

**CHAMPAIGN COUNTY BOARD
COMMITTEE AGENDA**

POLICY, PERSONNEL & APPOINTMENTS

Wednesday October 5, 2005 – 7:00 p.m.

Meeting Room 1, Brookens Administrative Center

CHAIR: *Tom Betz*

MEMBERS: *Betz, Beckett, Busboom, Fabri, Feinen, Knott, Moser, Putman, Wysocki*

AGENDA ITEM

Page No.

I. CALL TO ORDER

II. APPROVAL OF AGENDA/ADDENDUM

III. APPROVAL OF MINUTES - (to be distributed)

IV. PUBLIC PARTICIPATION

V. MONTHLY REPORTS

A. County Clerk Fees Report – (to be distributed)

VI. COUNTY BOARD

A. Appointments/Reappointments

1. Champaign – Urbana MTD

(to fill Laurel Prussing's term ending 12-31-2008)

- John Chato 1-2
- Morton Dorothy 3-6
- Dale Woodworth 7-8

**2. Eastlawn Memorial Park Burial Association Resignations
effective 9-22-2005**

- Robert Funkhouser 9
- Lynda Hatter 10

3. Longbeach Mutual D.D. term ending 8-31-2008

- Norman Uken 11

VII.	<u>ADMINISTRATOR’S REPORT</u>	
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	B. Champaign County EEO Report & EEO Development Update (to be distributed)	
VIII.	<u>COURT SERVICES</u>	
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IX.	<u>CHAIR’S REPORT</u>	
	A. Disparity Study – Summary of Peoria County Study & Process for Study (to be distributed)	
	B. Noxious Weed Ordinance & Approval of Noxious Weed Superintendent	14-19
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X.	<u>LEGISLATIVE REPORT</u>	
XI.	<u>OTHER BUSINESS</u>	
	A. NAcO Prescription Drug Discount Card	20-29
	B. Closed Session pursuant to 5ILCS 120/2(c)1 to consider the employment, compensation, discipline, performance, or dismissal of an employee.	
XII.	<u>DETERMINATION OF ITEMS FOR COUNTY BOARD CONSENT AGENDA</u>	
XIII.	<u>ADJOURNMENT</u>	

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM

PLEASE PRINT IN BLACK INK

NAME: John C. Chato PHONE: 344-6803 FAX: —

ADDRESS: 714 W. Vermont Ave., Urbana, IL 61801
Street City State Zip

NAME OF APPOINTMENT BODY OR BOARD: C-U MASS Transit District Board

TITLE OF APPOINTMENT REQUESTED: Board member

BEGINNING DATE OF TERM REQUEST: March 2005 ENDING DATE: Dec. 31, 2009

Champaign County appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.

The Champaign County Board

1. What experience and background do you have which you believe qualifies you for this appointment/reappointment?

I am a life-long user of public transportation, not only in Champaign-Urbana, but also in several cities around the world. In addition, my engineering training would help to evaluate technical problems concerning the equipment, e.g. new types of buses.

2. What do you believe is the role of a trustee/commissioner/board member and how do you envision carrying out the responsibilities of that role?

As a Board member I will have to work with the other Board members to develop our MTD system to attract more users. This means to improve the service, within our financial means.

3. What is your knowledge of the district/association's operations, specifically property holdings and management, staff, taxes, fees?

Certainly not enough, but I can still learn fast!

4. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the board or commission for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.)

Yes _____ No

If yes, please explain:

5. Would you be available to regularly attend the scheduled meeting of the Board district?

Yes No _____

If no, please explain:

The facts set forth in my application for appointment are true and complete. I understand this application is a document of public record that will be on file in the County Board Office.

John C. Chats
Signature

Date: *January 28, 2005*

RECEIVED

AUG 18 2005

By _____
COUNTY BOARD

Morton F. Dorothy
2413 E. Illinois
Urbana, IL 61802

August 17, 2005

Ms. Barbara Wysocki, Chair
Champaign County Board
1776 E. Washington
Urbana, IL 61802

Dear Ms. Wysocki:

I am interested in the becoming a trustee of the Mass Transit District. An Appointment Request Form is attached.

I am a environmental attorney and small business owner. From 1985 until 1993 I rode bicycle and the busses as my main mode of transportation, when I had a job with regular hours. Now that I am self-employed I live in the hectic world of the automobile, but still see myself as an MTD rider.

The trustees should provide oversight to make certain that the management is spending public money wisely, to provide service the public wants, within the proper scope of the District's authority. The trustees should seek to reduce the burden on property tax payers by trying to make the system run on grants and user fees. If the District were to annex large areas requiring little additional operating expense, the trustees should consider reducing the tax rate on the entire District.

