A) CALL TO ORDER

B) PLEDGE OF ALLEGIANCE AND INVOCATION

C) ROLL CALL & APPROVAL OF THE AGENDA

D) CITIZEN COMMENTS
   All comments are limited to a maximum of three minutes for each speaker. In accordance with the Open Meetings Act, City Council members may not discuss or take action on any item that is not on the Agenda.

E) CONSENT AGENDA
   These items are routine and enacted by one motion. There will be no separate discussion of these items unless a Council member so requests. Any consent agenda item can be removed and placed on the agenda as an item of business.
   1. Approval of Minutes
      a. Regular Meeting – October 15, 2018
      b. Special Meetings – October 25, October 27, October 29, 2018
   2. Appropriation Ordinance
      a. Ordinance #1135

F) ITEMS OF BUSINESS
   1. Authorize the purchase of the following used pickup vehicles:
      a. 2017 Chevrolet Silverado 1500, 4W Drive (18,000 miles) for $31,995.00 to replace a donate 2001 Dodge pickup with 198,365 miles to be paid for from the Electric Department annual budget.
      b. 2016 Chevrolet Silverado 1500 4W Drive (30,000 to 40,000 mile range) for $25,995.00 to replace a donated 1997 Chevrolet pickup with 250,740 miles to be paid for from the Street Department budget.
      c. 2016 Chevrolet Silverado 1500 4W Drive (30,000 to 40,000 mile range) for $25,995.00 to replace a donated 2002 Chevrolet pickup with 244,890 miles to be paid for from the Water Department budget.
   2. Consider a contract with Building Controls and Services (BCS) for Siemens Desigo CC 3.0 Migration software for a cost of $21,340 to be paid from the tornado donation fund.
   3. Consider approval of the Blue Cross-Blue Shield contract renewal for the period year beginning January 1, 2019.
   5. Consider a Resolution amending Section 8.5 “Firearms and Weapons” of the City of Greensburg Personnel Policy Handbook.

G) CITY STAFF REPORTS
   1. City budgetary status for the 9 months ending September 30, 2018.
   2. City storm water drainage

H) GOVERNING BODY COMMENTS
   1) ADJOURNMENT

NOTICE: SUBJECT TO REVISIONS

It is possible that sometime between 5:30 and 6:00 pm immediately prior to this meeting, during breaks, and directly after the meeting, a majority of the Governing Body may be present in the council chambers or lobby of City Hall. No one is excluded from these areas during those times.

To be placed on future agendas please contact Interim City Administrator Jay Newton at administrator@greensburgks.org or call City Offices at 620-723-2751.
Greensburg City Council  
October 15, 2018  
City Hall

A) CALL TO ORDER  
Mayor Robert Dixson called the October 15, 2018 meeting to order at 6:00 p.m.

B) PLEDGE OF ALLEGIANCE & INVOCATION  
The Pledge of Allegiance was said. The invocation was given by Tony Factor.

C) ROLL CALL & APPROVAL OF THE AGENDA  
Council Present: Matt Christenson, Mark Trummel, Pam Reves, and Haley Kern. Sandy Jungemann was absent. Trummel made a motion to approve the agenda as presented. The motion was seconded by Christenson and passed 4-0.

D) CITIZEN COMMENTS  
There were no comments from citizens.

E) CONSENT AGENDA  
Referencing the Appropriation Ordinance presented, Reves asked how many payments were owed to King Solar. City Clerk Christy Pyatt stated that King Solar requires ½ down. The payment on the Appropriation Ordinance is the first half, with the remainder to be paid upon completion of the project. Reves made a motion to approve the Consent Agenda. Trummel seconded. Motion passed 4-0.

F) ITEMS OF BUSINESS  
1. Authorize Purchase of a commercial lawn mower for the Public Works Department, to replace a 2004 mower.  
Interim City Administrator Jay Newton welcomed Danny Trent, City Mechanic, to the meeting to answer questions related to the requested purchase of a commercial lawn mower for the Public Works Department. Newton stated that he believes that more than just the City Administrator should be speaking for the City.

Newton presented quotes on 4 mowers, requesting the purchase of the Grasshopper 400 Diesel. This mower would replace the 2004 mower that was donated to the city at the time of the 2007 disaster. Staff has obtained a discounted price of $14,715 for the unit, which meets the specifications set by Staff. Dixson asked if the proposed purchase was a mid-mount, which Newton confirmed. Trent commented that he has received excellent service on the city’s other Grasshopper mower, and that parts are generally available locally. Trent pointed out that the motor and spindle are double the size on the proposed mower. Staff prefers a diesel motor and rear discharge. Trent stated that parts for the proposed mower are interchangeable with the city’s other Grasshopper mower. Staff plans to keep the John Deere mower that they have. Trent stated that it was worth more to keep the mower, to use on areas with steep slopes, than it was to trade it. Last year Trent priced a new deck for the John Deere, which he has patched and repaired many times. He was quoted $5,000. He explained that the deck of the Grasshopper is built heavier than the John Deere was.

Trummel made a motion, seconded by Kern, to purchase the Grasshopper 400 Diesel for $14,715. The motion passed 4-0.

Dixson asked if Staff needed a trailer to transport the mower. Newton and Trent confirmed that a trailer that fits within the Administration spending authority is on order, and that it will be able to transport mowers, as well as the City’s scissor lift.
Trent recommended to Council that 80% of any money collected through the abatement of properties with weeds be placed in the Parks Fund to assist with mower repairs. Council advised that very little of the fees charged to the properties is ever collected.

2. Consider Authorizing the purchase of a 20’ x 40’ shelter to be located at the park where the swimming pool is located.
Newton has been told that completion of the one block area around the city swimming pool, as a park, is a priority of the Council. Newton pointed out that no formal name has been designated for the pool or park. One major element of the project will be the construction of a shelter that would accommodate a large family or group gathering. Newton has contacted ATHCO, the supplier of the shelter behind the Big Well (20’x 20’) and requested a proposal for a 20’ x 40’ shelter. The appearance would match that of the Big Well shelter, with a green metal roof, poured concrete floor, and stone work supporting the columns. A water fountain, electrical outlets, and lighting for evening use would be included in the project. The cost of the shelter is within funds available for park purchases. Assembly would be done by employees, as was the shelter at the Big Well. The concrete and stone work would be bid out. Dixson concurred that continuity between the parks should be a focus.

Dixson and Newton spoke to the location of the shelter, which will be determined at a later date, with the possibility of needing to relocate a tree or two. Trent asked about a shelter for the empty lot across the street from City Hall. Dixson asked about a place to store the materials if the weather is not conducive to construction. Trent confirmed that there was room to store materials at the shop.

Kern made a motion, seconded by Reves, to purchase a 20’ x 40’ shelter from ATHCO. The motion passed 4-0. A copy of the original landfill contract was included in the packet. Newton had previously recommended utilizing money from the sanitation reserve fund that has recently become available per the contract.

