

**DARE COUNTY
BUDGET ORDINANCE**

COPY

BE IT ORDAINED by the Board of Commissioners of Dare County, North Carolina, THAT:

Section 1. The following amounts are hereby appropriated in the General Fund for the operation of the county government and its activities for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

General Government:									
County commissioners	\$	249,926		17,322,187		Cultural & recreational:			2,038,718
County manager		286,496				Parks & recreation			836,947
County attorney		101,500		5,371,769		Libraries			416,731
Public relations		170,953		3,831,640		Older adult services			381,759
County engineer		109,912		1,391,816		Transportation			139,230
Board of elections		246,417		602,735		Youth services			<u>3,813,385</u>
Finance		936,863		8,017,158		Education:			22,766,033
Human resources		268,334		957,807		Education			460,624
Information technology		915,095		279,362		College of the Albemarle			<u>23,226,657</u>
Tax mapping		285,106		304,032		Environmental protection:			
Revaluation		939,311		350,074		Landfill			41,166
Business personal tax		125,107		21,106,393		Recycling			681,043
Tax collections & listing		535,106				Solid waste management			437,732
Realty transfer tax		63,629		1,038,357		C&D landfill			953,501
Occupancy tax		53,826		216,951		Landfill dirt pit			172,145
Prepared foods tax		66,424		161,751		Rubble transfer sites			684,834
Register of deeds		586,855		1,417,059		Waste water treatment			148,664
Buildings & grounds		1,159,901		5,982,834		Mosquito control			498,054
Turf maintenance		329,128		7,946,692		Soil conservation			<u>56,456</u>
General services		670,692		102,888		Transportation:			757,275
Non-departmental		1,881,170		58,154		DC airport authority			
Special appropriations		1,020,841		14,090,568		Total appropriations			<u>\$ 96,409,711</u>
		<u>11,002,592</u>							

Section 2. It is estimated that the following revenues will be available in the General Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:

Ad valorem taxes	\$ 43,954,971
Other taxes	17,485,000
Unrestricted intergovernmental	942,000
Restricted intergovernmental – general	559,571
Restricted intergovernmental – social services	2,900,349
Restricted intergovernmental - health	546,890
Permits and fees	3,489,650
Sales and services	4,137,274
Sales and services – social services	222,375
Sales and services – health	1,945,320
Interest earnings	1,887,411
Other revenue	443,045
Other financing sources	<u>17,895,855</u>

Total estimated revenues \$ 96,409,711

Section 3. The following amount is hereby appropriated in the Emergency Telephone System Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Emergency telephone system	\$ 625,000
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It is estimated that the following revenue will be available in the Emergency Telephone System Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:

Emergency telephone system	\$ 625,000
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Section 4. The following amount is hereby appropriated in the Beach Nourishment Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Beach nourishment	\$ 3,134,000
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It is estimated that the following revenue will be available in the Beach Nourishment Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:

Beach nourishment	\$ 3,134,000
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Section 5. The following amount is hereby appropriated in the DSS Foster Home Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

DSS foster home	\$ 694,298
It is estimated that the following revenue will be available in the DSS Foster Home Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:	
DSS foster home	\$ 694,298

Section 6. The following amount is hereby appropriated in the Sanitation I Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Sanitation I	\$ 5,022,328
It is estimated that the following revenue will be available in the Sanitation I Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:	
Sanitation I	\$ 5,022,328

Section 7. The following amount is hereby appropriated in the Sanitation II Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Sanitation II	\$ 243,651
It is estimated that the following revenue will be available in the Sanitation II Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:	
Sanitation II	\$ 243,651

Section 8. The following amount is hereby appropriated in the Capital Reserve Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Capital reserve	\$ 6,717,236
It is estimated that the following revenue will be available in the Capital Reserve Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:	
Capital reserve	\$ 6,717,236

Section 9. The following amount is hereby appropriated in the Disaster Recovery Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Disaster recovery	\$ 74,106
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It is estimated that the following revenue will be available in the Disaster Recovery Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:

Disaster recovery	\$ 74,106
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Section 10. The following amount is hereby appropriated in the School Capital Reserve Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

School capital reserve	\$ 11,242,854
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It is estimated that the following revenue will be available in the School Capital Reserve Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:

School capital reserve	\$ 11,242,854
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Section 11. The following amount is hereby appropriated in the Water Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Water	\$ 9,746,371
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It is estimated that the following revenue will be available in the Water Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007:

Water	\$ 9,746,371
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Section 12. The following financial plan per G.S. 159-13.1 is hereby adopted for the Insurance Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Expenses	\$ 9,154,769
Revenues	\$ 9,154,769

Section 13. The following financial plan per G.S. 159-13.1 is hereby adopted for the Fleet Maintenance Shop Fund for the fiscal year beginning July 1, 2006 and ending June 30, 2007, in accordance with the chart of accounts heretofore established for this County:

Expenses	\$ 2,427,074
Revenues	\$ 2,427,074

Section 14. There is hereby levied a tax at the rate of twenty-six cents (\$0.26) per one hundred dollars (\$100) valuation of property listed as of January 1, 2006, for the purpose of raising revenue included in "Ad valorem taxes" in the General Fund in Section 2 of this ordinance, of which three and one-half cents (\$0.035) is for the purpose of raising revenue to be transferred to the School Capital Reserve Fund, less any identified operating costs not transferred, for accumulation of funds for school capital projects and debt service for school capital projects as approved by the Dare County Board of Commissioners and reflected in the Dare County School Debt Repayment Plan.

This rate of tax is based on estimated total valuation of property for the purpose of taxation of \$16,805,000,000 at an estimated rate of collection of 99.13%. The estimated rate of collection is based on the actual collection rate for fiscal year 2004-05.

