

FORSYTH COUNTY

BOARD OF COMMISSIONERS

MEETING DATE: AUGUST 6, 2020

AGENDA ITEM NUMBER: 15

SUBJECT: RESOLUTION APPROVING THE 2020-2021 PROPOSED FEE SCHEDULE RECOMMENDED BY THE HUMAN SERVICES DIRECTOR BASED UPON A PLAN PRESENTED BY THE HEALTH DIRECTOR AND APPROVED BY THE FORSYTH COUNTY HEALTH AND HUMAN SERVICES BOARD FOR SERVICES RENDERED BY THE FORSYTH COUNTY DEPARTMENT OF PUBLIC HEALTH

COUNTY MANAGER'S RECOMMENDATION OR COMMENTS: Recommend Approval

SUMMARY OF INFORMATION: See Attached

Annually, the Department of Public Health reviews and revises its fee schedule for services provided, include sliding scale charges based on family income. This fee schedule has been presented and approved by the Forsyth County Health and Human Services Board.

ATTACHMENTS: YES NO

SIGNATURE: *f. Dudley Watts, Sr. /AMS*
COUNTY MANAGER

DATE: August 06, 2020

**RESOLUTION APPROVING THE 2020-2021 PROPOSED FEE SCHEDULE
RECOMMENDED BY THE HUMAN SERVICES DIRECTOR BASED UPON A PLAN
PRESENTED BY THE HEALTH DIRECTOR AND APPROVED BY THE FORSYTH
COUNTY HEALTH AND HUMAN SERVICES BOARD FOR SERVICES RENDERED
BY THE FORSYTH COUNTY DEPARTMENT OF PUBLIC HEALTH**

WHEREAS N.C.G.S 153A-77(d)(1) authorizes the consolidated human service board to set fees for departmental services based upon recommendations of the human services director;

WHEREAS N.C.G.S 153A-77(d)(1) further states that fees under this subdivision are subject to the same restrictions on amount and scope that would apply if the fees were set by a county board of health;

WHEREAS for individuals without insurance or Medicaid coverage, such fees are subject to the N.C. Department of Public Health Sliding Fee Scale for Family Planning Clinics (“Sliding Fee Scale”), based on income and family size; and

WHEREAS the Forsyth County Human Services Director, upon a plan presented by the Health Director, recommends the attached 2020-2021 Proposed Fee Schedule for public health services and on August 5, 2020, the Forsyth County Health and Human Services Board approved the 2020-2021 Proposed Fee Schedule and recommended its approval to the Forsyth County Board of Commissioners effective September 1, 2020;

NOW, THEREFORE, BE IT RESOLVED, that the Forsyth County Board of Commissioners hereby approves the attached 2020-2021 Proposed Fee Schedule, subject to the Sliding Fee Scale, for services rendered by the Forsyth County Department of Public Health, which is incorporated herein by reference, effective September 1, 2020.

Adopted this 6th day of August 2020.

	Fee Schedule, FY 2020-2021	FY 20-21	FY 19-20	MEDICAID
	MEDICAL RECORDS			
	Copies			
	1-25 pages (cost is per page)	\$0.75	\$0.75	
	26-100 pages (cost is per page)	\$0.50	\$0.50	
	100+ pages (cost is per page)	\$0.25	\$0.25	
CLASSES				
S9442	Childbirth Classes (Birthing Class (one unit= 1 hour)/2 hours would be 2 units	\$17.38	\$11.00	
CODE	OFFICE SERVICES			
EST PATIENTS (CH/FP)				
99211	Eval. & Mgt.	\$50.00	\$50.00	\$34.16
99212	Problem Focused Hx & Exam	\$83.00	\$83.00	\$56.93
99213	Expanded PF Hx. & Exam	\$114.00	\$114.00	\$78.66
99214	Detailed Hx & Exam	\$177.00	\$177.00	\$122.13
99215	Comp. Hx & Exam (HC)	\$264.00	\$264.00	\$182.16
83655	Lead Test	\$0.00	\$0.00	\$15.39
83020	Sickle Cell	\$0.00	\$0.00	\$15.98
NEW PATIENTS (CH/FP)				
99201	Problem Focused Hx & Exam	\$116.00	\$116.00	\$62.10
99202	Expanded PF Hx & Exam	\$116.00	\$116.00	\$93.15
99203	Detailed Hx & Exam	\$192.00	\$192.00	\$132.48
99204	Comprehensive Hx & Exam	\$282.00	\$282.00	\$194.58
99205	Comp. Hx & Exam (HC)	\$354.00	\$354.00	\$244.26
PREVENTIVE NEW (CH/FP)				
99381	Preventive New < 1 Year Old	\$131.00	\$131.00	\$90.00

