

BOARD OF COMMISSIONERS
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Transylvania County Board of Health

To improve and protect the health of all people in Transylvania County

April 11, 2023 – Regular Meeting
Community Services Building First Floor Large Meeting Room
6:00 pm

MINUTES

I. Call to Order

Quorum was reached with 4 members present.
Dr. Lamm called the meeting to order at 6:04 pm.

Members Present	Wiley Sim Cozart, III, Dawn Kauffman, Dr. Ben Lamm, Teresa McCall
Members Absent	Sandra McNeill, Teesie Stanton
Staff Members Present	Elaine Russell, Health Director / Secretary to the Board Laura Petit, Business Officer Jim Boyer, Environmental Health Supervisor Tara Rybka, Community Health Coordinator & PIO Sabrina Griffin, Clinical Planner/Evaluator Laura Rinehart, WIC Director Heather Bradley, Personal Health Director Paula Piercy, Purchasing & Vital Records
Others Present	

Welcome, Announcements, and Public Comment/Public Hearing

Transylvania County Board of Commissioners appointed Elizabeth Privette and Christina Mahoney as new members of the Board of Health representing the general public, and reappointed Dr. Ben Lamm for another 3-year term as pharmacist. Because the appointments occurred within the past 24 hours, neither new board member was able to attend.

II. Agenda Modifications

None.

III. Consent Agenda

A. Approval of Agenda

B. Minutes – February 14, 2023.

The agenda and minutes from February 14, 2023, were approved with a motion from Dr. Cozart and second by Ms. Kauffman. Approval was unanimous.

IV. Administrative or Committee Reports

A. Health Director's Report

1. The national public health emergency for COVID remains scheduled to end May 11, 2023. The agency's WIC services will return to in-person service on August 1st in compliance with federal WIC program operating standards. The end of telephone services/support will be a significant change for WIC clients and is anticipated to impact caseload numbers and engagement both locally and statewide. The return to in-person services will allow for more warm hand-off referrals for child health assessments, immunizations, and family planning services. Ms. Kauffman asked about notifications to clients and Ms. Russell said that notifications were going out and individuals were welcome to begin in-person services now if desired. Ms. McCall asked if the agency expected to lose clients due to Medicaid recertification and Ms. Rinehart responded that a majority of current clients qualify for WIC through Medicaid eligibility, but can also qualify as SNAP recipients or via proof of income. In addition, some clients may have aged out of eligibility since the pandemic began. Ms. McCall commented that she was aware of work to create a system that would allow information to be available across agencies to avoid re-entering information in multiple locations.

Commercialization of vaccine will not occur until the fall of 2023, until then agencies will continue to access and use the existing federal inventory through DPH. The CDC's VDAC group will be meeting on June 15 to determine a recommendation for which vaccine strains to include in this fall's bivalent booster doses.

2. The Region 1 Health Directors have been in communication with Senator Corbin regarding support for HB 108 (Local Communicable Disease Funding). He has been very encouraging and supportive toward our advocacy. He understands the money needs to be a recurring appropriation to truly improve local Health Department capacity related to communicable disease. He serves as chair to the Health and Human Services Committee and is in a position to truly advocate. The bill seeks a total of \$25 million, recurring, for fiscal years 2023-2024 and 2024-2025.
3. The agency and CARE Coalition have identified a HRSA Rural Communities Opioid Response Program (RCORP) – Child and Adolescent Behavioral Health (CABH) grant. This is a 4-year grant award at \$1,000,000 per year to address prevention, treatment, and recovery of substance misuse in rural youth ages 5-17. The grant was released March 22, 2023 and is due May 12, 2023. It's a complex grant due in a very short time period. Due to staffing limits in the CARE Coalition and the work of meeting existing grants in their final 1-2 years, the difficult decision was made to hold on submission and pursue next year if posted. Mr. Cozart asked about the age being young for substance misuse, and Ms.

Russell clarified that the work included prevention efforts and can be directed to children from homes affected by adult substance misuse.

