CITY OF NORTH KANSAS CITY, MISSOURI REGULAR COUNCIL MEETING

August 17, 2021 7:00 p.m.

- 1. Call to order
- 2. Roll Call
- 3. Moment of Silence
- 4. Pledge of Allegiance (Cub Scout Pack 9)
- 5. Approval of Agenda
- 6. Comments from the Public

(Please limit comments to five minutes)

Consent Agenda

All matters listed within the Consent Agenda have been distributed to each member of the City Council for reading and study, are considered to be routine, and will be enacted by one motion of the council with no separate discussion. If separate discussion is desired on any item by any member of the City Council or by any member of the audience who has spoken during *Comments From the Public*, that item will be removed from the Consent Agenda and placed on the Regular Agenda.

- 7. Approval of Work Session Minutes of August 3, 2021
- 8. Approval of Regular Council Meeting Minutes of August 3, 2021
- 9. Snow and Roast Food Truck During Fall Garage Sale
- 10. North Kansas City High School Back to School Event
- 11. Candy Cane Run 5k/10k Event

Regular Items

12. Proclamation for Cub Scout Pack 9 (80 Years)

13. 2022 Renewal of Employee Health Insurance {Bill No. 7618 (Ordinance No. 9415)}

Staff has received the City's medical insurance renewal from Blue Cross Blue Shield of Kansas City ("BCBSKC") for 2022 and we are pleased to report that there will be a decrease of 7% to the City's health insurance plan for its employees. All benefits were marketed this year by the City's health insurance broker, Lockton, and BCBSKC was the best option for our employees based on network and cost. The decision was to remain with BCBSKC due to disruption and price. The Blue Cross renewal was finalized with a 7% reduction in rates. This will result in an annual savings of approximately \$174,000. All plan designs remained the same for 2022. Staff recommends the renewal of this year's Blue Cross Blue Shield of Kansas City Medical insurance plan for 2022.

14. 2022 Dental, Vision, Life and Disability Carrier Changes (Resolution No. 21-059)

All employee benefits were marketed this year by the City's insurance broker, Lockton. As a result, Lockton is recommending that the City make dental, vision, life, and disability carrier changes to enhance existing benefits while providing savings in the upcoming plan years. Staff recommends moving forward with carrier changes with Delta Dental for dental and vision coverage and The Standard for Life and Disability coverage.

15. Emergency Order Reauthorization – Covid 19 {Bill No. 7619 (Ordinance No. 9416)}

Councilmember Smith has requested that an extension of Mayor DeLong's Order No. 21-001 be placed on the City Council Agenda so that the Council may vote to extend the Order for a period of thirty (30) calendar days from 12:01 a.m. on August 28, 2021, until September 26, 2021, at 12:01 a.m. unless rescinded, extended, modified or amended pursuant to applicable law. Ordinance No. 9416 and Order No. 21-002 has been prepared for the City Council's consideration.

16. Budget Amendment - Virus Diagnostic Equipment (Resolution No. 21-061)

The past 16 months have required the City to send multiple employees (200+ to date) for COVID-19 testing. The available testing was located at various locations in the metro area; however, none were located in North Kansas City, and results sometimes took up to 72 hours to be processed. We now have the opportunity (previously the machine had been out of stock due to state and federal governments purchasing them) to purchase diagnostic equipment which would allow the City to test its employees in-house and have results in 20-30 minutes.

With the belief that COVID-19 will continue to be a part of our lives for some time to come, staff recommends the purchase of a Cepheid GeneXpert Express Diagnostic Systems and Tests from Medline Medical Supply Company. This test system will detect COVID-19, Respiratory Syncytial Virus (RSV), Influenza, and Strep. A resolution appropriating \$15,605.27 from the Gaming Fund to the equipment line has been prepared for the consideration of approval by the Council.

17. Professional Services Agreement with A.P. Triton Consultants, LLC (Resolution No. 21-060)

On November 20, 2018, the City Council approved agreements with the Missouri Healthnet Division to participate in the Ground Emergency Medical Transport (GEMT) Program. As a reminder, the GEMT Program is a program that allows the Fire Department to request compensation for certain unreimbursed costs for Medicaid transports. GEMT draws down federal dollars to help offset the cost of the City's provision of emergency ambulance and transport for qualifying Medicaid patients. The governmental agency (the City of North Kansas City) that operates the EMS service is allowed to participate in the recovery of costs associated with providing transportation of Medicaid beneficiaries when the state Medicaid program does not cover the full cost of the service. This cost is shared by the state and federal government on a 35/65 split.

In order to ensure the City can collect on 2021 reimbursements, staff is recommending the City hire a consultant, A.P. Triton L Consultants LLC, to prepare its cost reimbursement report. The cost reimbursement report is similar to a corporate tax return. It documents the cost of providing transport, including both direct and indirect costs associated with providing the ambulance service. These include administration, fuel, maintenance, training and time on task.

18. Budget Amendment – Howell Bumpouts (Resolution No. 21-062)

Construction of the Howell Street curb extension "bump-outs" began on July 19, 2021. The "bump-out" curb extensions provide traffic calming between Northgate and Macken Park by narrowing the vehicle lane width at pedestrian crossings, shortening the distance pedestrians must cross, and increasing the sight distance/visibility between traffic and pedestrians. During construction, it was observed that additional drainage facilities would be needed for the project as the flat slope of the street does not carry water adequately. The cost of this necessary construction was covered by the planned contingency funding. Two additional

items are needed to complete the construction and will require an amendment to the current project budget. First, brick pavers placed during the construction of the adjacent townhomes were not included in the original bid and will need to be reset to complete the project improvements. Second, the existing rounded asphalt surface of the crosswalk will not allow for proper ADA transition between the roadway and the curb extension. Staff is requesting a budget amendment of \$11,000 for completing the brick paver reset and removal of the rounded asphalt surface.

19. Approving Accounts Due and Payable by the City through August 13, 2021. {Bill No. 7620 (Ordinance No. 9417)}.

20. Staff Comments

- Upcoming City Items of Note
- NKC Hospital COVID-19 Updates

21. Councilmember Comments

22. Mayor's Comments

- 23. Consideration of a Request to Hold and Recess Into an Executive Session, as Requested by the Interim City Administrator, to be Held on this Date, on a Real Estate Matter Pursuant to Missouri Revised Statutes §610.021(2)
- 24. Consideration of a Request to Hold and Recess Into an Executive Session, as Requested by the Interim City Administrator, to be Held on this Date, on a Personnel Matter Pursuant to Missouri Revised Statutes §610.021(3)
- 25. Consideration of a Request to Hold and Recess Into an Executive Session, as Requested by the Interim City Administrator, to be Held on this Date, on a Litigation Matter Pursuant to Missouri Revised Statutes §610.021

26. Adjournment

Copies of ordinances referred to above are available for inspection prior to the meeting in the office of the City Clerk. Note: Meetings of the City Council are being broadcast live and recorded.

Minutes of the North Kansas City, Missouri Work Session of August 3, 2021

The City Council met in a Work Session on Tuesday, August 3, 2021, at 6:00 p.m. in the City Council Chambers at City Hall, 2010 Howell Street, North Kansas City, Missouri.

The following were present:

Mavor: **Bryant DeLong**

Councilmembers: Wesley Graves

Anthony Saper Jesse Smith Lisa Tull

Zachary Clevenger **Adam Roberts** Amie Clarke Ana Pellumbi

Staff Present: Kim Nakahodo, Interim City Administrator

> Nick Hawkins, Finance Manager Stephen Roberts, IT Manager Tom Barzee, City Counselor

Mayor DeLong called the meeting to order at 6:00 p.m.

Interim City Administrator Kim Nakahodo stated that the topic of tonight's Work Session would be the Kansas City Water and Wastewater Rate Study. Earlier this year, the City of North Kansas City engaged Raftelis to conduct a Water and Wastewater Rate Study. Raftelis provided the City Council the results of the study, based on a comprehensive review of the City's rates, customer demands, operating expenses, and capital needs. Discussion ensued. Council consensus was to go with Scenario 2 presented in the Council memo which was to immediately end transfers from the Gaming Fund, allowing the Water and Sewer Funds to reach self-sufficiency in FY 2022.

Mayor DeLong declared the meeting adjourned at 7:09 PM.

NKC Healthy Citizens Initiative

Adjournment

Council Adjourned

Mayor Bryant DeLong

Attest:
City Clerk Crystal Doss
Approved this 17 th day of August 2021

Work Session Minutes August 3, 2021 Page 2

Minutes of the North Kansas City, Missouri Regular City Council Meeting of August 3, 2021

The City Council met in regular session on Tuesday, August 3, 2021, at the City Council Chambers located at 2010 Howell Street, North Kansas City, MO 64116.

The following were present:

Mayor: Bryant DeLong

Councilmembers: Wesley Graves

Anthony Saper Jesse Smith Lisa Tull

Zachary Clevenger Adam Roberts Amie Clarke Ana Pellumbi

Staff Present: Kim Nakahodo, Interim City Administrator

Kevin Freeman, Police Chief Dave Hargis, Fire Chief

Anthony Sands, Public Works Director

Casey Campbell, Human Resources Manager

Nick Hawkins, Finance Manager Stephen Roberts, IT Manager Tom Barzee, City Counselor Crystal Doss, City Clerk

Mayor Delong called the meeting to order at 7:15 p.m.

The roll was called. The following councilmembers were present: Zachary Clevenger, Adam Roberts, Amie Clarke, Ana Pellumbi, Wesley Graves, Anthony Saper, Lisa Tull, and Jesse Smith.

The meeting opened with the Pledge of Allegiance.

C. Smith moved to approve the agenda, seconded by C. Tull. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0.

There were no comments from the public.

Roll Call

Opening

Approval of Agenda

Comments from the Public

The Consent Agenda contained the following items:

Approval of Work Session Minutes of July 20, 2021

Approval of Regular Council Meeting Minutes from July 20, 2021

C. Clevenger moved to approve the Consent Agenda as presented, seconded by C. Clarke. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0.

Consideration of an Ordinance of the City of North Kansas City, Missouri, to Establish a Procedure to Disclose Potential Conflicts of Interest and Substantial Interests for Certain Officials {Bill No. 7616 (Ordinance No. 9413). Interim City Administrator Kim Nakahodo asked City Clerk Crystal Doss to present this item to Council. Ms. Doss stated that this is a routine ordinance that the Council adopts each year. Missouri law requires that political subdivisions with annual operating budgets over one million dollars adopt an ordinance at an open meeting by September 15, making public their method of disclosing potential conflicts of interest. If the City does not adopt its own method of disclosing conflicts of interest by September 15, it will automatically fall under the complex state reporting requirements. The only officials that need to file a financial disclosure statement the following year are the chief purchasing officer, the chief administrative officer, the full-time general counsel and those employees and elected officials who have had a transaction of more than \$500 with the political subdivision. Discussion ensued. C. Smith moved that Bill No. 7616 be placed on first reading, seconded by C. Clevenger. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7616 was read. C. Clarke moved that Bill No. 7616 be placed on second and final reading and passed as Ordinance No. 9413, seconded by C. Smith. The roll was called and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7616 was read. Thereupon Mayor DeLong declared the motion carried and the Bill duly passed. Said Bill was then numbered 9413, was signed and approved by the Mayor and attested by the City Clerk.

Consent Agenda

Ordinance No. 9413 – Financial Disclosure Ordinance

Consideration of an Ordinance Amending Title 4, "Alcoholic Beverages," of the Code of the City of North Kansas City, Missouri by Amending Paragraph A of Section 4.12.380 Thereof {Bill No. 7615 (Ordinance No. 9412)}. Interim City Administrator Nakahodo asked Police Chief Kevin Freeman to present this item to Council. Chief Freeman stated that on May 19, 2019, the City Council adopted Ordinance No. 9198, reducing the number of 3:00 a.m. retail by the drink alcohol licenses from six (6) to five (5) licenses. This was done when one of the existing licensees had permanently closed its business. One of these five licenses was held by AMF Pro Bowl which has recently permanently closed. To continue to work toward the complete elimination of all special permit 3:00 a.m. licenses the police department would like to propose altering paragraph 4.12.30, paragraph A, of the Municipal Code to read: "no more than four (4) licensees may obtain a special permit allowing the premises to remain open until 3:00 a.m." If enacted, the four (4) remaining establishments with the 3:00 a.m. special permit will be Spirits Lounge (American Inn), Helen's J.A.D. Bar, Neon Wild, and Chappell's Restaurant and Lounge. Discussion ensued. C. Smith moved that Bill No. 7615 be placed on first reading, seconded by C. Clark. The roll was called, and the vote was as follows: - C. Clevenger, no – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 7-1. Bill No. 7615 was read. C. Clarke moved that Bill No. 7615 be placed on second and final reading and passed as Ordinance No. 9412, seconded by C. Smith. The roll was called and the vote was as follows: C. Clevenger, no – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 7-1. Bill No. 7615 was read. Thereupon Mayor DeLong declared the motion carried and the Bill duly passed. Said Bill was then numbered 9412, was signed and approved by the Mayor and attested by the City Clerk.

Ordinance No. 9412 – Amending the City Code to Reduce the Number of 3:00 a.m. Alcohol Beverage Licenses

Consideration of a Resolution Authorizing the City to Adopt New Salary Ranges for Non-Represented Employees to be Effective January 1, 2022 (Resolution No. 21-058). Interim City Administrator Nakahodo asked Human Resource Manager Casey Campbell to present this item to Council. Ms. Campbell stated that the City's personnel policy provides that the City Council shall approve the City's overall job classification system, salary ranges, and general compensation strategy and plan. On August 20, 2019, the City Council approved recommendations coming out of a compensation study performed by Gallagher Benefit Services. One of those recommendations is that in order to retain a competitive position in the marketplace and to maintain a current and workable

Resolution No. 21-058

– Adoption of Salary
Ranges for Calendar
Year 2022

compensation program, salary ranges be adjusted annually. Gallagher Benefit Services has recommended that salary ranges be increased between 2.0-2.5% for 2021. Accordingly, staff recommends that salary ranges be increased by 2.5%. Discussion ensued. C. Smith moved to approve Resolution No. 21-058, seconded by C. Pellumbi. The roll was called and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried 8-0.

Consideration of an Ordinance Authorizing Payment for Certain Accounts Due and Payable by the City Through July 30, 2021 {Bill No. 7617 (Ordinance No. 9414)}. C. C Smith moved that Bill No. 7617 be placed on first reading, seconded by C. Clarke. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7617 was read. C. Clarke moved that Bill No. 7617 be placed on second and final reading and passed as Ordinance No. 9414, seconded by C. Smith. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7617 was read. Thereupon Mayor DeLong declared the motion carried and the Bill duly passed. Said Bill was then numbered 9414, was signed and approved by the Mayor and attested by the City Clerk.

Ordinance No. 9414 – Approving Accounts Due and Payable by the City Through July 30, 2021

Interim City Administrator Nakahodo stated that the Upcoming City Items of Note, the NKC Business Council's Annual Report to the Council, the NKC YMCA Q2 Report and the North Kansas City Hospital Covid Update were in the agenda packet for review.

Staff Comments

C. Clevenger stated he knows the mask wearing is not popular, but it is necessary at this time. He also welcomed the new bakery and the new Mexican restaurant to North Kansas City.

Councilmembers' Comments

- C. Roberts reminded everyone to mask up. He stated the new grocery store coming to One North is exciting. He also said that Sunday is International Cat Day.
- C. Clarke asked everyone to please get their Covid vaccine.
- C. Pellumbi thanked everyone for their support and commitment to keeping everyone safe. She asked that everyone please get vaccinated.

C. Graves stated his focus remains on the development of a Skate Park in North Kansas City. He stated we should work on the River Forest Park first then turn our focus to the Skate Park. He also stated we should be proactive in working on a solution for the homeless when the temperatures outside become frigid this winter.

C. Saper stated he endorsed us getting a winter plan in place for the homeless. He also welcomed any new individuals to North Kansas City and asked that they and existing residents reach out and become involved in the City.

C. Tull did remind everyone that last year when the temperatures were frigid that Chief Freeman opened the Police Station lobby for anyone that needed to get out of the cold. She stated she was in favor of planning for the future and meeting the needs of the homeless. She stated that the Road District would meet this Friday at City Hall. She plans to attend to discuss Armour Road. She thanked the Mayor, staff and Council for getting the mask order out this past week.

C. Smith asked that everyone please go get your vaccination. It is the best thing you can do for your neighbors.

Mayor DeLong stated he did the mask order based on the new CDC guidance, the rise in cases, and talking to Dr. Reintjes at the hospital, this situation is not getting any better, it is getting worse. He stated he did the mask order in the best interest of the City. He thanked Tom Barzee and Kim Nakahodo for their work on the mask order.

C. Smith moved to adjourn at 7:40 PM, seconded by C. Pellumbi. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0.

Mayor's Comments

Adjournment

	Council Adjourned	
	Mayor	
Attest:	,	
City Clerk	_	

Approved this 17th Day of August 2021

MEMORANDUM



TO: Kim Nakahodo, Interim City Administrator

FROM: Megan Summers, Permit Technician

DATE: August 4, 2021

RE: Snow and Roast Food Truck Conducting Business on City-owned Property

Jasmine Varela, of Snow and Roast Food Truck, has requested permission to set up her food truck in the North Kansas City Library Parking Lot during the fall City Wide Garage Sale on September 18, 2021. Snow and Roast has an active 2021 Business License in the City and an up-to-date inspection on file with the Fire Marshal. The business owner has also obtained permission from the Library Director. The food truck would serve coffee, hot chocolate, and shaved ice to those walking around attending garage sales. Any trash generated from her presence in the lot will be cleaned up before the truck departs.



PERMIT NO);
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APPLICATION FOR SPECIAL EVENT PERMIT
APPLICANT NAME: Jasmine Varela
MAILING ADDRESS: 1201 Clark Ferguson Drive
PHONE:snowandroast@gmail.com
EVENT INFORMATION
NAME OF EVENT [I.E. JONES WEDDING]: City Wide Garage Sales
NAME OF EVENT [I.E. JONES WEDDING]: City Wide Garage Sales EVENT DATE: 9/18/21 EVENT HOURS: 7am-5pm
EVENT LOCATION (Address), 2251 Howell St Parking Lot
PROPERTY OWNER: NKC Library PHONE: 816-221-3360
NAME & PHONE NUMBER OF TWO PEOPLE WHO WILL BE ONSITE MANAGING EVENT: PERSON 1: Jasmine Varela 816-518-3009
PERSON 2:
DETAILED DESCRIPTION OF EVENT: Set up Snow and Roast truck in NKC Library Parking lot for the City Wide Garage Sales. Serve coffee, hot chocolate, and shaved ice. I have obtained permission from the Library Director to set up in their parking lot and serve any foot traffic generated by the City Wide garage sales. I will also take care of any trash generated.
NUMBER OF EXPECTED ATTENDEES: Foot Traffic IS THIS A HIGHER OCCUPANCY LOAD THAN PERMITTED BY YOUR CERTIFICATE OF OCCUPANCY: YES NO N/A
IF YES, ESTIMATE ATTENDEES OVER NORMAL LIMIT:
IS THIS EVENT PUBLIC PRIVATE [INVITATION ONLY]
WILL EVENT BE HELD WITHIN 100 FEET OF A CHURCH OR SCHOOL: YES NO
WILL FOOD BE SERVED: YES NO [IF YES, CONTACT CLAY COUNTY HEALTH AT 816-595-4350]
WILL YOUR SPECIAL EVENT INCLUDE: DJ/BAND/MUSIC STAGE TENT OPEN FLAMES
□STREET CLOSING □ALCOHOL □HEATERS □SECURITY □PYROTECHNICS □FOOD
IS EVENT: INDOORS OUTDOORS OTHER
WILL THERE BE SECURITY: ARMED UNARMED HOW MANY:

ARE YOU REQUESTING SPECIAL SERVICES FROM THE CITY OF NKC? ☐YES ☑NO
IF YES, EXPLAIN:
IF REQUESTING A STREET CLOSURE, HAVE YOU NOTIFIED THE PROPERTY OWNERS EFFECTED BY THE CLOSURE? \square YES \square NO
FOR OUTDOOR EVENTS
WILL THERE BE A TENT? YES NO IF YES, HOW MANY SQUARE FEET?
LIST TYPE OF BARRICADE TO BE USED TO ENCLOSE THE EVENT:
☐ PLASTIC SNOW FENCE ☐ WOOD BARRICADES ☐ STEEL BIKE RACKS ☐ CHAIN LINK
□ OTHER
HOW MANY PORTA-POTTIES WILL BE ONSITE FOR EVENT: n/a
FOR EVENTS REQUESTING ALCOHOL
WHO IS THE LIQUOR LICENSE HOLDER: n/a
WHAT BUSINESS ARE THEY WITH:
[SEE ATTACHED REQUIREMENTS AND POLICIES GOVERNING TEMPORARY CATERER'S PERMITS.]
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
APPLICANTS PRINTED NAMES JOYCLA
APPLICANTS SIGNATURE: DATE: 8/3/2/
The state of the s
CITY APPROVALS
DIAGRAM OF PREMISE
PROPERTY OWNER APPROVAL
COPY OF STATE OF MISSOURI TCP
APPLICATION RECEIVED BY DATE:
FIRE MARSHALL APPROVAL DATE:
POLICE DEPARTMENT APPROVAL DATE:
DIRECTOR OF LIQUOR CONTROL APPROVAL DATE:
ACTION BY CITY COUNCIL DATE:

#### Victoria Meier Ressler

From:

Lori < lmangan@nkcpl.org>

Sent:

Wednesday, July 28, 2021 4:04 PM

To:

Jasmine Varela

Cc:

Victoria Meier Ressler

Subject:

Re: City Wide Garage Sale, September 18th

Hi Jasmine, I am sorry it has taken me so long to get back to you, the week has gotten away from me. I think setting up in the parking lot during the City Wide Garage Sale on Sept 18th would be just fine. I checked with the City and you would need to fill out a Short Term Conditional Use Permit. You may already be doing these when you set up around the parks, but here is the link just in case

http://www.nkc.org/cms/One.aspx?portalId=2375314&pageId=2987724#Scup

Please let me know if you need anything else and have a great day! Lori Mangan

On Sun, Jul 25, 2021 at 8:39 PM Jasmine Varela <<u>snowandroast@gmail.com</u>> wrote: Hi Lori and Victoria,

I was interested in getting permission from NKC Public Library for parking in your parking lot on September 18th during the City Wide Garage Sale.

I think it would be fun and a great idea, and location for the neighbors of NKC to stop by for some Coffee or Snow Cones!

I would also make sure to have a trash can available, and that no trash or litter is left behind from our items in your parking lot.

Please let me know if this is something we can do, Thank you.

Sincerely, Jasmine Varela Snow&Roast

Lori Mangan Director North Kansas City Public Library 2251 Howell St North Kansas City, MO 816-221-3360 www.nkcpl.org

### **MEMORANDUM**



**TO:** Kim Nakahodo, Interim City Administrator

**FROM:** Megan Summers, Permit Technician

**DATE:** August 9, 2021

**RE:** North Kansas City High School Feeder Back to School Night

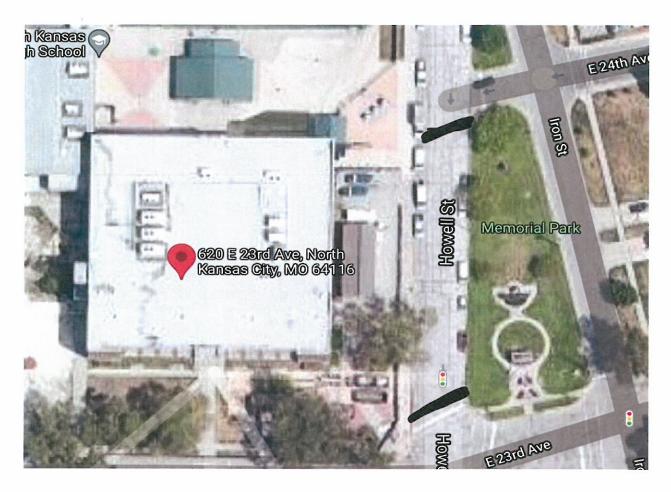
Dr. Drew White, Principal of North Kansas City High School, is requesting a Short-Term Conditional Use Permit for the NKC Feeder Back to School Night on August 19, 2021. The school is requesting to close Howell Street between East 23rd Avenue and East 24th Avenue, from 5:00pm to 7:00pm. It is estimated that 600 people will attend the event, which has been moved outside due to rising cases of Covid-19 in the metro area. Students will DJ the event and the NKC HS Band/Drumline will perform. Depending on availability, a NKC licensed food truck may be hired for the event, upon which an inspection with the Fire Marshal will occur if required.



PERMIT NO: SPEC-003126-2024

	ION FOR SPECIAL EVENT PERMIT
Drew White APPLICANT NAME:	
620 E. 23rd Ave	. North Kansas City, MO 64116
MAILING ADDRESS.	
816-321-5310	drew.white@nkcschools.org EMAIL:
PHONE:	EMAIL.
E	VENT INFORMATION
	NKC Feeder Back To School Night
NAME OF EVENT [I.E. JONES WEDDING 8/19/2021	]:2 hrs.
EVENT DATE:	
	EVENT HOURS: 23rd Ave. North Kansas City, MO 64116
EVENT LOCATION (Address):	ity School District 816-321-5310
NORTH Kansas C	PHONE:
	OPLE WHO WILL BE ONSITE MANAGING EVENT:
Drew White; 816-738-34	65
PERSON 1: Jonalee Searcey; 816-90	05-4126
PERSON 2:	
Flementary students and families. \(\) regarding the upcoming school yea	I Night event for North Kansas City HS and Briarcliff We plan to provide entertainment and information r.
	600
NUMBER OF EXPECTED ATTENDEES:	IS THIS A HIGHER OCCUPANCY LOAD
THAN PERMITTED BY YOUR CERTIFIC	TATE OF OCCUPANCY: YES NO NO N/A
IF YES, ESTIMATE ATTENDEES OVER	NORMAL LIMIT:
IS THIS EVENT PUBLIC PRIVA	804 (11) ■ 900 089/930080 VARIOUS (1000 047 1900 € 1)
	ET OF A CHURCH OR SCHOOL: Z YES NO
	NO [IF YES, CONTACT CLAY COUNTY HEALTH AT 816-595-4350]
	: ☑ DJ/BAND/MUSIC ☐ STAGE ☐ TENT ☐ OPEN FLAMES
	□ HEATERS □ SECURITY □ PYROTECHNICS □ FOOD
	ORS OTHER
WILL THERE BE SECURITY ! ADMED	ITTUNARMED HOW MANY:

ARE YOU REQUESTING SPECIAL SERVICES FROM THE CITY OF	OF NKC? YES NO
IF YES, EXPLAIN:	
IF REQUESTING A STREET CLOSURE, HAVE YOU NOTIFIED TO BY THE CLOSURE? ☑YES ☐NO	THE PROPERTY OWNERS EFFECTED
FOR OUTDOOR EVENT	'S
WILL THERE BE A TENT? YES NO IF YES, HOW MAN	NY SQUARE FEET?
LIST TYPE OF BARRICADE TO BE USED TO ENCLOSE THE EV	ENT:
☐ PLASTIC SNOW FENCE ☐ WOOD BARRICADES ☐ STE	EL BIKE RACKS 🗖 CHAIN LINK
✓ OTHER	
HOW MANY PORTA-POTTIES WILL BE ONSITE FOR EVENT:	N/A 
FOR EVENTS REQUESTING A	LCOHOL
WHO IS THE LIQUOR LICENSE HOLDER:	
WHAT BUSINESS ARE THEY WITH:	and the second s
[SEE ATTACHED REQUIREMENTS AND POLICIES GOVERNING	TEMPORARY CATERER'S PERMITS.]
APPLICANTS PRINTED NAME:	
APPLICANTS SIGNATURE:	DATE:
CITY APPROVALS -	
DIAGRAM OF PREMISE PROPERTY OWNER APPROVAL COPY OF STATE OF MISSOURI TCP	
APPLICATION RECEIVED BY	DATE:
FIRE MARSHALL APPROVAL	DATE:
POLICE DEPARTMENT APPROVAL	DATE:
DIRECTOR OF LIQUOR CONTROL APPROVAL	DATE:
ACTION BY CITY COUNCIL	DATE:



**Date:** August 19th **Time:** 5:00-7:00

 Portion of the street closed from 5:00-6:00 for North Kansas City Feeder Pattern Family Night

Activities that we are proposing for our Hornet Community:

- North Kansas City HS Student DJs
- North Kansas City HS Student Facepainters
- Grill hot dogs
- Kona Ice or Ice Cream Truck
- North Kansas City HS Cheerleaders
- Henry the Hornet Mascot
- North Kansas City HS Band/Drumline
- North Kansas City Fire and/or Police for a community outreach opportunity

#### **Megan Summers**

From:

Kim Nakahodo

Sent:

Tuesday, August 3, 2021 8:02 AM

To:

David L. Harris; Megan Summers; Kevin R. Freeman; Dave Hargis

Cc:

Crystal Doss; Anthony Sands

Subject:

RE: Meet the Teacher night at NKCHS --- City Council Request

Attachments:

NKC Back to School Night 2021.docx

All ---

Attached please find a map/information sent over by Dr. White for the event on August 19. Seems pretty straightforward, block off Howell right in front of the high school from 5-7 p.m.

Please let me know if you have any concerns with this request before tonight's Council meeting.

Thanks!



Kim Nakahodo • Interim City Administrator

City of North Kansas City, MO

2010 Howell Street • North Kansas City, MO 64116

Phone: 816.412.7814 Fax: 816.421.5046

www.nkc.org

From: David L. Harris <dlharris@nkc.org> Sent: Monday, August 2, 2021 2:07 PM

To: Kim Nakahodo <knakahodo@nkc.org>; Megan Summers <msummers@nkc.org>; Kevin R. Freeman

<a href="mailto:krfreeman@nkc.org">krfreeman@nkc.org</a>; Dave Hargis <a href="mailto:dhargis@nkc.org">dhargis@nkc.org</a>

**Cc:** Crystal Doss <cdoss@nkc.org>; Anthony Sands <asands@nkc.org> **Subject:** RE: Meet the Teacher night at NKCHS --- City Council Request

As soon as we receive more information. I will take a look at their information from a code compliance viewpoint and respond to you promptly.

David

**David Harris, CBO •** Building Official Code Compliance Manager

City of North Kansas City, MO

2010 Howell Street • North Kansas City, MO 64116

Phone: 816.274.6006 • Fax: 816.421.0966

www.nkc.org

From: Kim Nakahodo < <a href="mailto:knakahodo@nkc.org">knakahodo@nkc.org</a> Sent: Monday, August 2, 2021 12:37 PM

To: Megan Summers < msummers@nkc.org>; Kevin R. Freeman < krfreeman@nkc.org>; Dave Hargis < dhargis@nkc.org>;

David L. Harris < <a href="mailto:dlharris@nkc.org">dlharris@nkc.org</a> <a href="mailto:ccea;">cce: Crystal Doss < <a href="mailto:cdoss@nkc.org">cdoss@nkc.org</a> <a href="mailto:cdoss@nkc.org">cdoss@nkc.org</a>

Subject: Meet the Teacher night at NKCHS --- City Council Request

All ---

I just received a phone call from the Mayor who received a call from Dr. White at the High School. Due to the rapidly changing COVID-19 dynamics, they would like to change their Meet the Teacher night (Thursday, August 19) to an outdoor event, closing part Howell Street to accommodate the event.

I do not have a map/information yet, but I should have it by the close of business today. The current plan is that Dr. White will come to the City Council meeting tomorrow night to make his request. The current Agenda is posted already, so his only option in a timely manner is to appeal to the Council during Comments from the Public.

My thought is, if staff can review their map/information before tomorrow night's meeting, we can provide comment on Dr. White's request, (yay or nay with revisions), then place the item on the August 17 City Council Agenda for formal action, but giving Dr. White a thumbs up/down at tomorrow's meeting so they can begin to prepare for the event.

I know this is rushed, but I am trying to accommodate their intent to conduct a safe event in a timely manner. Please let me know if you have any concerns.

