Revised 04/10

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

Reset Form

Form Dual-Comp
Disclosure of simultaneous compensation from two state agencies

For office use only

Audited _____

Scanned _____

Effective July 1, 2006, an official or state employee shall not receive compensation simultaneously from more than one executive branch agency unless notice is provided to the Board within twenty business days of accepting employment with the second executive branch agency. This form constitutes notice. This form is not required to be filed for serving in the Iowa National Guard or General Assembly.

2012 DEC 31 AM 9:05
IA ETHICS AND CAMPAIGN DISCLOSURE B

Name of official or employee:
Lorrie L. Tritch

Name of original executive branch agency official or employee is employed:
Department of Administrative Services

Phone and email for official or employee:
515-281-8303 ltritch@dhs.state.ia.us (current)

Name of second executive branch agency from which compensation is received:
Department of Human Services

Amount of compensation to be received from second executive branch agency:
90% of the base salary, benefits, IPERS contributions and deferred compensation.

Please provide a brief explanation of what services are to be performed for the second executive branch agency:
The Iowa Department of Human Services and the Department of Administrative Services entered into an employee agreement that will enable the two agencies to share the expertise of this DAS-ITE manager. It is anticipated that the agreement will enable the State of Iowa to utilize the skills in the area of IT management and oversight for the Department of Human Services Division of Data Management.

Lorrie Tritch
Signature

12/28/12
Date

See Iowa Code section 68B.2B

Iowa Department of Administrative Services – Human Resources Enterprise

PERSONNEL MOBILITY ASSIGNMENT AGREEMENT

This form is to be completed prior to an interagency or interjurisdictional assignment of personnel as provided for in Iowa Code Chapter 28D. Address questions related to the completion of this form to the Iowa Department of Administrative Services–Human Resources Enterprise Personnel Officer assigned to your department.

PART I PARTIES TO THE AGREEMENT

Sending Agency:	Department of Administrative Services – Information Technology Enterprise (DAS-ITE)	**Receiving Agency:**	Iowa Department of Human Services (DHS)
Division:	Information Technology Enterprise (ITE)	**Division:**	Data Management
Location:	Hoover Building, Des Moines	**Location:**	Hoover Building, Des Moines
Contact Person:	Mike Carroll & Robert von Wolffradt	**Contact Person:**	Charles M. Palmer and Sally Titus
Phone:	(515) 281-3273 and (515) 725-0424	**Phone:**	(515) 281-5452 and (515) 281-6360
Email:	Mike.Carroll@iowa.gov Robert.vonwolffradt@iowa.gov	**Email:**	stitus@dhs.iowa.gov

PART II OBJECTIVES AND ANTICIPATED RESULTS OF THE MOBILITY ASSIGNMENT

The Iowa Department of Human Services and the Department of Administrative Services wish to enter into an employee sharing agreement that will enable the two agencies to share the expertise of the DAS-ITE manager, Lorrie Tritch. It is anticipated that this Agreement will enable the State of Iowa to utilize the skills in the area of IT management and oversight for the Department of Human Services' Division of Data Management.

PART III PARTICIPANT INFORMATION (if the position number or salary of the employee changes, submit a Report of Personnel Action)

A. **Name:** Lorrie Tritch

B. **Social Security Number:** On File

C. **Current Job Classification:** PSE 6

D. **Current Payroll Number (18 digits):** 005-123-6100-00788-001

E. **Mobility Payroll Number (10 digits):** No Change

F. X* **Funding paid by sending agency (DAS-ITE revolving fund)**

G. **Funding paid by receiving agency (billed)**

H. **Current Salary: $** Pay Grade 43
(Biweekly rate, grade, step)

I.* **Mobility Salary:** 90% of current salary/benefits
(Additional amount per pay period, if any)

* If items G or I are completed, the agreement requires Department of Management approval.

PART IV ASSIGNMENT SPECIFICS

Length of Assignment: From 11/9/2012 To 5/9/2013
(Not to exceed 24 months)

Duty Location: Des Moines, IA

Hours per week or % of fulltime: Up to 90% of time

Receiving Supervisor's Name: Sally Titus
Job Class: Deputy Director, DHS
Location: Des Moines, IA (Hoover State Office Building)

PART V ASSURANCES

In order to protect the interests of all parties, the following items must be considered and addressed here before finalization of this agreement: base pay, benefits, expenses, travel requirements, per diem, pay increases, holidays, annual leave, sick leave, retirement contributions, right of return, reimbursement, relinquishment of supervisory control, performance evaluations, and impact on organizational structure or duties and responsibilities of permanent positions.

Base Pay Salary and Pay Increases: The Employee's salary position, classification and State of Iowa employment benefits will remain unaffected. The Employee's Base Pay Salary is established in accordance with pay grade 43 classification, Public Service Executive 6, and will be in accordance with the policies of the Iowa Department of Administrative Services- Human Resources Enterprise relating to pay increases for state employees.

Benefits: The Employee shall be entitled to receive all employee benefits that State of Iowa employees are entitled to receive. For benefits that are calculated as a percentage of an employee's salary, the Employee's benefits shall be calculated based on the Employee's base pay salary plus her Mobility Salary.

