

MARVIN PRATT

INTERIM COUNTY EXECUTIVE

Date: March 28, 2011

To: Lee Holloway, Chairman, County Board of Supervisors

From: Marvin Pratt, Interim County Executive

Subject: **Appointment to the Milwaukee County Sports Authority Board**

Referred
MAR 29 2011
County Board
Chairman

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in County Board Resolutions File No. 99-549 and 02-576, I am hereby appointing the LeFreddie Hunt to serve on the Milwaukee County Youth Sports Authority Board.

The terms for Mr. Hunt will expire April 1, 2012. Attached please find background information on Mr. Hunt for your review.

Your consideration and confirmation will be appreciated.

A handwritten signature in black ink, appearing to read "Marvin Pratt", written over a horizontal line.

Marvin Pratt
Interim Milwaukee County Executive

Attachments

MP:db

cc: Supervisor Peggy West, Chair, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff, County Board

LaFreddie Hunt Jr.
5232 North 34th Street
Milwaukee, WI 53209
(414) 461-3057

My objective is to obtain a coaching job where I can help build a girls basketball program and to be able to share my experiences and training with young athletes.

Work History:

- 2010- Present **North Division High School**, Coached Girls Basketball Team
- 2009 – Present **Milwaukee Public School- Vel Phillips**, Paraprofessional, work one on one with special Ed Students
- 1991- 2009 **Cornerstone Achievement Academy**, for the last 18 years I taught Physical Education, Health, Sociology and Founder and Head Coach for Alternative High School boys and girls basketball league and team
- 1999- Present **New Creation For Milwaukee's Children & Youth, Inc.**
Founder, Executive Director, and Director of Basketball Camp
- 2003- Present **University High School of Milwaukee**, Assistant Girls Varsity Basketball Coach – Under the Leadership of Mike Snyder
- 2002- 2003 **Sherwood High School** – Assistant Boys Varsity Basketball Coach – Under the leadership of Michael Holloway
- 2000 – 2003 **Sherwood Intermediate School**, coached 7th and 8th grade boys' basketball
- 1998 – 2000 **Garden Homes Elementary School**, coached boys and girls basketball team.
- Additional:** Coached AAU (18-4) and Badger State (10-1) 17 and under.

Education:

1980 - 1984 Graduated for Hamilton High School
1986 -1987 Henderson State University, Arkadelphia AR.
1993 -1995 Milwaukee Area Technical College, Mequon WI
2007-2009 Milwaukee Area Technical College, Downtown

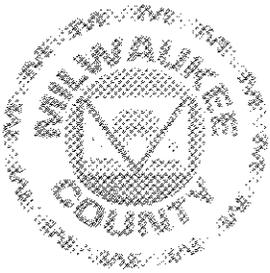
Special Training:

1983 – 1991 United States Army Reserve
Nike Championship Basketball Clinics in Chicago Il, Waukesha
WI, Concordia College, Milwaukee, and Marquette Coaches
Clinic, Milwaukee, WI
Nike Coaches Clinic WI Dells (2010)
Member of W.B.C.A (Wisconsin Basketball Coaches Association)

Achievements:

2010 Badger State Games Champion (Boys 15 and Under)
2010 NY2 LA – 15 and Under Champs (Gold Division)
2010 15 and Under won Baylou High School League
2010 MPS 2nd PLACE Elementry School

Won 4 Championships for Alternative High School League
Elementary School Record of 29-3, with 1 Championship, and
runner up
YDP Youth Diversion 3 Championships
PAC 8 Division Champs
SDC Basketball League 1 Championship
Multiple 3 on 3 championships youth Championships



MARVIN PRATT

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To: Lee Holloway, Chairman, County Board of Supervisors
From: Marvin Pratt, Interim County Executive
Subject: **Appointment to the Milwaukee County Sports Authority Board**

Referred

MAR 29 2011

County Board
Chairman

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in County Board Resolutions File No. 99-549 and 02-576, I am hereby appointing the Jacqueline Mann to serve on the Milwaukee County Youth Sports Authority Board.

The terms for Ms. Mann will expire April 1, 2013. Attached please find background information on Ms. Mann for your review.

Your consideration and confirmation will be appreciated.

A handwritten signature in black ink, appearing to read "Marvin Pratt", written over a horizontal line.

Marvin Pratt
Interim Milwaukee County Executive

Attachments

MP:db

cc: Supervisor Peggy West, Chair, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff, County Board

Biography

Jacqueline M. Mann

Jacqueline Mann is Project Director for the *Safe Schools/Healthy Students* Initiative in Milwaukee Public Schools (MPS). As Director, Ms. Mann provides district oversight of an 8.5 million dollar federally funded grant, which includes implementation of a logic model developed to provide support services to 37 both public and private schools throughout the city of Milwaukee. This role includes organizing community partnerships that support the social-emotional programming of student in grades K-12. Current partnerships include the Milwaukee county District Attorney's Office, the Police Department, the Fire Department, UWM, Children's Hospital and a host of other business and community organizations.

Jacqueline Mann's journey within Milwaukee Public Schools began over 14 years ago as a staff member in the Milwaukee Board of School Directors' business office, the Office of Board Governance. As the Information Officer / Constituent Ombudsperson for the Board, Ms. Mann was afforded the opportunity to gain extensive knowledge in the governance of various elected bodies and worked as the primary liaison between the Board of Directors and their 9 different constituencies, other governmental officials, the MPS Superintendent and Administration.

As the Information Officer, Ms. Mann has researched a variety of issues related to the education of children in the city of Milwaukee, including the public education funding structure, legislative and district policies, district-wide records management and various Board governance structures.

Well versed in contract negotiations, Ms. Mann has been an intricate part of contracted school advocacy. Ms. Mann has been able to foster relationships to engage various advocacies in positive conversations and has garnered supports for public education. As the Director for Safe Schools/Healthy Students, Ms. Mann has been able to expand existing partnerships and develop new partnerships that have resulted in additional wraparound services to compliment the mission of educating the 'whole child'.

Ms. Mann employees over 10 years experience in oversight of analytical, investigative, and management processes to resolve constituent complaints and best practices in being responsive to the public. Acting as the frontline agent to the Board of School Directors constituency, Ms. Mann is proud to be viewed as a navigator for parents, and as an MPS information source for the general public. Of the many hats that Ms. Mann wears, her favorite roles are that of wife and mother of Taeshi, Justice and Trenton, all MPS students.

Ms. Mann is a native of Milwaukee and proud product of Milwaukee Public Schools, Ms. Mann received her High School Education at Milwaukee Trade and Technical High School, Bachelor of Business Administration (BA) Degree with an emphasis in Criminal Justice, from Concordia University, Wisconsin in 1999. She completed her MBA and Masters Degree in Marketing at the University of Phoenix, at the Brookfield Wisconsin campus, and is currently pursuing her Ph.D. at the University of Wisconsin-Milwaukee, where she has taught courses.

Ms. Mann is a member of the Milwaukee Police Department Homicide Review Commission, the Juvenile Justice Subcommittee, the Milwaukee Fire Department's Survive Alive Board, Marquette University Community Conferencing Planning Council, and the Young Milwaukee Professionals Organization.

Ms. Mann's current focus is to provide a continuum of the great works that has already begun through the SS/HS Initiative. Her hope is that one day all children, regardless of where they attend school in this great city, will experience a safe learning environment, and be afforded an equitably funded and equal opportunity education.

Professional Experience

- Over 14 Years Public Relations and Education experience
- Over 14 years Policy Analysis - Developed analysis and reports on administrative actions prompting Board policies and operational changes.
- 10 years Budget Analysis Experience - Formulates analysis of the district's 936 million dollar annual budget for purpose of Board discussion and review prior to Board approval.
- 10 years of Charter School Petition and Proposal review
- 10 years of Contract development, compliance and negotiations
- 15 Years community development proposal development and facilitation
- 10 Years of NPO Administration, proposal writing, implementation and evaluation
- 15 Years of Business Development, conflict resolution and relationship building
- 10 years professional training experience
- 10 Years of public/government as well as private organizational marketing plan development
- 10 Years of project management and assessment

PROJECT DIRECTOR, SAFE SCHOOLS/HEALTHY STUDENTS **2010 to present**
MILWAUKEE PUBLIC SCHOOLS

- Provides district-wide oversight of 8.5 million dollar federal grant through development of a logic model addressing social emotional needs of students in 36 public and private schools,
- Develops evaluation of programming, staff development, data assessment, implementation of district and community communication plan and grant requirements,
- Provides federal reports and present at School Board meetings data on the SS/HS Initiative,
- Creates systemic change through student, staff and parental training, provide parental supports,
- Implements internal infrastructure for initiative support, while developing leadership capacity, financial management, fostering relationships with district and community representatives.

BOARD INFORMATION OFFICER, BOARD OF SCHOOL DIRECTORS **1996 to 2010**
MILWAUKEE PUBLIC SCHOOLS, Office of Board Governance

- Conducts research, analyzes data, provide technical expertise and assist in the formulation and development of policies, procedures and programs.
- Provides budget analysis and crafts amendments and resolutions directing operational change.
- Oversees and manages analytical, investigative, and management processes to resolve constituent complaints and respond to public information requests.
- Facilitates communications with and among the Board, Board members, other governmental offices, the Administration, schools, constituents, and other community stakeholders as directed by the Board, a Board member, or the Director.
- Facilitates Board of Directors' Charter School Petition/proposal review panel
- Conducts contract negotiations as the Board representative along with the City Attorney
- Advocates for contracted schools autonomy and accountability

TEACHING/EDUCATIONAL INSTRUCTION EXPERIENCE

ADJUNCT PROFESSOR **2008-Present**

University of Wisconsin-Milwaukee

Instructor of Marketing for Community Based Organizations (CBO's) and Proposal Writing

- Instructed students on Marketing for Community Based Organizations
- Provide Step-by-Step instruction for proposal and grant writing for creation of a CBO

- Developed curriculum and examination material for knowledge assessment.
- Guided group discussions and projects.
- Assisted students in the development of marketing plans for non-profit and for profit organizations

Wisconsin Women's Business Initiative

- Instruct adults on business plan development

Milwaukee Public Schools

- 53rd Street School - 4th & 5th Grade, Math & Science

Milwaukee Teachers Education Center - K-8 Teacher Certification (candidate) 2002

PROFESSIONAL BUSINESS EXPERIENCE

- **15 Years experience teaching.** Experience in developing and implementing age appropriate and skills based curricula.
- **10 Years business instruction.** Entrepreneurship and business planning and development
- "How to Develop a Business Plan", Wisconsin Women's Business Initiative (WWBIG) 2004
- **Professional Development Academy Instructor,** Milwaukee Business School January-2005 to 5-2006
Developed curriculum for two courses: (1) Financial Literacy (2) Restorative Circles Facilitation
- **English Language Arts Instructor, Faith-Based Pre-College Program** March-April 2006
Developed lesson plans, instruct and provide engaging, challenging learning environment for high school students to adequately prepare for the ACT examination.
- **Finance Instructor, Church of The Living God, "Achieving Financial Freedom"** 2006
Develop curriculum for and delivered methods towards achieving financial freedom

EDUCATION

Bachelors of Business Administration, Management & Communications, BA - Concordia University

Masters of Business Administration, MBA - University of Phoenix, Brookfield, WI

Masters of Marketing Administration, MMA- University of Phoenix, Brookfield, WI

Doctoral coursework in Education Administration, University of Wisconsin-Milwaukee

Volunteer Experience

Appointed Funding Executive Board/President - Church of The Living God 2004-Present
Miss Black Milwaukee Pageant - Coordinator 2007 - Present
Milwaukee French Immersion school 2010 - Present

PROFESSIONAL AFFILIATIONS & ACTIVITIES

Milwaukee Schools Historical Society

Milwaukee Metropolitan Alliance of Black School Educators (MMABSE)

National Alliance of Black School Educators (NABSE)

National Charter School Association

World Conference on Mental Health

The Heart of the Matter Presentation: Building Safe and Drug Free Schools

Gang Awareness Summit

Injury Free Coalition for Kids

Forgiveness Seminar

Marquette Law School - Urban Education Reform

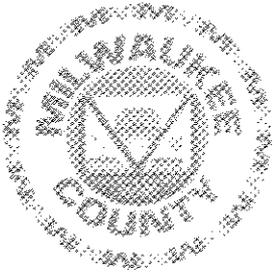
Love & Logic Conference

PROFESSIONAL PRESENTATIONS

"Increasing Brand Image through uniformity" United HealthCare, PrimeCare, Designed to develop uniform communications company wide, Milwaukee, WI, January 1996.

"Community Brainstorming - What Can We Do?" Forum designed to bridge community members, educators, clergy, and business partners -Organization Meeting. Milwaukee, WI. March 2000.

"Changing Policy to Address the Achievement Gap" Metropolitan Milwaukee Alliance of Black School Educators Annual Fall Conference Entitled "A Blueprint for Action" Milwaukee, WI. October 2005.



MARVIN PRATT

INTERIM COUNTY EXECUTIVE

HHN 3

Date: March 28, 2011
To: Lee Holloway, Chairman, County Board of Supervisors
From: Marvin Pratt, Interim County Executive
Subject: **Appointment to the Milwaukee County Sports Authority Board**

Referred

MAR 29 2011

County Board
Chairman

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in County Board Resolutions File No. 99-549 and 02-576, I am hereby appointing the Kathy Malone to serve on the Milwaukee County Youth Sports Authority Board.

The terms for Ms. Malone will expire April 1, 2012. Attached please find background information on Ms. Malone for your review.

Your consideration and confirmation will be appreciated.

A handwritten signature in black ink, appearing to read "Marvin Pratt", written over a horizontal line.