I have specific ideas on routes and schedules I would like to see management consider. I would reduce bus congestion in the central area by eliminating the long, cross-town bus routes in favor of short, feeder routes to the central core, which would be served by very frequent busses on short, simple routes designed to provide transfers and service oriented toward the congested central area. I would like to:

- Add an outer ring bus line that would connect destinations near the fringe of the service area directly, eliminating the need for passengers to go through the central area, and providing more useful service for people living in the fringe areas.
- Provide very frequent, simple, reliable service within the central area (Campus, Downtown Champaign, Downtown Urbana).
- Provide feeder service into the central area.
- Split the long cross-town routes, so that feeder busses would not cross the

central area, eliminating the gaggles of busses that cross the central area together every thirty minutes.

- Speed up feeder busses by making the routes go directly from the fringe to the central area, without looping around at the fringe.
- Add more feeder routes, serving the areas that are now covered by looping.
- Wherever possible, use vans and smaller busses on the feeder routes, improving fuel economy, and reducing future capital costs.
- Create a bus corridor from Lincoln Square to Illinois Terminal along Main and White streets, removing most bus traffic on Springfield and University.

Sincerely,

Morton F. Dorothy

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM

PLEASE PRINT IN BLACK INK

NAME: MORTON F. DOROTHY PHONE: ^{office} 217/384-1010 FAX: _____
_{home} (217) 384-0642

ADDRESS: 2413 E. ILLINOIS URBANA IL 61802
Street City State Zip

NAME OF APPOINTMENT BODY OR BOARD: MTD

TITLE OF APPOINTMENT REQUESTED: TRUSTEE

BEGINNING DATE OF TERM REQUEST: 11/2000 ENDING DATE: _____

Champaign County appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.

The Champaign County Board

1. What experience and background do you have which you believe qualifies you for this appointment/reappointment?

I AM AN ENVIRONMENTAL ATTORNEY AND SMALL BUSINESS OWNER. FROM 1985 - 1993, I RODE BICYCLE AND THE MTD AS MY MAIN MODE OF TRANSPORTATION, AT A TIME WHEN I HAD A JOB WITH REGULAR HOURS. ALTHOUGH I NOW LIVE IN THE HECTIC WORLD OF THE SELF-EMPLOYED, I STILL SEE MYSELF AS AN MTD RIDER.

2. What do you believe is the role of a trustee/commissioner/board member and how do you envision carrying out the responsibilities of that role?

THE TRUSTEES SHOULD PROVIDE OVERSIGHT TO MAKE CERTAIN THAT THE MANAGEMENT IS SPENDING PUBLIC MONEY WISELY, TO PROVIDE SERVICE THE PUBLIC WANTS, WITHIN THE PROPER SCOPE OF THE DISTRICT'S AUTHORITY. THE TRUSTEES SHOULD SEEK TO REDUCE THE BURDEN ON PROPERTY TAXPAYERS BY TRYING TO MAKE THE SYSTEM RUN ON GRANTS + USER FEES.

- 3. What is your knowledge of the district/association's operations, specifically property holdings and management, staff, taxes, fees?

I HAVE SPECIFIC IDEAS ON ROUTES + SCHEDULES, I WOULD LIKE TO SEE MANAGEMENT CONSIDER. I WOULD REDUCE BUS CONGESTION IN THE CENTRAL AREA BY ELIMINATING THE LONG, CROSS-TOWN BUS ROUTES IN FAVOR OF SHORT, FEEDER ROUTES TO THE CENTRAL AREA, WHICH WOULD BE SERVED BY VERY FREQUENT BUSES ON ROUTES DESIGNED TO PROVIDE TRANSFERS + SERVICE TO THE CENTER.

- 4. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the board or commission for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.)

Yes ___ No X

If yes, please explain:

- 5. Would you be available to regularly attend the scheduled meeting of the Board district?

Yes ___ No X

If no, please explain:

The facts set forth in my application for appointment are true and complete. I understand this application is a document of public record that will be on file in the County Board Office.

MORTON F. DOWDY

Signature

Date: 8/7/05

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM

NAME: Dale Woodworth PHONE 217-898-1087 FAX _____

ADDRESS 111 W. Washington St. Champaign IL 61820
Street City State Zip

TITLE OF APPOINTMENT REQUESTED: MTD Board Trustee

BEGINNING DATE OF TERM REQUESTED: ~~4-05~~ Open

ENDING DATE OF TERM REQUESTED: ~~12-08~~ Open

Champaign County appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATES MUST COMPLETE AND SIGN APPLICATION.

THE CHAMPAIGN COUNTY BOARD

1. What experience and background do you have which you believe qualifies you for this appointment/reappointment?
My family has been in Champaign County since before the Civil War, and has owned and operated a trucking company for over 50 years. For over the past 10 years I have lived in Champaign, and have relied on MTD for my transportation needs. In high school, I served as student liason to the school board (Unit 7.) Also, I have a degree in Business Administration.

