



November 12th, 2020

**Camden County Senate Bill 40 Board
(dba) Camden County Developmental
Disability Resources**

Open Session Board Meeting

Agenda

Camden County Senate Bill 40 Board
d/b/a Camden County Developmental Disability Resources
100 Third Street
Camdenton, MO 65020

Tentative Agenda for Open Session Board Meeting on November 12th, 2020, at 5:00 PM

This Board Meeting will be Held via WebEx:

<https://camdencountydevelopmentaldisabilityresources.my.webex.com/camdencountydevelopmentaldisabilityresources.my/j.php?MTID=m65e6893182d79cda1f2992e748e12aae>

To Join by Phone: 1-415-655-0001
Meeting Number (Access Code): 126 602 7973
Meeting Password: 63965257

Call to Order/Roll Call

Approval of Agenda

Approval of Open Session Board Meeting Minutes for October 8th, 2020

Acknowledgement of Distributed Materials to Board Members

- September CLC Monthly Report
- September LAI Monthly Report
- Third Quarter 2020 YTD Performance Summary
- October 2020 Support Coordination Report
- October 2020 Employment Report
- October 2020 Agency Economic Report
- September 2020 Credit Card Statement
- Resolutions 2020-51 & 2020-52

Speakers/Guests

- NONE

Monthly Oral Reports

- Children's Learning Center
- Lake Area Industries
- MACDDS

Old Business for Discussion

- COVID-19 Related Updates
- Budget Appropriations Committee – 2021 Budget

New Business for Discussion

- Board Member Term Expirations
- Human Resource Committee – Executive Director Annual Review
- CCDDR Annual Holiday Celebration Cancellation
- Bid Openings – RFP 2020-1 & RFP 2020-2

October Reports

- Third Quarter 2020 YTD Performance Summary
- Support Coordination Report
- Employment Report
- Agency Economic Report

September Credit Card Statement

Discussion & Conclusion of Resolutions:

1. Resolution 2020-51: Approval of Amended Policy 25
2. Resolution 2020-52: Approval of Amended COVID-19 Plan

Board Educational Presentation: No Presentation Scheduled for this Month

Open Discussions

Public Comment

Pursuant to **ARTICLE IV, "Meetings"**, Section 5. Public Comment:

"The Board values input from the public. There shall be opportunity for comment by the public during the portion of the Board agenda designated for "Public Comment". Public comment shall be limited to no more than 3 minutes per person to allow all who wish to participate to speak. It is the policy of the Board that the Board shall not respond to public comment at the Board meeting."

"Only comments related to agency-related matters will be received, however such comments need not be related to specific items of the Board's agenda for the meeting. The Board shall not receive comments related to specific client matters and/or personnel grievances, which are addressed separately per Board policies and procedures."

Closed Session Pursuant to Section 610.021 RSMo, subsections (1) & (21)

Adjournment

The news media and any interested party may obtain copies of this notice, and a direct link to the WebEx meeting can be submitted to anyone requesting access by contacting:

Ed Thomas, CCDDR Executive Director

5816 Osage Beach Parkway, Suite 108, Osage Beach, MO 65065

Office: 573-693-1511 Fax: 573-693-1515 Email: director@ccddr.org

October 8th, 2020

Open Session Minutes

CAMDEN COUNTY DEVELOPMENTAL DISABILITY RESOURCES

Open Session Minutes of October 8th, 2020

VIA WebEx

Members Present Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr. Vicki McNamara, Suzanne Perkins

Members Absent Kym Jones, Brian Willey

Others Present Ed Thomas, Executive Director

Guests Present Natalie Couch (LAI)
Susan Daniels (CLC)
Marcie Vansyoc, Ryan Johnson, Lori Cornwell, Jeanna Booth,
Rachel Baskerville, Linda Simms (CCDDR)

Modification of Agenda

Motion by Dr\ Vicki McNamara, second Paul DiBello, to modify the agenda to add closed session per RSMO 610.021, subsections 1 and 21:

AYE: Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr. Vicki McNamara, Suzanne Perkins

` NO: None

Approval of Agenda

Motion by Chris Bothwell, second Suzanne Perkins, to approve the agenda.

AYE: Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr. Vicki McNamara, Suzanne Perkins

` NO: None

Approval of Closed Session Board Meeting Minutes for September 10th, 2020

Motion by Chris Bothwell, second Paul DiBello, to approve the September 10th, 2020 Closed Session Board Meeting Minutes as presented.

AYE: Betty Baxter, Chris Bothwell, Nancy Hayes, Paul DiBello

` NO: None

ABSTAIN: Angela Sellers, Suzanne Perkins, Dr. Vicki McNamara
because they were not present at the September 10th, 2020
Closed Session Board Meeting.

Approval of Open Session Board Meeting Minutes for September 10th, 2020

Motion by Nancy Hayes, second Paul DiBello, to approve the September 10th, 2020 Open Session Board Meeting Minutes as presented.

AYE: Betty Baxter, Chris Bothwell, Nancy Hayes, Paul DiBello

` NO: None

ABSTAIN: Angela Sellers, Suzanne Perkins, Dr. Vicki McNamara
because they were not present at the September 10th, 2020
Open Session Board Meeting.

Acknowledgement of Distributed Materials to Board Members

- August CLC Monthly Report
- August LAI Monthly Report
- September 2020 Support Coordination Report
- September 2020 Employment Report
- September 2020 Agency Economic Report
- August 2020 Credit Card Statement
- Resolutions 2020-45, 2020-46, 2020-47, 2020-48, 2020-49, & 2020-50

Speakers/Guests

None

Monthly Oral Reports

Children's Learning Center (CLC)

Susan Daniels

CLC has 17 children enrolled, 7 one on one's. 10 of the 17 children enrolled have special needs. Some teachers and kiddos are out on quarantine. A scavenger hunt will be held at Red Head on November 21. Social distancing will be utilized.

Lake Area Industries (LAI)

Natalie Couch

LAI had a strong September. DESE CARES Act funding was approved, and funds are coming. Round 2 application has been submitted. Workload is very busy - 30 open BTI purchase orders, Laker Tackle Box project, and 15,000 holiday kits will be coming in. Trying to keep up and keep everyone happy. Mums were all sold.

MACDDS

The Governor announced \$3.9 million of restricted funds were released. Some of the funds will go toward the waitlist for waivers. A few waiver slots will be opened but the waitlist will not be eliminated. The 2021 restrictions are still in place.

Old Business for Discussion

- **COVID-19 Related Updates**

No updates from Camden County Health Department have been received. Nothing has been published since the end of September. The positivity rate remains high.

New Business for Discussion

- **Schedule Budget Appropriations Committee Meeting**

The budget appropriations meeting needs to be scheduled for the 1st week of November. This will leave time for tweaking before the board meeting of November 12. Ed will e-mail committee members to find out what date will be suitable for them to meet.

September Reports

Support Coordination Report

At September end, the agency had 334 clients and 4 intakes; earlier this year there were 367 clients. 360 clients budgeted for 2020. Several clients are transferring and being discharged due to no contact. We are losing folks not Medicaid eligible due to not knowing where they are. Medicaid eligibility was 85% at end of last month.

Employment Report

Competitive integrated employment is holding steady at 15%.

Agency Economic Report

Medicaid billing collection percentage for this year is at 98%. Financials are stable, even though there were added office expenses due to improvements to the IT system and conversion of conference room to office space. Due to COVID, there will likely be no CCDDR annual holiday celebration scheduled.

Motion by Suzanne Perkins, second Angela Sellers, to approve all reports as presented.

AYE: Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr. Vicki McNamara, Suzanne Perkins

` NO: None

August 2020 Credit Card Statement

No Questions and a vote not necessary.

Nancy Hayes asked if CCDDR owned Quick Books software version or paid monthly. Ed explained CCDDR pays a monthly fee to utilize the online version.

Discussion & Conclusion of Resolutions:

- **Resolution 2020-45: Approval of Amended Policy 10**

Basically, changes to adding, removing or changing dates to funding agreements or requests.

- **Resolution 2020-46: Approval of Amended Policy 15**

Performance Improvement System – Gives Board and staff the ability to be flexible.

- **Resolution 2020-47: Approval of Amended Policy 16**

Client research – updated language to match state statute.

- **Resolution 2020-48: Approval of Amended Policy 40**

Admin response to disaster – added facilities not included previously and plan of action.

Dr Vicki McNamara asked if clients were trained on the emergency plan and if CCDDR was similar to state or other state agencies. Ed stated we were similar.

- **Resolution 2020-49: Approval of Amended Policy 44**

New policy regarding employee Educational Assistance Program. The policy details what we expect from employees, the criteria that needs to be met, and IRS guidelines on reimbursement for courses taken.

- **Resolution 2020-50: Authorization to close Central Bank Account**

Bank account signers have been straightened out for board officers at the time the account was opened prior to Ed's arrival in 2012. Officer signatures will likely be gathered, then account closed. The account balance of \$229 has not changed since 2012. Closing the account will not affect our company credit cards issued by Central Bank.

Motion by Chris Bothwell, second Paul DiBello, to approve all resolutions as presented.

AYE: Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr, Vicki McNamara, Suzanne Perkins

` NO: None

Nancy Hayes stated policies had to be worked on constantly. Dr. Vicki McNamara asked if we try to align with other agencies when writing a new policy or revising a current policy. Ed said amending policies depends on the policy references (statutes, DDD directives, DMH operating regulations, etc.) or CCDDR operational needs/changes, and he tries to stay current on all changes. New employees spend up to 2 days with Human Resources covering manuals, policies and procedures. Chris Bothwell said he liked the way our policies are revised and written.

Board Educational Presentation: Missouri I/DD Medicaid Waivers

Ed stated persons must be Medicaid eligible to be on a waiver and reside in the county where services are requested. Waiver types and renewal dates were explained. The state determines the number of people it can issue new Waiver slots. Approximately 65% of Medicaid funding is paid for by the federal government and 35% is paid for by the state.

Open Discussion

None

Public Comment

None

Adjournment:

Motion by Chris Bothwell, second Paul DiBello, to go into closed session pursuant to RSMO 610.021, subsections 1 and 21. A roll call vote was taken.

AYE: Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr. Vicki McNamara, Suzanne Perkins

` NO: None

Board Members returned from Closed Session.

Motion by Suzanne Perkins, second Chris Bothwell, to adjourn meeting.

AYE: Angela Sellers, Betty Baxter, Chris Bothwell, Nancy Hayes,
Paul DiBello, Dr. Vicki McNamara, Suzanne Perkins

NO: None

Board Chairperson

Secretary

CLC Monthly Report



**SB40/CCDDR Funding Request
for
October 2020**

Utilizing SEPT 2020 Records

CHILDREN'S LEARNING CENTER
Statement of Activity
September 2020

	First Steps	Step Ahead	TOTAL
Revenue			
40000 INCOME		1.00	1.00
41000 Contributions & Grants			0.00
41200 Camden County SB40	815.10	10,693.95	11,509.05
Total 41000 Contributions & Grants	\$ 815.10	\$ 10,693.95	\$ 11,509.05
42000 Program Services			0.00
42100 First Steps			0.00
Total 42100 First Steps	\$ 2,363.79	\$ 0.00	\$ 2,363.79
Total 42000 Program Services	\$ 2,363.79	\$ 0.00	\$ 2,363.79
43000 Tuition			0.00
43100 Dining			0.00
43120 Lunch		25.00	25.00
43130 Snack		5.00	5.00
Total 43100 Dining	\$ 0.00	\$ 30.00	\$ 30.00
43500 Tuition		1,186.50	1,186.50
43505 Subsidy Tuition		188.56	188.56
Total 43500 Tuition	\$ 0.00	\$ 1,375.06	\$ 1,375.06
Total 43000 Tuition	\$ 0.00	\$ 1,405.06	\$ 1,405.06
Total 40000 INCOME	\$ 3,178.89	\$ 12,100.01	\$ 15,278.90
Total Revenue	\$ 3,178.89	\$ 12,100.01	\$ 15,278.90
Gross Profit	\$ 3,178.89	\$ 12,100.01	\$ 15,278.90
Expenditures			
50000 EXPENDITURES			0.00
51000 Payroll Expenditures			0.00
Total 51000 Payroll Expenditures	\$ 0.00	\$ 11,624.41	\$ 11,624.41
52000 Advertising/Promotional		800.00	800.00
53000 Equipment		112.87	112.87
54000 Fundraising/Grants			0.00
54970 Scavenger Hunt		97.03	97.03
Total 54000 Fundraising/Grants	\$ 0.00	\$ 97.03	\$ 97.03
56000 Office Expenditures		54.65	54.65
56300 Office Supplies		111.71	111.71
Total 56000 Office Expenditures	\$ 0.00	\$ 166.36	\$ 166.36
57000 Office/General Administrative Expenditures			0.00
57100 Accounting Fees			0.00
57150 Online Accounting Software Service		549.55	549.55
Total 57100 Accounting Fees	\$ 0.00	\$ 549.55	\$ 549.55
57160 QuickBooks Payments Fees		50.50	50.50
57900 Seminars/Training		20.00	20.00
Total 57000 Office/General Administrative Expenditures	\$ 0.00	\$ 620.05	\$ 620.05
58000 Operating Supplies			0.00
58175 Paper Consumables		264.33	264.33

58200 Dining			339.85		339.85
Total 58000 Operating Supplies	\$	0.00	\$	604.18	\$ 604.18
59000 Program Service Fees					0.00
59100 First Steps					0.00
Total 59100 First Steps	\$	2,247.79	\$	0.00	\$ 2,247.79
Total 59000 Program Service Fees	\$	2,247.79	\$	0.00	\$ 2,247.79
62000 Safety & Security			83.50		83.50
63000 Utilities					0.00
63200 Internet		26.10	48.54		74.64
63300 Telephone		41.18	93.61		134.79
Total 63000 Utilities	\$	67.28	\$	142.15	\$ 209.43
Total 50000 EXPENDITURES	\$	2,315.07	\$	14,250.55	\$ 16,565.62
Payroll Expenses					0.00
Company Contributions					0.00
Retirement			80.00		80.00
Total Company Contributions	\$	0.00	\$	80.00	\$ 80.00
Total Payroll Expenses	\$	0.00	\$	80.00	\$ 80.00
voided check			0.00		0.00
Total Expenditures	\$	2,315.07	\$	14,330.55	\$ 16,645.62
Net Operating Revenue	\$	863.82	-\$	2,230.54	-\$ 1,366.72
Net Revenue	\$	863.82	-\$	2,230.54	-\$ 1,366.72

CHILDREN'S LEARNING CENTER
Statement of Activity
January - September, 2020

	First Steps	Step Ahead	TOTAL
Revenue			
40000 INCOME		1.00	1.00
41000 Contributions & Grants		17,550.00	17,550.00
41100 CACFP		4,128.94	4,128.94
41200 Camden County SB40	5,834.40	129,761.50	135,595.90
41210 Camden County SB40 One-Time Grants		10,000.00	10,000.00
Total 41200 Camden County SB40	\$ 5,834.40	\$ 139,761.50	\$ 145,595.90
41400 United Way Grant		5,976.00	5,976.00
41500 Misc. Grant Revenue			0.00
41501 Paycheck Protection Plan		50,500.00	50,500.00
Total 41500 Misc. Grant Revenue	\$ 0.00	\$ 50,500.00	\$ 50,500.00
Total 41000 Contributions & Grants	\$ 5,834.40	\$ 217,916.44	\$ 223,750.84
42000 Program Services			0.00
42100 First Steps			0.00
Total 42100 First Steps	\$ 30,776.93	\$ 0.00	\$ 30,776.93
Total 42000 Program Services	\$ 30,776.93	\$ 0.00	\$ 30,776.93
43000 Tuition			0.00
43100 Dining			0.00
43120 Lunch		675.00	675.00
43130 Snack		90.00	90.00
Total 43100 Dining	\$ 0.00	\$ 765.00	\$ 765.00
43200 Enrollment Fees		150.00	150.00
43500 Tuition		10,308.83	10,308.83
43505 Subsidy Tuition		270.74	270.74
Total 43500 Tuition	\$ 0.00	\$ 10,579.57	\$ 10,579.57
Total 43000 Tuition	\$ 0.00	\$ 11,494.57	\$ 11,494.57
45000 Other Revenue			0.00
45200 Fundraising Income		240.00	240.00
45280 Pizza For A Purpose		5,393.37	5,393.37
45281 Pizza For A Purpose - Gun Raffle		1,590.00	1,590.00
Total 45280 Pizza For A Purpose	\$ 0.00	\$ 6,983.37	\$ 6,983.37
45290 Non-Profit Revenue		80.00	80.00
Total 45200 Fundraising Income	\$ 0.00	\$ 7,303.37	\$ 7,303.37
45300 Donation Income		706.00	706.00
45310 Donations		668.81	668.81
45312 Community Rewards		618.52	618.52
45315 Bear Market		600.00	600.00
45351 Community Foundation of the Lake		3,150.00	3,150.00
45352 KC Chiefs Ticket Fundraiser		40.00	40.00
45353 Alley Cats - Santas Little Helpers		2,205.00	2,205.00
Total 45310 Donations	\$ 0.00	\$ 7,282.33	\$ 7,282.33
Total 45300 Donation Income	\$ 0.00	\$ 7,988.33	\$ 7,988.33
Total 45000 Other Revenue	\$ 0.00	\$ 15,291.70	\$ 15,291.70
Total 40000 INCOME	\$ 36,611.33	\$ 244,703.71	\$ 281,315.04
Total Revenue	\$ 36,611.33	\$ 244,703.71	\$ 281,315.04
Gross Profit	\$ 36,611.33	\$ 244,703.71	\$ 281,315.04
Expenditures			0.00
50000 EXPENDITURES			0.00
51000 Payroll Expenditures			0.00
Total 51000 Payroll Expenditures	\$ 0.00	\$ 194,615.03	\$ 194,615.03
52000 Advertising/Promotional		1,870.63	1,870.63
53000 Equipment		1,329.34	1,329.34
54000 Fundraising/Grants		60.00	60.00
54200 Summer Night Glow 5K		264.00	264.00
54700 Pizza For A Purpose		840.97	840.97
54970 Scavenger Hunt		97.03	97.03
Total 54000 Fundraising/Grants	\$ 0.00	\$ 1,262.00	\$ 1,262.00
55000 Insurance		669.00	669.00

55200 Commercial General Liability		720.00	720.00
55300 Commercial Property		512.00	512.00
55400 Director's & Officers		538.00	538.00
55500 Hired & Non-Owned Auto		102.00	102.00
55600 Professional Liability		1,563.00	1,563.00
Total 55000 Insurance	\$ 0.00	\$ 4,104.00	\$ 4,104.00
56000 Office Expenditures		54.65	54.65
56100 Copy Machine	764.24	1,783.30	2,547.54
56200 Miscellaneous		466.33	466.33
56300 Office Supplies		1,223.98	1,223.98
Total 56000 Office Expenditures	\$ 764.24	\$ 3,528.26	\$ 4,292.50
57000 Office/General Administrative Expenditures		174.74	174.74
57100 Accounting Fees		2,000.00	2,000.00
57150 Online Accounting Software Service		619.55	619.55
Total 57100 Accounting Fees	\$ 0.00	\$ 2,619.55	\$ 2,619.55
57160 QuickBooks Payments Fees		1,190.44	1,190.44
57400 Child Management Software		280.00	280.00
57600 License/Accreditation/Permit Fees		1,337.96	1,337.96
57700 Membership/Association Dues		119.00	119.00
57900 Seminars/Training		853.00	853.00
57960 Janitorial/Custodial		800.00	800.00
Total 57000 Office/General Administrative Expenditures	\$ 0.00	\$ 7,374.69	\$ 7,374.69
58000 Operating Supplies			0.00
58100 Classroom Consumables		1,920.37	1,920.37
58150 Center Consumables		982.58	982.58
58175 Paper Consumables		1,672.16	1,672.16
58200 Dining		7,784.14	7,784.14
58400 Sanitizing		226.18	226.18
Total 58000 Operating Supplies	\$ 0.00	\$ 12,585.43	\$ 12,585.43
59000 Program Service Fees			0.00
59100 First Steps			0.00
Total 59100 First Steps	\$ 23,616.21	\$ 0.00	\$ 23,616.21
Total 59000 Program Service Fees	\$ 23,616.21	\$ 0.00	\$ 23,616.21
61000 Repair & Maintenance		442.97	442.97
62000 Safety & Security		1,378.95	1,378.95
63000 Utilities			0.00
63100 Electric	697.27	1,627.01	2,324.28
63200 Internet	210.50	438.41	648.91
63300 Telephone	365.92	843.35	1,209.27
63400 Trash Service		317.68	317.68
63500 Water Softener		246.95	246.95
Total 63000 Utilities	\$ 1,273.69	\$ 3,473.40	\$ 4,747.09
65000 Other Expenditures			0.00
65100 Miscellaneous Expenditures		329.36	329.36
Total 65000 Other Expenditures	\$ 0.00	\$ 329.36	\$ 329.36
Total 50000 EXPENDITURES	\$ 25,654.14	\$ 232,294.06	\$ 257,948.20
Payroll Expenses			0.00
Company Contributions			0.00
Retirement		1,360.00	1,360.00
Total Company Contributions	\$ 0.00	\$ 1,360.00	\$ 1,360.00
Total Payroll Expenses	\$ 0.00	\$ 1,360.00	\$ 1,360.00
Reimbursements		578.84	578.84
voided check		0.00	0.00
Total Expenditures	\$ 25,654.14	\$ 234,232.90	\$ 259,887.04
Net Operating Revenue	\$ 10,957.19	\$ 10,470.81	\$ 21,428.00
Other Expenditures			
Other Miscellaneous Expenditure		25.00	25.00
Total Other Expenditures	\$ 0.00	\$ 25.00	\$ 25.00
Net Other Revenue	\$ 0.00	-\$ 25.00	\$ 25.00
Net Revenue	\$ 10,957.19	\$ 10,445.81	\$ 21,403.00

