July 2012
Top Ten Contract Tips
MH/DS Redesign
Knowledge.

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ISAC’s Mission:
To promote effective and responsible county government for the people of Iowa.

ISAC’s Vision:
To be the principal, authoritative source of representation, information and services for and about county government in Iowa.
Sticking with last month’s “top ten” trend, this month I thought I’d share ten tips for contract drafting, negotiation and review. As with last month, these are simply ten tips that came to my mind when thinking of the various contracts I’ve drafted, negotiated or reviewed. There can certainly be more to consider than these ten things, or all ten tips may not apply in every situation – you definitely need to look at the particular facts related to your contract. I hope you find them helpful the next time you are entering into an arrangement with another party.

1. Attorney review
I’m sure you all are tired of me telling you to talk to your county attorney, but it’s true – especially when it comes to contracts! It’s really important to have an attorney review a contract, so that they can help make sure the contract language accurately reflects your understanding of the arrangement and that there isn’t language which unfairly favors the other party (or unfairly disfavors you). The earlier you get your attorney involved in the process, the more they can do to help you. At a minimum, make sure you have them review the contract before you sign – once it’s signed there isn’t much they can do if changes need to be made. Also, be sure to have a conversation with your attorney about your understanding of the arrangement, otherwise, they can’t point out inconsistencies between the contract language and your understanding of the deal.

2. Get the whole deal in writing
My advice is always to err on the side of choosing a written contract in any situation. While there are ways to prove and enforce an oral contract in court, it’s much more complicated and difficult than if you have it in writing. Contracts do not necessarily need to be extremely lengthy, formal or cluttered with legal terminology, but you do need to get the basic terms of the agreement in there. While I certainly understand the value of a person’s word and a handshake, you never know when things might go wrong (see #3), and a written contract will help ensure you get that to which you are entitled. Also, when you are working on a project, you often have conversations with the other party about various details – make sure they all wind up in the written contract. Never sign a contract missing a term that you discussed, but didn’t make it into the written language of the contract. This is because most contracts will contain a provision that says the written terms are the entire agreement between the parties – meaning you won’t be able to enforce anything that was only talked about.

3. Think about what could go wrong
An attorney I used to work for would always describe contract drafting and negotiation something like this: People are in the honeymoon stage when they sign a contract, but the contract needs to be written like they are in the middle of a nasty divorce. Honestly, when you have a good relationship with the other party to a contract, and everything goes as planned, you may not ever look at or need your contract. The contract is for when things go wrong and not as planned. So when you are putting the contract together, you need to think of all the worst case scenarios. It’s much easier to sort out the best way to resolve those worst case scenarios when everyone is in the honeymoon stage than when you are in the midst of a heated disagreement. The best contracts contain a resolution to that heated disagreement; contracts that are silent on the problem are not as helpful.

4. Retention
A contract only does you any good if you can find it to refer to when needed. Make sure to carefully store the original (or a copy is usually sufficient) in the final form that is dated and signed by all parties.

5. Indemnification considerations
This one is county government specific. There are questions as to whether governmental entities can indemnify other parties, meaning to compensate another party for their loss or damage. Indemnification provisions are fairly typical in contracts. A possible work around is to use language which allows indemnification “to the extent permitted by law,” but this is certainly an issue you will want to address with your attorney.

6. Understand the boilerplate language
Boilerplate language are provisions that you see in almost every contract. Examples include the “entire agreement” provision discussed above, choice of law provisions, assignment provisions, etc. Every contract doesn’t need every boilerplate provision in it, and there may be specific facts that cause a need to modify or exclude certain boilerplate provisions. Your attorney should be able to help you understand these provisions and then the two of you can determine their appropriateness for the particular contract at hand.

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Mental Health and Disability Services Redesign

The dust has finally settled, and it is time to try to determine what the impact of SF 2315, the Mental Health and Disability Services (MH/DS) Redesign bill, will be on counties and the individuals receiving services funded by the counties. The bill sets out to accomplish four major changes: to transform the management structures from county-based to regions; to revise the basis for funding from legal settlement to residency; to establish core services available statewide; and to establish a per capita mental health levy rate for FY 2014 and beyond.

Regional Criteria and Timeline
The legislation allows a county to apply for an exemption from joining a region if the county can show that managing alone is cost effective and can produce outcomes that are equal to a regional management structure. The Department of Human Services (DHS) and the MH/DS Commission will establish the standards for exemption by rule, and DHS has the role of approving or disapproving the applications for exemption.

The criteria for regions are that the regions must: consist of a minimum of three contiguous counties; have the capacity to provide core services and administrative functions; have a Community Mental Health Center or Federal Qualified Health Clinic located within the region or the region must contract with qualified providers to provide these services; and have a psychiatric unit within the region or close to the region.

The legislation outlines the timeframes for the formation of regions. Counties need to submit a letter of intent to form a region during the period between June 2012 and April 1, 2013. Letters of intent to apply for an exemption are due by May 1, 2013, with the application for exemption due by June 30, 2013. All counties are expected to either join a region or be exempted by December 31, 2013. Regional service system management plans are due annually by April 1, with the first one due in 2014. Regions are to be in compliance with all implementation criteria by June 30, 2014 and operational on July 1, 2014.

The legislation includes a Transition Committee that will consult with DHS on the transition from the current MH/DS system to a regional service system. Membership on this committee includes two central point of coordination (CPC) administrators and two supervisors. The legislation specifies that one CPC and one supervisor should be from a more populous county and one CPC and one supervisor should be from a more rural county.

Funding
It was clear throughout session that the legislature would shift the state funding that has gone to the counties (property tax relief, allowed growth, community services, utility replacement tax, Risk Pool balance) along with additional funding of $40 million to Iowa Medicaid Enterprise to buy out Medicaid services. The reinstatement of the current county levy capacity was not quite as clear, although there is no system, whether county or regional, without the $125 million in county property tax dollars. It was equally clear that the property tax levy is not enough to fund all of the non-Medicaid services for which the counties in 2013 and the regions in 2014 and beyond will be responsible.

In order to address this funding gap, the legislation creates a MH/DS Redesign Transition Fund, with applications due to DHS by October 15, 2012. After weeks of discussion about having one-time funds of $10 million to $20 million, the legislature kicked the can down the road until next session. DHS is expected to review the applications for additional funding for FY 2013 and the legislature will ponder this request for supplemental funding when they reconvene in January 2013. The legislature continues to view this gap in funding as a one-time expense even though there have been no adjustments made to the mandates that must be funded beyond Medicaid. In order to assist those counties that do not have funding when the fiscal year begins, the legislation allows them to transfer funds from other accounts to address cash flow issues, but this must be repaid by the end of the fiscal year.