Marvin Pratt
Interim Milwaukee County Executive

Attachments

MP:db

cc: Supervisor Peggy West, Chair, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff, County Board

Kathy Malone

5705 W. Abbott Avenue ♦ Greenfield, Wisconsin 53220 ♦ (414) 421-3952 ♦ jjsllc@wi.rr.com

Objective

Consultant projects within juvenile justice field, assisting both government and private social service agencies with grant development, writing, and/or review; program assessment, development and evaluation; and project and /or personnel management utilizing skills developed by 30+ years of challenging public service.

Profile

Motivated social services professional with multiple college degrees, additional training and a successful 30+year record of direct service and administrative juvenile justice work in a public social service agency. Successful in obtaining grant funding and integrating resultant new programming and policies into system of supervision and treatment services. Experienced in training on DMC, diversion programming and other juvenile justice issues. Experienced in working with both government and non-profits on grant development, evidence-based practices and both personnel and program management. Demonstrated history of producing complex and timely documents for policy makers, grantors, Judges, and other elected officials.

Diplomatic and tactful with professionals and non-professionals at all levels. Accustomed to handling sensitive, confidential issues as well as records. A relationship builder with excellent communication skills and experienced in managing staff, program development, monitoring, and evaluation.

Flexible, likes a challenge and is able to maintain a sense of humor and work/produce under pressure.

Skills Summary

- | | | |
|-------------------------------------|--|--|
| ♦ Overall Project Management | ♦ Facilitator on DMC and other juvenile justice & court issues | ♦ Trainer on evidence-based programs & grant writing |
| ♦ Report Preparation | ♦ Program evaluation | ♦ Personnel management |
| ♦ Agency & Court Policy Development | ♦ Budget preparation | ♦ Computer Savvy |
| ♦ Program/grant development | | |

Professional Experience

JUVENILE JUSTICE PROGRAMS: DEVELOPMENT/IMPLEMENTATION/ EVALUATION

- ♦ Targeted sub-groups in juvenile justice population for specific, focused intervention using both direct service and contracted community agencies. (Examples: girls; first offenders; detainees; high risk & firearm offenders)
- ♦ Developed agency policies/procedures for programming as well as established evaluation parameters for each.
- ♦ Successfully developed and managed grants for some new funding of initiatives. (EXAMPLES: Re-entry pilot; implementation of GAIN assessment process; JDAI issues.)
- ♦ Drastically reduced correctional placements through new, successful programming for serious offenders, such that policy makers re-invested some saved \$\$'s into expanding successful diversion programming.
- ♦ Managed an annual RFP and contract process to obtain qualified community partners for services.
- ♦ Hired outside evaluators to determine needs, issues, etc., for program development and evaluation.
- ♦ Participated on several state-wide planning and policy committees.

JUVENILE JUSTICE POLICY ANALYSIS & DEVELOPMENT

- ♦ Managed several initiatives including Milwaukee County's DMC initiative from 2002 to 2007 that created a strong local collaborative producing both policy changes and a diversion from incarceration alternative for high risk males.
- ♦ Completed a detailed review of all judicial detention admission policies and departmental practices by examining hundreds of prior admissions and releases identifying sub-groups with disproportionate outcomes and trends, resulting in new policies, tools, and priorities.
- ♦ Worked with Judges, law enforcement, community partners and trained intake and supervision staff on new judicial admission policies; created procedures and accompanying new RAI tools; set up ongoing monitoring process.
- ♦ Implemented a variety of court improvement policies through new forms, procedures, etc. (EXAMPLES: Access to a variety of programming; in-court supervision reviews; and development of preliminary and supplemental court orders)

Kathy Malone

MANAGEMENT OF TRADITIONAL INTAKE AND COURT-ORDERED SUPERVISION SERVICES

- ◆ Managed all aspects of day-to-day operations of a large social service operation including a 120-bed detention facility within a juvenile court complex.
- ◆ Augmented standard supervision with contracted community support services. (EXAMPLES: group home; AODA assessments; high intensity monitoring for high risk youth.)
- ◆ Simplified access to paid, individually specific services for youth and their families through a network of community and neighborhood providers (EXAMPLES: Mentoring; tutoring recreational experiences; competency evaluations)
- ◆ Developed an orientation process for all youth new to supervision requirements.

OPERATIONS & PERSONNEL MANAGEMENT

- ◆ Provided oversight and supervision of juvenile justice division; over 180 staff including trained intake, probation, supervisory, detention, contract, and support persons.
- ◆ Performed all personnel functions including hiring, discipline etc.,
- ◆ Created work schedules, vacation, coverage policies, and supervised commodity purchases.
- ◆ Developed/presented detailed reports, including an annual budget and ancillary funding requests to policy makers; State SAG and others.

Employment History

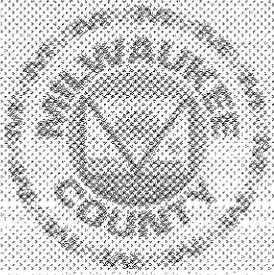
Independent juvenile justice consultant working with both public and private non-profit agencies assisting them with overall juvenile justice system management services, including grant research/development and writing; and evidence-based program development and evaluation services. **Owner/operator, 2007 to present**

Administrator for the Milwaukee County Social Services' Juvenile Court intake/probation department. Milwaukee County, the largest county in Wisconsin serves about 3500 youth and their families annually in juvenile court services. **1983-2007.**

Prior to the administrative position, supervisory and direct serve work in both juvenile justice and child welfare. **1968—1983.**

Education

University of Wisconsin – Milwaukee
MSW (May, 1975)
Bachelor's Degree in Social Welfare (May, 1967)



MARVIN PRATT

4

INTERIM COUNTY EXECUTIVE

Referred

MAR 29 2011

**County Board
Chairman**

Date: March 28, 2011
To: Lee Holloway, Chairman, County Board of Supervisors
From: Marvin Pratt, Interim County Executive
Subject: **Appointment to the Milwaukee County Sports Authority Board**

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in County Board Resolutions File No. 99-549 and 02-576, I am hereby appointing the Terry Perry to serve on the Milwaukee County Youth Sports Authority Board.

The terms for Ms. Perry will expire April 1, 2013. Attached please find background information on Ms. Perry for your review.

Your consideration and confirmation will be appreciated.

A handwritten signature in black ink, appearing to read "Marvin Pratt", with a long horizontal line extending to the right.

Marvin Pratt
Interim Milwaukee County Executive

Attachments

MP:db

cc: Supervisor Peggy West, Chair, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff, County Board

Terry Perry



Ms. Perry joined the Milwaukee Health Department in January of 2008 to develop the activities of the City's new Office of Violence Prevention. She moved to MHD from the Department of Intergovernmental Relations where she was responsible for the City's public policy interests in the areas of Public Health, Crime, Violence Against Women and Illegal Firearms. She is MHD's and the Mayor's liaison to a number of local public safety and violence prevention collaborations including Safe Streets, the Community Justice Council, Weed & Seed, the

Homicide Review Commission and the Violence Prevention Initiative of the Medical College of Wisconsin.

Ms. Perry directed the District Office of United States Congressman (now Mayor of Milwaukee) Tom Barrett and served for a decade as Coordinator of the City's Commission on Domestic Violence and Sexual Assault, the longest running government commission on violence against women in the country.

Ms. Perry lives on the west side of Milwaukee and has three children: Mary Catharine, Rory and Hannah. She is a member and Past President of the Board of Directors of the Ulster Project of Greater Milwaukee, a U.S./Northern Ireland peace program, and a Board Member of Wisconsin Community Services, a non-profit service agency that has been working to assist persons involved in the correctional system since 1912.

1 By Supervisor West

File No.

2
3
4 **A RESOLUTION**

5
6 opposing provisions in State legislation reducing funding, setting program enrollment caps,
7 and granting the Wisconsin Department of Health Services broad authority to modify the
8 Medical Assistance program without legislative oversight
9

10 WHEREAS, in February of 2011, Governor Scott Walker introduced Wisconsin Act
11 10, the 2009-2011 Budget Repair Bill, a modified version of which he signed into law on
12 March 11, 2011; and
13

14 WHEREAS, the Budget Repair Bill, contained changes to the State's Medical
15 Assistance Programs (MA) that would affect residents of Milwaukee County; and
16

17 WHEREAS, the MA Program changes include rules changes affecting reimbursement
18 models, and current and future enrollees' eligibility levels and benefits; and
19

20 WHEREAS, the MA Programs affected by the changes include, but are not limited
21 to:

- 22 ▪ BadgerCare Plus and its subprograms
 - 23 ○ CORE for Childless Adults
 - 24 ○ The Family Planning Waiver Program
- 25 ▪ Medicaid for the elderly, blind and disabled and its subprograms
 - 26 ○ Supplemental Security Income (SSI)-related Medicaid
 - 27 ○ MA Purchase Plan
 - 28 ○ Institutional and community-based long-term care programs, including
 - 29 Family Care, Community Options Waiver Program (COP), and
 - 30 Community Integration Program (CIP)
- 31 ▪ Katie Beckett Program
- 32 ▪ Senior Care

33
34
35 ; and

36
37 WHEREAS, the Wisconsin Department of Health Services (DHS) would be able to
38 make the aforementioned changes with minimal legislative oversight through the
39 administrative rule process; and
40

41 WHEREAS, Milwaukee County has concerns that residents may lose eligibility for
42 MA programs; and
43

44 WHEREAS, the MA Program changes could result in the potential loss of Federal
45 matching dollars for County-matched services, and additional changes to the payment
46 structure and amounts; and

47
48 WHEREAS, Governor Walker introduced his 2011-2013 State Budget in March,
49 2011; and

50
51 WHEREAS, the Governor's budget included a \$500 million reduction in MA
52 Program funding; and

53
54 WHEREAS, many programs operated within the Milwaukee County Department of
55 Health and Human Services Behavioral Health Division, Disabilities Services Division, and
56 Delinquency and Court Services Division are funded with Medicaid revenue, including,
57 but not limited to:

- 58 ▪ Children's Long-Term Support
- 59 ▪ Patient Care Revenue
- 60 ▪ Community Services including BHD operated and contracted services
- 61 ▪ Inpatient and long-term behavioral health care
- 62 ▪ Community-based programming such as Community Support Program (CSP),
- 63 ▪ Wraparound Milwaukee

64
65 ; and

66
67 WHEREAS, the Governor's budget also included a provision capping enrollment to
68 the Family Care Program effective June 20, 2011; and

69
70 WHEREAS, should this provision pass as part of the budget, Milwaukee County will
71 not be able to clear its waiting list of approximately 2,000 disabled individuals awaiting
72 enrollment in Family Care and will have to implement a waiting list for seniors for the first
73 time in nearly a decade; and

74
75 WHEREAS, the provisions in the aforementioned State legislation would affect a
76 substantial portion of Milwaukee County residents who currently participate in the State
77 MA Programs or are waiting to do so; now, therefore,

78
79 BE IT RESOLVED, that the Milwaukee County Board of Supervisors hereby opposes
80 the following provisions in pending and approved State legislation that would adversely
81 affect residents of Milwaukee County:

- 82
83 ▪ The broad authority given to the Department of Health Services to modify
84 the medical assistance program with limited legislative oversight, which was
85 included in the Budget Repair Bill;

86

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- The \$500 million reduction in Medical Assistance included in the 2011-2013 State Budget introduced by the Governor;
 - The cap on enrollment into the Family Care program included in the 2011-2013 State Budget introduced by the Governor;
- ; and
- BE IT FURTHER RESOLVED, that the Milwaukee County Board directs Intergovernmental Relations staff to communicate the Board’s position on these topics to the Milwaukee County legislative delegation and other appropriate State officials.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: April 7, 2011

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: A resolution opposing provisions in State legislation reducing funding, setting program enrollment caps, and granting the Wisconsin Department of Health Services broad authority to modify the Medical Assistance program without legislative oversight.

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact
<input checked="" type="checkbox"/> Existing Staff Time Required
<input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below)
<input type="checkbox"/> Absorbed Within Agency's Budget
<input type="checkbox"/> Not Absorbed Within Agency's Budget
<input type="checkbox"/> Decrease Operating Expenditures
<input type="checkbox"/> Increase Operating Revenues
<input type="checkbox"/> Decrease Operating Revenues | <input type="checkbox"/> Increase Capital Expenditures
<input type="checkbox"/> Decrease Capital Expenditures
<input type="checkbox"/> Increase Capital Revenues
<input type="checkbox"/> Decrease Capital Revenues
<input type="checkbox"/> Use of contingent funds |
|--|--|

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.

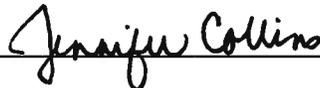
- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current 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.

This resolution opposes provisions in State legislation reducing funding, setting program enrollment caps, and granting the Wisconsin Department of Health Services broad authority to modify the Medical Assistance program without legislative oversight. Milwaukee County Intergovernmental Relations staff are to communicate the Board's position on these topics to the Milwaukee County legislative delegation and other appropriate State officials.

There is no fiscal impact associated with this resolution other than existing staff time required to communicate the contents of this resolution to appropriate State legislators and officials.

Department/Prepared By Jennifer Collins, County Board

Authorized Signature



Did DAS-Fiscal Staff Review? Yes No

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.

