


County of Jefferson
Office of the County Administrator



Historic Courthouse
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October 29, 2020

TO: Members of Health & Human Services
FROM: Robert F. Hagemann, III, County Administrator 
SUBJECT: Health & Human Services Committee Agenda

Please let this correspondence serve as notification that the Health & Human Services Committee will meet on *Wednesday, November 4, 2020 at 6:00 p.m.* in the Board of Legislators' Chambers. Following is a list of agenda items for the meeting:

Resolutions:

1. Authorizing Agreements for Provision of Services to Elderly of Jefferson County
2. Authorizing Agreement for Operation of the Office for the Aging's Nutrition Program
3. Amending the 2020 County Budget Relative to DSRIP Funding for Community Services Department
4. Re-Appointing Members to the Community Services Board
5. Authorizing Agreements for Provision of Mental Hygiene Services
6. Re-Appointing Members to the Public Health Service Health Services Advisory Board
7. Re-Appointing Members to the Public Health Service Professional Advisory Committee
8. Authorizing Agreement with NMS Labs for Toxicology Testing Services
9. Authorizing Agreement for Provision of X-Ray Services to the Medical Examiner Program
10. Authorizing Agreement for Chest X-Ray Services in Connection with the Public Health Service Tuberculosis Clinic
11. Authorizing the Contractual Appointment of an Emergency Medical Services (EMS) Course Sponsor Medical Director

12. Authorizing Agreement with Community Action Planning Council of Jefferson County, Inc. for the Provision of Nutritional Services by the Public Health Service
13. Authorizing Agreement with Hospice of Jefferson County for Registered Professional Nursing Services Rendered for the Public Health Service
14. Authorizing Agreement with Center for Disease Detection for Laboratory Services in Connection with the Public Health Service Diagnostic and Treatment Center
15. Authorizing Agreement with Lewis County for Provision of Diagnostic and Treatment Center Services
16. Authorizing Agreement with Carthage Area Hospital for Laboratory Services in Connection with the Public Health Service Diagnostic and Treatment Center
17. Authorizing Agreement for Provision of Certain Professional Services to the Medical Examiner's Office
18. Authorizing Agreement for Provision of Certain Professional Services to the Medical Examiner's Office
19. Amending the 2020 County Budget Relative to Public Health Department Accounts
20. Amending 2020 County Budget Relative to Additional Revenue From NYS Office of Temporary and Disability Assistance

Informational Items:

1. Monthly Departmental Reports:
 - Office for Aging
 - Community Services
 - Public Health
 - Social Services
 - Veterans Service Agency

If any Committee Member has inquiries regarding agenda items, please do not hesitate to contact me.

RFH:jdj

cc: Office for Aging
Community Services
Public Health
Social Services
Veterans Service Agency
County Attorney
County Treasurer

JEFFERSON COUNTY BOARD OF LEGISLATORS

Resolution No. _____

Authorizing Agreements for Provision of Services to Elderly of Jefferson County

By Legislator: _____

Whereas, The Jefferson County Office for the Aging works for the establishment and expansion of programs and services which assist older persons in the areas of their most urgent needs, and

Whereas, the Office for the Aging is eligible to receive State and Federal funds for the purpose of providing needed programs and services to elderly residents of Jefferson County, and

Whereas, the Office for the Aging and this Board of Legislators desire to contract for the provision of certain programs and services to the elderly.

Now, Therefore, Be It Resolved, That pursuant to Section 95-a of the General Municipal Law, Jefferson County enter into agreements with the below listed parties for provision of such programs and services to elderly residents of Jefferson County and for such consideration as follows:

Personal Care Services

Caregivers, for the period January 1, 2021 through December 31, 2023 at a blended rate of \$23.25 per hour for 2021, \$24.00 per hour for 2022 and \$24.75 per hour for 2023, for the provision of housekeeping/chore, personal care and caregiver respite services.

Seniors Helping Seniors for the period January 1 through December 31, 2021 at a blended hourly rate of \$24.25 per hour for the provision of housekeeping/chore and caregiver respite services.

U.S. Care Systems, Inc. for the period January 1 through December 31, 2021 at a blended hourly rate of \$25.03 per hour for the provision of housekeeping/chore, personal care and caregiver respite services.

and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreements on behalf of Jefferson County, subject to the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Operation of the Office for the Aging's Nutrition Program

By Legislator: _____

Whereas, The Office for the Aging is generally charged with the responsibility for the provision of community services to the elderly residents of Jefferson County and as a part thereof provides congregate and home delivered meals to elderly persons throughout the County, and

Whereas, The Nutrition Program is supported by the use of contractor(s) for the provision of goods and services, and

Whereas, By Resolution No. 65 of 2016, this Board of Legislators authorized an agreement with Prestige Services, Inc. for the provision of meals.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with the following party for the period January 1 through December 31, 2021 for the provision of the Office for the Aging's Elderly Nutrition Program for such consideration as is reflected below:

| <u>Contractor</u> | <u>Approx. No. of Meals to be Served Annually</u> | <u>Consideration to be paid by the County in 2021</u> |
|---|---|---|
| Prestige Services, Inc. 4 Enterprise Ave Clifton Park, NY 12065 | 140,600 | \$8.25/meal |

and be it further

Resolved, That the agreement authorized herein shall contain such other terms and conditions as are required in order to achieve compliance with Sections 6654.10 and 6654.11 of Title 9 of NYCRR and any other applicable Federal and State statute, rule and regulation, and be it further

Resolved, That the Chairman of the Board of Legislators is hereby authorized and directed to execute said agreement on behalf of Jefferson County, subject to approval of the County Attorney as to form and content.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2020 County Budget Relative to DSRIP Funding
for Community Services Department

By Legislator: _____

Whereas, By Resolution No. 75 of 2016 Jefferson County entered into a contract with North Country Initiative for the Delivery System Reform Incentive Payment Program (DSRIP), and

Whereas, By Resolutions No. 84, 115 and 189 of 2017, No. 104, 200 and 237 of 2018, and No. 66, 101 and 223 of 2019, 63 and No. 135 of 2020 DSRIP funding for Community Services was received and allocated for training, and

Whereas, A DSRIP Year 5 high performance incentive payment #2 has been received in the amount of \$122.25 and needs to be recognized and allocated for training.

Now, Therefore, Be It Resolved, That the 2020 County Budget is hereby amended as follows:

Increase:

| | | |
|----------------|------------------------|----------|
| Revenue | | |
| 01431000 93488 | State Aid Other Health | \$122.25 |
| Expenditure | | |
| 01431000 04613 | Training | \$122.25 |

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Re-Appointing Members to the Community Services Board

By Legislator: _____

Resolved, That pursuant to Section 41.11 of the Mental Hygiene Law the following individuals are hereby appointed as members of the Jefferson County Community Services Board and the designated sub-committee thereof for terms to expire as indicated below:

| <u>Member</u> | <u>Sub-Committee</u> | <u>Term to Expire</u> |
|-------------------|---------------------------|-----------------------|
| Aileen Martin | Mental Health | 12/31/2022 |
| Gerald Moore | Alcohol & Substance Abuse | 12/31/2022 |
| Joey Marie Horton | Alcohol & Substance Abuse | 12/31/2022 |
| Lynn Pietroski | Alcohol & Substance Abuse | 12/31/2022 |

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20 ____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreements for Provision of Mental Hygiene Services

By Legislator: _____

Whereas, New York State Mental Hygiene Law provides that the Jefferson County Community Services Board may contract for the provision of various mental hygiene services to the public with the approval of the Board of Legislators.

