

TRUSTEES

Cathy Ulrich
Daniel Unger
Matt Wahlert

FISCAL OFFICER

Jeffrey D. Baker

ADMINISTRATOR

Jeff Weckbach

Regular Meeting of the Board of Trustees - June 11, 2024

1. **Opening of Meeting**
2. **Executive Session 6PM**
3. **Pledge of Allegiance 7PM**
4. **Meditation (Moment of Silence)**
5. **Approval of Minutes**
6. **Presentations**
 - a. Presentation on the Help Squad by Samantha Jasper and Brian Ibold
 - b. Presentation by Colerain High School FCCLA
7. **Citizens Address**
8. **Administrative Reports**
9. **Trustees' Report**
10. **New Business**
 - Public Safety**
 - a. Resolution Declaring Nuisance and Ordering Abatement
 - b. Resolution Declaring a Junk Motor Vehicle - 3496 Redskin Dr. - 1 of 2
 - c. Resolution Declaring a Junk Motor Vehicle - 2815 Springdale Rd. - 2 of 2
 - Administration**
 - a. Motion to Issue a Request for Proposals for Legal Services
 - b. Motion to Issue a Request for Information for Banking Services
 - c. Resolution Authorizing the Adoption of Amended Appropriations
 - d. Motion to Authorize Township Administrator to Execute an Agreement with Anthem for Health Insurance for 2024-2025 Plan Year
 - e. Motion Authorizing the Township Administrator to Execute an agreement with Ameritas for Employee Dental Benefits
 - f. Motion to Set Rates for Employee Health Care Plans and Packages
 - g. First Reading - Resolution Adopting Financial Policies for Fraud Prevention
11. **Old Business**
 - a. Discussion and Potential Action - 2864 Houston
12. **Consent Items**



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- a. Donation Acceptance - Police Department - Cincinnati Moose Lodge #2 - \$2,039.24
- b. Donation Acceptance - Department of Fire and EMS - Cincinnati Moose Lodge #2 - \$2,039.24
- c. Donation Acceptance - Department of Fire and EMS - From Jerome Robinson - \$50.00 (cash)
- d. Contract - Ohio Plan - Endorsement Amendment - \$0
- e. Contract - KZF - Zoning Resolution Update - \$0
- f. Promotion - Full-time Firefighter/Paramedic - Department of Fire and EMS - Meghan Ungar - \$22.43 per Hour
- g. New Hire- Planner- Maggie Klein

13. Fiscal Office Report

14. Executive Session – if needed

15. Adjournment

PRESENTATIONS

Department: Administration

Department
Director:

Strategic Plan Goal:

Presentation on the Help Squad by Samantha Jasper and Brian Ibold

No action is requested of the Board.

Rationale:

Samantha Jasper and Brian Ibold from the Help Squad will provide a presentation with an overview of the work being done by the Help Squad in Colerain Township.

PRESENTATIONS

Department: Administration
Department Director: Will Mueller, Assistant Fire Chief

Strategic Plan Goal:

Presentation by Colerain High School FCCLA

No action is requested of the Board.

Rationale:

Colerain High School's Family, Career, and Community Leaders of America's (FCCLA) team would like to provide a presentation to the Township on some of their community efforts in advance of a national presentation at the National FCCLA conference in Washington state.

PUBLIC SAFETY

Department: Police
Department Director: Ed Cordie, Police Chief

Strategic Plan Goal: Strategic Goal #3: Revitalization of the Community through Economic Development, Beautification, and Code Enforcement

Resolution Declaring Nuisance and Ordering Abatement

Recommend ADOPTION of the Resolution.

Rationale:

This resolution allows for the removal of uncontrolled vegetation and/or refuse at the following properties:

2730 Bryneside Dr	510-0074-0060-00
9307 Coogan Dr	510-0053-0192-00
11317 Gravenhurst Dr	510-0021-0113-00
2909 Greenbrook Ln	510-0024-0216-00
2563 Niagara St	510-0051-0342-00
2564 Niagara St	510-0051-0359-00
2594 Retford Dr	510-0011-0435-00
12127 Seaford Dr	510-0011-0182-00
2520 Springdale Rd	510-0043-0038-00
2870 Stout Rd	510-0034-0038-00
8578 Sunlight Dr	510-0063-0262-00
8964 Tripoli Dr	510-0064-0076-00
12059 Westerly Dr	510-0011-0373-00

All properties that are abated by the Township will have their property taxes assessed in order to reimburse the Township for the abatement services. This resolution and the Township's abatement process comport with the Ohio Revised Code for nuisance violations.

The Board of Trustees of Colerain Township, County of Hamilton, State of Ohio, met in regular session at 7:00 p.m., on the ____ day of _____, 202_, at the Colerain Township Administration Building, 4200 Springdale Road, Cincinnati, Ohio 45251, with the following members present:

Ms. Cathy Ulrich, Mr. Dan Unger, and Matthew Wahlert

Trustee _____ introduced the following resolution and moved its adoption:

RESOLUTION NO. _____

RESOLUTION DECLARING NUISANCE AND ORDERING ABATEMENT

WHEREAS Uncontrolled vegetation and/or refuse and debris were reported at the properties listed below:

<u>Address</u>	<u>Book-Page-Parcel No.</u>
2730 Bryneside Dr	510-0074-0060-00
9307 Coogan Dr	510-0053-0192-00
11317 Gravenhurst Dr	510-0021-0113-00
2909 Greenbrook Ln	510-0024-0216-00
2563 Niagara St	510-0051-0342-00
2564 Niagara St	510-0051-0359-00
2594 Retford Dr	510-0011-0435-00
12127 Seaford Dr	510-0011-0182-00
2520 Springdale Rd	510-0043-0038-00
2870 Stout Rd	510-0034-0038-00
8578 Sunlight Dr	510-0063-0262-00
8964 Tripoli Dr	510-0064-0076-00
12059 Westerly Dr	510-0011-0373-00

WHEREAS Ohio Revised Code Section 505.87 provides that, at least seven days prior to providing for the abatement, control, or removal of any vegetation, garbage, refuse, or debris, the Board of Trustees shall notify the owner of the land and any holders of liens of record upon the land; and

WHEREAS Ohio Revised Code Section 505.87 provides that, if the Board of Trustees determines within twelve consecutive months after a prior nuisance determination that the same owner's maintenance of vegetation, garbage refuse, or other debris on the same land in the township constitutes a nuisance, at least four days prior to providing for the abatement, control or removal of the nuisance, the Board must send notice of the subsequent nuisance determination to the landowner and to any lienholders of record by first class mail; and

WHEREAS In accordance with Ohio Revised Code Section 505.87, the Township Trustees have the authority to contract to abate the nuisances and have the costs incurred assessed to the property tax bills.

NOW, THEREFORE, BE IT RESOLVED by the Board of Trustees of Colerain Township, Hamilton County, Ohio, as follows:

1. That this Board specifically finds and hereby determines that the uncontrolled growth of vegetation and/or the refuse and debris on each of the said properties listed above constitute a nuisance within the meaning of Ohio Revised Code Section 505.87, and the Board directs that notice of this action be given to owners of the said property and lienholders in the manner required by Ohio Revised Code Section 505.87;
2. That this Board hereby orders the owners of said property to remove and abate the nuisances within seven days after notice of this order is given to the owners and lienholders of record, and within four days after notice of this order is given to the owners and lienholders of record for properties previously determined to be a nuisance. If said nuisances are not removed and abated by the said owners, or if no agreement for removal and abatement is reached between the Township and the owners and lienholders of record within four or seven days after notice is given, the Zoning Inspector shall cause the nuisances to be removed, and the Township shall notify the County Auditor to assess such cost plus administrative expense to the property tax bills for the said parcel, as provided in Ohio Revised Code Section 505.87;
3. That it is hereby found and determined that all formal actions of this Board concerning and relating to the passage of this Resolution were taken in an open meeting of this Board, and that all deliberations of this Board and any of its committees that resulted in such formal action were taken in meetings open to the public, in compliance with all legal requirements including §121.22 of the Ohio Revised Code; and
4. That the Board by a majority vote hereby dispenses with the requirement that this Resolution be read on two separate days and hereby authorizes the adoption of the Resolution upon its first reading.
5. That this Resolution shall be effective at the earliest date allowed by law.

Trustee _____, seconded the Resolution, and the roll being called upon the question of its adoption, the vote resulted as follows:

Vote Record: Mrs. Ulrich _____, Mr. Unger _____, Mr. Wahlert _____

ADOPTED this ____ day of _____, 202__.

BOARD OF TRUSTEES:

Cathy Ulrich, Trustee

Dan Unger, Trustee

Matthew Wahlert, Trustee

ATTEST:

Jeff Baker,
Colerain Township Fiscal Officer

Resolution prepared by and approved as to form:

Scott A. Sollmann (0081467)
Colerain Township Law Director
5300 Socialville Foster Rd., Suite 200
Mason, OH 45040
(513) 583-4200

AUTHENTICATION

This is to certify that this Resolution was duly passed and filed with the Colerain Township Fiscal Officer this ____ day of _____, 202__.

Jeff Baker
Colerain Township Fiscal Officer

PUBLIC SAFETY

Department: Police
Department Director: Ed Cordie, Police Chief

Strategic Plan Goal: Strategic Goal #3: Revitalization of the Community through Economic Development, Beautification, and Code Enforcement

Resolution Declaring a Junk Motor Vehicle - 3496 Redskin Dr. - 1 of 2

Recommend ADOPTION of the Resolution.

Rationale:

Recommend Adoption of the Motion to Declare and Order Abatement of the Junk Motor Vehicle at the Following Property:

3496 Redskin Dr. Cincinnati, OH 45251

1. **(NO TAG)2006, YELLOW, CHEVROLET, AVEO**

The Board of Trustees of Colerain Township, County of Hamilton, State of Ohio, met in regular session at **7:00** p.m., on the ____ day of _____, 202_ at the Colerain Township Administration Building, 4200 Springdale Road, Cincinnati, Ohio 45251, with the following members present:

Ms. Cathy Ulrich, Mr. Dan Unger, and Matthew Wahlert

Trustee _____ introduced the following resolution and moved its adoption:

RESOLUTION NO.: _____

RESOLUTION DECLARING VEHICLE LOCATED AT 3496 Redskin Dr. Cincinnati, OH 45251– Parcel ID 510-0111-0125-00
AS A JUNK MOTOR VEHICLE AND CAUSING FOR THE REMOVAL PURSUANT TO COLERAIN TOWNSHIP RESOLUTION NO. 36-21

WHEREAS, pursuant to Ohio Revised Code § 505.871, the Colerain Township Board of Trustees has authority to determine that a motor vehicle, on either public and private property, is a junk motor vehicle as defined in Ohio Revised Code § 505.173, and has the authority to have that vehicle removed from the property; and,

WHEREAS, the Colerain Township Board of Trustees adopted Resolution 36-21, on May 11, 2021, adopting the procedures of Ohio Revised Code § 505.871, to facilitate to the removal of a growing number of junk vehicles throughout the Township, and worked to preserve property values, public health, safety, and morals by eliminating the detrimental effects of junk vehicles; and,

WHEREAS, the Board of Trustees has knowledge of a junk motor vehicle located at **3496 Redskin Dr. Cincinnati, OH 45251– Parcel ID 510-0111-0125-00**

NOW, THEREFORE, BE IT RESOLVED, by the Board of Trustees of Colerain Township, Hamilton County, Ohio, as follows;

1. The Board declares the junk motor vehicle located at **3496 Redskin Dr. Cincinnati, OH 45251– Parcel ID 510-0111-0125-00** to be inoperable, extensively damages, and at least three model years old:

A. (NO TAG)2006, YELLOW, CHEVROLET, AVEO

2. The Board shall provide for the removal of said junk motor vehicle from the above listed property, not sooner than fourteen (14) days after the Board serves written notice of its intention to remove or cause the removal of the vehicle on the owner of the land and any holders of liens of record on the land.
3. The written notice shall contain the following information:

- a. A general description of the vehicle to be removed;
 - b. A statement the Board has determined that the vehicle is a junk motor vehicle.
 - c. A statement that if the owner of the land fails to remove the vehicle within fourteen days after service of the notice, the board may remove or cause the removal of the vehicle.
 - d. A statement that any expenses and/or costs the board incurs in removing or causing the removal of the vehicle may be entered upon the tax duplicate and become a lien upon the land from the date of entry.
 - e. A copy of this resolution.
4. The Board shall serve the notice on the property owner, pursuant to the procedure in Colerain Township Resolution 36-21, that a junk vehicle exists on the property and Colerain Township intends to remove, or cause the removal, of the junk motor vehicle.
 5. The Board may utilize any lawful means to collect the expenses incurred in removing or causing to removal of the junk motor vehicle as determined by Colerain Township Resolution 36-21.
 6. That it is hereby found and determined that all formal actions of this Board concerning and relating to the passage of this Resolution were taken in meetings open to the public, in compliance with all legal requirements including §121.22 of the Ohio Revised Code.
 7. That the Board by a majority vote hereby dispenses with the requirement that this Resolution be read on two separate days and hereby authorizes the adoption of the Resolution upon its first reading.
 8. This resolution shall take effect at the earliest period allowed by law.

Trustee _____ seconded the Resolution, and the roll being called upon the question of its adoption, the vote resulted as follows:

Vote Record: Ms. Ulrich _____, Mr. Unger _____ and Mr. Wahlert _____

ADOPTED this _____ day of _____, 202__.

BOARD OF TRUSTEES:

Cathy Ulrich, Trustee

Dan Unger, Trustee

Matthew Wahlert, Trustee

ATTEST:

Jeff Baker
Colerain Township Fiscal Officer

Resolution prepared by and approved as to form:

Scott A. Sollmann (0081467)
Colerain Township Law Director
5300 Socialville Foster Rd., Suite 200
Mason, OH 45040
(513) 583-4200

AUTHENTICATION

This is to certify that this Resolution was duly passed and filed with the Colerain Township Fiscal Officer this ____ day of _____, 202_.

Jeff Baker
Colerain Township Fiscal Officer

PUBLIC SAFETY

Department: Police
Department Director: Ed Cordie, Police Chief

Strategic Plan Goal: Strategic Goal #3: Revitalization of the Community through Economic Development, Beautification, and Code Enforcement

Resolution Declaring a Junk Motor Vehicle - 2815 Springdale Rd. - 2 of 2
Recommend ADOPTION of the Resolution.