1 By Supervisor West

2 File No.

3
4 **A RESOLUTION**

5
6 in support of efforts to redesign the Milwaukee County mental health system and create a Mental
7 Health Redesign Task Force to provide the County Board with data-driven implementation
8 planning
9

10 WHEREAS, over the last year-to-two years, abundant discussion has surrounded the
11 topic of mental health service delivery in Milwaukee County; and
12

13 WHEREAS, the community interest, perceived issues, and on-going program
14 development led to the release of a number of studies and suggested plans related to the
15 organization and delivery of mental health services in Milwaukee County; and
16

17 WHEREAS, included in the aforementioned studies and plans are the following:
18

- 19 ▪ Sheriff Site Safety Audit, prepared by the Office of the Sheriff, dated June 28,
20 2010;
- 21
- 22 ▪ *Transforming the Adult Mental Health Care Delivery System in Milwaukee*
23 *County*, by the Human Services Research Institute (HSRI), released in October
24 2010;
- 25
- 26 ▪ Patient Safety Audit, prepared by the Department of Audit following a request
27 from Milwaukee County Board Chairman Holloway, released in October 2010;
28
- 29 ▪ Mixed Gender Patient Care Units Study, prepared by a workgroup of Behavioral
30 Health Division (BHD) staff at the request of the Chair of the Health and Human
31 Needs Committee, advisory report presented January 26, 2011;
- 32

33 ; and
34

35 WHEREAS, in addition, the Milwaukee County Board created a Community Advisory
36 Board (File No. 10-213) in May 2010, to convene for one year and provide recommendations
37 regarding safety, linkages with community services/supports, communications with patients and
38 families/patient rights, and patient-centered care; and
39

40 WHEREAS, the Milwaukee County 2011 Adopted Budget contained provisions directing
41 the Department of Health and Human Services to examine possible mental health service-
42 delivery changes, including:
43

- 44 ▪ A plan to downsize Hilltop, Milwaukee County's Title XIX certified facility for
45 persons with developmental disabilities;
- 46

- 47 ▪ A study of crisis capacity in Milwaukee County;
48
49 ▪ Work with the State to create policies to implement 1915i, a continuing Federal
50 revenue source from CMS, in Milwaukee County while alleviating financial risk;
51
52 ; and

53
54 WHEREAS, the Milwaukee County Board also created the New Behavioral Health
55 Facility Study Committee (File No. 10-322), a special committee of five County Supervisors to
56 make recommendations regarding a new behavioral health facility, whose final report is due June
57 1, 2011; and

58
59 WHEREAS, the Milwaukee County Board approved (File No. 11-81/11-49) a plan
60 authored by Chairman Holloway, creating a mental health care pilot project to develop a model
61 for a managed care system with small facilities in the community; and

62
63 WHEREAS, the Community Advisory Board and New Behavioral Health Facility Study
64 Committee are due to issue their final recommendations prior to expiring in June 2011; and

65
66 WHEREAS, the aforementioned plans and proposals create an excellent foundation for a
67 redesign of the mental health system in Milwaukee County; and

68
69 WHEREAS, due to the quantity of inter-related proposals, mental health redesign has
70 become complex, and careful consideration is needed to ensure that redesign implementation is
71 inclusive, comprehensive, and systematic; and

72
73 WHEREAS, the structure depicted in the attached Mental Health Redesign Task Force,
74 with appointed membership from BHD and stakeholder organizations, would collaborate to
75 coordinate the various proposals into implementation recommendations; now, therefore,

76
77 BE IT RESOLVED, that the Milwaukee County Board of Supervisors hereby supports
78 the overall principle of integrating mental health care into the community; and

79
80 BE IT FURTHER RESOLVED, that the Milwaukee County Board directs the Interim
81 Director, Department of Health and Human Services and the Administrator, Behavioral Health
82 Division, to create and make appointments to the attached Mental Health Redesign Task Force
83 from the stakeholder organizations; and

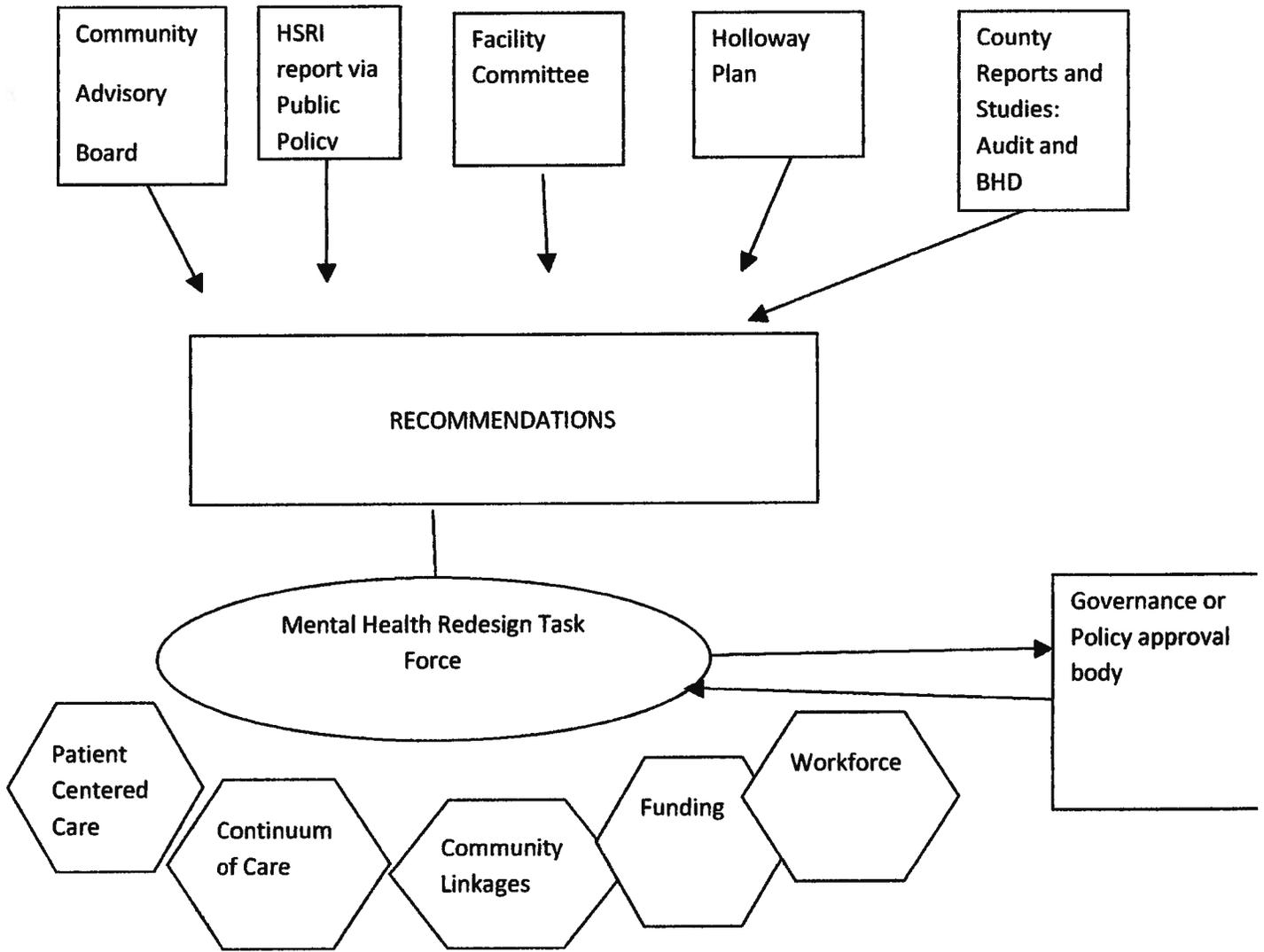
84
85 BE IT FURTHER RESOLVED, that the Mental Health Redesign Task Force shall
86 coordinate recommendations from the various mental health proposals listed below, in order to
87 create a data-driven implementation plan for the mental health redesign in Milwaukee County,
88 which shall be submitted for review and approval by the Milwaukee County Board:

- 89 ▪ Community Advisory Board
90 ▪ New Behavioral Health Facility Study Committee
91 ▪ Chairman Holloway Mental Health Pilot Project
92 ▪ HSRI Report

- 93 ▪ Department of Audit Patient Safety Audit
- 94 ▪ Sheriff Site Safety Report
- 95 ▪ Mixed Gender Unit Study
- 96 ▪ 2011 Budget Initiatives (Hilltop downsize planning, crisis capacity study, and
- 97 1915i)

98
99 ; and

100
101 BE IT FURTHER RESOLVED, prior to issuing its overall implementation plan, the
102 Mental Health Redesign Task Force shall keep the County Board informed of its efforts through
103 the submittal of quarterly reports to the Committee on Health and Human Needs, with the first
104 report, detailing committee membership and anticipated planning structure and timeline, due in
105 the June 2011 cycle.



MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: April 7, 2011

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: A resolution in support of efforts to redesign the Milwaukee County mental health system and create a Mental Health Redesign Task Force to provide the County Board with data-driven implementation planning.

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact
<input checked="" type="checkbox"/> Existing Staff Time Required
<input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below)
<input type="checkbox"/> Absorbed Within Agency's Budget
<input type="checkbox"/> Not Absorbed Within Agency's Budget
<input type="checkbox"/> Decrease Operating Expenditures
<input type="checkbox"/> Increase Operating Revenues
<input type="checkbox"/> Decrease Operating Revenues | <input type="checkbox"/> Increase Capital Expenditures
<input type="checkbox"/> Decrease Capital Expenditures
<input type="checkbox"/> Increase Capital Revenues
<input type="checkbox"/> Decrease Capital Revenues
<input type="checkbox"/> Use of contingent funds |
|--|--|

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.

This resolution supports efforts to redesign the Milwaukee County mental health system and create a Mental Health Redesign Task Force to provide the County Board with data-driven implementation planning, which will report back to the County Board through the Committee on Health and Human Needs. The Task Force will incorporate the recommendations of the various reports issued in 2010-2011, as well as the final recommendations made by other mental health planning panels, which are set to expire in the coming months.

There is no fiscal impact associated with this resolution. Should the Department of Health and Human Services require any future funding to fulfill the tasks outlined in the resolution, DHHS will have to return to the Board with a funding request at a future date.

Department/Prepared By Jennifer Collins, County Board

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

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.

County of Milwaukee
INTEROFFICE COMMUNICATION

DATE: April 7, 2011

TO: Sup. Peggy West, Chair, Committee on Health and Human Needs

FROM: Stephanie Sue Stein, Director, Department on Aging

RE: Informational report regarding the potential impact of the 2011-2013 State Budget on the Milwaukee County Department on Aging

I respectfully request that the attached informational report be scheduled for review by the Committee on Health and Human Needs at its meeting on April 13, 2011.

The proposed 2011-13 state budget released on March 1 by Governor Scott Walker includes a wide range of provisions that, if adopted, contain changes that have major fiscal implications for local government, including Milwaukee County. Proposed changes could affect the availability of services provided to Milwaukee County seniors and persons with disabilities, including the Family Care entitlement program.

Background

Family Care is an initiative of the State of Wisconsin to reorganize its Long Term Care programs for older adults and persons with disabilities. Family Care consolidates long term care services as funded by the state under Medicaid along with the Community Options Program, Community Options Program Waiver, and other Long Term Care programs and was created as an entitlement to Home and Community Based Care alongside the entitlement to institutional care under Medicaid.

The major disadvantage of the state's traditional Long Term Care programs was that they funded services through a fixed annual allocation that served only a limited number of persons each year and led to long waitlists of people in need of services throughout the state. By eliminating waitlists, Family Care provides timely services thereby preventing deterioration in client health and functional abilities and reducing the need for costly services later.

To provide access to and to administer its benefits, Family Care created two new entities – the Resource Center (RC) and the Care Management Organization (CMO). Resource Centers provide a single point of access to Family Care by conducting a comprehensive functional and financial eligibility screen on all persons who request assistance. A Care Management Organization administers the Family Care benefit for persons determined to be eligible by a Resource Center. The CMO is responsible for creating a comprehensive plan of care for each client; contracting with a wide range of service providers; and monitoring the quality of services that clients receive.

The Milwaukee County Board of Supervisors authorized the Milwaukee County Department on Aging to participate as an original Family Care Pilot and has served persons age 60 or older under Family Care since 2000. Family Care in Milwaukee County was recently expanded to serve persons age 18 to 59 with physical and development disabilities. Calendar year 2010 was the first full-year in which Milwaukee County operated both an Aging Resource Center (serving individuals age 60 and older) and a Disability Resource Center (serving individuals age 18 to 59). It was also the first full-year the CMO serves both populations in need of long-term care services. The Milwaukee County Department on Aging continues to operate the Aging Resource

Center, and the Milwaukee County Department of Health and Human Services operates the Disability Resource Center. The separate Milwaukee County Department of Family Care was created in 2010 and is now one of two care management organizations in the community.

Potential Effects of the 2011-13 State Budget

Family Care

Milwaukee County currently has approximately 8,000 seniors enrolled in Family Care. If the 2011-2013 State Budget passes in its current form, for the first time in over ten years, the waitlist would be re-established and seniors who are eligible for care will have to wait rather than getting help. Freezing slots will immediately affect hundreds of Milwaukee County older people older adults.

Every month the Milwaukee County Department on Aging Resource Center enrolls over 150 seniors into Family Care. These people have spent their money and need a nursing home level of care. The Family Care program offers that level of care while enabling seniors to remain in their homes and communities.

Because Family Care has been an entitlement for older people for over ten years, seniors and their families have been assured that they could spend their money on the care they needed and when that money was gone Family Care would be there to serve them. Instead their money will be gone and they will go on a waiting list. It is almost certain that these individuals will need to enter skilled nursing homes, as there is no other way they can get the care they need. At an average of \$5,000 a month for skilled nursing home care, the state will be spending twice as much for care the person does not want and does not need.

