



Kane County

KC Human Services Committee

Agenda

Government Center
719 S. Batavia Ave., Bldg. A
Geneva, IL 60134

SURGES, Linder, Allan, Kenyon, Lewis, Silva, Tarver & ex-officios Pierog (County Chair) and Tepe (County Vice Chair)

Wednesday, November 15, 2023

9:00 AM

County Board Room

1. **Call To Order**
 2. **Roll Call**
 3. **Remote Attendance Requests**
 4. **Approval of Minutes: October 11, 2023**
 5. **Public Comment (Agenda Items)**
 6. **Monthly Financial Reports**
 - A. Monthly Finance Reports (attached)
 7. **Department of Human Resource Management**
 - A. Monthly Blue Cross Blue Shield Invoice (attached)
 - B. Monthly BCBS and MERP Totals (attached)
 - C. Monthly Assured Partners Report (attached)
 - D. Monthly Applicants and Staff Changes (attached)
 - E. Monthly Workers Comp and Liability Reports (attached)
 8. **Compliance**
 - A. Monthly Training Report (attached)
 9. **Old Business**
 10. **New Business**
 - A. **Resolution:** Approving and Authorizing Execution of Agreement with Cannon Cochran Management Services for Workers Compensation and Liability Claims Third Party Administrator.
 - B. **Resolution:** Approving the Kane County Per Diem Meal Rates for Calendar Year 2024
 - C. **Resolution:** Authorizing Salary Increase for The Executive Director of the Human Resources Management Department
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D. Ordinance: Adopting Paid Leave for County Employees (not attached)

E. Ordinance: Creating Illinois Residency Requirements for County Employees

11. Reports Placed On File

12. Executive Session (if needed)

13. Public Comment (Non-Agenda Items)

14. Adjournment

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-23-1565
MONTHLY FINANCE REPORTS (ATTACHED)

Human Services Committee Revenue Report - Summary
Through October 31, 2023 (91.67% YTD)

	Current Month Transactions	Total Amended Budget	YTD Actual Transactions	Total % Received
120 Human Resource Management	\$ 169	\$ 984	\$ 700	71.12%
246 Employee Events Fund	\$ 169	\$ 984	\$ 700	71.12%
Grand Total	\$ 169	\$ 984	\$ 700	71.12%

Human Services Committee Expenditure Report - Summary
Through October 31, 2023 (91.67% YTD, 92.31% Payroll Expense through Pay Period Ending 10/28/2023)

	Current Month Transactions	Total Amended Budget	YTD Actual Transactions	YTD Encumbrances	Total % Used
120 Human Resource Management	\$ 528,517	\$ 4,682,060	\$ 4,039,954	\$ 23,014	86.78%
001 General Fund	\$ 20,700	\$ 356,263	\$ 243,081	-	68.23%
010 Insurance Liability	\$ 507,817	\$ 4,324,813	\$ 3,796,874	\$ 23,014	88.32%
246 Employee Events Fund		\$ 984	\$ -	\$ -	0.00%
Grand Total	\$ 528,517	\$ 4,682,060	\$ 4,039,954	\$ 23,014	86.78%

Human Services Committee Expenditure Report - Detail
Through October 31, 2023 (91.67% YTD, 92.31% Payroll Expense through Pay Period Ending 10/28/2023)

	Current Month Transactions	Total Amended Budget	YTD Actual Transactions	YTD Encumbrances	Total % Used
120 Human Resource Management	\$ 528,517	\$ 4,682,060	\$ 4,039,954	\$ 23,014	86.78%
001 General Fund	\$ 20,700	\$ 356,263	\$ 243,081	\$ -	68.23%
Personnel Services- Salaries & Wages	\$ 15,611	\$ 219,656	\$ 183,780	\$ -	83.67%
Personnel Services- Employee Benefits	\$ 4,030	\$ 50,057	\$ 45,437	\$ -	90.77%
Commodities	\$ 607	\$ 7,500	\$ 2,427	\$ -	32.36%
Contractual Services	\$ 451	\$ 79,050	\$ 11,436	\$ -	14.47%
010 Insurance Liability	\$ 507,817	\$ 4,324,813	\$ 3,796,874	\$ 23,014	88.32%
Personnel Services- Salaries & Wages	\$ 11,878	\$ 143,005	\$ 142,530	\$ -	99.67%
Personnel Services- Employee Benefits	\$ 2,836	\$ 34,718	\$ 36,228	\$ -	104.35%
Commodities	\$ -	\$ -	\$ -	\$ 355	0.00%
Contractual Services	\$ 493,103	\$ 4,143,012	\$ 3,614,038	\$ -	87.23%
Transfers Out	\$ -	\$ 4,078	\$ 4,078	\$ -	100.00%
Capital	\$ -	\$ -	\$ -	\$ 22,659	0.00%
246 Employee Events Fund	\$ -	\$ 984	\$ -	\$ -	0.00%
Commodities	\$ -	\$ 984	\$ -	\$ -	0.00%
Grand Total	\$ 528,517	\$ 4,682,060	\$ 4,039,954	\$ 23,014	86.78%



Human Services Accounts Payable by GL Distribution

Payment Date Range 10/01/23 - 10/31/23

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 001 - General Fund										
Department 120 - Human Resource Management										
Sub-Department 120 - Human Resource Management										
Account 53120 - Employee Mileage Expense										
13545 - Christine Miller	09272023	Mileage Peeling Back the Onion Presentation	Paid by EFT # 83333		09/27/2023	09/29/2023	09/29/2023		10/23/2023	41.19
Account 53120 - Employee Mileage Expense Totals							Invoice Transactions 1			<u>\$41.19</u>
Account 55000 - Miscellaneous Contractual Exp										
1299 - Kane County Regional Office of Education	8002400048	Background Checks - 2023 August Fingerprinting	Paid by EFT # 82972		09/14/2023	09/29/2023	09/29/2023		10/10/2023	440.00
Account 55000 - Miscellaneous Contractual Exp Totals							Invoice Transactions 1			<u>\$440.00</u>
Account 60000 - Office Supplies										
3578 - Warehouse Direct, Inc.	5573976-0	Office Supplies September 2023	Paid by EFT # 83092		09/18/2023	09/29/2023	09/29/2023		10/10/2023	67.86
Account 60000 - Office Supplies Totals							Invoice Transactions 1			<u>\$67.86</u>
Account 60080 - Employee Recognition Supplies										
4526 - Fifth Third Bank	7740-TK-09/23	P-Card Payment - Finance Registration	Paid by EFT # 83246		10/04/2023	10/13/2023	10/13/2023		10/23/2023	283.25
4526 - Fifth Third Bank	5419-CM-09/23	PCard September 2023	Paid by EFT # 83246		10/04/2023	10/13/2023	10/13/2023		10/23/2023	222.66
Account 60080 - Employee Recognition Supplies Totals							Invoice Transactions 2			<u>\$505.91</u>
Sub-Department 120 - Human Resource Management Totals							Invoice Transactions 5			<u>\$1,054.96</u>
Department 120 - Human Resource Management Totals							Invoice Transactions 5			<u>\$1,054.96</u>
Fund 001 - General Fund Totals							Invoice Transactions 5			<u>\$1,054.96</u>
Fund 010 - Insurance Liability										
Department 120 - Human Resource Management										
Sub-Department 130 - Insurance Liability- HRM										
Account 53000 - Liability Insurance										
13382 - C & D Autobody Repair Inc	5167	Liability Repair Payment 23D45K844545	Paid by EFT # 82880		08/22/2023	09/29/2023	09/29/2023		10/10/2023	7,559.31
13382 - C & D Autobody Repair Inc	5175	Liability Repair Payment RPO-KC-23-0020	Paid by EFT # 82880		08/30/2023	09/29/2023	09/29/2023		10/10/2023	3,865.44
8258 - CCMSI	0140142-IN	CCMSI GL Funding Reimbursement	Paid by EFT # 82882		08/31/2023	09/29/2023	09/29/2023		10/10/2023	403.08
12798 - West Bend Mutual Insurance Company	2555513	Notary Bond - Bosshart 2555513	Paid by Check # 382463		09/20/2023	09/29/2023	09/29/2023		10/10/2023	20.00
12798 - West Bend Mutual Insurance Company	2555516	Notary Bond - Guerrero Cadena 2555516	Paid by Check # 382463		09/20/2023	09/29/2023	09/29/2023		10/10/2023	20.00
12798 - West Bend Mutual Insurance Company	2555518	Notary Bond - Innocenti 2555518	Paid by Check # 382463		09/13/2023	09/29/2023	09/29/2023		10/10/2023	20.00
12798 - West Bend Mutual Insurance Company	2555132	Notary Bond - Merritt 2555132	Paid by Check # 382463		09/20/2023	09/29/2023	09/29/2023		10/10/2023	20.00



Human Services Accounts Payable by GL Distribution

Payment Date Range 10/01/23 - 10/31/23

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 010 - Insurance Liability										
Department 120 - Human Resource Management										
Sub-Department 130 - Insurance Liability- HRM										
Account 53000 - Liability Insurance										
12798 - West Bend Mutual Insurance Company	2555133	Notary Bond - Mullarkey 2555133	Paid by Check # 382463		09/20/2023	09/29/2023	09/29/2023		10/10/2023	20.00
12798 - West Bend Mutual Insurance Company	2557159	Notary Bond - Barnes 2557159	Paid by Check # 382590		10/04/2023	10/13/2023	10/13/2023		10/23/2023	20.00
12798 - West Bend Mutual Insurance Company	2557155	Notary Bond - Powers 2557155	Paid by Check # 382590		10/04/2023	10/13/2023	10/13/2023		10/23/2023	20.00
8258 - CCMSI	0142711-IN	CCMSI GL Funding Reimbursement	Paid by EFT # 83179		09/30/2023	10/13/2023	10/13/2023		10/23/2023	9,360.81
8258 - CCMSI	0143450-IN	CCMSI Funding Reimbursement	Paid by EFT # 83179		10/11/2023	10/13/2023	10/13/2023		10/23/2023	350,000.00
8258 - CCMSI	0150442-IN	CCMSI Administration Fee	Paid by EFT # 83180		09/28/2023	10/13/2023	10/13/2023		10/23/2023	17,030.00
11377 - Via Carlita, LLC dba Hawk Ford of St. Charles	73504	Liability Repair Payment	Paid by EFT # 83478		09/27/2023	10/13/2023	10/13/2023		10/23/2023	373.50
Account 53000 - Liability Insurance Totals							Invoice Transactions		14	\$388,732.14
Account 53010 - Workers Compensation										
8258 - CCMSI	0141989-IN	CCMSI WC Funding Reimbursement	Paid by EFT # 82882		09/27/2023	09/29/2023	09/29/2023		10/10/2023	49,184.38
8258 - CCMSI	0140141-IN	CCMSI WC Funding Reimbursement	Paid by EFT # 82882		08/31/2023	09/29/2023	09/29/2023		10/10/2023	57,945.46
8258 - CCMSI	0143455-IN	CCMSI WC Funding Reimbursement	Paid by EFT # 83179		10/11/2023	10/13/2023	10/13/2023		10/23/2023	16,845.16
8258 - CCMSI	0142710-IN	CCMSI WC Funding Reimbursement	Paid by EFT # 83179		09/30/2023	10/13/2023	10/13/2023		10/23/2023	38,899.51
8258 - CCMSI	0143010-IN	CCMSI Funding Reimbursement	Paid by EFT # 83179		10/02/2023	10/13/2023	10/13/2023		10/23/2023	47,535.69
13202 - Matthew J Goncher	20231001	Goncher October PSEBA Payment	Paid by EFT # 83263		10/01/2023	10/13/2023	10/13/2023		10/23/2023	927.24
Account 53010 - Workers Compensation Totals							Invoice Transactions		6	\$211,337.44
Sub-Department 130 - Insurance Liability- HRM Totals							Invoice Transactions		20	\$600,069.58
Department 120 - Human Resource Management Totals							Invoice Transactions		20	\$600,069.58
Fund 010 - Insurance Liability Totals							Invoice Transactions		20	\$600,069.58
Grand Totals							Invoice Transactions		25	\$601,124.54

**Kane County Purchasing Card Information
Human Services Committee
October 2023 Statement**

HUMAN RESOURCES

Transaction Date	Merchant Name	Additional Information	Transaction Amount
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No information to report.



Tuition Reimbursement FYTD

Payment Date Range 12/01/22 - 10/31/23

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 120 - Grand Victoria Casino Elgin										
Department 010 - County Board										
Sub-Department 020 - Riverboat										
Account 45420 - Tuition Reimbursement										
13311 - Heidi Lichtenberger	2203-01	Tuition Reimbursement	Paid by EFT # 77353		12/27/2022	01/05/2023	11/30/2022		01/17/2023	712.80
13810 - Hira Aamir	2205-01	UP500 Theory Urban Planning	Paid by EFT # 77486		12/27/2022	01/18/2023	11/30/2022		01/30/2023	1,622.40
5043 - Kristin Johnson	2204-01	PBHL 5505 Health Law: PBHL 6502 Grant Writing	Paid by EFT # 77611		01/03/2023	01/18/2023	11/30/2022		01/30/2023	2,400.00
10326 - Stephanie T Galley	2301-01	Tuition Reimb - Admin of Public Institutions	Paid by EFT # 78715		03/08/2023	03/14/2023	03/17/2023		03/27/2023	1,392.00
10326 - Stephanie T Galley	2301-02	Aurora University Class MPA-6120-S2-01 - Public Policy & Analysis	Paid by EFT # 79917		05/10/2023	05/10/2023	05/12/2023		05/22/2023	1,008.00
11129 - Gabriela Allison	2303-01	Tuition Reimb-UMGC ANTH 102. BEHS 364, CCJS 342	Paid by Check # 381403		05/12/2023	05/24/2023	05/25/2023		06/05/2023	2,400.00
13311 - Heidi Lichtenberger	2302-01	Tuition Reimbursement	Paid by EFT # 80614		05/31/2023	06/05/2023	06/09/2023		06/20/2023	264.00
12221 - Richard Malek II	2304-01	Tuition Reimb SOCW 451-HBSE 1 Hum Dev	Paid by Check # 381878		07/20/2023	07/20/2023	07/21/2023		07/31/2023	1,913.60
13311 - Heidi Lichtenberger	2302-02	Tuition Reimb GEOGR 1153 - Applied Geographic Info Systems	Paid by EFT # 82374		08/21/2023	08/29/2023	08/31/2023		09/11/2023	264.00
12221 - Richard Malek II	2304-02	Tuition Reimb - SOCW 410 - Social Welfare Policy & Services	Paid by Check # 382211		08/30/2023	08/29/2023	08/31/2023		09/11/2023	486.40
Account 45420 - Tuition Reimbursement Totals							Invoice Transactions	10		\$12,463.20
Sub-Department 020 - Riverboat Totals							Invoice Transactions	10		\$12,463.20
Department 010 - County Board Totals							Invoice Transactions	10		\$12,463.20
Fund 120 - Grand Victoria Casino Elgin Totals							Invoice Transactions	10		\$12,463.20
Grand Totals							Invoice Transactions	10		\$12,463.20

Health Insurance Fund

Revenue and Expenses

As of Transactions Processed for Fiscal Year 2023 through November 8, 2023, with comparative for 2021 and 2022

