

**CONTRACT BETWEEN
NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE NASSAU COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2000-2001**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the Nassau County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2000.

RECITALS

A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. Nassau County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.

2. TERM. The parties mutually agree that this Agreement shall be effective from October 1, 2000, through September 30, 2001, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.

3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:

a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4.

FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility (direct contribution excluding any state authorized fees or "OTHER" state revenues) as provided in Attachment II, Part II is an amount not to exceed \$1,584,283. The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility (direct contribution excluding any fees or "OTHER" local revenues) as provided in Attachment II, Part II is an amount not to exceed \$612,878.

b. Overall expenditures will not exceed available funding (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. These fees are listed in Attachment II Part II. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.

d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.

e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund
Nassau County
Post Office Box 517
Fernandina Beach, FL 32035-0517

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that noncategorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year.

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Client Information System/Health Management Component compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment VI.

c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

i. The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).

ii. The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;

iii. Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;

iv. The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Nassau County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the state or county, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by state and county based on the ratio of planned expenditures in the core contract, then funding from

all sources is credited to the program accounts by state and county. The equity share of any surplus/deficit funds accruing to the state and county is determined each month and at contract year end. 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. The planned use of surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment duly signed by both parties to this contract and the proper budget amendments unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and recordkeeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by county government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been

initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise excepted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 455.667, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated September 1997, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using county procedures pursuant to paragraph 6.b. hereof.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the county that shall include at least the following:

i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

ii. A written explanation to the county of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the cumulative amount of the variance between actual and planned expenditures does not exceed one percent of the cumulative expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

p. The dates for the submission of quarterly reports to the county shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

i. March 1, 2001 for the report period October 1, 2000 through December 31, 2000;

ii. June 1, 2001 for the report period October 1, 2000 through March 31, 2001;

iii. September 1, 2001 for the report period October 1, 2000 through June 30, 2001; and

iv. December 1, 2001 for the report period October 1, 2000 through September 30, 2001.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the county shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The county shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as county vehicles. The county shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department trust fund shall be sold at fair market

value when they are no longer needed by the CHD and the proceeds returned to the County Health Department trust fund.

8. TERMINATION.

a. Termination at Will. This Agreement may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

b. Termination Because of Lack of Funds. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

c. Termination for Breach. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement 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 this Agreement.

MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2001, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.

b. Modification. This Agreement and its Attachments contain all of the terms and conditions agreed upon between the parties. Modifications of this Agreement shall be enforceable only when reduced to writing and signed by all parties.

c. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

J. A. Pearson
Name

Business Manager
Title

P. O. Box 517

Fernandina Beach, FL
Address

(904) 277-7287
Telephone

For the County:

J. M. Oxley, Jr.
Name

Ex-Officio Clerk
Title

P. O. Box 1010

Fernandina Beach, FL
Address

(904) 321-5700
Telephone

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

d. Captions. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this 31 page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2000.

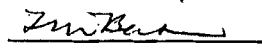
**BOARD OF COUNTY COMMISSIONERS STATE OF FLORIDA
FOR NASSAU COUNTY**

DEPARTMENT OF HEALTH

SIGNED BY: 

NAME: J. H. Ceepex
Nick D. Deonas
TITLE: Chairman


DATE: 9/18/00

SIGNED BY: 

NAME: Robert G. Brooks
TITLE: Secretary


DATE: 9/28/00

ATTESTED TO:

SIGNED BY: 

NAME: J. M. Oxley, Jr.
TITLE: Ex-Officio Clerk

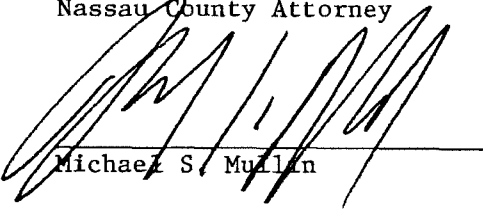
DATE: 9/18/00

SIGNED BY: 

NAME: E. J. Ngo-Seidel, MD
TITLE: CHD Director

DATE: 9-7-00

Approved as to Form by the
Nassau County Attorney


Michael S. Mullin

ATTACHMENT I

PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING
COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and 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 health department 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:

<u>Service</u>	<u>Requirement</u>
1. Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3 and F.S.384 and the CHD Guidebook Internal Operating Policy STD 6 and 7.
2. Dental Health	Monthly reporting on DH Form 1008*.
3. Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4. Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the Healthy Start Standards and Guidelines 1998 and as specified by The Healthy Start Coalitions in contract with each county health department.
5. Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6. Immunization	Periodic reports as specified by the department regarding the surveillance/ investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7. CHD Program	Requirements as specified in HRSM 150-3* and HRSM 50-9*.
8. Chronic Disease Program	Requirements as specified in the Community Intervention Program (CIP) and the CHD Guidebook.
9. Environmental Health	Requirements as specified in DHP 50-4* and 50-21*.

ATTACHMENT I (Continued)

10. HIV/AIDS Program Requirements as specified in Florida Statue 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting on CDC Forms 50.42B (Adult/ Adolescent) and 50.42A (Pediatric). Socio-demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request Form 1628 or Post-Test Counseling Form 1633. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.
11. School Health Services HRSM 150-25*, including the requirement for an annual plan as a condition for funding.

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

PART I. PLANNED USE OF COUNTY HEALTH UNIT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/00	Estimated County Share of CHD Trust Fund Balance as of 09/30/00	Total
1. CHD Trust Fund Ending Balance 09/30/00	36,568	194,555	231,123
2. Drawdown for Contract Year October 1, 2000 to September 30, 2001	0	0	0
3. Special Capital Project use for Contract Year October 1, 2000 to September 30, 2001	0	0	0
4. Balance Reserved for Contingency Fund October 1, 2000 to September 30, 2001	36,568	194,555	231,123

Note: The total of items 2, 3 and 4 must equal the ending balance in item 1.

Funds designated for Special Capital Projects must be used for capital projects and durable goods without significant recurring costs. Examples of projects meeting this criteria include construction and renovation of facilities and associated infrastructure; purchase of information system hardware/software and purchase of telecommunications equipment. Examples of items not meeting this criteria include grant funds for direct services such as tobacco prevention and provision of child safety seats; staff salaries; retirement obligations; rent/leases and funds held in anticipation of Medicaid paybacks and/or budget reductions. Special capital project amounts in "3" above should reflect the total amount of funds anticipated to be expended for special capital projects during the contract year. This includes funds to complete unfinished projects from previous years as well as for projects initiated during the contract year. More detailed Special Capital Project information, including description and cost by each project, must be listed in Attachment V.

