

Horizon Community Health Board
Staff Restructuring Updates 2013–2014

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Summary of May 31, 2013 Mega-Staff Meeting

A joint meeting of the Douglas, Pope, and Stevens Traverse Grant Public Health staffs was held at the Hoffman Community Center on May 31, 2013 with approximately 70 participants from the 3 Public Health Departments in attendance. The discussion was facilitated by Deb Hengel.

As part of the introductions, each participant was asked to describe in one word what Public Health meant to them. Included in the staff descriptions of public health were the following words, including the number of times that each word was suggested:

Community (12), prevention (7), services (5), promotion (3), helpful (3), supportive (3), educational (3), compassion (3), ever-changing (2), wellness (2), outreach, proactive, caring, resource, innovative, busy, intervention, protect, challenging, holistic, diverse, collaboration, information, all-encompassing, under-rated, universal, important, love, umbrella and essential.

Following introductions, Deb Hengel asked participants to support the following general agreements:

- Respect each other
- Care for the people in the room
- Cooperate with the process and with each other so that time is used efficiently
- Honor each other by repeating the ideas that are shared, but not the individual that offered that idea

Deb Hengel then described the process that would be utilized for the remainder of the meeting and proceeded to ask each table to consider the first question related to their vision. "What do you see a strong public health system looking like?" Responses are summarized below, again with frequency of that response noted in parenthesis.

- Promoting Health, safe communities (12)
- Visible and present in the community (8)
- Offering good staff capacity with well trained staff (6)
- Able to provide a variety of services (5)
- Full of staff with healthy attitudes: happy, satisfied, caring, responsive, passionate staff (5)
- Collaborating with community partners (5)
- Available to provide a variety of services (5)
- Strong community relationships (4)
- Trustworthy, supportive and honest between leaders, staff and clients (4)
- Visionary with strong leadership (4)
- Providing open and strong communication (4)
- Respected by the medical community (3)
- Financially viable and fiscally accountable (3)
- Essential (3)
- Good leadership at all levels (3)
- Independent from Social Services (3)
- Traditional in the sense of community ideas and functions and yet changing due to cultural diversity, computer technology and changing family structures (2)
- Diverse (2)

- Responsive to the needs of the community and educating the community (2)
- Innovative, creative and progressive (2)
- Accessible to all populations (2)
- Organized, efficient and promotes shared services (2)
- Flexible (2)
- A strong organizational structure (2)
- Active, concerned and informed in current health issues (2)

Additional descriptions of a strong public health system included focused and concerned with protecting the public, captures the life cycle from birth to death, focused on a mission, welcoming, the “cutting edge”, working toward common goals, aware of community needs, inclusive, open and willing to change, professional and respectful of the privacy of others, providing outreach to clients and being client advocates, meeting the needs of the “really rural” communities, providing fair and comprehensive services in all areas, eager to serve and the backbone of the community with a variety of services to a variety of communities with a well-educated staff.

The next question presented for discussion at the tables was: “What is your perspective of why this 5-county public health integration is being considered?” Responses included the following:

- To be more competitive and have better access for obtaining grants (9)
- To remain independent of Social Services (9)
- For a strong Public health with a strong presence in our communities (7)
- To remain independent and secure (6)
- For financial security in the future (6)
- For shared services and staff – to integrate services (6)
- Efficiency – streamline community services (4)
- For survival – To remain “safe” in the future (4)
- To promote collaboration with other counties (3)
- For power and control (3)
- To be better able to acquire Public Health Accreditation (3)
- Pooled/shared resources (3)
- Cost effectiveness (2)
- Staff become more specialized (2)

Additional suggestions for why the integration is being considered included the decreasing populations in some counties, to remain visible in the community, to strengthen the working relationship among the five counties, to position ourselves for the future and to provide opportunities to expand services.

After moving to the next table, participants were asked to consider the following question: “What do you see as the benefits of this potential 5-county Public Health integration?” Responses included:

- Shared staff and opportunity to learn from one another– different and varied skill sets available (11)
- More grant opportunities (7)
- Shared resources – more staff resources available and more flexibility to fill in when needed (6)
- Ability to provide more services (5)
- Strengthen the collaboration that already exists (5)
- Specialized and more focused staff (5)
- Financially secure (5)
- Retaining the longevity of Public Health – keep it “alive” (4)
- Potential increase in pay, hours worked and benefits for some (4)
- Potential for a stronger union (3)
- Efficiencies, especially in processing – a time saver (2)
- Shared workload (2)
- Public Health accreditation (2)
- One computer system – improved technology (2)
- There are no benefits

In addition, participants cited the following potential benefits: county lines would fade for tracking client data and services, ability to reach more people, consistency and strength of programs across counties, opportunity to get staff into the “right seat on the bus”, opportunity to be more proactive and progressive rather than reactive, moving in one direction with common goals, increased education for our communities, potentially less distance for some clients to access services, and last but not least, bigger potlucks!

The final 2 questions presented for table discussion were:

“What are your concerns with how this potential 5-county public health department would function?”

“Do you have any personal fears of this proposed 5-county integration? If so, what are they and what would lessen them?”

Since the responses to the 2 questions seemed to be intertwined, they have been organized according to type of concern or fear. The additional questions that some participants submitted on the cards at the end of the meeting have been incorporated into these responses.

Many concerns regarding potential loss of employee benefits were expressed that included the following: need to have to reapply for current position, uncertainty regarding seniority, concern about loss of present union benefits, questions regarding vacation, sick leave and longevity benefits, concerns about being “forced” to join a union, potential loss of good insurance plan, questions regarding potential for early retirement package, concern about future PERA eligibility, concern about transfer of current benefits, change in work hours, potential difference in RN versus PHN position descriptions and job classifications, concern about job security, concern about decrease in pay, question regarding the availability of a health savings plan, desire to maintain flexible work week.

Staff generally stated that having written guarantees of future employment and benefits would lessen these concerns. Staff also want to be assured that their present retirement benefits get grandfathered into the new agency.

Other concerns/fears focused on logistical matters such as possible closing of offices, loss of County ID, getting “swallowed up” with potential loss of Public Health presence in smaller counties, fear of needing to relocate to a different office, increase in unproductive drive time, uncertain benefit to the people being served, concern about sacrificing opportunities for smaller grants because we would be “too big”, potential for staff to become too specialized, question regarding equal benefit to all counties, potential for public confusion, potential cost of the process including administrative costs and impact on the taxpayers, distribution of the costs among counties, potential difficulty in accessing management and supervisory staff, perception of a top-heavy organization with too many directors/supervisors and not enough staff, and concerns about the new governing board.

Staff had many suggestions for relieving these concerns/fears including leaving the structure as it currently looks, “if it’s not broken, why change”, and scrapping the integration plan completely.

Service-related concerns expressed were primarily focused on the potential loss of senior services, a concern about future of hospice in Douglas County, and general concerns that current services to the people would be disrupted.

Many concerns related to communication issues were also identified. Staff indicated they were not receiving consistent communication across the 5 counties and many felt they were still “in the dark” and not being told all the facts. Some expressed a fear of repercussion/reprimand if true thoughts and feelings were shared. Some staff stated that the presence of the Directors inhibited honest discussion. Many came to the meeting expecting more definitive answers to their specific concerns and wanted to know when those answers would be provided. There was a request that the Robert Wood Johnson Foundation grant duties be provided to the staff. Staff indicated a desire to meet separately with Boards of Commissioners and to have separate staff meetings. Staff also requested that their union representatives be allowed to be present at the Horizon Restructuring Committee meetings and suggested that the meetings should be recorded for all staff to listen to.

When asked how they might want to be involved in the 5-county integration process as it moves forward from here, staff expressed a desire to be a part of the decision-making process and that they be paid for their participation at the meetings. Some staff requested more frequent meetings while others stated that no more meetings should be held until the answers to their questions are available. A suggested approach to keep them informed was that a regular monthly update be provided to the staff of all 3 Public Health Departments.

Staff were then provided an opportunity to write down any additional questions/concerns that were not addressed during the mega-staff meeting. These questions were added to the list of questions/comments/concerns expressed at the meeting. Sandy Tubbs and Sharon Braaten then thanked everyone for their open and honest comments and suggestions. Although many of these questions cannot be answered at this time, they will help to guide the continued work of the Restructuring Committee so that answers to staff concerns and fears can be provided as soon as those answers are known. It was suggested that another mega-staff meeting be convened in the future but only when more answers can be provided. In the meantime, staff was encouraged to continue to share their fears and concerns with their Supervisor and/or Directors.

Deb Hengel closed with a thank you to everyone for their honesty and for maintaining their commitment to the general agreements of respect, care, cooperation and honor of their co-workers.



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Horizon Restructuring Update June 2013

This is the first in a series of monthly updates that will be compiled and distributed at the end of every month. It is intended to provide you with current, consistent information about the meetings, activities and discussions that have taken place during the previous month with the hope of keeping everyone well informed about the Restructuring Committee's work.

First of all, thank you for your honest and very thought-provoking input during the Mega-staff meeting on May 31. Your thoughts and comments will guide us as we continue to explore the potential for integration of our 3 Public Health Departments. All of those comments have been compiled and a summary document is being prepared. Copies of that summary will be distributed to all of you in the near future. It is anticipated that another mega-staff meeting will be convened but not until such time as there is some definitive information to share with you that will help in getting some of your questions answered.

The Restructuring Committee completed its individual meetings with the 5 county boards by meeting with the Stevens County Board on June 3, the Traverse County Board on June 4 and the Grant County Board on June 18. Meetings with the Pope and Douglas Boards were held in May. These meetings, like the mega-staff meeting, were intended to provide an update on the work of the Restructuring Committee to date as well as to respond to questions and listen to any concerns expressed by the individual boards. Philosophically, it seems that there is a great deal of support from the individual Boards, who believe that sharing or integrating government services is going to become more necessary in the future, not only for Public Health Departments, but other county departments as well. That being said, there is still concern about the financial impact of the integration on the 5 individual counties in terms of tax levy contribution. Ultimately, we believe that the final decision will be largely influenced by that factor. We hope to have sufficient financial information compiled by the end of the year in order to develop a multi-year budget projection, which will be an important part of the completed information packet that will be presented to each of the Boards.

On June 5, Sharon and Sandy invited the County Coordinators, County Auditors, Human Resource Directors, and IT Directors to an informational meeting to share with them the status of the 5-county initiative to explore integration and to gather their interest in potentially providing some of the "core services" to the proposed organization. Representatives from 3 of the 5 counties (Douglas, Pope and Stevens) participated in the discussion. After much discussion, there was general consensus among all present that the new organization would be best served by creating the internal capacity for these core services, such as payroll and benefits, human resources, etc. The exception to that recommendation was related to IT services as it was agreed that having contractual arrangements with all of the counties to address IT issues would best serve this new organization. The IT Directors from the 3 counties offered to get together and draft some ideas and recommendations for how this arrangement might work.

The Restructuring Committee met on June 13, 2013 and heard reports from the individual County Board meetings, the mega-staff meeting, the "core services" meeting and the proposals submitted by the 2 Personnel Consulting Firms. Of the two proposals from Trusight, Inc and Springsted, Inc., it was agreed that the Springsted proposal most consistently addressed the issues requested by the Horizon Restructuring Committee. Those issues included development of position descriptions, recommending a job classification system and the development of personnel policies for the proposed organization. In addition to addressing those specific

requests, Springsted also proposed the development of various funding formulas that could be applied to the distribution of the county tax levy. The Restructuring Committee accepted Springsted's proposal and authorized Sandy and Sharon to enter into a contractual agreement with them. As a first step, Sandy, Sharon and Kathy met with representatives from Springsted on Thursday, June 20 to confirm the details of the proposal and to establish a timeline for the completion of the activities. To get started, Springsted has requested and we are in the process of submitting to them some background information including current job descriptions, pay and benefit information, organizational charts, union contracts, personnel policies, current employee census information (date of hire, current pay grade and step, hours worked, etc) 3 years of individual department budgets, 3 years of audits, and revenue forecasts and projected funding sources. Much of the information has been submitted with the remainder to be forwarded to them by July 3. Springsted will begin reviewing all of this information to assure a thorough understanding of our current operations.

Springsted has also requested to meet with all of you in individual Public Health department staff meetings. We are in the process of getting those scheduled for July 15 and 16 and will be sending official notification of the meeting times and locations very soon. Sharon Klumpp from Springsted, Inc will share with you the process they will use to develop the job descriptions and the job classification system including opportunities for employee input. This will also be a time for you to ask questions and offer ideas or concerns about the process.

