

**Warren County Health Services  
Health Services Committee Meeting Agenda  
July 23, 2010  
Information Submitted By: Patricia Auer, DPH/DPS**

**Action Agenda: New Business**

**Request Resolution:**

To amend the contract with Stacie Dimezza, SLP, CCC, to include authorization for providing educational sessions which would be 100% reimbursed by the Children With Special Health Care Needs Grant.

**Rationale:**

One of the deliverables in the Children With Special Health Care Needs grant is to provide educational opportunities pertinent to this subject for parents and professionals. Ms. DiMezza is under contract to provide speech therapy services to children in the Early Intervention and Preschool Special Needs program where she is paid from the contractual services budget for these programs, but there is no provision in her contract for her to provide educational programs. This is not expected to happen often, and the compensation would be set at \$250.00 and would include both planning and presentation.

**Request Committee Approval:**

To authorize payment for breakfasts for the quarterly Professional Advisory Committee Meetings and quarterly Public Health Utilization Review Committee Meetings, and the Annual School Nurse Meeting.

**Rationale:**

The Professional Advisory and Utilization Review Committee Meetings are required by New York State Department of Health. The breakfast meeting times work for the physicians and community members, and other agency members, and food aids in assuring attendance. The cost for these eight meetings based on past year trends will not exceed \$750.00. The School Nurse Meeting is fully grant funded.

Several years ago, we were told that the committee needed to authorize any funds expended for foods served outside the Municipal Center.

**Request Committee Approval:**

To allow Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator, to attend the Home Care Association of New York State Senior and Financial Manager Retreat in Saratoga Springs on August 17 and 18 at a cost of \$469.00.

**Rationale:**

This conference will provide the most up to date information regarding reimbursements and the future for home health care. It is necessary to have this information for planning. We have funding available in our education budget, and are fortunate there are no costs other than the conference fee.

**Request Referral to Personnel Committee:**

For consideration to backfill a Principal Clerk Position due to a resignation.

Grade 7: Base Salary \$28,532

Current Employee's Salary \$30,056

**Rationale:**

The vacancy will occur on August 13, 2010, because the employee is moving out of state. The position is not mandated, but does directly impact expenditures and the recoupment of reimbursement for the mandated Early Intervention and Preschool Programs. The position is in the Preventive Code so it receives 36% State Aid. The scope of job responsibilities includes oversight of and payment for Transportation Services and Early Intervention and Preschool Services as well as billing for maximizing reimbursements to the county wherever possible. The 2010 Appropriations for the Early Intervention and Preschool Programs total \$6,495,431, a very substantial sum.

The other concern is there is no list, so the individual hired, would only be provisional, and would need to pass the test in the top three when it is given next spring. Hopefully, the individual would be successful in this regard because the learning curve to understand these two programs is tremendous.

**Request Resolution:**

To amend the contract agreement with Capital District Physicians Health Plan (CDPHP) at the plan's request to reflect new contract language to meet new state and/or federal regulatory requirements.

**Rationale:**

This amendment will shorten the time frames for claim submissions, and will incorporate Medicare's modified language to protect dual-eligible enrollees from incurring liability for certain cost sharing amounts.

**Pending Items: Old Business**

**Emergency Preparedness Program Update:**

Please see **Attachment #1** detailing monthly activities.

The grants associated with this program continue to be extremely cumbersome, and there are always elements of unknown. As you are aware from last week's Board of Supervisor's Meeting, it was necessary to do two Post Committee Resolutions to transfer funds, and to request the ability to amend the 2010 Budget to accept funding for the coming grant year August 10, 2010 – August 9, 2011 if a letter of intent for the funds is received by August 9, 2010. We have yet to receive this notification and will be attending a meeting in Albany on July 30<sup>th</sup> where we should hear. If we do not, the Emergency Preparedness Program which includes one contractual employee, one part time employee and one per diem employee, and a variety of other line items will be deleted until such time as the grant funding is reinstated.

Ginelle Jones, Assistant Director of Public Health, will provide an update of the program in relation to grant maximization at the meeting.

**Preschool Financial Issue:**

We have heard nothing further from the facility's attorney. The one Warren County preschooler who was receiving services at the facility is no longer.

**Topics for Discussion/Information**

**Report of Expenditures, Revenues, Overtime and Per Diem Use:**

Please see **Attachment #2**.

Tawn Driscoll, Fiscal Manager, will be present at the meeting to answer any questions.

**Report of Free and Reduced Fee Care:**

Please see **Attachment #3**.

**Transfer of Funds Request**

**Other Information:**

The University at Albany's Cancer Research Center is submitting a directed congressional grant request to the Defense Appropriations Committee through Congressman Scott Murphy for the purpose of studying the role of long term exposure to environmental contaminants in the development of bladder cancer in counties along the Hudson and Mohawk Rivers. Public Health Commissioners and Directors in the applicable counties have been requested to sign in support of the grant application. No financial support from counties is requested, but after conversation with County Administrator/Attorney, we just want to bring it to the committee for your information.

