

Warren County Health Services
 Health Services Committee
AGENDA FOR
October 18, 2021
 Information Submitted By: Ginelle Jones, DPH/DPS

Health Services Committee Members: Edna Frasier, Peter McDevitt, Ronald Conover, Andrea Hogan, and John Strough- Chair of the Board shall serve as the Ex-Officio member when needed in accordance with the Section C (4) of the Rules of the Board.

- I. Committee meeting called to order by Chairperson
- II. Motion to approve the minutes of the September 20, 2021 Committee meeting.
- III. Action Agenda/New Business

Request Resolution: 1	To authorize Health Services to enter an agreement with NYSDOH Health Research Inc. and accept \$980,544 grant funding for the Public Health Corps (PHC) Fellowship Program for a contract period of 9/1/2021-7/31/2023, allowing extensions and funding as additional funding is made available. (Attachment #1)
Rationale:	The Public Health Corps Fellowship program provides the opportunity to build the public health workforce and infrastructure. Funding is provided to NYSDOH through the CDC through the Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases in NYS (CFDA#93.323) and Cooperative agreement for Emergency Response: Public Health Crisis Response-2018, CFDA#93.354).

Request Resolution: 2	To authorize Health Services to enter an agreement with Hudson Headwaters Health Network (HHN) as a subcontractor and subrecipient of the NYSDOH/ Health Research Inc. Public Health Corps Fellowship Program in accordance with the outlined grant requirements to perform the required deliverables and receive funding not to exceed \$980,544 for the entire grant period, including any extensions. (Attachment #2)
Rationale:	While Health Services fully supports this NYS Public Health Corps Fellowship program, with current Covid Response efforts and space limitations, we are unable to commit to the grant deliverables. Health Services works closely with HHHN and is excited HHHN has the capacity to facilitate this program on behalf of Health Services. The intention of this agreement is that HHHN will ensure the grant requirements are completed and will receive the allowed compensation. This agreement will be at no cost to the county and all expenses will be covered by the NYSDOH/HRI grant.

Request Resolution: 3	To amend NYSDOH Immunization, Covid-19 Vaccine grant contract (C36966GG) from 1/1/2021-6/30/2021 to not exceed \$183,683.11, to reflect the receipt of additional \$112,840.78 funding. (Attachment #3)
Rationale:	Health Services received notification of additional funding, which is to be used to support Covid-19 vaccine administration equity and implement vaccine confidence strategies for Covid-19 and other routine vaccinations.

Request Resolution: 4	To amend Resolution 122 of 2019 to correct and clarify authorization to execute further amendment agreements with Waystar/Zirmed for aforesaid services, without need for future resolutions as long as there is no more than 5% annual rate increase in a form approved by the county attorney. (Attachment #4)
Rationale:	The contract is renewed annually for the purpose of verifying insurance before billing, to expedite claims without denials. The contract requires annual renewal and prior resolution was sought authorizing annual renewal, as long as annual rate increase did not exceed 5%. However, the actual resolution reflected an overall rate increase of 5%.

Request Resolution: 5	To amend Resolution 157 of 2019 to correct and clarify authorization to execute further amendment agreements with Waystar/Zirmed for aforesaid services, without need for future resolutions as long as there is no more than 5% annual rate increase in a form approved by the county attorney. (Attachment #4)
Rationale:	The contract is renewed annually for the purpose of verifying insurance before billing, to expedite claims without denials. The contract requires annual renewal and prior resolution was sought authorizing annual renewal, as long as annual rate increase did not exceed 5%. However, the actual resolution reflected an overall rate increase of 5%.

Request Resolution: 6	To amend Resolution 455 of 2016 authorizing Director of Public Health to enter contracts, provided any one does not exceed \$5000 to reflect 1) increase in single contract amount not to exceed \$10,000 and 2) authorize annual contract renewals with up to 5% annual increase, and 3) authorize minor amendments in a form approved by the County Attorney to reflect necessary verbiage changes or change in regulation. (Attachment #6)
Rationale:	Health Services utilizes minor routine and/or emergency services from a variety of vendors or contractors for services such as, but not limited to after hour answering services, miscellaneous repairs and/or maintenance, funding for small projects etc. .The last resolution was requested in 2016 and the amount needs to be increased, Health Services will continue to work with the County Attorney's Office and will ensure 1) Single contracts without resolution will not exceed \$10,000,

II. Referral/Pending Items

There are no pending items.

**III. Privilege of the floor to discuss any additional items to come before Committee
(Please allow 15 second delay on live stream meetings)**

1. Covid Update

IV. Motion to adjourn the Health Services Meeting

Attachments:

1. Resolution Request: NYSDOH/HRI Public Health Corps Fellowship Program
2. Resolution Request: Agreement with Hudson Headwaters Health Network
3. Resolution Request: Amend Covid-19 Vaccine Response Contract #C36966GG
4. Resolution Request: Amend Health Services/Homecare Waystar/Zirned Contract. Resolution 122 of 2019.
5. Resolution Request: Amend Health Services/Public Health Waystar/Zirned Contract. Resolution 157 of 2019.
6. Resolution Request: Amend Resolution 455 of 2016 Contract Authorization
7. Resolution Request: 2021 Budget Amendment NYSDOH/HRI Public Health Corps \$980,544
8. Resolution Request: 2021 Budget Amendment NYSDOH Covid-19 Vaccine Response Contract \$112,840.78
9. Resolution Request: Budget Transfer
10. Report of Revenues and Expenditures for 2021
11. Revenue and Expense Comparison Report for 2020 vs 2021
12. Report of Referrals Status A/B
13. Emergency Response and Preparedness Activities Report
14. Rabies Report
15. Meeting Authorization: HCAs, Homecare, and Hospital Emergency Preparedness

	2) funding is in the Health Services budget, 3) actions will be in compliance with the current Warren County Purchasing Policy (with the exception of the need to acquire resolutions), and that all contracts are in a form approved by the County Attorney.
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Request Resolution: 7	To amend the 2021 budget to reflect receipt of HRI/NYSDOH NYS Public Health Corps Fellowship Program in the amount of \$980,544 (Attachment #7)
Rationale:	Tawn Driscoll, Fiscal Manager, will be at the meeting to discuss.

Request Resolution: 8	To amend the 2021 budget to reflect receipt of \$112,849.78 additional funding through the Immunization Action Plan (IAP) Public Health Covid Response Contract (Attachment #8)
Rationale:	Tawn Driscoll, Fiscal Manager, will be at the meeting to discuss.

Request Resolution: 9	To authorize 2021 budget transfer. (Attachment #9)
Rationale:	Tawn Driscoll, Fiscal Manager, will be at the meeting to discuss.

I. Information for Discussion/Review

Report of Revenues and Expenditures for 2021

Please see **Attachment #10**. Tawn Driscoll, Fiscal Manager, will be present at the meeting to review the reports and answer any questions.

Revenue and Expense Comparison Report for 2020 vs 2021

Please see **Attachment #11**.

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

Status of Referrals

Please see **Attachment #12 A/B** for the report.

Emergency Response and Preparedness

Please see **Attachment #13** for the report.

Rabies Report:

Please see **Attachment #14** for the report.

Meeting/ Conference Authorizations: (Attachment # 15)

- 1) Valerie Whisenant received authorization to attend the Home Care Association's virtual conference: HCAs, Homecare, and Hospice Emergency Preparedness, which was held October 6, 2021. The cost was \$159 and funds were in the budget to cover the expense.

