

Memorandum



Date: February 15, 2007

HPSC
Agenda Item No. 4(A)

To: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

From: George M. Burgess
County Manager

Subject: Resolution Establishing User Fees for Miami-Dade County Department to Collect User Fees

RECOMMENDATION

It is recommended that the Board of County Commissioners ("Board") approve the attached Resolution which establishes user fees for the Miami-Dade County Health Department ("MDCHD") to collect fees for the purpose of meeting the public health needs of residents and visitors of Miami-Dade County.

BACKGROUND

Pursuant to Florida Statute §154.06, the Board is empowered to establish a schedule of fees to be collected by the Miami-Dade County Health Department. The MDCHD, in conjunction with the County staff, hereby proposes the fee schedule set forth on Schedule 1 and Schedule 2 (See Attachment C). The fees address services for the Immigration Change of Status Clinic, Environmental Health Program, and Women's Health/Family Planning Program. The recommended fee schedule has been based upon a comparison of fees charged in Broward, Orange, Duval, Hillsborough, Seminole and Leon Counties, as the case may be. These comparisons are all reflected in Paragraphs A through C below. In addition, many of the fees are based on a sliding fee schedule, developed by the Department of Labor, Federal Poverty Level Guidelines. See Attachment A and B.

A. Immigration Change of Status Clinic

Pursuant to 8 CFR 245.5, "...an applicant for adjustment of status shall be required to have a medical examination by a designated civil surgeon, whose report setting forth the findings of the mental and physical condition of the applicant, including compliance with section 212(a)(1)(A)(ii) of the Act, shall be incorporated into the record..."

New refugees come to the MDCHD Refugee Program to obtain a health assessment upon their arrival to the United States and again within the first 90 days of residing in the United States.

When a year has passed, recent refugees are ready to apply for their U.S. residency and need to go through the medical assessment required under Federal Law. Frequently, clients inquire if the MDCHD offers the change of immigration status clinical service. Currently, the MDCHD does not offer these services, but would like to do so through the Immigration Change of Status Clinic.

By opening the Immigration Change of Status Clinic, the MDCHD will be providing a needed community service. The proposed fees for the Immigration Change of Status Clinic will be competitive, so as not to undercut the prices of private providers in the community. All services

listed in the fee schedule are not necessarily required for every client and each case will be handled on an individual basis, according to their previous medical history. Only those services necessary and required by law will be performed, so the total amount billed will vary.

The user fees were determined based on the comparable rates of other physicians within Miami-Dade County. The average fees are as follows:

1. Average fee for a medical exam and blood test (based upon clinics in Miami-Dade and Broward County): \$102.27 (Proposed \$157.79).
2. Average cost of a Chest X-ray (based upon clinics in Miami-Dade and Broward County): \$35.00 (Proposed: \$50.00).

These examinations protect the health of citizens of Miami-Dade County, as well as visitors, by insuring that health standards are met.

B. Women's Health/Family Planning Program

Section 381.0051, Florida Statutes (2005), reads as follows:

"The Department of Health shall implement a comprehensive family planning program which shall be designed to include, but not be limited to, the following:

1. Comprehensive family planning education and counseling programs.
2. Prescription for and provision of all medically recognized methods of contraception.
3. Medical evaluation, including cytological examination and other appropriate laboratory studies.
4. Treatment of physical complications other than pregnancy resulting from the use of contraceptive methods.
5. Provision of services at locations and times readily available to the population served.
6. Emphasis and stress on service to postpartum mothers."

The user fees were determined based on the comparable rates of other county health departments. The fees are as follows:

1. An initial/annual visit at the Family Planning Clinic.
 - a. Palm Beach County: A fee of \$177.50
 - b. Duval County: A fee of \$176.84
2. A supply visit at the Family Planning Clinic.
 - a. Seminole County: A fee of \$10.49
 - b. Duval County: A fee of \$31.91
3. A counseling visit when results are given at the Family Planning Clinic.
 - a. Leon County: A fee of \$40.36
 - b. Seminole County: A fee of \$20.98
4. For a new client to receive an Intrauterine Device (IUD) at the Family Planning Clinic.
 - a. Duval County: A fee of \$249.00
 - b. Seminole County: A fee of \$268.00
5. For a new client to remove an IUD at the Family Planning Clinic.
 - a. Duval county: A fee of \$100.61
 - b. Hillsborough County. A fee of \$58.18
6. For an existing client to have the removal of an IUD at the Family Planning Clinic.
 - a. Duval county: A fee of \$100.61

- b. Hillsborough County. A fee of \$58.18
7. A Depo Provera Injection at the Family Planning Clinic.
 - a. Duval County: A fee of \$61.89
 - b. Leon County: A fee of \$94.94

The fees will be charged based on income and availability to pay and are based on the scale established by the Department of Labor, Federal Poverty Level Guidelines.