Section 15. There is hereby levied the following tax rates (in cents) for Special Tax Districts per one hundred dollars (\$100) valuation of property listed for taxes as of January 1, 2006, located within said districts:

	<u>2007 Rate</u>
Avon Fire District	\$0.035
Buxton Fire District	\$0.055
Colington Fire District	\$0.0775
Frisco Fire District	\$0.0325
Hatteras Fire District	\$0.04
Manns Harbor Fire District	\$0.0475
Martin's Point Fire District	\$0.02
Roanoke Island Fire District	\$0.035
Rodanthe-Waves Fire District	\$0.03
Salvo Fire District	\$0.03
Stumpy Point Fire District	\$0.0425
Sanitation	\$0.0675
Hatteras Island Rescue Squad Service District	\$0.006
Hatteras Community Center	\$0.0525
Rodanthe-Waves-Salvo Community Center	\$0.0175
Stumpy Point Community Center	\$0.02
Wanchese Community Center	\$0.0175

Section 16. The Budget Officer (County Manager per State Statute), or in his absence his designee, is hereby authorized to transfer appropriations contained herein or to make appropriations under the following conditions:

- a. He may transfer amounts between line item expenditures within a department without limitation and without a report being required. These changes cannot result in increases in a recurring obligation such as salaries.
- b. He may transfer amounts up to \$10,000 between departments within the same fund. He must make an official report on such transfers at the next regular meeting of the Board of Commissioners.
- c. He may not transfer amounts between funds, nor from contingency or reserve appropriations, except as provided in Section 16 (d).
- d. He may authorize and transfer funding from special appropriations established for salary adjustments (COLA and/or merit) and termination pay, or from the contingency appropriation in the General Fund observing any policies established by the Board of Commissioners. He may authorize and transfer funding from the emergency operations appropriation within the Disaster Recovery Fund upon the declaration of an emergency or an order of evacuation of the county by the Control Group.

Section 17. The County Manager, or in his absence his designee, is hereby authorized to execute contractual documents under the following conditions:

- a. He may execute contracts for construction or repair projects which do not require formal competitive bid procedures.
- b. He may execute contracts for: (1) purchases of apparatus, supplies and materials, or equipment which are within budgeted departmental appropriations; (2) leases of personal property for durations of one year or less which are within budgeted departmental appropriations; and (3) services and service contracts which are within budgeted departmental appropriations.
- c. He may execute grant agreements to or from public and nonprofit organizations which are within budgeted appropriations, unless a grantor organization requires execution by the Board of Commissioners.
- d. He may execute contracts, as the lessor or lessee of real property, which are of a duration of one year or less which are within budgeted departmental appropriations.
- e. He may execute contracts for design consultant services, where consultant fees are estimated to be less than \$15,000.
- f. He may enter into and execute change orders or amendments to construction contracts in amounts up to \$25,000 when the appropriate annual budget or capital project ordinance contains sufficient appropriated but unencumbered funds.

Section 18. Operating funds encumbered by the County as of June 30, 2006, or otherwise designated, are hereby re-appropriated for fiscal year 2006-07.

Section 19. Use of occupancy tax revenues within the General Fund are hereby earmarked as follows: \$705,000 (25% of revenue) for garbage, refuse, and solid waste collection and disposal (Landfill, Recycling, Solid Waste Management, C&D Landfill, Landfill Dirt Pit, Rubble Transfer Sites, and Waste Water Treatment); \$705,000 (25% of revenue) for police protection (Sheriff); and \$1,410,000 (50% of revenue) for emergency services (Communications, Emergency Medical Services, Emergency Medical Helicopter, and Emergency Management).

Section 20. The following rates are hereby adopted as of 7/1/2006 for the Dare County Water Distribution System/Fund:

Base charge:		
Meter Size	RWS & Northern System	Southern System
3/4"	\$ 10.07	\$ 14.96
1"	13.42	19.06
1 1/4"	16.77	23.51
1 1/2"	21.81	30.50
2"	31.88	44.47
3"	55.39	77.08
4"	88.96	123.66
6"	172.90	240.10

Seasonal rates per thousand gallons:

April - September	\$ 6.67	\$ 6.67
October - March	5.13	5.13

The following fees are hereby adopted as of 7/1/2006 for the Dare County Water Distribution System/Fund:

Meter Size	Impact Fees	Connection Fees	Security Deposit
3/4"	\$ 2,500	\$ 340	\$ 107
1"	3,000	500	139
1 1/2"	3,500	1,050	275
2"	4,000	1,325	1,278
3"	5,000	2,000	1,847
4"	6,000	3,000	2,417
6"	8,000	4,500	2,417

Section 21. The following rates and fees are hereby adopted as of 7/1/2006 for Emergency Medical Services:

Basic life support	Non-emergency	\$179
Basic life support	Non-emergency – long haul	\$180
Basic life support	Emergency	\$287
Basic life support	Emergency – long haul	\$288
Advanced life support	Non-emergency	\$215
Advanced life support	Non-emergency – long haul	\$216
Advanced life support	Emergency	\$341
Advanced life support	Emergency – long haul	\$342
Critical care	Critical care	\$493
Mileage	Per mile	\$ 9.17 for all mileage

Section 22. The following rate is hereby adopted as of 7/1/2006 for C & D Landfill Tipping fees: \$59.00 per ton

Section 23. All other user fees are adopted as shown in Appendix A.

Section 24. Appropriations for the Dare County Board of Education firstly are made from revenue sources that are restricted to the use of the school system and secondly are made from other revenues.