ATTACHMENT II

NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

		CHD Trust Fund (cash)	Other Contributions	Total
STATE				
1. GENERAL REVENUE				
015050	ALG/Contributions To CHD (050329)	609,753	0	609,753
015011	ALG/Cont to CHD Primary Care (050329)	6,500	0	6,500
015065	ALG/Cont to CHD AIDS Prev & Surv & Field Staff (050329)	0	0	0
015050	ALG/Cont to CHD Mig Lbr Camp San (050329)	0	0	0
015050	ALG/Cont to CHD Home Hlth Pilot Proj (050329)	0	0	0
015050	ALG/Cont to CHD-Sovereign Immunity (050329)	0	0	0
015050	ALG/Cont to CHDs Pinellas Indigent Dentl Clinic-UF (050329)	0	0	0
015050	ALG/Cont to CHDs-Dental Program (Cat. 050329)	33,500	0	33,500
015050	ALG/Cont to CHDs Immun Outreach Teams (050329)	4,885	0	4,885
015050	ALG/Cont to CHDs Comm TB Program (050329)	9,613	0	9,613
015050	ALG/Cont to CHDs Indoor Air Assist (050329)	0	0	0
015050	ALG/Cesspool Identification and Elimination (Cat. 050329)	0	0	0
015048	ALG/Cont to CHD STD Program (050329)	0	0	0
015037	ALG/Cont to CHDs Mtrnl & Chld Hlth Field Staff Cost (050329)	0	0	0
015050	Epidemiology Trning & Clinical Supp-Wakulla (CAT. 050329)	0	0	0
015123	ALG/Family Planning (050001)	33,834	0	33,834
015123	ALG/Family Planning Planned Parenthood NE FL (CAT. 050001)	0	0	0
015123	ALG/Family Planning (CAT. 050001) - Alachua Colposcopy	0	0	0
015065	ALG/Cont to CHD AIDS Pat Care (050026)	0	0	0
015115	ALG/School Health Sves (051106)	53,044	0	53,044
015140	ALG/School Health Supplemental (051106)	0	0	0
015124	ALG/IPO-Healthy Start/IPO (050707)	0	0	0
015124	ALG/IPO-Infant Mortality Project (CAT. 050707)	0	0	0
015124	ALG/IPO - Outreach Social Workers (CAT. 050707)	0	0	0
015137	ALG/IPO Healthy Start Resource Moms & Dads (050707)	0	0	0
015137	ALG/Community Health Initiatives (052250)	0	0	0
015137	ALG/IPO-Healthy Start-Data Collect. Prj Staff (CAT. 050707)	0	0	0
015124	ALG/MCH-Healthy Start/IPO (050870)	0	0	0
015124	ALG/IPO Outreach Social Workers (CAT 050870)	0	0	0
015124	ALG/MCH-Infant Mortality Project (CAT. 050870)	0	0	0
015123	Planned Parent Hood - Collier and Sarasota (CAT. 050329)	0	0	0
015012	G/A Epilepsy Services (050082)	0	0	0
015011	ALG/Primary Care (050331)	123,500	0	123,500
015050	CATE-Environmental Community-Escambia (052250)	0	0	0
015050	New Horizons/Health Prevention-Dade (052250)	0	0	0
015050	Interdiscip. Mngd Care Initiative-Flagler & Volusia (052250)	0	0	0
015050	Isabel Collier Read Prentl Care Clinic-Collier & Lee(052250)	0	0	0
015050	Primary Care Outrch Prgm-Sun coast Hosp-Pinellas (052250)	0	0	0
015050	Dunbar Health Center-Lee (052250)	0	0	0
015050	Roosevelt Sands Comm. Healthcare Ctr.-Monroe (052250)	0	0	0
015050	Medivan Project/Elderly Interest-Broward (052250)	0	0	0
015050	Healthy Beaches Monitoring	0	0	0
GENERAL REVENUE TOTAL		874,629	0	874,629
2. NON GENERAL REVENUE				
015010	ALG/Contr. to CHDs-Rebasing (050329) Tobacco TF	13,739	0	13,739
015072	ALG/Cont to CHD Safe Drinking Water-DEP (050329) Adm TF	0	0	0
015026	ALG/Cont to CHD Bio-Medical Waste/DEP (050329) /Adm TF	2,188	0	2,188
015170	Tobacco Coordination (106014) Tobacco TF	58,634	0	58,634
015172	Full Service Schools - Tobacco (102258) Tobacco TF	70,156	0	70,156
015174	Basic School Health - Tobacco (051106) Tobacco TF	17,818	0	17,818
015016	G/A Epilepsy Prev and Educ (050083) /Epilepsy TF	0	0	0
015084	Varicella Immunization Requirement (050329) Tobacco TF	2,580	0	2,580
015010	SUPER Act Program (050329) Adm TF	0	0	0
015020	Food and Waterborne Disease Program (050329) Adm TF	0	0	0

