BUDGET ORDINANCE AMENDMENT

Fiscal Year 2023-2024

Alamance County, North Carolina

BE IT ORDAINED by the Board of Commissioners of Alamance County, North Carolina:

Section I. Fees

A. There is hereby established, for the fiscal year beginning July 1, 2023, and ending June 30, 2024, the following fees for services as indicated and amended:

Environmental Health Fees

AOWE – Authorized On-Site Wastewater Evaluator option available per N.C. Session Law 2018-114 (HB347): Regulatory Reform Act of 2018; G.S. 130A-336.2(n)

Improvement Permits (Site Evaluations) -Residential	
\leq 360 GPD (2 or 3 bedrooms)	\$290.00 or EOP/AOWE \$87.00
361-600 GPD (4 or 5 bedrooms)	\$365.00 or EOP/AOWE \$109.00
>600 GPD (6 bedrooms or more)	\$425.00 or EOP/AOWE \$127.00
Improvement Permits (Site Evaluations) – Non-Residential	\$425.00 or EOP/AOWE \$127.00
Septic System/Well Permit Revisions/Revisits	
Permit In-office Revision (no site visit)	\$60.00 or EOP/AOWE \$18.00
Permit Re-visit/Revision (site visit needed)	\$150.00 or EOP/AOWE 37.00
Site Revisit Fee (assessed when the property has not been properly	\$95.00 or EOP/AOWE \$21.00
prepared for staff)	
Authorization to Construct Type I, II, IIIa, c, d, e, f, g	\$275.00 or EOP/AOWE \$82.00
Authorization to Construction Type IIIb	\$510.00 or EOP/AOWE \$153.50
Authorization to Construction Type IV	\$755.00 or EOP/AOWE 226.00
Authorization to Construction Type V	\$1,275.00 or EOP/AOWE \$382.00
Authorization to Construction Type VI	\$2,025.00 or EOP/AOWE \$607.00
PVC Camera Inspection	\$145.00
Temporary Tattoo Permit (time limited for special events)	\$75.00
Swimming Pool Permit (year-round each pool)	\$190.00
Swimming Pool Permit (seasonal each pool)	\$140.00
Swimming Pool Plan Re-review (for additional reviews beyond 1 st two)	\$70.00
Health Clinic	
Admin of Pfizer COVID-19 vaccine (12 yrs & up) (Purple Cap), 1st dose	\$65.00
Admin of Pfizer COVID-19 vaccine (12 yrs & up) (Purple Cap), booster	\$65.00
Admin of Pfizer COVID-19 vaccine (12 yrs & up) (Purple Cap), 2nd	\$65.00
booster	
Admin of AstraZeneca COVID-19 Vaccine, 1st dose	\$65.00
Admin of Pfizer COVID-19 vaccine pediatric (5 yrs through 11 yrs)	\$65.00
(Orange Cap), 2nd dose	
New CH, CE, HC (C60 min)	\$311.00
Est. (Nurse) (C5 min)	\$45.00

 Est. (Nurse) (C5 min)
 \$45.00

 Est. PFH, PFE, SF (C10 min)
 \$78.00

Est. EPFH, EPFE, LC (C15 min)	102.00
Est. DH, DE, MC (C25 min)	\$157.00
Est. CH, CE, HC (C40 min)	\$233.00
New 0-1 year old	\$201.00
New 1-4 year old	\$201.00
New 5-11 year old	\$201.00
New 12-17 year old	\$217.00
New 18-39 year old	\$221.00
New 40-64 year old	\$253.00
New 65+ year old	\$270.00
Est 0-1 year old	\$191.00
Est 1-4 year old	\$191.00
Est 5-11 year old	\$191.00
Est 12-17 year old	\$191.00
Est 18-39 year old	\$196.00
Est 40-64 year old	\$201.00
Est 65+ year old	\$219.00
Preventative medicine counseling and/or risk factor reduction	
intervention (s) provided to an individual, up to 15 minutes	\$32.94
Smoking/tobacco cessation counseling, intermed, 3-10 min	\$16.00
Smoking/tobacco cessation counseling, >10 min	\$31.00
Telephone encounter (Physician/QHP), 5-10 minutes	\$48.00
Telephone encounter (Physician/QHP), 11-20 minutes	\$66.00
Telephone encounter (Physician/QHP), 21-30 minutes	\$103.00
Home visit for postnatal assessment & f/u	\$73.00
Home visit for newborn care and assessment	\$73.00
Home visit for newborn EPSDT	\$73.00
Rocephin (1gm) (UTI)	\$148.00
Depo-Provera (150 mg)	\$79.00
RhoGam/Rophylac	\$134.00
17 Alpha Hydroxprogesterone Caporoate, Bulk Powder, 250 Mg (17P)	\$25.00
Liletta (Medicaid, BCBS or grant funds)	\$87.00
Mirena (Medicaid, BCBS or grant funds)	\$902.00
Paraguard (Medicaid, BCBS or grant funds)	\$469.00
Skyla (Medicaid, BCBS or grant funds)	\$794.00
Nexplanon (Medicaid, BCBS or grant funds)	\$772.00
Rabies pre-exposure	Cost of Vaccine
Rabies administration (each)	\$23.00
College/camp/sports physical (flat fee)	\$55.00
Rabies Titer (Kansas State Lab and shipping charges)	\$200.00
Birth Control Pills (per pack charge)	\$13.00
Maternal Skilled Nurse Visit	\$101.00
STD Screen/Treatment (billed in units of 15 min-max 4/day) RN ONLY	\$23.00
TB/STD Screen/Treatment (billed in units of 15 min-max 4/day) RN	
ONLY	\$23.00

Section II. Effective Date

This budget ordinance amendment shall be effective July 17, 2023.

Section III. Copies of the Ordinance

Copies of this budget ordinance shall be furnished to the Budget Officer, the Finance Officer, and the Clerk to the Board of Commissioners for their direction in the carrying out of their duties. A copy of this budget ordinance shall be maintained in the office of the Clerk to the Board and shall be made available for public inspection.

Amended this 17 day of July, 2023

Chair, Board of County Commissioners

Vice Chair, Board of County Commissioners

Commissioner

Commissioner

Commissioner

Attest:

Clerk to the Board