Per Capita Property Tax Levy
SF 2315 outlines a replacement for the current property tax levy to be instituted for FY 2014. This proposal sets a per capita target of $47.28 per person for each county. Those counties that are currently above the target would have to reduce their property tax revenues for MH/DS services to the $47.28 level. This would reduce the amount of property taxes in the system by approximately $10 million. The plan would be for the counties that are below the target to receive an equalization payment from the state. The plan is designed so that no property taxes would be increased in order to reach the standard per capita property tax level. The legislation requests a legislative interim committee to analyze the viability of levy equalization proposed by the redesign legislation.

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capitol comments

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A major concern represented by this per capita levy proposal is that it will take substantial state resources to backfill those counties that are below the target. The estimate for bringing those counties that are below the target up to the target is $29 million. Given the track record of the legislature to fund MH/DS it is difficult to see any new funding for the regions after the increases in Medicaid and the backfill in property taxes are funded. The new services and new populations promised by redesign may not be funded for many years to come.

legal briefs

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7. Never be afraid to ask for a change
You probably often receive “form” contracts from vendors or other parties. From a vendor standpoint, sticking to the form is important. It is easier for the company to perform, manage and enforce their many contracts on the same subject if the terms are identical. But you never know until you ask, and I always try to consider the form as a jumping off point. Try to limit your changes as much as is reasonable, but if there is something important that’s needed to reflect or clarify your arrangement, then just be prepared to justify and explain your requested change.

8. Review all the documents
This is just a reminder that if a contract cross-references another document or contains exhibits, make sure you have reviewed them as well.

9. Compliance education
If you and your attorney drafted, negotiated and reviewed the contract, but it’s actually a deputy or other staff person that will be handling the project to which the contract relates, make sure that person understands the contract. This will help them comply with what the county has agreed to and hold the other party to their obligations as well. Good compliance education will mean problems or potential breaches get noticed and addressed more quickly.

10. Changes and enforcement should also be in writing
No matter how hard you and your attorney work to make sure all possible scenarios are reflected in the contract, things can change or something wholly unexpected can arise. If so, it may be easier to make a small change to the contract through an amendment, rather than re-signing a whole new contract. Just make sure such amendments are in writing, signed and stored in the same manner as the original contract. If a situation arises where you feel the other party is not living up to their commitments, make sure you notify them of that in writing. Contracts will often require breach notices to be in writing, but even if that’s not the case, written notice formally establishes your enforcement actions.

Save these Important Dates!

Wednesday, August 29 (8:30 am)
Fall School Registration Opens

Friday, October 12 (4:30 pm)
Affiliate Agendas and Conference Program Information Due

Friday, November 2 (4:30 pm)
Fall School Housing Bureau Deadline

Tuesday, November 13 (4:30 pm)
Fall School Pre-Registration Deadline
Social Stories are used to assist teaching social skills to children with autism and other related disabilities. Social stories provide information about situations that the individual may find difficult or confusing. The upcoming situation or social event is described in detail and focus is given to the important social cues, the events and reactions the individual might expect to occur in the situation, and the actions and reactions that might be expected of them, and why. The goal of the story is to increase the individual’s understanding of the situation or event, to assist them with being more comfortable, and to possibly suggest some appropriate responses for the situation/event in question.

Social Stories attempt to give individuals some perspective on the thoughts, emotions, and behaviors of others. They also help the individual better predict the actions and assumptions of others. Social Stories present information on social situations in a structured and consistent manner for individuals with autism, especially when dealing with skills and behaviors that are so fluid as those involved in social interactions. Social Stories also give individuals direct contact with social information, contact through pictures and text as opposed to speech or observation, notable areas of weakness for individuals with autism. Finally, Social Stories give the individual a chance to practice the skills often and on their terms.

The notion that persons with autism may lack a “theory of mind” has circulated among those who study social impairments in individuals with autism. This deficit is understood to be a lack of understanding that others have their own thoughts, feelings, plans, and points of view. Individuals with autism will/may have difficulty understanding the expectations of others and an inability to predict what others will say or do in social situations. This “theory of mind” phenomenon appears to be unique to those with autism and largely independent of intelligence. Regardless of where an individual may fall within the spectrum of autism-like disorders they seem to exhibit this deficit; however, it appears to be slightly less prevalent in those with Asperger’s syndrome.

Once you have determined the areas you wish to focus the Social Story on, the writing of the Social Story can begin. The Social Story is usually written in the first-person format. It is used to provide the individual with as much information about a social situation as possible, so they are better prepared to face, and act appropriately in whatever situation or event they will be participating.

There are four types of sentences used to present this information in a Social Story:

- Descriptive sentences objectively address the “wh” questions: where the situation takes place, who is involved, what they are doing, and why they may be doing it.
- Perspective sentences give a peek into the minds of those involved in the story; they provide details about the emotions and thoughts of others.
- Directive sentences suggest desired responses tailored to the individual.
- Control sentences are authored by the student himself as something of a mnemonic device — a sentence to help him remember the story or deal with the situation. These are not used in every story and are typically used only with fairly high functioning children.

Carol Gray, the developer of Social Stories, recommends that a ratio of at least three to five descriptive or perspective sentences for every directive sentence be used for each story. As the individual becomes more successful with Social Stories, those stories can eventually be written with no directive sentences at all, leaving it up to the child to determine an appropriate and successful response (which is of course, the eventual goal of any social skills intervention). Remember, Social Stories are not scripts detailing appropriate behaviors; rather, they are descriptions of social situations which set the stage for the individual to design successful, positive interactions. Along that line, you should avoid the use of absolute, inflexible sentences in your stories. Replace phrases like “I can” and “I will” with “I will try” or “I will work on” in directive sentences. “Usually” and “sometimes” should be used instead of “always” in perspective and descriptive sentences. When writing your stories, ensure that you are writing with the individual in mind: use an appropriate vocabulary and an appropriate type size. Try to make each story resemble as closely as possible the other literature the person may be encountering at home and/or in school. If you are working with a kindergartner this may mean a single idea on each page, with an accompanying illustration. A middle school student might require a much longer story, maybe resembling a newspaper or magazine article: multiple columns, small type size, etc.

