

**Wake County Human Services Board  
Meeting Minutes  
June 25, 2020**

**Board Members Present:**

Fiorella Horna  
Deborah Lawson  
Dr. Randy Marsh  
John Myhre  
Dr. John Perry  
Margaret Raynor  
Ann Rollins  
Frank Eagles  
Stephanie Treadway  
Angie Welsh  
Commissioner James West  
McKinley Wooten

**Guests Present:**

Kyrie McKinney  
Melissa Singh

**Staff Members Present:**

Brittany Hunt  
Commissioner Vickie Adamson  
Anita Davis  
Cassandra Watford  
Caroline Harper  
Derwick Paige  
Heather Miranda  
Jessica Sanders  
Andre Pierce  
Ken Murphy  
Liz Scott  
Dr. Joseph Threadcraft  
Paige Rosemond  
Dr. Nicole Mushonga  
Annemarie Maiorano

**Call to Order**

Chair Ms. Angie Welsh called the meeting to order at 7:31 am.

**Approval of Minutes**

Chair Ms. Angie Welsh asked for a motion to approve the January 23 and February 27 meeting minutes. There was a motion by Mr. McKinley Wooten and Mr. John Myhre seconded to accept both minutes. The minutes were unanimously approved.

**Next Board Meeting – July 23, 2020**

**Treasurers Report**

(Presented by Ms. Margaret Raynor)

Treasurer Ms. Margaret Raynor reported that there was a \$1,150 credit due to the board stipends. This was an increase from the last statement provided to the Human Services Board in January - \$4,380.92. The current balance of the Board fund is \$5,530.92.

**COVID-19 Update**

(Presented by Dr. Nicole Mushonga and Ms. Heather Miranda)

Ms. Heather Miranda, Clinical Operations Director, noted that, currently, clinics were back open, though sometimes with limitations to those allowed inside. In response to this, telehealth options

have expanded. Child Health is currently only seeing children two years old or under. The Immunization Clinic is providing immunizations to children up to the age of five. The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is operating remotely. Clearance for remote WIC work has been extended until the end of July 2020. Referrals to this program have grown exponentially due to the economic impact of COVID-19.

The Eastern Regional Center in Zebulon, NC recently reopened and is offering limited, critical services. Provider restraints and declining visits from patients have both been concerns. In Raleigh, space has been made in the Wake County Human Services Sunnybrook Building to test patients who have failed COVID-19 screening. Meanwhile, the Maternal Child Health (MCH) program holds meetings virtually and childbirth education classes may soon also be offered online. The Summer Food Program launched recently and the “Grab-n-Go” (curbside drop-off) received a lot of participants. Other programs helped to make the experience special by providing additional resources to those who drove up. Additional resources have also been provided by the Communicable Disease (CD) team to help with the massive impact of COVID-19. Since March 16<sup>th</sup>, 2020, CD has held over 4,938 telehealth and telemed visits with patients.

Next, Dr. Nicole Mushonga, Epidemiology Program Manager, provided County data relating to COVID-19. As of June 22<sup>nd</sup>, 2020, the following was true:

- Wake County Positive Cases: 3,980
- Wake County Deaths: 44
- Wake County Average Age with COVID-19: 45
- Wake County Gender Distribution: 52% female and 47% male
- Wake County hospitalizations: 91

When looking at the cases of Wake County against comparable Durham County, Guilford County, and Mecklenburg County, Wake has the lowest rate of COVID-10 per 10,000 people (36). Wake also has the lowest number of deaths at 44. For brief comparison, Durham County has the highest COVID-19 rate per 10,000 of the four counties (101). Mecklenburg has the highest number of cases (8,956 to Wake’s 3,980) as well as the highest number of deaths (136). All of this data was current as of June 22<sup>nd</sup>, 2020.

Mass testing has reached 4,008 individuals so far between the Commons, Southern Regional Center, Wendell, Zebulon, and Cary. Of those, 126 were known Wake County staff. Future dates have been secured and are all scheduled from 10:00 a.m. to 3:00 p.m. at the following sites:

- Southeast Raleigh Magnet High School – June 25<sup>th</sup>, 26<sup>th</sup>, 27<sup>th</sup>
- Millbrook Magnet High School – June 29<sup>th</sup>, 30<sup>th</sup>
- McKimmon Conference and Training Center – July 6<sup>th</sup>, 7<sup>th</sup>

The public can register for any of the above testing dates by visiting <https://covid19.wakegov.com/testing/>.

