CONTRACT BETWEEN INDIAN RIVER COUNTY BOARD OF COUNTY COMMISSIONERS AND

STATE OF FLORIDA DEPARTMENT OF HEALTH FOR OPERATION OF THE INDIAN RIVER COUNTY HEALTH DEPARTMENT CONTRACT YEAR 2018-2019

This contract is made and entered into between the State of Florida, Department of Health ("State") and the Indian River County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2018.

RECITALS

- A. Pursuant to Chapter 154, Florida Statutes, the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."
- B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."
- C. Indian River County Health Department ("CHD") is one of the created County Health Departments.
- D. It is necessary for the parties hereto to enter into this contract in order to ensure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

- 1. <u>RECITALS</u>. The parties mutually agree that the foregoing recitals are true and correct and incorporated herein by reference.
- 2. <u>TERM</u>. The parties mutually agree that this contract shall be effective from October 1, 2018, through September 30, 2019, or until a written contract replacing this contract is entered into between the parties, whichever is later, unless this contract is otherwise terminated pursuant to the termination provisions set forth in paragraph 8. below.
- 3. <u>SERVICES MAINTAINED BY THE CHD</u>. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to section 154.01(2), Florida Statutes, as defined below:
- a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease.

Environmental health services shall be supported by available federal, state and local funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, and occupational health.

- b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.
- c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.
- 4. <u>FUNDING</u>. The parties further agree that funding for the CHD will be handled as follows:
- a. The funding to be provided by the parties and any other sources is set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.
 - i. The State's appropriated responsibility (direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C) as provided in Attachment II, Part II is an amount not to exceed \$ 3,037,042 (State General Revenue, State Funds, Other State Funds and Federal Funds listed on the Schedule C). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.
 - ii. The County's appropriated responsibility (direct contribution excluding any fees, other cash or local contributions) as provided in Attachment II, Part II is an amount not to exceed \$\frac{696,267}{267}\$ (amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment).
- b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this contract in the County Health

Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

- c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.
- d. Either party may increase or decrease funding of this contract during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Office of Budget and Revenue Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Office of Budget and Revenue Management.
 - e. The name and address of the official payee to whom payments shall be made is:

County Health Department Trust Fund Indian River County Health Department Accounts Receivable, 1900 27th Street Vero Beach, FL 32960-3383

- 5. <u>CHD DIRECTOR/ADMINISTRATOR</u>. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy Secretary for County Health Systems. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall ensure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan.
- 6. <u>ADMINISTRATIVE POLICIES AND PROCEDURES</u>. The parties hereto agree that the following standards should apply in the operation of the CHD:
- a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of County purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Health Management System compatible format by program component as specified by the State.
- b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of County purchasing procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all County purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall be

maintained by the CHD in accordance with the terms of this contract. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

- c. The CHD shall maintain books, records and documents in accordance with the Generally Accepted Accounting Principles (GAAP), as promulgated by the Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraphs 6.i. and 6.k., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:
 - The revenue and expenditure requirements in the Florida Accounting Information Resource (FLAIR) System;
 - ii. The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
 - iii. Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda:
 - iv. The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.
- d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Indian River County.
- e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the State or County, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by State and County based on the ratio of planned expenditures in this contract and funding from all sources is credited to the program accounts by State and County. The equity share of any surplus/deficit funds accruing to the State and County is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of surplus funds shall be

reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

- f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy Secretary for County Health Systems has approved the transfer. The Deputy Secretary for County Health Systems shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.
- g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this contract. Any such subcontract shall include all aforementioned audit and record keeping requirements.
- h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by County government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.
- i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.
- j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this contract for a period of five (5) years after termination of this contract. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.
- k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.
- I. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using County procedures pursuant to paragraph 6.b.

- m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this contract.
- n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.
- o. The CHD shall submit quarterly reports to the County that shall include at least the following:
 - i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;
 - ii. A written explanation to the County of service variances reflected in the year end DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount for the contract year. However, if the amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Office of Budget and Revenue Management.
- p. The dates for the submission of quarterly reports to the County shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:
 - *i.* March 1, 2019 for the report period October 1, 2018 through December 31, 2018;
 - *ii.* June 1, 2019 for the report period October 1, 2018 through March 31, 2019;
 - iii. September 1, 2019 for the report period October 1, 2018 through June 30, 2019; and
 - iv. December 1, 2019 for the report period October 1, 2018 through September 30, 2019.

