

2:05 p.m. - Convened/Board of Health.

Present: Troy Henderson, Michael Baker, Jeff Wilmouth, Chris Skidmore, Chelsea Cannard and Patricia Black.

DIVISION UPDATES:

Health Officer:

D076157E 40. No update.

Environmental Health:

D076157F 41. No update.

D076157G 41A. No update.

D076157H 41B. No update.

D076157I 41C. No update.

076158 42. Public Health fee scheduled reviewed as submitted.

076159 43. Commissioner Kinzer moved Commissioner Largent seconded the motion and it carried to approve the 2015 Public Health Fee Schedule.

BEFORE THE BOARD OF WHITMAN COUNTY COMMISSIONERS

In the Matter of Amending) RESOLUTION NO. 076159
the Whitman County Public)
Health Fee Schedule for 2015)

WHEREAS, the Board of County Commissioners for Whitman County, State of Washington, met in a regular session on the 15th day of December 2014; and,

WHEREAS, the Whitman County Commissioners acting as the Board of Health has reviewed the proposed updated Public Health Fee Schedule and Sliding Fee Schedule and finds that changes are necessary and in the best interest of the citizens of Whitman County.

NOW, THEREFORE, BE IT HEREBY RESOLVED that the attached updated Public Health Fee Schedule be adopted and implemented effective January 1, 2015.

PASSED AND APPROVED by the Whitman County Board of Commissioners, acting as the Board of Health on this 15th day of December, 2014.

BOARD OF COUNTY COMMISSIONERS
OF WHITMAN COUNTY, WASHINGTON

Arthur D Swannack, Chairman

Dean Kinzer, Commissioner

Michael Largent, Commissioner

ATTEST:

Maribeth Becker, CMC
Clerk of the Board

WHITMAN COUNTY PUBLIC HEALTH DEPARTMENT					
SLIDING FEE SCALE BASED ON MONTHLY HOUSEHOLD INCOME					
EFFECTIVE NOVEMBER 1, 2010 UNTIL FURTHER NOTICE					
	100%	150%	185%	200%	250%+
	A	B	WIC	C	D
FAMILY SIZE	UP TO	UP TO	UP TO	UP TO	FULL FEE
1	903	1,354	1,670	1,805	2,257
2	1,215	1,822	2,247	2,429	3,036
3	1,526	2,289	2,823	3,052	3,815
4	1,838	2,757	3,400	3,676	4,595
5	2,149	3,224	3,976	4,298	5,373
6	2,461	3,692	4,553	4,922	6,153
7	2,773	4,159	5,130	5,546	6,932
8	3,084	4,626	5,706	6,169	7,711
9	3,396	5,094	6,283	6,792	8,491
10	3,708	5,561	6,859	7,415	9,269
ADDED	312	468	577	624	709

FEEES CAN BE SLID PER THE SCALE BELOW

WITH A MINIMUM CHARGE OF \$10.00

FULL FEE ROUND	A	B	WIC	C	D
	\$10 CHARGE	MINIMUM \$10	MINIMUM \$10	MINIMUM \$10	FULL FEE
\$1.00		\$0.25	\$0.50	\$0.75	\$1.00
\$1.25		\$0.31	\$0.63	\$0.94	\$1.25
\$1.50		\$0.38	\$0.75	\$1.13	\$1.50
\$2.00		\$0.50	\$1.00	\$1.50	\$2.00
\$2.50		\$0.63	\$1.25	\$1.88	\$2.50
\$3.00		\$0.75	\$1.50	\$2.25	\$3.00
\$5.00		\$1.25	\$2.50	\$3.75	\$5.00
\$6.00		\$1.50	\$3.00	\$4.50	\$6.00
\$7.00		\$1.75	\$3.50	\$5.25	\$7.00
\$8.00		\$2.00	\$4.00	\$6.00	\$8.00
\$10.00		\$2.50	\$5.00	\$7.50	\$10.00
\$11.00		\$2.75	\$5.50	\$8.25	\$11.00
\$12.00		\$3.00	\$6.00	\$9.00	\$12.00
\$15.00		\$3.75	\$7.50	\$11.25	\$15.00
\$20.00		\$5.00	\$10.00	\$15.00	\$20.00
\$30.00		\$7.50	\$15.00	\$22.50	\$30.00
\$40.00		\$10.00	\$20.00	\$30.00	\$40.00
\$50.00		\$12.50	\$25.00	\$37.50	\$50.00
\$60.00		\$15.00	\$30.00	\$45.00	\$60.00
\$70.00		\$17.50	\$35.00	\$52.50	\$70.00
\$80.00		\$20.00	\$40.00	\$60.00	\$80.00
\$90.00		\$22.50	\$45.00	\$67.50	\$90.00
\$100.00		\$25.00	\$50.00	\$75.00	\$100.00

Discounts for services are offered depending upon your family size and proof of income.