**Public Health Fee Policy/Limited Fee Schedule [Accreditation Benchmark #33.5, 33.7, 39.3]**  
(Presented by Ms. Heather Miranda)

Ms. Heather Miranda, Clinical Operations Director, reviewed the Public Health Fee and Limited Fee Schedule. Ms. Miranda shared the governing statute from the Code of Federal Regulations –

Title 42 – Public Health, Part 59 Grants for Family Planning Services, Subpart A – Project Grants for Family Planning Services (<https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=8f4724cb2093da084cddacf01dca0c3d&n=42y1.0.1.4.44&r=PART&ty=HTML>).

Changes in the Public Health Fee policy centered around telemedicine. The policy statement was clarified to include telemedicine and a definition for “telemedicine services” was given as follows: “The use of two-way real-time interactive audio and video to provide and support health care when participants are in different physical locations.”

Ms. Miranda then shared the Public Health Sliding Fee Scale (below), which took effect on February 1<sup>st</sup>, 2020.

| Federal Poverty | Family Size | 20% Pay |        | 40% Pay |         | 60% Pay |         | 80% Pay |         | 100% Full Pay |
|-----------------|-------------|---------|--------|---------|---------|---------|---------|---------|---------|---------------|
| 12,760          | 1           | 12,761  | 17,545 | 17,546  | 22,330  | 22,331  | 27,115  | 27,116  | 31,899  | 31,900        |
| 17,240          | 2           | 17,241  | 23,705 | 23,706  | 30,170  | 30,171  | 36,635  | 36,636  | 43,099  | 43,100        |
| 21,720          | 3           | 21,721  | 29,865 | 29,866  | 38,010  | 38,011  | 46,155  | 46,156  | 54,299  | 54,300        |
| 26,200          | 4           | 26,201  | 36,025 | 36,026  | 45,850  | 45,851  | 55,675  | 55,676  | 65,499  | 65,500        |
| 30,680          | 5           | 30,681  | 42,185 | 42,186  | 53,690  | 53,691  | 65,195  | 65,196  | 76,699  | 76,700        |
| 35,160          | 6           | 35,161  | 48,345 | 48,346  | 61,530  | 61,531  | 74,715  | 74,716  | 87,899  | 87,900        |
| 39,640          | 7           | 39,641  | 54,505 | 54,506  | 69,370  | 69,371  | 84,235  | 84,236  | 99,099  | 99,100        |
| 44,120          | 8           | 44,121  | 60,665 | 60,666  | 77,210  | 77,211  | 93,755  | 93,756  | 110,299 | 110,300       |
| 48,600          | 9           | 48,601  | 66,825 | 66,826  | 85,050  | 85,051  | 103,275 | 103,276 | 121,499 | 121,500       |
| 53,080          | 10          | 53,081  | 72,985 | 72,986  | 92,890  | 92,891  | 112,795 | 112,796 | 132,699 | 132,700       |
| 57,560          | 11          | 57,561  | 79,145 | 79,146  | 100,730 | 100,731 | 122,315 | 122,316 | 143,899 | 143,900       |
| 62,040          | 12          | 62,041  | 85,305 | 85,306  | 108,570 | 108,571 | 131,835 | 131,836 | 155,099 | 155,100       |

A more comprehensive review of fees will be made for the Board during this time. Public Health has reviewed best practices for safety net providers, which included referencing accreditation benchmarks. The criteria for evaluation of fee structure included current service charges, cost of providing the service, and level of Medicaid reimbursement. Key staff members conducted meetings to review fees and policies in the months of February, April, and May.

With no fee increase for Fiscal Year (FY) 2019, a full comprehensive review will be conducted after January 2021’s Medicaid fee increase. All new fees were compared to benchmark standard and current North Carolina Medicaid reimbursement. Due to the COVID-19 response, telemedicine fees were reviewed and added to the schedule. Dental fee was added to provide Silver Diamine Fluoride for children and two immunization fees were increased due to greater reimbursement from Medicaid. In response, Public Health has developed a strategic approach to preserving patient access and reducing the County’s cost. This includes annual fee reviews,

service line enhancements, business model adjustments, review of technology, and additions to telehealth to service line post-COVID-19 response.

