

**AGENDA**  
**HENDRICKS COUNTY COUNCIL**  
**Hendricks County Government Center**  
**355 South Washington Street, Danville, Indiana**  
**January 2, 2018**  
**9:00 A.M.**

CALL TO ORDER

ADOPTION OF AGENDA

MINUTES OF DECEMBER 5, 2017

UNFINISHED BUSINESS

Election Of Officers  
Appointments  
2018 Calendar  
PTO Carry Over - Judge Love

NEW BUSINESS:

Pat Baldwin - IV-D Incentive Funding  
Jeremy Weber - Adjustments  
Erin Hughes - Human Resources - Police Reserve Officer Insurance Per Statute IC 36-8-3-20

EMERGENCY ADDITIONAL APPROPRIATIONS

REALLOCATIONS OF FUNDS

Status of Funds  
Final Encumbrances Total of \$7,546,140.47  
End of Year Adjustments/Corrections  
AIC Legislative Conference January 30 & 31, 2018

**HENDRICKS COUNTY COUNCIL MEETING**  
**DECEMBER 5, 2017**

The regular meeting of the Hendricks County Council was called to order by President Eric Wathen on Tuesday, December 5, 2017 with the following in attendance: Caleb Brown, Larry Hesson, Jay Puckett, Mike Rogers, Eric Wathen, Brad Whicker, David Wyeth, Financial Administrator Tami Mitchell, and Auditor Nancy Marsh. The Pledge of Allegiance was led by President, Eric Wathen.

**IN THE MATTER OF THE AGENDA**

It was moved by Brad Whicker and seconded by Larry Hesson to adopt the agenda as presented. Motion carried 7-0.

**IN THE MATTER OF THE NOVEMBER 7, 2017 REGULAR COUNCIL MEETING MINUTES**

It was moved by Jay Puckett and seconded by Brad Whicker that the minutes of the November 7, 2017 regular meeting be approved as amended. Motion carried 7-0.

**IN THE MATTER OF LIBRARY BOARD APPOINTMENTS**

Brownsburg Library Director Denise Robinson recommended the appointment of Bryan Green Jr, to the Brownsburg Library Board for a four-year term ending January 31, 2021. It was moved by Caleb Brown and seconded by Jay Puckett to appoint Bryan Green. Motion carried 7-0.

It was moved by Larry Hesson and seconded by Brad Whicker to appoint Julie Doss to the Avon Washington Township Library Board for a four-year term ending on the 31<sup>st</sup> day of December, 2021. Motion carried 7-0.

It was moved by Mike Rogers and seconded by David Wyeth to appoint Daren Shoemaker to the Avon Washington Township Library Board to fill the remaining term of J. C. Anderson ending December 31, 2017. Motion carried 7-0.

**IN THE MATTER THE COUNCIL SUPPORT OF THE PLAINFIELD SITE**  
**FOR THE CENTRAL REGION LITTLE LEAGUE HEADQUARTERS**

Kent McPhail, on behalf Town of Plainfield expressed his gratitude to the Hendricks County Council and Commissioners for their support in Plainfield's bid to relocate the Central Region Little League Headquarters to Plainfield, Indiana. Mr. McPhail stated it was a great cooperative effort and thought the package the Town of Plainfield had put together was an outstanding presentation of the amenities offered by the Town of Plainfield. Surviving to the final round, Zionsville was selected over Plainfield.

### **THE MATTER OF THE HENDRICKS COUNTY COMMUNICATIONS CENTER 2018 BUDGET**

Auditor Nancy Marsh presented the 2018 Hendricks County Communications Center Budget. Ms. Marsh stated Clerk-Treasurer Wes Bennett and Steve Cook originally presented the budget during the budget meetings but noted it was not complete or approved by the Plainfield Town Council. The final budget, approved by the Town of Plainfield, had not been reviewed and approved by the Hendricks County Council. The Communications Center Budget was submitted through Gateway with the Town of Plainfield's budget. Discussion was held on the mechanics of the arrangement with the Town of Plainfield for their administration of the Communication Center. It was moved by Jay Puckett and seconded by Larry Hesson to accept the Communication Center budget as presented and approved by the Town of Plainfield. Motion carried 7-0.

### **IN THE MATTER OF THE HENDRICKS COUNTY MUSEUM**

Pat Baldwin, representing the Hendricks County Museum, presented a request to process payroll through the county payroll system for a new County Museum part time employee. Ms. Baldwin stated the Museum is a 501(c)3 she had spoken with the County Auditor about the potential process. Ms. Baldwin stated it would be like a grant program when funding is received from other sources like the Law Enforcement Fund or DAG funds. Ms. Baldwin stated that the part time employee would fall under the County's hiring policy and employee policy manual. Ms. Baldwin stated the wages and benefits of FICA, Worker's Compensation and Unemployment would be reimbursed by the Museum Board and the part time employee would not be eligible for PERF or Health Insurance. Mike Rogers and Larry Hesson expressed concerns about the person being a county employee. It was moved by Brad Whicker and seconded by David Wyeth to move forward with having a Memorandum of Understanding prepared and reviewed by legal counsel. Ms. Baldwin stated she would work with County Attorney, Greg Steuerwald. Mr. Hesson stated that the Memorandum of Understanding must contain language that should funding no longer be available, the position was no longer available through Hendricks County. Motion carried 5-2 (LH/MR).

### **IN THE MATTER OF VOTER'S REGISTRATION**

Hendricks County Voter's Registration Chief Deputy Laura Herzog presented the Hendricks County Vote Center Plan and Resolution 2017-52, A Resolution Approving the Designation of Hendricks County as a Vote Center County. Ms. Herzog stated it gives the voters flexibility and there will be 26 vote center locations next year recognizing a savings of \$97,630. It was moved by Larry Hesson and seconded by Brad Whicker to approve to approve the Vote Center Plan and execute Resolution 2017-52 as presented. Motion carried 7-0.

### **IN THE MATTER OF HUMAN RESOURCES**

Erin Hughes, Human Resources, presented and made the following recommendation:

Assistant Superintendent: FLSA: Exempt: Pay Band: SAM5  
Assistant Naturalist: FLSA: Non-Exempt: Pay Band: OSS4  
Maintenance Technician: FLSA: Non-Exempt: Pay Band: LTC 4  
Part Time Recording Clerk Deputy – FLSA Non-Exempt: Pay Band OSS 4  
Part Time Court Reporter – FLSA Non-Exempt

It was moved by Larry Hesson and seconded by Brad Whicker to approve the classifications as presented. Motion carried 7-0.

#### **IN THE MATTER OF THE 2018 HENDRICKS COUNTY SALARY ORDINANCE**

Auditor Nancy Marsh presented the 2018 Salary Ordinance 2017-53 for the Council's review and approval. Councilman Jay Puckett asked for the record to reflect that there are several employees paid through Hendricks County that receive funding from other than county resources. It was moved by Caleb Brown and seconded by Jay Puckett to approve the 2018 Hendricks County Salary Ordinance 2017-53 as presented. Motion carried 7-0.

#### **IN THE MATTER OF THE 2018 WAGE SCALE**

The 2018 Hendricks County Wage Scale was presented by Auditor Marsh. The 2018 Wage scale reflects the 3% increases in 2018. It was moved by Jay Puckett and seconded by Brad Whicker to approve the Wage Scale as presented. Motion carried 7-0. Auditor Marsh stated that the Sheriff's Matrix and Court's wage scale was distributed by Financial Administrator Tami Mitchell for the Council's review.

#### **IN THE MATTER OF MEAL PER DIEM**

Auditor Nancy Marsh presented a revised meal reimbursement policy from a receipt based policy to a per diem policy. Auditor Marsh stated that she and Sheriff Clark had brought the change to the Commissioners and they had approved the change in the policy and it was at the Council's discretion to approve the amounts allowed. Valid questions were asked and answered regarding the pros and cons of both policies and Auditor Marsh stated, that in the big picture, resources will be saved by going with the Meal Per Diem Policy. It was moved by Brad Whicker and seconded by Mike Rogers to approve the Per Diem amounts as presented. Motion carried 7-0.

#### **IN THE MATTER OF THE 2017 ENCUMBRANCES TO THE 2018 BUDGET**

Auditor Nancy Marsh presented a list of requested encumbrances through December 5, 2017. It was moved by Jay Puckett and seconded by Larry Hesson to approve the encumbrances as presented as well as any additional encumber requests through December 31, 2017 as determined lawful by the Auditor. Motion carried 7-0.

### **IN THE MATTER OF THE EMERGENCY ADDITIONAL APPROPRIATIONS**

It was moved by Larry Hesson and seconded by Caleb Brown to approve the Jail number 1 in the amount of \$31,078.00; VOCA Grant number 2 in the amount of \$52,440.00; VOCA Grant number 3 in the amount of \$34,550.00; Drug Prosecution Grant number 4 in the amount of \$10,000.00 supported by Deputy Prosecutor Jim Bryan; Cornerstone number 5 in the amount of \$50,000; CASA number 6 in the amount of \$2,500.00; CASA number 7 in the amount of \$2,500.00; CASA number 8 in the amount of \$22,675.00; CASA number 9 in the amount of \$2,000.00; CASA number 10 in the amount of \$275.00; CASA number 11 in the amount of \$2,550.00; CASA number 12 in the amount of \$2,500.00; Health number 13 in the amount of \$3,500.00; and Health number 14 in the amount of \$6,500.00. Motion carried 7-0.

### **IN THE MATTER OF THE REALLOCATION OF FUNDS**

It was moved by Larry Hesson and seconded by Mike Rogers to approve Auditor transfer number 1 in the amount of \$1,200.00; Prosecutor transfer number 2 in the amount of \$1,700.00; Planning & Building transfers number 3 in the amount of \$885.00; number 4 in the amount of \$1,109.00; number 5 in the amount of \$4,000; Jail transfer number 6 in the amount of \$9.00; Engineer transfer number 7 in the amount of \$6.00; Computer transfer in the amount of \$3.00; Court Administration transfer number 9 in the amount of \$6,000.00; Surveyor/Cornerstone transfer number 10 in the amount of \$4,500.00; Immunization Grant number 11 in the amount of \$2,271.00; number 12 in the amount of \$15,330.00; number 13 in the amount of \$1,275.00; number 14 in the amount of \$6,171.00; number 15 in the amount of \$3,558.00; number 16 in the amount of \$857.00; number 17 in the amount of \$1,136.00; number 18 in the amount of \$3,283.00; number 19 in the amount of \$489.00; and number 20 in the amount of \$5,338.00. Motion carried 7-0.

### **OTHER BUSINESS**

Auditor Nancy Marsh presented the Status of Funds report for the Council's review.

Sheriff Brett Clark informed the Council that he had gone through the bid process with the Commissioners for video improvements in blind spots at the jail. He stated only two bids were received of which only one met the bid specifications. Sheriff Clark stated the Commissioners had instructed him to go to the Council for funding. Sheriff Clark emphasized that the improvements requested were for liability purposes to protect the county. After discussion, the Auditor was instructed to advertise for the January meeting an additional appropriation from Food and Beverage.

Sheriff Clark discussed the possibility of purchasing a body scanner similar to what you see at the airport. Sheriff Clark stated there is always the potential for contraband to come into the jail again subjecting the County to liability. Sheriff Clark stated that inmates are very creative in hiding contraband which could cause life-threatening situations. Sheriff Clark stated the scanner costs in the range of \$150,000 but could easily be portable and used in a new jail when built.

