

MINUTES
Goodhue County Public Health Service
BOARD OF HEALTH MEETING
Tuesday, June 22, 2004
9:30 – 11:00 a.m.
County Board Room
Red Wing, MN 55066

Members Present

Ted Siefert
Roseanne Grosso
Robert Noah
Richard Samuelson
Jim Bryant

Members Absent

Others Present

Jason Petersen
Sue Morgan
Kristine Holst
Stacy Mehrkens
Krista Early
Karen Main
Susan Brace-Adkins

I. Call to Order

Chairperson Grosso called the meeting to order at 9:32 a.m. in the Goodhue County Board Room.

II. Pledge of Allegiance was recited.

III. Approval of Agenda

C/Bryant stated that he has a report for under the Advisory Committee

Motion by Jim Bryant to approve the June 22, 2004 amended agenda, seconded by Ted Seifert, carried to approve.

IV. Approval of Minutes

Motion by Bob Noah, seconded by Richard Samuelson, carried to approve the minutes of the May 25th, 2004 meeting as presented.

V. Motion by Richard Samuelson, seconded by Jim Bryant, and carried to approve the following item on the Consent Agenda.

- a. Contract with Goodhue County Education District for health consultation services.
7/1/2004-6/30/2005

VI. Review of Financial Reports – Kristine Holst

Positive Revenue Variance for May 2004

\$15,957 surplus

- Positive Revenue variance from Medicare, increase in the average # of clients
- Positive Revenue variance from CADI Waiver, increase in the average # of clients/visits
- Positive Revenue variance from South Country Health Alliance Initiatives
- Positive Revenue variance for Environmental Health septic system permits, due to the Grandfather Clause.
- Negative Revenue variance from Alternative Care, decrease in average # of visits & clients

Positive Expense Variance for May 2004

\$12,239 surplus

- Positive employment variance from open positions

Net Positive Variance for May 2004

\$28,196 surplus

Positive TYD Variance

\$118,072 surplus

C/Grosso questioned the number of staff positions that PHS has budgeted and are currently open, K/Holst stated that there is a little over 1 fte HHA position open. K/Holst stated that the compensation study was paid out in June and those dollars will be coming out of the surplus, from here on out there will be a new hourly rate for some employees. Also stated that the CIDM training in July will also be paid out of the surplus, although the Bio-terrorism grant dollars are funding the training the BT money is received monthly so we have already been reimbursed from the grant for the training; it is shown in the surplus.

Reserve Fund Balance

The first sheet explains the PHS reserve accounts and states the current funding levels of each. These reserve accounts were set up sometime in 1996 between the Board of Health and the Administrator at that time. C/Grosso questioned where the funding of \$60,000 came from that was put in there each year from 1996-2000. C/Samuelson stated that it was the intent for the 5% increase of the levy was to go to the reserve, C/Seifert questioned in PHS still sees the 5% levy increase and that it is not going into the reserve account? K/Holst stated that she has done some work on the tax levy history, over the last three years we had gone up, gone down, etc.

In talking with Amy Hove and Brad Johnson, I have learned a lot about reserve funds, unreserved, undesignated funds, and Board designated funds, plus the appropriate funding levels of each. The second sheet explains these three types of funds that are within a fund balance, and the funding levels that Public Health should be at to comply with State Audit guidelines.

After reviewing this information, it appears the current PHS "reserve account" needs to be changed or updated. PHS should have the three types of funds within their fund balance, and work towards beginning to fund them to the appropriate levels to comply with State Audit guidelines. Current fund balance total is \$643,227 with the State guidelines being recommended at \$1,052,322.

C/Noah asked if there was a problem the way we have them set up; K/Holst stated that the State has sent out memos stating that they recommend that we follow the guidelines. C/Bryant stated that as we operate during the year he likes the term "guidelines", and that PHS is a lot better off than what we were in 1996-1998. C/Noah stated that we may not like what the State has to say, they are the ones that Audit us, stated that he likes the old reserve. K/Holst stated that the reserve account information is just for information at this time and that she is not asking for them to change anything. C/Samuelson stated that he remembers when there was not a reserve fund set up and they spent a lot of time worrying about where we are going to get the money, borrowing from the County, etc. It is a good plan and we should stick with it.