Rationale:

Recommend Adoption of the Motion to Declare and Order Abatement of the Junk Motor Vehicle at the Following Property:

2815 Springdale Rd. Cincinnati, OH 45251

1. **(OH), JIN9329, 2017, BLACK, HONDA, ACCORD**

The Board of Trustees of Colerain Township, County of Hamilton, State of Ohio, met in regular session at **7:00** p.m., on the ____ day of _____, 202_ at the Colerain Township Administration Building, 4200 Springdale Road, Cincinnati, Ohio 45251, with the following members present:

Ms. Cathy Ulrich, Mr. Dan Unger, and Matthew Wahlert

Trustee _____ introduced the following resolution and moved its adoption:

RESOLUTION NO.: _____

RESOLUTION DECLARING VEHICLE LOCATED AT 2815 Springdale Rd. Cincinnati, OH 45251– Parcel ID 510-0042-0108-00
AS A JUNK MOTOR VEHICLE AND CAUSING FOR THE REMOVAL PURSUANT TO COLERAIN TOWNSHIP RESOLUTION NO. 36-21

WHEREAS, pursuant to Ohio Revised Code § 505.871, the Colerain Township Board of Trustees has authority to determine that a motor vehicle, on either public and private property, is a junk motor vehicle as defined in Ohio Revised Code § 505.173, and has the authority to have that vehicle removed from the property; and,

WHEREAS, the Colerain Township Board of Trustees adopted Resolution 36-21, on May 11, 2021, adopting the procedures of Ohio Revised Code § 505.871, to facilitate to the removal of a growing number of junk vehicles throughout the Township, and worked to preserve property values, public health, safety, and morals by eliminating the detrimental effects of junk vehicles; and,

WHEREAS, the Board of Trustees has knowledge of a junk motor vehicle located at **2815 Springdale Rd. Cincinnati, OH 45251– Parcel ID 510-0042-0108-00**

NOW, THEREFORE, BE IT RESOLVED, by the Board of Trustees of Colerain Township, Hamilton County, Ohio, as follows;

1. The Board declares the junk motor vehicle located at **2815 Springdale Rd. Cincinnati, OH 45251– Parcel ID 510-0042-0108-00** to be inoperable, extensively damages, and at least three model years old:

A. (OH), JJN9329, 2017, BLACK, HONDA, ACCORD

2. The Board shall provide for the removal of said junk motor vehicle from the above listed property, not sooner than fourteen (14) days after the Board serves written notice of its intention to remove or cause the removal of the vehicle on the owner of the land and any holders of liens of record on the land.
3. The written notice shall contain the following information:

- a. A general description of the vehicle to be removed;
 - b. A statement the Board has determined that the vehicle is a junk motor vehicle.
 - c. A statement that if the owner of the land fails to remove the vehicle within fourteen days after service of the notice, the board may remove or cause the removal of the vehicle.
 - d. A statement that any expenses and/or costs the board incurs in removing or causing the removal of the vehicle may be entered upon the tax duplicate and become a lien upon the land from the date of entry.
 - e. A copy of this resolution.
4. The Board shall serve the notice on the property owner, pursuant to the procedure in Colerain Township Resolution 36-21, that a junk vehicle exists on the property and Colerain Township intends to remove, or cause the removal, of the junk motor vehicle.
 5. The Board may utilize any lawful means to collect the expenses incurred in removing or causing to removal of the junk motor vehicle as determined by Colerain Township Resolution 36-21.
 6. That it is hereby found and determined that all formal actions of this Board concerning and relating to the passage of this Resolution were taken in meetings open to the public, in compliance with all legal requirements including §121.22 of the Ohio Revised Code.
 7. That the Board by a majority vote hereby dispenses with the requirement that this Resolution be read on two separate days and hereby authorizes the adoption of the Resolution upon its first reading.
 8. This resolution shall take effect at the earliest period allowed by law.

Trustee _____ seconded the Resolution, and the roll being called upon the question of its adoption, the vote resulted as follows:

Vote Record: Ms. Ulrich _____, Mr. Unger _____ and Mr. Wahlert _____

ADOPTED this _____ day of _____, 202__.

BOARD OF TRUSTEES:

Cathy Ulrich, Trustee

Dan Unger, Trustee

Matthew Wahlert, Trustee

ATTEST:

Jeff Baker
Colerain Township Fiscal Officer

Resolution prepared by and approved as to form:

Scott A. Sollmann (0081467)
Colerain Township Law Director
5300 Socialville Foster Rd., Suite 200
Mason, OH 45040
(513) 583-4200

AUTHENTICATION

This is to certify that this Resolution was duly passed and filed with the Colerain Township Fiscal Officer this ____ day of _____, 202_.

Jeff Baker
Colerain Township Fiscal Officer

ADMINISTRATION

Department: Administration

Department Director: Jeff Weckbach, Township Administrator

Strategic Plan Goal: Strategic Goal #5: Continuously Improve the Operations of the Township

Motion to Issue a Request for Proposals for Legal Services

Recommend ADOPTION of the Motion.

Rationale:

The Township last reviewed legal services in 2018. The current contract with Scott Sollmann to serve as the Township's Law Director is set to expire at the end of 2024. The Township is proposing to follow a Request for Proposal process to evaluate legal services for the next three years.



REQUEST FOR PROPOSALS (RFP)

LEGAL SERVICES for Colerain Township

Release Date: June 11, 2024

Response Deadline: July 12, 2024, at 1 p.m.
EST

4200 Springdale Road
Colerain Township, OH 45251

513-385-7500

**GUIDELINES AND INSTRUCTIONS
FOR REQUEST FOR PROPOSAL (RFP) FOR LEGAL SERVICES**

Colerain Township
4200 Springdale Road
Cincinnati, Ohio 45251
Phone: 513-385-7500

NOTICE TO RESPONDENTS

Colerain Township is soliciting proposals for legal services as Township's Law Director until July 12, 2024, at 1 p.m. local time.

All clarifying questions for this proposal should be directed to Jeff Weckbach, Township Administrator, via email at jweckbach@colerain.org. All questions should be submitted by July 5, 2024.

Six hard copy, signed proposals should be submitted to the Township to the attention of Jeff Weckbach, Administrator, Re: Legal Services RFP, at the address listed above not later than 1:00 p.m., July 12, 2024.

Respondents should be aware that any records they submit to the Township, or that are used by the Township may be public records. The Township will promptly disclose public records upon request unless a statute exempts them from disclosure. Respondents should also be aware that if even a portion of a record is exempt from disclosure, generally, the rest of the record must be disclosed. The Township strongly recommends that applicants identify any portion of their response that they believe to be subject to exemption under the Public Records Act.

GENERAL INFORMATION

The Administrator of Colerain Township, Hamilton County, Ohio invites attorneys/firms, who possess the capability, expertise, and experience to provide various legal services, to submit a response in accordance with the stated requirements.

The proposal must cover the following:

- a) General Duties & Responsibilities as Township Law Director
- b) Specific specialized services offered by the attorney/firm

The purpose of the request is to consider an attorney/firm to serve as Township Law Director with the backing and support of a team of attorneys that can provide a wide array of services in a timely manner. In general, the Township is looking for a firm that has experience in the following areas:

- General municipal laws
- Labor law
- Zoning laws
- Economic development laws
- Property/real estate law

- Resolution development and interpretation
- Contract law
- Eminent Domain
- Trial activity
- Criminal Prosecution

All responders should be aware that the Township expects the firm/attorney to be present at meetings of the Board of Trustees, Housing Court, and other meetings/Boards as requested by the Township Administrator.

TIMELINES

- | | |
|------------------------------------|--|
| 1. Township Trustees RFP Approval: | June 11, 2024 |
| 2. Proposal Deadline: | 1:00 p.m. (local time) on July 12, 2024. |
| 3. Interview(s), if necessary: | July 23, 2024 |
| 4. Projected Township approval: | August 27, 2024 |
| 5. Contract Commencement: | January 1, 2025 |

The township will not be responsible for proposals that are received after the 1:00 p.m. deadline on July 12, 2024.

Although the award may be effective January 1, 2025, actual transition (if applicable) will not take place until an adequate period of transition has occurred to ensure proper representation of all legal matters pending within the Township.

EVALUATION CRITERIA

Proposals will be evaluated by a selection Committee comprised of, but not limited to: Township Administrator, and Assistant Township Administrators.

The hourly fee for services will NOT be the sole determining factor in designating the attorney/firm. The Township understands that it is important to use a structured process that fairly compares different agencies based on a number of factors. The criteria for evaluating the proposals will be based upon a combination of the factors, including but not limited to the following:

1. Attorney/Firm Qualifications
2. Experience with Public Sector
3. Proximity to Colerain Township.
4. List of General & Specialized Services
5. Demonstrated Experience with Specialized Services
6. # of Attorneys Available to Colerain Township
7. Public Sector References

Colerain Township Trustees must still approve a final contract and vendor selection before the process is completed.

Proposal Format

All proposals shall be submitted in the following format. Failure to abide by this format may result in the disqualification of the submission.

It is requested that all proposals be submitted in the following format to expedite the review and selection process.

1. Cover Letter – A cover letter signed by an individual who is authorized to bind the firm on all matters pertaining to legal services.
2. Experience with Public Sector – A list of past and current public sector clients and specific legal services provided. This list should identify public sector clients that were represented within the past five years.
3. Location – Physical location of firm.
4. List of General & Specialized Services – A complete list of general and specialized services you are proposing or are capable of providing to Colerain Township.
5. Experience with Specialized Services – Provide specific case background for specialized services.
6. # of Attorneys Available to Colerain Township - Responses must provide resumes indicating the qualifications/certifications of all attorneys available to Colerain Township. Response shall also provide the specific attorney that will serve as Law Director for Colerain Township.
7. Public Sector References – A list of a minimum of three (3) public sector references with contact information.
8. Conflicts of Interest – Responses must disclose any conflicts of interest to their accepting an award of the contract with Colerain Township. If a conflict of interest exists, the manner in which said conflict of interest would be rectified, if said contract is awarded to the law firm.
9. Cost Proposal/Fee Structure – The response should clearly identify the hourly rate for services charged, the annual fee cap, and any other fees for the initial three (3) year agreement period. Respondents should attempt to complete Appendix A. This will allow the Township to easily compare responses. The Township would prefer the awarded firm to be paid on a contractual basis. This can be structured as a direct hourly bill, retainer with hourly bill, or other alternative that has been successful with other public entities.
10. Section O - Non-Collusion Affidavit – Bidders must furnish an Affidavit of Non-Collusion with the bid (attached).

11. Section R - Personal Property Tax Affidavit – Bidders must furnish an Affidavit of Personal Property Tax with the bid (attached).
12. Sample Contract – A copy of sample agreement/contract. This will allow the Township to expedite the review/award process.
13. Other Information – A statement of any other pertinent information that should be known in order to effectively evaluate the proposal.

Terms and Conditions

Colerain Township reserves the right to reject any or all proposals, to award contracts in whole or in part, or to waive any informalities or irregularities in the submitted proposals. The Request for Proposal does not commit the Colerain Township to award a contract, to pay any costs incurred in the preparation of a proposal to this request, or to procure or contract for services or supplies.

The ideal term of the agreement will be for a period of three years beginning approximately January 1, 2025, and may be renewed for two one-year terms upon agreement between Colerain Township and the law firm. Colerain Township reserves the right to terminate the agreement at any time upon written notice to the law firm.

COLERAIN TOWNSHIP, HAMILTON COUNTY, OHIO
SECTION O
NON-COLLUSION AFFIDAVIT

To: Colerain Township, Ohio
Hamilton County, Ohio

(Name of Individual)

(Company Representing)

BEING DULY SWORN, DOES DEPOSE AND THAT (HE, SHE, THEY) RESIDE AT

(Residence Address)

AND THAT

(Name of Company)

(Company Address)

IS THE ONLY ENTITY INTERESTED IN THE PROFITS OF THE PROPOSED CONTRACT FOR THIS PROJECT; THAT THE SAID CONTRACT IS MADE WITHOUT ANY CONNECTION OR COMMON INTEREST IN THE PROFITS THEREOF WITH ANY PERSON MAKING ANY BID OR PROPOSAL FOR SAID WORK; THAT THE SAID CONTRACT IS ON THEIR PART, IN ALL RESPECTS, FAIR AND WITHOUT COLLUSION OR FRAUD; AND, ALSO, THAT NO MEMBER OF THE BOARD OF TRUSTEES, HEAD OF ANY DEPARTMENT OR BUREAU, OR EMPLOYEE THEREIN, OR ANY OFFICER OR EMPLOYEE OF COLERAIN TOWNSHIP, OHIO, IS DIRECTLY OR INDIRECTLY INTERESTED THEREIN.

Signature

Printed Name/Title

Company

Sworn to and subscribed in my presence on this _____ day of _____, 20____ by the above referenced person on behalf of the contractor or supplier.

Notary Public

COLERAIN TOWNSHIP, HAMILTON COUNTY, OHIO
SECTION R
AFFIDAVIT OF CONTRACTOR OR SUPPLIER OF NON-DELINQUENCY
OF PERSONAL PROPERTY TAXES
AND POLITICAL CONTRIBUTIONS

To: Colerain Township, Ohio
Hamilton County, Ohio

The undersigned, an authorized representative of the below-referenced contractor or supplier/company/entity/individual (as applicable), being first duly sworn, as a condition to be considered for the reward of a contract by Colerain Township, Ohio for _____ hereby states that such entity is not charged at the time the bid was submitted with any delinquent personal property taxes on the general tax list of personal property of Hamilton County in which Colerain Township as a tax district has territory and that such entity was not charged with delinquent personal property taxes on any such tax list.

The undersigned, an authorized representative of the below-referenced contractor or supplier/company/entity/individual (as applicable), also further certifies that such entity is in compliance with ORC Section 3517.13(I) or 3517.13(J), whichever is applicable, relative to political contributions to public officials of Colerain Township, Ohio.

In consideration of the award of the above contract, the above statements are incorporated in said contract as covenants of the undersigned contractor or supplier.

Signature

Printed Name/Title

Company

Sworn to and subscribed in my presence on this _____ day of _____, 20____ by the above referenced person on behalf of the contractor or supplier.

Notary Public

APPENDIX A – COST SHEET

FEE STRUCTURE			
	2025	2026	2027
Hourly Rate			
Annual Fee Cap (if applicable)			
Hybrid Fee (General Work)			
Hybrid Fee (Specialized Work)			
Retainer Fee*			
Hourly Rate			

*Include a description of items included in the general retainer.

** Also please include a list of any/all specialized or itemized costs that the Township would be reasonably expected to incur.

ADMINISTRATION

Department: Administration

Department Director: Jeff Weckbach, Township Administrator

Strategic Plan Goal: Strategic Goal #1: Chart a Pathway to Long-Term Financial Stability

Motion to Issue a Request for Information for Banking Services

Recommend ADOPTION of the Motion.

Rationale:

It has been several years since the Township last evaluated its existing banking services. In order to understand the types of services available on the market and to consider if there is an opportunity to enhance interest earnings, the Township is seeking information from qualified banks for banking services.



REQUEST FOR INFORMATION (RFI)

BANKING SERVICES for Colerain Township

Release Date: June 11, 2024

Response Deadline: July 11, 2024, at 1 p.m.
EST

4200 Springdale Road
Colerain Township, OH 45251

513-385-7500

**GUIDELINES AND INSTRUCTIONS
FOR REQUEST FOR INFORMATION (RFI) FOR BANKING SERVICES**

Colerain Township
4200 Springdale Road
Cincinnati, Ohio 45251
Phone: 513-385-7500

NOTICE TO RESPONDENTS

Colerain Township is soliciting proposals for banking services for all Township accounts until July 11, 2024, at 1 p.m. local time.

All clarifying questions for this proposal should be directed to Jeff Weckbach, Township Administrator, via email at jweckbach@colerain.org. All questions should be submitted by July 3, 2024.

Six hard copy, signed proposals should be submitted to the Township to the attention of Jeff Weckbach, Administrator, Re: Banking Services RFI, at the address listed above not later than 1:00 p.m., July 11, 2024.