Commissioner Phyllis Palmer announced that County Engineer John Ayers had received "Engineer of the Year" at the Commissioners Annual Conference. Congratulations were offered. Caleb Brown noted that John Ayers does a very good job and Hendricks County roads are some of the best in the state. Larry Hesson complimented John on the paving plan that encompasses every road in Hendricks County. Mike Rogers complimented Mr. Ayers on the Corridor and encouraged a comprehensive road plan was of upmost importance.

Eric Wathen stated the State Board of Accounts Exit Conference went well bit details cannot be released until the Audit is released.

There being no further business to come before the Council, by motion made by Larry Hesson and seconded by Mike Rogers, the meeting was adjourned. Motion carried 7-0.

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Caleb M. Brown

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Larry R. Hesson

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Jay R. Puckett

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Michael C. Rogers

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Eric Wathen

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Brad Whicker

ATTEST:

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Nancy L. Marsh

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David Wyeth

# HENDRICKS COUNTY COUNCIL APPOINTMENTS & BOARDS

As of December 31, 2017

(only highlighted needs Council action)

## COUNCIL MEMBERS SERVING ON BOARDS

BOARD	NAME	TERM EXPIRES	NOTES
Area Plan Commission	Brad Whicker	12/31/2017	Annual Council Appointee
Emergency Management Advisory	Jay Puckett	12/31/2017	Annual Council Appointee
Fair Board	David Wyeth	12/31/2017	Annual Council Appointee
HCEDP	Eric Wathen	12/31/2017	Annual Council Appointee
Health Board Liaison	Larry Hesson	12/31/2017	Annual Council Appointee
Senior Services	Mike Rogers	12/31/2017	Annual Council Appointee
Solid Waste	Brad Whicker	12/31/2017	Annual Council Appointee
Solid Waste	Caleb Brown	12/31/2017	Annual Council Appointee
HCCVB	Caleb Brown	12/31/2017	BCC Appointed 1 yr term
Regional Transportation Authority	Larry Hesson	12/31/2017	BCC Appointed 4 yr term (1.08.13)
Community Corrections Advisory	Larry Hesson	12/31/2019	BCC Appointed 4 yr term (1.13.15)
Hendricks College Network	Larry Hesson	3/12/2018	Network Appointment 3 yr term

## ALL OTHER COUNCIL APPOINTEES & NOMINEES

BOARD	NAME	TERM EXPIRES	NOTES & Date of Council Action
Alcohol Beverage Commission	Eugene Trapp	12/31/2017	Council Appt (1 yr term)(01.12.17)
Area Plan Commission	Walt O'Riley	12/31/2018	Council's Citizen Appt (4 year term)(1.8.15)
EDC Avon	Marland V. Villanueva	2/1/2017	Nomination only IC 36-7-12-6 (1 yr term)
EDC Brownsburg	Joe Dunbar	2/1/2017	Nomination only IC 36-7-12-6 (1 yr term)
EDC Danville	Greg Van Laere	2/1/2017	Nomination only IC 36-7-12-6 (1 yr term)
EDC Plainfield	Steve Craney	2/1/2017	Nomination only IC 36-7-12-6 (1 yr term)
HC Redevelopment Commission	Jud Wolfe	12/31/2017	Council Appt (1 yr term)(1.12.17)
HC Redevelopment Commission	Linda Watson Stansbury	12/31/2017	Council Appt (1 yr term)(1.12.17)
Library Avon-Washington Twp	Julie Doss	12/31/2021	Council Appt (4 yr term)(11.14.13)
Library Avon-Washington Twp	Daren Shoemaker	12/31/2019	Council Appt (4 yr term)(08.11.11)
Library Brownsburg	Patti Hammerle	12/31/2018	Council Appt (4 yr term) (10.09.14)
Library Brownsburg	Bryan Green Jr.	12/31/2021	Council Appt (4 yr term) (10.10.13)
Library Clayton	Clinton L Wasson	10/31/2017	Council Appt (4 yr term)(10.10.13)
Library Clayton	Dan Berger	8/31/2016	Council Appt (4 yr term) (8.16.12)
Library Coatesville	Judith Sexton	8/6/2018	Council Appt (4 yr term)(7.10.14)
Library Coatesville	Carla Gill	2/10/2021	Council Appt (4 yr term)(01.12.17)
Library Danville	Larry Nilles	5/5/2018	Council Appt (4 yr term)(5.05.14)
Library Plainfield	Tina Lamb	12/31/2019	Council Appt (4 yr term) (01.14.16)
Park Board	Douglas L. Moon - (Independer	1st Monday 2020	Council Appt (4 yr term)(05.12.16)
Park Board	Robert L. Niemeyer -(Rep)	1st Monday 2018	Council Appt (4 yr term)(11.15.13)
PTABOA	Andrea Hopper	none	Council Appt (no term) (01.14.16)

## PERMANENT HOLD UNTIL NEEDED

Ronald Reagan Task Force	Jay Puckett	12/31/2012	Annual Council Appointee
Ronald Reagan Task Force	Brad Whicker	12/31/2012	Annual Council Appointee
Judicial Center Advisory	Larry Hesson	12/31/2012	Annual Council Appointee
Purdue Extension Advisory Council	Jay Puckett - Rep #1	with term	Council Appt (6/11/2015)
Purdue Extension Advisory Council	Eric Wathen - Rep #2	with term	Council Appt (6/11/2015)



# **2018 COUNCIL CALENDAR**

355 South Washington Street  
Danville, IN 46122

Regular monthly business meetings are scheduled on the following dates of each month. Meetings will be held at the Hendricks County Government Center, 355 South Washington Street, Danville, IN 46122

## **REGULAR MONTHLY MEETINGS**

January 2, 2018 - 9:00 A.M.  
February 6, 2018 - 9:00 A.M.  
March 6, 2018 - 9:00 A.M.  
April 3, 2018 - 9:00 A.M.  
May 1, 2018 - 9:00 A.M.  
June 5, 2018 - 9:00 A.M.  
July 3, 2018 - 9:00 A.M.  
August 7, 2018 - 9:00 A.M.  
September 4, 2018 - 9:00 A.M.  
October 2, 2018 - 9:00 A.M.  
November 7, 2018 - 9:00 A.M.  
December 4, 2018 - 9:00 A.M.  
January 2, 2019 - 9:00 A.M.

## **COUNTY COUNCIL BUDGET WORKSHOPS**

Meeting Room 3

August 21, 2018 - 1:00 P.M.  
August 22, 2018 - 9:00 A.M.  
August 28, 2018 - 9:00 A.M.

## **BENEFIT COMMITTEE**

Meeting Room 3

February 27, 2018 (Following Commissioners)  
May 1, 2018 (Following Council)  
July 24, 2018 (Following Commissioners)  
November 7, 2018 - (Following Council)

Changes to the regularly scheduled meetings and meeting agendas will be posted on the Hendricks County website at [www.co.hendricks.in.us](http://www.co.hendricks.in.us)

Any questions concerning meeting time or place should call  
317-745-9342 (Tami) or 317-745-9315 (Nancy)



# 2018 HENDRICKS COUNTY COUNCIL CALENDAR

## DEADLINES FOR ADDITIONAL APPROPRIATIONS AND TRANSFERS

DAY OF MEETING	DATE OF MEETING	TIME	LAST DAY TO REQUEST ADDITIONAL APPROPRIATIONS (SUBMIT BY NOON)	LAST DAY TO REQUEST TRANSFERS REQUIRING COUNCIL APPROVAL (SUBMIT BY NOON)	DATE ADVERTISEMENT APPEARS IN NEWSPAPERS
1st Tuesday	January 2, 2018	9:00 A.M.	December 15, 2017	December 29, 2017	December 21, 2017
1st Tuesday	February 6, 2018	9:00 A.M.	January 19, 2018	February 2, 2018	January 25, 2018
1st Tuesday	March 6, 2018	9:00 A.M.	February 16, 2018	March 2, 2018	February 22, 2018
1st Tuesday	April 3, 2018	9:00 A.M.	March 16, 2018	March 29, 2018	March 22, 2018
1st Tuesday	May 1, 2018	9:00 A.M.	April 13, 2018	April 27, 2018	April 19, 2018
1st Tuesday	June 5, 2018	9:00 A.M.	May 18, 2018	June 1, 2018	May 24, 2018
1st Tuesday	July 3, 2018	9:00 A.M.	June 15, 2018	June 29, 2018	June 21, 2018
1st Tuesday	August 7, 2018	9:00 A.M.	July 20, 2018	August 3, 2018	July 19, 2018
1st Tuesday	September 4, 2018	9:00 A.M.	August 17, 2018	August 31, 2018	August 23, 2018
1st Tuesday	October 2, 2018	9:00 A.M.	September 14, 2018	September 28, 2018	September 20, 2018
1st Wednesday	November 7, 2018	9:00 A.M.	October 19, 2018	November 2, 2018	October 25, 2018
1st Tuesday	December 4, 2018	9:00 A.M.	November 16, 2018	November 30, 2018	November 22, 2018
1st Wednesday	January 2, 2019	9:00 A.M.	December 14, 2018	December 29, 2018	December 20, 2018

### BUDGET WORKSHOPS FOR 2018 BUDGETS

3rd Tuesday	August 21, 2018	9:00 A.M.
3rd Wednesday	August 22, 2018	9:00 A.M.
4th Tuesday	August 28, 2018	9:00 A.M.

PUBLIC HEARING: October 2, 2018 9:00 A.M. (Regular Meeting)

ADOPTION: Tentative October 29, 30, or 31st, 2018 9:00 A.M. (Special Meeting)

### BENEFIT COMMITTEE MEETINGS

February 27, 2018	Following Commissioners
May 1, 2018	Following Council
July 24, 2018	Following Commissioners
November 7, 2018 (Wednesday)	Following Council

\*Due to having only weekly newspapers, the requests for additional appropriations and transfers must be to the Auditor's office by **noon** on the Friday before the above advertisement date. Holidays may alter this schedule. Please submit your requests for Additional Appropriations and Transfers by **noon** in the Main Auditor's Office. **DO NOT** include your requests with your payroll or budgetary claims.

Incentive money and the FFP (which is the monthly claim amount that you get 66% back from the feds) are two different things.

If the county pays an employee from their county general fund (just like any other employee in the county), then you can turn their salary and benefit amounts in each month on the monthly claim form and the feds will reimburse 66% of that money back to the county. The money is sent back into whatever account it is paid out of - so if the county is funding the position from the county general fund, then they get 66% of that put back into the county general fund. Anything spent from the child support county general budget is turned in on the monthly claim form for 66% reimbursement. That reimbursement goes back to the county general fund.

The incentive money is money the feds pay the states for performance (and our state then opts to send that money on to the counties). This money is sent quarterly and then a settle up amount is paid at the beginning of the next year (thereabouts). The amount sent quarterly is an approximate amount based on what your county earned in incentive in previous years. As long as you don't go down in your performance measures, your settle up amount should be in the positive, not negative (meaning you would owe the state back). This money is divided between the prosecutor (8897), the clerk (8899) and the Title IV-D (8895). The Title IV-D incentive used to be called the county incentive but that caused confusion because it can still only be spent on Title IV-D related things. The prosecutor gets 33.4%, the clerk gets 22.2%, and the Title IV-D incentive account gets 22.2%. (DCS/CSB retains the remaining 22.2%) Money spent from these accounts has to be submitted to the state on a claim form quarterly but these expenses do not get any reimbursement. The quarterly claim form is required to be submitted as a way of tracking the money spent from incentive accounts. Once the money is spent from any incentive account, it is gone.

