
24 05-420-600-4800-6231	144.73		FIRE ALARM INSPECTION	75688624	Services Or Contracts
24 05-430-700-4800-6231	191.67		FIRE ALARM INSPECTION	75688624	Services Or Contracts

JLF2
 11/21/12 1:19PM
 Health & Human Services

Aitkin County

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



<u>Vendor Name</u>	<u>Accr</u>	<u>Rpt</u>	<u>Amount</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No. Account/Formula</u>				<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
4438 Simplexgrinnell-II			391.16	3 Transactions		
12213 SOLBREKK INC						
25 05-400-440-0410-6231			343.98	HOSTED ZIX GATEWAY-ANNUAL FEE	97429	Services Or Contracts
25 05-420-600-4800-6231			909.09	HOSTED ZIX GATEWAY-ANNUAL FEE	97429	Services Or Contracts
25 05-430-700-4800-6231			1,203.93	HOSTED ZIX GATEWAY-ANNUAL FEE	97429	Services Or Contracts
12213 SOLBREKK INC			2,457.00	3 Transactions		
88859 Spee*Dee-St Cloud						
42 05-420-600-4800-6231			279.50	IM-SERVICE	2285803	Services Or Contracts
88859 Spee*Dee-St Cloud			279.50	1 Transactions		
4246 St Cloud Stamp & Sign Inc						
26 05-400-440-0410-6405			1.16	AGENCY-MAXUM INK	170422	Supplies-Computer/Office/Meeting
26 05-420-600-4800-6405			3.06	AGENCY-MAXUM INK	170422	Supplies-Computer/Office/Meeting
26 05-430-700-4800-6405			4.05	AGENCY-MAXUM INK	170422	Supplies-Computer/Office/Meeting
4246 St Cloud Stamp & Sign Inc			8.27	3 Transactions		
11607 Thrifty White Pharmacy-Aitkin						
43 05-400-430-0407-6262			60.99	FAM PLAN-BIRTH CTRL		Family Planning Approp
11607 Thrifty White Pharmacy-Aitkin			60.99	1 Transactions		
10866 Zion Lutheran Church Of Mcgrath						
27 05-400-410-0413-6301			75.00	WIC RENT		Wic Space Rentals
				07/01/2012	09/30/2012	
28 05-400-410-0413-6301			50.00	WIC RENT		Wic Space Rentals
				10/01/2012	11/30/2012	
10866 Zion Lutheran Church Of Mcgrath			125.00	2 Transactions		
Final Total			32,625.67	35 Vendors	99 Transactions	

2013

HEALTH & HUMAN SERVICES BOARD MEETING DATES

JANUARY	22
FEBRUARY	26
MARCH	26
APRIL	23
MAY	28
JUNE	25
JULY	23
AUGUST	27
SEPTEMBER	24
OCTOBER	22
NOVEMBER	26
DECEMBER	17



**AITKIN-ITASCA-KOOCHICHING
COMMUNITY HEALTH BOARD**
 Itasca Resource Center / 1209 SE 2nd Avenue
 Grand Rapids, Minnesota 55744
 Telephone: 1-218-327-5525
 Fax: 1-218-327-5546

BUDGET JUSTIFICATION – CHAMPS PURCHASE

<u>Item</u>	<u>Cost delivered</u>
<p><u>Nightingale Notes Licenses</u></p> <p>This number determines the maximum number of users who can simultaneously access the application. This takes into account individuals who will perform any tasks related to the following list the functions: The application includes admissions, client registry, activity logs, scheduling, case management, care plans, nursing documentation reporting, and billing.</p> <p><u>Annual Support</u></p> <p>Annual support includes telephone and e-mail consultation, and software updates to correct problems. It includes maintenance of features currently in the software. This includes revisions to comply with changes in existing state and federal requirements, if the software currently contains functionality to meet these state and federal requirements</p> <p><u>Total Training and Implementation</u></p> <p>Students will alternate between On-Demand Tutorials (available 24/7) and Instructor Hosted Webinars. Each session builds on the knowledge gained in the previous session.</p>	<p>\$72,188.00</p>
Community Health Board Payment	\$20,000.00
Aitkin County Payment	\$17,396.00
Itasca County Payment	\$17,396.00
Koochiching County Payment	\$17,396.00

Each counties proportionate cost will be \$17,396, for the purchase of the CHAMPS system, support and training costs.

Annual Support \$13,322/per year

Anticipated total annual support will be \$13,322 due in 2014 and yearly thereafter. CHS is expected to provide an annual offsetting contribution of \$3,000 - \$5,000 to the annual support cost. Each county will be responsible for 1/3 of the balance of the annual support cost. Maintenance costs will be prorated based upon the number of licenses held by each county in the billing year.

INVOICE

October 29, 2012



**AITKIN-ITASCA-KOOCHICHING
COMMUNITY HEALTH BOARD**
Itasca Resource Center / 1209 SE 2nd Avenue
Grand Rapids, Minnesota 55744
Telephone: 1-218-327-5525
Fax: 1-218-327-5546

To: **Aitkin County Health & Human Services**
204 First Street NW
Aitkin, MN 56431

From: **Susan Erzar, CHS Administrator**
Itasca Resource Center / 1209 SE 2nd Avenue
Grand Rapids, Minnesota 55744


Susan E. Erzar

Description	Total
1/3 cost of the purchase of CHAMPS Software system, to include 4 licenses for Nightengale Notes, Annual Suport and Training and Implementation Costs.	\$17,396.00
TOTAL	\$17,396.00

Please make check payable to Aitkin-Itasca-Koochiching Community Health Board.

INVOICE: 5555

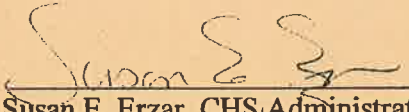
10/03/2012

TO:

Susan E. Erzar, CHS Administrator
Itasca Resource Center, 1209 SE 2nd Ave.
Grand Rapids, MN 55744

CHAMP SOFTWARE, Inc.
313 N. 2nd Street
Mankato, MN 56001

Quantity	Description	Total
12	<u>Nightingale Notes Licenses</u> This number determines the maximum number of users who can simultaneously access the application. This takes into account individuals who will perform any tasks related to the following list the functions: The application includes admissions, client registry, activity logs, scheduling, case management, care plans, nursing documentation reporting, and billing.	\$49,990.00
	<u>Annual Support</u> Annual support includes telephone and e-mail consultation, and software updates to correct problems. It includes maintenance of features currently in the software. This includes revisions to comply with changes in existing state and federal requirements, if the software currently contains functionality to meet these state and federal requirements	\$13,322.00
	<u>Total Training and Implementation</u> Students will alternate between On-Demand Tutorials (available 24/7) and Instructor Hosted Webinars. Each session builds on the knowledge gained in the previous session.	\$8,876.00
TOTAL		\$72,188.00


Susan E. Erzar, CHS Administrator

10/12
Date



Minnesota Department of **Human Services**

October 12, 2012

Thomas Burke, Director
 Aitken County Health and Human Services Agency
 204 First Street Northwest
 Aitken, MN 56431-1291

Dear Mr. Burke:

I am pleased to inform you that Aitken County has been awarded an Adoption and Foster Care Recruitment Grant to recruit relative adoptive and/or relative foster parents for children in foster care. This grant is valid October 12, 2012, through June 30, 2013, through state funds. It supports agencies' efforts for the diligent recruitment of relatives to become foster and adoptive parents through access of Web-based search technology to identify and notify adult relatives of a child's need for foster care placement. The funding makes available statewide purchasing of LexisNexis Accurint for agency relative search and notification efforts.

Amount and Period of Funding

The total funding available to Aitken County for the grant period October 12, 2012, to June 30, 2013, is \$1,044.00. Reimbursement will be consistent with the budget summary outlined in this letter. Reimbursement eligibility will begin upon signature on the enclosed grant agreement by the chairperson of your county board (Attachment A).

Funding must be used to purchase LexisNexis Accurint licenses for agency relative search and notification efforts. These funds may not be used to supplant or replace current agency or state efforts and funding sources, including federal Title IV-E of the Social Security Act: foster care maintenance and adoption assistance.

If state funds are discontinued, reduced or otherwise become unavailable, the grant will be adjusted, reduced or terminated. Any funds not used for the purposes indicated in this grant award letter will be subject to return to the Minnesota Department of Human Services.

County Duties

The general purpose of the Adoption and Foster Care Recruitment Grant is to support agencies' efforts for the diligent recruitment of relatives to become foster and adoptive parents. When a child is in need of foster care placement, relatives are the first consideration. Through the use of Web-based search technology, county agencies can identify and notify adult relatives that they have a young family member in need of foster care. Grant counties must:

Grant expenditures beginning October 12, 2012, will be eligible for reimbursement following the signature date on the Acceptance of Grant Award form.

The Adoption and Foster Care Recruitment Grants are being managed by Deborah Beske Brown, 651-431-4731. Send all paperwork and/or forms to her at:

Minnesota Department of Human Services
Child Safety and Permanency Division
P.O. Box 64943
St. Paul, MN 55164-0943

LexisNexis Accurint

These funds are to be used to purchase LexisNexis Accurint. The following is information from LexisNexis Accurint that will be needed to set up the service:

- Attachment B is a summary of the information LexisNexis Accurint needs to set up an agreement
- Attachment C is a sample of the LexisNexis Accurint agreement that each grantee will need to sign to set up an account
- Attachment D is a sample of Schedule A, that defines pricing for the account

Questions about LexisNexis Accurint can be directed:

Thomas Tamplin, MCMP-II
Account Manager
Health, Human and Social Services
LexisNexis | Risk Solutions
937.247.1564 Direct
937.271.4283 Mobile
866-960-2617 Fax
tom.tamplin@lexisnexus.com

Phil Sprute
Strategic Sales, State and Local Government
Advanced Government Solutions
LexisNexis | Risk Solutions
425.747.7232 Direct
425.281.0271 Mobile
phil.sprute@lexisnexus.com

Sincerely,



Christeen Borsheim, Director
Child Safety and Permanency Division

Attachment A

ACCEPTANCE OF GRANT AWARD

Grant award for the October 12, 2012, through June 30, 2013, Adoption and Foster Care Recruitment Grant operating under the state of Minnesota with specific funding sources. Pursuant to Minn. Stat., section 256.01, subd. 2(a)(6), the Minnesota Department of Human Services is empowered to award grants to Minnesota counties.

Name of county: Aitken County

County project coordinator: Thomas Burke, social service director, 218-927-7225

DHS project coordinator: Deborah Beske Brown, agency policy specialist, 651-431-4731

Agreement and certification by the Aitken County Board of Commissioners

It is understood and agreed by the county board that any funds granted pursuant to the application for state of Minnesota funds are to be expended for the purposes set forth in the application and grant award letter as approved by the commissioner of Human Services and in accordance with applicable laws and rules. The application and grant award letter are both incorporated into this award by reference. Further, it is understood that the budgets, expenditures, and program will be subject to periodic review by the commissioner. If funds are not being used to implement the approved plan and according to the grant award letter, they may be subject to return or future payment deductions in accordance with Minn. Stat., section 256.01, subd. 2. All payment information is included in the incorporated grant award letter. An amended grant award letter will be issued and must be signed in the event any changes are made to the terms of the grant award.

The receipt of grant funds by the county board assures acceptance by the board of the following responsibilities:

1. These funds may not be used to supplant or replace current agency or state efforts and funding sources including federal Title IV-E of the Social Security Act: foster care maintenance and adoption assistance.
2. Utilization of written personnel policies in assigning and compensating project employees
3. Compliance with Titles VI and VII of the United States Civil Rights Act of 1964, Americans with Disabilities Act, and the Minnesota Human Rights Act, Minn. Stat., chapter 363
4. Compliance with the Minnesota Government Data Practices Act, Minn. Stat., chapter 13
5. Compliance with Worker's Compensation insurance coverage requirements of Minn. Stat., section 176.181, subd. 2
6. Responsibility for any and all claims or causes of action arising from the performance of this grant to the extent provided for in Minn. Stat., sections 466.01 to 466.15
7. Compliance with all applicable federal and state regulations, including, but not limited to, the Single Audit Act (OMB Circular A-133), Debarment and Suspension certifications (45 CFR § 92.35) and Federal Cost Principles and Administrative Requirements (OMB Circulars A-87 and A-102).

Signature:

Chairperson: Mark Wedel, Aitkin County Board of Commissioners

Date: November 27, 2012

Attachment B

Information from LexisNexis for Minnesota agencies

Below are the required documents to be completed by each location in order to get an account up and running.

- 1) LexisNexis Non-FCRA Additional Account Form Government Agencies and Law Enforcement
- 2) Schedule A

The Master Account number for the state of Minnesota is 1591997. This is inserted on the top right of the LexisNexis Non-FCRA Additional Account form Government Agencies and Law Enforcement form.

Within seven-10 business days, agency staff will be called by LexisNexis Accurint credentialing department on the main agency phone number to verify information. At this time, agency staff will be giving a system administrator user ID and will follow up with an email that will contain the password. The second part of this process will be an onsite physical inspection from an independent third party, once this is completed, staff will be able to view full Social Security numbers in the Accurint system. Once the account is fully enabled, staff will be able to use that ID/password to access the new account. If staff do not receive the email, please check your junk mailbox or spam folder. If you still do not have it, notify the Customer Support line at 1-866-277-8407 and they will send it.

If you have questions at any point during this sign up process, contact me at any time.

Thanks in advance; we look forward to getting you on-board!

Thomas Tamplin, MCMP-II
Account Manager
Health, Human and Social Services
LexisNexis | Risk Solutions
937-247-1564 Direct
937-271-4283 Mobile
866-960-2617 Fax
tom.tamplin@lexisnexis.com



LN Non-FCRA Additional Account Form Government Agencies and Law Enforcement

The services agreement between Customer (defined below) and the applicable LexisNexis affiliate ("LN") for the Non-FCRA services (the "LN Services") (such services agreement, the "Agreement") is hereby amended by this LN Non-FCRA Additional Account Form (the "LN Additional Account Form"). Customer agrees and acknowledges that this LN Additional Account Form is subject to the applicable terms and conditions of the Agreement. The information submitted on this LN Additional Account Form will be used to determine the Customer's eligibility for accessing the LN Services. LN reserves the right to reject this LN Additional Account Form without reason or for any reason whatsoever, without recourse against LN, or any of its employees, officers, directors, agents, affiliates, or other designees. Additionally, Customer hereby authorizes LN to independently verify the information provided herein and perform research about the individuals identified herein.

- New Account/Same Location (Required documents not needed; complete all Parts)*
- New Account/New Location (Provide required documents listed below; complete all Parts)
- New Account/Same Location/New Bill Group (Required documents not needed; complete Parts 1-6 and 9)*
- Updating Permissible Use (Required documents not needed; complete Parts 1, 4, and 9, and if applicable 7 and 8)*

*Part 1 must be the same as the existing account

PART 1 - CUSTOMER INFORMATION (This section must be filled out entirely)

SECTION A: AGENCY INFORMATION ("Customer") (P.O. Boxes and Maildrop Addresses Cannot be Used)

Agency Name (Full Legal Name) REQUIRED _____ Master Acct # _____
 Physical Address* _____
 City _____ State _____ Zip _____
 Main Agency Phone Number* _____ Fax _____ Web Address _____

* **Physical location where information will be used. Phone number must be Main number/Switchboard number at this location.**

If located at the above address less than 6 months, provide most recent prior address below:

Physical Address _____
 City _____ State _____ Zip _____
 IP Address** _____
 IP Address Range** From _____ To _____

** If you do not know your company's IP address(es): Contact your network administration OR log onto <https://www.whatismyip.com>

PART 2 - CUSTOMER ADMINISTRATOR

SECTION A: CUSTOMER ADMINISTRATOR* OR MAIN CONTACT INFORMATION

Last Name _____ First Name _____ Middle Initial _____
 Title _____ Telephone _____ Email Address _____
 Admin IP Address _____

* Required only for local and municipal agencies - For credentialing purposes, each Customer Administrator must provide two (2) of the three (3) following pieces of identified information.

1. First five (5) digits of your Social Security Number _____
2. Full date of birth _____
3. Home address _____

ADDITIONAL CUSTOMER ADMINISTRATOR* OR MAIN CONTACT INFORMATION (Optional)

Last Name _____ First Name _____ Middle Initial _____
 Title _____ Telephone _____ Email Address _____
 Admin IP address _____

* Required only for local and municipal agencies - For credentialing purposes, each Customer Administrator must provide two (2) of the three (3) following pieces of identified information.

1. First five (5) digits of your Social Security Number _____
2. Full date of birth _____
3. Home address _____

PART 3 - CREDENTIALING

SECTION A: CUSTOMER SECURITY CERTIFICATION

Customer certifies that the Customer has not been the subject of any proceeding regarding any trust-related matter including, but not limited to, fraud, counterfeiting, identity theft and the like, and that Customer has not been the subject of any civil, criminal or regulatory matter that would create an enhanced security risk to LN or its data, including but not limited to, any matter involving potential violations of the Gramm-Leach-Bliley Act (15 U.S.C. § 6801, et seq.) and its implementing regulations (collectively, "GLBA"), the Driver's Privacy Protection Act (18 U.S.C. § 2721, et seq.) and related state laws (collectively, the "DPPA"), the Fair Credit Reporting Act (15 U.S.C. § 1681, et seq.) ("FCRA"), the Fair Debt Collection Practices Act (15 U.S.C. § 1692-1692p) ("FDCPA") or any other similar legal or regulatory guidelines. If any such matter has occurred, Customer shall attach a signed statement, along with all relevant supporting documentation, providing all details of this matter prior to execution of this Agreement.

SECTION B: VENDOR REFERENCE RELEASE. - Required only for local and municipal agencies

Please list at least one (1) current Business to Business Vendor Reference. This section is optional, but if it is not completed and LN is not able to complete its credentialing process, LN reserves the right to re-request this information prior to account activation. Such re-request will result in processing delays.

Company Name _____ Contact _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____ Account Number (if applicable) _____

Company Name _____ Contact _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____ Account Number (if applicable) _____

PART 4 - AGENCY INFORMATION

SECTION A: AGENCY INFORMATION

Federal Government Federal Law Enforcement State Government State Law Enforcement
 Local/Municipal Govt Local/Municipal Law Enforcement
 Other (Specify) _____

SECTION B: PURPOSE OF USE

Describe _____

SECTION C: ACCESS (select all that apply)

Server (system to system) Internet/PC Fax Phone
 Other _____

PART 5 - SITE VISIT

SECTION A: SITE VISIT INFORMATION

A site visit will be required for local and municipal agencies. Site visits may be required for any other Customer. Should a site visit be required, Customer agrees to authorize the site visit, cooperate in the site visit, and to pay the site visit charges as stated in the Schedule(s) A to this Agreement. Site visits are conducted for LN by an approved third-party. Please indicate if the appropriate contact is different than the contact listed in Part 2.

Site Visit Contact _____ Contact Phone _____
Contact Email _____

PART 6 - BILLING INFORMATION

SECTION A: CREDIT CARD INFORMATION (If you choose to be billed on a credit card, fill out this portion and proceed to Part 6, Section C. If you choose to be billed directly, skip Part 6, Section A and proceed to Part 6, Section B). LN accepts MasterCard, Visa, and American Express. For security and authentication purposes, LN requires the account holder to provide the address to which the credit card company mails the monthly statement. Please provide authorization signature on final page.

Cardholder Name _____
Credit Card Statement Address _____
City _____ State _____ Zip _____
Card Type: Master Card Visa American Express
Card Number _____ Expiration (MM/YY) _____

If I have elected to be credit card billed, I hereby authorize LN to bill this credit card for the charges incurred for use of LN Services. Additionally, I hereby agree that, if the credit card company refuses to pay LN for such charges incurred, the Customer shall be

responsible for the payment of such charges. **If credit card billing is elected, the below signatory must be the credit card holder.**

Credit Card Billing Signature: _____
 Print Name _____
 Title _____
 Dated _____ (mm/dd/yy)

SECTION B: DIRECT BILLING INFORMATION

By submitting this direct billing application, Customer certifies that the individual whose name appears below is authorized to apply for credit on behalf of the Customer named in this Agreement. Customer certifies that the information provided relating to this credit application is true and complete. Customer hereby grants LN permission to verify the credit information provided herein.

BILLING CONTACT

Last Name _____ First Name _____ Title _____
 Telephone _____ Email Address _____
 Billing Address _____
 City _____ State _____ Zip _____

SECTION C: ADDITIONAL BILLING INFORMATION

Require a P.O. Number on Invoice? No Yes If Yes, provide P.O. Number _____
 Sales Tax Exempt No Yes If Yes, provide proof of exemption.

PART 7 - GLBA & DPPA PERMISSIBLE USE CERTIFICATIONS

Law Enforcement Agencies Only: Review and, if appropriate, certify to the following:

Customer represents and warrants that it will use the LN Services solely for law enforcement purposes, which comply with applicable privacy laws including, but not limited to the GLBA and the DPPA. To certify, check here: Proceed to Part 8.

GLBA EXCEPTION/PERMISSIBLE PURPOSE - NOT APPLICABLE TO LAW ENFORCEMENT

Some LN Services use and/or display nonpublic personal information that is governed by the privacy provisions of the GLBA. Customer certifies it has the permissible purposes under the GLBA to use and/or obtain such information, as marked below, and Customer further certifies it will use such information obtained from LN Services only for such purpose(s) selected below or, if applicable, for the purpose(s) indicated by Customer electronically while using the LN Services, which purpose(s) will apply to searches performed during such electronic session:

(At least one (1) must be checked to be permitted access to GLBA data)

<input type="checkbox"/>	No applicable GLBA exception/permissible use.
<input type="checkbox"/>	As necessary to effect, administer, or enforce a transaction requested or authorized by the consumer.
<input type="checkbox"/>	As necessary to effect, administer, or enforce a transaction requested or authorized by the consumer by verifying the identification information contained in applications.
<input type="checkbox"/>	To protect against or prevent actual or potential fraud, unauthorized transactions, claims or other liability.
<input type="checkbox"/>	In required institutional risk control programs.
<input type="checkbox"/>	In resolving consumer disputes or inquiries.
<input type="checkbox"/>	Use by persons, or their representatives, holding a legal or beneficial interest relating to the consumer.
<input type="checkbox"/>	Use by persons acting in a fiduciary or representative capacity on behalf of the consumer.
<input type="checkbox"/>	In complying with federal, state, or local laws, rules, and other applicable legal requirements.
<input type="checkbox"/>	To the extent specifically permitted or required under other provisions of law and in accordance with the Right to Financial Privacy Act of 1978, to law enforcement agencies (including a Federal functional regulator, the Secretary of Treasury, a State insurance authority, or the Federal Trade Commission), self-regulatory organizations, or for an investigation on a matter related to public safety.

DPPA PERMISSIBLE USES - NOT APPLICABLE TO LAW ENFORCEMENT

Some LN Services use and/or display personal information, the use of which is governed by the DPPA. Customer certifies it has a permissible use under the DPPA to use and/or obtain such information and Customer further certifies it will use such information obtained from LN Services only for one (1) or more of the purposes selected below or for the purpose(s) indicated by Customer electronically while using the LN Services, which purpose(s) will apply to searches performed during such electronic session:

(At least one (1) must be checked to be permitted access to DPPA data)

<input type="checkbox"/>	No permissible use.
<input type="checkbox"/>	For use in connection with any civil, criminal, administrative, or arbitral proceeding in any federal, state, or local court or agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a federal, state, or local court.

<input type="checkbox"/>	For use in the normal course of business by a legitimate business or its agents, employees, or contractors, but only— (A) to verify the accuracy of personal information submitted by the individual to the business or its agents, employees, or contractors; and (B) if such information as so submitted is not correct or is no longer correct, to obtain the correct information, but only for the purposes of preventing fraud by, pursuing legal remedies against, or recovering on a debt or security interest against, the individual.
<input type="checkbox"/>	Use by a government agency, but only in carrying out its functions.
<input type="checkbox"/>	Use by any person acting on behalf of a government agency, but only in carrying out the agency's functions.
<input type="checkbox"/>	Use by an insurer (or its agent) in connection with claims investigation activities or antifraud activities.
<input type="checkbox"/>	In connection with motor vehicle safety or theft, or driver safety (except by or for a motor vehicle manufacturer).
<input type="checkbox"/>	Use by an employer or its agents or insurer to obtain or verify information relating to a holder of a commercial driver's license that is required under Chapter 313 of Title 49 of the United States Code.
<input type="checkbox"/>	For use in providing notice to the owners of towed or impounded vehicles.
<input type="checkbox"/>	For use in connection with the operation of private toll transportation facilities.

With regard to the information that is subject to the DPPA, some state laws' permissible uses may vary from the permissible uses identified above. In such cases, some state information may not be available under each permissible use listed above and/or Customer may be asked to certify to a permissible use permitted by applicable state law to obtain information from a specific state.

Customer agrees and certifies it will use the information described in this Part 7 only in accordance with the permissible uses selected above or those selected subsequently in connection with a specific information request.

PART 8 – QUALIFIED ACCESS

SECTION A: QUALIFIED ACCESS – TO BE FILLED OUT ONLY IF CUSTOMER CURRENTLY RECEIVES QA DATA

Certain users ("Authorized Users") obtain full social security numbers (nine (9) digits) and driver's license numbers (collectively, "QA Data"), when appropriate, through some LN Services. **Only those Customers who currently have access to QA Data may fill out this section – completion of this Section will not provide QA Data to Customers currently not receiving QA Data.**

What department will be using QA Data? _____

SOCIAL SECURITY NUMBERS

1. AUTHORIZED USER (At least one (1) must be checked to receive Social Security Numbers)

<input type="checkbox"/>	Not an authorized user.
<input type="checkbox"/>	Federal, state or local government agency with law enforcement responsibilities.
<input type="checkbox"/>	Special investigative unit, subrogation department and claims department of a private or public insurance company for the purposes of detecting, investigating or preventing fraud.
<input type="checkbox"/>	Financial institution for the purposes of (a) detecting, investigating or preventing fraud, (b) compliance with federal or state laws or regulations, (c) collecting debt on their own behalf, and (d) such other uses as shall be appropriate and lawful.
<input type="checkbox"/>	Collection department of a creditor.
<input type="checkbox"/>	Collection company acting on behalf of a creditor or on its own behalf.
<input type="checkbox"/>	Other public or private entity for the purpose of detecting, investigating or preventing fraud. Describe your business:

2. AUTHORIZED USE (At least one (1) must be checked to receive Social Security Numbers)

<input type="checkbox"/>	No authorized use.
<input type="checkbox"/>	Location of suspects or criminals.
<input type="checkbox"/>	Location of non-custodial parents allegedly owing child support and ex-spouses allegedly owing spousal support.
<input type="checkbox"/>	Location of individuals alleged to have failed to pay taxes or other lawful debts.
<input type="checkbox"/>	Identity verification.
<input type="checkbox"/>	Other uses similar to those described above. Describe your use:

By selecting above, the Customer certifies that it is an Authorized User, and that it will use Social Security Numbers only for the purpose(s) it designated on the Authorized Use List and for no other purpose(s).

DRIVER'S LICENSE NUMBERS

1. AUTHORIZED USER (At least one (1) must be checked to receive Driver's License Numbers)

<input type="checkbox"/>	Not an authorized user.
<input type="checkbox"/>	Federal, state or local government agency with law enforcement responsibilities.
<input type="checkbox"/>	Special investigative unit, subrogation department and claims department of a private or public insurance company for the purposes of detecting, investigating or preventing fraud.

<input type="checkbox"/>	Financial institution for the purposes of (a) detecting, investigating or preventing fraud, (b) compliance with federal or state laws or regulations, (c) collecting debt on their own behalf, and (d) such other uses as shall be appropriate and lawful.
<input type="checkbox"/>	Collection department of a creditor.
<input type="checkbox"/>	Collection company acting on behalf of a creditor or on its own behalf.
<input type="checkbox"/>	Other public or private entity for the purpose of detecting, investigating or preventing fraud. Describe your business:

2. AUTHORIZED USE (At least one (1) must be checked to receive Driver's License Numbers)

<input type="checkbox"/>	No authorized use.
<input type="checkbox"/>	Location of suspects or criminals.
<input type="checkbox"/>	Location of non-custodial parents allegedly owing child support and ex-spouses allegedly owing spousal support.
<input type="checkbox"/>	Location of individuals alleged to have failed to pay taxes or other lawful debts.
<input type="checkbox"/>	Identity verification.
<input type="checkbox"/>	Other uses similar to those described above. Describe your use:

By selecting above, the Customer certifies that it is an Authorized User, and that it will use Driver's License Numbers only for the purpose(s) it designated on the Authorized Use List and for no other purpose(s).