Section 25. Appropriations for the Courts firstly are made from Court Facility Fees and Court Facility Fee Interest and secondly are made from other revenues.

Section 26. The appropriation for local current expense for the Dare County Board of Education will be distributed as follows: 25% at the beginning of July, and then in nine (9) equal monthly installments at the beginning of each month beginning in October. Local capital outlay for the Dare County Board of Education will be distributed in the first month of the fiscal year. Any additional local capital outlay identified and funded in the Capital Improvements Plan will be paid directly to vendors and contractors by the County upon presentation of approved invoices from the Board of Education as well as any additional documentation determined necessary by the County Finance Director.

Section 27. Copies of this Budget Ordinance shall be furnished to Clerk to the Board of Commissioners and to the Budget Officer (County Manager), Finance Officer, and the Tax Administrator to be kept on file by them for their direction in the collection and disbursement of funds.

Adopted this 19th day of June, 2006.

COPY

Chairman, Board of Commissioners

Frances W. Harris, Clerk to the Board

**DARE COUNTY
BUDGET ORDINANCE
Appendix A - User fees**

Elections			
<i> Voter registration copies:</i>			
Labels	per page	\$	0.15
Printouts	per page		0.05
Discs or CDs	each		25.00
Tax mapping		\$	
Map	8.5 x 11 inch		1.00
Map	8.5 x 14 inch		1.00
Map	18 x 24 inch (BlueLine)		1.00
Map	11 x 17 inch		2.00
Map	18 x 24 inch		3.00
Map	zoning map (BlueLine)		5.00
Map	full size tax map		5.00
Map	full size tax map (BlueLine)		5.00
Sheriff			
<i>Storage fees:</i>		\$	
Weapons	per weapon, per day		0.30
Ammunition	per container, per day		0.05
Jail		\$	
Inmates housed for other counties	per day		55.00
Employee meal purchases from jail kitchen	per meal		2.00
Animal shelter		\$	
1 st reclaim fee, within calendar year	each		25.00
2 nd reclaim fee, within calendar year	each		50.00
3 rd reclaim fee, within calendar year	each		75.00
Boarding charge	per night		10.00
Rabies vaccination	each		10.00
Dog license, spayed/neutered	each		5.00
Dog license, fertile	each		15.00
Replacement license	each		2.00

Appendix A – User Fees

Planning

Fees:

Subdivision, mobile home park, travel trailer parks		\$ 50.00
Subdivision exemption/recombination plats		15.00
Zoning Board of Adjustment		250.00
Zoning Amendments		350.00
Administrative site plan review		0.25
Conditional use permits – home occupations		50.00
Conditional use permits – residential group developments		50.00
Conditional use permits – commercial CUPs including commercial group developments		0.25
Conditional use permits – all other uses		100.00
Sign permits		150.00

per lot/site		\$
per exemption plat		
per ZBA application		
per rezoning request		
per square foot of gross square footage/floor area		
per application		
per structure		
per square foot of total floor area		
minimum application fee		
per application		

Building permits – residential:

	Conditioned Space:	Unconditioned Space:
1 & 2 family dwellings	\$ 0.55	\$ 0.15
Modular homes	0.55	0.15
Mobile homes, includes up to 200 sq. ft. of uncovered deck	0.10	0.15
Additions & enclosures	0.55	0.15
Storage buildings with any dimension over 12 ft.	0.55	0.15
Storage buildings with all dimensions less than 12 ft.	no permit required	no permit required

Building permits – commercial, including but not limited to:

	Conditioned Space:	Unconditioned Space:
Assemble (church, restaurant, theater)	\$ 0.75	\$ 0.25
Business (bank, office building, doctor's office)	0.75	0.25
Educational (school, child care)	0.75	0.25
Institutional (jail, hospital, nursing home)	0.75	0.25
Mercantile (retail, drug store, market)	\$ 0.75	\$ 0.25
Factory industrial (assembly plant, boat building mill)	0.35	0.25
Storage (rental units, except hazardous)	0.35	0.25
Hazardous (any of the above)	0.75	0.75
R-1 (hotel, motel, dorm)	0.70	0.15
R-2 (condo, apartment)	0.70	0.15

Appendix A – User Fees

Planning (continued)

Building permits – residential or commercial:

Docks, piers, bulkheads, dune walks		
Recreation areas (pools, tennis courts)		
Communication towers, water tanks	per vertical foot	100.00
Gas pumps (installation, replacement)	per pump	150.00
Fuel tanks (installation, replacement)	per tank	1.00
Remodel, alteration	per \$1,000 cost	100.00
Signs up to 64 sq. ft. (includes electrical permit)		200.00
Signs over 64 sq. ft. (includes electrical permit)		10.00
Change of use with no remodel		150.00
Permit for construction in flood zone (FEMA)		250.00
CAMA permit		100.00
Moving permit		75.00
Minimum building permit fee		100.00
Reinspection fee		25.00
Permit renewal fee (must be renewed within 30 days of expiration)		100.00
Penalty for starting without permit		
Penalty for failing to call for inspections		
<i>Construction must begin within 6 months or permit will expire</i>		
<i>Construction must not stop for 12 months or permit will expire</i>		

original permit cost plus 50%
50% of original permit cost

Electrical permits:

New construction		included in building permit fee
Remodel & alteration		included in building permit fee
Service change - line side, including panel board		\$ 25.00
New service, not requiring building permit		50.00
Service upgrade, not requiring building permit		50.00
Add circuits to existing panel (hot tub, out building, sign, dock)		25.00
Generator sets		25.00
Minimum permit fee		25.00

