

North Carolina Association of Local Health Directors
Full Association Meeting
Date: July 17, 2014
DPH, 5605 Six Forks Road, Raleigh
Cardinal Room

Minutes

Meeting Called To Order: 10:00 a.m.

Approve Minutes of Previous Meeting: Motion to approve minutes of the June 19, 2014 meeting made and seconded; motion carried.

Approve Treasurer/Financial Report: Motioned to approve Treasurer/Financial Report made and seconded; motion carried.

Welcome/Introductions/Departures/Recognition:

President's Report - Doug Urland

- Tort Claims work group will be getting together shortly. Waiting to gather some additional info from the field (EH Supervisors).
- Cost Settlement funds in general have decreased about \$5 million statewide. This represents a decrease in Medicaid patients being seen at Local Health Departments. We aren't seeing fewer patients overall, just fewer Medicaid patients.
- Still following up with DMA/Dr. Cummings regarding the 3% reduction in Medicaid payments
 - Official response from DMA is that Health Department Clinical services are cost-based and therefore exempt from this cut. It does, however, apply to dental services.
- Beth sent the list of batch county vendor contacts to DPH to facilitate technical discussions. Short meeting yesterday went well. Will continue to meet.
- Legislative updates have been sporadic because there hasn't been much action in the General Assembly. Going forward Lynette will send a Friday update.
- New Health Director training going exceptionally well. Kudos to Scott Harrelson for spearheading this important program.

NC Division of Public Health Reports

Director DPH – Penelope Slade-Sawyer:

- Welcome to the new health directors
- Kevin Ryan has announced his retirement
 - Kevin has done a lot of work for a lot of years and will be missed
- With directive to state lab to be more self-supporting, DPH will reach out to LHD to discuss plans.
- Brucellosis case – local hospital lab that tested the samples did not follow protocol, and subsequently have lab workers exposed.
- Thank you for being here.

State Health Director – Dr. Robin Cummings: Not here/no report

Administrative, Local, and Community Support – Danny Staley:

- Phyllis Rocco is the new Local Technical Assistance and Training Branch head
 - Former Lee County Health Director
 - Long time experience with local and state public health
 - Welcome Phyllis!
- 10% Medicaid cost report hold back
 - Now that the SPA is approved, it is hoped that the 10% hold back will make its way back to local health departments
 - Billing for back assessments is in process
- Presumptive Eligibility
 - SPA submitted June 20 and once DHHS receives approval, PE will be resumed with no residency requirement
- Cost Settlement
 - Three counties left from the last Cost Settlement process
 - Generally takes 6-8 weeks to get the payment
 - Instructions for cost report have gone out for this year. See Danny if you haven't received this.
- CC4C/OBCM
 - 8 counties do not provide this program/service
 - These services are being conducted by other county health departments
 - A few counties are terminating these services without discussions with DPH. This jeopardizes the “public health only” rules currently in place.
 - Let DPH know if you are considering no longer providing this service... before you stop.
- WIC Crossroads roll out is going very well and Danny, Kevin and Josephine send their thanks.
- Eleanor Howell is the new State Center for Health Statistics Director
- Budget
 - Specific to DPH, school nurse funding and mosquito control funding has been removed from the WIRM because these funds are eliminated in one or all the budgets being discussed.
 - TB – federal funds are decreasing. Mid-year reductions from the feds were based on cases. An additional \$120,000 reduction for next calendar year. 32 counties will have a 5% reduction in federal funding (approximately \$1000-\$2000). This is not in addition to the cuts this year; it is to the baseline amount.
 - Awaiting a final cut to contracts from the state budget. Plans to move away from across the board cuts and seriously looking at complete programs to eliminate.
- CD issues are everywhere, Danny and Meagan thank you for all the additional staff and time being dedicated to these responses.