2. What do you believe is the role of a trustee/commissioner/board member and how do you envision carrying out the responsibilities of that role?
I believe the role of any board member, either corp or public, should be to set goals for the future and the ways to attain those goals efficiently through their appointed administrators, not the other way around. The board needs as much independent information as possible to make well informed decisions. They should not be a rubber stamp committee.

3. What is your knowledge of the district/association's operations, specifically property holdings and management, staff, taxes and fees?

By riding MTD daily, I am very aware of their operation. I read everything that is printed in the local news about MTD. I also sense that the majority of CU full time residents do not hold MTD in high regard or use its services. As a board member, that last thought is something I would like to work on and change. I also know MTD has to follow Illinois Statute 70ILCS 3610/4, and 3.1

4. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the board or commission for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.)

_____ yes no

If yes, please explain.

5. Would you be available to regularly attend the scheduled meetings of board district?

yes _____ no

If no, please explain.

The facts set forth in my application for appointment are true and complete. I understand this application is a document of public record that will be on file in the County Board Office.

Dale Woodward

Signature

8-22-05

Date

Champaign County Board Chair
Brookens Administration Center
1776 East Washington
Urbana, IL 61802

September 22, 2005

County Board Chair,

I, Robert Funkhouser, am submitting my resignation to the East Lawn Burial Park Association Board of Trustees as of September 22, 2005.

Respectfully,

A handwritten signature in cursive script that reads "Robert Funkhouser". The signature is written in black ink and is positioned to the left of the typed name.

Robert Funkhouser
141 Shady Lawn
Rantoul, IL 61866

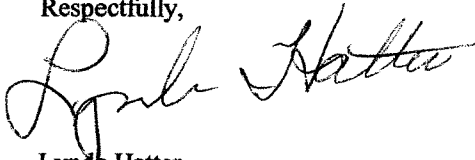
Champaign County Board Chair
Brookens Administration Center
1776 East Washington
Urbana, IL 61802

September 22, 2005

County Board Chair,

I, Lynda Hatter, am submitting my resignation to the East Lawn Burial Park Association Board of Trustees as of September 22, 2005.

Respectfully,

A handwritten signature in cursive script, appearing to read "Lynda Hatter".

Lynda Hatter
2708 E. California Ave.
Urbana, IL 61802

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Fire, Drainage, Cemetery, & Farmland Assessment

PLEASE PRINT IN BLACK INK

NAME: Norman Uken PHONE: _____ FAX: _____

ADDRESS: 2419 County Road 1800 E Urbana Illinois 61801
Street City State Zip

NAME OF APPOINTMENT BODY OR BOARD: Longbranch Mutual Drainage District

TITLE OF APPOINTMENT REQUESTED: Temporary Commissioner

BEGINNING DATE OF TERM REQUEST: _____ ENDING DATE: _____

Champaign County appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.

The Champaign County Board

1. What experience and background do you have which you believe qualifies you for this appointment?

I am a landowner within the above Drainage District and I am familiar with the drainage patterns within the same and the agricultural operations within the same.

2. What is your knowledge of the District's operations, property holdings, staff, taxes, and fees?

I am familiar with the proposed District's boundaries, properties, landowners, drainage facilities, and drainage history.

3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the board or commission for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.)

Yes _____ No XXXX

I yes, please explain.



Signature

Prepared By: E. Boatz
9/27/2005

**VACANT POSITIONS LISTED ON DATA BASE
AS OF SEPTEMBER 27, 2005**

FUND	DEPT.	POSITION TITLE	HOURLY RATE	REGULAR ANNUAL HOURS	REGULAR ANNUAL SALARY	FY2005 ANNUAL HOURS	FY2005 ANNUAL SALARY
80	22	DEPUTY COUNTY CLERK	\$9.18	1950	\$17,901.00	1957.5	\$17,969.85
80	22	DEPUTY COUNTY CLERK	\$9.18	1950	\$17,901.00	1957.5	\$17,969.85
80	22	DEPUTY COUNTY CLERK	\$9.18	624	\$5,728.32	626.4	\$5,750.35
80	25	APPRAISER/ANALYST	\$13.98	1950	\$27,261.00	1957.5	\$27,365.85
80	30	LEGAL CLERK	\$9.18	1040	\$9,547.20	1044	\$9,583.92
80	40	CLERK	\$9.18	1950	\$17,901.00	1957.5	\$17,969.85
80	41	SENIOR ASSISTANT STATE'S ATTORNEY	\$24.06	1950	\$46,917.00	1957.5	\$47,097.45
80	51	ASSISTANT DIRECTOR-PROB CRT SRV	\$27.10	1950	\$52,845.00	1957.5	\$53,048.25
80	51	COURT SERVICES OFFICER	\$16.29	1950	\$31,765.50	1957.5	\$31,887.68
80	51	COURT SERVICES OFFICER	\$16.29	1950	\$31,765.50	1957.5	\$31,887.68
80	51	COURT SERVICES OFFICER	\$16.29	1950	\$31,765.50	1957.5	\$31,887.68
80	51	COURT SERVICES OFFICER	\$16.29	1950	\$31,765.50	1957.5	\$31,887.68
80	52	COURT SERVICES OFFICER	\$14.57	1950	\$28,411.50	1957.5	\$28,520.78
80	52	SENIOR COURT SERVICES OFFICER	\$16.32	1950	\$31,824.00	1957.5	\$31,946.40
80	52	SENIOR COURT SERVICES OFFICER	\$16.32	1950	\$31,824.00	1957.5	\$31,946.40
80	140	CLERK	\$9.18	1950	\$17,901.00	1957.5	\$17,969.85
80	140	INMATE SERVICES AIDE	\$9.06	2080	\$18,844.80	2088	\$18,917.28
80	140	LIEUTENANT--CORRECTIONS	\$30.36	2080	\$63,148.80	2088	\$63,391.68
83	60	MECHANIC	\$18.84	2080	\$39,187.20	2088	\$39,337.92
671	30	LEGAL CLERK	\$9.18	1950	\$17,901.00	1957.5	\$17,969.85
671	30	LEGAL CLERK	\$9.18	1950	\$17,901.00	1957.5	\$17,969.85
671	30	SUPERVISOR	\$13.06	1950	\$25,467.00	1957.5	\$25,564.95
			\$322.27		\$615,473.82		\$617,841.05

