



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

AGENDA

Thursday, August 26, 2021 – 12:30 PM

ON MARCH 16, 2020, GOVERNOR GREG ABBOTT TEMPORARILY SUSPENDED PART OF THE TEXAS OPEN MEETINGS ACT TO HELP MITIGATE THE SPREAD OF COVID-19. SPECIFICALLY, THIS AMENDMENT ALLOWS FOR LOCAL GOVERNMENTS TO CONVENE VIRTUALLY SO LONG AS MEMBERS OF THE PUBLIC ARE PROVIDED A MEANS BY WHICH THEY CAN HEAR AND PROVIDE COMMENT TO THE GOVERNING BODY. The Coastal Health & Wellness Governing Board will convene for its regularly scheduled August meeting by utilizing Zoom, which will allow for Board members and the public alike to partake in and/or view the meeting either online or over the phone.

CONNECTING VIA INTERNET:

Access the URL: <https://us06web.zoom.us/j/86889631253?pwd=UFNGcStlZW8vMVBiZXI0ajJFNDRIQT09>
Meeting Password: 355745

An automated prompt should appear on your screen; when it does, click “Open Zoom Meetings”

1. If you would prefer to use your computer for audio connection, please do the following:
 - a. When prompted, select “Join Audio”
 - b. Another popup box will appear, select the tab, “Computer Audio”
 - c. Now click the box stating, “Join with Computer Audio.” Your connection to the meeting will be automatically established upon doing so.
2. If you would prefer to utilize a phone for your audio connection, please do the following:
 - a. Mute your computer’s volume;
 - b. When prompted, select “Join Audio”
 - c. Another popup box will appear, select the tab, “Phone Call”
 - d. You will be presented with a Dial-In, Audio Code, and Participant ID. Call the Dial-In number from your phone and follow the subsequent voice prompts. Your connection to the meeting will be automatically established upon doing so.

CONNECTING VIA PHONE (AUDIO ONLY):

1. Dial 346-248-7799
2. You will be prompted to enter the Meeting ID, which is 868 8963 1253 # Meeting Password: 355745
3. Finally, you will be instructed to enter your Participant ID. When this occurs, merely select the pound (hashtag) key without entering any numbers. Your connection to the meeting will be automatically established upon doing so.

CONSENT AGENDA: ALL ITEMS MARKED WITH A SINGLE ASTERICK (*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE GOVERNING BOARD. ANY BOARD MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY.

REGULARLY SCHEDULED MEETING

Meeting Called to Order Pledge of Allegiance

Item #1 Comments from the Public

*Item #2ACTION.....Agenda

*Item #3ACTION.....Excused Absence(s)

*Item #4ACTION.....Consider for Approval Minutes from July 29, 2021 Governing Board Meeting

- *Item #5**ACTION**.....Policies Approved by United Board of Health as Authorized Under the Shared Services Agreement
 - a) Employee Complaint/Issue Resolution Policy
 - b) Hiring Policy
 - c) Communications Policy
 - d) Fiscal Management Policy
 - e) Anti-Fraud Policy
 - f) Drug-Free Workplace Policy
 - g) Employee Assistance Program Policy
 - h) Employee Corrective Action Policy
 - i) Employee and Pre-Hire Immunizations
 - j) Separation of Employment Policy
 - k) Sexual Harassment Policy
 - l) Vehicular Accident/Incidents Policy
 - m) Volunteer Policy

- Item #6.....Executive Reports Submitted by Dr. Keiser
 - a) Executive Director
 - b) Dental Director

- Item #7.....COVID-19 Update from Local Health Authority Submitted by Dr. Keiser

- Item #8**ACTION**.....Consider for Approval July 2021 Financial Report Submitted by Andrea Cortinas

- Item #9**ACTION**.....Consider for Approval Coastal Health & Wellness Medical Fee Schedule Effective September 1, 2021 Submitted by Marlene Garcia

- Item #10**ACTION**.....Consider for Approval Coastal Health & Wellness Dental Fee Schedule Effective September 1, 2021 Submitted by Marlene Garcia

- Item #11**ACTION**.....Consider for Approval Coastal Health & Wellness Dentures, Crowns, and Root Canal Fee Schedule Effective September 1, 2021 Submitted by Marlene Garcia

- Item #12**ACTION**.....Consider for Approval Privileging Rights for Philip Keiser, MD Submitted by Ann O’Connell

- Item #13**ACTION**.....Consider for Approval Re-Privileging Rights for Yaa Cheremateng, PA-C Submitted by Ann O’Connell

- Item #14**ACTION**.....Consider for Approval Privileging Rights for Zuleica Santiago Delgado, MD, UTMB Contractor Submitted by Ann O’Connell

- Item #15**ACTION**.....Consider for Approval Privileging Rights for UTMB Resident Garrett Levy-Meeks, MD, Submitted by Ann O’Connell

- Item #16**ACTION**.....Consider for Approval Privileging Rights for UTMB Resident Kasiemobi Okonkwo, MD, Submitted by Ann O’Connell

- Item #17**ACTION**.....Consider for Approval Re-Privileging Rights for UTMB Resident Travis Livingston, MD, Submitted by Ann O’Connell

- Item #18.....Update on Governing Board Member Vacancies Submitted by Samantha Robinson

- Item #19.....Comments from Board Members

Adjournment

Next Regular Scheduled Meeting: September 30, 2021

Appearances before the Coastal Health & Wellness Governing Board

The Coastal Health & Wellness Governing Board meetings are conducted under the provisions of the Texas Open Meetings Act, and members of the public that wish to address the Board about an item presented on the agenda shall be offered three minutes to do so. The Board cordially requests that individuals desiring to make a such a statement notify the Board of their intention by writing their name on the sign-in sheet located at the Boardroom's main entrance.

A citizen desiring to make comment to the Board regarding an item not listed on the agenda shall submit a written request to the Executive Director by noon on the Thursday immediately preceding the Thursday of the Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Executive Director shall include the requested appearance on the agenda, and the person shall be heard if he or she appears.

Executive Sessions

When listed, an Executive Session may be held by the Governing Board in accordance with the Texas Open Meetings Act. An Executive Session is authorized under the Open Meetings Act pursuant to one or more the following exceptions: Tex. Gov't Code §§ 551.071 (consultation with attorney), 551.072 (deliberation regarding real property), 551.073 (deliberation regarding a prospective gift or donation), 551.074 (personnel matters), 551.0745 (personnel matters affecting Coastal Health & Wellness advisory body), 551.076 (deliberation regarding security devices or security audits), and/or 551.087 (deliberations regarding economic development negotiations). The Presiding Officer of the Governing Board shall announce the basis for the Executive Session prior to recessing into Executive Session. The Governing Board may only enter into Executive Session if such action is specifically noted on the posted agenda.



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board
August 2021
Item#3
Excused Absence(s)**

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#4

Consider for Approval Minutes from July 29, 2021

Governing Meeting

**Coastal Health & Wellness
Governing Board
July 29, 2021**

Board Members

Zoom Call:

Samantha Robinson
Dr. Southerland
Virginia Valentino
Flecia Charles
Elizabeth Williams
Kevin Avery
Brent Hartzell
Elizabeth Williams
Flecia Charles
Dr. Thompson

Staff:

Ann O’Connell, Chief Operations Officer
Andrea Cortinas, Chief Financial Officer
Ami Cotharn, Chief Nursing Officer
Anthony Hernandez
Dr. Lindskog, Dental Director
Pisa Ring
Richard Mosquera, Chief Compliance
Officer

Unexcused Absence: Dorothy Goodman, Victoria Dougharty and Miroslava Bustamante

Guest: Jed Webb

Ann O’Connell, Chief Operations Officer, requested to skip to item number seven.

Item #7 Executive Report

Ann O’Connell, Chief Operations Officer, presented the July 2021 Executive Report to the Board. Ann provided an update on COVID-19. 60% of our Galveston County residents have received at least one dose those who are 12 and over. 54% of our residents who are 12 and over are fully vaccinated. 84% of all persons 65 and older have received at least one dose and 80% of those over 65 are fully vaccinated. Coastal Health & Wellness started hosting the standing COVID-19 vaccine clinic every Wednesday from 9 a.m. to 3 p.m. and is open to the public as well as the patients.

Dr. Lindskog, Dental Director, updated the Board on dental services in the Coastal Health & Wellness Clinic:

- The Dental Clinic continues to wear N95 respirators and face shields for all aerosol generating procedures. Deb Howey, our infection control nurse recently completed our annual fit testing on all dental staff.
- We are currently providing all dental services in Texas City. In Galveston, we offer all services except for crowns and root canals. We will be expanding our services in Galveston with the HRSA grant and both locations will offer all services.
- Staffing: We are fully staffed currently. The recently submitted HRSA grant includes the addition of an additional dentist and dental assistant.
- We have been seeing walk in patients that are in pain and working them in to our schedule if possible
- The Dental Clinic will have a booth at the Back-to-School Health Fair and will be distributing free toothbrushes/toothpastes to the pediatric population
- Dr. Lindskog recently appointed to the College of The Mainland (COM) Dental Hygiene School Advisory Committee and we look forward to partnerships with COM

Items 1-6 Consent Agenda

A motion was made by Dr. Southerland to approve the consent agenda items one through six. Elizabeth Williams seconded the motion, and the Board unanimously approved the consent agenda.

Item #8 Consider for Approval June 2021 Financial Report

Andrea Cortinas, Chief Financial Officer, presented the June 2021 financial report to the Board. A motion to accept the financial report as presented was made by Virginia Valentino. Dr. Southerland seconded the motion and the Board unanimously approved.

Item #9 Consider for Approval Biannual Third-Party Payor Adjustments

Andrea Cortinas, Chief Financial Officer, asked the Board to consider for approval the bi-annual third-party payor adjustments. A motion to accept the adjustments as presented was made by Virginia Valentino. Dr. Southerland seconded the motion and the Board unanimously approved.

Item #10 Consider for Approval Quarterly Visit and Analysis Report Including Breakdown of New Patients by Payor Source for Recent New Patients

Andrea Cortinas, Chief Financial Officer, reported on the quarterly visits and analysis report including a breakdown by new patients by payor source for recent new patients. A motion to accept the report as presented was made by Virginia Valentino and seconded by Brent Hartzell. The Board unanimously approved the motion.

Item #11 Consider for Approval Quarterly Access to Care Report for the Period Ending June 30, 2021

Pisa Ring, Patient Information Manager, presented the quarterly access to care report for the period ending 06/30/2021. Pisa informed the Board that the number of cancellations has been added to the quarterly report. A motion to accept the access to care report as presented was made by Virginia Valentino and seconded by Dr. Southerland. The Board unanimously approved the motion.

Item #12 Consider for Approval Quarterly Patient Satisfaction Survey Report for the Period Ending June 30, 2021

Pisa Ring, Patient Information Manager, presented the quarterly patient satisfaction survey report for the period ending 06/30/2021. Pisa informed the Board that we had overall average of a 4.77 for this quarter. A motion to accept the patient satisfaction survey report was made by Dr. Southerland and seconded by Virginia Valentino. The Board unanimously approved the motion.

Item #13 Consider for Approval Quarterly Compliance Report for the Period Ending June 30, 2021

Richard Mosquera, Chief Compliance Officer, asked the Board to consider for approval the quarterly compliance report for the period ending 06/30/2021. A motion to accept the compliance report as presented was made by Virginia Valentino and seconded by Elizabeth Williams. The Board unanimously approved the motion.

Item #14 Consider for Approval Re-Privileging Rights for Haley McCabe, PA-C

Ann O'Connell, Chief Operations Officer, asked the Board to consider for approval re-privileging rights for Haley McCabe, PA-C. A motion to accept re-privileging rights for Haley McCabe, PA-C was made by Virginia Valentino and seconded by Flecia Charles. The Board unanimously approved the motion.

Item #15 Consider for Approval Re-Privileging Rights for UTMB Resident Beau Kirkwood, DO

Ann O'Connell, Chief Operations Officer, asked the Board to consider for approval re-privileging rights for Beau Kirkwood, DO. A motion to accept re-privileging rights for Beau Kirkwood, DO was made by Dr. Southerland and seconded by Virginia Valentino. The Board unanimously approved the motion.

Item #16 Consider for Approval Governing Board Member to Serve on the Board Appointing Committee

Samantha Robinson, Board Chair, asked the Board to consider for approval Governing Board member to serve on the Board Appointing Committee. Dr. Southerland nominated Kevin Avery and Samantha Robison nominated herself. A motion to accept Kevin Avery and Samantha Robison to fill the Board Appointing Committee position was made by Virginia Valentino and seconded by Dr. Southerland. The Board unanimously approved the motion.

Item #17 Consider for Approval Badges for Coastal Health & Wellness Governing Board Members

Samantha Robinson, Board Chair, asked the Board to consider for approval badges for Coastal Health & Wellness Governing Board Members. A motion to accept badges for Coastal Health & Wellness Governing Board Members was made by Brent Hartzell and seconded by Virginia Valentino. The Board unanimously approved the motion.

Item #18 Consider for Approval Joint Board Training for Coastal Health & Wellness Governing Board Members and United Board of Health Members

Samantha Robinson, Board Chair, asked the Board to consider for approval joint Board training for Coastal Health & Wellness Governing Board Members and United Board of Health Members. Samantha requested that this item be added to the United Board of Health agenda for consideration. A motion to accept the joint Board training for Coastal Health & Wellness Governing Board Members and United Board of Health Members was made by Virginia Valentino and seconded by Kevin Avery. The Board unanimously approved the motion.

Item #19 Update on Governing Board Member Vacancies

Ann O’Connell, Chief Operations Officer, informed the Board that Coastal Health & Wellness is currently working with providers and leaders on recruiting for two vacant positions consumer and community representatives.

Comments

Samantha Robinson, Board Chair, suggested adding “How did you hear about Coastal Health & Wellness” to the patient satisfaction surveys.

The meeting was adjourned at 1:07p.m.

Chair

Secretary/Treasurer

Date

Date

[Back to Agenda](#)

Governing Board

August 2021

Item#5

Policies Approved by United Board of Health as Authorized Under the Shared Services Agreement

- a)** Employee Complaint/Issue Resolution Policy
- b)** Hiring Policy
- c)** Communications Policy
- d)** Fiscal Management Policy
- e)** Anti-Fraud Policy
- f)** Drug-Free Workplace Policy
- g)** Employee Assistance Program Policy
- h)** Employee Corrective Action Policy
- i)** Employee and Pre-Hire Immunizations
- j)** Separation of Employment Policy
- k)** Sexual Harassment Policy
- l)** Vehicular Accident/Incidents Policy
- m)** Volunteer Policy

Employee Complaint/Issue Resolution Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy

The District, in compliance with applicable federal and state laws and regulations, does not discriminate against individuals on the basis of race, color, national origin, sex, age, religion, disability, sexual orientation, veteran status, or genetic information. This includes, but is not limited to, employment and access to District programs, facilities, and services. In some circumstances, the District may be required to notify state and federal offices of discrimination allegations and/or complaints.

The District recognizes that individuals may have differences that require prompt and appropriate resolution. The District is committed to the establishment and operation of an internal complaint/issue resolution process that allows for resolution of work-related issues at the lowest appropriate level of supervision.

Use of the complaint/issue resolution processes will not affect an employee's at-will status and is not intended to interfere with the ability of supervisors to process corrective actions according to the *Corrective Action* policy.

Informal Complaint/Issue Resolution

The informal complaint/issue resolution process is available to provide employees an opportunity to present work-related complaints or issues that do not involve illegal activities such as discrimination, sexual harassment, or theft.

Supervisor and Employee Responsibilities

Problems and misunderstandings are expected to be worked out when possible, between employees. If the employees have attempted to discuss the problem and do not feel the problem is resolved, either employee may go to the next lowest appropriate level of supervision to discuss and try to resolve the issues.

To this end, the District endorses an “open door” policy. Supervisors are instructed to be available to employees under their span of management and if an employee requests an appointment to discuss work-related issues. It is the supervisor and employee’s responsibility to try and resolve work-related issues as they arise.

An *open door* policy promotes things such as:

- early on-site problem solving;
- timely answers to questions;
- flexibility; and
- the sharing of information on options available to the employee.

Since employees and supervisors are usually closer to the situation, they may already be aware of the problem(s) and can provide new facts or a different perspective that may be helpful.

Employees are expected to follow the chain of command when utilizing the informal complaint/issue resolution process.

The supervisor(s) to whom the informal complaint or issue is directed must investigate the matter, meet with the employee, and respond to the employee's complaint or issue in a timely manner. Supervisors at all levels are expected to utilize the GCHD Investigation Form whenever possible to document any complaint or issue, investigation notes and other pertinent information to ensure conformity and consistency in the resolution of documentation. Upon resolution, the Investigation Form shall be given to Human Resources for appropriate archiving. If an employee is not satisfied with the supervisor's response and wants to talk to someone else, he/she may take the concern/issue to the next higher level of supervision.

Human Resources is available to provide counseling and/or technical assistance to supervisors and employees in an attempt to resolve work-related issues at the lowest possible level.

Formal Complaint/Issue Resolution

The formal complaint/issue resolution process is available for addressing complaints involving illegal activities such as discrimination, sexual harassment, theft, retaliation/intimidation, other alleged violations of employment law, or violations of policy and/or procedure.

Employee Responsibilities

The employee is to complete the *Employee Formal Complaint* form and submit it directly to the Human Resources Director, or the Chief Compliance Officer.

Time Frames

An employee may file a complaint in a timely manner from the date of the occurrence that caused the issue in dispute or when the employee becomes aware of the issue in dispute. The filing date will be the date the complaint is received by the Human Resources Director or Chief Compliance Officer. The Human Resources Director and/or Chief Compliance Officer will review the information and a determination will be made as to whether the complaint is substantiated or unsubstantiated within ten (10) business days from the date on which the complaint is received.

Confidentiality

Information related to the complaint resolution process and issues discussed with the Human Resources Director and/or Chief Compliance Officer will be treated as confidential. However, the ability to maintain such confidentiality may be limited by law or by the best interests of the District, the employee or other employees.

False Reporting

Any employee who makes an intentionally false accusation of harassment or discrimination is subject to corrective disciplinary action up to and including suspension or dismissal.

Investigation of Complaints

All investigations of formal complaints will be conducted as discreetly as possible. Investigations will be conducted by the Human Resources Director and/or the Chief Compliance Officer. The investigation may include, but is not limited to, interviews with witnesses and discussions with the involved parties.

After the investigation is completed, if necessary, immediate and appropriate corrective measures will be taken based on the GCHD *Corrective Action Policy*.

If findings support the charge against the accused employee, that employee will be subject to corrective disciplinary action up to and including suspension or dismissal.

Retaliation

An employee will not be retaliated against for using the complaint resolution process. Any District employee who retaliates against another employee for this reason will be in violation of District policy and subject to corrective disciplinary action up to and including suspension or dismissal.

Appeals

Since the District complaint process is an internal process, final actions are not subject to appeal and employees may not file multiple complaints based upon the same set of facts.

Forms

- *Employee Formal Complaint*
- *GCHD Investigation Form*

Hiring Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees and those seeking employment with the Health District.

Policy

The District will recruit and select qualified applicants for each position in compliance with applicable federal and state laws and regulations and will not discriminate against individuals on the basis of race, color, national origin, sex, age, religion, disability, sexual orientation, veteran status or genetic information. This includes employment policies, practices, and procedures, including, but not limited to, hiring and firing; compensation, assignment, or classification of employees; transfer, promotion, layoff, or recall; job advertisements; recruitment; testing; use of company facilities; training and apprenticeship programs; fringe benefits; pay, retirement plans, and disability leave; or other terms and conditions of employment.

In some circumstances, the District may be required to notify state and federal offices of discrimination allegations and/or complaints.

The District believes that hiring competent and qualified employees is a fundamental business need that must be met in order to effectively perform its mission. Nothing in this policy alters the District’s status as an at-will employer, or the status of all District employees as at-will employees.

Vacant positions will be marketed as extensively as possible and financially feasible. Vacant position notices will be posted for a minimum of a one-week period (5 business days). Exceptions to the posting requirements may include but are not limited to internal positions that are specific to the District and will be approved by the Human Resources Director based on business requirements.

All selected candidates will receive a contingent offer of employment, pending background checks and pre-hire drug/alcohol testing. Background checks will be conducted by the Human Resources department and may include criminal history, credit history, and motor vehicle driving record, depending on the position. Formal offers of employment will be made by the Human Resources Director, or designee, upon satisfactory completion of required background checks and testing.

Applications and resumes received for vacant positions posted will be kept on-site for the remainder of the calendar year in which they are received. Human Resources will follow all state record retention laws for applications and resumes.

Violation

Violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension or dismissal.

Communication Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness and Animal Resource Center (collectively “the District”) employees, volunteers, students and contractors (business associates).

Policy

Employees are expected to communicate accurately and appropriately and to address their work-related complaints and issues at the lowest possible level and through the District’s supervisory chain. (Reference: Employee Complaint/Issue Resolution policy)

This policy refers to communication in the workplace by employees in their official employee capacity. Employees should realize that when they articulate their opinions, while not on official duty at the District, these opinions might be construed as official opinions of the District.

Official Communication

The District maintains an open environment in which employees can feel comfortable communicating unofficially throughout the organization. However, *formal and official business and administrative issues* should be communicated accurately and appropriately through official channels.

Elected Officials

Those employees/managers who receive calls from elected/county officials or board members, etc., are required to document the call by writing a brief summary of the call and then forwarding this information to the Chief Executive Officer (CEO) or designee.

Media

The Director of Communications serves as the official District spokesperson and conveys the official District position on issues of significance or a controversial or sensitive nature.

Management may receive and respond directly to media inquiries of routine nature, including, but not limited to:

- General questions about a department's function;
- Meeting times and locations;
- Special events planned by a department; or
- Questions about a particular program offered by a department

Following the interview, the department manager shall provide the Director of Communications a brief written summary of the interaction via e-mail.

In cases of critical significance to the District, the Director of Communications will work with department managers to develop a fact sheet to detail the known facts of the situation and summarize the District’s position. (Reference: Risk Communication Guidelines)

In the event of a crisis or emergency situation, the CEO may designate the Director of Communications to handle all contacts with the media, which will coordinate the information flow from the District to the

public. In such situations, all departments should refer calls from the media to the Director of Communications.

E-mail

E-mail is considered an official means of routing communications among internal and external parties that have access to e-mail. Those employees without access to e-mail will receive communications through their supervisor. Confidential personnel or patient information must be marked confidential and/or a confidentiality statement must be included in the body of the e-mail. In addition, all employees with the designated encryption functionality must encrypt all emails that are sent to external recipients outside the organization that may include confidential, sensitive or protected information. An out of office message may be set up on e-mail to inform customers/employees when an employee is out of the office for an extended period of time. The message should also state who to contact in case of an emergency. (Reference: Computer and Digital Communications Usage policy and HIPAA policy)

Telephone and Voicemail

The District's telephone and voicemail systems are used for both internal and external communications. Unless other notification measures are taken, an out of office message may be recorded on voicemail to inform customers/employees when an employee is out of the office for an extended period of time. The message should also state who to contact in case of an emergency. (Reference: GCHD Voicemail: Standard Voicemail Procedures)

District issued cell phones are issued to assist those employees with a job-related need and should only be used for business purposes. Those employees are expected to respond to public health disasters and emergencies and are expected to keep their cell phones on and batteries charged at all times to respond to calls. (Reference: Computer and Digital Communications Usage policy)

Memorandum/Letter

Official letterhead is considered an official means of communication among internal and external parties. The official letterhead is created for use by the Executive Office and can only be changed by the Executive Office. It can be located on the District's extranet site.

