DRAFT

CHIPPEWA COUNTY

COUNTY BOARD

REGULAR MEETING

OCTOBER 14, 2025

CHIPPEWA COUNTY COURTHOUSE, RM 302

6:00 PM

NOTE: THE COUNTY BOARD MEETING WILL BE LIVE STREAMED ON YOUTUBE.

During the meeting you can access the video by using the link provided below.

https://youtube.com/live/5mZL6oqfycs?feature=share

1. CALL TO ORDER

2. PLEDGE OF ALLEGIANCE AND MOMENT OF SILENCE

3. ROLL CALL

Attendee Name	Organization	Title	Status	Arrived
Chuck Hull	Chippewa County	District 19, Chair	Present	
Jason Bergeron	Chippewa County	District 7, Vice-Chair	Present	
James Flater	Chippewa County	District 1	Present	
Pamela Guthman	Chippewa County	District 2	Present	
Duane Shoebridge	Chippewa County	District 3	Present	
Peter Gehring	Chippewa County	District 4	Present	
Dennis Bachman	Chippewa County	District 5	Present	
Timothy Goettl	Chippewa County	District 6	Present	
James Ericksen	Chippewa County	District 8	Present	
Joel Seidlitz	Chippewa County	District 9	Present	
Matthew Peterson	Chippewa County	District 10	Present	
Karen Lotts	Chippewa County	District 11	Present	
Charles Bomar	Chippewa County	District 12	Present	
Joseph Roshell	Chippewa County	District 13	Present	
David Kelly	Chippewa County	District 14	Present	
Lee Hennick	Chippewa County	District 15	Absent	
Rocky Kempe	Chippewa County	District 16	Present	
George Rohmeyer	Chippewa County	District 17	Present	
Brian Flynn	Chippewa County	District 18	Present	
James Meinen	Chippewa County	District 20	Present	
Kari Ives	Chippewa County	District 21	Present	

others present in Room 302 were Andy Albarado, Chris Elstran, Leah Simington, Andy Bauer, Scott Allen Toni Hohlfelder, Trenton Shutter, Ketty Clow, Lynda Schweikert, Beth Nyhus, Todd Pauls, Traci Bremness, Jaclyn Sadler

4. APPROVAL OF AGENDA

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Charles Bomar, District 12
SECONDER:	Joseph Roshell, District 13
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Hennick

5. MEMBERS OF THE PUBLIC WISHING TO BE HEARD

Darren Senn spoke in favor of Ordinance 08-25 and thanked the Highway Committee for their work on the ordinance.

Jason Darley spoke in favor of Ordinance 08-25 and thanked the Highway Committee for their work on the ordinance.

6. CONSENT AGENDA

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	James Flater, District 1
SECONDER:	Karen Lotts, District 11
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Hennick

1. Approval of Minutes

   County Board - Regular Meeting - Sep 9, 2025 6:00 PM

2. Next Scheduled Meetings:

   Budget Hearing - Thursday, November 6, 2025 at 6 pm

   Regular Meeting - Wednesday, November 12, 2025 at 6 pm - WI State Statute 59.11 (1)(a)

7. REPORTS

A. County Administrator Review and Update

1. 2026 Proposed Budget Update - Andy Albarado
   County Administrator, Andy Albarado, spoke on the proposed 2026 budget and explained that the full budget was presented to the Executive Committee.

B. Department Reports

1. Monthly Statements of Claim Filed with the County Clerk - Jaclyn Sadler

County Clerk, Jaclyn Sadler, informed the board that there were no new claims filed since the last meeting.

2. Chippewa County Website and Agenda Management Software Update - Andy Bauer and Jaclyn Sadler
   Information Technology Director, Andy Bauer provided an update to the board on the new Chippewa County website. County Clerk, Jaclyn Sadler provided an update on the Agenda Management Software.

C. General Reports

1. West Central Wisconsin Regional Planning Commission (WCWRPC) - Scott Allen
   Scott Allen, Executive Director of West Central Wisconsin Regional Planning Commission provided an annual report to the board.

8. BUSINESS ITEMS

1. Res. 33-25: Resolution Urging State Funding To Offset County Impacts Of Federal SNAP Changes - Bobbie Jaeger
   Beth Nyhus was available for questions from the board.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 21
SECONDER:	George Rohmeyer, District 17
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Hennick

2. Ord. 07-25: Ordinance To Amend Sections 12-09, 12-21, 12-71 And 12-72 Of The Chippewa County Code of Ordinances Regarding Stormwater Management - Second Reading - Lynda Schweikert
   Trenton Shutter was available for questions from the board.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 21
SECONDER:	James Flater, District 1
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Hennick

3. Ord. 08-25: Ordinance To Amend Section 58-34(a) Of The Chippewa County Code Of Ordinances Regarding No Parking Zones - First Reading - Chris Elstran
   Highway Commissioner, Chris Elstran explained the changes to the ordinance amendments for no parking zones. County Board Chair Chuck Hull thanked the Highway Committee and the public for working together to find a solution.

RESULT:	**FIRST READING**	**Next: 10/15/2025 9:30 AM**

4. Ord. 09-25: Ordinance To Amend Section 58-31(f) Of The Chippewa County Code of Ordinances Regarding Speed Zones - First Reading - Chris Elstran
   Highway Commissioner, Chris Elstran explained the changes to the ordinance amendment regarding the speed zone change.

RESULT:	**FIRST READING**	**Next: 10/15/2025 9:30 AM**

5. HR Policy Manual Revisions for Employee Benefits – First Reading - Toni Hohlfelder
   Human Resources Director, Toni Hohlfelder, explained the policy changes.

RESULT:	**FIRST READING**	**Next: 11/12/2025 6:00 PM**

6. HIPAA Policy Revisions - First Reading - Toni Hohlfelder
   Human Resources Director, Toni Hohlfelder, explained the policy changes.

RESULT:	**FIRST READING**	**Next: 11/12/2025 6:00 PM**

9. COUNTY BOARD CHAIR APPOINTMENTS

1. County Board Chair Appointment - Northwest ITBEC Toursim Advisory Committee

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Kelly, District 14
SECONDER:	Karen Lotts, District 11
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Hennick

10. COUNTY ADMINISTRATOR APPOINTMENTS

1. County Administrator Appointment - LCFM Committee

RESULT:	**APPROVED [19 TO 1]**
MOVER:	Jason Bergeron, District 7, Vice-Chair
SECONDER:	Kari Ives, District 21
AYES:	Hull, Bergeron, Flater, Guthman, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
NAYS:	Shoebridge
ABSENT:	Hennick

11. AGENDA ITEMS FOR FUTURE CONSIDERATION

12. ADJOURN

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	James Ericksen, District 8
SECONDER:	David Kelly, District 14
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Hennick

DRAFT

CHIPPEWA COUNTY

COUNTY BOARD

REGULAR MEETING

SEPTEMBER 9, 2025

CHIPPEWA COUNTY COURTHOUSE, RM 302

6:00 PM

NOTE: THE COUNTY BOARD MEETING WILL BE LIVE STREAMED ON YOUTUBE

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1. CALL TO ORDER

2. PLEDGE OF ALLEGIANCE AND MOMENT OF SILENCE

3. ROLL CALL

Attendee Name	Organization	Title	Status	Arrived
Chuck Hull	Chippewa County	District 19, Chair	Present	
Jason Bergeron	Chippewa County	District 7, Vice-Chair	Present	
James Flater	Chippewa County	District 1	Present	
Pamela Guthman	Chippewa County	District 2	Present	
Duane Shoebridge	Chippewa County	District 3	Present	
Peter Gehring	Chippewa County	District 4	Present	
Dennis Bachman	Chippewa County	District 5	Present	
Timothy Goettl	Chippewa County	District 6	Present	
James Ericksen	Chippewa County	District 8	Present	
Joel Seidlitz	Chippewa County	District 9	Present	
Matthew Peterson	Chippewa County	District 10	Present	
Karen Lotts	Chippewa County	District 11	Present	
Charles Bomar	Chippewa County	District 12	Present	
Joseph Roshell	Chippewa County	District 13	Present	
David Kelly	Chippewa County	District 14	Present	
Lee Hennick	Chippewa County	District 15	Present	
Rocky Kempe	Chippewa County	District 16	Present	
George Rohmeyer	Chippewa County	District 17	Present	
Brian Flynn	Chippewa County	District 18	Absent	
James Meinen	Chippewa County	District 20	Present	
Kari Ives	Chippewa County	District 21	Present	

others present in room 302 were Andy Albarado, Leah Simington, Chris Elstran, Andy Bauer, Toni Hohlfelder, Scott Nabberfeld, Brady Seidlitz, Bobbie Jaeger, Sheriff Hakes, Paul Brenner, Jordan Hallingstad, Todd Pauls, Traci Bremness and Jaclyn Sadler

4. APPROVAL OF AGENDA

Minutes Acceptance: Minutes of Sep 9, 2025 6:00 PM (Consent Agenda)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Charles Bomar, District 12
SECONDER:	Karen Lotts, District 11
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

5. MEMBERS OF THE PUBLIC WISHING TO BE HEARD

Leo Kurkowski spoke on Ordinance 08-25 - Highway S parking.
Mike Haanen spoke on Ordinance 08-25 - Highway S parking.
Jason Darley, co-owner of 1917, spoke on Ordinance 08-25 - Highway S parking.
William "Loopy" Kleich, co-owner of 1917, spoke on Ordinance 08-25 - Highway S parking.

6. CONSENT AGENDA

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	James Flater, District 1
SECONDER:	Pamela Guthman, District 2
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

1. Approval of Minutes

   County Board - Regular Meeting - Aug 12, 2025 6:00 PM

   County Board - Special Meeting - Aug 26, 2025 6:00 PM

2. AZO 07 - 25 : 2025-0011 Lis Rezone - Town of Lafayette

3. AZO 08 - 25 : 2025-0010 Lis Rezone - Town of Lafayette

4. AZO 09 - 25 : 2025-0009 Eckwright Rezone - Town of Lafayette

5. Upcoming Meetings:

   Tuesday, October 14, 2025 - 6 pm - Regular Meeting

   Thursday, November 6, 2025 - 6 pm - Budget Hearing

   Wednesday, November 12, 2025 - 6 pm - Regular Meeting - WI State Statute 59.11 (1)(a)

7. REPORTS

Minutes Acceptance: Minutes of Sep 9, 2025 6:00 PM (Consent Agenda)

A. County Administrator Review and Update

B. General Reports

1. 2024 Audit Report - April Anderson, Clifton Larson Allen, LLC
   April Anderson from Clifton Larson Allen, LLC presented the 2024 Audit Executive Summary to the board.

C. Department Reports

1. Monthly Claims - Jaclyn Sadler
   County Clerk, Jaclyn Sadler, informed the board that there were no new claims since the meeting.

2. Chippewa County Website and Agenda Management Software Update - Andy Bauer and Jaclyn Sadler
   Information Technology Director, Andy Bauer, and County Clerk, Jaclyn Sadler, provided an update to the board on the new website and agenda management software system. The board will receive more information and training at the October County Board meeting.

3. Finance Update (2nd Quarter) - Leah Simington
   Finance Director, Leah Simington, provided the 2nd quarter finance update to the board.

8. BUSINESS ITEMS

1. Res. 31 - 25 : Resolution To Establish Health Insurance Plan Funding For 2026 - Andy Albarado
   County Administrator, Andy Albarado, explained the resolution to the board and specifically explained the employee premiums and the four tier system.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Lee Hennick, District 15
SECONDER:	David Kelly, District 14
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

2. Res. 32 - 25 : Resolution Delegating Authority To CA To Enter Into Settlement Agreements With Opioid Defendants - Todd Pauls
   County Administrator Andy Albarado explained the resolution to the board.

Minutes Acceptance: Minutes of Sep 9, 2025 6:00 PM (Consent Agenda)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Pamela Guthman, District 2
SECONDER:	Joseph Roshell, District 13
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

3. Ord. 07 - 25 : Ordinance To Amend Sections 12-09, 12-21, 12-71 And 12-72 Of The Code Re Stormwater Management - First Reading - Lynda Schweikert

   Trenton Shutter, Program Engineer, spoke on the ordinance amendments.

RESULT:	**FIRST READING**	**Next: 10/14/2025 6:00 PM**

4. Ord. 08 - 25 : Ordinance To Amend Section 58-34(a) Regarding No Parking Zones - First Reading - Chris Elstran

   Motion made by Supervisor Flater to send Ordinance 08-25 back to the Highway Committee for further discussions. Second made by Supervisor Roshell. All Supervisors present voted yes. 20 Yes, 0 No, 1 Absent (Supervisor Flynn)

RESULT:	**REVIEWED**	**Next: 9/24/2025 10:00 AM**

5. Facility Use Policy Revisions - Second Reading - Scott Nabbefeld

RESULT:	**APPROVED [19 TO 1]**
MOVER:	James Flater, District 1
SECONDER:	David Kelly, District 14
AYES:	Hull, Bergeron, Flater, Guthman, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
NAYS:	Shoebridge
ABSENT:	Flynn

6. 9006 : HR Policy Manual Revision to Conceal Carry Policy - Second Reading - Toni Hohlfelder

RESULT:	**APPROVED [19 TO 1]**
MOVER:	James Flater, District 1
SECONDER:	Charles Bomar, District 12
AYES:	Hull, Bergeron, Flater, Guthman, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
NAYS:	Shoebridge
ABSENT:	Flynn

7. 9081 : HR Policy Revisions - Care Navigation & Pets in the Workplace - Second Reading - Toni Hohlfelder

Minutes Acceptance: Minutes of Sep 9, 2025 6:00 PM (Consent Agenda)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 21
SECONDER:	Joseph Roshell, District 13
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

8. The County Board will convene in Closed Session pursuant to Wisconsin State Statutes Sec. 19.85(1)(g) "Conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved." (Confer with attorney and take possible action on tentative settlement in Rolling Hills Equine, Inc. v. Western Region Recovery and Wellness Consortium).

RESULT:	**APPROVED [17 TO 3]**
MOVER:	Pamela Guthman, District 2
SECONDER:	Peter Gehring, District 4
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Peterson, Bomar, Roshell, Hennick, Kempe, Rohmeyer, Meinen, Ives
NAYS:	Seidlitz, Lotts, Kelly
ABSENT:	Flynn

9. The County Board will Reconvene to Open Session

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	James Flater, District 1
SECONDER:	David Kelly, District 14
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

10. Motion to approve the Settlement Agreement and Release and Purchase of Services Contract between the Western Region Recovery and Wellness Consortium and Rolling Hills Equine, Inc. as proposed, and to authorize the County Administrator adn Human Services Director to execute all necessary documents to effectuate the settlement and contract on behalf of the Western Region Recovery and Wellness Consortium.

Minutes Acceptance: Minutes of Sep 9, 2025 6:00 PM (Consent Agenda)

RESULT:	**APPROVED [16 TO 4]**
MOVER:	Kari Ives, District 21
SECONDER:	Pamela Guthman, District 2
AYES:	Hull, Bergeron, Flater, Guthman, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Hennick, Kempe, Rohmeyer, Ives
NAYS:	Shoebridge, Gehring, Kelly, Meinen
ABSENT:	Flynn

9. COUNTY BOARD CHAIR APPOINTMENTS

10. COUNTY ADMINISTRATOR APPOINTMENTS

1. County Administrator Appointment - Criminal Justice Collaborating Council

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Jason Bergeron, District 7, Vice-Chair
SECONDER:	David Kelly, District 14
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

11. AGENDA ITEMS FOR FUTURE CONSIDERATION

12. ADJOURN

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	James Ericksen, District 8
SECONDER:	Karen Lotts, District 11
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Hennick, Kempe, Rohmeyer, Meinen, Ives
ABSENT:	Flynn

Minutes Acceptance: Minutes of Sep 9, 2025 6:00 PM (Consent Agenda)

Department of Administration

Andy Albarado, County Administrator

October 8, 2025

TO: County Board Supervisors

FR: Andy Albarado

RE: 2026 Proposed Budget

On October 7, 2025, I presented the 2026 proposed budget to the Executive Committee. The next step in the budget process is to publish the budget so the County Board and the public have time to review it over the next month. On Thursday, November 6, 2025, at the budget hearing I will provide the same budget review for the public and County Board. That is when the County Board will have an opportunity to ask questions, debate and amend the proposed budget, prior to approving the budget. Keep in mind that if changes are proposed they have to result in a balanced budget. In other words, if you want to increase funding or reduce funding you would need to include where the funds are coming from for an increase or where the funds are going in case of a decrease. The tax levy will then be adopted on Wednesday, November 12, 2025. Note, the regular meeting will be held on Wednesday per Statue as we cannot meet on November 11th due to Veterans Day.

To review the budget, take a look at the October 7, 2025 Executive Committee agenda. That agenda packet contains all of the documents for the FY26 Proposed Budget.

As a reminder, when you view the actual budget reports from Springbrook, you will see there is a watermark on the right-hand side of the document. Unfortunately, this watermark falls directly over the 2026 budget amounts. We are not able to remove this watermark as this is an automatic feature within our agenda management software. However, there is another way to view the documents without the watermark.



1. Go to the agenda and minutes page and select the 10/07/2025 Executive Committee meeting.

2. From here if you click on the actual agenda item(s) (instead of the agenda packet) it will open up a clean document without the watermark.

If you have questions about the budget or want more clarification prior to the November meeting, please contact me.

Sincerely,

Andy Albarado
County Administrator

711 N. Bridge Street, Room 106
Chippewa Falls, WI 54729
aalbarado@chippewacountywi.gov
Ph: (715)
Fx: (715)

Attachment: CA Memo to CB RE 2026 Budget Docs 10-08-2025 (9237 : 2026 Proposed Budget Update - Andy Albarado)

Monthly Statements of Claim Filed with the County Clerk

County ordinance states the County Clerk shall report at the next session of the Board all statements of claim filed in the Clerk's Office since the last Board meeting. The ordinance language is included below for reference. Also attached for reference is the process for handling claims against the County.

Please note: This information is being provided as a report only. There will be no discussion or official action taken at this time regarding this matter. If you have additional questions, please contact the Corporation Counsel Division for assistance at 715-726-4595.

Ordinance Sec 2-60. Meetings of the County Board

(l) *Claims.*

(1) Any person having a demand or claim against the county shall make such demand or claim by following the procedure prescribed by Wis. Stats. § 59.64 and shall make out a statement thereof in writing pursuant to Wis. Stat. §59.07 and file the statement with the clerk pursuant to Wis. Stat. §893.80 (1)(b).

(2) Such claims shall be referred to the Corporation Counsel. The County Clerk shall report at the next session of the Board all claims filed in the Clerk's Office since the last County Board meeting, as set out in Wis. Stat. §59.64.

(3) *Payment of claim against county.* The Executive Committee is authorized to settle claims not to exceed $10,000 as provided in Wis. Stats. §59.52(12)(a). The Corporation Counsel is authorized to settle claims not to exceed $500 as provided for in Wis. Stats. §59.52(12)(b). When any claim against the county is allowed by the Board, it shall be the duty of the clerk to prepare a warrant or order on the treasurer for payment of the claim, such warrant or order to be signed by the clerk and countersigned by the Administrator.

Claims Submitted to the County Clerk Since the Last County Board Meeting

County Board Meeting: October 14, 2025

Claimant	Date Filed	Amount of Claim	Type of Claim	Department Involved

Attachment: Monthly Statement of Claims Filed 10.25 (9240 : Monthly Statements of Claim Filed with the County Clerk - Jaclyn Sadler)

Process for Handling Claims Against the County

WMMIC – Wisconsin Municipal Mutual Insurance Company

- Chippewa County is part owner of the insurance company, Wisconsin Municipal Mutual Insurance Company (WMMIC), which provides liability protection to the county. This includes general liability, auto and public official's errors and omissions coverage along with actions such as employment practices, auto accidents, law enforcement liability, ministerial and discretionary acts completed by our employees and elected officials.
- Chippewa County has been a founding member since WMMIC was formed in 1988.

Deborah Blevins – Corporation Counsel Legal Assistant

- In addition to general duties with the Corporation Counsel office, Blevins manages the liability insurance for Chippewa County.
- Since 2019, Blevins has served as Chippewa County's official representative with WMMIC and also serves as a member of the WMMIC Claims Committee.
    - Attends WMMIC's quarterly meetings and yearly board meetings.
        - At the quarterly meetings, all members are present for each committee meeting (Claims, Underwriting, Finance, and Board of Directors), thereby affording everyone a clear understanding of what is happening within WMMIC.
- Processes and administers all claims (personal injury, vehicle, volunteer, etc.) for County (except workers comp)
- Drafts/Presents resolutions for allowance/disallowance of claims to Executive Committee and County Board
- Works with insurance carriers to recover funds for damages caused by third parties (prepare small claims actions).

Chippewa County Ordinance

Ordinance Sec 2-60(l)(3) Meetings of the County Board:

- *Payment of claim against county*. The Executive Committee is authorized to settle claims not to exceed $10,000 as provided in Wis. Stats. §59.52(12)(a). The Corporation Counsel is authorized to settle claims not to exceed $500 as provided for in Wis. Stats. §59.52(12)(b). When any claim against the county is allowed by the Board, it shall be the duty of the clerk to prepare a warrant or order on the treasurer for payment of the claim, such warrant or order to be signed by the clerk and countersigned by the Administrator.

Resolutions to Allow or Disallow a Claim

- When claims are brought to the Executive Committee/County Board for allowance or disallowance, the matter has been thoroughly investigated by Blevins and the WMMIC Claim Representative. Discussions on the matter have taken place and relevant state statutes have been reviewed with regard to liability, if any, for the County.
- Notices of claim are presented to the County Clerk who then forwards them to Blevins. From there Blevins enters the claim into the system for the insurance company who then assigns an adjuster. WMMIC will then research it and provide a recommendation.
- If the County Board approves disallowing a claim, that simply limits the amount of time the claimant has to file a lawsuit, it does not otherwise prohibit the claimant from filing a lawsuit. The timeline for filing a lawsuit reduces from the time allowed under the applicable statute of limitations for the particular claim down to 6 months.

Attachment: Monthly Statement of Claims Filed 10.25 (9240 : Monthly Statements of Claim Filed with the County Clerk - Jaclyn Sadler)

Risk/Consequences of Not Following WMMIC's Recommendation

If Chippewa County does not follow the recommendations of the Wisconsin Municipal Mutual Insurance Company (WMMIC), several concerns could arise:

- **Increased Financial Exposure**: Failure to comply with WMMIC's recommendations may leave the county vulnerable to costly lawsuits and liability claims. This could significantly increase the county's financial burden, as WMMIC may not cover claims if the county is found to have neglected risk management advice.
- **Loss of Liability Coverage**: If Chippewa County repeatedly ignores WMMIC's advice, there is a risk that the county could lose its coverage or face higher premiums, affecting its ability to secure adequate insurance in the future.
- **Potential Legal Consequences**: Ignoring WMMIC's guidance could result in non-compliance with state laws or regulations, exposing the county to legal penalties or sanctions.
- **Strain on County Resources**: Without proper coverage or by facing more claims, the county's resources could be diverted away from other important services to handle litigation or pay for damages out of pocket.

It is essential that Chippewa County maintain alignment with WMMIC's recommendations to mitigate these risks and protect both the county and its employees.

Attachment: Monthly Statement of Claims Filed 10.25 (9240 : Monthly Statements of Claim Filed with the County Clerk - Jaclyn Sadler)

STATEMENT OF EXPLANATION
CHIPPEWA COUNTY WEBSITE AND AGENDA MANAGEMENT SOFTWARE UPDATE - ANDY BAUER AND JACLYN SADLER

Chippewa County Information Technology Director, Andy Bauer, and Chippewa County Clerk, Jaclyn Sadler, will provide an update to the County Board on the new County website and the transition to the new agenda management software.

Who We Are | What We Do

West Central Wisconsin Regional Planning Commission

Presentation to Chippewa County Board of Supervisors

October 14, 2025

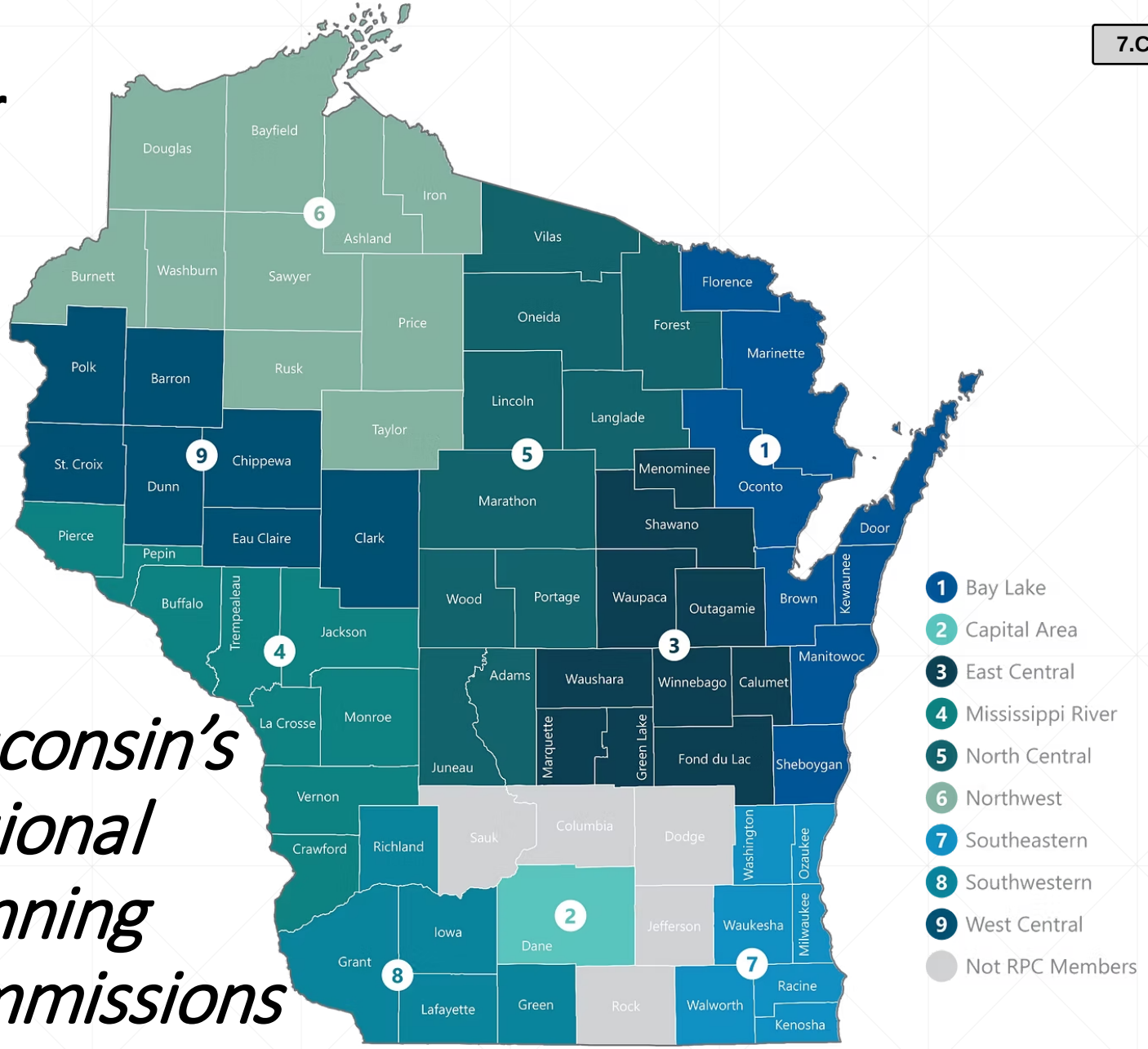
An innovative leader in responsible planning and development for over 50 years

coordinate. partner. advocate. serve.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

WCWRPC was created under State Statute in 1971 (§66.945, now §66.0309)

- Community Planning
- Demographics
- Economic Development
- Grants
- Mapping
- Natural Resources Planning
- Public Administration
- Transportation



Wisconsin's Regional Planning Commissions

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Governed by 21 Member Commission

Appointments are made by County Boards (3 per county)

Executive Committee Consists of One Appointment per County

Commissioners:

Barron County
Patti Anderson
Craig Fowler
Louie Okey*

Chippewa County
Chuck Hull
George Rohmeyer*
Joel Seidlitz

Clark County
Peter Kaz
Chuck Rueth
Joe Waichulis, Jr.*

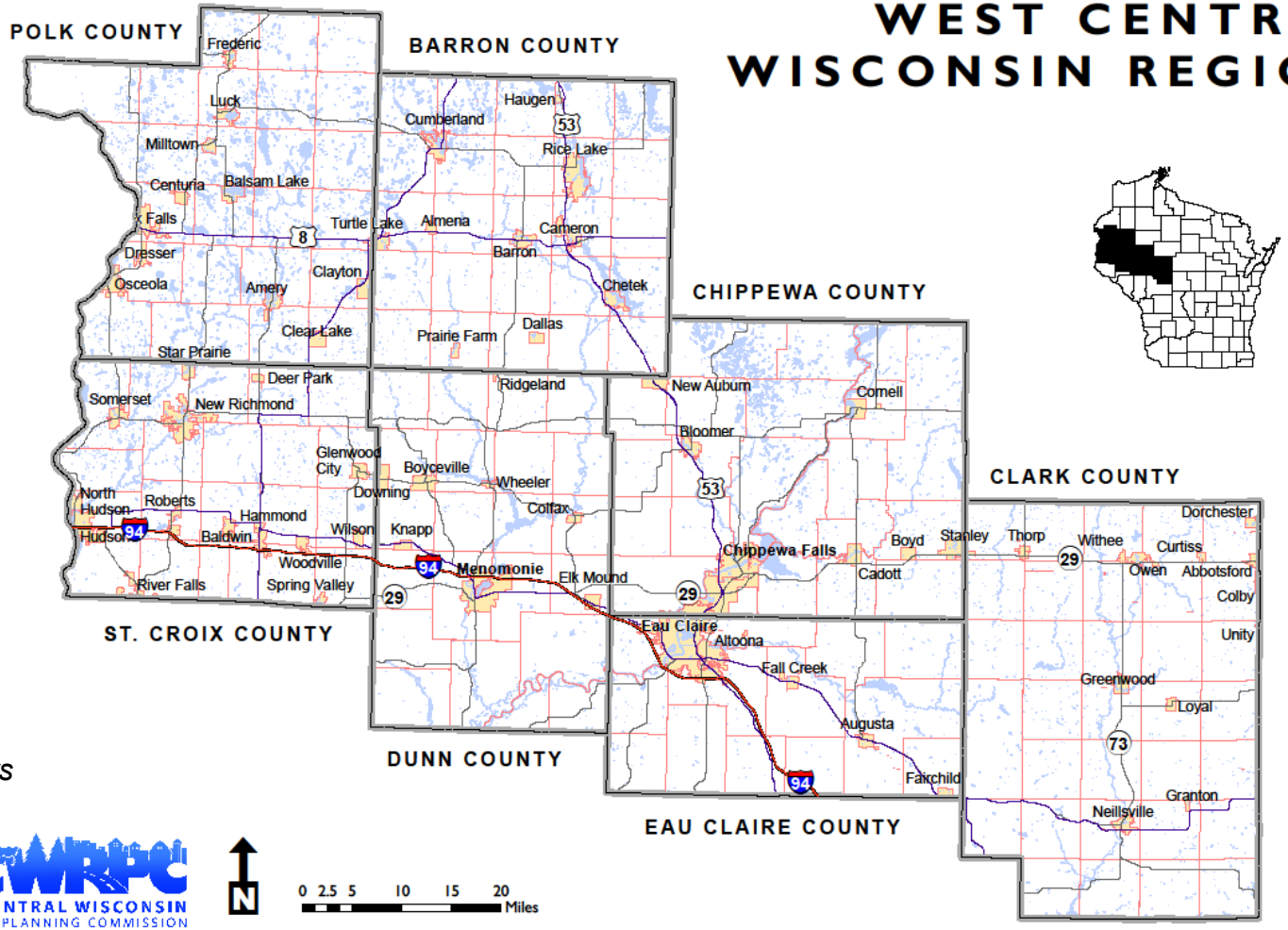
Dunn County
Adam Accola*
Diane Morehouse
Carl Vandermeulen

Eau Claire County
Loralee Clark
John Frank*
Dane Zook

Polk County
Terry Hauer
Keith Karpenski
Sharon Kelly*

St. Croix County
Paul Berning
Daniel Hansen
Ryan Sicard*

* *Executive Committee Members*



WEST CENTRAL WISCONSIN REGIONAL PLANNING COMMISSION

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Full Commission
Executive Committee


Executive Director
Scott Allen


Office Manager
Erin Whyte


Financial Manager
Kim Zimmerman


Fund Manager
Tobi LeMahieu


Senior Planner/
Deputy Director
Susan Badtke


Lending Specialist
Amanda Veith


Senior Planner/
MPO Director
Eric Anderson


Loan Processor
Jennifer Brixen


Senior Planner
Chris Straight


Associate Planner/Creative
Content Manager
Landon Profaizer


Senior Planner
Ross Pietrzak


Associate Planner
Craig Johnson


Assistant Planner
Hailee Bushman


Associate Planner
Edwin Rothrock


Assistant Planner
Emily Huerta

ADMINISTRATION

REGIONAL BUSINESS FUND (RBF)

PLANNING

Goal:

Assist units of government in planning for the physical, social, and economic development needs of the region.

We do this in three ways:

- We **serve as a coordinating organization** between federal and state agencies and the local governments they serve.
- We **assist units of government** in working on issues that occur at a regional level.
- We **provide technical assistance**, advice, and services directly to individual units of government.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Services:

WCWRPC services can be summarized under four general areas.

1. **Economic Development**
2. **Transportation**
3. **Community Development**
4. **Conservation & Mapping**



Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Economic Development

- Regional economic development planning and coordination
- Administration of revolving loan funds
- Project consultation, grant writing and administration
- Community and business finance
- County economic and population profiles
- Community and industrial park profiles

Transportation

- Highway, rail and airport planning
- Safe Routes To School plans
- Rural and urban transit plans
- Corridor plans
- Traffic/parking studies
- Pedestrian/bicycle facilities planning

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Community Development

- County and community comprehensive plans
- Zoning and subdivision regulations
- Land use planning
- Grant writing and administration
- Emergency preparedness
- Hazard mitigation planning
- Tax Increment Finance plans
- Capital improvement plans
- Outdoor recreation plans
- Housing assistance
- Placemaking services

Conservation & Mapping

- Water quality planning
- Sustainability planning
- Lake management plans
- Base and customized maps
- 3D modeling, visualization and GIS
- Mapping and graphics for specialized needs

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

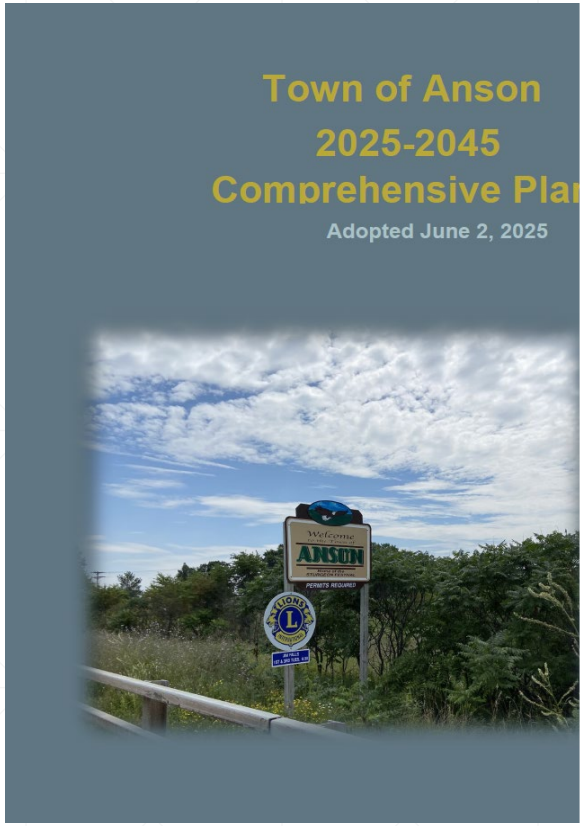
Chippewa County Programs (2024-25)

- ✓In coordination with PSC, continued to provide administration and outreach to the region's **Broadband Implementation Group**
- ✓Participate in the **West Central Wisconsin Rail Coalition**, supporting future passenger rail service to the region
- ✓Staff the **Storm Water Outreach Coordinator** position for **Rain To Rivers of Western Wisconsin**. Members include: Chippewa County; City of Chippewa Falls; City of Eau Claire; Village of Lake Hallie; Town of Eagle Point; and Town of Lafayette
- ✓Provide **Safe Routes To Schools** coordination for **Bloomer** and **Chippewa Falls** school districts
- ✓Prepare annual, county-specific ***Economic Profiles***

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Chippewa County Projects (2024-25)

- ✓Updating **Chippewa County** Comprehensive Plan, including Farmland Preservation Plan
- ✓Completing **City of Chippewa Falls** Outdoor Recreation Plan
- ✓Updated **Village of Lake Hallie** Comprehensive Plan
- ✓Updated **Town of Anson** Comprehensive Plan
- ✓Northern WI State Fair Association FEMA Community Safe Room grant administration
- ✓Provide online **CIP mapping tool** for **Chippewa County** and **City of Chippewa Falls**
- ✓Facilitated installation of new **Chippewa Valley Bike Routes** signs, including online mapping tool and upcoming revised printed map



Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

12. HIRAM S. ALLEN PARK

ADDRESS: Intersection of Bridge St. & Rushman Dr., Chippewa Falls, WI 54729

PARK TYPE: Neighborhood Park **KEY FUNCTION:** Picnicking/Farmers' Market

SIZE: 2.8 acres

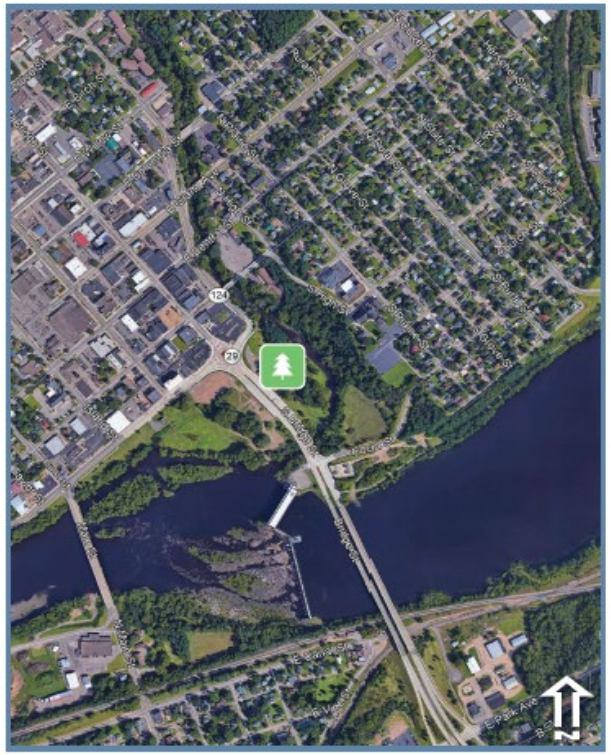
PRIMARY USES

This park is a multi-use recreation area with access to Duncan Creek and large areas of manicured grass and shade trees scattered throughout the park.

KEY FEATURES

Allen Park is a small downtown leisure area with a shelter, park benches, and several trees planted memory of loved ones. There is also a local Farmers' Market hosted at the park at various times throughout the summer.

This area is being redeveloped in conjunction with the Chippewa Riverfront which will enhance several park features and maximize the recreation potential of this site.



FACILITIES & AMENITIES

- Shelter/restrooms
- Farmers' market
- Large shade trees and manicured grass
- Access to Duncan Creek
- Close to Visitor Center/Downtown/ Chippewa River

PLANS OR RECOMMENDATIONS	COST ESTIMATE	TIME FRAME
Part of Phase III for Chippewa Riverfront development (includes picnic shelters, flag plaza, trails, pavilion, upgraded/enhanced farmers' market, parking, future sculptures and artwork)	$1 million	1-3 yrs
Consider development of canoe/kayak launch site.	$500,000	1-3 yrs

AGREEMENTS/PARTNERSHIPS FOR USE, MANAGEMENT OR PROGRAMMING

This site offers significant recreation potential to the community and requires programming and management/maintenance assistance from the Department of Parks, Recreation & Forestry, the Department of Public Works, and additional private/public partnerships for the canoe/kayak launch.

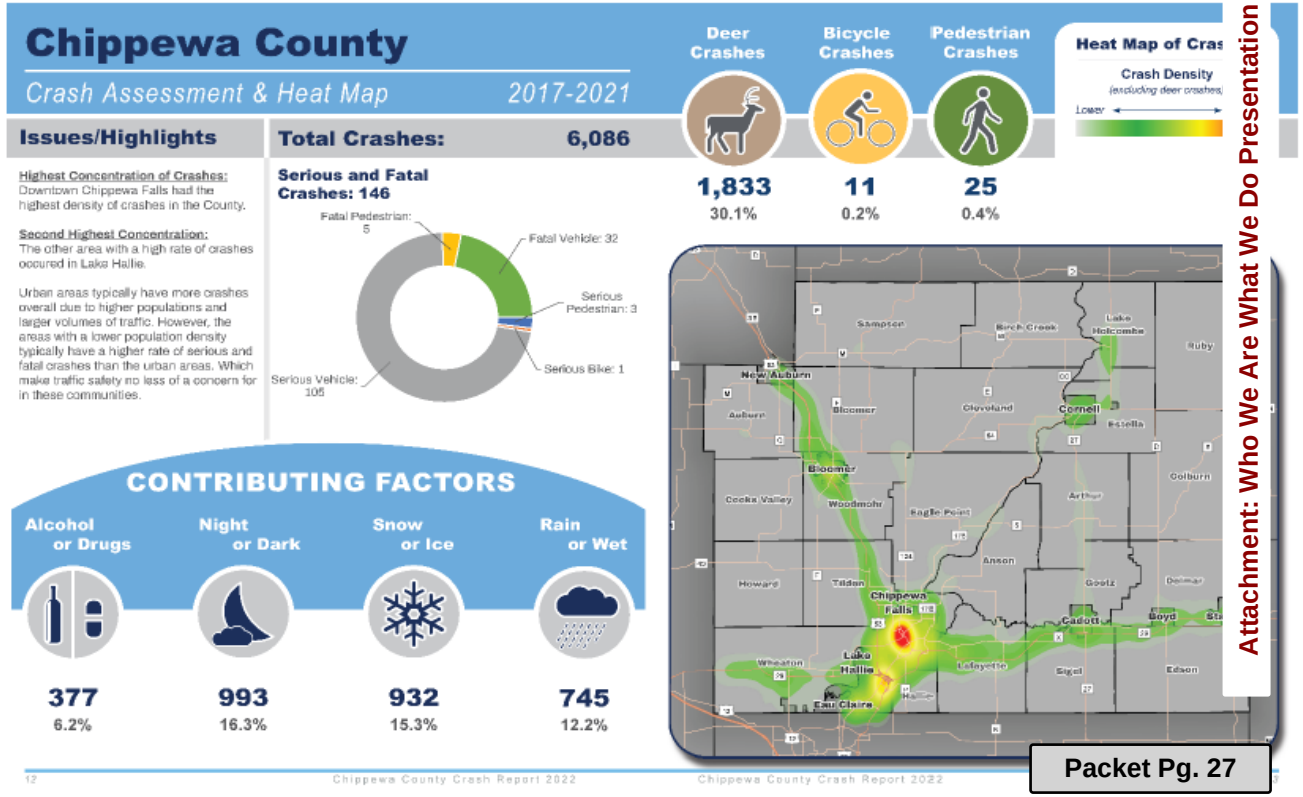
Transportation Element

County Trunk Highways:	996 lane miles
State Trunk Highways:	667 lane miles
Local Roads:	1,333 lane miles
County, City, and Town Bridges:	229

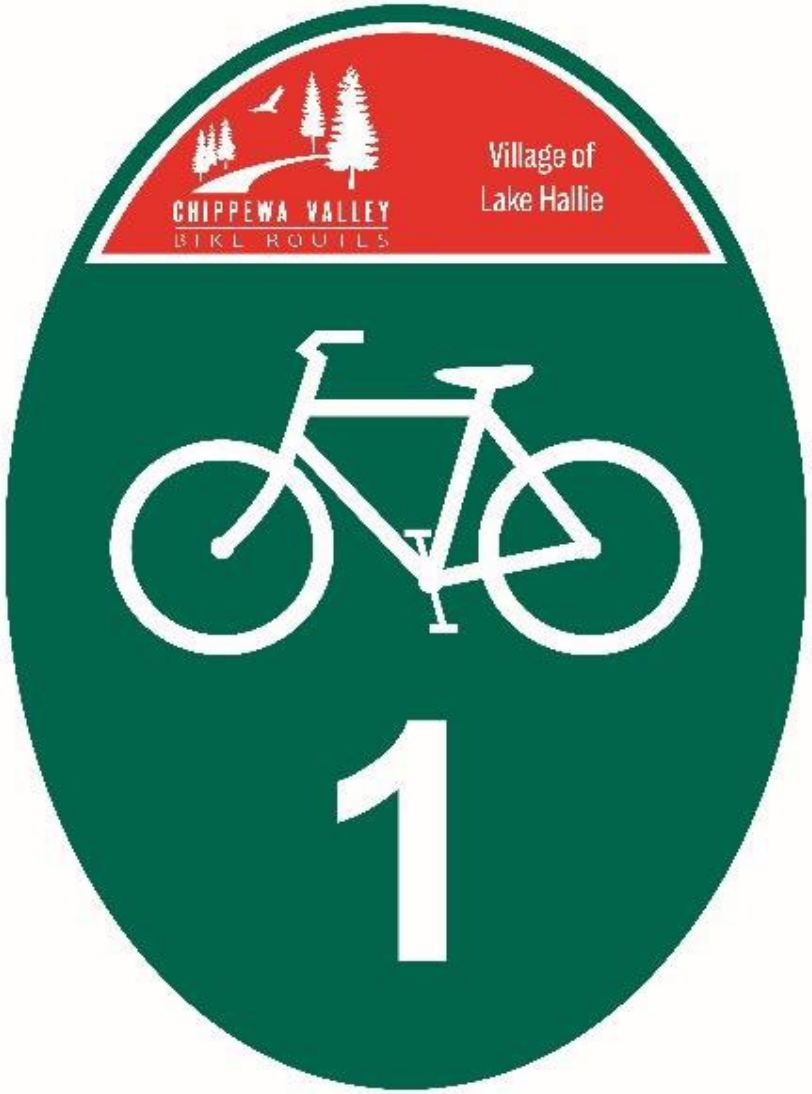
Verify: Chippewa County Highway Department employs approximately 75 full-time employees and hires up to 11 seasc employees each year.

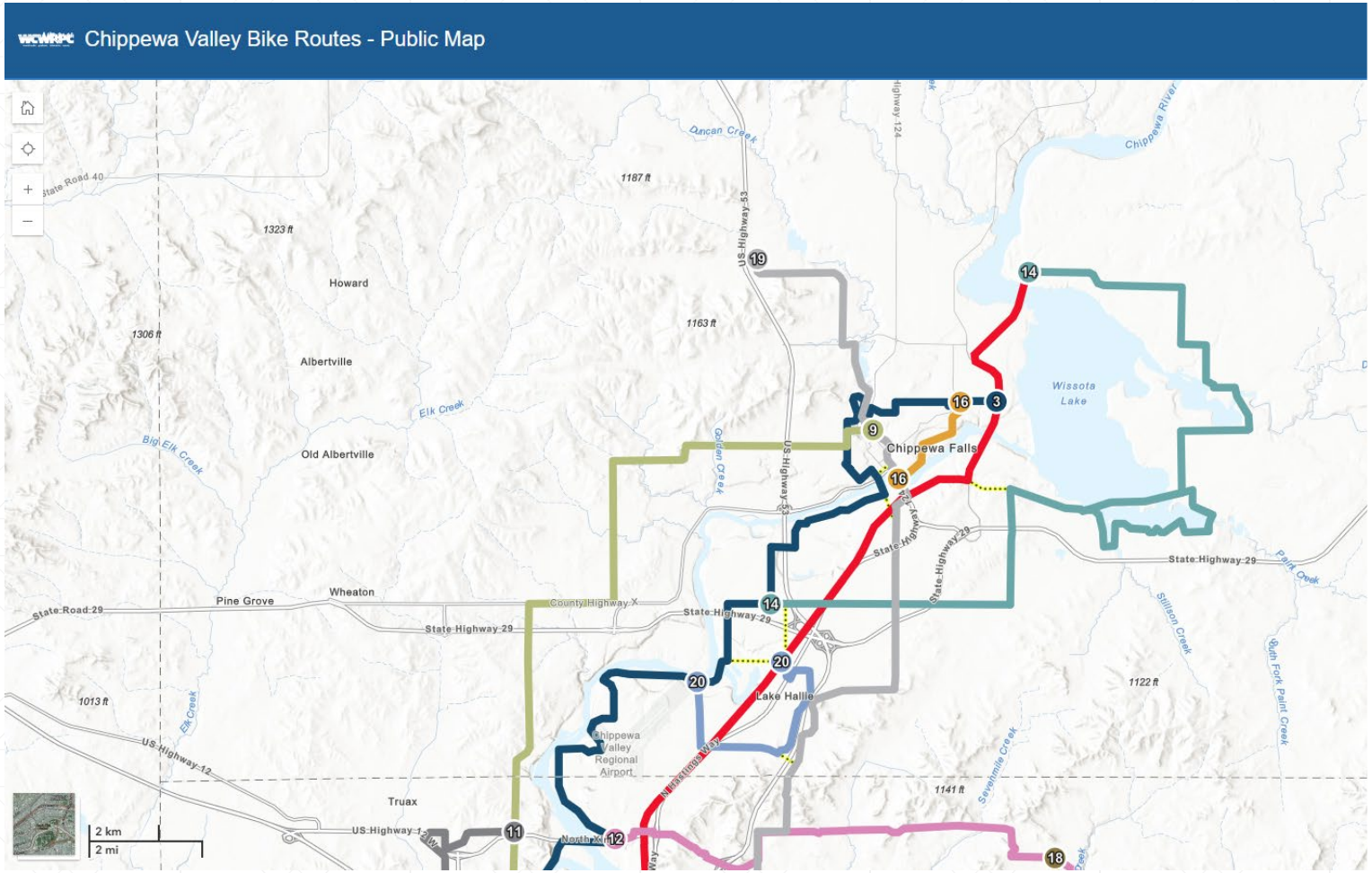
Chippewa County Crash Data

The following graphic summarizes key findings from the 2022 *Chippewa County Crash Report* prepared by West Cer Wisconsin Regional Planning Commission (WCWRPC).



Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin





Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

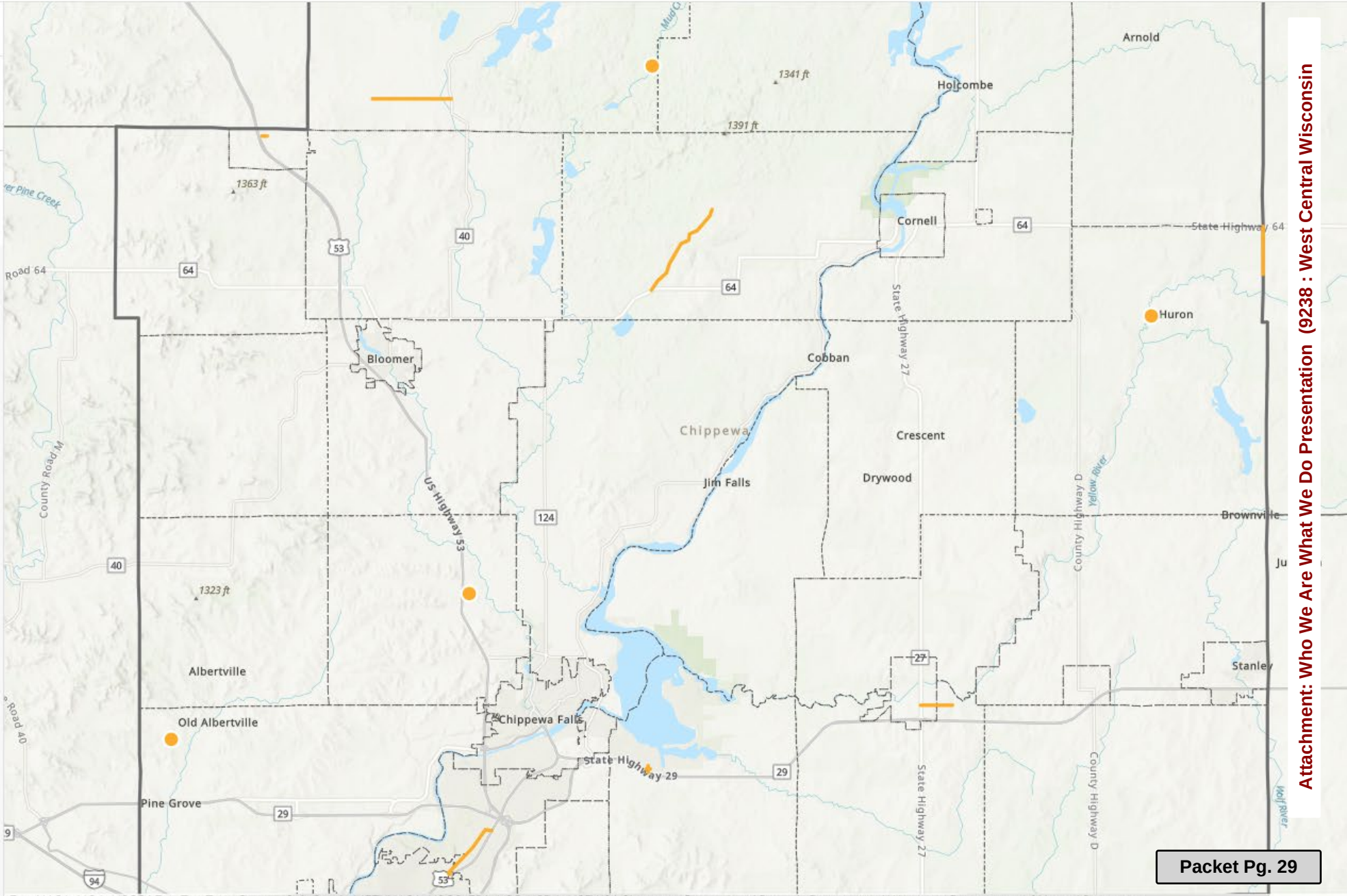
Legend

Chippewa County CIP 2025 Bridges

- 2025

Chippewa County CIP 2025 Roads

- 2025



Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Chippewa Falls Capital Improvement Program 2025-2029

Chippewa Falls 2025-2029 CIP | 2025 (Current Year) | 2026 | 2027 | 2028 | 2029

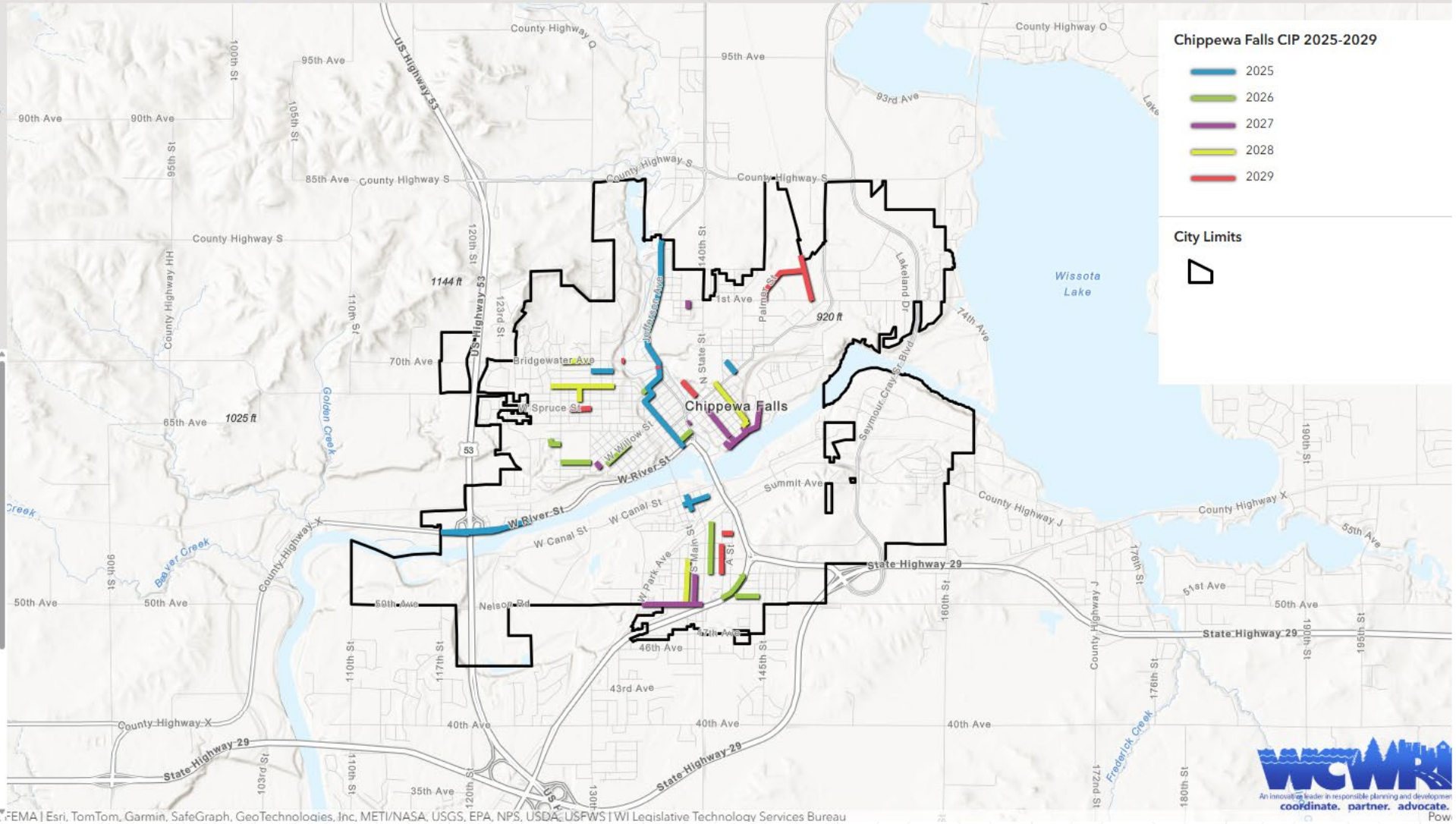
The Chippewa Falls capital improvement plan (CIP) is a five-year plan which identifies capital projects and equipment purchases and provides a planning schedule. Project types include new construction, pavement replacement, roadway expansion, reconditioning, reconstruction, and structural overlay. This mapping project shows the roadway construction projects within the CIP; no maintenance projects are included.

This tab shows the projects for 2025-2029 as of 01/03/2025. For more information regarding projects in the current year, select the *Current Year* tab above. The projects for the selected year will appear with some basic information about each project. Any projects with an asterisk indicate that the given program is subject to annual review and changes due to budget restrictions and other factors.

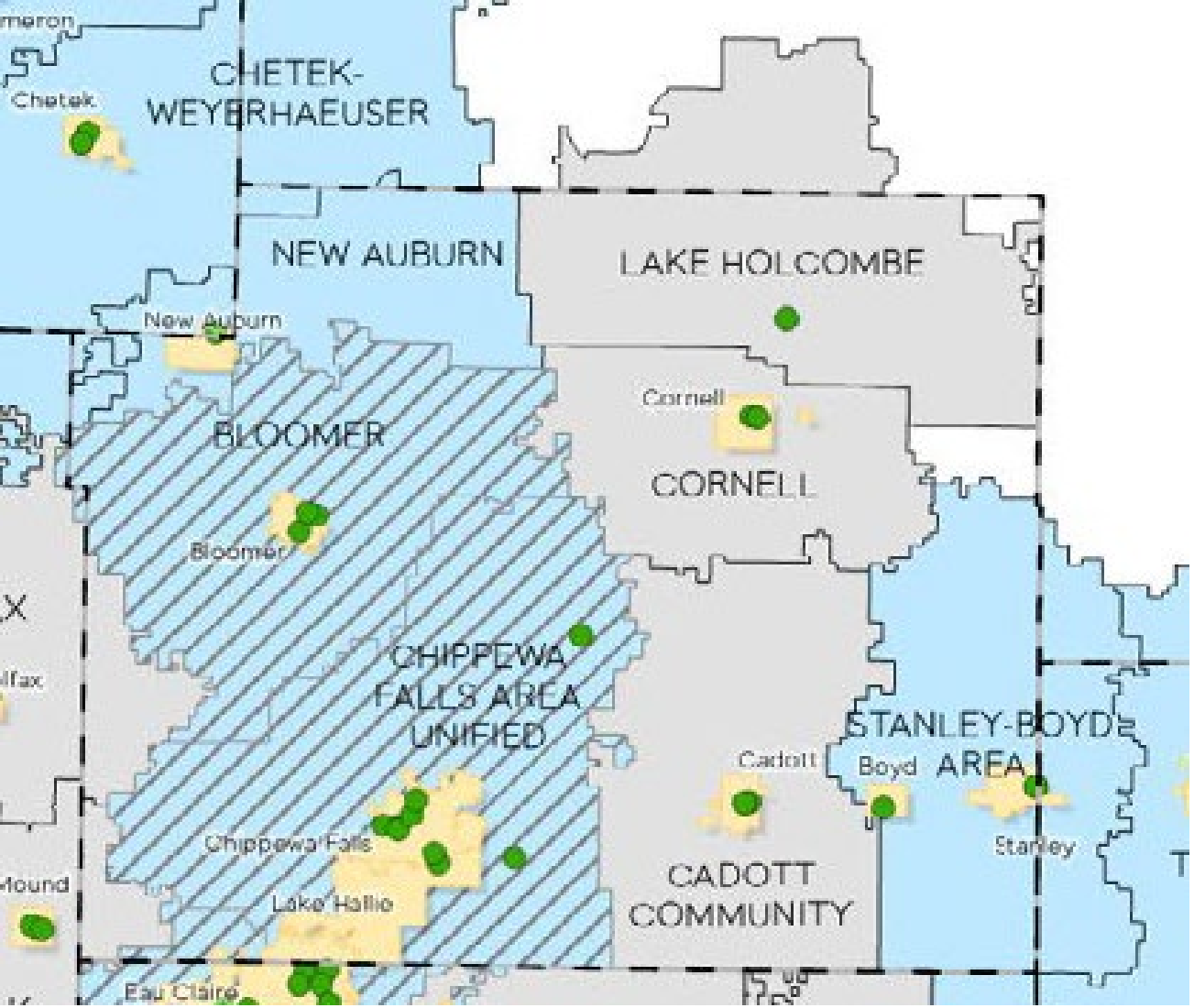
Click on the project title to zoom the map into the project location. Click on a project on any map to display more project details. Use the home button in the top left corner to reset your view.

< 1 of 36 >

Street Name	Elm St
CIP Year	2026
Project Limits	Bay St - Bridge St
Proposed Work Type	Reconstruction
Estimated Cost	218000.000000
Paser Surface Rating from 1-10, 1=poor, 10 = new	3
Watermain Age	1885
Sanitary Sewer Age	1938
Special Assessments Required	YES
Work Types	Base Aggregate, Curb & Gutter, Concrete Work, Erosion Control, Excavation and Grading, HMA Pavements, Intersections, Removals, Signing, Sanitary



Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin



WEST CENTRAL WISCONSIN

SAFE ROUTES TO SCHOOL

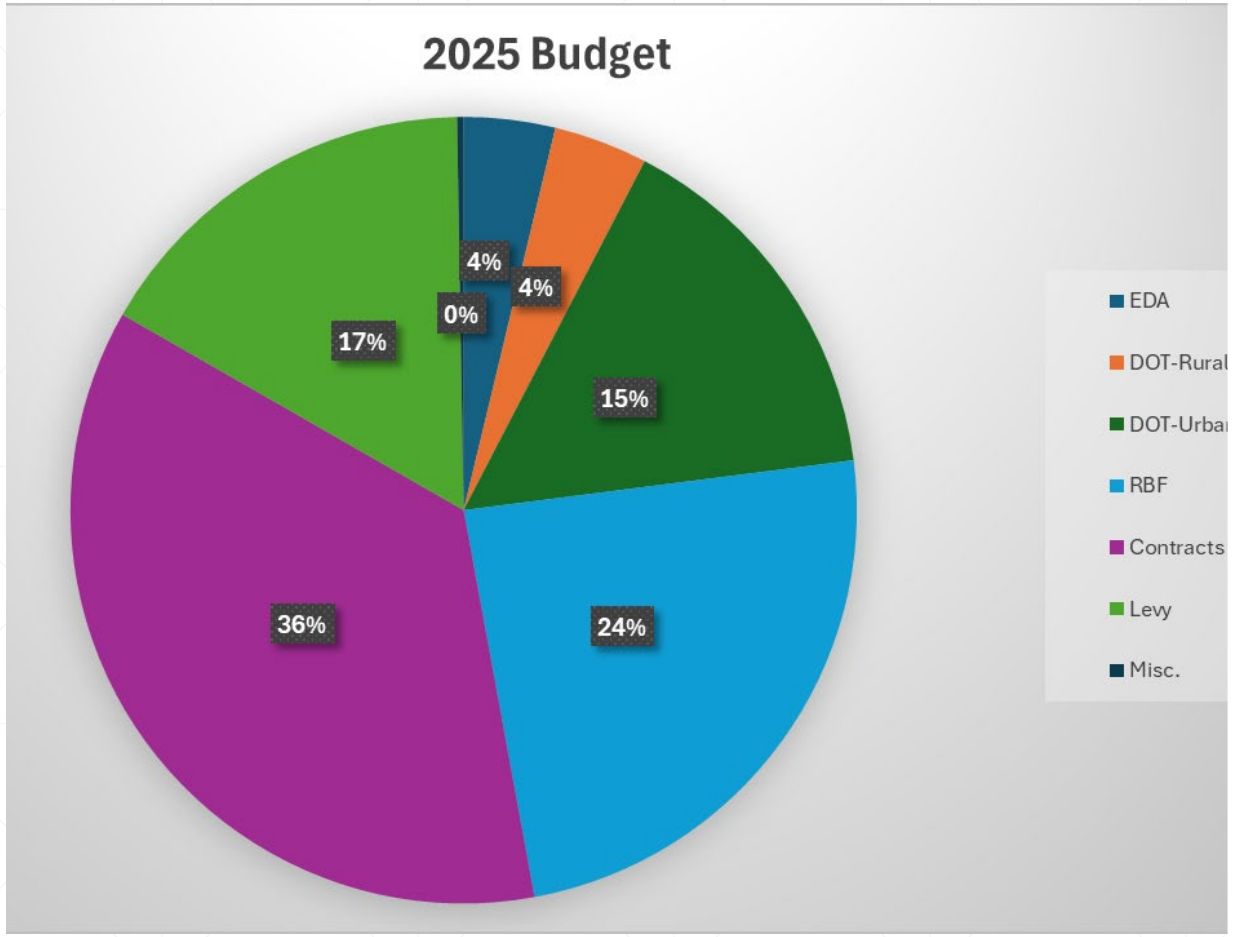
SINCE 2007

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Operations: Financing

- 2025 Budget - $1,864,126
- Revenue

Source	Amount	%
U.S. Dept. of Commerce - EDA	$70,000	3.8
Wisconsin DOT		
Rural	$72,042	3.9
Urban	$286,175	15.4
Regional Business Fund, Inc.	$450,000	24.1
Contracts	$674,331	36.2
Levy	$306,578	16.4
Miscellaneous	$5,000	0.3



Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Recent Levy Funding :

- ✓ **2024 Chippewa County Funding = $44,598**
- ✓ **2025 Chippewa County Funding = $46,110**

- ➢ **2026 Chippewa County Funding = $47,308**

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Benefits of Regional Planning:

- Operate with **public and fiscal accountability** to local governments.
- Offer a neutral forum for **exploring and resolving inter-governmental issues**.
- Provide an opportunity to **partner and leverage funds**.
- Maintain a **staff of professionals** with decades of technical and programmatic expertise.
- **Fill gaps in planning** that cannot be met by smaller governmental units.
- Act as **repositories** for and developers of demographic and other types of information that can be utilized by all entities in the region.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

What Else Should You Know About Us?

- We share your **commitment to the well-being** of our region, counties, and communities.
- We have the **tools and expertise to drive progress** for the region, counties, and communities.
- We bring **decades of experience** and **deep-rooted connections** to the region.
- We serve a **public mission**, prioritizing community impact.
- We efficiently **leverage funding** we receive to maximize benefits.
- We take on **challenging tasks** that others may avoid.
- We operate with a **multi-jurisdictional mission**, serving diverse communities.
- We offer **unique services** that are unavailable elsewhere.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

REGIONAL BUSINESS FUND, INC.

- ✓ WCWRPC created the 501 c(6) nonprofit RBF, Inc. in 1995 to administer a business revolving loan fund program
- ✓ RBF, Inc. Board of Directors consists of nine (9) members who meet monthly
- ✓ RBF, Inc. is staffed by West Central Wisconsin Regional Planning Commission



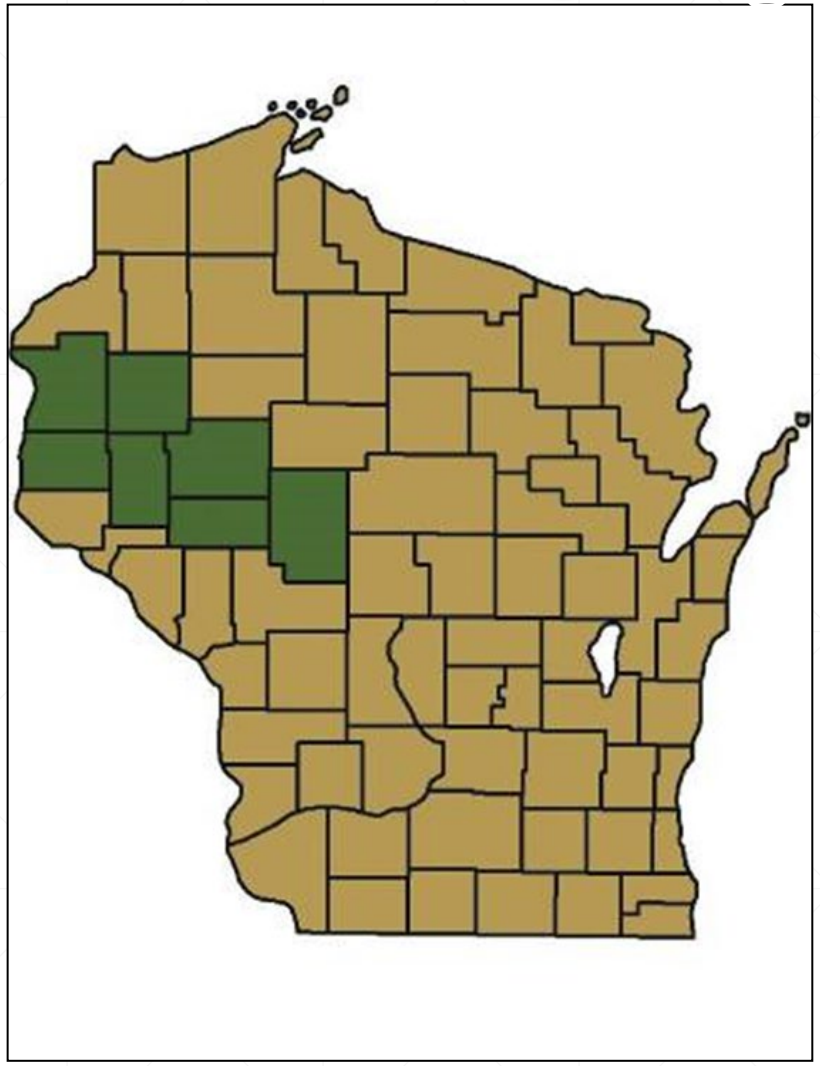
Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

RBF, Inc. Board Members

BOARD MEMBER	APPOINTED BY
Pam Fall	Barron County
Deb Chilson	Chippewa County
James Schmidt	Clark County
Clark Yolitz, *President*	Dunn County
Rebecca Reinhardt	Eau Claire County
Aaron J. Mork, *VP*	Polk County
Aaron Sundeen	St. Croix
Dan Lytle, *Sec./Treas.*	WCWRPC
Mai Xiong	RBF, Inc.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Regional Business Fund, Inc. Programs



* Economic Development Administration (EDA) Revolving Loan Fund (1995)

* Technology Enterprise Fund (TEF) program (2006)

* Consolidated Fund (2007)*

    *Revolving Loan Fund (2007)
    *Micro Loan Fund (2008)
    *Façade Loan Fund (2008)
    *Growth Loan Fund (2016)

*EDA CARES Revolving Loan Fund (2020)

*Capital Catalyst Revolving Loan Fund (2025)

As an entitlement community, the City of Eau Claire is not eligible for Consolidated Fund programs.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Regional Business Fund, Inc. Chippewa County Impact

Chippewa County - RBF, Inc. Consolidated Loans (2007-August 31, 2025)	
	TOTAL
Total # Businesses	**144**
Start-ups	**69**
# Loans	**148**
Total Amount Awarded	**$7,665,578**
Pre-loan Jobs	**503**
Job Creation	**538**
Private $ Leveraged	**$67,197,716**

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Regional Business Fund, Inc.

REVOLVING LOAN FUND PROGRAM

Conley Business Holdings LLC
dba Conley's Hill House
Bar & Grill
- Boyd -









Total Project Cost: $304,000 RBF Loan: $38,000. Funds were used for business and property acquisition.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

Regional Business Fund, Inc.



FAÇADE LOAN FUND PROGRAM EXAMPLE

Beckys Flowers and Framing LLC a.k.a Eevy Ivy Over Flowers, Framing & Gifts - Chippewa Falls -



Historical Photo



Before



After

Total Project Cost: $60,000

RBF Participation: $60,000

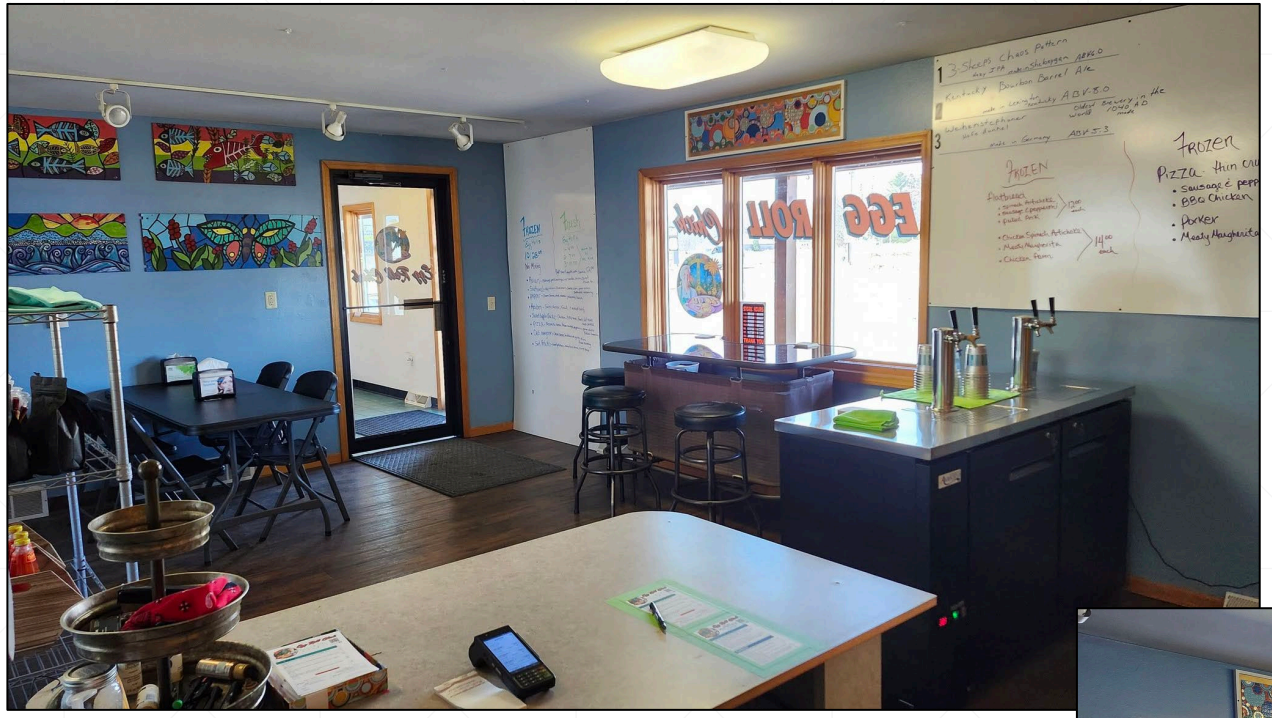
Funds were used for brick repair, siding, and signage

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

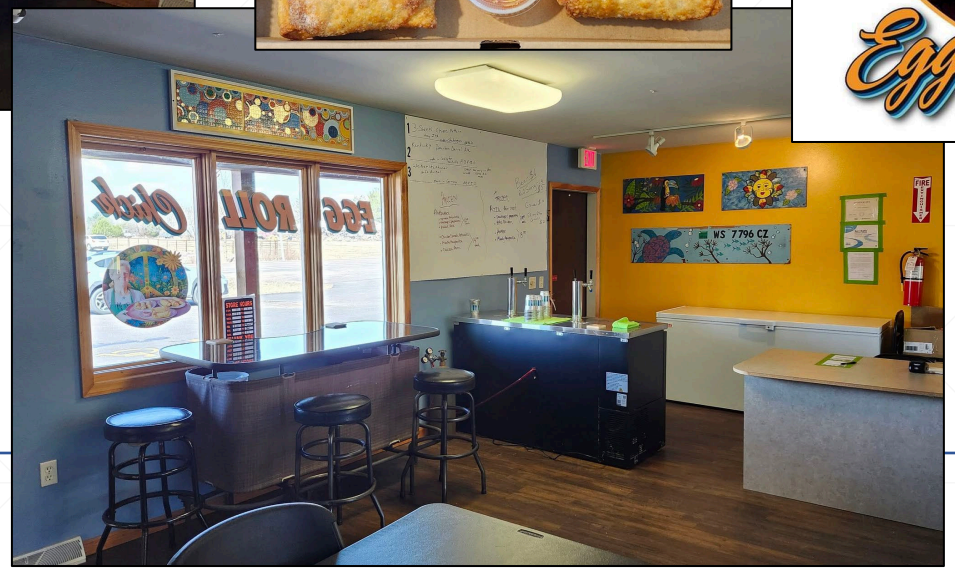
Regional Business Fund, Inc.

MICRO EXAMPLE

Egg Roll Chick LLC
- Holcombe -







Total Micro Project Cost: $50,000

RBF Participation: $35,000

Funds were used for furniture, fixtures, and equipment.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

RBF Board and Committee Members – Chippewa County

* Deb Chilson – RBF, Inc. Board Member (Chippewa County Representative)

RBF, Inc. Chippewa County Loan Committee

* Maureen Carlson
* Deb Chilson
* Ryan A. Hartzell
* Ken Pearson
* Melissa Peterson
* Jamey Stueber

Charlie Walker – Executive Director, Chippewa County Economic Development Corporation

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

An innovative leader in responsible planning and development for over 50 years
coordinate. partner. advocate. serve.

Thank You for Your Time and Partnership!

West Central Wisconsin Regional Planning Commission

Scott Allen, Executive Director

715-836-2918

sallen@wcwrpc.org

REGIONAL BUSINESS FUND, INC.

Attachment: Who We Are What We Do Presentation (9238 : West Central Wisconsin

HOW WCWRPC BENEFITS YOU

As an Economic Development District for the U.S. Economic Development Administration, WCWRPC does economic development planning and project identification across the region.
Over the past 30 years, WCWRPC has helped its partners leverage over $17 million in EDA funds, resulting in the creation of an estimated 7,700 jobs and securing private investment of over $200 million.

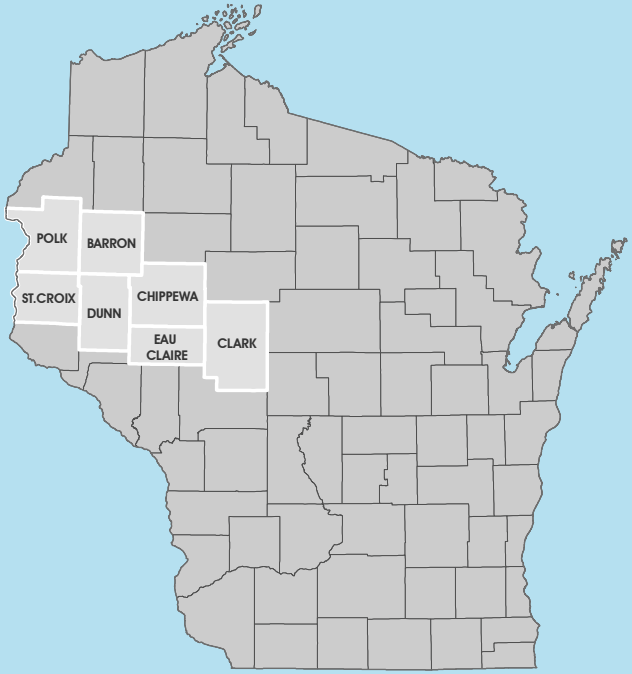
WCWRPC staffs the Regional Business Fund, Inc., a consolidated revolving loan fund.
Since the program's inception in May of 2007, the $16.5 million fund has assisted businesses in creating over 1,750 jobs and leveraging $129.4 million in private investment in west central Wisconsin.

Additional investment resulting from WCWRPC procurement of state and federal funds has resulted in other substantial job creation and private investment in our region, improving its quality of life.
WCWRPC helps communities access Community Development Block Grant, USDA Rural Development, Knowles/Nelson Stewardship, Homeland Security/Emergency Management, and other program funds.

WCWRPC has a long history of providing technical support and services that maximize value and minimize cost.
Data and maps WCWRPC produced for a recent comprehensive planning effort saved many communities and counties thousands of dollars when they used this information in their own plans. Other regional organizations have also used this information in their strategic plans.

WCWRPC is the designated Metropolitan Planning Organization (MPO) for the Chippewa-Eau Claire urbanized area. The MPO is responsible for the development of the long-range transportation plan for the metropolitan planning area, as well as the development of the Transportation Improvement Program.
Proper compilation and submittal of these documents is necessary for the inflow of all federal and state transportation funds to the urbanized area.

WCWRPC receives revenues from local, state, and federal sources. Basic operational support is provided by a modest levy apportioned by equalized assessed real property valuation among the member counties.
For every dollar of local levy investment in the WCWRPC, it has brought up to $27.75 to local governments, mainly through federal and state grants, contracts, and projects.



For all of your planning and economic development needs, contact us at:

West Central Wisconsin Regional Planning Commission
800 Wisconsin Street, Suite D2-401
Mail Box 9
Eau Claire, WI 54703
Phone: 715|836|2918
Fax: 715|836|2886
wcwrpc@wcwrpc.org
www.wcwrpc.org

WCWRPC

An innovative leader in responsible planning and development for over 40 ye

coordinate. partner. advocate. serve.

Economic Developme
Transportati
Community Developme
Conservation and Mappi



West Central Wisconsin Regional Planning Commission

Attachment: WCWRPC Brochure (9238 : West Central Wisconsin Regional Planning Commission



"During hazard mitigation planning and emergency preparedness efforts, WCWRPC brought together diverse stakeholders and was a valuable liaison between the local communities, counties, and our agency."

Roxanne K. Gray, State Hazard Mitigation Officer
Wisconsin Emergency Management

coordinate.

"WCWRPC is a valuable partner to our county, communities, and the economic development corporation. They assist at a local level while still filling an important regional role as well."

Sheila Nyberg, Executive Director
Clark County Economic Development Corporation

partner.

"We value and respect the RPC staff for their knowledge of current specialized transportation issues, legislation, and the vital services that provide a lifeline for our clients, who are unable to drive, to participate in all life's experiences."

Lou Kelsey, Director of Client Services & Community Resources
Epilepsy Foundation of Western Wisconsin

advocate.

"On behalf of Barron County resid I believe WCWRPC services provid complementary, cost-effective capacity to the region's counties. these times, to do more with less, counties need to work together."

Jess Miller
Barron County Board Chair

serve.

YOUR WCWRPC

The West Central Wisconsin Regional Planning Commission (WCWRPC) is a multi-county planning agency created under Wisconsin Statute 66.0309 and established in 1971 by executive order of the Governor after petition from Barron, Chippewa, Clark, Dunn, Eau Claire, Polk, and St. Croix counties. WCWRPC activities are directed by a 21- member governing commission. Three representatives are appointed by each of the seven counties in the region.

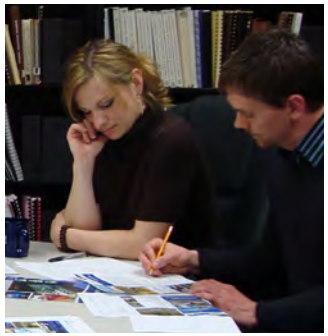
WCWRPC is statutorily charged with planning for the physical, social, and economic development of the region. WCWRPC is a public consultant that operates solely for the benefit of local governments and their citizens. We are not a state agency and have no regulatory authority. Skilled and experienced WCWRPC staff complements local government functions when additional expertise and cost-effective capacity is needed.

It is the mission of the WCWRPC to be an innovative leader in the responsible planning and development of the region through coordination, partnerships, advocacy, and service. To accomplish this mission, WCWRPC conducts area-wide planning and provides technical assistance to counties and local governments, offers advice and services to local governments and agencies within the region, and coordinates local programs and activities to advance regional objectives.

WHAT WCWRPC DOES

We have been helping communities plan and develop for over 40 years. Our multi-disciplined team of planners and community development specialists are a resource for counties, cities, villages, and towns - make us your first call when you need these services.







Economic Development

- Regional economic development planning and coordination
- Community and business financing
- County economic and population profiles
- Community and industrial park profiles



Transportation

- Highway, rail, and airport planning
- Safe routes to school plans
- Rural and urban transit plans
- Corridor plans
- Traffic/parking studies
- Pedestrian/bicycle facilities planning



Community Development

- County and community comprehensive plans
- Zoning and subdivision regulations
- Land use planning
- Grant writing and administration
- Emergency preparedness
- Hazard mitigation planning
- Tax increment finance plans
- Capital improvement plans
- Outdoor recreation plans
- Housing assistance
- Placemaking services



Conservation and Mapping

- Water quality planning
- Sustainability planning
- Lake management plans
- Base and customized mapping
- 3D modeling, visualization, and GIS
- Mapping and graphics for special needs



Attachment: WCWRPC Brochure (9238 : West Central Wisconsin Regional Planning Commission

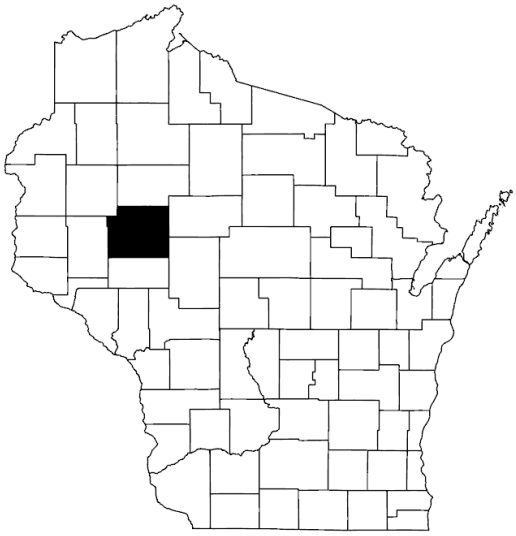
Chippewa County

ECONOMIC PROFILE

County Population Projections

	2020	2022	2023	2030	2040	2050
County Population	66,297	66,254	66,558	66,630	67,200	65,990
Percent Change		- 0.06	0.39	0.11	0.85	- 1.83
Male	34,305	34,577	34,496	34,330	34,455	33,655
Female	31,992	31,677	32,062	32,300	32,745	32,335
Minority	5,432	4,197	4,602	NA	NA	NA
Percent Minority	8.2	6.3	6.9	NA	NA	NA
Age Under 5	3,521	3,511	3,513	3,460	3,790	3,205
Age 5-9	4,190	4,280	4,158	3,470	3,680	3,340
Age 10-14	4,539	3,977	4,069	3,835	3,825	4,195
Age 15-19	3,864	3,977	3,994	3,970	3,340	3,550
Age 20-24	3,038	3,378	3,211	3,360	2,880	2,880
Age 25-34	7,951	7,855	8,005	7,405	8,035	6,840
Age 35-44	8,627	8,724	8,900	8,545	8,110	8,805
Age 45-54	8,014	8,288	8,173	8,415	8,455	8,050
Age 55-59	5,012	4,273	4,300	3,815	4,500	4,100
Age 60-64	4,897	5,655	5,494	4,015	3,880	4,340
Age 65-74	7,534	7,361	7,663	9,000	7,275	7,825
Age 75-84	3,565	3,381	3,578	5,580	6,840	5,525
Age 85+	1,545	1,594	1,500	1,760	2,590	3,335

Source: 2020 Census; 2022 and 2023 American Community Survey 5-Year Estimates; 2024 Wisconsin DOA Population Projections



Prepared by the
West Central Wisconsin
Regional Planning Commission

June 2025

Municipal Population

							Percent Change				
	1980	1990	2000	2010	2020	2024	1980-90	1990-00	2000-10	2010-20	2020-23
Bloomer	3,342	3,180	3,347	3,539	3,683	3,724	- 4.8	5.3	5.7	4.1	1.1
Chippewa Falls	12,270	12,749	12,925	13,661	14,731	14,985	3.9	1.4	5.7	7.8	1.7
Cornell	1,583	1,541	1,466	1,467	1,453	1,444	- 2.7	- 4.9	0.1	- 1.0	- 0.6
Eau Claire+	1,657	1,676	1,910	1,981	2,183	2,360	1.1	14.0	3.7	10.2	8.1
Stanley+	2,095	2,011	1,898	3,602	3,804	3,772	- 4.0	- 5.6	89.8	5.6	- 0.8
Boyd	660	683	680	552	605	619	3.5	- 0.4	- 18.8	9.6	2.3
Cadott	1,247	1,328	1,345	1,437	1,498	1,483	6.5	1.3	6.8	4.2	- 1.0
Lake Hallie	0	0	0	6,448	7,170	7,429	NA	NA	NA	11.2	3.6
New Auburn+	452	459	547	528	537	542	1.5	19.2	- 3.5	1.7	0.9

+Includes portion in Chippewa County only. Source: 1980, 1990, 2000,2010, and 2020 Census; 2024 Wisconsin DOA Estimates.

Per Capita Personal Income

					Percent Change		
	2020	2021	2022	2023	2020-21	2021-22	2022-23
Chippewa County	$50,019	$53,765	$55,065	$56,815	7.5	2.4	3.2
Wisconsin	$55,435	$60,465	$61,992	$64,976	9.1	2.5	4.8
United States	$59,123	$64,460	$66,244	$69,810	9.0	2.8	5.4

Total personal income includes income from three sources: net earnings; dividends, interest and rent; and transfer receipts. Total personal income divided by the total population produces per capita personal income (PCPI).
Source: US Dept. of Commerce, Bureau of Economic Analysis

This Economic Profile is prepared by the West Central Wisconsin Regional Planning Commission

Attachment: Chippewa County Economic Profile 2025 (9238 : West Central Wisconsin Regional Planning Commission (WCWRPC) - Scott Allen)

Consumer Expenditures by County *(per household)*

	Total		Total
Shelter	$14,325	Contributions	$2,252
Transportation	$12,459	Education	$1,998
Food and Beverages	$10,017	Gifts	$1,682
Health Care	$5,839	Miscellaneous Expenses	$1,293
Utilities	$5,027	Personal Care	$916
Entertainment	$3,872	Personal Insurance	$485
Household Operations	$2,683	Tobacco	$408
Household Furnishings	$2,409	Reading	$150
Apparel	$2,382	Total Expenditures	$ 68,197

Source: Applied Geographic Solutions, 2024

Government Finances

2023	County	State
Full Equalized County Valuation ($000)	$9,298,786	$842,653,653
Net Property Tax ($000)	$102,921	$11,891,743
Full Value Tax Rate per $1,000 Valuation	$12.28	$15.53
Per Capita Property Tax	$1,533.76	$1,998.14

Source: Town, Village and City Taxes, Wisconsin Dept. of Revenue

Civilian Labor Force

County Totals	2019	2024
Employed	32,270	33,952
Unemployed	1,226	1,131
Total Labor Force	33,496	35,083
Average County Unemployment Rate	3.7%	3.2%
Average State Unemployment Rate	3.2%	3.0%
Average U.S. Unemployment Rate	3.9%	3.7%

Source: Wisconsin Dept. of Workforce Development & Bureau of Labor Statistics

Housing

	County
Housing Units	29,017
2022 Estimated Housing Units	29,949
Owner Occupied Units	19,823
Renter Occupied Units	6,744
Persons/Owner Occupied Unit	2.5
Persons/Renter Occupied Unit	2.1
Median Value of Housing	$237,700
Median Monthly Gross Rent	$963

Source: 2023 American Community Survey 5-Year Estimates; 2024 DOA Housing Estimates

Building Permits

County Residential	2019	2023
Single Family	210	190
Total Units	292	356
Value	$57,361,981	$97,005,248

Source: U.S. Census Bureau Building Permit Survey

Representative Wage Rates

	2023 Hourly Rate	
Position	Mean	Median
Bartenders	$12.41	$10.53
Bookkeeping/Accounting/Auditing	$22.20	$22.07
Cashiers	$14.28	$14.19
Computer Programmers	$40.03	$35.91
Electricians	$33.38	$36.93
Healthcare Social Workers	$30.77	$29.71
Licensed Practical/Vocational Nurse	$26.84	$27.00
Machinery Maintenance Workers	$29.73	$29.42
Nursing Assistants	$18.97	$18.02
Office Clerk, General	$19.92	$19.16
Physical Therapists	$45.60	$47.21
Secretaries/Administrative Assistants	$29.60	$28.83
Tellers	$19.74	$18.81
Truck Drivers-Heavy/Tractor Trailer	$24.53	$24.25
Waiter and Waitresses	$14.52	$12.77
Welder/Cutter/Solderer/Brazer	$24.37	$23.50

Source: Bureau of Labor Statistics, 2023

Attachment: Chippewa County Economic Profile 2025 (9238 : West Central Wisconsin Regional Planning Commission (WCWRPC) - Scott Allen)

Employment by Industry

	2023 5-Year Estimate	% of Total Employment
Agriculture/Forestry/Fishing/Hunting/Mining	815	3.7
Construction	2,429	11.0
Manufacturing	5,484	24.8
Wholesale Trade	802	3.6
Retail Trade	4,722	21.4
Transportation and Warehousing, and Utilities	2,111	9.6
Information	449	2.0
Finance and Insurance/Real Estate/Rental and Leasing	1,792	8.1
Services (Professional/Educational/Entertainment/Other)	2,371	10.7
Public Administration	1,095	5.0
TOTAL*	**22,070**	**100**

* Represents the total number of jobs provided by employers within the County and not the total number of employed individuals in the County.
Source: 2023 American Community Survey 5-Year Estimates

Industry Employment Projections (West Central WI)

	Estimated Employment*		
	2022	2032	% Change
Total, All Nonfarm Industries	**221,430**	**242,223**	**9.4**
Mining/Natural Resources	4,346	4,710	8.4
Manufacturing	37,331	39,901	6.9
Construction	8,800	10,035	14.0
Trade, Transportation and Utilities	43,355	47,310	9.1
Information	1,208	1,075	- 11.0
Financial Activities (finance/insurance/real estate/rental and leasing)	7,507	8,543	13.8
Professional and Business Services (professional/management/remediation)	15,034	16,906	12.5
Educational and Health Services (including State/Local Government)	48,084	52,353	8.9
Leisure and Hospitality	19,920	22,684	13.9
Other Services (except Government)	8,597	9,498	10.5
Government	11,585	11,636	0.4
Self-Employed and Unpaid Family Workers (all jobs)	15,663	17,572	12.2

*Employment is a count of jobs rather than people, and includes all part- and full-time nonfarm jobs.
Source: Office of Economic Advisors, Wisconsin Dept. of Workforce Development, December 2024

Largest Employers

Employer	Website	Industry Type	Employees
TTM Technologies Inc	www.ttm.com	Printed & Etched Circuits-Mfrs	1,000-4,999
HPE	www.hpe.com	Computers-System Designers & Consultants	250-499
Stanley Correction Institute		State Govt-Correctional Institutions	250-499
Chippewa Falls Area Unified Schl Dist		Education	250-499
Mason Co Inc	www.masoncompaniesinc.com	Shoes-Retail	250-499
National Presto Industries Inc	www.gopresto.com	Appliances-Household-Major-Manufacturers	100-249
Great Northern Corp	www.greatnortherncorp.com	Software/Application/Platform Publishing	100-249
Mayo Clinic Health Syst		Hospitals	100-249
W S Darley & Co	www.darley.com	Fluid Power Pumps & Motors (mfrs)	100-249
A1 Excavating Inc	www.a1excavating.com	Excavating Contractors	100-249
Walmart Supercenter	www.walmart.com	Department Stores	100-249
Nordson Extrusion Dies Ind LLC	www.nordson.com	Special Dies/Tools Fxtrs/Ind Molds (mfr)	100-249
Blain's Farm-Fleet Tires-Auto		Farm Supplies (whls)	100-249
Chippewa River Industries		Packaging Service	100-249
ITW Deltar Fasteners	www.itw.com	Bolts Nuts Screws Rivets/Washers (mfrs)	100-249
PMI	www.pmillc.com	Metal Manufacturing (mfrs)	100-249
Chippewa Falls YMCA		Youth Organizations & Centers	100-249
GVS Filtration Inc.	www.gvs.com	Air Purification & Filtration Equipment (mfrs)	100-249
Wisconsin Veterans Home		Long Term Care Facility	100-249
Northern Wisconsin Ctr		Government Offices-State	100-249
Cadott Junior-Senior High Sch		Schools	100-249
Lpi Inc	www.lpi-inc.com	Overhead Traveling Cranes Hoists (mfrs)	100-249
Cadrex	www.cadrex.com	Advanced Manufacturing (mfrs)	100-249
Fleet Farm Distribution	www.fleetfarm.com	Warehouse Logistics	100-249

Source: Chippewa County Economic Development Corporation

Attachment: Chippewa County Economic Profile 2025 (9238 : West Central Wisconsin Regional Planning Commission (WCWRPC) - Scott Allen)

Recreational Highlights

Chippewa County is rich in recreational resources offering an assortment of year-round activities, including an approximately 34,500 acre County Forest. The Ice Age Trail runs east-west through the County with the Old Abe trail running north-south, as well as Rustic Road 6, a part of the old Flambeau Trail. Lake Wissota is the County's largest lake and is great for water skiing, sailing and year-round fishing. The Holcombe Flowage is another product of the Chippewa River that is large enough for an assortment of water-related activities. The public parks in Chippewa County have facilities for camping, picnicking and swimming. Numerous nature and hiking trails wander through Brunet Island State Park, Wissota State Park, and Chippewa Falls' Irvine Park.

For more information: Chippewa County: https://www.chippewacountywi.gov

Source: Chippewa County Outdoor Recreation Plan, 2024-2029

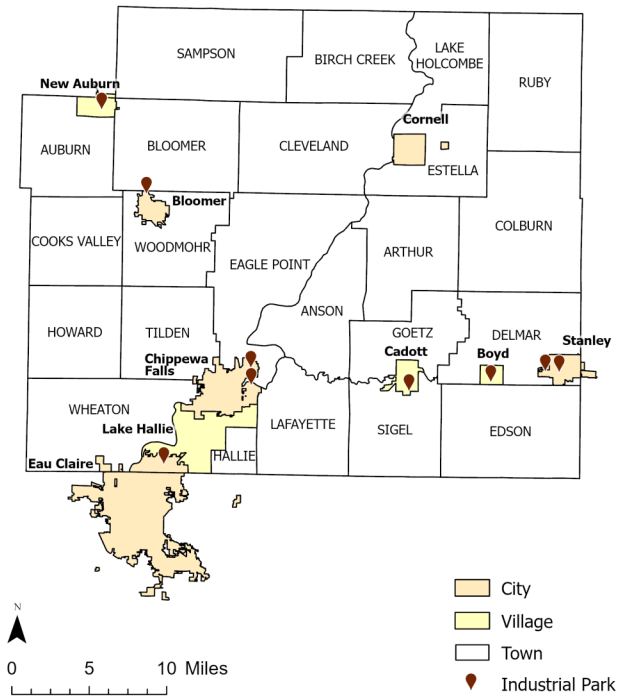
Industrial Parks/Sites

The following is a list of industrial and business parks in Chippewa County.