And, along with this Restructuring Committee activity, Sharon and Sandy have been working with the local hospitals in completing a community health assessment. While Public Health has long been charged with community health assessment, non-profit hospitals are also now required to complete a community needs assessment. It's been a pleasure to collaborate with them on this initiative. Last fall, Horizon entered into an agreement with the Center for Small Towns at the University of MN Morris to collect and compile the data/statistical/trend information about the health status of the residents of our 5 counties. This summer we are now seeking public input to better understand the perspective of the citizens who reside in our communities as to their perception of the most significant health issues. Community conversations, facilitated by Tobias Spanier from the University of MN Extension Service, were conducted in Stevens County on June 17 and Douglas County on June 18. About 30 community members attended each of those meetings and participated in round table discussions addressing predetermined questions. In Grant County, a community advisory committee has been convened with the first meeting held on June 13. A survey is now being distributed throughout the community. Once completed and the results compiled, the Advisory Committee will reconvene to identify the most significant unmet needs. In Pope County, Stratis Health will be facilitating the community input process on behalf of Glacial Ridge Hospital. Glacial Ridge has invited a number of community organizations to join them, including Public Health. The first meeting is scheduled for Wed, July 3 with a second meeting to be held July 16. The Wheaton Hospital, as a Sanford facility, completed its community input process by distributing a survey to gather information about public perspective. That survey was distributed last summer/fall as their community assessment had to be completed by the end of 2012. Working closely with the hospitals on this assessment process has been a very positive experience and will result in a much richer community input process than we've had in the past. We will be seeking your input through our staff meetings and look forward to sharing the results of the entire assessment process by the end of the year. We will then proceed with the development of a community health improvement plan in 2014.

It's certainly been a busy month. There's a lot of information packed into this monthly update so please feel free to stop in and talk with Sharon, Sandy or Kathy if you have questions about any of this. And you can expect another update at the end of July. Until then, do enjoy summer now that it's finally arrived.

Sharon, Sandy and Kathy



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Horizon Restructuring Update July 2013

The pace of Horizon Restructuring activities during July 2013 was somewhat slower than June, though working on the Position Analysis Questionnaires (PAQs) certainly is keeping everyone busy right now. Despite there being no meetings of either the Horizon Community Health Board or the Restructuring Committee during July, there was still plenty happening.

On June 28, 2013, Sharon and Sandy participated in the quarterly conference call with the staff from the Shared Services Learning Community (Robert Wood Johnson Foundation Grant). As part of the support that the SSLC provides to each of the grantees, quarterly conference calls are scheduled during which time we have the opportunity to share our progress over the past few months as well as identify for them our particular technical assistance needs. In addition, the SSLC staff are able to gather information from our experiences that they can then share with other grantees across the U.S.

During the June 28th call, we shared with them the many meetings that were conducted in June, many of which were focused on “change management” as opposed to the “project management” activities that have been our focus since beginning this exploration in 2012. The timing of our call and the “change management” work that Horizon has focused on resulted in a request from the SSLC staff that we share our experiences with the other grantees during the August 6th webinar. These are quarterly webinars that are facilitated by the SSLC for all 16 grantees from the U.S. Each webinar has a particular focus.....as luck would have it, they were planning to focus on change management. So we (Sandy, Sharon and Kathy) have spent some time preparing our portion of the presentation.

In addition, we were able to schedule the dates for the Horizon SSLC site visit, which has been set for Monday and Tuesday, October 28-29, 2013. The first day of the site visit will include time for us as project staff to talk with the SSLC staff about our work. We will also take them on a “road tour” of our project area. Tentatively, we plan to meet in Alexandria, have lunch in Glenwood, meet with the Horizon Restructuring Committee in Morris, then go on to Wheaton and Elbow Lake before returning to Alexandria. On Tuesday morning, we are planning a large group meeting at the Douglas County Public Works meeting room in Alexandria for all Commissioners from all 5 counties as well as County Coordinators and Social Service Directors. We are also planning for staff representatives from each of the 3 Public Health Departments to participate and will be talking with you about how to identify those representatives. The purpose of this large meeting is to provide an opportunity for the SSLC staff to share their perspectives on national efforts for cross-jurisdictional sharing as well as provide an opportunity for participants to ask questions of them. You will be hearing more about this as the date of the site visit gets closer.

The other major activity during July was the launch of the consulting contract with Springsted, Inc, the consulting company with whom we’ve entered into an agreement for the development of position descriptions, a position classification system, personnel policies and funding allocation formulas. The kickoff meetings with each of the 3 Public Health Departments were held on July 15 and 16. Since that time, the final Position Analysis Questionnaire (PAQ) has been distributed and hopefully all of you have received information about your opportunities to contribute to the development of the PAQ for your respective positions. If you are confused about this process, or have additional questions, please talk with Sandy, Sharon or Kathy. The PAQs are due to your respective Supervisor by August 9. The Supervisors will then review and comment on the

PAQs before submitting them to Springsted on August 16. From that point, Springsted will utilize the PAQs to draft position descriptions. As Sharon Klumpp indicated to all of you, you will have an opportunity to review and comment on your respective draft position descriptions. Exactly when that will happen is not known at this time but we will let you know the schedule as soon as we are provided with that.

An addition to each of the position descriptions will be the inclusion of core competencies for public health. These are the individual knowledge, skills and abilities that have been identified as essential for public health workers across the nation. The intended mastery of those skills will differ depending on one's background, job duties, and years of experience. The public health core competencies include the following:

- Analytical/assessment skills
- Policy development/Program planning skills
- Communication skills
- Cultural competency skills
- Community dimensions of practice skills
- Public health sciences skills
- Financial planning/Management skills
- Leadership and systems thinking skills

While these may seem rather abstract at this point, there are specific skills that are identified for each of these competencies that coincide with the particular public health position. With an eye on potential accreditation in the future, these competencies must be addressed in our public health position descriptions. Again, we will continue to share more information about these competencies in the upcoming months.

Finally, in an effort to begin addressing some of the questions that were brought forward at the May Mega-staff meeting, we will be including a Question and Answer (or Frequently Asked Questions) section to each of our monthly updates. We'll try to address questions for which we have definitive answers but will refrain from speculating about answers until we are certain of the response. We appreciate your patience as we work through this together.

FAQ

1. Q: Will we still be eligible for PERA?
A: Yes, a joint powers entity is recognized as a governmental unit, similar to a county, and therefore employees are eligible for PERA under the same guidelines as currently exist.

2. Q: Will offices be closed and employees be officed out of one or more central offices?
A: No, there would be no change in office locations resulting from the Horizon integration. Each of the 5 counties would continue to host the staff that are based in that county. It is important to understand that individual county boards must make local decisions about their facility needs that are completely outside of the decision-making authority of the Horizon Community Health Board. Those individual County Board decisions may result in the Public Health office being relocated to another facility in that county.

3. Q: Is it possible to review the Robert Wood Johnson Foundation grant deliverables?
A: Yes, the grant deliverables are attached along with this monthly update. Please know that many of the deliverables have since been modified and the timeframe has been significantly delayed. The RWJF staff have not required us to resubmit revised written documents as our project evolves, so what is attached is the original proposal that was developed a year ago. The changes in our deliverables are discussed as part of our quarterly conference calls with the SSLC staff but are not reflected in the attached document.

Stay tuned for another update in August.
Sharon, Sandy and Kathy



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Horizon Restructuring Update August 2013

The Horizon Restructuring Committee did not meet during the month of August, as much of the needed information is now in the hands of Springsted, Inc. However, although the Restructuring Committee did not meet, the full Horizon Community Health Board (CHB) did have its quarterly meeting on August 2 in Wheaton. Its regular business included an update on the proposed changes to the Local Public Health Act, Chapter 145A along with a number of fiscal issues and updates. They also heard a report of the Performance Improvement and Planning work, which includes restructuring activities. CHB members received an update on the contract with Springsted, including their meetings with the individual staffs from the 3 PH Departments and the current work on the Position Analysis Questionnaires (PAQs). We also shared with them the summary of the May 31 Mega-staff meeting. In particular, the CHB discussed the request from staff to have a physical presence at the Restructuring Committee meetings and be compensated for their participation. While the CHB acknowledged the staff's concerns and desire for greater involvement, the CHB does not agree that staff presence at the Restructuring Committee is the most appropriate means of achieving that outcome. Rather, the CHB asked that the Directors continue to communicate with the staff the summary of the Restructuring Committee meetings as well as all other activities related to the potential integration via the monthly updates. The CHB further reaffirmed that the Restructuring meetings, like the Horizon CHB meetings, are open to the public and that union representatives have been regular participants at these meetings in the past. Finally, the CHB asked that staff be reminded that the Restructuring Committee is a work group, or subcommittee, of the Horizon CHB, which is the governing board. However, any final decision regarding the integration of the 3 Public Health Departments into a single department will rest with each of the 5 individual county boards of commissioners.

In addition to that discussion, the Horizon Community Health Board members were presented with some of the preliminary planning for the Robert Wood Johnson Foundation Shared Services Learning Community site visit that is scheduled for October 28-29, 2013. Finally, the Board members received an update on the collaborative community health assessment process that is being coordinated between the non-profit hospitals in the 5 counties and the Public Health Departments within the Horizon area. Ultimately, a single community health assessment and community health improvement plan must be developed by Horizon and submitted to MDH by Feb 15, 2015.

In other activity related to the RWJ grant work with the Center for Sharing Public Health Services, Sandy and Sharon were invited to be presenters for a webinar training for the other 15 grantees across the country. This August 6 Webinar on Change Management featured a presentation by Michelle Flaherty, a consultant from Washington DC who has spent more than 20 years working with governmental entities experiencing organizational change. Her presentation was enlightening and generated some really good discussion. And it was a perfect lead-in to Sandy and Sharon's presentation that was almost a "case study" of Michelle's presentation. The training was well received and there were a number of great questions from some of the other grantees.

Finally, as the October 28-29 site visit by the staff from the Robert Wood Johnson Foundation gets closer, we wanted you to begin thinking about who will represent all of you at the large group meeting that is planned for the morning of Tuesday, October 29 at the Douglas County Public Works meeting room in Alexandria. As you all consider this, it might be helpful to know a little more about the goals of this meeting.

As you know, the staff from the Center for Sharing Public Health Services are working with 16 different sites across the nation, all of which are engaged in various degrees of cross-jurisdictional sharing. Their goal is to create an opportunity for all of us to learn from one another and for the Center for Sharing Public Health Services to gather and compile all of that information for future cross-jurisdictional sharing efforts across the country. An important part of that learning process is to have representatives from the Center, along with other grantees from across the country, make a site visit to each project. Two representatives from the Center are planning to make the visit to the Horizon Project. Other grantees have been invited but as of now, we do not know how many, if any, will join us.

Since this presents such a unique opportunity to learn more about the trends for sharing public health services across the country, we have invited all the Commissioners from all 5 counties, along with the County Coordinators and the Social Services Directors, to join in that discussion. We also think it would be a great opportunity for staff to hear about the “big picture” issues that are driving these cross-jurisdictional sharing initiatives. We expect that much of the meeting will involve a discussion of such things as how the voluntary public health accreditation process and health care reform will shape the public health service delivery in the future. No doubt, there will be some questions that are very specific to our 5 counties but we do not expect that this will be a forum for answering specific, detailed questions related to the proposed integration. So as you think about which staff might represent your respective PH Departments, please be mindful of the objectives for this meeting. Given the number of invitees, we would like to suggest that up to 5 individuals from each of the 3 Public Health Departments be selected to attend this meeting. We certainly hope that it will be a great learning opportunity for everyone. Please feel free to talk with Sandy, Sharon, Kathy or any one of the Public Health Supervisors if you have additional questions about this upcoming meeting.

And last, but not least, a few more issues that were raised at the May staff meeting:

FAQ

1. Q: Will we have to relocate? Where will my office be?
A: As we’ve considered the prospective organizational structure and the staff needed to carry out the work in each of the program areas, it has been our assumption that staff would continue to work from their current office locations, unless an opportunity to work from another location became available and there was an individual staff request to relocate to another location. Per the previous monthly update, there will continue to be a Public Health office in each of the 5 counties as there currently is.

2. Q: What vacation/sick/longevity/insurance benefits will be offered?
A: Unfortunately, we are still not able to answer these specific questions. Springsted, Inc has been asked to review our current benefit packages and then recommend various benefit packages that are somewhat aligned with current benefits but that also represent the most current trends in governmental benefits. Whatever recommendations Springsted proposes, it will ultimately be the decision of the Horizon Community Health Board and we expect there will be ample opportunity for discussion about those recommendations.

