

**SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM**

SUBJECT: Seminole County Health Department Fee Resolution

DEPARTMENT: Fiscal Services **DIVISION:** Adminstration

AUTHORIZED BY: Cindy Hall *CH* **CONTACT:** Lin Polk **EXT.** 7177

Agenda Date <u>12/10/02</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"/>

MOTION/RECOMMENDATION:

Adopt the Seminole County Health Department Fee Resolution; and authorize Chairman to execute document.

BACKGROUND:

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

After review the Seminole County Health Department proposes to repeal and replace the current Fee Resolution 2001-R-220. The Fee Resolution includes revisions to existing services offered by the Seminole County Health Department.

Reviewed by:
Co Atty: _____
DFS: _____
Other: _____
DCM: <i>MS</i> / <i>SS</i>
CM: <i>KB</i>
File No. _____

Seminole County Health Department

BACK/UP ITEM # 12

<u>Service</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Reason for Change</u>
3. Septic Tanks			
c. Septic tank repair permit	\$130.00	\$150.00	A \$5.00 State training center fee has been sunset. A \$25.00 State fee is being added per Chapter 64-E Florida Administrative Code. (600 permits/year x \$20.00 = \$12,000)
h. Re-inspection fee	\$25.00 total	\$25.00 for each reinspection	The re-inspection fee for <u>each</u> non-compliant re-inspection is being imposed to replace a flat fee for unlimited re-inspections. (50 addl re-insp/year x \$25 = \$1,250)
Other Services			
f. Document copies (per page)			This line is being deleted as it is duplicated on page 6.
f. Rabies test (low-risk species)	\$60.00	\$95.00	Test is \$50. Shipping is \$25. Staff labor is \$20. Total=\$95 (45 cases/year x \$35 = \$1,575)
g. Group Care Homes and Facilities			
1. Residential Group Homes	None	\$25.00	Voluntary requests for inspections were done at no charge. A \$25 charge is being added to recoup inspection costs. (10 centers/year x \$25 = \$250)
2. Adult Living Facilities	None	\$50.00	General sanitation inspections were done at no charge. A \$50 charge is being added to recoup inspection costs. (45 centers/year x \$50 = \$2,250)
3. Day Care centers without Food Service	None	\$50.00	General sanitation inspections were done at no charge. A \$50 charge is being added to recoup inspection costs. (45 centers/year x \$50 = \$2,250)

Summary of Changes 2002

<u>Service</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Reason for Change</u>
Section			
A. Primary Care Services			
7. Pharmacy			Changed text to add fees are "based on the Medicaid fee calculation." Deleted redundant sentence "Medicaid clients and those below 100% of poverty level...No Charge."
B. Community Public Health Services			
5. Sexually Transmitted Diseases			Changed text to clarify that initial testing only will not be charged to clients referred by the Disease Intervention Specialists.
E. Medical Records			
1. Copying of Medical Record (per page)	25c per page	50c per page	Costs of clerk copying records, cost of copier lease, toner and paper is better captured at 50c per page. (13,000 copies/year x 25c = \$3,250)
Environmental Health Services			
2. Swimming Pools and Bathing Places			
d. Late Fee	None	\$25.00	This late fee will be imposed on pool managers who pay their annual permit fee after the June 30 deadline. (20 late payments/year x \$25.00 = \$500)

RESOLUTION 2002-R _____

SEMINOLE COUNTY, FLORIDA

THE FOLLOWING RESOLUTION ESTABLISHING AND REVISING CERTAIN FEES AND CHARGES FOR HEALTH AND ENVIRONMENTAL SERVICES OF THE SEMINOLE COUNTY HEALTH DEPARTMENT AND REPEALING PAST RESOLUTIONS INCONSISTENT WITH THIS RESOLUTION WAS ADOPTED AT THE REGULAR MEETING OF THE BOARD OF COUNTY COMMISSIONERS OF SEMINOLE COUNTY, FLORIDA ON THE ___ DAY OF _____, 2002.