- Bloomer Ironhorse Industrial Park—Bloomer
- Boyd Industrial Park—Boyd
- Cadott Industrial Park—Cadott
- Chippewa Valley Industrial Park—Lake Hallie
- Lake Wissota Business Park—Chippewa Falls
- New Auburn Opportunity Site—New Auburn
- Riverside Industrial Park—Chippewa Falls
- Stanley East Industrial Park—Stanley
- Stanley West Industrial Park—Stanley
- Wheaton Business Park—Town of Wheaton

For more information, contact the Chippewa County Economic Development Corporation:

Charlie Walker, President/CEO
Chippewa County Economic Development Corporation
715-723-7150
ccedc@chippewa-wi.com



Miscellaneous

HIGHWAYS — Chippewa County is served by a network of U.S. and State Highways. USH 53 and STHs 27, 40, 124, and 178 run north and south through the County. USH 53 and STH 29 are 4-lane highways. STH 64 and 29 run east and west. Many other county and town roads connect with these highways to link the cities, villages, and recreational areas in the County.

RAIL SERVICE — Chippewa County is served by three railroads — the Canadian National (CN), Wisconsin Northern (WN), and Union Pacific (UP). The CN runs east and west, serving the communities of Stanley, Cadott, Boyd, and Chippewa Falls. WN runs north from Chippewa Falls to serve Bloomer, New Auburn, and on to Cameron. UP runs a line between Chippewa Falls and Eau Claire.

AIR SERVICE — The Chippewa Valley Regional Airport on the north side of the City of Eau Claire is a scheduled commercial service facility meeting the following specifications: *Elevation:* 913 ft.; *Runways*: 8,100 ft. (concrete) and 5,000 ft. (concrete/asphalt); *Lights:* rotating Beacon (dusk to dawn), high, medium, and low-intensity runway lights; *NavAids:* ILS, FSS, REIL, NDS; and a navigational tower. United Airlines/SkyWest Airlines currently connects Eau Claire with O'Hare International Airport in Chicago with two daily flights. Seasonal flights can be available through Sun Country Airlines for winter vacationers.

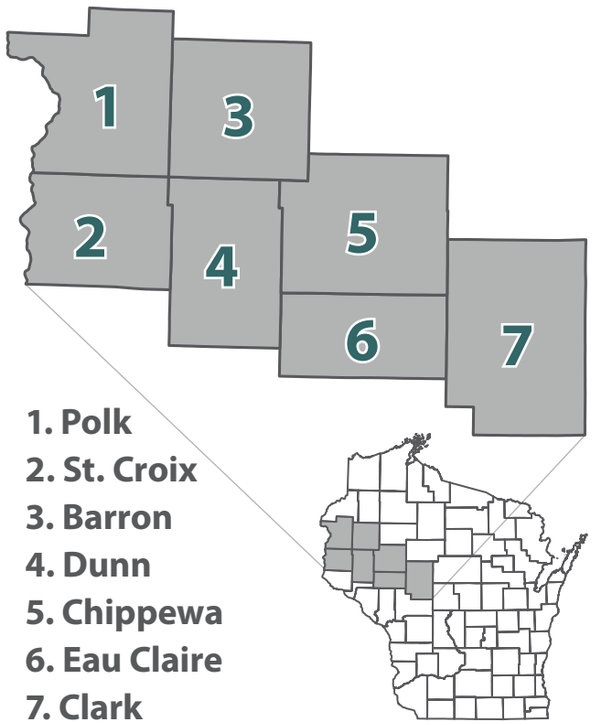
BUS SERVICE — Chippewa County is served by two Jefferson Lines bus routes between the Twin Cities and Green Bay along STH 29, with stops in Chippewa Falls and Stanley. In addition, there is a service line connecting Chippewa Falls to Duluth, MN, with stops in Chippewa Falls and Bloomer. Residents of the City of Chippewa Falls are also provided a Shared Ride public transportation service for local travel.

EDUCATIONAL FACILITIES — The University of Wisconsin-Eau Claire offers 200+ major undergraduate programs in arts and science, nursing, heath and human sciences, and business, as well as a School of Graduate Studies. The Chippewa Valley Technical College provides numerous associate degrees, over 100 vocational educational programs, 17 certificates, and two campuses in Eau Claire. The Chippewa Valley Center of Lakeland University, located in Chippewa Falls, provides four-year college program degrees to working people in more than 20 programs. In addition, Eau Claire has Immanuel Luteran College, a private Christian college, and the Professional Hair Design Academy, a vocational cosmetology and hairstyling school.

Attachment: Chippewa County Economic Profile 2025 (9238 : West Central Wisconsin Regional Planning Commission (WCWRPC) - Scott Allen)

7.C.1.d

OUR REGION



1. Polk
2. St. Croix
3. Barron
4. Dunn
5. Chippewa
6. Eau Claire
7. Clark

APPLICATION PROCEDURE

Applications for each program can be found at www.rbfinc.org or by contacting staff.

Interested businesses should complete and submit the following information to RBF:

- Application and required exhibits listed on application;
- $50 application fee.

RBF will work to structure the loan to best meet the borrower's needs. All requests are acted upon by a local, county, or regional loan committee.

ELIGIBILITY

To be eligible your business must:

- Be located in, or propose to locate in, west central Wisconsin (counties of Barron, Chippewa, Clark, Dunn, Eau Claire, Polk, and St. Croix).*
- Provide an economic benefit to the region which could include:
  - » Expand within the region;
  - » Diversify the economy;
  - » Add new technology;
  - » Revitalize buildings in the region's downtowns;
  - » Create or retain quality jobs; and,
  - » Leverage private capital investment in the region.
- Demonstrate an ability to repay the loan.

** Prairie Farm did not consolidate their CDBG RLF and is not eligible for any RBF Consolidated Loan Fund programs.*

** As an entitlement community, the City of Eau Claire is not eligible for any RBF Consolidated Loan Fund programs.*

Eligible activities include:

- acquisition of equipment, machinery, furniture and fixtures;
- new working capital, inventory purchases, supplies;
- site improvements;
- leasehold improvements;
- natural disaster recovery;
- land or building acquisition;
- new building construction or building renovation.

Loan amount depends on gap and economic development benefit(s).

OUR STORY

Regional Business Fund, Inc. (RBF) was created by the West Central Wisconsin Regional Planning Commission (WCWRPC) in 1995. RBF is a 501 (c)(6) non-profit entity whose purpose is to promote business and economic development in west central Wisconsin. The Consolidated Loan Fund was established when west central Wisconsin units of government consolidated individual Community Development Block Grant (CDBG) Revolving Loan Funds into one regional pool, which is administered by the RBF.

Additional information can be found online at:

www.rbfinc.org

OUR STAFF

FUND MANAGER
715.836.2918 ext. 19

LENDING SPECIALIST
715.836.2918 ext. 14

LOAN PROCESSOR
715.836.2918 ext. 20

Produced by:
WEST CENTRAL WISCONSIN REGIONAL PLANNING COMMISSION
800 Wisconsin St.
Building D2 Suite 401
Mail Box 9
Eau Claire, WI 54703

REGIONAL BUSINESS FUND, INC.

RBF, INC.

AN ECONOMIC DEVELOPMENT PARTNER PROMOTING BUSINESS & ECONOMIC DEVELOPMENT IN WEST CENTRAL WISCONSIN

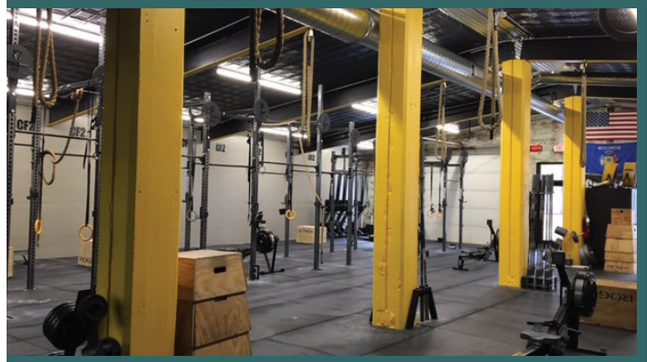
CONSOLIDATED LOAN FUND PROGRAMS

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Packet Pg. 51

CONSOLIDATED LOAN FUND PROGRAMS

REGIONAL BUSINESS FUND, INC.

7.C.1.d



REVOLVING LOAN FUND

The Revolving Loan Fund (RLF) Program is a **flexible source of gap financing** for commercial and industrial projects. The RLF is not meant to be the primary source of financing for projects and will work in partnership with other lending institutions, providing no more than 25% of the total project cost.

FINANCE TERMS AND CONDITIONS

- Minimum loan size of $25,000 with matching funds required.
- 4% fixed interest rate.
- Deferrals of principal & interest or principal payments may be allowed.
- Repayment terms can be up to five years for working capital, seven to ten years for machinery and equipment, and ten years for real estate.
- Collateral is required.
- Unlimited personal guarantees are required for any owner with 20% or more ownership interest in the business.

The Micro Loan Fund Program **provides financing for start-up or newly established small businesses two years of age or less**. The key objective of the program is to assist business owners who are unable to secure traditional bank or credit union financing.

ADDITIONAL ELIGIBILITY REQUIREMENTS

- Annual sales must be less than $1 million and there must be 25 or fewer employees.
- Business plan with financial projections required.

FINANCE TERMS AND CONDITIONS

- Loan size can range from $5,000 to $30,000.
- 4% fixed interest rate.
- Repayment terms can be up to three years for working capital, seven to ten years for machinery and equipment, and ten years for real estate.
- Collateral is required.
- Unlimited personal guarantees are required for any owner with 20% or more ownership interest in the business.
- Approved loans are enrolled in the Capital Access Program, resulting in a fee of 3% of the loan amount.

MICRO LOAN FUND





GROWTH LOAN FUND

The Growth Loan Fund Program **provides financing for existing businesses at least two years of age**. The purpose of the program is to support the growth of existing companies with financial needs that cannot be met by traditional financial institutions.

ADDITIONAL ELIGIBILITY REQUIREMENTS

- Sales within the last 12 months must be at least $100,000.
- Business plan outlining the sales growth strategy is required.

FINANCE TERMS AND CONDITIONS

- Loan size can range from $10,000 to $60,000.
- 4% fixed interest rate.
- Repayment terms can be up to five years on working capital, seven years on machinery and equipment, and ten years for real estate.
- Collateral is required.
- Unlimited personal guarantees are required for any owner with 20% or more ownership interest in the business.
- Approved loans are enrolled in the Capital Access Program, resulting in a fee of 3% of the loan amount.

The Façade Loan Fund Program **provides financial assistance to encourage property and/or business owners in core downtowns to revitalize downtown commercial buildings** within the communities of west central Wisconsin.

ADDITIONAL ELIGIBILITY REQUIREMENTS

- Provide acceptable façade design plans for renovation that comply with design guidelines adopted by local governments.
- Eligible activities include: façade renovation; exterior lighting, doors, and graphics; signage, windows, and awnings; and, other façade or landscape improvements.

FINANCE TERMS AND CONDITIONS

- Loan size can range from $5,000 to $60,000.
- 1% fixed interest rate.
- Repayment terms up to 7 years with up to 15 year amortization.
- All loans must be secured by a mortgage on the property being renovated.
- Unlimited personal guarantees are required for any owner with 20% or more ownership interest in the business.

FAÇADE LOAN FUND



Attachment: RBF Brochure (9220 : West Central Wisconsin Regional Planning Commission (WCWRPC))

REGIONAL BUSINESS FUND, INC.

OUR STORY

Regional Business Fund, Inc. (RBF) is a 501c6 non-profit entity whose purpose is to promote business and economic development in west central Wisconsin. RBF was created by the West Central Wisconsin Regional Planning Commission (WCWRPC) in 1995 to administer the Economic Development Administration (EDA) Revolving Loan Fund. In 2005, the Technology Enterprise Fund was added. The Consolidated Loan Fund (consisting of the Revolving Loan Fund, Micro Loan Fund, Growth Loan Fund, and Façade Loan Fund) was established in 2007. The Consolidated Loan Fund was established when west central Wisconsin units of government consolidated individual Community Development Block Grant (CDBG) Revolving Loan Funds into one regional pool, which is administered by the RBF. In 2020, the EDA CARES Act Recovery Assistance Revolving Loan Fund was established to assist small businesses most impacted by the COVID-19 pandemic with working capital loans.

In total, there are seven loan programs the RBF can offer businesses within west central Wisconsin consisting of Barron, Chippewa, Clark, Dunn, Eau Claire, Polk, and St. Croix counties.

RBF, Inc. is managed by a Board of Directors consisting of representatives from each of the seven counties and contracts with WCWRPC to administer the loan programs.

Eligible activities include:

- Acquisition of equipment, machinery, furniture and fixtures
- New working capital, inventory purchases, and supplies
- Site improvements
- Leasehold improvements
- Natural disaster recovery
- Land or building acquisition
- New building construction or building renovation



FUND ACTIVITY

Activity as of December 31, 2024

FUND BALANCE **$16,886,306.52**
(Total cash, receivables, and other assets)

AVAILABLE CASH BALANCE **$984,442.44**
(Net of closed loans not yet funded and committed loans)

DECEMBER REPAYMENTS **$230,385.32**

CLOSED LOANS

- 63 totaling $4,080,500
- 375 full-time jobs created/retained in the next 2 years
- $36,943,838 private funds leveraged

CONTACT US

Regional Business Fund, Inc.
715-836-2918 — www.rbfinc.org

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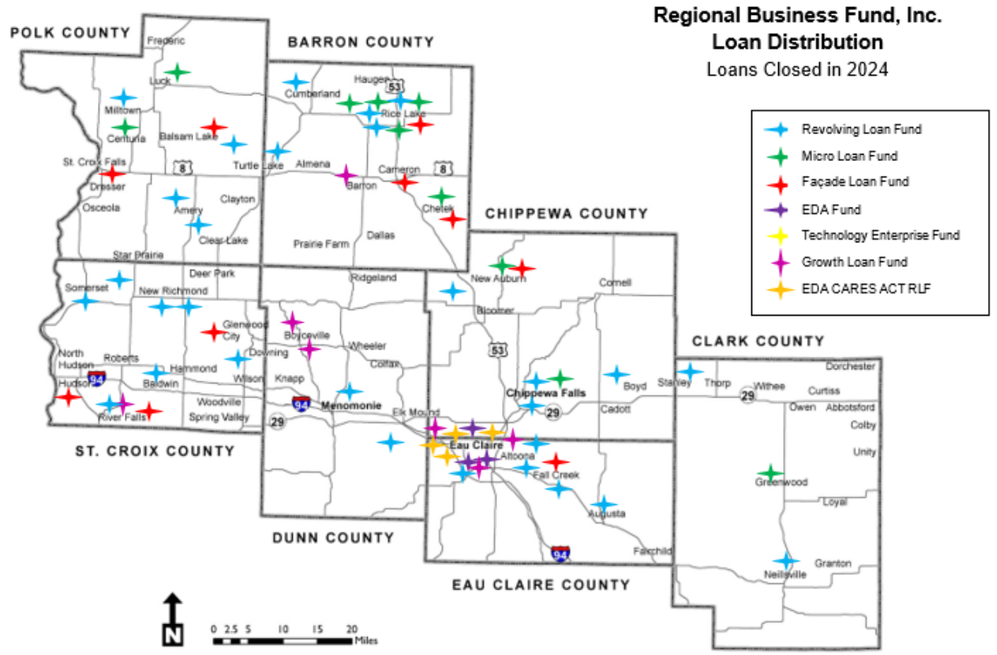


WCWRPC coordinate. partner. advocate. serve.

All business photos contained herein have been provided by the businesses.

REGIONAL BUSINESS FUND, INC.

2024 ANNUAL REPORT



ECONOMIC DEVELOPMENT HIGHLIGHTS

- **63 LOW-INTEREST LOANS** were awarded to **57 BUSINESSES** in the amount of **$4.1 MILLION** to assist with financing in west central Wisconsin
- **375 JOBS** were **CREATED** or **RETAINED** by businesses receiving loans
- **31 START-UP BUSINESSES** obtained RBF financing
- **$36.9 MILLION** in private funds were **LEVERAGED**
- **10 DOWNTOWN BUILDINGS** were renovated via the **FAÇADE LOAN PROGRAM**

Regional Business Fund, Inc. (RBF) is a non-profit economic development corporation whose purpose is to promote busine and economic development in west central Wisconsin by providing business financing tools. RBF offers low-interest loan fun to businesses that expand within the region; diversify the economy; add new technology; revitalize buildings in the regio downtowns; create or retain quality jobs; and increase private capital investment in the region. RBF is managed by a Board of Directors consisting of representatives from each of the seven counties in the region and contracts with West Central Wisconsin Regional Planning Commission to administer the loan programs.

Attachment: RBF Annual Report 2024 (9238 : West Central Wisconsin Regional Planning Commission (WCWRPC) - Scott Allen)

2024 ACTIVITY

REVOLVING LOAN FUND

The Revolving Loan Fund (RLF) is a flexible source of loan funds for business financing. The purpose of the fund is to provide a source of gap financing to projects that provide an economic benefit to the community or region. RLF funds cannot be the sole source of financing and can only provide up to 25% of the total project cost.

In 2024, twenty-nine (29) businesses obtained loans within the RLF program.

COUNTY	LOANS	AMOUNT	JOBS	LEVERAGED
Barron	5	$391,800	22	$4,559,400
Chippewa	4	$293,000	20	$5,395,675
Clark	2	$368,800	32	$4,415,000
Dunn	2	$130,000	28	$694,978
Eau Claire	5	$425,600	31	$4,121,964
Polk	4	$427,000	92	$5,160,000
St. Croix	7	$575,268	67	$6,329,997

Faulkner Family Equipment Repair LLC (Dunn) is owned by Troy (TJ) and Brianna Faulkner. The business offers mobile heavy equipment repair, maintenance, and diagnostic services in rural Dunn County. To begin operations, the business utilized a RLF to assist with the purchase of equipment and working capital.

The Grove Childcare, LLC (Polk) is owned by Steven and Anne Schaffer. The Grove Childcare is a newly constructed daycare facility in the Milltown Industrial Park offering care for up to 125 children. The facility will cater to the childcare needs of the nearby workforce. In part, the RLF program funded the new construction, furniture, and equipment.

Apple Valley Road Haus and Event Center LLC (Clark) is owned by Shawn Welter and Matt Solie. The business partners purchased the bar and grill in Neillsville. Open daily, Apple Valley Road Haus offers lunch and dinner along with weekly events like trivia, bingo, and game day specials. The business also offers event space. Along with a bank, the business utilized the RLF program to fund the acquisition of the real estate/ business, new equipment, and renovations.

FAÇADE LOAN FUND

The Façade Loan Fund provides low interest (1%) financing to property and business owners to help encourage the revitalization of downtown commercial buildings within the communities of west central Wisconsin. RBF can be the sole source of financing for projects utilizing the Façade Loan Fund. In 2024, ten (10) loans were originated within the Façade Loan Fund program.

COUNTY	LOANS	AMOUNT	LEVERAGED
Barron	3	$179,650	$5,527
Chippewa	1	$35,000	$240,000
Eau Claire	1	$60,000	$0
Polk	2	$120,000	$7,906
St. Croix	3	$131,630	$9,885

Before **After**

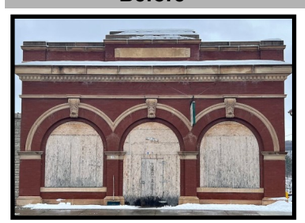




Northwoods Cycle LLC (Barron) was established by Allison Hall, Alex Wolff, and Tim Bradley to operate a bicycle shop at 19 N Main St. in Rice Lake. The building required interior and exterior renovations including outfitting it to display inventory, creating a separate space for bicycle repairs, and build-out of a coffee shop space.

Exterior renovations included new windows and doors, signage, paint, and a new awning - the Façade program was used to assist with exterior renovations including an overhead door that opens to the new space which also includes a local coffee and sandwich shop.

Before **After**





The Unique Boutique SCF LLC (Polk) is owned by Shari and Matthew Steele; the owners purchased a historic building in downtown St. Croix Falls to operate their boutique. The historic property required interior and exterior renovations. The Façade program assisted with funding new windows, tuckpointing / mason work, and new signage.

2024 ACTIVITY

MICRO LOAN FUND

The Micro Loan Fund provides loans to start-up or newly established businesses two years of age or younger who are unable to obtain traditional financing. RBF can be the sole source of financing in the Micro Loan Fund program. In 2024, ten (10) businesses received loans within the Micro Loan Fund program.

COUNTY	LOANS	AMOUNT	JOBS	LEVERAGED
Barron	5	$139,000	20	$350,680
Chippewa	2	$40,000	9	$57,230
Clark	1	$15,000	6	$18,000
Polk	2	$60,000	5	$88,000





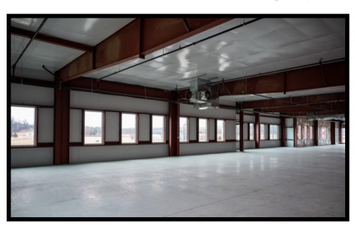
Rolling River Spa LLC (Chippewa) is owned by Erica Ladenthin. The start-up business offers a massage studio, nail spa, and products. The business is located in the Dove Healthcare Business & Clinic Suites Building in Chippewa Falls. Ms. Ladenthin received a Micro Loan to assist with leasehold improvements and start-up working capital.

GROWTH LOAN FUND

The Growth Loan Fund provides loans to established businesses that are at least two years of age with financing needs that cannot be met by traditional financial institutions. Eligible companies are too old for the Micro Loan Fund program and needs cannot be met through the Revolving Loan Fund program. RBF can be the sole source of financing in the Growth Loan Fund. In 2024, seven (7) business received a loan within the program.

COUNTY	LOANS	AMOUNT	JOBS	LEVERAGED
Barron	1	$30,000	2	$13,176
Dunn	2	$120,000	18	$39,000
Eau Claire	3	$180,000	21	$0
St. Croix	1	$40,051	0	$0

The **St. Croix Valley Business Innovation Center (SCVBIC) (St. Croix County)** is owned by the River Falls Economic Development Corporation. The SCVBIC offers incubation space, training, and support to businesses. Tenants can rent coworking space, private office space, industrial space, food ready space, and workstations. The 2nd floor of the center features a 7,000 sq. ft. space. A Growth loan funded renovations to create a semi-finished space that will attract a business tenant.



TECHNOLOGY ENTERPRISE FUND

The Technology Enterprise Fund (TEF) is a "quasi-equit patient debt, revolving loan fund that provides creat financing to new and emerging technology companies. T fund is targeted to businesses engaged in the research a development of new and emerging technologies a manufacturing processes. Debt can be completely deferr for up to two years. No loans were originated in 2024.

EDA REVOLVING LOAN FUND

The Economic Development Administration Revolving Lo Fund (EDA RLF) program is designed to address a gap private capital markets and provides long-term, fixed ra low down payment, gap financing. The EDA RLF progra can be utilized in the City of Eau Claire. Since most RBF's other programs cannot be utilized in the City, t EDA RLF program is most often used in Eau Claire. 2024, three (3) businesses were assisted with EDA R financing.

COUNTY	LOANS	AMOUNT	LEVERAGED
Eau Claire	3	$133,650	$606,15

Flowering Lawn, Inc. dba Flawn Seed Kits (Eau Claire) began in 2021 by Anthony Nied. The company creates and sells Flawn Seed Kits which are a custom blend of pollinator-friendly seeds that can be spread on top of existing lawns to reduce the costs of fertilizing, watering, and mowing. The busine was rapidly growing and an EDA RLF assisted the busine with the purchase of a building in the City of Eau Claire.

EDA CARES ACT REVOLVING LOAN FUND

The Economic Development Administration CARES A Recovery Assistance Revolving Loan Fund (EDA CARI RLF) was established in 2020 to assist small businesses providing low-interest working capital loans. In 2024, fo (4) businesses obtained a loan through the program assist with working capital and the purchase of equipmen

COUNTY	LOANS	AMOUNT	LEVERAGED
Eau Claire	4	$185,1000	$4,831,27

Rellim Senior Day Care, LLC (Eau Claire) is owned by Jen and Jim Miller and was established to offer daycare services for seniors aged 50 and older - a service that is limited despite a growing demand and aging population. The EDA CARES program assisted with renovations to the business' new facility in Eau Claire.

STATEMENT OF EXPLANATION

Resolution No. 33 - 25

RES. 33-25: RESOLUTION URGING STATE FUNDING TO OFFSET COUNTY IMPACTS OF FEDERAL SNAP CHANGES - BOBBIE JAEGER

This resolution responds to recent federal changes to the FoodShare (SNAP) program that shift more costs and responsibilities to states and counties.

The changes extend work requirements to more people, reduce exemptions, and lower federal funding for program administration. At the same time, counties could face higher workloads, less funding to pay staff, and possible penalties if payment errors increase.

For Chippewa County, this means more people needing case management through FoodShare, but fewer federal dollars to cover the cost of that work. With levy limits in place, counties cannot make up the difference on their own.

This resolution asks the State of Wisconsin to provide funding to offset these impacts and ensure counties can continue administering FoodShare effectively.

Resolution No. 33 - 25

RES. 33-25: RESOLUTION URGING STATE FUNDING TO OFFSET COUNTY IMPACTS OF FEDERAL SNAP CHANGES - BOBBIE JAEGER

WHEREAS, the federal budget reconciliation package enacted in July of 2025, makes changes to the SNAP (FoodShare) program that would reduce federal costs and significantly impact county- administered services; and

WHEREAS, these changes extend SNAP work requirements to individuals up to age 64, lower the child age threshold for parent exemptions, and eliminate waivers for areas with high unemployment, thereby increasing referrals to the FoodShare Employment and Training (FSET) program and workload for county human service departments; and

WHEREAS, the legislation requires states to contribute a minimum of 5% toward the cost of SNAP benefits if their error rate is 6% or higher, facing penalty funding of between 5% and 15% of total SNAP costs; and

WHEREAS, Wisconsin's current SNAP payment error rate is 4.47%, but without additional investment in eligibility and administrative systems, heightened workloads could push the state above the 6% threshold, triggering significant penalties; and

WHEREAS, if Wisconsin's error rate reaches 6% on or after October 1, 2027, the state's 5% cost share would be approximately $69 million annually, with potential penalty payments increasing the state's financial burden-costs that could ultimately cascade down to counties; and

WHEREAS, the SNAP administrative match rate for Income Maintenance (IM) activities has been reduced from the previous 50% federal / 50% state-local to 25% federal / 75% state-local, substantially reducing federal revenue available to counties to administer SNAP; and

WHEREAS, the reduction in administrative funds could lead to a reduction in IM staff, which could result in an increased payment error rate; and

WHEREAS, county IM administrative costs are approximately $123 million annually, with SNAP-related workload accounting for about $49 million of those costs; and

WHEREAS the new administrative match rate results in an estimated $17 million annual loss in SNAP administrative funding to counties; and

WHEREAS, these federal cuts result from shifting the benefit and administrative costs

to states and counties (reducing resources available for local administration), tightening work requirements (increasing county workload), and penalizing minor payment errors (resulting in more cost to the states); and

WHEREAS, counties operate under state-imposed property tax levy limits, restricting their ability to offset such funding losses without additional state or federal relief;

NOW, THEREFORE BE IT RESOLVED, that the Chippewa County Board of Supervisors urges the State of Wisconsin to provide funding to offset the county fiscal impact caused by the enacted federal SNAP changes, and to work with counties to ensure adequate resources for the administration of FoodShare and related programs; and

BE IT FURTHER RESOLVED, that the Chippewa County Clerk is hereby authorized and directed to send a copy of this Resolution to the Governor of the State of Wisconsin, Wisconsin State Legislators with a constituency within Chippewa County, the Wisconsin Counties Association, and the Wisconsin County Human Service Association.

FINANCIAL IMPACT:

There is no fiscal impact to Chippewa County by passage of this resolution.

10/14/2025	**County Board**
RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 21
SECONDER:	George Rohmeyer, District 17
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Lee Hennick

History:

09/18/25 Health & Human Services Board FORWARD TO COUNTY BOARD

Approved as to Form:

Todd A. Pauls, Corporation Counsel 9/3/2025

Leah Simington, Finance Director 9/3/2025

Andy J. Albarado, County Administrator 9/4/2025

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STATEMENT OF EXPLANATION
Ordinance No. 07 - 25

ORD. 07-25: ORDINANCE TO AMEND SECTIONS 12-09, 12-21, 12-71 AND 12-72 OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING STORMWATER MANAGEMENT - SECOND READING - LYNDA SCHWEIKERT

These proposed amendments to Chapter 12 regarding stormwater management modify the timeframe for recording a long-term maintenance agreement with the Chippewa County Register of Deeds. The timeframe proposed is to change from prior to stormwater permit termination to prior to permit issuance. Some developers are selling parcels to new ownership without first recording a long-term maintenance agreement for the parcel(s). The proposed amendments will ensure that long-term maintenance agreements are recorded so that subsequent owner(s) have notice of the maintenance requirements and enforcement procedures of the long-term maintenance agreement prior to purchasing a lot.

LCFM proposes the following amendments:

Article I. In General

- *Sec. 12-09(34). Maintenance Agreement*.
  - The proposed change is to insert the phrase “recorded with the Chippewa County Register of Deeds”.

Article II. Administration and Enforcement

- *Sec. 12-21(c)(2). Review and Approval of Permit Application*.
  - The proposed change is to delete the word “or” in the first sentence.
- *Sec. 12-21(c)(3). Review and Approval of Permit Application*.
  - The proposed change is to insert the word “approved” and phrase “recorded with the Chippewa County Register of Deeds”.
- *Sec. 12-21(d)(13). Permit Requirements*.
  - The proposed change is to insert the word “, recorded”.

Article VI. Maintenance, Maintenance Agreements, and Financial Guarantee

- *Sec. 12-71(b). Maintenance Agreements Required*

- The proposed change is to insert the word “approved” and phrase “prior to permit issuance”.

- *Sec. 12.71(c). Maintenance Agreement Provisions*
  - Proposed restructuring of provisions to reflect the sample long-term maintenance agreement and inserting an additional requirement of a legal description.

- *Sec. 12-72(b)(2)-(4). Release*
  - The proposed change is to insert the words “management” and “stormwater management” in sub. (2), insert the words “stormwater management” in sub. (3), insert the phrase “review and acceptance of the “as built plans” and certification as submitted by a registered Professional Engineer to the Administrator.” in sub (4), delete the phrase “submittal of the following to the Administrator:” in sub (4), and delete subs. (4)(a) and (4)(b) in their entirety.

Ordinance No. 07 - 25

ORD. 07-25: ORDINANCE TO AMEND SECTIONS 12-09, 12-21, 12-71 AND 12-72 OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING STORMWATER MANAGEMENT - SECOND READING - LYNDA SCHWEIKERT

SEE ATTACHMENT

FINANCIAL IMPACT:

There is no fiscal impact to Chippewa County by passage of these ordinance amendments.

10/14/2025	**County Board**
RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 21
SECONDER:	James Flater, District 1
AYES:	Hull, Bergeron, Flater, Guthman, Shoebridge, Gehring, Bachman, Goettl, Ericksen, Seidlitz, Peterson, Lotts, Bomar, Roshell, Kelly, Kempe, Rohmeyer, Flynn, Meinen, Ives
ABSENT:	Lee Hennick

History:

08/20/25 Land Conservation & Forest Management Committee FORWARD TO COUNTY BOARD

09/09/25 County Board FIRST READING

Approved as to Form:

Todd A. Pauls, Corporation Counsel 7/22/2025

Leah Simington, Finance Director 7/22/2025

Andy J. Albarado, County Administrator 7/23/2025

ORDINANCE TO AMEND SECTIONS 12-09, 12-21, 12-71 AND 12-72 OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING STORMWATER MANAGEMENT

1. That Sections 12-09, 12-21, 12-71 and 12-72 of the Chippewa County Code of Ordinances are amended as follows:

CHAPTER 12 STORMWATER MANAGEMENT: CONSTRUCTION SITE EROSION CONTROL AND POST-CONSTRUCTION

Note: Ordinance 07-23 was adopted by the County Board on 10-10-2023 to repeal and recreate Chapter 12 as indicated below:

Article I. In General

Sec. 12-01. Effective Date.
Sec. 12-02. Authority.
Sec. 12-03. Purpose
Sec. 12-04. Intent.
Sec. 12-05. Severability.
Sec. 12-06. Jurisdiction.
Sec. 12-07. Applicability.
Sec. 12-08. Exceptions.
Sec. 12-09. Definitions.
Sec. 12-10. to 12-20. Reserved

Article II. Administration And Enforcement

Sec. 12-21. Permits.
Sec. 12-22. Fee Schedule.
Sec. 12-23. Enforcement.
Sec. 12-24. Special Inspection Warrants.
Sec. 12-25. Stop Work Orders.
Sec. 12-26. Board of Adjustment.
Sec. 12-27. to 12-30. Reserved

Article III. General Design and Stormwater Plan Requirements

Sec. 12-31. Design Standards and Criteria.
Sec. 12-32. General Stormwater Plan Requirements.
Sec. 12-33. to 12-40. Reserved

Article IV. Construction Site Erosion Control

Sec. 12-41. Design Standards and Criteria.
Sec. 12-42. Mandatory Site Protection, Erosion Control, and Sediment Control Practices.
Sec. 12-43. Use of Stormwater Facilities for Erosion and Sediment Control.
Sec. 12-44. Specifications.
Sec. 12-45. to 12-50. Reserved.

Article V. Post Construction Stormwater Management

Sec. 12-51. Post Construction Stormwater Management Design Standards and Criteria.
Sec. 12-52. Total Suspended Solids.
Sec. 12-53. Peak Runoff Discharge.
Sec. 12-54. Infiltration.
Sec. 12-55. Restrictions on the Location of Infiltration Practices.
Sec. 12-56. Closed Depressions.

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Sec. 12-57. Protective Areas.
Sec. 12-58. Swale Treatment for Transportation Facilities.
Sec. 12-59. Regional Treatment.
Sec. 12-60. Fueling and Vehicle Maintenance Areas.
Sec. 12-61. Post-Construction Stormwater Management Specifications.
Sec. 12-62. to 12-70. Reserved

Article VI: Maintenance, Maintenance Agreements, and Financial Guarantee
Sec. 12-71. Maintenance and Maintenance Agreement.
Sec. 12-72. Financial Guarantee.
Sec. 12-73. to 12-80. Reserved

Article VII: Illicit Discharge
Sec. 12-81. Prohibitions.
Sec. 12-82. Exemptions.
Sec. 12-83. Notice of Violation.
Sec. 12-84. to 12-90. Reserved

ARTICLE I. IN GENERAL

Sec. 12-01. Effective Date.

This chapter shall be in force and effect from and after its adoption and publication.

Sec. 12-02. Authority.

(a) This chapter is adopted under the authority granted by Wis. Stat. §§ 59.693 and 236.45. This chapter supersedes all provisions of any chapter or ordinance previously adopted by the Chippewa County Board of Supervisors or other municipalities under Wis. Stat. Chapters 59 and 236, that relate to construction site erosion control and stormwater management.

(b) The provisions of this chapter are deemed not to limit any other lawful regulatory powers of the Chippewa County Board of Supervisors.

(c) The requirements under this chapter do not pre-empt more restrictive erosion, sediment control, and stormwater management requirements that may be imposed by any of the following:

(1) Wisconsin Department of Natural Resources administrative rules, permits or approvals, including those authorized under Wis. Stat. §§ 281.16 and 283.33.

(2) Targeted non-agricultural performance standards promulgated in rules of the Wisconsin Department of Natural Resources under Wis. Admin. Code § NR 151.004.

(3) Municipal ordinances, adopted independently by municipalities that are not subject to the jurisdiction of this chapter.

Sec. 12-03. Purpose.

(a) *Construction Site Erosion Control*. The purpose of the requirements under this chapter for construction

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site erosion control is to further the maintenance of safe and healthful conditions; prevent and control water pollution; prevent and control soil erosion; prevent and control sediment deposition; protect spawning grounds, fish and aquatic life; protect groundwater recharge areas; control building sites, placement of structures and land uses; preserve ground cover and scenic beauty; and promote sound economic growth, by minimizing the amount of sediment and other pollutants carried by runoff or discharged from land disturbing construction activity to waters of the state in Chippewa County.

(b) *Post Construction Stormwater Management*. The purpose of the requirements under this chapter for post-construction stormwater management is to establish long-term, post-construction runoff management requirements that will diminish the threats to public health, safety, welfare and the aquatic environment. Specific purposes are to:

(1) Further the maintenance of safe and healthful conditions.

(2) Prevent and control the adverse effects of stormwater; prevent and control soil erosion; prevent and control water pollution; protect spawning grounds, fish and aquatic life; control building sites, placement of structures and land uses; preserve ground cover and scenic beauty; and promote sound economic growth.

(3) Control exceedance of the safe capacity of existing drainage facilities and receiving water bodies; prevent undue channel erosion; control increases in the scouring and transportation of particulate matter; and prevent conditions that endanger downstream property.

(4) Minimize the amount of pollutants discharged from separate storm sewers to protect the waters of the state.

Sec. 12-04. Intent.

It is the intent of this chapter to regulate construction and post-construction storm water discharges to waters of the state. This chapter may be applied on a site-by-site basis.

Sec. 12-05. Severability.

The provisions of this chapter are hereby declared to be severable. If a court of competent jurisdiction determines any section, clause, provision or portion of this chapter to be unconstitutional or invalid, the remainder of the chapter shall remain in force and not be affected by such judgment.

Sec. 12-06. Jurisdiction.

The provisions of this chapter shall apply to land disturbing construction activities on lands owned by Chippewa County and the County Highway rights-of-way located within the boundaries of the Chippewa County Municipal Separate Storm Sewer System Permitted Area.

Sec. 12-07. Applicability.

Applicability. Except as provided under Sec. 12-08, the provisions of this chapter apply to any construction site, as defined under Sec. 12-09, following land disturbing construction and development related activities. The provisions of this chapter apply to construction sites of any size that, as determined by the Administrator, are likely to result in runoff that exceeds the safe capacity of the existing drainage facilities or receiving body of water, that causes undue channel erosion, or that increases water pollution by scouring or transporting of particulate.

Attachment: Ordinance to Amend Sections 12-09, 12-21, 12-71 and 12-72 Stormwater Management - FINAL (07 - 25 : Ordinance To Amend

Sec. 12-08. Exceptions.

The provisions of this chapter do not apply to the following:

(a) Transportation facilities, except transportation facility construction projects that are part of a larger common plan of development, such as local roads within a residential or industrial development.

(b) A construction project that is exempted by federal statutes or regulations from the requirement to have a national pollutant discharge elimination system permit issued under chapter 40, Code of Federal Regulations, part 122, for land disturbing construction activity.

(c) Nonpoint discharges from agricultural facilities and practices.

(d) Nonpoint discharges from silviculture activities.

(e) Routine maintenance for project sites that have less than five (5) acres of land disturbance if performed to maintain the original line and grade, hydraulic capacity or original purpose of the facility.

(f) Underground utility construction, but not including the construction of any above ground structures associated with utility construction.

(g) For post construction requirements only, a post-construction site with less than 10% connected imperviousness based on the area of land disturbance, provided the cumulative area of all impervious surfaces is less than one acre.

(h) Activities conducted by a state agency, as defined under Wis. Stat. § 227.01(1), but also including the office of district attorney, which is subject to the state plan promulgated or a memorandum of understanding entered into under Wis. Stat. § 281.33(2).

Sec. 12-09. Definitions.

(1) *Adequate sod*, or *self-sustaining vegetative cover* means maintenance of sufficient vegetation types and densities such that the physical integrity of the streambank or lakeshore is preserved. Self-sustaining vegetative cover includes grasses, forbs, sedges and duff layers of fallen leaves and woody debris.

(2) *Administrator* means the Director of the Chippewa County Department of Land Conservation and Forest Management or their lawfully designated representative.

(3) *Agricultural Facilities and Practices* has the meaning in Wis. Stat. § 281.16(1).

(4) *Atlas 14* means the National Oceanic and Atmospheric Administration (NOAA) Atlas 14 Precipitation-Frequency Atlas of the United States, Volume 8 (Midwestern States), published in 2013.

(5) *Average Annual Rainfall* means a typical calendar year of precipitation as determined by the Wisconsin Department of Natural Resources for users of models such as WinSLAMM, P8 or equivalent methodology. The average annual rainfall is chosen from a department publication for the location closest to the municipality.

(6) *Best Management Practices* or *BMPs* means structural or non−structural measures, practices, techniques or devices employed to avoid or minimize soil, sediment or pollutants carried in runoff to waters of the state.

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(7) *Building Opening Elevation* means the lowest window, door, or other elevation at which water may enter a building.

(8) *Business Day* means a day the office of the Administrator is routinely and customarily open for business.

(9) *Cease and Desist Order* means a court-issued order to halt land disturbing construction activity that is being conducted without the required permit or in violation of a permit issued by Chippewa County.

(10) *Clean runoff* means that runoff which is derived from relatively uncontaminated sources which may include, but is not limited to: uncontaminated ground water, potable water source, roof drains, foundation drain and sump pump, air conditioning condensation, springs, lawn watering, individual residential car washing, water main and hydrant flushing and swimming pools if the water has been dechlorinated.

(11) *Connected Imperviousness* means an impervious surface connected to waters of the state via a separate storm sewer, an impervious flow path, or a minimally pervious flow path.

(12) *Construction Site* means an area upon which one or more land disturbing construction activities occur that in total will disturb one acre or more of land, including areas that are part of a larger common plan of development or sale where multiple separate and distinct land disturbing construction activities may be taking place at different times on different schedules but under one plan such that the total disturbed area is one acre or more. A long-range planning document that describes separate construction projects, such as a 20-year transportation improvement plan, is not a common plan of development.

(13) *Construction Plans* are site specific technical drawings certified and stamped by a professional engineer licensed in the State of Wisconsin that depict the proposed development to meet the requirements of this chapter.

(14) *Design Storm* means a hypothetical discrete rainstorm characterized by a specific duration, temporal distribution, rainfall intensity, return frequency, and total depth of rainfall.

(15) *Development* means recreational residential, commercial, industrial or institutional land uses and associated roads.

(16) *Direct conduits to groundwater* mean wells, sinkholes, swallets, fractured bedrock at the surface, mine shafts, non-metallic mines, tile inlets discharging to groundwater, quarries, or depressional groundwater recharge areas over shallow fractured bedrock.

(17) *Direct Discharges* means discharges that meet all of the following conditions:

(a) discharges are from parcels contained within the area of the site development and the discharges do not cross property lines prior to entering the exempt body of water;

(b) discharges do not travel through any public conveyance; and

(c) discharges do not enter any lake or stream that appears on the USGS 7.5-minute quadrangle maps prior to entering any of the above water bodies.

(18) *Discharge* has the meaning given in Wis. Stat. §§ 283.01(4), and 283.01(5).

(19) *Effective Infiltration Area* means the area of the infiltration system that is used to infiltrate runoff and

Attachment: Ordinance to Amend Sections 12-09, 12-21, 12-71 and 12-72 Stormwater Management - FINAL (07 - 25 : Ordinance To Amend

does not include the area used for site access, berms or pretreatment.

(20) *Erosion* means the process by which the land's surface is worn away by the action of wind, water, ice or gravity.

(21) *Erosion and Sediment Control Plan* means a comprehensive plan developed to address pollution caused by erosion and sedimentation of soil particles or rock fragments during construction.

(22) *Exceptional Resource Waters* means waters listed in Wis. Admin. Code § NR 102.11.

(23) *Filtering Layer* means soil that has at least a 3−foot-deep layer with at least 20 percent fines; or at least a 5−foot-deep layer with at least 10 percent fines; or an engineered soil with an equivalent level of protection as determined by the Administrator for the site.

(24) *Final Stabilization* means that all land disturbing construction activities at the construction site have been completed and that a uniform perennial vegetative cover has been established, with a density of at least 70 percent of the cover, for the unpaved areas and areas not covered by permanent structures, or that employ equivalent permanent stabilization measures.

(25) *Financial Guarantee* means a performance bond, maintenance bond, surety bond, irrevocable letter of credit, or similar guarantees submitted to the Administrator by the responsible party to assure that post-construction stormwater management requirements of the chapter are carried out in compliance with the stormwater management plan.

(26) *Illicit connection* means any drain or conveyance, whether on the surface or subsurface, which allows an illegal non-storm water discharge to enter the storm drain system, including but not limited to: sewage, process wastewater and wash water, any connections to the storm drain system from indoor drains and sinks, regardless of whether said drain or connection had been allowed, permitted, or approved by a government agency, prior to the adoption of this chapter.

(27) *Impervious Surface* means an area that releases as runoff all or a large portion of the precipitation that falls on it, except for frozen soil. Rooftops, sidewalks, driveways, parking lots and streets are examples of areas that typically are impervious.

(28) *In-fill Area* means an undeveloped area of land located within an existing urban sewer service area, surrounded by existing development or existing development and natural or man-made features where development cannot occur. "In−fill" does not include any undeveloped area that was part of a larger development for which a stormwater permit was previously required.

(29) *Infiltration* means the entry of precipitation or runoff into or through the soil.

(30) *Infiltration System* means a device or practice such as a basin, trench, rain garden or swale designed specifically to encourage infiltration, but does not include natural infiltration in pervious surfaces such as lawns, redirecting of rooftop downspouts onto lawns or minimal infiltration from practices, such as swales or road side channels designed for conveyance and pollutant removal only.

(31) *Land Disturbing Construction Activity* means any man-made alteration of the land surface resulting in a change in the topography or existing vegetative or non-vegetative soil cover, that may result in runoff and lead to an increase in soil erosion and movement of sediment into waters of the state. Land disturbing construction activity includes clearing and grubbing, demolition, excavating, pit trench dewatering, filling and grading activities.

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(32) *Land Division* means any land, vacant or improved, which is divided or proposed to be divided into two or more lots, parcels, sites, units, plots, condominiums, tracts or interests for the purpose of offer, sale, lease or development whether immediate or future, either on the installment plan or upon any and all other plans, terms and conditions. Land division includes the division or development of residentially and non-residentially zoned land, whether by deed, metes and bounds description, devise, intestacy, lease, certified survey map, plat or other recorded instrument. Land divisions also include condominium creation or conversion.

(33) *Landowner* means any person holding fee title, an easement or other interest in property, which allows the person to undertake cropping, livestock management, land disturbing construction activity or maintenance of storm water BMPs on the property.

(34) *Maintenance Agreement* means a legal document, recorded with the Chippewa County Register of Deeds, that provides for long-term maintenance of stormwater management practices.

(35) *Maximum Extent Practicable* or *MEP* means a level of implementing Best Management Practices in order to achieve a performance standard specified in this chapter which takes into account the best available technology, cost effectiveness and other competing issues such as human safety and welfare, endangered and threatened resources, historic properties and geographic features. MEP allows flexibility in the way to meet the performance standards and may vary based on the performance standard and site conditions.

(36) *Municipality* means a city, town or village that has entered into a cooperative agreement with Chippewa County to implement a Joint Storm Water Program for the Chippewa Falls Urban Area that meets the requirements of Wis. Admin. Code § NR 216.07 and the WDPES MS4 General Permit.

(37) *New Development* means development resulting from the conversion of previously undeveloped land or agricultural land uses.

(38) *NRCS MSE3* or *MSE4* distribution means a specific precipitation distribution developed by the United States Department of Agriculture, Natural Resources Conservation Service, using precipitation data from Atlas 14.

(39) *Off-Site* means located outside the property boundary described in the permit application.

(40) *On-Site* means located within the property boundary described in the permit application.

(41) *Ordinary High-Water Mark* has the meaning given in Wis. Admin. Code § NR 115.03(6).

(42) *Outfall* means the point at which stormwater is discharged to waters of the state or leaves one stormwater conveyance enters another stormwater conveyance.

(43) *Outstanding Resource Waters* means waters listed in Wis. Admin. Code § NR 102.10.

(44) *Performance Standard* means a narrative or measurable number specifying the minimum acceptable outcome for a facility or practice.

(45) *Percent Fines* means the percentage of a given sample of soil, which passes through a # 200 sieve.

(46) *Permit* means a written authorization made by the Administrator to the applicant to conduct land disturbing construction activity or to discharge post-construction runoff to waters of the state.

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(47) *Permit Fee* means a sum of money paid by the permit applicant for the purpose of recouping the expenses incurred by the office of the Administrator in administering this chapter.

(48) *Person* means an individual, owner, operator, corporation, partnership, sole proprietor, association, municipality, interstate agency, state agency or federal agency.

(49) *Pervious Surface* means an area that releases as runoff a small portion of the precipitation that falls on it. Lawns, gardens, parks, forests or other similar vegetated areas are examples of surfaces that typically are pervious.

(50) *Pollutant* has the meaning given in Wis. Stat. § 283.01(13).

(51) *Pollution* has the meaning given in Wis. Stat. § 281.01(10).

(52) *Post-Construction Site* means a construction site following the completion of land disturbing construction activity and final site stabilization.

(53) *Pre-Development Condition* means the extent and distribution of land cover types present before the initiation of land disturbing construction activity, assuming that all land uses prior to development activity are managed in an environmentally sound manner.

(54) *Premises* means any building, lot, parcel of land, or portion of land, whether improved or unimproved, including adjacent sidewalks and parking strips.

(55) *Preventive Action Limit* has the meaning given in Wis. Admin. Code § NR 140.05(17).

(56) *Protective Area* means an area of land that commences at the top of the channel of lakes, streams and rivers, or at the delineated boundary of wetlands, and that is the greatest of the following widths, as measured horizontally from the top of the channel or delineated wetland boundary to the closest impervious surface. However, “protective area” does not include any area of land adjacent to any stream enclosed within a pipe or culvert, such that runoff cannot enter the enclosure at this location.

(57) *Redevelopment* means areas where development is replacing older development.

(58) *Responsible Party* means any person holding fee title to the property or other person contracted or obligated by agreement to meet the performance standards of this chapter.

(59) *Runoff means* stormwater or precipitation, including rain, snow or ice melt or similar water that moves on the land surface via sheet or channelized flow.

(60) *Sediment* means settleable solid material that is transported by runoff, suspended within runoff or deposited by runoff away from its original location.

(61) *Separate Storm Sewer* means a conveyance or system of conveyances, including roads with drainage systems, streets, catch basins, curbs, gutters, ditches, constructed channels or storm drains, which meets all of the following criteria:

(a) Is designed or used for collecting water or conveying runoff.

(b) Is not part of a combined sewer system.

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(c) Is not part of a publicly owned wastewater treatment works that provides secondary or more stringent treatment.

(d) Discharges directly or indirectly to waters of the state.

