

Westchester County Department of Health Budget 2014

Presentation to the
Westchester County Board of Legislators
Budget & Appropriations Committee
November 25, 2013

Core Functions & Essential Services of Local Health Departments

Assessment

- Monitor health status to identify community health problems.
- Diagnose and investigate public health problems and health hazards in the community.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.

Policy Development

- Develop policies and plans that support individual and community public health efforts.
- Enforce laws and regulations that protect health and ensure safety.
- Research for new insights and innovative solutions to public health problems.

Assurance

- Link people to needed health services and assure the availability of health care.
- Assure a competent public health workforce.
- Inform, educate, and empower people about public health issues.
- Mobilize community partnerships to identify and solve public health problems.

Department Highlights

- Collaborated with Westchester hospitals and health centers to develop two Countywide health priorities and prepared a Community Health Assessment and Improvement Plan.
- Increased the availability of locked drop boxes at local police departments as a safe alternative for disposing pharmaceuticals.
- Administered flu vaccine at multiple locations in the county.
- Managed large Norovirus outbreaks.
- Began to offer a “short course” 12 week regimen for the treatment of individuals infected with “inactive” TB.

Department Highlights (con't)

- Participated in meetings with several jurisdictions regarding the benefits of continuing to fluoridate their water supply.
- Enhanced our mosquito control efforts through the distribution of minnows to residents with ponds on their property.
- Conducted sampling at multiple, natural outflows on the Long Island Sound and the Hudson River for methoprene, a by-product of larviciding and found no product was entering the water ways.

Departmental Highlights (con't)

- As part of the Safer Communities initiative, the health department co-sponsored the Community Violence Prevention Program, a public health approach to preventing violence in our communities.
- Expanded social media marketing through a new Facebook page and Twitter account to increase the reach of public health messaging.
- 8 navigators helping residents and small businesses navigate and evaluate their health insurance options through the Marketplace (nystateofhealth.com).

Budget and Headcount Comparison 2013 - 2014

	2013(adopted)	2014(proposed)
Total Tax Levy Support	64.0M	63.6M
% of Expenditures for Public Health Activities	12.9%	13.9%
% of Expenditures for CSN Program	87.1%	86.1%
Headcount- Operating	215	215
Grants	75	71

Budget and Positions

- 15% of tax levy supports public health activities
- 85% of tax levy supports CSN
- Overall includes a \$454,455 TL reduction (\$88,470 –public health)
- Tax levy positions unchanged from 2013 (215 positions)
- Recipient of two CDC funded staff – onsite for 2 years
 - Public Health Prevention Services Fellow
 - Public Health Associate
- Recertified CSN/Secretary I to Public Health Nurse (Hep C)

Vacancies

- 15 tax levy positions maintained in budget
 - 9 reside in public health
 - 6 reside in Children with Special Needs (CSN)
- 6 of 9 PH lines with full or partial funding
 - Chief of Section Clinical Services
 - Sr. Laboratory Technician
 - Technical Specialist Clinical Services
 - Sr. Sanitarian
 - Sr. Engineer Public Health
 - Accountant I
- \$500,000 vacancy factor

Grants

- Grant funded positions – 71 (net loss of 4 lines)
 - Healthy Mom Healthy Baby – Program Specialist
 - Ryan White – Program Specialist
 - WIC – Nutritionist
 - Early Intervention – Program Specialist and Acct Control Specialist
 - Expanded HIV Partner Services – added Health Investigator

New Grants

- **Expanded Partner Services Pilot (\$75,000)**
 - Outreach to identify persons with HIV / AIDS that have dropped out of care and link to services
- **In-Person Assistor/Navigator Program (\$462,719)**
 - Assist individuals and small businesses with obtaining health insurance through the Marketplace
- **One-Time STD Grant (\$49,000)**
 - Purchase meningococcal and HPV to distribute to college population
- **PH Preparedness & Response to Research (\$7,500)**
 - Examine lessons learned from Hurricane Sandy

Children with Special Needs

- Programs
 - EI - \$24.3 million
 - 4410 (Pre-k) - \$81.6 million
 - 4405 Maintenance - \$13.2 million
- Over 10,000 children 0-5 served through EI and Pre-K.
- Approximately 120 children 5 -21 with severe physical/emotional disabilities in residential educational facilities through 4405 program (avg. \$110,000/child)
- 1.2 million increased over 2013 adopted budget to 4405 program.

Early Intervention

- Number of children in program relatively stable (5,600 served with 3,500 active)
- Budget includes reduction in expenditures
- Change primarily due to NYS EI Reform - transition to a statewide Fiscal Agent as of April 1st
- Fiscal Agent assumes direct pay to EI providers
- County pays to escrow account (exception - respite, transportation and AT)

Impact of EI Reform

- NYS contracted with an Interim Fiscal Agent for 6 months
- PCG assumed Fiscal Agent role October 1st
- Providers assumed direct billing and reviewing/resubmitting denials to MA and commercial insurance – previously done by WCDH
- Escrow account intended to pay fully adjudicated claims
- Reform “intended’ to provide administrative relief to Counties – relief not yet felt

Impact of EI Reform (con't)

- Burden on providers and County
- County assumed greater fiscal oversight to ensure appropriate payment from escrow account.
- Reduction to EI grant – 22% cut (\$126,287), loss of 2 lines
- Maintaining existing staffing at this time
- 2 TL staff shifted to Initial Service Coordination duties – a billable service and ensures bests interest of the County.
- Envision expanding initial SC role.

Impact of EI Reform (cont)

- Ongoing problems with NYEIS and EI billing
- Draft bill language submitted by EI providers to require fiscal agent to assume fiscal mgt and payment of claims as previous done by WCDH
- Potential loss of third party revenue (see table)

Potential Financial Impact

	Rate Claimed		
	WCDH	Fiscal Agent *	Difference
Commerical Insurance	3.5%	2%	2%
Medicaid	27.0%	22.6%	4%
	Est. Amt \$ based on WCDH Rate	Amt claimed by Fiscal Agent *	Potential Loss
Commerical Insurance	\$ 519,864.00	\$ 297,467.00	\$ 222,397.00
Medicaid	\$ 4,010,376.00	\$ 3,367,618.00	\$ 642,758.00
TOTAL	\$ 4,530,240.00	\$ 3,665,085.00	\$ 865,155.00
* Data for the period - 4/1/2013 - 10/31/2013			

Pre-K

- Number of children relatively stable
- Changes in expenditures driven by adherence to supporting the least restrictive environment for children.
- For past few years have successfully reduced transportation costs from 2013 adopted budget.
- Medicaid claiming reduced from 2 yrs to 1 year and still faced with many requirements to submit claims.

Conclusion

- WCDH provides mandated public health services that are essential to ensuring the protection of health for Westchester County residents.
- Tax levy funds used to support mandated services
- Focus remains on providing core mandated programs and activities
- Business practice aimed at optimizing and streamlining operations