Local Technical Assistance & Training Branch – No report/not here

Environmental Health Section – Larry Michael:

- Legislative Update
 - No budget update

- Proposed transfer of the onsite water protection is in the Senate Budget, priority for DPH to keep EH together.
- Bills to watch
 - 734 Regulatory reform bill – edition 6 removes transfer of private water supply rulemaking.
 - HB 1140 CO monitoring-transferring authority to Fire Marshall's Office
 - SB 38 Amend Environmental Laws 2014- likely to pass. Trying to modify as best as is possible.
- US Open
 - Thanks to Bob Whitman/Moore County for helping to pull off such a great event.
 - See attachment 1 for detailed info on food service inspections during the event.
- Staffing
 - Manpower studies documents available from EH. Contact your regional rep for more info
 - New employee-dedicated employee specific to BETS
- BETS
 - BETS is going to be re-built from the ground up
 - Working on XML schema which will allow data transfer from multiple sources
 - Also working on cleaning up the data. A lot of duplicates.
 - Interested in providing a bi-monthly report on the progress with BETS to the Informatics Committee. No estimate on when these upgrades will be complete.

Executive Director's Report –Lynette Tolson

- Legislative update
 - Please let Lynette know if you are not on the NCACC (County Commissioner's Association) list serve. They send out a legislative update every Friday afternoon.
 - Monitoring teacher pay increases. Worried about where that money will come from.
 - Medicaid Reform Plans- no agreement with Senate plan.
 - HB 1224 gutted by the Senate – does not let the counties have a sales tax higher than 2.5%
- NCPHA
 - Look for letter from President asking Health Directors to bring door prizes for the fall conference.
 - Book your room for NCPHA now. Agenda should be completed soon.
 - Silent Auction items needed. Please see Lynette.
 - Surgeon General will be participating (perhaps the 5K too).

Action/Information Items - Committee Reports

Communications – Colleen Bridger: Did not meet

Action/Motion:

Information:

Best Practice – Sue Lynn Ledford:

Action/Motion: Maintain charges for accreditation at current level (\$2,750 per year)

Motion passes after some discussion regarding accreditation requirement pros and cons

Information:

- Active Routes to Schools update- collaboration with CTG going well
- BRFS – county-level data will no longer be available. No plans to address.
- HIV control measures workgroup being established. See Evelyn Faust if you'd like to participate.

Core Public Health – Denise Michaud: Did not meet

Action/Motion:

Information:

Nominations & Bylaws – John Morrow: Did not meet

Action/Motion:

Information:

Education & Awards – Scott Harrelson: Did not meet

Action/Motion:

Information:

Informatics – Dennis Joyner:

Action/Motion:

Information:

1. NC HIE Connectivity Update Jayson Caracciolo
Contracts have been signed between NC HIE and Netsmart/Insight, CureMD and Patagonia. Counties that have connected so far are Patagonia vendor counties. Working with CureMD and Netsmart to establish connectivity interface and will hopefully be completed by October. Counties interested in connecting with NC HIE should contact Jayson. Counties can connect with more than one HIE if they so choose (such as Coastal Connect and NC HIE).
2. HIS Update, MU Modules Contract Update Susan Eakes/John Bryant
Clinical Transformation Project for HIS
Clinical Transformation project is running about 3 weeks behind schedule due to some delays with scanning and electronic signature pad components. Counties will need HIS credentialing if they want to utilize electronic signature pads and further communication will be forthcoming from Susan. Contracts for Meaningful Use modules are still in process of being finalized.

DPH ICD-10 Implementation Project Progress Report for NCALHD Informatics Committee

