LGA Name:

Monterey County

LGA NPI:

1841472404

Reporting Period:

July 1, 2018 - June 30, 2019

Summary of Medi-Cal Reimbursement per Individual Budget Unit/Subcontractor

Part I

·			Budget	Unit		Subcontractors								
	Unit 1	Unit 2		Unit 3	Unit 4	C	ontractor 1	Con	ntractor 2	Cont	ractor 3	Con	tractor 4	
Total Program Cost and Encounter Rate	1	2		3	4		5		6		7		8	
Total TCM Program Cost (W/S B Col. 26 and W/S E Col. 10)	\$ 83,444	\$ =	\$	=	\$ ~	\$	269,722	\$	-	\$	-	s		
Total TCM Encounters (W/S F Part I, Col. 5)	192	-			-		440	_	-	*				
TCM Program Cost Per Encounter (Line 1 / Line 2)	\$ 434.60	\$ -	\$	3=	\$ -	\$	613.00	\$		\$	_	S		
Calculated Maximum Medi-Cal Reimbursement										-		-		
TCM Reimbursable Cost per Encounter (Line 3)	\$ 434.60	\$ -	\$	-	\$ -	\$	613.00	\$		\$	_	\$		
Total TCM Medi-Cal Claimable Encounters	185	-		-	-	,	301	-		<u> </u>	_	Ψ		
TCM Medi-Cal Reimbursable Cost (Line 4 * Line 5)	80,402	8.7		-	-		184,514		_					
CPE Funding to TCM Program (W/S D, E Col. 12)	469,352	-		-	-		184,514		_		-			
Over/ <under> Funding (Line 7 - Line 6)</under>	\$ 388,950	\$ 7	\$	-	\$ -	\$	-	\$		\$	-	\$		
Maximum Medi-Cal Reimbursable Amount (lesser of line 6 or line 7)	\$ 80,402	\$	\$	-	\$ -	\$	184,514	\$	-	\$	-	\$	-	

									Sub	contractor	S							
	Con	tractor 5	Con	tractor 6	Cor	ntractor 7	Con	tractor 8	Cont	ractor 9	Cont	ractor 10	Cont	ractor 11	Cor	ntractor 12		Total
Total Program Cost and Encounter Rate	Winds.	9		10		11		12		13		14		15		16		17
Total TCM Program Cost (W/S E Col. 10)	\$	-	\$	-	\$	-	\$	-	\$		\$	-	\$	_	\$		\$	353,166
Total TCM Encounters (W/S F Part I, Col. 5)		12		-		-		=		-		-		-	+		-	632
TCM Program Cost Per Encounter	\$	_	\$	726	\$	-	\$	-	\$	-	\$	-	\$		\$			
Calculated Maximum Medi-Cal Reimbursement													-		-		1	
TCM Reimbursable Cost per Encounter	\$	-	\$	-	\$		\$	-	\$	-	\$	-	\$	=	\$	_	1	
Total TCM Medi-Cal Claimable Encounters				-		-		-		12	1.00	-			-			
TCM Medi-Cal Reimbursable Cost		-		-		-		-		-		-				_		
CPE Funding to TCM Program (W/S E Col. 12)		1=0		-0		=		-		-		-				_		
Over/ <under> Funding</under>	\$	-	\$	-	\$	-	\$	-	\$		\$	-	\$		\$	_		
Maximum Medi-Cal Reimbursable Amount	\$	-	\$	-	\$	-	\$	-	\$	_	\$	-	\$	_	\$	-	\$	264,916

Calculation of Reimbursement Settlement

Worksheet G

LGA Name:

Monterey County

LGA NPI:

1841472404

Reporting Period:

July 1, 2018 - June 30, 2019

Summary of LGA TCM Reimbursement Settlement

	FMAP Rate	FMAP Percentage	Amount
	1	2	3
1 Maximum Medi-Cal Reimbursable Amount (W/S G part I, line 9 col. 17)		9	264,916
2.1 Maximum Medi-Cal Reimbursement per FMAP 1	50.0000%	100.0000%	132,458
2.2 Maximum Medi-Cal Reimbursement per FMAP 2	0.0000%	0.0000%	,
2.3 Maximum Medi-Cal Reimbursement per FMAP 3	0.0000%	0.0000%	
2.4 Maximum Medi-Cal Reimbursement per FMAP 4	0.0000%	0.0000%	
2 Maximum Medi-Cal Reimbursement - Total (line 2.1 + line 2.2 + line 2.3 + line 2.4)			132,458
3.1 Interim Payments Received			(154,200)
3.2 Invoice Submitted Pending			(10,575)
3 Interim Payments - Total (line 3.1 + line 3.2)			(164,775)
4 Other Coverage			(104,770)
5 Balance Due LGA/(State) [subject to DHCS Reconciliations] (line 2 + line 3 + line 4)			(32,317)

Newly Established Interim Medi-Cal TCM Encounter Payment Rate (IMTEPR)

	1
6 Total TCM Program Cost (W/S G part I, line 1 col. 17)	\$ 353,166
7 Total TCM Encounters (W/S G part I, line 2 col. 17)	632
8 IMTEPR (Line 6 / Line 7)	\$ 558.81

Part II

Part III

Amount

Legal Authority: N/A

Test Name: Treatment; Initial 30 minutes

Description of Service: Treatment; Initial 30 minutes

Volume: Approximate annual total: N/A

Time to Perform: 0.65 hours

						Fu	lly Loaded		
			Total S&B			(Cost per		Total
Cost to Perform:	Classification		per Hour		Overhead		Hour	Hours	Cost
Physical Therapist/0	Occupational Therapist	\$	98.94	\$	38.82	\$	137.76	0.50	\$ 68.88
	Supervising Therapist	\$	102.97	\$	40.41	\$	143.38	0.15	\$ 21.51
							Total	0.65	\$ 90.39

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 89.00

Proposed Fee: \$89.00

Legal Authority: N/A

Test Name: Treatment; each additional 15 minutes

Description of Service: Treatment; each additional 15 minutes

Volume: Approximate annual total: N/A

Time to Perform: 0.25 hours

		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O۷	erhead		Hour	Hours	Cost
Physical Therapist/0	Occupational Therapist	\$ 98.94	\$	38.82	\$	137.76	0.25	\$ 34.44
	Supervising Therapist	\$ 102.97	\$	40.41	\$	143.38	-	\$ -
						Total	0.25	\$ 34.44

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 33.00

Proposed Fee: \$ 33.00

Legal Authority: N/A

Test Name: Evaluation; Initial 30 minutes

Description of Service: Evaluation; Initial 30 minutes

Volume: Approximate annual total: N/A

Time to Perform: 0.65 hours

						Fu	Ily Loaded				
			Total S&B			(Cost per			Total	
Cost to Perform:	Classification		per Hour	Overhead			Hour	Hours		Cost	
Physical Therapist/C	Occupational Therapist	\$	98.94	\$	38.82	\$	137.76	0.50	\$	68.88	
	Supervising Therapist	\$	102.97	\$	40.41	\$	143.38	0.15	\$	21.51	
							Total	0.65	\$	90.39	

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 89.00

Proposed Fee: \$89.00

Legal Authority: N/A

Test Name: Evaluation; each additional 15 minutes

Description of Service: Evaluation; each additional 15 minutes

Volume: Approximate annual total: N/A

Time to Perform: 0.25 hours

		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O۷	erhead		Hour	Hours	Cost
Physical Therapist/0	Occupational Therapist	\$ 98.94	\$	38.82	\$	137.76	0.25	\$ 34.44
	Supervising Therapist	\$ 102.97	\$	40.41	\$	143.38	-	\$ -
						Total	0.25	\$ 34.44

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 33.00

Proposed Fee: \$ 33.00

Legal Authority: N/A

Test Name: Case Conference and Report; Initial 30 minutes

Description of Service: Case Conference and Report; Initial 30 minutes

Volume: Approximate annual total: N/A

Time to Perform: 0.65 hours

					Fu	Ily Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	Ov	erhead		Hour	Hours	Cost
Physical Therapist/	Occupational Therapist	\$ 98.94	\$	38.82	\$	137.76	0.50	\$ 68.88
	Supervising Therapist	\$ 102.97	\$	40.41	\$	143.38	0.15	\$ 21.51
						Total	0.65	\$ 90.39

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 89.00

Proposed Fee: \$89.00

Legal Authority: N/A

Test Name: Case Conference and Report; each additional 15 minutes

Description of Service: Case Conference and Report; each additional 15 minutes

Volume: Approximate annual total: N/A

Time to Perform: 0.25 hours

					Fu	Ily Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O۷	erhead		Hour	Hours	Cost
Physical Therapist/	Occupational Therapist	\$ 98.94	\$	38.82	\$	137.76	0.25	\$ 34.44
	Supervising Therapist	\$ 102.97	\$	40.41	\$	143.38	-	\$ -
						Total	0.25	\$ 34.44

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 33.00

Proposed Fee: \$ 33.00

Legal Authority: N/A

Test Name: Case consultation and report

Description of Service: Case consultation and report

Volume: Approximate annual total: N/A

Time to Perform: 1.20 hours

					Fu	Ily Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	Ov	erhead		Hour	Hours	Cost
Physical Therapist/	Occupational Therapist	\$ 98.94	\$	38.82	\$	137.76	1.00	\$137.76
	Supervising Therapist	\$ 102.97	\$	40.41	\$	143.38	0.20	\$ 28.68
						Total	1.20	\$ 166.44

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 164.00

Proposed Fee: \$ 165.00

Legal Authority: N/A

Test Name: Off-site Travel to provide above Services, 15 minute increment

Description of Service: Off-site Travel to provide above Services, 15 minute increment

Volume: Approximate annual total: N/A

Time to Perform: 0.25 hours

		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O۷	erhead		Hour	Hours	Cost
Physical Therapist/0	Occupational Therapist	\$ 98.94	\$	38.82	\$	137.76	0.25	\$ 34.44
	Supervising Therapist	\$ 102.97	\$	40.41	\$	143.38	-	\$ -
						Total	0.25	\$ 34.44

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 33.00

Proposed Fee: \$ 33.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Bacterial Culture Identification

Description of Service: Identification of bacteria when submitted as an isolate. This test is typically

ordered by local hospital laboratories for ID confirmation, or to rule out potential

bioterrorism agents (select agents).