99382	Preventive New 1-4 Years Old	\$131.00	\$131.00	\$90.00
99383	Preventive New 5 - 11	\$223.00	\$223.00	\$154.00
99384	Preventive New 12 - 17	\$245.00	\$245.00	\$169.00
99385	Preventive New 18 - 39	\$245.00	\$242.00	\$167.00
99386	Preventive Est. 40 - 64	\$289.00	\$289.00	\$199.00
PREVENTIVE EST. (CH/FP)				
99391	Preventive Est. < 1 Year Old	\$131.00	\$131.00	\$90.00
99392	Preventive Est. 1-4 Years Old	\$131.00	\$131.00	\$90.00
99393	Preventive Est. 5 - 11	\$212.00	\$212.00	\$126.00
99394	Preventive Est. 12 - 17	\$212.00	\$212.00	\$146.00
99395	Preventive Est. 18 - 39	\$131.00	\$131.00	\$142.00
99396	Preventive Est. 40 - 64	\$229.00	\$229.00	\$158.00
COMMUNICABLE DISEASE				
T1002	RN Services (15 Minutes)	\$27.00	\$27.00	\$17.59
FAMILY PLANNING BC METHODS				
S4993	Birth Control Pills Per Pack	\$3.64	\$3.64	\$3.00
J7302	Plan B (Emergency Contraception)	\$8.00	\$8.00	\$0.00
J1050	Depo Injection (S.P. & P. Ins.)	\$25.81	\$0.88	\$28.50
J7298	IUD Device- Mirena 5 yrs.	\$250.00	\$250.00	\$859.14
J7296	IUD Device- Kyleena 5 yrs.	\$250.00	\$250.00	\$0.00
J7300	IUD Device- Paragard 10 yrs.	\$247.83	\$247.83	\$775.51
S5001	Ella (Emergency Contraception)	\$22.00	\$18.91	\$0.00
J7303	Nuvaring (EA)	\$14.20	\$14.20	\$0.00
J7304	Patch (BOX)	\$42.60	\$62.14	\$0.00
J7307	Implant Device- Nexplanon	\$364.00	\$364.00	\$692.00
FAMILY PLANNING PROCEDURES				
11981	Nexplanon Insertion	\$148.00	\$148.00	\$101.87
11982	Nexplanon Removal	\$170.00	\$170.00	\$117.41
11983	Nexplanon Removal/Reinsertion	\$182.72	\$182.72	\$182.72
58300	IUD Insertion	\$88.00	\$88.00	\$60.97
58301	IUD Removal	\$109.00	\$109.00	\$74.87
IMMUNIZATIONS (0-18 Yrs)				
90633	HEP A peds	\$32.22	\$30.00	\$0.00
90647	Pedvax-HIB 1 2 3	\$31.45	\$22.00	\$0.00