7. <u>FACILITIES AND EQUIPMENT</u>. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the County shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

- b. The County shall ensure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.
- c. All vehicles will be transferred to the ownership of the County and registered as County vehicles. The County shall ensure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

- a. <u>Termination at Will</u>. This contract may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- b. <u>Termination Because of Lack of Funds</u>. In the event funds to finance this contract become unavailable, either party may terminate this contract upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- c. <u>Termination for Breach</u>. This contract may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this contract shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this contract.

9. <u>MISCELLANEOUS</u>. The parties further agree:

- a. <u>Availability of Funds</u>. If this contract, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2019, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.
- b. <u>Contract Managers</u>. The name and address of the contract managers for the parties under this contract are as follows:

For the State:

For the County:

Mayur Rao

Michael R Symkowski

Name

Name

Business Manager

Budget Director

1900 27th Street 1801 27th Street Vero Beach, Fl., 32960-3383 Vero Beach, Fl., 32960-3383 Address Address 772-794-7464 772-567-8000 Ext. 1214 Telephone Telephone If different contract managers are designated after execution of this contract, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this contract. The captions and headings contained in this contract are for the c. Captions. convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof. In WITNESS THEREOF, the parties hereto have caused this eight page contract, with its attachments as referenced, including Attachment I (two pages), Attachment II (six pages), Attachment III (one page), Attachment IV (one page), and Attachment V (one page), to be executed by their undersigned officials as duly authorized effective the 1st day of October. 2018. **BOARD OF COUNTY COMMISSIONERS** STATE OF FLORIDA **DEPARTMENT OF HEALTH** FOR INDIAN RIVER COUNTY SIGNED BY: ____ SIGNED BY: _____ NAME: NAME: Celeste Philip, MD, MPH_____ TITLE: TITLE: Surgeon General and Secretary DATE: DATE: **ATTESTED TO:** SIGNED BY: SIGNED BY: NAME: _____ NAME: Miranda C. Hawker, MPH TITLE: _____ TITLE: CHD Administrator

DATE:

DATE: 8

INDIAN RIVER COUNTY HEALTH DEPARTMENT

PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

	<u>Service</u>	Requirement
1.	Sexually Transmitted Disease Program	Requirements as specified in F.A.C. 64D-3, F.S. 381 and F.S. 384.
2.	Dental Health	Periodic financial and programmatic reports as specified by the program office.
3.	Special Supplemental Nutrition Program for Women, Infants and Children (including the WIC Breastfeeding Peer Counseling Program)	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4.	Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the 2007 Healthy Start Standards and Guidelines and as specified by the Healthy Start Coalitions in contract with each county health department.
5.	Family Planning	Requirements as specified in Public Law 91-572, 42 U.S.C. 300, et seq., 42 CFR part 59, subpart A, 45 CFR parts 74 & 92, 2 CFR 215 (OMB Circular A-110) OMB Circular A-102, F.S. 381.0051, F.A.C. 64F-7, F.A.C. 64F-16, and F.A.C. 64F-19. Requirements and Guidance as specified in the Program Requirements for Title X Funded Family Planning Projects (Title X Requirements)(2014) and the Providing Quality Family Planning Services (QFP): Recommendations of CDC and the U.S. Office of Population Affairs published on the Office of Population Affairs website. Programmatic annual reports as specified by the program office as specified in the annual programmatic Scope of Work for Family Planning and Maternal Child Health Services, including the Family Planning Annual Report (FPAR), and other minimum guidelines as specified by the Policy Web Technical Assistance Guidelines.
6.	Immunization	Periodic reports as specified by the department pertaining to immunization levels in kindergarten and/or seventh grade pursuant to instructions contained in the Immunization Guidelines-Florida Schools, Childcare Facilities and Family Daycare Homes (DH Form 150-615) and Rule 64D-3.046, F.A.C. In addition, periodic reports as specified by the department pertaining to the surveillance/investigation of reportable vaccine-preventable diseases, adverse events, vaccine accountability, and assessment of immunization