Appendix A -- User Fees

Planning (continued)

Plumbing permits:

New construction

Remodel & alteration

Fixture replacement, relocation, & addition, when no building permit required:

included in building permit fee
included in building permit fee

\$ 10.00
10.00
25.00

per trapped fixture
per water heater

Minimum permit fee

Mechanical permits:

New construction

Remodel & alteration

All new installation & change outs, when no building permit required:

included in building permit fee
included in building permit fee

\$ 40.00
2.00
25.00

per unit
per supply outlet

Minimum permit fee

Health

Clinical Services:

CPT Codes and Fees

See Attachment 1

Dental Services:

CPT Codes and Fees

See Attachment 2

Environmental Health:

Fees

See Attachment 3

Home Health & Hospice:

Rates for Service

See Attachment 4

Appendix A – User Fees

Parks & Recreation	Activity:	Season:	\$
Division:			
Hatteras	Adult aerobics	Year round	3.00 per class, or 15.00 per month
All	Adult basketball	Winter	425.00
Beach	Adult fitness	Year round	5.00 per class, or 35.00 per month
All	Adult softball	Summer	650.00
All	Adventure camp	Summer	275.00
Manteo/Beach	Arts & crafts	Spring/Fall	25.00
Hatteras	Arts & crafts camp	Summer	30.00
All	Basketball	Winter	25.00/15.00
Hatteras	Basketball camp	Summer	25.00 1 st child, 15.00 2 nd child
All	Body Blast! Fitness camp	Summer	20.00
All	Cheerleading	Fall	30.00
All	Cheerleading camp	Summer	25.00
All	Circus	Winter	15.50
Beach	Comedy camp	Summer	5.00
Hatteras	Dance camp	Summer	25.00
All	Disney on Ice	Winter	15.00
Manteo/Beach	Drama	Spring/Fall	25.00
All	Fishing school	Summer	30.00
All	Fishing tournament	Summer	10.00
Hatteras	Fitness camp	Summer	25.00/15.00
All	Football	Fall	35.00
All	Gymnastics	Spring/Fall	30.00
Hatteras	Gymnastics camp	Summer	30.00
Manteo/Beach	Gymnastics camp (3-4 year old)	Summer	15.00
Manteo/Beach	Gymnastics camp (5 year old and up)	Summer	25.00
All	Ice skating	Winter	7.50
Beach	Kayaking camp	Summer	25.00
Beach	Mural course/camp	Year round	5.00
Beach	Mystery dinner theatre	Summer	25.00
Hatteras	Non-traditional sports camp	Summer	25.00/15.00
Manteo/Beach	Non-traditional sports camp	Summer	5.00
Manteo/Beach	Senior babe ruth	Spring	50.00
Hatteras	Sign language	Spring/Fall	10.00
All	Smart Start Soccer/Basketball	All	50.00

Appendix A – User Fees

Parks & Recreation (continued)			
All	Soccer	Fall	\$ 2500
Manteo	Soccer skills camp	Summer	20.00
Hatteras	Spring fitness	Spring	25.00/15.00
All	Surf camp	Summer	35.00
Manteo/Beach	Swimming lessons	Summer	30.00
Hatteras	Swimming lessons	Summer	30.00/20.00
Beach	Taekwondo	Year round	45.00 1 st child, 35.00 2 nd child
Manteo/Beach	Tea party	Summer	5.00
All	Tee ball	Spring	20.00
Hatteras	Tennis camp	Summer	25.00/15.00
All	Toddler camp	Summer	20.00
Beach	Trips (cultural events)	Spring/Fall	10.00-20.00
Hatteras	Volleyball	Spring	25.00/15.00
Hatteras	Volleyball camp	Summer	25.00
Beach	Weaving	Spring/Fall	25.00
Hatteras	Web page design camp	Summer	25.00/15.00
All	Wrestling	Spring/Fall	25.00
Hatteras	Wrestling camp	Summer	25.00
Beach	Wrestling camp	Summer	30.00
All	Late registration fee	All	5.00

Facility Usage Fees:

Field		\$10.00 per hour, plus 10.00 per hour for lights	
Gymnasium (during operating hours)		10.00 per hour	
Tennis court		10.00 per court (maximum of 3 courts)	
Tournament – field		150.00 per day, plus 50.00 for lights, plus 25% of charged admission and sales	
Tournament - gymnasium		35.00 per hour, plus 25% of charged admission and sales, plus 15.00 per hour if staff person required	
Meeting space (during operating hours)		10.00 per hour	
Bleacher rental, 250 seating		75.00 per day	
Bleacher rental, all other		15.00 per day	

Additional charges, i.e. security deposit, may apply per facility use agreement to be signed by both parties.

Public Works

Trash can, picked up	each	\$ 65.00 plus tax
Trash can, delivered	each	75.00 plus tax

