

Cleveland County Board of Commissioners
December 13, 2022

The Cleveland County Board of Commissioners met on this date, at the hour of 6:00 p.m. in the Commission Chambers of the Cleveland County Administrative Offices.

PRESENT: Kevin Gordon, Chairman
Ronnie Whetstine, Vice-Chair
Johnny Hutchins, Commissioner
Doug Bridges, Commissioner
Deb Hardin Commissioner
Tim Moore, County Attorney
Brian Epley, County Manager
Phyllis Nowlen, Clerk to the Board
Kerri Melton, Assistant County Manager
Katie Swanson, Social Services Director
Martha Thompson, Chief Deputy Attorney
Chris Martin, Planning Director
Tiffany Hansen, Health Department Director
Sherry Lavender, Tax Assessor

CALL TO ORDER

Chairman Gordon called the meeting to order and invited anyone from the audience to lead the Pledge of Allegiance and provide the invocation.

Audience member Marie Jackson led the audience in the Pledge of Allegiance and Commissioner Hutchins provided the invocation.

AGENDA ADOPTION

ACTION: Commissioner Whetstine made the motion, seconded by Commissioner Bridges and unanimously adopted by the Board to, ***approve the agenda as presented.***

SPECIAL PRESENTATION

CERTIFIED ENTREPRENEURIAL COMMUNITY

Chairman Gordon recognized Small Business Center Director Steve Padgett to present an update on the Certified Entrepreneurial Community. Mr. Padgett gave an update on the Certified Entrepreneurial Program, advising 58 small business centers in the state of North Carolina have received supplemental funding to assist small businesses in their communities. He thanked the Commissioners for their continued support and encouraged small business owners to contact the Small Business Center for information and resources.

CITIZEN RECOGNITION

Robert Williams, 814 E. Stagecoach Trl, Fallston – spoke about the First Amendment, pending county lawsuits and social service issues in Cherokee County.

CONSENT AGENDA

APPROVAL OF MINUTES

The Clerk to the Board included the Minutes from the ***November 1 and 15, 2022*** regular Commissioners' meeting and the ***December 5, 2022*** special called and organizational meeting in Board members' packets.

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and passed unanimously by the Board to, *approve the minutes as written.*

FINANCE DEPARTMENT: MONTHLY MANAGER’S REPORT

- The Finance Department has completed the audit process for FY22 with our external audit firm Thompson Price Scott & Adam’s. The Annual Comprehensive Financial Report was submitted to the Local Government Commission in November. The highlights and review of the FY22 audit will be presented to the Board of Commissioners in January 2023.
- Cleveland County currently has approximately \$93,000,000 in Federal and State grants. Finance continues to organize all the associated grant documents, requirements, key dates, and other information in a convenient format for the future use of research and reporting development of a new website to actively track these grants, retain needed documents, and update key processes was completed in November.
- County Project Manager, Blake Myers has overseen a major project to repair an erosion issue adjacent to the County Health Department. This project had previously been noted by EPA and was vital to the Environmental Health of Cleveland County. This project has increased the stability of approximately 500’ of ditch line and has included the removal of trees, stumps, and other items that have in the past created a burden on the bank’s stability.
- With the design of the Justice Center project moving forward, staff has met with consultants to develop a plan of action for securing financing for a project of this magnitude and obtaining approval from the required agencies to do so. Including in these discussions were leveraging of funds to produce the maximum efficiency of grants and ensure the best management of county funds.
- Board of Elections- Demolition of old Shelby rescue has been completed. We are now in the re-zoning phase with the City before site/civil drawings can be completed which has pushed the scheduled completion back later than expected. Next steps will be small renovations inside the new Shelby rescue squad building to accommodate board of elections as well as balance of site grading/parking lot installation.
- 911 Center- Grant approval has been received and county can move forward with contract review for the design team to begin their design phase.
- Health Department Renovation- Renovations are complete and minor touch ups are the only remaining items left to complete. Final move/relocation into this new space is still scheduled for middle to end of January.

County of Cleveland, North Carolina
 Manager’s Budget Summary
 Presented at the December 13, 2022 Board Meeting
 Time Period Covered : 10/25/22 thru December 6, 2022
 For Fiscal Year Ending June 30, 2023

BUDGET TRANSFERS LEGEND: D = DEPARTMENTAL; L = LATERAL

| BUD # | BUDGET TYPE | DATE SUBMITTED BY DEPT | DEPT NAME TO | DEPT NAME FROM | EXPLANATION | BUDGET AMOUNT |
|-------|-------------|------------------------|--------------|----------------|---|---------------|
| 1363 | D | 10/25/2022 | 010.443 | | Move to cover supplies | \$ 8,000 |
| 1364 | D | 10/25/2022 | 010.446 | | Move funds to cover contracted services | \$ 13 |
| 1365 | L | 10/25/2022 | 010.441 | 10.996 | Transfer funds to cover capital equipment | \$ 10,000 |
| 1366 | D | 11/1/2022 | 012.532 | | Transfer funds to cover contracted services | \$ 50,000 |
| 1367 | D | 11/1/2022 | 049.470 | | Move funds to cover construction costs | \$ 56,060 |
| 1368 | D | 11/2/2022 | 010.444 | | Move funds to cover controlled property expense | \$ 1,220 |
| 1369 | D | 11/3/2022 | 010.415 | | Move funds to cover professional services | \$ 22,000 |
| 1370 | D | 11/3/2022 | 010.422 | | Move funds to cover contracted services | \$ 5,205 |
| 1371 | D | 10/26/2022 | 054.473 | | Move funds to cover off road vehicle supplies | \$ 17,234 |
| 1372 | D | 11/7/2022 | 010.422 | | Move funds to cover contracted labor | \$ 1,822 |
| 1373 | D | 11/7/2022 | 010.415 | | Move funds to cover professional services | \$ 1,936 |
| 1374 | D | 11/8/2022 | 010.411 | | Move funds to cover travel/training | \$ 15,000 |
| 1375 | D | 11/10/2022 | 010.444 | | Move funds to cover maintenance contract | \$ 8,000 |
| 1376 | D | 11/14/2022 | 010.446 | | Move funds to cover contracted services | \$ 1,495 |
| 1377 | D | 11/15/2022 | 010.441 | | Move funds to cover advertising | \$ 2,000 |
| 1378 | L | 11/17/2022 | 010.600 | 010.996 | Reverse temporary Budget #1342 | \$ (240,378) |
| 1379 | L | 11/17/2022 | 010.430 | 010.996 | Transfer funds to cover Municipal Grant funds | \$ 19,965 |
| 1380 | D | 11/17/2022 | 010.426 | | Move funds to cover contracted services | \$ 465 |
| 1381 | D | 11/23/2022 | 492.249 | | Move funds to appropriate account | \$ 31,028 |
| 1382 | D | 11/23/2022 | 012.530 | | Move funds to cover controlled property exp and contracted services | \$ 11,735 |
| 1382 | D | 11/23/2022 | 012.533 | | Move funds to cover controlled property exp | \$ 3 |
| 1382 | D | 11/23/2022 | 012.537 | | Move funds to cover controlled property exp | \$ 3 |
| 1382 | D | 11/23/2022 | 012.538 | | Move funds to cover contracted services | \$ 10,500 |
| 1382 | D | 11/23/2022 | 012.540 | | Move funds to cover advertising | \$ 1,000 |
| 1382 | D | 11/23/2022 | 012.541 | | Move funds to cover postage | \$ 1,000 |
| 1382 | D | 11/23/2022 | 013.660 | | Move funds to cover education and advertising | \$ 152 |
| 1383 | D | 11/23/2022 | 012.530 | | Move revenues to appropriate grant account | \$ 149,701 |
| 1383 | D | 11/23/2022 | 012.540 | | Move revenues to appropriate grant account | \$ 41,857 |
| 1384 | D | 11/29/2022 | 010.542 | | Move funds to cover professional services | \$ 38,000 |
| 1385 | D | 11/30/2022 | 040.210 | | Move funds to cover annual license costs | \$ 156,343 |
| 1386 | D | 11/30/2022 | 012.545 | | Move funds to cover professional services | \$ 5,000 |
| 1387 | D | 12/1/2022 | 065.981 | | Move funds to appropriate account | \$ 23,568 |
| 1388 | D | 12/6/2022 | 010.491 | | Move funds to cover professional services | \$ 1,750 |
| 1389 | D | 12/6/2022 | 040.210 | | Move funds to cover equipment purchase | \$ 179,357 |

TAX COLLECTOR'S MONTHLY REPORT

The Tax Collector provided Commissioners with the following detailed written report regarding taxes collected during *November 2022*.

TOTAL TAXES COLLECTED NOVEMBER 2022

| YEAR | AMOUNT-REAL | AMOUNT-GAP | COMBINED AMT |
|-------------|----------------|------------|-----------------------|
| DEF REV | \$0.00 | \$0.00 | \$0.00 |
| 2022 | \$2,837,201.88 | \$1,740.93 | \$2,838,942.81 |
| 2021 | \$45,603.88 | \$489.51 | \$46,093.39 |
| 2020 | \$14,584.07 | \$73.77 | \$14,657.84 |
| 2019 | \$2,851.13 | \$0.00 | \$2,851.13 |
| 2018 | \$1,358.34 | \$0.00 | \$1,358.34 |
| 2017 | \$1,022.55 | \$0.00 | \$1,022.55 |
| 2016 | \$556.10 | \$0.00 | \$556.10 |
| 2015 | \$516.85 | \$0.00 | \$516.85 |
| 2014 | \$274.48 | \$0.00 | \$274.48 |
| 2013 | \$230.13 | \$0.00 | \$230.13 |
| 2012 | \$0.00 | \$0.00 | \$0.00 |
| | | | <u>\$2,906,503.62</u> |
| TOTALS | \$2,904,199.41 | \$2,304.21 | \$2,906,503.62 |
| DISCOUNT | (\$13.31) | | |
| INTEREST | \$10,657.30 | \$16.45 | |
| TOLERANCE | \$1.66 | \$0.10 | |
| ADVERTISING | \$182.00 | | |
| GARNISHMEN | \$494.82 | | |
| NSF/ATTY | \$131.18 | \$0.00 | \$15.06 |
| LEGAL FEES | \$4,306.53 | | |
| TOTALS | \$2,919,959.59 | \$2,320.76 | |
| MISC FEE | \$287.96 | | GRAND TOTAL |
| TAXES COLL | \$2,920,247.55 | | \$2,922,568.31 |
| DEFRED REV | \$0.00 | | \$15.06 |
| | \$2,920,247.55 | | <u>\$2,922,583.37</u> |

TOTAL TAXES UNCOLLECTED NOVEMBER 2022

| YEAR | AMOUNT-REAL | AMOUNT-GAP | COMBINED AMT |
|-------------------|-----------------|--------------|-----------------|
| 2022 | \$35,968,786.95 | \$146,111.12 | \$36,114,898.07 |
| 2021 | \$1,010,389.10 | \$90,426.35 | \$1,100,815.45 |
| 2020 | \$654,274.70 | \$46,914.32 | \$701,189.02 |
| 2019 | \$627,449.06 | \$0.00 | \$627,449.06 |
| 2018 | \$324,942.54 | \$0.00 | \$324,942.54 |
| 2017 | \$208,451.50 | \$0.00 | \$208,451.50 |
| 2016 | \$153,604.99 | \$0.00 | \$153,604.99 |
| 2015 | \$124,806.26 | \$0.00 | \$124,806.26 |
| 2014 | \$127,073.81 | \$0.00 | \$127,073.81 |
| 2013 | \$95,328.89 | \$0.00 | \$95,328.89 |
| 2012 | \$0.00 | \$0.00 | \$0.00 |
| | | | <u>\$0.00</u> |
| TOTAL UNCOLLECTED | \$39,295,107.80 | \$283,451.79 | \$39,578,559.59 |

TAX ABATEMENTS AND SUPPLEMENTS

The Tax Assessor provided Commissioners with a detailed written report regarding tax abatements and supplements during *November 2022*. The monthly grand total for tax abatements was listed as (\$852.26) and the monthly grand total for tax supplements was listed as \$39,198.80.

FINANCE DEPARTMENT: BUDGET AMENDMENT (BNA #026)

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, *approve the following budget amendment:*

| <u>Account Number</u> | <u>Project Code</u> | <u>Department/Account Name</u> | <u>Increase</u> | <u>Decrease</u> |
|-----------------------|---------------------|---|-----------------|-----------------|
| 496.252.4.980.44 | | Cap Proj-BRGW Improv/Contributions fm Reim Resolu | \$275,000.00 | |
| 496.252.5.990.00 | | Cap Proj-BRGW Improv/C-O Other Improve | \$275,000.00 | |

Explanation of Revisions: Budget allocation for \$275,000 in state funds for Broad River Greenway improvements.