Now, Therefore, Be It Resolved, That, pursuant to Section 41.13 of the Mental Hygiene Law, this Board does hereby grant its approval for the Community Services Board to enter into agreements with the following not-for-profit organizations for provision of the referenced mental hygiene services during calendar year 2020 for consideration as reflected herein:

| <u>Agency</u> | <u>Consideration to be Received from the County</u> | <u>State Aid</u> | <u>County Aid</u> |
|--|---|------------------|-------------------|
| Alcohol/Substance Abuse Council DBA Pivot | | | |
| Recovery Center | \$350,000 | \$350,000 | \$ 0 |
| Prevention Services & Stop DWI | \$813,448 | \$716,298 | \$ 53,150 |
| | | | DWI \$ 44,000 |
| Carthage Area Hospital | | | |
| Behavioral Health Clinic | \$ 52,418 | \$ 52,418 | \$ 0 |
| Children's Home of Jefferson County | | | |
| Family Respite | \$ 46,692 | \$ 40,588 | \$ 6,104 |
| Mobile Crisis Outreach | \$148,115 | \$128,851 | \$ 19,264 |
| Prevention Program | \$ 28,763 | \$ 24,885 | \$ 3,878 |
| Health Home Management/SPOA/SPOE | \$335,766 | \$335,766 | \$ 0 |
| Non-Medicaid Care Coordination Mgrs - Sch. Liaison | \$201,132 | \$201,132 | \$ 0 |
| Community Outpatient Clinic | \$ 86,017 | \$ 38,642 | \$ 47,375 |
| Records Management | \$ 10,000 | \$ 0 | \$ 10,000 |
| Forensic Jail Program | \$134,120 | \$133,236 | \$ 884 |
| Therapeutic Crisis Respite Program | \$650,000 | \$650,000 | \$ 0 |
| Credo Community Center for the Treatment of Addictions | | | |
| Men's Halfway House | \$237,135 | \$237,135 | \$ 0 |
| Vocational/Education Program | \$116,737 | \$116,737 | \$ 0 |
| Chemical Dependence Clinic | \$436,852 | \$382,156 | \$ 54,696 |
| Community Res. (Aftercare) | \$236,525 | \$197,525 | \$ 39,000 |
| Case Mgmt/Supportive Housing | \$ 92,099 | \$ 92,099 | \$ 0 |

| | | | |
|---|-----------|-----------|-----------|
| Women's Drug Free Residential | \$539,612 | \$539,612 | \$ 0 |
| Res. Rehab. Svcs. For Youth | \$ 89,591 | \$ 89,591 | \$ 0 |
| Opiate Treatment Program | \$301,248 | \$301,248 | \$ 0 |
| Case Management/Vivitrol | \$ 20,000 | \$ 20,000 | \$ 0 |
| Mental Health Outpatient Clinic | \$ 2,688 | \$ 2,688 | \$ 0 |
| Jail Base Program | \$ 60,000 | \$ 60,000 | \$ 0 |
| The ARC Jefferson-St. Lawrence | | | |
| Employment Programs | \$284,695 | \$274,821 | \$ 9,874 |
| Ongoing Integrated Employment | \$ 84,644 | \$ 84,644 | \$ 0 |
| Family Support Services | \$ 5,000 | \$ 0 | \$ 5,000 |
| Mental Health Assn. | | | |
| Psychosocial/Drop-In Program | \$281,163 | \$262,417 | \$ 18,746 |
| Adult Respite Program | \$ 38,821 | \$ 33,473 | \$ 5,348 |
| PFC Joseph Dwyer Peer Support | \$ 92,500 | \$ 92,500 | \$ 0 |
| Northern Regional Center for Independent Living | | | |
| Family Support Services | \$260,297 | \$252,104 | \$ 8,193 |
| Mental Health Advocacy | \$ 43,626 | \$ 43,626 | \$ 0 |
| North Country Transitional Living Services DBA | | | |
| Transitional Living Services of NNY | | | |
| Supported Housing | \$413,408 | \$403,964 | \$ 9,444 |
| Behavioral Health & Wellness Clinic | \$ 12,096 | \$ 12,096 | \$ 0 |
| Homeless/MICA/Case Mgmt | \$112,368 | \$112,368 | \$ 0 |
| River Hospital | | | |
| PFC Joseph Dwyer Peer Support | \$ 92,500 | \$ 92,500 | \$ 0 |
| Community Wellness Outpatient | \$ 34,945 | \$ 0 | \$ 34,945 |
| Samaritan Medical Center | | | |
| Outpatient Children's Services | \$ 80,642 | \$ 80,642 | \$ 0 |

and be it further

Resolved, That this Board further grants approval for the Community Services Board to enter into such agreements with the State of New York as may be required to obtain the State Aid funding outlined herein.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Re-Appointing Members to Jefferson County Public Health Service
Health Services Advisory Board

By Legislator: _____

Resolved, That the following individuals be and are hereby re-appointed as members of the Jefferson County Health Services Advisory Board for terms to expire as indicated below:

| <u>Members</u> | <u>Term to Expire</u> |
|----------------------|-----------------------|
| Stephanie A. Graf | 12/31/2023 |
| Maja Lundborg-Gray | 12/31/2023 |
| Anita Seefried-Brown | 12/31/2023 |

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Re-Appointing Members to Jefferson County Public Health Service
Professional Advisory Committee

By Legislator: _____

Resolved, That the following individuals be and are hereby re-appointed as members of the Professional Advisory Committee for terms to expire as indicated below:

| <u>Members</u> | <u>Term to Expire</u> |
|--------------------|-----------------------|
| Louse J. Haraczka | 12/31/2024 |
| Diana K. Woodhouse | 12/31/2024 |

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY PUBLIC HEALTH SERVICE
ADVISORY BOARD/COMMITTEE SUMMARY

I. HEALTH SERVICES ADVISORY BOARD

As per New York State Public Health Law Article 3, Section 357, in a county where the legislative body constitutes the Board of Health, a Health Services Advisory Board consisting of nine members shall be provided. Two of the appointed members shall be licensed physicians, while the remaining are known as public members and are selected on the basis of interest and knowledge regarding the health needs, resources and facilities of the community.

The Health Services Advisory Board counsels the Director of Public Health with respect to the discharge of powers, responsibilities and duties.

Meetings are held only if needed to address public health issues. The last meeting was held 06/14/10.

