

Warren County Health Services

Health Services Committee

AGENDA

September 1, 2015

Information Submitted By: Patricia Auer, DPH/DPS

Health Services Committee Members: Sokol, Conover, Frasier, McDevitt, Westcott

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of the July 24, 2015 Health Services Committee meeting
- III. Action Agenda/New Business

**Request Resolution:**

To amend the contract with Ability Network Inc. to include the Audit Docs functionality product at a cost of \$92.00 per month which includes the provision of transmitting up to 18,000 pages of documentation per year, with any additional pages at a cost of \$0.10 per page in a form approved by the County Attorney.

**Rationale:**

This functionality would allow us to forgo the mailing of Medical Documentation to NGS (National Government Services Medicare) when requested. In 2014, we incurred \$1,063.49 in mailing costs alone, plus the cost of staff time copying many pages of patient information. In addition to saving many trees, an added benefit of the Audit Docs functionality is a complete record of what documents were sent, to whom they were sent and when they were received by NGS. Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator will be present at the meeting to answer any questions the committee members may have. The most recent Resolution with Ability was 496 of 2013 which authorized the change in name from IVA NS to Ability and the purchase of the web-based product for Medicare eligibility and claims transactions. There are sufficient funds in the budget to cover this expense.

**Request Committee Approval:**

To allow Sharon Schaldone, Assistant Director of Patient Services, and Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator to attend the Home Care of New York State Corporate Compliance Symposium on October 8, 2015 in Albany at a cost of \$299.00 per person.

**Rationale:**

Corporate Compliance has many regulatory issues that are constantly updated as the complex health care delivery system and payment methodologies continue to evolve, it is necessary for our agency to keep up with these changes and modifications. There will be discussion on how we will need to assure that our internal controls are aligned with OMIG (Office of Medicaid Inspector General) target areas.

There are sufficient funds in the budget to cover the conference cost.

**Request Committee Approval:**

To backfill a full time Registered Professional Nurse position – Base Salary \$42,719 that has occurred due to a resignation.

**Rationale:**

The position is reimbursable and is funded and included in the Health Services Table of Organization. The backfilling paperwork according to county policy has been completed, and we are now at the point where committee approval is needed in order to backfill.

**Request Committee Approval:**

To authorize Ginelle Jones, Assistant Director of Public Health, to attend the 2015 NYSACHO Annual Public Health Leaders' Summit in Canandaigua, New York on October 7 – 9, 2015.

**Rationale:**

The conference cost, lodging and meals are covered in total by NYSACHO (New York State Association of County Health Officials). Ms. Jones will ride with the Washington County Director of Public Health, and the only cost to the county will be sharing gas and tolls. The conference will feature a variety of pertinent public health information, as well as the opportunity to network with other public health leaders in the state.

**Request Resolution:**

To rescind Resolution 381 of 2015 which authorized out of state travel for Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator, to attend the Delta Health Technologies 2015 National Customer Forum in Altoona, Pennsylvania on September 14-17, 2015.

**Rationale:**

The conference will now be offered remotely, so it can be accessed on line. Therefore, there will be no need to make the trip, or pay any of the authorized expenses. The cost would have been \$696.00 plus the cost of gas and tolls.

**Request Committee Approval:**

To authorize Tammie DeLorenzo, to attend the Home Care Association of New York State Senior and Financial Manager's Retreat at the Mohonk Mountain House in New Paltz, New York on September 17-18, 2015 at a total cost of \$704.00 plus tolls, and to waive Section I.B.3 of the Warren County Travel Policy Relating to GSA Rates.

**Rationale:**

This conference is to be held at the same time Tammie would have been in Altoona. Both conferences are important, but we needed to pick one due to the price. Since the Delta Conference expense had been eliminated, it would be beneficial for her to attend this conference. It is necessary to waive the travel policy rules as the lodging fee is higher than the per diem rate, but all meals are included for the 2 days. If lodging does not occur at the conference site there is a \$120.00 daily parking fee, plus the additional cost of meals. The conference content information was included in the information sent prior to the meeting.

**Request Resolution:**

To authorize a contract agreement with Eileen Dashnaw to provide Occupational Therapy Services in a form approved by the County Attorney.

**Rationale:**

These services are reimbursable, and this particular therapist has special training and certification in orientation and mobility techniques which is needed for blind or severely vision impaired children.

**Request Resolution for Budget Transfers:**

Please see **Attachment #5**.

Tawn Driscoll, Fiscal Manager, will be present at the meeting to review the need for the request.

**Referral/Pending Items**

There are no pending items for this month.

**IV. Information for Discussion/Review**

**Emergency Response and Preparedness Activities:** Please see **Attachment #1** for the monthly report which includes June and July information since we had no meeting in June.

**Status of Referrals:** Please see **Attachment #4** for the detailed report. Sharon Schaldone, Assistant Director of Patient Services, will provide comment on the report at the meeting.

**Reports of Expenditures, Revenues, Overtime and Per Diem Use for 2015:** Please see **Attachment #2**.

**Revenue and Expense Comparison Report for 2014 vs 2015:** Please see **Attachment #3**.

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

**V. Privilege of the Floor to discuss any additional items to come before Committee**

**VI. Motion to adjourn Health Services Portion of Meeting**

**Attachments:**

**#1** Emergency Response and Preparedness Activities Report

**#2** Reports of Expenditures, Revenues, Overtime and Per Diem Use for 2015

**#3** Revenue and Expense Comparison Report for 2014 vs 2015

**#4** Report of Referral Status

**#5** Budget Transfer Request

## ***RESOLUTION REQUEST FORM NO. 4***

### ***Request for Extending, Rescinding or Amending Existing Contract***

**DEPARTMENT NAME: Health Services**

**DATE: September 01, 2015**

- (a) Purpose of Contract Change: **To amend the agreement with Ability Network, Inc. to include the audit docs functionality of Ability Network Product in a form approved by the County Attorney.**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **R 496/2013, please see attached**
- (c) Name of Contractor: **Ability Network Inc.**
- (d) Address of Contractor: **Dept-Ch-16577, Palatine, Illinois 60055-6577**
- (e) Contractor's Contact Person and Telephone Number: **Brian Stubblefield  
1-612-277-3902, brian.stubblefield@abilitynetwork.com**
- (f) Commencement Date of Extension: **September 21, 2015**
- (g) Termination Date of Extension: **Per terms of current agreement**
- (h) Payment Provisions:
  - 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. **Monthly- \$92.00 per month which includes 18,000 pages per year. Additional pages - \$0.10 per page.**
- (i) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title\* and Amount: **OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: A4010.428 Data Processing**

**Sample: A.1010 470 Legislative Board – Contract \$xx.xx  
Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx**

\*as listed in budget and LOGOS

# Warren County Board of Supervisors

## RESOLUTION NO. 496 OF 2013

**Resolution introduced by Supervisors Sokol, Conover, Frasier, Taylor and McDevitt**

**AMENDING RESOLUTION NO. 432 OF 2013; AMENDING RESOLUTION NO. 457 OF 2002;  
CHANGING NAME OF CONTRACTOR FROM IVANS INC. TO ABILITY NETWORK, INC.  
AND AUTHORIZING AMENDMENT OF AGREEMENT TO AUTHORIZE PURCHASE AND USE OF  
THE WEB BASED PRODUCT**

WHEREAS, Resolution No. 457 of 2002 authorized an agreement with IVANS, Inc. to provide electronic claim submission computer software and maintenance to the Warren County Health Services Home Care Division, and

WHEREAS, Resolution No. 432 of 2013 authorized an agreement with Ability Network, Inc. and said merger will be a web based product and the electronic claim submission computer software and maintenance will no longer be available, accordingly, the Director of Public Health/Patient Services is requesting to purchase and use the web based product that allows billing an unrestricted number of Medicare claims for an annual amount not to exceed Two Thousand Four Hundred Thirty-Three Dollars (\$2,433), for a term commencing August 19, 2013 and terminating upon terms to be negotiated by the County Attorney, and

WHEREAS, the Director of Public Health/Patient Services is requesting to amend Resolution No. 432 of 2013 for a one-time setup fee of Three Hundred Fifty Dollars (\$350) and a rate of Two Hundred Thirteen Dollars (\$213) per month which includes up to three thousand five hundred (3,500) Medicare claim transactions (additional transactions will be billed at the rate of forty cents (\$.40) per transaction) and up to one thousand (1,000) Medicare eligibility verifications (additional transactions will be billed at the rate of fifty cents (\$.50) per transaction), now, therefore, be it

RESOLVED, that the Warren County Board of Supervisors hereby authorizes the afore described amendment to Resolution No. 432 of 2013, and be it further

RESOLVED, that other than the afore described amendment, Resolution No. 432 of 2013 shall remain in full force and effect.