CHILDREN'S LEARNING CENTER
Statement of Cash Flows
January - September, 2020

	First Steps	Step Ahead	Not Specified	TOTAL
OPERATING ACTIVITIES				
Net Revenue	10,957.19	10,445.80	0.01	21,403.00
Adjustments to reconcile Net Revenue to Net Cash provided by operations:				0.00
Accounts Receivable (A/R)			235.53	235.53
Repayment: Cash Advance Repayment			300.00	300.00
Accounts Payable (A/P)			-1,624.62	-1,624.62
21000 CBOLO MasterCard -8027		-8,438.22	9,411.42	973.20
21200 Kroger-DS1634 CLC		-9,478.60	9,298.17	-180.43
22300 Payroll Liabilities: Federal Taxes (941/944)			-66.68	-66.68
22400 Payroll Liabilities: MO Income Tax			-154.00	-154.00
22500 Payroll Liabilities: MO Unemployment Tax			-308.18	-308.18
Direct Deposit Payable			0.00	0.00
Payroll Liabilities: Ascensus			2,720.00	2,720.00
Total Adjustments to reconcile Net Revenue to Net Cash provided by operations:	\$ 0.00	-\$ 17,916.82	\$ 19,811.64	\$ 1,894.82
Net cash provided by operating activities	\$ 10,957.19	-\$ 7,471.02	\$ 19,811.65	\$ 23,297.82
Net cash increase for period	\$ 10,957.19	-\$ 7,471.02	\$ 19,811.65	\$ 23,297.82
Cash at beginning of period			14,877.55	14,877.55
Cash at end of period	\$ 10,957.19	-\$ 7,471.02	\$ 34,689.20	\$ 38,175.37

CHILDREN'S LEARNING CENTER
Statement of Financial Position
As of September 30, 2020

	Jan - Sep, 2020
ASSETS	
Current Assets	
Bank Accounts	
11000 CBOLO Checking	37,650.37
Total Bank Accounts	\$ 37,650.37
Accounts Receivable	
Accounts Receivable (A/R)	609.27
Total Accounts Receivable	\$ 609.27
Other Current Assets	
14000 Undeposited Funds	525.00
Cash Advance	700.00
Prepaid Expenses	7,971.74
Repayment	
Cash Advance Repayment	-1,000.00
Total Repayment	-\$ 1,000.00
Total Other Current Assets	\$ 8,196.74
Total Current Assets	\$ 46,456.38
TOTAL ASSETS	\$ 46,456.38
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable (A/P)	63.71
Total Accounts Payable	\$ 63.71
Credit Cards	
21000 CBOLO MasterCard -8027	1,277.86
21200 Kroger-DS1634 CLC	339.85
Total Credit Cards	\$ 1,617.71
Other Current Liabilities	
22000 Payroll Liabilities	
22100 Anthem	2,191.63
22200 Childcare Tuition	3,141.44
22300 Federal Taxes (941/944)	-8,242.58
22400 MO Income Tax	-2,900.48
22500 MO Unemployment Tax	-757.08
22600 Primevest Financial	448.19
Aflac	8,859.15
Alera	9,354.60
Ascensus	6,365.00
Health Care (United HealthCare)	776.25
US Department of Education	1,115.65
Total 22000 Payroll Liabilities	\$ 20,351.77
Direct Deposit Payable	0.00
Total Other Current Liabilities	\$ 20,351.77
Total Current Liabilities	\$ 22,033.19
Total Liabilities	\$ 22,033.19
Equity	
30000 Opening Balance Equity	13,816.12
Retained Earnings	-10,795.93
Net Revenue	21,403.00
Total Equity	\$ 24,423.19
TOTAL LIABILITIES AND EQUITY	\$ 46,456.38

CHILDREN'S LEARNING CENTER
Accounts Receivable YTD by Class
 January - September, 2020

[illegible]

CHILDREN'S LEARNING CENTER
AGENCY UPDATE/PROGRESS REPORT
September 2020

○ **CHILD COUNT/ATTENDANCE**

Step Ahead currently has 17 children enrolled

10 of the 17 with special needs/dd (7 one-on-ones-3 full time 4 part time)

**New child starting in October 2020 from Morgan County, temporary funding assistance)

○ **COMMUNITY EVENTS**

Attended:

None at this time

Current / Upcoming:

November 21, 2020 – CLC Scavenger Hunt FUNdraiser

○ **GENERAL PROGRAM NEWS**

- Still looking for new providers (SLP, OT, PT, SI) to join First Steps
- Current openings available for enrollment
- Child confirmed positive for COVID (2 teachers & 5 children in quarantine)

○ **FUNDRAISING/GRANTS**

- November 21 – CLC Scavenger HUNT (Looking for sponsors at this time & people to register)
- Facebook online fundraiser ended (Raised \$6,670)



Event date: Saturday, November 21
Pre-register online or register on site starting at 11:30am – Scavenger hunt is from 1pm – 3pm
Awards given at 4pm
Location: RedHead Yacht Club
1900 Yacht Club Drive
Osage Beach, MO 65065

COMPANY: _____

CONTACT: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

EMAIL: _____

CHECK, PAYABLE TO CLC
SPONSORSHIP AMOUNT: \$ _____

ALL PROCEEDS BENEFIT:
CHILDREN'S LEARNING CENTER

A not for profit that provides services to children with special needs & developmental delays in the lake area.
88 THIRD STREET
CAMDENTON, MO 65020
(573) 346-0660
CLC@CLCFORKIDS.ORG

***If you would like to sign up to participate in the scavenger hunt, please contact us for a different form!**

SPONSORSHIP OPPORTUNITIES

Please Mark Appropriate Box or Boxes:

- ☐ **PROFESSIONAL LEVEL SPONSOR * \$500**
 - **Signage at event**
 - **Company logo on scavenger program**
 - **Recognition on social media**
 - **4 tickets to attend scavenger hunt**
 - _____ (Mark with "X" if you would like complimentary tickets)
- ☐ **ENTHUSIAST LEVEL SPONSOR * \$250**
 - **Company name listed on event program**
 - **Recognition on social media**
 - **2 tickets to attend**
 - _____ (Mark with "X" if you would like complimentary tickets)
- ☐ **SUPPORTING LEVEL SPONSOR**
Donation of gift cards or items for prizes/giveaways
- ☐ **BONUS ADD ON: LOCATION LEVEL SPONSOR**
Company would like to be actively involved & hunters can stop by during scavenger hunt & pick up a business card, menu, etc. to complete an item on their scavenger hunt list or let us know about an item/sign at your business and we will ADD IT to our scavenger list!

FEDERAL TAX ID #: 42-1547554
(All donations are tax-deductible)

SPONSORSHIP DUE NO LATER THAN NOVEMBER 1

For additional info or questions, contact CLC at (573) 346-0660 or clc@clcforkids.org

THANK YOU!!!



CLC SCAVENGER HUNT REGISTRATION FORM
SATURDAY, NOVEMBER 21

Please complete this form and return it via:

Email – CLC@CLCFORKIDS.ORG

In Person – Children's Learning Center, 88 Third Street, Camdenton, MO 65020

\$20 Per Person In Advance (\$25 In Person On Event Day - Max number is 4 people per team)
\$10 For Children under 14
Free For Children under 6

- ☐ Individual
☐ Team of 2 People
☐ Team of 3 People
☐ Team of 4 People

Main Contact person – Name & Cell #: _____

Members Name	Cell #
1.	
2.	
3.	
4.	

TOTAL # OF PARTICIPANTS: _____

TOTAL AMOUNT: _____

ADDITIONAL DONATION: (OPTIONAL) _____

All donations are tax deductible Federal Tax ID#42-1547554

All registrations fee are considered donations and are not refundable.

All proceeds benefit Children's Learning Center.

A not for profit that provides services to children with special needs & developmental delays in the lake area.



CLC Scavenger Hunt Game Rules

Saturday, November 21

Race begins at: 1pm from RedHead's LakeSide Grill

Race ends at: 3pm

Light Appetizers: 3-4pm

Awards ceremony: 4pm

1. Each team or individual will be given a sheet with a list of items. You must try to find all items and snap a photo of the item, but each photo must include the provided "Official Coaster" in each photo
2. If participating as a team, you must always stay together. One cannot wander off and try to find items on their own.
3. All items must be photographed on ONE phone or camera. Remember: the coaster **MUST** show in each photo and the pictures will be used for proof.
4. Do not take a photo of two items together. They must be in separate pictures.
5. Check off all items found and complete top of form. At the end of the challenge when you return, you will put your list back in the envelope and give to CLC staff. The event staff will record the time that the lists are submitted. The top teams will be asked to show a picture for each item checked off list.

SCORING

1. Late loses. Your team, in its entirety, must return to home base (RedHeads) no later than 3pm! No Exceptions!
2. The event staff will calculate points based on the point value for checked off items provided. If you place for a prize, you will be asked to provide pictures you have completed on your list. If you do not have a picture, no points will be awarded.

**THE INDIVIDUAL OR TEAM THAT FINDS THE MOST ITEMS ON THE LIST
AND/OR HAS THE MOST POINTS WINS!!!**

Please HAVE FUN and remember, you are here to have fun, but do so legally. Do not enter private property or ruin other peoples' chances to win. If you fail to abide by all safety rules and the directions of event, you will be disqualified and forfeiting eligibility of event prizes.

Further Questions: Call (573) 346-0660 or email CLC@CLCforKIDS.org

LAI Monthly Report



Monthly Financial Reports

Lake Area Industries, Inc.

SEPTEMBER 30, 2020

Lake Area Industries, Inc. Balance Sheet Comparison

	9/30/2020	PY
ASSETS		
Current Assets		
Total Bank Accounts	\$515,518	\$263,539
Total Accounts Receivable	\$71,623	\$53,122
Other Current Assets		
Certificate of Deposit 12 mo mat 1/7/21- 1.35%	\$25,303	\$25,063
Certificate of Deposit 12 mo. mat 3/27/21- .65%	\$25,716	\$25,316
Certificate of Deposit 12 mo. mat 10/22/20- 1.25%	\$25,471	\$25,211
Certificate of Deposit 12 mo. mat 6/27/21- .65%	\$25,508	\$25,117
Community Foundation of the Ozarks Agency Partner Account	\$1,024	\$1,009
GIFTED GARDEN CASH	\$500	\$500
INVENTORY	\$6,705	\$6,986
PETTY CASH	\$150	\$150
Undeposited Funds	\$488	\$7,632
Total Other Current Assets	\$110,866	\$116,983
Total Current Assets	\$698,007	\$433,644
Fixed Assets		
ACCUMULATED DEPRECIATION	(\$760,895)	(\$737,843)
AUTO AND TRUCK	\$128,809	\$128,809
BUILDING	\$403,567	\$377,261
Deposit on Construction	\$0	\$29,115
FURN & FIX ORIGINAL VALUE	\$19,284	\$19,284
GH RETAIL STORE	\$16,505	\$16,505
GREENHOUSE EQUIPMENT	\$2,870	\$0
LAND	\$33,324	\$33,324
LAND IMPROVEMENT	\$25,502	\$25,502
MACHINERY & EQUIPMENT	\$234,464	\$229,732
OFFICE EQUIPMENT	\$12,838	\$12,838
Sewer Equipment	\$19,354	\$19,354
SHREDDING EQUIPMENT	\$45,572	\$45,572
Total Fixed Assets	\$181,192	\$199,451
Other Assets		
CURRENT CAPITAL IMPROVEMENT	\$59,088	\$39,437
UTILITY DEPOSITS	\$554	\$554
Total Other Assets	\$59,642	\$39,991
TOTAL ASSETS	\$938,841	\$673,086
LIABILITIES AND EQUITY		
Liabilities		
Current Liabilities		
Total Accounts Payable	\$2,962	\$3,700
Total Credit Cards	\$2,705	\$1,420
Other Current Liabilities		
ACCRUED WAGES	\$6,274	\$0

AFLAC DEDUCTIONS PAYABLE	\$27	\$27
Gift Certificate Payable	\$25	\$75
Missouri Department of Revenue Payable	\$93	\$42
Payroll Protection Program Loan	\$107,900	
SALES TAX PAYABLE	\$104	\$0
Trellis sales	\$40	
United Way contributions payable	\$120	
Total Other Current Liabilities	\$114,583	\$145
Total Current Liabilities	\$120,250	\$5,265
Total Liabilities	\$120,250	\$5,265
Equity		
Unrestricted Net Assets	\$653,811	\$508,965
Net Income	\$164,780	\$158,856
Total Equity	\$818,591	\$667,821
TOTAL LIABILITIES AND EQUITY	\$938,841	\$673,086

Lake Area Industries, Inc.
Budget vs. Actuals

	Sep 2020			YTD		
	Actual	Budget	over Budget	Actual	Budget	over Budget
Income						
CONTRACT PACKAGING	34,450	22,824	11,626	278,265	231,285	46,980
FOAM RECYCLING	468	500	(32)	2,406	4,500	(2,094)
GREENHOUSE SALES	2,216	2,306	(90)	56,389	54,634	1,755
SECURE DOCUMENT SHREDDING	2,453	3,571	(1,118)	32,109	30,349	1,760
Services	2,240		2,240	2,240	0	2,240
Total Income	41,827	29,201	12,626	371,409	320,767	50,642
Cost of Goods Sold						
Cost of Goods Sold	2,191	1,975	216	20,986	21,340	(354)
GG PLANTS & SUPPLIES	1,321	2,066	(745)	30,010	31,995	(1,985)
SHIPPING AND DELIVERY	18	0	18	2,172	3,948	(1,776)
Textile Purchases		0	0	1,282	1,339	(57)
WAGES - TEMPORARY WORKERS	2,839	0	2,839	41,096	0	41,096
WAGES-EMPLOYEES	26,166	24,179	1,988	205,099	206,757	(1,658)
Total Cost of Goods Sold	32,535	28,220	4,316	300,646	265,379	35,267
Gross Profit	9,292	981	8,310	70,763	55,388	15,375
Expenses						
ACCTG. & AUDIT FEES		0	0	9,075	9,529	(454)
ALL OTHER EXPENSES	821	1,181	(360)	8,157	14,263	(6,106)
Bus Fare	343	260	83	1,567	680	887
CASH OVER/SHORT	(6)		(6)	(58)	0	(58)
EQUIP. PURCHASES & MAINTENANCE	4,023	4,414	(391)	26,819	44,371	(17,552)
INSURANCE	1,945	1,563	382	14,890	14,063	828
NON MANUFACTURING SUPPLIES	12	20	(8)	677	665	12
PAYROLL	16,486	19,102	(2,616)	142,268	164,982	(22,714)
PAYROLL EXP & BENEFITS	6,621	7,871	(1,250)	57,858	66,737	(8,880)
PROFESSIONAL SERVICES	1,568	1,390	178	12,830	11,296	1,534
SALES TAX			0	(80)	0	(80)
UTILITIES	1,161	1,411	(250)	12,544	16,000	(3,456)
Total Expenses	32,973	37,212	(4,239)	286,547	342,585	(56,038)
Net Operating Income	(23,682)	(36,230)	12,549	(215,784)	(287,197)	71,413
Other Income						
INTEREST INCOME	275	194	81	2,410	1,744	666
OTHER CONTRIBUTIONS	300		300	5,297	0	5,297
SB-40 REVENUE	17,650	17,463	187	198,108	161,517	36,591
STATE AID	23,933	19,096	4,837	174,750	173,044	1,707
Total Other Income	42,159	36,753	5,406	380,565	336,305	44,260
Other Expenses						
Net Other Income	42,159	36,753	5,406	380,565	336,305	44,260
Net Income	18,477	522	17,955	164,780	49,108	115,672

Lake Area Industries, Inc.

Profit and Loss

	Sep 2020	YTD
Income		
CONTRACT PACKAGING	\$34,450	\$278,265
FOAM RECYCLING	\$468	\$2,406
GREENHOUSE SALES	\$2,216	\$56,389
SECURE DOCUMENT SHREDDING	\$2,453	\$32,109
Services	\$2,240	\$2,240
Total Income	\$41,827	\$371,409
Cost of Goods Sold		
Cost of Goods Sold	\$2,191	\$20,986
GG PLANTS & SUPPLIES	\$1,321	\$30,010
SHIPPING AND DELIVERY	\$18	\$2,172
Textile Purchases		\$1,282
WAGES - TEMPORARY WORKERS	\$2,839	\$41,096
WAGES-EMPLOYEES	\$26,166	\$205,099
Total Cost of Goods Sold	\$32,535	\$300,646
Gross Profit	\$9,292	\$70,763
Expenses		
ACCTG. & AUDIT FEES		\$9,075
ALL OTHER EXPENSES	\$821	\$8,157
Bus Fare	\$343	\$1,567
CASH OVER/SHORT	(\$6)	(\$58)
EQUIP. PURCHASES & MAINTENANCE	\$4,023	\$26,819
INSURANCE	\$1,945	\$14,890
NON MANUFACTURING SUPPLIES	\$12	\$677
PAYROLL	\$16,486	\$142,268
PAYROLL EXP & BENEFITS	\$6,621	\$57,858
PROFESSIONAL SERVICES	\$1,568	\$12,830
SALES TAX		(\$80)
UTILITIES	\$1,161	\$12,544
Total Expenses	\$32,973	\$286,547
Net Operating Income	(\$23,682)	(\$215,784)
Other Income		
INTEREST INCOME	\$275	\$2,410
OTHER CONTRIBUTIONS	\$300	\$5,297
SB-40 REVENUE	\$17,650	\$198,108
STATE AID	\$23,933	\$174,750
Total Other Income	\$42,159	\$380,565
Other Expenses		
ALLOCATION NON OPERATING EXPENSES		\$0
Total Other Expenses	\$0	\$0
Net Other Income	\$42,159	\$380,565
Net Income	\$18,477	\$164,780

Lake Area Industries, Inc.
Statement of Cash Flows
YTD

	Total
OPERATING ACTIVITIES	
Net Income	164,780
Adjustments to reconcile Net Income to Net Cash provided by operations:	
ACCOUNTS RECEIVABLE	15,824
Certificate of Deposit 12 mo mat 1/7/21- 1.35%	(178)
Certificate of Deposit 12 mo. mat 3/27/21- .65%	(242)
Certificate of Deposit 12 mo. mat 10/22/20- 1.25%	(237)
Certificate of Deposit 12 mo. mat 6/27/21- .65%	(276)
INVENTORY:GG PLANT & SUPPLIES INVEN	0
INVENTORY:RAW MATERIAL INVENTORY	1,077
PETTY CASH	(5)
Accounts Payable	(4,504)
CBOLO CC - 1565 Natalie	365
CBOLO CC - 5203 Lillie	655
CBOLO CC - 5229 Kevin	175
Sam's Club Mastercard- 2148	21
AFLAC DEDUCTIONS PAYABLE	0
Gift Certificate Payable	(25)
Missouri Department of Revenue Payable	50
Payroll Protection Program Loan	107,900
Rock Sales @ 75%	0
SALES TAX PAYABLE	104
Trellis sales	40
United Way contributions payable	120
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	120,864
Net cash provided by operating activities	285,644
INVESTING ACTIVITIES	
CURRENT CAPITAL IMPROVEMENT	(54,624)
Net cash provided by investing activities	(54,624)
Net cash increase for period	231,020
Cash at beginning of period	284,985
Cash at end of period	516,006