Fee Schedule Recommendation

Goodhue County Public Health Service received information from Medical Assistance stating changes in billing for Public Health Nursing Clinic-office visits, which are services offered to clients and the community at a clinic setting. Based on the information received from Medical Assistance, and in order to recoup the reimbursement rates Medical Assistance will pay, it is recommended we change our fees for PHN Clinic-office visits.

Previously, Goodhue County Public Health was allowed to bill 4 different clinic services to Medical Assistance for the PHN Clinic – office visits. We could bill up to 2 clinic services per day, per client. These services and charges were as follows:

Nursing Assessment	\$20.00 per visit
Health Promotion/Counseling	\$60.00 per hour
Nurse Treatment	\$20.00 per visit
Medication Management	\$15.00 per visit

Medical Assistance is now allowing only one clinic or office visit to be billed per day, per client, and the reimbursement rate for the one office visit will be \$41.84. C/Noah asked if we are going to get less money or if it is just a change in billing? K/Holst stated that it would be either positive or neutral; Public Health would not be losing any money.

Accept the change in fees for the PHN Clinic – office visit to \$42.00 per clinic visit, per day and implement effective July 1, 2004.

Motion by Bob Noah, seconded by Ted Seifert, motion carried to accept the change in fees for PHN Clinic – office visit to \$42.00 per clinic visit and implement effective July 1, 2004.

Personnel Report

A. Director's Report – Karen Main

- Interviewed 6 candidates for the Community Health Specialist position and introduced Susan Brace-Adkins who was hired as the Community Health Specialist. Susan updated the Board on her background, and stated that she has a lot of experience in community collaboration and finding common ground for the County.
- J/Petersen stated that the contracted Tobacco position which bioterrorism has been incorporated into is closed to being wrapped up; have chosen Susan Johnson to fill the position, the County Attorney's office is still in the process of reviewing the contract and Susan Johnson she will be starting as soon as the contract is approved by the County Attorney. As a contract employee she will not have County benefits; C/Seifert questioned the length of the contract? J/Petersen stated that it is two separate contracts since it is two grants; the Bio-terrorism funding ends in August and have not heard whether or not additional funds will be available after that and the Tobacco Cessation grant ends the end of 2005. C/Grosso questioned if S/Johnson has been informed of the deadlines of the grants, and J/Petersen stated that Susan is aware of it and is familiar with working with grants.
- Participated in the Nuclear Drill Exercise over at the EOC, received very positive feedback from FEMA.
- Met with a lady from Cannon Falls Hospital regarding an Economic Study of healthcare; Fairview will be participating and will be meeting with staff from Lake City hospital this afternoon to see if they are also interested in participating. These facilities will also be sending people to the CIDM training in July.
- Referenced the invitation list for the CIDM training and distributed a list that shows what areas the participants are coming from, working on filling in the gaps, C/Seifert questioned if the training is open to the Public? K/Main stated that these people were all invited and were suggestions made by the Advisory Committee members. C/Bryant stated that 2 ½ days in the middle of the summer may be the downfall. C/Bryant asked if they asked the people that were previously utilized in the focus groups were contacted; S/Mehrkens will get that list to staff to double check. C/Seifert asked how the Advisory Group will fall into the Health Council, K/Main stated that her hope is that the Council and Advisory Board will all fold together.

B. Supervisor Report

- There have been some major changes in how the Community Alternatives for Disabled Individuals (CADI) Program is managed. The Department of Human Services turned over the financial management of this waiver to the counties in April of this year. We have sent staff to trainings & actually had Larry Riess from DHS come to our agency to do on-site training. The CADI budget, just for Goodhue County is approximately 3 million dollars. These dollars are to be spent on a finite number of clients in Goodhue County. This has changed dramatically the number of clients we can serve as well as our ability to provide for their service and equipment needs. We are learning day by day, but find this to be challenging at best, & very time consuming. It will be necessary to keep costs within specific guidelines, as no additional dollars will be coming from the state, beyond what has been allocated. As clients across the state feel these changes, we expect appeals to become more common.
- Our Adult Health staff is participating in telephone conferences this month to increase our knowledge base on coding. The teleconference allows us to include all nurses in this education, without having to leave the office or pay for mileage. This will result in increased accuracy on coding for client diagnoses.
- Our referrals numbers continue to remain high. Which are very comparable to last year, which was a big increase year for family health. Everyone is keeping busy and covering for each others vacations as best as possible.
- We have been getting more referrals in for our Personal Care Assistant program, which we do the assessments for. This is a common increase we often see as summer vacations are starting and parents of children with disabilities need more assistance as the children are out of school.
- Census is down at this time in the jail. We are currently working away and Dr. Blue is off for 3 weeks, so we are having no MD clinics at this time. We are able to reach him by cell phone to get orders for medications and such.