	2021 Actual	2022 Actual	2023 Actual
Revenue			
652.800.000.38000 - Investment Income	\$ 5,672.70	\$ (89,644.73)	\$ 19,864.63
652.800.000.38900 - Miscellaneous Other		17,880.23	-
652.800.000.38910 - Healthcare Employer Portion	12,211,310.78	13,116,149.26	13,180,022.58
652.800.000.38915 - Dental Employer Portion	421,549.59	425,506.52	371,404.38
652.800.000.38920 - Healthcare Employee Portion	2,501,115.04	3,197,316.62	2,666,132.78
652.800.000.38921 - Dental Employee Portion	267,157.95	281,567.30	246,494.39
652.800.000.38927 - MERP Employer Portion	888,141.89	998,731.25	1,014,041.84
652.800.000.38930 - Retiree Payments - Healthcare	577,471.94	609,359.21	655,406.88
652.800.000.38935 - Retiree Payments - Dental	2,885.80	2,614.68	3,702.06
652.800.000.38940 - Cobra Payments - Healthcare	55,784.00	47,683.65	24,367.07
652.800.000.38945 - Cobra Payments - Dental	2,977.24	2,696.46	1,975.92
Total Revenue	\$ 16,934,066.93	\$ 18,609,860.45	\$ 18,183,412.53
Expenses - Health Insurance General			
652.800.814.50150 - Contractual/Consulting Services	100,800.00	114,000.00	99,000.00
652.800.814.50520 - Healthcare Admin Services	10,860.00	11,244.00	10,657.50
652.800.814.53005 - Healthcare - Stop Loss Insurance	(1,469,791.06)	(624,786.01)	(360,597.06)
652.800.814.53038 - Healthcare - Vision Insurance	79,981.64	74,975.42	81,317.80
652.800.814.53039 - Affordable Care Act Fee	4,877.74	3,209.92	5,217.00
652.800.814.53300 - Healthcare - Health Insurance		23,030.82	
652.800.814.53310 - Healthcare - Dental Insurance	726,513.52	732,083.06	742,386.34
652.800.814.53320 - Healthcare - Life Insurance	34,493.73	42,028.63	37,235.23
652.800.814.53380 - Healthcare - Wellness		-	(100,000.00)
652.800.814.53381 - Healthcare - Wellness Surcharge Refunds	14,750.00	-	45,150.00
652.800.814.53385 - Financial Wellness	10,000.00	7,500.00	10,000.00
Total Health Insurance General Expenses	(487,514.43)	383,285.84	570,366.81

Health Insurance Fund

Revenue and Expenses

As of Transactions Processed for Fiscal Year 2023 through November 8, 2023, with comparative for 2021 and 2022

	2021 Actual	2022 Actual	2023 Actual
Expenses - Health Insurance MERP			
652.800.814.53340 - MERP - Premium Reimbursement	54,593.17	55,424.44	59,456.60
652.800.814.45100 - MERP FICA/SS on Premium Reimbursement	5,012.34	4,202.44	7,810.31
652.800.814.53330 - MERP - Medical Expense Reimbursement	163,392.12	331,406.20	432,730.70
652.800.814.53350 - MERP - Shared Savings with Administrator	164,945.92	14,315.69	-
Total MERP Expenses	387,943.55	405,348.77	499,997.61
Expenses - Health Insurance PPO			
652.800.817.53005 - Healthcare - Stop Loss Insurance	424,614.27	505,540.56	591,274.62
652.800.817.53031 - Self Insured Healthcare Claims	6,292,189.67	6,180,965.33	6,241,666.45
652.800.817.53032 - Self Insured Healthcare Claims Administration	188,335.50	218,379.24	202,546.32
652.800.817.53033 - Healthcare Facility Access Fee	43,965.85	76,025.19	11,897.93
652.800.817.53037 - Healthcare Credits	(190,164.00)	(260,802.66)	(288,096.84)
Total Health Insurance PPO Expenses	6,758,941.29	6,720,107.66	6,759,288.48
Expenses - Health Insurance HMO			
652.800.818.53005 - Healthcare - Stop Loss Insurance	397,022.40	462,945.69	460,049.90
652.800.818.53031 - Self Insured Healthcare Claims	8,180,201.23	6,714,631.41	5,616,571.09
652.800.818.53032 - Self Insured Healthcare Claims Administration	389,185.50	394,429.90	308,997.74
652.800.818.53034 - Healthcare HMO Managed Care Fee	82,665.60	92,086.70	86,601.20
652.800.818.53035 - Healthcare Physician Services Fee	2,360,426.37	2,658,797.05	2,154,399.21
652.800.818.53037 - Healthcare Credits	(394,368.00)	(497,551.16)	(466,919.16)
Total Health Insurance HMO Expenses	11,015,133.10	9,825,339.59	8,159,699.98
Expenses - Retiree			
652.800.820.53300 - Healthcare - Health Insurance	89,873.08	106,764.42	114,057.72
Total Expenses	\$ 17,764,376.59	\$ 17,440,846.28	\$ 16,103,410.60
Revenue Net Expenses	\$ (830,309.66)	\$ 1,169,014.17	\$ 2,080,001.93
Fund Balance	\$ 5,247,855.00	\$ 6,416,869.00	\$ 8,496,870.93
<i>Target Fund Balance at 25%</i>	<i>\$ 4,441,094.15</i>	<i>\$ 4,360,211.57</i>	<i>\$ 4,025,852.65</i>
<i>Target Fund Balance at 50%</i>	<i>\$ 8,882,188.30</i>	<i>\$ 8,720,423.14</i>	<i>\$ 8,051,705.30</i>

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-23-1515

MONTHLY BLUE CROSS BLUE SHIELD INVOICE (ATTACHED)

Group Health Plan	KANE COUNTY 719 BATAVIA AVENUE GENEVA, IL 60134-3077
Employer Account No.	IL1-238541
Bill Group	0579517327
Account ID Number	8253175154
Invoice Number	825318310004
Invoice Date	09/30/2023
Invoice Period	09/01/2023 - 09/30/2023
Billing Cycle	MONTHLY

Make Electronic (Wire¹ or ACH²) Payments to

Mellon Bank
Health Care Service Corporation

HCSC ABA Number 043000261
HCSC Bank Account Number 120-5032
Account ID Number 8253175154

Amount Due \$1,466,580.97

Date Due 11/01/2023

See footnotes for important Wire & ACH payment instructions

Claim Charges/Credits - Paid 9/1/23 – 9/30/23

Value Based Care-Value Incentive	365.75
Medical-Facility	357,747.20
Pharmacy	593,751.91
Medical-Professional	332,173.56
Value Based Care-Care Coordination	357.00
Total Claim Charges/Credits	\$1,284,395.42

Stop Loss - 9/1/23 – 9/30/23

Specific Stop Loss Credit/Charge	(125,517.11)
Total Stop Loss	\$(125,517.11)

Administration Fees	Calculation Method	
RX Rebate Credit	Per Contract Per Month	(77,371.92)
Medical Rx Rebate Credit	Per Contract Per Month	(935.00)
IL Access Fee	Per Contract Per Month	557.26
Benefits Value Advisor	Per Contract Per Month	1,103.30
HMO Managed Care Fee	Per Contract Per Month	8,906.00
Physician Service Fee - Allocated	Monthly Claims	31,926.06

(continued on next page)

¹For Electronic payment via Wire

You MUST include the following in the "Reference for Beneficiary" (RFB) (1@16) and "Originator to Beneficiary" (OBI) (1@35) in the following order: **1** Account name, **2** IL, MT, NM, OK or TX (depending on sales location), **3** Account ID number and due date (mmddyy). Please reference the "Make Electronic Payments to" portion at the top right of your invoice for the correct information.

²For Electronic payment via ACH

The PPD and CCD formats have different fields named "Individual ID" or "Identification Number." Please add your account description as directed in the wire instructions in the "Company Description Data" field.

Administration Fees <i>(continued from previous page)</i>		Calculation Method
Administration Fee	Per Contract Per Month	50,203.68
Specific Stop Loss	Per Contract Per Month	109,593.64
Physician Service Fee - Direct	Monthly Claims	182,399.46
APR Savings Program-Data Mining & Post Pay Recovery	Claim Based	19.52
APR Savings Program-Advanced Claim Edits and Coding Validation	Claim Based	1,300.66
Total Administration Fees		\$307,702.66

Total Claim Charges/Credits	\$1,158,878.31
Total Administration Fees & Adjustments	\$307,702.66
Total Charges	\$1,466,580.97

Billing Contact

ARCHANA KELAVKAR
Email: ASO_Billing_Team@bcbsil.com

Account Executive Contact

Dee Roberts
Email: dee_roberts@bcbsil.com

Electronic payment is preferred. Check payment is acceptable.

Make checks payable to Health Care Service Corporation	If sending via Overnight Courier	If sending via 1st Class Mail
Include Account ID Number 8253175154 Amount Due \$1,466,580.97 Date Due 11/01/2023	Health Care Service Corporation Attn: 14169 5505 N. Cumberland Ave. Suite 307 Chicago, IL 60656-1471	Health Care Service Corporation Dept. CH 14169 Palatine, IL 60055-4169

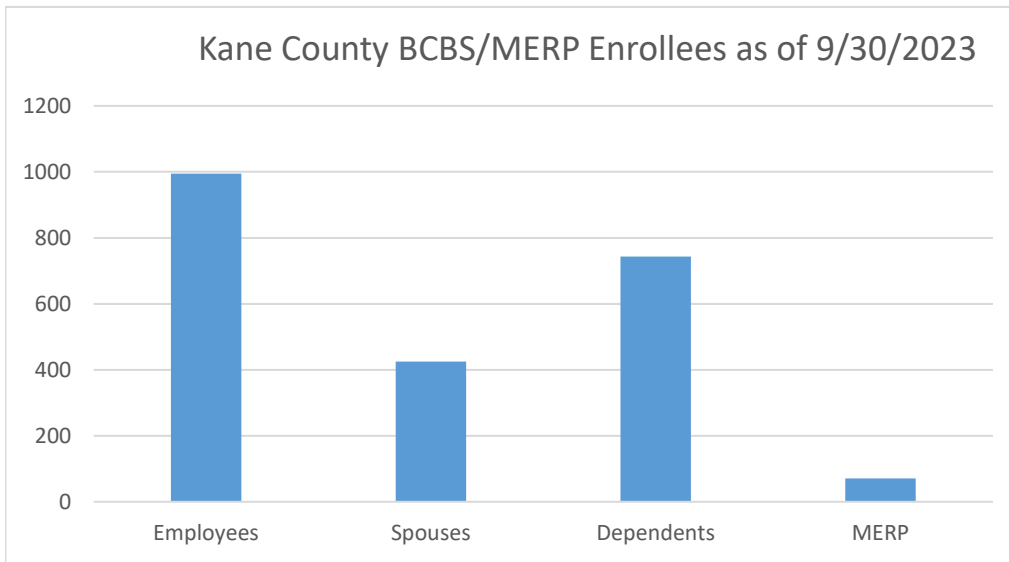
STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-23-1516

MONTHLY BCBS AND MERP TOTALS (ATTACHED)

**Kane County BCBS/MERP Enrollees as of
9/30/2023**

Employees	Spouses	Dependents	MERP
995	425	743	71



STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-23-1517

MONTHLY ASSURED PARTNERS REPORT (ATTACHED)

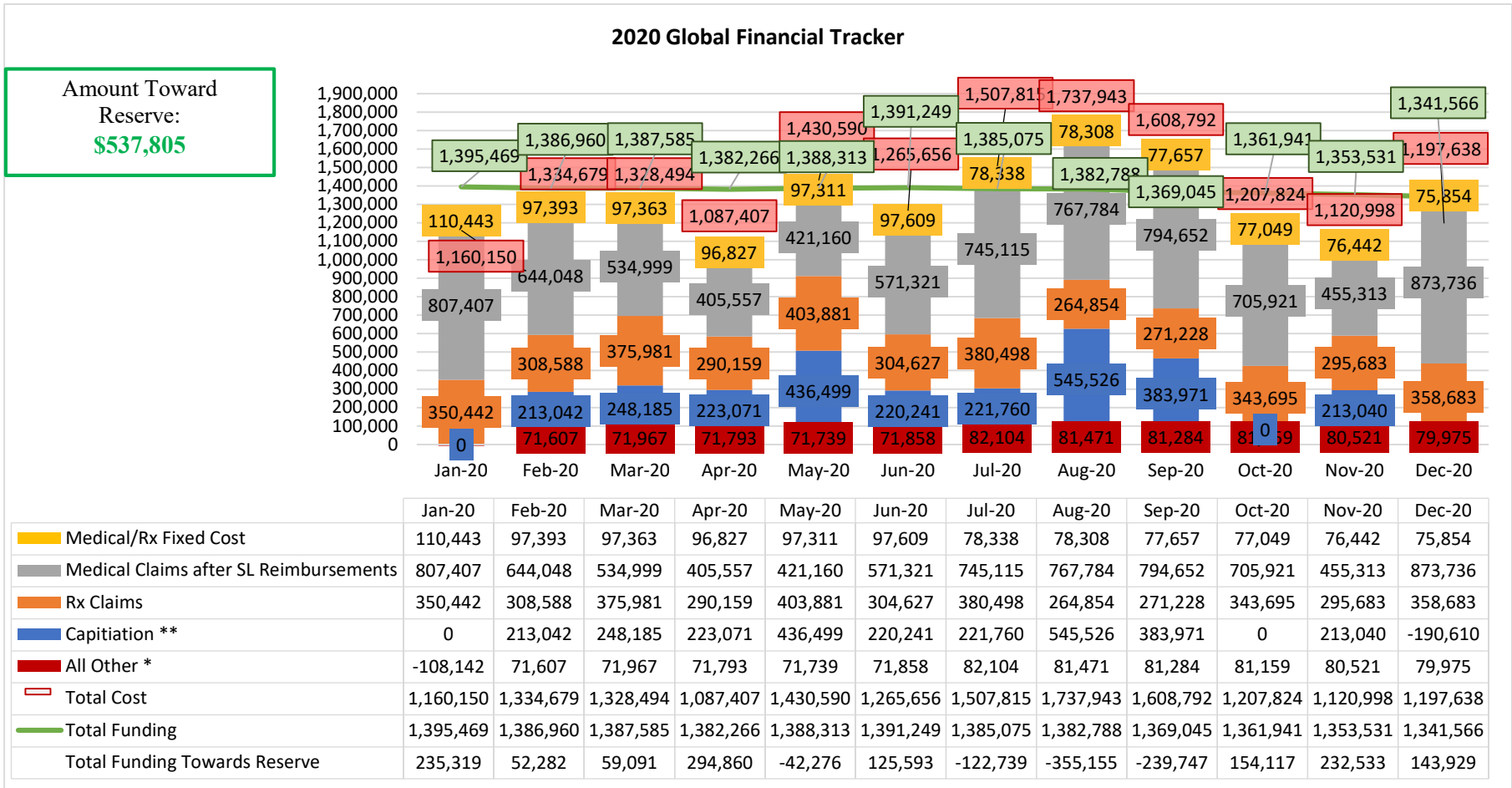


Kane County

HSC Meeting

11/15/2023

Presented by: AssuredPartners



*All Other includes Interactive Health Service, consulting fee, dental, vision, life and EAP services

