

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 4/26/12

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Request to abolish 1.0 FTE Marketing Coordinator (Title Code 00041420, Pay range 33M) upon the creation and filling of 1.0 FTE Assistant Director- Family Care (Pay range 901E)

FISCAL EFFECT:

- | | |
|---|--|
| <input checked="" 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 |
| <input checked="" type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input checked="" 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.

A. Approval of the request would abolish 1.0 FTE Marketing Coordinator upon the creation and filling of 1.0 FTE Assistant Director- Family Care.

B. The estimated fiscal effect for 2012 related to the creation of 1.0 FTE Assistant Director- Family Care including salary, and active fringe benefits is \$53,878 which is partially offset by the abolishment of 1.0 FTE Marketing Coordinator for cost including salary and active fringe benefits of \$48,618, resulting in increased expenditures of \$5,259. However, this increase will be absorbed within the departments current budget and is offset with capitation revenue, resulting in a levy impact of \$0.

C. There is no budgetary impact associated with this request as the increase in expenditures will be absorbed within the departments budget and covered with capitation revenue.

D. The 2012 cost mentioned above will be achieved assuming a start date of June 4, 2012 through Decemeber 31 at an hourly rate of \$37.24 for the Assistant Director- Family Care. In addition, the fringe amounts used to calculate the position costs are as follows: \$14,014- Active Health, 14.75% Active Pension, and 7.65% Social Security.

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.

Department/Prepared By Antionette Thomas-Bailey, DAS- Fiscal

Authorized Signature _____

Did DAS-Fiscal Staff Review? Yes No