3. Q: What will our work week be?
A: As you know, currently 2 of the 3 PH Departments have full-time work weeks of 37.5 hours and one PH Department has a full-time work week of 35 hours. While we cannot say for certain what the full-time work week will be, we do know that it would be the same for all employees of the prospective organization. If you wish to offer your opinion on this matter, please feel free to do so.

As always, please feel free to stop in and talk with any one of us and watch for the next update in September.
Sharon, Sandy and Kathy



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Horizon Restructuring Update September 2013

Neither the Horizon Restructuring Committee nor the full Horizon Community Health Board met during the month of September. Rather, the primary restructuring activity has been the work of Springsted, Inc. in reviewing the position analysis questionnaires (PAQs) and now developing draft position descriptions from those PAQs. Some questions/clarifications were provided to Sharon Klumpp during a phone conference on September 9th. At that time, it was projected that the draft position descriptions would be available for review and comment by early October with final position descriptions completed by mid to late October. The proposed job classification system and potential pay grade should follow shortly after that. In the meantime, other staff at Springsted, Inc. have been working on a proposed personnel policy but nothing has been received to date.

Obviously, given the timelines with Springsted, Inc, the entire timeframe for Board action will once again be delayed. As of now (and hopefully this will be the last delay), it is expected that the information necessary for Board consideration and action will not be fully available until closer toward the end of 2013. This would mean that the second round of individual informational board meetings with the 5 County Boards will be scheduled in late Dec 2013 and January 2014 with official Board action requested in Feb and March 2014. The proposed implementation date of January 2015, if approved, would still be effective.

In addition to the individual Board meetings, we are planning another Mega-Staff meeting for either Dec 2013 or January 2014 in order to provide all of you with the same information that is being shared with the County Boards. We hope to get that meeting scheduled soon and will let you know as soon as possible so that you can reserve the date/time on your calendars.

In addition to the work with Springsted, Inc., we have been spending a fair amount of time planning for the Horizon site visit by the staff from the Center for Sharing Public Health Services (CSPHS), funded by the Robert Wood Johnson Foundation. That 2-day visit, as you know, is scheduled for October 28-29. As we've been talking with the staff from the CSPHS in the past couple of weeks, they have indicated to us that they hope to focus on 2 primary objectives during their Horizon site visit: 1) Operational issues and challenges and 2) Governance issues and challenges. In order to gain a better understanding of the operational issues related to integration, they have requested time to meet with a small group of staff representatives on the morning of Monday, October 28th. This meeting, led by the CSPHS staff, will include an informal discussion with the Directors, Supervisors and several staff representatives of the various programs and organizations. It will provide a great opportunity to interact with the CSPHS staff on a more personal level. We are committed to providing an opportunity for as many staff as possible to connect with the CSPHS staff, either through the Monday morning conversation or the Tuesday participation in the large group meeting so consideration will be given to all of those factors when identifying staff that will represent the varying perspectives and programs during the Monday morning conversation.

That afternoon, following a road tour through portions of our 5 counties, the CSPHS staff will meet with the Horizon Restructuring Committee to better understand issues related to governance. That meeting to discuss governance issues will occur in Morris.

On Tuesday, October 29th, the staff from the Center will meet with all Commissioners from the 5 counties as well as the County Coordinators, the Social Service Directors and staff representatives from the 3 Public Health

Departments. The purpose of that meeting is to gain a broader perspective of national and statewide trends as well as to provide an opportunity to interact with and ask questions of the staff from the Center for Sharing Public Health Services. As of September 30, there have been 6 interested staff members come forward in Douglas County, 5 staff members from Pope County and 3 staff members from STG Public Health. Confirmation to those that will attend the October 29th meeting will be sent out this week.

In addition to planning for the Horizon project site visit, the schedule of site visits to the other grant projects has also been released. Along with the schedule, the intended objectives and agendas for the other site visits has been developed. After reviewing those project objectives and assessing which of the other sites would provide the greatest possible learning experience for the Horizon project, we have officially requested to participate in the Ohio project site visit on Dec 2-4, 2013. As we previously discussed, we are hoping to be able to include one or more staff on this site visit but are still awaiting confirmation of how many participants we will be allowed to take to the Ohio site visit. The other deciding factor will be what our RWJ budget can accommodate. We are expecting to hear from the CSPHS staff this week regarding how many participants we can take to the Ohio site visit. Based on that number, we will quickly need to make travel plans.

And finally, we've been planning for the next Shared Services Learning Community meeting that has been scheduled for January 22-24 in San Diego. This is the second in a series of three SSLC meetings scheduled throughout the 2-year grant period. The project team leader(s) and governing board members are required to attend these meetings. Again, we are awaiting confirmation of how many participants they can accommodate at this meeting as well as our own budget limitations. The first meeting, held in Kansas City in March 2013, was extremely well-received and provided a great foundation for the work that we've done since that time. Now that we've become more familiar with the staff from the CSPHS, we are expecting a similar experience from the San Diego meeting.

With all of the recent activity with the Center for Sharing Public Health Services and the upcoming site visit and Shared Services Learning Community meeting, a meeting of the Horizon Restructuring Committee has been scheduled for Thursday, October 3, 2013 at 9:00 a.m. at the Douglas County Public Works Building in Alexandria. You can expect a full report of that meeting as well as the site visit with the October staff update.

Since there has been no further meetings of the Restructuring Committee or the Community Health Board, additional answers to many of the other questions raised at the May Mega-staff meeting will have to be delayed until such time as those answers are known. We are certainly aware that the uncertainty of not knowing all the answers creates some stress for all of you. We can only promise that we will get those answers to you as soon as we can. In the meantime, please do not hesitate to stop in and talk with any of us whenever you wish.

The next official staff update will be coming your way at the end of October and based on the schedule of activities during the next month, it should be filled with information of the latest developments. Thanks for your patience and the great work you do every day!

Sharon, Sandy and Kathy



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Horizon Restructuring Update October 2013

October has been a month full of restructuring activities, in which some of you may have participated. The very preliminary draft of the position descriptions were emailed to us by Springsted on the very last day of September. Sandy, Sharon and Kathy met during the first week in October to conduct an initial review of the position descriptions in order to identify the obvious misstatements in the position descriptions that simply reflected Springsted's misunderstanding or misinterpretation of the information that was submitted with the position analysis questionnaires. Those issues were reviewed and discussed with Sharon Klumpp at Springsted on October 9. Springsted has then spent the past several weeks refining those position descriptions and yesterday, on October 30th, resubmitted those proposed position descriptions to us. The next step in this process will be to distribute them back to all of you for review and comment. We do want all of you to know that all of your comments and suggestions will be considered but that the final decision on the position descriptions remains with the Horizon Community Health Board. Once those position descriptions have been approved in their final format, Springsted will assign points to the positions and develop a position classification system, which will be the basis for the development of a proposed wage scale. We are certainly hopeful that we will have that by the end of the year, at the very latest.

The proposed personnel policies continue to be developed by Springsted. A number of issues have been identified by Springsted during the course of their work that will require consideration and guidance from the Horizon Restructuring Committee. That consideration will occur at the next meeting of the Restructuring Committee, scheduled for November 4, 2013. We have not yet seen a draft of the personnel policies.

At their most recent meeting on October 3, 2013, the Restructuring Committee's discussion focused primarily on planning for the upcoming activities associated with our Learning Community work with the Center for Sharing Public Health Services (CSPHS), supported by the Robert Wood Johnson Foundation. That discussion included finalizing the plans for the October 28th and 29th site visit by the CSPHS. Participant lists were developed and the meeting schedules, agendas and objectives were established. In addition, the Restructuring Committee reviewed and approved Sandy and Sharon's request to participate in the NE Ohio project site visit on Dec 3-4, 2013. Part of this site visit will include discussion with the staff from Summit County Ohio, which was one of several health departments in Ohio that merged a few years ago. Three staff will join Sandy and Sharon on this site visit, including Betsy Hills from Douglas County, Crystal Wagar from Pope County, and Connie Bullock from STG Public Health. Final participants for the second Shared Services Learning Community meeting in San Diego in January 2014 were also identified. Given how valuable the first Learning Community meeting was in Kansas City, we are all anticipating another positive learning and sharing experience. We are even more anxious knowing that the focus of this meeting will be on finance, human resource and governance issues.

Highlighting October's activities was the 2-day site visit by the staff from the Center for Sharing Public Health Services on October 28th and 29th. And we certainly made the most of their time. Patrick Libbey, Co-Director of the Center and Grace Gorenflo, Senior Project Consultant, along with Allison Thrash from the MN Department of Health (another grant site being managed by the Center with Robert Wood Johnson Foundation support) first joined Sandy, Sharon and Kathy in a brief discussion early Monday morning, at which time they were provided more detailed information about the goals and current status of the Horizon Restructuring Initiative.

Shortly after, approximately 25 staff and managers from the 3 Public Health Departments joined them in a discussion of operational issues. To all the staff and Supervisors that participated that day, we are so appreciative of your time and thoughtful comments during that conversation. Patrick and Grace commented about how impressed they were with the honesty and willingness to share perspectives that was so evident during that 2-hour meeting. They also observed that while you as staff do have some concerns about the individual impact of the possible integration, you also recognize that there are other forces that are driving the exploration of a change in structure and that you're open to learning more about those outside forces.

Following a road tour from Douglas County through Pope County, they proceeded to a meeting with the Restructuring Committee in Morris in Stevens County. (As an aside, they were somewhat amazed at the flatness of the landscape and the size of the farm fields). During their time with the Restructuring Committee, they explored governance issues. They questioned the Restructuring Committee about their history of working together, not only with Public Health but in other areas as well. Patrick and Grace questioned them about whether they perceived that they shared a regional identity and they all responded affirmatively without hesitation. The Restructuring Committee members also talked about the benefits that they believed might result from integration as well as the potential stumbling blocks. The most significant benefits identified by the Restructuring Committee were improved scope and stability of services, greater efficiency in the delivery of services, the ability to attract a highly-qualified and specialized workforce and the ability to meet the national performance standards at some point in the future. The most significant, and really the only drawback they identified was the overall cost and the allocation of the tax levy to the partner counties. Patrick indicated to them that the Center has identified a consultant with experience in these types of financial issues and they will be providing that contact information and financial technical assistance to our project. Again, Patrick and Grace were impressed with the candor and honesty of the Restructuring Committee members and emphasized that the trust between the partner counties is one of the key predictors of successful integration.

The second day of the site visit involved a meeting with approximately 40 people, representing county commissioners, social service directors, county coordinators and staff from the 3 Public Health Departments (along with one representative of the media and a union representative). The goal of this meeting was to share some information about the Center and its work with cross-jurisdictional sharing along with information about national trends in shared public health services and where the Horizon initiative fits within that spectrum. Together Patrick and Grace shared a wealth of information, which may have been a bit overwhelming for the participants. Nonetheless, there were some good questions from both Commissioners and staff, many of which were comments that had been expressed in previous settings.

Prior to their departure, Patrick and Grace shared some of their general observations during a wrap-up meeting over lunch. They again cited the strong working relationship that exists with the Public Health Directors as well as the Restructuring Committee's commitment to the project goals. However, they did observe that while there seems to be a clear sense of purpose among the Restructuring Committee, the other county board members' understanding of purpose is not as evident. They stated that they continue to be impressed with the engagement of the staffs from the 3 Public Health Departments and the open communication between staff and management. But again, they suggested that more frequent and open communication with Board members would be beneficial. They speculated that the financial issues may pose the greatest challenge for us but that they would be providing technical assistance to guide us through those challenges. Overall, they indicated they were very impressed with the progress that has been made since the start of the grant and are looking forward to connecting with us in the near future in both Ohio and San Diego. We certainly received some great feedback from them and hope that those of you that had the opportunity to engage in discussion with them, particularly during Monday's discussion, had a similar experience.

So that pretty much wrapped up a very busy October. As always, we're interested in hearing your thoughts about the site visit or any other integration issues. Stop in and talk with one of us when you get a chance.

Sharon, Sandy and Kathy



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Horizon Restructuring Update November 2013

After a very busy October, the pace seemed to return to a more typical month in November. The Restructuring Committee met on November 4, 2013 and spent a fair amount of time recapping the October 28-29 site visit by the staff from the Center for Sharing Public Health Services.