Attachment 1

**DARE COUNTY DEPARTMENT OF PUBLIC HEALTH
CLINICAL SERVICES - CPT CODES AND FEES
FY 2006/2007**

CLINIC/SERVICE	CPT CODE	CLINIC CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEES FY 2007
	99201	New Pt. Level I–Minimal	62.10	75.00
	99202	New Pt. Level II–Problem Focused	93.15	113.00
	99203	New Pt. Level III–Expanded	132.48	162.00
	99204	New Pt. Level IV–Detailed	194.58	235.00
	99205	New Pt. Level V–Comprehensive	244.26	295.00
ESTABLISHED PATIENT				
	99211	Est. Pt. Level I–Minimal	34.16	42.00
	99212	Est. Pt. Level II–Problem Focused	56.93	69.00
	99213	Est. Pt. Level III–Expanded	78.66	95.00
	99214	Est. Pt. Level IV–Detailed	122.13	148.00
	99215	Est. Pt. Level V–Comprehensive	182.16	228.00
PREVENTIVE SERVICES (NEW PATIENT)				
	99381	Well Exam <1	90.00	113.00
	99382	1-4 Yr Exam	90.00	113.00
	99383	5-11 Yr Exam w/EP	90.00	113.00
	99383	5-11 Yr Exam w/FP	154.00	193.00
	99384	12-17 Yr Exam w/EP	90.00	113.00
	99384	12-17 Yr Exam w/FP	169.00	212.00
Medicaid age limit is 18-21	99385	18-21 Yr Exam w/EP	90.00	113.00
	99385	18-39 Yr Exam w/FP	167.00	209.00
	99386	40-64 Yr Exam w/FP	199.00	249.00
	99387	65+ Year	215.00	269.00
PREVENTIVE SERVICES (EST. PATIENT)				
	99391	Well Exam <1	90.00	113.00
	99392	1-4 Yr Exam EP	90.00	113.00
	99393	5-11 Yr Exam w/EP	90.00	113.00
	99393	5-11 Yr Exam w/FP	126.00	113.00
	99394	12-17 Yr Exam w/EP	90.00	113.00
	99394	12-17 Yr Exam w/FP	146.00	183.00
	99395	18-39 Yr Exam w/EP	90.00	113.00
	99395	18-39 Yr Exam w/FP	142.00	178.00
	99396	40-64 Yr Exam w/FP	158.00	198.00
	99397	65+ Year	175.00	219.00
BLOOD PRESSURE	93770	Blood Pressure Check	8.89	11.11
CHILD HEALTH	92551	Auditory Screening	9.77	12.00
	99173	Vision Screening	N/C	N/C
	S9442	Childbirth Education Classes 1 unit =2hrs	19.09	100.00
	T1016	Child Service Coordination 1 unit = 15 min Maximum 6 units per month	21.74	26.00
99501 & 99502	99502	Home Visits for Newborn Care /Mother	60.00	75.00
	96110	Developmental Test , LIM	10.14	12.68

Attachment 1

CLINIC/SERVICE	CPT CODE	CLINIC CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEEES FY 2007
CD/STD	56501	Destroy Vulva Lesion(s)	118.28	148.00
	54050	Destruction/Lesion/Condyloma	101.77	128.00
	T1002	STD Control Treatment – (RN only – 15 minutes)	19.50	24.00
DENTAL VARNISH				
These Codes	D0150	Comprehensive Oral Evaluation	31.46	40.00
Are billed under	D0120	Periodic Oral Examination	23.07	29.00
Child Health Only	D1203	Topical Application Fluoride	15.44	20.00
	D1330	Oral Hygiene Instruction	15.00	19.00
DIABETES Medicaid ONLY	99404	Individual Visit (New & Est.) Medicaid # of 60 min units	115.32 per 60 min	144.00 per 60 min.
Medicaid ONLY	99412	Group Visit – per hour Medicaid billed in 60 min units	17.56 per 60 minutes	22.00 per 60 minutes
Medicare Only	G0108	Individual Visit (30 min. units)		
Medicare Only	G0109	Group Visit (30 min units)		
FAMILY PLANNING	57170	Diaphragm Fitting	84.58	106.00
C9983 – old code	LU235	Pill Extension/Replacement	N/A	35.00
HOUSE LAB	81000	Urine Dipstick & Micro	4.43	6.00
	81002	Urine Dipstick	3.57	5.00
	85018	Hemoglobin	3.31	4.00
	87210	Smear, Stain & Interpret Wet Mount	5.33	7.00
	87205	Gram Stain	5.96	8.00
	82948	Glucose, quantitative (BS)	4.43	8.00
	82270	Test Feces Blood (Occult Blood)	4.54	6.00
	81025	Urine Pregnancy Test	8.84	13.00
INJECTION	J1055	Depo - Provera	53.06	66.00
** First Injection	90471	1 Injection Immunization Adm	7.15	10.00
Given by Physician	90471EP	1 Injections Immunization Adm-with EP	27.42	34.28
2 or more injections	90472	2 or more Injections (use w/90471)	4.84	15.00
	90782	Injection Fee (Private Injection)	17.01	21.00
MATERNAL Health	S9445	Maternal OutReach Worker (MOW)	16.50	21.00
	T1017	Maternal Care Coordination per unit Maximum of 6 units per month	29.30	37.00
MEDICAL NUTRITION	97802	MNT Initial Individual Only <u>15 min unit</u>	15.88	21.00
	97803	MNT Follow-Up – 15 min.	15.88	21.00
	97804	MNT Group – 30 min.	N/A	N/A
99401-old code	99404	Nutritional Counseling -Individual 60 min.	115.32	144.00
	99402	Nutritional Counseling -Group 60 min	N/A	22.00
MISCELLEANOUS C1901- old code	LU004	Breast Pump Rental – Administration Fee - SFS	N/A	25.00
Old code 99000	36415	Collection of Venous Blood by Venipuncture Specimen Collection & Handling	3.00	15.00
Use G0001 for Medicare Only	G0001	Veni-puncture finger/heel stick		