**Attachments:**

Monthly Emergency Response Program Activities (**Attachment #1**)

Report of Expenditures, Revenues, Overtime and Per Diem Use (**Attachment #2**)

Report of Free and Reduced Fee Care (**Attachment #3**)

WARREN COUNTY HEALTH SERVICES

BT ACTIVITY SHEET

GY 10 - 8/10/2009 - 8/9/2010

Page 1

Topic Color Codes

Red/Chempack; Green/SNS; Blue/Mass Fatality; Black/Training; Orange/Drill; Purple/Pan Flu

Date	Type	Subject/Comments	Attendees	Topic Chempack, Mass Fatality, Training, Pan Flu	(i.e. Drill, SNS,
7/7/10	Meeting	SNS	Barb Orton, Amy Manney, Bud York	SNS	
7/8/10	Meeting	BT Plans	Barb Orton, Amy Bartlett		
7/13/10	Meeting	Hazard Mitigation Review	Laura Saffer, Amy Manney et.al		
7/14/10	Meeting	Quarterly PH ERP	Barb Orton, et.al		
7/14/10	Training	CART	Laura Saffer	Training	
7/20/10	Training	Volunteer	Laura Saffer, Barb Orton et.al	Training	
7/21/10	Tabletop	Monthly GFH - Mass casualty event in Lake George	Barb Orton, Laura Saffer		
7/22/10	Training	Using Social Media During Extreme Events	Barb Orton, Laura Saffer	Training	
7/22/10	Meeting	Monthly BT Coordinators	Barb Orton, Laura Saffer		
7/22/10	Webinar	H1N1	Ginelle Jones	Pan Flu	
7/30/10	Meeting	GY11 Deliverables	Pat Auer, Ginelle Jones		

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR 2010 AS OF 7/16/2010 9:28:12 AM

FUND(S): A, CL, D, DM, EF, GI, MS, SD, V

CODE(S): 4010, 4011, 4013, 4016, 4018, 4046, 4054, 4189, 9061, 4025

EXPENSES	2010 BUDGETED	2010 YTD ACTUAL	2009 Prior Year Totals
Salaries - Regular	\$3,010,719.79	\$1,453,138.57	\$2,972,776.51
Salaries - Overtime	\$158,054.20	\$80,373.57	\$181,571.28
Salaries - Part Time	\$406,599.22	\$117,163.38	\$268,308.45
Salaries - Sick Leave Incentive			\$800.00
100's PERSONAL SERVICES	\$3,575,373.21	\$1,650,676.52	\$3,423,456.24
200's EQUIPMENT	\$80,800.00	\$6,795.14	\$3,430.29
400's CONTRACTUAL	\$10,453,594.00	\$3,599,223.47	\$9,547,634.62
800's EMPLOYEE BENEFITS	\$38,688.00	\$35,015.66	\$59,899.69
<b>TOTALS</b>	<b>\$14,148,466.21</b>	<b>\$5,291,709.79</b>	<b>\$13,034,420.84</b>

REVENUES	2010 BUDGETED	2010 YTD ACTUAL	2009 Prior Year Totals
	\$13,204,527.00	\$3,227,907.27	\$11,688,704.48

Note: Accrued is the 2nd quarter Lead Grant for \$7517.71 and for the June WIC Grant of \$52,166. We are currently working on closing June billings for the CHHA, LTC and MCH Programs by month end.

It should also be noted that the Preschool Program (which is mandated) has not paid anything in 2010 on any outstanding AVL's from previous years that are due. We also want to note that the state is still holding on allowing us to bill Medicaid for Preschool services from July 2009 to current. Therefore both 2009 and 2010 revenues are understated. A recent memo from the state noted that they hope to be able to give us permission soon to backbill but only retro to September 2009. We are anticipating to be able to start to retro bill for Preschool Medicaid by fall of 2010.

Warren County Health Services  
Salaries Comparison  
2009 vs 2010  
as of 7/14/10 for 13.21 payrolls

Total of All Depts	YTD 2010	YTD 2009	YTD 10/09	% Change	Budget 2010	Actual 2009
Regular Salaries	\$1,453,138.57	\$1,543,134.85	-\$89,996.28	-5.83%	\$3,010,719.79	\$2,972,776.51
Overtime Salaries	\$80,373.57	\$98,344.72	-\$17,971.15	-18.27%	\$158,054.20	\$181,571.28
Part Time Salaries	\$117,163.38	\$138,230.35	-\$21,066.97	-15.24%	\$406,599.22	\$268,308.45
Sick Leave Incentive	\$0.00	\$0.00	\$0.00	0.00%	\$0.00	\$800.00
<b>TOTALS for 26 Pay periods</b>	<b>\$1,650,676.52</b>	<b>\$1,779,709.92</b>	<b>-\$129,034.40</b>	<b>-7.25%</b>	<b>\$3,575,373.21</b>	<b>\$3,423,456.24</b>

\*Source: Detail G/L report for all Salary Category from 1/1/00-7/1/10  
Payroll reflects 13 full payrolls and .21 of a payroll for the 13/10 payroll ending period.  
Note: Payroll reflects the annual 3% increase in union salaries for 2010.