**Order Information**

Order Number Q-13768-1  
Offer valid through 9/24/2015  
Prepared By Brian Stubblefield  
Manager David Lomax

**Customer Information**

Account Name Warren County Health  
Services Division of Home  
Care  
Account Number 295170  
Physical Address 1340 State Route 9  
Lake George, NY  
12845-3434  
US  
Billing Address 1340 State Route 9  
Lake George, NY  
12845-3434  
US

**Business Contact**

Tammie Delorenzo  
(518) 824-8772  
delorenzot@warrencountyny.gov

**Technical Contact**

Tammie Delorenzo  
(518) 824-8772  
delorenzot@warrencountyny.gov

**Billing Contact**

Tammie Delorenzo  
(518) 824-8772  
delorenzot@warrencountyny.gov

**Order Details**

Billing Frequency Monthly

Fee Type	Quantity	Service	Service Description	Sales Price	Discount	Total Price
Recurring	1.00	ABV-PTL-AUDITDOCS-1	ABILITY   AuditDocs - Portal	\$92.00		\$92.00
One-Time	1.00	ABI-INS-L1	Installation and Set-up	\$0.00	100%	\$0.00

Initial Invoice Amount: \$92.00

Monthly Recurring Amount: \$92.00

If taxable, invoice will include applicable Sales Tax

**Order Notes**

{ABILITY | AuditDocs - Portal} Customer can utilize up to 18,000 transactions/pages submitted per year. Additional transactions will be billed at \$0.10 per transaction.

Your Service term begins the first day of the month following the date of acceptance of this order. All services and one time fees will be invoiced in advance per the billing frequency of this order. Any applicable overage fees will be invoice monthly in arrears.

NOTE: ALL PAGES OF THIS DOCUMENT MUST BE SUBMITTED TOGETHER TO CONSTITUTE A COMPLETE ORDER.

THIS IS A BINDING AGREEMENT SUBJECT TO THE TERMS AND CONDITIONS OF THE ABILITY NETWORK INC. SERVICE AGREEMENT AND BUSINESS ASSOCIATE AGREEMENT (BAA) AVAILABLE ON THE ABILITY PUBLIC WEBSITE (<http://www.abilitynetwork.com/user-agreement>) OR UPON REQUEST. THESE DOCUMENTS ARE INCORPORATED HEREIN AS PART OF THIS AGREEMENT. THE METHODS USED BY ABILITY TO COUNT TRANSACTIONS FOR THE PURPOSE OF CALCULATING FEES, IF APPLICABLE, ARE DESCRIBED IN THE ABILITY NETWORK INC. TRANSACTION DEFINITIONS ADDENDUM LOCATED AT (<http://abilitynetwork.com/user-transactions>) WHICH IS INCORPORATED HEREIN AS PART OF THIS AGREEMENT.

**Payment terms shall be net 30 days from invoice date regardless of when the service usage actually begins.**

You hereby authorize ABILITY to provide the services as described above and warrant and represent you have the requisite authority to legally bind and approve payment of forthcoming invoices. Unused base transactions expire at the end of the service period.

Tax Status: Non-Taxable

**If exempt (Non Taxable), a state tax exemption certificate is required with the signed order form.**

**AGREED AND ACCEPTED**

**Warren County Health Services Division of Home Care**

**ABILITY Network Inc.**

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
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 (Supervisory Committee) hereby authorizes Sharon Schaldone (Employee Name) to attend Home Care Association of New York State Corporate Compliance Symposium (Name of meeting or organization)

Asst Director  
Patient Service  
Fiscal and Clinic  
Informatics  
Coordinator

at Hilton Hotel - 40 Lodge Street Albany, NY (Address)

on October 8, 2015 (Dates) Mode of transportation to be used Health Services Fleet Vehicle (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. \$299 per person - total cost \$598.00

For Overnight Travel

- Room rate \$ NA
  - Meal costs - GSA\* per diem rate \$ NA GSA\* Rate \$ NA
- \*www.gsa.gov

Date: 8/28/15

Patricia Awe  
Department Head Signature

Date: \_\_\_\_\_

[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.

## OCTOBER 8

HILTON ALBANY  
40 LODGE STREET  
8:30AM – 4:30PM



**LEADERSHIP  
CHANGE**

### HCA Members: Meet NY's New OMIG Chief, Dennis Rosen, for New Perspectives, Insights

Our compliance program wouldn't be complete without the state's chief Medicaid watchdog. And there's a new Inspector General on the job. This change in leadership means a fresh perspective on the state's Medicaid integrity and audit activities. It also means that home and community based providers must also take a fresh look at their own risk-assessment work and internal controls. This session will introduce you to the new Inspector General and his vision for OMIG going forward.



**OMIG  
Priorities** **TRANSITION**

### Aligning Your Internal Controls with OMIG Target Areas *Thomas Meyer, Deputy Medicaid Inspector General (OMIG)*

OMIG's leadership may have recently changed, but providers can expect overall continuity in his office's work plan activities. But what are the specifics of this plan going forward, especially with the transition to managed care and other changes that affect who is audited, and what for? OMIG's deputy chief will offer a close look at ongoing audit issues and target areas that you need to know about, as well as other OMIG priorities.

### Regulatory Issues & Compliance in the Evolving System

*Rebecca Fuller Gray, Director, Division of Home and Community Based Services, NYS Department of Health*

You've read the DALs. Now hear from the source. While OMIG is the top Medicaid auditor, New York's regulations – and interpretations of them – fall squarely within the wheelhouse of Rebecca Fuller Gray's office at DOH. You need to hear what she has to say, especially in a complex home care system now completing the transition to managed care and other system changes. She'll answer your burning questions and address some of the regulatory alignment issues facing you under managed care and DSRIP, including many of the areas that the Home and Community Based Regulatory Workgroup has worked to sort out in its recommendations to DOH.



**COMPLEX SYSTEMS**

Regulatory Alignment

## OCTOBER 8

HILTON ALBANY  
40 LODGE STREET  
8:30AM - 4:30PM

### DSRIP: An Epic Program with Big Compliance Considerations

*Presenter TBD*

DSRIP has generated dozens of new health care mega-structures with hundreds of participating providers and billions of dollars in circulation. You've seen the epic sums – but the compliance questions can be just as vast when huge dollar amounts are involved, combined with unprecedented partnership negotiations, shared governance, system-wide pricing negotiations, new levels of information sharing and the play of competitive marketplace and anti-trust regulations.

Regardless of your role in DSRIP today, there's no doubt you'll be confronting these issues in the future.

### PROVIDERS



PARTNERSHIPS  
negotiations



### MANAGED CARE PLANS



Legal  
Compliance



### 'Memorandum of Understanding' from Our Counsel to Yours Re: Managed Care Legal Questions

*Frank Fanshawe, Esq., WEMED, HCA's Legal Counsel*

Your legal counsel is critical to all compliance issues and negotiations at your organization. HCA has our own champion legal counsel, and he has unmatched expertise on many of the broad legal compliance questions that feed into your own talks with legal counsel back at your agency. During this session, Frank Fanshawe – who has advised HCA's member community on everything from Executive Order No. 38 to the wage parity law – will provide insights on legal questions related to your work with managed care plans.

# ALBANY

# CORPORATE COMPLIANCE SYMPOSIUM

OCTOBER 8  
HILTON ALBANY  
40 LODGE STREET  
9:30AM - 4:30PM

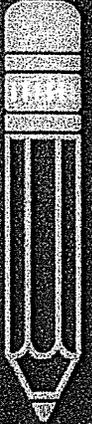


LEARN

GET INSPIRED



QUESTION?



MEET AND HEAR FROM OMIG'S NEW CHIEF, DENNIS ROSEN!

CONNECT



EPIC HEALTH CARE CHANGES = BIG REGULATORY QUESTIONS



negotiations &

NEW AUDIT

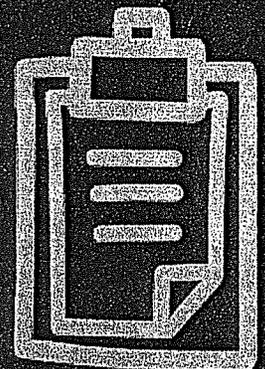
Challenges



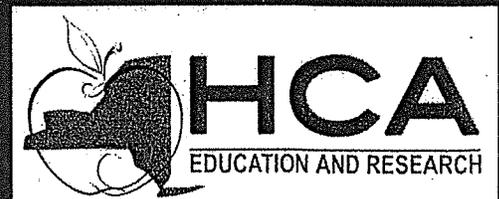
Gain an understanding of the complicated structures



Network



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# CORPORATE COMPLIANCE SYMPOSIUM



OCTOBER 8

HILTON ALBANY  
40 LODGE STREET  
9:30AM - 4:30PM



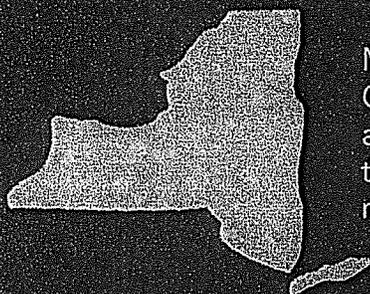
New York is making epic changes to its health care system. These changes have spawned regulatory compliance and legal questions that are equally big.

"IT'S HUGE-AH!"

HCA's Corporate Compliance Symposium, on October 8 in Albany, will help you manage some of these huge questions, and others, so that you can develop the right protocols and practices at your agency.

