



Macon County  
Public Health

**MACON COUNTY BOARD OF HEALTH**  
**MINUTES**  
**12/19/2017**  
**CONTINUED**  
(1/23/2018)

<b>Members</b>	Nathan Brenner, Dentist and Chair; Teresa Murray, General Public and Vice-Chair; Emily Porter-Bowers, Nurse; Melissa Bell, Pharmacist; Jeff Todd, Veterinarian; James Tate, County Commissioner; Julie Farrow, Physician; Mitchell Bishop, Engineer; Gena Futral and Molly Phillips, General Public.
<b>Members Absent</b>	Teresa Murray, Julie Farrow, Gena Futral,
<b>Staff Present</b>	Jim Bruckner, Tammy Keezer, Jennifer Garrett, Dorota Anthony, Lynn Baker, Darice Davis,
<b>Guests</b>	Ronnie Beale
<b>Media</b>	Mr. Ryan Hanchett; The Franklin Press, Ms. Kristen Karcher; WNCC Radio

**Presentations**

- A. **Medicaid Reform** Mr. Bruckner gave a PowerPoint presentation on Medicaid Reform after which a question and answer period followed:
- Mitchell Bishop asked about general statues and if public health will be reimbursed for the services provided. Mr. Bruckner explained that the health department has to take patients no matter the circumstances due to the state and federal requirements and that under the new Medicaid model we would get paid the Medicaid base rate for services. Mr. Bruckner then explained that enhanced reimbursement public health has received for providing Medicaid service will go away with Medicaid reform the way it is currently written. He said MCPH will be providing services for patients, but their primary physician will be the one that is reimbursed the enhanced rate based on patient outcome. He said FQHC's and Federal rural health centers would still receive cost settlement which creates an uneven playing field for public health. Ronnie Beale explained that in rural communities these services will be passed down to Counties. He said the patient's primary care physician can get the money for the services that the health department provides without ever even seeing the patient. Dr. Bell said that the worst case scenario is that the county will have to come up with the money. Mr. Beale said there is money throughout the NC system, but it is so fragmented we have a hard time getting any of it, so the rural counties are going to have to supplement these funds somehow. He said the counties have been dealing with the mental health 1115 waiver for years. Mr. Bruckner said that local health departments are the only program that is in all 100 counties. We are not a part of the NC Division of PH, local public health in NC is decentralized. Mr. Bruckner said that our counter parts at the state level can't even advocate for us with regard to Medicaid Reform because if they do for us, they have to do the same for everyone else. The NCALHD doesn't have paid lobbyists in NC or DC like FQHC or Rural Health Centers. Other than NCALHD, our Boards of Health and County Commissioners are our voice. MCPH is funded 50% by the County which is good for us. Ms. Phillips asked what role the BOH has in helping with this situation. Mr. Bruckner said the Board members can write letters to the local legislative

delegation letting them know just how financially devastating these changes are going to be for our communities and on county finances. The legislature says they realize the public's health is important, but they are leaving it up to the county to figure out how to provide these mandated services. He also said we have tried to have a voice in every planning meeting and have submitted white papers to all committees that are working to create the reform plans. He said that between now and 2020 we have the potential to lose significant funding. Locally we will have to determine what PH infrastructure we want to try to maintain. Mr. Bruckner said we are looking for BOH to write letters or call legislators and have a conversation with them regarding public health funding and the impact these changes will have on local public health infrastructure. Mr. Beale said the commissioners are going to ask the 23 western counties to join with us. Ms. Phillips asked if the Board members will be provided talking points. Mr. Bruckner said yes. Commissioner Tate said the worst case scenario would be that the BOH would have to decide which programs or services would have to be downsized or eliminated here in Macon County.

**Public Comment** None

**Call to Order** Dr. Brenner reconvened the meeting at 7:07 as recessed on December 19, 2017 at the regularly scheduled meeting.

**Approve Agenda** Molly Phillips made a motion to accept the agenda as presented. Emily Porter-Bowers seconded the motion. The motion passed unanimously.

**Welcome/Intro./Departures/Recognition** Jim Bruckner welcomed Commissioner Beale to the meeting and thanked everyone for attending.

**Closed Session** None

**Approve Minutes of Previous Meeting** Commissioner Tate made a motion to approve the minutes as presented. Dr. Bell seconded the motion. The motion passed unanimously.

