

B U D G E T S U M M A R Y

Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures					
Personnel Costs	\$61,989,082	\$56,790,198	\$65,702,327	\$69,362,179	\$3,659,852
Operation Costs	\$109,432,251	\$120,165,486	\$139,925,997	\$143,255,629	\$3,329,632
Debt & Depreciation	\$0	\$0	\$0	\$0	\$0
Capital Outlay	\$454,116	\$626,059	\$267,000	\$505,500	\$238,500
Interdept Charges	\$1,669,733	\$3,169,539	\$1,425,800	\$417,032	(\$1,008,768)
Total Expenditures	\$173,545,182	\$180,751,281	\$207,321,124	\$213,540,340	\$6,219,216
<i>Legacy Healthcare/Pension</i>	\$16,137,526	\$15,567,504	\$16,652,007	\$21,158,253	\$4,506,246
Revenues					
Direct Revenue	\$68,147,188	\$89,566,818	\$109,400,204	\$113,364,922	\$3,964,718
Intergov Revenue	\$52,099,001	\$40,581,023	\$40,535,209	\$41,538,602	\$1,003,393
Total Revenues	\$120,246,189	\$130,147,841	\$149,935,413	\$154,903,524	\$4,968,111
Tax Levy	\$53,298,993	\$50,603,440	\$57,385,711	\$58,636,816	\$1,251,106
Effective Tax Levy*	\$24,862,128	\$22,754,651	\$28,684,143	\$25,614,552	(\$3,069,591)
Impact on Reserves Increase/(Decrease)	\$5,679,216	\$0	\$0	(\$351,697)	(\$351,697)
Personnel					
Full-Time Pos. (FTE)**	502.13	525.88	524.00	489.80	(34.20)
Seas/Hourly/Pool Pos.	22.69	22.69	14.60	24.34	9.74
Overtime \$	\$1,910,534	\$1,836,952	\$1,030,908	\$1,226,484	\$195,576

*This Effective Tax Levy excludes interdepartmental charges and fringe benefit costs.

** The 2018 Budget FTEs include Vacancy & Turnover (VANDT) & Overtime (OT). The 2017 Budget, 2016 Actual, and 2015 Actual FTEs are restated to reflect this change. Program Area tables include these changes as well.

Department Vision: Together, creating healthy communities

Department Mission: Empowering safe, healthy and meaningful lives

Department Description: The Behavioral Health Division (BHD) consists of Management and Support Services, Psychiatric Crisis ER/Observation, Adult and Child Acute Inpatient Services, Community Services Branch & Wraparound Milwaukee.

2018 expenditures for Community Services increase due to the following investments in Community Programs:

- Increases to the Comprehensive Community Service (CCS) Adult program with a projected enrollment of 1,100 by the end of 2018 and an increase of \$5.7m in annual spending.
- Increase to the Comprehensive Community Service (CCS) Children's program, administered by the BHD WRAP division, with a projected enrollment of 100 by the end of 2018 and expenditures of \$1.7m.
- BHD continues to support the partnership with the Milwaukee County Housing Division's initiative to end chronic homelessness with an investment of \$1.0m. This initiative was started on July 1, 2015, and has served over 200 individuals as of June 2017.
- \$1.3m investment in Electronic Medical Records Optimization
- \$0.7m for investment in AODA residential services to ensure high quality and accessible treatment to residents.
- The newly created Intensive Outpatient Program will complement Milwaukee County's Day Treatment program by providing services to a similar population with shorter lengths of stay at a tax levy savings of \$0.6m.
- \$0.1m investment in transportation to ensure clients in need have transportation to make clinical appointments.
- \$0.2m investment to fund the exploration, design, and future implementation of a peer run respite.
- \$0.1m to fund a police officer in West Allis to create a CART team.
- BHD is investing \$0.4m to support the integrated system and practice model to transform our system to one in which we will identify, access, enroll, and serve participants and their families in all programs and services available in a coordinated and integrated manner, regardless of where or how they enter our department. This model will yield better outcomes, and in turn, healthier communities.

The Behavioral Health Division's approach to quality improvement is based on the following principles:

- **Customer Satisfaction Focus.** High quality organizations focus on their internal and external customers and on meeting or exceeding needs and expectations.
- **Recovery-Oriented Philosophy of Care.** Services are characterized by a commitment to expanding choice, as well as promoting and preserving wellness. This approach promotes maximum flexibility, the choice to meet individually defined goals and permits person-centered services.
- **Employee Empowerment.** Effective programs involve people at all levels of the organization in improving quality.
- **Leadership Involvement.** Strong leadership, direction, support of quality assurance and support of quality improvement activities by the Governing Board, Chief Executive Officer, Executive Team and the Medical Staff Leadership are key. The involvement of organizational leadership assures that quality improvement initiatives are consistent with our mission and strategic plan.
- **Data Informed Practice.** Successful Quality Improvement processes create feedback loops, using data to inform practice and measure results. Fact-based decisions are likely to be correct decisions.
- **Statistical Tools.** For continuous improvement of care, tools and methods that foster knowledge and understanding are needed. BHD, like Continuous Quality Improvement organizations, will use defined analytic tools such as run charts, cause and effect diagrams, flowcharts, histograms, and control charts to turn data into information.
- **Prevention over Correction.** Continuous Quality Improvement entities seek to design good processes to achieve excellent outcomes, rather than fix processes after the fact.
- **Continuous Improvement.** Processes must be continually assessed, reviewed and improved. Small incremental changes do make an impact, and providers can almost always find an opportunity to make things better.

BHD will continuously strive to ensure that:

- All team members are responsible and empowered to contribute to all aspects of patient safety and quality.
- The treatment provided incorporates evidence based, effective practices.
- The treatment and services are appropriate to each patient's needs, and available when needed.
- Risk to patients, providers and others is minimized, and errors in the delivery of services are prevented.
- Patient's individual needs and expectations are respected.
- The patient or those whom they designate have the opportunity to participate in decisions regarding their treatment.
- All care and services are provided with empathy, understanding, caring and trauma informed focus.
- Procedures, treatments and services are provided in a timely and efficient manner, with appropriate coordination and continuity across all phases of care and with all providers of care.