In addition, the committee members were updated on the upcoming trip to the Kent, Ohio project's site visit which is scheduled for Dec 3-4, 2013. A delegation of 5 Horizon staff will be attending that site visit. Sandy and Sharon will be joined by Betsy Hills from Douglas County, Crystal Wagar from Pope County and Connie Bullock from Stevens Traverse Grant Public Health. Given that the Ohio project has similar goals, it should prove to be a very enlightening and useful trip. Official reports will be delivered to the staff of all 3 Public Health Departments upon our return.

Travel plans were also finalized for the 6 individuals from the Restructuring Committee that will be attending the second Shared Services Learning Community meeting in San Diego, CA in January. Those participants will include Commissioner Todd Schneeberger, Commissioner Larry Lindor, CHB member Deb Hengel, Sandy Tubbs, Sharon Braaten and Kathy Werk.

The Restructuring Committee then spent the remainder of the meeting addressing issues that were identified by Springsted, Inc. during their efforts to develop a draft personnel policy for the proposed organization. Some of those issues in need of clarification or direction from the Restructuring Committee and the initial responses or recommendations provided by the Restructuring Committee included:

- Establish the regular work week: Recommendation to establish a 37.5 hour work week
- Vacation/sick leave policy: Recommendation to draft a paid-time off (PTO) policy with request to Springsted to provide conversion options in addition to the policy
- Vacation/sick leave carryover: Recommendation to draft a PTO accumulation and carry over policy
- Holidays: Recommendation to establish 10 paid holidays with one additional personal holiday for all full-time employees
- Overtime: Recommendation that overtime pay is calculated based on hours actually worked in excess of 40 hours in the established work week. Employees shall be compensated at straight time for hours worked between 37.5 and 40 hours in the established work week.
- Compensatory time accumulation and carryover: Recommendation that accrual of comp time is limited to no more than 40 hours and that accumulated but unused comp time is paid out at the end of the calendar year.
- Bereavement/funeral leave: Recommend that funeral leave be established as up to 3 days of paid leave time (not sick leave) upon the death of immediate family members including father, mother, sister, brother, spouse, child, mother-in-law, father-in-law, grandparents, grandchildren, aunts, uncles, nieces, nephews, sisters and brothers-in-law, and domestic partners.
- An employee assistance program (EAP) shall be established.
- Longevity pay: Recommend that longevity pay not be included in the personnel policy.
- Service credit: Horizon employees will be granted credit for years of service as employees of the respective Public Health Department that employed them prior to the integration.

- On call/call back pay: Shall be established for the Hospice on-call team.
- Office closures: Horizon staff will honor the inclement weather office closures of the county to which they've been assigned as their home office.

Please remember that these are only the initial recommendations provided to Springsted by the Restructuring Committee to enable them to proceed with Personnel Policy development and should not be interpreted to be the final policy statement. The next Restructuring Committee meeting is scheduled for Monday, Dec 16 in Morris at which time it is anticipated that the entire first draft of the Personnel Policy will be available for committee review and comment.

The other significant restructuring activity during the month of November involved the continued development of the proposed position descriptions. The second draft of those position descriptions were received from Springsted at the very end of October and were subsequently provided to all of you for review and comment during the first week in November. Once again, we appreciate the time and thoughtfulness that you devoted to your review and comment. We found your suggestions to be very appropriate and relevant and we passed along many of those suggestions for Springsted's consideration as they now work on the final draft of those position descriptions. Overall, the revisions that we recommended to Springsted involved mostly minor changes. However, one recommendation of significance that we provided to them was to create a single position description for a Public Health Nurse and eliminate the separate position description for a Registered Nurse. A number of factors contributed to this decision:

- Given the impending changes with MN Choices and considering the other Public Health program areas, there is very little differentiation in position responsibilities required by the various PH programs.
- Many of the comments that you submitted to us were similar in that it appeared that the registered nurse and public health nurse position descriptions were nearly identical.
- As we reviewed the current nursing positions that are being advertised by Public Health Departments across the state, ALL of them required a Baccalaureate degree with Public Health Nurse Certification (except the STG nurse ad).

Therefore, it is our recommendation to Springsted that the Registered Nurse position description is eliminated as a separate position and that the essential responsibilities of the 2 draft position descriptions (RN and PHN) be merged into one with the minimum educational requirements established as a Baccalaureate degree with PHN certification. However, we also recommended that the educational requirement section contain a statement that would allow for registered nurses to be considered in extenuating circumstances provided that the RN met the minimum requirements for the program for which he/she was being hired. **And please remember that all current RNs would be grandfathered in to the new organization.** Please do not hesitate to talk with one of us if you would like to discuss this issue further. Sharon Klumpp from Springsted briefly reviewed the recommended changes on Tuesday of Thanksgiving week and indicated that she believed that the recommendations were appropriate and doable. She also indicated that she hopes to get those revisions completed soon along with the position classification system and a preliminary proposed pay scale. Like the draft Personnel Policy, we hope to have all of this information for review by the Restructuring Committee at its next meeting on Dec. 16.

Finally, just a reminder that the next "mega-staff" meeting has been scheduled for Wed, Jan 29, 2014 from 1:30 p.m. – 3:30 p.m. at the Hoffman Community Center. We would expect to have much additional information to share with you at that time. During February, we will be meeting individually with each of the five County Boards and anticipate that those Boards will then vote on the integration in March (and potentially the first week in April depending on Board meeting dates).

As usual, we welcome you to stop in and share your thoughts and comments with any one of us. We're always interested in hearing from you. So until the next report at the end of December, we wish all of you a happy, healthy and safe holiday season!

Sharon, Sandy and Kathy



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Horizon Restructuring Update December 2013

Aside from the site visit to the NE Ohio Project during the first week in December, the restructuring activities during December were primarily just a continuation of November's work. Given that all of you participated in one of the Public Health staff meetings during the week of December 16th and had the opportunity to hear a report of the Ohio site visit directly from the 3 nursing staff that traveled with us, there is probably little need for an additional summary of that visit. As you heard from all five of us that had the privilege of participating in that site visit, it was a very valuable and productive trip. We will watch closely as future site visits are scheduled for the other 14 projects and hope that one of them might provide a similar opportunity so that more of you could potentially have a similar experience. Thank you to Betsy, Connie and Crystal for their willingness to join us at the site visit and their great reports back to each of the 3 Public Health staff.

The Restructuring Committee met on Monday, December 16 with discussion primarily focused on 2 topic areas. First, we spent a good deal of time sharing with all of them the valuable information that we gathered from the Ohio project site visit. They were very interested in our reports and particularly pleased to hear how valuable the site visit was for the 3 public health staff that also attended. During the remainder of the meeting, we reviewed in detail the first draft of the Personnel Policies that had been sent to us only days before the Restructuring Committee met. Overall, the Committee was in general agreement with most sections of the policy as drafted by Springsted. Some of the sections, such as the section related to the family medical leave act or military leave, were not closely reviewed by the Committee since much of that language is contained in statute and therefore, not subject to revision. On the other hand, some sections of the policy such as the newly proposed paid time off policy, was reviewed and discussed in great detail with some requests for revisions. Those suggested revisions have since been discussed with the staff at Springsted and a second draft of the personnel policy is anticipated within the next couple of weeks. The Horizon Restructuring Committee will meet again on Feb 3 for a final review of the latest draft of the Personnel Policies before the full Horizon Community Health Board considers it at their February 10th meeting.

In the meantime, we are awaiting the revised position descriptions, the first draft of the position classifications and subsequently, the proposed pay plan. We expect this process to move along quickly given that Springsted has had extensive experience in developing similar proposals for other county government entities in MN. Their access to position classification systems and pay plans from rural counties throughout MN will assure that the position classification system and pay plan that is proposed for Horizon is competitive with the current market. Once we have access to the proposed pay plan, we can begin the process of finalizing a combined projected Horizon budget for 2015 and beyond. At the present time, we are gathering financial histories from each of the 3 Public Health Departments and using revenue trend data to project revenues into future years. We are also compiling non-staff related expenditures from the 3 Departments and attempting to also project those same expenses for a future combined organization. This is a very challenging task and we have to thank Greta and Mindy for the time they've put into this long and not very exact process. We have also had some preliminary conversations with consultants who are providing guidance on various methods for allocating tax levy to the individual counties which is likewise proving to be a very challenging task. Ultimately, we will have a preliminary draft of all of this information for the Horizon Community Health Board meeting on Feb 10 and a final draft for the February 29, 2014 "Mega Board" meeting.

This will all culminate in the individual voting by the 5 County Boards during March and early April. At this time, preliminary meeting dates have been established for the 5 County Boards as follows:

Tuesday, March 4, 2014	Pope County Board
Tuesday, March 18, 2014	Stevens County Board (morning)
Tuesday, March 18, 2014	Grant County Board (afternoon)
Tuesday, March 25, 2014	Douglas County Board
Tuesday, April 1, 2104	Traverse County Board

Based on the outcome of those Board votes, plans for future work will be developed accordingly.

So although the process has at times felt very long and tedious, we are rapidly approaching decision time. We thank all of you for your patience during this time of uncertainty and speculation. We know that “not knowing” is stressful and we can only assure you that we will all soon know the future direction of Public Health in our 5 counties. Regardless of the outcome, it is also important that you know that we will continue to look for any and all opportunities to strengthen public health in our communities so that future generations have access to the same wonderful programs and services that you all deliver right now.

And as one final reminder, the next Mega-Staff meeting is scheduled for Wednesday, January 29th from 1:30 p.m. – 3:30 p.m. at the Hoffman Community Center in Hoffman (same location as the first meeting). Hopefully, you all have this on your calendars.

As always, we welcome your thoughts and ideas. Please share them with us.

A belated Merry Christmas and an early Happy New Year to all!

Sharon, Sandy and Kathy



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Horizon Restructuring Update January 2014

The start of the New Year marks the beginning of our 4th year of operation as a 5-county Horizon Community Health Board and the beginning of the 3rd year of exploring the benefits and risks of fully integrating our 3 Public Health Departments into a single entity. In many ways, it seems impossible that we could have already been operating as the Horizon Community Health Board for 3 full years. Yet at times, it feels like we've been exploring the issues surrounding integration forever. We're happy to report that we are now on the home stretch of the exploration process and will very quickly move into the decision-making process. We have discussed, gathered information, analyzed, developed, and projected as much as we can! Now it's time to call the question.

Although many of you may not have noticed much in terms of restructuring activity during the past month, it has been an extremely hectic month of fine-tuning many of the documents that will be presented to the County Boards for their consideration prior to making a decision. Within the last week, we have received another draft of the personnel policies which appear to be in near-final draft form. We've shared the basic concepts that will be included in those proposed personnel policies and sometime following our presentation to the Boards, we will also share that draft policy with all of you. We think you'll find it to be well-organized, thorough and generally reflective of current trends in governmental policy. We're anxious for you to see it and share your thoughts.

Along with the draft personnel policies, we received the final draft of the position descriptions. We are in the process of reviewing those as well but in general, they appear to reflect the comments/suggestions that we submitted to Springsted following the review and comment by all of you and our final review as the management team. Like the personnel policies, they are fresh, current and truly reflective of what you all do. We'll also be sharing those with you following the Community Health Board's review at their February 10th meeting.

Finally, we are now in receipt of the initial position classification and pay plan recommendation from Springsted. This has been a challenging process for them as they've had to take into consideration 4 different existing pay plans (Douglas County Public Health has two separate plans: one for the MNA members and one for the remainder of the staff). In addition to analyzing our existing pay plans, they've collected and done a comparative analysis to pay plans from a representative group of MN counties of similar size and demographics to assure that the newly proposed pay plan is competitive with the statewide market. This was no easy task and we can assure you it's been no easy task for us to review and analyze it as well. We are continuing to offer some corrections and clarifications to Springsted and hoping to have a final draft soon. We anticipate reviewing whatever information is available to us with the Horizon Restructuring Committee on Monday, Feb 3 and a more final pay plan proposed document with the Horizon Community Health Board on Monday, Feb 10. Should the Boards vote to support integration, we fully expect that this pay plan will continue to evolve. However, this draft is extremely valuable as we then attempt to put together a proposed budget for the integrated organization. We believe that we will be able to do that within the next couple of weeks so that we have some more solid financial projections to share at the Mega-Board meeting on Tuesday, Feb 25.

Of significant importance to the 5 individual Boards will not only be the combined budget but primarily the combined tax levy and a proposed formula for equitably sharing that tax levy among the 5 counties. During

previous discussions with representatives of the different grantees that are part of the RWJF Shared Services Learning Community and numerous other consultants that we've encountered as part of our travels to different project sites, we have gathered many thoughts and suggestions for developing an equitable formula for tax levy distribution. While no one has been able to provide us with the magic formula, we believe that we can utilize a combination of their suggestions to create a formula that is fair and most importantly, acceptable to all 5 partner counties. Time will tell if we're successful in achieving that goal!

