IONIA COUNTY BOARD OF COMMISSIONERS
BOARD OF COMMISSIONERS MEETING
MAY 28, 2024 – 3:00 P.M.
101 WEST MAIN STREET
IONIA, MICHIGAN

THIS MEETING WILL BE HELD IN PERSON AND ZOOM

AGENDA

I. Call to Order

II. Pledge of Allegiance

III. Invocation

IV. Approval of Agenda
A. Consideration of additional items

V. Public Comment (Three-minute time limit per-speaker – please state name/organization)

VI. Action on Consent Calendar
A. Approve minutes of the previous meeting (s)
B. Approve per diem and mileage
C. Approve payments of Common Cash and General Fund Payroll for the month of April 2024- $ 1,671,355.01
D. Approve payments of Health Department payroll and accounts payable for the month of April 2024-$ 135,689.09
E. Approve payments of Road Department payroll and accounts payable for the month of April 2024-$ 727,946.04
F. Approve payments from Trust and Agency for the month of April 2024- $3,993,411.59

VII. Unfinished Business

VIII. New Business
A. Resolution of Appreciation-Rhonda Lake
B. Resolution of Appreciation-Suana McDaniels
C. Appointment to Park Advisory Board
- Cindy Cotter, Easton Township Representative, two year term

D. Request Approval of 2024 L-4029 Tax Rate-Tony Meyaard
E. Approval of contract renewal with Blue Cross Blue Shield for inmate insurance-Sheriff Charlie Noll
F. Request Approval for extension to Chip Seal and Fog Seal Contract- Linda Pigue
G. Request to extend Crack Seal Contract-Linda Pigue

H. Request to replace rear lift of Bay One's Hoist-Linda Pigue
I. Request to replace State Trunkline Pickup Truck-Linda Pigue
J. Road Department ARPA Funds allocation recommendation-Linda Pigue

IX. Department Reports

A. Public Defender
B. Commission on Aging

X. Reports of Officers, Boards, and Standing Committees

A. Chairperson
B. Board of Commissioners
C. County Administrator

XI. Reports of Special or Ad Hoc Committees

XII. Public Comment (3-minute time limit per speaker)

XIII. Closed Session

XIV. Adjournment

Board and/or Commission Vacancies

- Economic Development Corporation/Brownfield Redevelopment Authority – Two- three-year terms.
- Central Dispatch-One-two-year Emergency Medical Representative and one-two-year Township Board Representative
- Solid Waste Planning Committee-one-two-year term serving as industrial waste generator representative, one-two year term serving as General Public Representative
- Area Agency on Aging of Western Michigan Advisory Council-one three-year term
- Land Bank Authority- one-three-year term

Appointments for consideration in the month of May 2024:

- NONE

Appointments for consideration in the month of June 2024:

- Solid Waste

IONIA COUNTY BOARD OF COMMISSIONERS
David Hodges, Chairman

May 14, 2024, 3:00 p.m.
Minutes

Members Present: County Commissioner David Hodges, County Commissioner Scott Wirtz, County Commissioner Larry Tiejema, County Commissioner Phil Hesche, County Commissioner Gordon Kelley, County Commissioner Jack Shattuck, County Commissioner Terence Frewen

Members Absent:

Other Present: County Administrator Patrick Jordan, County Finance Director Bernadette Blonde, County Clerk Greg Geiger

I. Call to Order
Hodges called the meeting to order at 3:00 p.m.

II. Pledge of Allegiance
Hodges led pledge of allegiance.

III. Invocation
Hodges led the Invocation.

IV. Approval of Agenda
Board discussed agenda and added items regarding Commission on Aging Fundraiser, Commission on Aging Transportation Services and removed closed session item.

Motion to Approve Agenda as Amended
Moved by Frewen
Supported by Kelley
Motion carried by voice vote

V. Public Comment
Steve Hodgkins inquired about proposed homeless shelter.
Kim Cain commented on proposed homeless shelter.
Tracy Hodgkins commented on proposed homeless shelter.
Amanda Ferris commented on proposed homeless shelter.
Amy Herbruck commented on proposed homeless shelter.
Mariah Mulford commented on proposed homeless shelter.
Steve Hodgkins commented on proposed homeless shelter.
Terri Legg commented on proposed homeless shelter.
Bob VanLente commented on proposed homeless shelter.

VI. Action on the Consent Calendar

Consent Agenda was approved by unanimous consent.

VII. Unfinished Business

No unfinished business.

VIII. New Business

Board discussed appointment of Mary Montgomery-Colvin to the Commission on Aging Board for a three-year term.

Motion to Appoint
Moved by Wirtz
Supported by Shattuck
Motion carried by voice vote

Board discussed approval of Ionia County Community Corrections FY25 Grant Application. Circuit Court Administrator Selina Schmidt presented the application and recommended approval

Motion to Appoint
Moved by Tiejema
Supported by Wirtz
Motion carried by voice vote

Board discussed Resolution for Ionia County Community Corrections FY25 Grant Application. Circuit Court Administrator Selina Schmidt presented the resolution and recommended approval

Motion to Appoint
Moved by Tiejema
Supported by Kelley
Motion carried by roll call vote

Board discussed request to appoint Remonumentation Grant Administrator.

Motion Appoint Tami Hewitt as Remonumentation Grant Administrator for Ionia County
Moved by Frewen
Supported by Tiejema
Motion carried by voice vote

Board discussed request for environmental health software update. Health Department Director Chad Shaw presented the request and recommended approval.

Motion to Approve

Moved by Shattuck
Supported by Frewen
Motion carried by voice vote

Board discussed request to purchase marine patrol boat. Sheriff Charlie Noll presented the request and recommended approval.

Motion to Approve
Moved by Wirtz
Supported by Tiejema
Motion carried by voice vote

Board discussed request to purchase radiant tube heaters. Road Department Director Linda Pigue presented the request and recommended approval.

Motion to Approve Radiant Tube Heater Replacement
Moved by Frewen
Supported by Kelley
Motion carried by voice vote

Board discussed request to replace floor drain. Road Department Director Linda Pigue presented the request and recommended approval.

Motion to Approve Replacement
Moved by Tiejema
Supported by Kelley
Motion carried by voice vote

Board discussed request to lease Motor Grader. Road Department Director Linda Pigue presented the request and recommended approval.

Motion to Approve Motor Grader Lease
Moved by Kelley
Supported by Wirtz
Motion carried by voice vote

Board discussed request to establish road name for Private Road. Road Department presented the request and recommended approval.

Motion to Approve Private Road Name
Moved by Kelley
Supported by Frewen
Motion carried by voice vote

Board discussed request to accept bid for slag stone. Road Department presented the request and recommended approval.

Motion to Accept Bid for Slag Stone
Moved by Frewen
Supported by Tiejema
Motion carried by voice vote

Board discussed request to accept bid for limestone. Road Department presented the request and recommended approval.

Motion to Accept Bid for Limestone
Moved by Frewen
Supported by Shattuck
Motion carried by voice vote

Board discussed request to appoint Tiejema to Ionia County Local Development Finance Authority. Jordan presented the appointment

Motion to Appoint Tiejema to LDFA
Moved by Frewen
Supported by Shattuck
Motion carried by voice vote

Board discussed request to replace ceiling stones. Maintenance Director Rod Steele presented the request and recommended approval.

Motion to Approve
Moved by Kelley
Supported by Tiejema
Motion carried by voice vote

Board discussed accepting funds for Commission on Aging Transportation. Commission on Aging Director Carol Hanulcik presented the item and recommended approval.

Motion to Approve
Moved by Shattuck
Supported by Frewen
Motion carried by voice vote

Board discussed approval of Ionia Theater Fundraiser for the Commission on Aging. Commission on Aging Director Carol Hanulcik presented the c.

Motion to Approve
Moved by Tiejema
Supported by Frewen
Motion carried by voice vote

IX. Department Reports

Board reviewed report from Register of Deed's Office.
Board reviewed written and oral report from The Right Door.
Board reviewed written and oral report from the Clerk's Office.
Board reviewed written and oral report from the Health Department.
Board reviewed written and oral report from the Treasurer's Office.

X. Reports of Officers, Boards, and Standing Committees

Hesche commented on proposed transmission line.
Wirtz commented on airport board meeting.
Frewen commented on DHHS meeting and Road Department.
Tiejema commented on meeting with County Auditor.
Shattuck commented on park board and Law enforcement appreciation week.
Jordan commented on new finance staff member, union and contract negotiations, opioid steering committee.

XI. Reports of Special or Ad Hoc Committees

No Special or Ad Hoc Committee reports.

XII. Public Comment

Melissa Eldridge commented on materials management committee.
Tom Millard commented on City events and sound system along Main Street.

XIII. Adjournment

Motion to Adjourn at 5:37 p.m.
Moved by Shattuck
Supported by Tiejema
Motion carried by voice vote

David Hodges, Chairman

Greg Geiger, County Clerk

County of Ionia

Request for Per Diem and Mileage

Commissioner Frewen

April, 2024

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Afternoon Meeting	04/09/2024	2	$50.00	38.6	$25.86
Commissioners Afternoon Meeting	04/23/2024	2	$50.00	38.6	$25.86
Grievance Committee				0	$0.00
Personel Committee					$0.00
Board of Public Works					$0.00
DHHS Board Meeting	04/04/2024	Absent			$0.00
Eightcap Governing Board				84	$56.28
ICEA Meeting	04/25/2024	1	$50.00	vitual	$0.00
Road Dept Meeting	04/01/2024	1.5	$50.00	36	$24.12
Road Dept Meeting	04/15/24	2	$50.00	36	$24.12
Strat Plan interview	04/02/24	0.5		38.6	$25.86
admin mtg	04/08/24	0.5	$50.00	38.6	$25.86
elected officials meeting	04/08/24	2	$50.00	36	$24.12
Admin/ Road director mtg.	4/16/2024	1	$50.00	38.6	$25.86
finance meeting	04/22/24	1	$50.00	38.6	$25.86
IT mtg	04/23/24	1	$50.00	0	$0.00
MAC Conference	04/30/2024	5	$75.00	50.2	$33.63
MAC Conference	05/01/2024	3	$50.00	50.2	$33.63
				485.4	
Total Per Diem Requested:			$625.00		
Total Mileage Requested:					$351.08
			Total	$976.08	
Terence M. Frewen			05/01/24		
Signed Terence M. Frewen				***Date***	

Per Diem Rates: Board of Commissioner Meetings are $50; Committee and all other meetings are $25 for up to one hour, $50 for one to three hours, and $75 for more than three hours.

Mileage for 2023 is 65.5 cents

County of Ionia
Request for Per Diem and Mileage

Commissioner [redacted] Hesche

April **2024**

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Meeting	9-April				~~8~~
Commissioners Meeting	23-April				24
Special Board Meeting					
Grievance Committee					
Personnel Committee					
Board of Public Works					
Department of Human Services Board					
Eight Cap Governing Board					
Ionia County Economic Alliance					
Road Department Meeting					
Other: Twp Sup meet	9-April				24
Fac meet	9-April				24
MML w m TA	18-April				84

Total Per Diem Requested:

Total Mileage Requested:

Signed [signature]

5-may 24

Date

Per Diem Rates: Board of Commissioner Meetings are $50 for one to three hours, and $75 for more than three hours.
Committee and all other meetings are $50 for up to one hour
Mileage for 2024 is .67 cents per mile.

County of Ionia
Request for Per Diem and Mileage

Commissioner Chairman Hodges

Jan. **2024**

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Meeting	1-9-24		50.00	38	25.46
Commissioners Meeting					
Special Board Meeting					
Facilities Committee					
Grievance Hearing Committee					
Airport Board					
Community Mental Health					
Emergency Management Council					
Park Advisory Board					
SW Michigan Alliance for Region Three					
West Michigan Regional Planning Comm					
Other:					

Total Per Diem Requested: 50.00

Total Mileage Requested: 25.46

David R Hodges
Signed

4-23-24
Date

Per Diem Rates: $50 for meetings up to three hours; $75 for meetings more than three hours

Mileage for 2024 is .67 cents per mile.