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Warren County Health Services

DATE: 10/18/2021

- (a) Is this a Result of a Bid or Request for Proposal? No.
- (b) Purpose of Contract: **The primary purpose of this funding is build the Public Health workforce and infrastructure. Funding may also be used to support a project corrdinator, administrative support, and other costs such as supplies, PCs/laptops and travel needs to support the fellow(s). Additionally, funding may be used to hire a contractor to recruit and manage fellowships in collaboration with Warren County Public Health.**
- (c) Name of Contractor: **Health Research Inc./ New York State Department of Health (HRI/NYSDOH).**
- (d) Address of Contractor: **Grants Administration, Office of Public Health
150 Broadway, Suite 516
Menands, NY 12204**
- (e) Contractor's Contact Person and Telephone Number: **Cori Lewis. 518-408-2063**
- (f) Has or will the Contract be provided, if so, please attach: **The contract will be provided to Warren County Health Services by HRI/NYSDOH.**
- (g) Commencement Date of Contract: **12/01/2021**
- (h) Termination Date of Contract: **07/13/2023**
- (i) Payment Provisions:
 - i) lump sum amount **N/A**
 - ii) hourly rate amount **N/A**
 - iii) total amount not to exceed **\$980,544**
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. **Upon execution of the contract, 25% of the total contract amount will be available immediately. Additional funds will be released as fellows and support staff are onboarded.**
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, Title, and Amount: **TBD by Treasurers office.****

Jones, Ginelle

From: doh.sm.NYSPHEP <NYSPHEP@health.ny.gov>
Sent: Wednesday, September 29, 2021 8:54 AM
To: Jones, Ginelle
Cc: Conner, Meredith J (HEALTH); Lewis, Cori L (HEALTH); Knoerl, Erin (HEALTH)
Subject: PH Corps Fellowship Award - Warren County - Contract Instructions
Attachments: Budget Template.xls; Attachment A-SOW Program Deliverables 20210721.pdf; Subrecipient Contact Form.docx

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or on clicking links from unknown senders.

Dear Public Health Partners,

We are pleased to inform you that Health Research Inc. / New York State Department of Health (HRI/NYSDOH) have allocated funding totaling \$980,544 to your public health department for a new NYS Public Health Corps (PHC) Fellowship Program contract agreement. This funding is provided by two CDC sponsored cooperative agreements:

- Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases in New York State, CFDA# 93.323
- Cooperative Agreement for Emergency Response: Public Health Crisis Response – 2018, CFDA# 93.354

Using the attached PHC budget template, submit a detailed budget to allocate the total amount needed to implement this program. Attached is a copy of the Scope of Work/Program Deliverables, to assist in the development of your budget.

The contract agreements will be with HRI for the period of 9/1/21 through 7/31/23. The primary purpose of this funding is to support public health fellowships. Funding may also be used to support a project coordinator, administrative support, and other costs such as supplies, PCs/laptops and travel needed to support the fellow(s). In addition, funding may be used to hire a contractor to recruit and manage fellowships in collaboration with your health department.

Upon execution of the contract agreement, 25% of the total contract amount will be available immediately. Additional funds will be released as fellows and support staff are onboarded.

Also attached is a subrecipient contact form. Please complete the contact form and return it electronically with the budget to NYSPHEP@health.ny.gov as soon as possible but no later than October 13, 2021.

If you are not able to meet the deadline or have questions, please contact us at NYSPHEP@health.ny.gov.

Regards,
Cori Lewis

Cori Lewis
Grants Administration, Office of Public Health
150 Broadway, Suite 516
Menands, NY 12204
P: 518-408-2063
Email: cori.lewis@health.ny.gov

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Warren County Health Services

DATE: 10/18/2021

- (a) Is this a Result of a Bid or Request for Proposal? No
- (b) Purpose of Contract: To authorize Health Services to enter an agreement with Hudson Headwaters Health Network (HHHN) as a subcontractor and subrecipient of the NYSDOH/Health Research Inc. Public Health Corps Fellowship Program in accordance with the outlined grant requirements to perform the required deliverables and receive funding not to exceed \$980,544 for the entire grant period, including any extensions.
- (c) Name of Contractor: Hudson Headwaters Health Network.
- (d) Address of Contractor: George Perdue Administrative Building
9 Carey Road, Queensbury, NY 12804
- (e) Contractor's Contact Person and Telephone Number: Sean Philpott-Jones, PhD,
MSBe. 518-258-4330 or 518-761-0300 ext 31631
- (f) Has or will the Contract be provided, if so, please attach: TBD, contract and all supporting documentation will be provided as it becomes available.
- (g) Commencement Date of Contract: 12/01/2021
- (h) Termination Date of Contract: 07/01/2023, unless authorized extension or 30 day written termination rendered by either party.
- (i) Payment Provisions:
 - i) lump sum amount N/A
 - ii) hourly rate amount N/A
 - iii) total amount not to exceed \$980,544
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Upon submission of appropriate vouchers and documentation.
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: OR Capital Project OR Capital Reserve Project Number, Title, and Amount: TBD by Treasurer's office.

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

**NYS Public Health Corps Fellowship Program
Scope of Work/Program Deliverables**

Funding is provided by the New York State Department of Health (NYSDOH) through Health Research, Inc. (HRI) to Local Health Departments (LHDs) to:

- Recruit, train, deploy and manage New York State Public Health Corps (NYSPHC) Fellows serving in LHDs and other community-based organizations in each region of New York State outside the City of New York.
- Augment LHD capacity to respond to current and emerging public health emergencies.
- Provide health education services to inform and protect communities.
- Improve outreach and assistance to vulnerable populations; and
- Directly assist with the local COVID-19 public health response (e.g. testing, contact tracing, vaccination, prevention campaigns, community education, logistics, operations, and coordination).

The number of NYSPHC Fellows to be in service for an LHD and the associated grant eligibility are based on the LHD's county population and health outcome indicators.

The NYSPHC Fellowship Program will collaborate with participating LHDs to match and place fellows based on the needs articulated by the counties from the "Survey of LHD Priorities". Through this partnership, fellows will help address the local public health needs over the next two years.

DELIVERABLES: ADHERENCE TO POLICIES AND PROCEDURES OF THE NYSPHC PROGRAM

A. Staffing

- NYSPHC Program will hire Fellowship Placement Coordinators for each region across the state.
- NYSPHC Fellowship Placement Coordinators will:
 - Provide the LHD with resumes for fellow applicants which have been screened and matched to LHD's needs articulated in the "Survey of LHD Priorities".
 - Meet with placed fellows at least every two weeks.
 - When practicable, the Fellowship Placement Coordinator will identify at least one Graduate Fellow for every seven Fellows accepted.
- LHDs participating in the NYSPHC Program and receiving grant funds will:
 - Designate a **Point of Contact** to serve as liaison to NYSDOH/HRI and the respective NYSPHC Fellowship Placement Coordinator.
 - Designate a **Local Coordinator** to manage/supervise fellows assigned to the LHD (see: Section C below).
 - Review resumes of pre-screened and LHD matched applicants.
 - Contact fellow applicants to schedule and conduct interviews.
 - Select and hire preferred fellows.
 - Develop Individual Fellowship Program Plans for each fellow

- o Promptly alert the respective Fellowship Placement Coordinator if/when:
 - A preferred fellow is selected
 - Candidates are not selected.
 - New resumes are needed.
- o Assign selected fellows to a local supervisor in a host organization².
- o Provide fellows with an assigned space, desk, PC or laptop, data, and phone line.
- o Identify a Mentor to work with their selected fellow(s) (see Section C below).

