OFFICE OF THE COUNTY EXECUTIVE

Chris Abele

MILWAUKEE COUNTY EXECUTIVE

DATE: October 19, 2012

TO: The Honorable Lee Holloway, Chairman. Milwaukee County Board of Supervisors

FROM: Chris Abele, County Executive

SUBJECT: **Appointment of Hector Colon**

Pursuant to Sec. 59.17(2)(b) Wis. Stats, and subject to confirmation of your Honorable Body, I am pleased to appoint Mr. Hector Colon to the position of Director of Health and Human Services for Milwaukee County.

Mr. Colon has a strong background in human services, high-level government administration and broad leadership skills. As associate executive director at the United Community Center, Mr. Colon led staff of the Adult Day Center, Senior Center, Care Management and Housing programs. While working for Governor Doyle, Mr. Colon served the citizens of the State in several capacities and oversaw economic, workforce and regulation initiatives. He holds a master's degree in Occupational Therapy from University of Wisconsin-Milwaukee and certificates in Management and Leadership from Marquette University and University of Kentucky.

I am forwarding a copy of Mr. Colon's resume to you, and Mr. Colon will be setting up meetings with each of you individually to meet prior to his confirmation.

I am confident that Mr. Colon will bring the leadership and skills needed to Health and Human Services and I urge you to give this appointment your favorable consideration.

Sincerely,

Chris Abele
Milwaukee County Executive

Attachment

Cc: Supervisor Peggy Romo West, Chair –
Committee on Health and Human Needs
County Board of Supervisors
Terry Cooley, Chief of Staff, Board of Supervisors
Jennifer Collins, Research Analyst, Board of Supervisors
Jodi Mapp, Committee Clerk, Board of Supervisors
Hector Colon

Hector Colon, MS, OT

4226 W. Willow Way
Milwaukee WI 53221

Phone: (414) 899-1797
Email: hcolon2@wi.rr.com

More than 10 years of leadership experience with a proven track record of producing significant results in large and complex organizations through dynamic leadership, change management and employee empowerment. A proven ability to learn quickly, diagnose problems and come forth with solutions to address issues that negatively impact organizations and communities. Lead self and staff with honesty, respect, trust and integrity.

DISTINGUISHING QUALIFICATIONS

Team Leadership	**Business Development**	**Employee Empowerment**
Visionary Leadership	**Strategic Action Planning**	**Change Management**
Public Relations	**Community Development**	**Program Development**
Advocacy	**Presentation Skills**	**Negotiation**

PROFESSIONAL EXPERIENCE

State of Wisconsin – Madison, Wisconsin **2005 to 2011**

❖ *Department of Regulation and Licensing* **2009 to 2011**

Senior Executive/ Commissioner (Boxing & Mixed Martial Arts): One of the top 3 leaders in the organization that lead staff that provides services to 64 boards that credential 130 different professions. We provide over 350,000 licensees to professionals statewide. Directly oversee and administer the rules and regulations for Boxing and Mixed Martial Arts. Also directly oversee external relations, communications and legislative matters for the department; serve as a liaison to the Governor's office.

Achievements:

- Executed the implementation of a new medical board bureau; designed the organizational framework, hired new staff and set the policy direction for the new bureau. The new bureau is providing more efficient and effective services for physicians and affiliated professions in the divisions of credentialing, enforcement and board services while also ensuring the safety of the public.
- Led the execution of a public relations plan that improved and expanded our relationships with the media, legislature, board members and associations.
- Brought together the mixed martial arts industry (MMA), legislature and the department to craft legislation to regulated and license MMA in Wisconsin. Managed an advisory committee and staff in the development of the rules for MMA.
- Initiating a modernization bill aimed at assisting the Department in operating more efficiently and effectively, improving consumer protection, addressing good policies that can be uniformly addressed across all boards, and updating statutes that are outdated and not relevant with current standards.

State of Wisconsin continued - Madison, Wisconsin

❖ *Department of Workforce Development* **2007 to 2009**

Senior Executive/Legislative Liaison: One of the top 3 leaders in the organization that oversaw 1,600 employees with a $1.7 billion dollar budget in the divisions of unemployment insurance, workers compensation, equal rights, vocational rehabilitation, and employment and training. Directly oversaw external relations, communications and legislative matters for the Department; served as a liaison to the Governor's office.

Achievements:

- Led the Bureau of Apprenticeship Standards in the execution of a strategic plan that increased our minority participation in the program by 12%.
- Led the department in developing a more efficient and effective way of preparing Wisconsin's workforce by bringing together leaders from government, industry, education, economic development and workforce development to address the needs of employers and workers in a more coordinated manner.
- Took a lead role in implementing the Governors GROW Wisconsin initiatives which led to a better trained workforce in Wisconsin.

State of Wisconsin continued - Madison, Wisconsin

❖ *Wisconsin Housing and Economic Development Authority* **2005 to 2007**

Director of Economic Development: Led the state's second largest bank (assets) that provided loan guarantees to small businesses at favorable terms. Directly oversaw a loan guarantee portfolio of $60 million and a new market tax credit portfolio of $100 million.

Achievements:

- Forged relationships with banks, economic development corporations and other lending institutions and led staff in an outreach plan that increased our small business lending activity by 33%.
- Increases our net revenue by 30% as a result of more business, better efficiencies, and fee adjustments.
- Increased our small business lending in rural Wisconsin by 180%.
- We provided $1.5 million in guarantees in February, 2006. This is the most that WHEDA has done in any one month.

City of Milwaukee – Milwaukee, Wisconsin **2004 to 2005**

Senior Legislative Fiscal Manager: Met with City department heads to establish the city's legislative agenda. Worked with local, state and federal elected officials to introduce and pass legislation. Tracked, analyzed and prepared testimony on legislation that was relevant to the city of Milwaukee.

Achievements:

- Successfully championed our legislative package to legislators that resulted in more bills being passed than the last previous 2 sessions combined among a team of lobbyists.
- Collaboratively worked with our team of lobbyist to bring over $250 million to the city of Milwaukee in shared revenue and other municipal aid programs.
- Obtained $234,600 for homeless veterans in the state budget.

United Community Center – Milwaukee, Wisconsin **2002 to 2004**

Associate Executive Director: Led staff in the oversight of the Adult Day Center, Senior Center, Care Management, and Housing programs; was responsible for budgeting, revenue forecasting, and also assisted with fund development.

Achievements:

- Increased our revenue by $1 million by developing new programs, renegotiating fee for service contracts and implementing marketing strategies that increased our reimbursement as a result of higher participation rates.

- Initiated and implemented a care management program resulting in better and more comprehensive services for our participants.
- Established competitive bidding for vendor contracts reducing overhead costs by thousands of dollars.
- Embarked upon a project to create a Latino Geriatric Center that included an Alzheimer's day center, Wellness Program, a Caregiver Support Program and research opportunities. This is currently being viewed as a national model.

Wisconsin Correctional Services – Milwaukee, Wisconsin **1999 to 2002**

Assistant Director: Led staff that provided comprehensive programs for people with mental illness in a community support program; monitored billing procedures to ensure that we were maximizing revenue potential.

Achievements:

- Promoted to the Assistant Director after only three months.
- Implemented an effective documentation system that generated extra revenue to support our programs.
- Developed a client-based model that reduced recidivism rates by 10%.
- Increased work productivity that produced results that previous assistant directors were not able to achieve.

EDUCATION

UW-Milwaukee MS, Occupational Therapy **(3.85 GPA)** 2001

UW-Milwaukee BS, Occupational Therapy **(cum laude)** 1997

CERTIFICATES

UW- Kentucky, Certificate in Management and Leadership 2009

- Leadership, Organizational & Cultural Change, Public Relations, & Negotiations

UW-Madison, Certificate in Commercial Real-estate 2007

- Real Estate Markets, Commercial Debt, Financial Analysis, & Underwriting

Marquette Certificate in Management and Leadership 2006

- Coaching, Leadership, Communication, & Performance management

AWARDS

Hispanic Director of the Year – *Spanish Times* 2003
Alumni of the Decade Award – Health Sciences, UW-Milwaukee 2003
40 under 40 Leadership Recognition Award - *Business Journal* 2002
35 under 35 Leadership Recognition Award - *Milwaukee Magazine* 2002
Commitment to the Community Award - *Spanish Times* 2001

OFFICE OF THE COUNTY EXECUTIVE

Chris Abele

MILWAUKEE COUNTY EXECUTIVE

DATE: November 22, 2011

TO: Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Chris Abele, Milwaukee County Executive

SUBJECT: Appointment of James Duff, Director of Veteran Services

Pursuant to Sec. 45.80(1)(c) Wis. Stats, and subject to confirmation of your Honorable Body, I am pleased to appoint James Duff to the position of Director of Milwaukee County Veteran Services.

Mr. Duff is a retired member of the U.S. Army. He has served as the Acting Director of Veteran Affairs on multiple occasions and for extended periods of time since 2006. In every capacity, Mr. Duff has served the County of Milwaukee and its veteran constituents well as an advocate and liaison.

I have every confidence that Mr. Duff will continue to foster relationships, develop support and connect Milwaukee's veterans to vital services and resources as the appointed Director of Veteran Services. I urge you to give this appointment your favorable consideration.

Chris Abele
Milwaukee County Executive

Attachment

CC: Supervisor Willie Johnson, Chair of the Judiciary, Safety and General Services
Terry Cooley, Chief of Staff
Rick Ceschin, Research Analyst
Linda Durham, Committee Clerk
James Duff

MILWAUKEE COUNTY COURTHOUSE, 901 NORTH 9TH STREET, ROOM 306, MILWAUKEE, WI 53233
TELEPHONE (414) 278-4211 FAX (414) 223-1375 COUNTY.MILWAUKEE.GOV/COUNTYEXECUTIVE

RESUME

James A. Duff
8020 Harwood Avenue
Wauwatosa, Wisconsin 53213
(home) 414.302.1396 (work) 414.382.1753 (cell) 414.322.1581

OBJECTIVE: A position of influence in government, with responsibility for realizing cost savings while expanding services and achieving efficiencies

EXPERIENCE:

Deputy Director/Acting Director, Veterans Services 12/2004 – Present
Milwaukee County, Milwaukee, WI

- Principal representative to county's 60,000 veterans and their families
- Conduct outreach, make presentations at schools, meeting places and community events
- Developed new services while reducing personnel costs
- Principal advocate regarding veterans issues
- Fostered creative relationships to provide additional services to veterans
- Assist veterans/families in applying for local/state/federal benefits

Adjutant, Cudworth Post 23 04/2003 – 11/2004
American Legion, Whitefish Bay, WI

- Managed administrative activities of a 900+ member veterans organization
- Made public speeches and presentations

Supervisor, Customer Services 09/1999 – 03/2003
United States Postal Service, Milwaukee, WI

- Supervised 30 union employees in mail delivery and customer service
- Managed assignments and overtime in achieving budgetary goals

Manager, Production/Distribution 04/1997 – 09/1999
Hometown Inc, Milwaukee, WI

- Supervised 35 union employees in ice production/distribution, fuel oil deliveries, and maintenance and customer service.
- Responsible for operational budget of $4M; achieved budgetary goals

Chief, Personnel Automation and Data Processing 06/1989 – 03/1997
Headquarters, Wisconsin Army National Guard, Madison, WI

- Responsible for integrity of Wisconsin Army National Guard personnel data base and all associated information and reports
- Managed Standard Installation/Division Personnel Reporting System (SIPDERS) Branch – 8 military employees
- Provided information/reports to all levels of chain-of-command
- Conducted briefings to end-users/reported to staff agencies at state level

MILITARY EXPERIENCE: Retired US Army: Active Army 1971-1978, (AGR – WIARNG) 1983-1997

EDUCATION: BA, Business/Communications, Concordia College, Mequon, WI 2004
Currently enrolled in MBA program at UW-Whitewater

ORGANIZATIONS/AFFILIATIONS: Member, VVA, American Legion, VFW; War Memorial Center Veterans Board of Directors; Past President, Soldiers Home Foundation Inc; Past Chairman, Board of Directors Grays Child Development Center; Licensed Minister, Church of God in Christ

References available upon request.