SOCIAL SERVICES: BUDGET AMENDMENT (BNA #027)

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, *approve the following budget amendment:*

| <u>Account Number</u> | <u>Project Code</u> | <u>Department/Account Name</u> | <u>Increase</u> | <u>Decrease</u> |
|-----------------------|---------------------|--|-----------------|-----------------|
| 010.497.4.350.00 | 08300-P432 | TACC/State Government Grants | \$38,702.00 | |
| 010.497.5.700.00 | 08300-P432 | TACC/Grants | \$38,702.00 | |
| 011.508.4.350.00 | 08300-P432 | Income Maintenance/State Government Grants | \$25,438.00 | |
| 011.508.5.700.00 | 08300-P432 | Income Maintenance/Grants | \$25,438.00 | |

Explanation of Revisions: Budget allocation \$64,140 in additional funds received for FY 23 Rural Operating Assistance Program (ROAP) from the state for TACC.

HEALTH DEPARTMENT: BUDGET AMENDMENT (BNA #028)

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, ***approve the following budget amendment:***

| <u>Account Number</u> | <u>Project Code</u> | <u>Department/Account Name</u> | <u>Increase</u> | <u>Decrease</u> |
|-----------------------|---------------------|--------------------------------------|-----------------|-----------------|
| 012.535.4.410.00 | | Health Promotions/Local-Other Grants | \$14,000.00 | |
| 012.535.5.121.00 | | Health Promotions/Salaries-Wages Reg | \$13,000.00 | |
| 012.535.5.581.00 | | Health Promotions/Awards-Incentives | \$1,000.00 | |

Explanation of Revisions: Budget allocation for \$14,000 in funds awarded in partnership with a research team from UNC-Chapel Hill to participate in the Med-South Lifestyle Study Program. These funds will be budgeted in salary to be used towards staff time utilized in training requirements set out by the CDC/UNC Center for Health Promotion and Disease Prevention.

SOCIAL SERVICES: BUDGET AMENDMENT (BNA #029)

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, ***approve the following budget amendment:***

| <u>Account Number</u> | <u>Project Code</u> | <u>Department/Account Name</u> | <u>Increase</u> | <u>Decrease</u> |
|-----------------------|---------------------|---|-----------------|-----------------|
| 070.706.4.430.00 | | DSS F/C Christmas/DSS F-C Christmas Account | \$5,000.00 | |
| 070.706.5.530.06 | | DSS F/C Christmas/DSS F-C Christmas Expense | \$5,000.00 | |
| 070.706.4.430.01 | | DSS Trust/DSS Trust Account | \$300,000.00 | |
| 070.706.5.530.07 | | DSS Trust/DSS Trust Acct Expense | \$300,000.00 | |

Explanation of Revisions: Budget allocation for \$305,000 for the DSS Foster Child Christmas and Trust Accounts per accounting standard change GASB 84.

SHERIFF'S OFFICE: BUDGET AMENDMENT (BNA #030)

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, ***approve the following budget amendment:***

| <u>Account Number</u> | <u>Project Code</u> | <u>Department/Account Name</u> | <u>Increase</u> | <u>Decrease</u> |
|-----------------------|---------------------|---|-----------------|-----------------|
| 070.744.4.430.00 | | Inmate Trust/Inmate Trust Account | \$700,000.00 | |
| 070.744.5.530.44 | | Inmate Trust/Inmate Trust Expense | \$700,000.00 | |
| 070.744.4.430.43 | | Inmate Commissary/Inmate Commissary Sales | \$175,000.00 | |
| 070.744.5.530.43 | | Inmate Commissary/Inmate Commissary Exp | \$175,000.00 | |

Explanation of Revisions: Budget allocation for \$875,000 in funds collected and paid out for the Inmate Trust accounts and Inmate Commissary accounts per accounting standard change GASB 84.

FINANCE DEPARTMENT: BUDGET AMENDMENT (BNA #031)

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, ***approve the following budget amendment:***

| <u>Account Number</u> | <u>Project Code</u> | <u>Department/Account Name</u> | <u>Increase</u> | <u>Decrease</u> |
|-----------------------|---------------------|--|-----------------|-----------------|
| 071.741.4.430.41 | | Fines/Forfeitures/Fines & Forfeitures Coll | \$1,200,000.00 | |
| 071.741.5.530.41 | | Fines/Forfeitures/Fines & Forfeitures Exp | \$1,200,000.00 | |

Explanation of Revisions: Budget for \$1,200,000 in Fines and Forfeitures collected from the Clerk of Court per accounting standards change GASB 84.

HEALTH DEPARTMENT: FINANCIAL ELIGIBILITY FEE SCHEDULE

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, ***to approve the updated Financial Eligibility Fee Collection Policy. (see highlighted changes):***

| | | | | | |
|--|--|--|--|--|--|
| CLEVELAND COUNTY DEPARTMENT OF PUBLIC HEALTH | | GUIDELINE/ PROCEDURE: Financial Eligibility/Fee Collection Policy | | MANUAL: Board of Health SUBJECT: Financial Eligibility/Fee Collection Policy | |
| NAME OF GUIDELINE | APPROVED BY: Health Director, Cleveland County Boards of Health and County Com's. | EFFECTIVE DATE: 2/1/99 | VERSION: FINAL | PAGE 1 OF 14 | |
| CCHD Financial Eligibility/ Fee Collection Policy | PREPARED BY: Alisa Leonard Leslie McSwain | DATE LAST REVISED: 11/08/2022 | DATE LAST REVIEWED: 11/08/2022 | | |

1.0 Policy:

Fees for Cleveland County Health Department ("Health Department") services are authorized under NC General Statutes 130A-39 provided: (1) they are in accordance with a plan recommended by the Health Director and approved by the Boards of Health and County Commissioners (Medicaid rate plus 25% unless cost is more than Medicaid rate, then cost plus 25%), and (2) unless they are not otherwise prohibited by law.

Public health services are increasingly expensive to provide. The Health Department serves the public interest best by assuring that all legally mandated public health services are made available and by providing as many recommended and requested public health services as possible for those citizens with greatest need. In the past, the concept of public health services has been that they are free to all. However, economic conditions have made it necessary for public health agencies to try to recoup some of the cost of services, whether it is from the patient or another third-party payer. Fees have become necessary to support the provision of services and maximize Health Department revenues. The entire population benefits from the availability of subsidized public health services; therefore, fees are considered appropriate.

Fees charged to an individual for Health Department services will be charged at an established rate that has been approved by the Health Director, Board of Health, and the Board of County Commissioners. Individuals may qualify for a sliding fee scale discount based upon income. Services will not be denied based solely on the inability to pay. All staff members involved in collection of fees for services shall consistently follow the established guidelines for fee collection through the statements addressed in this document and shall hold all client information confidential.

The Health Department provides services without regard to religion, race, national origin, creed, gender, parity, marital status, age, disability, sexual orientation, or contraceptive preference.

2.0 Programs Affected:

All clinical services should follow these guidelines.

3.0 Definitions:

None

4.0 Procedure:

PROGRAM GUIDELINES

Specific program guidelines should always be used to determine residency, income requirements, sliding fee scale discounts, patient charges and other program eligibility requirements. Health department staff should always be alert regarding changes in program guidelines.

FINANCIAL ELIGIBILITY

The financial eligibility determination process is designed to assess a patient's ability to pay for services rendered by the Cleveland County Health Department. By having a written policy, screening procedures are consistent and standardized for all interviewers. Eligibility for services is determined by residency, family size and income information. Financial eligibility must be determined prior to or at the time the patient receives new services and should be updated annually or when there is a change.

Definition of Family/Economic Unit

The Health Department uses the Economic Unit to define a family. Under this method, a family is defined as a group of related or non-related individuals who are living together as one economic unit. Individuals are considered members of a single family or economic unit when their production of income and consumption of goods are related. Also, groups of individuals living in the same house with other individuals may be considered a separate Economic Unit. (Example: Some patients live in a setting with a number of family members, sometimes distantly related that make up the household. If they share daily expenses such as food, rent, utilities, etc, they constitute one Economic Unit. If the patient indicates that they share the expenses, and if confidentiality is not a factor, then the members of the Economic Unit would be considered as family members.)

Financially dependent relatives under the age of 19 with no income who live in the patient's household may also be counted as family members. Persons living in the household 18 years and older that are self-supporting should be considered as a family of one.

Teens and others seeking “confidential” services, regardless of age and depending on the reason for the confidential visit (i.e., parents are not aware of visit, domestic violence, etc.), should be considered as a family unit of one and income determined on the basis of the patient’s resources alone.

A pregnant woman is counted as two in determining a family size unless it is in conflict with the clients cultural, religious, and/or beliefs. Pregnant women expecting twins can be counted as three.

A foster child assigned by the Department of Social Services is a family of one. The income received from DSS for the child should be the only income recorded.

Definition of a New Patient

A new patient is a patient who has not received any professional services from a physician/qualified health care professional in the Health Department within the past 3 years for a billable visit that includes some level of evaluation and management service coded as a preventive service using 99381-99387 or 99391-99397, or an evaluation and management service using 99201-99205 and 99211-99215. If the patient’s only visit to the Health Department is WIC or immunizations without one of the above codes, it does not affect the designation of the client as a new client – the client can still be NEW.

Identification Requirements - Also see HIPAA Policy/Procedure for Verification of Identification, Merging Records and Name Changes

Each patient should establish their identity by providing a form of identification such as a birth certificate, social security card, driver’s license, military identification, passport, visa, green card, etc.

Residency Requirements

Residency requirements may vary according to the type of service provided and the program criteria. In determining residency, the interviewer should consider where the patient, or parent of a minor patient, resides at the time of service and where they intend to make their permanent home.

Program Residency Criteria:

General Clinic, Immunizations, Sexually Transmitted Diseases, Tuberculosis, Pharmacy, Family Planning, Communicable Disease, HIV/AIDS, Diabetic Screening: No residency requirement.

~~Eye Clinic~~, Diabetic Clinic, Care Management for High Risk Pregnancy (CMHRP), Care Management for At Risk Children (CMARC), Postpartum & Newborn Home Visits: must be Cleveland County resident.

Maternal Health Clinic, Dental Clinic, Child Health Clinic, Breast and Cervical Cancer Control Program (BCCCP), Wisewoman, Women, Infants and Children’s Program: must be resident of North Carolina.

Documentation of Income

Patients will be asked to provide documentation of income. BCCCP, Wisewoman, and Diabetic Clinic patients will be required, per Cleveland County Health Department guidelines, to provide documentation of income prior to receiving services. If BCCCP, Wisewoman, and Diabetic Clinic do not provide income the Program Supervisor will be contacted for decision for patient to be seen. ~~Eye Clinic patients will also be required to provide documentation of income to establish eligibility for services prior to scheduling an appointment.~~ No other patients will be refused services when presenting for care based on lack of documentation; however, if documentation is not provided, the patient should be informed (Declaration of Income-Attachment 1) on the date of service that they are responsible for the full amount of the fees for services rendered. The patient will be allowed to provide documentation within five business days in order to base the previous 100% charge on a sliding fee. If no documentation is produced, then the charge stands at 100% for that visit. ~~Family Planning patients who choose not to provide documentation of income must sign a release stating that they are choosing not to participate and agree that they will be charged the full fee for services if information is not provided within five business days.~~ Except for Family Planning services. If a Family Planning patient’s income cannot be verified after reasonable attempts to do so, charges are to be based on the patients self-reported income. If we have lawful access to other valid means of income verification because of the patient’s participation in another program we may use this data rather than re-verify income or rely solely on patient’s self-report. Once income is documented, it may be used for multiple programs. All confidential information on documents showing income, including social security numbers and bank account numbers, will be kept strictly confidential.

Acceptable forms of income documentation are listed below and may be emailed to an established clerical email **account**:

- a) A Current Paycheck stub.
- b) W-2 form, copy of complete tax return and attachments from the most recent calendar year
- c) A written statement from the patient’s employer when no other documentation is available.
- d) A Current Bank statement.

When documentation of income has been verified, the interviewer should enter the information on the Household tab in the Patagonia Electronic Health Record (EHR). Previous income history can be viewed on the Sliding Fee tab in the Declaration of Income area.