CHAMPAIGN COUNTY PROBATION AND COURT SERVICES

Joseph J. Gordon
Director

Probation Services
Courthouse
101 E. Main
Urbana, IL 61801
Phone: (217) 384-3753
Fax: (217) 384-1264

Detention Services
400 S. Art Bartell Rd.
Urbana, IL 61802
Phone: (217) 384-3780
Fax: (217) 384-8617

Date: September 26, 2005

TO: Mr. Tom Betz, Chairman
Members of the Policy, Personnel and Appointments Committee

FR: Joseph J. Gordon

RE: Position Openings

Ms. Shannon Wolfe, a Court Services officer assigned to the Adult Supervision Unit, has accepted a position with the Urbana Police Department and will be leaving the employ of the County during October 2005.

Mr. David Roesch, an Assistant Superintendent at the Juvenile Detention Center, has accepted a position with the Urbana Police Department and will be leaving the employ of the County during January 2006.

Mr. Mark Arnett, a Court Services officer assigned to the Juvenile Detention Center, will be leaving the employ of the County in October 2005 to begin employment with the Illinois Department of Corrections.

We request permission to fill the vacancies created by these three resignations, but would note, that once approved, all positions are first posted within our own department. These vacancies could cause movement for our other line staff officers. Once all potential internal shifting has occurred, it may be that there are vacancies in another departmental unit. I would like to have this noted and ask that the vacancies, no matter where located in our Department, can be filled.

I will be available at the October Policy, Personnel and Appointments Committee meeting should you have any questions.

Thank you for your consideration of this request.

Julia R. Rietz
State's Attorney

Steven D. Ziegler
First Assistant State's Attorney

Joel Fletcher
Senior Assistant State's Attorney
email: jfletcher@co.champaign.il.us



Civil Division
Brookens Administrative Center
1776 East Washington Street
Urbana, Illinois 61802-4581
Phone: (217) 384-3776
Fax: (217) 384-3896

**Office of
State's Attorney
Champaign County, Illinois**

To: Barb Wysocki, Policy Committee
From: Joel Fletcher
Re: Noxious Weed Law
Date: September 26, 2005

The Noxious Weed Law (505 ILCS 100/1, et seq.) requires the county board to appoint a noxious weed superintendent to oversee efforts to curtail certain predatory weeds in Champaign County. The Environment and Land Use Committee referred this appointment to the Policy Committee. Barb Wysocki asked me for additional information about this position. I hope this information is helpful. Please feel free to contact me if you have questions.

Role:

The county is to appoint a noxious weed superintendent by March 15 of each year. See 8 Ill. Admin. Code 220.110. The county is to set the tenure, compensation, reimbursement, and bonding requirements for the superintendent. See 505 ILCS 100/8; 8 Ill. Adm. Code 220.90, 220.140. At this point, the county board has not established any tenure, reimbursement, or bonding requirements, though the Environment and Land Use Committee expressed a preference for a volunteer superintendent who would be reimbursed for actual expenses (mileage, etc.).

Duties:

You asked for a summary of the duties of the noxious weed superintendent. By administrative rule, the superintendent shall:

- “
- a) Examine all lands, highways, roads, alleys, and public grounds in the territory over which the [county] has jurisdiction for the purpose of determining if the [county] is in compliance with the Act and this Part.
 - b) Become acquainted with the location of all noxious weeds within the [county].
 - c) Through personal contact, by letter, telephone, or other means, encourage noxious weed control or eradication by all persons so responsible within the [county] area.