Thanks!



Kim Nakahodo • Interim City Administrator City of North Kansas City, MO 2010 Howell Street • North Kansas City, MO 64116

Phone: 816.412.7814 Fax: 816.421.5046

www.nkc.org

### **MEMORANDUM**



**TO:** Kim Nakahodo, Interim City Administrator

**FROM:** Megan Summers, Permit Technician

**DATE:** August 11, 2021

**RE:** Candy Cane 5k/10k Race

Auzzi Carter of Bodies Race Company is requesting a Short-Term Conditional Use Permit for the Candy Cane 5k/10k Race to take place on December 11, 2021. The requested event would consist of several roads between Swift and Howell to be closed to vehicular traffic between 8:00am and 10:00am (detailed route and barricade map attached). The Start and Finish of the race will occur at City Hall, 2010 Howell Street, with race attendees using the City Hall Parking Lot. Approximately 150 entrants and volunteers are expected to attend. Road closures will be marked with orange cones. No alcohol or food will be served, and no inspections will need to occur.



## APPLICATION FOR SPECIAL EVENT PERMIT

APPLICANT NAME:	
MAILING ADDRESS:	
PHONE:	EMAIL:
	EVENT INFORMATION
NAME OF EVENT [I.E. JONES	SWEDDING]:
EVENT DATE:	EVENT HOURS:
EVENT LOCATION (Address)	):
PROPERTY OWNER:	PHONE:
NAME & PHONE NUMBER OF	F TWO PEOPLE WHO WILL BE ONSITE MANAGING EVENT:
PERSON 1:	
DETAILED DESCRIPTION OF	EVENT:
	ENDEES: IS THIS A HIGHER OCCUPANCY LOAD CERTIFICATE OF OCCUPANCY: YES NO N/A
IF YES, ESTIMATE ATTENDE	EES OVER NORMAL LIMIT:
IS THIS EVENT 🗖 PUBLIC	PRIVATE [INVITATION ONLY]
WILL EVENT BE HELD WITH	IIN 100 FEET OF A CHURCH OR SCHOOL: Tyes In No
WILL FOOD BE SERVED:	YES NO [IF YES, CONTACT CLAY COUNTY HEALTH AT 816-595-4350]
WILL YOUR SPECIAL EVENT	INCLUDE: DJ/BAND/MUSIC STAGE TENT OPEN FLAMES
STREET CLOSING ALC	COHOL  HEATERS  SECURITY  PYROTECHNICS  FOOD
IS EVENT: INDOORS	OUTDOORS OTHER
WILL THERE BE SECURITY:	☐ ARMED ☐ UNARMED HOW MANY:

ARE YOU REQUESTING SPECIAL SERVICES FROM THE CITY	Y OF NKC? YES NO
IF YES, EXPLAIN:	
IF REQUESTING A STREET CLOSURE, HAVE YOU NOTIFIED BY THE CLOSURE? ☐ YES ☐ NO	THE PROPERTY OWNERS EFFECTED
FOR OUTDOOR EVEN	NTS
WILL THERE BE A TENT? YES NO IF YES, HOW MA	ANY SQUARE FEET?
LIST TYPE OF BARRICADE TO BE USED TO ENCLOSE THE E	EVENT:
☐ PLASTIC SNOW FENCE ☐ WOOD BARRICADES ☐ ST	EEL BIKE RACKS CHAIN LINK
OTHER	
HOW MANY PORTA-POTTIES WILL BE ONSITE FOR EVENT:	:
FOR EVENTS REQUESTING	ALCOHOL
WHO IS THE LIQUOR LICENSE HOLDER:	
WHAT BUSINESS ARE THEY WITH:	
[SEE ATTACHED REQUIREMENTS AND POLICIES GOVERNIN	
APPLICANTS PRINTED NAME:	
APPLICANTS SIGNATURE:	DATE:
CITY APPROVALS	S
<ul> <li>DIAGRAM OF PREMISE</li> <li>PROPERTY OWNER APPROVAL</li> <li>COPY OF STATE OF MISSOURI TCP</li> </ul>	
APPLICATION RECEIVED BY	DATE:
FIRE MARSHALL APPROVAL	DATE:
POLICE DEPARTMENT APPROVAL	DATE:
DIRECTOR OF LIQUOR CONTROL APPROVAL	DATE:
ACTION BY CITY COUNCIL	DATE:

#### ---- OTHER REQUIREMENTS -----

**DIAGRAM OF THE PREMISES:** SUBMIT A DRAWING SHOWING LOCATION OF EVENT, FIXTURES, AND OTHER EQUIPMENT THAT WILL BE INVOLVED (STAGE, DJ, HEATERS, BARRIERS, ETC.), ALONG WITH WHERE ALCOHOL WILL BE SOLD AND CONSUMED IF APPLICABLE. MARK POINTS OF ENTRY/EXIT. IF THERE WILL BE ANY OUTDOOR SEATING AND PORTA-POTTIES, SHOW WHERE IT WILL BE LOCATED AND INCLUDE A MEASUREMENT OF THE ENTIRE OUTSIDE PERIMETER OF THE EVENT.

**PROPERTY OWNER'S APPROVAL:** THERE MUST BE A LETTER FROM THE PROPERTY OWNER STATING APPROVAL WHICH MUST INCLUDE WHERE THE EVENT IS TO BE HELD AND THE START/END TIMES FOR THE EVENT.

**SPECIAL EVENT APPLICATION DEADLINE:** THIS APPLICATION SHOULD BE MADE A MINIMUM OF <u>21</u> DAYS IN ADVANCE OF YOUR EVENT TO SECURE APPROVAL BY CITY COUNCIL.

**LIQUOR LICENSES:** APPLICANT MUST APPLY FOR AND RECEIVE A TEMPORARY CATERING LIQUOR LICENSE FROM THE STATE OF MISSOURI PRIOR TO THE TEMPORARY CATERERS PERMIT ISSUED BY THE CITY OF NORTH KANSAS CITY. THE TEMPORARY CATERERS PERMIT MUST BE FINALIZED FOR PROCESSING BY THE CITY AT LEAST THREE (3) BUSINESS DAYS PRIOR TO EVENT.

APPLICANT IS RESPONSIBLE FOR THE REMOVAL OF ALL MATERIAL, EQUIPMENT, AND DEBRIS WITHIN TWENTY-FOUR (24) HOURS OF EXPIRATION OF THIS PERMIT.

#### ---- POLICIES GOVERNING SPECIAL EVENTS AND TEMPORARY CATERER PERMITS ----

**4.16.020 ALL RETAIL LICENSES:** THE DIRECTOR OF LIQUOR CONTROL MAY ISSUE A TEMPORARY PERMIT TO CATERERS AND OTHER PERSONS HOLDING LICENSES TO SELL INTOXICATING LIQUOR BY THE DRINK AT RETAIL FOR CONSUMPTION ON THE PREMISES WHO FURNISH PROVISONS AND SERVICE FOR USE AT A PARTICULAR FUNCTION, OCCASSION, OR EVENT AT A PARTICULAR LOCATION OTHER THAN THE LICESNED PREMISES. THE TEMPORARY PERMIT SHALL BE EFFECTIVE FOR A PERIOD NOT TO EXCEED ONE HUNDRED SIXTY-EIGHT (168) HOURS (SEVEN DAYS) AND SHALL AUTHORIZE THE SERVICE OF ALCOHOLIC BEVERAGES AT SUCH FUNCTION, OCCASION, OR EVENT DURING THE HOURS AT WHICH ALCOHOLIC BEVERAGES MAY LAWFULLY BE SOLD OR SERVED UPON PREMISES LICENSED TO SELL ALCOHOLIC BEVERAGES FOR ON-PREMISES CONSUMPTION. FOR EVERY PERMIT ISSUED PURSUANT TO THE PROVISIONS OF THIS SECTION, THE PERMITTEE SHALL PAY TO THE CITY THE SUM OF TEN DOLLARS (\$10) FOR EACH CALENDAR DAY, OR FRACTION THEREOF, FOR WHICH THE PERMIT IS ISSUED.

**EMPLOYEE LIQUOR PERMITS:** ANYONE WHO WILL BE ACTING IN THE CAPACITY OF A BAR MANAGER, BARTENDER, WAITER, WAITRESS, CASHIER, SALES CLERK, STOCK PERSON, DOORMAN, OR OTHER PERSON RESPONSIBLE FOR CHECKING IDENTIFICATION CARDS TO DETERMINE AGE MUST HAVE ON PREMISE THEIR NORTH KANSAS CITY LIQUOR PERMIT.

**STREET CLOSURE:** IF A PUBLIC STREET WILL BE BLOCKED OFF FOR THE EVENT, A TRAFFIC CONTROL PLAN MUST BE INCLUDED WITH DIAGRAM FOR APPROVAL.

**OCCUPANCY LOAD CERTIFICATE:** A COPY OF THE OCCUPANT LOAD CERTICIATE WHICH STATES THE INTERIOR OCCUPANT CAPACITY OF THE PREMISE MAY BE NEEDED.

**HEALTH PERMIT:** A COPY OF THE HEALTH PERMIT SHALL BE DISPLAYED FOR SPECIAL EVENTS SERVING FOOD.

#### **12.32.075 DISORDERLY CONDUCT:**

A. GENERALLY. NO PERSON SHALL ENGAGE IN DISORDERLY CONDUCT OR ANY CONDUCT TENDING TOWARD A BREACH OF THE PEACE OR ENGAGE IN ANY VIOLENT, TUMULTUOUS, OFFENSIVE AND DISORDERLY CONDUCT BY THREATENING, QUARRELLING, CHALLENGING TO FIGHT OR FIGHTING, OR BY USING OBSCENE, OFFENSIVE, PROFANE OR UNSEEMLY LANGUAGE TO THE ANNOYANCE, DISTURBANCE OR VEXATION OF ANOTHER.

B. WHEN NOISES CONSTITUTE DISORDERLY CONDUCT. THE CAUSING OR MAKING OF ANY UNNECESSARY LOUD NOISE BY THE USE OF AMPLIFIED SPEAKERS OR SOUND SYSTEMS SHALL BE CONSIDERED DISORDERLY CONDUCT (EXCEPTED HEREFROM IS THE USE OF CITY SOUND EQUIPMENT UTILIZED AT THE ATHLETIC FIELDS AND CITY-SPONSORED SPECIAL EVENTS).



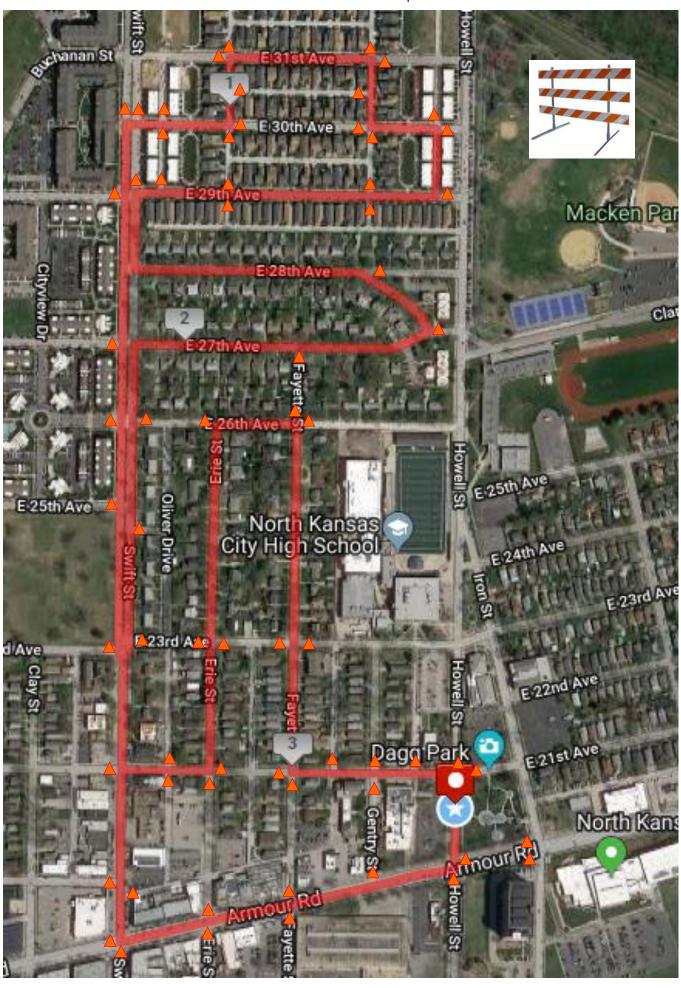
#### **Important Notes for ALL Volunteers:**

Find your spot on the map and familiarize yourself with your location. We want ALL volunteers in their spot and READY to go by 5 PM. Read the Volunteer Responsibility (below) for detailed instructions on your spot. Finally, refer to Barricade Map (page 3) and please place your barricades in correct position on the road way at your intersection at 5:15 PM. Volunteers need to redirect all possible traffic. *If they live on the route and need to proceed, wait for a break in the runners and tell them to proceed with EXTREME caution because there are runners on the road. If you have questions please do not wait until race day. Email them to (brad@bodiesrc.com) now or contact your coordinator. Your emergency contact for race day is Jen – 816-703-8253.

Remember to bring the fun & energy! Volunteers are what make a course great! Bring music (radio, car stereos, mp3 players, etc.), noise makers, funny & encouraging signs, lights (remember the theme is Christmas lights), even costumes or whatever else you can do to make it fun for the runners!

#### **Volunteer Spot & Responsibility**

- 1. Armour & Howell Turn the runners to their Right (heading West) on Armour Rd. After the last runner passes move to your second location at the corner of 21st & Howell St to turn runners right on Howell (South) to the finish and mange traffic.
- 2. Armour & Fayette Manage traffic, once runners pass move to second location at Fayette & 21st Ave turn runners to their left (East) & manage any traffic.
- 3. Armour & Erie Manage traffic, once runners pass move to second location at Erie & 21st Ave turn runners to their left (North) & manage any traffic.
- 4. Armour & Swift Turn runers to their right (North) once the last runners passes move to spot 5 or 6 to assist.
- 5. Swift & 21st Manage traffic, when runners start to return (heading South) turn then to their left (East)
- 6. **Swift & 23**rd Manage traffic, move runners to the left lane as they approach (heading North). They will return (heading South) in the opposite lane.
- 7. Swift & 25th mange traffic,
- 8. Swift & 26th mange traffic,
- 9. Swift & 27th manage traffic, runners will pass in left lane (heading North on Swift), when they return (heading West on 27th) turn them to their left (heading South) in the opposite lane on Swift.
- 10. **Swift & 28**th (water station) manage traffic, runners will pass in left lane (heading North on Swift), they will return in the opposite lane heading South, turn them to their left on 28th (heading East).
- 11. Swift & 29th manage traffic, runners will past in left lane (heading North on Swift), when they return (heading West on 29th) turn them to their left (heading South) in the opposite lane on Swift.
- 12. Swift & 30th manage traffic, turn runners to their right (heading East) on 30th
- 13. 30th & ?? manage traffic, turn runners to their left (heading North) on ??
- 14. ?? & ?? manage traffic
- 15. 31st & ?? manage traffic, turn runners to their right (heading East)
- 16. 31st & ?? manage traffic, turn runners to their right (heading South)
- 17. ?? & ?? manage traffic
- 18. 30th & ?? mange traffic, turn runners to their left (heading East)
- 19. 30th & ?? manage traffic, turn runners to their right (heading South)
- 20. 29th & ?? manage traffic, turn runners to their right (heading West)
- 21. 29th & ?? manage traffic
- 22. 29th & ?? manage traffic
- 23. 28th & Howell Terrace manage traffic, turn runners to their right on (heading Southwest on Howell)
- 24. 27th & Howell Terrace manage traffic, turn runners to their right on (heading West on 27th)
- 25. 27th & Fayette manage traffic
- 26. 21st & Oliver Dr manage traffic
- 27. 23rd & Erie manage traffic
- 28. 26th & Erie manage traffic, turn runners to their right (East on 26th)
- 29. 26th & Fayette manage traffic, turn runners to their right (South on Fayette)
- 30. 23rd & Fayette manage traffic



### Candy Cane Course 5k - North KC

Saturday, Dec 8th North Kansas City

Race Day Contact: Jen McCleary Cell Phone #: 816-703-8253(Jen)

r	
Spot 1	
Spot 2	Angie & Laura Swoffer
Spot 3	Carlos & April Osegueda
Spot 4	Jeanette Rus
Spot 5	Kellyn Plause Weaver
Spot 6	Christy O'Laughlin
Spot 7	Beki Sidener
Spot 8	Sarah Lorenson
Spot 9	Maggie Keller
Spot 10	Pepper, Frank, Amalia, & Hannah Mendoza
Spot 11	Rachel Pearson
Spot 12	Melissa Maza
Spot 13	Gabe Pendleton
Spot 14	Jeanette Pendleton
Spot 15	Malachi Pendleton
Spot 16	Anna Mikulicz
Spot 17	Alek Kapetanovich
Spot 18	Angelo Anselmo
Spot 19	Thao Lamb
Spot 20	Kathy Huynh
Spot 21	Samuel Dyer
Spot 22	Coti Meier
Spot 23	Sean Toole
Spot 24	Kevin Torres
Spot 25	Renate Serzante
Spot 26	Briana Plause
Spot 27	Nathan White
Spot 28	Cindy Nguyen
Spot 29	Beki Serzante
Spot 30	Ethan Smith

THANK YOU AGAIN for your help!! As you can see this course does take a lot of support to make sure our runners stay safe. We can not express how much we appreciate you lending a hand!

From: Daniel M. Williams
To: Megan Summers

Subject: RE: STCUP - Candy Cane Run - Dec 11, 2021

Date: Tuesday, August 10, 2021 8:28:52 AM

Attachments: <u>image001.png</u>

This looks fine to me.

From: Megan Summers <msummers@nkc.org>

Sent: Monday, August 9, 2021 3:48 PM

To: Daniel M. Williams <a href="mailto:dmwilliams@nkc.org">dmwilliams@nkc.org</a>; James F. Bagley < JFBagley@nkc.org>

Subject: STCUP - Candy Cane Run - Dec 11, 2021

Auzzi Carter of Bodies Race Company is requesting a Short-Term Conditional Use Permit for the Candy Cane 5k/10k Race to take place on December 11, 2021. The requested event would consist of several roads between Swift and Howell to be closed to vehicular traffic between 8:00am and 10:00am (detailed route and barricade map attached). The Start and Finish of the race will occur at City Hall, 2010 Howell Street, with race attendees using the City Hall Parking Lot. Approximately 150 entrants and volunteers are expected to attend. Road closures will be marked with orange cones. No alcohol or food will be served, and no inspections will need to occur.



**Megan Summers** • Permit Technician City of North Kansas City, MO

2010 Howell Street • North Kansas City, MO 64116 Phone:816.274.6006 • Fax: 816.421.0966

www.nkc.org

From: James F. Bagley

Megan Summers; Daniel M. Williams To: Subject: RE: STCUP - Candy Cane Run - Dec 11, 2021 Tuesday, August 10, 2021 10:12:47 AM Date:

Attachments: image001.png

image002.png

#### Megan,

I couldn't get ahold of Auzzi yesterday, but I did talk with Brad. The submission has conflicting race times, that being said, I'm very much in favor of a 0800 to 1000 hours race. The race route hasn't change since Kathy Gates and I laid it out in 2013 for the first ever X-Mas Light 5K. They are not asking for anything from the PD and Chief is fine with it. I'll probably have a hand full of officers assist with traffic control at the start around Armour Road, but over all I'm good with the request.

Jim



Major James F. Bagley Jr. • Patrol Commander **North Kansas City Police Department** 

City of North Kansas City, MO

2020 Howell Street • North Kansas City, MO 64116 Phone: 816.412.7944 • Fax: 816.221.0432

jfbagley@nkc.org

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**From:** Megan Summers <msummers@nkc.org>

Sent: Monday, August 9, 2021 3:48 PM

To: Daniel M. Williams <a href="mailto:dmwilliams@nkc.org">dmwilliams@nkc.org</a>; James F. Bagley <a href="mailto:JFBagley@nkc.org">JFBagley@nkc.org</a>

Subject: STCUP - Candy Cane Run - Dec 11, 2021

Auzzi Carter of Bodies Race Company is requesting a Short-Term Conditional Use Permit for the Candy Cane 5k/10k Race to take place on December 11, 2021. The requested event would consist of several roads between Swift and Howell to be closed to vehicular traffic between 8:00am and 10:00am (detailed route and barricade map attached). The Start and Finish of the race will occur at City Hall, 2010 Howell Street, with race attendees using the City Hall Parking Lot. Approximately 150 entrants and volunteers are expected to attend. Road closures will be marked with orange cones. No alcohol or food will be served, and no inspections will need to occur.



Megan Summers • Permit Technician City of North Kansas City, MO 2010 Howell Street • North Kansas City, MO 64116 Phone:816.274.6006 • Fax: 816.421.0966 www.nkc.org

## **PROCLAMATION**

## Recognizing the 80th Anniversary of Cub Scout Pack 9 in North Kansas City, Missouri

**WHEREAS**, Cub Scout Pack 9 was founded in late 1941 and has been a solid part of the community ever since; and

**WHEREAS**, Cub Scout Pack 9 is currently sponsored by the First Christian Church and formerly by the First United Methodist Church prior to their closing down; and

**WHEREAS**, Cub Scout Pack 9 has received help from many thousands of adult volunteers, parents, grandparents, friends, and family over the last 80 years; and

**WHEREAS**, when Cub Scout Pack 9 was originally formed it was for boys ages 9-11 but today is for all boys and girls in grades K-5; and

**WHEREAS**, Cub Scout Pack 9 is taught how to protect themselves from being bullied or a victim of abuse for a better next generation and have the family as a centerpiece in their program, no matter what it looks like; and

**WHEREAS**, Cub Scout Pack 9 continues to support timeless values that still meet the needs of a family today; and

**WHEREAS**, Cub Scout Pack 9 motto is "Do Your Best" with a focus on individual achievement where all youth can grow and succeed.

**Now Therefore, I**, Bryant DeLong, Mayor, on behalf of the City Council, staff, and residents, do hereby joint Cub Scout Pack 9, and their families, leaders, and volunteers in celebrating the Pack's 80th anniversary.

Proclaimed this 17 th day of August, 2021
Mayor

### **MEMORANDUM**



**TO:** Mayor DeLong and Council Members

**FROM:** Casey Campbell, HR Manager

**DATE:** August 17, 2021

**RE:** 2022 Renewal of Employee Health Insurance

We have received the City's medical insurance renewal from Blue Cross Blue Shield of Kansas City ("BCBSKC") for 2022 and we are pleased to report that there will be a decrease of 7% to the City's health insurance plan for its employees.

The following reflects recent history of health insurance increases from year to year:

2016:	6.2%
2017:	0.0%
2018:	1.4%
2019:	12.6%, or 9.1% if employee moved to Blue Select Plus Network
2020:	19.0%
2021:	0.0%
2022:	-7.0%

All benefits were marketed this year by the City's health insurance broker, Lockton, and BCBSKC was the best option for our employees based on network and cost. The decision was to remain with BCBSKC due to disruption and price. Humana had competitive pricing, but a significant number of members would have had provider disruption. Aetna and Cigna were not competitive financially. The Blue Cross renewal was finalized with a 7% reduction in rates. This will result in an annual savings of approximately \$174,000. All plan designs remained the same for 2022.

Staff recommends renewal of this year's Blue Cross Blue Shield of Kansas City Medical insurance plan for 2022.

AN ORDINANCE ADOPTING AND APPROVING ADDENDUM TO GROUP CONTRACT (MAXIMUM REFUND ACCOUNT), TOGETHER WITH THE (A) BENEFIT AND RATE CONFIRMATION FOR THE CITY'S PREFERRED-CARE BLUE PPO PLAN; (B) BENEFIT AND RATE CONFIRMATION FOR THE CITY'S PERSONAL BLUE PPO PLAN; (C) BENEFIT AND RATE CONFIRMATION FOR THE CITY'S BLUESAVER PPO PLAN; (D) BENEFIT AND RATE CONFIRMATION FOR THE CITY'S BLUESELECT PLUS PERSONAL BLUE HRA PLAN; AND (E) BENEFIT AND RATE CONFIRMATION FOR THE CITY'S BLUESELECT PLUS PPO, EFFECTIVE JANUARY 1, 2022, WITH BLUE CROSS AND BLUE SHIELD OF KANSAS CITY REGARDING MEDICAL INSURANCE BENEFITS FOR THE EMPLOYEES OF THE CITY OF NORTH KANSAS CITY, MISSOURI.

______

**WHEREAS**, the City of North Kansas City, Missouri (the "City") is a body corporate, a third class city and political subdivision of the State of Missouri, duly created, organized and validly existing under and by virtue of the Constitution and laws of the State of Missouri; and

WHEREAS, the City has selected Blue Cross and Blue Shield of Kansas City ("BCBSKC") to provide health insurance for those of its employees who elect to participate in the City's health insurance program; and

**WHEREAS,** BCBSKC desires to enter into an agreement to provide the health insurance to the City for and on behalf of its employees; and

**WHEREAS**, the City desires to approve the Addendum to Group Contract (Maximum Refund Account), together with the various Plans being provided to the City by BCBSKC for the City's employees.

## NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF NORTH KANSAS CITY, MISSOURI, AS FOLLOWS:

<u>Section 1.</u> Approval of Addendum to Group Contract. The City Council does hereby find and determine that it is in the best interests of the citizens and City of North Kansas City, Missouri, to approve and enter into the Addendum to Group Contract (Maximum Refund Account) (the "**Agreement**") between the City and BCBSKC in connection with providing health insurance to the City's employees, which Agreement shall be in substantially the form of Exhibit 1, attached hereto and incorporated herein by reference. The City is hereby authorized to pay any and all costs and expenses associated with such Agreement.

<u>Section 2.</u> Approval of BCBSKC Plans. The City Council does hereby find and determine that it is in the best interests of the citizens and City of North Kansas City, Missouri, to approve and authorize the following plans provided to the City by BCBSKC (collectively, the "Plans") in connection with providing health insurance to the City's employees, which Plans

shall be in substantially the form of <u>Exhibit 2</u>, collectively attached hereto and incorporated herein by reference:

- A. Preferred-Care Blue PPO Plan—Benefit and Rate Confirmation (effective January 1, 2022);
- B. Personal Blue PPO Plan—Benefit and Rate Confirmation (effective January 1, 2022);
- C. Blue Saver PPO Plan—Benefit and Rate Confirmation (effective January 1, 2022);
- D. BlueSelect Plus Personal Blue HRA Plan Benefit and Rate Confirmation (effective January 1, 2022); and
- E. BlueSelect Plus PPO Plan Benefit and Rate Confirmation (effective January 1, 2022).

The City is hereby authorized to pay any and all costs and expenses associated with each such Plan.

- <u>Section 3.</u> The provisions of the Agreement and the respective Plans are hereby approved and adopted by the City Council of the City of North Kansas City, Missouri. The Mayor and City Clerk are hereby authorized and directed to execute the Agreement and each of the Plans, on behalf of the City of North Kansas City, Missouri.
- <u>Section 4</u>. Further Authority. The City shall, and the mayor, city clerk, city officials and employees of the City are hereby authorized and directed to take such further action, and execute such other documents, certificates and instruments as may be necessary or desirable to carry out and comply with the intent of this Ordinance.
- <u>Section 5.</u> Severability. The sections, paragraphs, sentences, clauses, and phrases of this Ordinance shall be severable. In the event that any such section, paragraph, sentence, clause, or phrase of this Ordinance is found by a court of competent jurisdiction to be invalid, the remaining portions of this Ordinance are valid, unless the court finds the valid portions of this Ordinance are so essential to and inseparably connected with and dependent upon the void portion that it cannot be presumed that the City has enacted the valid portions without the void ones, or unless the court finds that the valid portions, standing alone, are incomplete and are incapable of being executed in accordance with the legislative intent.
- <u>Section 5</u>. <u>Governing Law</u>. This Ordinance shall be governed exclusively by and construed in accordance with the applicable laws of the State of Missouri.
- <u>Section 6</u>. <u>Effective Date</u>. This Ordinance shall be in full force and effect from and after its passage by the City Council and approval by the Mayor.

ATTEST:	
Crystal Doss, City Clerk	
	<b>APPROVED</b> this 17 th day of August, 2021.
	Bryant DeLong, Mayor
APPROVED AS TO FORM:	
Anthony Bologna, City Attorney	Thomas E. Barzee, Jr., City Counselor

#### ADDENDUM TO GROUP CONTRACT

(MAXIMUM REFUND ACCOUNT)

This Addendum to Group Contract (this "Addendum") is made and entered into effective as of January 1, 2022 ("Effective Date") by and between CITY OF NORTH KANSAS CITY, ("Employer"), and Blue Cross and Blue Shield of Kansas City, on behalf of itself and its subsidiary Good Health HMO, Inc. d/b/a Blue-Care, Inc., if applicable (collectively, "BCBSKC", as applicable).

#### **RECITALS:**

- A. Employer has engaged BCBSKC to provide benefits for certain eligible Employees of Employer and the Employees' covered Dependents under the Group Contract(s) Numbered 11002000 issued to Employer by BCBSKC (the "Group Contract(s)").
- B. The terms of BCBSKC's engagement are set forth in the Group Contract(s) and the associated Health and Dental Benefit Certificate(s) ("Certificate(s)") (the Group Contract(s) and documents incorporated by reference into the Group Contract(s), including without limitation, the Certificate(s), are hereinafter collectively referred to as the "Contract"), pursuant to which BCBSKC agreed to arrange for the provision of certain health care services and/or dental care to Employer's eligible Employees and their covered Dependents and to pay for such benefits in accordance with the terms, conditions, limitations and exclusions specified in the Contract, including without limitation, its financial terms.
- C. Employer and BCBSKC desire to enter into an alternative funding arrangement in connection with the Contract, pursuant to which Employer's financial liability under the Contract as modified and supplemented by this Addendum will involve payment of premiums subject to adjustment if the incurred claims for the eligible Employees and their covered Dependents, collectively, are less than projected.
- D. In connection with the alternative funding arrangement, BCBSKC will prepare a year end accounting to determine whether the Net Billed Premium (as hereinafter defined) paid by Employer during a Contract Year (as hereinafter defined) are in excess of Total Expenses (as hereinafter defined) incurred during that Contract Year. If the Net Billed Premium for a Contract Year exceeds the Total Expenses for that Contract Year, BCBSKC will be required to pay a reconciliation amount to Employer pursuant to the terms of this Addendum. If the Total Expenses paid for a Contract Year exceeds the Net Billed Premium for that Contract Year, no amounts will be due from Employer, nor will BCBSKC be required to pay any amount to Employer.
- E. So long as this Addendum is in effect, the parties acknowledge that the alternative funding arrangement set forth herein will be employed in lieu of the standard premium arrangement described in the Contract, all as hereinafter set forth in this Addendum.

