

SEMINOLE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT: Seminole County Health Department Fee Resolution

DEPARTMENT: Community Services **DIVISION:** Health Department

AUTHORIZED BY: Dr. David Medley **CONTACT:** Mike Napier **EXT.** 3200

Agenda Date <u>09/26/2006</u> Regular <input type="checkbox"/> Consent <input checked="" type="checkbox"/> Work Session <input type="checkbox"/> Briefing <input type="checkbox"/> Public Hearing – 1:30 <input type="checkbox"/> Public Hearing – 7:00 <input type="checkbox"/>
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MOTION/RECOMMENDATION:

Approval and authorization for the Board of County Commissioners to adopt the Seminole County Health Department Fee Resolution to update the Administrative Code.

BACKGROUND:

Each year the County reviews existing fee resolutions to ensure proper fees are charged for its services.

The Seminole County Health Department proposes to repeal and replace the current Fee Resolution 2006-R-130 in the County Administrative Code. The Fee Resolution includes revisions to existing services offered by the Seminole County Health Department.

The proposed changes will not affect low-income citizens who qualify for Medicaid. Further, KidCare will not be affected by primary care related fees increased for medical care.

Reviewed by:	<u>9.15.06</u>
Co Atty:	<u>J. DeLina</u>
DFS:	<u>[Signature]</u>
Other:	<u>[Signature]</u>
DCM:	<u>[Signature]</u>
CM:	<u>[Signature]</u>
File No. <u>RCS04</u>	

THE FOLLOWING RESOLUTION WAS ADOPTED BY THE BOARD OF COUNTY COMMISSIONERS OF SEMINOLE COUNTY, FLORIDA, AT THEIR REGULARLY SCHEDULED MEETING ON THE ___ DAY OF _____, 2006.

WHEREAS, Seminole County Ordinance No. 89-28 created the Seminole County Administrative Code; and

WHEREAS, Seminole County Resolution Numbers 89-R-438 and 05-R-151 adopted the Seminole County Administrative Code; and

WHEREAS, pursuant to Special Acts of the Legislature, Chapter 67-1845, Seminole County was given authority to establish and amend, as needed, a schedule of fees for services by the County Health Department; and

WHEREAS, due to the enormous number of laboratory tests and procedures available for proper health care, and the addition of new tests and procedures brought forth by advance of medical science, Seminole County does hereby adopt by reference those charges set forth under the State of Florida Medicaid Reimbursement Rate as they may be amended from time to time by the Seminole County Health Department for those primary care services, including but not limited to, laboratory tests and x-rays, for which there are no specific fees set in the attached fee schedule; and

WHEREAS, the fees established in the fee schedule represent the maximum charge for each service but may be adjusted on a sliding scale, based upon the income of the recipient of the services, pursuant to state guideline; and

WHEREAS, each year the County reviews existing fee resolutions to ensure proper fees are charged for its services,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF SEMINOLE COUNTY, FLORIDA THAT,

Section 20.26 "Health Department", Seminole County Administrative Code, is amended as identified in the attached revised Fee Resolution. The attached changes are for inclusion in the Seminole County Administrative Code.

ADOPTED this _____ day of _____, 2006.

ATTEST:

BOARD OF COUNTY COMMISSIONERS
SEMINOLE COUNTY, FLORIDA

MARYANNE MORSE
Clerk to the Board of
County Commissioners of
Seminole County, Florida.

By: _____
CARLTON HENLEY, Chairman

Date: _____

ss
9.13.06
Attachment
Section 20.26 Health Department "Fee Resolutions"

SECTION 20. FEE RESOLUTIONS**20.26 HEALTH DEPARTMENT**

A. PURPOSE. To establish public health service fees in order to expand existing public health services to the community at large.

