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Warren County Health Services is
Pleased to present the Annual Report for the Year 2025

VISION:

Healthy People in Healthy Communities

MISSION:

Promote Physical and Mental Health and Prevent Disease, Injury, and Disability
Maximize the Health Potential of all Residents in Warren County

Working together and committed to excellence, we protect, promote, and provide for the health of our citizens through prevention, science, services, collaboration, and the assurance of quality health care delivery.

GOALS:

- Prevent epidemics and the spread of disease
- Protect against environmental hazards
- Prevent injuries
- Promote and encourage healthy behaviors
- Respond to disasters and assist communities in recovery
- Assure the quality provision and accessibility of Health Services in the home and in the community

WARREN COUNTY HEALTH SERVICES TEAM

Warren County communities remain fortunate to have the expertise of our staff. The quality of our Health Care Services is a direct reflection of continual commitment, dedication, care, and knowledge coupled with the excellent team efforts of the following individuals:

Dexter Baker	Stacie DiMezza	Aurelie Montuori
Patricia Belden	Tawn Driscoll	Mary Murphy
Cheryl Bellizzi-Sharron	Dan Durkee	Jolie Navatka-Cross
Katie Boyle	Diana Gillis	Bethany Paquette
Craig Briggs	Dorothy Grover	Nancy Parsons
Jodi Brynes	Dana Hall	Jennifer Rahl
Diane Caldwell	Crystal Harrington	Cassandra Rausch
Kathleen Callaghan	Kaitlyn Jerdon	Jignasha Shah
Gwen Cameron	Ginelle Jones	Isabella Shrestha
Beth Clark	Olivia Jones	Amy-Jo Sokol
Cathy Cloutier	Chawna Joseph	Donald Stack
Olivia Cohen	Emily Lalone	Susan Sylvia
Florence Converse	Janel Martinez	Sara Tarrarn-Casella
Donna Cooke	Erik Mastrianni	Debbie Toolan
Tara Cote	Molly McClenahan	Valerie Whisenant
Diane DeCesare	Robin McLaughlin	Charlene Woods
Marie DeLorenzo	Laura Monroe	

I am honored to be their colleague

HEALTH SERVICES COMMITTEE 2025

Warren County Health Services is governed by the Board of Supervisors who are the legislative body for the county. These individuals constitute the Board of Health according to Chapter 55 of the New York State Public Health Law. The board is responsible for the management, operation, and evaluation of the Health Services Agency.

The Board of Supervisors is charged to perform the following overall functions:

- To appoint a Director of Public Health and Early Intervention Official and a Director of Home Care to provide day to day management of programs
- To provide for the proper control of all assets and funds and to adopt the agency's budget and annual audits
- To enter into contracts with individuals and/or facilities to allow for services or reimbursement mechanisms as needed
- To ensure compliance with all applicable federal, state, and local statutes, rules, and regulations

A subcommittee of the full Warren County Board of Supervisors constitutes the Health Services Committee and advises the full Board of Supervisors regarding Health Services concerns. We appreciate the support of the following county supervisors:

Warren County Board of Supervisors
Health Services Committee Members

David Strainer, Chairman, Queensbury

Deborah Runyon, Thurman
Haley Gilligan, Glens Falls
Daniel Bruno, Glens Falls
Joshua Patchett, Hague
Michael Wild, Queensbury
Frank Thomas, Stony Creek

WARREN COUNTY HEALTH SERVICES
2025 ANNUAL REPORT

PURPOSE OF REPORT: This comprehensive Health Services Annual Report is intended to provide an opportunity to share information with the Warren County Board of Supervisors on the various Health Services Programs as measured by statistical documentation of the services provided. The report further serves to demonstrate a public record of accountability for the various program areas.
It may also serve as a resource document to:

- provide public record of individual program statistical outcomes and specific program explanations
- display trend information
- motivate change
- provide measures for comparisons

LIMITATIONS OF THE REPORT: While the data contained in this document can serve as a useful resource for discussion regarding specific program areas, those who review this report should be aware of its limitations. There are, for example, many intended standards for care provision that are not measured by statistical information. Among such standards are staff attitudes, which have resulted in the development of these goals.

- Each staff person will continually demonstrate the knowledge, understanding, and appreciation for the program team in which they participate, and will continually develop the skills to express their personal talents.

- Each staff person will respect and practice basic civil values and utilize the skills, knowledge, understanding, and attitudes necessary to provide health and educational services to the community.

- Each staff person will maintain the ability to understand and respect people of different race, sex, ability, cultural heritage, national origin, religion; and political, economic and social background; and their values, beliefs, and attitudes.

- Each staff person will continually develop their general career skills, attitudes, and work habits to promote ongoing self-assessment and job satisfaction.

In each of these goals, staff attitudes are critical and directly translate into the quality of services provided to the residents of Warren County.

We are fortunate to have dedicated staff and contractors that contribute to success of all Health Services programs.

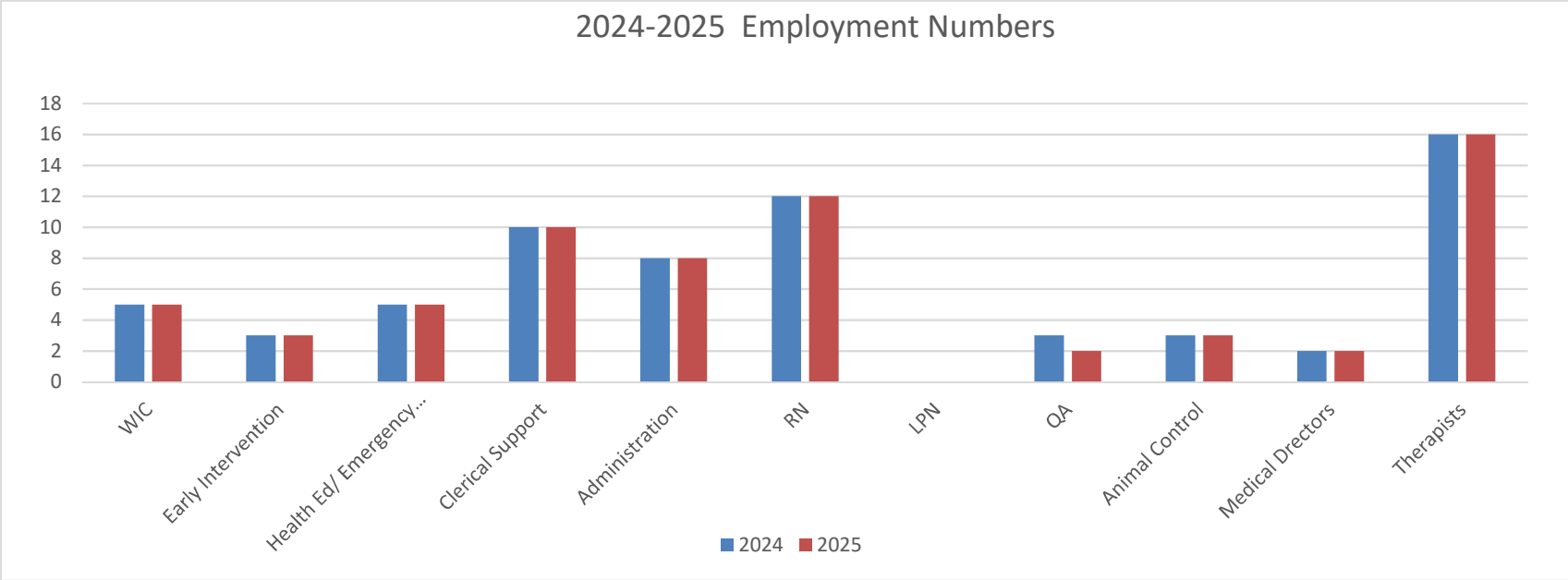
This report covers efforts and services for the past year.

PROFESSIONAL ADVISORY COMMITTEE

The Professional Advisory Committee is a collaborative committee that meets quarterly to review pertinent concerns regarding current Health Services issues. Membership is composed of a cross section of professional disciplines that routinely interface with Health Services initiatives. Specific program updates are provided at these meetings and consensual advice from members is obtained when needed in this forum.

Hillary Alycon - Glens Falls Hospital - Mgr. of Infection Prevention and Control
Paul Bachman MD – Certified Home Health Agency Medical Director
Stephen Bassin – Doctor of Physical Therapy
Patricia Belden – Asst. Director of Public Health
William Borgos MD – Public Health Medical Director
Sara Deukmejian – ARHN Coordinator, Adirondack Health Institute
Tawn Driscoll – Warren County Health Services, Fiscal Manager
Daniel Durkee – Warren County, Public Health Program Manager
Edna Frasier – Community Member
Dorothy Grover – Physical Therapist
Donna Healy – SUNY Adirondack – Prof. of Nursing/Health Sciences Division Chair
Susan Hughes – Dir. Community Maternity Services
Ginelle Jones – Director – Warren County Health Services
Richard Leach MD – Medical Consultant for Infectious Diseases
Christina Mastrianni – Warren County – Commissioner of Social Services
Erik Mastrianni – Warren County – Children With Special Needs Program Manager
Colleen Mazieka – Asst. Director – Adirondack Childcare Network
Deanna Park – Director – Office of Aging
Nancy Parsons – Warren County Health Services – Immunization Program
Valerie Whisenant – Asst. Director – Warren County Health Services
Rob York – Dir. of Community Services – Warren & Washington Counties

FACTS, FIGURES, AND TRENDS FOR HOME CARE & PUBLIC HEALTH



	Full Time	Part Time	Per Diem	
WIC	4	1		
EI	3			
Health Ed/ Em. Prep	4	1		
Support	9		1	
Admin	8			
RN	7	1	4	
LPN	0			
QA			2	
Animal Control			3	
Total Employed	**35**	**3**	**10**	**48**
Medical Director			2	
Therapists			16	
Total Contract			18	

Decrease in contract therapist is due to therapist deciding to become independent providers for CPSE, EI or both. They still provide services in our county.

BUSINESS ASSOCIATES CONTRACTED IN 2025 FOR THERAPY SERVICES

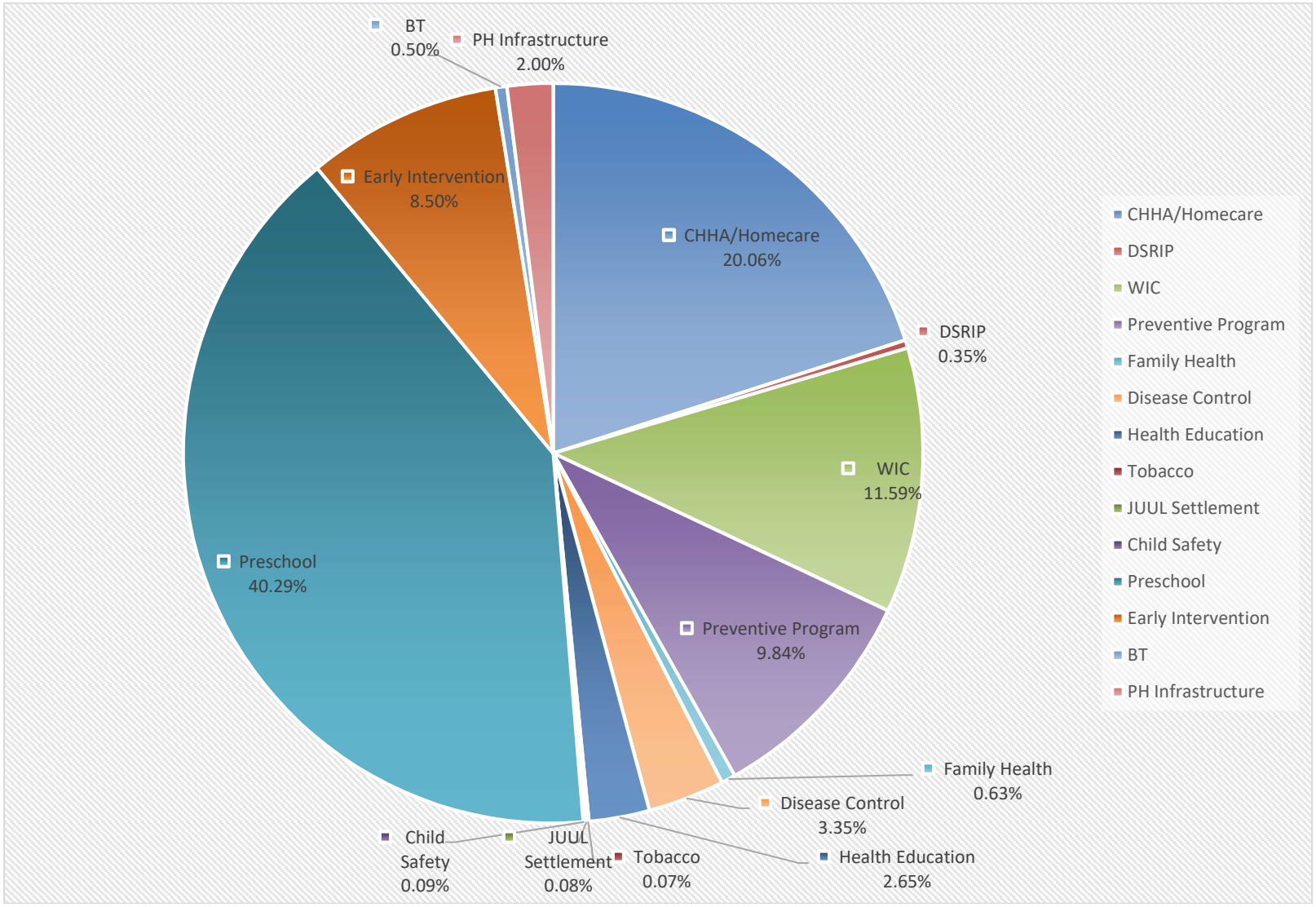
Juliet Aldrich ST
Stephen Bassin PT
Stacie DiMezza ST
Colleen Downing PT
Kathleen Frasier PT
Robert Gautreau PT
Deborah Gecewicz ST
Dorothy Grover PT

Cheryl Hoffis ST
Ellen Kirker PT
Kimberly Lawson OT
Mieka LeClair ST
Catherine Meehan PT
Nora Rubado ST
Jean Szachacz ST
Jennifer Wood OT

Health Services staff consider these people to be dedicated professionals – thanks for a job well done!