OFFICE OF THE COUNTY EXECUTIVE

Chris Abele

MILWAUKEE COUNTY EXECUTIVE

Date: November 22, 2011

To: Lee Holloway, Chairman, County Board of Supervisors

From: Chris Abele, County Executive

Subject: Appointment to Care Management Organization Governing Board

Pursuant to State Statute 46.283(6), I am hereby appointing Ms. Mary McClintock to the Milwaukee County Department of Family Care- Managed Care- Care Management Organization Governing Board.

Ms. McClintock has agreed to serve on the board for a term expiring November 3, 2013. She is currently a member of the Family Care Program. She has a background in the medical profession, receiving her Associate Degree from MATC in 1971. Her resume is attached for your review.

Your consideration and confirmation of this appointment would be appreciated.

Chris Abele
Milwaukee County Executive

CC: Supervisor Peggy Romo West, Chairman, Health and Human Needs Committee
Terry Cooley
Jodi Mapp
Jennifer Mueller
George Aldrich
Tia Torhorst
Maria Ledger, Director, Department of Family Care
Mary McClintock

MILWAUKEE COUNTY COURTHOUSE, 901 NORTH 9TH STREET, ROOM 306, MILWAUKEE, WI 53233
TELEPHONE (414) 278-4211 FAX (414) 223-1375 COUNTY.MILWAUKEE.GOV/COUNTYEXECUTIVE

August 10, 2011

Department of Family Care
901 North 9th Street
Milwaukee WI 53233
Attn: Valerie Woods

Dear Ms. Woods:

I am excited to apply for the Managed Care Organization Governing Board. I think I would be an asset to the board because I have a lot of personal experience being a caretaker and a client. I took care of my mother for several years and have seen many changes, both good and bad, in the system. I have a neuro-muscular degenerative disorder and am now fully physically disabled and am a current client of Family Care. I would be able to bring to the board my practical concerns, knowing firsthand what the implications truly would be when cutting various services. Times have been very tough and I understand having to balance a budget, but some services are extremely valuable. For example, I am very concerned that Transit Plus may be seeing service cuts. I wonder if people realize they are the only company that works nights and weekends. There have also been some bumps in the road with regard to the various in-home agencies and how they handle client-provider relations. I can report how my experience has been, where I see things breaking down and finally some ideas on how to make things better.

To explain a little more about me, I became a mother early. After my first child, I worked as a nurse's aide at St. Joseph Hospital. I liked the work, so I attended nursing school. During that time, I had two more babies, but still graduated in 1971. From there, I went to work at St. Mary's Hospital where I did nursing on a medical/surgical floor. I had a fourth child and when she began kindergarten, went to work at Milwaukee Lutheran Hospital. The work there was exciting in that I helped set up one of the first Gastro-Intestinal Labs in the area. At the time, it was groundbreaking science. After three years, my health steadily deteriorated. I had my fifth and final child, but was too weak to return to nursing again.

I was divorced after 18 years of marriage and I found myself raising five children basically on my own. Times were extremely tough financially, but I met my obligations and maintained a home for us. I am proud to say that all of my children graduated college or a university.

Therefore, I hope you see that I have a lot of life experience and believe it would lend itself in many ways to being an asset to your board.

Sincerely,

Mary J. McClintock

PAULA K. LORANT
405 E. Montclaire Ave.
Whitefish Bay, Wisconsin, 53217
Home: 414-964-5611
Cell: 414-217-0491
paula@229east.com

PERSONAL

Born: July 17, 1950, Chicago, Illinois
Marital Status: Married

EDUCATION

Washington University School of Law, St. Louis, Missouri, J.D. 1975

Associate Editor, Urban Law Annual
Chairman, Legislative Drafting Project, Woman's Group

Grinnell College, Grinnell, Iowa, A.B. 1972, Political Science

Honorable Mention, Political Science
Dean's List, Academic Years, 1971-1972

LEGAL EXPERIENCE

Legal Aid Society of Milwaukee, Inc., 1991 - June, 2011

Co-ordinator, HELP Project (Helping Elderly with Legal Problems). Representation of low-income Milwaukee County residents, age 50 and older, in civil and administrative matters, with emphasis on public benefits and advanced directives; provided training on disability legal issues and powers of attorney to physicians, attorneys, lay advocates, and community organizations.;

Manager, Social Security Advocates Work Group. Established a consortium of advocates and Social Security Administration Managers to work collaboratively in identifying and resolving systemic issues and decreasing the waiting times for disability determinations; co-chaired quarterly meetings; managed an electronic list-serve for local Social Security advocates.

Marquette University Law School - Lecturer in Law, 1982 - 1991

Co-director of the law school's Legal Clinic for the Elderly. Instruction and supervision of students in various aspects of civil law and office management. Representation of clients in administrative and civil legal proceedings.

State Public Defender's Office, Juvenile Division, 1978-1979

Chief Staff Attorney of the Milwaukee Juvenile Division. Administrative and training responsibilities for 8 attorneys and 5 support personnel. Trial and appellate representation in civil and delinquency cases.

Legal Aid Society of Milwaukee, Inc., 1975 - 1978

Staff attorney in both the Juvenile Public Defender's Office and Civil Division of the Legal Aid Society. Trial and appellate representation in civil and criminal cases.

St. Louis Legal Aid Association, Welfare Division, 1974 - 1975

Legal Intern; counsel for clients at fair hearings and appeals; legal research on law reform issues.

American Bar Foundation Research Grant, Summer, 1974

Co-author of a report on state implementation of the Water Pollution Control Act, published in Urban Law Annual, Vol. 10, 1975; field research and investigation as to land-use implications.

PROFESSIONAL ORGANIZATIONS AND MEMBERSHIPS

Member, State Bar of Wisconsin, 1975 through present;
Board Member, Jewish Community Relations Council, 2011 through present;
Board Member, Milwaukee Aging Consortium, 2001 - 2004.

HONORS

State Bar of Wisconsin, 2006 Pro Bono Lawyer of the Year;
Social Security Administration, 2010 Outstanding Public Service Recognition.

References furnished upon request.

OFFICE OF THE COUNTY EXECUTIVE

Chris Abele

MILWAUKEE COUNTY EXECUTIVE

Date: November 22, 2011

To: Lee Holloway, Chairman, County Board of Supervisors

From: Chris Abele, County Executive

Subject: Appointment to Care Management Organization Governing Board

Pursuant to State Statute 46.283(6), I am hereby appointing Ms. Paula K. Lorant, Attorney At Law, Retired, to the Milwaukee County Department of Family Care- Managed Care- Care Management Organization Governing Board.

Attorney Lorant has agreed to serve on the board for a term expiring November 3, 2013. She is currently a retired attorney who has served as an advocate for people with disabilities within our community for many years. She is very familiar with the Family Care program and will be a valuable asset to the Board.

Your consideration and confirmation of this appointment would be appreciated.

Chris Abele
Milwaukee County Executive

CC: Supervisor Peggy Romo West, Chairman, Health and Human Needs Committee
Terry Cooley
Jodi Mapp
Jennifer Mueller
George Aldrich
Tia Torhorst
Maria Ledger, Director, Department of Family Care
Paula Lorant

MILWAUKEE COUNTY COURTHOUSE, 901 NORTH 9TH STREET, ROOM 306, MILWAUKEE, WI 53233
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August 12, 2011

Ms. Valerie Woods,
Milwaukee County Department of Family Care
901 N. 9th Street, Room 307 C
Milwaukee, Wisconsin, 53233

Re: Milwaukee County Department of Family Care, Governing Board

Dear Ms. Woods:

As you requested, I have enclosed a copy of my resume for your review.

I am very enthusiastic about the opportunity to serve on the Milwaukee County Department of Family Care's Governing Board. Throughout my legal career, I have represented many low income, Milwaukee County residents, of all ages, who were in need of coordinated medical care and case management services. I have seen the positive impact that enrollment in the Family Care Program has brought to many of my clients. For many years, I have been an active participant in Disability Rights Wisconsin's Family Care Advocacy Constortium, and am familiar with the program. Although I have recently retired from the active practice of law, my commitment to promoting the interests of those in need in our community remains strong. Particularly in these difficult economic times, I look forward to working with the Board and the Department of Family Care to ensure the interests and integrity of the program and its consumers.

Thank you for considering my application to become a member of the Governing Board. Please feel free to contact me with questions or if you would like further information.

Sincerely yours,

Paula K. Lorant

Paula K. Lorant
Attorney at Law

405 E. Montclaire Avenue
Whitefish Bay, Wisconsin, 53217
414-964-5611

PAULA K. LORANT
405 E. Montclaire Ave.
Whitefish Bay, Wisconsin, 53217
Home: 414-964-5611
Cell: 414-217-0491
paula@229east.com

PERSONAL

Born: July 17, 1950, Chicago, Illinois
Marital Status: Married

EDUCATION

Washington University School of Law, St. Louis, Missouri, J.D. 1975

Associate Editor, Urban Law Annual
Chairman, Legislative Drafting Project, Woman's Group

Grinnell College, Grinnell, Iowa, A.B. 1972, Political Science

Honorable Mention, Political Science
Dean's List, Academic Years, 1971-1972

LEGAL EXPERIENCE

Legal Aid Society of Milwaukee, Inc., 1991 - June, 2011

Co-ordinator, HELP Project (Helping Elderly with Legal Problems). Representation of low-income Milwaukee County residents, age 50 and older, in civil and administrative matters, with emphasis on public benefits and advanced directives; provided training on disability legal issues and powers of attorney to physicians, attorneys, lay advocates, and community organizations.;

Manager, Social Security Advocates Work Group. Established a consortium of advocates and Social Security Administration Managers to work collaboratively in identifying and resolving systemic issues and decreasing the waiting times for disability determinations; co-chaired quarterly meetings; managed an electronic list-serve for local Social Security advocates.

Marquette University Law School - Lecturer in Law, 1982 - 1991

Co-director of the law school's Legal Clinic for the Elderly. Instruction and supervision of students in various aspects of civil law and office management. Representation of clients in administrative and civil legal proceedings.