OCTOBER  
EIGHT

The managed care transition and DSRIP alone have realigned billions of dollars in payments, prompting vast compliance and regulatory considerations as you pursue pricing and contract negotiations, shared-governance arrangements and new levels of information sharing. Meanwhile, all of these activities have bumped up against a patchwork of old regulations, an overlay of new rules – and, of course, the ongoing audit activities of OMIG. We'll help you make sense of this complicated structure.



Meanwhile, New York has a new OMIG chief, and our Corporate Compliance Symposium is his first introduction to you – reason alone to get the attention of your compliance officers, leadership team, management officials and any other staff with direct responsibility for compliance activities.

Please be sure that your team has a seat at the table.  
Register today.



## HOTEL INFORMATION

Hilton Albany  
40 Lodge Street  
Albany, NY 12207

A small block of rooms has been secured at the Albany Hilton for the evening of October 7 at a discounted rate of **\$159**

To make your overnight accommodations, call 1-866-691-1183 before **SEPT. 7** September 7 and ask for the Home Care Association of NYS rate.

## CORPORATE COMPLIANCE SYMPOSIUM

October 8, Albany Hilton, 8:30am-4:30pm

## REGISTRATION

### HCA Cancellation Policy

HCA registration cancellations received by September 11 are refundable less a 25% administrative fee. No refunds will be issued after this date. Cancellations must be received in writing via e-mail to: [info@hcanys.org](mailto:info@hcanys.org). Substitutions are permitted.

## REGISTRANT INFORMATION

Please register by September 18.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_  
(Required)

## HCA REGISTRATION FEE

\_\_\_\_ Member Fee  \$219

Non-Member Fee  \$299

## SPECIAL NEEDS

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

\_\_\_\_\_

A big thank you to our sponsors and exhibitors who helped make this program possible and who are an important voice on compliance issues and technical assistance.

## Sponsors

Smart in your world®  
**Arent Fox**

 Jewish Home Lifecare

 **Sandata**  
TECHNOLOGIES

## Exhibitors

 **Sandata**  
TECHNOLOGIES

**THE RIGHT  
PROTOCOLS  
THE RIGHT  
TIME**

## PAYMENT

Please check method of payment:

Check\*  MasterCard  VISA  Am Exp

\*Make checks payable to/mail to:  
HCA Education and Research, 388 Broadway, 4<sup>th</sup> Floor,  
Albany, NY 12207.

Checks must be received by September 26.

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Mailing Address of Card Holder

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Authorized Signature

FAX THIS FORM TO: 518-426-8788

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Please register by September 18.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_  
(Required)

## HCA REGISTRATION FEE

\_\_\_\_ Member Fee  \$219

Non-Member Fee  \$299

## SPECIAL NEEDS

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

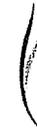
\_\_\_\_\_

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 **Sandata**  
TECHNOLOGIES

## Exhibitors

 **Sandata**  
TECHNOLOGIES

**THE RIGHT  
PROTOCOLS  
THE RIGHT  
TIME**

## PAYMENT

Please check method of payment:

Check\*  MasterCard  VISA  Am Exp

\*Make checks payable to/mail to:  
HCA Education and Research, 388 Broadway, 4th Floor,  
Albany, NY 12207.  
Checks must be received by September 26.

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Mailing Address of Card Holder

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Authorized Signature

**FAX THIS FORM TO: 518-426-8788**

# 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, termination or promotion. 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 Payroll Dept. No: 35.00  
Title of Position: Registered Professional Nurse Base Salary of Position: 42,719 Grade: 19  
Filling at Step # (If Known): Depending on education and experience Request to Backfill Due to Promotion:  Yes  No  
Budget code and title: A. 4010-110 Full Time Salaries Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other  
Employee No.: 8941 Is this position mandated?  Yes  No Is the position reimbursable?  Yes  No  
Source of reimbursement:  Federal \_\_\_\_\_ %  State \_\_\_\_\_ %  Other \_\_\_\_\_ %  
100% Reimbursable varies sources depending on patient insurance

### CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list  Competitive-no list (*hiring would be provisional*)  Non-Competitive  Other QIN

Actual Impact to Budget Report will be provided monthly by Human Resources Director.

**Candidate's qualifications must be approved by Personnel Officer prior to hiring.**

**Human Resources Director has approved this form when initialed.** AT 8-17-15

### COUNTY ADMINISTRATOR COMPLETES THIS SECTION

The Administrator has no objection to the filling of the vacancy.

The Administrator objects to the filling of the vacancy.

Administrator Signature [Signature]

Date 8/28/15

### BUDGET OFFICER COMPLETES THIS SECTION

The Budget Officer has no objection to the filling of the vacancy.

The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature Frank E Thomas

Date 8/28/15

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Health Services

The committee has no objection to the filling of the vacancy.

The committee objects to the filling of the vacancy.

In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.

In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature [Signature]

Date 9/1/15

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 Ginelle Jones, Asst Director of Public Health (Employee Name)

to attend 2015 NYSACHO Annual Public Health Leaders Summit (Name of meeting or organization)

at Ann on the Lake Conandaugua NY (Address)

on Oct 7-9, 2015 (Dates) Mode of transportation to be used \_\_\_\_\_ (County Vehicle or Mass Transportation)

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

Ms. Jones will ride with Washington County Director of Public Health  
conf. lodging + meals covered by NYSACHO  
only cost will be sharing cost of gas and tolls

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 \$ \_\_\_\_\_
- Meal costs - GSA\*per diem rate \$ \_\_\_\_\_ GSA\* Rate \$ \_\_\_\_\_

\*www.gsa.gov

Date: 8/28/15

Pamela A.  
 Department Head Signature

Date: \_\_\_\_\_

[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

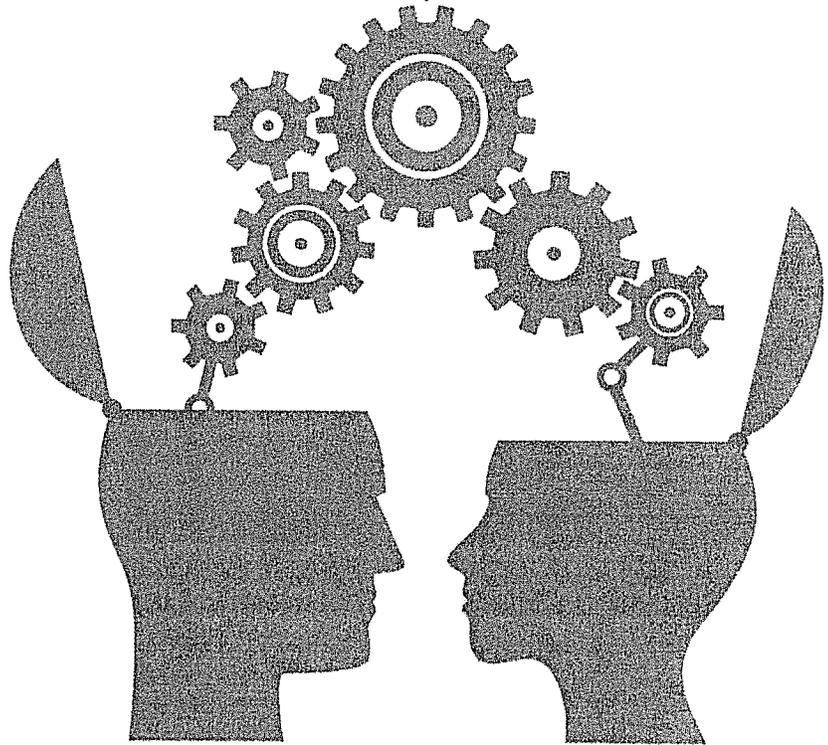
Filing Instructions:

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.

Registered 8/18/15

# PUBLIC HEALTH LEADERS

# AS CHIEF HEALTH STRATEGISTS



# 2015 NYSACHO Annual Public Health Leaders Summit October 7-9, 2015

INN ON THE LAKE, CANANDAIGUA NY

**JOIN YOUR COLLEAGUES ON OCTOBER 7\*-9, 2015!**

*Featured Topics and Presenters Include:*

- The High Achieving Governmental Health Department in 2020 as the Community Chief Health Strategist : From Report to Reality  
- Gary Cox, J.D., Executive Director, Oklahoma City-County Health Department
- Risk Perception, Science Communication and Vaccines  
- Daniel Kahan, J.D., Yale School of Law Cultural Cognition Project
- Adult Immunizations: Applying Implementation Science to Raise Rates  
- LJ Tan, Chief Health Strategist, Immunization Action Coalition
- Current/Emerging Issues for Local Health Leaders: Facilitated Discussion

NYSACHO's Annual Public Health Leaders Summit is the association's premier leadership event for Commissioners and Public Health Directors. The summit offers opportunities to explore a variety of public health leadership topics with your colleagues from around New York State and chart the course for the future of local public health and the association.

A Pre-Summit New Commissioner/Director Orientation will be held on October 7, 2015 (appointed between January 2013-present and did not serve previously as a Commissioner/Director in a different NYS LHD). The Annual Summit begins for all participants on October 8, 2015 at 10:30 am. The Summit is open to Commissioners and Public Health Directors or designated deputy-level staff.

