

**COUNTY OF SONOMA
AGENDA ITEM
SUMMARY REPORT**

Clerk of the Board Use Only
Meeting Date **Held Until**
 ___/___/___ ___/___/___
Agenda Item No: **Agenda Item**
No: **No:**

Department: Health Services

() **4/5 Vote Required**

Contact:
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Phone:
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4700

Board Date:
4/21/09

Deadline for Board Action:
4/21/09

AGENDA SHORT TITLE: Health Services Fees

REQUESTED BOARD ACTION:

Resolutions adopting Fee Schedules for:
 Environmental Health
 Mental Health
 Public Health

CURRENT FISCAL YEAR FINANCIAL IMPACT

EXPENDITURES

ADD'L FUNDS REQUIRING BOARD APPROVAL

Estimated Cost \$0

Contingencies
(Fund Name:)

Amount Budgeted

Unanticipated Revenue
(Source:)

Other Avail Approp
(Explain below)

Other Transfer(s)
(Source: Health Realignment)

Additional Requested: \$0

Add'l Funds Requested: \$0

Explanation (if required): See Background and Fee and Revenue Summary charts.

Prior Board Action(s): 6/17/08 – Resolution adopting fee schedule for Environmental Health; 6/26/07 – Resolutions adopting fee schedules for Public Health, Mental Health, and Alcohol and Other Drug Services.

Alternatives – Results of Non-Approval: Fees will not accurately reflect cost.

BACKGROUND: (Note: Resolution adopting Environmental Health fee schedule, Environmental Health Fee and Revenue Summary Chart, Resolution Adopting Mental Health Fee Schedule, Mental Health Fee and Revenue Summary Chart, Resolution Adopting Public Health Fee Schedule, and Public Health Fee and Revenue Summary Chart are on file with the Clerk of the Board.)

Fees for services are used to finance specific activities in the Department of Health Services and are based on Federal and State standards as well as the cost to provide services. The Department is submitting Environmental Health, Mental Health, and Public Health proposed fees for consideration at this time. In addition to proposed new and revised fees, the Department provides information on plans to improve productivity, efficiency and customer service; expected outcomes and a summary of the results from previously implemented improvement plans.

ENVIRONMENTAL HEALTH DIVISION

Environmental Health fees are authorized by California Health and Safety Code Sections 101325 et seq. Fees and grants provide the funding for Environmental Health program costs. Fees are based on the cost to provide the services, which include direct and indirect labor, services and supplies, administration, and countywide (A87) charges. The proposed FY 09-10 fees were developed using a time-task analysis conducted in December 2008 based on FY 07-08 data. One new proposed fee, applicable to several categories in the Food Program, is recommended. The total increase in revenue for FY 09-10 is estimated at \$185,503 (3.5%). Fees are based on the best information currently available to the Department and reflect the current cost of providing these services. If fees are not increased, services would be impacted including a reduction in inspections necessary to assure that health and safety standards are maintained.

Proposed Revisions to Existing Environmental Health Fees for FY 09-10

Solid Waste Program – The Environmental Health Division is authorized through the California Integrated Waste Management Board (CIWMB) to act as the Local Enforcement Agency (LEA) for Sonoma County. The LEA is responsible for inspections, enforcement, complaint investigation, permitting, review and regulatory services for solid waste facilities, including landfills, closed disposal sites, transfer stations, material recovery facilities, composting facilities, chipping and grinding facilities and biosolids land application sites within Sonoma County.

Based on the time task analysis conducted in December 2008, staff determined current fees did not accurately reflect the cost of providing program services. As a result, ten fee categories were decreased, one fee category remained unchanged, and thirteen categories increased. An outreach letter was sent to private solid waste facility owners in March 2009. Outreach to publicly owned sites has already been conducted. A comparison of neighboring counties was conducted and the new fees are consistent with fees charged by neighboring counties. Estimated costs for permits and inspections of private facilities for 09/10 are \$285,585 (29% increase over FY 08-09). Increased costs are due in part to three new facilities scheduled to open in FY 09-10 that will require processing new facility applications and permit preparation.

Attachments: Resolution adopting Environmental Health fee schedule; Environmental Health Fee and Revenue Summary Chart; Resolution Adopting Mental Health Fee Schedule; Mental Health Fee and Revenue Summary Chart; Resolution Adopting Public Health Fee Schedule; Public Health Fee and Revenue Summary Chart.

On File With Clerk: None.

CLERK OF THE BOARD USE ONLY

Board Action (If other than "Requested")

Vote:

BACKGROUND: (continued)

These inspection service levels are mandated. If proposed fees are not approved the program would be reduced and Sonoma County would be out of compliance with State site inspection regulations.

Market Milk Program – The Department inspects 101 Market Milk Dairies, 73 in Sonoma County and 28 in Marin County, and six (6) Manufacturing Milk Dairies in Sonoma County. In 1987 Sonoma County was assigned the responsibility as the inspection service provider for Sonoma and Marin county dairies by the Director of the Department of Food and Agriculture.

In FY 05-06, the Department cost for dairy inspections was \$206.50 per month per dairy. The Board approved a fee to dairy providers of \$173.00 and a contribution of \$33.50 from the General Fund per month per dairy for Sonoma County dairies. The Board also approved a plan to reduce the General Fund contribution over the next five years. The Board approved plan reduced the General Fund contribution of \$33.50 per month per dairy, by \$6.70 per month per dairy, each year over the following five years with the intent that by FY 10-11 the total cost of inspection would be paid by the dairies.

Year	Total Cost	Dairy Fee	General Fund Contribution
		Fee and contribution is Per Month Per Dairy	
FY 05/06	\$206.50	\$173.00	\$33.50
FY 06/07	207.30	180.50	26.80
FY 07/08	203.60	176.80	26.80
			annual decrease suspended
FY 08/09	201.10	176.80	24.30*
			annual decrease suspended
Proposed			
FY 09/10	201.10	183.50	17.60 (\$24.30 – \$6.70)

* Decrease in cost for FY 08-09 applied to General Fund contribution

In FY 06-07 the General Fund contribution was reduced by \$6.70, resulting in a per month per dairy General Fund contribution of \$26.80. In both FY 07-08 and FY 08-09, the Board of Supervisors approved a suspension of the General Fund reduction plan. Thus the planned annual decreases in General Fund contribution have not been applied over the past two years. In FY 08-09 the per month per dairy cost decreased by \$2.50; the Board approved the application of the decrease to the General Fund contribution for FY 08-09. So, although the reduction plan was suspended, the General Fund contribution for FY 08-09 was reduced by \$2.50 to \$24.30 per month per dairy.

For FY 09-10, the cost per month per dairy remains at \$201.10. Based on the approved plan and the two suspensions approved by the Board, for FY 09-10 the proposed per month per dairy fee is \$183.50 and the General Fund contribution is \$17.60 (total General Fund contribution \$15,418). If the Board again suspends the General Fund contribution reduction plan in FY 09-10, the dairy owner fee and General Fund contribution would remain at the FY 08-09 levels (total General Fund contribution \$21,287). Department staff is in communication with the Dairy Advisory Committee regarding the recommendation to resume reduction of the General Fund contribution. Proposed dairy fees were discussed again at the Dairy Advisory Committee Meeting on March 19, 2009.

Proposed New Environmental Health Fees for FY 09-10

Food Program – The Health and Safety Code requires a community event organizer with two or more food facilities at an event to apply for a permit with a site plan at least two weeks prior to operation of the facilities to ensure adequate time to review and identify health hazards and

BACKGROUND: (continued)

issue permit(s). Receiving applications at least two weeks prior to the event allows for better health evaluation and customer service, including timely review and issuance of permits, more efficient field inspections and mitigation of potential health hazards. A new fee category is proposed for applications submitted less than two weeks prior to an event. This proposed fee is 25% higher than the fee for applications submitted in accordance with State law and encourages timely submission of applications. The fee is based on an estimate of the cost of additional time and resources it takes to process the late applications at the event. This proposed fee is also being applied to mobile food preparation units, temporary food facilities, satellite food distribution facilities, mobile food facilities, and special event permits. Late applications place additional demands on staff during the two weeks prior to the event, and on the opening day of the event. In some cases, the event organizer or vendor has not applied at all, and rather than prohibiting participation, staff review the implications of participation and process the application in the field (including review of documents and managing the receipt of fees). This impacts the time dedicated to the required inspection of vendors to verify compliance with food safety standards prior to opening to the public. The additional demand on staff time during the two weeks prior to a large event and on the day of the event, have the potential to increase overtime in order to conduct all of the required activities and inspections.

Environmental Health Service Improvement Plan

Productivity, Efficiency and Customer Service Improvement Plan

- Implement combined invoices for premises under same ownership/billing.
- Electronically archive closed leaking underground storage tank files and make available to the public upon request.
- Utilize data management system to enhance tracking of time spent fulfilling service requests.
- Redesign the Environmental Health website to optimize access and upload all forms necessary to apply for service requests and permits.

Summary of Expected Results

- Businesses will receive one invoice and make all payments one time during the fiscal year. Staff will process fewer invoices, reducing staff time, postage and printing costs.
- Public access to closed leaking underground storage tank information will reduce staff time currently required to furnish the information.
- More cost efficient lab testing services.
- Permit and service request fees would reflect accurate costs and neither would subsidize the other.
- A decrease in necessary trips by the public to the office, reduction of paper, reduction of fuel, and reduction in staff time needed to mail necessary forms.

Summary of Results of Prior Year Plan

- Established an Environmental Health Division field office in northern Petaluma for staff responsible for inspecting approximately 450 food establishments, 250 public swimming pools, and 80 dairies.
- Postponed purchase of tablet computers for use during food facility inspections to assess optimum integration into the new data management and reporting system.
- Trained staff on the implementation of the mandatory training program for food permit holders whose facilities have five or more critical violations. Six food permit holders were directed to participate in the mandatory food training classes. Four English and two Spanish classes were conducted and attended by 55 individuals.