90670	Pneumococcal Conjugate (Prevnar 13) child	\$266.77	\$245.00	\$0.00
90700	DTAP 1 2 3 4 5 (0-6 yrs)	\$32.12	\$30.00	\$0.00
90707	MMR (0 - 17) 1 2	\$92.41	\$94.00	\$0.00
90713	IPV 1 2 3 4 Polio	\$38.26	\$47.00	\$0.00
90714	TD (adult)	\$39.70	\$47.00	\$0.00
90715	Tdap	\$41.54	\$47.00	\$0.00
90716	Varicella (1-18 yrs)	\$162.71	\$166.00	\$0.00
90744	HEP B (0 - 18) 1 2 3	\$36.00	\$30.00	\$0.00
IMMUNIZATIONS (19yrs & Over)				
86580	TB Skin Test	\$25.00	\$25.00	\$5.59
90632	HEP A (Adult) 1 2	\$46.14	\$86.00	\$43.71
90636	Hep A& B Combined (Twinrix 18+) 1 2 3	\$111.60	\$93.00	\$69.00
90651	Gardasil (9)--VFC 9-18 (HPV)	\$321.60	\$268.00	\$135.73
90686	Influenza	\$0.00	\$0.00	\$18.21
90670	Pneumococcal Conjugate (PPSV 23 Adult)	\$266.77	\$245.00	\$131.44
90707	MMR (Adult) 1 2	\$92.41	\$94.00	\$40.61
90714	TD (adult) every 10 yrs.	\$39.70	\$47.00	\$19.25
90715	Tdap (7 yrs. - Adult)	\$41.54	\$47.00	\$35.00
90716	Varicella (19 & Older) 1 2	\$162.71	\$166.00	\$85.56
90732	Pneumonia	\$124.61	\$126.00	\$31.21
90736	Zostavax	\$388.80	\$324.00	\$0.00
90739	Hepatitis B (Heplisav-B) 2 dose series (Adults)	\$151.79	\$118.00	\$0.00
90746	Hep B Adult 3 dose series	\$54.78	\$72.00	\$0.00
90750	Shingrix 2 dose series	\$173.82	\$175.00	\$0.00
LU400	I-693 Paperwork	\$30.00	\$0.00	\$0.00
90741	Administration Fee	\$30.00	\$45.00	\$0.00
tration Fee for each additional vaccine		\$18.00	\$18.00	\$0.00
IN HOUSE LAB SERVICES				
81001	Urinalysis (w/Micro)	\$7.00	\$0.00	\$4.00
86592	Trust- RPR (screening)	\$8.00		
86593	Trust-RPR (semi-quantitative) titer	\$14.00		
86593	STAT RPR	\$14.00		
87899 86703	Rapid Alere AG/AB Test	\$12.50		
87760	Hemoccult Test	\$5.00		

81002	Urinalysis (Dip Stick)	\$7.00	\$0.00	\$4.00
81,001	Urinalysis Microscopic analysis	\$8.00		
81025	Pregnancy Test (Urine)	\$12.00	\$12.00	\$11.00
82310	Calcium	\$9.00	\$9.00	\$0.00
82150QW	Chemistry 13 Panel	\$12.60	\$16.00	\$0.00
82465	Creatinine	\$12.50	\$8.00	\$0.00
82947QW	Glucose: Fast/Rand (waived)	\$16.00	\$16.00	\$0.00
85018	Hemoglobin	\$5.00	\$5.00	\$0.00
87081	GC Culture	\$11.00	\$11.00	\$9.00
87205	Gram Stain	\$8.00	\$8.00	\$7.00
87210	Wet Mount (Prep)	\$7.00	\$7.00	\$6.00
87491, 87591, & 87661	CT/GC/Trich (urine)/	\$45.00	\$45.00	\$39.00
87491	Chlamydia-Gen-Prob-NAAT	\$39.00	\$45.00	\$45.00
87635	SARS-COV-2 (COVID-19) QUALITATIVE NAATS	\$125.00	\$0.00	\$0.00
87491 & 87591	Chlamydia/GC Probe (test #183194)	\$45.00	\$45.00	\$39.00
88142	Cytopath, c/v, thin layer	\$37.00	\$0.00	\$27.05
88142-90	TCA Tx-Wart 1-2 lesions	\$124.00	\$0.00	\$98.74
TOBACCO CESSATION				
99406	Intermediate (3-10 Min.)	\$15.00	\$17.00	\$11.93
99407	Intensive (>10 Min.)	\$0.00	\$0.00	\$23.05
LABCORP LABS				
83655	Adult Lead (test#007625)	\$0.00	\$0.00	\$0.00
87081	Group B Beta Strep (test #188130)	\$9.00	\$0.00	\$0.00
87491	Chlamydia-Gen-Prob-NAAT	\$39.00	\$45.00	\$0.00
87591	GC-Gen-Probe-NATT	\$39.00	\$45.00	\$0.00
LABS 2 GO				
80048	BMP (Basic Metabolic Panel)	\$12.60	\$16.00	\$0.00
80051	Electrolyte Panel (test# 303754)	\$12.60	\$0.00	\$0.00
80053	CMP Panel (test #322000)	\$12.60	\$16.00	\$0.00
80061	LIPID PANEL (test #235010)	\$12.60	\$0.00	\$0.00
80076	HEPATIC PANEL (test #322755)	\$12.60	\$0.00	\$0.00
81002	Urinalysis (w/out Micro)	\$4.00	\$5.00	\$4.00
81025	Pregnancy Test (Urine)	\$8.04	\$12.00	\$11.00