ATTACHMENT II

NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

		CHD Trust Fund (cash)	Other Contributions	Total
STATE				
2. NON GENERAL REVENUE				
015010	Pasco CHD Dental Program (050329) Tobacco TF	0	0	0
015010	Enhanced Dental Services (050329) Tobacco TF	16,500	0	16,500
015010	Fla Hepatitis & Liver Fail. Prev & Cnrl(050329)Tobacco TF	0	0	0
010304	Stationary Pollutant Storage-DEP	72,271	0	72,271
015121	Super Act Reimbursements	13,200	0	13,200
NON GENERAL REVENUE TOTAL		267,086	0	267,086
3. FEDERAL FUNDS				
015075	KidCare Outreach Program	0	0	0
015075	KidCare Outreach Refugee/Entrant	0	0	0
007065	FG TF/ AIDS Prevention	0	0	0
007066	FG TF/Ryan White	0	0	0
007066	FG TF/Ryan White	0	0	0
007066	FG TF/Ryan White- AIDS Drug Assist Prog.-Admin.	0	0	0
007062	FG TF/ AIDS Epidemiological Research Study	0	0	0
007049	FG TF/ALG/ Contr to CHDs-STD Prg-Infertility Prg	0	0	0
007049	FG TF/ALG/ Contr to CHDs-STD Prg-Syphilis Elimination	0	0	0
007049	FG TF/ALG/ Contr to CHDs-STD Program	0	0	0
007067	Tuberculosis Control - Federal Grant	0	0	0
007084	Immunization Special Project	2,362	0	2,362
007084	FG TF/ALG/Contr to CHDs-Immunization Action Plan	4,356	0	4,356
007085	Breast and Cervical Cancer-Client Services	0	0	0
007085	Breast and Cervical Cancer-Admin/Case Management	0	0	0
007084	FG TF/ALG/Contr to CHDs-Project Field Staff	0	0	0
007084	Immunization Action Plan-WIC Immunization Linkage	0	0	0
007133	ALG/Family Planning Title X-Sterilizations	5,692	0	5,692
007127	ALG/MCH-MCH Blk Grt.-Child Health	10,683	0	10,683
007134	ALG/MCH-MCH Blk Grt Outreach Soc Wrkrs	0	0	0
007134	ALG/MCH-MCH Blk Grt-Outreach Soc Wrkrs	0	0	0
007134	ALG/MCH-MCH Blk Grt.-IPO Infant Mort. Proj.	0	0	0
007132	ALG/MCH-MCH Blk Grt.-Dental Projects	30,300	0	30,300
007134	ALG/IPO/MCH-Infant Mortality Project	0	0	0
007134	ALG/IPO-MCH Blk. Grt.-IPO-Gadsden Sch Clinic	0	0	0
007127	ALG/MCH-MCH Blk Grt-Child Health Ages 0-1 Yr.	0	0	0
007134	ALG/MCH Blk Grt-Healthy Start/IPO	0	0	0
007134	ALG/IPO-MCH Blk Grt- Healthy Start/IPO	0	0	0
007063	Prev Hlth Blk Grt/HERR-Chronic Disease Init.	50,787	0	50,787
007133	ALG/Grants & Aids-Fam Plng Svcs-Title X	23,261	0	23,261
007133	ALG/Fam Plng -Title X-Duval The Bridge	0	0	0
015075	ALG/Fam Plng - Pregnancy Prev-TANF	12,427	0	12,427
007133	ALG/Grants & Aids-Fam Plng-Special Contracts-Title X	0	0	0
007030	Migrant Labor Sanitation	0	0	0
007056	FG TF Health Program for Refug. (180000)	0	0	0
007068	FGTF/Federal Grants-AIDS Inmate Intervention	0	0	0
007069	Minority Involvement in HIV/AIDS Program	0	0	0
007064	FG/TF AIDS Seroprevalence	0	0	0
007064	FG/TF AIDS Surv/Serop	0	0	0
007051	WIC Infrastructure Grant 2000-2001	0	0	0
007051	FG TF WIC Admin Transfer (050329)	295,684	0	295,684
007135	TANF Abstinence Education	0	0	0
007135	Abstinence Education Program Fed Grants TF	0	0	0
015075	G/A Epilepsy Services-TANF	0	0	0
007049	ALG/Contr to CHD-STD-Medical & Lab Svc Trng Ctr	0	0	0
015075	Full Service Schools-TANF	7,016	0	7,016
015075	ALG/School Health-Supplement-TANF	0	0	0

ATTACHMENT II

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

		CHD Trust Fund (cash)	Other Contributions	Total
STATE				
3. FEDERAL FUNDS				
007058	FG/TF Diabetes Control	0	0	0
007044	Prev Hlth Blk Grt/Rape Awareness	0	0	0
FEDERAL FUNDS TOTAL		442,568	0	442,568
4. FEES ASSESSED BY STATE OR FEDERAL RULES				
001091	Communicable Disease Fees	0	0	0
001092	Environmental Health Fees	130,922	0	130,922
001113	Mobile Home and Parks	2,948	0	2,948
001132	Food Hygiene Permit	5,490	0	5,490
001092	OSDS Repair Permit	0	0	0
001092	OSDS Permit Fee	0	0	0
001211	Safe Drinking Water	0	0	0
001136	I & M Zoned Operating Permit	0	0	0
001092	Acrobic Operating Permit	0	0	0
001092	Septic Tank Site Evaluation	0	0	0
001139	Migrant Housing Permit	0	0	0
001140	Biohazard Waste Permit	1,800	0	1,800
001166	Non-SDWA System Permit	0	0	0
001142	Non SDWA Lab Sample	2,035	0	2,035
001144	Tanning Facilities	2,624	0	2,624
001145	Swimming Pools	12,452	0	12,452
001166	Public Water Constr Permit	6,368	0	6,368
001165	Private Water Constr Permit	108	0	108
001166	Public Water Annual Oper Permit	0	0	0
001170	Lab Fee Chemical Analysis	0	0	0
001026	Returned Check Ser Fees	75	0	75
010403	Fees-Copy of Public Doc	432	0	432
015055	Registar Fees (Ch. 382.34)	0	0	0
001135	OSDS Variance Fee	300	0	300
015052	Transfers-Mobile Home/RV Park	0	0	0
001149	Body Piercing	135	0	135
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL		165,689	0	165,689
5. OTHER CASH CONTRIBUTIONS				
090001	Draw down from Public Health Unit	0	0	0
OTHER CASH CONTRIBUTIONS TOTAL		0	0	0
6. MEDICAID				
001056	CHD Incm:Medicaid-Pharmacy	0	0	0
001080	CHD Incm:Medicaid-Other	2,721	0	2,721
001081	CHD Incm:Medicaid-EPSDT	4,920	0	4,920
001082	CHD Incm:Medicaid-Dental	98,358	0	98,358
001083	CHD Incm:Medicaid-FP	5,112	0	5,112
001084	CHD Incm:Medicaid-Physician	19,074	0	19,074
001085	CHD Incm:Medicaid-Nursing	1,044	0	1,044
001086	CHD Incm:Co-Insurance	0	0	0
001087	CHD Incm:Medicaid-STD	0	0	0
001088	CHD Incm:Med Reimb AZT Disp Fee	0	0	0
001089	Medicaid AIDS	0	0	0
001147	Medicaid HMO Rate	0	0	0
001148	Medicaid-HMO Admin	0	0	0
001181	CHD Incm:Medicaid Transportation	0	0	0
001190	Health Maintenance Organ. (HMO)	0	0	0
001191	CHD Incm:Medicaid Maternity	0	0	0