PART 9 – SIGNATURE

AUTHORIZATION AND ACCEPTANCE OF TERMS

I HEREBY CERTIFY that I am authorized to execute this LN Additional Account Form on behalf of the Customer listed above and that I have direct knowledge of the facts stated above.

CUSTOMER

Signature _____

Print Name _____

Title _____

Dated _____

(mm/dd/yy)



SCHEDULE A
Accurint for Government Plus
(Per User Subscription)

Agency (Customer) Name: 1 County Human Services MNSERVICES AND ITS AGENTS BUSINESS PARTNERS
 Billgroup #: _____
 LN Account Manager: Tom Tamplin

This Schedule A sets forth additional or amended terms and conditions for the use of the Accurint for Government Plus and Accurint for Government services ("LN Services"), as set forth in the services agreement between Customer and LN or LN's affiliate(s) for the LN Services ("Agreement"), to which this Schedule A is incorporated by reference. The LN Services herein shall be provided by LexisNexis Risk Solutions FL Inc. ("LN"). The services set forth in this Schedule A are non-FCRA Services.

1. SCHEDULE A TERM

The term of this Schedule A will be 12 months beginning 10/01/2012 (the "Initial Term"), and shall automatically renew for additional periods of twelve (12) months (each one, a "Renewal Term"), unless a party provides written notice of termination to the other at least sixty (60) days prior to the expiration of the Initial Term or any Renewal Term. If an account is activated after the first day of a calendar month, charges will not be pro-rated.

2. FEES

2.1 User Fees: The following table (the "Price Table") describes the agreed upon user fees (the "User Fees"):

PRICE TABLE		
Monthly Minimum Users:		5
Standard Features Fee:		\$91.00
Premium Features Fee:	Real Time Phone Search	\$25.00
Total Monthly User Fees (per user):		\$116.00
Total Monthly Minimum Amount:		\$580.00

All of the searches and reports included in the Price Schedule are referred to as the "Features". The User Fees include unlimited access to all Features, excluding those Features identified in Section 2.2. User Fees shall be due each month for: (i) any user ID upon which any search occurs during a calendar month; and (ii) any user ID activated on Customer's account which was not used to perform any searches and is not suspended or terminated by the close of business on the last day of such month. At the end of each twelve-month period User Fees will be increased 0%

2.2 Transactional Fees: Unless otherwise selected in the Price Table, the following Features shall be charged a transactional fee (the "Transactional Fees") as specified in the attached Price Schedule: Advanced Sexual Offender Search, Aerial Imaging, American Board of Medical Specialties Search, Bankruptcy Documents, Canadian Phones, Comprehensive Healthcare Business Report, Comprehensive Healthcare Provider Report, Court Search Wizard, D&B Search, DE Corp Search and Report, Email Search, MVR Reports, National Motor Vehicle Accident Search & Report, News Searches, Online Batch Services, Phones Plus, Property Deed Image, Provider Sanction Search and Report, Provider Search and Report, Real Time MVR, Real Time Person Search, Real Time Phone Search, Sexual Offender Alerts, Virtual Identity Search & Report, and XML. Features with Transactional Fees will be disabled when account is set up. Please contact your account manager at any point to have these features with Transactional Fees enabled.

2.3 Payment Amount: Customer shall pay to LN each month the greater of (i) total User Fees and applicable Transactional Fees or (ii) the total monthly minimum amount(s) as specified in the Price Table.

3. EXPIRATION

Unless otherwise accepted by LN, the terms herein are valid if the Schedule A is signed by the Customer and received by LN on or before 10/04/2012.

4. CONFIDENTIAL INFORMATION

This Schedule A contains confidential information of LN. Customer acknowledges that the disclosure of such information could cause competitive harm to LN, and as such, Customer agrees to maintain Schedule A in trust and confidence and take reasonable precautions against such disclosure to any third party.

AGREED TO AND ACCEPTED BY: Beltrami County Human Services MNSERVICES AND ITS AGENTS
BUSINESS PARTNERS

Signed: _____

Name: _____

Title: _____

Date: _____

Accurint for Government Plus

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(Pricing is per hit unless otherwise indicated)	
PRICE SCHEDULE (Subscription)	
FEATURE	PRICE
ACCURINT MAPPING (Charged per layer)	Standard Feature
ADVANCED PERSON SEARCH	Standard Feature
ADVANCED SEXUAL OFFENDER SEARCH	\$2.00
AERIAL IMAGING	\$3.00
BANKRUPTCIES, LIENS & JUDGMENTS SEARCH (Charged per search)	Standard Feature
BANKRUPTCY SEARCH (Charged per search)	Standard Feature
Bankruptcy Report	Standard Feature
BASIC LOOKUP SEARCH (Directory Assistance)	Standard Feature
BOOLEAN SEARCH	Standard Feature
BUSINESS SEARCH	Standard Feature
CASE AUDIT COMPLIANCE	Standard Feature
CASE CONNECT DECONFLICTION ALERTS	\$0.00
CIVIL COURTS SEARCH (Report Included) (Charged per search)	Standard Feature
CONCEALED WEAPONS PERMIT SEARCH	Standard Feature
CORPORATE FILINGS SEARCH (Report included except in Delaware)	Standard Feature
DEA CONTROLLED SUBSTANCES LICENSE SEARCH	Standard Feature
DEATH RECORDS SEARCH (Charged per search)	Standard Feature
Death Records Report (Charged per search)	Standard Feature
CRIMINAL RECORDS SEARCH	Standard Feature
Criminal Records Report	Standard Feature
DRIVERS LICENSE SEARCH	Standard Feature
E-MAIL SEARCH	\$0.40
FAA AIRCRAFT SEARCH (Report Included)	Standard Feature
FAA CERTIFICATIONS SEARCH (Report Included)	Standard Feature
FIREARMS & EXPLOSIVES LICENSE SEARCH	Standard Feature
FORECLOSURES SEARCH (Report Included)	Standard Feature
HUNTING/FISHING LICENSE SEARCH	Standard Feature
INTERNET DOMAIN NAME SEARCH	Standard Feature
LIENS & JUDGMENTS SEARCH (Charged per search)	Standard Feature
LINEUP	\$0.00
MARRIAGE AND DIVORCE SEARCH	Standard Feature
MOTOR VEHICLE SEARCH	Standard Feature
Motor Vehicle Report	Standard Feature
NATIONAL MOTOR VEHICLE ACCIDENT SEARCH & REPORT	\$3.00
NATIONAL UCC FILINGS SEARCH (Report Included)	Standard Feature
OFFICIAL RECORDS SEARCH (Report Included)	Standard Feature
PEOPLE AT WORK SEARCH	Standard Feature
PEOPLE IN THE NEWS	\$5.00
PERSON ALERTS MONITORING (Monthly Monitoring Transactions Per Account) (Alerts charged at regular price)	
1 - 50	Standard Feature
51 - 250	Standard Feature
251 - 500	Standard Feature
501 - 1,000	Standard Feature
1,001 - 5,000	Standard Feature

5,001 - 25,000	Standard Feature
25,001 - 100,000	Standard Feature
PERSON SEARCH	Standard Feature
PHONES PLUS SEARCH	\$0.50
PROFESSIONAL LICENSE SEARCH (Charged per search)	Standard Feature
PROPERTY ASSESSMENT SEARCH	Standard Feature
Property Assessment Report	Standard Feature
PROPERTY DEED SEARCH	Standard Feature
Property Deed Report (excluding Deed Image)	Standard Feature
REAL TIME MOTOR VEHICLE REGISTRATIONS (Charged per search)	\$3.50
REAL TIME PHONE SEARCH	\$0.50
RELAVINT PLUS LINK ANALYSIS (Per Diagram)	Standard Feature
REVERSE LOOKUP SEARCH (Reverse Directory)	Standard Feature
SEXUAL OFFENDER SEARCH (Report Included) (Charged per search)	Standard Feature
VIRTUAL IDENTITY SEARCH & REPORT	\$2.00
WATERCRAFT SEARCH	Standard Feature
Watercraft Report	Standard Feature
WILDCARD SEARCH	Standard Feature
WORKPLACE LOCATOR (Not discounted)	\$3.50
REPORTS	
ASSET REPORT: Property Deeds & Assessments, Vehicle Registrations, Watercraft, FAA Pilots, FAA Aircraft and UCC Filings.	Standard Feature
AUTOMATED VALUATION MODEL (AVM) REPORT	Standard Feature
FINDER REPORT: Address Summary, Others using SSN, Date/Location where SSN issued, Phone Summary, Current Listed Phones, Unverified phones with Type and Date Indicators, Current Neighbor Phones, Possible Relative Phones (2 Degrees), Possible Associate Phones, Phones at Historical Addresses, Bankruptcy Filings and Corporate Affiliations.	Standard Feature
RELATIVES, NEIGHBORS & ASSOCIATES REPORT	Standard Feature
COMPREHENSIVE ADDRESS REPORT (Base Report Features: Current and Previous Residents and Phones at Address)	Standard Feature
Additional Report Options:	
Bankruptcy (Charged per search)	Standard Feature
Businesses at Address	Standard Feature
Concealed Weapons Permit Search	Standard Feature
Criminal Records Search (Charged per search)	Standard Feature
Criminal Records Report	Standard Feature
Driver Licenses at Address	Standard Feature
Hunting/Fishing License Search	Standard Feature
Liens and Judgments (Charged per search)	Standard Feature
Motor Vehicles Registered at Address	Standard Feature
Neighborhood Profile (2000 Census)	Standard Feature
Neighbors at Address	Standard Feature
Property Ownership Current / Previous	Standard Feature
Sexual Offenders Search (Report Included) (Charged per search)	Standard Feature
COMPREHENSIVE BUSINESS REPORT (Base Report: Name Variations and Businesses at Address)	Standard Feature
Additional Report Options:	
Associated Businesses	Standard Feature
Associated People	Standard Feature
Bankruptcy (Charged per search)	Standard Feature
Business Registrations	Standard Feature
Corporation Filings	Standard Feature

Dun & Bradstreet Records (Not Discounted)	\$3.75
Internet Domain Names	Standard Feature
Liens and Judgments (Charged per search)	Standard Feature
Motor Vehicles	Standard Feature
Properties	Standard Feature
UCC Filings	Standard Feature
CUSTOM COMPREHENSIVE REPORT (Base Report: Others Using Same SSN, Date and Location where SSN Issued, Company Header, Address Summary, Comprehensive Report Summary)	Standard Feature
Additional Report Options:	
Associates	Standard Feature
Bankruptcy (Charged per search)	Standard Feature
Criminal Records (Charged per search)	Standard Feature
DEA Controlled Substances License Search	Standard Feature
Driver Licenses Information	Standard Feature
Liens and Judgments (Charged per search)	Standard Feature
Motor Vehicles Registration (Watercraft & Boat Trailers included)	Standard Feature
National Motor Vehicle Accident Search & Report	\$3.00
Neighborhood Profile (2000 Census)	Standard Feature
Neighbors (Up to 6 Neighbors at 10 Different Addresses)	Standard Feature
People at Work	Standard Feature
Phones Plus	\$0.50
Professional Licenses (Charged per search)	Standard Feature
Property	Standard Feature
Relatives (Per Degree of Separation; Up to 3 Degrees)	Standard Feature
Sexual Offenses (Charged per search)	Standard Feature
Supplemental Data Sources (Charged per search)	Standard Feature
UCC Filings	Standard Feature
ONLINE BATCH	
BATCH PERSON SEARCH	\$0.50
BATCH TELEPHONE	\$0.10

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(Pricing is per hit unless otherwise indicated)	
PRICE SCHEDULE (Subscription)	
FEATURE	PRICE
ADVANCED PERSON SEARCH	Standard Feature
AMERICAN BOARD OF MEDICAL SPECIALTIES SEARCH	\$5.00
ASSOCIATES ("Next Steps")	Standard Feature
BANKRUPTCY SEARCH (Charged per search)	Standard Feature
Bankruptcy Report	Standard Feature
Bankruptcy Dockets (\$0.50 for first 5 pages & \$0.20 per page thereafter)	\$0.50
Bankruptcy Documents (per page, up to max charge of \$6 per document)	\$0.20
BANKRUPTCIES, LIENS & JUDGMENTS SEARCH (Charged per search)	Standard Feature
BASIC LOOKUP SEARCH (Directory Assistance)	Standard Feature
BOOLEAN SEARCH	Standard Feature
BUSINESS CREDIT SEARCH	Standard Feature
Business Credit Report	Standard Feature
BUSINESS INSTANTID SEARCH (Charged per search)	Standard Feature
BUSINESS INSTANTID & FRAUDDEFENDER SEARCH (Charged per search)	Standard Feature
BUSINESS SEARCH	Standard Feature
BUSINESSES IN THE NEWS SEARCH (Not discounted)	\$5.00
CANADIAN PHONES	\$0.40
CASE AUDIT COMPLIANCE	\$0.00
CASE CONNECT DECONFLICTION ALERTS	\$0.00
CIVIL COURTS SEARCH (Report Included) (Charged per search)	Standard Feature
CONCEALED WEAPONS PERMIT SEARCH	Standard Feature
CORPORATION FILINGS SEARCH (Report included except in Delaware)	Standard Feature
COURT SEARCH WIZARD (Additional fees may apply; orders are non-refundable) (not discounted)	
County Civil Lower & Upper Court - 7 Year	\$35.00
County Civil Lower & Upper Court - 10 Year	\$40.00
County Criminal - 7 Year	\$25.00
County Criminal - 10 Year	\$30.00
Federal Division Civil - 7 Year	\$16.00
Federal Division Civil - 10 Year	\$25.00
Federal Division Criminal - 7 Year	\$16.00
Federal Division Criminal - 10 Year	\$25.00
Statewide Criminal	\$24.00
CRIMINAL RECORDS SEARCH (Charged per search)	Standard Feature
Criminal Records Report	Standard Feature
DEA CONTROLLED SUBSTANCES LICENSE SEARCH	Standard Feature
DEATH RECORDS SEARCH (Charged per search)	Standard Feature
Death Records Report	Standard Feature
DELAWARE CORPORATION SEARCH (Not discounted)	\$1.00
Delaware Corporation Report (Not discounted)	\$11.00

DRIVER LICENSES SEARCH	Standard Feature
DUN & BRADSTREET (D&B) SEARCH	\$0.25
Dun & Bradstreet (D&B) Report (Not discounted)	Standard Feature
E-MAIL SEARCH	\$0.40
FAA AIRCRAFT SEARCH (Report Included)	Standard Feature
FAA PILOT SEARCH (Report Included)	Standard Feature
FEDERAL FIREARMS & EXPLOSIVES LICENSE SEARCH	Standard Feature
FEDERAL EMPLOYER ID NUMBERS (FEIN)	Standard Feature
FICTITIOUS BUSINESS NAME SEARCH	Standard Feature
FORECLOSURES SEARCH (Report Included)	Standard Feature
HUNTING/FISHING LICENSE SEARCH	Standard Feature
INSTANTID CONSUMER SEARCH (Charged per search)	Standard Feature
INSTANTID CONSUMER & FRAUDDEFENDER SEARCH (Charged per search)	Standard Feature
INTERNET DOMAIN NAME SEARCH	Standard Feature
LIENS & JUDGMENTS SEARCH (Charged per search)	Standard Feature
Liens & Judgments Report	Standard Feature
MARRIAGES / DIVORCES SEARCH	Standard Feature
MOTOR VEHICLES SEARCH	Standard Feature
Motor Vehicles Report	Standard Feature
MVR REPORTS (DRIVING RECORDS) (Charged per search) (Not discounted)	
Alabama 3-year	\$12.00
Delaware	\$21.50
Florida 3-year	\$7.15
Florida 7-year	\$8.15
Illinois	\$17.00
Indiana 7-year	\$11.00
Iowa	\$13.50
Kansas	\$11.50
Maine 3-year	\$12.00
Minnesota 5-year	\$7.50
Mississippi 3-year	\$16.00
Nebraska 5-year	\$8.00
North Carolina 7-year	\$13.00
Rhode Island 3-year	\$23.00
South Carolina 3-year	\$12.25
Tennessee 5-year	\$12.00
Utah 3-year	\$12.25
Vermont 3-year	\$18.00
West Virginia 7-year	\$10.00
NATIONAL MOTOR VEHICLE ACCIDENT SEARCH & REPORT (Not discounted)	\$3.00
NATIONAL UCC FILINGS SEARCH (Report Included)	Standard Feature
NEIGHBORS ("Next Steps") (Not discounted)	Standard Feature
NPI SEARCH	Standard Feature
NPI Report	Standard Feature
OFFICIAL RECORDS SEARCH (Report Included)	Standard Feature
PATRIOT ACT SEARCH (Charged per search)	Standard Feature

PEOPLE AT WORK SEARCH	Standard Feature
PEOPLE IN THE NEWS SEARCH (Not discounted)	\$5.00
PERSON ALERTS MONITORING (Monthly Monitoring Transactions Per Acct.) (Alerts charged at regular price)	
1 - 50	Standard Feature
51 - 250	Standard Feature
251 - 500	Standard Feature
501 - 1,000	Standard Feature
1,001 - 5,000	Standard Feature
5,001 - 25,000	Standard Feature
25,001 - 100,000	Standard Feature
PERSON SEARCH	Standard Feature
PHONES PLUS SEARCH	\$0.50
PROFESSIONAL LICENSES SEARCH (Charged per search)	Standard Feature
PROPERTY ASSESSMENTS SEARCH	Standard Feature
Property Assessments Report	Standard Feature
PROPERTY DEEDS SEARCH	Standard Feature
Property Deeds Report (excluding Deed Image)	Standard Feature
Property Deeds Image (addl charge when ordered within Property Reports) (Not discounted)	\$8.00
PROPERTY SEARCH (Property Assessments, Deeds & Mortgages)	Standard Feature
Property Report (Property Assessments, Deeds & Mortgages excluding Deed Image)	Standard Feature
PROVIDER SEARCH	\$0.25
Provider Report	\$5.00
PROVIDER SANCTION SEARCH (Charged per search)	\$0.25
Provider Sanction Report	\$5.00
REAL TIME MOTOR VEHICLE REGISTRATIONS (Charged per search)	\$3.50
REAL TIME PERSON SEARCH (Charged per search)	\$3.50
REAL TIME PHONE SEARCH	\$0.50
RELATIVES ("Next Steps")	Standard Feature
RELATIVES, NEIGHBORS & ASSOCIATES ("Next Steps")	Standard Feature
RELAVINT VISUAL LINK ANALYSIS (Per Diagram) (Not discounted)	Standard Feature
REVERSE LOOKUP SEARCH (Reverse Directory)	Standard Feature
SATELLITE IMAGE SEARCH	\$0.00
SEXUAL OFFENDERS SEARCH (Report Included) (Charged per search)	Standard Feature
VIRTUAL IDENTITY SEARCH & REPORT	\$2.00
VOTER REGISTRATION SEARCH	Standard Feature
WATERCRAFT SEARCH	Standard Feature
Watercraft Report	Standard Feature
WORKPLACE LOCATOR (Not discounted)	\$3.50
REPORTS	
ASSET REPORT: Property Deeds & Assessments, Vehicle Registrations, Watercraft, FAA Pilots, FAA Aircraft and UCC Filings.	Standard Feature
AUTOMATED VALUATION MODEL (AVM) REPORT	Standard Feature
COMPREHENSIVE REPORT (Best Value): Summary Report, Associates, Bankruptcy, Concealed Weapons Permits, Criminal Records, DEA Controlled Substances License Search, Driver's Licenses, FAA Aircraft, FAA Pilots, Federal Firearms & Explosives License Search, National Motor Vehicle Accident Search & Report, Hunting / Fishing Permits, Liens & Judgments, Neighbors, People at Work, Phones Plus, Professional Licenses, Property, Relatives (3 Degrees), Sexual Offenders, UCC Filings, Vehicle Registrations, Voter	Standard Feature

Registration and Watercraft.	
ENTITLEMENT REPORT: Summary Report, Phones Plus, Bankruptcy, Liens/Judgments, UCC Filings, People at Work, Driver's Licenses, Vehicle Registrations, Property, Watercraft, FAA Pilots, FAA Aircraft, Professional Licenses, Associates, Relatives (3 Degrees), Criminal Records and Sexual Offenders. Results can be restricted by the user to their applicable dates of interest.	Standard Feature
FINDER REPORT: Address Summary, Others using SSN, Date/Location where SSN issued, Phone Summary, Current Listed Phones, Unverified phones with Type and Date Indicators, Current Neighbor Phones, Possible Relative Phones (2 Degrees), Possible Associate Phones, Phones at Historical Addresses, Bankruptcy Filings and Corporate Affiliations.	Standard Feature
SUMMARY REPORT: Address Summary, Others using SSN, Date/Location where SSN issued, Census Data, Bankruptcy Indicator, Property Indicator and Corporate Affiliations Indicator.	Standard Feature
COMPREHENSIVE ADDRESS REPORT (Base Report Features: Current and Previous Residents and Phones at Address)	Standard Feature
Additional Report Options:	
Bankruptcy (Charged per search)	Standard Feature
Businesses at Address	Standard Feature
Concealed Weapons Permit Search	Standard Feature
Criminal Records Search (Charged per search)	Standard Feature
Criminal Records Report	Standard Feature
Driver Licenses at Address	Standard Feature
Hunting/Fishing License Search	Standard Feature
Liens and Judgments (Charged per search)	Standard Feature
Motor Vehicles Registered at Address	Standard Feature
Neighborhood Profile (2000 Census)	Standard Feature
Neighbors at Address	Standard Feature
Property Ownership Current / Previous	Standard Feature
Sexual Offenders Search (Report Included) (Charged per search)	Standard Feature
COMPREHENSIVE BUSINESS REPORT (Base Report Features: Name, Address and Phone Variations, Parent Company, Id Numbers and Industry Information)	Standard Feature
Additional Report Options:	
Associated Businesses	Standard Feature
Associated People	Standard Feature
Bankruptcy (Charged per search)	Standard Feature
Business Registrations	Standard Feature
Corporation Filings	Standard Feature
Dun & Bradstreet Records (Not Discounted)	\$3.75
FAA Aircraft	Standard Feature
Internet Domain Names	Standard Feature
IRS 5500	Standard Feature
Liens and Judgments (Charged per search)	Standard Feature
Motor Vehicles	Standard Feature
Properties	Standard Feature
UCC Filings	Standard Feature
Watercraft	Standard Feature
CUSTOM COMPREHENSIVE REPORT (Base Report Features: Others Using Same SSN, Date and Location where SSN Issued, Company Header, Address Summary, Comprehensive Report Summary)	Standard Feature
Additional Report Options:	

Associates	Standard Feature
Bankruptcy (Charged per search)	Standard Feature
Criminal Records (Charged per search)	Standard Feature
DEA Controlled Substances License Search	Standard Feature
Driver Licenses Information	Standard Feature
Federal Firearms & Explosives License Search	Standard Feature
Liens and Judgments (Charged per search)	Standard Feature
Motor Vehicle(s) Registration (Watercraft & Boat Trailers included)	Standard Feature
National Motor Vehicle Accident Search & Report	\$3.00
Neighborhood Profile (2000 Census)	Standard Feature
Neighbors (Up to 6 Neighbors at 10 Different Addresses)	Standard Feature
People at Work	Standard Feature
Phones Plus	\$0.50
Professional Licenses (Charged per search)	Standard Feature
Properties	Standard Feature
Relatives (Per Degree of Separation; Up to 3 Degrees)	Standard Feature
Sexual Offenses (Charged per search)	Standard Feature
Supplemental Data Sources (Charged per search)	Standard Feature
UCC Filings	Standard Feature
FLAT RATE COMPREHENSIVE HEALTHCARE BUSINESS REPORT (includes Base Report Features and Additional Report Options listed below)	\$10.00
COMPREHENSIVE HEALTHCARE BUSINESS REPORT (Base Report Features: Name, Address and Phone Variations; Parent Company, ID Numbers and Industry Information)	\$0.50
Additional Report Options:	
Associated Businesses	\$1.00
Associated People	\$1.00
Bankruptcy (Charged per search)	\$1.00
Business Phone Matches	\$0.25
Business Registrations	\$0.25
Corporation Filings	\$1.00
Dun & Bradstreet Records (Not Discounted)	\$3.75
FAA Aircraft	\$0.25
Internet Domain Names	\$0.25
IRS 5500	\$1.00
Liens and Judgments (Charged per search)	\$0.25
Motor Vehicles	\$0.75
Properties	\$1.00
Sanctions	\$0.50
UCC Filings	\$0.50
Verification	\$0.75
Watercraft	\$1.00
FLAT RATE COMPREHENSIVE HEALTHCARE PROVIDER REPORT (includes Base Report Features and Additional Report Options listed below)	\$6.00
COMPREHENSIVE HEALTHCARE PROVIDER REPORT (Base Report Features: Others Using Same SSN, Date and Location where SSN Issued, Company Header, and Address Summary)	\$0.50
Additional Report Options:	
Bankruptcy (Charged per search)	\$0.25

Business Address Summary	\$0.25
Business Affiliations	\$0.50
Business Phone Matches	\$0.25
DEA Licenses	\$0.25
Education	\$0.50
Group Affiliations	\$0.50
Hospital Affiliations	\$0.50
Liens and Judgments (Charged per search)	\$0.25
Possible Criminal Records (Charged Per Search)	\$0.25
Professional Licenses (Charged per search)	\$1.00
Sanctions (Charged Per Search)	\$0.50
Sexual Offenses (Charged Per Search)	\$1.00
Verification	\$0.75
ONLINE BATCH	
Advanced Person Search	\$0.50
Deceased Person	\$0.25
Address (single)	\$0.13
Address (multiple)	\$0.16
EDA Phones (Directory Assistance) (single)	\$0.10
EDA Phones (Directory Assistance) (multiple)	\$0.12
Waterfall Phones - Directory Assistance Match, Address and Name Variations, Co-Residents, Phones Plus & Relatives; Add-ons Possible Relocation, Neighbors & People at Work (single)	\$0.23
Waterfall Phones - Directory Assistance Match, Address and Name Variations, Co-Residents, Phones Plus & Relatives; Add-ons Possible Relocation, Neighbors & People at Work (multiple)	\$0.25
Address and Phones (single)	\$0.25
Address and Phones (multiple)	\$0.30
Address and/or Phone Dedupe (per input) (single)	\$0.03
Address and/or Phone Dedupe (per input) (multiple)	\$0.04
Phones Plus	\$0.50
Real Time Phone Search	\$0.50
Real Time Motor Vehicle Registrations	\$1.50
Property - Add Up to Five Properties owned by the subject	\$1.00
Consumer InstantID	\$0.65
Consumer InstantID with Fraud Defender	\$0.95
Consumer InstantID with Red Flags Rule	\$0.90
Business InstantID	\$1.30
Business InstantID with Fraud Defender	\$1.30
Multiple = 2 or more phones/addresses returned	

2013 Legislative Initiatives

Minnesota counties recognize the budgetary challenges that face Minnesota's Legislature in this biennium and beyond. In our efforts to partner with policy makers and contribute solutions that move the state toward a more sustainable human services system, MACSSA recommends:

Simplifying Human Services Programs

Administrative simplification has the potential to dramatically improve efficiency and effectiveness. It is a critical component to creating a more sustainable human services system.