Attachment 1

CLINIC/SERVICE	CPT CODE	CLINIC CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEEES FY 2007
Medicare	G0008	Influenza Adm. Fee (Medicare)	N/A	Rates not rec'd
Medicare	G0009	Pneumonia Adm. Fee (Medicare)		Rates not rec'd
DRUG SCREEN	80100	Drug Screen (includes collection & handling)	20.32	25.00
Old Codes		ADAP Physical	N/A	25.00
C9910	LU208	Athletic Physical (on site at HD)	N/A	25.00
C9912	LU210	Camp Physical	N/A	25.00
C9914	LU212	College Physical	N/A	25.00
C9907	LU205	Dare Challenge Physical	N/A	25.00
C9908	LU206	Day Care Physical	N/A	25.00
C9911	LU209	Foster Care Physical	N/A	N/C
C9909	LU207	Head Start Physical	N/A	30.00
C9913	LU211	Scout Physical	N/A	25.00
C9918	LU216	Law Enforcement (Sheriff Physicals) Code C9918 @ \$75.00 and Code 80100 as Report Only	N/A	75.00
C9905	LU206	Work Physical	N/A	25.00
C9916	LU206	Kindergarten Physical (school – group)	N/C	N/C
C9916	LU206	Kindergarten Physical (on site at HD) Clinical staff time must be charged to Adult Health. (Time Equiv.)	N/A	25.00
SPEECH THERAPY	92506	Speech Evaluation	117.91	148.00
	92507	Speech Treatment	75.00	94.00
	92508	Treatment, 2 or more	31.40	39.00
	92525	Swallow/Oral Function Eval.	n/a	n/a
	92526	Swallow/Oral Treatment	n/a	n/a
TB	86580	TB Intradermal Test	8.79	11.00
	T1002	TB Control Treatment (per 15 minutes)	19.50	24.00
C8603	LU102	Record of TB Screening	n/a	15.00
VACCINE ADMINISTRATION FEES	90732	Pneumonia		
	90633	Hepatitis A- Ped (plus \$10.00 admin fee)	28.22	35.00
	90632	Hepatitis A (plus \$10.00 admin. fee)	66.65	83.00
	90657	Influenza 6 – 35 months	9.56	12.00
Code 90659 deleted in 2004	90658	Influenza (Adult) (\$30.00) Set by Medicare Rates 3 yrs and above in age (90471+90658) Set at \$30.00 for Flu Season 2005 based on Medicare Rate	9.56	12.45
	90746	Hepatitis B Adult IM ages 20+ Will be charged unless series initiated by age 18 and completed by age 20 (plus \$17.55 admin. fee)	52.54	66.00
	90384	Rhogam (plus \$17.55 admin. fee)	95.04	119.00
Old Code 90676	90675	Rabies/Intramuscular (plus \$17.55 admin. fee)	129.00	162.00
	90716	Varicella (plus \$17.55 admin. fee)	61.26	77.00

Attachment 2

**DARE COUNTY DEPARTMENT OF PUBLIC HEALTH
DENTAL SERVICES – CPT CODES AND FEES
FY2006/2007**

The fees for the Mobile Dental Van are based on the Local Health Department Medicaid Rates for Dental Services.

CPT CODE	DENTAL CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEES FY 2007
D0120	Periodic oral evaluation	27.01	34.00
D0140	Limited oral evaluation	35.77	45.00
D0150	Comprehensive evaluation	45.00	57.00
D0160	Detailed & extensive evaluation	59.40	75.00
D0210	Intraoral including bitewings	75.19	94.00
D0220	Intraoral periapical 1 st film	14.60	19.22
D0230	Intraoral periapical each additional film	11.68	15.00
D0240	Intraoral occlusal film	14.60	18.25
D0250	Extraoral 1 st film	13.41	17.00
D0260	Extraoral each additional film	6.76	9.00
D0270	Bitewing single film	8.14	10.00
D0272	Bitewings 2 films	17.52	22.00
D0274	Bitewings four films for 13 yrs +	31.39	39.00
D0290	Post/ant. or skull/facial bone film	n/a	
D0310	Sialography	n/a	
D0320	TMJ arthrogram inc. injection	n/a	n/a
D0330	Panoramic film	57.67	72.00
D0340	Cephalometric film	27.71	35.00
D0470	Diagnostic casts	31.46	40.00
D0501	Histopathologic examination	n/a	n/a
D1110	Prophylaxis-adult	30.00	37.50
D1120	Prophylaxis-child	21.62	27.00
D1201	Fluoride application inc. prophy-child	36.51	46.00
D1203	Fluoride application w/o prophy-child	15.44	24.00
D1204	Topical application of fluoride-adult	15.44	24.00
D1205	Fluoride application inc. prophy-adult	40.74	51.00
D1330	Oral hygiene application	Clinic Only	
D1351	Sealant per tooth	29.93	37.00
D1510	Space maintainer fixed unilateral	208.05	260.00
D1515	Space maintainer fixed bilateral	418.29	522.86
D2110	Amalgam one surface primary	58.00	73.00
D2120	Amalgam 2 surfaces primary	81.00	102.00
D2130	Amalgam 3 surfaces primary	102.00	128.00
D2131	Amalgam 4+ primary	115.00	144.00
D2140	Amalgam 1 surface permanent	62.78	79.00
D2150	Amalgam 2 surfaces permanent	79.41	99.00
D2160	Amalgam 3 surfaces permanent	91.25	114.00
D2161	Amalgam 4+ permanent	97.20	122.00