BACKGROUND: (continued)

- Archived one solid waste site eliminating inspection requirements. Reduced inspection frequencies were requested for nine disposal sites. It is anticipated that the California Integrated Waste Management Board (CIWMB) will make a final determination on those sites in late spring 2009. Any closed solid waste disposal site that no longer requires oversight may be 'archived', meaning the potential threat to the environment poses a minimal risk. The CIWMB does not use the word 'closed' as this term is used to refer to a site that is no longer operating but still requires regulatory oversight.

MENTAL HEALTH DIVISION

California Welfare and Institutions Code Section 5700 et seq. provide the authority for counties to charge fees for mental health services. Fee for service claims finance approximately half of the Department Mental Health Division (MHD) costs. Additional financing comes from Realignment, Mental Health Services Act (MHSA) funding, state and federal grants, and State funding for mandated services (i.e., SB90 and AB3632 service). Fee for service claims are billed to MediCal, Medicare, private insurance and HMOs, and private pay clients. The billed services include crisis intervention, crisis stabilization, medication support, individual and group therapy, case management, and a variety of rehabilitative interventions. The majority of these services are provided to MediCal eligible clients, therefore reimbursement is provided by two revenue sources: Federal Medicaid (50%) also called Federal Financial Participation or FFP; and Realignment funds (50%). Services billed to Medicare and private insurance are paid based on the current payer rate schedules. Private pay clients are billed based on a financial assessment that determines their ability to pay. Total costs of services provided in FY 07-08 was \$37,854,139 (per final cost settlement filed with the State).

The State establishes maximum payment amounts for each service covered by MediCal. The State maximum payments are set annually, and are based on 125% of the statewide average cost for each eligible service. Services provided by MHD to MediCal beneficiaries are billed and paid monthly by the State according to the Department's approved fee schedule. Each year, the MHD prepares an annual cost report to document the actual cost of providing mental health service. Based on the FY 07-08 cost report, it was determined that the MH fees were approximately 10 to 12% lower than the actual cost of providing each service. Therefore, the proposed fees for FY 09-10 reflect the cost for each unit of service as documented in the 07-08 cost report and include a 6% increase (3% per year for FY 07-08 and FY 08-09 costs) to account for the increased costs of salary and benefits (fees were not increased in FY 07-08). The Department is proposing a reduction for crisis stabilization from \$94 to \$63, to reflect the current costs to provide these services. If the proposed fees are not approved the Department cannot recover the cost of providing services from MediCal and other payer sources, resulting in an inappropriate draw on limited Realignment funds.

Mental Health Service Improvement Plan:
Productivity, Efficiency, and Customer Service Plan

- Review and monitor the payer status of all MHD clients to identify those with private insurance as primary payer – work with the client to transition to a service provider contracted with their insurance company, and/or work with the payer to assure maximum reimbursement for services provided (many insurance companies provide limited coverage for outpatient mental health services).
- Monitor staff direct services hours; provide training and supervision to assist staff to maximize their direct service hours.

BACKGROUND: (continued)

Summary of Expected Results

- Private insurance companies will reimburse the MHD for services.
- Proposed fees allow the County to ensure maximum reimbursement of costs.

Results of Prior Year Plan

- The number of MHD clients with private insurance has declined and these clients are seeking services from providers covered by their insurance. For those privately insured clients seeking services from MHD, charges are being submitted to insurance companies and payment pursued.
- Physicians who provide psychiatric emergency services must have a current provider application on file with Medicare for the MHD to bill Medicare.
- Staff direct service hours have been increased; improvements are being monitored and maintained. The reimbursements from payable sources have increased annually by an average of about 7% for the last three years.

PUBLIC HEALTH DIVISION – PUBLIC HEALTH CLINICS

California Health and Safety Code Section 1200 et seq. provides authority for counties to charge fees for outpatient clinical services. As in past years, fee schedules established by state or federal sources are used to set fees for Child Health Disability Prevention (CHDP), Comprehensive Perinatal Services Program (CPSP), and Family Planning. State and Federal fee schedules are established using the Resource Based Relative Value System (RBRVS). This system assigns a dollar value for each health care service based on the estimated costs of physician work time, administrative expense and malpractice expense.

Sources of fee revenue include: MediCal; Medicare; State Family Planning (F-PACT); private insurance; and client payments. Sliding fee scales are used in HIV Prevention and Care Clinic and Targeted Case Management programs as per State and Federal requirements. The HIV Clinic and Early Intervention Center sliding fee scale is consistent with the Ryan White Care Act State contract. In the Targeted Case Management program, the sliding fee schedule is consistent with Federal Medicaid Law.

If proposed fees are not approved, various results will likely impact clients including longer waits for services, referrals to other healthcare providers and staff reductions. Although Realignment funds are mandated for use in some Public Health clinics, these funds have decreased by over 10% and must be prioritized to maximize client services within the Department.

Proposed Revisions to Existing Public Health Clinic Fees for FY 09-10

Sexually Transmitted Disease (STD) Visit – Examination, Testing, Treatment - eliminates the STD New Client Initial Visit + 1 follow-up Visit fee and the STD Established Client Visit fee. Creates one fee for new and established clients that includes examination, testing and treatment. To ensure comprehensive treatment of STDs for new and established patients, the new single fee of \$80 per visit applies to all STD clients. Creating a single fee for each visit allows for comprehensive treatment to be provided without delay, thereby increasing the rates of completion of treatment regimens and reducing the potential for untreated cases of STDs in our communities. If the proposed fee is not approved these services will continue to be provided at the currently approved rates.

BACKGROUND: (continued)

Proposed New Public Health Clinic Fees for FY 09-10

Work Clearance Certification – The Tuberculosis (TB) Clinic provides required pre-employment certification for prospective employees. Prospective employees providing documented income for the three months prior to the visit will pay a proposed fee of \$49. To avoid becoming a barrier to employment, the Division proposes a reduced fee of \$25 for clients with no documented income. This program is only available for those prospective employees who are required by law to have a TB skin test due to the increased risk of TB exposure to the public (i.e. child care providers, skilled nursing facility employees). The program is supported with Realignment. The total cost per certificate is \$127.62. This program is funded by Realignment.

Isoniazid (INH) Antituberculosis Treatment – Preventive treatment with isoniazid (also called INH) for clients with latent TB infection. Analysis indicates initial visit costs of \$93, and \$30 for each monthly visit. INH treatment prevents the development of active TB and is essential to limit the spread of this communicable disease. The Department is proposing a flat fee of \$5 per visit to encourage clients to complete their course of treatment. Neighboring counties charge between \$5 and \$7 per monthly visit. This program is funded by Realignment. If the proposed fee is not approved this service will continue to be provided with no fees charged.

Public Health Service Improvement Plan

Productivity, Efficiency, and Customer Service Plan

- Fully implement improved billing and reporting systems in the Public Health Clinical Lab to track billing and enhance result reporting.
- Implement lab order entry and sharing of client billing information to improve accuracy of billing and enhance collections.

Productivity, Efficiency, and Customer Service Plan – cont.

- Further implement electronic billing and posting to improve timeliness and accuracy of postings.

Summary of Expected Results of the Plan

- Improve billing process to ensure payment from all third party payers.
- 100% of claims will be billed and posted electronically.

Results of Prior Year Plan

- Program revenues are monitored and used in developing annual budgets.
- Improved billing compliance through support of the Department Compliance Officer and Biller's Group Committee that addresses emerging issues and identifies appropriate and timely solutions.