MACSSA recommends:

- ▶ Authorizing administrative removal of medical support obligations to a non-custodial parent in situations where the custodial parent elects not to carry medical insurance that is being reimbursed through the medical support obligation of the non-custodial parent.
- ▶ Automating recreational license suspension when a child support obligor is in arrears in an amount equal to or greater than three times the obligor's total monthly payment. Automation will align this process with the statutory language governing automobile license suspension for failure to pay child support or maintenance payments.
- ▶ Simplifying the administrative requirements for the Medical Assistance, Economic Assistance, and Food Support programs.
- ▶ Amending statute governing licensed family child care to reduce exceptions to safe sleep position and to allow timely investigations of deaths in family child care. Statutory changes are necessary to provide counties with additional authority and ability to promptly investigate and remedy unsafe practices.
- ▶ Prohibiting the payment of medical expenses by Medical Assistance (MA) when an individual is in a penalty period for improper transfer of assets. Currently when an individual is found to have improperly transferred assets MA payment for nursing home and home and community based services is prohibited, but general medical expenses are allowable. This reduces the impact of the penalty as individuals are able to use monthly income to pay for nursing home expenses.
- ▶ Authorizing increased accessibility to the Department of Public Safety's Driver Vehicle System (DVS) for public program eligibility determinations. Currently county financial workers must obtain information from the client regarding value of motor vehicles, which often results in delays in application processing. Allowing increased access to the DVS will promote efficiency and enable quicker eligibility determinations.
- ▶ Expanding streamlined eligibility of MA to include any person whose basis for eligibility is disability or elderly and who receives benefits from Social Security Administration. Individuals in this benefit category have conditions that make their basis for eligibility unlikely to change over time.
- ▶ Providing counties the authority to issue temporary SNAP EBT cards for non-expedited care takers in situations deemed appropriate by the county. Currently it is expected to take approximately 5 days to issue an EBT card via mail to a non-expedited caretaker with further delays expected for homeless and transient caretakers. This places pressure on counties and local food shelves as a significant number of caretakers who need immediate access to food.
- ▶ Allowing counties 48 hours excluding weekends and holidays to interview applicants who meet the expedited criteria for Supplemental Nutrition Assistance Program eligibility. Currently, counties are required to provide same day interviews to applicants who meet the expedited criteria and issue benefits within 5 days. Allowing an additional day to satisfy the interview requirement will provide counties with flexibility without jeopardizing the clients receipt of benefits within the mandated timeframe.
- ▶ Transferring child care background studies to the Minnesota Department of Human Services to ensure a consistent method and interpretation of results without regard to county of licensure.
- ▶ Align the timelines for service eligibility and financial eligibility by extending the period from 60 to 90 calendar days in which the face to face long term care assessment is valid to establish service eligibility. Due to delays in the submission for financial assistance applications or delays in providing verification information the establishment of financial eligibility may extend beyond 60 days the LTCC assessment may have to be repeated without any changes in client circumstances.

Investments in Technology

A technology infrastructure which assures efficient administration of publicly-funded human services must be developed.

MACSSA recommends:

- ▶ Supporting the Department of Human Services efforts to modernize human services technology systems. Updating the state's aging human services technology infrastructure is essential to effective administration of programs and achieving client outcomes.

Aligning Funding with Outcomes for Vulnerable Populations

Achieving expected outcomes has become increasingly difficult due to an unsustainable rate of growth in health care and long term care spending combined with decreasing State revenues. Investments must be strategically re-focused in programs that cost-effectively achieve desired outcomes.

MACSSA recommends:

- ▶ Providing sufficient state funding and resources to the child support service delivery system to ensure desired outcomes for recipients. Failure to maintain funding and resources jeopardizes Minnesota's ability to access Federal incentive funding and places the state at risk for fiscal penalties in the Temporary Assistance for Needy Families (TANF) program if compliance thresholds are not met
- ▶ Passage of the Northstar Care for Children Act. The disparity in payment between Relative Custody Assistance/Adoption Assistance and foster care is a barrier to achieving permanency for children. Passage of the Northstar Act would allow the state to access federal funding to assist in relative placements.
- ▶ Resourcing the expansion of the text message/new media suicide prevention service currently available in the Northeast quarter of Minnesota to allow for statewide use and more effective outreach and connection to youth at risk for suicide. Suicide rates in Minnesota continue to be unacceptably high among all age groups and the traditional use of "hotlines" has not addressed the evolving methods that many people, especially younger Minnesotans, use to reach out for help.
- ▶ Expanding investments to family home visiting for at-risk families with newborns and young children to divert at-risk families from more cost intensive services.
- ▶ Statewide Expansion of the Parent Support Outreach Program (PSOP). PSOP provides voluntary supportive services to families reported for child abuse and neglect. This evidence based prevention program has resulted in reducing the number of new reports of maltreatment and the need for more cost intensive services.
- ▶ Authorizing continued and expanded statewide funding for the school-linked mental health initiative for children and youth. Demonstration funding for this initiative has resulted in significantly increased access to and engagement in mental health services for children and youth. The demonstration funds will expire at the conclusion of the 2012-2013 school year. Additional state supported is necessary to sustain and expand this cost-effective service model.
- ▶ Assuring the Commissioner of Human Services has equal opportunity at debt recovery based on a first claimed/first paid basis.
- ▶ Dedicating state child care funding to eligible young parents, through age 21, seeking child care to enable them to finish high school or obtain a GED. A high school diploma or GED is an essential foundation for self-sufficiency. Investing in child care resources for young parents will better enable them to achieve independence and reduce the need for continued economic assistance.
- ▶ Authorizing counties to assess annual non-refundable child care licensing study fees of up to \$200 and up to an additional \$100 for background studies. Current maximum fees are not sufficient to support these services.
- ▶ Providing counties an equivalent level of tort protection to that of the state for child care licensing functions.

MACSSA looks forward to engaging with the Legislature and all critical stakeholders to explore and pursue the recommended solutions.

For more information please contact:

Eric Ratzmann, MACSSA Director
ratzmann@mncounties.org
651-789-4340

November 2012



Minnesota Association of County
Social Service Administrators

CONTRACT NO.

PURCHASE OF SERVICE AGREEMENT

THIS AGREEMENT, by and between **AITKIN COUNTY BOARD OF COMMISSIONERS**, 204 First Street NW, Aitkin, Minnesota 56431 (hereinafter referred to as "Board"), and the **ARROWHEAD ECONOMIC OPPORTUNITY AGENCY**, 702 Third Avenue South, Virginia, Minnesota 55792 (hereinafter referred to as "Provider"), for the period January 1, 2013 to December 31, 2013.

WITNESSETH:

WHEREAS, Funds have been made available to the Board from the Minnesota Department of Human Services for the purpose of providing **MINNESOTA FAMILY INVESTMENT PROGRAM (MFIP) EMPLOYMENT AND TRAINING SERVICES (BRASS 237X)** under Minnesota Statute 256J.50 and PL 104-193 and **DIVERSIONARY WORK PROGRAM SERVICES (DWP) (BRASS 212X)** under Minnesota Statute 256J.95; and

WHEREAS, the Provider is qualified in accordance with State and Federal standards to provide Employment and Training Services; and

WHEREAS, the Board wishes to purchase MFIP Employment and Training and DWP services from the Provider.

NOW THEREFORE, in consideration of the mutual understandings and agreements set forth, the Board and Provider agree as follows:

I. Services to be Provided

A. **MFIP Program:**

- Orientation
- Employability Services Overview
- Initial Assessment
- Job Support Plan
- Secondary Assessment
- Employment Plan
- Job Readiness
- Job Placement
- On The Job Training
- Coordination/Referral
- Grant Diversion Services
- Community Work Experience Program (including procedures for implementing the Injury Protection Program (IPP), as described in Exhibit A (MFIP))
- Functional Work Literacy Training

B. Diversionary Work Program (DWP):

Employment Services (ES) providers must meet with DWP job seekers that are referred to ES within ten days of the DWP participant's referral to ES.

The ES provider and job seekers must complete an initial employment plan within this ten days.

The ES provider must notify the county financial worker (FW) within one day that the employment plan has been completed.

The ES provider administers a work focused DWP-ES program with employment as the primary goal of the program.

The ES provider should complete employment plans that are based on a job seeker's strengths.

The ES provider should have, to the extent possible, a structured job search component that is intensive (i.e. full time) and mirrors work place behavior (expects job seekers to arrive on a timely basis, dress appropriately, complete assignments, etc.)

When appropriate, a job seeker's employment plan should address non-work issues such as securing housing or child care, plus any health or disability issues, which would delay or prevent the job seekers from being fully engaged in work activities.

The ES provider monitors job seeker participation and progress and apply sanctions (which result in disqualification from DWP when appropriate.

C. Provider agrees to place minor caregivers into dual-enrollment, when appropriate, working with a Social Worker in development of the Education Plan.

D. Family Stabilization Services (FSS):

Case management of FSS shall be the responsibility of ES providers and the regional Integrated Services Project (ISP) shall serve as the primary referral source. Job counselors shall conduct assessments on each intake, as is already done with all MFIP clients, and shall maintain monthly contact with FSS clients from then on. Ongoing communication between financial workers, job counselors, and ISP advocates shall be required. The employment plan developed by the job counselor for FSS clients shall include assessment of strengths and barriers, identification of specific family circumstances that impact the plan, employment goals, when appropriate, appropriateness of referral to the ISP project, and identification of services, supports, education, training, and accommodations, as appropriate; the plan shall be reviewed by job counselors every six (6) months to determine the need for additions, deletions, or revisions.

E. Services will be provided by:

Arrowhead Economic Opportunity Agency
702 Third Avenue South
Virginia, MN 55792

II. Payment and Delivery of Services

- A. The Board and Provider agree to monitor utilization and expenditures on a monthly basis. If expenditures are substantially above or below projection, Board and Provider may consider modifications to the specified rates of payment.
- B. The Board and Provider agree that total expenditures under this agreement combined with expenditures made to other Employment and Training Providers for the same services, may not exceed the total County allocation of \$156,325.00 in State and Federal funds made to the Board for this purpose.

III. Eligibility for Services

- A. Determination of eligibility shall be completed in accordance with procedures outlined in Exhibit A.
- B. Any change in eligibility will initiate a notice by either the Board or the Provider within 30 days to the other party; the participant will remain eligible for the Provider's services for six (6) months after termination from MFIP.
- C. Eligibility categories: MFIP registrants are defined as persons who have applied for MFIP services and payments, and who have been determined eligible by the Board for those services and payments.

IV. Payment Process

- A. The Board's obligation to make payment hereunder is subject to review by the Aitkin County Health and Human Service Department to insure that payment is for a referred individual and has not previously been made. Said review shall be the final determination of Board's payment obligation. Nothing herein shall limit the rights of either party to collect from the other any sums improperly paid or improperly withheld.
- B. Payment for MFIP services provided shall be made according to procedures outlined in Exhibit A.
- C. Board's obligation to make payment for MFIP services hereunder is subject to audit by Board or its duly authorized designee and said audit shall be the final determination of Board's payment obligation.
- D. Provider will promptly reimburse to Board any payments for MFIP received in excess of required payments hereunder.
- E. For MFIP, Board shall not be obligated to honor claims for, nor shall Provider claim for, any services furnished or costs incurred by Provider which are not specifically provided for hereunder or requested by Board in writing during the term of this Agreement.

V. Audit and Record Disclosure

The Provider shall provide the Board with the reports and comply with the audit and record requirements specified in Exhibit A under Audit and Record Disclosures.

VI. Safeguard of Client Information

A. The use or disclosure by any party or of any private information concerning a client in a violation of any rule of confidentiality or for any purpose not directly connected with the administration of the Board's or the Provider's responsibility with respect to the Purchased Services is prohibited without the written consent of the client or responsible parent or guardian.

B. Provider agrees to comply in all respects with the Minnesota Government Data Practices Act, Minn. Stat. Section 13.01-.48, and Provider further agrees to comply with any requests of Board which are necessitated by Board's obligations under said Act.

C. HIPAA COMPLIANCE

The parties agree to comply with all respects with the Health Insurance Portability and Accountability Act, Public Law 104-191 (HIPAA), and all rules, regulations and controls affected or promulgated pursuant thereto. The parties agree that as HIPAA and its rules and interpretations become effective, the parties shall execute amendments hereto, provide written assurances, implement policies and procedures, or take whatever other actions are necessary to comply with HIPAA. Should a party fail or refuse to honor its obligations pursuant to this section, the other party may terminate this Agreement with thirty (30) days written notice.

VII. Fair Hearing Appeal

Any determination, action, or inaction on the part of the Board relating to an individual's participation in the program is subject to the notice and hearing procedures in Minn. Stat. 256.045 and 268.86.

VIII. Equal Employment Opportunity and Civil Rights Clause

Provider agrees to comply with the Civil Rights Act of 1964, Executive Order No. 11246 as amended, the Minnesota Human Rights Act, and all applicable Federal and State laws, rules, regulations and orders prohibiting discrimination in employment, facilities and services. Provider shall not discriminate in employment, facilities and in the rendering of purchased services hereunder on the basis of race, color, religion, age, sex, disability, marital status, public assistance status, creed or national origin.

IX. Rehabilitation Act Clause

The Provider agrees to comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 USC 794) and all requirements imposed by the applicable HHS regulation (45 CFR Part 84), and all guidelines and interpretations issued pursuant thereto.

X. Bonding, Indemnity and Insurance Clause

- A. BONDING: The Provider will obtain and maintain at all times during the term of this Agreement, a fidelity bond covering the activities of its personnel authorized to receive or distribute monies in the amount of \$50,000.
- B. INDEMNITY: The Provider agrees it shall defend, indemnify and hold harmless the Board, its officers and employees against any and all liability, loss, costs, damages and expenses that the Board, its officers or employees may hereafter sustain, incur, or be required to pay arising out of the Provider's performance or failure to adequately perform its obligations pursuant to this Purchase of Service Agreement.
- C. INSURANCE: The following insurance must be maintained for the duration of this Agreement. A Certificate of Insurance for each policy must be on file with the Aitkin County Health and Human Services Department within ten (10) days of execution of this contract and before commencement of any work under this contract. Each certificate must include a thirty (30) day notice of cancellation, non-renewal, or material change to all named and additional insureds.

All insurance policies will be open to inspection by the Board, and copies of policies will be submitted to the County upon written request. All subcontractors shall provide evidence of similar coverage.

(1) General Liability Insurance

- (a) **\$500,000** for claims for wrongful death and each Person for other claims
\$1,500,000 Each Occurrence
Claims outside the scope of M.S. 466 \$2,000,000 per claim.
- (b) Policy shall include at least premise, operations, completed operations, independent contractors and subcontractors, and contractual liability.
- (c) Aitkin County must be named additional insured.

(2) Business Automobile Liability Insurance

- (a) **\$500,000** Each Person
\$1,500,000 Each Occurrence
Claims outside the scope of M.S. 466, \$2,000,000 per claim.
- (b) Must cover owned, non-owned and hired vehicles

(3) Workers' Compensation Per Statutory Requirements

- D. NONCOMPLIANCE: The Board reserves the right to rescind any contract not in compliance with these requirements and retains all right thereafter to pursue any legal remedies against Provider.

XI. Maintenance of Effort and Expansion of Services

Provider hereby certifies that the Federal funds to be used under this Agreement do not replace or supplant in any way State or local funds. Provider certifies that the amount to be expended in this Agreement results in increased expenditures by the Provider for services of the type being purchased to individuals of the type included under the Agreement.

XII. Conditions of the Parties' Obligations

- A. It is understood and agreed that in the event the reimbursement by the Board from State and Federal sources is not obtained and continued at an aggregate level sufficient to allow for the continued grant, the obligations of each party hereunder shall thereupon be terminated.
- B. Board may at any time evaluate the performance of Provider in regard to the terms of this Agreement to determine whether such performance merits continuation of this Agreement.
- C. Any alterations, variations, modifications or waivers of provisions of this agreement shall be valid only when they have been reduced to writing, duly signed, and attached to the original of this Agreement.
- D. In the event of a revision in Federal regulations which might make this Agreement ineligible for Federal financial participation, all parties will review this Agreement and renegotiate those items necessary to bring the Agreement into compliance with the new Federal regulations.
- E. Provider agrees to cooperate fully with Board and its designated representatives in the development and implementation of Provider's services. Evaluative data collected will be used by Board in its funding decisions and shall be shared with Provider and community.
- F. Provider agrees that in any reports, news releases, public service announcements or publications regarding Provider's program, Board will be identified as a funding source.

XIII. Subcontracting and Assignment

Provider may enter into subcontracts for the performance of any of the responsibilities contemplated under this Agreement, subject to the approval of the Board. All subcontracts shall be subject to the legal, fiscal and programmatic requirements of this contract. Provider shall continue to be responsible for the performance of the obligations of this Agreement, despite any subcontract.

XIV. Independent Contractor

Provider is an independent contractor and not an employee or agent of Board. No statement contained in this Agreement shall be construed so as to find Provider to be an employee or agent of Board. Provider, its officers, employees and agents shall be entitled to none of the rights, privileges or benefits of Board employees. Nothing contained herein is intended nor shall be construed as constituting Provider, its officers, employees or agents as the agent, representative or employee of Board for any purpose or in any manner, whatsoever.

XV. Cancellation, Default and Remedy

- A. This Agreement shall continue in effect until terminated by either party without cause, with 30 days advance, written notice delivered to the other party, served on the Director of Aitkin County Health and Human Services, 204 First Street NW, Aitkin, Minnesota 56431 on behalf of Board; and on the Director of Arrowhead Economic Opportunity Agency, 702 Third Avenue South, Virginia, Minnesota 55792 on behalf of Provider.
- B. In the event of default by either party, the non-defaulting party may cancel this Agreement immediately by sending written notice of cancellation to the defaulting party at its principal business address, notwithstanding the provisions of Paragraph 15a above. The failure of the defaulting party, including the failure of any employee of the defaulting party, to abide by any of the terms, conditions or requirements expressed in this Agreement shall constitute a default if not corrected within ten (10) days of receipt of written notice of deficiency from Board.
- C. Waiver of any default shall not be deemed to be a waiver of any subsequent default. Waiver of breach of any provision of this Agreement shall not be construed to be a modification of the terms of this Agreement unless stated to be such in writing, signed by an authorized representative of Board upon resolution of Board.

XVI. Single Instrument, Legality

- A. It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Provider and Board relating to the subject matter hereof.
- B. The provisions of this Agreement are severable. If a court of law holds any paragraph, section, subdivision, sentence, clause or phrase of this Agreement to be contrary to law, or contrary to any rule or regulation having the force and effect of law, such ruling shall not affect the remaining portions of this Agreement. However, upon the occurrence of such event, the parties shall immediately meet to negotiate a revised Agreement which does not violate the above-referenced ruling.

IN WITNESS WHEREOF, Board and Provider agree that this contract is effective from January 1, 2013 to December 31, 2013.

AEOA
PROVIDER

AITKIN COUNTY BOARD
OF COMMISSIONERS

Chairman - Board of Directors

**Mark Wedel, Chairperson
Aitkin County Board of Commissioners**

Printed Name of Signer

Date: _____

Date: _____

**Harlan Tardy
Executive Director**

**Tom Burke, Director
Aitkin County Health & Human Service**

Date: _____

Date: _____

Approved as to form and execution:

**James Ratz
County Attorney**

Date: _____

IMPLEMENTATION PROCEDURES

I. Methods of Determining Eligibility

- A. The participant has the responsibility of requesting and obtaining eligibility determination from the Aitkin County Health and Human Services Department before utilizing the services.
- B. The Aitkin County Health and Human Services Department shall determine MFIP eligibility in accordance with applicable Federal and State law.
- C. The Aitkin County Health and Human Services Department shall decide the eligibility of a participant within thirty (30) days of application for eligibility determination. The participant shall be notified of his/her eligibility status and will be referred to the Provider within the said thirty (30) day time period.
- D. Provider has the responsibility to confirm that a participant is eligible to receive service prior to providing service. Board will not be responsible for services provided to clients prior to eligibility determination.

II. Method of Payment Authorization

- A. The Provider agrees that all MFIP Services monies, including Community Work Experience Program (CWEP), Grant Diversion and On-The-Job Training, received under this contract shall be expended to provide services as specified in Exhibit B.

The Provider shall submit on or before the 10th working day of the month for the previous month an invoice listing;

MFIP Program outcomes achieved, as specified in paragraph 2 of the contract;

Number of persons achieving each outcome;

Rate per outcome;

Provider shall include a listing of MFIP participants served and employment status.

The Board agrees to pay within thirty (30) days of receipt of these reports.

- B. Allowable program components are:

- 1. Orientation - stating the need for immediate employment; rights, responsibilities, and obligations

2. Employment Overview - work focus of MFIP; job search resources; financial program review
3. Initial Assessment - assess the job seeker's ability to obtain and retain employment
4. Job Support Plan - specify job search activities
5. Secondary Assessment - completed for participants who have barriers to employment
6. Employment Plan - participant's overall employment goal and steps needed to achieve the goal
7. Job Readiness Activities - help participants be familiar with general work place expectations
8. Job placement - job development and job placement activities by Provider
9. On-the-Job Training - agreement with Provider and employer for client training needed for employment
10. Grant Diversion - provides subsidies to employers as an incentive to hire participants
11. Community Work Experience (CWEP) - enhance participants employability through meaningful work experience
12. Educational Activity - specific to the needs of the participant. This includes:
 - a. High school, GED classes
 - b. Basic and remedial education that will provide a person with a basic literacy level in order to fulfill an employment goal (basic education is instruction to provide these educational skills for the first time; remedial education involves repetition of such instruction previously given to the participant); and
 - c. Education in English proficiency for a person who is not sufficiently competent to speak, read, or write the English language to allow employment commensurate with his/her employability goal.
 - d. Post-secondary education – only on a very limited basis and with specific reporting documentation. Any education plan more than 12 months needs approval by the county agency.

- C. The following types of expenditures are explicitly recognized as administrative costs for MFIP Services, Community Work Experience Program, AFDC Grant Diversion and On-the-Job Training (administrative costs shall not exceed 7.5% of the total cost):

All other administrative costs, including overhead expenditures, subsystem costs, personnel costs (salaries and benefits) for staff not directly providing component services to participants (such as second-line supervisors and above), personnel administration costs, costs for processing and managing the Injury Protection Program (IPP) including investigations, medical reports or evaluations and all other indirect costs;

- D. Provider shall submit a monthly invoice to Board by the 10th day of each month listing the number of MFIP participants in each service category as specified in 2 A, B, C, and D of the contract. Provider also will submit a listing of the names of each MFIP participant by service category.
- E. Provider shall submit a quarterly report to Board listing client related expenditures broken down as follows:
1. Client education
 2. Transportation
 3. Employment related
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- F. Provider agrees to provide additional statistical reports to Board, or its representatives, as needed and/or requested.

III. Audit and Record Disclosure

- A. Provider agrees that all monies received under this contract shall be expended for the services specified in the contract.
- B. Provider agrees to submit to Board the information required to fulfill the terms of this Agreement and the information required by State law or policy.
- C. Provider agrees to allow personnel of the Board and Aitkin County Health and Human Services Department, the State Auditor and, if appropriate, the Minnesota Department of Economic Security, access to Provider's records at reasonable hours in order to exercise their right to audit Provider's records and to monitor services.
- D. Provider agrees to maintain records at Provider's offices for six (6) years for audit purposes. Provider agrees to keep complete books and records according to generally accepted accounting principles which shall fully document receipt and expenditure of the payments received

hereunder. Provider shall also keep such books and records as are required by Board to fulfill Board's reporting responsibility to the County, State and Federal governments.

- E. Provider shall have an independent audit completed that complies with the requirements of OMB Circular A-133. The audit report shall be forwarded to Board within 30 days following its completion.

IV. Compliance with Injury Protection Program (IPP) Requirements

The contracted agency agrees to comply with Minnesota Statutes 2003, 256J.68 injury protection for work experience participants. The contracted agency shall perform all tasks necessary to implement IPP activities that relate to work site injury and subsequent referral of an injured participant to a medical provider for treatment of a possible work related injury or condition. The contracted agency shall also conduct activities necessary to properly process and submit an IPP claim. All IPP claims, medical provider bills, required forms and supporting documentation shall be forwarded to the county agency. Prior to assigning a participant to an unpaid work experience work site, the contracted agency will ensure that: the program participant will receive appropriate safety training and information required for this position and; and the work site is in compliance with Occupational Safety and Health Administration (OSHA) and the Minnesota Department of Labor and Industry Safety Standards.

The Provider shall be responsible for the following preparatory and front-end tasks required as part of the IPP process for the CWEP program:

- A. Provider will complete the following forms and route to all appropriate agencies, as specified by DHS and the County:
 - * Participation Information and Medical Release Authorization
 - * First Report of Injury
 - * Participant Medical Referral and Medical Care Provider Information Letter
 - * Participant Injury Status Report
 - * Participant Claim Form
- B. Provider shall be responsible for providing participant safety training and information to all CWEP participants.
- C. Provider shall be responsible for work site safety standard compliance check based on OSHA requirements for all CWEP work sites.

METHOD OF SERVICE DELIVERY

MFIP EMPLOYMENT SERVICES

The overall objective of MFIP Employment Services is to move MFIP families toward long term economic self-sufficiency by utilizing the most direct path to unsubsidized employment.

The Provider of MFIP Services must be certified by the Minnesota Department of Jobs and Training as an Employment and Training Service Provider (ETSP) for the duration of this contract.

The general sequence of events in MFIP Employment Services are the following:

- * County Health and Human Services determines eligibility for MFIP
- * The Department provides the job seeker with an orientation which includes MFIP program requirements
- * The client is referred to an employment overview and selects a provider
- * The job seeker has initial assessment and initial employability determination completed
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ORIENTATION: this shall state the need for immediate employment; work incentives; mandate to participate; consequences for failure to comply; rights, responsibilities, obligations; services available.

EMPLOYMENT OVERVIEW: urgency and opportunity of obtaining employment; work focus on MFIP; limited use of training; CTC; Child Care; transitional year child care and Medical.

INITIAL ASSESSMENT: review participants ability to obtain and retain employment; education level; prior employment; ability to communicate in the English language; refresher courses needed.

JOB SUPPORT PLAN: specify job search activities; requirement to accept suitable offers of employment; supervision by the provider.

SECONDARY ASSESSMENT: completed for those job seekers who have barriers to employment that shall not be overcome by job search and related support activities.

EMPLOYMENT PLAN: includes the employment goal; activities and time frame necessary to achieve the goal; outline activity for continued job search, ESL, GED, work experience, OJT short term training. All post secondary education plans need to be approved by the County.

JOB READINESS: activities that help prepare job seekers for work by assuring that they are familiar with general workplace expectations and exhibit work behavior/attitudes to compete in the labor market.

JOB PLACEMENT: job development and placement activities by Provider to solicit unsubsidized job openings from public or private employers, to discover such job openings, market job seekers, secure job interviews for job seekers.

ON-THE-JOB TRAINING: permits voluntary participation by MFIP recipients. Payments are made to employers for ongoing job training costs that, during the period of training, must not exceed 50% of the wages paid by the employer to the participant. The payments are deemed to be in compensation for the extra-ordinary costs associated with the lower productivity of the participant during training.

The length of the training will be limited based upon the complexity of the job, and the recipients previous work experience and training. The employer agrees to retain the individual through the training period and beyond into unsubsidized employment.

COMMUNITY WORK EXPERIENCE PROGRAM (CWEP): helps participants achieve self-sufficiency by enhancing their employability through meaningful work experience and development of job search skills. CWEP placements will be used in conjunction with skills training, job search, job readiness.

Employment counselors will assist the placement and monitor the job seeker's progress at each location. Work sites developed under this section are limited to projects that serve a useful public service such as: health, social service, environmental protection, education, urban and rural development, and redevelopment, welfare, recreation, public facilities, public safety, community service, service to aged or disabled citizens, and child care. To the extent possible, prior training and experience of a recipient must be used in making appropriate work experience assignments.

GRANT DIVERSION: uses the MFIP Grant to provide wage subsidies to employers as an incentive to hire MFIP recipients. Grant Diversion is one of the optional Employment and Training services. Priority shall be given to employers who offer permanent full-time employment positions in the private, non-profit or public sector and who agree to hire individuals beyond the period of subsidized employment.

COORDINATION: Employment counselors shall coordinate with, and refer job seekers to, other community agencies or groups for training, social and support services, including, but not limited to other partners of the Workforce Centers.

These services shall be provided in a manner that complies with the Employment and Training Program Sections of the current Local Service Unit Plan for Aitkin County and State Policy as specified in relevant DHS/DES Instructional Bulletins.