B. Funding

- All LHDs in the NYSPHC Program will have the opportunity to receive funds based on the number of eligible fellows for their county³.
- Funding will be provided to support the program for up to two years.
- For each fellow accepted and hired, LHDs will receive:
 - i. \$41,398 per Fellow and \$54,483 per Graduate Fellow⁴
 - ii. A minimum of \$50,000 to support a Local Coordinator. Additional funds may be allocated based on the number of fellows accepted and hired.
- LHDs may be reimbursed for the following costs:
 - i. Fringe Benefits
 - ii. Indirect Costs

C. Adherence to policies and procedures of the NYSPHC Fellowship Program

LHDs participating in the NYSPHC and receiving grant funds will:

- Adhere to the policies and procedures of the NYSPHC Fellowship Program and receive program information and guidance, report data and resolve concerns related to the NYSPHC Fellowship Program or participants.
- Adhere to reporting, budget, and grant requirements, including dates and deadlines.
- **The Local Coordinator will:**
 - o Identify placement opportunities and organizations within the community and the county's public health network to provide work experience for NYSPHC Fellowship Program fellows; communicate regularly with host organization supervisors on efforts across the NYSPHC Local Public Health Partnership⁵.
 - As needed, or beneficial to the LHD and community, arrange for organizations within the county's public health network to provide

² A host organization is an organization that "hosts" a fellow(s). Fellows may be assigned to or "hosted" by a LHD or another organization within the public health network, e.g. other county agencies, Federally Qualified Health Centers, Rural Health Networks, other community-based organizations.

³ Each county outside the City of New York is eligible to participate in the NYSPHC. The number of eligible fellows and graduate fellows for each county is based on the county's population and health outcome indicators.

⁴ Fellows may have a high school diploma, however, preferred applicants will have completed a relevant Associate Degree –or– be within one semester of completing their undergraduate degree –or– document equivalent experience; Graduate Fellows must have completed a Master's degree or have completed their basic coursework and be within one semester of completing their academic program.

⁵ The NYSPHC Local Partnership comprises the LHD with a Local Coordinator identified to lead the team, local Host Organizations, several fellows, and one or more mentors. At least one NYSPHC Local Partnership will be established within each county outside the City of New York. Several NYSPHC Local Partnerships would be established in more populous counties.

work experience for fellows that aligns with the NYSPHC Fellowship Program mission and the federal CDC ELC requirements.

- Track and report information from host organizations for submission to the NYSPHC Fellowship Placement Coordinators⁶ including information about the organization's supervision of the fellow(s), as articulated by the Individual Fellowship Program Plan(s).
- Organizations within the county's public health network that may be identified by the LHD as Host Organizations to provide work experience for fellows, in addition to the LHD, include: Federally Qualified Health Centers (FQHCs), NYS Designated Rural Health Centers, accredited community and mental health services providers, community-based organizations and other locations approved by NYSDOH. Individual Fellowship Program Plans must show the link or integration with public health.
- Identify a **community-based mentor (or mentors)** from the local public health network who will:
 - Participate in the NYSPHC Local Public Health Partnership(s) in the county and provide locally-relevant technical support and professional guidance to NYSPHC fellows;
 - Communicate as needed with other community-based mentors and educational institutions on professional development opportunities.
- Review the Monthly Progress Reports prepared by NYSPHC fellows and address any issues that may arise.
- Work with the NYSPHC Program Fellowship Placement Coordinator to build and oversee the NYSPHC Local Public Health Partnership to enhance fellows' experiences by providing mentorship and facilitate professional growth activities, including technical information about public health priorities.
- Communicate regularly with the Fellowship Placement Coordinator on matters that arise from the implementation or necessary revision of Placement Agreements between the LHD and the Host Organizations.
- Familiarize themselves with the NYSPHC fellow's progress in the Cornell University's Public Health Essentials Certificate Program.
- If the Fellow is placed at a Host Organization outside of the LHD:
 - Identify a supervisor at the Host Organization to direct the day-to-day work of fellows and assign fellows to fulfill the county's public health mission by assigning fellows to tasks that are based on their skillsets and the needs of the community. Tasks may include:
 - Assessing community health and resources in the county/community including assessing public health data; creating community health profiles;
 - Identifying public health trends and disparities; and identifying community assets and resources.

⁶ Fellowship Placement Coordinators will be hired by HRI, serve each region of the state, report to the NYSPHC Program Director and be responsible for recruiting, screening, onboarding, placement, monitoring, and remediation of issues associated with the employment of the fellows.

- Developing strategies to build trust, community relations and methods to engage with local/underserved communities.
- Identifying key communities or populations that will benefit from targeted COVID-19 outreach/support.
- Identifying barriers and developing targeted outreach plans to engage these targeted populations to educate on prevention and vaccination education.
- Engage with Institutions of Higher Education in the region to bring professional learning opportunities to the fellows, mentors, and others in the local public health network.

Funding Restrictions:

- Funds cannot be used for research-related activities
- Funds cannot be used for clinical care / direct patient care

NOTE: The funds for the NYSPHC Fellowship Program are intended to augment public health staffing capacity and cannot supplant existing commitments. These funds should result in a net increase of total county public health staff.

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: Warren County Health Services

DATE: 10/18/2021

- (a) Purpose of Contract Change: **To amend NYSDOH Immunization, COVID-19 Vaccine grant contract (C36966GG) from 1/1/2021-6/30/2021 to not exceed \$183,683.11, to reflect the receipt of additional \$112,840.78 funding.**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **368 of 2021**
- (c) Name of Contractor: **New York State Department of Health**
- (d) Address of Contractor: **NYSDOH Bureau of Immunization; Corning Tower, Room 64, Empire State Plaza, Albany, NY 12237**
- (e) Contractor's Contact Person and Telephone Number: **Robin Sutior
robin.sutior@health.ny.gov 518-473-4437**
- (f) Commencement Date of Extension: **Retroactive through 01/01/2021**
- (g) Termination Date of Extension: **06/30/2024**
- (h) Payment Provisions:
 - i) lump sum amount **N/A**
 - ii) hourly rate amount **N/A**
 - iii) total amount not to exceed **\$183,683.11**
 - 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, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: Revenue: A.4018.0036.4111 Public Health Covid Vaccine Response Grant Revenue/Expense: A.4018.0036 Public Health Covid Response Grant-Miscellaneous Expenses.**

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



Department of Health

KATHY HOCHUL
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

September 22, 2021

Ginelle Jones, BSN, MSN, FNP
Director of Public Health
Warren County
1340 State Route 9
Lake George, New York 12845

RE: COVID-19 Vaccine Response Contract #C36966GG
Contract Term: 1/1/21 – 6/30/24
Amount awarded in August 2021: \$70,842.33
Additional funding amount (awarded under this letter): \$112,840.78
Portion of additional amount for Vaccine Confidence Strategies: \$7,052.55
Total contract amount: \$183,683.11

Dear Director Jones :

The New York State Department of Health (NYSDOH) is awarding your Local Health Department (LHD) the above referenced additional funding under the new LHD COVID-19 Vaccine Response contract. These funds are being awarded to increase COVID-19 vaccine administration equity and to implement vaccine confidence strategies for COVID-19 and routine vaccinations. An updated contract work plan is attached.

The funds awarded under this contract may be used for COVID-19 vaccine implementation expenses retroactive to January 1, 2021 and is available through June 30, 2024.

Budget Submission:

Please choose one of the following options:

- A. Please review the budget and justification instructions and complete and submit a budget on the attached "Sept award only" template for only the additional funding amount by **Monday, November 1, 2021.**

OR

- B. If you have not yet submitted a budget for the August award amount (due October 1, 2021), you may wait and submit a single budget for the total contract amount by no later than November 1, 2021 on the attached "combined award" template. Please note that until NYSDOH receives and enters a budget in the Grants Gateway, the contract cannot be executed. Claims for reimbursement (vouchers) cannot be processed until the contract is executed.

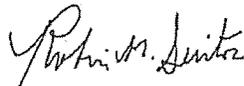
Reminder: You must use \$7,052.55 of the additional funding amount for implementation of vaccine confidence strategies and at least \$14,168.47 of the initial award to conduct activities to promote and increase COVID-19 and other vaccine uptake in racial and ethnic minority groups, and to increase accessibility for people with disabilities.

