



Union County, NC
Consolidated Human Services Board
Meeting Agenda

Monday, May 12, 2025

6:00 PM

**2330 Concord Ave., Monroe, NC
28110**

**1st Floor Multipurpose Conference
Room**

Welcome

Pledge of Allegiance

Invocation

Approval of the Minutes

[25-308](#)

Consolidated Human Services Board (CHSB) Minutes

INFORMATION CONTACT:

Carla A. Sowells, Human Services Agency Department of Business
Operations, Compliance Coordinator 704.296.4808

ACTION REQUESTED:

Review and approve April 2025 CHSB minutes.

BACKGROUND:

The CHSB reviews and approves all minutes from previous meetings.

FINANCIAL IMPACT:

None

Attachments: [BOH 4.14.25minutes](#)

Approval of the Agenda

Executive Directors Report

25-303

Consolidated Human Services Agency Board Application

INFORMATION CONTACT:

Janet Payne, Human Services Agency Executive Director 704.296.4348

ACTION REQUESTED:

Review application and consider making recommendations to the BOCC to reappoint Earl Ford for a second term, filling the Consumer of Human Services position.

BACKGROUND:

The Consolidated Human Services Board (CHSB), pursuant to N.C. general statute § 153A-77, is permitted to be composed of up to 25 members and composition of the board shall reasonably reflect the population makeup of the County. Currently, the Union County CHSB has 19 membership positions, each of which has a specific designation. 12 positions are filled and there are 7 vacancies including:

- Consumer of Human Services (2)
- Dentist (1)
- Other Person (1)
- Pharmacist (1)
- Physician - Psychiatrist (1)
- Optometrist (1)

As is the County's usual practice, the vacancies available for appointment were advertised by posting a notice on the County's website:

<https://www.unioncountync.gov/government/boards-committees/boards-committees>.

FINANCIAL IMPACT:

\$200 per year per member (@\$20 meeting x 10 meetings a year)

Attachments: [Earl Ford Jr. Application 04-25-2025](#)

Division Report

25-299

State of the County Health Report 2024

INFORMATION CONTACT:

Stephanie Starr, Human Services Agency Community Support and Outreach Director, 704-296-4302

ACTION REQUESTED:

Receive as information the State of the County Health Report 2024.

BACKGROUND:

The purpose of the State of the County Health (SOTCH) Report is to inform the community and stakeholders about the current health status, highlight health concerns and issues, and provide a starting point for community involvement in addressing identified health issues. The State of North Carolina requires each county to prepare a SOTCH Report in years when a Community Health Assessment (CHA) is not conducted. The most recent CHA for Union County was conducted in 2022.

FINANCIAL IMPACT:

None

Attachments: [CHSA 5-12-25](#)

25-302

Approval of Requested Public Health Clinical Service Fees

INFORMATION CONTACT:

Traci Colley, Human Services Agency Public Health Director,
704-283-3717

ACTION REQUESTED:

Review and approve requested fees to be added to the Human Services Agency's Division of Public Health Fee Schedule.

BACKGROUND:

In accordance with G.S. 130A-39(g), which allows local public health departments to implement fees for services rendered, Union County Public Health, with the approval of the Union County Consolidated Human Services Agency Board and the Board of County Commissioners, may implement specific fees for services. Dental Clinic fees are proposed to increase by 5%. Listed medical clinic fees will be adjusted to the standard Medicaid rate plus 30%. Any fee without a standard Medicaid rate was increased to the commercial rate plus 30%.

86376 - Thyroid Peroxidase (TPO) Antibodies

86800 - Thyroglobulin Antibody & Thyroglobulin, IMA or RIA

90623 - Penbraya Vaccine, private

0202U - Respiratory Profile, nasal swab

82627 - Dehydroepiandrosterone (DHEA) Sulfate

86140 - C-Reactive Protein (CRP)

82784 - Celiac Antibodies Profile, Immunoglobulins, IgA, IgG, IgM

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82670 - Estradiol Level

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*** No Medicaid rate available, recommended rate based upon 30% increase to commercial rate.

The following CPT codes are established fees, and we are requesting them to be increased due to the Medicaid fee being higher than the Union County Public Health's current fee schedule.

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86778 - Toxoplasma antibody, IGM

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90636 - Twinrix Private
90647 - HIB P vax Private
90675 - Rabies Vaccine
90680 - Rota Virus Private
90691 - Typhoid Vaccine
90697 - Vaxelis (DTaP-IPV-Hib-HepB) Private
90698 - Pentacel Private
90700 - DTaP Private
90707 - MMR Private
90714 - TD Tenivac Private
90717 - Yellow fever vaccine
90732 - Pneumovax 23 Private
90734 - Menveo/Menactra Private
90744 - Hepatitis B Pediatric Private
90746 - Hepatitis B Adult Vaccine Private
90785 - Psychotherapy complex interactive
90832 - Psychotherapy w/patient 30 mins
90834 - Psychotherapy w/patient 45 minutes
90837 - Psychotherapy w/patient 60 minutes
90849 - Multiple Family Group Psychotherapy
97803 - Med nutrition, individual, subsequent vi....
99406 - Tobacco counsel 3 to 10 minutes
99407 - Tobacco counsel greater than 10 minutes
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J0561 - Penicillin G benzathine, per 100,000 units, injection (Bicillin L-A)
S4993 - Contraceptive pills for birth control, 1Pack
90660 - Influenza Virus Vaccine, Trivalent, Live
90656 - Fluzone PF, Fluarix PF, Flulaval Trivalent 2024-25 SYR -

Influenza Virus Vaccine, Trivalent (IIV3), Split virus, Preservative free, 0.5 ML dosage, for intramuscular use
90658 - Fluzone, Afluria Trivalent 2024-25 Vial Influenza Virus Vaccine, Trivalent (IIV3), Split Virus, 0.5 ML dosage, for Intramuscular use

FINANCIAL IMPACT:

Revenue generated by the requested fees will assist the Human Services Agency's Department of Public Health in covering associated clinical costs.

Attachments: [Fee Request- Management Team Approved 5.7.2025](#)

Announcements / Public Comments

Adjournment



Union County, NC

Staff Report

Union County Government
Center
500 North Main Street
Monroe, North Carolina
www.unioncountync.gov

File #: 25-308

Agenda Date: 5/12/2025

TITLE:

Consolidated Human Services Board (CHSB) Minutes

INFORMATION CONTACT:

Carla A. Sowell, Human Services Agency Department of Business Operations, Compliance
Coordinator 704.296.4808

ACTION REQUESTED:

Review and approve April 2025 CHSB minutes.