County of Ionia
Request for Per Diem and Mileage

Commissioner Chairman Hodges

March **2024**

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Meeting	3-12		50.00	38	25.46
Commissioners Meeting					
Special Board Meeting					
Facilities Committee	3-12		50.00	38	
Grievance Hearing Committee					
Airport Board	3-12		50.00	0	
Community Mental Health	3-18		50.00	0	
Emergency Management Council					
Park Advisory Board					
SW Michigan Alliance for Region Three					
West Michigan Regional Planning Comm					
Other: Mental Health	3-25		50.00	0	
M					

Total Per Diem Requested: $ 250.00

Total Mileage Requested: $ 25.46

David R Hodges
Signed

4-23-24
Date

Per Diem Rates: $50 for meetings up to three hours; $75 for meetings more than three hours

Mileage for 2024 is .67 cents per mile.

County of Ionia
Request for Per Diem and Mileage

Commissioner Chairman Hodges

April 2024

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Meeting	4-9		50.00	0	
Commissioners Meeting	4-23		50.00	38	25.46
Special Board Meeting					
Facilities Committee	4-9		50.00	38	25.46
Grievance Hearing Committee					
Airport Board					
Community Mental Health	4-15		50.00	38	25.46
Emergency Management Council					
Park Advisory Board					
SW Michigan Alliance for Region Three					
West Michigan Regional Planning Comm					
Other: Meeting Patrick, Tim, Terry	4-8		25.00	38	25.46
Meeting, Patrick, Linda, Terry	4-16		50.00	38	25.46
meeting: Finance	4-22		50.00	38	25.46

Total Per Diem Requested: $325.00

Total Mileage Requested: $152.76

David R Hodges
Signed

4-23-24
Date

Per Diem Rates: $50 for meetings up to three hours; $75 for meetings more than three hours

Mileage for 2024 is .67 cents per mile.

County of Ionia
Request for Per Diem and Mileage

Commissioner Kelley

APRIL **2024**

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Meeting	4/9	1-1/2	50		
Commissioners Meeting					
Special Board Meeting					
Facilities Committee	4/9	1-1/2	50		
Personnel Committee					
Brownfield Redevelopment Authority					
Commission on Aging Board	4/18	1'1/2	50		
Mid-West Trail Authority					
Road Department Meeting	4/1	1'1/2	50		
West Michigan Regional Planning Comm					
ROAD DEPT MTG	4/15	2	50		
Other:					
STRATEGIC PLAN INTERVIEW	4/2	1/2	50		

Total Per Diem Requested: 300

Total Mileage Requested: —

Signed: J Kelley

Date: 4/1/2024

Per Diem Rates: $50 for meetings up to three hours; $75 for meetings more than three hours

Mileage for 2024 is .67 cents per mile.

County of Ionia
Request for Per Diem and Mileage

Commissioner Shattuck

apr. **2024**

Board/Commission	Date	Hours	Per Diem	Miles	Mileage
Commissioners Meeting	4-9		0		
Commissioners Meeting	4-23		50.00		12.00
Special Board Meeting					
Airport Board	4-9		0		
Airport Zoning Board					
Audit Committee					
Bargaining Committee Representative					
Lake Board-Jordan Lake					
MAC Workers' Comp Board					
MSU Extenstions Council	4-24		50.00		11.00
SMART					
Parks Advisory Board	4-10		0		
Laptop training	4-23	2.	50.00		0
Other: Planning Meeting	4-2		50.00		12.00
Solid Waste					

Total Per Diem Requested: 200.00

Total Mileage Requested: 35.00

Signed Jack Shattuck

Date 5/14/24

Per Diem Rates: $50 for meetings up to three hours; $75 for meetings more than three hours

Mileage for 2024 is .67 cents per mile.

Michigan Department of Treasury
614 (2-03)

This form is issued under MCL Sections 211.24e, 211.34 and 211.34d. Filing is mandatory; Penalty applies.

ORIGINAL TO: County Clerk(s)
COPY TO: Equalization Dept.(s)
COPY TO: Each Twp or City Clerk

L-4029

2024 TAX RATE REQUEST
MILLAGE REQUEST REPORT TO COUNTY BOARD OF COMMISSIONERS

County		2024 Taxable Value	2,218,042,514	W/O RZ
	Ionia		**2,218,042,514**	**With RZ**
Local Government Unit				
	Ionia County			

PLEASE READ THE INSTRUCTIONS ON THE REVERSE SIDE CAREFULLY.

You must complete this form for each unit of government for which a property tax is levied. Penalty for non-filing is provided under MCL Sec. 211.119.
The following tax rates have been authorized for levy on the 2024 tax roll.

(1) Source	(2) Purpose of Millage	(3) Date of Election	(4) Millage Authorized by Election, Charter, etc.	(5) 2023 Millage Rate Permanently Reduced by MCL 211.34d	(6) Current Year Millage Reduction Fraction	(7) Millage Rate Permanently Reduced by MCL 211.34d	(8) Sec. 211.34 Millage Rollback Fraction	(9) Maximum Allowable Millage Rate*	(10) Millage Requested to be Levied July 1	(11) Millage Requested to be Levied Dec. 1	(12) Expiration Date of Millage Authorized
ALLOCATED	OPERATING		4.6434	4.5711	0.9962	4.5537	1.0000	4.5537	4.5537		unlimited
Voted	Library Operating	Aug-16	1.2339	1.2159	0.9962	1.2112	1.0000	1.2112		1.2112	Dec-27
Voted	Senior Citizen COA	Aug-20	0.5000	0.4921	0.9962	0.4902	1.0000	0.4902		0.4902	Dec-29
Voted	Roads	Aug-23	1.0000	1.0000	0.9962	0.9962	1.0000	0.9962		0.9962	Dec-29

Total Mills Summer/Winter 7.2513

Prepared by	Title	Date
Anthony E. Meyaard	**Equalization Director**	**5/20/2024**

As the representatives for the local government unit named above, we certify that these requested tax levy rates have been reduced, if necessary, to comply with the state constitution (Article 9, Section 31), and that the requested levy rates have also been reduced, if necessary, to comply with MCL Sections 211.24e, 211.34, and for LOCAL school districts which levy a Supplemental (Hold Harmless) Millage, MCL 380.1211(3).

	Signature	Type Name	Date
☐ Clerk ☐ Secretary			
☐ Chairperson ☐ President			

**Under Truth in Taxation, MCL Section 211.24e, the governing body may decide to levy a rate which will not exceed the maximum authorized rate allowed in column 9. A public hearing and determination is required for an operating levy which is larger than the base tax rate but not larger than the rate in column 9.*

IONIA COUNTY BOARD OF COMMISSIONERS
REQUEST FOR DISCUSSION/ACTION

Blue Cross/Blue Shield Inmate Insurance Program
05/28/2024

CONTACT:
Sheriff Charlie Noll

DESCRIPTION:
Contract renewal with Blue Cross Blue Shield for inmate insurance.

OTHER DEPARTMENTS/AGENCIES AFFECTED:
Click here to enter text.

FINANCIAL ANALYSIS:
Renewal of our current contract reduces the cost of inmate medical bills. There is no change in their administrative fee of 15%. We will still see a cost reduction for medical services of 45% There is no cost to the county for entering into the contract.

LEGAL REVIEW:

DEADLINE:
05/28/24 Board meeting

SPECIFIC ACTION REQUESTED (PROPOSED BOARD MOTION):
Ionia County Board of Commissioners approve contract with Blue Cross/Blue Shield for inmate medical coverage and authorize signatures.

ADMINISTRATOR'S RECOMMENDATION:
County Administrator Recommends approval of this request.

Blue Cross Blue Shield Blue Care Network of Michigan

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

2024 ASC Group - Customer Signature Page(s)

Effective for 08/01/2024 – 07/31/2025

Between Blue Cross Blue Shield of Michigan and

IONIA COUNTY JAIL (CID - 621845)

Group customer agrees to sign the specified documents listed below ("Documents"). BCBSM countersignatures will be captured via a separate Signature Page and appended to these Documents. Copies of these fully-executed Documents will be shared with all parties upon completion. By providing their signatures, all parties are legally bound by the terms and conditions in the Documents referenced. Group agrees that no certification authority or other third-party verification is necessary to validate Group's Signature, and that the lack of such certification or third-party verification will not in any way affect the enforceability of Group's Signature or the Documents.

Documents Included:

- **ASC Schedules and Exhibits**
  - Schedule A
  - Exhibit 1 to Schedule A
  - Schedule B
  - Exhibit 1 to Schedule B

AGREED AND ACCEPTED.

GROUP CUSTOMER:

By: (Signature)	
Name: (Print)	Charlie McCall
Title:	Sheriff
Date:	5-21-24

Blue Cross Blue Shield Blue Care Network of Michigan

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Cover Sheet for BCBSM 2024 ASC Contractual Documents

IONIA COUNTY JAIL (CID - 621845)

The following documents are included for review and agreement between Group Customer and Blue Cross Blue Shield of Michigan.

Documents Included:

- **ASC Schedules and Exhibits**
  - Schedule A
  - Exhibit 1 to Schedule A
  - Schedule B
  - Exhibit 1 to Schedule B

Blue Cross Blue Shield of Michigan
SCHEDULE A – Renewal Term (Effective 08/01/2024 thru 07/31/2025)
Administrative Services Contract (ASC)

1. **Group Name** Ionia County Jail
2. **Customer ID** 621845
3. **ASC Funding Arrangement** Monthly Invoice
4. **Line(s) of Business and Services**

Line of Business	Applicable
Facility	X
Professional	X
Prescription Drugs	X
Dental	X
Vision	
Hearing	

5. **Administrative Fees**

The below administrative fees cover the Lines of Business and Services checked in Section 4 above, unless otherwise indicated.

A. **Fixed Administrative Fees – *Not Applicable***

B. Variable Administrative Fees	Percentage	Effective Start Date	Effective End Date
i. Administrative Fee Percent (%) of Claims	15.00%	08/01/2024	07/31/2025

In lieu of a fixed administrative fee, BCBSM will retain as Additional Administrative Compensation (AAC), 9.50 percent of the Michigan Hospital discounts. AAC is included in the medical Claims cost. The AAC is separate from and does not include BlueCard fees.

6. **Data Feeds – *Not Applicable***

7. **Advance Deposit – *Not Applicable***

8. **Advance Deposit Monthly Cap / Level Payment Amount – *Not Applicable***

9. **BCBSM Account**

1840-09397-3	Comerica	0720-00096
Wire Number	Bank	American Bank Association

10. **Late Payment / Interest Charges**

Late Payment Charge	2.00%
Health Care Provider Interest Charge	12.00%

11. **Buy-Ups – *Not Applicable***

12. Shared Savings Programs

BCBSM has implemented programs to enhance the savings realized by its customers. As stated below, BCBSM will retain as administrative compensation a percent of the recoveries or cost avoidance. Administrative compensation retained by BCBSM through the Shared Savings Program will be available through reports obtained on eBookshelf:

Program:	**BCBSM Retention of:**	
A. Hospital Bill Review	30%	Cost avoidance of improper hospital billing through line-by-line reviews of certain DRG outlier and/or percent-of-charge inpatient claims to identify defects and improprieties before the bill is paid.
B. Advanced Payment Analytics	30%	Recoveries of overpayments using proprietary data mining analytics as a second pass review along with continual monitoring enabling up-to-date policy compliance.
C. Subrogation	30%	Recoveries of money already paid through Blue Cross benefits that is the responsibility of non-health insurance carrier.
D. Hospital Credit Balance	30%	Recoveries of claims through enhanced reviews of hospital patient accounting systems and identified credit balances from overpayments.
E. Advanced Editing	30%	Cost avoidance through applied advanced algorithms and extensive analytic reviews of professional and outpatient facility Claims for adherence to medical, clinical and national coding guidelines.
F. Non-Participating Provider Negotiated Pricing	30%	Cost avoidance for out-of-network, non-participating Claims equal to the difference between the amount that would have been paid pursuant to the Group's benefit design (before Enrollee cost-share is applied) and the amount actually paid for such Claims (before Enrollee cost-share is applied) as a result of third-party vendor negotiations or benchmark-based pricing.
G. Home Infusion Therapy Medical Drugs	30%	The difference between BCBSM's 2021 home infusion therapy ("HIT") network pricing and the improved negotiated pricing administered through a third party HIT vendor.
H. Rebate Service Fee for Medical Prescription Drugs	10%	Medical benefit drug rebates on Claims incurred in the renewal term net of the Rebate Administrator Fee. The Rebate Administrator Fee is up to 5.25% of gross rebates for medical benefit drug Claims.
I. Rebate Service Fee for Pharmacy Prescription Drugs	10%	Pharmacy benefit manufacturer rebates on Claims incurred in the renewal term.