Respondents should be aware that any records they submit to the Township, or that are used by the Township may be public records. The Township will promptly disclose public records upon request unless a statute exempts them from disclosure. Respondents should also be aware that if even a portion of a record is exempt from disclosure, generally, the rest of the record must be disclosed. The Township strongly recommends that applicants identify any portion of their response that they believe to be subject to exemption under the Public Records Act.

GENERAL INFORMATION

The Administrator of Colerain Township, Hamilton County, Ohio invites reputable banks, who possess the capability, expertise, and experience to provide various banking services, to submit a response in accordance with the stated requirements.

The proposal must cover the following:

- a) Ability to meet the required banking needs of Colerain Township
- b) Specific specialized services offered by the bank

The purpose of the request is to consider a bank that has the ability to meet the needs of a municipal organization with an annual operating budget of \$40M - \$50M. In general, the Township is looking for a bank that has experience working with local governments in Ohio and has the ability to integrate with the Township's existing financial systems and software. Respondents may request a current Account Analysis Statement from the Township.

TIMELINES

- | | |
|------------------------------------|--|
| 1. Township Trustees RFP Approval: | June 11, 2024 |
| 2. Proposal Deadline: | 1:00 p.m. (local time) on July 11, 2024. |
| 3. Interview(s), if necessary: | Week of July 22, 2024 |
| 4. Projected Township approval: | August 27, 2024 |
| 5. Contract Commencement: | TBD |

The township will not be responsible for proposals that are received after the 1:00 p.m. deadline on July 11, 2024.

The effective date of the contract will depend on the transition from the Township's existing bank. Ideally, this transition will be completed prior to the completion of the Township's fiscal year 2024 (December 31, 2024).

EVALUATION CRITERIA

Proposals will be evaluated by a selection Committee comprised of, but not limited to: Township Administrator, Assistant Township Administrators, and Finance Specialist.

The fees for services and interest rates will NOT be the sole determining factor in selecting the bank. The Township understands that it is important to use a structured process that fairly compares different agencies based on a number of factors. The criteria for evaluating the proposals will be based upon a combination of the factors, including but not limited to the following:

1. Bank Qualifications
2. Experience with Public Sector
3. Proximity to Colerain Township
4. List of General & Specialized Services
5. Demonstrated Experience with Specialized Services
6. Public Sector References

Colerain Township Trustees must still approve a final contract and vendor selection before the process is completed.

Proposal Format

All proposals shall be submitted in the following format. Failure to abide by this format may result in the disqualification of the submission.

It is requested that all proposals be submitted in the following format to expedite the review and selection process.

1. Cover Letter – A cover letter signed by an individual who is authorized to represent the bank.

2. Location – Physical location of bank and its representatives to the Colerain account.
3. List of General & Specialized Services – A complete list of general and specialized services you are proposing or are capable of providing to Colerain Township. A fee schedule should be included for each service.
4. Experience with Specialized Services – Provide specific background for specialized services.
5. Team Available to Colerain Township - Responses must provide resumes indicating the primary points of contact that will be available to assist Colerain Township.
6. Public Sector References – A list of a minimum of three (3) public sector references with contact information.
7. Demonstration of Financial Strength- Documentation demonstrating the bank's profitability, operating history, and net capital.
8. Regulatory Standing- Documentation of the bank's status with the applicable regulatory agency.
9. Conflicts of Interest – Responses must disclose any conflicts of interest to their accepting an award of the contract with Colerain Township. If a conflict of interest exists, the manner in which said conflict of interest would be rectified, if said contract is awarded to the law firm.
10. Transition Timeline and Process – The response should include a proposed transition timeline and process to ensure a smooth transition from the Township's existing bank that will minimize disruptions to ongoing operations.
11. Section O - Non-Collusion Affidavit – Bidders must furnish an Affidavit of Non-Collusion with the bid (attached).
12. Section R - Personal Property Tax Affidavit – Bidders must furnish an Affidavit of Personal Property Tax with the bid (attached).
13. Sample Contract – A copy of sample agreement/contract. This will allow the Township to expedite the review/award process.
14. Other Information – A statement of any other pertinent information that should be known in order to effectively evaluate the proposal.

Terms and Conditions

Colerain Township reserves the right to reject any or all proposals, to award contracts in whole or in part, or to waive any informalities or irregularities in the submitted proposals. The Request

for Proposal does not commit the Colerain Township to award a contract, to pay any costs incurred in the preparation of a proposal to this request, or to procure or contract for services or supplies.

COLERAIN TOWNSHIP, HAMILTON COUNTY, OHIO
SECTION O
NON-COLLUSION AFFIDAVIT

To: Colerain Township, Ohio
Hamilton County, Ohio

(Name of Individual)

(Company Representing)

BEING DULY SWORN, DOES DEPOSE AND THAT (HE, SHE, THEY) RESIDE AT

(Residence Address)

AND THAT

(Name of Company)

(Company Address)

IS THE ONLY ENTITY INTERESTED IN THE PROFITS OF THE PROPOSED CONTRACT FOR THIS PROJECT; THAT THE SAID CONTRACT IS MADE WITHOUT ANY CONNECTION OR COMMON INTEREST IN THE PROFITS THEREOF WITH ANY PERSON MAKING ANY BID OR PROPOSAL FOR SAID WORK; THAT THE SAID CONTRACT IS ON THEIR PART, IN ALL RESPECTS, FAIR AND WITHOUT COLLUSION OR FRAUD; AND, ALSO, THAT NO MEMBER OF THE BOARD OF TRUSTEES, HEAD OF ANY DEPARTMENT OR BUREAU, OR EMPLOYEE THEREIN, OR ANY OFFICER OR EMPLOYEE OF COLERAIN TOWNSHIP, OHIO, IS DIRECTLY OR INDIRECTLY INTERESTED THEREIN.

Signature

Printed Name/Title

Company

Sworn to and subscribed in my presence on this _____ day of _____, 20____ by the above referenced person on behalf of the contractor or supplier.

Notary Public

COLERAIN TOWNSHIP, HAMILTON COUNTY, OHIO
SECTION R
AFFIDAVIT OF CONTRACTOR OR SUPPLIER OF NON-DELINQUENCY
OF PERSONAL PROPERTY TAXES
AND POLITICAL CONTRIBUTIONS

To: Colerain Township, Ohio
Hamilton County, Ohio

The undersigned, an authorized representative of the below-referenced contractor or supplier/company/entity/individual (as applicable), being first duly sworn, as a condition to be considered for the reward of a contract by Colerain Township, Ohio for _____ hereby states that such entity is not charged at the time the bid was submitted with any delinquent personal property taxes on the general tax list of personal property of Hamilton County in which Colerain Township as a tax district has territory and that such entity was not charged with delinquent personal property taxes on any such tax list.

The undersigned, an authorized representative of the below-referenced contractor or supplier/company/entity/individual (as applicable), also further certifies that such entity is in compliance with ORC Section 3517.13(I) or 3517.13(J), whichever is applicable, relative to political contributions to public officials of Colerain Township, Ohio.

In consideration of the award of the above contract, the above statements are incorporated in said contract as covenants of the undersigned contractor or supplier.

Signature

Printed Name/Title

Company

Sworn to and subscribed in my presence on this _____ day of _____,
20_____ by the above referenced person on behalf of the contractor or supplier.

Notary Public

ADMINISTRATION

Department: Administration
Department Director: Jeff McElravy, Assistant Administrator

Strategic Plan Goal: Strategic Goal #1: Chart a Pathway to Long-Term Financial Stability

Resolution Authorizing the Adoption of Amended Appropriations
Recommend ADOPTION of the Resolution.

Rationale:

Each month, staff compare the Township's actual performance to its revenue and appropriation budgets. As it is midyear, it is appropriate to make changes to address unanticipated needs. This Resolution makes the following changes in appropriations:

- Fund 2021 (Gasoline Tax) - increase appropriations by \$52,000 for salaries. Salaries in Public Services, and for employees who are paid out of multiple funds, are split between Funds 2021 and 2031. This change will align appropriations with the budget.
- Fund 2281 (Ambulance and EMS) - increase appropriations by \$41,008. At the beginning of the pandemic, the Township received a grant from the Health Resources and Services Administration. The Township did not apply for the grant, and it was receipted as regular EMS revenue. The performance period for the grant has expired and these funds need to be returned to the federal government.
- Fund 2913 (TIF- Abbeytown) - This TIF has outperformed estimates, and as a result, appropriations need to be increased to \$98,700 to pay compensation payments to NWLSD and tax collection fees to the county auditor.
- 2916 (TIF- Crosley Meadows) - This TIF has outperformed estimates, and as a result, appropriations need to be increased to \$105,000 to pay compensation payments to NWLSD and tax collection fees to the county auditor.
- 2917 (TIF- Copper Creek) - This TIF has outperformed estimates, and as a result, appropriations need to be increased to \$26,250 to pay compensation payments to NWLSD and tax collection fees to the county auditor.
- 4101 (Capital Project- Fire Fund) - This increase in appropriations is necessary to account for a \$387,860 payment made as part of a cyberattack. Due to the efforts of the Township's Police, Finance, and IT staff, the Township recovered all of the funds.

The Board of Trustees of Colerain Township, County of Hamilton, State of Ohio, met in regular session at ____ p.m., on the ____ day of June 2024, at the Colerain Township Administration Building, 4200 Springdale Road, Cincinnati, Ohio 45251, with the following members present:

Ms. Ulrich, Mr. Daniel Unger, Mr. Wahlert

Trustee _____ introduced the following resolution and moved its adoption:

RESOLUTION NO. ____ - 24

**RESOLUTION AUTHORIZING THE ADOPTION OF AMENDED APPROPRIATIONS
AND THE 2024 STRATEGIC PLAN AND BUDGET**

NOW, THEREFORE, BE IT RESOLVED by the Board of Trustees of Colerain Township, Hamilton County, Ohio, does hereby agree to:

Section 1: Authorize the Colerain Township Fiscal Officer to prepare and submit a schedule of amended appropriations for the year ending December 31, 2024, to the Hamilton County Budget Commission, as follows:

FUND	FUND NAME	2024 APPROPRIATIONS
1000	General Fund	\$8,610,100
2011	Motor Vehicle License Tax	\$564,400
2021	Gasoline Tax	\$476,799
2031	Road and Bridge	\$1,964,537
2081	Police District	\$11,965,300
2111	Fire District	\$17,649,523
2181	Zoning	\$550,765
2231	Permissive Motor Vehicle License Tax	\$1,048,360
2261	Law Enforcement Trust	\$90,000
2271	Enforcement and Education	\$4,000
2274	American Rescue Plan	\$368,714
2281	Ambulance And Emergency Medical Services	\$1,508,042
2401	Special Assessment - Lighting Districts	\$167,360
2402	CDBG Sidewalk Maintenance Fund	\$30,000
2901	TIF - Kroger	\$604,000
2902	Recycling Incentive	\$122,790
2903	TIF - Colerain Towne Center	\$1,550,000
2904	TIF - Duke	\$149,000
2905	TIF- Northridge	\$2,000
2906	Sidewalk Waiver	\$30,000
2907	TIF- Dunlap Grove	\$76,000
2908	CDBG Com Dev Block Grant	\$92,504
2910	TIF- Zillig	\$1,000
2911	Parks & Services	\$1,540,992
2912	Community Center	\$316,735

2913	TIF- Abbeytown	\$98,700
2914	TIF- Hunter's Ridge	\$63,500
2915	TIF- Lake Gloria	\$32,250
2916	TIF- Crosley Meadows	\$105,000
2917	TIF- Copper Creek	\$26,250
2918	TIF- Pottinger	--
3101	Bond Retirement	\$1,181,425
4101	Capital Project- Fire Fund	\$1,202,140
6001	Self-Insurance Fund	\$2,138,850

Trustee _____ seconded the Resolution, and the roll being called upon the question of its adoption, the vote resulted as follows:

Vote Record: Ms. Ulrich _____, Mr. Unger _____, Mr. Wahlert _____,

ADOPTED this _____ day of June 2024.

BOARD OF TRUSTEES:

Cathy Ulrich, Trustee

Daniel Unger, Trustee

Matthew Wahlert, Trustee

ATTEST:

Jeff Baker,
Fiscal Officer

Resolution prepared by and approved as to form:

Scott Sollmann (0081467)
Colerain Township Law Director
5300 Socialville Foster Rd., Suite 200
Mason, OH 45040 (513) 583-4200

AUTHENTICATION

This is to certify that this Resolution was duly passed and filed with the Colerain Township Fiscal Officer this ____ day of June 2024. I hereby certify that funds are available and have been lawfully appropriated, authorized or directed for the purposes identified in the attached resolution, and are in the treasury or in the process of collection to the credit of the appropriate fund, free from any previous encumbrance.

Jeff Baker,
Colerain Township Fiscal Officer

ADMINISTRATION

Department: Administration
Department Director: Tiphonie Mays, Assistant Administrator

Strategic Plan Goal: Strategic Goal #5: Continuously Improve the Operations of the Township

Motion to Authorize Township Administrator to Execute an Agreement with Anthem for Health Insurance for 2024-2025 Plan Year

Recommend ADOPTION of the Motion.

Rationale:

Annually, the Township will work with its health care broker, McGohen Brabender to review the employee benefits program and to negotiate a new plan for employee medical, dental, vision, and life insurance. There were only two benefit packages that were up for renewal this upcoming plan year, medical and dental. Based on the review of the marketplace, staff is recommending Anthem as the Third Party Administrator and HCC as the Stop Loss Coverage Provider. By selecting this package, the Township should be able to keep plan rates flat for the Township and all employees in the 2024-2025 health plan year.

It is important that the Township take action on these items today, as open enrollment for employees will need to begin prior to the next Board of Trustee meeting in order to comply with federal guidelines.

Your summary of benefits



Anthem® Blue Cross and Blue Shield

Colerain Township

Your Plan: Anthem Blue Access PPO HSA 2000

Your Network: Blue Access

Effective Date: 08/01/2024

Visits with Virtual Care-Only Providers	Cost through our mobile app and website
Primary Care, and medical services for urgent/acute care	No charge after deductible is met
Mental Health & Substance Use Disorder Services	No charge after deductible is met
Specialist care	No charge after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
Overall Deductible	\$2,000 person / \$4,000 family	\$4,000 person / \$8,000 family
Overall Out-of-Pocket Limit	\$2,000 person / \$4,000 family	\$8,000 person / \$16,000 family

The family deductible and out-of-pocket limit are non-embedded, meaning the cost shares of all family members apply to one family deductible and one family out-of-pocket limit. The per person deductible and per person out-of-pocket limit apply to individuals enrolled under single-only coverage.

All medical and prescription drug deductibles, copayments and coinsurance apply to the out-of-pocket limit (excluding Non-Network Human Organ and Tissue Transplant (HOTT), Cellular and Gene Therapy services).

In-Network and Non-Network deductibles and out-of-pocket limit amounts are separate and do not accumulate toward each other.