PUBLIC HEALTH FEE SCHEDULE

TYPE OF VISIT		2014	2015
99211	Office Min (5 min Perform/Supervision)	17.00	17.00
99348	Home Visit	40.00	40.00
90471	Immunization Admin (One Vaccine)	17.00	17.00
90472	Immunization Admin (Each Additional Vaccine)	17.00	17.00
PATIENT STATUS	New to Program – Single Encounter – Repeat Visit		
IMMUNIZATION SERVICE			
90702-SL	DT	15.00	15.00
90700-SL	DtaP	15.00	15.00
90633-SL	Ped Hep A (2-18 years)	15.00	15.00
90744-SL	Hep B (0-18 years)	15.00	15.00
90645-SL	HIB (4 doses) Hib Titer	15.00	15.00
90646-SL	HIB (Booster)	15.00	15.00
90647-SL	HIB (3 doses) Ped Vax	15.00	15.00
90648-SL	HIB (4 doses) Act HIB	15.00	15.00
90713-SL	IPV	15.00	15.00
90707-SL	MMR (0-18 years)	15.00	15.00
90669-SL	PCV-7	15.00	15.00
90718-SL	Tetanus/TD (7-18 years)	15.00	15.00
90716-SL	Varicella (1-18 years)	15.00	15.00
90657-SL	Influenza (6-35 months)	15.00	15.00
90658-SL	Influenza (3 years)	15.00	15.00
90723-SL	DTaP/HBV/PV	15.00	15.00
90649-SL	HPV Gardasil (11 through 18 years)	15.00	15.00
90710-SL	MMRV	15.00	15.00
90680-SL	Rotavirus	15.00	15.00
90715-SL	Tdap (10 through 18 years)	15.00	15.00
90734-SL	Meningococcal Menactra (11 through 18 years)	15.00	15.00
PRIVATE PAY	(CANNOT BE SLID)		
90632	Hep A Adult (19+ years)	34.00	34.00
90746	Hep B (20+ years)	40.00	40.00
90658	Influenza Injection	MARKET	MARKET
90732	Pneumococcal	MARKET	MARKET
90742	Rabies IG	MARKET	MARKET
90726	Rabies Vaccine	MARKET	MARKET
90718	Td Adult (19+ years)	35.00	35.00
90636	Hep A/Hep B Twinrix	MARKET	MARKET
90741	Immune Serum Globulin (Private Pay)	MARKET	MARKET
90715	Tdap Adacel (11 through 55 years)	48.00	48.00
TB	34		
99201	TB Test 1 Step Office Visit	28.00	28.00
99215	TB Test 2 Step Office Visit	38.00	38.00
99341	Home Visit New Patient	62.00	62.00
99347	Home Visit Established Patient	40.00	40.00
86580	PPD Skin Test Given	10.00	10.00
86580	PPD Skin Test Read	N/C	N/C
	PPD 2 Step Test Read	12.00	12.00
	TB Treatment Curative	MARKET	MARKET
	TB Preventive (INH)	5.00	5.00
ADULT HEALTH	39		
99402	Disease Information/Consult	40.00	40.00
92552	Hearing Test	12.00	12.00
85018	Hemoglobin	6.00	6.00
90782	Injection (Meds Supplied by Client)	15.00	15.00

BOCC MINUTES-12/15/14

TYPE OF VISIT		2014	2015
	Weight Check		
	Referred to Quit Line		
	Other		
DENTAL	24		
D1330	Oral Hygiene Instructions	15.00	15.00
D1203	Fluoride Treatment	18.00	18.00
D9999	Family Oral Health Education	35.00	35.00
MIH/CAH	22		
85018	Hemoglobin	6.00	6.00
0910M	Nutrition Consultation	40.00	40.00
0911M	Nutrition Follow-Up (Repeat)	28.00	28.00
81025	Pregnancy Test (Urine)	12.00	12.00
	Other		
HIV/AIDS	35		
86701	HIV/ELISA (HIV Test)	45.00	45.00
99404	Pretest Counsel	62.00	62.00
99401	Post Test Counsel	28.00	28.00
Not Slid	2 Hour BBP, HIV Videos	20.00	20.00
Not Slid	4 Hour HIV Videos	40.00	40.00
Not Slid	7 Hour HIV Videos	70.00	70.00
CARDIOVASCULAR	41		
93770	Blood Pressure	6.00	6.00
NURSING SERVICES			
	Nursing Consultation (Per Hour)	40.00	40.00
HIV BLOODBORNE EDUC.			
	2 Hour Class-Childcare/Foster Care Providers	25.00	25.00
	4 Hour Class-Childcare/Foster Care Providers	45.00	45.00
	7 Hour Class-Childcare/Foster Care Providers	50.00/Hour	50.00/HOUR
	Daycare Consultation (Per Hour Depending on Number of Children)	25.00-50.00	25.00-50.00
VITAL RECORDS	71		
	Certified Copies of Birth and Death Records	20.00	20.00
	Replacement of Certified Death Copies (if errors are made by family or funeral home)	5.00 Each	5.00 EACH
	Search of Records: Birth or Death (W/O Copies)	8.00	8.00
	Search of Records: Birth or Death (With Copies)	8.00	8.00
	Search fee plus \$2.00 charge for up to 5 copies	2.00	2.00
	Search fee plus \$5.00 charge for 5 or more copies	5.00	5.00
	In accordance with RCW 70.58.107		

