## STANDARD MODEL CONTRACT FORMAT FOR COUNTY PUBLIC HEALTH UNITS (Approved by the Subcouncil on May 8, 1985 as required by Laws of Florida, Chapter 83-177)

## CONTRACT BETWEEN

## NASSAU COUNTY

## (BOARD OF COUNTY COMMISSIONERS)

#### AND

## STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

Pursuant to the Laws of Florida, Chapter 83-177, this contract is entered into between the Department of Health and Rehabilitative Services, hereinafter referred to as the "department," and **NASSAU** County, hereinafter referred to as the "county." This contract stipulates the services that will be provided by county public health units (CPHUs), the sources and amount of funds that will be committed to the provision of these services, the administrative and programmatic requirements which will govern the use of these funds and the respective responsibilities of the department and the county in enabling the county public health units "to promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated public health unit services."

I. General Provision:

Both parties agree that the county public health unit:

- A. Shall provide services according to the conditions specified in Attachment I and all other attachments to this contract.
- B. Shall fund the services specified in Attachment II, section III, at the funding level specified for each program service area in that attachment.

#### II. Federal and State Laws and Regulations:

Both parties agree that the county public health unit:

- A. Shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.
- B. Shall comply with the provisions of 45 CFR, Part 74, and other applicable regulations if this contract contains federal funds.
- C. Shall comply with all applicable standards, orders, or regulations issued pursuant to the Clean Air Act as amended (42 USC 1857 et seq.) and the Federal Water Pollution Control Act as amended (33 USC 1368 et seq.), if this contract contains federal funds and the total contract amount is over \$100,000.

- D. Shall comply with applicable sections of Chapter 427, Florida Statutes, (Transportation Services) and Chapter 41-1, Florida Administrative Code, (Coordinated Community Transportation Services) regarding the provision of transportation services for the Transportation Disadvantaged if this contract contains any state or federal funds which are used to provide for direct or indirect (ancillary) transportation services.
- III. Records, Reports and Audits:

Both parties agree that the county public health unit:

- A. Shall maintain books, records and documents in accordance with accounting procedures and practices which sufficiently and properly reflect all expenditures of funds provided by the department, the county, and other sources under this contract. Books, records and documents must be adequate to enable the county public health unit to comply with the following reporting requirements:
  - 1. The revenue and expenditure requirements in the State Automated Accounting System 2.2 at the coding level specified in Attachment IV of this contract;
  - 2. The client registration and service reporting requirements of the minimum data set as specified in Client Information System/Health Management Component Manual and any revisions subsequent to the January 1, 1984 version, or the equivalent as approved by the Health Program Office. Any reporting system used by or on behalf of the county public health unit to produce the above information must provide data in a machine readable format approved by the department which can be transferred electronically to the Client Information System system;
  - 3. Financial procedures specified in the department's Accounting Procedures Manuals and Accounting Memoranda;
  - 4. All appropriate county public health unit employees shall report time, in Client Information System/Health Management Component compatible format by program component for at least the sample periods specified by the department; and
  - 5. Any other state and county program specific reporting requirements detailed in Attachment XI and following to this contract.
- B. Shall assure these records shall be subject during normal business hours to inspection, review or audit by state or county personnel duly authorized by the department or the county, as well as by federal personnel.
- C. Shall retain all financial records, supporting documents, statistical records, and any other documents pertinent to this contract in conformance with the retention schedules required in HRSM 15-1, "Records Management Manual."
- D. Shall allow persons duly authorized by state or county, and federal auditors, pursuant to 45 CFR, Part 74.24(a), (b), and (d), to have full access to, and the right to examine any of said records and documents during said retention period.

E. Shall include these aforementioned audit and record-keeping requirements in all approved subcontracts and assignments.

Both parties further agree that:

The department shall provide uniform financial statements of program account balances for each level of service on a quarterly basis to the county and to the director or administrator of the county public health unit.

IV. Monitoring:

Both parties agree that the county public health unit shall permit the department and the county to monitor, as either determines necessary, the budget and services plan detailed in Attachment II which will be operated by the county public health unit or its subcontractor or assignee.

V. Safeguarding Information:

Both parties agree that the county public health unit shall not use or disclose any information concerning a recipient of services under this contract for any purpose not in conformity with the state law, regulations or manual (HRSM 50-1), and federal regulations (45 CFR, Part 205.50), except on written consent of the recipient, or his responsible parent or guardian when authorized by law.

#### VI. Assignments:

Both parties agree that the county public health unit shall not assign the responsibility of this contract to another party without prior written approval of the department and the county. No such approval by the department and the county of any assignment shall be deemed in any event or in any manner to provide for the incurrence of any obligation of the department or the county in addition to the dollar amount agreed upon in this contract. All such assignments shall be subject to the conditions of this contract and to any conditions of approval that the department and the county shall deem necessary.

## VII. Subcontracts:

Both parties agree that the county public health unit shall be permitted to execute subcontracts with the approval of the delegated authority in the department for services necessary to enable the county public health unit to carry out the programs specified in this contract, provided that the amount of any such subcontract shall not be for more than ten (10) percent of the total value of this contract.

In the event that the county public health unit needs to execute a subcontract for an amount greater than ten (10) percent of the value of this contract, both parties to this contract must agree in writing to such a subcontract prior to its execution.

No subcontracts shall be deemed in any manner to provide for the incurrence of any obligation of the department or the county in addition to the total dollar amount agreed upon in this contract. All such subcontracts shall be subject to the conditions of this contract and to any conditions of approval that the department and the county shall deem necessary.

#### VIII. Payment For Services:

## A. The department agrees:

To pay for services identified in Attachment II as the state's responsibility in an amount not to exceed \$ 611,582.00. This amount includes all revenues from whatever source to be appropriated by the state to the Public Health Unit Trust Fund, including the State's share of all public, personal or primary care fees.

B. The county agrees:

To pay for services identified in Attachment II as the county's responsibility in an amount not to exceed \$ 287,809.00. This amount includes all revenues from whatever sources to be appropriated by the County Public Health Unit Trust Fund for services provided by the county public health unit, including the county's share of all public, personal and primary care fees.

- IX. The Department and The County Mutually Agree:
  - A. Effective date:
    - 1. This contract shall begin on October 1, 1985 or the date on which the contract has been signed by both parties, whichever is later.
    - 2. This contract shall end on September 30, 1986.
  - B. Termination:
    - 1. Termination because of lack of funds:

In the event funds to finance this contract become unavailable, either party may terminate the contract upon no less then twenty-four (24) hours notice in writing to the other party. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery. The department or the county shall be the final authority as to the availability of their respective funds as applicable. In case of cancellation due to the unavailability of funds, staffing and services shall be reduced appropriately.