Internet

The District's website consists of factual, accurate, public information to assist the public in getting answers to their questions. The website is updated as needed. Employees are encouraged to review the District's website for updates.

Extranet

The District's extranet site consists of useful information for employees to assist them in carrying out their jobs. The extranet site is for employee use only and is updated as needed. Employees are encouraged to review the District's Extranet site periodically for updates.

Social Media

Use of social media for official District purposes raises legal issues that are unique to public agencies and generally do not affect private persons or entities. Therefore, all District use of social media shall be in accordance with: this policy and all applicable local, state and federal laws; policies of the District pertaining to the use of computers, electronic communications and respectful workplace; and all other applicable District policies and procedures.

Background

Social media refers to media designed to disseminate content (information, images, audio or video) through social interaction, created using highly accessible web-publishing techniques. The term includes social network sites that allow individuals and organizations to construct a profile and create and share content with others. Examples of social media include, but are not limited to:

- video-sharing sites, such as YouTube and TikTok
- blogs;
- photo-sharing sites, such as Flickr, Instagram and Snapchat;
- podcasting;
- social networks, such as Facebook, MySpace, LinkedIn and Snapchat;
- microblogging and short messaging, such as Twitter; and
- online discussion groups

Establishing a Social Media Presence

Use of social media shall support the objectives of the District and present the District in a positive and professional manner. The Director of Communications is responsible for overall management of District social media presence and strategies for engagement. To ensure consistent and appropriate use, departments that wish to establish a presence in social media must request approval from the Chief Executive Officer (CEO) through the Director of Communications. Information to be provided includes:

- Goals and objectives for the social media platform;
- Intended audiences;
- Social networks or social media venues to be used;
- How the social media presence supports the District's social media goal;
- Personnel assigned to implementation and ongoing support (posting, monitoring, etc.); and
- Department heads must read and ensure compliance with all terms of use for any social media site or service prior to establishing a presence.

Posting Information

Only the Director of Communications and employees authorized by the CEO, ARC Director, GAAA Director, CHW Executive Director or designee are authorized to post content on a social media venue on behalf of the District. Staff posting content may only post content that has been approved for public dissemination and is within that staff member's areas of expertise and departmental role. Staff using social media on behalf of the District must be truthful at all times about who they are and their role with the District.

The tone of social media content is often informal; however staff is encouraged to adhere to a professional writing style whenever possible. Linking to related information on the District website is encouraged when practical and appropriate.

The District must either own the copyright to or have a valid license (written permission) to use content, including images, videos, sound records, etc., posted to its social media sites.

Prohibited Content

All content posted by District staff to social media sites shall support the District's social media goals described in this Policy. Staff is prohibited from posting content about:

- Potentially controversial issues;

- Actual or potential legal claims, lawsuits or other legal issues;
- Personnel matters;
- Budget planning and priorities;
- Personal opinion on public health issues or any other issue;
- Political issues, including opinions about elected officials or candidates for elective office and issues appearing on an election ballot;
- What a board member might think about an issue or speculation about a potential decision they might make; or
- Emergency situations (unless the person authorized to post content represents public health preparedness or emergency medical services)

District posted content may not include content that promotes religious beliefs or philosophies, is illegal under federal, state or local laws, or is defamatory (i.e. slander or libel) or indecent, or promotes hate, tobacco, alcohol, profanity, obscenity or pornography.

District staff may not make disparaging remarks about municipal staff or officials nor post content that would tend to discredit municipalities or officials.

Open Records Act

All content posted on social media sites may be subject to the Texas Open Records Act.

Personal Use of Social Media

Employees are reminded that information posted on personal websites or social media platforms can be viewed by members of the public, by others in the District, by taxpayers, and customers or clients of the District. Employees are encouraged to be respectful and avoid disparaging remarks or images about these individuals, the District or co-workers. Employees who use personal websites or social media are expected to refrain from presenting themselves as representatives of the District or from portraying the District in a negative manner. Employees are encouraged to show a duty of loyalty and respect to the District and co-workers. Excessive personal use of social media during work hours is prohibited.

The District is not responsible for any repercussions the employees' content may generate.

Employees are prohibited from sharing confidential and sensitive information, particularly that is found within the District internal networks, to the outside online community. Divulging information that is financial, operational, related to clients and legal in nature is prohibited. This includes sharing information (text or photo) on social media platforms.

Dishonorable content such as racial, ethnic, sexual, religious and physical disability slurs are not tolerated.

Internal Emergency Situations Communications

In the event of an emergency situation, information about District delayed openings or closures will be disseminated to employees using any of the following methods: E-mail, employee inclement weather phone line (409) 938-2489 or automated phone calls. Employees should tune into local media, including KTRH 740 AM, for information regarding disaster conditions, etc. (Reference: All Hazards Plan)

Employee Responsibilities

Every employee is responsible for:

- understanding and following this policy;
- adhering to and signing a confidentiality agreement; and
- consulting with his/her supervisor for guidance on the information addressed in this policy.

Supervisor Responsibilities

Every supervisor is responsible for:

- understanding and following this policy;
- ensuring that this policy is carried out in a uniform manner;
- counseling an employee who needs guidance or redirection in these areas;
- assuring that all employees under his/her supervision sign a confidentiality agreement; and
- taking or recommending appropriate corrective action when necessary.

Violation

Violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension or dismissal.

Fiscal Management Policy

-Last Approved
UBOH- 08/11/2021
-Effective 10/29/2004

Audience

This policy applies to Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”).

Purpose

The purpose of the District Fiscal Management Policy is to provide guidance on the accounting and administration of District local, federal and state funding and to establish accountability and provide adequate controls to effectively monitor revenue and expenditures as designated in the annual budget. This policy is intended to guide the District staff, as well as the United Board of Health and Coastal Health & Wellness Governing Board, in their responsibilities regarding fiscal management.

Internal Control Procedures

Each Board is responsible for the efficient, effective and financially sound operation of the organization that it oversees, and designates responsibility to designated District personnel to manage funds according to approved budgets, and to maintain the overall adequacy and effectiveness of the internal control system. An internal control system should provide reasonable assurance that an organization will accomplish effectiveness and efficiency of operations, provide reliability of financial reporting, and ensure compliance with applicable laws and regulations. Controls must ensure that assets are not exposed to unauthorized access and use. The designated District personnel have the responsibility to establish and maintain an adequate system of internal control and to furnish the Board(s), governmental agencies, District creditors, and other agencies reliable financial information on a timely basis.

To provide additional oversight, each Board will designate a group of Board members to function as a Finance Committee. The Finance Committee(s) will review monthly financial issues and/or reports of the organization for presentation to the entire Board(s). In addition, the Board(s) have the authority to approve and will incorporate into its own minutes such matters as (i) change of the organization’s name, (ii) adoption of the annual operating budget, (iii) selection or termination of the Chief Executive Officer and Chief Financial Officer, (iv) incurring debt, (v) investment policies (vi) designation of depository and investment banks purchase or sale of property, (viii) leasing of real property, (viii) institution, termination or settlement of any litigation, (x) opening up or closing checking or savings accounts, (xi) selection of the District’s public accountants, (xiii) signature authorities, and other such duties as detailed in the Board(s) by-laws. Annually, the Board(s), by its action, may designate such duties to District employees, as it deems appropriate.

Financial Management Procedures

It is the responsibility of the designated District personnel to assess financial operations and present the Board(s) with the information necessary to effect short-term management and long-term planning. Monthly financial statements should be available to the Finance Committee(s), for ultimate approval by the Board(s), no later than forty-five days after the end of the month to which they relate. Monthly financial statements should include the balance sheet and summary of operations, and should compare actual results to budgeted results with variances explained by executive officers. The District's accounting system will be organized and operated on a fund basis. As such, the District will maintain a General Fund and such Special Funds as needed. The General Fund, along with the Galveston Area Ambulance Authority will operate on a fiscal year ending September 30th. Coastal Health & Wellness will operate on a fiscal year ending March 31st. A qualified independent public accountant, selected by the Board(s), will conduct an annual audit in compliance with the Single Audit Act and GASB 34 requirements. In addition, the District will have prepared, and kept up to date an annual operating budget of revenue and expenses by fund which has been approved by the appropriate Board(s), and will adhere to guidelines established by the Chief Financial Officer to assure compliance with other requirements such as, insurance and bonding, sub-recipient monitoring, and financial reporting.

Accounting for Assets, Liabilities & Fund Balance

The District holds numerous assets including cash, receivables, inventories, property and equipment. It is the responsibility of the designated District personnel along with the Board(s) and Finance Committee(s), to ensure that policies and procedures are in effect that provide for the appropriate handling and use of these assets, and that obligations are paid and accounted for in a timely manner.

The Board(s), along with District staff, should ensure the following:

1. That there is sufficient cash to meet financial obligations, both in the short-term and long-term.
2. The District has established and follows appropriate credit and collection policies to ensure that payments are pursued and collected.
3. Inventories, property, and equipment are sufficiently controlled to ensure that the assets are appropriately used to the benefit of the District.
4. Obligations to vendors are paid appropriately and timely, and that District staff attempt to secure goods and services of appropriate quality and cost.
5. Vendors are selected based on consistency with regulatory requirements.
6. Contracts with third-party payers reflect the nature and cost of the services provided.

In order to comply with GASB 34 requirements, fixed assets will be accounted for in a self-balancing group of accounts separate and distinct from the regular General Ledger

accounts called the *General Fixed Asset Account Group*, and Long-term Liabilities will be recorded in the *General Long Term Debt Account Group*.

Revenue Procedures

District staff along with the Board(s) and Finance Committee (s) assume responsibility for ensuring that District services are billed according to the Board approved fee schedules, and that billings support requirements of third-party payers, when applicable. Procedures should also be in place to assure compliance with reimbursement requirements of grantor organizations as specified. Unbudgeted or excess revenue will be presented to the appropriate Finance Committee(s) and Board(s) for review and recommendation related to the use of these funds.

Cost Accounting & Estimating Procedures

The District will adhere to standards established in Statements of Federal Financial Accounting Standards (SFFAS) No. 4 which include: (1) accumulating and reporting costs of activities on a regular basis for management information purposes, (2) establishing responsibility segments to match costs with outputs, (3) determining the full cost of government goods and services, (4) recognizing the costs of goods and services provided by one federal entity to another, and (5) using appropriate costing methodologies to accumulate and assign costs to outputs. Practices used by District in accumulating and reporting actual costs will be consistent with its practices used in estimating costs for all programs. The District accounting system will accumulate and report related costs, distinguishing between District paid, donated services, space or equipment, and any program income authorized to be treated as match.

Property Management Procedures

The Board(s) have designated the responsibility to designated District personnel to ensure that an appropriate system is in place that adequately records, safeguards, and maintains property according to local, federal, and state standards. The District will maintain detailed records of all property and equipment, which include the description, location, serial number, vendor, acquisition cost, depreciation, and disposition as designated in the *District Fixed Asset Guidelines*. As requested, the District will provide such reports to the granting agency to which the District is accountable and will abide by disposition instructions of the funding agency when the useful life of the asset has been met. A fixed asset inventory will be conducted annually and reconciled to equipment records. All financial and programmatic records, supporting documents, statistical records and other required or pertinent records of the District will be retained as indicated in the *Records Management Guidelines*.

Compensation Procedures

The District follows compensation guidelines established by the FLSA (Fair Labor Standards Act). The Board(s), along with designated District personnel are responsible for (1) providing reasonable assurance that employees are paid at comparable rates for similar types of services in the local geographical area, and (2) that employee benefit programs are those of importance to employees, comparable to other competitors, and within the financial capabilities of the District. Normal work hours and payday schedules will be established by the Board(s). Currently, the District maintains a number of wage/salary structures utilizing a grade/step structure in each. The wage/salary structure used for a particular employee depends on their primary funding source. Employees are compensated

on a bi-weekly basis with the pay period beginning on Thursday and ending on Wednesday. For all paid positions, District will maintain an up-to-date and complete job description. Reimbursement for salary and wages will be based on documented timesheets submitted by the employee and approved by a responsible supervisory official. All employees are required to use the District's authorized time sheet for reporting work week hours.

Travel

Employees traveling on District business will be compensated based on criteria established in the *District Travel Procedures*.

Purchasing Procedures

It is the policy of the District to adhere to the guidelines established in OMB Circular A-110 and the *District Purchasing Policy* when procuring items or services for District business. These guidelines establish procedures that include, but are not limited to the following requirements (1) procure only those items, which are required to perform the mission and/or fill a bona fide need of the District, and (2) procurement will be made with complete impartiality based strictly on the merits of supplier proposals and applicable related considerations such as delivery, quantity, etc. In addition, the Board(s) and designated District personnel are responsible for adhering to the following standards of conduct as follows: (1) No employee, officer, member of the United Board of Health, the Coastal Health & Wellness Governing Board or agent of the District will participate in the selection or award or administration of a contract if a conflict of interest, real or apparent, would be involved, and (2) Members of the Board of Health or Coastal Health & Wellness Governing Board, officers, employees, or agents of the District will neither solicit nor accept gratuities, favors or anything of monetary value from contractors or potential contractors or parties to sub-agreements.

Investment Procedures

It is the policy of the District to invest public funds in a manner which will provide the highest investment return with the maximum security while meeting the daily cash flow demands of the entity and conforming to all state and local statutes governing the investment of public funds. Investment of Health District funds will follow procedures outlined in *District Investment Guidelines*.

Anti-Fraud Policy

-Last Approved
UBOH- 08/11/2021
Effective- 06/24/2009

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, and contractors (business associates).

Purpose

The purpose of this policy is to provide guidelines and controls to aid in the prevention, deterrence, and detection of fraud, theft, waste, or abuse against the District. This policy expands upon the District’s “Employee Ethics, Standards of Conduct, & Conflict of Interest Policy,” and outlines more specific responsibilities and expectations related to fraud. In addition, it is the intent of this policy to comply with federal whistleblower protection rights and remedies under 41 U.S.C. § 4712, and the *Texas Whistleblower Act* as codified under §554.001 of the Texas Government Code.

Definitions and Examples of Fraud, Theft, Waste, and Abuse

Fraud is defined as an intentional deception designed to obtain a benefit or advantage, or to cause some benefit that is due to be denied. Examples of fraud include, but are not limited to:

- Any dishonest or fraudulent act;
- Impropriety in the handling or reporting of money or financial transactions;
- Forgery or alteration of any document or account belonging to the District (e.g. checks, timesheets, invoices, contractor agreements, bid documents, purchase orders, electronic files, and other financial documents);
- Misrepresentation of financial reports;
- Misappropriation of funds, securities, supplies, inventory, or any other asset including furniture, computers, fixtures or equipment;
- Authorizing or receiving payments for hours not worked;
- Disclosing confidential and proprietary information to outside parties;
- Accepting or seeking anything of material value from contractors, vendors, or persons providing services/materials to the District that may be construed to be an attempt to influence the performance of an employee’s official duty in the scope of employment for the District; and
- Destruction, removal, or inappropriate use of records, furniture, fixtures and equipment.

Theft is defined as the act of taking something from someone unlawfully. An example of theft is taking home a printer belonging to the District and retaining it for personal use.

Waste is the loss or misuse of District resources that results from deficient practices, system controls, or decisions. An example of waste is incurring a late fee when registering for a conference due to an oversight or lack of attention.

Abuse is the intentional, wrongful, or improper use of resources, or misuse of rank, position, or authority which causes the loss or misuse of resources, such as tools, vehicles, computers, copy machines, etc. An example of abuse would be using District equipment or supplies to conduct personal business.

Policy

The District's Anti-Fraud policy is designed to promote consistent, legal, and ethical organizational behavior by:

- Assigning responsibility for reporting fraud, theft, waste and/or abuse;
- Providing guidelines to conduct investigations of suspected fraudulent behavior; and
- Making anti-fraud awareness training available annually.

Whistleblowing

The District firmly stands behind its policy declaring that employees will not be discharged, demoted or otherwise discriminated against in retaliation for whistleblowing, so long as it is performed in good faith. In addition, whistleblower rights and remedies cannot be waived by any agreement, policy, form, or condition of employment.

Whistleblowing is disclosing information that the employee reasonably believes in good faith is evidence of the following:

- Gross mismanagement of a federal or state issued contract or grant;
- Gross waste of federal, state or county funds;
- Abuse of authority relating to a federal or state issued contract or grant;
- Substantial and specific danger to public health or safety; and/or
- Violation of a law, rule, or regulation related to a federal or state issued contract or grant (including the competition for, or negation of the contract or grant).

In accordance with state or federal law, a District employee may be required to disclose the fraud, waste, or abuse to one of the following individuals:

- A member of Congress or a representative of a congressional committee;
- An inspector general;
- A government accountability office;
- A federal, state or county employee responsible for contract or grant oversight or management at the relevant agency;
- An official from the Department of Justice or other law enforcement agency;
- A court or grand jury; or
- A management official or other employee of the contractor or grantee who has responsibility to investigate, discover or address misconduct.

Responsibility to Report Suspected Fraud

Each employee is required to report any suspected fraud, theft, waste, abuse or other dishonest conduct to the Chief Compliance Officer and/or the Human Resources Director. Supervisors are required to report suspected fraud, theft, waste, abuse or other dishonest conduct, including reports from employees or other individuals to the Chief Compliance Officer and/or the Human Resources Director.

The identity of an employee or complainant who, in good faith, reports suspected fraud will be protected to the fullest extent allowed by law. Suspected improprieties and/or misconduct concerning an

employee's ethical conduct should be reported to the Chief Compliance Officer and/or Human Resources Director. All employees are responsible for the detection and prevention of fraud, misappropriations, and other irregularities. Each administrator shall be familiar with the types of improprieties that might occur within his or her designated area of responsibility, and shall remain alert for any indication of fraud. Any fraud that is detected or suspected must be reported immediately to the Chief Compliance Officer and/or Human Resources Director, and an internal investigation may subsequently commence. All employees will be held accountable to act within the District's official "Code of Conduct," which maintains that no form of fraud, theft, waste or abuse shall be tolerated.

A whistleblower who believes he/she is being retaliated against for making a report of suspected fraud, waste or abuse should contact the Chief Compliance Officer or Human Resources Director immediately. A whistleblower who believes that he/she is being retaliated against may additionally contact an authoritative official or manager of the external oversight agency involved.

Employees suspicious of fraud, theft, waste or abuse occurring either within the organization or to the detriment of a third-party (e.g. Medicare fraud), may also report the suspected violation anonymously by visiting www.fraudhl.com (Company ID: GCHD), or via phone at 1-855-FRAUD-HL.

Guidelines for Handling a Report of Suspected Fraud, Theft, Waste, or Abuse

Whether the initial report is made to an employee's supervisor, the Chief Compliance Officer, and/or Human Resources Director, the reporting employee/individual should immediately be instructed to:

- Not contact the suspected individual in an effort to determine facts or demand restitution;
- Refrain from further investigating the allegations;
- Observe strict confidentiality by not discussing the case, facts, suspicions, or allegations with anyone unless specifically asked to do so by the Chief Compliance Officer and/or Human Resources Director;
- Report any form of retaliation against him/her concerning report of the suspected fraudulent activity; and
- Understand that the identity of an employee or other individual who reports a suspected act of fraud will be protected as provided by this policy.

Investigation of Complaints

The Chief Compliance Officer and/or Human Resources Director will promptly initiate an investigation into any allegation of fraud, theft, waste or abuse. The Chief Compliance Officer and/or Human Resources Director will make every reasonable effort to determine the facts pertinent to the complaint.

The investigation may include, but is not limited to, interviews with witnesses and discussions with involved parties. During the course of the investigation, the alleged perpetrator may be placed on paid administrative leave to allow for the investigator to work unimpeded. All investigations of fraud, theft, waste or abuse complaints shall be conducted as discreetly as possible. Upon conclusion of the investigation, the Chief Compliance Officer, the Human Resources Director and the employee's supervisor will convene to discuss the investigation's results and next steps.

The Chief Compliance Officer, Human Resources Director or other designated investigator shall make every effort to protect the rights and the reputations of everyone involved in a report of suspected fraud,

including the individual who in good faith alleges perceived misconduct, as well as the alleged violator(s).

If findings support the accused employee was in violation of this policy, that employee shall be subject to disciplinary action up to and including termination.

Whistleblower Remedies

In accordance with federal and state law, if a good faith whistleblower is subjected to retaliation, any of the following remedies on behalf of the whistleblower may be enacted (or done so by his/her representative):

- Action to stop the reprisal;
- Action to reinstate the whistleblower to the position held prior to the reprisal, together with compensatory damages (including back-pay), employment benefits, and other terms and conditions of employment that would apply to the person in that position if the reprisal had not been taken; and/or
- The provision of monetary compensation issued to the whistleblower in an amount equal to the total amount of all costs and expenses (including attorneys' fees and expert witnesses' fees) that were reasonably incurred by the whistleblower for bringing forth the complaint regarding the reprisal.

If relief is denied, the employee has the right to file a complaint in state or federal court (whichever venue is applicable under the circumstances) against the District for compensatory damages and other available relief.

Quarterly Compliance Report

Investigated incidents of suspected fraud shall be reported to District boards on a quarterly basis. The Compliance Report may include information including, but not limited to, the circumstances that triggered the investigation, the outcome of the investigation, and subsequent corrective action(s) enacted.

Violations and Corrective Actions

Employees who violate the “Anti-Fraud Policy” and/or related procedures will be subjected to corrective action up to and including termination, in accordance with the District’s “Corrective Action Policy.” An employee who has engaged in any form of fraud, waste, or abuse; suspects or discovers fraudulent activity and fails to report his or her suspicions as required by this policy; or who intentionally reports false or misleading information is subject to such corrective action, up to and including termination.

Anti-Fraud Awareness Training

The Chief Compliance Officer and/or designee will conduct employee training and/or provide training materials to all employees on an annual basis.

Drug-Free Workplace Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, students, and contractors (business associates).

Policy

The District shall provide a drug-free workplace in compliance with the Drug-Free Workplace Act of 1988.

It is a violation of the *Drug-Free Workplace Policy* to be under the influence of, or manufacture, use, possess, sell, trade, and/or offer for sale alcohol, illegal drugs, or intoxicants while representing the District, conducting District related business, during all working hours, while on District property, operating any vehicle owned by the District, and/or while present at District sponsored events.

Drug/Alcohol Testing

Prospective District employees shall be required to take a drug test AFTER a pending offer of employment. If the test returns a positive result, the pending offer may be revoked, and the candidate will receive notification of this revocation in the form of an adverse action letter. Prospective employees wishing to dispute a positive result may have the same sample retested at their own expense.

Employees may be required to take a “for cause” drug or alcohol test if approved by the Chief Executive Officer (“CEO”) or designee, or by the employee’s supervisor. These parties may approve “for cause” drug testing if there exists a reasonable and impartial reason for the party ordering the test to believe the subjected employee is under the influence of a substance banned in accordance with this policy.

Supervisors are responsible for contacting Human Resources immediately if it is suspected that an employee is under the influence of drugs and/or alcohol while carrying out duties of their employment.

Any employee who is operating a company owned vehicle and is involved in a vehicle accident or incident that results in damage or injury to any vehicle, personal or private property, or person, regardless of fault, will be drug and alcohol tested immediately after the incident.

To assure compliance, District executives may initiate, as needed, random drug/alcohol testing in service areas where indicated (*Reference: Vehicle Accident/Incident policy*).

Consequences

Any employee who tests positive for illegal substances, including prescription drugs without a valid prescription, is subject to immediate termination. An employee will be subject to the same consequences of a positive drug test if he/she refuses the screening or test, adulterates or dilutes the specimen, substitutes the specimen with that from another person, refuses to sign required forms or refuses to cooperate in the testing process in such a way that prevents accurate completion of the test.