**ENVIRONMENTAL HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10		Rate Dollar	Rate %	FY 09-10	
	Budget Units of Service	FY 08-09 Rate			Proposed Rate	Revenue Inc/(Dec) Due To Rate Change
1. Food Facilities						
a. Food Establishment - Prepackaged non-potentially hazardous food						
1. Food - Prepkg Non-Pot Haz	140	87.00	91.00	4.00	4.60%	560.00
2. Food - Prepkg Non-Pot Haz- School - 1 insp	1	87.00	91.00	4.00	4.60%	4.00
3. Food - Prepkg Non-Pot Haz- School - 2 insp	0	149.00	156.00	7.00	4.70%	0.00
4. Food - Prepkg Non-Pot Haz- Exempt	0	0.00	0.00	0.00	0.00%	0.00
5. Food - Prepkg Non-Pot Haz- Vet Exempt	0	0.00	0.00	0.00	0.00%	0.00
b. Food Establishment - Minimal Risk						
1. Food - Minimal Risk	440	337.00	353.00	16.00	4.75%	7,040.00
2. Food - Minimal Risk - School - 1 insp	8	337.00	353.00	16.00	4.75%	128.00
3. Food - Minimal Risk - School - 2 insp	4	435.00	455.00	20.00	4.60%	80.00
4. Food - Minimal Risk - Exempt	0	0.00	0.00	0.00	0.00%	0.00
5. Food - Minimal Risk - Vet Exempt	1	0.00	0.00	0.00	0.00%	0.00
c. Food Establishment - Moderate Risk						
1. Food - Moderate Risk	360	933.00	976.00	43.00	4.61%	15,480.00
2. Food - Moderate Risk - Seasonal	15	785.00	821.00	36.00	4.59%	540.00
3. Food - Moderate Risk - Caterer Using Rental Kitchen	12	785.00	821.00	36.00	4.59%	432.00
4. Food - Moderate Risk - Reduced Fee Incentive	306	896.00	937.00	41.00	4.58%	12,546.00
5. Food - Moderate Risk - School - 1 insp	19	809.00	846.00	37.00	4.57%	703.00
6. Food - Moderate Risk - School - 2 insp	49	909.00	951.00	42.00	4.62%	2,058.00
7. Food - Moderate Risk - Exempt	0	0.00	0.00	0.00	0.00%	0.00
8. Food - Moderate Risk - Vet Exempt	3	0.00	0.00	0.00	0.00%	0.00
d. Food Establishment - High Risk						
1. Food - High Risk	532	1,045.00	1,093.00	48.00	4.59%	25,536.00
2. Food - High Risk - Seasonal	28	846.00	885.00	39.00	4.61%	1,092.00
3. Food - High Risk - Caterer Using Rental Kitchen	30	785.00	821.00	36.00	4.59%	1,080.00
4. Food - High Risk - Reduced Fee Incentive	363	958.00	1,002.00	44.00	4.59%	15,972.00
5. Food - High Risk - Rental Kitchen	26	809.00	846.00	37.00	4.57%	962.00
6. Food - High Risk - School - 1 insp	6	846.00	885.00	39.00	4.61%	234.00
7. Food - High Risk - School - 2 insp	9	984.00	1,029.00	45.00	4.57%	405.00
8. Food - High Risk - Exempt	0	0.00	0.00	0.00	0.00%	0.00
9. Food - High Risk - Vet Exempt	1	0.00	0.00	0.00	0.00%	0.00
e. Bed & Breakfast / Agricultural Homestay						
1. Bed & Breakfast / Ag Homestay	44	461.00	482.00	21.00	4.56%	924.00
2. Bed & Breakfast / Ag Homestay - Vet Exempt	1	0.00	0.00	0.00	0.00%	0.00
f. Mobile Food Preparation Unit						
1. New Application Less than 2 weeks prior to event	58	498.00	521.00	23.00	4.62%	1,334.00
g. Vending Machine						
1. New Application Less than 2 weeks prior to event	0	0.00	651.00	651.00	100.00%	0.00
h. Temporary Food Facility - Minimal risk						
1. Temp Food - Minimal Risk	38	13.00	14.00	1.00	7.69%	38.00
i. Temporary Food Facility - Moderate Risk						
1. Temp Food - Minimal Risk	230	175.00	183.00	8.00	4.57%	1,840.00
2. Temp Food - Minimal Risk - Exempt	0	0.00	0.00	0.00	0.00%	0.00
3. Temp Food - Minimal Risk - Vet Exempt	26	0.00	0.00	0.00	0.00%	0.00
4. New Application Less than 2 weeks prior to event	0	0.00	229.00	229.00	100.00%	0.00
j. Temporary Food Facility - Moderate Risk						
1. Temp Food - Moderate Risk	200	424.00	444.00	20.00	4.72%	4,000.00
2. Temp Food - Moderate Risk - Exempt	0	0.00	0.00	0.00	0.00%	0.00
3. Temp Food - Moderate Risk - Vet Exempt	48	0.00	0.00	0.00	0.00%	0.00
4. New Application Less than 2 weeks prior to event	0	0.00	555.00	555.00	100.00%	0.00
k. Certified Farmers Market - single site	14	192.00	201.00	9.00	4.69%	126.00
l. Certified Farmers Market - multiple sites	0	0.00	1,599.00	1,599.00	100.00%	0.00
m. Swap Meet Prepackaged Food Stand	21	138.00	144.00	6.00	4.35%	126.00
n. Satellite Food Distribution Facility						
1. Satellite Food Dist	34	498.00	521.00	23.00	4.62%	782.00
2. Satellite Food Dist - School -1 insp	6	498.00	521.00	23.00	4.62%	138.00
3. Satellite Food Dist - School -2 insp	3	647.00	677.00	30.00	4.64%	90.00
4. Satellite Food Dist - Exempt	0	0.00	0.00	0.00	0.00%	0.00
5. New Application Less than 2 weeks prior to event	0	0.00	651.00	651.00	100.00%	0.00
o. Mobile Food Facility						
1. Mobile Food Facility	126	348.00	364.00	16.00	4.60%	2,016.00
2. Mobile Food Facility - Vet Exempt	8	0.00	0.00	0.00	0.00%	0.00
p. Community Event- 2 - 5 vendors						
1. Community Event- 2 - 5 vendors - Exempt	15	129.00	135.00	6.00	4.65%	90.00
2. New Application Less than 2 weeks prior to event	0	0.00	0.00	0.00	0.00%	0.00
3. New Application Less than 2 weeks prior to event	0	0.00	169.00	169.00	100.00%	0.00
q. Community Event- 6 or more vendors						
1. Community Event - 6 or More Vendors	42	258.00	270.00	12.00	4.65%	504.00
2. Community Event - Exempt	0	0.00	0.00	0.00	0.00%	0.00
3. New Application Less than 2 weeks prior to event	0	0.00	338.00	338.00	0.00%	0.00
r. Multiple Units	421	158.00	165.00	7.00	4.43%	2,947.00
s. Plan Checks						
1. Remodel: 1 hr minimum + hourly rate	50	129.00	135.00	6.00	4.65%	300.00
2. New Construction/major remodel: 4 hr minimum + hourly rate	83	516.00	540.00	24.00	4.65%	1,992.00
t. Site Reviews	30	260.00	273.00	13.00	5.00%	390.00
u. Counter Clearance	21	43.00	45.00	2.00	4.65%	42.00
v. Occasional Event Facility - Minimal Risk						
1. Occasional Event - Exempt	0	0.00	0.00	0.00	0.00%	0.00
2. Occasional Event	173	63.00	66.00	3.00	4.76%	519.00
3. Occasional Event - Veterans Exempt	0	0.00	0.00	0.00	0.00%	0.00
4. New Application Less than 2 weeks prior to event	0	0.00	83.00	83.00	100.00%	0.00
w. Occasional Event Facility - Moderate Risk						
1. Occasional Event - Exempt	0	0.00	0.00	0.00	0.00%	0.00
2. Occasional Event	101	266.00	278.00	12.00	4.51%	1,212.00
3. Occasional Event - Veterans Exempt	2	0.00	0.00	0.00	0.00%	0.00
4. New Application Less than 2 weeks prior to event	0	0.00	348.00	348.00	100.00%	0.00
x. Food Handler Certification Class and Test	320	93.00	97.00	4.00	4.30%	1,280.00
y. Food Handler Certification Test Only	48	66.00	69.00	3.00	4.55%	144.00
z. Food Handler Certification Retest	22	33.00	35.00	2.00	6.06%	44.00
aa. Environmental Health Class (2 hr minimum + hourly rate)	1	258.00	270.00	12.00	4.65%	12.00
ab. Violation reinspection (1 hr minimum + hourly rate)	22	113.00	135.00	22.00	19.47%	484.00

**ENVIRONMENTAL HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10 Budget Units of Service	FY 09-10		Rate Dollar Change	Rate % Change	FY 09-10 Revenue Inc/(Dec) Due To Rate Change
		FY 08-09 Rate	Proposed Rate			
ab. Late Payment Penalty Fee - 25% after 30 days past due and 25% at 60 days past due	0	0.00	0.00	0.00	0.00%	0.00
ac. Hourly Rate	75	129.00	135.00	6.00	4.65%	450.00

JUSTIFICATION:

FY 09-10 Food Facilities fees increased to reflect current program costs based on time-task analysis and A-87 expenses

1.f.1.,1.h.4.,1.i.4.,1.m.5.,1.o.1.,1.p.3.,1.u.4.,1.v.4. New fee for applications submitted less than 2 weeks prior to temporary events added as incentive for timely application.

1.k. FY 07-08 fee of \$1,477 was removed in FY 08-09 and is now being readded with adjustment to reflect current program costs.

1.aa. Violation Reinspection fee is based on standard hourly rate of \$135 to be consistent with all Environmental Health fees and includes an increase to cover current program costs bases on time task analysis and A-87 expenses.

2. Stormwater						
a. Storm Water Permit Boundary - North Coast Region	319	38.00	40.00	2.00	5.26%	638.00
b. Storm Water Permit Boundary - SR City	577	38.00	40.00	2.00	5.26%	1,154.00
c. Storm Water Permit Boundary - San Francisco Bay Region	78	38.00	40.00	2.00	5.26%	156.00

JUSTIFICATION:

FY 09-10 Stormwater fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

3. Housing						
a. Organized Camp - Year-round	12	1,254.00	1,312.00	58.00	4.63%	696.00
b. Organized Camp - Seasonal	4	621.00	650.00	29.00	4.67%	116.00
c. Meth Contaminated	0	129.00	135.00	6.00	4.65%	0.00
d. Temporary Holding Facility	7	217.00	227.00	10.00	4.61%	70.00
e. Type II Juvenile Detention Facility	3	1,085.00	1,135.00	50.00	4.61%	150.00
f. Type II Adult Detention Facility	2	1,662.00	1,738.00	76.00	4.57%	152.00

JUSTIFICATION:

FY 09-10 Housing fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

4. Swim & Bath/Recreation						
a. Public Swimming Pools - Year-round	187	610.00	638.00	28.00	4.59%	5,236.00
b. Public Swimming Pools - Seasonal (May thru Oct.)	288	509.00	532.00	23.00	4.52%	6,624.00
c. Homeowners Association Pools	0	0.00	0.00	0.00	0.00%	0.00
d. Multiple Units	274	101.00	106.00	5.00	4.95%	1,370.00
e. Plan Checks						
1. Remodel: 1 hr minimum + hourly rate	5	129.00	135.00	6.00	4.65%	30.00
2. New Construction: 4 hr minimum + hourly rate	11	516.00	540.00	24.00	4.65%	264.00
f. Counter Clearance	1	43.00	45.00	2.00	4.65%	2.00
g. Violation Reinspection (1 hr minimum + hourly rate)	15	113.00	135.00	22.00	19.47%	330.00
h. Penalty fee - 25% of fee after 30 days past due and 25% of fee at 60 days past due	0	0.00	0.00	0.00	0.00%	0.00

JUSTIFICATION:

FY 09-10 Swim & Bath/Recreation fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

4.g. Violation Reinspection fee is based on standard hourly rate of \$135 to be consistent with all Environmental Health fees and includes increases to reflect current program costs based on time-task analysis and A-87 expenses.

5. Milk and Dairy						
a. Market Milk Dairy						
1. Market Milk Dairy Monthly Fee	91	176.80	183.50	6.70	3.79%	7,316.40
2. Sonoma County Contribution per dairy/month	73	24.30	17.60	(6.70)	(27.57%)	(5,869.20)
3. Marin County Contribution per dairy/month	28	24.30	17.60	(6.70)	(27.57%)	(2,251.20)
b. Market Milk Independent Monthly Fee	10	176.80	183.50	6.70	3.79%	804.00
c. Manufacturing Milk Dairy Monthly Fee (minimum \$78.00)	6	78.00	78.00	0.00	0.00%	0.00
d. Producer-Distributor Raw Milk Monthly Fee	0	176.80	183.50	6.70	3.79%	0.00
e. Violation Reinspection fee	27	113.00	135.00	22.00	19.47%	594.00

JUSTIFICATION:

5.a., 5.b., 5.d. Amount per month represents an increase due to a \$6.70 reduction in the General Fund per dairy per month contribution.

5.e. Violation Reinspection fee is based on standard hourly rate of \$135 to be consistent with all Environmental Health fees and increases to reflect current program costs based on time-task analysis and A-87 expenses.

6. Softserve						
a. Softserve	102	150.00	150.00	0.00	0.00%	0.00

JUSTIFICATION:

6.a. The permit fee for Softserve is established by the State. Fee remains at \$150 for FY 09-10. Sonoma County remits \$22.50 per permit to the State.

7. Water Systems						
a. State Small Water System Permit	65	720.00	753.00	33.00	4.58%	2,145.00
b. Hourly Rate	5	0.00	135.00	135.00	100.00%	675.00
c. Violation Reinspection (1 hr minimum + hourly rate)	6	0.00	135.00	135.00	100.00%	810.00

JUSTIFICATION:

FY 09-10 Water System fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

**ENVIRONMENTAL HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10 Budget		FY 09-10 Proposed	Rate Dollar Change	Rate % Change	FY 09-10 Revenue Inc/(Dec) Due To Rate Change
	Units of Service	FY 08-09 Rate				
7.b-c. To ensure accurate revenue tracking, an hourly fee is assigned to every Environmental Health general program and cost center.						
8. Septage Haulers						
a. Septage Pumper/Chemical Toilet Trucks (per vehicle)	66	355.00	371.00	16.00	4.51%	1,056.00
b. Permit Transfer Fee (per vehicle)	0	129.00	135.00	6.00	4.65%	0.00
c. Hourly Rate	0	0.00	135.00	135.00	100.00%	0.00
d. Violation Reinspection (1 hr minimum + hourly rate)	1	0.00	135.00	135.00	100.00%	135.00

JUSTIFICATION:

FY 09-10 Septage Haulers fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

8.c-d. To ensure accurate revenue tracking, an hourly fee is assigned to every Environmental Health general program and cost center.

9. Solid Waste Facility Permits						
a. Inspection Services						
1) Disposal Site						
a) Full Solid Waste Facilities Permit - Disposal Site	0	9,128.00	37,961.00	28,833.00	315.87%	0.00
b) Permit Exemption - Quarterly Inspections	2	2,879.00	2,228.00	(651.00)	(22.61%)	(1,302.00)
c) Permit Exemption-Semi-Annual	1	2,879.00	1,853.00	(1,026.00)	(35.64%)	(1,026.00)
2) Transfer Stations						
a) Transfer Station-(Full) Lg Volume>100tpd>than 600tpd	0	0.00	14,549.00	14,549.00	100.00%	0.00
b) Transfer Station-(Full) Lg Volume>100tpd<than 600tpd	2	6,679.00	8,484.00	1,805.00	27.03%	3,610.00
c) Transfer Station - Registration Medium	2	4,565.00	6,635.00	2,070.00	45.35%	4,140.00
d) Transfer Station - Notification Small/Limited	2	1,500.00	2,974.00	1,474.00	98.27%	2,948.00
3) Closed Site Monitoring						
a) Closed Site Monitoring (Monthly Inspection)	0	0.00	5,580.00	5,580.00	100.00%	0.00
b) Closed Site Monitoring (Quarterly Inspection)	3	0.00	1,860.00	1,860.00	100.00%	5,580.00
c) Closed Site Monitoring (Biannual Inspection)	4	0.00	930.00	930.00	100.00%	3,720.00
d) Closed Site Monitoring (Annual Inspection)	4	2,239.00	465.00	(1,774.00)	(79.23%)	(7,096.00)
4) Composting Facility						
a) Full Solid Waste Facilities Permit	0	17,121.00	18,255.00	1,134.00	6.62%	0.00
b) Registration (Monthly Inspections)	1	8,001.00	3,591.00	(4,410.00)	(55.12%)	(4,410.00)
c) Notification (Quarterly Inspections)	4	1,148.00	1,447.00	299.00	26.05%	1,196.00
d) Notification (Semi-Annual Inspections)	2	485.00	724.00	239.00	49.28%	478.00
e) Notification Biosolids (Monthly Inspections)	1	6,679.00	7,204.00	525.00	7.86%	525.00
f) Notification (Annual Inspections)	6	485.00	362.00	(123.00)	(25.36%)	(738.00)
5) Biosolids Land Application Facility						
a) Notification Permit	5	0.00	6,131.00	6,131.00	100.00%	30,655.00
b. Permit Services						
1) Facility Permits						
a) New Facility Application: 18 hr minimum + hourly rate	2	2,279.00	2,430.00	151.00	6.63%	302.00
b) Existing Permit Review: 18 hr minimum + hourly rate	1	2,279.00	2,430.00	151.00	6.63%	151.00
c) Permit Preparation: 20 hr minimum + hourly rate	5	2,470.00	2,700.00	230.00	9.31%	1,150.00
d) Permit Revision: 32 hr minimum + hourly rate	1	4,128.00	4,320.00	192.00	4.65%	192.00
e) Permit Modification: 8 hr minimum + hourly rate	4	0.00	1,080.00	1,080.00	100.00%	4,320.00
f) Exemption Processing: 9 hr minimum + hourly rate	3	1,161.00	1,215.00	54.00	4.65%	162.00
g) Closure/Post-closure: 32 hr minimum + hourly rate	0	4,128.00	4,320.00	192.00	4.65%	0.00
h) CEQA Comment & Review: 18 hr minimum + hourly rate	0	2,322.00	2,430.00	108.00	4.65%	0.00
i) CEQA Lead Agency: 40 hr minimum + hourly rate	0	5,160.00	5,400.00	240.00	4.65%	0.00
j) California State Waste Board Meeting: 6 hr minimum + hourly rate	0	1,523.00	810.00	(713.00)	(46.82%)	0.00
2) Refuse Collection Vehicles						
a) Refuse Collection and Sludge Hauling Vehicles	326	284.00	284.00	0.00	0.00%	0.00
3) Enclosure Design Review	0	46.00	0.00	(46.00)	(100.00%)	0.00
c. Enforcement Services						
1) Notice & Order Preparation: 8hr minimum + hourly rate	1	1,032.00	1,080.00	48.00	4.65%	48.00
2) Legal Proceedings, Admin Hearings: no minimum, hourly rate only	0	129.00	135.00	6.00	4.65%	0.00
d. Violation Reinspection (1 hr minimum + hourly rate)	15	129.00	135.00	6.00	4.65%	90.00
e. Hourly Rate	28	0.00	135.00	135.00	100.00%	3,780.00
f. Meth. Contamination Prop Oversight/Clearance (1 hr minimum + hourly rate)	0	0.00	135.00	135.00	100.00%	0.00

JUSTIFICATION:

9.a.1.a Proposed fee reflects cost to provide service based on results of time task analysis.

9.a.2.a-b. Transfer Station Full permits have been restructured into two categories for facilities receiving more than 600tpd and less than 600tpd to reflect the actual time required for each category of services.

9.a.1.b-c, 9.a.2.c-d., and 9.a.4.a-f. Proposed fees reflect actual cost based on time task analysis.

9.a.3.a-d. Proposed fee reflects actual cost to provide service based on results of time task analysis.

9.a.5.a. Biosolids Land Application has been restructured into a new category and Fees have been adjusted to reflect actual cost based on time/task analysis.

9.b.1.a-j, 9.c.1-2. Proposed fee reflects actual cost to provide service based on results of time task analysis.

9.d. Violation Reinspection fee is based on standard hourly rate of \$135 to be consistent with all Environmental Health fees and includes increases to reflect current program costs based on time-task analysis and A-87 expenses.

9.e-f. To ensure accurate revenue tracking, an hourly fee is assigned to every Environmental Health general program and cost center.

Enclosure design review deleted and all services covered by PRMD.

10. Medical Waste Permits
a. Large Quantity Medical (Registration Fee)

**ENVIRONMENTAL HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10 Budget Units of Service	FY 08-09 Rate	FY 09-10 Proposed Rate	Rate Dollar Change	Rate % Change	FY 09-10
						Revenue Inc/(Dec) Due To Rate Change
1) Hospital beds						
a) 1-99 beds	6	1,323.00	1,384.00	61.00	4.61%	366.00
b) 100-199 beds	2	1,898.00	1,985.00	87.00	4.58%	174.00
c) 200-249 beds	0	2,426.00	2,538.00	112.00	4.62%	0.00
d) 250 beds	2	3,086.00	3,228.00	142.00	4.60%	284.00
2) Clinics Specialty	6	772.00	808.00	36.00	4.66%	216.00
3) Clinics Primary Care	2	772.00	808.00	36.00	4.66%	72.00
4) Clinics Laboratory	4	443.00	463.00	20.00	4.51%	80.00
5) Acute Psychiatric Hospital	0	1,323.00	1,384.00	61.00	4.61%	0.00
6) Intermediate Care	1	660.00	690.00	30.00	4.55%	30.00
7) Skilled Nursing Facility	1	604.00	632.00	28.00	4.64%	28.00
8) Medical Office	4	443.00	463.00	20.00	4.51%	80.00
b. On Site Treatment Facility (Permit)						
1) Large Steam Sterilization	4	2,078.00	2,174.00	96.00	4.62%	384.00
2) Small Steam Sterilization	1	336.00	351.00	15.00	4.46%	15.00
c. Limited Quantity Hauling Exemption-Annual Fee	53	95.00	99.00	4.00	4.21%	212.00
d. Common Storage Facility Permit						
1) Generators 2-10	4	221.00	231.00	10.00	4.52%	40.00
e. Small Quantity Registration/File Maintenance	622	46.00	48.00	2.00	4.35%	1,244.00
f. Tattoo/Body Piercing/Permanent Cosmetics						
1) Facility Registration (one time only)	3	30.00	31.00	1.00	3.33%	3.00
2) Practitioner Registration inspection (annual per practitioner)	84	122.00	128.00	6.00	4.92%	504.00
g. Medical research	1	1,323.00	1,384.00	61.00	4.61%	61.00
h. Hourly Rate	0	0.00	135.00	135.00	100.00%	0.00
i. Violation Reinspection (1 hr minmum + hourly rate)	3	0.00	135.00	135.00	100.00%	405.00

JUSTIFICATION:

FY 09-10 Medical Waste fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

10.h-i. To ensure accurate revenue tracking, an hourly fee is being assigned to every Environmental Health general program and cost center.

11. Environmental Drilling Permits

a. Wells (Investigation and Remediation)						
1. First Well	40	341.00	357.00	16.00	4.69%	640.00
2. Each Additional Well	230	72.00	75.00	3.00	4.17%	690.00
b. Permit Extension/Alteration	4	169.00	177.00	8.00	4.73%	32.00
c. Borings						
1. First Boring	52	273.00	286.00	13.00	4.76%	676.00
2. Each Additional Boring	215	72.00	75.00	3.00	4.17%	645.00
d. Environmental Assessment (per site)	36	514.00	538.00	24.00	4.67%	864.00
e. Destruction						
1. First well	9	341.00	357.00	16.00	4.69%	144.00
2. Each Additional Well	20	72.00	75.00	3.00	4.17%	60.00
f. Legal Enforcement/Administrative Hearing (per hour)	0	129.00	135.00	6.00	4.65%	0.00
g. Geotechnical boring						
1. First Boring	0	273.00	286.00	13.00	4.76%	0.00
2. Each Additional Boring	0	72.00	75.00	3.00	4.17%	0.00

JUSTIFICATION:

FY 09-10 Environmental Drilling fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

12. Local Oversight Program

a. Geotracker Maintenance Fee	0	477.00	499.00	22.00	4.61%	0.00
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JUSTIFICATION:

12.a. Geotracker Maintenance Fee increased to reflect current program costs based on time-task analysis and A-87 expenses.

13. Other

a. Violation reinspection fee applicable to all laws & regulations enforced by Public Health Officer not already noted in specific programs; 1hr minimum + hourly rate.	0	129.00	135.00	6.00	4.65%	0.00
b. Refunds: If processing of permit as described above not begun by Public Health Officer staff, then all but 25% of fee or \$25, whichever is less, may be refunded unless otherwise provided by law	0	0.00	0.00	0.00	n/a	0.00
c. Photocopies	0	0.10	0.10	0.00	0.00%	0.00
d. File search fee - 1 hr minimum + hourly rate	0	36.00	135.00	99.00	275.00%	0.00
e. Computer generated reports (produced from file search)	0	8.00	8.00	0.00	0.00%	0.00
f. Hourly rate	0	129.00	135.00	6.00	4.65%	0.00

JUSTIFICATION:

FY 09-10 Hourly Rate and Other fees increased to reflect current program costs based on time-task analysis and A-87 expenses.

13.d. File search fee was adjusted to reflect a minimum hourly charge at the established hourly rate.

Increase in Fee Revenue Over FY 08-09 Due to Fee Increase

\$185,503.00

	08-09	09-10	
Units	8,733.0	137,139.9	207,634.6
Units less Exempt	8,542.0	137,139.9	67,262.1
			0.00 Check
Resolution		207,634.60	
		0.0	Check
BOS Apprvd Fee's 08-09		137,139.90	
		0.0	Check

**MENTAL HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10		FY 09-10 Proposed Rate	Rate Dollar Change	Rate %	Revenue Inc/(Dec) Due To Rate Change
	Budget Units of Service	FY 08-09 Rate				
Mental Health - Outpatient Services¹						
1 Collateral	3,981	131.40	156.60	25.20	19.18%	100,321.20
2 Group - Therapy or Rehabilitation	2,342	131.40	156.60	25.20	19.18%	59,018.40
3 Assessment & Testing	16,467	131.40	156.60	25.20	19.18%	414,968.40
4 Individual - Therapy or Rehabilitation	24,896	131.40	156.60	25.20	19.18%	627,379.20
5 Plan Development	16,467	131.40	156.60	25.20	19.18%	414,968.40
Other Services¹						
1 Crisis Intervention	5,073	196.20	232.80	36.60	18.65%	185,671.80
2 Crisis Stabilization	5,820	94.54	63.00	(31.54)	(33.36%)	(183,562.80)
3 Medication Support (30 minutes)	16,043	244.20	289.20	45.00	18.43%	721,935.00
4 Case Management/Brokerage	11,403	102.00	121.20	19.20	18.82%	218,937.60

JUSTIFICATION: ¹ The proposed fees are based on actual unit costs established for the FY 07-08 Medi Cal Cost Report plus 6%. The significant increase reflects the Department's efforts to capture all allowable costs plus the impact of program start up costs and increased salary and benefits.

5 Consultation						
a Consultation by Psychiatrist	0	140.00	140.00	0.00	0.00%	0.00
b Consultation by Other Licensed Professional	0	80.00	80.00	0.00	0.00%	0.00
6 Photocopying and related clerical services						
a Copy of standard sized document, per page	0	0.10	0.10	0.00	0.00%	-
b Copy from microfilm, per page	0	0.20	0.20	0.00	0.00%	-
c Copy of oversized document, per page	0	actual cost	actual cost	0.00	NA	NA
d Clerical costs, per hour	0	24.00	24.00	0.00	0.00%	-

JUSTIFICATION: Fees for 5 and 6 are set per California Evidence Code Section 1563

Increase/(Decrease) in Fee Revenue Over FY 07 - 08 Due to Fee Increase/(Decrease)

\$2,559,637.20

**PUBLIC HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10		FY 09-10	Rate	Rate	FY 09-10
	Budget	FY 08-09	Proposed	Dollar	%	Revenue
	Units of	Rate	Rate	Change	Change	Inc/(Dec) Due To
	Service					Rate Change

PUBLIC HEALTH CLINICS*

Exams

1 Sexual Assault Exam-Pediatric ¹	0	996.00	0.00	(996.00)	(100.00%)	0.00
2 SART Exam-Adult ¹	0	996.00	0.00	(996.00)	(100.00%)	0.00
3 STD New Client; Initial Visit + 1 Follow-up Visit ²	70	80.00	0.00	(80.00)	(100.00%)	(5,600.00)
4 STD Established Client Visit ²	230	42.00	0.00	(42.00)	(100.00%)	(9,660.00)
3 STD Visit - Examination, Testing, Treatment ²	300	0.00	80.00	80.00	N/A	24,000.00

Immunization Clinic

1 Tuberculosis, Intradermal (PPD)	1,650	20.00	20.00	0.00	0.00%	0.00
2 Work Clearance Certification ³ (with income documentation)	200	0.00	49.00	49.00	100.00%	9,800.00
3 Work Clearance Certification ⁴ (w/o income documentation)	0	0.00	25.00	25.00	100.00%	0.00
4 Isoniazid (INH) Antituberculosis Treatment ⁵	1,000	0.00	5.00	5.00	100.00%	5,000.00
5 Vaccine Administration Fee	0	10.00	10.00	0.00	0.00%	0.00
6 Flu Immunization	1,050	15.00	15.00	0.00	0.00%	0.00

JUSTIFICATION: ¹ Fees deleted for Sexual Assault Exam-Pediatric and SART Exam-Adult as the services are covered by and an MOU with city law enforcement departments (Cloverdale, Cotati, Healdsburg, Petaluma, Rohnert Park, Santa Rosa, Sebastopol) the Sonoma County Sheriff, Sonoma State University and Santa Rosa Junior College Police Services.

² The STD Visit - Examination, Testing, Treatment fee replaces the STD New Client Initial Visit + 1 Follow-up Visit and STD Established Client Visit fees.

³ New fee to provide a letter of certification to potential employers stating at time of exam client does not have active TB disease. The fee of \$49 is based on analysis of direct service time. Clients with documented income in the 3 months prior to the visit will pay a fee of \$49.

⁴ New fee to provide a letter of certification to potential employers stating at time of exam client does not have active TB disease. The reduced fee of \$25 will apply if the client has no documented income in the 3 months prior to visit.

⁵ New fee to provide preventive treatment for clients who have latent TB infection (LTBI). Clients are self-pay and are often in treatment for six months or longer. The initial visit has been analyzed to cost \$93, with monthly visit costs analyzed at \$30 per visit. The Department is proposing a fee of \$5 per visit to encourage individuals to complete their treatment. INH treatment prevents the development of active TB and is essential to limit the spread of this communicable disease.

International Travel Clinic

1 Vaccine ⁶	0	Cost + \$10.00	0.00	0.00	N/A	0.00
2 Travel Certificates ⁶	0	15.00	0.00	(15.00)	(100.00%)	0.00

JUSTIFICATION: ⁶ Fees deleted for International Travel Clinic Vaccine and Travel Certificates consistent with 1/27/09 Board action closing the Travel Clinic.

HIV Prevention and Care Clinic

1 Sliding Fee Schedule - Attachment I		Per Fee Schedule	Per Sliding Fee Schedule	0.00	0.00%	0.00
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Total Public Health Clinics

\$23,540.00

PUBLIC HEALTH NURSING & HEALTH OFFICER SERVICES

1 Nursing Hourly Rate	0	105.62	105.62	0.00	0.00%	0.00
2 Health Officer Hourly Rate	0	185.68	185.68	0.00	0.00%	0.00
3 Health Officer Certification Letter	0	15.00	15.00	0.00	0.00%	0.00
4 TCM Encounter Visit ⁷	0	472.26	0.00	(472.26)	(100.00%)	0.00
5 TCM Visit per quarter-hour ⁷	0	0.00	27.00	27.00	N/A	0.00

JUSTIFICATION: ⁷ The TCM Visit per quarter-hour fee replaces the TCM Encounter Visit fee. The Encounter Visit fee was based on the average annual cost of all services provided to a client (as reported in the State required cost report) and did not reflect the cost of a single service.

Total Public Health Nursing and Health Officer Services

\$0.00

**PUBLIC HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10		FY 09-10 Proposed Rate	Rate Dollar Change	Rate % Change	FY 09-10
	Budget Units of Service	FY 08-09 Rate				Revenue Inc/(Dec) Due To Rate Change
PUBLIC HEALTH LABORATORY						
Microbial Disease Laboratory						
1 Enteric culture	10	19.00	19.00	0.00	0.00%	0.00
2 Enteric serotyping	10	19.00	19.00	0.00	0.00%	0.00
3 TPPA (FTA Treponema)	35	31.50	31.50	0.00	0.00%	0.00
4 Gonorrhea - NAAT						
a Gonorrhea - NAAT - Client	1,700	49.50	49.50	0.00	0.00%	0.00
b Gonorrhea - NAAT - Insurance	2,500	49.50	49.50	0.00	0.00%	0.00
5 Mycology: Culture	700	11.50	11.50	0.00	0.00%	0.00
6 Mycology: I.D.	250	16.00	16.00	0.00	0.00%	0.00
7 Parasite						0.00
a Formalin-ether concentrate smear	15	9.50	9.50	0.00	0.00%	0.00
b Direct Smear; crypto, giardia	15	9.50	9.50	0.00	0.00%	0.00
c Trichrome stained smear	15	13.00	13.00	0.00	0.00%	0.00
8 Pinworm	10	10.50	10.50	0.00	0.00%	0.00
9 Routine Bacterial Culture or Ci	100	21.00	21.00	0.00	0.00%	0.00
10 Tuberculosis						0.00
a Culture: Migit960/solid media	1,700	15.00	15.00	0.00	0.00%	0.00
b Sputum Concentration	1,700	10.50	10.50	0.00	0.00%	0.00
c AFB Smear Only	1,700	10.50	10.50	0.00	0.00%	0.00
d TB Panel: Culture, ID & Sensitivity	2	97.00	97.00	0.00	0.00%	0.00
e Sensitivities: 3 Drugs	40	63.00	63.00	0.00	0.00%	0.00
f Sensitivity: PZA	30	46.50	46.50	0.00	0.00%	0.00
g. Nucleic Acid Probe: each	300	59.00	59.00	0.00	0.00%	0.00
11 VDRL	400	8.50	8.50	0.00	0.00%	0.00
12 Lyme Disease: serology	120	40.00	40.00	0.00	0.00%	0.00
13 Lyme Disease: Western Blot IgM or IgG	50	71.00	71.00	0.00	0.00%	0.00
14 Ehrlichia chafeensis serology	100	40.00	40.00	0.00	0.00%	0.00
15 Ehrlichia H.G.E. serology	100	40.00	40.00	0.00	0.00%	0.00
16 Babesia WA-1 serol./microti-serology	1,500	45.00	45.00	0.00	0.00%	0.00
17 Tick: for Lyme Disease serology	1,400	29.00	29.00	0.00	0.00%	0.00
18 Ticks: bulk testing per 100 ticks	1	840.00	840.00	0.00	0.00%	0.00
19 Food Cultures: Per suspect pathogen	0	79.00	79.00	0.00	0.00%	0.00
Virus Laboratory						
1 AIDS Test:						
a HIV-ELISA test	3,800	15.00	15.00	0.00	0.00%	0.00
b HIV-Western Blot or IFA	40	63.00	63.00	0.00	0.00%	0.00
2 Chlamydia NAAT						
a Chlamydia NAAT - Client	2,400	49.50	49.50	0.00	0.00%	0.00
b Chlamydia NAAT - Insurance	3,500	49.50	49.50	0.00	0.00%	0.00
3 Direct or Indirect FA or Darkfield	0	19.00	19.00	0.00	0.00%	0.00
4 Hepatitis C	1,050	21.00	21.00	0.00	0.00%	0.00
5 Herpes Isolation & typing	100	42.00	42.00	0.00	0.00%	0.00
6 Rabies Test	120	131.50	131.50	0.00	0.00%	0.00
7 Virus Culture non-Herpes						
a Flu and other respiratory viruses	0	34.00	34.00	0.00	0.00%	0.00
8 Viral Testing (SF-PHL) Add'l studies, eg. FA	0	31.50	31.50	0.00	0.00%	0.00
a Handling	0	5.50	5.50	0.00	0.00%	0.00
b Serology (Viral Testing) AB detection	0	38.00	38.00	0.00	0.00%	0.00
9 Viral Load	1,250	125.00	125.00	0.00	0.00%	0.00
10 West Nile Virus serology	70	34.00	34.00	0.00	0.00%	0.00
11 R-Mix Respiratory Virus x 7	80	238.00	238.00	0.00	0.00%	0.00

**PUBLIC HEALTH DIVISION
FEE AND REVENUE SUMMARY CHART**

Fee Description	FY 09-10		FY 09-10	Rate	Rate	FY 09-10
	Budget	FY 08-09	Proposed	Dollar	%	Revenue
	Units of	Rate	Rate	Change	Change	Inc/(Dec) Due To
	Service					Rate Change
Immunology						
1 T-cell count (3 cell marker)	1,200	73.11	73.11	0.00	0.00%	0.00
Environmental Laboratory						
1 Water: fecal coliforms	3,200	22.00	22.00	0.00	0.00%	0.00
2 Shellfish, Oyster Meat	30	60.00	60.00	0.00	0.00%	0.00
3 Salt Water: MPN 15 tubes: E coli	150	49.00	49.00	0.00	0.00%	0.00
4 Quantitray-Colilert-Enterolert	150	35.00	35.00	0.00	0.00%	0.00
Molecular Biology Lab						
Real Time PCR Chain Reaction tests for:						
1 Bordetella pertussis	60	59.00	59.00	0.00	0.00%	0.00
2 Mycobacteria tuberculosis	20	59.00	59.00	0.00	0.00%	0.00
3 Flu	5	59.00	59.00	0.00	0.00%	0.00
4 Noro Virus	200	59.00	59.00	0.00	0.00%	0.00
Total Public Health Laboratory Services						\$0.00
OTHER MEDICAL SERVICES						
1 Medical Marijuana Application Fee (Medi-Cal Enrollees)	55	80.00	80.00	0.00	0.00%	0.00
2 Medical Marijuana Application Fee (Non Medi-Cal Enrollees)	180	160.00	160.00	0.00	0.00%	0.00
3 Photocopying and related clerical services						
a Copy of standard sized document, per page	0	0.10	0.10	0.00	0.00%	0.00
b Copy from microfilm, per page	0	0.20	0.20	0.00	0.00%	0.00
c Copy of oversized document, per page	0	Actual Cost	Actual Cost	N/A	N/A	N/A
d Clerical costs, per hour with 1/4 hour minimum	0	24.00	24.00	0.00	0.00%	0.00
Total Other Medical Services						\$0.00
Increase in Fee Revenue Over FY 08-09 Due to Fee Increase						<u><u>\$23,540.00</u></u>

* Except as specifically outlined in the fee schedule above, Sonoma County has adopted the Federal Medicare Fee Schedule multiplied by a factor of 1.5, as published annually for this region, as the fee schedule for all other medical services provided. In the event Medicare does not publish a fee for the procedure, the California Medi-Cal Fee Schedule multiplied by a factor of 1.5 shall apply.

Resolution No. _____

Sonoma County Administration
Building, Santa Rosa, California

Date: _____

RESOLUTION OF THE BOARD OF SUPERVISORS OF THE
COUNTY OF SONOMA, STATE OF CALIFORNIA,
ADOPTING A FEE SCHEDULE FOR ENVIRONMENTAL
HEALTH SERVICES, AND REPEALING PRIOR INCONSISTENT RESOLUTIONS.

WHEREAS, Health and Safety Code Sections 101325 and 101045 and Public Resources Code Sections 43213 and 43222 authorize the Board of Supervisors by resolution to establish fees to meet the reasonable expenses of Environmental Health Services,

NOW, THEREFORE, BE IT RESOLVED that the following fee schedule for Environmental Health Services is hereby adopted, effective July 1, 2009;

BE IT FURTHER RESOLVED, that all prior resolutions conflicting or inconsistent with the provisions of this resolution are hereby repealed.