ATTACHMENT 2

Free and Reduced Fee Care

01-12 / 2009

Free Care- \$54,680.00

Home care services in both CHHA/LTC and Public Health.

Reduced Fee Care - \$3,716.00

Reduced home care in the CHHA

Total: \$58,396.00

Free and Reduced Fee Care

01 & 02 / 2010

Free Care - \$10,850.00

Home care services for CHHA & LTC

Reduced Fee Care - 0 \$

Free and Reduced Fee Care

03/ 2010

Free Care - \$6,150.00

Reduced Fee Care - 0

Free and Reduced Fee Care

04/2010

Free Care - \$5,350.00

Reduced Fee Care - 0

Free and Reduced Fee Care

05/2010

Free Care - \$7,990.00

Reduced Fee Care - 0

Free and Reduced Fee Care

06/2010

Free Care - \$8,540.00

Reduced Fee Care - 0

--- \$38,880.00 Jan. -- June, 2010

Note: When providing care for patients that have traditional Medicare insurance the agency has to provide all medical supplies except for Durable Medical Equipment (DME) needed to render care. We are seeing an increase in the number of patients requiring a medical supply called a pleurx drainage kit. These drains are specific for drainage if fluid in the pleural cavity (lung area). We order them on state contract for the lowest available cost. The cost runs us \$600.00/ case containing 10 drains / case. These drains need to be changed as frequently as 1-2 times per day.

Attachment #3

## RESOLUTION REQUEST FORM NO. 4

### Request for Extending, Rescinding or Amending Resolution

DEPARTMENT NAME: Health Services

DATE: July 23, 2010

- (a) Purpose of Contract Change: To amend contract with Stacie DiMezza SLP CCC to include authorization for providing education sessions paid by Children With Special Health Care Needs SRM7
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: On file with County Attorney office
- (c) Name of Contractor: Stacie DiMezza
- (d) Address of Contractor: 28 Monument Avenue, Glens Falls, NY 12801
- (e) Contractor's Contact Person and Telephone Number: Stacie DiMezza, 743-9941
- (f) Commencement Date of Amendment: 7/1/10
- (g) Termination Date of Extension: 30-day termination by either party
- (h) Payment Provisions: \$250.00 per educational session after completion of the program
  - i) lump sum amount Voucher submission with attached program agenda
  - ii) hourly rate amount
  - iii) total amount not to exceed
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (i) Where are the Funds for this Contract ? List Budget Code, (with title), Object Code (with title), and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount: A4018.0020.470 Family Health Contract Expense

# Warren County Board of Supervisors

RESOLUTION NO. 405 OF 2008

Resolution introduced by Supervisors Sokol, Sheehan, Haskell, Thomas, Tessier, Champagne and O'Connor

## AMENDING AGREEMENT WITH PSYCHOLOGICAL ASSOCIATES OF NORTHEASTERN NEW YORK, INC., P.C. D/B/A PSYCHOLOGICAL ASSOCIATES TO INCLUDE STAFF EDUCATION FOR THERAPIST - HEALTH SERVICES DEPARTMENT

WHEREAS, Warren County entered into an agreement with <sup>Stacie DeMezzo</sup> Psychological Associates of Northeastern New York, Inc., P.C. d/b/a Psychological Associates

~~(Resolution No. 391 of 2004) pursuant to Section 4410 of the Education Law, to provide certain educational and/or health supportive services to children with disabling~~

conditions under the Early Intervention and/or Preschool Children with Disabilities

Programs, for amounts <sup>set per visit</sup> ~~not to exceed the statutory provisions governed by the~~

~~Commissioner of Education and/or Commissioner of Health, and for the term~~

commencing July 1, 2004 and renewing automatically for successive one-year periods

unless terminated with thirty (30) days written notice by either party, and

WHEREAS, the Director of Public Health/Patient Services has requested to

amend the above services to include a provision for staff education for therapists,

<sup>parents or other individuals with children</sup> ~~providing services to children~~ involved in the Early Intervention and Preschool Special

Needs Programs at a rate of Two Hundred Fifty Dollars (\$250) per session, for a term

to commence on ~~June 23, 2008~~ <sup>July 1, 2010</sup> and the Health Services Committee recommends said

inclusion, now, therefore, be it

RESOLVED, that the Chairman of the Board of Supervisors be, and hereby is,

authorized to execute an amendment agreement with <sup>Stacie DeMezzo</sup> Psychological Associates of

~~Northeastern New York, Inc., P.C. d/b/a Psychological Associates, 551 Bay Road,~~

# Warren County Request to Host Meeting or Conference

**Name of Department:** Health Services

**Name of Meeting/Conference:** Professional Advisory Committee

**Date:** Meets quarterly 7:30-9:00am

**Location:** Presently Carl R's Restaurant, breakfast offered as incentive of attendance

**Purpose:** Committee is required by NYSDOH and must be comprised of members representing various agencies/individuals with specific expertise and function. Minutes are kept and must be made available to NYSDOH at surveys.