Lake Area Industries, Inc.
Statement of Cash Flows
September 2020

	Total
OPERATING ACTIVITIES	
Net Income	18,477
Adjustments to reconcile Net Income to Net Cash provided by operations:	
ACCOUNTS RECEIVABLE	(9,951)
Certificate of Deposit 12 mo. mat 3/27/21- .65%	(42)
Certificate of Deposit 12 mo. mat 6/27/21- .65%	(42)
INVENTORY:RAW MATERIAL INVENTORY	1,570
Accounts Payable	(1,039)
CBOLO CC - 1565 Natalie	561
CBOLO CC - 5203 Lillie	852
CBOLO CC - 5229 Kevin	175
Sam's Club Mastercard- 2148	349
AFLAC DEDUCTIONS PAYABLE	0
SALES TAX PAYABLE	103
United Way contributions payable	20
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	(7,444)
Net cash provided by operating activities	11,033
INVESTING ACTIVITIES	
CURRENT CAPITAL IMPROVEMENT	(3,682)
Net cash provided by investing activities	(3,682)
Net cash increase for period	7,351
Cash at beginning of period	508,654
Cash at end of period	516,006

Lake Area Industries, Inc.						
A/P Aging Summary						
As of September 30, 2020						
	Current	1 - 30	31 - 60	61 - 90	91 and over	Total
TOTAL	\$ 1,001	\$ 1,962	\$ 0	\$ 0	\$ 0	\$ 2,962

Lake Area Industries, Inc.						
A/R Aging Summary						
As of September 30, 2020						
	Current	1 - 30	31 - 60	61 - 90	91 and over	Total
TOTAL	\$ 70,214	\$ 428	\$ 357	\$ 589	\$ 35	\$ 71,623

Third Quarter 2020 Agency Performance Summary

Summary

Measure	Description	Revised 1st Qtr	2nd Qtr	3rd Qtr	YTD	Agency Goal by Year End
Response	Response Rates for Client/Guardian Satisfaction Surveys	39%	45%	31%	39%	30%
1	My SC Made a Difference in My Life	91%	83%	77%	84%	80%
2	I Received Information About Exploitation, Personal Protection, and Risk Reduction	88%	93%	91%	90%	100%
3	New Clients Contacted by Their SC within 5 Business Days of Eligibility Determination	83%	N/A	100%	91%	100%
4	New Clients' ISP Meeting is Held within 30 Days of Eligibility Determination	100%	N/A	100%	100%	100%
5	ISPs Sent to RSRO 21 Days Prior to Implementation	52%	63%	68%	61%	95%
6	Quarterly Reports Completed on Time	89%	87%	84%	86%	95%
7	My SC was Available When Needed	94%	95%	91%	94%	90%
8	My SC Saw Me Frequently Enough	91%	88%	95%	90%	90%
9	I am Satisfied with Services Provided by My SC & CCDDR Staff	94%	95%	91%	94%	90%
10	I Contributed to the Development of My ISP	94%	90%	95%	93%	100%
11	CCDDR will Review Policies, Plans, Manuals, etc. Annually	64%	67%	80%	80%	100%
12	Monthly Reports Completed on Time	95%	89%	92%	92%	95%
13	ISPs Submitted Through QA Process Passed	70%	65%	65%	65%	90%
14	Agency Average SC Billable Time vs. Time Worked	73%	73%	78%	75%	70%
15	Annual ISP Completed by Effective Date	83%	90%	91%	88%	95%

Support Coordination Report

October 2020

Client Caseloads

- Number of Caseloads as of October 31st, 2020: 335
- Budgeted Number of Caseloads: 360
- Pending Number of New Intakes: 4
- Medicaid Eligibility: 85.67%

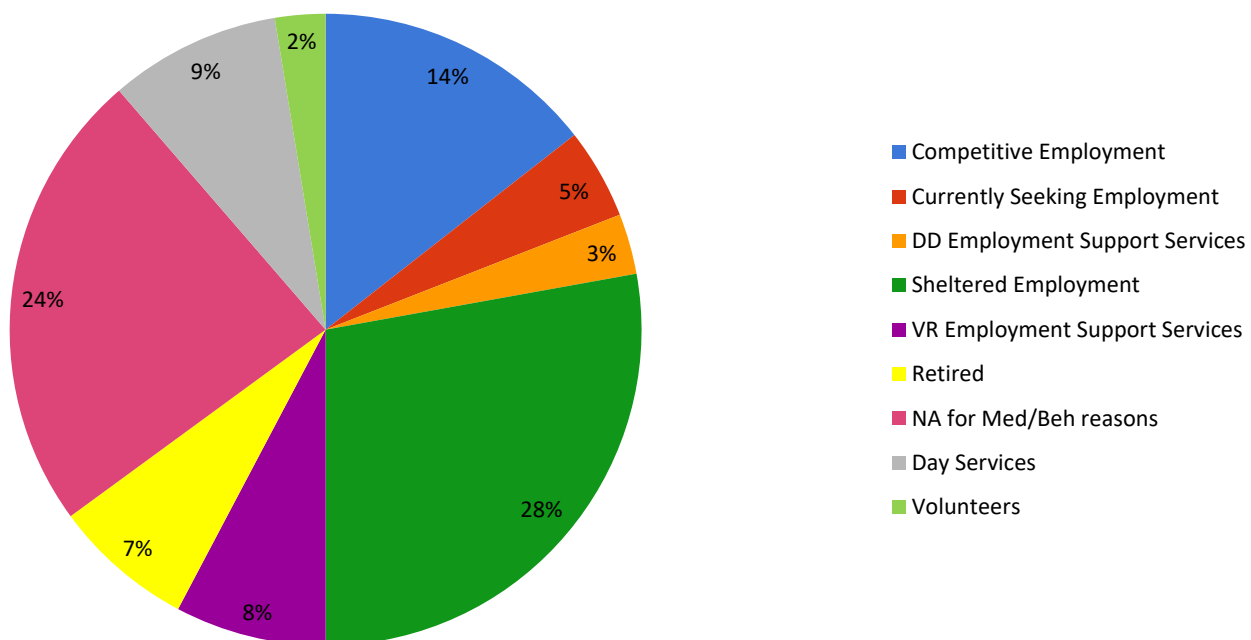
Caseload Counts

Cynthia Brown – 34
Elizabeth Chambers - 32
Stephanie Enoch – 30
Teri Guttman - 31
Micah Joseph – 8
Jennifer Lyon – 33
Annie Meyer – 41
Christina Mitchell - 32
Mary Petersen – 35
Patricia Strouse - 32
Jami Weisenborn - 27

Employment Report

SC name	Competitive Employment	Currently Seeking Employment	DD Employment Support Services	Sheltered Employment	VR Employment Support Services	Retired	NA for Med/Beh reasons	Day Services	Volunteers	
Agency Adults	28	9	6	54	15	14	46	17	5	
Guttman	4	4	3	5	1	6	6	5	1	
Brown	5	0	0	5	11	0	1	3	1	
Enoch	1	2	0	7	0	2	12	3	2	
Lyon	1	0	1	7	1	1	6	4	1	
Meyer	6	1	0	4	0	1	2	0	0	
Chambers	4	0	1	6	0	1	4	1	0	
Peterson	1	1	0	7	1	1	6	0	0	
Joseph	0	0	0	1	0	0	1	0	0	
Weisenborn	2	0	1	6	1	2	3	0	0	
Strouse	4	1	0	6	0	0	5	1	0	
Mitchell	6	2	0	6	5	1	4	1	0	

CCDDR Adults employment status as of October 31, 2020

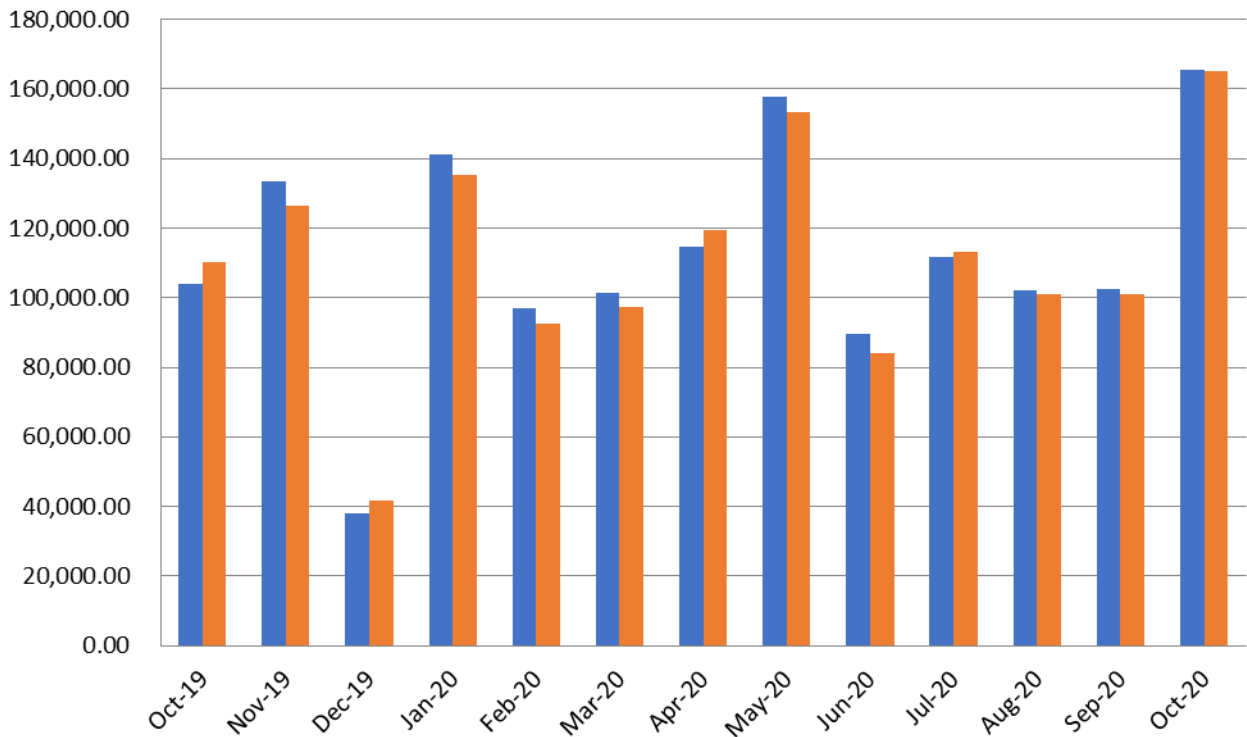


Agency Economic
Report
(Unaudited)

October 2020

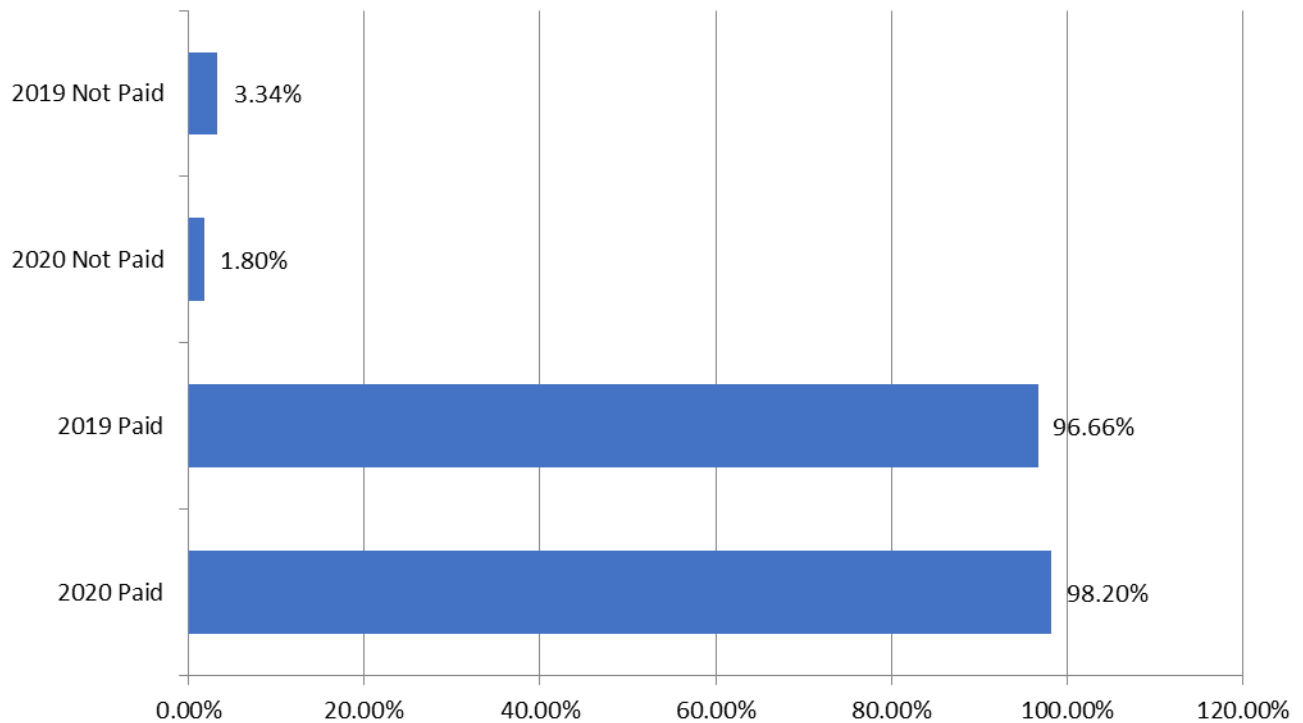
Targeted Case Management Income

TCM Billed vs TCM Payment Received



	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20
Total Payable Billed	104,103.36	133,531.20	38,111.04	141,108.48	96,837.12	101,243.52	114,791.04	157,939.20	89,493.12	111,732.48	102,098.88	102,591.36	165,464.64
Total Payment Received	110,341.44	126,463.68	41,774.40	135,354.24	92,456.64	97,225.92	119,534.40	153,195.84	84,136.32	113,140.80	101,010.24	100,846.08	165,119.04

2020 vs 2019
Percentage Comparison Medicaid Billed vs Medicaid
Paid



Budget vs. Actuals: FY 2020 - FY20 P&L Departments

October 2020

	SB 40 Tax			Services		
	Actual	Budget	Variance	Actual	Budget	Variance
Income						
4000 SB 40 Tax Income	4,278	6,255	(1,977)			0
4500 Services Income			0	184,821	164,879	19,942
Total Income	4,278	6,255	(1,977)	184,821	164,879	19,942
Gross Profit	4,278	6,255	(1,977)	184,821	164,879	19,942
Expenses						
5000 Payroll & Benefits			0	140,581	138,925	1,656
5100 Repairs & Maintenance			0	51	1,510	(1,459)
5500 Contracted Business Services			0	5,995	6,291	(296)
5600 Presentations/Public Meetings			0	193	228	(35)
5700 Office Expenses			0	67	4,177	(4,110)
5800 Other General & Administrative			0	2,020	1,506	514
5900 Utilities			0	(186)	850	(1,036)
6100 Insurance			0	1,555	1,700	(145)
6700 Partnership for Hope	4,368	4,585	(217)			0
6900 Direct Services	19,215	14,707	4,508			0
7100 Housing Programs	5,657	8,158	(2,501)			0
7200 Children's Programs	11,946	17,550	(5,604)			0
7300 Sheltered Employment Programs	22,438	24,150	(1,712)			0
7600 Community Resources	4,948	5,136	(188)			0
7900 Special/Additional Needs	407	6,490	(6,083)			0
Total Expenses	68,979	80,776	(11,797)	150,276	155,187	(4,911)
Net Operating Income	(64,701)	(74,521)	9,820	34,545	9,692	24,853
Other Expenses						
8500 Depreciation			0	3,076	3,250	(174)
Total Other Expenses	0	0	0	3,076	3,250	(174)
Net Other Income	0	0	0	(3,076)	(3,250)	174
Net Income	(64,701)	(74,521)	9,820	31,469	6,442	25,027

Budget Variance Report

Total Income: In October 2020, SB 40 Tax Revenues were lower than projected. Services Program income was higher than projected. Four new Support Coordinators are being trained, and billing capacity is increasing.

Total Expenses: In October 2020, overall SB 40 Tax program expenses were lower than budgeted. Direct Service expenses were higher than budgeted due to higher than anticipated non-Medicaid TCM service billings. It should also be noted OATS invoices for transportation services in October (7600 & 7300 categories) were not received by month end, and spend-down payment requirements (7900 category) are still being waived during the COVID-19 state of emergency. Services Program expenses were lower than budgeted expectations in all categories except for Payroll & Benefits, which is because there is one more Support Coordinator than was originally budgeted in 2020 (total of 10 Support Coordinators currently), and Other G&A expenses, which is due to higher than budgeted Legal/Attorney Fees.

Budget vs. Actuals: FY 2020 - FY20 P&L Departments

January - October, 2020

	SB 40 Tax			Services		
	Actual	Budget	Variance	Actual	Budget	Variance
Income						
4000 SB 40 Tax Income	992,034	982,300	9,734			0
4500 Services Income			0	1,292,466	1,266,275	26,191
Total Income	992,034	982,300	9,734	1,292,466	1,266,275	26,191
Gross Profit	992,034	982,300	9,734	1,292,466	1,266,275	26,191
Expenses						
5000 Payroll & Benefits			0	1,052,911	1,071,218	(18,307)
5100 Repairs & Maintenance			0	6,809	15,100	(8,291)
5500 Contracted Business Services			0	61,253	59,250	2,003
5600 Presentations/Public Meetings			0	3,329	2,280	1,049
5700 Office Expenses			0	48,413	47,770	643
5800 Other General & Administrative			0	23,431	27,671	(4,240)
5900 Utilities			0	6,071	8,500	(2,429)
6100 Insurance			0	15,555	17,000	(1,445)
6700 Partnership for Hope	30,528	33,450	(2,922)			0
6900 Direct Services	122,445	189,167	(66,722)			0
7100 Housing Programs	60,299	81,580	(21,281)			0
7200 Children's Programs	175,352	175,500	(148)			0
7300 Sheltered Employment Programs	205,235	241,500	(36,265)			0
7500 Community Employment Programs	161		161			0
7600 Community Resources	46,313	51,360	(5,047)	0		0
7900 Special/Additional Needs	24,293	64,684	(40,391)			0
Total Expenses	664,626	837,241	(172,615)	1,217,771	1,248,789	(31,018)
Net Operating Income	327,407	145,059	182,348	74,695	17,486	57,209
Other Expenses						
8500 Depreciation			0	30,417	32,500	(2,083)
Total Other Expenses	0	0	0	30,417	32,500	(2,083)
Net Other Income	0	0	0	(30,417)	(32,500)	2,083
Net Income	327,407	145,059	182,348	44,278	(15,014)	59,292

Budget Variance Report

Total Income: As of October 2020, YTD SB 40 Tax Revenues is slightly higher than projected, and Services Program income is slightly higher than projected. It should also be noted that interest rates on the "Sweep" accounts have significantly reduced; however, this reduction has not negatively impacted our overall YTD income. Four new Support Coordinators are being trained, and billing capacity is increasing.

Total Expenses: As of October 2020, overall YTD SB 40 Tax program expenses are lower than budgeted expectations. Please note Special/Additional Needs Expenses are lower because Medicaid Spend-down payments are waived during the COVID-19 pandemic; OATS invoices for transportation services were lower because there was a reduction in services due to COVID-19; Housing Programs expense are lower due to changes in the program guidelines; and the final State FY 2020 TCM Allocation Formula statement reflected no payment was due to DMH (budgeted to be \$82,261). Overall Services Program expenses are lower than projected. Presentation/Public Meetings expenses were higher than budgeted because the December 2019 Holiday Celebration was postponed until January; Office expenses are higher than budgeted because of the Camdenton office workstation expansion into the conference room, as well as PPE purchases; and Contracted Business Services are higher due to additional IT contractor service and other IT-related purchases.

