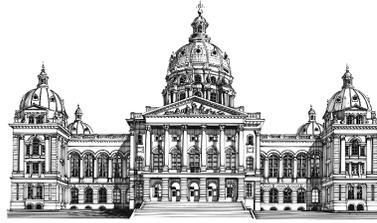


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# Iowa Legislative Fiscal Bureau

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State Capitol  
Des Moines, IA 50319  
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## Public Health Nursing

### ISSUE

This **Review** examines the funding sources and demand for public health nursing services, including the effects of the Case Management for the Frail Elderly Program.

### AFFECTED AGENCIES

Department of Public Health

### CODE AUTHORITY

Section 135.11, Code of Iowa

### BACKGROUND

Public health nursing is the practice of professional nursing designed to promote holistic health, prevent illness, and provide care to all population groups. It ranges from specific nursing intervention for individuals to a focus on the population as a whole. Public health nurses provide a wide variety of services to residents of Iowa of all economic levels.

**Attachment A** lists services provided by public health nurses.

During the 1977 Legislative Session, the General Assembly first appropriated funds (\$1.6 million) for public health nursing. The public health nursing appropriation is used to maintain and expand the existing services with the objective of preventing or reducing inappropriate institutionalization of elderly and low income persons. During FY 1997, the appropriation was used to reduce institutionalization for 3,108 clients and prevent institutionalization for an additional 3,732 persons.

The State appropriation is allocated by the Department of Public Health to local Boards of Health in all 99 counties. Provider agencies are selected by local Boards of Health and the programs and services are delivered under a variety of auspices.

## CURRENT SITUATION

### ***Demand for Public Health Nursing***

Since FY 1992, there has been a 70.0% increase in the number of home visits provided for disease and disability clients by local public health nurses. This is a result of early discharge from hospitals, increased technology allowing home treatment, and a move to treat clients at home whenever possible. The increase in home-based medical services has created an increased need for public health nurses.

Public health nurses may be county employees or may work for a subcontracting entity, such as a visiting nurses association or county hospital. In FY 1994, there were 904 public health nurses statewide and in FY 1997 there were 932. **Attachment B** shows the number of public health nurses in FY 1994 and FY 1997 and indicates the county auspice (service provider).

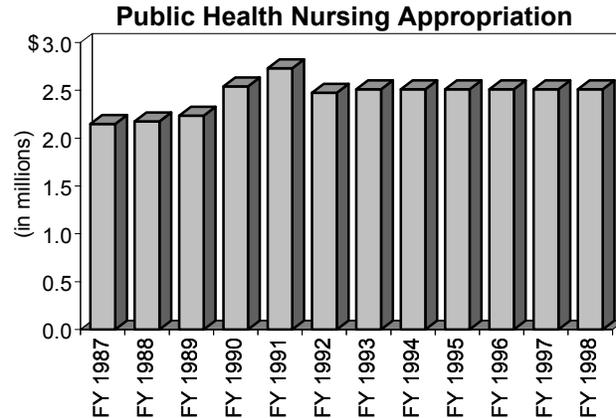
### ***Funding Sources***

Clients use a variety of sources to pay for public health nursing services, depending upon their medical status, resources, and/or third party coverage provisions. Medicare is the first payor of choice, while county funds are the payor of last resort.

- Medicare - Pays for home visiting services for reasonable and medically necessary care of clients who are homebound and need part-time intermittent skilled nursing services during acute illness.
- Private Insurance or Medicaid - Private insurance or Medicaid funds may be used to pay for clients or services not eligible for Medicare. Not all persons have private insurance or Medicaid coverage and, in general, coverage provided through these means has not kept up with the demands of in-home care. This necessitates additional funding through client fees.
- Sliding Fees - Clients are assessed a sliding fee based on their ability to pay. These fees are used to extend services to additional individuals. During FY 1997, \$247,000 was generated through sliding fees.
- State Appropriation or United Way Funds - The State appropriation or United Way funds are used to pay for services for clients who are not eligible for Medicare or Medicaid and do not have private insurance or personal resources.

For FY 1997, \$2.5 million was appropriated to the Department of Public Health for public health nursing. The Department allocated the funds to all 99 counties based on the number of low income and elderly persons in each county. **Attachment C** shows the FY 1997 county allocations.

The public health nursing appropriation has remained constant since FY 1990 except for a 3.25% across-the-board reduction in FY 1992. This has resulted in a 25.4% reduction in nursing visits funded by the appropriation from 66,794 in FY 1990 to 53,351 in FY 1997.