Our recent travel to the second Shared Services Learning Community meeting was every bit as productive as the first meeting in Kansas City last March. Our team of 6, which included Todd Schneeberger, Larry Lindor, Deb Hengel, Sandy, Sharon and Kathy, participated in this 2-day learning opportunity with representatives from the other 15 grantee sites. We really felt a sense of "community" as there were many faces that we recognized, some of which we've had the opportunity to see several times now. The knowledge and ideas that we gather from these other teams is so helpful. And we believe that we're able to share our experiences and learnings with them as well. The staff from the Center for Sharing Public Health Services really did a great job of putting together some very compelling general presentations along with pertinent break-out sessions. And the time that they set aside for our teams to meet and plan is so valuable as we are able to share our thoughts and ideas right away, while they're all still fresh in our minds. We were able to gather more ideas about financial issues, which seem to be a big challenge for all projects involved with cross-jurisdictional sharing. And now we have some contacts from other projects that we can call when we get stuck. It's been a really positive experience from every perspective and we're fortunate to have been a part of this Robert Wood Johnson Foundation grant.

Finally, we wanted to again apologize for any inconvenience that you incurred as a result of our delay in the Mega-Staff meeting. We just did not want to go forward unless we could be certain that we had sufficient information to share to make this a good use of your time. We know that we will have more concrete information for the February 21, 2014 meeting but we also know that we will NOT have the answers to all of your questions. Some of the concerns or worries that you've shared in the past are unfortunately issues that will not be able to be fully addressed in great detail until such time as the integration is approved, if that actually happens. We know that this doesn't help reduce the stress of the uncertainty but there is just no way that we can get to that level of detail without the Boards first approving the integration. As a reminder, the Mega Staff meeting on Friday, February 21 will be from 1:30 – 3:00 or 3:15 p.m. at the Hoffman Community Center, which is the same location as the previous meeting. We hope you all have this on your calendars.

So that brings you all up to date. February will be another busy month of refining the data and information as we prepare for the upcoming Board votes in March and early April. As always, please stop in and talk with any of us if you have additional questions. Otherwise, we look forward to seeing all of you on the 21st of February!

Sharon, Sandy and Kathy



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Horizon Restructuring Update February 2014

February will go down as the month of the Mega Meetings. All of the activity prior to those meetings (the Mega Staff meeting on Feb 21 and the Mega Board meeting on Feb 25) was essentially in preparation for those meetings. On Feb 3, the Horizon Restructuring Committee met to review the final drafts of the organizational chart, the personnel policies, the position descriptions and the position classification system and pay plan. In addition, the Restructuring Committee continued its discussion of the proposed budget and more importantly, the formula for allocating the combined tax levy among the 5 counties. While much of the previous discussion had focused on various population-based formulas, consideration of a county's net tax capacity was also discussed as an option for distribution of the levy. Ultimately, that option was abandoned as the Restructuring Committee members agreed by consensus that some type of population-based split would be the most fair, given the services provided by Public Health. Upon further discussion of the proposed 2015 budget, Sandy and Sharon suggested that the Restructuring Committee recommend a "freeze" of each county's 2014 tax levy request (with an exception for additional health care costs, which are typically pretty volatile). The Horizon Restructuring Committee, after much discussion, agreed to include this as part of the recommendations to the Horizon Community Health Board.

This funding recommendation, along with the full list of findings was then presented to the Horizon Community Health Board at its February 10, 2014 meeting. The findings/recommendations included final drafts of the following:

- Governing Board composition
- Organizational chart
- Position descriptions
- Position classification system and proposed pay plan
- Personnel policies
- Preliminary 2015 budget projection, which included a number of assumptions that were incorporated for budgeting purposes only
- 5 yr recommendation for combined tax levy allocation, which includes a 3-yr freeze on the 2014 requested levy followed by some type of population split

The report from the Community Health Board also included a list of outstanding issues that have yet to be addressed and/or resolved including such issues as:

- Transition policies have not yet been developed by the existing employers
- Establishment of a minimum "fund balance" for the new organization and how that is shared by the 5 partners
- Agreement on what resources each of the public health departments bring to the table
- Agreement on the details of a population based formula for distribution of the tax levy following the initial 3-yr freeze
- Development of a joint powers agreement that incorporates some type of "out clause"

After discussion of these issues, the Horizon Community Health Board approved forwarding these findings to the individual county boards for consideration and hopefully approval.

These same findings were shared with all of you at the Mega-Staff meeting, held on Feb 21st in Hoffman. Thanks again to all of you that braved the less-than-desirable driving conditions in order to join in the discussion. The turnout was impressive, as was the discussion. Many of the findings of the Community Health

Board were shared with all of you and we appreciated your feedback. Your eyes saw things we did not see, and your brains thought of things that we did not. We have taken note of all of your comments, some of which will have to be negotiated in the future, and will incorporate them as the appropriate time presents itself. Again, we cannot thank you enough for engaging in that discussion and sharing your thoughts and ideas. We believed it was valuable from all perspectives.

On February 25, 2014, the report from the Horizon Community Health Board was then presented to the County Commissioners, County Coordinators, Human Services Directors and interested media at the “Mega Board” meeting held at the Public Works meeting room in Alexandria. Seventeen of the 25 Commissioners were in attendance along with 3 County Coordinators, one Human Service Director, and a couple of the local newspaper representatives, among others. Sandy and Sharon reviewed a brief history of the integration exploration, some external and internal influences, and then a brief summary of the findings. A healthy question and answer period followed, many of which were related to budget issues. While there is conceptual support for the integration, some concerns were voiced over the details. Sandy and Sharon agreed to compile whatever additional information they could prior to the individual Board meeting votes, which begin on Tuesday, March 4 and wrap up on April 1.

So now, it’s really a matter of waiting for the Board decisions. We will continue to talk with the Commissioners, in hopes of addressing whatever issues we’re able to but as we shared with all of you, some of the details really cannot be known for certain until it is determined to move forward with integration. And, whether we move forward as 3 separate public health departments or a single public health department, the future funding sources can never be guaranteed. We can only provide our best projections based on a combination of past history and future trends. It is our belief that we have put together the most comprehensive package of information that we could possibly gather and analyze. We have consulted resources across the state and across the country. And based on all of that information, we fully believe that integration of the 3 public health departments into a single department provides us with the greatest opportunity to secure a strong and stable public health infrastructure to serve our current and future populations.

As always, please feel free to stop in and share your thoughts with any one of us. And we’ll let you know the results of the Board votes as they become available. Thanks again for your patience during this long process.

Sharon, Sandy and Kathy



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Horizon Restructuring Update March 2014

After 2 years of planning, analyzing, strategizing, re-thinking, communicating, questioning and recommending, the month of March 2014 will be long remembered as the month of the VOTE. And with the very recent vote of the Douglas County Board (April 1, 2014) we are so pleased to say that it was a YES vote from all 5 County Boards. And we are on our way!

We can't help but reflect on the past 2 years and the journey that brought us to this day. We remember many, many meetings. We remember long "to-do" lists and having more questions than answers. We remember running in to roadblocks that sometimes seemed insurmountable. We remember our travels to learn from other projects and the lessons that we were able to bring home to assist our project. We also remember how much we learned from all of you during our regular staff meetings as well as the mega-staff meetings. We remember highs and we remember lows. But most of all, we remember the importance of articulating the "why"....and that is and has always been to assure a strong, effective and efficient public health system that will serve current and future populations of our communities. We are now on our way to making that happen!

A rather unexpected development in the past month was the introduction of a piece of legislation that would greatly restrict the ability for new joint powers entities to form. More specifically, it would be administratively impossible to bring together employees from multiple agencies that were previously represented by a collective bargaining agreement because it would require the new entity to honor all the conditions of the existing collective bargaining agreements until such time as a new collective bargaining agreement is developed and agreed to. While the intent of the legislation is to protect the salaries and benefit packages of the employees that are coming to the new organization, the reality is that it would create inequities among the combined employees of the new entity. In our case, we would have had employees of the same organization (Horizon) working different work weeks, being paid from 4 different pay scales, having different vacation schedules, different holiday schedules and different severance packages. It would simply be administratively unmanageable. Sharon and Sandy were able to testify on the potential impact of the proposed legislation on our project. Ultimately, we were able to get the author of the bill to agree to a delay in the effective date of the legislation until January 15, 2015. While that delay allows our project to move forward without the burden of this legislation, it will essentially end other projects' efforts to create more efficient and effective joint powers partnerships. We are continuing to track the legislation and still hoping for some last-minute changes that would make the legislation more workable. We'll keep you informed of any new developments.

And where do we go from here? The Horizon Community Health Board meets on Monday, April 7 and the intent is to develop an implementation work plan for the next 9 months. A new joint powers agreement will need to be developed and signed by the 5 partners. All of the preliminary documents will need to be finalized and officially adopted. And, of course, a transition plan will need to be developed that addresses how the "promises" made to the existing employees by the current employer will be honored. So our work is far from done. But it's exciting work because we now know exactly where we're going. We expect there will be some bumps in the road but we know we can get beyond those bumps. We will continue to look to all of you to share your thoughts and ideas. You all see this from a different perspective and that is so helpful for us.

Finally, we need to thank you once again for being patient and understanding and supportive. We hope you know how very much we appreciate that! As always, please feel free to stop in and talk with any of us. We always welcome your input.

Horizon Public Health.....it's a reality now! It's time to celebrate this huge accomplishment.

Sharon, Sandy and Kathy



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Horizon Implementation Update April 2014

Having paused for a very brief time of celebration, activities during April have now focused on implementation of the 5-county integration. (You'll notice that this update has been renamed the "Implementation Update" rather than the "Restructuring Update".)

At its April 7th meeting, the Horizon Community Health Board appointed 7 members that will now serve as the Horizon Implementation Committee, formerly the Horizon Restructuring Committee. The committee is comprised of the same representatives, which include Commissioners Jerry Johnson (Douglas), Larry Lindor (Pope), Todd Schneeberger (Grant), Jeanne Ennen (Stevens) and Jerry Deal (Traverse) along with community members Deb Hengel and Dennis Thompson. That committee met twice during April on the 14th and the 28th to begin sorting through the many issues that need to be addressed during the next 8 months. A revised and updated work plan was presented and reviewed, in order to establish priorities and timelines. Among the first issues to be addressed will be the development of an official joint powers agreement between the 5 member counties. Neil Nelson, Pope County Attorney, has been appointed by the Horizon CHB to serve as the legal consultant for Horizon and was present at the April 14th meeting to review a draft interim joint powers agreement, which would assign decision making authority to a subset of the new Horizon CHB until such time as the "new" Board meets for its first meeting in January 2015. However, after further discussion and legal consultation, it was determined that a resolution by each of the individual county boards delegating full authority and decision-making responsibilities to the existing Horizon CHB may be less confusing in that only one Horizon CHB would exist at any given time. Neil Nelson is currently working on a draft of that resolution. In addition, the MN Counties Intergovernmental Trust (MCIT) has been consulted with regards to necessary changes in liability coverage for the CHB.

In addition to the extensive discussion around the joint powers agreement issue, the Implementation Committee considered the proposed composition of the new Joint Powers Board, with some discussion as to whether a 13-member Board would be too large. Ultimately, committee members agreed that the development of standing committees, including Executive, Finance, and Personnel, would enable a 13-member CHB to get its work done efficiently. The final recommendation for the Horizon CHB will be 13 members as originally proposed.

The Implementation Committee also considered a slightly revised organizational structure that results in some changes in the responsibilities of a few administrative positions, but overall does not increase the FTEs of the whole organization. Committee members were supportive of the revisions as proposed. A conference call with Sharon Klumpp from Springsted, Inc has been scheduled to review the modifications needed for those few position descriptions as a result of the change in organizational structure. That revised organizational structure will be made available for all of you. Neither the organizational chart nor the position descriptions have received final approval and therefore remain in draft format and open to comments and suggestions.

Much discussion at the April 28th meeting was devoted to a more detailed review of the proposed personnel policies with a few changes/additions recommended as follows:

- Definition of "service credit" needs to be clarified to address carryover of service credit from previous employer (Douglas, Pope or STG)
- The language relative to the "requirement" to work overtime needs to be modified with elimination of this as a "condition of employment" as well as refusal resulting in disciplinary action. However,

there will need to be some language added that reflects the need for overtime during a public health emergency.

- In the grievance section, it was suggested that an additional step be added that allows an employee to take the grievance to the Chair of the CHB if the grievance is with the Administrator.