Summit registration is limited to one person per county. NYSACHO covers the following costs:

- **Overnight accommodations for all attendees for the night of October 8, 2015**
- **Overnight accommodations for a limited number of attendees for the night of October 7, 2015** (Overnight accommodations are available for October 7th arrival (including dinner), with costs covered for attendees traveling a distance of greater than 200 miles or more the 2.5 hours and for New Commissioners/Directors (appointed January ,2013—present and not previously a commissioner/director in another county) . Priority for October 7th accommodations will be given to Orientation attendees, presenters, then based on travel distance; we cannot guarantee an overnight room on that night once our initial room block is filled.)
- **Meals—October 7th Arrival:** 10/7 Dinner 10/8 Breakfast, Lunch, Dinner 10/9 Breakfast, Lunch,
- **Meals—October 8th Arrival:** 10/8 Lunch, Dinner 10/9, Breakfast, Lunch
- **Meals—Commuters:** Lunch on all days attending, dinner on 10/8 if you choose to stay

**All transportation costs are at the attendee's expense.** All registration, including accommodation reservations are made through NYSACHO—please do not contact the facility directly.

Accommodations are on site at the **Inn on the Lake, Canandaigua, NY**. Immunization sessions will also be available to both LHD and State Immunization staff as webcasts. **Directions to the Inn on the Lake and other Summit details will be sent out to all registered participants at least one week prior to the Summit.**

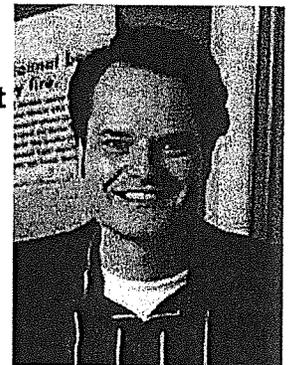


**Gary Cox, JD Executive Director, Oklahoma City-County Health Department**

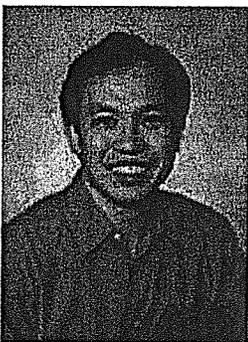
Gary Cox has served as Executive Director of the Oklahoma City-County Health Department (OCCHD) since 2009. Executive Director Cox is a nationally respected leader in Public Health, recently testifying before Congress regarding the national challenges of childhood obesity. He has also served as a grant review panelist for the CDC and is a member of the Public Health Law Research National Advisory Committee Member for the Robert Wood Johnson Foundation. Executive Director Cox has dedicated his career to improving health, raising the awareness about health issues across multiple sectors, and committing to developing and leverage private and public partnerships to improve community health outcomes. He is committed to a culture of continuous quality improvement and has consistently supported transparent and accountable governance in local health departmental activities, evidenced by the Oklahoma City-County Health Department designation as one of the first local health departments to pursue and achieve National Accreditation.

**Daniel Kahan, Yale Law School, Cultural Cognition Project**

Dan Kahan is the Elizabeth K. Dollard Professor of Law & Professor of Psychology at Yale Law School. His primary research interests are risk perception, science communication, and the application of decision science to law and policymaking. He is a member of the Cultural Cognition Project, an interdisciplinary team of scholars who use empirical methods to examine the impact of group values on perceptions of risk and related facts. His research has investigated public disagreement over vaccines, climate change, public reactions to emerging technologies, and conflicting public impressions of scientific consensus.



**L.J. Tan, MS, PhD, Chief Strategy Officer Immunization Action Coalition**



LJ Tan is the Chief Strategy Office of the Immunization Action Coalition. Prior to joining the Immunization Action Coalition (IAC), Dr. Tan was the director of medicine and public health at the American Medical Association (AMA) a position he held since 2008. From 1997 to 2008, he was the AMA's director of infectious disease, immunology, and molecular medicine. Dr. Tan is a voting member of the Department of Health and Human Services' National Vaccine Advisory Committee, where he served on the adult immunization, vaccine safety, and healthcare worker immunization working groups, and is currently chair of the immunization infrastructure working group. He also served for more than ten years as the AMA's liaison to the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices, where he currently serves on the influenza, pneumococcal, zoster, and adult immunization working groups.

# NYSACHO 2015 Public Health Leaders Summit Agenda

## WEDNESDAY, OCTOBER 7, 2015

- 1:00 pm      **New Commissioners/Directors Orientation** (appointed between January 2013–present)  
Presentations by NYSDOH on Article Six topics and Ask Your Colleagues  
Session with Veteran Local Health Officials
- 4:30 pm      **Networking Time**
- 6:00 pm      **Dinner** (For all attendees staying overnight at facility)

## THURSDAY, OCTOBER 8, 2015

- 7:00 am      **Breakfast**
- 8:00 am      **New Commissioners/Directors Orientation:**  
Legal Foundations of Public Health in NYS and Public Health Law as a Tool to  
Drive Public Health Policy (all Summit registrants welcome to attend)
- 10:00 am     **Summit Registration**
- 10:30 am     **The High Achieving Governmental Health Department in 2020 as the  
Community Chief Health Strategist: From Report to Reality**
- 12:00 pm     **Lunch**
- 1:00 pm      **Adult Immunization: Applying Implementation Science to Raise Rates**
- 2:30 pm      **Break/Networking**
- 3:00 pm      **Leadership topic TBD**
- 4:30 pm      **Break/networking**
- 6:30 pm      **Dinner**
- 7:30 pm      **Evening Event w/NYSACHO Alumni**

## FRIDAY, OCTOBER 9, 2015

- 7:30 am      **Breakfast**
- 8:30 am      **Risk Perception, Science Communication and Vaccines**
- 10:00 am     **Break**
- 10:15 am     **Current and Emerging Issues for Local Health Leaders**  
—Facilitated Group Discussion
- 12:30 pm     **Adjourn/Box Lunch**

**NYSACHO 2015 Public Health Leaders Summit Registration**

Name: Ginelle Jones  
Title: Asst Director Public Health  
Local Health Department: Warren  
Email: jonesg@warrencounty.ny.gov

**Registration for overnight accommodations:**

\*\*Please check both October 7th and October 8th options if you will be staying both nights.

I will attend the October 7, 2015 New Commissioner/Director orientation and will stay overnight on October 7th. (Appointed on or after January 1, 2013 and have not previously served as a public health director/commissioner in another NYS LHD) OR

I request overnight accommodations for October 7, 2015 and meet the 200 miles plus travel restriction ( limited rooms available, rooms allocated after orientation attendees and based on date registration received)

I will attend the Full Summit and need overnight accommodations for October 8, 2015

**Commuters ONLY**

I will commute to the New Commissioners/Directors Orientation on October 7th

I will commute to the Summit both days

I will commute/attend on October 8, 2015 only

I will commute/attend on October 9, 2015 only

I will stay for evening activities on October 8th, including dinner, if commuting.

*Registered  
On line  
8/18/15  
Conf.  
Attache*

All rooms are single, non-smoking. NYSACHO will work with the facility to accommodate any special requests indicated below regarding accessibility or dietary needs. Also, please use the space below for any travel-related notes, such as arriving late and/or departing early.

Special requests/notes: \_\_\_\_\_

Suggested topics for LHD Facilitated Discussion or New Commissioner/Director Ask a Colleague sessions: \_\_\_\_\_

Please register no later than September 4, 2015. NYSACHO's room block will be released the following Monday, September 7th and we cannot guarantee overnight room availability for any reservation requests received after September 4th. We recommend that you register prior to the September 4th deadline, even if awaiting travel approvals, and request a cancellation if necessary. If this is the case for you, please note tentative reservation in the special notes section. A confirmation email with final details will be sent out prior to the Summit.

**Registration Deadline: September 4, 2015**

Please fax completed form to Ellen Skulikdis, Fax: 518-452-5435 OR register on-line at:  
<https://www.surveymonkey.com/r/2015NYSACHOSUMMITREGISTRATION>

Questions? Contact Cristina Dyer-Drobnack, (518) 456-7905 or [cristina@nysacho.org](mailto:cristina@nysacho.org)

[Exit this survey](#)

## 2015 Annual Public Health Leaders Summit

Thank you for registering for the 2015 Annual Public Health Leaders Summit. Please print this page as confirmation that your registration was successfully submitted.