13. Pharmacy Pricing Arrangement

A. Traditional Prescription Drug Pricing and Administrative Compensation

Group acknowledges and agrees the amount BCBSM pays its contracted pharmacy benefit manager ("PBM") for a prescription drug may be more or less than the amount Group pays BCBSM for such prescription drug, and BCBSM may retain the difference as administrative compensation as specified below, when the amount is less.

BCBSM shall retain the following administrative compensation ("Traditional Rx Drug Pricing Admin Fee"):

a. Up to two (2) percentage points of the aggregated Average Wholesale Price ("AWP") discount BCBSM receives from its PBM for drugs classified by BCBSM as retail or mail order Brand Drugs; and

b. Up to four (4) percentage points of the aggregated AWP discount BCBSM receives from its PBM for drugs classified by BCBSM as retail or mail order Generic Drugs.

c. $0.10 of the dispensing fee for 30-day supplies of retail prescription drugs.

The actual Traditional Rx Drug Pricing Admin Fee paid by Group to BCBSM shall depend on Group's aggregated AWP discount referenced above, which is based on Group's prescription drug utilization, drug mix, pharmacy choice, and a pharmacy's usual and customary charges. BCBSM will credit Group with any amount that was collected during the Contract Year that exceeds the amounts specified in (a) and (b) above. The Traditional Rx Drug Pricing Admin Fee retained by BCBSM will be reported to the Group.

Group agrees to timely incorporate language into Group's Summary Plan Description or equivalent document that any Enrollee cost-sharing that is calculated as a percentage will be based upon the amount Group pays BCBSM for the prescription drug.

B. Pharmacy Monitoring Fee (PMF) Pricing – *Not Applicable*

14. Additional Pharmacy Services and/or Programs

A. 3rd Party Rx Vendor Fee

If Group's prescription drug benefits are administered by a third-party vendor, BCBSM will charge Group an administrative fee of $5.00 per contract per month due to the additional costs and resources necessary for BCBSM to effectively manage and administer the medical benefit without administering the prescription drug benefit.

B. High-Cost Drug Discount Optimization Program – *Not Applicable*

15. 3rd Party Stop-Loss Vendor Fee

Group does not have Stop-Loss coverage. If Group obtains stop-loss coverage from a third-party stop-loss vendor, BCBSM will charge an additional fee of $8.00 per contract per month due to the additional costs and resources necessary for BCBSM to effectively manage Group's benefits.

16. Agent Fees

This Schedule A does not include any fees payable by Group to an Agent. If Group has an Agent Fee Processing Agreement on file with BCBSM, please refer to that agreement for fees and details.

17. Medicare Contracts

If Group has Medicare contracts that are being separated from the current funding arrangement, all figures within the current funding arrangement will be adjusted.

18. Compensation Agreement with Providers

The Group acknowledges that BCBSM or a Host Blue may have compensation arrangements with providers in which the provider is subject to performance or risk-based compensation, including but not limited to withholds, bonuses, incentive payments, provider credits and care coordination fees. Often the compensation amount is determined after the medical service has been performed and after the Group has been invoiced. The Claims billed to Group include both service-based and value-based reimbursement to health care providers. Group acknowledges that BCBSM's negotiated reimbursement rates include all reimbursement obligations to providers including provider obligations and entitlements under BCBSM Quality Programs. Service-based reimbursement means the portion of the negotiated rate attributed to a health care service. Value-based reimbursement is the portion of the negotiated reimbursement rate attributable to BCBSM Quality Programs, as described in Exhibit 1 to Schedule A. BCBSM negotiates provider reimbursement rates and settles provider obligations on its own behalf, not Group. Group receives the benefit of BCBSM provider rates, but it has no entitlement to a particular rate or to unbundle the service-based or value-based components of Claims.

See Schedule B to ASC and Exhibit 1 to Schedule A for additional information.

19. Out-of-State Claims

Amounts billed for out-of-state claims may include BlueCard access fees and any value-based provider reimbursement negotiated by a Host Blue with out-of-state providers. See Schedule B to ASC and Exhibit 1 to Schedule A for additional information.

20. Credits and Fees – *Not Applicable*

Exhibit 1 to the Schedule A:
Value-Based Provider Reimbursement

As in prior years, the Claims billed to Group include amounts that BCBSM reimburses health care providers including reimbursement tied to value. BCBSM has adopted a provider payment model that includes both fee-based and value-based reimbursement. BCBSM does not unbundle Claims and does not retain any portion of Claims as compensation. Provider reimbursement is governed by separate agreements with providers, BCBSM standard operating procedures, and BCBSM Quality Programs, which are subject to change at BCBSM's discretion. BCBSM shall provide Group with at least sixty (60) days' advance written notice of any additions, modifications, or changes to BCBSM Quality Programs describing the change and the effective date thereof.

BCBSM negotiates provider reimbursement rates on its own behalf and makes those rates available to customers through its products and networks. The reimbursement rates can, and often do, vary from provider to provider. Providers may qualify for higher reimbursement rates for satisfying requirements of certain BCBSM Quality Programs, including, but not limited to:

A. Pay-for-Performance.
Hospitals earn reimbursement for improving quality, cost efficiency and population health. This program recognizes both mid-to-large sized and small rural short-term acute care hospitals for quality improvements such as lower re-admission rates, participating in a statewide health information exchange, and performance in a varied portfolio of collaborative quality initiatives to address many of the most common and costly areas of surgical and medical care in Michigan.

B. Value-Based Contracting.
Hospitals earn reimbursement for improving quality, cost efficiency and population health. Hospitals work with physicians to provide cost-efficient care for a shared patient population, and earn rewards based on improved outcomes across that population.

C. Collaborative Quality Initiatives ("CQIs").
CQIs address many of the most common and costly areas of surgical and medical care in Michigan. In each CQI, hospitals and physicians across the state collect, share and analyze data on patient risk factors, processes of care and outcomes of care, then design and implement changes to improve patient care.

D. Physician Group Incentive Program.
The Physician Group Incentive Program connects approximately 40 physician organizations (representing about 20,000 physicians) statewide to collect data, share best practices and collaborate on initiatives that improve the health care system in Michigan. Participating physician organizations are evaluated and rewarded on transformation of health care delivery, quality metric performance, and performance enablement – all efforts designed to improve the overall value of care delivered while reducing total cost of care.

E. Patient-Centered Medical Home ("PCMH").
In the PCMH model of care, patients get the right care at the right time in the right setting. Since 2009, Blue Cross Blue Shield of Michigan's Patient-Centered Medical Home designation program has fueled statewide movement of primary care into a team-based, proactive model of efficient, cost-effective care centered around the patient.

F. Provider-Delivered Care Management.
PCMH-designated practices increasingly provide personalized care management services for patients with chronic conditions or multiple, ongoing health needs. Patient care teams are assembled according to each patient's needs, and may include nurses, nutritionists, counselors, psychologists, respiratory therapists, asthma educators, certified diabetes educators, social workers, pharmacists and community health workers. Services are coordinated with the care patients are already receiving from their doctor.

G. Blueprint for Affordability.

The Blueprint for Affordability program combines quality outcomes with a shared financial risk contract that enables providers to manage the health of their patient population and their total cost of care. BCBSM contracting arrangements may also include risk sharing with certain provider entities ("PE"), e.g., physician organizations, physician hospital organizations, health systems, or any combination thereof, that have contracted with BCBSM for upside and downside financial risk.

Providers may receive reward and incentive payments from BCBSM Quality Programs funded through an allocation from provider reimbursement. Such allocations may be to a pooled fund from which value-based payments to providers are made. If a provider's performance results in a payment of additional reimbursement, the reward payment is made from the pooled funding. For Blueprint for Affordability, if the PE's performance results in a return of reimbursement, the amount at risk is returned to the pooled fund to offset a portion other provider gains. BCBSM will not retain any amounts resulting from BCBSM Quality Programs.

As explained in the Blue Card Program disclosure (Schedule B to ASC), an out-of-state Blue Cross Blue Shield Plan ("Host Blue") may also negotiate fee-based and/or value-based reimbursement for their providers. A Host Blue may include all provider reimbursement obligations in Claims or may, at its election, collect some or all of its value-based provider (VBP) reimbursement obligations through a PaMPM benefit expense, as in, for example, the Total Care Program. All Host Blue PaMPM benefit expenses for VBP reimbursement will be consolidated on Group's monthly invoice and appear as "Out-of-State VBP Provider Reimbursement." The supporting detail for the consolidated amount will be available on e-Bookshelf as reported by each Host Blue Plan. Host Blues determine which members are attributed to eligible providers and calculate the PaMPM VBP reimbursement obligation based only on these attributed members. Host Blue have exclusive control over the calculation of PaMPM VBP reimbursement.

Additional information is available at *www.valuepartnerships.com* and *www.bcbs.com/totalcare*. Questions regarding provider reimbursement and BCBSM Quality Programs or Host Blue VBP reimbursement should be directed to Group's BCBSM account representative.

Intellectual property may be developed through BCBSM Quality Programs for subsequent license and use by BCBSM or a third party. Group specifically understands, acknowledges, and agrees that it has no rights to any intellectual property, or derivatives thereof, including, but not limited to, copyrights, patents, or licenses, developed thru BCBSM Quality Programs.

Schedule B
BlueCard Disclosures
Inter-Plan Arrangements

Out-of-Area Services

Overview

BCBSM has a variety of relationships with other Blue Cross and/or Blue Shield Licensees referred to generally as "Inter-Plan Arrangements." These Inter-Plan Arrangements operate under rules and procedures issued by the Blue Cross Blue Shield Association ("Association"). Whenever Enrollees access healthcare services outside the geographic area BCBSM serves, the Claim for those services may be processed through one of these Inter-Plan Programs and presented to BCBSM for payment in accordance with the rules of the Inter-Plan Arrangements. The Inter-Plan Arrangements are described generally below.

Typically, when accessing care outside the geographic area BCBSM serves, Enrollees obtain care from Providers that have a contractual agreement ("Participating Providers") with the local Blue Cross and/or Blue Shield Licensee in that other geographic area ("Host Blue"). In some instances, Enrollees may obtain care from Providers in the Host Blue geographical area that do not have a contractual agreement ("Nonparticipating Providers") with the Host Blue. BCBSM remains responsible for fulfilling its contractual obligations to you. BCBSM's payment practices in both instances are described below.

This disclosure describes how Claims are administered for Inter-Plan Arrangements and the fees that are charged in connection with Inter-Plan Arrangements. Note that Dental Care Benefits, except when paid as medical claims / benefits, and those Prescription Drug Benefits or Vision Care Benefits that may be administered by a third party contracted by BCBSM to provide the specific service or services, are not processed through Inter-Plan Arrangements.

A. BlueCard® Program

The BlueCard® Program is an Inter-Plan Arrangement. Under this Arrangement, when Enrollees access covered healthcare services within the geographic area served by a Host Blue, the Host Blue will be responsible for contracting and handling all interactions with its Participating Providers. The financial terms of the BlueCard Program are described generally below.

1. Liability Calculation Method Per Claim – In General

a. Enrollee Liability Calculation

The calculation of the Enrollee liability on Claims for covered healthcare services processed through the BlueCard Program will be based on the lower of the Participating Provider's billed covered charges or the negotiated price made available to BCBSM by the Host Blue.

Under certain circumstances, if BCBSM pays the Healthcare Provider amounts that are the responsibility of the Enrollee, BCBSM may collect such amounts from the Enrollee.

Where Group agrees to use reference-based benefits, which are service-specific benefit dollar limits for specific procedures, based on a Host Blue's local market rates, Enrollees will be responsible for the amount that the healthcare Provider bills for a specified procedure above the reference benefit limit for that procedure. For a Participating Provider, that amount will be the difference between the negotiated price and the reference benefit limit. For a Nonparticipating Provider, that amount will be the difference between the Nonparticipating Provider's billed charge and the reference benefit limit. Where a reference benefit limit exceeds either a negotiated price or a Provider's billed charge, the Enrollee will incur no liability, other than any applicable Enrollee cost sharing.

b. Group Liability Calculation

The calculation of Group liability on Claims for covered healthcare services processed through the BlueCard Program will be based on the negotiated price made available to BCBSM by the Host Blue under contract between the Host Blue and the Provider. Sometimes, this negotiated price may be greater for a given service or services than the billed charge in accordance with how the Host Blue has negotiated with its Participating Provider(s) for specific healthcare services. In cases where the negotiated price exceeds the billed charge, Group may be liable for the excess amount even when the Enrollee's deductible has not been satisfied. This excess amount reflects an amount that may be necessary to secure (a) the Provider's participation in the network and/or (b) the overall discount negotiated by the Host Blue. In such a case, the entire contracted price is paid to the Provider, even when the contracted price is greater than the billed charge.