Patients that say they have applied for Medicaid should also be income screened in the event that Medicaid is not approved. They should be informed at the time of the visit what charges they will be responsible for if Medicaid is not approved. If their Medicaid application is approved and is retroactive to the date of service, charges will be changed from private pay and Medicaid will be billed

Documentation of income will not be required for mandated services such as Sexually Transmitted Diseases, Tuberculosis, Communicable Diseases, and state supplied Immunizations since no charge will be assessed to the patient for these services, or for School Based Health center services since they are covered under a contract with the school system.

Women, Infants and Children's Program (WIC) state software system Crossroads handles all documentable eligibility within the system.

The North Carolina Division of Employment Security database may be used to verify income of applicants.

Determination of Gross Income

Gross income is the total of all cash income before deductions for income taxes, employee's social security taxes, insurance premiums, bonds, etc. For self-employed applicants (both farm and non-farm) this means net income after business expenses. In general, gross income includes:

- a) Salaries and wages including overtime pay, commissions, fees and tips
- b) Earnings from self-employment
- c) Public Assistance money
- d) Unemployment compensation
- e) Alimony Work First and child support (cannot be counted for Family Planning patients) payments received
- f) Military allotments including re-enlistment and jump pay
- g) All Social Security benefits
- h) Veteran's Administration benefits
- i) Supplemental Security Income (SSI benefits)
- j) Retirement and pension payments
- k) Worker's compensation
- l) Regular contributions from individuals not living in the household
- m) Income tax refunds
- n) Allowances paid to the patient for basic living expenses such as housing and utilities
- o) All other sources of cash income except those specifically excluded
- p) Educational stipends in excess of the cost of tuition and books.
- q) Lawn maintenance and housekeeping, as a business
- r) Christmas bonuses, prize winnings
- s) [Print Wage and quarterly report out of NC Employment Security Commission portal](#)

The following sources of income should be excluded from sources of income:

- a) Irregular income that children earn from babysitting, mowing lawns, etc.
- b) Inheritances
- c) WIC vouchers
- d) Food stamps
- e) Payments under the Low-Income Energy Assistance Act
- f) School lunches
- g) Rent or fuel received in lieu of wages
- h) Military/in-kind housing assistance
- i) Life insurance proceeds or one-time settlements. On the other hand, if a liability settlement is to be paid in regular installments, this money would be counted as income
- j) Gifts
- k) Proceeds from sale of an asset
- l) Payments received under the Jobs Training Partnership Act
- m) Payments to volunteers under T 7 (VISTA) and T II (RSVP, foster grandparents and others) of the Domestic Volunteer Service Act of 1973.

Zero Income

If the patient reports zero income or very little income, the interviewer should question the patient further and must include an explanation of how the family is meeting the financial demands of basic daily living. In most cases, a statement of zero income would only be acceptable when the applicant lives on income from sources such as food stamps, etc. A third party, such as the North Carolina Division of Employment Security, landlord or whoever is assisting patient with household expenses, should verify income of a patient (Attachment 2). If the stated income is found to be untrue, the patient may be responsible for charges incurred based on the applicable sliding fee scale.

Family Planning patients who report they have no income are not required to provide a statement of zero income but may be asked how they pay for living expenses. Income of persons who support the client financially may be verified.

Verification of Income

Each patient will be required to sign a Declaration of Income Form (Attachment 1) verifying that the financial information supplied to the interviewer is true and accurate. This statement will also include an authorization giving the Cleveland County Health Department the right to verify this information and authorize payment of benefits to Cleveland County Health Department. On the Household Tab the date verified field must be changed **for every person listed** to the current date anytime income has changed or if completing the annual screening. A Declaration of Income Form must be completed annually or if income changes occur. A Declaration of Income Form must be signed and dated by the patient, interviewer and/or interpreter when applicable. The Declaration of Income Form will become part of the patient record

Note: If a patient is considered “confidential,” it will be documented in Patagonia Health record.

Computation of Income

The family’s gross income must be used to determine eligibility of services at the time of the application for services. Gross family income, or income before deductions, is computed by adding money earned by family members during a 12-month period. Income review of the previous 12 months may be performed by the following methods:

- a) Initial income will be computed by taking the patient’s declared income and if paid weekly multiply by 52, if paid bi-weekly multiply by 26, semimonthly multiply by 24, and monthly multiply by 12.
- b) Following the initial financial eligibility determination--if there has been a change to income and/or employment, recalculate annual income with step (a) and have patient sign a new Declaration of Income.
- c) **Following the initial financial eligibility determination--if no change has occurred, there is no requirement to sign a Declaration of Income unless this is the annual review**
- d) **If patient is not employed or has changed jobs in the last 12 months, use the Irregular Income Formula or Six Months Formula.**

Unemployed today= last 6 months income + project unemployment (if applicable) or zero if client won’t receive unemployment. If not unemployment compensation as client how they will support themselves.

Employed today but unemployed last 6 months- Did the client receive unemployment the last 6 months? If no, record as zero and then project 6 months forward at current income. This will allow to determine income for client for a 12 month period.

SLIDING FEE SCALE

The sliding fee scale is an alternate fee scale that is developed by the North Carolina Division of Public Health so that a patient’s inability to pay is not a barrier to receive services. A schedule of discounts to fees charged is required for individuals with family incomes between 101% and 200% or 250% of the Federal poverty level. The Federal poverty level used for Family Planning is 250%. Fees must be waived for individuals with family incomes below 100% of the Federal poverty level and are determined by the Local Health Director. The sliding fee scale is used for most health department fees; however, the percent of discount may vary according to program guidelines established by the North Carolina Division of Public Health.

FEES

Fees are subsidized by grants, private donations, state and federal funds, and local contributions.

The Health Department will determine fees based upon cost of services, and fees are equal to or greater than the Medicaid rate. For non-mandated services, flat rate fees may be established for a service based on cost without discrimination to all patients. Fees will be approved by the Board of Health and Cleveland County Board of County Commissioners and giving the Local Health Director the latitude to adjust fees if changes occur in cost or in the Medicaid/Medicare rates. If necessary, in order to provide efficient continuity of care, the Health Director may approve a new fee for current CPT code/HCPCS procedures that are ordered by clinicians. Clients will be given a receipt when fees are paid at each visit, a statement of fees assessed for services and balance owed.

Laboratory Fees

When laboratory specimens are sent out to a reference lab for analysis, the reference lab should be given information for the purpose of billing of the third-party Medicaid and Medicare payers for analysis of the specimen. Self-pay and Commercial insurance will be billed at our negotiated rates with reference lab, and the sliding fee will be used where required. Patients should be informed at the time of the clinic visit that a specimen is being sent to an outside lab for analysis. They should also be informed that they could receive an invoice from the reference lab if their third-party payer does not cover the entire charge.

When laboratory specimens are collected and analyzed at the patient’s request rather than program protocol, the patient may be assessed an additional fee for this service and as such be responsible for the full charge.

Immunizations

Vaccines provided by the State to local health departments for administration shall be administered at no cost to the patient (N.C.G.S. § 130A-133(b)). However, a fee for other immunizations requested, but not required, such as vaccines for foreign travel or rabies will be charged to the patient along with an administration fee to cover cost of supplies used and staff time. Fees for these services are paid in full by the patient at checkout. If a patient has any form of third-party

reimbursement, the payer must be billed, unless confidentiality is a barrier. Medicaid will be billed as the payer of last resort.

Vaccines that are required for employment of Cleveland County employees will be charged to County departments based on cost of the vaccine. No administration fee will be assessed to the departments.

Vaccines plus administration fees that are required for employees of Contracted Payers will be billed to the employer.

Medical Record Fees – Also see Policy/Procedure to Release/Obtain Patient Information

In accordance with the NC General Statutes 90-411, a charge to cover the costs incurred for searching, handling, copying, and mailing medical records to the patient or the patient's designated representative may be administered. The maximum fee for each request shall be seventy-five cents per page for the first 25 pages, and fifty cents per page for pages 26 through 100, and twenty-five cents per page in excess of 100 pages, provided that the health care provider may impose a minimum fee of up to ten dollars. A fee shall not be imposed for request of copies of medical records made on behalf of an applicant for Social Security or Supplemental Security Income disability. The policy of the Cleveland County Health Department is not to impose a record fee for copies for continuation of care. The medical record fee may be adjusted according to a change in legislation.

Returned Check Fee

As allowed by N.C.G.S. § 25-3-506, if a check is returned for non-sufficient funds (NSF) a \$25.00 service charge will be assessed. Notification of the returned check will be made by a personal telephone call or certified mail. The patient's original fee will be reinstated until collection is made for the returned check and NSF fee. Payment should be made by cash or money order. Once the NSF has been paid, the original check will be returned to the patient. If payment is not received in 30 days, further follow-up will be done by the Cleveland County Finance Department. Exception: Notification of returned checks for Family Planning patients will be discussed with the patient during a clinic visit in order to avoid breach of confidentiality and conflict with guidance from the Office of Population Affairs for recipients of Title X funds.

SOURCES OF REIMBURSEMENT

Sources of reimbursement should be reviewed with the patient at each visit. An "Authorization for Assignment of Benefits" A Declaration of Income (Attachment 1) statement should be signed and dated at the initial visit and updated and signed annually thereafter or whenever there is a change in income. If there is a change in the insurance provider or other third-party reimbursement the insurance tab should be updated in Patagonia.

Private Pay

Patients with a household income above the 100% pay level of the sliding fee scale must be responsible for the full amount of the charges rendered.

Insurance/Medicare

Patients with a third-party source of coverage such as Insurance or Medicare should disclose this information and give a copy of their card to the interviewer. Bills will be submitted to these sources for payment. Co-payments will be the responsibility of the patient and will not be discounted since they are part of the patient's insurance plan. If there is a balance after the insurance has paid, other than the co-payment, the patient who qualifies will be responsible for the balance after the sliding fee scale adjustment. Third parties that are authorized, or legally obligated, to pay for clients at or below 100% of the Federal Poverty Level Billed will not have any discount applied to charges.

Patients should be asked if the Health Department is in-network or out-of network with their particular insurance plan. Patients with private insurance in which we are an out-of network provider will be encouraged to use their in-network provider. All patients with private insurance should sign a Private Insurance Advance Notice Form (Attachment 3). However, if services are provided to patients in which the Health Department is out-of-network or not listed as the primary provider, the patient will be responsible for the fee based on the sliding fee scale, if applicable.

Claims for payment of services provided will be filed with insurance companies for patients that have private insurance. If the claims are denied or left pending, the Health Department will research and refile claims as appropriate. After this, if the claim is not paid/resolved, the patient will be billed for the service based on the appropriate sliding fee scale.

Patients that present with Medicare coverage should be notified that if Medicare does not cover the service, the patient will be responsible for the expense. The employee should also explain to the patient why the service may be denied for coverage. An Advanced Beneficiary Notice (ABN) should be completed and signed by the patient. A copy of the form should be given to the patient and a copy kept scanned in the medical record (Attachment # 3).

If a Family Planning patient gives consent to bill insurance, the clerk should explain that an Explanation of Benefits will be sent by the insurance company to the address listed with the insurance company. Patients should always sign the Private Insurance Advance Notice. Family Planning patients will not be charged more in copayments, deductibles, or other fees than they should pay according to the sliding fee scale.

Medicaid

All Maternity patients shall be referred to the eligibility specialist for evaluation and documentation of income screening. Maternal Health patients that are determined eligible to have Presumptive Eligibility for Medicaid, will have Medicaid coverage for approximately two months (depending upon when they are screened during the month). Patients should be informed that if they do not officially apply for Medicaid at the Department of Social Services, they will be responsible

for charges after Presumptive Eligibility ends. However, patients are not required to apply for Medicaid.

For those patients who have both private insurance and Medicaid, the private insurance is considered to be primary. After receipt of the explanation of benefits and payment from the insurance carrier, the balance may be filed for Medicaid payment.

Medicaid eligible patients will not be responsible for charges not covered denied by Medicaid payments.

Grants

Some grants are designed to pay for specific fees such as medical and dental fees. When patients meet the criteria of the grant, funding may be transferred from the grant revenue to cover the fee charged to the patient.

COLLECTIONS

The policy of the Cleveland County Health Department is to comply with N.C.G.S. § 130A-4.1(b), which requires that all funds collected be budgeted and expended to further the objectives of the program that generated the income.

Clinic Visit

Clerical personnel will have the primary responsibility to inform patients of all charges incurred during clinic visit. Patients should be informed of the specific items that make up the charge such as office visit, lab work, supplies, etc. Clinicians may also disclose charges to patients in order to emphasize the importance of payments. Full payment will be solicited verbally and expected at the time service is rendered. Patients will be informed of their entire account status at each clinic visit or contact. At the clinic visit, statement information given to the patient will include full charges, sliding fee amounts, payments on accounts and the total balance due.

