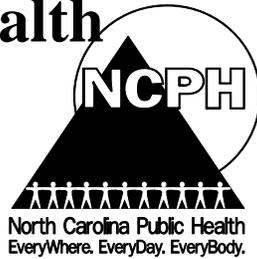


Forsyth County Board of Health



- Dr. Linda L. Petrou, PhD, Chair
- Dr. James K. Doub, OD, Vice Chair
- Ms. Judy Briggs
- Mr. John Davenport, Jr., PE
- Ms. Carrie D. Fernald, RN, MSN, AGPCNP-BC, FCN
- Dr. Charles F. Massler, DDS, M.Ed.
- Dr. Willard L. McCloud, Jr., MD
- Dr. Scott E. Schroeder, DVM
- Mr. J. Phil Seats, R.Ph., MBA
- Dr. Ricky Sides, DC
- Ms. Gloria D. Whisenhunt, County Commissioner

BOARD OF HEALTH MINUTES March 4, 2015

MEMBERS PRESENT

Dr. Linda Petrou, Chair
Ms. Judy Briggs
Mr. John Davenport
Ms. Carrie Fernald
Dr. Willard McCloud
Dr. Scott Schroeder
Mr. J. Phil Seats
Dr. Ricky Sides
Ms. Gloria Whisenhunt

MEMBERS ABSENT

Dr. James Doub
Dr. Charles Massler

OTHERS PRESENT

Mr. Jim Martin, Director of Policy and Programs for Tobacco Prevention and Control Branch,
Division of Public Health
Ms. Ofis M. Lucas, Community Member

Call to Order:

On Wednesday, March 4, 2015, the Forsyth County Board of Health held its regularly scheduled monthly meeting in the Boardroom at the Forsyth County Department of Public Health (FCDPH). Dr. Linda Petrou called the meeting to order at 5:34 p.m.

Consideration of Minutes:

The minutes of the February 4, 2015 Board of Health Meeting were reviewed by the Board. Dr. Petrou asked for a motion to approve the minutes. Dr. Willard McCloud made a motion to approve and Ms. Judy Briggs seconded. The rest of the members agreed and the minutes were approved by the Board.

Public Comment Section:

Board Members, staff, and guests introduced themselves. Ms. Ofis Lucas spoke briefly, introducing herself as a Minister of the Gospel who just received her Bachelors of Art (BA) degree in Social Work. Ms. Lucas stated she was interested in doing volunteer work at the department and added she was into outreach. Dr. Petrou thanked Ms. Lucas for coming and congratulated her on getting her BA degree. She told her there were many opportunities to volunteer on committees and coalitions through the department and pointed out Ms. Ayo Ademoyero and Ms. Lynne Mitchell as two contacts for volunteer work.

Health Director's Comments – Mr. Marlon Hunter started by reporting that there has been nine flu deaths so far in our community. He was asked by Ms. Gloria Whisenhunt and other County Commissioners and the County Manager to give a Human Services update last week about public health issues.

Mr. Hunter expressed his appreciation to Mr. Bob Whitwam for the great job he has done with the Dental Clinic, adding that the center is very productive – the dentist is now seeing about 350 clients each month. He also pointed out he would like to continue to partner with Forsyth Tech and thanked them for their assistance at the Dental Clinic.

Mr. Hunter informed the Board that the Community Health Assessment (CHA) is due but the department is waiting and asking for an extension from the State. He explained that Infant Mortality was selected as the key priority to work on this year for the CHA adding he would like to make some strides in Infant Mortality and will be talking more about it in the next month or two. Mr. Hunter commended Ms. Mitchell and her staff for already being on board and for their work with Collective Impact.

Lastly, Mr. Hunter mentioned that the department has been dealing with a lot of Communicable Infectious Diseases over the past months - Ebola, Flu, Pertussis, Shigella outbreak, Legionnaires Disease and now Measles. He stated that with all the many communicable infectious diseases we have to work on, he hopes they can appreciate our Communicable Disease team that keeps our community under control and keeps them safe.

New Business:

North Carolina Tobacco Update – Mr. Jim Martin, Director of Policy and Programs for Tobacco Prevention and Control Branch, Division of Public Health gave a presentation entitled *Update on the Health Consequences of Tobacco Use: NC's Progress*. Topics highlighted in Mr. Martin's presentation included:

The Significance of the Problem – highlighted key findings from the Surgeon General's Report on tobacco use, secondhand smoke and the health consequences of smoking.

Evidence-Based Solutions – talked about the Tobacco Use Prevention Program goals.

Brief NC History – provided a timeline of when smoke-free regulations in North Carolina were put into place and showed the progress that has been made in tobacco-free environments in NC, such as hospitals, state operated healthcare facilities, prisons, community colleges and public schools K-12.