Currently, the Family Planning Clinic charges \$125.00 for an initial/annual visit, \$60.00 for a supply visit, \$23 for a counseling visit, \$160.00 for a new client to obtain an IUD, \$95.00 to remove an IUD on an existing client, \$75.00 to remove an IUD on a new client, and \$65.00 for a Depo Provera Injection.

Family planning clinics are vital to the provision of reproductive health care and often serve as an entry point into the health-care system for young women and low-income people in this county. They offer contraceptive services and education that prevent unintended pregnancy and help space births, prevent sexually transmissible diseases (STDs), and provide other primary reproductive health care. Family Planning Clinics are conveniently located throughout Miami-Dade County.

The increase in fees will allow the Miami-Dade County Health Department to purchase and provide up to date contraceptive technology to meet the changing needs of the residents of Miami-Dade County.

C. Environmental Health Program

Section 154.01(2)(a), Florida Statutes (2004), reads as follows:

154.01(2)(a) County health departments delivery system. "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 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."

Currently, MDHCD is charging \$11.00/per hour for export food free sale certification. The MDCHD is not providing elective lead assessment inspections or indoor air quality evaluations.

Export Food Free Sale Certification Fee. Export food certification involves product identification, approved distributor Export food certification is a requirement of many Central and South American nations. These countries mandate that this certification be obtained prior to allowing certain products from the United States within their borders. This service protects our international consumers from contamination. In addition, this service supports the local economy by providing a needed service to export companies.

The user fee for the Export Food Certification was determined based on the comparable rates of other county health departments. The fee is as follows:

1. Export Food certification fees.
 - a. No other counties provide this service.

The proposed fee increase is sufficient to cover the cost to the Department for providing these services. In addition, these certifications protect the health of citizens of Miami-Dade County, as well as visitors, by insuring the health standards are met.

The user fees for On Site Sewage Treatment and Disposal Systems were determined based on the comparable rates of other county health departments. The fees are as follows:

1. Application for permit and Plan Review:
 - a. Sarasota County: A fee of \$250.00
 - b. Brevard County: A fee of \$50.00
 - c. Wakulla County: A fee of \$100.00
 - d. St. Johns County: A fee of \$50.00
 - e. St. Lucie County: A fee of \$55.00
2. Permit or permit amendment for new system or modification:
 - a. Sarasota County: A fee of \$55.00
 - b. Brevard County: A fee of \$190.00
 - c. Wakulla County: A fee of \$105.00
 - d. St. Johns County: A fee of \$205.00
 - e. St. Lucie County: A fee of \$160.00
3. New System or modification installation inspection:
 - a. Sarasota County: A fee of \$80.00
 - b. Brevard County: A fee of \$80.00
 - c. Wakulla County: A fee of \$130.00
 - d. St. Johns County: A fee of \$80.00
 - e. St. Lucie County: A fee of \$85.00

The Miami-Dade County Mayor's office has focused on 24 areas of the land development process, including the areas of Permitting and Inspections of septic systems. Relocation of the Miami-Dade County Health Department Septic Tank Program into the Miami-Dade County Permitting and Inspections Center will create an integrated system with more focus on the needs of the residents of Miami-Dade County with land development issues.

The present fees for On Site Sewage Treatment and Disposal Systems in Miami-Dade County do not provide the necessary funding to cover the costs of these needed services. Increasing the service fees will enable the Health Department to increase staffing and provide a new office devoted to plan review, permitting and inspections.

The increase in the number of applications and the shortage of staff have exceeded the ability of the Health Department staff to maintain the level of services demanded by the building industry and the requirement to operate within the MDCPIC. The increase of fees will provide funding to increase Health Department staff, but also allows for the operation of a new office that will provide a higher level of service to the public and improve customer service and satisfaction.