- d) Cooperate with other Control Authorities, University of Illinois Extension representatives land owners and users, government entities and others to further the purposes of the noxious weed control program.
- e) Investigate complaints received by himself, the [county] or the Director [of the Department of Agriculture]. On complaints received and forwarded to him by the Director, the superintendent shall report his findings to the Director.
- f) Take samples, pictures, or pressed specimens of the noxious weeds in those cases where he must control such weeds because of the failure of the property owner to act. These samples must be kept and maintained as evidence for a period of at least two years following the application of the control or eradication procedures.
- g) Give individual notice in writing on the form prescribed by the Director to the owner, occupant, agent of any owner of non-resident lands, or proper public official requiring noxious weeds to be controlled or eradicated in the manner and within the time or times specified in the notice.”

8 Ill. Adm. Code 220.150

The superintendent is also responsible for:

- a) Filing an annual report with the county and the Department of Agriculture detailing the name and location of infestations of noxious weeds; the treatments used on infestations, together with costs and results; and a detailed description of the noxious weed situation in the county, together with recommendations for their control and eradication. See 8 Ill. Admin. Code 220.160.
- b) Preparing a comprehensive work plan each year for the following year, including a map of the county with detailed information on the location and type of noxious weeds; suggestions on eradication or control methods; information and dates for general weed notices; a suggested budget; a calendar of events; and other materials pertinent to the noxious weed program. 8 Ill. Admin. Code 220.170.

Qualifications:

In addition to any qualifications set by the county board, the superintendent must be certified by the Director of the Department of Agriculture as qualified to detect and treat noxious weeds. See 505 ILCS 100/8; 8 Ill. Admin. Code 220.90. The county is to use the attached form to submit the superintendent’s name and qualifications to the Department of Agriculture. See 8 Ill. Admin. Code 220.120; 8 Ill. Admin. Code, Part 220, Illustration A. The superintendent must be familiar with the weeds determined by the Department of Agriculture to be noxious, and must be familiar with the recognized methods for their control and eradication. 8 Ill. Admin. Code 220.130. If the superintendent is to be engaged in the application of pesticides to control or eradicate noxious weeds, he or she must be licensed to do so. 8 Ill. Admin. Code 220.130.

The person at the Illinois Department of Agriculture responsible for administering this program is out of the office until this Thursday. I will speak with him about the qualifications for a noxious weed superintendent later this week, and update this memo, if necessary.

Westlaw

8 IL ADC 220 Illus.A

Page 1

8 Ill. Adm. Code 220.Illus.A
Ill. Admin. Code tit. 8, § 220.Illus.A

**WEST'S ILLINOIS ADMINISTRATIVE CODE
TITLE 8. AGRICULTURE AND ANIMALS
CHAPTER I. DEPARTMENT OF AGRICULTURE
SUBCHAPTER F. NOXIOUS WEEDS
PART 220. ILLINOIS NOXIOUS WEED LAW**
Current with amendments received through September 23, 2005.

220.ILLUSTRATION A Application for Weed Control Superintendent Certification

STATE OF ILLINOIS
DEPARTMENT OF AGRICULTURE
Bureau of Environmental Programs
P.O. Box 19281
Springfield, Illinois 62794-9281

APPLICATION FOR WEED CONTROL SUPERINTENDENT CERTIFICATION

Please typewrite or print.

1. _____

Name of Applicant

2. _____

County in which you live Telephone Number

3. _____

Home Address City State Zip Code

4. _____

Business Name and Address Telephone Number

5. Please list all the previous employment for the last five positions. (List most recent job first.)

[Note: The following TABLE/FORM is too wide to be displayed on one screen.
You must print it for a meaningful review of its contents. The table has been

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8 IL ADC 220 Illus.A

Page 2

8 Ill. Adm. Code 220.Illus.A
Ill. Admin. Code tit. 8, § 220.Illus.A

divided into multiple pieces with each piece containing information to help you assemble a printout of the table. The information for each piece includes: (1) a three line message preceding the tabular data showing by line # and character # the position of the upper left-hand corner of the piece and the position of the piece within the entire table; and (2) a numeric scale following the tabular data displaying the character positions.]

***** This is piece 1. -- It begins at character 1 of table line 1. *****

	Employer (Name and Address)	Date Started	Date Terminated
A.	_____	_____	_____
B.	_____	_____	_____
C.	_____	_____	_____
D.	_____	_____	_____
E.	_____	_____	_____

1...+...10...+...20...+...30...+...40...+...50...+...60...+...7

***** This is piece 2. -- It begins at character 70 of table line 1. *****

Reason for Leaving

70...+...80...+...90...+...0.

6. Education

High School _____ Graduated _____

College _____ Graduated _____

Major _____ Minor _____

Other Advance Training _____

Additional Information: _____

I certify the above information to be true.