#### **AGREEMENT:**

NOW, THEREFORE, in consideration of the Recitals, mutual promises and agreements contained herein, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereby agree as follows:

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#### **Article 1 - Defined Terms**

- 1.1 All capitalized terms not specifically defined herein shall have the meaning given such terms in the Contract.
- 1.2 When appearing with an initial capital letter in this Addendum, the following capitalized and quoted terms shall have the meanings set forth below:
  - (a) "ACA Assessments" mean those Affordable Care Act (ACA) taxes, fees and assessments based upon or measured by or due to: (i) fees paid or payable to BCBSKC; (ii) claims paid pursuant to this Addendum; or (iii) coverage of Covered Persons, that are collected from Employer by BCBSKC. ACA Assessments may include, but are not limited to, the Health Insurance Providers Fee, the Patient-Centered Outcomes Research Institute Fee (a/k/a Comparative Effectiveness Fee) and the Transitional Reinsurance Fee.
  - (b) "Contract Year" means the twelve (12) month period commencing on either the Effective Date of this Addendum or any renewal date thereafter, as applicable, or such other period as may be agreed, in writing, by BCBSKC and Employer.
  - (c) "Gross Billed Premium" means the monthly premium amount as set forth in Article 6, payable by Employer to BCBSKC pursuant to Article 2 of this Addendum for the applicable Contract Year, and which consists of ACA Assessments, the Pooling Charge, Retention Charge and expected claims costs (which may include expected Medical Value Payments).
  - (d) "Incurred But Not Reported Reserve" or "IBNR Reserve" means the amount that reflects the incurred but unpaid claims liability for a designated period of time (e.g., Contract Year) while this Addendum was in effect, as actuarially determined by BCBSKC. Such claims include, without limitation, claims for Covered Services provided to Covered Persons that have not been paid or submitted, or that have been submitted but are in dispute or not finally adjudicated.
  - (e) "Incurred Claims" means the amount equal to: (i) the difference between the Paid Claims and the Pooling Amount; less (ii) the IBNR Reserve for the previous Contract Year (when applicable); and plus (iii) the INBR Reserve for the current Contract Year (i.e., the Contract Year for which the Maximum Refund Settlement is being performed as more particularly described in Article 3 of this Addendum).
  - (f) "Maximum Refund" means the maximum amount BCBSKC could owe to Employer pursuant to the Maximum Refund Settlement (as defined below) (not including any adjustment for premium-based ACA Assessments) and is equal to 10% of Net Billed Premium.
  - (g) "Medical Value Payments" Employer acknowledges that BCBSKC may have value-based payment arrangements with providers ("Value Program Providers") participating in certain health care delivery programs, including patient-centered medical homes, accountable care organizations or episode-based medical management. Pursuant to such health care delivery programs, Value Program Providers may be eligible for alternative payments, in lieu of or in addition to, traditional fee-for-service reimbursement, including

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but not limited to, withholds, bonuses, incentive payments, provider credits and member management fees (collectively, "Medical Value Payments"). The amount of Medical Value Payments Value Program Providers receive is specific to the Value Program Provider and may or may not be directly related to Employer, any Covered Person, or any other group or individual. Employer acknowledges that a portion of the Medical Value Payments payable to any one or more Value Program Providers may (i) be included in Paid Claims, (ii) include compensation for services that are related to Covered Services, including, but not limited to, coordination of care, and (iii) include compensation in recognition of Value Program Provider's achievement of stated performance objectives, including, but not limited to, quality of care, patient outcomes or cost.

- (h) "Net Billed Premium" means Gross Billed Premium, less ACA Assessments.
- "Paid Claims" means all payments for delivery of Covered Services during the Contract (i) Year for claims that were incurred while this Agreement was in effect or for claims that were incurred under the Maximum Refund Agreement between the parties for the previous Contract Year, if applicable and, capitation charges when applicable. Paid Claims include those amounts paid to a provider, which the provider has agreed to accept as payment in full at the time of claim payment for delivery of Covered Services provided to Covered Persons (including Medical Value Payments, as defined in Section 1.2(g)). Paid Claims are not reduced by any administration fees, network management fees, provider and pharmaceutical rebates, incentive arrangements, or any other reductions or credits a provider may periodically give BCBSKC, or any other amounts that a provider may pay BCBSKC for services such as administration, marketing, managed care or quality improvement programs performed by BCBSKC for the provider. BCBSKC retains these amounts and they do not reduce the amount of Paid Claims. All services are deemed to be incurred on the date the service was actually rendered. A claim shall be deemed to be paid when a valid draft for payment of such benefit has been issued to the person or persons authorized for such purpose by agreement of the Employer and BCBSKC.
- (j) "Pooling Amount" means the cumulative amount by which claims for payment for the provision of Covered Services to one or more Covered Persons in the Contract Year exceeded the pooling limit specified in Article 2.4 of this Addendum as determined by BCBSKC.
- (k) "Pooling Charge" means the charge to be paid by Employer to BCBSKC for claims in excess of the pooling limit specified in Article 2.4 of this Addendum.
- (l) "Retention Charge" means the charge to be paid by Employer to BCBSKC for contract administration, state premium and other taxes, risk charges, processing and investigating claims, utilization management, large case management, and other general services.
- (m) "Total Expenses" means the amount equal to the sum of: (i) Incurred Claims, (ii) Retention Charges; and (iii) Pooling Charges for the applicable Contract Year.

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#### **Article 2 - Employer's Rights and Obligations**

- 2.1 <u>Health Care Plan</u>. Employer acknowledges and agrees that this Addendum is effective for all health care services and/or all dental care provided pursuant to any Group Contract between Employer and BCBSKC.
- 2.2 <u>Premiums and Other Charges</u>. Notwithstanding anything to the contrary contained in the Contract, Employer and BCBSKC agree that the Gross Billed Premiums as set forth in Article 6 and any amount due pursuant to Article 3 of this Addendum to be paid by BCBSKC shall be determined as set forth in this Addendum. Subject to the Premium payment grace period expressly set forth in the Contract ("Grace Period"), Employer shall make such Gross Billed Premium payments on or before the Effective Date of this Addendum and on the monthly Due Date thereafter.
- 2.3 <u>Retention Charge</u>. Employer shall be assessed a monthly Retention Charge in an amount equal to 13% of the Net Billed Premium.
- 2.4 <u>Pooling Charge</u>. Employer shall be assessed a monthly Pooling Charge in an amount equal to 14.5% of the Net Billed Premium. The pooling limit is \$80,000.00 per Covered Person.
- 2.5 <u>Late Payment Charge</u>. BCBSKC reserves the right to charge a late payment fee of \$1,909.36 per month or, if lower, the highest interest rate permitted by law for all past due amounts in each instance in which Employer fails to timely pay any Gross Billed Premium in accordance with this Article 2.

#### **Article 3 – Maximum Refund Settlement**

- 3.1 <u>Settlement Report</u>. The parties hereby agree that BCBSKC shall, on or before the ninetieth (90th) day following the end of a Contract Year, provide Employer with a report in a format similar to that shown in Exhibit A hereto describing the Gross Billed Premium, the Net Billed Premium, ACA Assessments, Incurred Claims, the Maximum Refund, Pooling Charges and Retention Charges for the subject Contract Year.
- 3.2 <u>Maximum Refund Settlement Calculation</u>. For each applicable Contract Year, a "Maximum Refund Settlement" will be calculated as set forth below.
  - (a) The Total Expenses will be subtracted from the Net Billed Premium for the applicable Contract Year.
  - (b) In the event Total Expenses for a Contract Year exceeds Net Billed Premium for that Contract Year, no amounts will be due from Employer, nor will BCBSKC be required to pay any amount to Employer.
  - (c) In the event Net Billed Premium for a Contract Year exceeds the Total Expenses for that Contract Year, BCBSKC will be required to pay to Employer an amount equal to the sum of: (i) the lesser of: (A) Net Billed Premium less Total Expenses; or (B) the Maximum Refund; plus (ii) any adjustments to premium-based ACA Assessments.

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#### **Article 4 - Term and Termination**

- 4.1 <u>Term.</u> This Addendum shall become effective at 12:00 a.m. Central time on the Effective Date, and shall remain in effect for the Contract Year unless sooner terminated as provided in this Addendum. Thereafter, this Addendum shall automatically renew for successive Contract Years unless terminated as provided in this Addendum.
- 4.2 <u>Termination Upon Notice</u>. This Addendum may be terminated at the end of any Contract Year by Employer or BCBSKC giving the other party written notice at least thirty-one (31) days prior to the end of the then current Contract Year, which termination shall be effective as of 11:59 p.m. on the last day of the then current Contract Year unless otherwise agreed to, in writing, by the parties.
- 4.3 <u>Termination for Nonpayment</u>. BCBSKC may immediately terminate this Addendum in the event Employer fails to pay, prior to the expiration of the Grace Period, any amount payable by Employer under this Addendum.
- 4.4 <u>Termination Upon Mutual Agreement</u>. This Addendum may be terminated at any time by mutual written agreement of the parties.
- 4.5 <u>Automatic Termination</u>. This Addendum automatically terminates effective as of the effective date of termination or cancellation of the Contract for any reason.
- 4.6 <u>Effect of Termination</u>. In the event of the termination of this Addendum, the parties hereto acknowledge that a final "Maximum Refund Account Settlement" will be completed within ninety (90) days of the effective date of termination. Termination of this Addendum shall not affect the rights and obligations of the parties under the Contract.

#### **Article 5 - General Provisions**

- 5.1 <u>Construction</u>. The terms and conditions of this Addendum shall control in the event of any conflict or inconsistency between the terms and conditions of this Addendum and the Contract. All terms and conditions of the Contract not superseded or amended by this Addendum shall apply to this.
- 5.2 <u>Amendment</u>. Except as expressly provided in this Section 5.2 or elsewhere in this Addendum, this Addendum may be amended only by mutual written agreement of duly authorized representatives of the parties. BCBSKC may unilaterally amend this Addendum by giving written notice of such amendment to Employer to the extent such amendment is, in BCBSKC's sole discretion, necessary or appropriate to comply with: (i) state or federal laws or regulations, any change in such laws or regulations or any change in the interpretation of such laws or regulations; or (ii) the directives of the Board of Directors of BCBSKC.
- 5.3 <u>Counterparts</u>. This Addendum may be executed in counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.
- 5.4 <u>BCBSKC Prescription Drug Program</u>. BCBSKC contracts with a pharmacy benefit manager ("PBM") for certain prescription drug administrative services, including prescription drug rebate administration and pharmacy network contracting services.

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Under the agreement, PBM obtains rebates from drug manufacturers based on the utilization of certain prescription products by Covered Persons, and PBM retains the benefit of the rebate funds prior to disbursement. In addition, pharmaceutical manufacturers may pay administrative fees to PBM in connection with PBM's services of administering, invoicing, allocating, and/or collecting rebates, and the PBM retains the benefit of such amounts prior to disbursement. PBM may also receive other service fees or discounts from manufacturers as compensation for various services unrelated to rebates or rebate-associated administrative fees.

In addition, BCBSKC and PBM also contract with pharmacies to provide prescription products at discounted rates for BCBSKC members. The discounted rates paid by PBM and BCBSKC to these pharmacies differ among pharmacies within a network, as well as between networks. For pharmacies that contract with the PBM, the amount paid by BCBSKC to PBM under the BCBSKC contract with the PBM may vary from the various discount rates PBM pays to the pharmacies. Thus, where the BCBSKC rate exceeds the rate the PBM negotiated with a particular pharmacy, the PBM will realize a positive margin on the applicable prescription. The reverse may also be true, resulting in negative margin for the PBM. In addition, when the PBM receives payment from BCBSKC before payment to a pharmacy is due, the PBM retains the benefit of the use of these funds between these payments. BCBSKC is guaranteed a minimum level of discount whether through the PBM or where BCBSKC directly contracts with network pharmacies, which could result in the amount paid by Employer being more or less than the amount PBM and/or BCBSKC pay to pharmacies.

Employer acknowledges and agrees for itself and its Covered Persons that BCBSKC is not acting as a fiduciary with respect to rebate administration, pharmacy network management, or the prescription drug plan. Employer further acknowledges for itself and its Covered Persons that BCBSKC receives rebates from the PBM and may receive positive margin in connection with the pharmacy network, as well as other financial credits, administrative fees and/or other amounts from network pharmacies, drug manufacturers or the PBM (collectively "Financial Credits"). Employer acknowledges and agrees for itself and its Covered Persons that BCBSKC shall retain sole and exclusive right to all Financial Credits, which constitute BCBSKC property (and are not plan assets), and BCBSKC may use such Financial Credits in its sole and absolute discretion, including without limitation to help stabilize BCBSKC's overall rates and to offset expenses, and BCBSKC does not share Financial Credits with the Employer.

Without limitation to the foregoing, Employer acknowledges and agrees to the following ("Financial Credit Rules") for itself and its Covered Persons that: (1) Employer and/or Covered Persons shall have no right to receive, claim or possess any beneficial interest in any Financial Credits; (2) Applicable drug benefit copayments, coinsurance, outpatient prescription drug deductible, deductible and/or maximum allowable benefits (including without limitation Calendar Year Maximum and Lifetime Maximum benefits) shall in no way be adjusted or otherwise affected as a result of any Financial Credits, except as may be required by law; (3) Any deductible and/or coinsurance required for prescription drugs shall be based upon the allowable charge at the pharmacy, and shall not change as a result of any Financial Credits, except as may be required by law; and (4) Amounts paid to pharmacies or any prices charged at pharmacies shall in no way be adjusted or otherwise affected as a result of any Financial Credits

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### **Article 6-Gross Billed Premium Rates**

	PPO	PersonalBlue	BlueSaver
Employee	\$826.86	\$668.95	\$572.59
Employee & Spouse	\$1,736.45	\$1,402.40	\$1,198.84
Employee & Child(ren)	\$1,488.37	\$1,208.41	\$1,038.06
Family	\$2,275.82	\$1,825.28	\$1,548.36

	BlueSelect Plus PPO	BlueSelect Plus BlueSaver
Employee	\$658.07	\$616.44
Employee & Spouse	\$1,381.95	\$1,294.51
Employee & Child(ren)	\$1,184.54	\$1,109.58
Family	\$1,809.70	\$1,695.19

**IN WITNESS WHEREOF,** the parties hereto have executed this Addendum on the date set forth beneath their respective signatures.

City of North Kansas City	Blue Cross and Blue Shield of Kansas City
By:	By:
Title: <u>Mayor</u>	
Print Name: Bryant DeLong	Print Name:
Date: August 17, 2021	Date:

# EXHIBIT A MAXIMUM REFUND SETTLEMENT

Employer________Settlement Period [Date Range]

#### **PREMIUM**

Gross Billed Premium	[\$]
Less ACA Assessments	[\$]
Net Billed Premium	[\$]
EXPENSES	
Paid Claims Expense	[\$]
Less Excess Over \$ Pooling Amount	[\$]
Less IBNR as of [Beginning Date of Contract Year]	[\$]
Plus IBNR as of [End Date of Contract Year]	
Total Incurred Claims	[\$]
Pooling Charge [0-100%]	[\$]
Retention Charge [0-100%]	[\$]
Total Expenses	[\$]
CONTRACT YEAR RESULTS	
Net Billed Premium	[\$]
Less Total Expenses	[\$]
Subtotal	[\$]
Maximum Refund Allowed Per Contract*	[\$]
Applicable Refund of Premium-Based ACA Assessments	[\$]
AMOUNT DUE TO EMPLOYER	[\$]

^{*}Employer Net Billed Premium less Total Expenses not to exceed [0-100%] of Net Billed Premium for the Contract Year pursuant to Article 3.2.c. of the Contract.

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### **COBRA Rate Confirmation**

*NOTE: Plan names on Rate Confirmation must match the Plan names on the Offer Signature page

Cobra BlueSelect Plus Personal Blue	e HRA Rates
Employee	\$628.77
Employee & Spouse	\$1,320.40
Employee & Child(ren)	\$1,131.77
Family	\$1,729.09
Cobra BlueSelect Plus PPO Rates	
Employee	\$671.23
Employee & Spouse	\$1,409.59
Employee & Child(ren)	\$1,208.23
Family	\$1,845.89
Cobra Preferred-Care Blue PPO Plan	Rates
Employee	\$843.40
Employee & Spouse	\$1,771.18
Employee & Child(ren)	\$1,518.14
Family	\$2,321.34
Cobra Personal Blue PPO Plan Rates	
Employee	\$682.33
Employee & Spouse	\$1,430.45
Employee & Child(ren)	\$1,232.58
Family	\$1,861.79
Cobra BlueSaver PPO Plan Rates	
Employee	\$584.04
Employee & Spouse	\$1,222.82
Employee & Child(ren)	\$1,058.82
Family	\$1,579.33

Confirmed by: City of North Kansas City	Blue Shield of Kansas City:
Signature:	Signature:
Title	Title
Date	Date



Confirmation of Coverage		
Group Name:	City of North Kansas City	
Offer Name:	2022 Renewal	
Group Number:	11002000	
 State:		
Effective Date:		
Important Notes:	0170172022	
•	ffor Polated Information	
	ffer-Related Information	
A. General Information	40 Manufac	
Contract Term:	12 Months	
Subsequent Renewal Terms:	12 Months	
Renewal Notification:	90 Days	
Annual Enrollment Period Start:	30 Days prior to Group Anniversary Date	
Annual Enrollment Period End:	15 Days after Group Anniversary Date	
Waiting Period:	30 Days	
Eligibility Rule:	First Day of Month Following Waiting Period	
Termination Rule:	Last day of month following termination	
Leave of Absence Term:	Not applicable	
Dependent Limiting Age:	26 Years	
Dependent Limiting Age Termination:	EOY following birthday	
Is Employer subject to ERISA?:	No	
Are Section 125 Enrollment Changes Allowed?:	Yes	
HSA Bank Selection:	UMB HSA Claims File Feed sent - No	
Reinstatement Fee:	\$500	
B. Medical Programs and Services		
AHY (subscribers/spouse with medical):	AHY (100+)	
AHY Standard Buyup (employees with no medical):	No	
Wellness Stipend:	\$7,500	
24-Hour Nurse Line:	Yes	
Healthy Companion:	Yes	
Virtual Care:	Yes	
Livongo Program:	Yes	

Genetic Testing:	Yes
APEA:	Yes
Rx Personal Medication Coach:	Yes
Rx Savings Solution:	Yes
Rx Carve-in Credits:	No
C. Blue KC Vision Coverage	
Blue Vue Base:	No
Blue Vue 10/100:	No
Blue Vue 10/130:	No
Blue Vue 10/150:	No
Blue Vue 10/200:	No
Blue Vue 0/130:	No
Blue Vue 0/150:	No
Blue Vue 0/200:	No
Blue Vue Non-Standard:	No
D. USAble Coverage	
Term Life:	No
AD&D:	No
Blue KC Provided Billing Service:	
E. Principal Coverage	
Group Term Life:	No
Voluntary Life:	No
Long Term Disability (LTD):	No
Short Term Disability (STD):	No
Critical Illness:	No
Accident:	No
Dental:	No
Vision:	No

Offer Summary and Signatures	
Plans included in this Offer:	
For details about the plans included in this offer, please see the attached Plan information.	
BlueSelect Plus Personal Blue HRA (C7R2)	
BlueSelect Plus PPO (C7R0)	
Preferred-Care Blue PPO Plan (C7R1)	
Personal Blue PPO Plan (C7R3)	
BlueSaver PPO Plan (C7R4)	

Confirmed by: City of North Kansas City	Blue Shield of Kansas City:
Signature	Signature
Title	Title
Date	Date

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	Plan Information	
Group Name:	City of North Kansas City	
Plan Name:	BlueSelect Plus Personal Blue HRA	
Group Number:	11002000	
<u> </u>		
State:		
Effective Date:	01/01/2022	
Important Notes:		
For Internal Use Only:	Package: 0853280255 XREF: C7R2 Medical: 0853370459 Rx: 0853340212	
1. General Plan Information		
Benefit Period	Calendar Year	
Funding	Fully Insured with Maximum Refund	
Grandfathered Status	Non-Grandfathered	
Product Family	PPO	
Consumer-Driven Health Plan (CDHP)	HRA	
Spira Care Plan?	No	
Religious Employer?	N/A	
Classification of Eligible Employees	All full-time employees actively working 30 hours per week; Pre-65 retirees covered based on the group's HR policy	
Eligibility		
Min % of Eligible Employees	75%	
% Threshold of Total Employee Enrollment	90%	
Minimum Employer Contribution – Eligible Employees	75%	
Minimum Employer Contribution – Total Account Premium	50%	
COBRA Billing	BCBS	
Are Domestic Partners Covered?	No	
Are Same Sex Spouses Covered?	Yes	
Insurance Coverage Creditable (Medicare Part D)	Yes	
Blue Connect	Blue Connect not included	
Compass	Compass not included	
2. Network		
Local Medical Network	BlueSelect Plus Services rendered at Out-of-Network providers are subject to Out-of-Network allowables as stated in your contract, and balance billing may occur.	
Out-of-Area Medical Network	BlueCard PPO/EPO	

Pharmacy	See Pharmacy (Sections 5 & 6)	
3. Cost Sharing		
Medical Deductible - Calendar Year, Embedded All INN & OON Cross Accum	In-Network	Out-of-Network
Individual	\$2,000	\$4,000
Family	\$4,000	\$8,000
Pharmacy Deductible	No Pharmacy Deductible	1
Medical Coinsurance	In-Network	Out-of-Network
Member Pays	10%	40%
Plan Pays	90%	60%
Out-of-Pocket Limit - Calendar Year, Embedded All INN & OON Cross Accum The Out-of-Pocket limit includes all Deductibles, Coinsurance, and Copayments a member pays during the Benefit Period.	In-Network	Out-of-Network
Individual	\$4,500	\$15,000
Family	\$9,000	\$30,000
Pharmacy Out-of-Pocket Limit	Combined with Medical	
Personal Care Account	Individual: \$1,000/Calendar Year Family: \$2,000/Calendar Year Do Not Allow Carry Over	
Annual First Dollar Coverage	Does not apply	Does not apply
Annual Maximum	Does not apply	Does not apply
Lifetime Maximum	Does not apply	Does not apply
4. Benefits		
Professional Services	In-Network	Out-of-Network
Primary Care Physician Office Visit - An internist, family practitioner, general practitioner, or pediatrician.	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Total Care Primary Care Physician Office Visit	Does not apply	Not applicable
Specialist Physician Office Visit - Doctors of Medicine (MD), Doctors of Osteopathy (DO), except Primary Care Physicians, and other medical practitioners such as optometrists, psychologists and chiropractors.	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Urgent Care Office Visit	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Total Care Urgent Care Office Visit	Does not apply	Not applicable
Blue KC Virtual Care - Office Visit Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	10% Coinsurance after Deductible	Not applicable

Blue KC Virtual Care - Behavioral Health Therapy Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	10% Coinsurance after Deductible	Not applicable
Designated Health Clinic	Does not apply	Not applicable
Other Benefits (in alphabetical order)	In-Network	Out-of-Network
ABA Services ABA Services Age Limits: Until Covered Person's 19th Birthday	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Abortion	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Acupuncture	Not covered	Not covered
Allergy Testing	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Allergy Treatment	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Ambulance - Air Air Ambulance Allowable Option: Billed Charges	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Ambulance - Ground Ground Ambulance Allowable Option: 150% of Medicare	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Assisted Reproductive Services	Not covered	Not covered
Autism-Related Services No limits	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Bariatric Services	Not covered	Not covered
Blue Distinction Specialty Care Facility Services No limits	Not Applicable	Not Applicable
Chiropractic Services Office Visit	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Dental Anesthesia Maximum age limit of 5 Years	Missouri/Kansas Default	Missouri/Kansas Default
Diabetic Equipment and Supplies Prior Authorization Policy Applies	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Diabetic Footwear	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Diabetic Pump	Covered as Durable Medical Equipment (DME)	Covered as Durable Medical Equipment (DME)
Diabetic Self Management Education/Training (DSMT)	No member cost share	40% Coinsurance after Deductible
Durable Medical Equipment (DME) Prior Authorization Policy Applies No limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Elective Male Sterilization	No member cost share	40% Coinsurance after Deductible
Emergency Services	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Food and Food Products for PKU No limits	Covered	Covered
Foot Orthotics	Not covered	Not covered

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Gender Dysphoria-Related Services Prior Authorization Policy Applies Gender Dysphoria Cost Shares Apply to Cosmetic Services: No Gender Dysphoria Cost Shares Apply to Non-Surgical Services: Yes Gender Dysphoria Cost Shares Apply to Reassignment Surgery: Yes	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Hearing Aids	Not covered	Not covered
Hearing Aids - Bone Anchored Hearing Aids	Not covered	Not covered
High Tech Radiology (MRI, MRA, PET, CT) Prior Authorization Policy Applies	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Home Health Care Prior Authorization Policy Applies Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Home Hospice	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Immunizations - Not Routine Preventive	Not covered	Not covered
Infertility and Impotency Diagnosis & Treatment Infertility and impotency treatment limited \$10,000 per Lifetime Impotency treatment pills: No limits Dollar Limitations include Pharmacy: Yes Impotency Drug Coverage: Yes Infertility Drug Coverage: Yes	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Inpatient Hospice Prior Authorization Policy Applies Maximum benefit of 14 Day(s)/Lifetime for In-Network and Out-of-Network	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Inpatient Physician Services	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Labs Performed in Office / Independent Lab	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Maternity Dependent Daughters Maternity Covered?: No	Covered	Covered
Mental Health and Substance Abuse Services - Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Inpatient Physician Services	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Office Visit	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Outpatient Therapy in a Facility	10% Coinsurance after Deductible	40% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Mental Health and Substance Abuse Services - Outpatient Therapy in a Provider's Office	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Nutritional Counseling	Not covered	Not covered
Organ Transplant Services Prior Authorization Policy Applies	Subject to Applicable Cost Shares Blue Distinction Specialty Care Facility Services: Not applicable	Subject to Applicable Cost Shares
Organ Transplant Travel Expenses	Not covered	Not covered
Other Services Performed in Office	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Physician Services	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Surgery Prior Authorization Policy Applies	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Cardiac Therapy No limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Cognitive Therapy	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Facility Combined with Hearing Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Provider's Office Combined with Speech Therapy Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Facility Combined with Occupational Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Provider's Office Combined with Physical Therapy Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Facility Combined with Physical Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Provider's Office Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Pulmonary Therapy No limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Facility Combined with Speech Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Provider's Office Maximum benefit of 20 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Penile Prostheses/Implant	Not covered	Not covered
Private Duty Nursing Combined with Home Health Care Limits	10% Coinsurance after Deductible	40% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Routine Preventive Care Diabetes Prevention Program (DPP): Covered Preventive Schedule: PPACA+ (Women's Preventive)	No member cost share	40% Coinsurance after Deductible
Skeletal Manipulation performed in a Chiropractic Office	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Skilled Nursing Facility (SNF) Prior Authorization Policy Applies Maximum benefit of 30 Day(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	40% Coinsurance after Deductible
Sports Physicals by a Physician	Not covered	Not covered
Vision Exam-Routine	Not covered	Not covered
Vision Hardware	Not covered	Not covered
Weight Loss Drugs (see Pharmacy cost shares)	Not covered	Not covered
Weight Management - Naturally Slim	Not covered	Not covered
Wigs	Not covered	Not covered
X-Rays and Radiology	10% Coinsurance after Deductible	40% Coinsurance after Deductible
5. General Pharmacy Information		
Pharmacy Network(s)	Network 1: RxPremier	
Prescription Drug List  Learn more about the drugs covered by your plan, drug category/tier, prior authorization and step therapy by reviewing your prescription drug list on MyBlueKC.com	Blue KC Preferred Formulary	
Outpatient Prescription Drug	In-Network	Out-of-Network
Deductible  You must pay all the costs up to the Deductible amount before this plan begins to pay for covered services.	Does Not Apply	Does Not Apply
Outpatient Prescription Drug Out- of-Pocket Limits  The Out-of-Pocket Limit is the most you could pay during the Calendar Year for your share of the cost of covered services.	In-Network Combined with Medical Out-of-Pocket	Out-of-Network Combined with Medical Out-of-Pocket

Maintenance Medication Program	Not applicable
Generics Program	Not Applicable
Copay Credit Accumulator Adjustment (CCAA):  Specialty drug copay card dollars will not be included in your deductible and/or out-of-pocket limits. Only your true out-of-pocket costs will be applied to your deductible and/or out-of-pocket totals.	Yes
Variable Copay Solution (VCS):  When you use a drug copay card, Specialty prescription drugs may be subject to a new plan benefit cost share. This new cost share will not impact you or the price you pay.	No
Rx Savings Solutions A team of pharmacists and pharmacy technician will help you make sure you're getting the best possible pricing for your medicines. Member support is available Monday – Friday, 7 a.m. to 7 p.m. CST.	Register online at MyBlueKC.com and stay up-to-date on cost saving opportunities.  Email: info@rxsavingsllc.com PH: 1-800-268-4476

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6. Plan Benefits – Pharmacy		
	In-Network	Out-of-Network
Retail Pharmacy (Short-term supply: Up to 34 Days) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$10 Copay/Fill	\$10 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$30 Copay/Fill	\$30 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$50 Copay/Fill	\$50 Copay/Fill, then 50% Coinsurance
Retail Pharmacy (Long-term supply: Between 35-102 Days) Drug Tier 1: Generic / Generic Specialty	RxPremier:\$20 Copay/Fill	\$20 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier:\$60 Copay/Fill	\$60 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier:\$100 Copay/Fill	\$100 Copay/Fill, then 50% Coinsurance
Mail Order Pharmacy (Mail Order supply: Between 35-102 Days) Drug Tier 1: Generic	\$20 Copay/Fill	\$20 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic	\$60 Copay/Fill	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	\$100 Copay/Fill	\$100 Copay/Fill, then 50% Coinsurance
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Infertility and Impotency Drugs Retail (Short-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$10 Copay/Fill, then 50% Coinsurance	\$10 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$30 Copay/Fill, then 50% Coinsurance	\$30 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$50 Copay/Fill, then 50% Coinsurance	\$50 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Retail (Long-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Mail Order Pharmacy Drug Tier 1: Generic	\$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic	\$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	\$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Weight Loss Drugs	Not covered	Not covered

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	Plan Information	
Group Name:	City of North Kansas City	
Plan Name:	BlueSelect Plus PPO	
Group Number:	11002000	
State:	Missouri	
Effective Date:	01/01/2022	
Important Notes:		
For Internal Use Only:	Package: 0853250376 XREF: C7R0 Medical: 0853420410 Rx: 0853350789	
1. General Plan Information		
Benefit Period	Calendar Year	
Funding	Fully Insured with Maximum Refund	
Grandfathered Status	Non-Grandfathered	
Product Family	PPO	
Consumer-Driven Health Plan (CDHP)	N/A	
Spira Care Plan?	No	
Religious Employer?	N/A	
Classification of Eligible Employees	All full-time employees actively working 30 hours per week; Pre-65 retirees covered based on the group's HR policy	
Eligibility		
Min % of Eligible Employees	75%	
% Threshold of Total Employee Enrollment	90%	
Minimum Employer Contribution – Eligible Employees	75%	
Minimum Employer Contribution – Total Account Premium	50%	
COBRA Billing	BCBS	
Are Domestic Partners Covered?	No	
Are Same Sex Spouses Covered?	Yes	
Insurance Coverage Creditable (Medicare Part D)	Yes	
Blue Connect	Blue Connect not included	
Compass	Compass not included	
2. Network		
Local Medical Network	BlueSelect Plus Services rendered at Out-of-Network providers are subject to Out-of-Network allowables as stated in your contract, and balance billing may occur.	
Out-of-Area Medical Network	BlueCard PPO/EPO	

Pharmacy	See Pharmacy (Sections 5 & 6)	
3. Cost Sharing		
Medical Deductible - Calendar Year, Embedded All INN & OON Cross Accum	In-Network	Out-of-Network
Individual	\$1,000	\$2,000
Family	\$2,000	\$4,000
Pharmacy Deductible	No Pharmacy Deductible	
Medical Coinsurance	In-Network	Out-of-Network
Member Pays	20%	50%
Plan Pays	80%	50%
Out-of-Pocket Limit - Calendar Year, Embedded All INN & OON Cross Accum The Out-of-Pocket limit includes all Deductibles, Coinsurance, and Copayments a member pays during the Benefit Period.	In-Network	Out-of-Network
Individual	\$3,000	\$15,000
Family	\$6,000	\$30,000
Pharmacy Out-of-Pocket Limit	Combined with Medical	
Annual First Dollar Coverage	Does not apply	Does not apply
Annual Maximum	Does not apply	Does not apply
Lifetime Maximum	Does not apply	Does not apply
4. Benefits		
Professional Services	In-Network	Out-of-Network
Primary Care Physician Office Visit - An internist, family practitioner, general practitioner, or pediatrician.	\$30 Copay/Visit, no Deductible	50% Coinsurance after Deductible
Total Care Primary Care Physician Office Visit	Does not apply	Not applicable
Specialist Physician Office Visit - Doctors of Medicine (MD), Doctors of Osteopathy (DO), except Primary Care Physicians, and other medical practitioners such as optometrists, psychologists and chiropractors.	\$30 Copay/Visit, no Deductible	50% Coinsurance after Deductible
Urgent Care Office Visit	\$30 Copay/Visit, no Deductible	50% Coinsurance after Deductible
Total Care Urgent Care Office Visit	Does not apply	Not applicable
Blue KC Virtual Care - Office Visit Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	\$30 Copay/Visit, no Deductible	Not applicable