** *Many of the pediatric therapist that were previously contracted with Warren County are still providing services in our county but as independent providers*.

Source: Budget Performance Report as of 12/31/2025
Percentage of Expenditures by Program



2025 Total Expenditures: $10,037,302.55

Mandated Programs account for 52.14% of total expenditures (Disease Program, Preschool Program and Early Intervention Program)

WARREN COUNTY HEALTH SERVICES BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR 2025

EXPENSES	2025 BUDGETED	2025 YTD ACTUAL	2024 Prior Year Totals
Salaries - Regular	$2,702,369.00	$2,524,162.22	$2,394,890.21
Salaries - Overtime	$95,700.00	$55,313.47	$67,733.16
Salaries - Part Time	$260,343.00	$138,526.97	$149,849.59
100's PERSONAL SERVICES	$3,058,412.00	$2,718,002.66	$2,612,472.96
200's EQUIPMENT	$463,727.61	$237,013.79	$60,479.35
400's CONTRACTUAL	$6,018,803.45	$5,839,571.97	$5,674,104.27
800's EMPLOYEE BENEFITS	$1,318,439.00	$1,242,714.13	$1,078,188.96
TOTALS	**$10,859,382.06**	**$10,037,302.55**	**$9,425,245.54**

REVENUES	2025 BUDGETED	2025 YTD ACTUAL	2024 Prior Year Totals
	$7,629,564.25	$6,613,984.95	$5,908,533.14
Net Effect to County	($3,229,817.81)	($3,423,317.60)	($3,516,712.40)

In 2025, Total Personal Services were down $340,409.34 or 11.13% from Budget and $105,529.70 or 4.04% above 2024 Salaries. Employees did receive through Union negotiations effective 1/1/25 a 3.00%. Employee Benefits were also down from budget $75,724.87 or 5.74% and $164,525.17 or 15.26% above 2024 expenses. These savings have been primarily due to loss of staff needed for Contact Tracing and Per diem staff. The loss of these positions relates to the decrease in our employee benefits from budget however due to union negotiations we expect fringe to increase over prior year. To also note, our Retiree Health Insurance total cost was $168,243.83 for 2025, an increase of $33,775.63 or 25.12% from prior year and only $7,803.83 or 4.86% higher than anticipated budget.

Equipment of $237,013.79 was above both prior year $176,534.44 while below budget by $226,713.82. This is primarily related to the Infrastructure Grant in which equipment consisted of $200,509.52. We also had $8,518.17 related to Car Seat Grant purchases and $23,175 for a new vehicle. These totaled $232,202.69 or 97.97% of the total purchases for the year.

Contractual expenses were below budget by $179,231.48 or decrease of 2.98% while above 2024 by $165,467.70 or 2.92%.

The Preschool and Early Intervention programs still have Provider shortages. Some children still have been waiting for services. We have worked also with families to provide transportation to their children for reimbursement as much as possible rather than utilizing the transportation vendor. The new transportation contract has become very expensive to utilize their services. In 2025 we had parent transportation total $19,260.71 and the Transportation vendor total was $656,919.

While Revenues did come under budget for 2025, the overall impact to the county was $193,499.79 above budgeted while $93,394.80 below the 2024 impact. The Home Care Division made up 18.83% of this impact, while the Preschool and Ei Programs (which are both mandated) made up a total of $2,820,432.12 or 42.64% of this loss. Also, the Disease program which is also a mandated program had $387,649.79 or 5.86% of this revenue. The reduction of revenues from the Homecare Division continues to be due to an increase in Managed Care Programs (Medicare and Medicaid) that are limiting their number of approved skilled care visits. Also to note, Medicare reimbursement rates continue to decrease. We also have found local hospitals have a Preferred Homecare Provider that receives their referrals first unless the patient specifically requests Warren County or has a discipline that is ordered that the Preferred Provider cannot provide services due to the geographic location of the patient. Within Public Health, we continue to still offer Immunization and Rabies clinics, however fewer throughout the year. It should also be noted, we continue to receive Medicaid revenues for our Preschool and Early intervention programs, which helps offset our reimbursement from the State. The State reimburses at 59.50% for Preschool and 49% for our Early Intervention activities.

WARREN COUNTY POPULATION

Source: NYSDOH Statistical Data

BIRTHS AND DEATHS IN WARREN COUNTY

STATISTICAL INFORMATION
COMPARISON TRENDS

	2021	2022	2023	2024	2025
Births	512	525	490	477	454
Deaths	744	622	633	608	622

Public Health

Prevent. Promote. Protect.

Warren County Health Services
Division of Public Health

PUBLIC HEALTH SERVICES

The definition of Public Health is ever changing and becoming increasingly broader, to encompass many disciplines. The department receives many calls where there are no easy answers or quick fixes for the questions asked or the requests made. Public Health has always responded and helped to address gaps as they present.

Our staff always endeavors to exemplify the essence of Health Services philosophies and missions and each service we provide and question we answer in some way demonstrates the importance of multidisciplinary efforts needed to achieve long lasting positive outcomes for the people we serve.

10 ESSENTIAL PUBLIC HEALTH SERVICES:

1. Assess and monitor population health status, factors that influence health, and community needs and assets
2. Investigate, diagnose, and address health problems and hazards affecting the population
3. Communicate effectively how to inform and educate people about health, factors that influence it, and how to improve it
4. Strengthen, support, and mobilize communities and partnerships to improve health
5. Create, champion, and implement policies, plans, and laws that impact health
6. Utilize legal and regulatory actions designed to improve and protect the public's health
7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
8. Build and support a diverse and skilled public health workforce
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
10. Build and maintain a strong organizational infrastructure for public health

Women Infant and Children Program (WIC) 2025

The Warren County WIC Program is sponsored by Warren County Health Services (WCHS). Our program maintains four full time and three "less than part-time/20 hrs. week" staff comprised of Qualified Nutritionists, Competent Professional Authority, WIC Assistants, WIC Coordinator and a Breast-Feeding Peer Counselor. The main office is located at the Warren County Municipal Center in Lake George NY.

October 1, 2022 marked the start of the new five-year contract between the WIC, USDA, NYS DOH and sponsoring agencies. The fiscal year of 2022-2023 was the first year of the new fiscal grant covering October 2023- September 30th 2028. There are eight WIC clinics held throughout Warren County each month, located in Lake George, Glens Falls, Queensbury, Lake Luzerne, Warrensburg, North Creek and Horicon. Appointment hours span from early morning to evening depending on the clinic. Appointments are also available Monday-Friday from 8 am-4 pm at the Municipal center as needed. More appointment slots outside of normal working hours were added to better suit participant need. Five out of eight WIC sites are located at community sites that also house other participant services such as food pantries, clothing resources and pediatric health services in order to further aid participants with resource access. As of October 2022, WIC staff have returned to conducting clinics in all eight community sites and have adopted a hybrid appointment system consisting of in person appointments at the clinic locations and remote appointments over the phone. All required precautionary safety measures are being taken to prevent the spread of disease and maintain participant health and safety. The NYS DOH determines the yearly WIC budget based on a target monthly caseload of 935 participants or less. During the federal fiscal year 2025 WIC served an average of 2,634 participants, up from 2,046 participants in the fiscal year of 2024.

The online information management system (NYWIC) and an electronic benefit system (eWIC) are fully up, operational and in use during FFY25. NYWIC was rolled out in October 2018 and has since received an extremely positive response from both participants and WIC employees alike. The presence of WIC online has allowed Warren County to more efficiently serve those at satellite clinics as less equipment is required to run clinics, and less physical storage space is needed for participant records. Additionally, the eWIC cards participants now use to purchase groceries at the store have led to a faster shopping experience, less stigmatization at the store and a more convenient utilization of benefits. The WIC2GO and EBT EDGE application (App) for smartphones is also available for participants to download, an easy way for participants to check remaining card balance, WIC approved item list, next appointment time, expiration dates and recent transactions. All of this is geared towards making the WIC shopping experience easier for participants and increasing the retention and expansion of the WIC caseload. The system was constantly being updated and improved to ensure that the platform becomes more efficient and reliable with each coming year. The NYWIC system has made it easier to conduct appointments and issue benefits both remotely and in person during the transition out of the COVID 19 pandemic.

Site	Approximate Average Percentage of Participants per Site 2022	Approximate Average Percentage of Participants per Site 2023	Approximate Average Percentage of Participants per Site 2024	Approximate Average Percentage of Participants per Site 2025
Village Green Apartments- Glens Falls	10%	11%	11%	10%
Main Site- Warren County Municipal Center	38%	37%	37%	41%
North Creek Fire House- North Creek	5%	4%	3%	3%
Horicon Community- Brant Lake	5%	4%	4%	5%
Hudson Headwaters Health Building- Warrensburg	8%	7%	7%	7%
Lake Luzerne Community Center- Lake Luzerne	4%	4%	4%	5%
VFW Post #6169- Queensbury	9%	11%	12%	9%
United Methodist Church- Queensbury	6%	5%	6%	CLOSED
First Baptist Church- Glens Falls	15%	16%	16%	12%

The focus area of Warren County WIC in FFY254 was increasing WIC community awareness, increasing the number of referrals received from the community and improving breastfeeding promotion and support. Several different community agencies that have a cross population with WIC. These agencies included TANF, the Counsel for Prevention, Catholic Charities, Fidelis, BHSN, MVP, Alliance for Positive Health, Head start, Cornell Cooperative Extension, The Salvation Army and the Warren County Medicare/Social Services Department. It has been helpful to reestablish contact and refamiliarize WIC staff and the staff from outside community agencies about the respective programs. Community Agencies were sent invitations

to come share referral information with WIC staff, during these meetings there were opportunities for both the community organization representative and WIC staff to ask questions and discuss services provided by each agency. The goal for 2025 was to reach out to and collaborate with agencies to provide cross-referrals for WIC and other programs that may be beneficial to our community members and to communicate with participants the new, improved and upcoming services in Warren County.

This branch of WIC works with numerous agencies throughout the area in effort to provide resources and referrals to participants. In 2023 Warren County WIC was able to participate in a variety of in-person outreach groups and committees. These include the NYS breastfeeding coalition, HENSAC meetings and the Cornell Cooperative Extension Parent Ambassador Group. Other community partners that WIC has fostered relationships and worked with during 2025 are as follows; Fidelis Cares, MVP, Cornell Cooperative Extension Parent Ambassador Coalition, NYS Breastfeeding Coalition, CDPHP, SNAP, RSVP, the GFH Smoking Cessation program, the Warren-Washington Head Start Program, Cornell Cooperative Extension, Planned Parenthood, Child Protective and Preventative Services, BOCES, the Glens Falls Farmers Market, Glens Falls Hospital Baby Cafe and the numerous food pantries in the area.

For 2025 the latest collaborations had been with Essex Food Hub and Adirondack Action Fair Food Card Program.

Essex Food Hub has been interested in setting a footing in Warren County. In January 2025, they were able to collaborate with Warren County Health Services WIC through NY Foods for NY families grant to provide fresh produce bags to 5 WIC families bi-weekly. As of September 2025, they were able to secure a grant through the Mother Cabrini Foundation, through which 10 WIC families will receive fresh produce boxes/ fully prepared meal kits bi-weekly (with Box 3 being the family choice of fresh produce or a ready meal kit). This program runs from January 1st 2026 – September 30th 2027. As part of the program, families received an early holiday gift which included an appliance like air fryer, slow cooker or microwave along with serving bowls, cutting board and adult and kids knives etc.

Adirondack Action reached out for collaboration with the WIC office back in the fall of 2025. Their Fair Food Card Program 2026 helps to provide 15 enrolled WIC families access to healthy, local foods by giving them $100 credit card per month (similar to and EBT card) to shop for fresh produce at designated local farms, farmers markets, farm stores, food hubs, and select grocers (approved vendors). This cash card needs to be used every month, the money does not carry over to the following month. ADK Action prefers for families to shop their meat/dairy list from this card due to the high prices. ADK Action provides technical assistance in case of any issues. The program runs from January 1st 2026 through December 31st 2026.

