

**Warren County Health Services
Health Services Committee Meeting Agenda
February 24, 2012
Information Submitted By: Patricia Auer, DPH/DPS**

Action Agenda/New Business

Request Resolution:

To amend the contract with Hudson Headwaters Health Network to include the provision of pre-employment physical examinations or other employment related physicals as necessary at rate of \$90.00 per exam.

Rationale:

This service is rarely needed as most of our new employees have had insurance and have their own physician so are able to supply their own physical. In 2011, we had 2 instances where we needed to pay for a pre-employment physical for a new employee.

Occasionally, employment issues occur where as the employer it is necessary to request a physical exam independent of the employee's physician. In these instances, depending on the situation, Hudson Headwaters may or may not be used. The County Administrator has advised that the county is looking to get all pre employment physicals under one provider and pay one standard rate of \$90.00. This is a good plan as we paid \$150.00 each for the physicals last year – also provided by Hudson Headwaters.

Request Committee Approval:

To allow Maureen Linehan, RN, to attend the Home Care Association of New York State's conference "Impacting OASIS-C Process Measures: What You Need to Succeed at Albany Medical Center on April 17, 2012. The cost of the conference is \$279.00. The nurse has elected to drive her own vehicle and will not be reimbursed for mileage. Meals are included in the conference fee.

Rationale:

This is a necessary educational program where the nurse will learn and be able to bring back information to staff regarding quality assurance process outcome measures that directly translate to reimbursement for care. We have funding in our educational budget to cover the cost.

Request Committee Approval:

To allow all WIC Staff members to attend the Annual WIC Conference at the Desmond Hotel in Albany on April 22-25 at a cost of \$2720.

Rationale:

This is mandated annual training and the cost is 100% covered by the WIC Program Contract. Meals are included in the conference fee. We are fortunate the training is in Albany so there will be no lodging expenses.

Request Resolution:

To allow Nancy Getz, RN, and Robin Andre, PHN to travel out of state to Burlington, Vermont to attend the Annual Professional Lactation conference on April 19 and 20, 2012 at a cost of \$279.00.

Rationale:

These nurses are certified lactation consultants that provide breast feeding education to mothers breast feeding infants. Visits made of this nature are reimbursable. The continuing education credits offered for these 2 days will allow them to meet their recertification credit needs in one block. There are few and sporadic courses that are offered in this venue. They have applied for and received tuition assistance that will equate to half of the cost for each employee, making it a “buy one, get one free scenario” and thus, a good deal. The nurses will drive together in a personal vehicle, are not requesting reimbursement for travel, will cover the cost of their own lodging, and any meals that are not provided as part of the conference. Funds are available to cover the cost.

Request Resolution:

Budget Transfers

Please see **Attachment #3.** (to be distributed at meeting)

Pending Items/Old Business

There are no pending items this month.

Items for Discussion/Information

Emergency Response and Preparedness Activities

Please see **Attachment #1** for the monthly report.

Report of Expenditures, Revenues, Overtime and Per Diem Use

Please see **Attachment #2.**

Tawn Driscoll, Fiscal Manager, will be present at the meeting to review the report and answer questions.

Reimbursement Methodology Changes and Anticipated Future Revenue Impacts

Sharon Schaldone, Assistant Director of Patient Services, and Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator will provide a short update of changes on the horizon.

Vehicle Fleet Issues

We have received the 5 new vehicles that were budgeted in the 2012 Budget, and our 4 wheel drive vehicle has been ordered with delivery expected in the next few weeks.

It is very lucky that we were able to purchase the vehicles and receive them in a timely manner as due to the age and mileage of the fleet we have had a run on losing vehicles.

Yesterday a meeting was held with Paul Dusek, County Administrator, and Jeffery Tennyson, DPW Superintendent, to review fleet concerns and discuss the need for a plan to assure that our fleet remains viable, adequate and safe. We have been getting about 10 years from the vehicles, though Mr. Tennyson feels 8 years is more optimal especially if we do not want expensive issues to occur.

Currently, our 39 vehicle fleet is adequate to meet our needs, but we wanted to make the committee aware that this may not continue to be the case as we still have 13 cars that are between 1999 and 2002. DPW staff has advised us that there is extensive rust that may prohibit some of them from passing inspection at some point, assuming the vehicles make it to the inspection date.

No action is needed is needed at this time. This is for information in case we need to revisit it later this year. Otherwise, we will include cars as part of the budget process.