Some older adults have entered assisted living and community-based residential care facilities with their own resources, again being assured that when their money is gone, if they have chosen a place under contract with one of the Family Care operators, that Family Care will begin to pay for them. Unfortunately, if the budget is passed in its current form, this will not happen and seniors will be left with the only alternative, which is skilled nursing home care.

In Milwaukee County approximately 80-100 people leave the program every month due to death or moving out of the state. With a cap on Family Care, this means that every month at least 50 older people (600 annually) will go on waiting lists. Additionally, we presume these empty slots will be shared with persons on the disability waiting list, which consequently will create an even larger waiting list for older adults. These people have done their financial planning and are spending their savings to get to Medicaid eligibility with the promise there will be help. Beginning in July 2011, there will be no help.

Counties contributed a great deal of their own money to help initiate Family Care. If the proposed state budget passes, the money will no longer be available to help older adults and there simply will be no alternative to provide the support that Family Care offered.

SeniorCare

There are 92,000 seniors who rely on the value of SeniorCare, Wisconsin's Prescription Drug Assistance Program. However, based on the proposed 2011-2013 State Budget, SeniorCare would only be available to seniors who enrolled in the Medicare Part D Prescription Drug Plan. In its present form, SeniorCare is simple, inexpensive, and fair. Medicare Part D is confusing, includes complexities that change yearly, and can cost

from \$15.00 to \$150.00 per month. Moreover, forcing seniors to sign-up for Medicare Part D would likely require unplanned and unaffordable out-of-pocket costs for them. See the following section, Area Aging Programs, Benefit Specialist Program for additional information related to the impact of changes with SeniorCare.

Area Aging Programs

Specialized Transportation

Funds for the Specialized Transportation Assistance Program for Counties (s.85.21) are proposed to stay in the segregated fund with no increase or decrease in funding levels. That funding source supports both the Department's Specialized Elderly Transportation Services program and Transit Plus. The Specialized Elderly Transportation Services program assists nearly 2,000 seniors ineligible for Transit Plus. Should there be no increase in s.85.21 funding during the biennium, the Department may need to place limits on some trip purposes. Examples would be shopping, other than grocery shopping, and nursing home visitation (fewer days a week).

Benefit Specialist Program

Although no funding changes were proposed for the state's benefit specialist program, the proposed change requiring all older persons wanting to enroll in SeniorCare to also enroll in Medicare Part D will result in a substantial increase in the number of older persons needing assistance from five benefit specialists provided by Legal Action of Wisconsin under the Benefit Specialist/Legal Services program. Benefits specialists assist SeniorCare enrollees in selecting a Medicare Part D plan. On average, it takes a benefit specialist 1½ hours to assist a Medicare Part D client. With no new funding for benefit specialists, and the fact Medicare Part D is only one of several areas where seniors need assistance in understanding benefit programs, the number of SeniorCare enrollees in need of assistance will strain the ability of benefit specialists to assist all seniors.

If you have any questions, please call me at 2-6876.



Stephanie Sue Stein, Director
Milwaukee County Department on Aging

cc: County Executive Chris Abele
Supervisor Lee Holloway
Jennifer Collins
Antoinette Thomas-Bailey
Jonette Arms
Mary Proctor Brown
Nubia Serrano
Chester Kuzminski
Gary Portenier
Pat Rogers

County of Milwaukee County
INTEROFFICE COMMUNICATION

Date: March 31, 2011

To: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors
Supervisor Johnny Thomas, Vice Chair, Committee on Finance and Audit
Supervisor Peggy West, Chair, Committee on Health and Human Needs

From: Maria Ledger, Interim Executive Director, Department of Family Care

Re: From the Interim Director, Department of Family Care (DFC), requesting authorization to participate in and receive payment for participation in the Medicaid Infrastructure Grant (MIG) from the State of Wisconsin Department of Health Services.

I respectfully request that the Committee on Health and Human Needs schedule the attached resolution for consideration during its meeting on April 13th, 2011 and by Committee on Finance and Audit meeting being held on April 14th, 2011.

The resolution authorizes the Milwaukee County Department of Family Care to execute on behalf of Milwaukee County the 2011 agreement to participate in, and receive payment for participation in the amount of \$20,000.00, and to disburse those funds consistent with the terms of the MIG grant from the State of Wisconsin Department of Health Services.

The grant funding is being provided through the Pathways Office of the Bureau of Aging and Disability Resources/Office of Independence and Employment. The grant funds are for a pilot of the Vocational Futures Planning (VFP) process. VFP is a model to provide employment-planning services to people with physical disabilities. VFP is a consumer-directed, team based comprehensive employment service that supports participants to obtain, maintain or advance in employment. VFP offers a unique way to allow individuals with disabilities to explore their options for employment.

The process is designed to address barriers to employment, which include but are not limited to:

- **Benefits Questions:** Concern with loss of benefits; no awareness of Social Security Administration work incentives programs
- **Employment Planning Services:** Lack of comprehensive, coordinated and specialized vocational services specific to people with physical disabilities, e.g. career planning, education, job development/placement, and training

- **Attitudes and Perceptions:** Negative attitudes on the part of employers, rehabilitation professionals, policy makers and the public at large; the perception that people with physical disabilities either cannot or do not want to work
- **Transportation:** Lack of adequate and reliable transportation
- **Funding:** Inadequate funding for personal assistants as well as other services and supports
- **Coordination:** Lack of coordination among the various parts of the service system, e.g. Social Security, DVR, Long-Term Support, Independent Living Services, Transportation, Housing, etc.

The VFP process is a team-based process, getting all of the appropriate people together to examine barriers and explore solutions. The process is consumer-driven and consumer-directed. The individual takes an active role, working with the employment specialist as well as service providers, advocates, mentors and others on their team. But it is also a flexible process and should be molded and shaped to meet the needs and desires of a particular individual. The specific steps the Department of Family Care will undertake to implement the pilot will include:

Pilot Process:

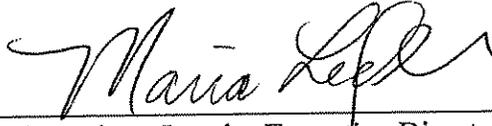
1. Interview Vocational and Supported Employment providers to determine the best match to provide services to members
2. Contact Care Management Units (CMUs) working with a large population of members in the Physically Disabled (PD) target group
3. Identify Family Care members who have a strong interest in community employment
4. Pathways Liaison, Mary Ridgley, will mentor provider through the VFP process
5. Monitor member's progress through the process
6. Provide quarterly progress reports to the DFC senior management and DHS/Pathways

Pilot Goals:

1. To overcome barriers to reach the employment outcome for 5 or more Family Care members and to work towards employment in their chosen career
2. To pilot a fee structure established by Pathways and DFC staff
3. Share member's outcomes/stories using the process

Adoption of the attached resolution is necessary to allow Milwaukee County Department of Family Care to participate in and receive payment for participation in the Medicaid Infrastructure Grant (MIG) from the State of Wisconsin Department of Health Services to pilot this program and improve the lives of members with physical disabilities.

If you have any questions about this resolution, please call me at 287-7610.



Maria Ledger, Interim Executive Director
Department of Family Care

Cc: Interim County Executive Marvin Pratt
John Ruggini
Toni Thomas-Bailey
Jennifer Collins
Steve Cady
Jodi Mapp
Jim Hodson
Eva Williams

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4 (ITEM NO. __) From the Interim Executive Director, Department of Family Care (DFC),
5 requesting authorization to execute a contract accepting and disburse grant funds from
6 the State of Wisconsin Department of Health Services for certain vocational services:
7

8 **A RESOLUTION**
9

10 WHEREAS, the Department of Family Care operates a Managed Care
11 Organization (MCO) in accordance with the Health and Community Supports Contract
12 between Milwaukee County and the State of Wisconsin Department of Health Services;
13 and
14

15 WHEREAS, prior to July 1st, 2010 the Milwaukee County Department on Aging
16 (MCDA) was the department responsible for operation of the MCO providing the Family
17 Care benefit for eligible and enrolled residents of Milwaukee County; and
18

19 WHEREAS, MCDA received a Medicaid Infrastructure Grant (MIG) from the
20 State of Wisconsin Department of Health Services (DHS) for purposes of enhancing the
21 MCO's ability to provide Vocational Futures Planning services, a Family Care benefit, to
22 members with a physical disability who have expressed an interest in vocational
23 services; and
24

25 WHEREAS, the MCO, now operated by the Department of Family Care,
26 performed the activities as required by the grant and incurred commitments to disburse
27 funds in accordance with the terms of the grant and is entitled to reimbursement from
28 the granting agency; and
29

30 WHEREAS, the State of Wisconsin DHS, in addition to providing payment in
31 accordance with the MIG grant for 2010, has offered a contract for 2011 with the
32 Milwaukee County Department of Family Care to provide a MIG grant in the amount of
33 \$20,000.00 to provide a pilot demonstration of Vocational Futures Planning; and
34

35 WHEREAS, participation in this grant activity has enhanced the ability of the
36 MCO to provide Vocational Futures Planning in a more cost-effective and member-
37 centered manner and continued participation in the grant activities in 2011 will enable
38 the MCO to further develop knowledge and the practical application and benefits to
39 members of services, therefore,
40

41 BE IT FURTHER RESOLVED, the Interim Director of the Department of Family
42 Care is authorized to execute on behalf of Milwaukee County the 2011 agreement to
43 participate in, and receive payment for participation in the amount of \$20,000.00, and to
44 disburse those funds consistent with the terms of the MIG grant from the State of
45 Wisconsin Department of Health Services,
46

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 3/30/11

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Medicaid Infrastructure Grant

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 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	20,000	
	Revenue	20,000	
	Net Cost	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. The Milwaukee County Department of Family Care (MCDFC) is seeking authorization to receive grant money of \$20,000 for 2011 and to disburse funds of \$20,000 for expenditures incurred during 2011.

B. DFC will receive a grant in the amount of \$20,000 to be used in a pilot demonstration of Vocational Futures Planning.

C. The budgetary impact of the requested action will have a zero (\$0) net impact. All expenditures will be covered by the grant revenue received.

D. No additional expenditures from the operating budget will be used to fund this pilot.

Department/Prepared By Jim Hodson

Authorized Signature



Did DAS-Fiscal Staff Review? Yes No

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.

County of Milwaukee
INTEROFFICE COMMUNICATION

Date: March 31st, 2011

To: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors
Supervisor Johnny Thomas, Vice Chair, Committee on Finance and Audit
Supervisor Peggy West, Chair, Committee on Health and Human Needs

From: Maria Ledger, Interim Executive Director, Department of Family Care

Re: From the Interim Director, Department of Family Care (DFC), requesting authorization to sign and submit an application and pay applicable application fees, on behalf of Milwaukee County, for copyright registration of a Computer Program, developed by Milwaukee County to support the operation of the managed care organization, with the U.S. Copyright Office:

I respectfully request that the Committee on Health and Human Needs schedule the attached resolution for consideration during its meeting on April 13th, 2011 and by Committee on Finance and Audit meeting being held April 14th, 2011.

The resolution authorizes the Milwaukee County Department of Family Care to sign and submit an application on behalf of Milwaukee County for copyright registration of its Member Information Documentation and Authorization System (MIDAS) with the US Copyright Office. The cost of this application is \$100.00.

MIDAS was developed as a comprehensive Enterprise Resource Planning (ERP) system. ERP is a way to integrate the data and processes of an organization into one single system. MIDAS consists of many hardware and software components to achieve a high level integration. By using a unified database to store data for various functions found throughout the organization we are able to integrate into one comprehensive package:

- Client management
- Care management
- Medical management
- Provider management
- Fiscal management
- Reporting
- QA/QI functions

This web-based integrated information system has been developed by Milwaukee County Family Care staff over the past 11 years to specifically meet the care management, quality assurance, provider network, fiscal management and reporting needs for the Managed Care Organization. Its user-friendly platform links member information in real time to provide users with timely information. Security settings allow the Department of

Family Care administration the ability to create user templates based on need, while protecting the member's private health information.

The State Department of Health Service (DHS) has acknowledged that MIDAS is a highly effective information system and the Milwaukee County Department of Family Care currently leases it to another Managed Care Organization, the Southwest Family Care Alliance (SFCA).

The Department of Health Services (DHS) has issued a Request for Proposals (RFP) for a Statewide IT System for Family Care (RFP # 1701-DLTC-SM). The Milwaukee County Department of Family Care intends to submit a proposal to DHS in response to this RFP.

Adoption of the attached resolution is necessary to formally establish Milwaukee County's copyright of this highly effective and desired IT application, which has proven itself as a premier platform for the Family Care managed care program.

If you have any questions about this resolution, please call me at 287-7610.



Maria Ledger, Interim Executive Director
Department of Family Care

- Cc: Interim County Executive Marvin Pratt
John Ruggini
Toni Thomas-Bailey
Jennifer Collins
Steve Cady
Jodi Mapp
Jim Hodson

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(ITEM NO. __) From the Interim Director, Department of Family Care (DFC), requesting authorization to sign and submit an application and pay applicable application fees, on behalf of Milwaukee County, for copyright registration of the MIDAS Computer Program, developed by Milwaukee County to support the operation of the Managed Care Organization (MCO), with the U.S. Copyright Office:

A RESOLUTION

WHEREAS, the Department of Family Care operates a Managed Care Organization in accordance with the Health and Community Supports Contract between Milwaukee County and the State of Wisconsin Department of Health Services; and

WHEREAS, Milwaukee County by the Department of Family Care is the author of a computer program known as MIDAS; and

WHEREAS, Milwaukee County by the Department of Family Care asserts the right of authorship because the development of this computer program was completed as a "work made for hire" as that term is defined by the U. S. Copyright Office; and

WHEREAS, copyright registration establishes a public record of the copyright claim of Milwaukee County for the computer program as it exists on the date of registration; and

WHEREAS, the cost of application for registering the copyright is less than \$100.00 and such cost is a reasonable administrative expense to protect the interests of Milwaukee County; and

WHEREAS, the Department of Family Care continues to develop revisions to the MIDAS Computer Program and registering revisions from time to time will benefit Milwaukee County by establishing a public record of the copyright claim to revised versions of the computer program; now, therefore,

BE IT RESOLVED, that the Interim Director, Department of Family Care, or his/her designee, is hereby authorized to sign and submit an application, on behalf of Milwaukee County, for copyright registration with the U.S. Copyright Office and to pay any applicable application fees.