ENVIRONMENTAL HEALTH SERVICES

FEE SCHEDULE

1.	Food Facilities	
a.	Food Facility - Prepackaged non-potentially hazardous food	
	1. Food - Prepkg Non-Pot Haz	\$91 Annually
	2. Food - Prepkg Non-Pot Haz - School - 1 insp	\$91 Annually
	3. Food - Prepkg Non-Pot Haz - School - 2 insp	\$156 Annually
b.	Food Facility - Minimal Risk	
	1. Food - Min Risk	\$353 Annually
	2. Food - Min Risk - School - 1 insp	\$353 Annually
	3. Food - Min Risk - School - 2 insp	\$455 Annually
c.	Food Facility - Moderate Risk	
	1. Food - Mod Risk	\$976 Annually
	2. Food - Mod Risk - Seasonal	\$821 Annually
	3. Food - Mod Risk - Caterer using rental kitchen	\$821 Annually
	4. Food - Mod Risk - Reduced fee incentive program	\$937 Annually
	5. Food - Mod Risk - School - 1 insp	\$846 Annually
	6. Food - Mod Risk - School - 2 insp	\$951 Annually
d.	Food Facility - High Risk	
	1. Food - High Risk	\$1,093 Annually
	2. Food - High Risk - Seasonal	\$885 Annually
	3. Food - High Risk - Caterer using rental kitchen	\$821 Annually
	4. Food - High Risk - Reduced Fee Incentive	\$1,002 Annually
	5. Food - High Risk - Rental Kitchen	\$846 Annually
	6. Food - High Risk - School - 1 insp	\$885 Annually
	7. Food - High Risk - School - 2 insp	\$1,029 Annually
e.	Bed & Breakfast / Ag Homestay	\$482 Annually
f.	Mobile Food Preparation Unit	\$521 Annually
	1. New Application less than 2 weeks prior to event	\$651 Each
g.	Vending Machine	\$14 Annually
h.	Temporary Food Facility - Minimal Risk	\$183 Annually
	1. New Application less than 2 weeks prior to event	\$229 Each
i.	Temporary Food Facility - Moderate Risk	\$444 Annually
	1. New Application less than 2 weeks prior to event	\$555 Each
j.	Certified Farmers Market - Single Site	\$201 Annually
k.	Certified Farmers Market - Multiple Sites	\$1,599 Annually
l.	Swap Meet Prepackaged Food Stand	\$144 Annually
m.	Satellite Food Distribution Facility	
	1. Satellite Food Dist	\$521 Annually
	2. Satellite Food Dist - School - 1 insp	\$521 Annually
	3. Satellite Food Dist - School - 2 insp	\$677 Annually
	4. New Application less than 2 weeks prior to event	\$651 Each
n.	Mobile Food Facility	\$364 Annually
o.	Community Event/Swap Meet Organizers- 2 - 5 vendors	\$135 Per event
	1. New Application less than 2 weeks prior to event	\$169 Each

p.	Community Event/Swap Meet Organizers- 6 or more vendors	\$270 Per event
	1. New Application less than 2 weeks prior to event	\$338 Each
q.	Multiple Units	\$165 Annually
r.	Plan Checks	
	1. Remodel: 1 hour min + hourly rate	\$135 Per request
	2. New Construction/major remodel: 4 hour min + hourly rate	\$540 Per request
s.	Site Reviews	\$273 Per request
t.	Counter Clearance	\$45 Per request
u.	Occ Event Facility- Min Risk	\$66 Per event
	1. New Application less than 2 weeks prior to event	\$83 Each
v.	Occ Event Facility- Mod Risk	\$278 Per event
	1. New Application less than 2 weeks prior to event	\$348 Each
w.	Food Handler Certification Class and Test	\$97 Per person
x.	Food Handler Certification Test Only	\$69 Per person
y.	Food Handler Certification Retest	\$35 Per person
z.	Environmental Health Class (2 hour min.+hourly rate)	\$270 Per person
aa.	Violation reinspection (1hr min.+hourly rate)	\$135 plus hrly rate
ab.	Penalty fee - 25% of fee after 30 days past due and 25% of fee at 60 days past due	\$0
ac.	Hourly Rate	\$135 Per hour
2.	Stormwater	
	a. Storm Water Permit Boundary - North Coast Region	\$40 Annually
	b. Storm Water Permit Boundary- SR City	\$40 Annually
	c. Storm Water Permit Boundary - San Francisco Bay Region	\$40 Annually
3.	Housing	
	a. Organized Camp - Year-round	\$1,312 Annually
	b. Organized Camp - Seasonal	\$650 Annually
	c. Meth Contaminated	\$135 Annually
	d. Temporary Holding Facility	\$227 Annually
	e. Type II Juvenile Detention Facility	\$1,135 Annually
	f. Type II Adult Detention Facility	\$1,738 Annually
4.	Swim & Bath/Recreation	
	a. Public Swimming Pools - Year-round	\$638 Annually
	b. Public Swimming Pools - Seasonal (May thru Oct.)	\$532 Annually
	c. Multiple Units	\$106 Annually
	d. Plan Checks	
	1. Remodel: 1 hour min + hourly rate	\$135 plus hrly rate
	2. New Construction: 4 hour min + hourly rate	\$540 plus hrly rate
	e. Counter Clearance	\$45 Per request
	f. Violation Reinspection (1hr min.+hourly rate)	\$135 plus hrly rate
	g. Penalty fee - 25% of fee after 30 days past due and 25% of fee at 60 days past due	\$0
5.	Milk and Dairy	
	a. Market Milk Dairy	\$183.50 Per month
	b. Market Milk Independent	\$183.50 Per month
	c. Manufacturing Milk Dairies	\$78 Per month
	d. Producer - Distribute Raw Milk	\$183.50 Per Month
	e. Reinspection Fee	\$135 plus hrly rate
6.	Softserve	
	a. Softserve	\$150 Annually
7.	Water Systems	
	a. State Small Water System Permit	\$753 Annually
	b. Hourly Rate	\$135 Per Hour
	c. Violation Reinspection (1hr min.+hourly rate)	\$135 plus hrly rate
8.	Septage Haulers	
	a. Septage Pumper/Chemical Toilet Trucks (per vehicle)	\$371 Annually
	b. Permit Transfer Fee (per vehicle)	\$135 Each
	c. Hourly Rate	\$135 Per Hour
	d. Violation Reinspection (1hr min.+hourly rate)	\$135 plus hrly rate

9.	Solid Waste Facility Permits	
a.	Inspection Services	
1.	Disposal Site	
a.	Full Solid Waste Facilities Permit - Disposal Site	\$37,961 Annually
b.	Permit Exempted-Quarterly Inspections	\$2,228 Annually
c.	Permit Exemption-Semi-Annual	\$1,853 Annually
2.	Transfer/Processing Stations	
a.	Transfer Station-(Full) Lg Volume>100tpd>than 600tpd	\$14,549 Annually
b.	Transfer Station-(Full) Lg Volume >100tpd<than 600tpd	\$8,484 Annually
c.	Transfer Station - Registration Medium	\$6,635 Annually
d.	Transfer Station - Notification Small/Limited	\$2,974 Annually
3.	Closed Site Monitoring	
a.	Closed Site Monitoring Monthly	\$5,580 Annually
b.	Closed Site Monitoring Quarterly	\$1,860 Annually
c.	Closed Site Monitoring Biannual	\$930 Annually
d.	Closed Site Monitoring Annual	\$465 Annually
4.	Composting Facility	
a.	Full Solid Waste Facilities Permit	\$18,255 Annually
b.	Registration (Monthly Inspections)	\$3,591 Annually
c.	Notification (Quarterly Inspections)	\$1,447 Annually
d.	Notification (Semi-Annual Inspections)	\$724 Annually
e.	Notification Biosolids (Monthly Inspections)	\$7,204 Annually
f.	Notification (Annual Inspections)	\$362 Annually
5.	Biosolids Land Application Facility	
a.	Notification Permit	\$6,131 Annually
b.	Permit Services (Private Access only)	
1.	Facility Permits	
a.	New Facility Application: 18 hr. min.+hourly rate	\$2,430 plus hrly rate
b.	Existing Permit Review: 18 hr min.+hourly rate	\$2,430 plus hrly rate
c.	Permit Preparation: 20 hr min. + hourly rate	\$2,700 plus hrly rate
d.	Permit Revision: 32-hr min + hourly rate	\$4,320 plus hrly rate
e.	Permit Modification: 8 hr min. + hourly rate	\$1,080 plus hrly rate
f.	Exemption Processing: 9 hr min. + hourly rate	\$1,215 plus hrly rate
g.	Closure/Post-closure: 32 hr min. + hourly rate	\$4,320 plus hrly rate
h.	CEQA Comment & Review: 18 hr min. + hourly rate	\$2,430 plus hrly rate
i.	CEQA Lead Agency: 40 hr min. + hourly rate	\$5,400 plus hrly rate
j.	California State Waste Board Meeting: 6 hr min + hourly rate	\$810 plus hrly rate
2.	Refuse Collection Vehicles	
a.	Refuse Collection and Sludge Hauling Vehicles	\$284 Annually
c.	Enforcement Services	
1.	Notice & Order Preparation: 8-hr min + hourly rate	\$1,080 plus hrly rate
2.	Legal Proceedings, Admin Hearings: no min, hourly rate only	\$135 Per hour
d.	Violation Reinspection	\$135 plus hrly rate
e.	Hourly Rate	\$135 Per hour
f.	Meth Contamination Prop Oversight/Clearance (1 hr min. + hourly rate)	\$135 plus hrly rate
10.	Medical Waste Permits	
a.	Large Quantity Medical (Registration Fee)	
1.	Hospital beds	
a.	1-99 beds	\$1,384 Annually
b.	100-199 beds	\$1,985 Annually
c.	200-249 beds	\$2,538 Annually
d.	250 beds	\$3,228 Annually
2.	Clinics Specialty	\$808 Annually
3.	Clinics Primary Care	\$808 Annually
4.	Clinics Laboratory	\$463 Annually
5.	Acute Psychiatric Hospital	\$1,384 Annually
6.	Intermediate Care	\$690 Annually
7.	Skilled Nursing Facility	\$632 Annually
8.	Medical Office	\$463 Annually
b.	On Site Treatment Facility (Permit)	
1.	Large Steam Sterilization	\$2,174 Annually
2.	Small Steam Sterilization	\$351 Annually
c.	Limited Quantity Hauling Exemption - Annual Fee	\$99 Annually
d.	Common Storage Facility Permit	