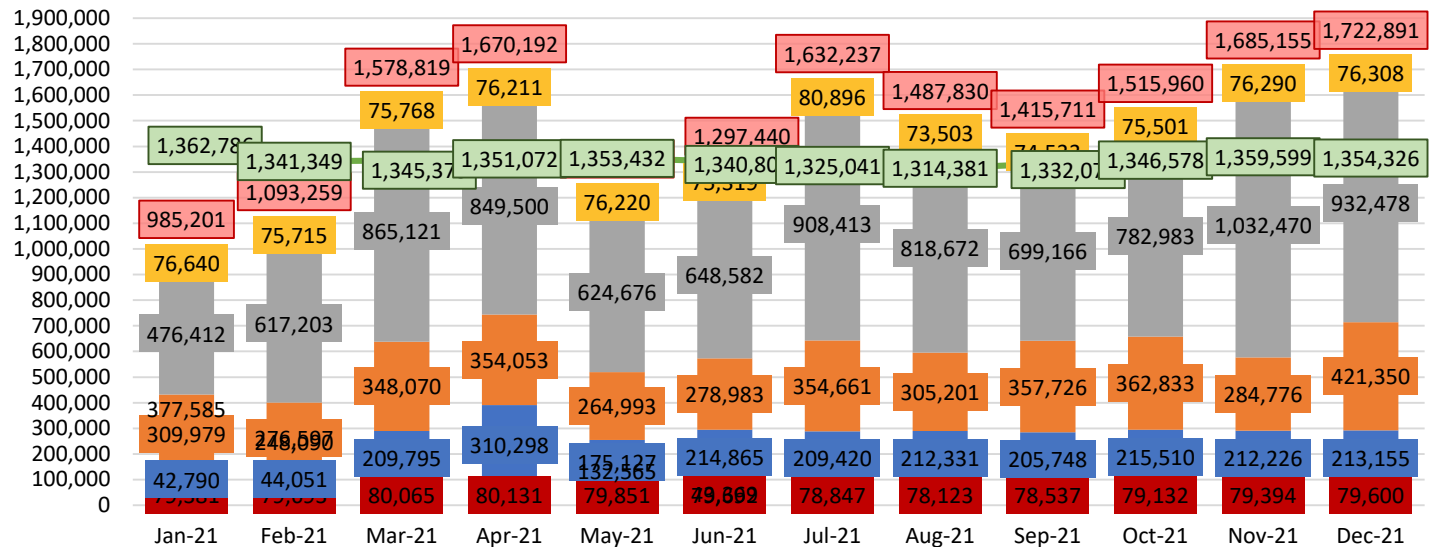
*All Other July 2020 includes a 30,000 Wellness Credit and 150,000 Communication Credit from BCBSIL

**October's capitation of \$217,040 was included in November's billing. December and January's HMO Capitation experienced billing issues. Amounts shown are not capturing the full cost. \$328,444 of additional capitation was accounted for on February's statement. February's billing also experienced billing issues, additional capitation of \$170,988 from February was included in March's billing. \$237,391 was credited to Kane County on June billing statement due to duplicate capitation charges.

***Medical Runout not included in claims: July '19 is 299,789 and August '19 is 95,383. Additional \$122,632 of reimbursement is expected at the end of the stop loss contract in August 2020 due to run-in claims from previous Stop Loss contract with IPBC.

2021 Global Financial Tracker

Amount Toward
Reserve:
-\$1,178,741

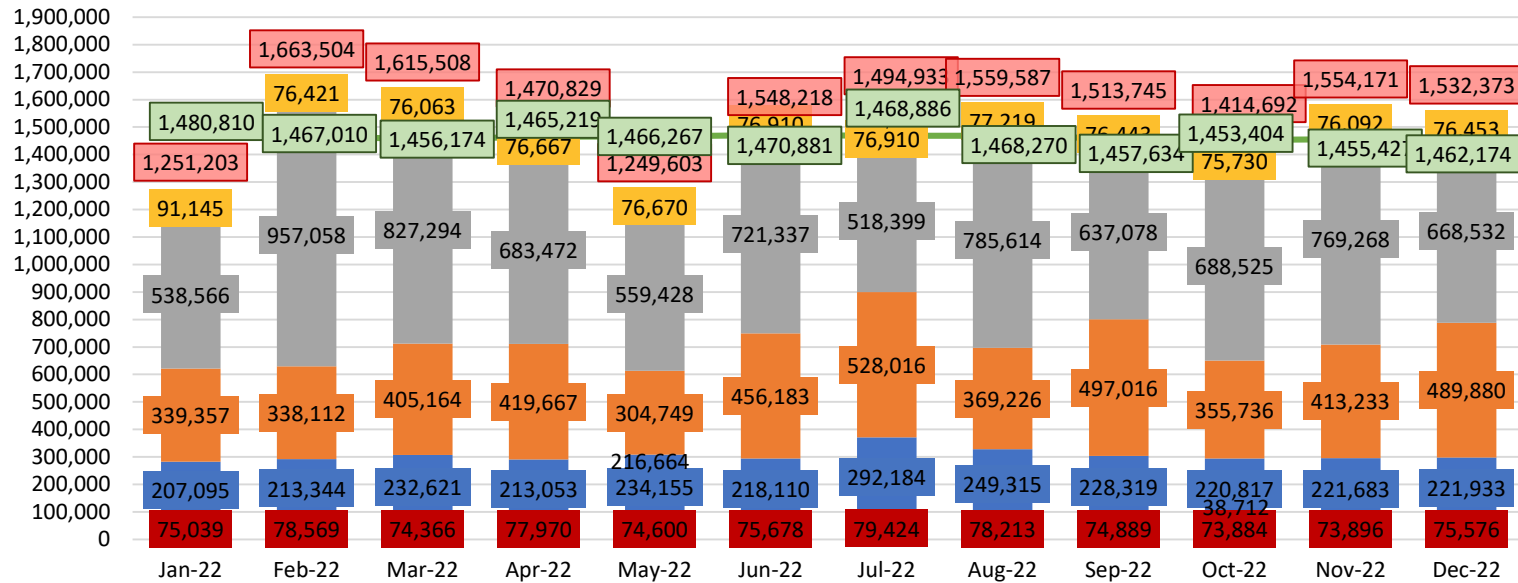


* December 2020 and January 2021's HMO Capitation experienced billing issues. Amounts shown are not capturing the full cost. \$328,444 of additional capitation was accounted for on February's statement. February's billing also experienced billing issues, additional capitation of \$170,988 from February was included in March's billing. \$237,391 was credited to Kane County on June billing statement due to duplicate capitation charges.

**All Other includes Interactive Health Service, consulting fee, dental, vision, life and EAP services

2022 Global Financial Tracker

Amount Toward
Reserve:
-\$296,211

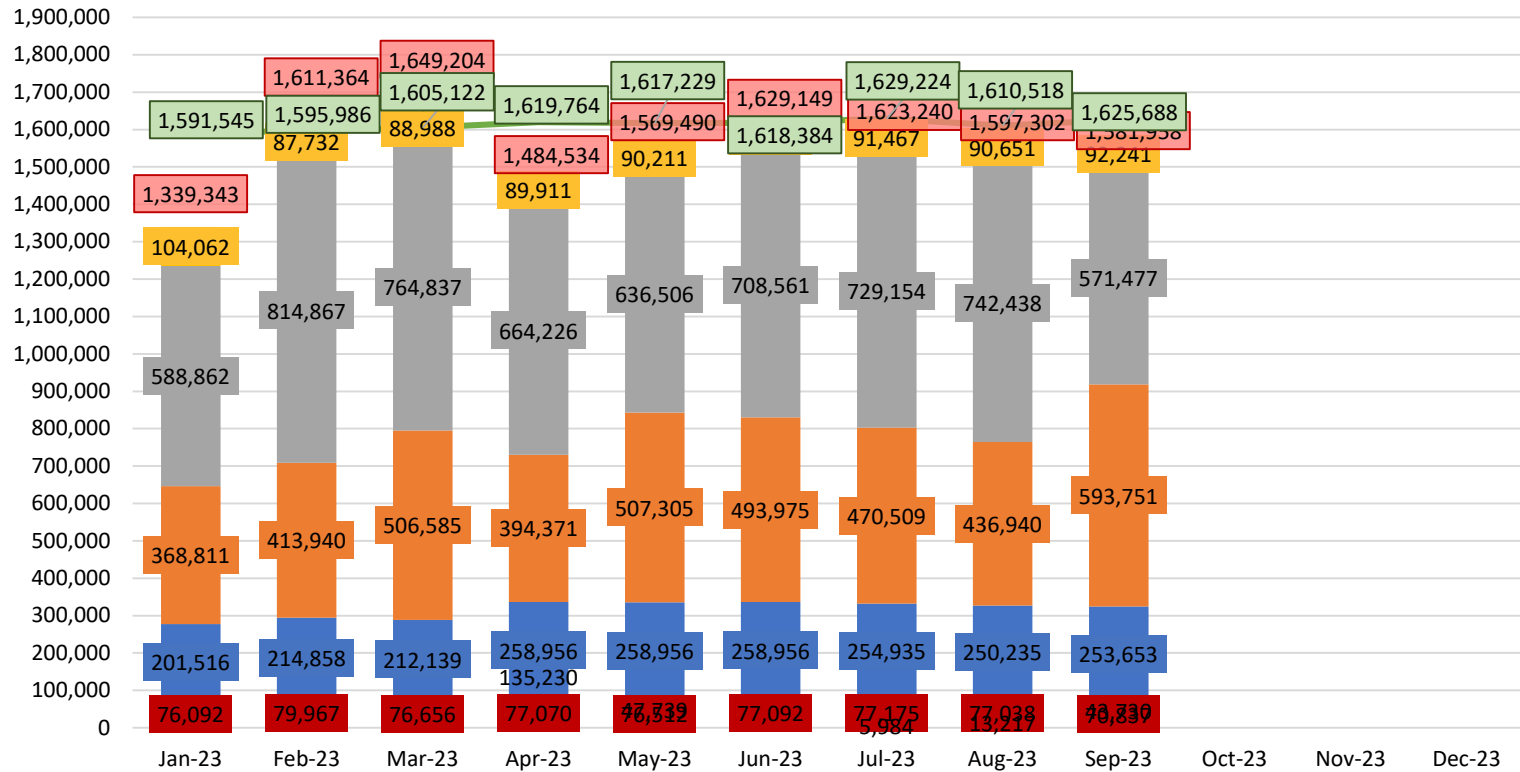


*All Other includes Interactive Health Service, consulting fee, dental, vision, life and EAP services

2023 Global Financial Tracker

2023 Global Financial Tracker

Amount Toward
Reserve:
\$427,876



	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Medical/Rx Fixed Cost	104,062	87,732	88,988	89,911	90,211	90,565	91,467	90,651	92,241			
Medical Claims after SL Reimbursements	588,862	814,867	764,837	664,226	636,506	708,561	729,154	742,438	571,477			
Rx Claims	368,811	413,940	506,585	394,371	507,305	493,975	470,509	436,940	593,751			
Capitation	201,516	214,858	212,139	258,956	258,956	258,956	254,935	250,235	253,653			
All Other *	76,092	79,967	76,656	77,070	76,512	77,092	77,175	77,038	70,837			
Total Cost	1,339,343	1,611,364	1,649,204	1,484,534	1,569,490	1,629,149	1,623,240	1,597,302	1,581,958			
Total Funding	1,591,545	1,595,986	1,605,122	1,619,764	1,617,229	1,618,384	1,629,224	1,610,518	1,625,688			
Surplus/Deficit	252,202	-15,378	-44,083	135,230	47,739	-10,765	5,984	13,217	43,730			

*All Other includes Interactive Health Service, consulting fee, dental, vision, life and EAP services

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-23-1518

MONTHLY APPLICANTS AND STAFF CHANGES (ATTACHED)

Job Applicants for October 2023 by Position

Title	Post Date - Deadline	Internal/External	Applicants
Animal Control			
Part Time Kennel Assistant	8/22/2022 - N/A	External	1
Shelter Programs and Operations Manager – Geneva	10/20/2023 - N/A	External	1
Total Animal Control Applicants			2
Auditor			
Auditor Intern	10/12/2023 - N/A	External	1
Staff Auditor	9/20/2023 - N/A	External	2
Total Auditor Applicants			3
Circuit Court Clerk			
Intern/Volunteer	Open - N/A	External	1
Total Circuit Court Clerk Applicants			1
Coroner			
Intern/Volunteer	Open - N/A	External	1
Total Coroner Applicants			1
County Board			
American Rescue Plan Program Coordinator (2 positions)	9/8/2023 - N/A	External	1
Total County Board Applicants			1
Division of Transportation			
Transportation Planner and Regional Planning Liaison	8/29/2023 - N/A	External	1
Total Division of Transportation Applicants			1
Finance Department			
Accountant	5/19/2023 - N/A	External	5
Senior Accountant, Budget Analyst	8/9/2023 - N/A	External	6
Total Finance Department Applicants			11
Health Department			
Assistant Director for Community Health	10/3/2023 - N/A	External	9
Community Health Planner	10/16/2023 - N/A	External	1
Early Childhood Mental Health Consultant (2 positions - Grant Funded)	7/19/2023 - N/A	External	2

Environmental Supervisor	10/4/2023 - N/A	External	2
Lead Inspector	10/4/2023 - N/A	External	1
Public Health Nurse	9/22/2023 - N/A	External	3
Total Health Department Applicants			18

Information Technology Department

Junior Network Engineer - VoIP and Mitel PBX Support	4/3/2023 - N/A	External	1
Network Administrator	1/30/2023 - N/A	External	2
Total Information Technology Department Applicants			3

Judiciary

Kane County Law Library & Self-Help Legal Center Library Assistant	8/31/2023 - 10/2/2023	External	4
Total Judiciary Applicants			4

KANECOMM

9-1-1 Telecommunicator	6/27/2023 - N/A	External	10
Total KANECOMM Applicants			10

Office of Community Reinvestment

Program Assistant	6/18/2021 - N/A	External	2
Program Coordinator	7/13/2023 - N/A	External	3
Total Office of Community Reinvestment Applicants			5

Office of Emergency Management (OEM)

[22] Office of Emergency Management (OEM)	10/17/2023 - N/A	External	6
[60] Office of Emergency Management (OEM)	Open - N/A	External	1
Total Office of Emergency Management (OEM) Applicants			7

Sheriff

Case Manager	9/27/2023 - 10/8/2023	External	2
Correction Officers *Lateral Transfer*	7/19/2023 - N/A	External	2
Court Security Officer	6/21/2023 - N/A	External	1
Court Security Officer	6/22/2023 - N/A	External	14
Intern/Volunteer	Open - N/A	External	1
Total Sheriff Applicants			20

State's Attorney

Administrative Assistant – Felony Division	9/19/2023 - N/A	External	4
Administrative Assistant – Violations of Probation, Specialty Courts	10/4/2023 - N/A	External	4