Order Code: 1010285

Volume: Approximate annual total: 8

Time to Perform: 2.04 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours		Total Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.25	\$	42.49
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.02	\$	84.58
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.47	\$	23.55
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.30	\$	17.62
							Supplies	\$	43.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	41.00
						Total	2.04	\$ 2	252.24

 Total Annual Cost:
 \$ 2,017.92

 Current Revenue:
 \$ 656.00
 32.51%

 Unmet Cost:
 \$ 1,361.92
 67.49%

Current Fee: \$ 82.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 720.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Bacterial Meningitis Panel (a)

Description of Service: This is a new testing panel offered to test cerebral spinal fluid for bacteria

commonly associated with meningitis rapidly by molecular methods. The organisms tested in this panel include Neiserria meningitidis, Haemophilus

influenzae, and Streptococcus pneumoniae.

Order Code: 1010299

Volume: Approximate annual total: 15

Time to Perform: 1.46 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O۷	erhead		Hour	Hours		Cost
Director Pul	olic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.18	\$	30.59
Public H	lealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.08	\$	89.55
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	43.00
		Lab s	oftw	are, equi	pme	nt mainten	ance, etc.	\$	41.00
						Total	1.46	\$	215.20

Total Annual Cost: \$ 3,228.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 3,228.00
 100.00%

Current Fee: New Test

Proposed Fee: \$ 126.00

Proposed Cost Recovery: \$ 1,890.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Bordetella pertussis PCR

Description of Service: Nucleic acid amplification assay, developed by MCPHL, for the rapid detection of

the fastidious organism, Bordetella pertussis from nasal pharyngeal swab

specimens. Bordetella pertussis is the infectious agent associated with whooping

cough.

Order Code: 2010370

Volume: Approximate annual total: 164

Time to Perform: 1.35 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	/erhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.17	\$ 28.89
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.92	\$ 76.29
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$ 4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.18	\$ 10.57
							Supplies	\$ 37.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$ 35.00
						Total	1.35	\$ 191.76

 Total Annual Cost:
 \$ 31,448.64

 Current Revenue:
 \$ 13,940.00
 44.33%

 Unmet Cost:
 \$ 17,508.64
 55.67%

Current Fee: \$ 85.00

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 15,580.00

Legal Authority: Health and Safety Code Section 101150

Test Name: E. coli STEC culture

Description of Service: Detection and isolation of shiga toxin producing Escherichia coli (STEC). This test

is routinely ordered by the Health Department's Communicable Disease Unit to investigate contacts of STEC during outbreaks, and to clear food handlers or day care workers who are prevented from returning to work until they are clear of the

organism.

Order Code: 1010200

Volume: Approximate annual total: 26

Time to Perform: 1.64 hours per specimen

					Fu	lly Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours	Cost
Director Pu	blic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.20	\$ 33.99
Public H	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.78	\$ 64.68
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.58	\$ 29.06
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$ 4.70
							Supplies	\$ 45.00
		Lab s	oftw	are, equi _l	ome	ent maintena	ance, etc.	\$ 43.00
						Total	1.64	\$ 220.43

 Total Annual Cost:
 \$ 5,731.18

 Current Revenue:
 \$ 676.00
 11.80%

 Unmet Cost:
 \$ 5,055.18
 88.20%

Current Fee: \$ 26.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 2,340.00

Legal Authority: Health and Safety Code Section 101150

Test Name: E. coli STEC ID

Description of Service: Identification and serogrouping of shiga toxin producing Escherichia coli (STEC)

when submitted as an isolate. Specimens for this test are routinely received from

local hospital laboratories to comply with CCR Title 17 regulations.

Order Code: 1010210

Volume: Approximate annual total: 55

Time to Perform: 1.63 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	verhead		lly Loaded Cost per Hour	Hours		Total Cost
	ic Health Laboratory	\$ •	\$		\$	169.94	0.20	\$	33.99
Public He	alth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.78	\$	64.68
I	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.57	\$	28.56
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi	pme	nt maintena	ince, etc.	\$	43.00
						Total	1.63	\$:	219.93

 Total Annual Cost:
 \$ 12,096.15

 Current Revenue:
 \$ 2,695.00
 22.28%

 Unmet Cost:
 \$ 9,401.15
 77.72%

Current Fee: \$ 49.00

Proposed Fee: \$ 87.00

Proposed Cost Recovery: \$ 4,785.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Enteric Stool Culture - Campylobacter

Description of Service: Detection and isolation of bacteria belonging to the Campylobacter genus from

direct specimens. Campylobacter species are known to cause food borne illness.

Order Code: 1010150

Volume: Approximate annual total: 1

Time to Perform: 1.24 hours per specimen

					Fu	Ily Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Po	ublic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.15	\$	25.49
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.78	\$	64.68
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.23	\$	11.53
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	43.00
						Total	1.24	\$	194.40

 Total Annual Cost:
 \$ 194.40

 Current Revenue:
 \$ 26.00
 13.37%

 Unmet Cost:
 \$ 168.40
 86.63%

Current Fee: \$ 26.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 90.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Enteric Stool Culture - Comprehensive

Description of Service: Comprehensive testing for a variety of bacterial pathogens known to cause

gastrointestinal disease.

Order Code: 1010140

Volume: Approximate annual total: 25

Time to Perform: 2.42 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	verhead		lly Loaded Cost per Hour	Hours		Total Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.30	\$	50.98
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.32	\$ 1	109.45
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.72	\$	36.08
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	43.00
						Total	2.42	\$ 2	289.21

 Total Annual Cost:
 \$ 7,230.25

 Current Revenue:
 \$ 4,925.00
 68.12%

 Unmet Cost:
 \$ 2,305.25
 31.88%

Current Fee: \$ 197.00

Proposed Fee: \$ 208.00

Proposed Cost Recovery: \$ 5,200.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Enteric Stool Culture - Salmonella CC

Description of Service: Detection and isolation of Salmonella bacteria from direct specimens. This test is

routinely ordered by the Health Department's Communicable Disease Unit to investigate contacts of Salmonella during outbreaks and to clear food handlers or day care workers who are prevented from returning to work until they are cleared

of the infection.

Order Code: 1010100

Volume: Approximate annual total: 61

Time to Perform: 1.65 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O۱	erhead/		Hour	Hours		Cost
Director Pu	ıblic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.20	\$	33.99
Public I	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.75	\$	62.19
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.62	\$	31.07
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt maintena	ance, etc.	\$	43.00
						Total	1.65	\$	219.95

 Total Annual Cost:
 \$ 13,416.95

 Current Revenue:
 \$ 5,185.00
 38.65%

 Unmet Cost:
 \$ 8,231.95
 61.35%

Current Fee: \$ 85.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 5,490.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Enteric Stool Culture - Vibrio sp.

Description of Service: Detection and isolation of the bacterial genus Vibrio from direct specimens. Vibrio

species are known to cause food borne illness.

Order Code: 1010600

Volume: Approximate annual total: 1

Time to Perform: 1.65 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.20	\$	33.99
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.75	\$	62.19
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.62	\$	31.07
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi	pme	ent maintena	ance, etc.	\$	43.00
						Total	1.65	\$ 2	219.95

 Total Annual Cost:
 \$ 219.95

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 219.95
 100.00%

Current Fee: New Test

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 90.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Enteric Stool Culture - Shigella

Description of Service: Detection and isolation of Shigella bacteria from direct specimens. This test is

routinely ordered by the Health Department's Communicable Disease Unit to investigate contacts of people infected with Shigella during outbreaks, and to clear food handlers or day care workers who are prevented from returning to work

until they are clear of the organism.

Order Code: 1010168

Volume: Approximate annual total: 44

Time to Perform: 1.65 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	/erhead		lly Loaded Cost per Hour	Hours		Total Cost
	lic Health Laboratory	\$ •	\$		\$	169.94	0.20		33.99
Public H	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.75	\$	62.19
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.62	\$	31.07
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi _l	pme	nt maintena	ince, etc.	\$	43.00
						Total	1.65	\$ 2	219.95

Total Annual Cost: \$ 9,677.80

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 9,677.80
 100.00%

Current Fee: New Test

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 3,960.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Haemophilus influenzae PCR Primary Source

Description of Service: Nucleic acid amplification assay for the rapid detection of Haemophilus influenza,

a fastidious bacterium known to be associated with meningitis.

Order Code: 1010500

Volume: Approximate annual total: 15

Time to Perform: 1.36 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	/erhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Pub	olic Health Laboratory	\$ •	\$		\$	169.94	0.17	\$ 28.89
Public H	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.92	\$ 76.29
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.15	\$ 7.52
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
							Supplies	\$ 37.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$ 35.00
						Total	1.36	\$ 191.75

Total Annual Cost: \$ 2,876.25

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 2,876.25
 100.00%

Current Fee: New Test

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 1,425.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Miscellaneous Culture

Description of Service: The culturing of direct specimens from body sites other than blood, urine or stool

to screen for pathogenic bacteria.

Order Code: 1010280

Volume: Approximate annual total: 2

Time to Perform: 1.85 hours per specimen

					Fu	lly Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O١	verhead		Hour	Hours	Cost
Director Pu	ublic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.23	\$ 39.09
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.97	\$ 80.43
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.57	\$ 28.56
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$ 4.70
							Supplies	\$ 45.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	ent maintena	ance, etc.	\$ 43.00
						Total	1.85	\$ 240.78

Total Annual Cost:	\$ 481.56	
Current Revenue:	\$ 66.00	13.71%
Unmet Cost:	\$ 415.56	86.29%

Current Fee: \$ 33.00

Proposed Fee: \$ 40.00

Proposed Cost Recovery: \$ 80.00

Legal Authority: Health and Safety Code Section 101150

Test Name: N. meningitidis PCR

Description of Service: Nucleic acid amplification assay for the rapid detection of Neisseria meningitidis,

a bacterium known to be associated with meningitis.

Order Code: 1010300

Volume: Approximate annual total: 15

Time to Perform: 1.36 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۷	/erhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Publi	c Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.17	\$ 28.89
Public He	alth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.92	\$ 76.29
L	aboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.15	\$ 7.52
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
							Supplies	\$ 37.00
		Lab s	oftw	are, equi	pme	nt maintena	ance, etc.	\$ 35.00
						Total	1.36	\$ 191.75

Total Annual Cost: \$ 2,876.25

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 2,876.25
 100.00%

Current Fee: New Test

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 1,425.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Salmonella ID

Description of Service: Identification and sero-grouping of Salmonella bacteria when submitted as an

isolate. Specimens for reportable diseases are routinely submitted by local

hospital laboratories in compliance with CCR Title 17 regulations.