Blue KC Virtual Care - Behavioral Health Therapy Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	20% Coinsurance after Deductible	Not applicable
Designated Health Clinic	Does not apply	Not applicable
Other Benefits (in alphabetical order)	In-Network	Out-of-Network
ABA Services ABA Services Age Limits: Until Covered Person's 19th Birthday	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Abortion	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Acupuncture	Not covered	Not covered
Allergy Testing	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Allergy Treatment	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Ambulance - Air Air Ambulance Allowable Option: Billed Charges	20% Coinsurance after Deductible	20% Coinsurance after In-Network Deductible
Ambulance - Ground Ground Ambulance Allowable Option: 150% of Medicare	20% Coinsurance after Deductible	20% Coinsurance after In-Network Deductible
Assisted Reproductive Services	Not covered	Not covered
Autism-Related Services No limits	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Bariatric Services	Not covered	Not covered
Blue Distinction Specialty Care Facility Services No limits	Not Applicable	Not Applicable
Chiropractic Services Office Visit	\$30 Copay/Visit, no Deductible	50% Coinsurance after Deductible
Dental Anesthesia Maximum age limit of 5 Years	Missouri/Kansas Default	Missouri/Kansas Default
Diabetic Equipment and Supplies Prior Authorization Policy Applies	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Diabetic Footwear	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Diabetic Pump	Covered as Durable Medical Equipment (DME)	Covered as Durable Medical Equipment (DME)
Diabetic Self Management Education/Training (DSMT)	No member cost share	50% Coinsurance after Deductible
Durable Medical Equipment (DME) Prior Authorization Policy Applies No limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Elective Male Sterilization	No member cost share	50% Coinsurance after Deductible
Emergency Services Copay Waiver Rule: Copay Waived if Admitted	\$100 Copay/Visit, then Deductible, then 20% Coinsurance	\$100 Copay/Visit, then In-Network Deductible, then 20% Coinsurance
Food and Food Products for PKU No limits	Covered	Covered
Foot Orthotics	Not covered	Not covered

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Gender Dysphoria-Related Services Prior Authorization Policy Applies Gender Dysphoria Cost Shares Apply to Cosmetic Services: No Gender Dysphoria Cost Shares Apply to Non-Surgical Services: Yes Gender Dysphoria Cost Shares Apply to Reassignment Surgery: Yes	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Hearing Aids	Not covered	Not covered
Hearing Aids - Bone Anchored Hearing Aids	Not covered	Not covered
High Tech Radiology (MRI, MRA, PET, CT) Prior Authorization Policy Applies	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Home Health Care Prior Authorization Policy Applies Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Home Hospice	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Immunizations - Not Routine Preventive	Not covered	Not covered
Infertility and Impotency Diagnosis & Treatment Infertility and impotency treatment limited \$10,000 per Lifetime Impotency treatment pills: No limits Dollar Limitations include Pharmacy: Yes Impotency Drug Coverage: Yes Infertility Drug Coverage: Yes	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Inpatient Hospice Prior Authorization Policy Applies Maximum benefit of 14 Day(s)/Lifetime for In-Network and Out-of-Network	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Inpatient Physician Services	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Labs Performed in Office / Independent Lab	No member cost share	50% Coinsurance after Deductible
Maternity Dependent Daughters Maternity Covered?: No	Covered	Covered
Mental Health and Substance Abuse Services - Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Inpatient Physician Services	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Office Visit	\$30 Copay/Visit, no Deductible	50% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Outpatient Therapy in a Facility	20% Coinsurance after Deductible	50% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Mental Health and Substance Abuse Services - Outpatient Therapy in a Provider's Office	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Nutritional Counseling	Not covered	Not covered
Organ Transplant Services Prior Authorization Policy Applies	Subject to Applicable Cost Shares Blue Distinction Specialty Care Facility Services: Not applicable	Subject to Applicable Cost Shares
Organ Transplant Travel Expenses	Not covered	Not covered
Other Services Performed in Office	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Physician Services	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Surgery Prior Authorization Policy Applies	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Cardiac Therapy No limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Cognitive Therapy	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Facility Combined with Hearing Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Provider's Office Combined with Speech Therapy Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Facility Combined with Occupational Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Provider's Office Combined with Physical Therapy Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Facility Combined with Physical Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Provider's Office Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Pulmonary Therapy No limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Facility Combined with Speech Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Provider's Office Maximum benefit of 20 Visit(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Penile Prostheses/Implant	Not covered	Not covered
Private Duty Nursing Combined with Home Health Care Limits	20% Coinsurance after Deductible	50% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Routine Preventive Care Diabetes Prevention Program (DPP): Covered Preventive Schedule: PPACA+ (Women's Preventive)	No member cost share	50% Coinsurance after Deductible
Skeletal Manipulation performed in a Chiropractic Office	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Skilled Nursing Facility (SNF) Prior Authorization Policy Applies Maximum benefit of 30 Day(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Sports Physicals by a Physician	Not covered	Not covered
Vision Exam-Routine	Not covered	Not covered
Vision Hardware	Not covered	Not covered
Weight Loss Drugs (see Pharmacy cost shares)	Not covered	Not covered
Weight Management - Naturally Slim	Not covered	Not covered
Wigs	Not covered	Not covered
X-Rays and Radiology	20% Coinsurance after Deductible	50% Coinsurance after Deductible
5. General Pharmacy Information		
Pharmacy Network(s)	Network 1: RxPremier	
Prescription Drug List Learn more about the drugs covered by your plan, drug category/tier, prior authorization and step therapy by reviewing your prescription drug list on MyBlueKC.com	Blue KC Preferred Formulary	
Outpatient Prescription Drug	In-Network	Out-of-Network
Deductible You must pay all the costs up to the Deductible amount before this plan begins to pay for covered services.	Does Not Apply	Does Not Apply
Outpatient Prescription Drug Out- of-Pocket Limits  The Out-of-Pocket Limit is the most you could pay during the Calendar Year for your share of the cost of covered services.	In-Network Combined with Medical Out-of-Pocket	Out-of-Network Combined with Medical Out-of-Pocket

Maintenance Medication Program	Not applicable
Generics Program	Not Applicable
Copay Credit Accumulator Adjustment (CCAA): Specialty drug copay card dollars will not be included in your deductible and/or out-of-pocket limits. Only your true out-of-pocket costs will be applied to your deductible and/or out-of-pocket totals.	Yes
Variable Copay Solution (VCS):  When you use a drug copay card, Specialty prescription drugs may be subject to a new plan benefit cost share. This new cost share will not impact you or the price you pay.	No
Rx Savings Solutions A team of pharmacists and pharmacy technician will help you make sure you're getting the best possible pricing for your medicines. Member support is available Monday – Friday, 7 a.m. to 7 p.m. CST.	Register online at MyBlueKC.com and stay up-to-date on cost saving opportunities.  Email: info@rxsavingsllc.com PH: 1-800-268-4476

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6. Plan Benefits – Pharmacy		
	In-Network	Out-of-Network
Retail Pharmacy (Short-term supply: Up to 34 Days) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$10 Copay/Fill	\$10 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$30 Copay/Fill	\$30 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$50 Copay/Fill	\$50 Copay/Fill, then 50% Coinsurance
Retail Pharmacy (Long-term supply: Between 35-102 Days) Drug Tier 1: Generic / Generic Specialty	RxPremier:\$20 Copay/Fill	\$20 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier:\$60 Copay/Fill	\$60 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier:\$100 Copay/Fill	\$100 Copay/Fill, then 50% Coinsurance
Mail Order Pharmacy (Mail Order supply: Between 35-102 Days) Drug Tier 1: Generic	\$20 Copay/Fill	\$20 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic	\$60 Copay/Fill	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	\$100 Copay/Fill	\$100 Copay/Fill, then 50% Coinsurance

Infertility and Impotency Drugs Retail (Short-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$10 Copay/Fill, then 50% Coinsurance	\$10 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$30 Copay/Fill, then 50% Coinsurance	\$30 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$50 Copay/Fill, then 50% Coinsurance	\$50 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Retail (Long-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Mail Order Pharmacy Drug Tier 1: Generic	\$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic	\$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	\$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Weight Loss Drugs	Not covered	Not covered

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	Plan Information
Group Name:	City of North Kansas City
Plan Name:	•
Group Number:	11002000
State:	Missouri
Effective Date:	01/01/2022
Important Notes:	
For Internal Use Only:	Package: 0853260805 XREF: C7R1 Medical: 0853580944 Rx: 0853320549
1. General Plan Information	
Benefit Period	Calendar Year
Funding	Fully Insured with Maximum Refund
Grandfathered Status	Non-Grandfathered
Product Family	PPO
Consumer-Driven Health Plan (CDHP)	N/A
Spira Care Plan?	No
Religious Employer?	N/A
Classification of Eligible Employees	All full-time employees actively working 30 hours per week; Pre-65 retirees covered based on the group's HR policy
Eligibility	
Min % of Eligible Employees	75%
% Threshold of Total Employee Enrollment	90%
Minimum Employer Contribution – Eligible Employees	75%
Minimum Employer Contribution – Total Account Premium	50%
COBRA Billing	BCBS
Are Domestic Partners Covered?	No
Are Same Sex Spouses Covered?	Yes
Insurance Coverage Creditable (Medicare Part D)	Yes
Blue Connect	Blue Connect not included
Compass	Compass not included
2. Network	
Local Medical Network	Preferred-Care Blue Services rendered at Out-of-Network providers are subject to Out-of-Network allowables as stated in your contract, and balance billing may occur.
Out-of-Area Medical Network	BlueCard PPO/EPO

Pharmacy	See Pharmacy (Sections 5 & 6)	
3. Cost Sharing		
Medical Deductible - Calendar Year, Embedded All INN & OON Cross Accum	In-Network	Out-of-Network
Individual	\$1,000	\$1,000
Family	\$2,000	\$2,000
Pharmacy Deductible	No Pharmacy Deductible	
Medical Coinsurance	In-Network	Out-of-Network
Member Pays	20%	40%
Plan Pays	80%	60%
Out-of-Pocket Limit - Calendar Year, Embedded All INN & OON Cross Accum The Out-of-Pocket limit includes all Deductibles, Coinsurance, and Copayments a member pays during the Benefit Period.	In-Network	Out-of-Network
Individual	\$3,000	\$9,000
Family	\$6,000	\$18,000
Pharmacy Out-of-Pocket Limit	Combined with Medical	
Annual First Dollar Coverage	Does not apply	Does not apply
Annual Maximum	Does not apply	Does not apply
Lifetime Maximum	Does not apply	Does not apply
4. Benefits		
Professional Services	In-Network	Out-of-Network
Primary Care Physician Office Visit - An internist, family practitioner, general practitioner, or pediatrician.	\$30 Copay/Visit, no Deductible	40% Coinsurance after Deductible
Total Care Primary Care Physician Office Visit	Does not apply	Not applicable
Specialist Physician Office Visit - Doctors of Medicine (MD), Doctors of Osteopathy (DO), except Primary Care Physicians, and other medical practitioners such as optometrists, psychologists and chiropractors.	\$30 Copay/Visit, no Deductible	40% Coinsurance after Deductible
Urgent Care Office Visit	\$30 Copay/Visit, no Deductible	40% Coinsurance after Deductible
Total Care Urgent Care Office Visit	Does not apply	Not applicable
Blue KC Virtual Care - Office Visit Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	\$30 Copay/Visit, no Deductible	Not applicable

Blue KC Virtual Care - Behavioral Health Therapy Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	20% Coinsurance after Deductible	Not applicable
Designated Health Clinic	Does not apply	Not applicable
Other Benefits (in alphabetical order)	In-Network	Out-of-Network
ABA Services ABA Services Age Limits: Until Covered Person's 19th Birthday	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Abortion	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Acupuncture	Not covered	Not covered
Allergy Testing	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Allergy Treatment	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Ambulance - Air Air Ambulance Allowable Option: Billed Charges	20% Coinsurance after Deductible	20% Coinsurance after In-Network Deductible
Ambulance - Ground Ground Ambulance Allowable Option: 150% of Medicare	20% Coinsurance after Deductible	20% Coinsurance after In-Network Deductible
Assisted Reproductive Services	Not covered	Not covered
Autism-Related Services No limits	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Bariatric Services	Not covered	Not covered
Blue Distinction Specialty Care Facility Services No limits	Not Applicable	Not Applicable
Chiropractic Services Office Visit	\$30 Copay/Visit, no Deductible	40% Coinsurance after Deductible
Dental Anesthesia Maximum age limit of 5 Years	Missouri/Kansas Default	Missouri/Kansas Default
Diabetic Equipment and Supplies Prior Authorization Policy Applies	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Diabetic Footwear	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Diabetic Pump	Covered as Durable Medical Equipment (DME)	Covered as Durable Medical Equipment (DME)
Diabetic Self Management Education/Training (DSMT)	No member cost share	40% Coinsurance after Deductible
Durable Medical Equipment (DME) Prior Authorization Policy Applies No limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Elective Male Sterilization	No member cost share	40% Coinsurance after Deductible
Emergency Services Copay Waiver Rule: Copay Waived if Admitted	\$100 Copay/Visit, then Deductible, then 20% Coinsurance	\$100 Copay/Visit, then In-Network Deductible, then 20% Coinsurance
Food and Food Products for PKU No limits	Covered	Covered
Foot Orthotics	Not covered	Not covered

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Gender Dysphoria-Related Services Prior Authorization Policy Applies Gender Dysphoria Cost Shares Apply to Cosmetic Services: No Gender Dysphoria Cost Shares Apply to Non-Surgical Services: Yes Gender Dysphoria Cost Shares Apply to Reassignment Surgery: Yes	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Hearing Aids	Not covered	Not covered
Hearing Aids - Bone Anchored Hearing Aids	Not covered	Not covered
High Tech Radiology (MRI, MRA, PET, CT) Prior Authorization Policy Applies	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Home Health Care Prior Authorization Policy Applies Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Home Hospice	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Immunizations - Not Routine Preventive	Not covered	Not covered
Infertility and Impotency Diagnosis & Treatment Infertility and impotency treatment limited \$10,000 per Lifetime Impotency treatment pills: No limits Dollar Limitations include Pharmacy: Yes Impotency Drug Coverage: Yes Infertility Drug Coverage: Yes	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Inpatient Hospice Prior Authorization Policy Applies Maximum benefit of 14 Day(s)/Lifetime for In-Network and Out-of-Network	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Inpatient Physician Services	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Labs Performed in Office / Independent Lab	No member cost share	40% Coinsurance after Deductible
Maternity Dependent Daughters Maternity Covered?: No	Covered	Covered
Mental Health and Substance Abuse Services - Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Inpatient Physician Services	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Office Visit	\$30 Copay/Visit, no Deductible	40% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Outpatient Therapy in a Facility	20% Coinsurance after Deductible	40% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Mental Health and Substance Abuse Services - Outpatient Therapy in a Provider's Office	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Nutritional Counseling	Not covered	Not covered
Organ Transplant Services Prior Authorization Policy Applies	Subject to Applicable Cost Shares Blue Distinction Specialty Care Facility Services: Not applicable	Subject to Applicable Cost Shares
Organ Transplant Travel Expenses	Not covered	Not covered
Other Services Performed in Office	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Physician Services	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Surgery Prior Authorization Policy Applies	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Cardiac Therapy No limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Cognitive Therapy	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Facility Combined with Hearing Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Provider's Office Combined with Speech Therapy Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Facility Combined with Occupational Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Provider's Office Combined with Physical Therapy Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Facility Combined with Physical Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Provider's Office Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Pulmonary Therapy No limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Facility Combined with Speech Therapy in a Provider's Office Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Provider's Office Maximum benefit of 20 Visit(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Penile Prostheses/Implant	Not covered	Not covered
Private Duty Nursing Combined with Home Health Care Limits	20% Coinsurance after Deductible	40% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Routine Preventive Care Diabetes Prevention Program (DPP): Covered Preventive Schedule: PPACA+ (Women's Preventive)	No member cost share	40% Coinsurance after Deductible
Skeletal Manipulation performed in a Chiropractic Office	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Skilled Nursing Facility (SNF) Prior Authorization Policy Applies Maximum benefit of 30 Day(s)/Calendar Year for In-Network and Out-of-Network	20% Coinsurance after Deductible	40% Coinsurance after Deductible
Sports Physicals by a Physician	Not covered	Not covered
Vision Exam-Routine	Not covered	Not covered
Vision Hardware	Not covered	Not covered
Weight Loss Drugs (see Pharmacy cost shares)	Not covered	Not covered
Weight Management - Naturally Slim	Not covered	Not covered
Wigs	Not covered	Not covered
X-Rays and Radiology	20% Coinsurance after Deductible	40% Coinsurance after Deductible
5. General Pharmacy Information		
Pharmacy Network(s)	Network 1: RxPremier	
Prescription Drug List Learn more about the drugs covered by your plan, drug category/tier, prior authorization and step therapy by reviewing your prescription drug list on MyBlueKC.com	Blue KC Preferred Formulary	
Outpatient Prescription Drug Deductible You must pay all the costs up to the Deductible amount before this plan begins to pay for covered services.	In-Network Does Not Apply	Out-of-Network Does Not Apply
Outpatient Prescription Drug Out- of-Pocket Limits  The Out-of-Pocket Limit is the most you could pay during the Calendar Year for your share of the cost of covered services.	In-Network Combined with Medical Out-of-Pocket	Out-of-Network Combined with Medical Out-of-Pocket

Maintenance Medication Program	Not applicable
Generics Program	Not Applicable
Copay Credit Accumulator Adjustment (CCAA): Specialty drug copay card dollars will not be included in your deductible and/or out-of-pocket limits. Only your true out-of-pocket costs will be applied to your deductible and/or out-of-pocket totals.	Yes
Variable Copay Solution (VCS): When you use a drug copay card, Specialty prescription drugs may be subject to a new plan benefit cost share. This new cost share will not impact you or the price you pay.	No
Rx Savings Solutions A team of pharmacists and pharmacy technician will help you make sure you're getting the best possible pricing for your medicines. Member support is available Monday – Friday, 7 a.m. to 7 p.m. CST.	Register online at MyBlueKC.com and stay up-to-date on cost saving opportunities.  Email: info@rxsavingsllc.com PH: 1-800-268-4476

### 6. Plan Benefits - Pharmacy In-Network **Out-of-Network** RxPremier: \$10 Copay/Fill \$10 Copay/Fill, then 50% Coinsurance Retail Pharmacy (Short-term supply: Up to 34 Days) Drug Tier 1: Generic / Generic Specialty RxPremier: \$30 Copay/Fill \$30 Copay/Fill, then 50% Coinsurance Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred **Brand Specialty** RxPremier: \$50 Copay/Fill \$50 Copay/Fill, then 50% Coinsurance **Drug Tier 3:** Non-Preferred Brand / Non-Preferred Brand Specialty Retail Pharmacy (Long-term RxPremier:\$20 Copay/Fill \$20 Copay/Fill, then 50% Coinsurance supply: Between 35-102 Days) Drug Tier 1: Generic / Generic Specialty Drug Tier 2: Preferred Brand / RxPremier:\$60 Copay/Fill \$60 Copay/Fill, then 50% Coinsurance Non-Preferred Generic / Preferred **Brand Specialty** RxPremier:\$100 Copay/Fill \$100 Copay/Fill, then 50% Coinsurance **Drug Tier 3:** Non-Preferred Brand / Non-Preferred Brand Specialty \$20 Copay/Fill Mail Order Pharmacy (Mail Order \$20 Copay/Fill, then 50% Coinsurance supply: Between 35-102 Days) Drug Tier 1: Generic \$60 Copay/Fill \$60 Copay/Fill, then 50% Coinsurance Drug Tier 2: Preferred Brand / Non-Preferred Generic \$100 Copay/Fill \$100 Copay/Fill, then 50% Coinsurance Drug Tier 3: Non-Preferred Brand

Infertility and Impotency Drugs Retail (Short-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$10 Copay/Fill, then 50% Coinsurance	\$10 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$30 Copay/Fill, then 50% Coinsurance	\$30 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$50 Copay/Fill, then 50% Coinsurance	\$50 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Retail (Long-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Mail Order Pharmacy Drug Tier 1: Generic	\$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic	\$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	\$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Weight Loss Drugs	Not covered	Not covered

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	Plan Information
Group Name:	City of North Kansas City
Plan Name:	
Group Number:	11002000
State:	Missouri
Effective Date:	01/01/2022
	01/01/2022
Important Notes: For Internal Use Only:	Package: 0853290701 XREF: C7R3 Medical: 0853540043 Rx: 0853320549
1. General Plan Information	
Benefit Period	Calendar Year
Funding	Fully Insured with Maximum Refund
Grandfathered Status	Non-Grandfathered
Product Family	PPO
Consumer-Driven Health Plan (CDHP)	HRA
Spira Care Plan?	No
Religious Employer?	N/A
Classification of Eligible Employees	All full-time employees actively working 30 hours per week; Pre-65 retirees covered based on the group's HR policy
Eligibility	
Min % of Eligible Employees	75%
% Threshold of Total Employee Enrollment	90%
Minimum Employer Contribution – Eligible Employees	75%
Minimum Employer Contribution – Total Account Premium	50%
COBRA Billing	BCBS
Are Domestic Partners Covered?	No
Are Same Sex Spouses Covered?	Yes
Insurance Coverage Creditable (Medicare Part D)	Yes
Blue Connect	Blue Connect not included
Compass	Compass not included
2. Network	
Local Medical Network	Preferred-Care Blue Services rendered at Out-of-Network providers are subject to Out-of-Network allowables as stated in your contract, and balance billing may occur.
Out-of-Area Medical Network	BlueCard PPO/EPO

Pharmacy	See Pharmacy (Sections 5 & 6)	
3. Cost Sharing		
Medical Deductible - Calendar Year, Embedded All INN & OON Cross Accum	In-Network	Out-of-Network
Individual	\$2,000	\$2,000
Family	\$4,000	\$4,000
Pharmacy Deductible	No Pharmacy Deductible	
Medical Coinsurance	In-Network	Out-of-Network
Member Pays	10%	30%
Plan Pays	90%	70%
Out-of-Pocket Limit - Calendar Year, Embedded All INN & OON Cross Accum The Out-of-Pocket limit includes all Deductibles, Coinsurance, and Copayments a member pays during the Benefit Period.	In-Network	Out-of-Network
Individual	\$4,500	\$9,000
Family	\$9,000	\$18,000
Pharmacy Out-of-Pocket Limit	Combined with Medical	
Personal Care Account	Individual: \$1,000/Calendar Year Family: \$2,000/Calendar Year Do Not Allow Carry Over	
Annual First Dollar Coverage	Does not apply	Does not apply
Annual Maximum	Does not apply	Does not apply
Lifetime Maximum	Does not apply	Does not apply
4. Benefits		
Professional Services	In-Network	Out-of-Network
Primary Care Physician Office Visit - An internist, family practitioner, general practitioner, or pediatrician.	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Total Care Primary Care Physician Office Visit	Does not apply	Not applicable
Specialist Physician Office Visit - Doctors of Medicine (MD), Doctors of Osteopathy (DO), except Primary Care Physicians, and other medical practitioners such as optometrists, psychologists and chiropractors.	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Urgent Care Office Visit	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Total Care Urgent Care Office Visit	Does not apply	Not applicable
Blue KC Virtual Care - Office Visit Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	10% Coinsurance after Deductible	Not applicable

Blue KC Virtual Care - Behavioral Health Therapy Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	10% Coinsurance after Deductible	Not applicable
Designated Health Clinic	Does not apply	Not applicable
Other Benefits (in alphabetical order)	In-Network	Out-of-Network
ABA Services ABA Services Age Limits: Until Covered Person's 19th Birthday	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Abortion	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Acupuncture	Not covered	Not covered
Allergy Testing	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Allergy Treatment	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Ambulance - Air Air Ambulance Allowable Option: Billed Charges	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Ambulance - Ground Ground Ambulance Allowable Option: 150% of Medicare	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Assisted Reproductive Services	Not covered	Not covered
Autism-Related Services No limits	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Bariatric Services	Not covered	Not covered
Blue Distinction Specialty Care Facility Services No limits	Not Applicable	Not Applicable
Chiropractic Services Office Visit	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Dental Anesthesia Maximum age limit of 5 Years	Missouri/Kansas Default	Missouri/Kansas Default
Diabetic Equipment and Supplies Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Diabetic Footwear	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Diabetic Pump	Covered as Durable Medical Equipment (DME)	Covered as Durable Medical Equipment (DME)
Diabetic Self Management Education/Training (DSMT)	No member cost share	30% Coinsurance after Deductible
Durable Medical Equipment (DME) Prior Authorization Policy Applies No limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Elective Male Sterilization	No member cost share	30% Coinsurance after Deductible
Emergency Services	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Food and Food Products for PKU No limits	Covered	Covered
Foot Orthotics	Not covered	Not covered

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Gender Dysphoria-Related Services Prior Authorization Policy Applies Gender Dysphoria Cost Shares Apply to Cosmetic Services: No Gender Dysphoria Cost Shares Apply to Non-Surgical Services: Yes Gender Dysphoria Cost Shares Apply to Reassignment Surgery: Yes	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Hearing Aids	Not covered	Not covered
Hearing Aids - Bone Anchored Hearing Aids	Not covered	Not covered
High Tech Radiology (MRI, MRA, PET, CT) Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Home Health Care Prior Authorization Policy Applies Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Home Hospice	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Immunizations - Not Routine Preventive	Not covered	Not covered
Infertility and Impotency Diagnosis & Treatment Infertility and impotency treatment limited \$10,000 per Lifetime Impotency treatment pills: No limits Dollar Limitations include Pharmacy: Yes Impotency Drug Coverage: Yes Infertility Drug Coverage: Yes	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Inpatient Hospice Prior Authorization Policy Applies Maximum benefit of 14 Day(s)/Lifetime for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Inpatient Physician Services	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Labs Performed in Office / Independent Lab	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Maternity Dependent Daughters Maternity Covered?: No	Covered	Covered
Mental Health and Substance Abuse Services - Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Inpatient Physician Services	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Office Visit	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Outpatient Therapy in a Facility	10% Coinsurance after Deductible	30% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Mental Health and Substance Abuse Services - Outpatient Therapy in a Provider's Office	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Nutritional Counseling	Not covered	Not covered
Organ Transplant Services Prior Authorization Policy Applies	Subject to Applicable Cost Shares Blue Distinction Specialty Care Facility Services: Not applicable	Subject to Applicable Cost Shares
Organ Transplant Travel Expenses	Not covered	Not covered
Other Services Performed in Office	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Physician Services	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Surgery Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Cardiac Therapy No limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Cognitive Therapy	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Facility Combined with Hearing Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Provider's Office Combined with Speech Therapy Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Facility Combined with Occupational Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Provider's Office Combined with Physical Therapy Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Facility Combined with Physical Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Provider's Office Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Pulmonary Therapy No limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Facility Combined with Speech Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Provider's Office Maximum benefit of 20 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Penile Prostheses/Implant	Not covered	Not covered
Private Duty Nursing Combined with Home Health Care Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Routine Preventive Care Diabetes Prevention Program (DPP): Covered Preventive Schedule: PPACA+ (Women's Preventive)	No member cost share	30% Coinsurance after Deductible
Skeletal Manipulation performed in a Chiropractic Office	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Skilled Nursing Facility (SNF) Prior Authorization Policy Applies Maximum benefit of 30 Day(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Sports Physicals by a Physician	Not covered	Not covered
Vision Exam-Routine	Not covered	Not covered
Vision Hardware	Not covered	Not covered
Weight Loss Drugs (see Pharmacy cost shares)	Not covered	Not covered
Weight Management - Naturally Slim	Not covered	Not covered
Wigs	Not covered	Not covered
X-Rays and Radiology	10% Coinsurance after Deductible	30% Coinsurance after Deductible
5. General Pharmacy Information		
Pharmacy Network(s)	Network 1: RxPremier	
Prescription Drug List  Learn more about the drugs covered by your plan, drug category/tier, prior authorization and step therapy by reviewing your prescription drug list on MyBlueKC.com	Blue KC Preferred Formulary	
Outpatient Prescription Drug	In-Network	Out-of-Network
Deductible You must pay all the costs up to the Deductible amount before this plan begins to pay for covered services.	Does Not Apply	Does Not Apply
Outpatient Prescription Drug Out- of-Pocket Limits  The Out-of-Pocket Limit is the most you could pay during the Calendar Year for your share of the cost of covered services.	In-Network Combined with Medical Out-of-Pocket	Out-of-Network Combined with Medical Out-of-Pocket

Maintenance Medication Program	Not applicable
Generics Program	Not Applicable
Copay Credit Accumulator Adjustment (CCAA): Specialty drug copay card dollars will not be included in your deductible and/or out-of-pocket limits. Only your true out-of-pocket costs will be applied to your deductible and/or out-of-pocket totals.	Yes
Variable Copay Solution (VCS): When you use a drug copay card, Specialty prescription drugs may be subject to a new plan benefit cost share. This new cost share will not impact you or the price you pay.	No
Rx Savings Solutions A team of pharmacists and pharmacy technician will help you make sure you're getting the best possible pricing for your medicines. Member support is available Monday – Friday, 7 a.m. to 7 p.m. CST.	Register online at MyBlueKC.com and stay up-to-date on cost saving opportunities.  Email: info@rxsavingsllc.com PH: 1-800-268-4476

### 6. Plan Benefits - Pharmacy In-Network **Out-of-Network** RxPremier: \$10 Copay/Fill \$10 Copay/Fill, then 50% Coinsurance Retail Pharmacy (Short-term supply: Up to 34 Days) Drug Tier 1: Generic / Generic Specialty RxPremier: \$30 Copay/Fill \$30 Copay/Fill, then 50% Coinsurance Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred **Brand Specialty** RxPremier: \$50 Copay/Fill \$50 Copay/Fill, then 50% Coinsurance **Drug Tier 3:** Non-Preferred Brand / Non-Preferred Brand Specialty Retail Pharmacy (Long-term RxPremier:\$20 Copay/Fill \$20 Copay/Fill, then 50% Coinsurance supply: Between 35-102 Days) Drug Tier 1: Generic / Generic Specialty Drug Tier 2: Preferred Brand / RxPremier:\$60 Copay/Fill \$60 Copay/Fill, then 50% Coinsurance Non-Preferred Generic / Preferred **Brand Specialty** RxPremier:\$100 Copay/Fill \$100 Copay/Fill, then 50% Coinsurance **Drug Tier 3:** Non-Preferred Brand / Non-Preferred Brand Specialty \$20 Copay/Fill \$20 Copay/Fill, then 50% Coinsurance Mail Order Pharmacy (Mail Order supply: Between 35-102 Days) Drug Tier 1: Generic \$60 Copay/Fill \$60 Copay/Fill, then 50% Coinsurance Drug Tier 2: Preferred Brand / Non-Preferred Generic \$100 Copay/Fill \$100 Copay/Fill, then 50% Coinsurance Drug Tier 3: Non-Preferred Brand

Infertility and Impotency Drugs Retail (Short-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$10 Copay/Fill, then 50% Coinsurance	\$10 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$30 Copay/Fill, then 50% Coinsurance	\$30 Copay/Fill, then 50% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$50 Copay/Fill, then 50% Coinsurance	\$50 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Retail (Long-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: \$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: \$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: \$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Infertility and Impotency Drugs Mail Order Pharmacy Drug Tier 1: Generic	\$20 Copay/Fill, then 50% Coinsurance	\$20 Copay/Fill, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic	\$60 Copay/Fill, then 50% Coinsurance	\$60 Copay/Fill, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	\$100 Copay/Fill, then 50% Coinsurance	\$100 Copay/Fill, then 50% Coinsurance
Weight Loss Drugs	Not covered	Not covered