II. PROFESSIONAL ADVISORY COMMITTEE

As per NYCRR Title 10 Health Chapter V, Section 763.11 (13), the governing authority shall appoint a group of professional personnel which includes one or more physicians, registered professional nurses and representatives of the professional therapeutic services provided by the agency to perform the activities required. The findings and recommendations shall be integrated into the agency's quality assessment and assurance program. At least annually, an evaluation of the agency's program must be completed. Functions include reviewing policies pertaining to the delivery of health care and services; making recommendations on professional issues including the adequacy and appropriateness of services based on an assessment of health care resources in the community, patients' needs, available reimbursement mechanisms and the availability of qualified personnel; assisting in maintaining liaison with other health care providers and reviewing clinical records.

Quality Assurance, as a subcommittee, integrates the review activities of all home health care services provided by the agency to enhance the quality of care and treatment provided. The subcommittee reviews a sample of both active and closed clinical records to determine whether established policies are followed in furnishing services directly or under arrangement. Recommendations are made should needs be identified or if further follow-up services are required.

Required quarterly meetings are in March, June, September and December on the second Wednesday of the month at the Public Health Facility.

JEFFERSON COUNTY BOARD OF LEGISLATORS

Resolution No. _____

Authorizing Agreement with NMS Labs for Toxicology Testing Services

By Legislator: _____

Whereas, The Public Health Service have established contracts for the provision of forensic toxicology laboratory testing services for toxicology blood, urine and organ analyses to the Jefferson County Medical Examiner Program, and

Whereas, By Resolution No. 223 of 2017, this Board of Legislators authorized an agreement with NMS Labs.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with the NMS Labs (National Medical Services) to provide the following toxicology services for the period of 01/01/2021 through 12/31/2022: Toxicology Blood - \$258 per test and Toxicology Urine, Tissue, Vitreous, Bile Fluid or Gastric Contents per fee schedule in effect as of date of Agreement, and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute such agreement on behalf of Jefferson County with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20 ____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Provision of X-Ray Services
to the Medical Examiner Program

By Legislator: _____

Whereas, It is necessary for the Medical Examiner to have x-ray services available in connection with the medico-legal investigation of deaths, and

Whereas, By Resolution No. 221 of 2015, this Board of Legislators authorized an agreement with Northern Radiology Associates, P.C.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with Northern Radiology Associates, P.C. for the provision of x-ray reading services to the Medical Examiner Program for the period January 1, 2021 through December 31, 2025, at a cost per x-ray as per New York State compensation rates, and charges may be revised on an annual basis effective for September and the following year, and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County, with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Chest X-Ray Services in Connection
with the Public Health Service Tuberculosis Clinic

By Legislator: _____

Whereas, Jefferson County contracts with a provider to render x-ray services to persons suspected of, or having tuberculosis as referred by the Public Health Service, and

Whereas, By Resolution No. 220 of 2015, this Board of Legislators authorized an agreement with Northern Radiology Associates, P.C.

Now, Therefore, Be It Resolved, pursuant to Article 22 of the Public Health Law, the County of Jefferson and the Public Health Service shall renew an agreement with Northern Radiology Associates, P.C. for the provision of chest x-ray services for the period January 1, 2021 through December 31, 2025, with charges at the appropriate Medicaid rate in effect at the time the services are rendered, and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County, with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing the Contractual Appointment of an Emergency Medical
Services (EMS) Course Sponsor Medical Director

By Legislator: _____

Whereas, Jefferson County, as a New York State Department of Health Emergency Medical Services Course Sponsor, must employ or contract with a Course Sponsor Medical Director, and

Whereas, The Medical Director responsibilities include standard of care compliance, protocol and course development and the clarification that EMS students have fulfilled the course requirements offered by Jefferson County, and

Whereas, By Resolution No. 242 of 2018, this Board of Legislators authorized an agreement with Dr. Matthew Maynard.

Now, Therefore, Be It Resolved, That Jefferson County hereby appoint and authorize a contract with Dr. Matthew Maynard to serve as the EMS Course Sponsor Medical Director for the period of January 1, 2021 through December 31, 2022, at a rate of \$50.00 per hour, not to exceed \$5,000 per year, to fulfill responsibilities as established by the New York State Department of Health and the Public Health Service, and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County, with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with Community Action Planning Council of Jefferson County,
Inc. for the Provision of Nutritional Services by the Public Health Service

By Legislator: _____

Whereas, The Community Action Planning Council (CAPC) of Jefferson County, Inc. is required to have a Registered Dietitian assess the nutritional status and special needs of children, perform menu-planning, review menus as well as review of final comments from the Nutrition Self-Assessment process every May, and

Whereas, By Resolution No. 241 of 2018, this Board of Legislators authorized an agreement with CAPC.

Now, Therefore, Be it Resolved, That Jefferson County enter into an agreement with The CAPC of Jefferson County, Inc. for nutritional services to be provided by Jefferson County Public Health Service's Registered Dietitian at \$60.00 per direct service hour. One unit of service will equal one hour to time spent directly providing the required services, for the period January 1, 2021 through December 31, 2022, and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County, subject to the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with Hospice of Jefferson County for
Registered Professional Nursing Services Rendered for the Public Health Service

By Legislator: _____

Whereas, The Jefferson County Public Health Service provides various services to its clients, the cost of which may be coverable and payable by Medicare, Medicaid and other third party payers, and

Whereas, There are instances where it is necessary for Jefferson County to participate in the delivery of services to beneficiaries, and

Whereas, Federal and State regulations require execution of a written contract with Hospice of Jefferson County in order for Jefferson County to receive direct payment from all payers for care provided, and

Whereas, By Resolution No. 220 of 2017, this Board of Legislators authorized an agreement with Hospice of Jefferson County for delivery of services, including the provision that established or negotiated fees or charges for professional services shall be paid by the Jefferson County Public Health Service; which will then bill third party insurances for reimbursement as appropriate.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with Hospice of Jefferson County for Registered Professional Nursing services to be delivered to Public Health Service clients at the rates listed below during the period January 1, 2021, through December 31, 2022.

| <u>Service</u> | <u>Rate</u> |
|--|-----------------|
| Registered Professional Nurse – Initial Evaluation | \$185 per visit |
| Registered Professional Nurse – Revisit | \$105 per visit |

and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with the Center for Disease Detection for Laboratory Services
in Connection with the Public Health Service Diagnostic and Treatment Center

By Legislator: _____

Whereas, Certain laboratory tests are required in the operation of the Jefferson County Public Health Service Clinics, and

Whereas, By Resolution No. 120 of 2016, this Board of Legislators authorized an agreement with the Center for Disease Detection.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with the Center for Disease Detection to provide the following laboratory testing services to the Jefferson County Public Health Service at the rates listed below for the period January 1, 2021 through December 31, 2025.