(62) *Significant Closed Depression* means an area which collects, stores, and infiltrates runoff from snowmelt and other large stormwater events, and meets the following physical criteria: a) is observed to pond water beyond the period of drainage of other nearby runoff conveyances, and b) is either greater than 10,000 square feet in area or 10,000 cubic feet in volume, when ponded.

(63) *Silviculture Activity* means activities including tree nursery operations, tree harvesting operations, reforestation, tree thinning, prescribed burning, and pest and fire control. Clearing and grubbing of an area of a construction site is not a silviculture activity.

(64) *Site* means the entire area included in the legal description of the land on which the land disturbing construction activity is proposed in the permit application.

(65) *Storm Sewer* means a closed conduit for collecting and carrying stormwater.

(66) *Stormwater* means runoff from precipitation, including rain, snow, ice melt or similar water that moves on the land surface via sheet or channelized flow.

(67) *Stormwater Management Plan* means a comprehensive plan designed to reduce the discharge of pollutants from storm water, after the site has under gone final stabilization, and following completion of the construction activity.

(68) *Stormwater Management System Plan* means a comprehensive plan designed to reduce the discharge of runoff and pollutants from hydrologic units on a regional or municipal scale.

(69) *Stop Work Order* means an order issued by the Administrator which requires that all construction activity on the site be stopped.

(70) *Technical Standar*d means a document that specifies design, predicted performance and operation and maintenance specifications for a material, device or method.

(71) *Top of the Channel* means an edge, or point on the landscape, landward from the ordinary high- water mark of a surface water of the state, where the slope of the land begins to be less than 12% continually for at least 50 feet. If the slope of the land is 12% or less continually for the initial 50 feet, landward from the ordinary high-water mark, the top of the channel is the ordinary high- water mark.

(72) *Total maximum daily load* or *TMDL* means the amount of pollutants specified as a function of one or more water quality parameters, that can be discharged per day into a water quality limited segment and still ensure attainment of the applicable water quality standard.

(73) *TP-40* means Technical Paper No. 40, Rainfall Frequency Atlas of the United States, published in 1961.

(74) *TR-5*5 means the United States Department of Agriculture, Natural Resources Conservation Service (previously Soil Conservation Service), Urban Hydrology for Small Watersheds, Second Edition, Technical

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(75) *Transportation facility* means a highway, a railroad, a public mass transit facility, a public use airport, a public trial or any other public work for transportation purposes such as harbor improvements under Wis. Stat. § 85.095(a)(b). Transportation facility does not include building sites for the construction of public buildings and buildings that are places of employment that are regulated by the Department of Natural Resources pursuant to Wis. Stat. § 281.33.

(76) *Type II distribution* means a rainfall type curve as established in the "United States Department of Agriculture, Soil Conservation Service, Technical Paper 149, published in 1973".

(77) *Watercourse* means a natural or artificial channel through which water flows. These channels include: all blue and dashed blue lines on the USGS quadrangle maps, all drainage features shown on the soils maps in the NRCS Soil Survey of Chippewa County, all channels identified on the site, and new channels that are creates as part of a development. The term watercourse includes waters of the state as herein defined.

(78) *Waters of the State* means all lakes, bays, rivers, streams, springs, ponds, wells, impounding reservoirs, marshes, watercourses, drainage systems and other surface water or groundwater, natural or artificial, public or private, within the state or its jurisdiction.

Sec. 12-10. to 12-20. Reserved

ARTICLE II. ADMINISTRATION AND ENFORCEMENT

Sec. 12-21. Permits.

(a) *Permit Required*. No responsible party may undertake land disturbing construction activity that is subject to the provisions of this chapter without receiving a stormwater permit from the Administrator prior to commencing the proposed activity.

(b) *Permit Application and Fees*. Any responsible party desiring to undertake a land disturbing construction activity subject to the provisions of this chapter shall submit an application for a permit and stormwater management plan that meets the requirements of this chapter and shall pay an application fee. By submitting an application, the applicant authorizes the Administrator to enter the site to obtain information required for the review of the stormwater management plan.

(c) *Review and Approval of Permit Application*.

(1) The Administrator shall receive any permit application that is submitted with a stormwater management plan, and the required fee. In cases where only a permit for construction site erosion control is required, the Administrator is exclusively responsible for Plan Review, Plan Acceptance, and Permit Issuance.

(2) The Administrator ~~or~~ may request additional information from the applicant to clarify details of the application form, plans or maintenance agreement, or to seek conformity with the standards, specifications, and other requirements of this chapter. Requested additional information shall be provided to the Administrator within sixty (60) business days of the request. If the requested additional information is not provided within sixty (60) business days of the request, the stormwater permit shall be denied and the applicant shall be required to

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submit a new application and fee.

(3) Following receipt of a completed application form, fees, stormwater management plan, approved maintenance agreement recorded with the Chippewa County Register of Deeds, and financial guarantee, the Administrator may issue the stormwater permit. The Administrator shall have fourteen (14) business days from receipt of a completed application materials to approve or deny the permit. If the permit is denied, the Administrator shall detail in writing the reasons for denial.

(d) *Permit Requirements*. All permits shall require the responsible party to:

(1) Notify the Administrator within forty-eight (48) hours of commencing any land disturbing construction activity.

(2) Notify the Administrator of completion of any BMPs within ten (10) business days after their installation.

(3) Obtain permission in writing from the Administrator prior to any modification of the stormwater plan. The Administrator may require that the proposed modifications be submitted to it for approval prior to incorporation into the stormwater management plan and execution by the responsible party.

(4) Install all BMPs as identified in the approved erosion and sediment control plan.

(5) Maintain all road drainage systems, stormwater drainage systems, BMPs and other facilities identified in the erosion and sediment control plan.

(6) Repair any siltation or erosion damage to adjoining surfaces and drainage ways resulting from land disturbing construction activities and document repairs in a site erosion control log.

(7) Inspect all BMPs within twenty-four (24) hours after each rain of 0.5 inches or more which results in runoff during active construction periods, and at least once each week, make needed repairs and document the findings of the inspections in a site erosion control log with the date of inspection, the name of the person conducting the inspection, and a description of the present phase of the construction at the site.

(8) Allow the Administrator to enter the site for the purpose of inspecting compliance with the stormwater plan or for performing any work necessary to bring the site into compliance with the stormwater plan. Keep a copy of the construction plans at the construction site.

(9) Comply with all applicable federal, state, and local laws and regulations.

(10) Install all structural and non-structural stormwater management practices in accordance with the approved stormwater management plan and the issued permit.

(11) Pass a final inspection of completed stormwater management practices by the Administrator. The Administrator shall notify the responsible party in writing of any changes required in such practices to bring them into compliance with the conditions of the issued permit and this chapter.

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(12) Submit as-built plans to the Administrator within ninety (90) days following installation of the structural and non-structural stormwater management practices. Practice installations shall be certified by a registered Professional Engineer as meeting the requirements of the approved plans and requirements of this chapter. As-built plans shall provide adequate detail necessary to show compliance with the approved stormwater management plan and requirements of this chapter. As-built plans shall include: final surveyed elevations of the structural and non-structural stormwater management practices, conveyance, buildings, and site topography.

(13) Maintain all stormwater management practices in accordance with the stormwater management plan until the practices either become the responsibility of a municipality, or are transferred to subsequent private owners as specified in the approved, recorded maintenance agreement.

(14) Authorize Chippewa County to perform any work or operations necessary to bring stormwater management practices into conformance with the approved stormwater management plan, and consents to a special assessment or charge against the property as authorized under Wis. Stat. Ch. 66 or to charging such costs against the financial guarantee posted under section 12-72.

(15) If directed by the Administrator, repair at the responsible party's own expense all damage to adjoining municipal facilities and drainage ways caused by runoff, where such damage is caused by activities that are not in compliance with the approved stormwater management plan.

(16) Where site development or redevelopment involves changes in direction, an increase in peak rate and/or total volume of runoff from a site, the Administrator may require the responsible party to make appropriate legal arrangements with affected property owners concerning the prevention of endangerment to property or public safety.

(17) The responsible party is subject to the enforcement actions and penalties detailed in section 12-23, if the responsible party fails to comply with the terms of the issued permit.

(e) *Additional Permit Requirements*. When deemed necessary by the Administrator, permits issued under this section may include additional permit requirements to assure compliance with the standards in Articles II, III, IV and V of this chapter.

(f) *Permit Duration*. Permits issued under this section shall be valid from the date of issuance for a period of one hundred eighty (180) calendar days, or the duration of the building permit or other construction authorizations, whichever is longer. The Administrator may extend the period one or more times for up to an additional one hundred eighty (180) calendar days. The Administrator may require additional BMPs as a condition of any extension to assure compliance with the requirements of this chapter.

Sec. 12-22. Fee Schedule.

Applications for review and permits issued under this chapter shall be accompanied by a fee, which is adopted by County Board resolution. A copy of the current fee schedule shall be kept on file in the office of the Administrator.

Sec. 12-23. Enforcement.

(a) Any land disturbing construction activity or post-construction runoff initiated after the effective date of this chapter by any person subject to the provisions of this chapter shall be deemed a violation unless conducted in accordance with the requirements of this chapter.

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(b) The Administrator shall notify the responsible party of any non-compliant land disturbing construction activity or post-construction runoff. The notice shall describe the nature of the violation, remedial action(s) required to be taken, a schedule for remedial action, and additional enforcement action which may be taken.

(c) Upon receipt of written notification from the Administrator under sub. (b), the responsible party shall correct work that does not comply with the stormwater management plan or other provisions of the issued permit. The responsible party shall make corrections as necessary to meet the specifications and schedule set forth by the Administrator in the notice.

(d) If the violations to a permit issued pursuant to this chapter are likely to result in damage to properties, public facilities, or waters of the state, the Administrator may enter the land and take emergency actions necessary to prevent such damage. The costs incurred by the Administrator plus interest and legal costs shall be billed to the responsible party.

(e) The Administrator may revoke a permit issued under this chapter for non-compliance with the provisions of this chapter.

(f) Any permit revocation, stop work order, or cease and desist order shall remain in effect unless retracted by the Administrator or by determination of a court of competent jurisdiction.

(g) The Administrator may refer any violation of the provisions of this chapter, or of a stop work order or cease and desist order issued pursuant to this chapter, to the Corporation Counsel for the commencement of further legal proceedings in any court of competent jurisdiction.

(h) Any person found to be in violation of the provisions of this chapter shall be subject to a forfeiture of not less than $1,000 nor more than $5,000 dollars per offense, together with the costs of prosecution. Each calendar day that the violation exists shall constitute a separate offense.

(i) Compliance with the provisions of this chapter may also be enforced by injunction in any court of competent jurisdiction pursuant to Wis. Stat. §59.69(11). It shall not be necessary to prosecute for forfeiture or a cease-and-desist order before resorting to injunction proceedings.

(j) In the event the Administrator determines that the holder of a permit issued pursuant to this chapter has failed to follow practices set forth in the erosion and sediment control plan or stormwater management plan, or has failed to comply with schedules set forth in the erosion and sediment control plan or the stormwater management plan, the Administrator may enter upon the land and perform the work or other operations necessary to bring the condition of said lands into conformance with requirements of the approved plan. The Administrator shall keep a detailed accounting of the costs and expenses of performing this work. These costs and expenses shall be deducted from any posted financial guarantee. Where such a guarantee has not been established, or where such a guarantee is insufficient to cover these costs, the costs and expenses shall be entered on the tax roll, pursuant to subchapter VII of chapter 66, Wis. Stats. as a special charge against the property and collected with any other taxes levied thereon for the year in which the work is completed.

Sec. 12-24. Special Inspection Warrants.

If the responsible party or property owner denies access to any part of the premises on which it is believed there may be a violation of this chapter; or on which there is a need to inspect and/or sample as part of a routine inspection and sampling program designed to verify compliance with this chapter or any order issued

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hereunder; or to protect the overall public health, safety, and welfare of the community, the Administrator may seek issuance of a special inspection warrant whereby the Administrator may enter the premises pursuant to the provisions of Wis. Stat. §§ 66.0119(1), (2), and (3).

Sec. 12-25. Stop Work Orders.

(a) The Administrator may post a stop work order if any of the following occurs:

(1) Any land disturbing construction activity regulated under this chapter is being undertaken without a permit.

(2) The erosion and sediment control plan or the post construction stormwater plan is not being implemented in good faith.

(3) The conditions of the permit are not being met.

(b) After posting a stop-work order under sub. (a), the Administrator may issue a notice of intent to the responsible party of its intent to perform work necessary to comply with this chapter. The Administrator may go on the land and commence the work after issuing the notice of intent. The costs of the work performed under this subsection shall be billed to the responsible party or property owner. The Administrator shall keep a detailed accounting of the costs and expenses of performing this work. These costs and expenses shall be deducted from any posted financial guarantee. Where such a guarantee has not been established, or where such a guarantee is insufficient to cover these costs, the costs and expenses shall be entered on the tax roll, pursuant to subchapter VII of chapter 66, Wis. Stats. as a special charge against the property and collected with any other taxes levied thereon for the year in which the work is completed.

Sec. 12-26. Board of Adjustment.

(a) *Powers and Duties*. The powers and duties of the Chippewa County Board of Adjustment are identified in Wis. Stat. § 59.694(7) and in the applicable rules and by-laws as adopted by the County Board. The Board of Adjustment shall have the following general powers:

(1) *Administrative Appeals*. To hear and decide appeals where it is alleged that there is error in any order, decision or determination made by Chippewa County in administering this chapter.

(2) *Variances*. Upon appeal, to authorize variances from the provisions of this chapter which are not contrary to the public interest and where owing to special conditions a literal enforcement of the provisions of the chapter will result in unnecessary hardship; and

(b) *Who May Appeal*. Appeals to the Board of Adjustment may be taken by any aggrieved person or by any office, department, board, or bureau of Chippewa County affected by any decision of the Administrator.

Sec. 12-27. to 12-30. Reserved

ARTICLE III. GENERAL DESIGN AND STORMWATER PLAN REQUIREMENTS.

Sec. 12-31. Design Standards and Criteria.

Use of the following design standards and criteria shall be acceptable for purposes of compliance with this chapter:

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(a) The design standards identified, developed or disseminated by the Wisconsin Department of Natural Resources under subchapter V of chapter NR 151, Wis. Admin. Code; and

(b) Other applicable design criteria, standards and specifications not identified or listed in this chapter may be used provided that the methods have been approved in advance by the Administrator based on a finding that the alternative standards meet the technical intent of the standards in the applicable sections of this chapter.

(c) *Additional Requirements*. The Administrator may establish construction site erosion control or post construction stormwater management requirements that are more stringent than those set forth in this chapter if the Administrator determines that an added level of protection is needed.

(d) Where average annual rainfall data is used to meet requirements of this chapter, the data of record shall be Minneapolis, 1959 (March 13-November 4); as maintained by the United States Geological Survey (USGS) determined in accordance with Wis. Admin. Code § NR 151.12 (1)(b).

Sec. 12-32. General Stormwater Plan Requirements.

(a) All site investigations, plans, designs, computations, and construction plans shall be certified by a registered Professional Engineer licensed in the state of Wisconsin.

(b) Plan narratives shall include, at a minimum, the following items:

(1) The name(s) and address(es) of the landowner and/or developer of the site, and of any consulting firm retained by the applicant, together with the name of the applicant's principal contact at such firm and the Professional Engineer for practice design and certification.

(2) A proper legal description of the property proposed to be developed and property address if available.

(3) Description of the site and the nature of the construction activity.

(4) Estimates of the total area of the site and the total area of the site that is expected to be disturbed by construction activities.

(5) Existing data describing the surface soil as well as subsoils, including predominant soil types and hydrologic soil groups.

(6) Depth to water table, as indicated by Natural Resources Conservation Service soil information where available, or Chippewa County regional water table maps.

(7) Name of the immediate named receiving water from the United States Geological Service 7.5-minute series topographic maps.

(8) Quantity and cost estimates for the construction and installation of each erosion control, sediment control, and stormwater management practice.

(c) Construction Plans shall include:

(1) Existing and proposed site conditions, including the following: topographic contours, vegetative cover, impervious surfaces (including all buildings, structures, and pavement, approximate slopes anticipated after major grading activities), and delineation of areas which will be

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vegetated following construction.

(2) Natural and engineered drainage system network including enough of the contiguous properties to show runoff patterns onto, through and from the site and network flow path and direction for all stormwater conveyance sections.

(3) Lakes, streams, wetlands, channels, ditches, other watercourses, floodplains, flood fringes and floodways on and immediately adjacent to the site shall be shown.

(4) Location of wells and wellhead protection areas covering the construction site and delineated pursuant to Wis. Admin. Code § NR 811.16.

(5) Boundaries of the construction site.

(6) Areas of land and soil disturbance.

(7) Areal extent of wetland acreage on the site and locations where stormwater is discharged to a surface water or wetland.

(8) Locations of all surface waters and wetlands within one mile of the construction site.

(d) Construction Quality Assurance Plan shall include:

(1) Contact information of the landowner and/or developer of the site, principal contact of any consulting firm retained by the applicant, and principal contact of the general contractor in charge of the site.

(2) A sequence of construction of the development site, including stripping and clearing, rough grading, construction of utilities, infrastructure, and buildings, and final grading and landscaping. Sequencing shall identify the expected date on which clearing will begin, the estimated duration of exposure of cleared areas, areas of clearing, installation of temporary erosion and sediment control measures, and establishment of permanent vegetation. The application shall also include start and end dates for construction.

(3) Verification of proper installation including inspection and certification for critical practices and items.

(4) Repair procedures in the case of erosion, onsite and offsite sediment deposition, and failure of practices during construction.

(5) Preparation and installation of appropriate practices on the site should it be inactive through months outside the growing season.

(6) Other information requested in writing by the Administrator to determine compliance with the provisions of this chapter.

(e) *Plan Amendments*. The applicant shall amend the erosion and sediment control plan if any of the following occur:

(1) There is a change in design, construction, operation or maintenance at the site which has the reasonable potential for the discharge of pollutants to waters of the state and which has not

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otherwise been addressed in the erosion and sediment control plan.

(2) The actions required by the erosion and sediment control plan fail to reduce the impacts of pollutants carried by construction site runoff.

(3) The Administrator notifies the applicant of changes needed in the erosion and sediment control plan.

Sec. 12-33. to 12-40. Reserved

ARTICLE IV. CONSTRUCTION SITE EROSION CONTROL.

Sec. 12-41. Design Standards and Criteria.

In addition to the design requirements found in Article III of this chapter, the following design requirements must be met.

(a) All BMPs for construction site erosion control required by this chapter shall meet the design criteria, standards and specifications listed in Article III of this chapter and the following references:

(1) Applicable design criteria, standards and specifications identified on the WI DNR Construction Site Erosion & Sediment Control Standards page of the WI DNR web site, as updated from time to time.

(2) Other design guidance and technical standards identified or developed by the Wisconsin Department of Natural Resources under subchapter V of Wis. Admin. Code Chapter NR 151.

(3) Soil loss prediction tools such as the Revised Universal Soil Loss Equation 2 (RUSLE2) that estimate the sediment load leaving the construction site under varying land and management conditions.

(b) *Erosion and Other Pollutant Control Standards*. All construction sites shall meet the following performance standards:

(1) The site shall not discharge more than five (5) tons per acre per year of sediment carried in runoff from initial grading to final stabilization; or

(2) The site shall be protected at the time of site disturbance using the prescriptive BMPs established in the current edition of the Channel Erosion Control Matrix and Slope Erosion Control Matrix of the Wisconsin DOT Erosion Control Product Acceptability Lists (PAL).

Sec. 12-42. Mandatory Site Prevention, Protection, Erosion Control, and Sediment Control Practices.

(a) The following site prevention and protection measures are required at all sites:

(1) Existing vegetation shall be maintained, especially adjacent to surface waters, to the greatest extent possible.

(2) Soil compaction shall be minimized

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(3) Topsoil shall be preserved.

(4) Land disturbing construction activity on slopes of 20% or more shall be minimized.

(5) Development of spill prevention and response procedures.

(b) Erosion and sediment control practices are required at all sites to prevent or reduce all of the following:

(1) The deposition of soil from being tracked onto streets by vehicles.

(2) The discharge of sediment from disturbed areas into on−site stormwater inlets.

(3) The discharge of sediment from disturbed areas into adjacent waters of the state.

(4) The discharge of sediment from drainage ways that flow off the site.

(5) The discharge of sediment by dewatering activities.

(6) The discharge of sediment eroding from soil stockpiles existing for more than 7 days.

(7) The discharge of sediment from erosive flows at outlets and in downstream channels.

(8) The transport by runoff into waters of the state of chemicals, cement, and other building compounds and materials on the construction site during the construction period. However, projects that require the placement of these materials in waters of the state, such as constructing bridge footings or BMP installations, are not prohibited by this subdivision.

(9) The transport by runoff into waters of the state of untreated wash water from vehicle and wheel washing.

(10) The BMPs used to comply with this section shall be located in a manner to ensure that runoff is treated prior entering waters of the state.

Sec. 12-43. Use of Stormwater Facilities for Erosion and Sediment Control.

Regional post-construction stormwater treatment facilities are appropriate for, and may be used for, control of post-construction stormwater and pollutants. Regional post-construction stormwater treatment facilities shall not be used for control of construction site sediment.

Sec. 12-44. Specifications.

(a) The erosion and sediment control plan shall address pollution caused by soil erosion and sedimentation during construction and up to final stabilization of the site and include a description of appropriate controls and measures that will be performed at the site to prevent pollutants from reaching waters of the state. The plan shall clearly describe the appropriate control measures for each major activity and the timing during the construction process for the measures that will be implemented. The erosion and sediment control plan shall include all of the items listed in Article III of this chapter and, at a minimum, the following items:

(1) Narrative:

a. Estimates, including calculations, if any, of the runoff coefficient of the site before and

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after construction activities are completed.

b. Calculations to show the expected percent reduction in the average annual sediment load carried in runoff as compared to no sediment or erosion controls. Alternatively, computations or other verification that erosion control BMPs comply with Channel Erosion Control Matrix and Slope Erosion Control Matrix of the Wisconsin DOT Erosion Control Product Acceptability Lists (PAL), per Standards section.

c. Description of interim and permanent stabilization practices, including a practice implementation schedule. Site plans shall ensure that existing vegetation is preserved where attainable and that disturbed portions of the site are stabilized.

d. Description of structural practices to divert flow away from exposed soils, store flows or otherwise limit runoff and the discharge of pollutants from the site. Unless otherwise specifically approved in writing by the Administrator, structural measures shall be installed on upland soils.

e. Management of overland flow at all sites, unless otherwise controlled by outfall controls.

f. Trapping of sediment in channelized flow.

g. Staging construction to limit bare areas subject to erosion.

h. Protection of downslope drainage inlets where they occur.

i. Minimization of tracking.

j. Cleanup of off-site sediment deposits.

k. Proper disposal of building and waste materials.

l. Stabilization of drainage ways.

m. Control of soil erosion from dirt stockpiles.

n. Installation of permanent stabilization practices as soon as possible after final grading.

o. Minimization of dust to the maximum extent practicable.

(2) Site Maps:

a. Location of major structural and non-structural controls identified in the erosion and sediment control plan.

b. Location of areas where stabilization practices will be employed.

(3) Construction Plans:

a. Details of the interim and permanent stabilization practices.

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b. Locations and details of the structural practices to divert flow away from exposed soils, store flows or otherwise limit runoff and the discharge of pollutants from the site. Unless otherwise specifically approved in writing by the Administrator, structural measures shall be installed on upland soils.

c. Details of erosion and sediment control practices, including but not limited to: tracking, management of overland flow, protection of downslope drainage, soil erosion from stockpiles, and stabilization of drainage ways.

d. Construction notes shall be included to address: staging construction to limit bare areas subject to erosion, cleanup of off-site sediment deposits, proper disposal of building and waste materials, installation of permanent stabilization practices as soon as possible after final grading, and minimization of dust to the maximum extent practicable.

(b) The erosion and sediment control plan shall include and identify velocity dissipation devices, which shall be placed at discharge locations and along the length of any outfall channel, as necessary, to provide a non- erosive flow from the structure to a water course so that the natural physical and biological characteristics and functions are maintained and protected. For permanent outlet features, rock lining is the preferred option.

(c) *Statement*. For each construction site subject to this chapter, an erosion and sediment control plan statement shall be prepared. The statement shall briefly describe the site and include a site map. Further, the erosion and sediment control plan shall identify the best management practices that will be used to meet the requirements of this chapter, and include the site development schedule.

Sec. 12-45 to 12-50 Reserved

ARTICLE V. POST CONSTRUCTION STORMWATER MANAGEMENT.

Sec. 12-51. Post Construction Stormwater Management Design Standards and Criteria.

The following standards and criteria shall be used to meet the water quality, peak flow discharge, and infiltration requirements under this chapter. If the design cannot achieve the applicable requirements, the storm water management plan shall include a written and site−specific explanation of why that requirement will not be attained and shall be reduced to the maximum extent practicable.

(a) *Alternate Requirements*. The Administrator may prescribe alternative submittal requirements for applicants seeking an exemption to on-site stormwater management standards.

(b) Natural topography and land cover features such as natural swales, natural depressions, native soil infiltrating capacity, and natural groundwater recharge areas shall be preserved and used, to the extent possible, to meet the requirements of Article IV.

(c) Emergency overland flow for all stormwater facilities shall be provided to prevent exceeding the safe capacity of downstream drainage facilities and prevent endangerment of downstream property or public safety.

(d) The post-construction stormwater BMPs that are required under this chapter shall be installed before the construction site has undergone final stabilization.

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Sec. 12-52. Total Suspended Solids.

(a) **Requirement**. BMPs shall be designed, installed and maintained to control total suspended solids carried in runoff from the post−construction site. BMPs shall be designed in accordance with Table 1., or to the maximum extent practicable as defined in Sec. 12-09(36) and provided in sub. (c). The design shall be based on an average annual rainfall, as compared to no runoff management controls.

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Table 1. TSS Reduction Standards

Development Type	TSS Reduction
New Development	80 percent
In-fill Development	80 percent
Redevelopment	40 percent of load from parking areas and roads

(b) *Redevelopment*. Except as provided in Wis. Admin. Code § NR 151.121 (5), the redevelopment total suspended solids reduction standard of Table 1., applies to redevelopment.

(c) *Maximum Extent Practicable*. If the design cannot meet a total suspended solids reduction performance standard of sub. (1), Table 1., the storm water management plan shall include a written, site−specific explanation of why the total suspended solids reduction performance standard cannot be met and why the total suspended solids load will be reduced only to the maximum extent practicable. The Administrator may not require any person to exceed the applicable total suspended solids reduction performance standard to meet the requirements of maximum extent practicable.

Note: Pollutant loading models such as DETPOND, SLAMM, P8, or equivalent methodology may be used to evaluate the efficiency of the design in reducing total suspended solids. Information on how to access these models is available from the Wisconsin Department of Natural Resources storm water management program at dnr.wi.gov. Use the most recent version of the model and the rainfall files and other parameter files identified for Wisconsin users unless directed otherwise by the regulatory authority.

(d) *Off-Site Drainage*. When designing BMPs, runoff draining to the BMP from off−site shall be taken into account in determining the treatment efficiency of the practice. Any impact on the efficiency shall be compensated for by increasing the size of the BMP accordingly.

Sec. 12-53. Peak Runoff Discharge.

(a) BMPs shall be designed to maintain or reduce post-development peak runoff discharge rates to pre-development peak runoff discharge rates for the 1-year, 2-year, 10-year, 25- year, and 100- year recurrence interval, 24-hour duration design storms.

(b) The runoff curve numbers in Table 2 shall be used to represent pre−development conditions. Pre-development conditions shall assume “good hydrologic conditions” as defined in Wis. Admin. Code § NR 151.12(5)(b) for appropriate land covers as identified in TR-55 or an equivalent methodology.

Table 2. Maximum Pre-Development Runoff Curve Numbers

Land Use, Cover Type	Hydrologic Soil Group			
	A	B	C	D
Woodland	30	55	70	77
Grassland, Meadow, Open Space, Pasture	39	61	71	78
Cropland	55	69	78	83

Note: Use of composite CNs for peak flow calculations (i.e. 1-yr/24-hr rainfall events) is acceptable for pervious surfaces and disconnected impervious surfaces. Combining directly connected impervious

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surfaces with pervious surfaces may result in underestimation of peak flows, particularly during the 1- and 2-year rainfall events. On sites with storm sewers or directly connected imperviousness, the designer should either evaluate the connected impervious areas separately from the pervious areas or provide documentation that the runoff from the connected impervious area does not control the peak flows during the 1- and 2-year rainfall events. HydroCad is a model that is commonly used for calculating peak flows. Hydrocad v 7.1 and earlier versions, calculate a single composite curve number for each subcatchment. Starting with HydroCad v 8.0, the model allows the option of calculating runoff from pervious and impervious areas separately within a subcatchment but it still averages CNs for pervious areas in a subcatchment. HydroCad v 10.0 allows the option of calculating flow independently from each area with a different CN (without averaging CNs) and then combines the flows to produce the total runoff. Access these options in the HydroCAD 'Advanced' tab of the 'Setting/Calculation' screen.

(c) Post-development runoff curve numbers shall be from TR-55 or equivalent methodologies.

(d) The provisions of this section do not apply to any of the following:

(1) The redevelopment of an existing site with no increase in impervious surface.

(2) An in-fill development area less than 5 acres.

(3) A post-construction site from which there is a direct discharge into a lake of over 5,000 acres in size or a stream or river segment with a contributing drainage basin area of more than 500 square miles. For purposes of this chapter these waters are specifically described and identified on maps and data maintained by the Administrator. See Appendix 1.

Sec. 12-54. Infiltration.

(a) BMPs shall be designed, installed, and maintained to infiltrate runoff in accordance with Table 3.

Table 3. Infiltration Standards

Type of Development	**Description of Development**	**Infiltration Requirements** (Pre-development infiltration volume, based on an average) annual rainfall)	**Limits** (Max. % of post-construction site required for infiltration)
Low Imperviousness	Less than 40% connected imperviousness, such as parks, cemeteries, and low-density residential development	At least 90%	No more than 1%
Moderate Imperviousness	40% to 80% connected imperviousness, such as medium and high density residential, multi−family development, industrial and institutional development, and office parks	At least 75%	No more than 2%
High Imperviousness	More than 80 % connected imperviousness, such as commercial strip malls, shopping centers, and commercial downtowns	At least 60%	No more than 2%

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(b) *Pre-Development*. Pre−development condition shall be as specified in Table 2. Note: A model that calculates runoff volume, such as SLAMM, P8, or an equivalent methodology may be used. Infiltration computations for infiltration BMPs may use Recarga or an equivalent methodology.

(c) *Groundwater Protection*.

(1) Infiltration systems designed in accordance with this section shall, to the extent technically and economically feasible, minimize the level of pollutants infiltrating to groundwater and shall maintain compliance with the preventive action limit at a point of standards application in accordance with Wis. Admin. Code Chapter NR 140. However, if site specific information indicates that compliance with a preventive action limit is not achievable, the infiltration BMP may not be installed or shall be modified to prevent infiltration to the maximum extent practicable.

(2) Notwithstanding sub. (c)(1) above, the discharge from BMPs shall remain below the enforcement standard at the point of standards application.

(d) *Pre-treatment*. Before infiltrating runoff, pretreatment shall be required for parking lot runoff and for runoff from new road construction in commercial, industrial, and institutional areas that will enter an infiltration system. The pretreatment shall be designed to protect the infiltration system from clogging prior to scheduled maintenance and to protect groundwater quality in accordance with sub. (c). Pretreatment options include, but are not limited to, oil and grease separation, sedimentation, biofiltration, filtration, swales, or filter strips.

(e) *Prohibited Areas*. Runoff from the following source areas shall not be infiltrated and will not qualify as contributing to meeting the requirements of this section unless demonstrated to meet the conditions of sub. (c):

(1) Areas associated with a tier 1 industrial facility identified in Wis. Admin. Code § NR 216.21(2)(a), including storage, loading, and parking facilities. Rooftops may be infiltrated.

(2) Open storage and loading areas of a tier 2 industrial facility identified in Wis. Admin. Code § NR 216.21(2)(b).

Note 1: Runoff from the employee and guest parking and rooftop areas of a tier 2 facility may be infiltrated, but runoff from the employee and guest parking area may require pretreatment.

Note 2: Rooftops of fueling and vehicle maintenance areas may be infiltrated with the concurrence of the Administrator.

Sec. 12-55. Restrictions on the Location of Infiltration Practices.

(a) Prohibitions. Infiltration practices may not be located in the following areas:

(1) Areas within 1,000 feet up gradient or within 100 feet down gradient of direct conduits to groundwater. These include wells, sinkholes, springs, seeps, swallets, fractured bedrock at the surface, mine shafts, nonmetallic mines, tile inlets discharging to groundwater, quarries, or depressional groundwater recharge areas over shallow fractured bedrock.

(2) Areas within 400 feet of a community water system well as specified in Wis. Admin. Code § NR 811.16(4) or within the separation distances listed in Wis. Admin. Code § NR 812.08 for any

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private well or non−community well for runoff infiltrated from commercial, including multi−family residential, industrial, and institutional land uses or regional devices for one− and two−family residential development.

(3) Areas where contaminants of concern, as defined in Wis. Admin. Code § NR 720.03(2), are present in the soil through which infiltration will occur.

(b) *Separation from groundwater and bedrock*. Infiltration practices shall be located so that the characteristics of the soil and the separation distance between the bottom of the infiltration system and the elevation of seasonal high groundwater or the top of bedrock are in accordance with Table 4.

Table 4. Separation Distances and Soil Characteristics

Source Area	Separation Distance	Soil Characteristics
Industrial, Commercial, Institutional Parking Lots and Roads	5 feet or more	Filtering Layer
Residential Arterial Roads	5 feet or more	Filtering Layer
Roofs Draining to Subsurface Infiltration Practices	1 foot or more	Native or Engineered Soil with Particles Finer than Coarse Sand
Roofs Draining to Surface Infiltration Practices	Not Applicable	
All Other Impervious Source Areas	3 feet or more	Filtering Layer

Note: Notwithstanding the separation distances identified in Table 4 under sub. (b), applicable requirements for injection wells classified under Wis. Admin. Code Ch. NR 815 shall be followed.

(c) *Infiltration Rate Exemptions*. Practices located in the following areas are required to meet the infiltration requirements to the maximum extent practicable:

(1) Where the infiltration rate of the soil measured at the proposed bottom of the infiltration system is less than 0.6 inches per hour using a scientifically credible field test method.

(2) Where the least permeable soil horizon to 5 feet below the proposed bottom of the infiltration system using the U.S. Department of Agriculture method of soils analysis is one of the following: sandy clay loam, clay loam, silty clay loam, sandy clay, silty clay, or clay.

(d) *Alternate Use*. Where alternate uses of runoff are employed, such as for toilet flushing, laundry or irrigation or storage on green roofs where an equivalent portion of the runoff is captured permanently by rooftop vegetation, such alternate use shall be given equal credit toward the infiltration volume required by this section.

Sec. 12-56. Closed Depressions.

Areas identified as Significant Closed Depressions shall be protected from development to retain existing stormwater attenuation capacity. When disturbance within a Significant Closed Depression is proposed, mitigation hydrology to retain storage capacity and infiltration of the depression shall be required. To achieve mitigation, all of the following items are required:

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(a) Disturbance to the Significant Closed Depression is to be avoided and minimized to the greatest extent possible,

(b) Equivalent replacement runoff storage and groundwater infiltration capability is to be developed,

(c) Replacement storage and infiltration is to be provided physically as close as practicable to the impacted recharge area and in the watershed of the same receiving water,

(d) Replacement storage and infiltration capability is to be developed prior to the disturbance,

(e) Design of the replacement storage and infiltration features shall be developed by a registered Professional Engineer,

(f) Proposals are subject to soil limitations in Sec. 12-55(b).

Sec. 12-57. Protective Areas.

(a) Table 5 provides a list of protective areas and protective distances for each type of protective area.

Table 5: Protective Areas

	Protective Area	Protective Distance
1.	Outstanding resource waters and exceptional resource waters	75 feet
2.	Perennial and intermittent streams identified on a United States geological survey 7.5-minute series topographic map, or a county soil survey map, whichever is more current.	50 feet
3.	Lakes	50 feet
4.	Wetlands that are not Highly Susceptible Wetlands (item 5.) or Less Susceptible Wetlands (item 6.)	50 feet
5.	Highly susceptible wetlands. Highly susceptible wetlands include the following types: fens, sedge meadows, bogs, low prairies, conifer swamps, lowland hardwood swamps, and ephemeral ponds	75 feet
6.	Less susceptible wetlands. Less susceptible wetlands include degraded wetlands dominated by invasive species such as reed canary grass; cultivated hydric soils; and any gravel pits, or dredged material or fill material disposal sites that take on the attributes of a wetland.	10 % of the average wetland width, but no less than 10 feet nor more than 30 feet.
7.	Concentrated flow channels with drainage areas greater than 130 acres.	10 feet

Note 1: For items 4, 5, and 6, above, determinations of the extent of the protective area adjacent to wetlands shall be made on the basis of the sensitivity and runoff susceptibility of the wetland in accordance with the standards and criteria in Wis. Admin. Code § NR 103.03.

Note 2: Wetland boundary delineation shall be made in accordance with Wis. Admin. Code § NR 103.08(1m). This paragraph does not apply to wetlands that have been completely filled in compliance with all applicable state and federal regulations. The protective area for wetlands that have been partially filled in compliance with all applicable state and federal regulations shall be measured from the wetland boundary delineation after fill has been placed. Where there is a legally authorized wetland fill, the protective area standard need not be met in that location.

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Note 3: Where rivers, streams, lakes, and wetlands are contiguous, the greatest protective distance in Table 5 under this section shall apply.

(b) For development within or adjacent a protective area, the following requirements shall be met:

(1) Impervious surfaces shall be kept out of the protective area to the maximum extent practicable. If there is no practical alternative to locating an impervious surface in the protective area, the stormwater management plan shall contain a written, site-specific explanation.

(2) Where land disturbing construction activity occurs within a protective area, and where no impervious surface is present, adequate sod or self-sustaining vegetative cover of 70% or greater shall be established and maintained. The adequate sod or self- sustaining vegetative cover shall be sufficient to provide for bank stability, maintenance of fish habitat and filtering of pollutants from upslope overland flow areas under sheet flow conditions. Non-vegetative materials, such as rock riprap, may be employed on the bank as necessary to prevent erosion, such as on steep slopes or where high velocity flows occur.

Note: It is recommended that seeding of non-invasive vegetative cover be used in protective areas. Vegetation that is flood and drought tolerant and can provide long-term bank stability because of an extensive root system is preferable.

(3) BMPs such as filter strips, swales, or wet detention basins that are designed to control pollutants from non-point sources may be located in the protective area.

Note: Compliance with chapter 30, Wis. Stats. and Wis. Admin. Code Chapters NR 103, 115, 116 and 117 may additionally be required in the protective area.

(c) *Exemptions*. The requirements under this section do not apply to:

(1) Except as provided under Wis. Admin. Code § NR 151.121(5), redevelopment post-construction sites.

(2) In-fill development areas less than 5 acres in size.

(3) Structures that cross or access surface waters such as boat landings, bridges and culverts.

(4) Structures constructed in accordance with Wis. Stat. § 59.692(1v).

(5) Areas of post–construction sites from which runoff does not enter the surface water, including wetlands, without first being treated by a BMP to meet the post- construction requirements for total suspended solids and for peak runoff discharge, except to the extent that vegetative groundcover is necessary to maintain bank stability.

Sec. 12-58. Swale Treatment for Transportation Facilities.

(a) *Applicability*. Except as provided in sub. (b) below, transportation facilities that use swales for runoff conveyance and pollutant removal meet all of the requirements of this section, if the swales are designed to the maximum extent practicable to do all of the following:

(1) Be vegetated. However, where appropriate, non-vegetative measures may be employed to prevent erosion or provide for runoff treatment, such as rock riprap stabilization or check dams.

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Note: It is preferred that tall and dense vegetation be maintained within the swale due to its greater effectiveness at enhancing pollutant removal from runoff.

(2) Swales shall comply with Wisconsin DNR technical standard 1005, "Vegetated Infiltration Swale", dated May, 2007, except as otherwise authorized in writing by the Administrator.

(b) *Exemptions*. The Administrator may, consistent with water quality standards, require additional provisions of article V of this chapter be met on a transportation facility with an average daily travel of vehicles greater than 2,500, where the area generating the runoff is a non- commercial site, and where the initial surface water of the state that the runoff directly enters is any of the following:

(1) An outstanding resource water.

(2) An exceptional resource water.

(3) Waters listed in section 303(d) of the Federal Clean Water Act that are identified as impaired in whole or in part, due to nonpoint source impacts.

(4) Waters where targeted performance standards are developed under Wis. Admin. Code § NR 151.004 to meet water quality standards.

Sec. 12-59. Regional Treatment.

(a) To comply with the post-construction stormwater management standards of this chapter, BMPs may be located on−site or off−site as part of a regional stormwater device, practice or system.

(b) The Administrator may approve off-site post-construction stormwater management measures, provided that all of the following conditions are met:

(1) The Administrator determines that the post-construction runoff is covered by a stormwater management system plan that is approved by the Administrator and that plan contains management requirements consistent with the purpose and intent of this chapter.

(2) The off-site facility meets all of the following conditions:

a. The off-site facility is in place.

b. The off-site facility is designed and adequately sized to provide a level of stormwater control equal to or greater than that which would be afforded by on-site practices meeting the performance standards of this chapter.

c. The off-site facility has a legally obligated entity responsible for its long-term operation and maintenance.

Sec. 12-60. Fueling and Vehicle Maintenance Areas.

Fueling and vehicle maintenance areas shall have BMPs designed, installed and maintained to reduce petroleum within runoff, such that, to the maximum extent practicable, the runoff that enters waters of the state contains no visible petroleum sheen.

Note: A combination of the following BMPs may be used: oil and grease separators, canopies, petroleum spill cleanup materials, or any other structural or non-structural method of preventing or treating petroleum in runoff.

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Sec. 12-61. Post-Construction Stormwater Management Specifications.

The stormwater management plan shall include all of the items listed in Article III. of this chapter for both pre-construction and post-construction site conditions and, at a minimum, the following items:

(a) Narrative:

(1) Hydrology and pollutant loading computations, as needed, to show compliance with performance standards. All major assumptions used in developing input parameters shall be clearly stated. The computations shall be made for each discharge point in the development, and the geographic areas used in making the calculations shall be clearly cross-referenced to the required map(s).

(2) Explanation of any restrictions on stormwater management measures in the development area imposed by wellhead protection plans and ordinances.

(3) Results of investigations of soils and groundwater required for the placement and design of stormwater management measures.

(4) Infiltration system design information as described in the Wisconsin Department of Natural Resources Infiltration System Site Evaluation Standard.

(5) A description and installation schedule for the stormwater management practices needed to meet the technical and performance standards in Article V. of this chapter.

(b) Construction plans shall include all of the items listed in Article III. of this chapter for both pre-construction and post-construction site conditions and, at a minimum, the following items:

(1) Watershed boundaries used in hydrology determinations to show compliance with performance standards in Article V. of this chapter;

(2) Locations of maintenance easements specified in the maintenance agreement;

(3) Location and type of all stormwater management conveyance and treatment practices, including the on-site and off-site tributary drainage area;

(4) Location and type of conveyance system that will carry runoff from the drainage and treatment practices to the nearest adequate outlet such as a curbed street, storm drain, or natural drainage way;

(5) The minimum permissible Building Opening Elevation of structures exposed to the ground surface - defined as a minimum of six (6) inches above the maximum water elevation produced by the 100-year, 24-hour design storm event, and a description of how the building will not be inundated by the 100-year, 24-hour design storm event;

(6) Detailed drawings including cross- sections and profiles of all permanent stormwater conveyance and treatment practices.

(7) Locations of Soil investigation borings and/or test pits

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Sec. 12-62. to 12-70. Reserved

ARTICLE VI. MAINTENANCE, MAINTENANCE AGREEMENTS, AND FINANCIAL GUARANTEE.

Sec. 12-71. Maintenance and Maintenance Agreement.

(a) *Maintenance*. The responsible party shall maintain all BMPs throughout the duration of the construction activities as necessary to meet the requirements of this chapter until the site has undergone final stabilization.

(b) *Maintenance Agreements Required*. A maintenance agreement shall be required for post-construction stormwater management practices. The maintenance agreement shall be entered into between Chippewa County and the responsible party and shall provide for maintenance of stormwater practices beyond the duration period of the permit issued under this chapter. The approved maintenance agreement shall be filed prior to permit issuance with the County Register of Deeds as a property deed restriction and shall be binding upon all subsequent owners of the lands within the approved stormwater management plans.

(c) *Maintenance Agreement Provisions*. The maintenance agreement shall contain the following information and provisions ~~and be consistent with the required maintenance plan~~:

(1) Agreement

a. Identification of the responsible party(s), organization or city, county, town or village responsible for long-term maintenance of the stormwater management practices identified in the post-construction stormwater management plan.

b. Requirement that the responsible party(s) shall maintain stormwater management practices in accordance with the schedule required in sub. (3), above.

c. Authorization for the Administrator to access the property to conduct inspections of stormwater management practices as necessary to ascertain that the practices are being maintained and operated in accordance with the agreement.

d. A requirement that the Administrator:

1. Maintain public records of the results of site inspections,

2. Inform the party(s) responsible for maintenance of the inspection results, and

3. Specifically indicate any corrective actions required to bring the stormwater management practice into proper working condition.

e. A provision stating that the party(s) designated under sub. (4) as responsible for long term maintenance of the stormwater management practices shall be notified by the Administrator of maintenance deficiencies which require correction, and that the specified corrective actions shall be undertaken within a reasonable time frame as set by the Administrator.

f. A provision authorizing Chippewa County to perform the corrective actions identified in the inspection report if the responsible party designated under sub. (4) does not make the required corrections in the specified time period. Chippewa County or the

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municipality in which the facilities are constructed shall enter the amount due on the tax rolls and collect the amount as a special charge against the property pursuant to subchapter VII. of ch. 66, Wis. Stats.

(2) Legal Description

a. A legal description of the property as defined in section 706.01(7r), Wis. Stats.

b. Survey map of the property showing legal boundaries.

(3) Location Map

a. Identification of the stormwater facilities and designation of the drainage area served by the facilities.

b. Designation of easements for drainage and stormwater facilities, and ingress and egress.

(4) Maintenance Plan

a. A schedule for regular maintenance of each aspect of the stormwater management system that is consistent with the required post-construction stormwater management plan.

~~(1) Identification of the stormwater facilities and designation of the drainage area served by the facilities.~~

~~(2) Designation of easements for drainage and stormwater facilities, and ingress and egress.~~

~~(3) A schedule for regular maintenance of each aspect of the stormwater management system consistent with the required post-construction stormwater management plan.~~

~~(4) Identification of the responsible party(s), organization or city, county, town or village responsible for long term maintenance of the stormwater management practices identified in the post-construction stormwater management plan.~~

~~(5) Requirement that the responsible party(s) shall maintain stormwater management practices in accordance with the schedule required in sub. (3), above.~~

~~(6) Authorization for the Administrator to access the property to conduct inspections of stormwater management practices as necessary to ascertain that the practices are being maintained and operated in accordance with the agreement.~~

~~(7) A requirement that the Administrator:~~

~~a. Maintain public records of the results of site inspections,~~

~~b. Inform the party(s) responsible for maintenance of the inspection results, and~~

~~c. Specifically indicate any corrective actions required to bring the stormwater management practice into proper working condition.~~

~~(8) A provision stating that the party(s) designated under sub. (4) as responsible for long term maintenance of the stormwater management practices shall be notified by the Administrator of~~

~~maintenance deficiencies which require correction, and that the specified corrective actions shall be undertaken within a reasonable time frame as set by the Administrator.~~

~~(9) A provision authorizing Chippewa County to perform the corrected actions identified in the inspection report if the responsible party designated under sub. (4) does not make the required corrections in the specified time period. Chippewa County or the municipality in which the facilities are constructed shall enter the amount due on the tax rolls and collect the amount as a special charge against the property pursuant to subchapter VII. of ch. 66, Wis. Stats.~~

Sec. 12-72. Financial Guarantee.

(a) *Establishment*. The applicant shall submit a financial guarantee, in a form and type acceptable to the Administrator. The financial guarantee shall be in an amount that represents the estimated cost of construction and site stabilization, as determined by the Administrator, plus an additional $5,000 for the final submittal of all required documentation under sub. (4). The written financial guarantee instrument shall authorize Chippewa County to use the funds to complete the stormwater management practices if the responsible party defaults or does not properly implement the approved stormwater management plan, upon written notice to the responsible party by Chippewa County that the requirements of this chapter have not been met.

(b) *Release*. Conditions for the release of the financial guarantee are as follows:

(1) Chippewa County shall release a portion of the financial guarantee established under this section, less any costs incurred by Chippewa County to complete installation of storm water facilities and conveyances. Chippewa County may make provisions for a partial pro-rata release of the financial guarantee based on the completion and documentation of key development phases.

(2) Chippewa County shall release a portion of the financial guarantee established under this section to assure construction of stormwater management practices, less any costs incurred by Chippewa County, at such time that the responsibility for stormwater management practices maintenance is transferred to another entity via an approved maintenance agreement.

(3) Release of a portion of the financial guarantee will be considered only after a minimum period of one year from the date of the establishment of the vegetative treatments. For stormwater management practices that are dependent on permanent vegetative treatments, a standard of 70 percent vegetative cover will be used.

(4) $5,000 of the financial guarantee shall be released upon the review and acceptance of the "as built plans" and certification as submitted by a registered Professional Engineer to the Administrator.~~submittal of the following to the Administrator:~~

~~a. Review and acceptance of the "as built plans" and certification as submitted by a registered Professional Engineer.~~

~~b. A recorded copy of the approved Maintenance Agreement.~~

Sec. 12-73. to 12-80. Reserved

ARTICLE VII. ILLICIT DISCHARGE.

Attachment: Ordinance to Amend Sections 12-09, 12-21, 12-71 and 12-72 Stormwater Management - FINAL (07 - 25 : Ordinance To Amend

Sec. 12-81. Prohibitions.

(a) *Discharges*. Except for storm water and other discharges specifically exempted under Sec. 12-82, no discharge, spilling or dumping of substances or materials shall be allowed into receiving water bodies or onto driveways, sidewalks, parking lots, or other areas that drain into the storm drainage system. No discharges shall be in violation of Chapter 62 of the Chippewa County Code of Ordinances, or any other local, state or federal law.

