MILWAUKEE COUNTY FISCAL NOTE FORM

DAT	E:	10	/22/13	Origin	al Fiscal Note				
				Substi	itute Fiscal Note				
SUBJECT		Γ:	Report from the Director, Department of Health and Human Services, Req Authorization to Increase the Purchase of Services Contracts with Horizon Hea for the Office of Consumer Affairs and Community Advocates for the Mil- County Substance Abuse Prevention Coalition in the Behavioral Health Division						
FISC	CAL E	FF	ECT:						
	No Dire		ect County Fiscal Impact		Increase Capital Expenditures				
			Existing Staff Time Required		Decrease Capital Ex	penditures			
			e Operating Expenditures ked, check one of two boxes below)		Increase Capital Revenues				
		A	Absorbed Within Agency's Budget		Decrease Capital Re	venues			
		1	Not Absorbed Within Agency's Budget						
	Deci	eas	se Operating Expenditures		Use of contingent fur	nds			
	Increase Operating Revenues								
	Decrease Operating Revenues								
			w the dollar change from budget for any creased expenditures or revenues in the cu			d to result in			

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	116,600	0
	Revenue	116,600	0
	Net Cost	0	0
Capital Improvement	Expenditure		
Budget	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. 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. DHHS is requesting authorization to increase two existing purchase of services contracts with the following agencies: 1) Horizon Healthcare for the Office of Consumer Affairs and 2) Community Advocates for the Milwaukee County Substance Abuse Prevention Coalition.
- B. The existing contract with Horizon Healthcare/Office of Consumer Affairs for \$458,505 would increase by \$11,000 to \$469,505. In addition, the existing contract with Community Advocates for \$1,022,380 would increase by \$116,600 to \$1,138,980.
- C. There is no tax levy impact associated with approval of this request. The amendment to the Horizon Healthcare contract for \$11,000 can be absorbed in BHD's purchase of service 8000 0ther Charges accounting series. The amendment with Community Advocates is funded by the Federal Substance Abuse Prevention and Treatment Block Grant and increases expenditures and revenues equally by \$116,600 for no net tax levy impact.
- D. No assumptions are made.

Department/Prepared By	Clare O'Brie	are O'Brien, Fiscal & Management Analyst				
Authorized Signature	A	S	Clo			
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Did DAS-Fiscal Staff Review	?	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.