B. PRIMARY CARE SERVICES.

(1) Acute/Episodic Illness - Primary care services will be charged on a fee-for-service basis not less than the prevailing Medicaid rate, nor more than the prevailing Medicare rate~~using the Medicaid rate for each service~~. The fee will be derived by considering the type of visit, the client sliding fee group based on Federal OMB Guidelines, and the State Medicaid rate. Medicaid identification will be accepted as full payment in lieu of charges.

(2) Family Planning - The fee will be derived by considering the type of visit, the client sliding fee group based on Federal OMB Guidelines, and the State Medicaid rate. Medicaid identification will be accepted as full payment in lieu of charges.

(3) Well Child Services - The fee will be derived by considering the client sliding fee group, which is calculated at eligibility determination, based on Federal OMB Guidelines. The fee group will be applied to the rate not less than the prevailing Medicaid rate, not more than the prevailing Medicaid rate~~established by the State Medicaid program~~. Medicaid identification will be accepted as full payment in lieu of the fee.

(4) School/Day Care Physicals - A one-time service, \$~~30~~25.00 per physical. (A limited visit which fulfills the basic requirement of the School System or a Day Care Center. Lab tests and/or other services performed beyond the basic requirement will be charged for separately.)

(5) Maternity Services - Clients who are presumed eligible will receive continued prenatal care through delivery and postpartum care. Prenatal care clients will be billed in full for all services rendered if they are unwilling to follow through with seeking Medicaid eligibility.

(6) Dental Clinic - The fee is based on the Medicaid rate. Seminole County residents who do not meet the requirement of being "active Medicaid", up to the age of 21 years or pregnant (using Medicaid Services), can be screened through Community Assistance for dental services at this clinic.

(7) Pharmacy - Fees are assessed per cost of prescription plus dispensing fee~~prescription based on the Medicaid fee calculation~~. The fee will be derived by adding \$5.00 dispensing fee plus the cost of prescription. Cost of prescription is the cost of medication plus 0% to 20% to be determined on a sliding fee scale

~~category 4.23 plus the cost of the medication.~~ The payment will be assessed by considering the client sliding fee group, which is calculated at eligibility determination, based on Federal OMB Guidelines. Medicaid identification will be accepted as full payment in lieu of charges.

~~(8) Adult Basic Pre-Employment Physical Examination
(with no lab work or drug testing) \$40.00~~

~~(9) Expanded History & Physical including Spirometer,
Blood chemistry, and Urinalysis (Chest x-ray will be performed
if one has not been completed during last three years) \$80.00~~

~~(10) Vision Screening \$10.00~~

~~(11) Hearing Screening \$10.00~~

~~(8)(12) Lead Screening - The fee will be derived by considering the client sliding fee group which is calculated at eligibility determination, based on Federal OMB guidelines. The fee group will be applied to the rate established by the State Medicaid program. Medicaid identification will be accepted as full payment in lieu of charges.~~

~~(13) Drug Testing - Private Sector \$40.00~~

~~(9)(14) Blood Chemistries Only - Actual Cost plus per visit
specimen drawing and handling fee of \$20-15.00~~

~~(10)(15) Herpes Culture Test \$30.00~~

~~(11)(16) Pregnancy Test - Nurse Consultation Medicaid Rate~~

~~(12)(17) Pregnancy Test – Teenage clients No Charge~~

~~(13)(18) Chest X-ray Medicaid Rate~~

~~(19) Spirometer \$30.00~~

~~(14)(20) Lamaze Classes - Private Sector (5 weeks) \$35.00~~

~~Not receiving care from SCHD \$15.00
Enrolled SCHD Clients (5 weeks)~~

~~(15)(21) Hypertension, series of up to five tests \$5.00~~

~~(16)(22) Thin-Prep PAP laboratory test \$25.00~~

C. COMMUNITY PUBLIC HEALTH SERVICES

- (1) Tuberculosis X-ray for suspected, confirmed or symptomatic contact or case No Charge

- (2) Tuberculosis (TB) Sputum Culture for suspected, confirmed or symptomatic contact or case No Charge