1. CMS has announced that an interim rule will be sent out for comment in the near future wherein the new compliance date will be October 1, 2015 but the rule has still not been published. A joint letter from the House and Senate was sent to CMS that requires routine reporting to Congress in relation to healthcare industry readiness. The letter is posted at <http://publichealth.nc.gov/lhd/icd10/docs/communications/LetterToCMSfromCongressRegarding-ICD-10-Preparedness-060414.pdf>
2. Registration information for limited ICD-10-CM coding training that will take place in September 2014 has been sent to the ICD-10 contacts. This training will be held so agencies will have trained staff to assist in implementation activities and clinical documentation improvement. More extensive course offerings will be conducted May – September 2015. Training sessions are noted below.
 - Basic: 9/3 (8am-noon); 9/3 (1-5pm); 9/15 (1-5pm)
 - Primary Care, Women's Health, Chronic Dz, BCCCP: 9/18 (12:30-4:30pm)
 - Maternal Health: 9/18 (8:30-11:30am); 9/22 (12:30-3:30pm)
 - Behavioral Health: 9/22 (9-11am)

STD, HIV, Communicable Dz: 9/23 (8:30-10:30am)

Child Health, Health Check: 9/23 (2-5pm)

Family Planning: 9/23 (11am-1pm)

3. Medicaid is working on their testing strategy and end-to-end testing that includes LHDs and CDSAs is certainly being advocated. Once decisions on testing are made, it will be essential that test cases be developed that test a majority of the services provided. Begin compiling the types of cases your agency wants to see included in the testing. For example, agencies could maintain copies of encounter forms that represent the top 5 diagnoses seen in each program and code the encounter forms using ICD-10-CM so these can be used for testing. Also, identify the business processes that need to be included in end-to-end testing such as appointment scheduling, referral, pre-certification, check-in, EHR/Medical documentation, coding, billing, etc.
 1. DPH has requested 10 trading partner slots so that testing can be done with HIS for both LHDs and CDSAs and then each non-HIS vendor system can test (e.g., Insight, Patagonia, Allscripts, etc). DPH will continue to advocate to retain the 10 slots.
 2. The DPH ICD-10 Implementation Team recommends the following process for selection of the slots: Summary information related to an agency's requirements to be ready for end-to-end testing will be developed. From that, an 'application' will be developed for interested agencies to complete to ascertain that the agency will be prepared for testing. The final determination for testing agencies will be determined by ? (*Informatics Committee discussion*)
4. Project documents (i.e., Project Plan, Project Schedule, Implementation Plan, Training Plan) have been updated based on the anticipated 10/1/15 compliance date and the updates are posted on the DPH website.
5. Project Manager will continue to participate in NCTracks ICD-10 meetings and DHHS ICD-10 Steering Committee meetings.
6. The DPH ICD-10 Project Manager will be retiring in November 2014 and her responsibilities will be transitioned. A transition plan is in development.

Josephine Cialone – WIC Crossroads Summary Report for Informatics 7/16/14

- 1) Crossroads has completed four of ten scheduled rollout groups; all local agencies in rollout groups one through 4 were successful in implementing the system.
- 2) Technical rollout readiness visits are being scheduled with each local agency's IT and WIC Director a few weeks prior to scheduled rollout. During these visits, our technical team checks set-up of peripheral devices (scanners and signature pads) and ability to download the application. Issues that are sometimes identified during the visits include:
 - i. Inadequate bandwidth. This has occurred primarily at satellite sites. J Cialone will escalate these issues to the Health Director's attention. If an upgrade is needed, the Health Director will be asked to expedite the request. Nutrition Services will make funds available for one-time costs of the upgrade through the local agency contract if the local WIC budget cannot absorb the cost.
 - ii. Network problems. Some local agencies have had network issues such as timing out the Crossroads system after a short period. These issues are usually remedied via discussions between local IT staff and Crossroads technical rollout readiness team.
 - iii. Crossroads set-up check-list not completed. Some local agencies have not completed the IT check-list distributed and available on nutritoinnc.com. Completion of the check list prior to the rollout readiness visit will streamline the visit and identify some issues prior to the visit. Local agencies are encourage to complete the check list as soon as possible.