Order Code: 1010120

Volume: Approximate annual total: 64

Time to Perform: 1.69 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	verhead		lly Loaded Cost per Hour	Hours		Total Cost
	lic Health Laboratory	\$ •	\$		\$	169.94	0.22	\$	37.39
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.78	\$	64.68
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.57	\$	28.56
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	45.00
		Lab s	oftw	are, equi	pme	nt maintena	ince, etc.	\$	43.00
						Total	1.69	\$:	225.68

 Total Annual Cost:
 \$ 14,443.52

 Current Revenue:
 \$ 3,136.00
 21.71%

 Unmet Cost:
 \$ 11,307.52
 78.29%

Current Fee: \$ 49.00

Proposed Fee: \$ 87.00

Proposed Cost Recovery: \$ 5,568.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Shigella ID

Description of Service: Identification and serotyping of Shigella bacteria when submitted as an isolate.

Specimens for this test are routinely submitted by local hospital laboratories in

compliance with CCR Title 17 regulations.

Order Code: 1010170

Volume: Approximate annual total: 49

Time to Perform: 1.63 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours		Total Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.20	\$	33.99
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.78	\$	64.68
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.57	\$	28.56
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	45.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt maintena	ance, etc.	\$	43.00
						Total	1.63	\$ 2	219.93

 Total Annual Cost:
 \$ 10,776.57

 Current Revenue:
 \$ 2,401.00
 22.28%

 Unmet Cost:
 \$ 8,375.57
 77.72%

Current Fee: \$ 49.00

Proposed Fee: \$ 87.00

Proposed Cost Recovery: \$ 4,263.00

Legal Authority: Health and Safety Code Section 101150

Test Name: AF Smear & Culture

Description of Service: The culturing and evaluation of direct specimens to screen for Mycobacterium

tuberculosis Complex, the bacterial group associated with tuberculosis disease, and other similar acid fast bacilli organisms. This test is routinely ordered by both

the Health Department's Tuberculosis Unit and local hospitals.

Order Code: 5010200

Volume: Approximate annual total: 559

Time to Perform: 1.83 hours per specimen

		Fully Loaded							
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O	verhead		Hour	Hours		Cost
Director Pu	blic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.23	\$	39.09
Public H	lealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.57	\$	47.26
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.78	\$	39.09
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.25	\$	14.68
							Supplies	\$	30.00
		Lab s	oftw	/are, equi	pme	ent maintena	ince, etc.	\$	29.00
						Total	1 83	\$	199 12

 Total Annual Cost:
 \$ 111,308.08

 Current Revenue:
 \$ 38,571.00
 34.65%

 Unmet Cost:
 \$ 72,737.08
 65.35%

Current Fee: \$ 69.00

Proposed Fee: \$ 76.00

Proposed Cost Recovery: \$ 42,484.00

Legal Authority: Health and Safety Code Section 101150

Test Name: AFB Blood Culture (a)

Description of Service: The culturing of blood specimens to screen for Mycobacterium tuberculosis

Complex, the bacterial group associated with tuberculosis disease, and other

similar acid fast bacilli organisms.

Order Code: 5010500

Volume: Approximate annual total: 50

Time to Perform: 1.17 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.15	\$ 25.49
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.70	\$ 58.04
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.25	\$ 12.53
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.07	\$ 4.11
							Supplies	\$ 30.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt maintena	ance, etc.	\$ 29.00
						Total	1.17	\$ 159.17

Total Annual Cost: \$ 7,958.50 Current Revenue: \$ -

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 7,958.50
 100.00%

Current Fee: New Test

Proposed Fee: \$ 72.00

Proposed Cost Recovery: \$ 3,600.00

Legal Authority: Health and Safety Code Section 101150

Test Name: AFB for ID (b)

Description of Service: The identification of Mycobacterium tuberculosis Complex, the bacterial group

associated with tuberculosis disease, and other similar acid fast bacilli bacteria.

Order Code: 5020720

Volume: Approximate annual total: 194

Time to Perform: 2.38 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours		Γotal Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.30	\$	50.98
Public H	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.05	\$	87.07
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.78	\$	39.09
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.25	\$	14.68
							Supplies	\$	30.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	29.00
						Total	2.38	\$ 2	250.82

 Total Annual Cost:
 \$ 48,659.08

 Current Revenue:
 \$ 26,384.00
 54.22%

 Unmet Cost:
 \$ 22,275.08
 45.78%

Current Fee: \$ 136.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 17,460.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Mycobacterium tuberculosis Drugs

Description of Service: The evaluation of the effectiveness of drugs administered to patients being

treated for tuberculosis. This test identifies drug resistant strains of

Mycobacterium tuberculosis Complex.

Order Code: 5020410

Volume: Approximate annual total: 16

Time to Perform: 2.30 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours		Total Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.28	\$	47.58
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.87	\$ '	155.06
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.15	\$	7.52
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	-	\$	-
							Supplies	\$	30.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt maintena	ance, etc.	\$	29.00
						Total	2.30	\$ 2	269.16

 Total Annual Cost:
 \$ 4,306.56

 Current Revenue:
 \$ 896.00
 20.81%

 Unmet Cost:
 \$ 3,410.56
 79.19%

Current Fee: \$ 56.00

Proposed Fee: \$ 224.00

Proposed Cost Recovery: \$ 3,584.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Mycobacterium tuberculosis PCR

Description of Service: A nucleic acid amplification assay, developed by the MCPHL, for the rapid

detection of Mycobacterium tuberculosis Complex, the group of bacteria

associated with tuberculosis disease. M. tuberculosis Complex bacteria are slow growing and require five days and up to six weeks to grow on culture. This test

allows for the rapid detection within 24 hours.

Order Code: 5070100

Volume: Approximate annual total: 369

Time to Perform: 1.81 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	verhead		lly Loaded Cost per Hour	Hours		Γotal Cost
Director Pub	lic Health Laboratory	\$ •	\$		\$	169.94	0.23	\$	39.09
Public H	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.05	\$	87.07
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.30	\$	15.03
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.23	\$	13.51
							Supplies	\$	25.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ince, etc.	\$	24.00
						Total	1.81	\$ 2	203.70

 Total Annual Cost:
 \$ 75,165.30

 Current Revenue:
 \$ 31,365.00
 41.73%

 Unmet Cost:
 \$ 43,800.30
 58.27%

Current Fee: \$ 85.00

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 35,055.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Quantiferon TB Plus

Description of Service: A blood test for latent, or active tuberculosis infection. This test is utilized by local

hospitals, HR, and the TBU to screen patients and employees for TB infection.

Order Code: 5010300

Volume: Approximate annual total: 803

Time to Perform: 1.63 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	/erhead		lly Loaded Cost per Hour	Hours		Total Cost
	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.20	\$	33.99
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.73	\$	60.53
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.40	\$	20.04
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.30	\$	17.62
							Supplies	\$	51.00
		Lab s	oftw	are, equi	pme	nt mainten	ance, etc.	\$	48.00
						Total	1.63	\$ 2	231.18

 Total Annual Cost:
 \$ 185,637.54

 Current Revenue:
 \$ 56,210.00
 30.28%

 Unmet Cost:
 \$ 129,427.54
 69.72%

Current Fee: \$ 70.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 72,270.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Ziehl Neelsen Stain and Subculture (b)

Description of Service: A method to screen and sub-culture growth for acid fast bacilli.

Order Code: 5020300

Volume: Approximate annual total: 124

Time to Perform: 1.45 hours per specimen

		Fully Loaded								
			Total S&B			(Cost per		•	Total
Cost to Perform:	Classification		per Hour	O١	erhead/		Hour	Hours		Cost
Director Pu	blic Health Laboratory	\$	122.05	\$	47.89	\$	169.94	0.18	\$	30.59
Public H	Health Microbiologist II	\$	59.55	\$	23.37	\$	82.92	0.62	\$	51.41
	Laboratory Assistant	\$	35.99	\$	14.12	\$	50.11	0.40	\$	20.04
	Office Assistant III	\$	42.18	\$	16.55	\$	58.73	0.25	\$	14.68
								Supplies	\$	30.00
			Lab s	oftw	are, equi _l	ome	ent maintena	ance, etc.	\$	29.00
							Total	1.45	\$	175.72

Total Annual Cost: \$ 21,789.28

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 21,789.28
 100.00%

Current Fee: New Test

Proposed Fee: \$ 70.00

Proposed Cost Recovery: \$ 8,680.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Coccidioides immitis PCR

Description of Service: A nucleic acid amplification assay, developed by the MCPHL, for the rapid

detection of Coccidioides immitis directly from specimens, a mold associated with Valley Fever. Cocidioides immitis requires several days to be detected by culture

methods. This test can detect the organism within 24 hours.

Order Code: 3010100

Volume: Approximate annual total: 293

Time to Perform: 1.77 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours		Γotal Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.22	\$	37.39
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.05	\$	87.07
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.32	\$	16.04
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.18	\$	10.57
							Supplies	\$	34.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt maintena	ance, etc.	\$	32.00
						Total	1.77	\$ 2	217.07

 Total Annual Cost:
 \$ 63,601.51

 Current Revenue:
 \$ 24,905.00
 39.16%

 Unmet Cost:
 \$ 38,696.51
 60.84%

Current Fee: \$ 85.00

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 27,835.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Fungus Blood Culture (a)

Description of Service: The culturing of fungus from blood specimens.

Order Code: 3000000

Volume: Approximate annual total: 10

Time to Perform: 0.85 hours per specimen

			Fully Loaded								
		Total S&B			Cost per				Total		
Cost to Perform:	Classification		per Hour	O١	verhead		Hour	Hours		Cost	
Director Pu	ıblic Health Laboratory	\$	122.05	\$	47.89	\$	169.94	0.10	\$	16.99	
Public I	Health Microbiologist II	\$	59.55	\$	23.37	\$	82.92	0.62	\$	51.41	
	Laboratory Assistant	\$	35.99	\$	14.12	\$	50.11	0.08	\$	4.01	
	Office Assistant III	\$	42.18	\$	16.55	\$	58.73	0.05	\$	2.94	
								Supplies	\$	35.00	
Lab software, equipment maintenance, etc.								\$	33.00		
							Total	0.85	\$	143.35	

 Total Annual Cost:
 \$ 1,433.50

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 1,433.50
 100.00%

Current Fee: New Test

Proposed Fee: \$ 68.00

Proposed Cost Recovery: \$ 680.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Fungus ID Mold

Description of Service: The Identification of Mold from patient isolates to the species level by direct

observation, and biochemical methods. This test is routinely submitted to the

Public Health Lab by local hospital laboratories.