In situations where participating agreements allow for bulk settlement reconciliations for Episode-Based Payment/Bundled Payments, BCBSM may include a factor for such settlement or reconciliations as part of the fees BCBSM charges to Group.

2. Claims Pricing

The Host Blue determines a negotiated price, which is reflected in the terms of each Host Blue's healthcare Provider contracts. The negotiated price made available to BCBSM by the Host Blue may be represented by one of the following:

(i) an actual price. An actual price is a negotiated payment in effect at the time a Claim is processed without any other increases or decreases, or

(ii) an estimated price. An estimated price is a negotiated payment in effect at the time a Claim is processed, reduced or increased by a percentage to take into account certain payments negotiated with the Provider and other Claim- and non-Claim-related transactions. Such transactions may include, but are not limited to, anti-fraud and abuse recoveries, Provider refunds not applied on a Claim-specific basis, retrospective settlements, and performance-related bonuses or incentives, or

(iii) an average price. An average price is a percentage of billed charges for covered services in effect at the time a Claim is processed representing the aggregate payments negotiated by the Host Blue with all of its healthcare Providers or a similar classification of its Providers and other Claim- and non-Claim-related transactions. Such transactions may include the same ones as noted above for an estimated price.

The Host Blue determines whether it will use an actual, estimated or an average price in its respective Provider agreements. The use of estimated or average pricing may result in a difference (positive or negative) between the price Group pays on a specific Claim and the actual amount the Host Blue pays to the Provider. However, the BlueCard Program requires that the amount paid by the Enrollee and Group is a final price; no future price adjustment will result in increases or decreases to the pricing of past Claims.

Any positive or negative differences in estimated or average pricing are accounted for through variance accounts maintained by the Host Blue and are incorporated into future Claim prices. As a result, the amounts charged to Group will be adjusted in a following year, as necessary, to account for over- or underestimation of the past years' prices. The Host Blue will not receive compensation from how the estimated price or average price methods, described above, are calculated. Because all amounts paid are final, neither positive variance account amounts (funds available to be paid in the following year), nor negative variance amounts (the funds needed to be received in the following year), are due to or from Group. If Group terminates, Group will not receive a refund or charge from the variance account.

Variance account balances are small amounts relative to the overall paid Claims amounts and will be liquidated/drawn down over time. The timeframe for their liquidation depends on variables, including, but not limited to, overall volume / number of Claims processed and variance account balance. Variance account balances may earn interest at the federal funds or similar rate. The Host Blue may retain interest earned on funds held in variance accounts.

3. BlueCard Program Fees and Compensation

Group understands and agrees to reimburse BCBSM for certain fees and compensation which BCBSM is obligated under the BlueCard Program to pay to the Host Blue, to the Blue Cross and Blue Shield Association (BCBSA), and/or to vendors of BlueCard Program related services. The specific Blue Card Program fees and compensation that are charged to Group and which Group is responsible related to the foregoing are set forth in Exhibit 1 to this Schedule B. BlueCard Program Fees and compensation may be revised annually from time to time as described in **section H** below.

B. Negotiated Arrangements

With respect to one or more Host Blue, instead of using the BlueCard Program, BCBSM may process your Enrollee claims for covered healthcare services through Negotiated Arrangements.

In addition, if BCBSM and Group have agreed that (a) Host Blue(s) shall make available (a) custom healthcare Provider network(s) in connection with this Agreement, then the terms and conditions set forth in BCBSM's Negotiated Arrangement(s) for National Accounts with such Host Blue(s) shall apply. These include the provisions governing the processing and payment of Claims when Enrollees access such network(s). In negotiating such arrangement(s), BCBSM is not acting on behalf of or as an agent for Group, the Group's health care plan or Group Enrollees.

1. Enrollee Liability Calculation

Enrollee liability calculation for covered healthcare services will be based on the lower of either billed covered charges for covered services or negotiated price that the Host Blue makes available to BCBSM that allows Group's Enrollees access to negotiated participation agreement networks of specified Participating Providers outside of BCBSM's service area.

Under certain circumstances, if BCBSM pays the Healthcare Provider amounts that are the responsibility of the Enrollee, BCBSM may collect such amounts from the Enrollee.

In situations where participating agreements allow for bulk settlement reconciliations for Episode-Based Payment/Bundled Payments, BCBSM may include a factor for such settlement or reconciliations as part of the fees BCBSM charges to Group.

Where Group agrees to use reference-based benefits, which are service-specific benefit dollar limits for specific procedures, based on a Host Blue's local market rates, Enrollees will be responsible for the amount that the healthcare Provider bills for a specified procedure above the reference benefit limit for that procedure. For a Participating Provider, that amount will be the difference between the negotiated price and the reference benefit limit. For a Nonparticipating Provider, that amount will be the difference between the Nonparticipating Provider's billed charge and the reference benefit limit. Where a reference benefit limit exceeds either a negotiated price or a Provider's billed charge, the Enrollee will incur no liability, other than any applicable Enrollee cost sharing.

2. Group Liability Calculation

The calculation of Group liability on Claims for covered healthcare services processed through the BlueCard Program will be based on the negotiated price made available to BCBSM by the Host Blue under the contract between the Host Blue and the Provider. Sometimes, this negotiated price may be greater for a given service or services than the billed charge in accordance with how the Host Blue has negotiated with its Participating Provider(s) for specific healthcare services. In cases where the negotiated price exceeds the billed charge, Group may be liable for the excess amount even when the Enrollee's deductible has not been satisfied. This excess amount reflects an amount that may be necessary to secure (a) the Provider's participation in the network and/or (b) the overall discount negotiated by the Host Blue. In such a case, the entire contracted price is paid to the Provider, even when the contracted price is greater than the billed charge.

3. Claims Pricing

Same as in the BlueCard Program above.

4. Fees and Compensation

Group understands and agrees to reimburse BCBSM for certain fees and compensation which we are obligated under applicable Inter-Plan Arrangement requirements to pay to the Host Blue, to the Blue Cross and Blue Shield Association, and/or to vendors of Inter-Plan Arrangement-related services. Fees and compensation under applicable Inter-Plan Arrangement may be revised annually as described in **section H** below. In addition, the participation agreement with the Host Blue may provide that BCBSM must pay an administrative and/or a network access fee to the Host Blue, and Group further agrees to reimburse BCBSM for any such applicable administrative and/or network access fees. The specific fees and compensation that are charged to Group under the Negotiated Arrangements are set forth in Exhibit 1 to this Schedule B.

C. Special Cases: Value-Based Programs

Value-Based Programs Overview

Group Enrollees may access covered healthcare services from Providers that participate in a Host Blue's Value-Based Program. Value-Based Programs may be delivered either through the BlueCard Program or a Negotiated Arrangement. These Value-Based Programs may include, but are not limited to, Accountable Care Organizations, Global Payment/Total Cost of Care arrangements, Patient Centered Medical Homes and Shared Savings arrangements.

Value-Based Programs under the BlueCard Program

Value-Based Programs Administration

Under Value-Based Programs, a Host Blue may pay Providers for reaching agreed-upon cost/quality goals in the following ways, including but not limited to retrospective settlements, Provider Incentives, share of target savings, Care Coordinator Fees and/or other allowed amounts.

The Host Blue may pass these Provider payments to BCBSM, which BCBSM will pass directly on to Group as either an amount included in the price of the Claim or an amount charged separately in addition to the Claim.

When such amounts are included in the price of the Claim, the Claim may be billed using one of the following pricing methods, as determined by the Host Blue:

(i) Actual Pricing: The charge to accounts for Value-Based Programs incentives/Shared Savings settlements is part of the Claim. These charges are passed to Group via an enhanced Provider fee schedule.

(ii) Supplemental Factor: The charge to accounts for Value-Based Programs incentives/Shared Savings settlements is a supplemental amount that is included in the Claim as an amount based on a specified supplemental factor (e.g., a small percentage increase in the Claim amount). The supplemental factor may be adjusted from time to time.

When such amounts are billed separately from the price of the Claim, they may be billed as a Per Attributed Member Per Month (PaMPM) amount for Value-Based Programs incentives/Shared Savings settlements to Group outside of the Claim system. BCBSM will pass these Host Blue charges directly through to Group as a separately identified amount on the Group's invoices.

The amounts used to calculate either the supplemental factors for estimated pricing or PaMPM billings are fixed amounts that are estimated to be necessary to finance the cost of a particular Value-Based Program. Because amounts are estimates, there may be positive or negative differences based on actual experience, and such differences will be accounted for in a variance account maintained by the Host Blue (in the same manner as described in the BlueCard Claim pricing **section A.3** above) until the end of the applicable Value-Based Program payment and/or reconciliation measurement period. The amounts needed to fund a Value-Based Program may be changed before the end of the measurement period if it is determined that amounts being collected are projected to exceed the amount necessary to fund the program or if they are projected to be insufficient to fund the program.

At the end of the Value-Based Program payment and/or reconciliation measurement period for these arrangements, the Host Blue will take one of the following actions:

- Use any surplus in funds in the variance account to fund Value-Based Program payments or reconciliation amounts in the next measurement period.

- Address any deficit in funds in the variance account through an adjustment to the PaMPM billing amount or the reconciliation billing amount for the next measurement period.

The Host Blue will not receive compensation resulting from how estimated, average or PaMPM price methods, described above, are calculated. If Group terminates, you will not receive a refund or charge from the variance account. This is because any resulting surpluses or deficits would be eventually exhausted through prospective adjustment to the settlement billings in the case of Value-Based Programs. The measurement period for determining these surpluses or deficits may differ from the term of the administrative services contract.

Variance account balances are small amounts relative to the overall paid Claims amounts and will be liquidated / drawn down over time. The timeframe for their liquidation depends on variables, including, but not limited to, overall volume / number of Claims processed and variance account balance. Variance account balances may earn interest, and interest is earned at the federal funds or similar rate. The Host Blue may retain interest earned on funds held in variance accounts.

Note: Enrollees will not bear any portion of the cost of Value-Based Programs except when the Host Blue uses either average pricing or actual pricing to pay Providers under Value-Based Programs.

Care Coordinator Fees

The Host Blue may also bill BCBSM for Care Coordinator Fees for Covered Services which BCBSM will pass on to Group as follows:

1. PaMPM billings; or

2. Individual Claim billings through applicable care coordination codes from the most current editions of either Current Procedural Terminology (CPT) published by the American Medical Association (AMA) or Healthcare Common Procedure Coding System (HCPCS) published by the U.S. Centers for Medicare and Medicaid Services (CMS).

As part of this agreement / contract, BCBSM and Group will not impose Enrollee cost sharing for Care Coordinator Fees.

Value-Based Programs under Negotiated Arrangements

If BCBSM has entered into a Negotiated National Account Arrangement with a Host Blue to provide Value-Based Programs to Enrollees, BCBSM will follow the same procedures for Value-Based Programs administration and Care Coordination Fees as noted in the BlueCard Program section.

D. Return of Overpayments

Recoveries of overpayments from a Host Blue or its Participating Providers and Nonparticipating Providers can arise in several ways, including, but not limited to, anti-fraud and abuse recoveries, healthcare Provider bill audits, credit balance audits, utilization review refunds, and unsolicited refunds. Recovery amounts determined in the ways noted above will be applied so that corrections will be made, in general, on either a Claim-by-Claim or prospective basis. If recovery amounts are passed on a Claim-by-Claim basis from the Host Blue to BCBSM they will be credited to the Group account. In some cases, the Host Blue will engage a third party to assist in identification or collection of overpayments or recovery amounts. The fees of such a third party may be charged to Group as a percentage of the recovery.

Unless the Host Blue agrees to a longer period of time for retroactive cancellations of membership, the Host Blue will provide BCBSM the full refunds from Participating Providers for a period of only one year after the date of the Inter-Plan financial settlement process for the original Claim. For Care Coordinator Fees associated with Value-Based Programs, BCBSM will request such refunds for a period of up to ninety (90) days from the termination notice transaction on the payment innovations delivery platform. In some cases, recovery of Claim payments associated with a retroactive cancellation may not be possible if, as an example, the recovery (a) conflicts with the Host Blue's state law or healthcare Provider contracts, (b) would result from Shared Savings and/or Provider Incentive arrangements, or (c) would jeopardize the Host Blue's relationship with its Participating Providers, notwithstanding to the contrary any other provision of this agreement / contract.

