



Southwest Health and Human Services
Board Agenda
Wednesday December 16, 2020
Commissioners Room
Government Center, 2nd Floor
Marshall
9:00 a.m.

HUMAN SERVICES

- A. Call to Order

- B. Pledge of Allegiance

- C. Consent Agenda
 - 1. Amend/Approval of Agenda
 - 2. Identification of Conflict of Interest
 - 3. Approval of 11/18/2020 Board Minutes

- D. Introduce New Staff:

- E. Employee Recognition:
 - Amber Kinner, 5 years, Circle Specialist, Marshall
 - Corey Remiger, 15 years, Financial Assistance Supervisor, Redwood Falls

HUMAN SERVICES (cont.)

F. Financial

G. Caseload

	<u>11/20</u>	<u>11/19</u>	<u>10/20</u>	<u>9/20</u>
Social Services	3,655	3,727	3,631	3,601
Licensing	422	444	425	427
Out-of-Home Placements	154	179	161	160
Income Maintenance	12,834	11,825	12,688	12,704
Child Support Cases	3,120	3,195	3,114	3,147
Child Support Collections	\$693,520	\$679,139	\$728,324	\$744,822
Non IV-D Collections	\$137,173	\$89,269	\$109,791	\$145,863

H. Discussion/Information

1. Sanford Luverne CD Services

I. Decision Items

1. Social Services Policy 02 - Initial Licensing Family Child Care Requirement
2. Social Service Policy 03 - Licensing Fire Safety Inspections and Fees
3. Social Services Policy 06 Fees - Home Child Care Licensing
4. Social Services Policy 07 Relicensing Requirements for Foster and Day Care
5. Social Services Policy 08 Authority to Issue Variances
6. Social Services Policy 26 – Fees for 24-Hour Out-Of-Home Care

COMMUNITY HEALTH

J. Call to Order

K. Consent Agenda

1. Amend/Approval of Agenda
2. Identification of Conflict of Interest
3. Approval of 11/18/2020 Board Minutes

L. Financial

COMMUNITY HEALTH (cont.)

M. Caseload	<u>11/20</u>	<u>10/20</u>	<u>9/20</u>
WIC	N/A	2010	1987
Family Home Visiting	10	12	9
PCA Assessments	6	7	4
Managed Care	158	248	217
Dental Varnishing	0	0	0
Refugee Health	0	0	2
Latent TB Medication Distribution	1	1	3
Water Tests	124	165	130
FPL Inspections	11	37	49
Immunizations	16	35	15
Car Seats	8	10	9

- N. Discussion/Information
1. COVID Update
 2. License Fees- Jason Kloss
 3. COVID partner evaluation- Jessica Welu, SRDC

- O. Decision Items
- 1.

GOVERNING BOARD

- P. Call to Order

- Q. Consent Agenda
1. Amend/Approval of Agenda
 2. Identification of Conflict of Interest
 3. Approval of 11/18/2020 Board Minutes

- R. Financial

GOVERNING BOARD (cont.)

S. Human Resources Statistics

	<u>11/20</u>	<u>11/19</u>	<u>10/20</u>	<u>9/20</u>
Number of Employees	230	235	232	234
Separations	3		1	3

T. Discussion/Information

1.

U. Decision Items

1. Jennifer Palmer, County Agency Social Worker CPS, probationary appointment (12 months), \$24.12 hourly, effective 12/7//2020.
2. Jessica Honetschlager, County Agency Social Worker, probationary appointment (12 months), \$24.12 hourly, effective 12/21/2020.
3. Request for two (2) Social Services Supervisors
4. Request for Public Health Nurse
5. 2021 Accounting Policies and Procedures Handbook
6. 2021 Resolution of Signature Authority
7. 2021 Resolution to Designate Depositories
8. 2021 Board Member Per Diem and Mileage Reimbursement
9. IT request for renewing vmWare Software (note no viable competitor quotes)
10. IT request for renewing MnCCC Membership (note no viable competitor quotes)
11. IT request for budgeted switch upgrades
12. Donations:
 - a. Marilyn Peter donated hand-made quilts for children in need within Lincoln County
 - b. Ladies of the Rolling Plains Menonite Church donated 6 baby layettes for families in need
 - c. Sillerud Luthern Church of Balaton donated 15 quilts
 - d. Monetary donation from Our Savior's Women of the ELCA in Dovray, MN to purchase items for families in need within Murray County
 - e. Ed and Shannon Wolske of Garvin donated gifts for up to 6 foster children
 - f. Monetary donation from PrimeWest to "adopt a family" in Pipestone County
13. Contracts

V. Closed Session

1. Directors Annual Review

W. Adjournment

Next Meeting Dates:

- **Wednesday, January 20, 2021 – Marshall**
- **Wednesday, February 17, 2021 – Marshall**
- **Wednesday, March 17, 2021 – Marshall**

SOUTHWEST HEALTH & HUMAN SERVICES

Ivanhoe, Marshall, Slayton, Pipestone, Redwood and Luverne Offices

SUMMARY OF FINANCIAL ACCOUNTS REPORT

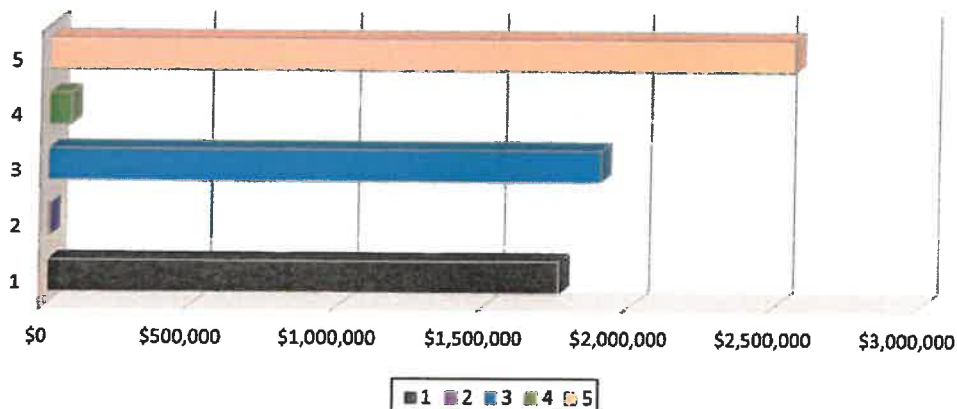
For the Month Ending:

November 30, 2020

* Income Maintenance * Social Services * Information Technology * Health *

Description	Month	Running Balance	
BEGINNING BALANCE		\$1,766,383	
RECEIPTS			
Monthly Receipts	2,536,078		
County Contribution	459,018		
Interest on Savings	821		
TOTAL MONTHLY RECEIPTS		2,995,917	
DISBURSEMENTS			
Monthly Disbursements	3,009,949		
TOTAL MONTHLY DISBURSEMENTS		3,009,949	
ENDING BALANCE		\$1,752,351	
REVENUE			
<i>Checking/Money Market</i>	<i>\$1,752,351</i>		
<i>SS Benefits Checking</i>	<i>\$7,422</i>		
<i>Bremer Savings</i>	<i>\$1,892,475</i>		
<i>Great Western Bank Savings</i>	<i>\$75,511</i>		
<i>Investments - MAGIC Fund</i>	<i>\$2,560,352</i>		
ENDING BALANCE		\$6,288,111	November 2019 Ending Balance \$5,788,831
DESIGNATED/RESTRICTED FUNDS			
Agency Health Insurance		\$1,206,582	November 2019 Ending Balance \$1,195,846
LCTS Lyon Murray Collaborative		\$134,347	
LCTS Rock Pipestone Collaborative		\$39,004	
LCTS Redwood Collaborative		\$37,863	
Local Advisory Council		\$738	November 2019 Ending Balance
AVAILABLE CASH BALANCE		\$4,869,578	\$4,332,755

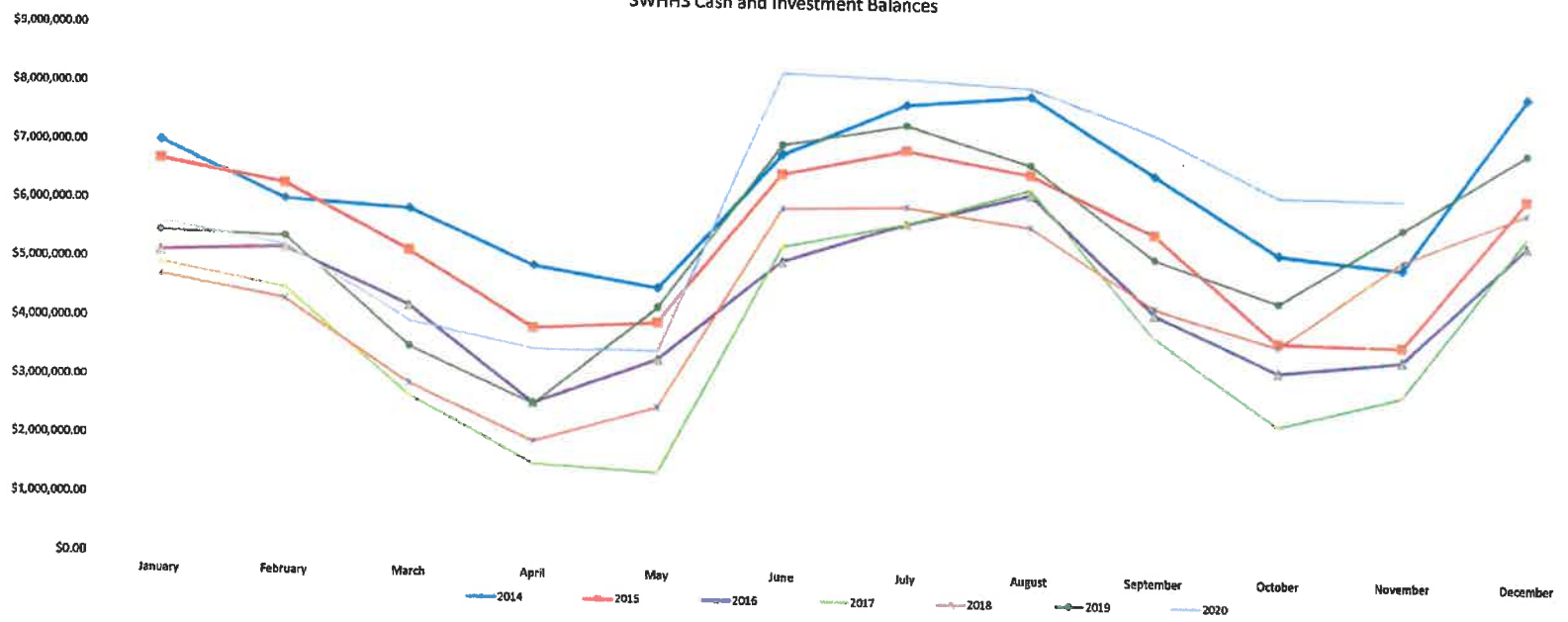
REVENUE DESIGNATION



SWHHS
Total Cash and Investment Balance by Month - All Funds

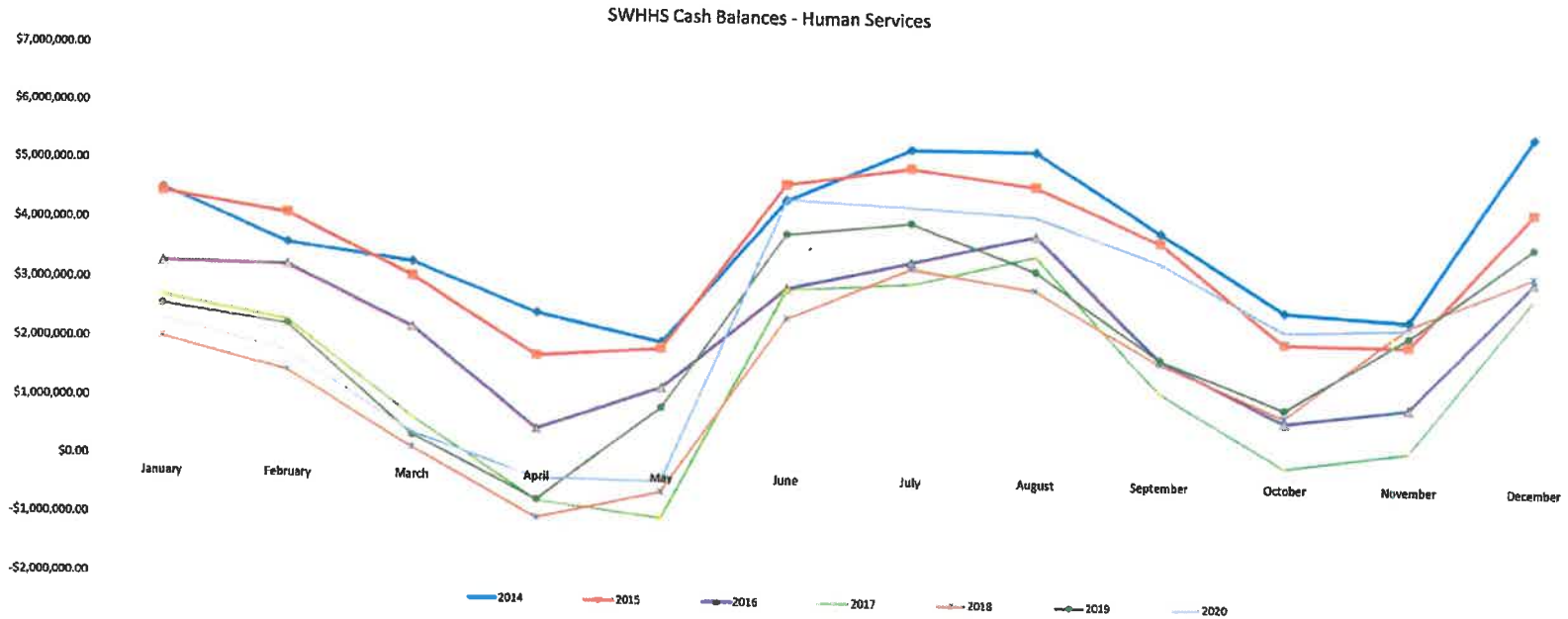
	January	February	March	April	May	June	July	August	September	October	November	December	Average for Year	Average for Jan-Mar
2014	\$6,981,225.27	\$6,024,758.16	\$5,889,424.32	\$4,951,093.48	\$4,596,515.25	\$6,893,382.81	\$7,769,372.24	\$7,943,228.69	\$6,629,326.28	\$5,325,638.85	\$5,113,269.32	\$8,050,538.23	\$6,347,314.41	\$6,298,469.25
2015	\$6,677,478.44	\$6,283,514.63	\$5,177,699.80	\$3,907,688.99	\$4,019,146.98	\$6,560,422.95	\$6,992,523.27	\$6,614,413.77	\$5,631,267.68	\$3,840,912.52	\$3,805,455.22	\$6,311,344.26	\$5,485,155.71	\$6,046,230.96
2016	\$5,132,902.00	\$5,204,953.26	\$4,246,693.55	\$2,626,629.20	\$3,394,917.21	\$5,088,797.96	\$5,750,965.99	\$6,275,434.87	\$4,290,910.19	\$3,346,309.75	\$3,560,416.88	\$5,533,701.83	\$4,537,719.39	\$4,861,516.27
2017	\$4,926,902.34	\$4,524,066.02	\$2,727,751.26	\$1,578,173.97	\$1,451,585.81	\$5,337,553.73	\$5,754,867.08	\$6,366,564.57	\$3,893,362.07	\$2,417,547.50	\$2,962,222.15	\$5,684,746.63	\$3,968,778.58	\$4,059,573.21
2018	\$4,721,044.88	\$4,333,938.53	\$2,935,770.10	\$1,965,449.62	\$2,570,090.71	\$5,977,407.40	\$6,033,326.24	\$5,731,633.62	\$4,391,517.44	\$3,775,199.56	\$5,252,398.36	\$6,085,908.40	\$4,481,140.24	\$3,996,917.84
2019	\$5,468,300.08	\$5,390,753.05	\$3,560,027.40	\$2,614,293.54	\$4,269,080.30	\$7,062,814.89	\$7,420,076.79	\$6,778,561.83	\$5,219,902.01	\$4,511,324.16	\$5,788,830.92	\$7,097,094.23	\$5,431,754.93	\$4,806,360.18
2020	\$5,612,100.09	\$5,244,838.41	\$3,999,085.28	\$3,557,399.16	\$3,544,281.51	\$8,279,950.83	\$8,206,914.72	\$8,087,152.70	\$7,320,202.93	\$6,302,908.56	\$6,288,111.05		\$6,040,267.57	\$4,952,007.26

SWHHS Cash and Investment Balances



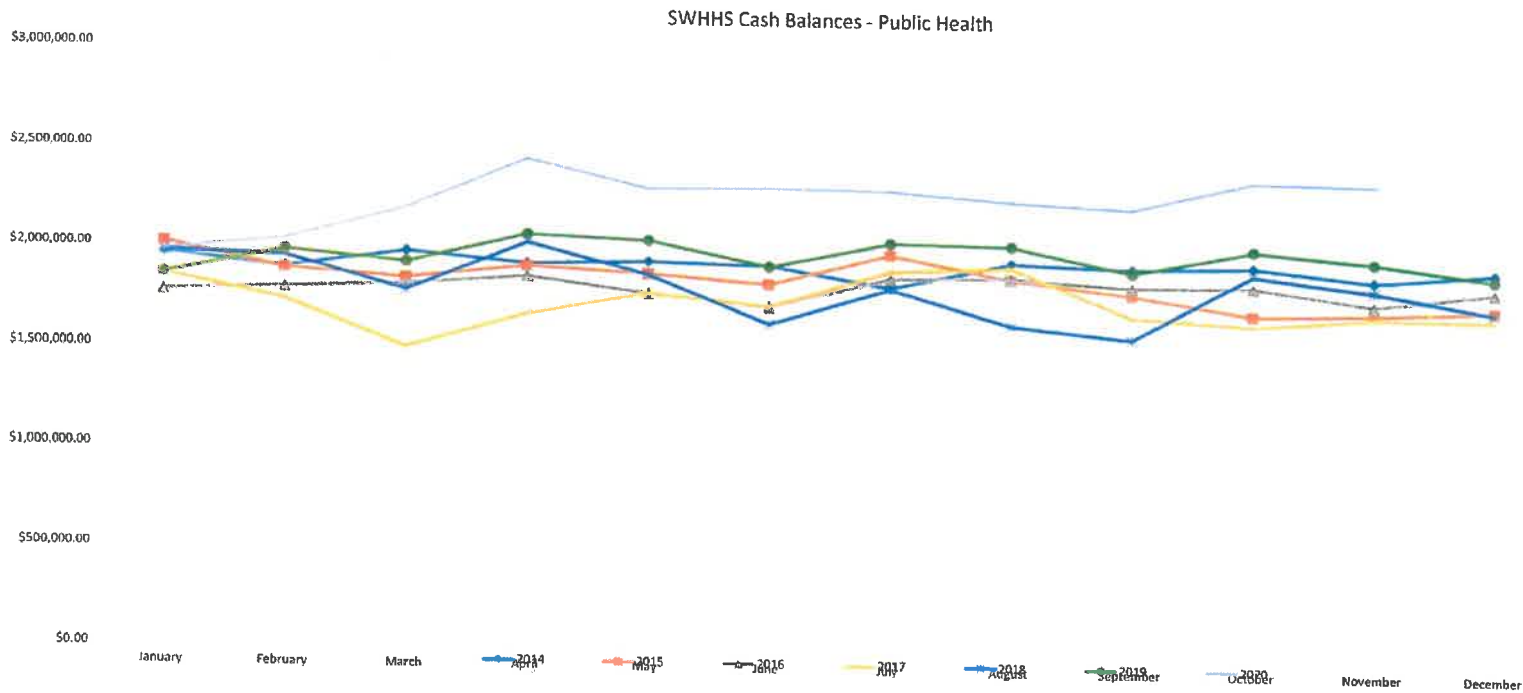
SWHHS
Total Cash and Investment Balance by Month - Human Services

	January	February	March	April	May	June	July	August	September	October	November	December	Average for Year	Average for Jan-Mar
2014	\$4,524,112.48	\$3,629,625.88	\$3,337,290.94	\$2,518,145.92	\$2,049,972.92	\$4,463,844.09	\$5,363,273.11	\$5,365,874.18	\$4,025,227.41	\$2,740,775.93	\$2,617,746.10	\$5,760,212.52	\$3,866,341.79	\$3,830,343.10
2015	\$4,463,244.56	\$4,128,666.35	\$3,114,955.80	\$1,805,842.76	\$1,948,746.17	\$4,743,405.88	\$5,052,792.79	\$4,776,068.68	\$3,868,016.53	\$2,206,082.85	\$2,192,119.16	\$4,467,384.13	\$3,563,943.81	\$3,902,288.90
2016	\$3,281,407.50	\$3,262,674.15	\$2,255,798.09	\$544,625.71	\$1,271,340.11	\$2,991,321.29	\$3,454,355.54	\$3,941,449.89	\$1,888,675.07	\$854,465.14	\$1,125,561.79	\$3,301,841.92	\$2,347,793.02	\$2,933,293.25
2017	\$2,721,514.18	\$2,337,060.47	\$710,988.71	-\$678,564.48	-\$945,146.15	\$2,972,035.68	\$3,096,420.77	\$3,593,641.96	\$1,322,585.71	\$84,999.25	\$377,552.65	\$3,035,263.95	\$1,552,362.72	\$1,923,187.79
2018	\$2,027,812.89	\$1,484,259.33	\$191,386.90	-\$965,731.97	-\$501,975.29	\$2,490,788.49	\$3,357,738.65	\$3,035,839.30	\$1,833,134.33	\$948,482.40	\$2,542,047.76	\$3,397,063.22	\$1,653,402.17	\$1,234,479.71
2019	\$2,581,063.09	\$2,265,158.91	\$405,973.82	-\$661,408.85	\$934,705.49	\$3,904,218.27	\$4,115,284.54	\$3,342,408.83	\$1,895,296.62	\$1,080,003.92	\$2,347,069.20	\$3,881,423.66	\$2,174,266.46	\$1,750,731.94
2020	\$2,332,934.55	\$1,794,776.37	\$446,580.09	-\$301,075.40	-\$322,039.73	\$4,477,838.46	\$4,384,474.68	\$4,260,536.62	\$3,518,651.39	\$2,410,104.32	\$2,492,480.39		\$2,317,751.07	\$1,524,763.67



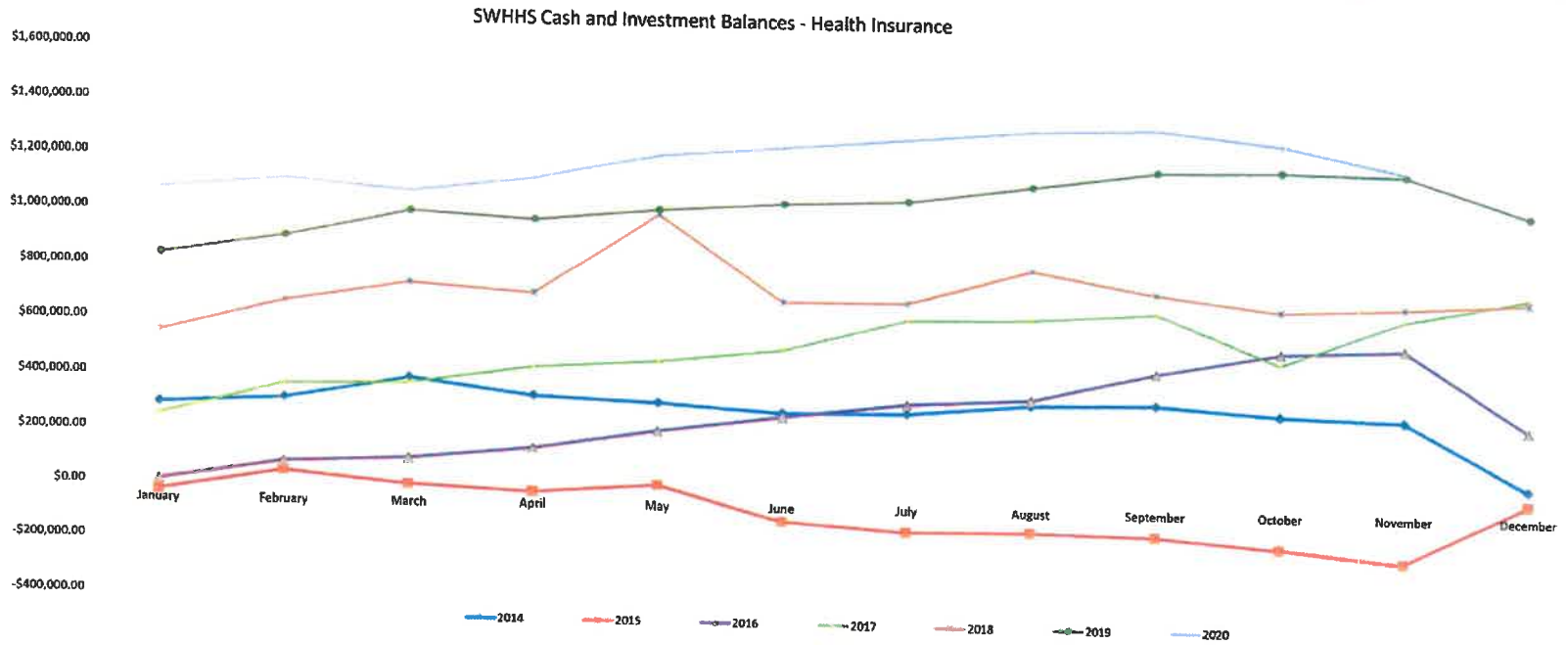
SWHHS
Total Cash and Investment Balance by Month - Public Health Services