- (3) Chest X-ray for health care employees or for vocational or college student program requirements, with physician interpretation. \$35.00Medicaid
 Rate
- ~~Nurse counseling, follow-up and education~~
~~(30 minutes of nursing time)~~assessment. \$2520.00

- (4) ~~Tuberculin (TB) Skin Test for health care employees or for vocational or college student program requirements, with reading.~~ \$5.00Medicaid Rate
~~Nurse counseling, follow-up, and education~~
~~(30 minutes of nursing time)~~ assessment. \$2520.00

- (5) Sexually Transmitted Diseases - The fee will be derived by considering the client sliding fee group which is calculated at eligibility determination, based on Federal OMB Guidelines. The fee group will be applied to the rate established by the State Medicaid Program. Medicaid identification will be accepted as full payment in lieu of charges. Patients referred by the Disease Intervention Specialist for initial testing may be charged.

- (6) Testing for HIV I Antibodies
 - (a) For Health Department Clients with eligibility card:
 for test results within the normal time period (State Lab per sliding fee scale) No Charge to \$20.00

 - for faster test results (within 48 hours)
 Private Lab \$40.00

 - (b) For people who are not already Health Department Clients:
 for test results within the normal time period (State Lab) \$20.00

 - for faster test results (within 48 hours)
 Private Lab \$40.00

(7) Immunizations for adults (such as international travel vaccinations, hepatitis prevention, etc.):

Flat Fee: Prevailing vaccine costs plus dispensing fee.

Dispensing Fee: \$20.00

~~(a) Pneumococcal Vaccine (Pneumonia shot) \$25.00
 Medicare will be accepted as full payment where applicable~~

~~(b) Influenza Vaccine (Flu shot) \$18.00
 Medicare will be accepted as full payment where applicable~~

~~(c) All other required and available vaccines for adults provided at cost of drug plus \$20.00 each~~

(8) Required Immunizations for children up to age 18 No Charge

(9) Laboratory Services Prevailing lab cost plus blood drawing fee

Blood Drawing Fee: \$15.00

~~Titers and Lab tests cost of test \$15.00~~

~~Plus following draw fees:~~

~~Hepatitis B antibody titer \$22.00~~

~~Rubella (German measles) \$21.00~~

~~Rubeola (measles) titer \$64.00~~

~~Varicella (chicken pox) titer \$64.00~~

~~Hepatitis Profile \$37.00~~

(10) Class/Seminar attendance registration
 Per person charge for health care, social work and counseling employees, per BCC resolution

AIDS 101 \$ 5.00

AIDS 500 \$10.00

AIDS 501 \$50.00

D. VITAL STATISTICS:

(1) Birth Certificates:

Fee pursuant to BCC Resolution \$8.00

State Fee pursuant to Section 382.025, FS (Surcharge for Certificates Issued by

Local Registrars)	\$2.50
State Surcharge, Child Welfare Training	
Trust Fund	<u>\$1.50</u>
Total Fee for Birth Certificates	<u>\$12.00</u>
(2) Additional Copies	<u>\$65.00</u>
(3) Protective covers Out-of County Birth Certificates—additional charge	<u>\$32.00</u>
(4) Death Certificates - Certified Copy	<u>\$85.00</u>

E. MEDICAL RECORDS:

(1) Copying of Medical Record (per page)	50 cents
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F. PUBLIC RECORDS:

(1) Copying of Public Record (per page)	25 cents
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G. ENVIRONMENTAL HEALTH SERVICES: The following Environmental Health fees are hereby adopted as authorized by State of Florida Administrative Code or Policy, unless otherwise indicated.