Guidebook policies and technical assistance guidance. 7. Requirements as specified in Environmental Health Programs **Environmental Health** Manual 150-4* and DHP 50-21* Requirements as specified in F.S. 384.25 and F.A.C. 64D-3.030 8. **HIV/AIDS Program** and 64D-3.031. Case reporting should be on Adult HIV/AIDS Confidential Case Report CDC Form DH2139 and Pediatric HIV/AIDS Confidential Case Report CDC Form DH2140. Requirements as specified in F.A.C. 64D-2 and 64D-3, F.S. 381 and F.S. 384. Socio-demographic and risk data on persons tested for HIV in CHD clinics should be reported on Lab Request DH Form 1628 in accordance with the Forms Instruction Guide. Requirements for the HIV/AIDS Patient Care programs are found in the Patient Care Contract Administrative Guidelines. Requirements as specified in the Florida School Health 9. School Health Services Administrative Guidelines (May 2012). Requirements as specified in F.S. 381.0056, F.S. 381.0057, F.S. 402.3026 and F.A.C. 64F-6. Tuberculosis Program Requirements as specified in F.A.C. 64D-3 10. Tuberculosis and F.S. 392. 11. General Communicable Disease Carry out surveillance for reportable communicable and other acute Control diseases, detect outbreaks, respond to individual cases of reportable diseases, investigate outbreaks, and carry out communication and quality assurance functions, as specified in F.A.C. 64D-3, F.S. 381, F.S. 384 and the CHD Epidemiology Guide to Surveillance and Investigations.

program office.

levels as documented in Florida SHOTS and supported by CHD

Programmatic and financial requirements as specified by the

*or the subsequent replacement if adopted during the contract period.

Refugee Health Program

12.

INDIAN RIVER COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

		Estimated State Share of CHD Trust Fund Balance	Estimated County Share of CHD Trust Fund Balance	Total	
1.	CHD Trust Fund Ending Balance 09/30/18				-
		:	54381	396374	450755
2.	Drawdown for Contract Year				
	October 1, 2018 to September 30, 2019				
		-4	54381	-97323	-151704
3.	Special Capital Project use for Contract Year				
	October 1, 2018 to September 30, 2019		0	0	0
			<u> </u>	U	<u> </u>
4.	Balance Reserved for Contingency Fund	•			
	October 1, 2018 to September 30, 2019				
			0	299051	299051

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department October 1, 2018 to September 30, 2019