3. Consider approval of applications for State funding of improvement of the Greensburg Municipal Airport.
Pyatt and Newton have been in contact with Lochner, the City’s airport engineers. Updated applications for continued development of the airport have been proposed by Lochner and were made available in the meeting packet. A 10% City share for the three applications would be $335,000. Local share funds are currently available. Newton recommended Council continue to look at developing business guidelines by which the City would retain management of the property.

Trummel made a motion to approve the proposed applications for submittal to KDOT-Aviation. Kern seconded, and the motion passed 4-0. Reves asked if a motion should also be made regarding the preservation of funds for the project. Reves made a motion to reserve enough funds for the required local match. Trummel seconded. Motion passed 4-0. Pyatt explained that grant recipients are typically announced early in the year, with funds made available in July.

4. Convene to Executive Session to discuss matters of non-elected personnel.
Dixson requested Staff Reports and Governing Body Comments prior to convening executive session.

Trummel made a motion, seconded by Christenson, to go into executive session for 45 minutes, until 7:15 p.m. for matters of non-elected personnel. The motion passed 4-0.

G) CITY STAFF REPORTS
After researching the topic, Newton has discovered that the County Commission is correct
in its understanding of who is responsible for maintenance of the large drainage ditch the runs east along Grant Street, outside of city limits. Newton will continue to review the issue, determining if the city owns the property or was legally given easement.

H) GOVERNING BODY COMMENTS.
Kern asked if Staff was still draining the primary lagoon, for structural evaluation. Newton confirmed that the process was ongoing. Utility Superintendent Kendall has advised that he will need to rent or borrow a larger pump.

I) ADJOURNMENT
Council returned to open session at 7:15 p.m. Council President Christenson advised the Clerk that upon entering executive session, Dixson recused himself for the remainder of the meeting and left the building. With no additional items to discuss, Christenson declared the meeting adjourned at 7:17 p.m.

___________________________________   ________________________________
Robert A. Dixson, Mayor    Christy Pyatt, City Clerk
A) CALL TO ORDER
Mayor Robert Dixson called the October 25, 2018 Special Council meeting to order at 6:00 p.m.

B) ROLL CALL
Council Present: Mark Trummel, Pam Reves, Matt Christenson, Haley Kern, and Sandy Jungemann. Interim Administrator Jay Newton and City Clerk Christy Pyatt were also present.

C) ITEMS OF BUSINESS
   1. Executive session to review City Administrator interview process
Dixson addressed the Council and presented a letter of resignation effective immediately, stating that it was his understanding that his daughter had applied for the City Administrator position. Council thanked Dixson for his years of service as he left the meeting. Newton recommended community recognition of Dixson’s years of service. The Council acknowledged the resignation, but did not take official action.

Trummel made a motion to go into executive session for non-elected personnel until 6:30 p.m. Kern seconded. Motion passed 4-0. (Christenson assumed the position of Mayor and will vote only to break a tie vote of the Council.)

Mayor Christenson convened open session at 6:30 p.m. Christenson announced the need for a Special Council Meeting Monday, October 29th at 6 p.m. at City Hall. Council will go into executive session for non-elected personnel.

D) ADJOURNMENT
Christenson declared the meeting adjourned at 6:31 p.m.

___________________________________   ______________________________
Matthew Christenson, Mayor    Christy Pyatt, City Clerk
Greensburg City Council
SPECIAL CITY COUNCIL MEETING
October 27, 2018
City Hall

A) CALL TO ORDER
Mayor Matt Christenson called the October 27, 2018 Special Council meeting to order at 9:25 a.m.

B) ROLL CALL
Council Present: Mark Trummel, Pam Reves, Haley Kern, and Sandy Jungemann. (Council presently has one open seat). Interim Administrator Jay Newton, City Clerk Christy Pyatt, and one City Administrator applicant were also present.

C) ITEMS OF BUSINESS
   1. Executive session non-elected personnel – City Administrator applicant interviews
Kern made a motion, seconded by Trummel, to go into executive session to conduct City Administrator interviews until 12:30 p.m. Motion passed 4-0.

D) ADJOURNMENT
Christenson declared the meeting adjourned at 12:07 p.m.

___________________________________   ______________________________
Matthew Christenson, Mayor    Christy Pyatt, City Clerk
A) CALL TO ORDER
Mayor Matt Christenson called the October 29, 2018 Special Council meeting to order at 6:00 p.m.

B) ROLL CALL
Council Present: Mark Trummel, Pam Reves, Haley Kern, and Sandy Jungemann. (Council presently has one open seat). City Clerk Christy Pyatt and Chief Paul Alvarez were also present.

C) ITEMS OF BUSINESS
1. Executive session- discuss matters of non-elected personnel
Trummel made a motion, seconded by Jungemann, to go into executive session for non-elected personnel until 7:00 p.m. Motion passed 4-0.

Jungemann made a motion to go back into executive session for non-elected personnel until 7:30 p.m. Reves seconded. Motion passed 4-0.

D) ADJOURNMENT
Christenson declared the meeting adjourned at 7:24 p.m.