A limited number of the new fees were then shared.

| Service Type  | Code           | Current Fee | Proposed Fee |
|---|----------------|-------------|--------------|
| Pregnancy Medical Home Initial Risk   | <b>S0280</b>   | \$ 50.00    | \$ 53.00     |
| Pregnancy Medical Home Postpartum   | <b>S0281</b>   | \$ 150.00   | \$ 158.00    |
| Phone Eval/Mgmt (5-10 min) medical discussion   | <b>99441</b>   | NEW CODE    | \$ 66.00     |
| Phone Eval/Mgmt (11-20 min) medical discussion  | <b>99442</b>   | NEW CODE    | \$ 107.00    |
| Phone Eval/Mgmt (21-30min) medical discussion   | <b>99443</b>   | NEW CODE    | \$ 136.00    |
| Brief communication tech based service, not related to E/M (5-10 min) medical discussion                    | <b>G2012</b>   | NEW CODE    | \$ 15.00     |
| Bexsero Intramuscular Suspension Prefilled Syringe  | <b>MBXBILL</b> | \$ 200.00   | \$ 215.00    |
| HPV 9v Private Supply   | <b>90651P</b>  | \$ 250.00   | \$ 285.00    |
| Interim caries arresting medicament application per tooth   | <b>D1354</b>   | NEW CODE    | \$ 90.00     |
| Dental telephone or audio-only encounters between patients and providers that do not result in a diagnosis. | <b>D9995</b>   | NEW CODE    | \$ 352.00    |
| Unspecified diagnostic procedure, by report (Dental)  | <b>D0999</b>   | NEW CODE    | \$ 75.00     |
| Virtual code limited oral eval  | <b>D0140VC</b> | NEW CODE    | \$ 240.00    |

**Ms. Angie Welsh noted that the Human Services Board had received the report. Mr. Frank Eagles made a motion to accept the report and Ms. Ann Rollins seconded. The report was unanimously accepted.**

#### **FY2021 Energy Outreach Plan Approval – Review and Presentation of LIEAP/CIP**

(Presented by Ms. Janny Mealor)

Ms. Janny Mealor, Economic Benefits Manager, reviewed the FY 2021 Energy Outreach Plan. After providing a brief introduction to the Energy Assistance Program, she shared the budget and spending for the Crisis Intervention Program (CIP) and Low-Income Energy Assistance Program (LIEAP). In response to COVID-19, the State reallocated all remaining LIEAP funds across all 100 Counties to allow for supplemental payments based on the amount of their LIEAP benefit. In Wake County, COVID-19 forced the Governor to put a moratorium on utility disconnections.

There is an anticipation for a very high volume once this moratorium is lifted due to the expected number of large bills. Customers will be allowed to set up free payment plans that may keep many out of crisis through September 2020.

Outreach has been robust with mailings, faxes, e-mails, and paper applications. To increase outreach, partners, such as Dorcas Ministries and Resources for Seniors, assist the Energy Assistance Program. The Program will continue to work with and build on the marketing plan and opportunities via the Wake County Communications Office. Due to the budget impact of FY 2021, there is no anticipation for available resources to be utilized for off-site application outreach.

**Ms. Angie Welsh noted that the Human Services Board had received the report. Mr. McKinley Wooten made a motion to accept the report and Mr. John Myhre seconded. The report was unanimously accepted.**

#### **Offsite Easement Rule [Accreditation Benchmark #34.4a]**

(Presented by Mr. Michael Orbon)

Mr. Michael Orbon, Water Quality Director, noted that rule revisions were required to the off-site septic system easement rule. The Wake County rule was added in the 2011 amendments and the North Carolina Department of Health and Human Services (NCDHHS) made an innovative approval in 2016. However, since then some County regulations need updating as new experiences arise with the systems.

In response to these needs, there was a Stakeholder Input Subcommittee composed of individuals from the Public Health Committee, Water Partnership, Design Community, and Wake County. This Subcommittee compared State and local off-site rules, identified rules needing revision, proposed language for revisions, and reviewed and approved language as written. Duplicate rules were removed and the rules were reordered for clarity. Wake County rules now align more with State rules. Changes included a new definition section, alterations to easement design requirements, an updated Permanent Marker provision, and an updated certification requirements. The rule revisions have been reviewed by a Wake County attorney, NCDHHS, and Wake County Board of Commissioners. The Water Partnership also received the rules for comments.