In order to address a structural budgetary deficit caused primarily by growing pension and retiree health care costs, as well as reductions in support from the State, the 2018 Budget includes a vacancy and turnover increase of approximately one percent for most County departments for an overall savings of \$1,877,496. The increased vacancy and turnover for the Behavioral Health Division is \$192,132. In order to ensure that vacancy and turnover savings are realized, all requests to fill positions shall be reviewed and approved by the Department of Administrative Services before the position may be filled.

Strategic Program Area 1: Management & Support Services

Service Provision: Administrative

Strategic Outcome: High Quality, Responsive Services

What We Do: Activity Data				
Activity	2015 Actual	2016 Actual	2017 Target	2018 Target
This program area does not have activity data.				

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$282,308	\$369,629	\$854,115	\$757,125	(\$96,990)
Revenues	\$883,449	\$294,476	\$854,200	\$907,244	\$53,044
Tax Levy	(\$601,142)	\$75,153	(\$85)	(\$150,119)	(\$150,034)
FTE Positions	137.10	130.90	135.20	136.40	1.30

How Well We Do It: Performance Measures				
Performance Measure	2015 Actual	2016 Actual	2017 Target	2018 Target
Overtime Costs / Personal Services Costs	N/A	3.2%	1.6%	1.7%
Revenue dollars / fiscal staff	N/A	\$5,422,827	\$5,169,429	\$6,156,853
Patient revenue collected / Billed revenue	N/A	36.3%	51.2%	52.1%

Strategic Overview: Management and Support Services provides fiscal management, compliance, and administration.

Strategic Implementation: Personnel expenses increase \$0.5m; \$1.0m for fringe benefits, offset by a \$0.4m reduction in unemployment compensation. A professional services contract in the amount of \$95,000 is added for a Policy and Support Analyst to support the Milwaukee County Mental Health Board. The contract is partially funded by a contribution from reserves of \$51,697, with the remaining \$43,303 from tax levy supporting a previously proposed .50 FTE Analyst position.

Expenditure reductions in 2018 include a \$1.2m reduction in the Electronic Medical Records optimization project of which \$0.8m was shifted to the AODA (Alcohol and Other Drug Addiction) program and \$0.4m is net savings. The cost of drugs was shifted from the pharmacy department to the patient departments for a reduction of \$0.9m from this program area.

The management/operations area increases by 5.2 FTEs in 2018 largely due to a 4.0 FTE increase in FTEs related to EMR optimization.

A centralized **Behavioral Health Division Quality Management Services** department will be strengthened in 2018 to assure ongoing excellence in the quality and safety of care and services delivered as well as those services purchased. We will define quality as a collective measure of excellence in BHDs (and our network) systems, processes, staff and provider performance, decisions, and human interactions. The overarching organizational aim we are undertaking in this and the next quality plan biennium is to align our Quality Program Structure, Management and Knowledge Base to a customer-driven, performance based, innovation rewarding and self-learning paradigm. BHD, our staff, vendors and the Milwaukee County Mental Health Board (MCMHB) will continue to demonstrate a commitment to improving the health of patients and ultimately our community.

To truly transform into a healthcare system of high reliability, client satisfaction, quality and safety, the Behavioral Health Division will engage in purposeful activities in support of a **Quality Journey**. Mental Health Board governance and BHD Leadership remain committed to quality care and services, including increasing efforts to delineate contract performance expectations and increased monitoring, fostering a culture of safety, and supporting a continuous learning environment with an on-going emphasis on performance improvement. Efforts to centralize BHD quality-related functions with an emphasis on enhanced community services and client outcomes, delineated by measurement goals and benchmarks, are hallmarks of these continued efforts. Plans to eliminate barriers and individual program silos in favor of an integrated system of quality care and coordinated quality activities are currently underway. The goals include strengthening the quality approach to increase operational efficiency, support an environment of safety, reduce cost and create a healthcare system where a client is better cared for throughout the service continuum.

The **BHD Quality Plan 2017- 2018** will continue to serve as the Behavioral Health Division's roadmap and strategic blueprint. We will accomplish this by continually measuring (monitoring) and improving the effectiveness and excellence of care and organizational operations. Our ultimate goal is to provide care and services that are safe, effective, patient oriented, timely, efficient and equitable, and in so doing provide a true patient centered experience

consistent with the *National Triple-Aim Initiative and the Human Services Value Curve*. BHD strives to continuously assess and improve the quality of the treatment and services it contracts and provides. Further attention to the development of tracking/reporting structural components will also be priority. All services and programs within the service continuum including community and inpatient services will continue to incorporate measurement and data represented in an evolving **Balanced Scorecard(s) for Key Performance Indicators** with attention to core measures including, but not limited to:

- Improving the Patient Experience - Customer Satisfaction and Well-being.
- Patient Outcomes.
- Service Utilization Data.
- Quality Assurance and Improvement Activities.
- Required Public Data Reporting and Benchmark Comparisons
- Workforce Development
- Financial Impact and Cost.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Strategic Program Area 2: Psychiatric Crisis ER/Observation

Service Provision: Mandated

Strategic Outcome: High Quality, Responsive Services

What We Do: Activity Data				
Activity	2015 Actual	2016 Actual	2017 Target	2018 Target
Psychiatric Crisis Observation				
Admissions	N/A	8,286	9,000	8,000

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$18,603,139	\$16,883,092	\$18,019,019	\$17,550,849	(\$468,170)
Revenues	\$11,688,408	\$10,714,636	\$11,468,783	\$10,888,654	(\$580,129)
Tax Levy	\$6,914,731	\$6,168,455	\$6,550,236	\$6,662,195	\$111,959
FTE Positions	81.00	87.20	78.00	70.40	(7.60)

How Well We Do It: Performance Measures					
Performance Measure	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
Percent of clients returning to PCS within 30 days	N/A	25%	25%	24%	(1%)
Percent of Time on Waitlist Status	N/A	80%	25%	25%	0%
Clients transferred to private facilities from PCS	N/A	7%	10%	8%	(2%)

Strategic Overview: Psychiatric Crisis ER/Observation includes:

- Psychiatric Crisis Service (PCS) Emergency Room
- Observation Unit

Strategic Implementation: Due to the decrease in the number of admissions, revenue decreases by \$0.6m in 2018. Overall expenditures decrease \$0.2m due to lower administrative and overhead cross charges resulting from the reallocation of cross charges as Inpatient Services level off or decline and Community Services continue to grow. Personnel expenses decrease by \$0.2m due to a combination of factors. Excess clinical positions that are unfilled are eliminated for \$0.8m in salary savings, overtime is increased \$0.2m to reflect actual spending and total fringe benefits increase \$0.5m.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Strategic Program Area 3: Inpatient Services (Adult and Children)

Service Provision: **Mandated**

Strategic Outcome: **Self-sufficiency**

What We Do: Activity Data					
Activity	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
<i>Acute Adult Inpatient</i>					
Average Daily Census	Data not available	46	54	54	0
Number of Admissions	Data not available	683	900	800	(100)
Number of Patient Days	Data not available	16,703	19,710	18,000	(1,710)
Average Length of Stay (Days)	Data not available	25	22	23	1
<i>Child and Adolescent Inpatient Services</i>					
Average Daily Census	Data not available	8	12	12	0
Number of Admissions	Data not available	617	930	800	(130)
Number of Patient Days	Data not available	3,068	4,380	3,600	(780)
Average length of Stay (Days)	Data not available	5	4.7	4.5	(0.2)

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$37,629,829	\$36,200,780	\$36,835,056	\$40,047,790	\$3,212,734
Revenues	\$18,976,788	\$14,941,987	\$20,456,205	\$17,607,495	(\$2,848,710)
Tax Levy	\$18,653,040	\$21,258,792	\$16,378,851	\$22,440,295	\$6,061,444
FTE Positions	204.90	198.70	192.80	173.60	(21.20)

How Well We Do It: Performance Measures					
Performance Measure	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
Acute Adult Inpatient					
Percent of clients returning to Acute Adult within 30 days	Data not available.	10.8%	11%	10%	(1%)
Patients Responding Positively to Satisfaction Survey	Data not available.	70%	75%	75%	0%
Child and Adolescent Inpatient Services					
Percent of children who return to CAIS within 30 days	Data not available.	11.8%	15%	12%	(3%)
Patients Responding Positively to Satisfaction Survey	Data not available.	78%	73%	75%	2%

Strategic Overview: BHD's inpatient services are provided in four licensed psychiatric hospital units with three specialized programs for adults and one specialized unit for children and adolescents. Adult units include one 18-24 licensed bed adult unit called the Acute Treatment Unit (ATU), one 18-24 licensed bed Women's Treatment Unit (WTU), and one 18 bed Intensive Treatment Unit (ITU). A projected total of 60 of the licensed adult beds will be available in 2018 with a projected 90% occupancy rate. All units provide inpatient care to individuals who require safe, secure, short-term, or occasionally extended psychiatric hospitalization. A multi-disciplinary team approach of psychiatry, psychology, nursing, social service, and rehabilitation therapy provides assessment and treatment. This approach is designed to stabilize any patient with acute psychiatric needs and assist the return of the patient to their own community. The WTU program provides specialized services for women recovering from complex and co-occurring severe mental health disorders. The ITU program provides a safe, supportive environment for those individuals with mental health conditions who are at high risk for aggressive behavior and in need of intensive behavioral and pharmacological interventions. The Child and Adolescent (CAIS) unit provides inpatient care to individuals age 18 and under. The CAIS unit also provides emergency detention services for Milwaukee County as well as inpatient screening for Children's Court.

Strategic Implementation: Expenditures increase \$3.2m primarily due to an increase in personnel costs. Personnel costs increase \$2.6m for fringe benefits, \$0.4m for salary adjustments including psychiatrist and nurse signing bonuses, offset by a salary reduction of \$1.0m from the elimination of excess unfilled clinical positions. Other major variances include an increase of \$1.0m for Milwaukee County residents placed at the state institutes, and a \$1.0m increase in drugs by reallocating the expense from the pharmacy department to the units. Offsetting the increases are a \$1.0m reduction for lower administrative and overhead cross charges from the reallocation of cross charges as Inpatient Services level off or decline, and Community Services continue to grow.

Revenue decreases \$2.8m due to higher write-offs for uninsured patients and a 7.4% reduction in Medicaid reimbursement rates from \$1,604 to \$1,486 per day.

The Behavioral Health Division has implemented improvements to ensure the health, safety, and welfare of those served, and to maintain compliance with all the Centers for Medicare and Medicaid conditions of participation for state psychiatric hospitals.

BHD continues to build interdisciplinary teams through involved recruitment strategies, retention strategies, and ongoing education and development. In addition, BHD works diligently to attract and retain highly qualified physicians, nursing personnel and crisis clinicians.

Strategic Program Area 4: Community Access to Recovery Services Division (CARSD)

Service Provision: **Mandated**

Strategic Outcome: **Self-Sufficiency / Quality of Life**

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$106,406,016	\$127,169,812	\$151,612,934	\$155,049,822	\$3,436,888
Revenues	\$86,996,532	\$104,189,269	\$117,156,225	\$125,464,131	\$8,307,906
Tax Levy	\$19,409,484	\$22,980,543	\$34,456,708	\$29,585,691	(\$4,871,017)
FTE Positions	124.10	129.10	132.70	133.80	1.10

How Well We Do It: Performance Measures					
Performance Measure	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
Average Satisfaction Survey Score	Data not available	76%	77%	78%	1%
Percent with any Acute Service Utilization	Data not available	13.09%	12.05%	11.45%	(0.6%)
Percent with any emergency room utilization	Data not available	12.44%	11.20%	10.64%	(0.56%)
Percent Drug/Alcohol Abstinent	Data not available	66.71%	73.81%	77.50%	3.69%
Percent Homeless	Data not available	4.74%	4.00%	3.80%	(0.2%)
Percent Employed	Data not available	15.80%	17.38%	18.25%	(0.9%)

Strategic Overview:

CARSD consists of three separate program areas:

1. Community Mental Health and Community Crisis Services
2. Community AODA Services
3. Wraparound Milwaukee

Strategic Implementation: Community Access to Recovery Services (CARS) is the community-based mental health and substance abuse system for adults in Milwaukee County. CARS provides a variety of services to help adults with mental illness achieve the greatest possible independence and quality of life by assessing individual needs and facilitating access to appropriate community services and supports. CARS is committed to fostering independence, choice, and hope for individuals by creating an array of services that are person-centered, recovery oriented, trauma informed, and culturally intelligent. The 2018 budget sustains investment in community-based mental health care with an emphasis on recovery.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

CARS: Community Mental Health and Community Crisis Services

What We Do: Activity Data					
Activity	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
<i>Crisis Mobile Team</i>					
Mobiles Completed	Data not available	2,046	2,920	3,504	584
<i>Adult Day Treatment</i>					
Capacity	Data not available	16	24	20	(4)
<i>Intensive Outpatient Program</i>					
Capacity	Data not available	N/A	24	12	(12)
<i>Targeted Case Management</i>					
Average Enrollment	Data not available	1,366	1,553	1,602	49
<i>Community Support Program</i>					
Average Enrollment	Data not available	1,249	1,267	1,267	0
<i>Comprehensive Community Services</i>					
Average Enrollment	Data not available	523	800	1,100	300
<i>Community Recovery Services</i>					
Average Enrollment	Data not available	34	35	15	(20)

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$43,994,147	\$60,369,924	\$78,492,266	\$80,605,698	\$2,113,432
Revenues	\$26,267,847	\$39,830,411	\$47,691,600	\$53,199,057	\$5,507,457
Tax Levy	\$17,726,300	\$20,539,513	\$30,800,665	\$27,406,641	(\$3,394,024)

How Well We Do It: Performance Measures					
Performance Measure	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
CCS: Tax levy per capacity	Data not available	\$1,963	\$2,572	\$3,087	\$515
CRS: Tax levy per capacity	Data not available	\$27,391	\$32,777	\$29,623	(\$3,154)
CSP: Tax levy per capacity	Data not available	\$5,248	\$7,543	\$5,523	(\$2020)
TCM: Tax levy per capacity	Data not available	\$2,987	\$3,188	\$2,668	(\$520)
Crisis Mobile: Tax levy per mobile	Data not available	\$1,594	\$1,391	\$1,235	(\$156)

Strategic Overview:

Community Mental Health and Crisis Services includes the following service options.

1. Crisis Mobile Team
2. Adult Day Treatment
3. Intensive Outpatient Program
4. Targeted Case Management (TCM)
5. Community Support Program (CSP)
6. Comprehensive Community Services (CCS)
7. Community Recovery Services (CRS)

Strategic Implementation: CARS continues to increase enrollments into Comprehensive Community Services (CCS), which is a Medicaid entitlement that provides a coordinated and comprehensive array of recovery, treatment, and psychosocial rehabilitation services. As a part of this continued expansion, CARS staff are working with the approximately 35 individuals enrolled in Community Recovery Services (CRS) to determine which individuals should be served in CCS. CCS enrollment is expected to increase to 1,100 in 2018.

CARS has been diligently working to reduce the wait times for clients from date of referral to admission into services. CARS leadership has been assessing system needs and making changes accordingly, such as the creation of an Intake Service Manager and Intake Team to reduce the time of assessment, determination, and enrollment into services. For those individuals who are waiting for services and/or in need of only short-term services, the Care Coordination Team is able to provide direct supportive services and crisis case management services as needed to individuals with immediate need.

Redesigning the service structure of the Milwaukee County BHD Crisis Services provides the opportunity to implement changes across all of the community based crisis services (Crisis Line, Crisis Mobile Team, Crisis Stabilization Houses, Crisis Resource Centers, and Access Clinic). The redesign of the Crisis Services is being completed to meet the needs of individuals in crisis throughout the continuum of care. It also seeks to find new and inventive ways to provide the continuum of service. The redesign will increase revenue generating services by maximizing current billing practices, increasing clinical staff completion of revenue generating services, and including the Care Coordination Team. This redesign also offers opportunities to bill for Crisis Services that have previously not been billed, such as CARS Admin Coordinators. In 2018, this is projected to be a revenue increase of \$0.6m.

One service being assessed for this redesign project is the answering of the Milwaukee County Crisis Line. In 2016, the Crisis Line received 40,171 calls. An audit confirmed that BHD is using a highly paid level of clinical staff to answer calls that are related to information, general resources, and supportive talk, which all would best be completed by another resource in Milwaukee. This would improve the customer experience and also enable clinicians to complete revenue generating tasks. The cost for this enhancement is currently projected to be \$0.15m.

The 2017 budget created three additional Crisis Assessment Response Teams (CART) teams with partial funding offset from the MacArthur Foundation for one of the clinician positions to partner with the District Attorney's office to create a county-wide CART team. One of the teams was also recommended for the City of West Allis which does not have funding for a police officer to create CART. Therefore, it is being recommended that BHD provide funding for an officer for up to two years at a cost of approximately \$0.1m funded through reserves.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

BHD remains committed to sponsoring a Peer Run Respite program in Milwaukee County to strengthen the current continuum of care for individuals experiencing a mental health and/or substance abuse difficulty. Peer run respite services support an individual's recovery, decrease crisis, and help individuals to avoid hospitalizations all through supports and services from individuals with lived experience. In 2018, BHD is budgeting \$0.2m for a peer run organization to cover expenses for the exploration, design, and future implementation of a peer run respite program. The initial phase of this program, and subsequent two years, will be funded through reserves. BHD will also commit \$0.4m in 2019 and 2020 to fund implementation and operations of a Peer Run Respite in Milwaukee.