By collaborating with these agencies and participating in these committees, WIC creates a “One Stop Shop” environment tailored towards participants who have limited time, transportation or knowledge of services in the community and allows them have access to a variety of services while at their WIC appointments. In 2025 obtaining up to date health assessment information has been a core value of WIC, whether participants choose to come in person to clinics or choose over the phone appointments. To help facilitate this focus, WIC is also now participating in and developing various

health awareness campaigns both remotely and in person. Examples include sending home lunchboxes, toddler utensils and other incentives that are easy to mail, attending community health fairs, tabling at the farmers market, participation in national nutrition and breastfeeding months, and maintaining a social media presence in order to disseminate health and nutrition education. Now that clinics are hybrid (in person and over the phone), WIC provides toothbrushes for Children's Dental Health Month, measuring cups for National Nutrition Month and many more incentive items throughout the year to participants who come in to clinics. These educational items are accompanied by corresponding educational displays and handouts developed by staff. Additionally, WIC also provides a student learning environment for nursing and dietetic students from SUNY ADK, Empire State College and Russell Sage College.

Per the County, the amended Budget allocated to WIC for 2025 was $1,196,806.50 Expenses for 2025 totaled $1,162,967.54. Food voucher values given to us from the State for WIC total was $700,014.42. This was booked as both a Revenue and Expenses in the WIC General Ledger. Also, to note for the 2025 Grant year, we were able to bill $54,071.91 in indirect costs to the State for the County's administration of the program. WIC did close the United Methodist Church site in June 2025. We may revisit the plan to close more sites in 2026.

CHILD FIND

The Child Find Program is a statewide program to assure that children, ages 4 months to 3 years, are identified through periodic developmental screenings to receive the help and services needed for the best growth and development in their early years. Children can be referred based on their birth history/diagnosis, and/or by MDs, parents, or other social service and health professionals with concerns regarding the child's development. Funding for this program is received through an annual contractual grant with the New York State Department of Health. Children in the program are screened 2-3 times per year. Referrals to the EI Program are based on the screening results.

Since the major publicity efforts associated with the Child Find and Early Intervention Programs, parents and other service providers have a heightened awareness to developmental expectations for children and want them monitored, some children may not meet eligibility criteria for Early Intervention Services, thus Child Find continues to be a very cost-effective program and allows a great deal of opportunity for parent education. Physicians, pediatricians, and family practices in Warren County are very invested in the Child Find Program because of the ability the educator has to do screenings in the home. Much documentation between Child Find educator and physician is evident in this program. New York State Department of Health encourages physicians to do developmental screens on children during routine comprehensive well child care. Unfortunately, some of the most high-risk children do not see physicians regularly for preventive care, only episodic acute care for illness. Thus, the important service provided by the Child Find educator must be continued as a valued part of the Child Find Program.

YEAR	CHILDREN SERVED
2021	42
2022	48
2023	80
2024	41
2025	46

	2021	**2022**	**2023**	**2024**	**2025**
New Admissions	31	40	48	39	37
Developmental Screenings Completed	45	66	80	78	81
Referrals to EI Completed	14	11	15	13	10
Discharged With Normal Development	10	8	10	7	13

** From mid-February 2020 through mid-May 2021 Child Find screening were completed through a questionnaire over the phone with parents. These numbers do not represent the total number of referrals but the number of children that were enrolled in the program.

EARLY INTERVENTION PROGRAM

The Early Intervention (EI) Program is a federal and state mandated program that provides a variety of services to eligible children with significant developmental delays or certain diagnoses, from birth to age three. All referred children receive a multi-disciplinary evaluation at no cost.
Referred children work with an Initial Service Coordinator (ISC) from Public Health, who reviews the program with the family, completes intake process, schedules evaluation, and is part of the team that recommends appropriate services.
Eligible children receive an Individual Family Service Plan (IFSP) that details the child's current level of functioning, their needs, services recommended, and goals/outcomes.
Ongoing Service Coordinators (OSC) then work with the eligible children and their families to secure the recommended services, check on progress and/or ongoing needs, provide other resources to families, and eventually transition to other appropriate programs. The IFSP is reviewed every 6 months by the family, providers, and ongoing service coordinator.

EARLY INTERVENTION SERVICES

Speech Therapy
Physical Therapy
Assistive Technology Devices and Services
Parent Counseling + Training
Respite
Audiology
Occupational Therapy
Special Instruction
Social Work
Nutrition Services
Vision Services
Psychological Services

Eligibility

To be initially eligible for the EIP based on developmental delay:

- a child must be experiencing a 12-month delay in one or more functional areas; **or**,
- a 33% delay in one functional area or a 25% delay in each of two areas; **or**,
- if standardized instruments are used during the evaluation process, a score of at least 2 standard deviations below the mean in one functional area or a score of at least 1.5 standard deviations below the mean in each of two functional areas.

  - Physical Development
  - Cognitive Development
  - Communication
  - Social or Emotional Development
  - Adaptive Development

EARLY INTERVENTION COSTS

There are no out-of-pocket costs to families in the Early Intervention Program. Services are covered by Medicaid for children with Medicaid or Managed Medicaid plans. Until 2022, private insurance was also billed, although the reimbursement rate for private insurance was typically at around 10%. In 2022, insurance companies began to pay into a "pool" to cover eligible children with private insurance. New York State is billed directly by service providers, and pays them directly for any services not covered by Medicaid. Since April 2013, all counties pay into an escrow account to cover the county-share (51%) of these costs. NYS covers 49%. Counties also receive an EI Administration Grant to help fund staffing and other non-reimbursable costs.

EARLY INTERVENTION STATISTICS

	2020	2021	2022	2023	2024	2025
Referrals Received	117	138	220	251	184	195
Children Served	161	180	190	218	198	142
Dollars Received From NYS	$169,984.28	$53,674.83	$164,056.69	$145,845.40	$61,170.56	$212,674.64
Dollars Received From Medicaid	$28,139	$6,370	$3,912.74	$20,536.95	$7,576.01	$11,123.22
Dollars Received from Escrow	$2,305	$78	$0	$0	$0	$1,930.11
Dollars Received From EI Grant	$24,644	$19,678	$48,566	$36,570	$44,599.65	$32,937.81
Dollars Received From Private Insurance (For EI Svc Coord Only)	$0	$0	$0	$0	$0	$0
All Expenses Before Reimbursement	$526,256.07	$593,667.29	$674,788.71	$722,814.61	$853,468.65	$853,518.05
Amount of Expenses Appropriated (budgeted, total- amended numbers)	$724,411	$629,821.21	$740,478.69	$798,083.41	$868,605	$867,199
Expenditures For County After Reimbursement Received	$301,183.79	$513,866.46	$458,253.28	$519,862.26	$740,122.43	$594,852.27
Average Cost to County Per Child Served	$1,870.71	$2,854.81	$2,411.86	$2,384.69	$3,737.99	$4,189.10
Births in County	480	512	525	490	477	454

Source: General Ledger Journals and cash journal for 1/1/25-12/31/25

Note: The EI Escrow account, established 4/1/13, continues to be a working system. Vendors are first paid directly by Insurances and Medicaid and then the balances are paid through the Escrow account which is then paid by the County. Expenses will now reflect only the net amount paid from this Escrow account and any internal charges that the county approves for payment. In 2025 we serviced 142 children, compared to 198 in 2024. This is a mandated program. The cost per child has gone up to $4,189.10 for 2025. It should be noted, cost per child is skewed because the calculations are based on actual cash received throughout the year and expenses noted on the General Ledger are for the year and the number of children served. Expenses have slightly increased in 2025. Warren County no longer receives payments from insurances. However, does receive Medicaid for Service Coordination and is paid as a vendor through Escrow. The revenue for the therapists contracted through Warren County Home Health Care (CHHA) division, is reflected through the CHHA, while expenses paid through the Escrow goes through EI and is billable to the State. Cash received in the year is directly deposited to the CHHA for services related to the therapists who are paid directly through the CHHA. The cost per child served will vary depending upon the reimbursement potential.

Committee on Preschool Special Education (CPSE)

Children 3-5 Years Old

The Committee on Preschool Special Education (CPSE) is a mandated program available in all school districts in New York State. Potentially eligible children are referred to the CPSE in the child's school district. Parents are given the list of approved evaluators for Warren County and select the agency they wish to evaluate their child.

Following the evaluation, the CPSE meets to discuss results, determine eligibility, and address the child's needs. A representative from Warren County attends all CPSE meetings as a member. Recommendations for services are made at that time if eligible. All eligible children are identified as a "Preschool Child With a Disability". Specific classification does not occur until the child is school age. Preschool special education services are voluntary, and have no cost to the family.

CPSE services are billed by providers directly to Warren County. County funds are used to pay providers directly. Warren County attempts to bill Medicaid for eligible children for services, programs, and transportation. NYSED reimburses Warren County 59.5% for costs.

CPSE budget and payment processes are extremely complicated and not timely. It takes much dedication on the part of many county staff to assure all reimbursement measures are pursued and accurate paperwork is submitted to NYS Department of Education and the Medicaid office on a timely basis.

PRESCHOOL PROGRAM

	SCHOOL YEAR Ending 2021	SCHOOL YEAR Ending 2022	SCHOOL YEAR Ending 2023	SCHOOL YEAR Ending 2024	SCHOOL YEAR Ending 2025
All Children Served	299	323	374	397	398
Services Only	262	266	293	326	331
Evaluations Only	37	57	81	71	67
Tuition Program/ Evaluations/ Therapies Costs Approved	$2,442,012.29	$2,278,794.49	$2,624,737.44	$2,717,023.09	$2,898,689.63
Tuition Program/ Evaluations/ Therapies Costs **Paid**	$2,661,561.71	$2,441,271.03	$2,354,123.39	$2,564,694.92	$2,648,290.79
Transportation Costs Approved	$481,268.33	$372,276.24	$471,774.57	$647,819.80	$656,919.00
Transportation Costs **Paid**	$461,691.55	$406,429.60	$450,419.38	$567,782.35	$633,661.66
Average Cost Per Child Before Reimbursement based on Costs Paid	$10,445.66	$8,816.41	$7,498.78	$7,890.37	$8,246.11
Amount of Medicaid Received	$184,111.27	$244,710.25	$270,066.11	$181,353.06	$297,553.51
Amount State Aid Received	$1,899,562.93	$2,220,695.10	$1,503,049.02	$603,943.06	$2,252,574.92
Amount received for Administrative Costs paid to Schools & Reimbursement for County Administrative costs	$141,070.02	$119,581.15	$118,942.50	$27,900	$247,643.34
Administrative Costs **Paid** to School Districts each year	$18,662	$287,546.56	$1,69,585.66	$194,436.81	$261,614.38
Program Costs After Reimbursement	$1,039,579.06	$382,295.28	$1,031,427.64	$2,347,181.15	$1,005,480.20
Average Cost Per Child After Reimbursements**	$3,476.85	$1,183.57	$2,757.83	$5,912.30	$2,526.33

SPECIFIC SCHOOL DISTRICT DATA

***Source: General Ledger/Accounts Payable Reports, Cash Receipts Journal, Budget Performance Report & Preschool Reports, 1/1/25-12/31/25**. (Based on Preschool code .444 only)

Cost per child does not include expenses or reimbursements related to Administrative Costs to School Districts. It is strictly related to services only, such as Tuition Therapy, Evaluations, and Transportation. The cost per child is somewhat skewed due to the fact that the calculation is based on cash in/cash out for the year. For 2025, the program cost per child was $2,526.33. We served 398 children in 2025 compared to 397 in 2024. The cost per child is less than the previous year due to reimbursement from the State being more this year. Payments from the State are not always consistent. Expenses such as tuition, therapy and transportation is dependent on the needs of the child. Since this is different for each child, it makes it difficult to budget. Due to increased costs, we have had more parent transportation being reimbursed. In 2025, Parent transportation costs totaled at $19,260.71 and Durrin transportation costs totaled $656,919. We only receive 59.5% back on expenses billed to the State for Preschool activities. Medicaid reimbursements for 2025 were $297,553.51 which is higher than the previous year while we received $2,252,574.92 in State reimbursement and $216,593.34 for reimbursement of School Admin costs and $31,050 in County Admin costs. We continue to work diligently to bill Medicaid for those children that are eligible. We are also able to bill the State for School Administrative Costs and received the 59.5% reimbursement allowed. We were able to bill the State $75/child, which is the maximum allowable rate for the Count for Administration of the program. We are experiencing a provider shortage and there are less classes being offered. Children who could not receive related services were given a recommendation to receive therapy in the home or daycare. Transportation costs have gone up due to the higher rates outlined in the new contract. Many children are also being transported at a further distance for services since a local vendor closed their preschool program in 2023.

PRESCHOOL-CHILDREN QUALIFYING FOR AND RECEIVING SERVICES 2025
(Does not include children receiving evaluation services only.)