BOCC MINUTES-12/15/14

PERMIT TYPE	2014	2015
Food & Beverage Workers Permit	10.00	10.00
Replacement Food & Beverage Workers Permit	5.00	5.00
Manager's Certification	N/A	225.00
Restaurants – (Prorated Fees – See Below*)		
Minimum Fee (no seating)	154.00	172.00
1 – 25 Seats	187.00	205.00
26 –50 Seats	247.50	266.00
51 – 100 Seats	341.00	359.00
101+ Seats	401.50	420.00
Simple Menu w/Food	49.50	68.00
Complex Menu	82.50	101.00
With Lounge/Liquor, add additional fee of	121.00	165.00
With Beer/Wine served, add additional fee of	90.75	115.00
Taverns – Same Seating Schedule as above		N/A
With Food Service, add additional fee of	71.50	N/A
Complex Grocery Store (3 or more check-outs)	N/A	275.00
Meat-cutting Facility Permit	N/A	87.00
Deli Section Permit-Complex	N/A	105.00
Deli Section Permit-Simple	N/A	30.00
Dairy Section Permit	N/A	15.00
Produce Section w/ Food Preparation Permit	N/A	60.00
Basic Grocery Store	126.50	142.00
Meat-cutting Facility Permit	71.50	87.00
Deli Section Permit-Complex	110.00	105.00
Deli Section Permit-Simple	90.00	30.00
Dairy Section Permit	15.00	15.00
Produce Section w/ Food Preparation Permit	45.00	60.00
Convenience Store (pre-packaged foods only)	N/A	85.00
Catering	165.00	275.00
Mobile Units	165.00	250.00
Additional Mobile Units	82.50	205.00
Commissary Approval (if not issued Whitman County FSE Permit)	N/A	250.00
Bed & Breakfast	125.00	125.00
Fraternities & Sororities	150.00	210.00
Schools	125.00	210.00
Temporary Events (1-2 Days)		
Temporary Commercial	75.00	90.00
Commercial Low Risk Menu	50.00	55.00
Commercial Limited Risk Menu	25.00	25.00
Temporary Benevolent	15.00	20.00
Temporary Events (3 or More Days)		
Temporary Commercial	N/A	90.00 + 35.00/day
Commercial Low Risk Menu	N/A	55.00 + 25.00/day
Commercial Limited Risk Menu	N/A	25.00 + 10.00/day
Temporary Benevolent	N/A	20.00 + 10.00/day
Failed Temporary Event Inspection/Temporary Event Follow Up	N/A	85.00
Plan Review-First 2 hours	180.00	185.00
Each Additional Hour	150.00	110.00
Late Plan Reviews (WAC 246-215-8-302.11)	55.00	110.00
Variance Request	N/A	110.00

BOCC MINUTES-12/15/14

Pre-opening Inspection	N/A	255.00
Modified Packaging	N/A	55.00
Follow-up/Failed Inspection for Food Establishment	150.00	150.00
Second follow up on failed inspection	N/A	375.00
Health Officer Hearing	N/A	550.00
Health Officer Follow up Inspection	N/A	110.00
Operating without a FSE Permit (Plan Review Required)	DOUBLE ALL FEES	
Process walk-thru (hourly)	N/A	110.00
Late fee for Food Establishments (up to 60 days)	10% PER MONTH	
Late fee for Food Establishments (after 60 days)	DOUBLE ALL FEES	
General Environmental Health Hourly Fees	N/A	110.00
Food Advisory Committee Member	-25% ANNUAL PERMIT FEE	
Permits Pro-Rated 50% if Issued After July 1st		