	January	February	March	April	May	June	July	August	September	October	November	December	Average for Year
2014	\$1,952,348.46	\$1,889,115.47	\$1,972,829.09	\$1,919,040.73	\$1,935,610.76	\$1,923,130.89	\$1,822,889.93	\$1,953,891.09	\$1,934,989.18	\$1,954,396.64	\$1,894,110.16	\$1,942,821.40	\$1,924,597.82
2015	\$2,005,574.71	\$1,882,681.89	\$1,841,149.62	\$1,906,754.95	\$1,876,427.45	\$1,832,808.45	\$1,987,157.33	\$1,874,490.47	\$1,806,827.22	\$1,714,863.10	\$1,730,380.53	\$1,755,462.75	\$1,851,214.87
2016	\$1,767,113.43	\$1,786,985.60	\$1,807,700.34	\$1,854,929.75	\$1,779,529.15	\$1,719,935.64	\$1,868,440.04	\$1,880,565.32	\$1,844,832.32	\$1,854,296.98	\$1,772,886.81	\$1,845,353.91	\$1,815,214.11
2017	\$1,847,930.47	\$1,726,483.73	\$1,494,923.91	\$1,667,703.90	\$1,778,696.76	\$1,720,044.88	\$1,903,354.71	\$1,930,710.27	\$1,695,805.50	\$1,663,861.45	\$1,709,269.13	\$1,709,425.15	\$1,737,349.16
2018	\$1,962,214.72	\$1,943,637.75	\$1,780,622.98	\$2,023,315.56	\$1,870,382.57	\$1,633,344.06	\$1,816,127.45	\$1,643,850.72	\$1,584,218.99	\$1,914,793.23	\$1,842,417.33	\$1,743,836.48	\$1,813,230.15
2019	\$1,851,277.80	\$1,972,764.31	\$1,918,434.61	\$2,063,608.18	\$2,039,616.86	\$1,918,780.30	\$2,044,401.82	\$2,039,261.99	\$1,915,329.19	\$2,036,424.83	\$1,985,685.37	\$1,910,997.42	\$1,974,715.22
2020	\$1,967,807.21	\$2,029,158.92	\$2,191,628.66	\$2,443,036.94	\$2,302,678.55	\$2,314,814.13	\$2,307,089.45	\$2,261,644.38	\$2,236,196.53	\$2,383,533.05	\$2,377,097.32		\$2,255,880.47



SWHHS
Total Cash Balance by Month - Health Insurance

	January	February	March	April	May	June	July	August	September	October	November	December	Average for Year
2014	\$285,358.82	\$308,046.30	\$387,989.08	\$330,278.67	\$312,752.06	\$283,535.78	\$290,484.90	\$330,401.57	\$338,696.39	\$307,534.98	\$295,838.26	\$52,721.51	\$293,636.53
2015	-\$33,351.13	\$43,792.99	\$830.08	-\$19,686.02	\$13,868.59	-\$109,949.59	-\$141,430.74	-\$134,243.27	-\$141,678.96	-\$178,110.32	-\$221,023.86	\$0.00	-\$76,748.52
2016	\$4,998.43	\$75,942.80	\$95,153.51	\$139,472.05	\$210,786.36	\$270,693.34	\$325,643.77	\$350,734.02	\$455,033.16	\$538,192.07	\$558,493.11	\$269,062.28	\$274,517.08
2017	\$243,431.96	\$360,090.41	\$369,063.91	\$436,168.38	\$465,168.83	\$514,005.00	\$629,735.43	\$640,875.17	\$673,434.33	\$497,527.63	\$665,075.30	\$753,657.36	\$520,702.81
2018	\$547,461.08	\$661,779.26	\$734,590.83	\$705,226.64	\$998,994.04	\$688,218.46	\$693,431.75	\$820,833.21	\$742,653.73	\$690,065.54	\$709,870.88	\$736,904.37	\$727,502.48
2019	\$830,786.86	\$998,632.50	\$998,671.64	\$973,046.88	\$1,015,393.62	\$1,046,007.99	\$1,064,138.10	\$1,127,623.68	\$1,189,707.87	\$1,200,976.08	\$1,195,846.02	\$1,051,604.82	\$1,049,203.01
2020	1,070,978.00	1,108,164.79	1,071,726.42	1,126,237.51	1,216,443.58	1,252,789.13	1,289,386.59	1,328,430.70	1,343,792.01	1,297,527.65	1,206,581.80		\$1,210,187.11



SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER

November 2020

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	-DISBURSEMENTS	BALANCE
	BALANCE FORWARD				1,766,383.36
11/02/20	10026	Disb		42,997.53	1,723,385.83
11/06/20	9507 - 9526	Payroll		131,709.01	1,591,676.82
11/06/20	66590 - 66835 ACH	Payroll		503,072.98	1,088,603.84
11/06/20	110166-110190	Disb		3,415.37	1,085,188.47
11/06/20	8442 ACH	Disb		383.04	1,084,805.43
11/06/20	110191-110252	Disb		324,894.06	759,911.37
11/06/20	8443-8489 ACH	Disb		234,202.24	525,709.13
11/06/20	10027	Disb		774.86	524,934.27
11/06/20	42015-37,41-42087	Dep	457,283.70		982,217.97
11/10/20	42038-42040,42088-42111	Dep	72,744.23		1,054,962.20
11/10/20	10028	Disb		23,610.53	1,031,351.67
11/12/20	10029	Disb		10,882.69	1,020,468.98
11/12/20	10030	Disb		44,933.39	975,535.59
11/13/20	110253-110290	Disb		4,063.10	971,472.49
11/13/20	8490-8492 ACH	Disb		196.12	971,276.37
11/13/20	110291-110344	Disb		165,155.43	806,120.94
11/13/20	8493-8512 ACH	Disb		69,325.64	736,795.30
11/16/20	VOID 110163	Disb		(20.00)	736,815.30
11/16/20	10031	Disb		51,466.50	685,348.80
11/16/20	transfer from SS account	Dep	9,259.06		694,607.86
11/17/20	42112-42187	Dep	1,119,673.21		1,814,281.07
11/20/20	110345-110432	Disb		13,259.80	1,801,021.27
11/20/20	8513-8514 ACH	Disb		289.20	1,800,732.07
11/20/20	110433-110657	Disb		124,002.17	1,676,729.90
11/20/20	8515-8525 ACH	Disb		6,388.51	1,670,341.39
11/20/20	110658 - 110716	Disb		6,757.07	1,663,584.32
11/20/20	8526 - 8526 ACH	Disb		95.48	1,663,488.84
11/20/20	110717- 110785	Disb		233,607.09	1,429,881.75
11/20/20	8527- 8548 ACH	Disb		131,620.92	1,298,260.83
11/20/20	9527 - 9545	Payroll		131,620.87	1,166,639.96
11/20/20	66836 - 67075 ACH	Payroll		516,212.01	650,427.95
11/20/20	10032	Disb		12,754.81	637,673.14
11/20/20	42188-42230	Dep	266,374.48		904,047.62
11/23/20	10033	Disb		99,480.82	804,566.80
11/25/20	110786 - 110804	Disb		2,374.63	802,192.17
11/25/20	8549 - 8549 ACH	Disb		36.96	802,155.21
11/25/20	110805 - 110843	Disb		74,514.74	727,640.47
11/25/20	8550 - 8565 ACH	Disb		3,662.54	723,977.93
11/25/20	10034	Disb		11,743.37	712,234.56
11/25/20	42231-42315	Dep	576,572.59		1,288,807.15
11/30/20	10035	Disb		31,169.72	1,257,637.43
11/30/20	VOID 110338	Disb		(704.34)	1,258,341.77
11/30/20	42316-42337	Dep	494,009.30		1,752,351.07
					1,752,351.07
					1,752,351.07
					1,752,351.07
	balanced 12/1/20 js	TOTALS	2,995,916.57	3,009,948.86	

Checking - SS Beneficiaries
 Savings - Bremer
 Savings - Great Western
 Investments - Magic Fund

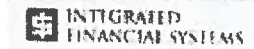
7,422.00
1,892,474.76
75,510.78
2,560,352.44

TOTAL CASH BALANCE

6,288,111.05

SRK
12/3/20 9:36AM

Southwest Health and Human Services



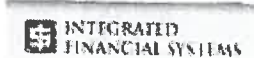
Treasurer's Cash Trial Balance

As of 11/2020

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
1 Health Services Fund				
	1,910,997.42			
Receipts		494,447.60	4,056,166.07	
Disbursements		272,247.00-	960,249.70-	
Payroll		228,636.33-	2,629,816.47-	
Fund Total		6,435.73-	466,099.90	2,377,097.32
5 Human Services Fund				
	410	General Administration		
	170,062.03-			
Receipts		51,893.54	584,550.37	
Disbursements		50,729.83-	582,248.67-	
Payroll		12,738.69-	134,130.84-	
Journal Entries		0.00	7,784.04	
Dept Total		11,574.98-	124,045.10-	294,107.13-
5 Human Services Fund				
	420	Income Maintenance		
	374,656.57-			
Receipts		808,048.68	7,808,692.93	
Disbursements		334,108.39-	3,714,722.70-	
Payroll		333,244.71-	3,946,298.78-	
Journal Entries		0.00	3,892.02-	
Dept Total		140,695.58	143,779.43	230,877.14-
5 Human Services Fund				
	431	Social Services		
	7,662,641.12			
Receipts		1,387,065.41	15,258,939.63	
Disbursements		66,521.56-	1,281,134.82-	
SSIS		703,483.30-	7,094,687.85-	
Payroll		685,822.12-	8,117,763.39-	
Journal Entries		0.00	3,892.02-	
Dept Total		68,761.57-	1,238,538.45-	6,424,102.67
5 Human Services Fund				
	461	Information Systems		
	3,236,438.89-			
Receipts		4,259.00	30,760.65	
Disbursements		79.94-	4,095.47-	

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Southwest Health and Human Services



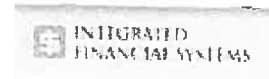
Treasurer's Cash Trial Balance

As of 11/2020

<u>Fund</u>		<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
	Payroll		22,173.02-	236,875.30-	
	Dept Total		17,993.96-	210,210.12-	3,446,649.01-
5	Human Services Fund	471	LCTS Collaborative Agency		
		0.00			
	Receipts		40,011.00	247,361.00	
	Disbursements		0.00	207,350.00-	
	Dept Total		40,011.00	40,011.00	40,011.00
	Fund Total	3,881,483.63	82,376.07	1,389,003.24-	2,492,480.39
61	Agency Health Insurance				
		1,051,604.82			
	Receipts		209,158.12	2,386,499.41	
	Disbursements		300,103.97-	2,231,522.43-	
	Fund Total		90,945.85-	154,976.98	1,206,581.80
71	LCTS Lyon Murray Collaborative Fund	471	LCTS Collaborative Agency		
		137,697.99			
	Receipts		0.00	94,566.00	
	Disbursements		0.00	97,917.11-	
	Dept Total		0.00	3,351.11-	134,346.88
	Fund Total	137,697.99	0.00	3,351.11-	134,346.88
73	LCTS Rock Pipestone Collaborative Fund	471	LCTS Collaborative Agency		
		54,412.53			
	Receipts		268.00	37,730.00	
	Disbursements		0.00	53,139.00-	
	Dept Total		268.00	15,409.00-	39,003.53
	Fund Total	54,412.53	268.00	15,409.00-	39,003.53
75	Redwood LCTS Collaborative	471	LCTS Collaborative Agency		
		59,802.79			

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Southwest Health and Human Services



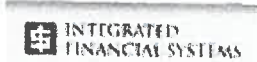
Treasurer's Cash Trial Balance

As of 11/2020

<u>Fund</u>	<u>Beginning Balance</u>	<u>This Month</u>	<u>YTD</u>	<u>Current Balance</u>
Receipts		0.00	80,560.00	
Disbursements		0.00	102,500.00-	
Dept Total		0.00	21,940.00-	37,862.79
Fund Total	59,802.79	0.00	21,940.00-	37,862.79
77 Local Advisory Council	477 Local Advisory Council			
	1,155.02			
Disbursements		60.00-	416.68-	
Dept Total		60.00-	416.68-	738.34
Fund Total	1,155.02	60.00-	416.68-	738.34
All Funds	7,097,154.20			
Receipts		2,995,151.35	30,585,826.06	
Disbursements		1,023,850.69-	9,235,296.58-	
SSIS		703,483.30-	7,094,687.85-	
Payroll		1,282,614.87-	15,064,884.78-	
Total		14,797.51-	809,043.15-	6,288,111.05

Southwest Health and Human Services

RM-Stmt of Revenues & Expenditures



As Of 11/2020 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	0.00	1,042,525.00-	1,042,525.00-	100	92
INTERGOVERNMENTAL REVENUES	1,483.00-	166,382.09-	170,500.00-	98	92
STATE REVENUES	48,724.94-	886,880.56-	810,102.00-	109	92
FEDERAL REVENUES	405,491.65-	1,490,405.42-	1,245,041.00-	120	92
FEES	32,192.01-	453,832.91-	496,230.00-	91	92
EARNINGS ON INVESTMENTS	131.34-	4,236.85-	14,880.00-	28	92
MISCELLANEOUS REVENUES	5,687.86-	9,049.44-	8,900.00-	102	92
TOTAL REVENUES	493,710.80-	4,053,312.27-	3,788,178.00-	107	92
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	92
PAYROLL AND BENEFITS	228,636.33	2,629,776.47	3,016,052.00	87	92
OTHER EXPENDITURES	271,510.20	957,435.90	772,126.00	124	92
TOTAL EXPENDITURES	500,146.53	3,587,212.37	3,788,178.00	95	92

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Southwest Health and Human Services

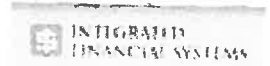


RM- Stmt of Revenues & Expenditures

As Of 11/2020 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2020 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	459,017.87-	7,237,202.09-	11,378,603.00-	64	92
INTERGOVERNMENTAL REVENUES	0.00	55,421.73-	104,354.00-	53	92
STATE REVENUES	374,387.22-	5,197,742.06-	5,269,341.00-	99	92
FEDERAL REVENUES	1,067,741.95-	7,264,041.17-	8,035,293.00-	90	92
FEES	179,043.09-	2,082,215.86-	2,200,150.00-	95	92
EARNINGS ON INVESTMENTS	689.50-	22,243.30-	78,096.00-	28	92
MISCELLANEOUS REVENUES	143,630.58-	1,396,481.46-	1,139,100.00-	123	92
TOTAL REVENUES	2,224,510.21-	23,255,347.67-	28,204,937.00-	82	92
EXPENDITURES					
PROGRAM EXPENDITURES	961,248.47	9,879,460.41	11,157,301.00	89	92
PAYROLL AND BENEFITS	1,052,814.83	12,433,646.29	14,290,849.00	87	92
OTHER EXPENDITURES	128,070.84	2,332,081.29	2,756,787.00	85	92
TOTAL EXPENDITURES	2,142,134.14	24,645,187.99	28,204,937.00	87	92

Southwest Health and Human Services



Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

<u>Element</u>	<u>Description</u>	<u>Account Number</u>	<u>Current Month</u>	<u>Year-To-Date</u>	<u>Budget</u>	<u>% of Bdgt</u>	<u>% of Year</u>
1 FUND	Health Services Fund						
410 DEPT	General Administration						
0 PROGRAM	...						
							Revenue
							Expend.
			8,244.61	57,188.15	0.00	0	92
							Net
			8,244.61	57,188.15	0.00	0	92
930 PROGRAM	Administration						Revenue
							Expend.
			5,985.42-	1,086,862.50-	1,108,655.00-	98	92
							Net
			26,826.98	407,958.42	697,981.00	58	92
							Net
			20,841.56	678,904.08-	410,674.00-	165	92
410 DEPT	General Administration	Totals:					Revenue
							Expend.
			5,985.42-	1,086,862.50-	1,108,655.00-	98	92
							Net
			35,071.59	465,146.57	697,981.00	67	92
							Net
			29,086.17	621,715.93-	410,674.00-	151	92
481 DEPT	Nursing						Revenue
100 PROGRAM	Family Health						Expend.
							Net
			995.00-	16,007.89-	18,680.00-	86	92
							Net
			1,460.56	17,082.18	15,651.00	109	92
							Net
			465.56	1,074.29	3,029.00-	35-	92
103 PROGRAM	Follow Along Program						Revenue
							Expend.
							Net
			2,346.31-	22,534.06-	27,324.00-	82	92
							Net
			2,414.06	25,798.40	31,241.00	83	92
							Net
			67.75	3,264.34	3,917.00	83	92
110 PROGRAM	TANF						Revenue
							Expend.
							Net
			0.00	63,937.99-	127,876.00-	50	92
							Net
			0.00	122,910.81	127,911.00	96	92
							Net
			0.00	58,972.82	35.00	168,494	92
130 PROGRAM	WIC						Revenue
							Expend.
							Net
			0.00	450,598.00-	450,000.00-	100	92
							Net
			45,233.24	475,793.38	557,867.00	85	92
							Net
			45,233.24	25,195.38	107,867.00	23	92
140 PROGRAM	Peer Breastfeeding Support Program						Revenue
							Expend.
							Net
			0.00	23,946.00-	53,500.00-	45	92
							Net
			1,752.89	26,817.17	33,438.00	80	92
							Net
			1,752.89	2,871.17	20,062.00-	14-	92
210 PROGRAM	CTC Outreach						Revenue
							Expend.
							Net
			0.00	176,083.86-	271,600.00-	65	92
							Net
			15,678.17	200,175.04	285,400.00	70	92
							Net
			15,678.17	24,091.18	13,800.00	175	92
270 PROGRAM	Maternal Child Health - Title V						Revenue
							Expend.
							Net
			9,859.76-	146,000.96-	253,200.00-	58	92
							Net
			15,140.67	179,084.82	249,934.00	72	92
							Net
			5,280.91	33,083.86	3,266.00-	1,013-	92

Southwest Health and Human Services



Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
280 PROGRAM	MCH Dental Health		Revenue	12.54-	901.96-	2,000.00-	45	92
			Expend.	90.29	14,398.46	17,907.00	80	92
			Net	77.75	13,496.50	15,907.00	85	92
285 PROGRAM	MCH Blood Lead		Revenue					92
			Expend.	312.49	2,360.30	0.00	0	92
			Net	312.49	2,360.30	0.00	0	92
295 PROGRAM	MCH Car Seat Program		Revenue	541.12-	9,588.69-	33,000.00-	29	92
			Expend.	1,480.53	27,413.95	42,199.00	65	92
			Net	939.41	17,825.26	9,199.00	194	92
300 PROGRAM	Case Management		Revenue	27,480.18-	398,731.23-	409,000.00-	97	92
			Expend.	21,160.50	287,695.64	412,332.00	70	92
			Net	6,319.68-	111,035.59-	3,332.00	3,332-	92
330 PROGRAM	MNChoices		Revenue	37,576.47-	161,896.02-	114,000.00-	142	92
			Expend.	9,214.24	155,862.81	191,342.00	81	92
			Net	28,362.23-	6,033.21-	77,342.00	8-	92
603 PROGRAM	Disease Prevention And Control		Revenue	17,924.05-	144,861.35-	141,042.00-	103	92
			Expend.	12,632.68	164,884.98	247,136.00	67	92
			Net	5,291.37-	20,023.63	106,094.00	19	92
660 PROGRAM	MIIC		Revenue	0.00	77.68-	0.00	0	92
			Expend.	285.48	737.32	0.00	0	92
			Net	285.48	659.64	0.00	0	92
481 DEPT	Nursing	Totals:	Revenue	96,735.43-	1,615,165.69-	1,901,222.00-	85	92
			Expend.	126,855.80	1,701,015.26	2,212,358.00	77	92
			Net	30,120.37	85,849.57	311,136.00	28	92
483 DEPT	Health Education							
500 PROGRAM	Direct Client Services		Revenue	240.80-	3,458.44-	500.00-	692	92
			Expend.	153.18	3,633.54	32,705.00	11	92
			Net	87.62-	175.10	32,205.00	1	92
510 PROGRAM	SHIP		Revenue	0.00	220,259.05-	226,960.00-	97	92
			Expend.	8,825.30	200,465.47	226,960.00	88	92
			Net	8,825.30	19,793.58-	0.00	0	92
540 PROGRAM	Toward Zero Deaths (TZD) Safe Roads		Revenue	0.00	3,685.86-	17,537.00-	21	92
			Expend.	247.43	3,791.32	17,537.00	22	92
			Net	247.43	105.46	0.00	0	92

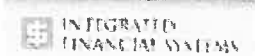
Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdt	% of Year
541 PROGRAM	Toward Zero Deaths (TZD) Safe Roads		Revenue	0.00	2,668.03-	17,641.00-	15	92
			Expend.	141.73	3,435.23	17,641.00	19	92
			Net	141.73	767.20	0.00	0	92
550 PROGRAM	P&I Grant		Revenue	0.00	168,797.03-	189,326.00-	89	92
			Expend.	10,697.88	151,129.26	189,326.00	80	92
			Net	10,697.88	17,667.77-	0.00	0	92
900 PROGRAM	Emergency Preparedness		Revenue	0.00	70,978.31-	92,437.00-	77	92
			Expend.	596.47	58,197.39	92,437.00	63	92
			Net	596.47	12,780.92-	0.00	0	92
905 PROGRAM	COVID-19 Pandemic		Revenue	383,289.07-	648,364.31-	0.00	0	92
			Expend.	300,208.33	755,936.93	0.00	0	92
			Net	83,080.74-	107,572.62	0.00	0	92
483 DEPT	Health Education	Totals:	Revenue	383,529.87-	1,118,211.03-	544,401.00-	205	92
			Expend.	320,870.32	1,176,589.14	576,606.00	204	92
			Net	62,659.55-	58,378.11	32,205.00	181	92
485 DEPT	Environmental Health		Revenue	1,579.00-	166,801.50-	206,600.00-	81	92
800 PROGRAM	Environmental		Expend.	9,913.51	171,500.43	276,433.00	62	92
			Net	8,334.51	4,698.93	69,833.00	7	92
809 PROGRAM	Environmental Water Lab		Revenue	5,881.08-	63,771.55-	27,300.00-	234	92
			Expend.	4,774.00	68,922.34	24,800.00	278	92
			Net	1,107.08-	5,150.79	2,500.00-	206-	92
830 PROGRAM	FDA Standardization Grant		Revenue	0.00	2,500.00-	0.00	0	92
			Expend.	2,661.31	4,038.63	0.00	0	92
			Net	2,661.31	1,538.63	0.00	0	92
485 DEPT	Environmental Health	Totals:	Revenue	7,460.08-	233,073.05-	233,900.00-	100	92
			Expend.	17,348.82	244,461.40	301,233.00	81	92
			Net	9,888.74	11,388.35	67,333.00	17	92
1 FUND	Health Services Fund	Totals:	Revenue	493,710.80-	4,053,312.27-	3,788,178.00-	107	92
			Expend.	500,146.53	3,587,212.37	3,788,178.00	95	92
			Net	6,435.73	466,099.90-	0.00	0	92