E. Inter-Plan Programs: Federal / State Taxes / Surcharges / Fees

In some instances, federal or state laws or regulations may impose a surcharge, tax or other fee that applies to self-funded accounts. If applicable, BCBSM will provide prior written notice of any such surcharge, tax or other fee to Group, which will be Group liability.

F. Nonparticipating Healthcare Providers Outside BCBSM's Service Area

1. Enrollee Liability Calculation

a. In General

When covered healthcare services are provided outside of BCBSM's service area by Nonparticipating Providers, the amount an Enrollee pays for such services will generally be based on either the Host Blue's Nonparticipating Provider local payment or the pricing arrangements required by applicable state law. In these situations, the Enrollee may be responsible for the difference between the amount that the Nonparticipating Provider bills and the payment BCBSM will make for the covered services as set forth in this paragraph. Payments for out-of-network emergency services will be governed by applicable federal and state law.

b. Exceptions

In some exception cases, BCBSM may pay Claims from Nonparticipating Providers outside of BCBSM's service area based on the Provider's billed charge, such as in situations where an Enrollee did not have reasonable access to a Participating Provider, as determined by BCBSM in BCBSM's sole and absolute discretion or by applicable state law. In other exception cases, BCBSM may pay such Claims based on the payment BCBSM would make if BCBSM were paying a Nonparticipating Provider inside of its service area where the Host Blue's corresponding payment would be more than BCBSM's in-service area Nonparticipating Provider payment. BCBSM may choose to negotiate a payment with such a Provider on an exception basis.

Unless otherwise stated, in any of these exception situations, the Enrollee may be responsible for the difference between the amount that the Nonparticipating Provider bills and the payment BCBSM will make for the covered services as set forth in this paragraph.

2. Fees and Compensation

Group understands and agrees to reimburse BCBSM for certain fees and compensation which we are obligated under applicable Inter-Plan Arrangement requirements to pay to the Host Blue, to the Blue Cross and Blue Shield Association, and/or to vendors of Inter-Plan Arrangement-related services. The specific fees and compensation that are charged to Group and that Group will be responsible for in connection with the foregoing are set forth in Exhibit 1 to this Schedule B. Fees and compensation under applicable Inter-Plan Arrangements may be revised from time to time as provided for in **section H** below.

G. Blue Cross Blue Shield Global Core (Formerly known as BlueCard Worldwide® Program)

1. General Information

If Enrollees are outside the United States, the Commonwealth of Puerto Rico and the U.S. Virgin Islands (hereinafter: "BlueCard service area"), they may be able to take advantage of the Blue Cross Blue Shield Global Core Program when accessing covered healthcare services. The Blue Cross Blue Shield Global Core Program is unlike the BlueCard Program available in the BlueCard service area in certain ways. For instance, although the Blue Cross Blue Shield Global Core Program assists Enrollees with accessing a network of inpatient, outpatient and professional providers, the network is not served by a Host Blue. As such, when Enrollees receive care from Providers outside the BlueCard service area, the Enrollees will typically have to pay the Providers and submit the Claims themselves to obtain reimbursement for these services.

- **Inpatient Services**

In most cases, if Enrollees contact the Blue Cross Blue Shield Global Core Service Center for assistance, hospitals will not require Enrollees to pay for covered inpatient services, except for their cost-share amounts/deductibles, coinsurance, etc. In such cases, the hospital will submit Enrollee Claims to the Blue Cross Blue Shield Global Core Service Center to initiate Claims processing. However, if the Enrollee paid in full at the time of service, the Enrollee must submit a Claim to obtain reimbursement for covered healthcare services. Enrollees must contact BCBSM to obtain precertification for non-emergency inpatient services.

- **Outpatient Services**

Physicians, urgent care centers and other outpatient Providers located outside the BlueCard service area will typically require Enrollees to pay in full at the time of service. Enrollees must submit a Claim to obtain reimbursement for covered healthcare services.

- **Submitting a Blue Cross Blue Shield Global Core Claim**

When Enrollees pay for covered healthcare services outside the BlueCard service area, they must submit a Claim to obtain reimbursement. For institutional and professional claims, Enrollees should complete a Blue Cross Blue Shield Global Core International claim form and send the claim form with the Provider's itemized bill(s) to the Blue Cross Blue Shield Global Core Service Center address on the form to initiate claims processing. The claim form is available from BCBSM, the Blue Cross Blue Shield Global Core Service Center, or online at www.bcbsglobal.com. If Enrollees need assistance with their claim submissions, they should call the Blue Cross Blue Shield Global Core Service Center at 1.800.810.BLUE (2583) or call collect at 1.804.673.1177, 24 hours a day, seven days a week.

2. Blue Cross Blue Shield Global Core Program-Related Fees

Group understands and agrees to reimburse BCBSM for certain fees and compensation which we are obligated under applicable Inter-Plan Arrangement requirements to pay to the Host Blue, to the Association and/or to vendors of Inter-Plan Arrangement-related services. The specific fees and compensation that are charged to Group under the Blue Cross Blue Shield Global Core Program and that Group is responsible for relating to the foregoing are set forth in Exhibit 1 to this Schedule B. Fees and compensation under applicable Inter-Plan Arrangements may be revised from time to time as provided for in **section H** below.

H. Modifications or Changes to Inter-Plan Arrangement Fees or Compensation

Modifications or changes to Inter-Plan Arrangement fees are generally made effective Jan. 1 of the calendar year, but they may occur at any time during the year. In the case of any such modifications or changes, BCBSM shall provide Group with at least sixty (60) days' advance written notice of any modification or change to such Inter-Plan Arrangement fees or compensation describing the change and the effective date thereof and Group right to terminate the ASC without penalty by giving written notice of termination before the effective date of the change. If Group fails to respond to the notice and does not terminate the ASC during the notice period, Group will be deemed to have approved the proposed changes, and BCBSM will then allow such modifications to become part of the ASC.

Exhibit 1

BlueCard Program Access Fees may be charged separately each time a claim is processed through the BlueCard Program. All other BlueCard Program-related fees are included in BCBSM's administrative fee, unless otherwise agreed to by Group. The BlueCard Access Fee is charged by the Host Blue to BCBSM for making its applicable Provider network available to Group's Enrollees. The BlueCard Access Fee will not apply to Nonparticipating Provider Claims. The BlueCard Access Fee is charged on a per-Claim basis and is charged as a percentage of the discount / differential BCBSM receives from the applicable Host Blue and is capped at $2,000.00 per Claim. The percentages for 2024 are up to:

1. **3.46%** for fewer than 1,000 PPO or traditional enrolled Blue contracts;
2. **1.93%** for 1,000–9,999 Blue PPO or traditional enrolled Blue contracts;
3. **1.79%** for 10,000–49,999 Blue PPO or traditional enrolled Blue contracts;

For Groups with 50,000 or more Blue PPO or Traditional enrolled contracts, Blue Card Access Fees are waived and not charged to the Group. If Group's enrollment falls below 50,000 PPO enrolled contracts, BCBSM passes the BlueCard Access Fee, when charged, directly on to the Group.

Instances may occur in which the Claim payment is zero or BCBSM pays only a small amount because the amounts eligible for payment were applied to patient cost sharing (such as a deductible or coinsurance). In these instances, BCBSM will pay the Host Blue's Access Fee and passes it directly on to the Group as stated above even though the Group paid little or had no Claim liability.

IONIA COUNTY BOARD OF COMMISSIONERS
REQUEST FOR DISCUSSION/ACTION

Title: Chip Seal & Fog Seal Contract Extension
Date: May 28, 2024

CONTACT: Linda Pigue, Managing Director Ionia County Road Department

DESCRIPTION:

Contract 23-20 for Chip Seal and Fog Seal was awarded to Highway Maintenance & Construction Co. The Contract provided for a 2024 extension with no change in prices or terms. Highway Maintenance & Construction Co. has indicated they would like to extend Contract 23-20 for the 2024 construction season.

OTHER DEPARTMENTS/AGENCIES AFFECTED:
None.

FINANCIAL ANALYSIS:

The County uses millage money to pay for the Chip Seal & Fog Seal program. The contract is also used for townships' and villages' local road projects, the cost of which are reimbursed by the Townships or villages and is included in our 2024 budget.

LEGAL REVIEW:
None.

DEADLINE:

May 28, 2024

SPECIFIC ACTION REQUESTED (PROPOSED BOARD MOTION):

Request the Board authorize Linda Pigue, Managing Director to sign the contract extension.

ADMINISTRATOR'S RECOMMENDATION:
Administrator recommends approval.

From: jeffdemek@comcast.net
To: Connie Houk
Subject: [External] Extension of Ionia County Chipseal
Date: Monday, January 22, 2024 9:07:01 AM
Attachments: image001.png

Caution: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. When in doubt, contact your IT Department.

HIGHWAY MAINTENANCE & CONSTRUCTION CO.

(734) 941-8885
Fax (734) 941-8962
P.O. Box 74411
Romulus, MI 48174-0411

Connie

We enjoyed working for you last year and we talked with our suppliers and we can offer to extend Our prices for the 2024 season

Single Chipseal-	$1.49/SY
Fogseal-	$0.405/sy

Thank you for your consideration.

Jeffrey S Demek P E, President
Highway Maintenance & Construction
Maintaining Pavements for 52 years
Office: (734) 941-8885
Cell: (734) 718-3789

IONIA COUNTY BOARD OF COMMISSIONERS
REQUEST FOR DISCUSSION/ACTION

Title: Crack Seal Contract Extension
Date: May 28, 2024

CONTACT: Linda Pigue, Managing Director Ionia County Road Department

DESCRIPTION:

The Road Department has a Crack Seal contract with Fahrner. The Contract provided for a 2024 extension with no change in prices or terms. Fahrner has indicated they would like to extend the contract for the 2024 construction season.

OTHER DEPARTMENTS/AGENCIES AFFECTED:
None.

FINANCIAL ANALYSIS:

The County uses millage money to pay for the Crack Seal program. The contract is also used for townships' and villages' local road projects, the cost of which are reimbursed by the Townships or villages and is included in our 2024 budget.

LEGAL REVIEW:
None.

DEADLINE:

May 28, 2024

SPECIFIC ACTION REQUESTED (PROPOSED BOARD MOTION):

Request the Board authorize Linda Pigue, Managing Director to sign the contract extension.

ADMINISTRATOR'S RECOMMENDATION:
Administrator recommends approval.

Corporate Office
2800 Mecca Drive
Plover, WI 54467

FAHRNER asphalt sealers llc
Pavement Maintenance Contractors
EEO/AA Employer

phone 715.341.2868
800.332.3360
fax 715.341.1054

November 7, 2023

Ionia County Road Commission
Connie, Engineer- Prein Newhof
PO Box 76, 170 E Riverside Drive
Ionia MI, 48846

Dear Connie & Ionia County:

In anticipation of the 2024 road construction season, we are prepared to extend Fahrner Asphalts 2023 crack seal price as follows:

Overband Crack Seal $1.57 PER/LB.

Notes:

- Crack Seal roads will be reviewed by the contractor and an estimate will be provided to Ionia County for Approval. Upon written approval we can put Ionia County in our schedule.
- Crack Seal estimates will be based on the estimated pounds times by the per pound price above.

Sincerely,
Tyler Cass
VP- Michigan Region

6615 US Hwy 12 W
Eau Claire, WI 54703
phone 715.874.6070
800.497.4907
fax 715.874.6717

860 Eastline Road
Kaukauna, WI 54130
phone 920.759.1008
800.261.1900
fax 920.759.1019

316 Raemisch Road
Waunakee, WI 53597
phone 608.849.6466
800.898.2102
fax 608.849.6470

7680 Commerce Park
Section C
Dubuque, IA 52002
phone 563.556.6231
fax 563.588.1240

2224 Veterans Memorial Pkwy
Saginaw, MI 48601
phone 989.752.9200
fax 989.752.9205

7500 Hudson Blvd., Ste 305
(Minnesota office)
Oakdale, MN 55128
phone 651.340.6212
fax 651.340.6221

www.FahrnerAsphalt.com

IONIA COUNTY BOARD OF COMMISSIONERS
REQUEST FOR DISCUSSION/ACTION

Title: Garage Bay 1 Hoist Replace Rear Lift
Date: May 28, 2024

CONTACT: Linda Pigue, Managing Director Ionia County Road Department

DESCRIPTION:

The Road Department has received two quotes for replacing the Bay 1 Hoist's Rear Lift and the Pump that powers both the front and rear lifts. The hoist was installed in 1991 and has been repaired numerous times. It is currently shut down for safety reasons. We have been informed that it will take 120 days from the date of order to get the parts. Additional days will be needed to remove the old lift, which is set in concrete, and install the new lift, which will be set in concrete. Time is of the essence; we do not want to be in a situation where one of 3 hoists is shut done when we need to convert the trucks from summer attachments to winter attachments or during snowplowing season.