In my opinion, it's best to fund employees from the county general fund because you always get back 66% of those expenses. So if you pay a worker \$30,000 a year from the county general fund, the county is actually only spending \$10,000 on that employee because they are getting \$20,000 back from the feds. If you pay that same worker \$30,000 a year from the incentive fund, then there is no reimbursement at all. Incentive fund monies should be used to enhance the child support program since the amount of incentive paid is tied directly to the county performance. Enhancements could include new equipment to streamline office practices, paying for investigative services for those hard to collect cases and things like that - things that may not necessarily be accounted for in a regular county budget line item.



# FFY2016 Performance Ranking

Overall: From 35<sup>th</sup> (2006) to 6<sup>th</sup> (2016)

FFY	Paternity Establishment (PEP)	Support Order Establishment (SOR)	Current Support (CS)	Cases Paying on Arrears (CPA)	Cost Effectiveness (CE)	Overall Rank with weighting
2016	10	2	22	3	21	6
2015	14	4	22	4	23	7
2006	31	42	43	32	2	35

STATISTICS

Children thrive in safe, caring, supportive families and communities

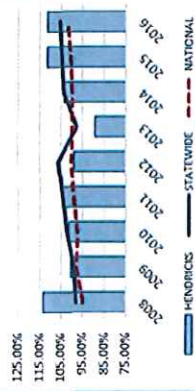
State of Indiana  
Department of Child Support  
Child Support Bureau

Select County Name:  
HENDRICKS

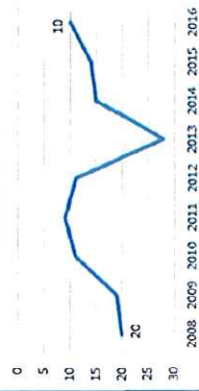
STATEWIDE

FFY	PEP	SOR	CS	CPA
2008	113.37%	61.69%	62.20%	72.63%
2009	100.35%	63.19%	62.06%	69.43%
2010	101.40%	65.08%	62.58%	69.77%
2011	104.19%	64.82%	62.06%	73.26%
2012	98.80%	65.25%	62.73%	70.50%
2013	89.20%	85.35%	66.67%	73.89%
2014	103.32%	92.09%	68.92%	75.98%
2015	111.25%	92.86%	70.13%	74.81%
2016	111.35%	92.88%	71.27%	76.51%

Paternity Establishment (PEP)



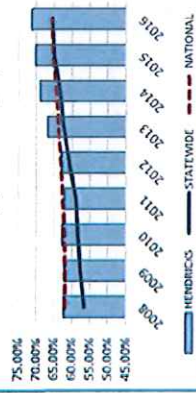
Indiana Rank - PEP



NATIONAL

FFY	PEP	SOR	CS	CPA
2008	94.90%	79.10%	61.90%	63.30%
2009	97.75%	79.41%	61.78%	63.34%
2010	97.26%	80.02%	61.96%	61.08%
2011	98.96%	80.92%	62.44%	62.17%
2012	100.11%	81.92%	62.98%	62.21%
2013	99.63%	83.07%	63.64%	62.36%
2014	99.64%	84.69%	64.21%	62.60%
2015	100.21%	85.73%	65.16%	63.84%
2016	101.74%	86.47%	65.41%	64.40%

Current Support Ratio (CS)



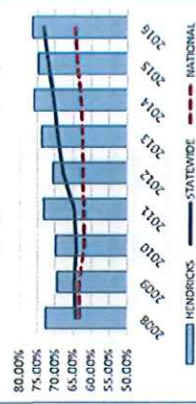
Indiana Rank - CS



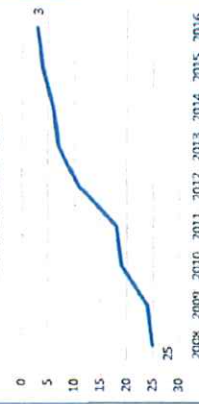
INDIANA RANK

FFY	PEP	SOR	CS	CPA	Overall
2008	20	41	41	25	33
2009	19	39	36	24	30
2010	11	41	35	19	25
2011	9	39	36	18	21
2012	11	36	31	11	12
2013	28	9	27	7	10
2014	15	6	25	6	9
2015	14	4	22	4	7
2016	10	2	22	3	6

Cases Paying on Arrears (CPA)



Indiana Rank - CPA



# **Memo**

**To:** Hendricks County Council  
**From:** Erin Hughes, Human Resources  
**Date:** January 1, 2018  
**Re:** Insurance

Item for discussion at your meeting Tuesday:

1. The state statute on Police reserve officers requires an increase in insurance on medical care for line of duty injury or illness and payments for loss of income for line of duty injury or illness. This change takes place on January 1, 2018. Stevenson and Jensen insurance has provided us with a quote from Provident insurance.

### **IC 36-8-3-20Police reserve officers**

Sec. 20. (a) This section applies to counties and towns as well as cities.

(b) A unit may provide by ordinance for any number of police reserve officers.

(c) Police reserve officers shall be appointed by the same authority that appoints regular members of the department.

(d) Police reserve officers may be designated by another name specified by ordinance.

(e) Police reserve officers may not be members of the regular police department but have all of the same police powers as regular members, except as limited by the rules of the department. Each department may adopt rules to limit the authority of police reserve officers.

(f) To the extent that money is appropriated for a purpose listed in this subsection, police reserve officers may receive any of the following:

(1) A uniform allowance.

(2) Compensation for time lost from other employment because of court appearances.

(3) In the case of county police reserve officers, compensation for lake patrol duties that the county sheriff assigns and approves for compensation.

(g) Police reserve officers are not eligible to participate in any pension program provided for regular members of the department.

(h) A police reserve officer may not be appointed until the officer has completed the training and probationary period specified by rules of the department.

(i) A police reserve officer appointed by the department after June 30, 1993, may not:

(1) make an arrest;

(2) conduct a search or a seizure of a person or property; or

(3) carry a firearm;

unless the police reserve officer successfully completes a pre-basic course under IC 5-2-1-9(f).

(j) A police reserve officer carrying out lake patrol duties under this chapter is immune from liability under IC 34-30-12, notwithstanding the payment of compensation to the officer.

(k) After June 30, 2015, a police reserve officer who has satisfactorily completed pre-basic training and has been appointed to a law enforcement department or agency on either a full-time or part-time basis is not eligible for continued employment unless the police reserve officer satisfactorily completes the mandatory inservice training requirements established by rules adopted by the law enforcement training board (created by IC 5-2-1-3). Inservice training must include training in interacting with persons with mental illness, addictive disorders, intellectual disabilities, autism, developmental disabilities, and Alzheimer's disease or related senile dementia, to be provided by persons approved by the secretary of family and social services and the board. The inservice training must also concern human and sexual trafficking and high risk missing persons (as defined in IC 5-2-17-1). The board may approve courses offered by other public or private training entities, including postsecondary educational institutions, as necessary in order to ensure the availability of an adequate number of inservice training programs. The board may waive a police reserve officer's inservice training requirements if the board determines that the police reserve officer's reason for lacking the required amount of inservice training hours is due to either of the following:

(1) An emergency situation.

(2) The unavailability of courses.

(l) After December 31, 2017, a unit shall:

(1) provide the coverage specified in section 22 of this chapter; and

(2) pay the amounts specified in section 23 of this chapter;

for a police reserve officer who is injured or contracts an illness in the course of or as the result of the performance of duties as a police reserve officer.

(m) A unit may purchase policies of group insurance or establish a plan of self-insurance to meet its obligations under section 22 or 23 of this chapter. The establishment of a self-insurance program under this subsection is subject to the approval of the unit's fiscal body. Expenses incurred for premiums for insurance or for other charges or expenses under sections 22 and 23 of this chapter shall be paid out of the unit's general fund in the same manner as other expenses of the unit are paid.

[Pre-Local Government Recodification Citations: 19-1-17.5-1; 19-1-17.5-2; 19-1-17.5-3.]

*As added by Acts 1981, P.L.309, SEC.52. Amended by P.L.30-1992, SEC.6; P.L.72-1992, SEC.3; P.L.57-1995, SEC.10; P.L.1-1998, SEC.212; P.L.100-2015, SEC.2; P.L.180-2017, SEC.4.*

**IC 36-8-3-22Police reserve officers; medical care for line of duty injury or illness; third party reimbursement**

Sec. 22. (a) This section applies after December 31, 2017, to a police reserve officer who is injured or contracts an illness in the course of or as the result of performing duties as a police reserve officer.

(b) A unit shall furnish without charge to a police reserve officer the physician, surgical, hospital, and nursing services and supplies the physician or surgeon in charge determines are necessary, including:

(1) medical and surgical care;

(2) medicines and laboratory, curative, and palliative agents and means;

(3) x-ray, diagnostic, and therapeutic service, including during a recovery period; and

(4) hospital and special nursing care, if the physician or surgeon in charge considers it necessary for proper recovery.

(c) A unit that has paid for the care of a police reserve officer under subsection (b) has a cause of action for reimbursement of the amount paid under subsection (b) against any third party against whom the police reserve officer has a cause of action for an injury sustained because of, or an illness caused by, the third party. The unit's cause of action is in addition to, and not in lieu of, a cause of action of the police reserve officer against the third party.

(d) A unit's obligation under this section supersedes any obligations that another medical insurance carrier has to pay the police reserve officer's expenses.

(e) In addition to purchasing policies of group insurance or establishing a plan of self-insurance under section 20(m) of this chapter, a unit may meet its obligation under this section by covering police reserve officers under the medical treatment and burial expense provisions of the worker's compensation law (IC 22-3-2 through IC 22-3-6) and the worker's occupational diseases law (IC 22-3-7). If compensability of the injury is an issue, the administrative procedures of IC 22-3-2 through IC 22-3-6 and IC 22-3-7 shall be used to determine the issue.

*As added by P.L.180-2017, SEC.5.*

**IC 36-8-3-23Police reserve officers; payments for loss of income for line of duty injury or illness**



Sec. 23. (a) This section applies after December 31, 2017, to a police reserve officer who is unable to pursue the officer's usual vocation as the result of an injury or illness occurring in the course of or as the result of the performance of duties as a police reserve officer.

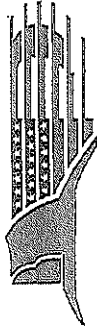
(b) A unit shall pay a police reserve officer a weekly amount that may not be less than the Indiana minimum wage established under IC 22-2-2 and computed on the basis of a forty (40) hour work week.

(c) A unit shall pay the police reserve officer the weekly amount described in subsection (b) for the lesser of:

(1) the period the police reserve officer is unable to pursue the officer's usual vocation; or

(2) two hundred sixty (260) weeks.

*As added by P.L. 180-2017, SEC. 6.*



**PROVIDENT**  
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Plans of Insurance for the  
**Hendricks County Sheriff's Reserve Division**  
*Benefits apply while performing a Covered Activity.*

Class 1 All volunteer classes of membership including but not limited to a Volunteer Member, Emergency Volunteer, Auxiliary Member, Fire Corps, Community Volunteer, Board Member, Trustee, Administrative Personnel, Junior Member, Member in Training, Probationary Member, and Part-Time Employees of the Policyholder.

**Section I: Death Benefits**

	Plan 3
A. Covered Injury Death Benefit	\$150,000
B. Covered Illness Death Benefit	\$150,000
C. HIV Positive Diagnosis Lump Sum Benefit	\$150,000
D. Bereavement Benefit	\$10,000
E. Dependent Child Benefit (Per Child)	\$37,500
F. Seat Belt Benefit	\$37,500
G. Airbag Benefit	\$10,000
H. Final Expenses Benefit	\$15,000
I. Spousal Benefit	

Up to

Up to

**Section II: Impairment Benefits**

A. Dismemberment, Loss of Speech or Hearing Benefit*	Up to	\$150,000
B. Vision Impairment Benefit*	Up to	\$150,000
C. Cosmetic Disfigurement from Burns Benefit*	Up to	\$150,000
D. Permanent Physical Impairment Benefit*	Up to	\$150,000
E. Felonious Assault Benefit	Up to	\$75,000
F. Impairment Modification Benefit*	Up to	\$50,000
G. Paralysis Benefit*	Up to	\$150,000

\* Benefits payable are based on the percentage of impairment or loss as defined in the Policy.