Doctor Visits (virtual and office) *You are encouraged to select a Primary Care Physician (PCP).*

Primary Care (PCP) and Mental Health and Substance Use Disorder Services <i>virtual and office</i>	No charge after deductible is met	20% coinsurance after deductible is met
Specialist Care <i>virtual and office</i>	No charge after deductible is met	20% coinsurance after deductible is met
<u>Other Practitioner Visits</u>		
Routine Maternity Care (Prenatal and Postnatal)	No charge after deductible is met	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
Retail Health Clinic <i>for routine care and treatment of common illnesses; usually found in major pharmacies or retail stores.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Manipulation Therapy <i>Coverage is limited to 12 visits per benefit period.</i>	No charge after deductible is met	20% coinsurance after deductible is met
<u>Other Services in an Office</u>		
Allergy Testing	No charge after deductible is met	20% coinsurance after deductible is met
Prescription Drugs <i>Dispensed in the office</i>	No charge after deductible is met	20% coinsurance after deductible is met
Surgery	No charge after deductible is met	20% coinsurance after deductible is met
Preventive care / screenings / immunizations	No charge	20% coinsurance after deductible is met
Preventive Care for Chronic Conditions <i>per IRS guidelines</i>	No charge	20% coinsurance after deductible is met
<u>Diagnostic Services</u>		
Lab		
Office	No charge after deductible is met	20% coinsurance after deductible is met
Outpatient Hospital	No charge after deductible is met	20% coinsurance after deductible is met
X-Ray		
Office	No charge after deductible is met	20% coinsurance after deductible is met
Outpatient Hospital	No charge after deductible is met	20% coinsurance after deductible is met
Advanced Diagnostic Imaging <i>for example: MRI, PET and CAT scans</i>		
Office	No charge after deductible is met	20% coinsurance after deductible is met
Outpatient Hospital	No charge after deductible is met	20% coinsurance after deductible is met
<u>Emergency and Urgent Care</u>		
Urgent Care	No charge after deductible is met	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
Emergency Room Facility Services	No charge after deductible is met	Covered as In-Network
Emergency Room Doctor and Other Services	No charge after deductible is met	Covered as In-Network
Ambulance <i>Authorized Non-Network non-emergency ambulance services are limited to an Anthem maximum payment of \$50,000 per trip.</i>	No charge after deductible is met	Covered as In-Network
Outpatient Mental Health and Substance Use Disorder Services at a Facility		
Facility Fees	No charge after deductible is met	20% coinsurance after deductible is met
Doctor Services	No charge after deductible is met	20% coinsurance after deductible is met
<u>Outpatient Surgery</u>		
Facility Fees		
Hospital	No charge after deductible is met	20% coinsurance after deductible is met
Physician and other services including surgeon fees		
Hospital	No charge after deductible is met	20% coinsurance after deductible is met
<u>Hospital (Including Maternity, Mental Health and Substance Use Disorder Services)</u>		
Facility Fees	No charge after deductible is met	20% coinsurance after deductible is met
Human Organ and Tissue Transplants <i>Cornea transplants are treated the same as any other illness and subject to the medical benefits.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Physician and other services including surgeon fees	No charge after deductible is met	20% coinsurance after deductible is met
Home Health Care <i>Coverage is limited to 100 visits per benefit period. Limits are combined for all home health services.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Rehabilitation and Habilitation services including physical, occupational and speech therapies. <i>Coverage for occupational therapy is limited to 20 visits per benefit period, physical therapy is limited to 20 visits per benefit period and speech therapy is limited to 20 visits per benefit period.</i>		

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
Office	No charge after deductible is met	20% coinsurance after deductible is met
Outpatient Hospital	No charge after deductible is met	20% coinsurance after deductible is met
Pulmonary rehabilitation office and outpatient hospital <i>Coverage is limited to 20 visits per benefit period.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Cardiac rehabilitation office and outpatient hospital <i>Coverage is limited to 36 visits per benefit period.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Dialysis/Hemodialysis office and outpatient hospital	No charge after deductible is met	20% coinsurance after deductible is met
Chemo/Radiation Therapy office and outpatient hospital	No charge after deductible is met	20% coinsurance after deductible is met
Skilled Nursing Care (facility) <i>Coverage for Skilled Nursing and Inpatient Rehabilitation facility (includes services in an outpatient day rehabilitation program) is limited to 150 days combined per benefit period.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Inpatient Hospice	No charge after deductible is met	20% coinsurance after deductible is met
Durable Medical Equipment	No charge after deductible is met	20% coinsurance after deductible is met
Prosthetic Devices <i>Coverage for wigs is limited to 1 item after cancer treatment per benefit period.</i>	No charge after deductible is met	20% coinsurance after deductible is met
Covered Prescription Drug Benefits	Cost if you use an In-Network Pharmacy	Cost if you use a Non-Network Pharmacy
Pharmacy Deductible	Combined with In-Network medical deductible	Combined with Non-Network medical deductible
Pharmacy Out-of-Pocket Limit	Combined with In-Network medical out-of-pocket limit	Combined with Non-Network medical out-of-pocket limit
Prescription Drug Coverage Network: Base Network Drug List: Essential Drugs not included on the Essential drug list will not be covered.		

Covered Prescription Drug Benefits	Cost if you use an In-Network Pharmacy	Cost if you use a Non-Network Pharmacy
Day Supply Limits: Retail Pharmacy 30 day supply (cost shares noted below) Retail 90 Pharmacy 90 day supply (3 times the 30 day supply cost share(s) charged at In-Network Retail Pharmacies noted below applies). Home Delivery Pharmacy 90 day supply (maximum cost shares noted below). Maintenance medications are available through CarelonRx Pharmacy. You will need to call us on the number on your ID card to sign up when you first use the service. Specialty Pharmacy 30 day supply (cost shares noted below for retail and home delivery apply). We may require certain drugs with special handling, provider coordination or patient education be filled by our designated specialty pharmacy.		
Tier 1 - Typically Generic	0% coinsurance after deductible is met (retail and home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Tier 2 – Typically Preferred Brand	0% coinsurance after deductible is met (retail and home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Tier 3 - Typically Non-Preferred Brand	0% coinsurance after deductible is met (retail and home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Tier 4 - Typically Specialty (brand and generic)	0% coinsurance after deductible is met (retail and home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Covered Vision Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
<i>This is a brief outline of your vision coverage. To receive the In-Network benefit, you must use a Blue View Vision Provider. Only children's vision services count towards your out-of-pocket limit.</i>		
Children's Vision exam (up to age 19) <i>Limited to 1 exam per benefit period.</i>	No charge	\$0 copayment up to plan's Maximum Allowed Amount
Adult Vision exam (age 19 and older) <i>Limited to 1 exam per benefit period.</i>	No charge	Reimbursed Up to \$42

Notes:

- Dependent Age Limit: to the end of the month in which the child attains age 26.
- Members are encouraged to always obtain prior approval when using Non-Network Providers. Precertification will help the member know if the services are considered not medically necessary.

- No charge means no deductible/copayment/coinsurance up to the maximum allowable amount. 0% means no coinsurance up to the maximum allowable amount. However, when choosing a Non-Network Provider, the member is responsible for any balance due after the plan payment.
- If you have an office visit with your Primary Care Physician or Specialist at an Outpatient Facility (e.g., Hospital or Ambulatory Surgical Facility), benefits for Covered Services will be paid under "Outpatient Facility Services".
- Costs may vary by the site of service. Other cost shares may apply depending on services provided. Check your Certificate of Coverage for details.
- Benefit Period- Plan Year.
- The limits for physical, occupational, and speech therapy, if any apply to this plan, will not apply if you get care as part of the Mental Health and Substance Use Disorder benefit.
- Ohio's House Bill 388 and the Federal No Surprises Act establish patient protections including from Non-Network Providers' surprise bills ("balance billing") for Emergency Care and other specified items or services. We will comply with these new state and federal requirements including how we process claims from certain Non-Network Providers.

This summary of benefits is a brief outline of coverage, designed to help you with the selection process. This summary does not reflect each and every benefit, exclusion and limitation which may apply to the coverage. For more details, important limitations and exclusions, please review the formal Evidence of Coverage (EOC). If there is a difference between this summary and the Evidence of Coverage (EOC), the Evidence of Coverage (EOC), will prevail.

Anthem Blue Cross and Blue Shield is the trade name of Community Insurance Company. Independent licensee of the Blue Cross and Blue Shield Association. ® ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

Questions: (833) 639-1634 or visit us at www.anthem.com

Your summary of benefits



Your Plan: Anthem Blue Access PPO HSA 2000

Your Network: Blue Access

This summary of benefits is intended to be a brief outline of coverage. The entire provisions of benefits and exclusions are contained in the Group Contract, Certificate, and Schedule of Benefits. In the event of a conflict between the Group Contract and this description, the terms of the Group Contract will prevail.

By signing this Summary of Benefits, I agree to the benefits for the product selected as of the effective date indicated.

Authorized group signature (if applicable)	Date
Underwriting signature (if applicable)	Date

Get help in your language

Curious to know what all this says? We would be too. Here's the English version:

If you have any questions about this document, you have the right to get help and information in your language at no cost. To talk to an interpreter, call (833) 639-1634

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

(TTY/TDD: 711)

Arabic (العربية): إذا كان لديك أي استفسارات بشأن هذا المستند، فيحق لك الحصول على المساعدة والمعلومات بلغتك دون مقابل. للتحدث إلى مترجم، اتصل على (833) 639-1634.

Armenian (հայերեն): Եթե այս փաստաթղթի հետ կապված հարցեր ունեք, դուք իրավունք ունեք անվճար ստանալ օգնություն և տեղեկատվություն ձեր լեզվով: Թարգմանչի հետ խոսելու համար զանգահարեք հետևյալ հեռախոսահամարով՝ (833) 639-1634:

Chinese(中文): 如果您對本文件有任何疑問，您有權使用您的語言免費獲得協助和資訊。如需與譯員通話，請致電(833) 639-1634。

Farsi (فارسی): در صورتی که سؤالی پیرامون این سند دارید، این حق را دارید که اطلاعات و کمک را بدون هیچ هزینه ای به زبان مادریتان دریافت کنید. برای گفتگو با یک مترجم شفاهی، با شماره (833) 639-1634 تماس بگیرید.

French (Français): Si vous avez des questions sur ce document, vous avez la possibilité d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour parler à un interprète, appelez le (833) 639-1634.

Haitian Creole (Kreyòl Ayisyen): Si ou gen nenpòt kesyon sou dokiman sa a, ou gen dwa pou jwenn èd ak enfòmasyon nan lang ou gratis. Pou pale ak yon entèprèt, rele (833) 639-1634.

Italian (Italiano): In caso di eventuali domande sul presente documento, ha il diritto di ricevere assistenza e informazioni nella sua lingua senza alcun costo aggiuntivo. Per parlare con un interprete, chiami il numero (833) 639-1634.

Japanese (日本語): この文書についてなにか不明な点があれば、あなたにはあなたの言語で無料で支援を受け情報を得る権利があります。通訳と話すには、(833) 639-1634 にお電話ください。

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Your summary of benefits



Anthem® Blue Cross and Blue Shield

Colerain Township

Your Plan: Colerain Township: Anthem Blue Access PPO HSA 3200

Your Network: Blue Access

Effective Date: 08/01/2024

Visits with Virtual Care-Only Providers	Cost through our mobile app and website
Primary Care, and medical services for urgent/acute care	No charge after deductible is met
Mental Health & Substance Use Disorder Services	No charge after deductible is met
Specialist care	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
Overall Deductible	\$3,200 person / \$6,400 family	\$7,500 person / \$15,000 family
Overall Out-of-Pocket Limit	\$5,000 person / \$10,000 family	\$10,000 person / \$20,000 family

The family deductible and out-of-pocket limit are embedded, meaning the cost shares of one family member will be applied to the per person deductible and per person out-of-pocket limit; in addition, amounts for all covered family members apply to both the family deductible and family out-of-pocket limit. No one member will pay more than the per person deductible or per person out-of-pocket limit.

All medical and prescription drug deductibles, copayments and coinsurance apply to the out-of-pocket limit (excluding Non-Network Human Organ and Tissue Transplant (HOTT), Cellular and Gene Therapy services).

In-Network and Non-Network deductibles and out-of-pocket limit amounts are separate and do not accumulate toward each other.

Doctor Visits (virtual and office) *You are encouraged to select a Primary Care Physician (PCP).*

Primary Care (PCP) and Mental Health and Substance Use Disorder Services <i>virtual and office</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Specialist Care <i>virtual and office</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
<u>Other Practitioner Visits</u>		
Routine Maternity Care (Prenatal and Postnatal)	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Retail Health Clinic <i>for routine care and treatment of common illnesses; usually found in major pharmacies or retail stores.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Manipulation Therapy <i>Coverage is limited to 12 visits per benefit period.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
<u>Other Services in an Office</u>		
Allergy Testing	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Prescription Drugs <i>Dispensed in the office</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Surgery	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Preventive care / screenings / immunizations	No charge	50% coinsurance after deductible is met
Preventive Care for Chronic Conditions <i>per IRS guidelines</i>	No charge	50% coinsurance after deductible is met
<u>Diagnostic Services</u>		
Lab		
Office	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Outpatient Hospital	20% coinsurance after deductible is met	50% coinsurance after deductible is met
X-Ray		
Office	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Outpatient Hospital	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Advanced Diagnostic Imaging <i>for example: MRI, PET and CAT scans</i>		
Office	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Outpatient Hospital	20% coinsurance after deductible is met	50% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
<u>Emergency and Urgent Care</u> Urgent Care Emergency Room Facility Services Emergency Room Doctor and Other Services Ambulance <i>Authorized Non-Network non-emergency ambulance services are limited to an Anthem maximum payment of \$50,000 per trip.</i>	20% coinsurance after deductible is met 20% coinsurance after deductible is met 20% coinsurance after deductible is met 20% coinsurance after deductible is met	50% coinsurance after deductible is met Covered as In-Network Covered as In-Network Covered as In-Network
<u>Outpatient Mental Health and Substance Use Disorder Services at a Facility</u> Facility Fees Doctor Services	20% coinsurance after deductible is met 20% coinsurance after deductible is met	50% coinsurance after deductible is met 50% coinsurance after deductible is met
<u>Outpatient Surgery</u> Facility Fees Hospital Physician and other services including surgeon fees Hospital	20% coinsurance after deductible is met 20% coinsurance after deductible is met	50% coinsurance after deductible is met 50% coinsurance after deductible is met
<u>Hospital (Including Maternity, Mental Health and Substance Use Disorder Services)</u> Facility Fees Human Organ and Tissue Transplants <i>Cornea transplants are treated the same as any other illness and subject to the medical benefits.</i> Physician and other services including surgeon fees	20% coinsurance after deductible is met 20% coinsurance after deductible is met 20% coinsurance after deductible is met	50% coinsurance after deductible is met 50% coinsurance after deductible is met 50% coinsurance after deductible is met
Home Health Care <i>Coverage is limited to 100 visits per benefit period. Limits are combined for all home health services.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
Rehabilitation and Habilitation services <i>including physical, occupational and speech therapies.</i> <i>Coverage for occupational therapy is limited to 20 visits per benefit period, physical therapy is limited to 20 visits per benefit period and speech therapy is limited to 20 visits per benefit period.</i>		
Office	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Outpatient Hospital	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Pulmonary rehabilitation <i>office and outpatient hospital</i> <i>Coverage is limited to 20 visits per benefit period.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Cardiac rehabilitation <i>office and outpatient hospital</i> <i>Coverage is limited to 36 visits per benefit period.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Dialysis/Hemodialysis <i>office and outpatient hospital</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Chemo/Radiation Therapy <i>office and outpatient hospital</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Skilled Nursing Care (facility) <i>Coverage for Skilled Nursing and Inpatient Rehabilitation facility (includes services in an outpatient day rehabilitation program) is limited to 150 days combined per benefit period.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Inpatient Hospice	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Durable Medical Equipment	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Prosthetic Devices <i>Coverage for wigs is limited to 1 item after cancer treatment per benefit period.</i>	20% coinsurance after deductible is met	50% coinsurance after deductible is met
Covered Prescription Drug Benefits	Cost if you use an In-Network Pharmacy	Cost if you use a Non-Network Pharmacy
Pharmacy Deductible	Combined with In-Network medical deductible	Combined with Non-Network medical deductible
Pharmacy Out-of-Pocket Limit	Combined with In-Network medical out-	Combined with Non-Network medical out-