BE IT FURTHER RESOLVED, that the Interim Director, Department of Family Care, or his/her designee, is hereby authorized without further action by the County Board of Supervisors to apply from time to time, on behalf of Milwaukee County, for copyright registration with the U.S. Copyright Office for any revisions to the MIDAS Computer Program.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 3/30/11

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: Copyright Application for MIDAS

FISCAL EFFECT:

- | | |
|--|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact
<input type="checkbox"/> Existing Staff Time Required
<input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below)
<input checked="" type="checkbox"/> Absorbed Within Agency's Budget
<input type="checkbox"/> Not Absorbed Within Agency's Budget
<input type="checkbox"/> Decrease Operating Expenditures
<input type="checkbox"/> Increase Operating Revenues
<input type="checkbox"/> Decrease Operating Revenues | <input type="checkbox"/> Increase Capital Expenditures
<input type="checkbox"/> Decrease Capital Expenditures
<input type="checkbox"/> Increase Capital Revenues
<input type="checkbox"/> Decrease Capital Revenues
<input type="checkbox"/> Use of contingent funds |
|--|--|

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.

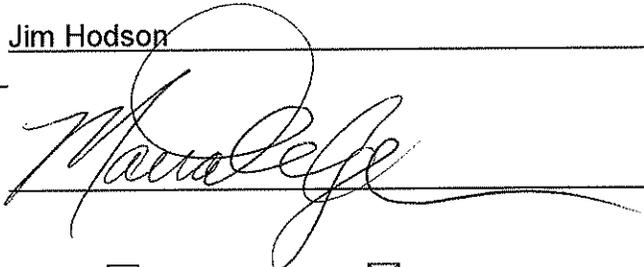
	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	100	
	Revenue		
	Net Cost	100	
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

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. The Department of Family Care (MCDFC) requests authorization to formally file copyright registration on the MIDAS computer program developed internally by the Department of Family Care to protect the interests of Milwaukee County. The Department of Family Care is responding to a state RFP for IT services and feels it is in the best interests of Milwaukee County to register the MIDAS computer program prior to submitting the MCDFC's response to the RFP.
 - B. The direct costs will be the fees to register with the copyright office. This is estimated at less than \$100. Presently MCDFC leases MIDAS to the Southwest Family Care Alliance and receives.
 - C. Costs to register are nominal (estimated at less than \$100) and will be absorbed by the Department's 2011 operating budget.
 - D. No outside legal costs incurred to register.

Department/Prepared By Jim Hodson

Authorized Signature 

Did DAS-Fiscal Staff Review? Yes No

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.

MEMORANDUM

Date: March 30, 2011

To: Supervisor Peggy West, Chair, Committee on Health and Human Needs

From: Maria Ledger, Interim Executive Director, Department of Family Care 

Subject: Potential impact of 2011-2013 State Budget on the Milwaukee County Department of Family Care

Key Section of ASSEMBLY BILL 40 SECTION 9121, page 1290

...In a county where the family care benefit, as described in section 46.286 of the statutes, is available on June 20, 2011, or the effective date of this subsection, whichever is later, the department of health services may not enroll more persons in care management organizations, as defined in section 46.2805 (1) of the statutes, to receive the family care benefit **than the number of persons receiving the family care benefit in that county on June 20, 2011**, or the effective date of this subsection, whichever is later. This subsection does not apply after June 30, 2013.

Explanation

Milwaukee County was certified by the Wisconsin Department of Health Services (DHS) to provide Family Care to persons with physical and developmental disabilities age 18 to 59 effective November 2009. This was in addition to, at that time, the approximately 7,000 members age 60 or older already in Family Care and served by Milwaukee County. The Milwaukee County Department of Family Care (MCDFC) currently serves more than 7,600 members.

Community Care, Inc. (CCI) was also certified to provide Family Care in Milwaukee County to the same target groups in need of long-term care services. Community Care also participates in the PACE program and the Partnership program. I-Care, Inc. participates in the Partnership program as well.

In the proposed budget, enrollments for Family Care, Program of All-Inclusive Care for the Elderly (PACE), Partnership and the State's Self Directed Supports Waiver "Include, Respect, I Self Direct" (IRIS) will be capped.

Descriptions of Programs Affected by Enrollment Caps

The Family Care program integrates home and community-based services, institutional care services (i.e., nursing homes), Medicaid personal care, home health, and other services that were previously funded separately. Family Care does not provide acute/primary health care services such as hospital stays, emergency room visits, medications, and doctor visits. Family Care interdisciplinary teams can and do assist Family Care members in communicating and coordinating with primary care services and providers.

The Partnership and PACE (Program of All Inclusive Care for the Elderly) programs integrate long-term care services and primary and acute health care services, and prescription medications.

In Partnership, members use physicians who are in the Managed Care Organization's (MCO) provider network that may include the member's current physician. In PACE, members use physicians that are employed by the PACE MCO or under contract. PACE requires the use of a day health center while Partnership does not. PACE enrollees must agree to receive primary care from the PACE physician while Partnership enrollees may choose from a panel of independent physicians who have agreed to serve Partnership members. Participation in either program is voluntary.

In IRIS, participants use public funds within their individually assigned monthly budget allocation and other resources to craft support and service plans that meet their self identified long-term care outcomes. IRIS participants are not enrolled in MCOs and are not provided with interdisciplinary care management teams.

Implications of Enrollment Caps

In Milwaukee County, the waitlist for persons for persons age 18-59 with disabilities is still approximately 2000 people. The anticipated date for the elimination of this waitlist was November of 2012.

Enrollment caps will mean the existing waitlist for people with disabilities will likely be in place past November 2012. In addition, older adults will have to be waitlisted for Family Care for the first time in nearly a decade.

There has been no definitive direction from the State as to how the proposed enrollment caps are to be managed. If managed from a statewide perspective, "slots" created by disenrollments in Milwaukee County may be given, for example, to people who want to enroll in Managed Care in LaCrosse County.

If the State manages the caps on a regional or County basis, "slots" created by disenrollments in the Milwaukee County Department of Family Care may be given, for example, to people who wish to enroll in IRIS in Milwaukee County.

The Secretary and Deputy Secretary of DHS stated they would like to triple enrollments into IRIS. It is unclear how this would occur given the enrollment caps. The Secretary and Deputy Secretary have been given information regarding the availability of Self Directed Supports (SDS) within Family Care. SDS within Family Care is an option for any member who wishes to self-direct all or a portion of their care plan.

The MCDFC has long offered a Self-Directed Supports (SDS) option through our Supportive Home Care Employment Services (SHCES). The MCDFC currently serves over 2,500 members with this highly successful model.

The SHCES model was created to allow members the freedom to hire preferred workers through the co-employment model of SDS. Using the SHCES, members can choose and direct their caregivers with the added safety net of training and quality monitoring. Just as importantly, in the event the preferred caregiver is sick or requests a day off, the SHCES can provide immediate support to members and caregivers through a pool of other caregivers available to provide assistance. This model meets all of the state's long-term care reform goals of Access, Choice, Cost Effectiveness and Quality.

Enrollments

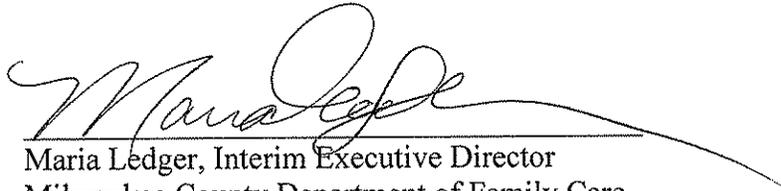
According to DHS, the enrollments for all managed care programs in Milwaukee County, as of 1/2/2011*, are as follows:

	<u>Developmental Disabilities</u>	<u>Frail Elderly</u>	<u>Physical Disabilities</u>	<u>Unknown</u>	<u>TOTAL</u>
Milwaukee County Department of Family Care	1002	6280	214	16	7512
Community Care Inc (CCI) Family Care	624	274	291	2	1191
Community Care Inc (CCI) PACE	15	664	106	2	787
Community Care Inc (CCI) Partnership	30	95	34	2	161
iCARE Partnership	37	32	66		135
IRIS					1093*

* DHS does not provide IRIS information by target group and IRIS enrollment numbers are effective 1/31/2011.

The Department of Family Care will continue to advocate on behalf of older adults and people with disabilities. We will apprise the Board of any further developments on the 2011-2013 budget as they are communicated to us.

If you have any questions, please call me at 287-7610.



Maria Ledger, Interim Executive Director
Milwaukee County Department of Family Care

- cc: County Executive Marvin Pratt
E. Marie Broussard,
Chairman Lee Holloway
Supervisor Johnny Thomas
Antionette Thomas-Bailey
John Ruggini
Steven Cady
Jennifer Collins
Jodi Mapp
Jim Hodson

COUNTY OF MILWAUKEE
Inter-Office communication

Date: March 30, 2011

To: Supervisor John Thomas, Vice-Chair, Finance and Audit Committee
Supervisor Peggy West, Chair, Health and Human Needs Committee

From: Maria Ledger, Interim Executive Director, Department of Family Care 

Subject: MCDFC Income Statement for the period January 1, 2010 through December 31, 2010

The attached report summarizes the Milwaukee County Department of Family Care (MCDFC) income statement of the Managed Care Organization (MCO) for the period January 1, 2010 through December 31, 2010. In addition, it identifies the variance of actual results to the 2010 adjusted budget. The actual amounts are as of final year-end close (period 14-3) and subject to the annual audit. The budget amounts reflect the cumulative monthly budget for the year.

The MCO is showing a preliminary (subject to audit) actual Net Income of \$2,786,821 for the calendar year 2010. Comparing this to the adjusted budget Net Income of \$105,672 creates a positive Net Income Budget Variance of \$3,166,015. While preliminary results through December show actual revenues and actual expenditures higher than those in the adjusted budget, the variance in revenues is higher and thereby offsets any unfavorable expenditure variance.

During calendar year 2010 the MCDFC-MCO served an average of 7,383 members. Enrollment as of December 31, 2010 was 7,580 members, a net increase of 516 members from the December 31, 2009 of 7,064 members.

If you have questions concerning the attached income statement, please contact Interim Executive Director Maria Ledger at 287-7610.

Attachment

Cc: County Executive Marvin Pratt
E. Marie Broussard
Chairman Lee Holloway
Stephen Cady
Jennifer Collins
Jodi Mapp
John Ruggini
Toni Thomas-Bailey
Jim Hodson

**Milwaukee County Department of Family Care - Managed Care Organization Income Statement
For the period of January 1 through December 31, 2010**

<u>Revenues</u>	<u>1/1/10 - 12/31/10 Actual</u>	<u>1/1/10 - 12/31/10 Adjusted Budget</u>
Capitation Revenues	\$235,672,387 (1)	\$230,908,229
Member Obligation Revenues	\$27,980,716	\$27,942,047
Other Revenues	\$416,721	\$267,050
Total Revenues	\$264,069,824	\$259,117,326
<u>Expenses</u>		
Member Service Expenses	\$243,900,182	\$240,973,651
Administrative Expenses:		
---Labor & Fringes	\$7,185,120 (2)	\$7,441,976
---Vendor Contracts	\$3,986,108	\$4,098,870
---Cross Charges/internal transfers (Note 2)	\$2,230,951	\$2,294,898
---Other expenses (supplies, mileage, etc.)	\$3,980,643 (3)	\$3,733,774
--- Est. contribution to reserve		\$953,351
Total Expenses	\$261,283,003	\$259,496,520
Net Surplus/(Deficit)	\$2,786,821	(\$379,194)

December 2010 CMO Enrollment:

Nursing Home (Comprehensive):	
59 and Under	1,162
60 and Over	6,366
Non-Nursing Home (Intermediate):	
59 and Under	12
60 and Over	41
Total Members Served - 12/31/2010	7,580

Note (1): The above results reflect an accrual to increase capitation revenue for new expansion members (i.e., waiver program) based on an increase in acuity (i.e. members requiring higher care plan needs) as measured by the long-term functional screen. During 2010 the Department of Family Care (MCDFC) received \$2,046,495 for payments related to 1st and 2nd quarters of 2010. An accrual estimate of \$5,472,037 in gross revenue has been recorded for 3rd & 4th quarters; however, due to recent State of Wisconsin budget changes, the Department has conservatively recorded only 75% of this revenue and has established an offsetting allowance for \$1,368,010.

Note (2): The Department recorded an additional \$415,863 in PTO expense and removed any remaining liability for unaccrued PTO expenses for prior years to fulfill the requirements of GASB statement no 16.

Note (3): Variance from budget is attributed to the move of the Department of Family Care from the Ruess building to the courthouse and Underwood Wil-O-Way locations. Total cost of the move was \$222,200.

Note: The above financial summary represent actual results as of the reporting date, however, the results can change due to changes occurring in member service utilization (IBNR), outstanding receivables, internal charges or other regulatory changes. Any change from a prior period is accounted for in the year-to-date aggregate results. Prior period reporting is not restated.

