

Board of Health Meeting

June 12, 2017

Board of Health Members in attendance: Paul Bradshaw, Chair, Linda Heath, Linda Peterson, Dr. Beth Turner, Dr. Elizabeth Bryan, Commissioner Harry Parker, Dr. Jeffrey Bell, Allie Ray McCullen, Jacqueline Howard and Robert Butler.

III. Call to Order: Mr. Paul Bradshaw, Chair called Board of Health meeting to order.

IV. Approval of April 2017 minutes:

Motion made to approve the minutes April 17, 2017 with the adjustments to the minutes, adding Robert Butler and Linda Heath to board members in attendance, was made by Jacqueline Howard, 2nd by Robert Butler. All approved. Motion passed.

V. Additions/Deletions to agenda:

Addition to agenda made by Wanda Robinson, HPV Research Project need to approve \$2500 grant.

VI. HPV Research Project:

Kathie Johnson reported collaboration with UNC Research Project My Body, My Test. We have been working last October to get project in place and began the research project June 1, 2017. UNC has multiple objectives; first one is testing a new type of sample specimen collection kit, that women can be use at home, like a home Pap test. What the test will be looking for is HPV, Chlamydia/ Gonorrhea. This test is real important especially for HPV because it causes reproductive cancers in both men and women, particularly cervical cancer in women. To qualify for this test, must have been at least 4 years or long since having a pap test. UNC will contact the women and complete all the paperwork and agreements to participate in the research project. The women will perform the test at home and send the test specimens to UNC. They receive the test results and then call to schedule an appointment with the contact person at the health department. The health department does the in house testing-comparing the home testing results with known proven testing kits that health department uses to see how well the home testing works.

The second objective is to get women in for pap testing and a physical, because if it has 4 or more years since last pap, has probably not had any kind of physical done. The woman will be offered a choice of just repeating the pap or being given a head to toe physical at no cost to the woman.

We have starting advertising in the on the Health Department Facebook page, County website, starting to place announcement on cable and in process of writing an article for the newspaper to tell women that live in our county who would be interested in participating, how to get involved in the study. This will be an ongoing research project, about three to

four years if not longer. Question asked by Dr. Bryan, "Is it actually doing a pap or just testing for HPV, Chlamydia and Gonorrhea?" Kathie Johnson explained the way the collection spatula shaped, part of the cervical component, if they follow the instructions that come with the kit. When the report is received it will contain a Pap smear report.

Along with this research project comes a grant of \$2500 dollars that will be used for pap, gonorrhea and chlamydia supplies. Motion made to accept the grant money made by Linda Health, seconded by Jacqueline Howard and approved by all. Motion carried.

VII. Consent Agenda:

a. Healthy Communities -\$3810

Budget has been done and is with the County Commissioners. We have received additional money to be added to the '17-'18 budget for the Healthy Communities. Healthy Communities is when the Health Educator goes out and does education, especially for the opioid issues and to be used for education outreach.

Motion made by Jacqueline Howard to approve \$3810 to be added to the Healthy Communities '17-'18 budget, seconded by Linda Health, all in favor. Motion passed.

VIII. Financial Report-

Fee Schedule '17-'18

Report shows the charges and the actual cost of the fees. Typically take the actual cost and add a 20 to 25% mark-up. Several CPT codes with different modifiers are duplicated on the fee schedule to allow for reporting to the state or billing to Medicaid/Insurance. CPT codes with modifiers are used to keep from Intake/Eligibility staff from having to zero out charges that need to be reported to the state that should be a zero charge or billing to Medicaid/Insurance when the fee is already covered in the Physical charge. Insurance can be billed with the 20-25% markup price and CPT codes set with modifier to bill. This was suggested by Steven Garner, our dedicated Cost Settlement Consultant.

Examples: 340 B drugs-cannot bill Medicaid and more cost it was acquired. Liletta goes on sale for \$50, we have to charge \$50 to Medicaid, now Liletta is more expensive and insurance will reimburse us more, we cannot do any mark up for staff time or anything else and charge Medicaid, but we can do the mark-up to be billed to insurance.

CPT codes with modifiers SL used for state supplied vaccines-have to be reported to the state.

Motion was made by Dr. Beth Turner to accept the Fee Schedule '17-'18, seconded by Commissioner Harry Parker, all in favor. Motion passed.

Fiscal Policy 2016-

No a lot of changes from last year- added Family Planning verbiage-Family Planning clients with private insurance will be billed the lesser of the two amounts. This means, when the

total charges are calculated and based on the sliding fee scale, the fee to be charged is more than the patient's co-pay, the patient will only be required to pay the co-pay amount. If the fee is less than the patient's co-pay, the patient would pay the fee amount instead of the co-pay amount. The balance remaining will be billed to the insurance company, when insurance payment is received; the remaining balance is applied to the Family Planning sliding fee scale for that patient.

The purchase order process was changed to cut out some steps that were duplications. The county policy is followed for purchase orders. There is a double system in place with anything that we purchase. Purchasing policy is the County Purchasing policy, created the process of handling the purchase order process.

Motion was made by Dr. Turner to approve the Fiscal Policy 2016, seconded by Dr. Bryan, all in favor. Motion was passed.

Activity Summary Report-

Tamra reviewed the Other Operating Expenses due to questions at last meeting, discovered an issue with Excel formulas and that some numbers in the 16-17 columns were the actual expenses not the budgeted expenses. See handout corrected Budget 2017-2018 for the Salaries and other operating expenses.

See May Activity Summary and Revenues handout. Medicaid Revenues-received 2 cost settlements this year. Cost settlement for 14-15 came in on April 17, 2017. We have received a total cost settlement of \$206,672 for 13-14 year and 14-15. Typically we only get one cost settlement a year. Wanda pointed out at that year difference total were all in the positive for this year. We have noticed that with the second Nurse Practitioner in house has really made difference this year in revenues. Looking forward to other things that will enhance the revenues for next year, have a Child Health nurse just became certified, having an influx of children needing physical exams due the school law put in place last year that requires physical exam for any child when entering in the school system. A provider has requested for the health department to see their Health Check clients. We can really see significant increases in the revenues in the last six months over the first six months of the year.

The local revenues- the only program that is not where it needs to be is the Maternal Health program. Most of our maternal health patients slide, once they slide we can bill them, they end up in what the county calls debt set off. We receive that money from their tax returns. We bill clients for 3 months, those with no payment or payment plan with us are turned over to collections, 3 letters then goes out from collections, no response turned over to court and debt set off. Attach the State Tax return not the federal.

Environmental Health Revenues- February, March and April revenues has increased each month, this is with still being short one person.

IX. Health Directors Report-

Everyone received their packets this month. We will be getting the packets out the week before the meeting date and will be sending packets out by email. You may contact Wanda Robinson or Sally DeMay for any questions.

Plan to have staff from different programs to speak and present their programs for the board. Plan to have Family Planning Coordinator to speak at the next meeting.

Reviewed the Pocket Guide statistics for Sampson County-see attached.

Next meeting scheduled for Monday, June 19, 2017 will be cancelled.

Next regularly scheduled meeting will be held in August 21, 2017 at Ribeye's.

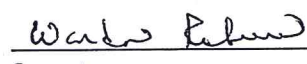
X. Public Comment: None

XI. Adjournment:

Motion to adjourn made by Linda Peterson, seconded by Dr. Beth Turner, all were in favor.
Motion passed.


Chairman

8-21-17
Date


Secretary

8/21/2017
Date