

MILWAUKEE COUNTY FISCAL NOTE FORM

File 22-487

DATE: April 1, 2022

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: From the Chief Deputy, Office of the Sheriff, requests the authority to retroactively enter into an agreement with Froedtert Memorial Lutheran Hospital of Wisconsin, Inc. (FMLH) to provide law-enforcement related services on the premises of FMLH emergency department in an estimated amount for the first contract year of \$1,100,950 from April 1, 2022, to March 31, 2023.

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 |
| Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input checked="" type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input checked="" 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.

	Expenditure or Revenue Category	Current Year 2022	Subsequent Year 2023
Operating Budget	Expenditure	\$825,713	\$275,237
	Revenue	\$825,713	\$275,237
	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 Chief Deputy, Office of the Sheriff, requests the authority to retroactively enter into an agreement with Froedtert Memorial Lutheran Hospital of Wisconsin, Inc. (FMLH) to provide law-enforcement related services on the premises of FMLH emergency department in an estimated amount for the first contract year of \$1,100,950 for the period beginning April 1, 2022 and ending midnight March 31, 2023.

B. The rates per hour have been approved by the Milwaukee County Sheriff's Office, Fiscal Administration, and agreed upon by Froedtert Memorial Lutheran Hospital Inc. (FMLH):

The rates are as follows:

Deputy Sheriff I Budgeted Straight Time Rate	\$38.1159
Deputy Sheriff I Benefits (Health, Pension, Social Security)	\$14.1202
Education, Hazardous Duty & Uniforms	\$0.8636
Cost of Squad and Equipment (6.0% of Base)	\$2.2870
Cost of Scheduling & Supervision	\$1.9620
Administrative Overhead	\$3.3797
STH Rate	\$60.7284
OTH Rate	\$70.3198

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.


24 STH work hours X365 hours = 8,760 work hours X 60.7284	\$531,981
Three percent overtime = 263 work hours X70.3198	\$18,494
Total Estimated	\$550,475

24 STH work hours X365 hours = 8,760 work hours X 60.7284X2	\$1,063,962
Three percent overtime = 263 work hours X70.3198X2	\$36,988
Total Estimated	\$1,100,950

C. The total contract with FMLH is at \$1,100,950. In the current year the cost is \$825,713 and in the subsequent year it will be \$275,237. MCSO will invoice FMLH quarterly for \$275,237. \$825,713 is not in the 2022 adopted budget and an appropriate fund transfer will be requested. \$275,237 will be included in the 2023 requested budget.

D. There is no impact on tax levy.

Department/Prepared By Renny More Public Safety Fiscal Analyst

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

Did CDBP Review?² Yes No Not Required