| <u>Test</u> | <u>Charge</u> |
|---------------------------------------|-------------------|
| Gonorrhea Culture (G.C.) | \$2.50 per test |
| Amplified CT/GC – Rectal Swab | \$15.50 per combo |
| Amplified CT/GC – Throat Swab | \$15.50 per combo |
| Syphilis Serologic Testing | \$10.00 per test |
| HCV RNA Quantitative, PCR | \$125.00 per test |
| Quantiferon-TB Gold-In Tube (QFT-GIT) | \$95 per test |
| Trichomonas Vaginalis – Female | \$45 per test |
| Trichomonas Vaginalis – Male | \$45 per test |

and, be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute such agreement on behalf of Jefferson County with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with Lewis County for Provision of
Diagnostic and Treatment Center Services

By Legislator: _____

Whereas, Provisions of the NYS Department of Health Municipal Public Health Service Plan require that the Lewis County Public Health Agency have a system to minimize the incidence of sexually transmitted diseases, and

Whereas, The current level of such diseases in said County is insufficient to warrant the establishment of a Lewis County STD/HIV clinic, and

Whereas, By Resolution No. 119 of 2017, this Board of Legislators authorized an agreement with Lewis County.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with Lewis County for the provision by the Jefferson County Public Health Service for sexually transmitted disease clinic services to residents of Lewis County for the period of January 1, 2021 through December 31, 2022, for the following services:

| <u>Service</u> | <u>Rate</u> |
|--------------------------------|---|
| Clinic visit | \$55 per visit |
| Syphilis Serologic Testing | \$10 per test |
| Trichomonas Vaginalis – Female | \$45 per test |
| Trichomonas Vaginalis – Male | \$45 per test |
| Amplified CT/GC – Rectal Swab | \$15.50 per combo |
| Amplified CT/CG – Throat Swab | \$15.50 per combo |
| Gonorrhea culture testing | \$2.50 per test through Center for for Disease Detection or \$20 per test by Carthage Area Hospital |

said amounts to be paid by Lewis County. Laboratory rates may be revised if the prevailing charges change during the term of this agreement, and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County, with approval of the County Attorney as to form and content.

Seconded by Legislator: _____

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement with Carthage Area Hospital for Laboratory Services in
Connection with the Public Health Service Diagnostic and Treatment Center

By Legislator: _____

Whereas, Certain laboratory tests are required in the operation of the Jefferson County Public Health Service Clinics, and

Whereas, By Resolution No. 219 of 2017, this Board of Legislators authorized an agreement with Carthage Area Hospital.

Now, Therefore, Be It Resolved, That Jefferson County renew an agreement with Carthage Area Hospital, to provide the following laboratory testing services to the Jefferson County Public Health Service at the rates listed below for the period January 1, 2021 through December 31, 2023.

| <u>Test</u> | <u>Charge</u> |
|------------------------|------------------|
| Gonorrhea Culture | \$30.00 per test |
| Liver Profile | \$60.00 per test |
| Hepatitis B Antibody | \$43.00 per test |
| Induced Sputum Culture | \$40.00 per test |
| Sputum Culture | \$40.00 per test |

and, be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute such agreements on behalf of Jefferson County with the approval of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

**Jefferson County Public Health Service
2021 Contract Renewals/Additions**

Samaritan Summit Village

- Renew 01/01/2018 – 12/31/2020 contract for disciplines of care being provided by the Public Health Service to ALP residents contract for 01/01/2021 - 12/31/2022. Promulgated Medicaid reimbursement rates of the Public Health Service shall be paid by Samaritan Summit Village. No resolution is required as is ongoing.

Meadowbrook Terrace, Inc.

- Renew 01/01/2018 0 12/31/2020 contract for disciplines of care being provided by the Public Health Service to ALP residents contract for 01/01/2021 – 12/31/2022. Promulgated Medicaid reimbursement rates of the Public Health Service shall be paid by Meadowbrook Terrace, Inc. No resolution is required as is ongoing.

National Medical Services (NMS) Lab

- Renew 01/01/2018 – 12/31/2020 contract for forensic toxicology services the Medical Examiner Program for 01/01/2021 – 12/31/2022. The anticipated average annual usage is at a cost of approximately \$30,960 (120 autopsies).

Northern Radiology Associates

- Medical Examiner X-Rays
 - Renew 01/01/2016 – 12/31/2020 contract for 01/01/2021 – 12/31/2025 with charges at New York State compensation rates.
- Tuberculosis Clinic (Chest X-Rays)
 - Renew 01/01/2016 – 12/31/2020 contract for 01/01/2021 – 12/31/2025 with charges at New York State Medicaid rates. Project approximately five x-rays at a cost of \$10 for a total of \$50.

Emergency Medical Services (EMS) Course Sponsor Medical Director

- Renew 01/01/2018 – 12/31/2020 contract for EMS Course Sponsor Medical Director with Dr. Matthew Maynard for 01/01/2021 – 12/31/2022 at the same rate of \$50.00 per hour not to exceed \$5,000 per year.

Community Action Planning Council (CAPC)

- Renew 01/01/2019 – 12/31/2020 contract for Registered Dietitian to provide nutritional services through JCPHS for 01/01/2021 - 12/31/2022 at the same rate of \$60.00 per direct service hour paid to JCPHS by CAPC.

Hospice of Jefferson County

- Renew 01/01/2018 – 12/31/2020 registered professional nursing service contract for 01/01/2021 – 12/31/2022 at an increased per visit rate of \$185 (from \$130) for an evaluation and \$105 (from \$90) for revisit to enhance pain management interventions of PHS clients. This is a very specialized professional knowledge.

Centers for Disease Detection

- Renew the 01/01/2016 – 12/30/2020 agreement for 01/01/2021 – 12/31/2025 at the following rates:
 - Gonorrhea Cultures - \$2.50 per test
 - Amplified CT/GC Rectal Swab - \$15.50 per combo
 - Amplified CT/GC Throat Swab - \$15.50 per combo
 - Syphilis Serologic Testing - \$10.00 per test
 - HCV RNA Quantitative, PCR - \$125.00 per test
 - Quantiferon-TB Gold-In Tube (QFT-GIT) - \$95.00 per test
 - Trichomonas Vaginalis – Female - \$45.00 per test
 - Trichomonas Vaginalis – Male - \$45.00 per test

Lewis County Public Health Agency

- Renew 01/01/2018 – 12/31/2020 contract for 01/01/2021 – 12/31/2022 at the same rates of:
 - STD/HIV Diagnostic and Treatment Center Clinic \$55/visit
 - Gonorrhea Culture through Center for Disease Detection for \$2.50/test; Carthage Area Hospital will be used as a back-up at a cost of \$20/test.
- Average per year is about four clinic visits and four gonorrhea tests. PHS receives about \$230 in revenue and passes through the test costs.

Carthage Area Hospital Laboratory Services

- Renew 01/01/2018 – 12/31/2020 contract for laboratory services for 01/01/2021 – 12/31/2023 at the following rates:
 - Gonorrhea Culture \$30 (increased from \$22)
 - Liver Profile \$60 (increased from \$33)
 - Hepatitis B Antibody \$43
 - Induced Sputum Culture \$40 (increased from \$20), and
 - Sputum Culture \$40 (increased from \$20)

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Provision of Certain Professional Services
to the Medical Examiner's Office

By Legislator: _____

Whereas, It is desirable to have Pathologists/Forensic Pathologists available for backup to support the operation of the Jefferson County Medical Examiner (M.E.) Program, particularly during those times when the Jefferson County M.E. is out of the area on vacation, on medical leave or other unexpected absences, and in instances involving complicated deaths.

