Phillipsburg City Council Agenda

945 2nd Street
11/07/16

Please mute or turn off your cell phones prior to the start of the meeting.

1. 6:00 P.M. Call To Order By Mayor Pat Hewitt

2. 6:01 P.M. Vince Beazel - Prelaw, Pre-Engineering Public Awareness

3. 6:30 P.M. Dangerous Structure Hearings 1290 3rd Street, 206 H Street, 400 3rd Street

   Documents:

   procedure.pdf

4. Reading & Approval Of The 10/17/16 Minutes

   Documents:

   101716min.pdf

5. Appropriation Ordinance #1055-10-16B

6. City Attorney - Scott Sage

7. City Clerk - Brenda Chance
   Blue Cross Blue Shield Renewal
   Select Account information
   2017 CMB License - Pizzaco of KS LLP
   2017 Training
   Caring Community meeting update
   FSLA Overtime changes
   Coffee & Conversation reminder

   Documents:

   17bcbs.pdf
   17select.pdf
   training.pdf
   fsla.pdf
   novcoffee.pdf

8. Public Works Supervisor - Tim Driggs
   Public Works Report

   Documents:

   pws110716.pdf

9. Water Department Committee - Councilmember Stites

10. Streets & Solid Waste Committee - Councilmember Voorhees

11. Park. Recreation, & Cemetery Committee - Councilmember Speake

12. Finance, Audit, & Budget Committee - Councilmember Rogers
    JPPC - Recognition recommendation

    Documents:

    recognition.pdf

13. Airport, Library, & Community Building Committee - Councilmember Innes

14. Planning, Zoning, & Housing Committee - Councilmember James

15. Mayor's Report

16. Adjourn

SECTION III. PROGRAM PROCEDURE

Summary of Steps in Procedure

(A) Statement of Enforcing Officer filed in writing to governing body.*

(B) Governing Body adopts resolution.

(1) Resolution published two times exactly one week apart. At least 30 days must elapse between the last publication and the date set for the hearing.

(2) Copy of resolution mailed by certified mail within three days after its first publication to each owner, agent, lienholder and occupant at the last known place of residence, and shall be marked "deliver to addressee only."

(C) Governing Body holds hearing on date and at time and place specified in resolution and makes formal determination on condition of structure (dangerous or not dangerous, repair or removal).

(D) If structure is determined to be unsafe or dangerous, the governing body adopts a resolution declaring such to be the case and directs the structure to be removed or repaired and the premises made safe and secure. Publish the resolution one time and deliver as required for initial resolution.

(E) If owner has not diligently commenced repair or removal (as directed in resolution) within a reasonable time from date of publication, the city may:

(1) (Optional) Adopt ordinance directing removal, authorizing payment of costs (if any) and method of payment; or

(2) Remove structure (city crews or contract with private entity).

(F) Determine net cost (return net profit, if any, to owner), certify amount owed as a lien to county clerk at time of certification of other city taxes and notify county assessor (in a timely manner) that structure has been removed.

(G) (Optional) Issue no-fund warrants without approval of state board of tax appeals and make levy therefor, if deemed necessary.

(H) (Optional) Pursue payment of unpaid cost of removal pursuant to K.S.A. Supp. 12-1,115.

* If in the opinion of the enforcing officer, a structure constitutes an "immediate hazard" then the officer "may erect barricades or cause the property to be vacated, taken down, repaired, shored or otherwise made safe without delay and such action may, under such circumstances, be taken without prior notice to or hearing." Seldom is this or should this emergency approach be utilized.

CITY OF PHILLIPSBURG
CITY COUNCIL MEETING
October 17, 2016

The Phillipsburg City Council met in regular session on October 17, 2016, 6:00 P.M., at the Phillipsburg City Office, 945 Second Street.

CALL TO ORDER

The meeting was called to order by Mayor Patrick Hewitt.

ATTENDANCE

PRESENT: Council members Mike James; Pete Rogers; Donna Speake; Lynette Voorhees.

ABSENT: Council members Rod Innes; Travis Stites.

ALSO PRESENT: Tim Driggs, Public Works Supervisor; Scott Sage, City Attorney; Jesse Rhea, reporter KKAN/KQMA; Kirby Ross, reporter Phillips County Review; Ron Lower, reporter The Advocate of Phillips County; Shawn Ellenberger; Peggy Fabin; Angie Wells; Gene Bugbee; Brenda Chance, City Clerk.