Done

# ***RESOLUTION REQUEST FORM NO. 20***

## ***MISCELLANEOUS***

***\*Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.  
Please attach any backup information available and be as detailed as possible.***

**DEPARTMENT NAME: Health Services**

**DATE: September 1, 2015**

- (a) Purpose of Request:  
**Rescind Resolution No. 381 - authorizing out-of-State travel for Tammie DeLorenzo to attend Delta Health Technologies 2015 National Customer Forum in Altoona, PA on September 14-17, 2015**
  
- (b) Details:  
**The conference will be offered remotely on-line so there is no longer a need for travel.**
  
- (c) Previous Resolution Number:  
**381 of 2015**
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

**Sample: A.8021 470 Planning & Community Development – Contract**

**\* as listed in budget and LOGOS**

# Warren County Board of Supervisors

## RESOLUTION NO. 381 OF 2015

Resolution introduced by Supervisors Sokol, Conover, Frasier, McDevitt and Westcott

**AUTHORIZING OUT-OF-STATE TRAVEL FOR TAMMIE DELORENZO,  
CLINICAL AND FISCAL INFORMATICS COORDINATOR TO ATTEND THE DELTA  
HEALTH TECHNOLOGIES 2015 NATIONAL CUSTOMER FORUM AND WAIVING  
SECTION I.B.3 OF THE WARREN COUNTY TRAVEL POLICY RELATING TO GSA RATES**

RESOLVED, that Tammie DeLorenzo, Clinical and Fiscal Informatics Coordinator is authorized to attend the Delta Health Technologies 2015 National Customer Forum in Altoona, Pennsylvania on September 14, 2015 - September 17, 2015, using a Warren County Health Services Department fleet vehicle for transportation, with the costs to the County for attendance being a Three Hundred Ninety-Nine Dollar (\$399) registration fee, and rate of Two Hundred Ninety-Seven Dollars (\$297) for lodging and meals and incidental expenses with receipts provided, and, be it further

RESOLVED, that Section I.B.3 of the Warren County Travel Policy be waived as it pertains to the GSA rates for hotel accommodations, and, be it further

RESOLVED, that the funds for the foregoing expenses shall be expended from Budget Code A.4010 444 - Health Services, Travel/Education/Conference.

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

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

Clinical and Fiscal Informatic Coordinator

The Health Services (Supervisory Committee) hereby authorizes Tammie De Lorenzo (Employee Name)  
Home Care Association of New York State (Name of meeting or organization)  
 to attend Senior and Financial Manager's Retreat

at Mohawk Mountain House New Paltz, NY  
 (Address)

on Sept 17-18, 2015 (Dates) Mode of transportation to be used Health Services  
Fleet vehicle (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.

conf. fee \$ 399.  
 total cost 704 plus tolls  
 tolls  
 All meals for 2 days included in room rate

For Overnight Travel

- Room rate \$ 305
- Meal costs - GSA\* per diem rate \$ All meals GSA\* Rate \$ tolls

\*www.gsa.gov

Date: 9-1-15

Patricia [Signature]  
 Department Head Signature

Date: \_\_\_\_\_

[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:

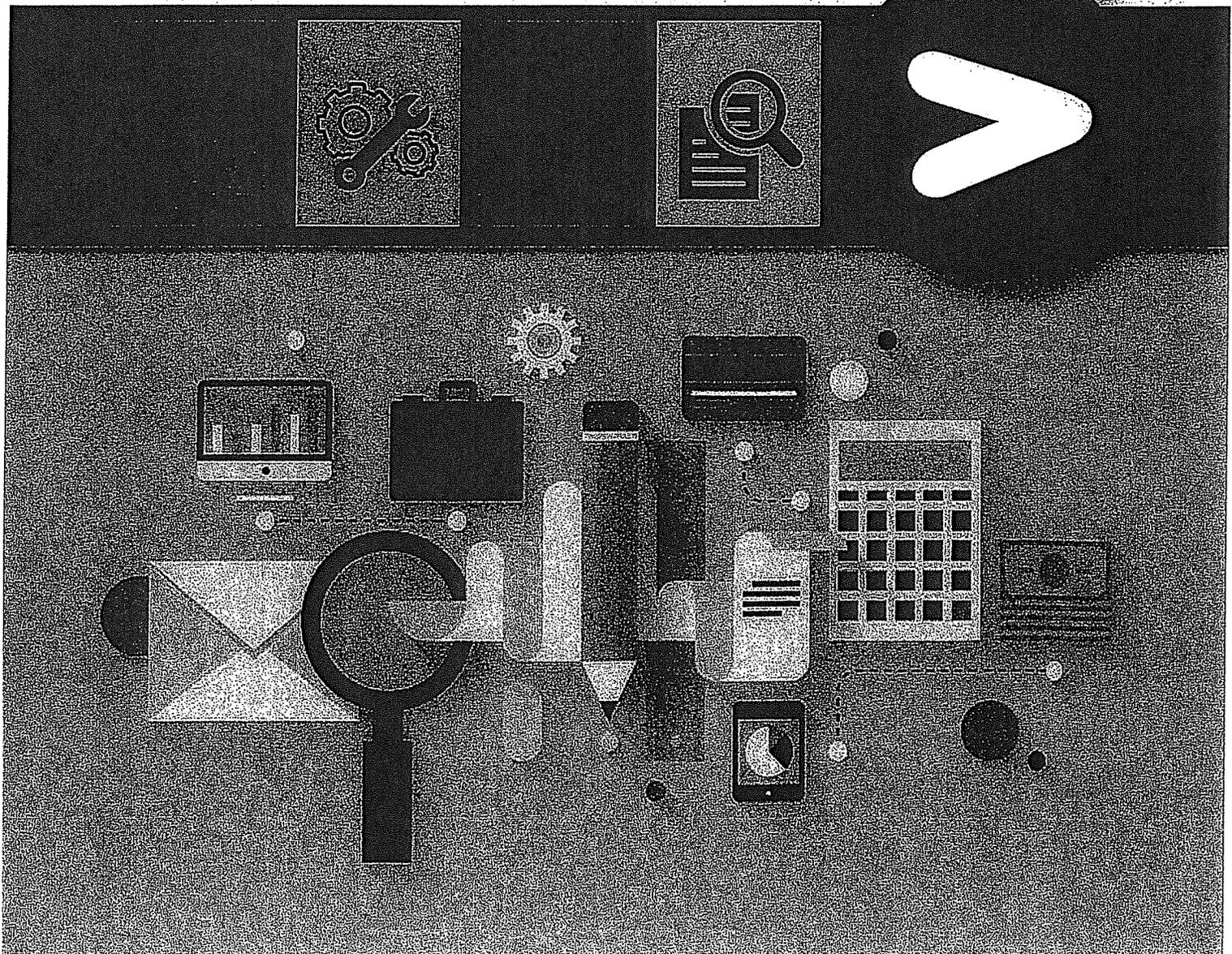
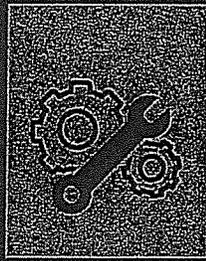
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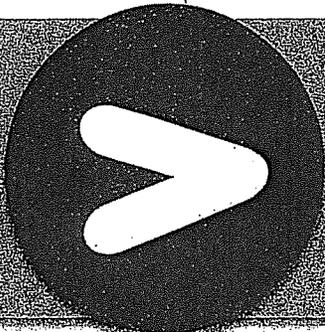
# HCA's Senior & Financial Manager's Retreat

September 17 & 18, 2015

Mohonk Mountain House, New Paltz, NY



*"CHHA Medicaid EPS rebasing cuts are here, and more cuts are coming. TPL and F2F are weighing on our bottom line. We've hardly got our head around DSRIP – and now the state is moving to value-based payments. Meanwhile, our accounts receivable is through the roof, and it feels like we've exhausted all potential growth opportunities."*



Are these the kinds of thoughts keeping you up at night? Come to **HCA's Senior and Financial Manager's Retreat** *to get away* – and to get a better grasp of today's home care payment and regulatory environment.

We'll help you put your budget in square order, find the answers you need from top officials and contractors, and gain valuable insights from the state's leading consultants who will reveal what they are telling their clients about where to look for new opportunities.

HCA is offering this program in **4** **critical domains:** *The Big Picture, Reimbursement Mechanics and Updates (Medicaid and Medicare), Strategic Planning for New Growth Areas, and A Medicare Focus.* Details are fleshed out later in this brochure.

Also, did we mention that this is all taking place at one of the nation's top-ranked resorts, conveniently located in the Catskills?

If you've been to this retreat before – at the scenic Mohonk Mountain Resort in New Paltz – you know it's the right place to get informed and inspired.

With your hotel and conference registration, we have you covered: **expert presenters**, all meals at Mohonk's **world-class dining facilities**, an **evening reception** to network, access to the resort's **trails and picturesque grounds**, and months-worth of **insights** in two days. You just need to reserve your spot.

**Please register by August 15** to get your seat at the table. And while you are at it, why not make it a "table for two"? Bring your CEO, chief finance officer or finance directors for shared learning and strategic planning.

The Big Picture

Mechanics

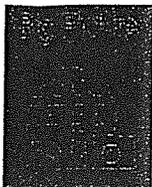
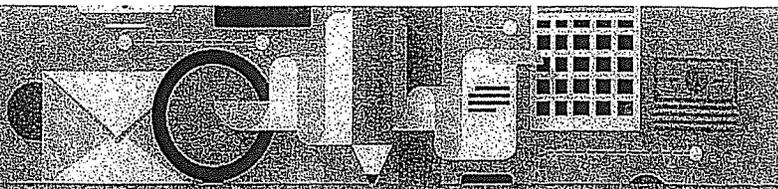
Medicare Focus



**Conference Sessions**

September 17 (9:15am to 4:45pm)

September 18 (8:30am to noon)



**Domain I:  
The Big Picture**

- *HCA's Policy & Executive Team – Sept. 17*

Let HCA's policy and executive team set the stage for you. We'll give you the latest info from Albany and Washington. We'll tell you what we are doing to shape the payment and regulatory environment in a way that mitigates risk and opens new opportunities. Best yet, we'll answer your questions on any reimbursement, payment or regulatory issues needing clarification.



