

**MILWAUKEE COUNTY FISCAL NOTE FORM**

**DATE:** August 18, 2023

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** A report from the Director, Department of Health and Human Services, requesting authorization to sign Memorandums of Understanding (MOUs) with Waukesha County Department of Health and Human Services and Ozaukee County Department of Human Services

**FISCAL EFFECT:**

- |   |  |
|---|--|
| <input type="checkbox"/> No Direct County Fiscal Impact             | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required               | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures            | <input type="checkbox"/> Increase Capital Revenues     |
| (If checked, check one of two boxes below)                          | <input type="checkbox"/> Decrease Capital Revenues     |
| <input checked="" type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Use of contingent funds       |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget        |  |
| <input type="checkbox"/> Decrease Operating Expenditures            |  |
| <input type="checkbox"/> Increase Operating Revenues                |  |
| <input type="checkbox"/> Decrease Operating Revenues                |  |

*Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.*

	<b>Expenditure or Revenue Category</b>	<b>Current Year</b>	<b>Subsequent Year</b>
<b>Operating Budget</b>	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
<b>Capital Improvement Budget</b>	Expenditure		
	Revenue		
	Net Cost		

## DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. <sup>1</sup> If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.

D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. The Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into Memorandums of Understanding (MOUs) with Waukesha County Department of Health and Human Services and Ozaukee County Department of Human Services to provide project management services for home modification requests for their Children's Long Term Support Waiver participants. Housing Services currently provides project management services to Milwaukee County's Children Youth Family Services (CYFS), Waukesha County Department of Health and Human Services and Ozaukee County Department of Human Services.

B. Housing Services currently charges an hourly rate of between \$81.32 to \$100 to offset staff costs related to home modifications. A new flat rate of \$97.61 is being incorporated into the proposed MOUs and reflects 2024 staff salary, fringe, mileage, rent, and overhead. The previous rate scale had not been updated in several years. Housing staff spends between 20-30 hours per project depending upon location and type of work to be completed. Within the last five years, the program has experienced an increased number of referrals which average between 50 to 100 annually. Over the last few years, the program has realized an average of \$110,000 in revenue annually. This is projected to increase to \$150,000 in 2024 based on the increased referrals and new flat hourly rate. This revenue has already been budgeted in the department's 2024 Requested Budget.

C. The resolution would authorize Milwaukee County Housing Services to provide project management services and collect revenue from Waukesha and Ozaukee Counties for home modification services for a period of five years commencing on January 1, 2024 through December 31, 2029.

D. No further assumptions are made.

Department/Prepared By Clare O'Brien, DHHS Budget and Policy Director

Authorized Signature *Shakita LaGrant-McClain*

Did DAS-Fiscal Staff Review?

Yes

No

Did CDPB Staff Review?

Yes

No

Not Required

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<sup>1</sup> If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.