It is the goal of this fee increase to make the integrated program financially sustainable, customer focused, and adequately staffed. Achievement of these goals should decrease the number of days to issue a permit and increase satisfaction to clients and employees.



Assistant County Manager



MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

DATE: March 6, 2007

FROM: Murray A. Greenberg
County Attorney

SUBJECT: Agenda Item No.

Please note any items checked.

- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No.

RESOLUTION NO. _____

RESOLUTION ESTABLISHING USER FEES FOR THE MIAMI-DADE COUNTY HEALTH DEPARTMENT TO COLLECT FOR THE PURPOSE OF MEETING THE PUBLIC HEALTH NEEDS OF RESIDENTS AND VISITORS OF MIAMI-DADE COUNTY

WHEREAS, this Board desires to accomplish the purposes outlined in the accompanying memorandum, a copy of which is incorporated herein by reference

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY

COMMISIONERS OF MIAMI-DADE COUNTY, FLORIDA, that: this Board hereby establishes user fees for the Miami-Dade County Health Department to collect for meeting the public health needs of the residents and visitors of Miami-Dade County, as set forth in the accompanying memorandum.

The foregoing resolution was offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Bruno A. Barreiro, Chairman	
Barbara J. Jordan, Vice-Chairwoman	
Jose "Pepe" Diaz	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	Dennis C. Moss
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 6th day of March, 2007. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

ES

Attachment A

Summary of Sliding Fee Scale Policy and Procedures

Sliding fee scales are produced by the Department of Health to help make services more affordable for clients. Financially eligible clients are not required to pay full charges to receive most Department of Health services including communicable disease and integrated family health services. All clients, regardless of poverty level, are required to pay the full cost for other Department of Health services, such as vital statistics or international immunizations.

The Department revises its sliding fee scales each year after the federal government has produced their annual poverty guidelines. Financially eligible clients will not be required to pay full cost to receive Department of Health services. Rather, these clients will pay a reduced cost in relation to their poverty status. There are two sliding fee scales produced by the Department of health. One applies to DOH clients when they are not receiving family planning services, and one for DOH clients that are receiving family planning services.

The DOH clients poverty status is determined based on the client's annual household income and the number of individuals in the person's family. The lower the annual household income and/or a large family size places a person in a lower poverty status.

The DOH sliding fee scales are calculated by using the annual poverty income for a family size of 1 and the income amount to be added for each additional family member provided by the federal government. The annual poverty guidelines are published each year in February. The Department prepares the new scales, and these calculations are internally reviewed within the Department prior to release. The sliding fee scale is finally released in the beginning of March, with implementation in the Health Clinic Management System around the end of March.

The DOH has been given authority for the sliding fee scales by the Florida Legislature in s. 154.011,(1),(c),7, F Florida Statute and 64F-16, Florida Administrative Code.

Attachment B

Miami-Dade County Health Department Fee Guidelines from the Florida Administrative Code

64F-16.006 Sliding Fee Scale.

- (1) Persons with net family incomes between 101 and 200 percent of the Federal Office of Management and Budget poverty guidelines shall be charged a fee on a sliding scale based on the following increments. For family planning services only, persons with incomes between 200 and 250 percent of poverty shall be charged on a sliding fee scale as described in paragraph 64F-16.006(3)(h), F.A.C., below:
 - (a) Persons with incomes at or below 100 percent of the OMB poverty guidelines shall pay no fee.
 - (b) Persons with incomes at 101 to 119 percent of the OMB poverty guidelines shall pay 17 percent of the full fee.
 - (c) Persons with incomes at 120 to 139 percent of the OMB poverty guidelines shall pay 33 percent of the full fee.
 - (d) Persons with incomes at 140 to 159 percent of the OMB poverty guidelines shall pay 50 percent of the full fee.
 - (e) Persons with incomes at 160 to 179 percent of the OMB poverty guidelines shall pay 67 percent of the full fee.
 - (f) Persons with incomes at 180 to 199 percent of the OMB poverty guidelines shall pay 83 percent of the full fee.
 - (g) Persons with incomes at or above 200 percent of the OMB poverty guidelines shall pay the full fee.
- (2) Laboratory, pharmacy, and radiology charges may be added separately to the clinic visit charge, but must be charged on the sliding fee scale.
- (3) This sliding fee scale applies to recipients of integrated family health and communicable disease control services, with the following exceptions:
 - (a) Participants in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) shall not be charged any fee for WIC certification or WIC benefits.
 - (b) There shall not be any fee charged for childhood immunizations required for admittance to or attendance in school as specified in Section 232.032, F.S.
 - (c) There shall not be any fee charged for a Medicaid reimbursable service to any CHD client/patient who is eligible for and enrolled in the Medicaid program.
 - (d) Clients served by CHDs and their subcontractors shall not be denied services for tuberculosis, sexually transmitted disease, or HIV/AIDS communicable disease control because of failure or inability to pay a prescribed fee, regardless of their income.
 - (e) Clients interviewed, examined, or tested at CHD initiative because they are a contact to a case of a communicable disease or because they are a member of a group at risk that is being investigated by the CHD may not be charged a fee for the interview, examination, or testing; these clients may be charged on a sliding fee scale for any treatment indicated, but they cannot be denied services based on inability to pay.