Matthew Christenson, Mayor
Christy Pyatt, City Clerk
<table>
<thead>
<tr>
<th>CHECK #</th>
<th>VENDOR</th>
<th>REFERENCE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>27050</td>
<td>KANSAS GAS SERVICE</td>
<td>GAS SERVICE</td>
<td>$ 137.35</td>
</tr>
<tr>
<td>27051</td>
<td>KANSAS POWER POOL</td>
<td>SEPTEMBER USAGE</td>
<td>$ 77,685.88</td>
</tr>
<tr>
<td>27052</td>
<td>ORKIN</td>
<td>MONTHLY PEST CONTROL</td>
<td>$ 121.09</td>
</tr>
<tr>
<td></td>
<td><em><strong><strong>PRE-PAID TOTAL</strong></strong></em></td>
<td></td>
<td>$ 77,944.32</td>
</tr>
<tr>
<td>27069</td>
<td>AMERICAN MUNICIPAL SERV</td>
<td>COLLECTION FEE FOR-2016-42</td>
<td>$ 51.15</td>
</tr>
<tr>
<td>27070</td>
<td>AMERICAN SAFETY UTILITY CORP</td>
<td>SALISBURY EYELET BLANKET</td>
<td>$ 417.47</td>
</tr>
<tr>
<td>27071</td>
<td>ANN DIXSON</td>
<td>REIMB MOTHER EARTH FAIR TRAVEL</td>
<td>$ 273.51</td>
</tr>
<tr>
<td>27072</td>
<td>APAC KANSAS</td>
<td>ASPHALT</td>
<td>$ 2,423.05</td>
</tr>
<tr>
<td>27073</td>
<td>AT&amp;T</td>
<td>316A67-0010 183-1</td>
<td>$ 2,004.33</td>
</tr>
<tr>
<td>27074</td>
<td>B &amp; D LOCK &amp; KEY</td>
<td>FIX EVIDENTS DOOR LOCK</td>
<td>$ 200.00</td>
</tr>
<tr>
<td>27075</td>
<td>BEST WESTERN PLUS</td>
<td>JAY NEWTON STAY IN GREENSBURG</td>
<td>$ 398.04</td>
</tr>
<tr>
<td>27076</td>
<td>CANDY BARN EXPRESS</td>
<td>CANDY FOR RESALE</td>
<td>$ 277.66</td>
</tr>
<tr>
<td>27077</td>
<td>CHOICE BOOKS</td>
<td></td>
<td>$ 48.66</td>
</tr>
<tr>
<td>27078</td>
<td>CHRISTMAS DONE BRIGHT</td>
<td>BOY ON SLIDE. SEESAW,ON SWING</td>
<td>$ 3,487.00</td>
</tr>
<tr>
<td>27079</td>
<td>CITY OF GREENSBURG</td>
<td>BIG WELL RENT NOV</td>
<td>$ 10,801.22</td>
</tr>
<tr>
<td>27080</td>
<td>CLUNE &amp; COMPANY LC</td>
<td>LEASE # 21425 COPIER</td>
<td>$ 100.85</td>
</tr>
<tr>
<td>27081</td>
<td>D.C.&amp; B. SUPPLY INC.</td>
<td>12' REPAIR CLAMP</td>
<td>$ 460.72</td>
</tr>
<tr>
<td>27082</td>
<td>GALLS</td>
<td>NECK DICKIE,BOOTS, INSOLES</td>
<td>$ 244.18</td>
</tr>
<tr>
<td>27083</td>
<td>GREENSBURG FRA</td>
<td>BROOKE HARSHAW 15% INSUR.</td>
<td>$ 36.41</td>
</tr>
<tr>
<td>27084</td>
<td>HAVILAND TELEPHONE CO.</td>
<td>FIBER</td>
<td>$ 732.95</td>
</tr>
<tr>
<td>27085</td>
<td>HEFT &amp; SONS, LLC</td>
<td>AIC SAND</td>
<td>$ 711.42</td>
</tr>
<tr>
<td>27086</td>
<td>HOME LUMBER</td>
<td>DRAIN CLEANER</td>
<td>$ 342.14</td>
</tr>
<tr>
<td>27087</td>
<td>HUTCHINSON NEWS</td>
<td>RENEW SUBSCRIPTION</td>
<td>$ 259.51</td>
</tr>
<tr>
<td>27088</td>
<td>J.P. COOKE CO.</td>
<td>2018 DOG TAGS /HOOKS/BOOKS</td>
<td>$ 97.56</td>
</tr>
<tr>
<td>27089</td>
<td>JAY NEWTON</td>
<td>OCT 15- NOV 4 2018</td>
<td>$ 4,179.84</td>
</tr>
<tr>
<td>27090</td>
<td>KANSAS ONE-CALL SYSTEM,INC.</td>
<td>LOCATES</td>
<td>$ 16.80</td>
</tr>
<tr>
<td>27091</td>
<td>KERBS LAW OFFICE</td>
<td>ABATEMENT NOTICES</td>
<td>$ 92.50</td>
</tr>
<tr>
<td>27092</td>
<td>KING SOLAR INC.</td>
<td>2ND PAYMENT 2016 HAIL CLAIM</td>
<td>$ 4,268.00</td>
</tr>
<tr>
<td>27093</td>
<td>KIOWA SUPPLY</td>
<td>2' PVC WATER DEPT.</td>
<td>$ 16.38</td>
</tr>
<tr>
<td>27094</td>
<td>KS AG AND RURAL LEADERSHIP,INC</td>
<td>'SHARING YOUR STORY'</td>
<td>$ 500.00</td>
</tr>
<tr>
<td>27095</td>
<td>LEAGUE OF NEBRASKA MUNICIPAL</td>
<td>CITY ADMIN. AD</td>
<td>$ 85.80</td>
</tr>
<tr>
<td>27096</td>
<td>LUMINOUS NEON INC</td>
<td></td>
<td>$ 1,110.00</td>
</tr>
<tr>
<td>27097</td>
<td>MORIDGE MANUFACTURING, INC.</td>
<td>MODAL 400D-1.3L W 72’DECK</td>
<td>$ 14,317.55</td>
</tr>
<tr>
<td>27098</td>
<td>MORPHY TRACTOR &amp; EQUIPMENT</td>
<td>STARTER/ CORE/ SWITCH</td>
<td>$ 605.23</td>
</tr>
<tr>
<td>27099</td>
<td>NISLY BROTHERS TRASH SERV</td>
<td>TRASH SERVICE</td>
<td>$ 9,454.63</td>
</tr>
<tr>
<td>27100</td>
<td>OFFICE SOLUTIONS</td>
<td>SONIC WALLS/ SUPPLIES/CELL</td>
<td>$ 2,272.98</td>
</tr>
<tr>
<td>27101</td>
<td>OGDEN PUBLICATIONS</td>
<td>KSM FALL 18</td>
<td>$ 855.00</td>
</tr>
<tr>
<td>27102</td>
<td>ORKIN</td>
<td>PEST CONTROL</td>
<td>$ 121.09</td>
</tr>
<tr>
<td>27103</td>
<td>PEOPLES BANK GREENSBURG</td>
<td>MOTEL/ CAR RENTAL/MEALS/GAS/</td>
<td>$ 4,404.88</td>
</tr>
<tr>
<td>27104</td>
<td>PROTECTIVE EQUIP. TESTING LAB</td>
<td>BLANKET TEST/ INSULATED JUMPE</td>
<td>$ 2,124.55</td>
</tr>
<tr>
<td>27105</td>
<td>REAL TIME PRODUCTS</td>
<td>RESALE ITEMS</td>
<td>$ 565.62</td>
</tr>
<tr>
<td>27106</td>
<td>STACY BARNES</td>
<td>MILES FOR ANNUAL KS TOURISM</td>
<td>$ 183.60</td>
</tr>
<tr>
<td>27107</td>
<td>STANION WHOLESAL ELEC.</td>
<td></td>
<td>$ 237.70</td>
</tr>
<tr>
<td>27108</td>
<td>TERRI FRANCIS</td>
<td>ITEMS FOR RESALE</td>
<td>$ 10.00</td>
</tr>
<tr>
<td>27109</td>
<td>TWILIGHT THEATRE, INC</td>
<td>SPONSORSHIP FOR LOGAN MIZE CON</td>
<td>$ 500.00</td>
</tr>
<tr>
<td>27110</td>
<td>VERIZON</td>
<td>PHONE</td>
<td>$ 1,564.96</td>
</tr>
<tr>
<td>27111</td>
<td>VOLZ</td>
<td>FUEL/ATF/GREASE/GREASE GUN</td>
<td>$ 2,474.46</td>
</tr>
<tr>
<td></td>
<td>**** PAID TOTAL *****</td>
<td></td>
<td>$ 73,329.40</td>
</tr>
<tr>
<td></td>
<td>***** REPORT TOTAL *****</td>
<td></td>
<td>$ 151,273.72</td>
</tr>
</tbody>
</table>
To :  Mayor and City Council
From:  Jay Newton,
       Interim City Administrator
Subject:  Agenda items F.1, F.2, F.3, F.4, and F.5

Agenda item  F.1:  Purchase of pre-owned vehicles
Since bringing the issue of purchasing used pickup vehicles to the City Council several months ago, I have been working with Mick, Mike and Danny to seek three lower mileage used vehicles to replace three pickups with near 200,000 to 250,000 miles each. The vehicles to be replaced are used vehicles, donated to the city soon after the tornado in 2007. The acquisition of replacement pickups and other recently acquired equipment should put the city in good shape.

