

AMENDED

ORDINANCE NO. 22-6

AMENDING SECTION 2.51 OF THE OZAUKEE COUNTY CODE OF ORDINANCES -  
2023 HUMAN SERVICES DEPARTMENT USER FEES

An Ordinance amending Section 2.51 of the Ozaukee County Code of Ordinances pertaining to Human Services Fees.

The County Board of Supervisors of the County of Ozaukee does ordain that Section 2.51 of the Ozaukee County Code of Ordinances be amended as follows:

2.51 HUMAN SERVICES FEES

(1) User Fees for the Ozaukee County Human Services Department are established per this policy and managed by the Divisions, as detailed in this policy.

(2) The policy identifies the Human Services Department's usual and customary rates by program that are billable to either consumers and/or insurance plans.

(3) Aging and Disability Resource Center User Fees:

(a) Meals provided to our consumers will be billed at the rates below:

(b) Hot Meal: \$10.29

(c) Frozen Meal: \$5.25

(d) Additional Meal: \$5.25

~~(3)~~ 4 Behavioral Health Division User Fees:

~~(a)~~ ~~Psychiatric Diagnostic Assessment (60 mins): \$250~~

~~(b)~~ ~~Psychiatric Diagnostic Assessment (30 mins): \$125~~

~~(c)~~ ~~Psychiatric Follow up: \$175~~

~~(d)~~ a Advanced Practice Nurse Prescriber (APNP) Diagnostic Assessment (60 mins): \$180

~~(e)~~ b Advanced Practice Nurse Prescriber (APNP) Diagnostic Assessment (30 mins): \$95

~~(f)~~ c Advanced Practice Nurse Prescriber (APNP) Diagnostic Assessment Follow up: Up to \$155

~~(g)~~ d Clinical Social Worker/LPC/CSAC Diagnostic Assessment (60 mins): \$125

~~(h)~~ e Clinical Social Worker/LPC/CSAC Individual Therapy (16-37 mins): \$60

~~(i)~~ f Clinical Social Worker/LPC/CSAC Individual Therapy (38-52 mins): \$80

~~(j)~~ g Clinical Social Worker/LPC/CSAC Individual Therapy (53+ mins): \$110

~~(k)~~ h Clinical Social Worker/LPC/CSAC Family Therapy: \$100

~~(l)~~ i Clinical Social Worker/LPC/CSAC Group Therapy per session: \$40

~~(m)~~ j On Site Urinalysis: \$25

(~~n~~k) Medication Injection: \$25

(4 5) Income Based Fees for Behavioral Health Division:

(a) For clients who are uninsured, have no other funding source, and who present the required documentation, Ozaukee County staff will set a rate depending on the service.

(b) Designated billing staff meet with clients, work with them to support client understanding of their ~~will determine client~~ financial responsibility and cost share, and set a rate for services ~~based on income~~.

(~~5~~ 6) Intoxicated Driver Program (IDP): All clients referred for assessments and safety plan development are assessed and must pay a standard one-time fee:

(a) Ozaukee County IDP Assessment: \$255

(b) This standard fee is non-negotiable and clients will not successfully complete the program unless payment is received in full.

(c) Clients will also be assessed fees for the services listed below.

1. No Call/No Show: \$125

2. Intoxicated at Scheduled Assessment - Must reschedule: \$125

3. Cancellation less than 72 hour notice of scheduled appointment: \$75

4. Amendment/Extension to Driver Safety Plan: \$75

5. Reinstatement of Driver Safety Plan: \$100

6. Victim Impact Panel: \$10

7. Victim Impact Panel No Call/No Show Fee: \$25

(~~6~~ 7) Behavioral Health Contracted Services: including Outpatient and Residential Services:

(a) Ozaukee County's contracted providers set their daily rates, which are comprised of a Room and Board rate and a Treatment rate.

(b) Program costs related to Room and Board: food, housing, utilities, etc., are the responsibility of the clients.

(c) Clients are required to utilize any and all personal financial means to pay the cost of Room and Board.

(d) If a client is unable to meet the cost of Room and Board at 100%, Ozaukee County, depending upon the service provided, and in accordance with DHS Chapter 1, will use the Ozaukee County Monthly Payment Plan Determination Form or the Ozaukee County Cost of Care Worksheet to determine a monthly payment obligation by the client.

(~~7~~ 8) Inpatient Hospital Services Daily Rates:

(a) Inpatient Services are provided by a number of regional private, county, and state hospital systems, who assume responsibility for billing client insurance and client collections.

(b) Ozaukee County is mandated to assume the role of "funder of last resort" when clients are emergency detained under DHS Chapter 51 and placed in Hospital Inpatient Units or one of the State Institutions.

(c) When placement to an Inpatient Unit is determined, crisis staff will collect the required documentation so that Ozaukee County Fiscal staff can determine a client's monthly payment plan in accordance with DHS Chapter 1.

