## MILWAUKEE COUNTY FISCAL NOTE FORM

DAT	<b>TE</b> : 7/6/2020		Original Fiscal Note									
		Subst	itute Fiscal Note									
SUBJECT: Third Party Administration of Workers' Compensation Program												
FISC	CAL EFFECT:											
	No Direct County Fiscal Impact		Increase Capital Expenditures									
	Existing Staff Time Required  Increase Operating Expenditures (If checked, check one of two boxes below)		Decrease Capital Expenditures Increase Capital Revenues									
	Absorbed Within Agency's Budget		Decrease Capital Revenues									
	☐ Not Absorbed Within Agency's Budget											
	Decrease Operating Expenditures		Use of contingent funds									
	Increase Operating Revenues											
	Decrease Operating Revenues											
	cate below the dollar change from budget for an eased/decreased expenditures or revenues in the c	•	• •									

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	(\$61,507)
	Revenue	0	0
	Net Cost	0	(\$61,507)
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.
   \*Please see associated report.
- 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. <sup>1</sup> 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.
  - \*There is an expected \$23,486 cost increase in 2020 from 2019 TPA costs, however, the estimated cost savings over the five year agreement compared to the prior Workers Compensation Third Party Administrator service fees are approximately \$238,950.
- 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.
  - \*Adoption of this resolution will not impact the current fiscal year as \$325,000 for this contract award was incorporated into the 2020 Adopted Budget.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

Department/Prepared By	Megan Rogers, Interim Director, Risk Management					
Authorized Signature	Megan Ri	ogers				
Did DAS-Fiscal Staff Review	·	Yes	☐ No			
Did CDPB Staff Review?		Yes	☐ No			

<sup>&</sup>lt;sup>1</sup> 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.