One of the goals of the *Drug Free Workplace Policy* is to encourage employees to voluntarily seek help with alcohol and/or drug related problems. Disciplinary action will not be taken against an employee who voluntarily identifies him/herself as experiencing issues with drugs and/or alcohol, and who obtains official documented counseling and/or rehabilitation, either through the District's employee assistance program (EAP) or elsewhere, and thereafter refrains from using illegal drugs and/or abusing alcohol in accordance with the provisions of this policy.

Reporting to Outside Agencies

Should an employee hold a license or certification from a state or federal agency (e.g. RN, paramedic, M.D., D.D.O., registered sanitarian, etc.), the District shall report the positive test result to the applicable agency in accordance with rules and regulations set forth by the licensing agency.

Tobacco Use

The District is dedicated to improving the health and wellbeing of the communities it serves. As part of this mission, all persons including employees, volunteers, students, patients, visitors, vendors, contractors and others who appear at facilities designated for District business are prohibited from using tobacco products inside or within fifty (50) feet of any District buildings, facilities and vehicles. Tobacco products include, but are not limited to, cigarettes, cigars, pipes, and other smoking products; dip, chew, snuff and any other smokeless tobacco products; and electronic products that deliver nicotine or other substances, such as electronic cigarettes or vaporizers.

The District strongly encourages tobacco users interested in quitting to learn more about free smoking cessation support by calling 1-877-YES-QUIT, or visiting www.yesquit.org.

Assistance/Information

Employees are encouraged to make use of the District's employee assistance program if they are concerned that they or a family member may have a drug and/or alcohol problem. Employees proactively seeking treatment through the employee assistance program will receive no disciplinary sanction for seeking such assistance.

Confidentiality

Information received by the District regarding drug test results and/or an employee's mandatory or self-referral to the employee assistance program is confidential, and such information shall be made solely to those individuals on a need-to-know basis.

Violation

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including termination. It is the intent of this policy to be in compliance with the Drug-Free Workplace Act of 1988.

Employee Assistance Program Policy

Audience/Eligibility

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy

It is the District’s policy to provide an Employee Assistance Program (EAP) that provides confidential, professional assistance to help employees and/or their immediate family members to resolve problems that affect their personal lives and/or performance on the job.

Self-Referrals

Employees are encouraged to seek assistance for a personal problem by contacting the EAP before job performance is impaired. Self-referrals are confidential, and no contact is made between the EAP and supervisors. Vacation, sick, or personal leave is to be used for any time missed from work due to a self-referral to the EAP. It is the employee’s responsibility to request supervisory approval for scheduled absences. (*Reference: Attendance policy*)

Mandatory Referrals

Supervisors may refer employees to the EAP based on documented deteriorating or unsatisfactory job performance. Employees with a mandatory referral to the EAP will use Administrative Leave for those appointments that occur during business hours (*Reference: Employee Leave policy*).

If an employee is given a mandatory referral to the EAP and does not make contact with the EAP within the allotted timeframe, or does not complete the recommended treatment plan, the employee will subject to termination. (*Reference: Corrective Action and Employee Leave policies*)

Regardless of whether the employee is referred to the EAP, the usual disciplinary procedures for poor job performance will be followed if an employee's job performance continues to be unsatisfactory.

Mandatory referrals may also apply when an employee discloses substance abuse. (*Reference: Drug-free Workplace policy*)

Confidentiality

Contact between the EAP and an employee or his/her immediate family member is confidential. In the case of a mandatory referral, the *Release of Information* signed by the employee allows Human Resources to receive a report of attendance or absence from a session. The *Release of Information* does not allow Human Resources to receive information regarding the nature of the visit unless, in the judgment of EAP staff, an employee represents a threat to himself or others or unless otherwise required by law. Mandatory referrals to the EAP shall be kept confidential and maintained by Human Resources separate from other personnel records.

Employee Corrective Action Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy

When it is determined that an employee is not meeting expectations, the most directly accountable manager is expected to take fair, consistent, appropriate, and timely corrective action.

These important factors will be considered in all applications of corrective action:

- the seriousness of the offense;
- the employee's past record; and
- the circumstances surrounding the particular case.

The procedures below may be **used or skipped at any time** at the approval of Human Resources and/or the Chief Executive Officer or designee.

Initial Employment Period

It is *recommended* that corrective action situations involving employees who are in their initial employment period be dealt with by progressive corrective action. However, an employee in their initial employment period may be immediately dismissed based on the recommendation of the supervisor and/or program director and review and approval by the Human Resources Director, Chief Executive Officer or designee.

Regular Employees

Progressive corrective action may be skipped at any time for those situations warranting immediate action, up to termination, depending upon the severity of the infraction and the consequences to the public and/or organization, and at the approval of Human Resources, the Chief Executive Officer or designee.

Written corrective actions are expected to be issued to the employee within one business day of the infraction and/or after the conclusion of the investigation.

Supervisors at all levels are expected to utilize the *GCHD Investigation Form* whenever possible to document any issue(s), investigation notes and other pertinent information to ensure conformity and consistency in the resolution of documentation. Upon resolution, the Investigation Form shall be given to Human Resources for appropriate archiving.

Four types of corrective action are recognized. These are: *verbal clarification*, *written warning*, *suspension*, and *dismissal*.

Progressive Corrective Action

Step 1: Verbal Clarification

When a performance problem is first identified, the supervisor is expected to thoroughly discuss the problem with the employee within one business day of the incident and/or after the conclusion of the investigation. Bringing the problem to the attention of the employee is often enough to prompt him/her to correct it willingly. The “verbal clarification” should be given to the employee in private, and out of the presence of other employees.

The offending employee will be given a verbal clarification by his/her supervisor. The supervisor, for purposes of letting the employee know that it is an official warning, will state, "**This is a verbal clarification.**" The supervisor is expected to document the verbal clarification on the *District Official Discipline Notice* to maintain documentation for future reference. This documentation should be forwarded to Human Resources for filing in the employee’s personnel file.

Step 2: Written Warning

If satisfactory performance is not achieved by issuing the employee a verbal clarification, the supervisor and/or the next level of management is expected to:

- (a) Promptly notify the employee that corrective action may occur immediately after an incident occurs. Let the employee know that as soon as the investigation is complete, and all relevant facts are gathered, the employee will be informed of the outcome and any actions to be taken.
- (b) Promptly notify the Human Resources Director of the incident and seek any guidance about subsequent action.
- (c) Investigate the incident by gathering all relevant facts, including the employee’s version of the incident.
- (d) Within one workday of finishing the investigation:
 - a. prepare a draft corrective action for review by the Human Resources Director; and
 - b. issue the approved corrective action to the employee in private, allowing time for the employee to notate comments.
- (e) Forward the corrective action along with any supporting documentation to Human Resources for filing in the employee’s personnel file.

Written corrective actions must include the following:

- (a) Complete form (or memo in some cases);
- (b) Copy of the verbal clarification attached (if applicable);
- (c) Statement of the policy or procedure violated;
- (d) Statement of consequences of actions (e.g. adverse impact to the District, disruption of workplace, impact on GCHD credibility, adverse impact on public member(s), etc.);
- (e) Clear detailed plan to correct infraction;
- (f) Statement of what will happen if the same or similar infraction occurs in the future.

Step 3: Suspension

If a formal discussion and/or written corrective action with the employee has not improved the problematic situation, the next step based upon the seriousness of the offense is suspension without pay.

A suspension is time off, not to exceed ten (10) working days, without pay for misconduct that does not rise to the level of meriting termination. Time periods for suspensions are based on FLSA status (salary/exempt vs. hourly/non-exempt) statuses, the seriousness of the infraction, and applicable Department of Labor guidelines and regulations.

The supervisor and/or next level of management is expected to:

- (a) Complete the steps set forth in Section 2 for investigating and writing a corrective action;
- (b) Work with the Human Resources Director to determine length of time for which the employee will be suspended;
- (c) Obtain all approval signatures, if necessary, prior to meeting with the employee;
- (d) Meet in private with the employee to review the area(s) of concern and the details of the suspension;
- (e) Inform the employee that failure to correct the problem may result in further disciplinary action up to and including termination;
- (f) If necessary, meet with the employee upon his/her return from suspension to review any additional aspects incorporated in the corrective action plan; and
- (g) Forward all applicable documentation to Human Resources for filing in the employee's personnel file.

Step 4: Dismissal

Based on the seriousness of the offense, the employee's past record, and the circumstances surrounding the particular case, the supervisor can initiate the termination process by documenting the reasons for dismissal, which should include any previous steps that have been taken to remedy the issue.

The supervisor and/or next level of management is expected to:

- (a) Schedule a meeting with the Human Resources Director to discuss if dismissal is appropriate;
- (b) Assist the Human Resources Director in developing a chronology of the employee's relevant disciplinary history; and
- (c) Upon receiving approval from the Chief Executive Officer, Human Resources Director or designee to proceed with the termination process, assist the Human Resources Director in drafting a termination notice for the signature of the director level manager. The termination notice will include:
 - the reason(s) for the action;
 - the effective date; and
 - signature of the Director level manager.
- (d) Meet with the employee in private or in the presence of a Human Resources representative to issue the termination notice.

Situations Warranting Immediate Dismissal

Serious behavioral issues that threaten or disrupt District operations or the work of other employees should cease immediately. Such actions may merit immediate termination.

Violation of any of the following rules will be considered adequate justification for immediate dismissal:

- use, sale, possession, transfer, manufacture, distribution, dispensation, purchase or reporting to work under the influence or effects of alcohol, illegal narcotics, or any non-medically prescribed controlled drug or substance;
- testing positive for any amount of illegal drugs, prescription drugs without a valid prescription, or alcohol;
- failure to comply with an ordered drug and/or alcohol test;
- stealing or attempting to steal property from any individual on District premises, or stealing or attempting to steal property from the District;
- bodily assault upon any person, or fighting on District property;
- indecent conduct on District premises;
- Unlawful possession or reckless use of firearms or any dangerous weapons on District property;
- threatening, intimidating, coercing, or interfering with other employees;
- insubordination to a supervisor, refusal to perform a supervisor's assignment (unless such assignment violates the law), or directing abusive or threatening language toward any District supervisor, employee, or representative;
- disclosing business information of a confidential nature to unauthorized persons, or any action by an employee that would create poor public relations;
- knowingly accepting pay for time not worked;
- acts of sabotage, or other interference with District projects;
- conviction of a felony;
- job abandonment (absence for three consecutive working days without notifying a supervisor);
- unsafe operation of equipment in a negligent manner or destruction of District material or property or the property of fellow employees;
- abusive language directed toward employees, management, customers, patients, or vendors;
- falsification of documents; or
- violation of rules of licensure or certification board.

Other inappropriate behavior may be determined to be of equal seriousness with those listed and an employee may be disciplined up to termination based upon the specific circumstances of their behavior.

Forms

- *District Official Discipline Notice*
- *GCHD Investigation Form*

Employee and Pre-hire Immunizations and Screenings

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”) employees, pre-hires, volunteers, and students.

Policy

As a condition of employment, each pre-hire and current employee must provide proof of meeting the recommended minimal immunizations requirements listed below. Any vaccine that is given in a series, the pre-hire must show proof of getting the initial dosage prior to being employed but can get the final dosages provided by GCHD as an employee. Volunteers and students are required to receive the same vaccinations as employees and at their own expense. (*Reference: Volunteer policy*)

Employees who experience a job-related exposure are required to follow post-exposure recommendations (including follow-up blood tests) as instructed by the Chief Nursing Officer or designee. Failure to follow post-exposure recommendations may result in corrective disciplinary action up to and including dismissal.

Required Immunizations

Category	Employee Group	Vaccine Requirements	Vaccine Responsibility
1	All employees	MMR, Tdap, Varicella	Proof must be shown prior to hire date. However, if needed, a Pre-hire will have up to and not greater than 60 days to show proof of immunity (titer/vaccine).
2	Health Care Employees performing tasks involving exposure to blood or blood-contaminated body fluids. For example, nurses, medical aides, providers, lab technicians, dentists, dental assistants, EMS employees and WIC staff.	All Category 1 requirements and Hepatitis B	Hepatitis B vaccine is required for state licensing. Pre-hire must show proof of beginning series, GCHD will provide remaining dosages after hire date.
3	Employees performing tasks involving exposure to animals that may have rabies.	All Category 1 requirements and Rabies	Pre-hires and Employees will be provided the vaccine by GCHD after hire date.

Tuberculosis (TB) Screening

All new employees will be required to provide a current (less than 12 months from date of

hire) TST or IGRA prior to their start date. In the event a new hire employee is a prior positive reactor, a chest X-ray (less than 12 months from date of hire) will suffice for clearance. Any employee exposed to TB will undergo post-exposure repeat screening.

Positive reactors will be evaluated by the TB Program Manager. Any employee found to have active pulmonary tuberculosis will be excluded from the workplace while contagious.

Responsibilities

Each employee is responsible for:

- providing the Immunization Program Manager, a copy of their immunization record (if available) or proof of immunity, prior to their start date; and
- keeping immunizations up to date in accordance with this policy.

All supervisors are responsible for:

- working with the Immunization Program Manager to identify the category of immunization requirements for each position;
- ensuring employees follow this policy;
- reporting non-compliance to the Chief Nursing Officer or designee; and
- taking appropriate corrective action against any employee who fails to follow this policy.

The Human Resources Director, or designee, is responsible for:

- incorporating vaccine requirements into individual job descriptions, and
- notifying pre-hires of requirements based on national guidelines adopted by the Health District.

The Immunization Program Manager, or designee, is responsible for:

- working with the supervisor to identify the category of immunization requirements for each position;
- screening pre-hires for compliance with vaccine requirements;
- establishing a system for tracking employee immunization records and assuring ongoing compliance;
- notifying the employee and supervisor of requirements, need for vaccination, and follow-up dates; and
- following protocols established by the Local Health Authority.

TB Program Manager

- Evaluates all positive Reactions of Pre-hires and employees

Violation

Violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension or dismissal.

Forms

Employee Immunization Category

Separation of Employment Policy

-Last Approved
UBOH 08/11/2021
-Effective 07/06/2005

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees.

Policy

Employees wishing to resign from the District are to submit a written notice of resignation prior to the effective date of resignation. The notice must be submitted to the employee’s supervisor(s) and the Human Resources department.

In order to meet public service commitments, it is the District’s policy that resigning employees tender at least two weeks’ notice prior to their last day of employment. District management (defined in this context as any employee officially titled a Director, Manager, Supervisor or Officer) and Coastal Health & Wellness medical and dental providers are required to provide four weeks advance notice. Requests for exceptions to advance notice requirements must be submitted, in writing, to the Chief Executive Officer or designee. Only legitimate, unavoidable circumstances shall be considered when determining whether the employee is permitted to receive unused vacation leave and compensatory time should the employee fail to conform with notification requirements (*Reference: Employee Leave Policy*).

Upon separation, employees are expected to comply with the requirements of the District’s employee retirement plan.

Accrued Leave Payouts

If an employee is involuntarily separated from employment due to a reduction in force or as a result of corrective action, the employee will receive the full balance of accrued, unused vacation leave and compensatory time based upon the maximum accrual schedules and service time as delineated by the *Employee Leave Policy*.

If an employee tenders his/her resignation notice in accordance with the applicable aforementioned timeframe, the employee will receive the full balance of accrued, unused vacation leave and compensatory time based upon the maximum accrual schedules and service time as delineated by the *Employee Leave Policy*. An employee who resigns without tendering notice in compliance with this Policy is subject to forfeiting all unused vacation leave and compensatory time. (*Reference: Employee Leave Policy*)

Outstanding sick and personal leave balances are not compensable upon separation of employment.

Checkout Interview

Human Resources shall meet with the exiting employee on or prior to the employee’s last day of work to determine the final disposition of the following:

- verify the employee's forwarding address (for W-2 purposes);
- complete benefit paperwork;

- discuss insurance conversions;
- assure the employee returns all District property (keys, id badge, etc.);
- assure all travel advances and expense reports are balanced and reconciled;
- determine method of delivery for final paycheck; and
- assess any other separation of employment matters.

Exit Survey

Human Resources shall provide the departing employee the District's exit survey on or before the employee's last day of work if the employee voluntarily separates from the organization. Results of the survey will be forwarded to the Human Resource Director, Chief Executive Officer and the employee's respective manager and/or director.

Laws

It is the intent of this policy to be in compliance with the *Fair Labor Standards Act* and the *Texas Payday Law*.

Violation

Violation of this policy will be noted in the employee's personnel file and may result in loss of accrued, unused vacation leave, as outlined above.

Sexual Harassment Policy

-Last Approved
UBOH 08/11/2021
-Effective 07/02/2004

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “the District”) employees, volunteers, students, and contractors (business associates).

Policy

The District is committed to maintaining a workplace free of sexual harassment. Sexual harassment is a violation of Title VII of the Civil Rights Act of 1964 (as amended) and, as an employer, the District can be held responsible for sexual harassment committed by its employees and agents.

Sexual harassment is any unwelcome sexual advance, request for sexual favor and/or other verbal or physical conduct of a sexual nature when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of employment (quid pro quo);
- Submission to or rejection of such conduct by an individual is used as a basis for employment decisions affecting such individual; or
- Such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Behaviors such as (but not limited to) verbal or physical advances, requests for sexual favors, making sexually explicit derogatory or suggestive remarks, making inappropriate statements or gestures based on gender, or displaying of sexually oriented books, magazines, photos, cartoons, or objects that are offensive or objectionable are common to claims of sexual harassment.

The legal definition of sexual harassment, as defined by the courts, includes different types of sexual conduct, such as:

- **Quid pro quo** - the Latin phrase meaning "something for something." This type of harassment occurs when, for example, a supervisor makes unwelcome sexual advances at a subordinate employee and submission to the advances is an expressed or implied condition of employment for receiving job benefits; or, refusal to submit to the demands results in a loss of a job benefit or in termination of employment.
- **Hostile environment** - relentless and continuing unwelcome sexual conduct that interferes with an employee's work performance or that creates an intimidating, hostile, abusive or offensive work environment.
- **Harassment by non-employees** - the agency may be liable for the sexual harassment of employees by customers, or other third parties, if the District was made aware of the improper behavior but failed to attempt to mitigate the issue.

Sexual harassment may occur in a variety of situations and circumstances. Although it is not possible to catalog every situation or conduct that constitutes sexual harassment, the following circumstances may all be applicable.

- The victim, as well as the harasser, may be a male or female.
- The victim does not have to be of the opposite gender.
- The harasser can be the victim's supervisor, a supervisor from another area, a co-worker, customer, vendor, volunteer, or contractor.
- The victim does not have to be the person who is harassed, but can be anyone adversely affected by the offensive conduct.
- The harasser's conduct is unwelcome.

Employees who experience sexual harassment should make it known to the harasser that their actions are not welcomed. The employee should indicate that they do not want the behavior to continue and that their actions make them uncomfortable. Any employee who feels that he/she is a victim of sexual harassment must immediately report the matter to their supervisor, manager, director, Human Resources Director or the Chief Compliance Officer.

Confidentiality

Information related to the complaint and issues discussed with the Human Resources Director and/or Chief Compliance Officer will be treated as confidential. However, the ability to maintain such confidentiality may be limited by law or by the best interests of the District, the employee or other employees.

False Reporting

Any employee who makes an intentionally false accusation of sexual harassment is subject to corrective disciplinary action up to and including termination.

Investigation of Complaints

The Chief Compliance Officer and/or Human Resources Director will promptly initiate an investigation into any allegation of sexual harassment. The Chief Compliance Officer and/or Human Resources Director will make every reasonable effort to determine the facts pertinent to the complaint.

The investigation may include, but is not limited to, interviews with witnesses and discussions with involved parties. During the course of the investigation, the alleged harasser may be placed on paid administrative leave to allow for the investigator to work unimpeded. All investigations of sexual harassment complaints shall be conducted as discreetly as possible. Upon conclusion of the investigation, the Chief Compliance Officer, and the Human Resources Director will convene to discuss the investigation's results and the appropriate disciplinary action, if any, to be imposed.

If findings support the charge of sexual harassment against the accused employee, that employee shall be subject to disciplinary action up to and including termination.

Accusation of Sexual Harassment

Retaliation against or disciplining any person for reporting an allegation of sexual harassment is strictly prohibited. Any employee who makes an intentionally false accusation of sexual harassment shall be subject to disciplinary action, which may include, but is not limited to, suspension, probation, or dismissal.

Training

All employees must receive training on the District’s policy and procedures related to sexual harassment. Training will be provided for new employees during orientation and for existing employees on an annual basis. Human Resources will ensure the District’s compliance with this requirement.

Law

It is the intent of this policy to be in compliance with Title VII of the Civil Rights Act of 1964 (as amended).

Vehicular Accidents/Incidents Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “District”) employees who operate vehicles owned or leased by the District.

Policy

The District is committed to maintaining a safe and productive work environment for all employees, and for ensuring that safe and efficient services are rendered to citizens of Galveston County.

Post-Accident/Incident Drug and Alcohol Testing

Any employee involved in a vehicular accident or incident, regardless of fault, is required to immediately report the accident/incident to his/her supervisor. The supervisor is responsible for removing the employee who was operating the vehicle from active duty and immediately coordinating a drug and alcohol test to be performed on the employee.

If the accident/incident occurs during regular business hours, the supervisor is responsible for picking the employee up on location of the incident and transporting the employee to a District approved drug and alcohol testing center. If the accident/incident occurs after regular business hours, the supervisor is responsible for contacting a drug testing company and requesting that a representative from the company arrive on location and perform a field drug and sobriety test on the employee. The supervisor is required to stay with the employee until the testing is complete and results are provided. In the event the accident occurs out of town and the supervisor is unable to be with the employee, the supervisor is expected to stay in constant communication with the employee until testing is complete and results have been provided.

The supervisor is responsible for contacting the applicable department’s manager or director to discuss the circumstances of the accident or incident, and may recommend that the employee be placed on paid administrative leave pending the outcome of the drug and alcohol test.

No later than the following business day after the event’s occurrence, the supervisor is responsible for notifying Human Resources and the Risk and Safety Coordinator of the event by completing and submitting an *Employee Incident or Injury Report* form to these parties. Human Resources will consult with the supervisor and departmental director regarding next steps.

Failure of an employee to complete the ordered drug and alcohol test will result in immediate termination. Any employee who tests positive for any amount of illegal drugs or prescription drugs without a valid prescription and/or alcohol will be terminated (Reference: Drug-Free Workplace Policy).

Mandatory Defensive Driving

Any employee involved in an accident/incident for which they were deemed at fault or who receives a citation while operating a vehicle in the course of District business will be required to complete an approved defensive driving and/or emergency vehicle operation course. The course will be taken at the employee’s expense and completed on the employee’s own time, and a certificate of completion must be presented to the employee’s supervisor and Human Resources within sixty (60) calendar days from the date on which the course was assigned. The employee is responsible for submitting documentation to

Human Resources within the designated timeframe. Failure to complete a mandated defensive driving and/or emergency vehicle operation course within the required time period may result in suspension or termination.

Preventable Accidents/Incidents

All vehicular accidents and incidents will be reviewed by the employee's supervisor or designee to assess whether the accident or incident was preventable, and to discuss the implementation of policies or procedures to prevent similar recurrences.

It shall be at the discretion of the employee's supervisor to work with the Human Resources Director to determine the disciplinary measure, if any, an employee engaged in a preventable incident shall be subjected to.

Violation

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including termination.

Forms

Employee Incident or Injury Report.

Volunteer Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, and contractors (business associates).

Policy

The Galveston County Health District is committed to providing the best programs and services to its clients and to the community. Volunteers help to improve community awareness of public health issues and services. Using volunteers helps educate and train potential future employees and is a cost-effective means of addressing workforce shortages.