82040	ALBUMIN	\$8.00	\$9.00	\$0.00
82150	Amylase	\$10.00	\$12.00	\$0.00
82565	CREATININE, SERUM (test #001370)	\$6.00	\$10.00	\$0.00
82550	Creatine Kinase, total (test# 001362)	\$5.00	\$0.00	\$0.00
82947	Glucose: Fast/Rand (waived)	\$11.00	\$16.00	\$0.00
83036	HGBA1C	\$12.00	\$0.00	\$0.00
84075	Alkaline Phosphatase	\$8.00	\$10.00	\$0.00
84155	Total Protein	\$6.00	\$7.00	\$0.00
84436, 84443	THYROID PROFILE	\$26.00	\$30.00	\$0.00
84443	TSH (test #004259)	\$26.00	\$30.00	\$0.00
84450	Aspartate aminotransferase	\$8.00	\$10.00	\$0.00
84460	Alanin Acmniotransferase	\$8.00	\$10.00	\$0.00
84520	BUN (test #001040)	\$12.60	\$0.00	\$0.00
84550	Uric Acid, Serum (test# 001057)	\$8.00	\$8.00	
85014	HEMATOCRIT	\$4.00	\$5.00	Not
85018	HEMOGLOBIN	\$4.00	\$5.00	\$0.00
85025	CBC W/DIFF/PIT(test #005009)	\$12.00	\$14.00	\$0.00
85027	CBC W/O DIFFERENTIAL	\$10.00	\$10.00	\$0.00
86580	PPD Administration	\$15.00	\$25.00	\$0.00
86803	HEP C ANTIBODY (test #140659)	\$0.00	\$0.00	\$0.00
87186	Sensitivity Organism #2 (test# 997870)	\$10.00	\$0.00	\$0.00
87798	Trichomonas-Gen-Probe-NAAT	\$45.00	\$45.00	\$0.00
	STD LABCORP LABS			Handling Charge
87491, 87591, & 87661	CT/GC/Trich (urine)/	\$45.00	\$45.00	\$39.00
87491 & 87591	Chlamydia/GC Probe (test #183194)	\$45.00	\$45.00	\$39.00
	OTHER			
36415	Venipuncture	\$7.00	\$7.00	\$2.78
36416	Capillary-Finger/Heel	\$10.00	\$10.00	\$0.00
86592	RPR/STS -- Venipuncture	\$8.00	\$8.00	\$0.00
90471EP	Injection Admin (Child)	\$0.00	\$0.00	\$13.71
90471	Injection Admin. (Adult)	\$45.00	\$45.00	\$13.71
90472EP	Injection Admin. (Child)	\$0.00	\$0.00	\$13.71
90472	Injection Admin. (Adult)	\$20.00	\$20.00	\$13.71
90473	Rotateq w/inj	\$20.00	\$20.00	\$13.71
90474	Rotateq only	\$20.00	\$20.00	\$0.00
99000	Lab Handling/preparations/ and shipping	\$1.50	\$0.00	\$1.50
LU102	Comp. of Record for TB SCR	\$0.00	\$0.00	\$0.00