It is proposed that payment for each vehicle be made directly from the operating budget of the department to receive the vehicle. This recommendation is made knowing that each budget, General Fund, Water and Electric Fund, will not exceed their adopted 2018 budget (thus no violation of the Cash Basis law) and that each budget will still have the cash balance forward as budgeted in the 2019 annual budget. The purchases can be made without using money from any of the reserve funds.

Photos and details of the pickups are attached.

Agenda item F.2:  Contract with Building Control & Services (BCS).
Christy has been working on this item with advice and suggestions from Mayor Christenson. The City has little alternative but to proceed with the new software. Otherwise there will be no control (or availability) of heating and cooling for City Hall, the Maintenance Facility or Incubator. Christy will have greater detail. Approval of the contract is recommended.

Agenda item F.3:  Renewal of BCBS health coverage.
The good news regarding the employee health insurance program for city employees is a contract that does not change employee/family health benefits and any increased premiums are small. Individual employee cost may decline slightly or increase slightly depending on changes of circumstance affecting the insured (some going off or on the plan, change in ages, etc.).
Christy has been working with the BCBS representative and has prepared an attached memorandum describing the changes. She can respond to questions you might have. The renewal of the contract with BCBS for employee health coverage is recommended.

Agenda item F.4: Addendum to Travel and Reimbursement Policy

When I prepared the City of Greensburg Personnel Policy Handbook in 2012 I noted that any employee proposing to travel submit a Travel Request and Reimbursement Form (Section 5.18). Apparently I did not prepare a form to accompany the policy as adopted the City Council at that time. A proposed Travel Request and Reimbursement form is attached for your review. It provides that approval is given by the Administrator prior to travel. Currently receipts, mileage and other expenses are made without a formal process or budget control. I have found this format useful and successful in other municipal settings and would recommend approval of a resolution to include this item in the City’s personnel policies.

Agenda item F.5: Proposed change in the Firearms and Weapons policy.

Current city policy (Section 8.5, Personnel Policy Handbook) “prohibits any employee or member of the public to possess, carry, or use weapons on property owned by the City.” This policy was valid when it was written in 2012. However, it is not valid now and a resolution is proposed to bring the City into compliance with the Personal and Family Protection Act (K.S.A. 75-7c01) acknowledging the right of City employees to carry concealed weapons while on the job working for the City, within the prescribed limits of the law. The resolution also provides for an Appendix G that provides “Frequently Asked Questions” that can serve as guidelines for employee use, public inquiry and liability protection for the City. Approval of this resolution is recommended.
Danny Trent <dthunting@hotmail.com>

Mon, 10/8, 8:59 AM

You

Sent from my iPhone

Begin forwarded message:

From: "donnie@dougrehchevrolet.com" <donnie@dougrehchevrolet.com>
Date: October 5, 2018 at 4:07:55 PM CDT
To: <dthunting@hotmail.com>
Subject: 2016 4x4 Chevrolet

2016 Chevrolet Silverado 1500 LS 4WD - $25,995

This is one I found I could get 2 of these with miles in the 30,000 - 40,000 range.

Option Codes

*IVH is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there questions about the vehicle’s original build or RPO information please refer to the original vehicle invoice or window stic

IL9 - 1LS PACKAGE
4D7 - INTERIOR TRIM
7GY - COMPONENT RFR LH COMPUTER
9X2 - COMPONENT RR RH NON-COMPUTER
A91 - REMOTE LOCKING TAILGATE
AKO - GLASS, DEEP-PRINTED
AQ2 - KEYLESS ENTRY
AXK - VEHICLE TYPE TRUCK
B30 - COLOR KEYED CARPET
B9F - GM PRODUCTION WEEK 008
BWN - CORNERSTEP, REAR BUMPER
C67 - AIR CONDITIONING
DXG - FLAT-TIRE FILL KIT
E63 - PICK UP BOX
FE9 - 50 STATE EMISSIONS
FLT - FLEET PROCESSING OPTION
GAY - SUMMIT WHITE
H2R - JET BLACK / DARK ASH
J03 - ANTILOCK BRAKES, 4 WHEEL DISC
K04 - ALTERNATOR, 150 AMPS
KND - TRANSMISSION OIL COOLER
KSB - M/LIGHT / TINTED GLASS
KTM - MARKETING AREA NORTH AMERICA
N33 - STEERING COLUMN, TILT
NGG - TRANSFER CASE, MANUAL
R5C - TIRE BRAND ALL BRIDGESTONE
RBH - FLG-WHEEL IDENTIFIER
RBF - 17" ALL-SEASON BLACKWALL TIRES
RDF - OPTIONS AND CUSTOMIZATIONS
SAF - SPARE TIRE LOCK
U2J - SIRIUS XM DELETE
UDC - DRIVER INFORMATION CENTER
UJM - TIRE PRESSURE MONITOR SYSTEM
UQ3 - ENHANCED AUDIO SPEAKERS
V46 - FRONT BUMPER, CHROME
V8B - VEHICLE STATEMENT
VHM - VEHICLE HEALTH MANAGEMENT
VKG - FRONT LICENSE PLATE BRACKET
VLP - VAT COMPONENT REL ROOF TRIM
VX3 - RECOVERY HOOKS, FRONT
VDE - SHIP THRU FREIGHT (KNAPHEIDE)
VJH - BUMPER, REAR CHROME
VQ1 - BODY SIDE MOLDINGS (4 PCS)
VQ3 - FLEET ORDERING AND ASSISTANCE
T7X - OWNERS MANUAL ENGLISH
2017 Chevrolet Silverado 1500 Custom Double Cab 4W $31995

This is a one owner clean Carfax with 18000 miles

Today’s Date: 08/30/2018
Project Name: City of Greensburg – Siemens Desigo CC 3.0 Migration
Submitted By: Miles Smith
Attention: Christy Pyatt (2 pages)

Building Controls and Services is pleased to submit pricing on the above project. For your convenience, I have prepared the following scope of work:

**Base Software Migration:**

**City of Greensburg – Desigo CC 3.0 Migration**
- Desigo CC 3.0 graphical workstation software - $10,717.00
  - Software Setup, Installation and Programming
  - Regenerated Customer Reports (24 reports)
  - Regenerated Events (19 events)
- Desigo Customer Training (16 Hrs) - $2,248.00
- New Desigo Animated Graphics (39 graphics) - $4,875.00
- PXC24 panel with virtual AEM license – $3,500.00
  - Additional panel is required to migrate to Desigo
  - Panel will require an additional network drop (provided by others)

**Work not included:**
- Computer Workstation (Provided by Owner)
- Additional client licenses
- Ethernet network connection (Provided by Owner)
- Server upgrade (Provided by Owner)

**Total Price: $21,340.00 (no tax)**

Annual Subscription Cost: $1,265.00
Subscription cost does not include installation labor
1. REMITTANCES All invoices shall be due and payable upon receipt in United States currency, free of exchange, or any other charges, or as otherwise agreed upon and set forth in writing by Building Controls and Services, Inc. (hereinafter called "Seller"). The Customer, if so requested, agrees to furnish Seller with all information including financial statements, necessary to make a proper credit appraisal. Refusal to supply information may cause this proposal to be withdrawn. Terms of payment originally granted are subject to the approval of continued credit status. Prices are subject to correction for error.