Southwest Health and Human Services

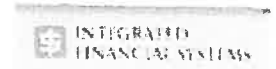


Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

<u>Element</u>	<u>Description</u>	<u>Account Number</u>	<u>Current Month</u>	<u>Year-To-Date</u>	<u>Budget</u>	<u>% of Bdgt</u>	<u>% of Year</u>
5 FUND	Human Services Fund						
410 DEPT	General Administration						
0 PROGRAM	...						
			Revenue				92
			Expend.	11,574.98	124,882.18	54,307.00	230
			Net	11,574.98	124,882.18	54,307.00	230
410 DEPT	General Administration	Totals:	Revenue				92
			Expend.	11,574.98	124,882.18	54,307.00	230
			Net	11,574.98	124,882.18	54,307.00	230
420 DEPT	Income Maintenance						
0 PROGRAM	...						
			Revenue				92
			Expend.	0.00	780.92	0.00	0
			Net	0.00	780.92	0.00	0
600 PROGRAM	Income Maint Administrative/Overhez						
			Revenue	179,894.91-	2,423,515.12-	3,638,696.00-	67
			Expend.	97,338.09	1,388,050.97	1,663,376.00	83
			Net	82,556.82-	1,035,464.15-	1,975,320.00-	52
601 PROGRAM	Income Maint/Random Moment Payro						
			Revenue				92
			Expend.	195,041.77	2,298,208.09	2,641,701.00	87
			Net	195,041.77	2,298,208.09	2,641,701.00	87
602 PROGRAM	Income Maint FPI Investigator						
			Revenue	6,610.00-	77,004.00-	58,000.00-	133
			Expend.	9,737.51	64,777.67	64,995.00	100
			Net	3,127.51	12,226.33-	6,995.00	175-
605 PROGRAM	MN Supplemental Aid (MSA)/GRH						
			Revenue	8,617.55-	76,997.78-	50,000.00-	154
			Expend.	25,763.76	115,143.69	50,000.00	230
			Net	17,146.21	38,145.91	0.00	0
610 PROGRAM	TANF(AFDC/MFIP/DWP)						
			Revenue	137.00-	6,424.50-	17,000.00-	38
			Expend.	979.89	3,860.03	13,750.00	28
			Net	842.89	2,564.47-	3,250.00-	79
620 PROGRAM	General Asst (GA)/General Relief/Buri.						
			Revenue	4,204.88-	31,633.12-	27,500.00-	115
			Expend.	18,813.00	365,547.57	226,000.00	162
			Net	14,608.12	333,914.45	198,500.00	168
630 PROGRAM	Food Support (FS)						
			Revenue	127,006.00-	506,945.60-	521,000.00-	97
			Expend.	367.25	1,280.30	6,500.00	20
			Net	126,638.75-	505,665.30-	514,500.00-	98

Southwest Health and Human Services

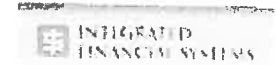


Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

<u>Element</u>	<u>Description</u>	<u>Account Number</u>		<u>Current Month</u>	<u>Year-To-Date</u>	<u>Budget</u>	<u>% of Bdgt</u>	<u>% of Year</u>
640 PROGRAM	Child Support (IVD)		Revenue	161,043.08-	1,318,461.34-	1,721,356.00-	77	92
			Expend.	79,442.69	1,022,294.18	1,158,162.00	88	92
			Net	81,600.39-	296,167.16-	563,194.00-	53	92
650 PROGRAM	Medical Assistance (MA)		Revenue	320,464.53-	3,366,465.11-	3,412,500.00-	99	92
			Expend.	239,798.41	2,404,434.72	2,277,000.00	106	92
			Net	80,666.12-	962,030.39-	1,135,500.00-	85	92
680 PROGRAM	Refugee Cash Assistance (RCA)		Revenue	0.00	711.00-	0.00	0	92
			Expend.					92
			Net	0.00	711.00-	0.00	0	92
420 DEPT	Income Maintenance	Totals:	Revenue	807,977.95-	7,808,157.57-	9,446,052.00-	83	92
			Expend.	667,282.37	7,664,378.14	8,101,484.00	95	92
			Net	140,695.58-	143,779.43-	1,344,568.00-	11	92
431 DEPT	Social Services							
700 PROGRAM	Social Service Administrative/Overhea		Revenue	808,246.33-	8,051,378.43-	10,899,532.00-	74	92
			Expend.	169,818.93	2,534,197.28	3,136,848.00	81	92
			Net	638,427.40-	5,517,181.15-	7,762,684.00-	71	92
701 PROGRAM	Social Services/SSTS		Revenue					92
			Expend.	578,016.77	6,846,007.16	7,765,564.00	88	92
			Net	578,016.77	6,846,007.16	7,765,564.00	88	92
710 PROGRAM	Children's Social Services Programs		Revenue	148,719.99-	1,892,508.94-	1,848,854.00-	102	92
			Expend.	267,474.09	2,863,983.34	3,756,500.00	76	92
			Net	118,754.10	971,474.40	1,907,646.00	51	92
711 PROGRAM	YIP Grant (Circle)-Dept of Public Safet		Revenue	0.00	16,791.50-	0.00	0	92
			Expend.	1,462.09	17,829.20	0.00	0	92
			Net	1,462.09	1,037.70	0.00	0	92
712 PROGRAM	CIRCLE Program		Revenue	0.00	5,000.00-	5,000.00-	100	92
			Expend.	359.11	5,079.14	8,000.00	63	92
			Net	359.11	79.14	3,000.00	3	92
713 PROGRAM	STAY Program Grant (formerly SELF)		Revenue	0.00	17,877.00-	54,100.00-	33	92
			Expend.	1,207.71	10,149.93	54,100.00	19	92
			Net	1,207.71	7,727.07-	0.00	0	92
715 PROGRAM	Children Waivers		Revenue	8,692.88-	145,459.43-	104,000.00-	140	92
			Expend.					92
			Net	8,692.88-	145,459.43-	104,000.00-	140	92

Southwest Health and Human Services



Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

<u>Element</u>	<u>Description</u>	<u>Account Number</u>		<u>Current Month</u>	<u>Year-To-Date</u>	<u>Budget</u>	<u>% of</u>	<u>% of</u>
							<u>Bdgt</u>	<u>Year</u>
716 PROGRAM	FGDM/Family Group Decision Making		Revenue	0.00	36,014.23-	56,914.00-	63	92
			Expend.	0.00	3,330.26	56,914.00	6	92
			Net	0.00	32,683.97-	0.00	0	92
717 PROGRAM	AR/Alternative Response Discretion Fi		Revenue	0.00	40,806.00-	52,344.00-	78	92
			Expend.	9,212.18	30,030.30	52,344.00	57	92
			Net	9,212.18	10,775.70-	0.00	0	92
718 PROGRAM	PSOP/Parent Support Outreach Progra		Revenue	0.00	17,928.00-	38,753.00-	46	92
			Expend.	1,910.00	6,440.62	38,753.00	17	92
			Net	1,910.00	11,487.38-	0.00	0	92
720 PROGRAM	Child Care/Child Protection		Revenue	1,800.00-	20,756.75-	27,450.00-	76	92
			Expend.	0.00	0.00	2,600.00	0	92
			Net	1,800.00-	20,756.75-	24,850.00-	84	92
721 PROGRAM	CC Basic Slide Fee/Cty Match to DHS		Revenue	3,990.00-	29,777.00-	38,148.00-	78	92
			Expend.	0.00	38,565.50	43,365.00	89	92
			Net	3,990.00-	8,788.50	5,217.00	168	92
722 PROGRAM	Child Care/MFIP		Revenue	0.00	367.00-	0.00	0	92
			Expend.					92
			Net	0.00	367.00-	0.00	0	92
726 PROGRAM	MFIP/SW MN PIC		Revenue	1,788.00-	12,115.00-	357,000.00-	3	92
			Expend.	0.00	0.00	225,000.00	0	92
			Net	1,788.00-	12,115.00-	132,000.00-	9	92
730 PROGRAM	Chemical Dependency		Revenue	40,464.34-	326,448.63-	286,500.00-	114	92
			Expend.	27,707.47	373,096.61	543,500.00	69	92
			Net	12,756.87-	46,647.98	257,000.00	18	92
740 PROGRAM	Mental Health (Both Adults & Children		Revenue	0.00	22.40-	0.00	0	92
			Expend.					92
			Net	0.00	22.40-	0.00	0	92
741 PROGRAM	Mental Health/Adults Only		Revenue	62,812.71-	1,093,000.69-	1,196,951.00-	91	92
			Expend.	188,126.04	1,562,763.20	1,695,317.00	92	92
			Net	125,313.33	469,762.51	498,366.00	94	92
742 PROGRAM	Mental Health/Children Only		Revenue	49,203.30-	771,755.81-	820,246.00-	94	92
			Expend.	167,736.47	1,709,617.58	1,850,137.00	92	92
			Net	118,533.17	937,861.77	1,029,891.00	91	92

Southwest Health and Human Services



Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

<u>Element</u>	<u>Description</u>	<u>Account Number</u>		<u>Current Month</u>	<u>Year-To-Date</u>	<u>Budget</u>	<u>% of Bdgt</u>	<u>% of Year</u>
750 PROGRAM	Developmental Disabilities		Revenue	76,069.93-	813,962.02-	850,171.00-	96	92
			Expend.	21,329.61	237,249.87	369,671.00	64	92
			Net	54,740.32-	576,712.15-	480,500.00-	120	92
760 PROGRAM	Adult Services		Revenue	84,140.37-	1,070,131.01-	1,351,922.00-	79	92
			Expend.	2,396.33	57,577.26	39,850.00	144	92
			Net	81,744.04-	1,012,553.75-	1,312,072.00-	77	92
765 PROGRAM	Adult Waivers		Revenue	86,334.41-	806,968.61-	736,000.00-	110	92
			Expend.	4,267.03	111,689.65	112,500.00	99	92
			Net	82,067.38-	695,278.96-	623,500.00-	112	92
431 DEPT	Social Services	Totals:	Revenue	1,372,262.26-	15,169,068.45-	18,723,885.00-	81	92
			Expend.	1,441,023.83	16,407,606.90	19,750,963.00	83	92
			Net	68,761.57	1,238,538.45	1,027,078.00	121	92
461 DEPT	Information Systems		Revenue	4,259.00-	30,760.65-	35,000.00-	88	92
0 PROGRAM	...		Expend.	22,252.96	240,970.77	298,183.00	81	92
			Net	17,993.96	210,210.12	263,183.00	80	92
461 DEPT	Information Systems	Totals:	Revenue	4,259.00-	30,760.65-	35,000.00-	88	92
			Expend.	22,252.96	240,970.77	298,183.00	81	92
			Net	17,993.96	210,210.12	263,183.00	80	92
471 DEPT	LCTS Collaborative Agency		Revenue	40,011.00-	247,361.00-	0.00	0	92
702 PROGRAM	LCTS		Expend.	0.00	207,350.00	0.00	0	92
			Net	40,011.00-	40,011.00-	0.00	0	92
471 DEPT	LCTS Collaborative Agency	Totals:	Revenue	40,011.00-	247,361.00-	0.00	0	92
			Expend.	0.00	207,350.00	0.00	0	92
			Net	40,011.00-	40,011.00-	0.00	0	92
5 FUND	Human Services Fund	Totals:	Revenue	2,224,510.21-	23,255,347.67-	28,204,937.00-	82	92
			Expend.	2,142,134.14	24,645,187.99	28,204,937.00	87	92
			Net	82,376.07-	1,389,840.32	0.00	0	92
FINAL TOTALS	1,053 Accounts		Revenue	2,718,221.01-	27,308,659.94-	31,993,115.00-	85	92
			Expend.	2,642,280.67	28,232,400.36	31,993,115.00	88	92
			Net	75,940.34-	923,740.42	0.00	0	92

Social Services Caseload:

Yearly Averages	Adult Services	Children's Services	Total Programs
2017	2705	604	3308
2018	2683	617	3299
2019	2651	589	3241
2020			

2020	Adult Services	Children's Services	Total Programs
January	2631	650	3281
February	2566	654	3220
March	2618	585	3203
April	2624	548	3172
May	2602	563	3165
June	2612	552	3164
July	2638	528	3166
August	2667	506	3173
September	2616	558	3174
October	2632	574	3206
November	2656	577	3233
December			
Average	2624	572	3196

Adult - Social Services Caseload

Average	Adult Brain Injury (BI)	Adult Community Alternative Care (CAC)	Adult Community Access for Disability Inclusion (CADI)	Adult Essential Community Supports	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
2017	12	266	12	0	315	45	828	16	422	444	343	2705
2018	11	299	14	0	282	43	880	18	353	451	331	2683
2019	9	319	13	0	261	58	887	17	295	542	339	2651
2020												

*Note: CADI name change and there is a new category (Adult Essential Community Supports)

2020	Adult Brain Injury (BI)	Adult Community Access for Disability Inclusion (CADI)	Adult Community Alternative Care (CAC)	Adult Essential Community Supports	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
January	9	319	12	0	269	61	849	15	317	453	336	2640
February	9	317	12	0	262	64	845	16	260	458	323	2566
March	9	321	12	0	264	69	847	17	301	457	321	2618
April	9	320	11	0	271	58	843	16	317	459	320	2624
May	9	321	11	0	274	58	848	13	285	461	322	2602
June	9	322	12	0	270	61	882	14	265	456	321	2612
July	10	323	12	0	269	66	882	14	291	451	320	2638
August	10	329	12	0	270	66	899	14	300	450	317	2667
September	10	341	12	0	269	60	897	14	250	450	313	2616
October	10	341	12	0	276	59	874	14	284	449	313	2632
November	10	340	12	0	274	55	877	16	315	446	311	2656
December												0
	9	327	12	0	270	62	868	15	290	454	320	2406

Children's - Social Services Caseload

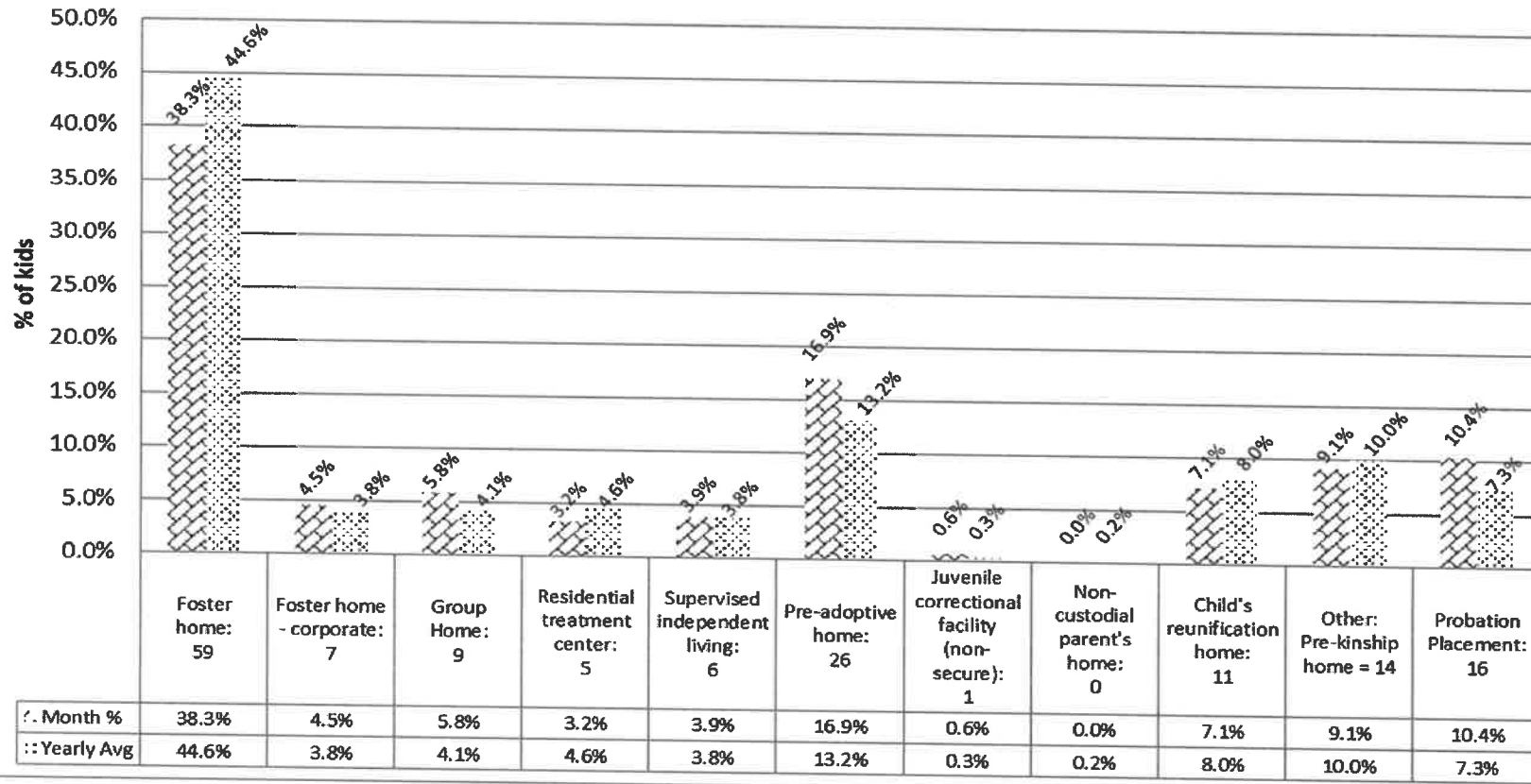
Average	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Intervention: Infants & Toddlers with Disabilities	Minor Parents (MP)	Parent Support Outreach Program (PSOP)	Total Programs
2017	49	21	0	10	35	195	174	103	0	0	17	518
2018	46	23	0	11	40	180	182	110	0	0	25	604
2019	36	18	0	11	40	170	191	94	0	0	30	589
2020												

2020	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Intervention: Infants & Toddlers with Disabilities	Minor Parents (MP)	Parent Support Outreach Program (PSOP)	Total Programs
January	38	23	0	11	42	197	208	91	0	0	40	650
February	38	24	0	11	43	198	215	89	0	0	36	654
March	39	24	0	11	43	170	181	84	0	0	33	585
April	31	27	0	11	46	144	183	84	0	0	22	548
May	31	29	0	11	46	162	169	80	0	0	35	563
June	31	31	0	11	48	153	159	81	0	0	38	552
July	26	31	0	12	49	147	150	80	0	0	33	528
August	26	29	0	12	50	145	146	79	0	0	19	506
September	26	28	0	12	50	164	164	84	0	0	30	558
October	27	31	0	12	51	163	188	78	0	1	23	574
November	27	33	0	12	53	149	196	77	0	0	30	577
December												0
	31	28	0	11	47	163	178	82	0	0	31	525

2020 KIDS IN OUT OF HOME PLACEMENT - BY COUNTY

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	YTD Average	2019 Average
Lincoln	5	5	4	4	4	3	3	3	3	3	3		4	6
Lyon	50	48	42	44	43	41	40	40	42	40	42		43	44
Murray	8	8	8	8	8	8	8	9	9	9	7		8	10
Pipestone	25	25	24	24	24	26	27	26	25	25	21		25	25
Redwood	70	69	69	66	65	67	69	65	64	67	65		67	68
Rock	21	20	19	16	13	13	13	17	17	17	16		17	20
Monthly Totals	179	175	166	162	157	158	160	160	160	161	154	0		

November 2020 - Placement by Category
154 Kids in Placement



November 2020: Total kids in placement = 154

Total of 10 Children entered placement

3	Lyon	Foster Home
2	Redwood	Foster Home
2	Redwood	Probation
1	Redwood	Group Home
1	Rock	Foster Home
1	Rock	Residential Treatment

Total of 17 Children were discharged from placement (discharges from previous month)

1	Lyon	Foster Home
2	Murray	ADOPTED
4	Pipestone	Child's Reunification Home
5	Redwood	Pre-kindship Home
1	Redwood	Child's Reunification Home
1	Redwood	Probation
3	Rock	Child's Reunification Home

NON IVD COLLECTIONS
NOVEMBER 2020

PROGRAM	ACCOUNT	TOTAL
MSA/GRH	05-420-605.5802	8,618
TANF (MFIP/DWP/AFDC)	05-420-610.5803	137
GA	05-420-620.5803	4,205
FS	05-420-630.5803	160
CS (PI Fee, App Fee, etc)	05-420-640.5501	423
MA Recoveries & Estate Collections (25% retained by agency)	05-420-650.5803	95,758
REFUGEE	05-420-680.5803	0
CHILDRENS		
Court Visitor Fee	05-431-700.5514	0
Parental Fees, Holds	05-431-710.5501	6,514
OOH/FC Recovery	05-431-710.5803	10,624
CHILDCARE		
Licensing	05-431-720.5502	0
Corp FC Licensing	05-431-720.5505	800
Over Payments	05-431-721&722.5803	1,000
CHEMICAL DEPENDENCY		
CD Assessments	05-431-730.5519	2,629
Detox Fees	05-431-730.5520	548
SUD Treatment	05-431-730.5523	5,653
Over Payments	05-431-730.5803	0
MENTAL HEALTH		
Insurance Copay	05-431-740.5803	0
Over Payments	05-431-741 or 742.5803	0
DEVELOPMENTAL DISABILITIES		
Insurance Copay/Overpayments	05-431-750.5803	0
ADULT		
Court Visitor Fee	05-431-760.5515	100
Insurance Copay/Overpayments	05-431-760.5803	3
TOTAL NON-IVD COLLECTIONS		137,173



Offices Located in:

Redwood Falls, MN • 507-637-4041
Ivanhoe, MN • 507-694-1452 Slayton, MN • 507-836-6144
Pipestone, MN • 507-825-6720 Luverne, MN • 507-283-5070
Marshall, MN • Human Services 507-537-6747 • Health Services 507-537-6713

November 24, 2020

Stephanie Pierce
Sanford Medical Center
Chemical Dependency Services
1600 N Kniss Avenue
Luverne MN 56256

RE: Future Contract for Rule 25 Chemical Dependency Assessments

Dear Stephanie Pierce,

Thank you for your many years of service to the people of Rock County as well as surrounding areas. Your services in providing Rule 25 assessments have been invaluable in meeting the needs of the people we serve in southwestern Minnesota. You have done a great job of fulfilling our contract needs throughout these many years.

As you are aware, Direct Access has come into effect as of 10-1-2020. With Direct Access and an increase in choice for people able to receive a Rule 25 or a Comprehensive Assessment, Southwest Health and Human Services believes that Rule 25 Assessments which are needed in Rock County will be able to be completed from within our Luverne office location by SWHHS staff.

This letter is serving as the required 30 day notice that Southwest Health and Human Services will not be renewing our contract with Sanford Health Luverne for the provision of Chemical Dependency Rule 25 Assessment Services for 2021. We thank you and your agency for effectively meeting the service needs outlined in this Contract for the past many years. We wish your Substance Use Programming much success in the future and we look forward to continued partnerships in order to meet the SUD needs of Rock County.

If you have any questions or would like to talk further regarding this matter, please call me at 507-825-8566.

Thank you again for your services to our community.

Stacy Jorgensen, LSW
Social Services Supervisor

SOUTHWEST HEALTH & HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 2

EFFECTIVE DATE: 07/20/11

REVISION DATE: 12/16/2020

AUTHORITY: Southwest Health and Human Services - Human Services Board
MN Rule 2 part 9502.0335
MN Statute 245A.50

--- INITIAL LICENSING: FAMILY CHILD CARE REQUIREMENTS ---

Section 1 - Purpose

- a. All individuals wishing to become licensed for family child care or group family child care must complete the licensing process as outlined in MN Rule 2, part 9502.0355. In addition to this, individuals must meet training requirements as specified in MN Statute 245A.50 prior to licensure.

Section 2 - Training

- a. Southwest Health and Human Services requires all applicants to complete orientation training provided by SWHHS staff prior to licensure ~~or within 12 months of becoming licensed at the latest.~~
- b. Individuals who have been licensed for child care in the State of Minnesota within the past two years will not need to renew orientation. However, those moving from out of state will be required to complete agency orientation as rules may vary significantly from state to state. ~~Providers who have closed a previous license and who have not provided child care for the previous 2 years or longer will be required to attend orientation.~~ Additionally, Providers who are under a negative action or who have closed as a result of a negative action may be required to complete the training again.

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 3**

EFFECTIVE DATE: 07/20/11

REVISION DATE: 12/16/2020

AUTHORITY: Southwest Health and Human Services - Human Services Board
Minnesota Rule Part 2960.3050

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--- LICENSING: FIRE SAFETY INSPECTIONS AND FEES ---

Section 1 - Child Care

- a. Applicants for child care licensing may require an inspection by a Minnesota State Fire Marshal when there will be:
1. Care in a basement.
 2. Care in a mixed occupancy building (home has an attached garage) if a proper fire wall does not exist between the house and attached garage.
 3. Care in a home with a freestanding solid fuel heating appliance.
 4. Care in multiple occupancy buildings (apartment building).
 5. Care in a manufactured home, if the home was built prior to 1976.
 6. In the judgment of the licensing worker, and after consultation with a State Fire Marshal who is in agreement with the licensing worker, that a possible fire hazard exists.
 7. When a current licensee's residence is remodeled or added on to, a re-inspection by a State Fire Marshal may be required.
 8. ~~New applicants for~~ Licensure with a licensed capacity of more than ten.