State Public Defender's Office, Juvenile Division, 1978-1979

Chief Staff Attorney of the Milwaukee Juvenile Division. Administrative and training responsibilities for 8 attorneys and 5 support personnel. Trial and appellate representation in civil and delinquency cases.

Legal Aid Society of Milwaukee, Inc., 1975 - 1978

Staff attorney in both the Juvenile Public Defender's Office and Civil Division of the Legal Aid Society. Trial and appellate representation in civil and criminal cases.

St. Louis Legal Aid Association, Welfare Division, 1974 - 1975

Legal Intern; counsel for clients at fair hearings and appeals; legal research on law reform issues.

American Bar Foundation Research Grant, Summer, 1974

Co-author of a report on state implementation of the Water Pollution Control Act, published in Urban Law Annual, Vol. 10, 1975; field research and investigation as to land-use implications.

PROFESSIONAL ORGANIZATIONS AND MEMBERSHIPS

Member, State Bar of Wisconsin, 1975 through present;
Board Member, Jewish Community Relations Council, 2011 through present;
Board Member, Milwaukee Aging Consortium, 2001 - 2004.

HONORS

State Bar of Wisconsin, 2006 Pro Bono Lawyer of the Year;
Social Security Administration, 2010 Outstanding Public Service Recognition.

References furnished upon request.

OFFICE OF THE COUNTY EXECUTIVE

Milwaukee County

CHRIS ABELE • COUNTY EXECUTIVE

DATE: November 23, 2011

TO: The Honorable Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Chris Abele, County Executive

SUBJECT: **Appointment to the Commission for Persons with Disabilities**

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in the General Ordinances of Milwaukee County, Chapter 73, I am hereby appointing Ms. Macey Chovaz to the Commission for Persons with Disabilities. Ms. Chovaz's term will expire on December 15, 2013. Her resume is attached for your review.

Your consideration and confirmation will be appreciated.

Chris Abele
Milwaukee County Executive

cc: Supervisor Peggy West, Chairperson, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff
Rich Ceschin, Research Analyst
Jodi Mapp, Committee Clerk
Don Natzke, Director, Commission for Persons with Disabilities
Macey Chovaz

ROOM 306, COURTHOUSE • 901 NORTH 9TH STREET • MILWAUKEE, WISCONSIN 53233
PHONE: 414-278-4346 • FAX: 414-223-1375

Macey Chovaz, MA, CRC

1309 S 93rd St.
West Allis WI 53214
(517) 896-8076
maceydlyons@gmail.com

Summary of Qualifications

- Certified Rehabilitation Counselor (CRC)
- Work Incentive Benefits Counselor; WIBSA member
- Excellent organizational and communication skills
- Experience working with persons with disabilities and at risk youth

Experience

Creative Employment Opportunities, Inc June 2010-Present
Employment Consultant Milwaukee, WI

- Work Incentive Benefits Counselor
- Job development and job coaching
- Perform Community Based Functional Assessments
- Partner with the local businesses to expand internship program
- Disability awareness training
- Works with local high school transition programs

Curative Care Network January 2009-June 2010
Vocational Specialist Milwaukee, WI

- Job development and outreach in Milwaukee and Waukesha County
- Benefits Counseling and MAPP/HEC Specialist
- Work Adjustment (WAT) & Community Employment caseloads
- Performed Supported Employment and Situational Assessments

Personal Assistant August 2007-December 2008
East Lansing, MI

- Assisted a female student with activities of daily living

Michigan Rehabilitation Services Intern August 2008-December 2008
St. Johns, MI

- Responsible for a transition and general caseload
- Performed individual and vocational counseling

Sparrow Hospital May 2008-August 2008
Adult Psychiatric Unit Intern Lansing, MI

- Co-facilitated group therapy as well as activity therapy
- Performing intake interviews on admitted patients
- Individual counseling sessions when time allowed

Education

Master of Arts in Rehabilitation Counseling December 2008
Michigan State University East Lansing, MI

Bachelor of Arts in Anthropology May 2007
Michigan State University East Lansing, MI

Specialization in Bioethics May 2007
Michigan State University East Lansing, MI

- **Certified Rehabilitation Counselor (CRC)** 2008-Present
- **Work Incentive Benefits Specialist Association Member** 2009-Present
- **Association for Persons in Supported Employment (APSE) Member** 2009-Present
- **National Rehabilitation Association (NRA) Member** 2007-Present
- **Member of the Wauwatosa Committee for Persons with Disabilities** 2009-2011

OFFICE OF THE COUNTY EXECUTIVE

Milwaukee County

CHRIS ABELE • COUNTY EXECUTIVE

DATE: November 23, 2011

TO: The Honorable Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Chris Abele, County Executive

SUBJECT: **Appointment to the Commission for Persons with Disabilities**

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in the General Ordinances of Milwaukee County, Chapter 73, I am hereby appointing Mr. John Haupt to the Commission for Persons with Disabilities. Mr. Haupt's term will expire on December 15, 2013. His resume is attached for your review.

Your consideration and confirmation will be appreciated.

Chris Abele
Milwaukee County Executive

cc: Supervisor Peggy West, Chairperson, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff
Rich Ceschin, Research Analyst
Jodi Mapp, Committee Clerk
Don Natzke, Director, Commission for Persons with Disabilities
John Haupt

ROOM 306, COURTHOUSE • 901 NORTH 9TH STREET • MILWAUKEE, WISCONSIN 53233
PHONE: 414-278-4346 • FAX: 414-223-1375

JOHN A. HAUPT
1675 North 120th Street
Wauwatosa, WI 53226
(414) 771-0977
johnahaupt@yahoo.com

April 21, 2011

Meg Steimle, BA
Southeast Regional Center
Children and Youth with Special Health Care Needs
Children's Hospital of WI
9000 W. Wisconsin Ave. MS939
Milwaukee, WI 53226

Meg,

Thanks for spending time on the phone with me last week. I enjoyed making your acquaintance and reviewing the needs of the Commission.

As an MS patient for the last 39 years and with training in Architectural Technology, I hope to bring unique ideas and perspective to the Commission. In my position as a design consultant with Bridgeway Independent Living Designs, I have access to state of the art technology and equipment. As a member of the board, I would apply my training and everyday experience toward policy and problem solution as needed. I look forward to the opportunity to learn more and to take an active role in the organization's future success.

Sincerely,

John A. Haupt

JOHN A. HAUPT
1675 North 120th Street
Wauwatosa, WI 53226
(414) 771-0977
johnahaupt@yahoo.com

PROFESSIONAL SKILLS & QUALIFICATIONS

- **AAS-Architectural Technology, Honors Graduate, MATC 2005**
- **Member, Phi Theta Kappa & NTHS-National Technical Honor Society**
- **BA-Mass Communication, University of Wisconsin-Milwaukee**

WORK EXPERIENCE

ARCH DESIGN & DRAFTING
Achitectural Designer/Drafter 2006-Present
Independent residential and commercial architectural design and drafting

UNITED HEALTHCARE OF WI, INC. 1996-2002
Medicare Sales Executive
Sales and marketing of Medicare HMO. Attained UHC "Sales Pinnacle" 1997. Presented health plans to groups of two to 200.

AXA FINANCIAL 1991-1996
Registered Representative
Sales of financial services including mutual funds and group retirement plans.

K&S PHOTOGRAPHICS 1987-1991
Sales Representative
Sales of custom photographic processing and print services to advertising agencies and graphic designers.

EWING & COMPANY 1985-1987
Account Executive
Secured and managed consumer advertising accounts.

TOUR DE FORCE, LTD 1980-1985
Production Coordinator
Coordination of all production elements of original and syndicated radio and television advertising. Performed all production functions required for film, video and audio.

EDUCATION

MILWAUKEE AREA TECHNICAL COLLEGE
AAS, Architectural Technology, 2005
National Technical Honor Society • Phi Theta Kappa Honor Society

UNIVERSITY OF WISCONSIN, MILWAUKEE
BA-Mass Communication

OFFICE OF THE COUNTY EXECUTIVE

Milwaukee County

CHRIS ABELE • COUNTY EXECUTIVE

DATE: November 29, 2011

TO: The Honorable Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Chris Abele, County Executive

SUBJECT: **Appointment to the Commission for Persons with Disabilities**

Subject to the confirmation of your Honorable Body and pursuant to the provisions set forth in the General Ordinances of Milwaukee County, Chapter 73, I am hereby appointing Ms. Kathryn Zalewski to the Commission for Persons with Disabilities. Ms. Zalewski's term will expire on December 15, 2013. Her resume is attached for your review.

Your consideration and confirmation will be appreciated.

Chris Abele
Milwaukee County Executive

cc: Supervisor Peggy West, Chairperson, Health and Human Needs Committee
Milwaukee County Board of Supervisors
Terry Cooley, Chief of Staff
Rich Ceschin, Research Analyst
Jodi Mapp, Committee Clerk
Don Natzke, Director, Commission for Persons with Disabilities
Kathryn Zalewski

ROOM 306, COURTHOUSE • 901 NORTH 9TH STREET • MILWAUKEE, WISCONSIN 53233
PHONE: 414-278-4346 • FAX: 414-223-1375

CURRICULUM VITAE

KATHRYN ZALEWSKI
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EDUCATION

University of Wisconsin - Milwaukee
Ph.D. – Motor Learning 2001
Dissertation: 'Age-Related Differences in Targeted Aiming'

University of San Francisco 1992
Master of Public Administration/Health Services Administration

University of Wisconsin - Madison 1986
Bachelor of Science - Physical Therapy

LICENSURE INFORMATION

Physical Therapy License Number 3086 (WI) - active
Physical Therapy License Number 15021 (CA) – active 1988-1998 (currently inactive)

EMPLOYEMENT AND POSITIONS HELD: ACADEMIC EMPLOYMENT

2006 – present — University of Wisconsin-Milwaukee, Milwaukee, WI
Assistant Professor – Human Movement Sciences/Physical Therapy
Program Director – Doctor of Physical Therapy Program

Inaugural Program Director for a new Doctor of Physical Therapy Program on a research intensive doctoral campus in the University of Wisconsin System. Full accreditation achieved from the Commission on Accreditation in Physical Therapy Education in 2010. This program represents the first professional doctorate on the UWM campus. To date the DPT at UWM has a 100% first time pass rate on the National Physical Therapy Licensing Examination.

2010 – present — Commission on Accreditation in Physical Therapy Education
On-site reviewer for physical therapy program accreditation: Team Leader.

2002 – 2006 — Concordia University Wisconsin, Mequon, WI
Associate Professor of Physical Therapy

Course instruction in physical therapy management of adults with primary neurologic dysfunction, motor control and skill acquisition, and statistics and research methodology in the entry level DPT and post-professional MS, PT and DPT programs. Participated in the development of the first post-professional Doctor of Physical Therapy program in Wisconsin.