The following websites may be helpful when writing Social Stories for individuals with Autism:
1. kidsandream webs com/page12.htm — this website gives numerous examples of social stories with pictures
Backups provide a way to guard our data from deletion, corruption, natural disasters, etc. Backups have two main purposes: 1) to recover data after a data-loss event and/or, 2) to recover data from a specific point in time. According to www.protect-data.com, 44% of data is lost due to Hardware or System Malfunctions, 32% due to Human Error, 14% due to Software Corruption, 7% due to Computer Viruses, and 3% due to Natural Disasters. Developing and implementing a backup system tailored specifically to your personal needs or the needs of your organization is critical.

Data repository models are the foundation of all backups. Scheduling some combination of the following backup types to run at different times may be used to create your backups. Full backups contain a complete image of all the system data at a specific point in time. This type of backup requires a large amount of space and is slow to backup, but allows for a fast recovery. Differential backups include all data modified since the last full backup. While the backup time and storage is moderate, the recovery time is fast. Incremental backups account for any new or modified files or folders since the last full, differential, or incremental backup. With a smaller amount of data to capture, the backup time is fast, takes only a small amount of storage space, and has a moderate recovery time.

Now that we have identified the different backup types, we must choose the storage media most suitable for saving our data. The types of backup storage media include: magnetic tapes, external hard drives, flash drives, and remote backup services, to name the most common. As before when selecting the backup type, you may choose a combination of storage media. Storing data in multiple locations will increase the safety of your data in the event it is lost. A company called Mozy (mozy.com) is an example of one company that provides users with an online backup service. This backup can be utilized in conjunction with an on-site backup of data (such as to an external hard drive) that could then be stored at an off-site location for added protection.

Scheduling of backups is also critical, and the process of creating backups may be manual or automatic. Jobs can be set up to create backups at specified times or manual backups can be transferred to a tape drive at the end of each workday. An example of a complete backup might include the following: 1) a full backup of data is automatically captured on the first Sunday of the month, 2) the next three Sundays a differential backup runs automatically, 3) every three hours an incremental backup automatically runs. The data captured in these backups is uploaded to Mozy for storage as well as saved to an external hard drive on-site. Each week, the on-site hard drive is rotated with a second hard drive stored off-site. In this scenario, data is stored at three locations: onsite hard drive, offsite hard drive, and online.

Taking the time to devise, test, and implement a backup plan is invaluable, and can save much heartache later. With this insurance in place, you can feel confident about handling the accidents life (at least as far as data protection) throws at you, regardless of their permutations.
GPS Navigation Systems

By: Tammy Norman
ISAC Office Manager

Q: Do you have any suggestions for GPS navigation systems?

A: GPS navigation systems are becoming extremely popular and soon may make hard copy maps and atlases obsolete. Many people find that the new vehicle they purchased has a built-in GPS system and if you have a smartphone or an iPhone, you probably are already using these devices to obtain turn-by-turn navigational instructions. However, if you are someone that is not yet using this technology, here is a simple overview of GPS navigation systems. GPS, or global positioning system, navigation systems are satellite based and the receiver that you place in your automobile will need an unobstructed view so that it can receive a strong signal thru its antenna, so place it on the windshield of your vehicle. GPS is a great resource when you are traveling in unfamiliar areas, so if you have decided to purchase a portable navigation device there are a few items you will want to look for:

Maps: Most GPS navigation systems will come pre-loaded with maps for all the states, except Alaska and Hawaii. If you wish to take your GPS with you when you travel outside of the lower 48, you will want to ensure that the system you purchase has the capability to add maps.

Features: A point of interest database containing airports, hospitals, dining, shopping and service stations that will enable you to locate them quickly and easily is a great feature to have on your GPS system. You may also want to opt for a device that allows for automatic rerouting when you are forced to take a wrong turn due to detours or human error. The more expensive models offer real-time traffic and weather alerts but may require a subscription fee.

Accessories: Most navigation systems come ready to use; however, there are some accessories that you may wish to purchase depending on where you are traveling. If you live or travel in heavily wooded areas you may wish to purchase an auxiliary antenna that can be mounted to your windshield base. A removable dashboard mount makes it easy to take your GPS system with you when you change out vehicles. You also may wish to add more memory so that you can download additional maps and data.

Finally, there are several companies out there that provide excellent portable GPS navigation systems. GPS systems can be purchased for as little as $100. The Garmin Nuvi 1350T has received excellent reviews and is around $110 on Amazon. The VIA 1605TM is an superb GPS system for those who prefer the TomTom models but with a higher price tag of around $230.

Website Note: If you have a question regarding new technology and would like it addressed in this column, please contact me at 515.244.7181 or tnorman@iowacounties.org. Until next month, keep clicking!
Wellness Incentives - ISAC’s Strategy

The ISAC Wellness Program, available to counties who participate in the ISAC Group Health Program, works to encourage healthy behavior changes among county employees. One way to accomplish this goal is to provide incentives to encourage employees to get started on the path to healthy living. Incentives can really be anything that would motivate people to make changes but intuitively, and through years of trial and error, we have learned that nothing motivates like the bottom line.

ISAC’s incentive strategy is two-fold. Not only are employees able to receive cash incentives, in the form of a Visa gift card, if certain requirements are met, but counties in the program are also eligible to earn a 2% to 5% premium rate reduction based on how many of their employees complete the individual requirements to receive the incentive. Each year, the requirements and incentive progress to a different level of engagement.

Our first attempt at using a cash incentive to encourage employees was in 2011 and being a “pilot year” we learned a lot through the process. In 2011, to address the low usage of preventive annual physicals among our members, any employee who was covered under the ISAC Health Plan would receive a $250 Visa gift card if they completed an annual physical with their physician and filled out an online health assessment. Both requirements gave the member a better understanding of their current health status and a place to start to improve unhealthy behaviors.

For 2012, we opened up the incentive to include certain preventive exams as well as annual physicals and this year, spouses covered on a family plan are eligible to earn the incentive as well. The insured employee can earn $50 to complete a preventive exam and the insured spouse can earn an additional $50 for completing a preventive exam.

Also for 2012, taking the information individuals learned about their health from the physical and assessment, additional incentives were added to turn that knowledge into action. Employees who participate in an action-based wellness program offered by their county wellness committee can earn an additional $25 per program, for up to two programs.