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Section 2 - Foster Care

- a. Applicants for foster care licensing may require an inspection by a Minnesota State Fire Marshal when there will be:
1. The foster home contains a freestanding solid fuel heating appliance.
 2. The foster home is a manufactured home as defined in Minnesota Statutes, section 327B.01, subdivision 13, and was manufactured before June 1976.

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 3**

3. The licensing agency identifies a potential hazard in a single family detached home, or a mixed or multiple occupancy building.
 4. The home is to be licensed for four or ~~and~~ more foster children.
 5. The foster home has a foster child sleeping in a room that is 50% or more below ground level.
 6. ~~For reasonable cause by licensor, with explanation.~~
 7. Whenever a current licensee's residence has been remodeled, it should be re-inspected by the licensor and may require a fire marshal inspection.
 8. All adult foster care facilities.
- b. All new applicants for foster care licenses having the identified triggers will be inspected by a Minnesota State Fire Marshal or an approved local building inspector. This includes applicants for relative foster care ~~situations~~.
- c. Inspections will be based on the most current Minnesota State Fire Code (MSFC), the most current Minnesota State Building Code (MSBC) and the most current International Residential Code (IRC). Local zoning codes will also be enforced when applicable.

Section 3 - Building Official Inspection (e.g. Certificate of Occupancy)

- a. A Fire Marshal inspection shall not be required for all homes, including mobile homes, constructed within the last 5 years and used for child care and foster care for which there is a written certificate of occupancy or other similar building (official) inspection report on file.
- b. ~~Fire Safety Guidelines outlined in Rule 2 must also be enforced even though the State Fire Marshal may not require the same modifications after an inspection (e.g. self closing device on garage doors).~~

Section 4 - Fees

- a. The State Fire Marshal requires a \$50.00 fee for all inspections of ~~home child care sites and corporate adult foster care sites~~. Child care inspections, corporate child foster care inspections and all adult foster care inspections are paid by the license holder. The cost of child foster care home inspections **may** be covered by Southwest Health & Human Services. The fee must be paid in the form of a money order payable to the State Fire

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 3**

Marshal; if a local building inspector is used, payment is made to the municipality providing the inspection. Payment must be included with the Request for Inspection Application materials and will be forwarded to the State Fire Marshal by Southwest Health and Human Services.

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 6**

EFFECTIVE DATE: 7/20/11

REVISION DATE: ~~12/21/11~~ 12/16/2020

AUTHORITY: Southwest Health and Human Services - Human Services Board
Minnesota Statute 245A.10 Subpart 2

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--- FEES: HOME CHILD CARE LICENSING ---

Section 1 - Purpose

- a. The Southwest Human Services Board has adopted a \$50.00 fee per license per year for home licensing inspections. This fee will be charged prior to initial licensing inspections for applicants or, in the case of currently licensed providers, when relicensing applications are submitted. This fee will be charged \$50.00 annually or \$100.00 bi-annually, depending upon the length of the license issued.

- b. ~~The Southwest Human Services Board has also adopted a \$50.00 fee per license per licensing period for conducting background studies. This fee will be charged at the time of all initial license applications and annually or bi-annually thereafter, depending upon the length of the license issued. The Southwest Human Services Board has also adopted a \$50.00 fee per license per licensing period for conducting background studies. This fee will be charged at the time of all initial license applications and annually or bi-annually thereafter, depending upon the length of the license issued. Background study fees are no longer collected by Southwest Health & Human Services, as the checks are now completed through the Dept. of Human Services Background Studies Division. This was effective January 1, 2020.~~

~~c. Home licensing inspection fees and fees for conducting background studies will be implemented on January 1, 2011.~~

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~~For the 2012 calendar year, the licensing inspection fee and background study fees will be waived for Rock County providers. The fee schedule will be implemented starting 01/01/12.~~

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 7**

EFFECTIVE DATE: 07/20/11

REVISION DATE: 12/16/2020

AUTHORITY: Southwest Health and Human Services - Human Services Board

--- RELICENSING: FOSTER AND DAY CARE REQUIREMENTS ---

Section 1 - Purpose

- a. The Department of Human Services has interpreted statute to allow the commissioner to issue foster care and day care licenses every two years.

Section 2 - Policy

- a. It is the policy of Southwest Health and Human Services to recommend licensure on a two year basis. The exceptions to a two-year license are as follows:
 - 1. New applicants for child care and non-relative child foster care.
 - 2. Provider is in the process of being recommended for a negative action or under a current conditional status.
 - 3. A program where there has been a determination of abuse, neglect, or maltreatment within the past licensing period.
 - 4. The provider has a variance to a disqualification.
 - 5. There have been a number of substantiated licensing complaints.
 - 6. The provider has failed to correct violations on previously issued correction orders.
 - 7. The provider requested to be licensed for only one year.
- b. Southwest Health and Human Services will also review to determine appropriateness of a two-year license given the number of complaints, keeping in mind the nature, severity, and chronicity of the complaints.
- c. Southwest Health and Human Services will review to determine failure to correct previous correction orders. Southwest Health and Human Services will review and determine appropriateness of a two-year license given the non-compliance terms, again keeping in mind the nature, severity, and chronicity of the non-compliance.

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 7**

- d. Southwest Health and Human Services will ~~make efforts to~~ review all two-year licenses in their alternate (non-renewal) year, depending on staff availability. This will result in a yearly on-site visit for all licensed child care providers to review and complete necessary requirements and conduct a provider interview. For child foster care, the alternate year contact may be an in-person visit or a phone contact with the license holder.

There is no Statutory requirement for adult foster care licenses to be reviewed in their non-renewal year. Therefore, SWHHS may conduct in-person visits to those sites every two years.

**SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 8**

EFFECTIVE DATE: 07/20/11

REVISION DATE: 12/16/2020

AUTHORITY: Southwest Health and Human Services - Human Services Board

Minnesota Rules Part 9502

Minnesota Statute 245A

--- AUTHORITY TO ISSUE VARIANCES ---

FAMILY CHILD FOSTER CARE AND ADULT FOSTER CARE, AND IN-HOME FAMILY CHILD CARE

Section 1 - Purpose

a. Southwest Health and Human Services has the authority to act on variance requests with the following **exceptions**: (Minnesota Statute 245A.16)

1. Dual licensure
2. Adult foster care capacity
3. Adult foster care minimum age
4. Child foster care maximum age
5. Disqualification factor/s
6. Presence of a caregiver in the residence during normal sleep hours (adult foster care)
7. Variations to requirements relating to chemical use problems of a license holder or a household member of a license holder
8. Variations to section 245A.53 regarding the total number of hours a substitute provider may be present per year in a licensed child care home.

b. These variance requests will be sent to DHS-Family Systems along with an agency recommendation for a decision.

b. The 2020 Legislature made changes to variance requests by licensed family child care programs that go into effect January 1, 2021. The first change is that counties must use a uniform application form developed by the commissioner for variance requests by family child care license holders. The second change directs counties to publish their policies and criteria for issuing variances on their public websites and also distribute those policies to all family child care license holders annually.

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**SOUTHWEST HEALTH AND HUMAN SERVICES
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Section 2 – Family Child Care Variance Policies & Guidelines

- a. Effective 1/01/2021, variance requests for family child care programs must be made on the form developed by the Commissioner of the Dept. of Human Services.

- b. The goal of Southwest Health and Human Service’s variance policy is to meet the needs of parents and providers, while keeping the safety of the children as the first priority. The following guidelines will apply to variances granted for family and group child care age distribution and capacity (MN Statute 9502.0367):
 - 1) As part of the request, the provider will be asked to describe additional measures the provider will take to ensure the safety, health, and care of daycare children.
 - 2) If a variance can be avoided by changing a provider’s license class, changing the class of the license will be encouraged as an alternative to the variance.
 - 3) More than one variance may be granted in a 12-month period, but the total number of variance days cannot exceed three months of full time care in a 12 month time frame. Variances will not be overlapping or “stacked”. The frequency of variance requests will be taken into consideration.
 - 4) A provider will not be granted a variance until he/she has been licensed for at least 12 months.
 - 5) A variance will not be granted to care for three infants unless a second adult caregiver is present.
 - 6) All variances must be posted in an area where they are visible to parents and others visiting the day care.
 - 7) When a granted variance is not used, or partly used, the provider should notify the licensor. This is important since the duration of approved variances in a year’s time is tracked.

- c. No variance is automatic; a provider shall not enroll a child without first receiving variance approval if the addition of the child will exceed the provider’s licensed capacity.

- d. If a provider’s enrollment/attendance exceeds the license holder’s allowable enrollment prior to receiving variance approval, a provider will be issued a correction order. A correction order may have a negative impact on a provider’s license.

- e. New variance requests will be reviewed at least weekly.

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f. An approved variance is valid only for the specific child(ren) and their scheduled hours listed on the variance request.

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g. A variance will generally be denied if one or more of the following conditions apply:

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- 1) Children are enrolled prior to the variance request (including being over capacity on a visit).
- 2) The length of the variance request exceeds three months of full time care.
- 3) The provider has been licensed less than twelve months.
- 4) The provider has a correction order item that has not been brought into compliance.
- 5) The provider has a pending negative licensing recommendation.
- 6) The provider has a current negative licensing action.
- 7) The provider is under a complaint or maltreatment investigation.
- 8) The provider has violated MN Rules for family child care regarding supervision, corporal punishment, maltreatment or other relevant, significant health or safety factors which are deemed serious or chronic in nature.

h. A provider should contact his/her licensor to discuss any unique situations that may warrant an "emergency" variance, such as a pandemic, provider illness/emergency, snow storm, natural disaster, school closing, etc. In these unique situations, verbal approval of a variance may be granted, if it is followed by a written variance request in a timely manner.

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Southwest Health and Human Services reserves the right to make exceptions/ additions to these guidelines. Variances outside of the guidelines require the approval of the unit supervisor or division director.

Guidelines

Provider is operating with a Class C1 License: The agency will consider a variance for up to four children in the infant/toddler group. If four infants/toddlers are present, the provider may not exceed his/her allowable total number under school age and total capacity.

Provider is operating with a Class C1 License: The agency will consider a variance for up to one additional child in the total under kindergarten and one child over total capacity OR will consider a variance up to two school-agers over total capacity if a provider is in compliance with the infant/toddler group. No variance will be approved when a provider exceeds nine children under kindergarten or more than twelve total capacity.

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Provider is operating with a Class C2 License: The agency will consider a variance for up to three total children in the infant/toddler age range. If three infants/toddlers are present, the provider may not exceed his/her allowable total number under school age and total capacity.

Provider is operating with a Class C2 License: The agency will consider a variance up to one additional child in the total under kindergarten and one child over total capacity OR will consider approval of a variance up to two school-agers over total capacity if a provider is in compliance with the infant/toddler group. A variance will not be approved for more than eleven under school age or more than fourteen total capacity.

Provider is operating with a Class C3 License with two adults present: The agency will consider a variance up to one additional child in the infant/toddler group and one additional child in the total under kindergarten. If the provider is in compliance with the infant/toddler group, the agency will consider a variance up to two children under school age over total capacity. No variance can be issued for over fourteen (14) children, due to both Fire Marshal and DHS licensing regulations.

Provider is caring for a newborn (birth to 6 weeks): The provider must request a variance to care for a child under six weeks of age, unless the newborn is the provider's own child. If the newborn is not the provider's own child, the agency would only consider approval of a newborn infant variance if the newborn is the only infant in care with no more than 2 other children in care OR provider will have a second adult caregiver present for as long as the newborn is in care (at least until it reaches six weeks of age). In order to do this, the provider will not have any other variances in effect if a newborn is placed in their care.

A provider may discuss any multiple birth situations (twins/triplets) with his/her licensor.

All providers currently running under a variance approved prior to 1/01/2021 will be allowed to continue with the variance that has already been granted until the variance expires.

Section 2 – Other Variance Requests

- a. ~~Providers will complete the variance request form (FCC#022 or FC#034) providing all relevant information. If all relevant information is contained in the variance request, the licensing worker will review the request and make a recommendation for granting, revising, or denying the request. All variance requests will be reviewed at least monthly by the licensing workers and the social services supervisor or the director or designee in the absence of the social services supervisor. This committee will approve or deny the~~

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~~request. The licensing worker will notify the provider in writing regarding the decision of the variance committee.~~

~~b. If the variance is lacking information or the variance committee is unable to understand the provider's request, the committee may ask that the provider present their request~~

~~with more detailed information. All variances are reviewed on the safety issues and quality of care provided for children and/or vulnerable adults.~~

~~c. Southwest Health and Human Services will not allow a Family Child Care provider to exceed 14 children per Department of Human Services and Fire Marshal rules.~~

Agency Forms Regarding This Policy:

~~FCC #022 – Family Child Care Variance Request Form~~

~~FCC #032 – Variance for Bleach Alternative~~

~~FC #034 – Request for Variance Foster Care~~

~~No form # – Variance for use of bottled water as an alternative to well water~~

**SOUTHWEST HEALTH AND HUMAN SERVICES
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EFFECTIVE DATE: 05/16/12

REVISION DATE: 06/17/15; 11/16/16; 3/21/18; 7/17/19; 12/16/2020

AUTHORITY: Southwest Health and Human Services – Human Services Board

MN Statute 260B.331/MN Statute 260C.331

MN Statute 252.27

MN Rules Parts 9550.6200 to 9550.6240

--- FEES: 24-HOUR OUT-OF-HOME CARE ---
--- COLLECTION AND WAIVE OR REDUCE FEES ---

Section 1 - Purpose

- a. This policy governs the assessment and collection of fees from children and parents/guardians of children in 24-hour out-of-home care.

Section 2 - Dependent/neglected children or delinquent youth with no long-term disability

a. Income Determination

- The out-of-home placement fee shall be based on the net income of either birth or adoptive parents (if child is not on adoption subsidy) as well as the child's monthly net income. Net income shall be determined by the Income Maintenance Unit using the income computation section of form Elig #102.
- When it is determined that a fee is needed, the minimum fee charged shall be \$10.00 per month. No fee shall be imposed when computations result in a net fee less than this amount.
- Removal homes receiving MFIP – cash portion, GA, or MSA will not be charged a fee. A child's SSI payment is considered monthly income. Those removal homes receiving only Food Support or MA will be charged a fee based on income.
- Fees are in addition to insurance collections; however, the insurance coverage, the child fee, and the parent/guardian fee combined cannot exceed the total cost that Southwest Health and Human Services (SWHHS) incurs for placement.
- The payment of fees does not exclude the parent's/guardian's responsibility for medical coverage of the child.
- All fees shall begin on the date of placement. The placing worker shall refer to the

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Placement Checklist for additional steps related to the referring of the case for fee determination.

- Wage verification is requested from the removal home parent(s) and if not provided, the agency will charge the family the total cost of placement for the child. Also, the family will be notified that the agency will not go back more than 90 days to reassess a parental fee when information is not provided in a timely manner as requested.

b. Children under Adoption Assistance

- For children receiving Northstar or Adoption Assistance, no parental fee based on the parental income will be charged. If during placement the adoptive family continues to receive the Adoption Assistance. SWHHS will charge the family the total amount of Adoption Assistance which is being received. Any reductions from the Adoption Assistance for personal needs must be approved by the social worker.
- For children whose Adoption Assistance payments end(ed) before or while in placement determine a parent fee for the adoptive parents following Section 2.d The Custodial Parent's Fee (in addition to any child fee.) of this policy.

c. The Child's or Dependent Adult's Fee

- The child's fee is the full amount of his/her unearned income, such as social security, SSI, trusts, investments, veteran's benefits, child support, insurance, adoption subsidy, etc., less the determined personal needs allowance. Parents/guardians will be responsible for forwarding these benefits to SWHHS, even if DHS determines the fee. If the above payments are not kept current, then redirection to SWHHS will be required. When the child turns 18 and is still in placement, that dependent adult's fee continues to be the full amount of his/her unearned income. An 18 year-old in placement needs to meet the MFIP definition of a dependent child for the out-of-home placement fee to continue. For dependent adults, a 30 day break in placement will result in the ending of the parental fee.

d. The Custodial Parent's Fee (in addition to any child fee)

- The custodial parental/removal home's fee shall be determined using the SWHHS Procedures for Determining Parent Fees for Out-of-Home Placements of Juveniles. (Procedure #39)

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PARENTAL FEE TABLE

Monthly Net Income	Number of Children in the Home						
	1	2	3	4	5	6	7
\$550 and below	---	---	No Fee	---	---	---	---
\$551 to \$600	16%	19%	22%	25%	28%	30%	32%
\$601 to \$650	17%	21%	24%	27%	29%	32%	34%
\$651 to \$700	18%	22%	25%	28%	31%	34%	36%
\$701 to \$750	19%	23%	27%	30%	33%	36%	38%
\$751 to \$800	20%	24%	28%	31%	35%	38%	40%
\$801 to \$850	21%	25%	29%	33%	36%	40%	42%
\$851 to \$900	22%	27%	31%	34%	38%	41%	44%
\$901 to \$950	23%	28%	32%	36%	40%	43%	46%
\$951 to \$1000	24%	29%	34%	38%	41%	45%	48%
\$1001 to \$5000	25%	30%	35%	39%	43%	47%	50%

e. The Non-Custodial Parent's Fee

- The amount of child support assigned to the non-custodial parent shall be the non-custodial parent's fee when the child is in an out-of-home placement. If it is determined that the non-custodial parent's assigned child support does not follow Minnesota State Statute Chapter 518A and the custodial parent is receiving public assistance, the case may be referred to the Child Support Enforcement Unit for modification of child support. It is the custodial parent's responsibility to see that the child support payments are passed through to SWHHS.
- When the child(ren) did not live with a parent during the eligibility month or at any time during the six months previous to the eligibility month, do not determine a parental fee against either parent. In these circumstances child support will be established for each parent.

f. Placements Related to 72 Hour Holds

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- When a child is placed on a 72 hour hold in a hospital setting the cost of such hold shall be billed to the parent's/guardian's medical insurance whenever possible. If there is no insurance or medical assistance, the family should apply for medical assistance. If there is no insurance or medical assistance, the family will be billed for 100% of the cost of the care. The family can appeal to have their fee reduced.
- When the hold involves a shelter, foster care home, or juvenile detention center, SWHHS shall pay for placement costs and bill the parents/guardian 100% of the cost of care. The fee will be waived for removal homes on MFIP, GA, SSI, or MSA and families have the right to appeal the fee.
- When a child remains in placement in foster care after a 72 hour hold and has a placement under 30 days, there will be a charge of \$10 a day for up to 30 days plus the full 72 hour cost of care.
- When a child remains in placement such as shelter care, group home, correctional facility, residential treatment, or crisis stabilization, after a 72 hour hold and/or has a placement under 30 days, SWHHS will bill the full cost of care while on the hold and then there will be a charge of \$25 per day up to 30 days.
- When a child is placed by the court under a detention hold, A&D (Apprehend and Detain), or warrant; SWHHS shall pay for placement costs when appropriate and bill the parents/guardian 100% of cost that SWHHS expended for the first 72 hours (3 days) of the placement and then there will be a charge of \$25 per day up to 30 days.
- After placement for 30 days, a parental fee will be determined based on the Procedures for Determining Parental Fees for Out of Home Placement of Juveniles. (Procedure #39)

g. Voluntary Placement for Crisis Stabilization

- If a family voluntarily places a child for crisis stabilization, the family will be assessed a fee of 100% of the cost of care. The family can request that the fee be reduced.

h. Hardship

- The parents/guardians have the option of paying a minimum of 50% of the assessed monthly fee on an extended term, if it can be demonstrated that the fee would create a

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hardship for the family.

- SWHHS has the authority to waive fees for social services. If a client requests a reconsideration, the Eligibility Worker or Social Worker shall obtain a written request from the client with the reason for the waiver request, including household expenses and why the fees pose a hardship. The assigned Social Worker shall convene the Fee Review Committee, which shall be comprised of that worker's direct supervisor, the involved Eligibility Worker, that worker's direct supervisor, Collections Officer, that worker's direct supervisor, and the Social Service Division Director. The panel shall review the written request and other collateral information possessed by the Social Worker and Eligibility Worker. The panel shall issue a finding on the client's request and the Social Services Supervisor will notify the client in writing, with a copy to the Collections Officer. The record of this meeting shall be placed in the Income Maintenance case record and Social Services case record. The client may appeal the panel's findings to the DHS Appeals Office, or, if the fee is for the placement of a child under a CHIPS, the client may appeal to the court of jurisdiction. If a client is allowed a hardship waiver, the waiver shall be reviewed annually.

i. Respite Care (private pay or care provided outside of a CP/CW need or risk)

- When a child is placed in 24-hour out-of-home respite care, the parent/guardian fee will be the monthly cost divided by 30 and multiplied by the number of days per month the child is in care. Any part of a day will be counted as a full day. Income will be determined based on the declared income and expenses as set out by SWHHS. No expenses are to be used to reduce the fee.

j. Parental Fee Reviews

- The parental/guardian fee amount must be reviewed at least every 12 months; when there is a change in household size; and when there is a change in income from one month to another in excess of ten percent.
- SWHHS shall mail a written notice 30 days in advance of the effective date of a change in the parental/guardian fee amount. A reduction in the parental/guardian fee amount is effective in the month that the parent/guardian verifies a reduction in income or change in household size.
- If SWHHS becomes aware of unreported income or of an unreported increase in current income in excess of 10 percent AND this unreported income would result in an increase to the parental/guardian fee amount, the fee amount is redetermined and effective in the month the change occurred.

Section 3 - Children who are receiving other case management services through SWHHS who

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require out of home placement

a. Referrals to DHS for Parental Fee

- DHS collects parental fees for children with certain types of MA eligibility or living arrangements. Refer cases to DHS for children who are eligible for MA and meet any of the following:
 - Eligible through the TEFRA option.
 - Children who receive services under one or more of the following waiver programs:
 - Community Alternatives for Chronically Ill Individuals (CAC).
 - Community Alternatives for Disabled Individuals (CADI).
 - Developmental Disabilities (DD).
 - Brain Injury (BI).
 - Are in 24-hour out-of-home placement: ICF/DDs and Rule 5 facilities.

b. Procedure

- Notify parents that their liability for parental fees begin the first full month in which MA is effective or waiver services are received.
- Give them a copy of the *Important Notice and Parental Fee Worksheet* (DHS-2977).
Note: Parents may be liable for fees through the month of the child's 18th birthday.
- MMIS must be updated in order for the State to bill and collect a parental fee. Update RLVA as follows:
 - For DD, CAC and CADI waivers - the 'U' code should be ended with a date of the day before services are needed. The SWKR provides the *Request for Payment of Long Term Care Services* (DHS 3543A) before the 'U' code can be changed.
 - RULE 5 - end the 'Living Arrangement' code '80' the day of placement and enter a new span with the same date. The 'Living Arrangement' code will be '54' then enter the corresponding NPI number of the facility in the 'Out of Home' column. This code is provided by the SWKR.
 - Submit a completed *County Parental Fee Referral* form to DHS (DHS-2982).

Section 4 - Collections

- a. After the case has been referred to the Collections Officer, the parent/guardian will be billed on a monthly basis through the Agency's Collections System.
- b. If an account is over 90 days delinquent, with no agreed upon payment plan, the

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Collections Officer may initiate additional collection efforts.

- c. Quarterly Parental Fee Meetings are held with all key stakeholders within the agency and a review of accounts is completed to confirm billing amount, delinquency and other necessary details surrounding the billing of fees.
- d. When a family receiving Adoption Assistance fails to transfer the Adoption Assistance to SWHHS, the agency will contact the Minnesota Department of Human Services Adoption Assistance Unit for further assistance for collection.