SCHOOL DISTRICT	School Year 2020-2021	School Year 2021-2022	School Year 2022-2023	School Year 2023-2024	School Year 2024-2025	School Year 2025-2026
Abe Wing	12	13	15	17	17	19
Bolton	2	2	4	2	1	5
GF City	80	68	73	90	109	103
Hadley Luzerne	14	14	20	15	15	14
Johnsburg	9	11	8	5	7	6
Lake George	9	8	5	9	10	13
No. Warren	19	14	16	12	8	9
Queensbury	116	113	106	123	140	140
Ticonderoga	0	0	0	0	2	3
Warrensburg	24	17	18	19	17	18
Minerva	1	1	1	0	0	1
Schroon Lake	0	0	0	0	0	0

Administrative Costs Paid to School Districts During 2025	
	23/24 SY Paid 2025
GF City	$95,504.00
GF Common	$15,792.00
Hadley Luzerne	$17,296.00
Johnsburg	$7,520.00
Lake George	$9,024.00
North Warren	$14,288.00
Queensbury	$97,678.38
Schroon Lake	$752.00
Warrensburg	$18,048.00
Ticonderoga	$752.00
TOTAL	**$276,654.38**

Rate Reconciliations**	2022	2023	2024	2025
School Years Paid For	19/20 & 20/21 & 21/22	18/19, 21/22 & 22/23	18/19, 21/22 & 23/24	22/23, 23/24, &24/25
Paid Out to Providers	$19,391.20	$15,970.56	$20,481.46	$15,266.82
Received from Providers(credits)	$766.96	$32.77	$0	$0

Budget Appropriation for Contractual Services (Amended Budget)	
2021	$3,150,919
2022	$2,961,299
2023	$3,223,000
2024	$3,594,699
2025	$3,890,549

***Administrative Costs for 2023-2024 from school districts were paid in 2025 which totaled $276,654.38. Not all school districts submit Administrative costs to the New York State Education Department for reimbursement approval, however more and more have recently submitted vouchers for reimbursement from the counties. Without State Education approval, School Districts cannot bill the Warren County. Often by the time they are approved by the State Education Department, the numbers actually reflect previous school years. These are only reimbursed at 59.50%.**

****Rate reconciliations recorded for 2025 are reflected above for school years 2022 to 2025 totaled $15,266.82. Providers are able to bill the County up to three times to adjust their rates. Paid out to Providers are the amounts extra we were billed because their rates were recalculated and went up. Source: General Ledger and Accounts Payable reports from 1/1/25-12/31/25.**

CHILDREN and YOUTH WITH SPECIAL HEALTH CARE NEEDS PROGRAM (CYSHCN)

A Historical Perspective

For children with special health care needs, the effects of lack of access to health care are felt more keenly than the general childhood population, resulting in increased morbidity and mortality and decrease quality of life.

In New York State, it is estimated that between 800,000 and 1.6 million children have special health care needs. These children account for the majority of pediatric health care expenditures in New York State.

In October 1996, the Commissioner of Health appointed a CSHCN work group to determine what role state and local public health agencies should play in improving the system of care for CSHCN. The work group discussed the key issues associated with the delivery of health care that impact CSHCN and their families:

- Lack of insurance or lack of comprehensive insurance for CYSHCN
- Enrollment of CYSHCN in managed care
- Multiple service needs of CYSHCN
- Supportive services that families need to help them cope with caring for a child with special health care needs
- Involvement of parents as partners in improving the systems of care for CYSHCN

The work group discussed the necessary elements of a comprehensive, integrated private and public health system that would improve the health of CYSHCN by addressing the key issues.

The work group adopted the following definition of children with special health care needs: Children with special health care needs are those children 0-21 years of age who have or are expected to have a serious or chronic physical, developmental, behavioral or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.

New York State has a long history of concern for the health of all children including those with special health care needs. The health department's involvement with children with disabilities dates back to polio clinics held in the beginning of the century.

The state is committed to continuously improving the infrastructure for delivery of health services to mothers and children. A major focus of this infrastructure building is the developing of the system's capacity to:

- Regularly report on the health status of CYSHCN
- Ensure access to medical homes for CYSHCN
- Develop local capacity to address comprehensive needs of CYSHCN
- Assist families in accessing the necessary health care and related services for their CYSHCN
- Develop a partnership with families of CYSHCN that involves them in program planning and policy development.

New York State Department of Health continues to provide funding to counties to facilitate the Children with Special Health Care Needs (CSHCN). Counties are responsible for submitting quarterly data to the NYS Department of Health that identify the types of children's health problems involved with children participating in the PHCP. The goal is to identify "gaps" with insurance coverage for children's services i.e. what types of things are not covered by insurance plans and what is the resultant impact on the involved child's health.

The CYSHCN staff at New York State Department of Health continues to be available to assist when children's insurance companies deny payment for services that are needed by the child. This program has the potential to identify important gaps in children's health services.

In Warren County, children are placed directly into appropriate programs (i.e. Child Find, Early Intervention) and managed by applicable staff which better meets individual needs. This appears to be a working system. Additionally, we offer informational programs for parents with specialists such as speech and occupational therapists. Parents have the opportunity to sample and borrow materials that may support them in promoting children's development. CYSHCN staff regularly attend Webinars in order to collaborate with other counties throughout the state to ensure that we have the latest information and share ideas. We attend quarterly meetings with a regional support staff for CYSHCN Initiative to develop a Family Engagement Plan.

Health Education

Warren County Public Health has seen its Health Education programs expand since 2024. In an age of misinformation, a commitment to accurate and trustworthy information is essential. The Health Education program strives to bring relevant, timely and accurate information to all our Warren County residents. To maintain trust and reach our audience, Health Education staff has increased our presence at community events, increased participation in community workgroups and taskforces and enhanced communication through newsletters, social media and in-person engagements.

Accomplishments/Highlights of 2025

2025 – 2030 Community Health Assessment & Improvement Plan Completed – The purpose of the Warren County Community Health Assessment & Improvement Plan is to provide a framework to guide population health improvement strategies for the next six years. The plan is flexible meaning that opportunities to adapt or completely change health improvement strategies exist should priorities shift due to changes in funding, resource availability, state/federal guidance and other factors outside of local public health control.

The CHA/CHIP brought together a diverse group of people and organizations each with their own unique perspectives about our community to identify health priorities in Warren County. Priorities include housing stability and affordability, anxiety and stress, primary prevention (substance misuse and overdose prevention), and childhood behavior. The full report is available online or by request to the Public Health Department.

Colorectal Cancer Campaign – In the fall of 2024, Public Health purchased a large inflatable walk-through colon to increase awareness about colorectal cancer. In 2025, Public Health was able to reach the public with colorectal messaging and a very visible display. The colon was put on display at 5 events in Warren County and through a lend lease program was loaned out to the Cancer Services Program (CSP) of Warren, Washington, and Hamilton Counties for 2 additional events. The colon was also loaned to the Essex County Public Health Department and was on display at the Essex County Fair. The colon has helped educate the public about colorectal cancer and the steps that can be taken to prevent and treat this disease.

Car Seat Program Expansion - (see additional pages)

Naloxone Distribution Program – Public Health staff worked with community partners to provide free naloxone emergency kits at multiple locations throughout Warren County. In addition to the community events, Public Health staff worked with Alliance for Positive Health on a pilot program that would bring emergency naloxone training high school seniors that would be leaving for college or entering into the job market. The program was designed to help students leaving high school be better equipped to handle potential overdose situations they may encounter while transitioning into adulthood. These students may be living away from home for the first time or enter workplaces where they likely have little experience and have limited access to parental support. The program was presented in one school district and will be promoted in greater intensity in 2026.

Supplemental Food Distribution Partnership for WIC Families – Partnered with Essex County Food hub to provide supplemental food boxes (include fruits, vegetables, meats, cheese, yogurt and more) to 10 WIC families on a bi-weekly basis throughout the year. Families in need were identified by WIC staff.

Health Education Programs - Announced and implemented the official transition from "Tar Wars" to "Be Smart, Don't Start!" as the primary tobacco and nicotine prevention program. This change emphasizes the increased popularity of vapes over conventional tobacco products. The program also encourages students to explore the environmental and community impact of current nicotine device trends. The program is based upon Stanford's tobacco prevention toolkit.
Increased the number of bicycle safety education programs across both youth and adult populations.

Tick Reporting and Education – In the spring of 2025 Public Health launched a new tick reporting website. Public Health staff partnered with Warren County Planning staff to build the GIS site that allows community members to report their tick encounters. **557 tick encounters were reported in 2025** all throughout Warren County and in a few other locations. The tick reporting website was promoted in person with flyers, through social media online, in doctors' offices, and through multiple news outlets. The goal was to locate tick "hot spots" and raise awareness about tick populations in Warren County so residents and visitors can take precautions before visiting those areas. Public Health will continue to promote the tick reporting website and educate the community about tick bite prevention and tickborne illnesses in 2026.

School Classroom Presentations
School-based health education programs remained a strong outreach component of the health education program. Health educators provided 182 core classroom programs in 2025 and had 4386 student contacts. See table for breakdown (does not include non-core presentations).

Topic	Grades	Classes	Total Students	Notes
Bus/Pedestrian Safety	Pre K – 5th	11	184	
Dental Health	Pre K – 5th Grade	25	447	
Heart Health	Pre K – 5th Grade	16	249	
Handwashing/Hygiene	Pre K – 5th Grade	15	332	
Injury Prevention	Pre K – 5th Grade	15	362	
Nutrition	Pre K – 5th Grade	13	226	
Personal safety/Child Abduction	Pre K – 6th Grade	2	50	Taught by grade level not individual class
Poison Prevention	Pre K – 5th Grade	20	332	
Ticks & Lyme	Pre K – 5th Grade	7	165	
Tobacco/Vaping	4th – 12th Grade	31	1561	
Sun Safety	Pre K – 5th Grade	18	373	
HIV/AIDS	9th – 12th Grade	9	135	
Totals		182	4386	The "total students" does not represent individual students. Instead it shows the number student contacts. Students often participate in more than one class topic.

Community Engagements
Health education staff were part of 32 different community events including health fairs, community events and tabling events. See the table below for details for our largest events. Event attendance ranged from as few as 2 to over 100 people.

Topic	# of Events	# of Interactions	Notes
Cancer Screenings/ Prevention	5	325	In 2025 Public Health debuted the Colon Cave at locations throughout the county to raise awareness about colorectal cancer.
Tick & Lyme Disease Prevention	9	300+	Includes 6 tabling events, 3 community presentations and informational table at an annual hike-a-thon event in Lake George where over 100 people took information.
General Health Information Events	15	400+	Includes health fairs, kid's days, mental health events, Multiple health topics were covered at these events.
Fall Prevention	2	150+	Information provided at the annual Office for the Aging Senior Picnic and one additional senior health fair.
Health Literacy	1	5	This is a new program developed by our health educator. Hopefully there will increasing interest as the program becomes established.
Naloxone Programs	5	50+ (31 kits distributed)	Not all interactions resulted in distribution of a naloxone kit. Events included community tabling, ACC back to campus event, and a high school program for HS seniors

In addition to the direct community engagements and classroom programs, Health Education staff attended 63 planning, workgroup and networking meetings. Staff also attended 14 training and education programs covering topics such as Child Passenger Safety Seat Technician training, Harm Reduction Symposium (Opioid), Psychological First Aid Train-the-Trainer, Data Systems Utilization and more. These meetings were used to enhance knowledge, increase understanding of community resources and strengthen partnerships.

Continuing Community Partnerships

Warren & Washington Counties Breastfeeding Coalition	Domestic Violence Community Coordination Council (DVCCC)
Community Health Assessment and Improvement Planning Committee	Cancer Services Program
Warren County Employee Wellness Committee	Warren County Employee Safety Committee
Warren County Climate Change Taskforce	Adirondack Rural Health Network (ARHN)
Mental Health / Addiction Recovery Subcommittees (Joint Meetings)	AHI Topics on Tobacco Coalition
Warren and Washington County Food Pantry Coalition	Long-Term Care Council
Warren/Washington County Opioid Overdose Taskforce	Commercial Tobacco Use Reduction Network
Glens Falls Hospital Health Promotions Center	Adirondack Rural Health Network
Essex County Food Hub – WIC Supplemental Food Box Program	Adirondack Food System Network
ADK Action – Fair Food Card Program	

Outlook for 2026

<u>New Initiatives for 2026</u>

Health Education

- Develop and implement at least 1 large JUUL Settlement Anti-Vaping Funding Project
- Create program for 4th-6th grade students covering social media safety/ mental wellbeing
- Increase the number of health education topics available to our senior citizen population
- Outreach to participating educators for feedback on current programs
- Create new interactive Tickborne illnesses resources.

Warren County WIC

- Formalize an agreement with Essex County Food Hub to continue to provide supplemental food boxes to WIC families in Warren County. This project will last at least two year. Instead of randomly picking WIC families every two weeks to receive the boxes WIC will identify at least 10 families that will receive supplemental boxes on a regular basis.
- Partnering with ADK Action on the Fair Food Card Program. This program provides 10 WIC families (as identified by WIC staff) with pre-paid $100 debit cards that can be used to purchase meats, cheeses, yogurt and other products from participating farms. The cards are refreshed monthly, but do not accumulate unused funds. These cards are not redeemable at grocery stores or non-participating locations. Additionally, the program hopes to expand the number of farm locations that participate to make redeeming the cards easier.

For information about the Warren County Public Health Education program please contact Dan Durkee, Public Health Program Administrator by email durkeed@warrencountyny.gov or by phone 518-761-6580.

Child Passenger Safety Program

Warren County Health Services applied for and received grant funding to start The Child Passenger Safety Program, also known as The Car Seat Program, from the Governor's Traffic Safety Committee (GTSC) Highway Safety Grant Program in Fall of 2024. The goal of the program is to reduce the incidence of injuries among children due to incorrect car seat use and installation by the owners through car seat distribution, car seat installation checks, and education.