COUNTY OF MILWAUKEE
Inter-Office communication

Date: March 30, 2011

To: Supervisor John Thomas, Vice-Chair, Finance and Audit Committee
Supervisor Peggy West, Chair, Health and Human Needs Committee

From: Maria Ledger, Interim Executive Director, Department of Family Care 

Subject: MCDFC Income Statement for the period January 1, 2011 through February 28, 2011

The attached report summarizes the Milwaukee County Department of Family Care (MCDFC) income statement of the Managed Organization (MCO) for the period January 1, 2011 through February 28, 2011. In addition, it identifies the variance of actual results to the 2011 adjusted budget. The actual amounts are preliminary (see recurring Note on the attached MCDFC-MCO income statement for further information). The budget amounts reflect the cumulative monthly budget for the year.

The MCO is showing a preliminary actual Net Income of \$2,786,821 for the first two months of 2011. Comparing this to the adjusted budget Net Income of \$984,656 creates a positive Net Income Budget Variance of \$984,656. While preliminary results through February show actual revenues and actual expenditures higher than those in the adjusted budget, the variance in revenues is higher and thereby offsets any unfavorable expenditure variance.

MCO enrollment as of February 28, 2011 was 7,573 members, a net decrease of 7 members from the December 31, 2010 of 7,580 members enrolled.

If you have questions concerning the attached income statement, please contact Interim Executive Director Maria Ledger at 287-7610.

Attachment

Cc: County Executive Marvin Pratt
E. Marie Broussard
Chairman Lee Holloway
Stephen Cady
Jennifer Collins
Jodi Mapp
John Ruggini
Toni Thomas-Bailey
Jim Hodson

MCDFC-MCO Income Statement
For the period of January 1 through February 28, 2011

<u>Revenues</u>	<u>1/1/11 - 2/28/11</u> <u>Actual</u>	<u>1/1/11 - 2/28/11</u> <u>Adjusted Budget</u>
Capitation Revenues	\$41,047,408	\$40,394,486
Member Obligation Revenues	\$4,880,333	\$4,418,016
Contribution from Reserve	\$0	\$195,314
Other Revenues	\$39,005	\$38,649
Total Revenues	\$45,966,746	\$45,046,465
<u>Expenses</u>		
Member Service Expenses	\$42,969,297	\$41,995,049
Administrative Expenses:		
---Labor & Fringes	\$811,749	\$1,423,588
---Vendor Contracts	\$506,221	\$795,119
---Cross Charges/internal transfers	\$249,445	\$230,462
---Other expenses (supplies, mileage, etc.)	\$445,378	\$602,247
--- Est. contribution to reserve		
Total Expenses	\$44,982,090	\$45,046,465
Net Surplus/(Deficit)	\$984,656	\$0

February 2011 CMO Enrollment:

Nursing Home (Comprehensive):

59 and Under	1,204
60 and Over	6,318

Non-Nursing Home (Intermediate):

59 and Under	11
60 and Over	40

Total Members Served - 2/28/11 **7,573**

Note: The above financial summary represent actual results as of the reporting date, however, the result can change due to changes occurring in member service utilization (IBNR), outstanding receivables, internal charges or other regulatory changes. Any change from a prior period is accounted for in the year-to-date aggregate results. Prior period reporting is not restated.

COUNTY OF MILWAUKEE
INTEROFFICE COMMUNICATION

DATE: March 28, 2011

TO: Lee Holloway, Chairman, County Board of Supervisors

FROM: Pamela Bryant- Capital Finance Manager

SUBJECT: Due Diligence Report for the allocation of funds from the County's Housing Trust Fund to United Methodist Children's Services (UMCS) for a supportive housing development.

Request

The Department of Administrative Services is recommending approval of the attached resolution to adopt requirements for financial proposals and approval of a \$100,000 grant from the Special Needs Housing capital project to the UMCS Phase III project to provide five supportive housing units for Milwaukee County Behavioral Health clients.

Special Needs Housing Program

In 2007, Milwaukee County created the SNHP for the purpose of providing partial financing for the development of supportive housing in Milwaukee County. The SNHP is financed through loans from the Board of Commissioner's State Trust Fund Loan program. The SNHP project scope for the loans consists of the following: acquisition of land and construction and or renovation of facilities for the purposes of providing housing for persons with mental illness and/or others served by the Milwaukee County Department of Health and Human Services (DHHS) - Behavioral Health Division (BHD). When the fund was created, the County Board also adopted specific criteria that are required for a project to be eligible to receive funds from this program. The criteria are as follows:

- **Eligible Applicants-** non-profit developers or agencies who have the capacity and experience to develop and own the housing and whose project team includes members, who have experience providing housing/services to adults living with serious and persistent mental illness. Eligible applicants may partner with an appropriate service agency to provide the services necessary to support people living with serious and persistent mental illness in permanent housing.
- **Eligible Projects-** new construction or rehabilitation projects that provide permanent housing where:
 - At least 40% of the units developed are (in accordance with applicable fair housing laws) primarily set aside for use by Behavioral Health Division consumers living with serious and persistent mental illness (as determined by Behavioral Health Division), and
 - Who are under 30% of median income

- **Eligible funding requests-** grants for any given year may not exceed 10% of the total development costs for units set aside for Behavioral Health Division consumers living with serious and persistent mental illness. The dwelling unit set aside shall be for 10 years or the term of the tax credit commitment, whichever is longer.
 - Minimum request of \$100,000
 - Maximum request of \$500,000

- **Eligible Activities-** project costs related to new construction, rehabilitation, acquisition of real property, clearance and demolition, removal of architectural barriers, and other activities necessary for the development of the project.

- **Disadvantaged Business Enterprise (DBE) participation-** in order to be considered for County funding, project developer must agree to meet or exceed County DBE requirements pertaining to construction projects.

The Department of Health and Human Services (DHHS) has submitted a report for the April cycle to the committees on Economic Development, Health and Human Needs, and Finance and Audit. The DHHS is requesting County Board approval to allocate \$100,000 from the Special Needs Housing Program (SNHP) to United Methodist Children’s Services (UMCS) to partially fund the UMCS Phase III development. The development will be located at 3800 West Lisbon Avenue.

The Department of Administrative Services in accordance with Administrative Procedure 7.92 Due Diligence, has conducted a due diligence review of UMCS’ request for funding from the SNHP.

Background

UMCS is a nonprofit organization that has provided social, housing, and support services to low-income children and families in the Milwaukee community since 1962. They have developed a number of low-income and supportive housing developments throughout Milwaukee County.

The organization has operated a 16-unit transitional living facility for 15 years. They are located on 40th and Lisbon, where they have their administrative offices and a licensed day care with the capacity for 60 children. In 2007, the organization developed UMCS Phase I- UMCS Townhomes, which is a six-unit development for low-income families. Adjacent to this is UMCS Phase II- Washington Park Apartments, which is a 24-unit supportive housing development for families with 10 of those units designated for BHD consumers with children. This development includes community-serving space and the Family Resource Center, which includes a food pantry. In 2009, Milwaukee County provided \$277,000 from the SNHP to support this development. UMCS Phase III is the latest proposed development that would consist of 24 scattered-site units, of which 14 units will be townhomes. In addition, the development would consist of a 10-unit multifamily permanent supportive housing building with five units designated for BHD clients with one or two children.

Review & Analysis

The Department of Administrative Services (DAS)- Fiscal Affairs has reviewed the project proposal from UMCS and prepared the analysis as follows:

The original request was for an allocation of \$100,000 for a 10-unit development with four units designated for BHD clients. However, this was not within the criteria which state that an organization is eligible to receive 10% of the development costs for the construction of the units designated for BHD clients, and the minimum request that is allowed is \$100,000. The total cost of the 10-unit development is \$2,169,636 and the construction of the four units is \$867,854. Based on these criteria, the organization is only eligible to receive \$86,785, which does not meet the criteria for the minimum request. DAS worked with UMCS and Housing to designate a fifth unit for BHD clients to meet the minimum request criteria. With the addition of the fifth unit for BHD clients, the total project cost for five units is \$1,084,818, which would increase the eligible grant amount for the development of the project to \$108,482.

The funding requested from Milwaukee County would only be used to support the construction of the five units designated for BHD clients. The county has received supporting documentation verifying that the organization will also receive funding from the following sources:

- \$4,031,159 in Tax Credits
- \$495,000 from the City of Milwaukee's Neighborhood Stabilization Fund
- \$750,000 in Permanent Financing from Great Lakes Capital Fund

UMCS will be the primary developer on this project with the assistance of Community Development Advocates (CDA), LLC. CDA has worked as the development consultant on several development projects to include UMCS Town Homes and Washington Park Apartments, as well as other housing developments.

Having additional housing developments that provides permanent supportive housing to BHD clients is beneficial to Milwaukee County, as it would be an increase in services for the mentally ill while allowing them to live as independently as possible.

Financial Impact

The County created a Special Needs Housing Fund in its capital program in 2007. A total of \$3,000,000 has been allocated to the Fund since its inception: \$1,000,000 in 2007 and \$2,000,000 in 2009, for approved supportive housing development projects. There is approximately \$372,000 remaining in this fund.

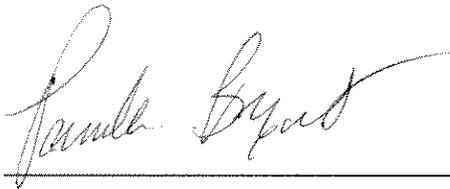
The County is currently paying approximately \$425,000 annually through 2017 to retire the loan from the State Trust Fund Loan Program. The annual amount decreases to \$278,000 each year for

the two remaining years 2018 and 2019. Approval of the grant request from UMCS for \$100,000 will reduce the amount remaining in the SNHF to \$272,000.

Recommendation

The DAS is recommending approval of the \$100,000 grant to UMCS for the UMCS PHASE III development with the following conditions:

1. Development agreement includes language that specifies that five of the 10 units constructed would house BHD clients.
2. UMCS will provide an annual report to the County relating to the number of BHD clients living in UMCS Phase III.
3. Development agreement includes language that specifies that if for some reason the building or land is sold, the County will recover 10% of the sale proceeds or \$100,000, whichever is greater.



Pamela Bryant, Capital Finance Manager

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(ITEM NO.) : The Department of Administrative Services is recommending approval of the attached resolution for a \$100,000 grant from the County’s Special Needs Housing Program (SNHP) for United Methodist Children Services’ (UMCS) UMCS Phase III project to provide five permanent supportive housing units for Milwaukee County Behavioral Health clients.

A RESOLUTION

WHEREAS, the County Board adopted Resolution 07-74 which approved criteria for the allocation of budgeted appropriations for housing for persons with mental illness; and

WHEREAS, UMCS has requested a grant of \$100,000 from the County’s SNHP, for the UMCS Phase III project, that would provide five permanent supportive housing units for Milwaukee County behavioral health clients; and

WHEREAS, the Department of Administrative Services prepared a due diligence report based on the requirements in Section 7.92 of the Administrative Procedures; and

WHEREAS, based on the criteria approved in 2007 in Resolution 07-74 the UMCS Phase III project would qualify for \$100,000 from the County’s SNHP; NOW THEREFORE,

BE IT RESOLVED, that the Interim Director, DHHS or designee is authorized to negotiate and execute an agreement with the developer which ensures compliance with the terms and conditions governing the use of funds from the County’s SNHP and which accomplishes such other objectives as will best serve the county and the housing needs of our behavioral health system’s consumers, and be it

FURTHER RESOLVED, that based on the requirements set forth in Resolution 07-74, UMCS receives a grant of \$100,000 for the UMCS Phase III project contingent on the following:

- Development agreement includes language that specifies that five units would house BHD clients.
- UMCS will provide an annual report to the County relating to the number of BHD clients living at UMCS Phase III.
- Development agreement includes language that specifies that if for some reason the building or land is sold, the County will recover 10% of the sale proceeds or \$100,000, whichever is more; and be it

FURTHER RESOVLED, that if for any reason UMCS is unable to obtain the funding for the total project costs, including fees and other charges, the \$100,000 grant from the SNHP will be returned to Milwaukee County.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 3/24/11

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: From the Interim Director, Department of Health & Human Services, Requesting County Board Approval to Allocate \$100,000 of Financing from the County Special Needs Housing Trust Fund to United Methodist Children’s Services for the Supportive Housing Development to be Known as UMCS Phase III

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 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 checked="" 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	100,000	0
	Revenue	100,000	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. The Interim Director, Department of Health and Human Services, is requesting County Board approval to allocate \$100,000 of financing from the County's Allocation of State Trust fund dollars to UMCS for the Supportive Housing Development to be known as UMCS Phase III.

This project will be a continuation of Washington Park Apartments, a supportive housing development previously funded by the Housing Trust Fund. This development set aside ten units for Behavioral Health Division consumers.

- B. This expenditure of \$100,000 is 100% offset by revenue from the County's allocation of State Trust Fund dollars.
- C. There is no tax levy impact associated with the approval of this request.
- D. No assumptions are made.

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 James Mathy, Housing Division

Authorized Signature *Seri A. Syday*

Did DAS-Fiscal Staff Review? Yes No

DATE: March 24, 2011

TO: Supervisor Lee Holloway, Chairman - Milwaukee County Board

FROM: Geri Lyday, Interim Director – Department of Health & Human Services
Prepared by: James Mathy, Special Needs Housing Manager – Housing Division

SUBJECT: **From the Interim Director, Department of Health & Human Services, Requesting County Board Approval to Allocate \$100,000 of Financing from the County Special Needs Housing Trust Fund to United Methodist Children’s Services for the Supportive Housing Development to be Known as UMCS Phase III**

Issue

The Interim Director, Department of Health & Human Services (DHHS), requests County Board approval for an allocation of \$100,000 from the Fund to United Methodist Children’s Services (UMCS) for the partial financing of the supportive housing development to be known as UMCS Phase III. County Board approval is required for expenditures of funds from the Special Needs County Housing Trust Fund (CHTF).