BACKGROUND:

The CHSB reviews and approves all minutes from previous meetings.

FINANCIAL IMPACT:

None

Meeting Minutes

Project: **Consolidated Human Services Board Meeting**

Subject: Minutes

Date: April 14, 2025

Location: 2330 Concord Ave Monroe, NC

Attendees: Heather Wyss, Brandi Smith, Susan Marciniak, Jill Jaynes, Wendy Sellers, Lisa Kerner, Noyes Harrigan, Amy Dickey

Ashley Lantz, Ashley Burts, Michelle Marciano, Traci Colley, Theresa Torres, Janet Payne, Jeff Broadway and Jackie Morgan

Absent: Gary Sides, Keshav Bhat, Craig Kolasch, Earl Ford

1. Welcome, Pledge and Invocation

Ms. Dickey called the meeting to order at 6:00 PM, leading the Pledge of Allegiance and invocation.

2. Approve Minutes

Motion to approve March 2025 minutes by Ms. Smith, seconded by Ms. Jaynes. All in favor.

3. Approve Agenda

Motion to approve the meeting agenda by Ms. Smith, seconded by Ms. Jaynes. All in favor.

4. Old Business

Consolidated Human Services Board Applications

Ms. Dickey reported that at the last meeting, three applications were reviewed, and interviews were conducted by her and Ms. Smith prior to this meeting. All applications are included in the packet. Upcoming reappointments include Dr. Bhat and Dr. Kolash, who will be invited to reapply.

For the Community-Based Representative seat, two candidates were considered: Eric Claflin and Jesse Granger. Ms. Smith noted that both are strong candidates representing different ends of the community spectrum. She appreciated Eric's background with paramedics and his potential for collaboration. Ms. Dickey also

valued Jesse's contributions and suggested she could support programs like Meals on Wheels.

Ms. Smith raised a potential conflict of interest, as Jesse is with the Council on Aging, which receives local government funding. Ms. Payne clarified that while the council does receive funds, legal confirmed it's not a conflict unless the board action directly involves the organization, in which case Jesse would need to recuse herself.

Ms. Dickey proposed sending both applications to the BOCC, but Dr. Broadway cautioned against deferring the decision entirely, emphasizing the board should make a recommendation. Ms. Payne added that both could be advanced with stated preferences.

Ms. Smith made a motion to recommend Mr. Claflin to the BOCC for approval seconded by Dr. Wyss; all were in favor.

Ms. Sellers then motioned, seconded by Ms. Smith, to recommend Dr. Matthew Childs; all were in favor.

Dr. Childs and Mr. Claflin's applications will be forwarded to the BOCC for approval.

5. Executive Director Report

Consolidated Human Services Board (CHSB) Rules of Procedure and Policies

Ms. Payne reviewed the Rules of Procedure and Policies on page 27. The only change is on page 30, correcting the number of members from 18 to 19 and updating the Community-Based Representatives from two to three, as approved by the BOCC but not reflected in the Rules. Ms. Dickey inquired about the timing of the change, and Ms. Payne agreed to follow up. On page 33, Ms. Payne proposed adding a section on meeting cancellations, as the current rules don't specify the process. Ms. Dickey asked about canceling meetings with pressing agenda items, and Ms. Payne responded that they would encourage attendance. Dr. Wyss motioned to approve the changes, seconded by Ms. Sellers, all in favor.

The next five CHSB policies were reviewed with no recommended changes. These policies are reviewed annually, as per the Policy Development Policy. Policies reviewed:

- Policy Development
- Rules Adoption
- Staff Development and Training
- Appeals
- Public Participation for Community Health Improvement and Strategic Plan



Ms. Smith asked for clarification on "reasonable" in the Rules Adoption Policy. Ms. Payne explained that the Board collaborates to determine reasonableness, with the BOCC or public able to challenge if necessary. Ms. Smith inquired if the BOCC has the final vote. Ms. Payne clarified that it depends on the vote. For example, fees will be discussed at next month's meeting. Staff recommend fees to the CHSB for approval, and after the board votes, it goes to the BOCC for final approval.

Ms. Dickey asked about increasing participation in the CHA surveys, which had 700 participants as of last week. Ms. Payne agreed to share the surveys with board members, both in Spanish and English, and electronically.

Ms. Jaynes motioned to approve all policies, seconded by Ms. Smith, all in favor.

6. Division Reports

Informational update on Tuberculosis and Measles

Ms. Burts provided an update (see PowerPoint). The first two slides covered 2024–2025 statistics: there were 12 active cases in 2024 and 8 so far this year. In 2024, there were 339 contacts requiring extensive follow-up, while there have been no new contacts in 2025. In response to Ms. Kerner's question, Ms. Burts explained the decrease is due to fewer school-related contacts this year. The one new case in 2025 is not infectious respiratory.

As of April 10, 2025, 712 measles cases have been reported in the U.S., with Tennessee and Georgia being the closest affected states. It is believed actual case numbers are higher. Ms. Smith confirmed that 97% of the cases are unvaccinated; 11% were hospitalized, mostly children under five. There have been two confirmed child deaths; a third is under investigation.

There are no reported cases in North Carolina. The CDC hosts informational webinars, which are shared with schools and providers. Local health teams are collaborating with environmental and child health consultants to distribute targeted information. Meagen Trull, Communicable Disease Supervisor, will attend a measles response exercise in Mecklenburg County. The EPI team plans to review the exercise and assess potential improvements.

Ms. Noyes asked if the 97% refers to unvaccinated and unknown cases. That is correct; it could also include under-vaccinated individuals—those who received only one dose, which is 90% effective.

Ms. Smith inquired about vaccine availability and policy. Per CDC guidelines, suspected measles cases should not receive the vaccine. Ms. Burts explained that suspected cases are not vaccinated, but close contacts should be vaccinated within days to reduce risk.

Dr. Wyss asked if the health department offers titer tests for older adults. Yes, they do. Ms. Dickey asked if the test is offered on a sliding scale. It is not.

Ms. Dickey noted prior discussions on County vaccination rates and mentioned House Bill 803 regarding immunization requirements. She is not advocating for or



against it but wanted members to be aware. Ms. Colley added that public health-related bills can be filed under various categories, such as development or construction. Ms. Dickey also referenced House Bill 807, concerning school breakfast and lunch, and encouraged members to review it.

7. Announcements/Public Comments

Ms. Payne noted that in November 2014, the CHSB had 17 positions. In January 2016, the board voted to add a community-based position, and in December 2016, another position was added. However, the rules were not updated accordingly, and the updated version is included in the packet. Ms. Dickey stated that by next month, they will know whether the two members with expiring terms plan to reapply. In the meantime, they may continue attending meetings.