**Domain II:  
Reimbursement Mechanics  
and Insights (Medicaid &  
Medicare)**

- *DOH Reimbursement Updates (Tim Casey and Dan Carmody) – Sept. 17*
- *New Developments in TPL (OMIG & UMASS) – Sept. 17*

The timing of this conference couldn't be better: DOH will be finalizing its CHHA rebasing rates in October, just a few weeks after the Retreat. You'll get the most up-to-date preview of the state's intentions for resetting the CHHA reimbursement system – not to mention countless other Medicaid reimbursement, MLTC, FIDA and managed care updates that *all* home care programs need to know about.

We don't need to tell you that TPL billing and audits have been a major unreimbursed assignment for home care agencies across the state. Things may be changing. For instance, what does the future hold, now that much of the state's dually eligible population has moved into managed care? TPL occupies a big space in your administrative budget; you'll want to know what's coming next from OMIG and its TPL contractors.



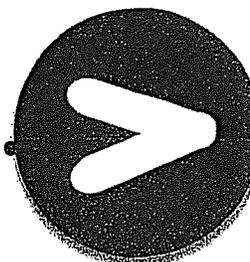
**Domain III:  
Strategic Planning –  
Inside and Outside the  
Government Payor Box**

- *Value Based Purchasing (Mark Berg, KPMG) – Sept. 18*
- *Panel Discussion on Plan, Physician Practice, Hospital/HomeCare – Sept. 17*
- *New Business Lines in Evolving Market Places (industry experts) – Sept. 17*

We know you need more answers about all of the new payment models on the horizon, as well as growth opportunities that cut across payor lines. If you thought DSRIP was a big change, by now you know it's merely a temporary bridge to a more permanent structure called value-based payments. The state's value-based payment program offers a blend of upside and downside risk, at various tiers, and Dr. Mark Berg will get you thinking now about which options to pursue – and how to acclimate your operation for success.

HCA also knows there are several other value and growth areas that may seem hidden to you – and we have top experts to present these insights, including a panel who will discuss innovative arrangements with plans, physicians and hospitals. Meanwhile, home care providers value the advice of consultants as you explore growth opportunities, so we'll also have top experts here to help you explore new business lines to diversify your portfolio as well.

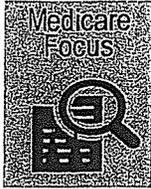
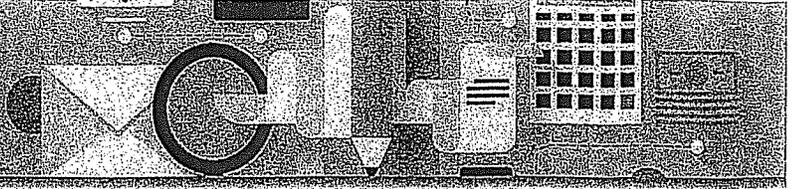
*We know you need  
more answers...*



Conference Sessions

September 17 (9:15am to 4:45pm)

September 18 (8:30am to noon)



**Domain IV:**  
A Focus on Medicare

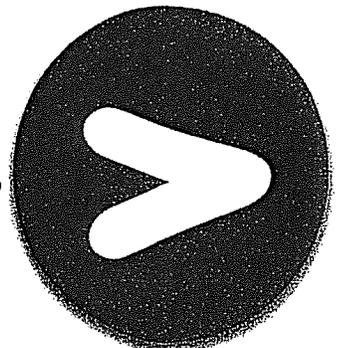
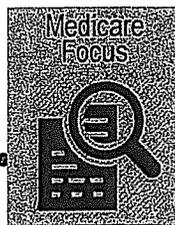
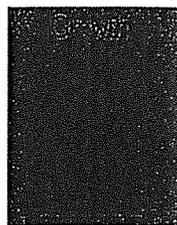
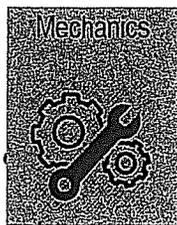
- *Maximizing Your Medicare Revenues Through Improving Operations and Benchmarking (Michael Freytag, Black Tree Healthcare Consulting) – Sept. 17*
- *Federal Update on F2F, Regulatory Issues and Reimbursement (Bill Dombi, NAHC) – Sept. 18*

You've been benchmarked!

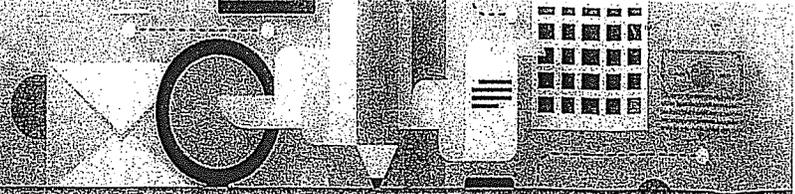
It's how Medicare and Medicaid rates are set; it's even how auditors decide who to target for review. But you can also use benchmarking to your advantage. You just need the data, and a little insight.

While HCA has substantially built up our capabilities in this area, through our HCA Data page and other resources, a lot of this data gathering and analysis has also been done for you by expert consultants and benchmarking analysts. Enter Black Tree Healthcare Consultants, who will show you the most important Medicare comparative data to set your compass right.

NAHC's Bill Dombi is one of the sharpest and most knowledgeable voices on Medicare home health – bar none. We are delighted that he is available to present some very practical insights on evolving guidance related to the face-to-face requirement, Medicare rebasing and other major payment issues affecting the Medicare side of your operation.



**Senior Financial Managers Retreat**  
**September 17 & 18, 2015**  
**Mohonk Mountain House**



The registration fee of \$299 for HCA members includes two days of expert speakers and handout materials, plus breaks, a reception and lunch on the final day that is not included with your room package. Potential members are also welcome at the rate of \$399 per person. Mohonk Resort rooms/meals are additional – see page 4.

**REGISTRANT INFORMATION – Please register by August 15.**

Name: Ammie De Lorenzo  
 Title: Clinical and Fiscal Informatics Coordinator  
 Agency: Warren County Health Services  
 Address: 1340 State Route 9  
 City/State/Zip: Lake George, New York 12845  
 Phone: 518-761-6415 Ext. - Fax: 518-761-6562  
 Email: delorenzo@warrencountyny.gov  
 (Required)

**HCA REGISTRATION FEE**

Member Fee  \$299  
 Non-Member Fee  \$399

**MOHONK RESORT FEES**

Check one of the following. See resort information and pricing on page 4 for details.

I will make my overnight room reservation directly with Mohonk.  \$ 305  
 I require a Mohonk "day only" pass at \$120 per day.  \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

**PAYMENT – Please check method of payment:**

MasterCard  VISA  American Express  Check\*

\*Make checks payable to: **HCA Education and Research and mail to 388 Broadway, 4<sup>th</sup> Floor, Albany, NY 12207.** Checks must be received by September 8.

Card Number \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_  
 Mailing Address of Card Holder \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Name on Card \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_

**FAX this form to 518-426-8788 or register online at [www.eventville.com/hcanys](http://www.eventville.com/hcanys)**

**HCA Cancellation Policy**

HCA registration cancellations received by August 28 are refundable less a 25% administrative fee. No refunds will be issued after this date.

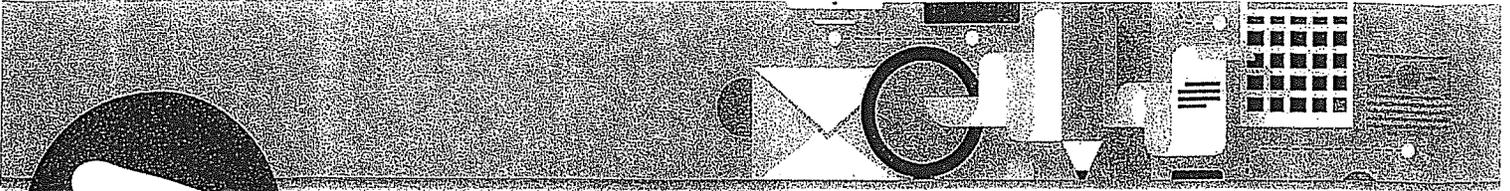
Cancellations must be received in writing at [info@hcanys.org](mailto:info@hcanys.org). Substitutions are permitted. Please note Mohonk's cancellation policy when making your reservation.

**Special Needs**

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_






# Getting Away

Thanks to our Sponsors and Exhibitors!

### Mohonk Mountain House Rates and Other Information

Your combined hotel and registration rate includes your room, all meals, breaks, valet parking and meeting amenities. **A single room rate is \$305 per person, per day; double rates are \$229 per person, per day.** Local taxes and a 12% gratuity are additional.

All Mohonk reservations should be made by August 15 to receive the HCA conference rate and be guaranteed a room. After this date, higher rates will apply based on availability.

Call 800-772-6646 and ask for the HCA rate.

### Not Staying Overnight at Mohonk?

Since this is a remote resort in the mountains, and Mohonk wants to also be prepared for those not staying overnight, a **"per-day rate" of \$120 is charged.** This day rate includes lunch, breaks, meeting amenities, and self-parking. Day guests must register with HCA as well in order to access the property. Please include the fee(s) with your HCA registration (next page).