2000 – 2002 — Concordia University Wisconsin; Mequon, WI
Assistant Professor of Physical Therapy

1994 – 1999 — Concordia University Wisconsin; Mequon, WI
Academic Coordinator of Clinical Education

Developed and implemented the clinical education curriculum for a new entry-level Doctor of Physical Therapy Program representing the first professional doctorate in this campus system. In conjunction with the Director of Physical Therapy,

established initial accreditation by the Commission on Accreditation in Physical Therapy Education and facilitated an expanded accreditation from the North Central Association of Colleges and Schools: Higher Learning Commission.

Spring 2001 — University of Wisconsin – Milwaukee
Adjunct Assistant Professor – Human Kinetics

Course instructor for HK 478-461: Introduction to Motor Learning.

9/91 - 7/93 — De Anza Community College PT Assistant Program; San Jose, CA
Adjunct Faculty

Course instructor for Introduction to Physical Therapy - PTHR 50

EMPLOYEMENT AND POSITIONS HELD: CLINICAL EMPLOYMENT

1/2002 – present — Kathryn Zalewski, PT, Ph.D. - LLC

Provider of home and community based rehabilitation services with an emphasis on wellness, health promotion, and exercise training for adults with central nervous system challenge including stroke, brain injury, multiple sclerosis and Parkinson's Disease.

9/95 – 2000 — Healthreach; Milwaukee, WI

Independent contractor of Physical Therapy services for a provider of rehabilitation services to home health and skilled nursing facilities in the greater Milwaukee area.

4/92 - 12/93 — Learning Services/Northern California,; San Jose', CA
Lead Clinician

Responsible for staff development (Physical Therapy, Occupational Therapy, Speech Pathology, and non-licensed staff), budget development, program development and direct client care provision for the 3 Northern California Campuses: Berkeley, San Jose, and South Valley. The clinics specialize in post-acute rehabilitation for the client with acquired brain injury patient through providing inpatient residential, home centered, and outpatient therapies.

6/91 - 4/92 — San Jose' Healthcare Center; San Jose', CA
Director of Rehabilitation

Responsible for the organization, development, marketing, and management of the Physical Therapy, Occupational Therapy, and Speech Therapy departments in a 152 bed Skilled Nursing Facility with 26 Medicare licensed rehabilitation beds.

1/88 - 6/91 — San Jose' Medical Center; San Jose', CA
Center Coordinator of Clinical Education

Responsible for organization of Physical Therapist and Physical Therapist Assistant student internship programs at a 200 bed acute care medical center with 22 acute rehabilitation beds. Program responsibilities included staff development, staffing for the student program, and communication with academic institutions. Patient care responsibilities include the evaluation and treatment of patients in the medical center and on the rehabilitation unit with an emphasis in physical therapy management of clients with neurologic dysfunction.

11/86 – 12/87 — St. Mary's Hospital; Milwaukee, WI
Staff Physical Therapist/Center Coordinator of Clinical Education

Responsible for the development of the Physical Therapist student internship program in addition to patient care responsibilities.

PEER REVIEWED PUBLICATIONS

Zalewski K, and Alt C (in review). Differential Diagnosis of Activity Barriers in Outpatient Physical Therapy. *Physical Therapy.*

Zalewski, K and Malzahn J (in review). Functional descriptors of intensity guide self-selected walking pace in older adults. *Journal of Geriatric Physical Therapy.*

Zalewski, K and Dvorak L (in press). Activity participation and barriers to activity participation for adults with and without stroke. *Topics in Stroke Rehabilitation.*

Smith JC, **Zalewski K,** Motl R, VanHart M, Malzahn J (2010). The contributions of self-efficacy, trait anxiety, and fear of falling to physical activity behavior among residents of continuing care retirement communities. *Ageing Research (2)*:e3. doi:10.4081/ar2010.e3.

Zalewski K, Kerk J, Laundre K, Wacek A, Wiedmeyer M (2010). A case report exploring activity intensity in inpatient rehabilitation after stroke. *Case Reports in Medicine, 2010.* Electronic journal available at: doi:10.1155/2010/507476.

Zalewski K, Smith JC, Malzahn J, O'Connell D (2009). Measures of physical ability are unrelated to objectively measured physical activity behavior in older adults residing in continuing care retirement communities *Archives of Physical Medicine and Rehabilitation, 90*(6): 982-986.

Zalewski, K. (2007). Revisiting outcomes in Multiple Sclerosis: A case report. *Journal of Neurologic Physical Therapy, 31*(1), 40-45.

Brusse, K., **Zalewski, K.,** Steffen T. S. (2005). Functional testing in persons with Parkinson's Disease. *Physical Therapy, 85*(2), 134-141.

Zalewski, K., Smith, P., Hart, B., Schot, P., Edejan, M. (1999). Modeling skill acquisition using time series analysis. *Measurement in Physical Education and Exercise Science, 2*(6), pp. 107-123.

PEER REVIEWED SCIENTIFIC AND PROFESSIONAL PRESENTATION

Duffy S, **Zalewski K** (in review). Physical Activity Intensity of Inpatient Stroke Rehabilitation is Related to Functional Outcome. Submitted to the American Physical Therapy Association Combined Sections meeting (February 2012).

Zalewski K, Meyer B, Alt C (in review). Promoting Physical Activity in the Older Adult after Discharge from Physical Therapy: Lessons Learned from Elite Performance. Submitted to the American Physical Therapy Association Combined Sections meeting (February 2012).

Hornung N, Blackman S, **Zalewski K** (2011). Changes in Impairment and Functional Measures During Rehabilitation Following Unilateral Vestibular Loss: Investigation of the Gaze Stabilization Test. Wisconsin Physical Therapy Association Spring Conference.

This poster received first place in the juried competition for best original research.

Zalewski K (2011). I just want to make a sandwich: Experiences in stroke recovery. International Conference on Health Wellness and Society.

Fruin A, **Zalewski K,** Snyder A (2010). Residential and community environments in physical activity in older adults. *American College of Sports Medicine Annual Conference, Poster Session, 2010.*

Zalewski, K, Johnson, S (2009). Differences in autonomous practice values and the practice environment for physical therapists. *International Conference on Direct Access,* October 24, 2009.

Kuhn J, Mueller M, Tully R, Miles L, **Zalewski K.** (2009). Results of a brief intense bout of physical therapy intervention in a person with vestibular dysfunction: A case report. Wisconsin Physical Therapy Association Spring Conference.

This poster received first place in the juried competition for best case report.

Deja J, Steinhorst C, VanderBloomen K, Wagner K, Malzahn J, **Zalewski K.** (2009). Perception of activity intensity in older adults. Wisconsin Physical Therapy Association Spring Conference.

This poster received first place in the juried competition for best research poster.

Zalewski, K (2009). Using the Environment to Increase Physical Activity Participation for Seniors in Community Care Retirement Facilities: Development and Use of the CCRC Health Index for Physical Activity Behaviors. *PT 2009 Annual Conference and Exposition for Physical Therapy.*

Zalewski K, Rud A, Johnson S (2009). Reimbursement priorities of the Wisconsin Physical Therapy Association. *American Physical Therapy Association, Combined Sections Meeting, 2009.*

Smith, J C, **Zalewski, K,** Motl RW, O'Connell DL, Malzahn J. (2008) Relationships between self-efficacy and physical activity behavior among elders in an assisted living environment. Scientific abstract submitted for presentation at the Annual Meeting of the American College of Sports Medicine, 2008.

Zalewski, K., Brown, E., Hanson, J., Fischer, L., Spector, A., (6/2006). Predictors of physical activity in adults with and without stroke. Submitted as a poster abstract to the APTA Annual Conference and Exposition: PT 2006.

Zalewski, K., Kokott, W. (2005). The impact of exercise on quality of life in persons with disability: A pilot study. Presented at 2005 Combined Sections Meeting of the American Physical Therapy Association. Health Policy and Administration Section, New Orleans, LA.

Wheeler A, **Zalewski, K.,** Nelson, R., Dvorak, L. (2005). Accuracy Of An Electronic Pedometer At Three Different Self-selected Walking Speeds. Presented at the 2005 American College of Sports Medicine Annual Conference. Abstract Number: 05-SA-1984-ACSM.

Zalewski K, Nelson R, Rimmer J (2004). The effects of aerobic conditioning in motor recovery post-stroke: a review of the evidence. *PT 2004 Annual Conference and Exposition for Physical Therapy.*

Zalewski K, Dvorak L (2004). Differential diagnosis in neurologic rehabilitation: Implications for practicing clinicians. *PT 2004 Annual Conference and Exposition for Physical Therapy.*

Zalewski, K. (10/2001). Motor control of aiming movements: Challenges to Modeling. Motor Development Research Consortium, Ann Arbor, MI.

Schaidt, D, Petersen, C., and **Zalewski, K** (2004) Evidence in practice: The effect of strength training on muscle strength and disease activity in persons with rheumatoid arthritis. (Abstract). *Physical Therapy,* 84(9), PO-SI-59-TH.

Schaidt, D, Falkenberg, S, Heller, P, and **Zalewski, K** (2004) Evidence in practice: Use of a systematic methodology for evaluating the current literature on the effect of passive stretching in adults with CNS dysfunction. *Physical Therapy, 84*(9), PO-SI-54-TH.

Zalewski, K. (6/98) "An Analysis of Collaborative Learning Models to Enhance Critical Thinking in Physical Therapy Students". Platform presentation, 1998 American Physical Therapy Association Scientific Exposition and Conference; Orlando, FL.

Zalewski, K. (6/98). Statistical Analysis of Individual Difference in Skill Acquisition. Poster presentation at NASPSPA National Conference, St. Charles, IL.

Gerke, D., Langendorf, C., Timm, K., Koles, A., Mollinger, L., **Zalewski, K.** (2000). Forefoot measurements: Prone versus standing and rater reliability (Abstract). *Physical Therapy*, 80(5), PO-RR-30-TH.

Wohlers, C., Kontney, L., **Zalewski, K**. (2000). A comparison of two clinical teaching models: The effect on the disposition toward critical thinking (Abstract). *Physical Therapy, 80*(5), PO-RR-13-TH.

Zalewski, K., Smith, P., Hart, B., Schot, P., Edejan, M. (1998). Statistical analysis of individual differences in skill acquisition (Abstract). *Journal of Sport and Exercise Psychology (Supplement), 20*, S98.

NON-PEER REVIEWED PUBLICATIONS

Zalewski, K (2006). Book review. Traumatic Brain Injury: Rehabilitative Treatment and Case Management, 2nd Edition, Ashley MJ (editor). *Physical Therapy, 86*:1173.

NON-PEER REVIEWED PRESENTATIONS

Zalewski, K (2006). Evidence in Pediatric Physical Therapy. Presented November 16, 2005 in conjunction with DPT 621 at Concordia University Wisconsin.

Zalewski, K (2005). Evidence Based Practice: Tools for Clinicians. Wisconsin Physical Therapy Association 2005 Spring Conference.

Zalewski, K, Baum JB, and Steffen, T (2000). Collaborative teaching: A model developed in teaching statistics in an entry-level Physical Therapy program. Presented to the faculty and staff of the Concordia University System (CUS) at Focus 2000; Minneapolis, MN.

