



County of Fresno

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Legislation Details (With Text)

File #: 21-0715 **Name:** Retroactive Revenue Award from the California Department of Public Health for Tuberculosis Control Program

In control: Public Health

On agenda: 10/5/2021 **Final action:** 10/5/2021

Enactment date: **Enactment #:** Agreement No. 21-399

Title: Approve and authorize the Chairman to execute a retroactive award from the California Department of Public Health for Tuberculosis Control Local Assistance Base Award (\$342,571) and Food, Shelter, Incentives and Enablers Allotment (\$20,546), effective July 1, 2021 through June 30, 2022

Sponsors:

Indexes:

Code sections:

Attachments: 1. Agenda Item, 2. Agreement A-21-399 with CDPH

Date	Ver.	Action By	Action	Result
10/5/2021	1	Board of Supervisors	Consent Agenda be approved	Pass

DATE: October 5, 2021

TO: Board of Supervisors

SUBMITTED BY: David Luchini, RN, PHN, Interim Director, Department of Public Health

SUBJECT: Retroactive Revenue Award from the California Department of Public Health for Tuberculosis Control Program

RECOMMENDED ACTION(S):

Approve and authorize the Chairman to execute a retroactive award from the California Department of Public Health for Tuberculosis Control Local Assistance Base Award (\$342,571) and Food, Shelter, Incentives and Enablers Allotment (\$20,546), effective July 1, 2021 through June 30, 2022.

There is no additional Net County Cost associated with the recommended action. Approval of the recommended action will fund tuberculosis (TB) activities in the Department of Public Health, which include screening, case management, treatment, contact investigation, and incentives to improve treatment compliance of TB patients. Incentives may include food, shelter, incentives and enablers (FSIE) expenditures such as fast food, groceries, gift cards, bus transportation, equipment, and supplies. The activities are funded with State and Federal funding and the indirect costs will be covered with Health Realignment. This item is countywide.

ALTERNATIVE ACTION(S):

There is no viable alternative action. Should your Board not approve the recommended action, the Department would be unable to fully fund TB control activities in the County.

RETROACTIVE AGREEMENT:

The recommended Award was received from the California Department of Public Health on June 18, 2021 and is retroactive to July 1, 2021 and is being brought to your Board in accordance with the agenda item processing timelines.

FISCAL IMPACT:

There is no increase in Net County Cost associated with the recommended action. The total award will provide \$363,117 in revenue from July 1, 2021 through June 30, 2022. The base award (\$342,571) is comprised of State (\$147,410) and Federal (\$195,161) funds. The additional FSIE allotment (\$20,546) is comprised fully of State funds. The Department will cover its full indirect cost rate of 22.579% of salaries and benefits (\$71,109) with Health Realignment. There are no pending invoices related to this item. Sufficient revenues and estimated expenditures are included in the Department's Org 5620 FY 2021-22 Adopted Budget.

DISCUSSION:

In 2020, the Department's TB Control Program provided treatment, case management, contact investigation, referral and follow-up activities for 36 county residents newly diagnosed with active TB. Department staff also provided care for patients diagnosed prior to 2020 who had not yet completed treatment. The standard treatment regimens are six to twelve months; however, patients with drug-resistant TB may be treated as long as two years. Active TB patients receive Directly Observed Therapy (DOT) or video DOT (vDOT) in which DOT staff visit or view a video recording of patients daily to ensure ingestion of appropriate TB medications. TB Control Program staff provided 4,308 DOT visits and 5,210 vDOT viewings in 2020.

The Department also screened an additional 802 new patients with inactive TB or a disease other than TB. The Department's Hospital Liaison and other TB Control Program staff closely monitored and managed 199 cases of the 1,163 additional cases as follow-up to immigration screening mandated by federal law. Residents at high risk of developing TB include close contacts to active TB patients and people experiencing homelessness. Approximately 334 close contacts were evaluated for latent TB infections, and over 237 TB screenings were conducted on individuals who were identified as homeless. In FY 2020-21, the County expended an average of \$1,105.12 per TB patient for treatment, hospital case management, contact investigation, and/or screening.

The recommended award contains non-standard termination language as it allows the State to terminate without cause, provided that written notice has been delivered at least 30 days prior to termination. The award also contains a termination clause that allows the County to submit a written request to terminate only in the event the State substantially fails to perform its responsibilities under the agreement.

REFERENCE MATERIAL:

BAI #60, September 22, 2020

ATTACHMENTS INCLUDED AND/OR ON FILE:

On file with Clerk - Agreement with CDPH

CAO ANALYST:

Ron Alexander