2. Termination for breach:

Unless breach is waived by either party in writing, either party may, by written notice to the other party, terminate this contract upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery. If applicable, either party may employ the default provisions in Chapter 13A-1, Florida Administrative Code. Waiver of breach of any provision of this contract shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of the contract. The provisions herein do not limit either party's right to remedies at law or to damages.

\* It is estimated that \$217,018.00 will be available after the deduction of 5% has been made. 3. Termination at will:

This contract may be terminated by either party upon no less than thirty (30) days notice, without cause. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery.

C. Notice and contact:

The contract manager for the department for this contract is  $\underline{N. G. Lund, M.D.}$ . The representative of the county for this contract is  $\underline{T. J. Greeson}$ . In the event that different representatives are designated by either party after execution of this contract, notice of the name and address of the new representative will be rendered in writing to the other party and said notification attached to originals of this contract.

D. Modification:

Modifications of provisions of this contract shall only be enforceable when they have been reduced to writing and duly signed by both parties to this contract.

E. Name and address of payee:

The name and address of the official payee to whom the payment shall be made: <u>Public Health Unit Trust Fund</u>, <u>NASSAU</u> County.

F. All terms and conditions included:

This contract and its attachments as referenced, (Attachments I through <u>xy</u>), contain all the terms and conditions agreed upon by the parties.

IN WITNESS THEREOF, the parties hereto have caused this <u>45</u> page contract to be executed by their undersigned officials as duly authorized.

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COUNTY BY:	John 7 Clay	STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
NAME:	John F. Claxton	NAME:
TITLE:	Chairman	TITLE:
DATE:	9/17/85	DATE:
ATTEST	ED TO:	BY:
BY:	7 Man	(County Public Health Unit Director) NAME: <u>N. G. Lund, M. D.</u>
NAME:	(County Clerk)	TITLE: County Public Health Unit Director
TITLE:	Ex-Officio Clerk	DATE:
DATE:	9/17/85	

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## ATTACHMENT I

## SPECIAL PROVISIONS

#### I. Public Health Unit Trust Fund:

Both parties agree:

- A. That all state and local funds to be expended by the county public health unit shall be deposited in the Public Health Unit Trust Fund maintained by the State Treasurer.
- B. That all state and local funds deposited in the Public Health Unit Trust Fund shall be expended by the department solely for services rendered by the county public health unit as specified in this contract, except that nothing shall prohibit the rendering of additional services not specified in this contract.
- C. That funds deposited in the Public Health Unit Trust Fund for the county public health unit in <u>NASSAU</u> County shall be accounted for separately from funds deposited for other county public health units, and shall be used only for public health unit services in <u>NASSAU</u> County.
- D. That county public health unit surplus funds accumulated prior to October 1, 1984 are county funds to be used solely for public health purposes in the county where they were generated. The planned use of all such surplus funds plus surplus accumulated subsequent to October 1, 1984 must be included in the contract as:
  - 1. County and state contributions to the annual budget and shown in Sections I and II of Attachment II and/or;
  - 2. County public health unit reserve to cover cash flow problems or public health emergencies as specified in Section I of Attachment II, and/or;
  - 3. One time special projects which directly enhance the delivery of services by the county public health unit. The amount for such projects shall be reflected in Attachment II, Section I and explained in Attachment IX.
- E. That any surplus funds, including fees or accrued interest, remaining in any public health unit account at the end of the contract year, excluding funds accrued prior to October 1, 1984, shall be credited to the state or county, as appropriate, in such amounts as may be determined by multiplying the surplus funds remaining in a program account by the percentage of County Public Health Unit Trust Fund funding provided by each governmental entity for the rendering of the particular health service for which such account was established. Such surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year; however, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund and shall be accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity.
- F. That under no circumstances shall there be transfers of funds between the three levels of service without a contract amendment duly signed by both parties to this contract and the proper budget amendments unless the county public health

unit director determines that an emergency exists wherein a time delay would endanger the public's health and the director of the Health Program Office has approved the transfer. The director of the Health Program Office shall forward written evidence of this approval to the county public health unit within 30 days after the transfer.

The contract shall include as part of Attachment II a section entitled "Planned Expenditures and Planned Services Within Each Level of Service." This section shall include the following information for each program service area within each level of service:

- the planned number of fulltime equivalents (FTE's) by level of service;
- the planned number of services to be provided;
- the planned number of individuals/units to be served; and
- the planned state and county expenditures.

Expenditure information shall be displayed in a quarterly plan to facilitate monitoring of contract performance.

Adjustments in the planned expenditure of funds for program service areas within each level of service are permitted without a modification to this contract or a budget amendment. If the county public health unit exceeds the tolerance levels as specified below as of the end of the report period, the director/administrator of the county public health unit must prepare a written explanation for each program service area which is out of compliance:

- 1. The cumulative percent variance cannot exceed by more than 25 percent the planned expenditures for a particular program service area or fall below planned expenditures by more than 25 percent.
- 2. However, if the cumulative amount of variance between actual and planned expenditures for the report period for a program service area does not exceed one percent of the cumulative planned expenditures for the level of service in which the program service area is included, a variance explanation is not required.
- G. The required dates for the county public health unit director's quarterly report to the county and the department shall be as follows:
  - 1. March 1, 1986 for the report period October 1, 1985 through December 31, 1985;
  - 2. June 1, 1986 for the report period October 1, 1985 through March 31, 1986;
  - 3. September 1, 1986 for the report period October 1, 1985 through June 30, 1986; and
  - 4. December 1, 1986 for the report period October 1, 1985 through September 30, 1986.

- H. Quarterly reports submitted by county public health unit directors to the county and the department shall include at least the following sections:
  - 1. A transmittal letter briefly summarizing county public health unit activity year-to-date;
  - 2. A contract variance analysis which:
    - a. Explains the reason for the variances in expenditures in any program service area which exceeds the tolerance levels established in paragraph F. 1, 2, and 3 above;
    - b. The steps that will be taken to comply with the contract expenditure plan, including a contract amendment, if necessary; and
    - c. A time table for completing the steps necessary to comply with the plan. Failure of the county public health unit to accomplish the planned steps by the dates established in the written explanation shall constitute a breach of the contract and the county or the department may withhold funds from the contract or take other appropriate administrative action to achieve compliance.
  - 3. DE135L1 "CPHU Contract Management Report;"
  - 4. DE235L1 "Analysis of Fund Equities;" and
  - 5. DE250L1 "Statement of Budget and Actual Expenditures Per Revenue Contribution Ratio."
- II. Fees:
  - A. Environmental, regulatory fees:

The department shall establish by rule fees for environmental, regulatory functions designated in this contract and conducted by the county public health unit. Such fees shall supersede any environmental, regulatory fees existing prior to the effective date of the department's rule. The county may, however, establish fees pursuant to Florida Statutes, Section 381.311 which are not inconsistent with department rules and other statutes, after consultation with the department.