OTHER DEPARTMENTS/AGENCIES AFFECTED:
None.

FINANCIAL ANALYSIS:

We had requested ARPA funds to cover the original estimated cost of replacing the lift, $39,894. We received a second quote on May 23, 2024, which is considerably higher than the other quote. If we receive ARPA funds, we will request a budget amendment for $62,526. If we do not receive ARPA funds, we will request a budget amendment for the entire amount, $102,420. The cost of the various facility repairs was not specifically included in the Department's 2024 approved budget. We will reduce discretionary spending to offset the cost of these essential repairs and request a budget amendment.

LEGAL REVIEW:
None.

DEADLINE:

May 28, 2024

SPECIFIC ACTION REQUESTED (PROPOSED BOARD MOTION):

Request the Board accept Automotive Equipment Specialists, Inc. quote in the amount of $102,420.

ADMINISTRATOR'S RECOMMENDATION:
Administrator recommends approval.

Automotive Equipment Specialists, Inc.

Holland MI 49423

Phone 616-784-6683 Fax 616-784-0737

PROPOSAL

DATE
5/22/2024

Ionia County Road Commission
169 East Riverside Drive
Ionia, MI 48846

Customer Phone	Customer Fax
616-902-2549	Wes

ITEM	DESCRIPTION	QTY	COST	Total
	Quote for upgrade of the rear post assembly and the electric hydraulic power unit of the existing truck hoist, scope of work as follows:			

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance.

Sales Tax (6.0%)

Total

Note: This proposal may be withdrawn by us if not accepted within 30 days.

SIGNATURE

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.
Date of Acceptance:_____

Signature_____

Signature_____

Automotive Equipment Specialists, Inc.

Holland MI 49423

Phone 616-784-6683 Fax 616-784-0737

PROPOSAL

DATE
5/22/2024

Ionia County Road Commission
169 East Riverside Drive
Ionia, MI 48846

Customer Phone	Customer Fax
616-902-2549	Wes

ITEM	DESCRIPTION	QTY	COST	Total
	AES will remove an approximately 10' long x 18' wide area around the existing 12&5/8" rear assembly and install (1) new Rotary R210ML 10&5/8" dual side by side rear post assembly approximately 2' rearward towards the existing floordrain as close as possible to gain as much wheelbase as possible during the installation. The rear assembly has air operated locks and multi-position safety struts, the maximum capacity of new rear assembly is 50,000lbs @ 350psi power unit working pressure. The new rear will come with the standard universal saddle and adapters for this lift package. (*note* - if any special adapters are needed they will be extra over this quote) AES will also install (1) new P5118 200/460v power unit and retrofit into the existing hoist hydraulic system as needed. AES will supply new hydraulic hoses and fittings to hook up the new rear jack and the new power unit as needed. (*note - electrical hook up and hydraulic oil for power unit to be supplied by owner)			
Government	R210ML - dual rear assembly complete	1	63,995.00	63,995.00
Government	P5118 - 10hp 220/460v 3ph 151gal P/U	1	15,875.00	15,875.00

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance.

Sales Tax (6.0%)

Total

Note: This proposal may be withdrawn by us if not accepted within 30 days.

SIGNATURE

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.
Date of Acceptance:_____

Signature_____

Signature_____

Automotive Equipment Specialists, Inc.

Holland MI 49423

Phone 616-784-6683 Fax 616-784-0737

PROPOSAL

DATE
5/22/2024

Ionia County Road Commission
169 East Riverside Drive
Ionia, MI 48846

Customer Phone	Customer Fax
616-902-2549	Wes

ITEM	DESCRIPTION	QTY	COST	Total
Government	FA74-4 - mag starter 220/460v 3ph	1	1,350.00	1,350.00
Government	Concrete & peastone		3,000.00	3,000.00
Government	Misc. materials, supplies & hoses		3,000.00	3,000.00
Government	Sawcutting		1,200.00	1,200.00
Labor	Labor - demolition & rough in		8,000.00	8,000.00
Labor	Labor - power unit installation & finish work		6,000.00	6,000.00
	Note - if this proposal is accepted, a schedule of values will be created.			
	Note - current lead time on rear assembly is 90 to 120 days.			

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance.

	$102,420.00
Sales Tax (6.0%)	$0.00
Total	$102,420.00

Note: This proposal may be withdrawn by us if not accepted within 30 days.

SIGNATURE _____

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.
Date of Acceptance:_____

Signature_____

Signature_____

We are not responsible for damage to, or expenses incurred from unforseen underground obstacles. Examples: water & sewer lines, electric, gas lines, water conditions, contaminated soil etc. If encountered, time and material will be charged to correct.

IONIA COUNTY BOARD OF COMMISSIONERS
REQUEST FOR DISCUSSION/ACTION

Title: Replace State Trunkline Pickup Truck
Date: May 28, 2024

CONTACT: Linda Pigue, Road Dept. Managing Director & Wes Shafer, Fleet Supervisor

DESCRIPTION:

The Road Department needs to replace the pickup truck assigned to State Trunkline work. Our contract with MDOT for State Trunkline Winter Maintenance requires a 3rd shift Trunkline Patrol from 10:30pm to 7:00am; by an individual authorized to call workers in on overtime when weather conditions warrant. The pickup truck used on the 3rd shift must be reliable. The existing 3rd shift pickup truck is a 2011 Ford F350 with 215,002 miles. We are requesting approval to purchase via MIDeal a 1-ton 2024 Ram 4500 diesel 4x4 cab chassis $65,185; fitted with snowplow, flatbed, hitch, warning lights, camera system, toolbox, v-bottom sander, and fuel transfer tank for a cost of $98,342. During the 3rd shift patrol the worker also plows and treats MDOT Trunkline commuter lots.

OTHER DEPARTMENTS/AGENCIES AFFECTED:

None

FINANCIAL ANALYSIS:

The cost of the new 1-ton pickup truck is $98,342. The approved 2024 Road Department Budget included $140,000 for light duty trucks and $400,000 for a motor-grader. We purchased 2 pickup trucks for $70,400 and a motor-grader for $341,000. This leaves $70,400 of the light duty truck budget and $59,000 of the motor-grader budget for an unspent budget amount of $129,000. The 3rd shift pick-up truck is included in our budget and the savings on the previously purchased vehicles will cover its cost.

LEGAL REVIEW:

N/A

DEADLINE:

May 28, 2024

SPECIFIC ACTION REQUESTED (PROPOSED BOARD MOTION):

Recommend approval to purchase the pickup truck.

ADMINISTRATOR'S RECOMMENDATION:

Administrator recommends approval.

STATE SYSTEM NIGHT PATROL LEAD WORKER TRUCK

1 TON PICKUP WITH PLOW, SANDER & TOOLS

Dealer LaFontaine

2024 Ram 4500 diesel 4x4 Cab Chassis 1 ton	$65,185.00

Body builder Truck & Trailer

Suppling and installing all equipment to cab and chassis, snowplow, flatbed, weld and fabricate hitch, install all warning lights, camera system, tool box's (see attached quote for full list)	$25,232.00

Hoekstra equipment

V-bottom sander	$5,725.00
Fuel transfer tank	$2,200.00
Grand Total	$98,342.00

We only have until the end of June to order the truck cab & chassis, after that cab & chassis orders don't open back up until the first of the year. Also, we are saving approximately $59,000 on the purchase of the new motor grader and can use some of that money towards purchasing this truck being we all ready used part of this trucks budget to purchase the two new pickups we desperately needed.

LaFontaine CDJR-Lansing
6131 S. Pennsylvania Ave.
Lansing, MI 48911
517-394-1022-Direct
517-394-1205-Fax
mdeacon@lafontaine.com

Name: Ionia County Roads
Address:
City: State: Zip:
Contact: Wes Shafer
Phone: 616.902.2549
Email: wshafer@ioniacountyroads.org

Date: 4/2/2024
Quote 040224

State of Michigan Contract 071B7700183		
DP0L64	2024 Ram 4500 Reg cab Chassis 4x4 168.5 wb 84" ca	$62,319.00
2YA	6.7L I6 Cummins Turbo Diesel Engine	
PR4	Flame Red	
XAW	Rear Backup Alarm	$133.00
XAC	ParkView Rear Back-up Camera	$456.00
MRU	Black Tubular Side Steps	$456.00
CLY	Front Rubber Floor Mats	$92.00
A61	Tradesman Level 1 Equipment Group	$1,729.00
	Per contract delivery is $2.00 a mile one way mileage.	
	By signing the purchase agreement you agree to purchase of the vehicle or	
	vehicles X_____	
	Total Cost:	$65,185.00

Signed *Michelle Deacon*

Please note payment is due within 30 days of delivery. Any invoices paid after 30 days may be subject to a 1.5% late fee

Truck & Trailer Specialties

3286 Hanna Lake Ind. Park Dr.
Dutton, MI. 49316
Phone 616-698-8215, Fax 616-698-0972

Quote No. DQO004883

Ionia County Road Commission
Attn: Wes Shafer
Phone: (616)-902-2549
May 17, 2024

Equipment Quotation

Chassis info: **2024 Dodge 4500**, Diesel, 84" CA, DRW, standard cab, upfitter switches, integrated electronic trailer brake controller, backup camera, snowplow prep package

Supply and install Rugby Vari-Class Super Heavy-Duty Platform including the following:

2401229 – Overall platform dimensions: 12'4" long x 96" wide
External side stake pockets
Internal rear stake pockets
10 ga. front and rear rails
Structural channel side rails
3/8" x 2" tie down rail on sides
6" channel structural longsills
7 ga. formed crossmembers on 12" centers
Douglas Fir 6" ship Lap Wood floor
2366294 LED light kit including lights, grommets, and wire harness
2366193 42" x 96" drop-in mild steel bulkhead
2207998 bulkhead hardware kit
Install poly fenders with **mild steel** mounting hardware

Supply and install two (2) Weather Guard Hi-Side toolboxes including the following:

Model # 396-0-02
11.8 cubic feet
One installed on each side of flatbed, includes rubber/poly spacer installed between toolboxes and any mild steel material on the platform, if applicable
Dimensions: 96-1/4" wide x 16" tall x 13-1/4" deep
Dual fold-down doors
3-point latching system
Bright aluminum diamond plate construction
ARMOR TUF powder coat protection

Supply and install one (1) Bawer stainless steel Underbody Toolbox including the following:

Model # TU823503
48" W x 18" H x 18" D
100% polished stainless steel 304 construction
Single piece main structure
Lockable T-handle
Gas shock door openers
Unique aerator/vent design keeps box dry
Mounted passenger side under body, in front of drive wheels
4" Channeled toolbox mounts bolted to truck frame, painted black in color

Custom lighting and electrical to include the following:

Two (2) SoundOff LED amber/green Mpower lights, installed forward facing to chassis grill
SoundOff Pinnacle LED amber/green mini-light bar strobe installed centered above the bulkhead on the front side, using stainless steel mounting bracketry, **no** brush guard is included
7900GT Go Light mounted to top of window guard including:

Installed to streetside window guard at the top, using stainless steel mounting bracketry, **no** brush guard is included
White halogen bulb
Permanent shoe mount
Wireless handheld control
370-degree rotation, 135-degree tilt

Two (2) SoundOff LED amber/green Mpower lights, installed rear facing, one each side mounted close to the outer edges of the platform rear tailskirt so they can be seen if/when a V-box with center spinner is installed

Two (2) Maxxima LED work lights mounted to the upper corners of the bulkhead facing rearward, one each side

Reinstall factory stop/turn/tail/backup lights on the sides of the rear hitch plate, includes license plate mounting bracket installed under streetside factory taillight

Betts Wiring Junction Box: Chassis mounted weatherproof trailer wire junction box with 7-brass termination studs shall be utilized for wiring connections to platform lighting and trailer receptacle