Agency Forms Regarding This Policy:

IM#102 – Foster Care Fee Calc-Parental Fee Determination: Children in Out-of-Home Placement Procedure for Determining parental Fees for out of Home Placement of Juveniles



2020 Public Health Statistics

	WIC	Family Home Visiting	MnChoices PCA Assessments	Managed Care	Dental Varnish	Refugee Health	LTBI Medication Distribution	Water Tests	FPL Inspections	Immun	Car Seats
'12 Avg	1857	48	15	187	81						
'13 Avg	2302	37	21	211	90						
'14 Avg	2228	60	25	225	112	6	30				
'15 Avg	2259	86	23	238	112	12	36				
'16 Avg	2313	52	22	265	97	12	27				
'17 Avg	2217	47	22	290	56	9	25				
'18 Avg	2151	50	22	324	23	4	18	128	48	57	19
'19 Avg	2018	31	10	246	18	4	10	131	47	63	20

	WIC	Family Home Visiting	MnChoices PCA Assessments	Managed Care	Dental Varnish	Refugee Health	LTBI Medication Distribution	Water Tests	FPL Inspections	Imm	Car Seats
11/19	1996	15	7	210	13	1	6	108	32	96	14
12/19	1976	20	5	207	19	8	13	97	42	68	16
1/20	1984	19	11	242	12	0	14	98	45	53	6
2/20	1971	34	7	214	7	5	19	87	40	38	19
3/20	2017	29*	12	217	4	0	1	99	33	10	12
4/20	2032	22*	9*	205*	0	0	7	178	12	0	0
5/20	2029	16*	5*	268*	0	0	6	115	32	0	1
6/20	2013	20*	8*	269*	0	0	11	145	30	0	6
7/20	2018	27*	6*	242*	0	0	3	144	55	33	9
8/20	2023	15*	14*	217*	0	0	8	155	46	28	7
9/20	1987	9*	4	217*	0	2	3	130	49	15	9
10/20	2010	12*	7	248*	0	0	1	165	37	35	10
11/20		10*	6	158*	0	0	1	124	11	16	8
12/20											
1/21											

*Includes telehealth visits



Position Request Form

SECTION 1: Process

1. Supervisors will complete the internal position justification form and submit to their Division Director.
2. Division Director completes position request form outlining their justification for requesting a new or open position and submits to Director.
3. Executive Team will review requests. Director will make final recommendations to the SWHHS Governing Board.

SECTION 2: New Position Information

New Position Title: Social Services Supervisors (2)

Division/Unit: Social Services

New Position Replacement Permanent Temporary Promotion

Is Funding Budgeted for This Position? Yes, Budgeted No, Not Budgeted

Desired hire date: Jan 18, 2020

FTE Requested: yes

*Attached additional sheets if necessary.

1. What will the essential functions performed by this position include?

The main components of the position includes supervision of the staff and programs of disability services so that the services function within federal, state, county laws and rule, and agency policy in meeting customers' needs. Social Service Supervisors direct the operations of assigned programs. This includes the programs areas of CAC, CADI, BI, DD plus some supervision of programs such as Mn Choices and CDCS. Staff are located in 5 of our counties; clients are located in all 6 counties and sometimes other parts of the state.

2. Why are you recommending this position be authorized?

Previously, supervision of all these programs areas and assigned staff were covered by 2 supervisors. When one of them retired in January 2019, Jenifer agreed to take on all these programs and the staff as she had many years of experience both in the programs and in supervision. Jenifer plans to retire at the end of January 2021. Due to the number of programs and the number of staff in multiple locations, we are recommending that 2 supervisors be hired. Supervision of 18 staff is too much for one supervisor given the many duties included in supervision and program oversight.

3. What alternatives to hiring a new position have been considered?

Jenifer currently has one lead worker. We considered hiring additional lead workers to assist with the duties; although this would certainly be helpful, many of the duties of supervision cannot be conducted by lead workers.

4. Please indicate how this position will be funded? Check all that apply.

100% Levy

Part Levy/Part Grant or Reimbursement

100% Grant or Reimbursement

Other: [Click or tap here to enter text.](#)

There may be times when the supervisors can receive case management revenue but this is not the norm. It is possible for these positions to carry a few cases in order to bring in some revenue.

We expected Jenifer to retire at some point in 2021 so we included 2 supervisor positions in the 2021 budget.

Salary Range for this position: \$78,470-\$128,745 (salary, PERA, FICA, and insurance contribution)

5. What new or additional funding would support this position? Please identify any NEW dollars available to support this request. Grant resources already committed to existing expenditures should not be listed. Please be detailed.

What is the ROI? We will continue to provide services that meet standards and clients receive the needed services in our communities.

6. What would the impact be to your customers and the community if this position is not authorized?

Rules and expectations are many for all of these program areas. Supervision requires a great deal of consultation, case oversight, and problem solving in order to meet client needs while staying within guidelines. Supervisors work closely with providers and DHS to ensure services are being provided in a productive manner. Jenifer was essentially spread too thin; she was able to complete all job tasks but it became very difficult to train new workers, address performance issues and audit requirements, and deal with the daily tasks of supervision. If one or both of these positions are not filled, it would potentially negatively impact community partners and clients in that there may be delays, lack of oversight, and we would lose program integrity. Staff may also be negatively impacted due to less supervision & inadequate training to do their jobs.

7. How does this position support the core mission of your department?

These positions support the mission of the agency by supervising staff and programs which strengthen individuals, families, and communities by providing quality services in a respectful, caring, and cost effective manner.

SECTION 3: Signatures

Completed by: Cindy Nelson **APPROVED** Date: **December 7, 2020**
Division Director Signature: *By Cindy Nelson at 9:22 am, Dec 07, 2020* Date: _____
Director Signature: **APPROVED** *By Beth Wilms at 9:51 am, Dec 07, 2020* Date: _____



Position Request Form

SECTION 1: Process

1. Supervisors will complete the internal position justification form and submit to their Division Director.
2. Division Director completes position request form outlining their justification for requesting a new or open position and submits to Director.
3. Executive Team will review requests. Director will make final recommendations to the SWHHS Governing Board.

SECTION 2: New Position Information

New Position Title: Public Health Nurse

Division/Unit: Public Health

New Position Replacement Permanent Temporary Promotion

Is Funding Budgeted for This Position? Yes, Budgeted No, Not Budgeted

Desired hire date: immediate

FTE Requested: 1.0

1. What will the essential functions performed by this position include?

The position will perform the grant duties for the Women, Infants, Children (WIC), Child & Teen Check-up (C&TC), Early Hearing Detection and Intervention/Birth Defects, car seat distribution and Family Home Visiting in Rock County.

2. Why are you recommending this position be authorized?

Most funds will be immediate return through the grants.

SWHHS is not currently using all of the C&TC grant funds. Some required grant duties are not getting done or are not being done at the required level. We are also seeing an increase in our WIC numbers and a higher need for FHV with our most vulnerable families.

Public Health (PH) staff often work in multiple programs and when there is one staff person missing, it essentially affects the entire PH Department. Having this position will allow the other staff who are currently picking up (some) of that work to complete revenue generating work through C&TC and Family Home Visiting.

3. What alternatives to hiring a new position have been considered?

All staff time is documented in Nightingale Notes and, as a Supervisory team, we evaluated all PH programs and where staff are spending their time. After analysis, we found if PHN positions are not replaced, it is a domino effect on all other programs. Often sacrificing services and programs that have the highest return on investment.

There is extensive programmatic cross-over, it would be difficult to do one program without the other (C&TC funds part of the WIC time during clinic visits – coordinating medical/dental transportation, health/dental referrals and follow up). The integration of our PH programs is essential to ensure staff are aware of referral possibilities and for a better client services and continuity of care.

Other employees could possibly absorb parts of this position, but current staffing would not allow us to complete all of the grant duties as well as see a significant increase in staff travel and decrease revenues from other programs. In addition, other PH programs would be negatively impacted. Many of the indirects (rent, phone, maintenance contracts, etc.) that are reimbursed through grants are constant. Having less FTE's creates more of a burden on other programs. If those programs don't have the ability to absorb the additional costs, it gets paid through the Administrative budget.

4. Please indicate how this position will be funded? Check all that apply.

- 100% Levy
- Part Levy/Part Grant or Reimbursement
- 100% Grant or Reimbursement
- Other: Click or tap here to enter text.

%Federal _____ % State _____ % County 10 %Other 20 %Grant 70

Depending on when training is offered in various programs, this will fluctuate over the course of the year.

\$66,619-\$94,440 (salary, FICA, PERA and insurance contribution)

5. What new or additional funding would support this position? Please identify any NEW dollars available to support this request. Grant resources already committed to existing expenditures should not be listed. Please be detailed.

Being a replacement position, this will not bring in any new dollars, but will maintain the current funding level.

What is the ROI?

This would not be new funding, but bringing the programs back up to the previous level before the position was vacated.

Each of the programs involved in this proposal has positive health implications in our communities. Data indicates that these services reduce obesity, child protection rates, and chronic disease. They also improve pregnancy outcomes and other health outcomes in children. In general, the cost savings to the community are seen for years beyond when the service occurs.

6. What would the impact be to your customers and the community if this position is not authorized?

Less Family Home Visits would occur if the position is not replaced. Each of the programs involved in this proposal has positive health implications in our communities.

In addition to our grant requirements, we have relationships with medical providers, University of Minnesota Extension, Head Start, and several other community partners. These relationships would suffer if the position isn't filled. The work we do with providers gives those we serve the needed services and we assist the providers in capturing additional revenue.

7. How does this position support the core mission of your department?

This position aligns with our Strategic Plan and SWHHS's Community Health Improvement Plan. These preventative services improve the health of our communities.

SECTION 3: Signatures

Completed by: Carol Biren Date: _____

Division Director Signature: **APPROVED**
By carol.biren at 12:55 pm, Dec 08, 2020 Date: _____

Director Signature: **APPROVED**
By Beth Wilms at 12:58 pm, Dec 08, 2020 Date: _____

Southwest Health and Human Services

Accounting Policies and Procedures Handbook

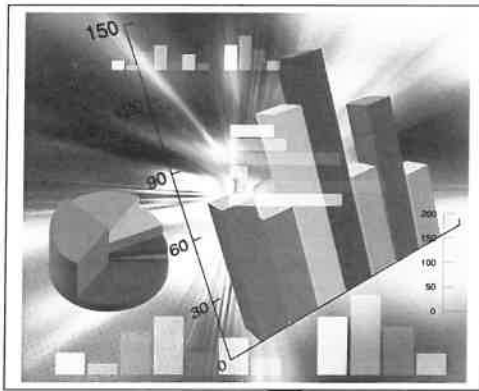


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SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The County's financial statements are prepared in accordance with Generally Accepted Accounting Principles (GAAP). The Governmental Accounting Standards Board (GASB) is responsible for establishing GAAP for state and local governments through its pronouncements (statements and interpretations). Governments are also required to follow the pronouncements of the Financial Accounting Standards Board (FASB), (when applicable) that do not conflict with or contradict GASB pronouncements.

Financial Reporting Entity

Southwest Health and Human Services was formed pursuant to Minn. Stat. § 393.01, subd. 7, (joint powers agreement), by Lincoln, Lyon, Murray, and Pipestone Counties. Southwest Health and Human Services began official operation on January 1, 2011, and performs Board, Welfare, and Public Health functions. Rock County joined Southwest Health and Human Services 1/1/12. Pipestone County Human Services and Redwood County Human Services and Public Health joined Southwest Health and Human Services on 1/1/13. Local financing is provided by the six member counties for Public Health and Human Services. The county contribution for financing is based on a per capita cost for public health. The county contribution for financing is based on a formula considering population, tax capacity, and three year average of SEAGR expenditures. The joint powers are governed by a Human Services Board, a Community Health Board, and a Governing Board. (See JPA for specifics).

Southwest Health and Human Services is governed by a twelve-member Board. In addition, there are two program boards, Human Services and Community Health. Each Board is organized with a chair, vice chair, and secretary elected at the January meeting of each year.

Basic Financial Statements

Basic financial statements include information on the Human Services' non-fiduciary activities, Nursing Services, Agency Insurance, and information on the Special Fund of Public Health and General Fund of Human Services. These statements report general activities of the General Fund and reconcile it to "Governmental Activities". Governmental activities are reported on the full accrual, economic resources basis, which recognizes all long-term assets and receivables, as well as long term-debt and obligations. Southwest Health and Human Services net position is reported in two: (1) invested in capital assets and (2) unrestricted.

The Statement of Activities demonstrates the degree to which the direct expenses of each function of the County's governmental activities are offset by program revenues.

The Balance Sheet and Statement of Revenue, Expenditures, and Changes in Fund Balance for the General Fund are presented on the modified accrual basis and report current financial resources.

Assets, Liabilities, and Net Position

Deposits and Investments

Under the direction of the Investment Committee and the Board, most cash transactions are administered by the Lyon County Auditor/Treasurer.

Receivables and Payables

The financial statements for Southwest Health and Human Services contain allowances for uncollectible accounts. The allowances are estimated based on historical collection information. Uncollectible amounts due for receivables are recognized as bad debts at the time information becomes available that indicates the collectability of a particular receivable.

Prepaid Items

Certain payments to vendors reflect costs applicable to future accounting periods and are recorded as prepaid items in both government-wide and fund financial statements.

Capital Assets

Capital assets are reported in the governmental activities column in the government-wide financial statements. Depreciation is required to be recorded as an expense at the government-wide level in the Statement of Activities. Capital assets are defined by the government as assets with an initial, individual cost of \$5,000 or more and an estimated useful life in excess of two years. Such assets are recorded at historical cost or estimated historical cost if purchased or constructed. Donated capital assets are recorded at estimated fair market value at the date of donation.

See Capital Assets section of Administrative Policy 2.

Compensated Absences

The liability for compensated absences reported in financial statements consists of unpaid, accumulated annual vacation and sick leave balances. The liability has been calculated using the vesting method, in which leave amounts for both employees who currently are eligible to receive termination payments and other employees who are expected to become eligible in the future to receive such payments upon termination are included. Compensated absences are accrued when incurred in the government-wide financial statements. A liability for these amounts is reported in the governmental funds only if they have matured, for example, as a result of employee resignations and retirements.

See Compensated Absences section of Administrative Policy 2.

Deferred Revenue

All County funds and the government-wide financial statements defer revenue for resources that have been received, but not yet earned. Governmental funds also report deferred revenue in connection with receivables for revenues not considered to be available to liquidate liabilities of the current period.

Long-Term Obligations

Long term liabilities are not reported in the fund. The General Fund reports only the liabilities expected to be financed with available, spendable financial resources. The statement of Net Position reports long term liabilities of the governmental activities.

Fund Equity

In the fund financial statements, governmental funds report reservations of fund balance for amounts that are not available for appropriation or are legally restricted by outside parties for use for a specific purpose. Designations of fund balance represent tentative management plans that are subject to change.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

FINANCIAL REPORTING

Monthly Working Trial Balance

Each month the "Treasurer's Cash Trial Balance" is printed from the IFSpI system. This report is presented to the governing Boards each month to show the financial status of the agency on a cash basis. The report properly breaks out each fund and department within the fund.

See Monthly Working Trial Balance Narrative for detailed procedures.

Chart of Accounts

The County follows COFARS (County Financial Accounting and Reporting Standards) with their chart of accounts. The chart of accounts are utilized to track revenue and expense in the appropriate fund, department and program. The accounts are also mapped to the proper line item in the working trial balance.

See Chart of Accounts Narrative for detailed procedures.

PUBLIC PURPOSE DOCTRINE

Public Funds

According to the interpretation and understanding of state law described as the "public purpose doctrine", public funds may be spent only if the purpose is a public one for which tax money (and all funds) may be used, there is authority to make sure the expenditure, and the use is genuine.

There is not a precise definition of what constitutes a "public purpose". However, the courts have interpreted it to mean "such an activity as will serve as a benefit to the community as a body and, at the same time, is directly related to the functions of government."

A declaration must be signed by vendors or other claimants, and employees and elected officials for reimbursable expenses, as included on the claim forms or on the check endorsement, which states:

On claim form:

I declare under the penalties of law that this account, claim or demand is just and correct and that no part of it has been paid.

(Signature of Claimant)

Check Endorsement:

The undersigned payee, in endorsing this warrant check declares that the same is received in payment of a just and correct claim against Southwest Health and Human Services.

County Expenditures

Commentary by State Auditor Patricia Anderson

County officers and employees often ask the State Auditor's Office whether certain expenditures are allowed by law. In order to assist you in addressing such questions, this article will present some of the basic standards to consider when you are faced with an expenditure request.

First, consider the nature of a county's authority to expend funds. As a public entity, a county must have statutory or charter authority to make an expenditure. Such authority may be either expressly enumerated in a statute or in the county's charter, or "implied as necessary in aid of those powers which have been expressly conferred." *Mangold Midwest Co. v. Village of Richfield*, 143 N.W.2d 813, 820 (Minn. 1966). This is a county's main limitation in spending money. Counties can always ask for more authority from the legislature.

Second, make sure each expenditure is for a public purpose. The public purpose requirement originates in the Minnesota Constitution, which states that "taxes.....shall be levied and collected for public purposes." The Minnesota Supreme Court has explained that "public purpose" generally means "such an activity as will serve as a benefit to the community as a body and which, at the same time, is directly related to the functions of government" *Visina v. Freeman*, 89 N.W.2d 635

(1958). It has also stated that public funds may be used by a public entity if the purpose is a public one for which tax money may be used, there is authority to make the expenditure, and the use is genuine. *Tousley v. Leach*, 180 Minn. 293, 230 N.W. 788 (1930). Generally, the main point is that a county's expenditure must ultimately benefit the county's citizens as a whole, although various citizens may benefit more or less directly.

Many of the specific questions we receive involve requests for donations by individuals, non-profit entities, charities, etc. Such donations are not permitted unless they are based on express statutory authority. The assumption is that a gift of public funds to an individual or private entity necessarily serves a private, rather than a public purpose. Attorney General opinions have stated that public entities have no authority to donate funds, even to groups like 4-H clubs, the Red Cross and the Boy Scouts. If a group is going to perform a function that the county has authority to perform, the county should set out the arrangement in a properly executed contract.

Counties, unlike private employers, must remember that public funds cannot be given away to public employees or officials as gifts. Public funds should not be used to purchase plants, flowers, birthday cakes, etc. for officers, employees or others. Likewise, unless express authority provides otherwise, employee social functions may not be paid for with public funds. Of course employees can informally pool their own money to purchase such things for each other. The Attorney General has stated that municipal corporations may not imply authority to appropriate public revenue for celebrations, entertainments, etc., or fund a Christmas party for employees. However, counties are expressly authorized to establish and expend funds for preventive health and employee recognition services. M.S. § 15.46 (2002).

The State Auditor's Office hopes that the information in this article helps you as you make decisions regarding county expenditures. If you have questions, feel free to contact the State Auditor's Legal Division at (651) 296-2551.

PAYMENT OF CLAIMS AND OTHER OBLIGATIONS

County Disbursement

Claims for payment are entered into the IFSpi System with the assigned budget line item code. The warrant register is reviewed and signed off by the Director, Deputy Director, Social Services Division Director, or Public Health Division Director. Warrants are processed weekly and are approved at the board meetings. The Board reviews monthly, all transactions issued from the previous Board meeting through the current Board meeting. There will not be any warrants paid that are under \$1.00, as it is not cost effective for the agency to do so.

See Check Processing Narratives for detailed procedures.

Accounts Payable

Payables are only recorded at year end. Invoices paid in January and February are reviewed and coded with an accrual code of AP (Accounts Payable) or DTG (Due to other Governments) in SSIS and IFSpi indicating the transaction as a payable.

See Accrual Codes Narratives for detailed procedures.

Retention Policy

Original claims with invoices, receipts, and other attachments are kept according to the General Record Retention Schedule (See current DHS Bulletin for Record Retention Schedule). SWHHS keeps current year plus 6 audited years in storage and/or imaging system.

W-9 Forms Required

A W-9 form is required to be completed by each new vendor whose payment qualifies for a 1099, where the Tax ID number or Social Security Number is required. See example of W-9 form located on the IRS website.

See Vendors Narratives for detailed procedures.

Replacement of Lost, Stolen or Destroyed Checks

If a request is received for replacement of a lost, stolen or destroyed check, the payee or vendor must complete and sign the "Lost/Stolen Warrant Affidavit" form. The signature must be notarized. There is a 10 calendar day required waiting period. The on-line banking system is checked for verification that the original check has not been cashed. A replacement check is then issued. If the check is a minimal amount in relation to the stop payment charge, a stop payment may not be requested. Fiscal Manager makes this decision.

Unclaimed Warrants / Funds

Routinely, the Lyon County Auditor/Treasurer's office will advise SWHHS of the outstanding checks that have not been cashed within a minimum of 6 months from the date of issuance. The "Lost/Stolen Warrant Affidavit" form is sent out to all vendors. Minnesota Statute 345.31 is followed for the unclaimed funds procedures. The Lyon County Auditor/Treasurer cancels the warrant(s) through Board action. Funds are then transferred to the MN Dept. of Commerce, Unclaimed Property Program each October.

GASB 34 Compliance Related and Procurement Policies

The following policies are presented and adopted in response to the accounting and reporting requirements of the Governmental Accounting Standards Board (GASB) Pronouncement 34 and later pronouncements. These policies provide the foundation for the collection and reporting of County financial information in accordance with these pronouncements.

"Fund Statements" refers to the individual fund year-end financial statements. These are essentially the same as previously published statements.

"Government Wide Statements" refers to the new Statement of Net Position, Statement of Activities, and the reconciliation required under GASB 34 reporting standards.

Budget

The SWHHS Budget is adopted annually by the SWHHS Joint Governing Board. The contribution by counties is determined at the August Board meeting and the final budget is approved at the November or December Board meeting.

Budget Level for Legal Control

Budget control is designated at the department level and administrative level. The use of budget dollars across line items within a department are at the discretion of the department management/administration, as long as federal, state, or other funding source use and reporting requirements are met.

See Budget Policy section of Administrative Policy 2.

See Budget Process Narrative for detailed procedures.

Use of Restricted Assets

Unassigned resources will only be used to pay restricted liabilities after appropriate restricted resources have been depleted, or the SWHHS Joint Governing Board takes specific action to appropriate those unassigned resources.

Identifying Special or Extraordinary Items

Items reported as Extraordinary Items are transactions that are both unusual in nature and infrequent in occurrence and are the result of events that may be beyond the control of SWHHS management.

Special Items are either unusual in nature or infrequent in occurrence and are under the control of SWHHS management.

Revenue Recognition in Governmental Fund Statements

Governmental Fund Statements, including the General Fund, are presented using modified accrual accounting. In order for a receivable to be recognized as a revenue within these statements, it must be considered available. The county considers a revenue available if it is collectable within 60 days of the date of the financial statement.

Procurement

Southwest Health and Human Services will procure the goods and services requested to meet its needs and fulfill its mission. The agency will procure goods and services as economically as

feasible, in a manner that is efficient, straightforward, and equitable and which complies with all federal, state, and local laws and regulations and all other agency policies.

See Procurement Policy section 9 of Administrative Policy 2.

GASB 68

In June 2012, the Governmental Accounting Standards Board (GASB) issued new pension accounting and financial reporting requirements. GASB Statement No. 68 is effective for financial statements for fiscal periods beginning after June 15, 2014. The GASB is the authoritative standard-setting body for governmental accounting principles. The new requirements fundamentally change the way state and local governments and school districts account for public pension liabilities and expenses.

Governments will now report their proportionate share of PERA's unfunded pension liability, referred to as the net pension liability or NPL, on their government-wide financial statements. The NPL is the difference between the present value of future pensions benefit payments to employees and the amount of plan assets currently available to pay the future pension benefits. PERA will allocate the NPL to participating employers. PERA will calculate each employer's proportionate share of the NPL based on the employer's contributions to the pension plan as a percentage of the total of all employer's contributions to the plan.

Pension expenses will be equal to the change in the NPL from the prior year to the current year (with some adjustments for deferred amounts). Pension expense will be calculate by PERA's actuary, and similar to the allocation of the NPL, PERA will allocate pension expense and deferred amounts to participating employers each year.

Employers will include fairly extensive pension footnote disclosures and pension-related schedules as Required Supplementary Information. The GASB believes the additional pension information will better inform financial statement users how the pension liability changes over time and what economic events and assumptions impacted the changes in the liability.

It is important to note the NPL will not impact the fund balance of governmental operating funds. The new accounting standards require that the NPL only be reported on the government-wide financial statements, which are prepared on the accrual basis.

Governments will continue to pay off the unfunded pension liabilities in the same way that they always have. The timing of when pension plans will be funded does not change as a result of the new accounting and financial reporting requirements. They will not be solely responsible for paying off those liabilities. Employers, employees, and retirees all share the responsibility to pay off unfunded pension liabilities. Investment earnings on contributions fund the majority of pension benefits in Minnesota.

Investment Policy

It is the intent of this policy to define and standardize procedures to be used in the investment of Southwest Health and Human Services funds. This policy shall apply to all financial assets of the agency. Any new funds created by the Southwest Health and Human Services Joint Governing Board shall be bound by this policy unless specifically exempted by the Southwest Health and Human Services Joint Governing Board through resolution. These funds are accounted for in the agency's annual financial report and include General Revenue Funds.

All investments by SWHHS will take into consideration investment objectives, ethics and conflict of interest, standards of prudence, delegation of authority and internal controls, reporting, authorized investment institutions and dealers, competitive selection of investment instruments and authorized investments and portfolio composition.

See Administrative Policy 7.

ELECTRONIC FUNDS TRANSFER POLICY

Minnesota Statute 385.071 states "...the county board shall establish policies and procedures for investment and expenditure transactions via electronic funds transfer."

