

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 7, 2022

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Director, Department of Health and Human Services, requesting authorization to enter into 2023 purchase of service contracts at a cost of \$4,523,817 from January 1, 2023 through December 31, 2023 to provide services to Milwaukee County's older adult residents

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input checked="" type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> 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 type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input 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	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.
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- A. DHHS is requesting authorization to execute various 2023 purchase of service contracts with Milwaukee County DHHS Area Agency on Aging to provide various advocacy, nutrition, transportation, social support, senior center, and caregiver support services.
 - B. The total contract amount of \$4,523,817 in the 2023 budget includes Older American Act (OAA) as well as a variety of other State and Federal grants that address the needs of Milwaukee County older adults to live healthy, engaged lives in the community.
 - C. Sufficient grant funds are budgeted to offset purchase of service contracts, including:

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.

Alzheimer's Disease & Related Disorders Association of SE WI, Inc.	AFCSP	\$50,000
Alzheimer's Disease & Related Disorders Association of SE WI, Inc.	OAA Title III-E/AFCS	\$380,363
Eras Senior network	OAA III-B/ SCSP/BCA	\$281,232
Goodwill Industries of Southeastern Wisconsin, Inc.	OAA Title III-C2	\$1,242,903
Greater Galilee Community Development	OAA Title III-C1	\$90,302
Hmong/American Friendship Association, Inc.	OAA Title III-B	\$46,135
Indian Council of the Elderly, Inc.	OAA III-3C1/III- B/BCA	\$84,572
Subtotal		\$2,175,507
Jewish Family Services, Inc.	OAA III-B/BCA	\$30,000
Legal Action of Wisconsin, Inc.	OAA III-B/Various	\$405,292
Life Navigators	OAA III-B/III-E	\$30,150
Milwaukee Christian Center, Inc.	OAA IIIC/Various	\$401,550
Milwaukee LGBT Community Center, Inc.	OAA III-B/BCA	\$30,000
Muslim H&C Ctr	OAA Title III-C1	\$20,000
Community Relations-Social Development Commission	MIPPA	\$7,600
Serving Older Adults	OAA III- B/SCSP/Tax Levy	\$892,867
Serving Older Adults	OAA Title III-C1	\$100,000
United Community Center, Inc. (*)	OAA IIIB/C/Various	\$393,189
Vital Voice	OAA Title III-B	\$22,662
SUPER Expedite	OAA ARPA Title III-C2	\$15,000
Subtotal		\$2,348,310
TOTAL		\$4,523,817

D. This fiscal note assumes the 2023 Budget is adopted as recommended and the receipt of the pending formal award letter from the State.

Department/Prepared By: Mary Proctor Brown, Budget Manager, Aging & Disabilities Services

Authorized Signature Shakita LaGrant-McClain

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

Did CDBP Review?² ☐ Yes ☐ No ☒ Not Required