For any balance due a Patient Payment Agreement should be signed and this should be updated with additional charges as they are incurred. A copy is provided unless patient refuses with no identifying information.

The receipt of payments that are not insurance co-payments for the current service will be posted to the oldest outstanding charge.

Statements

Patients with an active account will be mailed a computer-generated statement on an every-other-month basis (Attachment 5).

Statements for confidential services will not be mailed to patients who have requested no contact by mail; however, in those cases discussion of payment of outstanding debts shall occur at the time service is rendered.

Debt Set-Off

As authorized by Chapter 105A of the North Carolina General Statutes, the Health Department will utilize the North Carolina Government Debt Set-Off Program as an avenue to enhance collections and reduce accounts receivable. Amounts that are 60 days past due and \$50.00 delinquent, or greater, will be sent a letter informing them of our intention to send their debt to the North Carolina Department of Revenue. If payment is not received after 30 days, the health department will enter the client information into a debt set off program through a clearinghouse to the North Carolina Department of Revenue for collection by applying the past due amount against any income tax refund, or lottery winnings, to which the patient may be entitled. Specific policies and procedures of the Debt Set-Off Program to notify patients of the debt set-off and their right of appeal (Attachment 6) will be followed. Once the debt has been sent to the Clearinghouse, the Health Department will no longer accept payments for that debt.

SPECIAL FAMILY PLANNING ISSUES

Since the Health Department receives funding from Title X, local family planning programs must address patient preferences and concerns, contain costs while assuring quality care, and assure compliance with Title X Guidelines. Medicaid reimburses the Cleveland County Health Department for 340B drugs per NC Medicaid and Health Choice state policy, which states that "providers billing for 340B drugs shall bill the cost that is reflective of their acquisition cost. Providers shall indicate that a drug was purchased under a 340B purchasing agreement by appending the "UD" modifier on the drug detail." Medicaid does not collect rebates on claims from the Health Department.

Chronic Pill Abusers

Patients must take responsibility for their own birth control supplies. If a patient has been established as a chronic abuser of supplies (has had replacement pills given three times), and is a non-Medicaid client, one of the following options may be utilized:

- a) Provide the patient with foam and condoms
- b) Provide the patient with a prescription for the pills

Medicaid patients that are determined to be chronic pill abusers may not be charged for replacement pills. However, these patients may be limited to one package of pills per visit to prevent continued abuse.

Expensive Forms of Contraception

Local health departments must assess their resources to determine the contraception methods that they can offer. Title X requires that all projects offer a broad range of acceptable and effective medically approved family planning methods and services either on site or by referral. If resources are limited, an alternative, less expensive form of contraception

may be offered. If the patient persists in her request for expensive forms of contraception that are not available, she may be given a prescription and list of providers who offer the requested method of contraception. It should be made clear that if the patient chooses to access one of these providers, she will be doing so at her own expense.

Title X funded providers must not discriminate on the basis of a patient's ability to pay. The choice of contraceptive method should be based on what is best for each individual patient taking into consideration the preferences of the patient. However, as previously mentioned, the provider may have to substitute a less expensive method due to the agency's financial situation.

Family Planning patients who are unable to pay, for good cause, for Family Planning services may have fees waived by the Nursing Director or Financial Services Director.

SPECIAL SCHOOL HEALTH ISSUES

A portion of the amount contracted with Cleveland County Schools for school nursing and school based health center services will be used to pay for school based health center services provided to uninsured or underinsured students.

When school employees are seen for a billable service in one of the school-based health centers, their third-party insurance source should be billed. Co-payments, co-insurance and deductibles not paid by the third party, will be billed to the school staff member just as other health department clinic services are billed.

COMMUNITY ORGANIZATION FOR DRUG ABUSE PREVENTION (CODAP)

CODAP services provides the Student Options and Redirection (SOAR) program (formerly known as SOBIR – Student Options Begin with Intervention and Recovery) for students who violate substance abuse policies in Cleveland County Schools as well as students who violate underage drinking laws in the state of North Carolina. This program was formerly funded by a grant from the United Way of Cleveland County, Inc. and is now funded by community contributions to CODAP Services primarily from ABC community benefit funds generated from ABC stores in Shelby and Kings Mountain. CODAP staff members, to encourage use of the program as a prevention mechanism, deliver the services to students regardless of their ability to pay fees. ~~The cost of the program is \$40, due upon the completion of the program. A sliding fee scale based on annual income and the number of residents in a household based on a declaration from the parent/guardian of the program participant has been developed for the SOAR program (See attachment 8&9).~~

RESTRICTION OF SERVICES

As mentioned previously in the Financial Eligibility section, patients should be screened to determine financial eligibility at the time of the initial clinic visit. During the initial visit, if full pay is not rendered, expectations of reimbursement by the patient should be discussed and the patient should sign a ~~contract~~ Patient Payment Agreement agreeing to pay for the cost of services and any outstanding balances not covered by another source. If, on subsequent visits, the patient is found to be in breach of contract and refuses to make a good faith effort to pay even a small portion of the bill without good cause, service denials or restrictions may be applied unless restricted by state or federal laws or regulations. The Health Department's policy will be to review a patient's account when his/her account reaches \$200.00 and no payment has been made in three months. Service restrictions will be considered on a case-by-case basis. Family Planning services will not be subjected to any variation in quality of services or denied/restricted due to inability/unwillingness to pay, amount of outstanding balance, nor will they be required to meet with the health director as an attempt to collect the past due amount. Maternal Health patients who are already in the clinic may not be denied services as this would be considered abandonment.

BAD DEBT/WRITE-OFF POLICY

Delinquent accounts \$49.99, or smaller, will be written off at the end of each fiscal year, 12 months after the last date of Health Department service with no payments received. Anything \$50.00, or above, will be dealt with through North Carolina Debt-Set-Off procedures. Bad debts, which are determined to be uncollectible for reasons such as: bankruptcy or death, will be written off upon notification that the account is uncollectible; death certificate or bankruptcy papers. Items that are not eligible for NC Debt Set-Off, i.e.; patients without social security numbers will also be written off at this time. At no time will a patient be notified that their account has been written off as a bad debt.

An itemized list of uncollectible outstanding patient balances will be prepared at the end of the fiscal year for the Finance Director's review, and upon approval, fees may be written off as a bad debt. However, patients should never be informed that a debt has been written off.

The accounts receivable system shall indicate the written-off amount of the account.

DONATIONS

Voluntary donations from patients are permissible. However, patients will never be pressured to make donations, and donations must not be a prerequisite for the provision of services or supplies. Donations should be budgeted and expended for the purpose requested by the patient, so long as such purpose is lawful.

The receipt of a donation does not result in the waiver of the billing/charging requirements set forth above. There is no schedule of donations, bills for donations, or any other implied coercion for donations.

GRIEVANCE PROCEDURES

If a patient is unsatisfied with the services rendered or billing of said services, the patient should be referred to the Nursing Supervisor/Nursing Director for conflict resolution. If billing is in question, it may be necessary for them to consult with the accounting staff. The next course of action for the patient is appeal to the Health Director. The final decision will be documented in Patagonia on the patient's billing ledger regarding the date of service in question.

CONFIDENTIALITY

The confidentiality of patient information is of utmost concern to all Health Department staff. All employees are required to sign a statement assuring patient confidentiality. Employees who do not have a "need to know" or to access patient records are informed that it is not their right to view this information and are prohibited from doing so. With the passage and implementation of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 (Federal Register 45 CFR, Part 160 & 164), health care providers have addressed many issues such as electronic transactions, medical records security and patient rights. Health Department employees must comply with HIPAA regulations relating to privacy and confidentiality. The Health Department will continue to address these issues and implement any necessary changes to comply with amendments to HIPAA and its regulations.

5.0 **Appendices (Attachments):**

1. Declaration of Income Statement |
2. Third Party Confirmation Letter
3. Private Insurance Advance Notice
4. Advanced Beneficiary Notice (ABN)
5. Patient Statement
6. Debt Set Off Notification
7. Patient Payment Agreement
8. ~~SOBIR Agreement~~
9. ~~SOBIR Sliding Fee Scale~~

6.0 **Legal Reference/Reference:**

1. NC General Statute 130A-39
2. NC General Statute 130A-133(b)
3. Title V Guidelines
4. NC General Statute 90-411
5. NC Administrative Code .0205 c
6. NC General Statute 105A
7. Title X Guidelines
8. Federal Register 45 CFR, Part 160 & 164
9. NC General Statute 25-3-506


Tiffany Hansen
Health Director


11.8.2022

Date


Sara Karner, Chair
Cleveland County Public Health Board

11-8-22

Date


Elliot Engstrom
Deputy County Attorney

11/8/2022

Date


Kevin Gordon, Chair
Cleveland County Board of Commissioners

12/13/22

Date


Lucas Jackson
Finance Director

12/13/22

Date

History of Revisions:

Original Approved 2/1/99
Revised 11/9/99
Revised 2/1/03
Revised 3/9/05
Revised 10/24/05
Revised 6/1/06
Revised 5/07
Revised 9/10/07
Revised 1/8/08
Revised 5/15/08
Revised 11/9/10
Revised 11/10/11
Revised 7/1/12
Reviewed 11/13/12
Revised 11/12/13
Revised 10/14/14
Revised 11/10/15
Revised 11/8/16
Revised 7/1/18
Revised 11/12/19
Revised 11/02/2020
Revised 11/2/2021
Revised 11/8/2022

SHERIFF'S OFFICE: SERVICE WEAPON REMOVAL FOR DEPUTY TIM SIMS

Sheriff Alan Norman requested former Deputy Tim Sims be presented with his departmental service weapon. The service weapon requested to be removed from inventory is a Glock 9mm, Model 17, serial number BDKT-818 and County asset number 201258.

ACTION: Commissioner Hardin made the motion, seconded by Commissioner Whetstine, and unanimously adopted by the Board, *to approve the request to remove the service weapon from the County inventory and issue it to former Deputy Tim Sims.*

PLANNING DEPARTMENT: REQUEST TO SET A PUBLIC HEARING FOR TUESDAY, JANUARY 17, 2023 FOR CASE 22-28; RURAL RESIDENTIAL (RR) ZONING DISTRICT TEXT AMENDMENT

At their fall 2021 work session, the Board of Commissioners gave direction to Planning Staff to begin creating language to implement a new zoning district in the Cleveland County Unified Development Ordinance. The 2005 and 2021 Land Use Plans recommended the creation of a new zoning district that would give some flexibility of uses to the more rural parts of the County in an effort to preserve the rustic, agricultural, and scenic qualities of this area. This district would include residential uses and a few non-residential uses that helped preserve its rural character.

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, *to approve scheduling the public hearing as presented.*

PLANNING DEPARTMENT: REQUEST TO SETA A PUBLIC HEARING FOR TUESDAY, JANUARY 17, 2023 FOR CASE 22-29; RURAL HOME OCCUPATION TEXT AMENDMENT

At their fall 2021 work session, the Board of Commissioners gave direction to Planning Staff to begin creating language to expand the Rural Home Occupation ordinance in the Cleveland County Unified Development Ordinance. Currently, citizens can apply for a rural home occupation to be conducted in a building on the property in which he or she lives in the Residential (R), RM, and Rural Agriculture (RA) districts. The current ordinance has rules on the number of people who can work in the business, the number of vehicles, and outside storage. The proposed amendment creates a new type of rural home occupation (type B) that will be allowable only in the (RA) and newly proposed (RU) districts. The Type B rural home occupation expands the number of vehicles that can be used in conjunction with the business and the number of employees that can work there. Type B rural home occupations can only exist on parcels larger than five (5) acres. The intent is to accommodate larger home-based businesses on lots in rural districts.

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, *to approve scheduling the public hearing as presented.*

PLANNING DEPARTMENT: REQUEST TO SETA A PUBLIC HEARING FOR TUESDAY, JANUARY 17, 2023 FOR CASE 22-35; REQUEST TO REZONE PARCELS 10402 AND 10490 FROM LIGHT INDUSTRIAL (LI) TO RESIDENTIAL-CONDITIONAL USE (R-CU)

Parcels 10490 and 10402 are adjoining and located at 708 Battleground Ave between Grover and Kings Mountain. The property is approximately 60 acres and g Liquid Management LLC, is requesting to rezone Parcels 10402 and 10490 from Light Industrial (LI) to Residential Conditional Use (RCU) for the purposes of developing the property for multi-family residential. A site plan has been submitted showing how the property is proposed to be developed, including 11 apartment buildings and 203 townhome residential units. This area is along Hwy 216, a major four-lane corridor, and is surrounded by industrial uses. There is a single-family residence on the property. The Land Use Plan designates this area as Primary Growth which is ideal for the most intensive uses.