Signature Date

8 IL ADC 220 Illus.A

Page 3

8 Ill. Adm. Code 220.Illus.A
Ill. Admin. Code tit. 8, § 220.Illus.A

Date Approved: _____ Approved: _____

Director

Illinois Department of Agriculture

(Source: Amended at 26 Ill.Reg. 14644, effective September 23, 2002)

<General Materials (GM) - References, Annotations, or Tables>

8 ILAC § 220.Illus.A

8 IL ADC 220 Illus.A
END OF DOCUMENT

NACo Prescription Discount Card Overview

The National Association of Counties has contracted with Caremark to provide a prescription discount card for member counties to offer to their uninsured and underinsured residents. The rising cost of prescription drugs coupled with the growing population of the uninsured has created a crisis in our country. The National Association of Counties (NACo) has recognized an opportunity to help member counties offer a prescription discount card program, for minimal investment, to help uninsured and underinsured county residents save money on their prescriptions.

The NACo Prescription Discount Card provides the following benefits to program participants:

- Average savings of 20percent
- Extra savings available through mail service
- Savings on specialty medications
- No enrollment fees
- No age requirements
- No income requirements
- Family coverage with just one card
- Over 54,000 participating pharmacies
- All commonly prescribed medicine is covered
- Unlimited use
- Access to <https://naco.advancerx.com> to learn more about: Health topics/Participating retail pharmacies/Drug interactions/News articles from leading health journals.

The NACo Prescription Discount Card offers the following benefits for member counties offering the program:

- No enrollment fees
- No eligibility transmission required
- Marketing Kit including:
 - Pre-approved press releases
 - Promotional poster
 - Program participant letter/newsletter/e-mail copy
 - Card graphic
- Customer care support provided by Caremark
- Web site support
- Program participant ID cards co-branded with the county seal/logo

General Marketing Guidelines

The Marketing Kit provides pre-approved promotional collateral. If additional materials are required and developed, the material must be sent to NACo and Caremark for approval prior to use.

NACo Contact:

Andrew Goldschmidt
Director, Membership/Marketing
NACo--National Association of Counties
Phone: (202) 942-4221
E-mail: agoldschmidt@naco.org

Caremark Contact:

Cynthia Rathjen, Marketing Analyst
Phone: (480) 661-2249
E-mail: cynthia.rathjen@caremark.com

Program Name

Please use the following when referring to the discount card program by name:

- The NACo Prescription Discount Card Program
- The NACo Prescription Discount Card Program brought to you by [county name] County.
- The [insert county name] Discount Card Program in partnership with the National Association of Counties (NACo).

Program Statistics

Savings

It is important to set the correct expectation for potential program participants as to the savings available in this program. The following are the only approved savings statistics that can be quoted for the program.

- Average savings of 20percent compared to regular retail prices.
- Average savings of 14 percent off brand name medicine and an average savings of 34 percent off generic medicine compared to regular retail prices.
- Average savings of 20 percent and an average savings of 50 percent on select generics through mail service.

Participating Retail Pharmacies

Almost all large chain pharmacies and many independent pharmacies participate in the NACo Prescription Discount Card Program; except for Wal-Mart/Sam's Club. The following statistics reflect the participating retail pharmacies for the program nationwide.

- Over 54,000 participating retail pharmacies nationwide.
- Eight out of 10 retail pharmacies participate in the program.

Participating retail pharmacy statistics for a specific county are available on request.

Legal Disclaimers

Many states have laws regarding discount card programs such as the NACo Prescription Discount Card. The following disclaimers must be on all promotional materials to comply with state laws.

- **This plan is not insurance** – this must appear in at least 8-point bold font.
- **Savings are only available at participating pharmacies** – this must appear in at least 10-point bold font.

Promotional Strategies

The following strategies are only suggestions to consider when developing a discount card marketing plan.

Public Relations

A county can leverage existing relationships with local media to promote their program. This is a good option because it is inexpensive and provides good local exposure.

- Press Releases – two pre-approved press releases are included in the marketing kit. One is written to support the launch of the program and the second is written to gain exposure once the program is up and running for awhile. Please submit any original press releases to NACo and Caremark for approvals prior to release.
- Press Conferences – a Frequently Asked Questions (FAQ) section is included at the end of this document to assist you with handling questions from the media.

- Photo Opportunities/Events – in conjunction with the launch of the program, a county could organize an event at a local pharmacy, inviting the local press and others to be present when the new discount card is used in the county for the first time. A list of local independent pharmacies can be provided to assist you in coordinating such an event.
- Press Kits – all press kit contents that are not part of the marketing kit must be submitted to NACo and Caremark for approval prior to distribution.

Community Services

Prescription discount cards can be promoted and distributed through existing community services. These distribution locations leverage existing relationships in the community and these services may touch the lives of uninsured individuals.

Local meetings at community service locations for county residents to attend and get information on the program can also be a good promotional tool.