Completed budget templates should be emailed to ImmAdmin@health.ny.gov and your regional representative.

Please respond to this email within three business days to indicate whether you are submitting:
A) two separate budgets (one budget for the August award amount by October 1, 2021 and a second budget for the additional funding award by November 1, 2021); OR
B) a single combined budget by November 1, 2021.

Please send questions to ImmAdmin@health.ny.gov.

Sincerely,



Robin Sutor
Director, Bureau of Immunization

Attachments: COVID-19 Vaccine Response Work plan
Sept Award Only COVID Vaccine Response Budget and Justification Template
Combined Award COVID Vaccine Response Budget and Justification Template

CC: Tawn Driscoll
Nedra Frasiern
Shelby Ruppenthal

Warren County Board of Supervisors

RESOLUTION NO. 368 OF 2021

RESOLUTION INTRODUCED BY SUPERVISORS FRASIER, MCDEVITT, CONOVER, HOGAN AND STROUGH

AUTHORIZING SUBMISSION OF AN APPLICATION TO THE NEW YORK STATE DEPARTMENT OF HEALTH FOR THE IMMUNIZATION ACTION PLAN COVID VACCINE RESPONSE GRANT PROGRAM

RESOLVED, that the Warren County Board of Supervisors hereby authorizes the Chair of the Board of Supervisors to execute and submit an application to the New York State Department of Health, Bureau of Immunization, Room 64, Empire State Plaza, Albany, New York 12237, for the Immunization Action Plan Covid Vaccine Response Grant Program, for funding in an amount not to exceed Seventy Thousand Eight Hundred Forty-Two Dollars and Thirty-Three Cents (\$70,842.33), for a term commencing January 1, 2021 and terminating June 30, 2024, and be it further

RESOLVED, that upon notification of the grant award, the Chair of the Warren County Board of Supervisors be, and hereby is, authorized to execute the grant agreement(s), and any and all other necessary documents relating to said agreement, in a form approved by the County Attorney, and be it further

RESOLVED, that if any further State funding becomes available during the term of this contract, no further resolution will be necessary to accept these funds and the Chair of the Board of Supervisors is authorized to execute any documents necessary to receive the funds, and be it further

RESOLVED, that should the term of this grant be extended, the Chair of the Board of Supervisors is hereby authorized to execute any relative grant extensions in a form approved by the County Attorney without the need for further Board resolution.

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: Warren County Health Services

DATE: 10/18/2021

- (a) Purpose of Request: **To amend Resolution 122 of 2019.**
- (b) Details: **To amend Resolution 122 of 2019 to correct and clarify authorization to execute further amendment agreements with Waystar/Zirned for aforesaid services, without need for future resolutions as long as there is no more than 5% annual rate increase in a form approved by the county attorney.**
- (c) Previous Resolution Number: **122 of 2019**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: **A.4010.428 Health Services, Data Processing and Internet Fees.**

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

* as listed in budget and LOGOS

Warren County Board of Supervisors

RESOLUTION NO. 122 OF 2019

RESOLUTION INTRODUCED BY SUPERVISORS FRASIER, McDEVITT, BRAYMER, LEGGETT, LOEB, DRISCOLL, HYDE, MAGOWAN AND SOKOL

AMENDING RESOLUTION NO. 205 OF 2009 WHICH AUTHORIZED AN AGREEMENT WITH ZIRMED, INC. FOR THE PURPOSE OF VERIFYING INSURANCES BEFORE BILLING TO EXPEDITE CLAIMS WITHOUT DENIALS, TO INCREASE RATES AND CHANGE CONTRACT TERMS FOR THE HOME CARE DIVISION

WHEREAS, pursuant to Resolution No. 205 of 2009, the Warren County Board of Supervisors authorized the Chairman of the Board to execute a subscriber agreement with Zirmed, Inc., for the purpose of verifying insurances before billing to expedite claims without denials for the Home Care Division, and which Resolution was subsequently amended by Resolution No. 617 of 2011 to allow for billing for Immunization Program, and by Resolution No. 632 of 2012 to allow for electronic remittances, and

WHEREAS, Zirmed, Inc. and Waystar have merged companies resulting in billing and address changes, and

WHEREAS, The Health Services' electronic billing system has been updated from Encore to Crescendo, and

WHEREAS, the Director of Public Health has requested that Resolution No. 205 of 2009 be amended to increase the monthly subscriber fee for the Division of Home Care to include the following:

1. Claims Management Fees - One Hundred Three Dollars and Ninety-Five Cents (\$103.95) per month, which includes five hundred (500) electronic claims, and additional claims exceeding five hundred (500) will be an additional Twenty-Five Cents (\$0.25) per claim;
2. Eligibility Verification Fees - Fifty-Two Dollars and Fifty Cents (\$52.50) per month, which includes two hundred fifty (250) claims, and additional inquiries exceeding two hundred fifty (250) will be an additional Twenty-Five Cents (\$0.25) per inquiry;
3. Annual Assessment Fee - One Hundred Twenty-Five Dollars (\$125)

now, therefore, be it

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

RESOLUTION 122 OF 2019

PAGE 2 OF 2

an amendment agreement with Waystar/Zirned, Inc., now located at 888 Market Street, Suite 400, Louisville, Kentucky 40202 for the aforesaid change in services and amounts set forth in the preambles of this resolution for a term commencing April 1, 2019 and terminating upon thirty (30) days written notice by either party, in a form approved by the County Attorney, and be it further

RESOLVED, that the Chairman of the Board of Supervisors be, and hereby is, authorized to execute further amendment agreements with Waystar/Zirned, Inc. For aforesaid services, without the need for future resolutions as long as there is no more than a five percent (5%) ^{annual} ~~overall~~ rate increase, in a form approved by the County Attorney, and be it further

RESOLVED, that other than the above amendments, Resolution Nos. 2005 of 2009, 617 of 2011 and 632 of 2012 shall remain in full force and effect, and be it further

RESOLVED, that the funds shall be expended from Budget Code A.4010 428 Health Services, Data Processing & Internet Fees.

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: Warren County Health Services

DATE: 10/18/2021

- (a) Purpose of Request: To amend Resolution 157 of 2019.
- (b) Details: To amend Resolution 157 of 2019 to correct and clarify authorization to execute further amendment agreements with Waystar/Zirmed for aforesaid services, without need for future resolutions as long as there is no more than 5% annual rate increase in a form approved by the county attorney.
- (c) Previous Resolution Number: 157 of 2019
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A.4018.0030.428 Prevention Program, Disease Control, Data Processing and Internet Fees.