Covered Prescription Drug Benefits	Cost if you use an In-Network Pharmacy	Cost if you use a Non-Network Pharmacy
	of-pocket limit	of-pocket limit
Prescription Drug Coverage Network: <i>Base Network</i> Drug List: <i>Essential Drugs not included on the Essential drug list will not be covered.</i>		
Day Supply Limits: Retail Pharmacy 30 day supply (cost shares noted below) Retail 90 Pharmacy 90 day supply (3 times the 30 day supply cost share(s) charged at In-Network Retail Pharmacies noted below applies). Home Delivery Pharmacy 90 day supply (maximum cost shares noted below). Maintenance medications are available through CarelonRx Pharmacy. You will need to call us on the number on your ID card to sign up when you first use the service. Specialty Pharmacy 30 day supply (cost shares noted below for retail and home delivery apply). We may require certain drugs with special handling, provider coordination or patient education be filled by our designated specialty pharmacy.		
Tier 1 - Typically Generic	\$10 copay per prescription after deductible is met (retail) and \$20 copay per prescription after deductible is met (home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Tier 2 – Typically Preferred Brand	\$35 copay per prescription after deductible is met (retail) and \$88 copay per prescription after deductible is met (home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Tier 3 - Typically Non-Preferred Brand	\$60 copay per prescription after deductible is met (retail) and \$150 copay per prescription after deductible is met (home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)
Tier 4 - Typically Specialty (brand and generic)	25% coinsurance up to \$250 per prescription after deductible is met (retail and home delivery)	50% coinsurance after deductible is met (retail) and Not covered (home delivery)

Covered Vision Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
<i>This is a brief outline of your vision coverage. To receive the In-Network benefit, you must use a Blue View Vision Provider. Only children's vision services count towards your out-of-pocket limit.</i>		
Children's Vision exam (up to age 19) <i>Limited to 1 exam per benefit period.</i>	No charge	\$0 copayment up to plan's Maximum Allowed Amount
Adult Vision exam (age 19 and older) <i>Limited to 1 exam per benefit period.</i>	No charge	Reimbursed Up to \$42

Notes:

- Dependent Age Limit: to the end of the month in which the child attains age 26.
- Members are encouraged to always obtain prior approval when using Non-Network Providers. Precertification will help the member know if the services are considered not medically necessary.
- No charge means no deductible/copayment/coinsurance up to the maximum allowable amount. 0% means no coinsurance up to the maximum allowable amount. However, when choosing a Non-Network Provider, the member is responsible for any balance due after the plan payment.
- If you have an office visit with your Primary Care Physician or Specialist at an Outpatient Facility (e.g., Hospital or Ambulatory Surgical Facility), benefits for Covered Services will be paid under "Outpatient Facility Services".
- Costs may vary by the site of service. Other cost shares may apply depending on services provided. Check your Certificate of Coverage for details.
- Benefit Period-Plan Year.
- The limits for physical, occupational, and speech therapy, if any apply to this plan, will not apply if you get care as part of the Mental Health and Substance Use Disorder benefit.
- Ohio's House Bill 388 and the Federal No Surprises Act establish patient protections including from Non-Network Providers' surprise bills ("balance billing") for Emergency Care and other specified items or services. We will comply with these new state and federal requirements including how we process claims from certain Non-Network Providers.

This summary of benefits is a brief outline of coverage, designed to help you with the selection process. This summary does not reflect each and every benefit, exclusion and limitation which may apply to the coverage. For more details, important limitations and exclusions, please review the formal Evidence of Coverage (EOC). If there is a difference between this summary and the Evidence of Coverage (EOC), the Evidence of Coverage (EOC), will prevail.

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Questions: (833) 639-1634 or visit us at www.anthem.com

Your summary of benefits



Your Plan: Colerain Township: Anthem Blue Access PPO 3200
Your Network: Blue Access

This summary of benefits is intended to be a brief outline of coverage. The entire provisions of benefits and exclusions are contained in the Group Contract, Certificate, and Schedule of Benefits. In the event of a conflict between the Group Contract and this description, the terms of the Group Contract will prevail.

By signing this Summary of Benefits, I agree to the benefits for the product selected as of the effective date indicated.

Authorized group signature (if applicable)	Date
Underwriting signature (if applicable)	Date

Get help in your language

Curious to know what all this says? We would be too. Here's the English version:

If you have any questions about this document, you have the right to get help and information in your language at no cost. To talk to an interpreter, call (833) 639-1634

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

(TTY/TDD: 711)

Arabic (العربية): إذا كان لديك أي استفسارات بشأن هذا المستند، فيحق لك الحصول على المساعدة والمعلومات بلغتك دون مقابل. للتحدث إلى مترجم، اتصل على (833) 639-1634.

Armenian (հայերեն). Եթե այս փաստաթղթի հետ կապված հարցեր ունեք, դուք իրավունք ունեք անվճար ստանալ օգնություն և տեղեկատվություն ձեր լեզվով: Թարգմանչի հետ խոսելու համար զանգահարեք հետևյալ հեռախոսահամարով՝ (833) 639-1634:

Chinese(中文): 如果您對本文件有任何疑問，您有權使用您的語言免費獲得協助和資訊。如需與譯員通話，請致電(833) 639-1634。

Farsi (فارسی): در صورتی که سؤالی پیرامون این سند دارید، این حق را دارید که اطلاعات و کمک را بدون هیچ هزینه ای به زبان مادریتان دریافت کنید. برای گفتگو با یک مترجم شفاهی، با شماره (833) 639-1634 تماس بگیرید.

French (Français): Si vous avez des questions sur ce document, vous avez la possibilité d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour parler à un interprète, appelez le (833) 639-1634.

Haitian Creole (Kreyòl Ayisyen): Si ou gen nenpòt kesyon sou dokiman sa a, ou gen dwa pou jwenn èd ak enfòmasyon nan lang ou gratis. Pou pale ak yon entèprèt, rele (833) 639-1634.

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ADMINISTRATION

Department: Administration
Department Director: Tiphannie Mays, Assistant Administrator

Strategic Plan Goal: Strategic Goal #5: Continuously Improve the Operations of the Township

Motion Authorizing the Township Administrator to Execute an agreement with Ameritas for Employee Dental Benefits

Recommend ADOPTION of the Motion.

Rationale:

Annually, the Township will work with its health care broker, McGohen Brabender to review the employee benefits program and to negotiate a new plan for employee medical, dental, vision, and life insurance. Based on the review of the marketplace, staff is recommending Ameritas as the provider for employee dental services. This contract will result in a one-year rate lock that is 17% less than our current dental plan costs.

It is important that the Township take action on these items today, as open enrollment for employees will need to begin prior to the next Board of Trustee meeting in order to comply with federal guidelines.

Plan 1: Dental Plan Summary

Effective Date: 8/1/2024

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	80%
Deductible	\$25 Lifetime Type 2,3 Waived Type 1
Maximum (per person)	No Family Maximum \$1,000 per policy year
Allowance	Discounted Fee
Waiting Period	None
Annual Eye Exam	None
Annual Open Enrollment	Included

Orthodontia Summary - Child Only Coverage

Allowance	U&C
Plan Benefit	60%
Lifetime Maximum (per person)	\$1,500*
Waiting Period	None

*Maximum not reduced by prior carrier payment.

Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

Type 1	Type 2	Type 3
- Routine Exam (2 per benefit period) - Bitewing X-rays (1 per benefit period) - Full Mouth/Panoramic X-rays (1 in 5 years) - Periapical X-rays - Cleaning (2 per benefit period) - Fluoride for Children 14 and under (1 per benefit period) - Sealants (age 14 and under)	- Space Maintainers - Fillings for Cavities - Restorative Composites - Endodontics (nonsurgical) - Endodontics (surgical) - Periodontics (nonsurgical) - Periodontics (surgical) - Denture Repair - Simple Extractions - Complex Extractions - Anesthesia	- Onlays - Crowns (1 in 5 years per tooth) - Crown Repair - Implants - Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years)

Ameritas Information

We're Here to Help

This plan was designed specifically for the associates of **Colerain Township**. At Ameritas Group, we do more than provide coverage - we make sure there's always a friendly voice to explain your benefits, listen to your concerns, and answer your questions. Our customer relations associates will be pleased to assist you 7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. You can speak to them by calling toll-free: 800-487-5553. For plan information any time, access our automated voice response system or go online to ameritas.com.

Rx Savings

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance.

To receive this Rx discount, Ameritas plan members just need to visit us at ameritas.com and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

Eyewear Savings

Ameritas plan members may receive up to 10% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance; it is available to members at no additional cost to their plan premium.

To receive the eyewear savings identification card, Ameritas plan members can visit ameritas.com and sign-in (or create) a secure member account. Members must present the Ameritas Eyewear Savings Card at time of purchase to receive the discount.

Hearing Savings

With your Ameritas plan, you can receive hearing aid discounts through Great Hearing Benefits at their 4,500+ hearing care locations nationwide. Call 877-683-9495 for your free hearing consultation today. This savings arrangement is not insurance. It is available to members at no additional cost to their plan premium.

Highlights include: hearing exam for only \$50 (saves you \$100 off the industry average of \$150), up to 50% off retail pricing on today's top hearing technology, plus a satisfaction guarantee and warranty service. Visit greatearingbenefits.com/ameritas to learn more.

Dental Network Information

To find a provider, visit ameritas.com and select **FIND A PROVIDER**, then **DENTAL**. Enter your criteria to search by location or for a specific dentist or practice. California Residents: When prompted to select your network, choose the Ameritas Network found on your ID Card or contact Customer Connections at 800-487-5553.

Your provider network is Ameritas Classic and Plus Network.

Pretreatment

While we don't require a pretreatment authorization form for any procedure, we recommend them for any dental work you consider expensive. As a smart consumer, it's best for you to know your share of the cost up front. Simply ask your dentist to submit the information for a pretreatment estimate to our customer relations department. We'll inform both you and your dentist of the exact amount your insurance will cover and the amount that you will be responsible for. That way, there won't be any surprises once the work has been completed.

Open Enrollment

If a member does not elect to participate when initially eligible, the member may elect to participate at the policyholder's next enrollment period. This enrollment period will be held each year and those who elect to participate in this policy at that time will have their insurance become effective on August 1. If you do not enroll during your company's open enrollment period, then you will be subject to the Late Entrant Provision.

Late Entrant Provision

We strongly encourage you to sign up for coverage when you are initially eligible. If you choose not to sign up during this initial enrollment period, you will become a late entrant. Late entrants will be eligible for only exams, cleanings, and fluoride applications for the first 12 months they are covered.

Section 125

This plan is provided as part of the Policyholder's Section 125 Plan. Each employee has the option under the Section 125 Plan of participating or not participating in this plan. If an employee does not elect to participate when initially eligible, he/she may elect to participate at the Policyholder's next Annual Election Period.

Dental Cost Estimator

Members can use our dental cost estimator at any time to find average procedure charges in their area. The estimates do not include network discounts or plan benefits. Find the dental cost estimator at ameritas.com/applications/group/estimator.

After coverage begins, members can view average in-network charges in their secure member account. Members also may ask their dentist's office to submit a pretreatment estimate so they can see exactly how a proposed service would be covered and avoid any surprises. The pretreatment estimate is based on their plan benefits.

Worldwide Support

If a member has a dental emergency outside the U.S., AXA Assistance can help. AXA provides credible provider referrals and can even help with making the appointment. Providers referred by AXA are not members of the Ameritas network. AXA contact information is available in the secure member account.

Language Services

We recognize the importance of communicating with our growing number of multilingual customers. That is why we offer a language assistance program that gives you access to: Spanish-speaking claims contact center representatives, telephone interpretation services in a wide range of languages, online dental network provider search in Spanish and a variety of Spanish documents such as enrollment forms, claim forms and certificates of insurance.

This document is a highlight of plan benefits provided by Ameritas Life Insurance Corp. as selected by your employer. It is not a certificate of insurance and does not include exclusions and limitations. For exclusions and limitations, or a complete list of covered procedures, contact your benefits administrator.

ADMINISTRATION

Department: Administration
Department Director: Tiphannie Mays, Assistant Administrator

Strategic Plan Goal: Strategic Goal #4: Continuously Improve the Operations of the Township

Motion to Set Rates for Employee Health Care Plans and Packages

Recommend ADOPTION of the Motion.

Rationale:

As part of the Townships renewal process, it is recommended that all plans and rates be held flat, consistent with this prior year.

There is one change in the Health Savings Account limit for embedded high deductible health plans (the Township's Gold packages) by the Internal Revenue Service. The minimum deductible has been increased by the IRS in an effort to adjust to inflation.

Plan Name/Type	Current Enrollment	Current Rate
<i>Platinum</i>		
Employee	36	665.62
Employee/Spouse	4	1,384.50
Employee/Child(ren)	43	1,238.06
Family	29	2,023.49
<i>Gold</i>		
Employee	25	495.68
Employee/Spouse	3	1,031.00
Employee/Child(ren)	11	921.96
Family	9	1,506.85
Annual Cost	160	2,167,275.84
Change		

On the above chart, the current rates(for 2023) show the FIE r reflected on the right side of the spreadsheet.

On the above chart, the 2024 renewal rates show the FIE rates t hold rates flat again this year for the employees. The COBRA r those flat too.

