

**RESOLUTION NO. 2011 - 11**

A RESOLUTION OF THE FLAGLER COUNTY BOARD OF COUNTY COMMISSIONERS REPEALING AND REPLACING RESOLUTION NO. 2007-111; PROVIDING FOR AMENDED FEES FOR THE FLAGLER COUNTY HEALTH DEPARTMENT SERVICES; PROVIDING FOR AN EFFECTIVE DATE.

**WHEREAS**, the Flagler County Board of County commissioners adopted Flagler County Code Section 15-27 which provides for a schedule of fees to be collected by the Flagler County Health Department; and

**WHEREAS**, that Code allows for the modification of fees by Resolution of the Board; and

**WHEREAS**, Resolution 2007-111 was adopted establishing the fees to be charged by the Flagler County Health Department for both State related and County services; and

**WHEREAS**, the Administrator of the Flagler County Health Department has advised that an amendment of the schedule of fees for County services in accordance with State of Florida standards is required to meet the health, safety and welfare functions of the Flagler County Health Department; and

**WHEREAS**, the Administrator also has advised that fees for State related services are not necessary for the County to adopt as such fees are set by state statute and implementing rule; and

**WHEREAS**, the Flagler County Board of County Commissioners has determined the schedule of services for County based services contained herein to be fair and reasonable.

**NOW, THEREFORE, BE IT RESOLVED**, by the Board of County Commissioners of Flagler County, Florida as follows:

Resolution 2007-111 is hereby repealed and replaced by the following schedule of fees, which are established pursuant to Chapters 125, 154, and 381, Florida Statutes, and Chapter 15, Article II, Code of Ordinances, Flagler County, Florida. This Fee Schedule contains fees for County based services. Additional State fees may apply in accordance with state statute and rule.

**1. ENVIRONMENTAL HEALTH FEES:**

*All fees for Environmental Health Services are established by Section 15-30, Flagler County Code, as authorized by Section 125.01, Florida Statutes. The principally identified services are noted below.*

<b>Service</b>	<b>Fee</b>
<b><i>Food Hygiene</i></b>	
Temporary Food Service Operation – One Day Event	25.00
Temporary Food Service Operation – Two or more days	50.00
<b><i>Drinking Water Program</i></b>	
Water Sample Fee (processing and shipping)	5.00 per sample
Limited-Use Public Water System Annual Operating Permit Fee (fee is supplemental to state permit fee)	100.00
<b><i>Water Well Construction</i></b>	
Public Well Construction Permit	150.00
Private Potable Well Construction Permit	75.00
Non-Potable Well Construction Permit	50.00
Monitoring Well Construction Permit (up to, and including 8 wells per site)	100.00
Manual Application Processing Fee (only applies to well construction applications not submitted on-line.)	25.00
Re-inspection of non-compliant wells less than 6” in diameter (each reinspection)	50.00
Well Variance Application Fee	50.00
After-the-fact Permit Fee. (This Late Fee is in addition to the required permit fee.)	100% of Permit Fee
<b><i>Onsite Sewage Program</i></b>	
Onsite Sewage Treatment and Disposal System Plan Review Fee (New and Modification Permits only) (fee is supplemental to state permit fee)	50.00
<b><i>Group Care</i></b>	
Group Care Inspection Fee Note: Foster Care Facilities – No Charge	50.00
Re-inspection Fee	35.00
<b><i>Miscellaneous</i></b>	
Training provided by Environmental Health Staff	20.00 per person
Annual Operating Permit Late Fee (Applies to Industrial/Manufacturing and Commercial Septic System, Drinking Water System and Aerobic/Performance-Based Treatment Septic System Operating Permits.)	50.00

## **2. MEDICAL FEES**

*All fees for Medical Services are established by Section 15-31, Flagler County Code, as authorized by Section 154.06, Florida Statutes. The principally identified services and procedures are noted below.*

<b>Service</b>	<b>Fee</b>
Family Planning Services	Medicaid Cost Based Reimbursement rate applied to Federal Poverty Guideline sliding fee scale.
Thin Prep Lab test	Amount billed to CHD plus \$5.00 handling fee for programs not covering the service fee.
Pregnancy Test (No charge up to 18 <sup>th</sup> birthday)**	Sliding Scale
All other lab fees	The fee amount billed to the CHD for the test plus a \$5.00 handling fee.
<b><i>STD (Sexually Transmitted Disease)**</i></b>	
Nurse STD Screening and Testing **	25.00
Provider STD Screening, Testing **	50.00
HIV Screening with Testing**	20.00
<b><i>Lab Fees in addition to STD above</i></b>	
Herpes Screening I-II Lab test with the Nurse or Provider STD Screen & Testing visit	11.00
Herpes Culture with the Nurse or Provider STD Screen & Testing visit**	25.00
<b><i>Vaccinations/Immunizations</i></b>	
Flu Vaccinations	To be determined annually based on market price.
Adult Immunizations	Cost of the vaccine plus \$25 per shot.
Certificate of Immunization – Initial Copy	No Charge
Certificate of Immunization – Replacement Copy	5.00
<b><i>TB (Tuberculosis) Program**</i></b>	
TB Skin Test **	25.00
TB Chest X-Rays for TB Program (package fee-fee not dependent on number of x-ray views) **	65.00
TB QuantiFeron-TB Gold Blood Test** & TST Screening Tool	65.00
School Physical Examination	50.00
**Medically Necessary – No Charge Elective – Fees apply as listed. <i>See</i> , Ch. 15, Art. II, Sect. 15-31(a), Flagler Co. Code	