Balance Sheet

As of October 31, 2020

	SB 40 Tax	Services
ASSETS		
Current Assets		
Bank Accounts		
1000 Bank Accounts		
1005 SB 40 Tax Bank Accounts		
1010 SB 40 Tax Account (County Tax Funds) - First Nat'l Bank	0	0
1015 SB 40 Tax Reserve Account (County Tax Funds) - Central Bank	229	
1020 SB 40 Tax Certificate of Deposit	0	
1025 SB 40 Tax - Bank of Sullivan	802,171	0
1030 SB 40 Tax Reserve - Bank of Sullivan	0	
Total 1005 SB 40 Tax Bank Accounts	802,400	0
1050 Services Bank Accounts		
1055 Services Account - Oak Star Bank (Formerly 1st Nat'l Bank)	0	0
1060 Services Certificate of Deposit		0
1075 Services Account - Bank of Sullivan		339,008
Total 1050 Services Bank Accounts	0	339,008
Total 1000 Bank Accounts	802,400	339,008
Total Bank Accounts	802,400	339,008
Accounts Receivable		
1200 Services		
1210 Medicaid Direct Service		57,897
1215 Non-Medicaid Direct Service		19,215
Total 1200 Services	0	77,112
1300 Property Taxes		
1310 Property Tax Receivable	893,401	
1315 Allowance for Doubtful Accounts	(17,156)	
Total 1300 Property Taxes	876,245	0
Total Accounts Receivable	876,245	77,112
Other Current Assets		
1389 BANK ERROR Claim Confirmations (A/R)	0	0
1399 TCM Remittance Advices (In-Transit Payments)	0	0
1400 Other Current Assets		
1410 Other Deposits	0	
1430 Deferred Outflows Related to Pensions		52,933
1435 Net Pension Asset (Liability)		(8,677)
Total 1400 Other Current Assets	0	44,256
1450 Prepaid Expenses		0
1455 Prepaid-Insurance	0	9,786
Total 1450 Prepaid Expenses	0	9,786
Total Other Current Assets	0	54,042
Total Current Assets	1,678,645	470,162
Fixed Assets		
1500 Fixed Assets		
1510 100 Third Street Land		47,400
1511 Keystone Land		14,000
1520 100 Third Street Building		431,091
1521 Keystone		163,498

1525 Accumulated Depreciation - 100 Third Street		(165,118)
1526 Accumulated Depreciation - Keystone		(26,972)
1530 100 Third Street Remodeling		164,157
1531 Keystone Remodeling		110,596
1532 Osage Beach Office Remodeling		4,225
1535 Acc Dep - Remodeling - 100 Third Street		(65,542)
1536 Acc Dep - Remodeling - Keystone		(14,286)
1537 Acc Dep - Remodeling - Osage Beach Office		(2,237)
1540 Equipment		48,579
1545 Accumulated Depreciation - Equipment		(39,812)
1550 Vehicles		6,740
1555 Accumulated Depreciation - Vehicles		(6,740)
Total 1500 Fixed Assets	0	669,578
Total Fixed Assets	0	669,578
TOTAL ASSETS	1,678,645	1,139,740
LIABILITIES AND EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
1900 Accounts Payable	9,765	766
Total Accounts Payable	9,765	766
Other Current Liabilities		
2000 Current Liabilities		
2005 Accrued Accounts Payable	0	0
2006 DMH Payable	0	
2007 Non-Medicaid Payable	19,215	
2010 Accrued Payroll Expense	0	0
2015 Accrued Compensated Absences	0	(2,157)
2025 Prepaid Services	0	
2030 Deposits	0	0
2050 Prepaid Tax Revenue	0	
2055 Deferred Inflows - Property Taxes	951,336	
2060 Payroll Tax Payable		0
2061 Federal W / H Tax Payable	0	0
2062 Social Security Tax Payable	0	62
2063 Medicare Tax Payable	0	0
2064 MO State W / H Tax Payable	0	3,312
2065 FFCRA Federal W/H Tax Credit		1,022
2066 FFCRA Health Insurance Credit		240
Total 2060 Payroll Tax Payable	0	4,636
2070 Payroll Clearing		
2071 AFLAC Pre-tax W / H	0	1,111
2072 AFLAC Post-tax W / H	0	167
2073 Vision Insurance W / H	0	9
2074 Health Insurance W / H	0	28
2075 Dental Insurance W / H	0	(140)
2076 Savings W / H		0
2078 Misc W / H		0
2079 Other W / H		0
Total 2070 Payroll Clearing	0	1,175
2090 Deferred Inflows		12,452
Total 2000 Current Liabilities	970,552	16,106

Total Other Current Liabilities	970,552	16,106
Total Current Liabilities	980,317	16,872
Total Liabilities	980,317	16,872
Equity		
3000 Restricted SB 40 Tax Fund Balances		
3001 Operational	0	
3005 Operational Reserves	244,565	
3010 Transportation	51,183	
3015 New Programs	0	
3030 Special Needs	0	
3040 Sheltered Workshop	95,700	
3045 Traditional Medicaid Match	0	
3050 Partnership for Hope Match	4,107	
3055 Building/Remodeling/Expansion	0	
3065 Legal	0	
3070 TCM	45,910	
3075 Community Resource	0	
Total 3000 Restricted SB 40 Tax Fund Balances	441,465	0
3500 Restricted Services Fund Balances		
3501 Operational		35,970
3505 Operational Reserves		200,000
3510 Transportation		0
3515 New Programs		0
3530 Special Needs		0
3550 Partnership for Hope Match		0
3555 Building/Remodeling/Expansion		84,633
3560 Sponsorships		0
3565 Legal		0
3575 Community Resources		0
3599 Other		669,578
Total 3500 Restricted Services Fund Balances	0	990,181
3900 Unrestricted Fund Balances	(182,793)	(33,109)
3950 Prior Period Adjustment	0	0
3999 Clearing Account	126,576	107,191
Net Income	327,407	44,278
Total Equity	712,655	1,108,541
TOTAL LIABILITIES AND EQUITY	1,692,972	1,125,413

Statement of Cash Flows

October 2020

	SB 40 Tax	Services
OPERATING ACTIVITIES		
Net Income	(64,701)	31,469
Adjustments to reconcile Net Income to Net Cash provided by operations:		
1210 Services:Medicaid Direct Service		(12,727)
1215 Services:Non-Medicaid Direct Service		15,604
1455 Prepaid Expenses:Prepaid-Insurance		2,523
1525 Fixed Assets:Accumulated Depreciation - 100 Third Street		898
1526 Fixed Assets:Accumulated Depreciation - Keystone		341
1535 Fixed Assets:Acc Dep - Remodeling - 100 Third Street		684
1536 Fixed Assets:Acc Dep - Remodeling - Keystone		451
1537 Fixed Assets:Acc Dep - Remodeling - Osage Beach Office		249
1545 Fixed Assets:Accumulated Depreciation - Equipment		454
1900 Accounts Payable	(11,813)	(7,163)
2007 Current Liabilities:Non-Medicaid Payable	(15,604)	
2061 Current Liabilities:Payroll Tax Payable:Federal W / H Tax Payable		0
2062 Current Liabilities:Payroll Tax Payable:Social Security Tax Payable		1
2063 Current Liabilities:Payroll Tax Payable:Medicare Tax Payable		0
2064 Current Liabilities:Payroll Tax Payable:MO State W / H Tax Payable		1,168
2065 Current Liabilities:Payroll Tax Payable:FFCRA Federal W/H Tax Credit		22
2066 Current Liabilities:Payroll Tax Payable:FFCRA Health Insurance Credit		5
2071 Current Liabilities:Payroll Clearing:AFLAC Pre-tax W / H		834
2072 Current Liabilities:Payroll Clearing:AFLAC Post-tax W / H		164
2073 Current Liabilities:Payroll Clearing:Vision Insurance W / H		56
2075 Current Liabilities:Payroll Clearing:Dental Insurance W / H		204
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	(27,417)	3,767
Net cash provided by operating activities	(92,118)	35,236
FINANCING ACTIVITIES		
3599 Restricted Services Fund Balances:Other		(3,076)
3999 Clearing Account		3,076
Net cash provided by financing activities	0	0
Net cash increase for period	(92,118)	35,236
Cash at beginning of period	894,548	303,743
Cash at end of period	802,429	338,978

Statement of Cash Flows

January - October, 2020

	SB 40 Tax	Services
OPERATING ACTIVITIES		
Net Income	327,407	44,278
Adjustments to reconcile Net Income to Net Cash provided by operations:		
1210 Services:Medicaid Direct Service		(51,676)
1215 Services:Non-Medicaid Direct Service		181
1455 Prepaid Expenses:Prepaid-Insurance		13,043
1525 Fixed Assets:Accumulated Depreciation - 100 Third Street		8,981
1526 Fixed Assets:Accumulated Depreciation - Keystone		3,406
1535 Fixed Assets:Acc Dep - Remodeling - 100 Third Street		6,743
1536 Fixed Assets:Acc Dep - Remodeling - Keystone		4,508
1537 Fixed Assets:Acc Dep - Remodeling - Osage Beach Office		2,237
1545 Fixed Assets:Accumulated Depreciation - Equipment		4,542
1900 Accounts Payable	(8,555)	(13,666)
2007 Current Liabilities:Non-Medicaid Payable	(181)	
2061 Current Liabilities:Payroll Tax Payable:Federal W / H Tax Payable		0
2062 Current Liabilities:Payroll Tax Payable:Social Security Tax Payable		62
2063 Current Liabilities:Payroll Tax Payable:Medicare Tax Payable		0
2064 Current Liabilities:Payroll Tax Payable:MO State W / H Tax Payable		1,337
2065 Current Liabilities:Payroll Tax Payable:FFCRA Federal W/H Tax Credit		1,022
2066 Current Liabilities:Payroll Tax Payable:FFCRA Health Insurance Credit		240
2071 Current Liabilities:Payroll Clearing:AFLAC Pre-tax W / H		775
2072 Current Liabilities:Payroll Clearing:AFLAC Post-tax W / H		157
2073 Current Liabilities:Payroll Clearing:Vision Insurance W / H		47
2075 Current Liabilities:Payroll Clearing:Dental Insurance W / H		99
2076 Current Liabilities:Payroll Clearing:Savings W / H		0
2078 Current Liabilities:Payroll Clearing:Misc W / H		0
Total Adjustments to reconcile Net Income to Net Cash provided by operations:	(8,736)	(17,961)
Net cash provided by operating activities	318,671	26,317
INVESTING ACTIVITIES		
1530 Fixed Assets:100 Third Street Remodeling		(9,453)
1532 Fixed Assets:Osage Beach Office Remodeling		(4,225)
Net cash provided by investing activities	0	(13,678)
FINANCING ACTIVITIES		
3005 Restricted SB 40 Tax Fund Balances:Operational Reserves	11,269	
3010 Restricted SB 40 Tax Fund Balances:Transportation	6,563	
3040 Restricted SB 40 Tax Fund Balances:Sheltered Workshop	32,901	
3050 Restricted SB 40 Tax Fund Balances:Partnership for Hope Match	1,095	
3070 Restricted SB 40 Tax Fund Balances:TCM	15,839	
3501 Restricted Services Fund Balances:Operational		35,970
3555 Restricted Services Fund Balances:Building/Remodeling/Expansion		51,071
3575 Restricted Services Fund Balances:Community Resources		(5,000)
3599 Restricted Services Fund Balances:Other		(16,739)
3900 Unrestricted Fund Balances	(121,059)	(102,408)
3999 Clearing Account		32,106
Net cash provided by financing activities	(53,392)	(5,000)
Net cash increase for period	265,279	7,639
Cash at beginning of period	537,150	331,340
Cash at end of period	802,429	338,978

Check Detail - SB 40 Tax Account

October 2020

1025 SB 40 Tax - Bank of Sullivan

Date	Transaction Type	Num	Name	Amount
10/02/2020	Bill Payment (Check)	5837	OATS, Inc.	(9,913.10)
10/16/2020	Bill Payment (Check)	5838	Wonderment Service Dog Placement Program	(11,375.82)
10/16/2020	Bill Payment (Check)	5839	Childrens Learning Center	(12,206.24)
10/16/2020	Bill Payment (Check)	5840	Bankcard Center	(118.00)
10/16/2020	Bill Payment (Check)	5841	Peak Sport and Spine	(225.00)
10/16/2020	Bill Payment (Check)	5842	Skillset LLC	(63.81)
10/16/2020	Bill Payment (Check)	5843	Lake Area Industries	(17,650.00)
10/16/2020	Bill Payment (Check)	5844	Camdenton Apartments dba Lauren's Place	(284.00)
10/16/2020	Bill Payment (Check)	5845	David A Schlenfort	(276.00)
10/16/2020	Bill Payment (Check)	5846	Kyle LaBrue	(976.00)
10/16/2020	Bill Payment (Check)	5847	Revelation Construction & Development, LLC	(378.00)
10/16/2020	Bill Payment (Check)	5848	Revelation Construction & Development, LLC	(460.00)
10/16/2020	Bill Payment (Check)	5849	Revelation Construction & Development, LLC	(581.00)
10/16/2020	Bill Payment (Check)	5850	Revelation Construction & Development, LLC	(761.00)
10/16/2020	Bill Payment (Check)	5851	Revelation Construction & Development, LLC	(794.00)
10/16/2020	Bill Payment (Check)	5852	Revelation Construction & Development, LLC	(838.00)
10/23/2020	Bill Payment (Check)	5853	Camden County Senate Bill 40 Board	0.00
10/23/2020	Bill Payment (Check)	5854	Camden County Senate Bill 40 Board	(34,819.20)
10/27/2020	Bill Payment (Check)	5855	DMH Local Tax Matching Fund	(4,368.19)
10/27/2020	Bill Payment (Check)	5856	David A Schlenfort	(309.00)

Check Detail - Services Account

October 2020

1075 Services Account - Bank of Sullivan

Date	Transaction Type	Num	Name	Amount
10/01/2020	Bill Payment (Check)	2474	Bankcard Center	(1,418.46)
10/02/2020	Expense	153503	Connie L Baker	(1,193.00)
10/02/2020	Expense	153504	Rachel K Baskerville	(1,310.52)
10/02/2020	Expense	153505	Jeanna K Booth	(1,277.57)
10/02/2020	Expense	153506	Cynthia Brown	(1,215.91)
10/02/2020	Expense	153507	Elizabeth L Chambers	(1,041.04)
10/02/2020	Expense	153508	Lori Cornwell	(1,466.01)
10/02/2020	Expense	153509	Stephanie E Enoch	(1,267.33)
10/02/2020	Expense	153510	Teri Guttman	(1,430.68)
10/02/2020	Expense	153511	Ryan Johnson	(1,583.88)
10/02/2020	Expense	153512	Micah J Joseph	(1,407.23)
10/02/2020	Expense	153513	Jennifer Lyon	(1,241.78)
10/02/2020	Expense	153514	Annie Meyer	(1,382.48)

10/02/2020	Expense	153515	Christina R. Mitchell	(900.19)
10/02/2020	Expense	153516	Mary P Petersen	(1,182.66)
10/02/2020	Expense	153517	Sylvia M Santon	(1,039.62)
10/02/2020	Expense	153518	Patricia L. Strouse	(1,128.23)
10/02/2020	Expense	153519	Eddie L Thomas	(2,648.99)
10/02/2020	Expense	153520	Marcie L. Vansyoc	(1,472.20)
10/02/2020	Expense	153521	Jami Weisenborn	(1,322.84)
10/02/2020	Expense	153522	Nicole M Whittle	(1,637.78)
10/02/2020	Expense	10/02/2020	Internal Revenue Service	(7,566.29)
10/02/2020	Bill Payment (Check)	2475	Edelman-Lyon Company	(191.00)
10/02/2020	Bill Payment (Check)	2476	AT&T	(116.19)
10/02/2020	Bill Payment (Check)	2477	Republic Services #435	(65.19)
10/02/2020	Bill Payment (Check)	2478	Happy Maids Cleaning Services LLC	(150.00)
10/02/2020	Bill Payment (Check)	2479	MSW Interactive Designs LLC	(30.00)
10/02/2020	Bill Payment (Check)	2480	SUMNERONE	(1,505.32)
10/02/2020	Bill Payment (Check)	2481	Aflac	(720.55)
10/02/2020	Bill Payment (Check)	2482	Annie Meyer	(50.00)
10/02/2020	Bill Payment (Check)	2483	Connie L Baker	(69.80)
10/02/2020	Bill Payment (Check)	2484	Eddie L Thomas	(50.00)
10/02/2020	Bill Payment (Check)	2485	Jami Weisenborn	(50.00)
10/02/2020	Bill Payment (Check)	2486	Jennifer Lyon	(50.00)
10/02/2020	Bill Payment (Check)	2487	Linda Simms	(174.26)
10/02/2020	Bill Payment (Check)	2488	Marcie L. Vansyoc	(81.78)
10/02/2020	Bill Payment (Check)	2489	Mary P Petersen	(50.00)
10/02/2020	Bill Payment (Check)	2490	Micah J Joseph	(73.44)
10/02/2020	Bill Payment (Check)	2491	Nicole M Whittle	(50.00)
10/02/2020	Bill Payment (Check)	2492	Rachel K Baskerville	(50.00)
10/02/2020	Bill Payment (Check)	2493	Ryan Johnson	(59.68)
10/02/2020	Bill Payment (Check)	2494	Sylvia M Santon	(53.30)
10/02/2020	Bill Payment (Check)	2495	Teri Guttman	(50.00)
10/02/2020	Bill Payment (Check)	2496	Linda Simms	(1,433.70)
10/08/2020	Bill Payment (Check)	2497	Laclede County Record	0.00
10/08/2020	Bill Payment (Check)	2498	AT&T	(93.50)
10/08/2020	Bill Payment (Check)	2499	VERIZON	(160.41)
10/08/2020	Bill Payment (Check)	2500	Charter Business	(574.87)
10/08/2020	Bill Payment (Check)	2501	Camden County PWSD #2	(63.86)
10/08/2020	Bill Payment (Check)	2502	Janine's Flowers	(42.00)
10/08/2020	Bill Payment (Check)	2503	Ameren Missouri	(163.87)
10/08/2020	Bill Payment (Check)	2504	LaClede Electric Cooperative	(450.19)
10/08/2020	Bill Payment (Check)	2505	Refills Ink	(119.98)
10/08/2020	Bill Payment (Check)	2506	Direct Service Works	(795.00)
10/08/2020	Bill Payment (Check)	2507	All Seasons Services	(480.00)
10/09/2020	Bill Payment (Check)	2508	Jeanna K Booth	(50.00)
10/09/2020	Bill Payment (Check)	2509	Lori Cornwell	(50.00)
10/09/2020	Bill Payment (Check)	2510	SUMNERONE	(4,358.00)
10/09/2020	Bill Payment (Check)	2511	Happy Maids Cleaning Services LLC	(100.00)
10/09/2020	Bill Payment (Check)	2512	Lake Sun Leader	(99.00)
10/15/2020	Expense	153538	Sylvia M Santon	(864.62)
10/15/2020	Expense	153539	Patricia L. Strouse	(1,125.34)
10/15/2020	Expense	153540	Eddie L Thomas	(2,648.99)

10/15/2020	Expense	153541	Marcie L. Vansyoc	(1,472.20)
10/15/2020	Expense	153542	Jami Weisenborn	(1,394.95)
10/15/2020	Expense	153543	Nicole M Whittle	(1,622.74)
10/15/2020	Bill Payment (Check)	2513	City Of Camdenton	(63.33)
10/15/2020	Bill Payment (Check)	2514	Ezard's, Inc.	(1,348.83)
10/15/2020	Bill Payment (Check)	2515	Office Business Equipment	(40.00)
10/15/2020	Bill Payment (Check)	2516	Happy Maids Cleaning Services LLC	(50.00)
10/15/2020	Bill Payment (Check)	2517	Linda Simms	(1,388.36)
10/16/2020	Expense	153524	Connie L Baker	(1,193.00)
10/16/2020	Expense	153525	Rachel K Baskerville	(1,175.37)
10/16/2020	Expense	153526	Jeanna K Booth	(1,213.92)
10/16/2020	Expense	153527	Cynthia Brown	(1,353.78)
10/16/2020	Expense	153528	Elizabeth L Chambers	(1,041.34)
10/16/2020	Expense	153529	Lori Cornwell	(1,466.00)
10/16/2020	Expense	153530	Stephanie E Enoch	(1,256.67)
10/16/2020	Expense	153531	Teri Guttman	(1,350.24)
10/16/2020	Expense	153532	Ryan Johnson	(1,583.89)
10/16/2020	Expense	153533	Micah J Joseph	(1,407.24)
10/16/2020	Expense	153534	Jennifer Lyon	(1,241.78)
10/16/2020	Expense	153535	Annie Meyer	(1,363.57)
10/16/2020	Expense	153536	Christina R. Mitchell	(526.82)
10/16/2020	Expense	153537	Mary P Petersen	(1,168.86)
10/16/2020	Bill Payment (Check)	2518	Bankcard Center	(373.92)
10/16/2020	Expense	10/16/2020	Internal Revenue Service	(7,379.95)
10/23/2020	Bill Payment (Check)	2519	Cynthia Brown	(50.00)
10/23/2020	Bill Payment (Check)	2520	Staples Advantage	(92.62)
10/23/2020	Bill Payment (Check)	2521	Camden County Fire & Safety	(40.00)
10/23/2020	Bill Payment (Check)	2522	Bryan Cave Leighton Paisner LLP	(1,900.00)
10/23/2020	Bill Payment (Check)	2523	MO Consolidated Health Care	(16,256.82)
10/23/2020	Bill Payment (Check)	2524	Refills Ink	(64.99)
10/23/2020	Bill Payment (Check)	2525	Delta Dental of Missouri	(528.96)
10/23/2020	Bill Payment (Check)	2526	Missouri Dept of Revenue	(2,170.00)
10/23/2020	Bill Payment (Check)	2527	Mo Division Of Employment Security	(73.45)
10/30/2020	Expense	153545	Connie L Baker	(1,193.00)
10/30/2020	Expense	153546	Rachel K Baskerville	(1,286.99)
10/30/2020	Expense	153547	Jeanna K Booth	(1,277.58)
10/30/2020	Expense	153548	Cynthia Brown	(1,459.02)
10/30/2020	Expense	153549	Elizabeth L Chambers	(1,041.34)
10/30/2020	Expense	153550	Lori Cornwell	(1,466.00)
10/30/2020	Expense	153551	Stephanie E Enoch	(1,380.60)
10/30/2020	Expense	153552	Teri Guttman	(1,391.67)
10/30/2020	Expense	153553	Ryan Johnson	(1,583.89)
10/30/2020	Expense	153554	Micah J Joseph	(1,432.73)
10/30/2020	Expense	153555	Jennifer Lyon	(1,241.78)
10/30/2020	Expense	153556	Annie Meyer	(1,432.09)
10/30/2020	Expense	153557	Christina R. Mitchell	(1,179.95)
10/30/2020	Expense	153558	Mary P Petersen	(1,292.55)
10/30/2020	Expense	153559	Sylvia M Santon	(1,039.62)
10/30/2020	Expense	153560	Patricia L. Strouse	(1,139.45)
10/30/2020	Expense	153561	Eddie L Thomas	(2,648.99)