But a reasonable question to ask about incentive use is, “Why are these incentives worth the investment?” Our final numbers for 2011, show preventive annual physical usage jumped from below 30% of insured members when we started the program to 82% receiving an annual physical. From an insurance perspective, this is important because people who never see a doctor can very quickly move from a no cost member to a member in the highest cost category; mainly due to the fact that they may have a condition they are unaware of and by the time it is discovered may be in late stage or chronic condition status. Finding and addressing health issues early helps to keep members out of the highest cost category.

But perhaps more importantly, are the stories I hear about how certain individuals who went in and completed their physical found cancers and other conditions early, while still treatable. Still others have mentioned how the wellness program has encouraged them to lose weight, sometimes significant amounts, to live a healthier life. I only know of a handful of these stories because individuals have relayed them to me, but there may be more out there of which I am not even aware.

ISAC uses incentives to provide that extra motivation to get healthy, and we saw great results from our pilot program last year. We anticipate similar results in 2012. If you have questions about the ISAC Wellness Program, please contact me at jkunstle@iowacounties.org.
Welcome Madeline

Hello! My name is Madeline Schmitt, and I am the Information Technology Intern for this summer. I started on June 4 and will be here until early August. This will be my first position working in IT. I am looking forward to working with everyone and learning new skills that will help me in my classes next semester, and when I start a job after graduation.

I am originally from Cedar Rapids, Iowa. For the summer, I am living with my sister, brother-in-law and their three girls. It is always fun to spend time with them and the girls are always entertaining. This fall I will be a senior at the University of Iowa studying management information systems. In addition to school, I am also a part of Dance Marathon. I hold the business chair position where I help the business executive oversee committee members, fundraising, and dancer inquiries.

When I’m not in school I enjoy reading, spending time with family and friends, running, going to Iowa football games, and being outside.

I am thrilled to be a part of the ISAC team and look forward to getting to know everyone during these next couple of months!

About the Cover

The cover photo was taken in March 2007 from a ferry as it departed “The Rock” in San Francisco Bay. The photographer, ISAC Program Support Analyst, Ashley Moore, was visiting San Francisco for the first time during a college spring break trip. Although their stop in San Francisco was brief, Ashley and her boyfriend Kyle (now husband) visited all of the top attractions, including Alcatraz Island.

The island has a long history; in 1846 a lighthouse first occupied the island, in 1850 the island was purchased for military purposes, it became a federal prison in 1934, it was occupied by a group of American Indians protesting in the 1970’s, and since 1986 the island has been designated a National Historic Landmark. Of these, Alcatraz might be most remembered for becoming a federal prison in August 1934. The prison remained opened for 29 years, closing on March 21, 1963. Although several inmates attempted to escape the island, there is no proof that any of the attempts were successful. Alcatraz was home to many of America’s most dangerous criminals, including Al Capone and George “Machine Gun” Kelly.

This photograph depicts a stark contrast of captivity and freedom that transcends a strong message that the choices you make can be life changing; choose wisely, live fully.

I’m always looking for interesting photos for the cover of the magazine and interesting feature stories, please contact me at rbicego@iowacounties.org.
This year’s Western Interstate Region (WIR) annual conference, which always hosts a meeting of the NACo Board of Directors, was held in Santa Fe, New Mexico from May 16 to May 18. Presiding was WIR President Ron Walter, a commissioner from Chelan County, Washington.

I’ve been to a few of these rodeos now, so I was looking for a familiar pattern, and I wasn’t disappointed. The federal government wields more clout in western states than in the east, a situation that leads to county headaches that are peculiar to the region and that color the discourse at these meetings.

The U.S. government owns more than half of the land in several western states, and it doesn’t pay property tax. Furthermore, the exploitation of the area’s vast natural resources is subject to federal environmental regulations, which have a critical effect on local economies. So the old gag “I’m from the government and I’m here to help” doesn’t get much of a laugh out there. Still, good manners require that conferences like this invite Washington officials to brag about and/or justify current administration policies. The temperature of the reception for such officials usually runs from lukewarm to icy.

This year’s sacrificial lamb was Marcilynn Burke, the Acting Assistant Secretary for Land and Minerals Management from the U.S. Department of Interior. The audience listened politely for awhile, but as she started hitting hot buttons the volume of private conversations in the room steadily rose. She didn’t get a warm reaction when she expressed the importance of sage grouse conservation, and when she touted the administration’s accomplishments in supporting solar, wind and geothermal energy, I heard a nearby exclamation that “It’s a waste of money!” When she said that President Obama wants more oil and gas production, I heard, “Then why is he against the pipeline?!”

Something like a referendum was held during the Q&A at the end of her speech. Ms. Burke had trotted out numbers to show how the administration has allowed a large number of leases for the extraction of oil shale, and one of the attendees objected that the numbers were misleading because the areas leased have been limited to non-productive sizes. “The numbers make it look like the administration supports extraction but it doesn’t,” the speaker concluded, and the audience heartily applauded. Ms. Burke responded that the administration allows leases where viable, and said, “We also want to be responsible.” This elicited a smattering of applause, but as an experienced election administrator, I’d say that the applause for more robust oil shale extraction won with a majority of 66.7%. (I was going to say “by a 2-1 margin,” but 66.7% sounds more impressive, and it means the same thing.)

The group was much more receptive the next day to U.S. Representative Ken Ivory of Utah, who is the driving force behind a movement called “Are We Not A State.” Representative Ivory thinks the western states are entitled to all that federally-controlled land. He says the government promised all new states that it would transfer title to these lands to the states, but while it did so with all the states east of Colorado, the western states didn’t get this consideration, so now these states are “precariously reliant on the federal government, which is committing financial suicide.” (I did a small amount of research, and while I don’t claim to be the expert that Representative Ivory is, it looks like he’s drawing some rather broad inferences from Article IV of the U.S. Constitution, the 1894 enabling act conferring statehood on Utah, and the U.S. Supreme Court’s 2009 ruling in Hawaii v. Office of Hawaiian Affairs.)