(b) *Connections*. The construction, use, maintenance or continued existence of illicit connections to the storm drainage system is prohibited. This prohibition expressly includes, without limitation, illicit connections made prior to the adoption of this chapter, regardless of whether the connection was permissible under law or whether the practice was applicable or prevailing at the time of connection.

Sec. 12-82. Exemptions.

The following activities are exempt from the provisions of this article, unless they are found to have an adverse impact on the storm water or design functionality of any proposed BMP:

(a) Discharges authorized by a permit issued by the Wisconsin Department of Natural Resources.

(b) Discharges resulting from firefighting activities.

(c) Discharges from clean runoff, as defined in Sec. 12-09(10).

Sec. 12-83. Notice of Violation.

(a) The Administrator may order compliance by written notice of violation to the responsible party or property owner for any illicit discharge or connection. Such notice may require without limitation:

(1) The elimination of the illicit connection(s) or discharge(s);

(2) That violating discharges, practices, or operations shall cease and desist;

(3) The abatement or remediation of storm water pollution or contaminated hazards and the restoration of any affected property;

(b) Any responsible party or property owner that fails to comply with a notice of violation under this article shall be subject to further enforcement actions of section 12-23.

Sec. 12-84. to 12-90. Reserved

2. That these ordinance amendments shall be effective upon passage and publication.

Forwarded to the County Board by the Land Conservation & Forest Management Committee.

Attachment: Ordinance to Amend Sections 12-09, 12-21, 12-71 and 12-72 Stormwater Management - FINAL (07 - 25 : Ordinance To Amend

STATEMENT OF EXPLANATION

Ordinance No. 08 - 25

ORD. 08-25: ORDINANCE TO AMEND SECTION 58-34(A) OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING NO PARKING ZONES - FIRST READING - CHRIS ELSTRAN

This ordinance amendment addresses necessary changes to parking regulations along County Trunk Highway S (CTH S) to improve safety conditions following the recent re-opening of a restaurant, 1917 Lake Wissota, formerly known as the Waters Edge Supper Club. Increased vehicle parking along the shoulder has led to significant visibility concerns for both drivers and pedestrians, particularly in the section of road between Lake Wissota and CTH O.

In response, the Chippewa County Highway Department conducted a thorough review of sight distances at driveways and intersections along this corridor. The findings confirmed that parked vehicles are obstructing visibility, creating a hazardous environment for traffic and pedestrian movement.

To mitigate these safety risks, new no-parking zones are being proposed in critical areas along CTH S. Additionally, in support of the restaurant's parking needs, a portion of an existing no-parking zone will be removed near 1917 Lake Wissota. This location was also evaluated and determined to have sufficient sight distance under the proposed changes, allowing for safe parking without compromising roadway visibility.

Ordinance No. 08 - 25

ORD. 08-25: ORDINANCE TO AMEND SECTION 58-34(A) OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING NO PARKING ZONES - FIRST READING - CHRIS ELSTRAN

SEE ATTACHMENT

FINANCIAL IMPACT:

Costs associated with purchase and installation of no parking signs in the approximate amount of $1,100

10/14/2025	**County Board**	
RESULT:	**FIRST READING**	**Next: 10/15/2025 9:30 AM**

History:

07/30/25	Highway Committee	TABLED	Next: 08/27/25
08/27/25	Highway Committee	FORWARD TO COUNTY BOARD	
09/09/25	County Board	REVIEWED	
09/24/25	Highway Committee	FORWARD TO COUNTY BOARD	

Approved as to Form:

Todd A. Pauls — Todd A. Pauls, Corporation Counsel — 7/10/2025

Leah Simington — Leah Simington, Finance Director — 7/10/2025

Andy J. Albarado — Andy J. Albarado, County Administrator — 7/14/2025

ORDINANCE TO AMEND SECTION 58-34 OF THE CODE OF ORDINANCES REGARDING NO PARKING ZONES

1. The Chapter 58, Section 34 of the Chippewa County Code of Ordinances is amended as follows:

Chapter 58 TRAFFIC AND VEHICLES*

Sec. 58-34. No parking zones.

(a) *List of locations.* No person shall stop or leave standing any vehicle, whether attended or unattended, and whether temporarily or otherwise in any of the following locations:

(1) The east side of C.T.H. “CC” commencing 4,595 feet north of intersection of C.T.H. “CC” and STH 64; thence north 2,470 feet along the east side of C.T.H. “CC”.

(2) The west side of C.T.H. “CC” commencing 5,805 feet south of the intersection of C.T.H. “CC” and 239th Avenue, thence south 780 feet along the west side of C.T.H. “CC”.

(3) At the intersection of C.T.H. "MM" and C.T.H. "D" as follows:

a. The west side of the C.T.H. "D" commencing at the intersection of C.T.H. "MM" and C.T.H. "D"; thence north 220 feet along the west side of C.T.H. "D."

b. The east side of C.T.H. "D" commencing 176 feet north of the intersection of C.T.H. "MM" and C.T.H. "D"; thence north 226 feet along the east side of C.T.H. "D."

c. The south and north sides of C.T.H. "MM" commencing at the intersection of C.T.H. "MM" and C.T.H. "D"; thence west 415 feet along the south and north sides of C.T.H. "MM."

d. The west side of C.T.H. "D" commencing at the intersection of C.T.H. "MM" and C.T.H. "D"; thence south 275 feet on the west side of C.T.H. "D."

e. The east side of C.T.H. "D" commencing at the intersection of C.T.H. "MM" and C.T.H. "D"; thence south 201 feet along the east side of C.T.H. "D."

f. The south side of C.T.H. "MM" commencing 160 feet east of the intersection of C.T.H. "MM" and C.T.H. "D", thence continuing east 182 feet along the south side of C.T.H. "MM."

g. The north side of C.T.H. "MM" commencing 177 feet east of the intersection of C.T.H. "MM" and C.T.H. "D", thence continuing east 193 feet along the north side of C.T.H. "MM."

(4) The east and west sides of C.TH. “OO” commencing 190 feet north of the intersection of C.T.H. “OO” and 30th Avenue; thence north 370 feet along the east and west sides of C.T.H. “OO”.

Attachment: Ord to Amend Sec 58-34 No Parking Zones PASSED AT COMMITTEE 09-24-2025 [Revision 1] (08 - 25 : Ordinance To Amend

(5) The east and west sides of C.T.H. "J" commencing at the intersection of C.T.H. "J" and 50th Avenue; thence north to the intersection of 53rd Avenue and C.T.H. "J."

(6) The west side of C.T.H. “V” (Oshkosh Street) commencing at the intersection of C.T.H. “D” (Murray Street); thence south 2,000 feet along the west side of C.T.H. “V”.

(7) The south side of C.T.H. “X” (Chippewa Street) commencing 1,670 feet east of the intersection of Ash Street and C.T.H. “X”; thence easterly 1,280 feet along the south side of C.T.H. “X”.

(8) The north side of C.T.H. “X” (Chippewa Street) commencing 2000’ east of the intersection of Ash Street and C.T.H. “X”; thence west 500 feet along the north side of C.T.H. “X”.

~~(9) The west side of C.T.H “S” commencing 275 feet south of the intersection of C.T.H. “S” and 95th Avenue; thence south 560 feet on the west side of C.T.H. “S”.~~

(9) The west side of C.T.H. “S” commencing 185 feet north of the intersection of C.T.H. “S” and 95th Avenue; thence south 510 feet on the west side of C.T.H. “S”.

(10) The west side of C.T.H. “S” commencing at the intersection of C.T.H. “S” and 97th Avenue; thence south 205 feet on the west side of C.T.H. “S”.

(b) *Parties subject to forfeiture.* Both the owner and the operator of such vehicle violating this section shall be subject to the penalty provisions hereof.

(c) *Penalty.* The penalty provisions of Wis. Stats. § 346.56(1m) is adopted by reference and made a part of this section.

2. That these ordinance amendments shall be effective upon passage and publication.

Forwarded to the County Board by the Highway Committee

Attachment: Ord to Amend Sec 58-34 No Parking Zones PASSED AT COMMITTEE 09-24-2025 [Revision 1] (08 - 25 : Ordinance To Amend

CTH S at 1917

CHIPPEWA COUNTY Est. 1848

WISCONSIN

N

9/24/2025

Scale = 1:100'

97TH AV

97th Ave.

CTH O

205'-0"

CTH S SOUTH

75'-0"

75'-0"

60'-0"

96th Ave.

- 75' vision triangle per County zoning Ch.70-109(b)(1)
- equates to parking roughly 60' from sideroad centerline (typical)

OLD ABE TRL

9536

185'-0"

9520

510'-0"

95th Ave.

Old Abe State Trail

1917 Lake Wissota

CTH S South

This area is currently posted no-parking. (560' in length)

Proposed No-Parking Zone

Existing No-Parking Zone to be Removed

Attachment: MAP CTH S temp no parking PASSED at committee 09-24-2025 [Revision 1] (08 - 25 : Ordinance To Amend Section 58-34(a) Regarding No Parking Zones)

Disclaimer: This map is a compilation of records as they appear in the Chippewa County Offices affecting the area shown and is to be used only for reference purposes.

STATEMENT OF EXPLANATION

Ordinance No. 09 - 25

ORD. 09-25: ORDINANCE TO AMEND SECTION 58-31(F) OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING SPEED ZONES - FIRST READING - CHRIS ELSTRAN

The County Traffic Safety Committee has recommended that a speed limit change be implemented on a segment of CTH S east of Jim Falls. The current speed limit transitions from a 55-mph zone directly to a 25-mph zone. The recommended change introduces a stepdown 45-mph zone between the 55-mph and 25-mph zones. This change also received the requisite approval of the Wisconsin Department of Transportation.

Ordinance No. 09 - 25

ORD. 09-25: ORDINANCE TO AMEND SECTION 58-31(F) OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING SPEED ZONES - FIRST READING - CHRIS ELSTRAN

SEE ATTACHMENT

FINANCIAL IMPACT:

Equipment, labor, and material costs for sign installations anticipated to be less than $1,500.

10/14/2025	**County Board**	
RESULT:	**FIRST READING**	**Next: 10/15/2025 9:30 AM**

History:

09/24/25	Highway Committee	FORWARD TO COUNTY BOARD

Approved as to Form:

Todd A. Pauls, Corporation Counsel 9/9/2025

Leah Simington, Finance Director 9/9/2025

Andy J. Albarado, County Administrator 9/10/2025

ORDINANCE TO AMEND SECTION 58-31(f) OF THE CHIPPEWA COUNTY CODE OF ORDINANCES REGARDING SPEED ZONES

1. That Section 58-31(f) of the Chippewa County Code of Ordinances is amended as follows:

Chapter 58 TRAFFIC AND VEHICLES*

ARTICLE II. TRAFFIC SCHEDULES

Sec. 58-31. Speed zones.

(a) *Fifteen (15) mile-per-hour speed zones.* The maximum permissible speed shall be 15 miles per hour at those times when children are going to or from school or are playing within the sidewalk area at or about the school, pursuant to the speed limit signs erected at the following locations:

(1) On C.T.H. "D", beginning at a point 775 feet north of the intersection of S.T.H. 29, proceeding north, a distance of 0.15 miles thereof.

(2) On C.T.H. "D", beginning at a point 162 feet north of the intersection of East Pattern Street, proceeding south, a distance of 0.15 miles thereof.

(3) On C.T.H. "J", beginning at a point 34 feet south of the intersection of 53rd Avenue, proceeding south, a distance of 0.13 miles thereof.

(4) On C.T.H. "J", beginning at a point 223 feet north of the intersection of 51st Avenue, proceeding north, a distance of 0.13 miles thereof.

(5) On C.T.H. "Q", beginning at a point 435 feet north of the intersection of C.T.H. "B" (east), proceeding north, a distance of 0.12 miles thereof.

(6) On C.T.H. "Q", beginning at a point 199 feet north of the intersection of 114th Avenue, proceeding south, a distance of 0.12 miles thereof.

(b) *Twenty-five (25) mile-per-hour speed zones.* The maximum permissible speed shall be 25 miles per hour pursuant to the speed limit signs erected at the following locations:

(1) On C.T.H. “AA”, beginning at a point 974 feet east of the intersection of C.T.H. “SS”, proceeding west, a distance of 0.18 miles thereof.

(2) On C.T.H. “AA”, beginning at the intersection of C.T.H. “SS”, proceeding east, a distance of 0.25 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(3) On C.T.H. "D", beginning at a point 652 feet north of the intersection of S.T.H. 29, proceeding north, a distance of 1.00 miles thereof.

(4) On C.T.H. "D", beginning at a point 57 feet north of the intersection of East Marshall Street, proceeding south, a distance of 1.07 miles thereof.

(5) On C.T.H. "F", beginning at the intersection of S.T.H. 40, proceeding south, a distance of 0.39 miles thereof.

(6) On C.T.H. "F", beginning at a point 183 feet north of the intersection of C.T.H. "Q", proceeding north, a distance of 0.40 miles thereof.

(7) On C.T.H. "H", beginning at the intersection of C.T.H. "X" (east), proceeding north, a distance of 0.96 miles thereof.

(8) On C.T.H. "H", beginning at a point 115 feet south of the intersection of 10th Street, proceeding south, a distance of 0.96 miles thereof.

(9) On C.T.H. "O", beginning at a point 466 feet west of the intersection of McKnight Street, proceeding east, a distance of 0.46 miles thereof.

(10) On C.T.H. "O", beginning at the intersection of C.T.H. "X", proceeding north, a distance of 0.46 miles thereof.

(11) On C.T.H. "Q", beginning at the intersection of S.T.H. 40, proceeding west, a distance of 0.86 miles thereof.

(12) On C.T.H “Q”, beginning at a point 341 feet west of the intersection of York Street, proceeding east, a distance of 1.01 miles thereof.

(13) On C.T.H. "S", beginning at the intersection of 138th Avenue, proceeding north, a distance of 0.70 miles thereof.

(14) On C.T.H. "S", beginning at the intersection of 198th Street, proceeding south, a distance of 0.70 miles thereof.

(15) On C.T.H. "SS", beginning at a point 341 feet north of the intersection of 20th Avenue, proceeding north, a distance of 0.95 miles thereof.

(16) On C.T.H. "SS", beginning at the intersection of S.T.H. 40, proceeding south, a distance of 1.01 miles thereof.

(17) On C.T.H. "V", beginning at a point 814 feet south of the intersection of East Pattern Street, proceeding north, a distance of 0.24 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(18) On C.T.H. "V", beginning at the intersection of East Murray Street, proceeding south, a distance of 0.24 miles thereof.

(19) On C.T.H. "X", beginning at the intersection of Broadway Street, proceeding south, a distance of 0.27 miles thereof.

(20) On C.T.H. "X", beginning at a point 30 feet north of the intersection of Pine Street, proceeding north, a distance of 0.24 miles thereof.

(21) On C.T.H. “X”, beginning at the intersection of Broadway Street, proceeding east, a distance of 0.37 miles thereof.

(22) On C.T.H. “X”, beginning at a point 305 feet east of the intersection of Dewey Street, proceeding west, a distance of 0.37 miles thereof.

(23) On C.T.H. "Y", beginning at the intersection of C.T.H. "S", proceeding west, a distance of 0.24 miles thereof.

(24) On C.T.H. “Y”, beginning at the intersection of State Highway 178, proceeding east, a distance of 0.24 miles thereof.

(c) *Thirty (30) mile-per-hour speed zones.* The maximum permissible speed shall be 30 miles per hour pursuant to the speed limit signs erected at the following locations:

(1) On C.T.H. "M", beginning at the intersection of C.T.H. "SS" proceeding west, a distance of 0.17 miles thereof.

(2) On C.T.H. "M", beginning at a point 566 feet west of the intersection of Columbia Street South proceeding east, a distance of 0.26 miles thereof.

(3) On C.T.H. "X", beginning at a point 102 feet east of the intersection of South Elm Street proceeding east, a distance of 0.68 miles thereof.

(4) On C.T.H. "X", beginning at a point 48 feet east of the intersection of South Ash Street, proceeding west, a distance of 0.68 miles thereof.

(d) *Thirty-five (35) mile-per-hour speed zones.* The maximum permissible speed shall be 35 miles per hour pursuant to the speed limit signs erected at the following locations:

(1) On C.T.H. "B", beginning at a point 700 feet east of the intersection of C.T.H. "Q", proceeding west, a distance of 0.13 miles thereof.

(2) On C.T.H. "CC", beginning at the intersection of C.T.H. "Z", proceeding south, a distance of 0.91 miles thereof.

(3) On C.T.H. "CC", beginning at the intersection of S.T.H. 64, proceeding north, a distance of 0.91 miles thereof.

(4) On C.T.H. "D", beginning at the point 937 feet south of the intersection of C.T.H. "MM", proceeding north, a distance of 0.33 miles thereof.

(5) On C.T.H. "D", beginning at a point 828 feet north of the intersection of C.T.H. "MM", proceeding south, a distance of 0.33 miles thereof.

(6) On C.T.H. “F”, beginning at a point 80 feet south of the intersection of 20th Avenue, proceeding south, a distance of 1.10 miles thereof.

(7) On C.T.H. “F”, beginning at the County Line, proceeding north, a distance of 1.10 miles thereof.

(8) On C.T.H. "I", beginning at the intersection of S.T.H. 178, proceeding west, a distance of 0.68 miles thereof.

(9) On C.T.H. "I", beginning at the intersection of Commerce Parkway, proceeding east, a distance of 0.68 miles thereof.

(10) On C.T.H. “J”, beginning at the intersection of 50th Avenue, proceeding north, a distance of 0.67 miles thereof.

(11) On C.T.H. “J”, beginning at C.T.H. “X”, proceeding south, a distance of 0.60 miles thereof.

(12) On C.T.H. "K", beginning at a point 900 feet south of the intersection of 70th Avenue, proceeding north, a distance of 1.20 miles thereof.

(13) On C.T.H. "K", beginning at a point 154 feet south of the intersection of 78th Avenue, proceeding south, a distance of 1.20 miles thereof.

(14) On C.T.H. "M", beginning at a point 617 feet west of the intersection of 256th Street, proceeding east, a distance of 2.74 miles thereof.

(15) On C.T.H. "M", beginning at a point 530 feet west of the intersection of S.T.H. 27, proceeding west, a distance of 2.64 miles thereof.

(16) On C.T.H. “NN”, beginning at the intersection of C.T.H. “X”, proceeding south, a distance of 0.44 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(17) On C.T.H. “NN”, beginning at the intersection of S.T.H. 29, proceeding north, a distance of 0.44 miles thereof.

(18) On C.T.H. “O”, beginning at a point 1,236 feet east of the intersection of 350th Street, proceeding east, a distance of 0.95 miles.

(19) On C.T.H. “O”, beginning at a point 466 feet west of the intersection of McKnight Street, proceeding west, a distance of 0.95 miles thereof.

(20) On C.T.H. “P”, beginning at a point 1,380 feet south of the intersection of 40th Avenue, proceeding north, a distance of 1.01 miles thereof.

(21) On C.T.H. “P”, beginning at the intersection of Prairie View Road, proceeding south, a distance of 1.12 miles thereof.

(22) On C.T.H. "Q", beginning at a point 565 feet south of the intersection of C.T.H. "B" (west) proceeding north, a distance of 0.96 miles thereof.

(23) On C.T.H. "Q", beginning at a point 1,062 feet north of the intersection of 115th Avenue, proceeding south, a distance of 0.96 miles thereof.

(24) On C.T.H. “Q”, beginning at a point 711 feet east of the intersection of 80th Street, proceeding east, a distance of 0.27 miles thereof.

(25) On C.T.H. “Q” beginning at the intersection of Wilson Street, proceeding west, a distance of 0.58 miles thereof.

(26) On C.T.H. “S”, beginning at the intersection of 138th Avenue, proceeding south, a distance of 0.42 miles thereof.

(27) On C.T.H. "S", beginning at a point 671 feet south of the intersection of 198th Street, proceeding north, a distance of 0.42 miles thereof.

(28) On C.T.H. "SS", beginning at a point 1,370 feet south of the intersection of East Park Street, proceeding north, a distance of 0.67 miles thereof.

(29) On C.T.H. "SS", beginning at the Barron County Line, proceeding south, a distance of 0.67 miles thereof.

(30) On C.T.H. "X", beginning at a point 1,144 feet east of the intersection of Dewey Street, proceeding west, a distance of 0.52 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(31) On C.T.H. “X”, beginning at a point 305 feet east of the intersection of Dewey Street, proceeding east, a distance of 0.16 miles thereof.

(32) On C.T.H. "X", beginning at a point 100 feet south of the intersection of Pine Street, proceeding south, a distance of 0.51 miles thereof.

(33) On C.T.H. “X”, beginning at a point 930 feet north of the intersection of C.T.H. “H”, proceeding north, a distance of 0.54 miles thereof.

(34) On C.T.H. “V”, beginning at the intersection of C.T.H. “X”, proceeding north, a distance of 0.25 miles thereof.

(35) On C.T.H. “V”, beginning at a point 806 feet south of the intersection of East Patten Street, proceeding south, a distance of 0.25 miles thereof.

(e) *Forty (40) mile-per-hour speed zones.* The maximum permissible speed shall be 40 miles per hour pursuant to the speed limit signs erected at the following locations:

(1) On C.T.H. "D", beginning at a point 846 feet south of the intersection of 135th Avenue, proceeding north, a distance of 0.45 miles thereof.

(2) On C.T.H. "D", beginning at a point 885 feet north of the intersection of C.T.H. "S", proceeding south, a distance of 0.45 miles thereof.

(3) On C.T.H. “J”, beginning at the intersection of C.T.H. “X”, proceeding west, a distance of 1.36 miles thereof.

(4) On C.T.H. “J”, beginning at a point 175 feet east of the intersection of 160th Street, proceeding east, a distance of 1.38 miles thereof.

(5) On C.T.H. “J”, beginning at the intersection of 47th Avenue, proceeding north a distance of 0.34 miles thereof.

(6) On C.T. H. “J”, beginning at the intersection of 50th Avenue, proceeding south, a distance of 0.34 miles thereof.

(7) On C.T.H. "K", beginning at a point 129 feet south of the intersection of 50th Avenue, proceeding north, a distance of 1.11 miles thereof.

(8) On C.T.H. "K", beginning at the intersection of C.T.H. "X", proceeding south, a distance of 1.11 miles thereof.

(9) On C.T.H. “OO”, beginning at a point 640 feet east of the intersection of 130th Street, proceeding southwest, a distance of 3.15 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(10) On C.T.H. “OO”, beginning at the intersection of Business 53 (at Hogarth Street), proceeding northeast, a distance of 3.15 miles thereof.

(11) On C.T.H. "X", beginning at a point 2,227 feet west of the intersection of C.T.H. "J", proceeding east, a distance of 3.73 miles thereof.

(12) On C.T.H. "X", beginning at a point 154 feet west of the intersection of C.T.H. "K" (south), proceeding west, a distance of 3.65 miles thereof.

(13) On C.T.H. "X", beginning at a point 162 feet east of the intersection of 250th Street, proceeding east, a distance of 0.50 miles thereof.

(14) On C.T.H. "X", beginning at a point 70 feet east of the intersection of South Elm Street, proceeding west, a distance of 0.49 miles thereof.

(15) On C.T.H. "X", beginning at a point 50 feet east of the intersection of South Ash Street, proceeding east, a distance of 0.36 miles thereof.

(16) On C.T.H. "X", beginning at a point 1,915 feet east of the intersection of South Ash Street, proceeding west, a distance of 0.37 miles thereof.

(f) *Forty-five (45) mile-per-hour speed zones.* The maximum permissible speed shall be 45 miles per hour pursuant to the speed limit signs erected at the following locations:

(1) On C.T.H. "B", beginning at the intersection of C.T.H. "Q", proceeding east, to a point 1.00 miles thereof.

(2) On C.T.H. "B", beginning at a point 5,300 feet east of the intersection of C.T.H. “Q”, proceeding west, a distance of 0.88 miles thereof.

(3) On C.T.H. “CC”, beginning at the intersection of C.T.H. “Z”, proceeding north, a distance of 1.47 miles thereof.

(4) On C.T.H. “CC”, beginning at the intersection of 240th Avenue, proceeding south, a distance of 1.52 miles thereof.

(5) On C.T.H. “D”, beginning at a point 550 feet north of the intersection of 80th Street, proceeding south, a distance of 0.26 miles thereof.

(6) On C.T.H. “D” beginning at a point 500 feet north of the intersection of East Depere Street, proceeding north, a distance of 0.25 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(7) On C.T.H. "F", beginning at a point 165 feet north of the intersection of C.T.H. "Q", proceeding south, a distance of 0.65 miles thereof.

(8) On C.T.H. "F", beginning at a point 151 feet north of the intersection of 87th Street, proceeding north, a distance of 0.65 miles thereof.

(9) On C.T.H. “K”, beginning at a point 351 feet north of 80th Avenue, proceeding south, a distance of 0.34 miles thereof.

(10) On C.T.H. “K”, beginning at a point 100 feet south of the intersection with 78th Avenue, proceeding north, a distance of 0.34 miles thereof.

(11) On C.T.H. "M", beginning at a point 566 feet west of Columbia Street, proceeding west, a distance of 0.16 miles thereof.

(12) On C.T.H. "M", beginning at a point 217 feet east of the intersection of S.T.H. 53, east ramp, proceeding east, a distance of 0.27 miles thereof.

(13) On C.T.H. “M”, beginning at the intersection of C.T.H. “CC”, proceeding east, a distance of 0.43 miles thereof

(14) On C.T.H. “M”, beginning at a point 2,300 feet east of the intersection of C.T.H. “CC”, proceeding west, a distance of 0.43 miles thereof.

(15) On C.T.H. “N”, beginning at a point 270 feet west of the intersection of Tropicana Boulevard, proceeding west, a distance of 0.30 miles thereof.

(16) On C.T.H. “N”, beginning at a point 1,870 feet west of the intersection of Tropicana Boulevard, proceeding east, a distance of 0.30 miles thereof.

(17) On C.T.H. “O”, beginning at the intersection of C.T.H. “S”, proceeding east, a distance of 2.02 miles thereof.

(18) On C.T.H. “O”, beginning at a point 2,260 feet east of the intersection of 178th Street, proceeding west, a distance of 2.02 miles thereof.

(19) On C.T.H. “OO”, beginning at a point 600 feet east of the intersection of 130th Street, proceeding east, a distance of 1.05 miles thereof.

(20) On C.T.H. “OO”, beginning at the intersection of C.T.H. “P”, proceeding west, a distance of 1.01 miles thereof.

(21) On C.T.H. “P”, beginning at a point 480 feet north of the intersection of C.T.H. “OO”, proceeding north, a distance of 0.66 miles thereof.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

(22) On C.T.H. “P”, beginning at a point 1,400 feet south of the intersection of 40th Avenue, proceeding south, a distance of 0.76 miles thereof.

(23) On C.T.H. "Q", beginning at a point 220 feet south of the intersection of C.T.H. "S", proceeding south, a distance of 1.00 miles thereof.

(24) On C.T.H. "Q", beginning at a point 1,891 feet north of the intersection of Northridge Drive, proceeding north, a distance of 1.00 miles thereof.

(25) On C.T.H. “Q”, beginning at a point 2,013 feet east of the intersection of 186th Avenue, proceeding east, a distance of 0.67 miles thereof.

(26) On C.T.H. “Q”, beginning at a point 200 feet west of the intersection of 80th Street, proceeding west, a distance of 0.51 miles thereof.

(27) On C.T.H. “S”, beginning at a point 338 feet south of the intersection of 189th Street, proceeding north, a distance of 0.91 miles thereof.

(28) On C.T.H. “S”, beginning at a point 671 feet north of the intersection of 198th Street, proceeding south, a distance of 0.91 miles thereof.

(29) On C.T.H. "S", beginning at the intersection of 198th Street, proceeding east, a distance of 0.40 miles thereof.

(30) On C.T.H. "S", beginning at a point 2,112 feet east of the intersection of 198th Street, proceeding west, a distance of 0.40 miles thereof.

(~~29~~31) On C.T.H. “S”, beginning at a point 150 feet north of the intersection of C.T.H. “O”, proceeding south, a distance of 5.60 miles thereof.

(~~30~~32) On C.T.H. “S”, beginning at a point 260 feet west of the intersection of 120th Street, proceeding east, a distance of 5.60 miles thereof.

(~~31~~33) On C.T.H. “SS”, beginning at a point 1,516 feet north of the intersection of 98th Street, proceeding north, a distance of 0.42 miles thereof.

(~~32~~34) On C.T.H. “SS”, beginning at a point 100 feet south of the intersection of 21st Avenue, proceeding south, a distance of 0.28 miles thereof.

(~~33~~35) On C.T.H. “SS”, beginning at a point 550 feet north of the intersection of C.T.H. “Q”, proceeding south, a distance of 0.20 miles thereof.

(~~34~~36) On C.T.H. “SS”, beginning at a point 380 feet south of the intersection of C.TH. “Q”, proceeding north, a distance of 0.20 miles thereof.

(~~35~~37) On C.T.H. “SS” beginning at point 341 feet north of the intersection of 20th Avenue, proceeding south a distance of 1.06 miles thereof.

(~~36~~38) On C.T.H. “SS” beginning at a point 1,750 feet east of 98th Street, proceeding north a distance of 1.06 miles thereof.

(~~37~~39) On C.T.H. “T”, beginning at a point 1,663 feet north of C.T.H. X proceeding south, a distance of 1.20 miles thereof.

(~~38~~40) On C.T.H. “T”, beginning at a point 800 feet north of 30th Avenue, proceeding north, a distance of 1.20 miles thereof.

(~~39~~41) On C.T.H. "X", beginning at the intersection of C.T.H. "V" (west), proceeding east, a distance of 0.72 miles thereof.

(~~40~~42) On C.T.H. "X", beginning at a point 1,257 feet east of the intersection of C.T.H. "D", proceeding west, a distance of 0.78 miles thereof.

(~~41~~43) On C.T.H. “X”/Business 29, beginning at a point 802 feet north of the intersection of S.T.H. 29 north ramp, proceeding northeast, a distance of 0.54 miles thereof.

(~~42~~44) On C.T.H. “X”/Business 29, beginning at a point 539 feet west of the intersection of 95th Street, proceeding west, a distance of 0.83 miles thereof.

(~~43~~45) On C.T.H. “X”/Business 29, beginning at a point 295 feet south of the intersection of 50th Avenue, proceeding northeast, a distance of 2.05 miles thereof.

(~~44~~46) On C.T.H. “X”/Business 29, beginning at the intersection of U.S.H. 53 west ramp, proceeding west, a distance of 2.05 miles thereof.

(~~45~~47) On C.T.H. "X", beginning at a point 363 feet east of the intersection of C.T.H. "K" (south), proceeding east, a distance of 1.10 miles thereof.

(~~46~~48) On C.T.H. “X” beginning at a point 3,250 feet east of the intersection of 210th Avenue, proceeding west, a distance of 1.14 miles thereof.

(~~47~~49) On C.T.H. “X”, beginning at a point 162 feet east of the intersection of 250th Street, proceeding west, a distance of 0.75 miles thereof.

(~~48~~50) On C.T.H. “X”, beginning at a point 3,680 feet northeast of the intersection of C.T.H. “MM”, proceeding northeast, a distance of 0.75 miles thereof.

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(Code 1980, § 7.03(2); Ord. No. 01-17, 03-14-2017; Ord. No. 05-17, 08-08-2017; Ord. No. 05-19, 04-09-2019; Ord. No. 01-21, 04-20-2021; Ord. No. 04-25, 04-15-2025)

2. That these ordinance amendments shall be effective upon passage and publication.

Forwarded to the County Board by the Highway Committee.

Attachment: Ord to Amend Sec 58-31(f) Speed Zones - 09.04.25 FINAL (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

attachment B

CTH S - PROPOSED CONDITIONS

CHIPPEWA COUNTY
WISCONSIN

Printed 04/08/2025 Scale = 1:500'



Disclaimer: This map is a compilation of records as they appear in the Chippewa County Offices affecting the area shown and is to be used only for reference purposes.

Attachment: Att B - CTH S East of Jim Falls PROPOSED REVISED (09 - 25 : Ordinance To Amend Section 58-31(f) Of The Chippewa County

Chippewa County
Department of Administration
Human Resources Division



Human Resources Policy Manual

County Board Action/History

Adopted by the County Board 11/13/2012 and effective 1/1/2013

Revised and amended by the County Board on the following dates:

05/14/2013; 08/13/2013; 12/10/2013; 03/11/2014; 05/12/2014; 12/09/2014; 12/08/2015; 03/14/2017; 04/11/2017; 03/13/2018; 11/06/2018; 12/11/2018; 01/08/2019; 07/09/2019; 09/10/2019; 10/08/2019; 11/11/2019; 11/10/2020; 09/13/2022; 11/08/2022; 12/13/2022; 09/12/2023; 06/11/2024; 01/14/2025

PROPOSED REVISIONS

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CHAPTER 5 – BENEFITS

The information provided is a summary only and is not intended to be a substitution for the plan certificate provided by the respective insurance carrier.

The County shall determine the design and selection of all benefits. The County retains the right to change these benefits. Employees shall be notified of any changes.

The benefits provided under this Chapter shall be administered by the Human Resources Division.

42. Health, Dental and Vision Insurance, Cobra, and Retiree Continuation

a. Purpose

To offer health, dental and vision insurance to those employees who qualify for coverage.

b. Coverage

The design and selection, including all level of benefits provided to County sponsored health, dental and vision insurance plans and insurance carriers are determined by the County. Participation for employee groups is also determined by the County and applicable state and federal regulations; and is governed by the contract of insurance in place between the County and the chosen insurance provider. Employees shall receive notification of any health, dental and vision plan or carrier changes, as adopted by the County. Refer to the Certificate of Insurance for complete details, including limitations and exclusions.

c. Employee Premium Contribution

1. Health Insurance

Employee health insurance premium contributions are established by Chippewa County. Any employee required to pay any portion of the health insurance premium shall make such payment by payroll deduction on a pre-tax basis. All benefit payroll deduction schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details. ~~Health insurance premiums are paid monthly and shall be deducted from the first paycheck of each month.~~

If an employee is on an approved leave and a payroll deduction is not possible, unless other arrangements have been approved by the Human Resources Division, an employee ~~on approved leave for whom payroll deduction is not possible in any given month~~ shall be responsible to pay any missed ~~the monthly~~ premium to Chippewa County within five (5) business days following the scheduled ~~applicable month's~~ payroll deduction date. Failure to make premium payments may result in termination of coverage.

2. Dental and Vision Insurance

Employee dental and vision insurance premium contributions are established by Chippewa County. Employees are required to pay the full cost of the dental and vision

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insurance premium. Employees shall make such payment by payroll deduction on a pre-tax basis. All benefit payroll deduction schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details.~~Dental and vision insurance premiums are paid one month in advance and shall be deducted from the second paycheck of each month.~~

If an employee is on an approved leave and a payroll deduction is not possible, unless other arrangements have been approved by the Human Resources Division, an employee ~~on approved leave for whom payroll deduction is not possible in any given month~~ shall be responsible to pay any missed~~the monthly~~ premium to Chippewa County within five (5) business days following the scheduled~~applicable month's~~ payroll deduction date. Failure to make premium payments may result in termination of coverage.

d. Eligibility

1. Health Insurance

All full-time status employees are eligible for the County sponsored Health Insurance.

2. Dental and Vision Insurance

All full-time and ~~part time~~part-time status employees who work 1,040 hours or greater each year are eligible for the County sponsored dental and vision plans.

e. Enrollment

Those employees who do not enroll in the health, dental or vision plans during their initial new employee eligibility period (typically occurs during the first week of employment or first week of the status change during the employee orientation meeting with the Human Resources Division) shall not be eligible again to enroll until one of the following two events occur:

1. Open Enrollment Event

The County holds an open enrollment period annually in the fourth quarter. Employees are eligible to make any change(s) to, cancel or add insurance coverage during the open enrollment period. All elections during open enrollment shall be effective on January 1st of the following year.

2. Section 125 Qualifying Event

IRS Section 125 defines the circumstances under which a plan may permit an employee to change his or her plan elections with respect to health, dental or vision coverage. A qualifying event occurs when an employee or dependent that is covered becomes (or ceases to be) eligible under the plan. A qualifying event allows employees to adjust health, dental or vision insurance coverage without waiting until the open enrollment period. The qualifying event shall be reported within 30 days of the event to the Human Resources Division along with written proof of the event. The qualifying event shall correspond with the change to the plan elections and shall be subject to the approval of the Human Resources Division. The effective date of the change shall be determined by the Human Resources Division, but shall be no later than the first day of the month

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following the qualifying event date. Common qualifying events include, but are not limited to:

a). Marriage
b). Divorce or legal separation
c). Birth, adoption or placement for adoption of a child
d). Spouse's loss of employment
e). Death
f). Reduction in hours to less than full time status
g). Dependent turns 26 (effective date of the change for this event only is the last day of the month that the dependent turns 26)

f. Effective Date

If health, dental or vision insurance is elected, insurance becomes effective on the first day of the month following thirty (30) days of employment with the County. The effective date applies to new hires and employees with a status change (as defined in Chapter 2, Section 1j) resulting in new eligibility.

If an employee is covered under a collective bargaining agreement and has a status change which results in the employee not being covered by the bargaining agreement, the effective date of the change in insurance shall be the first day of the month that follows the change in status.

If an employee is not covered under a collective bargaining agreement and has a status change which results in the employee being covered by a collective bargaining agreement, the effective date of the change in insurance shall be the first day of the month that follows the change in status.

g. Spousal Coverage Requirement~~Dual Coverage Not Permitted~~

To maintain fairness and manage the overall expense of the health insurance plan, employees who are legally married to one another and both employed by Chippewa County are required to be covered under one health insurance plan.

- **Single Plan Enrollment**:
  Married employees working for Chippewa County may not elect separate single coverage plans. They must be enrolled together on one plan option (e.g., Employee + Spouse or Full Family).

- **Plan Selection**:
  Eligible employee spouses may choose which employee will be designated as the "primary subscriber" for the plan. The other spouse and any eligible dependent(s) must be covered under the same plan.

- **Exceptions**:
  Exceptions to this policy will be considered only in limited circumstances, such as:
  - When one spouse becomes ineligible for health coverage under Chippewa County's plan (e.g., due to part-time status, waiting period, or loss of eligibility).
  - When compliance with this policy would result in a loss of coverage under applicable law (e.g., continuation rights under COBRA).

- **Coordination of Benefits**:
  If one spouse has other insurance coverage available outside of Chippewa County,

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coordination of benefits rules will apply in accordance with plan provisions.

~~The County provides health insurance coverage under either one (1) family plan or two (2) single plans. No County employee may be on two County sponsored health plans.~~

h. Health, Dental and Vision Insurance Coverage During FMLA or Other Leave

Refer to *Continuation of Insurance* section as identified under FMLA, Non-Medical Leave, Personal Leave, Military Leave, and Workers' Compensation Leave policies.

i. Waiver or Cancellation of Coverage

If an employee declines, waives or cancels any insurance coverage, the employee shall complete an insurance waiver form provided by the Human Resources Division unless it is during an open enrollment period. In this case, the employee will complete an electronic open enrollment form to decline, waive or cancel coverage~~.~~

The effective date of any~~-~~ change due to waiver shall be dependent on the reason and timing of the waiver and shall be determined by the Human Resources Division consistent with the reason or timing of the waiver and any regulatory requirements (such as COBRA or Section 125 qualifying event changes).

j. Coverage upon Separation

Health, dental and vision insurance coverage shall cease on the last day of the month in which the employee's separation from employment (last day of work) with the County occurs.

k. Insurance Continuation

Under state law and the Federal Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) and subsequent amendments to the Act, employees covered under an employer's group insurance plan are eligible for continuation of any insurance coverage under the group plan. COBRA contains provisions giving certain employees, former employees, retirees, spouses, former spouses, and dependent children the right to temporary continuation of insurance coverage at group rates plus a 2% administration fee. This coverage, however, is only available when coverage is lost due to COBRA qualifying events.

COBRA qualifying events are events that would cause an individual to lose insurance coverage. The type of COBRA qualifying event shall determine who the qualified beneficiaries are and the amount of time that a plan shall offer the insurance coverage to them under COBRA. COBRA qualifying events include:

1. Employee or spouse's voluntary or involuntary separation of employment for reasons other than gross misconduct
2. Employee or spouse's reduction in the number of hours of employment
3. Spouse becomes eligible for Medicare
4. Divorce or legal separation
5. Death
6. Dependent child loss of dependent child status under the plan rules

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The employee shall report the COBRA qualifying event within 30 days of the event to the Human Resources Division and provide written proof of the event. The effective date of the change shall be the qualifying event date.

All employees, as well as their qualified dependents, shall receive notice of mandated insurance continuation benefits when the plan coverage for the employee begins.

Should an employee in the Jail or law enforcement officer (as defined Wis. Stat. § 66.0137) die in the line of duty, coverage continues until the surviving spouse remarries or attains age 65 or until the dependent child(ren) reaches age 26.

l. Retiree Coverage

Retiree health insurance coverage is not available for employees who retire from Chippewa County on or after January 1, 2023. For employees eligible through 2022, retiree coverage is for health insurance only. Dental and vision are not offered as a retiree benefit. Retiree coverage in 2022 may be elected by the retiree when all of the following criteria are met:

1. The employee shall be enrolled at the time of retirement and have a minimum of one (1) year of enrollment in the Health Plan immediately prior to retirement; and

2. The employee shall be employed by the County for at least ten (10) consecutive years as a ~~full time~~full-time status employee; and

3. The employee shall be age 55 or older (age 50 for employees classified as Protective Status).

If retiree health insurance coverage was elected before January 1, 2023, the retiree *and* eligible dependents may continue in the County sponsored retiree health plan until the retiree is eligible for Medicare. Retiree coverage is solely at the participant's expense.

(Section 42 adopted by the County Board 09/11/18; 09/10/19; 11/10/2020; 09/13/2022; 01/14/2025)

44. Accident Insurance

a. Purpose

To offer accident insurance to those employees who qualify for coverage.

b. Coverage

The design and selection, level of benefits, and carrier under and carrier of the County sponsored accident insurance plan shall be determined solely by the County. Refer to the Certificate of Insurance for complete details, including limitations and exclusions.

c. Employee Premium Contribution

Employee accident insurance premium contributions are established by Chippewa County. Employees are required to pay the full cost of the accident insurance premium. Employees shall make such payment by payroll deduction on an after-tax basis. All benefit payroll deduction

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schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details.~~Accident insurance premiums are paid one month in advance and shall be deducted from the second paycheck of each month.~~

If an employee is on an approved leave and a payroll deduction is not possible, u~~U~~nless other arrangements have been approved by the Human Resources Division, an employee ~~on approved leave for whom payroll deduction is not possible in any given month~~ shall be responsible to pay any missed~~the monthly~~ premium to Chippewa County within five (5) business days following the ~~applicable month's~~scheduled payroll deduction date. Failure to make premium payments may result in termination of coverage.

d. Eligibility

All full-time and ~~part time~~part-time status employees who work 1,040 hours or greater each year are eligible for the County sponsored accident insurance plan.

e. Enrollment

Those employees who do not enroll in the accident insurance plan during their initial new employee eligibility period (typically occurs during the first week of employment or first week of the status change during the employee orientation meeting with the Human Resources Division) shall not be eligible again to enroll until one of the following two events occur:

1. Open Enrollment Event

The County holds an open enrollment period annually in the fourth quarter. Employees are eligible to add insurance coverage during the open enrollment period. All elections during open enrollment shall be effective on January 1st of the following year.

2. Qualifying Event

A qualifying event occurs when an employee or dependent that is covered becomes eligible under the plan. A qualifying event allows employees to enroll in the accident insurance plan without waiting until the open enrollment period. The qualifying event shall be reported within 30 days of the event to the Human Resources Division along with written proof of the event. The effective date of the change shall be determined by the Human Resources Division~~,~~ but shall be no later than the first day of the month following the qualifying event date. Common qualifying events include, but are not limited to:

a). Marriage
b). Divorce or legal separation
c). Birth, adoption or placement for adoption of a child

f. Effective Date

If accident insurance is elected, insurance becomes effective on the first day of the month following thirty (30) days of employment with the County. The effective date applies to new hires and employees with a status change (as defined in Chapter 2, Section 1j) resulting in new eligibility.

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If accident insurance is elected due to a qualifying event, insurance becomes effective the first day of the month following the qualifying event date.

g. Coverage during FMLA or other Leave

Refer to *Continuation of Other Benefits* section as identified under FMLA, Non-Medical Leave, Personal Leave, Military Leave, and Workers' Compensation Leave policies.

h. Waiver or Cancellation of Coverage

If an employee declines, waives or cancels any insurance coverage, the employee shall complete an insurance waiver form provided by the Human Resources Division.

The effective date of the cancellation of coverage will be the first of the year following the Open Enrollment event in which the cancellation was elected or the first of the month following a qualifying event applicable to the cancellation of coverage.

i. Coverage upon Separation

Accident Insurance coverage with the County shall cease on the last day of the month in which the employee's separation from employment (last day of work) with the County occurs.

j. Insurance Continuation

Opportunity for the continuation of coverage will be provided post separation by the insurance carrier.

(Section 44 approved by the CB 09/10/19; 11/10/2020)

45. Critical Illness Insurance

a. Purpose

To offer critical illness insurance to those employees who qualify for coverage.

b. Coverage

The design and selection, level of benefits, and carrier under and carrier of the County sponsored critical illness insurance plan shall be determined solely by the County. Refer to the Certificate of Insurance for complete details, including limitations and exclusions.

c. Employee Premium Contribution

Employee critical illness insurance premium contributions are established by Chippewa County. Employees are required to pay the full cost of the critical illness insurance premium. Employees shall make such payment by payroll deduction on an after-tax basis. All benefit payroll deduction schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details. ~~Critical illness insurance premiums are paid one month in advance and shall be deducted from the second paycheck of each month.~~

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If an employee is on an approved leave and a payroll deduction is not possible, u~~U~~nless other arrangements have been approved by the Human Resources Division, an employee ~~on approved leave for whom payroll deduction is not possible in any given month~~ shall be responsible to pay any missed~~the monthly~~ premium to Chippewa County within five (5) business days following the ~~applicable month's~~scheduled payroll deduction date. Failure to make premium payments may result in termination of coverage.

d. Eligibility

All full-time and ~~part time~~part-time status employees who work 1,040 hours or greater each year are eligible for the County sponsored critical illness insurance plan.

e. Enrollment

Those employees who do not enroll in the critical illness insurance plan during their initial new employee eligibility period (typically occurs during the first week of employment or first week of the status change during the employee orientation meeting with the Human Resources Division) shall not be eligible again to enroll until one of the following two events occur:

1. Open Enrollment Event

The County holds an open enrollment period annually in the fourth quarter. Employees are eligible to add insurance coverage during the open enrollment period. All elections during open enrollment shall be effective on January 1st of the following year.

2. Qualifying Event

A qualifying event occurs when an employee or dependent that is covered becomes eligible under the plan. A qualifying event allows employees to enroll in the critical illness insurance plan without waiting until the open enrollment period. The qualifying event shall be reported within 30 days of the event to the Human Resources Division along with written proof of the event. The effective date of the change shall be determined by the Human Resources Division~~,~~ but shall be no later than the first day of the month following the qualifying event date. Common qualifying events include, but are not limited to:

a). Marriage
b). Divorce or legal separation
c). Birth, adoption or placement for adoption of a child

f. Effective Date

If critical illness insurance is elected, insurance becomes effective on the first day of the month following thirty (30) days of employment with the County. The effective date applies to new hires and employees with a status change (as defined in Chapter 2, Section 1j) resulting in new eligibility.

If critical illness insurance is elected due to a qualifying event, insurance becomes effective the first day of the month following the qualifying event date.

g. Coverage during FMLA or other Leave

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Refer to *Continuation of Other Benefits* section as identified under FMLA, Non-Medical Leave, Personal Leave, Military Leave, and Workers' Compensation Leave policies.

h. Waiver or Cancellation of Coverage

If an employee declines, waives or cancels any insurance coverage, the employee shall complete an insurance waiver form provided by the Human Resources Division.

The effective date of the cancellation of coverage will be the first of the year following the Open Enrollment event in which the cancellation was elected or the first of the month following a qualifying event applicable to the cancellation of coverage.

i. Coverage upon Separation

Critical illness Insurance coverage with the County shall cease on the last day of the month in which the employee's separation from employment (last day of work) with the County occurs.

j. Insurance Continuation

Opportunity for the continuation of coverage will be provided post separation by the insurance carrier.

(Section 45 adopted by the County Board 11/10/2020)

47. Short-~~-~~Term Disability

a. Purpose

To provide a ~~short term~~short-term income protection plan for employees who are unable to work due to a qualified injury or illness.

b. Coverage

The design and selection, including all level of benefits provided to participants under the County-sponsored Short Term Disability Plan and insurance carrier shall be determined solely by the County. Refer to the Certificate of Insurance for complete details, including limitations and exclusions.

c. Employee Premium Contribution

All ~~Short Term~~Short-Term Disability Plan premium contributions are paid by the employee through payroll deduction on an after-~~-~~tax basis. ~~and shall be deducted from the employee's first paycheck of each month.~~ All benefit payroll deduction schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details. ~~Short term disability premiums are paid during the month of coverage (unlike dental and vision insurance which are paid one month in advance).~~

If an employee is on an approved leave and a payroll deduction is not possible, unless other arrangements have been approved by the Human Resources Division, an employee ~~on approved leave for whom payroll deduction is not possible in any given month~~ shall be responsible to pay any missed~~the monthly~~ premium to Chippewa County within five (5) business days following the

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~~applicable month's~~ scheduled payroll deduction date. Failure to make premium payments may result in termination of coverage.

d. Eligibility

All full-~~-~~time and part time ~~status~~ county employees who work 1,040 hours or greater each year are eligible for enrollment in the ~~Short Term~~Short-Term Disability Plan (income protection). Participation is voluntary for general municipal employees.

e. Enrollment

Enrollment into the ~~Short Term~~Short-Term Disability Plan, for new employees or newly eligible employees due to status change, typically occurs during the first week of employment or first week of the status change during the employee orientation meeting with the Human Resources Division.