Order Code: 3010160

Volume: Approximate annual total: 118

Time to Perform: 1.57 hours per specimen

Cost to Perform:	Classification		Total S&B per Hour	O۱	verhead		lly Loaded Cost per Hour	Hours	Total Cost
	ic Health Laboratory	\$	122.05	\$		\$	169.94	0.20	\$ 33.99
Public He	alth Microbiologist II	\$	59.55	\$	23.37	\$	82.92	0.78	\$ 64.68
1	Laboratory Assistant	\$	35.99	\$	14.12	\$	50.11	0.47	\$ 23.55
	Office Assistant III	\$	42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
								Supplies	\$ 35.00
Lab software, equipment maintenance, etc.								ince, etc.	\$ 33.00
							Total	1.57	\$ 197.27

 Total Annual Cost:
 \$ 23,277.86

 Current Revenue:
 \$ 9,676.00
 41.57%

 Unmet Cost:
 \$ 13,601.86
 58.43%

Current Fee: \$ 82.00

Proposed Fee: \$ 100.00

Proposed Cost Recovery: \$ 11,800.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Fungus ID Yeast

Description of Service: The Identification of yeast from patient isolates by biochemical methods. This test

is routinely submitted to the Public Health Lab by local hospital

Order Code: 3010150

Volume: Approximate annual total: 23

Time to Perform: 1.57 hours per specimen

Cost to Perform:				Fotal S&B per Hour Overhead				Fully Loaded Cost per Hour Hours		
Director Publi	c Health Laboratory	\$	122.05	\$	47.89	\$	169.94	0.20	\$	33.99
Public Hea	alth Microbiologist II	\$	59.55	\$	23.37	\$	82.92	0.78	\$	64.68
L	aboratory Assistant	\$	35.99	\$	14.12	\$	50.11	0.47	\$	23.55
	Office Assistant III	\$	42.18	\$	16.55	\$	58.73	0.12	\$	7.05
								Supplies	\$	35.00
Lab software, equipment maintenance, etc.								ance, etc.	\$	33.00
							Total	1.57	\$	197.27

 Total Annual Cost:
 \$ 4,537.21

 Current Revenue:
 \$ 1,886.00
 41.57%

 Unmet Cost:
 \$ 2,651.21
 58.43%

Current Fee: \$ 82.00

Proposed Fee: \$ 90.00

Proposed Cost Recovery: \$ 2,070.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Fungus Smear and Culture

Description of Service: The culturing and evaluation of direct specimens to screen for fungal growth.

Order Code: 3010105

Volume: Approximate annual total: 72

Time to Perform: 1.30 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O۱	verhead		Hour	Hours		Cost
Director F	Public Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.17	\$	28.89
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.73	\$	60.53
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.32	\$	16.04
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	35.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt mainten	ance, etc.	\$	33.00
						Total	1.30	\$	178.16

 Total Annual Cost:
 \$ 12,827.52

 Current Revenue:
 \$ 4,536.00
 35.36%

 Unmet Cost:
 \$ 8,291.52
 64.64%

Current Fee: \$ 63.00

Proposed Fee: \$ 83.00

Proposed Cost Recovery: \$ 5,976.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Blood Draw

Description of Service: Currently blood draws are only performed for Health Department Employees, for

employee health OSHA requirements.

Order Code: 9010200

Volume: Approximate annual total: 40

Time to Perform: 0.97 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Pu	blic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.12	\$	20.39
Public H	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.62	\$	51.41
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	-	\$	-
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.23	\$	13.51
							Supplies	\$	31.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	29.00
						Total	0.97	\$	145.31

 Total Annual Cost:
 \$ 5,812.40

 Current Revenue:
 \$ 680.00
 11.70%

 Unmet Cost:
 \$ 5,132.40
 88.30%

Current Fee: \$ 17.00

Proposed Fee: \$ 20.00

Proposed Cost Recovery: \$ 800.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Reference Testing (West Nile, etc.)

Description of Service: The packaging and shipping of cultures and specimens to reference laboratories

following Department of Transportation and IATA shipping regulations for

shipping dangerous goods category 6.2.

Order Code: 2010475

Volume: Approximate annual total: 123

Time to Perform: 1.18 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O	verhead		Hour	Hours		Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.15	\$	25.49
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.70	\$	58.04
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.15	\$	7.52
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.18	\$	10.57
							Supplies	\$	58.00
		Lab s	oftw	/are, equi _l	pme	nt maintena	ince, etc.	\$	54.00
						Total	1 18	\$	213 62

Total Annual Cost: \$ 26,275.26

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 26,275.26
 100.00%

Current Fee: Actual Shipping/Handling and Testing Charges

Proposed Fee: actual shipping costs, plus actual reference lab testing charge,

plus \$15.00 packaging

Proposed Cost Recovery: \$1,845.00 plus actual outside lab charges

Legal Authority: Health and Safety Code Section 101150

Test Name: Rabies DFA

Description of Service: Detection of Rabies virus in specimens collected from survey animals, suspect

animals, or animals involved with human exposure.

Order Code: 2010430

Volume: Approximate annual total: 54

Time to Perform: 1.52 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	/erhead		lly Loaded Cost per Hour	Hours		Total Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.18	\$	30.59
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.97	\$	80.43
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.25	\$	12.53
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	91.00
		Lab s	oftw	are, equi _l	pme	nt maintena	ance, etc.	\$	86.00
						Total	1.52	\$:	307.60

 Total Annual Cost:
 \$ 16,610.40

 Current Revenue:
 \$ 5,292.00
 31.86%

 Unmet Cost:
 \$ 11,318.40
 68.14%

Current Fee: \$ 98.00

Proposed Fee: \$ 110.00

Proposed Cost Recovery: \$ 5,940.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Arthropod Identification

Description of Service: Identification of Arthropods. Most commonly performed for the identification of

Ticks.

Order Code: 4010170

Volume: Approximate annual total: 2

Time to Perform: 0.63 hours per specimen

					Fu	Ily Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O,	verhead		Hour	Hours		Cost
Director P	ublic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.08	\$	13.60
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.35	\$	29.02
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	8.00
		Lab s	oftw	/are, equi _l	pme	ent maintena	ance, etc.	\$	8.00
						Total	0.63	\$	69 68

 Total Annual Cost:
 \$ 139.36

 Current Revenue:
 \$ 34.00
 24.40%

 Unmet Cost:
 \$ 105.36
 75.60%

Current Fee: \$ 17.00

Proposed Fee: \$ 25.00

Proposed Cost Recovery: \$ 50.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Cryptosporidia/Giardia

Description of Service: Detection of Cryptosporidia or Giardia llambda, parasites known to be associated

with gastrointestinal disease, by direct immunofluorescent assay.

Order Code: 4010120

Volume: Approximate annual total: 15

Time to Perform: 0.71 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		-	Γotal
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Pu	blic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.08	\$	13.60
Public I	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.43	\$	35.66
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	136.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ince, etc.	\$	129.00
						Total	0.71	\$:	325.32

Total Annual Cost: \$ 4,879.80

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 4,879.80
 100.00%

Current Fee: New Test

Proposed Fee: \$ 60.00

Proposed Cost Recovery: \$ 900.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Cyclospora/Isospora/Cryptosporidia

Description of Service: Detection of Cryptosporidia, Isospora or Cyclospora by staining methods and

microscopic observation.

Order Code: 4010150

Volume: Approximate annual total: 10

Time to Perform: 0.89 hours per specimen

					Fu	lly Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	O۱	verhead		Hour	Hours	Cost
Director P	Public Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.12	\$ 20.39
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.57	\$ 47.26
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$ 4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
							Supplies	\$ 16.00
		Lab s	oftw	are, equi <mark>j</mark>	ome	nt maintena	ance, etc.	\$ 15.00
						Total	0.89	\$ 109.71

Total Annual Cost: \$ 1,097.10

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 1,097.10
 100.00%

Current Fee: New Test

Proposed Fee: \$ 75.00

Proposed Cost Recovery: \$ 750.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Giemsa Smear

Description of Service: Detection of blood parasites such as Plasmodium sp,. the parasite associated

with malaria, by staining and microscopic observation.

Order Code: 4010110

Volume: Approximate annual total: 15

Time to Perform: 0.94 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Pu	ublic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.12	\$	20.39
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.62	\$	51.41
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	49.00
		Lab s	oftw	are, equi _l	ome	ent maintena	ance, etc.	\$	47.00
						Total	0.94	\$	178.86

 Total Annual Cost:
 \$ 2,682.90

 Current Revenue:
 \$ 1,470.00
 54.79%

 Unmet Cost:
 \$ 1,212.90
 45.21%

Current Fee: \$ 98.00

Proposed Fee: \$ 103.00

Proposed Cost Recovery: \$ 1,545.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Helminth Identification

Description of Service: Identification of Helminths, such as tapeworms or other parasitic worms known to

be associated with disease, by direct observation.

Order Code: 4010180

Volume: Approximate annual total: 3

Time to Perform: 0.71 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	verhead		Hour	Hours		Cost
Director P	ublic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.08	\$	13.60
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.43	\$	35.66
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	8.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	8.00
						Total	0.71	\$	76.32

 Total Annual Cost:
 \$ 228.96

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 228.96
 100.00%

Current Fee: New Test

Proposed Fee: \$ 25.00

Proposed Cost Recovery: \$ 75.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Microsporidia

Description of Service: Detection of microsporidia by staining methods and microscopic observation.

Order Code: 4010140

Volume: Approximate annual total: 10

Time to Perform: 0.83 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	/erhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.10	\$ 16.99
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.53	\$ 43.95
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$ 4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
							Supplies	\$ 16.00
		Lab s	oftw	are, equi _l	pme	nt maintena	ance, etc.	\$ 15.00
						Total	0.83	\$ 103.00

 Total Annual Cost:
 \$ 1,030.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 1,030.00
 100.00%

Current Fee: New Test

Proposed Fee: \$ 75.00

Proposed Cost Recovery: \$ 750.00

Legal Authority: Health and Safety Code Section 101150

Test Name: O & P Complete

Description of Service: Detection of parasites in stool specimens by staining methods and microscopic

observation.