To ensure the safety of county funds through controlling the electronic flow of these funds. The SWHHS Board of Commissioners delegates the authority to make electronic fund transfers to the Lyon County Auditor/Treasurer as SWHHS's fiscal agent.

Minnesota Statute 471.38 states "A local government may make an electronic funds transfer..."

In order for employee reimbursements to be paid via EFT the employees are to complete the AG #026 form and submit it to accounting along with a copy of a voided check.

Other vendors are also encouraged, but not required to complete and submit to accounting a direct deposit authorization form along with a voided check.

All EFT's are signed off on by the authorized signors which are designated annually. EFT's are authorized along with the warrants weekly and can be identified on the reports provided to the board at the monthly meetings. See check processing narrative.

REVENUES

According to M.S. §385.05 Receipt and Payment of Money, "The county treasurer shall receive all money directed by law to be paid to the treasurer and pay them out only on the order of the proper authority."

The Lyon County Auditor/Treasurer is the custodian of all receipts and revenue. SWHHS prepares all receipts. Actual income should be credited to budgeted revenue line items. Accounts and budget

line items are setup according to COFARS (State Auditor "County Financial Accounting and Reporting Standards") requirements and GASB34 Reporting. See the COFARS manual for a more detailed explanation.

Reimbursements for current year expenses should be credited to an expenditure line item in a budget. If the reimbursement is received in a new fiscal year, it will be credited to an income line item. There may be exceptions according to State rules and regulations.

See General Receipting and Recording Narrative for detailed procedures.

Classification of Program Revenues

Program revenues are revenues that apply directly to a program from revenue sources, not including tax collections. Program revenues include charges for services applicable to the program, specific grants, allocations and contributions to the program, and earnings of endowments or investments specifically restricted to that program. Those revenues not designated by rule, statute, or policy to a program, are considered General Revenues to SWHHS.

Other Acquisitions

Donations of property and goods to SWHHS must first be approved by the SWHHS Joint Governing Board as per the MN Statue 465.03. "Any city, county, school district or town may accept a grant or devise of real or personal property and maintain such property for the benefit of its citizens in accordance with the terms prescribed by the donor. Nothing herein shall authorize such acceptance or use for religious or sectarian purposes. Every such acceptance shall be by resolution of the governing body adopted by a two-thirds majority of its members, expressing such terms in full."

Accounts Receivable

Billing customers for services provided is performed by the accounting or collections department depending on the service. Second notices or reminders are sent if payments are not received within a reasonable period.

During January and February, any payments received for those outstanding invoices must be marked as Accounts Receivable.

Receivables are set up for year-end accrual entries. Receivables are set up just like regular cash receipts, but with an added step.

Receipts received in January and February for any prior year are coded in IFSpi with an accrual code of AR (Accounts Receivable) or DFG (Due from other Governments) in IFSpi indicating the transaction as a receivable. It is the Accounting Technicians' responsibility to flag receivables. The Fiscal Manager and Fiscal Officer reviews all receivables.

See Accrual Codes Narrative for detailed procedures.

Grants Accounting

All grant applications must be approved by the SWHHS Governing Board. Accounts are setup using COFARS for the correct Local, State or Federal grant category for income and expenses. The necessary information needed for financial reporting is included.

NSF Checks

The banks automatically return NSF checks to SWHHS after 2 attempts. The Lyon County Auditor/Treasurer is advised by SWHHS when documentation is received from the bank and has been verified via the online banking system. Once notified, SWHHS will contact the payer directly when possible, to make the check good.

Uniform Grant Reporting

According to M.S. §200.331 Requirements for pass-through entities, all pass-through entities of federal funds must ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the following information at the time of the subaward and if any of these data elements change, include the changes in subsequent subaward modification. When some of this information is not available, the pass-through entity must provide the best information available to describe the Federal award and subaward. Required information includes:

1. Federal Award Identification.
2. All requirements imposed by the pass-through entity on the subrecipient so that federal award is used in accordance with Federal statutes, regulations and the terms and conditions of the Federal award.
3. Any additional requirements that the pass-through entity imposes on the subrecipient in order for the pass-through entity to meet its own responsibility to the Federal awarding agency including identification of any required financial and performance reports.
4. An approved federally recognized indirect cost rate negotiated between the subrecipient and the Federal Government or, if no such rate exists, either a rate negotiated between the pass-through entity and the subrecipient (in compliance with this part), or a de minimis indirect cost rate as defined in §200.414 Indirect (F&A) costs, paragraph (f).
5. A requirement that the subrecipient permit the pass-through entity and auditors to have access to the subrecipient's records and financial statements as necessary for the pass-through entity to meet the requirements of this part.
6. Appropriate terms and conditions concerning closeout of the subaward.

Evaluate each subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate subrecipient monitoring.

Consider imposing specific subaward conditions upon a subrecipient if appropriate as described in §200.207 Specific conditions.

Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved.

Verify that every subrecipient is audited as required when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equaled or exceeded the threshold set forth in §200.501 Audit requirements.

Consider whether the results of the subrecipient's audits, on-site reviews, or other monitoring indicate conditions that necessitate adjustments to the pass-through entity's own records.

Consider taking enforcement action against noncompliant subrecipients as described in §200.338 Remedies for noncompliance of this part and in program regulations.

~~Although these are the new rules and regulations, Southwest Health and Human Services will be utilizing the extension on the grace period for the implementation of the new procurement standards of up to 2 years (2015 and 2016) as granted by the new federal guidance.~~

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TRAVEL AND MEAL POLICY

MILEAGE AND PER DIEM EXPENSE

This policy shall be for employees incurring work related expenses.

Travel: When there are no agency vehicles available for use, the agency will pay the current IRS rate which is determined annually. The rate of reimbursement, when an agency vehicle is available, when using your personal vehicle, will be the agency rate of \$0.23 per mile.

See Personnel Policy 5.

Meals: Meal expenditures are eligible for reimbursement when the situation meets public purpose criteria. Employees are encouraged to consider whether the same result can be obtained without the expenditure. Employees are not eligible to claim meals for agency business or training within counties covered by SWHHS.

See Personnel Policy 6.

If reimbursement is made after 60 days of original receipts, all reimbursable expenses become taxable, per IRS Regulations.

FRAUD POLICY

In broad terms, fraud refers generally to any intentional act committed to secure an unfair or unlawful gain. For the purposes of Southwest Health and Human Services' Fraud Policy, it is

defined as an intentional act to deprive Southwest Health and Human Services, or any individual or entity related to Southwest Health and Human Services' business, of something of value, or to gain an unfair advantage through the use of deception, false suggestions, suppression of the truth, or some other unfair means, which are believed and relied upon.

All employees of Southwest Health and Human Services who have a reasonable basis for believing fraud or other wrongful acts have occurred have a responsibility to report such incidents to their immediate supervisor. If notifying the supervisor is not possible because of absence or because you believe your supervisor may be involved, you should notify the Director. All supervisory personnel informed of suspected fraud or other wrongful acts must immediately notify the Director. All information will be treated confidentially.

Minnesota Statute 609.456 Subd. 1, requires any employee or official, upon discovery of evidence of theft, embezzlement or unlawful use of public funds, to report it to law enforcement and in writing to the State Auditor a detailed description of the alleged incident or incidents.

See Administrative Policy 3.

MONTH END ACCOUNTING AND REPORTING

After all receipts and checks have been processed in the IFSpi System, the Treasurer's Cash Trial Balance is prepared and Funds are balanced. Monthly department budget reports are then emailed to Department Supervisor. This work is completed no later than the tenth day of each month, however, there may be extenuating circumstances which may cause a delay.

Southwest Health and Human Services has adopted Integrated Financial System pi (IFS) as our general ledger package.

CONFLICT OF INTEREST

Board members and administration/supervision have an obligation to act in the best interests of SWHHS. Outside financial interests and/or legal commitments should not be permitted to create conflicts of interest that interfere with the performance of such duties. A conflict of interest exists when a Board member or administration/supervision has an external financial interest or other legal obligation that reasonably could be seen as creating an incentive for the individual to modify the conduct of his or her duties or to influence the conduct of others.

Conflicts of interest can arise from stock ownership, board memberships, consulting relationships, and any activity from which an individual derives legal obligations or expects to receive remuneration from an entity outside of SWHHS. Conflicts can arise from many ordinary and appropriate activities; the existence of a conflict does not imply wrong doing on anyone's part.

When a conflict arises the individual must recognize and disclose it. Some relations may create an appearance of conflict; which shall also be disclosed so public confidence is maintained.

A Conflict of Interest Disclosure Questionnaire will be filed annually, by each Board member, Administrator, and Supervisor of SWHHS.

See Administrative Policy 12.

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APPENDIX

General Agency Information

The agency is separated into the following units/programs: Social Services; Income Maintenance; Child Support/Fraud; Accounting/Collections; Office Support; Information Technology; Nursing; Health Education; and Environmental Health. The agency keeps staff well informed and has a system in place to communicate all information. The Director, Deputy Director, Public Health Division Director, Social Services Division Director, and Fiscal Manager meet bi-weekly to discuss overall agency business and future topics for the supervisors meeting. The Director, the Deputy Director, Public Health Division Director, and Social Services Division Director meet monthly with the supervisors. Each unit supervisor holds meetings with their staff, but the frequency of those meetings are set by the unit supervisor and are determined by need. Staff meetings are held in each location following each monthly Board meeting and are recorded.

The Minnesota Department of Human Services (DHS) sends bulletins and other publications to the SWHHS. Most of these are sent electronically and are available through the Department of Human Service's website. Supervisors forward bulletins to staff and they are also discussed at individual unit meetings. Also, there are state-wide conferences that staff members have the opportunity to attend.

Monthly Working Trial Balance Process

On a rotating basis each month, the Fiscal Officers prints a "Treasurer's Cash Trial Balance" from the IFSpI system. This report is compared to the check registers to ensure receipts and disbursements balance for the month. If there are any differences, they are investigated and corrections are made.

The Governing Board is given a copy of the "Treasurer's Cash Trial Balance" and check register monthly. Fiscal Manager balances this amount with the Lyon County Auditor/Treasurer's office. If there is a discrepancy, both offices work together to balance. In addition, the Governing Board is given the IFSpI report "statement of Revenues and Expenditures". This way the Governing Board is seeing figures directly from IFSpI and is directly approving the financial report.

General Fund Balance (Cash Basis)

The general fund balance fluctuates throughout the year based on the timing of the receipt of revenues. SWHHS receives more revenues in the third and fourth quarter, compared to the first and second quarter. This is directly reflected on the timing of payments from the six counties for tax levy monies. The general fund balance (cash basis) is monitored monthly and reported at each Board meeting. If the balance is below two million dollars the amount of expenses is closely monitored by the Fiscal Manager. If at any time the Fiscal Manager feels that the balance will become \$500,000 or less, bills are held until the next check run. Before this happens, a couple of other things happen prior.

All Accounting Technicians report an approximate amount of bills owing in their possession. The payroll date and amount is taken into consideration. The check register balance is reviewed. Then the Fiscal Manager discusses the issue with the Director and Deputy Director and they make a joint decision.

If bills are held, only bills that will not become past due or create fees or interest are held. All bills that are due within that check run time will be paid. This procedure will continue as long as the general fund in cash basis is low.

Chart of Accounts

Occasionally during the year, a new chart of account will need to be added to the IFSpI system. When an account is added, the Fiscal Manager or a Fiscal Officer will check the COFARS manual to determine what the code should be and then will check the chart of accounts to make sure that number is available. The Fiscal Manager or Fiscal Officer will add accounts to IFSpI and SSIS where appropriate. The Accounting Technicians use form AC#004 to request the element and chart of accounts title when they feel the need for an additional account or change to an existing account. Any Agency Supervisor may request a change or addition to the chart of accounts. The Fiscal Manager will either approve or disapprove all requests. The account will then be added by the Fiscal Manager or Fiscal Officer.

After the accounts are entered, they have to be mapped to the proper line item in the working trial balance. The Fiscal Manager and Fiscal Officer work together to ensure correct mapping for all accounts are completed. All accounts are reviewed through printing of the GASB 34 audit list from IFSpI on an annual basis or more frequently as needed.

Office Supplies/Administrative Expenses

When regular office supplies are needed the employees will notify the Office Services Supervisor. All purchases are made by the Office Services Supervisor. Major purchases (\$200.00 or over) go through the Office Services Supervisor and the Director. Supplies are ordered when needed.

The items are received from the vendor, along with an invoice. The invoice and the items received are compared to each other to verify that the department received all items. The supplies are then either placed in the supply cabinet, or they are distributed to the requesting party. The Office Services Supervisor approves all of these invoices and sends them to accounting for payment with the purchase order attached.

The supervisors, Director, Public Health Division Director, Social Services Division Director and the Deputy Director can also sign off approving the invoices for payment.

Administrative claims are received and examined for correctness by the Executive Committee, Fiscal Manager, Office Services Supervisor, or Fiscal Officers, dated and signed off on and sent to accounting for payment. If there is a carry forward balance on a bill, the issue is investigated by Accounting Technician, Fiscal Manager or Fiscal Officer who verifies possible previous payments. Travel requests are signed when approved. They are not attached to the bills but are consulted

when the bills come through. Agency cars are available for use and Microsoft Outlook is used to track the applicable information. For only the use of the Wright Express cards located in the agency vehicles, an itemized receipt is not needed. This information is available and retrievable via the website for the vendor, WEX. The appropriate Supervisor and Accounting Technician verifies information on the employee's requests for reimbursements with the information in Outlook. Fiscal Officers may sign off on routine bills at their respective office locations, such as monthly copier maintenance (bills that are consistent in amounts and do not vary). All other claims must be approved by a supervisor (indicated by initials, employee number and date.)

The Accounting Technician ensures mathematical accuracy of all claims. Any material changes to the employee reimbursement forms are sent back to the appropriate supervisor to be discussed with the employee. Approved claims are coded by an Accounting Technician or Fiscal Officer and then entered by another Accounting Technician into IFSpi. Batch tape totals of the bills are compared to IFSpi totals for data entry accuracy.

It is the practice at year end to not prepay payables. If a bill comes in at year end for the next year it is held, and paid in the first check run for the next year.

The signature needed on any bill may be executed through the process of e-signature. This is equivalent to an original document.

See Administrative Policy 21.

Social Services Expenses

For the Social Services program payments, a need is first determined by a social worker; a service arrangement is prepared for most Social Service costs and entered into Social Service Information System (SSIS) by the social worker or case aide. A service arrangement is created in SSIS by the social worker or case aide, approved by a Social Services Supervisor, and forwarded to the Accounting Department to be approved for payment. For the time frame of services on the service arrangement, pre-coded vouchers/invoices are printed and mailed to the vendor.

When the vendor is requesting payment, they complete the SSIS voucher/invoice, sign & date it and return it to the accounting department. Some vendors also include a detailed bill from their own billing system. The accounting technician reviews it for accuracy and contacts the social worker or social service supervisor if the bill does not match the service arrangement or if the service arrangement does not have enough units to pay the entire bill. The service arrangement would either be corrected or amended. The supervisor can sign the voucher if it is decided to not use the service arrangement as the source of authorization or if the vendor filled in the blue form incorrectly. When a voucher/bill has service dates of more than the most recent month of services, SSIS payment history is checked for potential duplication. There also is an edit report in SSIS that is done before submitting a batch to IFSpi. That report also shows potential duplicate payments for the same dates of service, same vendor, and/or same client. If there actually is a duplicated payment, then the current voucher/bill is pulled from the batch and not paid, and totals are adjusted accordingly.

In the case of social service bills from businesses that do not have a service arrangement authorizing payment, a supervisor can review, sign & date it, and list the proper chart of accounts number. If it is more than \$3000, a SSIS service arrangement must be created & the voucher/invoice must be signed by the vendor in addition to providing their detailed bill. In the case of receiving receipts from individuals requesting reimbursement, a SS 009 form is available to use for documentation. Both the individual & supervisor need to sign it, unless the individual signed each receipt. Some payments do not have SSIS service arrangements because they are for state "mandated services". Examples of these are for chemical dependent detoxification services, state-operated facilities or medical hospitals for mental health hold orders or Poor Relief services for inpatient clients, and various bills paid on behalf of clients. These bills are signed & dated by a Social Services Supervisor for payment approval, along with listing a chart of accounts number.

After entry of vouchers/bills, an Accounting Technician reviews the keyed-in vouchers and balances the computer control total to the total of the vouchers/bills. The payments are approved by the Accounting Technician, the batch is submitted and will wait for the SSIS process of interfacing with IFSpi. In IFSpi, the SSIS batches are merged with other administrative batches and will be a part of the check registers and the checks will be printed.

MA Transportation/Insurance Payments

The Accounting Technician receives the MA reimbursement requests from the Transportation Coordinator. They review the reimbursement form for proper approvals, and proof the math calculations, recording corrections as is needed. The Accounting Technicians prepare payments for Medicare and Cost Effective Insurance reimbursements. Transportation is paid every Friday with the regular weekly check run and the monthly insurance premium reimbursements are paid the Friday following SWHHS's Board meeting. Claiming is billed per line and submitted through MN-IT's for claim reimbursement. This is done for each client for MA transportation and related expenses that are claimable. All claims are tracked to ensure SWHHS receives all funds due.

Credit Card

The agency has credit cards held by certain employees of SWHHS, per policy. These credit cards are utilized to make approved purchases. An itemized receipt is collected and given to accounting. Each month when the bill is received, the receipts are matched up to the bill and paid from the appropriate chart of account.

See Administrative Policy 5.

Check Processing

Accounting Technician prints the checks after processing is complete. The check stock is kept in the Marshall office, separate from the printer (the office is always locked when no one is present.) After each check run, the checks and warrant register are reviewed by another Accounting Technician or Fiscal Manager to ensure that the correct bank account has been selected. The reviewing individual puts the date and their name on the bottom of the first page of the warrant

register using their electronic signature. The warrant register is emailed to the Agency Director, Deputy Director, Social Services Division Director, or Public Health Division Director for electronic signature and they email the register back to the accounting technician. The warrant register is scanned into imaging after appropriate signatures.

The abbreviated register is emailed to the Lyon County Auditor/Treasurer's office, along with the checks to obtain the signature on each check of the Lyon County Auditor/Treasurer.

The checks are mailed to the vendors via USPS by the Accounting Technician. The person scheduled for PP (positive pay) that week is required to submit the ACH through the Bremer Bank Online Banking. The transfer is completed, the confirmation page is printed and scanned to the back of the signed warrant register. An email is then sent to the accounting department stating that the check run is complete. The Accounting Technician marks "reviewed by" on the appropriate print voucher after verifying all necessary documents have been scanned in through the imaging program. The print vouchers are scanned in through the imaging program by check date. If a warrant/check is to be picked up, a proper form is required (AC#003). The warrant/check is only given to the requesting staff. The Fiscal Manager or Fiscal Officer transmits the check batch file to the Bremer Bank positive pay file.

The Audit List for Board is given to the Office Services Supervisor to provide to the Governing Board. The Governing Board reviews the report and if there is a concern, the claims are available for review in the accounting department. The listings are not signed by anyone.

Positive Pay

Positive pay is operated through the agency banking system (Bremer). The Positive Pay system allows users to create a file to upload to their bank for use with the bank's Positive Pay programs. Every check run is uploaded into the SWHHS Bremer account.

This is a Fraud Management service. With Positive Pay Management, SWHHS provides Bremer a list of checks issued. As checks are presented for payment, the dollar amount and check number fields are compared to our list of issued checks and an exception report is produced for any unmatched items. The following business day, we are able to view any exceptions or Paid Not Issued items and make "Pay" or "Return" decisions through the Positive Pay Management System.

This process is monitored via e-mails received from Bremer bank by the ~~Deputy Director, Fiscal Manager, Fiscal Officers and the Lyon County Auditor/Treasurer.~~

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Vendors

An Accounting Technician requests a new/change vendor be added/changed to IFSpi vendor file as needed, using form AC#002. All requests will be entered immediately by the assigned Fiscal Officer. If the assigned Fiscal Officer is unavailable the Accounting Technician will then direct their request to another Fiscal Officer or the Fiscal Manager. The vendor request form is sent via e-mail. All vendor forms are ~~printed, signed and dated when vendors are entered/changed.~~ The

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~~vendor information is then transferred into the vendor request log and saved in the accounting folder forms are scanned into imaging to be indexed appropriately.~~

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When appropriate the Accounting Technician will send the new vendor a W-9 form to be completed and returned to SWHHS. A reminder is placed out 60 days on their Outlook calendar for tracking purposes. If the W-9 is not received from the vendor an additional notice is sent to that vendor. When the W-9 is received, the form AC#002 is completed by the Accounting Technician to have that vendor information updated in IFSpi by the Fiscal Officer or Fiscal Manager.

The Fiscal Manager will complete periodic monthly reviews of the vendor added/changed listing. The Deputy Director runs the "Vendor Added/Change Report" from IFSpi quarterly. It is reviewed and any questions or concerns are addressed with the Accounting Technician and Fiscal Officer or Fiscal Manager who added the vendor. When completely reviewed it is initialed and dated in the upper right hand corner.

Vendor Rebate or Reward Tracking

In the rare occurrence that a vendor offers a rebate or reward in response to a particular purchase or purchases, an employee must not gain personally from it. If the application to receive the award does not prohibit businesses from participating, forward the application and information to the Fiscal Manager or Fiscal Officers for completion, along with any required proofs of purchase. The paperwork will be forwarded to the accounting department.

If the rebate is in the form of a check, it will be made payable to SWHHS. It will be receipted into the account that the expense was paid. If the rebate is in the form of a debit card, the bearer of the card will be determined by the Division Director of that program. The card must be used only for allowed business expenses and the receipts saved, which will be filed in the accounting department along with the application paperwork. In the case of a hotel which may offer a free night's stay or a restaurant which may offer a free meal, that reward must be used for an approved trip or meal during the course of business, not for personal gain.

Capital Assets

Additions to capital assets are normally initiated by the department heads involved and authorized by the Director to present for Board approval. For equipment valued over \$50,000, sealed bids are solicited per Minnesota Statute. It is the primary responsibility of the Fiscal Manager to document depreciation of capital assets.

Additions are supported with the vendor invoice, purchase order, and payment in IFSpi. The Fiscal Manager keeps a spreadsheet updated with additions and removals of capital assets \$5,000 or greater. Funds are listed separately for Human Services and Health Services. This is updated normally when the change happens and at the end of the year.

A Capital Asset expense report is run from the IFSpi system, all appropriate warrant vouchers and supporting documentation is copied and then added to the Capital Asset report by the Fiscal Manager. The Fiscal Manager Works with the IT Department to determine depreciation for

equipment purchases. A physical inventory will be completed annually by comparing the capital assets to the asset listing.

Budget Process

The budget process for the year begins with submission from department heads to the Director usually by the end of May. IFSpi budget sheets with figures for the last 2 years, plus current based on revenue and expenditure accounts and the Allocation Bulletin are used to determine amounts for the proposed budget. Beginning in January and until the August Board meeting, the Director, Deputy Director, Public Health Division Director, Social Services Division Director, and the Supervisors analyze and prepare the proposed budget. During the August board meeting, the Board is presented with a proposed budget. The Board will normally approve the preliminary levy amounts in the budget at the August board meeting. In turn, this information is passed on to the respective County Boards for approval by mid-September. The process is completed within this timeframe to ensure the tax levy will be on the tax rolls for the proper year. The final budget is approved at the November or December Board. Once approved by the Board, the Fiscal Manager approves the budget in IFSpi on the first working day in January, activating it to the working budget for the year.

Expenditure budgets are based on actual projected costs of operations. Inflating projected expenditures to provide a cushion for expenditures that may occur is strongly discouraged. Southwest Health and Human Services continually works to reduce expenditures and increase revenues during the year.

There have not been budget amendments in the past. Any overages in budget have been absorbed through the use of reserves.

The Fiscal Manager enters the proposed and approved budget into SWHHS's system, Integrated Financial System (IFSpi). The department supervisors, Deputy Director, Public Health Division Director, Social Services Division Director and the Director review the information entered. Only the Fiscal Manager or Fiscal Officer has security to update the budgetary information. The Director and Deputy Director have inquiry access to the budgetary information.

The Director, Deputy Director, Public Health Division Director, Social Services Division Director and Fiscal Manager regularly compare budget to expense and revenue throughout the year. In addition, all Department Supervisors review their related program expenditures on a monthly basis. Any discrepancies are reported to the accounting department and any necessary adjustments/corrections are completed. The Governing Board is given monthly updates at the regularly scheduled Board meetings.

General Receipting and Recording

SWHHS receives money at all six locations (Lincoln, Lyon, Murray, Pipestone, Redwood, and Rock) through various sources such as over the counter, US postal mail, and EFT.