Generally, volunteers 18 years of age and above are accepted at the Health District; however, with the approval of the Chief Executive Officer or designee, program-specific volunteer programs may be approved for an age exception as long as operational, legal, and risk reduction concerns are properly assessed.

Types of Volunteers

A volunteer is considered an individual who, beyond the confines of paid employment or contract responsibilities, contributes time and service to assist in the accomplishment of a mission. Volunteers include:

- General public
- Those associated with community-based organizations including faith-based institutions
- Health Professionals
- Students – generally under the supervision of the affiliated school’s faculty representative.
- Licensed Professionals
 - those that do not go through the Health District’s LIP credentialing process (RNs, LVNs, EMTs, Non-certified X-Ray Technicians, Registered Dental Assistants, Dental Hygienists, etc.)
 - those that go through the Health District’s LIP credentialing process (MDs, Mid Levels, Dentists, etc.)
- Those legally required to perform community service
- Public Health Emergency Preparedness volunteers

In accordance with the *Fair Labor Standards Act*, employees of the Health District may “volunteer” time to the District as long as they perform activities or volunteer services for “civic, charitable, or humanitarian reasons.” If an employee volunteers time performing duties distinctly different than their ordinary duties, they may be compensated as the Health District identifies per each unique event or volunteer opportunity which may include time reimbursed through compensatory or flex time

Orientation / Training

Volunteers will be trained on appropriate and required topics related to their area(s) of service.

Human Resources will notify the volunteer of the specific date and time of the orientation and coordinate with a program area point of contact for assignment times and dates. Volunteers will be oriented/trained by the supervisor on matters specific to the area where they will work.

Immunization Requirements

Volunteers are required to receive the same vaccinations as employees and at their own expense. Exceptions will be made on a case-by-case basis by the Chief Nursing Officer depending on areas worked, type of vaccine/communicable disease, types of exposure risk(s), mode of transmission, period of volunteerism, types of volunteer duties, local epidemiological information, etc.

Insurance

All volunteers at the Health District are expected to stay within their discipline, scope of services and activities, approved privileges and established clinical practice guidelines. All students from professional schools are expected to have a memorandum of understanding in place prior to volunteering.

Volunteers are not covered under the Health District's workers' compensation insurance policy. Those Public Health Emergency Preparedness volunteers assisting in an emergency do however receive liability protection through various state and federal laws.

Extenuating circumstances require volunteer activities and coverage to receive advanced review and approval from the Human Resources Director prior to volunteering.

Students who provide healthcare services in the Coastal Health & Wellness Clinic or within the Immunization Services area will be assigned a preceptor or a faculty oversight.

- "preceptor" is the GCHD staff person assigned to supervise the volunteer
- "faculty" is the person associated with student's teaching institution.

Violation

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including dismissal.

Forms

- Volunteer Registration
- Volunteer Timesheet
- Confidentiality Agreement
- Volunteer Program Orientation Acknowledgement

[**Back to Agenda**](#)

**Governing Board
August 2021
Item#6
Executive Report Submitted by Dr. Keiser**

[Coastal Health & Wellness August 2021 Coastal Wave \(govdelivery.com\)](https://govdelivery.com)

- a) **Executive Director**
- b) **Dental Director**

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#7

COVID-19 Update from Local Health Authority

Submitted by Dr. Keiser

[Back to Agenda](#)



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#8

Consider for Approval July 2021 Financial Report

Submitted by Andrea Cortinas

COASTAL HEALTH & WELLNESS

Governing Board



FINANCIAL SUMMARY

For the Period Ending

July 31, 2021

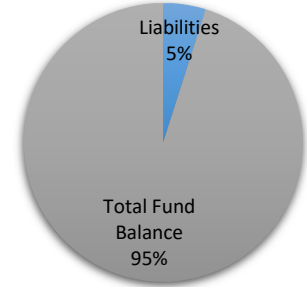
August 26, 2021

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591

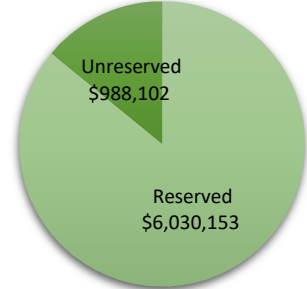
CHW - BALANCE SHEET as of July 31, 2021

	Current Month Jul-21	Prior Month Jun-21	Increase (Decrease)
ASSETS			
Cash & Cash Equivalents	\$6,451,274	\$6,389,733	\$61,542
Accounts Receivable	1,589,590	1,602,261	(12,672)
Allowance For Bad Debt	(893,202)	(853,201)	(40,001)
Pre-Paid Expenses	184,321	177,805	6,516
Due To / From	50,480	114,163	(63,683)
Total Assets	\$7,382,463	\$7,430,761	(\$48,298)
LIABILITIES			
Accounts Payable	\$99,022	\$106,503	(\$7,481)
Accrued Salaries	220,101	203,840	16,261
Deferred Revenues	45,085	46,435	(1,351)
Total Liabilities	\$364,208	\$356,778	\$7,429
FUND BALANCE			
Fund Balance	\$6,426,698	\$6,426,698	0
Current Change	591,557	647,284	(55,727)
Total Fund Balance	\$7,018,255	\$7,073,982	(\$55,727)
TOTAL LIABILITIES & FUND BALANCE	\$7,382,463	\$7,430,761	(\$48,298)

Current Period Assets



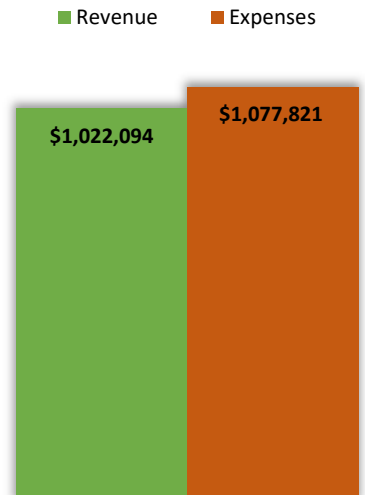
Total Fund Balance



CHW - REVENUE & EXPENSES as of July 31, 2021

	Actual Jul-21	Budgeted Jul-21	PTD Budget Variance	YTD Budget Variance
REVENUE				
County Revenue	\$311,222	\$311,222	\$0	\$0
DSRIP Revenue	178,147	65,833	112,314	(85,186)
HHS Grant Revenue	287,763	269,783	17,980	182,243
Patient Revenue	235,311	241,682	(6,371)	(72,971)
Other Revenue	9,650	8,851	800	12,656
Total Revenue	\$1,022,094	\$897,372	\$124,722	\$36,742
EXPENSES				
Personnel	\$614,199	\$615,556	\$1,357	\$109,780
Contractual	79,076	57,257	(21,819)	(37,264)
IGT Reimbursement	178,147	21,666	(156,482)	(91,484)
Supplies	72,713	80,159	7,447	74,114
Travel	2,155	2,778	623	7,597
Bad Debt Expense	40,001	24,674	(15,328)	(42,671)
Other	91,530	95,283	3,753	(1,317)
Total Expenses	\$1,077,821	\$897,372	(\$180,449)	\$18,754
CHANGE IN NET ASSETS	(\$55,727)	\$0	(\$55,727)	\$55,496

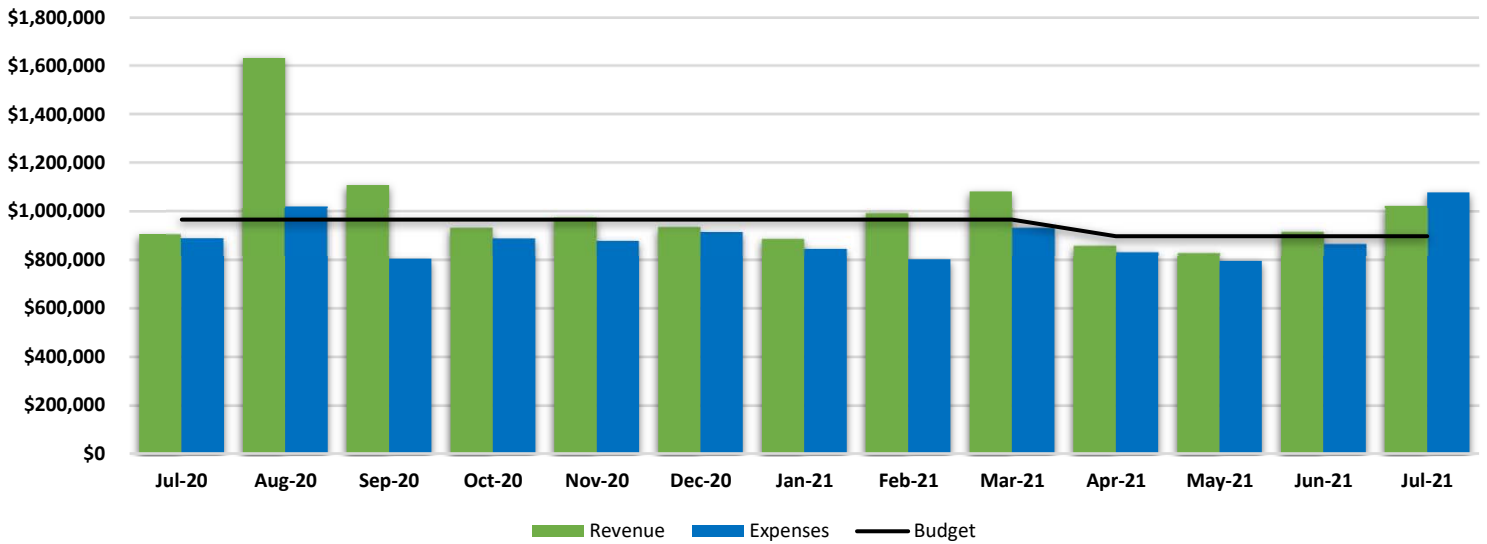
Current Month Actuals



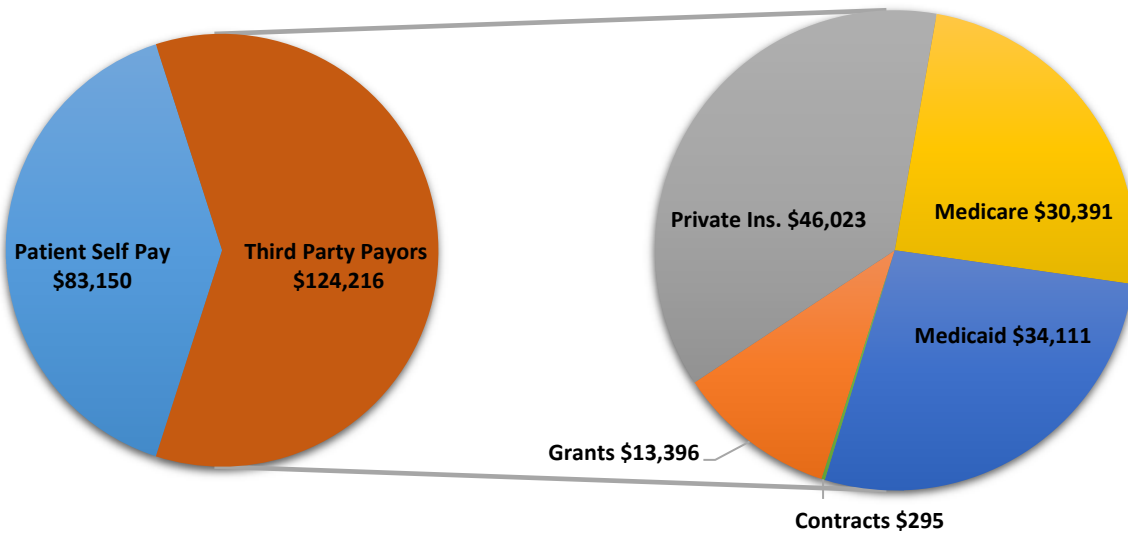
HIGHLIGHTS

- MTD decrease in fund balance of (\$55,727).
- MTD revenues were \$124,722 higher than budgeted due to DSRIP revenue received this month, as well as higher private insurance, patient fee and Covid-related grant revenues. These offset lower than budgeted pharmacy revenue.
- YTD revenues were \$36,742 higher than budgeted due to additional Covid-related grants, Medicaid incentive payments, and higher private insurance and Medicare revenues. These offset lower than budgeted pharmacy revenue.
- MTD expenses were \$180,449 higher than budgeted due mainly to unbudgeted contract services expense related to the Covid grant, timing of IGT payment, and higher than budgeted bad debt expense.
- YTD expenses were \$18,754 under budget due mainly to lower personnel and pharmaceutical supply expense. These offset unbudgeted contract services expense related to the Covid grant, timing of IGT payment, and higher than budgeted bad debt expense.
- Cumulative increase in fund balance of \$591,557. Total fund balance of \$7,018,255 as of 7/31/2021.

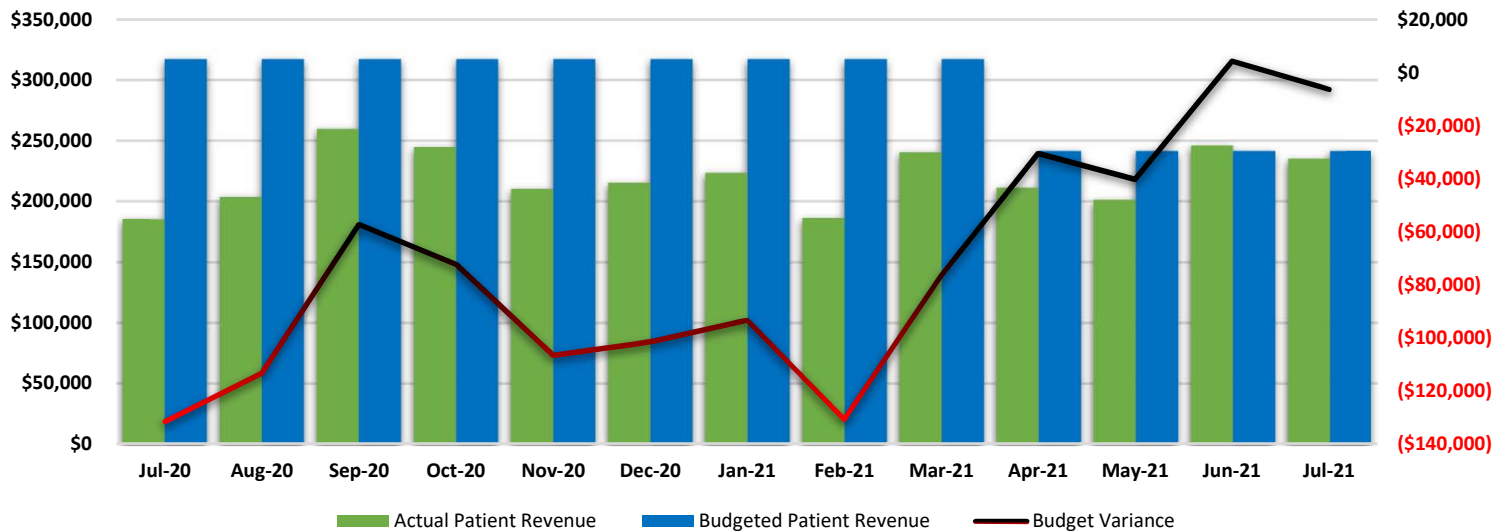
Actual Revenue & Expenses in Comparison to Budget

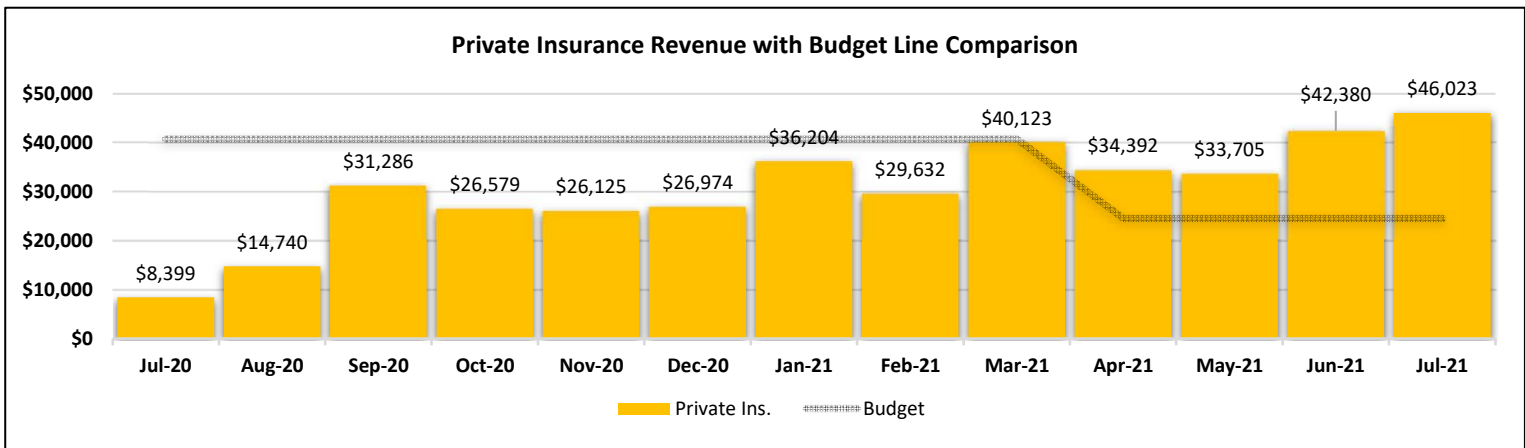
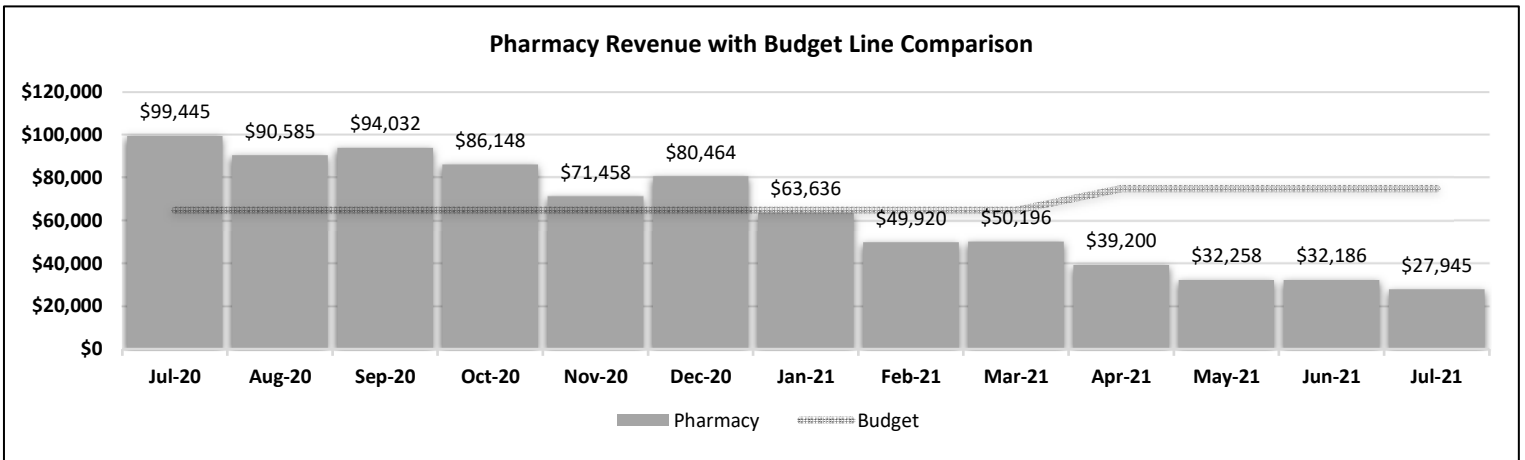
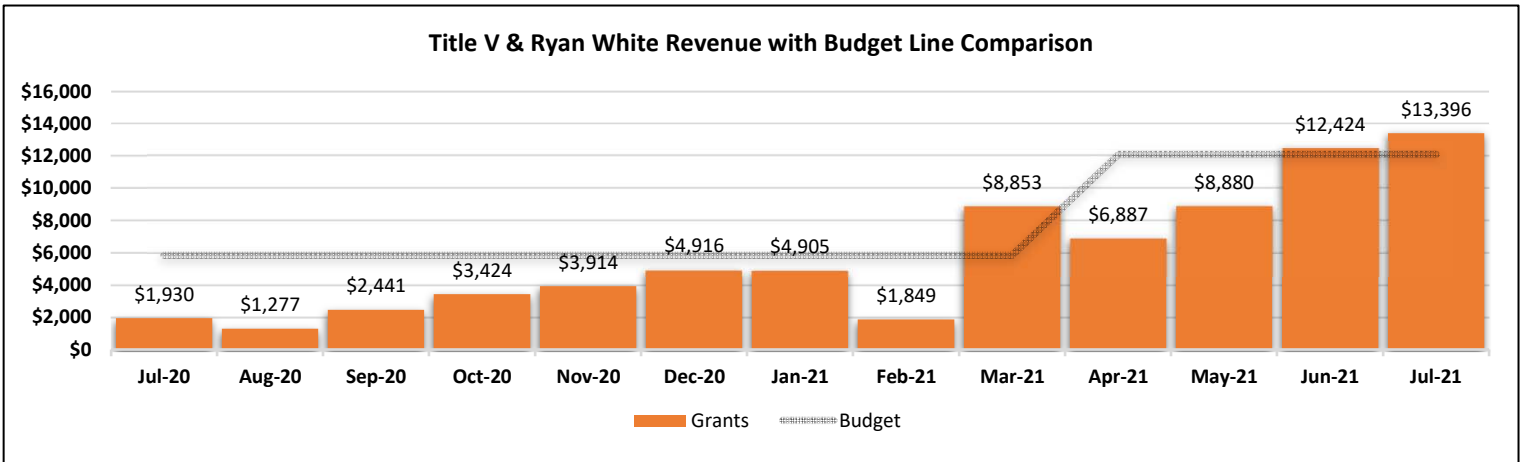
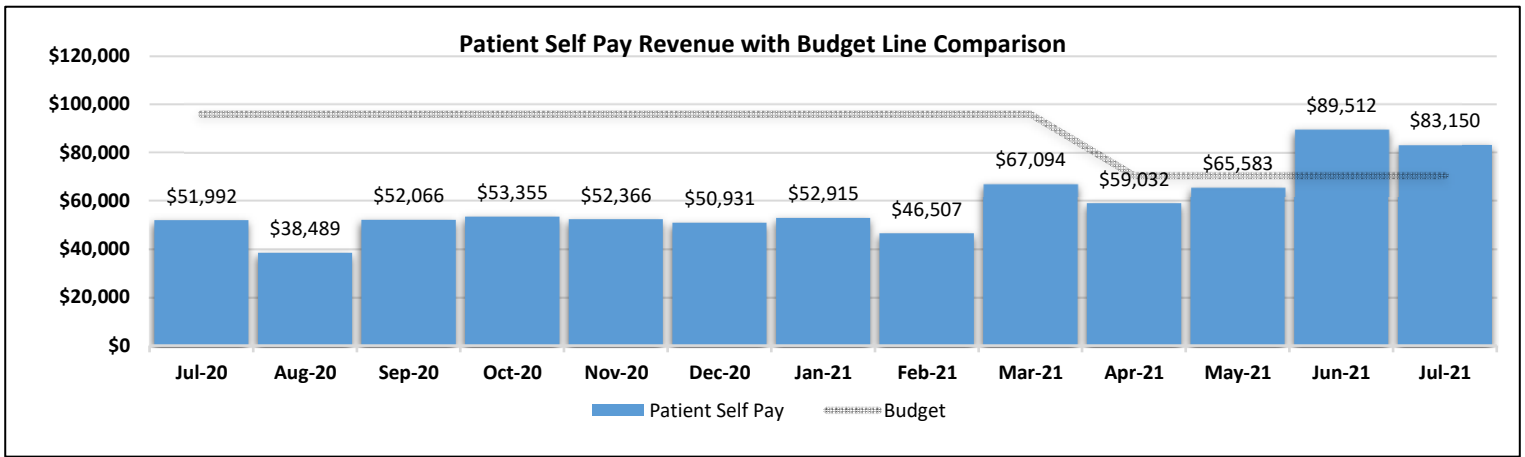