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	Plan Information
Group Name:	City of North Kansas City
Plan Name:	
Group Number:	11002000
State:	Missouri
Effective Date:	01/01/2022
	01/01/2022
Important Notes:	
For Internal Use Only:	Package: 0853310068 XREF: C7R4 Medical: 0853470140 Rx: 0853510743
1. General Plan Information	
Benefit Period	Calendar Year
Funding	Fully Insured with Maximum Refund
Grandfathered Status	Non-Grandfathered
Product Family	PPO
Consumer-Driven Health Plan (CDHP)	HSA
Spira Care Plan?	No
Religious Employer?	N/A
Classification of Eligible Employees	All full-time employees actively working 30 hours per week; Pre-65 retirees covered based on the group's HR policy
Eligibility	
Min % of Eligible Employees	75%
% Threshold of Total Employee Enrollment	90%
Minimum Employer Contribution – Eligible Employees	75%
Minimum Employer Contribution – Total Account Premium	50%
COBRA Billing	BCBS
Are Domestic Partners Covered?	No
Are Same Sex Spouses Covered?	Yes
Insurance Coverage Creditable (Medicare Part D)	Yes
Blue Connect	Blue Connect not included
Compass	Compass not included
2. Network	
Local Medical Network	Preferred-Care Blue Services rendered at Out-of-Network providers are subject to Out-of-Network allowables as stated in your contract, and balance billing may occur.
Out-of-Area Medical Network	BlueCard PPO/EPO

Pharmacy	See Pharmacy (Sections 5 & 6)	
3. Cost Sharing		
Medical Deductible - Calendar Year, Embedded All INN & OON Cross Accum	In-Network	Out-of-Network
Individual	\$2,800	\$2,800
Family	\$5,600	\$5,600
Pharmacy Deductible	Combined with Medical	
Medical Coinsurance	In-Network	Out-of-Network
Member Pays	10%	30%
Plan Pays	90%	70%
Out-of-Pocket Limit - Calendar Year, Embedded All INN & OON Cross Accum The Out-of-Pocket limit includes all Deductibles, Coinsurance, and Copayments a member pays during the Benefit Period.	In-Network	Out-of-Network
Individual	\$5,200	\$10,400
Family	\$10,400	\$20,800
Pharmacy Out-of-Pocket Limit	Combined with Medical	
Annual First Dollar Coverage	Does not apply	Does not apply
Annual Maximum	Does not apply	Does not apply
Lifetime Maximum	Does not apply	Does not apply
4. Benefits		
Professional Services	In-Network	Out-of-Network
Primary Care Physician Office Visit - An internist, family practitioner, general practitioner, or pediatrician.	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Total Care Primary Care Physician Office Visit	Does not apply	Not applicable
Specialist Physician Office Visit - Doctors of Medicine (MD), Doctors of Osteopathy (DO), except Primary Care Physicians, and other medical practitioners such as optometrists, psychologists and chiropractors.	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Urgent Care Office Visit	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Total Care Urgent Care Office Visit	Does not apply	Not applicable
Blue KC Virtual Care - Office Visit Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	10% Coinsurance after Deductible	Not applicable

Blue KC Virtual Care - Behavioral Health Therapy Virtual care provided by Blue KC virtual care partner(s). All other virtual care services subject to applicable cost sharing.	10% Coinsurance after Deductible	Not applicable
Designated Health Clinic	Does not apply	Not applicable
Other Benefits (in alphabetical order)	In-Network	Out-of-Network
ABA Services ABA Services Age Limits: Until Covered Person's 19th Birthday	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Abortion	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Acupuncture	Not covered	Not covered
Allergy Testing	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Allergy Treatment	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Ambulance - Air Air Ambulance Allowable Option: Billed Charges	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Ambulance - Ground Ground Ambulance Allowable Option: 150% of Medicare	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Assisted Reproductive Services	Not covered	Not covered
Autism-Related Services No limits	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Bariatric Services	Not covered	Not covered
Blue Distinction Specialty Care Facility Services No limits	Not Applicable	Not Applicable
Chiropractic Services Office Visit	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Dental Anesthesia Maximum age limit of 5 Years	Missouri/Kansas Default	Missouri/Kansas Default
Diabetic Equipment and Supplies Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Diabetic Footwear	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Diabetic Pump	Covered as Durable Medical Equipment (DME)	Covered as Durable Medical Equipment (DME)
Diabetic Self Management Education/Training (DSMT)	Deductible, then no charge	30% Coinsurance after Deductible
Durable Medical Equipment (DME) Prior Authorization Policy Applies No limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Elective Male Sterilization	Deductible, then no charge	30% Coinsurance after Deductible
Emergency Services	10% Coinsurance after Deductible	10% Coinsurance after In-Network Deductible
Food and Food Products for PKU No limits	Covered	Covered
Foot Orthotics	Not covered	Not covered

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Gender Dysphoria-Related Services Prior Authorization Policy Applies Gender Dysphoria Cost Shares Apply to Cosmetic Services: No Gender Dysphoria Cost Shares Apply to Non-Surgical Services: Yes Gender Dysphoria Cost Shares Apply to Reassignment Surgery: Yes	Subject to Applicable Cost Shares	Subject to Applicable Cost Shares
Hearing Aids	Not covered	Not covered
Hearing Aids - Bone Anchored Hearing Aids	Not covered	Not covered
High Tech Radiology (MRI, MRA, PET, CT) Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Home Health Care Prior Authorization Policy Applies Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Home Hospice	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Immunizations - Not Routine Preventive	Not covered	Not covered
Infertility and Impotency Diagnosis & Treatment Infertility and impotency treatment limited \$10,000 per Lifetime Impotency treatment pills: No limits Dollar Limitations include Pharmacy: Yes Impotency Drug Coverage: Yes Infertility Drug Coverage: Yes	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Inpatient Hospice Prior Authorization Policy Applies Maximum benefit of 14 Day(s)/Lifetime for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Inpatient Physician Services	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Labs Performed in Office / Independent Lab	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Maternity Dependent Daughters Maternity Covered?: No	Covered	Covered
Mental Health and Substance Abuse Services - Inpatient Hospital Facility (including Physician Services billed by Facility) Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Inpatient Physician Services	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Office Visit	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Mental Health and Substance Abuse Services - Outpatient Therapy in a Facility	10% Coinsurance after Deductible	30% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Mental Health and Substance Abuse Services - Outpatient Therapy in a Provider's Office	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Nutritional Counseling	Not covered	Not covered
Organ Transplant Services Prior Authorization Policy Applies	Subject to Applicable Cost Shares Blue Distinction Specialty Care Facility Services: Not applicable	Subject to Applicable Cost Shares
Organ Transplant Travel Expenses	Not covered	Not covered
Other Services Performed in Office	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Physician Services	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Surgery Prior Authorization Policy Applies	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Cardiac Therapy No limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Cognitive Therapy	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Facility Combined with Hearing Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Hearing Therapy in a Provider's Office Combined with Speech Therapy Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Facility Combined with Occupational Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Occupational Therapy in a Provider's Office Combined with Physical Therapy Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Facility Combined with Physical Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Physical Therapy in a Provider's Office Maximum benefit of 60 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Pulmonary Therapy No limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Facility Combined with Speech Therapy in a Provider's Office Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Outpatient Therapy - Speech Therapy in a Provider's Office Maximum benefit of 20 Visit(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Penile Prostheses/Implant	Not covered	Not covered
Private Duty Nursing Combined with Home Health Care Limits	10% Coinsurance after Deductible	30% Coinsurance after Deductible

Other Benefits (in alphabetical order)	In-Network	Out-of-Network
Routine Preventive Care Diabetes Prevention Program (DPP): Covered Preventive Schedule: PPACA+ (Women's Preventive)	No member cost share	30% Coinsurance after Deductible
Skeletal Manipulation performed in a Chiropractic Office	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Skilled Nursing Facility (SNF) Prior Authorization Policy Applies Maximum benefit of 30 Day(s)/Calendar Year for In-Network and Out-of-Network	10% Coinsurance after Deductible	30% Coinsurance after Deductible
Sports Physicals by a Physician	Not covered	Not covered
Vision Exam-Routine	Not covered	Not covered
Vision Hardware	Not covered	Not covered
Weight Loss Drugs (see Pharmacy cost shares)	Not covered	Not covered
Weight Management - Naturally Slim	Not covered	Not covered
Wigs	Not covered	Not covered
X-Rays and Radiology	10% Coinsurance after Deductible	30% Coinsurance after Deductible
5. General Pharmacy Information		
Pharmacy Network(s)	Network 1: RxPremier	
Prescription Drug List Learn more about the drugs covered by your plan, drug category/tier, prior authorization and step therapy by reviewing your prescription drug list on MyBlueKC.com	Blue KC Preferred Formulary	
Outpatient Prescription Drug Deductible You must pay all the costs up to the Deductible amount before this plan begins to pay for covered services.	In-Network Combined with Medical Deductible	Out-of-Network Combined with Medical Deductible
Outpatient Prescription Drug Out- of-Pocket Limits  The Out-of-Pocket Limit is the most you could pay during the Calendar Year for your share of the cost of covered services.	In-Network Combined with Medical Out-of-Pocket	Out-of-Network Combined with Medical Out-of-Pocket

Maintenance Medication Program	Not applicable
Generics Program	Not Applicable
Copay Credit Accumulator Adjustment (CCAA): Specialty drug copay card dollars will not be included in your deductible and/or out-of-pocket limits. Only your true out-of-pocket costs will be applied to your deductible and/or out-of-pocket totals.	Yes
Variable Copay Solution (VCS): When you use a drug copay card, Specialty prescription drugs may be subject to a new plan benefit cost share. This new cost share will not impact you or the price you pay.	No
Rx Savings Solutions A team of pharmacists and pharmacy technician will help you make sure you're getting the best possible pricing for your medicines. Member support is available Monday – Friday, 7 a.m. to 7 p.m. CST.	Register online at MyBlueKC.com and stay up-to-date on cost saving opportunities.  Email: info@rxsavingsllc.com PH: 1-800-268-4476

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6. Plan Benefits – Pharmacy		
	In-Network	Out-of-Network
Retail Pharmacy (Short-term supply: Up to 34 Days) Drug Tier 1: Generic / Generic Specialty	RxPremier: Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	<b>RxPremier:</b> Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	<b>RxPremier:</b> Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
Retail Pharmacy (Long-term supply: Between 35-102 Days) Drug Tier 1: Generic / Generic Specialty	RxPremier:Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier:Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
<b>Drug Tier 3:</b> Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier:Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
Mail Order Pharmacy (Mail Order supply: Between 35-102 Days) Drug Tier 1: Generic	Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
<b>Drug Tier 2:</b> Preferred Brand / Non-Preferred Generic	Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance
Drug Tier 3: Non-Preferred Brand	Deductible, then 10% Coinsurance	Deductible, then 30% Coinsurance

Preventive Drugs Preventive Drugs List: All Preventive Retail (Short-Term) Drug Tier 1: Generic / Generic Specialty	RxPremier: No member cost share	Deductible, then 30% Coinsurance
Retail (Short-Term) Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier: No member cost share	Deductible, then 30% Coinsurance
Retail (Short-Term) Drug Tier 3: Non-Preferred Brand / Non- Preferred Brand Specialty	RxPremier: No member cost share	Deductible, then 30% Coinsurance
Retail (Long-Term) Drug Tier 1: Generic / Generic Specialty	RxPremier:No member cost share	Deductible, then 30% Coinsurance
Retail (Long-Term) Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	RxPremier:No member cost share	Deductible, then 30% Coinsurance
Retail (Long-Term) Drug Tier 3: Non-Preferred Brand / Non- Preferred Brand Specialty	RxPremier:No member cost share	Deductible, then 30% Coinsurance
Mail Order Drug Tier 1: Generic / Generic Specialty	No member cost share	Deductible, then 30% Coinsurance
Mail Order Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	No member cost share	Deductible, then 30% Coinsurance
Mail Order Drug Tier 3: Non- Preferred Brand / Non-Preferred Brand Specialty	No member cost share	Deductible, then 30% Coinsurance
Infertility and Impotency Drugs Retail (Short-term supply) Drug Tier 1: Generic / Generic Specialty	<b>RxPremier:</b> Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	<b>RxPremier:</b> Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Infertility and Impotency Drugs Retail (Long-term supply) Drug Tier 1: Generic / Generic Specialty	RxPremier: Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Drug Tier 2: Preferred Brand / Non-Preferred Generic / Preferred Brand Specialty	<b>RxPremier:</b> Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand / Non-Preferred Brand Specialty	RxPremier: Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Infertility and Impotency Drugs Mail Order Pharmacy Drug Tier 1: Generic	Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance

Drug Tier 2: Preferred Brand / Non-Preferred Generic	Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Drug Tier 3: Non-Preferred Brand	Deductible, then 50% Coinsurance	Deductible, then 50% Coinsurance
Weight Loss Drugs	Not covered	Not covered

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# **MEMORANDUM**



**TO:** Mayor DeLong and Council Members

**FROM:** Casey Campbell, HR Manager

**DATE:** August 17, 2021

**RE:** 2022 Dental, Vision, Life and Disability Carrier Changes

All benefits were marketed this year by Lockton and summaries of each benefit's enhancement and savings are summarized below.

The Dental plan was marketed to 10+ carriers. Delta Dental provides a broader network and premium savings. Delta Dental presented rates 12% below the current Guardian Dental plan rates. If the Dental was bundled with the Vision, an additional 2% would be taken off the proposed dental rates. This would result in Delta Dental's final proposed rates being 14% below the current Guardian rates. Delta Dental also provided a 2-year rate guarantee.

The Vision plan was marketed to 10+ carriers. Delta Dental's vision plan provides premium savings and a comparable plan design. Delta Dental presented rates below the current VSP rates. If the Vision was bundled with the Dental, an additional 2% would be taken off the proposed vision plan rates. This would result in Delta Dental's final proposed vision rates being 24% below the current VSP rates.

*Note: The Dental and Vision plans were bundled resulting in the Dental plan final rates being 14% below current and the Vision plan final rates being 24% below current plan rates.

Basic Life and AD&D, Voluntary Life, and Long-Term Disability were marketed to 12 carriers. Standard Insurance Company (d/b/a "**The Standard**") for all lines provides premium savings and a 3-year rate guarantee. The plan designs are the same as current plans and the premium savings are as follows:

Basic Life and AD&D: 51% reduction in annual premium

Voluntary Life: Slight reduction on all age tiers

Long Term Disability: 47% reduction in annual premium

Staff recommends moving forward with carrier changes with Delta Dental for dental and vision coverage and The Standard for Life and Disability coverage.

## RESOLUTION NO. 21-059

RESOLUTION AUTHORIZING AND APPROVING USE OF

(A) DELTA DENTAL FOR EMPLOYEE DENTAL AND VISION INSURANCE;
AND (B) STANDARD INSURANCE COMPANY FOR EMPLOYEE LIFE
ISNURANCE AND LONG TERM DISABILITY INSURANCE WITH ALL SUCH
COVERAGES COMMENCING JANUARY 1, 2022.

**WHEREAS**, the City of North Kansas City, Missouri (the "City") is a body corporate, a third class city and political subdivision of the State of Missouri, duly created, organized and validly existing under and by virtue of the Constitution and laws of the State of Missouri; and

**WHEREAS,** the City has previously retained Lockton Companies, LLC ("**Lockton**") to provide health broker and related consulting services for the City; and

**WHEREAS,** Lockton, in conjunction with the City, has marketed and evaluated more than ten (10) insurance carriers to provide dental, vision, long-term disability and life insurance (collectively, the "**Benefits**") for the benefit of the City's employees with an effective date of January 1, 2022; and

**WHEREAS,** after careful review and evaluation by Lockton of the various insurance carriers considered for providing the Benefits to the City for its employees, City staff, in consultation with Lockton, recommends the proposal from Delta Dental for dental and vision insurance and Standard Insurance Company d/b/a "The Standard" for long-term disability and life insurance; and

**WHEREAS**, the City now desires to declare its selection of Delta Dental for employee dental and vision insurance and Standard Insurance Company d/b/a The Standard for long-term disability and life insurance with the coverage under each such insurance to commence January 1, 2022.

**NOW, THEREFORE, BE IT RESOLVED** by the City Council of the City of North Kansas City, Missouri, as follows:

<u>Section 1</u>. <u>Authorization and Approval of Certain Employee Befits</u>. The City Council hereby authorizes and approves the selection of (a) Delta Dental to provide dental and vision insurance for its participating employees; and (b) Standard Insurance Company d/b/a The Standard, to provide long-term disability and life insurance for its participating employees. All such insurance benefits shall have an effective coverage date of January 1, 2022. Any and all written agreements for such Benefits between the respective insurance carrier and the City shall be provided to the City Council for subsequent consideration and approval.

<u>Section 2</u>. Further Authority. The City shall, and the mayor, city clerk, city officials and employees of the City are hereby authorized and directed to take such further action, and execute such other documents, certificates and instruments as may be necessary or desirable to carry out and comply with the intent of this Resolution.

<u>Section 3</u>. <u>Severability</u>. The sections, paragraphs, sentences, clauses and phrases of this Resolution shall be severable. In the event that any such section, paragraph, sentence, clause or phrase of this Resolution is found by a court of competent jurisdiction to be invalid, the remaining portions of this Resolution are valid, unless the court finds the valid portions of this Resolution are so essential to and inseparably connected with and dependent upon the void portion that it cannot be presumed that the City has enacted the valid portions without the void ones, or unless the court finds that the valid portions, standing alone, are incomplete and are incapable of being executed in accordance with the legislative intent.

<u>Section 4</u>. <u>Governing Law</u>. This Resolution shall be governed exclusively by and construed in accordance with the applicable laws of the State of Missouri.

<u>Section 5</u>. <u>Effective Date</u>. This Resolution shall be in full force and effect from and after its passage by the City Council and approval by the Mayor.

**DONE** this 17th day of August, 2021.

	Bryant DeLong, Mayor
ATTEST:	

# **MEMORANDUM**



**TO:** Mayor and City Council

**FROM:** Kim Nakahodo, Interim City Administrator

**DATE:** August 17, 2021

**RE:** Extension Order No. 21-002

Councilmember Smith has requested that an extension of Mayor DeLong's Order No. 21-001 be placed on the City Council Agenda so that the Council may vote to extend the Order for a period of thirty (30) calendar days from 12:01 a.m. on August 28, 2021, until September 26, 2021, at 12:01 a.m. unless rescinded, extended, modified or amended pursuant to applicable law.

Ordinance No. 9416 and Order No. 21-002 has been prepared for the City Council's consideration.

AN ORDINANCE APPROVING PUBLIC HEALTH ORDER 21-002 REGARDING COVID-19 IN THE CITY OF NORTH KANSAS CITY, MISSOURI, AND AUTHORIZING THE EXTENSION OF THE EFFECTIVE PERIOD OF THE CURRENT ORDER 21-001 DATED JULY 31, 2021, FROM AUGUST 28, 2021, UNTIL SEPTEMBER 25, 2021.

WHEREAS, the City of North Kansas City, Missouri (the "City") is a body corporate, a third class city and political subdivision of the State of Missouri, duly created, organized and validly existing under and by virtue of the Constitution and laws of the State of Missouri; and

**WHEREAS**, on March 18, 2020, a proclamation of a state of emergency (the "**Proclamation**") was issued to allow the City of North Kansas City (the "**City**") to take measures to reduce the possibility of exposure to COVID-19¹ and promote the health and safety of North Kansas City residents, along with an accompanying order; and

**WHEREAS**, the aforesaid state of emergency continues to exist in the City, as well as throughout all areas surrounding the City; and

WHEREAS, COVID-19 and all of its related variants, respiratory diseases that spread easily from person to person and may result in serious illness or death, are major public health concerns and risks that have been confirmed in the City and in the surrounding greater Kansas City metropolitan area; and

WHEREAS, the power to protect the health of the inhabitants of a municipality is wider in range than other police powers granted to a municipality by the State of Missouri; and

WHEREAS, pursuant to the provisions of § 77.260 of the Missouri Revised Statutes the Mayor and City Council "shall have the care, management and control of the city and its finances, and shall have power to enact and ordain any and all ordinances not repugnant to the constitution and laws of this state, and such as they shall deem expedient for the good government of the city, the preservation of peace and good order, . . . , and the health of the inhabitants thereof, and such other ordinances, rules and regulations as may be deemed necessary to carry such powers into effect, and to alter, modify or repeal the same"; and

WHEREAS, pursuant to the provisions of § 77.530 of the Missouri Revised Statutes the City Council may make regulations and pass ordinances for the prevention of the introduction of contagious diseases into the City, and for the abatement of the same, and may

¹ Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is the cause of coronavirus disease 2019, commonly referred to as COVID-19.

make quarantine laws and enforce the same within five miles of the City, and may make regulations to secure the general health of the City; and

WHEREAS, for any purpose or purposes set forth in Chapter 77 of the Missouri Revised Statutes, § 77.590 of the Missouri Revised Statues provides that the City Council may enact and make all necessary ordinances, rules and regulations; and they may enact and make all such ordinances and rules, not inconsistent with the laws of the state, as may be expedient for maintaining the peace and good government and welfare of the City; and

WHEREAS, pursuant to the provisions of § 192.290 of the Missouri Revised Statutes the City has been granted the authority to make such further ordinances, rules and regulations, which may be necessary for the City, so long as such ordinances, rules and regulations are not inconsistent with the rules and regulations prescribed by the Missouri Department of Health and Senior Services; and

WHEREAS, the Center for Disease Control (the "CDC"), in addressing COVID-19 has stated that spread of the virus from person-to-person happens most frequently among close contacts; and

WHEREAS, COVID-19 continues to create a health emergency throughout the nation and throughout the greater metropolitan Kansas City area, including North Kansas City; and

**WHEREAS**, on March 10, 2021, the North Kansas City Hospital ("**NKCH**") reported that "total COVID patient volume [had] declined substantially²; and

**WHEREAS**, by August 11, 2021, the NKCH reported a "significant increase in the total number of COVID patients" at the hospital³; and

WHEREAS, the City Council, recognizing the ongoing state of emergency, desires to continue to employ all means available under the law to protect public life, health, safety and property to limit the development, contraction and spread of COVID-19, and, therefore, concludes that it is in the best interests of the City and its residents to adopt this ordinance

² The total number of COVID-19 related cases at NKCH as of March 10, 2021, can be summarized as follows:

Total COVID cases	8
Total recovering COVID cases	19
Total active COVID cases in ICU:	0
Total COVID patients on ventilator:	0

³ The total number of COVID-19 related cases at NKCH as of August 11, 2021, can be summarized as follows:

Total COVID cases	53
Total recovering COVID cases	15
Total active COVID cases in ICU:	18
Total COVID patients on ventilator:	9

authorizing and approving the issuance of Order 21-002, a copy of which is attached hereto as Exhibit 1 and incorporated herein by reference; and

WHEREAS, on July 31, 2021, pursuant to § 67.265, Mo. REV. STAT., the Mayor issued Order No. 21-001 requiring the taking of certain precautions to protect against the spread of COVID-19, including the wearing of face masks under certain conditions, which order expires on August 28, 2021 at 12:01 a.m.; and

WHEREAS, pursuant to the provisions of § 67.265, the City Council of the City of North Kansas City, Missouri, can extend Order 21-001 or approve a similar order for a period of up to thirty calendar days.

# NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF NORTH KANSAS CITY, MISSOURI, AS FOLLOWS:

<u>Section 1</u>. Findings of the City Council. The City Council of the City of North Kansas City, Missouri, does hereby find and determine that the City must continue to adequately deal with and address the emergency created by COVID-19 in order to (a) reduce the threat to human health caused by the transmission of the novel coronavirus and its variants in the City; (b) protect the public health, safety, and welfare of its residents and others; and (c) protect, preserve and save lives of the citizens of the City, as well as others who may enter the City.

<u>Section 2</u>. <u>Approval of Order 21-002</u>. To comply with the requirements of Missouri law and to accomplish the goals and objectives set forth in Section 1 of this Ordinance, the City Council finds and declares it necessary to authorize and approve Order 21-002, which attached to this ordinance as <u>Exhibit 1</u>. Order 21-002 is, therefore, hereby approved and authorized in all respects and the Mayor and City Clerk are hereby authorized and directed to execute said order.

<u>Section 3.</u> <u>Further Authority.</u> The City shall, and the mayor, city clerk, city officials and employees of the City are hereby authorized and directed to take such further action, and execute such other documents, certificates and instruments as may be necessary or desirable to carry out and comply with the intent of this Ordinance.

<u>Section 4</u>. <u>Severability</u>. The sections, paragraphs, sentences, clauses and phrases of this Ordinance shall be severable. In the event that any such section, paragraph, sentence, clause or phrase of this Ordinance is found by a court of competent jurisdiction to be invalid, the remaining portions of this Ordinance are valid, unless the court finds the valid portions of this Ordinance are so essential to and inseparably connected with and dependent upon the void portion that it cannot be presumed that the City has enacted the valid portions without the void ones, or unless the court finds that the valid portions, standing alone, are incomplete and are incapable of being executed in accordance with the legislative intent.

<u>Section 5</u>. Governing Law. This Ordinance shall be governed exclusively by and construed in accordance with the applicable laws of the State of Missouri.

PASSED this 17th day of August, 2021.

Bryant DeLong, Mayor

ATTEST:

Crystal Doss, City Clerk

APPROVED this 17th day of August, 2021.

Bryant DeLong, Mayor

APPROVED AS TO FORM:

and after its passage by the City Council and approval by the Mayor.

Effective Date. This Ordinance shall be in full force and effect from

Thomas E. Barzee, Jr., City Counselor

Anthony W. Bologna, City Attorney

Section 6.

# EXHIBIT 1



#### **ORDER 21-002**

**WHEREAS**, on March 13, 2020, the Governor of the State of Missouri declared a State of Emergency in the State of Missouri and invoked the provisions in Chapter 44 of the Missouri Revised Statutes through Executive Order 20-02, finding that the novel coronavirus (COVID-19) poses a serious health risk for the citizens of the State of Missouri; and

**WHEREAS**, the Governor's State of Emergency related to COVID-19 in the State of Missouri has been extended four times and, by Executive Order 21-07, the current state of emergency declared by the Governor of the State of Missouri remains in effect until August 31, 2021; and

**WHEREAS**, on March 17, 2020, a proclamation of a state of emergency was issued by the Mayor of the City of North Kansas City, Missouri (the "**Mayor**") to allow the City of North Kansas City, Missouri (the "**City**") to take measures to reduce the possibility of exposure to COVID-19 and promote the health and safety of North Kansas City residents; and

WHEREAS, by passage of Ordinance No. 9315, the Mayor was granted certain authority during the recognized and declared health emergency related to COVID-19 and existing within North Kansas City, said ordinance remains in full force and effect as of this date, and among other things the Mayor is authorized to issue this order pursuant to state law and Ordinance No. 9315; and

**WHEREAS**, pursuant to the provisions of Section 67.265 of the Missouri Revised Statutes, the Mayor issued Order 21-001 on July 31, 2021, with an effective date of August 2, 2021, and an expiration date of August 28, 2021, subject, however, to being extended by action of the City Council of the City of North Kansas City, Missouri (the "City Council"); and

**WHEREAS**, COVID-19 spreads between people who are in contact with one another or present in shared spaces and a gathering of individuals without necessary mitigation for the spread of infection will pose a risk of the spread of infectious disease; and

**WHEREAS**, Missouri is experiencing another wave of new COVID-19 cases, fueled by low rates of full vaccination (under 50%), the spread of a new strain of COVID-19 variant (the Delta variant), and hot spots in southwest Missouri and north central Missouri, locations frequented by North Kansas City residents and employees of North Kansas City businesses; and

**WHEREAS**, the City has an area of approximately 4.64 square miles and is surrounded by Kansas City, Missouri, more or less, and, therefore, North Kansas City assumes that it would have similar COVID-19 statistics as a percentage of its population when compared to Kansas City; and

Order No. 21-002 COVID-19 Emergency Order 21-002 August 18, 2021 Page 2 of 6

**WHEREAS**, on August 12, 2021, the City confirmed 185,288 total cases of COVID-19 in the greater metropolitan Kansas City area and 2,508 deaths from COVID-19 in Kansas City metro-wide. In addition, the Centers for Disease Control ("**CDC**") confirmed 36,307,177 total cases in the United States and 619,094 deaths nation-wide; and

**WHEREAS**, as of August 12, 2021, approximately 46.30% of all those residing in the greater metropolitan Kansas City area have been fully vaccinated for COVID-19 and 54.69% have had at least one vaccine dose; and

**WHEREAS**, the number of COVID-19 cases and hospitalizations in the greater metropolitan Kansas City area has increased steadily—the weekly average for new COVID-19 cases is the highest in approximately six months, and local hospitals are at or near capacity; and

WHEREAS, in a Memorandum dated August 11, 2021, from Stephen L. Reintjes, Sr., M.D., President and CEO of the North Kansas City Hospital ("NKCH"), directed to the City Council and the North Kansas City Hospital's Board of Trustees, the City was advised that "NKCH has seen a significant increase in the total number of COVID patients over the last couple of weeks"; and

**WHEREAS**, on July 27, 2021, the CDC issued new guidance, recommending all vaccinated individuals (in addition to their previous recommendation for unvaccinated individuals) in "substantial" or "high" transmission areas, with either more than 50 cases per 100,000 people in the area over a seven-day period, or with a COVID-19 test positivity rate higher than 5%, wear masks indoors; and

**WHEREAS**, on July 30, 2021, the CDC issued a study which found that vaccinated individuals carried as much virus in their noses as unvaccinated individuals, and that vaccinated people could spread the virus to each other¹; and

**WHEREAS**, in a statement released by the CDC accompanying the study of July 30, 2021, it was stated that "[t]his finding is concerning and was a pivotal discovery leading to the CDC's updated mask recommendation"; and

**WHEREAS**, the CDC's statement continued "[t]he masking recommendation was updated to ensure the vaccinated public would not unknowingly transmit virus to others, including their unvaccinated or immunocompromised loved ones"; and

WHEREAS, the county in which North Kansas City is located (Clay County) is

¹ See, Catherine M. Brown, et al., "Outbreak of SARS-CoV-2 Infections, Including COVID-19 Vaccine Breakthrough Infections, Associated with Large Public Gatherings—Barnstable County, Massachusetts, July 2021," MMWR Morbidity and Mortality Weekly Report, vol. 70 Early Release (July 30, 2021).



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Order No. 21-002 COVID-19 Emergency Order 21-002 August 18, 2021 Page 3 of 6

currently classified as a high transmission area by the CDC; and

**WHEREAS**, Regional Health guidance from medical professionals in the Kansas City metropolitan area recommended a return to masks indoors in July 2021 based on the positivity rate for COVID-19 cases in Missouri and the increase in hospitalizations; and

WHEREAS, the Mayor, pursuant to Section 67.265, Mo. REV. STAT., prior to the issuance of this Order, submitted a report dated August 13, 2021, to the City Council outlining and recommending a need for this Order and/or an extension of Order 21-001, presently set to expire on August 28, 2021 at 12:01 a.m., unless rescinded, extended, modified or amended pursuant to applicable law; and

**WHEREAS**, by Ordinance No. 9416 passed on August 17, 2021, the City Council of City approved this Order 21-002, an order similar to Order 21-001 presently in effect and issued by the Mayor on July 31, 2021, and extending the emergency health directives as set forth therein.

#### NOW, THEREFORE, IT IS HEREBY ORDERED AS FOLLOWS:

Section One: Community Health Guidance

- A. All persons are encouraged to limit exposure by obtaining a federally-approved vaccine and properly wearing a face covering or mask when applicable and maintaining social distancing when indoors at a place of public accommodation. The use of face coverings or masks is recommended in indoor private settings and crowded outdoor settings where there is close contact with other people who may not be fully vaccinated.
  - B. As used herein, the terms below shall have the following meanings:
  - 1. "Face Covering or Mask" means a uniform piece of cloth, fabric, or other material that securely covers a person's nose and mouth. It is properly worn when it remains affixed in place without the use of one's hands.
  - 2. "Place of Public Accommodation" means any place or business offering or holding out to the general public goods, services, privileges, facilities, advantages or accommodations for the peace, comfort, health, welfare, and safety of the general public. Place of Public Accommodation shall not include a private club or a place of public accommodation owned or operated on behalf of a religious corporation, association, or society.
  - 3. "Social Distancing" is maintaining at least six-feet of distance from others.