Attachments:

#1 Emergency Preparedness Activities

#2 Reports of Expenditure, Revenues, Overtime and Per Diem Use

#3 Budget Transfer Requests (to be distributed at meeting)

BT ACTIVITY SHEET

GY 10X - 8/10/2011 - 8/9/2012

Page 1

Topic Color Codes

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

Attachment #:

Date	Type	Subject/Comments	Attendees	Topic (i.e. Chempack, Drill, Mass Fatality, SNS, Training, Pan Flu,
2/2/12	Meeting	L-11 Regional Planning Meeting @ GFH	Barb Orton	
2/13/12	Presentation	L-11 RAD at Glens Falls Hospital	Barb Orton, Laura Stebbins, et.al	
2/14/12	Meeting	BT Coordinators - Ballston Spa	Barb Orton, Laura Saffer	
2/15/12	Training/Webinar	L-8 ServNY Incident Response Management (IRM) Training (Part 2 of 2)	Laura Saffer	Training
2/15/12	Tabletop	L-11 Monthly GFH - Weather Event - Preparation for "NY Fury"	Barb Orton	
2/15/12	Webinar	"Special Populations During a Disaster"	Laura Saffer	
2/21/12	Training	L-2 (IAR Review) Medical Emergency Resources Inventory Tracking System (MERITS)	Matt DeLafayette, Barb Orton, Laura Saffer, Angela Meade, Ginelle Jones, Tammie DeLorenzo	Training
2/29/12	Webinar	ClinOps "CDMS Enhancement Feature, "The Association of Medications and Providers with Events"	Barb Orton, Laura Saffer	

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS
REVENUE AND EXPENDITURES FOR 2012 AS OF 2/22/2012 10:12:06 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	2012 BUDGETED		2012 YTD ACTUAL		2011 Prior Year Totals	
	Budget	Actual	Budget	Actual	Budget	Actual
Salaries - Regular	\$2,826,218.00	\$218,952.02	\$2,826,218.00	\$218,952.02	\$2,857,496.54	\$2,857,496.54
Salaries - Overtime	\$137,500.00	\$13,570.58	\$137,500.00	\$13,570.58	\$125,594.50	\$125,594.50
Salaries - Part Time	\$278,942.00	\$17,235.41	\$278,942.00	\$17,235.41	\$217,841.31	\$217,841.31
Salaries - Sick Leave Incentive					\$2,000.00	\$2,000.00
100's PERSONAL SERVICES	\$3,242,660.00	\$249,758.01	\$3,242,660.00	\$249,758.01	\$3,202,932.35	\$3,202,932.35
200's EQUIPMENT	\$100,200.00	\$71,943.52	\$100,200.00	\$71,943.52	\$68,065.47	\$68,065.47
400's CONTRACTUAL	\$9,385,013.00	\$185,300.41	\$9,385,013.00	\$185,300.41	\$6,346,420.43	\$6,346,420.43
800's EMPLOYEE BENEFITS	\$1,591,799.00	\$206,718.15	\$1,591,799.00	\$206,718.15	\$1,314,693.84	\$1,314,693.84
TOTALS	\$14,319,672.00	\$713,720.09	\$14,319,672.00	\$713,720.09	\$10,932,112.09	\$10,932,112.09

REVENUES	2012 BUDGETED	2012 YTD ACTUAL	2011 Prior Year Totals
	\$1,905,649.00	\$9,325.22	\$8,495,867.76

Note: 2012: We are currently working on finalizing the January Billing for CHHA, LTC and MCH. Also, our part time salaries are slightly above last year (1.66% or \$282.25) due to the increase in hours budgeted for the part time administrative assistant. However at this time, we are approximately \$8000 below last years total personal services.

Still to be noted for 2011, we are still finalizing year end but we anticipate additional Revenues of over 2 million related to Preschool services for the 1/1/12 school year and the WIC food vouchers for the year. However, we also will be receiving expenses of approximately 1 million for those WIC food voucher.

Warren County Health Services
Salaries Comparison

	2011 vs 2012		as of 1/29/12 Payroll date ending	
	YTD 2012	YTD 2011	YTD 12v11	% Change
Total of All Depts	\$218,952.02	\$227,084.34	-\$8,132.32	-3.58%
Regular Salaries	\$218,952.02	\$227,084.34	-\$8,132.32	-3.58%
Overtime Salaries	\$13,570.58	\$13,720.00	-\$149.42	-1.09%
Part Time Salaries	\$17,235.41	\$16,953.16	\$282.25	1.66%
Sick Leave Incentive	\$0.00	\$0.00	\$0.00	0.00%
TOTALS	\$249,758.01	\$257,757.50	-\$7,999.49	-3.10%