B. Public health services fees:

The department may establish by rule fees for public health services, other than environmental, regulatory services, designated in this contract and conducted by the county public health unit. Such fees shall supersede any other fees for a public health service which existed prior to the effective date of the department's rule. The county may, however, establish fees pursuant to Florida Statutes, Section 381.311 which are not inconsistent with department rules and other statutes. All state or federally authorized public health services fees shall be listed in Attachment V of this contract. All county authorized public health services fees shall be listed in Attachment VI of this contract. C. Personal health and primary care fees:

Either party may establish fees for personal health and primary care services designated in this contract and conducted by the county public health unit, except for those services for which fee schedules are specified in federal or state law or regulations. Both parties further agree:

- 1. That such fees shall be established by resolution of the Board of County Commissioners, if promulgated by the county, or by rule, if promulgated by the department;
- 2. That there shall be no duplication of fees by the department and the county for personal health or primary care services provided by the county public health unit;
- 3. That personal health and primary care fees shall be listed in Attachments V and VI of this contract.
- D. Collection and use of fees:

Both parties agree:

- 1. That proceeds from all fees collected by or on behalf of the county public health unit, whether for public, personal, or primary care services, shall only be used to fund services provided by the county public health unit;
- 2. That all fees collected by or on behalf of the county public health unit shall be deposited with the State Treasury and credited to the Public Health Unit Trust Fund or other appropriate state account if required by Florida Statute or the State Comptroller;

## 3. That Not Applicable

(Specific Fee)

is exempted from the above provisions until \_\_\_\_\_\_ because this fee was committed prior to July 1, 1983 toward retirement of the obligation on \_\_\_\_\_\_.

(Specific Public Health Facility)

III. Service Policies and Standards:

Both parties agree that the county public health unit shall adhere to the service policies and standards published by the department in program manuals and other guidelines provided by the department as a guide for providing each funded service specified in Attachment II of this contract where such manuals or guidelines exist.

## IV. Personnel:

Both parties agree:

- A. The county public health unit shall have at least the following employees:
  - 1. A director or administrator appointed by the Secretary of the department after consultation with the staff director of the Health Program Office and with the concurrence of the Board of County Commissioners.
  - 2. A fulltime community health nurse;
  - 3. An environmental health specialist; and
  - 4. A clerk.
- B. That all department employees working in the county public health unit shall be supervised by the department and subject to Department of Administration rules.
- C. Staffing levels shall be established in this contract in Attachment II, section IV as FTE's, and may be changed as funds become available.
- D. The number and classification of employees working in the county public health unit that are county employees rather than department employees shall be listed in Attachment VII of this contract.
- V. Facilities:

Both parties agree:

- A. That county public health unit facilities shall be provided as specified in Attachment VIII of this contract. This attachment shall include a description of all the facilities used by the county public health unit, including the annual rental equivalent value, and by whom they will be funded;
- B. That responsibility for maintenance of facilities shall be described in Attachment VIII, including the cost of such maintenance and by whom it will be funded;
- C. That the department in conjunction with the county will conduct an annual assessment of the adequacy of county health unit facilities, and submit a report by the end of the contract year describing needed facility improvements or expansion, including the estimated cost of such improvements or expansions.
- D. That the county shall own the facilities used by the county public health unit unless otherwise provided in Attachment VIII of this contract; and
- E. That facilities and equipment provided by either party for the county public health unit shall be used for public health services provided that the county shall have the right to use such facilities and equipment, owned or leased by the county, as the need arises, to the extent that such use would not impose an unwarranted interference with the operation of the county public health unit.

- VI. Method of Payment:
  - A. In each quarter of the contract year, the county shall deposit at least one fourth of its total annual contribution to the County Public Health Unit Trust Fund. At least one third of this quarterly contribution shall be deposited no later than the last day of the first month in each quarter.
  - B. The department shall release on a quarterly basis, beginning the first day of the contract, an amount equal to one quarter of the total amount specified in this contract for state expenditure excluding amounts for the following:

Improved Pregnancy Outcome Maternal and Child Health Women, Infants, and Children Family Planning

VII. Laboratory and Pharmacy Support:

The department agrees to supply laboratory and pharmacy support services for the county public health unit at least at the level provided in the prior state fiscal year if funds are available.

VIII. Other County Public Health Unit Activity: (optional)

Attachment X shall contain a listing of all public health activities in the county which supplement or support the activities of the county public health unit, but are not financed through the Public Health Unit Trust Fund. The contract manager for the department and the contract representative for the county should be notified in writing of changes in the agreements or amounts listed in Attachment X which occur during the life of this contract, but such changes do not require a contract amendment.

IX. Emergencies:

Both parties agree, to the extent of their respective resources, that they may assist each other in meeting public health emergencies.

## **ATTACHMENT II**

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## I. PLANNED USE OF COUNTY PUBLIC HEALTH UNIT TRUST FUND BALANCES: (Based On Projected Estimates Using June 30, 1985 Actual SAMAS Data)

• • · ·	Estimated County Share Of County Trust Fund Balance As Of September 30, 1985	Estimated State Share Of County Trust Fund Balance As Of September 30, 1985	Total
Draw Down For Contract Year October 1, 1985 - September 30, 1986			
	•		
Reserve For Cash Flow October 1, 1985 - September 30, 1986	\$64,876.00	\$ 25,229.00	\$ 90,105.00
	•		
Special Project: October 1, 1985 - September 30, 1986			
			-
Total	\$64,876.00	\$ 25,229.00	\$ 90,105.00