Zalewski, K., Dvorak, L, and Franks, C. (10/98). Motor Learning and Control. Wisconsin Physical Therapy Association 1998 Fall Conference.

FUNDED/IN REVIEW GRANT ACTIVITY

<u>In Review Research Support</u>

U. S. Department of Education – Investing in Innovation Scale Up Grant (84.411A)

Zalewski (PI) in review

This project begins to address issues of limited diversity of the physical therapy by supporting

undergraduate pre-professional students of high need through community partnership to provide academic mentoring and purposeful development of professional identity formation.

Ongoing Research Support

American Physical Therapy Association - Health Policy and Administration Section
Zalewski (PI) 2009-2010
Recovery of physical abilities after stroke is strongly related to other health outcomes including risk of second events, additional comorbidities due to disuse and deconditioning, and infections. This project explores the impact of physical activity during early stages of inpatient rehabilitation after stroke.

University of Milwaukee-Graduate School Research Award
Zalewski (PI) 2009-2010
Stroke recovery is influenced by the goals and objectives of the survivor, his or her family, and the rehabilitation team. This project explores the values, beliefs, and hopes of a each member of the recovery team through three phases of stroke recovery: inpatient rehabilitation, day treatment/outpatient therapy, and discharge from rehabilitation services.

Wisconsin Physical Therapy Association - Lynne Phillippi Geriatric Advocacy Fund
Zalewski (PI), Alt 2009-2010
The central goal of this project is to validate a tool to be used by physical therapists to assist in supporting exercise adherence.

Completed Research Support

Concordia University Wisconsin: Concordia Intramural Research Grant
Zalewski (PI) 2004-2005
Nature of project: To describe physical characteristics and perceived barriers to physical activity in 20 persons with stroke and 20 age-matched healthy counterparts.

Concordia University Wisconsin: Concordia Intramural Research Grant
Zalewski (PI) 2004-2005
Nature of project: To pilot test a pedometer designed to evaluate functional walking distance in persons with CVA.

Research Support Completed During the Last 3 Years

Center for Urban Population Health, Milwaukee, WI
Zalewski, Neighbors (Co-I) 2008-2009
The project objective was to develop and evaluate a tool to explore the health promoting behaviors of the Continuing Care Retirement Community. The tool will be used as a collaborative assessment process to facilitate continuous improvement in the residential living environment.

OTHER SCHOLARLY PRODUCTS:

Gennusco, KP (2010). Efficacy of the current guidelines for resistance training to improve physical function in older adults. Master's Thesis written to satisfy requirements for a Master of Science in Kinesiology – University of Wisconsin-Milwaukee. (committee member)

Wohlers, CA (2000). A comparison of two clinical teaching models: The effect on the disposition toward critical thinking. Supervised Master's Thesis written to satisfy requirements for a Master of Science in Physical Therapy from Concordia University Wisconsin. (committee chair)

MEMBERSHIP IN SCIENTIFIC AND PROFESSIONAL ORGANIZATIONS

Memberships and positions held:

American Physical Therapy Association/Wisconsin Physical Therapy Association: member 1986 - present

Vice President: Wisconsin Physical Therapy Association: 2007-2009
Secretary: Wisconsin Physical Therapy Association: 2003 – 2007
Member of the Section on Neurology

Member of the Section on Research
Member of the Section on Health Policy and Administration
Member of the Section on Education
Delegate to the House of Delegates: 2008-2009 (elected position, 2 year term)
*Nominated for Delegate beginning 2011 term. Elections 11/2010.
Society for Neuroscience: Member 2006 – 2010
Wisconsin Clinical Education Consortium: member 1994 - 2000
Chair: 1994 - 1997
Chair: 1997 National Clinical Education Conference Planning Committee: 1995 - 1997

CONSULTATIVE AND ADVISORY POSITIONS HELD

Agency: Commission on Education in Physical Therapy Education (CAPTE)
Role: On-site reviewer (Team Leader)
Duration: September 2010-present

Agency: The Ability Center/AFAR, Inc.
Role: Board Member
Duration: 2011- preseent

Agency: Federation for State Boards of Physical Therapy (FSBPT)
Role: Item bank writer
Duration: 2003-2004

COMMUNITY SERVICE

Agency: Children's Hospital Foundation, Wauwatosa, WI
Role: Co-chair of the Zalewski Family Endowed Fund for Neurology Care. Establish and provide ongoing fund-raising for the care and research of children with developmental disabilities affecting central nervous system development.
Duration: Fund established in 2003. Ongoing distributions to community researchers at Children's Hospital in excess of $10,000.

Agency: Children's Hospital of Wisconsin, Wauwatosa, WI – advisory board informing the CHW Board of Directors
Role: Member Parent Advisory Council
Duration: September 2004 – 2006

Agency: Children's Hospital of Wisconsin, Wauwatosa, WI – advisory board informing the Children's Hospital Foundation, a fund-raising arm of CHW. Those with endowed funds are automatic members of this Society.
Role: Lamplighter Society Member
Duration: September 2004 – 2006

SERVICE TO THE UNIVERSITY/COLLEGE/SCHOOL ON COMMITTEES/COUNCILS/COMMISSIONS
Service to University of Wisconsin-Milwaukee

Department of Human Movement Sciences:
Search and Screen Committees:
Assistant/Associate Professor: Clinical Orthopedics (2010)
Clinical Assistant/Associate Professor (biomechanics/kinesiology) - 2008
Assistant/Associate Professor (exercise physiology/cardiopulmonary/health promotion): - 2007 (chair)
Director of Clinical Education: Physical Therapy – 2006 (co-chair)
Assistant/Associate Professor (neuroanatomist/anatomist) – 2006 (co-chair)

Department/College Committee Service (last 5 years)
Planning Committee: 2007-present

DPT Admissions Committee: 2008-2010

Consortial Administrative Committee: 2006 – present (co-chair)

HONORS AND AWARDS

Dean's Award for Service
College of Health Sciences – University of Wisconsin-Milwaukee
This award is given to recognize the ongoing service contributions of a member of the College of Health Sciences.
May 2011

Alumnus Honoris Award
Clintonville School District, Clintonville, WI
This award is given to an honored graduate of Clintonville Senior High School and represents the highest award a graduate from Clintonville High School. As part of this honor, I was able to be the commencement speaker for the graduating class of 2008.
June 2008

Mary Pay Murray Award for Clinical Excellence
Southeast District of the Wisconsin Physical Therapy Association
November 8, 2005

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: November 10, 2011

TO: Supervisor Peggy Romo West, Chairperson, Health and Human Needs Committee

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by Paula Lucey, Administrator, Behavioral Health Division

SUBJECT: **Informational Report from the Acting Director, Department of Health and Human Services on the Wraparound Milwaukee Program Operated by the Behavioral Health Division**

Background

Wraparound Milwaukee is a unique county program that annually serves over 1400 children and adolescents with severe emotional, behavioral and mental health needs and their families. The program is considered a national model in children's mental health and won Harvard University's prestigious "Best Innovation in America Award in 2009". The following informational report is provided at the request of the Health and Human Needs Committee to give the committee more information about the background for design and operation of the program as well as outcomes it has achieved for Milwaukee County families.

Discussion

Wraparound Milwaukee was initiated in 1995 as part of the re-design of the children's mental health system, the impetus being Milwaukee County's receipt of a five-year, $15 million grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to create a more community-based system of care. At that time, the County had very limited community-based mental health services and relied heavily on institutional care for children with severe mental health and behavioral needs. This resulted in overutilization of costly and restrictive psychiatric inpatient care, residential treatment placements and juvenile correctional placements. The overuse of such institutional care was resulting in large budget deficits for Milwaukee County and studies by research groups like the Planning Council of Milwaukee showed that the outcomes for youth returning from such facilities was very poor.

The Milwaukee County Executive and County Board of Supervisors was challenging the Interim Human Services Director and Administrator of Child Welfare and Delinquency Services to come up with less costly and more effective programs for these youth.

The new Wraparound Milwaukee model that emerged out of those discussions and was piloted with SAMHSA funds beginning in 1995 and was based on an innovative new philosophy and approach to treating, funding and delivering services to these youth and their families. The wraparound philosophy was different than traditional approaches in that it was family-centered versus child centered, was built on identifying and building on child and family strengths to meet needs versus focusing on deficits, emphasized coordination and collaboration across child-serving systems such as developing a single coordinated care plan, stressed developing and delivering services and supports in the community versus institutions, emphasized best fit of these services with the cultures and preferences of families, was highly individualized based on the unique needs of each child and family and promised "unconditional care" never giving up on a child and family. Those values, which the program was built on, remain the hallmark of the Wraparound Milwaukee approach today.

Structure and Financing

The financing model used by Wraparound Milwaukee since its inception in 1995/1996 and that was designed and developed with the Wisconsin Medicaid Program, relies on a special provision of the Social Security Act called 1915(a). This provision allows a State to implement a voluntary, managed care entity within a deferred geographical area (Milwaukee County and Dane County) for a defined Medicaid population (children with serious emotional and mental health needs at risk of residential treatment, psychiatric hospitalization and juvenile correctional placement). The 1915 (a) allowed Milwaukee County to create a special type of HMO model covering the provision of mental health, substance abuse and other behavioral care covered within the State Medicaid Plan. The State Medicaid program contracts with Milwaukee County to operate this special managed care entity, called Wraparound Milwaukee and provides a monthly per enrollee capitated payment up to the overall enrollment limit of 945 SED youth/families. The operation of the Care Management Entity (CME) by Milwaukee County must be approved annually by the Center for Medicare/Medicaid Services (CMS) and the capitated rates must be re-determined each year by the Department of Health (Medicaid).

Medicaid's support and approval of the CME model under the 1915(a) is based on the availability of non-Medicaid funds to pay for the services and supports these youth and families need to succeed in the community and are not covered under Medicaid. This includes the cost of foster care and group home care, the non-treatment component of residential care, services such as mentors, tutors, employment services, after school, day treatment, transportation, respite services, etc. For the payment of those services, Wraparound Milwaukee receives fixed funding from Delinquency and Court Services and case rate funding from the Bureau of Milwaukee Child Welfare, which is pooled with the Medicaid monies to create a flexible funding pool now totaling nearly $47 million.

The $27 million in Medicaid funds for 2011 includes approximately $21 million in capitated payments plus $6 million in fee-for-services billing for crisis intervention services such as the Mobile Urgent Treatment Team (MUTT). As for referral sources into Wraparound Milwaukee, currently about 46% of our enrolled youth have been referred from the Delinquency and Court system and have been court ordered into Wraparound; about 26% have been enrolled in a child

welfare referral and court order and the remaining youth/families are voluntarily enrolled in the program without any formal court order. While Wraparound Milwaukee must occasionally serve non-Medicaid eligible youth/families ordered in the program, overall an average of 96%, meet Badger Care Plus eligibility for full capitation rate.

The BHD-Wraparound Milwaukee Program is required to operate the CME model and perform all the functions that any managed care entity would be required to do, but tailored to this unique population. This includes financial oversight, care coordination, clinical oversight, operation of crisis services, partnership with a family advocate organization, operation of the Provider Network, Quality Assurance and Information Technology. Our IT and electronics health record, called *Synthesis*, is tailored to the unique CME design and population and is considered among the best in the U.S. Milwaukee County, which owns the data system, has leased and sold the application to several other cities and states.