Attachment 2

CPT CODE	DENTAL CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEES FY 2007
D2330	Resin one surface anterior	62.78	78.00
D2331	Resin 2 surfaces anterior	77.38	97.00
D2332	Resin 3 surfaces anterior	91.25	114.00
D2335	Resin 4+ surfaces involving incisal	71.60	90.00
D2336	Composite resin crown ant. primary	116.07	145.00
D2380	Resin 1 surface post primary	58.00	73.00
D2381	Resin 2 surfaces post. primary	97.20	122.00
D2385	Resin 1 surface post. permanent	58.00	73.00
D2386	Resin 2 surfaces post. permanent	115.00	144.00
D2387	Resin 3 surfaces post. permanent	149.70	187.00
D2388	Resin 4+ surfaces post. permanent	183.10	229.00
D2910	Re-cement inlay	14.78	19.00
D2920	Re-cement crown	15.40	19.00
D2930	Prefab ss crown primary tooth	144.25	180.00
D2931	Prefab ss crown permanent tooth	141.58	177.00
D2933	Prefab ss crown w/resin window	181.77	227.00
D2940	Sedative filling	28.00	35.00
D2950	Core buildup inc. pins	63.64	80.00
D2951	Pin retention per tooth	20.50	26.00
D2970	Temporary (fractured tooth)	61.48	77.00
D3110	Pulp cap – direct exc. final restoration	13.41	17.00
D3220	Therapeutic pulpotomy exc. fin.rest.	78.11	98.00
D3310	Anterior exc. final restoration	188.78	236.00
D3330	Molar exc. final restoration	330.36	413.00
D3351	Apexification/recalcification init. visit	104.88	131.00
D3352	Apexification/recalcification interim	n/a	
D3353	Apexification/recalcification final visit	n/a	
D3410	Apicoectomy/periadicular surgery	n/a	
D4210	Gingivectomy or gingivoplasty p/quad	82.06	103.00
D4211	Gingivectomy or ginivoplasty 1-3 teeth	41.03	51.00
D4240	Gingival flap procedure inc. root plan	n/a	
D4341	Periodontal scaling & root plan p/quad	78.11	98.00
D4355	Full mouth debridement	60.00	75.00
D4910	Periodontal maint. procedures	31.30	39.00
D5110	Complete denture maxillary	309.10	405.00
D5120	Complete denture mandibular	309.10	405.00
D5140	Immediate denture mandibular	307.26	384.00
D5211	Maxillary partial denture – resin base	344.66	431.00
D5212	Mandibular partial denture resin base	344.66	431.00
D5213	Maxillary partial denture cast metal	451.34	564.00
D5214	Mandibular partial denture cast met	451.34	564.00
D5410	Adjust complete denture maxillary	13.41	17.00
D5411	Adjust complete denture mandibular	13.41	17.00
D5421	Adjust partial denture maxillary	18.48	23.00

Attachment 2

CPT CODE	DENTAL CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEES FY 2007
D5422	Adjust partial denture mandibular	18.48	24.00
D5510	Repair broken complete denture base	80.80	101.00
D5520	Replace missing or broken teeth	59.90	75.00
D5610	Repair resin denture base	80.80	101.00
D5620	Repair cast framework	67.77	85.00
D5630	Repair or replace broken clasp	n/a	n/a
D5640	Replace broken teeth per tooth	44.94	57.00
D5650	Add tooth to existing partial denture	59.90	75.00
D5660	Add clasp to existing partial denture	125.00	157.00
D5730	Reline maxillary complete denture	64.71	81.00
D5731	Reline mandibular complete denture	64.71	81.00
D5740	Reline maxillary partial denture	n/a	n/a
D5741	Reline mandibular partial denture	72.98	91.00
D5750	Reline maxillary complete denture	117.85	148.00
D5751	Reline mandibular complete denture	117.85	148.00
D5760	Reline maxillary partial denture	n/a	n/a
D5761	Reline mandibular partial denture	n/a	n/a
D6985	Pediatric partial denture fixed	189.50	237.00
D7110	Single tooth extraction	57.00	72.00
D7120	Each additional tooth extraction	57.00	72.00
D7130	Root removal exposed roots	35.00	44.00
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	51.10	64.00
D7210	Surgical removal of erupted tooth	78.11	98.00
D7220	Removal of impacted tooth soft	60.00	80.00
D7230	Removal of impacted tooth part. bony	154.76	193.00
D7240	Removal of impacted tooth com. bony	135.00	169.00
D7241	Removal of impact tooth com. bony unusual	165.00	207.00
D7250	Surgical removal of residual tooth roots	60.00	90.00
D7260	Oral antral fistula closure	n/a	n/a
D7270	Tooth reimplantation	122.71	154.00
D7285	Biopsy of oral tissue hard	n/a	
D7280	Surgical Access of an unerupted tooth	165.00	206.00
D7286	Biopsy and exam of oral tissue soft	113.30	142.00
D7310	Alveoloplasty extraction p/quadrant	38.48	49.00
D7320	Alveoloplasty not ext. p/quadrant	57.48	72.00
D7340	Vestibuloplasty ridge extension <i>stomatoplasty per arch uncomplicated</i>	548.59	686.00
D7350	Vestibuloplasty ridge extension inc.	n/a	
D7410	Radical excision lesion up to 1.25 cm	n/a	
D7420	Radical excision lesion >1.25 cm	n/a	
D7430	Excision of benign tumor up to 1.25	89.19	111.00
D7440	Excision of mal. tumor up to 1.25	n/a	
D7441	Excision of mal. tumor > 1.25 cm	n/a	