County Web Site

Advertising this program on the county Web site is recommended. This is very inexpensive and is an easy way to gain exposure for the program.

A banner ad can be used to provide a link from within a county Web site to the main program participant Web site for this program (<https://naco.advancepcs.com>). Please submit any Web site pages to NACo and Caremark for approval prior to posting the pages in production.

Including a list of county distribution locations for the discount cards on the Web site is also recommended. This provides county residents with an easy resource to find out where and how they can pick up a card. Furthermore, Caremark will link from the main program participant Web site to this page to provide a list of locations from which a county resident can pick up a card. This list will also be used by Caremark Customer Care to answer questions from county residents about how they can get a card for themselves.

County Events

Local events can be a good opportunity to promote the program and distribute discount cards. A good example of an event would be a county fair or health fair.

Direct Mail

Direct mailing is not included in the support services for this program; however, counties are welcome to develop a direct mail campaign as part of the promotional strategy. Direct mailings should include the ID card/brochure and a letter explaining that the county is providing this program for free to county residents. The marketing kit includes program participant copy that can be used in a letter to accompany the ID card in the mailing. Please submit all other materials to NACo and Caremark for approval prior to printing and mailing.

Radio/TV

Local television and radio advertising delivers a promotional message to a large audience; however, the cost of this type of promotion can be prohibitive. Many times advertising for this type of program qualifies as a public service announcement (PSA), which can cut the cost of the advertising. Another approach is to partner with a community service organization or charity to add the discount card promotion to an already planned advertising campaign.

Promotional Materials

Pre-approved promotional tools are included in the marketing kit. All new materials must be submitted to NACo and Caremark for approval prior to print and use.

Promotional Poster

Included in the marketing kit is an 11X17 promotional poster (pdf format) that can be further customized (using Acrobat or graphic design software) and posted within the community to raise awareness of the program. Any changes must be submitted to NACo and Caremark for approvals prior to use.

Program Participant Copy

Also included in the marketing kit is copy designed to be used directly with county residents via letter, e-mail, newsletters, etc. This is pre-approved copy that can be used directly with county residents to promote the program. It can be sent directly by the county or added to other community service organizations, charities communications or Web sites. Any changes or new copy developed must be submitted to NACo and Caremark for approvals prior to use.

Web Site Banner Ads

Consider working with community service and other local organizations to place banner advertisements on their Web sites. The banner advertisements may link to the county's Web page for the program or the main program participant Web site (<https://naco.advancepcs.com>).

Distribution Channels

Prescription discount cards benefit individuals who are uninsured or underinsured and who take prescription drugs regularly. This target market should be kept in mind when planning the distribution channels for the county discount card.

The Uninsured Market

Approximately 43.6 million Americans are without prescription coverage according to the 2002 U.S. Census. Another study conducted by Families USA found that over 80 million Americans did not have health insurance for all or part of 2002 and 2003. USA Families further discovered that approximately 26.3 million of these uninsured individuals were under the age of 65.

Uninsured individuals may be:

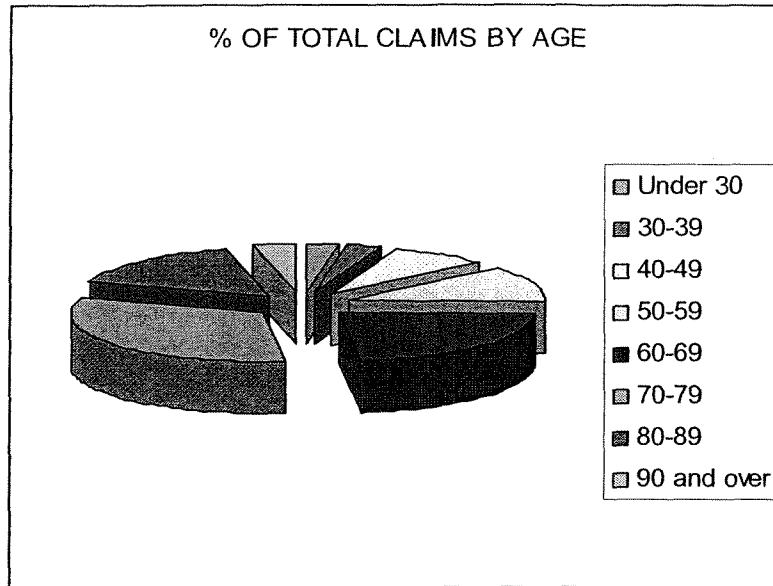
- Unemployed
- Part-time employee
- Low wage earner
- Small business owner or employee
- Self employed
- Retired
- Senior Citizen
- Medicare beneficiary

Demographics

Even though the discount card market primarily consists of seniors on Medicare, almost 20 percent of the market is age 40 through 59. Statistically, a majority (approx. 60 percent) of discount cardholders are female. See the chart below for detail of discount cardholders by age.