PHILLIPS CO COMMUNITY FOUNDATION $500 SUPPORT

Gene Bugbee, representing the Phillips County Community Foundation, updated the Council about the Foundation's activities and the fundraising they are doing. Bugbee requested the Council assist the Foundation with the Lucas Maddy concert fundraiser by contributing $500. It was the consensus of the Council to support the Foundation fundraiser.

Bugbee left the meeting.
Max Campbell, Jr. and Peggy Campbell arrived at 6:01 p.m.

805 D ST.

Max Campbell, Jr. reported he had found out there were utilities located at the 805 D Street property and moving dirt on the hill cannot take place.

Campbells left the meeting.

SHADE TREE COMMISSION GRANT APPLICATION

A note from Howard King, Shade Tree Commission member, about the City applying for funding from the Phillips County Community Foundation to replace approximately 20 trees on city right-of-ways and city property was reviewed. It was the consensus of the Council to apply for the funding.

The ordinances governing the Shade Tree Commission will be reviewed to see if additional members can be added.

PCH RUN

Peggy Fabin, representing Phillips County Health Systems, requested Council approval to have a race to benefit the Bone Marrow Registry beginning at the Golden Years Senior Center on Saturday, October 29th, at 8 a.m. It was the consensus of the Council to approve the race.

Fabin left at 6:11 p.m.

CHAMBER INFO	Angie Wells reported the Chamber & Mainstreet will be taking over the Christmas Lighting Committee next year. Wells requested the City's assistance to check, install, and takedown the Christmas lights. Discussion was held concerning adding lights on the courthouse. The Chamber & Mainstreet will be sponsoring a Christmas lighting contest this year. Wells requested a days notice to prepare banners for installation. Discussion was held concerning clean-up of the north side entrance area. The Convention and Visitors Bureau will be considering a welcome sign on Highway 183 south of Phillipsburg. Wells left at 6:21 p.m.
MINUTES APPROVED	Moved by Rogers, seconded by Speake, to approve the minutes of the October 3, 2016 meeting as written. Voting Aye: ALL. Opposed: NONE.
APPROPRIATION ORDINANCE #1055-10-16A	Moved by James, seconded by Voorhees, to approve an ordinance to pay the bills for the month of October. Voting Aye: ALL. Opposed: NONE. Statutory majority having voted for this ordinance; the city clerk assigned it ordinance #1055-10-16A.
CITY ATTORNEY	Sage reported on the annual city attorney's conference. Information concerning the dangerous structure procedure was provided to the Council.
PUBLIC WORKS	Driggs reported on the work done by the public works department and the equipment purchased at the Richie Brother's Auction in Denver. Driggs requested an executive session be held at the end of the meeting.
PET TAGS	Discussion was held concerning pet tags. It was the consensus to purchase one type of tag for both dogs and cats. Chance suggested the Council consider making changes to the pet tag ordinances to allow those who have their pets micro-chipped an exemption from purchasing an annual tag.
EMPLOYEE BENEFITS	An employee benefit update for the KPERS 457 plan and AFLAC will be held on December 15th. Blue Cross Blue Shield will be invited to update employees on plan benefits after the beginning of the year.
EMPLOYEE APPRECIATION	Rogers reported the Joint Personnel Policy Committee has been working on the employee policy updates. Rogers said the JPPC had considered holding the employee appreciation supper on December 10th at the Huck Boyd Center and having it catered. Discussion was held concerning the employee appreciation event.
EXECUTIVE SESSION	Moved by James, seconded by Voorhees, to recess into executive session to discuss personnel issues of non-elected personnel to protect confidentiality until 6:51 p.m. with the City Council and Driggs present. Voting Aye: ALL. Opposed: NONE. Ellenberger, Rhea, Ross, Lower, Sage and Chance left the meeting at 6:41 p.m. Moved by James, seconded by Voorhees, to recess into executive session to discuss personnel issues of non-elected personnel to protect confidentiality until 7:01 p.m. with the City Council and Driggs present. Voting Aye: ALL. Opposed: NONE.

Chance returned to the meeting at 7:01 p.m.