Back up alarm

Emergency and work lighting to be wired to chassis supplied upfitter switches (keyed/ignition power) including:

Aux 1: Strobes (top and rear)
Aux 2: Front Strobes
Aux 3: Rear work lights
Aux 4: Go Light

Trailer Provisions and rear Bumper to include the following:

3/4" heavy duty rear hitch plate reinforced with 1/2" heavy duty side plates
Heavy 6" channeled ICC rear bumper mounted below hitch plate
PH20 Pintle hitch installed at rear, mounting height to be determined at time of order
Two (2) 3/4" D-rings for use with safety chains
7-way RV style trailer connector
Utilize chassis provided electronic trailer brake controller
Install chassis supplied back up camera above rear hitch plate, if applicable

Miscellaneous:

No tarp system
Paint rear bumper/hitch, and any unpainted mounting bracketry semi-gloss Black in color

Supply and install Boss 9'2" Power-V XT stainless steel Snowplow including the following:

Full moldboard trip design
Blade Crate: MSC18792
SmartHitch2 Plow Box: MSC15005C
Undercarriage: LTA23040
SmartTouch2 Control Kit: MSC09601
Wiring Kit: MSC25009
Snow deflector kit: MSC01565TTS
Blade Width: 110"
Plowing Width (Scoop): 92"
Plowing Width (V position): 99"
Plowing Width @ 30-degree Angle: 95"
Blade Height: 37" at end, 30" at center
Blade Thickness: 12-ga 304 Stainless Steel

Truck & Trailer Specialties
3286 Hanna Lake Ind. Park Dr.
Dutton, MI. 49316
Phone 616-698-8215, Fax 616-698-0972
Quote No. DQO004883

Cutting Edge: 1/2" x 6" high performance
Reinforcement Ribs: 8 vertical, 2 diagonal
Trip Springs: 4
Lift Cylinder: 2" x 1-1/8" x 10"
Smart Lock Cylinders: 1-3/4" x 10"
Weight: 882 lbs.
Lighting: SL3 L.E.D. with Ice Shield Technology
Above installed Price: $25,232.00 ea.

Option #1: Price for above items uninstalled and all equipment to ship loose:
(Quote No. DQO004950)
All items listed above will be shipped to Ionia County loose and un-installed
Option #1 Un-Installed Price: $17,643.00 ea.

Option #2: Rugby Vari-Class Stainless-Steel Heavy-Duty Platform ILO mild steel SHD including
2517003 - Overall platform dimensions: 12'4" long x 96" wide
201 #4 polished Stainless-steel construction
External side stake pockets, 2" x 4" pockets are spaced on 24" centers
Internal rear stake pockets
Rear corner pockets are 2.5" x 2.5"
10 ga. SS front, side, and rear rails
3/8" x 2" Tie-down rail on sides
4" tall, 7 ga. SS formed crosssills on 12" centers
6" 7 ga. SS formed channel Longmembers
Douglas Fir 6" ship Lap Wood floor
2366294 LED light kit including lights, grommets, and wire harness
2534125 42" x 96" 12 ga. drop-in stainless bulkhead
2534128 bulkhead hardware kit
201 #4 polished stainless-steel body to remain unpainted
Supply poly fenders with **stainless steel** mounting hardware
Option #2 Price Add: $4,960.00 ea. (Installed or Un-Installed does not affect this pricing)

Installed Components Lead time: 14-18 Weeks (This includes Stainless steel flatbed option as well)
Uninstalled Components (loose) Lead time: 2-6 weeks for all components (maybe sooner if needed)

Payment Terms: Net 30
Pricing good for: 30 days

Thank you for the opportunity to quote.

Submitted by:
Chad Veenstra/Mike Bouwman

Information needed with an order:
Desired rear hitch height

HOEKSTRA EQUIPMENT

260 36TH STREET SE
GRAND RAPIDS, MI 49548
Phone: (616) 241-6664 Fax: (616) 241-1111

Invoice No.	E301003153
Date	4/10/2024
Order Type	Estimate
Customer ID	IONIA COUNTY ROAD DEPARTMENT - WES - 29488
Sales Person	THORSEN, MICHAEL R

BILL TO
IONIA COUNTY ROAD DEPARTMENT - WES
170 EAST RIVERSIDE DR.
IONIA, MI 48846

DELIVER TO
IONIA COUNTY ROAD DEPARTMENT
170 EAST RIVERSIDE DR.
IONIA, MI 48846
P: (616) 527-1700
F:

DATE SHIPPED	SHIP VIA	DATE INVOICE	UNIT ID	VIN	COMPONENT S/N	TERMS	CUSTOMER REFERENCE
4/10/2024	PICKUP					C-CASH	SALT SPREADERS

ESTIMATE

QTY SHP	QTY B/O	ITEM	VMRS	DESCRIPTION	UNIT PRICE	EXTD PRICE
1		32520		MARAUDER S220C 8' 2.2 CU YD	5,725.00	5,725.00
1		32530		MARAUDER S300C 8' 3.0 CU YD	6,975.00	6,975.00

Return Policy
No returns without invoice. No return on electrical parts. Returned parts must be in new and uninstalled condition. Shipping charges are non-refundable. Special ordered, non-stocking items will be subject to a 20% restocking fee. No returns after 30 days.

Disclaimers of Warranties
Any warranties on the product sold herby are those made by the manufacturer. The seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose and the seller neither assumes nor authorizes any other person to assume for it any liability in connections with the sale of said merchandise.

SUB-TOTAL	12,700.00
PREPAY	0.00
TAX	0.00
SHIPPING	0.00
TOTAL	**12,700.00**
SALE TYPE	**PRET**

Please Remit Payment to:
HOEKSTRA TRUCK EQUIPMENT
260 36TH STREET SE
Grand Rapids, MI 49548

SIGNATURE X _____

A surcharge of 3% will be added onto any amounts paid with a credit card.

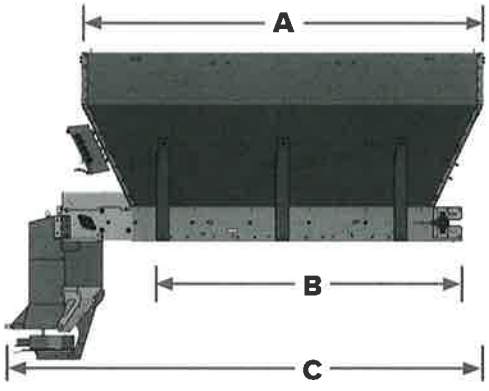
WESTERN

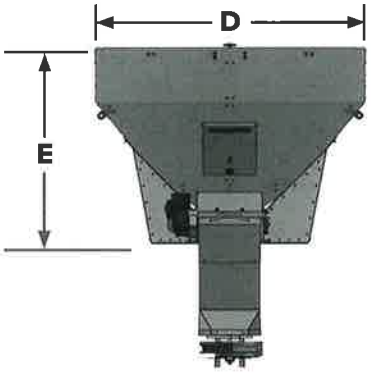
MARAUDER™ STAINLESS STEEL HOPPERS

	S150C	S220C	S300C	S400C	S500C	S150A	S220A	S300A	S400A	S500A
Body Side Length	7'	8'	8'	9'	9'	7'	8'	8'	9'	9'
Capacity – Volume	1.5 cu yd	2.2 cu yd	3.0 cu yd	4.0 cu yd	5.0 cu yd	1.5 cu yd	2.2 cu yd	3.0 cu yd	4.0 cu yd	5.0 cu yd
Capacity – Weight*	3,240 lb	4,752 lb	6,480 lb	8,640 lb	10,800 lb	3,240 lb	4,752 lb	6,480 lb	8,640 lb	10,800 lb
Hopper Construction	Riveted Stainless Steel									
Rec. Bed Length	76"	90"	90"	96"	96"	76"	90"	90"	96"	96"
Approx. Weight – Empty	530 lb	580 lb	750 lb	820 lb	910 lb	500 lb	550 lb	700 lb	770 lb	850 lb
Material Delivery System	Pintle Chain Conveyor System					HELIXX™ Auger Technology				
Conveyor Width	16"					N/A				
Conveyor Material	Sand & Salt/Sand Mix					N/A				
HELIXX™ Auger Dimensions	N/A					6" Diameter				
Auger Material	N/A					Bulk Rock Salt				
Spinner Size	16" diameter									
Salt Spread Width	36'									
Sand Spread Width	24'									
Vehicle Application	Pickup		Flatbed/Dump Body			Pickup		Flatbed/Dump Body		
DIMENSIONS – *Refer to the schematics below*										
A. Hopper Length	84.50"	96.50"	96.50"	108.50"	108.50"	84.50"	96.50"	96.50"	108.50"	108.50"
B. Length from Cab Side to Second Leg	65.50"	70.50"	82.50"	82.50"	82.50"	62.50"	67.50"	79.50"	79.50"	79.50"
C. Overall Hopper Length	107.00"	119.25"	120.50"	128.75"	126.25"	111.50"	123.00"	123.00"	129.00"	129.00"
D. Width of Hopper Opening	50.00"	50.00"	70.00"	70.00"	70.00"	50.00"	50.00"	70.00"	70.00"	70.00"
E. Height of Hopper w/o Chute	32.00"	35.75"	41.00"	43.75"	50.50"	32.00"	35.75"	41.00"	43.75"	50.50"

** Material weight equates to approximately 2,160 lb/yd³ or 80 ft³ (1 bag rock salt = approx. 1 ft³)*

REFERENCE DIAGRAMS
reference diagrams show chain models





MORE JOBS. **DONE FASTER.**

2 WINTER WARRANTY

Western Products reserves the right under its product improvement policy to change construction or design details and furnish equipment when so altered without reference to illustrations or specifications used. Western Products or the vehicle manufacturer may require or recommend optional equipment for spreaders. Do not exceed vehicle ratings. This product is manufactured under the following patents US: 7,400,058; 7,481,384; 9,296,571; other patents pending. Western Products offers a limited warranty for all hopper spreaders and accessories. See separately printed page for this important information. The following are registered (®) or unregistered (™) trademarks of Douglas Dynamics, LLC: HELIXX™, MARAUDER™, WESTERN®.

Printed in U.S.A. | **FORM NO. 31697**

A DIVISION OF DOUGLAS DYNAMICS, LLC
WESTERN PRODUCTS | PO BOX 245038 | Milwaukee, WI 53224-9538
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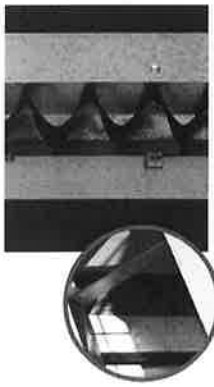
ALL-NEW MARAUDER™

STAINLESS STEEL HOPPERS

WESTERN

RIGHT TOOL FOR THE JOB.

Based on the material your operation most commonly uses for de-icing, the WESTERN® MARAUDER line offers the best material delivery system for you.

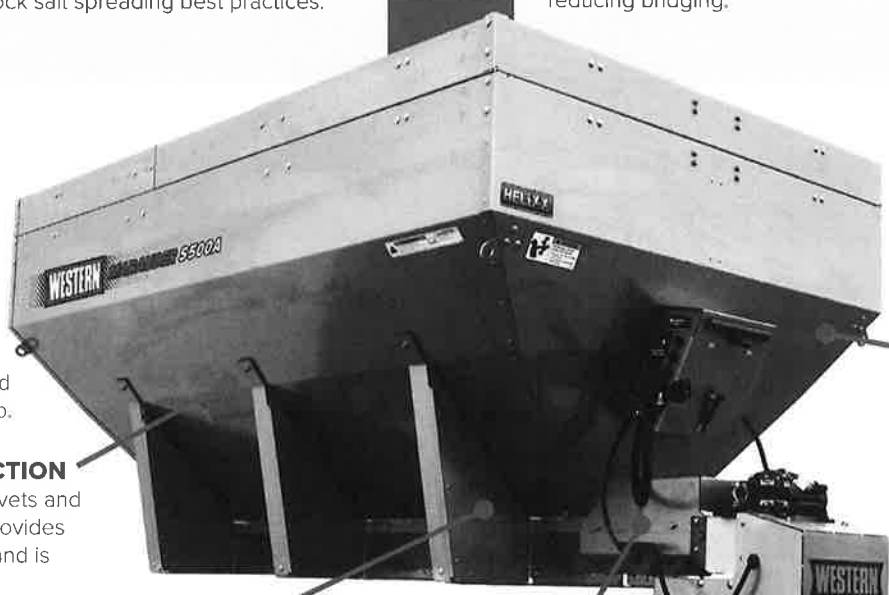


ALL-NEW
HELIXX™ AUGER TECHNOLOGY
Patent-pending corkscrew material delivery system is optimized to operate in the target range for rock salt spreading best practices.