There was some discussion regarding the PTO accrual schedule and the maximum accumulation or carryover of PTO into the next calendar year, but ultimately, no changes were recommended to the existing draft policy. All of these recommended changes will also be discussed with Sharon Klumpp at Springsted, who will be responsible for drafting alternative language for the Committee's review.

Other issues in need of further discussion and decisions include:

- Exploring health insurance options with the current member counties as opposed to seeking health insurance bids as an independent small employer
- Clarifying language regarding the payment of severance compensation in to a health care savings plan
- Ancillary benefits, such as dental insurance, short and long term disability, long term care insurance, vision insurance. A meeting with Jim Ochs from Integrity Benefits has been scheduled for May 14 to gather preliminary information about continuation of these benefits with the new Horizon Public Health Department.
- Integration of the 3 CHAMP data management systems
- Selection of a payroll system that will enable Horizon to independently generate payroll

And, in addition to all of this, now that the word has gotten out about Horizon's impending integration, the requests from other Community Health Boards across the state have begun to come in. There's an incredible amount of interest in learning about the process that we followed during the exploration and decision-making stages. Sandy presented to the Morrison Todd Wadena CHB on April 30 and Sharon will be doing a similar presentation at the strategic planning meeting for North Country CHB (Beltrami, Clearwater, Hubbard, and Lake of the Woods) on May 19th. As more and more local public health departments and their governing boards are considering structural options, more requests for such presentations are expected. And while these presentations take time, it's so exciting and energizing to share our story. Thanks to everyone for being a part of this journey.

As for what's next, a multitude of administrative tasks necessary for the transition will keep us very busy in the upcoming months! As always we encourage your questions and are appreciative of your patience in the process. Our goal is to effect a smooth transition to Horizon Public Health.

Sharon, Sandy and Kathy



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Horizon Implementation Update May 2014

These months are just flying by a bit too quickly! There's just so much to do and so little time. But we're happy to report that we continue to make progress on the implementation activities.

During the first half of May, we've been following up on numerous issues as requested by the Horizon Implementation Team. These include:

- Development of a resolution granting additional powers and duties to the existing Horizon Community Health Board in order that certain decisions can be made in advance of full integration on January 1, 2015. That resolution will be presented to and adopted by each of the 5 individual county boards at their June 3 meetings.
- Development of a draft Horizon Joint Powers Agreement (JPA) reflecting the transition to 5 members rather than the current 3 members to the JPA. We would anticipate that this JPA would be presented to and approved by the 5 individual county boards in July and August with a January 1, 2015 effective date.
- Final review of and recommended revisions to the draft Personnel Policies. We would anticipate approval of this policy by the Horizon Community Health Board in the next couple of months.
- Final review of the position descriptions. We also need to compile the "addendums" to some of the position descriptions as we have learned that Springsted is not intending to do this. While these addendums do not impact the position classification process, they will be important to include with the formal position descriptions when the employment offers go out to everyone. If any of you would like to take another look at one or more of the position descriptions, please don't hesitate to request those. They are still in draft form and we would certainly still welcome your input on those.
- Development of a process for transition of employment including how and when current employees will be provided the opportunity to indicate their preferred position in the new organization and what process will be used to match current employees with the potential positions. We are also drafting a timeline for when this will occur so that employment offers can go out to all employees no later than early to mid-fall.
- Communication with the Minnesota Intergovernmental Insurance Trust (MCIT) regarding transitioning employees from current employer to new Horizon employer for purposes of estimating Worker's Compensation and Liability coverage effective January 1.
- Exploration of health insurance options and opportunities.
- Exploration of ancillary benefits such as life insurance, short and/or long term disability, dental, vision and potentially other benefit options.
- Discussion with county and private IT vendors regarding capacity to host and maintain the Horizon server. We have also determined that we will need to maintain contractual relationships with the individual county IT departments for the day-to-day technical assistance.
- Gathering cost estimates for moving to independent payroll services effective January 1.

While this is not an exhaustive list, they do represent the priority issues that are being addressed now.

The Horizon Implementation Committee is scheduled to meet again on Monday, June 23 to review much of this information and make hopefully make recommendations to the Horizon Community Health Board for final approval on some of these issues. The Horizon Community Health Board's next meeting is scheduled for Monday, June 30.

Along with all of these issues, we have continued to work with and share information with the Center for Sharing Public Health Services and received notification at the end of last week that the Horizon Project will be featured in their next newsletter. So, along with everything else, we are compiling information for inclusion in that newsletter. We're honored to have been selected for their featured project and we'll definitely share the newsletter with you when it is published.

We continue to participate in quarterly phone conferences with the Center staff and representatives of the other 15 grantees and in addition, have separate quarterly phone conferences that are specific to the Horizon project. We are so appreciative of the support and technical assistance that we've received from the staff at the Center for Sharing Public Health Services. That has been an invaluable asset for us.

As always, please feel free to stop in and talk with any one of us if you have questions about any of the issues we've described in this update or any other thoughts/questions/concerns you have about the implementation process. We certainly do not have all the answers and in many cases, we haven't even thought of the questions yet. So we do appreciate it when you bring forward additional considerations for us as we will need to eventually get to each and every detail. We're closing in on 6 months until implementation and while we have much left to do, we're really are making great progress. Thanks again for your patience and your support.

And here's to a great summer, now that it's finally arrived!

Sharon, Sandy and Kathy



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Horizon Implementation Update June 2014

It was another busy month and I guess that will just be the norm for the rest of this year and likely well into 2015. During the first half of the month, our work was focused on gathering information regarding our future health insurance and ancillary benefit options and working with our Attorney Neil Nelson on the development of the official joint powers agreement.

While there has been no final determination as to whether Horizon Public Health (and 3 other organizations that previously purchased health insurance through Douglas County's self-insured plan) will be able to continue to be a part of Douglas County's health insurance plan, it appears fairly unlikely that it will be possible. In order to have adequate time to seek alternative health insurance, during June we scheduled and met with 3 different health insurance brokers including Gallagher Benefit Services out of Bloomington, Lakes Country Service Cooperative based in Fergus Falls and Midwest Health Benefits from Morris. We've also been invited by Pope Douglas Solid Waste to participate in a meeting with Flexible Benefits Administrators from Glencoe on Tuesday, July 1. We have provided employee census information to each of these brokers and anticipate getting some proposals within the next month or so. It is too early to make any projections about what that health insurance plan might look like but we have provided them information about the current group coverage in Douglas and Pope Counties. They are aware that we'd like to come as close as possible to current coverage while still balancing the cost of that coverage. All the brokers with whom we have spoken have indicated that there will be no exclusions for any pre-existing conditions upon enrollment. In fact, we've been told that that is now a federal requirement under the Affordable Care Act.

We also have those same brokers, plus Jim Ochs from Integrity Benefits, seeking proposals for the ancillary benefits for our group. We expect some information from them within the next month as well and will share that with you when it becomes available. Again, we are making every effort to offer the same ancillary benefits as are currently offered by the 3 individual employers.

In addition to exploring health insurance options, we have been working closely with our Attorney to draft the "new" Horizon Joint Powers Agreement (JPA). We started with a model template developed by the MN Counties Intergovernmental Trust (MCIT) and have been incorporating language specific to the Horizon CHB. Even though we're working from a very detailed template, it's been surprising how many unique issues have arisen during the development of the JPA. While we had anticipated that the final agreement language would be available for CHB review and recommendation at their June 30th meeting, that did not occur. However, there was sufficient consensus among the CHB members that the revisions discussed at the June 30th meeting will be incorporated and then emailed out to all of them for a final review. Pending their review and approval, the final agreement will be presented to each of the 5 individual County Boards for consideration and adoption in August (and potentially early September) 2014.

The Horizon Implementation Committee held its only meeting of the month on Monday, June 23 and considered the following transition issues:

- Reviewed draft Joint Powers Agreement
- Reviewed latest draft Horizon Personnel Policies
- Reviewed final draft Horizon Public Health Organizational Chart
- Discussed health insurance and ancillary benefit options

- Discussed possible benefits of entering into a vehicle lease program versus purchase of vehicles
- Discussed proposal from Computer Professionals Unlimited for payroll software
- Discussed process/necessary actions by current employers to authorize employees to transfer all accumulated vacation and sick leave time to the new organization

Most of these issues were also considered by the Horizon Community Health Board at its meeting on June 30 with official action as follows:

- As previously discussed, a few final language changes will be incorporated in to the Joint Powers Agreement then emailed to CHB members for final review before presenting to individual county boards
- The CHB reviewed the most recent revisions to the Personnel Policy, which included the addition of the definition of a benefit-eligible employee as being 30 hours per week for determining health insurance eligibility and language that describes the CHB's intent to establish health care savings plans as an option for contribution of severance pay and other contributions as determined by the employee and management groups. In addition, the CHB had significant discussion about the cost-benefit of establishing a Drug and Alcohol Testing Program in the Workplace and ultimately recommended that such a program be incorporated in to the Horizon Personnel Policy. A detailed policy will need to be developed that is consistent with Minnesota's Drug and Alcohol Testing in the Workplace Act (DATWA).
- The latest draft of the Horizon Public Health Organizational Chart was officially approved by the CHB.
- CHB members were informed of discussions with various health insurance and ancillary benefits brokers. The CHB also approved the Horizon Public Health life insurance benefit as follows: \$20,000 for employees with less than 6 years of continuous employment and \$30,000 for employees with 6 or more years of employment. Previous service credit with current employers will be counted toward establishing an employee's life insurance benefit level.
- There was no discussion of the vehicle lease program.
- There was no contractual agreement from Computers Professionals Unlimited (payroll software) for consideration. The agreement will be considered at the next CHB meeting.
- There was discussion regarding the need for each of the current employers to take official action (either by simple Board action or a resolution) of its determination that each employer shall not consider the change of employment a severance event, but rather a transfer of employment. By doing so, employees will be allowed to bring their accumulated leave time with them to the new organization rather than having it paid out, either directly to the employee or to a health care savings plan, depending on current employer severance policy.
- The CHB also considered a proposed timeline for transition of employees to Horizon Public Health (HPH). In order to provide adequate time to complete all of the insurance enrollment, payroll information and other paper work necessary for transition to the new organization, it was suggested that all HPH employees should be provided with a letter of employment by early October with a requested letter of acceptance by early November 2014. We expect health insurance and other ancillary benefit information to be available by this time. However, while we will have 2014 salary information for Pope and STG employees from which to develop a salary proposal, we do not yet have this information for all Douglas County employees. In the event that 2014 union contracts are not settled at the time of the employment offer, final salary information may need to be determined upon settlement of current union contracts.

So the pace has quickened and the issues to be addressed have grown. What has remained constant is our commitment to assure a stable public health department to serve the residents of our 5 counties. While it sometimes feels like we're buried in the complicated details, we still envision the future.....and that's Horizon Public Health. We're thankful for having such great staff with whom we are making this journey. Stay positive. Ask questions when you have them. And have a wonderful Fourth of July!

Sharon, Sandy and Kathy



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Horizon Implementation Update July 2014

It's hard to believe that July is now behind us and we are another month closer to becoming Horizon Public Health! And while there is much yet to do, we are definitely making progress on the many issues on our "to do" list.

The Horizon Implementation Committee met only once during the month on Thursday, July 17. At that meeting, we discussed the status of the Horizon Joint Powers Agreement, which has continually evolved, even since that meeting. We also talked at length about several sections of the Personnel Policy including:

- Health Care Savings Plans – Horizon Public Health will need to enroll as an employer and then submit to the MN State Retirement System (MSRS) its contact information and contract language in order for Horizon employees to participate in the Health Care Savings Plan (HCSP) after January 1, 2015. Once Horizon is approved as an employer and final authorization is granted by MSRS, the names of the employees that currently contribute to a HCSP will be submitted to the MSRS so that the employer name can be changed, thus enabling Horizon employees to continue contributions as determined by their respective bargaining agreement or non-represented group. Until those various groups are established, the Horizon Implementation Committee recommended that the initial HCSP contract would include contribution of 100% of the severance compensation owed to an employee at the time of separation or retirement. Horizon employees that have not previously contributed to a HCSP will have new individual accounts established.
- Severance policy – The Committee discussed and reaffirmed that each of the three current employers will need to take official action confirming its endorsement that the change of employment for its respective staff shall not be considered a termination event but rather, a transfer of employment. In addition, each of the current employers must make a determination as to the accumulated leave time that will be transferred to Horizon Public Health with the transfer of employees. The Horizon Implementation Committee also discussed and will recommend to the Horizon Community Health Board (CHB) that Horizon Public Health honor the severance agreements made by the previous employers to the employees that will transfer to the employment of Horizon Public Health.
- Drug and Alcohol Testing Program – The Committee reviewed current drug and alcohol testing policies from several different counties in the state that have implemented some level of drug and alcohol testing. Based on that information, as well as legal counsel, the Committee recommended that the Personnel Policy incorporate the establishment of a drug and alcohol testing program that would apply to the following situations: Job applicant testing, reasonable suspicion testing, post-incident testing and treatment program testing. Language consistent with Minnesota's Drug and Alcohol Testing in the Workplace Act for non-DOT employees will be added to the Personnel Policy and brought back for final Committee review. The Committee further recommended that employees transferring to the employment of Horizon Public Health on January 1, 2015 would not be considered "job applicants" and therefore, not subject to the job applicant testing.