Order Code: 4010130

Volume: Approximate annual total: 25

Time to Perform: 1.03 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	/erhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.13	\$ 22.09
Public H	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.70	\$ 58.04
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$ 4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
							Supplies	\$ 24.00
		Lab s	oftw	are, equi _l	pme	nt maintena	ance, etc.	\$ 23.00
						Total	1.03	\$ 138.19

 Total Annual Cost:
 \$ 3,454.75

 Current Revenue:
 \$ 2,600.00
 75.26%

 Unmet Cost:
 \$ 854.75
 24.74%

Current Fee: \$ 104.00

Proposed Fee: \$ 106.00

Proposed Cost Recovery: \$ 2,650.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Pinworm

Description of Service: Detection of pinworm by microscopic observation

Order Code: 4010160

Volume: Approximate annual total: 15

Time to Perform: 0.63 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	0\	verhead		lly Loaded Cost per Hour	Hours	Total Cost
Director Publ	ic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.08	\$ 13.60
Public He	alth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.35	\$ 29.02
1	_aboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$ 4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$ 7.05
							Supplies	\$ 8.00
		Lab s	oftw	are, equi _l	pme	nt maintena	ance, etc.	\$ 8.00
						Total	0.63	\$ 69.68

 Total Annual Cost:
 \$ 1,045.20

 Current Revenue:
 \$ 225.00
 21.53%

 Unmet Cost:
 \$ 820.20
 78.47%

Current Fee: \$ 15.00

Proposed Fee: \$ 20.00

Proposed Cost Recovery: \$ 300.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Comprehensive Respiratory Panel

Description of Service: A panel of viruses and bacteria, commonly associated with respiratory disease.

Order Code: 2010210

Volume: Approximate annual total: 15

Time to Perform: 1.83 hours per specimen

Cost to Perform:	Classification	Total S&B per Hour	O۱	verhead		lly Loaded Cost per Hour	Hours		Γotal Cost
Director Publ	ic Health Laboratory	\$ 122.05	\$		\$	169.94	0.23	\$	39.09
Public He	alth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.40	\$	116.09
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	96.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ince, etc.	\$	90.00
						Total	1.83	\$:	352.24

0.00%

Total Annual Cost: \$ 5,283.60
Current Revenue: \$ -

Unmet Cost: \$ 5,283.60 100.00%

Current Fee: New Test

Proposed Fee: \$ 220.00

Proposed Cost Recovery: \$ 3,300.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Influenza A B PCR Panel

Description of Service: Detection and subtyping of the influenza viruses by Real Time-reverse

transcriptase PCR. The results for this assay assist the Health Department's Communicable Disease Unit in epidemiology studies of influenza sub types (i.e. H3N2 or H1N1) in Monterey County, and assists the California Department of Public Health, and Centers for Disease Control in epidemiology studies which aid

in preparation of vaccines for the upcoming flu season.

Order Code: 2010200

Volume: Approximate annual total: 60

Time to Perform: 1.51 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O	verhead		Hour	Hours		Cost
Director Pu	blic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.18	\$	30.59
Public H	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.13	\$	93.70
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.12	\$	7.05
							Supplies	\$	58.00
		Lab s	oftw	/are, equi _l	pme	ent maintena	ance, etc.	\$	55.00
						Total	1 51	\$	248 35

Total Annual Cost: \$ 14,901.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 14,901.00
 100.00%

Current Fee: New Test

Proposed Fee: \$ 129.00

Proposed Cost Recovery: \$ 7,740.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Measles PCR

Description of Service: Rapid detection of the Measles virus by Real-Time Reverse Transcriptase PCR.

Order Code: 2010100

Volume: Approximate annual total: 7

Time to Perform: 1.19 hours per specimen

						lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Publ	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.15	\$	25.49
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.88	\$	72.97
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	58.00
		Lab s	oftw	are, equi	pme	nt maintena	nce, etc.	\$	55.00
						Total	1.19	\$:	220.17

Total Annual Cost: \$ 1,541.19

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 1,541.19
 100.00%

Current Fee: New Test

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 665.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Mumps PCR

Description of Service: Rapid detection of the Mumps virus by Real-Time Reverse transcriptase PCR.

Order Code: 2010120

Volume: Approximate annual total: 7

Time to Perform: 1.19 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	verhead		Hour	Hours		Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.15	\$	25.49
Public He	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.88	\$	72.97
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	58.00
		Lab s	oftw	/are, equi	pme	nt maintena	ince, etc.	\$	55.00
						Total	1.19	\$:	220.17

Total Annual Cost: \$ 1,541.19

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 1,541.19
 100.00%

Current Fee: New Test

Proposed Fee: \$ 95.00

Proposed Cost Recovery: \$ 665.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Norovirus PCR

Description of Service: Rapid detection and typing of Norovirus by Real-Time Reverse transcriptase

PCR. This assay tests for types G1 and G2.

Order Code: 2010400

Volume: Approximate annual total: 44

Time to Perform: 1.47 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O١	erhead/		Hour	Hours		Cost
Director Pu	blic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.18	\$	30.59
Public I	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	1.13	\$	93.70
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.08	\$	4.01
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	58.00
		Lab s	oftw	are, equi _l	ome	nt maintena	ance, etc.	\$	55.00
						Total	1.47	\$ 2	246.00

Total Annual Cost: \$ 10,824.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 10,824.00
 100.00%

Current Fee: New Test

Proposed Fee: \$ 129.00

Proposed Cost Recovery: \$ 5,676.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Reference Testing (Syphilis)

Description of Service: The packaging and shipping of Syphilis cultures and specimens to reference

laboratories following Department of Transportation and IATA shipping

regulations for shipping dangerous goods category 6.2.

Order Code: 2010450

Volume: Approximate annual total: 90

Time to Perform: 1.18 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Γotal
Cost to Perform:	Classification	per Hour	٥١	erhead/		Hour	Hours		Cost
Director Pub	lic Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.15	\$	25.49
Public H	ealth Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.70	\$	58.04
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.15	\$	7.52
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.18	\$	10.57
							Supplies	\$	58.00
		Lab s	oftw	are, equi _l	pme	nt mainten	ance, etc.	\$	54.00
						Total	1 18	\$	213 62

Total Annual Cost: \$ 19,225.80

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 19,225.80
 100.00%

Current Fee: Actual Shipping/Handling and Testing Charges

Proposed Fee: actual shipping costs, plus actual reference lab testing charge,

plus \$15.00 packaging

Proposed Cost Recovery: \$1,350.00 plus actual outside lab charges

Legal Authority: Health and Safety Code Section 101150

Test Name: SARS-CoV-2 PCR - CDC EUA

Description of Service: Detection of SARS-CoV-2 in patient specimens by method of PCR using the CDC

Emergency Use Authorized assay.

Order Code: 2010500

Volume: Approximate annual total: 1500

Time to Perform: 1.15 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		-	Γotal
Cost to Perform:	Classification	per Hour	O۱	erhead/		Hour	Hours		Cost
Director	Public Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	-	\$	-
Publi	ic Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.50	\$	41.46
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.58	\$	29.06
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.07	\$	4.11
							Supplies	\$	54.00
		Lab s	oftw	are, equi _l	ome	ent mainten	ance, etc.	\$	-
						Total	1.15	\$	128.63

Total Annual Cost: \$ 192,945.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 192,945.00
 100.00%

Current Fee: \$ -

Proposed Fee: \$ 85.00

Proposed Cost Recovery: \$ 127,500.00

Legal Authority: Health and Safety Code Section 101150

Test Name: SARS-CoV-2 PCR GeneXpert EUA

Description of Service: Detection of SARS-CoV-2 in patient specimens by method of PCR using the

Cephied Emergency Use Authorized assay.

Order Code: 2010600

Volume: Approximate annual total: 1500

Time to Perform: 0.99 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		-	Γotal
Cost to Perform:	Classification	per Hour	O	verhead		Hour	Hours		Cost
Director F	Public Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	-	\$	-
Public	Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	0.42	\$	34.83
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	0.50	\$	25.06
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.07	\$	4.11
							Supplies	\$	39.00
		Lab s	oftw	are, equi _l	pme	ent maintena	ance, etc.	\$	-
						Total	0.99	\$	103.00

Total Annual Cost: \$ 154,500.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 154,500.00
 100.00%

Current Fee: \$ -

Proposed Fee: \$ 75.00

Proposed Cost Recovery: \$ 112,500.00

Legal Authority: Health and Safety Code Section 101150

Test Name: NGHA Application

Description of Service: Fee for the application of local operation of a nondiagnostic general health

assessment program (NGHA). Valid for 1 year

Volume: Approximate annual total: 10

Time to Perform: 1.33 hours per specimen

					Fu	Ily Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	O,	verhead		Hour	Hours		Cost
Director F	Public Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.75	\$	127.46
Public	c Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	-	\$	-
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	-	\$	-
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.58	\$	34.06
							Supplies	\$	10.00
		Lab s	oftw	/are, equi	pme	ent maintena	ance, etc.	\$	-
						Total	1.33	\$	171.52

 Total Annual Cost:
 \$ 1,715.20

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 1,715.20
 100.00%

Current Fee: \$ -

Proposed Fee: \$ 125.00

Proposed Cost Recovery: \$ 1,250.00

Legal Authority: Health and Safety Code Section 101150

Test Name: Additional NGHA events or sites

Description of Service: Fee for nondiagnostic general health assessment event that is in addition to a

single event listed on the original NGHA application.