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

* as listed in budget and LOGOS

Dis

Warren County Board of Supervisors

RESOLUTION No. 157 OF 2019

RESOLUTION INTRODUCED BY SUPERVISORS FRASIER, MCDEVITT, BRAYMER, LEGGETT, LOEB, DRISCOLL, HYDE, MAGOWAN AND SOKOL

AMENDING RESOLUTION NO. 122 OF 2019 WHICH AMENDED AN AGREEMENT WITH ZIRMED, INC. FOR THE PURPOSE OF VERIFYING INSURANCES BEFORE BILLING TO EXPEDITE CLAIMS WITHOUT DENIALS AND TO INCREASE RATES AND CHANGE CONTRACT TERMS FOR THE HOME CARE DIVISION, TO FURTHER INCREASE RATES FOR THE PUBLIC HEALTH DIVISION IMMUNIZATION PROGRAM

WHEREAS, pursuant to Resolution No. 205 of 2009, the Warren County Board of Supervisors authorized the Chairman of the Board to execute a subscriber agreement with Zirmed, Inc., for the purpose of verifying insurances before billing to expedite claims without denials for the Home Care Division, and which Resolution was subsequently amended by Resolution No. 617 of 2011 to allow for billing for Immunization Program, and by Resolution No. 632 of 2012 to allow for electronic remittances, and

WHEREAS, pursuant to Resolution No. 122 of 2019, the Warren County Board of Supervisors authorized the Chairman of the Board to amend the agreement to increase rates and change the contract terms for the Home Care Division, and

WHEREAS, the Director of Public Health has requested that Resolution No. 122 of 2019 be amended to increase the monthly subscriber fee for the Division of Public Health (Immunization Program) to include the following:

1. Claims Management Fees - One Hundred Three Dollars and Ninety-Five Cents (\$103.95) per month, which includes five hundred (500) electronic claims, and additional claims exceeding five hundred (500) will be an additional Thirty-Six Seventy-Five Cents (\$0.3675) per claim;
2. Electronic Remittance Advice Fees - Twenty-Six Dollars and Twenty-Five Cents (\$26.25) per month, which includes five hundred (500) inquiries, and additional inquiries exceeding five hundred (500) will be an additional Seven Cents (\$0.07) per inquiry,

now, therefore, be it

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

RESOLUTION 157 OF 2019

PAGE 2 OF 2

an amendment agreement with Waystar/Zirned, Inc. for the aforesaid change in amounts set forth in the preambles of this resolution for a term commencing May 1, 2019 and terminating upon thirty (30) days written notice by either party, in a form approved by the County Attorney, and be it further

RESOLVED, that the Chairman of the Board of Supervisors be, and hereby is, authorized to execute further amendment agreements with Waystar/Zirned, Inc. for aforesaid services, without the need for future resolutions as long as there is no more than a five percent (5%) ^{overall} ~~overall~~ rate increase, in a form approved by the County Attorney, and be it further

RESOLVED, that other than the above amendments, Resolution Nos. 2005 of 2009, 617 of 2011, 632 of 2012 and 122 of 2019 shall remain in full force and effect, and be it further

RESOLVED, that the funds shall be expended from Budget Code A.4018.0030 428, Prevention Program, Disease Control, Data Processing & Internet Fees.

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: Warren County Health Services

DATE: 10/18/2021

- (a) Purpose of Request: To amend resolution 455 of 2016 authorizing Director of Public Health to enter contracts, provided any one does not exceed \$5,000 to reflect 1) increase in a single contract amount not to exceed \$10,000 and 2) authorize annual contract renewals with up to 5% annual increase, and 3) authorize minor amendments in a form approved by the County Attorney to reflect necessary verbiage changes or change in regulation.
- (b) Details: Health Services utilize minor routine and/or emergency services from a variety of vendors or contractors for services such as, but not limited to after hour answering services, miscellaneous repairs and/or maintenance, funding for small projects, etc. The last resolution was requested in 2016 and the amount needs to be increased. Health Services will continue to work with the County Attorney's Office and will ensure 1) Single contracts without resolution will not exceed \$10,000, 2) funding is in the Health Services budget, 3) actions will be in compliance with the current Warren County Purchasing Policy (with the exception of the need to acquire resolutions), and that all contracts are in a form approved by the County Attorney.
- (c) Previous Resolution Number: 455 of 2016
- (d) Where are the Funds (if required)? List Budget Code; Object Code, Full Title* and Amount: N/A

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

* as listed in budget and LOGOS

Warren County Board of Supervisors

RESOLUTION NO. 455 OF 2016

Resolution introduced by Supervisors Sokol, Simpson, Seeber, Frasier, Strough, Vanselow, McDevitt, MacDonald and Braymer

AUTHORIZING THE CHAIRMAN OF THE BOARD OF SUPERVISORS OR THE DIRECTOR OF PUBLIC HEALTH/PATIENT SERVICES TO ENTER INTO AND EXECUTE AGREEMENTS WITH VARIOUS VENDORS OR CONTRACTORS REGARDING SERVICES REQUIRED FROM TIME TO TIME BY THE HEALTH SERVICES DEPARTMENT, SUBJECT TO CERTAIN CONDITIONS

WHEREAS, in the regular course of performing its customary and usual governmental functions or performing functions assigned to it by the Board of Supervisors, the Warren County Department of Health Services utilizes minor routine and/or emergency services of a number of vendors or contractors for services such as, but not limited to after hours on-call answering services, paging services, miscellaneous repairs and/or maintenance, and

WHEREAS, the Director of Public Health/Patient Services budgets for these types of services which generally range in cost from a few hundred dollars to a few thousand dollars, and

WHEREAS, the Director of Public Health/Patient Services is requesting that she be allowed to enter into and execute agreements with various vendors or contractors regarding routine and/or emergency services, repair and/or maintenance as set forth above, required from time to time by the Warren County Department of Health Services, provided any one of these agreements does not exceed Five Thousand Dollars (\$5,000) in any fiscal year, and

WHEREAS, the aforesaid services are not usually something that would be done in house and approval of these agreements by the Board of Supervisors appears to be routine and ministerial due to the obvious need for same, and

WHEREAS, the budget process provides an opportunity for adequate review and approval of these types of services and expenses and the Board of Supervisors desires to avoid needless additional paperwork and resolutions concerning agreements for the aforesaid services, now, therefore, be it

RESOLVED, that, until such time as this resolution is repealed, the Chairman of the Board of Supervisors or the Director of Public Health/Patient Services be, and hereby are, authorized, from time to

RESOLUTION No. 455 OF 2016

PAGE 2 OF 2

time and without the need for additional separate resolutions, to enter into and execute agreements on behalf of Warren County with various vendors or contractors with regard to various services within the budget of the Warren County Department of Health Services, subject to the following conditions:(1) any agreement may not individually exceed the aggregate amount of Five Thousand Dollars (\$5,000) in any fiscal year; (2) the services must have been budgeted for; there must be budgeted funds available to pay for the same, and purchase orders and/or computer data entries required by the County's accounting software must occur; (3) the established Purchasing Policy must still be followed (with the exception of the need to acquire resolutions); and (4) any required agreements must be approved by the Director of Public Health/Patient Services and in a form approved by the County Attorney.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

***If this is the result of a grant award, also complete and submit
Form No. 5 or 6**

DEPARTMENT NAME: Warren County Health Services

DATE: October 18, 2021

(a) **Purpose of Amendment:** To amend the 2021 budget to reflect both the Revenue and Expenses related to Department code (A.4195) for Public Health -NYS Public Health Corps Fellowship Program Contract from the Health Research Inc. for the purpose to support Public Health Fellowships and to support Project coordination, Administrative support, and other costs to support the fellow(s) for \$980,544.

(b) **Appropriation Code (with title), Object Code (with title) and Amount:**

A.4195.470 Public Health-NYS PH Corps Fellowship Program-Contract Expense	\$975,000
A.4195. 439 Public Health-NYS PH Corps Fellowship Program-Miscellaneous Exp	\$ 5,544

Revenue Code (with title), and Amount:

A.4195.4401 Public Health NYS PH Corps Fellowship Program- Revenue \$980,544.