Ms. Payne also reported progress on potential senior nutrition partnerships. A March meeting with Food for Families was promising, particularly for assisting seniors on the waitlist. Outreach to those on the waitlist is ongoing via calls and letters, with completion expected in two weeks. As of two weeks ago, the waitlist had dropped to 520 individuals, with about 30 new applicants monthly.

Ms. Lantz reported a 5% vacancy rate and noted interviews are scheduled for next week.

Dr. Broadaway announced a rabies clinic will be held Saturday in the back parking lot.

Motion to adjourn by Dr. Wyss; seconded by Ms. Smith; all in favor.
Ms. Dickey thanked everyone, and the meeting ended at 6:54pm.





Union County, NC

Staff Report

Union County Government
Center
500 North Main Street
Monroe, North Carolina
www.unioncountync.gov

File #: 25-303

Agenda Date: 5/12/2025

TITLE:

Consolidated Human Services Agency Board Application

INFORMATION CONTACT:

Janet Payne, Human Services Agency Executive Director 704.296.4348

ACTION REQUESTED:

Review application and consider making recommendations to the BOCC to reappoint Earl Ford for a second term, filling the Consumer of Human Services position.

BACKGROUND:

The Consolidated Human Services Board (CHSB), pursuant to N.C. general statute § 153A-77, is permitted to be composed of up to 25 members and composition of the board shall reasonably reflect the population makeup of the County. Currently, the Union County CHSB has 19 membership positions, each of which has a specific designation. 12 positions are filled and there are 7 vacancies including:

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- Other Person (1)
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- Optometrist (1)

As is the County's usual practice, the vacancies available for appointment were advertised by posting a notice on the County's website:

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FINANCIAL IMPACT:

\$200 per year per member (@\$20 meeting x 10 meetings a year)

APPLICATION TO SERVE ON APPOINTED BOARDS
COMMITTEES OR COMMISSIONS

BOARD: Union County Human Services Board

NAME: Earl Ford Jr.

ADDRESS: 1343 Brooksland Pl

TOWNSHIP: Waxhaw YEARS IN UNION COUNTY 10 years

TELEPHONE: (Home) 757-692-5240 (Office) _____ (Fax) _____

E-mail Address: earlfordjr32@gmail.com

EDUCATION:

List Schools, dates attended, Degrees obtained

Community College of the Air Force 1988, AAS Logistics Management
Southern Illinois University 1988, BS Industrial Technology
Florida Institute of Technology 1993, MS Management

OCCUPATION:

Past 3 and current employers and positions held

USAF Retired
Union County Human Services, Economic Services Div. Mgr. 2021 Retired
Va Beach Dept of Human Services, Div Manager 2015
Union County Public Schools Substitute Teacher

Please list civic and fraternal organizations in which you participate in Union County.

Human Services Board Member (Present)

Please explain your interest in serving on the above named board:

I deeply care about the economically deprived citizens in Union County and I want to continue to be a voice for their concerns.

Any other comments:

Have you ever been convicted of a felony?

No

Date:

April 25, 2025

Signature:

Earl Ford Jr.

Note: Information provided in this application is considered a matter of public record. It is, therefore, subject to disclosure and copying upon request pursuant to North Carolina's Public Records Law, N.C.G.S. §132-1, et seq.

Return to: Lynn G. West, Clerk to the Board, 500 N. Main Street, Room 921, Monroe, NC 28112 or Fax to 704-282-0121 or e-mail to Lynn.West@unioncountync.gov.

FOR OFFICE USE ONLY: Date Received: _____



Union County, NC

Staff Report

Union County Government
Center
500 North Main Street
Monroe, North Carolina
www.unioncountync.gov

File #: 25-299

Agenda Date: 5/12/2025

TITLE:

State of the County Health Report 2024

INFORMATION CONTACT:

Stephanie Starr, Human Services Agency Community Support and Outreach Director, 704-296-4302

ACTION REQUESTED:

Receive as information the State of the County Health Report 2024.

BACKGROUND:

The purpose of the State of the County Health (SOTCH) Report is to inform the community and stakeholders about the current health status, highlight health concerns and issues, and provide a starting point for community involvement in addressing identified health issues. The State of North Carolina requires each county to prepare a SOTCH Report in years when a Community Health Assessment (CHA) is not conducted. The most recent CHA for Union County was conducted in 2022.

FINANCIAL IMPACT:

None



2024 State of the County Health Report

Consolidated Human Services Board

5/12/25



UNIONCOUNTY
north carolina

State of the County Health Report (SOTCH)

- ✔ Completed annually in years between Community Health Assessments (CHA)
- ✔ Progress on Community Health Improvement Plans (CHIP)
- ✔ Morbidity and Mortality Changes
- ✔ Emerging Issues
- ✔ New Initiatives
- ✔ Paused Initiatives

Priority Area 1: Affordable Housing and Homelessness

Result Statement: All people in Union County have access to safe, healthy and affordable housing.