10/30/2020	Expense	153562	Marcie L. Vansyoc	(1,472.20)
10/30/2020	Expense	153563	Jami Weisenborn	(1,409.28)
10/30/2020	Expense	153564	Nicole M Whittle	(1,972.41)
10/30/2020	Expense	10/30/2020	Internal Revenue Service	(7,909.15)
10/30/2020	Expense	OCTOBER 2020	Lagers	(8,355.31)
10/30/2020	Bill Payment (Check)	2528	Christina R. Mitchell	(71.80)
10/30/2020	Bill Payment (Check)	2529	Patricia L. Strouse	(50.00)
10/30/2020	Bill Payment (Check)	2530	Stephanie E Enoch	(50.00)
10/30/2020	Bill Payment (Check)	2531	WCA Waste Corporation	(25.00)
10/30/2020	Bill Payment (Check)	2532	AT&T	(118.11)
10/30/2020	Bill Payment (Check)	2533	Principal Life Ins	(299.52)
10/30/2020	Bill Payment (Check)	2534	Lake Area Industries	(50.00)
10/30/2020	Bill Payment (Check)	2535	Republic Services #435	(65.04)
10/30/2020	Bill Payment (Check)	2536	Summit Natural Gas of Missouri, Inc.	(27.69)
10/30/2020	Bill Payment (Check)	2537	Office Business Equipment	(421.58)
10/30/2020	Bill Payment (Check)	2538	Webster Plumbing	(110.00)
10/30/2020	Bill Payment (Check)	2539	MSW Interactive Designs LLC	(30.00)
10/30/2020	Bill Payment (Check)	2540	SUMNERONE	(1,599.11)
10/30/2020	Bill Payment (Check)	2541	Happy Maids Cleaning Services LLC	(50.00)
10/30/2020	Bill Payment (Check)	2542	All Seasons Services	(240.00)
10/30/2020	Bill Payment (Check)	2543	Elizabeth L Chambers	(50.00)
10/30/2020	Bill Payment (Check)	2544	Eddie L Thomas	(50.00)
10/30/2020	Bill Payment (Check)	2545	Jeanna K Booth	(63.63)
10/30/2020	Bill Payment (Check)	2546	Linda Simms	(1,485.94)
10/30/2020	Bill Payment (Check)	2547	Marcie L. Vansyoc	(75.94)
10/30/2020	Bill Payment (Check)	2548	Rachel K Baskerville	(50.00)
10/30/2020	Bill Payment (Check)	2549	Teri Guttman	(50.00)

September 2020 Credit Card Statement

CENTRAL BANK

BL ACCT 00000256-10000000
 CAMDEN CO DD RES
 Account Number: ##### 5386
 Page 1 of 3



SCORECARD

Bonus Points
 Available
 52,255

Account Summary

Billing Cycle		10/04/2020
Days In Billing Cycle		30
Previous Balance		\$1,568.46
Purchases	+	\$479.15
Cash	+	\$0.00
Balance Transfers	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$150.00
Other Charges	+	\$0.00
Finance Charges	+	\$12.77

NEW BALANCE \$1,910.38

Credit Summary

Total Credit Line	\$10,000.00
Available Credit Line	\$8,089.62
Available Cash	\$6,000.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries



Call us at: (800) 445-9272
 Lost or Stolen Card: (866) 839-3485



Go to www.bankcardcenter.net



Write us at PO BOX 779, JEFFERSON CTY, MO
 65102-0779

Payment Summary

NEW BALANCE	\$1,910.38
MINIMUM PAYMENT	\$58.00
PAYMENT DUE DATE	11/02/2020

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY \$137.23-

Trans Date	Post Date	Reference Number	Transaction Description	Amount
09/28	09/28	00501246	PAYMENT - THANK YOU	\$150.00-
10/04	10/04	75475780278343278464007	INTEREST CHARGE PURCHASE	\$12.77

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

CENTRAL BANK
 PO BOX 779
 JEFFERSON CTY MO 65102-0779

Account Number

5386

Check box to indicate
 name/address change ☐
 on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
10/04/20	\$1,910.38	\$58.00	11/02/20

\$



BL ACCT 00000256-10000000
 CAMDEN CO DD RES
 PO BOX 722
 CAMDENTON MO 65020-0722



11638

MAKE CHECK PAYABLE TO:



BANKCARD SERVICES
 PO BOX 8000
 JEFFERSON CTY MO 65102-8000

5475780000055386 00005800 00191038

IMPORTANT INFORMATION

Finance Charge Calculation Methods and Computation of Average Daily Balance Subject to Finance Charge: The Finance Charge Calculation Method applicable to your account for Cash Advances and Credit Purchases of goods and services that you obtain through the use of your card is specified on the front side of this statement and explained below:

Method A - Average Daily Balance (including current transactions): The Finance Charge on purchases begins on the date the transaction posted to your account. The Finance Charge on Cash Advances begins on the date you obtained the cash advance, or the first day of the billing cycle within which it is posted to your account, whichever is later. There is no grace period.

The Finance Charges for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of your account. To get the average daily balance, we take the beginning balance of your account each day, add any new purchases or cash advances, and subtract any payments, credits, non-accruing fees, and unpaid finance charges. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Method E - Average Daily Balance (excluding current transactions): To avoid incurring an additional Finance Charge on the balance of purchases (and cash advances if Method E is specified as applicable to cash advances) reflected on your monthly statement, you must pay the New Balance shown on your monthly statement on or before the Payment Due Date. The grace period for the New Balance of purchases extends to the Payment Due Date.

The Finance Charges for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of purchases (and if applicable, cash advances). To get the average daily balance, we take the beginning balance of your account each day and subtract any payments, credits, non-accruing fees, and unpaid finance charges. We do not add in any new purchases or cash advances. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Method G - Average Daily Balance (including current transactions): To avoid incurring an additional Finance Charge on the balance of purchases (and cash advances, if Method G is specified as applicable to cash advances) reflected on your monthly statement and, on any new purchases (and if applicable, cash advances) appearing on your next monthly statement, you must pay the New Balance, shown on your monthly statement, on or before the Payment Due Date. The grace period for the New Balance of purchases extends to the Payment Due Date.

The Finance Charges for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of purchases (and if applicable, cash advances). To get the average daily balance, we take the beginning balance of your account each day, add any new purchases or cash advances, and subtract any payments, credits, non-accruing fees, and unpaid finance charges. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Payment-Crediting and Credit Balance: Payments received at the location specified on the front of the statement after the phrase "MAKE CHECK PAYABLE TO" will be credited to the account specified on the payment coupon as of the date of receipt. Payments received at a different location or payments that do not conform to the requirements set forth on or with the periodic statement (e.g. missing payment stub, payment envelope other than as provided with your statement, multiple checks or multiple coupons in the same envelope) may be subject to delay in crediting, but shall be credited within five days of receipt. If there is a credit balance due on your account, you may request in writing, a full refund. Submit your request to the Account Inquiries address on the front of this statement.

By sending your check, you are authorizing the use of the information on your check to make a one-time electronic debit from the account on which the check is drawn. This electronic debit, which may be posted to your account as early as the date your check is received, will be only for the amount of your check. The original check will be destroyed and we will retain the image in our records. If you have questions please call the customer service number on the front of this billing statement.

Closing Date: The closing date is the last day of the billing cycle; all transactions received after the closing date will appear on your next statement.

Annual Fee: If your account has been assessed an annual fee, you may avoid paying this annual fee by sending written notification of termination within 30 days following the mailing date of this bill. Submit your request to the Account Inquiries address on the front of this statement. You may use your card(s) during this 30 day period but immediately thereafter must send your card(s), which you have cut in half, to this same address.

Negative Credit Reports: You are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations.

BILLING RIGHTS SUMMARY

In Case of Errors or Inquiries About Your Bill: If you suspect there is an error on your account or you need information about a transaction on your bill, send your written inquiry to the Account Inquiries address on the front of this statement within 60 days of the date of the statement containing the transaction in question. You may telephone us, however a written request is required to preserve your rights.

In your letter, give us the following information:

- ♦ Your name and account number.
- ♦ The dollar amount of the suspected error.
- ♦ Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Please provide a legal document evidencing your name change, such as a court document.
Please use blue or black ink to complete form

NAME CHANGE

Last

First

Middle

ADDRESS CHANGE

Street

City

State

ZIP Code

Home Phone () -

Business Phone () -

Cell Phone () -

E-mail Address

SIGNATURE REQUIRED

TO AUTHORIZE CHANGES Signature



Cardholder Account Summary				
EDDIE THOMAS ##### 0953		Payments & Other Credits \$0.00	Purchases & Other Charges \$125.80	Cash Advances \$0.00
				Total Activity \$125.80

Cardholder Account Detail				
Trans Date	Post Date	Plan Name	Reference Number	Description
09/22	09/24	PBUS01	85180890267980176657391	Association People Supp 3012790060 MD
09/25	09/28	PBUS01	15270210272000028157540	MSFT * E0100C7KBB MSBILL.INFO WA
				Amount
				\$120.00
				-\$5.80

Cardholder Account Summary				
LINDA SIMMS ##### 0961		Payments & Other Credits \$0.00	Purchases & Other Charges \$138.39	Cash Advances \$0.00
				Total Activity \$138.39

Cardholder Account Detail				
Trans Date	Post Date	Plan Name	Reference Number	Description
09/09	09/10	PBUS01	02305370254000457508826	USPS PO 2860360829 OSAGE BEACH MO
09/10	09/11	PBUS01	55547530254286933200014	LEBANON DAILY RECORD 4175329131 MO
09/25	09/25	PBUS01	55432860269200164866908	AMZN Mktp US*M47WB9VZO Amzn.com/bill WA
09/26	09/28	PBUS01	55483820271400007761492	WAL-MART #0815 OSAGE BEACH MO
				Amount
				\$7.60
				\$93.54
				\$7.99
				\$29.26

Cardholder Account Summary				
CONNIE L BAKER ##### 1859		Payments & Other Credits \$0.00	Purchases & Other Charges \$214.96	Cash Advances \$0.00
				Total Activity \$214.96

Cardholder Account Detail				
Trans Date	Post Date	Plan Name	Reference Number	Description
09/10	09/11	PBUS01	02305370255000467693039	USPS PO 2812420020 CAMDENTON MO
09/24	09/25	PBUS01	02305370269000447569485	USPS PO 2812420020 CAMDENTON MO
09/29	09/30	PBUS01	55483820274400008370456	WAL-MART #0089 CAMDENTON MO
09/30	10/01	PBUS01	25140520275000012100049	FAMILY EYECARE ASSOC CAMDENTON MO
				Amount
				\$42.45
				\$34.75
				\$19.76
				\$118.00

Additional Information About Your Account

MANAGE YOUR CARD ACCOUNT ONLINE. IT'S FREE! IT'S EASY! SIMPLY GO TO WWW.BANKCARDCENTER.NET AND ENROLL IN OUR ONLINE SERVICE. YOU CAN REVIEW ACCOUNT INFORMATION, TRACK SPENDING, SET ALERT NOTIFICATIONS, DOWNLOAD FILES, AND MUCH MORE. MANAGING YOUR ACCOUNT IS FAST, SECURE AND EASY. ENROLL TODAY!

ScoreCard Bonus Points Information as of 10/02/2020					
SCORECARD	Beginning Balance	Points Earned	Points Adjusted	Points Redeemed	Ending Balance
	51,625	630	0	0	52,255

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
Purchases PBUS01 001	PURCHASE	E	\$1,533.46	0.83250%(M)	9.9900%(V)	\$12.77	\$0.00	9.9931%	\$1,910.38
Cash CBUS01 001	CASH	A	\$0.00	2.08250%(M)	24.9900%(V)	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily ** includes cash advance and foreign currency fees ¹ FCM = Finance Charge Method (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.							Days In Billing Cycle: 30 APR = Annual Percentage Rate		

APSE

Invoice



EIN: 54-1470501
7361 Calhoun Place
Suite 680
Rockville, MD 20855
301-279-0060
www.apse.org
(file:///C:/Users/MsWin7pro/Desktop/www.apse.org)

Date	Invoice #
9/22/2020	300004141

Bill To

Eddie Thomas
Camden County Developmental Disability
Resources
PO Box 722
Camdenton, MO 65020
United States

Member Information

Mr. Ed Thomas
Camden County Developmental Disability
Resources
PO Box 722
Camdenton, MO 65020
United States

PO	Terms	Due Date
	Due on receipt	9/22/2020

Date	Description	Amount
9/22/2020	Professional Membership	\$120.00
	Total	\$120.00

Payments/Refunds

Date	Description	Amount
9/22/2020	Payment via Credit Card (using card xxxxxxxxxxxx0953) Applied to invoice on 9/22/2020 12:37:27 PM	(\$120.00)
	Total Payments/Refunds	(\$120.00)

Code: 5830
Services (Tem Class)



Invoice

September 2020
Invoice Date: 09/27/2020
Invoice Number: E0100C7KBB
Due Date: 10/27/2020

5.80 USD

Sold-To

Camden County Developmental Disability Resources
100 Third St.
P.O. Box 722
Camdenton MO 65020
United States

Bill-To

Camden County Developmental Disability Resources
PO Box 722
Camdenton mo 65020
United States

Service Usage Address

Camden County Developmental Disability Resources
100 Third St.
P.O. Box 722
Camdenton MO 65020
United States

Order Details

Product:

Online Services

Customer PO Number:

dfd50987-a0e6-4f45-99b5-eac21ebdb614

Order Number:

08/27/2020 - 09/26/2020

Billing Period:

Net 30

Payment Terms:

Due Date: 10/27/2020

Payment Instructions

Please DO NOT PAY. You will be charged the amount due through your selected method of payment.

Billing Summary

Charges:	5.80
Discounts:	0.00
Credits:	0.00
Tax:	0.00
Total:	5.80

Billing or service question? Call 1-800-865-9408 or visit <https://aka.ms/Office365Billing>.

Microsoft Corporation, One Microsoft Way Redmond, WA 98052 United States

US FEIN 91-1144442



Invoice

September 2020
Invoice Date: 09/27/2020
Invoice Number: E0100C7KBB
Due Date: 10/27/2020

5.80 USD

Office 365 E3

Service Period	Days	Qty	Monthly Price	Charges	Discounts	Credits	SubTotal	Tax %	Tax	Total
09/02/2020 - 10/01/2020	30	24	20.00	-480.00	0.00	0.00	-480.00	0.00 %	0.00	-480.00
09/02/2020 - 10/01/2020	30	24	20.00	480.00	0.00	0.00	480.00	0.00 %	0.00	480.00
08/24/2020 - 09/01/2020	9	24	20.00	139.35	0.00	0.00	139.35	0.00 %	0.00	139.35
08/02/2020 - 09/01/2020	31	23	20.00	-460.00	0.00	0.00	-460.00	0.00 %	0.00	-460.00
08/02/2020 - 08/23/2020	22	23	20.00	326.45	0.00	0.00	326.45	0.00 %	0.00	326.45
SubTotal				5.80	0.00	0.00	5.80		0.00	5.80
Grand Total				5.80	0.00	0.00	5.80		0.00	5.80

Billing or service question? Call 1-800-865-9408 or visit <https://aka.ms/Office365Billing>.

Microsoft Corporation, One Microsoft Way Redmond, WA 98052 United States

US FEIN 91-1144442

7017 1450 0000 2534 1345

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Jefferson City, MO 65105

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.20

Total Postage and Fees \$7.60

Motor Vehicle Bureau
301 West High Street Rm 370
PO Box 100
Jefferson City, MO 65105-0100

Postmark
 Here

09/09/2020

7017145000025341345
 Return Receipt \$2.85
 USPS Return Receipt #
 9590940239188060535448
 Total \$7.60

Grand Total : \$7.60

Credit Card Remitd
 Card Name: MasterCard
 Account #:XXXXXXXXXXXX0961
 Approval #:660240
 Transaction #:585
 AID:AC000000041010
 AL:MasterCard
 PIN:Not Required

\$7.60

Due to limited transportation
 availability as a result of
 nationwide COVID-19 impacts
 package delivery times may be
 extended. Priority Mail Express®
 service will not change.

Text your tracking number to 28777
 (USPS) to get the latest status.
 Standard Message and Data rates may
 apply. You may also visit www.usps.com
 USPS Tracking or call 1-800-222-1811.

MAIL FOR
 VAN TITLE

LINDA
CARD**Merchant: LEBANON DAILY RECORD**100 E COMMERCIAL
LEBANON, MO 65536
US

4175329131

Order Information

Description: AR MICROPHONE AND SOUND& AC REPLACEMENT
Order Number: P.O. Number:
Customer ID: AR Invoice Number: ar

Billing Information

CAMDEN CO DEVELOPMENT DISABILTY

Shipping Information

Shipping: 0.00
Tax: 0.00
Total: **USD 93.54**

Payment Information

Date/Time: 09-Sep-2020 15:22:34 CDT
Transaction ID: 42221800484
Transaction Type: Authorization w/ Auto Capture
Transaction Status: Captured/Pending Settlement
Authorization Code: 62349C
Payment Method: MasterCard XXXX0961



Details for Order #112-7752596-5377831

Print this page for your records.

MICAH LAPTOP

Order Placed: September 24, 2020

Amazon.com order number: 112-7752596-5377831

Order Total: \$7.99

Not Yet Shipped

Items Ordered

	Price
1 of: DisplayPort to DVI DVI-D Single Link Adapter, Benfei Display Port to DVI Converter Male to Female Black Compatible for Lenovo, Dell, HP and Other Brand	\$7.99

Sold by: BenfeiDirect ([seller profile](#))

Condition: New

Shipping Address:

Micah Joseph
5816 OSAGE BEACH PKWY STE 108
OSAGE BEACH, MO 65065-3046
United States

Shipping Speed:

One-Day Shipping

Payment information

Payment Method:

MasterCard | Last digits: 0961

Item(s) Subtotal: \$7.99
Shipping & Handling: \$0.00

Billing address

Linda Simms
5816 OSAGE BEACH PKWY STE 108
OSAGE BEACH, MO 65065-3046
United States

Total before tax: \$7.99
Estimated tax to be collected: \$0.00

Grand Total: \$7.99

To view the status of your order, return to [Order Summary](#).