**Section III: Income Protection Benefits**

A. Weekly Total Disability Benefits	Up to	\$290
A.i. Covered Injury Minimum Weekly Total Disability Benefit		\$100
A.ii. Covered Illness Minimum Weekly Total Disability Benefit		\$100
A.iii. Covered Injury Weekly Earned Income Replacement Benefit**	Up to	\$190
A.iv. Covered Illness Weekly Earned Income Replacement Benefit**	Up to	\$190
B. Partial Disability Benefit **	Up to	\$290
C. Cost of Living Adjustment	Up to	\$870
D. First Week Disability Benefit**	Up to	\$1,000
E. Transition Benefit	Up to	\$290
F. Retraining Benefit	Up to	\$20,000

\*\* Benefits are payable in coordination with the Loss of Earnings Coverage as defined in the Policy.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
*Benefits apply while performing a Covered Activity.*

		Plan 3
<b>Section IV: Medical Expenses</b>		
A.	Medical Expense Benefit	Up to \$75,000
B.	Plastic Surgery Expense Benefit	Up to \$25,000
<b>Section V: Additional Benefits</b>		
A.	Daily Hospital Confinement and Outpatient Treatment Benefit	\$15
B.	Daily Critical Care Benefit	\$30
C.	Family Expense Benefit	\$15,000
D.	Occupational Rehabilitation Benefit	Up to \$5,000
E.	Mental Stress Management Benefit	Up to \$10,000
F.	Traumatic Incident Benefit	Up to \$5,000
G.	Health Insurance Premium Benefit	Up to \$12,000
H.	Surviving Spouse Education Benefit	Up to \$10,000
I.	Dependent Child Education Benefit	Up to \$10,000
<b>Annual Premium</b>		Plan 3
<i>The annual payment option offers a one-year rate guarantee.</i>		\$4,376

Preparation Date: December 11, 2017

Renewal Date: December 10, 2018

Proposal ID: 26007

This proposal is valid for 90 days from the Preparation Date or until 1 day prior to the Renewal Date, whichever is later.  
 Underwritten by: AXIS Insurance Company

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
*Benefits apply while performing a Covered Activity.*

**DISCLOSURE STATEMENT**

All U.S. insurance coverage described in this proposal is provided by AXIS Accident & Health and underwritten by AXIS Insurance Company. Coverage may not be available in all U.S. states and jurisdictions. Product availability and plan design features, including eligibility requirements, descriptions of benefits, exclusions or limitations may vary depending on state laws. This proposal outlines in general some of the important features of the proposed insurance program. The controlling provisions will be in the Policy, and this proposal is not intended in any way to modify the provisions or their meanings. The policy will be subject to the laws of the state in which it is issued.

This insurance coverage is administered by Provident Agency, Inc. of Pittsburgh, PA and in California, Provident of Pennsylvania Insurance Agency, Inc. of Pittsburgh, PA December 10, 2018.

This insurance does not apply to the extent that trade or economic sanctions or regulations prohibit AXIS Accident & Health from providing insurance, including, but not limited to, the payment of claims. Payment of claims under any insurance policy issued shall only be made in full compliance with all United States economic or trade and sanction laws or regulation, including, but not limited to, sanctions, laws and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control (OFAC).

Insurance policies providing certain health insurance coverage issued or renewed on or after September 23, 2010 are required to comply with all applicable requirements of the Patient Protection and Affordable Care Act (PPACA). However, there are a number of types of insurance that are specifically exempt from the requirements of the PPACA.

Based on our understanding of the current law and regulations, it is our belief that the accident and health benefits provided under this program are exempt from the requirements of the PPACA. Similarly, we do not believe that this accident and health coverage qualifies as minimum essential benefits as set forth in the PPACA. AXIS Insurance Company continues to monitor PPACA laws and regulations to determine any impact on its products. Should there be any change that requires modification of this coverage, we reserve the right to change the policy and rates accordingly.

**GENERAL EXCLUSIONS AND LIMITATIONS**

The benefits contained in the Policy are subject to the following limitations;

1. All Covered Injuries and Covered Illnesses arising from the same Covered Activity shall be treated as a single Covered Injury or Covered Illness. If the Insured Person sustained a Covered Injury and a Covered Illness from the same Covered Activity and the amount payable or benefit period for a specific benefit is different for Covered Injuries and Covered Illnesses, the Company will pay the higher amount or adhere to the longer benefit period.
  2. If an Insured Person suffers a Covered Injury or Covered Illness that is payable under more than one of the following benefits, the most the Company will pay is the greater of the largest principal sum or the largest single benefit amount payable shown on the *Policy Schedule of Benefits* for any benefit for which the Insured Person qualifies: Covered Injury Death Benefit; Covered Illness Death Benefit; HIV Positive Diagnosis Lump Sum Benefit; Dismemberment, Loss of Speech or Hearing Benefit; Vision Impairment Benefit; Permanent Physical Impairment Benefit or Paralysis Benefit.
  3. If an Insured Person is covered under more than one Policyholder Blanket Accident Policy issued by the Company, the total benefits payable will not exceed those payable under the policy that provides the greatest benefit.
- In addition to any benefit or coverage specific exclusion, benefits will not be paid for any loss which directly or indirectly, in whole or in part, is caused by or results from any of the following unless coverage is specifically provided in the Policy: declared or undeclared war or act of war; suicide or any attempt at it, while sane or insane; or intentionally self-inflicted injuries while sane; mental or emotional disorders, except as specifically provided for by the Traumatic Incident Benefit or the Mental Stress Management Benefit; any Organized League Athletic Event, except as provided under the Policy; or commission of a felony. In addition, benefits will not be paid for services or treatment rendered by any person who is: employed or retained by Policyholder, living in the Insured Person's household; an Immediate Family Member of either the Insured Person or the Insured Person's Spouse; or the Insured Person.

**EXCLUSIONS THAT APPLY TO THE INCOME PROTECTION BENEFITS**

In addition to the Exclusions provided under the Policy, no Income Protection Benefits shall be payable in the following instances, unless coverage is specifically provided: (1) during the Insured Person's incarceration in a penal or corrections institution. Payments may resume after incarceration as long as the Insured Person remains Totally Disabled and remains covered under the Policy; or (2) the Insured Person is not receiving Appropriate Care.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
***Benefits apply while performing a Covered Activity.***

***LIMITATIONS THAT APPLY TO THE INCOME PROTECTION BENEFITS***

1. Total Disability or Partial Disability claims resulting from athletic events that are not Organized League Athletic Events will be limited to a maximum period of up to 156 weeks.
2. In no event will benefits be payable to an Insured Person for more than one disability at the same time.
3. An Insured Person may reopen his or her claim at any time up to 5 years following a period of Total Disability or Partial Disability for either Covered Injuries or Covered Illnesses for which payments were made under this Policy.
4. If an Insured Person is covered by multiple Accident Policies issued by the Company, the total amount of Income Protection Benefits payable under all policies will be a weekly benefit amount up to a maximum of \$1,000.

***EXCLUSIONS FOR MEDICAL EXPENSE BENEFIT AND THE PLASTIC SURGERY EXPENSE BENEFIT-*** In addition to the Exclusions provided under the Policy, no Medical Expense Benefit or Plastic Surgery Expense Benefits shall be payable for the following treatments or services, unless coverage is specifically provided:

1. any elective or routine treatment, surgery, health treatment, or examination, including any service, treatment or supplies that: (a) are deemed by the Company to be experimental or investigational; and (b) are not recognized and generally accepted medical practice in the United States.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
*Benefits apply while performing a Covered Activity.*

**DESCRIPTION OF BENEFITS**

**Section I: Death Benefits**

- A. Covered Injury Death Benefit** - This benefit is payable if an Insured Person sustains a Covered Injury that directly causes the loss of life.
- B. Covered Illness Death Benefit** - This benefit is payable if an Insured Person suffers a Covered Illness that directly causes the loss of life.
- C. HIV Positive Diagnosis Lump Sum Benefit** - If Insured Person tests HIV Positive as a result of participation in a Covered Activity, the Insured Person may choose to receive the HIV Positive Diagnosis Lump Sum Benefit in lieu of the Permanent Physical Impairment Benefit and/or Covered Illness Death Benefit or Covered Injury Death Benefit.
- D. Bereavement Benefit** - If a Covered Injury Death Benefit or Covered Illness Death Benefit is payable under the Policy, an amount up to the Maximum Benefit Amount will be paid for out-of-pocket expenses actually incurred by the Policyholder or Participating Organization for the following expenses that are directly associated with an Insured Person's loss of life: 1) reasonable cost of bereavement counseling and 2) the reasonable costs associated with the memorial service, wake, honor guard, or other tribute to the Insured Person. This benefit is payable to the Policyholder or Participating Organization.
- E. Dependent Child Benefit** - If a Covered Injury or Covered Illness Death Benefit is payable under the Policy, an additional benefit is payable for each Dependent Child.
- F. Seatbelt Benefit** - If a Covered Injury Death Benefit is payable under the Policy and the Insured Person's death occurred in an Accident while he or she was wearing a properly fastened automobile seatbelt, the Seatbelt Benefit is payable.
- G. Airbag Benefit** - If the Seat Benefit is payable, the additional Airbag Benefit Amount will be paid if the Insured Person was also positioned in a seat protected by a properly-functioning and properly deployed Supplemental Restraint System (Airbag) when the Accident occurred.
- G. Final Expenses Benefit** - If a Covered Injury or Covered Illness Death Benefit is payable under the Policy, an additional benefit will be paid for out-of-pocket expenses actually incurred by the beneficiary for expenses directly associated with an Insured Person's loss of life.
- H. Spousal Benefit** - If a Covered Injury Death Benefit or Covered Illness Death Benefit is payable under the Policy, an additional benefit is payable to the Insured Person's Spouse.