- 3) MICR Printer site visit: A site visit to each local agency is scheduled on the last working day prior to rollout (usually Friday) to download the new food instrument format to all MICR printers and test the ability to print to the MICR from Crossroads. This visit is completed to assure that food benefits can be successfully issued on the first day of rollout.
- 4) While Nutrition Services Branch provided training on anticipated clinic flow changes required by Crossroads, some local agencies have not heeded advice provided by the Branch. Crossroads enforces federal regulation that have been in place for many years but could not be previously enforced in a paper system. Local agencies are reminded that satellite sites that are not staffed by a nutritionist or nurse must have an individual with these credentials "on call" at the main site. This will allow the support staff at the satellite have a nurse or nutritionist available should the prescription for an individual need to be changed.
- 5) Nutrition Services will assign a staff member to each local agency clinic site in operation during their first week of rollout. The Branch Help Desk is available weekdays from 7AM – 6PM. Additional Help Desk staff have been hired to increase the Branch's ability to quickly respond to local agencies.
- 6) The Health Directors "Intro to Crossroads Webinar" will be rescheduled as soon as Nutrition Services Branch webinar system is back up and running (expected by early August). J Cialone will work with D Joyner to determine the date.
- 7) Crossroads WIC Participation reports for a local agency are not accurate for the month prior to rollout, the month of rollout and two subsequent months. The Nutrition Services Branch will be adjusting participation for each local agency and will disseminate revised reports (via email) each month.
- 8) Nutrition Services Branch will make training slots available for newly hired staff and is planning additional training sessions on running reports and modifying the appointment system. Ideas are welcome on other topics that should be considered for future training sessions.

Community Health Improvement - Janet Clayton: Did not meet

Action/Motion:

Information:

Partnership Development – Buck Wilson: Did not meet

Action/Motion:

Information:

Policy Analysis & Development – Lisa Harrison:

Action/Motion:

Information:

- **Kudos to Buncombe and Durham Counties for winning the RWJ Culture of Health Awards**
- **NC Medical Journal article by Jim Bruckner**

Lee Dixon from the Care Share Health Alliance was present to discuss progress made in NC on enrolling individuals in the health insurance marketplace.

Lee shared the progress of the **Big Tent** group which is made up of more than 300 individuals and 40 organizations working together to monitor and coordinate the navigators and CACs. Subcommittees of the Big Tent group include: (a) Outreach and Education (b) Best Practices (c) Work-Arounds (d) Community Development (e) Information and Training. If you would like to join the Big Tent, notify Lee at the following email: ldixon@caresharehealth.org

Information:

- To date, more than 357,500 have enrolled in the marketplace from NC.
- NC has the fifth highest enrollment numbers in the nation. Insurance companies offered through the marketplace include Blue Cross / Blue Shield, Coventry, and soon, United will join in NC as well.
- November 15, enrollment will begin again in the marketplace
- Current CACs will have to be re-trained – training will be announced by CMS – “Stay tuned” for further information (training SHOULD be August or September)

Discussion from the group included the following points:

- All plans are different – deductibles can be high on many of the plans.
- There is currently no county level data available on enrollment
- There is a significant insurance learning-curve for those first-timers who have never had insurance before and can often make assumptions about how to use it

Sally Herndon and Jim Martin updated the group on Tobacco Policy and CTG:

- a. CTG in NC has “rocked it” – every region has made great progress and will continue much of the good work CTG helped start on smoke free policies and environmental change.
- b. Sally is pleased to have worked with the ‘dream team’ (Steve, Layton, John) to finalize an educational document with FAQs about the new rule – there will be a webinar on July 31st at 10:30 to go over the new rules document.

The committee reviewed 2 documents: One that originated with our RFI response about public health’s recommendations to Medicaid as we consider reform and the other, a FIRST DRAFT stream-of-consciousness amateur starting point to from which to jump of into discussion about public health’s role in an ACO. A few points were made by the group:

- We should add / clarify our definition of population health to any missive – a hospital’s definition of population health is either leaning toward what we consider data management or case management
- FQHCs are applying to be a provider of population health in NC
- As we think about conveying our role in an ACO, we should connect carefully to the 32 measures of ACOs around quality – 8 are focused on preventive health and 11 on at-risk populations – the trick is finding sources of revenue for these
- Don’t forget the rural-urban continuum and potential difficulty for high-need populations in rural areas to be connected to ACO and public health as we reconnect to funding options
- Remember the “Hot Spotters” concept/article
- Sally mentioned the recent Asthma grant application that holds some effective examples of prevention and cost-savings at a population level – it features the clinic side and public health side working together on cost savings and provides effective case study-like examples – we need more of these – more DATA!
- We have to remember and keep advocating not only for our role in an ACO, but in the larger picture of public health core and mandated services, there is much a health department does that is not covered by Medicaid or connected to how Medicaid will be managed – don’t forget to advocate for core public health funding IN ADDITION to ACO and Medicaid discussions
- Dr. Tom Frieden at NACCHO discussed the following points in his talk:
 - Public health saves lives and money
 - Public health increases freedom

- The biggest bang for saving lives and money right now will come from our focusing on five primary areas:
 1. CVD/Stroke/BP control
 2. Tobacco Prevention
 3. Teen Pregnancy Prevention
 4. Substance Abuse Prevention
 5. Health Associated Infections

Action/Information Items - Public Health Regions

No reports/action

Partners

NCPHA – Lisa Harrison:

- **NCPHA.com**
 - Awards deadline extended
 - New nursing scholarship
 - Anne Wolfe mini-grants deadline extended
 - GSK received a lot of nominations for awards

Liaison Reports

NC Institute of Public Health – Anna Schenck/Dorothy Cilenti/John Graham:

- See attachment

ANCBH – Barbara Anne Hughes:

- State Association meeting Saturday
- Thank you for paying your dues
- NALBOH board is going to let you pay for next year's dues with this year's payment (so, half price)
- Congrats to Orange County and Scotland County for having presenters at the NALBOH conference.

Meeting Adjourned: at 12:00.

Next Meeting: August 21, 2014

Location: Cardinal Room - DPH, 5605 Six Forks Road, Raleigh.