ADJOURN

Moved by Speake, seconded by Voorhees, to adjourn – time 7:03 P.M. Voting Aye: ALL. Opposed: NONE.

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Brenda L. Chance, City Clerk

2017 Plan Year

BlueCare℠ Small Group Plans

BlueCare plans off the Marketplace

BlueCross BlueShield of Kansas

bcbsks.com

BC714 11/16

An independent licensee of the Blue Cross Blue Shield Association.

BlueCare Small Group Plans Off the Marketplace (In Network) 2017 Plan Year

	BlueCare EliteSG Choice *Platinum level*	BlueCare ClassicSG Choice 1 *Platinum level* (2016 Plan)	BlueCare PremierSG Choice *Gold level* (Priced Option #1)	BlueCare ClassicSG Choice 2 *Gold level* (Priced Option #3)	BlueCare ClassicSG Choice 3 *Gold level*
Deductible	$0	$500 / $1,000	$1,500 / $3,000	$1,000 / $2,000	$1,500 / $3,000
Coinsurance (% paid by member)	50%	20%	20%	20%	20%
Annual out-of-pocket maximum	$1,150 / $2,300	$1,500 / $3,000	$4,500 / $9,000	$4,000 / $8,000	$4,000 / $8,000
Home and office visits – Primary	Subject to coinsurance	$25	$25 for 5 visits†	$35	$35
Home and office visits – Specialists	Subject to coinsurance	$50	$50	$70	$70
Emergency room	Subject to coinsurance	Subject to deductible/coinsurance	$300†	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Inpatient hospital services	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Preventive care	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share
Immunizations	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Outpatient lab and radiology	Subject to coinsurance	$300 paid at 100% then subject to deductible/coinsurance	Subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance
Advanced imaging	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Prescription drugs – retail	Subject to coinsurance	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250
Mail order drugs *	Subject to coinsurance	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply
Pediatric dental/vision (ages 0-19)	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Outpatient rehabilitation	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Outpatient habilitative	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Outpatient surgery	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Outpatient facility fee/ASC	Subject to coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance
Diabetic education	Subject to coinsurance	Subject to deductible/coinsurance	$25 for 5 visits†	Subject to deductible/coinsurance	Subject to deductible/coinsurance

† Subject to deductible/coinsurance after copay ⁵ HSA compliant * Specialty drugs are not covered

2017 Monthly Rate	$29,387.08	$25,196.32	$26,313.01
2016 Current Rate	$25,949.95		

BlueCross BlueShield of Kansas

BlueCare

BlueCare Small Group Plans Off the Marketplace (Network) 2017 Plan Year

Priced Option #2

	BlueCare SignatureRxSG Choice *Silver level*	BlueCare ClassicSG Choice 4 *Silver level*	BlueCare Simple SilverSG Choice[§] *Silver level*	BlueCare SaverSG Choice *Bronze level*	BlueCare Simple BronzeSG Choice[§] *Bronze level*
Deductible	$2,500 / $5,000	$3,800 / $7,600	$4,000 / $8,000	$3,500 / $7,000	$6,500 / $13,000
Coinsurance (% paid by member)	30%	20%	0%	50%	0%
Annual out-of-pocket maximum	$6,850 / $13,700	$7,150 / $14,300	$4,000 / $8,000	$7,150 / $14,300	$6,500 / $13,000
Home and office visits – Primary	$35 for 3 visits[†]	$35	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Home and office visits – Specialists	$70	$70	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Emergency room	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Inpatient hospital services	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Preventive care	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share
Immunizations	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Outpatient lab and radiology	Subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Advanced imaging	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Prescription drugs – retail	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Mail order drugs *	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Pediatric dental/vision (ages 0-19)	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Outpatient rehabilitation	$70	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Outpatient habilitative	$70	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Outpatient surgery	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Outpatient facility fee/ASC	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible
Diabetic education	$35 for 3 visits[†]	Subject to deductible/coinsurance	Subject to deductible	Subject to deductible/coinsurance	Subject to deductible

[†] Subject to deductible/coinsurance after copay [§] HSA compliant * Specialty drugs are not covered

2017 Monthly Rate $22,960.87

BlueCare

Dual Option pairings

Gold Plans:

- BlueCare PremierSG Choice
- BlueCare Simple SilverSG Choice

Silver Plans:

- BlueCare SaverSG Choice
- BlueCare SignatureRx SG Choice

Quad Option pairings

BlueCare Option 1:

- BlueCare ClassicSG Choice 1 *(Platinum)*
- BlueCare ClassicSG Choice 2 *(Gold)*
- BlueCare ClassicSG Choice 3 *(Gold)*
- BlueCare Simple SilverSG Choice *(Silver)*

BlueCare Option 2:

- BlueCare ClassicSG Choice 2 *(Gold)*
- BlueCare ClassicSG Choice 3 *(Gold)*
- BlueCare ClassicSG Choice 4 *(Silver)*
- BlueCare Simple SilverSG Choice *(Silver)*

Exclusions

Following is a list of common non-covered services. For a complete list of limitations and exclusions, refer to your contract.

Duplicate benefits provided under federal, state or local laws, regulations or programs except Medicaid; services involving cosmetic or reconstructive surgery (except as stated in the contract); charges for personal items; convalescent or custodial care or rest care; all keratotomy procedures; blood or payments to donors of blood; any service or supply related to the medical management of obesity, except services covered as preventive health benefits; services related to the reversal of sterilization procedures; any medically-aided insemination procedure; charges for services by immediate relatives or by members of the household; acupuncture and admission for acupuncture; medically unnecessary services and admissions; services covered and payable under any medical expense payment provision of any automobile insurance policy; mental illness or substance use disorder services provided by a non-eligible provider; services, supplies or treatments not specifically listed as covered in the member's contract.

Drug coverage limitation: Generic drugs are mandatory if available unless physician prescribes a brand drug.

Specialty drug coverage: In-network benefits are applied when specialty drugs are obtained from Prime Specialty Pharmacy.

This brochure provides a brief description of some important features and exclusions of this benefit program. It is not a legal document. The contract sets forth in detail the rights and obligations of both you and Blue Cross and Blue Shield of Kansas.

BlueCare

BlueCare Quad Option Pairings

2017 Plan Year

Can provide a choice of plan selection up to 4 choices

BlueCare Quad Option 1	BlueCare ClassicSG Choice 1 *Platinum level*	BlueCare ClassicSG Choice 2 *Gold level*	BlueCare ClassicSG Choice 3 *Gold level*	BlueCare Simple SilverSG Choice[§] *Silver level*
Deductible	$500 / $1,000	$1,000 / $2,000	$1,500 / $3,000	$4,000 / $8,000
Coinsurance (% paid by member)	20%	20%	20%	0%
Annual out-of-pocket maximum	$1,500 / $3,000	$4,000 / $8,000	$4,000 / $8,000	$4,000 / $8,000
Home and office visits – Primary	$25	$35	$35	Subject to deductible
Home and office visits – Specialists	$50	$70	$70	Subject to deductible
Emergency room	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Inpatient hospital services	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Preventive care	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share
Immunizations	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient lab and radiology	$300 paid at 100% then subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance	Subject to deductible
Advanced imaging	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Prescription drugs – retail	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	Subject to deductible
Mail order drugs *	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	Subject to deductible
Pediatric dental/vision (ages 0-19)	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient rehabilitation	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient habilitative	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient surgery	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient facility fee/ASC	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Diabetic education	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible

* Specialty drugs are not covered § HSA compliant

Current Plan

All plans have mandatory generics unless physician prescribes a brand name drug.

BlueCare

BC714a 11/16

An independent licensee of the Blue Cross Blue Shield Association.