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#### Section Two: Indoor Places of Public Accommodations

A. An individual in an indoor Place of Public Accommodation must properly wear a face covering or mask while performing an activity involving close contact or proximity to coworkers or the public where six feet of separation is not feasible. These spaces include, but are not limited to, grocery and retail stores, special events, and public transit, but do not include private dwellings or private transportation vehicles.

#### B. Exceptions to the face covering or mask requirement include:

- 1. Minors below the age of 5; and
- 2. Persons who have disabilities where face coverings or masks constitute a substantial impairment to their health and well-being based upon medical, behavioral, or legal direction; and
  - 3. Persons in a restaurant or tavern actively consuming food or drink; and
- 4. Persons obtaining a service involving the nose or face when temporary removal of the face covering or mask is necessary to perform the service; and
  - 5. Persons who are alone in a separate room or office; and
- 6. Any interaction or gathering where parties have knowledge all persons present are fully vaccinated by federally-approved vaccine(s).

Section Three. Violation of any provision of this Order constitutes an imminent threat and immediate menace to public health and shall be considered a violation of Ordinance No. 9315. All remedies prescribed by this Order or otherwise available under applicable law, shall be cumulative, and the use of one or more remedies by the City shall not bar the use of any other remedy to enforce this Order.

Section Four. The Chief of the North Kansas City Police Department, and the Chief of the North Kansas City Fire Department, or their designees ("Directors") are, under the Constitutions of the United States and the State of Missouri, and this Order, subject to applicable law, authorized to enter all property necessary to enforce laws relating to public health and to provide for the avoidance, suppression or mitigation of disease, and abatement of nuisances and other unhealthy conditions. Upon complaint, or whenever the Directors deem an action carried on or engaged in by any person in the City detrimental to the public health, the Directors shall notify that person to show cause to the City at a time and place to be specified in the notice, why the trade or profession should not be discontinued or removed. The notice shall be served before the time specified therein as provided by law.

<u>Section Five</u>. Violation of any provision of this Order may result in the suspension or revocation of the Certificate of Occupancy and/or any license or permit issued by the City in accordance with Section 5.52.140 of the Code of the City of North Kansas City, Missouri.



Order No. 21-002 COVID-19 Emergency Order 21-002 August 18, 2021 Page 5 of 6

<u>Section Six</u>. If any provision of this Order or the application thereof to any person, entity, or circumstance is determined to be invalid by a court of competent jurisdiction, such determination shall not affect or impair the validity of the other provisions of this Order or its application to other persons, entities, and circumstances.

<u>Section Seven</u>. This Order shall take effect at 12:01 a.m. on Saturday, August 28, 2021, and shall expire Saturday, September 25, 2021, at 12:01 a.m. unless rescinded, extended, modified or amended pursuant to applicable law.

	Authenticated as Adopted
,	This 18 th day of August, 2021
	Bryant DeLong, Mayor
Filed with me, the City Clerk of the of August, 2021, by Mayor Bryant DeLong,	City of North Kansas City, Missouri, this day whose signature I hereby attest.
	Crystal Doss, City Clerk
(See Certificate of	Clerk on following page)

Order No. 21-002 COVID-19 Emergency Order 21-002 August 18, 2021 Page 6 of 6

#### **CERTIFICATION OF PASSAGE OF ORDER NO. 21-002**

This Certificate is made by the City Clerk of the City of North Kansas City, Missouri (the "City"), for the purpose of verifying and certifying, pursuant to the requirements of §67.265 of the Mo. REV. STAT., that the above Order No. 21-002 issued by the Mayor of North Kansas City, Missouri on August 18, 2021, duly came before the City Council of the City of North Kansas City, Missouri for the purpose of considering an order similar to the order issued by the Mayor on July 31, 2021, and extending the emergency health directives for a period not exceeding thirty (30) calendar days. Upon vote duly taken in a regularly scheduled City Council meeting on August 17, 2021, the undersigned City Clerk hereby certifies that Ordinance No. 9416 was duly passed by the City Council of North Kansas City, Missouri and is in full force and effect. Ordinance No. 9416 was duly passed by a vote of _____ to ____ upon second reading. **IN WITNESS WHEREOF**, the undersigned has executed this Certificate as of the _____ day of August, 2021. CITY OF NORTH KANSAS CITY, MISSOURI By: _____ Crystal Doss, City Clerk [CITY SEAL]

## **MEMORANDUM**



**TO:** Honorable Mayor Bryant & City Council Members

**FROM:** Dave Hargis, Fire Chief

**DATE:** August 17, 2021

**RE:** Budget Resolution – Virus Diagnostic Equipment

The past 16 months have required the City to send multiple employees (200+ to date) for COVID-19 testing. The available testing was located at various locations in the metro area; however, none were located in North Kansas City, and results sometimes took up to 72 hours to be processed. We now have the opportunity (previously the machine had been out of stock due to state and federal governments purchasing them) to purchase diagnostic equipment which would allow the City to test its employees in-house and have results in 20-30 minutes. With the belief that COVID-19 will continue to be a part of our lives for some time to come, staff recommends the purchase of a Cepheid GeneXpert Express Diagnostic Systems and Tests from Medline Medical Supply Company. This test system will detect COVID-19, Respiratory Syncytial Virus (RSV), Influenza, and Strep. Delivery time is estimated at 3-weeks after the order is placed.

This is an unbudgeted capital purchase. The Fire Department received a quotation in the amount of \$15,605.27 from Medline for the test system. Since this is a COVID-related expense we may be able to seek reimbursement through American Rescue Plan Act (ARPA) federal funds.

Staff recommends the approval of a budget amendment in the amount of \$15,605.27 to fund this purchase. A resolution appropriating \$15,605.27 from the Gaming Fund to the equipment line has been prepared for the consideration of approval by the Council.

#### **RESOLUTION NO. 21-061**

# A RESOLUTION AMENDING THE GAMING FUND BUDGET FOR FISCAL YEAR 2020-2021 IN THE AMOUNT OF \$15,606 FOR VIRUS DIAGNOSTIC EQUIPMENT

- **WHEREAS**, the City of North Kansas City, Missouri adopted the fiscal year 2020-2021 Budget on September 15, 2020, Resolution No. 20-062, using estimates of income and expenditures established at that time; and
- **WHEREAS,** The past 16 months have required the City to send multiple employees (200+ to date) for COVID-19 testing at various locations across the metro with results taking up to 72 hours; and
- **WHEREAS,** The City has the ability to purchase diagnostic equipment which would allow the City to test its employees in-house and have results in 20-30 minutes for multiple viruses; and
- **WHEREAS,** staff recommends a budget amendment in the amount of \$15,606 to purchase the equipment.

**NOW, THEREFORE, BE IT RESOLVED** that the following amendment shall be made to the fiscal year 2020-2021 Budget as follows:

#### **GAMING FUND**

		<u>Increase</u>	<b>Decrease</b>
Revenues			
Balance Appropriation	25-3900	\$15,606	
<b>Expenditures</b>			
Virus Diagnostic Equipment	25-535-8750	\$15,606	
<b>DONE</b> this 17th of August, 2021			
	В	ryant DeLong, Mayor	Î
Attest:	_		
Crystal Doss, City Clerk			

### **MEMORANDUM**



**TO:** Mayor DeLong and City Council

**FROM:** Dave Hargis, Fire Chief

**DATE:** August 17, 2021

**RE:** Professional Services Agreement with A.P. Triton Consultants LLC

Budget Authority: \$16,000

On November 20, 2018, the City Council approved agreements with the Missouri Healthnet Division to participate in the Ground Emergency Medical Transport (GEMT) Program. As a reminder, the GEMT Program is a program that allows the Fire Department to request compensation for certain unreimbursed costs for Medicaid transports. GEMT draws down federal dollars to help offset the cost of the City's provision of emergency ambulance and transport for qualifying Medicaid patients. The governmental agency (the City of North Kansas City) that operates the EMS service is allowed to participate in the recovery of costs associated with providing transportation of Medicaid beneficiaries when the state Medicaid program does not cover the full cost of the service. This cost is shared by the state and federal government on a 35/65 split.

In order to ensure the City can collect on 2021 reimbursements, staff is recommending the City hire a consultant, A.P. Triton L Consultants LLC, to prepare its cost reimbursement report. The cost reimbursement report is similar to a corporate tax return. It documents the cost of providing transport, including both direct and indirect costs associated with providing the ambulance service. These include administration, fuel, maintenance, training and time on task.

AP Triton's staff created the nation's first ambulance GEMT program. The firm provides turnkey GEMT programs in Missouri and numerous other states. A.P. Triton, LLC created the cost reports, instructions and methodologies used for Missouri's GEMT program. A.P. Triton L Consultants LLC also completed our cost reports for the 2019 (\$153,00), 2020 (\$191,000) reimbursements.

A.P. Triton charges a fee of \$7,500, plus 3% of gross GEMT proceeds. We have estimated the City's reimbursement would be approximately \$80,000, which would bring the total cost to an estimated \$15,400. This would allow the City to net around \$64,600, as shown below.

Estimated Cost of Transport Reimbursement	\$ 191,000
A.P. Triton flat fee	(7,500)
3% of Gross GEMT reimbursement	(5,730)
City Net for GEMT reimbursement	\$ 177,770

Payment will be due only after completion of the cost report. The report will be completed between July 2021 and October 31, 2021.

The FY 2022 Budget includes \$16,000 for the GEMT consultant, which reflected the best estimate available to staff at that time. The estimated expense will now be \$13,230. If the amount for which the City eventually seeks reimbursement is higher than the \$191,000 estimate, then A.P. Triton's 3% of gross GEMT fee will be higher, but so will the amount that the City will net. At this time, staff seeks Council approval of the agreement with A.P. Triton.

## RESOLUTION NO. 21-060

## A RESOLUTION APPROVING A PROFESSIONAL SERVICES AGREEMENT WITH AP TRITON CONSULTING LLC FOR THE NKC FIRE DEPARTMENT

**WHEREAS**, the City of North Kansas City, Missouri (the "City") is a body corporate, a third class city and political subdivision of the State of Missouri, duly created, organized and validly existing under and by virtue of the Constitution and laws of the State of Missouri; and

**WHEREAS**, the City operates the North Kansas City Fire Department (the "**NKCFD**"), and it has been determined that it would be in the best interests of the City that the NKCFD receive certain ground emergency medical transportation consulting services (the "**Services**") from AP Triton Consulting LLC (the "**Consultant**"); and

**WHEREAS**, on July 21, 2020, the City passed Resolution No. 20-049 authorizing the City to enter into a contract with the Consultant, which contract has now expired; and

**WHEREAS**, the City has determined that the Consultant has the qualifications, experience, expertise and skill to provide the Services for the City; and

**WHEREAS**, the City and the Consultant now desire to enter into the Professional Services Agreement (the "**Agreement**") for the Services, as more fully set forth in the Agreement.

**NOW, THEREFORE, BE IT RESOLVED** by the City Council of the City of North Kansas City, Missouri, as follows:

<u>Section 1</u>. <u>Authorization of Agreement</u>. The City Council hereby authorizes the City to enter into the Professional Services Agreement (the "**Agreement**") with AP Triton Consulting LLC, which agreement shall be in substantially the form of "**Exhibit 1**", attached hereto and incorporated herein by reference. The City is hereby authorized to pay the costs associated with the Agreement, provided that such costs do not exceed the amount set forth in the Agreement.

<u>Section 2</u>. <u>Further Authority</u>. The City shall, and the mayor, city clerk, city officials and employees of the City are hereby authorized and directed to take such further action, and execute such other documents, certificates and instruments as may be necessary or desirable to carry out and comply with the intent of this Resolution.

<u>Section 3</u>. Severability. The sections, paragraphs, sentences, clauses and phrases of this Resolution shall be severable. In the event that any such section, paragraph, sentence, clause or phrase of this Resolution is found by a court of competent jurisdiction to be invalid, the remaining portions of this Resolution are valid, unless the court finds the valid portions of this Resolution are so essential to and inseparably connected with and dependent upon the void portion that it cannot be presumed that the City has enacted the valid portions without the void ones, or unless the court finds that the valid portions, standing alone, are incomplete and are incapable of being executed in accordance with the legislative intent.

<u>Section 4</u>. Governing Law. This Resolution shall be governed exclusively by and construed in accordance with the applicable laws of the State of Missouri.

**Section 6**. Effective Date. This Resolution shall be in full force and effect from and after its passage by the City Council and approval by the Mayor.

**DONE** this 17th day of August, 2021.

	Bryant DeLong, Mayor	
ATTEST:		
	_	
Crystal Doss, City Clerk		

## AP Triton Professional Services Agreement

This Agreement, dated as of **August _____, 2021**, is by and between the City of North Kansas City ("CITY"), a Missouri municipal corporation, and AP Triton Consulting, LLC ("CONSULTANT"), a California limited liability company, authorized to do and doing business in the State of Missouri (CITY and CONSULTANT are each a "**Party**" and are collectively the "**Parties**"). The Agreement will be effective upon final execution by all Parties.

#### 1. HEADINGS

Headings herein are for convenience of reference only and shall in no way affect interpretation of the Agreement.

#### 2. EXHIBITS

Exhibits A, and B are attached hereto and included by reference.

#### 3. CONSULTANT'S SCOPE OF SERVICES AND CITY RESPONSIBILITIES

CONSULTANT agrees to perform all services described in Exhibit A, Scope of Work, Schedule and Budget, for payment pursuant to Exhibit B, in accordance with the terms and conditions of this Agreement. CITY shall provide complete, accurate and timely information regarding CITY's requirements for the project and shall designate by name a project representative authorized to act on its behalf. CITY shall examine documents or other instruments submitted by CONSULTANT and shall render any decisions necessary promptly in order to avoid unreasonable delay. CITY shall provide any additional materials, other than those CONSULTANT is responsible to provide, that are reasonably necessary to complete the project. CITY shall provide reasonable access to any locations under the control of CITY required for CONSULTANT to perform the services hereunder. Any additional requirements specific to the project will be identified in Exhibit A.

#### <u>4.</u> <u>TERM</u>

Except as may be earlier terminated as provided in Section 17 of this Agreement, this Agreement shall terminate on **June 30, 2022**, unless extended by mutual agreement of the Parties in writing.

#### 5. PAYMENT

For all services performed in accordance with the Agreement, payment shall be made to CONSULTANT as provided in Exhibits A and B.

#### 6. INDEPENDENT CONTRACTOR

No relationship of employer and employee is created by this Agreement; it being understood and agreed that CONSULTANT is at all times an independent contractor and can perform work for others. CONSULTANT is not the agent or employee of the CITY in any capacity whatsoever and CITY shall not be liable in any manner for any acts or

omissions by CONSULTANT or for any obligations or liabilities incurred by CONSULTANT, his employees, or agents.

CONSULTANT shall have no claim under this Agreement or otherwise, for seniority, vacation time, vacation pay, sick leave, personal time off, health insurance, medical care, hospital care, retirement benefits, social security, disability, workers' compensation, or unemployment insurance benefits, civil service protection, or employee benefits of any kind.

CONSULTANT shall be solely liable for and obligated to pay directly all applicable payroll taxes (including federal and state income taxes) or contributions for unemployment insurance or old age pensions or annuities which are imposed by any governmental entity in connection with the labor used or which are measured by wages, salaries or other remuneration paid to its officers, agents or employees, and CONSULTANT agrees to indemnify and hold CITY harmless from any and all liability which CITY may incur because of CONSULTANT's failure to pay such amounts.

In carrying out the work contemplated herein, CONSULTANT shall comply with all applicable federal and state workers' compensation and liability laws and regulations with respect to the officers, agents and/or employees conducting and participating in the work; and agrees that such officers, agents, and/or employees will be considered as independent contractors and shall not be treated or considered in any way as officers, agents and/or employees of CITY.

CONSULTANT does, by this Agreement, agree to perform its said work and to function at all times in strict accordance with currently approved methods and practices in its field and acknowledges that the sole interest of CITY is to ensure that said service shall be performed and rendered in a competent, efficient, timely and satisfactory manner and in accordance with the standards required by the CITY.

Notwithstanding the foregoing, if the CITY in its discretion determines that pursuant to state and federal law CONSULTANT is an employee for purposes of income tax withholding, CITY may upon two (2) weeks' notice to CONSULTANT, withhold from payments otherwise due to CONSULTANT hereunder federal and state income taxes and to pay said sums to the federal and state governments.

#### 7. <u>INDEMNIFICATION</u>

To the fullest extent permitted by law, CONSULTANT shall release, hold harmless, defend and indemnify the CITY, its officials, officers, employees and agents from and against any and all claims, losses, damages, lawsuits, liabilities and expenses, including but not limited to attorneys' fees, arising out of or resulting from the performance of services under this Agreement, including but not limited to those attributable to bodily injury, sickness, disease, death or to injury to or destruction of property, including the loss therefrom, or to any violation of federal, state or municipal law or regulation, which arises out of or is any way connected with the performance of this Agreement (collectively "Liabilities"), except where such Liabilities are caused by the sole

negligence or willful misconduct of any indemnitee. The CITY may, at its option, participate in the defense of any such claim without relieving CONSULTANT of any obligation hereunder.

#### 8. INSURANCE

CONSULTANT shall maintain at all times during the performance of this Agreement a commercial general liability insurance policy with minimum limits of at least \$1,000,000 per occurrence and \$2,000,000 general aggregate for bodily injury and property damage including coverages for contractual liability, personal injury, independent contractors, broad form property damage, products and completed operations; an automobile liability insurance policy with a combined limit liability in the amount of \$1,000,000 bodily injury and property damage (said policy shall include coverage for owned, nonowned, leased and hired cars); and, if any licensed professional performs services under this contract, a professional liability insurance policy in the minimum amount of \$1,000,000.00 to cover any claims arising out of CONSULTANT's performance of services under this Agreement. All insurance, except professional liability, shall name the CITY, its officials, officers, agents, volunteers and employees as additional insureds and shall provide primary coverage with respect to the CITY.

All insurance policies shall: 1) provide that the insurance carrier shall not cancel, terminate or otherwise modify the terms and conditions of said policies except upon thirty (30) days written notice to the City Council of North Kansas City; 2) be evidenced by the original Certificate of Insurance and the insurance carrier's standard form endorsement evidencing the required coverage; and 3) be approved as to form and sufficiency by the CITY and its insurance professionals.

If the commercial general liability insurance referred to above is written on a Claims Made Form then, following termination of this Agreement, coverage shall survive for a period of not less than five (5) years. Coverage shall also provide for a retroactive date of placement coinciding with the effective date of this Agreement.

If CONSULTANT employs any person, it shall carry workers' compensation and employer's liability insurance and shall provide a certificate of insurance to the CITY. The workers' compensation insurance shall: 1) provide that the insurance carrier shall not cancel, terminate or otherwise modify the terms and conditions of said insurance except upon thirty (30) days written notice to the CITY; and 2) provide for a waiver of any right of subrogation against the CITY to the extent permitted by law. CONSULTANT shall promptly forward all insurance documents to the CITY.

## 9. CONFORMITY WITH LAW AND SAFETY; LICENSES, PERMITS AND FEES.

All services rendered hereunder shall be provided in accordance with all ordinances, resolutions, statutes, rules, and regulations of the CITY and any Federal, State or local governmental agency having jurisdiction in effect at the time service is rendered.

The CONSULTANT shall obtain at its sole cost and expense such licenses, permits and approvals as may be required by law for the performance of the services required by this

Agreement. The CONSULTANT shall have the sole obligation to pay for any fees, assessments and taxes, plus applicable penalties and interest, which may be imposed by law and arise from or are necessary for the CONSULTANT's performance of the services required by this Agreement, and shall indemnify, defend and hold harmless the City against any such fees, assessments, taxes, penalties or interest levied, assessed or imposed against the CITY hereunder.

#### 10. TRAVEL EXPENSES

CONSULTANT shall be allowed and compensated for reasonable travel expenses to carry out the work of the CITY as approved, in advance, by the CITY in accordance with Attachment B. Prior to incurring such travel expenses, CONSULTANT must first receive the prior written approval of the CITY.

#### **11. TAXES**

Payment of all applicable federal, state and local taxes shall be the sole responsibility of the CONSULTANT. CONSULTANT shall indemnify, defend and hold harmless the City against any such taxes, penalties or interest levied, assessed or imposed against the CITY hereunder.

#### 12. OWNERSHIP OF DOCUMENTS

CONSULTANT hereby assigns to the CITY and its assignees all copyright and other use rights in any and all proposals, plans, specification, designs, drawings, sketches, renderings, models, reports and related documents (including computerized or electronic copies) respecting in any way the subject matter of this Agreement, whether prepared by the CITY, the CONSULTANT, the CONSULTANT's sub-contractors, or third parties at the request of the CONSULTANT (collectively, "Documents and Materials").

CONSULTANT also hereby assigns to the CITY and its assignees all copyright and other use rights in any Documents and Materials including electronic copies stored in CONSULTANT's information system (s), respecting in any way the subject matter of this Agreement.

CONSULTANT agrees to take such further steps as may be reasonably requested by CITY to implement the aforesaid assignment. If for any reason said assignment is not effective, CONSULTANT hereby grants the CITY and any assignee of the CITY an express, exclusive and irrevocable royalty-free license to retain and use said Documents and Materials. The rights of the CITY under this Section 12 shall apply regardless of the degree of completion of the Documents and Materials and whether or not CONSULTANT's services as set forth in Exhibit A to this Agreement have been fully performed or paid for.

During the term of this Agreement CONSULTANT shall be permitted to retain copies, including computerized and reproducible copies, of said Documents and Materials.

#### 13. ACCESS AND RETENTION OF RECORDS

CONSULTANT agrees to provide the CITY and its designees access to all of the CONSULTANT's records related to this Agreement and that the CONSULTANT shall maintain its records related to this Agreement for a period of not less than five (5) years after the final payment to the CONSULTANT is made by the CITY.

#### 14. CONFLICT OF INTEREST

CONSULTANT covenants that it presently has no interest, and shall not obtain any interest, direct or indirect, which would conflict in any manner with the performance of services required under this Agreement, including but not limited to any provision of services to any federal, state or local regulatory or other public agency which has any interest adverse or potentially adverse to the CITY, as determined in the reasonable judgment of the City Council of the CITY. Entering into this Agreement does not preclude CONSULTANT from working for others as long as CONSULTANT ensures that such work does not constitute a conflict of interest.

#### 15. CONFIDENTIALITY

CONSULTANT agrees that any information, whether proprietary or not, made known to or discovered by it during the performance of or in connection with this Agreement for the CITY will be kept confidential and not be disclosed to any other person or entity except as required by law. CONSULTANT agrees to immediately notify the CITY if it is requested to disclose to others any information made known to or discovered by it during the performance of or in connection with this Agreement. These conflicts of interest and future service provisions and limitations shall remain fully effective for five (5) years after termination of services being provided by CONSULTANT to the CITY hereunder.

#### 16. USE OF CITY PROPERTY

CONSULTANT shall not use CITY property (including equipment, instruments and supplies) or personnel for any purpose other than in the performance of its obligations under this Agreement.

#### 17. TERMINATION

Either party may terminate this Agreement for default upon five (5) days written notice to the other if the other party has substantially failed to fulfill any of its obligations under this Agreement in a timely manner as provided herein. The CITY has and reserves the right to terminate this Agreement at its convenience and without cause upon thirty (30) days written notice to CONSULTANT. In the event that the CITY should terminate this Agreement for its convenience, CONSULTANT shall be entitled to payment for services provided hereunder, but only for such services performed prior to the effective date of said termination, including travel, accrued as of the date of the termination, which payment shall be per the terms set forth in Exhibit B.

#### 18. ASSURANCE OF PERFORMANCE

If at any time CITY believes CONSULTANT may not be adequately performing its obligations under this Agreement or that CONSULTANT may fail to complete the services as required by this Agreement, CITY may, at its option, request from CONSULTANT prompt written assurances of performance and a written plan

acceptable to CITY, to correct the observed deficiencies in CONSULTANT's performance. CONSULTANT shall provide such written assurances and written plan within ten (10) calendar days of its receipt of CITY's request and shall thereafter diligently commence and fully perform such written plan. CONSULTANT acknowledges and agrees that any failure to provide such written assurances and written plan within the required time shall constitute grounds for termination pursuant to Section 17 of this Agreement.

#### 19. CHOICE OF LAW AND VENUE

CONSULTANT agrees that if a dispute arises in the performance of this Agreement the laws of the State of Missouri will govern. Legal actions concerning any dispute, claim or matter arising out of or in relation to this Agreement shall be instituted in the Circuit Court of the County of Clay, State of Missouri, or any other appropriate court in such county. The CONSULTANT covenants and agrees to submit to the personal jurisdiction of such court in the event of such action.

#### **20. ENTIRE AGREEMENT**

This Agreement, including all attachments, exhibits, and any other documents specifically incorporated into this Agreement, shall constitute the entire agreement between CITY and CONSULTANT relating to the subject matter of this Agreement. As used herein, this Agreement refers to and includes any documents incorporated herein by reference and any exhibits or attachments.

This Agreement supersedes and merges all previous understandings, and all other agreements, written or oral, between the Parties and sets forth the entire understanding of the Parties regarding the subject matter thereof. This Agreement may not be modified except by a written document signed by both Parties.

This Agreement and all related obligations and services hereunder are intended for the sole benefit of CITY and CONSULTANT and are not intended to create any third party rights or benefits.

#### 21. MODIFICATION OF AGREEMENT

This Agreement may be supplemented, amended or modified only by the mutual agreement of the Parties. No supplement, amendment or modification of this Agreement shall be binding unless it is in writing and signed by authorized representatives of both Parties.

#### 22. SEVERABILITY

In the event that any one or more of the phrases, sentences, clauses, paragraphs, or sections contained in this Agreement shall be declared invalid or unenforceable by a valid judgment or decree of a court of competent jurisdiction, such invalidity or unenforceability shall not affect any of the remaining phrases, sentences, clauses, paragraphs, or sections of this Agreement which are hereby declared as severable and shall be interpreted to carry out the intent of the parties hereunder unless the invalid provision is so material that its invalidity deprives either party of the basic benefit of their bargain or renders this Agreement meaningless.

#### 23. SUCCESSORS AND ASSIGNS

This Agreement is binding upon and inures to the benefit of the successor, executors, administrators, and assigns of each party to this Agreement, provided, however, that CONSULTANT shall not assign or transfer by operation of law or otherwise any or all rights, burdens, duties, or obligations without prior written consent of the CITY. Any attempted assignment without such consent shall be invalid.

#### 24. NOTICES

All notices, requests, demands, or other communications under this Agreement shall be in writing. Notices shall be given for all purposes as follows:

**Personal delivery:** When personally delivered to the recipient, notices are effective on delivery.

**First Class Mail:** When mailed first class to the last address of the recipient known to the party giving notice, notice is effective three (3) mail delivery days after deposit in a United States Postal Service office or mailbox.

**Certified Mail:** When mailed certified mail, return receipt requested, notice is effective on receipt, if delivery is confirmed by a return receipt.

**Overnight Delivery:** When delivered by a recognized overnight delivery service with charges prepaid or charged to the sender's account, notice is effective on delivery, if delivery is confirmed by the delivery service.

Addresses for purpose of giving notice are as follows:

To CITY: City of North Kansas City

Attn: Bryant DeLong 2010 Howell Street

North Kansas City, MO 64116

To CONSULTANT: AP Triton, LLC

Attn: Kurt Henke

1309 Coffeen Avenue, Suite 3178

Sheridan, WY 82801

Any correctly addressed notice that is refused, unclaimed, or undeliverable because of an act or omission of the party to be notified shall be deemed effective as of the first date that said notice was refused, unclaimed, or deemed undeliverable by the postal authorities, messenger, or overnight delivery service.

Any party may change its address or facsimile number by giving the other party notice of the change in any manner permitted by this Agreement.

#### **25. SIGNATORIES**

By signing this agreement, signatories warrant and represent that they have executed this Agreement in their authorized capacity.

**<u>CORPORATE AUTHORITY.</u>** The persons executing this Agreement on behalf of the parties hereto warrant that (i) such party is duly organized and existing, (ii) they are duly authorized to execute and deliver this Agreement on behalf of said party, (iii) by so executing this Agreement, such party is formally bound to the provisions of this Agreement, and (iv) the entering into this Agreement does not violate any provision of any other Agreement to which said party is bound.

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement as of the day and year above written.

CHY	CONSULTANT
By:	By:
Name: Bryant DeLong Title: Mayor	Name: Kurt Henke Title: Principal / Managing Partner
Date:	Date:

# **EXHIBIT A Scope of Services**

# 1. GROUND EMERGENCY MEDICAL TRANSPORTATION CONSULTING RESPONSIBILITIES

CONSULTANT shall provide consulting services to the CITY as follows:

- CONSULTANT shall annually prepare the cost report that CITY submits to the State of Missouri in order for the CITY to participate in the State's GEMT Program. CONSULTANT shall prepare the cost reports in accordance with all federal, state or municipal laws or regulations.
- CONSULTANT shall provide CITY with the cost report and all supporting documentation to the agreed upon email address. It shall be the CITY's responsibility to file the cost report with the State of Missouri. CITY shall meet CONSULTANT's established deadlines for data submission and document reviews.
- There shall be a cap of 30 hours per month on all services provided, unless extended by mutual agreement of the parties.
- As part of the fee set forth in this Exhibit, CONSULTANT shall provide CITY with four (4) hours of audit assistance, either in person (if the audit is conducted onsite) or through telephone/e-mail (if the audit is a desk audit). Travel expenses will be billed to CITY as set forth in Exhibit B.
- Any programs, projects or additional work beyond the 30 hour monthly cap can be negotiated on a project basis cost by the party's or at \$400.00 per hour.

# **EXHIBIT B Payment Terms**

#### A. SCHEDULE

Services to be performed under this Agreement will begin at the time the Agreement is executed.

#### **B.** TRAVEL

Expenses for travel will be billed based on the current per diem rates as published by the federal government. Travel authorization will be approved by the CITY prior to date of travel.

Related travel expenses such as airfare, hotel, and meals will be billed at actual cost and will be approved by the CITY prior to travel.

#### C. TOTAL PAYMENT AMOUNT

For those CLIENTS who have no more than 4,500 total annual transports per year, services under the contract provided by the CONSULTANT shall be completed for a fee of \$7,500 plus 3% of gross GEMT proceeds per report year, for a term of one year. The fee schedule referenced herein shall remain unchanged for the term of the contract. Invoices for payment will be provided to the CITY upon the completion of the cost report, to the address provided under this Agreement. Payment will be due within thirty (30) days from receipt of the invoice by the City. It will be the CITY's responsibility to notify CONSULTANT of any changes to the name and/or address on record for the purposes of invoicing.

#### D. ADDITIONAL SERVICES

Any requests for services beyond the scope of services set forth in Exhibit A shall be billed at the rate of Four Hundred dollars (\$400.00) per hour or a negotiated fixed cost for special projects. Performing any services under this provision requires prior written approval of the CITY.

Contact information for billing purposes is as follows:

CLIENT: North Kansas City Fire Department

Attn: Fire Chief Dave Hargis

2010 Howell Street

North Kansas City, MO 64116

Phone number: 816.274.6025 Email address: dhargis@nkc.org

## **MEMORANDUM**



**TO:** Honorable Mayor DeLong & City Council Members

**FROM:** Anthony Sands, Director of Public Works

**DATE:** August 17, 2021

**RE:** Howell Street Bump-Outs Budget Amendment

Construction of the Howell Street curb extension "bump-outs" began on July 19, 2021. The "bump-out" curb extensions provide traffic calming between Northgate and Macken Park by narrowing the vehicle lane width at pedestrian crossings, shortening the distance pedestrians must cross, and increasing the sight distance/visibility between traffic and pedestrians.

During construction it was observed that additional drainage facilities would be needed for the project as the flat slope of the street does not carry water adequately. The cost of this necessary construction was covered by the planned contingency funding.

Two additional items are needed to complete the construction and will require an amendment to the current project budget. First, brick pavers placed during the construction of the adjacent townhomes were not included in the original bid and will need to be reset to complete the project improvements. Second, the existing rounded asphalt surface of the crosswalk will not allow for proper ADA transition between the roadway and the curb extension.