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENE	RAL REVENUE - STATE					
015040	AIDS PATIENT CARE	100,000	0	100,000	0	100,000
015040	CHD · TB COMMUNITY PROGRAM	24,243	0	24,243	0	24,243
015040	DENTAL SPECIAL INITIATIVE PROJECTS	5,977	0	5,977	0	5,977
015040	FAMILY PLANNING GENERAL REVENUE	42,593	0	42,593	0	42,593
015040	PRIMARY CARE PROGRAM	183,226	0	183,226	0	183,226
015040	SCHOOL HEALTH SERVICES · GENERAL REVENUE	136,867	0	136,867	0	136,867
015050	CHD GENERAL REVENUE NON-CATEGORICAL	1,343,145	0	1,343,145	0	1,343,145
GENERA	L REVENUE TOTAL	1,836,051	0	1,836,051	0	1,836,051
2. NON (GENERAL REVENUE - STATE					
015010	ENVIRONMENTAL BIOMEDICAL WASTE PROGRAM	8,113	0	8,113	0	8,113
NON GE	NERAL REVENUE TOTAL	8,113	0	8,113	0	8,113
3. FEDE	RAL FUNDS · STATE					
007000	WIC BREASTFEEDING PEER COUNSELING PROG	49,000	0	49,000	0	49,000
007000	COASTAL BEACH WATER QUALITY MONITORING	10,420	0	10,420	0	10,420
007000	COMPREHENSIVE COMMUNITY CARDIO - PHBG	35,000	0	35,000	0	35,000
007000	CMS-MCH PURCHASED CLIENT SERVICES	14,776	0	14,776	0	14,776
007000	FAMILY PLANNING TITLE X \cdot GRANT	75,357	0	75,357	0	75,357
007000	IMMUNIZATION ACTION PLAN	34,951	0	34,951	0	34,951
007000	MCH SPECIAL PRJCT UNPLANNED PREGNANCY	2,984	0	2,984	0	2,984
007000	MCH BLOCK GRANT FLORIDA'S HEALTHY BABIES	25,402	0	25,402	0	25,402
007000	BASE COMMUNITY PREPAREDNESS CAPABILITY	92,396	0	92,396	0	92,396
007000	BASE PUB HLTH SURVEILLANCE & EPI INVESTIGATION	71,434	0	71,434	0	71,434
007000	AIDS PREVENTION	63,894	0	63,894	0	63,894
007000	WIC PROGRAM ADMINISTRATION	441,800	0	441,800	0	441,800
015075	INSPECTIONS OF SUMMER FEEDING PROGRAM · DOE	6,273	0	6,273	0	6,273
015075	SUPPLEMENTAL SCHOOL HEALTH	150,068	0	150,068	0	150,068
018005	AIDS DRUG ASSISTANCE PROGRAM ADMIN HQ	35,396	0	35,396	0	35,396
018005	RYAN WHITE TITLE II GRANT/CHD CONSORTIUM	90,000	0	90,000	0	90,000
FEDERA	L FUNDS TOTAL	1,199,151	0	1,199,151	0	1,199,151
4. FEES	ASSESSED BY STATE OR FEDERAL RULES - STATE					
001020	CHD STATEWIDE ENVIRONMENTAL FEES	132,317	0	132,317	0	132,317
001092	CHD STATEWIDE ENVIRONMENTAL FEES	270,002	0	270,002	0	270,002
001206	ON SITE SEWAGE DISPOSAL PERMIT FEES	24,996	0	24,996	0	24,996
001206	SANITATION CERTIFICATES (FOOD INSPECTION)	2,405	0	2,405	0	2,405
001206	SEPTIC TANK RESEARCH SURCHARGE	4,745	0	4,745	0	4,745
001206	SEPTIC TANK VARIANCE FEES 50%	201	0	201	0	201
001206	PUBLIC SWIMMING POOL PERMIT FEES-10% HQ TRANSFER	1,292	0	1,292	0	1,292
001206	DRINKING WATER PROGRAM OPERATIONS	523	0	523	0	523
001206	REGULATION OF BODY PIERCING SALONS	138	0	138	0	138
001206	TANNING FACILITIES	217	0	217	0	217
001206	ONSITE SEWAGE TRAINING CENTER	95	0	95	0	95

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department October 1, 2018 to September 30, 2019