2. PROPOSALS are based upon straight-time labor. Any request by the customer for overtime work shall be considered an extra. This proposal expires 30 days after its date, subject to the provisions of the first sentence of the paragraph below entitled "Acceptance of Terms."

3. PROGRESS PAYMENTS Seller reserves the right to invoice Customer monthly as the work progresses, for all materials delivered to the job site or to an off-site facility and for all work performed on-site and off-site. Engineering, drafting and other mobilization costs incurred prior to installation shall be included in Seller's initial invoice and be equal to fifteen percent (15%) of the contract price. Invoices are due upon receipt by Customer. If the Customer becomes overdue in any progress payment, Seller shall be entitled to suspend work, shall be entitled to interest at the annual rate of 18% or the maximum permitted by the State of Kansas, and also to avail itself of any other legal remedies. Seller shall also be entitled to interest on all amounts retained by Customer from progress payments or otherwise. Customer agrees that he will pay and/or reimburse Seller for any and all reasonable attorney's fees which are incurred by Seller in the collection of amounts due and payable hereunder.

4. CANCELLATION AND SUSPENSION Any contract resulting from this proposal is subject to cancellation or instructions to suspend work by the customer only upon agreement to pay Seller adjustment charge.

5. TAXES The amount of any future sales, use, occupancy, excise, or other tax, federal, state, or local which Seller hereafter shall be obligated legally to pay, either on its own behalf or the Customer or otherwise, with respect to the material covered by this proposal, shall be added to such prices and paid by the Customer.

6. LOSS, DAMAGE OR DELAY Seller shall not be liable for any loss, damage, or delay occasioned by any causes beyond Seller's control, including, but not limited to, governmental actions or orders, embargoes, strikes, differences with workmen, fires, floods, accidents, or transportation delays. IN NO EVENT SHALL SELLER BE LIABLE FOR ANY CONSEQUENTIAL OR SPECIAL DAMAGES.

7. WARRANTY Seller warrants that the equipment manufactured and services furnished by it and covered by this proposal are free from defects in material and workmanship under normal use and service and, without charge, equipment found to be defective in material or workmanship will be repaired or replaced, if written notice of failure is received by Seller within one (1) year after date of installation, provided said equipment has been operated in accordance with Seller's instructions and provided such defects are not due to abuse, fire or decomposition by chemical or galvanic action. THIS EXPRESS WARRANTY IS IN LIEU OF AND EXCLUDES ALL OTHER WARRANTIES, GUARANTEES, OR REPRESENTATIONS, EXPRESS OR IMPLIED. THERE ARE NO IMPLIED WARRANTIES OF MERCHANTABILITY OR OF FITNESS FOR A PARTICULAR PURPOSE. Seller assumes no responsibility for repairs made on Seller's equipment unless done by Seller's authorized personnel, or by written authority from Seller. Seller makes no warranty with respect to material not manufactured by it.

8. PURCHASER'S REMEDIES The Customer's remedies with respect to equipment found to be defective in material or workmanship shall be limited exclusively to the right of repair or replacement of such defective equipment. IN NO EVENT SHAIL SELLER BE LIABLE FOR CLAIMS (BASED UPON BREACH OF IMPLIED WARRANTY) FOR ANY OTHER DAMAGES, WHETHER DIRECT, INDIRECT, CONSEQUENTIAL, OR SPECIAL OR FOR ANY EXPENSES INCURRED BY REASON OF THE USE OR MISUSE OF EQUIPMENT WHICH DOES OR DOES NOT CONFORM TO THE TERMS AND CONDITIONS OF ANY CONTRACT RESULTING FROM THIS PROPOSAL.

9. GOVERNING LAW Any contract resulting from this proposal shall be governed by, construed, and enforced in accordance with the laws of the State of Kansas.

10. CERTIFICATION The person whose signature appears on the attached hereof hereby certifies that, to his best knowledge and belief, the annexed bid is not the result of any agreement, arrangement or understanding between the Seller and any other manufacturer or seller of automatic temperature control systems, fire/life safety systems or security systems and that the prices, terms or conditions thereof have not been communicated by or on behalf of the Seller to any such person and will not be communicated to any such person prior to the official opening of said bid.

11. ACCEPTANCE OF TERMS This proposal shall become a binding contract between the Customer and Seller when accepted in writing by the Customer. Such acceptance shall be with mutual understanding that the terms and conditions of this proposal are a part thereof with the same effect as though signed by both parties named herein and shall prevail over any inconsistent provision of said order. No waiver, alteration, or modification of the terms and conditions on this and the attached hereof shall be binding unless in writing and signed by an authorized representative of Seller.
TO: Mayor and City Council
SUBJECT: 2019 BCBS Renewal
INITIATED BY: City Clerk

Background:
City Employee Health Insurance has been with BCBS of Kansas since January 2014. The City last went to bid for insurance in the fall of 2014. Staff intended to go to bid this fall for 2019 coverage, but with the resignation of Kyler Ludwig as Administrator in July, Staff has opted to delay bidding until 2019. BCBS of Kansas has provided rates and policy changes for 2019 and has requested the Council consider approval of an automatic renewal. The City pays 80% and employees pay 20% of the premium for their respective plans. Currently there are 8 full-time employees who utilize the City’s policy for themselves and their families. The remaining full-time employees are on a plan through their spouse’s employers, or they receive a set $250/month to apply toward a secondary insurance to their Medicare coverage.

Analysis:
Quoted premiums for 2019 reflect an overall increase of 1.5%. Individually, premiums saw a decrease of .46% to an increase of 3.52%. There were no adverse changes to the policy for 2019. BCBS has done an excellent job of keeping premium changes minimal the past 5 years, when so many other institutions saw drastic increases in premiums. Deductibles, coinsurance and co-pays will remain the same for 2019. Please see the attached “2019 Contract Changes Summary” for modifications to the policy.

Recommendations/Actions: It is recommended the City Council: Authorize Staff to sign a Small Group Automatic Renewal Form, contracting health insurance services with BCBS of Kansas for the 2019 coverage period.

Attachments: 2019 Contract Changes Summary; Summary of Benefits and Coverage
2019 Contract Changes Summary

BlueCare℠ Groups

Benefit Summary

- In-Network deductible will be $1,500/$3,000
- Out-of-Network deductible will be $3,500/$7,000
- In-Network coinsurance will be 20%
- Out-of-Network coinsurance will be 50%
- In-Network primary care office visit copayment will be $25 for the first five visits then from the sixth visit forward, subject to the deductible and coinsurance
- Out-of-Network primary care office visit will be subject to the deductible and coinsurance
- In-Network specialist office visit copayment will be $50
- Out-of-Network specialist office visit will be subject to the deductible and coinsurance
- In-Network out-of-pocket maximum will be $4,500/$9,000
- Out-of-Network out-of-pocket maximum will be $10,500/$21,000

Changes effective January 1, 2019 for all groups

Telemedicine – In accordance with state law, Telemedicine visits will no longer be limited to our designated telehealth provider (AmWell). Coverage will be subject to the appropriate cost share of an office visit, based on the provider type (PCP or specialist).