Staff is requesting a budget amendment of \$11,000 for completing the brick paver reset and removal of the rounded asphalt surface.

#### **RESOLUTION NO. 21-062**

# A RESOLUTION AMENDING THE GAMING FUND BUDGET FOR FISCAL YEAR 2020-2021 IN THE AMOUNT OF \$11,000 FOR ADDITIONAL WORK REQUIRED TO COMPLETE THE HOWELL STREET BUMP OUT PROJECT

- **WHEREAS**, the City of North Kansas City, Missouri adopted the fiscal year 2020-2021 Budget on September 15, 2020, Resolution No. 20-062, using estimates of income and expenditures established at that time; and
- **WHEREAS,** On May 18th, 2021 McConnell & Associates was awarded a construction contract to construct the Howell Street curb extensions (bump-outs).
- **WHEREAS,** On July 19th, 2021 construction started on the Howell Street curb extensions (bumpouts).
- **WHEREAS,** to complete the project a budget amendment is needed to finish surrounding restoration and adjust grades to the new infrastructure.

**NOW, THEREFORE, BE IT RESOLVED** that the following amendment shall be made to the fiscal year 2020-2021 Budget as follows:

#### **GAMING FUND**

		<u>Increase</u>	<u>Decrease</u>
Revenues			
Balance Appropriation	25-3900	\$11,000	
<b>Expenditures</b>			
Howell Street Bump Outs	25-535-8770	\$11,000	
<b>DONE</b> this 17th of August, 2021			
		Bryant DeLong, Mayor	•
Attest: Crystal Doss, City Clerk			
Crystal Doss, City Clerk			

# AN ORDINANCE AUTHORIZING PAYMENT FOR CERTAIN ACCOUNTS DUE AND PAYABLE BY THE CITY THROUGH AUGST 13, 2021

# BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF NORTH KANSAS CITY, MISSOURI, AS FOLLOWS:

**SECTION 1.** The City Council hereby authorizes payment from the funds of the City of North Kansas City, Missouri, the following sums:

Α.	General Fund	133,468.89
В.	Payroll Transfers	446,743.62
C.	Transportation Sales Tax	98,039.67
D.	Convention & Tourism	7,398.33
E.	Gaming Fund	37,426.44
F.	Community Center	_
G.	Water Fund	1,127,557.46
Н.	Sewerage System Fund	489,345.22
I.	Pension Fund	_
J.	Northgate Capital Project	_
K.	Health Fund	_
L.	Communications Fund	
		\$ 2,339,979.63

**SECTION 2**. The City Clerk is hereby authorized and directed to draw checks on the City Treasury to pay the above payments.

PASSED this 17th day of August, 2021
APPROVED this 17th day of August, 2021

## PAYMENT ORDINANCE DETAIL FOR AUGST 13, 2021

		VISA WIRE	CHECK/DRAFT	TOTAL
GENERAL FUND	\$	-	133,468.89	133,468.89
PARKS & RECREATION		-	155,128.44	155,128.44
LIBRARY		-	10,283.54	10,283.54
TRANSPORTATION		-	98,039.67	98,039.67
CONVENTION & TOURISM		-	7,398.33	7,398.33
GAMING FUND		-	37,426.44	37,426.44
NORTHGATE CAPITAL PROJECT		-	_	_
HEALTH FUND		-	_	_
WATER		-	1,127,557.46	1,127,557.46
SEWER		-	489,345.22	489,345.22
COMMUNITY CENTER		-	0.00	_
COMMUNICATIONS FUND		-	0.00	_
PENSION		-		 
REPORT SUB-TOTAL	\$	-	\$ 2,058,647.99	\$ 2,058,647.99
PAYROLL TRA	NSFI	ERS THROUGI	H AUGST 13, 2021	446,743.62
			<b>Total Payments</b>	\$ 2,505,391.61
		L	ess Parks & Library	(165,411.98)
		ORI	DINANCE TOTAL	\$ 2,339,979.63



By Segment (Select Below)



Payment Dates 8/4/2021 - 8/18/2021

Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
AMERICAN FIRE SPRINKLER C		08/04/2021	REFUND FOR INV.#5239 PAID	10-4550	305.79
FAITH GILLIAM	7/29/21 8/3/2021	08/04/2021	DEPOSIT REFUND FOR DAGG	20-4661	50.00
UNITED STATES TREASURY	8/3/21	08/04/2021	12/31/20 Families First Reimb	10-4419	28,675.16
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA - EE	10-2252	8,836.52
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA - EE	10-2259	1,528.21
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA - EE	20-2252	42.09
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA	20-2259	173.08
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA - EE	22-2252	460.41
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA - EE	60-2252	525.45
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	ICMA	60-2259	53.21
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	61-2252	153.79
MUNICIPAL CODE CORP	00362081	08/12/2021	ONLINE MUNICIPAL CODE HO	10-1350	950.00
NORTHLAND REGIONAL CHA	54121	08/12/2021	ANNUAL DUES 9/1/21 8/31	10-1350	1,705.00
ROCKY JOHNSTON	6/16/21	08/12/2021	BOND RETURN TO AP 190082		835.00
MO DEPT SALES TAX	8/11/21	08/12/2021	July 2021 Sales Tax	60-2050	5,698.89
1110 021 1 3/1223 1/10	0/11/21	00, 12, 2021	July 2021 Jules Tuk		49,992.60
					43,332.00
Department: 505 - ADMINIST					
CLAY COUNTY ECONOMIC DE	8/3/21	08/04/2021	EDC State of the cities lunche	10-505-5426	135.00
CLAY COUNTY ECONOMIC DE	8/3/21	08/04/2021	EDC State of the cities lunche	10-505-5427	180.00
WEST PUBLISHING CORP	844764507	08/05/2021	MONTHLY CHARGE FOR WEST	10-505-6030	1,000.00
WEST PUBLISHING CORP	844849219	08/05/2021	LIBRARY PLAN CHARGES	10-505-6030	154.68
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	10-505-5210	838.70
NECCO COFFEE INC	134284	08/12/2021	COFFEE	10-505-7001	169.40
BENJAMIN MCBEE	CNKC-001	08/12/2021	MAYORAL HEADSHOTS	10-505-5427	200.00
			Department	: 505 - ADMINISTRATION Total:	2,677.78
Department: 506 - MUNICIPA	L COURT				
Department: 506 - MUNICIPA ICMA - RC RETIREMENT COM	L COURT ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	10-506-5210	68.55
•		08/05/2021		10-506-5210	68.55 <b>68.55</b>
•		08/05/2021		_	
ICMA - RC RETIREMENT COM		08/05/2021 08/02/2021		_	
ICMA - RC RETIREMENT COM  Department: 510 - FIRE	ICMAMSQ 8-6-21		Department	506 - MUNICIPAL COURT Total:	68.55
Department: 510 - FIRE COMMENCO INC	ICMAMSQ 8-6-21 834539	08/02/2021	<b>Department</b> Head units on the ambulance	506 - MUNICIPAL COURT Total:	<b>68.55</b> 165.00
Department: 510 - FIRE COMMENCO INC Office Essentials Inc	ICMAMSQ 8-6-21 834539 CIV1576548	08/02/2021 08/02/2021	Department  Head units on the ambulance Bottle Water, detergent, Com	10-510-7010 10-510-7014	68.55 165.00 165.42
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD	ICMAMSQ 8-6-21 834539 CIV1576548 TC21-127	08/02/2021 08/02/2021 08/02/2021	Department  Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo	10-510-7010 10-510-7014 10-510-5426	68.55 165.00 165.42 3,400.00
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF	834539 CIV1576548 TC21-127 8/2/21	08/02/2021 08/02/2021 08/02/2021 08/04/2021	Department  Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21	10-510-7010 10-510-7014 10-510-5426 10-510-5310	165.00 165.42 3,400.00 471.77
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021	Department  Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210	165.00 165.42 3,400.00 471.77 1,558.25
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001	165.00 165.42 3,400.00 471.77 1,558.25 61.18
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Department  Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 Oxytotes	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001	68.55 165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21
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Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Department  Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 Oxytotes	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011	68.55 165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes	10-510-7010 10-510-7014 10-510-5426 10-510-5210 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CYR Stat PADz electrode	10-510-7010 10-510-7014 10-510-5426 10-510-5210 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7014	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7014 10-510-7014	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7014 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CYR Stat PADz electrode Coolant leak on Ladder Vehicl Goolant leak on Ladder Vehicl	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563 553579	08/02/2021 08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CYR Stat PADz electrode Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator	10-510-7010 10-510-7014 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7120 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563	08/02/2021 08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CYR Stat PADz electrode Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator 905 Air leaks left front	10-510-7010 10-510-7014 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95 367.69
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563 553579 553584 553596	08/02/2021 08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator 905 Air leaks left front 905 Tank to pump valve is lea	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95 367.69 558.10
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563 553579 553584	08/02/2021 08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator 905 Air leaks left front 905 Tank to pump valve is lea 905 Rear Inlet is leaking water	10-510-7010 10-510-7014 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95 367.69 558.10 2,359.51
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563 553579 553584 553596	08/02/2021 08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator 905 Air leaks left front 905 Tank to pump valve is lea	10-510-7010 10-510-7014 10-510-5426 10-510-5310 10-510-5210 10-510-7001 10-510-7001 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95 367.69 558.10 2,359.51 135.96
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563 553579 553584 553596 553597 553640 553660	08/02/2021 08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator 905 Air leaks left front 905 Tank to pump valve is lea 905 Rear Inlet is leaking water 905 Replaced Brake Pads & A	10-510-7010 10-510-7014 10-510-5426 10-510-5210 10-510-5210 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95 367.69 558.10 2,359.51 135.96 648.62
Department: 510 - FIRE COMMENCO INC Office Essentials Inc CENTRAL JACKSON CO FPD BLUE CROSS BLUE SHIELD OF ICMA - RC RETIREMENT COM OFFICE DEPOT INC OFFICE DEPOT INC MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI MEDICAL EQUIPMENT SOLUTI ZOLL MEDICAL CORP ED M FELD EQUIPMENT CO IN ED M FELD EQUIPMENT CO IN CONRAD FIRE EQUIPMENT IN	834539 CIV1576548 TC21-127 8/2/21 ICMAMSQ 8-6-21 179856880001 186080225001 214966 221078 223303 3329031 390635-IN 390636-IN 390945-IN 553185 553563 553579 553584 553596 553597 553640 553660 553665	08/02/2021 08/02/2021 08/02/2021 08/04/2021 08/05/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021 08/09/2021	Head units on the ambulance Bottle Water, detergent, Com Paramedic Tuition for 4 emplo PCA Invoice for 8/2/21 DEFERRED COMP Labeler tape, copier paper, no Hard back journals - GEL Pens Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes Oxygen Lot M-12 oxytotoes CPR Stat PADz electrode Coolant leak on Ladder Vehicl Coolant leak on Ladder Vehicl 906 Liquid Springs not workin Extracation tool 905 Annual service 905 Drain & refill radiator 905 Air leaks left front 905 Tank to pump valve is lea 905 Rear Inlet is leaking water	10-510-7010 10-510-7014 10-510-5426 10-510-5210 10-510-5210 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7011 10-510-7014 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140 10-510-7140	165.00 165.42 3,400.00 471.77 1,558.25 61.18 103.21 30.00 40.50 33.00 322.85 158.00 196.41 2,971.33 74.36 3,599.46 422.95 367.69 558.10 2,359.51 135.96

8/12/2021 2:04:02 PM Page 1 of 8

Expense Approval Report Payment Dates: 8/4/2021 - 8/18/2021

				Payment Dates. 6/4/2021	,,
Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
CONRAD FIRE EQUIPMENT IN	553775	08/09/2021	904 Cross lay gauge is cracked	10-510-7140	179.77
DAY-STAR CORPORATION	580867	08/09/2021	Quick stick drink flavoring	10-510-7014	114.00
Office Essentials Inc	CIV158321	08/09/2021	Kitche paper towels, Disf wipe	10-510-7014	75.38
MERITAS HEALTH CORP	INV0001503	08/09/2021	FD ANNUAL PHYSICALS	10-510-5440	329.00
CENTRAL JACKSON CO FPD	TC21-141	08/09/2021	Paramedic Tuition for 4 emplo	10-510-5426	60.00
MEDICAL EQUIPMENT SOLUTI	224986	08/10/2021	M12 Tanks for the month of J	10-510-7011	30.00
Office Essentials Inc	CIV1586572	08/10/2021	Bottled water 4 cases	10-510-7014	39.84
Office Essentials Inc	CIV1587991	08/10/2021	Auto hand towels, Bleach, Fac	10-510-7014	159.90
MUNICIPAL EMERGENCY SER	IN1606652	08/10/2021	Custom Bunker Gear Coats	10-510-7010	2,511.62
MUNICIPAL EMERGENCY SER	IN1606652-A	08/10/2021	Bunker Gear pant and coat	10-510-7050	2,315.40
DR STEVEN L RUSSELL	Sept 2021	08/10/2021	Professional Medical Advisory	10-510-5480	1,000.00
				Department 510 - FIRE Total:	27,549.08
Department: 515 - POLICE					
OUTDOOR RESTROOMS LLC	466323	07/29/2021	RANGE RESTROOM SERVICE A	10-515-7022	55.00
G W VAN KEPPEL CO	PSO249516	07/29/2021	LINATEX TARGET BACKING	10-515-7022	6,610.00
Crewsense LLC	0018821	08/02/2021	CREWSENSE 2021	10-515-6060	3,034.20
NECCO COFFEE INC	133869	08/02/2021	COFFEE	10-515-6395	158.22
SOLI'S PRINTING INC	172676	08/02/2021	MUG JACKETS	10-515-7020	226.00
KUNKEL ENTERPRISES INC	2731-158154	08/02/2021	CAR WASH SOAP	10-515-7140	223.20
EQUIFAX INFORMATION SERVI	6449729	08/02/2021	EQUIFAX JULY 2021	10-515-7018	75.00
MICHAEL G MANN	INV0001500	08/02/2021	LYLES POLYGRAPH	10-515-6324	250.00
G W VAN KEPPEL CO	PSO249516-1	08/02/2021	LINATEX SHIPPING COST	10-515-7022	178.36
BLUE CROSS BLUE SHIELD OF	8/2/21	08/04/2021	PCA Invoice for 8/2/21	10-515-5310	409.92
MO POLICE CHIEFS ASSN	172940	08/05/2021	COMMAND COLLEGE TUITION	10-515-5426	4,750.00
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	10-515-5210	2,177.70
MERITAS HEALTH CORP	INV0001504	08/09/2021	MERITAS HEALTH CORP	10-515-5440	119.00
MORTHO USA INC	139902	08/10/2021	LIVESCAN MAINT.	10-515-6110	139.00
MIDWEST RADAR & EQUIP IN	170132	08/10/2021	RADAR RE-CERTIFICATION	10-515-7120	450.00
Central Lakes Armor Express, I		08/10/2021	DYN CMB W / TUBES RG 107-	10-515-7050	199.29
JASON B HODGDON	6843	08/12/2021	JAIL BIO DECON 8.3.21	10-515-7020	95.00
JASON B HODGDON	6849	08/12/2021	TANK BIO DECON 8.9.21	10-515-7020	95.00
					10 344 00
				Department 515 - POLICE Total:	19,244.89
Department: 521 - BUILDINGS					•
CARRIER CORPORATION	90135529	08/02/2021	HVAC Repair - CH	10-521-7110	440.00
CARRIER CORPORATION CARRIER CORPORATION	90135529 90135534	08/02/2021	HVAC Repair - CH HVAC Repair - CH	10-521-7110 10-521-7110	440.00 481.58
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC	90135529 90135534 TMK19011001	08/02/2021 08/02/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall	10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING	90135529 90135534 TMK19011001 2503637	08/02/2021 08/02/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING	90135529 90135534 TMK19011001 2503637 2503638	08/02/2021 08/02/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING	90135529 90135534 TMK19011001 2503637 2503638 2503639	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503643	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503643 2503644	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING Irrigation Management Consu	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503643 2503644 27638	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Irrigation Management	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503643 2503644 27638 7625056	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7160 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503643 2503644 27638 7625056 7652695	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7160 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503643 2503644 27638 7625056 7652695 8182537594	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7160 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING INTIGATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC SHRED-IT US JV LLC	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503644 27638 7625056 7652695 8182537594 8182537683	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding - Fire St	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-6057	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM	90135529 90135534 TMK19011001 2503637 2503638 2503640 2503643 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding - Fire St DEFERRED COMP	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-710 10-521-6057 10-521-6057 10-521-5210	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM UniFirst Corporation #229	90135529 90135534 TMK19011001 2503637 2503638 2503649 2503643 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/06/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Irigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-710 10-521-710 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-5210 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM Unifirst Corporation #229 SHRED-IT US JV LLC	90135529 90135534 TMK19011001 2503637 2503638 2503649 2503643 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563 8182538371	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/06/2021 08/09/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-5210 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM UniFirst Corporation #229	90135529 90135534 TMK19011001 2503637 2503638 2503649 2503643 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/06/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH bi-weekly mat service	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92 55.15
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM UniFirst Corporation #229 SHRED-IT US JV LLC UniFirst Corporation #229	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563 8182538371 2907692	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/06/2021 08/09/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH bi-weekly mat service	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-5210 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM UniFirst Corporation #229 SHRED-IT US JV LLC UniFirst Corporation #229	90135529 90135534 TMK19011001 2503637 2503638 2503640 2503643 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563 8182538371 2907692	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/06/2021 08/09/2021 08/09/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH bi-weekly mat service Department 521 -	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-710 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-5210 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 BUILDINGS & GROUNDS Total:	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92 55.15 3,616.16
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM Unifirst Corporation #229 SHRED-IT US JV LLC Unifirst Corporation #229  Department: 524 - CONVENTING GARY N OLSEN	90135529 90135534 TMK19011001 2503637 2503638 2503649 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563 8182538371 2907692 ON & TOURISM 21-69078	08/02/2021 08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/06/2021 08/06/2021 08/09/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH bi-weekly mat service Department 521 -	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-710 10-521-710 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-5210 10-521-7110 10-521-6057 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92 55.15 3,616.16
CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM UniFirst Corporation #229 SHRED-IT US JV LLC UniFirst Corporation #229  Department: 524 - CONVENTIC GARY N OLSEN JOHN CURREY	90135529 90135534 TMK19011001 2503637 2503638 2503639 2503640 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563 8182538371 2907692  ON & TOURISM 21-69078 21-69079	08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/05/2021 08/06/2021 08/06/2021 08/09/2021 08/04/2021 08/04/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Pest Control Pest Control Pest Control Pest Control Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH bi-weekly mat service Department 521 -  FRIDAY IN THE PARK PERFOR FRIDAY IN THE PARK 9/17/21	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-710 10-521-7110 10-521-7110 10-521-6057 10-521-6057 10-521-5210 10-521-7110 10-521-7110 10-521-6057 10-521-7110 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-7110 10-521-6057 10-521-7110	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92 55.15 3,616.16
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CARRIER CORPORATION CARRIER CORPORATION OTIS ELEVATOR CO INC NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING NATIONAL EXTERMINATING Irrigation Management Consu QUALITY PLUMBING INC QUALITY PLUMBING INC SHRED-IT US JV LLC ICMA - RC RETIREMENT COM UniFirst Corporation #229 SHRED-IT US JV LLC UniFirst Corporation #229 COMPANY OF THE PROPERTY OF THE	90135529 90135534 TMK19011001 2503637 2503638 2503640 2503643 2503644 27638 7625056 7652695 8182537594 8182537683 ICMAMSQ 8-6-21 2899563 8182538371 2907692  ON & TOURISM 21-69078 21-69080	08/02/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/03/2021 08/05/2021 08/05/2021 08/06/2021 08/06/2021 08/06/2021 08/04/2021 08/04/2021 08/04/2021	HVAC Repair - CH HVAC Repair - CH Elevator Repair - City Hall Pest Control Irrigation Management Plumbing repairs - Fire Station Plumbing repairs - Fire Station Document Shredding Document Shredding Document Shredding - Fire St DEFERRED COMP bi-weekly mat service monthly shred services for CH bi-weekly mat service Department 521 -  FRIDAY IN THE PARK PERFOR FRIDAY IN THE PARK 9/17/21 FRIDAY IN THE PARK 9/24/21	10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-7110 10-521-710 10-521-710 10-521-710 10-521-6057 10-521-6057 10-521-5210 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 10-521-6057 10-521-7110 24-524-6090 24-524-6090 24-524-6090	440.00 481.58 620.00 72.00 38.50 38.50 57.75 45.00 45.00 540.00 399.76 465.00 15.48 23.50 165.87 55.15 57.92 55.15 3,616.16

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Expense Approval Report				Payment Dates: 8/4/202	1 - 8/18/2021
Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
KENNETH A REMMERT	Sept 2021	08/10/2021	Friday in the Park Music Progr	24-524-6090	683.34
AMER SOC COMPOSERS AUT	2021ANNUALDUES 50057952	08/12/2021	ASCAP ANNUAL LICENCE FEE (	24-524-6090	367.00
NORTH KANSAS CITY BUS CO	62352746	08/12/2021	Annual Hosting Cost of www.	24-524-6090	479.99
Scott Stanley Alewel	8/9/2021	08/12/2021	Ridin' the Storm Out Friday Ni	24-524-6090	1,500.00
			Department 524 - C	ONVENTION & TOURISM Total:	7,398.33
Department: 525 - PUBLIC WO	ORKS ADMIN				
JULIE ALT	08/03/2021	08/04/2021	REIMBURSE FOR PW RETIREM	10-525-5426	124.32
			Department 525	- PUBLIC WORKS ADMIN Total:	124.32
Department: 526 - COMMUNI	TV DEVELOPMENT		·		
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	10-526-5210	283.41
NECCO COFFEE INC	133459	08/10/2021	Coffee Invoice 07/23/21	10-526-7001	52.40
NECCO COFFEE INC	134283	08/10/2021	Necco Invoice 08/06/21	10-526-7001	67.31
IDENTITY MARKETING GROUP		08/10/2021	Pens	10-526-6347	333.02
IDENTITY MARKETING GROUP		08/10/2021	Stickers	10-526-6347	296.50
IDENTITY MARKETING GROUP		08/10/2021	Magnets	10-526-6347	178.37
IDENTITY MARKETING GROUP		08/10/2021	Key Rings	10-526-6347	392.25
IDENTITI WARRETING GROOT	723341	00/10/2021	• =	IMUNITY DEVELOPMENT Total:	1,603.26
			Department 320 Con-	WORLD BEVELOT WENT TOTAL	1,003.20
Department: 533 - INTERDEPA		07/00/0004	0014011750 050110171/ 11/1405	10 500 6115	2 554 22
KNOWBE4 INC	142491	07/29/2021		10-533-6115	3,661.33
SPIRE MISSOURI INC	7/27/21	08/04/2021	Various Accounts Paid	10-533-6720	161.73
Evergy	080221	08/05/2021	SERVICE 6/30 TO 7/31	10-533-6710	440.74
JIM'S DISPOSAL SERVICE LLC	55260	08/06/2021	solid waste services for city a	10-533-6750	20,503.56
MERITAS HEALTH CORP	INV0001505	08/09/2021	Randoms Invoice #15425	10-533-5440	323.00
North Kansas City Hospital	Sept 2021	08/10/2021	Wellness Services Agreement	10-533-6328	1,368.00
R&D COMPUTER SYSTEMS LL	3573	08/11/2021	LASERFICHE SOFTWARE ANN	10-533-6115	9,203.00
Evergy	8/5/21	08/12/2021	8556822139	10-533-6710	87.81
			Department 533	3 - INTERDEPARTMENTAL Total:	35,749.17
Department: 535 - GAMING					
John J Hartman JR	49391	08/03/2021	MAGPUL FRONT SIGHT	25-535-8750	30.00
John J Hartman JR	49391	08/03/2021	STAG ARMS AR-15	25-535-8750	989.00
John J Hartman JR	49391	08/03/2021	MAGPUL REAR SIGHT	25-535-8750	43.00
C M J Lawn	26763	08/06/2021	Landscape Maint - Contract 4-	25-535-6090	2,250.00
OLSSON ASSOCIATES	387146	08/10/2021	ENCUMBER - BURLINGTON E	25-535-8770	2,103.48
OLSSON ASSOCIATES	392825	08/10/2021	ENCUMBER - BURLINGTON E	25-535-8770	23,398.97
Storsafe IV LLC	Sept 2021	08/10/2021	18th & Clay Parking Lot Rent	25-535-8770	400.00
127 SWIFT LLC	Sept 2021	08/10/2021	Parking lot between Clay & S	25-535-8770	2,016.33
RAMEZ ENTERPRISES INC	10234784A	08/12/2021	COMMERCIAL EXTERIOR PAIN	25-535-8730	6,195.66
			De	partment 535 - GAMING Total:	37,426.44
Department: 540 - PARKS & R					
MID-AMERICA GOLF & LANDS		08/02/2021	Macken Baseball Field Renova	20-540-8770	147,202.50
SPIRE MISSOURI INC	7/27/21	08/04/2021	Various Accounts Paid	20-540-6720	69.57
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	20-540-5210	126.02
MEGA INDUSTRIES CORP	729MACK-20210731	08/06/2021	MACKEN PARK BASEBALL FIEL	20-540-8720	1,710.00
ICE MASTERS INC	00448949	08/09/2021	Monthly Ice Machine Rental F	20-540-7110	130.00
OFFICE DEPOT INC	183409755001	08/09/2021	Copy Paper, Hanging files, was		92.16
MCCONNELL & ASSOCIATES C	2107-042777	08/09/2021	Seymour Traffic Paint, white	20-540-7190	29.94
NATIONAL EXTERMINATING	2527089	08/09/2021	Monthly Pest Control - Macke	20-540-7190	47.00
NATIONAL EXTERMINATING	2527930	08/09/2021	Monthly Pest Control - Buildin	20-540-7110	72.00
COMMERCIAL AQUATIC SVCS	40240-1	08/09/2021	Supplies for Dagg Park Sprayg	20-540-7190	79.53
COMMERCIAL AQUATIC SVCS	40272-1	08/09/2021	Part for Sprayground Park at	20-540-7190	227.63
IDENTITY MARKETING GROUP		08/09/2021	Staff Shirts	20-540-7090	190.75
SHRED-IT US JV LLC	8182558295	08/09/2021	Monthly Shredding Fee	20-540-7110	8.31
Itua Ehovuon	08/06/2021	08/12/2021	July Tennis Lessons 4 Hrs x 4	20-540-7090	320.00
Evergy	8/5/21	08/12/2021	7498079610	20-540-6710	1,003.86
LIBERTY SPORTS OFFICIALS	8/6/21	08/12/2021	2 Games Umpiring Adult Soft	20-540-7090	54.00
The Clark Enersen Partners	9	08/12/2021	MACKEN PARK BALL DIAMON	20-540-8770	3,500.00

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Department 540 - PARKS & RECREATION Total:

154,863.27

Expense Approval Report Payment Dates: 8/4/2021 - 8/18/2021

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Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
Department: 550 - LIBRARY					
OTIS ELEVATOR CO INC	100400439234	08/02/2021	Library annual preventative m	21-550-6110	2,040.00
VERIZON WIRELESS SVCS LLC	9884696979	08/04/2021	SERVICE THRU 8/14/21	21-550-6730	107.44
NORTH KC SECURITY PATROL	101627	08/09/2021	MAINT AGREEMENT	21-550-6110	30.00
PROFESSIONAL PEST SOLUTIO	10230	08/09/2021	BILDING MAINT	21-550-7110	100.00
Blackstone Audio Inc.	1234056	08/09/2021	AUDIOVISUAL	21-550-7340	69.89
Blackstone Audio Inc.	1234343	08/09/2021	AUDIOVISUAL	21-550-7340	30.94
Blackstone Audio Inc.	1235667	08/09/2021	AUDIOVISUAL	21-550-7340	82.68
COPY CARD CONTROL SYSTE	126977	08/09/2021	MAINT AGREEMENT	21-550-6110	45.15
STINE-NICHOLS PLUMBING IN	16387	08/09/2021	BUILDING MAINT	21-550-7110	130.00
CENTER POINT INC	1867466	08/09/2021	BOOKS	21-550-7370	406.86
SUMNERONE INC	2939599	08/09/2021	MAINT AGREEMENT	21-550-6110	15.16
SCHOLASTIC INC	30997184	08/09/2021	BOOKS	21-550-7370	18.00
MIDWEST TAPE LLC	500755758	08/09/2021	AUDIOVISUAL	21-550-7340	19.49
MIDWEST TAPE LLC	500784873	08/09/2021	AUDIOVISUAL	21-550-7340	39.73
MIDWEST TAPE LLC	500784874	08/09/2021	AUDIOVISUAL	21-550-7340	23.24
MIDWEST TAPE LLC	500784875	08/09/2021	AUDIOVISUAL	21-550-7340	12.74
MIDWEST TAPE LLC	500784877	08/09/2021	AUDIOVISUAL	21-550-7340	17.24
WELLS FARGO FINANCIAL LEA	5016053493	08/09/2021	MAINT AGREEMENT	21-550-6110	92.00
AMIGOS LIBRARY SERVICES	507205	08/09/2021	SERVICES	21-550-6355	1,600.00
AMIGOS LIBRARY SERVICES	507771	08/09/2021	SERVICES	21-550-6355	2,050.00
INGRAM LIBRARY SERVICES	53874893	08/09/2021	BOOKS	21-550-7370	672.06
INGRAM LIBRARY SERVICES	53905234	08/09/2021	BOOKS	21-550-7370	331.40
INGRAM LIBRARY SERVICES	53934735	08/09/2021	BOOKS	21-550-7370	158.95
INGRAM LIBRARY SERVICES	54042050	08/09/2021	BOOKS	21-550-7370	819.53
SECURITY EQUIP INC	654713	08/09/2021	SERVICES	21-550-6355	169.00
DE LAGE LANDEN FINANCIAL	73338983	08/09/2021	SERVICES	21-550-6355	97.00
CENGAGE LEARNING INC	74724675	08/09/2021	BOOKS	21-550-7370	90.96
CENGAGE LEARNING INC	74725153	08/09/2021	BOOKS	21-550-7370	45.73
CENGAGE LEARNING INC	74725491	08/09/2021	BOOKS	21-550-7370	39.73
CENGAGE LEARNING INC	74729561	08/09/2021	BOOKS	21-550-7370	40.29
SHRED-IT US JV LLC	8182600904	08/09/2021	SERVICES	21-550-6355	68.13
SHI INTERNATIONAL CORP	B53833846	08/09/2021	COMPUTER SUPPLIES	21-550-7002	250.20
Christine M Duer	CD072121	08/09/2021	ADULT PROGRAM	21-550-7325	120.00
STACEY KRULEWICH	SK0807	08/09/2021	CHILDRENS PROGRAM	21-550-7320	450.00
				epartment 550 - LIBRARY Total:	10,283.54
Department: 560 - WATER					•
MISSISSIPPI LIME CO	1560403	07/29/2021	Lime	60-560-7005	5,412.56
MISSISSIPPI LIME CO	1560447	07/29/2021	Lime	60-560-7005	5,427.59
MISSISSIPPI LIME CO	1560452	07/29/2021	Lime	60-560-7005	5,419.01
KANSAS CITY WINWATER WO	282696	08/02/2021	water valve replacement part	60-560-8770	8,447.74
KANSAS CITY CALIBRATION LA	00071773	08/03/2021	Calibration of backflow equip	60-560-6090	110.66
SPIRE MISSOURI INC	7/27/21	08/04/2021	Various Accounts Paid	60-560-6720	119.74
MEGA INDUSTRIES CORP	Application 9	08/05/2021	Water Treatment Plant Impro	60-560-8730	1,056,482.65
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	60-560-5210	442.49
MISSOURI ONE CALL SYSTEM I		08/11/2021	Locates	60-560-6090	137.50
KISSICK CONSTRUCTION CO I	2100210-01	08/11/2021	Water Main Repair	60-560-8770	28,685.04
RL YATES ELECTRIC CO INC	2972	08/11/2021	·	60-560-8730	2,234.32
			Repairs Catoway Install		
RL YATES ELECTRIC CO INC	3295	08/11/2021	Gateway Install	60-560-8750	2,094.16
RL YATES ELECTRIC CO INC	3385	08/11/2021	Ballast repair	60-560-7190	295.75
HAWKINS INC	4998363	08/11/2021	Chlorine	60-560-7005	1,336.56
PRAXAIR DISTRIBUTORS INC	65220367	08/11/2021	CO2	60-560-7005	4,264.45
SCHULTE SUPPLY INC	S1174985	08/11/2021	Blue Marking Paint	60-560-7150	329.69
TYLER TECHNOLOGIES INC	025-342444	08/12/2021	CIS/CRM Utility Billing Online	60-560-6345	40.00
			L	Department 560 - WATER Total:	1,121,279.91
Department: 570 - WATER POI					
KCMO WATER SERVICES DEPT		08/02/2021	monthly water and sewer cha	61-570-6745	481,666.98
RL YATES ELECTRIC CO INC	3240	08/02/2021	Conduit Reroute at Bedford	61-570-8770	1,205.66
ACE PIPE CLEANING INC	143598	08/03/2021	Storm drain CCTV	61-570-8770	800.00
SPIRE MISSOURI INC	7/27/21	08/04/2021	Various Accounts Paid	61-570-6720	49.38