In addition to reviewing these sections of the Personnel Policy, the Implementation Committee also discussed at length the transfer of vacation/sick leave from the previous employer to Horizon Public Health. Understanding

that it will be up to the current employer to determine what accumulated leave their employees can transfer to the new employer, the Implementation Committee discussed how Horizon Public Health will “receive” that leave. After extensive discussion, the Committee determined that the following recommendations will be made to the Horizon CHB:

- Vacation leave will transfer hour for hour to Paid Time Off (PTO)
- Sick leave will transfer hour for hour to Deferred Sick Leave in the new organization and will be subject to the Deferred Sick Leave usage policy.
- At the employee’s choice and as a one-time option at the time of transfer of employment, accumulated sick leave that is transferred to Horizon Public Health as of December 31, 2014 may be converted to up to 2 weeks of PTO (after application of the conversion formula). The sick leave will not transfer hour for hour to PTO but rather, a conversion formula will be applied. Additional information about potential conversion formulas will be brought to the next meeting for Committee consideration.

The next Horizon Implementation Committee meeting was scheduled for Monday, August 18 at 1:00 p.m. at the Douglas County Public Works meeting room in Alexandria.

The development of the Horizon Joint Powers Agreement has proven to be far more complicated than anticipated but is finally close to its final draft and should be ready for individual Board consideration at their regular Board meetings in late August and early September. While it has been a long process, it is a very important document and thus, it’s important that we get it right. We believe that we (and mostly our legal counsel) have done that!

Preliminary health insurance and ancillary benefit bids have been received from 2 different brokers with an additional proposal still to come. Preliminary information from both brokers would suggest that we will be choosing from various Blue Cross Blue Shield health insurance plans, as they are the only carrier willing to bid on our group without individual health histories. It also appears likely that Horizon Public Health will be able to offer employees a choice between at least 2 different options, one being a more traditional health insurance plan and the other a high-deductible Health Savings Account (HSA) plan. We are still awaiting some additional bids but are hopeful that by the end of August or early September, the Horizon CHB will be able to select an insurance broker and subsequently the health insurance plans that will be available to Horizon employees. Proposals received to date for ancillary benefits have also been promising and we expect to follow a similar timeline in making a determination on ancillary benefits. This timeline will allow the Horizon CHB to extend employment letters to all current employees of the 3 Public Health Departments in early to mid-October. And just so that there is no doubt, everyone that is employed by one of the 3 Public Health Departments on December 31, 2014 (with the exception of the 2 Senior Services staff in Douglas County) will be employed by Horizon Public Health on January 1, 2015.

Along with these larger issues, there is a never-ending list of details including obtaining employer I.D. numbers, updating all of our health plan contracts with our new name and ID numbers, changing our official name with MDH and DHS for all of our contracts, establishing a new mailing address, selecting a banking institution, developing the 2015 budget, doing a final review of the position descriptions, selecting a host for the Horizon data center, developing a separate Horizon payroll system, and working with CHAMP on the integration of our 3 separate Nightengale Notes data systems. And although it seems very overwhelming at times, it’s also very exciting. And every time we check something off our list, we know we’re one step closer to realizing the goal.....a stable local public health agency to serve the residents of our five counties now and well in to the future.

As always, please feel free to stop in and talk with any of us about your thoughts, your ideas and your concerns. And we must again thank you for your patience and your support. We depend on that.

Sandy, Sharon and Kathy



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Horizon Implementation Update August 2014

And now it's just a short 4 months until Horizon Public Health becomes a reality! A number of significant steps forward were taken during the month of August. Most notably, 3 of the 5 county boards (Douglas, Grant and Pope) unanimously passed the Horizon Public Health (HPH) Joint Powers Agreement (JPA)! The Stevens and Traverse County Boards will consider the JPA at their September 2 and 16 meetings. The Joint Powers Agreement is the legal document that officially creates Horizon Public Health and defines the governance, organization and other essential terms of the newly created partnership. It is the foundation upon which all other administrative operating procedures and organizational policies will be based. While it took longer than expected to clarify the language, we all agree that it is a solid document that creates a strong and stable public health organization. The Horizon Public Health JPA will become effective upon obtaining authorized signatures from all 5 counties but until January 1, 2015, the Horizon governing board shall be limited to the adoption of operating procedures and completion of other organizational and administrative duties necessary to ensure full implementation of Horizon Public Health on January 1, 2015. Beginning in January, Horizon Public Health shall officially assume the full responsibilities described in M.S. 145A, the Local Public Health Act. It is anticipated that the first meeting of the HPH governing board will occur very early in October at which time it is expected that the Board will ratify previous actions of the Horizon CHB, which has been acting on its behalf through a delegation agreement. Of top priority will be the adoption of the Personnel Policies, position descriptions, compensation plan, health insurance options, ancillary benefits and other essential components that will support the extension of employment offers in mid-October.

In preparation for all of this, the Horizon Implementation Committee met on Monday, August 18 and considered and discussed many of these issues. Among them were the following:

- Review of the final draft of the Horizon Public Health Joint Powers Agreement
- Review of the latest revisions to the Personnel Policy which included further clarification of the definition of "benefit earning employee" to state that year-round employees that regularly work 20 hours or more shall be eligible for pro-rated benefits, i.e. paid time off and holidays. The group health insurance benefit shall be limited to year-round employees that regularly work 30 hours or more per week. The committee also completed further review of the drug and alcohol testing program and determined that a more detailed policy and procedure should be attached as an Appendix to the Personnel Policy. In addition, the severance pay language that now states that all severance compensation owed to an employee at the time of termination or retirement shall be placed in a Health Care Savings Plan (HCSP) was reviewed and discussed. Group insurance employee benefits (health insurance and employer sponsored life insurance) were described in greater detail. Finally, a partial list of issues to be included in a Transition Policy and attached as an Appendix to the Personnel Policy was identified such as sick leave conversion, service credit carryover from previous employer, exclusion of employees that transfer to HPH from the initial pre-employment category for the drug and alcohol testing program, among other issues yet to be identified.
- A list of the potential health and ancillary benefits insurance brokers were reviewed. Among the brokers being considered are Gallagher Benefit Services located in Bloomington, MN and Midwest Health Benefits with offices in Morris and Glenwood. Both offer a wide array of health insurance and ancillary benefit plans as well as employee education and assistance. Also being considered is Integrity Benefits out of St. Paul (Jim Ochs is probably familiar to many of you), which offers only

life insurance and other voluntary ancillary benefits including supplemental life insurance, short term disability, long term disability, dental and vision insurance.

- Other transition issues were also discussed and considered. These included the current employer consideration and authorization to define the transition to Horizon Public Health as a transfer rather than a termination of employment. Accordingly, the current employers must consider and authorize employees to transfer their accumulated vacation and sick leave to the new organization and subsequently agree to transfer sufficient funds to the new organization to cover the potential cost of the payout of that transferred leave. As of the August 18 meeting, the Douglas County Board has officially taken action on this. The Pope and Stevens Traverse Grant Boards will consider similar action in September.
- Tubbs summarized a meeting between Shawn Larsen from Morris Electronics, Chad Swanson from Computers Professional Unlimited, Greta Siegel and herself regarding Horizon's needs for a data center. Earlier Larsen had provided an estimated cost of the purchase and installation of a new server with establishment of the Horizon PH network. At the most recent meeting, Larsen and Swanson demonstrated the capability and speed of the proposed network and agreed to provide an estimate for leasing the necessary server space and building the Horizon network.
- The Implementation Committee considered a staff question regarding whether comp time would be allowed to carry over into the new organization and after some discussion, decided that comp time would not transfer to Horizon Public Health but rather, employees should be encouraged to use the time or have it paid out on December 31, 2014.

The next meeting of the Horizon Implementation Committee was scheduled for Monday, September 22 from 1:00 – 3:00 p.m. at the Douglas County Public Works meeting room in Alexandria.

In other August activity, the full Horizon Community Health Board met on Tuesday, August 26 and took the following actions related to the implementation of Horizon Public Health:

- Reviewed proposal information from two local banks. The two bank proposals were very close in comparison and both were endorsed by Counties who use them. The Board chose Glenwood State Bank as the Financial Institution for Horizon Public Health.
- Reviewed information from Insurance Brokers for health insurance, life insurance, and ancillary insurances, such as vision, dental, disability, etc. Gallagher Benefits Services was chosen as the Health Insurance Broker. Gallagher Benefits is based in Bloomington and has recently expanded and is the Broker for Grant County and was recently chosen also for Douglas County. The plans offered will be Blue Cross Blue Shield plans. Integrity Employee Benefits, LLC was chosen as the broker for life insurance and ancillary insurances. Integrity, represented by Jim Ochs, currently serves some of the Horizon Counties.
- Approved a contract with Computer Professionals Unlimited, Morris, for payroll software.
- Approved an agreement with Morris Electronics to serve as the Data Center for Horizon Public Health. Horizon Public Health will lease a server from Morris Electronics, which will be housed at and maintained by Morris Electronics. Morris Electronics will be responsible for Horizon's network. Horizon will contract with County IT departments for local support.
- Authorized funding from the Horizon Community Health Board fund balance for the CPU and Morris Electronics contracts.
- Determined paid and voluntary ancillary benefits to be offered to employees will be decided by the Horizon Public Health governing board. Employer paid life insurance previously recommended is \$20,000 for employees who have worked less than 6 years and \$30,000 for employees who have worked 6 years or longer.
- Determined to lease 12 2015 Chevy Malibu's from Enterprise Fleet Management as the Horizon Public Health Fleet. Horizon Public Health will also bring forward two currently owned vehicles, which are currently and will continue to be specifically for the Environmental Health program.
- Discussed Transition timelines and employee notifications: the goal is for the Horizon Public Health Board to meet in early October to make decisions in order for offers of employment to be sent to staff by mid-October.

- Took action to formally send letters of intent to Douglas County, Pope County and Stevens Traverse Grant Public Health ending the current delegation agreements as Horizon Public Health will assume all statutory public health functions beginning January 1, 2015.

Upcoming meetings scheduled are:

- Horizon Implementation Committee September 22nd at 1pm
- Horizon Public Health Board (new governing Board) October 6th at 9am; November 3rd at 9am; and December 22nd at 2pm
- Horizon Community Health Board: December 22nd at 1pm

All meetings are anticipated to be at the Douglas County Public Works building.

In the coming weeks, we will be busy with the “nitty-gritty” administrative details that need to be accomplished to be a functional operational Public Health department January 1, 2015. You, as our staff, are the most important part of our public health department. In our busyness, if we don’t reach out to you and communicate as often as you’d like, please remember our doors are open. Stop in and talk with us any time. Your input and participation are important and valued. This journey is our journey together. Thank you for your patience, support and engaging in the journey with us!

Sandy, Sharon and Kathy



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Horizon Implementation Update September 2014

The days and weeks and months continue to zoom by and fortunately, the pieces are really starting to come together because we are just a short 3 months away from implementation. Of great significance during the past month was the passage of the Horizon Public Health Joint Powers Agreement by all five individual county boards on September 16, 2014. With that signed, we are now able to move forward with securing insurance coverage through MCIT, notifying health plans of the upcoming changes, getting name and identification numbers changed on some important documents and records, and officially convening the first organizational meeting of the “new” Horizon Community Health Board. This will occur on Monday, October 6 at 9:00 a.m. at the Douglas County Public Works Building in Alexandria. The Horizon Public Health governing board will be comprised of 13 members who have been appointed as follows:

Douglas County – Bev Bales, Charlie Meyer, and Jim Stratton
Grant County – Todd Schneeberger and Ron Woltjer
Pope County – Larry Kittelson and Larry Lindor
Stevens County – Jeanne Ennen and Bob Kopitzke
Traverse County – Todd Johnson and Dave Salberg
Community representatives – Deb Hengel and Dennis Thompson

It’s a packed agenda to say the least with many important decisions to come before the Board including final approval of the Personnel Policies, position descriptions, position classification, health insurance and other ancillary benefits, and a preliminary review of the 2015 budget. The meeting is scheduled for 2 ½ hours but could easily last for 3 hours. But it will be very exciting since much of what we’ve been exploring and planning and projecting will finally come together.