***Note:** Warren County Health Services was notified by DOH on 9/29/21 that there will be funding from (12/1/21-7/31/23) for an award not to exceed \$980,544 for the Public Health Corps Fellowship Program Contract. This funding is provided by two CDC sponsored cooperative agreements : Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases in New York State and Cooperative Agreement for Emergency Response: Public Health Crisis Response. The Agreement is with HRI with the primary purpose to support Public Health Fellowships. Funding may be used to also support project coordinator, Administrative support, and other costs such as supplies, PCs/laptops and travel needed for the Fellow(s). Funding may also be used to hire a contractor to recruit and manage Fellowships in collaboration with the Public Health department. Warren County plans to maintain an agreement for these services with Hudson Headwaters Health Network (HHN) as the contractor. Listed above are estimated expenses for 12/1/2021-12/31/2021. These reflect costs related to Salaries, Fringe benefits, purchases of equipment (all under the CONTRACT EXPENSE) and miscellaneous expenses for this grant. To note, while this is a over a one and half year grant period, we are able to utilize the total as needed. However, if funds are not all utilized this year, we will be carrying over funds into future years.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

***If this is the result of a grant award, also complete and submit
Form No. 5 or 6**

DEPARTMENT NAME: Warren County Health Services

DATE: October 18, 2021

(a) **Purpose of Amendment:** To amend the 2021 budget to reflect both the Revenue and Expenses related to Department code (A.4018.0036) for Public Health -COVID-Vaccine Response Contract from the Immunization Action Plan Grant to support the current expenses related to promote and increase COVID 19 Vaccine and other vaccine uptake for \$112,840.78.

(b) **Appropriation Code (with title), Object Code (with title) and Amount:**

A.4018.0036.410 Public Health-COVID Vaccine Response Grant-Supplies Expense	\$ 3,485.78
A.4018.0036.424 Public Health-COVID Vaccine Response Grant Postage Expense	\$ 1,000.00
A.4018.0036.436 Public Health-COVID Vaccine Response Grant Advertising Exp	\$108,355.00

Revenue Code (with title), and Amount:

A.4018.0036.4411Public Health-COVID Vaccine Response Grant- Revenue \$112,840.78.

***Note:** Warren County Health Services was notified by DOH on 9/22/21 that there will be additional funding from (1/1/21-06/30/24) and the total award is now not to exceed \$183,683.11 for the COVID Vaccine Response Contract. Listed above are estimated additional expenses for 1/1/21-12/31/21. We have already requested in August \$70,842.33 and now are requesting an additional \$112,840.78. Also noting, 20% of this grant is to be used towards activities targeting high risk and underserved populations, including racial and ethnic minority populations and rural communities, and for increasing access to individuals with disabilities. These reflect Salaries and Fringe benefits related to those working with this IAP Grant to promote and increase COVID 19 vaccinations and other vaccine uptake. Also, other expenses such as Travel, postage, supplies and Marketing/advertising. We are currently looking into a large Marketing Campaign to promote vaccinations in our community. To note, while this is a three and half year grant period, we are able to utilize the total as needed. However, if funds are not all utilized this year, we will be carrying over funds into future years.

ATTACHMENT #8

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds FOR 2021

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

SIGNED: _____

TRANSFERS FOR 2021 BUDGET

DATE: October 15, 2021

	<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1	A.4018.0035.120	LHD Support for Flu & CoVID 19-Overtime Salaries	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$500.00
	A.4018.0035.410	LHD Support for Flu & CoVID 19-Supplies	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$529.87
	A.4018.0035.424	LHD Support for Flu & CoVID 19-Postage	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$300.00
	A.4018.0035.435	LHD Support for Flu & CoVID 19-Medical Fees	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$546.00
	A.4018.0035.436	LHD Support for Flu & CoVID 19-Advertising Fees	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$5,133.67
	A.4018.0035.442	LHD Support for Flu & CoVID 19-Auto Gas & Oil	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$100.00
	A.4018.0035.830	LHD Support for Flu & CoVID 19-Social Security	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$372.00
	A.4018.0035.831	LHD Support for Flu & CoVID 19-Medicare Contrib	A.4018.0035.130	LHD Support for Flu & CoVID 19-Part Time Salaries	\$87.00
2	A.4010.120	Health Services -Overtime Salaries	A.4018.0030.120	Disease Program-Overtime Salaries	\$30,000.00
	A.4010.130	Health Services-Part time Salaries	A.4018.0030.130	Disease Program-Part Time Salaries	\$50,000.00
	A.4010.810	Health Services-Retirement Expenses	A.4018.0030.810	Disease Program-Retirement Expenses	\$8,000.00
	A.4010.830	Health Services -Social Security Expenses	A.4018.0030.830	Disease Program-Social Security Expenses	\$4,960.00
	A.4010.831	Health Services-Medicare Expenses	A.4018.0030.831	Disease Program-Medicare Expenses	\$1,160.00
Total Transfers					\$101,688.54

- 1 To Reclass expenses not utilized to Part Time Salaries to cover the COVID nurses times from January to May 2021. Total Grant is \$14,105
 2 To Reclass from Health Services to Disease Program both Overtime and Part Time Salaries and related fringe to cover COVID related expenses. Disease program is billable for State Aid and Grants. Due to nursing vacancies at this time, funds are available to move YTD to Disease program from the CHHA.

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

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR 2021 AS OF 10/4/2021 6:04:31 PM

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

CODE(S): 4010, 4013, 4054, 4190, 4018, 4189, 4191, 4192, 4193, 4194

EXPENSES	2021 BUDGETED	2021 YTD ACTUAL
Salaries - Regular	\$2,681,576.31	\$1,667,830.50
Salaries - Overtime	\$194,447.00	\$123,058.83
Salaries - Part Time	\$603,694.59	\$388,897.41
100's PERSONAL SERVICES	\$3,479,717.90	\$2,179,786.74
200's EQUIPMENT	\$272,702.52	\$56,461.22
400's CONTRACTUAL	\$6,557,972.25	\$3,221,536.40
800's EMPLOYEE BENEFITS	\$1,501,856.91	\$979,013.85
TOTALS	\$11,812,249.58	\$6,436,798.21

REVENUES	2021 BUDGETED	2021 YTD ACTUAL
	\$9,354,172.65	\$3,017,232.56

Note: Above please find the financials YTD as of 10/4/2021. We are currently working on closing September Homecare billing. Totals also include COVID 19 activities. Salaries for Overtime and Part time reflect those hours for staffing the current COVID Immunization clinics along with above, we have also accrued WIC August Revenues of \$47,625. We are also working on quarterly reports til end of September.

Warren County Health Services

Salaries Comparison

2021 v 2020

	YTD 2021	YTD 2020	YTD 21v20	% Change	Total
Total of All Depts					
Regular Salaries	\$1,667,830.50	\$1,682,011.73	(\$14,181.23)	-0.84%	\$2
Overtime Salaries	\$123,058.83	\$92,291.94	\$30,766.89	33.34%	\$
Part Time Salaries	\$388,897.41	\$241,478.46	\$147,418.95	61.05%	\$
TOTALS	\$2,179,786.74	\$2,015,782.13	\$164,004.61	8.14%	\$3
% current YTD Salary to Total Budget	62.64%	71.63%			

*Source: Detail G/L report for all Salary Category from 1/1/21-9/26/21.

COVID Clinics began 1/2/2021.

Overall, total salaries are \$164,004.61 or 8.14% over 2020 Salaries. Regular salaries are under 2020 due primarily to positions that remain open in both the CHHA and WIC programs. Part time and Overtime salaries are over last year primarily due to the Public Health Assistants that were hired to assist in COVID tracking and for related time spent in COVID duties such as COVID Immunization Clinics. Salaries related to COVID activities are Part time salaries of \$217,363.22 or 42.46% of the total Part time salary expense. Overtime is \$61,854.59 or 12.08% of the total YTD. For COVID CLINICS ONLY, Overtime is \$34,051.70 and Part time is \$112,611.50. Salaries are currently 62.64% of year was 71.63% of budget. Part time Salaries reflect both the additional nursing staff hired to assist during COVID Immunization clinics and the Contact Tracers.