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
001206 TATTO PROGRAM ENVIRONMENTAL HEALTH	868	0	868	0	868
001206 MOBILE HOME & RV PARK FEES	1,698	0	1,698	0	1,698
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL	439,497	0	439,497	0	439,497
5. OTHER CASH CONTRIBUTIONS - STATE:					
	0	0	0	0	0
090001 DRAW DOWN FROM PUBLIC HEALTH UNIT	54,381	0	54,381	0	54,381
OTHER CASH CONTRIBUTION TOTAL	54,381	0	54,381	0	54,381
6. MEDICAID - STATE/COUNTY:					
001057 CHD CLINIC FEES	0	98,189	98,189	0	98,189
001148 CHD CLINIC FEES	0	949,145	949,145	0	949,145
MEDICAID TOTAL	0	1,047,334	1,047,334	0	1,047,334
7. ALLOCABLE REVENUE - STATE:					
001004 CHD STATEWIDE ENVIRONMENTAL FEES	2,100	0	2,100	0	2,100
031005 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	15,000	0	15,000	0	15,000
031005 SPECIAL HEALTH TRANSFER	23,500	0	23,500	0	23,500
ALLOCABLE REVENUE TOTAL	40,600	0	40,600	0	40,600
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND \cdot STATE					
ADAP	0	0	0	206,578	206,578
PHARMACY DRUG PROGRAM	0	0	0	9,492	9,492
WIC PROGRAM	0	0	0	1,842,919	1,842,919
BUREAU OF PUBLIC HEALTH LABORATORIES	0	0	0	18,352	18,352
IMMUNIZATIONS	. 0	0	0	399,870	399,870
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	2,477,211	2,477,211
9. DIRECT LOCAL CONTRIBUTIONS · BCC/TAX DISTRICT					
008005 HUMAN AND CHILDRENS SERVICES PROGRAM	0	66,478	66,478	0	66,478
008005 CHD FEDERAL & LOCAL INDIRECT EARNINGS	0	24,460	24,460	0	24,460
008020 CHD LOCAL REVENUE & EXPENDITURES	0	951,944	951,944	0	951,944
008040 CHD LOCAL REVENUE & EXPENDITURES	0	696,267	696,267	0	696,267
DIRECT COUNTY CONTRIBUTIONS TOTAL	0	1,739,149	1,739,149	0	1,739,149
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY	NTY				
001025 CHD CLINIC FEES	0	12,164	12,164	0	12,164
001077 CHD CLINIC FEES	0	216,392	216,392	0	216,392
001094 CHD LOCAL ENVIRONMENTAL FEES	0	90,289	90,289	0	90,289
001110 VITAL STATISTICS CERTIFIED RECORDS	0	217,944	217,944	0	217,944
FEES AUTHORIZED BY COUNTY TOTAL	0	536,789	536,789	0	536,789
11. OTHER CASH AND LOCAL CONTRIBUTIONS · COUNTY					
001029 CHD CLINIC FEES	0	33,741	33,741	0	33,741
001090 CHD CLINIC FEES	0	23,811	23,811	0	23,811
005000 CHD LOCAL REVENUE & EXPENDITURES	0	1,489	1,489	0	1,489

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department October 1, 2018 to September 30, 2019

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
010300 STATE UNDERGROUND PETROLEUM RESPONSE ACT	0	967	967	0	967
010300 CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	396	396	0	396
010400 CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	1,679	1,679	0	1,679
011000 REVENUE CONTRACT/MOA W/NO REPORTING REQUIREMENT	0	15,402	15,402	0	15,402
011000 CHD CASH DONATION / NON-SPECIFIC	0	2,000	2,000	0	2,000
011000 CHD LOCAL REVENUE & EXPENDITURES	0	70,165	70,165	0	70,165
011001 CHD HEALTHY START COALITION CONTRACT	0	2,243	2,243	0	2,243
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	97,323	97,323	0	97,323
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	249,216	249,216	0	249,216
12. ALLOCABLE REVENUE - COUNTY					(
001004 CHD STATEWIDE ENVIRONMENTAL FEES	0	2,100	2,100	0	2,100
031005 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	0	15,000	15,000	0	15,000
031005 SPECIAL HEALTH TRANSFER	0	23,500	23,500	0	23,500
COUNTY ALLOCABLE REVENUE TOTAL	0	40,600	40,600	0	40,600
13. BUILDINGS · COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	455,938	455,938
OTHER (Specify)	0	0	0	0	0
UTILITIES	0	0	0	153,560	153,560
BUILDING MAINTENANCE	0	0	0	82,068	82,068
GROUNDS MAINTENANCE	0	0	0	0	0
INSURANCE	0	0	0	0	0
OTHER (Specify)	0	0	0	0	0
OTHER (Specify)	0	0	0	0	0
BUILDINGS TOTAL	0	0	0	691,566	691,566
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND · COUNTY	-				
EQUIPMENT / VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	3,577,793	3,613,088	7,190,881	3,168,777	10,359,658

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing. Clients, Services and Expenditures By Program Service Area Within Each Level of Service
October 1, 2018 to September 30, 2019