All money received has a written receipt by an Office Support Specialist. A receipt copy is given to the client if received over the counter or attached to the money if received via USPS. An EFT report is pulled from the on-line banking system on a daily basis and given to the Accounting Technicians. The collections are recorded directly into our cash register receipting program by an Accounting Technician or Fiscal Officer.

Money received in Lincoln and Redwood County is transported to Lyon County for receipting into cash register. Money receipted into the cash register in Murray, Pipestone, or Rock County is transported weekly to Lyon County. The cash register batch for that location is closed and the money prepared for transportation to Lyon County using form Ac#022.

When transporting money to Lyon County all money must be accounted for. Form Ac#022 is completed by the Office Support Specialist, Accounting Technician, or Fiscal Officer in that location. The staff that transports the money, verifies the amount on the form AC#022, then signs for it. The money is transported to Lyon County in an interoffice envelope. The money is then counted by the Office Support Specialist or Office Support Supervisor in Lyon County and again signed for. The money goes directly into a zipper envelope where it is locked up and the Accounting Technician will pick it up on a daily basis. The original Form Ac#022 is directed to the Accounting Department and scanned into the imaging system.

On Tuesday, Friday, and the last working day of the month, all batches with money in Lyon County are closed out and deposited into the SWHHS's bank account. The Accounting Technician prints a Bank Deposit/Cash reconciliation report from the cash register and verifies that amount with the actual money being deposited. The money/EFT and the report are taken to the Lyon County Auditor/Treasurer's office for them to receipt and transport to the bank for deposit. The Bank Deposit/Cash reconciliation report is given back to the Accounting Technician by the Lyon County Auditor/Treasurer's office with a receipt showing the dollars deposited. The amount is verified with the amount SWHHS's records show as being deposited. The amount is recorded in SWHHS's manual, electronic check register. All receipts, the receipt registers, and the report are uploaded or scanned into the imaging system.

Reimbursement for Services Monitoring

After monthly and quarterly reports have been submitted to DHS for reimbursement purposes, the EFT's are monitored to make sure reimbursements are received for all submissions processed.

Identifying State and Federal Dollars

All dollars received from DHS via EFT are receipted in based on the invoice code provided. All dollars that come into SWHHS from DHS are coded per the DHS Bulletin, "DHS Publishes Standard Invoice Field Codes for Calendar Year 20__". This bulletin is updated annually. It indicates all intergovernmental, state, and federal dollars associated with Human Services.

All dollars that come into SWHHS from MDH are receipted into the appropriate grant. There is no document from MDH or coding on check to indicate monies as intergovernmental, state, or federal dollars. At this time SWHHS accounting department is working on their own to determine what

each of the dollars received are. Some have been determined and a proper chart of account(s) has been set up, while some monies still remain unidentified at this time. MDH does not have one department to contact for these questions as each is coming out of a different unit. SWHHS will continue to work toward all monies being identified and properly coded.

MA Recoveries

When a payment is determined to be a MA recovery, it is receipted into the cash register with a copy of the CL#033 form attached to the receipt and is deposited into the bank account. The ~~Collections Officer Accounting Technician~~ makes a copy of the form CL#033 and gives the copy and a copy of the check to the Fiscal Officer to process the MA recovery.

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The Fiscal Officer logs onto the "Medicaid Management Information System" (MMIS) using the assigned sign on and secure password. The appropriate county's sign on needs to be used according to the county of financial responsibility of the recovery. The Fiscal Officer reports receipt of funds 30 days from receiving the funds to allow for payment of all approved final expenses. The Fiscal Officer will also enter the payment portion of the form CL#033 into the MMIS System against MA Recovery monies as a negative amount.

The types of MA Recoveries are:

EA - Estate Affidavit
IV - Ineligible Voluntary
~~EP - Estate Probate~~

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The Fiscal Manager or the Fiscal Officer monitors monthly the Health Care Invoice to ensure we are being billed regularly for the state's share of the recoveries. This is also monitored monthly through the budget spreadsheets.

Claiming Process:

Accounting Technicians process and ~~claim for maintain~~ the following state programs; Waivers/AC and TCM/case management (TCM programs include MH-Adult, MH-Child, child welfare, relocation, VA/DD), Rule 5 and care coordination mainly for reimbursement of purchased items and direct time of case managers. Claims are processed through SSIS (clients on MA); Availity; Nightingale Notes and MN-IT's. The following programs are submitted by the following: MA Access Transportation (MN-IT's) TCM - CW, MH, VA/DD, DD-Screenings (SSIS); Care Coordination (Nightingale Notes) & TCM (Nightingale Notes & SSIS); and CD Assessments (Nightingale Notes).

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Nightingale Notes claims are submitted to Accounting by case workers and pulled from SSIS, Social Services Supervisors, and Health Services for billing purposes. ~~Claims submitted through Nightingale Notes have remittance advances from the Managed Care Organizations, available through Availity.~~ These advices are saved showing reimbursements and denials.

Those claims submitted through SSIS and MN-IT's, have remittance advices from DHS. ~~Claims submitted through Nightingale Notes, have remittance advices from the Managed Care~~

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Organizations, available through Availity. These advices are saved showing reimbursements and denials. RA's (rejects/denials) are reviewed in SSIS. Supervisors and/or Social Workers are contacted to make appropriate adjustments in MMIS, so claim can be re-submitted to DHS for reimbursement. Resubmission is done in SSIS or through MN-IT's. For claims that are denied through MN-IT's, ICI and Availity, they are reviewed and corrected appropriately for resubmission for payment.

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The Accounting Technician processes Public Health claims produced through Nightingale Notes. Claims are then submitted through DHS MN-IT's and Availity and some statements are mailed to payers. Once payments are received, they are posted in Nightingale Notes to the appropriate client's account for the corresponding date(s) of service. For claims that are denied, they are reviewed and corrected for resubmission to the appropriate payer or written off when uncollectable.

Revenue regenerated through this reporting, is receipted into each program where appropriate.

Manual Journal Entries:

A manual journal entry is only used when an alternative method through IFSpi is not possible, such as "negative receipt" or "manual warrant/void/correction". Manual journal entries are tracked through an electronic tracking form and are entered and posted by the Fiscal Manager or Fiscal Officer.

All manual journal entries completed by the Fiscal Manager are reviewed and signed off on by a Fiscal Officer. All manual journal entries completed by the Fiscal Officer are reviewed and signed off on by the Fiscal Manager. The originals are scanned into the imaging system to be indexed appropriately.

Receipt/Disbursement Adjustments

After balancing for the month is completed, the Fiscal Officer(s) and Public Health Program Specialist review the Accounting Activity Report for that month and notes any corrections that need to be made. The Fiscal Officer(s) or Public Health Program Specialist signs off on the changes and sends the corrections to be made to the Accounting Technician or Fiscal Officer on an Account Activity Report with the changes highlighted and the account information showing account numbers. The Accounting Technician or Fiscal Officer enters the corrections into IFSpi using the "Receipt Batches" or M/V/C Batches". The J/E Data Entry Listing report is printed. The completed corrections and documentation are scanned into imaging to be indexed appropriately.

On occasion there are changes needed per the request of a supervisor. The supervisor requesting the change or moving of receipts or expenses puts the request in writing, indicating what and the amount that is to be moved. This will also indicate where those funds are to be moved to. The supervisor signs off on the documentation and the Accounting Technician or Fiscal Officer makes the needed change to funds. Once completed, the documents are scanned into imaging to be indexed appropriately.

Accrual Codes

SSIS interfaces with IFSpi, accrual codes are added to social services payments in the IFSpi system. Accounting Technicians are responsible for the accrual codes. Accrual codes will be used January and February of each year.

When a payment is made that has a service date from the previous year the payment is marked with one of the following accrual codes:

AP = Accounts payable
DTG = Due to other governments

When receipt money into the IFSpi system that is from the previous year the receipt is marked with one of the following accrual codes:

AR = Accounts receivable
DFG = Due from other governments

The Fiscal Manager or Fiscal Officers will review all transactions (receipts/disbursements) to ensure they are properly coded. The IFSpi report "Account Activity with service dates" will be used. This report is signed and dated by the Fiscal Manager or Fiscal Officer once completely reviewed and appropriate changes made as needed. All changes will be completed by the Fiscal Manager or a Fiscal Officer.

Contracts with Providers

Our in-house contracts with providers are open ended with standard opt out language. Changes to the contracts are made through addendums or amendments. As of January 2014, model contracts for Home Community Based Services or waived services (CAC, CADI, MRRC, BI) will be administered and maintained at the State level. EW and AC programs utilize our in-house contract that is renewed yearly. Rates for all the above programs are set by the State.

All contracts include HIPPA, EEOC, Fair hearing/grievance, and safeguard of data language. Liability limits for general and professional liability insurance policy are set as per Minn. Stat. 466.04.

Payroll

The SWHHS Joint Governing Board approves all starting rates of pay for all new employees. Southwest Health and Human Services payroll processing is performed at different levels. Upon board approval, for each new employee, the HR Specialist enters all employee information into the HR System and then interfaces that into the Payroll System. The Accounting Technician or Fiscal Officer proofs the information provided by the employee and employee's supervisor which determines the taxes to be withheld, his/her position, work comp code, PERA eligibility, and appropriate department based on the information on the Payroll Enrollment Form and Benefit Cafeteria Enrollment Form. The Accounting Technician or Fiscal Officer provides the IFSpi formula distribution when applicable for new staff (health services employees formula distribution is

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determined through an interface process), under the direction of the Deputy Director or Human Resource Specialist. This formula is used to interface the payroll PayLib system to the IFSpi System when the payroll is processed at the end of each pay period. The HR Specialist prepares a report containing any payroll changes and it is reviewed and entered into the payroll system by the Accounting Technician or Fiscal Officer. Any payroll changes must be into payroll by Monday noon the week of payroll.

Payroll deductions for insurances are entered directly from a copy of the employee's Benefit Cafeteria Enrollment Form completed before the beginning of each year or as new employees become eligible. These forms are generated from a web-based human resource program with employee personnel insurance information listed on it.

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Before a payroll is run, the Deputy Director or Human Resource Specialist and the Accounting Technician or Fiscal Officer review and make necessary adjustments to the billings from the providers of insurance for health care, dental, life and disability. Note adjustments for medical/dental insurance cannot be made on the bill. They normally occur after the fact as an adjustment on a later bill. Real time adjustments can be made on the life insurance bill. Other deductions (such as garnishments and child support) are processed by the Accounting Technician or Fiscal Officer from official orders. The Deputy Director and Fiscal Manager are the agency representatives served those orders normally via US postal mail.

All employees are paid bi-weekly. The Southwest Health and Human Services Governing Board members are paid bi-weekly following the receipt of their voucher. The Governing Board Per Diem pay is paid through payroll. All Governing Board mileage and other costs are paid through the administrative bill process.

At the end of each pay period, web based timesheets are created by each human services employee, by signing into the web based timesheet program created by Counties Providing Technology (CPT). The web based timesheets for all health services employees are created by an interface program pulling the data from Nightingale Notes Dailies into the web based timesheets. The interfacing program was created by CPT. The web based timesheet is accessed by the employee signing in by using their unique ID and password. This web based timesheet is approved by the employee and also by the employee's supervisor. Payroll Disclaimers appear on the screen when being approved. Any errors that are found are relayed back to the employee by the supervisor. The Human Resource Specialist and Accounting Technician audits all Vacation, Sick, and Comp Time Balances. The Balances are shown on the Employee's pay stub.

Any overtime pay is prior authorized and requires supervisory and Director approval. Any concerns regarding payroll are referred to the HR Specialist, Deputy Director and/or Director.

At the end of the year, a report is generated that lists year-end balances in vacation, sick, and comp time banks and year-end rates of pay, which are used in calculating Compensated Absences Liability. The Accounting Technician maintains a spreadsheet that calculates the compensated time absence liability based on the total accrued time to date and what has been paid out over the past few years.

A transaction edit is run on the computer in batches, which is then compared to the time sheets prepared by each employee. If incorrect, the errors are located and reconciled. The HR Specialist performs these tasks.

After the transaction edit has been deemed correct, the Accounting Technician or Fiscal Officer runs the payroll journal and then another Accounting Technician checks it for errors and signs off approval. (This register does not have any warrant numbers yet.) It also includes taxes, cafeteria contributions and recurring deductions, which are reconciled.

If no errors are located on the payroll journal, the Accounting Technician or Fiscal Officer runs the check process which produces the files that print employee direct deposit stubs and vendor checks using direct deposit or electronic funds transfer (EFT). An EFT edit is printed and checked against the payroll journal and also against any new participant's authorization forms. If correct, the file is transferred to Bremer Bank via internet file transfer.

An Accounting Technician or Fiscal Officer prints the checks, direct deposit stubs, and the final payroll journal and all necessary reports. The final journal prints the check number and direct deposit number by each employee's net pay. The check stock is ~~always locked in the Marshall accounting department stored in a locked room~~. All Payroll reports are then uploaded to the Payroll imaging system for storage.

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SWHHS uses a service from CPT, the office that provides support for the Payroll Paylib system, for accessing Payroll Pay stubs (web based timesheets) instead of printing individual pay stubs and sending them directly to the employee. The Accounting Technician or Fiscal Officer still prints out vendor checks and commissioner's checks when necessary. For any employees who are on extended leaves, their direct deposit stub is printed and mailed to each employee via US Postal mail at their home address. The Lyon County Auditor/Treasurer receives a check register listing all check and direct deposits. The Lyon County Auditor/Treasurer stamps the checks with the Auditor/Treasurer's signature. The Lyon County Auditor/Treasurer is the only authorized signatory and maintains custody of the signature plates. The Auditor/Treasurer's Office then emails the Marshall Office Accounting Technicians to come to pick up the signed checks. These checks are either mailed via USPS with proper itemized check remittances or receipted into the IFSpi system and reissued when vendor invoice is received.

With each payroll, the Accounting Technician or Fiscal Officer runs certain reports. These include a Check Register, Payroll Journal, a summary total by employee, a PERA summary, deductions report by vendor, EFT listing showing trace numbers for the Employee Direct Deposit and various reports that are sent in with vendor checks. Some vendors also require other forms to be completed. A comprehensive checklist is used to assure that all vendors have been paid and all reports run in a timely manner. One of the reports, the PERA salary deduction report, requires routine maintenance and the production of a file transmitted electronically via the intranet into their computer system.

Federal and State withholding figures as shown on the grand total page of the payroll journal are transferred to the IRS and MN Dept. of Revenue, respectively. The State and Federal tax payment is transferred using an ACH debit, which becomes part of the file that includes the employees' pay,

Nationwide Retirement Deferred Comp, Valic Deferred Comp, Investors Choice Deferred Comp and PERA. The file also includes the required addendums for the vendors.

A payroll distribution summary report is generated during the next step called "updating the master files". This process distributes wages and benefits for many employees to different funds and/or departments. All the figures are automatically posted to IFSpi as printed on the Payroll Distribution Account Summary. Using this report, the Accounting Technician or Fiscal Officer posts total payroll costs to the manual warrant register.

Authorizations for deductions are filed by the vendor for which the deduction is paid. The Deputy Director or Human Resource Specialist maintains files with all insurance changes and Flexible Benefits. Payroll advances are prohibited. The Accounting Technician or Fiscal Officer reports all Quarterly Federal, State and Unemployment insurance withholding and wage reports. The Accounting Technician or Fiscal Officer is also responsible for all year end payroll reporting and to process the end of the year W-2 forms. The 1099's are processed by a different Accounting Technician.

Due to unforeseen problems that may arise, it is always the goal to reach the step in the payroll process that prints the checks and direct deposits stubs and transmits the direct deposit information to Bremer Bank, one or two days before the payroll date. However, the payroll process must be completed by 5:00 pm Thursday of the payroll week to ensure that the EFT processes correctly and the employees receive their pay in a timely manner.

The Fiscal Manager or Fiscal Officers transmits the check batch file to the Bremer Bank positive pay file on the day the payroll checks are mailed.

Agency Self-Insurance

January 1, 2014, Southwest Health and Human Services began offering employee health insurance through a self-funded account. All premiums are collected by SWHHS and claims are paid to the insurance company upon billing. This fund is monitored by the Deputy Director and reported on to the Governing Board on a monthly basis. A brief overview is provided to the Governing Board each month at the regularly scheduled meetings. A Health Insurance Benefits committee has been formed to review and make recommendations to the Governing Board annually in regards to the plans, benefits, and premiums. Any reserves in the fund are addressed on an annual basis.

See Administrative Policy 22.

Child Care Payments

Child Care payments are entered in the MEC2 State Centralized Payment System by an Accounting Technician. Paper vouchers are scanned and emailed, by the Office Support staff, to specific Eligibility Workers to approve. The paper payments are entered after the Eligibility Worker emails the Accounting Technician with approval to pay. The electronic payments are approved daily. The State approves payments nightly. If the provider added notes as to why they added

more hours than authorized the Accounting Technician will forward that information to the Eligibility Worker and wait for an answer before approving the voucher. A Child Care Eligibility Worker approves eligibility, and then enters service authorizations into the State System for all clients, which authorizes payment. A Child Care Eligibility Worker must also note specific case notes regarding authorized days as well as the number of hours authorized each day (example: 8 hrs M, T, Th and 6 hrs W, F). This information will go out with the letter to the provider when eligibility is approved by the Elig Worker. Billing forms are generated by the State System and mailed out to the provider. The provider completes the billing form and mails the form to SWHHS for entry in the State System or the provider will enter their information into MECpro and submit electronically for payment. All applications and verifications are filed in the case file in the case worker's office. Once the billing forms are entered in the State System, the System compares the billing form to the service authorization and then at this point it can accept or reject the payment request. Rejected billing forms are put on hold for review by caseworker. The State then makes the payment directly to the provider and the Income Maintenance Supervisor can access this information. All manual payment requests are approved by an Income Maintenance worker prior to the Accounting Technician processing the payment.

Once the paper voucher payments or any manual payments have been made the Accounting Technician will scan the forms into the imaging system.

County Collections Billing

The Collections Officer enters corrections and new accounts on monthly credit and debit spreadsheets. The Accounting Technician will enter these spreadsheets along with the recurring spreadsheets for daycare centers, cobra or retiree insurance premiums, out of home placement fees, and courtesy care into the County Collections System (CCS).

Statements are prepared, printed and mailed once a month by the ~~sixth tenth~~ of each month. Two Accounting Technicians work on preparing these statements. When statements are printed all statements for an entity, that have a credit balance, zero balance or have an administrative charger are reviewed by the Fiscal Manager and/or Collections Officer. After the statements are mailed the Accounting Technicians prepare trial balances or activity reports that are given to the appropriate Department Supervisors to monitor their programs.

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Nightingale Notes Billing

Public Health Claiming– The accounts receivable/claiming system for Public Health is one part of a larger time tracking system known as Nightingale Notes. Everyone in the Public Health Department is required to fill out an electronic service form. This form tracks all of their hours (worked, sick, vacation, etc.) along with what they worked on and/or what patients they saw that day. Nightingale Notes is used for billing nursing services to the appropriate insurance companies.

Once all the services are entered for the previous month and communicated to various employees, the Accounting Technician generates the billing cycle in Nightingale Notes. The Accounting Technician then reviews the claims for inconsistencies or errors. Some pay sources are reviewed for data entry error by generating a report built in Nightingale Note report system i.e. "BluePlus Services that should be Bridgeview". Any questions are emailed to the staff person who entered the

activity. Once reviewed and corrected, the Accounting Technician generates the claim file, handles those error messages and submits the batch through Availity for most pay sources and through MN-ITS for the Medical Assistance pay source. Availity will then send back three to four edit reports per batch submitted. MN-ITS posts a report which shows acceptance or rejection. The claim file is stored on the shared drive for record retention.

The first edit report is the acknowledgement report which shows if the entire file was accepted or rejected. Accounting staff assigned to that task depending on insurance company and/or type of claim researches the reason for rejection to see if something can be corrected at our end. If it is more complicated, the insurance company and/or Nightingale Notes Support is contacted to troubleshoot the issue. Once corrected the batch file is generated again and submitted through Availity.

The Accounting Technician must also view other edit reports found in Availity that are posted within 24 hours of the upload. These reports are the Immediate Batch Text Response (IBT), Electronic Batch Report (EBT), and the Delayed Payer Report (DPR). These reports will list some detail for each claim in the batch and state if it was accepted or if it was rejected, along with the reason for the rejection.

Rejected claims shown in these edits are reviewed by the Accounting Technician who uploaded the claim file. The Accounting Technician determines the corrective action, makes the correction and resubmits the claim promptly. If Availity rejects a claim or batch, the insurance company has not received it from Availity. At this point, the Accounting Technician must not mark the claims as paid, remove the pay source or write it off.

Staff need to be aware of deadlines for submitting claims, which vary between insurance companies. A timely filing chart is available for reference and is updated as needed.

Once a claim has been processed by the insurance company, an Electronic Remittance Advice (ERA) or Explanation of Payment (EOP) is sent to the clearinghouse (MN-ITS, MN E Connect, or Availity). Some insurance companies mail these reports. These reports show the details of the payments made, partial payments or denial of the claim. The ERAs and EOPs are uploaded onto the share drive as they are only available on Availity for 30 days. These reports are saved for reference and proof. Once the payment has been coded for the person doing the receipts the ERA is uploaded to Nightingale Notes, so the detail of the payment or non-payment is linked to the corresponding claim. Each payment is posted in Nightingale Notes to show the claim was paid or the next subscriber should be billed if necessary. Claims that were not paid are researched to determine if they can be corrected and rebilled. The NN system allows payments to be applied over claim line so that if only one line was paid and another was rejected, the rejected line can be resubmitted rather than adjusting it off. The Accounting Technician may call the insurance company for assistance and explanations.

Radon & Water Testing Kits Procedures

When the general public purchases either a short-term or long-term radon testing kit or a water testing kit at the front counter, they pay a nominal fee for any type of kit to the Office Support staff.

The fee is charged to discourage misuse by customers, to recover part of the cost of offering the kits, and to encourage customers to actually use the kits. Office Support staff receipts the payment into the receipt book & gives the customer the ~~yellow white~~ copy. The ~~white yellow~~ copy goes with the cash or check and is given to the accounting unit.

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Water testing bottles are supplied to regular customers, such as city and rural water systems and construction companies, at no charge.

The charge for the water test itself is based on which test or tests are performed with the prices listed on the test request form. The general public makes their payment when dropping off their request form and sample. When the water testing is performed for a regular customer as described previously, a bill will be sent to them by the sanitarian on a monthly basis. The sanitarian monitors the receipt of payments by referencing a list provided by the Fiscal Manager on a monthly basis.

QUICK REFERENCES GUIDE

Policies

- Administrative Policy 2
- Administrative Policy 3
- Administrative Policy 4
- Administrative Policy 5
- Administrative Policy 7
- Administrative Policy 12
- Administrative Policy 21
- Administrative Policy 22
- Personnel Policy 5
- Personnel Policy 6

Forms

- Ac#002
- Ac#003
- Ac#022
- Ac#043
- Ag#100
- Ag#101
- Cl#033

DHS Bulletins (available on DHS website)

<http://mn.gov/dhs/>

COFARS Manual

**SOUTHWEST HEALTH AND HUMAN SERVICES
Resolution of Signature Authority**

The Governing Board, the Human Services Board and the Community Health Board (by virtue of its authority under Minnesota Statutes, Chapter 145A) of Southwest Health and Human Services authorizes the following people to sign all necessary contracts and forms needed to carry on the business of the agency.