Critical Services Components to Wraparound Milwaukee

While pooled funding is a key to the fiscal sustainability of Wraparound Milwaukee, the cornerstone of the actual delivery of services is the Care Coordinator and child and family team. The Care Coordinator facilitates the development of the child and family teams, helps the family identify their strengths, needs and also helps them form strategies to meet those needs. The Care Coordinator also arranges for needed community services, monitors the plan and coordinates implementation of care plans with the child welfare or probation worker.

Wraparound care plans must be family-driven, so Wraparound Milwaukee utilizes what is called the “child and family team” as the principal planning entity for service delivery. The function of the Child and Family Team is to develop the wraparound plans, develop crisis safety plans, identify and put into place formal and informal services to meet the needs of the child and family, monitor and review the plan on a regular basis and other activities.
Families in Wraparound Milwaukee have access to “family advocates” through a current contract with Families United of Milwaukee. Family advocates are usually family members who currently or in the past have had children with serious emotional and mental health needs enrolled in Wraparound Milwaukee. They can help families navigate the child serving system, build trust, support them through crisis and advocate for their best interests. They also operate support groups for parents, do training/orientation of new families, perform satisfaction surveys and other activities.

Provider Network

Wraparound Milwaukee provides a very comprehensive array of over 70 services to families in its Benefit Plan. Those services are delivered by over 200 community agencies (40% minority owned and operated). Providers are mostly paid through our managed fee-for-service basis with all service authorizations and claims processing done electronically through the *Synthesis* IT System.

Wraparound Milwaukee Service Array

• Care Coordination	• Crisis Home Care
• In-Home Therapy	• Treatment Foster Care
• Medication Management	• Residential Treatment
• Outpatient Individual Family Therapy	• Foster Care
• Alcohol and Substance Abuse Counseling	• Day Treatment/Alternative School
• Psychiatric Assessment	• Nursing Assessment/Management
• Psychological Evaluation	• Job Development/Placement
• Housing Assistance	• Kinship Care
• Mental Health Assessment/Evaluation	• Transportation Services
• Mentoring	• Supervision/Observation In Home
• Parent Aide	• After School Programming
• Group Home Care	• Recreation/Child Orient. Activities
• Respite Care	• Discretionary Funds/Flexible Funds
• Crisis 1:1 Stabilization	• Housekeeping/Chore Services
• Child Care for Parent	• Independent Living Support
• Tutor	• Psychiatric Inpatient
• Specialized Camps	• Emergency Food Pantry

Mobile Crisis Services

The Mobile Crisis services provided by the MUTT team and crisis stabilization services are a critical component of the Wraparound Milwaukee program. All enrolled families in Wraparound have access to the crisis team whenever such intervention is needed and also can access crisis 1:1 stabilizers to come to the home as needed. MUTT is also the gatekeeper for psychiatric inpatient hospitalization for families in Wraparound and operates alternative resources such as an 8-bed crisis group home for youth who need temporary care and supervision but do not require an inpatient hospital setting.

Outcomes for the System and Youth Served in Wraparound Milwaukee

Outcomes currently being measured for Wraparound Milwaukee include programmatic outcomes, fiscal outcomes, clinical outcomes, public safety, child permanence and consumer satisfaction with the program.

- Programmatically – from the baseline year in 1996 to today, the average daily residential treatment population has dropped from 375 youth to 80 youth, inpatient psychiatric days from 5,000 to under 500 days per year
- Fiscally – the average cost for a child/family in Wraparound is under $4,000 per month versus over $9,000 per month for a residential treatment placement, over $8,000 per month for a correctional placement or well over $10,000 for a 7-day hospital stay

- Clinically – Wraparound children function better at home, school and in the community based on administration of nationally normed measures such as the CBCL (Achenbach) used at the time of enrollment and discharge
- Public Safety – recidivism rates for delinquents are low (15.2%) for youth in the program for at least one year and even lower (6.7%) for high risk offenders including juvenile sex offenders (this is considerably under national standards)
- Child Permanence – about 80% of youth achieve permanency, i.e., return to parents, relatives, adoptive resources or subsidized guardianship upon leaving Wraparound
- Family Satisfaction – families surveyed upon completing Wraparound (average 18 months) gave the program a rating of 4.4 out of 5 points in terms of their perception of the progress their child made while in the program

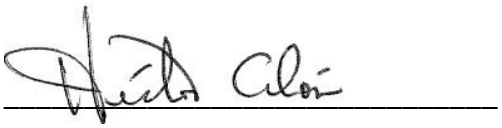
Looking Forward

Wraparound Milwaukee is beginning the third year of a new, five-year federal SAMHSA grant called Healthy Transitions to serve 16½ - 24 year old youth with serious emotional and mental health, needing help to transition successfully to adulthood. This grant incorporates transitional specialists, has developed a club house model and linkage with key community agencies such as pathfinders (homeless youth) and Lad Lake's Independent Living Program for youth aging out of foster care.

Wraparound Milwaukee is also hoping to partner with Children's Hospital and other health systems on development of the "medical home model" for children in foster care, which is an important component of health care reform and a new Medicaid initiative.

Recommendation

This is an informational report only. No action is necessary.



Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive's Office
Terrence Cooley, County Board
Patrick Farley, Director, DAS
Pam Bryant, Fiscal & Budget Administrator, DAS
CJ Pahl, Interim Assistant Fiscal & Budget Administrator, DAS
Steve Pietroske, Fiscal & Management Analyst, DAS
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: November 7, 2011

TO: Supervisor Lee Holloway, Chairman – Milwaukee County Board

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by Paula Lucey, Administrator, Behavioral Health Division

SUBJECT: **REPORT FROM THE ACTING DIRECTOR, DEPARTMENT OF HEALTH AND HUMAN SERVICES, REQUESTING AUTHORIZATION TO ENTER INTO 2012 PROFESSIONAL SERVICE CONTRACTS FOR THE BEHAVIORAL HEALTH DIVISION**

Issue

Section 56.30 of the Milwaukee County Code of General Ordinances requires County Board approval for professional service contracts of $50,000 or greater. Per Section 56.30, the Acting Director, Department of Health and Human Services (DHHS) and the Administrator, Behavioral Health Division (BHD), are requesting authorization for the BHD to enter into a variety of professional service contracts for 2011.

Background

BHD uses several professional service contracts to support various essential staff activities, including specialized IT support, pharmacy services, and medical program planning. Each of these contracts support functions that are critical to patient care and are necessary to maintain hospital, Facility for Persons with Developmental Disabilities (FDD), nursing home, crisis services licensure and paramedic services monitoring and training. A discussion of all new or renewed 2012 professional service contract recommendations follows.

Accenture, LLP

BHD contracts with Accenture, LLP for a variety of management information systems applications and technical assistance that, because of their specialized health care nature, have not been maintained, provided or supported by IMSD. The County Board approved this sole-source contract with Accenture, LLP in 1996, following the closure of Doyne Hospital and IMSD's decision to divest itself of health care systems support. Among other services, Accenture, LLP provides IT systems and support for patient registration, billing and hospital accounts receivables, HIPAA compliance and records management, clinical support systems, and developing new applications and reports as needed.

BHD is currently working on an Electronic Medical Record (EMR) project with the Department of Administrative Services and IMSD. It is anticipated that the EMR initiative will include the majority of the functions currently performed by Accenture at BHD. That project will not be fully implemented until 2013; therefore, BHD is requesting a one-year extension to the current contract with Accenture. The contract recommendation for 2012 is $700,000, which is a decrease of over $1.4 million from 2011 due to the implementation of the EMR. Accenture has always met or exceeded the DBE subcontracting commitments required by County ordinance.

Critical Management Solutions (CMS)

In order to achieve the goal of being Joint Commission accredited by 2012, DHHS contracted with Critical Management Solutions to provide consultation assistance to BHD, beginning in 2011. To date, CMS has conducted an initial assessment and developed a comprehensive Regulatory Compliance Action Plan that outlines the policies, procedures, and practices that must be revised to be fully compliant with Joint Commission and the Centers for Medicare and Medicaid requirements, along with an individualized strategy to do so. In 2012, CMS will assume the leadership role in implementing the Action Plan by developing and revising policies and procedures; developing staff educational material to support the execution of these policies and procedures; assisting BHD staff with the redesign or refinement of processes as expected by policy and procedure; and coaching staff in their performance and documentation of clinical activities to improve compliance with Joint Commission requirements.

BHD is recommending a one-year contract for Joint Commission consulting services from Critical Management Solutions, from January 1, 2012 through December 31, 2012 in a not-to-exceed amount of $80,000.

MobileX USA

MobileX USA provides radiology services, to include x-ray, holter monitoring, EKG and ultrasound services. MobileX USA had been the on-site provider of radiology services for BHD since 1999. A one-year extension of the existing contract, in the amount of $60,000, is recommended for the period January 1, 2012 through December 31, 2012. The 2012 contract amount is unchanged from the past several years. The firm has declared its intent to meet the 17% DBE goal and has been in contact with CBDP for assistance.

Dr. Laurens Young

BHD is looking to temporarily fill staff psychiatry vacancies with contract staff while recruitment efforts are ongoing. The average time to recruit a full-time psychiatrist in the current market is six to eight months, and BHD is not able to re-assign staff to cover all hours needed to sufficiently and safely fulfill all inpatient psychiatric patient care needs. Dr. Young, a fully trained senior psychiatrist, has agreed to continue to provide services on a contract basis for the Rehabilitation Center Central. This includes evaluation, diagnosis, treatment and other consultation services.

BHD is recommending a one-year contract for psychiatry services from Dr. Young, from January 1, 2012 through December 31, 2012 in a not-to-exceed amount of $140,400. As BHD is able to fill sufficient psychiatry positions, the use of this contract will be decreased or discontinued. A fund transfer may occur later in the year to cover the costs of this contract.

Medical College of Wisconsin – Affiliated Hospitals

BHD contracts with the Medical College of Wisconsin – Affiliated Hospitals (MCWAH) for residency and fellowship stipends. The residents and fellows provide medical care in the hospital and long-term care areas of BHD, with oversight and direction from BHD psychiatry staff.

BHD is recommending a contract for the term from January 1, 2012 through December 31, 2012 in the amount of $598,000. This is an increase of $48,000 over the 2011 amount, but is offset by a decrease in the contract amount for the Medical College of Wisconsin (Residency/Fellowship Program). MCWAH has identified its certified DBE subcontractors and expects to exceed the 17% DBE participation commitment for the contract in 2012.

Medical College of Wisconsin

Milwaukee County has been the coordinator and provider of Emergency Medical Services (EMS) for over 33 years. Since 1998, EMS has used the services of a Medical Director for medical management, coordination and direction for the entire 911 emergency response system for the county; development of formal patient care protocols, standards and policies for care and training; and supervision and direction for entities such as municipalities and private EMS service providers operating under the County's EMS Plan.