ATTACHMENT II

NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

	CHD Trust Fund (cash)	Other Contributions	Total
STATE			
6. MEDICAID			
001192 CHD Incm:Medicaid Comp. Child	0	0	0
001193 CHD Incm:Medicaid Comp. Adult	0	0	0
001194 CHD Incm:Medicaid Sonagram	0	0	0
001208 Medipass \$3.00 Adm. Fee	8,691	0	8,691
MEDICAID TOTAL	139,920	0	139,920
7. ALLOCABLE REVENUE			
011007 Cash Donations Private	0	0	0
001029 Third Party Reimbursement	0	0	0
010301 Exp Witness Fee Consulnt Charges	0	0	0
005040 Interest Erned State Investment	5,118	0	5,118
005041 Interest Erned Local Investment	5,119	0	5,119
007010 U.S. Grants Direct to CHD	0	0	0
008094 Grnts/Contracts other Agencies Direct	0	0	0
011098 Donation School Based Clinic	0	0	0
011099 Other Grants/Donations Direct	50	0	50
012020 Fines and Forfeitures	0	0	0
018001 Refunds, Salary	125	0	125
018003 Refunds, other Personal Services	0	0	0
018004 Refunds, Expenses	750	0	750
018006 Refunds, Operating Capital Outlay	0	0	0
018010 Refunds, Special Category	0	0	0
018011 Refunds, Other	0	0	0
018099 Refunds, Certified Forward	0	0	0
037000 Prior Year Warrant	0	0	0
038000 12 Month Old Warrant	0	0	0
010300 Sale of Goods and Services	0	0	0
010402 Recycle Paper Sales	0	0	0
010403 Fees-Copies of Documents	0	0	0
010405 Sale of pharmaceuticals	0	0	0
011055 Other Grant DOE	0	0	0
012021 Return Check Charge	0	0	0
018005 Refunds Grants to Local Gov't	0	0	0
029010 Sale of Fixed Assets	0	0	0
ALLOCABLE REVENUE TOTAL	11,162	0	11,162
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND			
State Pharmacy Services	0	51,246	51,246
State Laboratory Services	0	59,283	59,283
State TB Services	0	0	0
State Immunization Services	0	39,843	39,843
State STD Services	0	0	0
State Construction/Renovation	0	0	0
WIC Food	0	559,718	559,718
Other (specify)	0	0	0
Other (specify)	0	0	0
Other (specify)	0	0	0
Other (specify)	0	0	0
OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND TOTAL	0	710,090	710,090
TOTAL STATE CONTRIBUTIONS	1,901,054	710,090	2,611,144

ATTACHMENT II

NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

		CHD Trust Fund (cash)	Other Contributions	Total
COUNTY				
1. BOARD OF COUNTY COMMISSIONERS ANNUAL APPROPRIATIONS:				
008030	Grants-County Tax Direct	612,878	0	612,878
008034	Grants Cnty Commsn Other	0	0	0
	BOARD OF COUNTY COMMISSIONERS ANNUAL APPROPRIATIONS	612,878	0	612,878
2. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION:				
001077	Primary Care Fees	45,407	0	45,407
001093	Communicable Disease Fees	616	0	616
001094	Environmental Health Fees	32,275	0	32,275
001114	New Birth Certificates	2,247	0	2,247
001115	Death Certificates	11,723	0	11,723
001116	Computer Access Fee	0	0	0
001060	Vital Statistics Fees Other	0	0	0
001004	Child Car Seat Prog	105	0	105
001074	Adult Enter. Permit Fees	0	0	0
001195	Primary Care Transfer Fees	0	0	0
001117	Vital Stats-Adm. Fee 50 cents	154	0	154
001196	Water Analysis-Potable	0	0	0
	FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION TOT.	92,527	0	92,527
3. OTHER CASH AND LOCAL CONTRIBUTIONS				
090002	Draw down from Public Health Unit	0	0	0
001090	Medicare	10,752	0	10,752
008050	Grants-Cnty Sch Board Direct	83,914	0	83,914
008010	Grants Contracts Frm Cities Direct	0	0	0
008033	County Contributions For Facilities	0	0	0
008090	Grants other Local Govn't Direct	0	0	0
008095	Grants Cnty Sect 403.102 Air Pol	0	0	0
008099	Reimb/Rebate Local Govn't	0	0	0
008031	County AIDS Education	0	0	0
	OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	94,666	0	94,666
4. ALLOCABLE REVENUE				
011007	Cash Donations Private	11	0	11
001029	Third Party Reimbursement	434	0	434
010301	Exp Witness Fee Consultnt Charges	0	0	0
005040	Interest Erned State Investment	0	0	0
005041	Interest Erned Local Investment	0	0	0
007010	U.S. Grants Direct to CHD	0	0	0
008094	Grnts/Contracts other Agencies Direct	625,592	0	625,592
011098	Donation School Based Clinic	0	0	0
011099	Other Grants/Donations Direct	0	0	0
012020	Fines and Forfeitures	0	0	0
018001	Refunds, Salary	125	0	125
018003	Refunds, other Personal Services	0	0	0
018004	Refunds, Expenses	750	0	750
018006	Refunds, Operating Capital Outlay	0	0	0
018010	Refunds, Special Category	0	0	0
018011	Refunds, Other	0	0	0
018099	Refunds, Certified Forward	0	0	0
037000	Prior Year Warrant	0	0	0
038000	12 Month Old Warrant	0	0	0
010300	Sale of Goods and Services	0	0	0
010402	Recycle Paper Sales	0	0	0
010403	Fees-Copies of Documents	0	0	0

ATTACHMENT II

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

		CHD Trust Fund (cash)	Other Contributions	Total
COUNTY				
4. ALLOCABLE REVENUE				
010405	Sale of pharmaceuticals	0	0	0
011055	Other Grant DOE	0	0	0
012021	Return Check Charge	0	0	0
018005	Refunds Grants to Local Gov't	0	0	0
029010	Sale of Fixed Assets	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL		626,912	0	626,912
5. BUILDINGS:				
	Annual Rental Equivalent Value	0	110,148	110,148
	Maintenance	0	15,703	15,703
	Other (specify)	0	0	0
	Other (specify)	0	0	0
	Other (specify)	0	0	0
	Other (specify)	0	0	0
	Other (specify)	0	0	0
BUILDINGS TOTAL		0	125,851	125,851
6. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND				
	Other County Contribution (specify)	0	0	0
	Other County Contribution (specify)	0	0	0
	Other County Contribution (specify)	0	0	0
	Other County Contribution (specify)	0	0	0
	Other County Contribution (specify)	0	0	0
OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND TOTAL		0	0	0
TOTAL COUNTY CONTRIBUTIONS		1,426,983	125,851	1,552,834
GRAND TOTAL CHD PROGRAM		3,328,037	835,941	4,163,978

ATTACHMENT II

NASSAU COUNTY HEALTH DEPARTMENT

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2000 to September 30, 2001

	FTE's (0.00)	Clients		Quarterly Expenditure Plan				County	State	Grand Total
		Units	Services	1st	2nd (Whole dollars only)	3rd	4th			
A. COMMUNICABLE DISEASE CONTROL:										
Immunization (101)	2.40	0	4,400	25,822	25,822	25,822	25,822	53,680	49,608	103,288
STD (102)	0.20	100	237	4,432	4,432	4,432	4,432	13,296	4,432	17,728
A.I.D.S. (103)	1.20	219	680	14,091	14,091	14,091	14,091	28,182	28,182	56,364
TB Control Services (104)	0.20	173	377	3,681	3,681	3,681	3,681	4,908	9,816	14,724
Commn. Disease Surv. (106)	0.40	0	211	9,218	9,218	9,218	9,218	36,872	0	36,872
Hepatitis Prevention (109)	0.00	0	0	0	0	0	0	0	0	0
Vital Statistics (180)	0.40	0	0	3,886	3,886	3,886	3,886	15,544	0	15,544
COMMUNICABLE DISEASE SUBTOTAL	4.80	492	5,905	61,130	61,130	61,130	61,130	152,482	92,038	244,520
B. PRIMARY CARE:										
Chronic Disease Services (210)	1.60	65	637	25,445	25,445	25,445	25,445	50,993	50,787	101,780
Tobacco Prevention (212)	1.20	0	360	18,714	18,714	18,714	18,714	6,804	68,052	74,856
Home Health (215)	0.00	0	0	0	0	0	0	0	0	0
W.I.C. (221)	8.80	1,586	10,507	86,584	86,584	86,584	86,584	0	346,336	346,336
Family Planning (223)	7.00	1,040	4,411	81,900	81,900	81,900	81,900	144,678	182,922	327,600
Improved Pregnancy Outcome (225)	0.20	0	645	2,964	2,964	2,964	2,964	5,030	6,826	11,856
Healthy Start Prenatal (227)	2.60	424	6,115	42,933	42,933	42,933	42,933	92,390	79,342	171,732
Comprehensive Child Health (229)	10.80	1,020	1,548	104,838	104,838	104,838	104,838	294,586	124,766	419,352
Healthy Start Infant (231)	1.60	84	851	25,648	25,648	25,648	25,648	51,296	51,296	102,592
School Health (234)	4.60	0	88,204	82,489	82,489	82,489	82,489	197,376	132,580	329,956
Comprehensive Adult Health (237)	13.60	1,060	8,597	154,120	154,121	154,120	154,121	206,026	410,456	616,482
Dental Health (240)	3.40	1,200	20,271	33,088	33,088	33,088	33,088	15,474	116,878	132,352
PRIMARY CARE SUBTOTAL	55.40	6,479	142,146	658,723	658,724	658,723	658,724	1,064,653	1,570,241	2,634,894
C. ENVIRONMENTAL HEALTH:										
Private Water System (357)	0.60	36	333	6,003	6,003	6,003	6,003	12,006	12,006	24,012
Public Water System (358)	0.00	0	0	0	0	0	0	0	0	0
Individual Sewage Disp. (361)	5.20	1,371	3,669	58,339	58,339	58,339	58,340	119,713	113,644	233,357
Food Hygiene (348)	0.20	17	81	2,310	2,310	2,310	2,310	4,620	4,620	9,240
Group Care Facility (351)	0.20	12	120	2,409	2,409	2,409	2,409	9,636	0	9,636
Migrant Labor Camp (352)	0.00	0	0	0	0	0	0	0	0	0
Housing, Public Bldg Safety, Sanitation (353)	0.00	0	0	0	0	0	0	0	0	0
Mobile Home and Parks Services (354)	0.20	28	59	1,623	1,623	1,623	1,623	3,246	3,246	6,492
Swimming Pools/Bathing (360)	0.60	124	253	6,226	6,226	6,226	6,226	12,452	12,452	24,904
Biomedical Waste Services (364)	0.20	16	64	1,942	1,942	1,942	1,942	3,884	3,884	7,768
Tanning Facility Services (369)	0.20	5	20	750	750	750	750	1,500	1,500	3,000
Rabies Surveillance/Control Services (366)	0.20	0	10	510	510	510	510	2,040	0	2,040
Arbovirus Surveillance (367)	0.00	0	0	0	0	0	0	0	0	0
Rodent/Arthropod Control (368)	0.00	0	0	0	0	0	0	0	0	0
Storage Tank Compliance (355)	1.60	105	420	19,432	19,432	19,432	19,432	5,457	72,271	77,728
Super Act Service (356)	0.60	4	507	7,576	7,576	7,576	7,576	15,152	15,152	30,304
Occupational Health (344)	0.00	0	0	0	0	0	0	0	0	0
Consumer Product Safety (345)	0.00	0	0	0	0	0	0	0	0	0

**ATTACHMENT II
NASSAU COUNTY HEALTH DEPARTMENT**

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2000 to September 30, 2001

	FTE's (0.00)	Clients		Quarterly Expenditure Plan				County	State	Grand Total
		Units	Services	1st	2nd (Whole dollars only)	3rd	4th			
C. ENVIRONMENTAL HEALTH:										
Emergency Medical (346)	0.00	0	0	0	0	0	0	0	0	0
Lead Monitoring Services (350)	0.00	0	0	0	0	0	0	0	0	0
Public Sewage (362)	0.00	0	0	0	0	0	0	0	0	0
Solid Waste Disposal (363)	0.00	0	0	0	0	0	0	0	0	0
Sanitary Nuisance (365)	0.20	53	135	2,611	2,612	2,611	2,612	10,446	0	10,446
Water Pollution (370)	0.20	0	2	2,424	2,424	2,424	2,424	9,696	0	9,696
Air Pollution (371)	0.00	0	0	0	0	0	0	0	0	0
Radiological Health (372)	0.00	0	0	0	0	0	0	0	0	0
Toxic Substances (373)	0.00	0	0	0	0	0	0	0	0	0
ENVIRONMENTAL HEALTH SUBTOTAL	10.20	1,771	5,673	112,155	112,156	112,155	112,157	209,848	238,775	448,623
D. SPECIAL CONTRACTS:										
Special Contracts (599)	0.00	0	0	0	0	0	0	0	0	0
SPECIAL CONTRACTS SUBTOTAL	0.00	0	0	0	0	0	0	0	0	0
TOTAL CONTRACT	70.40	8,742	153,724	832,008	832,010	832,008	832,011	1,426,983	1,901,054	3,328,037

ATTACHMENT III

CIVIL RIGHTS CERTIFICATE

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 provider agrees to complete the Civil Rights Compliance Questionnaire, HRS Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 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 contracts, 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 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 appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

ATTACHMENT VI

FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
Fernandina Beach Health Center And Administration	30 South 4 th Street Fernandina Beach, FL	County
Environmental Health Division	1015 South 14 th Street Fernandina Beach, FL	County
Healthy Families Program	1896 South 14 th Street Fernandina Beach, FL	County Lease
Yulee Health Center	528 Page's Dairy Road Yulee, FL	County
Dental Clinic/Health Education (Full Service School)	479 Felmore Road Yulee, FL	County
Callahan Health Center	208 Mickler Street Callahan, FL	County
Hilliard Health Center	211 Pecan Street Hilliard, FL	County

ATTACHMENT V

**DESCRIPTION OF USE OF CHD TRUST FUND BALANCES
FOR SPECIAL CAPITAL PROJECTS, IF APPLICABLE**
(From Attachment II, Part I)

None

DESCRIPTION OF SPECIAL CONTRACTS
(From Attachment II, Part III)

Please list separately

Special contracts are contracts for services for which there are no comparable services in the county health department core programs; no service codes in Departmental coding manuals; projects that are locally designed and have no standard statewide set of services and therefore cannot be accounted for within existing county health department programs. These contracts are coded to FLAIR Level 5:599 and include some contracts formerly handled at the district offices such as epilepsy, colposcopy, Project WARM, community planning and special family planning and teen mother projects.