ATTACHMENT #10

Warren County Health Services
 Revenue and Expense Comparison 2021 vs 2020
 as of 10/04/21

EXPENSES	2021 YTD Actual as of 10/4/21 G/L	2020 YTD as of 10/4/20 G/L	Variance
Salaries - Regular	\$1,667,830.50	\$1,682,011.73	(\$14,181.23)
Salaries - Overtime	\$123,058.83	\$92,291.94	\$30,766.89
Salaries - Part Time	\$388,897.41	\$241,478.46	\$147,418.95
100's PERSONAL SERVICES	\$2,179,786.74	\$2,015,782.13	\$164,004.61
200's EQUIPMENT	\$56,461.22	\$35,441.79	\$21,019.43
400's CONTRACTUAL	\$3,221,536.40	\$2,682,969.31	\$538,567.09
800's EMPLOYEE BENEFITS	\$979,013.85	\$1,020,321.01	(\$41,307.16)
TOTALS	\$6,436,798.21	\$5,754,514.24	\$682,283.97

REVENUES	2021 YTD ACTUAL	2020	Variance
	\$3,017,232.56	\$3,019,329.39	(\$2,096.83)

Comments:

Salaries: (please see previous page) overall are \$164,004.61 or 8.14% above 2020 as of 9/26/21 payroll. Salaries for 2021 are 62.64% of the budget YTD. As stated, due to COVID activities, Per Diem and Part Time staff are now being utilized in the Public Health Department to continue to staff COVID clinics. To also note, both the Overtime and Part time categories reflect the Public Health hours paid for COVID related activities which total \$253,096.41 year to date or 54.27% of the total Overtime and Part time salaries. This includes all Contact Tracers, Staff for COVID clinics, and additional staff hours needed to cover daily COVID related activities.

Equipment: Expenses in 2021 include 3 new vehicles and updated computers needed for the Preventive, Disease, Early Intervention and Preschool Programs.

Contractual Expenses: These are above 2020 primarily due to Preschool Program Expenses. Most of the invoices have been input year to date and to note the transportation costs have increased dramatically from the year before due to children being transported to schools in 2021 then from 2020 during COVID. In 2020, transportation was down as many students were not being transported and their services were being offered virtually.

Employee Benefits: Employee benefits remain under 2020 due to savings in salaries within programs.

Revenues: Revenues reflect the YTD billings to August for CHHA for both years. As we have been stating, COVID was just hitting the communities hard about this time last year, therefore less referrals and due to COVID there are only a few clinics being held for Rabies and some Flu clinics, therefore, less revenues at this time. There are also no revenues for 2021 related to our Family Health Program (Maternal Child Health program) due to COVID and we are not making any home visits at this time.

Warren County Health Services
Patient Referrals (May or May not have become Patients)
CHHA Division

CATEGORY	01/2020	02/2020	03/2020	04/2020	05/2020	06/2020	07/2020	08/2020	09/2020	10/2020	11/2020	12/2020	
SN Referral	97	88	97	58	70	80	75	85	81	94	76	74	
PRI	0	3	0	1	0	1	1	0	0	4	0	0	
SN Referrals per month	97	91	97	59	70	81	76	85	81	98	76	74	
PT Referral	49	45	42	31	30	60	51	56	68	60	53	50	
PT only	12	6	7	3	4	9	12	12	10	11	12	6	
Total Referrals per month	109	97	104	62	74	90	88	97	91	109	88	80	1089
19 vs 20 (%)	-4	-13	-21	-19	-21	-55	-10	-50	-29	-46	-12	-6%	

CATEGORY	01/2021	02/2021	03/2021	04/2021	05/2021	06/2021	07/2021	08/2021	09/2021	10/2021	11/2021	12/2021	
SN Referral	55	54	73	57	55	59	49	57					
PRI	1	0	0	1	0	2	3	1					
SN Referrals per month	56	54	73	58	55	61	52	58	0	0	0	0	
PT Referral	40	39	50	47	41	54	32	48					
PT only	9	11	12	9	8	11	8	8					
Total Referrals per month	65	65	85	67	63	72	60	66	0	0	0	0	543
20 vs 21 (%)	-40	-33	-18	8	-15	-20	-32	-32					

VISITS	01/2020	02/2020	03/2020	04/2020	05/2020	06/2020	07/2020	08/2020	09/2020	10/2020	11/2020	12/2020
SN visits	630	548	746	643	678	772	792	730	690	870	813	706
LPN visits	72	62	59	70	52	69	89	97	67	63	87	55
PT visits	326	289	254	190	205	347	364	290	363	351	332	339
OT visits	50	42	61	58	61	44	61	65	61	66	45	46
Speech visits	0	1	4	1	4	9	15	9	8	15	43	37
Total visits per month	1078	942	1124	962	1000	1241	1321	1191	1189	1365	1320	1183

VISITS	01/2021	02/2021	03/2021	04/2021	05/2021	06/2021	07/2021	08/2021	09/2021	10/2021	11/2021	12/2021
SN visits	573	561	686	668	550	624	583	618				
LPN visits	57	68	76	76	61	67	49	65				
PT visits	270	309	358	310	282	373	319	264				
OT visits	54	61	56	29	28	42	42	38				
Speech visits	32	44	37	26	28	17	24	10				
Total visits per month	986	1043	1213	1109	949	1123	1017	995	0	0	0	0

Numbers current as of 10/04/2021

Warren County Health Services
Patient Served by Town
CHHA Division

Town	01/2020	02/2020	03/2020	04/2020	05/2020	06/2020	07/2020	08/2020	09/2020	10/2020	11/2020	12/2020
Adirondack	0	0	0	0	0	2	3	3	1	4	4	4
Athol	2	3	2	2	4	2	1	1	0	1	2	1
Bakers Mills	1	1	1	0	1	1	2	2	2	2	1	1
Bolton Landing	6	6	6	6	5	4	5	5	7	5	6	3
Brant Lake	6	3	4	1	4	3	7	5	4	6	5	7
Chestertown	8	7	8	10	10	10	11	8	9	9	6	7
Cleverdale	1	0	0	0	0	0	0	2	3	10	0	0
Diamond Point	2	6	7	3	1	0	2	0	4	5	5	3
Glens Falls	57	48	49	34	37	36	44	46	51	48	41	34
Hague	0	1	0	1	2	2	1	9	4	6	7	6
Johnsburg	3	3	2	2	2	3	3	5	5	4	4	4
Kattskill Bay	1	1	1	1	1	1	1	1	1	1	1	1
Lake George	13	13	11	11	13	12	18	17	16	25	27	22
Lake Luzerne	13	11	10	10	9	9	11	12	11	9	7	9
North Creek	3	3	3	4	1	2	2	1	0	0	0	0
North River	1	2	2	1	1	1	1	1	0	0	0	1
Olmstedville	0	0	0	1	1	1	1	1	0	0	0	1
Pottersville	11	8	5	4	3	4	5	7	4	5	3	4
Queensbury	90	84	92	63	61	66	66	67	66	79	82	72
Riparius	0	0	0	0	0	0	0	0	0	0	0	0
Silver Bay	0	0	0	0	1	2	2	1	0	0	1	2
Stony Creek	0	0	1	1	2	1	1	2	2	0	1	1
Warrensburg	15	17	17	15	16	25	22	20	24	26	18	22
Wevertown	1	1	0	0	0	1	0	0	0	0	1	2
Total	234	218	221	170	175	188	209	216	216	247	224	208