(1) Water	
(a) First year public water annual operation permit	
And Construction permit fee—limited use	\$75.00
(b) Existing limited use public water system	
Initial operation permit fee	\$75.00
(c) Limited use public water system annual	
Operation permit fee	\$70.00
(d) Re-inspection fee limited use public water	
system	\$40.00
(e) New private water system construction permit	
Fee serving three or four rental residences	\$40.00
(f) Private water system serving three or four	
non-rental residences reinspection fee	\$25.00

(g)	Clearance processing fee for water systems located in delineated areas	\$50.00
(h)	Microbiological sampling per site visit	\$40.00
(a)(i)	Health Department Laboratory analysis per sample	\$20.00
(b)(i)	Chemical sampling per site visit	\$60.00
	State Fee	\$50.00
	Fee pursuant to BCC resolution	\$10.00
	<u>Total</u>	<u>\$60.00</u>
(c)(k)	Chemical sampling per site visit for Delineated areas	\$50.00
	State Fee	\$50.00
	Fee pursuant to BCC resolution	\$10.00
	<u>Total</u>	<u>\$60.00</u>
(d)(j)	Combined chemical/microbiological Sample visit	\$65.00
	State Fee	\$55.00
	Fee pursuant to BCC resolution	\$10.00
	<u>Total</u>	<u>\$65.00</u>
(m)	Health Department Laboratory chemical analysis per sample set	\$100.00
(n)	Registered Water Systems	\$15.00

*Note: The Seminole County Health Department will charge no drinking water fee without authority to do so by Statute or rule.

(2) Swimming Pools and Bathing Places

(a)	Annual operating permit - up to and including 25,000 gallons	\$10075.00
	Fee pursuant to BCC Resolution	\$10.00
	<u>Total</u>	<u>\$11085.00</u>
(b)	Annual operating permit - more than 25,000 gallons	\$200160.00
	Fee pursuant to BCC Resolution	\$ 10.00
	<u>Total</u>	<u>\$210170.00</u>

(c)	Variance Applications, as per D.P.O.R	\$240.00
(c)(d)	Late fee - (on permits paid after June 30)	
	Fee pursuant to BCC Resolution	\$25.00
(d)(e)	Re-inspection Fee per each re-inspection	
	Fee pursuant to BCC Resolution	\$25.00
(e)	Variance Applications	\$25.00
(f)	Exempted Condo Pools	
	State Fee	\$50.00
	Fee pursuant to BCC Resolution	\$10.00
	Total	\$60.00

(3) Septic Tanks (Onsite Sewage Treatment and Disposal Systems) (OSTDS)

(a)	New septic tank	
	State fee pursuant to Chapter 64E-6, F.A.C.	\$ 305.20000
	Fee pursuant to BCC resolution	\$ 50.00
	Total fee for standard or filled septic tank	\$ 355.25000
(b)	Septic Tank Modification(s)	
	State fees pursuant to Chapter 64E-6, F.A.C.	\$185.17500
	Fee pursuant to BCC resolution	\$ 50.00
	Total fee for Septic Tank Modification(s)	\$235.22500
(c)	Septic tank repair permit	
	State fee pursuant to Chapter 64E-6, F.A.C	\$175.2500
	Application fee pursuant to BCC resolution	\$35.3000
	Site evaluation for a system repair or	
	Modification of system	\$40.00
	Repair permit issuance which includes	
	Inspection	\$50.00
	State research fee	\$ 5.00
	Total fee for septic tank repair permit	\$210.15000

~~(d) Septic disposal service permit (annual) \$50.00~~

~~(e) Portable/temporary toilet service permit (annual) \$50.00~~

~~(f) Additional charge per pump-out vehicle as it relates to items d. and e. above \$25.00~~