Background

In February of 2007, the County Executive proposed, and the County Board approved, creation of a Special Needs County Housing Trust Fund (CHTF) to provide partial financing for the development of supportive housing in Milwaukee County. The fund is currently financed through low-interest loans from the State of Wisconsin Trust Funds Loan Program.

UMCS Phase III is a supportive housing development project of the United Methodist Children’s Services (UMCS) of Wisconsin with the development assistance of Community Development Advocates. The project, in its entirety, will be comprised of 24 scattered site units of decent, safe, affordable and permanent housing for families.

As part of the development, UMCS will be constructing a ten-unit, multi-family apartment building that will provide permanent supportive housing. UMCS will be setting aside five of the ten units (50%) for Milwaukee County Behavioral Health Division consumers. Two-bedroom supported apartments are in extremely short supply, and County gap financing of this project helps to address an especially critical need for supportive housing.

This development is Phase 3 of UMCS’s overall housing development. Phase 2 included Washington Park Apartments, a 24-unit supportive housing development for families. Ten of those units were set aside for BHD consumers and their children. This development has been very successful in meeting the needs of these individuals and the units have been at 100% occupan-

cy. Washington Park Apartments also had been previously awarded Milwaukee County Housing Trust Fund dollars.

UMCS will also be the provider of supportive services for this project. In addition to its housing development experience, UMCS has been providing a variety of social, housing and other support services to children and families since 1962. Its Transitional Living Program provides safe, affordable housing, on-site social services and childcare, with a comprehensive program designed to enable low-income, single parent families to become economically self-sufficient.

Community Development Advocates, LLC (CDA), located at 2212 N. Martin Luther King, Jr. Drive, has extensive experience both in directly developing and in assisting several non-profit organizations in developing affordable housing in the community. CDA served as a development consultant on the United House, Prairie Apartments, and Washington Park Apartments projects mentioned above.

Project Name: UMCS Phase III

Location: 3800 W. Lisbon Ave.

Service Provider: UMCS

Number of Units: 24 scattered site units

Total Project Cost: \$5,337,071 for all units. \$2,169,636 for the 10 unit supportive housing multi-family building

Tax Credits: \$4,031,159 (awarded previously)

CHTF (County) Contribution: \$100,000 (recommended)

Other Assistance:

- Five County Project-Based rent assistance vouchers.
- Developer has applied for City of Milwaukee Neighborhood Stabilization Program funds.

All zoning requirements have been through the City of Milwaukee and occupancy is expected in June 2012.

Recommendation

It is recommended that the County Board of Supervisors approve an allocation of \$100,000 from the County Housing Trust Fund to UMCS to support development of this project. The actual allocation of funds from the CHTF will occur only when the developer provides evidence to

the county indicating that it has obtained all other commitments of financial resources for the project.

It is recommended that the County Board of Supervisors authorize the Interim Director, Department of Health and Human Services, or designee, to negotiate and execute an agreement with the developer to ensure compliance with the terms and conditions governing the use of trust fund monies and to accomplish such other objectives as will best serve the county and its clients.

Fiscal Effect

Sufficient funding authorization exists to provide the recommended amount of CHTF funds. Loan repayment, which is the interest paid back annually to the State to access the Trust Fund dollars, is included in the County's annual budgeted debt service schedule.

A handwritten signature in black ink that reads "Geri Lyday". The signature is written in a cursive style and is positioned above a horizontal line.

Geri Lyday, Interim Director
Department of Health and Human Services

cc: Marvin Pratt, Interim County Executive
Terrence Cooley, Chief of Staff – County Board
John Ruggini, Interim Fiscal & Budget Administrator
Anionette Thomas-Bailey, Analyst -DAS
Jennifer Collins – County Board Staff
Jodi Mapp – Committee Clerk

1
2
3
4 (ITEM) From the Interim Director, Department of Health & Human Services, Requesting County
5 Board Approval to Allocate \$100,000 of Financing from the County Special Needs Housing Trust
6 Fund to United Methodist Children’s Services for the Supportive Housing Development to be
7 Known as UMCS Phase III
8

9 A RESOLUTION

10
11 WHEREAS, the County Board adopted Resolution 07-74 which approved criteria for the
12 allocation of budgeted appropriations for housing for persons with mental illness; and
13

14 WHEREAS, UMCS has requested a grant of \$100,000 from the County’s SNHP, for the
15 UMCS Phase III project, that would provide five permanent supportive housing units for
16 Milwaukee County behavioral health clients; and
17

18 WHEREAS, the Department of Administrative Services prepared a due diligence report
19 based on the requirements in Section 7.92 of the Administrative Procedures; and
20

21 WHEREAS, based on the criteria approved in 2007 in Resolution 07-74 the UMCS Phase
22 III project would qualify for \$100,000 from the County’s SNHP; NOW THEREFORE,
23

24 BE IT RESOLVED, that the Interim Director, DHHS, or designee, is authorized to negotiate
25 and execute an agreement with the developer which ensures compliance with the terms and
26 conditions governing the use of funds from the County’s SNHP and which accomplishes such
27 other objectives as will best serve the county and the housing needs of our behavioral health
28 system’s consumers, and be it
29

30 FURTHER RESOLVED, that based on the requirements set forth in Resolution 07-74,
31 UMCS receives a grant of \$100,000 for the UMCS Phase III project contingent on the following:
32

- 33 - Development agreement includes language that specifies that five units would
34 house BHD clients.
- 35 - UMCS will provide an annual report to the County relating to the number of
36 BHD clients living at UMCS Phase III.
- 37 - Development agreement includes language that specifies that if for some
38 reason the building or land is sold, the County will recover 10% of the sale
39 proceeds or \$100,000, whichever is more; and be it
40

41 FURTHER RESOVLED, that if for any reason UMCS is unable to obtain the funding for the
42 total project costs, including fees and other charges, the \$100,000 grant from the SNHP will be
43 returned to Milwaukee County.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 3/24/11

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: From the Interim Director, Department of Health & Human Services, Requesting County Board Approval to Allocate \$100,000 of Financing from the County Special Needs Housing Trust Fund to United Methodist Children’s Services for the Supportive Housing Development to be Known as UMCS Phase III

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 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 checked="" 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	100,000	0
	Revenue	100,000	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. The Interim Director, Department of Health and Human Services, is requesting County Board approval to allocate \$100,000 of financing from the County's Allocation of State Trust fund dollars to UMCS for the Supportive Housing Development to be known as UMCS Phase III.

This project will be a continuation of Washington Park Apartments, a supportive housing development previously funded by the Housing Trust Fund. This development set aside ten units for Behavioral Health Division consumers.

- B. This expenditure of \$100,000 is 100% offset by revenue from the County's allocation of State Trust Fund dollars.
- C. There is no tax levy impact associated with the approval of this request.
- D. No assumptions are made.

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 James Mathy, Housing Division

Authorized Signature *Leri A. Syday*

Did DAS-Fiscal Staff Review? Yes No

DATE: April 7, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee Co. Board of Supervisors

FROM: Geri Lyday, Interim Director, Department of Health and Human Services

SUBJECT: **From the Interim Director, Department of Health & Human Services, submitting an informational report regarding the potential impact of the 2011-2013 State Budget on the Milwaukee County Department of Health and Human Services (Informational only unless otherwise directed by the Committee)**

Issue

At its March meeting, the Intergovernmental Relations Committee requested a written summary detailing the impact of the Governor's 2011-2013 Budget on various departments including the Department of Health and Human Services (DHHS).

Background

There are numerous changes in the budget that impact DHHS. The following identifies proposed State budgetary changes affecting DHHS:

Medical Assistance

Included in the State Budget is a \$500 million reduction to the Medical Assistance program over the biennium. This program has over one million participants' statewide and may have large implications for Milwaukee County. Unfortunately, little information exists regarding this reduction.

Though the budget does not identify how these savings will be achieved, the assumption is that the State Department of Health Services (DHS) would exercise the rulemaking authority provided to it under Wisconsin Act 10 (2011 Budget Repair Bill) to make changes to the statutes relating to program eligibility, services, plan structure and cost sharing by participants. Wisconsin Act 10 directs DHS to first study potential changes to the Medical Assistance Program and any necessary federal waivers.

The Department has several divisions that rely on Medicaid funding estimated at \$44 million. The following programs have budgeted Title 19 revenue and potentially could be impacted:

BHD

- Community Services including BHD operated and contracted services
- Inpatient and long-term behavioral health care

- Community-based programming such as Community Support Program (CSP)
- Wraparound Milwaukee

DHHS

- Children's Long-Term Support in DSD
- Delinquency Crisis Services Billing

Behavioral Health Division

As a part of the across-the-board initiative to reduce base funding for non-staff costs, the proposed budget includes a ten percent reduction in the amount of General Purpose Revenue (GPR) and Program Revenue (PR) made available for mental health and alcohol and substance abuse services. (Note: BHD and DHHS have received confirmation from the State that Basic Community Aids and Community Options Program funding will not be subject to the 10 percent GPR cut, and will remain at 2011 levels.)

The estimated reduction for BHD for programs funded by GPR (not BCA or COP) is \$980,000 in 2011 and \$1.2 million in 2012. This revenue is directly tied to client services so this, in effect, would be a direct service reduction unless an alternative funding source could be identified. However, the State has indicated it plans to restructure the AODA Block Grant allocation in 2012, which could positively impact Milwaukee County, as well as initiate other offsets to lessen the impact of the GPR reductions. Therefore, the net fiscal impact of the proposed changes will not be known until the State releases its final recommended numbers, which are expected by April 8. Based on the final figures, BHD will assess how client services will be impacted.

Additionally, the budget does not appear to include a \$6.8 million GAMP payment from Milwaukee County to the State for either 2011 or 2012. There are a few other changes in the proposed budget that at this point would appear to have negligible, if any, impact on BHD. These include a change to the process for the Wisconsin Medicaid Cost Reporting Program (WIMCR), which BHD has been told by the State would be cost neutral for counties, and the elimination of statutory fees for patient medical records to be replaced by fees set by rulemaking. It is not clear the level at which fees would be set in rule relative to the current statutory fees, though the revenue that BHD receives from providing patient medical records is very small.

Disabilities Services Division

The budget caps enrollments in each of the publicly funded long-term care programs (Family Care, Family Care Partnership, PACE, or IRIS) at the number of individuals in that program as of June 20, 2011. Currently, DSD's Disability Resource Center (DRC) is in the process of phasing-in the enrollment of individuals with disabilities ages 18 through 59 who are currently on a waitlist. However, the budget would halt this process causing the 2,000 waitlist individuals, as well as new clients, seeking long-term services to not receive services.

The State provides about \$2.1 million in GPR revenue to support the county's DRC. It appears that the budget retains this funding.

Income Maintenance

In 2010, the State of Wisconsin assumed responsibility for managing the administration of the Income Maintenance program and established the Milwaukee County Enrollment Services unit (MILES) to determine eligibility and administer the Food Share and BadgerCare public assistance programs. The proposed budget eliminates this unit and centralizes the IM functions statewide into one State IM Unit no later than May 1, 2012 and allows the new unit to contract with a public or private agency to perform certain IM administrative services statewide.

The budget also repeals existing statutes that authorize DHS to provide state funding to support the costs of MILES. This includes funding for the 271 county FTEs assigned to the Income Maintenance unit and shared services (human resources, records center, IT support) provided by Milwaukee County. The estimated fiscal impact to this change is unreimbursed legacy costs of about \$4 million based on the 2011 budgeted rates and a \$500,000 loss in shared services revenue. Though the budget allows DHS to delegate some administrative functions to counties, DHHS does not know what if any functions the State will seek assistance for from Milwaukee County.

Currently, the State reimburses Milwaukee County the cost of the county IM staff assigned to MILES less the county's required contribution of \$2.7 million. The Governor's proposed budget would prorate this contribution based upon when the State established its centralized IM unit. Beginning in fiscal year 2012-2013, however, DHS would decrease every county's community aids allocation based upon the amount the county expended in 2009. For Milwaukee County, this amount was \$2.7 million which is the same amount currently provided by the county to support MILES.

In 2010, the County's Child Care program was also taken over by the State Department of Children and Families (DCF). DHHS has verbally been told that the Child Care unit staffed by county employees and located at the Coggs Center is expected to remain intact. In addition, Food Share and a few other functions handled previously by DHS are transferred to DCF by January 1, 2013.

Since the takeover occurred, State DHS has leased the Coggs Center from DHHS. Although State DHS has verbally indicated that it will continue to use the majority of square footage in 2011, the future space needs of the State are unknown.

Delinquency

Cuts are expected in youth aids revenue as well as an increase to the daily rates charged to counties. This budget change is estimated to result in a revenue reduction of \$1.8 million in 2011 and \$3.6 million in 2012 to Milwaukee County.

While the 2011 DHHS Budget assumed a rate increase that accommodates the new

\$284 daily rate proposed, the Department and Sheriff's Office anticipate an undetermined increase in costs associated with the planned closures of Ethan Allen and Southern Oaks correctional facilities. The Department will likely incur an increased use of detention beds for correctional youth pending return to one facility now located in northern Wisconsin and the Sheriff will likely incur increased transportation costs.

At the same time the State is proposing to decrease Youth Aids revenue, there continue to be concerns that new rate regulations and administrative rules anticipated to go into effect July 1, 2011 will increase costs associated with group home and residential care.

Recommendation

This report is informational only and no action is required.