*Source: Detail G/L report for all Salary Category from 1/1/XX-1/29/XX

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

SIGNED: Patricia [Signature]

DATE: 2/24/12

	<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1.	A.4013.469	WIC-Other Payments	A.4013.260	WIC-Other Equipment	\$2,400.00
2.	A.4018.0030.435	Disease Program-Medical Expense/Supplies	A.4018.0030.260	Disease Program-Other Equipment	\$985.00

Total Transfers

\$3,385.00

Please state reason for transfers requested:

1. To transfer funds for WIC to cover equipment purchases covered fully by COLA Funding.
2. To Transfer funds for Disease Program for equipment, back to amount budgeted in 2012, to cover necessary purchases.

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

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Resolution

DEPARTMENT NAME: Health Services

DATE: February 24, 2012

- (a) Purpose of Contract Change: To amend the contract with Hudson Headwaters Health Network to include the provision of pre-employment or other employment related physicals, as needed.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 701/2011 (most recent)
- (c) Name of Contractor: Hudson Headwaters Health Network
- (d) Address of Contractor: 9 Carey Road, Queensbury, NY 12804
- (e) Contractor's Contact Person and Telephone Number:
Chris Tournier 761-0300
- (f) Commencement Date of Amendment: March 19, 2012
- (g) Termination Date of Extension: 30 day written termination by either party in form approved by the county attorney.
- (h) Payment Provisions: \$90.00 per physical, paid upon receipt of bill and evidence of physical exam.
- 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:
Object Code .435 - Medical Expense
Budget code would be varied depending upon program area that physical exam was needed.

Warren County Board of Supervisors

RESOLUTION NO. 701 OF 2011

Resolution introduced by Supervisors Sokol, Thomas, Champagne, Taylor and McDevitt

AMENDING RESOLUTION NO. 688 OF 2008; DELETING MEDICAL DIRECTOR SERVICES FOR PHYSICALLY HANDICAPPED CHILDREN AND CHILDREN WITH SPECIAL NEEDS

WHEREAS, Resolution No. 688 of 2008, among other things, authorized an agreement with Upper Hudson Primary Care Consortium, amended by Resolution No. 196 of 2010 to change the name to Hudson Headwaters Health Network, for David Mousaw, M.D. to provide Medical Director services for the Physically Handicapped Children and Children with Special Needs programs to the Warren County Health Services Department in an amount not to exceed Two Thousand Five Hundred Dollars (\$2,500) per year, and

WHEREAS, the Director of Public Health/Patient Services is requesting that said service be deleted and advises that said services will still be provided through Hudson Headwaters Health Network should it be necessary, but the agency will compensate this service without naming a specific Medical Director, now, therefore, be it

RESOLVED, that the Warren County Board of Supervisors hereby authorizes and directs the Director of Public Health/Patient Services to discontinue the agreement with Hudson Headwaters Health Network for the Medical Director services for Physically Handicapped Children and Children with Special Needs programs, and be it further

RESOLVED, that the Chairman of the Board of Supervisors be, and hereby is, authorized to execute any and all necessary documents to carry out the terms of this resolution in a form approved by the County Attorney.

Amend to add the provision of pre-employment or other employment related physicals at a rate of \$90⁰⁰ (ninety) per physical examination

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 Margaret Linehan, RN, CHN
(Supervisory Committee) (Employee Name)
 to attend Home Care Association of New York State
Impacting OASIS C Process Measure: What You Need to Succeed
(Name of meeting or organization)
 at Hilton Garden Inn at Albany Medical Center, 62 New Scotland Ave. Albany, NY 12208
(Address)

on April 17, 2012 Mode of transportation to be used County vehicle
(Dates) (County Vehicle or Mass Transportation)

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.

conference fee
\$ 279.00

For Overnight Travel

- Room rate \$ MA GSA* Rate \$ ____
- Meal costs - GSA*per diem rate \$ ____

*www.gsa.gov

Date: 2/24/12

Patricia [Signature]
 Department Head Signature

Date: 2/24/12

[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.

Impacting OASIS-C Process Measures:

What You NEED to SUCCEED

April 17

8:00am – 4:00pm

*Registration opens at
7:15am*

**Hilton Garden Inn
Albany Medical Center
62 New Scotland Ave.
Albany, NY 12208
Phone: 518-396-3500**

Rooms available at \$169
until March 26, 2012.
Ask for the "HCA" rate.