None



**ATTACHMENT VI
ENVIRONMENTAL HEALTH - ESTIMATED ANNUAL FEE REVENUES
FISCAL YEAR 2000 - 2001
EFFECTIVE 07/01/2000**

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	Est. Annual Revenue Accruing to CHD TF
PUBLIC SWIMMING POOLS AND BATHING PLACES			
1. Annual Permit - Up to (and including) 25,000 gallons	75.00	67.50	2,768
1a. Transfer to headquarters		7.50	
2. More than 25,000 gallons	160.00	144.00	9,504
2a. Transfer to headquarters		16.00	
3. Exempted Condo Pools (over 32 units)	50.00	45.00	180
3a. Transfer to headquarters		5.00	
OTHER FEES			
Collected by the 12 delegated counties			
Broward, Dade, Duval, Hillsborough, Lee, Manatee,			
Collier, Palm Beach, Pinellas, Polk, Sarasota, Volusia, Escambia.			
Variances for Okaloosa, Santa Rosa, Walton counties			
are processed by Escambia County as follows:			
1. Plan review (new construction)	275.00	275.00	
2. Plan review for modification of original construction	100.00	100.00	
3. Plan/application review for bathing place development	275.00	275.00	
4. Initial operating permit	125.00	125.00	
5. Variance applications	240.00	216.00	
5.a. Transfer to Headquarters		24.00	
All other counties are to send the fee to Bureau of Facility			
Programs in Tallahassee or the Environmental Engineering			
section in Orlando as follows:			
1. Plan review (new construction)	275.00	275.00	
2. Plan review for modification of original construction	100.00	100.00	
3. Plan/application review for bathing place development	275.00	275.00	
4. Initial operating permit	125.00	125.00	
5. Variance applications	240.00	240.00	
MOBILE HOME & RECREATIONAL VEHICLE PARKS			
(FEES ARE PRORATED ON A QUARTERLY BASIS)			
1. Annual permit for 5 to 14 spaces	50.00	45.00	585
1a. Transfer to headquarters		5.00	
2. Annual permit for 15 to 171 spaces	3.50 per space		2,363
2a. Transfer to headquarters		10%	
3. Annual permit for 172 and above spaces	600.00	540.00	
3a. Transfer to headquarters		60.00	
MIGRANT LABOR CAMPS			
1. Annual permit for facilities with 5-50 occupants	125.00	125.00	
2. Annual permit for facilities with 51-100 occupants	225.00	225.00	
3. Annual permit for facilities with over 100 occupants	500.00	500.00	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	Est. Annual Revenue Accruing to CHD TF
BIOMEDICAL WASTE GENERATORS			
1. Initial permit	55.00	55.00	110
2. Renewal of annual permit(except physician office generating less than 25lbs/30 days) postmarked by October 1	55.00	55.00	1,540
2. Renewal of annual permit(except physician office generating less than 25lbs/30 days) postmarked after October 1	75.00	75.00	150
3. Storage facilities permit postmarked by October 1	55.00	55.00	
3. Storage facilities permit postmarked after October 1	75.00	75.00	
4. Treatment facilities operating permit by October	55.00	55.00	
4. Treatment facilities operating permit after October 1	75.00	75.00	
5. Transporter registration (one vehicle) postmarked by 10/1	55.00	55.00	
5. Transporter registration (one vehicle) after 10/1	75.00	75.00	
6. Transporter registration additional vehicle	10.00	10.00	
TANNING FACILITIES			
1. Annual license fee	150.00	135.00	1,485
1a. Transfer to headquarters		15.00	
2. Fee for each additional device	55.00	49.50	1,139
2.a. Transfer to headquarters		5.50	
3. Late fee	25.00	25.00	50
BODY PERIERCING			
1. Annual Licence Fee	150.00	135.00	135
1a. Transfer to headquarters		15.00	
2. Temporary Establishment	75.00	67.50	
2a. Transfer to headquarters		7.50	
3. Late fee	100.00	100.00	
FOOD ESTABLISHMENTS			
1. Annual Permit for Fraternal/Civic	160.00	144.00	288
1a. Transfer to headquarters		16.00	
2. Annual Permit School Cafeteria Operating for 9 months or less	130.00	117.00	1,755
2a. Transfer to headquarters		13.00	
3. Annual Permit School Cafeteria Operating for more than 9 months	160.00	144.00	
3a. Transfer to headquarters		16.00	
4. Annual Permit for Hospital/Nursing Food Service	210.00	189.00	756
4a. Transfer to headquarters		21.00	
5. Annual Permit for Movie Theaters	160.00	144.00	144
5a. Transfer to headquarters		16.00	
6. Annual Permit for Jails/Prisons	210.00	189.00	378
6a. Transfer to headquarters		21.00	
7. Annual Permit for Bars/Lounges (Drink Service Only)	160.00	144.00	1,152
7a. Transfer to headquarters		16.00	
8. Annual Permit for Residential Facilities	110.00	99.00	
8a. Transfer to headquarters		11.00	
9. Annual Permit for Child Care Centers without C&F license	85.00	76.50	77
9a. Transfer to headquarters		8.50	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	Est. Annual Revenue Accruing to CHD TF
10. Annual Permit for Limited Food Service	85.00	76.50	77
10a. Transfer to headquarters		8.50	
11. Annual Permit Other Food Service	160.00	144.00	864
11a. Transfer to headquarters		16.00	
12. Plan Review	\$35/hour	\$35/hour	70
13. Food Worker Training	10.00	10.00	
14. Request for Inspection	40.00	40.00	80
15. Reinspection (after the first reinspection)	30.00	30.00	30
16. Late Renewal	25.00	25.00	50
17. Alcoholic Beverage Inspection Approval	30.00	30.00	60
ONSITE SEWAGE DISPOSAL PROGRAM (OSTDS)			
1. Application for permitting of an onsite sewage treatment and disposal system which includes application and plan review for new and repair permits	25.00	23.00	13,800
1a. Transfer to headquarters		2.00	
2. Site evaluation for a new system	60.00	55.20	33,120
2a. Transfer to headquarters		4.80	
3. Site evaluation for a system repair or modification of system	40.00	36.80	2,944
3a. Transfer to headquarters		3.20	
4. Site re-evaluation, new or repair or modification	40.00	36.80	1,472
4a. Transfer to headquarters		3.20	
5. Permit for new systems, or modification to system	55.00	50.60	30,360
5a. Transfer to headquarters		4.40	
6. New system or system modification installation inspection	55.00	50.60	30,360
6a. Transfer to headquarters		4.40	
7. Research fee to be collected in addition, and concurrent with the permit for a new system installation fee until 6/30/2002.	5.00	5.00	
8. Repair permit issuance which includes inspection	50.00	41.40	3,312
8a. Transfer to headquarters		3.60	
8b. Transfer to headquarters for training center		5.00	
9. Inspection of system previously in use	50.00	46.00	5,750
9a. Transfer to headquarters		4.00	
10. Reinspection fee per visit for site inspections after system construction approval	25.00	23.00	2,760
10a. Transfer to headquarters		2.00	
11. Installation reinspection of non-compliant system per each site visit	25.00	23.00	
11a. Transfer to headquarters		2.00	
12. System abandonment permit, includes permit issuance and inspection	40.00	36.80	1,840
12a. Transfer to headquarters		3.20	
13. Annual operating permit fee for systems in IM and equivalent areas, and for systems receiving commercial waste	150.00	138.00	4,140
13a. Transfer to headquarters		12.00	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	Est. Annual Revenue Accruing to CHD TF
14. Amendments or changes to the operating permit during the permit period per change or amendment	25.00	23.00	
14a. Transfer to headquarters		2.00	
15. Aerobic treatment unit operating permit per annum	150.00	138.00	
15a. Transfer to headquarters		12.00	
16. Tank manufacturer's inspection per annum	100.00	50.00	
16a. Transfer to headquarters		50.00	
17. Septage disposal service permit per annum	50.00	46.00	138
17a. Transfer to headquarters		4.00	
18. Additional charge per pumpout vehicle	25.00	23.00	46
18a. Transfer to headquarters		2.00	
19. Portable or temporary toilet service permit per annum	50.00	46.00	46
19a. Transfer to headquarters		4.00	
20. Additional charge per pumpout vehicle	25.00	23.00	
20a. Transfer to headquarters		2.00	
21. Septage stabilization facility inspection fee per annum	150.00	138.00	138
21a. Transfer to headquarters		12.00	
22. Septage disposal site evaluation fee per annum	100.00	92.00	276
22a. Transfer to headquarters		8.00	
23. Aerobic treatment unit maintenance entity permit per annum	25.00	23.00	
23a. Transfer to headquarters		2.00	
24. Variance application for a single family residence per each lot or building site	150.00	75.00	300
24a. Transfer to headquarters		75.00	
25. Variance application for a multi-family or commercial building per each building site	200.00	100.00	
25a. Transfer to headquarters		100.00	
26. Inspection for construction of an injection well (FL Keys)	125.00	125.00	
Performance-based Treatment Systems			
1. Application for permitting of a new performance-based treatment system, which includes application and plan review	125.00	115.00	
1a. Transfer to headquarters		10.00	
2. Permit for new performance-based treatment system	125.00	115.00	
2a. Transfer to headquarters		10.00	
3. Installation inspection for new performance-based systems	75.00	69.00	
3a. Transfer to headquarters		6.00	
6. Research fee to be collected in addition, and concurrent with the permit for a new performance-based system installation fee	5.00	5.00	
4. Repair permit issuance which includes inspection	125.00	115.00	
4a. Transfer to headquarters		10.00	
5. Inspection of system previously in use	25.00	23.00	
5a. Transfer to headquarters		2.00	
6. Reinspection fee per visit for site inspections after system construction approval	25.00	23.00	
6a. Transfer to headquarters		2.00	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	Est. Annual Revenue Accruing to CHD TF
7. Installation reinspection of non-compliant system per each site visit	50.00	46.00	
7a. Transfer to headquarters		4.00	
8. System abandonment permit, includes permit issuance and inspection	75.00	69.00	
8a. Transfer to headquarters		6.00	
9. Annual operating permit fee for performance-based treatment system. Fee charged second year of operation	200.00	184.00	
9a. Transfer to headquarters		16.00	
10. Review of application due to proposed amendments or changes after initial operating permit issuance.	75.00	69.00	
10a. Transfer to headquarters		6.00	
11. Variance application for a single family residence per each lot or building site	150.00	75.00	
11a. Transfer to headquarters		75.00	
FEE COLLECTED AT HEADQUARTERS - Onsite Sewage			
1. Application for innovative product approval	500.00	For headquarters use only	
2. Application for registration including initial examination	75.00	For headquarters use only	
3. Initial registration	100.00	For headquarters use only	
4. Renewal of registration	100.00	For headquarters use only	
5. Certificate of authorization each two-year period	250.00	For headquarters use only	
DRINKING WATER			
1. First Year Public Water Annual Operation Permit and Construction Permit - Limited Use	75.00	67.50	270
1a. Transfer to headquarters		7.50	
2. Second Year Public Water Annual Operation Permit - Limited Use	70.00	63.00	5,733
2a. Transfer to headquarters		7.00	
4. Private Water Construction Permit - serving 3 or 4 non-rental residences	40.00	36.00	378
4a. Transfer to headquarters		4.00	
5. Initial Operating Permit Fee After March 31 of Any Year	35.00	31.50	95
5a. Transfer to headquarters		3.50	
6. Non-SDWA Lab Sample (Sample Collection/Review of Analytical Results/Health Risk Interpretation):			
Delineated Area	50.00	50.00	
Bacterial Sample Collection	40.00	40.00	
Chemical Sample Collection	50.00	50.00	
Combined Chemical microbiological	55.00	55.00	2,035
7. Reinspection of Private Water System	25.00	25.00	
8. Reinspection of Public Water System	40.00	40.00	
9. Delineated Area Clearance Fee	50.00	50.00	
10. Limited Use Commercial Registered System	15.00	15.00	150
11. Limited Use Commercial Public Water System Operating Permit Family Day Care Establishment	25.00	25.00	
12. Limited Use Commercial Public Water System Operating Permit Family Day Care Establishment After March 31 of Any Year.	15.00	15.00	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	Est. Annual Revenue Accruing to CHD TF
Safe Drinking Water Act (Delegated Counties)			
1. Construction permit for each Category I through III treatment plant, as defined in Rule 62-699.310, F.A.C., with treatment other than disinfection only.			
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	
e. Treatment plant - up to 0.1 MGD	1,000.00	1,000.00	
2. Construction permit for each Category IV treatment plant, as defined in Rule 62-699.310, F.A.C., with treatment other than disinfection only.			
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	
e. Treatment plant - 0.01 up to 0.1 MGD	1,000.00	1,000.00	
f. Treatment plant - up to 0.01 MGD	400.00	400.00	
3. Construction permit for each Category V treatment plant, as defined in Rule 62-699.310, F.A.C., - Disinfection Only			
a. treatment plant - 5 MGD and above	5,000.00	5,000.00	
b. Treatment plant - 1 MGD up to 5 MGD	3,000.00	3,000.00	
c. Treatment plant - 0.25 MGD up to 1 MGD	1,000.00	1,000.00	
d. Treatment plant - 0.1 MGD up to .025 MGD	500.00	500.00	
e. Treatment plant - up to 0.1 MGD	300.00	300.00	
4. Distribution and transmission systems, including raw water lines into the plant, except those under general permit.			
a. Serving a community public water system	500.00	500.00	
b. Serving a non-transient non-community public water systems	350.00	350.00	
c. Serving a non-community public water system	250.00	250.00	
5. Construction permit for each public water supply well.			
a. Well located in a delineated area pursuant to Chapter 62-524, F.A.C..	500.00	500.00	
b. Any other public water supply well.	250.00	250.00	
6. Major modifications to systems that alter the existing treatment without expanding the capacity of the system and are not considered substantial changes pursuant to Rule 62-4.050(7) below.			
a. MGD and above	2,000.00	2,000.00	
b. .1 MGD up to 1 MGD	1,000.00	1,000.00	
c. 0.01 up to .1 MGD	500.00	500.00	
d. Up to 0.01 MGD	100.00	100.00	
7. Minor modifications to systems that result in no change in the treatment or capacity.			
a. .1 MGD and above	300.00	300.00	
b. Up to 0.1 MGD	100.00	100.00	
8. Fines and Forfeitures	Variable	Variable	