Gerri Lyday, Interim Director
Department of Health and Human Services

- Cc: Interim County Executive Marvin Pratt
Supervisor Luigi Schmitt
Supervisor Johnny Thomas
John Ruggini, DAS Interim Fiscal and Budget Administrator
Antionette Thomas-Bailey, Fiscal and Management Analyst, DAS
Stephen Cady, County Board Staff
Jennifer Collins, County Board Staff
Carol Mueller, County Board Staff

Date : March 24, 2011

To : Supervisor Willie Johnson Jr., Chair, Judiciary, Safety and General Services Committee
Supervisor Peggy West, Chair, Health and Human Needs Committee

From : Laurie Panella, Interim Chief Information Officer, IMSD

Subject: Informational Report: Capital Project WO444 – Electronic Medical Records System

BACKGROUND

The 2010 Budget included an appropriation for capital improvement project WO444 Electronic Medical Records System to replace the current system at the Office of the Sheriff (MCSO) and to implement a new Electronic Medical Records (EMR) System for the Behavioral Health Division (BHD). In January, the Information Management Services Division (IMSD) presented an information report on Phase 1, the Planning and Design phase to the Health and Human Needs Committee and the committee on Judiciary, Safety and General Services.

This document will serve as the second status report and is intended to provide an informational update on the progress of the EMR project and the subsequent phases to complete the project.

ANTICIPATED PROJECT PHASES

The EMR project is broken down into the following four (4) phases:

Phase 1 - Planning and Design

Phase 2 - Request for Proposal (RFP) Process and Vendor Selection

Phase 3 - Implementation

Phase 4 - Closeout and Audit

IMSD has completed Phase 1, the Planning and Design Phase and is currently on Phase 2, RFP Process and Vendor Selection

CURRENT PROJECT STATUS

Phase 2 (RFP and Vendor Selection)

On January 7, 2011, IMSD posted the EMR RFP on the County Business Opportunity Portal, placed an advertisement in the Daily Reporter and sent the RFP to ten (10) select EMR vendors. The RFP was written to solicit a single EMR solution that would address the needs of both MCSO and BHD. It must be noted that the document also included language indicating that IMSD would accept proposals for EMR solutions that specialized in either Corrections or Mental Health services in the event that a single combined EMR solution was not able to be provided by a single vendor. Though IMSD received letters of intent to bid from nine (9) EMR vendors, only four (4) proposals were received for evaluation purposes. A selection committee for MCSO and a committee for BHD were created to review and evaluate the proposals. Individuals on each panel were considered subject matter experts and represented physicians, registered nurses, licensed practice nurses, social service coordinators, medical assistants, unit clerks, and representatives from long-term care, managed care, etc.

Each selection committee began reviewing the four (4) proposals; one was considered not qualified by both committees resulting in three (3) finalists: one solution that would meet the need of MCSO, one that specialized in EMR systems for Behavioral Health and one that could meet the needs of both MCSO and BHD.

In order to ensure the most competitive as well as comprehensive vendor selection process, it was determined by each selection committee that it would be in the County's best interest to re-open the RFP process and solicit additional vendors. Reposting the RFP resulted in seven (7) additional proposals for Corrections and six (6) for Mental Health. Each selection committee will score the new proposals and select additional one (1) to two (2) EMR solutions that best meet the need of their operation. The most qualified vendors for Corrections and for Behavioral Health will be invited to participate in the second round of evaluation process and vendor product demonstrations. Upon completion of the vendor demonstrations the vendors will be scored and based on the three major components: the committee's evaluation score of the proposals, the product demonstrations and the Department of Administrative Services' (DAS) score of the financials.

Once the scoring process is complete, the successful vendor will be selected. IMSD will work in conjunction with Corporation Counsel, Risk Management, the Community Business Development Partners Office and DAS to negotiate the terms and conditions of a contract with the chosen vendor. It is anticipated that IMSD will request approval of the County Board of Supervisors during the June cycle for execution of this contract.

Status reports for subsequent phases will be provided once a project plan has been detailed by the successful vendor and approved by MCSO, BHD, IMSD and DAS.

RECOMMENDATION

The Interim Chief Information Officer respectfully requests this report to be received and placed on file.

cc: Marvin Pratt, County Executive
E. Marie Broussard, Assistant Chief of Staff, Office of the County Executive
Chairman Lee Holloway, County Board of Supervisors
Vice Chairman Michael Mayo Sr., County Board of Supervisors
Terrance Cooley, Chief of Staff, County Board of Supervisors
Lynne DeBruin, Vice Chair, Judiciary Committee
Marina Dimitrijevic, Vice Chair, Health and Human Services
Sheriff David Clark
Geri Lyday, Director, Health and Human Services

Linda Durham, Judiciary Committee Clerk
Rich Ceschin, Judiciary Research Analyst
Jodi Mapp, Health and Human Services Committee Clerk
Jennifer Collins, Health and Human Services Research Analyst
Pam Bryant, Capital Finance Manager
Davida Amenta, DAS Budget Analyst
Justin Rodriguez, Capital Finance Analyst
Maggie Mesaros, BHD Fiscal and Management Analyst

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

Date: March 30, 2011

To: Supervisor Peggy West, Chairperson - Health & Human Needs Committee
Supervisor Patricia Jursik, Chairperson - Personnel Committee

From: Geri Lyday, Interim Director - Department of Health and Human Services
Paula Lucey, Administrator - Behavioral Health Division

Subject: **An Informational Report from the Interim Director of Health and Human Services and the Administrator of the Behavioral Health Division Regarding Overtime and Use of Advance Steps at the Behavioral Health Division**

Issue

This report follows up on an October 2010 report to the Personnel Committee on the use of overtime at the Behavioral Health Division (BHD), and also provides information on BHD's use of advance steps within the pay range.

Background

Historically, BHD has used overtime as a way to provide coverage for off time of staff and create some flexibility to address acuity and other staffing needs within the Division. Additionally, BHD has primarily used advance steps to align salaries with staff experience and to remain competitive with other public and private institutions in the hiring of medical staff.

Discussion

Overtime

The Behavioral Health Division has 838.4 FTEs in the 2011 Budget, which are filled by nearly 1,000 employees. BHD plans for and budgets overtime every year to help address unforeseen changes such as patient acuity, staff vacancies and other facility needs. In addition to budgeting overtime, BHD administration typically views overtime and salary together in projecting the annual salary costs.

For 2011, BHD has budgeted \$40,197,840 for salary and \$3,073,299 for overtime (not including Org. 1972 adjustments), for a total of \$43,271,139. The overtime figure represents an increase of more than \$675,000 over the 2010 budgeted amount based on actual overtime expenditures from previous years. The chart below shows a ten-year history of overtime and salary for BHD.

BHD Overtime and Salary Summary

Year	Overtime	Salary	Total
2001	\$2,807,026	\$38,134,468	\$40,941,494
2002	\$3,113,623	\$38,528,339	\$41,641,962
2003	\$3,290,276	\$39,869,437	\$43,159,713
2004	\$3,704,459	\$36,653,746	\$40,358,205
2005	\$3,346,905	\$36,830,989	\$40,177,894
2006	\$3,186,983	\$38,100,820	\$41,287,803
2007	\$4,194,603	\$39,432,841	\$43,627,444
2008	\$4,637,717	\$40,706,900	\$45,344,617
2009	\$4,270,756*	\$40,698,000	\$44,968,756
2010	\$4,254,411	\$37,456,537	\$41,710,948
2011 Budget	\$3,073,299	\$40,197,840	\$43,271,139

All actual data is taken from the Milwaukee County DAS Financial Data Site. 2011 Budget figures are taken from BRASS. Overtime figures include accrued overtime that is paid out as time off and expiring overtime hours that are paid out.

*Amount includes \$7,850 in overtime attributed to BHD for orgs outside of BHD. The total overtime for BHD-only was \$4,262,906.

As is shown in the table, overtime has decreased in each of the past two years. Total spending for overtime and salary for BHD has increased about 5% from 2001 to 2010, and the actual overtime and salary total for 2010 was the lowest it has been since 2006. Overtime has ranged from \$2.8 million to \$4.6 million, with the largest increase between 2006 to 2007 due to an additional fourth nurse being added using overtime to the Acute Adult units as part of a corrective action instituted in 2007. That initiative has since been discontinued since the hospital census was lowered to licensed capacity.

Overall BHD uses overtime primarily for the following reasons: to “fill” vacant positions in key clinical roles such as psychiatrists, registered nurses and certified nursing assistants while recruitment and HR efforts are completed; to cover for paid time off in 24/7 operations; and finally, to address the needs of patients admitted and their particular level of care at a particular time. BHD may have several patients receiving one-on-one care due to the intensity and acuity of supportive measures, which increase overtime costs significantly. Beginning in 2010, BHD also experienced an increase in its base staffing needs associated with the implementation of a new zone staffing model on the inpatient units and in crisis services and observation. This move was meant to improve patient and staff safety, and while it has led to additional overtime needs, it has been very effective at reducing the number of incidents on the units.

When covering unfilled, non-medical staff shifts on the patient care units, BHD first utilizes its pool of CNAs, RNs, and LPNs, depending on the classification of the work needed. For shifts that cannot be filled by pool staff, BHD solicits volunteers from its regular staff on a rotating seniority basis from within the classification of the shift needed. Since the shifts are voluntary, this can result in the same individuals working the majority of the overtime and earning a significant amount of overtime pay, both in absolute terms and as a percentage of their base salary. If the shifts cannot be filled on a voluntary basis within the classification, BHD can utilize volunteers from other classifications that are qualified to perform the work. As a last resort, BHD can assign mandatory overtime on an inverse seniority basis to fill any remaining shifts. As an example, BHD relies on staff from across departments to provide one-on-one care, including CNAs, RNs, LPNs, and occupational and music therapists.

The Division has implemented several approaches to reduce overtime over the past several years. BHD has maintained the hospital census to the licensed bed capacity since May 2009; increased monitoring of the electronic timecard system and employee schedules; hired a registered nurse recruiter to decrease the vacancy rate; and outsourced housekeeping and dietary, which has reduced overall costs and overtime. BHD has also recently instituted additional layers of review for patients requiring one-on-one care, to ensure that such staffing is reduced as soon as deemed medically appropriate for each patient. Also, overtime is reviewed by service area in monthly manager meetings as a way to, not only, monitor overtime use but also to brainstorm new ideas for reducing overtime.

Moreover, BHD is in the process of implementing a 2011 Budget initiative to hire staff for 47 new clinical positions, including CNAs, RNs, a staff psychiatrist, and a clinical psychologist. The first cohort of new CNAs will start in early April. It is BHD's expectation that as additional staff comes on board, there will be a reduced need to use overtime to cover shifts due to vacancies and paid time off. These savings will be used to pay for some of the new positions.

Advance Steps

County departments have the authority, with DAS and County Board approval, to hire new staff at a step other than the first step or provide existing staff an advance step within their designated pay range. Generally, BHD uses advance steps in a couple of different ways. For all FHNP positions, the collective bargaining agreement sets forth the steps within the pay range that new staff must be brought in at and the steps that current staff must be advanced to based on their experience.

BHD also uses advance steps as a recruitment and retention tool to offer salaries that are competitive with other institutions. This is particularly the case for psychiatrists and psychologists, where pay in the private sector can be considerably higher than what BHD would be able to offer if constrained to the first steps in a pay range. The ability to offer advance steps to medical staff has been instrumental in recruiting to fill some of the vacancies at BHD, though significant discrepancies still remain between salaries at BHD and other institutions.

The chart below shows BHD's appointments at an advanced step of the pay range or advancement within the pay range for the period October 2010 through March 2011 (as of March 28, 2011).

Appointments at Advanced Step of the Pay Range (PR) - October 2010 - March 2011

Position	Steps in PR	Appt Step	Justification	Date
October - December 2010				
RN 1	10	10	Previous hire	October
RN 1	10	10	Previous hire	October
Medical Program Director - CATC	7	6	Same dept promotion	October
Staff Psychiatrist HR	7	3	Previous hire	October
Staff Psychiatrist HR	7	3	Previous hire	October
Staff Psychiatrist HR	7	3	Previous hire	October
Asst Medical Admtr- BHD NR	5	3	Same dept promotion	October
Medical Director Adult	7	7	Same dept promotion	October
RN 2 - MDS	9	9	Training/experience	October
Staff Psychiatrist	7	5	Training/experience	October
Administrative Coord BH	5	4	Same dept promotion	December
Administrative Coord BH	5	2	Transfer promotion	December
EMS Infomatics	5	3	Training/experience	December
January - March 2011				
Dietitian Supervisor	5	3	Training/experience	January
Psych Soc Worker (CSP)	5	3	Training/experience	January
Psych Soc Worker	5	2	Training/experience	January
Staff Psychiatrist HR	7	7	Rehire	March
Nursing Assistant 1 MH	10	5	Rehire	March
House Physician 3 HR	7	3	Training/experience	March
Staff Psychiatrist	7	5	Training/experience	March

Advancement within the Pay Range (PR) - October 2010 - March 2011

Position	Steps in PR	Adv Step	Justification	Date
October - December 2010				
<i>none</i>				
January - March 2011				
Clinical Program Director Psych	5	5	Retention	March

Recommendation

This is an informational report. No action is necessary.



Gerri Lyday, Interim Director
Department of Health and Human Services

cc: Interim County Executive Marvin Pratt
Supervisor Lee Holloway, County Board Chairman
Terry Cooley, Co Executive Chief of Staff
John Ruggini, Interim Fiscal and Budget Administrator
Antoinette Thomas-Bailey, Fiscal & Management Analyst, DAS
Jennifer Collins, Analyst, County Board Staff
Rick Ceshin, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff