

**CHEMUNG COUNTY BOARD OF HEALTH  
MINUTES  
April 22, 2014**

**PRESENT:** Gregory Schultz, MD Richard Madl  
Robert Lambert, MD Ken Sobel, MD  
Mary Ann Baker, RN William G. Howard, MD

**ABSENT:** James Gensel, PE

**OTHERS PRESENT:** Robert Page Thomas Kump, PE  
Melissa Klossner Rosemary Anthony, RN  
Harry Shepard

Prior to the meeting the CCBH received the following:

1. Agenda for April 22, 2014 CCBH Meeting
2. CCBH Meeting Minutes from January 28, 2014
3. Environmental Health Services Report for January, February, and March 2014
4. CHHA 4<sup>th</sup> Quarter 2013 Financial Report
5. Behavioral Risk Factor Surveillance Report

The following items were distributed at the meeting:

6. Financial Report through March 2014
7. Dental Services Reports for January, February, and March 2014
8. County Health Rankings Report 2014
9. DSRIP Presentation-Medicaid Redesign Project

**CALL TO ORDER**

President Mary Ann Baker called the meeting to order at approximately 7:30 PM.

**1. APPROVAL OF MINUTES FOR JANUARY 28, 2014 MEETING**

**RESOLUTION:** A motion was made by Dr. Lambert and seconded by Dr. Schultz that the minutes of the January 28, 2014 Board of Health meeting be approved and accepted as presented. **Motion approved.**

**AYES:** Gregory Schultz, MD Richard Madl  
Robert Lambert, MD Ken Sobel, MD  
Mary Ann Baker, RN William G. Howard, MD

**NAYES:** None

**ABSENT:** James Gensel, PE

## 2. FINANCIAL REPORT

Harry Shepard provided a copy of the Financial Report for the period ending March 31, 2014. He also provided the final 2013 report. For 2013, expenditures were at 94% of budget and for revenue they saw 96% of budget. This is a pretty nice way to end the year. There is nothing staggering to report thus far in 2014. There were no questions for Mr. Shepard.

## 3. SERVICES REPORTS

**A. ENVIRONMENTAL HEALTH SERVICES** – Thomas Kump mentioned that there were reports for January, February, and March 2014 included in the mailing to BOH members in advance of the meeting. A question was raised regarding what constitutes a “floor in disrepair” as noted on several inspection reports and subsequent enforcement actions. Mr. Kump explained that all floor and wall surfaces are to be “smooth and easily cleanable”. This is somewhat discretionary and is only written when it is obvious that the floor or walls meet that criteria. Mr. Kump also mentioned that there were changes made to the management structure in EHS. Peter Buzzetti was appointed to the position of Supervising Sanitarian to fill the vacancy created with the passing of Cassandra Hotchkiss. Mr. Buzzetti started in EHS as a Public Health Sanitarian about 7 years ago. He is currently working on his MPH through the NYS School of Public Health. He has done outstanding as a sanitarian and has thus far exceeded expectations in his new supervisory role. The now vacant Public Health Sanitarian position is hoped to be filled by June 1, 2014. There were no further questions for Mr. Kump.

**B. CHHA UPDATE & CLINIC ACTIVITIES** – Melissa Klossner reported that all is going well so far in 2014. Changes are being made to the billing process in the CHHA. They are being expected to now bill for services that hadn't been billed for in the past so it is taking some adjustment to accommodate this. The flu season does not appear to have ended yet as there were reports of recent flu cases in the Nursing Facility. Early seasonal cases appeared to be Type A but most recent cases seem to be Type B. Mr. Page commented on the 4<sup>th</sup> Quarter 2013 CHHA Financial Report that was distributed to the CCBH prior to the meeting. The statistics show a marked improvement in the efficiencies of the CHHA in 2013 over 2012. Mr. Page stated that the revenue continues to increase and that they have been successful in keeping the nursing positions filled in the CHHA. They are still not at where they would like to be with regard to the therapies and will work on improving in that area. There were no further questions for Ms. Klossner or Mr. Page.

**C. DENTAL SERVICES REPORT** – Mr. Page mentioned that there were three reports distributed at the meeting for Dental Services including the January, February, and March 2014 reports. Activity at the clinic has been pretty consistent and unremarkable. He reported that they have been continuing negotiations with the Regional Primary Care Network (RPCN) on turning over operation of the dental clinic. Deputy County Executive Michael Krusen has been leading the negotiations

with RPCN along with the management staff at the CCHD. The RPCN would have a much better Medicaid reimbursement rate than what our clinic has at more than twice the rate. The concept is that RPCN will own the operation including the staff and will lease space from the County. All existing dental clinic equipment will be turned over to RPCN. One of the requirements that will have to be met is for the clinic to be physically separated from the CCHD clinical areas. Mr. Kump utilized his building code knowledge to develop a plan where this concept could be realized with minimal construction and cost. Although it was first thought that it would be very difficult to meet the original requirements outlined by RPCN, after a productive meeting between RPCN and the County management team, it seems like there is very high hopes that this plan will work and be very successful. There have been no barriers identified to prevent this plan from advancing. If everything goes as planned, it is expected that construction could occur around Labor Day and that the official transfer of the dental clinic will occur by the end of 2014. There were no further questions for Mr. Page.