## II. SOURCES OF CONTRIBUTIONS TO PUBLIC HEALTH

	State	 CPHU Trust Fund	Other <u>Contributions</u>	 Total
1.	General Revenue: State (Formula Dist.) School Health Services Cardiovascular Screening Cervical Cytology Screening/ Referral I.P.O.	\$ 360,428.00 24,902.00 1,814.00 3,529.00 30,577.00		\$ 360,428.00 24,902.00 1,814.00 3,529.00 30,577.00
	Total General Revenue	\$ 421,250.00		\$ 421,250.00
2.	Federal Funds:			
	W.I.C. M.C.H. Special Project I.P.O. Hypertension Family Planning Child Health (M.C.H. Block)	\$ 48,000.00 23,327.00 4,018.00 16,798.00 13,300.00	\$ 288,446.00 16,101.00	\$ 336,446.00 16,101.00 23,327.00 4,018.00 16,798.00 13,300.00
	Total Federal Funds	\$ 105,443.00	\$ 304,547.00	\$ 409,990.00
3.	Fees Assessed by State or Federal Rules or Regulations:			
	Family Planning Swimming Pools Mobile Home Parks Septic Tanks Maternity	\$ 17,000.00 4,250.00 1,000.00 32,639.00 6,000.00		\$ 17,000.00 4,250.00 1,000.00 32,639.00 6,000.00
	Total Fees	\$ 60,889.00		\$ 60,889.00

State	CPHU Trust Fund	Other Contributions	Total
Other Revenues:			
Lab		\$ 16,623.00	\$ 16,623.00
T.B. Control		3,242.87	3,242.87
S.T.D.		1,200.00	1,200.00
Pharmacy		27,719.00	27,719.00
Medicaid	\$ 24,000.00		24,000.00
Total Other Revenues	\$ 24,000.00	\$ 48,784.87	\$ 72,784.87
Total State Contributions	\$ 611,582.00	\$ 353,331.87	\$ 964,913.87

## IL SOURCES OF CONTRIBUTIONS TO PUBLIC HEALTH

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## 11. SOURCES OF CONTRIBUTIONS TO PUBLIC HEALTH

	County	CF	HU Trust Fund	Other Contributions		Total
1:	Board of County Commissioners: Annual Appropriation Draw Down From Public Health	\$ :	228,440.00		\$	228,440.00
2.	Unit Trust Fund Balance, if any 	\$	228,440.00		- <u> </u>	228,440.00
2.	Ordinance or Resolution: Premarital Blood Tests Influenza Immunizations UOG Vital Records Donations	\$	500.00 1,500.00 3,850.00 4,500.00 31,873.00		\$	500.00 1,500.00 3,850.00 4,500.00 31,873.00
	Total Fees	\$	42,223.00		\$	42,223.00
3.	Buildings: Annual Rental Equivalent Value Maintenance			\$ 73,620.00	\$	73,620.00
	Total Buildings	<u> </u>		\$ 73,620.00	\$	73,620.00

## II. SOURCES OF CONTRIBUTIONS TO PUBLIC HEALTH

CPHU Trust Fund	Other Contributions	Total
\$ 17,146.00		\$ 17,146.00
\$ 17,146.00		\$ 17,146.00
\$ 287,809.00	\$ 73,620.00	\$ 361,429.00
	\$ 426,951.87	\$1,326,342.87
	\$ 17,146.00 \$ 17,146.00 \$ 287,809.00	CPHU Trust Fund       Contributions         \$ 17,146.00       \$         \$ 17,146.00       \$         \$ 287,809.00       \$         73,620.00

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## III. BUDGET BY LEVEL OF SERVICE

				Budget (CPHUT State Cour	
Α.	Publ	lic Health Level			
	1.	Salaries and Benefits	\$137,683.00	\$56,237.00	\$193,920.00
	2.	OPS	414.00	199.00	613.00
	3.	Expenses	15,620.00	16,004.00	31,624.00
	4.	Operating Capital Outlay	1,562.00	638.00	2,200.00
		Subtotal	\$155,279.00	\$73 <b>,</b> 078.00	\$228,357.00
в.	Pers	onal Health Level			
2.	1.	Salaries and Benefits	\$387,113.00	\$158,117.00	\$545,230.00
	2.	OPS	26,566.00	23,062.00	49,628.00
	3.	Expenses	37,086.00	31,290.00	68,376.00
	4.	Operating Capital Outlay	5,538.00	2,262.00	7,800.00
		Subtotal ·	. \$456,303.00	\$214,731.00	\$671 <b>,</b> 034.00
c.	Prin	nary Care Level			
	1.	Salaries and Benefits			

2. OPS

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- 3. Expenses
- 4. Operating Capital Outlay Subtotal

Total Public Health Services Budget

Salaries and Benefits	\$524,796.00	\$214,354.00	\$739 <b>,</b> 150.00
0PS	26,980.00	23,261.00	50,241.00
Expenses	52,706.00	47,294.00	100,000.00
Operating Capital Outlay	7,100.00	2,900.00	10,000.00
BUDGET	\$611,582.00	\$287 <b>,</b> 809.00	\$899 <b>,</b> 391.00

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		Number of Individual	Number of	Q	uarterly Exp	enditure Pla	In	State/Cou	inty Totals	
	FTE's	Units	Services	lst	2nd	3rd	4th	State	County	Grand Tota
. Public Health:										
Immunization (101)	1.28	3,500	7,000	8,210	8,210	8,210	8,210	22,333	10,509	32,842
STD (102)	0.17	1,100	1,300	1,090	1,090	1,090	1,090	2,966	1,396	4,362
AIDS (103) (Not Applicable)	0.00	-	-	-	-	-	-	-	-	-
IB Control Services (104)	0 <b>.39</b>	3,000	5,000	2,501	2,501	2,501	2,501	6,804	3,202	10,006
Communicable Disease Surveillance/Investigation (106)	0.16	10.0	35.0	1,026	1,026	1,026	1,026	2,791	1,314	4,105
Non-Communicable Disease (N/A) Surveillance/Investigation (143)	0.00	-	-	-	-	-	-	-	-	-
Water Services (157, 158, 159, 160)	1.71	810	1,740	10,968	10,968	10,968	10,968	29,835	14,040	43,875
Sewage and Waste Services (161, 162, 163, 170)	2.38	221	402.4	16,350	16,350	16,350	16,350	41,526	19,541	61,066
Food Hygiene (148, 150)	.86	243	807	5,516	5,516	5,516	5,516	15,004	7,061	22,065
Facilities (151, 152, 153, 154)	0.12	94.2	375	768	771	771	768	2,094	984	3,078
Community Hygiene (144, 145, 155, 165, 171, 172, 173)	0.92	331.4	495.3	5,899	5,903	5,902	5,899	16,052	7,553	23,605
Vector Control (166, 167, 168, 169)	0.69	700	750	4,426	4,426	4,426	4,426	12,040	5,664	17,704
Emergency Medical Services (146)	0.03	19	76	192	192	192	192	523	246	769
Vital Statistics (180)	0.19	1,525	1,525	1,219	1,219	1,219	1,219	3,315	1,581	4,876
Subtotal	8.90	11,551	19,508	57,089	57,089	57,089	57,089	155,279	73,078	228,357