Bi-Monthly Premiums
Employee
Employee / Spouse
Employee / Child(ren)
Family

DENTAL
Employee
Employee / Spouse

Employee / Child(ren)
Family

2024 Renewal Rate	Cobra Rates
	–
622.24	634.68
1,294.28	1,320.17
1,157.38	1,180.53
1,891.63	1,929.46
–	–
–	–
463.38	472.65
963.81	983.09
861.88	879.12
1,408.66	1,436.83
	–
2,026,043.04	
–6.97%	

EE RATES/Month

Platinum

Employee

Employee/Spouse

Employee/Child(ren)

Family

EE Gold Rates/Month

Employee

Employee/Spouse

Employee/Child(ren)

Family

EE Gold Rates/Bi-Monthly

rates based off the projection. Rates were held flat and a

based off the projection. Decision was made to

rates are based off the projected decrease but you can keep

ER RATES/MONTH

Platinum

Employee

Employee/Spouse

Employee/Child(ren)

Family

Gold

Employee

Employee/Spouse

Employee/Child(ren)

Family

Platinum Plan		Gold 0	Gold 10
\$66.12		\$0.00	\$24.62
\$137.53		\$0.00	\$51.21
\$122.98		\$0.00	\$45.79
\$201.00		\$0.00	\$74.84

Monthly Cost	ER Monthly cost	EE monthly cost	EE Bi-monthly pr
\$22.24	\$17.79	\$4.45	\$2.22
\$70.20	\$56.16	\$14.04	\$7.02

\$70.20	\$56.16	\$14.04	\$7.02
\$70.20	\$56.16	\$14.04	\$7.02

Month	Bi-Monthly
132.24	66.12
275.05	137.53
245.96	122.98
402.00	201.00

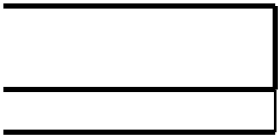
0%	10%	20%
0	49.24	98.47
0	102.41	204.82
0	91.58	183.16
0	149.68	299.36
0	24.62	49.24
0	51.21	102.41
0	45.79	91.58
0	74.84	149.68

490.00
1,019.23
911.42
1,489.63

0%	10%	20%
463.38	414.14	364.91
963.81	861.40	758.99
861.88	770.30	678.72
1,408.66	1,258.98	1,109.30

	Gold 20	Gold 30
	\$49.24	\$73.86
	\$102.41	\$153.62
	\$91.58	\$137.37
	\$149.68	\$224.52

Premium



30%
147.71
307.24
274.74
449.04

73.86
153.62
137.37
224.52

30%
315.67
656.57
587.14
959.62

ADMINISTRATION

Department: Administration
Department Director: Jeff McElravy, Assistant Administrator

Strategic Plan Goal: Strategic Goal #1: Chart a Pathway to Long-Term Financial Stability

First Reading - Resolution Adopting Financial Policies for Fraud Prevention

No action is requested of the Board.

Rationale:

Government's across the United States continue to see increases in external fraud that results in the loss of taxpayer dollars. The Ohio Attorney General recently issued additional guidance related to fraud and how it will be handled by their offices. In response to this guidance, staff took a look at the existing fraud policies and determined it would be beneficial to revise and adopt the following three policies for the Township:

- Methods of Payment
- Electronic Vendor Fraud
- Bank Account Fraud Prevention

These policies will help to provide clear direction and strategy to staff to aid in the prevention of fraud and protection of taxpayer dollars. These policies were drafted based on best practices from the Government Finance Officers Association.

The Board of Trustees of Colerain Township, County of Hamilton, State of Ohio,
met in regular session at _____ p.m., on the _____ day of _____, 2024, at the Colerain
Township Administration Building, 4200 Springdale Road, Cincinnati, Ohio 45251, with the
following members present:

Cathy Ulrich, Dan Unger, Matthew Wahlert

Trustee _____ introduced the following resolution and moved its
adoption:

RESOLUTION NO. _____

RESOLUTION ADOPTING FRAUD PREVENTION POLICIES

WHEREAS, the Board of Trustees sets the policy direction for Colerain Township
employees and residents; and;

WHEREAS, Administration and all departments intend on following the direction set by
the Trustees; and;

WHEREAS, the attached three policies will aid the Township in preventing fraud and
help establish a strategy to protect tax payer dollars.

NOW, THEREFORE, BE IT RESOLVED by the Board of Trustees of Colerain
Township, Hamilton County, Ohio, as follows:

1. The attached Methods of Payment Policy, Electronic Vendor Fraud Policy, and Bank Account
Fraud Prevention Policy be formally adopted by the Board of Trustees; and
2. That it is hereby found and determined that all formal actions of this Board concerning and
relating to the passage of this Resolution were taken in an open meeting of this Board, and that
all deliberations of this Board and any of its committees that resulted in such formal action were
taken in meetings open to the public, in compliance with all legal requirements including
§121.22 of the Ohio Revised Code; and
3. That this Resolution shall be effective at the earliest date allowed by law; and
4. That the Board by a majority vote hereby dispenses with the requirement that this Resolution
be read on two separate days, pursuant to Section 504.10 of the Ohio Revised Code, and hereby
authorizes the adoption of the Resolution upon its first reading.

Trustee _____ seconded the Resolution, and the roll being called upon the
question of its adoption, the vote resulted as follows:

Vote Record: Ms. Ulrich _____, Mr. Unger _____, Mr. Wahlert _____

ADOPTED this _____ day of _____, 2024.

BOARD OF TRUSTEES:

Cathy Ulrich, Trustee

Dan Unger, Trustee

Matthew Wahlert, Trustee

ATTEST:

Jeff Baker,
Colerain Township Fiscal Officer

Resolution prepared by and approved as to form:

Scott Sollmann (0081467)
Colerain Township Law Director
5300 Socialville Foster Rd., Suite 200
Mason, OH 45040 (513) 583-4200
Colerain Township Law Director

AUTHENTICATION

This is to certify that this Resolution was duly passed and filed with the Colerain Township Fiscal Officer this _____ day of _____, 2024.

Jeff Baker
Colerain Township Fiscal Officer

2.15 METHODS OF PAYMENT

Adapted from the Government Finance Officers Association Best Practice, "Payments Made by Governments, 2018"

PURPOSE

Governments make payments in a variety of ways including cash, checks, and various electronic payment methods. Governments rarely make payments using cash but a government may have one or more petty cash funds for employee reimbursement. In addition, fewer and fewer payments by governments are being made by check as more electronic options have been made available but check payments still exist and have unique control and fraud prevention requirements.

ELECTRONIC PAYMENT METHODS

- **Automated clearing house (ACH)** - movement of funds in a batch process, which is best for high volume, low dollar transactions such as payroll, expense reimbursement, and routine vendor payments, as the cost per transaction is low relative to other forms of electronic payment.
- **Wire transfer** - immediate movement of funds between bank accounts with guaranteed settlement, which is most suitable for high dollar transactions because the cost per transaction is high relative to other forms of electronic payment.
- **Purchasing (procurement) cards** - a credit card transaction designed to reduce the volume of small dollar purchase orders issued, field purchase orders or to eliminate petty cash. Purchasing cards are used at the point of sale, which is convenient for the employee and the customer, and payments are made in aggregate. Vendors that accept the payment will pay a processing fee. There is usually no cost to the government, and the issuing bank may provide a rebate based on transaction volume. In addition, restrictions can be put on the purchasing cards such as a per purchase dollar amount limit, dollar limits per transaction cycle and by MCC (merchant category code).
- **Electronic accounts payable** - a credit card transaction, often without physical cards, that allows governments to pay invoices electronically. These payments are made during the



normal accounts payable process, but the vendor or government has designated a preference to receive funds via the card instead of checks. As with purchasing cards, the vendor pays a processing fee, and the government may receive a rebate.

- **Stored value cards** -generally used for payroll to unbanked employees or for rebate/incentive programs. The card is tied to a bank account and is loaded via an ACH transaction. There are costs associated with activation and use of the card. The Township does not use stored value cards.
- **ACH debits** - withdrawal of funds directly out of the government's bank account. This type of payment is usually requested by vendors who do repetitive business with the government such as benefit providers who have long term contracts with the government. Generally, a government should have debit blocks in place against ACH debits unless specifically identified by the government as trusted vendors.
- **Cryptocurrency** - The Township shall not accept cryptocurrency.

ELECTRONIC PAYMENT BENEFITS

There are benefits to using electronic payments including:

- Eliminating the storage, handling, and processing of paper checks.
- Reducing the time spent on reconciliation.
- Eliminating the occurrence of lost or stolen checks and the cost of check reissuance.
- Reducing security risks, including the visibility of information used in check payment fraud.
- Improve the tracking of payments through enterprise resource planning (ERP) systems and integration with banking technologies.

CASH PAYMENT METHODS



The Township accepts cash payments and provides a written receipt for each payment. More information on cash handling can be found under Township Policy 2.7 Cash Handling Policy.

CHECK PAYMENT METHODS

The Township continues to issue a significant number of checks. To reduce the risk of check fraud, the Township should:

- Maintain physical security over check stock and check copy retainage should be in place and documented.
- Implement bank fraud prevention tools (e.g., positive pay).
- Reconcile all payments monthly.

2.16 ELECTRONIC VENDOR FRAUD

Adapted from the Government Finance Officers Association Advisories, "Electronic Vendor Fraud," 2017 and Auditor of State Bulletin 2024-003, "Payment Redirect and Business Email Compromise Schemes."

PURPOSE

Electronic payments improve efficiency, security, and tracking. However, electronic payments require appropriate internal controls to mitigate the risk of fraud. Fraud can affect all sizes of governments and include both large and small transactions. As more governments move to electronic payments, electronic payment fraud has become more prevalent, and as protections have evolved to better guard against vendor fraud, fraudsters have gotten better at avoiding those measures. Vendor fraud is often associated with submitting fake documentation to change the bank routing and account numbers for electronic vendor payment deposits. These schemes often involve multiple hacks and may attempt to compromise vendor information, along with e-mail or other forms of identification, in an attempt to disguise the fraudulent activity. For example, fraudsters might hack e-mail or use a fake e-mail domain to make themselves look like legitimate representatives of a vendor.

STRATEGIES TO MITIGATE THE RISK OF FRAUDULENT VENDOR PAYMENTS

General Strategies

- Staff shall not make any changes to vendor information, particularly payment addresses and/or bank account information, without carefully reviewing the information provided and corroborating it through other sources, such as existing Township records. Staff shall not change any vendor information solely on the basis of email communications. Contact information shall be obtained through independent sources rather than using the information provided in an email or an invoice. When confirming changes, staff shall ask vendors to identify both old and new account information. The vendor should provide the information without assistance.
- Financial fraud insurance coverage, and any caps on that coverage, should be re-evaluated



periodically to ensure that coverage is sufficient and that all of the forms of cyber fraud are covered.

- The Township shall implement added layers of authentication and security, such as positive pay, ACH positive pay, account verification service, and ACH debit block. The IT Director shall establish and maintain up-to-date system security and e--mail spam filters.
- The IT Director shall continue to require quarterly training on all forms of digital fraud for all employees. Failure to participate in that training shall result in progressive discipline.
- Staff should consider the options provided by third parties, such as using a bank to manage and store vendor account and other sensitive information.

Staffing Strategies

- At least two staff members shall review any change in vendor information. Proper segregation of duties helps ensure that the individual who enters information into the system or approves the change is not the same person who conducts due diligence on the vendor changes. The Department Director overseeing the Finance staff shall authorize all vendor changes.
- Accounts payable staff are expected to train quarterly in payment fraud and to routinely ask questions of both vendors and department staff.
- Staff and outside departments should understand the importance of prioritizing outstanding balance inquiries from vendors and resolving them quickly, following up on questions via telephone instead of e-mail. Payment questions need to be addressed as quickly as possible because they may uncover vendor or payment fraud.
- Staff should be wary of any email or invoice that is unexpected and conveys a sense of urgency.
- Staff should be wary of requests that arrive when the senior leadership is away from the office for an extended period.
- Employees seeking a change in direct deposit information shall make that request in person. Employees whose work schedule does not allow for that in person request should make that request of their commanding officer.



Form/Information Change Strategies

- Staff should beware of any vendor form changes that ask for revisions to more than one item in its account. Staff should also compare the vendor domain name with new domains provided on the form, and use the Internet to verify all changes.
- Staff shall develop a vendor change form that requires vendors to provide both old and new bank routing and account numbers or billing addresses when requesting a banking change or a payment mailing change. Vendor change forms shall not be published on the Township website.
- Staff should look closely at the information and documentation provided by the vendor, such as a very low check number with a small number of digits.
- Staff should be wary of vendors updating an account to use an international bank as well as requests with unusual language or wording.
- Staff should carefully scrutinize the email address used to request a change in vendor information. Staff should hover their cursor over the sender's email and review the information in the window that pops up, particularly the "mailed by," "signed by," and "encryption" fields. Any suspicious information should be referred to the employee's Department Director.

Follow Up Strategies

- If staff become aware of fraudulent account routing and numbers, staff should notify their Department Director, who in turn should notify the Township's bank and law enforcement.
- If staff become aware of a fraudulent account, staff shall scrub the vendor file data for other vendor accounts that might use the same bank routing number or account number and deactivate any questionable vendor accounts immediately.

Failure to follow this policy shall result in progressive discipline, up to and including termination.



2.17 BANK ACCOUNT FRAUD PREVENTION

Adapted from the Government Finance Officers Association Best Practice, "Bank Account Fraud Prevention," 2012.

PURPOSE

In 2022, the Association for Financial Professionals published a study showing that 70 percent of companies were victims of fraud via payment methods in 2021. These tools and internal controls are intended to strengthen the Township's defenses against fraud.

FRAUD PREVENTION TOOLS

- **Positive pay** is a type of account reconciliation service provided by banks. In positive pay, a bank compares checks that it receives for payment against the record of the checks issued by the government. If the bank receives a check that does not match the information (date, check number, and amount) in the government's record, it identifies it as an exception item (i.e., a non-conforming positive pay item). Payee positive pay is an enhanced positive pay service that requires the validation of the payee name in addition to validating the date, check number, and amount.
- **ACH blocks and filters** stop any attempt by an outside entity to process an ACH transfer and remove funds from a checking account without prior permission. ACH blocks prevent all disbursements from an account. ACH filters prevent disbursements that do not match a list of pre-authorized transactions or identification numbers. ACH filters involve: (a) giving prior permission to certain approved business partners to draw upon the account, (b) establishing an approval process for pending ACH transmissions, and/or (c) setting maximum dollar limits on ACH debit transactions.
- **Reconciliation tools** allow governments to extract information from their bank or have information sent from their bank that assists the government in performing period end reconciliation of bank accounts. The bank may also provide a tool that completes a full



reconciliation of the account and produces detailed reports of reconciled items.

- **Intra-day access** allows a government to see bank account transactions that occur at various times throughout the business day. The information may be accessed via online systems provided by the bank, as well as through other methods including fax, email, and direct transmission of data from the bank to the government's computer systems.
- **Universal Payment Identification Codes (UPIC)** may be used instead of the government's bank account numbers so that the government's account numbers are not disclosed.

INTERNAL CONTROLS

To provide for the physical security of all checks, the Finance Department shall:

- Maintain check images in preference to paper copies.
- Keep check stock in a locked and secure location with a formal inventory listing maintained. Secure check stock daily. Remove continuous check stock from printers. Lock and secure check specific printers.
- Physically void returned checks and check copies, and retain in a locked and secure location or destroy on a schedule.
- Ensure appropriate security over signature software.
- Staff shall notify the Director overseeing the Finance Department of the pending issuance of all checks over \$100,000.

In addition, the Finance Department shall:

- Require two party authorizations (initiation and release) and same day staff reconciliation of wires.
- Ensure proper segregation of duties among staff initiating, authorizing, preparing, signing, and mailing payments and reconciling bank statements.



- Review signature cards and authority levels whenever any changes occur and annually at a minimum. Remove individuals from bank transaction authority immediately upon resignation or termination.
- Review all bank accounts at least annually. Consolidate or eliminate bank accounts that are not frequently utilized.
- Ensure that controls exist for the storage and destruction of all documents that contain account and other related information.
- Determine that appropriate controls are present if employees access the government's financial and banking systems from remote sites (i.e., restrict the sharing of files).
- On at least an annual basis, request the government's legal counsel to research changes in laws that shift liability for fraudulent transactions to the government.