[Conditions of Use](#) | [Privacy Notice](#) © 1996-2020, Amazon.com, Inc. or its affiliates

Connie's Card



CAMDENTON
625 W US HIGHWAY 54
CAMDENTON, MO 65020-9998
(800)275-8777

09/10/2020 03:48 PM

Product	Qty	Unit Price	Price
Hold Mail Pkup	1		\$0.00
Total			\$0.00

PM 2-Day 1 \$7.50

Lake Ozark, MO 65049
Weight: 0 Lb 8.70 Oz
Expected Delivery Day
Monday 09/14/2020

Certified \$3.55

USPS Certified Mail #
70190160000078147070

Return Receipt \$2.85

USPS Return Receipt #
9590940229877094615327

Total \$13.90

PM 1-Day 1 \$7.50

Saint Peters, MO 63376
Weight: 0 Lb 9.00 Oz
Expected Delivery Day
Friday 09/11/2020

Certified \$3.55

USPS Certified Mail #
70190160000078147124

Return Receipt \$2.85

USPS Return Receipt #
9590940229877094615273

Total \$13.90

PM 2-Day 1 \$8.25

Rolla, MO 65401
Weight: 1 Lb 3.90 Oz
Expected Delivery Day
Monday 09/14/2020

Certified \$3.55

USPS Certified Mail #
70190160000078147117

Return Receipt \$2.85

USPS Return Receipt #
9590940229877094615280

Total \$14.65

Grand Total: \$42.45

Credit Card Remitd
Card Name: MasterCard
Account #: XXXXXXXXXX1859
Approval #: 68343C
Transaction #: 869
AID: A0000000041010
AL: MasterCard
PIN: Not Required

Chip

\$42.45

7019 0160 0000 7814 7070

7019 0160 0000 7814 7124

7019 0160 0000 7814 7117

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$3.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$7.50

Total Postage and Fees \$10.90

\$

Sent

Street

City, State

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10 2020

35020 USPS

SEP 10 2020

Postmark Here

SEP 10

Connie's Cord



CAMDENTON
625 W US HIGHWAY 54
CAMDENTON, MO 65020-9998
(800)275-8777

09/24/2020

04:25 PM

Product	Qty	Unit Price	Price
---------	-----	------------	-------

First-Class Mail® Letter	1		\$0.55
--------------------------	---	--	--------

Climax Springs, MO 65324
Weight: 0 lb 0.60 oz

Estimated Delivery Date
Mon 09/28/2020

Certified Mail® Tracking #: \$3.55

70190160000078146691

Return Receipt Tracking #: \$2.85

9590 9402 2987 7094 6157 54

Total \$6.95

Priority Mail® 2-Day 1			\$7.50
------------------------	--	--	--------

Lake Ozark, MO 65049

Weight: 0 lb 15.00 oz

Expected Delivery Date

Mon 09/28/2020

Certified Mail® Tracking #: \$3.55

70190160000078145038

Return Receipt Tracking #: \$2.85

9590 9402 2987 7094 6152 59

Total \$13.90

Priority Mail® 2-Day 1			\$7.50
------------------------	--	--	--------

Warsaw, MO 65355

Weight: 2 lb 1.70 oz

Expected Delivery Date

Mon 09/28/2020

Certified Mail® Tracking #: \$3.55

70190160000078145021

Return Receipt Tracking #: \$2.85

9590 9402 2987 7094 6152 66

Total \$13.90

Grand Total: \$34.75

Credit Card Remitted

Card Name: MasterCard

Account #: XXXXXXXXXXXX1859 -

Approval #: 65154C

Transaction #: 160

AID: A0000000041010

AL: MasterCard

PIN: Not Required

Chip

\$34.75

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com

CLIMAX SPRING, MO 65324

OFFICIAL USE

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate) \$2.85

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.05

Postmark Here

SEP 24 2020

09/24/2020

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com

LAKE OZARK, MO 65049

OFFICIAL USE

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate) \$2.85

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$7.50

Total Postage and Fees \$13.90

Postmark Here

SEP 24 2020

09/24/2020

Sent To

Miller County

Street and

PO BOX 2290

City, State

PS Form Lake Ozark, Mo. 65049

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com

WARSAW, MO 65355

OFFICIAL USE

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate) \$2.85

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$7.50

Total Postage and Fees \$13.90

Postmark Here

SEP 24 2020

09/24/2020

Sent

Compass Health

Street

PO BOX 97

City, State

Warsaw, Mo 65355

Connie's Card

Give us feedback @ survey.walmart.com
Thank you! ID #:7P9WM2Z0GG

Walmart *

573-346-3588 Mgr:PAUL

94 CECIL ST

CAMDENTON MO 65020

ST# 00089 DP# 001999 TE# 03 TR# 04178

USBC-A ADPT 068113131140 9.88 0

USBC-A ADPT 068113131140 9.88 0

SUBTOTAL 19.76

TOTAL 19.76

MCARD TEND 19.76

MasterCard **** * 1859 I 21

APPROVAL # 69590C

REF # 027300837045

PAYMENT SERVICE - A

AID A0000000041010

AAC BC089C6FC161939B

TERMINAL # SC010910

09/29/20 10:19:59

CHANGE DUE 0.00

ITEMS SOLD 2

TC# 2935 5443 5710 1624 9101



Introducing Walmart+

Join today at walmart.com/plus

09/29/20 10:20:11

CUSTOMER COPY

Connie's
Card

Check in:

OMS / BRE / RES / OUT

Today's Date

9-30-20

Alert:

Insurance referral

Tec:

JD

Insurance Elig.	Copays	Purpose of visit:	EXAM	OV	P.O.	RX CK	CL	CL VISIT	GLASSES	OTHER
Y / N Exam	Y / N									
Y / N Frame	Y / N	new pt. Established								
Y / N Lenses	Y / N									
Y / N CL	Y / N									
		EXAM / OV								

Y / N Cyberopsis	OPTOS / OPTOS									
Exam										
Frame	PACH / OCT / TVF									
Lenses										

FAMILY EYECARE ASSOC
111 S. STATE AVE. E
CHICAGO, IL 60606
(773) 346-5351

Merchant ID: 5015
Card #: 1003

Store #: 101
Ref #: 0000

Phone Order

XXXXXXX1859

MASTERCARD

Entry Method: Manual

Total: \$ 118.00

9/30/20

10:31:50

Inv #: 000004

Appr Code: 61517

Transaction ID: 0930NCBNPQEDV

IPRvd: Online

Batch#: 00012

LVC2 Code: MATCH M

ID #: 0

Customer Copy

THANK YOU

LEVA info / Model / Spec / System

pks CLS / right

pks CLS / left

Usual & Customary	Insurance Allowance	Sub Total	Discount	Sub Total	Copays	PATIENT TOTAL
118	Adm PKG	Gr Total				118.00

LENSES						
OPTIONS						
Pair #2 FRAME						

LENSES						
OPTIONS						
TOTALS	118					118.00

PATIENT SIGNATURE

PAID

BALANCE

Pd w/cc

0

Special notes

Complete
d by Dr.

Outside Referral

Recall

Report

RX called/sent

Complete in Rev

01/20/20 10:41 am
E: C Baker

Resolutions 2020-51& 2020-52



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2020-51

APPROVAL OF AMENDED POLICY #25

WHEREAS, Sections 205.968-205.972 RSMo and subsequent passage by Camden County voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

WHEREAS, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, handbooks, manuals, and job descriptions and creates new Bylaws, policies, plans, handbooks, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

NOW, THEREFORE, BE IT RESOLVED:

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend Policy #25, HIPAA Compliance.
2. That the Board hereby amends and adopts Policy #25 (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution 2020-51



Policy Number:

25

Effective: March 19, 2007

Revised: October 16, 2017, November 12, 2020

Subject: HIPAA Compliance

POLICY:

Camden County Developmental Disability Resources (CCDDR) shall have a policy in order to be compliant with the Health Insurance Portability and Accountability Act of 1996.

Definitions

Protective Health Information (PHI): Individually identifiable health information that is transmitted or maintained in any form or medium by a covered entity, health plan, or clearing house as defined under the Health Insurance Portability And Accountability Act (HIPAA 45 CFR part 160 and 164).

CCDDR Privacy Officer: CCDDR's Executive Director and/or designee assigned by the Executive Director.

I. Notice of Privacy Practices

- A. At the date of the first delivery of, appearance for service at the CCDDR facility, or application for services (even those services received electronically with CCDDR), the client or their legal guardian or parent (if a minor) should be presented with the Department of Mental Health (DMH) Notice of Privacy Practices. This is considered the initial contact between the client and CCDDR. The sending of an application packet is not considered the initial contact. When the client is presented with the Notice of Privacy Practices, CCDDR will make every effort to obtain written acknowledgment of receipt for the Notice of Privacy Practices.
 1. Documentation of acknowledgment on the current Notice of Privacy Practices' acknowledgement sheet that such a Notice has been presented to a client (or their legal guardian or parent, if a minor) for review must be signed and placed in the client's record. The full Notice of Privacy Practices is then given to the client.
 2. If CCDDR does not obtain the acknowledgment, then CCDDR will document its good faith efforts to obtain the acknowledgment and document the reason(s) why the acknowledgment was not obtained on the acknowledgment cover sheet to the Notice of Privacy Practices.
 3. In emergency treatment situations, the Notice of Privacy Practices and a good faith attempt to have the client sign the Notice should be initiated at admission or prior to

dismissal, whichever is sooner. If personal contact is not possible, the Notice of Privacy Practices can be mailed for client signature.

- B. A copy of the Notice of Privacy Practices is given to each client at their annual plan meeting. This provides clients the opportunity to discuss privacy practices with their Support Coordinator.
- C. Whenever the Notice of Privacy Practices is revised by DMH, the revised Notice must be made available upon request by a client.
- D. CCDDR's Privacy Officer or designee will be responsible for ensuring that CCDDR employees are trained regarding the Notice of Privacy Practices.
- E. Client questions related to the Notice of Privacy Practices should be directed to the CCDDR Privacy Officer or designee.
- F. The CCDDR Privacy Officer or designee will maintain a historical record of all versions of the Notice of Privacy Practices and the applicable dates for each.

II. Use & Disclosure of Protected Health Information (PHI) and Authorization to Release PHI

- A. CCDDR Support Coordinators, staff members, and providers may share medical information with each other about DMH clients served in common for the purpose of general treatment, payment, or health care operations without the consent of the client, parent, or guardian. CCDDR may not use or disclose PHI without a valid authorization completed by the client, parent, guardian, or applicable personal representative with limited exceptions. The CCDDR Privacy Officer or designee will obtain written information regarding the identity of the requestor as well as the date, nature, purpose of the request, and the authority the requestor has to request such information. If other staff receive a completed authorization form for the release of PHI, they will direct it to the CCDDR Privacy Officer or designee for review.
- B. Any disclosures that occur will be limited to the minimum amount of information necessary to meet the purpose of the use or disclosure. Exceptions to the minimum necessary requirement are as follows:
 - When the client authorizes the disclosure
 - Disclosures required by law
- C. PHI may only be disclosed without authorization in the following situations:
 - To a public health authority (i.e. required reporting to the Missouri Department of Health and Senior Services)
 - To report child abuse/neglect situations, and other situations involving exploitation, abuse, neglect or domestic violence (if disclosure is allowed by law)

- To the Food and Drug Administration
- To a health oversight agency for activities authorized by law (i.e. audits, invitations, inspections, licensure)
- To judicial or administrative proceedings (a subpoena from a court is not necessarily enough)
- To law enforcement (but only in certain circumstances, including when they present a grand jury subpoena; information concerning forensic clients; to locate a missing person, suspect, or fugitive; or at the discretion of the head of the facility when the information is requested to assist law enforcement in their investigation [see Section 630.140, RSMo])
- To avert a serious threat to health or safety
- Governmental functions (such as national security and veterans' information)
- To other agencies administering public benefits
- To medical examiners, coroners, and funeral directors
- For organ and tissue donation
- For authorized research purposes
- If there is an emergency or if CCDDR is required by law to discuss certain information
- To assist in communication barriers in obtaining a consent from a client
- Appointment reminders
- Treatment alternatives and health related benefits and services
- Emergency or disaster events for individuals involved in disaster relief
- Protective Services for the President and others
- Workers Compensation
- Public Health Risk, which includes prevention or control of disease; injury; disability; and/or report birth, deaths, abuse, neglect, and exploitation
- Correctional facility inmates

- D. Any questions as to whether a use or disclosure is permitted or required by law should be directed to the CCDDR Privacy Officer or designee.
- E. If it is CCDDR requesting the client complete the authorization, CCDDR must provide the client with a copy of the signed authorization.

III. Accounting of PHI Disclosures

- A. All written and verbal communication requests on PHI need to be tracked. However, the following list of exceptions to this requirement does not require tracking or need to be accounted for upon the request of the individual:
- Disclosures made for treatment, payment, and healthcare operation purposes
 - Disclosures made to the client.
 - Disclosures made for facility directory purposes, if utilized
 - Disclosures made for national security or intelligence purposes
 - Disclosures made to correctional institutions or law enforcement officials

- Disclosure made 6 years prior to the date the accounting was requested
 - There are further exceptions for disclosures to health oversight agencies (see section 164.528(a)(2)(I) et seq.) – please contact the CCDDR Privacy Officer or designee should this situation arise.
- B. The CCDDR Privacy Officer or designee shall assure that a plan is in place which tracks disclosure of both written and verbal PHI.
- C. CCDDR may assist clients filling out the Request for Accounting of Disclosures:
- D. If multiple disclosures are made to the same entity or person for the same reason, it is not necessary to document each disclosure. CCDDR may document the first disclosure, the frequency or number of disclosures made during the accounting period, and the date of the last disclosure in the accounting period.
- E. The client (or legal guardian) must make a written Request for Accounting of Disclosures to the CCDDR Privacy Officer or designee. The request shall be on the CCDDR form. Staff may assist the client in completing the form if requested to do so.
- F. CCDDR shall have 60 days after receipt of the request for such an accounting to act on the Request for Accounting of Disclosure. If CCDDR has disclosed information to a business associate regarding the client requesting the accounting, then CCDDR, through its Privacy Officer or designee, must request an accounting of disclosures of the client's information from that business associate, who has 20 calendar days to provide the accounting. CCDDR may request one 30-day extension, which is allowed, but the client must be informed in writing:
- The reason for the delay
 - The date the accounting will be provided
- Such notification to the client or person requesting the accounting of disclosures of any delay must take place within the 60-day timeframe.
- G. CCDDR will provide all accounting of disclosures free of charge.
- H. CCDDR must retain a copy of the written accounting that is provided to the client in the client's confidential file.

IV. Verification of Requestor Identity & Authority

- A. The client or personal representative must sign a valid authorization for the disclosure of confidential PHI before such PHI can be released, except in accordance with existing HIPAA requirements.
- B. All requests for disclosure shall be forwarded to the CCDDR Privacy Officer or designee including the following:

- The name of the requesting party or parties
 - Any documentation, statements, or representations from the person requesting the PHI of the requestor's authority to request such information (i.e., legal representative of client, law enforcement official, etc.)
- C. The client must present identification prior to receipt of any records regarding themselves.
- D. The CCDDR Privacy Officer or designee may rely on the following information to demonstrate identity:
- Presentation of agency identification, credentials, or other proof of government status (a badge, identification card, etc.)
 - A written request on agency letterhead or an oral statement if a written statement would not be possible (a natural disaster, other emergency situations, etc.)
 - If the disclosure is requested by a person acting on behalf of a public official, a written statement on government letterhead that the person is acting under the government's authority or a contract or purchase order evidencing the same
 - A court order
- E. The CCDDR Privacy Officer or designee shall verify identity of any phone requests from all individuals, including law enforcement officers and others who have an official need for PHI, by using a callback phone number before releasing information.
- F. The CCDDR Privacy Officer or designee shall verify facsimile numbers of any faxed requests. The main number of the sending agency shall be called, and the fax number verified.
- G. The CCDDR Privacy Officer or designee shall verify e-mail addresses by calling requestors. The general number for the sending agency shall be called, and then a request shall be made to be transferred to the specific individual who made the contact. All e-mails containing PHI MUST be encrypted.
- H. The CCDDR Privacy Officer or designee is responsible for copying verification information or obtaining badge numbers, etc., and for maintaining it in the client's health information file.
- I. The CCDDR Privacy Officer or designee must review the forwarded information and determine if the documents satisfactorily verify the identity of the requestor and also demonstrate the requestor has authority to request the information under state and federal law.
- J. The CCDDR Privacy Officer or designee may disclose information to the requestor if all requirements for use and disclosure are met.

- K. The CCDDR Privacy Officer or designee shall contact agencies or other entities for further verification of identity or authority to receive PHI, if necessary.
- L. The CCDDR Privacy Officer or designee may deny access to information, if verification of identity or authority is not accomplished.

V. Disclosure of Minimum Necessary Amount of PHI

- A. CCDDR will make reasonable efforts to ensure that the minimum necessary PHI is disclosed, used, or requested. Exceptions to the minimum necessary requirement include:
 - Disclosures to the individual who is the subject of the information
 - Disclosures made pursuant to an authorization
 - Disclosures to or requests by healthcare providers for treatment purposes
 - Disclosures required for compliance with the standardized HIPAA transactions
 - Disclosures made to Health & Human Services/Office of Civil Rights (HHS/OCR) pursuant to a privacy investigation
 - Disclosures otherwise required by the HIPAA regulations or other law
- B. Each user of PHI will be subject to the provisions of CCDDR policies relating to staff access to PHI.
- C. Reasonable efforts will be made to limit each PHI user's access to only the PHI that is needed to carry out the user's duties. These efforts will include the CCDDR Privacy Officer or designee monitoring staff use and disclosure of PHI.
- D. For situations where PHI use and disclosure or PHI requests occur on a routine and recurring basis, the CCDDR Privacy Officer or designee will issue directives as to what information constitutes the minimum necessary amount of PHI needed to achieve the purpose of the use, disclosure, or request.
- E. For non-routine disclosures (other than pursuant to a legitimate or legal authorization), staff will address questions to the CCDDR Privacy Officer or designee to assure that PHI is limited to what is reasonably necessary to accomplish the purpose for which disclosure is sought. Examples of non-routine disclosures include providing PHI to accrediting bodies, insurance carriers, research entities, funeral homes, etc.

VI. Client/Guardian Procedural Safeguards for Improper Use or Disclosure of PHI

DMH and CCDDR encourage clients and service providers to discuss and attempt to resolve issues at the local level.

The following steps constitute the HIPAA complaint process:

- A. Fill out the CCDDR Complaint Form

- B. Forward a copy of the complaint form to the CCDDR Privacy Officer or designee if the alleged violation took place at CCDDR facility or program.
- C. All Privacy Complaints received by the CCDDR Privacy Officer or designee will be date-stamped upon arrival:
- The CCDDR Privacy Officer or designee will review and act on the complaint in a timely manner and not more than 30 days from receipt of the complaint – if additional time is necessary to review and investigate the complaint, the CCDDR Privacy Officer or designee shall, within 30 days, notify the client of the delay, and inform the grievant of the expected timeframe for completion of the review
 - The CCDDR Privacy Officer or designee shall determine what PHI is affected by the complaint and if the PHI was provided to other covered entities and business associates
 - If the affected PHI was created and maintained by a business associate, the complaint will be forwarded to the business associate as outlined in the Business Associate Agreement – complaints forwarded to business associates will be logged and a notice of the action sent to the client making the complaint
- D. The CCDDR Privacy Officer or designee will determine if there is cause to believe a violation of CCDDR privacy policies occurred, and the course of action to be taken.
1. If no violation has occurred, the complaint and finding will be date-stamped, the complaint will be considered closed, and a written notice of this shall be provided to the client, guardian, and/or legal representative.
 2. If cause exists to believe a violation has occurred, the CCDDR Privacy Officer or designee shall be responsible for determining if:
 - Performance or training need to be improved
 - A recommendation for a change to the CCDDR policy should be forwarded to the Board of Directors
 - A recommendation should be made to the Board of Directors to establish a new Privacy Policy or change the existing CCDDR policy.
 3. The Privacy Officer or designee shall notify the Board of Directors of the action needed.
 4. If employee discipline must be administered, it must follow the CCDDR policy on sanctions.
- E. If the complaint resolution finds that no cause exists to believe a violation occurred, then the client or client's legal representative may seek resolution to the CCDDR Board of Directors directly (if it is a CCDDR based complaint).
1. The client or client's legal representative, through completion of the Complaint Form, will request that the CCDDR Privacy Officer or designee forward the complaint to the CCDDR Board of Directors.

2. The Board of Directors will review and act on the complaint in a timely manner and not more than 30 days from receipt of the complaint form.

F. The Board of Directors shall determine one of the following:

- The original determination of the CCDDR Privacy Officer or designee is accurate
- Remediation should occur through increased training or a recommendation be made for possible disciplinary action
- A recommendation for CCDDR policy review be initiated
- A recommendation be made for the establishment of a new CCDDR policy

G. The original complaint form shall be placed in the client's confidential file.

H. The CCDDR Privacy Officer's or designee's primary responsibilities in the HIPAA Complaint process include logging and retaining complaints in a retrievable manner for a minimum of six years and identifying:

- Person or entity making the complaint
- Date complaint was received
- A list of the PHI affected
- Status of a complaint
- A list of business associates or facilities affected
- Actions taken

I. There shall be no retaliation against any client or against a workforce member for assisting a client to file a CCDDR complaint regarding CCDDR management of PHI or a report of breach of privacy and security of PHI.

VII. Designated Records Set

A. CCDDR shall identify all information systems (defined as an organized collection of information) that contain PHI.

B. That inventory shall be maintained by the CCDDR Privacy Officer or designee. Any new, modified, or defunct systems will be added to or removed from the inventory by the Privacy Officer or designee.