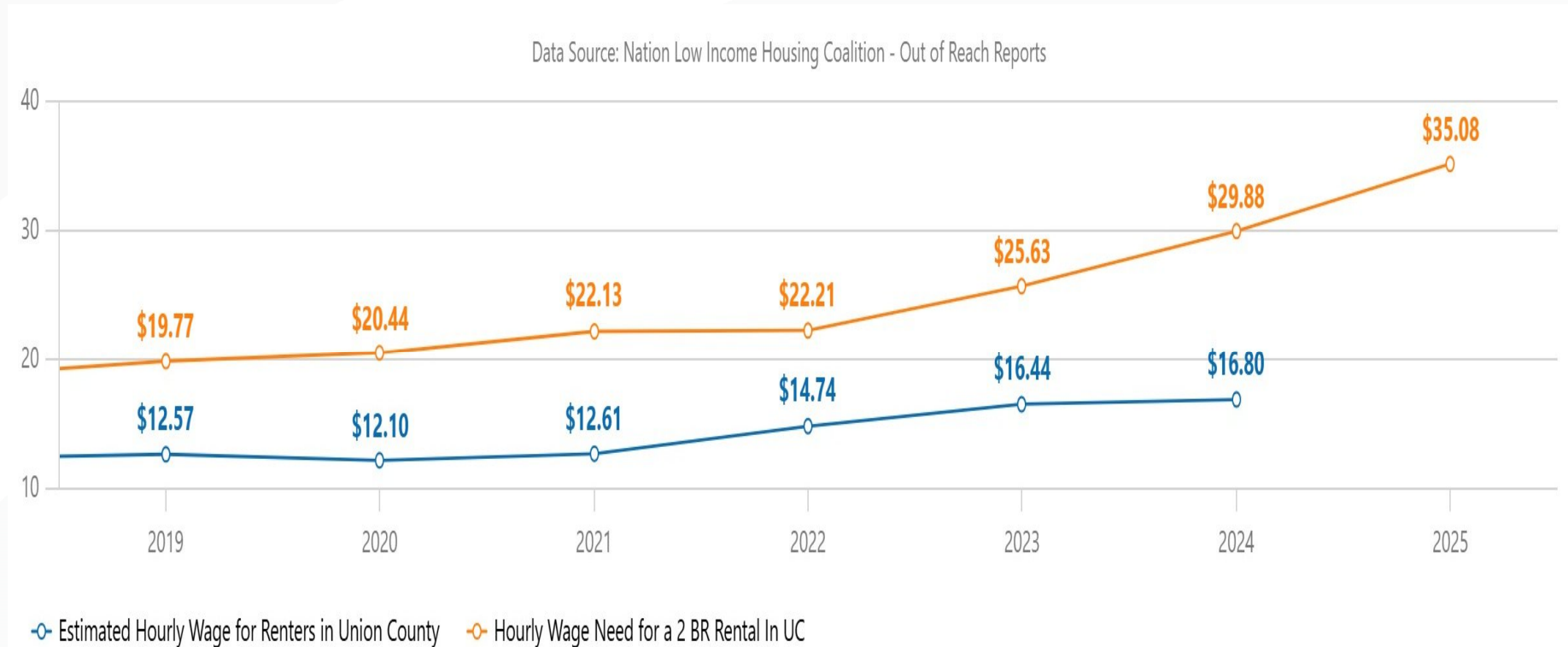
Strategy: THRIVE! Union is planning a Housing Symposium in early 2024. Community partners and decision-makers will be invited to attend the symposium to increase awareness of the issue and promote policy change.

Programs:

Rapid Rehousing

Emergency Shelter

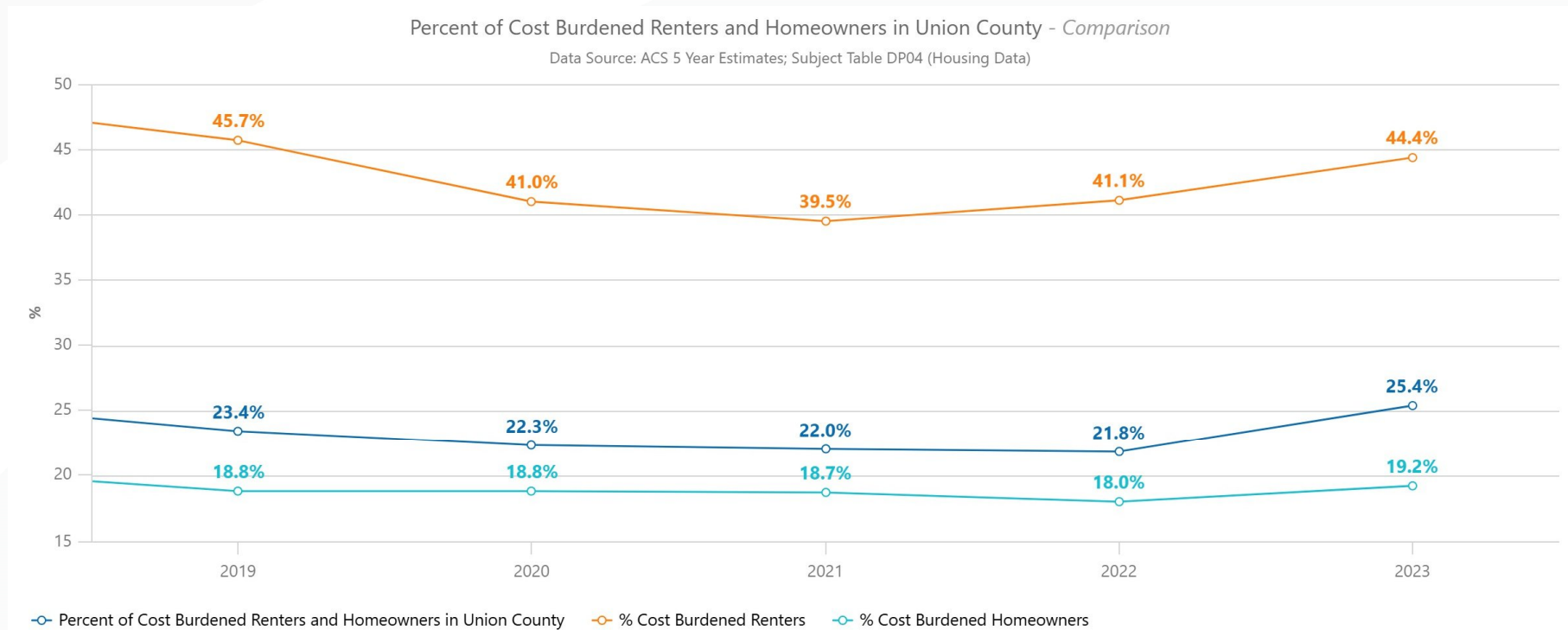
Indicator: Estimated Hourly Wage for Renters vs. Wage needed to pay for a 2-bedroom apartment in Union County



