

# Appalachian District Health Department

The good, the bad and the ugly

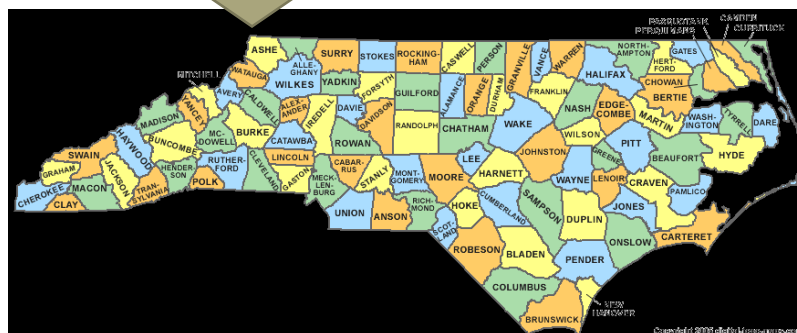


## AppHealthCare

- Alleghany, Ashe and Watauga Counties
  - Alleghany County: Tier 1, population 10,848 and declining
  - Ashe County: Tier 1, population 26,924 and declining
  - Watauga County: Tier 3, population 53,922 and growing



## AppHealthCare Counties



- Appalachian has been a district since forever. At some point we divided from 6 counties to two 3 county districts (Toe River formed) for a great long while.
- Health Department in each county.
- Small (4 person) business office in Alleghany
- Administrative staff scattered with a designated “base county”
- Meetings happen in Ashe, the central county
- Services vary by community need and various program funding silos. Example: FQHC in Alleghany and Ashe and more community health opportunity in Watauga.



## Administrative Structure

- Health Director is like a CEO of a non-profit entity with governmental responsibilities, but no ability to raise revenue other than grants, fees, advocacy.
  - Health director is hired and fired by Board of Health
  - Complete fiscal responsibility rests with Health Director -- personnel policy, health insurance and other benefits, retiree benefits, etc.



### Public Authority (District)


- 1) Health Director hired/fired by Board of Health. Supposed to consult with Boards of Commissioners
- 2) District Business Office
  - 1) Budget ordinance
  - 2) Personnel policy including benefits
  - 3) Audit

### County Department


- 1) Same.
- 2) Business office functions managed by county
  - 1) One department of total county budget
  - 2) Personnel policies adopted by county
  - 3) Component of county audit



<b>Public Authority (District)</b>	<b>Single County</b>
<ol style="list-style-type: none"><li>1) Fund legal representation if needed outside governmental support</li><li>2) Any governmental pay-backs, i.e. Medicaid reconciliation or liability claim is responsibility of District</li><li>3) Generally less funding from counties than single county</li></ol>	<ol style="list-style-type: none"><li>1) County attorney provides legal support.</li><li>2) County would be ultimately responsible for any financial liability</li><li>3) Generally funds county departments better than any local authorities such as health, library, etc.</li></ol>



<b>Public Authority (District)</b>	<b>Single County</b>
<ol style="list-style-type: none"><li>1) Fund balance is the responsibility of the District</li></ol>	<ol style="list-style-type: none"><li>1) Fund balance is the responsibility of the County</li></ol>



## Community Connections

- Health Director relationships
  - County Managers!
  - Board of Health Commissioners as liaisons
  - DSS Directors – ask Lisa Osborne, Tracie McMillan and Tom Hughes! It is challenging, but always good to stay connected.
  - Hospital Administrators
  - School Superintendents
  - County Managers, Boards of Commissioners



## Beth's opinion slide (This opinion is solely my opinion and may not accurately represent the opinion of others anywhere around and is likely delusional.)

- Public health is not a business. It is the government's obligation to provide for public health.
  - Should be some kind of federal/state/local metric that provides baseline funding for all counties and with an additional per-capita funding basement
  - We should adopt strong business principles, but cannot be expected to profit from government work that includes healthcare for uninsured low income residents



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- Best if counties are reasonably located in terms of geography
- Best if counties are somewhat similar – not extremely disproportionate in size or wealth
- Best if counties have other successful district or regional projects



## Questions?

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