**Section II: Impairment Benefits**

- A. Dismemberment, Loss of Speech or Hearing Benefit** - If an Insured Person sustains a Covered Injury that directly causes a loss of speech, hearing or a dismemberment as defined in the Policy, an amount equal to 6.25% up to 100% of the Principal Sum is payable, based on the level of loss or dismemberment.
- B. Vision Impairment Benefit** - If the Insured Person, as a result of a Covered Injury, suffers a vision impairment as defined in the Policy, an amount equal to 2.75% up to 100% of the Principal Sum is payable. Benefits are payable for partial loss of sight as well as total loss of sight.
- C. Cosmetic Disfigurement from Burns Benefit** - If an Insured Person, as a result of a Covered Injury, suffers a Cosmetic Disfigurement from Burn due to a burn that is classified as third degree or a full thickness burn, a benefit is payable. The amount of the benefit will be based on a formula, which will be multiplied by the Principal Sum. The formula will take into account the area of the body which was burned. This benefit will be paid in addition to any other benefit payable under the Policy, with the exception of a benefit paid under the Dismemberment, Loss of Speech or Hearing Benefit for the same burned area.
- D. Permanent Physical Impairment Benefit** - If an Insured Person suffers a Covered Injury or Covered Illness which results in a Permanent Physical Impairment of a body part, we will pay a PPI Benefit. The impairment percentage assigned by the Physician is multiplied by the Principal Sum to determine the benefit payable.
- E. Felonious Assault Benefit** - If an Insured Person is participating in a Covered Activity and sustains a Covered Injury caused by a Felonious Assault directed at the Insured Person, an additional benefit is payable.
- F. Impairment Modification Benefit** - This benefit may be payable if, due to Total or Partial Disability, an Insured Person's physical limitation or impairment poses a safety risk or inhibits the Insured Person's ability to maintain independence in their current transportation or living situation. The benefit may pay for alterations to make the Insured Person's residence wheelchair accessible and/or habitable, and modifications to his or her motor vehicle. Impairment modifications are subject to written agreement and other requirements outlined in the Policy.
- G. Paralysis Benefit** - If an Insured Person suffers Paralysis resulting from a Covered Injury or Covered Illness, the Company will pay a percentage of the Principal Sum based on the type of Paralysis, provided that the Paralysis occurs within 365 days.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
*Benefits apply while performing a Covered Activity.*

**Section III: Income Protection Benefits**

- A. Weekly Total Disability Benefits**  
**A.i. Covered Injury Minimum Weekly Total Disability Benefit** – For Volunteers, payable up to lifetime while the Insured Person is Totally Disabled. Paid in addition to any benefit from any source.  
**A.ii. Covered Illness Minimum Weekly Total Disability Benefit** – For Volunteers, payable up to later of age 67 or five years, whichever is greater while the Insured Person is Totally Disabled. Paid in addition to any benefit from any source.  
**A.iii. Covered Injury Weekly Earned Income Replacement Benefit** – For Volunteers, payable up to lifetime and up to the amount listed in the Policy while the Insured Person is Totally Disabled and the Minimum Weekly Total Disability Benefit is payable. The amount payable shall be computed by determining the Insured Person's Weekly Earned Income then subtracting the Minimum Weekly Total Disability Benefit and the Loss of Earnings Coverage as defined in the Policy.  
**A.iv. Covered Illness Weekly Earned Income Replacement Benefit** - For Volunteers, payable up to later of age 67 or five years, whichever is greater and up to the amount listed in the Policy while the Insured Person is Totally Disabled and the Minimum Weekly Total Disability Benefit is payable. The amount payable shall be computed by determining the Insured Person's Weekly Earned Income then subtracting the Minimum Weekly Total Disability Benefit and the Loss of Earnings Coverage as defined in the Policy.  
**B. Partial Disability Benefit** - If a Covered Injury or Covered Illness results in a Partial Disability and permits the Insured Person to return to any Reasonable Occupation but at a lower rate of Weekly Earned Income, a benefit is payable of up to the Maximum Weekly Total Disability Benefit which would have been paid had the Insured Person been Totally Disabled. For Volunteers, benefits are payable up to later of age 67 or five years.  
**C. Cost of Living Adjustments** - Adjustments are made at the greater of 5% or the CPI-U (up to 8%) on the Review Date of the Covered Injury or Covered Illness continuous disability. COLA adjustments are compounded after each Review Date not to exceed three times the Maximum Weekly Total Disability Benefit amount.  
**D. First Week Total Disability Benefit** - For the first week of Total Disability, a benefit of up to \$1,000 is payable. The amount payable shall be computed by determining the Insured Person's Weekly Earned Income then subtracting the Minimum Weekly Total Disability Benefit, the Weekly Earned Income Replacement Benefit and the Loss of Earnings Coverage.  
**E. Transition Benefit** – If an Insured Member is released to return to his or her primary employment after having received disability benefits under this Policy due to Covered Injury or Covered Illness, and their position at their primary employer has been terminated due to said Covered Injury or Covered Illness, disability benefits previously payable will continue to be paid for a period of up to 26 weeks while the Insured Person actively seeks employment.  
**F. Retraining Benefit** - If as a result of a Covered Injury or Covered Illness an Insured Person cannot find and maintain a Regular Occupation, the Company will pay for the Insured Person to enroll in an institution of higher learning, professional or trade training program as set forth in a written agreement between the Insured Person and us which can be periodically reviewed. The Company shall pay the actual costs incurred by the Insured Person for tuition, books and supplies charged by the institution up to the Maximum Benefit Amount provided in the Policy. Benefits for disability will continue as provided by the Policy while the Insured Person is actively participating in the program.
- Section IV: Medical Expense Benefits**  
**A. Medical Expense Benefit** - If, as a result of a Covered Injury or Covered Illness, an Insured Person incurs charges for Covered Medical Expenses as defined in the Policy, we will pay 100% of the Reasonable and Customary Charges up to the Maximum Medical Expense Benefit Amount provided. This Maximum is payable for all Covered Medical Expenses resulting from the same Covered Injury or Covered Illness.  
**B. Plastic Surgery Expense Benefit** - If an Insured Person incurs expenses that exceed the Maximum Medical Expense Benefit Amount provided under the Medical Expense Benefit, an additional amount from Covered Medical Expenses incurred for Medically Necessary plastic surgery due to a Covered Injury will be paid.



**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
**Benefits apply while performing a Covered Activity.**

**Section V: Additional Benefits**

- A. Daily Hospital Confinement and Outpatient Treatment Benefit** - If, due to a Covered Injury or Covered Illness, an Insured Person:  
• is admitted to a Hospital on an Inpatient basis, a Daily Benefit Amount is payable for each full day of Inpatient Hospital confinement, not to exceed 730 days;  
• If after a period of being confined as an Inpatient in a Hospital, an Insured Person requires Outpatient physical therapy, rehabilitation and/or follow-up Physician visits, we will pay the Daily Benefit Amount for each day of such Outpatient treatment, not exceed 730 days; or  
• If an Insured Person does not require confinement as an Inpatient in a Hospital, but does require Outpatient physical therapy, rehabilitation and/or follow-up Physician visits, we will pay the Daily Benefit Amount for each day of such Outpatient treatment, not to exceed 365 days.  
For Outpatient treatment, only one payment per day will be made, regardless of the number of appointments the Insured Person attends.
- B. Daily Critical Care Benefit** - If, due to a Covered Injury or Covered Illness, an Insured Person is Hospital confined to an intensive care, trauma, critical care, burn or similar specialty unit, a Daily Benefit Amount is payable for each full day of such confinement, not to exceed 730 days. This payment is in lieu of the Daily Hospital Confinement Benefit.
- C. Family Expense Benefit** - If, as a result of a Covered Injury or Covered Illness, an Insured Person requires medical treatment that causes an Immediate Family Member or a significant other to accompany the Insured Person for treatment or to help treat the Insured Person, a benefit is payable for reasonable expenses actually incurred and not reimbursed by another source up to the Family Expense Benefit limit. Expenses may include, but are not limited to; loss of wages, out of pocket expenses, hotel accommodations, parking, and childcare.
- D. Occupational Rehabilitation Benefit** - If an Insured Person is receiving Weekly Total Disability Benefits or Partial Disability Benefits, he or she may be eligible for a rehabilitation program. The Company will pay up to the Maximum Benefit Amount for the program as set forth in a written agreement. The goal of the rehabilitation program will be to return an Insured Person to the workforce in a Reasonable Occupation for which he or she is reasonably suited considering the Covered Injury or Covered Illness sustained.
- E. Mental Stress Management Benefit** - If, as a direct result of being actively engaged in a single emergency incident or repeated active engagement in emergency incidents involving the organization, an Insured Person suffers psychiatric or mental stress, a Mental Stress Management Benefit is payable. The Insured Person must be receiving care by a Physician properly licensed to provide care appropriate for the condition causing the psychiatric or mental stress.
- F. Traumatic Incident Benefit** - A benefit is payable for reasonable expenses for the services provided by a Traumatic Incident Stress Management Team, if such services are requested and authorized by the organization as a result of a Traumatic Incident. Expenses must be incurred within one year of the Traumatic Incident and are subject to the Traumatic Incident Benefit limit in the policy. The Traumatic Incident Aggregate Maximum Benefit Amount is the maximum that will be paid per Traumatic Incident regardless of the number of persons treated.
- G. Health Insurance Premiums Benefit** - If, disability benefits are paid under the Policy, and as a result of a Covered Injury or Covered Illness, the medical or health insurance premiums previously paid the Insured Person's employer have been discontinued, the Company shall pay the amount the employer previously paid for those premiums. The benefit is payable if the Insured Person incurs out of pocket costs for said premiums.
- H. Surviving Spouse Education Benefit** - If an Insured Person suffers a Covered Injury Death or Covered Illness Death, a benefit is payable for the surviving Spouse to enroll in an institution of higher learning, professional or trade training program as set forth in a written agreement between the Spouse and the Company which can be periodically reviewed. The Company shall pay the actual costs incurred by the Insured Person for tuition, books and supplies charged by the institution up to the Maximum Benefit Amount provided in the Policy.
- I. Dependent Child Education Benefit** - If an Insured Person suffers a Covered Injury Death or Covered Illness Death and a death benefit is payable under this Policy, a benefit is payable for expenses incurred by each Dependent Child for tuition, fees, books, room and board, transportation and any other costs payable directly to a school, or approved and certified by the school, up to the Maximum Benefit Amount provided in the Policy.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
***Benefits apply while performing a Covered Activity.***

**DEFINITIONS**

**Accident or Accidental** means a sudden, unexpected, specific and abrupt event that occurs by chance at an identifiable time and place while the Insured Person is covered under this Policy.

**Appropriate Care** means the determination of an accurate and medically supported diagnosis of the Insured Person's Total or Partial Disability by a Physician, or a plan established by a Physician of ongoing medical treatment and care of the Total or Partial Disability that conforms to generally accepted medical standards, including frequency of treatment and care.

**Auxiliary Member** means any person who is a member of the auxiliary to the Policyholder at the time of Covered Injury or Covered Illness.

**Benefit Period** means the period, shown on the *Policy Schedule of Benefits*, commencing with the date of the onset of the Total Disability or Partial Disability during which benefits are payable.

**Career Personnel** means employees or members of the organization that receive Weekly Earned Income for regularly working at least 30 cumulative hours per week as an emergency service provider for the Policyholder.

**Community Volunteer** means a non-member who helps the Policyholder and/or the auxiliary of the organization, in a non-emergency capacity such as fund raisers, banquets, etc.

**Cosmetic Disfigurement from Burns** means a cosmetic disfigurement that is due to a burn that is classified as a third degree or full-thickness burn caused by a source that is thermal, chemical, electrical, or nuclear. The surface area must be documented by a Physician according to the Rule of Nines or the Lund-Browder chart.

**Covered Activity** means any activity which is normal for an Insured Person while acting on behalf of the Policyholder and includes travel directly to and from such activity, as well as impromptu action (Good Samaritan) at the scene of an emergency regardless of the Policyholder's involvement. Covered Activity includes all athletic events sponsored by the Policyholder with the exception of Organized League Athletic Events, unless such coverage is purchased. The Covered Activity must be performed at the direction, or with knowledge, of an officer of the Policyholder, unless immediate action is required of the Insured Person at the scene of an emergency not on behalf of the Policyholder or any other organization.

**Covered Illness** means any disease, sickness or infection, other than those related to psychiatric illness or mental stress, contracted or suffered by an Insured Person during or resulting from a Covered Activity while this Policy is in force.

**Covered Illness Death** means any Covered Illness, other than those related to psychiatric illness or mental stress, contracted or suffered by an Insured Person during or resulting from a Covered Activity while this Policy is in force and results in the death of an Insured Person.

**Covered Injury** means Accidental bodily injury sustained by the Insured Person during and/or resulting directly from an Insured Person's participation in a Covered Activity while coverage under the Policy is in force (independent of sickness, disease, mental incapacity or any other cause) and which is not otherwise defined as a Covered Illness.