Now, Therefore, Be It Resolved, That Jefferson County enter into agreements with Pathologists/Forensic Pathologists on an as needed provision of professional autopsy and testing services at the rates listed below for the period of November 11, 2020 through December 31, 2023

| <u>Pathologist</u> | <u>Charge</u> |
|-------------------------------------|---------------|
| Dr. Dianne Vertes | \$ 900 |
| Twin Tiers Pathology Associates, PC | \$ 950 |
| Forensic Medical Services | \$1,500 |

and be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County subject to the review of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
County of Jefferson) ss.:

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY PUBLIC HEALTH SERVICE
Briefing Summary
Contracting for Medical Examiner Autopsy Coverage

Overview: A medical examiner is a medically qualified physician whose duty is to investigate deaths and injuries that occur under unusual or suspicious circumstances, and to perform post-mortem examinations. The Jefferson County Medical Examiner Office investigates deaths that fall into categories as outlined in County Law Article 17A, namely instances where the public interest is served by explaining cause, manner and mechanism of death. A medical examiner has jurisdiction and authority to investigate the death of every person dying within his county, or whose body is found within the county, which is or appears to be:

- A violent death, whether by criminal violence, suicide or casualty;
- A death caused by unlawful act or criminal neglect;
- A death occurring in a suspicious, unusual or unexplained manner;
- A death caused by suspected criminal abortion;
- A death while unattended by a physician, so far as can be discovered, or where no physician is able to certify the cause of death as provided in the public health law and in form as prescribed by the commissioner of health can be found; and
- A death of a person confined in a public institution other than a hospital, infirmary or nursing home.

The Medical Examiner makes inquiries regarding all unnatural deaths within the County. An unnatural death can be defined as any death that is not the direct result of a natural, medically recognized disease process. Information is then provided, as appropriate, to individuals and other government agencies.

In 2018, the Medical Examiner's office had a total of 119 cases and 89 autopsies. In 2019, there were 151 cases and 112 autopsies. In 2020, an estimated 165 cases and 112 autopsies are to be completed. A total of 169 cases and 118 autopsies are projected for 2021.

The Jefferson County Medical Examiner's Office (JCME) currently has a contract with Onondaga County to provide autopsy coverage. However on 10/14/20, the Onondaga County Medical Examiner's Office (OCME) informed the JCME, that they would no longer be able to provide autopsy coverage until further notice due to staffing issues. Increases seen in Medical Examiner work can be attributed to the continual rise in overdose deaths in 2019 and 2020 as well as the implications of the current COVID pandemic. In addition to the rise in cases and autopsies, the M.E.'s earned leave time has to be accounted for - vacations and occasional sick leave. Allowing for the M.E.'s leave time, plus the anticipated higher numbers of cases/autopsies and the sudden discontinuance of the OCME autopsy coverage, it becomes necessary to find other entities to provide coverage.

Request: To establish an agreement between the Jefferson County Public Health Service, Pathologist and the facility they perform the autopsy.

- Dr. Dianne Vertes and UHS Wilson Medical Center in Johnson City, NY;
- Twin Tiers Pathology Associates, PC (Pathologists, Dr. James Terzian and Dr. Robert Stoppacher) and Ascension Lourdes Hospital in Binghamton, NY; and
- Forensic Medical Services (Pathologist, Dr. Michael Sikirica) and Albany Medical Center in Albany, N

for backup Medical Examiner services. These entities are assuming Medical Examiner work for other counties as well, so their availability is dependent on their current workload. Therefore, it becomes necessary to have contractual relationships with several entities. This will also be an asset for the future with ever increasing limited Pathologist resources.

Need: County Administration knowledge and Health and Human Services Committee approval to sponsor a Board of Legislators Resolution allowing the Public Health department to contract with the above listed entities.

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Authorizing Agreement for Provision of Certain Professional Services
to the Medical Examiner's Office

By Legislator: _____

Whereas, It is desirable to have Pathologists/Forensic Pathologists available for backup to support the operation of the Jefferson County Medical Examiner (M.E.) Program, particularly during those times when the Jefferson County M.E. is out of the area on vacation, on medical leave or other unexpected absences, and in instances involving complicated deaths, and

Whereas, Pathologists/Forensic Pathologists perform autopsies and testing at facilities where they have current privileges.

Now, Therefore, Be It Resolved, That Jefferson County enter into agreements with facilities where Pathologists/Forensic Pathologists perform the professional autopsy and testing services at the rates listed below for the period of November 11, 2020 through December 31, 2023

| <u>Facility</u> | <u>Charge</u> |
|----------------------------|---------------|
| UHS Wilson Medical Center | \$ 580 |
| Ascension Lourdes Hospital | \$ 400 |
| Albany Medical Services | \$2,000 |

and, be it further

Resolved, That the Chairman of the Board is hereby authorized and directed to execute said agreement on behalf of Jefferson County subject to the review of the County Attorney as to form and content.

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending the 2020 County Budget Relative to Public Health Department Accounts

By Legislator: _____

Whereas, Jefferson County is experiencing an increasing volume of Medical Examiner Cases and Autopsies, and

Whereas The account line that covers required costs will be overspent by year end, and

Whereas, There are funds available within the department budget for transfer.

Now, Therefore, Be It Resolved, that the 2020 County Budget is hereby amended as follows:

Increase:

| | | |
|---------------|-----------------|----------|
| 0118500 04413 | ME Medical Fees | \$75,000 |
|---------------|-----------------|----------|

Decrease:

| | | |
|----------------|---|----------|
| 01405000 01100 | Public Health Nursing Personal Services | \$75,000 |
|----------------|---|----------|

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20 ____.

Clerk of the Board of Legislators

JEFFERSON COUNTY BOARD OF LEGISLATORS
Resolution No. _____

Amending 2020 County Budget Relative to Additional Revenue From
NYS Office of Temporary and Disability Assistance

By Legislator: _____

Whereas, The Jefferson County Department of Social Services (JCDSS) has received notification from the NYS Office of Temporary and Disability Assistance that JCDSS has been allocated funding in the amount of \$45,000 to be used for administrative expenses directly related to developing and implementing the Homeless Services Plan, and

Whereas, JCDSS will use the allocated funding to contract with CARES of NY, Inc., the collaborative applicant that supports our Points North Continuum of Care (CoC), to create a website connecting Coordinated Entry and Assessment with Outreach and Homeless Prevention Services, and

Whereas, This CoC website will support the coordination of homeless services as well as provide the ability for partner agencies and consumers to reach out for assessment and referral services, and

Whereas, The website will be a resource for those experiencing homelessness or potential homelessness as well as a resource for providers working with these consumers.

