October 23, 2019

ADMINISTRATOR: Melissa Bowerman, Director of Administrative Services

SUBJECT: Community Health and Education Division (CHED) Fee Schedule-Influenza

☐ Information Only ☒ Action Needed

I. Authority For This Action:

☐ Local Policy
☒ Law or Rule Public Health Code, Act 368 of 1978, MCL 333.2417

II. Summary:
(Previous board action relating to this item? Background information and if any future action anticipated.)

At the May 22, 2019 Board of Health (BOH) meeting, the Community Health and Education Division Fee Schedule for FY 19/20 was approved and included fees for the different types of influenza vaccine administered.

III. Strategic Objective, Health Issue, or other Need Addressed:
(What priority should be given in relation to goals? Include reason for recommending change in priorities and how the need will be introduced into planning process.)

In order to better advertise the pricing to the public, the agency has established influenza fees as fixed rates rather than using the market plus 10%, as with other private pay vaccines. The Mid-Michigan District Health Department (MMDHD) typically orders influenza vaccine once per year with the fees set in May to cover the anticipated cost of the vaccine, which occurs in October. I learned that the cost of the influenza vaccines were higher than the amounts approved by the BOH in May; therefore, I recommend that the new fee amounts be approved retroactive to October 1, 2019.

IV. Fiscal Impact and Cost:
(Immediate, ongoing, and future impact.)

In order for the agency to cover the increased cost of the influenza vaccine, I recommend that the following fee amounts be approved:

<table>
<thead>
<tr>
<th>CPT</th>
<th>Description</th>
<th>Fee Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>90688</td>
<td>Flu Vaccine (IIV4)</td>
<td>$25.00</td>
</tr>
<tr>
<td>90662</td>
<td>IIV3 High Dose 65YR+</td>
<td>$50.00</td>
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There is also an administration fee of $20 per vaccine.
V. Alternatives Considered:
(Scope of options reviewed. Reasons for rejecting alternatives.)

There are no reasons for rejecting alternatives as the health department needs to cover its costs.

VI. Recommendation:
(Advantages/benefits of proposal. Expected results. Possible problems or disadvantages of proposal. Effect of action on agency. Consequences of not approving recommendation or taking action.)

I recommend that the new fee amounts for influenza vaccine be approved as proposed retroactive to October 1, 2019.

VII. Monitoring and Reporting Time Line:
(Evaluation method and timeline. Next report to the Board.)

No further report is necessary to the BOH.