

Legislation Details (With Text)

File #:	16-1	086	Name:	Retroactive Revenue Award with the Califo Department of Public Health	rnia	
			In control:	Public Health		
On agenda:	8/23	/2016	Final action:	8/23/2016		
Enactment dates	:		Enactment #:	Agreement No. 16-533		
Title:	Dep retro	Approve and authorize the Chairman to execute a retroactive Base Award with the California Department of Public Health for Tuberculosis Control Local Assistance Funds (\$279,572) and retroactive Award Allotment (\$16,413), effective July 1, 2016 through June 30, 2017; and, the Director of Public Health to execute the Contractor's Release form for submission with the final invoice				
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RECOMMENDED ACTIONS:

1. Approve and authorize the Chairman to execute a retroactive Base Award with the California Department of Public Health for Tuberculosis Control Local Assistance Funds (\$279,572) and retroactive Award Allotment (\$16,413), effective July 1, 2016 through June 30, 2017.

2. Approve and authorize the Director of Public Health to execute the Contractor's Release form for submission with the final invoice.

The recommended actions will fund tuberculosis control activities in the Department of Public Health which include contact investigation, screening, treatment, vouchers for food and incentives such as vouchers for fast food, grocery, bus transportation, equipment, supplies, and shelter to improve treatment compliance of tuberculosis patients. The activities are funded with state and federal funding and the indirect costs are recovered with Health Realignment, with no Net County Cost.

ALTERNATIVE ACTION:

No viable options are available. Should your Board not approve the recommended actions, the Department would be unable to fully fund tuberculosis control activities in the County.

RETROACTIVE AGREEMENT:

The recommended retroactive Base Award and Award Allotment of Tuberculosis Control Local Assistance Funds from the California Department of Public Health (CDPH) were received on June 27, 2016, and are retroactive to July 1, 2016.

FISCAL IMPACT:

There is no increase in Net County Cost associated with the recommended actions. The total Base Award of \$295,985 consists of \$279,572 in state and federal funding for the Tuberculosis Control Local Assistance Base Award, plus the \$16,413 allotment for food and shelter vouchers, and incentives. Sufficient appropriations and estimated revenues are included in the Department's Org 5620 FY 2016-17 Adopted Budget. Although the Award includes full reimbursement of direct costs, it does not allow for indirect cost recovery, that portion (15.873 percent or \$46,982) will be covered with Health Realignment.

DISCUSSION:

In 2015, the Department's Tuberculosis (TB) Control Program provided treatment, contact investigation, referral and follow up activity for 42 county residents newly diagnosed with active TB. Department staff provided care for patients diagnosed prior to 2015, who had not yet completed treatment. The standard treatment regimens are six to twelve months; however, drug resistant TB patients may be treated as long as two years. Additionally, 1,149 new TB patients were evaluated and determined to have inactive TB disease, a disease other than TB, or were still in the process of final diagnosis at the end of 2015. Eighty two 82 of the new patients are case managed by the Department Hospital Liaison and are closely monitored by the TB Physician. Pulmonary TB patients receive Directly Observed Therapy (DOT) in which DOT staff visit patients daily or bi-weekly to observe the ingestion of the TB medication, ensuring it is taken correctly. Over 5,018 DOT visits were made in 2015.

County residents at high risk of developing TB include persons in close contact to active TB patients and the homeless. Approximately 620 close contacts were evaluated for latent TB infections, and over 817 homeless persons were screened for TB. In FY 2015-16, the County, on average, expended \$511.47 per TB client for treatment, hospital case management, contact investigation or screening.

The California Tuberculosis Control Branch (TBCB) identified three priorities for TB control:

- 1. Identify and treat active TB and ensure completion of therapy, including DOT;
- 2. Find, evaluate, and, if indicated, treat contacts of TB patients; and,
- 3. Test high risk populations.

Approval of the recommended actions will provide funding to continue the control activities. The State funding allocation to the County is recalculated every two years using five years of surveillance data. Data from the years 2010-2014 was used to calculate the allocations for the FY 2016-17 awards; the first of a two-year funding cycle.

The recommended Award between the State and County contains non-standard termination language as it allows the State to terminate for cause, cancel immediately for cause, or upon 30 days written notice the State may terminate without cause. The recommended Award also includes a termination clause that allows the County to submit a written request to the State to terminate the contract only in the event the State substantially fails to perform its duties under the contract. If there is a dispute between the State and County, Exhibit D(F), pages 14 and 15, delineate a dispute resolution process in which the State and County must partake to informally resolve any disputes arising from the State's actions.

ATTACHMENTS INCLUDED AND/OR ON FILE:

On file with Clerk - Revenue Award with CDPH for TB Control

CAO ANALYST:

Sonia De La Rosa