

REQUEST FOR BOARD ACTION

HENDERSON COUNTY BOARD OF COMMISSIONERS

MEETING DATE: February 5, 2018

SUBJECT: Nurse Care Manager Position expansion (Public Health Nurse II)

PRESENTER: Steve Smith, Health Director

ATTACHMENTS: Yes
1. Personnel Request with justification dated January 19, 2018

SUMMARY OF REQUEST:

Based on additional contractual obligations implemented by Community Care of NC and legal obligations established by NC's Plan of Safe Care, the Health Department requests that a 60 % care manager nurse position be expanded to full time to meet current demands. The expansion can be covered within the existing budget allocations. Information related to this request was shared with the Board of Health at their November 14, 2017 meeting, with subsequent discussion on January 9, 2018. The Board of Health has approved action to request the position expansion.

BOARD ACTION REQUESTED:

The Board is requested to approve an expansion of the current 60% care manager nurse position to full time using existing salary and benefit allocations in the FY18 budget.

SUGGESTED MOTION:

I move that the Board of Commissioners approve the requested expansion of the care manager nurse position to full time using current FY 18 budget appropriations.



Public Health
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Henderson County Department of Public Health

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January 19, 2018

Henderson County Human Resources
Jan Prichard, Human Resources Director
112 First Avenue West
Hendersonville, NC 28792

Re: Personnel Request for Position 351011 within General Health budget (115510)

Dear Mrs. Prichard,

The department has been evaluating a number of increased demands on the Care Management program and respectfully requests consideration to expand the referenced position from a 60% position to full time. That request is paired with a representation that the department can cover the additional expense within its existing budget and that no additional appropriations will be needed.

The increased demands for the combined programs of pregnancy care management (PCM) and care coordination for children (CC4C) include:

1. Increase in required contacts and caseloads:

CC4C care management nurses have experienced a 24% increase in required contacts for Medicaid children from 2012 to 2017; average monthly caseloads for a current team of 3.5 staff members equals 186 clients.

2. Increase in medical complexity and substance use/behavioral health problems:

This increase in acuity is challenging to quantify, but it ultimately means that staff are spending more time with clients, are dealing with interventions that are more critical in nature and are being solicited more frequently by the pediatric and OB/GYN practices to assist with complex patients and families.

3. Contractual obligations promulgated by Community Care of North Carolina (CCNC) continue to increase:

Recent example includes requirement to now assess children and families using tools developed by Tufts Medical Center and the Massachusetts Child Psychiatry Access programs. These are additional requirements that add significant time to the existing obligations of care management staff for oversight of their assigned caseloads.

4. Newly assigned responsibilities under NC's "Plan of Safe Care" (structured under additional federal legislation):

New requirements mean that care management staff now receive different types of referrals from local department of social services which are above and beyond their traditional caseloads. Many of these referrals from health care providers are "screened out" by social services and care management staff assumes serious responsibilities for these time sensitive cases that are often dire in nature.

The cumulative effect of these increased workload demands (and others) supports the position expansion request in order for us to fulfill our legal and contractual obligations for these programs and to responsibly respond to the increased acuity of our caseload.

In order to achieve this expansion within a budget year without requiring additional appropriations, we propose utilizing an existing part time position (position 101001, 40% Physician Extender II) to achieve the desired capacity.

With FY 18 projected amounts:

| | Position | % FTE | Salary | LGERS | 401k | Med. Ins. | Dent. Ins. |
|-----------------------|----------|-------|--------|-------|-------|-----------|---------------|
| Current PHN II | 351011 | .60 | 33,213 | 2,516 | 676 | 6,465 | 345 |
| Proposed PHN II | 351011 | 1.0 | 50,115 | 3,923 | 1,014 | 10,775 | 575 |
| Difference | | | 16,902 | 1,407 | 338 | 4,310 | 230 |
| | | | | | | | 23,187 |
| Current Phys. Ext. II | 101001 | .40 | 30,593 | 2,295 | 624 | 4,310 | 230 |
| | | | | | | | 38,052 |

In this proposed scenario, the 40% Physician Extender II position would be eliminated from the public health salary detail, the monies necessary (\$23, 187) would be shifted from that position to the PHN II position in order to make it full time. The department would respectfully request that the remainder (\$14,865) be shifted into the general part time line item as a contingency since we occasionally utilize a part time physician extender for coverage.

This proposal therefore would be budget neutral and improves our alignment of existing resources with current obligations. This same need and proposal was presented to the Henderson County Board of Health at their January 9, 2018 meeting and they approved a recommendation for the proposal to go forward to the County Manager for consideration. The salary and benefits values are subject to review and confirmation by Henderson County Human Resources.

As a first step, I am forwarding the proposal to you for review and consideration. Please let me know if you need any additional information.

Sincerely,


Steven E. Smith

Cc: John Mitchell, Henderson County Business & Community Development Director