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Expense Approval Report Paym	yment Dates: 8/4/2021 - 8/18	8/2021
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Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	61-570-5210	131.19
KEYSTONE LABORATORIES INC	1E06183	08/06/2021	Chemicals	61-570-6430	105.00
RL YATES ELECTRIC CO INC	3295	08/11/2021	Gateway Install	61-570-8750	2,094.16
RL YATES ELECTRIC CO INC	3353	08/11/2021	Emergency Pump Station /rep	61-570-8770	422.50
RL YATES ELECTRIC CO INC	3363	08/11/2021	Emergency Pump Station /rep	61-570-8770	455.17
KEYSTONE LABORATORIES INC	IE04381-CM	08/11/2021	Credit for duplicate payment (	61-570-6430	-105.00
TYLER TECHNOLOGIES INC	025-342444	08/12/2021	CIS/CRM Utility Billing Online	61-570-6345	40.00
KEYSTONE LABORATORIES INC	1E04381	08/12/2021	Lab Analysis	61-570-6430	323.75
TREKK DESIGN GROUP, LLC	21-000672	08/12/2021	CCTV	61-570-8770	2,002.64
			Department 570 - WAT	ER POLLUTION CONTROL Total:	489,191.43
Department: 580 - TRANSPOR	TATION				
Berry Companies Inc	03042163	08/02/2021	Vehicle Maintenance	22-580-7140	1,995.13
CUSTOM TREE CARE INC	20012	08/02/2021	tree trimming, removals, grin	22-580-7181	9,740.00
SPIRE MISSOURI INC	7/27/21	08/04/2021	Various Accounts Paid	22-580-6720	159.77
Evergy	080221	08/05/2021	SERVICE 6/30 TO 7/31	22-580-6711	28,238.29
Evergy	080221	08/05/2021	SERVICE 6/30 TO 7/31	22-580-6712	5,325.25
ICMA - RC RETIREMENT COM	ICMAMSQ 8-6-21	08/05/2021	DEFERRED COMP	22-580-5210	372.31
CUSTOM TREE CARE INC	20033	08/06/2021	tree trimming, removals, grin	22-580-7181	11,007.00
MUSSELMAN & HALL CONTRA	35080	08/09/2021	Northgate Village Alleys	22-580-8770	1,724.80
101 LAND HOLDINGS LLC	Sept 2021	08/10/2021	Salt Barn Rent	22-580-6130	437.18
J&D EQUIPMENT, INC.	67339	08/11/2021	Snow Plow Blade - 2021 Trans	22-580-7210	5,417.00
Evergy	8/5/21	08/12/2021	3223628277	22-580-6710	37.02
Evergy	8/5/21	08/12/2021	5720817938	22-580-6710	37.51
KC ATA	IN-165	08/12/2021	CONTRACT JULY 1, 2021 TO D	22-580-6300	33,088.00
			Department	580 - TRANSPORTATION Total:	97,579.26

Grand Total: 2,058,647.99

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## **Report Summary**

#### **Fund Summary**

Fund		Payment Amount
10 - GENERAL FUND		133,468.89
20 - PARKS & RECREATION		155,128.44
21 - LIBRARY		10,283.54
22 - TRANSPORTATION		98,039.67
24 - CONVENTION & TOURISM		7,398.33
25 - GAMING		37,426.44
60 - WATER FUND		1,127,557.46
61 - WATER POLLUTION CONTROL		489,345.22
	Grand Total:	2,058,647.99

#### **Account Summary**

Account Summary					
Account Number	Account Name	Payment Amount			
10-1350	PREPAID OTHER	2,655.00			
10-2252	ICMA EE CONTRIBUTION	8,836.52			
10-2259	ICMA EE ROTH CONTRIB	1,528.21			
10-2430	CLEARING	835.00			
10-4419	Families First Reimburse	28,675.16			
10-4550	PERMITS - BUILDING	305.79			
10-505-5210	CITY PAID DEFERRED CO	838.70			
10-505-5426	TRAINING/TRAVEL APPO	135.00			
10-505-5427	TRAINING & TRAVEL - EL	380.00			
10-505-6030	OTHER LEGAL COSTS	1,154.68			
10-505-7001	OFFICE SUPPLIES	169.40			
10-506-5210	CITY PAID DEFERRED CO	68.55			
10-510-5210	CITY PAID DEFERRED CO	1,558.25			
10-510-5310	HEALTH, DENTAL & LIFE I	471.77			
10-510-5426	TRAINING/TRAVEL APPO	3,460.00			
10-510-5440	PHYSICALS & DRUG TEST	329.00			
10-510-5480	PHYSICIAN FEES	1,000.00			
10-510-7001	OFFICE SUPPLIES	164.39			
10-510-7010	FIREFIGHTING SUPPLIES	2,676.62			
10-510-7011	FIRST AID SUPPLIES	133.50			
10-510-7014	QUARTERS MAINTENAN	877.39			
10-510-7050	UNIFORMS	2,315.40			
10-510-7120	EQUIPMENT MAINTENA	74.36			
10-510-7140	VEHICLE MAINTENANCE	14,488.40			
10-515-5210	CITY PAID DEFERRED CO	2,177.70			
10-515-5310	HEALTH, DENTAL & LIFE I	409.92			
10-515-5426	TRAINING/TRAVEL APPO	4,750.00			
10-515-5440	PHYSICALS & DRUG TEST	119.00			
10-515-6060	COMPUTER OPERATION	3,034.20			
10-515-6110	MAINTENANCE AGREEM	139.00			
10-515-6324	HIRING EXPENSE	250.00			
10-515-6395	OTHER SERVICES	158.22			
10-515-7018	INVESTIGATIVE OPERATI	75.00			
10-515-7020	DETENTION SUPPLIES	416.00			
10-515-7022	RANGE SUPPLIES	6,843.36			
10-515-7050	UNIFORMS	199.29			
10-515-7120	EQUIPMENT MAINTENA	450.00			
10-515-7140	VEHICLE MAINTENANCE	223.20			
10-521-5210	CITY PAID DEFERRED CO	165.87			
10-521-6057	RECYCLING SERVICES	96.90			
10-521-7110	BUILDING MAINTENANC	2,813.39			
10-521-7160	PUBLIC SPACES MAINTE	540.00			
10-525-5426	TRAINING/TRAVEL APPO	124.32			
10-526-5210	CITY PAID DEFERRED CO	283.41			
10-526-6347	ADVERTISING	1,200.14			

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### **Account Summary**

A	ccount Summary	
Account Number	Account Name	Payment Amount
10-526-7001	OFFICE SUPPLIES	119.71
10-533-5440	PHYSICALS & DRUG TEST	323.00
10-533-6115	SOFTWARE MAINT & SE	12,864.33
10-533-6328	EMPLOYEE WELLNESS P	1,368.00
10-533-6710	ELECTRICITY	528.55
10-533-6720	GAS	161.73
10-533-6750	TRASH COLLECTION	20,503.56
20-2252	ICMA EE CONTRIBUTION	42.09
20-2259	ICMA EE ROTH CONTRIB	173.08
20-4661	FACILITY USE FEES	50.00
20-540-5210	CITY PAID DEFERRED CO	126.02
20-540-6710	ELECTRICITY	1,003.86
20-540-6720	GAS	69.57
20-540-7090	OTHER SUPPLIES	656.91
20-540-7110	BUILDING MAINTENANC	210.31
20-540-7190	OTHER MAINTENANCE	384.10
20-540-8720	BUILDINGS	1,710.00
20-540-8770	INFRASTRUCTURE	150,702.50
21-550-6110	MAINTENANCE AGREEM	2,222.31
21-550-6355	OTHER SERVICES	3,984.13
21-550-6730	TELEPHONE	107.44
21-550-7002	COMPUTER SUPPLIES	250.20
21-550-7110	BUILDING MAINTENANC	230.00
21-550-7320	CHILDREN'S PROGRAMS	450.00
21-550-7325	ADULT PROGRAMMING	120.00
21-550-7340	AUDIOVISUAL	295.95
21-550-7370	BOOKS	2,623.51
22-2252	ICMA EE CONTRIBUTION	460.41
22-580-5210	CITY PAID DEFERRED CO	372.31
22-580-6130	LEASE/RENTAL AGREEM	437.18
22-580-6300	KCATA BUS SERVICES	33,088.00
22-580-6710	ELECTRICITY	74.53
22-580-6711	STREET LIGHTS	28,238.29
22-580-6712	LEASED TRAFFIC SIGNAL	5,325.25
22-580-6720	GAS	159.77
22-580-7140	VEHICLE MAINTENANCE	1,995.13
22-580-7181	TREE MAINTENANCE	20,747.00
22-580-7210	MINOR EQUIPMENT	5,417.00
22-580-8770	INFRASTRUCTURE	1,724.80
24-524-6090	PROFESSIONAL SERVICE	7,398.33
25-535-6090	PROFESSIONAL SERVICE	2,250.00
25-535-8730	BUILDING IMPROVEME	6,195.66
25-535-8750	EQUIPMENT	1,062.00
25-535-8770	INFRASTRUCTURE	27,918.78
60-2050	SALES TAX PAYABLE	5,698.89
60-2252	ICMA EE MATCH	525.45
60-2259	ICMA EE ROTH CONTRIB	53.21
60-560-5210	CITY PAID DEFERRED CO	442.49
60-560-6090	PROFESSIONAL SERVICE	248.16
60-560-6345	BANK FEES	40.00
60-560-6720	GAS	119.74
60-560-7005	CHEMICALS	21,860.17
60-560-7150	DISTRIBUTION MAINTEN	329.69
60-560-7190	MAINTENANCE OTHER	295.75
60-560-8730	BUILDING IMPROVEME	1,058,716.97
60-560-8750	EQUIPMENT	2,094.16
60-560-8770	INFRASTRUCTURE	37,132.78
61-2252	ICMA EE CONTRIBUTION	153.79

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### **Account Summary**

Account Number	Account Name	Payment Amount
61-570-5210	CITY PAID DEFERRED CO	131.19
61-570-6345	BANK FEES	40.00
61-570-6430	LABORATORY FEES	323.75
61-570-6720	GAS	49.38
61-570-6745	SEWAGE CHARGE KCMO	481,666.98
61-570-8750	EQUIPMENT	2,094.16
61-570-8770	INFRASTRUCTURE	4,885.97
	Grand Total:	2,058,647.99

## **Project Account Summary**

Project Account Key		Payment Amount
**None**		764,410.21
1195		1,205.66
1651		2,094.16
1712		2,234.32
2021		2,094.16
230-2		6,195.66
2551		1,056,482.65
261		1,062.00
2612		877.67
290		1,710.00
5891		37,132.78
5941		2,802.64
6001		25,502.45
9301		400.00
9302		2,016.33
9471		150,702.50
9491		1,724.80
	Grand Total:	2,058,647.99

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## **Upcoming City Items of Note**

# Dates Below Are Subject to Change Items in red are Parks & Recreation Events

Items in blue are special City Council Meetings

Items in Green are Special Event Permits Authorized by the Council

August 13, 2021	Friday Night Concert – Macken Park Festival Shelter – 7:00 PM
August 19, 2021	NKC High School Back to School Night – 5-7 p.m. (Pending Approval)
August 20 & 21, 2021	City Council Strategic Planning Session – 8 a.m. to 5 p.m.
August 24, 2021	City Council Special Meeting – 6 p.m.
August 28, 2021	City Council & Parks and Recreation Board Special Meeting – 10 a.m.
August 31, 2021	City Council Budget Work Session – 6 p.m.
August 28, 2021	Movie in the Park – Macken Park Festival Shelter – Dusk
September 6, 2021	City Hall, Library and Parks & Recreation Closed – Labor Day
September 8, 2021	City Council Budget Work Session – 6 p.m.
September 10, 2021	Friday Night Concert – Macken Park Festival Shelter – 7:00 PM
September 14, 2021	City Council Budget Work Session – 6 p.m. (If needed)
September 18, 2021	City-wide Garage Sale
September 18, 2021 September 18, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)
•	, <u>-</u>
September 18, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)
September 18, 2021 September 11, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street
September 18, 2021 September 11, 2021 September 25, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street  Drive-in at the Park – Macken Park – Dusk
September 18, 2021 September 11, 2021 September 25, 2021 October 9, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street  Drive-in at the Park – Macken Park – Dusk  Howl-O-Ween – Waggin' Trail Park – 1:00 PM
September 18, 2021 September 11, 2021 September 25, 2021 October 9, 2021 October 23, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street  Drive-in at the Park – Macken Park – Dusk  Howl-O-Ween – Waggin' Trail Park – 1:00 PM  Spooky Snake Saturday
September 18, 2021 September 11, 2021 September 25, 2021 October 9, 2021 October 23, 2021 November 2, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street  Drive-in at the Park – Macken Park – Dusk  Howl-O-Ween – Waggin' Trail Park – 1:00 PM  Spooky Snake Saturday  Election Day
September 18, 2021 September 11, 2021 September 25, 2021 October 9, 2021 October 23, 2021 November 2, 2021 November 19, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street  Drive-in at the Park – Macken Park – Dusk  Howl-O-Ween – Waggin' Trail Park – 1:00 PM  Spooky Snake Saturday  Election Day  Mistletowne Market – Parks & Recreation Center – 12:00 PM
September 18, 2021 September 11, 2021 September 25, 2021 October 9, 2021 October 23, 2021 November 2, 2021 November 19, 2021 November 19, 2021	Snow and Roast food truck in the library parking lot (Pending Approval)  The Gardens Block Party on Buchanan Street  Drive-in at the Park – Macken Park – Dusk  Howl-O-Ween – Waggin' Trail Park – 1:00 PM  Spooky Snake Saturday  Election Day  Mistletowne Market – Parks & Recreation Center – 12:00 PM  Mayor's Tree Lighting – City Hall – 6:00 PM

November 22, 2021	Feel the Warmth – Parks & Recreation
November 25-26, 2021	City Hall, Library and Parks & Recreation Center Closed – Thanksgiving
December 11, 2021	Holiday Wonderland – Parks & Recreation Center – 11:00 AM
December 11, 2021	Candy Cane 5k/10k Race (Pending Approval)
December 24, 2021	City Hall, Library and Parks & Recreation Center Closed – Christmas
December 31, 2021	City Hall, Library and Parks & Recreation Center Closed – New Year's Day



#### **MEMORANDUM**

TO: NKC City Council DATE: August 4, 2021

**Board of Trustees** 

FROM: Stephen L. Reintjes, Sr., M.D. RE: COVID Update

President & CEO

I wanted to provide you with updated information for NKCH. NKCH has seen a significant increase in the total number of COVID patients over the last couple of weeks.

Total Active COVID cases: 53 Total recovering COVID cases: 16

Total Active COVID patients in the ICU: 17 Total Active COVID patients on a ventilator: 9

NKCH is closely monitoring the increase of COVID cases affecting our community and we continue to ask for all support to encourage those who are unvaccinated to get vaccinated. We will continue to meet the healthcare needs of our community. Thank you.



#### **MEMORANDUM**

TO: NKC City Council DATE: August 11, 2021

**Board of Trustees** 

FROM: Stephen L. Reintjes, Sr., M.D. RE: COVID Update

President & CEO

I wanted to provide you with updated information for NKCH. NKCH has seen a significant increase in the total number of COVID patients over the last couple of weeks.

Total Active COVID cases: 53
Total recovering COVID cases: 15
Total COVID patients in the ICU: 18
Total COVID patients on a ventilator: 9

NKCH is closely monitoring the increase of COVID cases affecting our community and we continue to ask for all support to encourage those who are unvaccinated to get vaccinated. We will continue to meet the healthcare needs of our community. Thank you.

# Minutes of the North Kansas City, Missouri Regular City Council Meeting of August 17, 2021

The City Council met in regular session on Tuesday, August 17, 2021, at the City Council Chambers located at 2010 Howell Street, North Kansas City, MO 64116.

The following were present:

Mayor: Bryant DeLong

Councilmembers: Wesley Graves

Anthony Saper Jesse Smith Lisa Tull

Zachary Clevenger Adam Roberts Amie Clarke Ana Pellumbi

Staff Present: Kim Nakahodo, Interim City Administrator

Kevin Freeman, Police Chief Dave Hargis, Fire Chief

Anthony Sands, Public Works Director

Casey Campbell, Human Resources Manager

Nick Hawkins, Finance Manager Stephen Roberts, IT Manager Tom Barzee, City Counselor Crystal Doss, City Clerk

Megan Summers, Deputy City Clerk

Mayor Delong called the meeting to order at 7:00 p.m.

The roll was called. The following councilmembers were present: Zachary Clevenger, Adam Roberts, Amie Clarke, Ana Pellumbi, Wesley Graves, Anthony Saper, Lisa Tull, and Jesse Smith.

Roll Call

The meeting opened with the Pledge of Allegiance, led by Cub Scout Pack 9.

Opening

C. Smith moved to approve the agenda, seconded by C. Tull. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0.

Approval of Agenda

Jessica Loya of 2112 Fayette St requested financial reasoning from the Council for the proposed purchase of the Cepheid GeneXpert Express Diagnostic Systems and Tests. It was stated that such an explanation would be given when the agenda item is brought forward by City staff.

Comments from the Public

The Consent Agenda contained the following items:

Consent Agenda

Approval of Work Session Minutes of August 3, 2021

Approval of Regular Council Meeting Minutes of August 3, 2021

Snow and Roast Food Truck During Fall Garage Sale

North Kansas City High School Back to School Event

Candy Cane Run 5k/10k Event

C. Smith moved to approve the Consent Agenda as presented, seconded by C. Clevenger. The roll was called, and the vote was as follows: C. Clevenger, yes — C. Roberts, yes — C. Clarke, yes — C. Graves, yes — C. Saper, yes — C. Tull, yes — C. Smith, yes. Motion carried, 8-0.

Proclamation for Cub Scout Pack 9 (80 Years). Mayor Bryant DeLong presented Cub Scout Pack 9 a proclamation for their 80-year anniversary.

Consideration of an Ordinance Adopting and Approving Addendum to Group Contract (Maximum Refund Account), Together with the (A) Benefit and Rate Confirmation for the City's Preferred-Care Blue PPO Plan; (B) Benefit and Rate Confirmation for the City's Personal Blue PPO Plan; (C) Benefit and Rate Confirmation for the City's BlueSaver PPO Plan; (D) Benefit and Rate Confirmation for the City's BlueSelect Plus Personal Blue HRA Plan; and (E) Benefit and Rate Confirmation for the City's BlueSelect Plus PPO, Effecting January 1, 2022, with Blue Cros and Blue Shield of Kansas City Regarding Medical Insurance Benefits for the Employees of the City of North Kansas City, Missouri {Bill No. 7618 (Ordinance No. 9415)}. Interim City Administrator Kim Nakahodo asked Human Resources Manager Casey Campbell to present this item to Council. Ms. Campbell stated that staff has received the City's medical insurance renewal from Blue Cross Blue Shield of Kansas City ("BCBSKC") for 2022 and we are pleased to report that there will be a decrease of 7% to the City's health insurance plan for its employees.

Ordinance No. 9415 – 2022 Renewal of Employee Health Insurance

All benefits were marketed this year by the City's health insurance broker, Lockton, and BCBSKC was the best option for our employees based on network and cost. The decision was to remain with BCBSKC due to disruption and price. The Blue Cross renewal was finalized with a 7% reduction in rates. This will result in an annual savings of approximately \$174,000. All plan designs remained the same for 2022. Staff recommends the renewal of this year's Blue Cross Blue Shield of Kansas City Medical insurance plan for 2022. Discussion ensued. C. Smith moved that Bill No. 7618 be placed on first reading, seconded by C. Clevenger. The roll was called, and the vote was as follows: C. Clevenger, yes - C. Roberts, yes - C. Clarke, yes - C. Pellumbi, yes -C. Graves, yes - C. Saper, yes - C. Tull, yes - C. Smith, yes. Motion carried, 8-0. Bill No. 7618 was read. C. Clarke moved that Bill No. 7618 be placed on second and final reading and passed as Ordinance No. 9415, seconded by C. Smith. The roll was called and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7618 was read. Thereupon Mayor DeLong declared the motion carried and the Bill duly passed. Said Bill was then numbered 9415, was signed and approved by the Mayor and attested by the City Clerk.

Consideration of a Resolution Authorizing and Approving Use of (A) Delta Dental for Employee Dental and Vision Insurance; and (B) Standard Insurance Company for Employee Life Insurance and Long Term Disability Insurance With All Such Coverages Commencing January 1, 2022 (Resolution No. 21-059). Interim City Administrator Nakahodo asked Human Resources Manager Campbell to present this item to Council. Ms. Campbell stated that all employee benefits were marketed this year by the City's insurance broker, Lockton. As a result, Lockton is recommending that the City make dental, vision, life, and disability carrier changes to enhance existing benefits while providing savings in the upcoming plan years. Staff recommends moving forward with carrier changes with Delta Dental for dental and vision coverage and The Standard for Life and Disability coverage. Discussion ensued. C. Smith moved to approve Resolution No. 21-059, seconded by C. Pellumbi. The roll was called and the vote was as follows: C. Smith, yes - C. Clevenger, yes - C. Roberts, yes - C. Clarke, yes - C. Pellumbi, yes - C. Graves, yes - C. Saper, yes - C. Tull, yes. Motion carried 8-0.

Resolution No. 21-059 – Dental, Vision, Life and Disability Carrier Changes

Consideration of an Ordinance Approving Public Health Order 21-002 Regarding Covid-19 in the City of North Kansas City, Missouri, and Authorizing the Extension of the Effective Period of the Current Order 21-001 Dated July 31, 2021, From August 28, 2021, Until September 25, 2021 {Bill No. 7619 (Ordinance No. 9416)}. Interim City Administrator stated that Councilmember Smith requested that an extension of Mayor DeLong's Order No. 21-001 be placed on the City Council Agenda so that the Council may vote to extend the Order for a period of thirty (30) calendar days from 12:01 a.m. on August 28, 2021, until September 26, 2021, at 12:01 a.m. unless rescinded, extended, modified or amended pursuant to applicable law. Ordinance No. 9416 and Order No. 21-002 has been prepared for the City Council's consideration. Discussion ensued. C. Smith moved that Bill No. 7619 be placed on first reading, seconded by C. Tull. The roll was called and the vote was as follows: C. Smith, yes – C. Clevenger, yes – C. Roberts, yes - C. Clarke, yes - C. Pellumbi, yes - C. Graves, no - C. Saper, yes - C. Tull, yes. Motion carried 7-1. Bill No. 7619 was read. C. Clarke moved that Bill No. 7619 be placed on second and final reading and passed as Ordinance No. 9416, seconded by C. Smith. The roll was called and the vote was as follows: C. Smith, yes - C. Clevenger, yes C. Roberts, yes
 C. Clarke, yes
 C. Pellumbi, yes
 C. Graves, no C. Saper, yes - C. Tull, yes. Motion carried 7-1. Bill No. 7619 was read. Thereupon Mayor DeLong declared the motion carried and the Bill duly passed. Said Bill was then numbered 9416, was signed and approved by the Mayor and attested by the City Clerk.

Consideration of a Resolution Amending the Gaming Fund Budget for Fiscal Year 2020-2021 in the Amount of \$15,606 for Virus Diagnostic Equipment (Resolution No. 21-061). Interim City Administrator Nakahodo asked Fire Chief Dave Hargis to present this item to Council. Chief Hargis stated that the past 16 months have required the City to send multiple employees (200+ to date) for COVID-19 testing. The available testing was located at various locations in the metro area; however, none were located in North Kansas City, and results sometimes took up to 72 hours to be processed. We now have the opportunity (previously the machine had been out of stock due to state and federal governments purchasing them) to purchase diagnostic equipment which would allow the City to test its employees in-house and have results in 20-30 minutes. With the belief that COVID-19 will continue to be a part of our lives for some time to come, staff recommends the purchase of a Cepheid GeneXpert Express Diagnostic Systems and Tests from Medline Medical Supply Company. This test system will detect COVID-19, Respiratory Syncytial Virus (RSV), Ordinance No. 9416 – Emergency Order Reauthorization – Covid 19

Resolution No. 21-061 – Budget Amendment – Virus Diagnostic Equipment

Influenza, and Strep. A resolution appropriating \$15,605.27 from the Gaming Fund to the equipment line has been prepared for the consideration of approval by the Council. Discussion ensued. C. Roberts moved to approve Resolution No. 21-061, seconded by C. Smith. The roll was called and the vote was as follows: C. Smith, yes — C. Clevenger, yes — C. Roberts, yes — C. Clarke, yes — C. Pellumbi, yes — C. Graves, yes — C. Saper, yes — C. Tull, yes. Motion carried 8-0.

Consideration of a Resolution Approving a Professional Services Agreement with AP Triton Consulting LLC for the NKC Fire Department (Resolution No. 21-060) Interim City Administrator Nakahodo asked Fire Chief Hargis to present this item to Council. Chief Hargis stated that on November 20, 2018, the City Council approved agreements with the Missouri Healthnet Division to participate in the Ground Emergency Medical Transport (GEMT) Program. As a reminder, the GEMT Program is a program that allows the Fire Department to request compensation for certain unreimbursed costs for Medicaid transports. GEMT draws down federal dollars to help offset the cost of the City's provision of emergency ambulance and transport for qualifying Medicaid patients. The governmental agency (the City of North Kansas City) that operates the EMS service is allowed to participate in the recovery of costs associated with providing transportation of Medicaid beneficiaries when the state Medicaid program does not cover the full cost of the service. This cost is shared by the state and federal government on a 35/65 split. In order to ensure the City can collect on 2021 reimbursements, staff is recommending the City hire a consultant, A.P. Triton L Consultants LLC, to prepare its cost reimbursement report. The cost reimbursement report is similar to a corporate tax return. It documents the cost of providing transport, including both direct and indirect costs associated with providing the ambulance service. These include administration, fuel, maintenance, training and time on task. Discussion ensued. C. Clevenger moved to approve Resolution No. 21-060, seconded by C. Smith. The roll was called and the vote was as follows: C. Smith, yes – C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes. Motion carried 8-0.

Resolution No. 21-060 – Professional Services Agreement with A.P. Triton Consultants, LLC

Consideration of a Resolution Amending the Gaming Fund Budget for Fiscal Year 2020-2021 in the Amount of \$11,000 for Additional Work Required to Complete the Howell Street Bump Out Project (Resolution No. 21-062). Interim City Administrator Nakahodo asked Public Works Director Anthony Sands to present this item to Council. Mr. Sands stated that construction of the Howell Street curb extension "bumpouts" began on July 19, 2021. The "bump-out" curb extensions provide traffic calming between Northgate and Macken Park by narrowing the vehicle lane width at pedestrian crossings, shortening the distance pedestrians must cross, and increasing the sight distance/visibility between traffic and pedestrians. During construction, it was observed that additional drainage facilities would be needed for the project as the flat slope of the street does not carry water adequately. The cost of this necessary construction was covered by the planned contingency funding. Two additional items are needed to complete the construction and will require an amendment to the current project budget. First, brick pavers placed during the construction of the adjacent townhomes were not included in the original bid and will need to be reset to complete the project improvements. Second, the existing rounded asphalt surface of the crosswalk will not allow for proper ADA transition between the roadway and the curb extension. Staff is requesting a budget amendment of \$11,000 for completing the brick paver reset and removal of the rounded asphalt surface. Discussion ensued. C. Pellumbi moved to approve Resolution No. 21-062, seconded by C. Roberts. The roll was called and the vote was as follows: C. Smith, yes - C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes. Motion carried 8-0.

Resolution No. 21-062 – Budget Amendment – Howell Bumpouts

Consideration of an Ordinance Authorizing Payment for Certain Accounts Due and Payable by the City Through August 13, 2021 {Bill No. 7620 (Ordinance No. 9417)}. C. Clarke moved that Bill No. 7620 be placed on first reading, seconded by C. Smith. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7620 was read. C. Clarke moved that Bill No. 7620 be placed on second and final reading and passed as Ordinance No. 9417, seconded by C. Smith. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0. Bill No. 7620 was read. Thereupon Mayor DeLong declared the motion carried and the Bill duly passed. Said Bill was then numbered 9417, was signed and approved by the Mayor and attested by the City Clerk.

Ordinance No. 9417 – Approving Accounts Due and Payable by the City Through August 13, 2021

Interim City Administrator Nakahodo thanked Finance Director Nick Hawkins for all his work done to deliver the FY2022 budget. She looks forward to the upcoming Budget Discussions. A new line was added to the Upcoming City Events Calendar, indicating Special Events Permits that have been approved. Two updates were provided from the North Kansas City Hospital.

Staff Comments

C. Clevenger stated the Budget Book looks good. He thanked the Cub Scout Pack 9 for their presence tonight. He is glad that the City will be able to streamline Covid-19 testing for City staff. He thanks Public Works for their swift action on downed branches after the recent storms. He mentioned the passing of Chuck Cash, a previous Parks and Recreation Board Member and details for his upcoming memorial. Thank you to the Police Department for their work on arresting a suspect.

Councilmembers' Comments

- C. Roberts also thanks Public Works for their swift action. Today is Black Cat Appreciation Day. He explains that August is a tough month for the service industry and suggest that NKC residents get take out to help support local restaurants. He is excited for the Strategic Planning Session this weekend.
- C. Clarke thanked City staff for the delivery of the FY2022 Budget Book. Thanks to C. Pellumbi, officers, and firefighters for their work on the frontlines during the Covid-19 pandemic. She wants to give a special shoutout to nurses, especially a resident of her ward, Lindsey Roberts.
- C. Pellumbi thanked staff for the Budget Book. She bids good luck to everyone starting school next week. She is also very excited for the session this weekend.
- C. Graves explained that the crossing on Armour at Clay is very dangerous and recently almost hit somebody in the crosswalk. He request that City staff prioritize amending this danger and look into how it can be made safer.
- C. Saper stated that he is very proud of the way the NKC Council is handling the Covid-19 / mask mandate.
- C. Tull reminded everyone that, if you haven't already, tomorrow is a great day to get the vaccine. She also explained that she attended the recent Road District meeting and learned a lot. She will continue to

attend their meetings and looks forward to working with them on the resurfacing of Armour Road.

C. Smith stated that the Howell St construction seems to be going well and thinks that it is helping with speeds and safety along the road.

Mayor DeLong stated that he is excited for the budget, as well for the presence of Briarcliff Elementary in NKC this year. He also thanked Cub Scout Pack 9 for leading the Pledge of Allegiance this evening.

C. Clevenger moved to adjourn at 8:30 PM, seconded by C. Clarke. The roll was called, and the vote was as follows: C. Clevenger, yes – C. Roberts, yes – C. Clarke, yes – C. Pellumbi, yes – C. Graves, yes – C. Saper, yes – C. Tull, yes – C. Smith, yes. Motion carried, 8-0.

Mayor's Comments

Adjournment

Council Adjourned

Mayor

Attest:

City Clerk

Approved this 7th Day of September 2021