FRAUD PREVENTION MEASURES IN COOPERATION WITH FINANCIAL INSTITUTIONS

The Director overseeing the Finance Department shall:

- Implement positive pay and/or payee positive pay, on all disbursement bank accounts and reconcile exceptions daily. Positive pay is the single best fraud prevention tool available.
- Instruct the bank to return all non-conforming positive pay items as the default instruction.
- Ensure that a clear policy exists to separate responsibilities between staff approving positive pay exceptions and staff initially requesting and/or preparing the check.
- Avoid reverse positive pay because with this service the liability remains with the government.
- Direct the bank to reject or block any and all withdrawals not initiated by the government from accounts that only accept deposits.
- Evaluate placing ACH filters and/or blocks on all accounts.
- Place total or selective ACH blocks on all disbursement accounts. Selective ACH blocks, also known as ACH filters, allow electronic debits to occur only for pre-designated transactions.



- Develop a formal plan to review ACH blocks/filters. This should be done on an annual basis, at a minimum.
- Consider the use of Universal Payments Identification Codes (UPIC) for all receivables accounts.
- Ensure that the Township's financial institutions provide multi-factor identification for on-line banking services involving transactions and administrative functions.
- Ensure separation of duties (initiation and release/approved) for financial transactions and administration of the on-line system. Multi-factor identification may include numerous passwords and/or utilization of user specific tokens.
- Discuss enhanced or new account security features with your financial institution on at least an annual basis.

OLD BUSINESS

Department: Administration

Department Director: Jeff Weckbach, Township Administrator

Strategic Plan Goal: Strategic Goal #3: Revitalization of the Community through Economic Development, Beautification, and Code Enforcement

Discussion and Potential Action - 2864 Houston

Staff seeks direction on this issue.

Rationale:

This project was set to be completed on March 10th, per the original agreement and the extension previously granted by the Trustees. At the March 26th, 2024 meeting the Board of Trustees requested this item be moved to the April 23rd meeting for an update and continued conversation. The Board set June 11th as a final update meeting.

CONSENT ITEMS

Department: Police
Department Director: Ed Cordie, Police Chief

Strategic Plan Goal: Strategic Goal #2: Continue to Provide High Quality Safety Services

Donation Acceptance - Police Department - Cincinnati Moose Lodge #2 - \$2,039.24
Recommend approval of all consent items.

Rationale:
Colerain Township Police Department is grateful for a \$2,039.24 donation from Cincinnati Moose Lodge #2.

CONSENT ITEMS

Department: Fire
Department Director: Allen Walls, Fire Chief

Strategic Plan Goal: Strategic Goal #2: Continue to Provide High Quality Safety Services

Donation Acceptance - Department of Fire and EMS - Cincinnati Moose Lodge #2 - \$2,039.24
Recommend approval of all consent items.

Rationale:
Colerain Township Department of Fire and EMS is grateful for a \$2,039.24 donation from Cincinnati Moose Lodge #2.

CONSENT ITEMS

Department: Fire
Department Director: Allen Walls, Fire Chief

Strategic Plan Goal: Strategic Goal #2: Continue to Provide High Quality Safety Services

Donation Acceptance - Department of Fire and EMS - From Jerome Robinson - \$50.00 (cash)
Recommend approval of all consent items.

Rationale:
Colerain Township Department of Fire and EMS is grateful for a \$50.00 donation from Jerome Robinson in appreciation for EMS Services rendered to Colerain Township resident James Robinson.

CONSENT ITEMS

Department: Administration
Department Director: Jeff Weckbach, Township Administrator

Strategic Plan Goal: Strategic Goal #5: Continuously Improve the Operations of the Township

Contract - Ohio Plan - Endorsement Amendment - \$0
Recommend approval of all consent items.

Rationale:
This rider is for zero cost and provides the Township with greater flexibility in settlement negotiations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES

Policy Change Number
10002995PKGOHP08006

POLICY NUMBER 10002995PKGOHP08	POLICY CHANGES EFFECTIVE 5/1/2024	Ohio Plan Risk Management, Inc.
NAMED MEMBER Colerain Township		AGENCY Hylant Group
COVERAGE PARTS AFFECTED LIABILITY COVERAGE PART		
CHANGES It is agreed form OPI 01 02 01 15, Amendment – Consent to Settle, is added to the policy per the attached.		

Premium Change: Waived


Agent Signature

Named Member: Colerain Township

Policy Number: 10002995PKG0HP08

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AMENDMENT – CONSENT TO SETTLE

This endorsement modifies coverage provided under the following:

GENERAL LIABILITY COVERAGE FORM

EMPLOYERS' LIABILITY (STOP GAP) COVERAGE FORM

EMPLOYEE BENEFITS LIABILITY COVERAGE FORM

PUBLIC OFFICIALS ERRORS AND OMISSIONS AND EMPLOYMENT PRACTICES LIABILITY COVERAGE FORM

LAW ENFORCEMENT LIABILITY COVERAGE FORM

The following is added to Paragraphs 1.a. of Coverage A. – Insuring Agreement.

We will not settle any claim ("claim") or "suit" without your consent. However, if we recommend a settlement to you to which you do not consent, the most we will pay as "damages" in the event of any later settlement or judgment is limited. If the later settlement or judgment exceeds the amount of the settlement amount you have rejected, the most we will pay as "damages" is the amount for which the claim ("claim") could have been settled, to which you did not give consent, less any deductible.

This consent to settle will not affect our right and duty to defend the member against that "suit".

CONSENT ITEMS

Department: Administration
Department Director: Jeff Weckbach, Township Administrator

Strategic Plan Goal: Strategic Goal #3: Revitalization of the Community through Economic Development, Beautification, and Code Enforcement

Contract - KZF - Zoning Resolution Update - \$0
Recommend approval of all consent items.

Rationale:
This contract represents a zero dollar change order to update the project timeline and schedule to coincide with the proposed new date for an updated zoning resolution. At the June Zoning Commission meeting, several of the updated articles will be discussed and the Zoning Commission will continue to work through the updated Articles over the coming months.

7/29/2022
Revised 8/9/2022
Revised 4/4/2024
Revised 5/31/2024

Jeff Weckbach • Township Administrator
Colerain Township
4200 Springdale Rd • Colerain Township, OH 45251

Subject: Proposal for Comprehensive Zoning Resolution Amendment

The KZF Design team is pleased to present Colerain Township (CLIENT) with this proposal for professional planning services for the Comprehensive Zoning Resolution Amendment project. This proposal will remain valid until ~~September 30, 2022~~ April 11, 2024 June 14, 2024.

PROJECT UNDERSTANDING

Colerain Township wishes to update the current Colerain Township Zoning Resolution to better align with the recently adopted Comprehensive Plan, Imagine Colerain. Ultimately, the desire is to amend the Zoning Resolution to allow Colerain Township to effectively implement sound planning and development practices to guide Colerain Township to becoming the premier location within the Cincinnati area for businesses and families in which to live, work and play.

CONSULTANT TEAM & ROLES

KZF Design – Lead firm, project management, architectural guidelines, revisions the township's zoning GIS files and provide final zoning map development and presentation production, development of final document deliverable design and production, exhibits and images, as well as creation of final accessible, interactive (electronic device compatible, Word Document, PDF, and Geodatabase / shapefiles), and user-friendly versions of the Resolution and Map for use by both the public and Township officials and staff

ZoneCo – technical zoning code development and update/amendment work

SCOPE OF WORK

The following list of tasks is required to develop the facility master plan:

Project Initiation & Orientation (Month 1) - Completed

- a. Kick-Off Meeting. We will initiate the project with a kick-off meeting. We will review project goals, timeline, work approach, and the public outreach and engagement strategy. We will work with staff to populate a Steering Committee and create a meeting schedule.
- b. Plan Review. We will begin with a robust planning document review, including the existing Ordinance, Master Plan, and any relevant forms or documents. We will review variance requests and decisions to understand where relief from the ordinance is being sought. We will furthermore review development patterns, corridors, district, and neighborhoods within the Township via driving tour.

- c. Staff/Stakeholder Feedback. We will create a supplementary form that we will distribute to staff and stakeholders which compiles comments about where they feel there is most opportunity for change or revision. We will also interview stakeholders.

Module 1: Diagnose (Months 2-3) - Completed

- a. Draft Diagnostic Report. At the close of the previous task, we will have an understanding of current planning practice in the Township and we will draft a Diagnostic Report that outlines exactly how the current Ordinance compares with the objectives for the built and natural environment. We undertake a thorough line-by-line analysis that provides detailed notes for every section within a matrix. The matrix scores the entire Ordinance, and the findings from this exercise are subsequently distilled and summarized within the Diagnostic Report.
- b. Prioritized List of Changes and Updates. As we finalize the Diagnostic Report, we will create a prioritized list of changes and updates. We will begin to uncover how zoning districts could be re-organized or updated. At the close of this task, we will provide the Township with the deliverables listed below.

Deliverables:

- Project website - The consultant team will collaborate with the Township to provide content to incorporate into your website
- Diagnostic Report accompanied by the line-by-line scoring matrix
- Outline of zoning district changes and map
- A draft table of contents which will display how we intend to re-organize the Ordinance
- A mock-up of the document design style for review

Module 2: Calibration (Months 3-6) - Completed

- a. Base Regulations. In the previous tasks, we outlined zoning district changes and created a prioritized list of updates for the Ordinance. We will lay out base regulations for the various sections of the Ordinance, like districts and generally applicable regulations within a table format which we call the "Calibration Table".
- b. Calibration Table. The Calibration module creates efficiencies; when we begin to draft new language, the base regulations will be fleshed out and the team can focus on the document text, graphics, and readability. This also gives the community the opportunity to be integrated into the process before there is a fully drafted document.
- c. Review & Test. We will hold an internal review of the Calibration Table with staff and then test the base regulations with residents and other stakeholders at a public forum. Our team will develop visual aids and educational materials to increase the efficacy of engagement, and ensure that we are adequately conveying how zoning affects everyday life. We will seek out community groups to engage, especially those that serve traditionally underrepresented populations.

- d. Diagrams & Graphics. When the calibration table is finalized, we will create graphics that will make the Ordinance more readable and user-friendly.

Deliverables:

- Draft Calibration Table
- Final Calibration Table

Meetings:

- Forum to review Base Regulations / Calibration Table

Module 3: Codification (Months 7-22)

- a. Ordinance Language. We recommend that as we undertake the drafting process, that we deliver the new Ordinance language in sections. We can work with you to prioritize section delivery. Some sections are intuitive to review together, like districts (which includes permitted uses) and special use standards.
- b. First Draft & Public Review Draft. When all sections have been drafted and reviewed by the project team, we will have the first draft ready for the public forum. We will have graphics completed at this time. We will work with staff to coordinate the public forum to review the document. We will create an inventory of feedback received during the forum and integrate it into the document and the map. The draft Ordinance should also be available online along with a means for submitting comments electronically.
- c. Final Draft. A public review draft will garner additional comments, after which we will produce a final draft of the Ordinance.
- d. Adoption. ~~Our team will attend adoption meetings, record comments/feedback, and make revisions as the new ordinance moves toward adoption.~~ Colerain Township will handle all necessary adoption meetings, presentations, hearings, etc. KZF can participate as an additional service if requested.
 - a. ~~Work sessions/training with the Board of Trustees are recommended prior to adoption meetings to review the content of the new ordinance. KZF can provide as an additional service if requested.~~
 - b. ~~Any meetings and/or hearings not specifically outlined in this proposal, including review meetings with staff, Zoning Commission, and Board of Trustees, can be provided as an additional service if requested.~~

Deliverables:

- Draft Ordinance (completed)
- Public Review Draft of Ordinance
- Final Ordinance

Meetings:

- Up to two (2) review meetings with Colerain Township staff (completed)
- ~~Forum to Review Draft Ordinance Language~~
- ~~Presentation of Draft Ordinance~~
- ~~Presentation of Final Ordinance (after all revisions from draft are made)~~
- ~~Adoption Meetings with Township Officials~~
- Staff training/ordinance review, or post- adoption services could be added as an additional scope item

SCHEDULE

Our schedule assumes receiving Notice to Proceed (NTP) at the September 13, 2022 Trustee Meeting:

Task	Timing	Est. Date
Project Kickoff	NTP + 3 days	9/14/2022
Project Initiation & Orientation	NTP + 31 days	10/15/2022
Module 1: Diagnose	NTP + 93 days	12/16/2022
Module 2: Calibration	NTP + 186 days	3/19/2023
Module 3: Codification	NTP + 779 days	10/29/2024
05/30/24	Review Meeting #2 to discuss draft language changes with Township (completed)	
06/10/24-06/13/24	KZF to submit revised draft ordinance language - Sections 3 and 4	
06/18/24 **	Township to review of Section 3 and 4 with Zoning Commission **	
07/08/24-07/11/24	KZF to submit revised draft ordinance language - Sections 5, 6, and 7	
07/16/24 **	Township to review of Section 5, 6, and 7 with Zoning Commission **	
07/17/24 **	Township to send final draft ordinance feedback to Consultant **	
07/24/24	KZF to submit Public Review Draft to Township	
08/20/24 **	Public Hearing at Zoning Commission **	
08/20/24 **	Recommendation for Adoption at Zoning Commission **	
08/27/24 **	Public Hearing at Board of Trustees Meeting **	
09/10/24 **	Adoption at Board of Trustees Meeting **	
10/9/24	KZF to submit Final Ordinance to Township	

*Dates/tasks indicated with ** above will be executed by Colerain Township*

BASIC SERVICE FEES

Project Initiation & Orientation	\$4,500
Module 1: Diagnose	\$18,000
Module 2: Calibration	\$22,500
Module 3: Codification	\$45,000
<u>Estimated Reimbursable Expenses</u>	<u>\$2,000</u>
TOTAL FEES	\$92,000

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CLIENT RESPONSIBILITIES

1. Provide KZF a current copy of GIS files (electronic version), all levels available.
2. Provide KZF any previous reports, plans or other relevant documents.
3. Promptly review and provide comments to KZF as drafts recommendations and maps are submitted. Also, advising the team on matters pertaining to public comments.
4. Coordinate, organize, host and facilitate/run any public involvement efforts.
5. Manage/facilitate stakeholder involvement to ensure participation at client review periods.

COMPENSATION

For the basic Scope of Services defined herein, KZF Design proposes a lump sum fee as described above. Additional services beyond the scope of this proposal will be billed on an hourly rate basis, with authorization by CLIENT.

KZF shall invoice every four weeks for the amounts due for professional services rendered and expenses incurred. Progress payments shall be based on the number of hours spent at date of invoice. In addition to the compensation for professional services, KZF shall be reimbursed for out-of-pocket expenses at cost plus ten percent (10%) fee for KZF's management and coordination. Reimbursables are estimated at \$2,000.

ADDITIONAL SERVICES (NOT INCLUDED IN THIS PROPOSAL)

In the event the Client requests additional services such as those described herein, they can be provided on an hourly rate basis in accordance with KZF Design's attached Hourly Rate Schedule HR-1880. Additional services available would include:

- Architecture, interior design or building design services
- Civil, traffic, site, electrical/lighting, structural, bridge or any other engineering services
- Mechanical or plumbing engineering services
- Schematic design, detailed design, or construction documentation
- Detailed engineering and site design of riverfront, terraces, access, etc.
- Land use analysis and zoning
- Survey, right-of-way plan development
- Geotechnical engineering
- Landscape architecture design services
- Bidding assistance and permitting
- Construction administration and inspection services
- Drone footage or photography
- Building evaluations/assessments
- Grant writing and administration
- Resource and environmental documentation

PRESUMPTIONS

- a) This proposal shall remain valid for sixty (60) calendar days.
- b) It is presumed that the CLIENT will coordinate meeting attendance and encourage participation from required personnel.
- c) It is presumed this project is a high-level planning project and does not include detailed design services for facility and infrastructure projects.
- d) All agency permitting is specifically excluded.