Some individuals who qualify for services from the public health nursing appropriation are not served because of inadequate funding. During FY 1997, the appropriation funded services to 28,409 clients, 1,796 clients had reduced visits because of limited funding.

- County/local - Effective in FY 1998, counties contract for public health nursing along with Home Care Aide/Chore Services and Well-Elderly Clinics in a single contract with the State.

When a county has expended the funds contracted from the State, additional services delivered are paid for by property tax dollars. **Attachment C** contains information on individual local tax expenditures for public health nursing.

### ***Case Management Program\****

The Case Management Program for the Frail Elderly provides a forum for local health and human service agencies to coordinate services to best meet the needs of the frail elderly. Public health nurses are involved in client screening, client assessment, case coordination, and service delivery. For the most part, local public health nursing funds the costs of participation in the Case Management Program.

#### Case Management - Screenings

Screenings are done to indicate persons who may have multiple problems or service needs and to identify persons who may participate in a comprehensive assessment of needs. Screenings may be administered by any trained individual. The person screening potential clients is not reimbursed by the Case Management Program. Counties involved in the Case Management for the Frail Elderly Program reported that public health nurses screened 3,613 clients for Case Management during FY 1996.

#### Case Management - Assessments

An assessment tool is used to supply information on an individual to make long term care decisions by projecting multiple service needs and/or multiple service providers. Assessments, which take about 1.5 hours to complete, do not involve a physical exam. A registered nurse or individual with a Bachelor's degree in a human services discipline must perform the assessment. From October 1996 through September 1997, public health nurses performed 593 out of 3,188 new assessments (18.6%).

\* More information on the Case Management for the Frail Elderly Program is available in an LFB **Issue Review** entitled, "An Update on the Case Management Program for FY 1999."

Agencies may receive a portion of the cost of a home visit assessment (\$82.00) from the local Area Agency on Aging. During FY 1997, persons performing assessments received payments ranging from \$82 to \$18 per assessment.

Counties involved in the Case Management for the Frail Elderly Program reported assessing 1,580 individuals, resulting in 1,074 being admitted for nursing services during FY 1996.

#### Case Management - Coordination

Public health nurses may also be the case manager for a client. During the four quarters from October 1996 through September 1997, an average of 20.2% of cases were managed by public health nurses. As the case manager, the public health nurse is responsible for the following:

- Implementation of the care plan.
- Regular communication with the client and the client's service providers.
- Advocacy on behalf of the client.
- Monitoring for service quality, frequency and appropriateness.
- Regular assessment of the client's needs.

Public health nurses' time spent case managing participants and/or being involved in team meetings is not reimbursed by the Case Management Program. According to a recent survey by the Public Health Nursing Advisory Council, county funds paid for 67.9% of the cost of nursing services provided to the Case Management Program by public health nurses. **Attachment D** contains information on FY 1997 local expenditures for public health nursing services related to the Case Management Program.

#### Case Management - Nursing Services

Through case management, needed nursing services are identified. Case management clients may receive services from a public health nurse or private or hospital-based providers of home health care. The service provider is chosen by the client.

Nursing services provided to Case Management clients may be paid from any of the sources previously described. Public health nurses served 1,321 Case Management clients during FY 1997. The following Table details the funding source for services provided to Case Management clients by public health nurses during FY 1997. (Clients may have multiple funding sources).

<b>Funding Source for Nursing Services</b>	
<u>Funding Source</u>	<u>No. of Clients</u>
Medicare	917
Medicaid	719
Elderly Waiver	197
Public Health Nursing Approp.	268
County funds	128

#### ALTERNATIVES/BUDGET IMPACT

- Maintain current funding level for the public health nursing appropriation of \$2.5 million.

- Increase funding to fully-fund State and local tax portions of public health nursing services. The current appropriation of \$2.5 million added to FY 1997 local tax expenditures of \$7.4 million totals \$9.9 million.
- Increase funding based on Medicaid savings for nursing homes. The Department of Human Services (DHS) has reported a reduction in bed days in recent years. While there are many variables, a portion of the reduction may be attributable to the Case Management Program. During FY 1996, 5,900,000 bed days were projected, while 5,760,000 were incurred. At a State cost of \$19.63 per day, this would have amounted to a gross savings of \$2.7 million in FY 1996. (This is a gross figure and does not consider potential additional costs to the DHS budget for in-home clients.)
- Increase funding based on increases in the average cost per visit. The average cost per visit has increased 35.8% from FY 1992 - FY 1997, from \$48.48 to \$65.82. To have kept pace with this inflation rate, the State appropriation would have increased by \$886,000 from \$2.5 million in FY 1992 to \$3.4 million in FY 1997.
- Increase funding to other core public health functions, thereby increasing funds available at the local level for public health nursing. The Department has requested \$450,000 for FY 1999 for core functions of local public health.
- Increase funding to cover the shortfall of public health nursing's involvement in the Case Management Program. During FY 1997, public health nurses' expenses for work related to the Case Management Program was \$241,000. Nurses received reimbursements totaling \$77,000, leaving a shortage of \$164,000 which was paid for by the counties.