\$0.1m is budgeted to assist BHD clients in need of transportation make scheduled clinical appointments. BHD will develop a system to identify individuals in need of assistance, verify their participation in BHD programming, and a method for purchase and/or reimbursement.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Community Mental Health Financials by Major Program Area					
Activity	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
<i>Crisis Mobile Team</i>					
Expense	\$3,246,812	\$3,513,923	\$4,624,954	\$4,822,208	\$197,254
Revenue	\$247,367	\$251,691	\$299,850	\$645,214	\$345,364
Tax Levy	\$2,999,445	\$3,262,232	\$4,325,104	\$4,176,994	(\$148,110)
<i>Adult Day Treatment</i>					
Expense	\$2,609,360	\$2,328,373	\$2,524,135	\$1,885,860	(\$638,275)
Revenue	\$1,872,799	\$1,729,483	\$1,899,752	\$1,811,035	(\$88,717)
Tax Levy	\$736,562	\$598,890	\$624,383	\$74,825	(\$638,275)
<i>Intensive Outpatient Program¹</i>					
Expense	-	-	\$867,603	\$533,912	(\$333,691)
Revenue	-	-	\$224,946	\$280,591	\$56,005
Tax Levy	-	-	\$642,657	\$252,961	(\$389,696)
<i>Targeted Case Management</i>					
Expense	\$5,590	\$6,424,896	\$6,839,307	\$6,665,960	(\$173,347)
Revenue	\$10,729	\$2,345,033	\$1,983,749	\$2,416,464	\$432,715
Tax Levy	(\$5,138)	\$4,079,863	\$4,855,558	\$4,249,496	(\$606,062)
<i>Community Support Program²</i>					
Expense	-	\$14,671,260	\$17,263,767	\$16,795,089	(\$468,678)
Revenue	-	\$7,694,410	\$8,462,056	\$9,880,388	\$1,418,332
Tax Levy	-	\$6,976,850	\$8,801,711	\$6,914,701	(\$1,887,010)
<i>Comprehensive Community Services</i>					
Expense	\$2,131,360	\$7,168,035	\$14,184,583	\$19,811,612	\$5,627,059
Revenue	\$1,871,023	\$6,141,203	\$11,628,000	\$16,513,433	\$4,885,433
Tax Levy	\$260,337	\$1,026,831	\$2,556,583	\$3,298,179	\$741,596
<i>Community Recovery Services</i>					
Expense	\$2,903,323	\$1,679,945	\$1,927,011	\$746,482	(\$1,180,529)
Revenue	\$1,016,279	\$748,650	\$819,261	\$305,053	(\$514,208)
Tax Levy	\$1,887,044	\$931,295	\$1,107,750	\$441,429	(\$666,321)
<i>Community-Based Residential³</i>					
Expense	-	-	-	\$11,950,929	\$11,950,929
Revenue	-	-	-	\$9,780,317	\$9,780,317
Tax Levy	-	-	-	\$2,170,612	\$2,170,612
<i>CARS Purchase of Service²</i>					
Expense	-	-	-	\$4,873,005	\$4,873,005
Revenue	-	-	-	\$4,576,968	\$4,576,968
Tax Levy	-	-	-	\$296,037	\$296,037

¹ Intensive Outpatient Program does not have 2015 Actual or 2016 Actual financials because this program did not exist at that time.

² The Community Support Program does not have 2015 Actuals financials because the program did not exist as a standard cost centers at that time.

³ CARS Community-Based Residential and CARS Purchase of Service do not have 2015 Actual, 2016 Actual or 2017 Budget financials because these programs did not exist as standalone cost centers at that time.

CARS: Community AODA Services

What We Do: Activity Data					
Activity	2015 Actual	2016 Actual	2017 Target	2018 Target	2017/2018 Variance
Detoxification					
Admissions	Data not available.	6,316	5,000	6,000	1,000
AODAResidential					
Capacity	Data not available.	83	112	112	0
Day Treatment – AODA					
Average Enrollment ⁴	Data not available.	15	15	15	0
Recovery House					
Average Enrollment	Data not available.	10	10	10	0
RecoverySupportCoordination					
Average Enrollment	Data not available.	292	230	295	65
RecoverySupportServices					
Average Enrollment	Data not available.	197	200	200	0

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$13,750,024	\$14,326,356	\$15,408,225	\$13,996,365	(\$1,411,860)
Revenues	\$11,977,157	\$11,628,164	\$12,140,593	\$11,710,592	(\$430,001)
Tax Levy	\$1,772,867	\$2,698,192	\$3,267,632	\$2,285,773	(\$981,859)

Strategic Overview: Milwaukee County’s community AODA services is an alcohol, drug treatment, and recovery service system. These services are open to Milwaukee County residents ages 18-59 with a history of alcohol or drug use. Priority is given to families with children and pregnant women (regardless of age).

³ The 2017 budget narrative erroneously stated "number of individuals served" rather than "average enrollment" for the following programs: Day Treatment – AODA, Recovery House, and Recovery Support Services. These numbers have been corrected for the 2018 budget narrative.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Milwaukee County BHD has a provider network for AODA residential services that provides a continuum of services which include traditional residential, medically monitored residential, and co-occurring bio-medically monitored residential.

Strategic Implementation: In 2017, BHD authorized a rate increase for AODA residential providers at an estimated impact of \$0.8m annually in 2018. The 2018 STR Grant of \$0.5m and FDTC Grant of \$0.4m are budgeted in support of AODA services.

Total expenditures decrease by \$2.1m. Of that, \$2.9m in personnel, vendor training, service and commodity costs are transferred to the CARS Administration and CARS Purchase of Service cost centers. Grant revenue of \$0.9m in support of these programs is also transferred to the CARS Administration and CARS Purchase of Service cost centers. The \$2.9m expenditure reduction is partially offset by a \$0.8m AODA residential increase.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

AODA Financials by Major Program Area⁵					
Activity	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
<i>Detoxification</i>					
Expense	-	-	-	\$2,975,816	\$2,975,816
Revenue	-	-	-	\$2,333,731	\$2,333,731
Tax Levy	-	-	-	\$642,085	\$642,085
<i>AODA Residential</i>					
Expense	-	-	-	\$5,925,339	\$5,925,339
Revenue	-	-	-	\$5,279,316	\$5,279,316
Tax Levy	-	-	-	\$646,023	\$646,023
<i>Day Treatment - AODA</i>					
Expense	-	-	-	\$433,485	\$433,485
Revenue	-	-	-	\$764,832	\$764,832
Tax Levy	-	-	-	(\$331,347)	(\$331,347)
<i>Recovery House</i>					
Expense	-	-	-	\$167,168	\$167,168
Revenue	-	-	-	\$60,750	\$60,750
Tax Levy	-	-	-	\$106,418	\$106,418
<i>Recovery Support Coordination</i>					
Expense	-	-	-	\$2,258,076	\$2,258,076
Revenue	-	-	-	\$2,291,471	\$2,291,471
Tax Levy	-	-	-	(\$33,395)	(\$33,395)
<i>Recovery Support Services</i>					
Expense	-	-	-	\$837,088	\$837,088
Revenue	-	-	-	\$615,132	\$615,132
Tax Levy	-	-	-	\$221,956	\$221,956
<i>Medication Assisted Treatment</i>					
Expense	-	-	-	\$78,162	\$78,162
Revenue	-	-	-	\$16,000	\$16,000
Tax Levy	-	-	-	\$62,162	\$62,162
<i>Prevention</i>					
Expense	-	-	-	\$1,235,744	\$1,235,744
Revenue	-	-	-	\$316,000	\$316,000
Tax Levy	-	-	-	\$919,744	\$919,744