WHEREAS, Chapter 154, Florida Statutes, authorizes the Board of County Commissioners to establish public health service fees; and

WHEREAS, the Board of County Commissioners of Seminole County, Florida, in order to expand existing public health services to the community at large, finds it appropriate to establish such fees and revise them as needed from time to time; and

WHEREAS, the current fee and service schedule is in need of revision in order to accurately reflect services and charges offered as directed under the revised Florida Administrative Code; and

WHEREAS, for the convenience of the reader, the revised fee and service schedule will be organized as indexed below:

NOW, THEREFORE, BE IT RESOLVED that the Board of County Commissioners of Seminole County, Florida, hereby establishes the following fees for the Seminole County Health Department.

SECTION 1. SEMINOLE COUNTY HEALTH DEPARTMENT FEE SCHEDULE

The schedule of fees and charges for review of the Seminole County Health Department shall henceforth be as follows:

A. Primary Care Services:

A. Primary Care Services:

1. Acute/Episodic Illness - Primary care services will be charged on a fee-for-service basis 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 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, \$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 prescription based on the Medicaid fee calculation. The fee will be derived by adding \$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) \$25.00
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

- 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
- 14. Blood Chemistries Only - Actual Cost plus per visit specimen drawing and handling fee of \$15.00
- 15. Herpes Culture Test.....\$30.00
- 16. Pregnancy Test - Nurse ConsultationMedicaid Rate
- 17. Pregnancy Test – Teenage clients No Charge
- 18. Chest X-rayMedicaid Rate
- 19. Spirometer\$30.00
- 20. Lamaze Classes - Private Sector (5 weeks).....\$30.00
(not receiving care from SCHD)
- Enrolled SCHD Clients (5 weeks) \$10.00
- 21. Hypertension, series of up to five tests \$5.00

B. 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 . . . Medicaid Rate
Nurse counseling, follow-up and education (30 minutes of nursing time) \$15.00
- 4. Tuberculin (TB) Skin Test for health care employees or for vocational or college

- student program requirements, with reading . . . Medicaid Rate
 Nurse counseling, follow-up, and education
 (30 minutes of nursing time) \$15.00
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 will not 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 \$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.):
- a. Pneumococcal Vaccine (Pneumonia shot) . . . \$25.00
 Medicare will be accepted as full payment where applicable
 - b. Influenza Vaccine (Flu shot). \$15.00
 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. Titers and Lab tests - cost of test plus draw fee of . . \$15.00
- 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

C. 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\$1.50

Total Fee for Birth Certificates\$12.00

- 2. Additional Copies\$5.00
- 3. Out of County Birth Certificates - additional
charge.....\$2.00
- 4. Death Certificates - Certified Copy\$5.00

E. Medical Records:

- 1. Copying of Medical Record (per page) 50 cents

F. Public Records:

- 1. Copying of Public Record (per page) 25 cents

SECTION 2. ENVIRONMENTAL HEALTH SERVICES

The following Environmental Health fees are hereby adopted as authorized by State of Florida Administrative Code or Policy, unless otherwise indicated.

A. Water

1. First year public water annual operation permit and construction permit fee – limited use\$75.00
2. Existing limited use public water system initial operation permit fee.....\$75.00
3. Limited use public water system annual operation permit fee.....\$70.00
4. Reinspection fee limited use public water system.....\$40.00
5. New private water system construction permit fee serving three or four rental residences.....\$40.00
6. Private water system serving three or four non-rental residences reinspection fee\$25.00
7. Clearance processing fee for water systems located in delineated areas\$50.00
8. Microbiological sampling per site visit\$40.00
9. Health Department Laboratory analysis per sample\$10.00
10. Chemical sampling per site visit.....60.00
11. Chemical sampling per site visit for delineated areas\$50.00
12. Combined chemical/microbiological sample visit\$65.00
13. Health Department Laboratory chemical analysis per sample set\$100.00
14. 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.