Travel Requirements: There are no extra travel requirements.

Employee's Status: The Employee remains an employee of the DAS-ITE for all purposes except as otherwise provided in this Agreement.

Holidays, Annual Leave, and Sick Leave: The Employee will be entitled to holidays, annual leave, and sick leave in accordance with the employee leave policies that apply to all State of Iowa employees.

IPERS Contribution: The DHS shall be responsible for the employer contribution to the Employee's IPERS account attributable to 90% of the Employee's Base Pay Salary. DAS-ITE shall be responsible for the employer contributions to the Employee's IPERS account attributable to 10% of the Employee's Base Pay Salary.

Deferred Compensation: If the Employee opts to participate in the deferred compensation program offered to State of Iowa employees, DAS-ITE shall be responsible for 10% of the employer's matching contributions to the Employee's deferred compensation account and DHS shall be responsible for 90% of the employer's matching contributions to the Employee's deferred compensation account.

Right of Return: None

Reimbursement: On a bi-weekly basis, the DAS-ITE shall bill DHS for its 90% share of Base Salary, Benefits, IPERS Contributions, and Deferred Compensation. This will be managed through a payroll distribution process.

Supervisory Control: The Employee will have dual reporting to the DHS Deputy Director and the State CIO

Performance Evaluations: All performance evaluations and any disciplinary actions will be completed by the Deputy Director of DHS with input from the State CIO.

Impact on DAS Organizational Structure: The Employee will be assigned special projects as requested by the State CIO not to exceed 10% of the Employee's time unless negotiated differently between the two agencies.

Impact of DHS Organizational Structure: The Employee will report directly to the Deputy Director of DHS regarding all aspects related to duties and responsibilities the Employee provides for DHS pursuant to this Agreement.

Termination of Agreement: This agreement may be terminated with 30 days' written notice by either the sending or receiving agency.

A. Receiving Agency Obligations:
Pay 90% of Base Pay Salary and Salary-Related Expenses.
Pay 100% of all support and/or travel expenses relating to work performed by the Employee for DHS.
Consult with State CIO on any job performance evaluations and disciplinary action.
Provide office space and furniture, administrative support as well as telephones and necessary computers.

B. Sending Agency Obligations:
Pay 10% of Base Pay Salary and Salary-Related Expenses.
Pay 100% of all support and/or travel expenses relating to work performed by the Employee for the DAS-ITE and the State CIO.

C. Employee Obligations:
Satisfactorily perform all job duties performed for DHS as determined by the DHS Deputy Director.
Satisfactorily perform all job duties performed for DAS-ITE as determined by the State CIO.
Comply with all work rules established by the DHS and all work rules established by DAS-ITE as well as all work rules established by DAS-Human Resources Enterprise that apply to all state employees.

PART VI APPROVALS

A. Employee:

I, Lorrie Tritch, have read and understand all of the terms of this agreement providing for my mobility assignment to the Department of Human Services (DHS).

I also understand that this mobility assignment will commence on 11/9/2012 and end 5/9/2013, but that this agreement may be terminated earlier than the date noted here.

Employee Signature: Lorrie Tritch Date: 11/14/12

B. Sending State Agency:

I certify that I am authorized to enter into this agreement and that the agency which I represent will comply with the terms of the agreement and with the requirements of any laws and regulations pertinent to this agreement.

Official's Signature: Mike Carroll Date: 11/13/12

Official's Name and Title: Mike Carroll, Director of Iowa Department of Administrative Services

Official's Signature: Date:

Official's Name and Title: Robert Von Wolffradt, State Chief Information Officer

C. Receiving State Agency:

I certify that I am authorized to enter into this agreement and that the agency which I represent will comply with the terms of the agreement and with the requirements of any laws and regulations pertinent to this agreement.

Official's Signature: C M Palmer Date: 11/26/12

Official's Name and Title: Charles M. Palmer, Director

Official's Signature: Sally Titus

Official's Name and Title: Sally Titus, Deputy Director

D. Other Governmental Agency (applicable only if the agreement is between the State and a political subdivision of the State or the State and the federal government):

Receiving ☐ Sending ☐

Official's Signature: _____ Date: _____

Official's Name and Title: _____

E. Department of Administrative Services – Human Resources Enterprise:

All requests for Personnel Mobility Assignments are subject to prior approval by the Department of Administrative Services – Human Resources Enterprise before becoming final.

Comment:

Approved ☐ Disapproved ☐

Official's Signature: [signature] Date: 11/14/12

Official's Name and Title: Michelle Minnehan-Golightly, Chief Operating Officer of DAS-HRE

F. Department of Management (applicable only if Part III items G or I are completed):

Comment:

Approved ☒ Disapproved ☐

Official's Signature: [signature] Date: 12/1/12

Official's Name and Title: Dave Roederer, Director of Department of Management

G. Executive Council (applicable only if the agreement is between the State and a political subdivision of the State):

Comment:

Approved ☐ Disapproved ☐

Official's Signature: _____ Date: _____

Official's Name and Title: _____

4 copies: Employee, Sending Agency, Receiving Agency, Department of Administrative Services – Human Resources Enterprise, and if applicable: Executive Council, Department of Management, and other governmental agency