C/Seifert questioned if every child gets screened for Vision and Hearing, K/Early stated that is apart of pre-school screenings.

C. Environmental Health Report – Jason Petersen

- The month of May was busy with reviewing an increased number of septic, well and building permits. This was due to the pending expiration of the 10-year parcel of record clause in the Zoning Ordinance. Everything had to be reviewed twice, once to look for completeness and then reviewed for codes; there is one out-liar that is still being dealt with. C/Seifert stated that there had been people sitting on a parcel for 10 years, and now new construction needs to be started within 6 months. J/Petersen stated that there are some interesting dwellings being built, sheds with finished kitchen areas, etc.
- J/Petersen stated that the property tax information on the website is a great tool for the contractors, etc.
- Septic permits had the most significant increase. In 2003, we had issued 82 septic permits issued at the end of May. This year we had 102.

VIII. Old Business – Public Health Board Meeting Date

C/Grosso stated that she is opening it up for discussion regarding Public Health Board meetings being held the same days as the Welfare Board meetings on the 4th Tuesday of each month. C/Grosso stated that she would like to hear from everyone as to how they feel it is working.

C/Samuelsen stated that he likes it the old way; with meeting on the second Tuesday. C/Bryant stated he feels that it is going well and is working out; C/Seifert also stated that he believes it is working; C/Samuelsen stated that the system that we are in now is cramming everything together and feels that it is not in the best interest of the Goodhue County. C/Noah stated that he agrees with C/Samuelsen and stated that each agency deserves its own meeting day.

Motion by Jim Bryant, seconded by Ted Seifert, carried 3-2; Samuelson & Noah opposed; to hold the Public Health Board meetings on the fourth Tuesday, same as the Welfare Board until the end of 2004.

IX. New Business

C/Bryant stated that he received a copy of the letter sent from Mary Ann Burfeind, a member of Advisory Committee stating that she is resigning from the Committee after 14 years of service. C/Bryant talked with her this morning, and told her that she will be missed.

Motion by Jim Bryant, seconded by Roseanne Grosso, motion carried to accept the resignation of Mary Ann Burfeind from the Public Health Service Advisory Committee.

C/Bryant will bring a name for a replacement to a future Public Health Board meeting. C/Grosso asked that a letter be written on behalf of the Board, thanking her for her service.

X. Committee Reports

1. Administrative/Finance Committee – C/Grosso
 - have not met
2. PHS Advisory Committee – C/Grosso
 - will be meeting in July for a quarterly meeting
3. South Country Health Alliance – C/Noah
 - Meets on the second Monday of each month.
 - Working on goals for the year, again continues to be a popular organization, there are 6 counties that want to join. Most of the them are northern counties and there is the idea to have a northern and a southern health alliance that are tied into each other.
 - Approved an addition to staff, also approved a health care analyst position to work with the Counties. C/Samuelsen questioned what about those Counties that stayed with PMAP? C/Noah stated that they do not have reserves built up like SCHA does.
 - Trying to negotiate a new contract with UCARE who is the administrator, UCARE is asking a reasonable rate, although some of the things are out of line.
 - C/Grosso questioned if the UCARE billing issues had been straightened out, C/Noah stated that they have and they are now very efficient.

- C/Bryant questioned if Mower County has talked about what to become a part of it again? They dropped out and lost some money and now it might not be bad time to get back in.
- 4. SCHSAC – C/Seifert
 - Have not met since last meeting. Quarterly reports have been distributed.
 - K/Main stated that they sent out an email regarding the new responsibilities.
- 5. S.E. EMS Committee – C/Noah
 - Did not attend meeting

XI. Other

A) Approval of Disbursements

- totaling \$17,461.13 from May 24, 2004 – June 11, 2004.

Motion made by Bob Noah, seconded by Jim Bryant, motion carried to approve the May & June 2004 disbursements.

XIV. Adjournment

The PHS Board meeting adjourned at 11:06 a.m.

Motion made by Ted Seifert, second by Jim Bryant, motion carried to adjourn the PHS Board meeting.

Respectfully Submitted:

Karen Main, Director of Public Health

Richard Samuelson, PHS Board Secretary