2025 Program Accomplishments:

- 1 staff member completed a rigorous 3-day training to become Certified Child Passenger Safety Technician
- Conducted 53 car seat checks
- Hosted 4 car seat check events (Queensbury, Chestertown, Warrensburg)
- Distributed 40 car seats to families in need

The car seat check program is open to anyone and is not limited to parents/guardians. Car seat checks are completed by appointment only and are limited to Warren County residents. Participants are educated on their car seat's proper installation, use, and maintenance. Before leaving the check, families install their car seat under the guidance of the technician. Car seat distribution is based on need and financial eligibility. Participants may be eligible to receive a car seat if they live in Warren County and qualify for Head Start, SNAP, Medicaid, WIC, or other financial assistance programs.
Warren County Health Services applied for and was successful in receiving a second year of grant funding running October 1st, 2025 – September 30th, 2026. This renewed funding will allow staff to continue to serve the community. From October 2025-February 2026-

- 15 car seats have been distributed
- 13 car seat checks have been conducted for families mainly through appointment-based seat checks.

Goals for 2025-2026
Goal 1: expand car seat check awareness training programs among EMS/ Fire Departments through our Office of Emergency Services (OES) department.
Goal 2: Extend support to our partners at Warren County Sheriff's office by providing them car seats to distribute if they come across a family in need of one.

LEAD POISONING PREVENTION PROGRAM 2025

Warren County has a Lead Poisoning Prevention Program funded by a NYSDOH $36,800 grant. Key components of the program include education, screening, and follow-up. A Public Health Nurse is responsible for submitting the annual work plan and quarterly/annual reports.

Lead poisoning can cause damage to the neurological system. Lead exposure at low levels has been known to cause anemia, growth and development deficiencies, mental impairment, irritability, and hyperactivity. Decreased IQ scores have also been associated with lead exposure. High levels can be severe and cause seizures, coma, and death.

Lead exposure is preventable if common sources are known. In addition, routine screening (blood tests) can diagnose cases prior to onset of symptoms, providing an opportunity to remove the hazard before serious complications. Prevention and screening are the focus of educational efforts.

Education: Health care providers are contacted annually to encourage screening and reporting of cases. Childcare providers are educated on lead, possible sources, and screening requirements. Parents are targeted through associations, health fairs, and informational calls to Public Health. Many pamphlets are available.

Screening: NYSDOH and CDC require lead testing (blood test) for all 1 and 2-year olds for lead exposure. Medical care providers are encouraged to test children 6 months to 6 years old with risk of lead exposure and are required to test all 1 and 2-year olds. Child care providers are encouraged to educate parents on lead screening if the child has not been screened prior to enrollment. Public Health will make arrangements for the test and cover the cost if there is a financial hardship preventing the family from getting a child tested.

Follow-up: All children are tracked in the NYSDOH Web-based LeadWeb system. All labs are entered in the system electronically which updates the program as results are received. In October of 2019 New York State public health law was amended to lower the definition of an elevated blood level in a child to 5mcg/dl.

- Lead level 0-5mcg/dl: A letter is mailed when results are received in addition to a reminder letter when the child is 2 years old
- Lead level 5mcg/dl or greater: An elevated letter and educational packet is sent. A reminder letter is sent every 3 months for retest until the child is considered stable (2 consecutive blood test results separated by at least 6 months, that are less than 5mcg/dl)
- Lead level 5mcg/dl or greater confirmed. Same as for 5 level with the addition of a phone call to family to complete a lead risk assessment and exposure history. A home visit is also offered for education and prevention information and an environmental referral to NYSDOH for lead testing of the home.

Services offered by Public Health are at no cost to the family. The Lead Poisoning Prevention Program provides a great service to the community especially to affected families. Despite educational efforts, services are not fully utilized. Referrals are received from a variety of sources i.e. parents, medical care providers, child care providers, Head Start, WIC, other Public Health programs, Well Child/Immunization Clinics.

LEADWEB DATA

BLOOD LEAD SCREENING TESTS	2020	2021	2022	2023	2024	2025
0 - < 5	1046	879	1173	1068	1153	1132
5 - <10mcg/dl	72	50	62	61	64	68
10- <15mcg/dl	5	15	15	17	9	14
15- < 20mcg/dl	3	2	4	5	3	4
20- <45mcg/dl	1	0	18	5	3	1
>45mcg/dl	1	0	5	1	1	0
TOTAL ELEVATED RESULTS (includes fingersticks)	82	67	104	89	80	87
Confirmed Elevated	14	10	19	15	4	18

(Note: The elevated numbers reflect the highest lab result, per child for specified year.)

Warren County Public Health Emergency Response Planning

Warren County Public Health has been able to maintain its emergency readiness and response capabilities despite an increase in workload and flat funding. Staff have been cross-trained in several preparedness response activities increasing our ability to respond should an event occur without having to increase staffing levels. Like most small partial service health departments, Warren County Public Health relies on strong community partnerships to meet the readiness and response needs of our communities.

The biggest concern heading into a new year is the threat to federal and state funding. Without financial assistance from federal and state partners it would likely fall to local tax payers to keep the program operational.

Meeting New York State DOH OHEP and Federal Mandates

- Completed the required updates to the Public Health Asset Distribution Plan (PHAD).
- Completed the NYS Office of Health Emergency Preparedness, Core Deliverables and Annual Preparedness Surveys.
- Participated in multiple required online training webinars for various preparedness topics.
- Attend 4 mandatory quarterly Health Emergency Preparedness Coalition meetings.
- Completed the ServNY Volunteer Management clean-up and volunteer credential checks.

Drills & Exercises

- Participated in 10 tabletop exercises conducted by Glens Falls Hospital.
- Participated in 5 NYS Office of Emergency Preparedness tabletop exercises. Topics included chemical exposure, biological agents, mass casualty incident and a medical surge.

Real World Events/Networking

- Participated in a regional Disaster Mental Health workshop sponsored by the New York State Office of Mental Health. The workshop was designed to begin building a framework outlining how local health departments and local mental health units could work together during large scale emergencies to provide mental health support in the immediate aftermath of an event. The workshop also discussed the need for a plan for addressing the long-term mental health impacts from a large-scale traumatic event.
- Preparedness staff attended a psychological first-aid train-the-trainer course which allows preparedness staff to teach a psychological first aid course to community members and preparedness partners.
- Preparedness staff attended the County Emergency Preparedness Assessment review to provide input from a public health perspective.
- Completed fit testing for all Warren County Health Services homecare and public health nurses.
- Convened quarterly EPR/LEPC Committee meetings to strengthen local response networks and to provide situational updates across different preparedness disciplines.

- Attended 10 monthly Emergency Preparedness Coordinators meetings.
- Provided a training for daycare providers at the Southern Adirondack Childcare Network Annual Conference.
- Served on a NYS OHEP Family Reunification workgroup.

2026 Outlook

As the political discord in the US continues to grow so does the uncertainty of things like federal funding assistance and possibly resource allocation should a real-world event were to occur. Our preparedness staff will continue to update plans, participate in local and State level preparedness drills and exercises as staff time and funding allows.

Our preparedness staff will continue to participate in workgroups at the State and local level to ensure a constant state of readiness should a public health emergency occur. Preparedness staff will also work with local and state partners to strengthen already existing relationships and foster new ones.

Finally, Warren County Public Health will continue to cross train all public health staff in vital areas of preparedness including National Incident Command Systems/ICS (NIMS/ICS), medical countermeasure distribution and dispensing, crisis and risk communications, respiratory protection, and psychological first aid to name a few.

Questions about the Warren County Public Health preparedness program can be sent to Dan Durkee at durkeed@warrencountyny.gov .

COMMUNICABLE DISEASE CONTROL

INFECTION CONTROL EFFORTS

Warren County Health Services works closely with physicians, health centers, and Glens Falls Hospital to encourage and ensure timely reporting of laboratory confirmed and or clinically suspected cases of reportable communicable diseases. The agency also works in collaboration with the district office of the New York State Department of Health. A Public Health Nurse follows up with clients either by telephone or home visits, to offer information and assistance to ensure appropriate treatment of infected individuals and prevent exposure to contacts as appropriate, therefore protecting the health of the public. Occasionally Warren County incurs the costs of necessary medications if the individual has no other payment source and out of pocket expense is a financial hardship. Clients are also followed to ensure tests of cure are done if indicated by the specific disease. Appropriate and timely reports are made to the New York State Department of Health. Infection Control Committee meetings are held periodically with the Preventive Program Medical Advisor to review infection control protocols and policies.

Health Services has agency-wide Infection Control, Exposure Control, and Respiratory Protection Plans in place. Staff reviews these plans annually.

These Diseases Are Reportable, However There Were No Recent Positive Lab Tests for Them in Warren County

Anthrax	Hepatitis A in Food Handler	Psittacosis
Botulism	Hepatitis B (in pregnancy)	Rubella
Brucellosis	Listeriosis	Rubeola
Chancroid	Lymphogranuloma Venereum	Tetanus
Chikungunya	Malaria	Toxic Shock Syndrome
Cholera	Measles	Trichinosis
Diphtheria	Meningitis (bacterial)	Tularemia
Encephalitis	Mumps	
Hantavirus Disease	Plague	

DISEASE REPORTED FROM LABORATORY CONFIRMATION

DISEASE ENTITY	*2021*	*2022*	*2023*	*2024*	*2025*		*DISEASE ENTITY*	*2021*	*2022*	*2023*	*2024*	*2025*
Amebiasis	0	0	1	0	0		Lyme Disease*	30	197	272	270	434
Anaplasmosis*	76	57	63	75	148		Meningitis (viral)	1	0	1	0	0
Babesiosis*	5	6	16	14	41		Pertussis	0	0	0	1	0
Campylobacteriosis*	8	12	17	18	26		Rock Mountain Spotted Fever*	0	0	3	1	1
Candida Auris	0	0	0	0	1		RSV	0	0	100	95	146
Chlamydia*	122	143	133	116	101		Salmonellosis	4	5	2	7	11
Cryptosporidiosis*	1	0	1	3	2		Shigellosis	0	1	2	0	4
Cyclospora	0	0	1	0	0		Strep Group A, Invasive*	3	4	15	8	8
Dengue Fever	0	0	0	0	2		Strep Group B Invasive*	7	9	8	2	8
E. Coli*	5	1	2	3	1		Strep Group B Invasive, early	0	0	1	0	0
Ehrlichiosis*	0	0	0	3	1		Strep Pneumo Invasive, sensitive	2	2	0	0	0
Giardiasis*	6	4	7	13	2		Strep Pneumo Invasive, unknown*	0	1	10	10	8
Gonorrhea	31	21	40	29	25		Swine – Origin Influenza	0	7	8	15	84
Haemophilus Influenzae Invasive not B	1	3	1	2	1		Syphilis, early latent	3	0	0	0	0
Hepatitis A	0	0	0	0	1		Syphilis, early, non-primary/secondary*	0	0	0	1	0
Hepatitis B (acute)	0	0	1	0	1		Syphilis, primary	1	2	3	0	2
Hepatitis B (chronic)*	6	2	2	5	1		Syphilis, secondary*	0	0	1	2	0
Hepatitis C (acute)*	4	5	3	1	2		Syphilis, late or unknown duration*	0	1	1	5	3
Hepatitis C (chronic)**	28	27	32	51	39		Tuberculosis	0	1	1	0	0
Hepatitis C (perinatal)*	0	0	0	1	2		Varicella*	0	0	0	4	0
Influenza, A	38	825	196	419	974		Vibriosis	1	1	0	0	1
Influenza, B	18	26	30	117	177		West Nile Virus	0	0	0	0	2
Influenza, Unspecified	85	1348	552	593	101		Yersiniosis*	1	3	7	2	6
Legionellosis	0	0	2	0	2							

*case count includes confirmed, probable, and suspected cases
**case count includes confirmed, probable, suspected, and Ab+&RNA- cases

RABIES PROGRAM

Warren County has a Rabies Prevention Program that follows up on all animal bites/exposures, provides rabies pre-exposure immunizations, provides approval for rabies post exposure vaccination, approves rabies specimen testing, serves as a resource for providers and the community, and offers rabies vaccination clinics for pets. All animal bites/exposures are mandated by Public Health Law to be reported to the victim's county of residence.

Rabies law requires dogs, cats, and ferrets all be vaccinated against rabies by four months of age. Counties must offer at least one rabies clinic every four months. Warren County offers approximately 6 rabies clinics from April through October. Any pet involved in a bite/exposure is required to stay at home for a ten-day confinement period. Alternatively, the pet may quarantine at an approved facility, such as a veterinarian's office at the owner's expense.

Warren County continues to diligently strive by public education efforts and ongoing communication with medical providers, animal control officers, and veterinarians, to assure that the public health is protected as related to rabies.