### **Old Business**

- A. Flu Updates** - Ms. Garrett gave a flu update by PowerPoint presentation. She explained what the flu is, then symptoms of the flu, and the complications involved with the virus. The flu is usually spread by coughing and sneezing, however, this year the CDC is talking about the T-zone (touching your eyes nose or mouth). They are strongly encouraging the use of hand sanitizer and frequent hand washing. The flu is currently widespread in the entire US. Flu seasons are never considered mild however this season is more severe. The typical peak is late November – March. We will probably average another 11-13 weeks this year. H3N2 is the flu that is causing the most problems this year. Dr. Bell explained that there was a strain of H3N2 included in the vaccine, but it is not the exact strain. Because of this the vaccine efficacy is lower. Ms. Garrett further explained that we have had 42 flu deaths so far in NC this year, but we expect that number to continue to rise. Ms. Phillips asked if other complications are considered when determining flu deaths. Ms. Garrett explained that flu has to be listed on the death certificate as a cause of death in order for the death to be considered a flu death. What is the expected duration of immunity for the vaccine? Ms. Garrett explained that the more years that you take the flu vaccine the more immunity you build up. For instance, a person who has only taken one flu vaccine does not have as much immunity as someone who has taken the vaccine five years in a row. Mr. Bruckner explained that you have a healthy person that shows up with the flu but it may actually be pneumonia that is the cause of death. They are finding in younger people that the flu is actually the cause of death, but due to complications with the flu sometimes the cause of death is not reported as flu; therefore it is hard to determine how effective this year's vaccine is due to reporting discrepancies. MCPH is doing off site flu clinics and targeting high risk population, schools, senior services, MCPH employees and County employees. We have given a total of 1,757 flu shots this season. Mr. Beale asked if Ms. Garrett would present this information at the BOCC on the February 13<sup>th</sup>. Ms. Garrett said yes.

- B. Quarterly Budget Update** - Ms. Anthony gave the quarterly budget update. She referred everyone to the budget handout in their books. She explained that we are half way through the budget year and most programs are under the 50% mark and we have generated over 55%. The cost settlement has a big impact on that number because we receive that money at the beginning of the year. Some of the revenues are a bit below the 50% (grants). If we don't have any expenses we can't generate any revenue. The County net cost as of the end of December is almost 28%. Mr. Beale asked for explanation on Child Dental. Ms. Anthony explained that some of the Medicaid payments are delayed, but it also depends on what type of payer source the patients have. Mr. Bruckner said by the end of the year the numbers usually even out.
- C. Board Procedure** The Board is required to do an annual review of the Board procedure policy. There is a copy of the Board procedure 105.01 in everyone's books. Please take it home and review it before February's meeting. If you have suggested changes please let Mr. Bruckner know and we will discuss them at the next meeting.
- D. Animal Control Ordinance Update** Mr. Bruckner said that he took the Animal Control Ordinance to the commissioners in January. It was suggested that they have a public hearing regarding the suggested changes to the ordinance. The public hearing will be held on Feb. 13<sup>th</sup>. These are open to the public so if any Board of Health members want to attend they are welcome.

## **New Business**

- A. 2018 BOH meeting Dates** – Ms. Porter-Bowers made motion to accept meeting dates as presented. Dr. Bell seconded the motion. The motion passed unanimously.
- B. Fee Changes** - A copy of proposed fee changes was in everyone's book. Ms. Keezer said most of these fees are vaccine increases and are going up due to rising costs. There was discussion on the shingles vaccine. We are changing to a newer version of the vaccine which is significantly more expensive and requires two shots vs one shot with the older vaccine. Ms. Bell explained that the new shingles vaccine is significantly more effective in older patients and is equally effective in all other patients. You can get the new shingles vaccine at age 50 compared to 65 with the older vaccine. Dr. Bell made a motion to accept the fee changes as presented. Dr. Todd seconded the motion. The motion passed unanimously.

**Board Training and Information** None

**Announcements** None

**Next Meeting Date** 2/27/2018

**Adjourn** Ms. Porter-Bowers made a motion to adjourn the meeting. Commissioner Tate seconded the motion. The motion passed unanimously. The meeting was adjourned at 7:40 pm.

These minutes were approved on February 27, 2018 with a motion by Molly Phillips and seconded by Melissa Bell. The motion passed unanimously.

Minutes respectfully submitted by

Darice Davis