Bilingual Advocate/Case Manager-Child Advocacy Center	8/28/2023 - N/A	External	3
Bilingual Intake/Multidisciplinary Team Coordinator & Outreach Prevention Specialist	7/31/2023 - N/A	External	2
Child Advocacy Center - Operations Manager/Advocate	11/17/2022 - N/A	External	1
Collaborative Diversion Case Manager	9/26/2023 - N/A	External	3
Felony Deferred Prosecution Case Manager	7/24/2023 - N/A	External	1
Felony Specialty Courts/Pre-Trial Fairness Act Administrative Assistant	10/20/2023 - N/A	External	1
Receptionist	9/22/2023 - N/A	External	6
Victim Services Advocate	6/20/2023 - N/A	External	6
Total State's Attorney Applicants			31

Total Applicants for October

118

New Hire Report

from 10/01/2023 - 10/31/2023

Department	Employee Name	Job Title	Employee Status	Hire Date
Animal Control				
	CLEMMENT, NOAH B	Kennel Assistant	ACTIVE	10/02/2023
Circuit Clerk				
	EISENMENGER, SEMRA	Deputy Clerk	ACTIVE	10/10/2023
	FRANZEN, NICOLE A	CPR Coordinator	ACTIVE	10/10/2023
		Deputy Clerk	ACTIVE	10/10/2023
		Information Specialist	ACTIVE	10/10/2023
	HERMOSILLO, MIA N	Deputy Clerk	ACTIVE	10/23/2023
County Board				
	BAIR, VERONICA M	ARPA Program Coordinator	ACTIVE	10/16/2023
	LE, HUY Q	ARPA Program Coordinator	ACTIVE	10/10/2023
Court Services/Juvenile Justice Center				
	ACOSTA, REYNA	Youth Counselor JJC	ACTIVE	10/10/2023
	CRAIN, HANNA L	Youth Counselor JJC	ACTIVE	10/10/2023
	PIERSKI, IAN	Youth Counselor JJC	ACTIVE	10/10/2023
Emergency Management Services				
	BUZIECKI, SCOTT J	Director Office of Emergency Mgt	ACTIVE	10/16/2023
Finance				
	BOWLES, CHRISTOPHER R	Sr Accountant/Budget Analyst	ACTIVE	10/23/2023
Health				
	MURPHY, CLARISSA J	CHS III Comm Health Init Coord	ACTIVE	10/30/2023

New Hire Report

from 10/01/2023 - 10/31/2023

Information Technologies

HARTNESS, PAMELA M	Administrative Assistant	ACTIVE	10/02/2023
	Payroll Analyst I	ACTIVE	10/02/2023

Judiciary and Courts

HICKS, LUCILA	Court Bailiff	ACTIVE	10/30/2023
SCHUHOW, RAYMOND H Jr	Court Bailiff	ACTIVE	10/23/2023

Public Defender

DIAZ, SANTOS D	Investigator	ACTIVE	10/02/2023
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Sheriff/Adult Corrections

ABBOTT, KASEY E	Information Specialist	ACTIVE	10/16/2023
SALERNO, ALYCE M	Correctional Officer	INACTIVE	10/10/2023

State's Attorney

BEERY, JOHN W	Law Clerk	ACTIVE	10/02/2023
NOVAK, HOLLY L	Victim Advocate	ACTIVE	10/10/2023
	Victim Services Advocate	ACTIVE	10/10/2023
WALGREEN, MARGUERITE E	Assistant States Attorney	ACTIVE	10/23/2023

Transportation

VANVOOREN, JUSTIN E	Chief Financial Officer - CPA	ACTIVE	10/02/2023
	Chief of Finance	ACTIVE	10/02/2023

Total New Hires 22

Termination Report

from 10/01/2023 - 10/31/2023

Department		
Employee Name		Termination Date
Court Services/Court Services Administration		
ERNAT, MADISON P		10/12/23
ODEN, BRANDY L		10/06/23
Judiciary and Courts		
RENSA, ROBERT A		10/02/23
Kane Comm		
POWELL, MELISSA R		10/11/23
Sheriff/Adult Corrections		
ALES, JOSHUA S		10/05/23
O'CONNOR, HUGH G		10/03/23
SALERNO, ALYCE M		10/12/23
Transportation		
BECKER, JENNIFER L		10/13/23
Total Terminations 8		

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

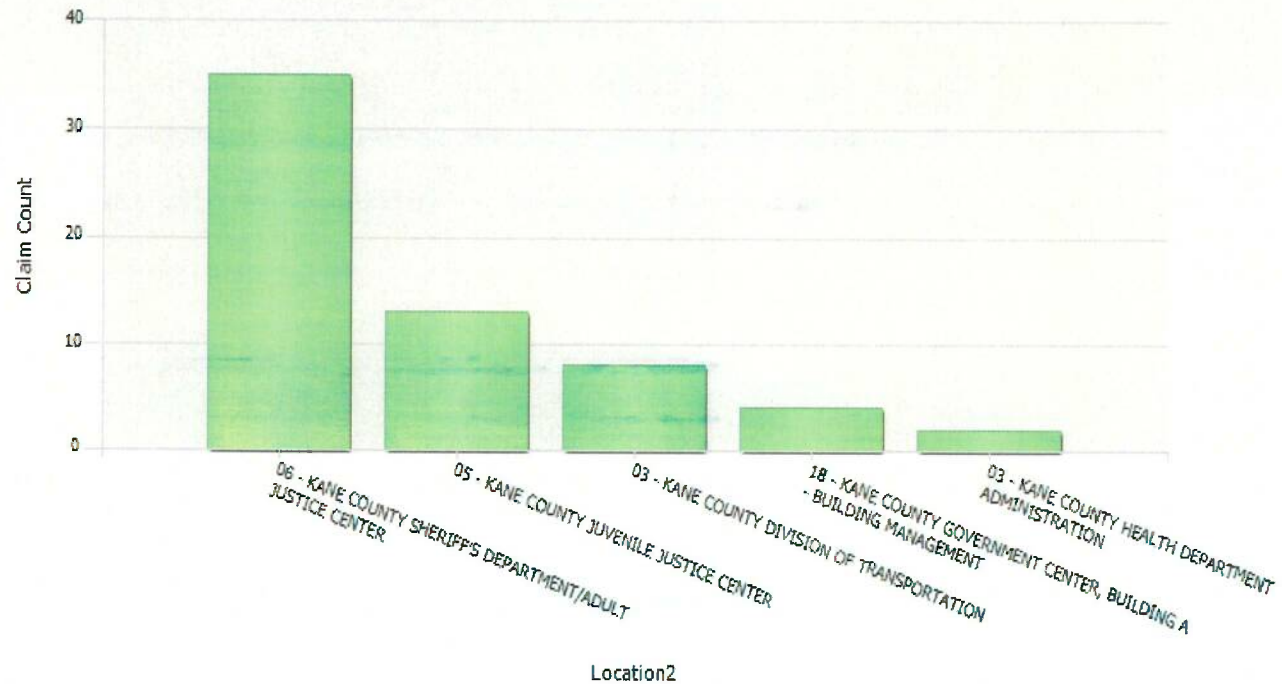
REPORT NO. TMP-23-1519

MONTHLY WORKERS COMP AND LIABILITY REPORTS (ATTACHED)

Kane County top 5 locations where the most incidents have occurred 12/01/2022-11/30/2023 as of 10/31/2023

Location2	Claim Count	Total Paid	Outstanding Reserves	Recovery	Total Incurred	Total Reimbursement	Net Incurred	Cost Per Claim	% of Freq	% Of Incur
06 - KANE COUNTY SHERIFF'S DEPARTMENT/ADULT JUSTICE CENTER	35	\$201,500.91	\$566,782.36	\$0.00	\$768,283.27	\$0.00	\$768,283.27	\$21,950.95	54%	75%
05 - KANE COUNTY JUVENILE JUSTICE CENTER	13	\$14,619.61	\$108,522.62	\$0.00	\$123,142.23	\$0.00	\$123,142.23	\$9,472.48	20%	12%
03 - KANE COUNTY DIVISION OF TRANSPORTATION	8	\$44,832.73	\$33,059.81	\$0.00	\$77,892.54	\$0.00	\$77,892.54	\$9,736.57	12%	8%
18 - KANE COUNTY GOVERNMENT CENTER, BUILDING A - BUILDING MANAGEMENT	4	\$4,082.04	\$1,752.13	\$0.00	\$5,834.17	\$0.00	\$5,834.17	\$1,458.54	6%	1%
03 - KANE COUNTY HEALTH DEPARTMENT ADMINISTRATION	2	\$6,313.28	\$3,686.72	\$0.00	\$10,000.00	\$0.00	\$10,000.00	\$5,000.00	3%	1%

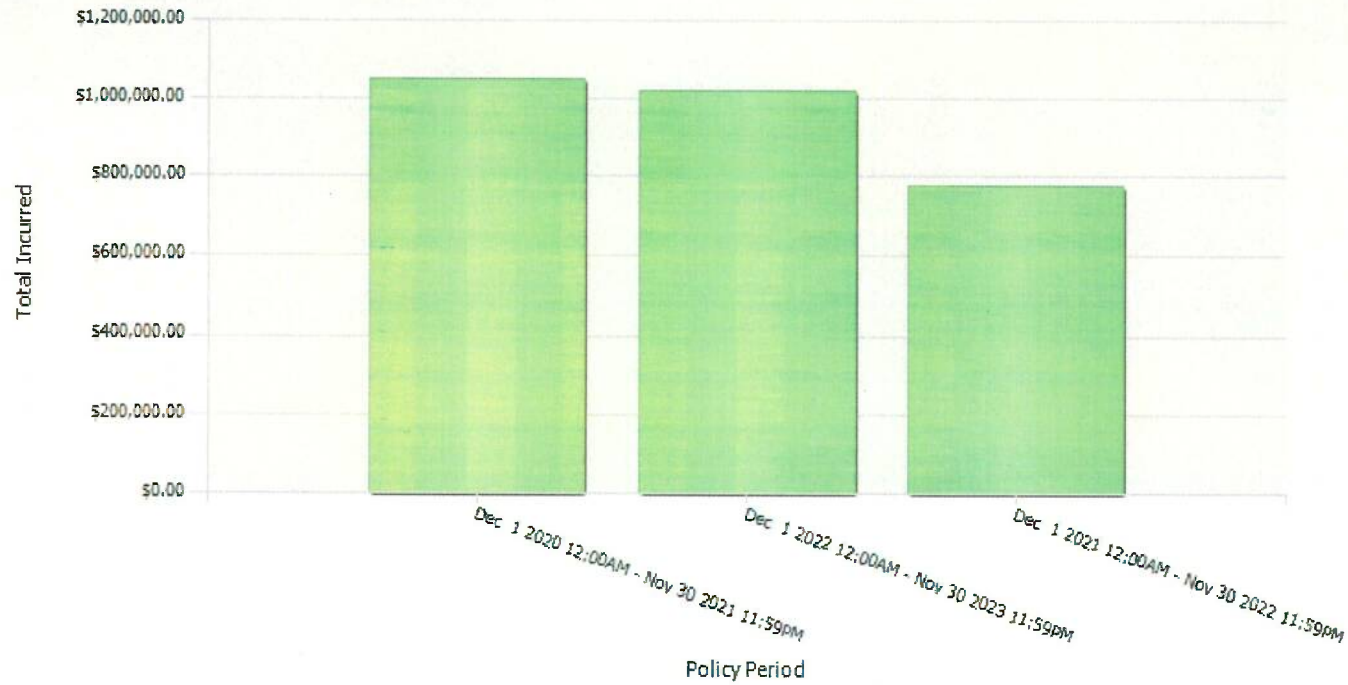
Summary by Location2 Ordered by Claim Count in Descending Order



Kane County workman's compensation trend from the 3 policy periods(12/01/20-11/30/23), in descending order by total incurred as of 10/31/2023

Policy Period	Claim Count	Total Paid	Outstanding Reserves	Recovery	Total Incurred	Total Reimbursement	Net Incurred	Cost Per Claim	% of Freq	% Of Incur
Dec 1 2020 12:00AM - Nov 30 2021 11:59PM	71	\$785,609.41	\$288,206.70	\$23,736.71	\$1,050,079.40	\$0.00	\$1,050,079.40	\$14,789.85	38%	37%
Dec 1 2022 12:00AM - Nov 30 2023 11:59PM	65	\$274,101.57	\$744,418.28	\$0.00	\$1,018,519.85	\$0.00	\$1,018,519.85	\$15,669.54	35%	36%
Dec 1 2021 12:00AM - Nov 30 2022 11:59PM	52	\$461,310.74	\$321,392.67	\$8,647.62	\$774,055.79	\$0.00	\$774,055.79	\$14,885.69	28%	27%

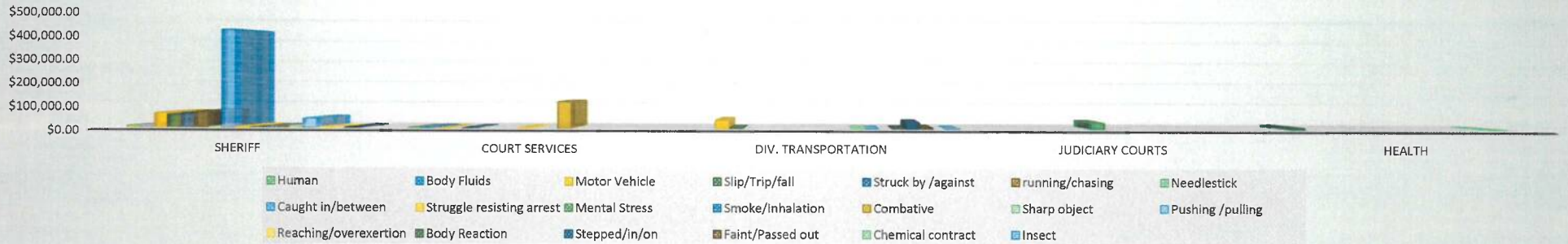
Summary by Policy Period Ordered by Total Incurred in Descending Order



The Departments within the 5 Top Locations where the losses were reported and the Total incurred for each cause code from 12/01/2022 -11/30/2023 as of 10/31/2023

Departments	Human	Body Fluids	Motor Vehicle	Slip/Trip/fall	Struck by /against	running/chasing	Needlestick	Caught in/between	Struggle resisting arrest	Mental Stress	Smoke/Inhalation	Combative	Sharp object	Pushing /pulling	Reaching/o verexertion	Body Reaction	Stepped/in/on	Faint/Passed out	Chemical contract	Insect
Sheriff	\$8,034.23	\$9,533.91	\$65,032.98	\$56,230.90	\$62,718.64	\$70,103.19	\$1,321.63	\$433,824.49	\$4,198.72	\$622.82	\$2,271.43	\$1,100.00	\$6,636.00	\$43,751.00	\$373.33		\$2,530.00			
Court Services	\$1,544.37	\$2,319.99			\$601.99				\$1,266.57			\$117,239.97								
Div. Transportation			\$38,992.68	\$287.25									\$1,650.00	\$509.71		\$436.92	\$30,164.98	\$4,751.00		\$1,100.00
Judiciary Courts										\$30,067.64										
Health				\$8,350.00															\$1,650.00	

The Departments within the Top Locations where the losses were reported and total Incurred for each code for 12/01/2022 to 11/30/2023 as of 10/31/2023