Current Period Patient Revenue with Third Party Payor Contributions Identified

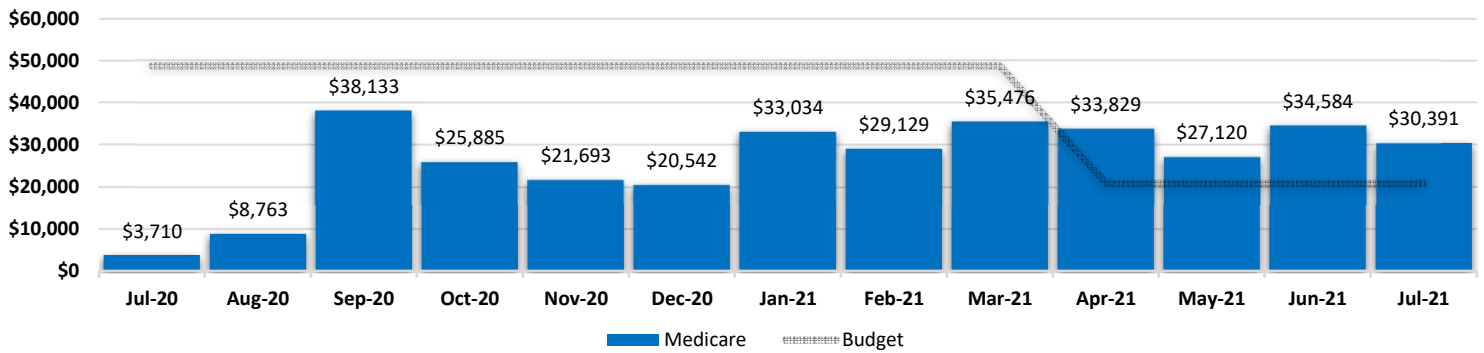


Actual Patient Revenue Rec'd vs Budget with Variance

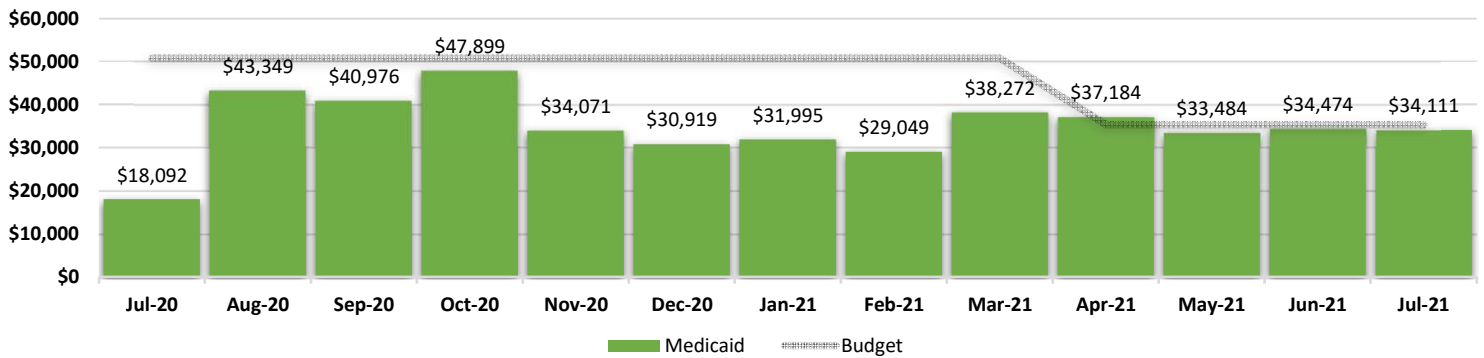




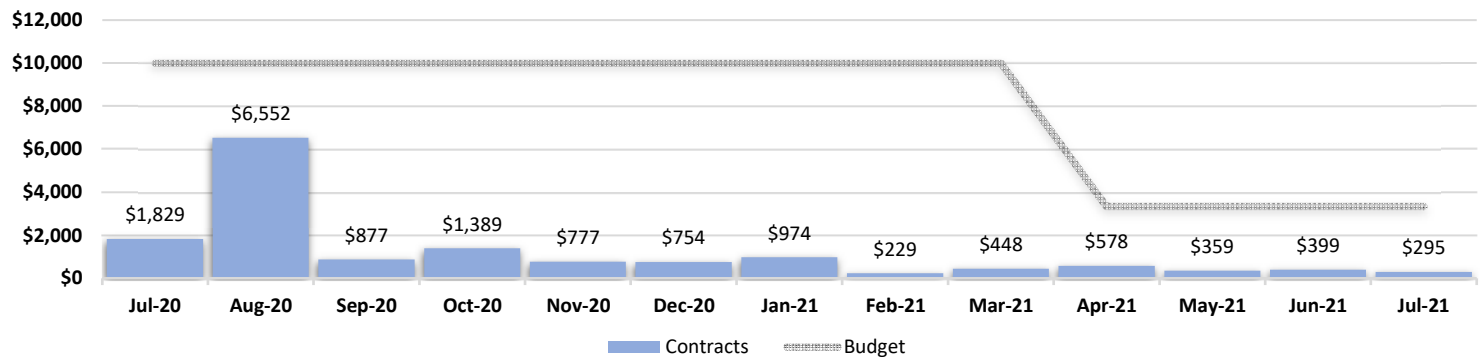
Medicare Revenue with Budget Line Comparison



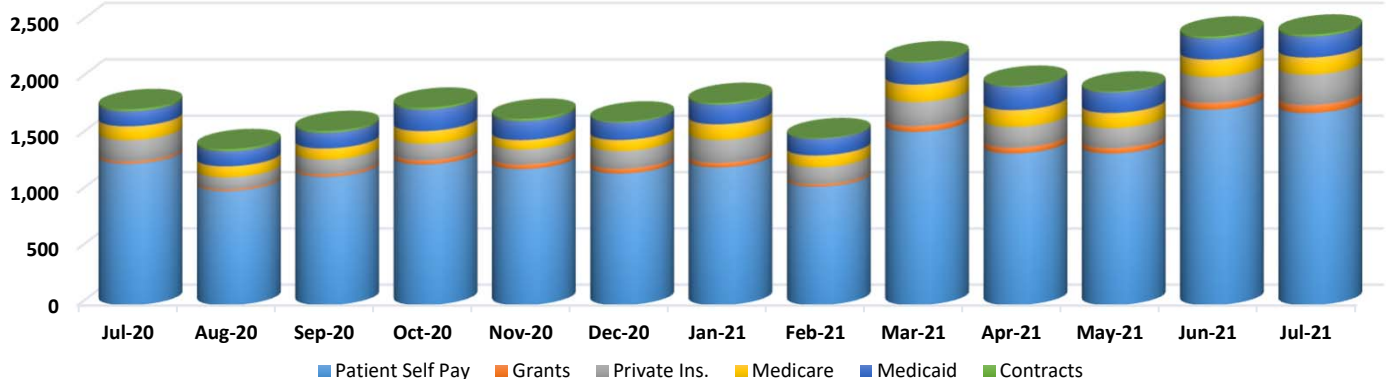
Medicaid Revenue with Budget Line Comparison



Contract Revenue with Budget Line Comparison



Total Number of Patient Visits



Coastal Health & Wellness
Statement of Revenue and Expenses for the Period ending July 31, 2021

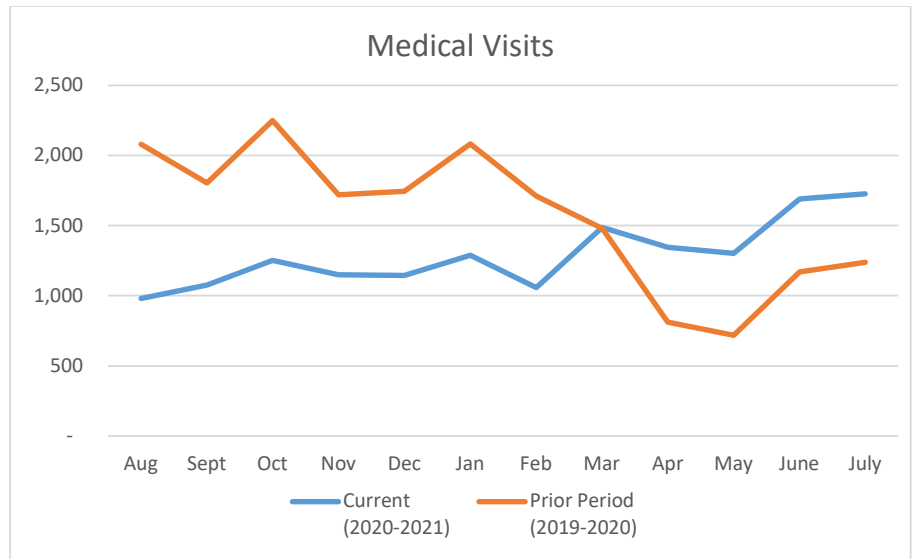
Cost Category	Account Description	Annual Budget	Period Ending 7/31/2021	MTD Budget	MTD Budget Variance	YTD Actual	YTD Budget	YTD Budget Variance
Grouping	Revenue							
HHS	HHS Grant Revenue - HRSA	3,237,400	287,763	269,783	17,980	1,234,101	1,079,133	154,968
	<i>Base Funding</i>	3,237,400	260,707	269,783	(9,076)	1,011,788	1,079,133	(67,346)
	<i>HHS QI 19</i>	-	-	-	-	-	-	-
	<i>COVID Supplemental</i>	-	-	-	-	-	-	-
	<i>COVID CARES</i>	-	8,766	-	8,766	153,395	-	153,395
	<i>COVID ECT</i>	-	18,290	-	18,290	59,990	-	59,990
	<i>HHS QI 20</i>	-	-	-	-	7,339	-	7,339
	<i>Hypertension (HTN)</i>	-	-	-	-	1,589	-	1,589
	<i>COVID ARP</i>	-	-	-	-	-	-	-
HHS	HHS Grant Revenue - Other	-	-	-	-	27,275	-	27,275
Patient	Grant Revenue (<i>Title V, Ryan White</i>)	144,977	13,396	12,081	1,314	41,586	48,326	(6,740)
Patient	Patient Fees	845,950	83,150	70,496	12,654	297,277	281,983	15,293
Patient	Private Insurance	294,821	46,023	24,568	21,455	156,500	98,274	58,226
Patient	Pharmacy Revenue - 340b	900,000	27,945	75,000	(47,055)	131,589	300,000	(168,411)
Patient	Medicare	249,596	30,391	20,800	9,592	125,924	83,199	42,725
Patient	Medicaid	424,845	34,111	35,404	(1,293)	139,253	141,615	(2,363)
Other	Local Grants & Foundations	16,208	3,351	1,351	2,000	7,403	5,403	2,000
Other	Medical Record Revenue	15,000	835	1,250	(415)	3,504	5,000	(1,496)
Other	Medicaid Incentive Payments	-	2,586	-	2,586	26,729	-	26,729
County	County Revenue	3,734,667	311,222	311,222	-	1,244,889	1,244,889	-
DSRIP	DSRIP Revenue	790,000	178,147	65,833	112,314	178,147	263,333	(85,186)
Other	Miscellaneous Revenue	-	133	-	133	234	-	234
Other	Gain on Fixed Asset Disposals	-	350	-	350	656	-	656
Other	Interest Income	70,000	2,127	5,833	(3,706)	8,377	23,333	(14,956)
Patient	CHW Contract Revenue	40,000	295	3,333	(3,038)	1,631	13,333	(11,702)
Other	Local Funds / Other Revenue	5,000	268	417	(149)	1,156	1,667	(510)
	Total Revenue	\$ 10,768,464	\$ 1,022,094	\$ 897,372	\$ 124,722	\$ 3,626,230	\$ 3,589,488	\$ 36,742
	Expenses							
Personnel	Hourly Pay	5,832,411	487,805	486,034	(1,770)	1,887,884	1,944,137	56,253
Personnel	Supplemental/Merit Compensation	-	-	-	-	-	-	-
Personnel	Provider Incentives	67,000	-	5,583	5,583	1,500	22,333	20,833
Personnel	Overtime	42,000	3,107	3,500	393	11,403	14,000	2,597
Personnel	Part-Time Hourly Pay	202,460	20,417	16,872	(3,546)	65,783	67,487	1,704
Personnel	Comp Pay Premium	-	-	-	-	-	-	-
Personnel	FICA Expense	470,018	38,103	39,168	1,065	145,883	156,673	10,789
Personnel	Texas Unemployment Tax (SUTA)	12,759	5,903	1,063	(4,840)	12,800	4,253	(8,547)
Personnel	Life Insurance Expense	14,961	1,399	1,247	(153)	5,699	4,987	(712)
Personnel	Long Term Disability Coverage	13,989	1,081	1,166	85	4,304	4,663	359
Personnel	Employer Paid Health Insurance	494,769	28,611	41,231	12,620	114,567	164,923	50,356
Personnel	Worker's Comp Insurance	18,437	1,390	1,536	146	5,337	6,146	809
Personnel	Cobra Expense	-	49	-	(49)	194	-	(194)
Personnel	Employer Sponsored Healthcare	79,016	5,079	6,585	1,506	20,956	26,339	5,383
Personnel	Pension/Retirement	138,849	11,614	11,571	(43)	44,460	46,283	1,823
Contractual	Outside Lab Contract	146,448	16,621	12,204	(4,417)	50,120	48,816	(1,304)
Contractual	Outside X-Ray Contract	18,000	1,596	1,500	(96)	5,928	6,000	72
Contractual	Misc Contract Services	237,722	38,639	19,810	(18,829)	118,252	79,241	(39,012)
Personnel	Temporary Staffing	-	9,640	-	(9,640)	31,674	-	(31,674)
Contractual	CHW Billing Contract Services	72,000	6,373	6,000	(373)	28,061	24,000	(4,061)
IGT	IGT Reimbursement	259,989	178,147	21,666	(156,482)	178,147	86,663	(91,484)
Contractual	Janitorial Contract	168,780	14,018	14,065	47	55,796	56,260	464
Contractual	Pest Control	960	80	80	(0)	320	320	(0)
Contractual	Security	43,176	1,748	3,598	1,850	7,816	14,392	6,576
Supplies	Office Supplies	82,600	18,440	6,883	(11,557)	42,240	27,533	(14,707)
Supplies	Operating Supplies	228,132	28,280	19,011	(9,269)	105,498	76,044	(29,454)
Supplies	Outside Dental Supplies	40,200	2,360	3,350	990	13,646	13,400	(246)
Supplies	Pharmaceutical Supplies	600,000	21,376	50,000	28,624	81,479	200,000	118,521
Supplies	Janitorial Supplies	5,400	-	450	450	48	1,800	1,752

Coastal Health & Wellness
Statement of Revenue and Expenses for the Period ending July 31, 2021

Cost Category	Account Description	Annual Budget	Period Ending 7/31/2021	MTD Budget	MTD Budget Variance	YTD Actual	YTD Budget	YTD Budget Variance
Supplies	Printing Supplies	5,580	18	465	447	251	1,860	1,609
Supplies	Uniform Supplies	-	-	-	-	-	-	-
Supplies	Controlled Assets (i.e. computers)	-	2,238	-	(2,238)	3,361	-	(3,361)
Other	Postage	9,000	476	750	274	2,115	3,000	885
Other	Telecommunications	64,500	6,188	5,375	(813)	22,948	21,500	(1,448)
Other	Water	372	31	31	1	122	124	2
Other	Electricity	18,000	1,339	1,500	161	5,956	6,000	44
Travel	Travel, Local	3,200	19	267	248	295	1,067	772
Travel	Travel, Out Of Town	-	-	-	-	-	-	-
Travel	Training, Local	30,135	2,136	2,511	375	2,971	10,045	7,074
Travel	Training, Out Of Town	-	-	-	-	249	-	(249)
Other	Rentals	39,240	1,740	3,270	1,530	12,540	13,080	540
Other	Leases	517,464	43,091	43,122	31	172,363	172,488	125
Other	Maint/Repair, Equip.	81,844	7,382	6,820	(561)	32,501	27,281	(5,220)
Other	Maint/Repair, Bldg.	2,400	-	200	200	5,450	800	(4,650)
Other	Maint/Repair, IT Equipment	-	-	-	-	-	-	-
Other	Insurance, Auto/Truck	108	9	9	0	34	36	2
Other	Insurance, General Liability	11,808	937	984	47	3,749	3,936	187
Other	Insurance, Bldg. Contents	18,372	1,149	1,531	382	4,597	6,124	1,527
Other	Settlements	-	-	-	-	-	-	-
Other	IT Equipment	-	-	-	-	-	-	-
Other	Operating Equipment	-	-	-	-	-	-	-
Other	Building Improvements	-	-	-	-	-	-	-
Other	Newspaper Ads/Advertising	23,600	1,223	1,967	744	4,819	7,867	3,047
Other	Subscriptions, Books, Etc.	18,623	-	1,552	1,552	169	6,208	6,039
Other	Association Dues	34,710	2,667	2,893	226	11,435	11,570	135
Other	IT Software / Licenses	259,929	22,922	21,661	(1,262)	91,887	86,643	(5,244)
Other	Prof Fees/Licenses/Inspections	1,670	-	139	139	(25)	557	582
Other	Professional Services	22,800	264	1,900	1,636	451	7,600	7,149
Other	Med/Hazard Waste Disposal	5,400	390	450	60	1,560	1,800	240
Other	Transportation	6,000	539	500	(39)	2,200	2,000	(200)
Other	Board Meeting Operations	350	88	29	(58)	288	117	(171)
Other	Service Charge - Credit Cards	7,200	1,095	600	(495)	4,008	2,400	(1,608)
Other	Cashier Over/Short	-	-	-	-	1	-	(1)
Other	Bad Debt Expense	296,083	40,001	24,674	(15,328)	141,366	98,694	(42,671)
Other	Miscellaneous Expense	-	-	-	-	3,278	-	(3,278)
	Total Expenses	\$ 10,768,464	\$ 1,077,821	\$ 897,372	\$ (180,449)	\$ 3,570,734	\$ 3,589,488	\$ 18,754
	Net Change in Fund Balance	\$ -	\$ (55,727)	\$ -	\$ (55,727)	\$ 55,496	\$ -	\$ 55,496

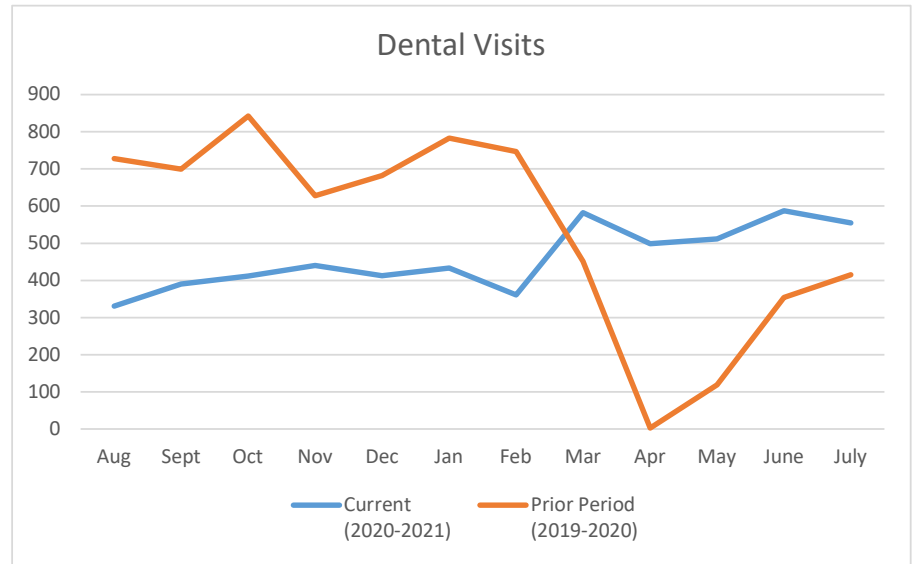
Medical Visits

	<u>Current</u> (2020-2021)	<u>Prior Period</u> (2019-2020)
Aug	981	2,081
Sept	1,077	1,804
Oct	1,251	2,250
Nov	1,150	1,719
Dec	1,145	1,745
Jan	1,288	2,082
Feb	1,058	1,710
Mar	1,488	1,480
Apr	1,345	812
May	1,301	719
June	1,689	1,170
July	1,727	1,238
	15,500	18,810



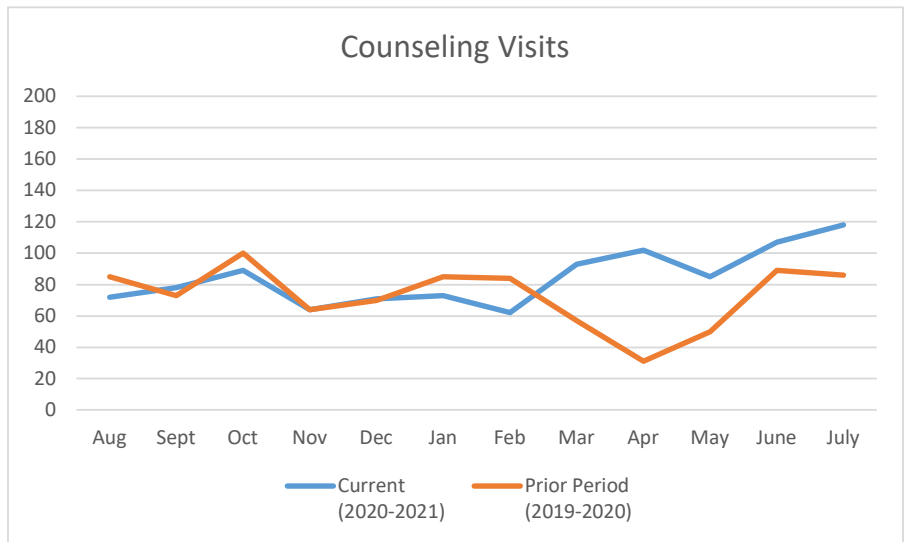
Dental Visits

	<u>Current</u> (2020-2021)	<u>Prior Period</u> (2019-2020)
Aug	331	728
Sept	390	699
Oct	412	842
Nov	440	628
Dec	413	682
Jan	433	783
Feb	361	747
Mar	582	451
Apr	499	3
May	512	119
June	587	354
July	555	415
	5,515	6,451



Counseling Visits

	<u>Current</u> (2020-2021)	<u>Prior Period</u> (2019-2020)
Aug	72	85
Sept	78	73
Oct	89	100
Nov	64	64
Dec	71	70
Jan	73	85
Feb	62	84
Mar	93	57
Apr	102	31
May	85	50
June	107	89
July	118	86
	1014	874



Vists by Financial Class - Actual vs. Budget
As of July 31, 2021 (Grant Year 4/1/2021 -3/31/2022)