**3. VITAL STATISTICS**

<b>Service</b>	<b>Fee</b>
Death Certificate	10.00
Birth Certificate	15.00
Add'l copy birth certificate, if requested at time of original request.	7.00


4. This Resolution shall take effect immediately upon adoption.

RESOLVED AND APPROVED this 18TH day of APRIL, 2011.

ATTEST:

  
Gail Wadsworth, Clerk and  
Ex Officio Clerk to the Board

**BOARD OF COUNTY  
COMMISSIONERS  
OF FLAGLER COUNTY, FLORIDA**

  
Alan Peterson, Chairman

APPROVED AS TO FORM:

  
Albert J. Haddad, County Attorney

# FLAGLER COUNTY HEALTH DEPARTMENT

## FEE SCHEDULE

### CURRENT/PROPOSED

#### I. ENVIRONMENTAL HEALTH FEES:

*All fees for Environmental Health Services are established by Section 15-30, Flagler County Code, as authorized by Section 125.01, Florida Statutes. The principally identified services are noted below.*

Service	Current Fee (\$)	Proposed Fee (\$)
<b><i>Food Hygiene</i></b>		
Temporary Food Service Operation -- One Day Event	10.00	25.00
Temporary Food Service Operation -- Two or more days	25.00 (24-72 hours) or 50.00 (>72 hours)	50.00
<b><i>Drinking Water Program</i></b>		
Water Sample Fee (processing and shipping)	5.00 per sample	5.00 per sample
Limited-Use Public Water System Annual Operating Permit Fee (fee is supplemental to state permit fee)	No fee	100.00
<b><i>Water Well Construction</i></b>		
Public Well Construction Permit	150.00 (SJRWMD)	150.00
Private Potable Well Construction Permit	75.00 (SJRWMD)	75.00
Non-Potable Well Construction Permit	50.00 (SJRWMD)	50.00
Monitoring Well Construction Permit (up to, and including 8 wells per site)	50.00 per well (SJRWMD)	100.00
Manual Application Processing Fee (only applies to well construction applications not submitted on-line.)	No fee	25.00
Re-inspection of non-compliant wells less than 6" in diameter (each reinspection)	25.00	50.00
Well Variance Application Fee	50.00	50.00
After-the-fact Permit Fee. (This Late Fee is in addition to the required permit fee.)	100% of Permit Fee	100% of Permit Fee
<b><i>Onsite Sewage Program</i></b>		
Onsite Sewage Treatment and Disposal System Plan Review Fee (New and Modification Permits only) (fee is supplemental to state permit fee)	No fee	50.00
<b><i>Group Care</i></b>		
Group Care Inspection Fee	50.00	50.00
Note: Foster Care Facilities -- No Charge		
Re-inspection Fee	35.00	35.00

Service	Current Fee (\$)	Proposed Fee (\$)
<i>Miscellaneous</i>		
Training provided by Environmental Health Staff	20.00 per person	20.00 per person
Annual Operating Permit Late Fee (Applies to Industrial/Manufacturing and Commercial Septic System, Drinking Water System and Aerobic/Performance-Based Treatment Septic System Operating Permits.)	25.00	50.00

## 2. MEDICAL FEES

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<i>STD (Sexually Transmitted Disease)**</i>		
Nurse STD Screening and Testing **	New Service	25.00
Provider STD Screening, Testing **	25.00	50.00
HIV Screening with Testing**	20.00	20.00
<i>Lab Fees in addition to STD above</i>		
Herpes Screening I-II Lab test with the Nurse or Provider STD Screen & Testing visit	10.20	11.00
Herpes Culture with the Nurse or Provider STD Screen & Testing visit**	New Service	25.00
<i>Vaccinations/Immunizations</i>		
Flu Vaccinations	To be determined annually based on market price.	To be determined annually based on market price.
Adult Immunizations	25.00 per visit plus cost of vaccine	Cost of the vaccine plus \$25 per shot.

Service	Current Fee (\$)	Proposed Fee (\$)
Certificate of Immunization – Initial Copy	No Charge	No Charge
Certificate of Immunization – Replacement Copy	New	5.00
<b><i>TB (Tuberculosis) Program**</i></b>		
TB Skin Test **	20.00	25.00
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