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BITES REPORTED BY MONTH

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2021	21	11	19	22	24	28	21	32	20	16	10	12	228
2022	9	12	9	25	22	22	24	20	18	20	14	7	202
2023	21	9	18	22	21	19	32	23	22	16	20	11	234
2024	13	10	12	16	9	19	22	16	17	19	15	15	183
2025	11	11	16	14	8	15	22	20	19	16	12	12	176

Warren County Public Health
Rabies Program

2025

Town	Different Address Owner/Victim *Follow up by Town ACO				Same Address Owner/Victim * Follow up by Public Health				Out of Town Owner *Follow Up by Public Health				Strays or Unknown Owner Follow Up by Public Health • Vet's Office • Victim Offered Rabies PEP • Euthanized and tested			
	Cats		Dogs		Cats		Dogs		Cats		Dogs		Vet	Treated with PEP	Refused PEP	Euthanized & Tested
	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD	UTD	NOT UTD				
Bolton			1				1				1				1	
Chester			2			2						1		1	2	
Glens Falls			1	3	2	6	7	8					1	1	3	
Hague																1
Horicon						1	1	1						1		
Johnsburg			2	2		1	1				1					1
Lake George			2				3	2			2	1		4	1	
Lake Luzerne							1	1			1			1		
Queensbury			17	10	5	3	15	13		2	2	4	1	4	6	2
Stony Creek																
Thurman				1												
Warrensburg		1	1	2		4	2	3							2	
Totals		**1**	**26**	**18**	**7**	**17**	**31**	**28**		**2**	**7**	**6**	**2**	**12**	**15**	4

*UTD- Up to date
*PEP- Post exposure prophylaxis

WARREN COUNTY RABIES PROGRAM STATISTICS

	2021	2022	2023	2024	2025
Confirmed Rabid Animals	1 skunk	2 fox 1 bat	1 Fisher	0	2 bats, 1 raccoon, 1 skunk
Animal Specimens Submitted for Testing	37	37	34	28	33
Animal Bites	228	202	234	183	176
Patients Receiving Pre-Exp. Vac. (3 Injections) or Booster Vacc. Fee: $415 per dose	1	0	1	3	1
Patients Receiving Post-Exp. Vac. Series @ GF Hosp. (All RIG and First Injections are Given at GF Hospital)	35	31 13 refusals	31 19 refusals 4 boosters	47	58
Patients Receiving Post-Exp. Vac. Series @ P. Health (All RIG and First Injections are Given at GF Hospital)	0	0	0	1	2
Animal Clinics	**5**	**6**	**6**	**6**	**6**
Animals Receiving Rabies Vaccinations	**280**	**393**	**509**	**536**	**473**

	2024	**2025**
Expenses paid in relation to Rabies Program	$28,550.83	$38,197.06
Amount vouchered to New York State (Max allowed)	$17,852.53	$17,253.00
Rabies Clinic Donations	$3,968.00	$4,414.00
Total program cost to Warren County	$13,884.53	$16,530.06
Percentage of Expenses covered by Revenues	76.43%	56.72%

Note: Data above reflects both actual expenses incurred and actual cash received at clinics and amounts vouchered to the State for 2025. Overall, we were able to cover 56.72% of all rabies costs in 2025. Costs to the county are skewed because we paid some expenses on behalf of patients but not all expenses have yet to be received, therefore we are unable to submit those expenses to the state until the file is closed and all expenses have been received and paid. Also, to note, expenses we were not able to claim will be carried to the next grant year to be submitted once the file is closed. In 2025, the cost of the Animal Clinics were covered by donations. No clinics were billed the first quarter of 2025 since we had not clinics scheduled. We can bill for the animal specimens and shipments, animal clinics and human rabies vaccines. We find with the human vaccines; most patients have insurance therefore the hospitals/facilities are able to bill for these services and this reduces the cost to the County. However, if a patient does not have health insurance, the local hospital will discount the first dose of rabies vaccine at the Medicaid rate and the patient in than referred to the Public Health office for the remaining three or four doses of the vaccine. The difficulty is when we need to coordinate care for patients/billing with those facilities that are out of our area. All these can be billed to the State once received an paid.

TUBERCULOSIS PROGRAM

PPD testing is offered by appointment, HHHN is the contractual medical consultant for the program and follows those individuals needing treatment who do not have their own physician. Warren County Health Services provides payment for preventive therapy medication for individuals who convert or have active tuberculosis and have no insurance to cover the cost of medication. Warren County maintains an agreement with local pharmacy whereby the agency is billed at the Medicaid rate for the medications. This is done in attempt to assure compliance with prescribed treatment.

YEAR	INDIVIDUALS TESTED	POSITIVE CONVERTERS	ACTIVE TB CLIENTS DURING YEAR
2021	17	0	0
2022	14	0	1
2023	8	0	1
2024	15	0	2
2025	8	0	0

Amount Paid for Tuberculosis Medications/Expenses	
2021	$0.00
2022	$0.00
2023	$1,916.50
2024	$0.00
2025	$0.00

Warren/Washington County's STD Clinic Report 2025

A STD/HIV/TB Clinic is held weekly by appointment only. This clinic is shared by Warren and Washington Counties. Although counties are encouraged to bill insurance companies, clients have indicated they would not want their insurance utilized. (i.e. are not comfortable with insurance EOB's being sent to their homes). Costs are eligible for 36% state aid reimbursement.

HIV/Hep C testing is also performed at the clinic. The HIV clinic counselors are from the HIV/Ryan White program under the sponsorship of Hudson Headwaters. Any positive test is referred immediately for verification and follow-up care.

STD clinic routinely tests for gonorrhea, chlamydia and syphilis for all clients. These specimens are taken to the Glens Falls Hospital Laboratory and are billed to Warren County Public Health at the Medicaid rates. The New York State Department of Health is notified of any positive test and is in direct communication with Warren County Public Health regarding treatment and "follow-up" care.

The age range of the participation at the clinic remains from teenagers to the elderly, specifically in 2025 the age range was 22-58 yrs.

The number of clients has been declining steadily over the past five years, but the clinic remains a valuable resource to the community and to those in need of services.

Prevention is stressed at the clinic. Condoms, supplied by NYS, are available for no charge at the clinic.

The clinic is staffed by one nurse and one provider.

In 2023 we entered a contract with Hudson Headwaters Health Network to ensure provision of a medical provider for the clinic.

HIV and STD (SEXUALLY TRANSMITTED DISEASE) CLINIC

	2019	2020	2021	2022	2023	2024	2025
Clinics Held	44	5	1	0 **	7	9	9
Participants	96	13	2	3	5	11	10
Males	72	12		2	3	10	6
Females	24	1		1	2	1	4
Age Range	18-71	19-73	48-50	21-74	22-63	21-65	22-58
Warren Co. Participants	53	7		3	3	8	8
Washington Co. Participants	20	5		0	1	2	0
Saratoga Co. Participants	19	1		0	1	0	1
Other County Participants	4	0		0	0	1	1

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DISEASES WITH POSITIVE TEST RESULTS

DISEASES	2019	2020	2021	2022	2023	2024	2025
Genital Herpes	0	0	0	0	0	0	0
Genital Warts	1	0	0	0	0	0	0
Chlamydia	3	0	0	0	1	0	2
Gonorrhea	0	1	0	0	0	0	1
Syphilis	4	1	0	0	1	0	1

Our STD clinics are by weekly by appointment only. In 2025 we served 10 clients.

PERINATAL HEPATITIS B PREVENTION PROGRAM

Hepatitis B is a vaccine-preventable virus that affects the liver. It is transmitted through contact with infected blood and body fluids. Hepatitis B during pregnancy can put the baby at risk for contracting the virus, which could cause a life-long, chronic infection.

Women are routinely screened for Hepatitis B as part of prenatal bloodwork during every pregnancy. In the event a pregnant woman tests positive for Hepatitis B, the lab results are sent to the Local Health Department (LHD) where the mother resides. The LHD then works with the birthing hospital to ensure that the infant will receive proper treatment after birth. Within 12 hours of delivery, the baby receives Hepatitis B Immune Globulin (HBIG) and the first dose of the Hep B vaccine series. Two more doses are given at one month and six months of age. At 1 years old, a blood serology is done to determine the level of antibodies the infant has from vaccination. If there are adequate antibodies, the case will be completed. If there are insufficient antibody levels, the infant will either need a booster dose or complete the whole vaccine series again. This will prevent or reduce the child's chance of contracting Hepatitis B.

There were **0 cases in 2025** of pregnant women identified as Hepatitis B carriers in Warren County.

When infected pregnant women are identified, they are followed through pregnancy and up to a year after delivery by the LHD.

The LHD's role in preventing perinatal Hep B includes:

- Providing case management to ensure completion of the vaccine series and post-vaccination serology for the infant
- Providing education and follow up for all other potential contacts of the mother

The goals of this program are to promote healthy pregnancies and prevent transmission of Hepatitis B.

IMMUNIZATION ACTION PLAN

The Immunization Action Plan (IAP) is a project between NYSDOH, CDC and LHDs that works to reach specific immunization goals. LHD's must meet accountability standards each year. The IAP project runs in 5-year periods, in 2025 falls within the 2023-2028 5-year project cycle.

Objectives for the IAP project:

1.) Childhood immunizations:
    a. Increase immunization rates for all children 24 months and older
    b. Increase HPV immunization rates for adolescents
2.) Perinatal Hepatitis B Prevention (see Perinatal Hep B Prevention Program page for details)
3.) Increase Adult Immunization Rates
4.) Reduce disparities among special/underserved populations at risk for low immunization rates
5.) Improve county-wide New York State Immunization Information System (NYSIIS) accuracy and completeness

To achieve these goals, Warren County Public Health works closely with health care providers, schools, day cares, hospitals, community agencies, and statewide organizations.

Project Highlights:

- Warren County 2025 4:3:1:3:3:1:4* rate was 74.57% (76.79% in 2024)
- Warren County 2025 HPV vaccination coverage among boys and girl aged 13 years old increased to 34.82% (30.52% in 2024)
- 99.79% of childhood immunizations were entered into NYSIIS by all providers in Warren County in 2025
- There were 0 Perinatal Hepatitis B cases in 2025 to follow up on
- Completed Immunization Quality Improvement for Providers (IQIP) strategies with multiple pediatric providers
- Annual school nurse meeting – provided up to date immunization information and an opportunity to clarify immunization requirements
- Assisted many school nurses throughout the school year with ensuring students are up to date on required vaccinations to prevent school exclusions
- Mailed immunization requirements and education to day care providers
- Mailed immunization education to adult immunization providers and conducted in-person visits to multiple provider offices to offer support and education on adult immunizations
- Warren County Public Health staff completed many trainings specific to encouraging timely vaccinations
- Participated in an immunization coalition with Washington, Saratoga, and Hamilton Counties that meets quarterly
- 24-hour monitoring system of our vaccine storage units via Digital Data Loggers, continues as a safety mechanism for the viability of all vaccines.
- Promotion of immunizations for all age groups continues on the Warren County Public Health Facebook page and website, at health fairs and other events. Distribution of educational material to local groups and organizations continues throughout the year and as requested

**4:3:1:3:3:1:4 childhood immunization series includes: 4 DTaP, 3 polio, 1 MMR, 3 hep B, 3 Hib, 1 varicella, 4 PCV13*

INFLUENZA CLINICS 2025

In 2025 Warren County ordered 430 doses of flu vaccine. This year's Flu vaccine was a Trivalent compilation due to the FDA's decision not to continue to vaccinate against the B/Yamagata strain since it hasn't been detected since 2020. 210 doses of Trivalent and 200 doses of High-Dose for the over 65 population and 20 doses of FluBLOK was ordered. The prebook for this order was done with the thought that we would be able to do outreach clinics for the community and Walk- in Clinics open to the public. We had VFC and VFA Flu vaccines available to give to those who qualified for government funded vaccines. FluBLOK was pulled by the manufacturer so we did not have any to administer this season.

For the 2025 Flu Season we held 3 staff vaccine clinics. We held clinics at 8 sites to include Solomen Heights, Lake Luzerne Senior Center, Johnsburg Senior Meal site, Northern GI, Warren County Municipal Employees and the Glen, The Terrace and Memory Care Unit at the Glen.

The attendance at all of our clinics was consistent. As we review the clinic numbers again this year we will schedule the 2026-2027 season accordingly. The challenge for Public Health continues to be to know how much vaccine to have available and how much staff to schedule for clinics.

Our continued goal for the 2026-2027 season will be to encourage higher rates of influenza vaccine, regardless of where it is obtained and to promote the use of the immunization registry (NYSIIS) by all parties involved.

INFLUENZA VACCINE ADMINISTRATION

	2020	2021	2022	2023	2024	2025
Clinics Offered Throughout the County	3	6	8	17	18	12
Vaccine Doses Administered at Clinics	153	182	141	247	307	297
CHHA/Long Term Home Visits for Administration	11	8	5	9	2	10
Homebound Visits for Administration	0	5	29	6	6	7
Miscellaneous Administration i.e. PH Appointments And Other Home Visits	0	0	102	26	0	29
Total Doses Administered	164	195	277	288	315	340

BLOOD PRESURE CLINICS 2025

Warren County Public Health Clinic Nurses serve three senior meal sites for Blood Pressure Clinics and they coincide with the serving of the noon meal. We also visit The Glen at Highland Meadows for a Blood Pressure Clinic. We have a very positive response to being out in the community. We did B/P checks for the Senior Health Fair in September serving over 200 people.

Blood pressures are taken by the public health nurse. Often, the nurse has been seeing the client for many months so that she is able to observe changes in blood pressure, appearance and state of mind. A strong feeling of caring is developed between the nurse and the client which extends a level of trust. There are times when a client is advised to see their doctor immediately because of a dramatic change in blood pressure of because of a physical complaint that the client is hesitant to take to a doctor. These clinics are very well received by the participants.

Partial reimbursement is received from Office of the Aging to compensate for the nurse's time.