cc: J. Bradley
C. Lewis
file



Jeb Bush
Governor

Robert G. Brooks, M.D.
Secretary

April 18, 2001

Marianne Marshall, Chairperson
Board of County Commissioners
Post Office Box 1010
Fernandina Beach, FL, 32035-1010

Dear Ms. Marshall:

Annually, the State and County enter into a contractual agreement for operation of the Nassau County Health Department (NCHD). The contract is for the period October 1 through September 30. The contract identifies the planned services to be provided and the funding sources to support those services. Additionally, the contract identifies any special projects that require expenditure of cash reserve in the NCHD Trust Fund.

The annual contract for the current fiscal year was executed September 28, 2000. The planned expenditures equaled estimated revenues. At that time, there were no special projects requiring expenditure of cash reserve.

As you are aware, the State appropriated funds for construction of an administrative facility for NCHD, project #DOH-97309200. The architect has performed a program/budget analysis. During the four (4) years since appropriation, construction costs have increased. There is insufficient budget to construct a facility to meet the needs of NCHD. Additionally, there is insufficient budget to support a reduced size facility and site development costs.

Therefore, it has been determined that there is sufficient cash reserve to fund the costs of site development from the NCHD Trust Fund.

Accordingly, the annual contract is amended to reflect use of Trust Fund cash reserve. The attached documents are the revised contract pages.

If you have any questions, please call Jim Pearson, Business Manager, or me at 277-7287.

Sincerely,

A handwritten signature in cursive script, appearing to read "E. Ngo-Seidel".

Eugenia J. Ngo-Seidel, M.D.
Director

CC: DOH, Bureau of Budget Management

Nassau County Health Department
P.O. Box 517, 30 South 4th Street
Fernandina Beach, Florida 32035-0517
(904) 277-7280, SUNCOM 848-7280, FAX (904) 277-7286

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COUNTY HEALTH DEPARTMENT

ATTACHMENT II

PART I. PLANNED USE OF COUNTY HEALTH UNIT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/00	Estimated County Share of CHD Trust Fund Balance as of 09/30/00	Total
1. CHD Trust Fund Ending Balance 09/30/00	133,361	135,274	268,635
2. Drawdown for Contract Year October 1, 2000 to September 30, 2001	0	0	0
3. Special Capital Project use for Contract Year October 1, 2000 to September 30, 2001	33,000	33,000	66,000
4. Balance Reserved for Contingency Fund October 1, 2000 to September 30, 2001	100,361	102,274	202,635

Note: The total of items 2, 3 and 4 must equal the ending balance in item 1.

Funds designated for Special Capital Projects must be used for capital projects and durable goods without significant recurring costs. Examples of projects meeting this criteria include construction and renovation of facilities and associated infrastructure; purchase of information system hardware/software and purchase of telecommunications equipment. Examples of items not meeting this criteria include grant funds for direct services such as tobacco prevention and provision of child safety seats; staff salaries; retirement obligations; rent/leases and funds held in anticipation of Medicaid paybacks and/or budget reductions. Special capital project amounts in "3" above should reflect the total amount of funds anticipated to be expended for special capital projects during the contract year. This includes funds to complete unfinished projects from previous years as well as for projects initiated during the contract year. More detailed Special Capital Project information, including description and cost by each project, must be listed in Attachment V.

ATTACHMENT V

DESCRIPTION OF USE OF CHD TRUST FUND BALANCES
FOR SPECIAL CAPITAL PROJECTS, IF APPLICABLE

(From Attachment II, Part I)

Fixed Capital Outlay
Project No. DOH-97309200
Nassau County Health Department, Administration Building
\$66,000 required to cover sitework costs.

DESCRIPTION OF SPECIAL CONTRACTS

(From Attachment II, Part III)

Please list separately

Special contracts are contracts for services for which there are no comparable services in the county health department core programs; no service codes in Departmental coding manuals; projects that are locally designed and have no standard statewide set of services and therefore cannot be accounted for within existing county health department programs. These contracts are coded to FLAIR Level 5:599 and include some contracts formerly handled at the district offices such as epilepsy, colposcopy, Project WARM, community planning and special family planning and teen mother projects.

None