



Yamhill County
Health and Human Services

Yamhill County Public Health Environmental Health 2018-2019 Rates	Reviewed by BOH 5/11/16	Reviewed by BOH 5/10/17	Reviewed by BOH 5/9/18
	Approved by BOC 6/30/16 BO# 16-271	Approved by BOC 6/22/17 BO# 17-226	Approved by BOC _____ BO# 18-____
Facility Type	Adopted 16-17 Rates	Adopted 17-18 Rates	Proposed 18-19 Rates
B&B	211.00	211.00	211.00
limited service	362.00	380.00	399.00
0-15 seats	497.00	497.00	497.00
16-50 seats	560.00	560.00	560.00
51-150 seats	638.00	638.00	638.00
150+seats	781.00	781.00	781.00
Mobile Commissary Existing Facility	123.00	129.00	135.00
Mobile Commissary	312.00	312.00	312.00
Class 1 mobile units	267.00	267.00	267.00
Class 2 mobile units	267.00	267.00	267.00
Class 3 mobile units	288.00	288.00	288.00
Class 4 mobile units	288.00	288.00	288.00
Class 3 Shaved Ice	131.00	138.00	145.00
Warehouse	167.00	175.00	184.00
Vending, 1-10 units	222.00	222.00	222.00
Vending, 41-50 units	392.00	392.00	392.00
Exempt Facilities	-	-	-
Temporary Restaurant	141.00	141.00	141.00
Benevolent Temporary Restaurant	34.00	36.00	38.00
Community Event	91.00	91.00	96.00
Intermittent Temporary License	237.00	237.00	237.00
Seasonal/Quarterly Temporary License	282.00	282.00	282.00
Operation Review	95.00	95.00	95.00
Recheck Inspection	170.00	170.00	170.00
Tourist base (Hotel & RV PARK) per facility	146.00	153.00	161.00
+Tourist surcharge 1-50	3.15	3.15	3.15
+Tourist surcharge 51-100	2.44	2.56	2.56
+Tourist surcharge 100+	1.95	2.05	2.05
Org Camps	251.00	264.00	277.00
Seasonal & 2nd pools	235.00	235.00	235.00
Year Round Pools	467.00	467.00	467.00
Pool Plan Review	1,479.00	1,553.00	1,553.00
Food Handler Training	10.00	10.00	10.00
Manager Training	84.00	84.00	84.00
Food Handler card replacement	5.00	5.00	5.00
Facility Plan Review			
Restaurant - New Construction	416.00	416.00	416.00
Mobile Unit	172.00	181.00	190.00
Commissary	172.00	181.00	190.00
Remodel	172.00	181.00	190.00
School -Central Kitchen	261.00	261.00	261.00
School - Satellite kitchen	172.00	181.00	190.00
Chehalem Youth and Family	145.00	152.00	160.00
Headstart	137.00	137.00	137.00
Daycare - after school	145.00	152.00	160.00
Daycare group home	176.00	185.00	194.00
Daycare w/o infants	208.00	218.00	229.00
Daycare with infants	230.00	242.00	254.00
Late Fees			
license reinstatement base	100	100	100
license reinstatement per delinquent month	100	100	100
Temporary late fee	21	21	21
Note: If fees for new licenses are paid for between Oct 1 and Dec 31 for the current calendar year, fees will be prorated to 50%.			