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## **PUBLIC HEALTH NURSING SERVICES**

### **Communicable Disease Control**

Communicable Disease Home and Office Visits  
Tuberculosis Clinics, Direct Observed Therapy  
Adult Immunization: Hepatitis, Tetanus, Influenza, Pneumonia  
Childhood and Adolescent Immunizations  
Communicable Disease Investigation

### **Reduction Of Disease and Promotion Of Health**

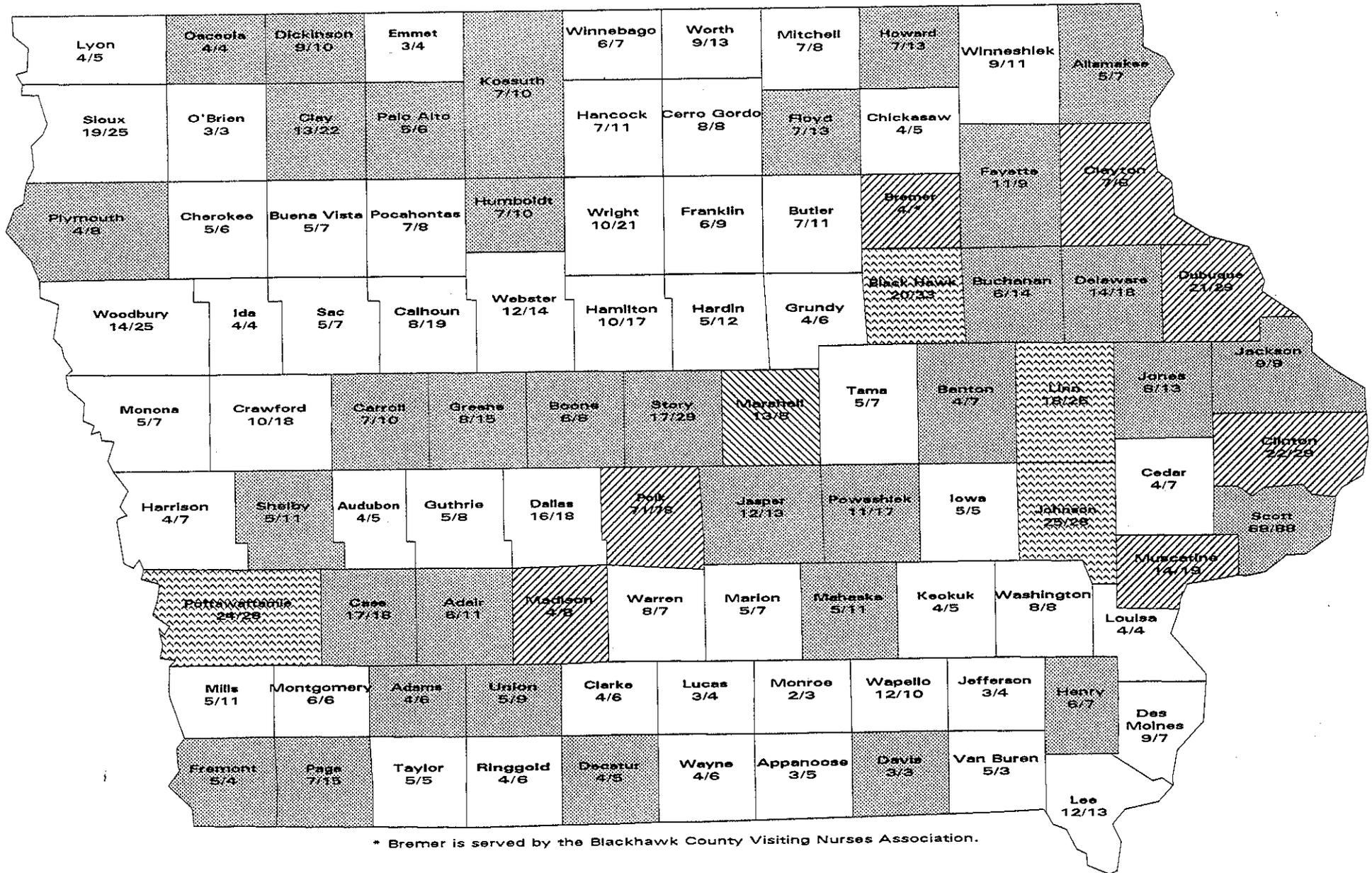
Community Health Education  
Maternal and Child Health Clinics  
Women, Infant, and Children (WIC) Clinics  
Prenatal and Postpartum Visits  
Nursing Assessment, Advocacy and Health Teaching  
Health Promotion Home and Office Visits  
Nursing Services to Schools  
    Vision and Scoliosis Screening  
    Health Education  
    Head Lice Checks  
    School Based Youth Services  
Screening Programs and Clinics  
    Hypertension  
    Diabetes  
    Cholesterol  
    Sexually Transmitted Diseases  
Senior Health Clinics  
Prisoner Health  
Other Clinics Such as Foot Care, Wellness

### **Skilled Nursing Care**

Disease and Disability Home and Office Visits - clients with acute health problems such as recovery from recent surgery or illness.

Health Maintenance Home and Office Visits - clients with chronic illnesses that have reached a level of stability but still need skilled nursing interventions to allow the clients to continue living in their homes.

# NUMBER OF PUBLIC HEALTH NURSES BY COUNTY 1994/vs./1997



\* Bremer is served by the Blackhawk County Visiting Nurses Association.

**Auspice:**

- (53) County Board of Health
- (34) Hospital
- (7) Visiting Nurses Association
- (4) Local Board of Health and Visiting Nurses Association
- (1) Hospital and Visiting Nurses Association

County Allocations of FY 1997 Appropriation and FY 1997 Local Funds  
Expended for Public Health Nursing

County	FY 1997 State Allocation	FY 1997 Local Funds Expended	County	FY 1997 State Allocation	FY 1997 Local Funds Expended
Adair	\$ 14,046	\$ 103,698	Jefferson	\$ 17,659	\$ 35,825
Adams	10,998	48,132	Johnson	59,984	68,100
Allamakee	17,742	111,050	Jones	19,598	23,140
Appanoose	20,370	0	Keokuk	16,215	10,180
Audubon	12,923	73,000	Kossuth	20,550	274,137
Benton	22,244	26,000	Lee	35,225	135,468
Black Hawk	94,654	62,610	Linn	97,256	23,676
Boone	23,609	172,167	Louisa	14,236	16,160
Bremer	21,047	750	Lucas	14,110	0
Buchanan	22,856	0	Lyon	15,757	1,950
Buena Vista	20,060	35,000	Madison	15,423	27,868
Butler	18,841	108,167	Mahaska	22,905	150,000
Calhoun	16,569	76,376	Marion	25,984	5,000
Carroll	21,861	43,000	Marshall	32,124	48,123
Cass	18,749	70,000	Mills	14,409	114,000
Cedar	18,462	171,784	Mitchell	15,269	65,000
Cerro Gordo	37,833	68,000	Monona	16,018	35,755
Cherokee	17,151	0	Monroe	13,646	0
Chickasaw	16,044	0	Montgomery	16,075	73,488
Clarke	13,158	63,308	Muscatine	30,369	145,983
Clay	18,410	210,805	O'Brien	19,184	19,821
Clayton	21,983	24,619	Osceola	11,812	77,275
Clinton	41,540	57,513	Page	20,878	66,000
Crawford	20,270	261,907	Palo Alto	15,965	129,000
Dallas	23,421	361,282	Plymouth	21,712	77,132
Davis	13,786	24,162	Pocahontas	14,226	39,500
Decatur	14,517	0	Polk	181,584	656,243
Delaware	18,924	76,913	Pottawattamie	58,071	15,440
Des Moines	36,426	33,558	Poweshiek	19,278	3,843
Dickinson	18,018	34,018	Ringgold	11,908	11,749
Dubuque	59,960	75,000	Sac	16,948	135,686
Emmet	15,711	22,590	Scott	96,470	85,000
Fayette	24,476	26,843	Shelby	16,453	59,903
Floyd	20,532	4,800	Sioux	23,743	85,712
Franklin	15,512	140,000	Story	49,823	18,300
Fremont	13,320	18,746	Tama	19,710	27,405
Greene	15,234	318,000	Taylor	13,748	91,902
Grundy	15,169	22,968	Union	17,243	0
Guthrie	15,490	8,960	Van Buren	13,416	27,507
Hamilton	17,648	342,819	Wapello	36,820	8,181
Hancock	15,070	19,101	Warren	22,508	119,199
Hardin	21,743	0	Washington	20,243	58,299
Harrison	18,548	0	Wayne	14,241	79,821
Henry	18,972	77,871	Webster	36,577	38,000
Howard	15,101	45,874	Winnebago	15,674	67,311
Humboldt	14,694	0	Winneshiek	20,852	135,278
Ida	13,184	4,550	Woodbury	76,057	249,684
Iowa	16,578	55,795	Worth	12,689	31,000
Jackson	21,889	26,300	Wright	18,031	86,570
Jasper	27,850	101,200			
				\$ 2,511,871	\$ 7,383,849

FY 1997 Local Expenditures related to the  
Case Management (C.M.) Program

County	Cost of C.M. Activities	C.M. Revenues	FY 1997 Local Expenses	County	Cost of C.M. Activities	C.M. Revenues	FY 1997 Local Expenses
Adair	\$ 4,805	\$ 2,287	\$ 2,518	Jasper	0	0	0
* Adams			0	Jefferson	0	0	0
* Allamakee			0	Johnson	\$ 2,419	\$ 342	\$ 2,077
Appanoose	0	0	0	Jones	11,050		11,050
* Audubon			0	Keokuk	0	0	0
Benton			0	Kossuth	3,000	2,400	600
Black Hawk	18,778	10,310	8,468	Lee	4,068	1,200	2,868
Boone	5,051	4,293	758	* Linn			0
Bremer	0	0	0	Louisa	0	0	0
Buchanan	7,500	0	7,500	* Lucas	260	0	260
Buena Vista	0	0	0	* Lyon			0
Butler	2,344	0	2,344	* Madison			0
Calhoun	3,462	2,400	1,062	Mahaska	0	0	0
Carroll	3,775	662	3,113	Marion	1,500	1,100	400
Cass	1,222	820	402	* Marshall	1,761	0	1,761
Cedar	0	0	0	Mills	0	0	0
Cerro Gordo	0	0	0	* Mitchell	8,077	910	7,167
Cherokee	950	371	579	* Monona			0
Chickasaw	0	0	0	Monroe	0	0	0
Clarke	1,795	691	1,104	Montgomery	980	120	860
Clay	0	0	0	* Muscatine			0
Clayton	0	0	0	* O'Brien			0
Clinton	12,038	4,975	7,063	Osceola	0	0	0
Crawford	11,405	700	10,705	Page	3,633	0	3,633
Dallas	0	0	0	Palo Alto	0	0	0
Davis	0	0	0	Plymouth	3,139	3,072	67
Decatur	0	0	0	Pocahontas	3,800		3,800
Delaware	2,700	-	2,700	Polk	22,186	7,073	15,113
Des Moines	1,136	780	356	Pottawattamie	0	0	0
Dickinson	Not Reported			Poweshiek	2,924	1,400	1,524
Dubuque	0	0	0	Ringgold	4,246	1,537	2,709
Emmet	235	0	235	Sac	1,500	0	1,500
Fayette	1,149	150	999	* Scott			0
Floyd	0	0	0	* Shelby			0
Franklin	8,102	6,102	2,000	Sioux	0	0	0
Fremont	0	0	0	Story	9,140	420	8,720
Greene	18,274	4,452	13,822	* Tama	326	0	326
Grundy	3,555	740	2,815	* Taylor			0
Guthrie	6,800	4,350	2,450	Union			0
Hamilton	9,999	5,130	4,869	* Van Buren			0
Hancock	4,220	1,782	2,438	* Wapello			0
Hardin	1,838	1,660	178	Warren	0	0	0
* Harrison			0	* Washington			0
* Henry			0	* Wayne			0
Howard	0	0	0	Webster			0
* Humboldt			0	Winnebago	10,000	870	9,130
* Ida			0	Winneshiek	1,431	684	747
Iowa	250	88	162	Woodbury	0	0	0
Jackson	0	0	0	Worth	3,049	1,200	1,849
				Wright	11,250	2,400	8,850
					<u>\$ 241,122</u>	<u>\$ 77,471</u>	<u>\$ 163,650</u>

\* County did not have the Case Management Program in FY 1997.