If Representative Ivory were to run against Acting Assistant Secretary Burke for Most Popular WIR Conference Speaker, I believe he would win with 66.7% of the vote. However, both would have lost to Dr. Lowell Catlett, an economist from New Mexico State University who spoke at the opening session. He should have spoken after Representative Ivory, because he seemed to be able to convince most of us that we aren’t committing financial suicide. He mixed complex ideas with comical antics and soon had us eating out of his hand. He explained to our satisfaction that health care quality is going to go up and prices are going to come down, that college students are going to start graduating in two years, and that 3-D computerized assembly technology will allow you to fabricate and assemble, for example, your own tractor. I hope that ISAC hires him as a speaker sometime so you can see if we were just gullible saps.

The NACo Board of Directors had its formal meeting, but this was preceded by a NACo Board Forum, as has been the practice in recent years. The board forums are opportunities to have a less-structured conversation on issues of interest to the directors. At this forum, a few topics were dispensed with quickly, and then a good deal of attention was focused on the question, “Does NACo Lean Left or Right?” This issue usually arises when we have the annual Legislative Conference in Washington D.C., and invite politicians to speak to us. A

Continues on page 14.
Develop a Social Media Policy that's Right for your County

This is part 2 of a two-part series on developing a social media policy. Part 1 of the series ran in the May magazine.

Many counties across the country have implemented guidelines and policies to manage their social media presence. This is critical today because millions of Americans are using social media tools in their everyday lives, and one of the pillars of effective county government is effective communication with the communities it serves.

Development of social media guidelines and policies were discussed in detail during a members-only webinar titled “Developing a Social Media Policy That’s Right for Your County.” It was presented by NACo and the National Association of County Information Officers (NACIO).

As described in part 1 of this article, a good social media policy should establish guidelines for creating a county social media site; managing and using the site, and archiving information in compliance with public records laws and other legal considerations. Part 2 focuses on the legal issues counties should consider and highlights specific examples of how counties, small, medium and large, are managing their social media presence through their policies and guidelines.

The best way to get started is to form a policy and guidelines writing committee which should include representatives of several county departments. In larger counties, the committee could include officials from county manager’s office, public affairs, public works, public safety, information technology, human resources and the county attorney’s office. In smaller counties, one or two board members, the county attorney, county department heads with public communications responsibilities and the public information office, if the county has one, should be included.

The county attorney or counsel is a key player in this process. NACo’s Director of Research Jacqueline Byers, an attorney herself, said when drafting a social media policy, counties must work closely with the county attorney’s office to be certain that it addresses all of the necessary legal issues.

“Among these are First Amendment issues relating to government restrictions on speech — especially when editing or deleting information that has been posted on the government’s website, the use of public resources issues, employee use of social media — both on behalf of the agency and personally, and other employment-related social media issues,” Byers said. “Your state’s Open Meeting Law issues, public records retention and disclosure issues, and equal access Section 508 disability access issues must also be given major consideration in any written policy.”

During the webinar, panelist Glenn Levy, associate counsel for San Mateo County, Calif., offered similar advice. He said confidentiality (HIPAA, privacy, consent) and copyright – intellectual property issues are important too. Levy said published Terms of Use provisions for each particular social media platform are important to consider as well. The county attorney should review the Terms of Use as established by Facebook, Twitter and other social media sites before they are used as an official county communication.

“The key challenge when using social media, we found from a legal perspective, is that the law is not fully developed,” Levy said. “There’s a lot of guess work involved based on past usage. Plus, social media evolves quickly so the issues are a constant moving target.”

Levy said it’s critical that counties fully consider all these legal issues before implementing any policy or guidelines and to inform county departments what steps they need to take before they post or Tweet on official county social media platforms. These steps should include review of general department principles and development of a work plan.

In Fairfax County, Va., the public affairs department developed social media account set-up questionnaires for county agencies and departments to complete to ensure that they have considered important aspects of social media use.

“We created a Twitter-use form and a Facebook-use form and a general social media questionnaire,” said webinar presenter Greg Licamele, the county’s director of communications, integration and engagement. “Why do you want to use these tools? What is the purpose?”

Levy said even when your county’s policy and guideline are in place, the work is not complete.

“Contact county counsel with any and all questions that come up both during and after setting up social media use,” Levy said. “Follow the adopted policies and be uniform in their enforcement. There’s a lot that’s unclear and changing so be flexible and stay tuned.”

Continues on next page.
The number of members have complained that we have more liberal than conservative speakers. NACo staff explained that key leaders in both parties are always asked to address the conference, but lately the Democrats have been more willing to speak than the Republicans. In fact, a spokesman for Speaker of the House John Boehner sent us a nasty response about how all we do is come to D.C. with our hand out, so why should they bother trying to talk fiscal restraint to us.

Many people spoke to the topic, and one surprising tidbit concerned last year’s election for NACo Second Vice President. You may recall that some of us were filled with consternation that NACo was giving candidate John Sandoval of Colorado the same treatment as our own Linda Langston, even though Linda was the only candidate to meet the deadline for candidacy. It turns out that some of the Colorado delegation thought that NACo had pressured Sandoval to withdraw because of his conservative beliefs. Go figure.

In the end there seemed to be consensus that anyone frustrated with NACo’s legislative priorities should become more active in the steering committee process, and leadership agreed that it should publish a list of all officials that are invited to speak at our conferences and their responses.

I hope to see Iowans of all political persuasions at the NACo Annual Conference, July 13-17 in Pittsburgh, Pennsylvania.

### NACo news - WIR conference

Continued from page 12.

But what about smaller, rural counties? Do they need social media policies? Yes, they do. Wythe County, population 30,000 located in Southwestern Virginia, has a simple one-page policy. It is essentially the following:

Board of Supervisors and the county administrator shall approve what social media outlets may be suitable for use by the county and its departments.

The county administrator will review department requests to use social media sites and may delegate this review function to the public information officer.

Employees representing the county government via social media outlets must conduct themselves at all times as representatives of Wythe County. Employees that fail to conduct themselves in an appropriate manner shall be subject to the disciplinary procedures outlined in the Wythe County Employee Personnel Policy.

The Public Information Office will monitor content on each of the Department’s social media sites to ensure adherence to the Social Media Policy for appropriate use, message and branding consistent with the goals of Wythe County.

NACo is assembling links to county social media policies and guidelines. Currently available for review at www.naco.org/mediatools are policies from: Fairfax County, Virginia; San Mateo, California; Orange County, California; Wythe County, Virginia; Cuyahoga County, Ohio; Nevada County, California; Douglas County, Kansas; Carver County, Minnesota; Arlington County, Virginia; and Clark County, Nevada. If your county has an effective policy, please share it with NACo by contacting Jim Philipps at 202.942.4220 or jphilipps@naco.org.
NRS Website Gets Overhauled

Plan sponsors of and participants in deferred compensation plans provided by Nationwide Retirement Solutions will soon begin seeing big changes. For more than a year, Nationwide has been rebuilding www.nrsforu.com to deliver a faster, easier web experience.