## **OLD BUSINESS**

- 1. BEHAVIORAL RISK FACTOR SURVEILLANCE REPORT** - Mr. Page referred to the document that was distributed to the CCBH in advance of the meeting relative to the Behavioral Risk Factor Surveillance Report. The data for the report was gathered through random phone surveys. Some of the survey categories are similar to the County Health Rankings questions, but there are also different categories that were not part of the health rankings. Mr. Page said that it would make sense to discuss both the Behavioral Risk Factor Surveillance Report and the County Health Rankings report simultaneously. There really was not much change in the rankings from the prior year's report. We did better in a few categories and were ranked worse in others. Areas where Chemung County is lagging in the State are in smoking, obesity, and mental health issues. We have both the Community Health Assessment (CHA) as well as the Community Health Improvement Plan (CHIP) that have been developed to attempt to address some of these issues. The local Health Priorities Partnership has established focus areas. Obesity is one of their focus areas. This includes initiatives involving breastfeeding, healthy environments, and various programs geared toward promoting physical activity. Another focus is tobacco use and a goal of a 3% reduction has been established. A disparity that was recognized is with tobacco use among low-income individuals. STTAC has applied for a large grant to help with this and they should hear by June 2014 whether they were successful or not in securing the grant. All of this activity is community-wide and is not solely the burden of Public Health. Dr. Howard questioned whether other communities in the State are doing activities that we could be doing that might improve our rankings. Mr. Page explained that while there are other activities being conducted in other counties, our local demographics has more to do with our rankings than the activities being performed. Overall, the County Health Rankings do provide us with guidance on where our available resources should be directed for the betterment of the community.

## **NEW BUSINESS**

**1. COUNTY HEALTH RANKINGS** – Mr. Page already addressed this topic while discussing the Behavioral Risk Factor Surveillance Report under Old Business.

**2. DSRIP PLAN**– Dr. Lambert presented information from the Medicaid Redesign Team (MRT). Governor Cuomo organized the Medicaid Redesign Team in 2011. The goal was fundamentally to re-structure the NYS Medicaid program. There were four areas that would be the focus including Medicaid managed care, health homes, medical homes, and a global cap. A chart illustrated the total NY Medicaid spending and how the costs were increasing year after year until 2012 where they saw the first decline. This has been attributed to some of the initiatives undertaken. The federal government gets 50% of the savings that result from the MRT. The federal government would in turn provide grants back to states in an effort to provide further efficiencies and savings in Medicaid. NYS requested \$10 billion over a 5-year period. The federal government recently granted NYS \$8 billion over a 5-year period that will be used for several initiatives. The largest component is the Delivery System Redesign Incentive Payment (DSRIP) program where \$6.4 billion in funds will be provided. Regional coalitions/alliances from across the State are expected to submit notices of intent to apply for the grants. Dr. Lambert suggested that the Finger Lakes HAS might be the most appropriate group from this area to make a submittal. Individuals from various entities within the 3-county area including Chemung, Steuben, and Schuyler counties have already had meetings to discuss concepts that could be presented for consideration. May 15 is the deadline for submitting letters of intent and June 17 is the deadline for submitting a more detailed concept of what is being proposed for this region. Mr. Page and Ms. Klossner have been involved with the local planning taking place representing Public Health.

**3. HEALTH DEPARTMENT MANAGEMENT REORGANIZATION** – Mr. Page discussed the changes in the organizational structure of the CCHD that will be coming soon. Several retirements from the CCHD that are taking place soon prompted the evaluation of the existing structure to see if a re-organization might be the most cost-effective approach to provide better operational management. Public Health Educator Linda Swarthout will be retiring by August 1<sup>st</sup> as well as the Clinical Coordinator for WIC Teresa Lodico. For WIC, it was determined that we would promote from within. The replacement would not be a nurse but rather a nutritionist. Interviewing for the position will be occurring over the next few weeks. The new WIC Coordinator will report directly to Deputy Public Health Director Harry Shepard. The Public Health Educator position will not be filled right away, but rather will be distributed to existing PH nursing staff as well as the PH Clinical Services Director Melissa Klossner. Ms. Klossner will no longer be involved in the CHHA. The current DPS for the CHHA Melissa Traub will be promoted to a Division Head for the CHHA. All these changes will result in 4 divisions, but in the end it will reduce the total FTE's and will reduce personnel costs by almost \$42,000. On another note, Mr. Page announced that the CCBH changes have been approved so that membership will increase from 8 members to 10 members. Word was also received that Dr. Shore has submitted his resignation from the CCBH after several years of service. Rosemary Anthony and John

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Varga will be the new members added to the CCBH and a replacement for Dr. Shore will be sought. This will all officially occur in May 2014.

**RESOLUTION:** A motion was made by the Chemung County Board of Health as a whole and seconded by the Chemung County Board of Health as a whole that official recognition and commendation be presented to Dr. Paul Shore for his many years of dedicated service to the County through his role on the Chemung County Board of Health.  
**Motion approved.**

**AYES:** Gregory Schultz, MD Richard Madl  
Robert Lambert, MD Ken Sobel, MD  
Mary Ann Baker, RN William G. Howard, MD

**NAYES:** None

**ABSENT:** James Gensel, PE

**ADJOURNMENT**

Since this meeting was postponed from March 25, 2014 and there is only a month until the next regular scheduled meeting of the CCBH, it was suggested that this meeting be adjourned to the July 22, 2014 regular meeting. If any action is required of the CCBH in advance of the July 22, 2014 meeting, Mr. Page will notify the CCBH President to schedule a special meeting between now and then.

**RESOLUTION:** With no further business to conduct, a motion was made by Dr. Schultz and seconded by Dr. Howard that the CCBH be adjourned until the next regular meeting of July 22, 2014. **Motion approved.**

**AYES:** Gregory Schultz, MD Richard Madl  
Robert Lambert, MD Ken Sobel, MD  
Mary Ann Baker, RN William G. Howard, MD

**NAYES:** None

**ABSENT:** James Gensel, PE

The meeting was adjourned at approximately 8:40 PM.

**Next meeting:** **Board of Health Meeting**  
**July 22, 2014 @ 7:30 PM**  
**Health Department Conference Room**