BP Clinic Site	2019	2020	2023	2024	2025
Bolton Meal Site	17	**	**	**	**
Chester Meal Site	35*	**	**	**	**
Cronin High Rise	70	13	**	**	**
Johnsburg	93	15	56	46	51
Lk.Luzerne Meal Site	101	19	89	73	65
Presb. Church (GF)	26	4	**	**	**
The Glen	**	**	44	69	54
Solomon Heights	49	12	48	72	50
Stichman Towers	20*	3	**	**	**
Warrensburg (Senior Picnic)	50	9	**	24	17
Glens Falls Expo					27
Qsby Senior Fair					17
TOTALS:	**494**	**75**	**237**	**284**	**281**

**No longer doing B/P screening at that site

QUALITY ASSURANCE

Public Health has a three level Quality Assurance Program.

- Level 1 utilizes the standard Chart Component List. Staff ensures the charts are complete prior to discharge. The Deputy Director monitors a random sample to ensure charts are complete at discharge.
- Level 2 utilizes peer input with the intention of sharing creative interventions amongst staff and streamlining documentation.
- Level 3 utilizes subjective input from community referral sources on appropriateness of services and care rendered to families.

Additional Activities

1. Consultants – Annual audits by record and pharmacy consultants.
- Pharmacy- May 20, 2025 Pharmacy Consultant completed audit. Any deficiencies noted in report have been corrected.
2. Medical Director – Provides overall oversight to QA program and completes peer reviews to medical providers in STD program.
3. Satisfaction Questionnaires – Clients and providers complete annual questionnaires. No concerns reported.
4. Logs:
    - General Complaints – 2025, none received
    - HIPAA/FERPA Complaints – 2025, none received
    - Fire/Disaster Drills –
        - 2025- 1 fire drills
        - 1 shelter in place
          1 duck and cover
          1 false fire alarm
        - 2025 Accident/Incident Reports – 3 incidents reported / no injuries.

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2026 GOALS

1. Resume with the current QA Program.
2. Continue to encourage staff to assist with annual review of policies and procedures.
3. Continue to focus on program QA reports of Logs, Incident Reports/STD/CDC/WIC.
4. Start to focus and incorporate UR Committee in strategic planning process.
5. Oversight of Infection Control policies, procedures and incidents.

DIVISION OF HOME CARE

HOME CARE SERVICES

Philosophy: We at Warren County Health Services believe that the health of individuals and their families as they relate and interact in their community plays a vital role in the health care needs. Home Care recognizes the importance of psychological and physical wellness and attempts to correct the circumstances that interfere with the greatest degree of wellness that a person can achieve. The agency respects the autonomy of the patient and family to make decisions and choices affecting their present and future health status.

Home Care is patient centered, outcome oriented, and dependent on a multi-disciplinary multi-agency collaboration.

Goals: As a Certified Home Care Agency we provide skilled nursing, physical, speech and occupational therapy and home health aide services to the residents within Warren County on an intermittent basis under the direction of a physician.

The ultimate aim is to instruct and to support the patient and/or family self-care and disease management and to support care transition interventions to minimize avoidable complications. Our Homecare Professionals provide health guidance to all ages so that individuals, families, and the community will be helped to achieve and maintain optimum health; collaboratively recognizing that the patient is the driving force of his/her healthcare.

With the recognition that the patient is the driving force of his/her healthcare, our professionals work collaboratively to empower the patient, understanding that homecare is not a one size fits all.

The agency participates in ongoing assessment together with other providers and consumers of healthcare services in Warren County. They shall use this information to affect appropriate program planning under the direction of the Board of Supervisors acting as the Board of Health, with the assistance of the Professional Advisory Committee.

QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PROGRAM
QAPI

Warren County Health Services Division of Home Care is committed to providing quality health care to all of its clients. The process by which our client outcomes are monitored is through the Quality Assurance Performance Improvement Program (QAPI). The Quality Assurance team is the hub of our agency's QAPI process. The Quality Assurance team is led by the Assistant Director of Patient Services who collaborates with the administrative and clinical leadership to effectuate a successful and regulatory compliant program. The Quality Assurance team fosters a culture within the agency that promotes a daily commitment to continually improving quality of care for our clients. This team empowers clinical staff to build quality improvement processes into daily work activities.

The QA team is daily reviewing current Home Health Compare data, Process Measure data and OASIS assessment data for accuracy. The implementation of the Agency's standards of care is continually monitored through our Chart Committee meetings. When the Chart Committee identifies a process as needing enhancing or revision the QA team will address. All personnel employed by our Division of Patient Services play an integral part in our Quality Assurance Performance Improvement Program.

The following reports note our achievements comparing our Certified Home Health Agency (CHHA) to other CHHA's at the State and National levels.

The results of the agency's Quality Assurance Performance Improvement program for 2025 are as follows:

- **Home Health Compare Results/Process Measure Outcomes**

- **Home Health Consumer Assessment of Healthcare Providers and Systems (HHCAHPS):**

  This survey is a Federal requirement for all CHHA's. The survey needs to be conducted by an outside independent agency that is certified by Centers for Medicare and Medicaid Services (CMS) to do the standardized survey. We have a contract with Strategic Health Plan (SHP) for this service. The survey has 3 Composite Measures:

  1. Care of Patients
  2. Communications Between Providers and Patients
  3. Specific Care Issues: Home Safety Issues, Medications regarding schedule and side effects, and Pain

SHP **VBP Preview 2025+**

(337045) Warren County Health Services

01/01/2025 - 12/31/2025

Report Date: 02/04/2026

41.75 56% **Total Performance Score (TPS) and Rank**

Value Based Purchasing (VBP) Measures		Your SHP Score (01/2025 - 12/2025) Eligible	Your SHP Score (01/2025 - 12/2025) Score	CMS Large-Volume Baseline Threshold* (Median)	CMS Large-Volume Baseline Benchmark* (90th% Avg)	Your CCN Baseline Score**	Points Achievement	Points Improvement	Points Care Points	Points National Rank	Weight	Weighted Care Points
Improvement in Mgmt of Oral Meds	(Risk Adj)	305	**80.81%**	85.18%	98.75%	82.70%	0.00	0.00	0.00	15%	9.0%	0.00
Improvement in Dyspnea	(Risk Adj)	292	**68.65%**	89.67%	99.42%	75.20%	0.00	0.00	0.00	16%	6.0%	0.00
Discharge Function Score		321	**71.65%**	• 62.35%	83.18%	82.48%	4.47	0.00	4.47	34%	20.0%	8.93
OASIS-Based Total									**4.47**	**14%**	**35.0%**	**8.93**
Potentially Preventable Hospitalization		114	**12.28%**	10.00%	6.30%	8.14%	0.00	0.00	0.00	43%	26.0%	0.00
Discharge to Community	(Risk Adj)	*(CC 10/25)*	*96.91%*	• 85.16%	• 95.09%	• 92.25%	10.00	9.00	10.00	99%	9.0%	9.00
Claims-Based Total									**10.00**	**74%**	**35.0%**	**9.00**
Care of Patients		378	**95.89%**	• 89.51%	• 94.59%	• 94.00%	10.00	9.00	10.00	99%	6.0%	6.00
Communications		446	**90.50%**	• 86.82%	93.19%	93.00%	5.77	0.00	5.77	78%	6.0%	3.46
Specific Care Issues		523	**87.50%**	• 82.37%	91.30%	• 87.00%	5.74	1.04	5.74	79%	6.0%	3.44
% who Rated Agency 9,10		99	**93.16%**	• 86.33%	94.69%	95.00%	8.18	0.00	8.18	90%	6.0%	4.91
% who would Recommend		99	**93.03%**	• 80.23%	• 91.39%	• 93.00%	10.00	0.00	10.00	99%	6.0%	6.00
HHCAHPS-Based Total									**39.69**	**94%**	**30.0%**	**23.81**
Total Performance Score (TPS)												**41.75**

• Baseline scores outperformed

*CMS Baselines sourced from CY 2025 Implementation Performance Report (IPR) published July 2025
- OASIS-based measures: 01/01/2023 - 12/31/2023
- Potentially Preventable Hospitalizations: 01/01/2023 - 12/31/2023
- Discharge to Community: 01/01/2022 - 12/31/2023
- HHCAHPS-based measures: 01/01/2023 - 12/31/2023

**Your CCN Baselines sourced from:
- OASIS-based measures:
- Mgmt of Oral Meds & Dyspnea: Care Compare (Dates match IPR 01/01/2023 - 12/31/2023)
- Discharge Function Score (DFS): SHP (Dates match IPR 01/01/2023 - 12/31/2023)
- Potentially Preventable Hospitalizations: Care Compare (Dates match IPR 01/01/2023 - 12/31/2023)
- Discharge to Community: Care Compare (Dates match IPR 01/01/2022 - 12/31/2023)
- HHCAHPS-based measures: Care Compare (Dates match IPR 01/01/2023 - 12/31/2023)

Scores and ranks are calculated using OASIS and CAHPS data from SHP's national database and may differ from those found in CMS Annual Performance Reports

Real-Time Star Ratings Preview - Quality of Patient Care

SHP

Warren County Health Services

OM/PM: 01/25-12/25, Hosp: 01/25-12/25

Report Date: 2/4/2026

		Process	Outcomes					
1	**Initial Decile Rating**	Timely Initiation of Care	Mgmt of Oral Meds	Ambulation	Bed Transfer	Bathing	Dyspnea	PPH (CMS)
	High/Low Better (+/-)	+	+	+	+	+	+	-
2	0.5	0.0-83.6	0.0-58.0	0.0-64.0	0.0-61.0	0.0-68.0	0.0-62.7	15.1-100.0
3	1.0	83.7-90.6	58.1-71.6	64.1-75.8	61.1-74.9	68.1-79.7	62.8-78.1	13.2-15.0
4	1.5	90.7-94.4	71.7-79.2	75.9-81.7	75.0-82.4	79.8-85.2	78.2-84.8	12.0-13.1
5	2.0	94.5-96.5	79.3-83.7	81.8-85.0	82.5-86.3	85.3-88.2	84.9-88.6	11.2-11.9
6	2.5	96.6-97.9	83.8-86.6	85.1-87.6	86.4-88.9	88.3-90.4	88.7-91.0	10.4-11.1
7	3.0	98.0-98.8	86.7-89.3	87.7-89.6	89.0-90.7	90.5-92.2	91.1-92.8	9.8-10.3
8	3.5	98.9-99.4	89.4-91.4	89.7-91.8	90.8-92.4	92.3-93.8	92.9-94.4	9.1-9.7
9	4.0	99.5-99.8	91.5-94.0	91.9-93.6	92.5-94.2	93.9-95.5	94.5-96.2	8.4-9.0
10	4.5	99.9-99.9	94.1-97.9	93.7-96.9	94.3-96.9	95.6-98.3	96.3-99.4	7.5-8.3
11	5.0	100.0-100.0	98.0-100.0	97.0-100.0	97.0-100.0	98.4-100.0	99.5-100.0	0.0-7.4
12	Your HHA Score	86.2	80.8	84.8	84.0	85.2	68.6	12.3
13	Your Initial Decile Rating (Requires N ≥ 20)	1.0	2.0	2.0	2.0	1.5	1.0	1.5
14	Your Number of Cases (N)	443	305	324	319	323	292	114
15	National (All HHA) Median	97.9	86.6	87.6	88.9	90.4	91.0	10.4
16	Your Statistical Test Probability Value (p-value)	0.000	0.002	0.083	0.005	0.002	0.000	0.297
17	Your Statistical Test Results (Is the p-value ≤ 0.050?)	Yes	Yes	No	Yes	Yes	Yes	No
18	Your HHA Adjusted Rating	1.0	2.0	2.5↑	2.0	1.5	1.0	2.0↑

19	Your Average Adjusted Rating	1.7
20	Your Average Adjusted Rating Rounded	1.5

Final Step: Convert Your Average Adjusted Rating Rounded (Line 20) to the 1.0 to 5.0 star scale as shown below.

21	Your Overall Star Rating (1.0 to 5.0)		
	Average Adjusted Rating Rounded	Overall HHC Star Rating	% of CCNs with Rating (CMS: 10/2025)
	4.5 and 5.0	(5.0) ★★★★★	5.74%
	4.0	(4.5) ★★★★½	13.55%
	3.5	(4.0) ★★★★	15.74%
	3.0	(3.5) ★★★½	16.94%
	2.5	(3.0) ★★★	15.88%
	2.0	(2.5) ★★½	11.92%
	1.5	(2.0) ☆☆	10.51%
	1.0	(1.5) ★½	7.63%
	0.5	(1.0) ★	2.09%

Star Rating cut points: Process/Outcome Measures-10/2026 (SHP), Hospitalizations-01/2027 (SHP).

★ Parameters match Star Rating. ☆ Parameters do not match Star Rating.

Warren County Health Services
Division of Homecare

2025 Overview of the Utilization Review Committee

The Utilization Review Committee of Warren County Health Services held meetings during the year 2025 The meetings were held February 6th, May 06th, July 23rd and November 7th.

The numbers of patient records reviewed were 4,3,2, and 5 giving a total of 16 patient records reviewed during the year 2025

The number of patients on the active roster on the last working day of 2025 was 90, with a breakdown as follows: CHHA – (SN-50 and EI 04 CPSE-36) = 90

Members of the committee are:

Valerie Whisenant, ADPS
Robin Andre, SPHN
Jodi Brynes, SPHN
Craig Briggs, CHN
Kaitlyn Jerdon, PHN
Laura Monroe, PHN
Lisa Morton, CHN
Mary Murphy, PHN
Amy-Jo Sokol, RPN

Breakdown of Charts Reviewed:

Number Active	3	Number CHHA	14
Number Discharged	11		

Method of Record Selection: For all meetings during the year 2025, the records chosen were a random selection of patients admitted 1-4 months prior to each meeting. The random selected patients covered all services provided by the agency: SN, PT, OT, ST, HHA, and IV Therapy.