**Contact Person:** (If other than Department Head)

**Phone No.:** 761-6580

**Number of People attending:**

County Employees

State Employees

Volunteers

Others (specify) Members are appointed annually by resolution, see attached list

**Cost to County (please include amounts):**

Room rental \$

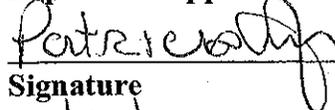
Food/beverage \$ 500.00/year for breakfast depending on attendance, some eat and some just get coffee or tea

Supplies \$

Other (specify) \$

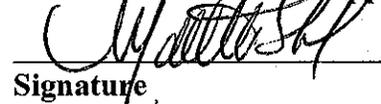
**Total Cost:** \$ 500.00

**Dept Head Approval:**

  
\_\_\_\_\_  
Signature

7/6/10  
\_\_\_\_\_  
Date:

**Committee Chairman Approval:**

  
\_\_\_\_\_  
Signature

7/23/10  
\_\_\_\_\_  
Date

PROFESSIONAL ADVISORY COMMITTEE MEMBERS

<b>NAME</b>	<b>TITLE/ADDRESS</b>
Patricia Auer	Director Public Health/Patient Services Warren County
Patricia Belden	Public Health Nurse Communicable Disease Program Warren County
Tammie DeLorenzo	Clinical Fiscal Informatics Coordinator, Warren County Health Services
Tawn Driscoll	Financial Manager, Warren County Health Services
Joseph Dufour	FNP, Irongate Family Practice Three Irongate Center, Corner of Pine and Elm Streets Glens Falls, NY 12801
Daniel Durkee	Health Educator Warren County
Gerhard Endal	Occupational Therapist PO Box 2615, Glens Falls, NY 12801
Joan Grishkot	Community Member 202 Ridge Street Glens Falls, NY 12801
Ginelle Jones	Assistant Director Public Health Warren County Health Services
Candace Kelly	Director Warren Hamilton Counties Office for the Aging State RT 9, Lake George, NY 12845
Donna Kirker	Vice President Patient Services and Chief Nursing Officer Glens Falls Hospital 100 Park Street, Glens Falls, NY 12801
Daniel Larson	MD, Public Health Medical Director Upper Hudson Primary Care Consortium PO Box 3253, Glens Falls, NY 12801

Richard Leach MD, Tuberculosis and Infectious Disease  
Program Consultant  
One Irongate Center, Glens Falls, NY 12801

Richard Mason 64 Webster Avenue  
Glens Falls, NY

David Mousaw MD, 20 Centennial Drive  
Queensbury, NY 12804

Regina Muscatello Clinical Nurse Supervisor  
Westmount Health Facility  
Warren County

Sharon Schaldone Assistant Director Patient Services  
Warren County Health Services

Sara Sellig Speech Therapist  
31 Overlook Drive, Queensbury, NY 12804

Julie Smith Director of Patient Services  
Greater ADK Home Health Aides  
PO Box 678, Glens Falls, NY 12801

Helen Stern Public Health Nurse  
Immunization Program Coordinator  
Warren County

Sheila Weaver Commissioner, Department of Social Services  
Warren County

# Warren County Request to Host Meeting or Conference

**Name of Department:** Health Services

**Name of Meeting/Conference:** Annual School Nurse/Public Health Clinic Nurse Meeting

**Date:** August 2010

**Location:** At least expensive establishment upon securing 3 quotes

**Purpose:** Immunization Updates, Infectious Disease Reporting Requirements, Emergency Response Activities/Planning. We have hosted this meeting since 1988 and it is always very well received.

**Contact Person:** (If other than Department Head) Helen Stern PHN or Ginelle Jones, Assistant Director Public Health

**Phone No.:** 761-6580

**Number of People attending:**

10 County Employees

2 State Employees

Volunteers

30 Others (specify) Nurses from all schools in Warren County and nurses from medical practices that serve children are invited.

**Cost to County** (please include amounts):

Room rental

Food/beverage approximately \$9.95 per person for breakfast

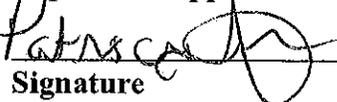
Supplies \$

Other (specify) \$

actually attend and is paid by Emergency Response Preparedness Grant

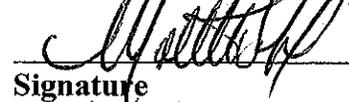
**Total Cost:** Depends on how many

**Dept Head Approval:**

  
Signature

7/2/10  
Date:

**Committee Chairman Approval:**

  
Signature

7/23/10  
Date

# Warren County Request to Host Meeting or Conference

**Name of Department:** Health Services

**Name of Meeting/Conference:** Public Health Utilization Review Committee

**Date:** Both meet quarterly 7:30-9:00am

**Location:** Currently at Carl R's Restaurant. Breakfast is offered as an incentive for attendance.

**Purpose:** Review of agency services provided for appropriateness and to determine if patient needs are being met and all needs accounted for. Minutes must be kept and are evaluated as part of survey process.