Workshop Facilitator:

Debbie Chisholm, RN, BSN, CPHQ, COS-C. Debbie is a registered nurse practicing since 1978 in critical care, home health, hospice and quality improvement. She served as the Home Health Manager at the Delmarva Foundation for Medical Care where she was involved in the national implementation of OBQI. She was trained in OASIS at the Center for Health Services Research, at the University of Colorado and provided OASIS education for the CMS Data Accuracy Verification (DAVE) Project as well as the OASIS Education Coordinators. Currently she manages the CMS OASIS Q&A Mailbox contract and provides content expertise. Debbie is a Senior Associate Consultant with OASIS Answers, Inc.

What did I need to succeed?

Did we meet the measure or miss the mark?

How did I know?

What are some common stumbling blocks?

Have you been looking at your process measure reports, baffled by the outcome rates? You have an idea of where the numbers come from but you are not sure. This 6.5 hour workshop will give you the information you need in order to understand how the measures are calculated and exactly which OASIS items and responses are used in each measure calculation. You'll learn how to score the OASIS M items used for each measure accurately based on current CMS guidance. Tracking tools for some of the measures, as well as current CMS resources related to the process measures and PBQI (Process Based Quality Improvement) will be discussed and provided. Fun exercises and discussion topics will make the day fly by.

Objectives:

- Define Process Measures
- Describe how they are organized and structured
- List the OASIS-C Process Measures
- Describe how measures are calculated
- Identify the OASIS M items utilized to produce each outcome and provide CMS item-specific guidance
- Assess understanding of key concepts through workshop exercises
- Provide key CMS process measure guidance and documents

The Impacting OASIS-C Process Measures workshop offers effective, timely, comprehensive and at times, entertaining education, directed at quality improvement staff, supervisors, and interested field clinicians.

Don't stay in the dark when it comes to OASIS-C process measures. It's just too important to ignore any longer!

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 all WIC Program Employees
 (Supervisory Committee) (Employee Name)

to attend Annual NYS WIC conference
 (Name of meeting or organization)

at Desmond Hotel - Albany, New York
 (Address)

on April 22-25 2011 Mode of transportation to be used personal vehicles
 (Dates) (County Vehicle or Mass Transportation)
WIC van and (no mileage reimbursement)

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

Proper documentation must be attached when submitting for approval. total
 (Please check documents attached)

- Notice of meeting or convention including cost.

conference cost \$2720

For Overnight Travel

- Room rate \$ _____ GSA* Rate \$ _____
- Meal costs - GSA*per diem rate \$ meals provided at conference

*www.gsa.gov

Date: 2/24/12

Peterino
 Department Head Signature

Date: 2/24/12

Matt
 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

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4. Copy to Purchasing with Purchase Order, if required.
5. Copy to Commissioner of Administrative and Fiscal Services if credit card will be used.

conference is 100% reimbursed by WIC Program contract grant

RESOLUTION REQUEST FORM NO. 15

Requesting Approval for Out-Of-State Travel*

*If the conference announcement or details are available in writing, please attach.

DEPARTMENT NAME: Health Services

DATE: February 24, 2012

(a) Dates of Travel: Conference April 19 and 20, 2012 - Leaving evening of April 18th

(b) Purpose (include complete name of any conference, school, etc.):
To attend Professional Lactation Conference

(c) City/Town & State: Burlington, Vermont

(d) Employee(s) Traveling (include title(s)): Nancy Getz, RN, CHN
Robin Andre, RN, PHN

(e) Is County paying the costs or is another Agency? County paying cost of conference – 50% of cost covered by tuition assistance.

(f) Mode of Transportation to be Used:
(County Vehicle or Mass Transportation)

Employees will drive in one of employees personal vehicles – no reimbursement for travel costs are requested.

Please note: If County vehicle use is requested, upon resolution approval, please provide Fleet Manager Frank Morehouse with vehicle request form properly completed.

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 (Supervisory Committee) hereby authorizes

Nancy Gatz, RN CHN
Robin Andre, PHN
(Employee Name)

to attend Professional Lactation Conference
(Name of meeting or organization)

at Hilton Hotel Burlington, Vermont
(Address)

on April 19-20
2012
(Dates)

Mode of transportation to be used Reimbursement
(County Vehicle or Mass Transportation)
employee to derive own vehicle - no 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 \$ employees will pay own
 Meal costs - GSA*per diem rate \$ employees will pay own miscellaneous expenses

*www.gsa.gov

Date: 2/24/12

Patricia Auer
Department Head Signature

Date: 2/24/12

[Signature]
Committee Chairman Signature

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* employees to be paid regular salaries for days of clinic attendance - no overtime costs to be approved