ClearImpact.com

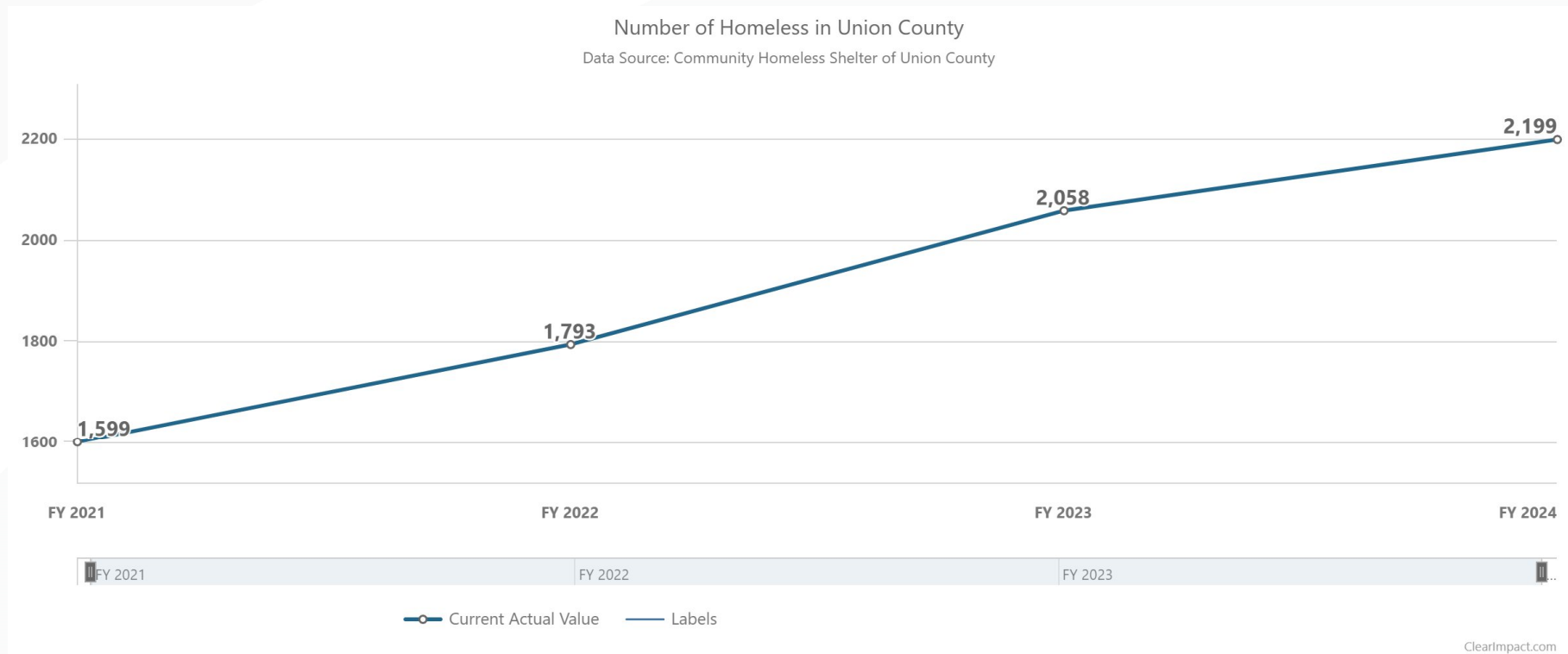
National Low-Income Housing Coalition

Affordable Housing Indicator: Percent of Cost-Burdened Renters and Homeowners in Union County



Source: U.S. Census Bureau, 2018-2022 American Community Survey 5-Year Estimates

Affordable Housing Indicator: Number of Homeless in Union County



Updates on Strategies and Programs

THRIVE! Union Hosted
Affordable Housing
and Homelessness
Symposium 3/6/24

Increase in demand
for housing
exceeding supply

Barriers include rising
rent, stagnant wages,
low vacancies, poor
credit, & income
instability

Shelter waitlist long

Increase in seniors
and families seeking
shelter

Priority Area 2: Mental Health

Result Statement: All Union County residents have equitable access to care and supportive services that promote resilience and mental wellness

Strategy 1: Mental Health Awareness and Education

Strategy 2: Develop a plan to improve the continuum of mental health providers in Union County

Programs:

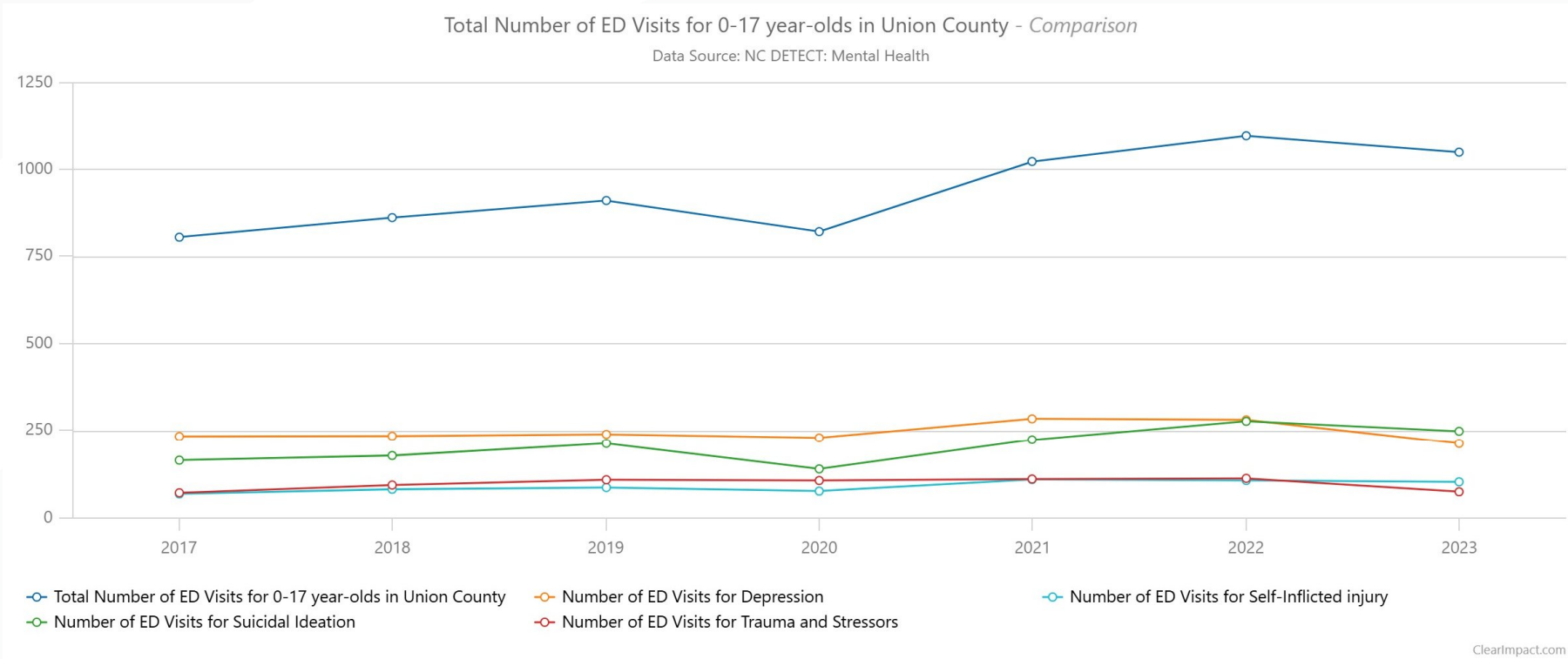
Behavior Health-Collaborative

Community Resiliency Model (CRM)