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, *to approve scheduling the public hearing as presented.*

LEGAL DEPARTMENT: ANIMAL SERVICES LICENSING ORDINANCE

The proposed ordinance would delay the implementation of the County's animal services licensing ordinance to July 1, 2023. The ordinance is currently set to take effect on January 1, 2023.

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, *to approve the ordinance delaying the implementation of Cleveland County's registration requirements for companion animals.*

AN ORDINANCE DELAYING THE IMPLEMENTATION OF CLEVELAND COUNTY'S REGISTRATION REQUIREMENTS FOR COMPANION ANIMALS

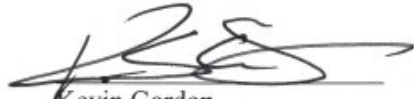
BE IT ORDAINED BY THE BOARD OF COMMISSIONERS OF THE COUNTY OF CLEVELAND IN REGULAR SESSION ASSEMBLED:

The following changes are hereby made to Chapter 3 of the Cleveland County Code of Ordinances. These changes shall be considered effective on the date that this ordinance is approved by the Cleveland County Board of Commissioners. Additions are indicated by underlined blue text, and deletion are indicated by ~~struck through red text~~.

Sec. 3-137. Registration requirement for companion animals.

...
(k) The requirements of this article shall take effect on ~~January~~ July 1, 2023.

Adopted this 13th day of ~~December~~ December, 2022.


Kevin Gordon
Chairman
Board of Commissioners

ATTEST:


Phyllis Nowlen
Clerk to the Board of Commissioners



LEGAL DEPARTMENT: ASSIGNMENT OF INCENTIVE AGREEMENT

Uniquetex, LLC intends to assign its incentive agreement with the County to its parent company, Uniquetex Holding Company, Inc. Per the incentive agreement, Uniquetex may not assign the agreement without the County's consent, and the County may not withhold its consent unreasonably.

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, *to approve the assignment of incentive agreement.*

COUNTY OF CLEVELAND

ASSIGNMENT OF
INCENTIVE AGREEMENT

STATE OF NORTH CAROLINA

This Assignment of Incentive Agreement (the "Assignment") is made as of the 13th day of December, 2022, by and between CLEVELAND COUNTY, NORTH CAROLINA, a political subdivision of the State of North Carolina, hereinafter referred to as the "County," UNIQUETEX, LLC, a North Carolina limited liability company, (the "Assignor"), and UNIQUETEX HOLDING COMPANY, INC., a North Carolina business corporation (the "Assignee").

WHEREAS, the County and the Assignor entered into an incentive agreement (the "Agreement") on April 5th, 2016;

WHEREAS, the Agreement provides that the Assignor may assign, sublet, or transfer its rights or interest under the Agreement with the consent of the County;

WHEREAS, the Agreement provides that the County shall not unreasonably withhold its consent to such an assignment;

WHEREAS, the Assignee is the parent company of the Assignor, and the Parties' original intent when executing the Agreement was to include the Assignee and its subsidiaries and related entities as parties, and the Parties' failure to do so was a mere scrivener's error; and

WHEREAS, it is reasonable for an LLC to assign an incentive agreement to its parent company; and

WHEREAS, it is reasonable for the Assignor to assign the Agreement to the Assignee and its subsidiaries and related entities to achieve the Parties' original intent when entering into the Agreement.

NOW, THEREFORE, the Parties agree as follows:

1. **Assignment.** Assignor hereby assigns and transfers all of its rights, duties, responsibilities, and interests under the Agreement to Assignee and Assignee's subsidiaries, affiliates, and related entities. Assignor is released and discharged from all of its duties and responsibilities under the Agreement, which are now the duties and responsibilities of Assignee and its subsidiaries, affiliates, and related entities.
2. **Consent.** The County consents to this Assignment as reasonable.
3. **Effect of Assignment.** Except as expressly modified in this Assignment, all terms of the Agreement remain unmodified and in full force.

IN WITNESS WHEREOF, the parties hereto, acting under authority of their respective governing bodies, have caused this Assignment to be duly executed, this the day and year first written above.

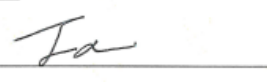
FOR THE COUNTY:

By: 
Kevin S. Gordon
Chairman
Board of Commissioners

ATTEST: 
Phyllis Nowlen
Cleveland County Clerk

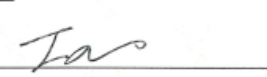


FOR ASSIGNOR:

By: 
Printed Name: Fang Wang

Printed Title: COO

FOR ASSIGNEE:

By: 
Printed Name: Fang Wang

Printed Title: COO

LEGAL DEPARTMENT: ARPA POLICIES

The county needs to adopt additional policies governing its use of Coronavirus State and Local Fiscal

Recovery (SLFRF) funds. These are:

- Eligible use policy
- Allowable costs policy
- Civil rights compliance policy

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously approved by the Board to, *adopt the eligible use, allowable costs and civil rights compliance policies. (a full copy of these policies is on file in the Clerk's office).*

COMMISSIONERS: 2023 COMMISSIONER MEETING SCHEDULE

The Clerk to the Board included the *2023 Commissioner Regular Meeting Schedule*, in Board Members' packets.

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously approved by the Board to, *approve the 2023 Commissioner Regular Meeting Schedule.*

2023 Cleveland County Board of Commissioners Meeting Schedule

- January 13 – Work Session
- January 17
- February 7
- March 21
- April 4
- April 18
- May 2
- May 16
- June 6
- June 20
- July 11
- August 1
- September 5
- September 19
- October 3
- October 17
- November 7
- November 14
- December 5
- December 19

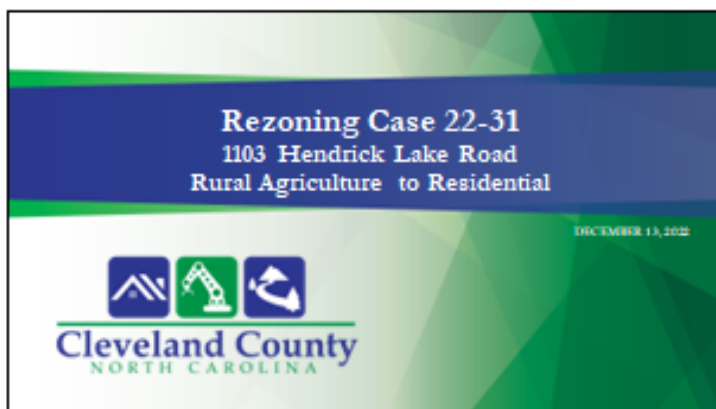
PUBLIC HEARING

PLANNING DEPARTMENT: CASE 22-31 REQUEST TO REZONE 1103 HENDRICK LAKE ROAD FROM RURAL AGRICULTURAL (RA) TO RESIDENTIAL (R)

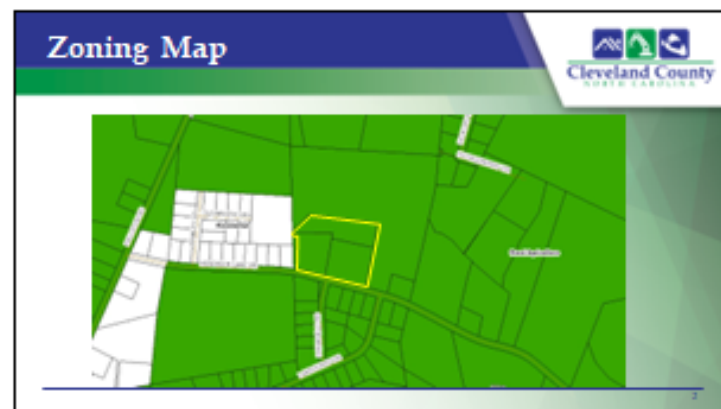
Chairman Gordon called Planning Director Chris Martin to the podium to present Planning Department case 22-31; request to rezone 1103 Hendrick Lake Road from Rural Agricultural (RA) to Residential (R). The applicant, Kimberly Holland is requesting to rezone parcels 35784, 35785, and 58603 from Rural Agriculture (RA) to Residential (R). Parcels 35784, 35785, and 58603 are located on Hendrick Lake Road, east of Fallston Road and

are approximately eight acres combined. In June 2021, the Board of Commissioners rezoned 31 parcels just west of the applicant’s parcels from Rural Agriculture (RA) to Residential (R). The surrounding area consists of mostly single-family residential uses and surrounding zoning is Residential and Rural Agriculture. The Land Use Plan designates this area as the County’s Secondary Growth Area.

The Planning Board voted unanimously to recommend approval of the requested zoning map amendment. The Board stated that the request was an extension of an already existing zone and that the uses in the Residential (R) district were compatible with surrounding existing uses. The Board also stated that the requested zoning district of Residential (R) was in conformity with the Land Use Plan’s designation as a Future Secondary Growth area. The following information and PowerPoint were presented to the Commissioners.



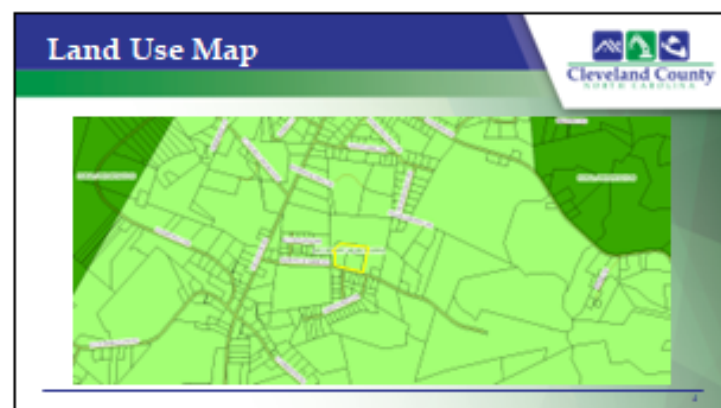
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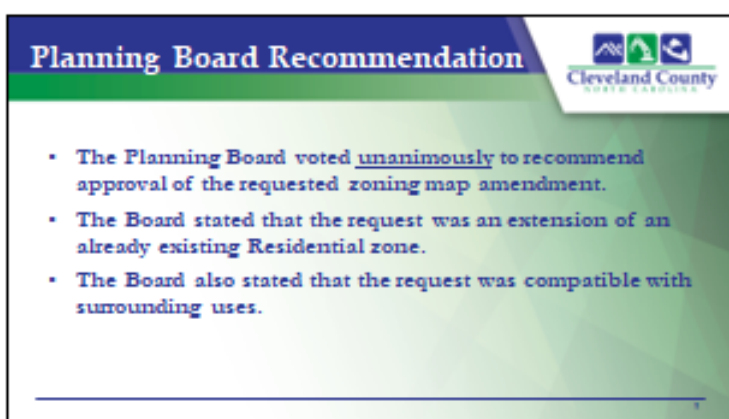
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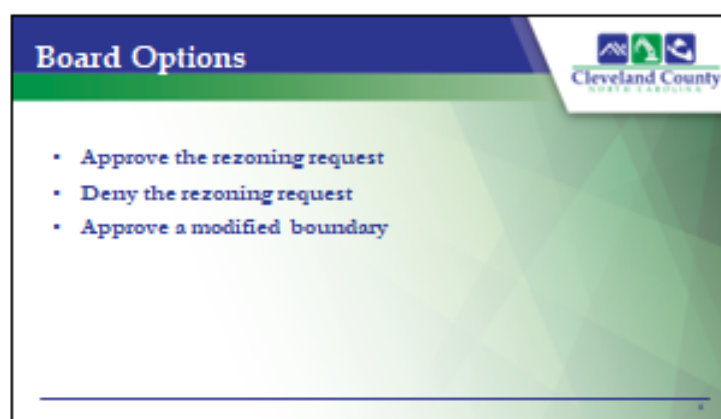
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4



5



6

Chairman Gordon opened the Public Hearing at 6:24 pm for anyone wanting to speak for or against Planning Department case 22-31; request to rezone 1103 Hendrick Lake Road from Rural Agricultural (RA) to Residential (R). (Legal Notice was published in the Shelby Star on Friday, December 2, 2022 and Friday, December 9, 2022).

Robert Williams, 814 E. Stagecoach Trl, Fallston – spoke in favor of the rezoning request advising he didn’t know the applicant or anything about the case but agreed with the Planning Board’s recommendation.

