MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: June 24, 2026

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: A report from the Executive Director, Department of Health and Human Services, seeking approval of an agreement to expand and fund an expedited options counseling team within the Aging and Disability Resource Center (ADRC)

FISCAL EFFECT:

☐ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☒ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☒ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☒ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ Use of contingent funds

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.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	$300,000	$300,000
	Revenue	$300,000	$300,000
	Net Cost	$0	$0
Capital Improvement Budget	Expenditure	$0	$0
	Revenue	$0	$0
	Net Cost	$0	$0

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. [1] 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. Approval of this report authorizes the Executive Director of the Department of Health and Human Services to enter into an agreement with Ascension Health, Advocate Aurora Health, Inc., and Froedtert ThedaCare Health, Inc. to jointly fund an Expedited Options Counseling Team within the Aging and Disability Resource Center (ADRC).

B. Approval of this request will authorize DHHS to enter into an agreement to accept $300,000 annually for a total of $900,000 in revenue from Ascension Health, Advocate Aurora Health, Inc., and Froedtert ThedaCare Health, Inc for a three-year term in exchange for a dedicated Options Counseling Team to complete the Long-Term Care Functional Screen (LTCFS) within 15 days, instead of the State-required 30 days.

   The agreement is written to auto renew for another 36 months under the same terms unless written notice is given by either party.

C. The $300,000 in annual revenue and the State County ADRC Contract are sufficient to support the salary and fringe costs for three new position creates as part of an Expedited Options Counseling Team being considered for approval by the County Board in the July cycle under File 26-522. Salary, social security, and fringe benefits are anticipated to be $345,160 annually. The remaining $45,160 not covered by the annual hospital revenue will be funded by the State County ADRC Contract resulting in zero impact to the county tax levy.

D. No assumptions were made.

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[1] 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.

[2] Community Business Development Partners' review is required on all professional service and public work construction contracts.

Department/Prepared By: Lottie B. Maxwell-Mitchell Sr. Budget & Management Analyst, DHHS

Authorized Signature Shakita LaGrant-McClain

Did DAS-Fiscal Staff Review?	☐	Yes	☒	No	
Did CBDP Review?[2]	☐	Yes	☐	No	☒ Not Required