Consolidated MFIP Support Services Grant 2013 Allocation

Allocation: 208,614 Admin Limit: 15,646

MFIP Employment Services:

	Original
12 Month Allocation	115,001.00
Administration	<u>15,646.00</u>
	130,647.00

Per Service Provider 65,323.50

Qtrly Payments per Provider=
16,330.88

DWP Employment Services:

12 Month Allocation 25,678.00

Per Service Provider 12,839.00

Qtrly Payments per Provider=
3,209.75

Crisis:

12 Month Allocation 25,000.00

County Administration:

12 Month Allocation 27,289.00

208,614.00

CONTRACT NO.

PURCHASE OF SERVICE AGREEMENT

THIS AGREEMENT, by and between **AITKIN COUNTY BOARD OF COMMISSIONERS**, 204 First Street NW, Aitkin, Minnesota 56431 (hereinafter referred to as "Board"), and the **NORTHEAST MINNESOTA OFFICE OF JOB TRAINING**, PO Box 1028, 820 North 9th Street, Virginia, Minnesota 55792 (hereinafter referred to as "Provider"), for the period January 1, 2013 to December 31, 2013.

WITNESSETH:

WHEREAS, Funds have been made available to the Board from the Minnesota Department of Human Services for the purpose of providing **MINNESOTA FAMILY INVESTMENT PROGRAM (MFIP) EMPLOYMENT AND TRAINING SERVICES (BRASS 237X)** under Minnesota Statute 256J.50 and PL 104-193 and **DIVERSIONARY WORK PROGRAM SERVICES (DWP) (BRASS 212X)** under Minnesota Statute 256J.95; and

WHEREAS, the Provider is qualified in accordance with State and Federal standards to provide Employment and Training Services; and

WHEREAS, the Board wishes to purchase MFIP Employment and Training and DWP services from the Provider.

NOW THEREFORE, in consideration of the mutual understandings and agreements set forth, the Board and Provider agree as follows:

I. Services to be ProvidedA. **MFIP Program:**

- Orientation
- Employability Services Overview
- Initial Assessment
- Job Support Plan
- Secondary Assessment
- Employment Plan
- Job Readiness
- Job Placement
- On The Job Training
- Coordination/Referral
- Grant Diversion Services
- Community Work Experience Program (including procedures for implementing the Injury Protection Program (IPP), as described in Exhibit A (MFIP))
- Functional Work Literacy Training

B. Diversionary Work Program (DWP):

Employment Services (ES) providers must meet with DWP job seekers that are referred to ES within ten days of the DWP participant's referral to ES.

The ES provider and job seekers must complete an initial employment plan within this ten days.

The ES provider must notify the county financial worker (FW) within one day that the employment plan has been completed.

The ES provider administers a work focused DWP-ES program with employment as the primary goal of the program.

The ES provider should complete employment plans that are based on a job seeker's strengths.

The ES provider should have, to the extent possible, a structured job search component that is intensive (i.e. full time) and mirrors work place behavior (expects job seekers to arrive on a timely basis, dress appropriately, complete assignments, etc.)

When appropriate, a job seeker's employment plan should address non-work issues such as securing housing or child care, plus any health or disability issues, which would delay or prevent the job seekers from being fully engaged in work activities.

The ES provider monitors job seeker participation and progress and apply sanctions (which result in disqualification from DWP when appropriate.

- C. Provider agrees to place minor caregivers into dual-enrollment, when appropriate, working with a Social Worker in development of the Education Plan.

D. Family Stabilization Services (FSS):

Case management of FSS shall be the responsibility of ES providers and the regional Integrated Services Project (ISP) shall serve as the primary referral source. Job counselors shall conduct assessments on each intake, as is already done with all MFIP clients, and shall maintain monthly contact with FSS clients from then on. Ongoing communication between financial workers, job counselors, and ISP advocates shall be required. The employment plan developed by the job counselor for FSS clients shall include assessment of strengths and barriers, identification of specific family circumstances that impact the plan, employment goals, when appropriate, appropriateness of referral to the ISP project, and identification of services, supports, education, training, and accommodations, as appropriate; the plan shall be reviewed by job counselors every six (6) months to determine the need for additions, deletions, or revisions.

- E. **Services will be provided by:** Northeast Minnesota Office of Job Training
820 N. 9th Street - Suite 240
Virginia, MN 55792

II. Payment and Delivery of Services

- A. The Board and Provider agree to monitor utilization and expenditures on a monthly basis. If expenditures are substantially above or below projection, Board and Provider may consider modifications to the specified rates of payment.
- B. The Board and Provider agree that total expenditures under this agreement combined with expenditures made to other Employment and Training Providers for the same services, may not exceed the total County allocation of \$156,325.00 in State and Federal funds made to the Board for this purpose.

III. Eligibility for Services

- A. Determination of eligibility shall be completed in accordance with procedures outlined in Exhibit A.
- B. Any change in eligibility will initiate a notice by either the Board or the Provider within 30 days to the other party; the participant will remain eligible for the Provider's services for six (6) months after termination from MFIP.
- C. Eligibility categories: MFIP registrants are defined as persons who have applied for MFIP services and payments, and who have been determined eligible by the Board for those services and payments.

IV. Payment Process

- A. The Board's obligation to make payment hereunder is subject to review by the Aitkin County Health and Human Service Department to insure that payment is for a referred individual and has not previously been made. Said review shall be the final determination of Board's payment obligation. Nothing herein shall limit the rights of either party to collect from the other any sums improperly paid or improperly withheld.
- B. Payment for MFIP services provided shall be made according to procedures outlined in Exhibit A.
- C. Board's obligation to make payment for MFIP services hereunder is subject to audit by Board or its duly authorized designee and said audit shall be the final determination of Board's payment obligation.
- D. Provider will promptly reimburse to Board any payments for MFIP received in excess of required payments hereunder.
- E. For MFIP, Board shall not be obligated to honor claims for, nor shall Provider claim for, any services furnished or costs incurred by Provider which are not specifically provided for hereunder or requested by Board in writing during the term of this Agreement.

V. Audit and Record Disclosure

The Provider shall provide the Board with the reports and comply with the audit and record requirements specified in Exhibit A under Audit and Record Disclosures.

VI. Safeguard of Client Information

- A. The use or disclosure by any party or of any private information concerning a client in a violation of any rule of confidentiality or for any purpose not directly connected with the administration of the Board's or the Provider's responsibility with respect to the Purchased Services is prohibited without the written consent of the client or responsible parent or guardian.
- B. Provider agrees to comply in all respects with the Minnesota Government Data Practices Act, Minn. Stat. Section 13.01-.48, and Provider further agrees to comply with any requests of Board which are necessitated by Board's obligations under said Act.

C. HIPAA COMPLIANCE

The parties agree to comply with all respects with the Health Insurance Portability and Accountability Act, Public Law 104-191 (HIPAA), and all rules, regulations and controls affected or promulgated pursuant thereto. The parties agree that as HIPAA and its rules and interpretations become effective, the parties shall execute amendments hereto, provide written assurances, implement policies and procedures, or take whatever other actions are necessary to comply with HIPAA. Should a party fail or refuse to honor its obligations pursuant to this section, the other party may terminate this Agreement with thirty (30) days written notice.

VII. Fair Hearing Appeal

Any determination, action, or inaction on the part of the Board relating to an individual's participation in the program is subject to the notice and hearing procedures in Minn. Stat. 256.045 and 268.86.

VIII. Equal Employment Opportunity and Civil Rights Clause

Provider agrees to comply with the Civil Rights Act of 1964, Executive Order No. 11246 as amended, the Minnesota Human Rights Act, and all applicable Federal and State laws, rules, regulations and orders prohibiting discrimination in employment, facilities and services. Provider shall not discriminate in employment, facilities and in the rendering of purchased services hereunder on the basis of race, color, religion, age, sex, disability, marital status, public assistance status, creed or national origin.

IX. Rehabilitation Act Clause

The Provider agrees to comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 USC 794) and all requirements imposed by the applicable HHS regulation (45 CFR Part 84), and all guidelines and interpretations issued pursuant thereto.

X. Bonding, Indemnity and Insurance Clause

- A. BONDING: The Provider will obtain and maintain at all times during the term of this Agreement, a fidelity bond covering the activities of its personnel authorized to receive or distribute monies in the amount of \$50,000.
- B. INDEMNITY: The Provider agrees it shall defend, indemnify and hold harmless the Board, its officers and employees against any and all liability, loss, costs, damages and expenses that the Board, its officers or employees may hereafter sustain, incur, or be required to pay arising out of the Provider's performance or failure to adequately perform its obligations pursuant to this Purchase of Service Agreement.
- C. INSURANCE: The following insurance must be maintained for the duration of this Agreement. A Certificate of Insurance for each policy must be on file with the Aitkin County Health and Human Services Department within ten (10) days of execution of this contract and before commencement of any work under this contract. Each certificate must include a thirty (30) day notice of cancellation, non-renewal, or material change to all named and additional insureds.

All insurance policies will be open to inspection by the Board, and copies of policies will be submitted to the County upon written request. All subcontractors shall provide evidence of similar coverage.

(1) General Liability Insurance

- (a) **\$500,000** for claims for wrongful death and each Person for other claims
\$1,500,000 Each Occurrence
Claims outside the scope of M.S. 466 \$2,000,000 per claim.
- (b) Policy shall include at least premise, operations, completed operations, independent contractors and subcontractors, and contractual liability.
- (c) Aitkin County must be named additional insured.

(2) Business Automobile Liability Insurance

- (a) **\$500,000** Each Person
\$1,500,000 Each Occurrence
Claims outside the scope of M.S. 466, \$2,000,000 per claim.
- (b) Must cover owned, non-owned and hired vehicles

(3) Workers' Compensation Per Statutory Requirements

- D. NONCOMPLIANCE: The Board reserves the right to rescind any contract not in compliance with these requirements and retains all right thereafter to pursue any legal remedies against Provider.

XI. Maintenance of Effort and Expansion of Services

Provider hereby certifies that the Federal funds to be used under this Agreement do not replace or supplant in any way State or local funds. Provider certifies that the amount to be expended in this Agreement results in increased expenditures by the Provider for services of the type being purchased to individuals of the type included under the Agreement.

XII. Conditions of the Parties' Obligations

- A. It is understood and agreed that in the event the reimbursement by the Board from State and Federal sources is not obtained and continued at an aggregate level sufficient to allow for the continued grant, the obligations of each party hereunder shall thereupon be terminated.
- B. Board may at any time evaluate the performance of Provider in regard to the terms of this Agreement to determine whether such performance merits continuation of this Agreement.
- C. Any alterations, variations, modifications or waivers of provisions of this agreement shall be valid only when they have been reduced to writing, duly signed, and attached to the original of this Agreement.
- D. In the event of a revision in Federal regulations which might make this Agreement ineligible for Federal financial participation, all parties will review this Agreement and renegotiate those items necessary to bring the Agreement into compliance with the new Federal regulations.
- E. Provider agrees to cooperate fully with Board and its designated representatives in the development and implementation of Provider's services. Evaluative data collected will be used by Board in its funding decisions and shall be shared with Provider and community.
- F. Provider agrees that in any reports, news releases, public service announcements or publications regarding Provider's program, Board will be identified as a funding source.

XIII. Subcontracting and Assignment

Provider may enter into subcontracts for the performance of any of the responsibilities contemplated under this Agreement, subject to the approval of the Board. All subcontracts shall be subject to the legal, fiscal and programmatic requirements of this contract. Provider shall continue to be responsible for the performance of the obligations of this Agreement, despite any subcontract.

XIV. Independent Contractor

Provider is an independent contractor and not an employee or agent of Board. No statement contained in this Agreement shall be construed so as to find Provider to be an employee or agent of Board. Provider, its officers, employees and agents shall be entitled to none of the rights, privileges or benefits of Board employees. Nothing contained herein is intended nor shall be construed as constituting Provider, its officers, employees or agents as the agent, representative or employee of Board for any purpose or in any manner, whatsoever.

XV. Cancellation, Default and Remedy

- A. This Agreement shall continue in effect until terminated by either party without cause, with 30 days advance, written notice delivered to the other party, served on the Director of Aitkin County Health and Human Services, 204 First Street NW, Aitkin, Minnesota 56431 on behalf of the Board; and on the Director of Northeast Minnesota Office of Job Training, 820 North 9th Street, PO Box 1028, Virginia, Minnesota 55792 on behalf of Provider.
- B. In the event of default by either party, the non-defaulting party may cancel this Agreement immediately by sending written notice of cancellation to the defaulting party at its principal business address, notwithstanding the provisions of Paragraph 15a above. The failure of the defaulting party, including the failure of any employee of the defaulting party, to abide by any of the terms, conditions or requirements expressed in this Agreement shall constitute a default if not corrected within ten (10) days of receipt of written notice of deficiency from Board.
- C. Waiver of any default shall not be deemed to be a waiver of any subsequent default. Waiver of breach of any provision of this Agreement shall not be construed to be a modification of the terms of this Agreement unless stated to be such in writing, signed by an authorized representative of Board upon resolution of Board.

XVI. Single Instrument, Legality

- A. It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Provider and Board relating to the subject matter hereof.
- B. The provisions of this Agreement are severable. If a court of law holds any paragraph, section, subdivision, sentence, clause or phrase of this Agreement to be contrary to law, or contrary to any rule or regulation having the force and effect of law, such ruling shall not affect the remaining portions of this Agreement. However, upon the occurrence of such event, the parties shall immediately meet to negotiate a revised Agreement which does not violate the above-referenced ruling.

IN WITNESS WHEREOF, Board and Provider agree that this contract is effective from January 1, 2013 to December 31, 2013.

PROVIDER
NORTHEAST MN OFFICE OF JOB TRAINING

AITKIN COUNTY BOARD
OF COMMISSIONERS

Chairman - Board of Directors

Mark Wedel, Chairperson

Printed Name of Signer

Date: _____

Date: _____

AITKIN COUNTY HEALTH & HUMAN
SERVICES DEPARTMENT

Executive Director

Thomas Burke, Director

Printed Name of Signer

Date: _____

Date: _____

Approved as to form and execution:

James Ratz
County Attorney

Date: _____

IMPLEMENTATION PROCEDURES

I. Methods of Determining Eligibility

- A. The participant has the responsibility of requesting and obtaining eligibility determination from the Aitkin County Health and Human Services Department before utilizing the services.
- B. The Aitkin County Health and Human Services Department shall determine MFIP eligibility in accordance with applicable Federal and State law.
- C. The Aitkin County Health and Human Services Department shall decide the eligibility of a participant within thirty (30) days of application for eligibility determination. The participant shall be notified of his/her eligibility status and will be referred to the Provider within the said thirty (30) day time period.
- D. Provider has the responsibility to confirm that a participant is eligible to receive service prior to providing service. Board will not be responsible for services provided to clients prior to eligibility determination.

II. Method of Payment Authorization

- A. The Provider agrees that all MFIP Services monies, including Community Work Experience Program (CWEP), Grant Diversion and On-The-Job Training, received under this contract shall be expended to provide services as specified in Exhibit B.

The Provider shall submit on or before the 10th working day of the month for the previous month an invoice listing;

- B. MFIP Program outcomes achieved, as specified in paragraph 2 of the contract;
 - 1. Number of persons achieving each outcome;
 - 2. Rate per outcome; and

Provider shall include a listing of MFIP participants served and employment status.

The Board agrees to pay within thirty (30) days of receipt of these reports.

- C. Allowable program components are:

- 1. Orientation - stating the need for immediate employment; rights, responsibilities, and obligations

2. Employment Overview - work focus of MFIP; job search resources; financial program review
3. Initial Assessment - assess the job seeker's ability to obtain and retain employment
4. Job Support Plan - specify job search activities
5. Secondary Assessment - completed for participants who have barriers to employment
6. Employment Plan - participant's overall employment goal and steps needed to achieve the goal
7. Job Readiness Activities - help participants be familiar with general work place expectations
8. Job placement - job development and job placement activities by Provider
9. On-the-Job Training - agreement with Provider and employer for client training needed for employment
10. Grant Diversion - provides subsidies to employers as an incentive to hire participants
11. Community Work Experience (CWEP) - enhance participants employability through meaningful work experience
12. Educational Activity - specific to the needs of the participant. This includes:
 - a. High school, GED classes
 - b. Basic and remedial education that will provide a person with a basic literacy level in order to fulfill an employment goal (basic education is instruction to provide these educational skills for the first time; remedial education involves repetition of such instruction previously given to the participant); and
 - c. Education in English proficiency for a person who is not sufficiently competent to speak, read, or write the English language to allow employment commensurate with his/her employability goal.
 - d. Post-secondary education – only on a very limited basis and with specific supporting documentation. Any education plan more than 12 months needs approval by the County agency.

- C. The following types of expenditures are explicitly recognized as administrative costs for MFIP Services, Community Work Experience Program, AFDC Grant Diversion and On-the-Job Training (administrative costs shall not exceed 7.5% of the total cost):

All other administrative costs, including overhead expenditures, subsystem costs, personnel costs (salaries and benefits) for staff not directly providing component services to participants (such as second-line supervisors and above), personnel administration costs, costs for processing and managing the Injury Protection Program (IPP) including investigations, medical reports or evaluations and all other indirect costs;

- D. Provider shall submit a monthly invoice to Board by the 10th day of each month listing the number of MFIP participants in each service category as specified in 2 A, B, C, and D of the contract. Provider also will submit a listing of the names of each MFIP participant by service category.
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- C. Provider agrees to allow personnel of the Board and Aitkin County Health and Human Services Department, the State Auditor and, if appropriate, the Minnesota Department of Economic Security, access to Provider's records at reasonable hours in order to exercise their right to audit Provider's records and to monitor services.
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COMMUNITY WORK EXPERIENCE PROGRAM (CWEP): helps participants achieve self-sufficiency by enhancing their employability through meaningful work experience and development of job search skills. CWEP placements will be used in conjunction with skills training, job search, job readiness.

Employment counselors will assist the placement and monitor the job seeker's progress at each location. Work sites developed under this section are limited to projects that serve a useful public service such as: health, social service, environmental protection, education, urban and rural development, and redevelopment, welfare, recreation, public facilities, public safety, community service, service to aged or disabled citizens, and child care. To the extent possible, prior training and experience of a recipient must be used in making appropriate work experience assignments.

GRANT DIVERSION: uses the MFIP Grant to provide wage subsidies to employers as an incentive to hire MFIP recipients. Grant Diversion is one of the optional Employment and Training services. Priority shall be given to employers who offer permanent full-time employment positions in the private, non-profit or public sector and who agree to hire individuals beyond the period of subsidized employment.

COORDINATION: Employment counselors shall coordinate with, and refer job seekers to, other community agencies or groups for training, social and support services, including, but not limited to other partners of the Workforce Centers.

These services shall be provided in a manner that complies with the Employment and Training Program Sections of the current Local Service Unit Plan for Aitkin County and State Policy as specified in relevant DHS/DES Instructional Bulletins.

Consolidated MFIP Support Services Grant 2013 Allocation

Allocation: 208,614 **Admin Limit:** 15,646

MFIP Employment Services:

Original

12 Month Allocation	115,001.00
Administration	15,646.00
	<hr/>
	130,647.00

Per Service Provider 65,323.50

**Qtrly Payments per Provider=
16,330.88**

DWP Employment Services:

12 Month Allocation 25,678.00

Per Service Provider 12,839.00

**Qtrly Payments per Provider=
3,209.75**

Crisis:

12 Month Allocation 25,000.00

County Administration:

12 Month Allocation 27,289.00

208,614.00

AMBULANCE SERVICE CONTRACT

VII. - B. - 1.

THIS AGREEMENT between the Aitkin County Board of Commissioners, Aitkin, Minnesota, hereinafter referred to as the "County" and McGregor Area Ambulance Service, PO Box 100, McGregor, Minnesota, 55760, hereinafter referred to as the "Contractor". The Contractor agrees to furnish ambulance service in Aitkin County, Minnesota, under the following terms and conditions:

1. Contractor agrees to furnish efficient and prompt ambulance service to all persons desiring the same within the state license service area, and shall have not less than one (1) ambulance in service capable of rendering efficient service. Ambulances shall be equipped in accordance with the current State of Minnesota regulations and licensure.
2. Contractor shall man ambulances with personnel in sufficient number to furnish service adequate to the needs of calls or emergencies normally encountered. Ambulance drivers and attendants shall have received training, which meet the requirements of Minnesota Statutes.
3. Ambulance service shall be provided by the Contractor on a twenty-four (24) hour, seven (7) day basis. The Contractor shall immediately respond to requests for service initiated by any person.
4. All patients shall be taken to hospitals as determined by applicable Minnesota Statutes and/or Rules. All patients shall be taken to the hospital of their choice within a reasonable distance if said choice is not contrary to applicable Minnesota Statutes and/or Rules. Should the patient indicate a preference, said patient shall be taken to the hospital where the appropriate care can be provided.
5. The County agrees to pay the Contractor a fee of \$45.00 per request for service, and \$55.00 per no load runs, to a maximum of \$13,000.00 per calendar year. This agreement shall not include transfers from the local hospital to other tertiary care facilities outside the County. The County will reimburse the Contractor on a monthly basis after receiving a monthly receipt of ambulance runs in Aitkin County. This itemization will include dates of service, type of service (emergency or no load run). In addition, the Contractor shall be privileged to charge each person requesting transportation a reasonable service fee in accordance with a schedule from time to time set by the Contractor.
6. Each of the parties shall defend, indemnify, save and hold the other party harmless from the liability arising out of the actions of the indemnifying party in connection with the operation of the ambulances or any other services performed under the terms of the contract.
7. The Contractor does further agree that, in order to protect itself as well as the Agency under the indemnity agreement provision hereinabove set forth, it will, at all times during this contract, have and keep in force a liability insurance policy **naming the County as an insured or additional insured** in the amount at least equal to the maximum liability limits set forth in Minnesota Statutes 466.04, subd. 1(a)(3), of at least **\$500,000** bodily injury per occurrence, up to **\$1,500,000.00** per accident and **\$50,000.00** property damage and agrees to provide a certificate of insurance or other document demonstrating that such insurance has been procured to the County.

8. Contractor shall also procure motor vehicle insurance and worker's compensation insurance as required under applicable Minnesota laws and agrees to provide certificates of insurance or other documents demonstrating that such insurance has been procured.
9. The term of the contract shall be for a period of twelve (12) months, commencing not later than January 1, 2013, and terminating December 31, 2013.
10. The Contractor shall not sell, assign, or in any way divest itself of its interest herein without prior written notice by registered mail of at least 120 days to the County.
11. The Contractor agrees to comply in all requests with the requirements of the State of Federal laws or City Ordinances which may be applicable hereto in the operation of its ambulance service.
12. Either party may cancel this Agreement, with or without cause, upon written notice by registered mail of at least 120 days.
13. All notices to either party must be in writing mailed by certified mail, return receipt requested, to the address of each party. Notices are effective on the date of mailing.
14. That said McGregor Volunteer Ambulance Service shall submit to the County of Aitkin, an annual complete itemized financial statement detailing the ambulance activities, by February 1, 2014. Document shall be mailed to:

TOM BURKE, DIRECTOR
 AITKIN COUNTY HEALTH & HUMAN SERVICES
 204 1st STREET N.W.
 AITKIN, MN 56431

 Tom Burke, Director of ACH&HS

 Date

 Chairperson – Aitkin County Board of Commissioners

 Date

 Contractor and Title

 Date

Printed Name of Contractor signing this document

Approved as to form and execution:

 Aitkin County Attorney

 Date

AMBULANCE SERVICE CONTRACT

VII. - B. - 2.

THIS AGREEMENT between the Aitkin County Board of Commissioners, Aitkin, Minnesota, hereinafter referred to as the "County" and Meds-I Ambulance Service, 1328 NW 5th Street, Grand Rapids, Minnesota, 55744, hereinafter referred to as the "Contractor". The Contractor agrees to furnish ambulance service in Aitkin County, Minnesota, under the following terms and conditions:

1. Contractor agrees to furnish efficient and prompt ambulance service to all persons desiring the same within the state license service area, and shall have not less than one (1) ambulance in service capable of rendering efficient service. Ambulances shall be equipped in accordance with the current State of Minnesota regulations and licensure.
2. Contractor shall man ambulances with personnel in sufficient number to furnish service adequate to the needs of calls or emergencies normally encountered. Ambulance drivers and attendants shall have received training, which meet the requirements of Minnesota Statutes.
3. Ambulance service shall be provided by the Contractor on a twenty-four (24) hour, seven (7) day basis. The Contractor shall immediately respond to requests for service initiated by any person.
4. All patients shall be taken to hospitals as determined by applicable Minnesota Statutes and/or Rules. All patients shall be taken to the hospital of their choice within a reasonable distance if said choice is not contrary to applicable Minnesota Statutes and/or Rules. Should the patient indicate a preference, said patient shall be taken to the hospital where the appropriate care can be provided.
5. The County agrees to pay the Contractor a fee of \$20.00 per request for service, and \$55.00 per no load runs up to a maximum of 2000.00 per year. This agreement shall not include transfers from the local hospital to other tertiary care facilities outside the County. The County will reimburse the Contractor on a monthly basis after receiving a monthly receipt of ambulance runs in Aitkin County. This itemization will include dates of service, type of service (emergency or no load run). In addition, the Contractor shall be privileged to charge each person requesting transportation a reasonable service fee in accordance with a schedule from time to time set by the Contractor.
6. Each of the parties shall defend, indemnify, save and hold the other party harmless from the liability arising out of the actions of the indemnifying party in connection with the operation of the ambulances or any other services performed under the terms of the contract.
7. The Contractor does further agree that, in order to protect itself as well as the Agency under the indemnity agreement provision hereinabove set forth, it will, at all times during this contract, have and keep in force a liability insurance policy **naming the County as an insured or additional insured** in the amount at least equal to the maximum liability limits set forth in Minnesota Statutes 466.04, subd. 1(a)(3), of at least **\$500,000** bodily injury per occurrence, up to **\$1,500,000.00** per accident and \$50,000.00 property damage and agrees to provide a certificate of insurance or other document demonstrating that such insurance has been procured to the County.

8. Contractor shall also procure motor vehicle insurance and worker's compensation insurance as required under applicable Minnesota laws and agrees to provide certificates of insurance or other documents demonstrating that such insurance has been procured.
9. The term of the contract shall be for a period of twelve (12) months, commencing not later than January 1, 2013, and terminating December 31, 2013.
10. The Contractor shall not sell, assign, or in any way divest itself of its interest herein without prior written notice by registered mail of at least 120 days to the County.
11. The Contractor agrees to comply in all requests with the requirements of the State of Federal laws or City Ordinances which may be applicable hereto in the operation of its ambulance service.
12. Either party may cancel this Agreement, with or without cause, upon written notice by registered mail of at least 120 days.
13. All notices to either party must be in writing mailed by certified mail, return receipt requested, to the address of each party. Notices are effective on the date of mailing.
14. That said Meds-1 Ambulance Service shall submit to the County of Aitkin, an annual complete itemized financial statement detailing the ambulance activities, by February 1, 2014. Document shall be mailed to:

TOM BURKE, DIRECTOR
 AITKIN COUNTY HEALTH & HUMAN SERVICES
 204 1st STREET N.W.
 AITKIN, MN 56431

 Tom Burke, Director of ACH&HS

 Date

 Chairperson – Aitkin County Board of Commissioners

 Date

 Contractor and Title

 Date

Printed Name of Contractor signing this document

Approved as to form and execution:

 Aitkin County Attorney

 Date

AMBULANCE SERVICE CONTRACT

VII. - B. - 3.

THIS AGREEMENT between the Aitkin County Board of Commissioners, Aitkin, Minnesota, hereinafter referred to as the "County" and Mille Lacs Health System Ambulance, 200 North Elm Street, PO Box A, Onamia, Minnesota, 56359, hereinafter referred to as the "Contractor". The Contractor agrees to furnish ambulance service in Aitkin County, Minnesota, under the following terms and conditions:

1. Contractor agrees to furnish efficient and prompt ambulance service to all persons desiring the same within the state license service area, and shall have not less than one (1) ambulance in service capable of rendering efficient service. Ambulances shall be equipped in accordance with the current State of Minnesota regulations and licensure.
2. Contractor shall man ambulances with personnel in sufficient number to furnish service adequate to the needs of calls or emergencies normally encountered. Ambulance drivers and attendants shall have received training, which meet the requirements of Minnesota Statutes.
3. Ambulance service shall be provided by the Contractor on a twenty-four (24) hour, seven (7) day basis. The Contractor shall immediately respond to requests for service initiated by any person.
4. All patients shall be taken to hospitals as determined by applicable Minnesota Statutes and/or Rules. All patients shall be taken to the hospital of their choice within a reasonable distance if said choice is not contrary to applicable Minnesota Statutes and/or Rules. Should the patient indicate a preference, said patient shall be taken to the hospital where the appropriate care can be provided.
5. The County agrees to pay the Contractor a fee of \$20.00 per request for service, and \$55.00 per no load runs up to a maximum of \$2000.00. **This agreement shall not include transfers from the local hospital to other tertiary care facilities outside the County.** The County will reimburse the Contractor on a monthly basis after receiving a monthly receipt of ambulance runs in Aitkin County. This itemization will include dates of service, type of **service (emergency or no load run)**. In addition, the Contractor shall be privileged to charge each person requesting transportation a reasonable service fee in accordance with a schedule from time to time set by the Contractor.
6. Each of the parties shall defend, indemnify, save and hold the other party harmless from the liability arising out of the actions of the indemnifying party in connection with the operation of the ambulances or any other services performed under the terms of the contract.
7. The Contractor does further agree that, in order to protect itself as well as the Agency under the indemnity agreement provision hereinabove set forth, it will, at all times during this contract, have and keep in force a liability insurance policy **naming the County as an insured or additional insured** in the amount at least equal to the maximum liability limits set forth in Minnesota Statutes 466.04, subd. 1(a)(3), of at least **\$500,000** bodily injury per occurrence, up to **\$1,500,000.00** per accident and \$50,000.00 property damage and agrees to provide a certificate of insurance or other document demonstrating that such insurance has been procured to the County.