(g)	Approval of system previously in use	\$50.00
(d)(g)	Re-inspection fee per each non-compliance re-inspection	
	Fee pursuant to BCC resolution	\$25.00
	State Fee pursuant to Chapter 64E-6, F.A.C.	\$50.2500
	Total	\$7550.00
(i)	Industrial/Manufacturing Permit	\$150.00
(j)	Aerobic Treatment Unit Permit	\$150.00
(k)	Aerobic Treatment Unit Maintenance Service Permit	\$25.00
(l)	Changes/Amendments to Industrial Manufacturing Permit (per change/amendment)	\$25.00
(e)(m)	Septic System Abandonment Permit	\$40.00
	State Fee	\$40.00
	Fee pursuant to BCC resolution	\$40.00
	Total	\$80.00
(n)	Septage Lime Stabilization Facility Inspection Fee (per annum per facility)	\$150.00
(o)	Septage Disposal Site Evaluation Fee (per annum)	\$100.00
(f)(p)	Variance Application For a Single Family Residence per each lot or building site	\$150.00
	State Fee	\$150.00
	Fee pursuant to BCC resolution	\$50.00
	Total	\$200.00
(g)(q)	Variance Application for a Multi-family or Commercial building per each building site	\$200.00
	State Fee	\$200.00
	Fee pursuant to BCC resolution	\$50.00
	Total	\$250.00
(r)	Tank Manufacturer's Inspection per annum	\$100.00
(h)(e)	Onsite Sewage Consultation Fees and Field Work	

Requests Not Related to Formal Permitting

(i)	Plan Review – State Fee per chap 64E-6 F.A.C..	\$25.00
	Plan Review – Fee per BCC resolution	<u>\$5040.00</u>
	Total Plan Review Fee	<u>\$5035.00</u>

(ii)	Soil Profile Fee – State Fee per ch 64E-6 F.A.C.	\$60.00
	Soil Profile Fee – Fee per BCC Resolution	<u>\$10040.00</u>
	Total Soil Profile Fee	<u>\$100.00</u>

(iii)	Existing System Evaluations – State Fee	\$50.00
	Existing System Evaluations – Fee per BCC res	\$20.00
	Total Existing System Evaluation Fee	<u>\$70.00</u>

(i)(t)	Late Fees for Delinquent Onsite Sewage Operating Permits	
	Fee pursuant to BCC resolution	\$25.00

(j)	<u>Permit amendment</u>	
	<u>State Fee</u>	<u>\$55.00</u>
	<u>Fee pursuant to BCC resolution</u>	<u>\$5.00</u>
	<u>Total</u>	<u>\$60.00</u>

(k)	<u>Voluntary timed inspection</u>	<u>\$50.00</u>
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(l)	<u>Fast Track Permitting New & Existing Sewage</u>	<u>\$75.00</u>
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(m)	<u>DRC Plan Review Small Site Plan, Development Plan</u>	<u>\$35.00</u>
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(n)	<u>DRC Plan Review Site Plan, Preliminary & Final Engineering Subdivision (4 reviews)</u>	<u>\$150.00</u>
	<u>(reviews after 4)</u>	<u>\$35.00</u>

(4) Food Service

(a)	Annual Permit for Fraternal/Civic organizations, Movie Theaters with traditional menus, Bars and Lounges that do not serve food, and Other Food Service	\$160.00
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(b)	Annual permit for School Cafeteria:	
	operating for 9 months or less	\$130.00
	operating for more than 9 months	\$160.00
(c)	Annual Permit for Hospitals, Nursing Homes and Jails/Prisons	\$210.00
(d)	Annual permits for Residential Facilities (i.e. large Adult Congregate Living Facilities)	\$110.00
(e)	Annual permit for Child Care Centers without Dept. of Children & Families license	\$85.00
(a)(f)	Annual permit for Child Care Centers with Department of Children & Families (DCF) license Fee pursuant to BCC resolution	\$85.00
(g)	Annual permit for Limited Food Service	\$85.00
(h)	Food Service Plan Review (per hour)	\$35.00
(i)	Food Establishment worker or Manager Training Course (per person)	\$10.00
(j)	Requests for Inspection	\$40.00
(k)	Reinspection (for each after the first reinspection)	\$30.00
(b)(l)	Late renewal of Annual Certificates	\$25.00
	State Fee	\$25.00
	Fee pursuant to BCC resolution	\$5.00
	Total	\$30.00
(c)(m)	Alcoholic Beverage Establishment Inspection	
	Approval State Fee	\$30.00
	Fee pursuant to BCC resolution	\$20.00
	Total	\$50.00
(d)	Reinspection Fee (1st)	\$50.00
(5)	Other Services	
(a)	Biomedical Waste Generators	