According to Eric Stevenson, vice president of sales for Nationwide Retirement Solutions, the site’s improved design reduces clutter, eliminates long text blocks, and improves usability. “We want our website to make it easy for participants to more quickly find what they’re looking for and understand more readily what they’re looking at.”

Stevenson says Nationwide’s user-experience team recruited independent users and participants and watched them interact with the solutions being built.

“What we found was that users tend to ignore big blocks of text. They scan headlines, topics and links for key words or phrases. When that doesn’t work, they give up and return to the Search box. It’s time-consuming and can be frustrating.”

Stevenson adds that each page was reworked to make it much more user-friendly.

Learning Center Greatly Improved

There’s a lot to the online Learning Center that’s new. It features more content that’s better written and organized. What isn’t new has been improved. The idea, Stevenson says, is to help public employees understand retirement planning, investing for the long term and the basics of deferred compensation plan participation.

Nationwide has developed a new “mindsets” collection to replace the current age-range selector for information. “These mindsets allow public employees to self-select the kind of participant they are, based on investor profile and comfort with retirement preparation. It’s an easier and more accurate way to get retirement planning ideas for a user’s individual situation.”

“We want to help participants feel more confident about making informed decisions,” he says.

Stevenson adds that getting help is easier and more encouraged. The site offers plenty of new contact prompts that suggest how a user can talk to a specialist.

Video Tells the Story

Nationwide produced a short educational video that offers a tour of the website. The video explains not only what has changed but the logic behind the changes, so participants can better understand where they’ll find information they’re looking for.

“We encourage plan sponsors to watch the video and become familiar with the changes so they can help promote the all-new website to their employees,” Stevenson says.

In addition to the video, Nationwide is producing a series of promotional materials designed to alert public employees that their plan website has been improved, and to encourage them to take a test drive.

Sponsor Services Also Enhanced

Nationwide is upgrading the plan sponsor web experience as well.

“Based on plan sponsor research, we are creating a website for public employers that delivers better functionality, improved reporting and an easier user experience.”

A new dashboard organizes content for them, allowing for more enhanced reporting and quick, easy access to data points. Tabs are organized to include the content most needed and relevant to plan sponsors, making it easier for them to find what they want and need.

The participant search function gives plan sponsors the ability to view participant information while still logged in as a plan sponsor. While they cannot make transactions, they are able to see what the participant sees, to help the participant resolve a challenge they may have as they manage their account.

The new plan sponsor address is www.nrsforu.com/plan-sponsor.

Get More Information

For more information about Nationwide’s enhanced web services for public sector retirement plans, contact your Nationwide representative or call 877.496.1630.

(Financial Services News was written by Bob Beasley, CRC, CIC communications consultant, Nationwide Retirement Solutions.)
On March 26, 2012, the Occupational Safety and Health Administration (OSHA) approved updating the current Hazard Communication Standard (HCS) Code of Federal Regulations (CFR) 1910.1200, and adopted the United Nations Globally Harmonized System of Classification and Labeling of Chemicals, commonly referred to as GHS. GHS is an international approach to hazard communication that provides agreed upon criteria for classification of chemical hazards and a standardized approach to label elements and safety data sheets. The goal is to improve both employee and employer comprehension of the hazards to ensure appropriate handling and safe use of workplace chemicals. Adoption of the GHS in the U.S. and around the world will also help improve information received from other countries.

The first milestone for employers is OSHA’s requirement that employees be trained on the new label elements (e.g., pictograms and signal words) and Safety Data Sheets (SDS) format by December 2013, while full compliance with the final rule will begin in 2015. Though many countries are in various stages of implementing the GHS, OSHA believes that it is possible that American workplaces may begin to receive labels and SDS that are consistent with the GHS shortly after publication. Thus, it is important to ensure that when employees begin to see the new labels and SDS in their workplaces, they will be familiar with them, understand how to use them, and effectively access the information.

The table below summarizes the phase-in dates required under the revised Hazard Communication Standard (HCS).

There are three major changes to the HCS:
- Hazard classification: The definitions of hazard have been changed to provide specific criteria for classification of health and physical hazards, as well as classification of mixtures. These specific criteria will help to ensure that evaluations of hazardous effects are consistent across manufacturers, and that labels and safety data sheets are more accurate as a result.
- Labels: Chemical manufacturers and importers will be required to provide a label that includes a harmonized signal word, pictogram and hazard statement for each hazard class and category. Precautionary statements must also be provided.
- Safety Data Sheets: Will now have a specified 16-section format.

There are nine pictograms under the GHS to convey the health, physical and environmental hazards. The final HCS requires eight of these pictograms, the exception being the environmental pictogram, as environmental hazards are not within OSHA’s jurisdiction. The hazard pictograms and their corresponding hazards are shown on the next page.

<table>
<thead>
<tr>
<th>Effective Completion Date</th>
<th>Requirement(s)</th>
<th>Who</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 1, 2013</td>
<td>Train employees on the new label elements and safety data sheet (SDS) format.</td>
<td>Employers</td>
</tr>
<tr>
<td>June 1, 2015*</td>
<td>Compliance with all modified provisions of this final rule, except: The Distributor shall not ship containers labeled by the chemical manufacturer or importer unless it is a GHS label.</td>
<td>Chemical manufacturers, importers, distributors and employers</td>
</tr>
<tr>
<td>December 1, 2015</td>
<td>Update alternative workplace labeling and hazard communication program as necessary, and provide additional employee training for newly identified physical or health hazards.</td>
<td>Employers</td>
</tr>
<tr>
<td>June 1, 2016</td>
<td>May comply with either 29 CFR 1910.1200 (the final standard), or the current standard, or both</td>
<td>Chemical manufacturers, importers, distributors, and employers</td>
</tr>
</tbody>
</table>