	Quarterly Expenditure Plan									
	FTE's (0.00)	Clients Se Units	ervices/ Visits	1st	2nd (Whole dol	3rd	4th	State	County	Grand Total
COLORIDAD IN TRACE OF COMPANY	(0.00)	Ошев	AIBILB		(Whole dot	iars omy/	100	State	County	TOTAL
A. COMMUNICABLE DISEASE CONTROL:	0.01	1 551	0.001	FF 000	44.004	FF 000	04.005	141 550	00 510	0.41.00
IMMUNIZATION (101)	2.61	1,771	2,381	55,639	64,896	55,639	64,895	141,556	99,513	241,06
SEXUALLY TRANS. DIS. (102)	3.31	910	1,169	52,307	61,010	52,307	61,011	190,372	36,263	226,63
HIV/AIDS PREVENTION (03A1)	1.55	0	7,825	25,534	29,782	25,534	29,781	106,262	4,369	110,63
HIV/AIDS SURVEILLANCE (03A2)	0.00	0	0	7	8	7	9	30	1	3
HIV/AIDS PATIENT CARE (03A3)	2.16	382	638	48,392	56,443	48,392	56,442	176,552	33,117	209,66
ADAP (03A4)	0.65	1	1	10,992	12,821	10,992	12,822	46,852	775	47,62
TUBERCULOSIS (104)	1.24	174	291	21,319	24,866	21,319	24,867	24,243	68,128	92,37
COMM. DIS. SURV. (106)	2.94	0	230	50,584	59,000	50,584	58,999	132,112	87,055	219,16
HEPATITIS (109)	0.00	0	0	0	0	0	0	0	0	
PREPAREDNESS AND RESPONSE (116)	1.36	0	1	28,586	33,342	28,586	33,341	123,855	0	123,85
REFUGEE HEALTH (118)	0.00	0	0	0	0	0	0	0	0	
VITAL RECORDS (180)	1.17	6,299	18,893	16,246	18,949	16,246	18,949	0	70,390	70,39
COMMUNICABLE DISEASE SUBTOTAL	16.99	9,537	31,429	309,606	361,117	309,606	361,116	941,834	399,611	1,341,44
B. PRIMARY CARE:										
CHRONIC DISEASE PREVENTION PRO (210)	0.35	702	307	11,115	12,964	11,115	12,964	40,346	7,812	48,15
WIC (21W1)	8.56	4,175	24,481	128,024	149,324	128,024	149,323	554,695	0	554,69
TOBACCO USE INTERVENTION (212)	0.00	0	0	0	0	0	0	0	0	
WIC BREASTFEEDING PEER COUNSELING (21W2)	1.30	0	2,272	15,245	17,782	15,245	17,782	66,054	0	66,05
FAMILY PLANNING (223)	7.00	1,285	1,953	113,106	131,925	113,106	131,925	254,678	235,384	490,06
IMPROVED PREGNANCY OUTCOME (225)	0.00	0	0	0	0	0	0	0	0	
HEALTHY START PRENATAL (227)	0.06	5	74	706	823	706	823	0	3,058	3,05
COMPREHENSIVE CHILD HEALTH (229)	7.41	1,395	3,211	119,084	138,898	119,084	138,898	0	515,964	515,96
HEALTHY START CHILD (231)	0.00	0	0	0	0	0	0	0	0	(
SCHOOL HEALTH (234)	4.04	0	25,701	78,694	91,786	78,694	91,786	340,210	750	340,96
COMPREHENSIVE ADULT HEALTH (237)	23.45	2,663	6,068	459,947	536,472	459,947	536,473	495,985	1,496,854	1,992,83
COMMUNITY HEALTH DEVELOPMENT (238)	1.51	0	1,713	28,197	32,888	28,197	32,889	98,671	23,500	122,17
DENTAL HEALTH (240)	8.97	2,856	5,788	157,667	183,899	157,667	183,899	116,299	566,833	683,13
PRIMARY CARE SUBTOTAL	62.65	13,081	71,568	1,111,785	1,296,761	1,111,785	1,296,762	1,966,938	2,850,155	4,817,09
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COSTAL BEACH MONITORING (347)	0.14	116	119	3,883	4,529	3,883	4,528	16,769	54	16,82
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.25	36	407	4,404	5,137	4,404	5,136	16,824	2,257	19,08
PUBLIC WATER SYSTEM (358)	0.08	4	115	1,372	1,600	1,372	1,599	1,679	4,264	5,94
PRIVATE WATER SYSTEM (359)	1.32	5	1,653	23,698	27,641	23,698	27,641	218	102,460	102,67
ONSITE SEWAGE TREATMENT & DISPOSAL (361)	5.85	1,506	5,331	92,721	108,148	92,721	108,149	398,039	3,700	401,73
Group Total	7.64	1,667	7,625	126,078	147,055	126,078	147,053	433,529	112,735	546,26
Facility Programs										
TATTOO FACILITY SERVICES (344)	0.10	0	34	1,663	1,940	1,663	1,940	7,168	38	7,20
FOOD HYGIENE (348)	0.46	86	433	8,073	9,416	8,073	9,415	34,788	189	34,97
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INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing. Clients, Services and Expenditures By Program Service Area Within Each Level of Service
October 1, 2018 to September 30, 2019