8. Contractor shall also procure motor vehicle insurance and worker's compensation insurance as required under applicable Minnesota laws and agrees to provide certificates of insurance or other documents demonstrating that such insurance has been procured.
9. The term of the contract shall be for a period of twelve (12) months, commencing not later than January 1, 2013, and terminating December 31, 2013.
10. The Contractor shall not sell, assign, or in any way divest itself of its interest herein without prior written notice by registered mail of at least 120 days to the County.
11. The Contractor agrees to comply in all requests with the requirements of the State of Federal laws or City Ordinances which may be applicable hereto in the operation of its ambulance service.
12. Either party may cancel this Agreement, with or without cause, upon written notice by registered mail of at least 120 days.
13. All notices to either party must be in writing mailed by certified mail, return receipt requested, to the address of each party. Notices are effective on the date of mailing.
14. That said Mille Lacs Health System Ambulance shall submit to the County of Aitkin, an annual complete itemized financial statement detailing the ambulance activities, by February 1, 2014. Document shall be mailed to:

TOM BURKE, DIRECTOR
 AITKIN COUNTY HEALTH & HUMAN SERVICES
 204 1st STREET N.W.
 AITKIN, MN 56431

 Tom Burke, Director of ACH&HS _____
 Date

 Chairperson – Aitkin County Board of Commissioners _____
 Date

 Contractor and Title _____
 Date

Printed Name of Contractor signing this document

Approved as to form and execution:

 Aitkin County Attorney _____
 Date

AMBULANCE SERVICE CONTRACT

THIS AGREEMENT between the Aitkin County Board of Commissioners, Aitkin, Minnesota, hereinafter referred to as the "County" and d/b/a North Memorial Medical Transportation Services, Robbinsdale, Minnesota, hereinafter referred to as the "Contractor". The Contractor agrees to furnish ambulance service in Aitkin County, Minnesota, under the following terms and conditions:

1. Contractor agrees to furnish efficient and prompt ambulance service to all persons desiring the same within the state license service area, and shall have not less than one (1) ambulance in service capable of rendering efficient service. Ambulances shall be equipped in accordance with the current State of Minnesota regulations and licensure.
2. Contractor shall man ambulances with personnel in sufficient number to furnish service adequate to the needs of calls or emergencies normally encountered. Ambulance drivers and attendants shall have received training, which meet the requirements of Minnesota Statutes.
3. Ambulance service shall be provided by the Contractor on a twenty-four (24) hour, seven (7) day a week basis. The Contractor shall immediately respond to requests for service initiated by any person.
4. All patients shall be taken to hospitals as determined by applicable Minnesota Statutes and/or Rules. All patients shall be taken to the hospital of their choice within a reasonable distance if said choice is not contrary to applicable Minnesota Statutes and/or Rules. Should the patient indicate a preference, said patient shall be taken to the hospital where the appropriate care can be provided.
5. The County agrees to pay the Contractor a fee of \$45.00 per request for service, and only if a patient is transported, to a maximum of \$20,000.00 per calendar year. This agreement shall not include transfers from the local hospital to other tertiary care facilities outside the County. The County will reimburse the Contractor on a monthly basis after receiving a monthly receipt of ambulance runs in Aitkin County. This itemization will include dates of service, type of service (emergency or no load run). In addition, the Contractor shall be privileged to charge each person requesting transportation a reasonable service fee in accordance with a schedule from time to time set by the Contractor.
6. Each of the parties shall defend, indemnify, save and hold the other party harmless from the liability arising out of the actions of the indemnifying party in connection with the operation of the ambulances or any other services performed under the terms of the contract.
7. The Contractor does further agree that, in order to protect itself as well as the Agency under the indemnity agreement provision hereinabove set forth, it will, at all times during this contract, have and keep in force a liability insurance policy **naming the County as an insured or additional insured** in the amount at least equal to the maximum liability limits set forth in Minnesota Statutes 466.04, subd. 1(a)(3), of at least **\$500,000** bodily injury per occurrence, up to **\$1,500,000.00** per accident and \$50,000.00 property damage and agrees to provide a certificate of insurance or other document demonstrating that such insurance has been procured to the County.

8. Contractor shall also procure motor vehicle insurance and worker's compensation insurance as required under applicable Minnesota laws and agrees to provide certificates of insurance or other documents demonstrating that such insurance has been procured.
9. The term of the contract shall be for a period of twelve (12) months, commencing not later than January 1, 2013, and terminating December 31, 2013.
10. The Contractor shall not sell, assign, or in any way divest itself of its interest herein without prior written notice by registered mail of at least 120 days to the County.
11. The Contractor agrees to comply in all requests with the requirements of the State of Federal laws or City Ordinances which may be applicable hereto in the operation of its ambulance service.
12. Either party may cancel this Agreement, with or without cause, upon written notice by registered mail of at least 120 days.
13. All notices to either party must be in writing mailed by certified mail, return receipt requested, to the address of each party. Notices are effective on the date of mailing.
14. That said North Memorial Medical Transportation Services shall submit to the County of Aitkin, an annual complete itemized financial statement detailing the ambulance activities, February 1, 2014. Document shall be mailed to:

TOM BURKE, DIRECTOR
 AITKIN COUNTY HEALTH & HUMAN SERVICES
 204 1st STREET N.W.
 AITKIN, MN 56431

 Tom Burke, Director of ACH&HS

 Date

 Chairperson – Aitkin County Board of Commissioners

 Date

 Contractor and Title

 Date

Printed Name of Contractor signing this document

Approved as to form and execution:

 Aitkin County Attorney

 Date

PURCHASE OF SERVICE AGREEMENT

VII. - C. - 1.

The Aitkin County Health & Human Services Courthouse, Aitkin, Minnesota 56431, hereafter referred to as the Department and **George Tetreault, MA, LP, 11614 River Vista Drive, Baxter, MN 56425**, hereafter referred to as Contractor; enter into this agreement for the period from **January 1, 2013, to December 31, 2013**.

WHEREAS, Minnesota Statutes, section 245.461 to 245.486 and 245.487 to 245.4888 establishes the Comprehensive Adult Mental Health Act and the Comprehensive Children's Mental Health Act; and

WHEREAS, the Department is required to provide Mental Health services in accordance with the Comprehensive Mental Health Act and the Comprehensive Children's Mental Health Act; and

WHEREAS, the Department pursuant to Minnesota statutes, section 373.01, 373.02, 245.465(4), and 256E.08 wishes to purchase mental health services from Contractor; and

WHEREAS, the Contractor is an autonomous mental health provider in private practice, and is qualified and willing to perform such services;

NOW THEREFORE, in consideration of the mutual understandings and agreements set forth, the Department and Contractor agree as follows:

I SERVICES TO BE PROVIDED OR PURCHASED

The Department agrees to purchase and the Contractor agrees to furnish services as listed in Attachment A.

Diagnostic assessments of children, including those aged 0-3.

Parenting capacity assessments

Case consultation

II COST AND DELIVERY OF PURCHASED SERVICES

Statements will be submitted by the 10th of each month in the approved format detailing services provided in the prior month. Payment by the Department to Contractor will be by the end of the month and will be based on actual billing. **George Tetreault** will bill the appropriate third-party payer if the client is covered by a health insurance plan.

III DELIVERY OF CARE AND SERVICES:

Except as otherwise provided herein, Contractor shall maintain in all respects its present control over and autonomy with respect to:

1. The application of its intake procedures and requirements to clients.

2. The methods, times, means and personnel for furnishing Purchased Services to eligible clients.
3. The determination of when to terminate the furnishing of Purchased Services to eligible clients.

Nothing in this agreement shall be construed as requiring Contractor to provide or continue Purchased Services to or for any eligible clients.

IV AUDIT AND RECORD DISCLOSURE

1. Allow personnel of the Department, the Minnesota Department of Human Services, and the Department of Health and Human Services, access to the Contractor's records, in accordance with state and federal laws and regulations, at reasonable hours in order to exercise their responsibility to monitor the services.
2. Maintain records for audit purposes.
3. Comply with Minnesota Code for Agency Rule - Minnesota Department of Public Welfare and the Minnesota Government Practice Act, M.S. 15.1611 - 16.1698. (Suppl. 1979)

V SAFEGUARD OF CLIENT INFORMATION:

1. The use or disclosure by any party of information concerning an eligible client in violation of any rule of confidentiality for any purpose not directly connected with the administration of the Department's or Contractor's responsibility with respect to the Purchased Services hereunder is prohibited except on written consent of such eligible client or his/her responsible parent or guardian.
2. The Contractor assures compliance with Minnesota Government Data Practices Act, in accordance with Minnesota Statutes, section 13.46, subdivision 10, paragraph (d).

VI EQUAL EMPLOYMENT OPPORTUNITY AND CIVIL RIGHTS CLAUSE:

The Contractor agrees to comply with the Civil Rights Act of 1964, Title VII (43 USC 2000e), including Executive Order No. 11246, and Title VI (42 USC 2000d).

VII FAIR HEARING AND GRIEVANCE PROCEDURES:

The Contractor agrees that a fair hearing and grievance procedure will be established.

VIII BONDING, INDEMNITY, AND INSURANCE CLAUSE:

1. The Contractor shall save and hold the County of Aitkin and the Department harmless from all liability for damages to persons or property arising out of the services performed under the terms of the contract. The Contractor shall indemnify the County of Aitkin and the Department for any liability assessed to the county and the Department on account of the services performed under the terms of the contract. The Contractor agrees to purchase liability insurance naming Aitkin County Department of Health & Human Services as an additional insured in an amount at least equal to the maximum liability limits set forth in Minnesota Statutes, 466.04, Subd.1, of \$500,000 per person and \$1,500,000 per occurrence and agrees to provide the County of Aitkin and the Department a certificate of insurance or other document demonstrating that such insurance has been procured. Contractor shall provide proof of insurance prior to commencement of Contractor's performance under this agreement.
2. Insurance: The Contractor does further agree that, in order to protect himself as well as the Department under the indemnity agreement provision hereinabove set forth, it will, at all times during the term of this contract, have and keep in force a liability insurance policy in the amount of \$1,500,000.

IX CONDITIONS OF THE PARTIES OBLIGATIONS:

1. Before the termination date specified in the Introduction of this agreement, the Department may evaluate the performance of the Contractor in regard to the terms of this agreement to determine whether such performance merits renewal of this agreement.
2. Any alterations, variations, modifications or waivers of provisions of this agreement shall be valid only when they have been reduced to writing, duly signed, and attached to the original of this agreement.
3. No claim for services furnished by the Contractor, not specifically provided in the agreement, will be allowed by the Department, nor shall the Contractor do any work or furnish any material not covered by the agreement unless this is approved in writing by the Department. Such approval shall be considered to be a modification of the agreement.
4. If the Department determines that funds are not being administered in accordance with the approved plan and budget, they may be withdrawn after reasonable notice to the Contractor. It is understood and agreed that the parties do not anticipate that Contractor will administer funds as a result of this agreement.
5. In the event that there is a revision of Federal regulations which might make this agreement ineligible for Federal financial participation, all parties will review the

agreement and renegotiate those items necessary to bring the agreement into compliance with the new Federal regulations.

6. In accordance with Minnesota Statutes, Section 245.466, Subd.3 (1), the Commissioner of Minnesota Department of Human Services is a third party beneficiary to this contract.

X SUBCONTRACTING

The Contractor shall not enter into subcontracts for any of the work contemplated under this agreement without written approval of the Department. All subcontracts shall be subject to the requirements of this contract. The Contractor shall be responsible for the performance of any subcontractor.

XI COMPLIANCE WITH THE CLEAN AIR ACT:

The Contractor certifies that it meets lawful conditions of the Clean Air Act, as required by 45 CFR 228.70 and 74.159 (4).

XII MISCELLANEOUS

1. Entire Agreement: It is understood and agreed that the entire agreement of the parties contained herein and that this agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Contractor and Aitkin County Health and Human Services Department relating to the subject matter hereof.
2. This contract may be terminated or renegotiated upon 30 days written notification by either party.
3. **George Tetreault** agrees to provide Aitkin County Health & Human Services, (attached to the contract):
 - A. Verification of professional qualifications and licensure. (Attachment B).
4. Program and fiscal records shall be retained in the Contractor facility for a minimum of five years.
5. This contract may be extended for a period of six months at the option of the County of Aitkin. If the county desires to extend the term of the contract, it shall notify the Contractor in writing at least sixty days before the expiration of the contract. All terms of this contract will remain in effect pending execution of a contract amendment, execution of new contract or notice of termination.

IN WITNESS WHEREOF the Department (Aitkin County Health & Human Services) and the Contractor (**George Tetreault**) have executed this agreement as of the day and year first above written:

BY: _____
Thomas Burke, Director
Aitkin County Health & Human Services

DATE: _____

BY: _____
Mark Wedel, Chairperson
Aitkin County Health & Human Services Board

DATE: _____

BY: _____
George Tetreault, MA, LP

DATE: _____

APPROVED AS TO FORM AND EXECUTION

BY: _____
County Attorney or Assistant

DATE: _____

COST & DELIVERY OF PURCHASED SERVICES

Diagnostic Assessment \$90.00/hour

Parenting Capacity Assessment \$90.00/hour

Case Consultation \$90.00/hour

PURCHASE OF SERVICE AGREEMENT

The Aitkin County Health & Human Services Courthouse, Aitkin, Minnesota 56431, hereafter referred to as the Department and CORE Professional Services, P.A., 617 Oak Street, Brainerd, MN 56401, hereafter referred to as Contractor, enter into this agreement for the period from January 1, 2013, to December 31, 2013.

WHEREAS, Minnesota Statutes, section 245.461 to 245.486 and 245.487 to 245.4888 establishes the Comprehensive Adult Mental Health Act and the Comprehensive Children's Mental Health Act; and

WHEREAS, the Department is required to provide Mental Health services in accordance with the Comprehensive Mental Health Act and the Comprehensive Children's Mental Health Act; and

WHEREAS, the Department pursuant to Minnesota statutes, section 373.01, 373.02, 245.465(4), and 256E.08 wishes to purchase mental health services from multi-disciplinary service Contractor; and

WHEREAS, the Contractor is an autonomous mental health provider in private practice, and in multiple disciplines and is qualified and willing to perform such services;

NOW THEREFORE, in consideration of the mutual understandings and agreements set forth, the Department and Contractor agree as follows:

I SERVICES TO BE PROVIDED OR PURCHASED

The Department agrees to purchase and the Contractor agrees to furnish services as listed in Attachment A.

Psychological evaluations and tests ordered by the court system will be subject to review by the Department to determine whether said evaluations and tests appropriately fall under the terms of this agreement. If Department determines that said evaluations and tests fall outside the scope of this agreement, Contractor will be notified upon referral by Department.

II COST AND DELIVERY OF PURCHASED SERVICES

Statements will be submitted by the 10th of each month in the approved format detailing services provided in the prior month. Payment by the Department to Contractor will be by the end of the month and will be based on actual billing.

III DELIVERY OF CARE AND SERVICES:

Except as otherwise provided herein, Contractor shall maintain in all respects its present control over and autonomy with respect to:

1. The application of its intake procedures and requirements to clients.

2. The methods, times, means and personnel for furnishing Purchased Services to eligible clients.
3. The determination of when to terminate the furnishing of Purchased Services to eligible clients.

Nothing in this agreement shall be construed as requiring Contractor to provide or continue Purchased Services to or for any eligible clients.

IV AUDIT AND RECORD DISCLOSURE

1. Allow personnel of the Department, the Minnesota Department of Human Services, and the Department of Health and Human Services, access to the Contractor's records, in accordance with state and federal laws and regulations, at reasonable hours in order to exercise their responsibility to monitor the services.
2. Maintain records at CORE for audit purposes.
3. Comply with Minnesota Code for Agency Rule - Minnesota Department of Public Welfare and the Minnesota Government Practice Act, M.S. 15.1611 - 16.1698. (Suppl. 1979)

V SAFEGUARD OF CLIENT INFORMATION:

1. The use or disclosure by any party of information concerning an eligible client in violation of any rule of confidentiality of for any purpose not directly connected with the administration of the Department's or Contractor's responsibility with respect to the Purchased Services hereunder is prohibited except on written consent of such eligible client or his/her responsible parent or guardian.
2. The individual employed by the Contractor who is designated to assure compliance with Minnesota Government Data Practices Act, in accordance with Minnesota Statutes, section 13.46, subdivision 10, paragraph (d), shall be Frank Weber. Contractor reserves the right to designate an alternate individual to assure such compliance by written notice to Department.

VI EQUAL EMPLOYMENT OPPORTUNITY AND CIVIL RIGHTS CLAUSE:

The Contractor agrees to comply with the Civil Rights Act of 1964, Title VII (43 USC 2000e), including Executive Order No. 11246, and Title VI (42 USC 2000d).

VII FAIR HEARING AND GRIEVANCE PROCEDURES:

The Contractor agrees that a fair hearing and grievance procedure will be established.

VIII BONDING, INDEMNITY, AND INSURANCE CLAUSE:

1. The Contractor shall save and hold the County of Aitkin and the Department harmless from all liability for damages to persons or property arising out of the services performed under the terms of the contract. The Contractor shall indemnify the County of Aitkin and the Department for any liability assessed to the county and the Department on account of the services performed under the terms of the contract. The Contractor agrees to purchase liability insurance naming Aitkin County Department of Health & Human Services as an additional insured in an amount at least equal to the maximum liability limits set forth in Minnesota Statutes, 466.04, Subd.1, of **\$500,000** per person and **\$1,500,000** per occurrence and agrees to provide the County of Aitkin and the Department a certificate of insurance or other document demonstrating that such insurance has been procured. Contractor shall provide proof of insurance prior to commencement of Contractor's performance under this agreement.
2. Insurance: The Contractor does further agree that, in order to protect itself as well as the Department under the indemnity agreement provision hereinabove set forth, it will, at all times during the term of this contract, have and keep in force a liability insurance policy in the amount of \$1,000,000.

IX CONDITIONS OF THE PARTIES' OBLIGATIONS:

1. Before the termination date specified in the Introduction of this agreement, the Department may evaluate the performance of the Contractor in regard to the terms of this agreement to determine whether such performance merits renewal of this agreement.
2. Any alterations, variations, modifications or waivers of provisions of this agreement shall be valid only when they have been reduced to writing, duly signed, and attached to the original of this agreement.
3. No claim for services furnished by the Contractor, not specifically provided in the agreement, will be allowed by the Department, nor shall the Contractor do any work or furnish any material not covered by the agreement unless this is approved in writing by the Department. Such approval shall be considered to be a modification of the agreement.
4. If the Department determines that funds are not being administered in accordance with the approved plan and budget, they may be withdrawn after reasonable notice to the Contractor. It is understood and agreed that the parties do not anticipate that Contractor will administer funds as a result of this agreement.
5. In the event that there is a revision of Federal regulations which might make this agreement ineligible for Federal financial participation, all parties will review the agreement and renegotiate those items necessary to bring the agreement into compliance with the new Federal regulations.

6. In accordance with Minnesota Statutes, Section 245.466, Subd.3 (1), the Commissioner of Minnesota Department of Human Services is a third party beneficiary to this contract.

X SUBCONTRACTING

The Contractor shall not enter into subcontracts for any of the work contemplated under this agreement without written approval of the Department. All subcontracts shall be subject to the requirements of this contract. The Contractor shall be responsible for the performance of any subcontractor.

XI COMPLIANCE WITH THE CLEAN AIR ACT:

The Contractor certifies that it meets lawful conditions of the Clean Air Act, as required by 45 CFR 228.70 and 74.159 (4).

XII MISCELLANEOUS

1. Entire Agreement: It is understood and agreed that the entire agreement of the parties contained herein and that this agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Contractor and Aitkin County Health and Human Services Department relating to the subject matter hereof.
2. This contract may be terminated or renegotiated upon 30 days written notification by either party.
3. CORE agrees to provide Aitkin County Health & Human Services, (attached to the contract):
 - A. Description of staffing, including job descriptions and professional qualifications of all personnel under this agreement (Attachment B).
4. Program and fiscal records shall be retained in the Contractor facility for a minimum of five years.
5. This contract may be extended for a period of six months at the option of the County of Aitkin. If the county desires to extend the term of the contract, it shall notify the Contractor in writing at least sixty days before the expiration of the contract. All terms of this contract will remain in effect pending execution of a contract amendment, execution of new contract or notice of termination.

IN WITNESS WHEREOF the Department (Aitkin County Health & Human Services) and the Contractor (CORE Professional Services, P.A.) have executed this agreement as of the day and year first above written:

BY: _____
Aitkin County Health & Human Services Director

DATE: _____

BY: _____
Aitkin County Health & Human Services Board Chairperson

DATE: _____

BY: _____
CORE Professional Services, P.A. President

DATE: _____

APPROVED AS TO FORM AND EXECUTION

BY: _____
County Attorney or Assistant

DATE: _____

COST & DELIVERY OF PURCHASED SERVICES

Case Consultation \$90.00/hour

Between a member of CORE staff and an outside professional (listed below) regarding a client who is active in our agency. This includes phone and/or in-person contact. Outside professional is defined as:

- a) Social Workers at Aitkin County Health & Human Services
- 2) Probation Officer
- 3) Aitkin County Sheriff's Dept.
- 4) Aitkin County Attorney
- 5) Guardian Ad Litem

Clinical Supervision \$90.00/hour

Pre-Petition Screens \$90.00/hour

Psychological Assessment Flat Rate \$550.00

PURCHASE OF SERVICE AGREEMENT

The Aitkin County Health & Human Services Courthouse, Aitkin, Minnesota 56431, hereafter referred to as the Department and Northern Psychiatric Associates, 7115 Forthun Road, Suite 105, Baxter, MN 56425-8598, hereafter referred to as Contractor; enter into this agreement for the period from January 1, 2013, to December 31, 2013.

WHEREAS, Minnesota Statutes, section 245.461 to 245.486 and 245.487 to 245.4888 establishes the Comprehensive Adult Mental Health Act and the Comprehensive Children's Mental Health Act; and

WHEREAS, the Department is required to provide Mental Health services in accordance with the Comprehensive Mental Health Act and the Comprehensive Children's Mental Health Act; and

WHEREAS, the Department pursuant to Minnesota statutes, section 373.01, 373.02, 245.465(4), and 256E.08 wishes to purchase mental health services from multi-disciplinary service Contractor; and

WHEREAS, the Contractor is an autonomous mental health provider in private practice, and in multiple disciplines and is qualified and willing to perform such services;

NOW THEREFORE, in consideration of the mutual understandings and agreements set forth, the Department and Contractor agree as follows:

I SERVICES TO BE PROVIDED OR PURCHASED

The Department agrees to purchase and the Contractor agrees to furnish services as listed in Attachment A.

Diagnostic Assessments and psychological testing requested by the Department for the purpose of fulfilling requirements for ongoing county mental health services for children and adults will be subject to review by the Department to determine whether said assessments and evaluations appropriately fall under the terms of this agreement. If Department determines that said assessments and evaluations fall outside the scope of this agreement, Contractor will be notified upon referral by Department.

II COST AND DELIVERY OF PURCHASED SERVICES

Statements will be submitted by the 10th of each month in the approved format detailing services provided in the prior month. Payment by the Department to Contractor will be by the end of the month and will be based on actual billing. Northern Psychiatric will bill the appropriate third-party payer if the client is covered by a health insurance plan.

III DELIVERY OF CARE AND SERVICES:

Except as otherwise provided herein, Contractor shall maintain in all respects its present control over and autonomy with respect to:

1. The application of its intake procedures and requirements to clients.
2. The methods, times, means and personnel for furnishing Purchased Services to eligible clients.
3. The determination of when to terminate the furnishing of Purchased Services to eligible clients.

Nothing in this agreement shall be construed as requiring Contractor to provide or continue Purchased Services to or for any eligible clients.

IV AUDIT AND RECORD DISCLOSURE

1. Allow personnel of the Department, the Minnesota Department of Human Services, and the Department of Health and Human Services, access to the Contractors records, in accordance with state and federal laws and regulations, at reasonable hours in order to exercise their responsibility to monitor the services.
2. Maintain records at Northern Psychiatric Associates for audit purposes.
3. Comply with Minnesota Code for Agency Rule - Minnesota Department of Public Welfare and the Minnesota Government Practice Act, M.S. 15.1611 - 16.1698. (Suppl. 1979)

V SAFEGUARD OF CLIENT INFORMATION:

1. The use or disclosure by any party of information concerning an eligible client in violation of any rule of confidentiality of for any purpose not directly connected with the administration of the Departments or Contractors responsibility with respect to the Purchased Services hereunder is prohibited except on written consent of such eligible client or his/her responsible parent or guardian.
2. The individual employed by the Contractor who is designated to assure compliance with Minnesota Government Data Practices Act, in accordance with Minnesota Statutes, section 13.46, subdivision 10, paragraph (d), shall be David Anderholm, M.D. Contractor reserves the right to designate an alternate individual to assure such compliance by written notice to Department.

VI EQUAL EMPLOYMENT OPPORTUNITY AND CIVIL RIGHTS CLAUSE:

The Contractor agrees to comply with the Civil Rights Act of 1964, Title VII (43 USC 2000e), including Executive Order No. 11246, and Title VI (42 USC 2000d).

VII FAIR HEARING AND GRIEVANCE PROCEDURES:

The Contractor agrees that a fair hearing and grievance procedure will be established.

VIII BONDING, INDEMNITY, AND INSURANCE CLAUSE:

1. The Contractor shall save and hold the County of Aitkin and the Department harmless from all liability for damages to persons or property arising out of the services performed under the terms of the contract. The Contractor shall indemnify the County of Aitkin and the Department for any liability assessed to the county and the Department on account of the services performed under the terms of the contract. The Contractor agrees to purchase liability insurance naming Aitkin County Department of Health & Human Services as an additional insured in an amount at least equal to the maximum liability limits set forth in Minnesota Statutes, 466.04, Subd.1, of \$500,000 per person and \$1,500,000 per occurrence and agrees to provide the County of Aitkin and the Department a certificate of insurance or other document demonstrating that such insurance has been procured. Contractor shall provide proof of insurance prior to commencement of Contractors performance under this agreement.
2. Insurance: The Contractor does further agree that, in order to protect itself as well as the Department under the indemnity agreement provision hereinabove set forth, it will, at all times during the term of this contract, have and keep in force a liability insurance policy in the amount of \$1,500,000.