Following the vote on September 16, the Horizon Implementation Committee met on Monday, September 22 to continue some of the final planning steps in preparation for the first meeting of the Horizon Public Health Board. Of significant discussion was consideration of the health insurance options that had been compiled by Paul Bantle from Gallagher Benefit Services. The discussion addressed not only the varying options that will be made available to Horizon Public Health employees but also the employer contribution. This is a decision that will have significant financial impact and will require intense and thoughtful consideration by the Board in making a final decision. Paul Bantle from Gallagher along with one or more representatives from Blue Cross Blue Shield will be in attendance at the October 6 Horizon Public Health Board meeting to assist in answering questions of the Board members as they consider the various options.

The Implementation Committee also reviewed and discussed a proposed Transition Policy that addresses some of the issues specifically related to the transition from the current employer to Horizon Public Health employment such as the ability to bring years of service credit from the previous employer to the new organization and the ability to convert up to 2 weeks (75 or 80 hours depending on the regular work schedule of the employee) of sick leave to PTO at the time of transition only. Some suggested changes were offered which will be incorporated in to the final policy and presented to the Horizon Public Health Board on Oct 6.

In other developments, the new domain for the Horizon website has been secured. Either of the following email addresses will take the user to the Horizon website: www.horizonpublichealth.com or www.horizonpublichealth.org. It was decided that we will publicly advertise the .com address but to catch all possible attempts to search us out via the web, both the .com and .org domains will be assigned to HPH. With

the need to complete multiple applications and documents related to the new organization, it was also necessary to establish email addresses for everyone, even though those addresses (as well as the website) are not currently functional. Email addresses will be [firstnamelastinitial@horizonph.com](mailto:firstname.lastname@horizonph.com) . As an example, John Doe would be johnd@horizonph.com. More information will be forthcoming in the next couple of months.

Along with all of this, the administrative staff has had 2 preliminary meetings with Brenda Menier from the MN Department of Health in preparation for the development of a Horizon Strategic Plan. The submission of this plan, along with the Community health assessment and the community health improvement plan, are required of all Community Health Boards in MN no later than March 31, 2015. Two 4-hour sessions will be facilitated on the afternoon of October 22 and the morning of October 23. Along with the management team, there will be several staff and community members asked to participate in the strategic planning process.

It's obviously a very busy time for each and every one of us. We know that you're all pushed to the limit with high caseloads and challenging situations, whether that is with families or other community initiatives. We appreciate your ability to carry on despite all of the impending changes. We appreciate those of you that spent time pulling together some very compelling grant applications to PrimeWest Health and we will be anxiously awaiting their decision regarding those proposals sometime during the first full week in October. We appreciate how professionally you conduct yourselves and how skillfully you continue to serve the people in our communities. We are so fortunate to be moving in to our new organization with a top-notch staff that will soon comprise Horizon Public Health. It's 3 months and counting....thanks for making this journey with us.

Sandy, Sharon and Kathy



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Horizon Implementation Update October 2014

October was such a busy and super exciting month in the ongoing development of Horizon Public Health! During October, the “new” Horizon Public Health Governing Board held its first meeting and employment offers went out to all the staff.....two really pivotal events for Horizon Public Health.

First of all, the Horizon Public Health Board (officially still the Horizon Community Health Board) held its very first meeting during which all of the typical organizational agenda items were addressed. The newly elected Chair is Larry Lindor, representing Pope County, and the Vice-Chair is Jeanne Ennen, representing Stevens County. Deb Hengel and Dennis Thompson were appointed to the 2 community representative Board positions for the remainder of 2014. Recruitment of interested community members will be conducted prior to the start of 2015 with appointments/re-appointments done at that time. Terry Foy of Ratwik, Roszak and Maloney was appointed as Horizon Public Health’s legal counsel.

Health insurance plan options were presented and adopted and the employer contribution was set at \$655.63 for those receiving single coverage and \$819.55 for those choosing family coverage. Employer paid life insurance was approved and voluntary ancillary benefit options were established. Benefit information meetings are scheduled for Tuesday, Nov 4 in Douglas, Pope and Stevens Counties. Be sure to attend one of those meetings if at all possible.

The Horizon Public Health Personnel Policies were presented and adopted as was the Horizon Public Health Transition Policy. Both of these policies are available for you and will eventually be posted on the Horizon Public Health website.

In other personnel issues, the position descriptions and position classifications were approved. The Board discussed the process by which Horizon Public Health will extend employment offers to all current employees of Douglas, Pope, and Stevens Traverse Grant Public Health. The Personnel Committee was delegated the authority to finalize the process and authorize offer letters.

In addition to all of these personnel issues, the Horizon CHB approved the car rental agreement with Enterprise and authorized rental of twelve 2015 Chevy Malibus. The current vehicles owned by the Public Health Departments will be liquidated at the end of the year and the equity returned to the respective counties. The Board also approved an agreement with ACI, a corporation dually owned by Shawn Larsen and Chad Swanson. The agreement establishes a 3-year lease and maintenance of the server that will host the 5-county public health network.

The other significant event that occurred in October was the employment offer letters that went out to all staff. We have been looking forward to this day ever since we first started moving toward integration and we certainly know that you were all anxious to have those in hand as well. The letters have all been returned and will be presented for approval to the Horizon CHB at their meeting on Monday, Nov. 3. At about the same time as the offer letters were mailed, three different vacant positions were also posted. As a result of that, we’re happy to report that Betsy Hills has applied for and will be offered the Human Resources Coordinator position and Chelsea Hormann applied for and will be offered the combined Account Technician/Program Support Specialist position in the Pope County office. With no internal response to the full time Account Technician

position, it will now be advertised externally. All 3 position changes will be effective January 1, 2015 with all of the Horizon Public Health employment transitions. Congratulations to Betsy and Chelsea on their new positions and thank you to all of you for joining the Horizon Public Health team. We need each and every one of you and we're so happy that we'll all be moving forward together.

Along with all of these two major events, there's been an endless amount of paperwork involved with this transition. New agreements need to be established with Medicare, MDH, PrimeWest, and all of the other health plans with whom we current have contracts. These have proven to be extremely challenging and time consuming in some situations such as the transfer of the Medicare provider agreement. In other situations, such as PrimeWest, it's been a pretty straightforward transition. But we're getting there one step at a time. We owe a huge Thank You to Greta for her persistence in wading through all of these transition forms and processes.

Finally, the management staff from the 3 Public Health Departments along with several other staff and one CHB member participated in 2 half-day strategic planning sessions. The development of a Strategic Plan is one of the required documents that must be completed by all local health departments in accordance with MN's Local Public Health Act. With the integration of Horizon Public Health just around the corner, it was the perfect time to develop a strategic plan. Facilitated by Brenda Menier and Linda Bauck from MDH, participants reviewed other community health assessment information compiled by other community organizations, reviewed the current mission and vision statements of the 3 Public Health Departments and drafted a shared mission statement for Horizon Public Health. We then proceeded to identify some key shared values and developed some shared concepts for inclusion in the organization's vision statement. After confirming agreement on the vision elements, the group then moved on to develop some proposed strategies that need to happen in the next 1-2 years in order that the vision become a reality and finally, some specific action steps were drafted. All of this information will be summarized by the facilitators and then returned to the Horizon Public Health Strategic Planning team for completion. This is an important process for Horizon Public Health as it really establishes our direction for the next 3-5 years. Expect to hear more about this as it will be important that this strategic plan be a document that reflects a mission and vision that is supported and shared by everyone in the organization.

It goes without saying that October was a busy month, much like every month since we officially moved into implementation last spring. But this month was different in that what we have been planning and working toward for nearly 3 years has now become official. As we sat before the new Horizon Community Health Board on October 6 and obtained the approval of the Board for all of the "draft" documents that we've been working on, it struck all of us that we had finally made it! So even though we don't officially turn the key on the new organization until January 1st, the significance of the events that occurred during October is cause for celebration. Our "to-do" list is still long but there are a lot of check marks there too. And now we're on the home stretch!

We just cannot thank you enough for your support and for what each of you bring to our new organization. Horizon Public Health is a venture that has gained the attention of state and national organizations and is sure to be a model for others across the country. Thank you for being a part of it. We couldn't have done it without you!

As always, our doors are open and we're anxious to hear your thoughts and ideas. Do feel free to stop in any time.

Sandy, Sharon and Kathy



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Horizon Implementation Update November 2014

What can we say? We are one month and counting now. Sometimes it's hard to believe that we're actually almost there! The past 3 years have been some of the most challenging in all of our careers and yet they have also been the most exciting and the most rewarding. Three years ago we set out to explore whether the integration of our 3 separate Public Health Departments into a single organization would assure the strongest possible foundation to support current and future programs and services to meet the needs of the people in our 5 counties. And now, 3 years later, that is about to become a reality. These are very exciting times to say the least (kind of like a wild roller coaster ride at times) and we cannot thank you enough for your patience and understanding as together, we move forward to Horizon Public Health.

November has been the month of forms and applications. With each contract and every component of the transition, there has been a packet of documents and forms that need to be completed and that is often accompanied by long telephone conversations in which we attempt to explain who/what/how this new Horizon Public Health organization will function. It no longer surprises any of us when we initiate a contact to change the name on a contract or something similar and in turn, we receive about 6 documents that need to be completed and signed. If it wasn't so overwhelming, it might be humorous. But we're getting through all of them and we'll be ready to open our doors as Horizon Public Health in January!

Along with all of that paperwork, we have established new employer status with the MN State Retirement System which will enable continuation of the existing Health Care Savings Plan accounts for those of you that have had them with your previous employer. Similarly, we have completed the employer enrollment documents with 3 different 457(b) deferred compensation providers: Nationwide, VALIC and Edward Jones Mass Mutual. Once we are officially approved as an employer, those of you that currently make deferred comp contributions will be contacted by your respective representatives in order to get you enrolled as a Horizon Public Health employee. Although you will initially have a new account with your deferred comp provider, your representative will be able to counsel you about your options for consolidating those accounts. In some cases, it may be advisable to maintain separate accounts and the provider representative can review that with you. For those that do not currently contribute, contact information will be provided to you at the Mega Staff meeting and you can follow up for more information if you choose.

By the time you read this update, all of you that are eligible for the health and/or life insurance and other benefits will have completed your enrollment. We must apologize to you for the complications that some of you encountered with this process. We had hoped that the on-line enrollment through BenefitsConnect would be fast, easy and clear. We know that many of you did not experience that and we regret that. We will be verifying all of your enrollment information with each of you individually prior to the final input of the data into payroll so rest assured, you will have one more chance to confirm that the elections you made were actually what you intended.

Greta has also been working with Shawn Larsen from Morris Electronics to assure that our Horizon Public Health server and associated programs get up and running. It is our understanding that the new Horizon email addresses will be functional very soon and we will notify you when that has occurred. We have also met with the payroll contacts from each of the current employers to confirm with them our timelines and assure that your December paychecks reflect the appropriate deductions. We are keeping our fingers crossed that this process

goes smoothly but please know that if, for some reason, it does not then we will fix it immediately. You should have all also received information about our 2015 Horizon payroll calendar. Please remember to get your bank information to Greta soon so that the auto deposits can be established for each of you.

As for the Horizon Community Health Board, they met only once this month on Monday, Nov 3. At that meeting, the Board took action to officially approve hiring all of the staff as well as to authorize filling some vacancies. They also reviewed and approved the Horizon CHB by-laws and authorized Horizon Public Health to invoice each of the counties for 50% of their respective start-up balance contribution that is needed to meet initial expenses. Finally, they heard some grant updates and established their 2015 meeting dates for the 2nd Monday of every month at 9:00 a.m.

So that about sums up another month. It's a busy time for everyone, both at work and at home with all of the holiday planning and activities. We do hope that you all will take time to appreciate and spend time with family and friends at this special time of the year. We also hope that you know how much we appreciate all of you. We are thankful for your great work, your dedication, your smiles and your humor. We are so fortunate to be able to come to work and see and feel the dedication and support from each of you. Have a wonderful holiday season and again, thank you.

Sandy, Sharon and Kathy