4. The agency's Region 1 ARPA Workforce Development Director Sarah Tennyson has been in communication with Dogwood Health Trust for the pre-engagement discussions. about upcoming grant opportunities that could continue the collaborative work. Interested applicants must submit a proposal between May 1 and June 2. Viable applicants will be invited to submit a final application starting June 17. A memo requesting Board of Commissioner approval to start the submission process will be submitted for the April 24 meeting. The Region 1 WFD Project has provided a schedule of legal trainings through Teague Campbell, communications campaign direct support, Medicaid billing analysis support, and paid internships for students in the WCU Environmental Health Studies Program.
5. The agency has concluded the contractual relationship with HealthSpace. Training and initiation of the CDP software for Food/Lodging/Institutions is scheduled for this month.
6. The agency provided the Annual Summer Camp Training on March 14, 2023. A total of 12 camps participated in the training with a total of 27 participants. A return to in-person training was welcomed by the participants and the staff.

B. Annual Election of BOH Vice Chair

Based on last month's tentative nominations, Ms. Russell shared that Ms. McCall has received training in conducting board meetings through her role on the Board of Commissioners and is willing to accept a nomination. Ms. Kauffman made a motion to elect Teresa McCall as the BOH vice chair, and Dr. Lamm seconded. The motion passed unanimously.

V. Old Business

None.

VI. New Business

A. Proposed Budget FY23-24

The PowerPoint slide presentation for the Proposed Budget FY 23-24 is attached to the meeting minutes. (See Attachment 1) The Schedule of Fees for 2023-2024 and Environmental Health Section Fee Schedule (revised July 1, 2021) are attached to the meeting minutes. (See Attachment 2 and Attachment 3)

Ms. Russell presented the agency's proposed budget for FY 23-24, which includes an operating budget of \$3,957,711. Revenue sources include \$1,967,992 (50%) from local appropriations, \$711,818 (18%) from state appropriations via Agreement Addenda, \$266,700 (7%) from clinic and environmental health fees, \$176,400 (4%) from Medicaid, \$674,801 (17%) from grants from local (Dogwood Health Trust) and federal (Drug Free Communities, RCORP, COSSAP) sources, and \$160,000 (4%) from contracts with Transylvania County

Schools for school nursing. Expenses include 74% for personnel costs and 26% for operating costs such as office and medical supplies and durable items.

Other budget notes include:

- No requests were submitted for new staff, equipment, or reclassifications, in alignment with county administration requests to focus on COLA and pay plan review for market compatibility.
- Increased costs include anticipation that medical malpractice insurance may increase by 15% (\$1,279) which increased the budget line to \$9,804; environmental health well kits purchase (\$5,800) due to additional business and no internal water lab testing capacity which increased the budget line to \$13,800, but some costs will be recouped via fees; and staffing costs for a mid-level provider to restart Family Planning clinics and STD services (\$14,100), which increased the budget line to \$31,200.
- The ARPA Workforce Development Regional multi-year grant will have an estimated carry forward of \$650,000.

The proposed budget has \$32,590 less in local appropriations compared to FY 22-23, due to a vehicle request last year and costs being trimmed where able. The overall budget is about \$2 million less than FY 22-23 due to all \$1 million of the 2-year ARPA grant being included in last year's budget and the ending of several large COVID-19 grants.

Ms. Russell presented the agency's Schedule of Fees for clinical services and Fee Schedule for environmental health services for information, as there were no proposed changes. The clinical fee schedule includes a provision to adjust the fees as the actual costs of vaccines change without additional board approval. Ms. McCall asked when the environmental health fee schedule was last updated and if the fees were comparable to nearby counties. Mr. Boyer said the septic fees were increased prior to COVID-19 and well fees were last changed around 2012. Ms. Russell suggested that agency staff would investigate the fees in nearby counties and bring a recommendation to the board at the next meeting in June. She also noted that N.C. Administrative Code requires septic fees to be applied to the cost of work related to septic systems.

Dr. Cozart made a motion to accept the budget as presented. The motion was seconded by Dr. Lamm and passed unanimously.