- e) Additional meetings beyond those specifically addressed are excluded.
- f) Geotechnical or hazardous materials investigations are excluded.
- g) Access will be granted for necessary field reviews. Escorts will be provided as needed.
- h) It is understood that CLIENT will initiate agency coordination/consultation.
- i) It is understood that CLIENT will be the lead contact with the public and we will only provide informational support.
- j) CLIENT acknowledges that KZF cannot warrant that any construction cost estimates or estimated quantities provided by KZF shall not vary from actual costs incurred by the CLIENT.
- k) KZF has allotted time for CLIENT review in our proposal. If CLIENT is not able to provide the comments to the A/E Team per the schedule it will be necessary to extend the schedule for each day after the scheduled deadline that review comments are received by two (2) days. This extension is necessary in order to accommodate the loss of time with the overall schedule and to account for the required internal adjustment of staff schedules and other commitments.
- l) Existing drawings and GIS mapping shall be provided by CLIENT withing 14 days of project kick-off, so that KZF can produce base drawings for use during the project.
- m) KZF's fee is based on the proposed schedule and does not include cost that may be incurred if the project is delayed or suspended for reasons beyond KZF's control. If CLIENT delays or suspends the Project, through no fault of KZF, KZF shall be compensated for services performed prior to notice of such delay or suspension. When the Project is resumed, KZF shall be compensated for expenses incurred in the interruption and resumption of KZF's services. KZF's fees for the remaining services, and the time schedules to complete the work shall be equitably adjusted by approved Change Order prior to resuming work. KZF Staff will be reassigned during all delays or suspensions. Additional time to be added to the project schedule shall include time required for staff to complete alternate assignments, to remobilize staff to the project, to refamiliarize staff with the project, and if necessary, to make available and educate new staff to the project.

Terms and Conditions

KZF will endeavor to develop design documents that meet the requirements of the Project and will modify the documents as required to correct inconsistencies that may exist in that regard. It is our expectation that the Client will also provide a review of the documents for compliance with the Project requirements and advise KZF of any conflicts or discrepancies that exist prior to document release for construction. KZF will provide design services required to modify the design to meet the requirements of the Project.

Schedule Delays. KZF's fee is based on the schedule included in the proposal and does not include costs that may be incurred if the project is delayed or suspended for reasons beyond KZF's control. If the Owner or Contractor delays or suspends the Project, through no fault of KZF, KZF shall be compensated for services performed prior to notice of such delay or suspension. When the Project is resumed, KZF shall be compensated for expenses incurred in the interruption and resumption of KZF's services. KZF's fees for the remaining services, and the time schedules to complete the work, shall be equitably adjusted by approved Change Order prior to resuming work. KZF Staff will be reassigned during all delays or suspensions. Additional time to be added to the project schedule shall include time required for staff to complete alternate assignments, to re-mobilize staff to the project, to re-familiarize staff with the project, and if necessary, to make available and educate new staff to the project. In the event of termination not the fault of KZF, KZF shall be compensated for services performed prior to termination, Reimbursable Expenses incurred, and all costs attributable to termination, including costs attributable to KZF's termination of consultant agreements.

Consequential Damages. Notwithstanding any other provision to the contrary, and to the fullest extent permitted by law, neither Client nor KZF shall be liable to the other for any incidental, indirect or consequential damages arising out of or connected in any way to the Project or the Project Agreement(s). This mutual waiver of consequential damages shall include, but not be limited to, loss of use, loss of profit, loss of business, loss of income, loss of profits, loss of reputation, loss of financing, or any other consequential damages that either party may have incurred from any cause of action whatsoever, whether arising in contract, warranty, tort (including negligence), strict liability or otherwise.

Dispute Resolution. Any claim, dispute or other matter in question arising out of or related to the Project or the Project Agreement(s) shall first be subject to non-binding mediation as a condition precedent to binding dispute resolution. The method of binding dispute resolution shall be litigation in a court of competent jurisdiction, unless all parties agree, in writing, to make the final results of the non-binding mediation, binding upon the parties.

Reimbursable Expenses. Expenses including but not limited to mileage, travel, overnight shipping mailing charges and printing are considered reimbursable and will be billed at cost plus 10% to the Owner or Contractor.

Invoicing. KZF shall invoice every four weeks for the amounts due for professional services rendered and expenses incurred. Owner or Contractor shall pay KZF the full amount due upon receipt of invoice. All past due amounts shall bear interest at the rate of one and one-half percent (1-1/2%) per month compounded monthly after sixty days. KZF Design reserves the right to suspend services and or not issue documents for permit approvals if the Owner or Contractor account is past due.

Liquidated Damages. KZF, (or any sub-consultants for whom KZF is contractually liable), shall not be held responsible for any costs or delays outside of its control, including but not limited to liquidated damages. The Client shall not withhold amounts from KZF's compensation to impose a penalty or liquidated damages on KZF, or to offset sums requested by or paid to contractors, sub-contractors or suppliers for the cost of changes in the Work, unless KZF agrees, in writing, or has been found liable for the amounts in a binding dispute resolution proceeding. Compensation due KZF which has not been specifically designated, in writing, by Client as being withheld due to KZF's performance or lack thereof, shall not be withheld by Client.

Ownership of Documents. KZF warrants that it is the copyright owner of its Instruments of Service. KZF grants to the Client a nonexclusive license to use KZF's Instruments of Service solely and exclusively for purposes of using, maintaining, altering and adding to the Project, provided the Client substantially performs its obligations under the Project Agreement(s), including prompt payment of all sums when due. In the event of Default by Client, if KZF rightfully terminates the Project Agreement(s) with Client for cause, the nonexclusive license shall terminate. The Client shall not assign, delegate, sublicense, pledge or otherwise transfer the nonexclusive license to another party without the prior written consent of KZF. Upon completion of the Project and payment of all sums due KZF, the Instruments of Service shall become the property of the Client..

Insurance Coverage. KZF will provide insurance coverage limits in the following amounts for this project. A copy of KZF's Certificate of Liability Insurance can be made available upon request.

A. Commercial General Liability

Personal & Adv Injury: \$2,000,000

Aggregate/\$1,000,000 each occurrence

Excess Umbrella: \$1,000,000 Aggregate/\$1,000,000 each occurrence

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B. Professional Liability Claims: \$2,000,000
Aggregate/\$1,000,000 each claim

C. Comprehensive Automobile Liability
Bodily Injury & Property Damage: \$1,000,000
Combined Single Limit (each accident)

BIM Execution Plan and Use of CAD Files. KZF will use the KZF DESIGN 2019 BIM EXECUTION PLAN FOR PRIVATE MARKET PLACE PROJECTS to establish the protocols for the development, use, transmission and exchange of a native REVIT model or native AutoCAD files (the "CADD Files"). Any use of or reliance on all or a portion of the CADD Files shall be at the using or relying party's sole risk and without liability to KZF or its consultants. Differences may exist between these CADD Files and corresponding hard-copy Contract Documents prepared by KZF and/or its consultants. KZF and/or its consultants make no representation regarding the accuracy or completeness of the CADD Files. Furthermore, it is understood and agreed that the CADD Files being provided by KZF and/or its consultants are incomplete in-progress files that are not to be used for Construction purposes. Use of the CADD Files does not relieve the user of the CADD Files of their duty to confirm all as-built construction, confirm and coordinate all dimensions and details, take field measurements, verify field conditions, resolve any conflicts that may exist between the CADD Files and any existing facility, and coordinate your work with that of other entities for the Project. Under no circumstances shall delivery of the CADD Files for use by Client be deemed a sale by KZF and/or its consultants, and no warranties are made, either expressed or implied, of merchantability and fitness for any particular purpose. In no event shall KZF and/or its consultants be liable for any loss of profit, or any consequential damages, as a result of Client's use or reuse of the CADD Files.

Electronic File Transfer. KZF will provide copies of the Contract Documents in PDF and/or hard copy format, as provided for in the Project Agreement(s). If Client request native CADD files (REVIT or AutoCAD) for use by Contractor, Contractor's consultants, subcontractors or suppliers, Contractor and all entities receiving the native CADD files shall sign an Electronic File Transfer Agreement prior to release and use of the native CADD files. A draft copy of the Electronic File Transfer Agreement can be made available upon request.

Limitation of Liability. The Owner or Contractor agrees that to the fullest extent permitted by law, KZF's total liability to the Owner or Contractor for any and all injuries, claims, losses, expenses, damages, arising out of this Project Agreement(s) from any cause or causes shall not exceed KZF's fee or \$50,000, whichever is greater.

Assignment. Neither Client, nor KZF, shall assign the Project Agreement(s) without written consent of the other, except that Client may assign the Project Agreement(s) to a lender providing financing for the Project if the lender agrees to assume all of the Client rights and obligations under the Project Agreement(s), including any payments due to KZF by Client prior to the assignment. If Client requests KZF to execute certificates or consents, a draft copy of certificates or consents shall be submitted to KZF for review, comment and approval prior to the signing of the Project Agreement(s). KZF shall not be required to execute certificates or consents that would require knowledge, services or responsibilities beyond the scope of the Project Agreement(s) or beyond the scope of KZF's services.

Force Majeure: Notwithstanding anything to the contrary contained herein, KZF shall not be liable for any delays or failures in performance resulting from acts beyond its reasonable control including, without limitation, acts of God, terrorist acts, supply shortages, breakdowns, malfunctions of computer facilities, loss of data due to power failures or mechanical difficulties with information storage or retrieval systems, labor difficulties, war, or civil unrest.

Thank you for the opportunity to offer these services. This proposal and terms and conditions may be accepted by signing below and returning one executed copy to KZF Design. **We reserve the right to withhold our reports and project submittals until the signed Agreement has been received by KZF Design.** This document will serve as the notice to proceed and as our contract for services. This proposal is valid only if authorized within 60 days from the listed proposal date.

Sincerely,
KZF Design Inc.

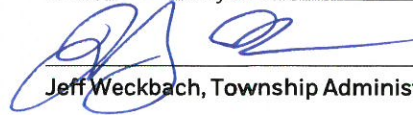


Eric Anderson, Director of Planning

APPROVED AND ACCEPTED

Colerain Township, Ohio

This 2 day of June, 2024



Jeff Weckbach, Township Administrator

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2022 Hourly Rate Schedule

1/25/2022

Rates effective
through
12/31/2022

Category	Rate
Architect Level 1	\$130
Architect Level 3	\$200
Construction Administrator	\$190
Civil Designer Level 1	\$120
Civil Designer Level 3	\$140
Civil Engineer Level 1	\$120
Civil Engineer Level 3	\$190
Clerical	\$110
Designer Level 1	\$95
Designer Level 3	\$190
Electrical Designer 1	\$140
Electrical Designer 3	\$160
Electrical Engineer Level 1	\$150
Electrical Engineer Level 3	\$290
Interior Designer Level 1	\$100
Interior Designer Level 3	\$200
Mechanical Designer Level 1	\$110
Mechanical Designer Level 2	\$130
Mechanical Engineer Level 2	\$150
Mechanical Engineer Level 3	\$250
Planner Level 1	\$100
Planner Level 3	\$190
Principal	\$360
Project Manager Level 1	\$130
Project Manager Level 2	\$190
Project Manager Level 3	\$220
Structural Designer Level 1	\$110
Structural Designer Level 3	\$120
Structural Engineer Level 3	\$200

CONSENT ITEMS

Department: Fire
Department Director: Allen Walls, Fire Chief

Strategic Plan Goal: Strategic Goal #2: Continue to Provide High Quality Safety Services

Promotion - Full-time Firefighter/Paramedic - Department of Fire and EMS - Meghan Ungar - \$22.43 per Hour
Recommend approval of all consent items.

Rationale:
The position of Firefighter/Paramedic was posted, applications were received, and interviews were conducted. A conditional offer of employment has been extended to the following individual:

- Meghan Ungar

The wage for this job is \$22.43 per hour for 52 hours per week. Contingent upon Board approval, Meghan would be eligible to begin work on June 23, 2024.

CONSENT ITEMS

Department: Administration
Department Director: David Miller, Director of Development

Strategic Plan Goal: Strategic Goal #3: Revitalization of the Community through Economic Development, Beautification, and Code Enforcement

New Hire- Planner- Maggie Klein
Recommend approval of all consent items.

Rationale:
The position of Planner was posted, applications were received and interviews conducted. A conditional offer of employment was extended to the following individual: Maggie Klein.

The wage for this job is \$26.00 per hour for 40 hours per week. Contingent upon Board approval, he would be eligible to begin work on June 12, 2024.



NEW HIRE AUTHORIZATION

TO BE COMPLETED BY HUMAN RESOURCES

- ☒ New position - Date of Trustee Approval - 06/25/2024 6/11/24 JEM
☐ Reconfiguration of position - Date of Trustee Approval _____
☐ Replacement existing vacancy

Job Code: _____ Position Number: _____

Status: ☒ Full Time ☐ Permanent ☐ FLSA Exempt ☐ CBA Position
☐ Part Time ☐ Temporary/Seasonal ☐ FLSA Non-Exempt ☐ Non-CBA Position

TO BE COMPLETED BY HIRING DEPARTMENT HEAD

Employee name: Maggie Klein

Hourly rate: \$26.00/hr Employee Supervisor: David Miller

Min/Max hours/week: 40

Proposed start date: 7/22/24 Eligibility Date: 6/26/24 6/12/24 JEM

Tentative schedule of hours: Mon-Fri, 8:00-4:30

Does this position supervise staff? ☐ Yes ☒ No

Comments: N/A

Department Head Name: David Miller

Signature: David Miller

Date: 6/6/24

TO BE COMPLETED BY THE TOWNSHIP ADMINISTRATOR

The Colerain Township Administrator conditionally approves this hire. This hire shall be fully effective after approval by the Board of Trustees at the next possible Trustee meeting. The employee will be required to serve a probationary period, as defined by the Township Policy Manual or Collective Bargaining Agreement.

For hiring purposes, the employees first eligible start date, pending completion of all necessary background checks, physicals, and drug tests is: 6/12/24

Administrator Signature: JOB Miller

Date: 6/6/24

JOB POSTING INFORMATION – TO BE COMPLETED BY HUMAN RESOURCES

The Position was posted on the following locations:

☒ Township Website

☐ Internal Bulletin Board

☒ Social media

☐ Facebook

☐ LinkedIn

☐ Twitter

☒ Other

☐ Newspapers

☒ Other job boards

Hiring Process Timeline:

Date of initial posting: 4/16/2024

Date posting closed: Ongoing

Interview Committee: Jeff Weckbach, Jeff McElravy, Tiphannie Mays, David Miller, David Peters, Glenna Carter, Cindy Miller, Debbie Potzner

Interview dates: 5/21/24, 5/30/24

Number of applications: 10

Number of candidates interviewed: 6