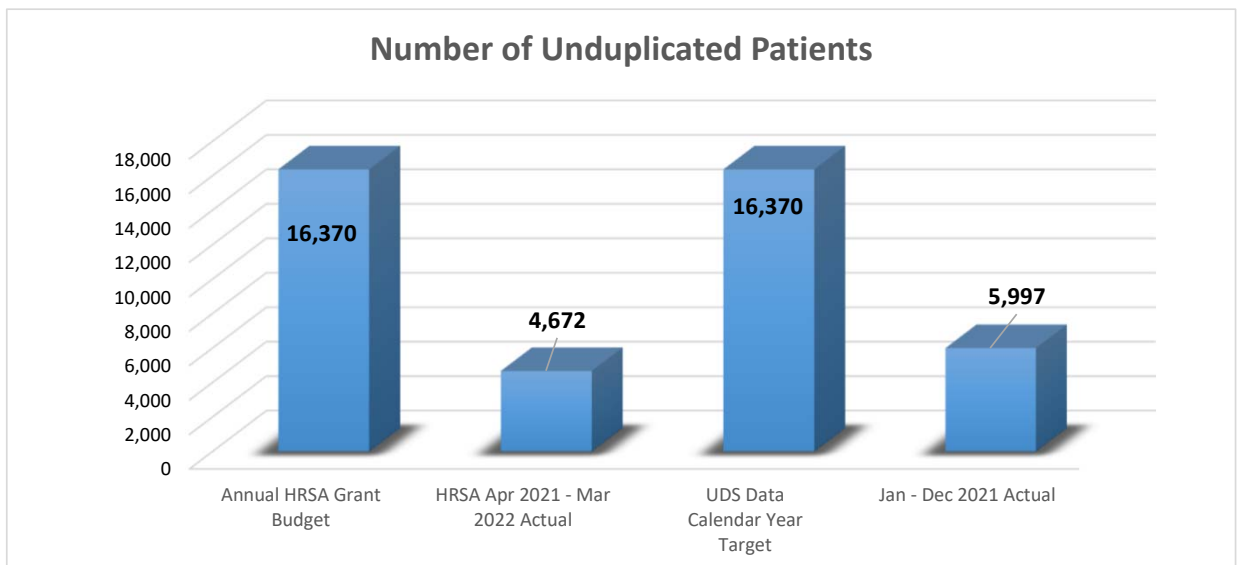
	Annual HRSA		Over/(Under)		YTD Budget	Over/(Under) YTD Budget	% Over/ (Under) YTD Budget	
	Grant Budget	MTD Actual	MTD Budget	MTD Budget				YTD Actual
Medicaid	3,147	184	262	(78)	816	1,049	(233)	-22%
Medicare	2,713	152	226	(74)	594	904	(310)	-34%
Other Public (Title V, Contract, Ryan White)	1,273	90	106	(16)	291	424	(133)	-31%
Private Insurance	2,941	269	245	24	863	980	(117)	-12%
Self Pay	24,170	1,705	2,014	(309)	6,073	8,057	(1,984)	-25%
Total	34,244	2,400	2,854	(454)	8,637	11,415	(2,778)	-24%

Unduplicated Patients - Current vs. Prior Year
UDS Data Calendar Year
January through December

Unduplicated Patients	Current Year Annual Target	Jan-Jul 2020 Actual	Jan-Jul 2021 Actual	Increase/	% of Annual Target
				(Decrease) Prior Year	
	16,370	6,337	5,997	(340)	37%

Unduplicated Patients - Current vs. Prior Year
HRSA Grant Year
April through March

Unduplicated Patients	Annual HRSA Grant Budget	Apr-Jul 2020 Actual	Apr-Jul 2021 Actual	Increase/	% of Annual Target
				(Decrease) Prior Year	
	16,370	3,286	4,672	1,386	29%



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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#9

**Consider for Approval Coastal Health & Wellness Medical Fee
Schedule Effective September 1, 2021 Submitted by Marlene Garcia**

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
Self Pay Fees					
Nominal Fee	Minimum Fee - 0% Responsibility	\$20	\$20	\$0	0%
	Deposit Payment - 20% Responsibility	\$25	\$25	\$0	0%
	Deposit Payment - 40% Responsibility	\$30	\$30	\$0	0%
	Deposit Payment - 60% Responsibility	\$35	\$35	\$0	0%
	Deposit Payment - 80% Responsibility	\$45	\$45	\$0	0%
	Deposit Payment - 100% Responsibility (required at checkin)	\$55	\$55	\$0	0%
Retck Svc CG	Returned check service charge	\$30	\$30	\$0	0%
New Patient Office Visit					
99201	Time for Counseling >= 10 Minutes Face to Face	\$89			
99202	Time for Counseling >= 20 Minutes Face to Face	\$153	\$166	\$13	8%
99203	Time for Counseling >= 30 Minutes Face to Face	\$219	\$255	\$36	16%
99204	Time for Counseling >= 45 Minutes Face to Face	\$334	\$380	\$46	14%
99205	Time for Counseling >= 60 Minutes Face to Face	\$418	\$502	\$84	20%
G0438	Initial Visit	\$353	\$382	\$29	8%
Established Patient Office Visit					
99211	Typically 5 Minutes Managing or Supervising (Nurse Visit)	\$42	\$53	\$11	26%
99212	Office o/p est sf 10-19 min	\$89	\$129	\$40	45%
99441	Phone e/m phys/qhp 5-10 min	\$89	\$129	\$40	45%
99213	Office o/p est low 20-29 min	\$150	\$208	\$58	39%
99442	Phone e/m phys/qhp 11-20 min	\$150	\$208	\$58	39%
99214	Office o/p est mod 30-39 min	\$221	\$295	\$74	33%
99443	Phone e/m phys/qhp 21-30 min	\$221	\$295	\$74	33%
99215	Office o/p est hi 40-54 min	\$296	\$411	\$115	39%
G0439	Subsequent Visit	\$240	\$301	\$61	25%
New Patient Preventive Visits					
99381	Well Child less than 1 year	\$246	\$252	\$6	2%
99382	Well Child 1 - 4 years	\$257	\$263	\$6	2%
99383	Well Child 5 - 11 years	\$267	\$273	\$6	2%
99384	Well Child 12 - 17 years	\$302	\$307	\$5	2%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
99385	Well Adult 18 - 39 years	\$292	\$299	\$7	2%
99386	Well Adult 40 - 64 years	\$339	\$345	\$6	2%
99387	Well Adult 65 years and over	\$367	\$374	\$7	2%
G0402	Initial Preventive Exam	\$369	\$382	\$13	4%
	Established Patient Preventive Visit				
99391	Well Child less than 1year	\$221	\$227	\$6	3%
99392	Well Child 1 - 4 years	\$236	\$242	\$6	3%
99393	Well Child 5 - 11 years	\$235	\$241	\$6	3%
99394	Well Child 12 - 17 years	\$258	\$264	\$6	2%
99395	Well Adult 18 - 39 years	\$264	\$270	\$6	2%
99396	Well Adult 40 - 64 years	\$280	\$287	\$7	3%
99397	Well Adult 65 years and over	\$302	\$308	\$6	2%
	Counseling Services				
90832	Psychotherapy Pt and Family (30 min.)	\$148	\$177	\$29	20%
90834	Psychotherapy Pt and Family (45 min.)	\$196	\$233	\$37	19%
90837	Psychotherapy Pt and Family (60 min.)	\$262	\$345	\$83	32%
90847	Family psychotherapy (with patient present)	\$233	\$233	\$0	0%
90853	Group psychotherapy (other than of a multiple-family group)	\$62	\$63	\$1	2%
	Special Services				
STD/HIV	STD Referral	\$22	\$22	\$0	0%
90853	Tobacco Group Counseling	\$61	\$63	\$2	3%
99499	Brief Consultation	\$20	\$20	\$0	0%
	Incision and Drainage Procedures				
10060	Incision and drainage of abscess, single	\$265	\$284	\$19	7%
10061	Incision and drainage of abscess, complicated or multiple	\$461	\$484	\$23	5%
10120	Incision and removal of a foreign object from subcutaneous tissues	\$339	\$353	\$14	4%
10140	Incision and drainage of hematoma	\$367	\$395	\$28	8%
10160	Puncture and aspiration of abscess	\$290	\$300	\$10	3%
	Paring or Cutting				
11055	Trim Skin Lesion	\$111	\$162	\$51	46%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
	Debridement Procedures				
11000	Debridement of extensive eczematous or infected skin (up to 10% of body surface)	\$123	\$133	\$10	8%
	Biopsy Procedures				
11102	Biopsy, skin and subcutaneous tissue, single lesion	\$224	\$241	\$17	8%
11103	Biopsy, skin and subcutaneous tissue, each additional lesion	\$75	\$122	\$47	63%
	Skin Tag Procedures				
11200	Remove multiple fibrocuteaneous skin tags, up to 15	\$197	\$207	\$10	5%
11201	Remove multiple fibrocuteaneous skin tags, each additional 10	\$41	\$42	\$1	2%
	Shaving Procedures				
11300	Shaving epidermal or dermal lesion, single, trunk or extremities, 0.5 cm. or less	\$220	\$240	\$20	9%
11301	Shaving epidermal or dermal lesion, single, trunk or extremities, 0.6-1.0 centimeter	\$271	\$288	\$17	6%
11305	Shaving epidermal or dermal lesion, single, scalp, neck, hands, feet or genitalia, 0.5 cm. or less	\$226	\$251	\$25	11%
11306	Shaving epidermal or dermal lesion, single, scalp, neck, hands, feet or genitalia, 0.6 -1 cm.	\$275	\$290	\$15	5%
11310	Shaving single epidermal or dermal lesion, on face, 0.5 cm or less	\$257	\$275	\$18	7%
11311	Shaving single epidermal or dermal lesion on face; lesion 0.6 to 1.0 cm	\$248	\$324	\$76	31%
11055	Paring or cutting of benign hyperkeratotic lesion (e.g.. corn, callous)	\$111	\$162	\$51	46%
	Excision Procedures				
11400	Excision of benign lesion, except skin tag, 0.5 cm. or less	\$280	\$298	\$18	6%
11401	Excision of benign lesion, except skin tag, 0.6-1.0 cm.	\$334	\$362	\$28	8%
11402	Excision of benign lesion, except skin tag, 1.1-2.0 cm.	\$369	\$399	\$30	8%
11403	Excision of benign lesion, except skin tag, 2.1-3.0 cm.	\$425	\$457	\$32	8%
11404	Excision of benign lesion, except skin tag, 3.1-4.0 cm.	\$480	\$518	\$38	8%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

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CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
11420	Excision of benign lesion, except skin tag, on scalp, neck, hands, feet, genitalia, 0.5 cm or less	\$277	\$299	\$22	8%
11421	Excision of benign lesion, except skin tag, on scalp, necks, hands, feet, genitalia, 0.6-1 cm	\$351	\$371	\$20	6%
11422	Excision of benign lesion, except skin tag, on scalp, neck, hands, feet, genitalia, 1.1-2 cm	\$391	\$417	\$26	7%
11426	Excision of benign lesion, except skin tag, on scalp, neck, hands, feet, genitalia, over 4.0 cm	\$725	\$768	\$43	6%
11440	Excision of other benign lesion, except skin tag, on face, 0.5 cm or less	\$306	\$334	\$28	9%
11441	Excision of other benign lesion, except skin tag, on face, 0.6-1 cm	\$375	\$403	\$28	7%
Nail Procedures					
11720	Debridement of nail(s) by any method, one to five	\$72	\$76	\$4	6%
11730	Complete or partial avulsion of the nail plate, single (removal of the nail without disruption of the underlying matrix or nailbed)	\$226	\$270	\$44	19%
11732	Avulsion of each additional nail plate	\$147	\$79	(\$68)	-46%
11740	Puncture of nail to remove hematoma or blood	\$114	\$130	\$16	14%
11750	Surgical excision of nail with matrix, removing the nail and the underlying nail bed (e.g.. ingrown or deformed nail)	\$395	\$395	\$0	0%
Wound Repair Procedures					
12001	Simple suture repair of wound, 2.5 cm. or less	\$200	\$215	\$15	8%
12002	Simple suture repair of wound, 2.6 to 7.5 cm.	\$242	\$259	\$17	7%
12004	Simple suture repair of wound, 7.6 to 12.5 cm.	\$284	\$300	\$16	6%
12005	Simple suture repair of wound, 12.6 to 20.0 cm.	\$357	\$400	\$43	12%
12011	Simple suture repair of wound on face, 2.5 cm. or less	\$244	\$259	\$15	6%
Destruction Procedures (Any Method)					
17000	Destruction of benign or premalignant lesions with liquid nitrogen (e.g.. actinic keratoses), first lesion	\$146	\$152	\$6	4%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
17003	Destruction wit liquid nitrogen of benign or premalignant lesions: second through 14th lesion	\$13	\$16	\$3	23%
17004	Destruction with liquid nitrogen of each additional lesion over 15	\$336	\$382	\$46	14%
17110	Destruction with liquid nitrogen of common or plantar warts, to 14 lesions	\$248	\$263	\$15	6%
17111	Destruction with liquid nitrogen of common or plantar warts (15 or more)	\$292	\$308	\$16	5%
Injection and/or Arthrocentesis Procedures					
20600	Arthrocentesis, aspiration and/or injection, <u>small</u> joint or bursa (e.g.. fingers, toes)	\$106	\$118	\$12	11%
20605	Arthrocentesis, aspiration and/or injection, <u>intermediate</u> joint or bursa (e.g.. wrist, elbow)	\$113	\$123	\$10	9%
20610	Arthrocentesis, aspiration and/or injection, <u>major</u> joint or bursa (e.g.. Shoulder, hip, knee)	\$136	\$145	\$9	7%
Splint / Strapping Procedures					
29580	Strapping, Unna Boot	\$124	\$147	\$23	19%
Male Procedures					
54050	Destruction of lesion(s), penis, chemical - podophyllin	\$300	\$323	\$23	8%
54056	Destruction of lesion(s), penis, simple, cryosurgery Liquid nitrogen	\$318	\$329	\$11	3%
Female Procedures					
56405	Incision and drainage of vulva or perineal abscess	\$274	\$324	\$50	18%
56501	Destruction of lesion(s), vulva, all methods	\$330	\$422	\$92	28%
56605	Biopsy of vulva or perineum; one lesion	\$201	\$217	\$16	8%
57420	Exam of Vagina w/Scope	\$279	\$296	\$17	6%
57454	BX/Curett of Cervix w/Scope	\$364	\$381	\$17	5%
57456	Endocerv Curettage w/Scope	\$323	\$342	\$19	6%
58100	Endometrial Biopsy	\$219	\$233	\$14	6%
58301	Removal only - intrauterine device (IUD)	\$226	\$247	\$21	9%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
58300	Insertion of Intrauterine Device (IUD) - insertion only	\$179	\$240	\$61	34%
	Removal of Foreign Body				
65205	Foreign body removal, eye	\$117	\$117	\$0	0%
69200	Foreign body removal, external auditory canal	\$232	\$232	\$0	0%
69210	Cerumen removal with spoon	\$106	\$108	\$2	2%
30300	Removal of foreign body, intranasal	\$433	\$477	\$44	10%
	RADIOLOGY				
70100	Radiologic examination, mandible	\$79	\$89	\$10	13%
70140	Radiologic examination, facial bones, less than 3 views	\$69	\$75	\$6	9%
70150	Radiologic examination, facial bones, 3 or more views	\$100	\$110	\$10	10%
70160	Radiologic examination, nasal bones, 3 or more views	\$78	\$88	\$10	13%
70210	Radiologic examination, sinuses, paranasal, less than 3 views	\$68	\$75	\$7	10%
70250	Radiologic examination, skull	\$79	\$82	\$3	4%
71045	Radiologic examination, chest, single view	\$54	\$59	\$5	9%
71046	Radiologic examination, chest, 2 views	\$66	\$78	\$12	18%
71047	Radiologic examination, chest, 3 views	\$82	\$98	\$16	20%
71100	Radiologic examination, ribs, 2 views	\$78	\$85	\$7	9%
72040	Radiologic examination, spine, cervical, 2 views (AP and lateral)	\$84	\$91	\$7	8%
72070	Radiologic examination, spine, thoracic, 2 views (AP and lateral)	\$70	\$75	\$5	7%
72100	Radiologic examination, spine, lumbar, 2 views (AP and lateral)	\$84	\$92	\$8	10%
72170	Radiologic examination, pelvis, 1 view	\$66	\$66	\$0	0%
72220	Radiologic examination, sacrum and coccyx, 2+ views (AP and lateral)	\$68	\$75	\$7	10%
73000	Radiologic examination, clavicle, 2 views	\$65	\$75	\$10	15%
73030	Radiologic examination, shoulder, 2 view (or more)	\$69	\$79	\$10	14%
73060	Radiologic examination, humerus, 2 views (AP and lateral)	\$69	\$75	\$6	9%
73070	Radiologic examination, elbow, 2 views (AP and lateral)	\$63	\$67	\$4	6%
73080	Radiologic examination, elbow, 3 or more views	\$68	\$75	\$7	10%
73090	Radiologic examination, forearm, 2 views (AP and lateral)	\$61	\$67	\$6	10%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
73100	Radiologic examination, wrist, 2 views	\$69	\$79	\$10	14%
73110	Radiologic examination, wrist, 3 views (PA, lateral and oblique)	\$84	\$94	\$10	12%
73120	Radiologic examination, hand, 2 views	\$61	\$72	\$11	18%
73130	Radiologic examination, hand, 3 views (PA, lateral and oblique)	\$74	\$84	\$10	14%
73140	Radiologic examination, finger, 3 views (PA, lateral and oblique)	\$75	\$86	\$11	15%
73502	Radiologic examination, hip, unilateral, 2 views	\$100	\$108	\$8	8%
73521	Radiologic examination, hips, bilateral, 2 views each hip including AP view of pelvis	\$88	\$95	\$7	8%
73552	Radiologic examination, femur, 2 views (AP and lateral)	\$76	\$82	\$6	8%
73560	Radiologic examination, knee, 1 or 2 views	\$74	\$79	\$5	7%
73562	Radiologic examination, knee, 3 views (AP, lateral and sunrise or oblique)	\$85	\$94	\$9	11%
73565	Radiologic examination of bilateral knees, standing AP view, weight bearing	\$85	\$94	\$9	11%
73590	Radiologic examination, leg, tibia and fibula, 2 views	\$68	\$73	\$5	7%
73600	Radiologic examination of ankle, 2 views	\$70	\$75	\$5	7%
73610	Radiologic examination, ankle, complete, 3 views (AP, lateral and oblique)	\$74	\$85	\$11	15%
73620	Radiologic examination of foot, 2 views	\$61	\$66	\$5	8%
73630	Radiologic examination, foot, complete, 3 views (AP, lateral and oblique)	\$69	\$79	\$10	14%
73660	Radiologic examination, toes, 2 views (AP and lateral)	\$62	\$67	\$5	8%
74018	Radiologic examination, abdomen/KUB (kidney, ureters, bladder), 1 view	\$56	\$69	\$13	23%
Other Office Procedures					
93000	EKG (electrocardiogram)	\$38	\$38	\$0	0%
94010	Spirometry	\$79	\$79	\$0	0%
94760	Pulse Oximetry - Noninvasive	\$6	\$6	\$0	0%
86580	TB Skin Test (PPD)	\$14	\$23	\$9	64%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
94640	Airway Inhalation Treatment	\$41	\$41	\$0	0%
	In House Labs				
82075	Alcohol Breathalyzer test	\$30	\$30	\$0	0%
80305	ETG		\$13		
82962	Glucose (finger stick) by glucometer	\$3	\$4	\$1	33%
83036	Hemoglobin A1C (finger stick)	\$10	\$10	\$0	0%
87804	Flu A and B		\$17		
82270	Occult Blood (guaiac) <i>Note: Indicate how many cards used by provider or issued to patient</i>	\$5	\$5	\$0	0%
81025	Pregnancy Test, urine	\$9	\$9	\$0	0%
87880	Rapid Strep (throat swab)	\$28	\$29	\$1	4%
81003	Urinalysis, automated, without microscopy (dipstick)	\$4	\$4	\$0	0%
80305	Urine Drug Screen (UDS) 12 panel CLIA Waived Drug Test	\$13	\$13	\$0	0%
	Send Out Labs				
	Blood Tests (General)				
84460	Alanine Aminotransferase (ALT)(SGPT)	\$6	\$6	\$0	0%
82040	Albumin	\$5	\$5	\$0	0%
82088	Aldosterone	\$46	\$41	(\$5)	-11%
82105	Alpha-feto Protein Panel (at 16-18 weeks gestation) (Includes: AFP Tetra, (Alpha-Fetoprotein, serum), human chorionice gonadotropin (hGC))				
82677					
84702					
86336					
82105	AFP, Serum, Tumor Marker	\$17	\$17	\$0	0%
82140	Ammonia Level, Plasma	\$15	\$15	\$0	0%
82150	Amylase + Lipase				
83690		\$14	\$14	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
82607 82728 82746 83540 83550 85025 85045	Anemia Profile (includes: CBC, iron, TIBC, B12, folic acid, ferritin) Reticulocyte Count	\$72	\$73	\$1	1%
85049	Automated Platelet Count	\$5	\$5	\$0	0%
80048	Basic Metabolic Panel (includes: calcium, carbon dioxide, chloride, creatinine, glucose, potassium, sodium and BUN)	\$9	\$9	\$0	0%
82247	Bilirubin, total newborn	\$6	\$6	\$0	0%
83880	B-Type Natriuretic Peptide (BNP)	\$40	\$40	\$0	0%
82310	Calcium	\$6	\$6	\$0	0%
82330	Calcium, Ionized	\$14	\$14	\$0	0%
85060	CBC Blood Smear-Pathology review	\$47	\$47	\$0	0%
86360	CD4/CD8	\$47	\$47	\$0	0%
82550	CK, Total	\$7	\$7	\$0	0%
82550 82552	CK, Total + Isoenzymes	\$21	\$21	\$0	0%
85025	Complete Blood Count (CBC) with Diff and Platelets	\$8	\$8	\$0	0%
80053	Comprehensive Metabolic Panel (includes: albumin, bilirubin total, calcium, carbon dioxide (bicarbonate), chloride, creatinine, glucose, phosphate alkaline, potassium, protein total, sodium, transferase alanine amino, transferase aspartate amino and BUN)	\$11	\$11	\$0	0%
84681	C-Peptide	\$21	\$21	\$0	0%
82626	Dehydroepiandrosterone (DHEA)	\$26	\$26	\$0	0%
80164	Depakote Level (valproic acid)	\$14	\$14	\$0	0%
80162	Digoxin Level	\$14	\$14	\$0	0%
80185	Dilantin Level; phenytoin total	\$14	\$14	\$0	0%
80175	Drug Screen Quan Lamotrigine	\$27	\$27	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
86663	Epstein - Barr (EB) virus, Mono IgG	\$17	\$17	\$0	0%
82670	Estradiol	\$28	\$28	\$0	0%
82728	Ferritin	\$14	\$14	\$0	0%
82746	Folic Acid (Folate)	\$15	\$15	\$0	0%
82950	Gestational Diabetes 1-HR (nonfasting)	\$5	\$5	\$0	0%
82947	Glucose Tolerance Test - 2 hours Panel	\$9	\$9	\$0	0%
82950					
84702	HCG (human chorionic gonadotropin) Quantitative, Serum	\$16	\$16	\$0	0%
85014	Hematocrit (HCT) / Hemoglobin (Hgb) Panel	\$6	\$6	\$0	0%
85018					
83021	Hemoglobin Electrophoresis (hemoglobinopathy) Panel (HgB Frac. Profile)	\$25	\$25	\$0	0%
85660					
86706	Hepatitis B Surface Antibody (Qualitative)	\$11	\$11	\$0	0%
86803	Hepatitis C AB Text	\$15	\$15	\$0	0%
87522	Hepatitis C RNA Quant	\$72	\$77	\$5	7%
80074	Hepatitis Panel, Acute (includes: hep A antibody, IgM; hep B core antibody, IgM; hep B surface antigen; hep C virus antibody)	\$48	\$48	\$0	0%
86695	Herpes Simplex, Types 1 and 2, IgG (chronic)	\$38	\$41	\$3	8%
86696					
86694	Herpes Simplex, Types 1 and 2, IgM (acute)	\$15	\$15	\$0	0%
86696	Herpes Simplex Type 2	\$20	\$63	\$43	215%
87536	HIV - 1, Quantification (RNA, Real Time PCR)	\$86	\$86	\$0	0%
87389	HIV Ag/Ab with Reflex	\$25	\$25	\$0	0%
86677	H. Pylori IgG (blood test)	\$17	\$17	\$0	0%
83498	Hydroxyprogesterone, 17-D (ACTH)	\$28	\$28	\$0	0%
83615	LDH (Lactate Dehydrogenase)	\$7	\$7	\$0	0%
83625	LDH Enzymes	\$15	\$15	\$0	0%
83655	Lead - Blood (pedi)	\$13	\$13	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
80061	Lipid Panel (includes: cholesterol serum total, HDL cholesterol, triglycerides, LDL and VLDL)	\$14	\$14	\$0	0%
80178	Lithium Blood Quantitative	\$10	\$7	(\$3)	-30%
80076 82977 83615	Liver Function Panel (includes: albumin, bilirubin total, phosphate alkaline, protein total, transferase alanine amino, transferase aspartate amino, LDH, GGT, bilirubin direct) (HFP7+2AC)	\$24	\$24	\$0	0%
83735	Magnesium, serum	\$7	\$7	\$0	0%
86765	Measles (rubeola) antibody titer	\$13	\$13	\$0	0%
86308	Mononucleosis Test	\$6	\$6	\$0	0%
86735 86762 86765	MMR Panel (Measles, Mumps, & Rubella antibody titers)	\$42	\$42	\$0	0%
86735	Mumps antibody titer	\$14	\$14	\$0	0%
83930	Osmolality, Serum	\$7	\$7	\$0	0%
83970	PTH, Intact	\$42	\$42	\$0	0%
80184	Phenobarbital	\$16	\$16	\$0	0%
84100	Phosphorus	\$5	\$5	\$0	0%
84030	PKU (phenylalanine) New Born Screening	\$6	\$6	\$0	0%
84132	Potassium, Serum	\$5	\$5	\$0	0%
85025 86850 87389 86762 86592 86901 87340 86900	Pre-Natal Profile Panel (includes: CBC, HIV-1, rubella, RPR, Rh(d), blood typing ABO, hep B antigen, RBC and antibody screen)	\$80	\$80	\$0	0%
85610	Pro Time / INR	\$5	\$5	\$0	0%
84146	Prolactin Level	\$20	\$20	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
84165 84155	Protein Electrophoresis, Serum	\$15	\$15	\$0	0%
84155	Protein Serum	\$4	\$4	\$0	0%
84153	PSA (Prostate Specific Antigen) total	\$19	\$19	\$0	0%
84244	Renin Activity (plasma)	\$22	\$22	\$0	0%
84550 85652 86038 86060 86140 86431	Rheumatoid Panel (includes: uric acid, sed rate, ANA, ASO, C-reactive protein, rheumatoid factor)	\$41	\$41	\$0	0%
86592	RPR (syphilis)	\$5	\$5	\$0	0%
86762	Rubella antibody titer	\$15	\$15	\$0	0%
85652	Sed Rate (blood test) nonautomated	\$3	\$3	\$0	0%
85660	Sickle Cell Screening	\$6	\$6	\$0	0%
84295	Sodium Serum	\$5	\$5	\$0	0%
80156	Tegretol Level (carbamazepine)	\$15	\$15	\$0	0%
83001 83002 84146 84403 84436 84443 84479	Testicular Function Profile Panel (includes: FSH, LH, prolactin level, -TSH, Testosterone Serum, T3 uptake Thyroxine (T4), Free Thyroxine Index)	\$115	\$115	\$0	0%
86376	Thyroid auto-antibodies/Thyroid Peroxidase (TPO)	\$15	\$15	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
84436 84443 84479	Thyroid with TSH Panel (includes: T3 uptake, Thyroxine (T4) Free Thyroxine Index)	\$31	\$31	\$0	0%
84439	Thyroxine Free (T4), Direct	\$10	\$10	\$0	0%
84443	TSH (thyroid stimulating hormone)	\$17	\$17	\$0	0%
84550	Uric Acid, blood	\$5	\$5	\$0	0%
86787	Varicella Zoster	\$13	\$13	\$0	0%
82607	Vitamin B12	\$16	\$16	\$0	0%
82306	Vitamin D	\$30	\$30	\$0	0%
82951	Glucose Tolerance Test (GTT) (2 hr 3 spec)	\$13			
	<i>Urine Tests (General)</i>				
82570	Creatinine Clearance 24hr urine	\$6	\$6	\$0	0%
83835	Metanephrines Quantitative 24hr UA	\$17	\$27	\$10	59%
82043 82570	Microalbumin, urine	\$11	\$12	\$1	9%
84156	Protein Total Urine 24hr total	\$4	\$4	\$0	0%
81001	Urinalysis Auto w/Scope	\$4	\$4	\$0	0%
87086	Urinalysis culture and sensitivity	\$9	\$9	\$0	0%
80307	Urinalysis, nine drug screen panel (methadone, propoxyphene, amphetamine, benzodiazepines, cocaine, opiates, phencyclidine, barbiturates, THC, methaqualone)	\$63	\$63	\$0	0%
	<i>Stool Tests (General)</i>				
87045 87046 87427	Culture, Stool (includes: Bacteria, aerobic w/isolation & preliminary exam, addition pathogens if positive, Shiga-like toxin)	\$32	\$32	\$0	0%
87046	Culture, Stool (additional pathogens if positive)	\$10	\$10	\$0	0%
87338	H-pylori Stool Ag		\$31		
82274	Occult Blood Fecal (FIT)	\$16	\$16	\$0	0%
87177 87209	Ova and Parasites direct smears Stool	\$27	\$27	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
	<i>Specialty Tests (General)</i>				
87070	Aerobic culture and sensitivity	\$9	\$9	\$0	0%
87075	Anaerobic culture and sensitivity	\$15	\$15	\$0	0%
88305	Cervical Polyp Pathology of Biopsy (cytology form) per each cut	\$42	\$42	\$0	0%
87635	Covid-19	\$57	\$57	\$0	0%
87110	Chlamydia Culture and typing		\$26		
87140					
87491	Chylmadia / Gonorrhea Trach DNA Amp Probe	\$72	\$72	\$0	0%
87591					
87081	Gonorrhea culture (vaginal, oral, rectal swab)		\$7		
87625	HPV 16/18, 45 (add on)		\$55		
88142	Pap Smear (Thin Prep liquid based for abnormal follow up)	\$21			
88175	Pap < 30		\$27		
88175	Pap 30+		\$63		
87624					
87491	Pap w/ STI < 30		\$99		
87591					
88175					
88175	Pap w/ STI 30+		\$135		
87491					
87591					
87624					
88302	Pathology of Biopsy	\$32	\$32	\$0	0%
87081	Strep Group B NAA	\$42	\$43	\$1	2%
87150					
87210	Trichomonas and Candida / Wet Mount (T&M)	\$11	\$11	\$0	0%
87070	Upper Respiratory Culture	\$9	\$9	\$0	0%
	Vaccine Administration				
90471, 90472	*Fee for any vaccine administered	\$14	\$14	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
	Vaccines (purchased)				
90632	HEP A Vaccine Adult	\$75	\$80	\$5	7%
90636	Twinrix - Hepitatis A and Hepitatis B	\$79	\$124	\$45	57%
90649	HPV (Gardasil)	\$250	\$265	\$15	6%
90657	Flu Vaccine (6-35 months old)	\$25	\$25	\$0	0%
90658	Flu Vaccine (age 3 and up)	\$25	\$25	\$0	0%
90670	Pneumococcal Conjugate 13	\$205	\$235	\$30	15%
90707	MMR	\$85	\$90	\$5	6%
90714	Td	\$45	\$45	\$0	0%
90715	TdaP	\$60	\$60	\$0	0%
90716	Varicella (Chicken Pox)	\$150	\$155	\$5	3%
90723	Pediarix (Dtap/HepB/IPV)	\$90	\$100	\$10	11%
90732	Pneumovax - Adult	\$115	\$120	\$5	4%
90734	Meningococcal (A, C, Y and W-135)	\$135	\$150	\$15	11%
90750	Zoster (shingles) vaccine		\$180		
90746	Hep B Vaccine Adult	\$65	\$70	\$5	8%
	*Vaccines (state supplied)				
	State supplied vaccines are not listed and are subject to change based on state availability.				
	*Fee for any vaccine administered				
	DT- Diptheria and Tetanus				
	DTaP - Tetanus, Diptheria, and Pertussis				
	Flu - Influenza				
	Hepatitis A				
	Hepatitis B				
	Hib - Haemophilus Influenzae Type-B				
	HPV Human Papillomavirus				
	IPV Polio				
	Kinrix - Diptheria, Pertussis Acellular, Tetanus, and Polio				
	MCV4 - Meningococcal Disease				
	Meningococcal B - Serogroup B Meningococcal Disease				