## IV. PLANNED EXPENDITURES AND PLANNED SERVICES BY PROGRAM SERVICE AREA WITHIN EACH LEVEL OF SERVICE October 1, 198<u>5</u> to September 30, 198<u>6</u>

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		Number of Individual	Number of	ť	Quarterly Ex	nenditure P	lan	State/Co	ounty Totals	
	F <b>TE's</b>	Units	Services	lst	2nd	3rd	4th	State	County	Grand Tota
Personal Health:										
Chronic Disease Services (210, 211, 212, 213, 219)	2.60	3,000	8,500	13,314	13,314	13,314	13,314	36,215	17,042	53,257
Home Health (215)	0.00	-	-	-	-	-	-	-	-	-
General Nutrition (220)	.98	1,200	3,712	5,018	5,018	5,018	5,018	13,651	6,424	20,075
WIC (22))	4.25	1,000	12,000	21,763	21,763	21,763	21,763	59,197	27,857	87,054
Family Planning (223)	5.88	1,625	7,400	30,110	30,110	30,110	30,110	81,901	38,542	120,443
Improved Pregnancy Outcome (old maternity) (225)	1.30	130	620	6,657	6,657	6,657	6,657	18,108	8,521	26,629
Other Infant, Child and Adolescent (230)	7.67	3,000	15,000	39,276	39,276	39,276	39,276	106,832	50,274	157,106
School Health (234)	6.54	5,200	57,100	43,490	23,490	23,490	43,490	91,093	42,867	133,960
Other Adult Health (physical exams, etc.) (236)	3.54	2,000	9,215	18,127	18,127	18,127	18,127	49,307	23,203	72,510
Dental Services (240)	0.00		<u> </u>							
Subtotal	32.76	17,155	114,047	177,758	157,758	157,758	177,758	456,303	214,731	671,034

## IV. PLANNED EXPENDITURES AND PLANNED SERVICES BY PROGRAM SERVICE AREA WITHIN EACH LEVEL OF SERVICE October 1, 198<u>5</u> to September 30, 198<u>6</u>

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				Number of Individual	Number of	Qu	arterly Expe	enditure Pla	 N	State/Cou	unty Totals	
			FTE's	Units	Services	lst	2nd	3rd	4th	State	County	Grand Total
с.	Primary Care:			<u></u>				4	<u></u>			
	Child Primary Care (329)	(N/A)	-	-	-	-	-			-	-	-
	Adult Primary Care (337)		-	-	-	-		-	-	-	-	-
	Subtotal			-	-	-	-	-	-	-	-	-
	TOTAL CONTRACT		41.66	28,706	133,555	234,847	214,847	214,847	234,847	611,582	287,809	899,391

## PLANNED EXPENDITURES AND PLANNED SERVICES BY PROGRAM SERVICE AREA WITHIN EACH LEVEL OF SERVICE October 1, 1985 to September 30, 1986

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#### ATTACHMENT III

## CIVIL RIGHTS CERTIFICATE

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND THE OMNIBUS BUDGET RECONCILIATION ACT OF 1981.

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance.

The applicant assures that it will comply with:

- 1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d et seq., which prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving or benefiting from Federal financial assistance.
- 2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from Federal financial assistance.
- 3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
- 4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
- 5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
- 6. All regulations, guidelines and standards lawfully adopted under the above statutes.

The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contractors, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other apporpriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

## ATTACHMENT IV

#### REVENUE AND EXPENDITURE CODING REQUIREMENTS

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## General Principles

The automated cost allocation system for the county public health units (CPHUs) will provide for the allocation of expenditures recorded in the County Public Health Unit Trust Fund that cannot be conveniently charged on payment to a specific program component. Career Service and 1200 OPS Salaries will be coded to ORG Code Level 3 (L5 Code = 000) through Personnel Management Data System (PMDS), except central administrative salaries chargeable to L5 Code 400. All 1300 OPS Salaries must be charged in State Automated Management Accounting System (SAMAS) to a specific program component (program service area) at Level 5 of the Organization Code. Similarly Expenses and OCO will be coded to the lowest uniquely identifiable Level 5 code.

County public health unit expenditures coded in SAMAS will be allocated on the basis of data collected through the Client Information System/Health Management Component (CIS/HMC) time reporting system. Employee Activity Records (EAR) are used to record the time each employee spends in various program components. County public health units using their own data systems will provide employee time information to the CIS/HMC system and this data will be processed in the same fashion.

Using employee salary information from the PMDS, personnel costs are generated for each program component for which county public health unit staff have coded their time. Time and costs associated with general support program components, such as those for general personal or general public health, will be allocated to direct service program components based on the relative percentage of direct service time in each of the relevant program components. For instance, if family planning direct service time was 20 percent of the direct service time coded in all personal health program components, then 20 percent of the costs associated with general personal health would be distributed to family planning.

Once the appropriate time-cost percentages are determined for each program component, then these percentages will be used to distribute allocable expenditures coded in SAMAS.

#### Coding Plan

The SAMAS organization codes will be used to identify specific program components (program service areas) within each of the three Program Service Levels as follows:

L5 Codes	Program Service Levels
100 through 199	Public Health Services
200 through 299	Personal Health Services
300 through 399	Primary Health Services

Codes 400 through 499 will be used for general administrative and support services, and expenditures charged to these accounts will be allocated to the specific Program Components.

Revenues and expenditures of each county public health unit funded through the County Health Unit Trust Fund will be coded with the appropriate SAMAS codes for Category, Object, and Other Cost Accumulator (OCA) as prescribed by the State Comptroller and/or as may be determined by the Department's Comptroller. The SAMAS Organization Code will be used as follows:

- L1 = 60
- L2 = District
- L3 = County Code as assigned by the
- District Fiscal Office (71-89)
- L4 = Optional use by county public health unit as approved by the District Fiscal Office (limited to 52-89)
- L5 = Program Service Level and Program Component described below. A complete list of these codes is included at the end of this Attachment.
- L5 = 000 Revenues from state and county sources for the general use of the county public health unit and which are available to specific Program Components as specified in the contract.

All other revenues will be coded to the appropriate L5 code for the Service Level or Program Component as specified in the contract.

Expenditures made specifically for any Program Component not expected to benefit any other Program Component shall be coded to the specific L5 Organization Code representing the Program Component receiving the benefit.

Allocable expenditures will be charged to the following SAMAS accounts:

Level 5	
Code	Allocation Criteria
000	Salaries, OPS (1200) Expenses and Operating Capital Outlay (other than those chargeable to General Administrative and Support Services) that will be allocated on the basis of time/cost percentages to the Program Components within the three major Levels of Service.
100	Expenses and OCO allocable to all Program Components within the Public Health Service Level (L5 codes: 101 through 199) in proportion to the time/cost percentages determined for such Program Components.
109	Expenses and OCO allocable only to Communicable Disease Control Program Components (L5 codes: 101 through 109) in proportion to the time/cost percentages determined for such Program Components.
175	Expense and OCO allocable only to Environmental Health Program Components (L5 codes: 144 through 174) in proportion to the time/cost percentages determined for such Program Components.
200	Expense and OCO allocable only to Personal Health Program Components (L5 codes: 201 through 299) in proportion to the time/cost percentages determined for such Program Components.
300	Expense and OCO allocable only to Primary Care Program Components (L5 codes: 301 through 399) in proportion to the time/cost percentages determined for such Program Components.

Level 5 <u>Code</u> 400	Allocation Criteria Salaries and Other Expenditures for General Administrative and Support Services allocable to all other county public health unit Program Components (except codes L5 = 401 through 499) in proportion to the time/cost percentages determined for such Program Components. All expenditures charged to L5 = 400 and 491 will be added to those charged at Level 3 (L5 = 000) for allocaion.
491	Inventory
495	Administrative Services

Local projects or sub-unit activities for any of the Program Components identified by the L5 codes may be identified at the county public health unit's option by the L4 Organization Codes. Such identification will allow the county public health unit to develop supplemental cost data from the SAMAS reports, but the county public health unit cost allocation system will ignore L4 codes in making its distributions to the Program Component accounts.

## PROPOSED SAMAS CODING CHANGES

Level 4 CPHU <u>Option</u> XX	Level 5 Proposed <u>Codes</u> 000	Public Health *CPHU Allocable Costs
××.	100	*General Public Health
××	101	Immunization Services
XX	102	Sexually Transmitted Disease Services (formerly VD)
XX	103	Acquired Immune Deficiency Syndrome (AIDS)
XX	104	Tuberculosis Control Services
XX	106	Communicable Disease Surveillance/Investigation
XX	107	*Communicable Disease Pharmacy
XX	108	*Communicable Disease Laboratory
XX	109	*General Communicable Disease Control
XX	143	Non-Communicable Disease Surveillance/Investigation
XX	144	Occupation Health Services
XX	145	Consumer Product Safety
XX	146	Emergency Medical Services
XX	148	Food Hygiene
XX	150	Food Hygiene Training
XX	151	Group Care Facilities
XX	152	Migrant Labor Camp Services
XX	153	Housing and Public Building Safety and Sanitation
XX	154	Mobile Home and Recreational Park Services
XX	155	Common Carrier Sanitation
ХX	157	Private Water Systems
XX	158	Public Drinking Water Systems (Safe Drinking Water Act)
XX	159	Bottled Water
XX	160	Swimming Pools/Bathing Places
XX	161	Individual Sewage Disposal
XX	162	Public Sewage

Level 4	Level 5			
CPHU	Proposed			
Option	Codes	Public Health		
XX	163	Solid Weste Disposal		
XX	164	Hazardous Materials		
××	165	Sanitary Nuisance		
××	166	Rabies Surveillance/Control Services		
XX	167	Arbovirus Surveillance		
XX	168	Rodent Control		
XX	169	Arthropod Control		
XX	170	Water Pollution Control		
XX	170	Air Pollution Control		
XX	172	Radiological Health		
XX	172	Toxic Substances		
XX	174	*Environmental Health Laboratory		
XX	175	*General Environmental Health		
~~	175	-General Environmental Health		
XX	180	Vital Statistics		
		Personal Health		
XX	200	*General Personal Health		
XX	210	Cardiovascular Disease Services		
XX	211	Hypertension		
XX	212	Diabetes		
XX	213	Cancer		
XX	215	Home Health		
XX	219	Health Risk Reduction		
XX	220	Nutrition		
XX	221	WIC		
XX	223	Family Planning		
XX	225	Improved Pregnancy Outcome		
XX	230	Infant, Child & Adolescent		
XX	234	School Health		
XX	236	Adult Health		
XX	240	Dental Health		
XX	241	*Personal Health Pharmacy		
xx	242	*Personal Health Laboratory		
~~	242			
XX	300	Primary Care *General Primary Health Care Program		
xx	329	Child Primary Care		
xx	337			
XX	338	Adult Primary Care		
		*Primary Care Pharmacy		
XX	339	*Primary Care Laboratory		
		General Administrative and Support Services		
XX	400	*General Administrative and Support Services		
XX	491	*Inventory		

\*Allocable Accounts

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## ATTACHMENT V

## STATE FEE SCHEDULES, BY SERVICE

_evel of Service/Service	Fee/Range	Estimated Annual Revenue Accruing To The PHU Trust Fund
Public Health		
Environmental Health		
Mobile Home Parks	\$25.00 - \$75.00	\$ 1,000.00
Septic Tanks	\$30.00 - \$70.00	50,000.00
Swimming Pools	\$25.00 - \$75.00	4,250.00
		\$ 55,250.00
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II. Personal Health

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Medicaid	\$ 17,500.00
Family Planning and S.D.T.	6,500.00
Family Planning by Sliding Scale	17,000.00
Maternity	6,000.00
	\$ 47,000.00

III. Primary Care

Not Applicable

## ATTACHMENT VI

# COUNTY FEE SCHEDULES, BY SERVICE

Level of Service/Service		of Service/Service	Fee/Range	Estimated Annual Revenue
Ι.	Publ	ic Health		
	1)	Vital Statistics		\$ 4,500.00
		Certified Copies Birth Certificates Death Certificates	\$ 3.00 3.00 3.00	
	2)	Premarital Bloods	5.00	500.00
	3)	Influenza Immunizations	5.00 SUBTOTAL	1,500.00 \$ 6,500.00

## II. Personal Health

1) 2) 3)	C.V.S. Screening School Entrance Physicals Donations from grateful patients	\$ 5.00 donation 3.00 donation \$ donation /	31,873.00
4)	Pregnancy Testing	5.00	3,850.00
		SUBTOTAL \$	35,723.00
		COUNTY FEE SCHEDULE TOTAL \$	42,223.00

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III. Primary Care

Not Applicable

## ATTACHMENT VII

## CLASSIFICATION AND NUMBER OF EMPLOYEES WORKING IN THE COUNTY PUBLIC HEALTH UNIT WHO ARE PAID BY THE COUNTY, BY LEVEL OF SERVICE

Level of Service/Service Position Classification Number
I. Personal Health
NOT/APPLICABLE

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II. Primary Care

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## ATTACHMENT VIII

#### FACILITIES .. .

Facility Description	Location	Annual Rental Equivalent Value	Owned By
Clinic & Admini- strative Space 6220 Sq. Ft.	Fernandina Beach	37,320	Nassau County
Clinic 2300 Sq. Ft.	Yulee	13,800	Nassau County
Clinic 2850 Sq. Ft.	Callahan	17,100	Nassau County
Clinic 1100 Sq. Ft.	Hilliard	5,400 73,620	Nassau County

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Facility Maintenance:

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Responsible Party:	N. G. Lund, M.D. & Nassau County Board of County Commissioners (Department, County, Other Party)
Maintenance Cost:	Not Applicable
Maintenance Provider:	Nassau County Board of County Commissioners

## ATTACHMENT IX

## DESCRIPTION OF USE OF PUBLIC HEALTH UNIT TRUST FUND BALANCES FOR SPECIAL PROJECTS, IF APPLICABLE

NOT APPLICABLE

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## ATTACHMENT X (optional)

## OTHER PUBLIC HEALTH ACTIVITIES IN THE COUNTY WHICH SUPPLEMENT THE ACTIVITIES OF THE COUNTY PUBLIC HEALTH UNIT (Programs Not Financed Through The Public Health Unit Trust Fund)

Activity/Program	Relationship (Contract, Memorandum of Agreement, etc.)	Contractor or Sponsor of an Agreement	Provider	Amount
<u>State Funded</u> : Prenatal Program	Contract	Department of HRS & Nassau County Health Department	University Hospital of Jacksonville	\$ 16,101.00

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County Funded:

Not Applicable

## ATTACHMENT XI

## PROGRAM SPECIFIC REPORTING REQUIREMENTS

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Some health services must comply with specific reporting requirements in addition to the CIS/HMC minimum data set and the SAMAS 2.2 requirements because of federal or state law, regulation or rule. If a county public health unit is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

	Service	Requirement
1.	Sexually Transmitted Disease Program	Morbidity, screening and surveillance reports specified by the department.
2.	Dental Health	Monthly reporting on HRSH Form 1008 and HRSM 50-11.
3.	WIC	Service documentation and monthly financial reports as specified in HRSM 150-24.
4.	Improved Pregnancy Outcome Program	Quarterly reports on services, results of services and expenditures on HRSH 3096.
5.	Improved Pregnancy Outcome/ Vital Records Reporting	Code all certificates of live birth and certificates of fetal death to delineate the source of the prenatal care as required in HRSM 150-13 and the Florida Vital Statistics Code Manual.
6.	Family Planning	Periodic financial and programmatic reports as specified in HRSM 150-27, Chapter 14.
7.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability and the assessment of various immunization levels.
8.	Primary Care	(Reporting requirements to be provided.)

#### ATTACHMENT XII

## PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with the specifics of their program manual to satisfy federal and state law, regulation or rule. If the county public health unit contract includes funds to provide one of these programs, the county public health unit must comply with the details of the manual(s) related to that program. The programs and their required manual are as follows:

	Service	Requirement			
1.	Improved Pregnancy Outcome	HRSM 150-13			
2.	School Health Services	HRSM 150-25, including the requirement for an annual plan as a condition for receipt of funding.			
3.	Family Planning	HRSR 150-27, Chapter 14, and all other manuals pertaining to the Family Planning Program.			
4.	WIC	HRSM 150-24, and all other manuals pertaining to the WIC program.			
5.	AIDS	HRSM 150-30 · .			

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## ATTACHMENT XIII

## FAMILY PLANNING PROGRAM (This attachment must be completed for all county public health units which have a Family Planning Program)

#### A. Special Provisions

- 1. At least 90 percent of the clients served by the county public health unit in the family planning program shall have incomes at or below 150 percent of the OMB poverty level.
- 2. The county public health unit will conduct the following activities to help prevent adolescent pregnancy:

1) Family Planning services provided on sliding scale fee schedule

as approved by State.

2) Educational classes provided by Family Health Services,

Jacksonville.

3) Individual and group counselling.

3. The following agencies and organizations provide family planning services in the county in addition to the county public health unit:

Private Medical Doctors.

4. The planned budget for the county public health unit's family planning program, by source of revenue, is specified in Section B of this attachment.

Object Class		Title X	General Revenue	Title XIX	Other COUNTY	Fees and 3rd Party	Total
Personnel Salaries	\$ 90,936.00		\$ 64,565.00.		\$17,879.00	\$ 8,492.00	\$ 90,936.00
Fringe Benefits	19,985.00		14,189.00		5,796.00		19,985.00
Other Travel Conferences Medical	10,000.00 11,000.00	8,492.00		12,000.00		8,508.00	29,000.00
Supplies Lab OCO Contracts	7,000.00	0.205.00					0.000.00
	8,306.00	8,306.00					8,306.00
Total	\$ 148,227.00	\$ 16,798.00	\$ 78,754.00	\$ 12,000.00	\$23,675.00	\$17,000.00	\$148,227.00

## B. COUNTY PUBLIC HEALTH UNIT PLANNED FAMILY PLANNING BUDGET FOR CONTRACT YEAR October 1, 198\_ to September 30, 198\_

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## ATTACHMENT XIV

## IMPROVED PREGNANCY OUTCOME PROGRAM (IPO) (This attachment must be completed for all county public health units which have an IPO program)

- A. General information pertaining to the county public health unit Improved Pregnancy Outcome Program:
  - 1. The following financial criteria will be used to determine eligibility for the IPO program:

See Attached Fee Schedule.

2. Screening for financial eligibility will be conducted by the county public health unit position or by the unit (County Social Services, etc.) identified below:

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Clerk IV - #45462

 The county public health unit intends to serve Medicaid eligible clients in its IPO program.

yes X no \_\_\_\_\_

4. Medicaid eligible clients who are <u>not</u> served by the county public health unit IPO program will receive prenatal care from (e.g., private physicians, primary care centers, etc.):

Private Physicians.	 	 	
It is expected that a total	women	served	

5. It is expected that a total of <u>137</u> women will be served in the IPO program. Of this number, approximately <u>1/3</u> will be Medicaid eligible or have some other 3rd party payor support and approximately <u>2/3</u> will not be eligible for Medicaid and will not have any other 3rd party payor support.