C. For the purpose of the implementation of this policy, the term designated record set includes any item, collection, or grouping of information that includes PHI and is maintained, collected, used, or disseminated by CCDDR for client care or payment decision making, including (but not limited to):

- Medical and billing records about clients maintained by or for CCDDR
- Enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for CCDDR

- Any records or information used, in whole or in part, by or for CCDDR to make decisions about clients

D. Information not part of the Designated Records Set is defined as follows:

1. Any documents that are used for census information, quality assurance or quality improvement, peer review, sentinel event, Centers for Medicare and Medicaid purposes, utilization review, abuse/neglect investigations, incident/injury reports, state auditors, or various electronic databases, etc., which are not used to make decisions regarding an individual client or any work therapy employment files; integrated risk assessment including serious incident history, index crime report, annual synopsis of endangering behaviors, recent predictive behaviors, request for passes and privileges, forensic release request, law enforcement reports, victim notification information; or REJIS, MULES, or NCIC report. However, these types of information may be accessible by parents or guardians. In addition, for forensic case evaluations (defined in section 552 or 557, RSMo), the pretrial commitment order, the pretrial evaluation, or any correspondence relating to the pretrial is not part of the designated records set. Neither is the victim notification information.
2. For forensic cases, any forensic evaluation or any correspondence relating to the forensic commitment is not part of the designated records set.
3. For persons referred, considered for referral, or committed (pursuant to section 632.525 RSMo), risk assessments, probable cause evaluations, court-ordered evaluations, and annual reports are not part of the designated records set.
4. Working files, either paper or electronic, are not considered part of the designated records set. Examples of this information may include, but are not limited to, copies of the current personal plan, IEP, guardianship information, MOCABI or Vineland, client budgets, correspondence (including e-mail), face or cover sheet (including demographic information), behavior support plan, discharge summary, any necessary monthly or quarterly reports, authorizations, conditional release plan, etc.
5. Psychotherapy notes are not included in the designated records set and are to be kept separate from the medical record.

- E. When an individual or department have been given sanctioned, exclusive possession and control of PHI as part of their assigned duties, the individual or department shall be responsible for all administrative duties of a data trustee in terms of security, data access, privacy, data backup, disaster recovery, and accountability. When the individual or department does not have the technical expertise or equipment to adequately protect the PHI, the individual or department must arrange for technical assistance either through the Information Systems or Health Information Management Departments to assure the confidentiality of the PHI. Any field staff must refer to DMH DOR 9.080.
- F. The designated record set will be created, stored, released, transported, copies and destroyed based on DMH DOR 8.110 Record Retention and Destruction. Failure to comply or assure compliance with the DOR could result in disciplinary action, up to and including dismissal. The CCDDR Privacy Officer or designee will collect information

from the Local Privacy Officer or designee annually to monitor compliance with the DMH DOR.

VIII. Access to Computerized/Electronic PHI

- A. Pursuant to the Electronic Communications Privacy Act of 1986, CCDDR management shall have complete access to all e-mail and internet activities. No electronic communications sent or received are considered private to the employee. Management has the right to monitor messages and internet use as necessary to assure efficient and appropriate use of the technology.
- B. Each of the electronic communications technologies may create electronic records that are easily saved, copied, forwarded, retrieved, monitored, reviewed, and used for litigation. All electronic records are the property of the CCDDR and can be accessed and used by management when:
 - A legitimate business need exists that cannot be satisfied by other means
 - The involved employee is unavailable, and timing is critical to a business activity
 - There is reasonable cause to suspect criminal activity or policy violations
 - Law, regulation, or third-party agreement requires such monitoring
- C. These disclosures of electronic records may be made without prior notice to the staff members who sent or received the communications. Staff members should not assume that any electronic communications are private.
- D. User Access to Electronic CCDDR Data: To gain access to any CCDDR protected healthcare information, CCDDR workforce members are required to consult with the CCDDR Privacy Officer or designee beforehand. All users shall be required to protect confidential data, and only the minimum necessary data shall be accessed.
- E. CCDDR shall maintain a Disaster Recovery Plan, approved by the Security Officer to assure continued operations in the event of an emergency.
- F. No CCDDR client or volunteer shall have access to another person's PHI or any other CCDDR client demographic system, or be allowed to input information to local systems that may be used to feed or modify those systems unless authorized by the client. Any proposed client/client access shall include documentation of the client reviewing and agreeing to a confidentiality statement. Documentation will include the types of systems and files accessed.
- G. Such client access shall be approved by the CCDDR Director, or designee with notification and documentation provided to the Security Officer.
- H. Users are required to abide by the following guidelines when using CCDDR email and internet systems:

1. The internet and email are intended to be used primarily for business purposes.
2. The internet may be used to access external databases and files to obtain reference information or to conduct research.
3. Email may be used to disseminate business-related newsletters, press releases, or other documents to groups of people.
4. Email and the internet may be used for discussion groups on job-related topics.
5. Do NOT use personal email.

I. Email and/or the internet may not be used for:

- Any illegal, private, or unethical purpose
- Downloading software of any kind without prior approval of management
- Participating in personal social media, internet chat rooms, instant messaging, or other similar medias
- Playing games
- Conducting any political activity

J. All CCDDR employees, clients, and volunteers must receive the required HIPAA privacy training.

K. CCDDR workforce members receiving or maintaining PHI shall be required to agree to the security of such PHI in accordance with the state and federal laws as set forth above. These workforce members shall sign a confidentiality statement. A copy of the signed confidentiality statement shall be maintained in the personnel file of CCDDR staff.

L. CCDDR will utilize password management:

1. Passwords shall not be shared.
2. Passwords shall be changed immediately if the user is aware that someone else knows it.
3. Users shall not change their passwords while others are present.
4. Passwords should have no connection to the user, i.e. username, children's name, etc.

IX. Physical Security/Maintenance of Electronic & Computerized PHI

A. Users shall be automatically logged off their workstations after a maximum period of 15 minutes of inactivity.

B. Designated CCDDR staff shall ensure that all media has been thoroughly cleansed of any client data before the media is disposed.

C. Access to media containing client data shall be controlled by:

- Physical access control to CCDDR hardware
- Purging CCDDR data on any type of media before it is discarded
- Storage of data on media that is backed up

- D. The CCDDR Security Officer shall maintain an up-to-date standards list which prescribes appropriate procedures and practices for data security purposes.
- E. Virus protection for the CCDDR network shall be maintained by the IT manager/consultant.
- F. The CCDDR workforce shall not load software, from any source, on to their assigned workstation without prior authorization from the Executive Director. This software includes, but is not limited to, software from the internet, a CD, or other external device or media. Software must be approved by the Executive Director prior to being loaded on workstations.

X. Client/Guardian Right to Amend PHI

- A. A client, parent of a minor, and personal representative or legal guardian, as relevant to the client's representation, who believes information in the client's health records is incomplete or incorrect may request an amendment or correction of the information as outlined below:
 - 1. For minor discrepancies (i.e. typos, misspelled name, wrong date, etc.), the client may approach the author of the entry, point out the error, and ask the author to correct it.
 - a. If the entry author agrees, the entry can be corrected according to best documentation practices by drawing a single line through the error; adding a note explaining the error (such as "wrong date" or "typo"); date and initial it; and make the correction as close as possible to the original entry in the record.
 - b. Any information added to a Person-Centered Plan in the regular course of business is not considered an amendment. An example would be when a client provides the name of a new private physician or other professional whom the client sees in the community.
 - 2. All other requests for amendment to PHI shall be in writing and provide a reason to support the amendment. Specifically, any request should be supported by documentation of any incorrect information or incomplete information.
- B. The "Request to Amend Protected Health Information" form shall be provided to facilitate the request. CCDDR may assist in initiating the process requesting amendment to PHI and a copy shall be provided to the client.
- C. All requests for amendment of PHI must be forwarded to the CCDDR Privacy Officer or designee, who will route the original request to the author of the PHI or the individual's supervisor. If the author chooses to add a comment to the request form, a second copy of the form will be given to the client with the author's comments.

- D. This request shall be processed in a timely and consistent manner according to established timeframes but not more than 60 days after receipt of the request.
- E. If the request for amendment cannot be processed within the 60 days, the timeframe may be extended no more than an additional 30 days with notification in writing to the individual outlining the reasons for the delay and the date the request will be concluded.
- F. If a client with a guardian requests an amendment, a letter is to be sent to the guardian stating that the client is requesting an amendment, and further requesting that the guardian complete the request for amendment form.
- G. If the request is granted, CCDDR shall:
1. Insert the amendment or provide a link to the amendment at the site of the information that is the subject of the request for amendment, and then document the change in the same section of the record as the original information.
 2. Inform the client that the amendment is accepted.
 3. Obtain the authorization of the client to notify all relevant persons or entities with whom the amendment needs to be shared.
 4. Within 60 days, make reasonable efforts to provide the amendment to the persons identified by the client, and any persons, including business associates, that CCDDR knows has been provided the PHI that is the subject of the amendment and who may have relied on or could foreseeably rely on the information to the detriment of the client.
 5. If the amendment affects a service for which billing or a charge has already been submitted, then the billing must be reviewed to see if it should be amended or changed as well to reflect the new information.
- H. CCDDR may deny the request for amendment to PHI if:
1. The information was not created by CCDDR. However, if the client can provide reasonable proof that the person or entity that created the information is no longer available to make the amendment, and the request is not denied on other grounds, CCDDR must amend the information.
 2. The information is not part of the medical information kept by or for CCDDR.
 3. The information is not part of the information that the client would be permitted to inspect and copy (for specifics on client's access to PHI, see DMH DOR 8.030).
 4. The information is accurate and complete.
- I. If CCDDR denies the requested amendment, it must provide the client with a timely, written denial, written in plain language that contains:
- The basis for the denial
 - The client's right to submit a written statement disagreeing with the denial and how the client may file such a statement

- The name, title, address, and telephone number of the person to whom a statement of disagreement should be addressed
- The steps to file a complaint with the Department of Health and Senior Services.
- A statement that if the client does not submit a statement of disagreement, the client may request that CCDDR provide the request for amendment and the denial with any future disclosures of PHI
- A copy must also be provided to the guardian, if applicable; to parent(s), if applicable; or to Department of Social Services if that agency has legal and physical custody of the juvenile

J. Clients shall be permitted to submit to CCDDR a written statement disagreeing with the denial of all or part of a requested amendment and the basis for the disagreement. This statement of disagreement shall be limited to one page.

1. The statement of disagreement will be submitted in writing to the CCDDR Executive Director.
2. CCDDR may prepare a written rebuttal to the statement of disagreement and must provide the client with a copy of the rebuttal.
3. CCDDR must identify the record of PHI that is the subject of the disputed amendment and append or link the request for an amendment, the denial of the request, the individual's statement of disagreement, if any, and the CCDDR rebuttal statement, if any.

K. If the client has submitted a statement of disagreement, CCDDR must include the documents or an accurate summary of the information, with any subsequent disclosure of the PHI to which the disagreement relates.

L. If the client has not submitted a written statement of disagreement, CCDDR must include the client's request for amendment and its denial or an accurate summary of the information with any subsequent disclosure of PHI only if the client has requested it.

M. If CCDDR receives information from another source of an amendment of a client's PHI, the PHI from the sending facility must be amended in written or electronic form.

XI. Request to Restrict PHI

- A. Clients shall indicate their request for restriction on the use or disclosure of their PHI using the "Request for Restrictions on the Use and/or Disclosure of Protected Health Information" form.
- B. The requested restrictions must be provided in writing as well as signed and dated by the client or legal representative.
- C. The CCDDR Privacy Officer or designee must receive the written request. The Privacy Officer or designee, in consultation with the Executive Director or DMH Privacy Officer or designee, will determine whether it will be approved using the following procedure:

1. If approved, CCDDR must implement the restriction.
2. The CCDDR Privacy Officer or designee will identify the restriction on the face sheet of the client's confidential file.
3. CCDDR's agreement or refusal of the request shall be documented on the request form as well as signed and dated by the Privacy Officer or designee.
4. The original will be filed for permanent retention.
5. A copy of the approved or denied form will be provided to the client.

D. CCDDR may terminate the agreement to a restriction if:

1. The client agrees to or requests the termination in writing.
2. The client orally agrees to the termination and the oral agreement is documented.
3. CCDDR informs the client that it is terminating its agreement to a restriction and that such termination is only effective with respect to PHI created or received after it has so informed the individual.
4. When any of the above criteria are met, the restriction will be removed, and the form will be dated and signed by the Privacy Officer or designee.
5. If the restriction was identified on the face sheet of the client's confidential file, that identification shall be removed by the Privacy Officer or designee.

E. If CCDDR has agreed to the restriction, but the client who requested the restriction is in need of emergency treatment and the restricted PHI is needed to provide the emergency treatment, CCDDR may disclose that PHI to a health care provider to provide such treatment.

F. If such PHI is disclosed in an emergency situation, CCDDR must require that the health care provider to whom the information was disclosed not further use or disclose that PHI. Failure of staff to comply or assure compliance may result in disciplinary action, including dismissal.

XII. Client Right to Access or Receive a Copy of PHI

- A. A client who has or is receiving services from CCDDR, parent of a minor, and legal representative or legal guardian as relevant to their representation, must request in writing for access to inspect or receive copies of PHI, except in those instances covered by federal regulation and outlined in the Notice of Privacy Practices acknowledged at admission, and must further specify the exact information requested for access.
- B. The "Request to Access or Receive a Copy of Protected Health" form shall be provided to facilitate the request. CCDDR personnel may assist in initiating the process requesting access to PHI.
- C. All requests by clients and their legal representatives for PHI must be forwarded to the Privacy Officer or designee for action.

- D. If it is acceptable after discussion with the client, CCDDR may provide a summary of the PHI to the client. If the summary is acceptable, CCDDR shall determine the appropriate staff to provide that explanation to the client. The client's agreement to a summary shall be documented in writing in the record as a check in the appropriate box in the "Request To Access or Receive a Copy of PHI" form. The form shall be filed in the client's confidential file.
- E. This request shall be processed in the format requested (i.e. microfiche, computer disk, etc.), if possible, and in a timely consistent manner according to established timeframes but not more than 30 days after receipt of the request. If the record cannot be accessed within the 30 days, the timeframe may be extended once for no more than an additional 30 days with notification in writing to the individual outlining reasons for the delay and the date the request will be concluded.
- F. Requests for Access to PHI may be denied without a right to review as follows:
- If the information conforms to one of the following categories: psychotherapy notes; information compiled for use in a civil, criminal or administrative action or proceeding; or information that would be prohibited from use or disclosure under the Certified Laboratory Information Act (CLIA) laws and regulations
 - If the client is participating in research related treatment and has agreed to the denial of access to records for the duration of the study
 - If access is otherwise precluded by law
 - If the information was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information – all Victim Notification and Duty To Warn forms, as well as any other documentation that contains demographics of victims or potential victims shall be removed before any review of the record by anyone not employed by CCDDR, and if the CCDDR employee is a client worker, then the information shall be removed before any review of the record
 - If CCDDR has been provided a copy of a court order from a court of competent jurisdiction which limits the release or use of PHI
- G. Requests for Access to PHI may be denied provided the individual is given a right to have the denial reviewed as follows:
1. A licensed health care professional based on an assessment of the particular circumstances, determines that the access requested is reasonably likely to endanger the life or physical safety of the client or another person.
 2. CCDDR may deny the client access to PHI if the information requested makes reference to someone other than the client and a licensed health care professional has determined that the access requested is reasonably likely to cause serious harm to that other person.
 3. CCDDR may deny a request to receive a copy or inspect PHI by a personal representative of the client if CCDDR has a reasonable belief that the client has been or may be subjected to domestic violence, abuse, or neglect by such person; treating

such person as the personal representative could endanger the individual; and CCDDR, exercising professional judgment, decides that it is not in the best interest of the client to treat that person as the client's personal representative.

- H. Upon denial of any request for access to PHI, in whole or in part, a written letter shall be sent to the client, or other valid representative making the request for access, stating in plain language the basis for the denial.
 - 1. If the client has a right to a review of the denial, the letter shall contain a statement of how to make an appeal of the denial including the name, title, address, and telephone number of the person to whom an appeal should be addressed.
 - 2. This letter shall also address the steps to file a complaint with the Secretary of HHS.
 - 3. If the information requested is not maintained by CCDDR, but it is known where the client may obtain access, CCDDR must inform the client where to direct the request for access.
- I. A client, parent of a minor, or guardian of a client has the right to appeal the decision to withhold portions or all of the record for safety or confidentiality reasons as follows:
 - 1. The appeal shall be submitted in writing to the CCDDR Privacy Officer or designee, who will designate a licensed health care professional.
 - 2. The designated licensed health care professional who did not participate in the original decision to deny access shall review the record and the request for access to the client's record.
 - a. The reviewer must determine if access meets an exception.
 - b. If the reviewer determines that the initial denial was appropriate, the client must be notified in writing, using plain language that the review resulted in another denial of access. The notice must include the reasons for denial and must describe the process to make a complaint to the Secretary of HHS.
 - c. If the denial was not appropriate, the licensed health care professional who acts as the reviewer shall refer the request to the CCDDR Privacy Officer or designee for action.
 - 3. If access is denied to any portion of the PHI, access must still be granted to those portions of the PHI that are not restricted.
 - 4. CCDDR is bound by the decision of the reviewer.
- J. If CCDDR provides a client or legal representative with access, in whole or in part, to PHI, CCDDR must comply with the specifications as outlined in federal regulations to the extent of CCDDR's capabilities and as identified in the Notice of Privacy Practices.
 - 1. Requested information must be provided in designated record sets.
 - 2. If the requested information is maintained in more than one designated record set or in more than one location, CCDDR only needs to produce the information one time in response to the request.

3. CCDDR may provide a summary or explanation of the requested PHI if:

- The client agrees in advance to the summary or explanation in place of the record
 - The client agrees in advance to any fees imposed for the summary or explanation
4. If the requested information is maintained electronically and the client requests an electronic or faxed copy, CCDDR must accommodate the request if possible and should explain the risk to security of the information when transmitted as requested.
5. If the information is downloaded to a computer disk, the client should be advised in advance of any charges for the disk and for mailing the disk. CCDDR shall establish a reasonable cost for the duplication of this information on a disk.
6. If the information is not available in the format requested, CCDDR must produce a hard copy document or other format agreed upon by the client and CCDDR.
- K. CCDDR shall provide the access requested in a timely manner and arrange for a mutually convenient time and place for the client to inspect the PHI or obtain copies, unless access by another method has been requested by the client and agreed to by the CCDDR. Any requests for accommodations shall be sent or given in writing to the Privacy Officer or designee.
- L. The fee charged will be in compliance with the current Missouri statute (See Section 191.227, RSMO) and federal law.
- M. The PHI of a deceased client may only be released via a Probate Court order from the County Circuit Court where the deceased resided or from another Probate Court in the state of Missouri.
- N. Upon request to obtain information, the Privacy Officer or designee shall ask for a copy of the Probate Court Order.

XIII. Workforce Compliance

- A. CCDDR workforce members shall be granted access to PHI, whether written, electronic, or verbal in nature, in accordance with state and federal law (HIPAA, P.L. 104-191; 42 CFR Part 2 et seq.) and other relevant CCDDR policies. Such access shall be limited to the minimum necessary amount of PHI to accomplish the purpose of any requested use or disclosure of PHI (e.g. to the amount of PHI the employee or workforce member needs to know in order to accomplish their job or task). In addition, communications between workforce members which involve PHI shall also be considered confidential and should not take place in public areas. If it is absolutely necessary to conduct such conversations in public areas, reasonable steps shall be taken to assure the confidentiality of the PHI.
- B. Client PHI can be taken outside the office building with specific authorization from the Privacy Officer or designee upon receipt of a court order which subpoenas the records or if a record is being transported to the DMH Regional Office due to discharge or transfer of a client.

- C. If PHI in any form is lost or stolen, the Privacy Officer or designee should be notified as soon as practical, but no later than two (2) business days after the loss is discovered, in order for the Privacy Officer or designee to initiate the mitigation process.
- D. The CCDDR workforce members shall be informed of their obligations with respect to PHI in accordance with CCDDR by mandatory participation in HIPAA Privacy Training.
- E. The CCDDR workforce members that receive or maintain PHI shall be required to agree to the protection of such PHI in accordance with the state and federal laws as set forth above. These workforce members shall sign a HIPAA Confidentiality Statement. A copy of the signed confidentiality statement shall be maintained in the personnel file of CCDDR staff or volunteers.
- F. Visitors to CCDDR are not required to sign the confidentiality agreement. However, a copy of the confidentiality agreement shall be located next to the visitor sign-in materials and available for review by each visitor.