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
	MMR - Measles, Mumps, and Rubella				
	MMRV (ProQuad) - Measles, Mumps, Rubella and Varicella				
	PCV13 - 13 Types of Pneumococcal Bacteria				
	Pediarix - Tetanus, Diptheria, Pertussis, Polio and Hepatitis B				
	Pentacel - Diptheria, Tetanus, Pertussis, Poliomyelitis, & Haemophilus Influenza Type B				
	PPSV23 - 23 Types of Pneumococcal Bacteria				
	RotaTeq - Rotavirus				
	Td - Tetanus and Diptheria				
	Tdap - Tetanus, Diptheria and Pertussis				
	Varicella - Chickenpox				
	Office Medications				
96372	Administration fee for therapeutic or prophylactic injections subcutaneous or intramuscular	\$14	\$14	\$0	0%
J0561	* Bicillin Injection (state supplied)	\$0	\$0	\$0	0%
J0696	* Rocephin injection per 250mg (state supplied)	\$0	\$0	\$0	0%
J0696	Rocephin injection per 250mg (private)	\$7	\$7	\$0	0%
J0696	Rocephin injection per 500mg (private)	\$11	\$11	\$0	0%
J0696	Rocephin injection per 1 g (private)	\$15	\$15	\$0	0%
J1030	Depo-Medrol injection 40mg	\$5	\$5	\$0	0%
J1040	Depo-Medrol injection 80mg	\$7	\$7	\$0	0%
J1050	Depo-Provera injection 150mg	\$15	\$24	\$9	61%
J1200	Diphenhydramine injection up to 50mg	\$20	\$20	\$0	0%
J1815	Insulin injection	\$6	\$6	\$0	0%
J2550	Promethazine HCL 25mg (Phenegren)	\$20	\$20	\$0	0%
J2790	Rhogam	\$120	\$120	\$0	0%
J2920	Solu Medrol injection up to 40mg	\$5	\$5	\$0	0%
J2930	Solu Medrol injection up to 125mg	\$6	\$6	\$0	0%
J3420	Vitamin B12 (cyanocobalamin) injection	\$2	\$2	\$0	0%
J7620D	DuoNeb (combination of Albuterol and Ipratropium)	\$4	\$4	\$0	0%

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2021

New codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

CPT #	Procedure Description	Current Fee	Proposed Fee	Difference	% Change
J7620A	Albuterol 0.83%	\$6	\$6	\$0	0%
J7620I	Ipratropium Bromide	\$6	\$6	\$0	0%
J7620S	Albuterol Sulfate Inhaler	\$5	\$5	\$0	0%
J2310	Narcan (Naloxone HCL)	\$70	\$70	\$0	0%
J0171	Epi Pen Jr. (3 units)	\$5	\$5	\$0	0%
J0171	Epi Pen Adult (15 units)	\$5	\$5	\$0	0%
	Miscellaneous				
99070	**Supplies and Materials				

These rates were calculated based on the 2021 National Physician Fee Schedule Relative Value Unit rates rounded to the nearest whole dollar and the Clinical Diagnostic Laboratories Fee Schedule using midpoint ranges.

* These vaccines are provided to CHW at no charge by DSHS; therefore, only an administrative fee is charged.

** Fees for supplies issued to patients will be based on 150% of the original cost of the item at the time purchased.

The above codes and fees define the basic scope of services of the CHW Medical Clinic. As recommended by the medical director and approved by the COO/ Executive Director, additional codes may be used when medically indicated and financially feasible.

[Back to Agenda](#)



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#10

**Consider for Approval Coastal Health & Wellness Dental Fee Schedule
Effective September 1, 2021 Submitted by Marlene Garcia**

Proposed 2021 Fee Schedule for Dental Service

Effective 9.1.2021

Added to Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	% Change
DIAGNOSTIC EXAMS				
D0120	Periodic Oral Evaluation – Established Patient	\$ 57.00	\$ 59.00	4%
D0140	Limited Oral Evaluation – Problem Focused	\$ 84.00	\$ 88.00	5%
D0145	Oral Evaluation For A Patient Under Three Years Of	\$ 75.00	\$ 76.00	1%
D0150	Comprehensive Oral Evaluation – New Or Established	\$ 99.00	\$ 103.00	4%
D0170	Re-Evaluation – Limited, Problem Focused	\$ 77.00	\$ 78.00	1%
D0171	Re-evaluation – postoperative office visit	\$ 74.00	\$ 77.00	4%
X-RAYS				
D0210	Intraoral Complete Series (Including Bitewings)	\$ 147.00	\$ 152.00	3%
D0220	Intraoral – Periapical First Film	\$ 33.00	\$ 34.00	3%
D0230	Intraoral – Periapical Each Additional Film	\$ 28.00	\$ 29.00	4%
D0240	Intraoral x-ray - occlusal film	\$ 45.00	\$ 46.00	2%
D0272	Bitewings – Two Films	\$ 51.00	\$ 53.00	4%
D0274	Bitewings – Four Films	\$ 73.00	\$ 74.00	1%
D0330	Panoramic Film	\$ 127.00	\$ 132.00	4%
PREVENTIVE				
D1110	Prophylaxis – Adult	\$ 102.00	\$ 105.00	3%
D1120	Prophylaxis – Child	\$ 76.00	\$ 78.00	3%
D1206	Topical Fluoride Varnish; Therapeutic Application	\$ 44.00	\$ 46.00	5%
D1208	Topical application of fluoride	\$ 43.00	\$ 44.00	2%
D1320	Tobacco Counseling for the control prev of oral disease	\$ 83.00	\$ 82.00	-1%
D1330	Oral Hygiene Instructions	\$ 59.00	\$ 63.00	7%
D1351	Sealant – Per Tooth	\$ 63.00	\$ 64.00	2%
D1354	Interm Caries Arresting Medicament App - Per Tooth	\$ 73.00	\$ 73.00	0%
RESTORATIVE				
D2140	Amalgam – One Surface, Primary Or Permanent	\$ 160.00	\$ 163.00	2%
D2150	Amalgam – Two Surfaces, Primary Or Permanent	\$ 201.00	\$ 203.00	1%
D2160	Amalgam Three Surfaces, Primary Or Permanent	\$ 247.00	\$ 250.00	1%
D2161	Amalgam – Four Or More Surfaces, Primary Or Perman	\$ 290.00	\$ 292.00	1%
D2330	Resin-Based Composite – One Surface, Anterior	\$ 188.00	\$ 195.00	4%
D2331	Resin-Based Composite – Two Surfaces, Anterior	\$ 228.00	\$ 237.00	4%
D2332	Resin-Based Composite – Three Surfaces, Anterior	\$ 281.00	\$ 288.00	2%
D2335	Resin-Based Composite – Four Or More Surfaces Or I	\$ 352.00	\$ 363.00	3%
D2390	Resin-based Composite Crown, anterior	\$ 489.00	\$ 509.00	4%

Proposed 2021 Fee Schedule for Dental Service

Effective 9.1.2021

Added to Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	% Change
D2391	Resin-Based Composite One Surface, Posterior	\$ 205.00	\$ 211.00	3%
D2392	Resin-Based Composite Two Surfaces, Posterior	\$ 261.00	\$ 270.00	3%
D2393	Resin-Based Composite Three Surfaces, Posterior	\$ 320.00	\$ 328.00	3%
D2394	Resin-Based Composite – Four Or More Surfaces, Pos	\$ 380.00	\$ 391.00	3%
D2920	Recement Crown	\$ 129.00	\$ 132.00	2%
D2940	Protective restoration	\$ 139.00	\$ 145.00	4%
D2951	Pin Retention, per tooth	\$ 83.00	\$ 84.00	1%
ENDODONTICS				
D3110	Pulp Cap-Direct (excl final restoration)	\$ 94.00	\$ 98.00	4%
D3120	Pulp Cap-Indirect (excl final restoration)	\$ 93.00	\$ 97.00	4%
PERIODONTICS				
D4210	Gingivectomy or Gingivoplasty-4+ contiguous teeth	\$ 683.00	\$ 709.00	4%
D4211	Gingivectomy or Gingivoplasty, 1-3 contiguous teeth	\$ 350.00	\$ 372.00	6%
D4212	Gingivectomy or Gingivoplasty to allow access for restorative proc, per tooth	\$ 298.00	\$ 323.00	8%
D4341	Periodontal Scaling And Root Planing – Four Or Mor	\$ 288.00	\$ 293.00	2%
D4342	Periodontal Scaling And Root Planing – One To Thre	\$ 210.00	\$ 217.00	3%
D4346	Periodontal Scaling And Root Planing – Mod/Sev Gin	\$ 176.00	\$ 195.00	11%
D4355	Full Mouth Debridement To Enable Comprehensive Eva	\$ 201.00	\$ 208.00	3%
D4910	Periodontal Maintenance	\$ 152.00	\$ 156.00	3%
D5986	Fluoride Gel Carrier	\$ 217.00	\$ 230.00	6%
DENTURE ADJUSTMENTS				
D5410	Adjust Complete Denture – Maxillary	\$ 99.00	\$ 102.00	3%
D5411	Adjust Complete Denture – Mandibular	\$ 99.00	\$ 102.00	3%
D5421	Adjust Partial Denture – Maxillary	\$ 99.00	\$ 102.00	3%
D5422	Adjust Partial Denture – Mandibular	\$ 99.00	\$ 102.00	3%
ORAL SURGERY				
D7111	Extraction, Coronal Remnants – Deciduous Tooth	\$ 147.00	\$ 154.00	5%
D7140	Extraction, Erupted Tooth Or Exposed Root (Elevati	\$ 203.00	\$ 210.00	3%
D7210	Surgical Removal Of Erupted Tooth Requiring Elevat	\$ 309.00	\$ 323.00	5%
D7220	Removal Of Impacted Tooth – Soft Tissue	\$ 352.00	\$ 364.00	3%
D7230	Removal Of Impacted Tooth – Partially Bony	\$ 440.00	\$ 450.00	2%
D7250	Surgical Removal Of Residual Tooth Roots (Cutting	\$ 342.00	\$ 346.00	1%
D7270	Reimplantation and/or stabilization of accidentally displaced tooth	\$ 607.00	\$ 634.00	4%
D7310	Alveoloplasty in Conjunction w/extractions, per quadrant, 4 or more teeth or tooth spaces	\$ 338.00	\$ 342.00	1%

Proposed 2021 Fee Schedule for Dental Service

Effective 9.1.2021

Added to Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	% Change
D7311	Alveoloplasty In Conjunction With Extractions – On	\$ 323.00	\$ 342.00	6%
D7320	Alveoloplasty Not In Conjunction With Extractions, 4 or more teeth or tooth spaces	\$ 469.00	\$ 489.00	4%
D7321	Alveoloplasty not in Conjunction w/extractions, 1-3 teeth or tooth spaces, per quadrant	\$ 448.00	\$ 461.00	3%
D7471	Removal of Lateral Exostosis (Maxilla or Mandible)	\$ 796.00	\$ 845.00	6%
D7510	Incision And Drainage Of Abscess – Intraoral Soft	\$ 269.00	\$ 274.00	2%
D7910	Suture of recent small wounds up to 5 CM	\$ 327.00	\$ 331.00	1%
ADJUNCTIVE SERVICES				
D9110	Palliative (Emergency) Treatment Of Dental Pain	\$ 142.00	\$ 147.00	4%
D9120	Fixed Partial Denture Sectioning	\$ 250.00	\$ 259.00	4%
D9310	Consultation	\$ 138.00	\$ 137.00	-1%
D9430	Office Visit For Observation (During Regularly Sch	\$ 83.00	\$ 87.00	5%
D9910	Application of desensitizing medicament	\$ 64.00	\$ 67.00	5%
D9911	Application of desensitizing resin for cervical and/or root per tooth	\$ 82.00	\$ 82.00	0%
D9930	Treatment of complications (post surgical)	\$ 132.00	\$ 140.00	6%
D9951	Occlusal Adjustment - Limited	\$ 194.00	\$ 199.00	3%
D0180	Comprehensive Peridontal evaluation		\$ 112.00	
D0270	Bitewing-Single radiographic image		\$ 33.00	
D0277	Verticle bitewings-7 to 8 radiographic images		\$ 109.00	
D0470	Diagnostic casts		\$ 132.00	
D1310	Nutritional counseling for control of dental disease		\$ 72.00	
D1321	Counseling for contr and prev of adverse oral, behav and systemic health effects assoc w high-risk subst abuse		\$ 82.00	
D1353	Sealant repair		\$ 64.00	
D1352	Preventive resin restoration in a moderate to high caries risk patient-permanent tooth		\$ 121.00	
D1355	Caries preventive medicament application-per tooth		\$ 73.00	
D1551	Re-cement or re-bond bilateral space maintainer-maxillary		\$ 97.00	
D1552	Re-cement or re-bond bilateral space maintainer-mandibular		\$ 98.00	
D1553	Re-cement or re-bond unilateral space maintainer-per quadrant		\$ 97.00	
D1556	Removal of fixed unilateral space maintainer-per quadrant		\$ 93.00	
D1557	Removal of fixed bilateral space maintainer-maxillary		\$ 100.00	
D1558	Removal of fixed bilateral space maintainer-mandibular		\$ 100.00	
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration		\$ 133.00	
D2915	Re-cement or re-bond indirectly fabricated or prefabricated post and core		\$ 136.00	
D2921	Reattachment of tooth fragment, incisal edge or cusp		\$ 302.00	
D2941	Interim therapeutic restoration - primary dentition		\$ 220.00	

Proposed 2021 Fee Schedule for Dental Service

Effective 9.1.2021

Added to Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	% Change
D2955	Post removal		\$ 329.00	
D2980	Crown repair necessitated by restorative material failure		\$ 325.00	
D2983	Veneer repair necessitated by restorative material failure		\$ 352.00	
D2999	Unspecified restorative procedure, by report		\$ 244.00	
D3332	Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth		\$ 505.00	
D4249	Clinical crown lengthening-hard tissue		\$ 880.00	
D4321	Provisional splinting-extracoronary		\$ 524.00	
D6930	Re-cement or re-bond fixed partial denture		\$ 196.00	
D6980	Fixed partial denture repair necessitated by restorative material failure		\$ 432.00	
D7261	Primary closure of a sinus perforation		\$ 871.00	
D7961	Buccal/labial frenectomy (frenulectomy)		\$ 450.00	
D7962	Lingual frenectomy (frenulectomy)		\$ 450.00	
D8698	Re-cement or re-bond fixed retainer-maxillary		\$ 278.00	
D8699	Re-cement or re-bond fixed retainer-mandibular		\$ 318.00	
D9210	Local anesthesia not in conjunction with operative or surgical procedures		\$ 80.00	
D9450	Case presentaion, detailed and extensive treatment planning		\$ 166.00	

The fee schedule changes for the above services are based on the National Dental Advisory 2021 Service Pricing Guide's 50th percentile for our area.