Local Government Authority to Regulate Smoking and Tobacco Use – addressed the role local government plays in adopting and enforcing ordinances, board of health rules, and policies that restrict or prohibit smoking in regards to local government buildings, local government grounds, local government vehicles and enclosed public places.

E-cigarettes – talked about the effects of e-cigarettes and some of the public health issues associated with them – he added there are not a lot of regulations on e-cigarettes. Mr. J. Phil Seats asked if vapor and tobacco smoke are handled the same – can you go into a restaurant and light an e-cigarette and Mr. Martin responded yes.

Policy Trends – reported some of the trends among NC Counties and Municipalities that are reporting 100% smoke-free or tobacco-free written regulations in government buildings, on government grounds, in parks and in public places.

Resources and Tips for Implementation – resources included the NC Tobacco Use Quitline (1-800-QUIT-NOW; 1-800-784-8669) and the Local Government Smoke-Free Implementation Toolkit site (<http://www.tobaccopreventionandcontrol.ncdhhs.gov/lgtoolkit/index.htm>) (complete copy of presentation on file in the Administrative Binder)

Clinic Fees Schedule - Ms. Quintana Stewart went over the 2015-2016 proposed clinic fee schedule as required annually for accreditation. She explained that NC law allows health departments to charge fees for services as long as the following criteria are applied: the fees are based on a plan recommended by the Health Director and approved by the Board of Health and County Commissioners; the health department does not provide the service as an agent of the State and the fees are not against the law in any way.

Ms. Stewart further stated that the health department is required by the State to provide certain services and no one can be denied these services. Also, for the Public Health Department to assure that all residents can get all legally required public health services and also provide as many other recommended and needed services as possible, within the resources available to use, is in the best interest of the community.

Ms. Stewart explained the methodology for setting clinic fees as follows:

- 1) determine the costs for performing the service,
- 2) determine the Medicaid rates,
- 3) set the fees, and
- 4) apply an updated sliding fee scale (an updated sliding fee scale was sent from the Division of Public Health based on the revised Federal Poverty Level Scale – the 101% to 250% of poverty scale is used because it is required for Family Planning Services).

Mr. Whitwam presented the recommended Environmental Health and Dental Clinic Fee schedule adjustments. He reported that because of a recent increase in fees from the NC State Lab for Public Health (PH) for analyzing well water samples, an analysis of pricing and transportation costs at local certified labs and the State Lab for PH was conducted to determine the best value for the public and the quickest turnaround time for processing water samples. Mr. Whitwam explained that the proposed fee increases are needed to cover costs of materials and analysis, transportation of samples to a lab, the Environmental Health Specialist time and county vehicle use and courier fees when applicable. Mr. Whitwam confirmed that a local lab was identified and is certified to analyze most water samples and will also provide courier service from the department at no additional cost. The lab will be used for all water samples except for three (the State Lab for PH will be used for the three samples not analyzed by the local lab). The increase to fees will be kept at a minimum, there will be faster turnaround of samples analyzed locally and a higher level of service will be provided to the public.

Mr. Whitwam explained that the Cleveland Avenue dental fees were based on the following:

- 1) average fees per procedure in the 27101 zip code according to the NC Office of Rural Health and Community care,
- 2) current Medicaid rates for each procedure,
- 3) using the average private practice fee in zip code 27101 and the Medicaid rate for each procedure, and
- 4) a sliding fee scale based on the proposed Dental Center fee, current Medicaid rate and 2015 Federal Poverty Level (FPL) Guidelines. The fee for non-Medicaid patients will slide from 100% of the proposed fee (above 250% of FPL) to 60% of the proposed fee (100% FPL and below) – the fee per procedure will not fall below the Medicaid rate in any case.

Mr. Whitwam presented the Board with a revised Dental Fee Schedule – page 2, pointing out the following corrected CDT codes (3310, 3320, and 3330) will only slide as low as 70% (a complete copy of presentation on file in the Administrative Binder).

Ms. Stewart added the department is also proposing a \$10.00 Vital Records Workshop fee (to help cover for snacks and water) and also a nominal fee to be charged for copies.

The Board's approval for the Proposed Fee Schedule (with revised Dental Fee Schedule – page 2) as presented by Ms. Stewart and Mr. Whitwam was requested. Dr. Ricky Sides made a motion to accept/approve the Proposed Fee Schedule and Mr. John Davenport seconded. Dr. Petrou asked for a vote from the rest of the Board and they unanimously voted to approve the Proposed Fee Schedule with the revised Dental Fee Schedule - page 2.

Old Business:

None

Committee Reports:

None

Adjourn:

A request for a motion to adjourn was made by Dr. Petrou. A motion was made by Mr. J. Phil Seats and seconded by Mr. Davenport and Dr. Sides. The meeting adjourned at 6:53 pm.



Marlon B. Hunter
Secretary to the Board
MBH/lgc