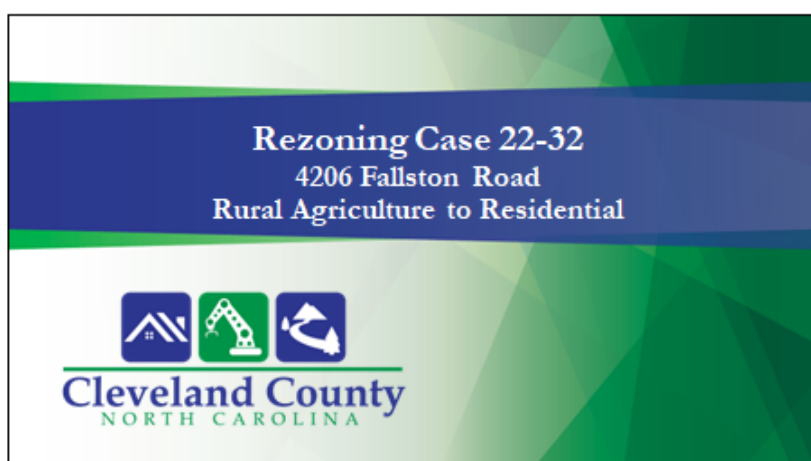
Hearing no further comments, Chairman Gordon closed the Public Hearing at 6:26 pm.

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Whetstine, and unanimously adopted by the Board to, *approve the request to rezone parcels 35784, 35785, and 58603 at 1103 Hendrick Lake Road from Rural Agricultural (RA) to Residential (R) as it is compatible with surrounding existing uses and is in conformity with the Land Use Plan’s designation as a Future Secondary Growth area.*

PLANNING DEPARTMENT: CASE 22-32 REQUEST TO REZONE 4206 FALLSTON ROAD FROM RURAL AGRICULTURAL (RA) TO RESIDENTIAL (R)

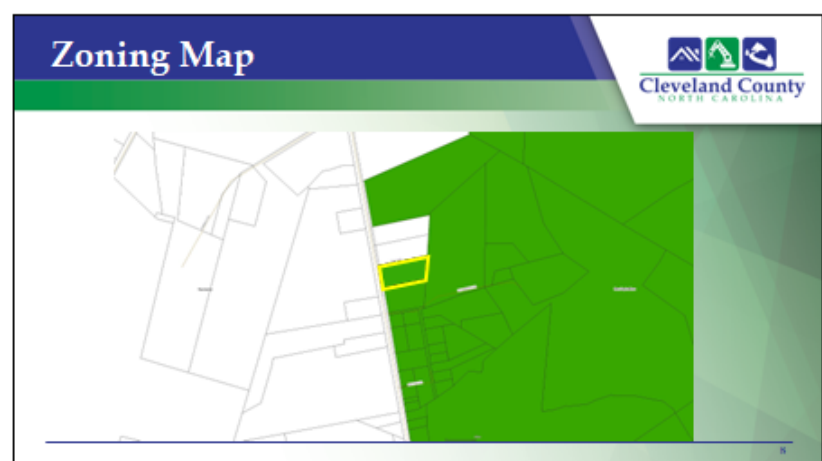
Planning Director Chris Martin remained at the podium to present case 22-32; request to rezone 4206 Fallston Road from Rural Agriculture (RA) to Residential (R). The applicant, Amy Boulanger, is requesting to rezone parcel 65342 which is approximately three acres, located at 4206 Fallston Road from Rural Agriculture (RA) to Residential (R). In October 2021 the Board of Commissioners rezoned two parcels just north of the applicant’s parcel from Rural Agriculture to Residential. The surrounding area consists of single-family residential uses and some commercial uses. Surrounding zoning is Residential and Rural Agriculture. The Land Use Plan designates this area as the County’s Secondary Growth Area.

The Planning Board voted unanimously to recommend approval of the requested zoning map amendment. The Board stated that the request was an extension of an already existing zone and that the uses in the Residential district were compatible with surrounding existing uses. The Board also stated that the requested zoning district of Residential was in conformity with the Land Use Plan’s designation as a Future Secondary Growth area. The following information and PowerPoint were presented to the Commissioners.



Rezoning Case 22-32
4206 Fallston Road
Rural Agriculture to Residential

Cleveland County
NORTH CAROLINA



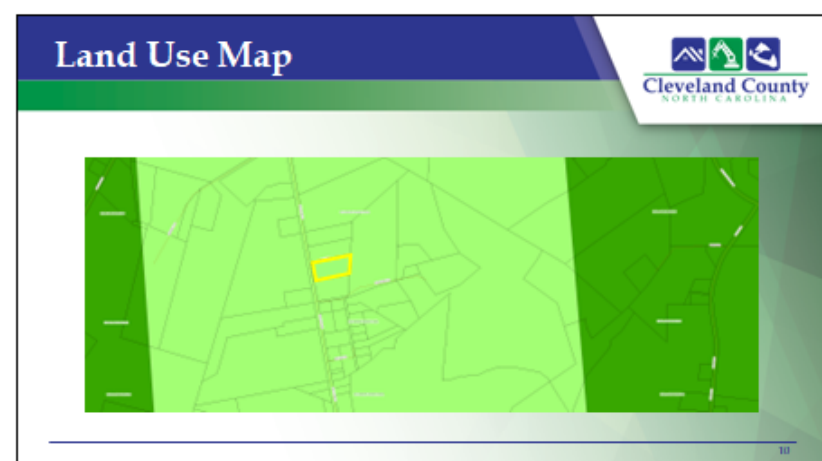
Zoning Map

Cleveland County
NORTH CAROLINA



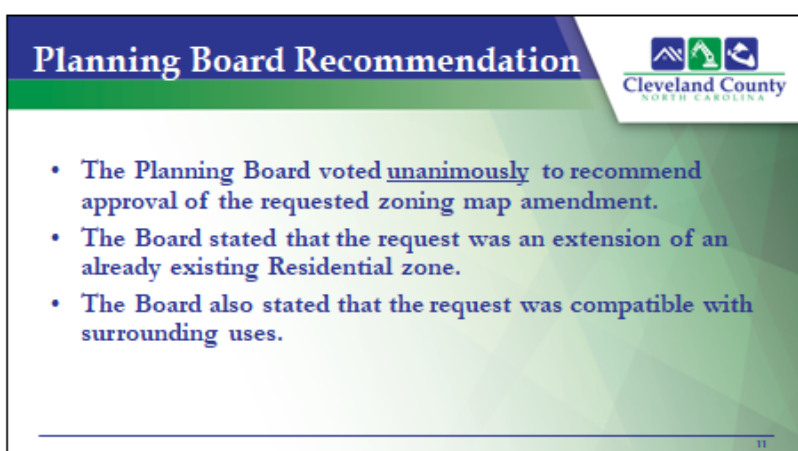
Aerial Map

Cleveland County
NORTH CAROLINA



Land Use Map

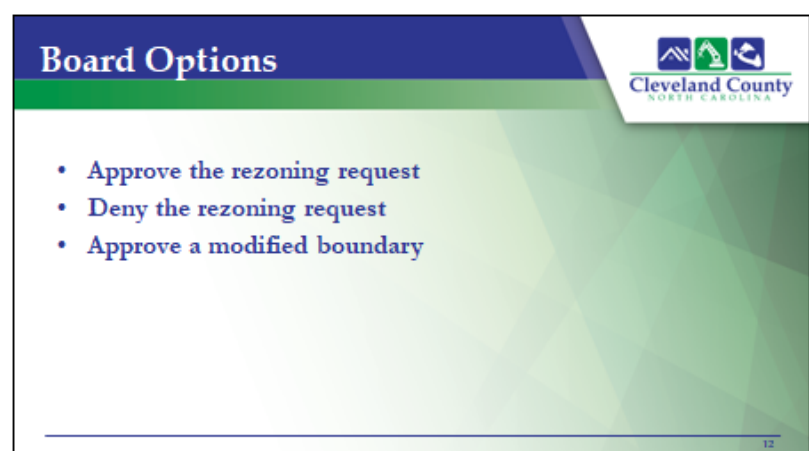
Cleveland County
NORTH CAROLINA



Planning Board Recommendation

Cleveland County
NORTH CAROLINA

- The Planning Board voted unanimously to recommend approval of the requested zoning map amendment.
- The Board stated that the request was an extension of an already existing Residential zone.
- The Board also stated that the request was compatible with surrounding uses.



Board Options

Cleveland County
NORTH CAROLINA

- Approve the rezoning request
- Deny the rezoning request
- Approve a modified boundary

Chairman Gordon opened the Public Hearing at 6:28 pm for anyone wanting to speak for or against Planning Department case 22-32; a request to rezone 4206 Fallston Road from Rural Agriculture (RA) to Residential (R). *(Legal Notice was published in the Shelby Star on Friday, December 2, 2022 and Friday, December 9, 2022).*

Robert Williams, 814 E. Stagecoach Trl, Fallston – spoke in favor of the rezoning request advising he didn't know the applicant or anything about the case but agreed with the Planning Board's recommendation.

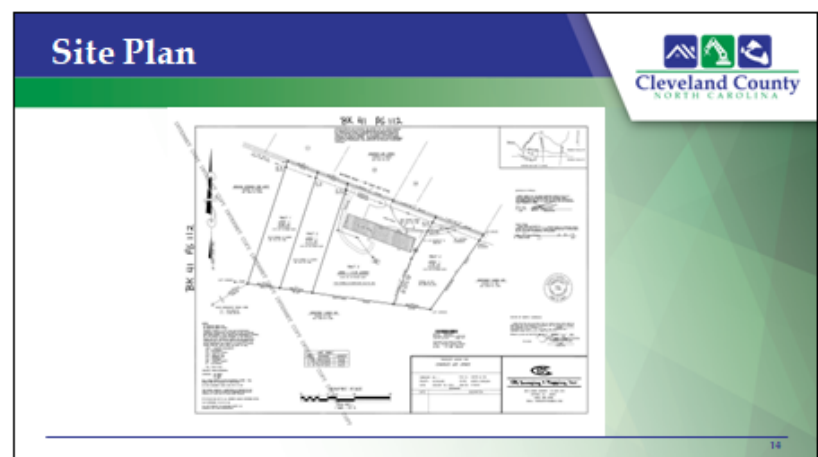
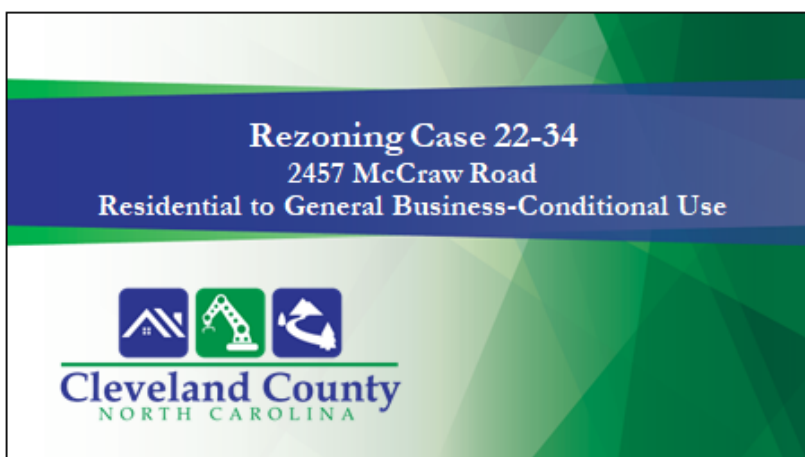
Hearing no further comments, Chairman Gordon closed the Public Hearing at 6:30 pm.