**Contact Person:** Ginelle Jones, Assistant Director Public Health

**Phone No.:** 761-6580

**Number of People attending:**

County Employees

State Employees

Volunteers

Others (specify)

**Cost to County (please include amounts):**

Room rental \$

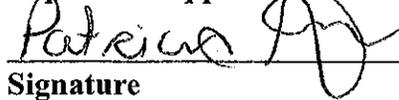
Food/beverage \$ 250.00/year for breakfast depending on attendance, some eat and some just get coffee or tea

Supplies \$

Other (specify) \$

**Total Cost:** \$ \$250.00

**Dept Head Approval:**

  
\_\_\_\_\_  
**Signature**

7/7/10  
\_\_\_\_\_  
**Date:**

**Committee Chairman Approval:**

  
\_\_\_\_\_  
**Signature**

7/23/10  
\_\_\_\_\_  
**Date**

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Health Services hereby authorizes Tammie DeLorenzo

(Supervisory Committee)

(Employee Name)

to attend Home Care Association of New York State Senior and Financial Managers Retreat

(Name of meeting or organization)

at Courtyard Marriott Saratoga Springs, New York

(Address)

on Aug 17-18 2010

(Dates)

Mode of transportation to be used

(County Vehicle or Mass Transportation)

*employee to use own vehicle will not be reimbursed for mileage*

If the mode of transportation is not a county vehicle or mass transportation, please explain:

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

- Notice of meeting or convention including cost.

For Overnight Travel

- Room rate \$ N/A GSA\* Rate \$ N/A
- Meal costs - GSA\* per diem rate \$ included in conference fee

\*www.gsa.gov

Date: 7/7/10

*Patricia [Signature]*  
Department Head Signature

Date: 7/23/10

*[Signature]*  
Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

\*\*\*\*\*

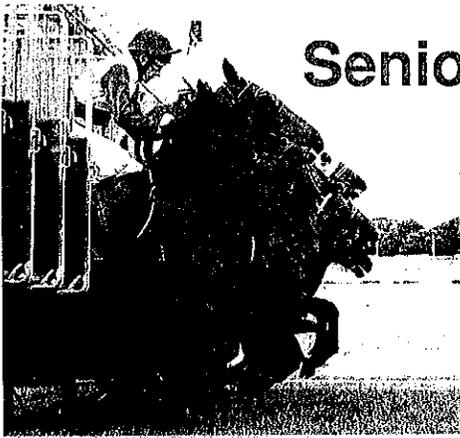
Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

\*\*\*\*\*

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, if required.
5. Copy to Commissioner of Administrative and Fiscal Services if credit card will be used.



# Senior and Financial Managers Retreat

August 17 & 18, 2010 - Courtyard Marriott - Saratoga Springs, NY

On-line Registration Available at [www.eventville.com/hcanys](http://www.eventville.com/hcanys)

## Registration Form

**Registration Deadline:**  
**Friday, August 2.**

**Hotel Cutoff Date:**  
**July 16**

### Cancellation Policy

Cancellations received by Aug 2 are refundable, less a 25 percent administrative fee. No refunds will be issued after this date. Cancellations must be received in writing via email to [info@hcanys.org](mailto:info@hcanys.org). Substitutions are permitted.

### Special Needs

In accordance with the Americans with Disabilities Act or special meal needs, please let us know how we can accommodate you:

#### 1. Personal Information (One Registrant Per Form)

Upon receipt of your registration, you will receive an email confirmation.

Tammie De Lorenzo  
 Name  
 Clinical and Fiscal Informatics Coordinator  
 Title  
 Warren County Health Services  
 Affiliation  
 1340 State Route 9  
 Address  
 Lake George, New York 12845  
 City/State/Zip  
 518-761-6415 6518  
 Phone/Ext. Fax  
 delorenzo7@co.warren.ny.us  
 Email

#### 2. Registration Fee (One day fees are not offered for this program.)

HCA Member  \$389 \_\_\_\_\_  
 Non-Member  \$469 \_\_\_\_\_

#### 3. Payment

Please check method of payment:

\_\_\_\_\_ Check\* \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ American Express

\* Full payment must be received by August 10, 2010.