**Covered Injury Death** means a Covered Injury sustained by an Insured Person during and/or resulting directly from a Covered Activity while this Policy is in force, and which results in the death of an Insured Person.

**Covered Medical Expenses** means the Reasonable and Customary Charges for any of the following services: medical or surgical treatment, preventative inoculation, Hospital confinement, Home Healthcare, nursing services prescribed and monitored by a Physician, Post exposure Prophylaxis protocol (PEP) treatment, when such treatment is advised by the attending Physician, Infectious Disease screening test (s), or Post exposure preventative inoculations as a result of participation in a Covered Activity.

**CPI-U** means the Consumer Price Index for all Urban Consumers, published by the United States Department of Labor. The Company reserves the right to use some other similar measurement if the Department of Labor changes or stops publishing the CPI-U.

**Dependent Child** means any unmarried child of an Insured Person who is dependent and under the age of 26 upon an Insured Person and claimed on an Insured Person's most current federal tax return or qualified court document showing at least 50% financial responsibility.

**Emergency Volunteer** means a person physically present at the time of the emergency, and who is not responding/acting as a member of any emergency service organization, who has been specifically requested to assist by the Chief, Line Officer or other officer in charge of the emergency.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
**Benefits apply while performing a Covered Activity.**

**Felony Assault** means any willful or unlawful use of force upon an Insured Person:

1. with the intent to cause bodily injury to an Insured Person;
2. that results in bodily harm to an Insured Person; and
3. that is a felony or misdemeanor in the jurisdiction in which it occurs.

**Felony Assault** does not include any willful or unlawful use of force upon an Insured Person by another Insured Person.  
**HIV** means Human Immunodeficiency Virus, a virus that infects lymphocytes and other cells bearing the CD4 marker, the initial infection of which is known as acute retro viral syndrome.

**Home Healthcare** means Medically Necessary services provided and billed by the Home Health Agency. Such services must be prescribed and supervised by a Physician in accordance with a medical treatment.

**Home Health Agency** means an entity engaged in arranging and providing nursing services, home health services or other therapeutic and related services. The entity and must be certified by a competent governmental authority in the jurisdiction where the services are rendered, as meeting requirement of Title XVIII of the Social Security Act, as amended, for home health agencies.

**Hospital** means an institution that meets all of the following:

1. it is licensed as a Hospital pursuant to applicable law;
2. it is primarily and continuously engaged in providing medical care and treatment to sick and injured persons;
3. it is managed under the supervision of a staff of medical doctors;
4. it provides 24-hour nursing services by or under the supervision of a graduate registered nurse (R.N.);
5. it has medical, diagnostic and treatment facilities, with major surgical facilities on its premises, or available on a prearranged basis; and
6. it charges for its services.

The term Hospital does not include a clinic, facility, or unit of a Hospital for:

1. rehabilitation, convalescent, custodial, educational or nursing care;
2. the aged, drug addicts or alcoholics; or
3. a Veteran's Administration Hospital or Federal Government Hospital unless the Insured Person incurs an expense.

**Infectious Disease** means a disease included within the list of potentially life-threatening infectious diseases, developed by the Secretary of Health and Human Services, pursuant to Title XXVI of the Public Health Service Act.

**Immediate Family Member** means a person who is related to the Insured Person in any of the following ways: Spouse, parent (includes stepparent), brother or sister (includes stepbrother or stepsister), child (includes legally adopted or stepchild), grandparent, grandchild, brother-in-law, sister-in-law, daughter-in-law, son-in-law, mother-in-law, or father-in-law.

**Inpatient** means confined overnight as a registered bed-patient in a Hospital or other medical facility where at least one day's room and board is charged. The confinement must be on the advice of a Physician.

**Insured Person** means any person who is listed as an Eligible Person on the *Policy Schedule of Benefits*.

**Loss of Earnings Coverage** means any disability benefits or salary continuance received from:

1. the benefits payable in accordance with any Workers' Compensation Act or Occupational Disease Act or Law, or any other law which provides compensation for an occupational injury;
  2. the income benefit provided by or through any automobile insurance plan or any government plan of automobile insurance or similar insurance regulation or law;
  3. the salary continuation or severance allowance provided by or through the employer;
  4. the disability, retirement or other income benefits provided by or through the employer, the Policyholder, or the Insured Person; and
  5. the amounts paid or payable under any group plan or insurance policy.
- Loss of Earnings Coverage** does not include disability benefits received from individual disability insurance paid by Insured Person, or any disability benefits payable under the United States Federal Social Security Act. If an Insured Person settles a Workers' Compensation claim, including Loss of Earnings or similar provisions of Workers' Compensation, the presumed amount of those Workers' Compensation benefits shall be considered Loss Earnings Coverage for the entire duration of the Insured Person's Total Disability or Partial Disability.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
**Benefits apply while performing a Covered Activity.**

**Medically Necessary** means medical services that: (1) are essential for diagnosis, treatment or care of the Covered Injury or Covered Illness for which it is prescribed or performed; (2) meet generally accepted standards of medical practice; and (3) are ordered by a Physician and performed under his or her care, supervision or order. **Nurse** means a licensed graduate registered Nurse (R.N.) or a licensed practical Nurse (L.P.N.) who is not:

1. the Insured Person;
2. an Immediate Family Member of either the Insured Person or the Insured Person's Spouse;
3. a person living in the Insured Person's household; or
4. a person employed or retained by the Policyholder.

**Named Insured** means any organization listed as a Participating Organization on the *Policy Schedule of Benefits*.

**Organized League Athletic Event** means any type of sporting event or activity that occurs during a pre-planned schedule of practices, games, matches and/or tournaments over a specific season and may include the usage of a team roster, designated uniforms, umpires/referees, or fees paid to participate.

**Organized League Athletic Covered Activity** means preparation for, participation in, and travel to and from, an Organized League Athletic Event sponsored or approved by the Policyholder.

**Other Valid and Collectible Insurance** means: (1) any group plan, program or insurance policy; (2) any other group hospital, surgical or medical benefit plan; or (3) any union welfare plan or group employer or employee benefit program. Other valid and collectible insurance will not include benefits provided by the United States Social Security Act or any individual disability insurance plan.

**Outpatient** means an Insured Person who is a patient and is not hospitalized overnight but who visits a Hospital, clinic, or associated facility for diagnosis or treatment. **Partial Disability or Partially Disabled** means, for an Insured Person with an occupation producing wages as described in the definition of Weekly Earned Income, the inability to perform one or more, but not all, of the material and substantial duties of his or her own occupation as a result of a Covered Injury or Covered Illness. If an Insured Person does not have an occupation producing wages as described in the definition of Weekly Earned Income, Partial Disability or Partially Disabled means:

1. the inability to perform one or more, but not all of the material and substantial duties of an occupation for which an Insured Person is qualified by reason of education, training or experience; or
2. the inability to perform one or more, but not all of the regular activities of an Insured Person.

**An Insured Person** must be under the regular care of a Physician during Partial Disability.

**Permanent Physical Impairment** means a physical impairment or functional abnormality of a body part or parts or loss of at least 10% whole person which remains after maximum medical rehabilitation has been achieved and which is considered stable or non-progressive by the examining Physician at the time of evaluation.

**Physician** means a licensed health care provider practicing within the scope of his or her license and rendering care and treatment to the Insured Person that is appropriate for the condition and locality, and who is not:

1. the Insured Person;
2. an Immediate Family Member of either the Insured Person or the Insured Person's spouse;
3. a person living in the Insured Person's household;
4. a person employed or retained by the Policyholder; or
5. a person providing homeopathic, aroma-therapeutic, or herbal therapeutic services.

**Policy Term** means the time period defined for the Policyholder shown on the *Policy Schedule of Benefits*.

**Reasonable and Customary Charge(s)** means a charge that:

1. is made for a Covered Medical Expense;
  2. does not exceed the usual level of charges for similar treatment, services or supplies in the locality where the expense is incurred (for a Hospital room and board charge, other than for a Medically Necessary stay in an intensive care unit or a cardiac care unit, does not exceed the Hospital's most common charge for semi-private room and board); and
  3. does not include charges that would not have been made if no insurance existed.
- Reasonable Occupation** means any occupation for which an Insured Person is reasonably fitted based on education, training or experience and an Insured Person could expect to generate the lesser of \$75,000 annually or at least 70% of his or her Weekly Earned Income.

**Plans of Insurance for the Hendricks County Sheriff's Reserve Division**  
*Benefits apply while performing a Covered Activity.*

**Regular Occupation** means the Insured Person's primary occupation at the time of disability for which he or she was receiving remuneration.  
**Review Date** means the date after 52 weeks of continuous disability.

**Spouse** means the Insured Person's lawful spouse.

**Total Disability or Totally Disabled** means that for the first 5 years from the date of a Covered Injury or onset of a Covered Illness, an Insured Person:

1. is not able to perform the substantial and material duties of his or her occupation; and
2. is receiving Appropriate Care.

After 5 years from the date of a Covered Injury or onset of a Covered Illness, Total Disability or Totally Disabled means that due to a Covered Injury or a Covered Illness an Insured Person:

1. is not able to engage in any Reasonable Occupation;
2. is not working at any other occupation; and
3. is receiving Appropriate Care.

**Traumatic Incident** means an abnormal experience involving the Policyholder, outside the range of usual human experiences and that includes: 1) line of duty death or serious injury to other Insured Persons; 2) a single incident having multiple casualties; 3) death or serious injury of a child; 4) dealing with victims known to the Insured Person, and 5) similar incidents that would reasonably require mental health care for the entire Policyholder or a significant number of members of the Policyholder.

**Traumatic Incident Stress Management Team** means an organized group of mental health professionals and peer support individuals trained to provide support services to emergency service organization personnel. Such support services include traumatic incident stress defusing, debriefing, demobilization, stress reduction education, spousal support, one-on-one interviews, or on-the-scene support.

**Weekly Earned Income** means the greater of an Insured Person's:

1. average income earned on a weekly basis at the time the disability starts; or
2. average income earned on a weekly basis for the period of one year prior to the start of disability for which a claim is made.

If an employer, other than himself, employs an Insured Person, Weekly Earned Income will be computed from an Insured Person's regular, over-time and shift differential wages. Weekly Earned Income shall be substantiated by pay stubs, W-2 Forms, other employment records, tax records, and/or other records which may reasonably request. Commission earnings will be computed using an average of 24 months of previous commission earnings.

If an Insured Person is self-employed, Weekly Earned Income will be computed from the amount reported by an Insured Person on page 1 of the IRS Form 1040 series, which includes amounts from Schedules C and F, and from qualifying income from Schedule E which is included in the amount reported by an Insured Person on page 1 of IRS Form 1040 series.

If the Insured Person is a commissioned sales person, Weekly Earned Income will be any salary or wages and commissions received from the Employer. This will be based on the Statement of Wages Earned and Taxes Withheld (Form W-2) for the fiscal year ending immediately prior to the date of the Insured Person's disability.

Weekly Earned Income does not include rent, royalties, investment income, passive income, estate and trust income and REIT/REMIC income regardless of an Insured Person's active involvement in generating said forms of income, an Employer's contributions to any deferred compensation plan or pension plan on the Insured Person's behalf, stock options, or any other income not derived directly from an Insured Person's occupational activities.

**EMERGENCY APPROPRIATION RESOLUTION**

Whereas, certain extraordinary emergencies have developed since the adoption of the existing budget, so that it is necessary to appropriate more money than was appropriated in the annual budget; therefore, to meet such extraordinary emergencies;

Be it resolved by the County Council of Hendricks County, Indiana, that for the expense of said County the following additional sums of money are hereby appropriated and ordered set apart out of the several funds as herein and for the purpose herein specified, subject to the laws governing the same.