Initial permit – Biomedical Waste Generators	\$55.00
Renewal of annual permit before October 1	\$55.00
Renewal of annual permit after October 1	\$75.00
Reinspection Fee (after reinspection)	\$25.00
Re-application for permit	\$25.00
Registration for mobile treatment machine not permitted by F.D.E.P.	\$25.00

(a)(b) Tanning Facilities

Annual license fee-Facility (with one device)	\$150.00
Fee for each additional device	\$ 55.00
Max	\$315.00
Late fee	\$ 25.00
Re-inspection fee per each re-inspection Fee pursuant to BCC resolution	\$ 25.00

(c) Migrant Labor Camps

5 to 50 occupants (annual)	\$125.00
51 to 100 occupants (annual)	\$225.00
101 or more occupants (annual)	\$500.00

(d) Mobile Home Park

~~Fee of \$3.50 (per space: 15-171 spaces)
Minimum of \$50.00 (per 5-14 space facility)
Maximum of \$600.00 (per facility: 172+ spaces)~~

(b)(e) Body Piercing

Annual License Fee	\$150.00
Temporary Establishment	\$ 75.00
Late Fee	\$100.00
Re-Inspection fee per required re-inspection Fee pursuant to BCC resolution	\$ 25.00

(c)(f) Rabies test (low-risk species) \$ 10095.00

(d)(g) Group Care Homes and Facilities

(i) Residential Group Home(s)
Voluntary request for inspection
Fee pursuant to BCC resolution \$ 5025.00

(ii) Adult Living Facilities

General sanitation inspection as required
 by Agency for Health Care
 Administration
 Fee pursuant to BCC resolution \$50.00

(iii) Day Care Centers without Food Service
 General sanitation inspections as
 required by DCF @ 2 inspections per year
 Fee pursuant to BCC resolution \$50.00

(e)(h) Foster Homes

(i) Annual environmental health inspection
~~For DCF licensing Fee pursuant to~~
~~Residential Group Home(s) Voluntary~~
~~request for inspection~~
 Fee pursuant to BCC resolution ~~\$50~~20.00

(ii) Foster Home Reinspection \$25.00

~~(ii) Water sample analysis performed by~~
~~private lab~~
~~Fee pursuant to BCC resolution~~ \$20.00

(f) Schools: Semi-annual environmental health
 inspection of school facilities, Annual fee
 pursuant to BCC resolution \$100.00

(g) Housing and Public Buildings
Adult Entertaining Light meter reading \$ 50.00

(h) Wells

- ~~(i) Irrigation Well Permit \$120.00~~
- ~~(ii) Private Well Permit \$120.00~~
- ~~(iii) Public Well Permit \$200.00~~
- ~~(iv) Re-inspections \$ 25.00~~
- ~~(v) Well Variance \$100.00~~
- ~~(vi) Well Permit after the well has been
 constructed \$500.00~~
- ~~(vii) Well Permit Extensions (90 days) \$ 25.00~~
- ~~(viii) Limited Use Community Well Re-inspection \$25.00~~
- ~~(ix) Limited Use Commercial Well Re-inspection \$25.00~~
- ~~(x) In-hole video inspections of wells \$250.00~~



(xi)	Well Abandonment	\$ 60.00
(xii)	Monitoring Wells (up to 5 wells)	\$120.00
(xiii)	Monitoring Wells (each thereafter)	\$ 25.00

H. **AUTHORITY.** Resolution 2004-R-23 adopted February 10, 2004
Resolution 2006-R-130 adopted June 13, 2006