B. Swimming Pools and Bathing Places

- 1. Annual operating permit - up to and including 25,000 gallons..... \$75.00
 Fee pursuant to BCC Resolution..... 10.00
 Total \$85.00
- 2. Annual operating permit - more than 25,000 gallons.....\$160.00
 Fee pursuant to BCC Resolution 10.00
 Total \$170.00
- 3. Variance Applications, as per D.P.O.R. \$240.00
- 4. Late fee - (on permits paid after June 30)
 Fee pursuant to BCC Resolution \$25.00

C. Septic Tanks (Onsite Sewage Treatment and Disposal Systems) (OSTDS)

- 1. New septic tank
 - State fee pursuant to chapter 64E-6 F.A.C.....\$ 200.00
 - Fee pursuant to BCC resolution..... 50.00
 - Total fee for standard or filled septic tank...\$ 250.00
- 2. Septic Tank Modification(s)
 - State fees pursuant to chapter 64E-6 F.A.C. \$175.00
 - Fee pursuant to BCC resolution 50.00
 - Total fee for Septic Tank Modification(s) \$225.00
- 3. Septic tank repair permit
 - State fee pursuant to chapter 64E-6 F.A.C..... \$25.00
 - Application fee pursuant to BCC resolution \$30.00
 - 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 \$150.00
- 4. Septic disposal service permit (annual)\$50.00

- 5. Portable/temporary toilet service permit (annual)\$50.00
- 6. Additional charge per pump-out vehicle as it relates to items d. and e. above.....\$25.00
- 7. Approval of system previously in use.....\$50.00
- 8. Re-inspection fee
 - Per each non-compliance re-inspection
 - Fee pursuant to BCC resolution 25.00
 - State Fee pursuant to 64E-6 F.A.C.. 25.00
 - \$50.00
- 9. Industrial/Manufacturing Permit \$150.00
- 10. Aerobic Treatment Unit Permit.....\$150.00
- 11. Aerobic Treatment Unit Maintenance Service Permit\$25.00
- 12. Changes/Amendments to Industrial Manufacturing Permit (per change/amendment)\$25.00
- 13. Septic System Abandonment Permit40.00
- 14. Septage Lime Stabilization Facility Inspection Fee (per annum per facility)\$150.00
- 15. Septage Disposal Site Evaluation Fee (per annum).....\$100.00
- 16. Variance Application For a Single Family Residence per each lot or building site\$150.00
- 17. Variance Application for a Multi-family or Commercial building per each building site.....\$200.00
- 18. Tank Manufacturer's Inspection per annum.....\$100.00

D. Food Service

- 1. 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

- 2. Annual permit for School Cafeteria:
 - operating for 9 months or less. \$130.00
 - operating for more than 9 months\$160.00
- 3. Annual Permit for Hospitals, Nursing Homes and Jails/Prisons\$210.00
- 4. Annual permits for Residential Facilities (i.e. large Adult Congregate Living Facilities\$110.00
- 5. Annual permit for Child Care Centers without Dept. of Children & Families license.....\$85.00
- 6. Annual permit for Child Care Centers with Dept. of Children & Families license Fee pursuant to BCC resolution \$85.00
- 7. Annual permit for Limited Food Service\$85.00
- 8. Food Service Plan Review (per hour)\$35.00
- 9. Food Establishment worker or Manager Training Course (per person).....\$10.00
- 10. Requests for Inspection\$40.00
- 11. Reinspection (for each after the first reinspection)\$30.00
- 12. Late renewal of Annual Certificates\$25.00
- 13. Alcoholic Beverage Establishment Inspection Approval\$30.00

E. Other Services

- 1. 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

- 2. 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

- 3. Migrant Labor Camps
 - 5 to 50 occupants (annual)\$125.00
 - 51 to 100 occupants (annual)\$225.00
 - 101 or more occupants (annual).....\$500.00

- 4. 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)

- 5. Body Piercing
 - Annual License Fee \$150.00
 - Temporary Establishment 75.00
 - Late Fee 100.00

- 6. Rabies test (low-risk species)\$95.00

- 7. Group Care Homes and Facilities
 - (a). Residential Group Home(s)
 - Voluntary request for inspection
 - Fee pursuant to BCC resolution.....\$25.00

 - (b). Adult Living Facilities
 - General sanitation inspection as required by AHCA (Agency for Health Care Administration)
 - Fee pursuant to BCC resolution.....\$50.00

 - (c). Day Care Centers without Food Service
 - General sanitation inspections as required by DCF (Dept. Children & Families) @2 inspections