Departments	Count	Total Incurred
Sheriff	35	\$768,283.27
Court Services	13	\$122,972.89
Div. of transportation	8	\$77,892.54
Judiciary Courts	1	\$30,067.64
Health	2	\$10,000.00
Total:	59	\$1,009,216.34

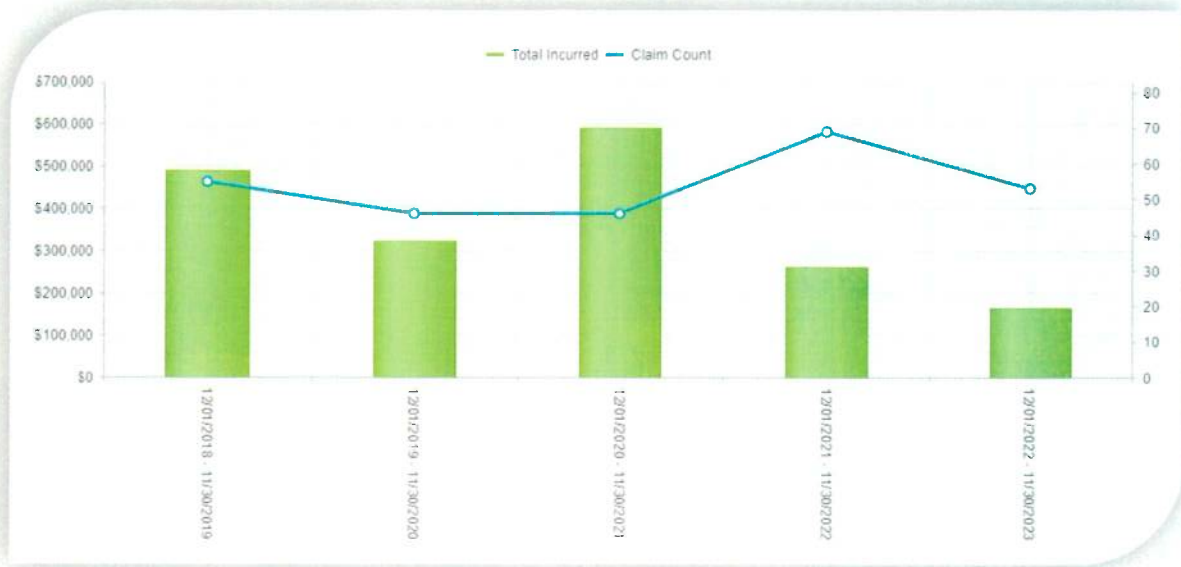
Executive Reports for Kane County Worker's Compensation Program for the last 4 years and the current year – By policy period and chronological order as of 10/31/2023



Policy Period	Paid	Out Reserve	Recovered	Total Incur	Claim Count	Cost per Claim
12/01/2018 - 11/30/2019	\$888,985.94	\$200,940.61	\$0.00	\$1,089,926.55	92	\$11,847.03
12/01/2019 - 11/30/2020	\$414,386.33	\$183,767.54	\$608.39	\$597,545.48	46	\$12,990.12
12/01/2020 - 11/30/2021	\$785,609.41	\$288,206.70	\$23,736.71	\$1,050,079.40	71	\$14,789.85
12/01/2021 - 11/30/2022	\$461,310.74	\$321,392.67	\$8,647.62	\$774,055.79	52	\$14,885.69
12/01/2022 - 11/30/2023	\$274,101.57	\$744,418.28	\$0.00	\$1,018,519.85	65	\$15,669.54
Totals:	\$2,824,393.99	\$1,738,725.80	\$32,992.72	\$4,530,127.07	326	\$13,896.10

-Total incurred for the current policy period is at \$1,018,519.85 with 65 (6 more claims reported this month) claims reported. The average cost per claim is \$15,669.54 (increase is by \$5,332.00 compared to last month) for the current period as these claims continue to develop.

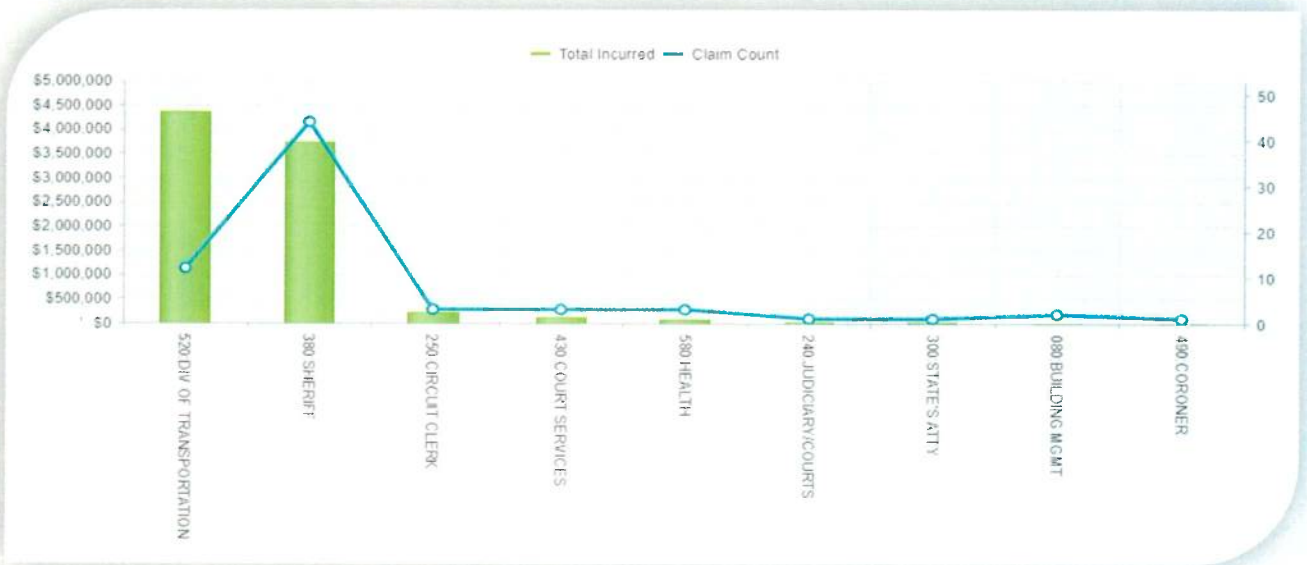
Executive Report for Kane County Liability Program for the last 4 years and the current year-By policy period and chronological order as of 10/31/2023



Policy Period	Paid	Out Reserve	Recovered	Total Incur	Claim Count	Cost per Claim
12/01/2018 - 11/30/2019	\$123,497.80	\$416,012.00	\$50,495.26	\$489,014.54	55	\$8,891.17
12/01/2019 - 11/30/2020	\$123,560.25	\$255,000.00	\$56,903.19	\$321,657.06	46	\$6,992.54
12/01/2020 - 11/30/2021	\$694,799.04	\$58,000.00	\$163,936.41	\$588,862.63	46	\$12,801.36
12/01/2021 - 11/30/2022	\$405,413.74	\$25,038.37	\$167,928.39	\$262,523.72	69	\$3,804.69
12/01/2022 - 11/30/2023	\$196,779.37	\$40,497.43	\$74,178.08	\$163,098.72	53	\$3,077.33
Totals:	\$1,544,050.20	\$794,547.80	\$513,441.33	\$1,825,156.67	269	\$6,784.97

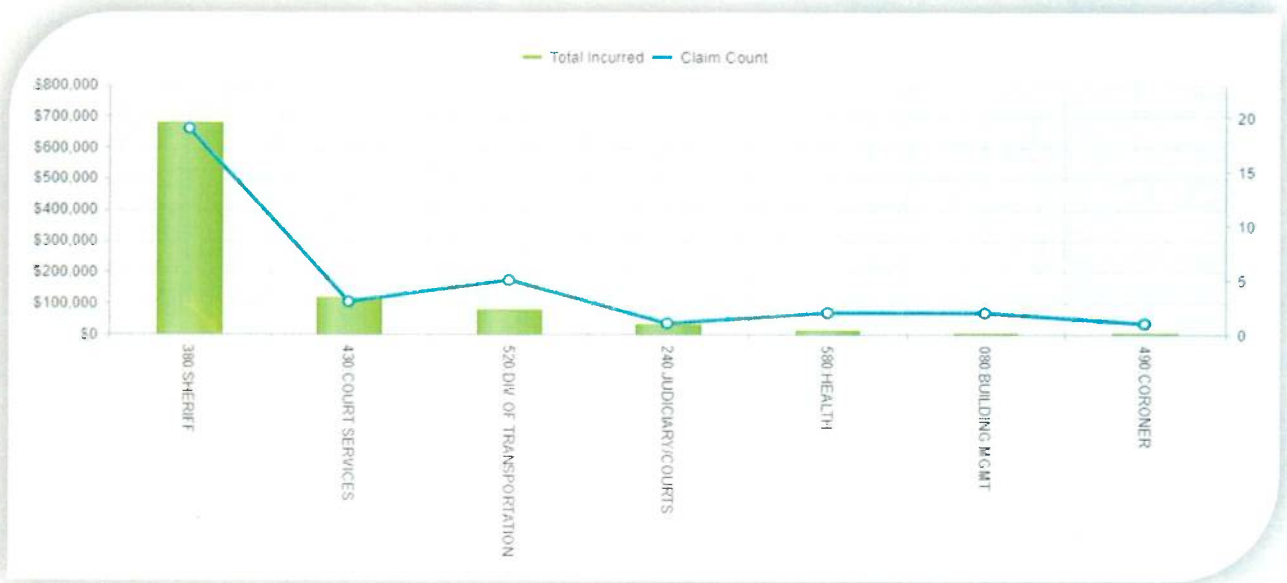
-Total incurred for the current policy period is \$163,098.72 (increase is by \$6,749.00 compared to last month) with 53 (6 more claims reported this month) claims reported. Average cost per claim is \$3,077.33 for the current period and that is \$249.00 more compared to last month.

All open Worker's Compensation Claims for Kane County as of 10/31/2023 with the oldest date of injury to be 06/15/2000 by Department



Departments	Paid	Out Reserve	Recovered	Total Incur	Claim Count	Cost per Claim
520:DIV OF TRANSPORTATION	\$3,141,540.15	\$1,210,722.47	\$0.00	\$4,352,262.62	12	\$362,688.55
380:SHERIFF	\$1,638,103.75	\$2,081,965.51	\$0.00	\$3,720,069.26	44	\$84,547.03
250:CIRCUIT CLERK	\$170,506.33	\$43,145.84	\$0.00	\$213,652.17	3	\$71,217.39
430:COURT SERVICES	\$7,359.53	\$108,522.62	\$0.00	\$115,882.15	3	\$38,627.38
580:HEALTH	\$52,607.57	\$9,331.77	\$0.00	\$61,939.34	3	\$20,646.45
240:JUDICIARY/COURTS	\$40.00	\$30,027.64	\$0.00	\$30,067.64	1	\$30,067.64
300:STATE'S ATTY	\$15,140.30	\$609.70	\$0.00	\$15,750.00	1	\$15,750.00
080:BUILDING MGMT	\$2,097.87	\$1,752.13	\$0.00	\$3,850.00	2	\$1,925.00
490:CORONER	\$2,713.00	\$587.00	\$0.00	\$3,300.00	1	\$3,300.00
Totals:	\$5,030,108.50	\$3,486,664.68	\$0.00	\$8,516,773.18	70	\$121,668.19

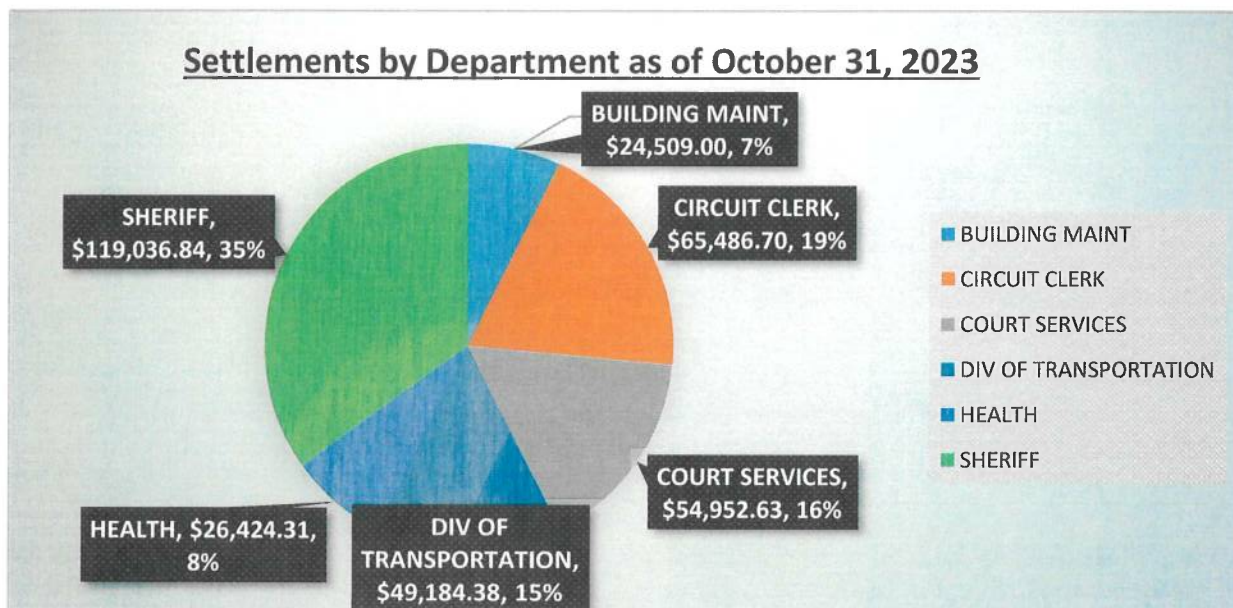
Open Worker's Compensation Claims that occurred from 12/01/2022 to 11/30/2023 as of 10/31/2023



Departments	Paid	Out Reserve	Recovered	Total Incur	Claim Count	Cost per Claim
380:SHERIFF	\$111,308.74	\$566,782.36	\$0.00	\$678,091.10	19	\$35,689.01
430:COURT SERVICES	\$7,359.53	\$108,522.62	\$0.00	\$115,882.15	3	\$38,627.38
520:DIV OF TRANSPORTATION	\$43,598.85	\$33,059.81	\$0.00	\$76,658.66	5	\$15,331.73
240:JUDICIARY/COURTS	\$40.00	\$30,027.64	\$0.00	\$30,067.64	1	\$30,067.64
580:HEALTH	\$6,313.28	\$3,686.72	\$0.00	\$10,000.00	2	\$5,000.00
080:BUILDING MGMT	\$2,097.87	\$1,752.13	\$0.00	\$3,850.00	2	\$1,925.00
490:CORONER	\$2,713.00	\$587.00	\$0.00	\$3,300.00	1	\$3,300.00
Totals:	\$173,431.27	\$744,418.28	\$0.00	\$917,849.55	33	\$27,813.62