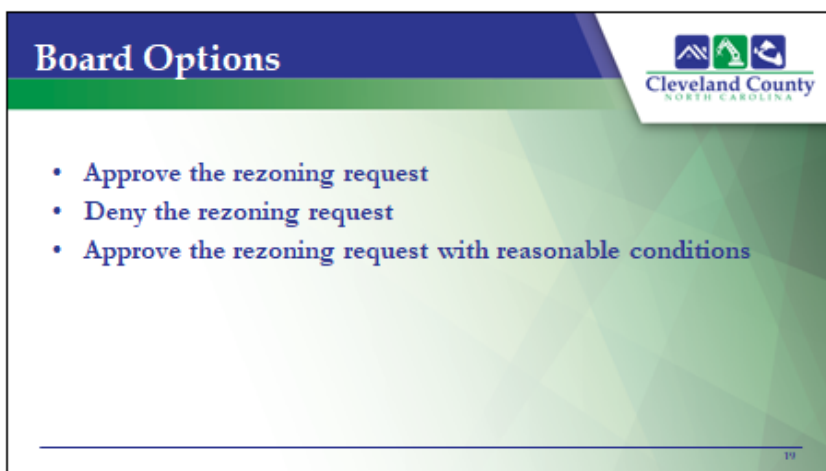
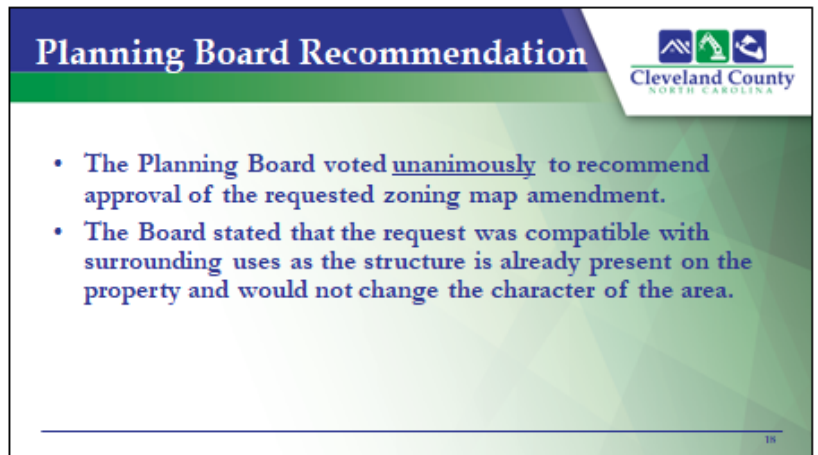
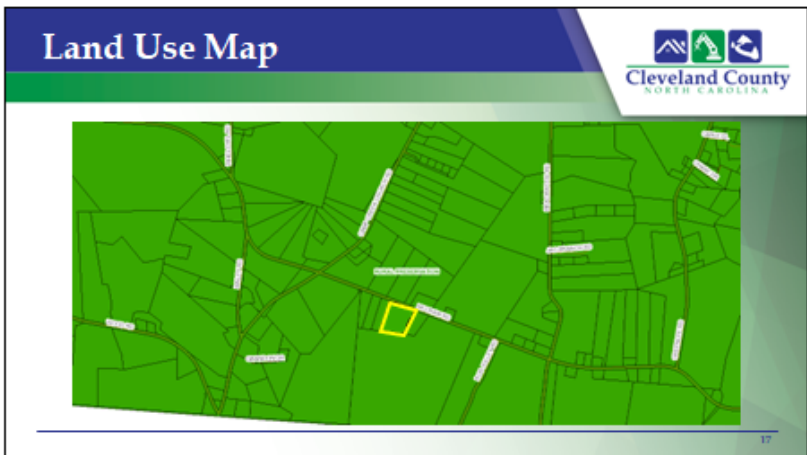
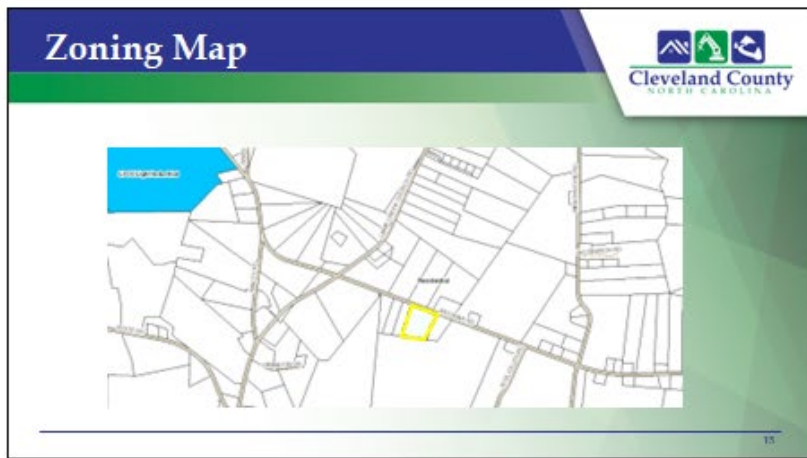
ACTION: Commissioner Whetstine made a motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board to, *approve the request to rezone parcel 65342 located at 4206 Fallston Road from Rural Agricultural (RA) to Residential (R) as it is compatible with surrounding existing uses and is in conformity with the Land Use Plan's designation as a Future Secondary Growth area.*

PLANNING DEPARTMENT: CASE 22-34; REQUEST TO REZONE MCCRAW ROAD FROM RESIDENTIAL (R) TO GENERAL BUSINESS-CONDITIONAL USE (GB-CU) FOR A PACKAGING AND PRINTING BUSINESS

Planning Director Chris Martin remained at the podium to present planning case 22-34; request to rezone McCraw Road from Residential (R) to General Business-Conditional Use (GB-CU) for a packaging and printing business. The applicant, Robert Thompson is requesting to rezone parcel 53979, located at 2457 McCraw Road, from Residential (R) to General Business-Conditional Use (GB-CU) for the purposes of operating a printing and packaging business. The property is approximately 6.46 acres and is currently owned by Ed's Pallet World Inc. The surrounding area is mostly rural residential in nature, including agriculture uses single-family residences, and a Volunteer Fire Department adjoining this property. The parcel has a commercial building built prior County wide zoning and has previously been used as a textile rug mill and warehousing and distribution of agriculture products. The Land Use Plan designates this area as Rural Preservation. It is expected that the area to retain its rural character.

The Planning Board voted unanimously to recommend approval of the requested zoning map amendment. The Board stated that the request was compatible with surrounding uses, as the structure has been in place since the 1960s and has been used in similar commercial capacities in the past. The following information and PowerPoint were presented to the Commissioners.





Chairman Gordon opened the Public Hearing at 6:35 pm for anyone wanting to speak for or against Planning Department case 22-25; a request to rezone property at 435 Range Road from Residential (R) to Residential Manufactured Homes and Parks (RMH) (*Legal Notice was published in the Shelby Star on Friday, December 2, 2022 and Friday, December 9, 2022*).

Robert Williams, 814 E. Stagecoach Trl, Fallston – spoke in favor of the rezoning request stating he agreed with the Planning Board’s recommendation but recommended limiting the conditional use.

Robert Wallace, 507 Clyde Wallace Road, Shelby – is the applicant and spoke in favor of the rezoning request. He explained his business intentions and vision for property improvements.

Hearing no additional comments, Chairman Gordon closed the Public Hearing at 6:38 pm.

Chairman Gordon opened the floor to the Board for questions and discussion. Commissioner Hutchins inquired if approved, could the business type change? Mr. Martin explained as this is a conditional-use permit, the property owner is limited to that permit and submitted site plan use.

ACTION: Commissioner Whetstine made a motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board to, ***approve the request to rezone McCraw Road from Residential (R) to General Business-Conditional Use (GB-CU) as it is compatible with the surrounding area and preexisting uses.***

REGULAR AGENDA

TAX ADMINISTRATION: PENDING REFUNDS AND RELEASES

Chairman Gordon recognized Tax Assessor Sherry Lavender to present the pending refunds and releases. The Tax Assessor's office has received several requests from taxpayers for the release of refunds. Any taxpayer who wishes to oppose the collection and validity of their property tax may present their case to the Board of County Commissioners, pursuant to North Carolina General Statute 105-381. A taxpayer may assert one of the three specified offenses for a request for the release of a refund. The offenses include:

- provide proof of a clerical error
- an illegal tax
- tax for an illegal purpose

Clerical errors refer to errors made on behalf of the tax office. These would include unintentional transcription and listing errors. The second category is an illegal tax which refers to situations such as double taxation or status or physical location errors. Thirdly, taxes levied for any illegal purpose are an extremely uncommon defense, these include taxes levied for a purpose not permitted by state law or the General Assembly.

The first request for a refund meets the criteria of clerical error and illegal taxes. The tax office had incorrectly assessed Reba Hardin's manufactured home as both real and personal property. The Tax Assessor recommends approval of Ms. Hardin's \$703.31 refund request for tax years 2020 – 2021.

The second request comes from Electric Glass Fiber America, LLC, formally known as PPG, which discovered they incorrectly listed properties that they claim are no longer in use and were disposed of some time ago. The company failed to appeal the listing in a timely manner and is now seeking a refund for the tax year 2019 – 2022. The release request for 2022 was received during the current year and the tax office recommends approval of the refund request for 2022, however, the three prior years were not done as an appeal of evaluation, and they do not meet the criteria as a clerical error as the fault falls on the company, not the tax office. They are asserting an illegal tax pursuant to North Carolina General statute 105-381 and have conceded it is not a clerical error by the Tax Assessor. The Tax Assessor has evidenced that a portion of the property in question was still on site as of January 1, 2022 and recommends denial of the refund request for 2019 – 2021 for Electric Glass Fiber America, LLC as the county is not legally allowed to grant that refund request.

ACTION: Commissioner Hutchins made a motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, *approve the refund request to Reba Hardin and the 2022 refund request for Electric Glass Fiber America, LLC.*

ACTION: Commissioner Bridges made a motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board to, *deny the refund request for Electric Glass Fiber America, LLC for TY 2019 – 2021.*

| PENDING REFUNDS / RELEASES (RECOMMENDED FOR APPROVAL) | | | | | | | | | | | |
|--|------|---------|---|----------------|----------------|------------------------|----------|--------|-------------------|---------------------|-----------------|
| December 13, 2022 | | | | | | | | | | | |
| The following requests have been reviewed by the County Assessor and found to be in order. They are hereby submitted for approval by the Cleveland County Board of Commissioners per G.S. 105-381. | | | | | | | | | | | |
| NAME | YEAR | RECEIPT | NOTE | ORIGINAL VALUE | ORIGINAL PAID | REQUESTED REFUND VALUE | DISTRICT | RATE | REQUESTED RELEASE | REQUESTED REFUND | |
| Reba Wilkins Hardin | 2020 | 4605904 | Duplicate billing real and personal | \$ 25,022 | \$284.15 | \$ 25,022 | 58 | 1.0475 | | \$284.15 | |
| Reba Wilkins Hardin | 2021 | 4707270 | Duplicate billing real and personal | \$ 30,554 | \$419.16 | \$ 30,554 | 58 | 1.0150 | | \$419.16 | |
| Electric Glass Fiber America LLC | 2022 | Various | Request per Taxpayer's internal audit value | \$123,462,734 | \$1,487,725.94 | \$ 13,366,264 | 5 | 1.2050 | \$161,063.48 | | |
| | | | | | | | | | Total | \$161,063.48 | \$703.31 |

| PENDING REFUNDS / RELEASES (RECOMMENDED FOR DENIAL) | | | | | | | | | | | |
|---|------|---------|---|----------------|----------------|------------------------|----------|--------|-----------------|----------------|---------------------|
| December 13, 2022 | | | | | | | | | | | |
| The following requests have been reviewed by the County Assessor. The stated request does not constitute a valid defense to the tax imposed or any part thereof, as provided in G.S. 105-381. Supporting documentation is on file in the County Assessor's Office. Staff recommendation: Deny requests. | | | | | | | | | | | |
| NAME | YEAR | RECEIPT | NOTE | ORIGINAL VALUE | ORIGINAL AMT | REQUESTED REFUND VALUE | DISTRICT | RATE | REQUEST RELEASE | REQUEST REFUND | |
| Electric Glass Fiber America LLC | 2019 | Various | Request per Taxpayer's internal audit value | \$ 98,648,936 | \$1,225,713.03 | \$ 5,668,632 | 5 | 1.2425 | | \$70,432.75 | |
| Electric Glass Fiber America LLC | 2020 | Various | Request per Taxpayer's internal audit value | \$109,367,442 | \$1,358,890.47 | \$ 2,704,936 | 5 | 1.2425 | | \$33,608.83 | |
| Electric Glass Fiber America LLC | 2021 | Various | Request per Taxpayer's internal audit value | \$109,124,489 | \$1,314,950.09 | \$ 9,234,191 | 5 | 1.2050 | | \$111,272.00 | |
| | | | | | | | | | TOTA | \$0.00 | \$215,313.58 |

PUBLIC HEALTH DEPARTMENT UPDATE

Chairman Gordon recognized Health Department Director Tiffany Hansen to present the public health department update. During the COVID-19 pandemic between 2020 – 2022, health department staff:

- Planned and Executed 76 drive-thru COVID 19 vaccination events
- Administered over 38,000 COVID19 vaccines – nearly 40% of all the doses in the County
- Partnered with over 15 local businesses to host events at their locations (Eaton, Clearwater, CCS)
- COVID19 testing on over 5000 individuals
- Distributed 20,000 at home test kits to our community

As COVID-19 transitions from pandemic to endemic, staff is now refocusing their efforts on public health prevention through partnerships and community focus. Community Wellness continues to be a focus area on the Commissioners strategic plan with the goal to focus on community wellness by identifying health disparities and partnering with community agencies to better the community’s health ranking.

