### MILWAUKEE COUNTY FISCAL NOTE FORM

## DATE: February 19, 2021

Original Fiscal Note

Substitute Fiscal Note

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SUBJECT: Report from the Director, Department of Health and Human Services, requesting authorization to enter into a 2021 contract with the State of Wisconsin for Social Services and Community Programs

#### FISCAL EFFECT:

	No Direct County Fiscal Impact		Increase Capital Expenditures				
	Existing Staff Time Required		Decrease Capital Expenditures				
$\square$	Increase Operating Expenditures (If checked, check one of two boxes below)		Decrease Capital Experiditures				
			Increase Capital Revenues				
	Absorbed Within Agency's Budget		Decrease Capital Revenues				
	Not Absorbed Within Agency's Budget						
	Decrease Operating Expenditures		Use of contingent funds				
$\boxtimes$	Increase Operating Revenues						
	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	\$204,816	
	Revenue	\$204,816	
	Net Cost	\$0	
Capital Improvement Budget	Expenditure		
Duuget	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.<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.
- 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 sign a 2021 Social Services and Community Programs contract with the State Department of Health Services (DHS). Approval will allow Milwaukee County to receive State revenue for county services to persons with disabilities and their families as well as those in need of community support and prevention services as mandated by State and/or Federal law.

B. The state's Social Services and Community Programs contract includes various separate revenues used to fund DHHS. Approval to sign the 2021 contract will allow Milwaukee County to receive funds.

C. The actual 2021 "Community Aids" contract for DHHS provides an allocation totaling \$16,863,402; this amount is \$204,816 more than the \$16,658,586 included in the DHHS 2021 Budget primarily due to an additional \$193,153 in Children's Long Term Support Program (CLTS) revenue designated for administrative costs as a result of additional children being served in the program.

D. No further assumptions are made. The fiscal information was taken from the DHS 2021 contract notification.

Department/Prepared By:	Clare O'Brier	n, Budget & C	<u> Dpera</u>	tions Man	ager - DHHS
Authorized Signature	Shakita	LaGrant-	Mc	lain	
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Did DAS-Fiscal Staff Review	/?	Yes	$\square$	No	
Did CDPB Staff Review?		Yes		No	Not Required

<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.