**Kane County Settlements by Department for Policy Period
December 1, 2022- November 30, 2023 as of October 31, 2023**

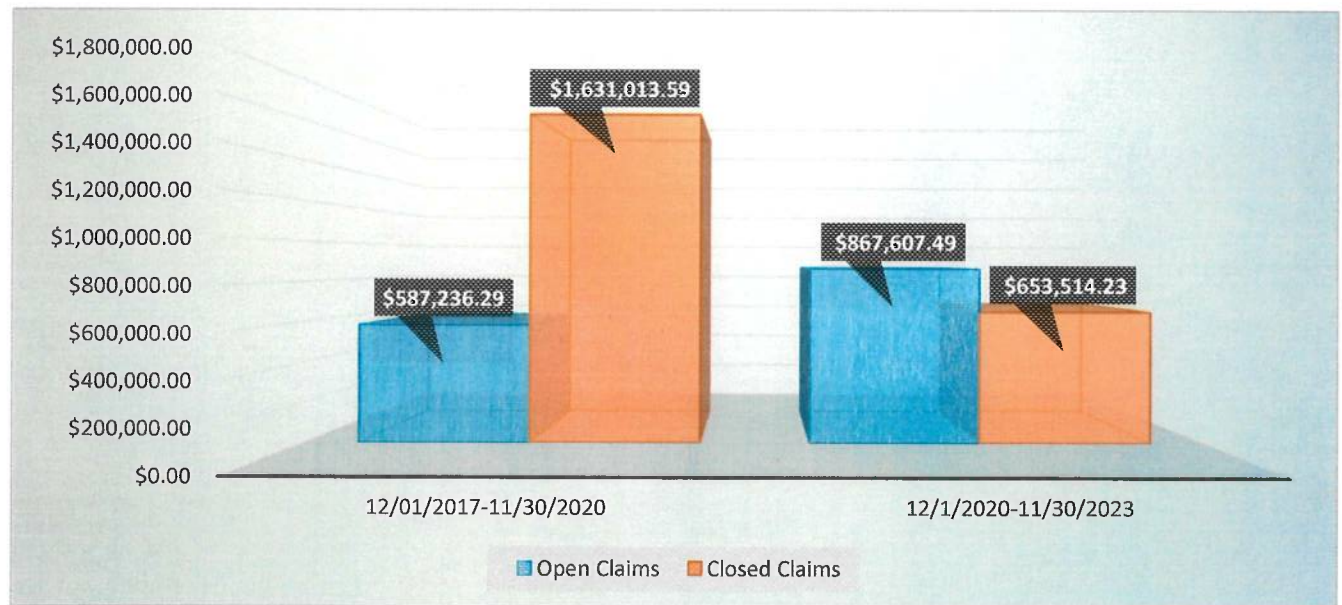
Department	Settlement Amount	Percentage %	Claims Settled
ANIMAL CONTROL	\$0.00	0%	
BUILDING MAINT	\$24,509.00	7%	1
CIRCUIT CLERK	\$65,486.70	19%	2
CORONER	\$0.00	0%	
COUNTY CLERK	\$0.00	0%	
COURT SERVICES	\$54,952.63	16%	2
DIV OF TRANSPORTATION	\$49,184.38	14%	1
HEALTH	\$26,424.31	8%	2
KCDEE	\$0.00	0%	
KANE COMM	\$0.00	0%	
RECORDER	\$0.00	0%	
SHERIFF	\$119,036.84	35%	6
STATES ATTY	\$0.00	0%	
Total	\$339,593.86	100%	14



**Kane County Claims (open and closed) and paid amounts from
12/01/2017-11/30/2020 and 12/01/2020-11/30/23 periods as of 10/31/2023**

	Open Claims	Closed Claims	Claim Count
12/01/2017- 11/30/2020	\$587,236.29	\$ 1,631,013.59	213
12/1/2020- 11/30/2023	\$ 867,607.49	\$ 653,514.23	188

There are 25 more claims reported from 12/01/2017-11/30/2020, compared to the 12/01/2020-11/30/2023 period. The amount paid from claims that occurred 12/01/2017-12/1/2020 is approximately \$697 thousand dollars more compared to 12/01/2020-11/30/2023 period.



STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-23-1520
MONTHLY TRAINING REPORT (ATTACHED)

Sexual Harassment Training Compliance 11/2/23					
Type of Training Delivered	Training Title	Source of Training	Departments invited	Total number of attendees	Deadline
Webinar	Prevention of Sexual Harassment at work - Employee	Illinois Chamber of Commerce	All	1214	12.01.2023
Webinar	Prevention of Sexual Harassment at work - Manager/Elected Official	Illinois Chamber of Commerce	All	227	12.01.2023
Active Employees: 1255					

SS.

RESOLUTION NO. TMP-23-1546

WHEREAS, by Resolution 23-341, the Kane County Board authorized entering into a contract with Cannon Cochran Management Services, Inc. ("CCMSI") to provide third party claims administration services for all lines of commercial insurance claims including property, casualty, general liability, automobile and workers compensation at a cost of \$71,620 (Seventy-One Thousand Six Hundred and Twenty Dollars) per year for a period of two years; and

WHEREAS, in the attached agreement, CCMSI submitted terms to the County, which include a provision for mutual indemnification, that require County Board approval

WHEREAS, all terms have been negotiated by the parties; and

WHEREAS, the agreement with CCMSI calls for use of funds beyond the present budget year and the County of Kane acknowledges the necessity of the appropriation of such funds.

NOW, THEREFORE, BE IT RESOLVED that the Kane County Board that the attached agreement between the County of Kane and CCMSI is hereby approved.

NOW, THEREFORE, BE IT FURTHER RESOLVED that the Kane County Board that the Kane County Board Chairman is hereby authorized and directed to execute the attached agreement with CCMS on behalf of the County of Kane.

Passed by the Kane County Board on December 12, 2023.

John A. Cunningham, MBA, J.D.
Clerk, County Board
Kane County, Illinois

Corinne M. Pierog MA, MBA
Chairman, County Board
Kane County, Illinois

Vote:



RESOLUTION / ORDINANCE EXECUTIVE SUMMARY ADDENDUM

Title

Approving And Authorizing Execution Of Agreement With Cannon Cochran Management Services For Workers Compensation And Liability Claims Third Party Administrator.

Committee Flow:

Human Services Committee, Finance and Budget Committee, Executive Committee, County Board

Contact:

Jamie Lobrillo, 630.208.3836

Budget Information:

Was this item budgeted? Yes	Appropriation Amount: \$71,620
If not budgeted, explain funding source: N/A	

Summary:

Approving and authorizing to enter into a contract with Cannon Cochran Management Services, Inc. ("CCMSI") to provide third party claims administration services for all lines of commercial insurance claims including property, casualty, general liability, automobile and workers compensation at a cost of \$71,620 (Seventy-One Thousand Six Hundred and Twenty Dollars) per year for a period of two years.

**SERVICE AGREEMENT BETWEEN
COUNTY OF KANE AND
CANNON COCHRAN MANAGEMENT SERVICES, INC.**

THIS SERVICE AGREEMENT is made and entered into this 1ST day of December, 2023, by and between the County of Kane (the “Client”), an authorized self-insured entity, and Cannon Cochran Management Services, Inc. (“CCMSI”), a Delaware corporation. It is agreed between the parties hereto as follows:

A. APPOINTMENT OF CCMSI. The Client hereby appoints CCMSI, and CCMSI hereby agrees to serve, as Third Party Administrator (“Administrator”) of the Client’s self-insurance program created and existing under the State of Illinois (“State”) Self-Insurance Regulations.

B. FUNCTIONS OF CCMSI. During the term of this Agreement, the regular functions of CCMSI as the Client’s Administrator shall include the following:

1. Claim Administration.

- (a) Claim Management and Administration. In compliance with its Best Practices, CCMSI will manage and administer all claims of the Client that occur during the period of this Agreement. All claim payments shall be made with Client funds. CCMSI will act on behalf of Client in handling, monitoring, investigating, overseeing and adjusting all such actual and alleged claims.
- (b) Claim Settlement. CCMSI will settle claims of the Client with Client funds in accordance with reasonable limits and guidelines established with the Client.
- (c) Claim Reserves. CCMSI will establish reserves for unpaid reported claims and unpaid claim expenses.
- (d) Allocated Claim Expenses. CCMSI will pay all Allocated Claim Expenses with Client Funds. Allocated Claim Expenses are charges for services provided in connection with specific claims by persons or firms which are eligible claim expenses under the Client’s program. Notwithstanding the foregoing, Allocated Claim Expenses will include all expenses incurred in connection with the investigation, adjustment, settlement or defense of Client claims, even if such expenses are incurred by CCMSI. Allocated Claim Expenses will include, but not be limited to, charges for:
 - 1) Independent medical examinations of claimants;
 - 2) Managed care expenses, which include the services provided by comp mc™, CCMSI’s proprietary managed care program. Examples of managed care expenses includes but is not limited to state fee schedule, PPO net works, utilization review, nurse case management, medical bill audits and medical bill review;

- 3) Fraud detection expenses, such as surveillance, which include the services provided by *FIRE*, CCMSI's proprietary Special Investigation Unit (SIU), and other related expenses associated with the detection, reporting and prosecution of fraudulent claims, including legal fees;
 - 4) Attorneys, experts and special process servers;
 - 5) Court costs, fees, interest and expenses;
 - 6) Depositions, court reporters and recorded statements;
 - 7) Independent adjusters and appraisers;
 - 8) Index bureau and OFAC (Office of Foreign Assets Control) charges;
 - 9) MMSEA/SCHIP compliance charges;
 - 10) Electronic Data Interchanges, EDI, charges if required by State law;
 - 11) CCMSI personnel, at their customary rate or charge, but only with respect to claims outside the State and only if such customary rate is communicated to the Client prior to incurring such cost;
 - 12) Actual reasonable expenses incurred by CCMSI employees outside the State for meals, travel, and lodging in conjunction with claim management;
 - 13) Police, weather and fire report charges that are related to claims being administered under Client's program;
 - 14) Charges associated with accident reconstruction, cause and origin investigations, etc.;
 - 15) Charges for medical records, personnel documents, and other documents necessary for adjudication of claims under Client's program;
 - 16) Charges associated with Medicare Set-Aside Allocations and other related MSP Services;
 - 17) Legal bill review expenses, which include, the services provided by CLEAR, CCMSI's proprietary legal bill review program. This shall include charges related to legal bill review / audit, which shall include reviewing and auditing invoices submitted by Client-approved law firms for compliance with the Client's Defense Counsel Billing Guidelines.
 - 18) Other expenses normally recognized as ALAE by industry standards.
- (e) Subrogation. CCMSI will monitor claims for subrogation.

(f) Provision of Reports. CCMSI agrees to provide reports to the Client as specified in the Schedule of Reports attached hereto as Exhibit A.

2. Risk Management Services. CCMSI will provide the Client with additional Risk Management Services not contemplated in the Agreement upon mutual agreement of the parties. The Schedule of additional Risk Management Services to be provided is attached hereto as Exhibit B.
3. Loss Control Services. CCMSI will provide the Client loss control services upon mutual agreement of the parties. The client shall remain fully responsible for the implementation and operation of its own safety programs and for the detection and elimination of any unsafe conditions or practices.

CCMSI assumes no responsibility for the detection, identification, communication, mitigation, or elimination of any unsafe condition or practice associated with the safety program of any client. Further, CCMSI assumes no responsibility for any injury sustained by an employee of the client. The Schedule of Loss Control Services to be provided is attached hereto as Exhibit C.

4. Legal Bill Review / Audit Services. In conjunction with its claims administration services, CCMSI will provide Client with Legal Bill Review / Audit Services (CLEAR). The Schedule of Legal Bill Review / Audit Services, including applicable fees, is attached hereto as Exhibit E.
5. Managed Care Services. CCMSI will provide the Client with managed care services (comp mc™) upon mutual agreement of the parties. The Schedule of Managed Care Services to be provided is attached hereto as Exhibit D.

C. CLIENT RESPONSIBILITIES. Client agrees to:

1. Report all claims, incidents, reports or correspondence relating to potential claims in a timely manner.
2. Reasonably cooperate in the disposition of all claims.
3. Provide adequate funds to pay all claims and expenses in a timely manner.
4. Respond to reasonable information requests in a timely manner.
5. Identify in writing all insurance carriers applicable to CCMSI's claim handling responsibilities contemplated in this Service Agreement that CCMSI will have claim or data reporting requirements. In this regard, Client agrees to provide CCMSI with a complete copy of the current excess or other insurance policies, including applicable endorsements and audits, applicable to Clients insurance program and this Service Agreement. CCMSI assumes no responsibility of any kind for not reporting an otherwise reportable claim to any carrier that Client has failed to disclose to CCMSI and/or provide CCMSI with a copy of the applicable insurance policy and reporting instructions relative to that carrier.

6. When applicable, obtain and provide to CCMSI an active Registered Reporting Entity (RRE) number through the Centers of Medicare & Medicaid Services that CCMSI is authorized to use for mandatory MMSEA Section 111 reporting. When applicable, client agrees to maintain this RRE # by fulfilling CMS's annual recertification process.
7. Pay any fees or costs charged by any carrier or prior TPA of Client for the conversion of data associated with CCMSI handling run off claims for Client, or for the general transfer of data to CCMSI's operating systems.
8. Promptly pay CCMSI's fees.

D. OPERATING EXPENSES. The Client agrees to be responsible for and pay all of its own operating expenses other than service obligations of CCMSI. Such operating expenses shall include but not be limited to charges for the following:

1. All costs associated with Client meeting its State security and licensing requirements;
2. Certified Public Accountants
3. Attorneys, other than provided for in Section B.1. (d) 3) and B.1. (d) 4) of this Agreement;
4. Outside consultants, actuarial services or studies and State audits;
5. Independent payroll audits;
6. Allocated Claims Expenses incurred pursuant to Section B. 1. (d) of this Agreement;
7. All applicable regulatory fees and taxes;
8. Educational and/or promotional material, industry-specific loss control material, customized forms and/or stationery, supplies and extraordinary postage, such as bulk mailing, express mail or messenger service.
9. National Council on Compensation Insurance, NCCI, charges;
10. Excess and other insurance premiums;
11. Costs associated with the development, record keeping and filing of fraud statistics and plans, but only if required by any State or regulatory authority having jurisdiction over Client;
12. Other operating costs as normally incurred by the Client.

E. BOOKS AND RECORDS.

1. (a) CCMSI shall maintain all claim information relating specifically to the Client which is necessary to the performance of CCMSI's obligations under this Agreement (the "Records"). The Records shall remain at all times the sole property of the Client.

(b) The Records shall not include any manuals, forms, files and reports, documents, customer lists, rights to solicit renewals, computer records and tapes, financial and strategic data, or information which documents CCMSI's processes, procedures and methods, or which CCMSI employs to administer programs other than the Client. The items specified in this Paragraph E. 1. (b) shall at all times be and remain the sole and exclusive property of CCMSI, and the Client shall not have any ownership, interest, right to duplicate or right to utilize these items except for the above documentation or information that relates solely to Client's Program or as otherwise required by law or court order.
2. During the term of this Agreement, CCMSI shall provide the Client with copies of the Records, if so requested by the Client. Any reasonable costs of reproduction of the Records shall be borne by the Client. In the event this Agreement is terminated or non-renewed, Client Records will be turned over to the Client or to a successor administrator designated by the Client.
3. CCMSI shall make the Records available for inspection by any duly authorized representative of the Client, or any governmental or regulatory authority having jurisdiction over CCMSI or the Client.