BlueCare Quad Option Pairings

2017 Plan Year

Can provide a choice of plan selection up to 4 choices

BlueCare Quad Option 2	BlueCare ClassicSG Choice 2 *Gold level*	BlueCare ClassicSG Choice 3 *Gold level*	BlueCare ClassicSG Choice 4 *Silver level*	BlueCare Simple SilverSG Choice[§] *Silver level*
Deductible	$1,000 / $2,000	$1,500 / $3,000	$3,800 / $7,600	$4,000 / $8,000
Coinsurance (% paid by member)	20%	20%	20%	0%
Annual out-of-pocket maximum	$4,000 / $8,000	$4,000 / $8,000	$7,150 / $14,300	$4,000 / $8,000
Home and office visits – Primary	$35	$35	$35	Subject to deductible
Home and office visits – Specialists	$70	$70	$70	Subject to deductible
Emergency room	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Inpatient hospital services	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Preventive care	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share	$0 – Preventive is without cost share
Immunizations	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient lab and radiology	$300 paid at 100% then subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance	$300 paid at 100% then subject to deductible/coinsurance	Subject to deductible
Advanced imaging	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Prescription drugs – retail	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	$15 / $50 / $75 / $150 / Spec. Non-formulary: 20% coinsurance not to exceed $250	Subject to deductible
Mail order drugs *	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	$37.50 / $125 / $187.50 / $375 3 month supply	Subject to deductible
Pediatric dental/vision (ages 0-19)	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient rehabilitation	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient habilitative	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient surgery	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient facility fee/ASC	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Diabetic education	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible

* Specialty drugs are not covered § HSA compliant

All plans have mandatory generics unless physician prescribes a brand name drug.

	2016 Rate - BlueCare Classic SG Choice 1 - Platinum Level	**2017** Rate - BlueCare Classic SG Choice 1 - Platinum Level	**Difference 2017-2016**		**2017** Rate - BlueCare Classic SG Choice - Gold Level	**Difference 2017-2016**		**2017** Rate - BlueCare Signature RxSG Choice - Silver Level	**Difference 2017-2016**		**2017** Rate - BlueCare Classic SG Choice 2 - Gold Level	**Difference 2017-2016**
Health	$ 24,471.62	$ 27,908.13	$ 3,436.51		$23,717.37	$ (754.25)		$ 21,481.92	$ (2,989.70)		$ 24,834.06	$ 362.44
Dental	$ 1,478.33	$ 1,478.95	$ 0.62		$ 1,478.95	$ 0.62		$ 1,478.95	$ 0.62		$ 1,478.95	$ 0.62
Total Health & Dental	$ 25,949.95	$ 29,387.08	$ 3,437.13		$25,196.32	$ (753.63)		$ 22,960.87	$ (2,989.08)		$ 26,313.01	$ 363.06
Life/Accident & Disability	$ 228.54	$ 228.54	$ -		$ 228.54	$ -		$ 228.54	$ -		$ 228.54	$ -
Monthly Total	$ 26,178.49	$ 29,615.62	$ 3,437.13		$25,424.86	$ (753.63)		$ 23,189.41	$ (2,989.08)		$ 26,541.55	$ 363.06
Total City Paid Monthly	$ 25,820.99											
Total Employee Paid Monthly	$ 357.50											
Currently Employee pays $18.70/month for family; $11.00/month for single												

SelectAccount℠
The benefit of knowing

011926 - CITY OF PHILLIPSBURG
2017 Spending Account Fee Illustration

Spending accounts offer significant tax savings for you and your employees. SelectAccount's comprehensive suite of administrative services makes it easy and convenient for you to offer these tax-advantaged accounts to your employees.

Plan Administration - The administration of your plan includes the following:

- Enrollment Materials (enrollment form, product brochure, planning worksheet, sample claim forms and updates)
- Spending Account Call Center dedicated to serving your members (Monday – Friday, 7:00 am to 8:00 pm CT)
- 24/7 toll-free Interactive Voice Response (IVR) phone system
- Online account management tools for both you and your employees

The following chart illustrates our pricing model:

FSA	
Employer Annual Fees	
• **Annual fee**	Waived
• **Multiple product stacking fee**	Waived
• **Manual payroll fee** – applies if payroll information is not submitted in standard SelectAccount-specific electronic format	Waived
Monthly Participant Fees	$4.50 pppm
POP Only	
Employer Annual Fees	
• **Annual fee**	$150
HRA	
Monthly Participant Fees	$4.50 pppm
HSA	
Monthly Participant Fees	
• **PremiumSaver**	$4.00 pppm
• **BasicSaver**	$2.50 pppm
• **ThriftSaver**	$1.00 pppm
• **SelectSaver**	$3.00 pppm
A debit card is issued to all members.	
Additional Features	
• **Debit card**	Included
• **WalletDoc**	$1.50 pppm
• **Pay-the-provider option -** applies to entire population	Waived
• **EE Pays First HRA option**	Waived
• **Nondiscriminiation testing-**upon request	$250 per test

Highest participant fee applies for stacked accounts, all other accounts included
pppm = per participant per month

SelectAccount℠
The benefit of knowing

RENEWAL REQUEST FORM
011926 - CITY OF PHILLIPSBURG

Please make any changes to your plan in the Plan Changes Section. Please refer to the glossary on our website for descriptions of plans and optional features.