Bestcare, Inc



# RESOLUTION REQUEST FORM NO. 3

## Request for New Contract

DEPARTMENT NAME: Health Services

DATE: 08/28/2015

- (a) Is this a Result of a Bid or Request for Proposal? No
- (b) Purpose of Contract: To form an agreement with Eileen Dashnaw to provide Occupational Therapy Services
- (c) Name of Contractor: Eileen Dashnaw
- (d) Address of Contractor: 42 Priest Road, Salem, NY 13216
- (e) Contractor's Contact Person and Telephone Number: (518) 260-6186, email: dash9540@gmail.com
- (f) Has or will the Contract be provided, if so, please attach: No, use therapist
- (g) Commencement Date of Contract: 09/21/2015
- (h) Termination Date of Contract: 30 days written notice by wither party
- (i) Payment Provisions: at agreed upon per individual visit or meeting rate
- 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. Paid bi-monthly upon receipt of written documentation for each individual visit made)

<u>Eval Region 1</u>	<u>\$55.00</u>
<u>Revisit Region 1</u>	<u>\$53.00</u>
<u>Eval Region 2</u>	<u>\$60.00</u>
<u>Revisit Region 2</u>	<u>\$60.00</u>
<u>Meetings</u>	<u>\$40.00</u>

<u>Early Intervention Services Only</u>	
<u>Region 1 Eval</u>	<u>\$50.00</u>
<u>Region 1 Revisit</u>	<u>\$50.00</u>
<u>Region 2 Eval</u>	<u>\$57.00</u>
<u>Region 2 Revisit</u>	<u>\$57.00</u>

- (j) 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:

4010.470 Health Services Contract Expense

**Eileen K. Dashnaw**  
42 Priest Road  
Salem, New York 13216  
Phone (518) 260-6186  
E-mail: dash9540@gmail.com

**Certification:** ACVREP Certification # 5874 Orientation & Mobility Specialist

**Licensure:** New York State License #011763-1 Occupational Therapist

**Education:** **University of Arkansas at Little Rock, Little Rock, AR**  
Graduate Certificate – Orientation & Mobility  
Coursework completed March 12, 2009

**SUNY – Downstate Medical Center, Brooklyn, New York**  
Early Intervention Certificate Program for Occupational  
Therapists (EICP-OT), February 2007

**Utica College of Syracuse University, Utica, New York**  
Bachelor of Science - Occupational Therapy, December 2001  
Minor: Psychology

**Work Experience:**

Self-Employed – Private Contractor

8/09-Present. Private contract Orientation & Mobility Specialist and Occupational Therapist working with children birth - 21 years of age who are visually impaired within the home, classroom and community based settings, as well as working with children who have fine motor and/or sensory processing concerns.

Achievements, PLLC

3/04-7/09. Staff Occupational Therapist working with children birth - 18 years of age with a wide range of diagnosis, developmental delays, and disabilities within both classroom and community based settings.

7/09-present. Per-diem Orientation & Mobility Specialist and Occupational Therapist working with children birth - 18 years of age who are visually impaired within the home, classroom and community based settings, as well as working with children who have fine motor and/or sensory processing concerns.

Prospect Child and Family Center

1/02-3/04. Staff occupational therapist working with children with developmental delays within Prospect school, Early Intervention and contracted therapist with a local school district.

**Memberships:**

- Association for Education and Rehabilitation of the Blind and Visually Impaired (AER)
- New York State Occupational Therapy Association (NYSOTA)
- Phi Theta Kappa Honor Society

**References:**

Available upon request.



HEALTHCARE PROVIDERS SERVICE  
ORGANIZATION PURCHASING GROUP



**Certificate of Insurance**  
OCCURENCE POLICY FORM

Print Date: 7/09/2015

**Producer Branch Prefix Policy Number Policy Period**  
018098 970 HPG 0419031205 from 08/12/15 to 08/12/16 at 12:01 AM Standard Time

**Named Insured and Address:**

Eileen K Dashnaw  
42 Priest Rd  
Salem, NY 12865-1914

**Program Administered by:**

Healthcare Providers Service Organization  
159 E. County Line Road  
Hatboro, PA 19040-1218  
1-800-982-9491  
www.hpsso.com

**Medical Specialty:**

Occupational Therapist

**Code:**

80721

**Insurance is provided by:**

American Casualty Company of Reading, Pennsylvania  
333 S. Wabash Avenue, Chicago, IL 60604

Excludes Cosmetic Procedures

**Professional Liability** \$1,000,000 each claim \$ 3,000,000 aggregate

Your professional liability limits shown above include the following:

- \* Good Samaritan Liability
- \* Malplacement Liability
- \* Personal Injury Liability
- \* Indirect Sexual Misconduct included in the PL limit shown above subject to \$25,000 aggregate sublimit

**Coverage Extensions**

License Protection	\$ 25,000	per proceeding	\$ 25,000	aggregate
Defendant Expense Benefit	\$ 1,000	per day limit	\$ 25,000	aggregate
Deposition Representation	\$ 10,000	per deposition	\$ 10,000	aggregate
Assault	\$ 25,000	per incident	\$ 25,000	aggregate
Includes Workplace Violence Counseling				
Medical Payments	\$ 25,000	per person	\$ 100,000	aggregate
First Aid	\$ 10,000	per incident	\$ 10,000	aggregate
Damage to Property of Others	\$ 10,000	per incident	\$ 10,000	aggregate
Information Privacy (HIPAA)	\$ 25,000	per incident	\$ 25,000	aggregate

**Workplace Liability**

Workplace Liability Included in Professional Liability Limit shown above  
Fire & Water Legal Liability Included in the PL limit shown above subject to \$150,000 aggregate sublimit  
Personal Liability \$1,000,000 aggregate

**Total: \$ 382.00**

Base Premium \$382.00

Premium reflects Self Employed , Full Time

**Policy Forms & Endorsements**(Please see attached list for a general description of many common policy forms and endorsements.)

G-121500-D	GSL10550NY	G-121503-C	G-121501-C	GSL11892NY	GSL3886
GSL3908	G-145184-A	G-147292-A	GSL15563NY	GSL15565NY	GSL17101
GSL18064NY	GSL13424	CNA80051	CNA80052	G-123813-C31	G-123846-D31
G-121486-B	(03)	G-123828-B	(04)	CNA79575	

*Thomas F. Motamed* Chairman of the Board  
*John M. Walker* Secretary

*Keep this document in a safe place. It and proof of payment are your proof of coverage. There is no coverage in force unless the premium is paid in full. In order to activate your coverage, please remit premium in full by the effective date of this Certificate of Insurance. Master Policy # 188711433*

G-141241-B31 (03/2010)

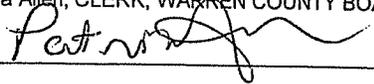
Coverage Change Date:

Endorsement Change Date:

**RESOLUTION REQUEST FORM NO. 10**

**Request for Transfer of Funds**

TO: Amanda Allen, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

SIGNED: 

DATE: 9/1/15

	<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1.	A.4016.110	Long Term Care -Full time salaries	A.4010.130	Health Services -Part Time Salaries	\$10,000.00
2.	A.4010.110	Health Services-Full Time salaries	A.4010.120	Health Services -Overtime Salaries	\$5,000.00
	A.4010.110	Health Services-Full Time salaries	A.4010.130	Health Services -Part Time Salaries	\$20,000.00
3.	A.4189.130	Bioterrorism-Part Time Salaries	A.4189.410	Bioterrorism-Supplies Expense	\$1,000.00
	A.4189.130	Bioterrorism-Part Time Salaries	A.4189.423	Bioterrorism-Telephone Expense	\$1,000.00

**Total Transfers**

**\$37,000.00**

1. To transfer funds from Full time in LTC to Part Time salaries in CHHA to cover the Per Diem nursing being used for CHHA.
2. To transfer funds from Full time in Health Services to Overtime and Part Time salaries in CHHA to cover to the end of year for OT and the Per Diem nursing being used for CHHA.
3. To transfer funds from Bioterrorism part time salaries to Supplies and Telephone to cover expenses to end of year.(fully funded by grant)

**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

**BT ACTIVITY SHEET**  
**BP4 - 7/1/15 - 6/30/16**

Page 1

Topic Color Codes

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

**1<sup>ST</sup> QUARTER ACTIVITIES (July 1, 2015 – September 30, 2015)**

▶ To be recorded on NYSDOH Deliverable template

<b>Date</b>	<b>Type</b>	<b>Subject/Comments</b>	<b>Attendees</b>	<b>Topic (i.e. Chempack, Drill, Mass Fatality, SNS, Training, Pan Flu, Special Needs)</b>
7/15	Tabletop	GFH – Scout Troop Lost in Adirondacks	Dan Durkee	Drill
7/22	Meeting	EPR/LEPC Quarterly Meeting (Chempack Discussion lead by Laura Stebbins)	Dan Durkee	
7/28	Deliverable	Resubmitted 4qtr Deliverables report and Ebola report	Dan Durkee, Ginelle Jones	
7/30	Meeting	ChemPack Plan and PHEPR Plan Annual Update	Dan Durkee, Amy Hirsch	