**Ms. Angie Welsh noted that the Human Services Board had received the rule revisions. Ms. Margaret Raynor made a motion to accept the report and Mr. John Myhre seconded. The revisions were unanimously accepted.**

#### **Public Health Report: Chronic Disease Brief Overview [Accreditation Benchmark #2.4c]**

(Presented by Dr. Nicole Mushonga)

Because of the brevity of the meeting, Dr. Nicole Mushonga offered a brief overview of the Public Health Report: Chronic Disease. A full report will be given to the Board in July. The top three leading causes of death in Wake County in 2018 were cancer, diseases of the heart, and cerebrovascular disease. Overall, chronic disease mortality rates are declining with the exception of Alzheimer's Disease and cancers in Hispanic and African-American populations. With

Alzheimer's Disease, more women than men were impacted and the overall death rate increased by 43%. By comparison, while cancer was the number one cause of death in Wake County, five-year trends show the mortality rates decreasing. However, a racial disparity between African-American men and all other ethnic and racial groups still persists.

Diabetes has been identified as having the most significant and persistent death rate disparity. The overall death rate has remained stable from 2010-2014 to 2014-2018. There is a Wake County Minority Diabetes Prevention Program (MDPP) that has proved extremely successful working with individuals to prevent onset of Type II diabetes. With four cohorts and 72 participants, their 83-100% retention rate is impressive.

### **Departmental Budget Updates – Human Services & Environmental Services [Accreditation Benchmark #33.2, 33.5, 39.1b, and 39.3]**

(Presented by Ms. Anarosa Jones and Ms. Cassandra Watford)

Ms. Anarosa Jones, Department Business Manager, gave the fiscal review for Environmental Services. For FY21, there was \$40.8 million in revenue and \$52.4 million in expenditures. This is broken down further with the General Fund (\$3 million revenue, \$14.6 million expenditures) and Enterprise Funds (\$37.8 million revenue, \$37.8 million expenditures). For the General Fund, 31% of revenue was from Watershed Management while Wastewater was 25% of revenue. In expenses, 37% belonged to Water Quality. Health and Safety (26%) and Animal Center (27%) were also considerable parts of the General Fund expenses. Reviewing five-year trends, revenues have remained flat for Environmental Services. There has been a 2% increase in expenditures since FY17. Staff references budget manuals annually to ensure each service cost and percentage cost recovery for each fee is reviewed. Divisions focus on low recovery rate user fees to assess changes. Potential fee change discussions are based on cost recovery public policy implications. Fee changes are approved by the Board of Commissioners (BOC) during the annual budget process.

FY21 user fee changes include the annual pool permit with an annual increase for user permit fees from \$275 to \$300. This would result in \$31,200 in revenue and be in line with user fees in comparably sized counties. In addition, these fees have remained unchanged for seventeen years.

**Ms. Angie Welsh noted that the Human Services Board had received the report. Mr. John Myhre made a motion to accept the report and Ms. Margaret Raynor seconded. The report was unanimously accepted.**

Next, Ms. Cassandra Watford, Department Finance Officer, reported on the Human Services budget. As the COVID-19 outbreak impacts County operations, the community at-large, and economic conditions, the County anticipates lower property and sales tax revenues for FY20 and FY21 than previously estimated. As a result, departments were asked to adjust both the FY20 and FY21 budgets. For the FY20 General Fund, 1.5% of General Fund operating savings strategies had to be identified. In addition, for FY21, General Fund operating reductions of 7% to the base expenditure budget needed to be submitted. Approximately 6% were recommended by the Wake County Manager. Thus, the FY20 amended budget has \$161,781,233 in expenditures, \$81,659,730 in revenues/maintenance of fiscal effort (MOE), and County share of \$80,121,504. The reduction target is at 1.5% of County funds, which equates to \$1,201,823. Human Services

will achieve targeted savings with increased Public Health Medicaid Settlement revenues over budget by \$2,294,315. On June 15<sup>th</sup>, the Wake County BOC adopted the budget for FY21 and the approved budget establishes a 1.47 billion General Fund budget. This consists of total reductions of \$23,147,000 countywide.

### **Human Services Board Chair's Report**

(Presented by Ms. Angie Welsh and Mr. David Ellis)

The Human Services Board celebrated the contributions and leadership of Human Services Director Regina Petteway. Director Petteway will be retiring at the end of June. Board members contributed to gift Director Petteway a print from artist Ekua Holmes titled "Free to Be." Board members, County Manager David Ellis, and Chief Community Vitality Officer Derwick Paige thanked Director Petteway and spent a few moments sharing memories, words of encouragement, and well wishes.

### **Public Comments**

- None

### **Adjournment**

The meeting was adjourned at 9:23 AM.

Board Chair's Signature: Angie C. Welsh Date: 11/4/2020

Respectfully submitted by Ms. Brittany Hunt