Volume: Approximate annual total: 10

Time to Perform: 0.33 hours per specimen

					Fu	lly Loaded			
		Total S&B			(Cost per		•	Total
Cost to Perform:	Classification	per Hour	0	verhead		Hour	Hours		Cost
Director	Public Health Laboratory	\$ 122.05	\$	47.89	\$	169.94	0.25	\$	42.49
Publi	ic Health Microbiologist II	\$ 59.55	\$	23.37	\$	82.92	-	\$	-
	Laboratory Assistant	\$ 35.99	\$	14.12	\$	50.11	-	\$	-
	Office Assistant III	\$ 42.18	\$	16.55	\$	58.73	0.08	\$	4.70
							Supplies	\$	10.00
		Lab s	oftv	vare, equi _l	pme	ent mainten	ance, etc.	\$	-
						Total	0.33	\$	57.19

 Total Annual Cost:
 \$ 571.90

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 571.90
 100.00%

Current Fee: \$ -

Proposed Fee: \$ 40.00

Proposed Cost Recovery: \$ 400.00

Monterey County Health Department Environmental Lab Fee Schedule FY 2020-21

Total Procedur

ıre Time Value	(PTV) Units	206.205	
	er PTV Unit	\$ 3.64	

	Annual	PTV	Cost	Current	Proposed
Single Analyte Tests	Number	Units	per	Fee	Fee
	of Tests	per Test	Test	per Test	per Test
Aerobic culture Alkalinity, total (as CaCO3)	356	10 \$ 7 \$			\$ 30.00 \$ 25.00
Agriculture-Conductivity	5	4 \$			\$ 14.00
Aluminum	189	11 \$			\$ 32.00
Ammonia	5	10 \$	36.37		\$ 36.00
Antimony	59	11 \$			\$ 32.00
Arsenic	453	11 \$			\$ 32.00
Barium Beryllium	57 59	11 \$ 11 \$			\$ 32.00 \$ 32.00
Boron - Drinking water	36	11 \$			\$ 32.00
Boron - Waste water	45	12 \$			\$ 33.00
Bromide	87	9 \$			\$ 28.00
Cadmium	71	11 \$			\$ 32.00
Calcium Chloride	393	11 \$			\$ 32.00
Chromium	485 97	9 \$ 11 \$			\$ 28.00 \$ 32.00
CI. Perfringens spores	32	30 \$			\$ 88.00
Coliform - Quantitray (ground)	1,798	12 \$			\$ 32.00
Coliform - Quantitray (with dilution)	266	15 \$			\$ 44.00
Coliform - MMO-MUG	3,455	9 \$			\$ 27.00
Coliform - MTF total or fecal	24	16 \$			\$ 47.00
Coliform - MTF total or fecal (high dilution)	4	18 \$			\$ 53.00
Color Conductivity	108 405	6 \$			\$ 18.00 \$ 10.00
Copper	258	11 \$			\$ 32.00
E. coli solids	4	20 \$			\$ 59.00
Enterococcus	4	12 \$			\$ 32.00
Enterococcus (w/dilution)	266	15 \$	54.55	\$ 41.00	\$ 44.00
Fluoride	83	9 \$			\$ 28.00
Food and water pathogens; Campylobacter	4	25 \$			\$ 90.00
Food and water pathogens; Listeria sp. Food and water pathogens; Listeria monocytogenes	4	25 \$ 25 \$			\$ 90.00 \$ 90.00
Food and water pathogens; Salmonella	4	25 \$			\$ 90.00
Food and water pathogens; Shigella	4	25 \$			\$ 90.00
Food and water pathogens; STEC	4	31 \$			\$ 112.00
Water pathogens; L. pneumophila (IDEXX Legiolert)	4	16 \$			\$ 58.00
Food and Water pathogens; Legionella sp and L. pneumophila Culture and PCF	5	38 \$			\$ 138.00
Free chlorine Heterotrophic plate (Aerobic)	17 190	3 \$ 10 \$			\$ 9.00 \$ 30.00
Heterotrophic plate (Anaerobic)	5	13 \$			\$ 38.00
Iron	9	11 \$			\$ 32.00
Lead Pb	224	11 \$	40.00		\$ 32.00
Magnesium	393	11 \$		New	
Manganese	217	11 \$			\$ 32.00
MBAS (surfactants) Mercury	78 59	16 \$ 11 \$			\$ 47.00 \$ 32.00
Microscopic	59	10 \$			\$ 32.00
NAA Environmental	11	19 \$		•	\$ 55.00
Nickel	62	11 \$			\$ 32.00
Nitrate NO3 - 1 to 9 tests	2,417	9 \$	32.73	New	\$ 28.00
Nitrate NO3 - more than 10 tests	5	7 \$			\$ 25.00
Nitrite as nitrogen	166	9 \$			\$ 28.00
Odor Orthophosphate as P	83 68	5 \$ 10 \$		\$ 19.00 \$ 27.00	\$ 15.00 \$ 28.00
pH Field	5	4 \$		New	
pH Laboratory	511	4 \$		\$ 14.00	
Salinity	5	3 \$		New	
Potassium	378	11 \$	40.00	New	
Sample Prep/Acid Digestion	5	4 \$			
Sample Prep/Filtration	5	3 \$		\$ 9.00	
Sample consulting per hour Selenium	17 59	60 \$ 11 \$		New New	
Silver	85	11 \$		New	
Sodium	454	11 \$		New	
Sulfate	363	9 \$			\$ 28.00
Thallium	59	11 \$	40.00	New	\$ 32.00
Total chlorine	71	3 \$			
Total dissolved solids	521	9 \$			
Total phosphorus Total settleable solids	9 82	15 \$		\$ 41.00 \$ 11.00	
Total suspended solids	152	4 \$ 8 \$			
Turbidity	117	5 \$			
Zinc	89	11 \$			\$ 32.00

Single Analyte Tests	Annual Number of Tests	PTV Units per Test	Cost per Test	Current Fee per Test	Proposed Fee per Test	
Instrument Calibration Check	19	8	\$ 29.09	New	\$ 25.00	
Well Collection	49	8	\$ 27.27	New	\$ 25.00	
Strontium (ICP metal)	1	11	\$ 40.00	New	\$ 32.00	
Bacteria ID - API	21	15	\$ 54.55	New	\$ 45.00	
Total Solids	1	8	\$ 29.09	New	\$ 24.00	
Nater Suitability	2	130	\$ 472.75	New	\$ 400.00	

	Annual	PTV		Cost	-	Current	Pı	roposed	
Panel Tests	Number	Units		per	•	Fee	•	Fee	
	of Tests	per Test		Test	р	er Test	р	er Test	
CCR Title 22 Secondary (aesthetics)	33	98	\$	356.38					
									includes actual outside lab charge,
CCR Title 22 Primary (inorganic chemicals)	5	89							plus \$20.00 shipping and handling fee
CCR Title 22 General Physical (Color, Odor, Turbidity)	3	16	\$	58.18	\$	55.00	\$	55.00	
CCR Title 22 Combined General Mineral, General Physical, and Inorganics	49	105	Ф	201 01	¢	221 00	¢	226 00	includes actual outside lab charge, plus \$20.00 shipping and handling fee
Domestic Panel - includes Coliforms, Nitrate, Hardness, Manganese and Iror	2	54						132.00	plus \$20.00 shipping and handling lee
Anions - includes Chloride, Nitrate, and Sulfate	1	19		69.09		57.00		65.00	
Partial - Includes Nitrate, Chloride, and Conductivity	36	17	\$	61.82		62.00		60.00	
Complete - Includes Cations, Anions, Conductivity, and Alkalinity	25	55						117.00	
Complete - Includes Cations, Anions, Conductivity, and Alkalinity (5 or more tests)	5	45	_		Ψ	New		110.00	
Corrosivity (Langelier Index) - Includes pH, Alkalinity, Calcium, and TDS	4	29			\$	77.00		83.00	
Lead/Copper Rule	160	18				48.00		50.00	
Esda copper rais	100	10	Ψ	00.40	Ψ	40.00	Ψ	30.00	
									includes actual outside lab charge,
Nutrients - Includes Nitrate, Ammonia, Orthophosphates	5	20	\$	72.73	\$	94.00	\$	72.00	plus \$20.00 shipping and handling fee
NPDES Municipal Water Supply Panel									includes actual outside lab charge,
Ca, Mg, Na, Fe, EPA 300 (NO3, SO4, CI) B, Alk, TDS, pH, SEC	3	73	\$	265.47	\$	200.00	\$	205.00	plus \$20.00 shipping and handling fee
NPDES Influent Panel									includes actual outside lab charge, and
EPA300 (CI, NO3, NO3 [N]), B, SO4, Solids, TSS, TDS, Na, NO2 (N), Total (N), BOD, TKN	2	67	\$	243.65	\$	207.00	\$	242.00	\$20.00 shipping and handling fee
NPDES Effluent Panel									includes actual outside lab charge, and
EPA 300(CI, NO3, NO3 (N), B, SO4, pH, Solids, TSS, TDS, Na, NO2 (N), Total N, BOD, TKN	5	69	\$	250.92	\$	236.00	\$	250.00	\$20.00 shipping and handling fee
									includes actual outside lab charge, and
NPDES Waste Water Metals	1	-	\$	-	\$	244.00	\$	-	\$20.00 shipping and handling fee
NEDEC C INV. M. S D I									
NPDES Ground Water Monitoring Panel			•	007.00	•	404.00	•	400.00	includes actual outside lab charge, and
EPA 300 (Cl, NO3, NO3 [N]), B, SO4, TDS, pH, Na, NO2(N), Total (N), TKN irrigation Suitability	9	57	\$	207.28	\$	164.00	\$	189.00	\$20.00 shipping and handling fee
,	-	70	•	000.05	•	400.00	•	400.00	
ASTM 6919 (Ca, Mg, Na, K), EPA 300 (NO3, SO4, Cl), Alk, pH, SEC, TDS, NO2(N), B Ag Waiver	5	78	ф	283.65	ф	139.00	ф	139.00	
ASTM 6919 (Ca, Mg, Na, K), EPA 300 (NO3, SO4, Cl), Alk, pH, SEC, TDS	239	56	\$	203.65		New	\$	121.00	
Ag Waiver (5 or more tests)		30	Ψ	200.00		INCW	Ψ	121.00	
ASTM 6919 (Ca, Mg, Na, K), EPA 300 (NO3, SO4, Cl), Alk, pH, SEC, TDS	5	45	\$	163.65		New	\$	110.00	
Pathogen Monitoring for Irrigation Water (one sample)			<u> </u>	100.00				110.00	
Generic E.coli, STEC (including E.coli 0157) and Salmonella	4	70	\$	254.56	\$	146.00	\$	186.00	
Pathogen Monitoring for Irrigation Water (one sample)									
Campylobacter, Listeria monocytogenes, Salmonella, Shigella, STEC and Legionella	4	160	\$	581.85		New	\$	579.00	
Recreational Water - Total Coliform, E.coli, Enterococcus	266	27	\$	98.19	\$	72.00	\$	80.00	
Cations - Ca, Na, Mg, K	1	26	\$	94.55		New	\$	72.00	
Coliform P/A - 1 to 5 tests	5	9	\$	32.73	\$	25.00	\$	27.00	
Coliform P/A - 6 to 10 tests	5	6	\$	21.82	\$	22.00	\$	21.00	
Coliform P/A - more than 11 tests	5		\$	14.55		14.00		14.00	
Quantitray - 1 to 5 tests	559	12		43.64	\$	30.00	\$	32.00	
Quantitray - 6 to 10 tests	63	9	\$	32.73	\$	26.00	\$	28.00	
Quantitray - more than 11 tests	546	6	\$	21.82	\$	16.00	\$	18.00	
L									includes actual outside lab charge, and
Panel tests completed by outside lab - Synthetic, Organic, misc.	20	-	\$	-	\$	-	\$	-	\$20.00 shipping and handling fee
									=