B.O. 18-222



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		Approved by BOC 6/30/16 BO# 16-271	Approved by BOC 6/22/17 BO# 17-226	Approved by BOC BO# 18-____
Description		Adopted 16-17 Rates	Adopted 17-18 Rates	Proposed 18-19 Rates
Base RN charge	Per Hour	\$ 174.00	\$ 177.00	\$ 185.00
Base NP/MD charge	Per Hour,	\$ 197.00	\$ 200.00	\$ 209.00
MD, NP, PA Rates				
Established Office Visit L1 NP	5 minutes	\$ 17.00	\$ 17.00	\$ 18.00
Established Office Visit L2	10 minutes	\$ 33.00	\$ 33.00	\$ 35.00
Established Office Visit L3	15 minutes	\$ 50.00	\$ 50.00	\$ 53.00
Established Office Visit L4	25 minutes	\$ 83.00	\$ 84.00	\$ 88.00
Established Office Visit L5	40 minutes	\$ 132.00	\$ 134.00	\$ 140.00
NP Family Planning exam	45 minutes	\$ 148.00	\$ 150.00	\$ 157.00
MD Office Visit Level 3	40 minutes	\$ 132.00	\$ 134.00	\$ 140.00
MD Office Visit Level 4	60 minutes	\$ 197.00	\$ 200.00	\$ 209.00
New Office Visit Level 1	10 minutes	\$ 33.00	\$ 34.00	\$ 35.00
New Office Visit Level 2	20 minutes	\$ 66.00	\$ 67.00	\$ 70.00
New Office Visit Level 3	30 minutes	\$ 99.00	\$ 100.00	\$ 105.00
New Office Visit Level 4	45 minutes	\$ 148.00	\$ 150.00	\$ 157.00
New Office Visit Level 5	60 minutes	\$ 197.00	\$ 200.00	\$ 209.00
RN Rates				
Established Office Visit L1 RN	up to 10 minutes	\$ 29.00	\$ 30.00	\$ 31.00
OVRN		\$ 87.00	\$ 89.00	\$ 93.00
PPD Test	Vaccine Admin + cost	\$ 34.00	\$ 35.00	\$ 36.00
State-supplied vaccine (VFC-317)	Vaccine Admin + cost			\$ 21.95
Immunization Administration - for locally purchased vaccine	Vaccine Admin Fee	\$ 29.00	\$ 30.00	\$ 31.00
Therapeutic Injection		\$ 29.00	\$ 30.00	\$ 31.00
Venipuncture		\$ 29.00	\$ 30.00	\$ 31.00
RHEA Rate (low visit type)	State Allowed Cost			\$ 60.00
RHEA Rate (moderate visit type)	State Allowed Cost			\$ 160.00
RHEA Rate (high visit type)	State Allowed Cost			\$ 220.00
Babies First CM visit	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM CM Home Visit	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM CM Full	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM CM Partial	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM Hi-Risk CM Full	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM Hi-Risk Partial	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM Home/Environment Assmnt	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM Initial Needs Assmnt	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM Nutritional Counseling	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
MCM Telephone Contact	CMS Allowed	DMAP Rate	DMAP Rate	DMAP Rate
Anti-HBc (Pre Vaccine)		Actual cost	Actual cost	Actual cost
Anti-HBs (Post Vaccine)		Actual cost	Actual cost	Actual cost
Blood, HSV 2		Actual cost	Actual cost	Actual cost
CBC with Diff		Actual cost	Actual cost	Actual cost
Comp Metabolic Panel		Actual cost	Actual cost	Actual cost
Culture, HSV, Rapid		Actual cost	Actual cost	Actual cost
HCV Contact		Actual cost	Actual cost	Actual cost
Hepatic Function Panel		Actual cost	Actual cost	Actual cost
Hepatitis A Total		Actual cost	Actual cost	Actual cost
HIV Screening		Actual cost	Actual cost	Actual cost
Measles (Rubeola) Immune		Actual cost	Actual cost	Actual cost
Mumps Acute IGM		Actual cost	Actual cost	Actual cost
Mumps Immune Status		Actual cost	Actual cost	Actual cost
Neisseria GC Culture		Actual cost	Actual cost	Actual cost
Rectal Chlamydia		Actual cost	Actual cost	Actual cost
Rubeola Immune Status		Actual cost	Actual cost	Actual cost
STD Culture(TM)		Actual cost	Actual cost	Actual cost
Uric Acid		Actual cost	Actual cost	Actual cost
Varicella Immune Status		Actual cost	Actual cost	Actual cost
Viral Screening		Actual cost	Actual cost	Actual cost
Reports/Correspondence/Copying		\$30.00 up to 10 pages, additional pages \$.25 each OR as stipulated in ORS 192.563	\$30.00 up to 10 pages, additional pages \$.25 each OR as stipulated in ORS 192.563	\$30.00 up to 10 pages, additional pages \$.25 each OR as stipulated in ORS 192.563