F. NON-SOLICITATION OF EMPLOYEES. During the term of the Agreement and for two (2) years thereafter, the Client and CCMSI mutually agree not to recruit, solicit or hire any employee of the other without written permission.

G. OTHER INSURANCE. If CCMSI places any specific or aggregate excess insurance, reinsurance, or other insurance product associated with this Agreement, then customary commissions and fees will be retained by CCMSI.

H. TERM AND TERMINATION.

1. Term of Agreement. The first term of this Agreement shall be for two (2) years beginning on December 1, 2023 and terminating on November 30, 2025. Unless the Agreement is terminated as set forth in paragraph H. 2., it will automatically renew for 3 successive one (1) year terms. At least ninety (90) days prior to the expiration of this three year term of this Agreement, the parties shall enter into good-faith negotiations regarding any proposed change in Agreement terms or fees. If there are no changes requested by either party, then the Agreement will automatically renew under the same terms and fee arrangement as the prior term.
2. Termination of Agreement. This Agreement may be terminated:
 - (a) By mutual agreement of the parties hereto;

- (b) Upon expiration of the current term of this Agreement if either party has given the other at least ninety (90) days written notice of its intention to terminate as set forth in paragraph H. 1.;
 - (c) Upon dissolution of the Client's self-insurance program whether voluntary or due to cessation of Client's authority to self-insure;
 - (d) Upon dissolution of the Client's self-insurance program due to Client insolvency or bankruptcy;
 - (e) Upon ninety (90) days written notice by either party if the other party is in material breach of any term, covenant or condition contained herein; provided, however, that as a condition precedent to termination under this Section H. 2. (e), the terminating party shall give written notice to the other party, who shall have sixty (60) days from the date of such notice to cure or correct the grounds for termination. If the grounds of termination are not corrected or cured during the sixty (60) day period, this Agreement may be terminated on the termination date specified in the notice, but not prior to the expiration of the ninety (90) day period described herein.
3. Services Following Termination of Agreement. Should this Agreement be terminated or non-renewed for any reason, CCMSI will cease providing services, turn over to the Client all Client files in CCMSI's possession, which shall include all open and closed files.

Upon the Client's request and subject to agreement by CCMSI, CCMSI will be paid a reasonable negotiated fee to:

- (a) Provide for continued administration of the open claim files;
 - (b) Cooperate with any successor administrator in the orderly transfer of all functions, including providing a runoff listing of open claim files if desired by the Client and any other records reasonable and necessary for a successor administrator; and
 - (c) Provide an electronic transfer of data if such is feasible, with the cost of providing such borne by the Client. The electronic transfer of data will be subject to a flat fee of \$2,500.
- I. **SERVICE FEE PAYMENTS.** The Client shall pay to CCMSI a service fee as outlined in the Fee and Payment Schedule attached hereto as Exhibit F.
- J. **ARBITRATION.** If an irreconcilable difference of opinion or claim should arise between the Client and CCMSI as the interpreters of any matter relating to this Agreement, such matter will be submitted to mediation or arbitration as the sole remedy available to both parties. Any such mediation or arbitration will take place in the City of Geneva, Illinois and will be conducted in accordance with the then-current rules of the American Arbitration Association.

K. RELATIONSHIP OF PARTIES. With respect to the services provided by CCMSI in this Agreement, CCMSI is considered an independent contractor. Nothing in this Agreement shall be construed to create a relationship of employer/employee, partners or joint ventures between the Client and CCMSI. This Agreement is non-exclusive, and CCMSI shall have the right to perform services on behalf of other individuals, firms, corporations and entities.

L. INDEMNIFICATION.

1. Indemnification by Client. The Client agrees that it will indemnify and hold harmless CCMSI and CCMSI's directors, officers, employees, agents, shareholders, subsidiaries and other affiliates from and against any and all claims, losses, liability, costs, damages and reasonable attorney's fees incurred by CCMSI as a result of breach of this Agreement by the Client, explicit instruction by the Client, or alleged misconduct, error or omissions by the Client, or by any of the Client's trustees, directors, officers, employees, agents, shareholders, subsidiaries, or other affiliates in connection with the performance of this Agreement. Agents as used herein include third party vendors selected by Client.
2. Indemnification by CCMSI. CCMSI agrees that it will indemnify and hold harmless the Client and the Client's trustees, directors, officers, employees, agents, shareholders, subsidiaries, members, or other affiliates from and against any and all claims, losses, liability, costs, damages and reasonable attorney's fees incurred by the Client as the result of breach of this Agreement by CCMSI or alleged misconduct, error or omissions by CCMSI, or by any of CCMSI's directors, officers, employees, agents, shareholders, subsidiaries or other affiliates in connection with the performance of this Agreement. Agents as used herein include third party vendors selected by Client.

M. CHANGE IN CIRCUMSTANCES. In the event the adoption of any statute, rule or regulation materially changes the nature of the relationship between the parties hereto or the legal or economic premises upon which this Agreement is based, the parties hereto shall undertake good faith negotiations to amend the terms of this Agreement to account for such changes in a reasonable manner. This includes the happening or development of a local, regional, national or global health situation, crisis, pandemic, or catastrophic event that would impact the volume and type of claims to be administered by CCMSI under this Agreement. In the event of any such occurrence, either party may contact the other in good faith and seek to amend the terms and / or service fees applicable to this Agreement.

N. SOFTWARE ACCESS. The Client may be provided with the right to use one or more CCMSI Applications in connection with the services provided by CCMSI in this Agreement. CCMSI Applications include iCE, MyReports, Loss Control ASAP, Loss Control Resources and iCEBAR. The right to use CCMSI Applications is non-exclusive, limited to the term of this Agreement per paragraph H.1., non-transferable and is solely for the internal business use of Client.

CCMSI owns and reserves all rights, title, and interest in and to the CCMSI Applications. Client has no right to receive a copy of the object code or source code to the CCMSI Applications. Client may not attempt to:

1. License, sell, lease or otherwise make the CCMSI Applications available to any other party. Client will not provide any access, passwords or other information regarding the CCMSI Applications to any third parties and/or competitors of CCMSI without the prior written consent of CCMSI;
2. Use the CCMSI Applications in any way that violates any law, regulation or mandate, or the term of this Agreement; or
3. Take any action that jeopardizes confidential or proprietary information held by CCMSI, unless disclosure is otherwise required by law or court order.

Client is responsible for any confidential or proprietary information accessed or downloaded by Client from the CCMSI Applications, including the implementation of appropriate information security controls surrounding such information.

Except as expressly provided in this Agreement, CCMSI Applications are provided "as-is". CCMSI disclaims all other warranties, express, implied, or statutory, including the implied warranties or merchantability, satisfactory quality, title, fitness for a particular purpose, non-infringement, compatibility, security, quiet enjoyment, or accuracy. Without limiting the foregoing, CCMSI does not warrant that access to or use of the CCMSI Applications will be uninterrupted or error-free. CCMSI will provide support for the CCMSI Applications in the two most recent two versions of the Internet Explorer, Chrome, Firefox and Safari browsers.

O. MISCELLANEOUS.

1. Governing Law. This Agreement shall be governed by and construed in accordance with the internal laws of the State of Illinois without regard to principles of conflicts of law.
2. Timing of Services. CCMSI may exercise its own reasonable judgment, within the parameters set forth herein and in compliance with State regulations, as to the time and manner in which it performs the services required hereunder. Additionally, CCMSI will be held to a standard of like administrators performing like services for customers such as Client.
3. Successors in Interest. This Agreement shall be binding upon, and inure to the benefit of, the successors in interest and permitted assigns of the parties hereto.
4. Severability. The invalidity or unenforceability of any particular provision of this Agreement shall not affect the other provisions hereof, and this Agreement shall be construed in all respects as if the invalid or unenforceable provision had been revised to the minimum extent necessary to make it valid and fully enforceable under applicable law.
5. Paragraph Headings. All paragraph headings in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.
6. Waiver. The failure of any party to enforce any provisions of this Agreement shall not constitute a waiver by such party of any provision. A past waiver of a provision by either party shall not constitute a course of conduct or a waiver in the future with respect to that same provision.

7. Notice Provision. All notices, requests and other communications required under this Agreement shall be in writing and delivered by hand or mailed, registered or certified, return receipt requested, postage paid, or sent via a nationally recognized overnight courier to the other party at the following address:

Client: Jamie Loblillo
County of Kane
719 S. Batavia Building A 3rd Floor
Geneva, IL 60134

CCMSI: Cannon Cochran Management Services, Inc.
2 E. Main St.
Danville, IL 61832
Attn: Chief Operating Officer

8. File Destruction Policy. CCMSI will maintain electronic claim file records or hard copy files (where applicable) on all closed files on behalf of Client for a period of fifteen (15) years after the month of closure, or for as long as necessary to protect the applicable statute of limitations, whichever is longer. It is the sole responsibility of Client to advise CCMSI if files are not to be destroyed per this policy.

9. Insurance. CCMSI will purchase and maintain insurance coverages for its performance of the services contemplated in this Agreement. Minimum policy limits are as follows:

Workers Compensation – Statutory
Professional - \$5,000,000
General Liability - \$1,000,000 / \$2,000,000
Umbrella - \$5,000,000
Cyber Coverage - \$5,000,000

10. Escheatment. CCMSI is responsible for complying with all applicable abandoned property or escheat laws, making any required payments, and filing any required reports on CCMSI escrow accounts.
11. Confidential Information. Confidential Information includes nonpublic information that is exchanged between the Client and CCMSI, including, without limitation, information relating to the business, financials, personnel, customer data and operating procedures. Confidential Information includes information whether in written, electronic, or oral form created and relating to services provided under the Agreement. All Confidential Information is proprietary. Client and CCMSI may use the other party's Confidential Information only for the purpose of this Agreement and will limit its disclosure to only those persons reasonably necessary to perform under the Agreement, unless disclosure is otherwise required by law or court order. CCMSI will share non-personal bulk claim data with the IDS National Database unless the Client directs otherwise.
12. Information Security. CCMSI is responsible for the protection of the confidentiality, availability, privacy and integrity of Client information in our custody. CCMSI has implemented an

Information Security Policy that has been developed to comply with applicable federal and state laws or regulations and industry best practices. The Information Security Policy applies to all CCMSI personnel, including temporary employees, independent contractors and vendors with access to CCMSI systems.

13. Entire Agreement/Amendment. This Agreement sets forth the full and final understanding of the parties hereto with respect to the matters described herein, and supersedes any and all prior agreements and understandings between them, whether written or oral. This Agreement may be amended only by written document executed by the Client and CCMSI.

Executed this ____ day of _____, 20__.

CANNON COCHRAN MANAGEMENT SERVICES, INC.

By: _____
Rodney J. Golden

Its: Chief Operating Officer/Executive Vice President

COUNTY OF KANE

By: _____

Its: _____

EXHIBIT A

SCHEDULE OF REPORTS

1. A detailed listing of all claims broken down by location, policy year and line of coverage. (MONTHLY)
2. A summary of all claims broken down by location, policy year and line of coverage. (MONTHLY)
3. A check register listing all checks issued during a reporting period. (MONTHLY)

EXHIBIT B

SCHEDULE OF RISK MANAGEMENT SERVICES

None to be provided.

EXHIBIT C

SCHEDULE OF LOSS CONTROL SERVICES

None to be provided.

CCMSI will provide the Client loss control services upon mutual agreement of the parties. The client shall remain fully responsible for the implementation and operation of its own safety programs and for the detection and elimination of any unsafe conditions or practices.

CCMSI assumes no responsibility for the detection, identification, communication, mitigation, or elimination of any unsafe condition or practice associated with the safety program of any client. Further, CCMSI assumes no responsibility for any injury sustained by an employee of the client.

EXHIBIT D

SCHEDULE OF comp mc TM SERVICES AND FEES

Provider Bill Re-pricing

<i>Service</i>	<i>Fee</i>
Usual and Customary re-pricing	\$10.00 per bill
Fee Schedule state re-pricing	\$10.00 per bill
Medical Bill State Reporting for applicable medical bills to reportable state	\$1.50 per reportable bill

PPO Re-pricing / Out of Network Negotiations

PPO re-pricing / Specialty and Hospital bill negotiation is billed at 33% of savings
--

Pharmacy Network Services

Pharmacy Network services are priced at 33% of savings.

EXHIBIT E

SCHEDULE OF CLEAR SERVICES AND FEES

Service	Description	Service Fee
Legal Bill Review / Audit Services	Review and audit all legal invoices submitted by Client-approved law firms for adjudication in compliance with Client's Defense Counsel Billing Guidelines and Generally Accepted Legal Billing Principles.	PAID TO BOTTOMLINE TECHNOLOGIES, INC. 1.95% of the gross monetary total of each invoice submitted and audited (inclusive of law firm fees, costs and disbursements).
Management Fee for administration of Legal Bill Review Program, administration and integration of data reporting and data transfer, development and delivery of Performance Reports, and maintenance of technology interface	Integration and interface of legal bill review / audit software with CCMSI's claim system necessary to review and adjudicate legal invoices electronically. Periodic standard reports will be developed and produced summarizing Program's overall savings results. Metrics will be applied to analyze the overall performance of law firms. A Bill Analysis Report (BAR) will be generated for each legal invoice reviewed. The BAR will be included with each check to the appropriate law firm and include details and supporting documentation for any deductions applied to the original billing.	PAID TO CCMSI 0.25% of the gross monetary total of each invoice submitted and audited (inclusive of law firm fees, costs and disbursements).

Note: Fees relative to legal bill review services will appear on the transaction register payable to "CLEAR", CCMSI's proprietary legal bill review program.

Guarantee: If Legal Bill Review savings achieved for Client is less than the 2.20% total service fee incurred on an annual basis, the Client will be refunded the difference between the service fee incurred and the amount actually saved on invoices. Therefore, service fees will never exceed the savings achieved for Client on an annual basis. Bottomline Technologies, Inc. and CCMSI service fees are paid as ALAE to the applicable claim file as described in section B. 1.(d)17) of this Agreement.

