

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 8, 2023

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Report from the Director, Department of Health and Human Services, requesting authorization to enter into 2024 purchase of service contracts with community vendors for Children, Youth and Family Services

FISCAL EFFECT:

- | | |
|---|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact
<input type="checkbox"/> Existing Staff Time Required
<input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below)
<input type="checkbox"/> Absorbed Within Agency's Budget
<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 | <input type="checkbox"/> Increase Capital Expenditures
<input type="checkbox"/> Decrease Capital Expenditures
<input type="checkbox"/> Increase Capital Revenues
<input type="checkbox"/> Decrease Capital Revenues
<input type="checkbox"/> 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	0	0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement Budget	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. 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. The Director of the Department of Health and Human Services (DHHS) is requesting authorization to execute 2024 Children, Youth and Family Services (CYFS) purchase of service contracts with community vendors.

Approval of this request will allow the Director of DHHS to execute purchase of service contracts to continue the provision of contracted services for the Intensive Monitoring Program (IMP)-Aftercare, Milwaukee County Accountability Program, Aspire Education Program, Intensive Monitoring, Level II Monitoring, Multi-Systemic Therapy, Shelter Care, Alternative Sanctions, Community Service and Restitution Coordination, Credible Messengers, and services related to the Birth to 3 Program. All of the contracts reflect a term of January 1 to December 31, 2024.

B. Total 2024 expenditures included in this request are \$14,648,023. The total requested expenditures reflect an increase of \$625,976 over 2023 primarily for the St. Charles Intensive Monitoring Program (IMP). In 2023, St. Charles was contracted to serve up to 56 kids at a time. For 2024, the goal is to serve up to 100 youth at a time which results in a contact increase for 2024.

C. There is no tax levy impact associated with approval of this request in 2024 as funds sufficient to cover associated expenditures are included as part of the CYFS 2024 Budget.

D. This fiscal note assumes expenditures will not exceed the amounts authorized for these purchase of service contracts.

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

Authorized Signature *Shakita LaGrant-McClain*

Did DAS-Fiscal Staff Review? Yes No

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.

Did CDPB Staff Review?

Yes

No

Not Required