IX CONDITIONS OF THE PARTIES OBLIGATIONS:

1. Before the termination date specified in the Introduction of this agreement, the Department may evaluate the performance of the Contractor in regard to the terms of this agreement to determine whether such performance merits renewal of this agreement.
2. Any alterations, variations, modifications or waivers of provisions of this agreement shall be valid only when they have been reduced to writing, duly signed, and attached to the original of this agreement.
3. No claim for services furnished by the Contractor, not specifically provided in the agreement, will be allowed by the Department, nor shall the Contractor do any work or furnish any material not covered by the agreement unless this is approved in writing by the Department. Such approval shall be considered to be a modification of the agreement.
4. If the Department determines that funds are not being administered in accordance with the approved plan and budget, they may be withdrawn after reasonable notice to the Contractor. It is understood and agreed that the parties do not anticipate

that Contractor will administer funds as a result of this agreement.

5. In the event that there is a revision of Federal regulations which might make this agreement ineligible for Federal financial participation, all parties will review the agreement and renegotiate those items necessary to bring the agreement into compliance with the new Federal regulations.
6. In accordance with Minnesota Statutes, Section 245.466, Subd.3 (1), the Commissioner of Minnesota Department of Human Services is a third party beneficiary to this contract.

X SUBCONTRACTING

The Contractor shall not enter into subcontracts for any of the work contemplated under this agreement without written approval of the Department. All subcontracts shall be subject to the requirements of this contract. The Contractor shall be responsible for the performance of any subcontractor.

XI COMPLIANCE WITH THE CLEAN AIR ACT:

The Contractor certifies that it meets lawful conditions of the Clean Air Act, as required by 45 CFR 228.70 and 74.159 (4).

XII MISCELLANEOUS

1. Entire Agreement: It is understood and agreed that the entire agreement of the parties contained herein and that this agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof, as well as any previous agreements presently in effect between the Contractor and Aitkin County Health and Human Services Department relating to the subject matter hereof.
2. This contract may be terminated or renegotiated upon 30 days written notification by either party.
3. Northern Psychiatric Associates agrees to provide Aitkin County Health & Human Services, (attached to the contract):
 - A. Description of staffing, including job descriptions and professional qualifications of all personnel under this agreement (Attachment B).
4. Program and fiscal records shall be retained in the Contractor facility for a minimum of five years.
5. This contract may be extended for a period of six months at the option of the

County of Aitkin. If the county desires to extend the term of the contract, it shall notify the Contractor in writing at least sixty days before the expiration of the contract. All terms of this contract will remain in effect pending execution of a contract amendment, execution of new contract or notice of termination.

IN WITNESS WHEREOF the Department (Aitkin County Health & Human Services) and the Contractor (Northern Psychiatric Associates) have executed this agreement as of the day and year first above written:

BY: _____
Thomas Burke
Aitkin County Health & Human Services Director

DATE: _____

BY: _____
Commissioner Mark Wedel
Aitkin County Health & Human Services Board Chairperson

DATE: _____

BY: _____
Northern Psychiatric Associates Clinical Director

DATE: _____

Printed Name of Clinical Director

APPROVED AS TO FORM AND EXECUTION

BY: _____
County Attorney or Assistant

DATE: _____

COST & DELIVERY OF PURCHASED SERVICES

Doctorate-level Psychologist for \$150.00/hour
 Diagnostic Assessments and
 Psychological Evaluations

Clinician will be on-site at Aitkin County Health & Human Services one day per month; seven hours on site with one hour of travel.

Northern Psychiatric Associates will bill for all services and provide a monthly reconciliation of receivables less 10% contract billing, less 25% administration fee. Aitkin County will guarantee a minimum collected of \$150 per hour.

Mental Health Professional Time as follows:

Clinical Supervision for three staff at one hour each @ \$90.00/hour

Group Supervision @ \$90.00/hour

Consultation with staff upon appointment @ \$90.00/hour

Pre-petition screens for mental health and/or chemical
 dependency commitments @ \$90.00/hour

Read and approve LOCUS, functional assessments,
 and adult mental health case plans @ \$90.00/hour

Mental Health professional will be on-site at Aitkin County Health & Human Services one day per month; seven hours on site with one hour of travel.

Since the request for pre-petition screens is unpredictable, this service will be provided upon the availability of the mental health professional.

Both parties have agreed to increase the time to two (2) days per month should the need for this service increase.

Northern Psychiatric Associates will bill for all services and provide a monthly reconciliation of receivables less 10% contract billing, less 25% administration fee. Aitkin County will guarantee a minimum collected of \$90 per hour.

AGREEMENT Between
NORTHLAND COUNSELING CENTER, INC.
AND AITKIN COUNTY
FOR DETOXIFICATION SERVICES

THIS AGREEMENT, made and entered into the 1st day of January, 2013, by and between the NORTHLAND COUNSELING CENTER, INC., hereinafter sometimes referred to as Northland, and AITKIN COUNTY, hereinafter sometimes referred to as the COUNTY:

WITNESSETH:

WHEREAS, the COUNTY is required under Minnesota Statutes, Chapter 254A.08, to provide receiving center services to persons; and

WHEREAS, the COUNTY wishes to purchase such detoxification services from NORTHLAND:

NOW, THEREFORE, the parties hereto agree as follows:

1. SERVICES TO BE PURCHASED:

Now, therefore, in consideration of the agreements hereinafter set forth, the COUNTY agrees to purchase, and NORTHLAND agrees to furnish, for the period of January 1, 2013, through December 31, 2013, the following services for AITKIN COUNTY residents to be provided in accordance with the above statutes:

- A. Surveillance and protection during crisis periods:
- B. Evaluation of chemical dependency and psychosocial functioning.
- C. On-site nursing health assessment and assistance in securing diagnostic, preventive, remedial and ameliorative health-related services;
- D. Referral to acute medical facility, if necessary;
- E. Education to motivate clients to address alcohol and/or other chemical problems;
- F. Discharge planning, referral to appropriate treatment resources and follow-up;
- G. Other services as may be required by Rule 32 Minnesota State Statutes.

It is expected that these services will be provided for a period of up to 72 hours, exclusive of Saturday, Sunday and holidays.

NORTHLAND shall make every reasonable effort to maintain sufficient staff, facilities, equipment, etc., to deliver the contracted services to be purchased by the COUNTY. NORTHLAND shall, in writing within ten (10) days, notify the COUNTY whenever it is unable to, or going to be unable to, provide the required quality or quantity of the contracted services. Upon such notification, NORTHLAND and the COUNTY shall determine whether such inability will require a modification or cancellation of the contract.

NORTHLAND agrees to comply with all federal, state, and local laws, statutes, ordinances, rules, regulations, and execution orders, now in effect or hereinafter adopted, pertaining to this contract or to the facilities, programs and staff for which NORTHLAND is responsible and pertaining to unlawful discrimination on account of race, color, creed, religion, national origin, gender, sexual orientation, marital status, status with regard to public assistance, disability, or age.

Any violations of or failure to comply with federal, state, or local laws, statutes, ordinances, rules, regulations or executive orders, as well as loss of any applicable license or certificates by NORTHLAND shall constitute a material break of this contract, whether or not intentional, and shall entitle the COUNTY to terminate this contract upon delivery of written notice of termination to NORTHLAND. Notwithstanding any other provision of this contract, such termination shall be effective as of the date of such violation, failure, or loss.

2. COST AND DELIVERY OF CONTRACTED SERVICES:

- A. As of January 1, 2013, the COUNTY will pay for such purchased services the amount of \$325.00 per patient day for the remaining calendar year 2013. Billing will be submitted by the contractor on a monthly basis.
- B. Service
 - (1) Bed capacity: 4
 - (2) Average length of stay: 3 days
- C. Contracted services will be provided at Northland Recovery Center located at Grand Rapids, Minnesota.
- D. Starting March 1, 2006, no charges will be billed to the County for a client's date of discharge.

3. ELIGIBILITY FOR SERVICES:

- A. Any person shall be eligible to receive services regardless of personal income.
- B. Services shall be available to individuals having a problem relating to chemical use. At least one of the factors listed below should be present before a person is admitted for services:

- (1) Any person who appears intoxicated;
- (2) Any person who has apparent need for evaluation of chemical use or abuse;
- (3) Any person in danger of relapse or seeking entry into the continuum of care and/or legal placement into the continuum of care.

4. PAYMENT FOR CONTRACTED SERVICES:

- A. NORTHLAND shall, within fifteen (15) days after the last day of each month, submit an invoice which includes patient name, admit date, discharge date, total days and resident status. In addition, a Statement for Detoxification Services will be attached to the invoice for each patient seen (Attachment B). The patient will also be given a copy of the statement upon discharge.
- B. The COUNTY shall, within the month the invoice is received, make payment to NORTHLAND.
- C. COUNTY will not pay for extensions beyond three days, unless prior authorization has been given by the COUNTY AGENCY.

5. AUDIT AND RECORD DISCLOSURES:

NORTHLAND shall:

- A. Furnish the COUNTY with information about sources of funding and fees paid, as well as other statistical data necessary to meet reporting requirements.
- B. Maintain at its office, records for five (5) years for auditing purposes.

6. SAFEGUARD OF CLIENT INFORMATION:

The use or disclosure by any party of information concerning a client in violation of the State's Data Privacy Act, Minnesota Statutes 15.162 et. Seq., or for any purpose not directly connected with the administration of NORTHLAND'S or COUNTY'S responsibility with respect to the contracted services hereunder is prohibited, except upon written consent of such service recipient, his/her attorney, or his/her responsible parent or guardian.

7. BONDING, INDEMNITY, AND INSURANCE CLAUSE:

- A. NORTHLAND shall obtain and maintain at all times during the terms of this agreement, a fidelity bond covering the activities of its personnel authorized to receive or distribute monies.

- B. **Indemnity:** NORTHLAND does hereby agree that at all times hereafter during the existence of this agreement indemnify and hold harmless the COUNTY against any and all liability, loss, damages, costs or expenses, which the COUNTY may hereafter sustain, incur or be required to pay 1) by reason of any service recipient suffering personal injury, death or property loss or damage either while participating in or receiving from NORTHLAND the care and services to be furnished by NORTHLAND under this agreement or while on premises owned, leased or operated by NORTHLAND, or while being transported to or from said premises in any vehicle owned, operated, leased, chartered, or otherwise contracted for by NORTHLAND or any officer, agency, or employee thereof; 2) by reason of any service recipient causing injury to, or damage to the property of another person during any time when NORTHLAND or any officer, agency or employee thereof has undertaken or is furnishing the care and services call for under this agreement, or 3) by reason of NORTHLAND negligence of any kind.

- C. **Insurance:** NORTHLAND does further agree that in order to protect itself as well as the COUNTY under the indemnity agreement provision above set forth, it will at all times during the term of this contract, have and keep in force a liability insurance policy of at least **\$500,000.00 bodily injury per claimant**, up to **\$1,500,000 per occurrence** and \$50,000 property damage and agrees to provide a certificate of insurance or other document demonstrating that such insurance has been procured to the COUNTY.

8. CONDITIONS OF THE PARTIES OBLIGATIONS:

- A. At least sixty (60) days before the termination date specified in Section 1 of this contract, the COUNTY may evaluate the performance of NORTHLAND in regard to the terms of this contract to determine whether such performance merits renewal of this contract.

- B. Any alterations, variations, modifications, or waivers or provisions of this contract shall be valid only when they have been reduced to writing, duly signed, and attached to the original of this contract.

- C. Upon thirty (30) days written notice from either party, this contract shall be null and void.

9. SUBCONTRACTING:

- A. NORTHLAND shall not enter into subcontracts for any of the work contemplated under this contract without written approval of COUNTY.

- B. A description for services purchased by NORTHLAND shall be attached to this contract.

10. MISCELLANEOUS:

Entire Agreement: It is understood and agreed that the entire contract is contained herein and that this contract supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof as well as any previous agreements in effect between NORTHLAND and any county welfare department(s) relating to the subject matter hereof. NORTHLAND RECOVERY CENTER is not guaranteeing Aitkin County a bed for detox use. If a need arises for AITKIN COUNTY and NORTHLAND has a bed available, NORTHLAND RECOVERY CENTER will provide detox services.

IN WITNESS HEREOF, the COUNTY and NORTHLAND have executed this contract as of the day and year first above written.

By: _____
Thomas Burke
Aitkin County Health & Human Services Director

Dated _____

By: _____
Commissioner Mark Wedel
Chair, Aitkin County Board of Commissioners

Dated _____

By: _____
Jim Ratz
Aitkin County Attorney

Dated _____

By: _____
Chief Executive Officer
Northland Counseling Center, Inc.

Dated _____

Printed Name of Person Signing this document

**ADDENDUM
DETOXIFICATION SERVICES CONTRACT - AITKIN COUNTY**

Northland Counseling Center, Inc. provides all services identified in the contract directly with the exception of:

- 1) Emergency Acute Medical Care
Northland transfers all patients in need of acute medical care to Itasca Medical Center.

- 2) Physician Service
Northland refers to Itasca County and Aitkin County physicians for identified physician care and medication orders.

STATEMENT FOR DETOX SERVICES

PAYABLE TO: AITKIN COUNTY HEALTH & HUMAN SERVICES AITKIN COUNTY RESIDENT? ___ Yes ___ No
204 FIRST ST NW
AITKIN, MN 56431
(218) 927-2425
1-800-328-3744

CLIENT NAME: _____ DATE OF SERVICE _____ CHARGE \$325/DAY
ADDRESS: _____
PHONE: _____ DOB: _____
SOCIAL SECURITY #: _____
HEALTH INS: _____
Client is responsible for filing own insurance claim
-MEDICAL ASSISTANCE DOES NOT COVER DETOX-
TOTAL DUE FROM CLIENT \$ _____

-YOU MAY BE ELIGIBLE FOR A FEE REDUCTION FOR THESE DETOX CHARGES-

Please forward the Total Family Income form, with required proof, to the Accounting Department at Aitkin County Health & Human Services within thirty (30) days of discharge to determine if you are eligible for a fee reduction.

I have received the Tax Intercept Notice as well as the Total Family Income form to be completed and returned by client to Aitkin County Health & Human Services within thirty (30) days of leaving the detox facility.

CLIENT SIGNATURE: _____ DATE: _____
PARENT'S SIGNATURE (if Minor): _____ DATE: _____
DETOX TECH SIGNATURE: _____ DATE: _____

White: NRC

Yellow: ACH&HS

Pink: Client

PURCHASE OF SERVICE AGREEMENT

The Aitkin County Health & Human Services, 204 – 1st Street NW, Aitkin, MN 56431, hereafter referred to as the AGENCY, and New Pathways, Inc., PO Box 366, 310 South Ashland Street, Cambridge, MN 55008 (Program Facility located at: 714 South 6th Street, Brainerd, MN 56401), hereafter referred to as the CONTRACTOR enter into this agreement for the period from January 1, 2013 to December 31, 2013.

WITNESSETH

WHEREAS, the AGENCY understands that New Pathways, Inc. has partnered with area churches to provide a program called the New Pathways' Interfaith Hospitality Network-Brainerd Site.

WHEREAS, New Pathways provides case management services during the daytime and the area churches provide hospitality of food, companionship, and overnight lodging within the church building during the nighttime; and

WHEREAS, the CONTRACTOR represents that it is duly qualified and willing to perform such services;

NOW, THEREFORE, in consideration of the mutual understandings and agreements set forth, the AGENCY and CONTRACTOR agree as follows:

I. **CONTRACTOR DUTIES:**

- A. The CONTRACTOR agrees to furnish services to a population of homeless families with children from Aitkin County.
- B. Services and hospitality will be provided 24 hours a day, 7 days a week, including holidays, in the following manner:
 1. The day center will provide services between the hours of 8:00 a.m. and 4:45 p.m.
 2. The local churches will provide hospitality between the hours of 5:00 p.m. and 7:30 a.m.
 3. Transportation to the host church will be provided at 4:45 p.m.
 4. Transportation to the day center will be provided at 7:30 a.m.
- C. Day center services will include:
 1. Case Management
 2. On-site skills training consisting of job skills, parenting skills, life skills, and healthy living.
 3. On-site school teacher for children who were in a school district other than District 482, when appropriate
 4. Personal care items
 5. Transportation
 6. Clothing
 7. Shower facilities
 8. Laundry facilities
 9. Telephone numbers and addresses
 10. Internet and computer access
 11. Advocacy
 12. 6 month follow-up after discharging from the program
 13. Assistance locating housing and employment

D. Host church services include:

1. Three meals a day (dinner, breakfast, and a packed lunch)
2. Hospitality
3. Overnight lodging
4. Health and wellness checks at churches that have a parish nurse

II. COST AND DELIVERY OF PURCHASED SERVICES

- A. The total amount to be paid for services performed and goods or material supplied by the CONTRACTOR pursuant to this Agreement shall be paid by the AGENCY at the rate of \$25.00 per family per day. This rate applies to any family from Aitkin County that is served by New Pathways' IHN Homeless Program and only for the actual days served. "Family from Aitkin County" is defined to be a family having established a residence in Aitkin County for at least thirty (30) days. Contractor and Agency will be in communication in order to ascertain this residency requirement.
- B. The CONTRACTOR certifies that the services to be provided under this agreement are not otherwise available without cost to eligible clients. The CONTRACTOR further certifies that payment claims for Purchased Services will be in accordance with rates of payment which do not exceed amounts reasonable and necessary to assure quality of service. The CONTRACTOR further certifies that rates of payment do not reflect any administrative or program costs assignable to private pay or third-party pay service recipients.

III. PAYMENT FOR PURCHASED SERVICES

- A. Certification of expenditures: The CONTRACTOR must, within fifteen working days following the last day of each calendar month, submit a standard invoice for services purchased to the Aitkin County Health & Human Services AGENCY. The invoice must show a monthly record of units served.
- B. Payment: The AGENCY must, within 30 days of the date of receipt of the Invoice, make payment to the CONTRACTOR for all eligible clients identified on the invoice.

IV. DUTIES OF THE AGENCY

The AGENCY agrees to the following:

When/if the AGENCY has determined that a unit is not eligible, the AGENCY shall notify the CONTRACTOR within 24 hours of that determination.

V. AUDIT AND RECORD DISCLOSURES

The CONTRACTOR will:

- A. Submit all reports requested by the AGENCY under this section within thirty (30) days of the request, unless an extension of time is approved by the AGENCY.
- B. Allow personnel of the AGENCY, the Minnesota Department of Human Services, and the U.S. Department of Health and Human Services, access to the CONTRACTOR'S facility and records at reasonable hours to exercise their responsibility to monitor purchased services.
- C. If the collection of social service fees is delegated to the CONTRACTOR, the CONTRACTOR must provide the AGENCY with information about fees collected and the fee sources.

- D. Maintain all Direct Service records pertaining to the contract at New Pathways, Inc, 714 South 6th Street, Brainerd, MN 56401 and all financial records will be maintained at New Pathways' Business Address, PO Box 366, 310 S. Ashland St., Cambridge, MN 55008 for four years for audit purposes.
- E. Comply with policies of the Minnesota Department of Human Services regarding social services recording and monitoring procedures, as defined and described in Department of Human Services rules and manuals.

VI. DATA PRACTICES

- A. The collection, maintenance, and dissemination of data pertaining to eligible persons shall be in accordance with Minnesota Statutes Chapter 13.
- B. HIPAA Protocol:
The CONTRACTOR provides assurances to the AGENCY that it will comply with Health Information Portability and Accountability Act (HIPAA) requirements necessary to protect individual identifying health information (IIHI). Use and disclosure will require that all IIHI be:
 - 1. appropriately safeguarded;
 - 2. any misuse of IIHI will be reported to the AGENCY;
 - 3. secure satisfactory assurances from any subcontractor;
 - 4. grant individuals access and ability to amend their IIHI;
 - 5. make available an accounting of disclosures; release applicable records to the AGENCY or Department of Human Services if requested; and
 - 6. upon termination, return or destroy all IIHI in accordance with conventional record destruction practices.

VII. EQUAL EMPLOYMENT OPPORTUNITY-CIVIL RIGHTS

- A. In accordance with the AGENCY'S Affirmative Action Policy and the County Commissioners' policies against discrimination, no person shall illegally, on the grounds of race, color, religion, sex, marital status, handicap, age, or national origin, be excluded from full employment rights in, participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program, service, or activity hereunder in accordance with the provisions of any and all applicable federal and state laws against discrimination. The CONTRACTOR agrees to comply with the requirements of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973.
- B. The CONTRACTOR certifies that it has received a certificate of compliance from the Commissioner of Human Rights pursuant to Minnesota Statutes, Section 363.073. This section only applies if the grant is for more than \$100,000 and the CONTRACTOR has employed forty or more full-time employees within the State of Minnesota on a single working day during the previous 12 months.

VIII. FAIR HEARING AND GRIEVANCE PROCEDURE

- A. The AGENCY will advise applicants and eligible recipients of all of their rights to a fair hearing and the appeal process including, but not limited to , the right to appeal, a denial or exclusion from the program or failure to recognize an eligible recipient's choice of a service and of his/her right to a fair hearing in these respects. The AGENCY will make arrangements to provide such hearings.

- B. The CONTRACTOR will establish a system through which eligible recipients may present grievances about the operation of the service program, and the CONTRACTOR will advise eligible recipients of this right.

IX. INDEMNITY

- A. The CONTRACTOR agrees to defend, indemnify, and hold harmless the AGENCY and its commissioners, officers, employees, volunteer workers, and agents against any and all liability, loss, damages, costs and expenses, including attorney's fees which the AGENCY may sustain, incur, or be required to pay:
1. By reason of any eligible recipient suffering bodily or personal injury, death, or property loss or damage either while participating in or receiving the care and services to be furnished under this Agreement, or while on premises owned, leased, or operated by the CONTRACTOR, or while being transported to or from the premises in any vehicle owned, operated, leased, chartered, or otherwise contracted for by the CONTRACTOR or any officer, agent, or employee thereof;
 2. By reason of any eligible recipient causing injury to, or damage to, the property of another person during any time when the CONTRACTOR or any officer, agent, or employee thereof has undertaken or is furnishing the care and services called for under this Agreement;
 3. By reason of any person employed by the CONTRACTOR or who acts as an agent of the CONTRACTOR, its agents, officers, or employees during the performance of purchased services under this Agreement;
 4. By reason of any negligent act or omission or intentional act or omission of the CONTRACTOR, its agents, officers, or employees during the performance of purchased services under this Agreement.

X. INSURANCE

- A. The CONTRACTOR agrees that to protect itself as well as the AGENCY under the indemnity clause in this Agreement, it will at all times during the term of this Agreement have and keep in force the following insurance:
1. A general liability insurance policy in an amount of not less than \$500,000 for bodily injury or property damage to any one person, and \$1,500,000 for total injuries or damages arising from any one incident. This clause does not constitute a waiver of the County's governmental immunity or liability limits under Minnesota Statute 466 or other law.
 2. An automobile liability insurance policy covering owned, non-owned, and hired vehicles used in the provision of services under this Agreement, in an amount not less than \$1,000,000 per accident for property damage, \$1,000,000 for bodily injuries or death or damages to any one person, and \$2,000,000 for total bodily injuries or damages arising from any one accident or occurrence.
 3. Professional liability insurance policy covering personnel providing purchased services under this Agreement in an amount of not less than \$600,000 for bodily injuries, property damage, and personal injuries.
 4. Worker's Compensation in the required statutory amounts, if applicable.
- B. The CONTRACTOR shall maintain at all times during the term of this Agreement a fidelity bond in the amount of at least \$10,000 subject to a deductible not to exceed \$500, covering the activities of each person handling monies under the terms of this Agreement.
- C. This insurance requirement is intended to protect the AGENCY at a minimum to the liability limits set forth in Minnesota Statutes, Section 466.04. If the liability limits of

Minnesota Statutes, Section 466.04 are amended, the CONTRACTOR agrees to renegotiate this Agreement with the AGENCY to provide insurance coverage in conformance with the requirements of Minnesota Statutes, Section 466.04.

XI. CONTRACTOR DEBARMENT, SUSPENSION, AND RESPONSIBILITY CERTIFICATION

Federal Regulation 45 CFR 92.35 prohibits the State/Agency from purchasing goods or services with federal money from vendors who have been suspended or debarred by the federal government. Similarly, Minnesota Statute, Section 16C.03, subd. 2 provides the Commissioner of Administration with the authority to debar and suspend vendors who seek to contract with the State/Agency. Vendors may be suspended or debarred when it is determined, through a duly authorized hearing process, that they have abused the public trust in a serious manner.

By Signing This Contract, The CONTRACTOR Certifies That It And Its Principals* And Employees:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from transacting business by or with any federal, state, or local governmental department or agency; and
- B. Have not within a three-year period preceding this contract:
 - 1. been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract;
 - 2. violated any federal or state antitrust statutes; or
 - 3. committed embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statements, or receiving stolen property; and
- C. Are not presently indicated or otherwise criminally or civilly charged by a governmental entity for:
 - 1. commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction;
 - 2. violating any federal or state antitrust statutes; or
 - 3. committing embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; and
- D. Are not aware of any information and possess no knowledge that any subcontractor(s) that will perform work pursuant to this contract are in violation of any of the certifications set above.
- E. Shall immediately give written notice to the Contracting Officer should CONTRACTOR come under investigation for allegations of fraud or a criminal offense in connection with obtaining, or performing; a public (federal, state, or local government) transaction; violating any federal or state antitrust statutes; or committing embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or receiving stolen property.

* "Principals" for the purposes of this certification means officers; directors; owners; partners; and persons having primary management or supervisory responsibilities within a business entity (e.g. general manager; plant manager; head of a subsidiary, division, or business segment and similar positions).

XII. CONDITIONS OF THE PARTIES' OBLIGATION:

- A. It is understood and agreed that in the event the reimbursement to the AGENCY from State and Federal sources is not obtained and continued at a level sufficient to allow for the purchase of the indicated quantity of Purchased Services, the obligations of each party hereunder must thereupon be terminated.
- B. This Agreement may be canceled by either party at any time, with or without cause, upon 30 days' notice, in writing, delivered by mail or in person.
- C. Before the termination date specified in Section 1 of this Agreement, the AGENCY may evaluate the performance of the CONTRACTOR in regard to terms of this Agreement to determine whether such performance merits renewal of this Agreement.
- D. Any alterations, variations, modifications, or waivers of provisions of this Agreement must be valid only when they have been reduced to writing, duly signed, and attached to the original of this Agreement.
- E. No claim for services furnished by the CONTRACTOR not specifically provided in the Agreement will be allowed by the AGENCY, nor must the CONTRACTOR do any work or furnish any material not covered by the Agreement, unless this is approved in writing by the AGENCY. Such approval must be considered to be a modification of the Agreement.
- F. In the event that there is a revision of Federal regulations which might make this Agreement ineligible for Federal financial participation, all parties will review the Agreement and renegotiate those items necessary to bring the Agreement into compliance with the new Federal regulations.
- G. The CONTRACTOR shall provide Exposure Control Training for its employees and agents as described in laws or rules governing OSHA Regulations. Further, the CONTRACTOR hereby releases and holds harmless Aitkin County from any loss or injury suffered by the CONTRACTOR, its employees or agents, as a result of contact with infectious agents.

XIII. SUBCONTRACTING

- A. The CONTRACTOR agrees not to enter into subcontracts for any of the work contemplated under this contract without written approval of the AGENCY.
- B. All subcontractors must be subject to and must meet all the requirements of this contract.
- C. The CONTRACTOR must ensure that any and all subcontracts to provide services under this contract must contain the following language:

The subcontractor acknowledges and agrees that the Minnesota Department of Human Services is a third-party beneficiary, and as a third-party beneficiary, is an affected party under this contract. The subcontractor specifically acknowledges and agrees that the Minnesota Department of Human Services has standing to and may take any appropriate administrative action or may sue the provider for any appropriate relief in law or equity, including but not limited to rescission, damages, or specific performance, of all or any part of the contract. Minnesota Department of Human Services is entitled to and may recover from the provider reasonable attorneys fees, costs, and disbursements associated with any action taken under this paragraph that is successfully maintained. This provision must not be construed to limit the rights of any party to a contract or any other third party beneficiary, nor must it be construed as a waiver of immunity under the Eleventh Amendment to the United States Constitution or any other waiver or immunity.

- D. The CONTRACTOR agrees to be responsible for the performance of any subcontractor to ensure compliance to the subcontract and Minnesota Rules, part 9525.1870, subpart 3.

XIV. NONCOMPLIANCE

- A. If the CONTRACTOR fails to comply with the provisions of this contract, the AGENCY may seek any available legal remedy.
- B. Either party must notify the other party within 30 days when a party has reasonable grounds to believe that this contract has been or will be breached in a material manner. The party receiving such notification must have 30 days, or any other such period of time as mutually agreed to by the parties, to cure the breach or anticipatory breach.