BHD is recommending an increase to the existing five-year contract for medical direction services from the Medical College of Wisconsin of $5,000, from $280,000 to $285,000, to cover the additional costs of providing this service, for the period January 1, 2012 through December 31, 2013.

Recommendation

It is recommended that the Milwaukee County Board of Supervisors authorize the Acting Director, DHHS, or his designee, to execute the professional service agreements for 2012 identified in this report and for the amounts enumerated in the attached resolution.

Fiscal Effect

The total amount of $1,863,400 recommended in these contracts has been budgeted in BHD's 2012 Adopted Budget. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive's Office
Terrence Cooley, County Board
Patrick Farley, Director, DAS
Pam Bryant, Fiscal & Budget Administrator, DAS
CJ Pahl, Interim Assistant Fiscal & Budget Administrator, DAS
Steve Pietroske, Fiscal & Management Analyst, DAS
Rick Ceschin, Analyst, County Board Staff
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

File No.
(Journal,)

(ITEM *) Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 professional service contracts for the Behavioral Health Division, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 56.30 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) and the Administrator, Behavioral Health Division (BHD), are requesting authorization for the BHD to enter into a variety of professional service contracts for 2012; and

WHEREAS, in the past several years, the Behavioral Health Division has entered into a series of professional service contracts to support staff activities; and

WHEREAS, these contracts are essential to the day-to-day operation of the Behavioral Health Division; and

WHEREAS, approval of these recommendations will enable the Behavioral Health Division to receive necessary specialized IT support, medical services, medical program planning and consultative services to support the activities of staff; now, therefore,

BE IT RESOLVED, that the Acting Director, Department of Health and Human Services, or his designee, is hereby authorized to enter into or renew the professional service contracts with the vendors listed and in the amounts and terms stated below:

Agency and Service	Term	Contract Amount
Accenture, LLP (IT Consulting Services)	1 year (2012)	$ 700,000 annual
Critical Management Solutions (Joint Commission Consulting Services)	1 year (2012)	$ 80,000 annual
MobileX USA (Radiology Services)	1 year (2012)	$ 60,000 annual
Dr. Laurens Young (Psychiatry Services)	1 year (2012)	$ 140,400 annual
MCW – Affiliated Hospitals (Residency Program)	1 year (2012)	$ 598,000 annual

Medical College of Wisconsin (EMS Medical Direction Services)	2 years (2012, 2013)	$ 285,000 annual
Total – 2012 Professional Services		**$ 1,863,400**

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/7/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: REPORT FROM THE ACTING DIRECTOR, DEPARTMENT OF HEALTH AND HUMAN SERVICES, REQUESTING AUTHORIZATION TO ENTER INTO 2012 PROFESSIONAL SERVICE CONTRACTS FOR THE BEHAVIORAL HEALTH DIVISION

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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		
	Revenue		
	Net Cost		
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) For many years, the Behavioral Health Division has entered into professional service contracts with other entities in order to provide services more efficiently and economically.

B) Total recommended funding for 2012 professional service contracts for BHD is $1,863,400. There would be no budgetary impact associated with execution of the recommended contracts, as sufficient funds are included in BHD's 2012 Adopted Budget.

C) The contracts establish "not to exceed" amounts derived through soliciation of bids or through negotiation with the entities involved. These funds are budgeted in Organizational Unit 6300 - Accounts 6109, 6113, 6147 and 6148.

D. No assumptions/interpretations.

[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 Maggie Mesaros, BHD

Authorized Signature _____

Did DAS-Fiscal Staff Review? Yes ☒ No

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: November 18, 2011

TO: Supervisor Lee Holloway, Chairman – Milwaukee County Board

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by Paula Lucey, Administrator, Behavioral Health Division

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, Requesting Authorization to Enter Into 2012 Purchase of Service Contracts for the Behavioral Health Division for the Provision of Adult and Child Mental Health Services and Alcohol and Other Drug Abuse (AODA) Services**

Policy Issue

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors. Per Section 46.09, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into 2012 purchase of service (POS) contracts with community agencies for the Behavioral Health Division (BHD). Approval of the recommended contract allocations will allow BHD to provide a broad range of rehabilitation and support services to adults with mental illness and/or substance abuse problems and children with serious emotional disturbances.

Discussion

Adult Community Services – Alcohol and Other Drug Abuse Services (AODA)

Total Adjusted 2011 Contract Allocation: $6,191,639
Proposed 2012 Contract Allocation: $5,638,501

Contract allocations recommended for 2012 for individual organizations are itemized below and in the attached resolution. Earlier this year, DHHS received notification from the State of Wisconsin that TANF funding would be cut by 10%, or a total of $493,900, significantly impacting the amount of funds available for voucher treatment and recovery support services in 2012. Additionally, while Access to Recovery (ATR) funding remains in tact and at the highest national award from the Substance Abuse and Mental Health Services Administration (SAMHSA) at $3,245,069 for 2012, there is a corresponding 63% increase in the number of individuals to be served in 2012 as compared to 2011. BHD continues to receive funding and provide services for three separate SAMHSA grants for just over $1 million. BHD also continues to receive a smaller prisoner re-entry grant from the State that will continue through June

2012. All told, BHD has secured more than $8 million in competitive grant awards. A portion of all of these grant funds are included in the 2012 contract allocations for Central Intake Unit (CIU) services, training and co-occurring infrastructure development. The remaining grant funds are for administrative expenses, evaluation, and direct treatment and recovery support services through the WIser Choice voucher network. It is notable, however, that BHD has to serve significantly more individuals with significantly less funding, and as such some alterations to the Purchase of Service, non-voucher based services were necessary.

BHD is obligated to spend a minimum of 5% of the TANF allocation on evaluation. In order to meet this requirement, BHD has a number of contracts in place. BHD will contract with NIATx to support Continuous Quality Improvement initiatives with our many agency vendors, supported in part through ATR funding and TANF funding as well. BHD will also contract with Vital Voices for $19,936 through TANF evaluation funds to conduct peer-operated consumer satisfaction surveys (increase is denoted in the mental health subsection) as they have throughout 2011. Finally, BHD will contract with the Bridge Health Clinics and Research Centers (The Bridge) to perform process evaluation of the TANF system; $42,400 of their contract amount is accounted for with TANF funds. This is a significant decrease from the 2011 amount allocated for TANF evaluation services due to the TANF funding cuts instituted by the State. The remainder of the contract allocation to The Bridge of $69,300 is for the provision of evaluation services for the SAMHSA Treatment for Homeless grant administrated by BHD. Included in the TANF evaluation component is collection of National Outcomes Measure (NOMS) data, responsibility for analyzing the data, supervision of data collection and recommending corrective actions based on the results of the evaluation, preparation of reports summarizing program results, and procedures to ensure privacy and confidentiality.

Genesis Behavioral Services Detoxification contract is reduced by $100,000 consistent with the 2012 Adopted Budget. The American Society of Addiction Medicine Patient Placement Criteria (ASAM PPC) is the authoritative criteria for level of care decisions amongst substance abuse providers, and all certified providers are required by the State to use approved patient placement criteria. BHD has mandated the use of ASAM PPC since 2004. In 2010, ASAM published Supplement on Pharmacotherapies for Alcohol Use Disorders, which updated patient placement criteria for detoxification. The supplement refined the admitting criteria for social detoxification to include consideration of CIWA-Ar scores in the moderate withdrawal range. BHD has been working with Genesis throughout the course of 2011 to restructure the detoxification contract to more closely align with the ASAM PPC by expanding the social detoxification component to reduce expenditures without reducing the number of individuals that can be safely and appropriately served in that setting. These efforts will continue to be maintained and enhanced throughout 2012. Social detoxification provides supportive non-pharmacologic care. Simple interventions such as reassurance, reality orientation, monitoring of signs and symptoms of withdrawal, and general nursing care are effective. In controlled trials, these interventions were sufficient to manage 85% of emergency room patients and 60% of inpatients. However, the use of social detoxification always should include provisions for

back-up medical evaluation and treatment (rescue protocols) for the introduction of pharmacologic therapies as needed.

The Central Intake Unit (CIU) services remain vital to the functioning of the WIser Choice system, as they serve as the "front door" at which individuals gain entry into the system. M&S Clinical Services continues to serve the general population. Justice 2000 will continue to serve the drug court population. Wisconsin Community Services (WCS) serves the criminal justice population. Included in the WCS purchase of service contract are funds from two grants that fund voucher services for the correctional population. The Prisoner Reentry Initiative 3 (PRI) grant will end on 6/30/12 and the SAMHSA Offender Reentry Program grant will end on 9/30/12. Because of this, and based on a weighted average calculation, the WCS contract is reduced by $49,326 to a 2012 total of $258,963 for CIU services. IMPACT will continue to serve the general population and subcontract with United Community Center for the monolingual Spanish speaking population. Because IMPACT is operating two sites, has demonstrated financial need and has a funding disparity with the most comparable CIU, a funding increase of $30,000 has been added to their CIU contract for a total of $509,412 in 2012.

BHD recommends continuation of the St. Charles contract to provide additional training coordination that is required under the TANF, ATR and other SAMHSA grants and offset by those grants. The contract amount has been reduced by $70,214, to a total for 2012 of $403,126. This decrease is attributed to significantly fewer funds required for a specialized training that was necessary in 2011 to add Recovery Check Up services and decreased funds required for workforce development and training. This change will not impact core services and represents the elimination of some one-time funding allocated to this agency in 2011.

Faith Partnership Network operates a provider resource center for the WIser Choice system. Although the ATR 3 funding remains in place, BHD received a 21% decrease in funds from the ATR 2 grant to the ATR 3 grant. As such, BHD recommends that the Faith Partnership Network be decreased by 15%, bringing their 2012 allocation to $68,000.

The State of Wisconsin has put their Intravenous Drug Program out for competitive bid in 2011 and results of this are not yet announced. The RFP was divided into two categories; one for prevention and outreach and the other for treatment services. BHD did not competitively apply for the prevention and outreach funds, affording the previous contract awardee of BHD, AIDS Resource Center of Wisconsin (ARCW) the opportunity to apply competitively on their own. As such, the $263,957 contract amount previously awarded to ARCW as a pass-through from the State is not included in the 2012 contract amounts.

The State of Wisconsin also put out for bid "Family Centered Treatment Services for Cocaine & Other Substance Use" funding. Meta House, who has historically received this funding but had $68,800 of pass-through funds from BHD for childcare, is competitively applying for the funds whereas BHD is not. As such, the pass-through funds are not included in the 2012 allocations.