Name	Beth Wilms	Name	Nancy Walker	Name	Carol Biren	Name	Cindy Nelson
Title	Director	Title	Deputy Director	Title	PH Division Director	Title	SS Division Director
Address	607 W Main Street, Suite 100 Marshall MN 56258	Address	2 Roundwind Road Luverne MN 56156	Address	607 W Main Street, Suite 200 Marshall MN 56258	Address	607 W Main Street, Suite 100 Marshall MN 56258
Phone	(507)532-1248 - W (507)706-2198 - C	Phone	(507)532-1256 - W (507)706-2200 - C	Phone	(507)532-4136 - W (507)706-2202 - C	Phone	(507)532-1260 - W (507)706-2201 - C

Resolution Adopted on December 16th, 2020

Southwest Health and Human Services - Governing Board

Signature: _____

Title: Chairperson

Date: _____

Southwest Health and Human Services - Human Services Board

Signature: _____

Title: Chairperson

Date: _____

Southwest Health and Human Services - Community Health Board

Signature: _____

Title: Chairperson

Date: _____

**RESOLUTION TO DESIGNATE DEPOSITORIES AND AUTHORIZE LYON
COUNTY AUDITOR/TREASURER TO MAKE INVESTMENTS**

WHEREAS, Minnesota Statute § 118A.02, subdivision 1 (a) states “The governing body of each government entity shall designate, as a depository of its funds, one or more financial institutions”;

WHEREAS, Minn. Stat. § 118A.02, subdivision. 1. (b) (2) allows the governing body to authorize the treasurer or chief financial officer to make investments of funds under Minn. Stat. § 118A.01 to 118A.06 or other applicable law;

THEREFORE, BE IT RESOLVED, that the Southwest Health and Human Services Governing Board designates as depositories the following financial institutions and designates the following as brokers and authorized investment holders:

- Bank of the West
- BNP Paribas
- Bremer Bank
- Bremer Investment Management and Trust
- Great Western Bank
- MAGIC Fund, management by PFM Asset Management
- Multi-Bank Securities
- State Farm Bank
- Wells Fargo
- Wells Fargo Advisors

BE IT FURTHER RESOLVED, that the Governing Board authorizes the Lyon County Auditor/Treasurer to make investments of funds under Minn. Stat. § 118A.01 to 118A.06 or other applicable law at any one or more of the above based on direction provided by the Executive Committee;

BE IT FURTHER RESOLVED, the Lyon County Auditor/Treasurer is hereby authorized to act and serve as agent on any Southwest Health and Human Services accounts set up or active at any of the above financial institutions, brokers, or investment holders; and

BE IT FURTHER RESOLVED, the above designations and authority conferred shall be and remain in full force and effect until written notice of any amendment or revocation thereof shall have been delivered to and received by the financial institution, broker, or investment holder at each location where an account is maintained and the financial institution, broker, or investment holder shall be indemnified and held harmless from any loss suffered or any liability incurred by it in continuing to act in accordance with this resolution.

Passed and adopted by the Southwest Health and Human Services Governing Board this 16th day of December, 2020.

Charlie Sanow, Chair
Southwest Health and Human Services

Beth Wilms
Director



Minnesota Counties Computer Cooperative

Phone: (651) 401-4200 Fax: (651) 401-4299 www.mnccc.org

Please send payment to:
MCCC LOCKBOX
PO Box 860687
Minneapolis, MN 55486-0687

INVOICE NO: 2101227
INVOICE DATE: 1/1/21
AMOUNT DUE: 5,251.00

INVOICE

Invoice Due Date January 31, 2021

CUSTOMER: Chris C.
South West Health/Human Services
607 W Main Street
Marshall, MN 56258

I declare under penalty of law that this amount is true and correct and not part of it has been paid.

Lisa Christine Meredith, Executive Director

Item/Description	Units	Price/Unit	Net	
2021 IFS General Support (CMHS)	1.00		2,666.00	2,666.00
2021 IFS - Golden Wiki	1.00		115.00	115.00
2020 JIC - IFS Enhancement Fund	1.00		300.00	300.00
MnCCC 2021 Dues for JIC (Joint Integrated Committee) (for CMHS group representation 6 seats)	1.00		170.00	170.00
2021 Information Services Support Group - Enhancement Fund contribution	1.00		300.00	300.00
2021 MCCC Information Services Support Group (ISSG) Annual Dues	1.00		1,700.00	1,700.00
			Total:	5,251.00



Notice:

As allowed by our bylaws and approved at the Executive Board Meeting on 10/1/20, 1% interest will be applied to any invoices that are over 60 days effective 01/01/21



Minnesota Counties Computer Cooperative

Phone: (651) 401-4200 Fax: (651) 401-4299 www.mnccc.org

CUSTOMER: South West Health/Human Services
607 W Main Street
Marshall, MN 56258

Please send payment to:
MCCC LOCKBOX
PO Box 860687
Minneapolis, MN 55486-0687

Please note new remittance address

INVOICE NO: 2101227
INVOICE DATE: 1/1/21
AMOUNT DUE: 5,251.00
AMOUNT ENCLOSED:

ALERT: SAM.gov will be down for scheduled maintenance Saturday, 12/12/2020 from 8:00 AM to 1:00 PM.

Search Results

- Your search results represent the broadest set of records that match your search criteria. You may get entity registration records that are still in progress or have been submitted, but not yet activated. Check the status of each record.
- Of note, some entities choose to opt out of public display. Even if they are registered in SAM, you will not see their entity registration records in a public search. You can only see them if you log in as Federal Government user.
- You can refine your search results. If you used the Quick Search, select the search filters on this page. If you used one of the Advanced Search options, select the Edit Search button.
- If you want to perform a new search, use the Clear button to remove your current search results. If you are logged in with your SAM User Account, you can save your search criteria to run again later using the Save Search button.
- NOTE:** Please read this important message when searching for exclusion records.

Current Search Terms: MINNESOTA COUNTIES COMPUTER COOPERATIVE*

Clear Search

Total records: 1

Save PDF

Export Results

Print

Result Page: 1

Sort by Relevance Order by Descending

FILTER RESULTS

By Record Status

Active

Inactive

By Record Type

Entity Registration

Exclusion

Apply Filters

Your search for MINNESOTA COUNTIES COMPUTER COOPERATIVE* returned the following results...

Entity	MINNESOTA COUNTIES COMPUTER COOPERATIVE	Status: Inactive
DUNS: 830079334	CAGE Code: 5KHN1	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 07/16/2013	Debt Subject to Offset?: No	
Purpose of Registration: Federal Assistance Awards Only		

The Computer Man, Inc.



1105 Canoga Park Drive
 Marshall, MN 56258
 Phone (507) 532-7562
 Fax (507) 532-2680
 www.tcmi.com

11/10/2020

Quote # 619836

Quote

business partner



Microsoft Partner

Silver Midmarket Solution Provider



Prepared For

Southwest Health & Human Services
 607 West Main Street Suite 100
 Marshall, MN 56258

PO Number	Terms	Rep
	Net 10 Days	MWT

Description	Qty	Price	Extended Price
HPE ProLiant DL380 G10 2U Rack Server - 1 x Xeon Gold 5220 - 32 GB RAM HDD SSD - Serial ATA/600, 12Gb/s SAS Controller	1	3,494.00	3,494.00
2 Processor Support - 16 MB Graphic Card - 10 Gigabit Ethernet, 25 Gigabit Ethernet - 8 x SFF Bay(s) - Hot Swappable Bays - 1 x 800 W - Intel Optane Memory Ready			
HPE SmartMemory 64GB DDR4 SDRAM Memory Module For Server - 64 GB (1 x 64 GB) - DDR4-2933/PC4-23466 DDR4 SDRAM - CL21 - 1.20 V - Registered - 288-pin - DIMM	8	860.00	6,880.00
HPE 800W Flex Slot Platinum Hot Plug Low Halogen Power Supply Kit 230 V AC, 380 V DC	1	166.00	166.00
HPE 2.4TB 12G 10k rpm SAS ENT SFF (2.5in) Smart Carrier 3yr Wty 512e Digitally Signed Firmware Hard Drive	8	480.00	3,840.00
HPE 32GB microSD Enterprise Mainstream Flash Media Kit	1	127.00	127.00
HPE iLO Advanced including 1 Year 24 x 7 SW Support LTU 512485-B21	1	220.00	220.00
VMWARE Essentials Kit with 1 Year Support (3 Year Support is additional \$109.81 for total of \$686.77)	1	576.96	576.96

Thank you for your business.	Subtotal	\$15,303.96
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Quote valid for 2 weeks
 from date.

Sales Tax (6.875%)	\$0.00
Total	\$15,303.96



Morris Electronics

511 Atlantic Ave., Morris, MN 320-589-1781

To: Chris Cauwels
 Southwest Health and Human Services
 Phone: 507-532-1223
 Fax:

Date
 12/9/2020

From: Morris Electronics Inc
 Shawn Larsen
 Phone: 320-589-1781
 Cell: 320-287-0922
 Fax: 320-589-3595
 E-mail: shawn.larsen@morriselectronics.net

Qty	Part #	Description	per unit \$	extended \$
4	10966696	HPE Aruba 2530-48G-PoE+ - Switch - managed - 48 x 10/100/1000 (PoE+) + 4 x Gigabit SFP - desktop, rack-mountable, wall-mountable - PoE+	\$ 1,392.85	\$ 5,571.40
			Sub Total	\$ 5,571.40
			Sales Tax	EXEMPT
			TOTAL	\$ 5,571.40

The Computer Man, Inc.



1105 Canoga Park Drive
 Marshall, MN 56258
 Phone (507) 532-7562
 Fax (507) 532-2680
 www.tcmi.com

12/8/2020

Quote # 619926

Quote

business partner



Microsoft Partner

Silver Midmarket Solution Provider



Prepared For

Southwest Health & Human Services
 607 West Main Street Suite 100
 Marshall, MN 56258

PO Number	Terms	Rep
	Net 10 Days	MWT

Description	Qty	Price	Extended Price
Hpe - Switching HPE 2530-48G-PoE+ Switch - 48 Ports - Manageable - 2 Layer Supported - Twisted Pair - PoE Ports - 1U High - Rack-mountable, Desktop, Wall Mountable - Lifetime Limited Warranty DEAL REG PL-35 J9772A	4	1,814.40	7,257.60

Thank you for your business.	Subtotal	\$7,257.60
	Sales Tax (6.875%)	\$0.00
	Total	\$7,257.60

Quote valid for 2 weeks
 from date.

ALERT: SAM.gov will be down for scheduled maintenance Saturday, 12/12/2020 from 8:00 AM to 1:00 PM.

Search Results

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- NOTE: Please read this important message when searching for exclusion records.**

Current Search Terms: Computer Man*

Clear Search

Total records: 0

Save PDF

Export Results

Print

Result Page:

Sort by: Relevance

Order by: Descending

FILTER RESULTS

Your search for Computer Man* returned the following results...

No records found.

By Record Status

Active

Inactive

By Record Type

Entity Registration

Exclusion

Apply Filters

ALERT: SAM.gov will be down for scheduled maintenance Saturday, 12/12/2020 from 8:00 AM to 1:00 PM.

Search Results

- Your search results represent the broadest set of records that match your search criteria. You may get entity registration records that are still in progress or have been submitted, but not yet activated. Check the status of each record.
- Of note, some entities choose to opt out of public display. Even if they are registered in SAM, you will not see their entity registration records in a public search. You can only see them if you log in as Federal Government user.
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- If you want to perform a new search, use the Clear button to remove your current search results. If you are logged in with your SAM User Account, you can save your search criteria to run again later using the Save Search button.
- NOTE: Please read this important message when searching for exclusion records.**

Current Search Terms: Morris Electronics*

Clear Search

Total records: 1

Save PDF

Export Results

Print

Result Page: 1

Sort by: Relevance

Order by: Descending

FILTER RESULTS

Your search for Morris Electronics* returned the following results...

By Record Status

Active

Inactive

By Record Type

Entity Registration

Exclusion

Apply Filters

Entity: Morris Electronics, Inc.		Status: Inactive
DUNS: 02963953	CAGE Code: 8D701	View Details
Has Active Exclusion?: No	DoDAAC:	
Expiration Date: 08/28/2020	Debt Subject to Offset?: No	
Purpose of Registration: All Awards		

DECEMBER 2020
GRANTS ~ AGREEMENTS ~ CONTRACTS
for Board review and approval

- A&B Business Solutions Inc. Business Associate Agreement (Sioux Falls, SD) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Avera Marshall d/b/a Avera Marshall Regional Medical Center (Marshall, MN) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Avera Marshall d/b/a Avera Marshall Regional Medical Center (Marshall, MN) – 01/01/21 to 12/31/21; Mental Health Hold Orders and Civil Commitment Beds and Services, not to exceed \$975/day for hospital services (no increase)(renewal).
*Fiscal Note: 2020 \$26,103; 2019 \$47,239; 2018 \$12,915; 2017 \$34,515***
- Bud's Bus Service (Reading, MN) – 01/01/21 – 12/31/21; Transportation for DD clients, \$20.21 per one way trip (no change) (renewal).
*Fiscal Note: 2020 \$18,592; 2019 \$25,715; 2018 \$30,370; 2017 \$31,955***
- Computer Man Inc. Business Associate Agreement (Marshall, MN) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Jean Callens (Tauton, MN) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Jean Callens (Tauton, MN) – 01/01/21 to 12/31/21; Client guardianship services, \$20/hour plus expenses (no increase) (renewal).
*Fiscal Note: 2020 \$1,335; 2019 \$2,747; 2018 \$1,806; 2017 \$4,047***
- DHS Adult Mental Health Grant (CSP) – 01/01/21 to 12/31/22; an agreement for allocating monies for the community support program, \$650,902 (no change) (renewal).
*Fiscal Grant Award: 2019-20 \$650,902; 2017-18 \$650,902***
- DHS Child Welfare/Juvenile Justice Screening Grant – 01/01/21 to 12/31/21; Provide funds to support children's mental health screening, assessment, and services in child welfare and juvenile justice populations; \$89,831 (slight increase)(renewal).
*Fiscal Grant Award: 2020 \$87,909; 2019 \$102,998; 2018 \$102,199***
- Hoffman & Brobst - Marlene Verdoes CPA, Representative (Marshall, MN) – 01/01/21 to 12/31/21; Accounting services for child support cases, \$125/hour plus expenses with a cap of \$2,500 for the year (no increase) (renewal).
*Fiscal Note: 2020 \$412; 2019 \$-0-; 2018 \$1,375; 2017 \$1,848***
- Hutchinson Leader (Savage, MN) – 01/01/21 – 12/31/21; A contract for digital advertising and marketing for the Child and Teen Check Up (CTC) program; Social Media and Native Advertising \$771.68/month (renewal).
*Fiscal Note: 2020 \$8,000***
- Information Systems Corporation Business Associate Agreement (Fargo, ND) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**

- Paulette Koch (Walnut Grove, MN)** - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).
- Paulette Koch (Walnut Grove, MN)** – 01/01/21 to 12/31/21; Client guardianship services, \$85/mo (no increase) (renewal).
Fiscal Note: 2020 \$7,095; 2019 \$8,224; 2018 \$8,481; 2017 \$10,440
- Lincoln County (IT Services)** - 01/01/21 to 12/31/21; Information technology services, \$65/hour plus travel and \$97.50/hour emergency purposes (no increase) (renewal).
Fiscal Note: IT Revenue 2020 \$18,701; 2019 \$20,091; 2018 \$24,621; 2017 \$26,490
- Lutheran Social Services of MN (St Paul, MN)** - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).
- Lutheran Social Services of MN (St Paul, MN)** – 01/01/21 to 12/31/21; Client guardianship services, \$55.50/hour (no increase) (renewal).
Fiscal Note: 2020 \$5,197; 2019 \$5,908; 2018 \$6,511; 2017 \$6,969
- Marco Inc Business Associate Agreement (Marshall, MN)** - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).
- MDH SHIP Walkable Communities** – 11/23/20 to 09/29/21; A new grant for Lincoln County to implement action steps addressing education and engineering concepts of active transportation. Funds will be used to purchase signs around community edges to remind drivers that residents use active transportation and that increased awareness is necessary; \$5,000 award (NEW).
- Steven T Meister & Community Health Board (Marshall, MN)** - 01/01/21 – 12/31/21; medical consultant contract, \$2,000 annually at \$500/qtr and \$150/hr during a public health emergency when deemed necessary by agency director (no increase) (renewal).
Fiscal Note: 2020 \$2,000; 2019 \$2,000; 2018 \$2,000
- Morris Electronics Inc. (Morris, MN)** – 01/01/21 – 12/31/21; Contract to provide computer and technical support on as needed basis, \$80/hour (no change) (renewal).
Fiscal Note: 2020 \$70,627; 2019 \$36,659; 2018 \$25,153; 2017 \$6,083
- New Horizons Crisis Center (Marshall, Slayton, Redwood locations)** – 01/01/21 to 12/31/21; Block grant payment for supervised parenting time services, \$100,000 (no change) (renewal).
Fiscal Note: 2020 \$67,944; 2019 \$101,802; 2018 \$107,649; 2017 \$102,027
- New Life Treatment Center (Woodstock, MN)** - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).
- New Life Treatment Center (Woodstock, MN)** - 01/01/21 – 12/31/21; CCDTF services, \$400/day plus \$.61 Detox mileage (no increase) (renewal).
Fiscal Note: 2020 \$36,675; 2019 \$45,420; 2018 \$43,078; 2017 \$51,977
- Olmstead County (Rochester, MN)** – 01/01/21 to 09/30/21; contract for an International Board Certified Lactation Consultant (IBCLC) for consultation and training activities to support the Peer Breast Feeding Counselor grant program, 2021 at \$81/hr with a cap of 58 hours; \$4698 (renewal).

- Jana Piotter (Jeffers, MN) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Jana Piotter (Jeffers, MN) – 01/01/21 to 12/31/21; Client guardianship services, \$25/hour plus expenses (\$5/hour increase) (renewal).**
Fiscal Note: 2020 \$2,192; \$4,773; 2018 \$4,895; 2017 \$4,392
- Prairie Support Services (Walnut Grove, MN)- 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Prairie Support Services (Walnut Grove, MN) – 01/01/21 to 12/31/21; client guardianship services, \$25/hour plus mileage (no increase) (renewal).**
Fiscal Note: 2020 \$18,557; 2019 \$16,300; 2018 \$5,776; 2017 - \$8,849
- Progress Inc (Pipestone, MN) - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Progress Inc (Pipestone, MN) - 01/01/21 – 12/31/21; Paper shredding services, \$.60/pound and \$10.00/hr recycling pickup (no increase) (renewal).**
Fiscal Note: 2020 \$1,301; 2019 \$1,831; 2018 \$2,633; 2017 \$5,297
- Redwood County (Redwood Falls, MN) – 01/01/21 to 12/31/21; Office lease contract, \$123,900 payable \$10,325/month (1% increase) (renewal).**
Fiscal Note: 2020 \$123,000; 2019 \$123,000; 2018 \$123,000; 2017 \$123,000
- Service Enterprises Inc (Redwood Falls, MN)- 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Service Enterprises Inc (Redwood Falls, MN) - 01/01/21 – 12/31/21; Paper shredding services, \$.43/pound and pickup (no increase) (renewal).**
Fiscal Note: 2020 \$4,005; 2019 \$5,371; 2018 \$7,469; 2017 \$9,741
- Service Enterprises Inc (Redwood & Marshall locations) – 01/01/21 to 12/31/21; provide extended employment services for clients, Tier I clients \$122.27/mo (no increase) and Tier II clients \$26.00/day for actual days worked (no change) (renewal).**
Fiscal Note: 2020 \$20,644; 2019 \$24,362; 2018 \$21,580; 2017 \$23,771
- Southwest Crisis Center (Luverne, MN) – 01/01/21 to 12/31/21; Community Education and Prevention Services to bring awareness and acceptance of mental illness, chemical dependency, or other social problems as well identify availability of resources and services, \$5,000 block grant (no increase) (renewal).**
Fiscal Note: 2020 \$5,000; 2019 \$5,000; 2018 \$5,000; 2017 \$5,000
- Southwestern Mental Health Center Inc Business Associate Agreement - 01/01/21 – open; Agreement covering data sharing, HIPAA and privacy rules (renewal).**
- Southwestern Mental Health Center Inc (Pipestone & Luverne locations) – 01/01/21 to 12/31/21; Mental health services (block grant) to provide adult and children’s outpatient treatment, crisis treatment, medication management, diagnostic assessment, and consultation, \$350,667 (no increase) (renewal).**
Fiscal Note: 2020 \$446,324; 2019 \$505,310; 2018 \$499,041; 2017 \$459,955

- Southwestern Mental Health Center Inc (Pipestone & Luverne locations) – 01/01/21 to 12/31/21;** Community Support Services for crisis lines, crisis beds, adult day treatment and other community support, \$78,790 (no change) (renewal).
- Southwestern Mental Health Center Inc (Pipestone & Luverne locations) – 01/01/21 to 12/31/21;** Intensive Family Based Therapy services, not to exceed \$120,000 per year based on \$40/qtr hour (no rate change) (renewal).
- Southwestern Mental Health Center Inc (Pipestone & Luverne locations) – 01/01/21 to 12/31/21;** Home based family treatment, purchased services not to exceed \$75/hour (no rate change) (renewal).
- Southwestern Mental Health Center Inc (Pipestone & Luverne locations) – 01/01/21 to 12/31/21;** Family Group Decision Making, purchased services not to exceed \$90/hour or \$65/hour co-facilitating (no rate change) (renewal).
- Southwestern Mental Health (Luverne & Pipestone, MN) – 01/01/21 to 12/31/21;** Contract for parenting classes (\$200/hour for Parenting Skills Group) and individual parent education (no rate change)(renewal).
- Southwestern Youth Services (Magnolia, MN) - 01/01/21 – open;** Agreement covering data sharing, HIPAA and privacy rules (renewal).
- Southwestern Youth Services (Magnolia, MN) - 01/01/21 – 12/31/21 – Non-secure Residential and Detention Services,** \$180/day residential and \$190/day detention (no increase) (renewal).
Fiscal Note: 2020 \$10,640; 2019 \$167,010; 2018 \$98,260; 2017 \$78,579
- SWMN Private Industry Council (Montevideo, MN) – 01/01/21 to 12/31/22;** MFIP/DWP Regional Plan, regionalization of employment and training services, host county is Chippewa, allocation of \$745,768 (decrease \$9,817) (renewal).
Fiscal Note:
- William Toulouse, Quarnstrom & Doering PA (Marshall, MN) - 01/01/21 – 12/31/21;** Legal services for agency, \$2,833.34/month or \$34,000 annually (3% increase) (renewal).
Fiscal Note: 2020 \$37,484; 2019 \$36,684; 2018 \$28,800; 2017 \$28,800
- Woodland Centers (various locations) – 01/01/21 – open;** Agreement covering data sharing, HIPAA and privacy rules (renewal).
- Woodland Centers (various locations) – 01/01/21 to 12/31/21;** Crisis stabilization services, adult per diem at \$395 (5.5% increase), youth per diem at \$555 (no increase), and detoxification \$580 (no increase) (renewal).
Fiscal Note: 2020 \$78,590; 2019 \$53,574; 2018 \$23,466; 2017 \$17,540
- Western Mental Health Center Inc (various locations) – 01/01/21 to 12/31/21;** Mental health services (block grant) to provide adult and children’s outpatient treatment, crisis treatment, medication management, diagnostic assessment, and consultation, \$611,908 (no increase) (renewal).
Fiscal Note: all program areas – 2020 \$1,082,003; 2019 \$1,175,979; 2018 \$1,297,836
- Western Mental Health Center Inc (various locations) – 01/01/21 to 12/31/21;** In Home Family Therapy services, \$25,000 or \$6,250/qtr (decreased) (renewal).

- Western Mental Health (Marshall, MN) – 01/01/21 to 12/31/21;** Contract for parenting classes (\$3,000/qtr for Parenting 101 Group – no change) and individual parent education (\$74.08/hr with a \$60,000 cap - \$2/hour increase) (renewal).
- Western Mental Health Center Inc (various locations) – 01/01/21 to 12/31/21;** Family Community Support Program, CCBMHS grant \$33,300 and FCSP \$5,000 – contractor agrees to provide up to 2 hours/week for 52 weeks of clinical supervision (no increase) (renewal).
- Western Mental Health Center Inc (various locations) – 01/01/21 to 12/31/21;** Adult Community Support Program, MH Practitioner \$72.08/hr (\$2/hour increase), Community Support Aide \$34.00/hr (\$2/hour increase), ARMHS Individual Service \$74.08/hr (\$2/hour increase), ARMHS group service \$32.50/hr (no increase), Certified Peer Specialist \$74.08/hr (\$2/hour increase); \$180,000 cap – additional dollars require approval (no increase) (renewal).
- Western Mental Health Center (Marshall, MN) – 01/01/21 to 12/31/21;** Mental health adult and children’s crisis response services, \$341,770 allocation with payment of \$85,442.50/qtr (14% increase)(renewal).
Fiscal Note: agency is a pass-through DHS MH Crisis Response Grant
- Western Mental Health Center Inc (Marshall, MN) – 07/01/20 to 06/30/21;** Adult and children targeted case management (TCM) for public assistance programs; DHS sets SFY rate of reimbursement: adult rate \$512 (\$60 increase) and children’s rate \$660 (\$70 increase) (renewal).
Fiscal Note:
- Western Mental Health Center Inc Business Associate Agreement - 01/01/21 – open;** Agreement covering data sharing, HIPAA and privacy rules (renewal).

- Signatures None**
- Signatures Partial**
- Signatures Completed**

**2021 BOARD MEETINGS
SWHHS**

**All board meetings will be held in the
Commissioners Room
2nd Floor of Government Center**

Wednesday, January 20, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, February 17, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, March 17, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, April 21, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, May 19, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, June 23, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, July 21, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, August 18, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, September 15, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, October 20, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, November 17, 2021
Marshall
607 West Main Street (Government Center)

Wednesday, December 15, 2021
Marshall
607 West Main Street (Government Center)