- You will receive a confirmation email from SelectAccount once your renewal request has been received.
- If you are adding a new spending account plan, you will need to complete a Plan Design Guide for each new plan.
- If you do not wish to renew your plan(s), please call the Group Leader Line at 1-888-460-4013 to discuss your options.
- **Participant enrollment is due to SelectAccount 30 days prior to your renewal effective date. If enrollment is not received by the renewal effective date then claims will be placed on hold until enrollment is received and updated.**
- Making your first payment to SelectAccount (either through direct check or account transaction) will signify your Company's acceptance of all terms, fee, conditions and obligations. Acceptance will be effective on the renewal date.

YOUR EMPLOYER INFORMATION

Please review the following employer information to ensure that it is correct. If you have changes to your employer information clearly note them within this box. All information in this box is necessary to administer your account in the upcoming plan year.

Employer's Name: **CITY OF PHILLIPSBURG**
Employer's Street Address: **945 2ND ST PO BOX 447**
City: **PHILLIPSBURG** State: **KS** Zip Code: **67661**

Total # eligible employees: **22**

Primary Contact Person: **BRENDA CHANCE**
Email Address: **bchance@cityofphillipsburg.com**
Phone Number: **(785) 543-5234** Fax Number: **(785) 543-2302**
(If you would like to make changes to the contact information, update this information using the online group service center or complete the Group Contact Change Form (F9333).)

Agent Name: **<NOT APPLICABLE>**
Agency Name: **<NOT APPLICABLE>**

(If there are changes to the agent and/or agency information, call the Group Leader Line at 1-888-460-4013 for further details.)

Health Plan: **Blue Cross and Blue Shield of Kansas**

SelectAccount℠
The benefit of knowing

RENEWAL REQUEST FORM
011926 - CITY OF PHILLIPSBURG

CURRENT PLAN OPTIONS

YOUR PREMIUM ONLY PLAN DESIGN

Plan Year Start: **1/1/2017** Plan Year End: **12/31/2017**

You currently offer a premium only plan - **Yes**

YOUR MEDICAL FSA PLAN DESIGN

Plan Year Start: **1/1/2017** Plan Year End: **12/31/2017**

Minimum and Maximum Contribution Limits
Plan Year Minimum: $ **0** Plan Year Maximum: $ **2002** **(IRS Maximum is $2,550)**

The Employer contributes to the account - **No**

Grace Period
You currently offer a grace period on your Medical FSA - **No**

Runout Period
You currently offer a runout period on your Medical FSA - **Yes**
Runout Period: **3 months**

Account Rollover
Your current account rollover election is: **Roll over balance up to $500 to subsequent plan year**

YOUR DEP CARE FSA PLAN DESIGN

Plan Year Start: **1/1/2017** Plan Year End: **12/31/2017**

Minimum and Maximum Contribution Limits
Plan Year Minimum: $ **0** Plan Year Maximum: $ **5000** **(IRS Maximum is $5,000)**

The Employer contributes to the account - **No**

Grace Period
You currently offer a grace period on your Dependent Care FSA - **No**

Runout Period
You currently offer a runout period on your Dependent Care FSA - **Yes**
Runout Period: **1 months**

YOUR FSA PAYROLL REPORTING INFORMATION

Your FSA Payroll Reporting Information will be sent via: **Group Portal**

YOUR MEDICAL FSA PLAN(S)' CURRENT OPTIONAL FEATURES

Medical Crossover
Your current medical crossover election is: **Participants elect crossover**

SelectAccount℠
The benefit of knowing

RENEWAL REQUEST FORM
011926 - CITY OF PHILLIPSBURG

Debit Card
Your current debit card election is: **New participants are auto-enrolled in debit card**

Brenda Chance

From: Sabrina L. William [slwilliam@fhsu.edu]
Sent: Friday, October 28, 2016 11:59 AM
To: Brenda Chance
Subject: MDC Proposal for Intro to Excel and Intermediate Excel
Attachments: Excel Intro & Intermediate Training Proposal October 28 2016.pdf

Good morning Brenda,
I hope this email finds you well. Happy Friday!