XV. MISCELLANEOUS

The CONTRACTOR acknowledges and agrees that the Minnesota Department of Human Services is a third-party beneficiary, and as third-party beneficiary, is an affected party under this agreement. The CONTRACTOR specifically acknowledges and agrees that the Minnesota Department of Human Services has standing to and may take any appropriate administrative action or may sue the CONTRACTOR for any appropriate relief in law or performance of all or any part of the agreement between the County Welfare Board and the CONTRACTOR. The CONTRACTOR specifically acknowledges that the Aitkin County Health & Human Services Board and the Minnesota Department of Human Services are entitled to and may recover from the Contractor reasonable attorney's fees, costs, and disbursements associated with any action taken under this paragraph that is successfully maintained. This provision must not be construed to limit the rights of any party to the agreement of any other third-party beneficiary, nor must it be construed as a waiver of immunity under the Eleventh Amendment to the United States Constitution or any other waiver of immunity.

XVI ENTIRE AGREEMENT

It is understood and agreed that the entire contract of the parties is contained herein and this contract supersedes all oral agreements and negotiations between the parties relating to the subject matter thereof.

IN WITNESS WHEREOF, the AGENCY and the CONTRACTOR have executed this agreement as of the day and year first written above.

BY: _____
Thomas Burke, Director, Aitkin County Health & Human Services

Date: _____

BY: _____
Mark Wedel, Chairperson, Aitkin County Board of Commissioners

Date: _____

BY: _____
New Pathways Representative

Date: _____

Printed Name & Title of Person Signing for New Pathways

APPROVED AS TO FORM AND EXECUTION:

BY: _____
Jim Ratz, Aitkin County Attorney

Date: _____

Aitkin County Health and Human Services
204 – 1ST Street N.W.
Aitkin, MN
LETTER OF AGREEMENT

Aitkin County Health and Human Services hereafter referred to as "ACH&HS" and Mark Heggem, MD, a medical doctor practicing at Riverwood Healthcare Center, 200 Bunker Hill Drive, Aitkin, MN 56431, enter into this agreement for the purpose of Public Health Medical Consultant, beginning January 1, 2013 through December 31, 2013.

Witnessed

Whereas, Aitkin County Health and Human Services is desirous of contracting with Mark Heggem, medical consultant; and

Whereas, Mark Heggem, MD, is desirous of providing Medical Consultation, the following is agreed upon:

1. Mark Heggem, MD to review and sign all new and existing standing medical orders and vaccine protocols on an annual basis or as requested.
2. Authorize approval of vaccine orders as noted in ACH&HS vaccine protocols.
3. To be the Public Health medical contact regarding Public Health DP&C (Disease, Prevention & Control) issues as they arise.
4. To provide general consultative services as needed.
5. The agreement will be reviewed on an annual basis.
6. The Contractor agrees to carry all necessary Workers' Comp. and Liability Insurance.
7. The agreement may be canceled by either party within a 30 day written notice.

IN WITNESS WHEREOF, THE County and the Provider have executed this agreement this _____ Day of _____, 2012

Director, Aitkin County Health and Human Services

Date

Chairman, Aitkin County Board of Commissioners

Date

Mark Heggem

Dr. Mark Heggem

11/12/12

Date

Aitkin County Attorney

Date

COOPERATIVE AGREEMENT UNDER TITLE IV-D WITH
AITKIN COUNTY HEALTH AND HUMAN SERVICES,
THE AITKIN COUNTY SHERIFF, AND
THE AITKIN COUNTY ATTORNEY

VII. - G.

Aitkin County Health and Human Services (hereinafter "the IV-D Agency"), the Minnesota Department of Human Services (hereinafter "DHS"), the Aitkin County Attorney's Office (hereinafter "County Attorney"), and the Aitkin County Sheriff (hereinafter "Sheriff") hereby enter into the following agreement.

RECITALS:

Whereas, the IV-D Agency is responsible for administering the Child Support Enforcement Program under Title IV-D of the Social Security Act.

Whereas, the County Attorney is willing to provide legal services necessary to the operation of the Child Support Enforcement Program under Title IV-D of the Social Security Act.

Whereas, the Sheriff is willing and able to perform activities necessary to the operation of the Child Support Enforcement Program under Title IV-D of the Social Security Act.

Whereas, the above-referenced entities wish to enter into this cooperative agreement to set forth their respective responsibilities in providing services necessary to the operation of the Child Support Enforcement Program under Title IV-D of the Social Security Act.

Whereas, Public Law 93-647 and 45 CFR Chapter III require a cooperative agreement between the IV-D Agency and the other county entities that are a party to this Agreement, namely the County Attorney and the Sheriff in order to compensate said county entities with respect to reimbursement for costs incurred in providing services necessary to operate the Child Support Enforcement System under Title IV-D of the Social Security Act.

NOW, THEREFORE, BE IT RESOLVED that the parties hereby agree as follows:

I. GENERAL TERMS:

A. Purpose: The Purpose of the Child Support Enforcement Program is to establish paternity and secure financial support for minor children who are living apart from one or both parents as more fully set forth in Title IV-D of the Social Security Act. In order to meet this purpose, this Agreement establishes procedures for the provision of services to the Child Support Enforcement Program by the County Attorney and the Sheriff.

B. Duties: The specific duties of each party are set forth more fully below. This Agreement also provides for reimbursing

administrative costs in accordance with federal regulations and state policy.

C. Duration of Agreement: It is agreed that this Agreement will commence on January 1, 2013, and will expire on December 31, 2014. It may be terminated earlier upon 60 days written notice to all other parties.

D. Amendments: This Agreement may be altered or amended by written agreement signed by all parties to this Agreement.

E. Records: The parties will maintain all records, including financial records, related to all services provided under this agreement for the longer of five (5) years or as otherwise provided by law. Record maintenance will be in accordance with all federal, state, and local reporting and safeguarding requirements. Records related to services provided under this agreement will be made available and subject to state and federal review and audit.

F. Applicable Laws: All parties will comply with Title IV-D of the Social Security Act and all applicable federal laws, regulations, action transmittals, and other policy directives and requirements of the United States Department of Health and Human Services, Office of Child Support Enforcement, including but not limited to the information privacy laws listed below.

II. INFORMATION PRIVACY

This provision governs the accessing, use, and disclosure of private and confidential data as defined in the Minnesota Government Data Practices Act ("MGDPA" - Minnesota Statutes Chapter 13), including, to the extent applicable, "protected health information" as defined in the Health Insurance Portability and Accountability Act ("HIPAA" - 45 CFR § 164.501), hereafter referred to collectively as "protected information."

- A. Confidentiality: The information exchanged under this agreement shall not be disclosed to individuals or agencies other than as provided in 45 CFR 202.50, 45 CFR 303.21, and as provided by the laws of the State of Minnesota. Information exchanged under this agreement will only be used to promote or support the administration of Titles IV-A and IV-D of the Social Security Act.
- B. For purposes of executing its responsibilities and to the extent set forth in this contract, all of the parties to this agreement shall be part of the "welfare system," as defined in Minnesota Statutes §13.46, subdivision 1. To the extent permissible by law, each party's employees and agents will have access to private or confidential data maintained by the other parties to the extent necessary to carry out County's responsibilities under this contract.

C. Duty to ensure proper handling of protected information: The County shall be responsible for training its employees (including employees of the county human services agency, county attorney's office, and sheriff's department) who are authorized to access and use protected information collected under the terms and for the purposes specified in this contract. This responsibility includes ensuring that staff are properly trained regarding:

1. The Minnesota Government Data Practices Act (MGDPA), Minnesota Statutes Chapter 13, in particular, §13.46 ("welfare data");
2. The Minnesota Health Records Act, Minn. Stat. §144.291-144.298;
3. Federal law and regulations that govern the use and disclosure of substance abuse treatment records, 42 USCS § 290dd-2 and 42 CFR § 2.1 to § 2.67.
4. Any other applicable state and federal statutes, rules, and regulations affecting the collection, storage, use and dissemination of private or confidential information.

DHS will each likewise be responsible for training their own staff.

D. Minimum necessary access to protected information: The parties shall comply with the "minimum necessary" access and disclosure standards set forth in the MGDPA and HIPAA. The accessing, use, and disclosure of protected information is limited to "that necessary for the administration and management of programs specifically authorized by the legislature or local governing body or mandated by the federal government." See Minnesota Statutes, §13.05, subd. 3; see also, 45 CFR § 164.502(b) and § 164.514(d).

E. Each party shall:

1. Not access, use, or disclose protected information other than as permitted or required by this Contract or as otherwise required by law;
2. Use appropriate safeguards to prevent use or disclosure of the information by its employees other than as provided for by this Contract;
3. Report any use or disclosure of the information not provided for by this contract of which it becomes aware;
4. Consistent with this Contract, ensure that any agents (including subcontractors), analysts, and others to whom it provides private or confidential data, agree to be bound by the same restrictions and conditions that apply to them with respect to such information;

5. At termination of this contract, extend the protections of this Contract to the information collected during the course of this contract.

F. Release of protected information. No protected information created, collected, received, accessed, stored, used, maintained or disclosed in the course or performance of this contract will be disseminated except as authorized by statute, either during the period of this contract or hereafter. The County IV-D Agency, the County Attorney, or the County Sheriff, agree to hold DHS harmless with regard to all penalties, fines, damages or claims arising out of, resulting from, or in any manner attributable to any violation of the aforementioned privacy laws, including legal fees and disbursements paid or incurred to enforce this provision of the contract.

III. PROVISION OF LEGAL SERVICES

A. Duties of the IV-D Agency The IV-D Agency shall:

1. Refer appropriate cases to the County Attorney as provided for in federal regulations and state law and policy.
2. Supply the County Attorney with appropriate information as provided for and defined in the federal regulations, the State Plan for Support Collection and Establishment of Paternity under Title IV-D of the Social Security Act, and state policy in accordance with the Minnesota Department of Human Services, Child Support Enforcement Division Policy Manual and other policy documents as DHS may release from time to time.
3. Assist the County Attorney and the courts in carrying out programs for establishing paternity and securing support for children from legally liable persons.
4. Notify the County Attorney about failures to comply with court-ordered child support and maintenance whenever legal action appears necessary.
5. Consult with the County Attorney about any issues of law that may arise should the IV-D Agency need legal advice or counsel.
6. Assist in the service of process when the opportunity occurs to serve process before referral to the Sheriff or other contracted process server.
7. Reimburse the County Attorney for providing services as specified in this Agreement to the extent these services are federally required activities and services as provided in federal regulation and the IV-D State Plan.

8. Take any actions necessary to assist the County Attorney in meeting the federally mandated performance standards as set forth below.

B. Duties of the County Attorney: The County Attorney shall:

1. Take appropriate legal action, including making court appearances, to establish paternity for children born outside of marriage, establish liability for support of children from persons legally liable for such support, and secure compliance with court-ordered child support and spousal maintenance as provided by federal regulation and state law.
2. Use reciprocal arrangements with other states or tribal organizations to obtain or enforce court order for support.
3. Review evidence and determine the adequacy of the evidence for prosecution.
4. Act on behalf of another IV-D Agency or Tribal IV-D Program or County Human Services Department upon their request or as provided by state law or policy.
5. Counsel and advise the IV-D Agency with regard to issues of law and procedure and act as legal advisor for the IV-D Agency. The Attorney will refrain from acting as counsel for or providing legal advice to applicants or recipients of IV-D services.
6. Inform the IV-D Agency of statutory and case law changes that may affect the IV-D Agency in any of its child support enforcement functions.
7. Retain records and make reports to the IV-D Agency, DHS, the court and law enforcement agencies as required by federal regulations and state policies for the effective and efficient administration of the Title IV-D program.
8. Fully cooperate with the IV-D Agency and DHS with respect to the monitoring and evaluating activities pertaining to this agreement.
9. Dedicate the necessary staff and equipment necessary to meet the performance standards set forth below.
10. Determine whether handling any particular case would constitute a conflict of interest or otherwise be professionally improper. If so, the Attorney may select another attorney to handle the case at the same compensation rate as provided in this agreement.
11. Sign off, along with the IV-D agency, on any corrective plans developed as a result of deficiencies noted during a county review.

C. County Attorney Performance Standards The County Attorney shall:

1. In recognition of the Family Support Act of 1988, Pub. L. 100-485, and the requirements of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, P.L. 104-193, the IV-D Agency and County Attorney will collaborate to meet the federally determined time limits for services as set forth by federal law and in accordance with Minnesota law, regulations, and policy. The federal time limits (including, but not limited to, those found at 45 C.F.R. §§ 303.2 through 303.11, 303.30 through 303.31, 303.72, 303.100 through 303.102, 305. 20, 42 U.S.C. § 453A, and 42 U.S.C. § 466 (a) (10)) will be the primary standard against which performance under this contract will be measured.
2. Promptly notify the IV-D Agency of any actions that the IV-D Agency must take in order for the County Attorney to meet these performance standards.

D. Reimbursement: The Attorney will be reimbursed as follows:

1. The rate of \$85 per hour in 2013 and the rate of \$90 in 2014 for documented IV-D County Attorney time.
2. Reimbursement for out-of-pocket expenses such as mileage, meals, and lodging, shall be as provided under the Aitkin County policy, and shall be submitted for payment to the Aitkin County Board on a monthly basis.

E. Reimbursement Terms:

1. The Attorney will submit quarterly statements to the IV-D Agency for all reimbursements requested for the services provided in this agreement. Billing shall list case names, type of case, services provided, number of hours spent, date of service and charge and rate.
2. Upon receipt, the IV-D Agency shall make payment in its usual and customary manner.
3. The Attorney is responsible for assuring that the expenses claimed are in accordance with the federal regulations for claiming FFP reimbursement for activities in the Child Support Enforcement Program. Reimbursement is limited to reimbursement for activities and services that are required by law.
4. If the IV-D Agency determines that the Attorney is not meeting the terms of this Agreement in any way, the payment to the Attorney will not be made until it is determined by the IV-D Agency that the deficiency has been corrected. These deficiencies may include failure to perform (without

good cause) within the parameters of the performance standards, delinquent or incorrect submission of required reports, violation of federal or state law, or repeated failure to perform (without good cause) within the parameters of the performance standards and other specified requirements of this Agreement.

IV. PROVISION OF SERVICES BY THE SHERIFF

A. Duties of the IV-D Agency: The IV-D Agency shall:

1. Supply appropriate information as provided for and defined in federal regulations and state law and policy.
2. Reimburse the Sheriff for the provision of services as specified in this Agreement to the extent that those services are federally required activities and services as provided in the federal regulations and the IV-D State Plan.

B. Duties of the Sheriff: The Sheriff shall:

1. Provide services to the IV-D Agency by performing service of process in Title IV-D cases, including, but not limited to, the service of summons, complaints, orders to show cause, motions, court orders, subpoenas, warrants, and writs of attachment.
2. To provide a bailiff to be present at IV-D hearings as requested by the IV-D Agency, the Attorney, or as ordered or directed by the court.

C. Reimbursement: The Sheriff will be reimbursed as follows:

1. The Sheriff shall receive the sum of \$50 per case for providing service of process services.

D. Reimbursement Terms:

1. The Sheriff will submit monthly statements to the IV-D Agency for all reimbursements requested for the services provided in this Agreement. Each statement shall include the names of the parties for identification purposes.
2. Upon receipt, the IV-D Agency shall make payment in its usual and customary manner.
3. The Sheriff is responsible for assuring that the expenses claimed are in accordance with the federal regulations for claiming FFP reimbursement for activities in the Child Support Enforcement Program. Reimbursement is limited to reimbursement for activities and services that are required by law.
4. If the IV-D Agency determines that the Sheriff is not meeting the terms of this Agreement in any way, the payment

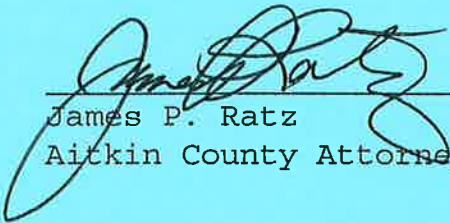
to the Sheriff will not be made until it is determined by the IV-D Agency that the deficiency has been corrected. These deficiencies may include failure to perform (without good cause) within the parameters of the performance standards, delinquent or incorrect submission of required reports, violation of federal or state law, or repeated failure to perform (without good cause) within the parameters of the performance standards and other specified requirements of this Agreement.

THE PARTIES HEREIN, HAVING APPROVED AND SIGNED THIS AGREEMENT, AGREE TO BE BOUND TO THE PROVISIONS SET FORTH IN THIS AGREEMENT.

Approved by:

Thomas Burke, Director
Aitkin County Health and
Human Services

Date: _____




James P. Ratz
Aitkin County Attorney

Date: 11-21-12

Wayland Campbell, Director
Child Support Enforcement Division

Date: _____



Scott Turner
Aitkin County Sheriff

Date: 11-21-12

Mark Wedel
Aitkin County Board Chair

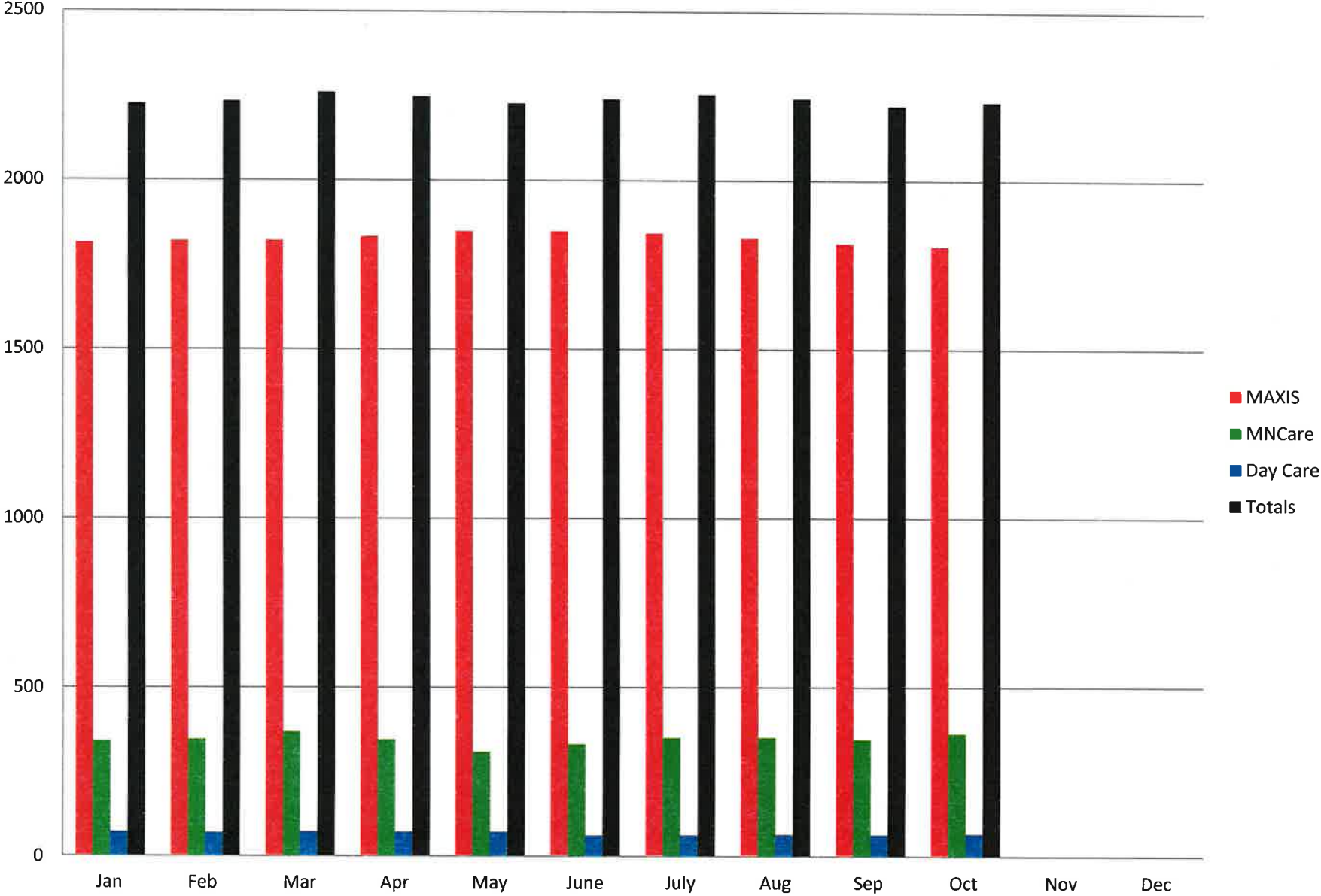
Date: _____

INCOME MAINTENANCE CASELOAD HISTORY

2012	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
MAXIS	1813	1819	1820	1832	1848	1848	1842	1828	1813	1805		
MNCare	341	346	368	345	309	332	351	352	346	363		
Day Care	72	70	73	72	72	62	63	65	64	67		
Totals	2226	2235	2261	2249	2229	2242	2256	2245	2223	2235		
Applications-MAXIS	91	62	77	71	94	77	63	85	69	86		
2011	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
MAXIS	1727	1748	1784	1827	1848	1847	1837	1843	1802	1823	1822	1827
MNCare	521	532	442	381	354	354	336	346	350	343	347	347
Day Care	72	71	71	80	72	80	87	82	84	81	80	74
Totals	2320	2351	2297	2288	2274	2281	2260	2271	2236	2247	2249	2248
Applications-MAXIS	84	79	115	100	84	92	73	100	62	96	84	65
2010	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
MAXIS	1686	1675	1705	1694	1686	1668	1676	1664	1665	1671	1695	1703
MNCare	408	417	419	442	439	439	451	477	490	502	522	513
Day Care	77	74	68	67	67	67	67	63	62	62	67	72
Totals	2171	2166	2192	2203	2192	2174	2194	2204	2217	2235	2284	2288
Applications-MAXIS	76	52	75	90	68	64	73	82	68	88	85	73
2009	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
MAXIS	1556	1578	1611	1628	1627	1620	1636	1629	1638	1644	1658	1687
MNCare	308	318	322	343	349	356	374	398	400	403	402	399
Day Care	80	81	82	85	83	83	80	84	82	80	81	78
Totals	1944	1977	2015	2056	2059	2059	2090	2111	2120	2127	2141	2164
Applications-MAXIS	93	93	98	91	66	78	89	72	81	84	67	91
2008	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
MAXIS	1451	1474	1472	1469	1488	1492	1477	1465	1482	1496	1509	1532
MNCare	238	241	245	256	265	270	286	289	292	295	301	307
Day Care	52	53	54	58	65	67	69	70	72	77	78	78
Totals	1741	1768	1771	1783	1818	1829	1832	1824	1846	1868	1891	1917
Applications-MAXIS	113	68	75	69	86	62	71	79	78	109	62	109

MAXIS Cases: Number of unduplicated cases open for all programs except MNCare & Child Care can be open on multiple programs per case.
MNCare: Number of cases open on MNCare that Aitkin County manages. Residents do have the option of having their MNCare cases managed at the State Level.
Day Care: Number of day care cases open.
Total: Total cases open.
Applications – MAXIS: New applications taken during month for MAXIS programs only. Does not include MN Care or Day Care.

2012 Caseload Information



Aitkin County Health & Human Services

Financial Statement

	Actual Jan-12	Actual Feb-12	Actual Mar-12	Actual Apr-12	Actual May-12	Actual Jun-12	Actual Jul-12
Income:							
Tax Levy					-	1,396,425.52	-
CPA and In Lieu					1,500.08	-	3,335.00
State Revenue	37,736.43	21,444.68	84,969.04	2,560.19	18,595.31	79,430.43	238,333.79
Federal Revenue	73,953.74	291,098.08	190,428.89	67,463.70	298,328.09	182,730.98	98,405.46
Revenue From Third Party	11,551.83	11,760.42	12,775.59	13,857.34	16,444.54	20,384.56	18,367.80
Misc. Revenue	43,294.72	44,024.17	48,669.06	25,717.24	38,444.81	25,137.67	26,126.19
Total:	166,536.72	368,327.35	336,842.58	109,598.47	373,312.83	1,704,109.16	384,568.24
Expenditures:							
Payments to Recipients	151,909.53	123,684.35	160,821.95	177,680.73	121,117.18	145,551.15	141,903.48
Salaries and Fringes	299,542.87	265,354.84	265,483.59	279,680.75	271,104.95	386,477.04	277,150.76
Services and Charges	21,637.87	25,137.47	29,900.95	24,731.64	22,593.66	19,694.70	25,724.06
Travel and Insurance	46,667.28	3,467.94	4,765.15	3,981.74	3,306.05	(86.94)	4,600.87
Office Supplies	1,672.83	3,523.06	1,881.28	1,705.78	3,896.44	4,208.65	941.33
Capital Outlay	447.25	5,029.08	30.59	1,375.07	94.53	3,016.47	29,984.00
Misc Expense & Pass Thru	10,576.43	14,848.42	5,716.47	46,061.68	4,003.14	8,684.58	36,187.81
Total:	532,454.06	441,045.16	468,599.98	535,217.39	426,115.95	567,545.65	516,492.31
Final Totals:	(365,917.34)	(72,717.81)	(131,757.40)	(425,618.92)	(52,803.12)	1,136,563.51	(131,924.07)

Cash Balance as of 11/2011
4,473,439.09

Cash Balance as of 11/27/2012
3,506,680.59

	Actual Aug-12	Actual Sep-12	Actual Oct-12	Actual Nov-12	Actual Dec-12
Income:					
Tax Levy	-	-	-	-	-
CPA and In Lieu	48,941.28	1,238.15	-	-	-
State Revenue	30,900.83	103,438.64	4,566.54	-	-
Federal Revenue	283,712.43	191,408.70	61,905.42	-	-
Revenue From Third Party	22,963.89	23,528.76	21,608.54	-	-
Misc. Revenue	99,812.50	16,706.83	17,854.29	1,830.51	-
Total:	486,330.93	336,321.08	105,934.79	1,830.51	-
Expenditures:					
Payments to Recipients	122,525.07	129,324.00	131,163.33	99,944.02	-
Salaries and Fringes	257,388.09	260,862.23	277,122.61	260,533.99	-
Services and Charges	20,682.35	107,608.68	25,488.66	36,770.86	-
Travel and Insurance	5,366.84	3,675.11	3,961.08	2,936.63	-
Office Supplies	2,474.28	6,665.31	2,742.57	1,929.35	-
Capital Outlay	51,193.25	694.69	(319.56)	376.58	-
Misc Expense & Pass Thru	12,419.41	1,839.62	21,708.13	2,600.76	-
Total:	472,049.29	510,669.64	461,866.82	405,092.19	-
Final Totals:	14,281.64	(174,348.56)	(355,932.03)	(403,261.68)	-

	YTD 2012	ACTUAL 2011	ACTUAL 2010	ACTUAL 2009	ACTUAL 2008	ACTUAL 2007	ACTUAL 2006	ACTUAL 2005
Income:								
Tax Levy	1,396,425.52	2,345,969.16	2,333,865.63	2,340,935.73	2,409,856.71	2,303,196.53	1,817,723.90	1,821,945.15
CPA and In Lieu	55,014.51	236,240.57	235,223.92	321,690.72	303,462.53	389,866.09	312,877.69	454,674.85
State Revenue	621,975.88	736,864.33	611,120.93	632,506.88	936,661.64	790,366.43	905,921.06	938,238.57
Federal Revenue	1,739,435.49	2,120,681.67	2,225,918.50	2,266,036.42	2,031,189.00	2,013,560.50	1,993,226.16	2,011,677.42
Revenue From Third Party	173,243.27	163,265.77	126,077.60	-	-	-	-	-
Misc. Revenue	387,617.99	446,320.68	541,300.99	575,677.90	608,372.74	568,060.27	484,763.05	367,679.15
Total:	4,373,712.66	6,049,342.18	6,073,507.57	6,136,847.65	6,289,542.62	6,065,049.82	5,514,511.86	5,594,215.14
Expenditures:								
Payments to Recipients	1,505,624.79	1,729,427.71	1,862,889.86	1,818,277.01	1,729,049.89	1,827,333.49	1,858,630.93	2,044,180.37
Salaries and Fringes	3,100,701.72	3,602,677.75	3,585,784.86	3,658,299.47	3,300,291.25	3,091,358.49	2,911,440.42	2,804,023.07
Services and Charges	359,970.90	271,548.15	305,453.93	295,501.81	327,685.72	271,589.87	281,345.91	284,829.34
Travel and Insurance	82,641.75	96,969.42	107,221.46	125,924.90	125,736.88	91,625.96	96,293.29	144,092.83
Office Supplies	31,640.88	61,209.60	56,501.21	52,262.98	79,742.17	63,677.05	65,267.30	59,081.39
Capital Outlay	91,921.95	23,482.25	33,649.79	68,997.74	35,484.07	24,380.79	40,048.96	83,382.08
Misc Expense & Pass Thru	164,646.45	96,521.72	123,123.15	142,355.79	133,526.22	148,157.71	145,866.15	129,998.55
Total:	5,337,148.44	5,881,836.60	6,074,624.26	6,161,619.70	5,731,516.20	5,518,123.36	5,398,892.96	5,549,587.63
Final Totals:	(963,435.78)	167,505.58	(1,116.69)	(24,772.05)	558,026.42	546,926.46	115,618.90	44,627.51