MARKETING STRATEGIES AND GUIDELINES

AGE	Under 30	30-39	40-49	50-59	60-69	70-79	80-89	90 and over
% OF TOTAL CLAIMS	2.78%	3.06%	7.75%	11.92%	22.55%	32.37%	15.90%	3.68%



Caremark Data

The Underinsured Market

Underinsured individuals have medical and prescription insurance, but their coverage may have limitations. A discount card can benefit an underinsured individual when an uncovered prescription drug is needed.

Examples of Distribution Channels

It is up to the county to identify and manage the distribution of the discount cards in the community. Listed below are some suggestions for distribution channels:

- Community services
- Physicians
- Pharmacies
- Senior centers
- Hospitals
- Clinics

- Churches/Synagogues, etc.
- Health fairs
- County Fairs
- Major athletic events (Marathons, etc.)
- Health Associations (local Heart Associations, etc.)
- Employment fairs

Frequently Asked Questions (FAQ)

General Questions

How much does the plan cost?

Your prescription discount card is provided to you free of charge by the county.

Does everyone in my family need an individual card?

No. Everyone in the family may use the same card if desired.

Can I use this card to get discounts on my pet's medications?

Yes, if your pet has been prescribed a medication, you may receive a discount on the medication by taking the prescription to a participating retail pharmacy.

I just received my card. Can I use it right away?

Yes, just use your card to start saving immediately. Present your prescription discount card at a participating retail pharmacy when you fill or refill your prescriptions.

I've lost my card. How can I get a replacement?

Please call toll free 1-877-321-2652.

Can I use my card to get discounts on over-the-counter products and non-prescription medications?

Not usually. However, discounts are available for many diabetic supplies.

How is this prescription discount program different from traditional prescription insurance?

This plan is not insurance; it is a prescription discount program. The card provides immediate discounts at the pharmacy. Upon presenting your card to the pharmacist, you will pay the lower of a discounted price or the pharmacy's regular retail price. There are no claim forms to fill out and no limit to the number of

times you can use the card. These discounts are available only at participating retail pharmacies.

Can I use my prescription discount card with my current insurance benefit to reduce my costs?

Your card cannot be used in conjunction with other insurance. However, you are able to use your card to purchase prescriptions that are not covered by these plans.

Pharmacy and Pricing Questions

Which pharmacies accept the card?

The prescription discount card is accepted at 54,000 retail pharmacies nationwide, including many of the leading chains. Ask your local pharmacy if they participate or call toll free 1-877-321-2652 to find out if a specific pharmacy participates in the program.

How much will I save?

While savings on each prescription may vary, you can save an average of 20 percent off of the pharmacy's regular retail prices for prescription drugs. In addition, you may save even more by choosing from our list of select medications. This list is comprised of products offering additional savings.

Will I always receive the lowest price?

Yes. You will receive the best price available to you through this program at the pharmacy. On occasion, pharmacies will price a particular medication lower than the discount rate provided by the card. If that occurs, you will receive the lower price.

Can I find out the discounted price of my prescriptions before going to the pharmacy?

Because prices can vary by location, only the actual pharmacy can tell you the exact price of the prescription. However, you can look up an estimated price for medications at <https://naco.advancerx.com>, or call toll free 1-877-321-2652.

Why did the price of my prescription change since the last time I purchased the prescription?

Drug prices are different from pharmacy to pharmacy. Even chains have different prices in their stores depending on the population they are servicing. Additionally, manufacturers' drug prices change periodically.

The brochure says I can save an average of 20 percent on my prescription medication. Will I save 20 percent on all my medications?

Because a pharmacy's retail price or usual and customary charge can differ greatly

by pharmacy, your exact percentage of savings may vary depending on the prescription drug and the price you have paid before.

About Specialty Pharmacy

What is specialty pharmacy and what kinds of services do they offer?

Specialty pharmacy offers delivery of injectable and select oral specialty medication and supplies to the location of your choice. Services include delivery notification and refill reminder calls to help you stay on your treatment plan. You'll also receive expert care services including counseling, follow up care calls, informative disease-related materials, and access to health experts 24 hours a day, seven days a week.

What drugs are offered through specialty pharmacy?

Medications for a variety of chronic conditions including multiple sclerosis, rheumatoid arthritis, cystic fibrosis, hemophilia, infertility, immunologic disorders, Crohn's disease, Gaucher disease, pulmonary hypertension, Fabry disease, MPS 1, blood dyscrasia, growth hormone deficiency, respiratory syncytial virus, hepatitis C and more are available through specialty pharmacy.

About the Caremark Mail Service Program

What is Mail Service?

With the **Caremark Mail Service** program, you can purchase up to a 90-day supply of select medications from the mail service pharmacy for a fixed price. It's easy to get started with mail service— just send in the mail service order form along with your original prescription, to Caremark. For a list of medications available through and to receive an order form please call toll free 1-877-321-2652 or visit <https://naco.advancerx.com>.