Thank you for the opportunity to present you with a proposal for Intro and Intermediate Excel training. Attached is the proposal I put together for your review. I based the proposal on the following factors, which can be adjusted.

1. Training held in Phillipsburg at the E-Center (travel for facilitators included but no room rent)
2. Materials for 8 City employees – We can adjust this to the actual number planning to attend. If you decide to open it up to the public and have them pay you to attend, we can adjust this number. Another option may be to work with the Director of the Phillips County Foundation to offer it as a public workshop for XX amount of people and they all pay him. I have previously worked with Morris on this type of a project. We will need to be cognizant of the number of computers with Excel on it and cap the class at what we have available.
3. No meals or refreshments cost included – Some clients cater meals for their employees during training and others have open lunch time frame. I built the schedule around a 30 minute lunch time. We can adjust this to whatever you want. We do recommend providing some light morning (granola bars) and afternoon (cookies) refreshments for participants.
4. Scott Jones and Felix Albl regularly facilitate this training for us. However, if they are unavailable on a date which works best for you, we can provide another engaging, qualified trainer.

Should we structure the course to open it up to the public for more participants, the only charge which will change is the cost for the materials. Therefore, opening up to the public helps share the travel and facilitation costs.

If the proposal meets your needs, feel free to sign the proposal or forward to the appropriate signature authority. If the proposal requires adjustment or you would like to brainstorm more about the training, let me know. I am happy to assist.

Thank you Brenda. I look forward to your feedback.
Enjoy the day,
Sabrina

Sabrina L. William
Director, Management Development Center
College of Business & Entrepreneurship
Fort Hays State University
McCartney Hall, Room 224
600 Park Street, Hays, KS 67601
785.628.4124
slwilliam@fhsu.edu
www.fhsu.edu/mdc

FORT HAYS STATE UNIVERSITY
Forward thinking. World ready.

MANAGEMENT DEVELOPMENT CENTER

Ms. Brenda Chance
City Clerk
City of Phillipsburg
PO Box 447
Phillipsburg, KS 67661
785.543.5234

Intro to Excel & Intermediate Excel

Overview: These two half day workshops will help participants boost productivity, simplify data management and streamline everyday tasks using Excel. During the morning session, participants who are beginners will take a tour of all the basics before learning how to build a worksheet from scratch utilizing formulas and functions. After that, participants will jump into mastering the ABCs of using charts, graphs, fonts, borders, shading and more. During the afternoon session, participants will pick up where the morning session left off and learn when to use a macro, how to debug a macro, how to create and manage a PivotChart while utilizing key code shortcuts, and linking and data exchange operations.

Participants will:

Introduction

- Navigate basic Excel Spreadsheets
- Build basic formulas
- Utilize basic functions
- Build simple charts/graphs

Intermediate

- Create What-If Statements
- Use logical statements
- Sort and filter data
- create PivotTables and PivotCharts

Date: TBD
Morning Session 8:30 a.m. – noon
Break for Lunch Noon – 12:30 p.m.
Afternoon Session 12:30 p.m. – 4:30 p.m.

Workshop Investment:

• Materials – Participant guides = 8 people @ $4	$32.00
• Facilitators' Time & Admin. Prep, Travel & Facilitate Time	$1,648.00
• Travel Expenses (mileage, meals for 2)	$70.00
Total Investment	**$1,750.00**

320 McCartney Hall · 600 Park Street · Hays, KS 67601-4099
(785) 628-4124 · FAX (785) 628-5398 · www.fhsu.edu/management

Facilitator

Mr. Scott Jones is an Instructor of Business in the Fort Hays State University Department of Applied Business Studies and the Director for the Center of Economic Education. Scott has over 22 years of teaching experience with universities and educational organizations. He has an Ed.S. in Urban Leadership & Policy Studies from the University of Missouri - Kansas City, an M.A. in Educational Administration and Leadership from the University of Kansas, an M.S. in Curriculum & Instruction from the University of Missouri-Kansas City, a B.S. in Marketing Education from the University of Missouri-Columbia and is currently pursuing his PhD in Curriculum & Instruction from Kansas State University.