⁵ 2015 Actual, 2016 Actual and 2017 Budget financials are not available because these programs were not budgeted at this level of detail prior to 2018.

Children and Youth Services/ Wraparound Milwaukee

What We Do: Activity Data					
Activity	2015 Actual	2016 Actual	2017 Target	2018 Target	2018/2017 Variance
<i>Family Intervention Support Services</i>					
Number of Clients Served	No Data Available	583	800	600	(200)
<i>Wraparound</i>					
Average Total Enrollment	No Data Available	1,227	1,350	1,309	(41)
Average Daily Number of REACH enrollees	No Data Available	488	550	575	25
<i>Mobile Urgent Treatment</i>					
Number of Clients Seen (face-to-face)	No Data Available	1,519	1,750	1,750	0
<i>Children's Comprehensive Community Services</i>					
Average Total Census	No Data Available	N/A	35	100	65

How We Do It: Program Budget Summary					
Category	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Expenditures	\$48,661,844	\$52,473,532	\$57,712,443	\$60,582,513	\$2,870,070
Revenues	\$48,751,527	\$52,730,695	\$57,324,032	\$60,590,482	\$3,266,450
Tax Levy	(\$89,683)	(\$257,163)	\$388,411	(\$7,969)	(\$396,380)

How Well We Do It: Performance Measures					
Performance Measures	2015 Actual	2016 Actual	2017 Target	2018 Target	2017/2018 Variance
Family Satisfaction with Care Coordination (5.0 Scale)	Data not available.	4.6	>= 4.0	>= 4.0	0
Percentage of enrollee days in a home type setting (enrolled through Juvenile Justice system)	Data not available.	60.2%	>= 75%	>= 75%	0
Percentage of youth who achieved permanency at disenrollment	Data not available.	53.6%	>= 70%	>= 70%	0
Average level of "Needs Met" at disenrollment (Scale of 1-5)	Data not available.	2.9	>= 3.0	>= 3.0	0
Family Satisfaction with Comprehensive Community Services (CCS)	Data not available.	N/A	>= 4.0	>= 4.0	0
Percentage of Monthly Face-to-Face Contact (CCS)	Data not available.	N/A	>= 75%	>= 75%	0
Assessment and Initial Service/Care Plan completed within the first 30 days of enrollment (CCS)	Data not available.	N/A	>= 85%	>= 85%	0

Strategic Overview: Milwaukee County's System of Care for children and youth serve families with children ranging from age 5 to young adults, 23. All options in the system or care utilize the Wraparound Practice Model which relies heavily on care coordination and offer a range of service and support options that are individualized to meet the needs of each child/young adult and their family in the community in which they live based on choice. The first three options listed below are those programs in which enrollment is made into our specialized Managed Care carve out. This managed care entity, called Wraparound Milwaukee has the enrollment criteria of children who have complex needs, who either have been or are at risk of out of home care including repeated hospitalization, have a functional impairment, have a diagnosis and are involved in two or more systems. Due to our ability to manage resources well and form many valuable partnerships there are other options available for youth as well. Once a determination of eligibility and need is made the following options are available under the Wraparound umbrella:

- Wraparound Milwaukee for children who are system involved, have complex needs including a high degree of need in the area of mental health and are at risk of hospitalization or out of home care.
- REACH, Reaching, Engaging and Assisting Children serves children who are not on court orders through the Delinquency or Child Welfare System but still meet the qualifications for Wraparound Milwaukee
- Project O-Yeah for young adults, ages 17-23 who are experiencing emotional and behavioral challenges that are interfering in their ability to successfully transition to adulthood. Young adults have a transitional coordinator assigned to them who have access to the Wraparound Milwaukee Provider Network with an emphasis on support and services on life skills, housing, education and employment.
- FISS, Family Intervention and Support Services which is a contract from Child Welfare to assist in children not being placed out of their home. FISS also utilizes a care coordination model but is shorter term, aimed at stabilization and prevention and is designed to assist families in preventing court and system involvement. Children who are enrolled have behavioral issues but do not require a diagnosis.
- CCS, Comprehensive Community Services for Children who do not meet the enrollment criteria for Wraparound Milwaukee and REACH but have needs in the area of mental health and/or substance abuse. CCS is a voluntary program which uses a care coordination approach. It is designed to provide support and services to children and young adults who are Medicaid eligible and have a desire to work with a team to reach their desired goals for recovery. In 2018, CCS enrollment is anticipated to expand to 100 children.
- Mobile Urgent Treatment which is the crisis response team available to all of Milwaukee County. Mobile Urgent provides 24/7 crisis intervention services to any family residing in Milwaukee County. The Trauma Response team who works specifically with District 5 and 7 are a team works as part of the Mobile Urgent Treatment Team.