*This date coincides with the European Union (EU) implementation date for classification of mixtures.
Under the old standard, OSHA required Material Safety Data Sheets (MSDS) for every chemical in the workplace. The problem is the same chemical from a different source would have a different MSDS, with a different format and no consistency between them. Add to that the MSDS themselves do not have the same information in the same place and often do not use the same information to describe a hazard. And when it comes to labels on the product, the same situation exists. There is no consistency between manufacturers for the exact same chemical. With GHS, all labeling will be consistent and SDS will be replaced by SDS with a standard 16 section format the same as the American National Standards Institute standard, which is widely used and familiar to many employees. The sections are:

1. Identification
2. Hazard(s) identification
3. Composition/information on ingredients
4. First-Aid measures
5. Fire-fighting measures
6. Accidental release measures
7. Handling and storage
8. Exposure controls/personal protection
9. Physical and chemical properties
10. Stability and reactivity
11. Toxicological information
12. Ecological information
13. Disposal considerations
14. Transport information
15. Regulatory information
16. Other information, including date of preparation or last revision

OSHA estimates the final standard will prevent 43 workplace deaths and 585 on-the-job injuries and illnesses each year. But the safety benefits are intended to move the hazard communication from a right-to-know to a right-to-understand. To learn more about GHS and a complete Guide to the Globally Harmonized System of Classification and Labeling of Chemicals, go to www.osha.gov/dsg/hazcom/ghs.html.

Making Medicare Make Sense

By: Centers for Medicare and Medicaid Services (CMS)

Q: Why is Medicare redesigning the claims statement? Aren’t there higher priorities?

A: The claims statement, known as the Medicare Summary Notice (MSN) is mailed out quarterly to beneficiaries in original Medicare (not those in Medicare Advantage). The MSN explains what services and benefits were provided, how much Medicare paid for them, and a running total of your deductible. The redesign will be used starting next year, and a side-by-side comparison of the old and new styles is already posted on the CMS website at www.cms.gov/apps/files/msn_changes.pdf.

This MSN redesign reflects more than 18 months of research and feedback from Medicare beneficiaries to provide enhanced customer service and respond to suggestions and input. This MSN redesign is part of a new initiative, “Your Medicare Information: Clearer, Simpler, At Your Fingertips,” which aims to make Medicare information clearer, more accessible, and easier for beneficiaries and their caregivers to understand.

It is one of our highest priorities because you, the Medicare beneficiary, are a key element in CMS’s fraud prevention efforts. By making claims information clearer, and more understandable, it will be easier for you to spot if something is wrong, and notify us sooner. If you see a claim for a service you didn’t receive, or multiple claims for a single service, or anything else you think is wrong, let us know right away, at 1.800.MEDICARE (1.800.633.4227). So it’s very important that you read and understand the information in the MSN, and the redesign will make it easier for you to do that.

The redesign of the MSN includes several features not currently available to Medicare beneficiaries with the current MSN:
- A clear notice on how to check the form for important facts and potential fraud;
- An easy-to-understand snapshot of the beneficiary’s deductible status, a list of providers they saw, and whether their claims for Medicare services were approved;
- Clearer language, including consumer-friendly descriptions for medical procedures;
- Definitions of all terms used in the form;
- Larger fonts throughout to make it easier to read; and
- Information on preventive services available to Medicare beneficiaries.

Soon, the redesigned MSN will be available to beneficiaries on mymedicare.gov, Medicare’s secure online service for personalized information regarding Medicare benefits and services; and, in early 2013, paper copies of the redesigned MSN will start to replace the current version being mailed.

Q: What about other ways to prevent Medicare fraud? What can I do to help?

A: The vast majority of Medicare transactions are completely legitimate. But there are people out there trying to scam the Medicare system, and every dollar lost to them is a dollar we can’t use to provide you with the health care you deserve. So, guard your Medicare number like you would a bank account number. Give it out only when you need to, such as a doctor’s office or a hospital. Don’t allow someone else to use your number, and don’t use anyone else’s Medicare card. Also, don’t show your card in exchange for a cash payment, or to get a “free” service Medicare doesn’t cover, such as a back massage.

CMS, the federal Medicare agency is working hard to prevent fraud, and the Affordable Care Act has given us new tools to stop it, such as allowing us to stop Medicare claim payments to someone we suspect of fraud. Previously, we had to pay first, and ask questions later. We are also using predictive computer technology to identify transactions that appear to have a high risk of fraud, just as banks do for credit card purchases they suspect. Until the Affordable Care Act was passed two years ago, we weren’t able to do that. We have dedicated teams of investigators in numerous U.S. cities, working with the U.S. Department of Justice and the Office of Inspector General, devoted to stopping fraud. These initiatives are paying off. In the last year, we recovered more than $4 billion from unscrupulous people trying to defraud the Medicare program, to help keep your Medicare system stronger and more financially viable for the long term.

If you have a question about Medicare, call 1.800.MEDICARE, which is, 1.800.633.4227. Medicare’s national toll-free helpline is available 24 hours a day, seven days a week, or visit www.medicare.gov or log onto www.healthcare.gov to read more about the Affordable Care Act.

Q: What is the Medicare Competitive Bidding Program, and how will it affect me?

A: The CMS Competitive Bidding Program for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) is an important step towards the Medicare program paying appropriately for medical items and services. The program has and will reduce out-of-pocket expenses for Medicare beneficiaries and has and will save the Medicare Program money.
Medicare generally pays 80% of the fee schedule payment amount for DMEPOS items used in the home, such as oxygen equipment, walkers, wheelchairs, devices used to treat sleep disorders, and hospital beds, under Original Medicare Part B and beneficiaries pay the remaining 20%. For most of these items, the fee schedule payment amounts are based on historical charges, adjusted for inflation at times, and not on current market prices. The Office of the Inspector General and the Government Accountability Office conducted numerous studies and found that the prices paid by Medicare for certain DMEPOS items were excessive, sometimes three to four times that of retail prices and the amounts paid by commercial insurers. Clearly, Medicare needs a better way to pay for DMEPOS items.

In 2011, Medicare began the Competitive Bidding Program for certain categories of medical equipment and supplies in nine markets. Suppliers seeking to provide these products must submit bids to do so, as well as be certified for their financial stability, ability to provide quality products, and capability to serve the areas where they want to operate. In 2013, the program will expand from nine to 100 markets or Metropolitan Statistical Areas, (MSAs). In addition, the program will include a mail-order program for diabetic supplies, like test strips, that will be in effect everywhere in the country.