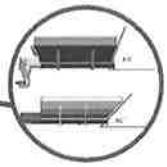
OR

PINTLE CHAIN CONVEYOR
The large conveyor delivers reliable, smooth, and consistent material flow for heavy, dense materials while reducing bridging.

MATERIAL SPILL PROTECTOR
CHAIN MODELS ONLY
A protection flap at the end of the conveyor prevents material from spilling out and pooling near the vehicle cab.



REPLACEABLE SCREEN ANCHOR
This piece is now bolted on instead of welded for easy replacement.



STEEPER END CAPS
Provides better material flow so more of the hopper load can be spread with each fill.

RIVETED CONSTRUCTION
Constructed entirely of rivets and bolts, with no welding. Provides a cleaner stainless look and is easier to repair.

WIRING CHANNEL
Channels on either side of the hopper allow wires and cables to be easily run from the hopper to the cab.

COMMON PART CHUTE DESIGN
The ergonomic, hinged design uses fewer components for all models, making service easy. A direct drive motor offers better torque and reduces servicing.

MATERIAL DELIVERY EXTENSION/ PRE-WET CHAMBER
A material delivery extension reduces leaking/ spilling during transport and leads into the patented pre-wet mixing chamber. It also provides a cab-forward design for added stability.

MARAUDER™ S500A with extension collar shown

OPTIMIZED SPINNER CHANNELS
The ridges on the spinner ensure an even distribution of material throughout the spread arc.

ACCESSORIES
Side Extensions – 6" I Pre-Wet System with ***ALL-NEW*** Direct Liquid Application Capability I Central Point Grease Kit *(chain models only)* Spill Guard Kit I LED Work Light Kit I LED Strobe Light Kit I Pullover Tarp Kit *(1.5 & 2.2 cu yd models)* I Vibrator Kit I Rear View Camera

MORE JOBS. **DONE FASTER.**

ROAD DEPARTMENT

	A	B	C	D
1	Priority	Location	Description	Quote
2				
3				
4	ARPA Funds Being Requested			
5	1	Riverside Truck Barn	Radiant Heater & Tubes	$12,560.00
6	2	Riverside Garage	Washbay replace steel posts	$26,285.00
7	3	Riverside Garage	Hosit replace rear lift	$39,884.00
8	4	Riverside Garage	Sinking Floor & Fissure	$27,620.00
9	5	Jordan Lake Truck Barn	Floor Drains	$14,450.00
10	6	Riverside Garage	Roof Repair	$7,320.00
11	7	Riverside Truck Barn	Roof Repair	$6,260.00
12	8	Jordan Lake Truck Barn	Roof Repair	$10,000.00
13	9	Riverside Garage	One Overhead Doors w/ openers	$3,500.00
14	12	Riverside Sign Shop	Roof Repair	$2,500.00
15	**Total ARPA Funds Being Requested**			$150,379.00
16				
17	Deferred Projects which Road Department wil fund in future years with MTF			
18	13	Belding Truck Barn	Bathroom	$29,840.00
19	16	Riverside Truck Barn	Dehumidifier Option B three portable	$11,104.00
20	**Total Deferred**			$40,944.00
21				
22	Previously Approved ARPA			
23	9	Riverside Garage	Nine Overhead Door w/ openers	$43,945.00
24	10	Jordan Lake Truck Barn	Two Overhead Doors w/ openers	$18,090.00
25	11	Belding Truck Barn	Two Overhead Door w/o openers	$9,600.00
26	14	Riverside Garage	Man Doors (2 doors)	$5,815.00
27	15	Jordan Lake Truck Barn	Man Doors (3doors)	$7,350.00
28	17	Belding Truck Barn	Man Door (2 doors)	$5,200.00
29	**Total ARPA Previously Approved**			$90,000.00

IONIA COUNTY PUBLIC DEFENDER OFFICE

Walt Downes, Chief Public Defender
Larry Lewis, Assistant Public Defender; Joshua Franklin, Assistant Public Defender;
Alison Stoken, Paralegal; Melony Bigger, Paralegal; and Alyssa Nurenberg, Social Worker.

We are still currently in hiring mode, looking to fill an open Assistant Public Defender position. We had extended offers to applicants without success in securing a long term commitment from an applicant. But we are hopeful that we will get more applicants to allow us to hire the best possible attorney to fill that open position.

We completed our grant process for our next fiscal year (begins October 1st), and we are just awaiting its formal MIDC approval next month. We do not foresee any issues with full funding and approval as presented and approved by the Board last month.

Since our last report in March, we have made significant progress in the transition and move of some of our staff and equipment across the hallway from us. This has provided us that much needed private meeting space for our attorneys to use when meeting with their clients in this building. We acquired a free large executive desk from the Community Library that had been left in the bank building they acquired. This has been moved and assembled in our conference room for client meetings. We appreciate the assistance of our Maintenance Department in moving and assembling the desk for our use. We also will continue to use the conference rooms in the District and Circuit Courts across the street in the Courthouse as needed.

Our caseload numbers have been rising the past few months, and April brought us our largest number of new cases in a month, with 102 new cases. We had never exceeded the 100 mark for new files before this past month. We hope that large of a number does not continue to be a new volume level, rather than just a random spike for one month, considering our current attorney shortage in the office.

Our social worker is preparing to train everyone in our office with de-escalation skills training to ensure we all have the skills set to deal with our clients with mental health issues, who may experience an episode in our office or the courthouse. We are waiting to schedule once we are back to being fully staffed to have everyone trained and prepared to better address those circumstances in the future.

Our office continues to serve on various boards and specialty courts for the county when requested. Walt Downes serves on the Ionia County Community Corrections Board, Joshua Franklin is on the Mental Health Court team for Ionia County, and Alyssa Nurenberg has been getting involved with the Ionia County Substance Abuse Initiative.

We have several jury trials headed to trial in the Circuit and District Courts in the coming months, so it continues to be a very time for us in the office.

Semi-Annual Report

May 2024

The goal of the Ionia County Commission on Aging is to strengthen the well-being of all Ionia County Senior Citizens and to be the cornerstone of support services for their continued independence.

Ionia County Commission on Aging

115 Hudson Street Ionia MI 48846

(616) 527-5365 (888) 527-5365 iccoa@ioniacounty.org

Mid-Year Update

Thank you for this opportunity to share an update on the operations and services of the Ionia County Commission on Aging at the midpoint of our fiscal year. In this report we'll look to update you on our FY 2024 goals, highlighting the new challenges and programming opportunities we see in coming months.

Status on our FY 2024 goals:

1. Facility Renovations
    - Goal: Prepare agency for next 50 years with a kitchen upgrade and improved Meals on Wheels load in/load out access, by adding confidential space to meet with clients and by updating HVAC with separate zones for kitchen/offices + new ductwork.
    - Progress: Donation of parking lot to south of ICCOA building is nearly complete. Logistics work to maintain services during renovations is making progress.

2. Transportation
    - Goal: Expand fleet from 7 to 8 vehicles, fill vacant positions and bring on more volunteers.
    - Progress:
        - Successfully added an 8th vehicle to the fleet.
        - YTD, driver hours average 79% of 2024 staff allocations/budget for this department, compared to an average of 72% in 2023.
        - We project a 10%+ increase in transportation trips delivered in FY 2024 over FY 2023.
        - Volunteer hours remain a fraction of what they were in past years, but we continue to recruit volunteer drivers. Volunteers will get us back to pre-Covid numbers.

3. Michigan Medicare Assistance Program (MMAP)
    - Goal: add an additional MMAP counselor.
    - Progress: Mission accomplished. ICCOA now has two trained MMAP counselors on staff to serve Ionia County Seniors and meet this growing need.
        - As of 2022, approximately 18.7 percent of the U.S. population was covered by Medicare. [1]
        - Medicare enrollees have skyrocketed in the last 50 years, from

[1] https://www.statista.com/statistics/200962/percentage-of-americans-covered-by-medicare/#:~:text=Medicare%20is%20an%20important%20public,increase%20from%20the%20previous%20year.

20,398,000 in 1970 to 65,042,000 in 2022.[2]
- Each year Medicare enrollees have the opportunity to make changes during open enrollment, and a trained MMAP counselor helps them find the best option and to save money.

4. Senior Center Activities & Programming
    - Goal: Add Senior Center programming throughout Ionia County.
    - Progress:
        - In 2024 we moved to simultaneously host the vast majority of special and holiday meals at all six meal sites in Ionia County, not just the City of Ionia.
        - We partnered with the United Way to place Alzheimer's/Dementia Lending Libraries at each of these six sites, kicked off by a Lunch and Learn presentation at each site by staff trained in this expertise.
        - Wellness Programming is being hosted in Lake Odessa, Saranac, Belding and Ionia in FY 2024.
        - We launched two new pilot programs in Ionia which we hope to expand to additional areas: Memory Café and Coffee Klatch.
        - We hope to leverage volunteers to add additional programming and activities at additional sites.

5. In-Home Services
    - Goal: increase service hours, maintain staff levels at 75% of allocated hours/budget and continue to reduce (or eliminate) the waiting list.
    - Progress:
        - Hours worked are increasing, but we are still shy of our goal. Takeaway, we are making real progress.
        - Analysis shows:

Period	Q1 2024 (Oct-Dec)	Q2 2024 (Jan-Mar)	April 2024
% allocations worked	60%	68%	74%
Waiting list	43	39	n/a
Individual clients served	186	178	164
Service Hours	1,904.25	1,920	725.50

Includes draft and estimated figures.

6. Adult Day Care

[2] https://usafacts.org/data/topics/people-society/social-security-and-medicare/medicare/medicare-enrollment/

- Goal: Launch the Blue Skies Adult Day Program, providing a low-to-no-cost option for Ionia County residents, one day per week.
- Progress:
  - Draft agreement partnering with Easton United Methodist Church to relaunch the program will be submitted to this board soon.
  - Anticipated launch in late summer/early fall 2024.

7. Continue to grow capacity
   - Goal: Expand to meet the needs of a growing senior population.
   - Progress:
     - Hiring and filling vacant positions is moving in a positive direction. Overall, across all ICCOA Departments, staff levels are nearly 90% of allocated/budgeted hours for 2024.
     - Our fund balance should be sufficient to cover cost overruns through the next 5 years.

Summary

We are making progress on all of our goals for FY 2024 although some, namely our renovation, now look to be continued into FY 2025.

Along the way, we have also added some new goals, a key one being to increase outreach to those we serve, to be sure we address the needs that fall outside existing programs and services. Along with that, we hope to increase awareness of our services, to Seniors 60 and above and also to those who help care for our Seniors, who may also be under 60.

In a recent CDC report that noted: *Informal or unpaid caregivers are the backbone of long-term care provided in people's homes*[3] it also reported that 24.4% of adults aged 45-64 are caregivers, compared to 18.8% of adults 65 and up.

ICCOA services look to support and protect the health and wellbeing of both these groups. In the not too distant future, these caregivers may need our help as well. Our goal is to prepare to meet these needs well into the future.

One final note, at this midway point we project to grow numbers, as far as services delivered, in

[3] https://www.cdc.gov/aging/caregiving/caregiver-brief.html

virtually every COA Department in FY 2024 over FY 2023, with the exception of Congregate Meals, where there will be a small adjustment down owing to the elimination of take-out meals midway through 2023. And we continue to see an increased demand for services.

Sneak Peek at FY 2025 Goals:

- We plan to complete the renovations of our facility and be ready for more growth ahead.
- We will work to fill vacant staff hours, achieving 100% of allocated/budgeted staff hours.
- We will request to add a new ICCOA department with our 2025 budget, splitting Wellness and Senior Center Services into separate departments, to better analyze the costs of delivering services.
- We hope to maintain a max contribution of $140K toward the Cost Allocation Plan in 2025.

Thank you again for this opportunity to provide an update on our agency's key goals for FY 2024. I welcome feedback and comments from each of you in how we serve our county, and I would be happy to offer each of you, separately or as a group, a tour of our facility and a chance to meet our staff.

At the Commission on Aging, we are proud to serve our county's Senior Citizens and their families.

Carol Hanulcik
Director