Strategic Implementation: Within all of the options listed there are a number of programs, services, and supports available all aimed at providing comprehensive, individualized, and cost effective care to children with complex mental health and emotional needs. The expectation for 2018 for Wraparound Milwaukee is a daily enrollment of 1,309 children and their families. The anticipated decrease in this option is due to the trend of less children going into both the Delinquency system and Child Welfare system overall. The expectation is to see an increase in enrollments for both REACH and CCS as we reach out to new potential referral sources and expand the options for prevention. The number of clients seen by Mobile Urgent Team may exceed projections however the current numbers reflect actual staff capacity. Therefore, we will depend more heavily on the use of Crisis Stabilization services within the Provider Network as well as seek additional staff expansion opportunities for 2018/19 through potential contract arrangements with Child Welfare and the City for trauma response teams and/or prevention teams.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Wraparound Services by Program Area⁶					
Program	2015 Actual	2016 Actual	2017 Budget	2018 Budget	2018/2017 Variance
Wraparound Services					
Expense	-	-	-	\$32,525,839	\$32,525,839
Revenue	-	-	-	\$33,142,725	\$33,142,725
Tax Levy	-	-	-	(\$616,886)	(\$616,886)
REACH					
Expense	-	-	-	\$20,144,608	\$20,144,608
Revenue	-	-	-	\$20,252,400	\$20,252,400
Tax Levy	-	-	-	(\$107,792)	(\$107,792)
Project O-Yeah					
Expense	-	-	-	\$3,688,028	\$3,688,028
Revenue	-	-	-	\$3,454,651	\$3,454,651
Tax Levy	-	-	-	\$233,377	\$233,377
MUTT					
Expense	-	-	-	\$1,391,722	\$1,391,722
Revenue	-	-	-	\$1,490,664	\$1,490,664
Tax Levy	-	-	-	(\$98,942)	(\$98,942)
Youth CCS					
Expense	-	-	-	\$1,875,272	\$1,875,272
Revenue	-	-	-	\$1,655,042	\$1,655,042
Tax Levy	-	-	-	\$220,230	\$220,230
FISS					
Expense	-	-	-	\$957,044	\$957,044
Revenue	-	-	-	\$595,000	\$595,000
Tax Levy	-	-	-	\$362,044	\$362,044

⁶ 2015 Actuals, 2016 Actual and 2017 Budget financials are not available because these programs were not budgeted at this level of detail prior to 2018.

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Behavioral Health Division Budgeted Positions				
Position Titles	2017 Adopted	2018 Budgeted	Variance	Explanation
Administrator BH	1.00	1.00	0.00	
Administrator Environmental Svc	1.00	1.00	0.00	
Administrator Financial BHD	1.00	1.00	0.00	
Administrator Medical Records	1.00	1.00	0.00	
Advanced Nurse Prescriber	6.00	6.25	0.25	Current Year Action
Advocate Clients Rights	1.00	1.00	0.00	
Analyst Budget and Mgmt BHD	0.00	1.00	1.00	Current Year Action
Analyst Health Data	1.00	1.00	0.00	
Analyst Quality Assurance	1.00	1.00	0.00	
Analyst Technical Support	1.00	1.00	0.00	
Assistant Administrative	5.00	4.00	(1.00)	Current Year Action
Assistant Clerical	1.00	1.00	0.00	
Assistant Director Nursing	1.00	0.00	(1.00)	Abolish
Assistant Distribution	2.00	2.00	0.00	
Assistant Executive BHD	4.00	6.00	2.00	Current Year Action
Assistant Medical Billing	7.00	5.00	(2.00)	Abolish
Assistant Office	11.00	11.00	0.00	
Assistant Purchasing	1.00	1.00	0.00	
Associate Accountant	1.00	1.00	0.00	
Associate Director Wraparound	1.00	1.00	0.00	
Chaplain	0.70	0.70	0.00	
Chief Administrative Officer	1.00	0.00	(1.00)	Current Year Action
Chief Director Medical	1.00	1.00	0.00	
Chief Nursing Officer	1.00	1.00	0.00	
Chief Officer Clinical	1.00	1.00	0.00	

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Behavioral Health Division Budgeted Positions				
Position Titles	2017 Adopted	2018 Budgeted	Variance	Explanation
Chief Operations Officer BHD	0.00	1.00	1.00	Current Year Action
Chief Psychologist	1.00	1.00	0.00	
Clerk Accounts Receivable	3.00	2.00	(1.00)	Abolish
Clerk Clothing Supply	1.00	1.00	0.00	
Clerk Health Unit	13.00	15.00	2.00	Current Year Action
Clerk Medical Records	5.00	5.00	0.00	
Clerk Supply	2.00	2.00	0.00	
Clinical Informaticist	0.00	1.00	1.00	Current Year Action
Clinician Emergency Services	20.00	20.00	0.00	
CNA	111.00	81.50	(29.50)	Abolish
Coder Medical Records	1.00	1.00	0.00	
Compliance Officer	1.00	0.00	(1.00)	Abolish
Compliance Auditor	0.00	4.00	4.00	Current Year Action
Contract Management Assistant	0.00	1.00	1.00	Current Year Action
Coord Communications	0.00	2.00	2.00	Current Year Action
Coord Health Care Risk Mngmnt	0.00	1.00	1.00	Current Year Action
Coordinator Community Relation	1.00	0.00	(1.00)	Current Year Action
Coordinator Contract Services	1.00	0.00	(1.00)	Current Year Action
Coordinator Administrative	20.00	20.00	0.00	
Coordinator Billing	7.00	5.00	(2.00)	Abolish
Coordinator Care Management	5.00	5.00	0.00	
Coordinator Community Service	1.00	1.00	0.00	
Coordinator Contract Services	0.00	4.00	4.00	Current Year Action
Coordinator Education	1.00	0.00	(1.00)	Abolish
Coordinator Grant Program	1.00	1.00	0.00	
Coordinator Health Prevention	1.00	1.00	0.00	