The North Carolina General Assembly has awarded a \$5MM grant to the health department to assist with community health needs. These funds require no local resource allocation and will address the community’s most critical healthcare needs. Monies will be spent to establish access to primary care, establish mobile health screenings and mobile dentistry. Mrs. Hansen detailed the evolution and business model for the two mobile units. She also outlined to Board members the plan of operations and sustainability for the mobile units. The following information and PowerPoint were presented to the Commissioners.

PUBLIC HEALTH UPDATE

TIFFANY HANSEN





- Where have we been ?
- Where are we now ?
- Where are we going?

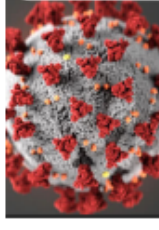



Where have we been?

COVID19 Pandemic 2020-2022



- Planned and Executed **76** drive-thru COVID 19 vaccination events
- Administered over **38,000** COVID19 vaccines – nearly **40%** of all the doses in the County
- Partnered with over **15** local businesses to host events at their locations (Eaton, Clearwater, CCS)
- COVID19 testing on over **5000** individuals
- Distributed **20,000** at home test kits to our community



Where are we now?

Non-Crisis Re-engagement



- Re-focus our 20 program areas on internal Strategic Plans
- Public Health Prevention
 - Partnerships, Community focus




Wellness

- Preparedness
- Diabetes
- School Records
- WIC Public Laboratory
- Environmental
- Adult BCCOP Maternity
- Medical


Health

- Dental WiseWoman Immunization
- Family Employee Care
- Pharmacy Management Child Education Planning Community

Where are we going?



- Focus on Community Wellness
 - Our County Health Rankings
 - Strategic Plan




FOCUS AREA 5: COMMUNITY WELLNESS

FY 21-22 GOALS

1. Focus on community Wellness by identifying health disparities and partnering with community agencies to better our County's health rankings.

Community Wellness Improvement Plan




A. Utilize General Assembly \$5M Grant

1. Establish Access to Primary Care
2. Establish Mobile Health Screening
3. Establish Mobile Dentistry


- No local resource allocation needed
- Addresses most critical needs

What we know....




- County Health Ranking –Overall Ranking **#83rd**

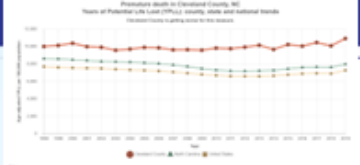
Cleveland (CV)



| Health Outcomes | | | | |
|---------------------------|----------|---------------|-------|---------|
| Length of Life | | | | |
| Outcome | CV | 10-20th | 50th | 80-90th |
| Premature death | ● 20,250 | 10,200-11,700 | 5,600 | 8,000 |
| Quality of Life | | | | |
| Poor or fair health | ● 23% | 23-26% | 13% | 33% |
| Poor physical health days | ● 4.5 | 4.2-4.8 | 3.4 | 3.7 |
| Poor mental health days | ● 5.0 | 4.8-5.3 | 4.0 | 4.4 |
| Low birthweight | ● 11% | 10-11% | 6% | 9% |

What is Influencing this?






Premature death in Cleveland County, NC
Years of Potential Life Lost (YPLL) County, State and National Trends
Hypertension and Diabetes are leading causes

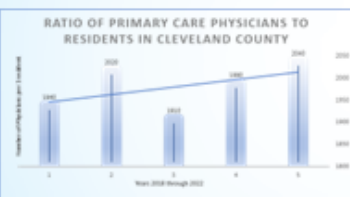
| Cleveland County | | | |
|------------------|--|-------------|------------------|
| Rank | Cause of Death | # of Deaths | Rate per 100,000 |
| 1 | Diseases of the heart | 1,264 | 260.2 |
| 2 | Cancer – all sites | 1,234 | 252.0 |
| 3 | Chronic lower respiratory diseases | 411 | 84.6 |
| 4 | Cardiovascular disease | 322 | 66.3 |
| 5 | Alzheimer's disease | 270 | 55.6 |
| 6 | Other unintentional injuries | 246 | 50.6 |
| 7 | Diabetes mellitus | 240 | 49.4 |
| 8 | Pneumonia and influenza | 163 | 33.6 |
| 9 | Septicemia | 141 | 29.0 |
| 10 | Nephritis, nephrotic syndrome, & nephrosis | 132 | 27.2 |

80% impacted by preventative services – early detection


Primary Care Access in the Community




RATIO OF PRIMARY CARE PHYSICIANS TO RESIDENTS IN CLEVELAND COUNTY




Primary care physicians in Cleveland County, NC
County, state and national trends
Hypertension and Diabetes are leading causes for the reasons




Connecting our Community




Uninsured Citizens



Prevalence of Medical Expenses




Benefit of Prevention



- A mere **10%** increase in life expectancy ensures an economic growth of around 0.4% per year.
- A homeless person visits the emergency department an average of 5 times each year, costing taxpayers an average of **\$18,500**
- **15.4%** of uninsured adults are more likely to use the emergency room due to a lack of access to other providers.
- a **10%** increase in public health spending could result in an average 3.2% reduction in cardiovascular disease mortality

Evolution of the Project



- General Assembly provides \$5M in support

Uninsured and Underinsured primary care in Cleveland County

County builds a structure and Atrium operates in partnership with County Health Department services

County builds a structure and operates satellite/mobile primary care locations throughout the County

County operationalizes primary care in current HD building and deploys 2 mobile units. One focused on health screenings and the other on pediatric dentistry. Along with partnerships with Atrium for Specialty Virtual Care Referrals and GWU on mobile unit

Business Model

County operationalizes primary care in current buildings and deploys mobile screening units, along with partnership with Astum for Virtual Care Referrals

Evaluate Current Space and re-engineer clinical space to accommodate additional Primary Care in the Health Department

Obtain and extend Mobile Screening availability throughout the community (Blood Pressure, A1C, Cholesterol) in partnership with GWU and Mobile Dentistry in partnership with CCS

Partner with Astum to embed Virtual Care for Specialty Referrals

GOAL: Primary Care Accessibility for those most vulnerable in Cleveland County

Mobilize, Partner and Connect

- \$250,000 Mobile Screening Unit
- Partner with Gardner-Webb on Mobile Screening Unit
 - Utilize students for learning and patient experience
- Direct Linkage to the Health Department Primary Care Clinic
- Operational 3-4 days/week throughout the County
 - City Halls, Library, Community Events, Churches
- Provide screenings and education throughout the County
 - A1C (Blood Glucose), Hypertension/High Blood Pressure, Cholesterol

Referral Patterns

Diagram showing referral patterns to Cleveland County Health Department Primary/Community Care:

- Astum Emergency Department
- Employee Wellness Referrals
- Mobile Screening Units
- Area Providers

What is the Dental Need?

- The ratio of dentists to population in Cleveland County is 2,230:1
 - The 2019 Community Health Assessment for Cleveland County identified dental care as a crucial need in the County
- Partnership with Cleveland County Schools
 - In 2018-19, 179 students were screened
 - 2019-20, 197 students were screened
 - 2022-23, 1899 students screened

The primary barrier to students receiving dental services in the county at these schools was transportation

- 500 (27%) of students are found to have moderate to high-risk dental issues
- Only 10% of children ages 6-18 in Cleveland County had a dental home in 2015.

Our Story...

- 27% of our students screened in 2022 had moderate to high-risk dental issue
- Meet 2nd grader: Julie
 - Extensive decay and treatment needed immediately
 - Inhibited her ability to concentrate in class due to pain
 - Influenced her appetite- she was not interested in eating meals because she was uncomfortable
- Her parents could not afford to take her to a dentist due to taking time of work and the cost of the care and unreliable transportation
- With our partnership with CCS she had screening conducted, and then transportation arranged by the Social Worker to CCHD for treatment
 - No one had to miss work and she was able to get the needed treatment

Plan of Operation

- \$640,000k (3) Operatory Mobile Dental Unit
- Contract staff: Dentist, Hygienist/Assistant and a Processing Assistant
- Reverse: Processing billing for all insurances and then use our sliding fee scale for all uninsured
- Spend a week at each of our 29 Cleveland County Schools
 - Screening, preventative care and providing treatment for students (with parent consent)

Sustainability

- Utilize Restricted non-local user fees
 - Restricted for utilization in public health
 - Bill for services rendered and utilize sliding fee scale

Focus on Strategic Plan

FOCUS AREA 5: COMMUNITY WELLNESS

FY 21-22 GOALS

- Focus on community Wellness by identifying health disparities and partnering with community agencies to better our County's health rankings.

Action

- Approve/Deny/Modify the Community Wellness Improvement Plan

Questions?

HEALTH DEPARTMENT: BUDGET AMENDMENT (BNA #032)

ACTION: Commissioner Whetstine made a motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board to, ***approve the following budget amendment:***

| Account Number | Project Code | Department/Account Name | Increase | Decrease |
|------------------|--------------|--|----------------|----------|
| 012.550.4.310.00 | | Primary Care/Federal Govt Grant-Primary Care | \$5,000,000.00 | |
| 012.550.5.910.00 | | Primary Care/Capital Equipment-Primary Care | \$923,900.00 | |

012.550.5.891.00

Primary Care/Emergency & Contingency

\$4,076,100.00

Explanation of Revisions: Cleveland County Health Department has been awarded \$5,000,000 in funding through the General Assembly to be used towards a primary care clinic. Funds will be used to purchase a dental mobile unit and a primary care mobile unit to provide medical services to Cleveland County residents to have access to care.

BOARD APPOINTMENTS

CLEVELAND COUNTY AGRICULTURAL ADVISORY BOARD

ACTION: Commissioner Bridges made the motion, seconded by Commissioner Whetstine, and unanimously adopted by the Board, *to appoint Randall Greene, Robert Henderson and Joseph Lail to serve as members of this board*, for a period of three years, scheduled to conclude on December 31, 2025.

CLEVELAND COUNTY BOARD OF HEALTH

ACTION: Commissioner Whetstine made the motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board, *to reappoint Dr. Mark Heiner and Sara Karner, DDS, and appoint Dr. Patrick Vollmer and Christina Alexander, R.N. to serve as members of this board*, for a three-year term, scheduled to conclude on December 31, 2025.

CLEVELAND COUNTY HISTORIC PRESERVATION

ACTION: Commissioner Bridges made the motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board, *to appoint Gretta Reo-Cooper to serve as a member of this board*, to fill the unexpired term of Mot Davis whose term is scheduled to conclude on July 1, 2023.

RURAL FIRE COMMISSION

Chairman Gordon recused himself from voting on this board appointment as he is currently serving on the Rural Fire Commission.

ACTION: Commissioner Bridges made the motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board, *to reappoint Commissioner Kevin Gordon to serve as a member of this board*, for a three-year term, scheduled to conclude on December 31, 2025.

KINGS MOUNTAIN PLANNING AND ZONING (ETJ)

ACTION: Commissioner Bridges made the motion, seconded by Commissioner Whetstine, and unanimously adopted by the Board, *to reappoint Donald Atkins to serve as members of this board*, for a three-year term, scheduled to conclude on December 31, 2025.

CLOSED SESSION

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board, *to go into closed session per North Carolina General Statute § 143-318.11(a)(5) and (a)(6) to consider a personnel matter and to establish the terms of an employment contract. (Copy of closed session Minutes are sealed and found in Closed Session Minute Book).*

RECONVENE IN REGULAR SESSION

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Bridges, and unanimously adopted by the Board to, ***reconvene in open session.***

Chairman Gordon stated the following, ***“During the closed session, action was taken that needs to be voted on in open session.”***

ACTION: Commissioner Hutchins made the motion, seconded by Commissioner Hardin, and unanimously adopted by the Board to, ***to increase the Sheriff's salary by 6% effective for the 2023 calendar year.***

ACTION: Commissioner Bridges made the motion, seconded by Commissioner Hutchins, and unanimously adopted by the Board to, ***increase the Register of Deeds salary by 12% effective for the 2023 calendar year.***

ADJOURN

There being no further business to come before the Board at this time, Commissioner Hardin made a motion, seconded by Commissioner Hutchins and unanimously adopted by the Board, ***to adjourn.*** The next meeting of the Commission is scheduled for ***Friday, January 13, 2023 at 9:00 a.m.*** at the ***American Red Cross Building*** located at ***1333 Fallston Road, Shelby*** for a ***Commissioners Work Session.***

*Kevin Gordon, Chairman
Cleveland County Board of Commissioners*

*Phyllis Nowlen, Clerk to the Board
Cleveland County Board of Commissioners*