Environmental Health

SSA Soil Site Application: any 3,4,5 or 6 BR house	\$204.00	\$170.00
SS1 480-1500 gpd (business or church)	\$432.00	\$360.00
SS2 1500-3000 gpd	\$654.00	\$545.00
SS3 >3000 gpd	\$2,306.00	\$1,922.00
REV Revisit	\$56.00	\$47.00
RED Redraw IP/CA	\$38.00	\$31.00
LLP LLP System	\$320.00	\$267.00
TPN T & J Panel New	\$308.00	\$257.00
CGN Conventional or Alter., Gravity, new	\$234.00	\$195.00
CGR Conv. or Alter., Grav., T&J Panel Rpr	\$204.00	\$170.00
PMP Any Pump installation (new only)	\$62.00	\$52.00
MHP Mobile Home Conn. In Existing Park	\$117.00	\$98.00
HDR Health Dept. Release	\$56.00	\$47.00
WCP Water Supply Well Const. NFHC Permit	\$352.00	\$298.00
DCP Drinking Water Well Const. Permit	\$432.00	\$360.00
WAB Well Abandonment	\$155.00	\$129.00
WAB Well Abandonment	\$155.00	\$129.00
WSB Water Sample, Bacteria	\$45.00	\$37.00
WSF Water Sample Fluoride	\$47.00	\$39.00
WSI Water Sample Inorganic	\$89.00	\$74.00
WSN Water Sample Nitrate/Nitrite	\$47.00	\$39.00
WSP Water Sample Pesticide	\$106.00	\$88.00
WSL Water Sample Petroleum	\$106.00	\$88.00
WSO Water Sample Organic (VOA)	\$106.00	\$88.00
WSU Water Sample Uranium (plus three metals)	\$90.00	\$75.00
WIB Water Sample Iron Reducing Bacteria	\$76.00	\$63.00
WSR Water Sample Sulfate Reducing Bacteria	\$84.00	\$70.00
WIN Water Supply Inorganic and Nitrate	\$95.00	\$79.00
SAF Swimming Pool Annual Fee	\$130.00	\$108.00
SSP Secondary Pool at Same Site	\$32.00	\$27.00
SPR Swimming Pool Plan Review	\$250.00	\$200.00
SPRF Swimming Pool Revisit Fee (new)	\$56.00	\$47.00
FSR Food Service Plan Review	\$246.00	\$205.00
FRP Foodservice Remodel, Plan Review	\$123.00	\$103.00
MFU Plan Review	\$150.00	\$0.00
PushCart Plan review	\$100.00	\$0.00
TAP Tattoo Artist Annual Permit Fee	\$123.00	\$103.00
*TEW Tattoo/Permanent Makeup Artist Educational	\$123.00	\$103.00
*TES Tattoo/Permanent Makeup Artist Educational	\$31.00	\$26.00