3D Mammography – will be covered the same as other mammograms

Changes effective at anniversary

Opiate Limitations – To address opiate abuse, Blue Cross and Blue Shield of Kansas may recommend members be limited to using one prescriber and one pharmacy.

Insulin Pumps and Supplies – Coverage for insulin pumps and supplies will move from the drug benefit section to the medical benefit section.

Site of Care – Sometimes the cost of administering certain drugs is extremely high. BCBSKS will work with our members and their providers to receive services at a cost effective location. If the drugs or services are not provided by an approved facility or provider, the services are non-covered.

Prescription drug program

Formulary – The list of preferred medication is subject to change periodically. Members can obtain the most accurate prescription drug coverage information by selecting the BCBSKS BlueCare/Kansas Solutions Medication List at bcbsks.com/drugs
**Summary of Benefits and Coverage:** What this Plan Covers & What You Pay For Covered Services

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, visit www.bcbsks.com/blueaccess or call 1-800-432-3990. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.bcbsks.com/blueaccess or call 1-800-432-3990 to request a copy.

<table>
<thead>
<tr>
<th>Important Questions</th>
<th>Answers</th>
<th>Why this Matters:</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the overall deductible?</td>
<td>$1,500 person / $3,000 family for In-Network. $3,500 person / $7,000 family for Out-of-Network. Doesn't apply to In-Network preventive care.</td>
<td>Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan, each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible. See a list of covered preventive services at <a href="https://www.healthcare.gov/coverage/preventive-care-benefits/">https://www.healthcare.gov/coverage/preventive-care-benefits/</a>.</td>
</tr>
<tr>
<td>Are there services covered before you meet your deductible?</td>
<td>Yes, preventive care.</td>
<td>You don’t have to meet deductibles for specific services.</td>
</tr>
<tr>
<td>Are there other deductibles for specific services?</td>
<td>No. There are no other specific deductibles.</td>
<td>The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan, they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.</td>
</tr>
<tr>
<td>What is the out-of-pocket limit for this plan?</td>
<td>$4,500 person / $9,000 family for In-Network only. $10,500 person / $21,000 family for Out-of-Network only.</td>
<td>Even though you pay these expenses, they don’t count toward the out-of-pocket limit.</td>
</tr>
<tr>
<td>What is not included in the out-of-pocket limit?</td>
<td>Premiums, balance-billing charges, and health care this plan doesn’t cover.</td>
<td>This plan uses a provider network. You will pay less if you use a provider in the plan’s network. You will pay the most if you use an out-of-network provider, and you might receive a bill from a provider for the difference between the provider’s charge and what your plan pays (balance billing).</td>
</tr>
<tr>
<td>Will you pay less if you use a network provider?</td>
<td>Yes. See <a href="http://www.bcbsks.com">www.bcbsks.com</a> /providerdirectory or call 1-800-432-3990 for a list of network providers.</td>
<td>You can see the specialist you choose without a referral.</td>
</tr>
<tr>
<td>Do you need a referral to see a specialist?</td>
<td>No.</td>
<td></td>
</tr>
</tbody>
</table>

All copayment and coinsurance costs shown in this chart are after your deductible has been met, if a deductible applies.

---

Questions: Call 1-800-432-3990 or visit us at www.bcbsks.com.

If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at www.cciio.cms.gov or call 1-800-432-3990 to request a copy.
<table>
<thead>
<tr>
<th>Common Medical Event</th>
<th>Services You May Need</th>
<th>What You Will Pay</th>
<th>Limitations, Exceptions, &amp; Other Important Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If you visit a health care provider’s office or clinic</strong></td>
<td>Primary care visit to treat an injury or illness</td>
<td>$25 copay/visit</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Specialist visit</td>
<td>$50 copay/visit</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Preventive care/screening/immunization</td>
<td>$0. Preventive is without cost share.</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td><strong>If you have a test</strong></td>
<td>Diagnostic test (x-ray, blood work)</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Imaging (CT/PET scans, MRIs)</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td><strong>If you need drugs to treat your illness or condition</strong></td>
<td>Generic drugs</td>
<td>$15 copay</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Preferred brand drugs</td>
<td>$50 copay</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Non-preferred brand drugs</td>
<td>$75 copay</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td><strong>More information about prescription drug coverage is available at <a href="http://www.bcbsks.com">www.bcbsks.com</a></strong></td>
<td>Specialty drugs</td>
<td>Formulary: $150 copay</td>
<td>Specialty Drugs must be obtained from the Blue Cross and Blue Shield of Kansas Designated Specialty Pharmacy. If a Specialty Prescription Drug is obtained from a Pharmacy other than our Designated Specialty Pharmacy, the drug will not be eligible for benefits.</td>
</tr>
<tr>
<td><strong>If you have outpatient surgery</strong></td>
<td>Facility fee (e.g., ambulatory surgery center)</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Physician/surgeon fees</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td><strong>If you need immediate medical attention</strong></td>
<td>Emergency room care</td>
<td>$300 copay then deductible and 20% coinsurance</td>
<td>$300 copay then deductible and 20% coinsurance</td>
</tr>
</tbody>
</table>

Questions: Call 1-800-432-3990 or visit us at www.bcbsks.com.
If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at www.cciio.cms.gov or call 1-800-432-3990 to request a copy.
<table>
<thead>
<tr>
<th>Common Medical Event</th>
<th>Services You May Need</th>
<th>What You Will Pay</th>
<th>Limitations, Exceptions, &amp; Other Important Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Network Provider (You will pay the least)</td>
<td>Out-of-Network Provider (You will pay the most)</td>
</tr>
<tr>
<td>If you need immediate medical attention</td>
<td>Emergency medical transportation</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 20% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Urgent care</td>
<td>Copay is applicable to the provider type</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td>If you have a hospital stay</td>
<td>Facility fee (e.g., hospital room)</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Physician/surgeon fees</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td>If you need mental health, behavioral health, or substance abuse services</td>
<td>Outpatient services</td>
<td>$25 copay/visit</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Inpatient services</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td>If you are pregnant</td>
<td>Office visits</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Childbirth/delivery professional services</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Childbirth/delivery facility services</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Home health care</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Rehabilitation services</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Habilitation services</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Skilled nursing care</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Durable medical equipment</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Hospice services</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
</tbody>
</table>