Town	01/2021	02/2021	03/2021	04/2021	05/2021	06/2021	07/2021	08/2021	09/2021	10/2021	11/2021	12/2021
Adirondack	3	4	3	3	2	0	3	1				
Athol	0	0	4	4	1	0	0	0				
Bakers Mills	1	1	1	1	1	1	1	1				
Bolton Landing	3	5	2	2	4	9	12	11				
Brant Lake	3	1	2	3	1	3	4	3				
Chestertown	6	6	9	8	5	5	8	7				
Cleverdale	0	1	2	0	0	0	0	0				
Diamond Point	5	2	3	2	0	2	3	3				
Glens Falls	42	46	47	51	52	46	38	31				
Hague	6	3	2	3	2	3	3	4				
Johnsburg	4	4	2	5	5	3	2	4				
Kattskill Bay	0	0	0	0	1	2	0	0				
Lake George	15	14	15	14	11	18	18	12				
Lake Luzerne	8	7	7	7	5	6	10	8				
North Creek	2	3	2	2	3	4	5	3				
North River	0	0	0	0	0	0	0	0				
Olmstedville	1	2	2	4	3	2	1	1				
Pottersville	2	1	2	4	7	6	3	2				
Queensbury	59	60	76	67	57	66	59	57				
Riparius	0	0	0	0	0	0	0	0				
Silver Bay	1	1	1	0	1	2	2	2				
Stony Creek	1	1	1	0	0	0	1	1				
Warrensburg	16	20	20	16	13	13	14	13				
Wevertown	2	1	2	2	2	2	1	1				
Total	180	189	205	198	176	193	188	165	0	0	0	0

ATTACHMENT #
BT ACTIVITY SHEET
BP3 (new) - 7/1/21 - 6/30/22

Page 1

Topic Color Codes

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

Ongoing	Office	COVID-19 Response	Most Office staff	Response
September Every Tuesday	In Person	COVID-19 Vaccination Clinic @ HSB	Clinic team	Response
September Every Thursday	Zoom Meeting	Weekly COVID-19 Update Meeting w/ School Superintendents	Ginelle Jones, Pat Belden	Planning
9/1	In Person	Annual Chempack Exercise w/ GFH	Dan Durkee	Drill
9/9, 9/14, 9/15, 9/21	Mixed In Person Virtual	School COVID-19 ECLRS Reporting Training for weekly COVID-19 screenings	Dan Durkee	Response
9/20	Virtual	Mandatory Qtrly Health Emergency Preparedness Coalition meeting	Dan Durkee	Planning/Response
9/22	Webex	ClinOps Presentation	Dan Durkee	Planning/Response
9/23	In person	Special Olympics COVID-19 Protocol Meeting	Dan Durkee	Planning
9/30	Webex	School Nurse Monthly Meeting COVID-19 Updates	Dan Durkee	Planning/Response

ATTACHMENT #
BT ACTIVITY SHEET
BP3 (new) - 7/1/21 - 6/30/22

Page 2

Topic Color Codes

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

9/30	Webex	ELC Granfee Meeting	Ginelle Jones, Pat Belden, Dan Durkee	Planning/Response
October every Tuesday	In Person	COVID-19 Vaccination Clinic @ HSB	Clinic team	Response
10/7	In Person	COVID-19 Booster Shot Vaccination Clinic	Clinic Team	Response
10/13	Virtual	Quadrant Pool Testing Training Seminar	Dan Durkee, PH Staff	Planning
10/15	Virtual	Family Emergency Preparedness Program	Dan Durkee	Community Engagement
10/22	Virtual	Family Emergency Preparedness Program	Dan Durkee	Community Engagement
10/27	Virtual	Warren County EPR/LEPC Committee Meeting	Dan Durkee	Planning/Networking

**Warren County Public Health
Rabies Program
September 2021**

Town	Different Address Owner/Victim <small>*Follow up by Town ACO</small>				Same Address Owner/Victim <small>* Follow up by Public Health</small>				Out of Town Owner <small>*Follow Up by Public Health</small>				Strays <small>Follow Up by Public Health</small> <ul style="list-style-type: none"> • Vet's Office • Victim Watching • Victim Treated Rabies PEP • Euthanized <small>Follow Up by ACO</small> <small>Animal needs to be captured and taken to Animal Hospital. Public Health to check after confinement</small>					
	Cats		Dogs		Cats		Dogs		Cats		Dogs		Vet	Victim Watched	Treated with PEP	Refused PEP	Euthanized	ACO Capture
	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD						
Bolton					1													
Chester				1														
Glens Falls											1							
Hague															1			
Horicon															1			
Johnsburg											1							
Lake George					1						1							
Lake Luzerne																		
Queensbury			1	1				4				1	1		1			
Stony Creek																		
Thurman																		
Warrensburg												1						
Totals			1	2	2			4	3			2	2		3			

1 horse bite in Warrensburg, horse UTD w/ Rabies vaccine and verified as alive and well after 10 day confinement

*UTD- Up to date

*PEP- Post exposure prophylaxis

Total Bites for August – 20

Specimens tested for rabies this month- 1

Positive specimens for rabies- 0

People pre-approved for rabies post exposure treatment- 4

Rabies Clinics this month- 1

Next Rabies Clinic- November 6th at the Queensbury Community Center from 10 AM-12 PM

SCHEDULE "A"

AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (Must be approved by Department Head, County Administrator & Committee Chair)
- Out-of-State (Must be approved by Department Head, County Administrator & Committee Chair)
- On-Line (Must be approved by Department Head, County Administrator & Committee Chair)

The Health Services (Supervisory Committee) hereby authorizes Val Whisenant (Employee Name)

to attend HCA's, Homecare, and Hospice Emergency Preparedness Virtual Conference (Name of meeting or organization)

at Virtual (Address) on October 6, 2021 (Dates)

Meeting/Convention/Training Cost: \$159 Mode of transportation to be used: N/A (County Vehicle or Mass Transportation)

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

No transportation is needed

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

Notice of meeting/convention/training including cost. Total Cost \$ 159 (Include travel costs)

For Overnight Travel

Room rate \$ _____ GSA* Rate \$ _____ Funding in Budget? Y N

Meal costs \$ _____ GSA* per diem rate \$ _____ Budget Code: A.4010.444

* www.gsa.gov

Date: 9/27/21

[Signature]
Department Head Signature

Date: 9/28/21

[Signature]
County Administrator Signature

Date: 9/28/21

[Signature]
Committee Chair 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:

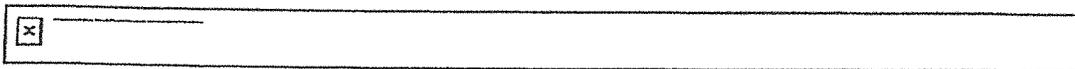
1. Original with voucher to Auditor.
2. Copy to Buildings & Grounds if fleet vehicle is needed.
3. Copy to Purchasing with Purchase Order, if required.
4. Copy to Clerk of the Board if credit card will be used.
5. Copy of executed form needs to be included in next agenda for reporting to oversight Committee.

Whisenant, Valerie

From: Home Care Association of New York State <alovelace@hcanys.org>
Sent: Tuesday, September 14, 2021 1:06 PM
To: Whisenant, Valerie
Subject: Registration Open for Home Care and Hospice Emergency Preparedness Virtual Conference

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or on clicking links from unknown senders.

Having trouble viewing this email? [Click here](#)



September 14, 2021

Register Today for HCA's Home Care and Hospice Emergency Preparedness Virtual Conference

As cases in COVID-19 and the Delta Variant continue to rise, and the state mandates home care, hospice and other health care personnel to receive the COVID-19 vaccine, home care and hospice providers must review and increase their emergency preparedness protocols and activities.

Join HCA for this year's Home Care and Hospice Emergency Preparedness Conference and learn how your organization can be best prepared for ongoing and future emergencies.

When: Wednesday, October 6, 2021

Time: 9 a.m. to 3:30 p.m.

[Click here to register and review the conference brochure](#)

HCA's Emergency Preparedness Conference will cover a variety of important emergency-related issues, including:

- An update on state and federal regulatory relief measures for home care and hospice providers;
- How to prepare for a cyber security attack;
- Ways to ensure compliance with the Occupational Safety and Health Administration Emergency Temporary Standard Rule and New York's HERO Act;
- Providers' experiences with surveys during the pandemic; and