Assistant Facilitator

Mr. Felix Albl, is a GTA currently pursuing his MBA at FHSU. Originally from Germany, Felix has been in the United States for nearly seven years--as he completed his high school diploma (Lansing High School) and his Bachelor's degree in Tourism and Hospitality Management (FHSU). Felix is actively involved in Collegiate DECA, where he has served as a local chapter President, Kansas State Association President and is now serving the International Association as an Executive Officer. Through his work in DECA and a student employee position during his undergraduate program, Felix gained extensive computing skills in data and numerical manipulation using both Access and Excel.

Summary

I appreciate the opportunity to provide you with this proposal and to assist with your employee development. Should you have any questions or would like to modify the scope of this training, please feel free to contact me via phone or email.

Sincerely,

Sabrina William
Director, Management Development Center
College of Business and Entrepreneurship
Fort Hays State University, MC 224
600 Park Street, Hays, KS 67601
Office: 785-628-4124
Email: slwilliam@fhsu.edu

Acceptance of Quote:

_____ _____

Ms. Brenda Chance
City Clerk
City of Phillipsburg

Date

FACT SHEET

FLSA OVERTIME CHANGES AT A GLANCE

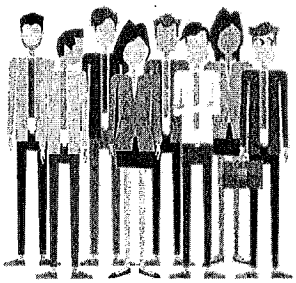
The new overtime rules will go into effect on December 1, 2016. Among other things, the rules double the salary level used to determine whether employees can be properly classified as exempt from overtime under the Fair Labor Standards Act. Here's an overview of the key changes employers should be aware of.

$23,660/yr

CURRENT MINIMUM EXEMPT SALARY

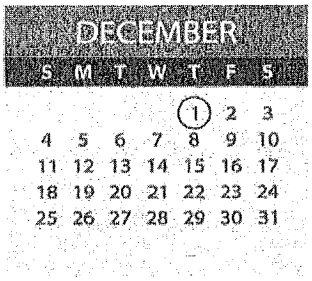
$47,476/yr

NEW MINIMUM EXEMPT SALARY



4.2 million

ESTIMATED WORKERS AFFECTED



Dec. 1, 2016

EFFECTIVE DATE

Increases

AUTOMATICALLY EVERY 3 YEARS

Tuesday, November 8

8:15 a.m. @ the Library

Coffee & Conversation

Phillipsburg City Library

888 4th Street

Phillipsburg KS 67661

The City of Phillipsburg is hosting the monthly Phillipsburg Chamber & Mainstreet Coffee and Conversation. Join us for coffee & coffee cake as we talk about what is going on in the area. We will be showing the Hope Room and the technology that is available for the community to use.

For more information contact:

City of Phillipsburg
Brenda Chance, City Clerk
785-543-5234

November 7, 2016

Important Items

- Projects:
  - Community Building

Upcoming Training

- Civilian Supervisor Training 7-8
- CPM Course
- Water Conference November 14-16

Upcoming/Performed Maintenance

- Maintenance Crews
  - Water line Repairs (7th&State, Parks street)
  - Repairs to equipment at sewer plant
  - Work Orders-completed
  - Preparation for future projects.
- Review of Master Plan Current year

Other Items

- KDEM Disaster information
- Aquatic Center annual review
- Purple Wave Results
  - Rail Road Ties
  - Old bus
  - 93 Dodge 1 ton
  - 2006 Chevy Minivan
  - Ram Jetter Trailer
- Public Works Vehicle purchase
- Planning Commission Meeting 10-19-16

Current

	Men	Women
Retirement	clock	clock
35 years	$1,000	$1,000
30 years	$1,000	$1,000
25 years	hunting knife	Shepherd's Mill stuff
20 years	money clip	desk set
15 years	plaque	plaque
10 years	plaque	plaque
5 years	plaque	plaque

Proposed

Retirement	plaque	
35 years		$1,000
30 years		$1,000
25 years		$750
20 years		$500
15 years		$250
10 years		$125
5 years		$50