Now, Therefore, Be It Resolved, That the 2020 County Budget is hereby amended as follows:

Increase:

Revenue

| | | |
|----------------|---------------------------------|----------|
| 01601000 93610 | State Aid Social Services Admin | \$45,000 |
|----------------|---------------------------------|----------|

Expenditure

| | | |
|----------------|-------------------|----------|
| 01601000 04416 | Professional Fees | \$45,000 |
|----------------|-------------------|----------|

Seconded by Legislator: _____

State of New York)
) ss.:
County of Jefferson)

I, the undersigned, Clerk of the Board of Legislators of the County of Jefferson, New York, do hereby certify that I have compared the foregoing copy of Resolution No. _____ of the Board of Legislators of said County of Jefferson with the original thereof on file in my office and duly adopted by said Board at a meeting of said Board on the _____ day of _____, 20____ and that the same is a true and correct copy of such Resolution and the whole thereof.

In testimony whereof, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, 20____.

Clerk of the Board of Legislators

Office for the Aging 2020

| Units of Service and Client Statistics | Jan | Feb | Mar | Apr | May | June | July | Aug | Sept | Totals |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
| Meals Home Delivered & Congregate (4716) | | | | | | | | | | |
| Clients (at 25th of the month) | * | * | 498 | 511 | 513 | 509 | 485 | 493 | 483 | |
| Home Delivered Meals (MLTC & congregate) | 11,159 | 9,918 | 11,688 | 13,490 | 13,090 | 13,877 | 13,006 | 12,311 | 12,758 | 111,297 |
| Congregate Meals (approx 75 clients at 7 sites) | 1,583 | 1,334 | 784 | | | | | | | 3,701 |
| Shelf Stable Distributed | | | | 2,520 | 120 | 75 | 105 | 2,415 | 70 | 5,305 |
| Emergency Frozen | | | 2,415 | 2,425 | 115 | 80 | 100 | 105 | 70 | 5,310 |
| Total Delivered Meals | 12,738 | 11,246 | 14,887 | 18,435 | 13,325 | 14,032 | 13,211 | 14,831 | 12,898 | 125,603 |
| Transportation (4710) | | | | | | | | | | |
| Total Transportation Rides | 1,046 | 1,008 | 932 | 619 | 644 | 750 | 915 | 975 | 989 | 7,878 |
| Caregiving- Housekeeping & Personal Care (4422) | | | | | | | | | | |
| Total Caregiving Clients | 60 | 65 | 66 | 44 | 53 | 57 | 60 | 55 | 60 | |
| Total Caregiving Hours | 980.00 | 788.25 | 893.50 | 740.00 | 878.75 | 803.75 | 989.75 | 877.00 | 899.25 | 7,850.25 |
| Respite for Caregivers (4605) | | | | | | | | | | |
| Total Respite Clients | 1 | 1 | 1 | 1 | 2 | 3 | 3 | 4 | 5 | |
| Total Respite Hours | 12.00 | 16.00 | 6.00 | 8.00 | 33.75 | 129.75 | 123.50 | 84.00 | 69.00 | 482.00 |
| PERS Units (4715) | | | | | | | | | | |
| # of clients with PERS units | 69 | 67 | 70 | 69 | 71 | 73 | 77 | 78 | 75 | |
| Legal Services (4411) | | | | | | | | | | |
| # of clients served | 3 | 2 | 2 | 1 | 0 | 0 | 0 | 3 | | |
| Hours of Service | 10.00 | 7.00 | 9.00 | 1.00 | 0.00 | 0.00 | 0.00 | 0.50 | | 27.50 |
| Disease Prevention & Health Promotion (4416/4414) | | | | | | | | | | |
| Diabetes Self Management Clients | | | 6 | | | | | | | |
| Chronic Disease Self Management Clients | | | 5 | | | | | | | |
| NY Connects Information & Referrals | | | | | | | | | | |
| Info & Assistance for the month | 88 | 53 | 67 | 81 | 55 | 55 | 52 | 40 | 25 | |
| Service tickets for the month | 180 | 97 | 131 | 229 | 190 | 172 | 113 | 155 | 575 | |
| Health Insurance Information & Counseling | | | | | | | | | | |
| Clients | 81 | 82 | 69 | 52 | 29 | 59 | 49 | 47 | 68 | |
| Counseling Sessions | 98 | 100 | 102 | 64 | 37 | 70 | 66 | 55 | 93 | |
| Waiting List Clients | | | 34 | 42 | 35 | 35 | 26 | 16 | 22 | |

We have approx 4,500 shelf stable meals to be delivered in the fall for covid and snow emergencies

Open Enrollment for Medicare is 10/15/20 - 12/7/20 with Advantage Plan Open Enrollment 1/1/21-3/31/21.

Santa's for Seniors program will begin soon!

2020 COMMUNITY SERVICES OFFICE EXPENSE/REVENUE REPORT

10/14/2020

| <u>PROGRAM</u> | <u>JAN</u> | <u>FEB</u> | <u>MAR</u> | <u>APR</u> | <u>MAY</u> | <u>JUNE</u> | <u>JULY</u> | <u>AUG</u> | <u>SEPT</u> | <u>OCT</u> | <u>NOV</u> | <u>DEC</u> | <u>TOTALS Y-T-D</u> | <u>TOTAL BUDGET</u> | <u>BALANCE AVAILABLE</u> | <u>% USED</u> |
|-----------------------|--------------------|------------------|--------------------|--------------------|------------------|------------------|--------------------|------------------|------------------|------------|------------|------------|-------------------------|-------------------------|------------------------------|---------------|
| EARLY INTERV. | | | | | | | | | | | | | | | | |
| EXPENSES | \$0 | \$0 | \$9,954 | \$24,371 | \$7,791 | \$13,987 | \$10,029 | \$5,638 | \$15,549 | | | | \$87,319 | \$430,000 | \$342,681 | 20.31% |
| REVENUES | \$0 | \$0 | \$1,092 | \$697 | \$938 | \$1,582 | \$476 | \$1,050 | \$0 | | | | \$5,835 | \$220,104 | \$214,269 | 2.65% |
| PRESCHOOL | | | | | | | | | | | | | | | | |
| EXPENSES | \$0 | \$27,739 | \$282,647 | \$725,104 | \$122,357 | \$131,452 | \$245,534 | \$235,640 | \$84,285 | | | | \$1,854,758 | \$4,950,000 | \$3,095,242 | 37.47% |
| REVENUES | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$267,168 | \$8,376 | \$0 | | | | \$275,544 | \$2,869,875 | \$2,594,331 | 9.60% |
| OPWDD | | | | | | | | | | | | | | | | |
| EXPENSES(ADMIN) | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | | | | \$0 | \$13,866 | \$13,866 | 0.00% |
| REVENUES | \$1,560 | \$0 | \$4,560 | \$0 | \$0 | \$0 | \$1,248 | \$0 | \$0 | | | | \$7,368 | \$6,933 | (\$435) | 106.27% |
| OASAS | | | | | | | | | | | | | | | | |
| EXPENSES | \$117,810 | \$83,645 | \$689,910 | \$284,321 | \$175,279 | \$37,050 | \$217,180 | \$162,554 | \$155,637 | | | | \$1,923,386 | \$3,228,464 | \$1,305,078 | 59.58% |
| REVENUES | \$761,658 | \$0 | \$803,839 | \$0 | \$0 | \$0 | \$626,200 | \$0 | \$179,575 | | | | \$2,371,272 | \$3,018,041 | \$646,769 | 78.57% |
| OMH | | | | | | | | | | | | | | | | |
| EXPENSES | \$49,767 | \$120,264 | \$634,155 | \$115,310 | \$314,410 | \$115,127 | \$577,584 | \$78,601 | \$33,976 | | | | \$2,039,194 | \$3,631,895 | \$1,592,701 | 56.15% |
| REVENUES | \$655,559 | \$0 | \$596,141 | \$449,028 | \$0 | \$0 | \$553,377 | \$0 | \$689,277 | | | | \$2,943,382 | \$3,444,765 | \$501,383 | 85.45% |
| TOTAL EXPENSES | \$167,577 | \$231,648 | \$1,616,666 | \$1,149,106 | \$619,837 | \$297,616 | \$1,050,327 | \$482,433 | \$289,447 | \$0 | \$0 | \$0 | \$5,904,657 | \$12,254,225 | \$6,349,568 | 48.18% |
| TOTAL REVENUES | \$1,418,777 | \$0 | \$1,405,632 | \$449,725 | \$938 | \$1,582 | \$1,448,469 | \$9,426 | \$868,852 | \$0 | \$0 | \$0 | \$5,603,401 | \$9,559,718 | \$3,956,317 | 58.61% |