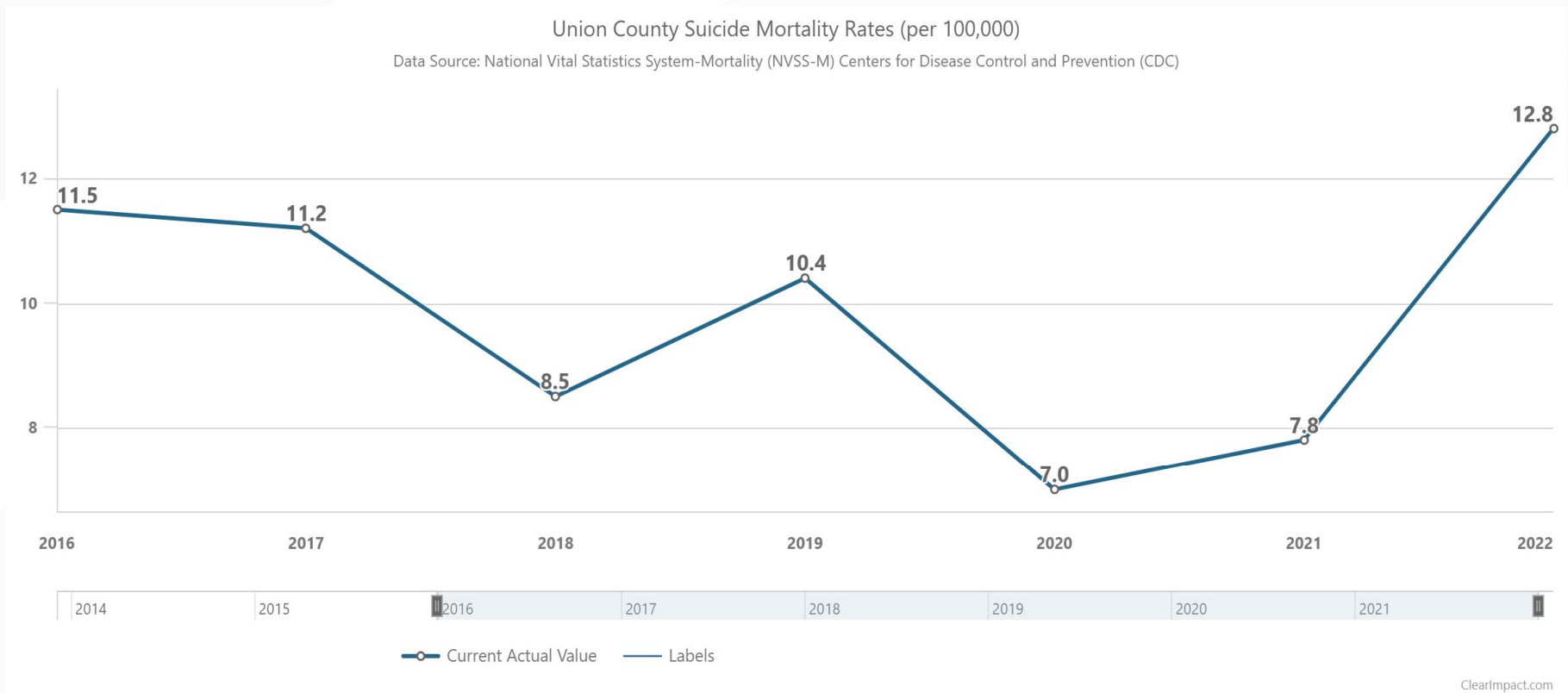
Mental Health First Aid (MHFA)

Question, Persuade, and Respond (QPR)

Mental Health Indicators: Number of ED Visits for 0-17 year-olds



Mental Health Indicators: Suicide Mortality Rates in Union County



Progress on Strategies and Programs

19% parental involvement and 10% increase in services provided by Behavioral Health Collaborative

77 residents participated in MHFA classes

The Mental Health Solutions Team met 5 times between 3/20-10/17 to discuss needs

Messaging on mental health awareness by UC and UCPS continued

Priority 3: Substance Use Disorder

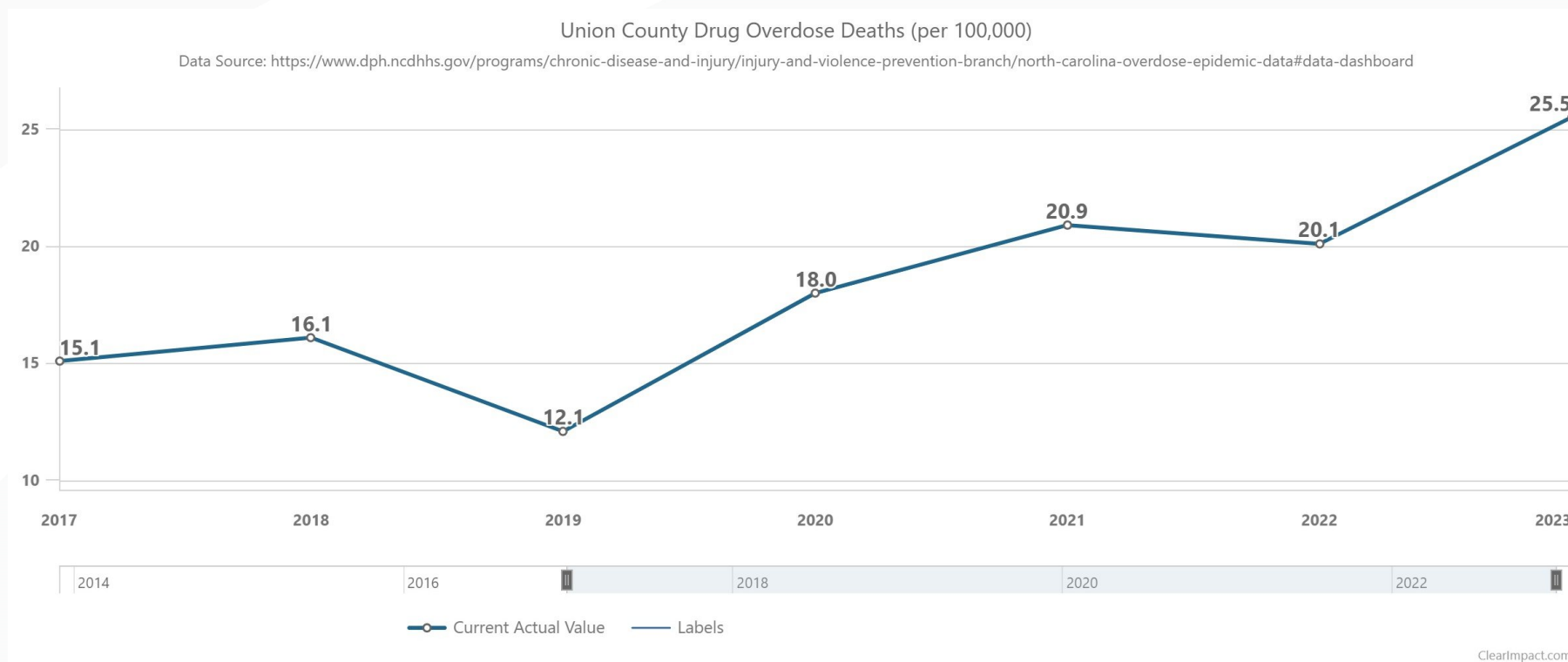
Result Statement: All residents of Union County have equitable access to education, prevention, treatment, and recovery services related to substance use disorder.