Questions: Call 1-800-432-3990 or visit us at www.bcbsks.com. If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at www.cciio.cms.gov or call 1-800-432-3990 to request a copy.
<table>
<thead>
<tr>
<th>Common Medical Event</th>
<th>Services You May Need</th>
<th>What You Will Pay</th>
<th>Limitations, Exceptions, &amp; Other Important Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Network Provider</td>
<td>Out-of-Network Provider</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(You will pay the least)</td>
<td>(You will pay the most)</td>
</tr>
<tr>
<td>If your child needs dental or eye care</td>
<td>Children's eye exam</td>
<td>$50 copay/visit</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Children's glasses</td>
<td>Deductible then 20% coinsurance</td>
<td>Deductible then 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>Children's dental check-up</td>
<td>$0. Children's dental check-ups are without cost share.</td>
<td>Deductible then 50% coinsurance</td>
</tr>
</tbody>
</table>

**Questions:** Call 1-800-432-3990 or visit us at [www.bcbsks.com](http://www.bcbsks.com). If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at [www.cctio.cms.gov](http://www.cctio.cms.gov) or call 1-800-432-3990 to request a copy.
Excluded Services & Other Covered Services:

**Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)**

<table>
<thead>
<tr>
<th>Excluded Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acupuncture</td>
</tr>
<tr>
<td>Bariatric surgery</td>
</tr>
<tr>
<td>Cosmetic surgery</td>
</tr>
<tr>
<td>Dental care (Adult)</td>
</tr>
<tr>
<td>Elective abortion services</td>
</tr>
<tr>
<td>Hearing aids</td>
</tr>
<tr>
<td>Long-term care</td>
</tr>
<tr>
<td>Weight loss programs</td>
</tr>
</tbody>
</table>

**Other Covered Services (Limitation may apply to these services. This isn’t a complete list. Please see your plan document.)**

<table>
<thead>
<tr>
<th>Other Covered Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infertility treatment</td>
</tr>
<tr>
<td>Non-emergency care when traveling outside the U.S.</td>
</tr>
<tr>
<td>Private-duty nursing</td>
</tr>
<tr>
<td>Routine eye care (Adult)</td>
</tr>
<tr>
<td>Routine foot care</td>
</tr>
<tr>
<td>Spinal manipulations</td>
</tr>
</tbody>
</table>

Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is: Blue Cross and Blue Shield of Kansas Customer Service at 1-800-432-3990. You may also contact your state insurance department, Kansas Insurance Department, 420 SW 9th Street, Topeka, Kansas 66612-1678, Phone: 800-432-2484, or visit [www.ksinsurance.org](http://www.ksinsurance.org), or the Department of Labor’s Employee Benefits Security Administration at 1-866-444-3272 or [www.dol.gov/ebsha/healthreform](http://www.dol.gov/ebsha/healthreform). Other coverage options may be available to you too, including buying individual insurance coverage through the Health Insurance Marketplace. For more information about the Marketplace, visit [www.HealthCare.gov](http://www.HealthCare.gov) or call 1-800-318-2596.

Your Grievance and Appeals Rights: There are agencies that can help if you have a complaint against your plan for a denial of a claim. This complaint is called a grievance or appeal. For more information about your rights, look at the explanation of benefits you will receive for that medical claim. Your plan documents also provide complete information to submit a claim, appeal, or a grievance for any reason to your plan. For more information about your rights, this notice, or assistance, contact: Customer Service at 1-800-432-3990 or you can visit [www.bcbsks.com/blueaccess](http://www.bcbsks.com/blueaccess), or the Kansas Insurance Department, 420 SW 9th Street, Topeka, Kansas 66612-1678, Phone: 800-432-2484, or visit [www.ksinsurance.org](http://www.ksinsurance.org), or the Department of Labor’s Employee Benefits Security Administration at 1-866-444-3272 or [www.dol.gov/ebsha/healthreform](http://www.dol.gov/ebsha/healthreform).

Does this plan provide Minimum Essential Coverage? Yes
If you don’t have Minimum Essential Coverage for a month, you’ll have to make a payment when you file your tax return unless you qualify for an exemption from the requirement that you have health coverage for that month.

Does this plan meet the Minimum Value Standards? Yes
If your plan doesn’t meet the Minimum Value Standards, you may be eligible for a premium tax credit to help you pay for a plan through the Marketplace.

Questions: Call 1-800-432-3990 or visit us at [www.bcbsks.com](http://www.bcbsks.com).
If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at [www.eclio.cms.gov](http://www.eclio.cms.gov) or call 1-800-432-3990 to request a copy.
## Language Access Services:

<table>
<thead>
<tr>
<th>Language</th>
<th>Service Description</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Spanish (Español):</strong></td>
<td>Para obtener asistencia en Español, llame al</td>
<td>1-800-432-3990</td>
</tr>
<tr>
<td><strong>Tagalog (Tagalog):</strong></td>
<td>Kung kailangan ninyo ang tulong sa Tagalog tumawag sa</td>
<td>1-800-432-3990</td>
</tr>
<tr>
<td><strong>Chinese (中文):</strong></td>
<td>如果需要中文的帮助，请拨打这个号码</td>
<td>1-800-432-3990</td>
</tr>
<tr>
<td><strong>Navajo (Dine):</strong></td>
<td>Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne'</td>
<td>1-800-432-3990</td>
</tr>
</tbody>
</table>

---

*To see examples of how this plan might cover costs for a sample medical situation, see the next section.*

---

**Questions:** Call **1-800-432-3990** or visit us at [www.bcbsks.com](http://www.bcbsks.com). If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at [www.cciio.cms.gov](http://www.cciio.cms.gov) or call **1-800-432-3990** to request a copy.
About these Coverage Examples:

**This is not a cost estimator.** Treatments shown are just examples of how your plan might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your providers charge, and many other factors. Focus on the cost sharing amounts (deductibles, copayments and coinsurance) and excluded services under the plan. Use this information to compare the portion of costs you might pay under different health plans. Please note these coverage examples are based on self-only coverage.

<table>
<thead>
<tr>
<th>Peg is Having a Baby (9 months of in-network pre-natal care and a hospital delivery)</th>
<th>Managing Joe's type 2 Diabetes (a year of routine in-network care of a well-controlled condition)</th>
<th>Mia's Simple Fracture (in-network emergency room visit and follow-up care)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The plan's overall deductible</td>
<td>$1500</td>
<td>The plan's overall deductible</td>
</tr>
<tr>
<td>Specialist copay</td>
<td>$50</td>
<td>Specialist copay</td>
</tr>
<tr>
<td>Hospital (facility) coinsurance</td>
<td>20%</td>
<td>Hospital (facility) coinsurance</td>
</tr>
<tr>
<td>Other coinsurance</td>
<td>20%</td>
<td>Other coinsurance</td>
</tr>
</tbody>
</table>

This EXAMPLE event includes services like:
- Specialist office visits (prenatal care)
- Childbirth/Delivery Professional Services
- Childbirth/Delivery Facility Services
- Diagnostic tests (ultrasounds and blood work)
- Specialist visit (anesthesia)

Total Example Cost: $12840

In this example, Peg would pay:

Cost Sharing:
- Deductibles: $1500
- Copayments: $110
- Coinsurance: $2480

What isn't covered:
- Limits or exclusions: $60

The total Peg would pay is: $4150

This EXAMPLE event includes services like:
- Primary care physician office visits (including disease education)
- Diagnostic tests (blood work)
- Prescription drugs
- Durable medical equipment (glucose meter)

Total Example Cost: $7460

In this example, Joe would pay:

Cost Sharing:
- Deductibles: $1500
- Copayments: $1415
- Coinsurance: $372

What isn't covered:
- Limits or exclusions: $55

The total Joe would pay is: $3342

This EXAMPLE event includes services like:
- Emergency room care (including medical supplies)
- Diagnostic test (x-ray)
- Durable medical equipment (crutches)
- Rehabilitation services (physical therapy)

Total Example Cost: $2124

In this example, Mia would pay:

Cost Sharing:
- Deductibles: $859
- Copayments: $1050
- Coinsurance: $215

What isn't covered:
- Limits or exclusions: $0

The total Mia would pay is: $2124

The plan would be responsible for the other costs of these EXAMPLE covered services.