B. Medicaid Expansion Information

Ms. Russell shared a message from NC DHHS (*italic text below*) regarding Medicaid Expansion for situational awareness and for information. She noted that Medicaid recipients had been receiving automatic recertification of eligibility during the pandemic. Starting in May, all Medicaid recipients will need to recertify in person, and some people are expected to lose eligibility. In addition, some DSS staff were hired since the last time that in-person document certification was required and may be unfamiliar with the process. Ms. McCall noted that DSS is the county department with the highest staff turnover, and shared that there has been discussion of funding to hire additional DSS staff, but many agencies are already struggling to hire existing staff and find office space for any additional hires. Recertification

and expansion are likely to be complicated and cause confusion, so everyone is urged to be patient through this transition.

Medicaid expansion will extend coverage for both physical and behavioral health to approximately 600,000 North Carolinians in a timely way that improves quality of life.

We still have work to do before the first person can be enrolled, and expansion will become effective only when the state budget is passed.

Generally, expansion increases the income eligibility requirements for full Medicaid coverage to 133% of the federal poverty rate. Those who will be able to get access to care primarily includes single adults aged 19 –64 with incomes less than \$19,391 each year and parents with low income — for a family of three, annual income below \$33,064 qualifies (the current cut-off is \$8,004). People included in this expanded coverage include:

- *People who work in agriculture, childcare, construction, retail and other fields whose jobs often do not include insurance benefits,*
- *Some veterans and their families,*
- *Children who age out of Medicaid,*
- *Women who would be covered if they were pregnant, and*
- *Men and women who currently have a very limited family planning only benefit through Medicaid.*

NCDHHS is beginning to prepare. Our goal will be to increase the number of people that have health coverage — Medicaid or otherwise — and to minimize the costs to the state and private partners because of uncompensated care and untreated illness. We are starting with a small planning team that will expand as we move forward, creating a structure for internal NCDHHS stakeholders, cross-departmental collaborations, and external stakeholders. There will be three main pillars of the work:

- *Our Medicaid Division will lead the **operational work** tied to implementation.*
- *Our Office of Health Equity and Office of Rural health will drive robust engagement with external stakeholders and ensure **we reach every community in NC.***
- *Our Division of Social Services will lead our partnership with counties and support them in maximizing the **value of this effort, and minimizing the administrative barriers to the eligibility work.***

In the meantime, people who think they may be eligible can begin enrollment online at [ePass.nc.gov](https://epass.nc.gov) to see if they currently qualify for Medicaid benefits. Existing Medicaid beneficiaries should update their contact information during Continuous Coverage Unwinding so they do not inadvertently lose coverage. More information can be found at <https://medicaid.ncdhhs.gov/End-of-PHE>.

NCDHHS continues to work on communications to a broad range of questions including details of coverage overlap, the impact of the end of continuous coverage from pandemic, provider networks, stakeholder engagement, and more. More details will be available for

providers, stakeholders, potential enrollees and the general public as we draw closer to implementation.

C. Epidemiology Update

The PowerPoint slide presentation for the Epi Updates is attached to the meeting minutes.
(See Attachment 4)

Ms. Russell reiterated the May 11 end date for the federal COVID-19 emergency declaration and deadline for Medicaid recertification. She presented information about COVID-19 vaccines, local cases in the past month, Community Levels, and most common variants statewide. Ms. Russell noted that the top variants will be used to determine the 2023 bivalent vaccine, which will have a much quicker turnaround compared to flu vaccine due to the manufacturing process.

In addition, Ms. Russell presented information about Mpox trends; Marburg virus outbreaks in Equatorial Guinea and Tanzania; global cases of measles; current outbreaks of salmonella, listeria, and drug-resistant infections associated with artificial tears; and trends in TB and STIs.

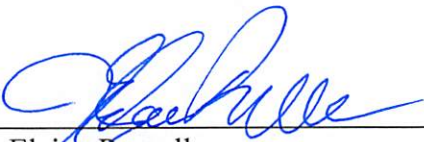
VII. Public Comment or Public Hearing

None

VIII. Adjournment


Dr. Cozart made a motion to adjourn the meeting with a second by Ms. Kauffman.
There was unanimous approval and the meeting concluded at 7:04 p.m.

Respectfully Submitted:



J. Elaine Russell
Secretary, Board of Health

June 13, 2023
Date



Dr. Ben Lamm
Chair, Board of Health

June 13, 2023
Approved Date