6.	IPO patients will deliver at (identify the hospital, birth center, etc.):					
	University Hospital of Jacksonvill	e				
	· · · · · · · · · · · · · · · · · · ·					
7.	Deliveries for IPO patients will be performed by (identify if OB/GYN or oth physician, certified nurse midwife, physician on-call, etc.): C.N.M. and OB Physician Resident on-call.					
	· ·					
8.	The county public health unit will be noti identified below:	fied of patient deliveries by the proce				
	Discharge summaries mailed to health department.					
	•	۰				
₹.	Payment for hospital delivery costs for IPO patients is the responsibility of:					
	the IPO project <u>X</u> the patient specify:					
).	Prenatal and postpartum care for IPO pa staff or contract personnel:	atients will be provided by the followi				
	Staff, By Classification	Contract Personnel, By Type				
	A.R.N.P., OB/Gyn.	A.R.N.P., F.P.N.				
	<u>Midwives, University Hospital</u> of Jacksonville					
	Resident, University Hospital					
	of Jacksonville <u>Clerk, University Hospital of</u>					
	Jacksonville					
	Direct Services Aides W.I.C. Staff (Nutritionist &					
	Clerk)					
	C.H. Nurse					

11. Patient education will be provided as follows:

Individual counselling and films. The Fernandina Beach clinic has had weekly child birth education classes provided by Child Birth Education Association of Jacksonville since June of 1985.

12. Patient follow-up will be accomplished as follows:

1) Hame visits by C.H.N. (A.R.N.P.).

2) Physical exams at health department both prenatal and postnatal.

3) Referral to Family Planning clinic and Well child clinic, postnatal.

13. The county public health unit will ensure that IPO patients return for postpartum exams, family planning and well-infant clinics by the procedure described below:

Patients are requested to call the clinic as soon as they deliver.

The community Health Nurse tries to visit within two weeks to give

family planning counselling and supplies. Clients posted for exams

and not showing are contacted by mail or phone and new appointment is given.

- 14. The county public health unit shall input into the CIS/HMC system on a timely basis the number of services provided and the number of clients served by all subcontractors who are funded by it to provide IPO services.
- B. Special Requirements For Subcontractors:

The following requirements shall be included in all subcontracts with any agency, organization or person whom the county public health unit funds to provide IPO services:

- 1. The subcontractor shall provide whatever service and client data the county public health unit requires to enable the county public health unit to enter this information for the subcontract into the CIS/HMC contract management system. The subcontractor shall submit such data in the format and according to the schedule specified by the county public health unit.
- 2. The subcontractor shall provide whatever financial and outcome data the county public health unit requires to enable the county public health unit to complete its Quarterly IPO Status Report. The subcontractor shall submit such data in the format and according to the schedule specified by the county public health unit.
- 3. The subcontract shall comply with the personal health clinic standards and the IPO standards specified in the department's Performance Review System and HRS 150-13.

## ATTACHMENT XV

#### PRIMARY CARE PROGRAM

(This attachment must be completed for all county public health units which have a Primary Care Program funded in whole or in part by the Health Care Access Act, Subsection 409.266(6)(b), Florida Statutes)

#### NOT APPLICABLE

- A. The county public health unit shall:
- 1. Provide the services according to the schedule of hours described, including 24 hour coverage.
- 2. Provide medical supervision as appropriate and approved by the department.
- 3. Conduct a quality assurance program satisfactory to the department.
- 4. Participate in program accreditation activities and costs as requested by the department with the objective of becoming accredited within five years.
- 5. Participate in the department's developmental activities related to a standard medical records system that will be used by all primary care contractors.
- 6. Make available to department representatives the medical and dental records of program patients for review.
- 7. Provide the department with utilization, cost and revenue reports in the form and frequency specified by the department.
- 8. Make available to department representatives all files and records of program patients for review.
- 9. Charge fees for services rendered in accordance with a fee schedule approved by the county and the department.
- 10. Identify the fees collected from the primary care program in its accounting system. Primary care fees collected by the county public health unit must be deposited in the County Public Health Unit Trust Fund and shall only be used to support the primary care program funded by this contract. Fees collected by any subcontractors must be used exclusively for the primary care program funded by this contract. All fees collected in excess of budgeted amounts by any subcontractors must be deposited in the County Public Health Unit Trust Fund. All fees collected in excess of budgeted amounts must be used for the primary care program and as approved by the department through a contract amendment.
- Apply a schedule of discounts to fees charged to individuals with family incomes below 200 percent of the federal (OMB) poverty guidelines. Individuals with family incomes below the poverty level must receive 100 percent discounts.
- 12. Ensure that funds provided by the Health Care Access Act for the primary care program and any fees collected for services provided in this primary care program do not supplement funds from any other sources used to support public health services provided by the contractor and its subcontractors.
- 13. Provide the Health Program Office in the department with copies of all subcontracts.

1.	The hours of op	peration for the primary care prog	ram will be:			
2.	Twenty-four hour coverage for primary care patients will be provided by:					
3.	The location and general description of the facility (facilities) to be used deliver services is:					
4.		ancillary services will be provide	d onsite, or by the designate			
	contractor:	Onsite	Contract			
	Laboratory		Contract			
	X-ray	······································				
	Pharmacy		6			
	Dental					
5.	The referral ar	rangements for speciality care wil	ll be as follows:			
6.	Agreements fo	r hospitalization are as follows:				
•	-10					
7.	Patient case management and outreach will be conducted as follows:					

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## C. Organization (Complete For CPHU Programs)

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The slidin	g fee scale for the primary care program is attached.
The mech regarding	anism to be employed to assure that feedback is received from p their satisfaction with the program will be:
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D.	Budget	(Complete	for CPHU	Programs)

2. Total amount of Florida Health Care Access Program contract:

3. Total collections:

4. Total county and other funds:

\_\_\_\_\_

5. Total in-kind contributions:

## E. Budget (Combines CPHU and Subcontractor Budgets)

Total amount of budget:

2. Total amount of Florida Health Care Access Program contract:

3. Total estimated collections:

4. Total county and other funds:

5. Total in-kind contributions:

F. Total Encounter and Users (Combine CPHU Subcontract)

	CPHU	Subcontractors	Totals
Encounters			
Users			

## ATTACHMENT XVI

## AIDS

(Special provisions will be required for all county public health units which receive special funding or alternate testing sites for the AIDS program.)

NOT APPLICABLE

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