Make checks payable to: **HCA Education and Research** and mail to:  
194 Washington Ave, Suite 400, Albany, NY 12210

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Name on Card \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_

*This educational event is sponsored in part by:*

Smart in your world®  
**Arent Fox**

 HHA eXchange

THE SIGNATURE GROUP  
OF COMPANIES  
Innovative solutions for the risks and rewards of life™

 **HCA**  
HOME CARE ASSOCIATION OF NEW YORK STATE

Once complete, FAX to: (518) 426-8788  
or mail to HCA, 194 Washington Avenue, Albany, NY 12210

**Tuesday, August 17 - continued**

**3:00pm Steward's Inquiry – the Health Care Reform Law's Anti-Fraud Provisions**

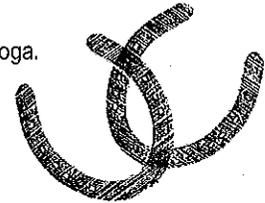
The federal health care reform bill, known as the patient Protection and Affordable Care Act (PPACA), creates many new legal and regulatory requirements for health care providers, including home care. Also included in the law are several important fraud and abuse provisions that providers need to be aware of. Hear from one of New York's leading health care legal experts on many of these provisions, including: self-disclosure protocols, false claims act revisions, overpayments, Stark Law amendments, anti-kickback statute changes, compliance programs, and more.

*Francis J. Serbaroli, Shareholder, Greenberg Traurig, LLP*

**5:00pm You Can Lead a Horse to Water....**

Time to relax and network with colleagues and HCA staff over a cocktail or two.

**6:00pm Time to Graze....** Choose from many fantastic restaurants in beautiful downtown Saratoga.



**Wednesday, August 18**

**7:30am Saratoga Sunrise -- Breakfast Buffet**

**8:30am Not Far from the Preakness – The View from Washington, D.C.**

Throughout the past year, the policy team at the National Association for Home Care & Hospice (NAHC) was at the forefront of negotiations with Congress, federal agencies and other policymaking bodies on the sweeping federal health care reform legislation. In this session, NAHC's William Dombi, one of home care's most ardent federal advocates, will provide information on the latest home care legislative, regulatory, legal, and research developments under the new law, and how NAHC is successfully positioning home care going forward.

*William Dombi, Vice President for Law, NAHC*

**10:00am Down the Stretch They Come! Medicaid Cost Report Audit Panel**

The Office of the Medicaid Inspector General (OMIG) has begun conducting Medicaid Cost Report audits of home care providers throughout the state. In this three-person panel session – which includes representatives from the OMIG's Audit Unit, an expert on Medicaid Cost Reports, and a home care legal scholar – participants will learn about a variety of regulatory compliance issues related to components of the Medicaid Cost Report, including: financial statements, related party costs, workforce recruitment and retention monies, Medicaid spend down/surplus, and Administrative & General Costs. This session will also provide an opportunity to continue the home care community's engagement and communication with the OMIG on these critical areas.

*John Foley, Deputy Medicaid Inspector General for Audit, OMIG*

*Connie Raffa, J.D., Partner, Arent Fox LLP*

*Mark Tsiamas, CPA, Principle, Simone Consultants, LLC*

**11:30am Adjourn**

**12:00 Noon HCA's PAC at the Track Event! Don't Miss It!**



**PAC at the Track!**

At the conclusion of the Senior and Financial Managers Retreat on Wednesday, August 18th the HCA PAC will be hosting a "Day at the Races" Fundraiser. Join the HCA PAC at the Saratoga Race Course and help to ensure that home care has a meaningful voice in the vital issues that affect the home care community. More details will be sent in the coming weeks. A separate registration and contribution will be required.

# Senior and Financial Managers Retreat

Join the action at HCA's **Senior and Financial Managers Retreat** on **August 17-18** in beautiful **Saratoga Springs**. This premier educational event is geared for home care CEOs, CFOs, and other administrators who want to advance their understanding of the latest reimbursement and revenue challenges and changes that affect an agency's bottom line.

With the State Legislature's recent passage of home care cuts as part of an emergency budget measure, as well as other reimbursement issues that affect the fiscal management of every home care operation in New York State, it will be imperative for the state's home care agency fiscal experts to understand the far-reaching implications of these changes, as well as receive vital finance-related updates, technical guidance, and information.

For this year's Retreat, HCA is bringing together top experts and policymakers on home care finance, health care law, third party liability (TPL) billing, federal health reform, and more. The Retreat also provides an opportunity to network with colleagues and share additional ideas for enhancing your operation.

Join us in Saratoga this August – at the height of the thoroughbred racing season – for a trackside view of major new issues, updates, and guidance that will help your organization take the lead.

## Here is what's on the racing card:

### Tuesday, August 17

9:00am **Registration opens**

9:45am **Welcome**

10:00am **Out of the Gate with HCA's Policy Update**

With federal health care reform, administrative demands related to last year's Third Party Liability (TPL) billing changes, a protracted state budget process culminating in new cuts to home care, and other recent developments, the state and federal policy environment for home care has never been more turbulent. To help you navigate the issues and better measure up your agency's response to emerging trends, HCA's policy staff will provide the latest updates on the ever-changing state and federal policy, reimbursement, and advocacy landscape.