Health Department Wellness Classes Fee Study FY 2020-21

Legal Authority: N/A

Test Name: 1 Hour Class

Description of Service: 1 Hour Class

Volume: Approximate annual total: N/A

Time to Perform: 6.10 hours

					Fu	lly Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	Ov	erhead		Hour	Hours	Cost
	Health Program Coordinator	\$ 85.71	\$	33.63	\$	119.34	0.10	\$ 11.93
	Senior Health Educator	\$ 71.15	\$	27.92	\$	99.07	3.00	\$297.21
	Health Educator	\$ 67.50	\$	26.49	\$	93.99	3.00	\$281.97
						Total	6.10	\$ 591.11

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 581.00

Proposed Fee: \$ 591.00

Health Department Wellness Classes Fee Study FY 2020-21

Legal Authority: N/A

Test Name: Each additional classroom hour

Description of Service: Each additional classroom hour:

Volume: Approximate annual total: N/A

Time to Perform: 2.00 hours

					Fu	lly Loaded		
		Total S&B			(Cost per		Total
Cost to Perform:	Classification	per Hour	Ov	erhead		Hour	Hours	Cost
F	lealth Program Coordinator	\$ 85.71	\$	33.63	\$	119.34	-	\$ -
	Senior Health Educator	\$ 71.15	\$	27.92	\$	99.07	1.00	\$ 99.07
	Health Educator	\$ 67.50	\$	26.49	\$	93.99	1.00	\$ 93.99
						Total	2.00	\$ 193.06

Total Annual Cost: N/A

Current Fee: \$ 189.00

Proposed Fee: \$ 193.00

Health Department Wellness Classes Fee Study FY 2020-21

Legal Authority: N/A

Test Name: New Class Development

Description of Service: New Class Development

Volume: Approximate annual total: N/A

Time to Perform: 4.50 hours

					Fu	lly Loaded		
		Total S&B			(Cost per		Total
Cost to Perform	Classification	per Hour	Ov	erhead		Hour	Hours	Cost
	Health Program Coordinator	\$ 85.71	\$	33.63	\$	119.34	0.50	\$ 59.67
	Senior Health Educator	\$ 71.15	\$	27.92	\$	99.07	2.00	\$198.14
	Health Educator	\$ 67.50	\$	26.49	\$	93.99	2.00	\$187.98
						Total	4.50	\$445.79

Total Annual Cost: N/A

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 438.00

Proposed Fee: \$ 446.00

SEXUAL ASSAULT RESPONSE TEAM EVIDENTIARY EXAM INVOICE

DATE:	CASE N	JMBER		
PATIENT MRN	DOB		AGE	
JURISDICTION		OFFICER _		
EXAMINER		TIME IN	TIME OUT	·
EXAMINATION	CHECK A	LL THAT		
INFORMATION	API	PLY	CHAR	GE
Victim Exam SART				
Program Sorvice Charge				¢025.00
Service Charge Suspect Exam SART				\$925.00
Program Service Charge				\$675.00
1 rogram Service Charge				φ0/3.00
Cancelled Exam				No Charge
Non-Investigative Report				\$925.00
(NIR) Abbreviated Exam				- \$300.00
Testimony for non- participating Law Enforcement Agency (Half Day) Testimony for non- participating Law Enforcement Agency (Full Day)			Total Charge:	\$665.00 \$1,330.00
AGENCY BILLING ADDRES	SS:			
Agency Name				
	Street	City	Zip	
	2	City		
Signature of Authorizing Party			Pate	
Signature of Examiner		D	ate	
Signature of Coordinator		D	ate	

SEXUAL ASSAULT RESPONSE TEAM (SART) FEE SCHEDULE (Penal Code section 13823.95)		
SERVICE PROVIDED	FEE	
 Victim Examination including photography, SART Program Service 		
Charge	925.00	Each
Suspect Examination including photography, SART Program		
Service Charge	675.00	Each
Abbreviated Exam	300.00	Each
4. Readiness Retainer Fee (per participating law enforcement		
agency/fiscal year)	2,000.00	Each
EPIDEMIOLOGY/RESEARCH/EVALUATION FEE		

1. Victim Examination including photography, SART Program Service Charge	\$ 925.00 Each	No changes
2. Suspect Examination including photography, SART Program Service Charge	\$ 675.00 Each	No changes
3. Non-Investigative Report (NIR)	\$ 925.00 Each	Changed name and fee amount
4. SART Participation Fee (per participating law enforcement agency/fiscal year)	\$2,000.00 Each	No changes
5. Testimony for non-participating Law Enforcement Agency (Half Day)	\$ 665.00 Each	Added new fee
6. Testimony for non-participating Law Enforcement Agency (Full Day)	\$1,330.00 Each	Added new fee

Legal Authority: N/A

Test Name: Grant proposal development and preparation

Description of Service: Grant proposal development and preparation

Volume: Approximate annual total: N/A

Time to Perform: 1.05 hours

		Total S&B			Ily Loaded Cost per			
Cost to Perform:	Classification	per Hour	Ov	erhead	Hour	Hours	To	tal Cost
	Management Analyst II	\$ 80.69	\$	31.66	\$ 112.35	-	\$	-
	Management Analyst III	\$ 92.87	\$	36.44	\$ 129.31	0.70	\$	90.52
Public He	ealth Program Manager II	\$ 104.54	\$	41.02	\$ 145.56	0.10	\$	14.56
Public He	ealth Program Manager II	\$ 103.26	\$	40.52	\$ 143.78	0.05	\$	7.19
Public	Health Epidemiologist II	\$ 68.07	\$	26.71	\$ 94.78		\$	-
Chronic Disease	e Prevention Coordinator	\$ 71.91	\$	28.22	\$ 100.13		\$	-
Chronic Diseas	e Prevention Specialist II	\$ 68.05	\$	26.70	\$ 94.75	0.20	\$	18.95
	•				Total	1.05	\$	131.22

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 116.00

Proposed Fee: \$ 125.00

Legal Authority: N/A

Test Name: Contract or agreement preparation

Description of Service: Contract or agreement preparation

Volume: Approximate annual total: N/A

Time to Perform: 1.05 hours

					Fu	lly Loaded			
		Total S&B			(Cost per			
Cost to Perform:	Classification	per Hour	Ov	erhead		Hour	Hours	To	tal Cost
	Management Analyst II	\$ 80.69	\$	31.66	\$	112.35	-	\$	-
	Management Analyst III	\$ 92.87	\$	36.44	\$	129.31	0.70	\$	90.52
Public He	alth Program Manager II	\$ 104.54	\$	41.02	\$	145.56	0.30	\$	43.67
Public He	alth Program Manager II	\$ 103.26	\$	40.52	\$	143.78	0.05	\$	7.19
Public	: Health Epidemiologist II	\$ 68.07	\$	26.71	\$	94.78	-	\$	-
Chronic Disease	e Prevention Coordinator	\$ 71.91	\$	28.22	\$	100.13	-	\$	-
Chronic Disease	e Prevention Specialist II	\$ 68.05	\$	26.70	\$	94.75	-	\$	-
						Total	1.05	\$	141.38

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 119.00

Proposed Fee: \$ 134.00

Legal Authority: N/A

Test Name: Policy development, draft policy language and technical assistance (2 hr. min)

Description of Service: Policy development, draft policy language and technical assistance (2 hr. min)

Volume: Approximate annual total: N/A

Time to Perform: 1.00 hours

		Total S&B			lly Loaded Cost per			
Cost to Perform:	Classification	per Hour	Ov	erhead	Hour	Hours	To	tal Cost
	Management Analyst II	\$ 80.69	\$	31.66	\$ 112.35	-	\$	-
	Management Analyst III	\$ 92.87	\$	36.44	\$ 129.31	0.50	\$	64.66
Public He	ealth Program Manager II	\$ 104.54	\$	41.02	\$ 145.56	0.50	\$	72.78
Public He	ealth Program Manager II	\$ 103.26	\$	40.52	\$ 143.78	-	\$	-
Publi	c Health Epidemiologist II	\$ 68.07	\$	26.71	\$ 94.78	-	\$	-
Chronic Diseas	e Prevention Coordinator	\$ 71.91	\$	28.22	\$ 100.13	-	\$	-
Chronic Diseas	e Prevention Specialist II	\$ 68.05	\$	26.70	\$ 94.75	-	\$	-
					Total	1.00	\$	137.44

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 122.00

Proposed Fee: \$ 137.00

Legal Authority: N/A

Test Name: Research, evaluation and assessment

Description of Service: Research, evaluation and assessment

Volume: Approximate annual total: N/A

Time to Perform: 1.00 hours

		Total S&B			Ily Loaded Cost per			
Cost to Perform:	Classification	per Hour	Ov	erhead	Hour	Hours	To	tal Cost
	Management Analyst II	\$ 80.69	\$	31.66	\$ 112.35	-	\$	-
	Management Analyst III	\$ 92.87	\$	36.44	\$ 129.31	0.20	\$	25.86
Public He	ealth Program Manager II	\$ 104.54	\$	41.02	\$ 145.56	0.30	\$	43.67
Public He	ealth Program Manager II	\$ 103.26	\$	40.52	\$ 143.78	0.05	\$	7.19
Public	Health Epidemiologist II	\$ 68.07	\$	26.71	\$ 94.78	0.25	\$	23.70
Chronic Disease	e Prevention Coordinator	\$ 71.91	\$	28.22	\$ 100.13	-	\$	-
Chronic Diseas	e Prevention Specialist II	\$ 68.05	\$	26.70	\$ 94.75	0.20	\$	18.95
	·				Total	1.00	\$	119.37