ADDITIONAL APPROPRIATIONS					
	ACCOUNT #	DESCRIPTION	REQUESTED	APPROVED	
1	Food & Beverage	1157.42910.000.0137	Jail Video Updates	\$349,140.00	
2	EDIT	1112.41000.000.0143	Land Purchases	\$3,500,000.00	
3	MVH	1176.36605.000.0201	Community Crossings Match	\$670,000.00	
4	MVH	1176.31900.002.0201	Contract Services	\$48,840.00	
5	Local Road & Bridge Match	9124.36605.000.0143	Community Crossings & Match	\$1,340,000.00	
6	Prosecutor	8895.19999.000.0108	IV-D	\$15,000.00	
7	Drug Free Community	1148.16401.000.0164	Personal Services	\$16,200.00	
8	Drug Free Community	1148.34406.000.0164	Education Programs/Grants	\$85,940.00	
9	Drug Task Force	4010.10854.000.0108	Personal Services	\$20,500.00	
10	Drug Task Force	4010.10857.000.0108	Personal Services	\$18,000.00	
11	Drug Task Force	4010.10858.000.0108	Personal Services	\$18,000.00	
12	Drug Task Force	4010.10859.000.0108	Personal Services	\$18,000.00	
13	Drug Task Force	4010.10860.000.0108	Personal Services	\$18,000.00	
14	Drug Task Force	4010.10866.000.0108	Personal Services	\$5,000.00	
15	Drug Task Force	4010.10898.000.0108	Personal Services	\$18,000.00	
16	Drug Task Force	4010.10899.000.0108	Personal Services	\$15,450.00	
17	Immunization Grant	8130.18623.000.0214	Personal Services	\$9,856.00	
18	Immunization Grant	8130.18631.000.0214	Personal Services	\$16,526.00	
19	Immunization Grant	8130.18632.000.0214	Personal Services	\$12,209.00	
20	Immunization Grant	8130.13590.000.0214	Personal Services	\$2,953.00	
21	Immunization Grant	8130.13593.000.0214	Personal Services	\$99.00	
22	Immunization Grant	8130.13594.000.0214	Personal Services	\$110.00	
23	Immunization Grant	8130.33000.000.0214	Other Services & Charges	\$114.00	
24	Immunization Grant	8130.31900.000.0214	Other Services & Charges	\$6,978.00	
REDUCTIONS					
1	Park Inkkeepers	4806.15601.000.0156	Personal services	(\$8,081.00)	
2	Park Inkkeepers	4806.15607.000.0156	Personal Services	(\$11,430.00)	

Adopted this 2nd day of January, 2018 by the following vote:

AYE

NAY

Caleb M. Brown	Caleb M. Brown
Larry R. Hesson	Larry R. Hesson
Jay R. Puckett	Jay R. Puckett
Michael C. Rogers	Michael C. Rogers

Eric Wathen

Brad Whicker

David Wyeth

Attest:

Nancy Marsh, Auditor

Eric Wathen

Brad Whicker

David Wyeth



REQUEST FOR EMERGENCY APPROPRIATION

Date: 12/15/17

#1

Amount: \$ 349,140

Fund Name: Food & Beverage  
(Example - County General)

Account Name: Jail Video Improvements  
(Example - Supplies)

Account Number:	1157	42910	000	0137
Example -	Fund # 100	Account # 20100	Object # 000	Location # 102

Explanation of Request:

Jail Video Improvements approved by Board of Commissioners.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ I will be attending the Council meeting.  
\_\_\_\_\_ I will not be attending the Council meeting.

Auditor's Notes: \_\_\_\_\_ Authorized Signature

REQUEST FOR EMERGENCY APPROPRIATION

#2 Date: 12/15/17

Amount: \$ 3,500,000

Fund Name: Edit  
(Example - County General)

Account Name: Land Purchases  
(Example - Supplies)

Account Number:	1112	41000	000	0143
Example -	Fund #	Account #	Object #	Location #
	100	20100	000	102

Explanation of Request:

Additional funds for Ronald Reagan Pkwy Right-Of-Way

\_\_\_\_\_

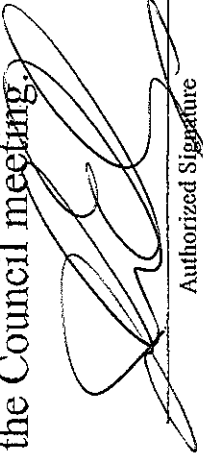
\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

< I will be attending the Council meeting.  
\_\_\_\_\_ I will not be attending the Council meeting.

  
Authorized Signature

Auditor's Notes:

REQUEST FOR EMERGENCY APPROPRIATION

#3

Date: 12/15/17

Amount: \$ 670,000

Fund Name: Motor Vehicle Highway

(Example - County General)

Account Name: \_\_\_\_\_

(Example - Supplies)

Account Number: 1176 .361005 .000 0201

Example -

Fund #	Account #	Object #	Location #
100	20100	000	102

Explanation of Request:

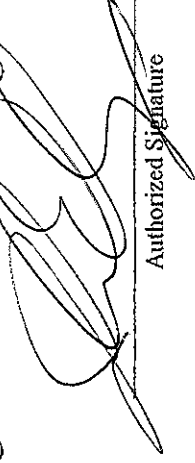
Additional funds for the Community Crossing Grant

County Portion to  
Match \$670,000  
Community Crossing Grant

☒ I will be attending the Council meeting.

☐ I will not be attending the Council meeting.

Auditor's Notes:

  
Authorized Signature

REQUEST FOR EMERGENCY APPROPRIATION

#4

Date: 12/11/18

Amount: \$ 48,840

Fund Name: MVH (1176)

(Example - County General)

Account Name: Contract Services

(Example - Supplies)

Account Number: 1176 31900 002 201

Example -	Fund #	Account #	Object #	Location #
	100	20100	000	102

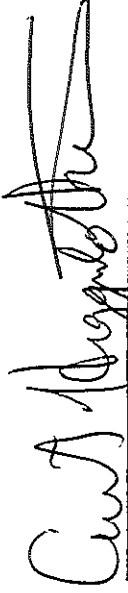
Explanation of Request:

Ridgehill way

I will be attending the Council meeting.

I will not be attending the Council meeting.

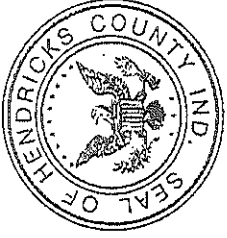
Auditor's Notes:

  
Authorized Signature

# Hendricks County Surveyor's Office

## PROJECT INVOICE

355 South Washington Street, Suite 214  
Danville, IN 46122  
Phone (317) 745-9237 Fax 317-745-9429



DATE: December 11, 2017  
INVOICE 20171517

Drainage 701 PRESTWICK  
Board REGULATED  
Project DRAIN

**BILL TO:**  
Curt Higginbotham, Superintendent  
Hendricks County Highway Department

930 E. Main Street  
Danville, IN 46122

**TOTAL DUE \$ 48,840.00**

DESCRIPTION	HOURS	RATE	AMOUNT
Phase 2 Asphalt demo and haul away from site to get to existing pipe. Patch asphalt where pipe work is done. Reinstall concrete curb where tore out around inlets. Remove Existing pipe and replace with new proposed pipe.			32,500.00
<b>Change order approved by all parties</b>			
Phase 2 form and Pour Manholes to connect pipes to allow inlet installation.			16,340.00
See attached for additional details.			
<b>Please make claim out to pay Prestwick Regulated Drain 701</b>			
Account number: 0701.99999.000.106			
TOTAL DUE			\$ 48,840.00

**Make all checks payable to Hendricks County Surveyor's Office**

Payable upon receipt. Overdue accounts subject to a service charge

**Please return a copy of this invoice with payment**

REQUEST FOR EMERGENCY APPROPRIATION

#5

Date: 12/15/17

Amount: \$ 1,340,000

Fund Name: Local Road and Bridge Match

(Example - County General)

Account Name: Community Crossing

(Example - Supplies)

Account Number: 9124 36605 000 0143

Example -

Fund #	Account #	Object #	Location #
100	20100	000	102

Explanation of Request:

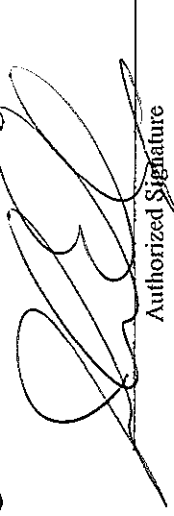
Additional funds for the Community Crossing Grant total cost

Grant portion 670,000  
County portion 1000  
MVH 1176, 36605, 000, 0201

☒ I will be attending the Council meeting.

☐ I will not be attending the Council meeting.

Auditor's Notes:

  
Authorized Signature

REQUEST FOR EMERGENCY APPROPRIATION

\*4

Date: 12/26/17

Amount: \$ 15,000

Fund Name: IV-D General

(Example - County General)

Account Name: Personal Services

(Example - Supplies)

Account Number: 8895 19999 000 0108

Example -

Fund #	Account #	Object #	Location #
100	20100	000	102

Explanation of Request:

Shortage in Prosecutor's IV-D Fund 8897. Requesting funding of personal services line items. IV-D Appropriations do not require advertisement.

I will be attending the Council meeting.

I will not be attending the Council meeting.

Auditor's Notes:

Authorized Signature

*mm*



# BUDGET FORM #1 FUND: DRUG FREE COMMUNITY LOCATION: SUBSTANCE ABUSE TASK FORCE

Acct Desc	Fund	Acct	Obj	Loc	2017 Budget	2017 Adjustments	2017 Total Budget	2018 Requested	Notes:
								Budget	
Director	1148	16401	000	164	0	16,200	16,200	16,200	# 7
SMART Program Oversight	1148	16403	000	164	0	0	0	0	
Office Supplies	1148	20100	000	164	0	500	500	0	
Education Programs/Grants	1148	34406	000	164	0	97,198	97,198	<del>77,240</del> 85,940	# 8
Printing & Advertising	1148	34500	000	164	0	1,000	1,000	0	
Miscellaneous	1148	39900	000	164	0	500	500	0	
					0	115,398	114,898	93,440	

ELECTED OFFICIAL/DEPT HEAD SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Auditor's Note:

The Substance Abuse Board is only allowed to approve a budget that equals end of year cash balance. State must then approve before any disbursements are made from Education/Grants. Appropriations revert to zero at year end. Estimated 12/31/17 balance as of 12/13 is \$93,439.99.

PATRICIA ANN BALDWIN  
Prosecuting Attorney

HENDRICKS COUNTY PROSECUTOR  
6 SOUTH JEFFERSON ST.  
DANVILLE, IN 46122



JAMES E. BRYAN  
Chief Deputy

Telephone: (317) 745-9283  
Fax: (317) 745-9290

12/21/2018

County Council  
Jan 2<sup>nd</sup>, 2018 Meeting

RE: CHANGE TO FUNDING FOR PERSONAL SERVICES

To Whom It May Concern,

The United Drug Task Force requests that the funding for Personal Services be changed from 4923 to 4010.