BOCC MINUTES-12/15/14		
Permit Type	2014	2015
Solid Waste and Landfills		
Sanitary Landfill- (Open)	4100.25	6750.00
Sanitary Landfill- (Closed)	N/A	5200.00
Transfer Stations	1171.50	1550.00
Monofill	878.50	1100.00
Impoundments	878.50	1100.00
Inert Fill Permit	1171.50	1500.00
Demolition Materials (w/Ecology Approval)	1171.50	1500.00
Land Spreading	1171.50	1500.00
Recycling Centers	106.50	110.00
Composting Piles	1171.50	1500.00
Piles	878.50	1500.00
Sludge Utilization (w/Ecology Approval)	878.50	1100.00
Septage Disposal (w/Ecology Approval)	878.50	1100.00
Liquid Waste		
Septic System Installers -Initial Permit	290.00	325.00
Septic System Installers- Renewal	265.00	285.00
Septic System Licensing Exam	N/A	35.00
Septic Tank Pumpers - Initial Permit	290.00	325.00
Septic Tank Pumpers- Renewal	265.00	285.00
Septic Pump Truck Inspection and Approval (per vehicle)	175.00	175.00
Active Onsite Sewage Committee Member	-25% PERMIT COSTS	
Onsite Sewage Systems		
Onsite Sewage Disposal Permit	350.00	475.00
Engineered Onsite Sewage Disposal Permit	405.00	580.00
Homeowner Design and Install	N/A	625.00
Onsite Sewage System Plan Review (Per Hour)	60.00	110.00
Replacement Onsite Sewage System Permit (Requires Site Eval)	N/A	355.00
Simple Repair of On-Site Sewage Disposal Components	125.00	125.00
Repair of On-Site Sewage Disposal Components or System	N/A	165.00
Expansion of Onsite Sewage System	N/A	410.00
Septic Tank Replacement Permit	100.00	125.00
Experimental Onsite Sewage System (Requires Variance)	N/A	825.00
Experimental Onsite Sewage Review (Requires 5 year Renewal)	N/A	225.00
On-Site Sewage Disposal System Site Evaluation (inc-RHC)	295.50	350.00
Each additional site, adjoining property	268.75	255.00
Replacement System	125.00	N/A
Additional Call-backs and/or Re-inspection (per site/per visit)	175.00	225.00
Variance Request	N/A	275.00
Building Permit Evaluations	85.00	55.00
Site Assessment/ System Verification (Following Evaluation)	65.00	110.00
As Built Collections Fee. For as-built drawings not submitted within a month of final inspection.	55.00	55.00
Renewal of OSS Permit (Annual Fee-5 Year maximum renewal)	60.00	325.00
Operations and Maintenance (O&M) Fee (All new permits)	N/A	45.00
Onsite Sewage Feasibility Assessment (Hourly)	N/A	110.00
OSS History/Property Research (Fee waived for Permittee)	15.00	15.00
Unpermitted Onsite Sewage System (site evaluation required)	DOUBLE ALL FEES	
Water Recreation Facility Permits		
Swimming Pools (Year Round)	265.00	285.00
Swimming Pools (Seasonal- 6 months or less)	N/A	265.00
Each additional pool on same property	N/A	185.00
Spas (Year Round)	N/A	335.00
Spas (Seasonal-6 months or less)	N/A	285.00
Each additional spa on same property	N/A	175.00

BOCC MINUTES-12/15/14

Wading Pools	N/A	365.00
Water Play Structures	N/A	185.00
Late Fees		
Late fee for Water Recreation Facilities (up to 60 days)		10% PER MONTH
Late fee for Water Recreation Facilities (after 60 days)		DOUBLE ALL FEES
Water Recreation Facilities Plan Review (hourly)	N/A	185.00
Pre-opening Inspection	N/A	275.00
Pre-Opening Follow up Inspection (If Required)	N/A	225.00
Reinspection Follow-up (Critical Violations)	N/A	225.00
Certified Pool Operator on Full Time Staff		-25% PERMIT FEE
General Environmental Health Hourly Rate	N/A	110.00

Personal Health:

D076159A **44.** Whitman County is an Ebola-free county.

Administrative:

D076159B **45.** No update.

076160 **46.** Scott Adams, Pullman Regional Hospital Administrator and Hank Hanigan had concerns and requested clarification concerning the Spokane Region versus the Tri-Cities RSA. Mr. Henderson spoke with various health care staff that could not assure him there would be no referral impacts to Whitman County residents. Therefore, he drafted a letter for the Board to the Accountable Communities of Health letter asking for clarification. Commissioner Kinzer **moved** Commissioner Largent **seconded** the motion and it **carried to** sign a letter of inquiry for Accountable Communities of Health.

Next Meeting/Adjournment:

D076160A **47.** The next Board of Health meeting is January 19th.