Attachment B

- (f) Clients served by CHDs and their subcontractors shall not be denied family planning services for failure or inability to pay a prescribed fee, regardless of their income; however the family planning services of inserting Norplant, and male and female sterilization, shall be limited depending on the availability of funds to pay for these services.
- (g) Clients shall not be denied pregnancy testing for failure or inability to pay a fee.
- (h) For family planning services only, persons with net family incomes between 101 and 200 percent of the Federal Office of Management and Budget poverty guidelines shall be charged a sliding fee scale as outlined in paragraphs (1)(a)-(g) above, and persons with net family incomes between 200 and 250 percent shall be charged a fee on a sliding scale based on the following increments:
 1. Persons with incomes at 200 to 224 percent of the OMB poverty guidelines shall pay 90 percent of the full fee for family planning services.
 2. Persons with incomes at 225 to 249 percent of the OMB poverty guidelines shall pay 95 percent of the full fee for family planning services.
 3. Persons with incomes at or above 250 percent of the OMB poverty guidelines shall pay the full fee for family planning services.
 - (4) Persons with net family incomes above 200 percent of the OMB poverty guidelines shall be charged the full fee promulgated by the department or the relevant board of county commissioners, with the exception of those groups listed in subsections (a) through (h) above.

Specific Authority 154.011(5) FS. Law Implemented 154.011 FS. History—New 10-14-93, Amended 8-2-94, 4-29-96, Formerly 10D-121.007, Amended 6-24-02, 6-17-03.

Attachment C

User Fee Schedule Matrix of Miami-Dade County Health Department

NO FEES SHALL BE ASSESSED TO MEDICALLY INDIGENT CLIENTS WHO ARE UNABLE TO PAY FEES
Fees shall be implemented thirty (30) days after the commission passes the resolution with appropriate
client notification.

- * FOR FURTHER EXPLANATION OF SLIDING FEE SCHEDULE SEE ATTACHEMENT A & B
- ** A FLAT FEE IS A SET FEE REGARDLESS OF INCOME
- *** THESE IMMUNIZATIONS ARE UNNECESSARY FOR PERSONS RESIDING IN THE UNITED

SCHEDULE 1: New Programs

Memo Section	NEW PROGRAMS	PROPOSED FEE	
A	Regular Visit to Immigration Change of Status Clinic: A. Regular Visit ("Regular Visit") includes: (Client can request some of the tests only and the specific fees below will apply)	\$157.79	Flat Fee **
	ii. Mantoux Skin Test	N/A	N/A
	iii. Chlamydia/Gonorrhea Screening	\$18.00	Flat Fee **
	iv. Syphilis RPR Screening	\$10.00	Flat Fee **
	v. Syphilis EIA IG G confirmatory test	\$10.00	Flat Fee **
	vi. Comprehensive medical exam	\$16.67	Flat Fee **
	vii. HIV counseling and testing	\$35.00	Flat Fee **
	viii. Check vital signs	\$4.00	Flat Fee **
	ix. Medical history review and health education	\$40.00	Flat Fee **
	x. Administrative Costs	\$14.12	Flat Fee **
A	Regular Visit and a Chest X-ray at the Immigration Change of Status Clinic. The fee includes all services rendered for a Regular Visit and an additional fee for Chest X-ray	\$207.79	Flat Fee **
	a. Chest X-ray only	\$50.00	Flat Fee **