OPWDD= OFFICE OF PEOPLE WITH DEVELOPMENTAL DISABILITIES
OASAS= OFFICE OF ALCOHOL AND SUBSTANCE ABUSE SERVICES

OMH= OFFICE OF MENTAL HEALTH

Jefferson County Public Health Service Home Health Care Statistical Performance*
For the Nine Months Ended September 30, 2020

| REFERRALS | | | | MTD | YTD | 2020 | Amount of | Percent |
|--------------------------|--------|--------|--------|--------|--------|------------|-----------|----------|
| | 2017 | 2018 | 2019 | Actual | Actual | Annualized | Change | Change |
| CHHA | 1,908 | 1,972 | 1,778 | 121 | 1,055 | 1,407 | -371 | -20.88% |
| PREVENT | 55 | 1 | 3 | 0 | 2 | 3 | 0 | -11.11% |
| Rabies | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Communicable Disease | 3,757 | 4,785 | 5,581 | 8,069 | 42,220 | 56,293 | 50,712 | 908.66% |
| Newborn Screening | 6 | 5 | 9 | 1 | 4 | 5 | -4 | -40.74% |
| PREVENT Sub-Total | 3,818 | 4,791 | 5,593 | 8,070 | 42,226 | 56,301 | 50,708 | 906.64% |
| GRAND TOTAL | 5,726 | 6,763 | 7,371 | 8,191 | 43,281 | 57,708 | 50,337 | 682.91% |
| AVERAGE DAILY CENSUS | | | | MTD | YTD | 2020 | Amount of | Percent |
| | 2017 | 2018 | 2019 | Actual | Actual | Annualized | Change | Change |
| CHHA | 214 | 206 | 164 | 160 | 136 | 136 | -28 | -13.59% |
| PREVENT | 4 | 1 | 2 | 1 | 1 | 1 | -1 | -100.00% |
| Rabies | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| PREVENT Sub-TOTAL | 4 | 1 | 2 | 1 | 1 | 1 | -1 | -100.00% |
| GRAND TOTAL | 218 | 207 | 166 | 161 | 137 | 137 | -29 | -17.47% |
| VISITS | | | | MTD | YTD | 2020 | Amount of | Percent |
| | 2017 | 2018 | 2019 | Actual | Actual | Annualized | Change | Change |
| CHHA | 13,879 | 12,850 | 9,747 | 770 | 5,858 | 7,811 | -1,936 | -19.87% |
| Skilled Nursing | 3,321 | 3,579 | 4,450 | 398 | 3,228 | 4,304 | -146 | -3.28% |
| Physical Therapy | 61 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Speech Therapy | 665 | 696 | 713 | 53 | 428 | 571 | -142 | -19.96% |
| Medical Social Worker | 636 | 805 | 686 | 93 | 674 | 899 | 213 | 31.00% |
| Occupational Therapy | 173 | 131 | 152 | 22 | 155 | 207 | 55 | 35.96% |
| Nutrition | 6,412 | 5,035 | 4,400 | 153 | 1,645 | 2,193 | -2,207 | -50.15% |
| Home Health Aide | 958 | 42 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Personal Care Aide | 26,105 | 23,138 | 20,148 | 1,489 | 11,988 | 15,984 | -4,164 | -20.67% |
| Sub-TOTAL | 34 | 26 | 47 | 0 | 3 | 4 | -43 | -91.49% |
| PREVENT | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Skilled Nursing | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Physical Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Speech Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Medical Social Worker | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Occupational Therapy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Nutrition | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Home Health Aide | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 0.00% |
| Personal Care Aide | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Sub-TOTAL | 34 | 27 | 47 | 0 | 4 | 5 | -42 | -88.65% |
| TOTAL VISITS | 13,913 | 12,876 | 9,794 | 770 | 5,861 | 7,815 | -1,979 | -20.21% |
| Skilled Nursing | 3,321 | 3,579 | 4,450 | 398 | 3,228 | 4,304 | -146 | -3.28% |
| Physical Therapy | 61 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Speech Therapy | 665 | 696 | 713 | 53 | 428 | 571 | -142 | -19.96% |
| Medical Social Worker | 636 | 805 | 686 | 93 | 674 | 899 | 213 | 31.00% |
| Occupational Therapy | 173 | 131 | 152 | 22 | 155 | 207 | 55 | 35.96% |
| Nutrition | 6,412 | 5,036 | 4,400 | 153 | 1,646 | 2,195 | -2,205 | -50.12% |
| Home Health Aide | 958 | 42 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Personal Care Aide | 26,139 | 23,165 | 20,195 | 1,489 | 11,992 | 15,989 | -4,206 | -20.83% |
| GRAND TOTAL | | | | | | | | |
| PARAPROFESSIONAL HOURS** | | | | MTD | YTD | 2020 | Amount of | Percent |
| | 2017 | 2018 | 2019 | Actual | Actual | Annualized | Change | Change |
| AGENCY CHHA | | | | | | | | |
| Home Health Aide | 3,146 | 3,190 | 2,857 | 155 | 1,684 | 2,245 | -612 | -21.41% |
| Personal Care Aide | 232 | 12 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| CHHA Sub-TOTAL | 3,378 | 3,202 | 2,857 | 155 | 1,684 | 2,245 | -612 | -21.41% |
| CONTRACT CHHA | | | | | | | | |
| Home Health Aide | 5,032 | 3,319 | 2,446 | 0 | 80 | 107 | -2,339 | -95.64% |
| Caregivers | 428 | 640 | 520 | 0 | 44 | 59 | -461 | -88.72% |
| US CARE SYSTEMS | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Family Home Care | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Home Care Plus (Sibley) | 5,460 | 3,959 | 2,966 | 0 | 124 | 165 | -2,801 | -94.43% |
| Sub-TOTAL | 853 | 33 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Personal Care Aide | 457 | 0 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Caregivers | 1,310 | 33 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| US CARE SYSTEMS | 6,770 | 3,992 | 2,966 | 0 | 124 | 165 | -2,801 | -94.43% |
| Sub-TOTAL | | | | | | | | |
| TOTAL CONTRACT | | | | | | | | |
| TOTAL HOURS | 8,606 | 7,149 | 5,823 | 155 | 1,808 | 2,411 | -3,412 | -58.60% |
| Home Health Aide | 1,542 | 45 | 0 | 0 | 0 | 0 | 0 | 0.00% |
| Personal Care Aide | 10,148 | 7,194 | 5,823 | 155 | 1,808 | 2,411 | -3,412 | -58.60% |
| GRAND TOTAL | | | | | | | | |