				Qu	Quarterly Expenditure Plan						
	FTE's	Clients S		1st	2nd	3rd	4th			Grand	
	(0,00)	Units	Visits		(Whole dol)	lars only)		State	County	Total	
BODY PIERCING FACILITIES SERVICES (349)	0.04	5	9	626	731	626	731	2,698	16	2,714	
GROUP CARE FACILITY (351)	0.48	78	165	7,958	9,282	7,958	9,281	79	34,400	34,479	
MIGRANT LABOR CAMP (352)	0.06	3	19	1,159	1,352	1,159	1,353	1,395	3,628	5,023	
HOUSING & PUB. BLDG. (353)	0.16	0	33	3,028	3,532	3,028	3,533	57	13,064	13,121	
MOBILE HOME AND PARK (354)	0.17	57	148	2,783	3,246	2,783	3,247	11,724	335	12,059	
POOLS/BATHING PLACES (360)	1.10	424	1,404	18,376	21,433	18,376	21,434	78,322	1,297	79,619	
BIOMEDICAL WASTE SERVICES (364)	0.67	366	423	10,323	12,040	10,323	12,040	43,534	1,192	44,726	
TANNING FACILITY SERVICES (369)	0.01	8	14	277	323	277	324	1,196	5	1,201	
Group Total	3.25	1,027	2,682	54,266	63,295	54,266	63,298	180,961	54,164	235,125	
Groundwater Contamination											
STORAGE TANK COMPLIANCE SERVICES (355)	0.00	0	0	0	0	0	0	0	0	0	
SUPER ACT SERVICES (356)	0.05	10	20	776	905	776	904	7	3,354	3,361	
Group Total	0.05	10	20	776	905	776	904	7	3,354	3,361	
Community Hygiene											
COMMUNITY ENVIR. HEALTH (345)	0.29	0	496	4,859	5,668	4,859	5,668	6,070	14,984	21,054	
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0	
LEAD MONITORING SERVICES (350)	0.01	0	0	109	127	109	127	469	3	472	
PUBLIC SEWAGE (362)	0.51	1,361	280	8,345	9,734	8,345	9,734	85	36,073	36,158	
SOLID WASTE DISPOSAL SERVICE (363)	0.02	0	40	385	449	385	450	4	1,665	1,669	
SANITARY NUISANCE (365)	0.14	23	10	2,815	3,283	2,815	3,282	23	12,172	12,195	
RABIES SURVEILLANCE (366)	0.22	28	76	4,478	5,222	4,478	5,222	37	19,363	19,400	
ARBORVIRUS SURVEIL. (367)	0.04	0	32	616	719	616	720	7	2,664	2,671	
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	45	53	45	53	0	196	196	
WATER POLLUTION (370)	0.17	0	105	3,430	4,001	3,430	4,001	4,310	10,552	14,862	
INDOOR AIR (371)	0.22	0	31	4,397	5,128	4,397	5,127	37	19,012	19,049	
RADIOLOGICAL HEALTH (372)	0.01	0	1	142	166	142	166	154	462	616	
TOXIC SUBSTANCES (373)	0.15	12	30	3,045	3,551	3,045	3,551	3,747	9,445	13,192	
Group Total	1.78	1,424	1,101	32,666	38,101	32,666	38,101	14,943	126,591	141,534	
ENVIRONMENTAL HEALTH SUBTOTAL	12.72	4,128	11,428	213,786	249,356	213,786	249,356	629,440	296,844	926,284	
D. NON-OPERATIONAL COSTS:											
NON-OPERATIONAL COSTS (599)	1.00	0	0	15,343	17,896	15,343	17,896	0	66,478	66,478	
ENVIRONMENTAL HEALTH SURCHARGE (399)	0.00	0	0	8,581	10,009	8,581	10,010	37,181	0	37,181	
MEDICAID BUYBACK (611)	0.00	0	0	554	646	554	646	2,400	0	2,400	
NON-OPERATIONAL COSTS SUBTOTAL	1.00	0	0	24,478	28,551	24,478	28,552	39,581	66,478	106,059	
TOTAL CONTRACT	93.36	26,746	114,425	1,659,655	1,935,785	1,659,655	1,935,786	3,577,793	3,613,088	7,190,881	