Attachment 2

CPT CODE	DENTAL CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEES FY 2007
D7450	Removal of odontogenic cyst/tumor	370.61	463.00
D7451	Removal of odontogenic cyst/tumor	370.61	463.00
D7460	Removal of nonodontogenic cyst/tumor	n/a	
D7461	Removal of nonodontogenic cyst/tumor	n/a	
D7471	Removal of exostosis per site	n/a	
D7473	Removal of torus mandibularis	236.37	295.00
D7490	Radical resection of mand. w/bone		
D7510	Incision & drainage of abscess int	152.62	191.00
D7520	Incision & drainage of abscess ext	289.05	361.00
D7530	Removal of foreign body, skin or tiss	20.17	25.00
D7540	Removal of reaction-prod. foreign body	n/a	
D7550	Sequestrectomy for osteomyelitis	n/a	
D7610	Maxilla open reduction	n/a	
D7620	Maxilla closed reduction	n/a	
D7630	Mandible open reduction	n/a	
D7640	Mandible closed reduction	n/a	
D7650	Malar and/or zygomatic arch open	n/a	
D7660	Malar and/or zygomatic arch closed	n/a	
D7670	Alveolus stab. of teeth. open	n/a	
D7680	Facial bones complicated reduction	n/a	
D7710	Maxilla open reduction	n/a	
D7720	Maxilla closed reduction	n/a	
D7730	Mandible open reduction	n/a	
D7740	Mandible closed reduction	n/a	
D7750	Malar and/or zygomatic arch open	n/a	
D7760	Malar and/or zygomatic arch closed	n/a	
D7770	Alveolus stab. of teeth open reduction	n/a	
D7780	Facial bones complicated reduction	n/a	
D7810	Open reduction of dislocation	n/a	
D7820	Closed reduction of dislocation	n/a	
D7830	Manipulation under anesthesia	n/a	
D7910	Suture of recent sm. wounds to 5 cm	174.94	224.93
D7911	Complicated suture to 5 cm	n/a	
D7912	Complicated suture > 5 cm	n/a	
D7920	Skin graft	n/a	
D7955	Repair of maxillofacial tissue defect	n/a	n/a
D7960	Frenulectomy (frenectomy or frenotomy)-S	149.71	187.00
D7971	Excision of percoronal gingival	311.07	389.00
D7980	Sialolithotomy	n/a	
D7981	Excision of salivary gland	n/a	
D7982	Sialodocoplasty	n/a	
D7990	Emergency tracheotomy	n/a	
D8080		n/a	
D8670	Periodic ortho visit	n/a	

Attachment 2

CPT CODE	DENTAL CPT/MEDICAID DESCRIPTION	MEDICAID RATES EFFECTIVE JAN-06	FEES FY 2007
D9110	Palliative tx of dental pain minor	18.48	23.00
D9221	General anesthesia each additional 15 min	n/a	
D9230	Analgesia	45.00	57.00
D9241	IV sedation/analgesia – 1 st 30 min	n/a	n/a
D9242	IV sedation/analgesia each additional 15 min	n/a	n/a
D9410	House call	26.83	34.00
D9420	Hospital call	113.88	143.00
D9440	Office visit after hours	20.17	25.00
D9610	Therapeutic drug injection	n/a	n/a
D9630	Other drugs and/or medicaments	15.92	20.00

Medicaid rates have not been provided for those Dental CPT codes without amounts.

Attachment 3
DARE COUNTY DEPARTMENT OF PUBLIC HEALTH
Environmental Health Fees
FY2006/2007

I. WATER SAMPLES	
1. Bacterial	\$ 30.00
2. Chemical	\$ 30.00
II. SITE EVALUATION	
1. Residential or Duplex	\$ 125.00
2. Large-development, and Commercial	\$ 400.00
III. IMPROVEMENT PERMITS	
1. Residential	\$ 400.00
2. Commercial Permits (based on gal per day)	
a. 0 to 1000 gal per day	\$ 500.00
b. 1001 to 3000 gal per day	\$ 600.00
c. Over 3000 gal per day	\$ 700.00
IV. OPERATION PERMITS/INSPECTION FEE	
1. Type (4) - Inspected once every 3 years	\$ 150.00
2. Type (5) - Inspected once every year	\$ 200.00
3. Type (6) - Inspected twice a year	\$ 250.00
V. APPLICATION FOR	
1. Change of use (Residential)	\$ 75.00
2. Change of use (Commercial)	\$ 125.00
VI. PERMIT RE-WRITE	
1. Residential	\$ 75.00
2. Commercial	\$ 125.00
VII. REINSPECTION FEE	\$ 25.00
VIII. PLAN REVIEW	
1. Restaurant	\$ 100.00
2. Swimming pools	\$ 100.00
IX. SWIMMING POOL PERMITS	\$ 100.00
X. TATTOO PERMITS	\$ 100.00
XI. SERVE SAFE CLASS	\$ 100.00
XII. COPY FEE (per copy)	\$ 0.30

Attachment 4

**DARE COUNTY DEPARTMENT OF PUBLIC HEALTH
HOME HEALTH & HOSPICE – RATES FOR SERVICE
FY2006/2007**

Per Visit	
Discipline	Standard Charge
Skilled Nursing, RN	\$115.00 per visit
Physical Therapy	\$115.00 per visit
Occupational Therapy	\$115.00 per visit
Speech Therapy	\$115.00 per visit
Medical Social Work	\$130.00 per visit
Nutrition Services	\$115.00 per visit
Home Care Aide	\$60.00 per visit
Homemaker Services	\$12.50/hour with 4 hr. minimum
Per Diem-to reflect the current Medicare reimbursement rate set 10/01 each year.	
Level of Care	Standard Charge
Routine Home Care	\$118.22
Continuous Home Care	\$690.02 (\$28.75/hour)
General In-Patient	\$528.44
In-Patient Respite	\$124.11