	SAP Seafood Mkt Annual Permit Fee	\$0.00	\$0.00
	TFE Temporary Food Establishment Fee	\$75.00	\$75.00
	* A Tattoo/Permanent Makeup Artist Educational	\$120.00	\$100 - (instructor
	LDS Dust Sample (Each) 24 Hour Turn Around	\$0.00	\$6.25
	LSS Soil Sample (Each) 24 Hour Turn Around	\$10.20	\$8.25
	LPS Paint Chip Sample (Each) 24 Hour Turn Around	\$8.20	\$6.25
	LWS Lead in Drinking Water (Each) 96 Hour Turn	\$31.00	\$31.00
	LWS Lead in Drinking Water (Each) 48 Hour Turn	\$42.00	\$42.00
	Around	\$73.00	\$73.00
T1029	Comprehensive Environmental Lead Investigation, Not Including Laboratory Anaysis, Per Dwelling	\$1,200	
Dental			
D0120	Periodic Exam	\$45.00	
D0140	Limited Oral Eval	\$65.00	
D0145	Comp Oral Eval >3	\$60.00	
D0150	Comp Oral Eval	\$75.00	
D0210	FMX	\$120.00	
D0220	First PA	\$25.00	
D0230	Additional PA	\$20.00	
D0240	Occlusal Film	\$30.00	
D0270	Single Bitewing	\$20.00	
D0272	Bitewing - 2 films	\$30.00	
D0273	Bitewing - 3 films	\$45.00	
D0274	Bitewing - 4 films	\$55.00	
D0330	Film/Panoramic	\$100.00	
D1110	Prophy - Adult	\$65.00	
D1120	Prohy - Child	\$50.00	
D1204	Fluoride Topical - Adult	\$25.00	
D1206	Fluoride Topical - Child	\$25.00	
D1351	Sealant per Tooth	\$50.00	
D1510	Space Maint. Fixed Unilateral	\$320.00	
D1515	Space Maint. Fixed Bilateral	\$450.00	
D1550	Space Maint. Recement	\$55.00	
D2140	Amalgam - 1 surface	\$110.00	
D2150	Amalgam - 2 surface	\$140.00	
D2160	Amalgam - 3 surface	\$160.00	
D2161	Amalgam - 4 surface	\$180.00	
D2330	Comp Anterior - 1 surface	\$110.00	
D2331	Comp Anterior - 2 surface	\$140.00	

D2332	Comp Anterior - 3 surface	\$165.00
D2335	Comp Anterior - 4 surface	\$205.00
D2391	Comp Posterior - 1 surface	\$135.00
D2392	Comp Posterior - 2 surface	\$200.00
D2393	Comp Posterior - 3 surface	\$245.00
D2394	Comp Posterior - 4 surface	\$290.00
D2750	PFM Crown	\$800.00
D2790	Gold Crown (Cast)	\$800.00
D2920	Recement Crown	\$75.00
D2930	SSC - Primary - under 21	\$250.00
D2931	SSC - Permanent - under 21	\$260.00
D2940	Sedative Filling	\$75.00
D2950	Core Buildup with pin	\$170.00
D2951	Pin Retention per Tooth	\$45.00
D3110	Pulp Cap - direct	\$50.00
D3220	Pulpotomy	\$135.00
D3230	Pulpal Therapy-Anterior	\$240.00
D3240	Pulpal Therapy-Posterior	\$300.00
D3310	RCT-Anterior	\$520.00
D3320	RTC-Bicuspid	\$620.00
D3330	RCT-Molar	\$800.00
D4341	Perio Scale & Root 4+ per quad	\$170.00
D4342	Perio Scale & root pln 1-3 quad	\$110.00
D4355	Full Mouth Debridement	\$115.00
D5110	Denture-Upper	\$980.00
D5120	Denture-Lower	\$980.00
D5211	Upper Resin Partial	\$725.00
D5212	Upper Resin Partial	\$725.00
D5213	Upper Metal Partial	\$1,008.00
D5214	Lower Metal Partial	\$1,008.00
D5225	Upper Flexible Valplast Partial	\$646.00
D5226	Lower Flexible Valplast Partial	\$646.00
D5520	Replace tooth (denture)	\$95.00
D5611	Repair resin partial, MAND	\$120.00
D5612	Repair resin partial, MAXILLARY	\$120.00
D5620	Repair Cast Framework	\$132.00
D5630	Repair/Replace broken clasp	\$185.00
D5640	Replace Broken Tooth	\$101.00
D5650	Add tooth to partial	\$150.00
D5660	Add clasp to partial	\$155.00