(d) Fiscal staff will use the Ozaukee County Monthly Payment Plan Determination Form to determine a monthly payment obligation by the client.

~~(8~~ 9) Children and Families Division User Fees:

(a) The following identifies Ozaukee County Human Services Department's usual and customary rates by program that are billable to consumers.

(b) For clients who present the required documentation, Ozaukee County staff may set an adjusted rate depending on the service.

(c) Designated billing staff meet with clients, work with them to support client understanding of their financial responsibility and cost share, and set a rate for services.

(d) Children and Families Division User Fees

1. Court Ordered Youth Justice Monthly Supervision Fee: \$75.00/month

~~(9~~ 10) Family Court: Based on the authority granted in WI Statutes, Section 814.615(2), Ozaukee County may charge a fee to conduct a legal custody and physical placement study. Ozaukee County Ordinance 2.49 assigns responsibility for setting fees for legal custody and physical placement studies to the director of family court services. The fee schedule is on file and available at the Ozaukee County Clerk of Court's office.

~~(10-11)~~ Secure Detention Placements:

(a) When youth are placed under Chapter 48 or 948 in a secure detention facility, placements are provided by a number of regional private and county systems who set their daily rates.

(b) Ozaukee County assumes responsibility for billing and client collections.

(c) When placement in a secure detention facility is determined necessary, Ozaukee County will bill the parent or guardian the provider's daily rate. When a payment plan is requested, child protection services and/or youth justice staff will collect the required documentation so that Ozaukee County fiscal staff can determine a client's monthly payment plan.

(d) Fiscal staff will use the Ozaukee County *Monthly Payment Plan Determination Form* to determine a monthly payment obligation by the client.

~~(11~~ 12) Youth Justice Supervision:

(a) Based on the authority granted in WI Statutes, Sections 938.275 (1)(b) and 938.36(2), Human Services may establish a fee for supervision services for youth adjudicated Delinquent or for Youth found to be In Need of Protection or Services.

(b) The Ozaukee County Juvenile Justice program assesses a \$75.00 per month supervision fee for all youth and families in the program.

~~(12~~ 13) Birth to 3 Program:

(a) Parents may be required to share the cost of their child's Birth to 3 services.

(b) The Birth to 3 Program will calculate a parent's cost share based on information provided by the ~~parent~~ family.

(c) Family ~~i~~ncome will not determine a child's eligibility for the Birth to 3 Program.

(d) The cost share is applied to the cost of the entire plan and not individual services. Evaluation, assessment, Individual Family Service Plan development and service coordination are not included in the cost share. ~~D~~etermined at program admission and at the annual IFSP update.

~~(13~~ 14) CLTS/CCOP Parental Payment Liability:

(a) Parental Cost Share/Payment Liability is determined following the development of the ISP (Individual Service Plan) in accordance with DHS Chapter 1.

(b) The payment liability considers size of family, determines daily cost of services, family adjusted gross income, and current federal poverty guidelines.

(c) Families with an adjusted gross at or above 330% of the Federal Poverty Guideline (FPG) will have a cost share. ~~D~~etermined at program admission, at the annual re-determination and when there is a significant change in services on the ISP.

~~(14~~ 15) The fees for services provided by the Ozaukee County Department of Human Services are approved annually by the Ozaukee County Board of Supervisors in compliance with the requirement in DHS 1.03(2) of the Wisconsin Administrative Code.

This Ordinance shall take effect upon enactment and publication.

Dated at Port Washington, Wisconsin, this 2nd day of November 2022

*SUMMARY: Amending Section 2.51 of the Ozaukee County Code of Ordinances pertaining to Human Services Fees for 2023.*

*VOTE REQUIRED: Majority*

HEALTH & HUMAN SERVICE COMMITTEE

**RESULT:** APPROVED [UNANIMOUS]

**MOVER:** A. Watts, Supervisor District 25

**SECONDER:** D. Clark, Vice-Chairperson

**AYES:** D. Irish, D. Clark, A. Watts

**ABSENT:** S. Whitworth

**EXCUSED:** S. Rishel

---

Lee Schlenvogt

CHAIRPERSON - COUNTY BOARD

**ORD. 22-6 As Amended**

Amending Section 2.51 of the Ozaukee County Code of Ordinances - 2023 Human Services Department User Fees

 **Passed By Majority Vote**

Winker		YES
Haas		YES
Jobs		YES
Schlenvogt		YES
Clark	M	YES
Nelson		YES
Matera		YES
Larson		YES
Grabow		YES
Melotik		YES
Wolf	S	YES
Richart		YES
Hagen		YES

Rishel		YES
Maguire		YES
Whitworth		YES
Irish		ABSENT
Stelter		YES
Ross		YES
Godden		YES
Strom		YES
Holyoke		YES
Schoessow		YES
Krane		YES
Watts		YES
Foy		YES