The above codes and fees define the basic scope of services of Coastal Health & Wellness. As recommended by the dental director and approved by the Executive Director additional codes may be used when medically indicated and financially feasible.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#11

**Consider for Approval Coastal Health & Wellness Dentures, Crowns,
and Root Canal Fee Schedule Effective September 1, 2021 Submitted
by Marlene Garcia**

Proposed 2021 Fee Schedule for Dental Services Requiring a Contract

Dentures, Root Canals, Crowns and Devices

Effective 9.1.2021

Added to Contract Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	%Change
		Over 200% FPG		
D1510	Space Maintainer – Fixed – Unilateral	\$ 348.00	\$ 358.00	3%
D1516	Space Maintainer, Fixed, Bilateral, Maxillary	\$ 450.00	\$ 467.00	4%
D1517	Space Maintainer, Fixed, Bilateral, Mandibular	\$ 458.00	\$ 469.00	2%
D2740	Crown - porcelain/ceramic substrate	\$ 1,265.00	\$ 1,295.00	2%
D2750	Crown - porcelain fused to high noble metal	\$ 1,263.00	\$ 1,282.00	2%
D2790	Crown – Full Cast High Noble Metal	\$ 1,300.00	\$ 1,320.00	2%
D2791	Crown - full cast base metal	\$ 1,142.00	\$ 1,172.00	3%
D2792	Crown - full cast noble metal	\$ 1,207.00	\$ 1,222.00	1%
D2930	Prefabricated Stainless Steel Crown-Primary Tooth	\$ 297.00	\$ 306.00	3%
D2931	Prefabricated Stainless Steel Crown-Permanent Tooth	\$ 356.00	\$ 366.00	3%
D2934	Prefabricated Esthetic Coated Stainless Steel Crown-Prim Tooth	\$ 400.00	\$ 402.00	1%
D2950	Core Buildup, Including Any Pins	\$ 300.00	\$ 307.00	2%
D2952	Post and Core in Addition to crown, indirectly fabricated	\$ 458.00	\$ 465.00	2%
D2954	Prefabricated Post And Core In Addition To Crown	\$ 373.00	\$ 379.00	2%
D3220	Therapeutic pulpotomy (excluding final restoration)	\$ 225.00	\$ 235.00	4%
D3221	Pupal Debridement, primary and permanent teeth	\$ 255.00	\$ 264.00	4%
D3310	Anterior (Excluding Final Restoration)	\$ 832.00	\$ 855.00	3%
D3320	Bicuspid (Excluding Final Restoration)	\$ 948.00	\$ 974.00	3%
D3330	Molar (Excluding Final Restoration)	\$ 1,154.00	\$ 1,188.00	3%
D5110	Complete Denture - Maxillary	\$ 2,013.00	\$ 2,013.00	0%
D5120	Complete Denture – Mandibular	\$ 2,024.00	\$ 2,024.00	0%
D5130	Immediate Denture - Maxillary	\$ 2,140.00	\$ 2,140.00	0%
D5211	Maxillary Partial Denture – Resin Base (Including	\$ 1,589.00	\$ 1,589.00	0%
D5212	Mandibular Partial Denture – Resin Base (Including	\$ 1,592.00	\$ 1,592.00	0%
D5213	Maxillary Partial Denture – Cast Metal Framework W	\$ 2,082.00	\$ 2,082.00	0%
D5214	Mandibular Partial Denture – Cast Metal Framework	\$ 2,099.00	\$ 2,099.00	0%
D5225	Maxillary Partial Denture-Flexible base	\$ 1,711.00	\$ 1,766.00	3%
D5226	Mandibular Partial Denture-Flexible base	\$ 1,711.00	\$ 1,762.00	3%
D5282	Removable Unilateral Partial Denture, one piece cast metal, Maxillary	\$ 1,149.00	\$ 1,149.00	0%
D5283	Removable Unilateral Partial Denture, one piece cast metal, Mandibular	\$ 1,149.00	\$ 1,149.00	0%

Proposed 2021 Fee Schedule for Dental Services Requiring a Contract

Dentures, Root Canals, Crowns and Devices

Effective 9.1.2021

Added to Contract Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	%Change
		Over 200% FPG		
D5511	Repair Broken Complete Denture Base, Mandibular	\$ 314.00	\$ 314.00	0%
D5512	Repair Broken Complete Denture Base, Maxillary	\$ 313.00	\$ 313.00	0%
D5520	Replace Missing or Broken Teeth, complete denture, each tooth	\$ 283.00	\$ 283.00	0%
D5611	Repair Resin Partial Denture Base, Mandibular	\$ 273.00	\$ 273.00	0%
D5612	Repair Resin Partial Denture Base, Maxillary	\$ 273.00	\$ 273.00	0%
D5621	Repair Cast Framework, Mandibular	\$ 308.00	\$ 322.00	5%
D5622	Repair Cast Framework, Maxillary	\$ 309.00	\$ 328.00	6%
D5630	Repair Or Replace Broken Clasp	\$ 450.00	\$ 450.00	0%
D5640	Replace Broken Teeth – Per Tooth	\$ 283.00	\$ 283.00	0%
D5650	Add Tooth To Existing Partial Denture	\$ 283.00	\$ 283.00	0%
D5660	Add Clasp to Existing Partial Denture	\$ 450.00	\$ 450.00	0%
D5710	Rebase Complete Maxillary Denture	\$ 710.00	\$ 710.00	0%
D5711	Rebase Complete Mandibular Denture	\$ 711.00	\$ 711.00	0%
D5730	Reline Complete Maxillary Denture (Chairside)	\$ 438.00	\$ 438.00	0%
D5731	Reline Complete Mandibular Denture - Direct	\$ 438.00	\$ 438.00	0%
D5740	Reline Partial Maxillary Denture - Direct	\$ 432.00	\$ 432.00	0%
D5741	Reline Partial Mandibular Denture - Direct	\$ 433.00	\$ 433.00	0%
D5750	Reline Complete Maxillary Denture (Laboratory)	\$ 559.00	\$ 559.00	0%
D5751	Reline Complete Mandibular Denture (Laboratory)	\$ 559.00	\$ 559.00	0%
D5760	Reline Maxillary Partial Denture Indirect	\$ 506.00	\$ 527.00	4%
D5761	Reline Mandibular Partial Denture Indirect	\$ 508.00	\$ 526.00	4%
D5820	Interim Partial Denture (Maxillary)	\$ 883.00	\$ 883.00	0%
D5821	Interim Partial Denture (Mandibular)	\$ 883.00	\$ 883.00	0%
D5899	Gold Denture Crown Per Tooth	\$ 375.00	\$ 1,250.00	233%
D6240	Pontic-porcelain fused to high noble metal	\$ 1,247.00	\$ 1,271.00	2%
D6245	Pontic - porcelain/ceramic	\$ 1,247.00	\$ 1,271.00	2%
D6740	Retainer Crown – Porcelain/Ceramic Subtrate	\$ 1,268.00	\$ 1,271.00	0%
D6750	Retainer Crown - porcelain fused to high noble metal	\$ 1,255.00	\$ 1,271.00	1%
D9941	Fabrication of Athletic Mouthguard	\$ 269.00	\$ 269.00	0%
D9944	Occlusal Guard - Hard Appliance, Full Arch	\$ 500.00	\$ 626.00	25%

Proposed 2021 Fee Schedule for Dental Services Requiring a Contract

Dentures, Root Canals, Crowns and Devices

Effective 9.1.2021

Added to Contract Fee Schedule

CDT Code	CDT Description	Current Fee	Proposed	%Change
		Over 200% FPG		
D9945	Occlusal Guard - Soft Appliance, Full Arch	\$ 500.00	\$ 500.00	0%
D9946	Occlusal Guard-Hard appliance, partial arch	\$ 500.00	\$ 587.00	17%
D1575	Distal shoe space maintainer-fixed, unilateral-per quadrant		\$ 413.00	
D2751	Crown-porcelain fused to predominantly base metal		\$ 1,199.00	
D2752	Crown-porcelain fused to noble metal		\$ 1,222.00	
D2932	prefabricated resin crown		\$ 392.00	
D5284	Removable unilateral partial denture-one piece flexible base		\$ 1,207.00	
D5286	Removable unilateral partial denture-one piece resin		\$ 1,124.00	
D5720	Rebase maxillary partial denture		\$ 651.00	
D5721	Rebase mandibular partial denture		\$ 651.00	
D5863	Overdenture-complete maxillary		\$ 2,473.00	
D5864	Overdenture-partial maxillary		\$ 2,517.00	
D5865	Overdenture-complete mandibular		\$ 2,512.00	
D5866	Overdenture-partial mandibular		\$ 2,570.00	
D5876	Add metal substructure to acrylic full denture, per arch		\$ 440.00	
D6210	Pontic-cast high noble metal		\$ 1,236.00	
D6790	Retainer crown-full cast high noble metal		\$ 1,266.00	

The fee schedule changes for the above services are based on the National Dental Advisory 2021 Service Pricing Guide's 50th percentile for our area.

The above codes and fees define the basic scope of services of Coastal Health & Wellness. As recommended by the dental director and approved by the Executive Director additional codes may be used when medically indicated and financially feasible.

**Proposed Fee Schedule for Dental Contract Services
Dentures, Root Canals, Crowns and Devices
Effective 9.1.2021**

CDT Code	CDT Description	0% Pay	20%	40%	60%	80%	100%
	DENTURES	100% FPG	101-125% FPG	126-150% FPG	151-175% FPG	176-200% FPG	Over 200% FPG
D1510	Space Maintainer – Fixed – Unilateral	\$107	\$158	\$208	\$258	\$308	\$358
D1516	Space Maintainer, Fixed, Bilateral, Maxillary	\$140	\$205	\$271	\$336	\$402	\$467
D1517	Space Maintainer, Fixed, Bilateral, Mandibular	\$141	\$206	\$272	\$338	\$403	\$469
D1575	Distal shoe space maintainer-fixed, unilateral-per quadrant	\$124	\$182	\$240	\$297	\$355	\$413
D2740	Crown – E-Max Crown	\$389	\$570	\$751	\$932	\$1,114	\$1295
D2750	Crown - porcelain fused to high noble metal	\$385	\$564	\$744	\$923	\$1,103	\$1,282
D2751	Crown-porcelain fused to predominantly base metal	\$360	\$528	\$695	\$863	\$1,031	\$1,199
D2752	Crown-porcelain fused to noble metal	\$367	\$538	\$709	\$880	\$1,051	\$1,222
D2790	Crown – Full Cast High Noble Metal	\$396	\$581	\$766	\$950	\$1,135	\$1320
D2791	Crown - full cast base metal	\$352	\$516	\$680	\$844	\$1,008	\$1,172
D2792	Crown - full cast noble metal	\$367	\$538	\$709	\$880	\$1,051	\$1,222
D2930	Prefabricated Stainless Steel Crown-Primary Tooth	\$92	\$135	\$177	\$220	\$263	\$306
D2931	Prefabricated Stainless Steel Crown-Permanent Tooth	\$110	\$161	\$212	\$264	\$315	\$366
D2932	prefabricated resin crown	\$118	\$172	\$227	\$282	\$337	\$392
D2934	Prefabricated Esthetic Coated Stainless Steel Crown-Prim Tooth	\$121	\$177	\$233	\$289	\$346	\$402
D2950	Core Buildup, Including Any Pins	\$92	\$135	\$178	\$221	\$264	\$307
D2952	Post and Core in Addition to crown, indirectly fabricated	\$140	\$205	\$270	\$335	\$400	\$465
D2954	Prefabricated Post And Core In Addition To Crown	\$114	\$167	\$220	\$273	\$326	\$379
D3220	Therapeutic pulpotomy (excluding final restoration)	\$71	\$103	\$136	\$169	\$202	\$235
D3221	Pupal Debridement, primary and permanent teeth	\$79	\$116	\$153	\$190	\$227	\$264
D3310	Anterior (Excluding Final Restoration)	\$257	\$376	\$496	\$616	\$735	\$855
D3320	Bicuspid (Excluding Final Restoration)	\$292	\$429	\$565	\$701	\$838	\$974
D3330	Molar (Excluding Final Restoration)	\$356	\$523	\$689	\$855	\$1,022	\$1188
D5110	Complete Denture - Maxillary	\$604	\$886	\$1,168	\$1,449	\$1,731	\$2,013
D5120	Complete Denture - Mandibular	\$607	\$891	\$1,174	\$1,457	\$1,741	\$2,024
D5130	Immediate Denture - Maxillary	\$642	\$942	\$1,241	\$1,541	\$1,840	\$2,140
D5211	Maxillary Partial Denture - Resin Base	\$477	\$699	\$922	\$1,144	\$1,367	\$1,589
D5212	Mandibular Partial Denture - Resin Base	\$478	\$700	\$923	\$1,146	\$1,369	\$1,592
D5213	Maxillary Partial Denture - Cast Metal Framework with Resin Denture Bases	\$625	\$916	\$1,208	\$1,499	\$1,791	\$2,082
D5214	Mandibular Partial Denture - Cast Metal Framework with Resin Denture Bases	\$630	\$924	\$1,217	\$1,511	\$1,805	\$2,099
D5225	Maxillary Partial Denture-Flexible base	\$530	\$777	\$1,024	\$1,272	\$1,519	\$1,766
D5226	Mandibular Partial Denture-Flexible base	\$529	\$775	\$1,022	\$1,269	\$1,515	\$1,762
D5282	Removable Unilateral Partial Denture, one piece cast metal, Maxillary	\$345	\$506	\$666	\$827	\$988	\$1,149
D5283	Removable Unilateral Partial Denture, Mandibular	\$345	\$506	\$666	\$827	\$988	\$1,149
D5284	Removable unilateral partial denture-one piece flexible base	\$362	\$531	\$700	\$869	\$1,038	\$1,207
D5286	Removable unilateral partial denture-one piece resin	\$337	\$495	\$652	\$809	\$967	\$1,124
D5511	Repair Broken Complete Denture Base, Mandibular	\$94	\$138	\$182	\$226	\$270	\$314
D5512	Repair Broken Complete Denture Base, Maxillary	\$94	\$138	\$182	\$225	\$269	\$313
D5520	Replace Missing or Broken Teeth, complete denture, each tooth	\$85	\$125	\$164	\$204	\$243	\$283
D5611	Repair Resin Denture Base, Mandibular	\$82	\$120	\$158	\$197	\$235	\$273
D5612	Repair Resin Denture Base, Maxillary	\$82	\$120	\$158	\$197	\$235	\$273
D5621	Repair Cast Framework, Mandibular	\$97	\$142	\$187	\$232	\$277	\$322
D5622	Repair Cast Framework, Maxillary	\$98	\$144	\$190	\$236	\$282	\$328
D5630	Repair or Replace Broken Clasp	\$135	\$198	\$261	\$324	\$387	\$450
D5640	Replace Broken Teeth - Per Tooth	\$85	\$125	\$164	\$204	\$243	\$283

CDT Code	CDT Description	0% Pay	20%	40%	60%	80%	100%
D5650	Add Tooth to Existing Partial Denture - Per Tooth	\$85	\$125	\$164	\$204	\$243	\$283
D5660	Add Clasp to Existing Partial Denture	\$135	\$198	\$261	\$324	\$387	\$450
D5710	Rebase Complete Maxillary Denture	\$213	\$312	\$412	\$511	\$611	\$710
D5711	Rebase Complete Mandibular Denture	\$213	\$313	\$412	\$512	\$611	\$711
D5720	Rebase maxillary partial denture	\$195	\$286	\$378	\$469	\$560	\$651
D5721	Rebase mandibular partial denture	\$195	\$286	\$378	\$469	\$560	\$651
D5730	Add Clasp to Existing Partial Denture - Per Clasp	\$131	\$193	\$254	\$315	\$377	\$438
D5731	Reline Complete Mandibular Denture - Direct	\$131	\$193	\$254	\$315	\$377	\$438
D5740	Reline Partial Maxillary Denture - Direct	\$130	\$190	\$251	\$311	\$372	\$432
D5741	Reline Partial Mandibular Denture - Direct	\$130	\$191	\$251	\$312	\$372	\$433
D5750	Rebase Complete Maxillary Denture	\$168	\$246	\$324	\$402	\$481	\$559
D5751	Rebase Complete Mandibular Denture	\$168	\$246	\$324	\$402	\$481	\$559
D5760	Reline Maxillary Partial Denture Indirect	\$158	\$232	\$306	\$379	\$453	\$527
D5761	Reline Mandibular Partial Denture Indirect	\$158	\$231	\$305	\$379	\$452	\$526
D5820	Interim Partial Denture (Maxillary)	\$265	\$389	\$512	\$636	\$759	\$883
D5821	Interim Partial Denture (Mandibular)	\$265	\$389	\$512	\$636	\$759	\$883
D5863	Overdenture-complete maxillary	\$742	\$1,088	\$1,434	\$1,781	\$2,127	\$2,473
D5864	Overdenture-partial maxillary	\$755	\$1,107	\$1,460	\$1,812	\$2,165	\$2,517
D5865	Overdenture-complete mandibular	\$754	\$1,105	\$1,457	\$1,809	\$2,160	\$2,512
D5866	Overdenture-partial mandibular	\$771	\$1,131	\$1,491	\$1,850	\$2,210	\$2,570
D5876	Add metal substructure to acrylic full denture, per arch	\$132	\$194	\$255	\$317	\$378	\$440
D5899	Gold Denture Crown Per Tooth	\$375	\$550	\$725	\$900	\$1,075	\$1,250
D6210	Pontic-cast high noble metal	\$371	\$544	\$717	\$890	\$1,063	\$1,236
D6240	Pontic-porcelain fused to high noble metal	\$381	\$559	\$737	\$915	\$1,093	\$1,271
D6245	Pontic - porcelain/ceramic	\$381	\$559	\$737	\$915	\$1,093	\$1,271
D6740	Retainer Crown-porcelain /ceramic	\$375	\$375	\$375	\$375	\$375	\$1,271
D6750	Retainer Crown - porcelain fused to high noble metal	\$381	\$559	\$737	\$915	\$1,093	\$1,271
D6790	Retainer crown-full cast high noble metal	\$380	\$557	\$734	\$912	\$1,089	\$1,266
D9941	Fabrication of Athletic Mouthguard	\$81	\$118	\$156	\$194	\$231	\$269
D9944	Totals For Occlusal Guard - Hard Appliance, Full Arch (2)	\$188	\$275	\$363	\$451	\$538	\$626
D9945	Totals For Occlusal Guard - Soft Appliance, Full Arch (1)	\$150	\$220	\$290	\$360	\$430	\$500
D9946	Occlusal Guard-Hard appliance, partial arch	\$176	\$258	\$340	\$423	\$505	\$587

NOTE: The first 3 adjustments of new dentures are at no charge. Those adjustments completed after the first 3 will be charged based on the dental fee schedule.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#12

Consider for Approval Privileging Rights for Philip Keiser, MD

Submitted by Ann O'Connell



Date: August 26, 2021

To: CHW Governing Board

From: Leonard Nagorski, MD *L* 8/19/21

Re: Privileging

After review of the standard credentialing documents by a Coastal Health and Wellness Human Resources representative for Philip Keiser, MD, who is certified by Internal Medicine to practice medicine with an unrestricted license in the State of Texas, we are requesting credentialing approval by the Governing Board.

In addition, after review by Leonard Nagorski, MD, of the privileging documents submitted by Dr. Philip Keiser, we are requesting privileging approval by the Governing Board.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#13

**Consider for Approval Re-Privileging Rights for Yaa Cheremateng,
PA-C Submitted by Ann O'Connell**



Date: August 26, 2021

To: CHW Governing Board

From: Ann O'Connell, MS, MSN, RN
Chief Operations Officer

Ann O'Connell

Re: Re-Privileging

After review to determine that Yaa Cheremateng, PA-C, has an active and unrestricted license to practice medicine in the State of Texas, we are requesting re-credentialing approval by the Governing Board.

In addition, after review by Ann O'Connell, Chief Operations Officer of the re-privileging documents submitted by Yaa Cheremateng, PA-C, we are requesting re-privileging approval by the Governing Board.

also reviewed by:

Philip Keiser MD

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#14

**Consider for Approval Privileging Rights for Zuleica Santiago
Delgado, MD, UTMB Contractor Submitted by Ann O'Connell**



Date: August 26, 2021

To: CHW Governing Board

From: Ann O'Connell, MS, MSN, RN
Chief Operations Officer

Ann O'Connell

Re: Privileging

Upon the review of the completed credentialing file of Zuleica Santiago Delgado, MD, by Judie Olivares, Human Resources Generalist, and myself (Ann O'Connell, MS, MSN, RN), we would like to recommend that the Coastal Health & Wellness Governing Board approve privileging for Zuleica Santiago Delgado, MD, based on the following information:

- Zuleica Santiago Delgado, MD, is a licensed Professional Doctor of Family Medicine who will practice part-time in the Texas City clinic. Dr. Zuleica Santiago Delgado, MD graduated from Ponce Health Sciences University of Medicine. Dr. Santiago-Delgado is requesting medical privileges.

also reviewed by:
Philip Keiser MD

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#15

**Consider for Approval Privileging Rights for UTMB Resident Garrett
Levy-Meeks, MD, Submitted by Ann O'Connell**



Date: August 26, 2021

To: CHW Governing Board

From: Ann O'Connell, MS, MSN, RN
Chief Operations Officer

Re: Privileging

After review of the standard credentialing documents by a Coastal Health and Wellness Human Resources representative for resident physician Garrett Levy-Meeks, MD, who will work at all times under the direct supervision of a Board-Certified faculty physician from UTMB, we are requesting credentialing approval by the Governing Board.

In addition, after review by Ann O'Connell, Chief Operations Officer, of the privileging documents submitted by Dr. Levy-Meeks, we are requesting privileging approval by the Governing Board.

also reviewed by:
Philip Keiser MD

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#16

**Consider for Approval Privileging Rights for UTMB Resident Garrett
Kasiemobi Okonkwo, MD, Submitted by Ann O'Connell**



Date: August 26, 2021

To: CHW Governing Board

From: Ann O'Connell, MS, MSN, RN
Chief Operations Officer

Ann O'Connell

Re: Privileging

After review of the standard credentialing documents by a Coastal Health and Wellness Human Resources representative for resident physician Kasiemobi Okonkwo, MD, who will work at all times under the direct supervision of a Board-Certified faculty physician from UTMB, we are requesting credentialing approval by the Governing Board.

In addition, after review by Chief Operations Officer, Ann O'Connell, of the privileging documents submitted by Dr. Okonkwo, we are requesting privileging approval by the Governing Board.

also reviewed by:

Philip Keiser MD

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

August 2021

Item#17

**Consider for Approval Re-Privileging Rights for UTMB Resident
Travis Livingston, MD, Submitted by Ann O'Connell**



Date: August 26, 2021

To: CHW Governing Board

From: Ann O'Connell, MS, MSN, RN
Chief Operations Officer

Ann O'Connell

Re: Re-Privileging

After review of the standard credentialing documents by a Coastal Health and Wellness Human Resources representative for resident physician Travis Livingston, MD, who will work at all times under the direct supervision of a Board-Certified faculty physician from UTMB, we are requesting credentialing approval by the Governing Board.

In addition, after review by Ann O'Connell, Chief Operations Officer, of the privileging documents submitted by Dr Livingston, we are requesting privileging approval by the Governing Board.

*also reviewed:
Philip Keiser MD*

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

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Item#18

**Update on Governing Board Member Vacancies Submitted by
Samantha Robinson**

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board
August 2021
Item#19
Comments from Board Members**

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