IN-OFFICE RATES

PROVIDER TYPE	SERVICE	BO # 16-271	BO # 17-226	BO # 18-__
		2016-17 Adopted	2017-18 Adopted	2018-19 Adopted
MD/NP	Assessment	392	398	421
	Consultation	277	290	306
	Evaluation	277	290	306
	Individual Therapy	277	290	306
	Med Management	277	290	306
RN	Med Management	214	222	226
QMHP	Assessment	269	271	279
	Case Management	190	197	203
	Consultation	190	197	203
	Family/Marital Therapy	190	197	203
	Group Therapy	60	55	54
	Individual Therapy	190	197	203
	Screening	237	245	254
QMHA	Case Management	187	192	194
	Screening	233	240	242
	Supported Employment	191	180	172
	Individual Skills Training	187	192	194
	Group Skills Training	59	54	52
Tech	Indiv Skills Training	109	116	107
	Group Skills Training	35	33	29
CMA	Individual	141	145	148
QMHP School Services**	Assessment	368	354	327
	Case Management	245	236	218
	Consultation	245	236	218
	Family/Marital Therapy	62	89	95
	Group Therapy	245	236	218
	Individual Therapy	245	236	218
	Screening	306	295	273
Other***	ACT Services	159	104	152
	AODAG	126	126	126
	Interpreter (American Sign Language)	90	90	90
	Interpreter (Languages)	90	90	90
	Interpreter Language Line (phone)	\$2.45/min	\$2.45/min	\$2.45/min
	Urinalysis	52	55	56
	Reports & correspondence	30	30	30
	CANS MH Assessment	506	516	533
	Bridges	159	159	159
	BSS Rate	79	79	79
	OT Assessment Rate	523	542	558
	Transitional Treatment Recovery Services (TTRS)	131	139	160
	Peer-Assisted Crisis (PAC)		394	414

OUT-OF-OFFICE RATES

PROVIDER TYPE	SERVICE	2016-17 Adopted	2017-18 Adopted	2018-19 Adopted
RN	Med Mgmt	342	346	349
QMHP	Assessment	430	423	430
	Case Management	304	308	313
	Consultation	304	308	313
	Family/Marital Therapy	304	308	313
	Individual Therapy	304	308	313
	Screening	379	384	391
	QMHA	Case Management	298	299
	Screening	373	374	374
	Supported Employment	423	300	284
	Individual Skills Training	298	299	299
Tech	Individual Skills Training	174	181	165
	Group Skills Training	55	51	44
Other***	ACT Services	269	222	274
	OT Assessment Rate	694	704	711

Yamhill County Health and Human Services

FEE POLICY EFFECTIVE July 1, 2018

Yamhill County Health and Human Services is funded by tax dollars and user fees. The fees are calculated based on the cost of providing the service. We are directed by our governmental funding sources to limit services to individuals of low and moderate incomes who are unable to access private services.

While no client is turned away because of inability to pay for services, we will charge fees to those clients who can pay. Our fee schedule is sliding, based upon an individual's or family's gross monthly income and number of dependents, and is typically determined at the time of the first visit. Whenever possible, we will bill private insurance companies, but the client is ultimately responsible for the portion not paid by insurance up to the amount on our sliding fee schedule.

1. Clients are expected to enter into a signed fee contract for payment of services.
2. Payment is requested on a "pay as you go" basis. This means that the amount, once it is agreed upon, should be paid at the time of each appointment. This way, the client will avoid the accumulation of a large balance and save the cost of billing.
3. The clinic's fees are based on the following schedule:

<u>TYPE OF SERVICE</u>	<u>USUAL AND CUSTOMARY RATES (Office/Out-of-Office)</u>
• Assessments	279.00 / 430.00 per hour
• Screening	254.00 / 391.00 per hour
• Individual Therapy	203.00 / 313.00 per hour
• Family/Marital Therapy	203.00 / 313.00 per hour
• Consultation	203.00 / 313.00 per hour
• Group Therapy	54.00 per hour
• Skills Training	
○ <i>Group Skills Training</i>	52.00 / 80.00 per hour
○ <i>Individual Skills Training</i>	194.00 / 299.00 per hour
• Supported Employment	172.00 / 284.00 per hour
• Case Management - QMHA	194.00 / 299.00 per hour
• Case Management – QMHP	203.00 / 313.00 per hour
• Physician	
○ <i>Med Mgmt/Therapy/Evaluation/Consult</i>	306.00 per hour (no out-of-office)
○ <i>Assessment</i>	421.00 per hour (no out-of-office)
• RN Medication Management	226.00 / 349.00 per hour
• Individual Services – Tech	107.00 / 165.00 per hour
• Individual Services – CMA	148.00 per hour
• School Services	
○ <i>Group Therapy</i>	95.00 / hour
○ <i>Individual Therapy</i>	218.00 / hour
○ <i>Assessment</i>	327.00 / hour
○ <i>Case Management</i>	218.00 / hour
○ <i>Screening</i>	273.00 / hour
• Urinalysis	56.00 each
• AODAG (assessments & groups)	126.00

Accepted by Yamhill County
Board of Commissioners on
6/28/18 by Board Order
18-222