Strategies: Opioid Settlement Work Group and SUD Taskforce

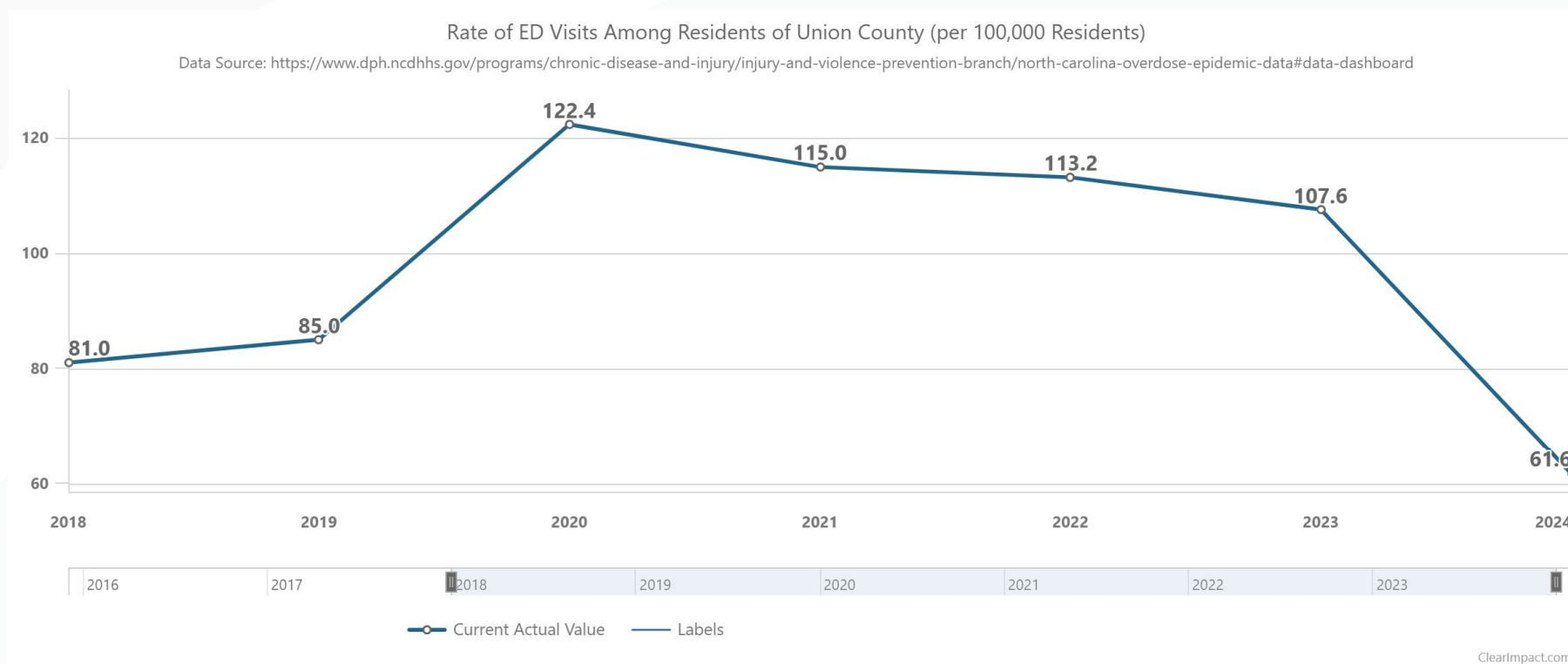
Programs:

- Cameron's House of Hope
- Family Treatment Court
- Ground 40 Recovery Center
- Naloxone Distribution
- New Beginnings MAT Program
- UCPS and SRO Program
- Tobacco Free Ordinance

Substance Use Disorder Indicators – Rate of Overdose Deaths



Substance Use Disorder Indicators: Number of Opioid ED Visits In Union Cty



Progress on Strategies

Distributed 976
Naloxone Kits

Wingate University and
Union county
developing data
dashboard with
settlement funded
partner information

Tobacco ordinance at
Union County Human
Services Agency
implemented

Family Treatment
Court started in
March and treated
over 40 participants

SUD Taskforce started in
May and met 4 times

Morbidity and Mortality Rates

- Increase in case rate for Chlamydia, whereas Gonorrhea rates have declined
- Fentanyl-positive deaths decreased in 2024 when compared to 2023
- The infant mortality disparity ratio trended upward during this reporting period from 4.82 to 5.31.

Emerging Issues

Avian Influenza

Clean Classrooms for Carolina Kids Program

Immunization Compliance

Per- and Polyfluoroalkyl Substances (PFAS) in Drinking Water

New Initiatives

- Child Health Behavioral Health
- Reach Out and Read
- Vaccines and Blood Pressure Checks for Child Care Center Workers
- Lead Safe Union County Campaign
- Private Drinking Water Wells Rehab and Repair Program
- Septic System Repair Program
- Union county Food Safety Forum
- Doxy PEP
- Fast-Track STI Screening Services

Paused Initiatives

Wastewater Monitoring
Initiative



Questions?