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Behavioral Health Division Budgeted Positions				
Position Titles	2017 Adopted	2018 Budgeted	Variance	Explanation
Coordinator Integrated Service	7.00	6.00	(1.00)	Abolish
Coordinator Med Staff	1.00	1.00	0.00	
Coordinator Psych Crisis Svcs	3.00	3.00	0.00	
Coordinator Quality Assurance	4.00	1.00	(3.00)	Current Year Action
Coordinator Quality Improvement	2.00	1.00	(1.00)	Abolish
Decorator Facilities	1.00	1.00	0.00	
Deputy Administrator Community	1.00	1.00	0.00	
Dietitian	1.00	1.00	0.00	
Dir Provider Srv Contracts BHD	1.00	0.00	(1.00)	Current Year Action
Director of Community Centers	0.00	1.00	1.00	Current Year Action
Director Approval and Authoriz	1.00	0.00	(1.00)	Abolish
Director Clinical Program Psyc	10.50	9.00	(1.50)	Abolish
Director Community Services	1.00	1.00	0.00	
Director Financial Services	1.00	1.00	0.00	
Director Medical	4.00	5.00	1.00	Current Year Action
Director Outpat Treatmt Pgms	0.00	1.00	1.00	Current Year Action
Director Wraparound Program	1.00	1.00	0.00	
Dir Network Develop Contract	0.00	1.00	1.00	Current Year Action
Electrical Mech	1.00	1.00	0.00	
Evaluator Program	2.00	2.00	0.00	
Housekeeper	2.00	2.00	0.00	
Liason Children's Court	1.00	1.00	0.00	
Liaison Childrens Court	1.00	1.00	0.00	
Manager Comm Support Programs	1.00	0.00	(1.00)	Abolish
Manager Accounting	1.00	1.00	0.00	

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Behavioral Health Division Budgeted Positions				
Position Titles	2017 Adopted	2018 Budgeted	Variance	Explanation
Manager Administration Svcs BHD	1.00	1.00	0.00	
Manager Case Management UR	1.00	1.00	0.00	
Manager Clinical Program	1.00	1.00	0.00	
Manager Contract Compliance	0.00	1.00	1.00	Current Year Action
Manager Contracts Network Srvc	0.00	1.00	1.00	Current Year Action
Manager Facilities Op BHD	1.00	1.00	0.00	
Manager Intake Services	1.00	1.00	0.00	
Manager Integrated Service CCS	0.00	1.00	1.00	Current Year Action
Manager Integrated Services	1.00	2.00	1.00	Current Year Action
Manager Medical Services	1.00	1.00	0.00	
Manager Nurse	7.00	6.00	(1.00)	Abolish
Manager Operations Fiscal	1.00	1.00	0.00	
Manager Patient Access	1.00	1.00	0.00	
Manager Program	6.00	6.00	0.00	
Manager Quality Assurance	0.00	2.00	2.00	Current Year Action
Manager Transitional Services	1.00	1.00	0.00	
Mgr Pgm Provider Network	1.00	0.00	(1.00)	Abolish
Officer Safety	1.00	1.00	0.00	
Painter Bldgs	0.00	0.60	0.60	Create
Patient Accounts Manager	1.00	1.00	0.00	
Physician	2.00	2.00	0.00	
Plumber Supv	1.00	1.00	0.00	
Project Manager BHD	0.00	5.00	5.00	Current Year Action
Psychiatrist Child BHD	3.50	3.50	0.00	
Psychiatrist Inpatient	6.50	5.50	(1.00)	Abolish
Psychiatrist Staff	8.80	8.80	0.00	

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Behavioral Health Division Budgeted Positions

Position Titles	2017 Adopted	2018 Budgeted	Variance	Explanation
Psychological Associate	1.00	2.00	1.00	Current Year Action
Psychologist	8.05	7.30	(0.75)	Abolish
Psychology Postdoc Fellow U	2.00	2.00	0.00	
QA Coordinator	1.00	1.00	0.00	
QA/QI Manager	1.00	1.00	0.00	
Representative Admissions	8.45	8.50	0.05	Fund
Representative Legal Services	3.00	3.00	0.00	
RN	89.50	78.50	(11.00)	Abolish
RN Educator	3.00	5.00	2.00	Current Year Action
RN Infection Control	1.00	1.00	0.00	
RN Manager Quality Improvement	1.00	1.00	0.00	
RN Risk Management	1.00	1.00	0.00	
RN Utilization Review	7.50	7.50	0.00	
Specialist Developmental Disab	1.00	0.00	(1.00)	Current Year Action
Specialist Clinical Nurse	0.00	1.00	1.00	Current Year Action
Specialist Collections	1.00	1.00	0.00	
Specialist Compliance	5.00	0.00	(5.00)	Current Year Action
Specialist Credentialing	3.00	3.00	0.00	
Specialist Enrollment	0.00	2.00	2.00	Current Year Action
Specialist Provider Network	1.00	0.00	(1.00)	Current Year Action
Specialist Wraparound Systems	0.00	1.00	1.00	Current Year Action
Sr Accountant	2.00	2.00	0.00	
Sr Analyst Budget	2.00	1.00	(1.00)	Current Year Action
Sr Assistant Executive	1.00	1.00	0.00	
Sr Revenue Cycle Analyst	1.00	1.00	0.00	
Supervisor Maintenance	1.00	1.00	0.00	

MILWAUKEE COUNTY MENTAL HEALTH BOARD (6300) BUDGET

Department: **Behavioral Health Division**

UNIT NO. **6300**

FUND: **General — 0077**

Behavioral Health Division Budgeted Positions				
Position Titles	2017 Adopted	2018 Budgeted	Variance	Explanation
Supervisor Medical Records BHD	2.00	2.00	0.00	
Supervisor Nursing	4.50	4.50	0.00	
Supervisor Office Management	1.00	1.00	0.00	
Technician Quality Assurance	1.00	1.00	0.00	
Therapist Music	3.00	3.00	0.00	
Therapist Occupational	11.00	7.00	(4.00)	Abolish
Worker Maintenance	10.00	10.00	0.00	
Worker Psych Social	17.00	19.00	2.00	Current Year Action
Full-Time Total	539.00	505.15	(33.85)	
Advanced Nurse Prescriber Pool	0.62	0.82	0.20	Fund
CNA Pool	0.10	0.04	(0.06)	Unfund
Dir Clinical Prog Psych BH Hr	0.04	0.06	0.02	Fund
Occupational Therapist Pool	1.00	0.82	(0.18)	Unfund
Physician Hourly	5.00	4.89	(0.11)	Unfund
Psych Social Wkr Pool	2.86	1.34	(1.52)	Unfund
Psychiatrist Staff-Hourly	1.82	6.79	4.97	Fund
RN Pool	1.20	7.59	6.39	Fund
Supervisor Nursing Pool	2.00	1.99	(0.01)	Unfund
Part-Time Total	14.64	24.34	9.70	
Grand Total	553.60	529.49	(24.11)	