MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: February 14, 2025

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: <u>A report from the Director, Department of Health and Human Services, requesting</u> <u>authorization for Housing Services to retroactively accept U.S. Department of Housing and</u> <u>Urban Development Office of Lead Hazard Control and Healthy Homes grant funds in the</u> <u>amount of \$7.75 million to create a Lead Hazard Control Reduction Program</u>

FISCAL EFFECT:

	No Direct County Fiscal Impact		Increase Capital Expenditures
\square	Existing Staff Time Required	—	
			Decrease Capital Expenditures
	Increase Operating Expenditures (If checked, check one of two boxes below)		Increase Capital Revenues
	Absorbed Within Agency's Budget Not Absorbed Within Agency's Budget		Decrease Capital Revenues
	Decrease Operating Expenditures		Use of contingent funds
\boxtimes	Increase Operating Revenues		
	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.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	\$1,830,890	\$1,930,000
	Revenue	\$1,830,890	\$1,930,000
	Net Cost	0	0
Capital Improvement	Expenditure		0
Budget	Revenue		0
	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.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. A report from the Director, Department of Health and Human Services, requesting authorization for Housing Services to retroactively accept U.S. Department of Housing and Urban Development Office of Lead Hazard Control and Healthy Homes grant funds in the amount of \$7.75 million to create a Lead Hazard Control Reduction Program.

B. Housing Services was successfully awarded a four-year \$7.75 million grant from HUD. All services provided in the contract will be covered by the grant. The term of the grant is from March 1, 2025 through March 1, 2029.

C. There is no tax levy impact associated with approval of this request. There is a \$700,000 match requirement for the grant which will be covered by existing Community Development Block Grant (CDBG) funds. Including the match, the total budget over four years is \$8,450,000 or an average of about \$2.1 million annually.

D. No further assumptions are made.

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

	J. <u></u>				
Authorized Signature	<u>Shakita L</u>	aGrant-Mcl	lain		
Did DAS-Fiscal Staff Re	eview?	Yes	🖂 No)	
Did CDPB Staff Review	?	Yes		No	🛛 Not Required

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.