If an employee waives coverage during the initial eligibility period, the employee shall be eligible to enroll in coverage at any time thereafter. If an employee enrolls after the initial eligibility period, the employee shall be subject to evidence of insurability. Upon review by the ~~Short Term~~Short-Term Disability insurance carrier, coverage may be denied.

f. Effective Date

The effective date of coverage under the ~~Short Term~~Short-Term Disability Plan shall be on the first day of the month following thirty (30) days of employment with the County or the first of the month following approval of evidence of insurability. The effective date applies to new hires and employees with a status change (as defined in Chapter 2, Section 1j) resulting in new eligibility.

g. Coverage during FMLA or other Leave

Refer to *Continuation of Other Benefits* section as identified under FMLA, Non-Medical Leave, Personal Leave, Military Leave, and Workers' Compensation Leave policies.

h. Waiver or Cancellation of Coverage

Any employee may elect to decline or cancel ~~short term~~short-term disability coverage by signing a waiver form provided by the Human Resources Division.

A waiver shall be effective upon receipt by the Human Resources Division or, in the case of cancellation, the first day of the month following the date that premiums are paid through.

i. Separation

Short-~~-~~Term Disability Coverage with the County shall cease on the day of the employee's separation from employment (last day of work) with the County. However, if the employee's income is actively supplemented by short term disability at the time of separation, payment by the carrier shall continue as defined in the Summary Plan Document.

(Section 47 adopted by the County Board 09/11/18; 09/13/2022)

48. Life Insurance

a. Purpose

Attachment: HR Policy Revisions - Chapter 5 Benefits Amended 10-07-25 (9223 : HR Policy Manual Revisions for Employee Benefits – Toni

To provide Life Insurance coverage to eligible employees in accordance with Chapter 40 of the Wisconsin Statutes.

b. Coverage

The County participates in the Wisconsin Public Employers Group Life Insurance Program as provided in Chapter 40 of the Wisconsin Statutes.

The Wisconsin Public Employers Group Life Insurance Program offers basic, supplemental, and additional coverage as well as spouse and dependent coverage for eligible employees through Minnesota Life Insurance.

c. Employee Premium Contribution

Premium contributions are paid by both the County and the employee. The County's contribution is governed by Wis. Stat. § 40.05(6)(e) requiring a contribution toward the total cost of active employees until they reach age 70. All life insurance premium contributions of the employee are paid through payroll deduction on an after-tax basis. All benefit payroll deduction schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details. ~~Life insurance premium contributions of the employee are paid one month in advance and shall be deducted from the employee's first paycheck of each month.~~

d. Eligibility

All employees who are eligible and participate in the Wisconsin Retirement System (WRS) administered by Wisconsin Department of Employee Trust Funds (ETF) shall be eligible to participate in the Wisconsin Public Employers Group Life Insurance, except those employees who have elected to waive said insurance.

e. Enrollment

Enrollment into the Wisconsin Public Employers Group Life Insurance, for new employees or newly eligible employees due to status change, typically occurs during the first week of employment or first week of the status change during the employee orientation meeting with the Human Resources Division. Eligibility and enrollment is subject to the provisions outlined by WRS. Enrollment at any time other than during initial eligibility shall be subject to evidence of insurability.

f. Effective Date

The life insurance policy offered in connection with the WRS becomes effective on the first day of the month following thirty (30) days of employment with the County. All effective dates are subject to verification by the WRS.

g. Waiver or Cancellation

Any employee may elect to decline or cancel life insurance coverage by signing a waiver form provided by the Human Resources Division.

Attachment: HR Policy Revisions - Chapter 5 Benefits Amended 10-07-25 (9223 : HR Policy Manual Revisions for Employee Benefits – Toni

Waiver or cancellation shall be effective as defined in the ETF Insurance Manual.

h. Status Changes

It shall be the employee's responsibility to notify the Human Resources Division of any change in status that may result in a Life Insurance change through Minnesota Life Insurance. This shall include, but not be limited to, adding or deleting dependents. Such notification shall be provided by the employee to the Human Resources Division within thirty (30) days of the event. Failure to timely notify the Human Resources Division of a status change and complete necessary documents may result in loss of eligibility for coverage. The Employee Change form is located on the Employee Portal. Evidence of insurability may be required.

i. Coverage during FMLA or other Leave

Refer to *Continuation of Other Benefits* section as identified under FMLA, Non-Medical Leave, Personal Leave, Military Leave, and Workers' Compensation Leave policies.

j. Separation

Upon separation from employment with the County, a continuation or conversion privilege option may be available. If the employee chooses not to continue or convert the policy, then coverage with the County shall cease on the last day of the month in which the employee's separation from employment (last day of work) with the County occurs.

(Section 48 adopted by the County Board 09/11/18)

49. Supplemental Life Insurance

a. Purpose

To provide Supplemental Life Insurance coverage to eligible employees.

b. Coverage

The design and selection, including all level of benefits provided to participants under the County-sponsored Supplemental Life Insurance Plan and insurance carrier shall be determined solely by the County.

The Supplemental Life Insurance Program offers ~~$20,000 of~~ supplemental coverage for eligible general municipal employees. Refer to the Certificate of Insurance for complete details, including limitations and exclusions.

c. Employee Premium Contribution

All premium contributions are paid by the employee. All employee Supplemental Life Insurance premiums are paid through payroll deduction on an after-~~-~~tax basis. All benefit payroll deduction schedules are at the discretion of the County and shall be determined by the County Administrator after consulting with the Human Resources and Finance Director (or designee). Some benefit deductions will be deducted one month in advance of the coverage, and others will occur during the month of coverage. Refer to the Employee Portal for details. ~~Supplemental Life Insurance premiums are paid during the month of coverage (unlike dental and vision insurance)~~

Attachment: HR Policy Revisions - Chapter 5 Benefits Amended 10-07-25 (9223 : HR Policy Manual Revisions for Employee Benefits – Toni

~~which are paid one month in advance and shall be deducted from the first paycheck of each month.~~

d. Eligibility

All full time and part time status county general municipal employees who work 1,040 hours or greater each year shall be eligible to participate in the Supplemental Life Insurance Program.

d. Enrollment

Enrollment into the Supplemental Life Insurance for new employees or newly eligible employees due to status change, typically occurs during the first week of employment or first week of the status change during the employee orientation meeting with the Human Resources Division. Enrollment at any other time, other than during initial eligibility, shall be subject to evidence of insurability.

f. Effective Date

The effective date of coverage under the Supplemental Life Insurance policy shall be on the first day of the month following thirty (30) days of employment with the County or the first of the month following approval of evidence of insurability. The effective date applies to new hires and employees with a status change (as defined in Chapter 2, Section 1j) resulting in new eligibility.

g. Waiver or Cancellation

Any employee may elect to decline or cancel Supplemental Life Insurance coverage by signing a waiver form provided by the Human Resources Division.

A waiver shall be effective upon receipt by the Human Resources Division or, in the case of cancellation, on the first day of the month the date that premiums are paid through.

h. Benefit Reduction Due to Age

Reductions to the life insurance benefit could change due to age, starting at age 65.

i. Coverage during FMLA or other Leave

Refer to *Continuation of Other Benefits* section as identified under FMLA, Non-Medical Leave, Personal Leave, Military Leave, and Workers' Compensation Leave policies.

j. Separation

Upon separation from employment, a conversion privilege option may be available. If the employee chooses not to convert the policy, then coverage with the County shall cease on the day of the employee's separation from employment (last day of work) with the County.

(Section 49 adopted by the County Board 09/11/18; 09/13/2022)

Attachment: HR Policy Revisions - Chapter 5 Benefits Amended 10-07-25 (9223 : HR Policy Manual Revisions for Employee Benefits – Toni

Department of Administration
Human Resources Division

September 16, 2025

TO: Executive Committee and County Board

FROM: Toni Hohlfelder

RE: HIPAA related policy updates

The following policies have minor updates related to Chippewa County being a Business Associate as the lead county for the Recovery and Wellness Consortium (RWC). At the time the policies were brought forward to the County Board, the consultant was not aware that Chippewa County was a Business Associate.

- Business Associate Policy
- Incidents Policy
- HIPAA Applicability and Organizational Requirements

The IT Policy was also updated due to being a Business Associate. In addition, Andy Bauer is making several policy recommendations located on page 18 of the IT Policy Manual related to Microsoft Teams and virtual meeting platforms.

Toni M. Hohlfelder, SHRM-CP, PHR

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Chippewa Falls, WI 54729
HumanResources@chippewacountywi.gov
Ph: (715) 726-7969
Fx: (715) 726-4585

Attachment: HR Memo re HIPAA policies 07-21-2025 (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

* PROPOSED REVISIONS *
BUSINESS ASSOCIATE POLICY

Purpose

To establish guidelines for Chippewa County (herein County) to identify vendor/business relationships which meet the HIPAA definition of a Business Associate and Subcontractor, provide direction in establishing formalized Business Associate Agreements (BAAs), and meet the requirements of the relationship between County and its Business Associates (BAs) and organizations for whom County is their BA.

Responsible for Implementation

The Chippewa County Corporation Counsel, Privacy Officer, Security Officer, and Department Heads are responsible for implementing and overseeing this policy and procedures.

Policy

It is the policy of County to implement the required BA contract procedures and ensure documentation to establish satisfactory assurance of compliance with the HIPAA Privacy and Security Rules. It is the policy to have BAAs in place with BAs which establish appropriate safeguards for them to have in place for Protected Health Information (PHI) and Electronic Protected Health Information (ePHI).

Procedures

1. As indicated in the Vendor / Contractor Services section of the Information Privacy and Security policy, contact Corporation Counsel to assess whether a BAA is needed before entering into any agreement, contract, or other business relationship with any vendor or contractor, and before using, disclosing, or allowing them to create, receive, maintain, or transmit PHI or ePHI.

2. Corporation Counsel assesses whether a BAA is required, based on the:

    a. HIPAA definition of a BA

    b. The BA criteria provided in the BA definition in this policy

    c. Examples of Business Associates and Subcontractors Arrangements detailed later in the policy under Examples

    d. Examples of arrangements that are not Business Associates Relationships detailed later in the policy under Examples

3. When it has been determined that a BA arrangement exists with a vendor or contractor and/or Covered Entity, Corporation Counsel or the Department Head or their designee shall facilitate getting a signed BAA document.

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

a. A BAA signed by Corporation Counsel or the Department Head or their designee shall be obtained before allowing the BA or County to acquire, access, use, or disclose protected health information or electronic protected health information (ePHI)

b. Every attempt possible should be made to utilize County's BAA template

c. If a vendor or contractor relationship requiring a BAA is in the process of contract negotiation and development, the provisions of the BAA may be incorporated into the contract, or provided as a separate document

d. The following information shall be entered into County's BAA template, before providing it to the vendor or contractor:

1. Permitted uses and disclosures of PHI as applicable to the arrangement, if different than those stated in the BAA template.

2. Limitations on the use and disclosure of PHI as applicable to the arrangement, if different than those stated in the BAA template.

3. The name and address of the BA, as well as the name of the individual that will sign it.

4. When County hires or contracts with an individual or organization, the BAA with that BA includes the same (or more stringent, as applicable) restrictions and conditions as in the BAA with the originating organization

e~~5~~. County does not have nor need any procedures to meet any governmental BA requirements.

4. Negotiating and/or signing of a different organization's BAA.

a. Examples of negotiating and/or signing a different organization's BAA:

1. The County may serve as a BA to another organization and may be asked to review and sign that organization's BAA.

2. A vendor or contractor may request changes be made to County's BAA.

3. After several attempts, a vendor or contractor may refuse to sign the County's BAA and require the County to sign their BAA.

b. In these situations, Corporation Counsel reviews the submitted BAA to ensure that the provisions outlined are consistent with those set forth in this policy as well as the County's BAA template, and contains all the required Privacy and Security Rule BA contract provisions. If the BAA is not consistent with this policy, the County's BAA, and/or contains additional provisions or provisions that are inconsistent with the regulations, Corporation Counsel may proceed with the following alternatives:

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

1. Agree to the additional or different provisions and sign the BAA, if the inconsistencies are legal and acceptable.

2. Refuse to agree to the provisions and work with the other organization to establish a resolution.

5. When the provisions of the County's BAA change (due to legal or organizational changes), Corporation Counsel, the Department Head or their designee shall facilitate getting either a new BAA or BAA Addendum signed by all of the County's BAs/Subcontractors.

6. The County does not have a statutory obligation to continuously monitor the activities of its BAs. The IT Division or Security Officer, however, facilitates the following:

a. Before entering into any agreement, contract, or other business relationship with any vendor or contractor, and before disclosing and allowing them to create, receive, maintain, or transmit Confidential Information refer to the Service Provider policy for additional steps to take.

b. Respond to reported privacy and security violations and breaches of unsecured PHI reported by the BA.

1. Works with the BA to take reasonable steps to cure any potential violation or end the violation.

2. Requests the BA provide information as to how and why the violation happened, all breach notification elements (as required in the Incidents Policy), measures they are taking to cure the violation and prevent it from reoccurring, and verification that appropriate disciplinary actions were provided to the violating party(s).

3. If the County knows of a pattern of activity or practice of a BA that constituted a material breach or violation of the BA's obligation under the BAA and steps taken to cure the cure the breach or end the violation were unsuccessful, terminates the BAA, whenever feasible. If not feasible, documents the reasons it is not feasible to terminate the BAA.

c. If any County workforce member becomes aware of a potential problem with the BAA, notify the Privacy Officer and/or Security Officer.

1. The Privacy Officer and/or Security Officer or designee notifies any other County workforce who may be able to assist with the situation, and takes reasonable steps to correct the problem.

2. The Privacy Officer and/or Security Officer or designee contacts the BA as soon as possible after discovering the potential infraction to address the issue. Depending on the terms of the BAA with the BA, the County will assess the options for termination or allowing a cure period.

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

7. When the County serves as a BA to another organization and when providing services for that organization which involves the access, acquisition, use, or disclosure of PHI and/or ePHI:

a. The Department Head or designee shall educate applicable Workforce on what services may be provided, as described in the BAA.

b. Workforce shall follow the applicable Privacy, Security and Breach Notification Rule provisions, as well as the requirements of that organization's BAA. At minimum, Workforce shall:

1. Follow County's privacy and security policies, unless the BAA includes more stringent requirements workforce are required to follow.

2. Access, use, disclose, and request the minimum necessary PHI for assigned job responsibilities only as permitted or required by the BAA or required by law.

3. Report privacy and security incidents and breaches of confidentiality as outlined in the Incidents (Privacy & Security Incident Response, Breach Notifications, and Corrective or Disciplinary Actions) policy.

4. Provide clients, consumers, and their legal personal representatives access to the Designated Record Set (legal health record), as outlined in BAAs (including the ability to provide an electronic copy).

5. Provide Covered Entities with access to ePHI as outlined in BAAs and service level agreements.

6. Make PHI available for amendment and incorporate any amendments to PHI as requested by patients (and their legal personal representatives) and Covered Entities, as outlined in BAAs, as well as make changes to PHI as requested by Covered Entities as outlined in BAAs.

7. Document the date, name and address of the recipient, description of the PHI disclosed, purpose of the disclosure. This is to assist a Covered Entity in providing an accounting of disclosures to clients and consumers (and their legal personal representatives). The Department Head or designee shall facilitate providing accounting of disclosures to the Covered Entity / Individual as outlined in BAAs.

c. The Privacy Officer and/or Security Officer shall facilitate releases to the Secretary, as required by HIPAA to investigate or determine compliance with HIPAA.

d. Corporation Counsel, the Department Head or their designee shall facilitate the return (or destruction) of PHI to the Covered Entity at termination of the contract. If this is not feasible, notify the Covered Entity and continue to protect the PHI and limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible.

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

~~The County is not a BA of another organization; therefore, it is does not have nor need any procedures to follow any other organization's BAA.~~

8. BAAs are effective for the length of the relationship between the BA and the County or County and the Covered Entity, unless otherwise terminated under the provisions outlined in the BAA.

9. When a BA contract terminates, Corporation Counsel, the Department Head or their designee shall request the BA to return, destroy, dispose or sanitize all PHI and/or ePHI, according to the Disposal of Confidential Information Policy.

    a. If the BA / Covered Entity destroys, disposes or sanitizes the PHI and/or ePHI, obtain written notification from the BA / Covered Entity this was done.

    b. If returning, destroying, disposing or sanitizing is not feasible, request the BA / Covered Entity to provide written notification that they agree to limit the use and disclosure of the information and documentation of the reason that is preventing the PHI and/or ePHI's return, destruction, disposal or sanitization.

10. Corporation Counsel, the Department Head or their designee shall maintain the following BAA documentation for a period of six years beyond the date of when the BAA relationship is terminated:

    a. Copy of the fully executed (signed) BAA in a place where it can be easily retrieved

    b. Name of the BAA / Covered Entity

    c. Term of the contract

    d. Any additional notes, such as negotiations, as appropriate

Reporting and Compliance

Refer to the Privacy and Security Oversight policy for requirements to reporting suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

Examples

EXAMPLES OF BUSINESS ASSOCIATES AND SUBCONTRACTOR ARRANGEMENTS INVOLVING PHI THAT REQUIRE A BUSINESS ASSOCIATE AGREEMENTS OR CONTRACT PROVISIONS	
Accrediting/Licensing Agencies (JCAHO) Accounting Consultants/Vendors Actuarial Consultants/Vendors Administrative Services Agents/Contractors Accessing PHI (Consultants) Application Service Providers (i.e., prescription mgmt.) Attorneys/Legal Counsel Auditors Backup service provider Benchmarking Organizations Benefit Management Organizations Billing Claims Processing or Administration / Clearinghouse Agency Contracts Cloud hosting vendor Coding Vendor Contracts Collection Agency Contracts Computer Hardware Contracts Computer Software Contracts Consultants/Consulting Firms Data Aggregation Data Analysis, Processing, or Administration Consultants/Vendors Data Storage Company Data Transmission Services that requires routine access to PHI Data Warehouse Contracts E-prescribing Gateway Emergency Physician Services Contracts Financial Services Health Information Organization (HIO) Hospitalist Contracts Insurance Contracts (Coverage for Risk, Malpractice, etc.) Interpreter Services Contracts IT/IS Vendors Legal Services Contracts Management Medical Staff Credentialing Software Contracts Microfilming Vendor Contracts Optical Disc Conversion Contracts	Pathology Services Contracts Paper Recycling Contracts Patient Safety Activities listed at 42 CFR 3.20 Patient Satisfaction Survey Contracts Payer-Provider Contracts (Provider for Health Plan) Personal Health Record Vendor (provided on behalf of the Organization to individuals) Physician Billing Services Physician Contracts Practice Management Consultants/Vendors Professional Services Contracts Quality Assurance Consultants/Vendors Radiology Services Contracts Record Copying Service Vendor Contracts Record Storage Vendors Release of Information Service Vendor Contracts Repair Contractors of Devices Containing PHI (digital copy machines, hardware, etc.) Repricing Researcher (performs a function, activity, or service for a CE that falls within the definition of BA; note that this is a limited scope; as Research is not a business associate service (does not fall under the definition of a business associate) Revenue Enhancement/DRG Optimization Contracts Risk Management Consulting Vendor Contracts Shared Service/Joint Venture Contracts with Other Healthcare Organizations Statement Outsource Vendors Telemedicine Program contracts Third Party Administrators Transcription Vendor Contracts Utilization Review Waste Disposal Contracts (Hauling, Shredding) <u>Health Plan Relationships:</u> Pharmaceutical Benefits Management Contracts Preauthorization Management Contracts Case Management Contracts Third Party Administrator (TPA) Contracts Wellness Promotion Contracts

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

EXAMPLES OF ARRANGEMENTS THAT ARE NOT BUSINESS ASSOCIATE RELATIONSHIPS AND DO NOT REQUIRE BUSINESS ASSOCIATE AGREEMENTS OR CONTRACT PROVISIONS	
Banks Processing Credit Card Payments Blood Bank/Red Cross (Provider) Clinics (Provider Relationships) Courier Services Delivering Specimens Device Manufacturers Require PHI to Produce Pacemakers, hearing aids, glasses, etc. (Treatment) Cleaning/Janitorial Services (if do not handle PHI) DME for Equipment for Treatment Purposes Educational/School Programs (Student Privacy Education Required as Workforce Member) Health Plans Contracting with Network Providers (Covered Entity to Covered Entity) Health Plans for Purposes of Payment Hospitals Housekeeping/Environmental Services (Incidental Exp.) Infusion Provider for Treatment Institutional Review Board Internet Service Providers (ISPs) providing mere data transmission services Law Enforcement Agencies Members of an Affiliated Covered Entity Members of the Organization's Organized Health Care Arrangement (OHCA) Pharmacy (Healthcare Provider/Treatment) Providers (Involved in Care & Treatment of Patient)	Members of the Organization's Workforce Organ Procurement Organizations Nursing Homes (for treatment and payment) Quality Improvement Organization –Agent of CMS (MetaStar) Rental Employee Agencies (if no PHI Shared – Employees Need Privacy Training) Repair Contractors (Maintenance) Researcher Conducting Research Activities Plumbing, Electricity, etc. – (if no PHI involved) School Health Nurses Supply Services Support Services Agreements for Supplies/Tx Purposes Tissue Banks Telecommunications company with occasional, random access to PHI U.S. Post Office and Other Couriers Volunteers (Board Members, Ethics Committee Members, IRB Members, etc.) Note: a CE is not required to have a BAA with a BA's Subcontractor (the BA is required to have a BAA with their Subcontractor)

Applicable Standards/Regulations

- HIPAA Final Omnibus Rule, January 25, 2013
- 45 CFR § 164.308(b)(1-3) HIPAA Security Rule Business Associate Contracts and Other Arrangements
- 45 CFR §164.314(a)(1) HIPAA Security Rule Business Associate Contracts or Other Arrangements
- 45 CFR § 164.314(a)(2)(i) HIPAA Security Rule Business Associate Contracts
- 45 CFR § 164.314(a)(2)(ii) HIPAA Security Rule Other Arrangements
- 45 CFR § 164.314(a)(2)(iii) Business Associate Contracts with Subcontractors
- 45 CFR § 164.502(e)(1) HIPAA Privacy Rule Disclosures to Business Associates
- 45 CFR §164.504(e) HIPAA Privacy Rule Business Associate Contracts

Attachment: 901 - Business Associate Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

* PROPOSED REVISIONS *
INCIDENTS POLICY

Privacy & Security Incident Response, Breach Notifications,
and Corrective or Disciplinary Actions

Purpose

The purpose of this policy is to establish consistent guidelines to effectively identify and handle Privacy Incidents, Security Incidents, corrective or disciplinary actions, and Breach of Unsecured PHI notifications. An incident response process is implemented to:

- Consistently detect, report, respond to and investigate incidents;
- Establish expectations for coordinating incident response across Chippewa County (herein County)
- Minimize loss, destruction, and impact;
- Mitigate the weaknesses that were exploited;
- Restore information system functionality and business continuity as soon as possible;
- Establish incident response communication requirements;
- Identify metrics to measure incident response capability and its effectiveness;
- Provide Breach of Unsecured PHI notifications as required;
- Establish a structured incident documentation process.

Responsible for Implementation

The Privacy Officer and Security Officer are responsible for implementing and overseeing this policy and procedure.

Policy

It is the policy of the County to:

1. Safeguard the confidentiality, integrity, and availability of Protected Health Information (PHI), Electronic Protected Health Information (ePHI), and other restricted as well as sensitive information, collectively "Confidential Information", through an established incident response process.

2. Consistently detect, report, respond to, contain, and correct privacy and security issues.

3. Minimize loss and destruction as well as mitigate other harmful effects, including for a known use or disclosure of PHI in violation of the County's policies and procedures or the HIPAA Privacy and Security Rules; restore information system functionality and business continuity as soon as possible; and make reasonable efforts to try to prevent incidents from reoccurring.

4. Quickly identify a Breach of Unsecured PHI and provide required notifications within the timeframe required by law and applicable Business Associate Agreements in place.

5. Provide consistent corrective or disciplinary action for non-compliance with the Privacy and Security Rules and the County's privacy and security policies and procedures.

Attachment: 904 - Incidents Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

Incident Response Procedure

1. Identification Phase

a. Detection and Reporting

1. Clients, consumers, subscribers and other individuals may report complaints concerning the County's relevant privacy, security, and breach notification policies and procedures or its compliance with such policies and procedures to the Privacy Officer and/or Security Officer.

2. Workforce and other system users are required to report non-compliance with the County's privacy and security policies and procedures in accordance with the Information Privacy and Security Policy.

b. Upon receipt of a privacy or security incident report, the Privacy Officer and/or Security Officer or designee facilitates the following procedures:

1. Notifies and/or involves the County Administrator. Also notifies or involves the Department Head when appropriate and as needed for non-routine and significant incident investigations.

2. If the issue involved a known or suspected Breach of Unsecured PHI, Breach of client, consumer, and/or subscriber confidentiality, also refer to and follow the Breach of Unsecured PHI procedures below.

3. For privacy related reports:

a). If a Workforce member or Business Associate believes in good faith that the County engaged in unlawful conduct or otherwise violates professional or clinical standards, or that the care, services, or conditions provided by the organization endangers one or more client, consumer, subscriber, worker, or the public, he or she may disclose relevant PHI to:

1). A Health Oversight Agency or Public Health Authority authorized by law to investigate or otherwise oversee the relevant conduct or conditions of the County or to an appropriate health care accreditation organization for the purpose of reporting the allegation of failure to meet professional standards or misconduct by the County; or

2). An attorney retained by or on behalf of the Workforce member or Business Associate for the purpose of determining the legal options of the Workforce member or Business Associate with regard to the conduct described in 1.b.3.a.

Attachment: 904 - Incidents Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

b). If a workforce member is a victim of a criminal act, he or she may disclose relevant PHI to a law enforcement official, provided that:

1). The PHI disclosed is about the suspected perpetrator of the criminal act; and

2). The minimum necessary PHI disclosed is limited to:

a. Name and address;

b. Date and place of birth;

c. Social security number;

d. ABO blood type and Rh factor;

e. Type of injury;

f. Date and time of treatment;

g. Date and time of death, if applicable; and/or

h. A description of distinguishing physical characteristics, including height, weight, gender, race, hair and eye color, presence or absence of facial hair (beard or moustache), scars, and tattoos.

4. For privacy and security related reports:

a). Completion of the Incident Identification and Incident Summary sections of the Privacy and Security Incident Report form (SIR form) in a clear and easy to understand way.

b). Facilitate providing a response to clients, consumers, subscribers, and other individuals (as appropriate) that report complaints without unreasonable delay and in no case later than 30 calendar days after receiving the complaint.

c). If the issue involves missing information, a Workstation, or Electronic Media, request the original be returned or destroyed and obtain verification of such and that it has not been copied, or accessed (as appropriate).

d). Collaborate with the County Administrator to determine whether to inform the County's insurance carrier of the issue (e.g. cyber and / or business insurance).

e). If the issue was a Privacy Incident, Precursor, or Indicator:

Attachment: 904 - Incidents Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

1). Resolve the issue and continue to monitor it as needed.

2). Complete the Follow-Up sections of the SIR form as appropriate.

f). If the issue was or is potentially a Security Incident:

1). Keeps the County Administrator apprised of the issue and progress to resolve. Also keeps the Department Head apprised when appropriate and as needed.

2). For non-technical Security Incidents, complete the investigation, implement preventative measures, resolve the Security Incident, and move to the Follow-up Phase below.

3). For technical Security Incidents, move to the Containment Phase below.

2. Containment Phase (Technical): Contain the Security Incident

a. The Security Officer, IT Director, or designee, in collaboration with appropriate Department Heads and appropriate contracted support vendors, facilitates the following, and/or works with vendors to address these items, as applicable:

1. Verifies that a qualified technical security resource is available to assist with efforts.

2. Evaluates the need to use forensic analysis, in consultation with Corporation Counsel.

3. Secures the physical and network perimeter.

a). If a decision is made to remove the system from the network for eradication, containment, and/or investigative purposes, consult with Department Heads.

b). Before the decision to freeze the system is made:

1). Remove volatile data from the system while it is still in its compromised state whenever possible.

2). Physically secure the physical area where the incident occurred.

3). Care should be taken not to alert the intruder to the actions.

c). Remove the network cable from affected system. *Do not reboot or make any changes to the system itself*.

4. Loads a trusted shell.

Attachment: 904 - Incidents Policy PROPOSED REVISIONS 07-16-2025(2) (9183 : HIPAA Policy Revisions - Toni Hohlfelder)

5. Retrieves any volatile data from the affected system.

6. Secures affected user accounts to prevent further unauthorized access.

7. Determines the relative integrity and the appropriateness of backing up the system.

   a). If appropriate, backs up the system.

   b). If appropriate, backs up the system using new media wiped with commercial software.

   c). Before forensics work is done on the backup, make a minimum of two extra binary copies of the backup itself.

      1). The original copy will be used for evidence, and properly stored and handled.

      2). A second backup will be used in forensic analysis by IT Security Representatives.

      3.) The third backup will be available for law enforcement.

   d). Protect backups and log them (refer to the Data Management policy)

8. Changes the password(s) to the affected system(s).

9. Determines whether it is safe to continue operations with the affected system(s).

   a). If it is safe, allows the system to continue to function.

      1). Complete documentation as described below.

      2). Move to the Follow-up Phase.

   b). If it is not safe to allow the system to continue operations, discontinue system(s) operation and move to Eradication Phase.

10. Analyzes the data and determine whether or not to initiate an Alert to organization users.

11. Issue alerts as deemed necessary.

b. The Security Officer and/or IT Director or designee keeps the County Administrator and Department Heads as appropriate, apprised of progress and documents:

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1. All measures taken and communications made, including who completed activities and the start and end times of all efforts on the SIR form in a clear and easy to understand way.

2. As applicable and appropriate to the issue, create an evidence tag for each piece of evidence as outlined on the Chain of Custody Evidence Tag / Tracking Form. This provides evidence gathered during the Security Incident that can be used during prosecution.

c. Continue to the Eradication Phase.

3. Eradication Phase (Technical): Remove the cause, and the resulting security exposures, that are now on the affected system(s).

a. The Security Officer, IT Director, or designee, in collaboration with appropriate Department Heads and appropriate contracted support vendors, facilitates the following, and/or works with vendors to address these items, as applicable:

1. Determines symptoms and cause related to the affected system(s).

2. Strengthens the defenses surrounding the affected system(s), where possible (a risk assessment may be needed). This may include the following:

a). An increase in network perimeter defenses.

b). An increase in system monitoring defenses.

c). Remediate ("fixing") any security issues within the affected system, such as removing unused services/general host hardening techniques, firewall/router changes, vulnerability patches applied, physical access control changes, etc.

3. Conducts a detailed vulnerability assessment to verify all the holes or gaps that can be exploited have been addressed. If additional issues or symptoms are identified, takes appropriate preventative measures to eliminate or minimize potential future compromises.

4. Contacts law enforcement.

b. The Security Officer and/or IT Director or designee keeps the County Administrator and Department Heads as appropriate, of progress and documents all measures taken and communications made, including who completed activities and the start and end times of all efforts on the SIR form in a clear and easy to understand way.

c. Continue to the Recovery Phase.

4. Recovery Phase (Technical): Restore the affected system(s) back to operation after the resulting security exposures, if any, have been corrected.

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a. The Security Officer, IT Director, or designee, in collaboration with appropriate Department Heads and appropriate contracted support vendors determines if the affected system(s) has been changed in any way, and/or works with vendors to address these items, and as applicable:

1. Restores the system(s) to its proper, intended functioning.

a). Once restored, validates that the system functions the way it is intended or functioned in the past. This may require the involvement of the department and/or vendor that owns the affected system(s).

b). If operation of the system(s) had been interrupted (i.e., the system(s) was taken offline or dropped from the network while triaged), restarts the restored and validated system(s) and monitors for proper behavior.

2. If the system had not been changed in any way, but was taken offline (i.e., operations had been interrupted), restarts the system and monitors for proper behavior.

3. Ensures the system is using latest configuration standards.

4. Performs a vulnerability assessment and penetration test using company-approved software and method as described in the System Build / Change Control Policy.

5. Updates system monitoring if necessary to alert to the specific vulnerability or attack in the future.

b. The Security Officer and/or IT Director or designee keeps the County Administrator and Department Heads as appropriate, apprised of progress and documents all measures taken and communications made, including who completed activities and the start and end times of all efforts on the SIR form in a clear and easy to understand way.

c. Client notifications. The Security Officer or designee:

1. Notifies affected organizations when there is a successful unauthorized access, use, disclosure, modification, or destruction of Confidential Information or interference with Confidential Information system operations in an information system.

2. Notifies other customers and/or clients of incidents that resulted in the misuse or potential or known inappropriate access of Confidential Information (e.g. unauthorized access, cyber intruder broke into an information system, lost or stolen unencrypted devices, inappropriate disposal, etc.).

3. Notifications include a general description of the incident and a County contact name, telephone number, email address and mailing address.

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4. Refer to Business Associate Agreements and service level agreements for HIPAA notification requirements with Covered Entities. Also refer to the Breach of Unsecured PHI Procedures below for additional notification requirements.

d. Continue to the Follow-up Phase.

5. Follow-up Phase (Technical and Non-Technical): Review the Privacy Incident or Security Incident Form to look for "lessons learned" and determine whether the incident handling procedures could have been done in a better way.

a. It is recommended all incidents be reviewed shortly after resolution to determine where response could be improved for future issues.

b. The Privacy Officer, Security Officer, or designees shall review the incident documentation and complete the following (as applicable and appropriate):

1. Evaluate the cost and impact of the incident to the organization.

2. Determine what could be improved to prevent a similar incident of occurring in the future (e.g. update policies or procedures, provide additional training or reminders, purchase new technologies, etc.).

3. Complete the Follow-up / Lessons Learned section of the SIR form or create a "lessons learned" document and attach it to the SIR form.

4. Communicate findings to the County Administrator and Department Heads as appropriate.

5. Request approval for any implementation recommendations from the County Administrator as appropriate.

6. Carry out recommendations.

c. Close the incident.

Breach of Unsecured PHI Procedures

1. Discovery of Breach: A Breach of Unsecured PHI is treated as "discovered" as of the first day on which an incident that may have resulted in a Breach is known to the County.

a. County shall be deemed to have knowledge of an incident that may have resulted in a Breach if the incident is known or by exercising reasonable diligence would have been known, to any person, other than the person committing the Breach, who is a workforce member or Agent (e.g. a Business Associate acting as an Agent of the County).

b. If a Business Associate (BA) is not an Agent of the County, then the knowledge of the incident is based on the day and time the BA notifies the County of the Breach.

2. Business Associate (BA) Responsibilities

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a. A BA of the County that Accesses, creates, maintains, retains, modifies, records, stores, transmits, destroys, or otherwise holds, uses, or Discloses Unsecured PHI shall notify County of the Breach [1] without unreasonable delay and in no case later than one week after discovery of a Breach.

b. The notice shall include:

1. The identification of each individual whose Unsecured PHI was, or is reasonably believed by the BA to have been acquired, Accessed, used, or Disclosed in an unauthorized manner.

2. Any other available information that the County is required to include in notification to the individual at the time of the notification or promptly thereafter as information becomes available (refer below).

c. The County, not the BA, will make the notifications described below, unless otherwise agreed upon by the BA and County (note: it is the burden of the County to document this notification).

d. Refer to the Business Associate policy for additional measures to resolve the issue.

3. Breach of Unsecured PHI Investigation: Following the discovery of a potential Breach, the Privacy and/or Security Officer shall begin an investigation (also refer to the Incident Response procedures) and facilitate the completion of the following, while documenting all measures taken:

a. Conducts a Breach of Unsecured PHI incident risk assessment to determine if an impermissible use or Disclosure of PHI constitutes a Breach of unsecured PHI and whether it requires notifications be made to individuals, media, or the HHS secretary.[2] If an incident risk assessment is not completed, the County assumes a Breach of Unsecured PHI occurred and makes recommendations that notifications are made, as outlined below.

1. An "acquisition, Access, use, or Disclosure in a manner not permitted is presumed to be a breach unless, as applicable, it is demonstrated that there is a low probability that the PHI has been compromised based on a risk assessment" of at least the following factors:

a). The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;

b). The unauthorized person who used the protected health information or to the Disclosure was made;

[1] The organization may choose to make the decision to notify clients, consumers, and subscribers of a Breach even after completion of the risk assessment indicates that there is no requirement to do so.
[2] The organization may choose to make the decision to notify clients, consumers, and subscribers of a Breach even after completion of the risk assessment indicates that there is no requirement to do so.

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c). Whether the protected health information was actually acquired or viewed; and

d). The extent to which the risk to the protected health information has been mitigated.

2. Utilize the "Breach Risk Assessment Tool" to complete this assessment. Also refer to the "Privacy and Security Violations Breach Notification Recommendations" Form which includes types of violations and Breach of Unsecured PHI notification recommendations.

3. The incident risk assessment is documented as part of the investigation in the SIR form noting the outcome of the incident risk assessment process.

4. Notifications:

a. Timeliness.

1. Upon determination that a Breach notification is required, the notice shall be made without unreasonable delay and in no case later than 60 calendar days after the discovery of the incident that resulted in a Breach by the County or BA involved that is acting as the County's Agent.

2. Delay of Notification is Authorized for Law Enforcement Purposes. When a Law Enforcement Official informs the County that a notification, notice, or posting would impede a criminal investigation or cause damage to national security:

a). If this statement is in writing and specifies the time for which a delay is required, delay such notification, notice, or posting of the time period specified by the official; or

b). If this statement is made orally, document the statement, including the identity of the Law Enforcement Official making the statement, and delay the notification, notice, or posting temporarily and no longer than 30 days from the date of the oral statement, unless a written statement as described above is submitted during that time.

b. Content of the Notice:

1. The notice shall be written in plain language and contain the following information:

a). A brief description of what happened, including the date of the Breach and the date of the discovery of the Breach, if known.

b). A description of the types of Unsecured PHI involved in the Breach (such as whether full name, Social Security number, date of birth, home address, account number, diagnosis, disability code or other types of information were involved).

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c). Any steps the individual should take to protect themselves from potential harm resulting from the Breach.

d). A brief description of what action(s) the County is taking to investigate the Breach, to mitigate harm to individuals, and to protect against further Breaches.

e). Any procedures for individuals to ask questions or learn additional information, which includes a toll-free telephone number, an e-mail address, Web site, or postal address.

2. County will assess the facts and circumstances of breaches of unsecured PHI on a case by case basis and determine at that time whether there is any need for translation or an alternative format of this notification[3]

c. Methods of Notification: The method of notification used is based on the individuals or entities notified, as follows:

1. Notifications to Individual(s)

a). Written notification by first-class mail to the individual at his or her last known address or, if the individual agrees to electronic notice and such agreement has not been withdrawn, by secure electronic mail.

1). The notification may be provided in one or more mailings as more information becomes available.

2). If the County knows that the individual is deceased and has the address of the next of kin or personal representative of the individual, written notification by first-class mail to the next of kin or person representative.

3). In the limited circumstance that an individual affirmatively chooses not to receive communications from a health care provider at any written addresses or email addresses *and* has agreed only to receive communications orally or by telephone, the provider may telephone the individual to request and have the individual pick up their written breach notice from the provider directly. In cases in which the individual does not agree or wish to travel to the provider to pick up the written breach notice, the health care provider should provide all of the information in the breach notice over the phone to the individual, document that it has done so, and the Department will exercise enforcement discretion in such cases with respect to the ‘‘written notice’’ requirement.

[3] Organizations that receive Medicaid, CHIP or Medicare Part C payments may have obligations under Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990 laws to provide breach notifications to individuals in alternative languages, and in alternative formats, such as Braille, large print, or audio)

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b). Substitute Notice: When there is insufficient or out-of-date contact information (including an address, phone number, email address, etc.) that prevents direct written or electronic notification, a substitute form of notice reasonably calculated to reach the individual is provided. A substitute notice does not need to be provided when there is insufficient or out-of-date contact information that prevents written notification to the individual and next of kin or personal representative.

1). When there is insufficient or out-of-date contact information for fewer than 10 individuals, then the substitute notice may be provided by an alternative form of written notice, telephone, or other means.

2). When there is insufficient or out-of-date contact information for 10 or more individuals, then the substitute notice is in the form of either a conspicuous posting for a period of 90 days on the County's website home page, or a conspicuous notice in a major print or broadcast media in the County's geographic areas where the individuals affected by the Breach likely reside. Include a toll-free number in the notice that remains active for at least 90 days where an individual can learn whether his or her PHI may be included in the Breach. This substitute notice must be provided as soon as reasonably possible and in no case later than 60 calendar days from discovery of the breach.

c). If the notification requires urgency because of possible imminent misuse of Unsecured PHI, notification may be provided by telephone or other means, as appropriate in addition to the methods noted above.

2. Notifications to the Media

a). The Notice is provided in the form of a press release to the media by the individual stated in the above Working with the Media procedures, utilizing the Sample Notification Letter to the Media.

1). What constitutes a prominent media outlet differs depending upon the State or jurisdiction where the County's affected clients, consumers, and/or subscribers reside. For a breach affecting more than 500 individuals across a particular state, a prominent media outlet may be a major, general interest newspaper with a daily circulation throughout the entire state. In contrast, a newspaper serving only one town and distributed on a monthly basis, or a daily newspaper of specialized interest (such as sports or politics) would not be viewed as a prominent media outlet. Where a breach affects more than 500 individuals in a limited jurisdiction, such as a city, then a prominent media outlet may be a major, general-interest newspaper with daily

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circulation throughout the city, even though the newspaper does not serve the whole State.

b). Notifications are provided to prominent media outlets serving the state and regional area (of the breached clients, consumers, subscribers) when the Breach of Unsecured PHI affects more than 500 of the County clients, consumers, subscribers.

c). Client, consumer, subscriber identifiers are not included in these notifications as they are publicly available.

3. Notifications to the Secretary of HHS

a). Client, consumer, and subscriber identifiers are not included in these notifications as the information may be made publicly available.

b). For Breaches involving 500 or more individuals, the County notifies the Secretary of HHS as instructed at www.hhs.gov at the same time notice is made to the individuals.

c). For Breaches involving less than 500 individuals:

1). Submit the notification when sending notifications to individual.

2). Notifications are made here: http://www.hhs.gov/ocr/privacy/hipaa/administrative/breachnotificationrule/brinstruction.html

4. Notifications to Other Organizations:

When the County is the Business Associate of another organization(s) and an incident resulted in a Breach of Unsecured PHI of that organization's PHI:

a). Provide notification to the Covered Entity(s) within the timeframe and to the privacy and/or security contact as required in the signed Business Associate Agreement (BAA).

1). If not specified, provide the notification without unreasonable delay and in no case later than 60 calendar days after the discovery of the Breach by the organization.

2). If an Agent of the other organization, provide the notification within 3 business days, whenever possible.

3). Do not delay initial notification to the other organization in order to collect all information needed for notifications.

b). Include the notification as much information as available at the time of the notification, including but not limited to the following:

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1). A brief description of what happened, including the date of the Breach and the date of the discovery of the Breach, as well as how it happened, if known.

2). Identification of each individual whose Unsecured PHI was, or is reasonably believed to have been acquired, Accessed, used, or Disclosed in an unauthorized manner.

3). A description of the types of Unsecured PHI involved in the Breach (such as whether full name, Social Security number, date of birth, home address, account number, diagnosis, disability code or other types of information were involved).

4). The identity, if known, of any individual who received PHI due to an unauthorized use or disclosure.

5). Any suggested steps the individual should take to protect themselves from potential harm resulting from the Breach.

6). A brief description of what the actions the County is taking to investigate the Breach, to mitigate harm to individuals, and to protect against further Breaches.

7). Contact information for questions and requests for additional information.

8). Any other available information that the other organization is required to include in notification to the individual at the time of the notification or promptly thereafter as information becomes available.

c). The Covered Entity, not the County, is responsible for making the required notifications to Individuals, the media, and the Secretary of HHS.

1). Verify the Covered Entity will provide these required notifications.

2). The Privacy Officer may assist with providing these notifications only if requested by the Covered Entity, or Business Associate for whom the County is a Subcontractor.

~~a). The County is not a business associate of any other organization, and therefore, does not have nor need any procedures to provide notifications to other organizations.~~

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5. Notification Inquiries. Refer to the Talking Points to Respond to Breach of Unsecured PHI Inquiries Form for examples of how to respond to inquiries on Breaches. Tailor responses based on the type and severity of the Breach.

Investigation and Sanction Procedures

Refer to the Information Privacy and Security Policy for Investigation and Sanctions procedures.

Training

1. New Workforce members receive privacy and security training within their first month, but no later than three months, of employment.

2. Existing Workforce members and system users shall be trained annually.

3. Training content shall include:

   a. Privacy and security policies and procedures with respect to PHI and ePHI and other Confidential Information as necessary and appropriate to carry out their job responsibilities and prevent security violations and incidents from happening.

   b. How to identify and promptly report known and suspected Privacy Incidents, security violations and incidents, and Breaches within the County, as well as return or destroy PHI, as appropriate for the incident.

   c. How to assist in investigating, documenting, and resolving incidents and breaches of Unsecured PHI for Workforce who will need to complete these activities

Documentation

1. The Privacy Officer, Security Officer and/or designee maintains all of the following documentation in a secure location for a period of seven (7) years after the conclusion of the investigation:

   a. All documentation of complaints and investigations including all incident response forms, notes, meeting minutes, corrective or disciplinary actions provided, actions taken to prevent future occurrences, and other items relevant to the investigation.

   b. All documentation related to Breach of Unsecured PHI investigations, including the risk assessment and notifications made.

   c. Note: the County has the burden of proof for demonstrating that all notifications were made or that an Access, acquisition, use or Disclosure did not constitute a Breach, as well as evidence demonstrating the necessity of a delay authorized by Law Enforcement (when applicable).

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Filing a client, consumer, subscriber privacy or security–related complaint to the Office for Civil Rights (OCR)

1. Clients, consumers, and subscribers may file complaints to the OCR by:

   a. Mailing the complaint to:

      Centralized Case Management Operations
      U.S. Department of Health and Human Services
      200 Independence Avenue, S.W.
      Room 509F HHH Bldg.
      Washington, D.C. 20201

   b. Using the online Complaint Portal available at http://www.hhs.gov/hipaa/filing-a-complaint/complaint-process/index.html

2. During such investigation, the Security Officer and/or Privacy Officer shall assist the CMS Administrator to resolve the complaint.

Reporting and Compliance

Refer to the Privacy and Security Oversight policy for requirements to reporting suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Resources

- HIPAA COW Security Incident Response Policy, Version 8, 7/11/05
- HIPAA COW Breach Notification – Protected Health Information for Covered Entities Policy, Version 6, 3/5/13
- HIPAA COW Security Oversight Policy/Procedure, Version 2, 4/19/05
- NIST SP 800-61 Revision 2, Computer Security Incident Handling Guide, August 2012
- SANS Sample Incident Handling Forms
- Incident Contact List
- Incident Identification
- Incident Survey
- Incident Containment
- Incident Eradication
- Incident Communication Log

Applicable Standards/Regulations

- HIPAA Final Omnibus Rule, January 25, 2013
- 45 CFR Parts 160 and 164 – HIPAA Privacy and Security Rules

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- 45 CFR § 164.308(a)(1)(i) HIPAA Security Rule Security Management Process
- 45 CFR § 164.308(a)(6)(i) HIPAA Security Rule Security Incident Procedures
- 45 CFR § 164.308(a)(6)(i)(ii) HIPAA Security Rule Response and Reporting
- 45 CFR § 164.308(a)(1)(ii)(C) HIPAA Security Rule – Sanction Policy
- 45 CFR – Subpart D – Notification in the Case of Breach of Unsecured Protected Health Information
- 45 CFR § 164.512(f)(2)(i) HIPAA Privacy Rule Permitted disclosures: Limited information for identification and location purposes
- 45 CFR § 164.502(j) Disclosures by whistleblowers and workforce member crime victims
- 45 CFR § 164.502(j)(1) HIPAA Privacy Rule Disclosures by whistleblowers
- 45 CFR § 164.502(j)(2) HIPAA Privacy Rule Disclosures by workforce members who are victims of a crime
- 45 CFR § 164.530(d)(1) HIPAA Privacy Rule Complaints to the Covered Entity
- 45 CFR § 164.530(d)(2) HIPAA Privacy Rule Documentation of complaints
- 45 CFR § 164.530(e)(1-2) HIPAA Privacy Rule Sanctions and Documentation
- 45 CFR § 164.530(f) HIPAA Privacy Rule Mitigation

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* PROPOSED REVISIONS *
HIPAA APPLICABILITY AND ORGANIZATIONAL REQUIREMENTS

Purpose

Portions of Chippewa County are required to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and modifications made to HIPAA, such as those made under the HIPAA Final Omnibus Rule (January 25, 2013), as well as other applicable privacy, security, and breach notification federal or state laws. The purpose of this policy is to define how, why, and what portions of the organization are required to comply with HIPAA. It also describes related overarching organizational requirements.

Responsible for Implementation

The Privacy Officer and Security Officer are responsible for implementing and overseeing this policy and procedure.

Policy

1. It is the policy of Chippewa County (herein County) to analyze and define how the organization needs to comply with HIPAA as applicable to the organization's general infrastructure/framework.

2. County designates itself as a Hybrid Entity. Although County is responsible for HIPAA oversight, compliance, and enforcement requirements, as applicable, the HIPAA Rules and County's HIPAA privacy, security, and breach notification policies and related procedures apply only to County's designated Health Care Components.

Procedures

1. As defined under HIPAA, Chippewa County is not:

   a. A Health Care Clearinghouse

   b. ~~A Business Associate and/or Subcontractor~~

   ~~c~~b. A part of an Affiliated Covered Entity

   c~~d~~. Participating in an Organized Health Care Arrangement (OHCA).

2. As defined under HIPAA, Chippewa County is a Business Associate and a Hybrid Entity.

   a. The County has designated certain components as Health Care Components, as defined by HIPAA, based on the following factors:

      1. The Health Care Component would meet the definition of a Covered Entity if it were a separate legal entity.

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2. The Health Care Component would meet the definition of a Business Associate if it was a separate legal entity.

3. Services performed are Covered Functions.

b. Health Care Components:

1. The following Health Care Components meet the definition of a Health Care Provider type of Covered Entity as defined under HIPAA:

a). Department of Human Services and Public Health Department when providing clinical services that are electronically billed to a payor such as Medicare and Medicaid as a HIPAA health care claim or transmit any other Protected Health Information (PHI) in electronic form in connection with another HIPAA transaction.

b). Examples of these services provided by the Department of Human Services and Public Health Department may include: crisis intervention, medication management, psychiatric services, vaccinations, tuberculosis case management, lead visits, prenatal care coordination, reproductive health visits, etc.

2. The County Health Plan(s) also meets the definition of a Health Care Component, in its capacity of providing a self-insured health plan (a Group Health Plan) to its employees.

3. Due to the support services provided by the following roles to County's Health Care Component(s) listed above, they are also considered a part of the County Health Care Components:

a). Security Officer;

b). Privacy Officer;

c). Corporation Counsel Division;

d). Human Resources Division;

e). Information Technology Division;

f). Facilities & Parks Division;

g). Finance Division;

h). County Administrator; and

i). County Clerk.