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 114.00

Proposed Fee: \$ 119.00

Legal Authority: N/A

Test Name: Publication or report development and/or review (including data/fact checking)

Description of Service: Publication or report development and/or review (including data/fact checking)

Volume: Approximate annual total: N/A

Time to Perform: 1.05 hours

		Total S&B			Ily Loaded Cost per			
Cost to Perform:	Classification	per Hour	Ov	erhead	Hour	Hours	To	tal Cost
	Management Analyst II	\$ 80.69	\$	31.66	\$ 112.35	-	\$	-
	Management Analyst III	\$ 92.87	\$	36.44	\$ 129.31	0.30	\$	38.79
Public He	ealth Program Manager II	\$ 104.54	\$	41.02	\$ 145.56	0.25	\$	36.39
Public He	ealth Program Manager II	\$ 103.26	\$	40.52	\$ 143.78	0.05	\$	7.19
Publi	c Health Epidemiologist II	\$ 68.07	\$	26.71	\$ 94.78	0.20	\$	18.96
Chronic Diseas	e Prevention Coordinator	\$ 71.91	\$	28.22	\$ 100.13	0.10	\$	10.01
Chronic Diseas	se Prevention Specialist II	\$ 68.05	\$	26.70	\$ 94.75	0.15	\$	14.21
	·				Total	1.05	\$	125.55

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 115.00

Proposed Fee: \$ 120.00

Legal Authority: N/A

Test Name: Data collection, extraction, statistical analysis, and/or interpretation - basic

Description of Service: Data collection, extraction, statistical analysis, and/or interpretation - basic

Volume: Approximate annual total: N/A

Time to Perform: 1.10 hours

			Fully Loaded							
		Total S&B			(Cost per				
Cost to Perform:	Classification	per Hour	Ov	erhead		Hour	Hours	To	tal Cost	
	Management Analyst II	\$ 80.69	\$	31.66	\$	112.35	-	\$	-	
	Management Analyst III	\$ 92.87	\$	36.44	\$	129.31	0.10	\$	12.93	
Public He	ealth Program Manager II	\$ 104.54	\$	41.02	\$	145.56	-	\$	-	
Public He	ealth Program Manager II	\$ 103.26	\$	40.52	\$	143.78	0.10	\$	14.38	
Public	Health Epidemiologist II	\$ 68.07	\$	26.71	\$	94.78	0.30	\$	28.43	
Chronic Diseas	e Prevention Coordinator	\$ 71.91	\$	28.22	\$	100.13	0.30	\$	30.04	
Chronic Diseas	e Prevention Specialist II	\$ 68.05	\$	26.70	\$	94.75	0.30	\$	28.43	
						Total	1.10	\$	114.21	

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 110.00

Proposed Fee: \$ 104.00

Legal Authority: N/A

Test Name: Data collection, extraction, statistical analysis, and/or interpretation

advanced (2 hr. min)

Description of Service: Data collection, extraction, statistical analysis, and/or interpretation - advanced (2

hr. min)

Volume: Approximate annual total: N/A

Time to Perform: 1.20 hours

	Fully Loaded									
	Total S&B			(Cost per					
Cost to Perform:	Classification		per Hour	Ov	erhead		Hour	Hours	To	tal Cost
	Management Analyst II	\$	80.69	\$	31.66	\$	112.35	-	\$	-
	Management Analyst III	\$	92.87	\$	36.44	\$	129.31	0.10	\$	12.93
Public He	ealth Program Manager II	\$	104.54	\$	41.02	\$	145.56	-	\$	-
Public He	ealth Program Manager II	\$	103.26	\$	40.52	\$	143.78	0.20	\$	28.76
Public	Health Epidemiologist II	\$	68.07	\$	26.71	\$	94.78	0.60	\$	56.87
Chronic Diseas	e Prevention Coordinator	\$	71.91	\$	28.22	\$	100.13	0.15	\$	15.02
Chronic Diseas	e Prevention Specialist II	\$	68.05	\$	26.70	\$	94.75	0.15	\$	14.21
	•						Total	1.20	\$	127.79

Total Annual Cost: N/A
Current Revenue: \$

 Current Revenue:
 \$ N/A

 Unmet Cost:
 N/A
 N/A

Current Fee: \$ 124.00

Proposed Fee: \$ 107.00

Legal Authority: N/A

Test Name: Spatial analysis and/or mapping (2 hr. min)

Description of Service: Spatial analysis and/or mapping (2 hr. min)

Volume: Approximate annual total: N/A

Time to Perform: 1.20 hours

		Fully Loaded								
			Total S&B			(Cost per			
Cost to Perform:	Classification		per Hour	Ov	erhead		Hour	Hours	To	tal Cost
	Management Analyst II	\$	80.69	\$	31.66	\$	112.35	-	\$	-
	Management Analyst III	\$	92.87	\$	36.44	\$	129.31	-	\$	-
Public He	alth Program Manager II	\$	104.54	\$	41.02	\$	145.56	0.20	\$	29.11
Public He	alth Program Manager II	\$	103.26	\$	40.52	\$	143.78	0.20	\$	28.76
Public	Health Epidemiologist II	\$	68.07	\$	26.71	\$	94.78	0.60	\$	56.87
Chronic Disease	Prevention Coordinator	\$	71.91	\$	28.22	\$	100.13	-	\$	-
Chronic Disease	e Prevention Specialist II	\$	68.05	\$	26.70	\$	94.75	0.20	\$	18.95
							Total	1.20	\$	133.69

 Total Annual Cost:
 N/A

 Current Revenue:
 \$ - N/A

 Unmet Cost:
 N/A

Current Fee: \$ 129.00

Proposed Fee: \$ 112.00

Legal Authority: N/A

Test Name: Database cleaning and management

Description of Service: Database cleaning and management

Volume: Approximate annual total: N/A

Time to Perform: 1.20 hours

		Total S&B			Ily Loaded Cost per			
Cost to Perform:	Classification	per Hour	Ov	erhead	Hour	Hours	To	tal Cost
	Management Analyst II	\$ 80.69	\$	31.66	\$ 112.35	-	\$	-
	Management Analyst III	\$ 92.87	\$	36.44	\$ 129.31	0.20	\$	25.86
Public He	alth Program Manager II	\$ 104.54	\$	41.02	\$ 145.56	0.20	\$	29.11
Public He	alth Program Manager II	\$ 103.26	\$	40.52	\$ 143.78	0.20	\$	28.76
Public	Health Epidemiologist II	\$ 68.07	\$	26.71	\$ 94.78	0.20	\$	18.96
Chronic Disease	e Prevention Coordinator	\$ 71.91	\$	28.22	\$ 100.13	0.20	\$	20.03
Chronic Diseas	e Prevention Specialist II	\$ 68.05	\$	26.70	\$ 94.75	0.20	\$	18.95
	•				Total	1.20	\$	141.67

Total Annual Cost: N/A
Current Revenue: \$ - N/A

Unmet Cost: N/A N/A

Current Fee: \$ 131.00

Proposed Fee: \$ 118.00

Health Department Teen Pregnancy Prevention/Reproductive Health Education Fee Study FY 2020-21

Legal Authority: N/A

Test Name: Reproductive Health Class

Description of Service: Provide 1 hour Reproductive Health Class to include STI, birth control, and

decision making education.

Volume: Approximate annual total: N/A

Time to Perform: 2.50 hours

		Fully Loaded										
		Total S&B				Cost per			Total			
Cost to Perform:	Classification	per Hour		Overhead			Hour	Hours	Cost			
Hea	alth Program Coordinator	\$	85.71	\$	33.63	\$	119.34	0.50	\$ 59.67			
Chronic Disease	Prevention Coordinator	\$	71.96	\$	28.24	\$	100.20	2.00	\$200.40			
							Total	2.50	\$ 260.07			

Total Annual Cost: N/A

Current Revenue: \$ - N/A Unmet Cost: N/A N/A

Current Fee: \$ 255.00

Proposed Fee: \$ 260.00

Health Department Medical Marijuana ID Program (MMICP) Fee Study FY 2020-21

Legal Authority: Health and Safety Code Section 11362.755

Description of Service: Registration program for medical marijuana ID cards that patients may use as

evidence that they have received a recommendation from their physician to

use marijuana for medicinal purposes.

Volume: Approximate annual total: 100

Time to Perform: 1.5 hours per ID Card

		Fully Loaded								
			Total S&B			(Cost per		To	otal
Cost to Perform:	Classification		per Hour	Ov	erhead		Hour	Hours	С	ost
	Office Assistant III	\$	51.60	\$	20.09	\$	71.69	1.25	\$ 8	39.61
Supervising V	ital Records Specialist	\$	61.54	\$	23.96	\$	85.50	0.25	\$ 2	21.38
								Total	\$11	10.99

Total Annual Cost:	\$ 11,099.00	
Current Revenue:	\$ 8,000.00	72.08%
Unmet Cost:	\$ 3,099.00	27.92%

Current Fee: \$ 80.00

Current Fee: \$ 40.00 (per HSC Section 11362.755, Medi-Cal beneficiaries receive a

(Medi-Cal beneficiaries) 50% fee reduction)

Proposed Fee: \$ 100.00

Proposed Fee: \$ 50.00 (per HSC Section 11362.755, Medi-Cal beneficiaries receive a

(Medi-Cal beneficiaries) 50% fee reduction)

Proposed Cost Recovery: \$ 10,000.00

Health Department Burial Transit Permit Letter Fee Study FY 2020-21

Legal Authority: N/A

Description of Service: The permit grants permission for the transportation and burial or other

disposition of deceased body. For funeral home to ship body out of the country, a letter issued by the Health Department is required certifying there is no communicable disease or that the body was properly embalmed and placed in

a close casket where threre is no threat of contamination.

Volume: Approximate annual total: 120

Time to Perform: 0.50 hours per permit letter

		Fully Loaded Total S&B Cost per						Total		
Cost to Perform:	Classification		per Hour	Ov	erhead	•	Hour	Hours		Cost
Supervising Vita	al Records Specialist	\$	61.54	\$	23.96	\$	85.50	0.50	\$	42.75
								Total	\$	42.75

Total Annual Cost: \$ 5,130.00

 Current Revenue:
 \$ 0.00%

 Unmet Cost:
 \$ 5,130.00
 100.00%

Current Fee: \$ -

Proposed Fee: \$ 25.00

Proposed Cost Recovery: \$ 3,000.00