**1<sup>ST</sup> QUARTER ACTIVITIES (July 1, 2015 – September 30, 2015)**

▶ To be recorded on NYSDOH Deliverable template

<b>Date</b>	<b>Type</b>	<b>Subject/Comments</b>	<b>Attendees</b>	<b>Topic (i.e. Chempack, Drill, Mass Fatality, SNS, Training, Pan Flu, Special Needs)</b>
8/3	Meeting	ChemPack Sustainment visit by CDC at GFH	Dan Durkee	Chempack
8/11	Meeting	Regional Public Health Emergency Preparedness Meeting	Dan Durkee	
8/11	Inservice	Fit Testing Equipment demonstration	Ginelle Jones	Training
8/19	Clin-Ops	Community Receiving Stations during a Radiation Incident	Dan Durkee	CDMS/POD

Attachment # 1

**WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS**

REVENUE AND EXPENDITURES FOR 2015 AS OF 8/26/2015 10:12:57 AM for September 1, 2015 Meeting

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

CODE(S): 4010, 4011, 4013, 4016, 4046, 4054, 4189, 4025, 4190

EXPENSES	2015 BUDGETED	2015 YTD ACTUAL	2014 Prior Year Totals
Salaries - Regular	\$2,874,379.00	\$1,713,211.85	\$2,814,172.3
Salaries - Overtime	\$134,500.00	\$81,460.90	\$130,843.9
Salaries - Part Time	\$308,721.00	\$178,102.56	\$262,705.4
100's PERSONAL SERVICES	\$3,317,600.00	\$1,972,775.31	\$3,207,721.6
200's EQUIPMENT	\$32,265.00	\$18,644.08	\$130,183.6
400's CONTRACTUAL	\$6,822,743.20	\$2,708,688.80	\$5,844,841.3
800's EMPLOYEE BENEFITS	\$1,766,029.00	\$1,140,185.69	\$1,801,449.3
<b>TOTALS</b>	<b>\$11,938,637.20</b>	<b>\$5,840,293.88</b>	<b>\$10,984,196.0</b>
<b>REVENUES</b>	<b>2015 BUDGETED</b>	<b>2015 YTD ACTUAL</b>	<b>2014 Prior Year Totals</b>
	\$9,728,321.00	\$3,957,430.39	\$8,776,039.6

Note: Revenues reflect an accrual for July billings for CHHA, LTC and MCH of \$364,898.80. Also accrued is \$37,058 for June and \$67,815 for July for the WIC grant.

**Warren County Health Services**

**Salaries Comparison**

2014 vs 2015  
as of 8/9/15 Payroll

Total of All Depts	YTD 2015	YTD 2014	YTD 14v15	% Change	Total Budget 2015	Total Actual 2014
Regular Salaries	\$1,713,211.85	\$1,706,847.92	\$6,363.93	0.37%	\$2,874,379.00	\$2,814,172.3
Overtime Salaries	\$81,460.90	\$80,111.63	\$1,349.27	1.68%	\$134,500.00	\$130,843.9
Part Time Salaries	\$178,102.56	\$163,371.52	\$14,731.04	9.02%	\$308,721.00	\$262,705.4
<b>TOTALS</b>	<b>\$1,972,775.31</b>	<b>\$1,950,331.07</b>	<b>\$22,444.24</b>	<b>1.15%</b>	<b>\$3,317,600.00</b>	<b>\$3,207,721.6</b>
% current YTD Salary to Total Budget	59.46%	60.80%				

\*Source: Detail G/L report for all Salary Category from 1/1/XX-8/9/XX

Note: Total Salaries YTD are 59.46% of 2015 budget, which is below salaries at this time last year of 60.80%. Actual regular FT salaries are \$6,363.93 or .37% over FT salaries in 2014.

Two retirements in July within the CHHA (totalled \$11,503) brought us over 2014 totals, otherwise we would be (\$5,139) under last year total.

Part time salaries YTD are also above 2014. This is primarily due to a retirement which occurred in May costing \$9,454, otherwise we would be \$5,277 over last years salaries and this is due to staffing shortages in nursing, per diem nurses have been utilized to cover referrals, therefore and increase in part time salaries overall.

Therefore, if there were no retirements, we would be \$1,487 over total salaries in 2015 compared to 2014 and at 58.83% of budget for 2015.

**ATTACHMENT #2**

Page 1 of 1

**Revenue and Expense Comparison 2015 vs 2014  
as of 9/1/15 meeting**

	9/1/2015	8/25/2014	
EXPENSES	2015 YTD Actual as of 8/26/15 G/L	2014 YTD Actual as of 8/19/14 G/L	Variance
Salaries - Regular	\$1,713,211.85	\$1,706,807.92	\$6,403.93
Salaries - Overtime	\$81,460.90	\$80,111.63	\$1,349.27
Salaries - Part Time	\$178,102.56	\$163,411.52	\$14,691.04
100's PERSONAL SERVICES	\$1,972,775.31	\$1,950,331.07	\$22,444.24
200's EQUIPMENT	\$18,644.08	\$75,910.60	(\$57,266.52)
400's CONTRACTUAL	\$2,708,688.80	\$2,584,007.29	\$124,681.51
800's EMPLOYEE BENEFITS	\$1,140,185.69	\$1,180,835.50	(\$40,649.81)
<b>TOTALS</b>	<b>\$5,840,293.88</b>	<b>\$5,791,084.46</b>	<b>\$49,209.42</b>

REVENUES	2015 YTD ACTUAL	2014 Prior Year Totals	
	\$3,957,430.39	\$3,927,084.34	\$30,346.05

Notes:

Salaries: (please see previous page )

Full time and part time salaries are above 2014 YTD due to three retirements which occurred between May and July totalling \$20,957. Otherwise total salaries YTD would be \$1,487 above 2014 YTD total salaries. Per Diem staff , which are expensed within Part time salaries, continue to be utilized to assist in nursing shortage coverage therefore keeping the overtime down while other salary expenses reflect annual salary increases as outlined in the CSEA contract. Employee benefits remain below 2014 due to the correlation with the reduction in full time salaries.

Contractual Expenses:

Contractual expenses are above 2014 primarily due to the timing of these reports. Expenses for 2015 are based on numbers as of 8/26/15 where in comparison to 2014 they are based on expenses as of 8/19/14. This difference of a week is why 2015 expenses are slightly higher than compared to last year.

Warren County Health Services  
Patient Evaluations  
CHHA Division

CATEGORY	01/2013	02/2013	03/2013	04/2013	05/2013	06/2013	07/2013	08/2013	09/2013	10/2013	11/2013	12/2013
SN eval	156	115	135	128	146	101	151	135	126	141	113	145
SN IV eval	9	4	0	6	12	5	4	6	7	5	7	10
CDPAP	11	8	9	10	9	8	7	11	7	6	12	16
PRU	13	4	8	12	14	11	13	14	8	14	7	2
SN Evals per month	189	131	152	156	181	125	175	166	148	166	139	163
PT evals	103	88	75	84	81	61	96	95	83	104	76	80
PT only	22	7	20	23	37	24	37	28	21	30	18	19
PT only evals per mo	22	7	20	23	37	24	37	28	21	30	18	19
Total Evals per month	211	138	172	179	218	149	212	194	169	196	157	183

CATEGORY	01/2014	02/2014	03/2014	04/2014	05/2014	06/2014	07/2014	08/2014	09/2014	10/2014	11/2014	12/2014
SN eval	127	110	132	114	139	85	116	122	106	103	109	116
SN IV eval	7	4	6	2	5	7	5	5	6	15	4	7
CDPAP	7	2	0	0	0	0	0	0	0	0	0	0
PRU	3	2	3	4	0	5	3	3	6	3	5	5
UASNY	15	11	18	14	12	23	26	21	19	16	15	26
SN Evals per month	159	125	159	134	156	120	150	151	137	137	133	154
PT evals	88	82	78	69	84	61	75	76	67	74	70	70
PT only	33	32	35	25	25	27	27	21	18	21	24	21
PT only evals per mo	33	32	35	25	25	27	27	21	18	21	24	21
Total Evals per month	192	157	194	159	181	147	177	172	155	158	154	175
	-9%	12%	13%	-11%	-17%	-1%	-17%	-11%	-8%	-19%	-2%	-4%

TOTAL EVALS DOWN 7% FROM 2013

CATEGORY	01/2015	02/2015	03/2015	04/2015	05/2015	06/2015	07/2015	08/2015	09/2015	10/2015	11/2015	12/2015
SN eval	122	110	114	109	122	109	122					
SN IV eval	9	6	8	13	5	7	8					
CDPAP	1	0	0	0	0	0	0					
PRU	5	5	5	6	5	2	2					
UASNY	18	15	23	16	10	13	23					
SN Evals per month	155	136	150	144	142	131	155					
PT evals	80	75	94	80	71	82	80					
PT only	25	26	34	30	31	24	26					
PT only evals per mo	25	26	34	30	31	24	26					
Total Evals per month	180	162	184	174	173	155	181					
	-7%	3%	-5%	8%	-4%	1%	1%					