**Numbers may not total precisely due to rounding.

*Beginning with the 2018 Final Report, the Long Term Home Health Care Program which stopped in 2016, is removed. Patients with long-term needs are currently served through Managed Long Term Care (MLTC) programs that contract with the CHHA for care delivery.

Jefferson County Department of Social Services

2020

| | | | | | | | | | | |
|----------------|-----------|-----------|-------|-----------|-----------|-----------|--------|-----------|--------|--------|
| BALANCE | 1,608,775 | 1,115,378 | 8,000 | 5,502,285 | 1,936,852 | 2,469,073 | 50,000 | 2,188,386 | 19,191 | 62,668 |
|----------------|-----------|-----------|-------|-----------|-----------|-----------|--------|-----------|--------|--------|

| | Daycare 6055.46 | * Recipient Services 6070.4604 | Medical Assistance 6101.4 | MMIS 6100.4 | Family Assistance 6109.4 | Child Care 6119.4 | State Training Schools 6129.4 | Safety Net Assistance 6140.4 | Heap 6141.4 | Emergency Aid to Adults 6142.4 |
|--------------------------|--------------------|--------------------------------------|---------------------------------|----------------|--------------------------------|-------------------------|--|------------------------------------|----------------|---|
| BUDGET | 2,298,412 | 1,935,598 | 8,000 | 19,106,828 | 4,418,166 | 8,250,000 | 50,000 | 5,678,782 | 55,000 | 100,000 |
| LOCAL SHARE % | 0.00% | 35.00% | 25.00% | 100.00% | 0.00% | 30.00% | 100.00% | 71.00% | 0.00% | 50.00% |
| AVG BUD | 191,534 | 161,300 | 667 | 1,592,236 | 368,181 | 687,500 | 4,167 | 473,232 | 4,583 | 8,333 |
| JAN | 53 | 1,269 | 0 | 1,469,756 | 244,862 | 156 | 0 | 310,506 | 31,659 | 2,993 |
| FEB | 92,658 | 29,114 | 0 | 1,469,756 | 235,578 | 529,858 | 0 | 366,477 | 764 | 8,785 |
| MAR | 70,509 | 67,684 | 0 | 1,837,195 | 381,609 | 530,195 | 0 | 421,127 | 8,064 | 3,054 |
| APR | 85,661 | 140,259 | 0 | 1,469,756 | 216,323 | 829,596 | 0 | 424,582 | (4,722) | 6,771 |
| MAY | 46,003 | 134,956 | 0 | 1,469,756 | 393,589 | 601,386 | 0 | 425,123 | 223 | 3,385 |
| JUN | 99,898 | 149,685 | 0 | 1,785,368 | 254,098 | 1,131,662 | 0 | 399,182 | (946) | 4,678 |
| JUL | 90,224 | 141,555 | 0 | 1,262,448 | 257,702 | 754,325 | 0 | 403,244 | 247 | 1,247 |
| AUG | 101,168 | 80,249 | 0 | 1,262,448 | 283,696 | 699,575 | 0 | 384,220 | (152) | 3,035 |
| SEP | 103,463 | 75,449 | 0 | 1,578,060 | 213,857 | 704,174 | 0 | 355,935 | 672 | 3,384 |
| OCT | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| NOV | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| DEC | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| TOTAL | 689,637 | 820,220 | 0 | 13,604,543 | 2,481,314 | 5,780,927 | 0 | 3,490,396 | 35,809 | 37,332 |

| | | | | | | | | | | |
|---|-----------|-----------|-------|------------|-----------|-----------|--------|-----------|--------|--------|
| PROJ EXP: Forecast for Remainder of YEAR | 1,264,239 | 1,304,120 | 2,001 | 18,381,251 | 3,585,857 | 7,843,427 | 12,501 | 4,910,092 | 49,558 | 62,331 |
| PROJECTED BALANCE | 1,034,173 | 631,478 | 5,999 | 725,577 | 832,309 | 406,573 | 37,499 | 768,690 | 5,442 | 37,669 |

VETERANS SERVICE AGENCY

SEPTEMBER 2020 MONTHLY REPORT

| Month | Personal Contacts | Tel/Mail Contacts | Total Contacts | Total Services | New Claims | Maintained Claims |
|--------------------|-------------------|-------------------|----------------|----------------|------------|-------------------|
| January | 94 | 552 | 646 | 1401 | 26 | 13 |
| February | 87 | 723 | 810 | 1675 | 33 | 16 |
| March | 61 | 794 | 855 | 1777 | 36 | 33 |
| Sub Total | 242 | 2069 | 2311 | 4853 | 95 | 62 |
| April | 4 | 621 | 625 | 1248 | 30 | 4 |
| May | 13 | 494 | 507 | 1056 | 23 | 6 |
| June | 38 | 702 | 740 | 1640 | 47 | 10 |
| Sub Total | 55 | 1817 | 1872 | 3944 | 100 | 20 |
| July | 41 | 935 | 976 | 2095 | 28 | 15 |
| August | 51 | 781 | 832 | 1676 | 43 | 14 |
| September | 86 | 802 | 888 | 1955 | 48 | 26 |
| Sub Total | 178 | 2518 | 2696 | 5726 | 119 | 55 |
| October | | | | | | |
| November | | | | | | |
| December | | | | | | |
| Sub Total | | | | | | |
| GRAND TOTAL | | | | | | |

*Contact: Personal visit, phone call, or mail received or sent to/from VSA

*Service: Amount of assistance provided for each contact

Comments:

Happy Fall! The biggest piece of news is this office assisted in giving out over \$2000 in fresh connect coupons from NY State to the local Veterans!

As you can see, our personal contact numbers are back up. We are still not accepting walk-ins at this time and will keep on with the appointments only for the foreseeable future.