Questions: Call 1-800-432-3990 or visit us at www.bcbsks.com.
If you aren’t clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at www.cccio.cms.gov or call 1-800-432-3990 to request a copy.
Blue Cross and Blue Shield of Kansas is an independent licensee of the Blue Cross Blue Shield Association.
BlueCarePremier Grp 01/19
A RESOLUTION ADDING AN ADDENDUM TO THE APPROVAL PORTION OF SECTION 5.18 TRAVEL AND REIMBURSEMENT OF THE PERSONNEL POLICY HANDBOOK FOR THE CITY OF GREENSBURG, KANSAS AND ADDING APPENDIX F TRAVEL REQUEST AND REIMBURSEMENT FORM ADOPTED BY THE GREENSBURG CITY COUNCIL.

WHEREAS, Kansas Statutes provide that a city may exercise the powers of home rule to determine its local affairs, and the City of Greensburg, Kansas is a City of the Third Class as defined by Kansas Statute; and

WHEREAS, the City of Greensburg has established personnel policies for all City of Greensburg employees in the form of a Position Personnel Policy Handbook to be administered by the City Administrator; and

WHEREAS, the City of Greensburg has determined that an addendum should be added to the Approval portion of Section 5.18 Travel and Reimbursement and Appendix F should be added to the City's Personnel Policy Handbook:

THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF GREENSBURG, KANSAS that the Approval portion of Section 5.18 of the Personnel Policy Handbook should be and hereby is amended to read as follows:

“5.18 Travel and Reimbursement

Approval: All expenses must be itemized and submitted to the City Administrator for approval on a City of Greensburg Travel Request and Reimbursement Form with receipts attached. (See Appendix F) All travel shall be budgeted and receive prior approval from the Department Head and the City Administrator. Out of state travel will not be approved unless specifically budgeted and approved as a line item for “travel” in the annual budget or as an exception to the budget as approved by the City Council and recommended by the City Administrator.”

BE IT FURTHER RESOLVED that Appendix F Travel and Reimbursement Form be added to the Personnel Policy Handbook.

BE IT FURTHER RESOLVED that the above addendums shall be effective from the date of its adoption.

BE IT FURTHER RESOLVED that as hereby amended the City of Greensburg Personnel Policy Handbook shall remain in full force and effect in accordance with its terms.

Passed and adopted this 5th day of November, 2018.

_______________________________
Matthew Christenson, Mayor

ATTESTED:

_________________________
Christy Pyatt
City Clerk
City of Greensburg
Travel Request & Expense Report

Travel Request – Part I
Employee(s): ____________________________      Department: ____________________________
Request Date: ___________________________      Travel Date(s): __________________________
Travel Event: _____________________________________________________________________
Method of Travel: Approval:
☐ City Vehicle  Dept. Head: ____________________________ Date:___________
☐ Private Vehicle City Admin.: ____________________________ Date:___________
☐ Other

Expense Report – Part II
Lodging:  
_____ days @ $________ per day  Reservations: Credit Card: X__________ __ __ __ __
Transportation:  Fees: (Registration, Dues etc. – attach copy)
_____ miles @ $0.54 per mile  ☐ Mail with registration  $_________
Meals:
Number of Meals  Amount  ☐ Due upon arrival  $________
Breakfast  ________  $________  Miscellaneous Expenses:
Lunch  ________  $________  ☐ Tolls: $________  ☐ Phone: $________
Dinner  ________  $________  ☐ Taxi: $________  ☐ Other: $________
Total Amount:  $________  Total Amount:  $________
Total Employee Reimbursement Due: $________  (All receipts must be attached for reimbursement)

Any expense in excess of the City’s travel policies regarding per diem shall be paid by the employee.

I hereby certify that this is a true and accurate statement of actual expense incurred in accordance with the travel authorization. I understand the city will only pay reasonable and necessary expenses and will not pay for alcoholic beverages or extravagant charges unrelated to the purpose of the travel.

Requested by: ____________________________ Date: ________________
Dept. Head: ____________________________ City Admin.: ____________________________

Appendix F
City of Greensburg, Kansas  
Resolution 2018-05  

A RESOLUTION AMENDING SECTION 8.5 FIREARMS AND WEAPONS OF THE PERSONNEL POLICY HANDBOOK FOR THE CITY OF GREENSBURG, KANSAS AND REPEALING PREVIOUSLY ADOPTED FIREARMS AND WEAPONS POLICIES ADOPTED BY THE GREENSBURG CITY COUNCIL.

WHEREAS, Kansas Statutes provide that a city may exercise the powers of home rule to determine its local affairs, and the City of Greensburg, Kansas is a City of the Third Class as defined by Kansas Statute; and

WHEREAS, the City of Greensburg has established personnel policies for all City of Greensburg employees in the form of a Position Personnel Policy Handbook to be administered by the City Administrator; and

WHEREAS, the City of Greensburg has determined that an amendment should be made to the City’s Personnel Policy Handbook:

THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF GREENSBURG, KANSAS that Section 8.5 of the Personnel Policy Handbook should be and hereby is amended to read as follows:

“8.5 Possession of Weapons
a. Open Carry: City Employees in positions other than law enforcement shall be prohibited from open carry of weapons in any unsecured city building, city vehicle, city worksite or in the course of employment.
b. Concealed Carry: Except as provided by the Personal and Family Protection Act (PFPA), K.S.A. 75-7c01 et seq., the City acknowledges employee’s right to carry concealed handguns while in their personal vehicle and city owned vehicles. Carrying a concealed weapon is not within the scope of employment or required for any position. Any injury that an employee might incur by carry a concealed handgun is not covered under worker’s compensation. Employees may not store firearms in City vehicles. Employees shall abide by all laws related to concealed carry, such as not entering any building, private or public, prohibiting concealed carry. The City is not responsible for any lost or damaged weapons. See Appendix G concerning Frequently Asked Questions regarding open carry of weapons.”

BE IT FURTHER RESOLVED that the above amendment shall be effective from the date of its adoption.

BE IT FURTHER RESOLVED that as hereby amended the City of Greensburg Personnel Policy Handbook shall remain in full force and effect in accordance with its terms.

Passed and adopted this 5th day of November, 2018.

_______________________________
Matthew Christenson, Mayor

ATTESTED:

_______________________________
Christy Pyatt, City Clerk