AITKIN COUNTY FOSTER CARE

1995	\$479,058.88	71	1998	\$470,228.76	61	2001	\$840,674.02	116
1996	\$309,224.35	55	1999	\$619,842.48	68	2002	\$927,493.49	94
1997	\$385,075.19	52	2000	\$663,637.48	85	2003	\$1,210,524.55	81

	2004	2005	2006	2007	2008	2009	2010	2011	2012
JAN	\$85,870.11	\$91,859.24	\$51,726.58	\$57,760.29	\$51,397.99	\$71,257.41	\$73,496.04	\$78,312.32	\$59,278.73
FEB	\$106,979.42	\$109,304.41	\$68,866.00	\$94,242.30	\$62,605.01	\$78,980.18	\$82,467.05	\$82,982.51	\$78,783.86
MARCH	\$103,213.96	\$81,902.93	\$76,104.53	\$67,724.29	\$62,918.27	\$75,728.59	\$75,000.60	\$61,384.45	\$89,386.88
APRIL	\$76,029.53	\$60,264.65	\$79,550.97	\$74,285.29	\$62,865.11	\$91,603.72	\$79,548.43	\$69,570.36	\$101,195.78
MAY	\$96,975.97	\$109,412.53	\$98,465.86	\$74,048.44	\$71,824.48	\$74,777.50	\$77,811.48	\$73,398.62	\$70,140.91
JUNE	\$137,016.87	\$71,264.95	\$65,097.81	\$85,395.63	\$79,633.26	\$78,255.63	\$99,039.56	\$92,735.90	\$79,654.30
JULY	\$44,323.09	\$26,670.38	\$80,537.52	\$59,397.74	\$76,076.59	\$84,874.52	\$74,466.67	\$63,530.39	\$68,929.00
AUG	\$100,544.43	\$66,181.94	\$87,956.95	\$66,770.76	\$74,550.01	\$74,213.76	\$97,571.86	\$77,971.22	\$67,386.62
SEPT	\$79,903.85	\$61,895.20	\$65,385.62	\$68,837.51	\$67,930.63	\$74,599.74	\$70,427.32	\$65,924.31	\$66,615.87
OCT	\$84,958.85	\$65,919.95	\$45,768.32	\$52,226.54	\$66,331.65	\$73,431.32	\$89,100.75	\$83,971.03	\$45,407.15
NOV	\$71,376.08	\$89,988.14	\$62,024.64	\$66,203.74	\$77,776.03	\$91,038.51	\$76,359.06	\$78,148.23	\$45,889.63
DEC	\$66,841.89	\$76,710.59	\$66,338.45	\$51,560.49	\$80,602.70	\$81,512.33	\$75,599.03	\$58,313.77	
TOTAL CHILDREN	\$1,054,034.05	\$911,374.91	\$847,823.25	\$818,453.02	\$834,511.73	\$950,273.21	\$970,887.85	\$886,243.11	\$772,668.73
	76	69	73	75	63	64	57	56	
	(\$156,490.50)	(\$142,659.14)	(\$63,551.66)	(\$29,370.23)	\$16,058.71	\$115,761.48	\$20,614.64	(\$84,644.74)	(\$113,574.38)
	Decrease from 2003	Decrease from 2004	Decrease from 2005	Decrease from 2006	Increase from 2007	Increase from 2008	Increase from 2009	Decrease from 2010	Change from 2011

2010 Foster Care Breakdown

Child Shelter	\$9,488.00
Treatment Foster	\$56,083.53
Child Foster Care	\$476,817.55
Rule 8 FC	\$76,179.08
Corrections	\$170,224.47
Elec Mon./SE	\$1,201.39
Rule 5	\$140,169.52
Respite	\$34,850.93
Child Care	\$1,579.00
Health Services	\$81.56
Transportation	<u>\$9,584.21</u>

Total \$976,259.24

2011 Foster Care Breakdown

Child Shelter	\$2,832.90
Treatment Foster	\$101,130.13
Child Foster Care	\$317,597.09
Rule 8 FC	\$79,291.48
Corrections	\$316,273.71
18-21	\$1,228.00
Rule 5	\$70,889.29
Respite	\$8,645.32
Child Care	\$1,166.65
Health Services	\$193.65
Transportation	<u>\$10,267.87</u>

Total \$909,516.09

2012 Foster Care Breakdown Year to Date

Child Shelter	\$8,847.10
Treatment Foster	\$85,947.82
Child Foster Care	\$247,380.16
Rule 8 FC	\$75,880.80
Corrections	\$243,012.99
Electronic Monitor	\$352.00
Rule 5	\$99,575.24
Respite	\$8,873.88
Child Care	
Health Services	\$382.00
Transportation	<u>\$6,311.79</u>

Total \$776,563.78

2009 Foster Care Reimbursement

IV-E	\$80,672.00
Rule 5	\$42,553.42
Recoveries	\$82,673.14

Total \$205,898.56

2010 Foster Care Reimbursement

IV-E	\$81,539.76
Rule 5	\$37,364.89
Recoveries	\$130,255.98

Total \$249,160.63

2011 Foster Care Reimbursement

IV-E	\$75,838.00
Rule 5	\$103,505.70
Recoveries	\$127,343.92

Total \$306,687.62

Recoveries include IV-E recoveries from IV-D and Admin recoveries from SSI.

Recoveries may be collected long after child has left placement.

IV-E and Rule 5 equals what has been paid to the county for 2009 expenses.

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Recoveries may be collected long after child has left placement.

IV-E and Rule 5 equals what has been paid to the county for 2011 expenses.

2009 Foster Care Breakdown

	Total	Social Service	Corrections	ICWA
Child Shelter	\$5,786.00	\$850.44	\$4,226.66	\$708.90
Treatment Foster	\$33,811.16	\$0.00	\$33,811.16	\$0.00
Child Foster Care	\$495,964.60	\$396,551.82	\$0.00	\$99,412.78
Rule 8 FC	\$75,567.15	\$19,937.80	\$44,677.35	\$10,952.00
Corrections	\$189,502.10	\$0.00	\$120,750.96	\$68,751.14
Home Monitoring	\$1,504.00	\$0.00	\$1,504.00	\$0.00
Rule 5	\$138,250.40	\$95,414.70	\$0.00	\$42,835.70
Respite	\$7,861.70	\$7,861.70	\$0.00	\$0.00
Child Care	\$670.50	\$670.50	\$0.00	\$0.00
Health Services	\$455.36	\$455.36	\$0.00	\$0.00
Transportation	\$10,803.21	\$10,803.21	\$0.00	\$0.00
Total	\$960,176.18	\$532,545.53	\$204,970.13	\$222,660.52
Total	\$960,176.18			

2010 Foster Care Breakdown

	Total	Social Service	Corrections	ICWA
Child Shelter	\$9,488.00	\$0.00	\$9,488.00	\$0.00
Treatment Foster	\$56,083.53	\$33,226.63	\$22,856.90	\$0.00
Child Foster Care	\$476,817.55	\$346,845.36	\$18,694.69	\$111,277.50
Rule 8 FC	\$76,179.08	\$14,709.60	\$13,372.90	\$48,096.58
Corrections	\$170,224.47	\$0.00	\$66,820.90	\$103,403.57
Home Monitoring/Spec. Equip	\$1,201.39	\$721.39	\$480.00	\$0.00
Rule 5	\$140,169.52	\$103,209.65	\$0.00	\$36,959.87
Respite	\$34,850.93	\$34,065.68	\$0.00	\$785.25
Child Care	\$1,579.00	\$1,579.00	\$0.00	\$0.00
Health Services	\$81.56	\$81.56	\$0.00	\$0.00
Transportation	\$9,584.21	\$9,584.21	\$0.00	\$0.00
Total	\$976,259.24	\$544,023.08	\$131,713.39	\$300,522.77
Total	\$976,259.24			

2011 Foster Care Breakdown

	Total	Social Service	Corrections	ICWA
Child Shelter	\$2,832.90	\$177.00	\$2,655.90	\$0.00
Treatment Foster	\$101,130.13	\$101,130.13	\$0.00	\$0.00
Child Foster Care	\$317,597.09	\$167,153.57	\$11,627.25	\$138,816.27
Rule 8 FC	\$79,291.48	\$45,321.48	\$17,569.80	\$16,400.20
Corrections	\$316,273.71	\$0.00	\$208,352.80	\$107,920.91
18-21	\$1,228.00	\$1,228.00	\$0.00	\$0.00
Rule 5	\$70,889.29	\$70,889.29	\$0.00	\$0.00
Respite	\$8,645.32	\$7,336.52	\$0.00	\$1,308.80
Child Care	\$1,166.65	\$1,166.65	\$0.00	\$0.00
Health Services	\$193.65	\$193.65	\$0.00	\$0.00
Transportation	\$10,267.87	\$10,267.87	\$0.00	\$0.00
Total	\$909,516.09	\$404,864.16	\$240,205.75	\$264,446.18
Total	\$909,516.09			

2012 Foster Care Breakdown Year to Date

	Total	Social Service	Corrections	ICWA
Child Shelter	\$8,847.10	\$2,696.30	\$6,150.80	\$0.00
Treatment Foster	\$85,947.82	\$85,947.82	\$0.00	\$0.00
Child Foster Care	\$247,380.16	\$153,811.99	\$9,783.11	\$83,785.06
Rule 8 FC	\$75,880.80	\$7,061.90	\$43,317.20	\$25,501.70
Corrections	\$243,012.99	\$0.00	\$186,322.39	\$56,690.60
Electronic Monitoring	\$352.00	\$0.00	\$352.00	\$0.00
Rule 5	\$99,575.24	\$99,575.24	\$0.00	\$0.00
Respite	\$8,873.88	\$7,602.38	\$0.00	\$1,271.50
Child Care	\$0.00	\$0.00	\$0.00	\$0.00
Health Services	\$382.00	\$382.00	\$0.00	\$0.00
Transportation	\$6,311.79	\$6,311.79	\$0.00	\$0.00
Total	\$776,563.78	\$363,389.42	\$245,925.50	\$167,248.86
Total	\$776,563.78			

AITKIN COUNTY VOLUNTEER DRIVER TRANSPORTATION

MONTH	MEDICAL TRANSPORTS COMPLETED	OTHER TRANSPORTS COMPLETED*	TRANSPORTS CANCELED OR NO SHOWS	TOTAL TRANSPORTS ARRANGED	COUNTY EXPENSE FOR MEDICAL TRANSPORTS
NOV	59	2	16	77	\$517.31
DEC	65	0	17	82	\$791.49
JAN '12	79	2	16	97	\$702.78
FEB '12	70	1	29	100	\$671.32
MARCH	58	2	20	80	\$838.15
APRIL	81	2	14	97	\$1,211.38
MAY	63	1	22	86	\$764.25
JUNE	73	0	11	84	\$1,052.56
JULY	83	2	17	102	\$1,489.61
AUG	60	2	20	82	\$744.07
SEPT	60	0	9	69	\$916.23
OCT	78	0	18	96	\$960.75
NOV					\$650.84

***COURT, MEDICAL W/NO TRANSPORTATION (SUCH AS MN CARE), VISITATION, ETC.**

As of July 31, 2012 - we have 228 more rides on the books through July this year than in 2011....and beyond that too!

AITKIN-ITASCA-KOOCHICHING COMMUNITY HEALTH BOARD

Talking Points

Meeting Date: October 11, 2012

Financial Information:

- Reviewed the CHS budget and financial reports for various grants. Grants expenditures were on target for the year.

Administrative Information:

- **CHS Annual Audit** - Board Members and Public Health staff have received copies of the 2011 Audit. The Audit has been submitted and our auditor found that our records are in order. If Board members have questions, please contact Sue Erzar, CHS Administrator.
- **Triad Update** - PH supervisors /directors, CHS Grants Manager and the MDH Public Health Nurse Consultant make up Triad Group. The group has been meeting at least monthly and sometimes more frequently either by telephone conference or face-face. Most recently we have met to develop the Community Assessment data sets which will be used for our Assessment Plan. We have been reviewing available data and data sets and sources to best assess our 3 counties. Amy Westbrook, our regional Epidemiologist and Marie Margitan, our regional MDH representative have assisted us in developing this tool. Sue shared a handout which showed the areas we have reviewed. Our final product will be used as part of the Local Public Health Assessment which is a required assessment of our communities public health. The next step is populating the data onto the tool. We will be contracting with a UMD student to enter the data. This tool will list health indicators and will review statistics and trends in each of the three counties and for the tri-county as a whole over several years. Staff will be able to populate this tool going forward so that we can continue to monitor trends. Sue also noted that we will work with area hospitals who also are charged with completing a health assessment for hospitals.
- **Electronic Medical Records (EMR)** - All 3 counties are required to have EMR capabilities by 2015. We have explored plans to purchase the CHAMPS system as a three county entity. Each county would hold their own licenses and we have been offered a discounted price if we purchase as a three county CHS. We are currently reviewing the contract offered by CHAMPS in all 3 counties, and the CHS Board has approved the allocation of \$20,000 toward the purchase price. Lester Kachinske, Itasca County Health and Human Services Director thanked the CHS Board for the allocation of funds to aid in the purchase of this system. Sue shared a sample of the training schedule and training which would be provided if we move forward. C. Bennett noted she had attended a training regarding the system and felt it would be extremely timesaving for staff. S. Erzar also noted that this tool will help all counties be accountable for staff time and costs. B. McBride further noted that it is mandated by the state and federal government that an EMR system be in place by 2015.

- **CHS Conference** – The annual Community Health Conference was held October 3-5 at Cragun’s Conference Center in Brainerd. We had good attendance from our 3 counties including: Cynthia Bennett, Laurie Westerlund and Ihleen Williams from Aitkin County and Sue Erzar from Itasca County. Those who attended presented high points of the conference and the sessions they attended.
- **Other – Koochiching County Board Appointments** – Terms of office for Board Members from Koochiching County expire December 31, 2012. Current Board Members are eligible for reappointment.
- **Other – Congratulations to Mike Hanson – Koochiching County Commissioner** on his retirement, and thanks for his many years of service on the Community Health Board as a member and alternate, and Chair of the CHS Board.

Local Public Health Report:

Sue Erzar, Itasca County Public Health Division Manager, is the tri-county CHS Local Public Association representative. She presented information including:

- The Local Public Health Association met prior to the Community Health Conference on October 3. A major discussion item is helping Public Health to be better at articulating what Public Health does, so that the public can understand what Public Health means for them.
- 4 Areas addressed by Public Health include: Prevention, Populations, Health Needs on a daily basis; and Local Needs.
- LPHA is looking at Local Public Health Act Performance Measures for the Planning and Reporting system.
- The group is working on the 2013-15 Strategic Plan for LPHA.
- LPHA is reviewing the Disease Prevention and Control Common Activities framework.

State CHS Advisory Committee (SCHSAC) Report:

Cynthia Bennett, Aitkin County Public Health Supervisor is the Tri-County CHS State CHS Advisory Committee Representative. presented information including:

- The SCHSAC Group met October 3rd in conjunction with the opening of the State Community Health Conference. Minutes of the meeting have not been distributed and Cynthia will send them when they are available. Some of the items discussed included:
- A review of all committees and general reports of SCHSAC workgroups. If anyone would like copies of these reports, Cynthia Bennett can provide them.
- A major focus for SCHSAC will be investment in the Statewide Health Improvement Plan (SHIP) and Core Public Health systems.
- SCHSAC Local Public Health Infrastructure Work Group is reviewing the statute (MN 145.A), which authorizes Community Health Services in the state, to clarify the provisions for a CHS director.
- The state Health Commissioner is visiting counties throughout the state doing a “Pitch the Commish” visit of playing horseshoes and chatting with county commissioners.
- Cynthia thanked Laurie Westerlund, Aitkin County Commissioner for work as a SCHASAC alternate during this past year.

- **Public Health Reports:**

- Reports were presented by Public health staff from each county.

Next Meeting:

- The next meeting of the Community Health Board will be December 13, 2012 in Grand Rapids.

AITKIN COUNTY HEALTH & HUMAN SERVICE ADVISORY COMMITTEE MEETING MINUTES

Wednesday, September 5, 2012

Committee Members Present:

Vernon Awes
 Roberta Elvecrog
 Mickey Gault
 Renee Larson
 David Leaf
 Robert Lewis
 Tricia Martin, ACCare
 Sara Math, AFSCME Union Rep
 Cheryl Meld
 Michele Plagman
 Commissioner Anne Marcotte
 Commissioner Laurie Westerlund

Others Present:

Tom Burke, Director
 Julie Lueck, Clerk to this Committee

Absent:

Kathy Barker
 Jim Carlson
 Kami Genz, CMCC

I. Approval of Agenda

Motion by Cheryl Meld, seconded by Mickey Gault, and carried; the vote was to approve the Agenda with the addition of VII. – B. Topics for Discussion/Presentations, and C. January 2013 meeting date.

II. Approval of Minutes of the August 1, 2012 Meeting

Motion by Bob Lewis, seconded by Vern Awes, and carried; the vote was to approve the August 1, 2012, minutes as mailed.

III. McGregor Community Education – Lisa Kruse gave a PowerPoint Presentation with an overview of the McGregor Community Education programs. (See the attached list along with the PowerPoint Presentation.)

IV. Hot Topics for Discussion

A. HHS Budget – Tom Burke. Overall levy increase is approximately 1.6% for 2013. Tom noted that our services have increased and many are unpredictable such as the out of home placement costs. The Public Health dollar amounts are estimates as the Department of Health hasn't given us the funding amounts for the mandated services. None of the mandates have been reduced but the funding for them gets reduced. Another important change to be noted is the fact that only one parent will get a state funded attorney in parental rights court cases. Therefore, the county may pay for that second attorney to avoid an appeal process in the end. Tom also discussed how the Operating Balance covers us when the State delays their payments to us. He also noted when the political parties change; it tends to change how we earn or spend the money

and how we report our spending. Tom noted that the preliminary budget/levy will be set next week and the final budget/levy will be set in December. (See the attached Budget documents.)

B. PH Case Management System – Tom Burke noted we are working towards a Tri-County (Aitkin, Itasca, Koochiching counties) web based system (CHAMPS) in the area of Public Health case management where the three counties would act as one so as we move towards regionalizing we would all have a similar system in place.

V. Comments:

A. Comments from the Committee Members for the Commissioners relative to HHS

Nothing noted at this meeting.

B. Feedback from the Board Meetings – from those folks who attended the meeting:

August 28 Meeting – Roberta Elvecrog & Vern Awes noted that the meeting had a lot of discussion on the budget, the Workforce Center, the encryption system, and the Website for Arrowhead Transit.

C. Committee Members scheduled to attend upcoming Board Meetings in 2012

SEPTEMBER 25	Bob Lewis	Roberta Elvecrog
OCTOBER 23	Mickey Gault	Roberta Elvecrog
NOVEMBER 27	Roberta Elvecrog	Cheryl Meld
DECEMBER 18	Tricia Martin	Cheryl Meld

VI. Community Recognition

A. Tricia noted that the Newspaper on Tape recognition would be presented next week.

VII. Miscellaneous Discussion

A. Sign-Up to Serve the Community Meal at First Lutheran in Aitkin on October 8th

The sign-up sheet was passed around and all areas of preparation/serving/providing food are covered.

B. Topics for Discussion/Presentations

It was decided that we would reschedule the Riverwood Expansion Project for December 5th since it was canceled from the June 6th meeting due to the air conditioning issue in the HHS building. It was also noted that the November 7th meeting will have a SHIP Update presentation by Stacey Durgin along with a sub-topic of the Community Transformation Grant. We will invite the AEOA/NEMOJT staff from the Workforce Center in Aitkin to give a presentation at the January meeting and a contact will be made to Second Harvest to ask them to present at the February, 2013 meeting.

C. January 2013 Meeting – Currently scheduled for January 2nd will be rescheduled to January 9th.

IX. Adjourn

Motion by Bob Lewis, seconded by Renee Larson, and carried; the vote was to adjourn the meeting at 4:47 p.m.

Roberta Elvecrog, Chairperson

Julie Lueck, Clerk to
Aitkin County Health & Human Services Advisory Committee

The following documents were included in the packet of information sent to members for review prior to the meeting or distributed at the meeting:

- Draft copy of the Minutes of the August 1, 2012, Advisory Committee Meeting
- Draft copy of the August 28, 2012 Health & Human Services Board Meeting Minutes will be handed out at this meeting.
- Summary pages of the Health & Human Services 2013 Budget

**AITKIN COUNTY HEALTH & HUMAN SERVICE
ADVISORY COMMITTEE MEETING MINUTES
Wednesday, November 7, 2012**

Committee Members Present:

Vernon Awes
Jim Carlson
Roberta Elvecrog
Mickey Gault
Kami Genz, CMCC
Renee Larson
David Leaf
Robert Lewis
Tricia Martin, ACCare
Sara Math, AFSCME Union Rep
Michele Plagman
Commissioner Laurie Westerlund

Others Present:

Kathy Ryan, Fiscal Supervisor
Sue Tange, Social Service Supervisor
Julie Lueck, Clerk to this Committee

Absent:

Cheryl Meld
Kathy Barker
Commissioner Anne Marcotte

I. Approval of Agenda

Motion by Dave Leaf, seconded by Vern Awes, and carried; the vote was to approve the Agenda as mailed.

II. Approval of Minutes of the September 5, 2012 Meeting

Motion by Bob Lewis, seconded by Renee Larson, and carried; the vote was to approve the September 5, 2012, minutes as mailed.

III. Riverwood Expansion Project – Kris Layne

Sub-topic/Introduction: Access to Health Care Services & importance to Provider that clients have MA/MNCARE – Kathy Ryan introduced Kris Layne as follows: One of the responsibilities of Public Health is to assure access to services, this refers to activities that guarantee quality services, in this case quality health care services for individuals living in our county. One way we can do that is to make sure our local service providers are able to remain viable. Our HHS income maintenance unit helps individuals get on MA or MNCare so that there will be a pay source for service. If the hospital or clinic doesn't get paid, they will lose money and then we will need to figure out how to acquire the services for individuals. Even though we are separate organizations, we need to support each other and work together for our county residents to benefit. As demographics, trends related to chronic disease, and the needs of our population in our county change our service providers need to change too. Thus things like expansion projects occur.

Kris Layne spoke to the committee about the \$21 million expansion project that began in the spring of 2011 which is due to be completed next spring (2013). They had a five year plan and accelerated it into a one year plan. When they moved into the hospital originally it was not exactly what they wanted but they built to the dollars they had at that time. They began this project by looking at the infusion room which now offers lots of options with a separate entrance, with private bays (5) of which one has a bed. It is called "Infusion Services" which allows for other services like blood infusions or antibiotic infusions in addition to the chemotherapy.

The next area that opened was a building added on the hospital grounds which is located off the southwest end. This is the ICU area which is built in an L with the nurse's desk in the middle with much better visibility to the patients. The ICU, inpatient and OB areas were developed with "zones" for patient care with dark flooring for the patient area and where the windows are, there are sleeper sofas for the family. They have a communication board for family contacts, phone numbers and information. The patient boards tell who the nurse, doctor, and therapist is along with the expected release date, special considerations, special diet information, etc.

They opened the inpatient area on April 23rd, 2012. All the new rooms have ceiling lifts that track all the way into the bathrooms. They also have walking slings.

The hallways are being renovated along with the current med room which was too small. They also added a birthing suite with three OB beds in separate areas. Security was an issue so doors are now locked and badges are used for the family members.

They are going to be redoing some of the support services such as the surgery area, especially the sterilization area. The Mike Ryan facility was added on and opened July 2012. They now have all staff on one campus. They also now have a collection box outside so you can drop off a payment.

They have expanded the physical therapy area and expanded that waiting area and also provided an area for the orthopedic doctors.

Question as to whether they might have dialysis in house one of these days. It is being looked into but there are other criteria needed. Need a nurse manager with experience, a nephrologist, a doctor to oversee the patients and yet not take the patients away from another facility. They currently have 29 patients in Aitkin County that need dialysis.

IV. Hot Topics for Discussion – Nothing noted at this time.

V. Comments:

A. Comments from the Committee Members for the Commissioners relative to HHS – Nothing noted at this time.

B. Feedback from the Board Meetings – from those folks who attended the meeting:
September 25 Meeting was canceled.
October 23, Meeting – Roberta Elvecrog - No comments at this time.

C. Committee Members scheduled to attend upcoming Board Meetings in 2012

NOVEMBER 27
DECEMBER 18

Roberta Elvecrog
Tricia Martin

Cheryl Meld
Cheryl Meld

VI. Community Recognition

- A. Motion by Michelle Plagman, seconded by Tricia Martin, and carried, the vote was to present Certificates of Recognition to the following:**
1. The Community Choir performing the Messiah, directed by Brian Johnson contributing to the Well-Being of the Community.
 2. Sandy Kilde, directing the McGregor Contata, contributing to the Well-Being of the Community.
 3. The Great River Strings contributing to the Well-Being of the Community.

VII. Miscellaneous Discussion

- A. It was noted that the Education Foundation for the Aitkin Schools** will be having a Variety/Talent Show on Saturday, November 24th.
- B. Community Meal** – Even though the date was switched, we need a minimum of six people while they are serving. We will reserve October 7th, 2013, to serve in Aitkin and the third Wednesday in May, the 15th, in 2013 to serve in McGregor.
- C. Update on Operation Christmas** - Jim Carlson updated the committee that Molly Dox is co-chairing the project for the Aitkin area and Jim is co-chairing for the McGregor area. The sign up procedure will be appear in the Aitkin Age and Voyageur Press when it gets closer. This year they plan to allow \$40 per child and it will be held at the Moose Lodge in Aitkin on December 11-13. They will be promoting it on the radio three times and noted there are 8 drop off sites in the McGregor/Palisade area and 5 places in the Aitkin area. The program serves about 600 kids per year. **Motion by Dave Leaf, seconded by Laurie Westerlund, and carried,** the vote was to present a community recognition to the Operation Christmas Committee.
- D. Lakes Area Restorative Justice Program** – Kami Genz informed the committee of this new program referred down from the court. It is a decision-making power for juveniles to own up and take responsibility for the crime they committed. They are looking for community members as volunteers on the committee.
- E. Advisory Committee Member Terms** – Those Advisory Committee Members whose terms expire December 31, 2012, include: Kathy Barker, Mickey Gault, Kami Genz, Dave Leaf, Sara Math and Cheryl Meld. Julie will send out applications to each of these current members to complete and send back if they are interested in serving another term. It was noted that advertising for the positions must also take place and the actual appointment or re-appointment to the position will take place at the December 18th meeting.

IX. Adjourn

Motion by Commissioner Westerlund, seconded by Tricia Martin, and carried; the vote was to adjourn the meeting at 4:50 p.m.

Roberta Elvecrog, Chairperson

Julie Lueck, Clerk to
Aitkin County Health & Human Services Advisory Committee

The following documents were included in the packet of information sent to members for review prior to the meeting or distributed at the meeting:

- Draft copy of the Minutes of the September 5, 2012, Advisory Committee Meeting
- Draft copy of the October 23, 2012 Health & Human Services Board Meeting Minutes
- Notice of Canceled September 25th, 2012 H&HS Board Meeting in Lieu of Agenda