XIV. Mandatory Training

- A. All employees of CCDDR are given a packet regarding HIPAA rules at new hire orientation. After HIPAA information has been reviewed by CCDDR employees, a test is given on the information covered in packet and results of the tests are discussed with the individual. Additional HIPAA training is covered in mandatory courses required by DMH.
 - 1. Trainings shall be conducted at the CCDDR facility or designated location.
 - 2. Additional mandatory privacy training shall be scheduled whenever there is a material change in DMH privacy policies or procedures as determined by the DMH's Privacy Officer or designee.
 - 3. Periodic mandatory security training shall be scheduled as determined by the DMH's Security Officer.
- B. CCDDR employees shall receive training as part of their initial employee orientation. The content for the HIPAA new employee orientation shall be the same as listed in paragraph A. However, any interactive exercises, or supplemental videos, will not be required content for new employee orientation. HIPAA new employee orientation must take place within 30 days of the date of hire.
- C. Volunteers, students, and contract employees for CCDDR on a regular course of business shall also be required to receive training as a part of their initial CCDDR orientation (also known as the new employee orientation course). The content for the HIPAA initial CCDDR orientation shall be the same as listed in paragraph A to this policy excluding mandatory courses required by DMH. However, any interactive exercises, or supplemental videos, will not be required content for initial CCDDR orientation. Such

training must be done within 30 days of the initial date that the person presents for service.

- D. The CCDDR Privacy Officer or designee shall identify groups or individuals who, due to the nature of their job function within CCDDR, will require in-depth training related to HIPAA and CCDDR's policies, and then provide that specialized training.
- E. Documentation of Mandatory HIPAA Training shall be recorded by the CCDDR Privacy Officer or designee.

XV. Field Practices

- A. PHI that is unattended shall be secured in a manner to protect such information from persons without authorized access to this PHI.
- B. Vehicles containing any PHI shall be kept locked while unoccupied. PHI shall be kept locked in the trunk of the vehicle, when possible. In the event of extreme temperature situations, an electronic device (laptop, digital device/assistant, etc.) containing PHI shall be maintained in the temperature-controlled cab in a case while the vehicle is occupied.
- C. In the event of a vehicle accident, any CCDDR employee who suspects there is PHI in the vehicle shall make every reasonable attempt to make sure that the PHI is not accessible to anyone who does not need to have access to it, after assuring the health and safety of any individual(s).
- D. Upon an employee leaving an area where they have materials containing PHI (e.g. to use the restroom), the employee shall take the materials with them or ensure that the area is protected from viewing by those without authorization by locking the area, informing CCDDR personnel if they are CCDDR records, and/or using some other reasonable intervention.
- E. Electronic devices containing PHI and other forms of PHI shall not be left in a hotel room for the day when cleaning services are expected. Upon leaving the hotel, employees shall take these items with them, ensure they are locked in the valuables area at the front desk, or locked in a safe in the room, if one is available. Should this not be possible, each document that is contained on the laptop shall be password protected on an individual basis.
- F. Employees shall travel in the field taking only PHI necessary to carry out their duties.
- G. Any documentation or equipment, such as laptops, briefcases, etc., that may contain PHI shall be secured from access by those without authorization to the PHI. This includes all locations including an employee's home. Again, each document that is contained on the laptop shall be password protected on an individual basis.

- H. Data contained on all laptops, etc., should be backed-up to a encrypted storage device or to the network when at all possible to avoid loss of valuable PHI.
- I. If PHI in any form is lost or stolen, the CCDDR Privacy Officer or designee should be notified as soon as practical, not to exceed two (2) business days, in order to initiate the mitigation process.
- J. PHI that is potentially within view of others, even if CCDDR staff is present, shall be protected in a manner that such information is not communicated to persons without authorized access to this PHI:
 - 1. All PHI within a vehicle shall be maintained so as to protect from plain view through the windows of the vehicle.
 - 2. Any electronic device containing PHI shall not have the screen placed in view of others and, if left unattended briefly, a screen saver with password shall be employed consistent with CCDDR's security requirements.
 - 3. All documentation containing PHI shall be maintained out of the view of unauthorized persons.
 - 4. While working with PHI, the employee shall keep the documentation within line of sight or within arm's reach.
 - 5. This documentation shall be viewed in the most private settings available.
 - 6. Only PHI documentation necessary for the task at hand shall be in view.
 - 7. Briefcases containing PHI shall remain closed when not in use.
 - 8. When having PHI material copied, the employee shall ensure that this material is only viewed by authorized persons.
 - 9. When the employee is finished with reviewing CCDDR records containing PHI, the records shall be returned promptly to their appropriate storage area.
- K. Employees shall send and receive faxed materials containing PHI to and from CCDDR facilities only, unless such facility is not readily available and timely transmission of records is necessary for safety needs. If in non-CCDDR locations:
 - 1. When sending or receiving a fax containing PHI, the employee shall ensure only those authorized to view have access to the material during the process of transmission.
 - 2. The fax cover sheet shall not contain PHI.
 - 3. The employee shall be waiting to receive the fax at the fax machine when the transmission is expected if the material could be accessed by those without authorization to view the PHI. Call the receiving location to verify transmission was successful.
- L. Any CCDDR identifying information shall not be in plain view such as agency logo on a notebook, briefcase, etc.
- M. When using sign language interpreters where PHI may be transmitted, the most private setting available out of view of others shall be used.

- N. PHI that is verbally transmitted to others shall be protected in a manner that such information is not communicated to persons without authorized access to this PHI.
- O. Conversations where PHI is discussed shall occur in the most private settings. There shall be as much distance as possible between any individuals without authorized access to the PHI.
1. Conversations where PHI is discussed shall occur with the employee using a volume level which cannot be overheard by those without authorized access to the PHI, which includes telephone conversations. If there is no way to prevent being overheard, a specific code shall be used to identify an individual, such as chart number or client initials.
 2. The employee shall make every effort to keep the volume level of all participants' low enough so as to not be overheard.
 3. Conversations shall involve using only the first name of an individual whenever possible.
- P. Wireless/cellular and cordless telephones shall be used for communicating PHI only if necessary.
1. Conversations where PHI is discussed must be held at a volume level that cannot be overheard and away from individuals without authorized access to the PHI.

REFERENCES:

- Health Insurance Portability and Accountability Act Of 1996/Public Law 104-191, Department of Mental Health DORs.



CAMDEN COUNTY SB40 BOARD OF DIRECTORS
RESOLUTION NO. 2020-52

APPROVAL OF AMENDED COVID-19 PLAN
--

WHEREAS, Sections 205.968-205.972 RSMo and subsequent passage by Camden County voters of the Senate Bill 40 enabling legislation in August of 1980 allows for the business, property, affairs, administrative control, and management to rest solely with the Camden County SB40 Board of Directors (dba Camden County Developmental Disability Resources).

WHEREAS, the Camden County SB 40 Board (dba Camden County Developmental Disability Resources) reviews, amends, and appeals its existing Bylaws, policies, plans, handbooks, manuals, and job descriptions and creates new Bylaws, policies, plans, handbooks, manuals, and job descriptions as needed to remain effective in its Agency administration and remain compliant with regulatory statutes.

NOW, THEREFORE, BE IT RESOLVED:

1. That the Camden County Senate Bill 40 Board (dba Camden County Developmental Disability Resources), hereafter referred to as the "Board", hereby acknowledges the need to amend the agency's COVID-19 Plan.
2. That the Board hereby amends and adopts the agency's COVID-19 Plan (Attachment "A" hereto) as presented.
3. A quorum has been established for vote on this resolution, this resolution has been approved by a majority Board vote as defined in the Board bylaws, and this resolution shall remain in effect until otherwise amended or changed.

Chairperson/Officer/Board Member

Date

Secretary/Vice Chairperson/Treasurer/Board Member

Date

Attachment “A” to Resolution 2020-52



Camden County Developmental Disability Resources

COVID-19 Plan

(Revised 11/12/2020)

Exposure Prevention, Preparedness, and Response

Camden County Developmental Disability Resources (CCDDR) takes the health and safety of our clients and employees very seriously. With the spread of the coronavirus or “COVID-19,” a respiratory disease caused by the SARS-CoV-2 virus, CCDDR must remain vigilant in mitigating the outbreak. CCDDR provides Targeted Case Management (TCM) services, which many have deemed “essential” during this declared emergency. In order to be safe and maintain operations, we have developed this COVID-19 Exposure Prevention, Preparedness, and Response Plan to be implemented, to the extent feasible and appropriate. CCDDR has also identified a team of employees to monitor the related guidance that the U.S. Center for Disease Control and Prevention (CDC), Missouri Division of Developmental Disabilities (DDD), Missouri Department of Health and Senior Services (DHSS), Camden County Health Department, and other local, state, or federal agencies continue to make available. This Plan is based on information available at the time of its development and is subject to change based on further information provided. CCDDR may also amend this Plan based on operational needs.

Responsibilities of Managers and Supervisors

All managers and supervisors must be familiar with this Plan and be ready to answer questions from employees. Managers and supervisors must set a good example by following this Plan at all times. This involves practicing good personal hygiene and safety practices to prevent the spread of the virus. Managers and supervisors must encourage this same behavior from all employees.

Responsibilities of Employees

CCDDR is asking every one of its employees to help with prevention efforts while at work. In order to minimize the spread of COVID-19, everyone must play their part. As set forth below, CCDDR has instituted various housekeeping, social distancing, and other best practices. All employees must follow these. In addition, employees are expected to report to their managers or supervisors if they test positive for COVID-19, are experiencing signs or symptoms of COVID-19, or who have been exposed to a person who has tested positive for COVID-19 as described below. If you have a specific question about this Plan or COVID-19, please ask your manager or supervisor. If they cannot answer the question, please contact CCDDR’s Human Resource Officer or CCDDR’s Executive Director.

The following control and preventative guidance have been implemented to help prevent and reduce the risk of exposure:

- Frequently wash hands with soap and water for at least 20 seconds - when soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol.
- Avoid touching eyes, nose, or mouth with unwashed hands
- Follow appropriate respiratory etiquette, which includes covering for coughs and sneezes
- Avoid close contact with people who are sick
- Maintain social distancing (at least 6 feet apart from other people)
- Wear a facemask/cloth face covering if needing to be around other people; if social distancing is not possible or practical facemask/cloth face covering must be worn
- The use of nitrile, latex, vinyl, or other similar gloves is encouraged if practical and possible

In addition, employees must familiarize themselves with the symptoms of COVID-19, which include the following:

- Fever
- Cough
- Runny nose
- Shortness of breath, difficulty breathing
- Chills
- Body aches
- Sore throat
- Headache
- Diarrhea
- Nausea/vomiting

If employees develop any of these symptoms, they are to call their supervisor and DO NOT GO INTO ANY CCDDR OFFICE OR PHYSICALLY CONTACT ANYONE AS RELATED TO THEIR CCDDR DUTIES. We also recommend employees contact their healthcare providers right away. Likewise, if employees come into close contact with someone showing these symptoms, call your supervisor, and we recommend you call your healthcare provider right away.

Protective Measures

CCDDR has instituted the following protective measures at its offices and applicable portions of buildings.

1. Support Coordination services shall be conducted in accordance with guidance and/or directives issued by the DDD.
2. Employees, Board members, and visitors are required to self-monitor their personal health daily for COVID-19 symptoms. Employees shall not report to work, or shall promptly leave work, if they feel they are experiencing COVID-19 symptoms. One or more site-specific COVID-19 Coordinators will be designated to monitor employees, Board members, and on-site visitors who enter any CCDDR building or CCDDR event/meeting beyond the lobby area or event/meeting entry area. The Coordinator(s) will screen employees/visitors with a no touch thermometer for a fever at or above 100.4 degrees. Any employee or visitor with such a fever will be immediately sent home. Employees sent home for having a fever should contact CCDDR's Human Resource Officer or Executive Director for any questions regarding available leave and steps that must be taken before returning to work.
3. CCDDR offices and applicable portions of buildings shall remain open to the public, but access will be limited to lobbies and/or other designated areas. CCDDR may close its offices to the public or restrict employee entry should circumstances warrant. The general rule of thumb for restricting access to offices and buildings, excluding portions of buildings leased to third parties, shall be based on the testing positivity rate associated with COVID-19 testing in Camden County; however, other pertinent factors may also be considered. If data is insufficient or unavailable, CCDDR will make decisions based on best practices, available industry standards/recommendations, and management's best judgement. Should the testing positivity rate be equal to or exceed 10% for Camden County, CCDDR will close its offices and applicable portions of its buildings to the public. Additional employee entry restrictions will be evaluated based on the circumstances, including restricting employee entry to designated personnel only.
4. CCDDR's cleaning service will be cleaning and disinfecting the office lobbies and bathroom areas (accessible by the public) on a regular basis. Additional cleaning and disinfecting may be required periodically and when warranted as well. The cleaning service will be instructed to utilize appropriate PPE and to disinfect all appropriate surfaces (doorknobs, counter tops, etc.). Designated personnel will

disinfect kitchen, break, and common use areas daily. Appropriate PPE shall be utilized when disinfecting kitchen, break, and other common use areas.

5. All communications with visitors to the office shall be done through the communication port through the security glass. In the event that there is no one in the offices to receive phone calls, office phones will be forwarded to designated personnel, and the office door lock will be initiated remotely if no one is working at the front desks. The designated personnel will take messages and notify the appropriate staff member for whom the call was intended. Employees should use their cell phone's feature and mechanism to conceal their cell phone numbers on the receiver's end when returning calls.
6. Contractors may be allowed to enter restricted areas, which are considered to be beyond the lobby areas and point of entry to employee designated work areas, offices, and workstations, only if necessary and required to perform their duties. Contractors entering restricted areas are required to wear facemasks/cloth coverings and gloves. Areas where the contractors worked shall be cleaned and disinfected immediately after departure by CCDDR's cleaning service or designated personnel. Please contact the Executive Director if there is any uncertainty about contractors entering restricted areas.
7. Any employee, contractor, Board member, or visitor in any CCDDR office or building showing symptoms of COVID-19 will be asked to leave.
8. Employee and Board meetings will be held by telephone or video conferencing, if possible. If employee and Board meetings are conducted in-person, attendance will be collected verbally or visually. Attendance will not be tracked through passed-around sign-in sheets or mobile devices. During any in-person employee and Board meeting, participants must remain at least six (6) feet apart.
9. Employees and Board members must avoid physical contact with others and shall direct others to increase personal space to at least six (6) feet, where possible. Facemasks/cloth face coverings will be required at in-person meetings where six (6) feet distancing cannot be consistently maintained or other circumstances exist making mask use essential.
10. Employees will be encouraged to stagger breaks and lunches, if practicable, to reduce the size of any group at any one time. Only one person at a time will be allowed in the kitchen area of the Camdenton office, due to the limited space.
11. Employees should limit the use of coworkers' equipment or other tools. To the extent equipment or other tools must be shared, employees will clean and disinfect equipment or other tools before and after use. When cleaning and disinfecting equipment and other tools, consult manufacturing recommendations for proper cleaning techniques and restrictions.
12. Employees must use facemasks/cloth face coverings in high traffic areas, public/common areas (including restrooms), hallways, moving about the office, when with clients, and wherever it is not possible to maintain six (6) feet of social distance. Facemasks/cloth face coverings may be further required should circumstances warrant.
13. Employees must wear facemasks/cloth coverings if attending work-related events, meetings, or activities not sponsored by CCDDR. CCDDR may restrict/prohibit employees from attending these work-related events, meetings, or activities should circumstances warrant.
14. Employees are encouraged to work remotely, when possible and practical. **DO NOT BRING CHILDREN INTO THE WORKPLACE.** Employees should use the employee-only entrance when entering and exiting the Camdenton office. CCDDR may implement staggered shifts for employee entry into and use of its offices and applicable portions of buildings if circumstances warrant.
15. Employees are encouraged to minimize ride sharing while performing CCDDR-related duties. While in vehicles, employees must ensure adequate ventilation and wear a mask when travelling with others.
16. Employees must sanitize their work areas upon arrival, throughout the workday, and upon departure.
17. Employees must sanitize their hands before starting and after completing their workday. Employees must also sanitize their hands periodically throughout the workday, whenever warranted and appropriate.
18. In-person contact with clients not established or defined in DDD guidance or directives for conducting Support Coordination duties (including, but not limited to, transporting clients) must be approved by the TCM Supervisor or Executive Director. Approval will be reserved to EMERGENCY

CIRCUMSTANCES ONLY. If clients indicate they may be sick, please have them contact the appropriate health care professional(s), provider(s), caregiver(s), or EMS. Employees may assist them (remotely) in contacting the appropriate providers/caregivers or EMS.

Exposure Situations

Employee Exhibits COVID-19 Symptoms

If an employee exhibits COVID-19 symptoms, the employee must leave the workplace immediately if at work when the employee first experiences symptoms, or stay at home if the employee first experiences symptoms outside of the workplace.

An employee experiencing symptoms may work remotely (if possible) until at least 10 days have passed since the onset of symptoms and at least 24 hours have passed since resolution of symptoms without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). Employees may be required to be tested and/or provide CCDDR with appropriate documentation from their medical provider before returning to the office. If an employee tests negative, the employee must provide CCDDR with appropriate documentation from the employee's medical provider before returning to the office if at least 10 days have not passed since the onset of symptoms and at least 24 hours have not passed since resolution of symptoms without the use of fever-reducing or other symptom-altering medicines.

Employee Tests Positive for COVID-19

An employee who tests positive for COVID-19 will be directed to stay at home and work remotely, if possible. Employees who test positive and are directed to care for themselves at home may return to work when:

- At least 10 days have passed since the employee's positive test
- At least 24 hours have passed since last fever without the use of fever-reducing medications
- CCDDR is provided appropriate documentation from the medical provider confirming it has been at least 10 days since the employee's positive test

If an employee has tested positive, CCDDR will conduct an investigation to identify co-workers and work-related third parties who may have been in close contact with the confirmed-positive employee in the prior two (2) days and direct those employees who were in close contact with the confirmed-positive employee to work remotely for 14 days from the last date of close contact with that employee and monitor their symptoms. If applicable, CCDDR will also notify any contractors, vendors/suppliers, visitors, or clients/client families who may have been in close contact with the confirmed-positive employee.

The Centers for Disease Prevention and Control ("CDC") have stated that some individuals who test positive for COVID-19 may remain infectious longer than 10 days. Specifically, the CDC has advised that those who test positive for COVID-19 and: (1) who experience more severe illness and symptoms; or (2) who are severely immunocompromised, may be contagious for longer than those who tested positive for COVID-19 but experience mild symptoms and/or who are not immunocompromised. Accordingly, the CDC recommends that:

- An individual with severe illness and symptoms from COVID-19 extend self-isolation for up to 20 days after symptom onset or the employee's first positive test result; and
- An individual is severely immunocompromised remain in self-isolation until that employee receives two (2) negative COVID-19 test results from consecutive respiratory specimens collected more than 24 hours apart.

Employees who test positive for COVID-19 and who: (1) experience severe COVID-19 symptoms; or (2) have a medical condition that renders them severely immunocompromised, should contact the Human Resource Officer or Executive Director to discuss safely returning to work and potential accommodations that may be available to them.

Employees who test positive and have been hospitalized may return to work when directed to do so by their medical care provider. CCDDR must be provided the appropriate documentation from the medical care provider before returning to work.

Employee Has Close Contact with an Individual Who Has Tested Positive for COVID-19

Any employee who learns that he or she may have come into close contact with an individual who has tested positive for COVID-19 must alert a manager or supervisor. Employees who have come into close contact with an individual who has tested positive for COVID-19 (co-worker or otherwise) will be directed to work remotely for 14 days from the last date of close contact with that individual. Close contact is defined by the CDC as someone who was within 6 feet of an infected person for at least 15 minutes starting from 2 days before illness onset (or, for asymptomatic people, 2 days prior to the positive specimen collection) until the time the patient is isolated.

Employees may refer to applicable CCDDR FMLA, FFCRA, Paid-Time-Off, or other Leave of Absence Policies if unable to work remotely.

Confidentiality/Privacy

Except for circumstances in which CCDDR is legally required to report workplace occurrences of communicable disease, the confidentiality of all medical conditions will be maintained in accordance with applicable law and to the extent practical under the circumstances. When it is required, the number of persons who will be informed an unnamed employee has tested positive will be kept to the minimum needed to comply with reporting requirements and to limit the potential for transmission to others. CCDDR reserves the right to inform other employees an unnamed co-worker has been diagnosed with COVID-19 if the other employees might have been exposed to the disease so the employees may take measures to protect their own health. CCDDR also reserves the right to inform contractors, vendors/suppliers, visitors, or clients/client families an unnamed employee has been diagnosed with COVID-19 if they might have been exposed to the disease so those individuals may take measures to protect their own health.

This COVID-19 Plan shall remain in full effect until rescinded or revised by the CCDDR Board of Directors.