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90680 - Rota Virus Private
90691 - Typhoid Vaccine
90697 - Vaxelis (DTaP-IPV-Hib-HepB) Private
90698 - Pentacel Private
90700 - DTaP Private
90707 - MMR Private
90714 - TD Tenivac Private
90717 - Yellow fever vaccine
90732 - Pneumovax 23 Private
90734 - Menveo/Menactra Private
90744 - Hepatitis B Pediatric Private
90746 - Hepatitis B Adult Vaccine Private
90785 - Psychotherapy complex interactive
90832 - Psychotherapy w/patient 30 mins
90834 - Psychotherapy w/patient 45 minutes
90837 - Psychotherapy w/patient 60 minutes
90849 - Multiple Family Group Psychotherapy
97803 - Med nutrition, individual, subsequent vi....
99406 - Tobacco counsel 3 to 10 minutes
99407 - Tobacco counsel greater than 10 minutes
99408 - CRAFFT screening
99423 - Online digital evaluation and management....
99492 - 1ST Psychiatric Collab Care Management 1ST 70 minutes
99493 - SBSQ Psychiatric Collab Care Management 1st 60 minutes
99494 - 1ST/SBSQ Psychiatric Collab Care Management, each additional
D0145 - Fluoride Oral Evaluation, pt < 3yrs
90632 - VAQTA 50 units/ML syringe - Hepatitis A vaccine (HEPA), adult dosage, for intramuscular use
90633 - VAQTA 25 units/0.5 ML syringe - Hepatitis A vaccine (HEPA), pediatric/ adolescent dosage -
2 dose schedule, for intramuscular use
90744 - Hepatitis B vaccine, pediatric or adolescent dosage (3 does schedule)
J0561 - Penicillin G benzathine, per 100,000 units, injection (Bicillin L-A)
S4993 - Contraceptive pills for birth control, 1Pack

90660 - Influenza Virus Vaccine, Trivalent, Live

90656 - Fluzone PF, Fluarix PF, Flulaval Trivalent 2024-25 SYR - Influenza Virus Vaccine, Trivalent (IIV3), Split virus, Preservative free, 0.5 ML dosage, for intramuscular use

90658 - Fluzone, Afluria Trivalent 2024-25 Vial Influenza Virus Vaccine, Trivalent (IIV3), Split Virus, 0.5 ML dosage, for Intramuscular use

FINANCIAL IMPACT:

Revenue generated by the requested fees will assist the Human Services Agency's Department of Public Health in covering associated clinical costs.

Standard Process for "Setting Fees"

Task	Task
1	CPT/Service code is requested by staff completing the Service Code Request form. This form is forwarded to Nursing Director and reviewed at supervisor's meeting.
2	CPT/Service code or codes will be approved or declined by Public Health Director by signing the Service Code Request form.
3	Business Services billing supervisor will research codes for Medicaid and insurance reimbursement. Billing supervisor will complete Service Code & Fee form. This form/excel spreadsheet will list Medicaid and insurance reimbursements, including 30% increase.
4	Health Director reviews and makes adjustments to the Service Codes & Fees form/excel spreadsheet and presents to the Board of Health for approval
5	Health Director presents approved service codes to the Board of Commissioners for the final approval.
7	Information System Liaison I will add approved service codes to the Patient Care Management System and add to Department Fee Schedule. (copy of updated fee schedule sent to applicable staff)
8	Approved codes are presented to the staff during staff meetings or huddle.
9	Approved codes will be added to the encounter form and other applicable forms.

Responsible Person	Completed By/Date
Nursing Director	
Health Director	
Billing Supervisor	
Health Director	
Health Director	
Information Liaison I	
Billing Supervisor	
Clinical Staff	

CPT Code/Program	Explanation of Fee	Program Description	Fee S/N	Y	Recomm. Fee by Department (New Fee)	Medicaid (MCO) Reimbursement	Commercial Reimbursement	New Program Y/N	Existing Fee Y/N	Reason for Adjustment	Requested By	Effective Date	Financial Impact
9878-Thyroid Peroxidase (TPO) Antibodies	Used to diagnose hypothyroidism and Thyroiditis.		CH	Y	\$22.91	\$17.62	\$18.58	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
9888- Thyroglobulin Antibody & Thyroglobulin, MA or RIA	Used to monitor the presence of antibodies against iodinated thyroglobulin for recurrence and changes in tumor volume.		CH	Y	\$28.29	\$20.22	\$14.44	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
9922-Painless Vaccine, private	Meningococcal A+C and conjugation vaccine to adolescent children 11 and older. Can be used for the 1st and 2nd dose of Meningococcal A+C and for the 1st dose of Meningococcal A+C and conjugation vaccine. The vaccine is used for the prevention of invasive meningococcal disease. The vaccine is used for the prevention of invasive meningococcal disease.		BA, CH	Y	\$307.37	\$226.90	\$20.81	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
0320-Respiratory Panel, nasal swab	A test providing quantitative qualitative detection and identification of multiple respiratory viral and bacterial nucleic acids in a respiratory specimen obtained from individuals suspected of respiratory tract infection.		CH, MA	Y	\$541.81	\$475.78	\$270.91	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
2827-Dehydroepiandrosterone (DHEA) Saliva	A blood test measuring adrenal glands function, signs of acute adrenal dysfunction in women, menstrual irregularities, and early puberty in children.		CH	Y	\$36.75	\$28.27	\$20.30	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
9141-C Reactive Protein (CRP)	A blood test measuring serum protein indicating inflammation or infection. CRP levels increase when a body is fighting an infection or inflammation.		CH	Y	\$8.55	\$6.58	\$4.70	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
9274-Calcium Antibodies Profile, Immunoglobulin, IgA, IgG, IgM	A group of blood tests measuring levels of several antibodies. Used to help diagnose autoimmune disease. Calcium disease causes the body to produce the immune reaction from an autoimmune reaction to targeted protein found in certain cells and tissues.		CH	Y	\$15.37	\$11.82	\$6.44	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
9271-Calcium Antibodies Profile, Endomyxial Antibody, IgA	A group of blood tests measuring levels of several antibodies. Used to help diagnose autoimmune disease. Calcium disease causes the body to produce the immune reaction from an autoimmune reaction to targeted protein found in certain cells and tissues.		CH	Y	\$10.22	\$5.00	\$7.88	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
9258-Calcium Antibodies Profile, Glutamate decarboxylase antibody, IgA, IgG, IgM	A group of blood tests measuring levels of several antibodies. Used to help diagnose autoimmune disease. Calcium disease causes the body to produce the immune reaction from an autoimmune reaction to targeted protein found in certain cells and tissues.		CH	Y	\$14.26	\$10.97	\$7.49	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
98062- Allergen Profile- IgG (LabCorp 60353)	A blood test that measures immunoglobulin E antibodies specific to IgG protein. Used to help diagnose and monitor allergic reactions to eggs and important pediatric foods of experiencing an allergic response to eggs.		CH	Y	\$9.37	\$6.44	\$14.39	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.
0348- T1- Hydroxyprogesterone (OHP)	A blood test that measures the levels of progesterone in the blood. The test is used to diagnose congenital adrenal hyperplasia in children. The test is used to diagnose congenital adrenal hyperplasia in children. The test is used to diagnose congenital adrenal hyperplasia in children.		CH	Y	\$44.89	\$34.53	\$34.67	N	N	Uncover Public Health fee is required to add Fee for the Public Health fee schedule.	Ashley Butler, Nursing Director	01/01/2020	The addition of this fee will help increase Public Health revenue and offset the cost of providing associated clinical services.