11:00pm **Hit the Trifecta with the TPL Update**

One of the most challenging fiscal and operational tasks for home care providers this past year was the monumental statewide administrative effort related to new changes in Third Party Liability (TPL) billing. Now that the federal government has authorized a three-year extension to the TPL Demonstration Project, however, questions about TPL billing still remain. At this can't-miss session, representatives from the state Office of the Medicaid Inspector General (OMIG) and its TPL billing contractor, the University of Massachusetts, will provide updates on the current TPL project as well as guidance and next steps on how the recent three-year extension of the TPL Demo (for fiscal years 2008 to 2010) will be implemented, considering that providers have already submitted a tremendous volume of demand bills to Medicare for fiscal year 2008 in response to the TPL Demo's prior expiration.

*Jeffrey Flora and Sondra Rennick, Office of the Medicaid Inspector General*

*Jennifer Kasper and Erin Devaney, University of Massachusetts*

12:30pm **Lunch**

### Courtyard Marriott Reservations

Located at 11 Excelsior Avenue, Saratoga Springs, NY 12866. Contact the Courtyard Marriott by July 16<sup>th</sup> at (518) 226-0538 and ask for the HCA rate of **\$199** per room. See hotel details at [www.courtyardsaratoga.com](http://www.courtyardsaratoga.com).

1:30am **The Track Official Makes the Call**

Getting a full handle on the multiple pathways of Medicaid rate reporting, authorization, and payment is no simple task. To help you see how all of the pieces fit together in ways that affect your agency's long term fiscal planning, HCA has invited top decision makers from the state Department of Health (DOH) to discuss the Department's priorities for the coming year and provide updates on: the final 2010 Medicaid rates; the revised 2009 Certified Home Health Agency (CHHA) Medicaid rates (including the Medicaid Trend Factor elimination); the distribution of \$100 million in Worker Recruitment and Retention monies; the 2009 Medicaid Cost Report; the proposed CHHA prospective payment system (PPS); and a slate of other reimbursement issues currently confronting home care providers.

*Timothy Casey, Bureau of Long Term Care Reimbursement*

### Attire

Business casual is requested for the meeting. We encourage you to bring a jacket or sweater to the meeting as room temperatures and comfort may vary.

## RESOLUTION REQUEST FORM NO. 12

### Request to Fill Vacant Position\*

\*(Please Note: A Resolution IS NOT REQUIRED for approval IF the vacant position is funded in the Warren County Salary Budget. However, the request must be approved by the Personnel Committee BEFORE the position is filled as well as the Finance Committee if new dollars are involved.

A Resolution IS REQUIRED if the vacant position is NOT FUNDED in the Warren County Salary Budget.)

DEPARTMENT NAME: Health Services

DATE: 7/23/10

- (a) Title of Vacant Position to be Filled: Principal Clerk
- (b) Date position will become vacant: 8/13/10
- (c) Do You Anticipate Filling the Position In-House? No  
If Yes, List Employee Number:
- (d) Annual Salary of Position (and Grade if Applicable):\* \$28,532.00, Grade 7  
\*(This should be the Base Salary for the position if it is being filled by a **new** employee, **or** the salary, including longevities, for any **existing** employee who is filling the position.
- (e) Effective Date of Filling Position:\* 8/23/10  
\*Please do not backdate unless the purpose is to correct an error.
- (f) Where are Funds in the Budget for this Position? (List budget code (with title), object code (with title), and amount): A.4018.110 Preventive Program Regular Salaries
- (g) Does the Vacant Position Show a Salary in the Budget? Yes
- (h) Will Lower Level Position be Vacated as a Result of Filling this Vacancy? No If yes, is there a Request to Fill that Position also?
- (i) If Yes, will it be Filled In-House? No  
If Yes, List Current Title and Employee No.:
- (j) Salary of Lower Level Position:\* n/a  
\*See notes under Item No. (c) concerning how the salary should be listed.
- (k) Effective Date of Filling Lower Level Position: n/a
- (l) Is this a mandated position? If so, please explain: No
- (m) Is there expected revenue from this position? If so, please explain: Yes, employee is responsible for billing processes for Early Intervention and Preschool Programs which are mandated and very costly. It is extremely important to assure any revenues possible for these programs are maximized, reimbursed 36% for State Aid

# RESOLUTION REQUEST FORM NO. 12

## Schedule "A"

### NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an existing funded position in their budget that is vacated due to a retirement, resignation or termination. This notice may not be used for requests to create a new position. For complete instructions on the procedure to be followed, see the reverse of this form.

#### DEPARTMENT HEAD COMPLETES THIS SECTION

Department: Health Services  
Title of Position: Principal Clerk Base salary: \$28,532 (Grade 7)  
Budget code and title: A-4018-110 Preventive Program Regular Salaries  
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  
 Other moved out of state

Employee No. 11350 (salary \$30,056)  
Is this position mandated?  Yes  No Is the position reimbursable?  Yes  No  
Source of reimbursement:  Federal \_\_\_\_\_ %  State 36 %  Other \_\_\_\_\_ %

Impact to Budget: position is responsible for assuring appropriate billing and resoupsment of reimbursement to the county for the preschool and early intervention programs which are mandated programs

#### COMMISSIONER OF ADMINISTRATIVE & FISCAL SERVICES COMPLETES THIS SECTION

Name of Committee: Health Services Date: \_\_\_\_\_  
 The Commissioner has no objection to the filling of the vacancy.  
 The Commissioner objects to the filling of the vacancy.