What this means is that, if you live in, or travel to, an area where the program is in operation and you need equipment or supplies included in the program, you will have to get them from a Medicare contracted supplier. Otherwise, Medicare will not pay for them, and you will likely have to pay the full cost out of pocket. The list of suppliers will be available online, at www.medicare.gov or you can call Medicare to get the information, at 1.800.MEDICARE, which is, 1.800.633.4227.

So, for example, when the national mail order program for diabetic supplies goes into effect, on July 1, 2013, Medicare beneficiaries receiving these supplies through the mail will have to obtain the diabetic supplies from one of the Medicare contracted suppliers, or pay for the cost of the supplies out of their own pocket.

Medicare will be doing extensive outreach and education on the expansion of this program before it goes into effect in July 2013.

Q: What are the results of the first year of this program?
A: Medicare is adopting competitive bidding to save you money, as a beneficiary, a taxpayer, or both. In the first year of operation, in just the nine original markets, Medicare saved over $200 million on this equipment. Beneficiaries save money, too, because your co-payment on the cost of the equipment, usually 20%, goes down when the cost that Medicare pays is reduced. The savings in 2011 in the nine metropolitan statistical areas of the first round of this program amounted to more than $100 per person who purchased hospital beds from contracted suppliers, up to $168 on oxygen concentrators, and $140 on diabetic test strips. In addition, because fraudulent suppliers have been attracted to the durable medical equipment business due to historically excessive Medicare payment rates, the program has also reduced unnecessary purchases. We estimate that Medicare beneficiaries will save over $17 billion over the next 10 years, and the taxpayers will save another $25 billion, because of the lower prices paid under the new program – so far, an average of 42% reduction from the old system. Best of all, the change to the new program has not had any negative effects on the health of people on Medicare, or their access to the quality supplies and products they need.

If you have any question about Medicare, call 1.800.MEDICARE, which is, 1.800.633.4227. Medicare’s national toll-free helpline is available 24 hours a day, seven days a week, or visit www.medicare.gov or log onto www.healthcare.gov to read more about the Affordable Care Act. To learn more about the DMEPOS Competitive Bidding Program, visit the DMEPOS Competitive Bidding web page at www.cms.gov/DMEPOSCompetitiveBid/.

Public Health Administrator

Louisa County is seeking to fill the position of Public Health Administrator. This position provides leadership and coordinates the professional and administrative activities of the Louisa County Public Health Department to effectively accomplish the public health mission of the Louisa County Board of Health for all citizens of Louisa County. The Administrator shall make policy and administrative decisions as well as develop and oversee programs under the general direction of the Board of Health. Salary is commensurate with experience.

For more information on the position and to apply, please visit www.louisacountyiowa.org. Deadline for applications is July 27, 2012.
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www.iowacounties.org.
### July 2012
- **10** CCMS Administrators Meeting  
  (Hilton Garden Inn, Johnston)
- **13-17** NACo Annual Conference  
  (Pittsburgh, PA)
- **24-27** Auditors Annual Conference  
  (Harrah’s, Council Bluffs)
- **26-27** Supervisors Executive Board Retreat  
  (Holiday Inn Express, Sioux Center)

### August 2012
- **8-10** CCMS Annual Conference  
  (Embassy Suites Des Moines Downtown)
- **8-10** Recorders Annual Conference  
  (Arrowwood Resort, Okoboji)
- **16-17** ISAC LPC Retreat  
  (Hilton Garden Inn, Johnston)
- **23** ISAC Scholarship Golf Fundraiser  
  (Otter Creek Golf Course, Ankeny)
- **29** Fall School Registration Opens (8:30 am)

### September 2012
- **13-14** ISAC Board of Directors Retreat  
  (Hotel Winneshiek, Decorah)
- **27** ISAC LPC Meeting  
  (ISAC Office, West Des Moines)
- **30-3** Assessors Annual Conference  
  (Holiday Inn Airport, Des Moines)

### October 2012
- **17-18** CCMS Fundamentals Training  
  (Courtyard by Marriott, Ankeny)
- **23** CCMS Administrators Meeting  
  (Stoney Creek Inn, Johnston)
- **25-26** ISAC Board of Directors Meeting  
  (ISAC Office, West Des Moines)

### November 2012
- **1** CCMS Advanced Case Management Meeting  
  (Hilton Garden Inn, Johnston)
- **2** Fall School Housing Bureau Deadline
- **13** Fall School Pre-registration Deadline
- **11-14** County Attorneys Fall Training Conference  
  (Dubuque)
- **28-30** ISAC Fall School of Instruction  
  (Veteran’s Memorial Community Choice Credit Union Convention Center, Des Moines)

### December 2012
- **4-6** Engineers Statewide Annual Conference  
  (Scheman Center, Ames)
- **13** ISAC Board of Directors Meeting  
  (ISAC Office, West Des Moines)

### January 2013
- **8-9** CCMS Administrators Meeting  
  (Hilton Garden Inn, Johnston)
- **23-24** New County Officers School  
  (The Meadows Events and Conference Center, Altoona)

### February 2013
- **6** Statewide Supervisors Meeting  
  (Courtyard by Marriott, Ankeny)
- **27-1** CCMS Fundamentals Training  
  (Courtyard by Marriott, Ankeny)

### March 2013
- **2-6** NACo Legislative Conference  
  (Washington, D.C.)
- **14-15** ISAC Spring School of Instruction  
  (Des Moines Marriott Downtown)

### Future ISAC Conferences

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<thead>
<tr>
<th>ISAC Spring School of Instruction</th>
<th>ISAC Fall School of Instruction</th>
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<tbody>
<tr>
<td>(Des Moines Marriott Downtown)</td>
<td>(Veteran’s Memorial Community Choice Credit Union Convention Center, Des Moines)</td>
</tr>
<tr>
<td>• March 13-14, 2014</td>
<td>• November 12-14, 2014</td>
</tr>
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</table>

Please visit ISAC’s online calendar of events at www.iowacounties.org and click on ‘Upcoming Events.’ A listing of all the meetings scheduled for 2012, agendas and meeting notices can be found on ISAC’s website. A majority of ISAC’s meetings offer online registration. If you have any questions about the meetings listed above or would like to add an affiliate meeting to the ISAC Calendar, please contact Stacy Horner at 515.244.7181 or shorner@iowacounties.org.
U.S. Communities has released its new online marketplace! Participating agencies will now be able to access U.S. Communities’ contracts through an online shopping environment that integrates many suppliers into a single marketplace and allows users to make purchases through one online system at no additional cost.

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