EXHIBIT F
FEE AND PAYMENT SCHEDULE

Service Agreement Term: 12/01/2023-11/30/2025																																	
Services:	Fees:																																
Claims Administration (minimum)	\$55,000																																
<p>CCMSI will manage all workers' compensation, Liability claims for the Life of Agreement for minimum annual fee as follows:</p> <p>Claims will be analyzed by the number and type of claim on an on-going basis and priced on a per claim basis as outlined below.</p> <table border="1"> <thead> <tr> <th>Claim Type</th><th>Per Claim Fees</th></tr> </thead> <tbody> <tr><td>Indemnity</td><td>\$1,050.00</td></tr> <tr><td>Medical Only</td><td>\$195.00</td></tr> <tr><td>General Liability Bodily Injury</td><td>\$925.00</td></tr> <tr><td>General Liability Property Damage</td><td>\$515.00</td></tr> <tr><td>Auto Liability Bodily Injury</td><td>\$925.00</td></tr> <tr><td>Auto Liability Property Damage</td><td>\$515.00</td></tr> <tr><td>Auto Property Damage</td><td>\$515.00</td></tr> <tr><td>Errors and Omissions</td><td>\$1,135.00</td></tr> <tr><td>Employment Practices</td><td>\$1,135.00</td></tr> <tr><td>FPPC - First Party Property</td><td>\$515.00</td></tr> <tr><td>Boiler and Machinery</td><td>\$515.00</td></tr> <tr><td>Law Enforcement</td><td>\$1,135.00</td></tr> <tr><td>Public Office Liability</td><td>\$1,135.00</td></tr> <tr><td>Auto Underinsured/AUIM</td><td>\$925.00</td></tr> <tr><td>Incident Only</td><td>\$40.00</td></tr> </tbody> </table> <p>There will be a 3% fee increase to claim fees only per year.</p> <p><u>Workers' Compensation Claim Definitions</u></p> <ul style="list-style-type: none"> ▪ Indemnity Claims – Claims involving lost-time, questionable compensability, legal involvement/client attorney representation, subrogation, second injury fund, probable permanent impairment, jurisdictional issues, coverage issues and complex medical issues that are assigned or transferred to indemnity adjusters for claims handling. ▪ Medical Only Claims – Claims which have no issues of lost time, no evidence of other indemnity benefit exposure, no obvious question of compensability, no evidence of potential subrogation or second injury recovery, no evidence of problematic medical issues and no requirement or need for any formal statements (3-point or 2-point verbal contact is not required). 		Claim Type	Per Claim Fees	Indemnity	\$1,050.00	Medical Only	\$195.00	General Liability Bodily Injury	\$925.00	General Liability Property Damage	\$515.00	Auto Liability Bodily Injury	\$925.00	Auto Liability Property Damage	\$515.00	Auto Property Damage	\$515.00	Errors and Omissions	\$1,135.00	Employment Practices	\$1,135.00	FPPC - First Party Property	\$515.00	Boiler and Machinery	\$515.00	Law Enforcement	\$1,135.00	Public Office Liability	\$1,135.00	Auto Underinsured/AUIM	\$925.00	Incident Only	\$40.00
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Public Office Liability	\$1,135.00																																
Auto Underinsured/AUIM	\$925.00																																
Incident Only	\$40.00																																

<ul style="list-style-type: none"> ▪ Report Only/Incident Only Claims – Reported claims which require only input into RMIS system and requires no claims management activity. 	
Take- Over Claims	As Outlined
<p>CCMSI will continue to manage all open workers compensation take over claims with a date of loss prior to 12/1/11 for the life of this agreement for a per claim fee as follows:</p> <p>\$45.00/per claim per month, for the handling for 12 months or any portion thereof. There are currently 3 open claims and the annual fees = \$1,620.00</p>	
Annual Administration Fee	\$10,000
<ul style="list-style-type: none"> • Designated client service team • Development of specific client service requirements • Monthly loss reporting • Quarterly claim reviews at client's request • Issuance of 1099's • Assistance in filing of all required state forms including state mandated assessments <ul style="list-style-type: none"> ○ If Client has directed CCMSI to utilize a third party vendor selected by Client for the provision of services then such assistance will be the responsibility of the third party vendor • Workers' compensation claim packets/state forms • Preparation for, compliance with and response to regulatory audits • Account Management and Administration 	
OSHA Reporting Module	\$2,500
<ul style="list-style-type: none"> • On-Line access to OSHA recordkeeping program • Data will be maintained by (County of Kane) • Unlimited OSHA logs and summaries • Ability to electronically upload OSHA forms 	
Annual Internet Claim Access Fees	\$2,500
<p><u>Internet claims system access which includes:</u></p> <ul style="list-style-type: none"> • Viewing access to all claims data • Risk Management statistical analysis • Comprehensive and complete access to claims management process • On-line reports • On-line reporting capability via the internet • Ability to generate First Notice of Loss 	
Managed Care Service Fees	See Detail
Provider Bill Re-pricing	

Service	Fee	
Usual and Customary re-pricing	\$10.00 per bill	
Fee Schedule state re-pricing	\$10.00 per bill	
Medical Bill State Reporting for applicable medical bills to reportable state	\$1.50 per reportable bill	
PPO Re-pricing / Out of Network Negotiations		
PPO re-pricing / Specialty and Hospital bill negotiation is billed at 33% of savings		
Pharmacy Network Services		
Pharmacy Network services are priced at 33% of savings.		
State Reporting EDI Fees		Current Market Rate
Index Bureau		Current ISO Market Rate
Note: The index fee is a direct pass through charge for ISO. If ISO increases their current market rate per index, CCMSI will adjust the fee accordingly.		
Subrogation Fee		20% of Recovery
20% of recovery with a cap of \$50,000 per claim.		
Mandatory MMSEA Compliance Section 111 Reporting Fee		Current Market Rate
<p>CCMSI, in conjunction with its reporting agent / MSP Vendor, will comply with applicable MMSEA and Section 111 reporting requirements on behalf of County of Kane of Illinois.</p> <ul style="list-style-type: none"> All qualifying injury claims will be queried to CMS to determine Medicare eligibility. CCMSI will collect additional mandatory data on claims where Medicare eligibility has been verified. CCMSI, along with its reporting agent, will report all claims meeting the reporting guidelines as set forth by CMS. CCMSI will provide ongoing monthly Medicare eligibility query checks and continued quarterly mandatory insured-reporting compliant with applicable CMS guidelines. <p><u>Note:</u> In order for CCMSI and its reporting agent to comply with mandatory Section 111 reporting, the client must provide CCMSI an active RRE # wherein CCMSI is explicitly authorized to report data on the client's behalf.</p>		
Carrier Fees		As Outlined
If applicable, Client will be responsible for payment of any carrier fees associated with the transition of claim handling responsibilities to CCMSI.		
Special System Reports		\$125 an hour
CCMSI will provide special reports, (reports not currently programmed or written) for a fee of		

\$125 per hour for system programming time. CCMSI will provide an estimate of charges before any work will be done.	
Taxes	See Detail
CCMSI fees will be increased by any applicable Sales, Gross Receipts, or similar (excluding income) taxes imposed by Federal, State or Local bodies.	
GRAND TOTAL	\$70,000

Fee & Payment Schedule	
<p>The quarterly installments will be due on The quarterly installments of \$17,500 will be due on the first day of December 2023, & 2024, March 2024, & 2025, June 2024, & 2025, and September 2024, & 2025 of each policy period.</p> <p>Take over claims (3 are open at \$405.00 per quarter) will be billed Quarterly on the first day of December 2023, & 2024, March 2024, & 2025, June 2024, & 2025, and September 2024, & 2025 of each policy period.</p> <p>Subsequent year service fees shall be subject to an annual 3% increase as previously indicated in Exhibit F.</p>	

Executed this ____ day of _____, 20__.

CANNON COCHRAN MANAGEMENT SERVICES, INC.

By: _____
Rodney J. Golden

Its: Chief Operating Officer/Executive Vice President

COUNTY OF KANE

By: _____

Its: _____

SS.

RESOLUTION NO. TMP-23-1548

WHEREAS, Kane County Financial Policies state that “The amount per day for breakfast, lunch and dinner is established by the Human Services Committee and approved by the County Board.” Communication to employees is by the County Auditor after County Board approval; and

WHEREAS, the daily meal per diem allocated for 2023 is Sixty-Four Dollars (\$64). Breakfast is Fourteen Dollars (\$14), lunch is Sixteen Dollars (\$16) and dinner is Thirty-Four Dollars (\$34); and

WHEREAS, the Auditor recommends the Per Diem Rate to remain unchanged from the prior year at Sixty-Four Dollars (\$64). Breakfast to remain Fourteen Dollars (\$14), lunch to remain Sixteen Dollars (\$16) and dinner to remain Thirty-Four Dollars (\$34).

WHEREAS, the Auditor recommends adding the First and Last Day of Travel calculated at 75 percent of the Total per Day amount at Forty-Eight Dollars (\$48).

NOW, THEREFORE, BE IT RESOLVED that the Kane County Board that effective January 1, 2024, the daily meal per diem rate will be Sixty-Four Dollars (\$64) per day allocated to breakfast at Fourteen Dollars (\$14), lunch at Sixteen Dollars (\$16), dinner at the rate of Thirty-Four Dollars (\$34), and the First and Last Day of Travel calculated at 75 percent of the Total per Day amount at Forty-Eight Dollars (\$48).

Passed by the Kane County Board on December 12, 2023.

John A. Cunningham, MBA, J.D.
Clerk, County Board
Kane County, Illinois

Corinne M. Pierog MA, MBA
Chairman, County Board
Kane County, Illinois

Vote:



RESOLUTION / ORDINANCE EXECUTIVE SUMMARY ADDENDUM

Title

Approving The Kane County Per Diem Meal Rates For Calendar Year 2024

Committee Flow:

Human Services Committee, Finance and Budget Committee, Executive Committee, County Board

Contact:

Jamie Loblillo, 630.208.3836

Budget Information:

Was this item budgeted? N/A	Appropriation Amount: \$N/A
If not budgeted, explain funding source: N/A	

Summary:

Approving the Auditor's recommendation for the Per Diem Meal Rate to remain unchanged for 2024.

COUNTY OF KANE

Office of the Kane County Auditor

Penny Wegman
Kane County Auditor



719 South Batavia Ave.
Building A
Geneva, Illinois 60134-3077
Phone: (630) 232-5915
WegmanPenny@KaneCountyIL.gov

TO: Jamie Loblillo, HR Executive Director
FROM: Penny Wegman, Auditor
SUBJECT: 2024 Meal Per Diem
DATE: October 23, 2023

Based on the Kane County Financial Policy, the meal per diem rates are to be established in the Human Service Committee prior to being voted on by the County Board.

Annually, in preparation of this discussion, the County Auditor reviews the meal per diem process and rates and shares its findings with the Human Resources Management Department.

Historically, the County used the primary destination rates of Oak Brook Terrace (DuPage County) established by the U.S. General Services Administration (GSA) as a guide for setting the County travel meal per diem rates.

The fiscal year 2024 per diem rates have been released by the GSA and are as follows:

Total per Day ¹	Breakfast ²	Lunch ²	Dinner ² (includes incidental expenses)	First & Last Day of Travel ³
\$64.00	\$14.00	\$16.00	\$34.00	\$48.00

Source - GSA - Meals and Incidental Expenses (M&IE)

Primary Destination - Oak Brook Terrace / DuPage

¹ This column lists the full daily amount employees receive for a single calendar day of travel when that day is neither the first nor last day of travel.

² The separate amounts for breakfast, lunch and dinner listed in the chart are provided should you need to deduct any of those meals from your trip voucher. For example, if your trip includes meals that are already paid for by the government (such as through a registration fee for a conference), you will need to deduct those meals from your voucher.

³ This column lists the amount employees receive for the first and last calendar day of travel. The first and last calendar day of travel is calculated at 75 percent.

COUNTY OF KANE
Office of the Kane County Auditor

These rates remain unchanged from the prior year. As such, the Auditor's Office recommends for fiscal year 2024 to keep the meal per diem rates in line with the GSA standards by keeping the rates consistent with the prior year.

Please advise if changes are made to the recommendation, the Auditor's Office is required to communicate to County employees once approved by County Board.

Sincerely,

A handwritten signature in black ink that reads "Penny Wegman". The signature is written in a cursive, flowing style.

Penny Wegman, Kane County Auditor

FY 2024 Per Diem Rates for Illinois

Meals & Incidentals (M&IE) rates and breakdown

Primary Destination	County	M&IE Total	Continental Breakfast/Breakfast	Lunch	Dinner	Incidental Expenses	First & Last Day of Travel
Bolingbrook / Romeoville / Lemont	Will	\$64	\$14	\$16	\$29	\$5	\$48.00
Chicago	Cook / Lake	\$79	\$18	\$20	\$36	\$5	\$59.25
East St. Louis / O'Fallon / Fairview Heights	St. Clair	\$64	\$14	\$16	\$29	\$5	\$48.00
Oak Brook Terrace	DuPage	\$64	\$14	\$16	\$29	\$5	\$48.00
Standard Rate	Applies for all locations without specified rates	\$59	\$13	\$15	\$26	\$5	\$44.25



RESOLUTION/ORDINANCE EXECUTIVE SUMMARY

Resolution: No.

Authorizing Salary Increase for the Executive Director of the Human Resources Management Department

Committee Flow: Human Services Committee, Finance Committee, Executive Committee, County Board

Contact: Chairman Corinne Pierog

Budget Information:

Was this item budgeted? Yes	Appropriation Amount: \$137,000
If not budgeted, explain funding source: N/A	

Summary:

This resolution approves a salary increase for the Executive Director of the Human Resource Management Department effective with the first pay period of Fiscal Year 2024.

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

ORDINANCE NO. TMP-23-1570

ADOPTING PAID LEAVE FOR COUNTY EMPLOYEES (NOT ATTACHED)

STATE OF ILLINOIS)
 SS.
COUNTY OF KANE)

ORDINANCE NO. TMP-23-1576

**CREATING ILLINOIS RESIDENCY REQUIREMENTS FOR COUNTY
EMPLOYEES**

WHEREAS, Kane County is an employer within Illinois and ensures employment practices comply with Illinois law; and

WHEREAS, state and local laws require an employer to be established as a legal employer within any state in which an employee lives and performs work; and

WHEREAS, establishing Kane County as an employer in another state incurs unnecessary expense to Kane County taxpayers; and

WHEREAS, employees who reside and perform work outside of the State of Illinois significantly increases the cost of providing employment services including payroll and benefits for Kane County employees; and

WHEREAS, it is in the best interests of Kane County and the public it serves that employees of Kane County permanently reside within the State of Illinois for the duration of their employment; and

WHEREAS, it is in the best interests of Kane County and the public it serves for its employees to understand, contribute to, and have a vested interest in the local community; and

WHEREAS, Kane County desires to establish a residency requirement for all employees to live within the State of Illinois for the duration of their employment.

NOW, THEREFORE, BE IT RESOLVED by the Kane County Board that the following residency requirement is hereby added to the Kane County Code:

Short Title: This section shall be known as the Kane County Employee Residency Requirement

Residency requirement for all Kane County employees: The County shall only employ persons who maintain residence within the State of Illinois throughout their employment. Wages, salary, and employee benefits shall only be paid to persons residing in Illinois.

Exemption: Grandfather clause: Employees for whom out of state employment has been granted and established prior to the effective date of this ordinance are exempt from the provisions of this section.

The Executive Director of Finance and the Executive Director of Human Resources are authorized to adopt, promulgate, and enforce rules and regulations to administer and enforce this section.

Passed by the Kane County Board on December 12, 2023.

John A. Cunningham, MBA, J.D.
Clerk, County Board
Kane County, Illinois

Corinne M. Pierog MA, MBA
Chairman, County Board
Kane County, Illinois

Vote:



RESOLUTION / ORDINANCE EXECUTIVE SUMMARY ADDENDUM

Title

Creating Illinois Residency Requirement For County Employees

Committee Flow:

Human Services Committee, Executive Committee, County Board

Contact:

Jamie Loblillo, 630.208.3836

Budget Information:

Was this item budgeted? N/A	Appropriation Amount: \$N/A
If not budgeted, explain funding source: N/A	

Summary:

This ordinance establishes residency requirements for Kane County employees in the duration of their employment. Employees who reside and perform work outside of the State of Illinois significantly increases the cost of providing employment services including payroll and benefits for Kane County employees.