4010 Brownsburg 50/50 Equitable Sharing will now cover the expenses for Personal Services:

10854 – UDTF Coordinator OT Supp	\$ 20,500	-	# 9
10857 – Officer OT	\$ 18,000	-	# 10
10858 – Officer OT	\$ 18,000	-	# 11
10859 – Officer OT	\$ 18,000	-	# 12
10860 – Officer OT	\$ 18,000	-	# 13
10866 – UDTF Prosecutor OT Supp	\$ 5,000	-	# 14
10898 – Extra Help OT	\$ 18,000	-	# 15
10899 – Prosecutor's OT	\$ 15,450	-	# 16

Respectfully,

Patricia Ann Baldwin, Prosecutor  
UDTF Board Director

Investigator  
Stephen M. Carroll

Victim Assistance Coordinator  
Tamatha Hasty

BUDGET ESTIMATE FOR

## Hendricks

0214 Health

#17-22


[illegible]

		Items	Total Estimate	Approved
3 OTHER SERVICES AND CHARGES Professional Services				
			0.00	
	Communication and Transportation			
	33000 Mileage/Travel	114.00		
			114.00	
	Printing and Advertising			
			0.00	
	Insurance			
			0.00	
	Utility Services			
			0.00	
Repairs and Maintenance				
			0.00	
			0.00	
Rentals				
			0.00	
Debt Service				
			0.00	
Other Services and Charges 31800 Contract Services		6,978.00		
Total Other Services and Charges			6,978.00	
			7,092.00	

4 CAPITAL OUTLAYS	Items	Total Estimate	Approved
Land			
Buildings		0.00	
		0.00	
Improvements Other Than Building			
		0.00	
Machinery and Equipment			
		0.00	
Other Capital Outlays			
		0.00	
Total Capital Outlays		0.00	
		0.00	
		48,845.00	0.00
TOTAL BUDGET ESTIMATE			0.00

Health Department Immunization Grant Fund

for the calendar year 2018 for the purposes therein specified.

2017.  Hendricks County Health Officer

**Signature and Title of Officer(s) or Department Head**

# REALLOCATION OF FUNDS RESOLUTION

Be it resolved by the County Council of Hendricks County, Indiana, that for the expenses of the unit of Government of Hendricks County, the following sums of money previously appropriated for expenditures from a detailed account within a major classification, are hereby reallocated to another detailed account within a different classification as originally appropriated, all as hereinafter specified.

		TRANSFERS			AMOUNT	Y/N
DEPARTMENT	FROM		TO			
Community Corrections						
1 Project Income	4909.15402.000.0154		4909.15499.000.0154		\$17,000.00	
2 Park	1001.15600.000.0156		1001.15601.000.0156		\$14,321.00	
3 Park	1001.15600.000.0156		1001.15607.000.0156		\$14,843.00	

Adopted this 2nd day of January 2018.

YEA

NAY

Caleb M. Brown	Caleb M. Brown
Larry R. Hesson	Larry R. Hesson
Jay R. Puckett	Jay R. Puckett
Mike Rogers	Mike Rogers
Eric Wathen	Eric Wathen
Bradley Whicker	Bradley Whicker
David Wyeth	David Wyeth

Attest:

Nancy Marsh, Auditor

January

# REQUEST FOR TRANSFER OF FUNDS

(Transfer must be within the same fund and department)

DATE: 12/20/17

FROM: 4909 15402 000 154 CASE MANAGER  
Full Account Number Account Description

TO: 4909 15499 000 154 WORK RELEASE OT  
Full Account Number Account Description

AMOUNT: \$ 17,000

Example - 100,20100,000,102 Office Supplies  
Fund # Account # Object # Location # Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

Budget Classifications:  
10000 Personal Services  
20000 Supplies  
30000 Other Services & Charges  
40000 Capital Outlays

Explanation of Request:

Amount needed to fund OT/Holiday for second half of grant year.

I will be attending the Council meeting.

☒ I will not be attending the Council meeting.

Auditor's Notes:

Bridgette MCH  
Authorized Signature

# EOY Adjustments

Fund	Acct	Obj	Loc	^ Fund Desc	Acct Desc	Amount
<input type="checkbox"/> Effective Date : 12/07/2017(30 Items, 0.00)						
<input type="checkbox"/> Bundle : EOY CORR(30 Items, 0.00)						
1001	10209	000	0102	County General	Property Tax Deputy OSS4	(200.00)
1001	10204	000	0102	County General	Settlement Deputy OSS2	200.00
4605	34802	000	0102	Bank Loan - E911	Principal	(492.00)
4605	34803	000	0102	Bank Loan - E911	Interest	492.00
2501	10829	000	0108	Pretrial Divisions	PT Investigator's Ass't PAT3	(724.00)
2501	10868	000	0108	Pretrial Divisions	Part Time Deputy Prosecutor	724.00
2501	10826	000	0108	Pretrial Divisions	Court Reporters	(849.00)
2501	10828	000	0108	Pretrial Divisions	File Clerks PT OSS4	849.00
1001	20100	000	0131	County General	Office Supplies	(1,500.00)
1001	30910	000	0131	County General	GIS Addressing Upgrade	1,500.00
1001	13699	000	0136	County General	Custodial Overtime	(3.00)
1001	13605	000	0136	County General	Custodian LTC5	3.00
1001	20407	000	0137	County General	Tools	(1.00)
1001	20213	000	0137	County General	Meals	1.00
1001	14399	000	0143	County General	Engineer's Overtime	(2.00)
1001	14304	000	0143	County General	GIS Administrator PAT2	2.00
1222	42602	000	0149	Statewide 911	Comm Center Capital Projects	(1.00)
1222	37900	000	0149	Statewide 911	Equipment Lease or Rental	1.00
4922	19404	000	0151	Home Detention Fees	Probation Officer PAT3	(210.00)
4922	15199	000	0151	Home Detention Fees	Sup Probation Overtime	210.00
4922	19404	000	0151	Home Detention Fees	Probation Officer PAT3	(205.00)
4922	15102	000	0151	Home Detention Fees	Probation Officer PAT3	205.00
4909	15402	000	0154	Comm Corrections Proj Income	Case Manager PAT3	(1,108.00)
4909	15499	000	0154	Comm Corrections Proj Income	Custody Holiday & OT	1,108.00
1176	18512	002	0201	Motor Vehicle Highway	Heavy Equipment Operator LTC2	1.00
1176	18513	002	0201	Motor Vehicle Highway	Heavy Equipment Operator LTC2	1.00
1176	18598	002	0201	Motor Vehicle Highway	Highway Overtime	(2.00)
8130	18623	017	0214	93.268 Immunization R	PH Nurse Part-Time PAT3	(50.00)



<b>Fund</b>	<b>Acct</b>	<b>Obj</b>	<b>Loc</b>	<b>▲ Fund Desc</b>	<b>Acct Desc</b>	<b>Amount</b>
8130	13590	017	0214	93.268 Immunization R	FICA & Medicare	40.00
8130	13593	017	0214	93.268 Immunization R	Unemployment Insurance	10.00
						<b>0.00</b>
						<b>0.00</b>
						<b>0.00</b>

STATUS OF FUNDS REPORT

Hendricks County

Date of Publication:

Republican:

Hendricks County Flyer

December 21, 2017

Date of Public Hearing

January 2, 2018

Budget Submitted to DLGF/NOT APPROVED  
2018 Property Tax Rate If applicable

December 20, 2017

Date of Resolution

January 2, 2018

COUNTY FUND NUMBER DLGF FUND NUMBER	1001 0101	1112 2411	1135 0790	1138 2391	1157 9501	1158 0905	1159 0301	1169 0705	1176 0702	1186 0061	1188 0124	4701	4702
FUND NAME:	General	EDIT Project	Cume Bridge	CCD	Food & Beverage	Drain Improvement	Health	Local Road & Street	Highway	Rainy Day	Reassessment	Insurance Claims	Insurance Rainy Day
APPROPRIATION REQUEST:													
AMOUNT BY REDUCTION:													
AMOUNT BY SURPLUS:													
1. Property Tax Levy (Line 16) on (1782)	16,500,000	-	2,577,081	2,860,560	-	600,000	1,208,000	-	-	-	666,765	-	-
2. Circuit Breaker Impact (Estimate)	1,711,926		643,031	352,767		30,721	139,836				61,443		
3. PTRC from CAGIT (Line 13)			-	-		-	-				-		
4. Misc. Revenue Estimate (line 8B)	19,111,622	6,114,120	381,800	214,960	3,000,000	59,200	380,881	1,468,676	6,719,889		32,100		
5. January 1 Cash Balance	10,298,080	15,257,475	14,702,267	3,277,300	5,920,685	726,576	783,413	1,302,521	4,269,626	10,407,154	349,858		2,962,108
including investments													
6. Total Funds Available (1-2+3+4+5)	44,197,776	21,371,595	17,018,117	6,000,053	8,920,685	1,355,055	2,232,458	2,771,197	10,989,515	10,407,154	987,280		2,962,108
7. Original Budget	36,121,507	3,262,619	6,641,979	3,307,217	795,000	530,721	1,485,969	1,271,800	5,868,111	500,000	666,114		
8. Encumbered Appropriations	186,405	1,398,117	3,991,814	800,967	222,113	194,782		45,297	-	-	-		-
9. Total Beginning Appropriations (7+8)	36,307,912	4,660,736	10,633,793	4,108,184	1,017,113	725,503	1,485,969	1,317,097	5,888,111	500,000	666,114		-
10. Surplus Funds (6-9)	7,889,864	16,710,859	6,384,324	1,891,869	7,903,572	629,552	746,489	1,454,100	5,121,404	9,907,154	321,166		2,962,108
11. Amount Appropriated Since January 1st less any reductions in appropriations													
12. Amount Transferred to Rainy Day	-	-	-	-	-	-	-	-	-	-	-	-	-
13. Surplus Funds Remaining (10-11)	7,889,864	16,710,859	6,384,324	1,891,869	7,903,572	629,552	746,489	1,454,100	5,121,404	9,907,154	321,166		2,962,108
BALANCE AS OF 12.29.17	10,298,080	15,257,475	14,702,267	3,277,300	5,920,685	726,576	783,413	1,302,521	4,269,626	10,407,154	349,858		2,962,108
Established minimum balance	5,000,000	5,000,000		750,000	2,000,000				700,000	10,000,000	50,000		3,500,000
4/27/15 SUSTAINABILITY PROJECTION OF JAN 1, 2016	4,385,523	2,459,296	16,138,816	10,058,471	4,035,974	3,415,659	1,595,136	452,116	1,231,355	3,097,257	9,978,141	337,876	0
SUMMARY OF FUNDS	1/1/2018	2/1/2018	3/1/2018	4/1/2018	5/1/2018	6/1/2018	7/1/2018	8/1/2018	9/1/2018	10/1/2018	11/1/2018	12/1/2018	AVG
Surplus (equals unappropriated)	61,922,461												
Actual Cash Balance	70,257,063												
Prior Year Cash Balance	72,074,756	63,292,273	60,610,315	58,183,830	57,251,899	62,416,919	66,822,516	65,833,466	65,072,976	67,755,882	65,905,191	60,681,821	63,825,154

Food & Beverage Revenue:

2018:

2017: Jan \$203,146 Feb \$261,561 Mar 175,477; April 380,484; May \$180,645 June \$458,488; July 88,534; Aug \$153,436; Sept \$144,074; Oct \$130,082; Nov \$164,730; Dec \$140,066

2016: Jan \$93,095 Feb \$135,667 Mar \$261,654 Apr \$381,776 May \$300,047 Jun \$326,983 Jul \$195,711 Aug \$92,358 Sept \$175,319 Oct \$110,179 Nov \$139,374 Dec \$134,577

2015: Jan \$155,033 Feb \$120,101 Mar \$206,350 April \$206,882 May \$214,299 Jun \$248,657 Jul \$196,629 Aug \$147,030 Sept \$135,037 Oct \$200,637 Nov \$124,321 Dec \$123,010