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c. Non-Health Care Components of the County include:

1. Aging and Disability Resource Center (ADRC) Division;
2. Child Support Department;
3. Clerk of Courts;
4. Coroner;
5. Criminal Justice Services Division;
6. District Attorney's Office;
7. Department of Administration (except as specified above);
8. Economic Support Division;
9. Emergency Management Department;
10. Highway Department;
11. Land Conservation and Forest Management Department;
12. Planning and Zoning Department;
13. Public Health nursing services that are funded by tax levy, and grant dollars such as CDC and DHS funding [as defined by WI State Statute(s) (e.g. 95, 250, 251, 252, 253, 254, and 255) and DHS Administrative Code(s) (e.g. 139, 140, 142, 144, 145, and 146)], and no HIPAA transactions are transmitted. Examples may include food safety and recreational licensing, human health hazards, communicable disease, chronic disease prevention, injury prevention, etc.
14. Register in Probate;
15. Register of Deeds;
16. Sheriff;
17. Treasurer;
18. UW Extension Department; and
19. Veterans Department.

3. As defined under Wisconsin Chapter 146 (146.81), Chippewa County is also a health care provider when providing Public Health nursing services:

a. When transmitting any health information in electronic form in connection with a HIPAA transaction, County is a HIPAA defined Health Care Provider as indicated above.

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b. When no health information is transmitted in electronic form in connection with a HIPAA transaction (i.e. non-HIPAA Public Health nursing services), County:

1. Does not implement all of the HIPAA privacy, security, and breach notification policies, procedures, forms, or training program.

2. Follows Wisconsin Chapter 146 and other healthcare and public health related Wisconsin statutes.

4. For purposes of HIPAA privacy and security policies and procedures the above stated Health Care Components and Public Health nursing services are identified as "County," unless otherwise delineated.

5. Health Care Component(s) / Public Health nursing services / County in its capacity as a Business Associate of another Covered Entity shall not Disclose Protected Health Information (PHI) to a non-Health Care Component of the organization (treat the non-Health Care Component as a separate and distinct legal entity).

6. Health Care Components / Public Health nursing services / County in its capacity as a Business Associate of another Covered Entity shall protect electronic Protected Health Information (ePHI) and treat the non-Health Care Component as a separate and distinct legal entity.

7. If a Workforce Member performs duties for a Health Care Component / Public Health nursing services / County in its capacity as a Business Associate of another Covered Entity and non-Health Care Component of the organization, the Workforce Member shall not Use or Disclose PHI created or received in the course of or incident to the Workforce Member's work for the non-Health Care Component unless allowed by law.

8. Chippewa County shall create privacy and security policies and procedures and implements safeguards for the Health Care Components / Public Health nursing services / County in its capacity as a Business Associate of another Covered Entity to follow.

9. In an effort to achieve compliance with HIPAA regulations, Chippewa County has privacy, security, and breach notification policies, procedures, forms, and a training program in place. Chippewa County:

a. Performs multiple covered "functions" as defined under HIPAA (e.g. is a Health Plan, ~~and~~ Health Care Provider and Business Associate). The policies, procedures, forms, and training program are tailored as appropriate to comply with HIPAA as applicable to each "function" of the organization.

b. Does not maintain a facility directory, as defined under HIPAA and, therefore, is not required to have procedures in place for the facility directory provisions.

c. Does not sell PHI, as defined under HIPAA and, therefore, is not required to have procedures in place for the Sale of PHI provisions.

d. Does not use and disclosure PHI for marketing purposes as defined under HIPAA and,

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therefore, is not required to have procedures in place for the marketing of PHI provisions.

e. Does not use or disclose PHI for fundraising purposes (for its own or any other Covered Entity's benefit) as defined under HIPAA and, therefore, is not required to have procedures in place for fundraising communication provisions.

f. Does not de-identify PHI or Use or Disclose de-identified PHI, as defined under HIPAA and, therefore, is not required to have procedures in place for the Use or disclosure of de-identified PHI provisions.

g. Does not Use PHI to create a Limited Data Set and/or does not use and disclose Limited Data Sets, as defined under HIPAA and, therefore, is not required to have procedures in place for the use or disclosure of Limited Data Set provisions.

h. Does not Use or Disclose PHI for research purposes as defined under HIPAA and, therefore, is not required to have procedures in place for the research of PHI provisions.

i. Is not a Health Care Clearinghouse, and therefore, does not have nor need any Health Care Clearinghouse procedures.

10. As a Business Associate, the County shall:

a. Follow policies and procedures provided to County Workforce by that organization, to the extent appropriate for services provided to an organization.

b. Forward requests for access and amend a Designated Record Set, restrictions, confidential communications, and accounting of disclosures to the applicable Covered Entity who owns the information subject to the request, unless is it the contractual responsibility of the County to facilitate.

Reporting and Compliance

Refer to the Information Privacy and Security policy for requirements to report suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Resources

Entities Covered by the HIPAA Privacy Rule presentation, US Department of Health & Human Services, 2003: http://www.hhs.gov/ocr/privacy/hipaa/understanding/training/coveredentities.pdf

Applicable Standards/Regulations

- HIPAA Final Omnibus Rule, January 25, 2013
- 45 CFR § 160.102 Applicability

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- 45 CFR § 160.103 Definitions
- 45 CFR § 164.104 HIPAA Privacy Rule Applicability
- 45 CFR § 164.105 HIPAA Privacy Rule Organizational requirements
- 45 CFR § 164.105(a) HIPAA Privacy Rule Health Care Component
- 45 CFR § 164.105(b) HIPAA Privacy Rule Affiliated Covered Entities
- 45 CFR § 164.105(c) HIPAA Privacy Rule Standard: Documentation
- 45 CFR § 164.106 HIPAA Privacy Rule Relationship to other parts
- 45 CFR §164.308(a)(4)(ii)(A) HIPAA Security Rule Isolating Healthcare Clearinghouse Function
- 45 CFR § 164.500 Applicability
- 45 CFR §164.502(a)(5)(i) Use and disclosure of genetic information for underwriting purposes
- 45 CFR §164.502(a)(5)(ii) Sale of PHI
- 45 CFR §164.502(d) Uses and disclosures of de-identified PHI
- 45 CFR §164.504(f) Requirements for group health plans
- 45 CFR §164.504(g) Requirements for a covered entity with multiple covered functions
- 45 CFR §164.508(a)(3) Uses and disclosures for with an authorization is required – Authorization required: marketing
- 45 CFR § 164.510(a) Use and disclosure for facility directories
- 45 CFR §164.514(a) De-identification of PHI and §164.514(c) Re-identification
- 45 CFR §164.514(e) Limited data set
- 45 CFR §164.514(f) Fundraising communications
- 45 CFR §164.514(h) Verification requirements
- Wis. Stat. §146 Miscellaneous Health Provisions, 1/1/15
- Wis. Stat. §51.30 Mental Health Act, 1/1/15
- WI Stat. §95 Animal Health
- WI Stat. §250 Health; Administration and Supervision
- WI Stat. §251 Local Health Officials
- WI Stat. §252 Communicable Diseases
- WI Stat. §253 Maternal and Child Health
- WI Stat. §254 Environmental Health
- WI Stat. §255 Chronic Disease and Injuries
- DHS Administrative Code 139 Qualifications of Local Health Professionals Employed by Local Health Departments
- DHS Administrative Code 140 Required Services of Local Health Departments
- DHS Administrative Code 142 Access to Vital Records
- DHS Administrative Code 144 Immunization of Students
- DHS Administrative Code 145 Control of Communicable Diseases
- DHS Administrative Code 146 Vaccine-Preventable Diseases

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*** PROPOSED REVISIONS ***

Chippewa County
Department of Administration
Information Technology Division

Information Technology Policy Manual

County Board History/Action
Adopted by the County Board December 10, 2019
Revised and Approved by the County Board 11/08/2022, 01/09/2024

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1. Information Privacy and Security Policy

Purpose

The purpose of this policy is to maintain the Confidentiality, Integrity, and Availability of all Protected Health Information (PHI), Electronic Protected Health Information (ePHI), restricted information and sensitive information (collectively Confidential Information) the organization creates, receives, maintains, and/or transmits. The purpose of this policy is to also have in place appropriate development, implementation, and oversight of the organization's efforts toward compliance with the HIPAA Privacy, Security, and Breach Notification Rules and continuously monitor privacy and security policies, procedures, and existing measures, and update them as needed to better protect Confidential Information.

Responsible for Implementation

The Privacy Officer, Security Officer, and Information Technology Director are responsible for implementing and overseeing this policy and procedure.

Definitions

The HIPAA Privacy and Security terms utilized in this policy are capitalized throughout the document. The definitions of those terms are located in a document titled HIPAA Privacy and Security Definitions found on the Employee Portal and maintained by the Privacy and Security Officers.

Policy

1. Supervision of Workforce and other information users

   It is the responsibility of all Department Heads, directors, elected officials, managers, supervisors, Privacy Officer, and Security Officer to supervise Workforce members and any other users of the organization's Confidential Information, systems, applications, servers, workstations, etc. Their responsibilities include, but are not limited to the following:

   a. Take all reasonable steps to make sure Workforce members and other users follow the organization's privacy and security policies and procedures and report non-compliance.

   b. Report non-compliance.

   c. Participate in incident investigations, as needed.

   d. Ensuring access to Confidential Information is the Minimum Necessary to complete job responsibilities.

   e. Request and provide only appropriate role-based, Minimum Necessary access to Confidential Information.

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f. Monitor Workstations, systems, applications, and facilities for unauthorized use, tampering, and theft.

g. Employing measures to prevent the unproductive, inappropriate, or harmful use of information assets or systems.

2. Reporting and Compliance

a. All Workforce members and other users are required to report non-compliance of the organization's privacy and security policies and procedures to the Privacy Officer or Security Officer (refer to the Incidents policy).

b. Workforce members have the responsibility of assuring the privacy and security of Confidential Information.

c. Individuals that exercise their rights and/or report violations may not be subjected to intimidation, threats, coercion, harassment, discrimination against, or any other retaliatory action as a consequence.

d. Violation of any privacy and/or security policy, procedure, standard, law and/or regulation:

1. By Workforce members may result in disciplinary action, up to and including termination of employment.

2. By others, including Business Associates and partners may result in termination of the relationship and/or associated privileges.

3. Violation may also result in civil and criminal penalties as determined by federal and state laws and regulations. Personal legal liability continues after employment or a business relationship ceases with the County.

e. The County reserves the right to notify law enforcement authorities of any unlawful activity and to cooperate in any investigation of such activity.

f. The County does not consider conduct in violation of this and/or any other privacy and security policies and procedures to be within a Workforce member's, Business Associates', or partner's course and scope of employment or partnership, or the direct consequence of the discharge of the employee's or partner's duties. Accordingly, to the extent permitted by law, the County reserves the right not to defend or pay any damages awarded against employees or partners that result from violation of this policy.

g. If a Workforce member, Business Associate, or partner believes he or she has been requested to undertake an activity which he or she believes is in violation of this and/or any other privacy and/or security policy and procedures, he or she must provide a written or verbal complaint to the Privacy Officer or Security Officer or any Department Head as soon as possible.

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3. Privacy and Security Incident Response

a. Detection and Reporting

1. Clients, consumers, subscribers, and other individuals may report complaints concerning the County's patient privacy, security, and breach notification policies and procedures or its compliance with such policies and procedures to the Privacy Officer and/or Security Officer.

2. Workforce, other system users, and Business Associates are required to report non-compliance of the organization's privacy and security policies and procedures to the Privacy Officer and/or Security Officer through an internal email or direct phone call.

3. Immediately upon observation of suspected and known privacy and security violations, Precursors, Indicators, Security Incidents, Privacy Incidents, and Breaches:

a). Workforce members, system users, Business Associates, and other Vendors are required to report them to the Privacy Officer and/or Security Officer through an internal email or direct phone call.

b). In the absence of the Privacy Officer and/or Security Officer, or in the event of the Privacy Officer and/or Security Officer involvement report the incident directly to a Department Head.

b. Investigation and Sanctions

1. Individuals that report privacy and security issues, complaints, breaches, and violations in good faith, or testifies or participates in an investigation, compliance review, proceeding, or hearing may not be subjected to intimidation, threats, coercion, harassment, discrimination against, or any other retaliatory action as a consequence. This includes reports made to the County and/or appropriate regulating bodies.

The County may not require individuals to waive their legal rights to complain as a condition of the provision of treatment, payment, enrollment in a health plan, or eligibility for benefits.

2. The Privacy Officer and/or Security Officer or designee promptly facilitates a thorough investigation of all reported privacy and security violations and incidents, including Breaches, and documents the investigation actions taken. Facts concerning the breakdown in job performance or lack of adherence to established work rules are obtained and considered.

Investigation assistance may be requested from Workforce and other system users.

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All individuals are required to cooperate with the investigation process and provide factual information.

Internal as well as federal and state investigations and disciplinary proceedings: All Workforce are required to cooperate with the investigation process and provide factual information. Workforce may not interfere with investigations or disciplinary proceedings by willful misrepresentation or omission of facts or by the use of threats or harassment against any person. Whether it was intentional or non-intentional, individuals suspected of non-compliance of the Privacy Rule, Security Rule, and/or the organization's privacy and security policies and procedures are provided the opportunity to explain their actions.

Care shall be taken to ensure that the results of investigations are disclosed only to a Department Head and other leaders involved in any investigation and that information which may further expose organizational risk is shared with extreme caution.

Breach risk assessments and notifications are facilitated by the Privacy and/or Security Officer.

3. Individuals being investigated are not informed that they are being investigated until evidence is provided that indicates a privacy or security policy has been violated, unless it is necessary to inform them in order to make this determination.

c. Sanctions

1. Fair, impartial, and consistent levels of sanctions, such as disciplinary action, are provided based on the type and magnitude of harm that resulted in the violation, prior performance reviews and non-compliance, previous education provided, relevant legislations, as well as whether it was intentional or non-intentional by the Human Resources Director.

a). Sanctions provided are intended to correct behavior, re-instill the incentive for self-corrective action, and preserve the discipline of the entire department or organization.

b). Sanctions may be provided to Workforce and vendors, contractors, and other service providers.

2. Refer to Chapter 6 (Employee Conduct) of the HR Policy Manual for examples of sanctions that may be provided.

4. Facility Access Controls

a. Workforce members must approach individuals in Restricted Areas that are not being escorted by a Workforce member by stating, "May I help you?", unless they feel

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unsafe to do so. Keep in mind the individual may be a consumer, client, subscriber, Vendor, or intern.

1. Escort violators of this policy and procedure out of Restricted Areas immediately and escort them to the area in which they are trying to go.

2. If Workforce members feel unsafe to approach the individual, they are required to immediately report the situation to the Department Head or Supervisor.

b. All Workforce members are responsible for reporting a potential or known incident of unauthorized visitor, unauthorized access to the organization's facility(s) and/or areas containing information systems that create, receive, maintain, and/or transmit Confidential Information and/or physical security access control issues or incidents as described in the Privacy and Security Incident Response procedures.

c. Securing Confidential Information within the facilities.

1. Confidential Information may not be left unattended in Unrestricted Areas.

2. Erase whiteboards containing Confidential Information before leaving Unrestricted Areas.

3. Client, consumer, and subscriber photographs, letters, cards, may not be visible at any time.

4. Hard copy (e.g. printed) documents containing Confidential Information in Restricted Areas:

a). Are turned over, covered up, or put away when unattended during working hours so they cannot be viewed by a passerby (including other co-workers)

b). May not be stored in unlocked or in unsecure containers or open workspaces when unattended.

c). Are removed from printers and copiers and secured after being printed.

d). Are removed from fax machines and distributed to the appropriate recipients several times throughout the day.

5. At the conclusion of the workday Workforce shall ensure that their workspace is clear of all client, consumer, subscriber, and other identifying information (this includes names, telephone numbers, etc., both personal and professional). This also includes client files, notes, post-its, etc. Files shall be placed in the record file room or a file cabinet or desk drawer in the Workforce member's workspace area. Workforce shall close and lock suite

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doors that provide access to Restricted Areas. Workforce are highly encouraged to close and lock office doors.

6. Medical record file rooms are locked when unattended, except when being used during the day.

   a). Access is limited to the minimum necessary Workforce.

   b). Maintain Treatment Facilities records in a secure manner to prevent unauthorized access (note: this is required for Treatment Facilities (treatment of Alcoholic, Drug Dependent, Mentally Ill or Developmentally Disabled persons) under WI DHS 92.03(1)(k).

   c). Maintain records of patients diagnosed or received treatment for alcohol or drug abuse at a federally assisted program in secure rooms, locked file cabinets, a safe or other similar container when not in use (note: this is required by 42 CFR part 2, 2.16).

   d). Once a client record is closed, the file shall be returned and maintained in the designated file room.

d. Individuals issued with facility keys, ID badges, access devices, and cypher codes:

1. May not share them with any other individual. Exceptions are approved and documented by the Human Resources Division and Facilities & Parks Division.

2. May not permit access to individuals not authorized to enter the building(s) and room(s).

3. May only use them to enter the organization's building(s) and rooms to complete job responsibilities for the organization.

4. Are required to secure them so they are not accessible to unauthorized individuals.

5. Are required to immediately report when they are lost, stolen, or otherwise compromised to the Human Resources Division, Facilities & Parks Division or Department Head who facilitates the following:

   a). Changes the lock or deactivates the cypher code, ID badges, access devices.

   b). Initiates an incident report as described in the Privacy and Security Incident Response section.

6. Are required to return them to the Human Resources Division, Supervisor or Department Head:

   a). When no longer needed

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b). On their last day of employment or contracted work.

e. To protect resources, including Confidential Information, when the following offices are unattended and/or closed, the doors are closed and locked:

1. Chippewa County Department of Human Services (CCDHS)

2. Chippewa County Department of Public (CCPDH)

f. Exterior building doors may not be unlocked and/or be propped open and left unattended after business hours. Exceptions are reviewed, approved or denied, and documented by the Human Resources Division and Facilities & Parks Division.

g. Refer to the following policies for additional facility access or security related control requirements:

1. Facility Use Policy

2. Facility Access and Physical Security Policy

3. Key Issuance and Request Policy

4. Identification and Access Card Policy (located in the HR Policy Manual)

5. Facility Maintenance

a. Before making any Repair and Change to a department that may impact the privacy and security of Confidential Information, forward plans to the Privacy Officer and/or Security Officer to review and approve them.

b. Refer to the Facility Maintenance Policy for additional requirements.

6. Vendor / Contractor Services

a. Business Associate Agreements (BAA). Before entering into any agreement, contract, or other business relationship with any Vendor or contractor, and before disclosing and allowing them to create, receive, maintain, or transmit PHI or ePHI, contact the Corporation Counsel Division to assess whether a BAA is needed. A signed BAA is obtained before allowing the BA to acquire, access, use, or disclose PHI or ePHI. The Corporation Counsel Division also works with Covered Entities to review and sign BAAs with them.

b. As part of the County's effort to utilize service providers with a high level of privacy and security controls in place, before entering into any agreement, contract, or other business relationship with any vendor or contractor, and before disclosing and allowing them to create, receive, maintain, or transmit Confidential Information, contact the IT Division / Security Officer. The IT Division / Security Officer facilitates

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validating privacy and security controls and service contracts are appropriate for the types of services being provided.

c. Refer to the Business Associate and Service Provider policies for additional requirements for Business Associates and other third parties.

7. Disposal of Confidential Information

a. Confidential Information is destroyed/disposed/Sanitized using a method that ensures the Confidential Information cannot be recovered or reconstructed

b. Workforce members and Business Associates (BAs) are responsible for collecting, identifying, and segregating all types of all Confidential Information on behalf of the organization.

c. Media containing Confidential Information may not be directly disposed of in a garbage can, dump, or landfill.

d. Confidential Information and other records and types of information may not be disposed of prior to meeting minimum retention periods established in the Chippewa County Code of Ordinances Chapter 3 – Records Retention. Workforce and other users are required to follow the County's Information Retention policies.

e. Client, consumer, and subscriber records are not destroyed, disposed or Sanitized if they are known to be, or if there is a potential for them to be, involved in any open investigation, audit or litigation.

1. Destruction, disposal or Sanitization is suspended for these records until such time as the situation has been resolved.

2. If the records have been requested in the course of a judicial or administrative hearing, a qualified protective order is obtained to ensure that the records are returned to the organization or properly destroyed/disposed/Sanitized by the requesting party.

f. When Electronic Media is no longer needed, forward it to the IT Division to securely dispose of it.

g. Disposal of paper records: Copies of documents and images that contain Confidential Information which are not originals and that do not require retention based on retention policies (e.g., provider copies, schedule print outs, etc.).

1. Place them in locked bins designated for shredding when ready for disposal. Workforce who have a confidential disposal container at their workstation shall empty the container into the locked bins designated for shredding by the end of each workday.

2. Documentation of this type of disposal is not required, unless done by a contracted organization.

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3. Contracted Vendors shred or destroy documents so that the Confidential Information cannot be read or otherwise cannot be reconstructed; redaction is specifically excluded as a means of data destruction. An example is to finely shred papers.

h. Copies of client, consumer, subscriber designated record sets (e.g. medical charts, billing files, etc.):

1. Only the Department Head or designee for the designated record set may facilitate destruction of these records.

2. Refer to the Chippewa County Code of Ordinances Chapter 3 – Records Retention or other Department procedures for retention requirements.

8. Reuse of Electronic Media Containing Confidential Information

a. Before the reuse of any recordable and erasable Media (e.g. hard disks, workstations, laptops, tapes, cartridges, USB drives, smart phones, SAN disks, SD and similar cards), forward it to the IT Division to facilitate removal of all Confidential Information and/or makes it inaccessible, cleaned, or scrubbed.

b. When a contracted vendor disposes of Electronic Media, obtain a certificate of destruction.

9. Privacy and Security Training

The County's privacy and security training program is required for all Workforce members.

Resources

NIST Security and Privacy Controls for Federal Information Systems and Organizations, SP 800-53, revision 4, April 2013

Applicable Standards / Regulations

- HIPAA Final Omnibus Rule, January 25, 2013
- 45 CFR § 160.103(a) HIPAA definition of Electronic Media (1/25/13)
- 45 CFR §164.308(a)(1)(ii)(c) HIPAA Security Rule Sanction Policy
- 45 CFR §164.308(a)(3)(ii)(A) HIPAA Security Rule Authorization and/or Supervision
- 45 CFR §164.308(a)(5)(i) HIPAA Security Rule Security Awareness and Training
- 45 CFR §164.310(a) HIPAA Security Rule Facility Access Controls
- 45 CFR §164.308(a)(4)(ii)(B) – HIPAA Security Rule Access Authorization
- 45 CFR §164.310(a)(2)(ii) HIPAA Security Rule Facility Security Plan
- 45 CFR §164. 310(a)(2)(iii) HIPAA Security Rule Access Control & Validation Procedures
- 45 CFR §164.310(a)(2)(iv) HIPAA Security Rule Maintenance Records
- 45 CFR §164.310(d)(1) HIPAA Security Rule Device and Media Controls
- 45 CFR §164.310(d)(2)(i) HIPAA Security Rule Disposal

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- 45 CFR §164.310(d)(2)(ii) HIPAA Security Rule Media Re-use
- 45 CFR §164. 164.530(e) HIPAA Privacy Rule Sanctions
- 45 CFR § 164.530(g) HIPAA Privacy Rule Refraining from intimidating or retaliatory acts
- 45 CFR §164. 164.530(h) HIPAA Privacy Rule Waiver of Rights
- Wis. HFS 92, Nov. 2008

2. Technology and Information Privacy and Security Policy

Purpose

The purpose of this policy is to establish a standard for acceptable and authorized use of County-owned and/or County-provided technology. As Chippewa County becomes increasingly dependent on electronic information processing in the course of day-to-day operations, maintaining the Confidentiality, Integrity, and Availability of County information assets, including Confidential Information, is critical to insure sound investment in Information Technology (IT) resources. The scope of this policy includes all authorized users who use and/or access County-owned IT hardware, software, and / or network resources. Authorized users as referred to in this policy shall include Workforce, elected officials and all users of County hardware and/or software.

Definitions

The HIPAA Privacy and Security terms utilized in this policy are capitalized throughout the document. The definitions of those terms are located in a document titled HIPAA Privacy and Security Definitions found on the Employee Portal and maintained by the Privacy and Security Officers.

Responsible for Implementation

The Security Officer and Information Technology Director are responsible for implementing and overseeing this policy and procedure

Policy

1. <u>User Accounts and Passwords</u>

   The assignment of unique user accounts and passwords to authorized users, including administrator accounts, will be made by the IT Division for the appropriate information system(s) and Workstations being accessed.

   County user accounts and/or passwords shall be safeguarded from unauthorized use and may not, under any circumstance, be written down in a public and/or conspicuous location. Passwords shall only be known by the individual user. Passwords may not be shared with anyone, including friends, family, co-workers, etc. Users may not:

   a. Reveal a password over the phone or in an e-mail to anyone.

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1. A user may share a user ID and password with the IT Division when they have a legitimate need to fix a system issue.

2. When this is done the IT Division will require the password be changed immediately after this issue has been resolved.

b. Leave user names (UNs) and passwords (PWs) so someone else may see or find them.

c. Use their UNs & PWs to log other individuals into the system.

d. Use the UNs & PWs of others or any Information System logged in under another user's UN & PW.

e. Store passwords electronically unless they are encrypted and password protected, nor written down unless they are locked and accessible only to the owner.

Users are responsible for all inquiries, entries, and changes made to any of the organization's Information Systems using their UNs & PWs.

Users that do not recall their UN & PW contact the IT Division or IT Help Desk. The IT Division or IT Help Desk shall:

a. Validate the user's identity

b. Verbally provide the user with a temporary, one-time use UN & PW

Additional Password Requirements:

a. At a minimum, smart phones require a six-character unique pass code.

b. Servers store private encryption keys and are protected by a VPN with a password.

c. Refer to the Unique User IDs, Passwords, and Configurations Policies and Procedures for requirements for Workstations integrated with Active Directory settings.

d. For Information Systems, refer to the Unique User IDs, Passwords, and Configurations policy for password configuration settings and requirements.

2. Log-off

Users are required to lock or logoff Workstations, portable devices, and/or Information Systems when left unattended (whether on or off the premises) for any amount of time, so that Confidential Information is inaccessible by any other individual. Personal computers and laptops may be locked by simultaneously pressing the Windows and L keys on a keyboard.

If a device is used only by a single individual with a unique log in, it may be locked and information systems on that device may remain logged in.

Users are required to log off systems and shut down workstations at the end of the work day, unless running a job on it.

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Workstations automatically lock after a minimum of 15 minutes of inactivity (smart phones after two (2) minutes of inactivity; squad car MDCs after eight (8) hours).

a. This feature is set by the IT Division or System Administrators and may not be changed by users.

b. The user's password must be used to re-establish the session.

c. Exceptions are authorized and documented by the IT Division.

Information Systems that create, receive, maintain or transmit, or otherwise provide access to Confidential Information, whenever possible:

d. Automatically log users off the applications after a minimum of up to 180 minutes of inactivity.

e. Invalid attempt automated account locks

1. Automatically lock accounts after three invalid login attempts within five (5) minutes.

2. The user account locks for a period of thirty (30) minutes (or locks until a System Administrator unlocks it). After this period, the bad password count is reset to zero (0) and the user can attempt to log on.

3. System Administrators have the ability to unlock accounts at any time.

VPN, Citrix, and other software application sessions automatically terminate after thirty (30) minutes of inactivity.

3. Software

The Chippewa County IT Division is responsible for the purchase and installation of all software. Users may not download any software to a County Workstation. Illegal copying of software is not permitted. Personally-owned and/or unlicensed software may not under any circumstance be loaded or installed onto County-owned systems. Unapproved software may be removed without advance notice to the user.

Software programs and applications must be licensed by the County. The IT Division maintains the licensing information.

4. Hardware

The Chippewa County IT Division is responsible for purchasing all hardware. Personal Workstations and Electronic Media may not be connected to County owned Workstations, devices, Electronic Media or the network, unless authorized in writing by a Department Head or member of the Management Team and IT Division.

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5. Requests to Access Confidential Information

Members of the management team are the only individuals authorized to request access for users to Confidential Information. Role based access requests are submitted to the Human Resources Division. The IT Division sets up, changes, and terminates user accounts based on these requests.

6. Internet and Online Services

Electronic transmissions or communication via the Internet shall not be considered either private or completely secure.

The Internet offers numerous discussion groups or forums and exchange ideas for the purpose of research and information sharing. As with any form of communication, the County shall not be intentionally misrepresented in any material posted to the Internet.

Authorized users are responsible to ensure the content of material they transmit or publish in electronic communications or messages via County-provided Internet access, email, information systems, and Workstations is appropriate. Hate mail, harassment, discriminatory remarks, profanity, antisocial, disrespectful or unprofessional behavior such as targeting another person or organization to cause distress, embarrassment, injury, unwanted attention or other substantial discomfort is prohibited. Personal attacks or other action to threaten or intimidate or embarrass an individual, group or organization or attacks based on a protected class or any other such characteristic or affiliation are prohibited. Illegal communications are also prohibited.

County Internet usage is logged and accessible by designated staff, as appropriate. Internet usage and history may be subject to public inspection.

7. Electronic Mail Communications (Email)

Business communication via email allows the sender and receiver to be flexible, decide on an appropriate time to address something, not disrupt operational work flows, and in some cases multi-task. Senders should consider the audience, the tone, grammar, and punctuation within the message, and must also consider that any email has limitations as a communication tool. For that reason, senders should use sound professional judgment when determining if email is the most appropriate form of communication for the message they are sending.

Standard emails are inherently not a secure method of communication and can, therefore, be intercepted by unauthorized individuals.

Email is subject to applicable privacy, security, open records and records retention laws and guidelines, as are appropriate, for the information that a particular message contains. It is important to remember that you are creating a government document simply by creating and sending an email.

Chippewa County will archive all email and employ the use of an email archival method to retain all messages sent and received to and from the County email system as identified in the record retention ordinance.

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Authorized users are not permitted to print, display, download or send sexually explicit images, messages, or any other material disparaging or harassing to anyone. If such material is received, and if feasible, recipient shall immediately advise sender that receipt of such transmission is not permitted and must stop. If assistance is needed in responding to the receipt of inappropriate material, the matter is to be referred to the Human Resources Division.

Users are responsible to ensure the content of material they transmit or publish in messages via County-provided email access is appropriate. Users may not send, request, reply to, or forward chain letters/emails. Refer to the Internet and Online Services and Prohibited Use of Technologies sections of this policy for prohibited electronic communications / messages and additional protection requirements.

Clients and consumers whom request a copy of their Designated Record Set (as defined in 45 CFR 164.501) be emailed are referred to the appropriate Records Department. The Records Department processes the request as described in Release of Information policies.

Users authorized to email Confidential Information to individuals whom are authorized to receive the Confidential Information:

a. Are required to use the email encryption program provided by the County. When emailing the Confidential Information type "secure" in the subject line for external emails; this encrypts the email

b. Do not include any PHI, such as client, consumer or subscriber identifiers, in the subject line. These include, but are not limited to the following:

    1. Full Name
    2. Date of Birth
    3. Social Security Number
    4. MCI Number
    5. Address
    6. Telephone Number

c. Before sending the email, verify that you are sending it to the correct individual(s) and that the email is/will be encrypted.

Users may not open any suspicious emails or suspicious website links in emails. If uncertain an email and/or email attachment is suspicious, delete the email or personally call the sender at a known telephone number. If uncertain a website link is suspicious, do not click on it. Instead, open the website from a saved favorite list or do a website search.

8. Remote Email Access

Chippewa County permits the use of secure, remote email access via external Internet connection to the County email system. Example: Microsoft Outlook Web Access (OWA).

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Remote email access and use is provided to conduct County-related business. Authorized users are permitted, however, to use Chippewa County's technical resources, including remote Email Access, for occasional, appropriate and minimal non-work is subject to department approval.

All remote email access users are required to honor and observe the rules of confidentiality and protection of privacy when accessing and using any information that resides on the Chippewa County email system. Remote email access may be used only while an authorized user retains authority from the department head or elected official. It is the responsibility of the Department Head/Elected Official to notify the Human Resources Division of any Workforce member changes that require disabling access to IT services. Service may be limited, suspended or terminated in cases of suspected or known wrongdoing, with or without notice to a user.

All remote email access use by non-management Workforce member is required to have prior approval from the Department Head or Elected Official for remote email access outside of the Workforce member's approved scheduled work time. Use of remote email access without prior approval that results in additional hours worked by non-management Workforce is prohibited.

9. Remote Virtual Private Network (VPN) Access

Chippewa County allows remote VPN access on county issued hardware for management Workforce member only. No personal home computers or other devices are allowed to be used to VPN into the county systems (some exceptions may be approved by the HR Director or IT Director). Requests for a VPN connection must be initially approved by the Department Head/Elected Official. All initially approved requests for employee VPN access shall be submitted to the Human Resources Director for final approval. All other initially approved VPN access requests shall be submitted to the IT Director for final approval.

Remote access service is provided to conduct County-related business. Authorized Workforce members are permitted, however, to use Chippewa County's technical resources, including remote access service, for occasional, appropriate and minimal non-work purposes.

All authorized Workforce members of County-provided remote access services are required to honor and observe the rules of confidentiality and protection of privacy when accessing and using any information that resides on Chippewa County systems. Workforce members agree to apply safeguards to protect County information assets from unauthorized access, viewing, disclosure, alteration, loss, damage or destruction. Appropriate safeguards include use of discretion in choosing when and where to use remote access service, prevention of inadvertent or intentional viewing of displayed or printed information by unauthorized individuals. Service may be limited, suspended or terminated in cases of suspected or known wrongdoing, with or without notice to a user.

10. Offsite (Remote) Security Safeguards

a. Remote access is a privilege, and is granted only to remote users who have a defined need for such access and who demonstrate compliance with the County's established

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safeguards which protect the Confidentiality, Integrity, and Availability of Confidential Information.

b. Individuals may not take electronic Confidential Information off of the County's premises, unless allowed by the County's policies. When electronic Confidential Information is authorized to be taken offsite, individuals are required to secure the information as stated in the County's policies to prevent unauthorized access, use, and disclosure of it.

c. Authorized users may access ePHI remotely to perform assigned job responsibilities

d. Individuals may not take hard copy (paper) PHI or other Restricted Information offsite, unless specified below:

1. CCDHS and CCDPH client and consumer files shall be allowed at court proceedings, as appropriate for the court proceedings.

2. CCDHS and CCDPH client files (e.g. aide sheets, assessment forms, etc.) may be taken offsite as needed to provide services in the community.

3. Other Exceptions are approved and documented by the Privacy Officer.
4. When hard copy (e.g. paper) PHI other Restricted Information is authorized to be taken offsite, it shall be secured at all times by being in the possession of and/or in a locked container at all times so that only authorized individuals have access to the information. If must be left in a vehicle, lock it and place them in the trunk (or if there is not a trunk in an area that is out of plain sight).

e. Treatment Records may not be taken offsite, except by Workforce members directly involved in the patient's treatment, or as required by law. Note: this is from WI DHS 92.04(6)(c) and applies to Treatment Facilities (treatment of Alcoholic, Drug Dependent, Mentally Ill or Developmentally Disabled persons).

f. Remote users are responsible for:

1. Adhering to all of the County's privacy and security policies and procedures, not engaging in illegal activities, and not using remote access for interests other than those for the County's 's approved business purposes.

2. Troubleshooting of telephone or broadband circuits installed. It is not the responsibility of the County to work with Internet Service Providers on troubleshooting problems with telephone or broadband circuits not supplied and paid for by the County.

3. Ensuring that unauthorized individuals do not access the network. At no time will any remote access user provide (share) their user name or password to anyone, nor configure their remote access device to remember or automatically enter their username and password.

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4. Using the County's VPN, or other approved transmission method, to transfer Confidential Information.

g. Remote users must:

1. Manage documents and equipment that contains and/or transmits Confidential Information as described in the County's privacy and security policies.

2. Have and use a paper shredder and follow the Disposal of Confidential Information policy, or bring the Confidential Information in to the office to dispose of appropriately.

3. Secure office environments and prevent visitors and family from viewing, accessing, and hearing Confidential Information.

4. Secure Confidential Information in a locked file cabinet when unattended and not in use.

5. Log-off and disconnect from the County's network when access is no longer needed to perform job responsibilities.

6. Lock the workstation and/or system(s) when unattended so that no other individual is able to access the County's network or Confidential Information.

7. Not copy Confidential Information, including ePHI, to personal media (hard drive, USB, cd, smart phone, tablet, laptop, personal computer, etc.), unless the County granted prior written approval.

11. Texting, Instant Messaging, Paging Via a Pager, and Overhead Paging

Texting, ~~Instant messaging,~~ paging via a pager, and overhead paging are unsecured methods of communication and can, therefore, be intercepted by unauthorized individuals.

As the County does not have a means to encrypt texts, Confidential Information may not be texted at any time from any device, whether or not the texting device is owned by the organization.

~~As the County does not have a means to encrypt instant messages, Confidential Information may not be sent through an instant message at any time from any device, whether or not the instant messaging software and/or device is owned by the organization.~~

As the County does not have a means to encrypt pages via a pager, Confidential Information may not be sent through a pager at any time from any device, whether or not the paging device is owned by the organization.

As the County does not have a means to encrypt overhead paging, Confidential Information may not be stated through an overhead paging system at any time from any device, whether or not the paging device is owned by the organization.

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The County exclusively uses Microsoft Teams for all electronic communication, which ensures all communication is encrypted. Therefore, any instant messaging communication sent through Microsoft Teams is acceptable including ePHI and other Confidential Information. ePHI and Confidential Information shall not be sent through any other instant messaging system at any time, from any device.

12. Virtual Meeting Platforms

Microsoft Teams is the ~~O~~only virtual meeting platform~~s~~ managed by the IT Division that may be utilized. ~~Webex, Zoom, and~~ Microsoft Teams, managed by the IT Division, may be used for internal workforce meetings, general internal communications, and scheduling meetings with vendors. Native smartphone video platforms may be utilized on County provided devices (i.e. FaceTime~~, Duo, etc.~~). Note: vendors and other organizations may send invitations to Chippewa County workforce utilizing their own platforms which may be utilized to attend virtual meetings.

Users may only access, use, and disclose the Minimum Necessary Confidential Information:

1. When needed to perform assigned job responsibilities
2. As allowed by County policies and procedures
3. As allowed by law

~~No virtual meeting platform may be used to transmit Confidential Information at any time via a chat / message, with the exception of telehealth services provided consistent with any County policy~~.

13. Prohibited Use of Technologies

The following items and activities concerning County-owned and/or County-provided technology are expressly prohibited:

a. Engaging in any activity which violates state law, federal law, County Policy, County Administrative Code, the Civil Service Rules or departmental work rules, as applicable.

b. Engaging in activities during working hours for personal gain, solicitation or commercial purposes, including commercial advertising, unless specific to the mission or duties of the applicable Department or County.

c. Accessing or distributing indecent material, obscene material, child pornography or any material that violates County's affirmative action principles or the civil rights (of protected class) of an individual.

d. Harassing other individuals, including sending chain letters or inflammatory material.

e. Loading personally-owned or improperly licensed software on County-owned equipment.

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f. Loading software of any kind is not allowed. All installs are to be completed by the IT Division.

g. Moving equipment from one location to another. While laptops are meant to be mobile and used in various locations, they may not be permanently moved to different offices / locations.

h. Obligating the County for user fees, usage charges or membership fees without prior authorization.

i. Deliberately damaging computing systems or altering the software components of County-owned systems.

j. Engaging in any activity which adversely affects the Availability, Confidentiality or Integrity of any County-provided technology and data.

k. Disseminating or printing copyrighted materials (including articles and software) in violation of copyright laws.

l. Disseminating information that is known to misrepresent the County or be false, inaccurate or misleading.

m. Using another's network, Internet, electronic mail or online service account or password without authorization.

n. Sending of Confidential Information through an external network transmission (e.g. email system, instant messaging application, VPN, etc.) that was not set up and monitored by the IT Division or designee.

o. Deliberately compromising computer and/or network security.

p. Sending disrespectful or unprofessional business communication that causes distress, disruption, embarrassment, injury, or unwanted attention or other substantial discomfort to the recipient.

q. Allowing any other individual to use any of the organization's Workstation's or Information Systems that is not authorized by the organization to utilize them

r. Downloading any Confidential Information off the County's Information Systems, Workstations, servers, etc. to store or use it on any Information System, file sharing site, Workstation, compact disc, digital video disc, zip disc, or other portable devices or removable storage devices such as removable USB or flash drives that is not authorized by the IT Division. Users that receive approval to download data onto approved equipment or Information System are responsible for managing and protecting it from unauthorized access, disclosure, and theft.

s. Activating a white board, camera, microphone, or any other type of collaborative computing device unless it was authorized and/or set up by the IT Division. These

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must show an indication to users that they are turned on, being used, and/or are activated, such as with a light or pop-up alert.

t. Using or making available file sharing or peer to peer networks (Windows file shares, torrent, kazaa, limewire, etc.) or extending the County's network (example: wireless access points).

u. Using tools or techniques to break/exploit or disable security measures.

v. Change operating system configurations, upgrade existing operating systems, or install new operating systems.

w. Connect to unauthorized networks through the organization's systems or devices.

x. Connecting a Workstations (including portable devices) to the organization's network and wireless network that was not authorized by the IT Division

y. Overload any computer system or network.

14. Ownership of Resources

Email, Internet, information system, Workstations, and telecommunication access are resources made available to County authorized users to communicate with each other, other governmental entities, companies and individuals for the benefit of the County.

All Workstations purchased by the organization are the property of the County. Users do not own any information accessed or created during their relationship with the County on these Workstations or information systems provided by the County. The County owns it. Designated staff from the County reserve the right to examine all email, directories, files and other information stored on all County-owned data disks, computers, tape or other media and to monitor all email, Internet, computer system and telecommunication access and activity as deemed necessary.

Authorized users have no right of privacy in anything they create, store, send or receive using the County's technologies. Anything created using county technologies may be reviewed by others.

15. Rights of Chippewa County

a. The County owns all technologies provided at its own expense or under its authority or jurisdiction, including transmissions initiated, received or stored using its technologies.

b. The County reserves the right to determine who is provided access to its Workstations, servers, systems, network and technologies.

c. At any time and without prior notice, the County may remove any user account.

d. The County may monitor and/or log network use, capacity and space utilization.

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e. At any time, the County may access or examine electronic mail and/or monitor messages on its equipment, Information Systems, or networks.

f. At any time, the County may access or examine files or any other materials stored on its equipment or networks.

g. At any time, the County may monitor and audit any user's access to all of the organization's Workstations, portable devices, servers, Information Systems, Internet activities, and applications.

h. The County may archive or delete files or any other materials on its equipment or networks, as deemed necessary.

16. Confidentiality

The County uses and stores Confidential Information in various forms throughout the facilities that is used to provide services to the community. All Confidential Information is the property of the County. Certain Workforce members and/or contract workers may be required to sign a confidentiality agreement form for the department they work in. Unauthorized release, distribution or copying of confidential information is prohibited.

Protecting information assets and systems rests on all users and, therefore, all users are accountable for their actions. All users of information assets or systems must take appropriate care to ensure that the information assets/systems they use in the course of their work are protected from unauthorized access, use, disclosure, modification, and destruction.

When approached by an individual that may be able to view Confidential Information to which they are not authorized, users minimize the Information System or otherwise secure it so that the individual is not able to view the Confidential Information.

Workstations are placed in secure areas away from regular client, consumer or subscriber traffic and display screens are positioned to minimize unauthorized viewing and/or access, whenever feasible.

County issued mobile devices may be taken offsite. Other types of Workstations (e.g. desktop computer) may be taken off the premises when approved by a Department Head and IT Director. When Confidential Information is stored on them, all Workstations must be encrypted. The IT Division maintains a list of each Workstation issued to individuals.

When authorized to remove Workstations (including mobile devices and desktop computers) from the premises:

a. Protect them with security controls equivalent to those for on-site Workstations/mobile devices.

b. When transporting these Workstations /mobile devices as applicable:

1. Place them in closed bags.

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2. Place them in the trunk of vehicles (if there isn't a trunk, in an area that is out of plain sight) when unattended for short periods of time; do not leave them in a vehicle overnight

3. Do not leave them in a vehicle during extreme hot or cold temperatures.

4. Take them as carryon luggage when traveling.

Save / store all information on the County's network drives, not on Workstations or flash / USB drives. This ensures information is sufficiently backed up and secured. PHI may not be stored on flash / USB drives except for when the Privacy Officer agrees to a client, consumer, or subscriber access to records request. Note that data stored locally on desktop computers, laptops, other personal Workstations, and flash / USB drives are not backed up. If it is necessary to store information on a Workstation, such as when traveling or a network drive is not currently available, obtain approval from and coordinate with a Department Head and IT Division to ensure the information is sufficiently backed up and encrypted.

All users are responsible for practicing precautions to protect the Confidentiality, Integrity, and Availability of Confidential Information at all times. Users are required to monitor Workstations and take measures to prevent unauthorized access and theft.

Users may only access, use, and disclose the Minimum Necessary Confidential Information:

c. When needed to perform assigned job responsibilities

d. As allowed by County policies and procedures

e. As allowed by law

Users are required to comply with all applicable information security policies, standards and procedures to ensure that the County's Information Systems and assets areas are protected.

Users may not access their own, a family member's, friend's, or relative's PHI on paper or in any Information System without prior authorization from their Department Head and as allowed by the organization's policies.

17. Dual Relationships

a. When users have a personal relationship with a client, consumer, subscriber (past or present), efforts shall be made to avoid a dual relationship including eliminating records accessed by users as well as limiting case assignment (as software capabilities allow) by a user member to that person.

b. Record access and case assignment shall be determined on a case-by-case basis subject to approval of the program manager.

c. When a client, consumer, subscriber expresses that they view it as a dual relationship or conflict of interest and evidence supports a past or present relationship – it is viewed as such.

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d. If one of these individuals needs care, request a co-worker to take care of the client, consumer, subscriber.

e. If it is an urgent care situation and nobody else is available to help, provide care and inform their Department Head in the organization of the situation.

f. Any users who becomes aware of a potential dual relationship or conflict of interest shall immediately divulge this information to their Department Head.

18. Data Backups

a. Data that is stored locally on desktop computers, laptops, and other personal Workstations are not backed up.

b. Data that is stored on systems that are not managed by the Information Technology department are not backed up.

c. Only Workforce and vendors / Business Associates authorized by the Information Technology Director are allowed to perform backups.

19. Contingency Plan

a. Workforce members are required to report when systems and networks are down, or suspect a potential business continuity threat.

b. Workforce members are also expected to cooperate with Contingency Plan / Disaster Recovery efforts.

20. Integrity

a. The County utilizes various methods to protect Confidential Information from improper and/or unauthorized alteration or destruction and validate that this hasn't happened until properly disposed.

b. To assist with Integrity related controls, users:

1. May only change/amend Confidential Information in Information Systems and on their Workstations as described in amendment of PHI policies and procedures.

2. During the regular course of their job responsibilities, are required to check for and report any errors or potential errors of Confidential Information identified in Information Systems to a member of the management team.

21. System Build / Change Control

a. Changes to the information technology infrastructure (e.g. changing, purchasing, or otherwise introducing new applications or technologies into the information

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technology production environment) may only be done by Workforce and vendors / contractors authorized by the IT Division.

b. System builds, changes, and work necessary to follow and implement security baseline standards are completed, or at a minimum supervised, by individuals with minimum skill sets needed to complete the work.

c. Refer to the System Build / Change Control policy for additional system build / change management requirements.

Applicable Standards/Regulations

- 45 CFR § 164.308(a)(1)(ii)(D) HIPAA Security Rule Information System Activity Review
- 45 CFR §164.308(a)(3)(i) HIPAA Security Rule Workforce Security
- 45 CFR §164.308(a)(4)(i) HIPAA Security Rule Information Access Management
- 45 CFR §164.308(a)(4)(ii)(B) HIPAA Security Rule Access Authorization
- 45 CFR §164.308(a)(4)(ii)(C) HIPAA Security Rule Access Establishment and Modification
- 45 CFR § 164.308(a)(5)(ii)(C) HIPAA Security Rule Log-in Monitoring
- 45 CFR §164.308(a)(5)(ii)(D) HIPAA Security Rule Password Management
- 45 CFR § 164.308(a)(7)(ii)(A) HIPAA Security Rule Data Backup Plan
- 45 CFR § 164.308(a)(7)(ii)(B) HIPAA Security Rule Disaster Recovery Plan
- 45 CFR §164.310(b) HIPAA Security Rule Workstation Use
- 45 CFR §164.310(c) HIPAA Security Rule Workstation Security
- 45 CFR §164.312(a)(2)(i) HIPAA Security Rule Unique User Identification
- 45 CFR §164.312(a)(2)(iii) HIPAA Security Rule Automatic Logoff
- 45 CFR §164.312(a)(2)(iv) HIPAA Security Rule Encryption and Decryption
- 45 CFR § 164.312(b) HIPAA Security Rule Audit Controls
- 45 CFR. §164.312(c)(1) HIPAA Security Rule Integrity
- 45 CFR §164.312(c)(2) HIPAA Security Rule Mechanism to Authenticate Electronic PHI
- 45 CFR §164.312(d) HIPAA Security Rule Person or Entity Authentication
- 45 CFR §164.312(e)(1) HIPAA Security Rule Transmission Security
- 45 CFR §164.312(e)(2)(ii) HIPAA Security Rule Encryption
- 45 CFR §164.312(e)(2)(i) HIPAA Security Rule Integrity Controls

(Amended by the County Board: 11-08-2022)

3. Mobile Device Management Policy

Purpose

The purpose of this policy is to define the responsibilities, guidelines, and terms of use for County issued devices or personal mobile devices configured to sync Chippewa County (herein County) email, calendar or contact data by providing a mobile device management (MDM) solution. The MDM solution provides the County with a means of performing an enterprise wipe of county data residing on the personal mobile devices as needed, encrypt the device, and require passcodes to be used to access the device.

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Responsible for Implementation

The Information Technology Director and Human Resources Director are responsible for implementing and overseeing this policy.

Scope

This policy applies to all Employees that have a County issued device (smart phone or tablet) or a personal mobile device (smart phone only) configured with active sync to receive Chippewa County email, calendar or contact data and to create, receive, maintain, or transmit Confidential Information.