Summary of Utilization of Services:

Adequate Utilization	14
Overutilization	0
Underutilization	0
Inadequate Information	0
Unable to Decide	0

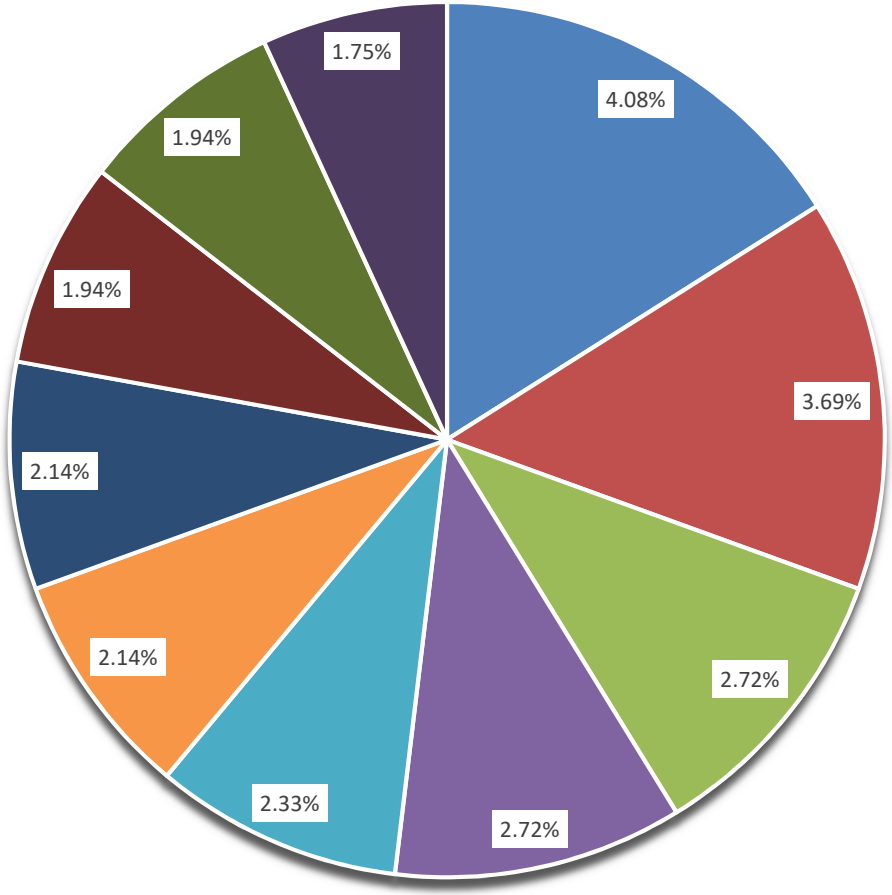
All the charts reviewed showed adequate utilization of services. We do have a new EMR system in place. This helped limit redundancy in documentation. Our QI team will be reviewing our utilization form and update accordingly.

Division of Home Care - SERVICES BY THE NUMBERS

Certified Home Health Agency
VISITS BY DISCIPLINE

Services	2021	2022	2023	2024	2025
Nursing	7,707	4131	3357	3459	3882
Physical Therapy	3,641	3137	2333	2663	1948
Occupational Therapy	479	340	196	195	92
Speech Therapy	229	37	14	173	76
Medical Social Worker	0	0	0	0	0
Nutrition	1	0	0	0	0
Home Health Aide	1,427	1122	967	967	550
TOTALS	14,875	8,767	6551	7363	6548

Top 10 Primary Diagnosis for Vists between 1/1/25 and 12/31/25 for Certified Home Health Agency



- Z48.812- Enctr for surgical aftercr following surgery on the circ sys count
- I11.0- Hypertensive heart disease with heart failure
- J44.1- Chronic obstructive pulmonary disease with (acute) exacerbation
- Z48.815- Enctr for surgical aftercare following surgery on the digestive system
- L89.313- Pressure ulcer of right buttock
- Z47.1- Aftercare following joint replacment surgery
- Z48.3- Aftercare following surgery for neoplasm
- E11.621- Type 2 diabetes mellitus
- N39.0- Urinary tract infection-Unspecified
- G20.A1- Parkinson's disease without dyskineasia

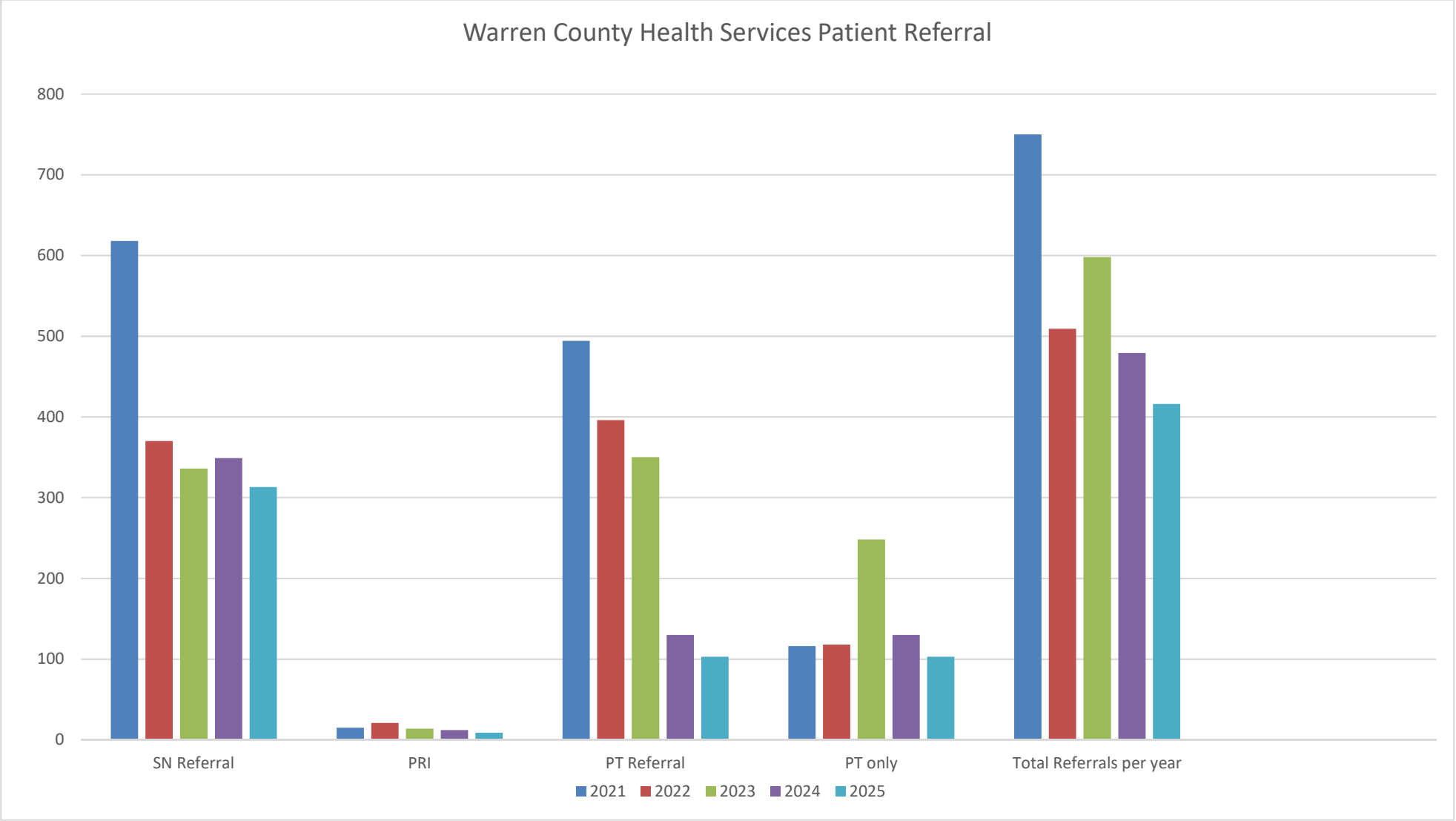
CERTIFIED HOME HEALTH AGENCY GEOGRAPHICAL STATISTICS

Patients by Town

Town	2021	2022	2023	2024	2025
Adirondack	21	18	6	13	12
Athol	16	16	6	4	12
Bakers Mills	12	15	8	0	9
Bolton Landing	61	30	33	24	35
Brant Lake	27	16	30	25	22
Chestertown	82	76	63	58	48
Cleverdale	3	0	0	4	2
Diamond Point	21	10	9	13	17
Glens Falls	466	308	188	255	179
Hague	36	21	21	17	11
Johnsburg	39	41	28	11	15
Kattskill Bay	3	2	5	3	0
Lake George	166	126	75	91	83
Lake Luzerne	82	35	51	38	45
North Creek	36	23	33	34	28
North River	1	1	0	2	14
Olmstedville	20	1	0	3	0
Pottersville	32	40	31	25	31
Queensbury	710	489	404	487	459
Riparius	0	0	1	0	2
Silver Bay	11	3	5	4	3
Stony Creek	8	18	21	13	17
Warrensburg	179	122	94	125	115
Wevertown	15	9	14	24	30
Grand Total	**2047**	**1420**	**1126**	**1273**	**1189**

REFERRAL NUMBER REPORT

Warren County Health Services
Patient Evaluations
CHHA Division



***As of 2024 PRIs are being completed by Public Health Nurses**

REVENUE by PAYER

Traditional Medicare was 34.51% of our business for 2025 which is a 1.57% decrease from 2024 and a 6.62% decrease from 2023. Medicare reimburses the agency not by per visit (Fee for Service) but by episodes of care. The episode is a 30-day period and the Medicare payment are calculated by the score determined by the OASIS D assessment.

Managed Medicare comprised 49.35% of our revenues, which is an 2.72% increase from 2024 and a 16.20% increase from 2023. Managed Medicare reimbursement can be either Fee for Service or Episodic Rate and is determined by the Managed Care Company.

In 2025 Traditional Medicaid represented 4.34% of our CHHA revenue. While in 2024 was 3.65% and in 2023 2.97%.

In 2025 Managed Medicaid revenues were 4.34% and in 2024 3.78% and 3.68% in 2023.

In 2025 Commercial Insurance represented 8.24% of our CHHA revenue and was 9.86% in 2024 and 19.06% in 2023.

HOME CARE GOALS FOR 2026

- Continue strong working relationships with referral sources to assure that our residents and existing clients continue to receive the quality of care provided by this agency in support of the changing times in delivering home health care.
- Assign the liaison role back into Glens Falls Hospital to maximize patient referrals and facilitate complicated patient discharges. This will ensure that patients in Warren County will not be overlooked or discharged when it is unsafe, such as those patients who either live alone and/or can not take care of themselves.
- Market our services and accomplishments to our residents and our referral sources.
- Strengthen and Enhance the existing skilled programs we provide to our clients guiding them in managing their health.
- Continue to promote our Palliative Care Program through collaboration with local providers as well as education and training of our staff to recognize and meet the needs of our Warren County Residents.
- Maximize the full potential of our new Electronic Medical Record system to continue to improve efficiency and reporting requirements.
- Recruit/retain staff in a most challenging workforce/labor shortage.
- Strive to achieve the strongest Star Rating /HCCAPS/PDGM/HHVBP scores to provide quality and steady reimbursement.
- Advocate for federal/regulatory and reimbursement adjustments that assist the state of Home Care continuing to be a viable option in the continuum of care.

CONTINUING CHALLENGES FOR WARREN COUNTY HEALTH SERVICES IN 2026

Our mission remains advocating and assisting people to help themselves – to promote and maximize health and wellness, both physical and mental, while minimizing disease, injury, and disability. This is not an easy task. We realize gains may be slow, unpredictable, and not often immediately visible or measurable. In 2026, our agency will continue to address and lead our community through public health related challenges.

Our challenge for 2026 will be to continue to assess, plan, and deliver programs for individuals, families, neighborhoods, and institutions at the community level. To foster personal responsibility - not dependency on others. Various strategies must be employed to assist and educate people with many diverse and ever -changing health care needs. We will continue to expand and utilize technology to optimize patient health outcomes, prevent and/or reduce the number of unnecessary hospitalizations, and use our nursing and support staff more efficiently.

In the Public Health and Home Care arenas the mission remains consistently identifiable and visible: to assure Warren County residents are protected from all undue risks of contracting communicable or vaccine preventable diseases and, in conjunction with other service providers, to recognize and design intervention strategies targeted to impact social concerns that ultimately affect public health and to provide home health care that assists our citizens to manage many health problems and diagnoses. As well, the need cannot be overstated for increasing collaboration between human service provider agencies and medical care providers to obtain the most appropriate and cost -effective use of resources.

Health Services continues effort toward normalcy. Our agency will continue to figurde out a way to creatively deliver community programs. This is an exciting time to truly evaluate needs and collaborate with local agencies to promote and ensure necessary programs are available to address gaps and assist those in need. The Community Health Needs Assessment and Community Health Improvement Plan processes are valuable resources to make this happen.

For further information or questions regarding the
Warren County Health Services
Annual Report:

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or

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