Commissioner Signature \_\_\_\_\_

#### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee: Health Services Date: 7/23/10  
 The committee has no objection to the filling of the vacancy.  
 The committee objects to the filling of the vacancy and will be sending a resolution to the full board to have the position removed from the budget.

Ranking Committee Member Signature [Signature]

#### PERSONNEL COMMITTEE COMPLETES THIS SECTION

Date: \_\_\_\_\_  
 The Personnel Committee has no objection to the filling of the vacancy.  
 The Personnel Committee objects to the filling of the vacancy and will be sending a resolution to the full board to have the position removed from the budget.

Ranking Committee Member Signature \_\_\_\_\_

## RESOLUTION REQUEST FORM NO. 4

### Request for Extending, Rescinding or Amending Resolution

DEPARTMENT NAME: Health Services

DATE: 07/23/10

- (a) Purpose of Contract Change: To amend the contract with Capital District Physicians Health Plan to reflect new contract language, to meet new state and/or Federal regulatory requirements. (See attached specific information.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 514/2008
- (c) Name of Contractor: Capital District Physicians Health Plan
- (d) Address of Contractor: 500 Patroon Creek Blvd  
Albany NY 12206-1057
- (e) Contractor's Contact Person and Telephone Number: Cynthia C. Wicks  
(518) 641-4213
- (f) Commencement Date of Amendment: 08/23/10
- (g) Termination Date of Extension: Per terms of current agreement
- (h) Payment Provisions: Per current agreement
- i) lump sum amount
  - ii) hourly rate amount
  - iii) total amount not to exceed
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (i) Where are the Funds for this Contract? List Budget Code, (with title), Object Code (with title), and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:  
A4010.1610 Certified Home Health Agency  
A4018.0020 1612 Maternal Child Health



July 12, 2010

Mr. Frederick Monroe  
Chairman, Board of Supervisors  
Warren Co Health Services Dept  
1340 State Route 9  
Lake George, NY 12845

**RECEIVED**

JUL 19 2010

County Attorney's Office

Dear Provider:

As part of our continuing relationship, your CDPHP Ancillary Provider Agreements with Capital District Physicians' Health Plan, Inc., CDPHP Universal Benefits,® Inc., Capital District Physicians' Healthcare Network, Inc. (collectively known as "CDPHP®") require periodic amending to meet recent state and/or federal regulatory requirements.

For this year, the New York State Department of Health has directed health plans to revise their provider agreements to reflect certain statutory changes:

- The time period for health plan payment of electronic claims has been reduced from 45 to 30 days.
- The time period for provider submission of claims has been established at 120 days from the date of service.

As you are aware, the time period for claims submission on CDPHP contracts is 180 days from the date of service. That has not changed. The amended Submission of Claims clause adds the verbiage "subject to applicable law".

Additionally, Medicare has modified language to protect dual-eligible enrollees from incurring liability for certain cost sharing amounts.

The attached Amendment to your Agreement with CDPHP will incorporate these regulatory updates.

If you have any questions, please call the CDPHP Health Care Network Strategy department at (518) 641-4213.

Sincerely,

A handwritten signature in black ink, appearing to read "C. Wicks", is written over a light blue horizontal line.

Cynthia C. Wicks  
Vice President, Healthcare Network Strategy  
CDPHP

**RESOLUTION REQUEST FORM NO. 10**

**Request for Transfer of Funds**

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

SIGNED: *Patricia A. [Signature]*

DATE: 7/23/10

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.4010.130	Health Services-Part time Salaries	A.4018.0030.110	Disease Program-Regular Salaries	\$30,565.00

**Total Transfers** \$30,565.00

**Please state reason for transfers requested:**

1. To transfer funds to cover expense of Sr. Clerk Position that was in eliminated in error from 2010 Final Budget. (See Note below)

Per conversation regarding the budget analysis, the Preventive Program Disease Control code is at 58% of regular salaries as of 5/31/10 due to an error in the Senior clerk position that was approved but omitted in the budget line. All approvals necessary were obtained by resolution during the budget process, and the employee's name was noted with the program, but the salary did not get adjusted within the budget code. Conversations have occurred to correct this matter, and the direction was made after much discussion of the situation with Paul Dusek, County Attorney/Administrator, to discuss this matter at the next Health Services Committee Meeting. For the present, we have been instructed to find the money within our budget. (see above Transfer of Funds)

**CONTINGENT FUND TRANSFER REQUESTS**

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Fund			

Please state reason for transfer request:

Total

Please file original request with Clerk of the Board and retain copy for your records