Definitions

The HIPAA Privacy and Security terms utilized in this policy are capitalized throughout the document. The definitions of those terms are located in a document titled HIPAA Privacy and Security Definitions found on the Employee Portal and maintained by the Privacy and Security Officers.

Policy

1. County issued mobile devices:

    a. Upon approval of the County Administrator, some positions or employees may be authorized to use a County-issued smart phone.

    b. All County issued smart phones shall be setup with a County issued account provided by the Information Technology Division (including Apple IDs or other required applications).

    c. County issued devices are for business purposes only and shall not be used for personal use. Personal calls and texts are prohibited. Personal pictures or data are prohibited to be taken or stored on County issued devices.

    d. Even though County issued devices might be used away from County, the usage and service records are still public information. They are also subject to County inspection. The County reserves the right to access the contents, applications, communication records and messages on any device at any time. Employees are responsible for following all appropriate record retention rules.

    e. Wi-Fi settings shall be set to not automatically connect to unsecured networks. Extreme caution should be exercised in connecting to any unsecured or public access points.

    f. Employees shall not download any software onto a County-issued mobile device unless authorized by the Information Technology Division.

    g. Use of a County-issued mobile device outside of the continental United States or internationally is prohibited unless approved by the Information Technology Director or designee.

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h. Prior authorization by the Department Head or designee is required for an employee to use a County-issued phone or tablet outside of non-work hours. Use of County-issued phones or tablets during non-work hours shall be recorded as compensable work time by non-exempt unless such time is de minimus (i.e. increments of time less than 10 minutes).

2. Personal Mobile Devices requirements:

a. Personal mobile devices may be approved by the Human Resources Director for exempt employees only. The Department Head or designee is responsible for authorizing the use of personal mobile devices to sync email, calendar and contact data only.

1. The Department Head or designee shall forward requests to the Human Resources Director or designee for approval.

2. The Human Resources Division shall forward the approved request to the Information Technology Division via the help desk ticketing system.

b. Information Technology responsibilities:

1. Configuring the authorized user's personal mobile device via active sync to receive and access Chippewa County email, calendar and contact data (Chippewa County data) and shall not create, receive, maintain, or transmit Confidential Information via any other means. Chippewa County will license only one (1) personal device for Chippewa County data for each Authorized user. Some exceptions may apply.

2. Setting up the MDM software on the device.

3. Device removal and performing a "remote wipe" of Chippewa County data from the authorized user's lost or stolen device.

4. Smartphone or tablet system removal and performing a "remote wipe" of Chippewa County data from an authorized user’s device upon termination of employment and/or certain discipline with Chippewa County.

c. MDM Authorized / Personal Mobile Device user responsibilities:

1. User is responsible for using Chippewa County email, and any other Confidential Information, on his or her personal device or County issued devices within the same constraints as all Chippewa County-owned device and adhering to all Chippewa County Information Technology Policies.

2. Users are required to report lost, misplaced or stolen personal equipment or workstations that are used to conduct County business and connected to the County MDM solution to the Security Officer and Information Technology Director.

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3. Prior to trading in or selling an MDM Authorized Personal Mobile Device, the user shall bring the device to the Information Technology Director or designee for the MDM software to be removed from the device.

d. Personal Mobile Devices shall not be:

1. Configured for active sync of email, calendar or contacts or to create, receive, maintain, or transmit Confidential Information without being connected to the County MDM solution.

2. Connected to the County network in any way (i.e. via wired or wireless connection), unless set up by the Information Technology Division (the County's guest wireless access may be used).

3. Used to open County files from County-owned devices (e.g. flash drives, media tapes, backup drives, Workstations, etc.)

4. Utilized to record or document or download client, consumer, or subscriber information or Protected Health Information (PHI).

5. Utilized to download and/or store other types of Confidential Information on the device, unless as approved.

6. Utilized to take and/or send pictures of clients, consumers, or subscribers or their PHI. Pictures may not be taken in Restricted Areas or where PHI, or any client's, consumer's, or subscriber's identifiers (e.g. papers, charts, images, etc.) may be the background.

7. Utilized to take and/or to send pictures of confidential or sensitive information. This includes, but is not limited to, law enforcement investigations or crime scenes.

e. Personal Mobile Devices shall meet the County's security standards, including but not limited to the following:

1. Devices may not be "jailbroken" or have any software or firmware installed which is designed to gain access to functionality not intended to be exposed to the user.

2. To jailbreak a mobile device means to remove the limitations imposed by the manufacturer. This gives access to the operating system, thereby unlocking all its features and enabling the installation of unauthorized software.

3. Users must be cautious about the merging of personal and work email accounts on their devices. They must take particular care to ensure that the County's data is only sent through the County's email system. If a user suspects that company data has been sent from a personal email or other business email account, either in the body text or as an attachment, they must notify the Security Officer.

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f. Users are responsible for obtaining their personal device as well as maintaining and paying any monthly or annual fee to the mobile carrier. All mobile charges that the user incurs are his or her responsibility, regardless whether such charges are work related or for personal use. This includes, but is not limited to, charges resulting from texts, data plan surcharges, calls, navigation, or application uses or from early termination fees.

g. Users are responsible for all personal mobile device support, including the cost of repairs or replacement.

Applicable Standards/Regulations

- 45 CFR §164.308(a)(3)(i) HIPAA Security Rule Workforce Security
- 45 CFR §164.308(a)(3)(ii)(C) HIPAA Security Rule Termination Procedures
- 45 CFR §164.308(a)(4)(i) HIPAA Security Rule Information Access Management
- 45 CFR §164.308(a)(4)(ii)(B) HIPAA Security Rule Access Authorization
- 45 CFR §164.308(a)(4)(ii)(C) HIPAA Security Rule Access Establishment and Modification
- 45 CFR §164.310(c) HIPAA Security Rule Workstation Security

4. Data Backup and Media Management Policy and Procedures

Purpose

Backing up Electronic Protected Health Information (ePHI) and other Restricted Information, as well as Sensitive Information, collectively “Confidential Information”, and the correct storage of it are an important part of the day-to-day operations of the organization’s information security program.

The primary purpose for system backups is to avoid any data loss due to hardware failure, computer virus attack, or any disaster situation that could cause data loss on the network servers, and services provided by network servers (e-mail, databases, etc.). In addition, the backup system allows the ability to provide file restoration for user files that are stored on networked servers. Backups are done so that information is available as needed, even during system failures and emergencies (as feasible). Guidelines are established to track the movement of Hardware and Electronic Media containing Confidential Information to help maintain the confidentiality, integrity and availability of it.

Responsible for Implementation

It is the responsibility of the IT Director for implementing and overseeing this policy and procedures.

The IT Division is responsible for overseeing and delegating Confidential Information data Backups and logging and monitoring of movements of Hardware and Electronic Media containing Confidential Information.

Policy

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1. It is the policy of Chippewa County (herein County) to establish and implement procedures to create and maintain retrievable exact copies of Confidential Information.

2. To assure that complete, accurate, retrievable, and tested back-ups of Confidential Information are available for all information systems used by the organization, as needed.

3. To create a retrievable exact copy of Confidential Information before movement of equipment.

4. To maintain a record/log of movements of Hardware and Electronic Media containing Confidential Information.

Procedures

1. Data Backups – General Requirements

    a. Refer to the Technology and Information Privacy and Security policy in the IT Policy Manual – Data Backups section for general Backup requirements.

2. Confidential Information Data Backup

    a. Performing Backups:

        1. Individuals responsible for data Backups are trained by individuals experienced on the procedures to complete these Backups, before being allowed to complete a Backup.

        2. When Confidential Information Backups are completed and/or stored by a vendor:

            a). The vendors are required to have the below stated controls in place, at a minimum.

            b). A Business Associate Agreement is in place, as required by the Business Associate Policy.

            c). Also refer to the Service Providers policy for additional requirements.

    b. Detailed procedures describing how to Backup systems are documented and maintained by the IT Division and include:

        1. System name
        2. Type of information backed up
        3. Live data storage location
        4. Backup storage location
        5. Backup frequency
        6. Class of information backed up
        7. Backup retention period, including daily, weekly, monthly, quarterly, and annual backups

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8. Type of encryption used for the transmission and storage media
9. Documentation confirming when backups were completed
10. Process to validate proper execution and success of each backup
11. Process to respond to and track each issue found or reported via alerts for all backups and insure prompt response and remediation and successful re-execution of failing backup
12. How to recover data from backups
13. Required backup restoral tests process, intervals and tracking to confirm complete backup and restoral integrity

c. Reasonable efforts are made to utilize the following backup controls, at a minimum:

1. Backup types and frequency.

a). Virtual servers:

1). Perform Backups in in a manner that the information system or asset can be fully restored on or offsite to ensure availability

2). Perform hourly asynchronous replication to the backup data center

3). Daily backups are retained six (6) months

4). Quarterly full tape backups are retained for two (2) years

5). Yearly tape backups are retained for two years

6). Domain controllers are backed up nightly

b). Video surveillance servers are not currently backed up.

d. Backup storage:

1. Virtual Backups are performed offsite.

2. Tape backups are stored in a separate building than the servers.

3. To protect them from loss or environmental damage Backups are stored:

a). In an environmentally protected (from fires, water damage, wind damage, etc.) location such as a fireproof, locked safe that is not located next to a water source.

b). In a physically secured location that has a very low probability of being affected by the same disaster as where the live data is stored.

c). So that access is limited to only those key individuals responsible for the Backups and/or recovery of data off the Backups.

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e. Transporting of Backups:

1. Confidential Information stored on portable backup storage media is encrypted (refer to the Technical Access Control policy).

2. Backup drives, disks, or tapes and other portable media containing Confidential Information must be protected from unauthorized access and may only be handled by authorized individuals.

3. Backups are transported directly to the backup storage facility.

4. Backups may not be left in an unattended vehicle.

f. Backup software automatically sends email alerts to the IT Division on success, warning, and error backup jobs.

g. Test Backups on a quarterly basis. Document when files have been completely and accurately restored from the back up media.

3. Moving Confidential Information – Electronic Media

It is not possible or economically practical to control all Electronic Media that enter, leave, and are moved throughout the organization and remotely. The organization makes all reasonable and prudent efforts to control Electronic Media entering and leaving the organization. All users are responsible for securing devices when on and off the premises, according to the organization's information security policies. Electronic Media is encrypted as stated in the Technical Access Control Policy.

a. Refer to the Technology and Information Privacy and Security policy in the IT Policy Manual – Confidentiality section for requirements related to removing Workstations from the premises.

b. Prior to moving Hardware or Electronic Media that stores (e.g. such as servers, hard drives, backups, etc.) or transmits Confidential Information, excluding previously approved Workstations, to a new location:

1. Backup a retrievable copy of the Confidential Information, on a separate device when possible. The individual(s) that creates the Backup also manages the Backup Electronic Media as described in the above Confidential Information Data Backup procedures.

2. Record it on a Data Management: Moving Media Log.

3. The IT Division maintains copies of the Moving Media Log.

c. Before disposing of Electronic Media at an offsite location, refer to the Disposal Policy.

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4. Documentation

All documentation required by this policy is maintained for six (6) years from the date of creation or the date when it was last in effect, whichever is later.

Reporting and Compliance

Refer to the Information Privacy and Security policy for requirements to reporting suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Resources

1. NIST Contingency Planning Guide for Federal Information Systems, SP 800-34 Rev 1, November 2010
2. HIPAA COW Data Management and Backup Policy, version #8, 4/19/05

Applicable Standards/Regulations:

- 45 CFR § 160.103(a) HIPAA definition of Electronic Media (1/25/13)
- 45 CFR § 164.308(a)(7)(ii)(A) HIPAA Security Rule Data Backup Plan
- 45 CFR § 164.310(d)(1) HIPAA Security Rule Device and Media Controls
- 45 CFR § 164.310(d)(2)(iii) HIPAA Security Rule Accountability
- 45 CFR § 164.310(d)(2)(iv) HIPAA Security Rule Data Backup and Storage

(Adopted by the County Board: 11/08/2022)

5. Malicious Software Protections Policy

Purpose

Malicious software (e.g. viruses, malware, Trojan horses, worms, and ransomware) is hostile and intrusive software that has the ability to breach, alter, delete, destroy, and otherwise make data not available. The purpose of this policy is to put in place general safeguards, technologies, monitoring, procedures and a timely patch management program to effectively prevent vulnerabilities from being exploited as well as reduce risks associated with the introduction of malicious software.

Responsible for Implementation

The Information Technology Director is responsible for developing, approving, and overseeing this policy and procedures. The Information Technology Division responsible for implementing this policy and procedures.

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Policy

It is the policy of the County to make reasonable efforts to guard against, detect, report, and remove malicious software through the use of anti-malware software, a timely patch management program, properly configured firewalls, and monitoring.

Procedures

1. General Protections from Malicious Software / Malware

    a. If a virus or other malicious software is detected or suspected, users shall immediately contact the Information Technology Division and cease to use the device and/or system. The Information Technology Division shall research and mitigate it, as well as report it as a Security Incident per the Privacy and Security Incident Response policy (refer to the 416 Information Privacy and Security Policy).

    b. Components and information systems for which anti-malware software and/or patches that are outdated and/or cannot be managed, maintained or updated are on a separate network segment or VLAN.

2. General Technology / Controls

    a. The County utilizes current anti-malware software, a patch management process, and secure firewalls to guard against, detect, report, and remove malicious software.

        1. The Information Technology Division is responsible for maintaining current, effective, and documented anti-malware, patches, and firewalls.

        2. The County scans all software and files accessed or downloaded from external sources including, but not limited to the internet, USB drives, floppy diskettes, other portable devices, and network drives before installing or using it (this may be automated or manually done, depending upon the media).

    b. The Information Technology Division is authorized to select and use tools that are designed to detect network vulnerabilities and intrusions. Use of such tools by others are explicitly prohibited without the explicit authorization of the Information Technology Director. These tools may include, but are not limited to:

        1. Vulnerability testing software to probe the network to identify what is running (e.g., operating system or product versions in place), assess whether publicly-known vulnerabilities have been corrected, and evaluate whether the system can withstand attacks aimed at circumventing security controls. Refer to the System Build / Change Control policy.

        2. Scanning tools and devices.

        3. War dialing software.

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4. Password cracking utilities (only utilized in extreme / critical cases).

5. Network “sniffers”.

6. Passive and active intrusion detection systems. Refer to the Intrusion Detection standard.

7. External auditors hired are independent of other organizational operations, have technical expertise in the type of audit conducted, and sign a Business Associate Agreement.

3. Anti-malware software

a. Anti-malware software is on all servers, Workstations, portable devices, and email applications.

b. Users may not turn off or disable anti-malware systems.

c. Refer to the Malware Standard for baseline implementations and scanning requirements.

d. To verify anti-malware software is installed and current, auditing is completed for each type of device/electronic media, automated mechanisms and reporting are in place and a status review shall be completed on a weekly basis.

4. Patch management

a. A patch management process is in place to promptly identify risks posed by software security vulnerabilities and take appropriate actions to mitigate them.

b. Patching procedures adhere to the System Build / Change Control policy and procedures.

c. For systems and components managed by the County, the Information Technology Division and/or System Administrators shall:

1. Subscribe to and monitor industry-accepted third-party vulnerability notifications (e.g. vendor websites, industry news groups, mailing lists, or RSS feeds).

2. Monitor for Information System, Workstation, Electronic Media, hardware device, firmware, and other system component security patches, hot-fixes, service packs, and/or zero-day vulnerabilities on a weekly basis at a minimum.

3. Determine and document when it is acceptable to automate patches (e.g. for non-mission critical applications and operating systems).

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4. Document the oldest operating systems that may be used and when it is not possible to utilize current operating systems and/or critical security patches, methods to secure the Workstation/device/equipment (e.g. network segmentation) shall be implemented.

5. Patch new equipment and software to the current patch level prior connecting it to any production network.

6. Develop a process and frequency to report the state of patching across all assets including the current status of all hardware device operating system levels and any missing patches.

d. When updated security patches are identified, the Information Technology Division and System Administrators shall:

1. Evaluate the patches to determine whether they adequately reduce risk or vulnerabilities and assign a patch rating as defined below:

Security Patch Rating	Definition	Action
Critical	Exploitation could result in compromise of the confidentiality, integrity or availability of restricted information assets or systems. Exposure is high on all platforms.	Patch or workaround should be applied immediately (unless it is documented that it will negatively impact systems / operations).
Important	Exploitation could result in compromise of the confidentiality, integrity or availability of information assets or systems, but to a lesser degree than a critical patch. Exposure to an exploit is mitigated by other factors.	Patch or workaround should be applied as soon as possible, no later than 1 week.
Moderate	Exploitation is mitigated to a significant degree by factors such as auditing, need for user action or difficulty of the exploitation.	Evaluate patch bulletin or workaround and apply as soon as possible, no later than 1 month.
Low	Exploitation is extremely difficult or there is minimal impact to information assets or systems.	Evaluate patch bulletin or workaround and apply in the course of normal maintenance operations if appropriate.

2. Make an analysis of patches to be deployed to determine system dependencies and outline a course of action to include testing and deployment

3. Work with contracted third-party vendors that manage Information Systems.

4. Test the patches:

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a). On test systems so any patch-related issues can be identified and resolved before the patches are installed on production systems (when available).

b). To verify:

1). They are effective in addressing the target vulnerability.

2). They do not inadvertently cause other problems.

3). Back-out or rollback options including data backup are available.

5. Deployment of patches:

a). The Information Technology Division and System Administrators shall apply Workstation and software patch updates as they become available. This applies to all Workstations, including remote Workstations owned by the County. Examples include, but are not limited to:

1). Windows operating systems

2). Smart phones

3). Java

4). Adobe, including Flash Player

5). Internet Explorer, Microsoft Edge, Google Chrome, etc.

6). Information Systems that create, receive, maintain, and / or transmit Confidential Information

b). The Information Technology Division and System Administrators shall deploy other appropriate patch updates as soon as possible following appropriate testing, and within two (2) weeks of their release, at a minimum, unless it is documented that it will negatively impact operations or systems.

6. Document implemented patches and decisions/reasons to reject security patches.

7. Also refer to the Firewall, Peripheral System Configuration, Router, Windows Server, Linux Server, Database, and Network Perimeter Management Design standards.

e. Auditing is completed on a monthly basis on a minimum of 5-10% of Information Systems, Workstations, Electronic Media, hardware devices, and other system components to verify patches are current and to check for zero critical updates.

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5. Firewalls

   a. Networks and servers are secured with secure stateful packet inspection Firewall(s).

   b. The County firewalls may not be bypassed.

   c. Refer to the Firewall Standard for baseline implementations.

Reporting and Compliance

Refer to the Privacy and Security Oversight policy for requirements to reporting suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Applicable Standards/Regulations

- 45 CFR § 164.308(a)(5)(ii)(B) HIPAA Security Rule Protection from Malicious Software.

(Adopted by the County Board: 11/08/2022)

6. Remote Access Policy

Purpose

The purpose of this policy is to define and utilize uniform security requirements for remotely connecting to Chippewa County's (herein County) network and information assets. The requirements are designed to minimize potential exposure from damages that may result from unauthorized access to the County's information assets/systems and electronic protected health information (ePHI) and other Restricted Information as well as Sensitive Information.

Responsible for Implementation

The Security Officer and IT Division are responsible for implementing and overseeing this policy and procedures.

Policy

It is the policy of County to:

1. Safeguard electronic protected health information (ePHI) and other Restricted Information as well as Sensitive Information, collectively "Confidential Information" through established requirements for remote access to County 's networks and information systems.

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2. Implement processes and mechanisms to support the confidentiality and safeguarding requirements as outlined in the Technology and Information Privacy and Security policy.

Procedures

1. Remote access is a privilege, and is granted only to remote users (e.g. management Workforce members and authorized contracted vendors) who have a defined need for such access and who demonstrate compliance with the County's established safeguards which protect the confidentiality, integrity, and availability of Confidential Information.

2. Access is approved as described in the System Access policy and Technology and Information Privacy and Security policy, when there is a clearly defined business need.

    a. Business associates, Subcontractors, contractors, and vendors may be granted remote access to the network, provided they have a contract or other required agreement with the County (refer to the Business Associate policies).

    b. The ability to print a document to a remote printer is not supported without approval by the IT Director.

3. Encryption:

    a. Security credentials are encrypted during transmission.

    b. Remote communication to the internal network over public networks is encrypted.

    c. Workstations are encrypted, if Confidential Information is stored on them, as described in the Technical Access Control policy.

4. VPN access:

    a. VPN gateway devices and configurations are set up and managed by the County's IT Division, users and their accounts are managed by the County.

    b. Only the IT Division approved VPN connection originating from inside the County's network are allowed.

5. Remote host systems accessing the County's network must meet the County's security standards.

6. Personal equipment and workstations shall not be used to remotely access the County's network and/or information systems.

7. Only vendors authorized by the IT Division may use non-County equipment and workstations to remotely access the County's network and systems.

8. The County maintains logs of all activities performed by remote access users while connected to County's network (refer to the Auditing policy).

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9. The IT Division shall facilitate remote access annual auditing of the security controls in place (for example 5-10% of remote access users should be audited of security user configurations annually).

10. The Security Officer and IT Division maintain documentation related to this policy and procedures for a minimum of six (6) years.

Reporting and Compliance

Refer to the Privacy and Security Oversight policy for requirements to reporting suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Resources

1. HIPAA COW Remote Access policy 2/27/13

Applicable Standards/Regulations

- 45 CFR §164.312(a)(2)(iii) – HIPAA Security Rule Automatic Logoff
- 45 CFR §164.308(a)(3)(ii)(B) – HIPAA Security Rule Workforce Clearance Procedures
- 45 CFR §164.308(a)(3)(ii)(C) – HIPAA Security Rule Termination Procedures
- 45 CFR §164.308(a)(4)(ii)(B-C) – HIPAA Security Rule Access Authorization

(Adopted by the County Board: 11/08/2022)

7. System Access Policy

Purpose

To establish guidelines to protect Electronic Protected Health Information (ePHI), and other Restricted Information and Sensitive Information from unauthorized access, use, disclosure, and modification, as well as safeguards to prevent theft of Workstations and other equipment that create, receive, maintain, or transmit this information.

Responsible for Implementation

The Privacy Officer, Security Officer, IT Division, Human Resources Division, management team, and Department Heads are responsible for implementing and overseeing this policy and procedures.

Policy

It is the policy of Chippewa County (herein County):

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1. To safeguard the confidentiality, integrity, and availability of Protected Health Information (PHI), Electronic Protected Health Information (ePHI), and other Restricted Information and Sensitive Information (collectively "Confidential Information") by controlling access to it.

2. To implement processes and mechanisms to support the confidentiality and safeguarding requirements as outlined in the Technology and Information Privacy and Security Policy.

3. To provide only the Minimum Necessary access to Confidential Information to all users, including but not limited to Workforce members, volunteers, Bb~~b~~usiness Aa~~a~~ssociates, contracted providers, consultants, and any other entities.

4. To prevent unauthorized access, use, disclosure, modification, and theft through established Workstation and Information System security safeguard controls.

Procedures

1. Roles: Role based access is provided to all Information System users, such as access to software, servers, Internet sites, transactions, Workstations, and portable devices that contain or transmit Confidential Information.

    a. Access levels for Information Systems are based on job classifications (based on business need, skill levels, and abilities to fulfill particular roles) and provide the Minimum Necessary access to Confidential Information needed to perform job responsibilities (treated on a least-access principle).

        1. Blanket access is not provided for any user.

        2. Information Systems are programmed so that only the IT Division and other System Administrators are able to create and assign access to systems.

        3. Individuals may not create their own access roles.

    b. System Administrators and appropriate member of the management team / Department Head facilitate the following for all Information Systems and Workstations that create, receive, maintain or transmit Confidential Information, or otherwise provide access to Confidential Information:

        1. Approve access levels/roles as well as requests for changes.

        2. Maintain documentation describing the roles for all Information Systems and Workstations including the following:

            a). Type of access such as read-only, modify, and full-access in different system functions

            b). List of users assigned to each role (current and previous)

            c). Analysis done to determine the access needs of users and the reasons for decisions made.

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c. System Administrators, in collaboration with an appropriate member of the management team/Department Head annually, when possible, but at a minimum every two years, shall provide the IT Director with a list of users with access to Confidential Information and review it to ensure they are consistent with authorized roles and continue to meet the Minimum Necessary access needed.

1. Changes are made, as appropriate to achieve Minimum Necessary access.

2. When roles are changed it is recommended that the reasons for the change as well as the date, time, and who changed it is documented and the documentation is maintained by System Administrators and appropriate member of the management team / Department Head.

2. Organizations, Consultants, and Vendors That Do Not Work Directly with Confidential Information: Have organizations, consultants and/or vendors that do not directly work with Confidential Information, that may inadvertently see and/or hear Confidential Information while working onsite, and a contract is not in place that otherwise requires protections of Confidential Information sign a Confidentiality Agreement for an Organization, Consultant and/or Vendor that Does Not Directly Work with Confidential Information.

3. Segregation of Duties: Access authorizations, changes, suspensions, and terminations are segregated to avoid conflict of interest, collusion, fraudulent or other malicious activity as it pertains to Confidential Information.

a. A single individual shall not perform a process from the beginning to the end without the involvement of another individual or group with appropriate authority. In smaller departments, segregation of duties is a challenge and it is recommended to request someone other than the individual who made the change to review the changes being made.

b. Users, regardless of their level of authority, shall not add or change their access without approval from an appropriate authority (e.g. user's Department Head or designee, system owner, Security Officer, Privacy Officer, etc.).

c. System administrators or any other user shall not change system security or audit functions without written approval from the Department Head or designee

4. Authorizing Access:

a. Background checks

1. Before individuals are allowed to access the organization's Information Systems, Workstations, portable devices, transactions, and servers, the Department Head or designee is required to provide the Human Resources Division with documentation of at least two positive work-related background checks prior to job offer and the Human Resources Division maintains documentation of the results.

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2. Office of Inspector General (OIG) Exclusion List of Excluded Individuals and Entities (LEIE) are done upon hire and monthly by the Human Resources Division.

3. Caregiver Background checks are done upon hire and every four years by the Human Resources Division.

b. Access Requests

a. All users sign a "Confidentiality and Information Access Agreement" (Agreement), as well as other relevant privacy and security policies, procedures, and agreements. The Human Resources Division shall maintain a copy of the signed agreement.

b. For Third Party users, verify a Third-Party Agreement and/or Business Associate Agreement has been signed (refer to the Service Providers and Business Associate policies).

c. The appropriate Department Head coordinates efforts to request and approve access to department specific, managed, administered systems and maintain the following documentation (note: documentation is optional for Information Systems that do not create, receive, maintain, or transmit Confidential Information):

a). A copy of the request.

b). Name of the individual who requested the access.

c). Name of the person who set up the access.

d). The date and time access was set up.

e). User's assigned role(s).

d. The Department Head or designee shall complete a Request for Access (RFA) form to request access for users to Confidential Information (those listed on the RFA form):

a). Access levels and roles requested shall adhere to approved role-based access levels, as defined in the above Roles section.

b). For remote access requests, refer to the Remote Access Policy in the Information Technology Policy Manual for access permissions and safeguarding requirements.

c). Forward the completed RFA to the Human Resources Division at least two (2) weeks prior to the start date and the Human Resources Division shall forward the request to the IT Division.

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e. The IT Division and other System Administrator(s) shall set up access based on the pre-approved roles. Emergency access may only be provided when normal processes cannot be conducted or are ineffective.

a). To request emergency access, a direct Supervisor or Department Head shall send an email to the IT Division. Include the following in the email:

1). Emergency situation.

2). Valid business purpose for access.

3). Unsuccessful normal access means attempted.

4). Who will be accessing the information.

5). For what period of time access will be granted.

6). The method of access.

b). Upon approval of the IT Division and the Department Head, emergency access may be provided.

c). Emergency access shall be immediately revoked when either the approved time period for access expires or the business purpose has been fulfilled.

f. The IT Division or other System Administrator(s) shall forward user names and temporary, unique, one-time use passwords directly to the user or Department Head in a secure manner (e.g. in a sealed envelope, call the user directly, send an internal email to the user, etc.).

g. The IT Division and other System Administrator(s) shall maintain the following documentation (note: documentation is optional for Information Systems that do not create, receive, maintain, or transmit Confidential Information):

a). A copy of the request.

b). Name of the individual who requested the access.

c). Name of the person who set up the access.

d). The date and time access was set up.

e). User's assigned role(s).

5. Modifying Access:

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a. When a user's role changes or their access needs to an Information System, Workstation, portable device, transaction, or server is no longer needed, the Department Head shall:

1. Complete an RFA form and submit to the HR Division for Workforce members and contractors/vendors.

2. Coordinate efforts to change access to department specific, managed or administered systems and maintain the following documentation (note: documentation is optional for Information Systems that do not create, receive, maintain, or transmit Confidential Information):

a). A copy of the request.

b). Name of the individual who made the change request.

c.). The date and time access was changed.

d). Name of the person who changed the access.

e). Previous and new roles assigned.

3. Review the Facility Access policy for any additional requirements.

b. The HR Division shall forward the approved request to the IT Division (refer to the Authorize section above) to change the user's access role.

c. The IT Division / System Administrator(s) shall change the user's access after receiving the request, based on the pre-approved roles.

d. IT Division and System Administrator(s) shall maintain the following documentation (note: documentation is optional for Information Systems that do not create, receive, maintain, or transmit Confidential Information):

1. A copy of the request.

2. Name of the individual who made the change request.

3. The date and time access was changed.

4. Name of the person who changed the access.

5. Previous and new roles assigned.

6. Terminating Access:

a. When a user's access to the organization's Information Systems, Workstations, portable devices, transactions, and servers, is no longer required due to termination of the relationship with the organization, end of a specific project, or access is otherwise no longer needed, the Department Head shall:

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1. Immediately, or as soon as practical, coordinate efforts to terminate access to department specific, managed and administered systems and maintain the following documentation (note: documentation is optional for Information Systems that do not create, receive, maintain, or transmit Confidential Information):

    a). The date and time access was terminated.

    b). Name of the person who terminated the access.

2. Collect equipment and other items distributed or owned by the County.

3. Email the Human Resources Division immediately, or as soon as practical, to notify them that the access shall be terminated. The Human Resources Division shall:

    a). Request send an IT Help Desk ticket via email to deactivate the user's access.

    b). Facilitate completion of the applicable Separation Checklist as a guide to make all necessary changes.

3. Review the Facility Access policy for any additional requirements.

b. Access shall be terminated if there is evidence or reason to believe the following (these shall also be reported on a Privacy and Security Incident Response form per the Incidents Policy):

1. The user has been using their access rights inappropriately.

2. A user's password has been compromised (a new password may be provided to the user if the user is not identified as the individual compromising the original password).

3. An unauthorized individual is utilizing a user's User Login ID and password (a new password may be provided to the user if the user is not identified as providing the unauthorized individual with the User Login ID and password).

c. The HR Division maintains a copy of the Separation Checklist (or documentation of the termination request received) and the reason for the termination.

d. The IT Division and other System Administrator(s) shall:

1. Terminate access immediately after receiving the request, but no later than 24 hours from the notification of the request, whether received verbally or in writing.

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2. Maintain the following documentation regarding terminations (note: documentation is optional for Information Systems that do not create, receive, maintain, or transmit Confidential Information):

a). The date and time access was terminated.

b). Name of the person who terminated the access.

7. Logging-off Systems:

a. Information Systems that create, receive, maintain or transmit, or otherwise provide access to Confidential Information; VPN, Citrix, & other software application sessions; and Workstations are configured to automatically lock after a specified amount of inactivity as outlined in the Technology and Information Privacy and Security policy.

1. These timeframes are set by the IT Division and other System Administrator(s) and shall not be changed by users.

2. The user's password shall be used to re-establish the session.

b. Invalid attempt automated account locks for Information Systems that create, receive, maintain or transmit, or otherwise provide access to Confidential Information and Workstations settings are configured by the IT Division and other System Administrator(s), as outlined in the Technology and Information Privacy and Security policy.

8. User Authentication and Passwords:

a. Access to Information Systems and County's Confidential Information is controlled, at a minimum, by requiring a unique UN & PW for each individual user, including Administrator roles, so that access may be tracked.

b. Password safeguards

1. Vendor supplied default passwords shall be changed before a system is attached to County's network.

2. County leaders and System Administrators shall not maintain a list of user passwords, except for generic Workstation passwords (when authorized as stated above).

c. The IT Division and other System Administrator(s) shall set minimum password configurations as outlined in the Technology and Information Privacy and Security Policy and the Unique User IDs, Passwords, and Configurations Policy to the extent technologically possible, so that users are forced to use them.

9. Exceptions: Exceptions to this policy and procedures shall be authorized and documented by the Security Officer.

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10. Documentation: All documentation related to this policy and procedures is maintained for a minimum of six (6) years from the date of creation or date it was last in effect, whichever is later.

11. Health Care Clearinghouse: This organization is not a health care clearinghouse, and therefore, does not have nor need any health care clearinghouse procedures.

Reporting and Compliance

Refer to the Privacy and Security Oversight policy for requirements to reporting suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Resources

1. HIPAA COW System Access Policy, Version 10, 4/4/05
2. OIG exclusion list:
   - Exclusion search: http://exclusions.oig.hhs.gov/
   - Downloadable database: http://oig.hhs.gov/exclusions/exclusions_list.asp
3. SAM database: https://www.sam.gov/portal/SAM/#1

Applicable Standards/Regulations

- 45 CFR §164.308(a)(3)(i) HIPAA Security Rule Workforce Security
- 45 CFR §164.308(a)(3)(ii)(B) HIPAA Security Rule Workforce Clearance Procedures
- 45 CFR §164.308(a)(3)(ii)(C) HIPAA Security Rule Termination Procedures
- 45 CFR §164.308(a)(4)(i) HIPAA Security Rule Information Access Management
- 45 CFR §164.308(a)(4)(ii)(A) HIPAA Security Rule Isolating Healthcare Clearinghouse Function
- 45 CFR §164.308(a)(4)(ii)(B) HIPAA Security Rule Access Authorization
- 45 CFR §164.308(a)(4)(ii)(C) HIPAA Security Rule Access Establishment and Modification
- 45 CFR §164.308(a)(5)(ii)(D) HIPAA Security Rule Password Management
- 45 CFR §164.310(b) HIPAA Security Rule Workstation Use
- 45 CFR §164.310(c) HIPAA Security Rule Workstation Security
- 45 CFR §164.312(a)(1) HIPAA Security Rule Access Control (Technical)
- 45 CFR §164.312(a)(2)(i) HIPAA Security Rule Unique User Identification
- 45 CFR §164.312(a)(2)(iii) HIPAA Security Rule Automatic Logoff
- 45 CFR §164.312(d) HIPAA Security Rule Person or Entity Authentication

(Adopted by the County Board: 11/08/2022)

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8. **Technical Access Control:** Transmission Security, Encryption, and Integrity

Purpose

Electronic Protected Health Information (ePHI) and other Restricted Information and Sensitive Information (collectively "Confidential Information") are transmitted and stored in many different ways. Utilizing strong technical encryption and integrity mechanisms to secure this information helps to protect the confidentiality, integrity, and availability of it.

The purpose of this policy is to define methods to:

1. Prevent unauthorized access, use, disclosure, and modification of Confidential Information during transmissions over electronic communication networks.

2. Encrypt Confidential Information at rest and in transit, whenever possible and deemed appropriate to help protect the confidentiality, integrity, and availability of Confidential Information.

3. Prevent Confidential Information from being improperly altered or destroyed.

4. Have the ability to verify that Confidential Information is not improperly altered or destroyed.

Responsible for Implementation

The IT Director is responsible for implementing and overseeing this policy. It is the responsibility of the IT Division and Department Heads to ensure processes comply with this policy.

Policy

It is the policy of Chippewa County to:

1. Implement measures to prevent unauthorized access to Confidential Information during transmission over electronic communication networks.

2. Define how and when to implement mechanisms to securely encrypt and decrypt Confidential Information at rest and in transit, whenever feasible.

3. Outline procedures and implement technical methods to protect Confidential Information from improper and/or unauthorized alteration or destruction.

4. Establish electronic mechanisms and other security measures to ensure and validate that Confidential Information hasn't been altered or destroyed in an unauthorized manner until properly disposed.

Encryption and Other Mechanisms Used to Secure Confidential Information at Rest and In Transit

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1. County considers methods to encrypt Confidential Information at rest and in transit, to assist in its efforts to prevent unauthorized access, alteration, and destruction.

2. The IT Director or designee completes a risk assessment to determine the need and ability to encrypt ePHI, as well as the type of encryption to use.

    a. Factors considered in the decision-making process include the cost, likelihood of loss or theft, likelihood of a breach of confidentiality, fines, ability to encrypt, loss of reputation, as well as other factors and/or negative impacts that may happen based on the decision.

    b. If it is determined that Confidential Information does not need to be encrypted, the IT Director:

        1. Completes an exception request, including documentation as to why it would not be reasonable and appropriate to implement the implementation specification (refer to the Privacy & Security Oversight Policy);

        2. Implements an equivalent alternative measure if reasonable and appropriate.

    c. If it is determined that the Confidential Information will be encrypted:

        1. The use of proprietary (custom) encryption algorithms is not allowed for any purpose, unless reviewed by qualified experts outside of the vendor in question and approved by the Security Officer. The export of encryption technologies is restricted by the U.S. Government.

        2. Use strong cryptography, such as the following, unless not available:

            a). A minimum of 256-bit encryption.

            b). Ciphers must meet or exceed the set defined as "AES-compatible".

                1). Utilize proven, standard algorithms such as the current Advanced Encryption Standard (AES).

                2). All ciphers in use are reviewed at least annually for deprecation. Threat intelligence or cipher deprecation may accelerate review or replacement.

            c). For data in transit comply with, as appropriate:

                1). Federal Information Processing Standards (FIPS) 140-2 validated.

                2). NIST Special Publication (SP) 800-52, Guidelines for the Selection and Use of Transport Layer Security (TLS) Implementations.

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3). NIST SP 800-77, Guide to IPsec VPNs; or NIST SP 800-113, Guide to SSL VPNs.

d). For data at rest, encryption consistent with NIST SP 800-111, Guide to Storage Encryption Technologies for End User Devices

e). Users may not (refer to the Information Privacy and Security policy):

1). Share encryption keys or user names and passwords.

2). Leave them so someone else may see/find them.

f). Strong passwords are used when creating encryption passwords (at a minimum, randomly generated 36 characters).

g). Encryption Keys:

1). Are secured and stored in an encrypted format.

2). Only the minimum necessary IT Division Workforce has access to encryption keys. The IT Director approves all requests for encryption key custodians (also refer to the System Access policy).

3). Encryption key custodians are responsible for ensuring:

- Strong key generation.
- Keys are issued with an expiration date, whenever possible.
- Secure key distribution.
- Storage within a secure cryptographic device, such as a hardware (host) security module (HSM) or PTS-approved point-of-interaction device.
- Periodic key changes.
- Destruction of old keys, verified via an email to the IT Director.
- Prevention of unauthorized substitution keys.
- Replacement of known or suspected compromised keys.
- Destruction of old or invalid keys.
- Split knowledge and dual control key process to recover or reconstruct keys.
- Encryption key custodians acknowledge in writing or electronically that they understand and accept key custodian responsibilities.

4). Key-encrypting keys:

- Must be at least as strong as the data encrypting key.

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- Are stored separately from data-encrypting keys and in the fewest possible locations.

5). Keys known or suspected to have been compromised are replaced immediately and an incident investigation is initiated as described in the Incidents policy and Privacy and Security Incident Response section of the Information Privacy and Security policy.

h). Encryption authentication

1). Use secure protocols for key exchanges (e.g. cryptographic protocols such as Diffie-Hellman, IKE, or Elliptic curve Diffie-Hellman (ECDH)).

2). End points must be authenticated prior to the exchange or derivation of session keys.

3). Public keys used to establish trust must be authenticated prior to use. Examples of authentication include transmission via cryptographically signed message or manual verification of the public key hash (e.g. secure hashing algorithm (SHA-2)).

4). Install a valid certificate signed by a known trusted provider for all servers used for authentication (for example, RADIUS or TACACS).

5). All servers and applications using SSL or TLS must have the certificates signed by a known, trusted provider.

i). Document the type of encryption utilized in the inventory list.

3. Workstations (computers, laptops, USB/Flash Drives, CDs, Smartphones, etc.; refer to the definition of a Workstation for a complete list)

a. The IT Division:

1). Installs BitLocker encryption Workstations before distributing them to users.

2.). Distributes smartphones distributed with native encryption activated (i.e. on iPhones).

3). Manages this encryption on Workstations and smartphones.

b. USB/Flash Drives may not be utilized to store Confidential Information.

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c. Refer to the Confidentiality section of the Information Technology Policy Manual regarding storage of Confidential Information on a Workstation and any other portable device requirements.

4. Photocopiers, printers, fax machines and all-in-one devices, and Portal Breath Test (PBT) kiosk

a. Storage drives on these devices are encrypted.

b. This encryption is installed, managed, and monitored by the authorized contracted IT vendor.

c. The PBT is bolted or secured to a wall.

5. Servers and Backups

a. Servers, including cloud hosted / online storage, that contain Confidential Information are encrypted with full disk encryption or encrypted at rest (i.e. 256-bit AES; SAN volume encrypted where the server is stored).

b. Backups that contain Confidential Information are protected using encryption (e.g. full disk 256-bit AES).

c. Encryption on servers and backups is installed, managed, and monitored by the IT Division.

6. Emails

a. The IT Division installs, manages, and monitors the technology for users to encrypt emails and/or attachments.

b. Refer clients, consumers, and subscribers requesting a copy of their designated record set be emailed, as described in County release of information policies.

c. Refer to the Information Technology Policy Manual which outlines when and how to send encrypted emails.

d. Secure, encrypted emails track when an email has been opened by the recipient.

7. Texts, Instant Messages, Paging Via a Pager, and Overhead Paging. As per the Texting, Instant Messaging, Paging Via a Pager, and Overhead Paging section of the Information Technology Policy Manual, texts, instant messages, and pages may not currently include Confidential Information.

8. Virtual meeting platforms

a. The IT Division manages virtual meeting platforms, Webex, Zoom, and Microsoft Teams, which are approved to be used.

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b. As per the Virtual Meeting Platforms section of the Information Technology Policy Manual:

1). Webex, Zoom, and Microsoft Teams may be used for internal workforce meetings, general internal communications, and scheduling meetings with vendors. Note: vendors and other organizations may send invitations to Chippewa County workforce utilizing their own platforms which may be utilized to attend virtual meetings.

2.) No virtual meeting platform may be used to transmit Confidential Information at any time, with the exception of telehealth services provided consistent with the Telehealth policy.

9. Network Transmissions (of Confidential Information to/from other entities/sites as well as internally)

a. Confidential Information is transmitted only when allowed by this policy and the County's release of information policies. Also, refer to the Information Technology Policy Manual.

b. External network transmissions of Confidential Information may only be done using one of the following methods which are installed, managed, and monitored or reviewed and approved by the IT Division or designee. Exceptions are reviewed, approved, and authorized by the Security Officer. The following are examples provided by County that may be used:

1). File Transfer Protocol over SSL (FTPS) with a protected communication path:

a). Secure Shell (SSH) to copy the data from one location to another; this method is generally referred to as Secure File Transfer Protocol (SFTP); and/or

b). Transport Layer Security (TLS) to protect the connection of a standard FTP transmission:

- Use TLS 1.2 or higher.
- Disable TLS 1.0, TLS 1.1, and SSL 1, 2, 3.x unless required. (Note: use of TLS 1.0, TLS 1.1, and SSL 1, 2, 3.x is leading to increased cases affected by Man-in-the-middle (MITM) attacks and session hijacks)

c). HTTPS.

2). Internet protocol security (IPSEC): minimum of 128-bit / SHA2 (e.g. SHA-256).

3.). Remote access through the Virtual Private Network (VPN) (private point-to-point network) via Fortinet: minimum of 256-bit SSL.

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c. Only Workstations (including portable devices) authorized by the IT Division are allowed on County's network.

d. Unused network data jacks should be disabled in Unrestricted areas whenever feasible, to prevent non-organization devices to connect to the network County's knowledge. Visitors are escorted at all times in rooms and areas where network data jacks are active.

e. Conference room internal data network jacks are disabled to prevent non-organization devices to connect to the internal network without County's knowledge.

10. Wireless Access Points

a. The IT Division installs, manages, and monitors all wireless access points.

b. WPA2 or higher (EAP-TLS or PEAP authentication) is used for all non-public wireless access points. A strong password is utilized to access them (refer to the Technology and Information Privacy and Security; Unique User IDs, Passwords, and Configurations Policy; and System Access policies for minimum password requirements).

c. A separate, segmented guest wireless network is available for authorized personally owned devices (e.g. for employees and approved vendors).

d. A separate, segmented public wireless network is available for visitors' use. This public wireless network may not be used by Workforce to transmit Confidential Information, unless connected through the County VPN.

e. Only Workstations authorized by the IT Division are allowed on County's wireless network.

System Isolation

ePHI Information Systems are segmented from lower system classification and from non-ePHI systems such as:

1. HVAC systems and iOT devices.

2. When possible and applicable, test networks, systems, and applications are separated from production systems, either physically or through local access control list controls on the system.

3. Networks the IT Division does not manage are connected to only those systems with which they need to interface to conduct business, etc.

Integrity

Chippewa County utilizes various methods to protect Confidential Information from improper and/or unauthorized alteration or destruction and validate that this hasn't happened until properly disposed

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of according to the Disposal of Confidential Information Policy. These include, but are not limited to the following:

1. Users may only change/amend Confidential Information in Information Systems and on their Workstations as described in County's policies and procedures.

2. Users, during the regular course of their job responsibilities, are required to check for and report any errors or potential errors involving Confidential Information identified in Information Systems.

3. Suspected and known data integrity issues are investigated and mitigated in accordance with the Incidents Policy.

4. The IT Division ensures that Information Systems are tested for accuracy and functionality before using them in the live environment. In addition, before integrating Confidential Information from one Information System into another, the data is validated.

5. While completing a risk analysis, County considers various risks to the integrity of Confidential Information and identifies security measures to reduce risks, as described in the Information Security Risk Management Policy.

6. Role based, minimum necessary access is authorized, and duties are segregated, as described in the System Access and Technology and Information Privacy and Security policies.

7. The following maintain an inventory / have the ability to identify in systems privileged access rights, indicating who has access to what, who has permission to do what, and the date when a document was last reviewed and updated.

    a. IT Division for Active Directory.

    b. System Administrators for other systems/applications.

8. Audit trails on Information Systems and Workstations are in place to identify all changes made to Confidential Information, as described in the Auditing and Technology and Information Privacy and Security policies.

9. Anti-virus/malware is installed and updated, as described in the Malicious Software Protections policy and Malware Standard.

10. Physical and technical security controls are in place to prevent unauthorized access to Workstations and Information Systems, as described in the and Technology and Information Privacy and Security; Information Privacy and Security; System Access; Facility Access (and Physical Security); Facility Use; Identification and Access Card; Key Issuance and Request Policy Changes; Facility Maintenance; and System Build/Change Control policies, procedures, and standards.

11. Encryption and other mechanisms to secure information, as described in this policy, are utilized to prevent transmission errors and unauthorized access to Confidential Information.

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12. Whenever possible, a hashing algorithm with a security strength equal to or greater than SHA-2 (Secure Hash Algorithm) as specified by the NIST SP 800-131AR1 (November 2015) is utilized to verify that ePHI has not been altered.

Reporting and Compliance

Refer to the Information Privacy and Security policy for requirements to report suspected and known non-compliance of this policy and procedure as well as potential outcomes for violations.

Key Definitions

For capitalized terms refer to the HIPAA Privacy and Security Definitions document.

Resources

- HIPAA COW Encryption Whitepaper, 2010
- Office for Civil Rights "Guidance to Render Unsecured PHI Unusable, Unreadable, or Indecipherable to Unauthorized Individuals"
- NIST Special Publications 800-52, Guidelines for the Selection and Use of Transport Layer Security (TLS) Implementations
- NIST Special Publications 800-57, Recommendation for Key Management, Part 1: General
- NIST Special Publications 800-77, Guide to IPsec VPNs
- NIST Special Publications 800-113, Guide to SSL VPNs
- NIST Special Publication 800-111, Guide to Storage Encryption Technologies for End User Devices
- NIST Special Publications 800-131AR1, Transitions: Recommendation for Transitioning the Use of Cryptographic Algorithms and Key Lengths, November 2015
- FIPS 140-2 Standard, 5/25/01 http://csrc.nist.gov/publications/fips/fips140-2/fips1402.pdf
- FIPS 140-2, 7/25/13 Implementation Guidance for FIPS PUB 140-2 and the Cryptographic Module Validation Program, http://csrc.nist.gov/groups/STM/cmvp/documents/fips140-2/FIPS1402IG.pdf
- SANS Acceptable Encryption Policy, June 2014

Applicable Standards/Regulations

- 45 CFR §164.312(a)(2)(iv) HIPAA Security Rule Encryption and Decryption
- 45 CFR §164.312(e)(1) HIPAA Security Rule Transmission Security
- 45 CFR §164.312(e)(2)(ii) HIPAA Security Rule Encryption
- 45 CFR. §164.312(c)(1) HIPAA Security Rule Integrity
- 45 CFR §164.312(c)(2) HIPAA Security Rule Mechanism to Authenticate Electronic PHI
- 45 CFR §164.312(e)(2)(i) HIPAA Security Rule Integrity Controls

(Adopted by the County Board 01/09/2024)

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STATEMENT OF EXPLANATION
COUNTY BOARD CHAIR APPOINTMENT - NORTHWEST ITBEC TOURSIM ADVISORY COMMITTEE

County Board Chairman Appointment to Special Committees

I, Chuck Hull, appoint, subject to County Board confirmation, Ellie Peabody, to the Northwest International Trade, Business, and Economic Development Council (ITBEC) Tourism Advisory Committee. Ellie will fill the term vacated by Sue Leonard. The term of office will expire April 21, 2026.

Dated this 14th day of October, 2025

Chuck Hull
County Board Chair

STATEMENT OF EXPLANATION
COUNTY ADMINISTRATOR APPOINTMENT - LCFM COMMITTEE

County Administrator Appointment to Statutory Commissions and Boards

I, Andy Albarado, appoint, subject to County Board confirmation, Ken Schmitt, to the Land Conservation and Forest Management Committee as the Chippewa County representative engaged in agricultural use, as defined under Wis. Stat. § 91.01(2)(a)1. to 7. Ken will fill the remainder of the term vacated by James Pingel. His term will expire March 10, 2027.

Dated this 14th day of October, 2025

Andy Albarado
County Administrator