INDIAN RIVER COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

- 1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
- Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination
 on the basis of handicap in programs and activities receiving or benefiting from federal financial
 assistance.
- Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits
 discrimination on the basis of sex in education programs and activities receiving or benefiting from
 federal financial assistance.
- 4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
- 5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
- 6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

Attachment IV

Fiscal Year - 2018 - 2019

Indian River County Health Department

Facilities Utilized by the County Health Department

Complete Location	Facility Description	Lease/	Type of	Complete	SQ	Employee
(Street Address, City, Zip)	And Offical Building	Agreement	Agreement	Legal Name	Feet	Count
	Name (if applicable)	Number	(Private Lease thru	of Owner		(FTE/OPS/
	(Admin, Clinic, Envn Hlth,		State or County, other -			Contract)
	etc.)		please define)			·
1900 27th Street, Vero Beach, Florida, 32960-3383	Administration, HR, Clinic, Vital Statistics, Env. Health, WIC	N/A	County Owned	Commissioners for Indian River County	36,475	87.99
4675 28th Court, Vero Beach, Florida, 32967-1330	Clinic	N/A	Indian River County Hospital District	Indian River County Hospital District	10,642	10.6
1101144, 02301-1000		1477	District	1105pital District	10,042	10.0
			.			

Facility - a fixed site managed by DOH/CHD personnel for the purpose of providing or supporting public health services. Includes county-owned, state-owned, and leased facilities. Includes DOH/CHD warehouse and administrative sites. Includes facilities managed by DOH/CHD that may be shared with other organizations.

Does not include schools, jails or other facilities where DOH/CHD staff are out-posted or sites where services are provided on an episodic basis.

Attachment

Attachment_IV - Page 10 of 11

ATTACHMENT V INDIAN RIVER COUNTY HEALTH DEPARTMENT SPECIAL PROJECTS SAVINGS PLAN

N/A

CASH RESERVED OR ANTICIPATED TO BE RESERVED FOR PROJECTS

CONTRACT YEAR	<u>STATE</u>		COUNTY		<u>TOTAL</u>	
2017-2018*	\$	0	\$	0	\$ 	0
2018-2019**	\$	0	\$	0	\$ 	0
2019-2020***	\$	0	\$	0	\$	0
2020-2021***	\$	0	\$	0	\$ 	0
PROJECT TOTAL	\$	0	\$	0	\$ 	0
	SPECIAL PROJECTS	CONSTRU	CTION/RENOVATION PLA	N		
PROJECT NUMBER:	·				 	
PROJECT NAME:					 · · · · · · · · · · · · · · · · · · ·	
LOCATION/ADDRESS:					 	
PROJECT TYPE:	NEW BUILDING		ROOFING			
	RENOVATION		PLANNING STUDY			
	NEW ADDITION		OTHER			
SQUARE FOOTAGE:		0				
PROJECT SUMMARY: Desc	ribe scope of work in reaso	onable detai	I.			
START DATE (Initial expenditure of funds)	:					
COMPLETION DATE:						
DESIGN FEES:	\$	0				
CONSTRUCTION COSTS:	\$	0				
FURNITURE/EQUIPMENT:	\$	0				
TOTAL PROJECT COST:	\$	0				
COST PER SQ FOOT:	\$	0				

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and

mobile health vans.

^{*} Cash balance as of 9/30/18

^{**} Cash to be transferred to FCO account.

^{***} Cash anticipated for future contract years.