US Open Summary Statistics

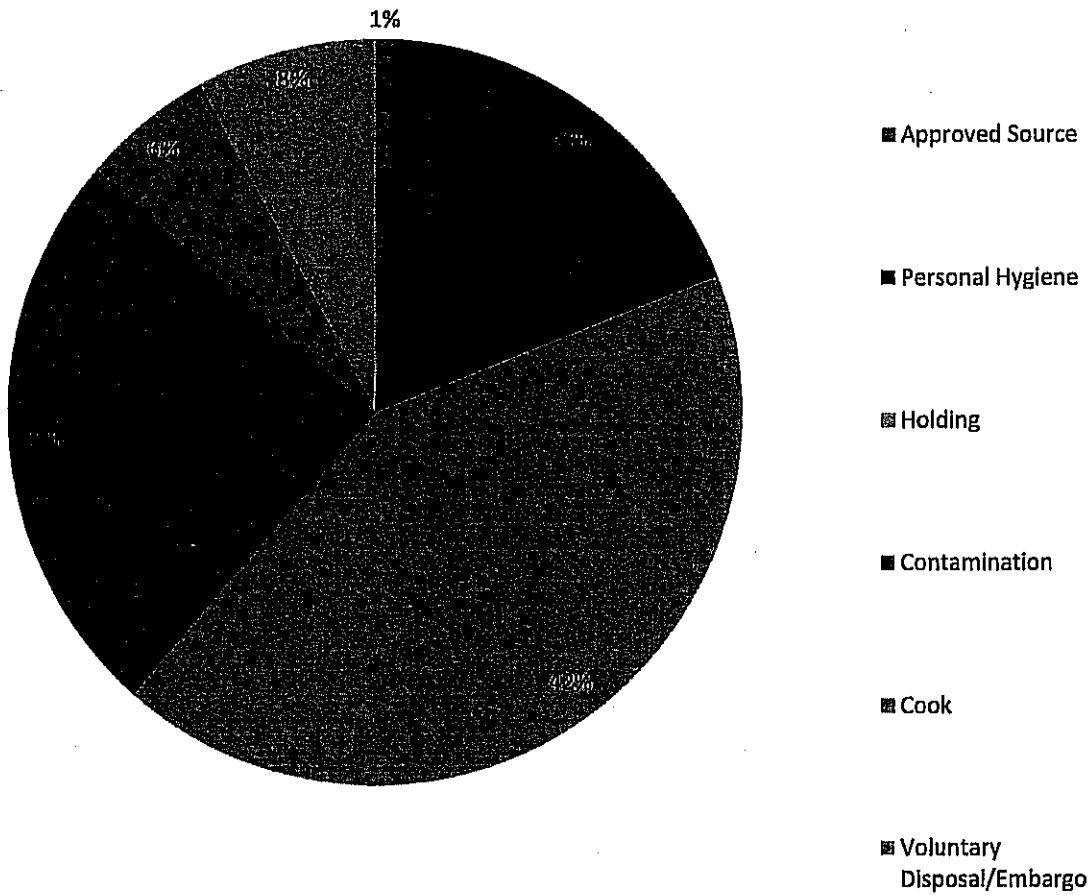
Deployment Period: 6/9/2014-6/23/2014

Total number of inspections completed: 331

Total number of inspections in compliance: 170 (51%)

Total number of violations noted on inspection: 241

Total Number of Violations by Type (N=241)





UNC
GILLESPIE SCHOOL OF
GLOBAL PUBLIC HEALTH

THE UNIVERSITY OF NORTH CAROLINA
AT CHAPEL HILL

THE NORTH CAROLINA
INSTITUTE FOR PUBLIC HEALTH

MEMO

To: NC Association of Local Health Directors
From: Anna Schenck, PhD, NCIPH Director
Re: NCIPH/SPH Update for NCALHD Business Meeting
Date: July 17, 2014

1. Training

- a. Enhanced Role RN Course covering physical assessment of adults and STDs starts August 27. Registration is now open.
- b. We are currently scheduling Board of Health trainings into the fall
- c. The 31st Annual North Carolina School Nurse Conference will be held October 2-3, 2014. Registration is now open.
- d. Management and Supervision Training has been scheduled: week one will be held October 20-24 and week two will run November 17-21. Registration will open August 1.
- e. Introduction to Public Health Nursing will be held September 8-10. Registration opens July 18.

2. Accreditation

- a. A celebration was held last month to mark the completion of all counties going through the accreditation process.
- a. Two webinars have been planned to provide guidance on the electronic submission of accreditation materials: Monday, July 21st 12:00-1:00PM and Tuesday, July 22nd 12:00-1:00PM.

July 17, 2014

NCALHD Attendance Roster - Health Director Initial by County
(Bold Indicates NCALHD Dues paid)

<i>MB</i>	Alamance	Stacie Turpin Saunders, Int		Jackson	Paula Carden <i>PC</i>
<i>MB</i>	Albemarle District	Jerry Parks	<i>MB</i>	Johnston	Marilyn Pearson
	Alexander	Leeanne Whisnant		Jones	Kimberly Hill-Barrow
<i>MB</i>	Anson	Fred Thompson	<i>MB</i>	Lee	Terrell Jones
<i>MB</i>	Appalachian District	Beth Lovette	<i>MB</i>	Lenoir	Joey Huff
<i>MB</i>	Beaufort	James Madson	<i>MB</i>	Lincoln	Maggie Dollar
<i>MB</i>	Bladen	Cris Harrelson	<i>MB</i>	Macon	Jim Bruckner
<i>MB</i>	Brunswick	David Stanley <i>MB</i>	<i>MB</i>	Madison	Jan Shepard
<i>MB</i>	Buncombe	Gibbie Harris	<i>MB</i>	MTW District	Terrell Davis
<i>MB</i>	Burke	Rebecca McLeod		Mecklenburg	Marcus Plescia
	Cabarrus Health Alliance	William Pilkington		Montgomery	Mary Perez
<i>MB</i>	Caldwell	Denise Michaud		Moore	Robert Wittmann <i>RAW</i>
	Carteret	Paula Stanley, Int <i>MB</i>		Nash	William Hill, Jr.
	Caswell	Fred Moore	<i>MB</i>	New Hanover	David Rice
<i>MB</i>	Catawba	Doug Urland	<i>MB</i>	Northampton	John White, Int
<i>MB</i>	Chatham	Layton Long		Onslow	Angela Lee
	Cherokee	Towanna Roberts	<i>MB</i>	Orange	Colleen Bridger
	Clay	Janice Patterson		Pamlico	Dennis Harrington
	Cleveland	Dorothea Wyant	<i>MB</i>	Pender	Carolyn Moser
<i>MB</i>	Columbus	Kim Smith	<i>MB</i>	Person	Janet Clayton
<i>MB</i>	Craven	Scott Harrelson		Pitt	John Morrow
<i>MB</i>	Cumberland	Buck Wilson	<i>MB</i>	Randolph	Mimi Cooper
	Dare	Jay Burrus	<i>MB</i>	Richmond	Tommy Jarrell
<i>MB</i>	Davidson	Monecia Thomas	<i>MB</i>	Robeson	William Smith
<i>MB</i>	Davie	Suzanne Wright	<i>MB</i>	Rockingham	Glenn Martin
<i>MB</i>	Duplin	Ila Davis	<i>MB</i>	Rowan	Nina Oliver
	Durham	Gayle B. Harris		RPM District	James Hines, Jr.
	Edgecombe	Karen Lachapelle	<i>MB</i>	Sampson	Wanda Robinson
	Forsyth	Marlon Hunter	<i>MB</i>	Scotland	David Jenkins
<i>MB</i>	Franklin	Chris M. Szwagiel	<i>MB</i>	Stanly	Dennis Joyner
<i>MB</i>	Gaston	Chris Dobbins	<i>MB</i>	Stokes	Scott Lenhart
	Graham	Alicia Parham	<i>MB</i>	Surry	Samantha Ange
<i>MB</i>	Granville-Vance District	Lisa Macon-Harrison		Swain	Alison Cochran
<i>MB</i>	Greene	Michael Rhodes		Toe River District	Lynda Kinnane
<i>MB</i>	Gulford	Merle Green	<i>MB</i>	Transylvania	Terry Pierce, Interim
<i>MB</i>	Halifax	Cardra Burns	<i>MB</i>	Union	Phillip Tarte
<i>MB</i>	Harnett	John Rouse	<i>MB</i>	Wake	Sue Lynn Ledford
	Haywood	Carmine Rocco	<i>MB</i>	Warren	Andy Smith
	Henderson	Steve Smith		Wayne	Davin Madden
<i>MB</i>	Hertford	Ramona Browser, Diane McLawhorn	<i>MB</i>	Wilkes	Ann Absher
<i>MB</i>	Hoke	Helene Edwards	<i>MB</i>	Wilson	Teresa Ellen
	Hyde	Wesley Smith		Yadkin	Kimberly Harrell
	Iredell	Jane Murray			

July 17, 2014

NCALHD Attendance Roster - Health Director Initial by County
(Bold Indicates NCALHD Dues paid)

DPH Liaisons	Penny Slade-Sawyer		NCALHD Exec Dir	Lynette Tolson
	Robin Cummings			
	Danny Staley			
	Joy Reed			
	Larry Michael	ZM		

July 17, 2014 TPCB/DPH
 Ben Pro WCHSLOPH KL
 Dennis Williams ~~DKC~~
 Guests Liaisons from other Organizations

<i>Julie Hoodin Hasty</i>	NC SOPHE			
<i>Barbara Ann Hughes</i>	AWC RH			
<i>Anna Schmitt J.</i>	WNC NCIPHA			
<i>Raven Adams</i>	NCALHD			
<i>Ken Gilstrap</i>	Partnet Co			
<i>BILL ADAM</i>	LUKE MD			
<i>Jill Moore</i>	WNC SOG			
<i>Barry Allen</i>	CO HD			
<i>Megan Davies</i>	NC DPH Epi Section			
<i>Bonnie M. Hain</i>	MOORE Co. HD			

**North Carolina Association of Local Health Directors, Inc.
Balance Sheet**

Jul 31, 14

ASSETS

Current Assets

Checking/Savings

CD-SECU *4185	40,000.00
Checking-SECU *6586	4,503.55
Money Market-SECU *0321	147,078.40
Savings-SECU *1387	41.97

Total Checking/Savings 191,623.92

Accounts Receivable

Accounts Receivable 8,864.45

Total Accounts Receivable 8,864.45

Total Current Assets 200,488.37

Other Assets

Temporary Restricted Assets

Legal Fund (34,388.00)

Total Temporary Restricted Assets (34,388.00)

Total Other Assets (34,388.00)

TOTAL ASSETS 166,100.37

LIABILITIES & EQUITY

Liabilities

Current Liabilities

Accounts Payable

Accounts Payable 4,697.41

Total Accounts Payable 4,697.41

Total Current Liabilities 4,697.41

Total Liabilities 4,697.41

Equity

Opening Bal Equity 50,793.88

Retained Earnings 249,764.09

Net Income (139,155.01)

Total Equity 161,402.96

TOTAL LIABILITIES & EQUITY 166,100.37

**North Carolina Association of Local Health Directors, Inc.
Income & Expense Budget vs. Actual**

	<u>Jan - Jul 14</u>	<u>Budget</u>	<u>\$ Over Budget</u>	<u>% of Budget</u>
Ordinary Income/Expense				
Income				
Interest/Dividend Income	1,084.98	2,000.00	(915.02)	54.25%
Meeting/Conference Income	965.00	820.00	145.00	117.68%
Membership Income				
NACCHO Rebate	2,764.32	2,500.00	264.32	110.57%
NCALHD Dues	58,532.73	59,957.00	(1,424.27)	97.63%
Total Membership Income	<u>61,297.05</u>	<u>62,457.00</u>	<u>(1,159.95)</u>	<u>98.14%</u>
Total Income	63,347.03	65,277.00	(1,929.97)	97.04%
Expense				
Administrative Services	30,100.00	51,600.00	(21,500.00)	58.33%
Awards	1,013.06	1,000.00	13.06	101.31%
Bank Charges	6.00	12.00	(6.00)	50.0%
Gifts	127.98	100.00	27.98	127.98%
Licenses and Permits	504.00	504.00	0.00	100.0%
Meeting/Travel Expense				
Meetings/Conferences	5,026.83	2,000.00	3,026.83	251.34%
Travel	660.97	1,500.00	(839.03)	44.07%
Total Meeting/Travel Expense	<u>5,687.80</u>	<u>3,500.00</u>	<u>2,187.80</u>	<u>162.51%</u>
Miscellaneous	9.00			
Professional Services				
Accounting Fees	2,574.97	2,000.00	574.97	128.75%
Consulting	3,333.33			
Technology	135.00	540.00	(405.00)	25.0%
Total Professional Services	<u>6,043.30</u>	<u>2,540.00</u>	<u>3,503.30</u>	<u>237.93%</u>
Sponsorships	(1,366.67)	1,800.00	(3,166.67)	(75.93%)
Website	45.00	180.00	(135.00)	25.0%
Total Expense	<u>42,169.47</u>	<u>61,236.00</u>	<u>(19,066.53)</u>	<u>68.86%</u>
Net Ordinary Income	<u>21,177.56</u>	<u>4,041.00</u>	<u>17,136.56</u>	<u>524.07%</u>
Net Income	<u><u>21,177.56</u></u>	<u><u>4,041.00</u></u>	<u><u>17,136.56</u></u>	<u><u>524.07%</u></u>