1. Generators 2-10	\$231 Annually
e. Small Quantity Registration/File Maintenance	\$48 Annually
f. Tattoo/Body Piercing/Permanent Cosmetics	
1. Facility Registration (one time only)	\$31 Per request
2. Practitioner Registration inspection (annual per practitioner)	\$128 Annually
g. Medical research	\$1,384 Annually
h. Hourly Rate	\$135 Per Hour
i. Violation Reinspection	\$135 plus hrly rate
11. Environmental Drilling Permits	
a. Wells (Investigation and Remediation)	
1. First Well	\$357 Per well
2. Each Additional Well	\$75 Per well
b. Permit Extension/Alteration	\$177 Per request
c. Borings	
1. First Boring	\$286 Per boring
2. Each Additional Boring	\$75 Per boring
d. Environmental Assessment (per site)	\$538 Each
e. Destruction	
1. First well	\$357 Per well
2. Each Additional Well	\$75 Per well
f. Legal Enforcement/Administrative Hearing (per hour)	\$135 Per hour
g. Geotechnical boring	
1. First Boring	\$286 Per boring
2. Each Additional Boring	\$75 Per boring
12. Local Oversight Program	
a. Geotracker Maintenance Fee	\$499 Annually
13. Other	
a. Violation reinspection fee applicable to all laws & regulations enforced by Public Health Officer.	\$135 plus hrly rate
b. Refunds: If processing of permit as described above not begun by Public Health Officer staff, then all but 25% of fee or \$25, whichever is less, may be refunded unless otherwise provided by law.	
c. Photocopies	\$0.10 Per copy
d. File search fee - 1 hour min + hourly rate	\$135 plus hrly rate
e. Computer generated reports (produced from file search)	\$8 Per report
f. Hourly rate	\$135 Per hour

SUPERVISORS:

Brown: Kerns: Zane: Carrillo: Kelley:

Ayes Noes Abstain Absent

SO ORDERED

RESOLUTION OF THE BOARD OF SUPERVISORS, COUNTY OF SONOMA, STATE OF CALIFORNIA ADOPTING A FEE SCHEDULE FOR MENTAL HEALTH SERVICES, AND REPEALING PRIOR INCONSISTENT RESOLUTIONS.

WHEREAS, the Board of Supervisors desire to adopt and confirm rates for Mental Health services provided by the Department of Health Services Mental Health Division.

NOW, THEREFORE, BE IT RESOLVED that the following fee schedule for Mental Health Services is hereby adopted, effective July 1, 2009.

BE IT FURTHER RESOLVED, that all prior resolutions conflicting or inconsistent with the provisions of this resolution are hereby repealed.

MENTAL HEALTH SERVICES

Mental Health- Outpatient Services

1 Collateral	\$156.60	per hour
2 Group - Therapy or Rehabilitation	\$156.60	per hour
3 Assessment & Testing	\$156.60	per hour
4 Individual - Therapy or Rehabilitation	\$156.60	per hour
5 Plan Development	\$156.60	per hour

Other Services

1 Crisis Intervention	\$232.80	per hour
2 Crisis Stabilization	\$63.00	per hour
3 Medication Support (30 minute)	\$289.20	per hour
4 Case management/Brokerage	\$121.20	per hour
5 Consultation		
a. Psychiatrist	\$140.00	per hour
b. Other Licensed Professional	\$80.00	per hour
6 Photocopying and related clerical services		
a. Copy of standard sized document, per page	\$0.10	per page
b. Copy from microfilm	\$0.20	per page
c. Copy of oversized document	actual cost	per page
d. Clerical costs	\$24.00	per hour

SUPERVISORS:

Brown: Kerns: Zane: Carillo:
 Kelley:

Ayes Noes Abstain Absent

SO ORDERED

Resolution No. _____

Sonoma County Administration
Building, Santa Rosa, California

Date:

RESOLUTION OF THE BOARD OF SUPERVISORS, COUNTY OF SONOMA, STATE OF CALIFORNIA ADOPTING A FEE SCHEDULE FOR PUBLIC HEALTH MEDICAL SERVICES, AND REPEALING PRIOR INCONSISTENT RESOLUTIONS.

WHEREAS, the Board of Supervisors desire to adopt and confirm rates for Public Health services provided by the Department of Health Services Public Health Division.

NOW, THEREFORE, BE IT RESOLVED that the following fee schedule for Public Health Medical Services is hereby adopted, effective July 1, 2009.

BE IT FURTHER RESOLVED, that all prior resolutions conflicting or inconsistent with the provisions of this resolution are hereby repealed.

PUBLIC HEALTH CLINICS

(not included in Medicare)

FEE SCHEDULE

Exams

1 STD Visit - Examination, Testing, Treatment \$80.00

Immunization Clinic

1 Tuberculosis, Intradermal (PPD) \$20.00
2 Work Clearance Certification (with income documentation) \$49.00
3 Work Clearance Certification (w/o income documentation) \$25.00
4 Isoniazid (INH) Antituberculosis Treatment⁴ \$5.00
5 Vaccine Administration Fee \$10.00
6 Flu Immunization \$15.00

HIV Prevention and Care Clinic

Sliding Fee Schedule (Attachment

1 B) Per Fee Schedule

PUBLIC HEALTH NURSING & HEALTH OFFICER SERVICES

1 Nursing Hourly Rate \$105.62
2 Health Officer Hourly Rate \$185.68
3 Health Officer Certification Letter \$15.00
4 TCM Visit per quarter-hour \$27.00

PUBLIC HEALTH LABORATORY

Microbial Disease Laboratory

1	Enteric culture	\$19.00
2	Enteric serotyping	\$19.00
3	TPPA (FTA Treponema)	\$31.50
4	Gonorrhea - NAAT	
	a Gonorrhea - NAAT - Client	\$49.50
	b Gonorrhea - NAAT - Insurance	\$49.50
5	Mycology: Culture	\$11.50
6	Mycology: I.D. Parasit	\$16.00
7	e	
	a Formalin-ether concentrate smear	\$9.50
	b Direct Smear; crypto, giardia	\$9.50
	c Trichrome stained smear	\$13.00
	Pinwor	
8	m	\$10.50
9	Routine Bacterial Culture or Ci	\$21.00
10	Tuberculosis	
	a Culture: Migit960/solid media	\$15.00
	b Sputum Concentration	\$10.50
	c AFB Smear Only	\$10.50
	d TB Panel: Culture, ID & Sensitivity	\$97.00
	e Sensitivities: 3 Drugs	\$63.00
	f Sensitivity: PZA	\$46.50
	g Nucleic Acid Probe: each	\$59.00
11	VDRL	\$8.50
12	Lyme Disease: serology	\$40.00
13	Lyme Disease: Western Blot IgM or IgG	\$71.00
14	Ehrlichia chafeensis serology	\$40.00
15	Ehrlichia H.G.E. serology	\$40.00
	Babesia WA-1 serol./microti-	
16	serology	\$45.00
17	Tick: for Lyme Disease serology	\$29.00
18	Ticks: bulk testing per 100 ticks	\$840.00
19	Food Cultures: Per suspect pathogen	\$79.00

Virus Laboratory

1	AIDS Test:	
	a HIV-ELISA test	\$15.00
	b HIV-Western Blot or IFA	\$63.00
2	Chlamydia NAAT	
	a Chlamydia NAAT - Client	\$49.50
	b Chlamydia NAAT - Insurance	\$49.50
3	Direct or Indirect FA or Darkfield	\$19.00
4	Hepatitis C	\$21.00
5	Herpes Isolation & typing	\$42.00
6	Rabies Test	\$131.50
7	Virus Culture non-Herpes	
	Flu and other respiratory	
	a viruses	\$34.00

8	Viral Testing (SF-PHL) Add'l studies, eg. FA	\$31.50
a	Handling	\$5.50
b	Serology (Viral Testing) AB detection	\$38.00
9	Viral Load	\$125.00
10	West Nile Virus serology	\$34.00
11	R-Mix Respiratory Virus x 7	\$238.00

Immunology

1	T-cell count (3 cell marker)	\$73.11
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Environmental Laboratory

1	Water: fecal coliforms	\$22.00
2	Shellfish, Oyster Meat	\$60.00
3	Salt Water: MPN 15 tubes: E coli	\$49.00
4	Quantitray-Colilert-Enterolert	\$35.00

Molecular Biology Lab

Real Time PCR Chain Reaction tests for:

1	Bordetella pertussis	\$59.00
2	Mycobacteria tuberculosis FI	\$59.00
3	u	\$59.00
4	Noro Virus	\$59.00

OTHER MEDICAL SERVICE

1	Medical Marijuana Application Fee (Medi-Cal Enrollees)	\$80.00
2	Medical Marijuana Application Fee (Non Medi-Cal Enrollees)	\$160.00
3	Photocopying and related clerical services	
a	Copy of standard sized document, per page	\$0.10
b	Copy from microfilm, per page	\$0.20
c	Copy of oversized document, per page	actual cost
d	Clerical costs, per hour with 1/4 hour minimum	\$24.00

SUPERVISORS:

Brown: Kerns: Zane: Carrillo: Kelley:
Ayes Noes Abstain Absent

SO ORDERED