The AODA contract allocations by agency are as follows:

Agency	Adjusted 2011 Contract	Proposed 2012 Contract
AIDS Resource Center	$263,957	$0
Bridge Health Clinics/Research	$130,341	$111,500
Faith Partnership Network	$80,000	$68,000
JFS - Fighting Back	$753,220	$753,220
Genesis Behavioral Services	$2,872,145	$2,772,145
Guest House	$130,913	$130,913
IMPACT	$479,412	$509,412
Justice 2000	$45,000	$45,000
M&S Clinical Services	$547,700	$547,700
Meta House	$68,800	$0
NIATx	$38,522	$38,522
St. Charles Youth & Family Serv	$473,340	$403,126
Wisconsin Community Services	$308,289	$258,963
Total AODA POS Contracts	**$6,191,639**	**$5,638,501**

Adult Community Services - Mental Health (MH)

Total 2011 Adjusted Contract Allocation: $10,514,725
Proposed 2012 Contract Allocation: $10,511,123

Contract allocations recommended for 2012 for individual organizations are itemized below and in the attached resolution. Plans are underway to ensure that 2012 will be a transition year for BHD to convert more purchase of service contracts to fee for service. The federal Substance Abuse and Mental Health Services Administration (SAMHSA) provides Wisconsin with $26 million and $7 million in block grants for substance abuse and mental health services respectively. The two block grants ensure a base for community services and foster system transformation. There are reporting requirements under the federal block grant programs and the HSRS mental health and AODA modules contain required data that is reported to SAMHSA. HSRS is a 27 year-old legacy mainframe system using old programming code. The current HSRS can be cumbersome and expensive to change while newer technology promises to be less expensive and more flexible. At the same time, the federal government is encouraging states to develop systems that collect claim-like, encounter-level data. Upgrading outdated HSRS components and permitting encounter-level data is now necessary, and in fact the end of a two-year phase-in period by the State to comply with these changes will arrive in 2012. Fee for service agreements support the collection of encounter level detail that will be required under block grant reporting. In 2010, BHD converted mental health group homes from purchase of service to fee for service. The same number of people continues to

be served through fee for service as were served under purchase of service for mental health group home services and it provides more consumer-driven choice.

BHD is preparing to convert the Outpatient Mental Health contracts to fee for service by the beginning of the third quarter of 2012. Throughout 2011, BHD has been developing the infrastructure and provider network identified in the 2011 Budget for additional outpatient capacity to purchase psychotherapy services for trauma counseling. This will afford BHD the opportunity to revise the structure of the Crisis Walk-In Clinic, enhance services for individuals presenting in need, enhance choices available to consumers in need of outpatient services, and further efforts to integrate the mental health and substance abuse systems. As the program is currently being piloted, there are plans to expand these efforts further in 2012. Additionally, plans are underway to convert all Targeted Case Management and Community Support Program contracts to fee for service within the next two years.

In 2012, the proposed recommended contract allocation for the Medical College of Wisconsin (MCW) is $1,038,443. This represents a slight decrease in the contract based on the MCW desk review and discussions with the vendor.

The contract recommendation for Our Space is a $30,000 increase for a total contract award of $348,162 in 2012. This increase will afford BHD the opportunity to appropriately recognize the contributions of Peer Support staff who have participated in leadership opportunities within the Mental Health Redesign initiative, and also to expand Peer Support Services through the BHD system as part of the Community Investment initiative included in the 2012 Budget.

In 2012, the BHD-operated Targeted Case Management (TCM) program will be outsourced. As indicated in the 2012 Budget, there will be no lay-offs as a result of this initiative and staff will be reassigned elsewhere in the Division. BHD Administration is working on putting together a plan including determining what community agencies will expand their caseloads. BHD plans to bring back a report in January with additional TCM contracts and hopes to have the caseloads moved to the community by March 2012.

Also included in the 2012 Budget is a $3 million community investment. BHD is starting to work on plans to implement the new initiatives and also working with the Mental Health Redesign Committee to put forward some additional recommendations for community expansion. At this point, BHD is not ready to allocate contract dollars for these items, with the exception of the expanded peer support contract mentioned above. BHD will return to the Board in a future cycle with additional contracts related to this investment.

Recommendations presented herein are all intended to preserve current clinical treatment capacity as delineated in the 2012 Budget.

Agency	Adjusted 2011 Contract	Proposed 2012 Contract
Alternatives to Psychological Consult	$338,223	$338,223
ARO Behavioral Health	$224,112	$224,112*
Bell Therapy	$1,564,690	$1,564,690
Community Advocates	$180,589	$180,589
Grand Avenue Club	$135,000	$135,000
HealthCare for the Homeless	$1,443,338	$1,443,338
Medical College of Wisconsin	$1,072,045	$1,038,443
Mental Health America	$272,300	$272,300
Milwaukee Mental Health Associates	$603,506	$603,506
NAMI	$30,000	$30,000
Our Space	$318,162	$348,162
Project Access	$601,855	$601,855
Transitional Living Services	$1,922,378	$1,922,378
Vital Voices	$130,961	$130,961
Wisconsin Community Services	$1,677,566	$1,677,566
Total MH POS Contracts	**$10,514,725**	**$10,511,123**

*ARO Behavioral Health absorbed the contract and services previously provided by Social Rehab & Residential Resources in 2011.

Child and Adolescent Community Services

Total 2011 Contract Allocations: $12,223,952
Proposed 2012 Contract Allocations: $12,266,723

Overview
Overall contract allocations for 2012 in BHD's Child and Adolescent Community Services Branch will increase $42,771 from 2011. BHD will again contract with a number of community agencies for care coordination and other services that support the operation of the Wraparound Milwaukee Program, REACH (Reaching, Engaging and Assisting Children), FISS (Family Intervention and Support Services), Healthy Transitions Initiative and MUTT (Mobile Urgent Treatment Team). As a special managed care program under Medicaid, all remaining services are purchased on a fee-for-service basis through the Wraparound Milwaukee Provider Network. Individual Purchase of Service contract allocations being recommended are enumerated in the resolution.

Care Coordination Services
In 2012, BHD desires to purchase regular care coordination services for court-ordered youth from Child Welfare and Juvenile Justice in the Wraparound Milwaukee program from eight agencies recently selected through the 2012 Request for Proposals (RFP) process. Similarly, BHD

will purchase care coordination services for voluntary, non-court involved youth in the REACH program from three agencies selected through the same RFP process.

Care Coordination agencies facilitate the Wraparound care planning teams, help develop the individual treatment plans and arrange, provide and monitor services for children with serious emotional and mental health needs and their families. Screening and assessment services are also provided by three of these recommended agencies.

The total number of slots budgeted in 2012 for the Wraparound and REACH programs is for an average daily enrollment of 956 youth/families with an estimated total of 1,400 families served during the entire year in those two programs.

The eight agencies providing care coordination services, transitional care coordination in the Healthy Transitions Program and screening and assessment for Wraparound and REACH are:

Care Coordination Agency	**Service Type**	**2012 Proposed Contract**
Alternatives in Psychological Consultation	Regular Care Coordination	$ 812,490
My Home, Your Home	Regular Care Coordination	$ 812,490
Aurora Family Service	Regular Care Coordination	$ 812,490
Willowglen Community Care	Regular Care Coordination Screening/Assessment	$ 812,490 $ 140,000 $ 952,490
AJA Counseling Center	Regular Care Coordination REACH	$ 812,490 $ 569,400 $ 1,381,890
La Causa, Inc.	Regular Care Coordination REACH Screening/Assessment – Safe Schools	$ 1,044,630 $ 604,987 $ 290,000 $1,939,617
St. Aemilian-Lakeside	Regular Care Coordination REACH	$ 909,215 $ 604,987 $ 1,514,202
St. Charles Youth and Family	Regular Care Coordination	$ 812,490

Services	Screening/Assessment	$ 160,000
	Transitional Specialist	$ 283,828
		$ 1,256,318
Care Coordination Total:		**$ 9,481,987**

Services Supporting Wraparound Milwaukee
For 2012, BHD recommends continuing an agreement initiated with the Department of Health Services (DHS) to have the Wisconsin Council on Children and Families provide or arrange for program evaluation, staff training and management information and technical support necessary to maintain our Medicaid Capitation contract with DHS.

BHD also proposes to contract again with Families United of Milwaukee for advocacy and support for families served by Wraparound Milwaukee. Families United was the top ranked agency in the RFP process for 2012. This minority owned and operated agency continues to represent and advocate for families of youth with serious mental and behavioral needs. It also provides educational advocacy to help our youth obtain an Individual Education Plan (IEP), achieve appropriate school placements and reduce unnecessary residential and day treatment services.

Fiscal intermediary services support the purchase of services from relative caregivers for youth, and BHD recommends that this contract be continued in 2012.

Support Services for Wraparound	**Service Type**	**2012 Proposed Contract**
Wisconsin Council on Children and Families	Program Evaluation, Training Technical Assistance and IT Support	$ 607,719
Families United of Milwaukee	Family and Educational Advocacy	$ 450,000
Milwaukee Center for Independence	Fiscal Intermediary	$ 25,000
Support Services for Wraparound Total:		**$ 1,082,719**

Mobile Urgent Treatment Services
For 2012, Wraparound Milwaukee will again operate 24/7 mental health crisis intervention services for all Milwaukee County families. The Mobile Urgent Treatment Team (MUTT) will serve an estimated 1,500 families in 2012. Additionally, the Bureau of Milwaukee Child Welfare will again fund a dedicated MUTT team for foster families (MUTT-FF). The MUTT-FF team has been effective at reducing the incidence of failed foster placements through the provision of 24/7 crisis intervention services to foster parents who are experiencing a mental health or behavioral crisis with a child in their care.

The MUTT-MPS dedicated crisis team was disbanded in June 2011 due to the State reduction in funds available to the Milwaukee Public School system.

To support BHD's professional team of psychologists and psychiatric social workers assigned to the MUTT program, St. Charles Youth and Family Services will provide up to ten crisis support workers for MUTT to ensure 24 hour, seven day per week coverage. St. Charles was the only agency to submit a bid to provide these services for the Milwaukee County MUTT program for 2012.

Additionally, St. Charles is providing some Psychiatrist coverage for the medication clinics and was chosen through the recent RFP process to provide eight crisis group home beds at Haven House for boys placed through the MUTT team and Wraparound Program.

Agency Providing Support Services	**Service Type**	**2012 Proposed Contract**
St. Charles Youth and Family Services	Crisis Group Home (Haven House)	$ 456,000
	Psychiatry Services for Medication Clinics	$174,720
	Mobile Crisis Services for Community and Foster Care System	$ 746,297
MUTT Support Services Total:		**$ 1,377,017**

Family Intervention and Support Services (FISS)
For 2012, the Wisconsin Department of Children and Family Services will continue to contract with BHD to provide an array of case management and mental health services to an average of 60 families in the Family Intervention and Support Services Program (FISS). This program targets adolescents who are experiencing parent-child conflicts manifesting in school truancy, chronic running away from home and other issues of uncontrollability. FISS is a voluntary, early intervention alternative for parents who can receive a range of mental health and support services as an alternative to filing a formal CHIPS petition. FISS is fully funded by the Bureau of Milwaukee Child Welfare.

St. Charles Youth and Family Services, who received the highest score during the last RFP process is recommended to provide FISS services in 2012.

Agency Providing Support Services	**Service Type**	**2012 Proposed Contract**
St. Charles Youth and Family	Early Intervention	$ 325,000

Services	(CHIPS Diversion)	
FISS Support Services Total:		**$ 325,000**

Summary
The following are the total contract recommendations for BHD's Child and Adolescent Community Services Branch for 2012 as compared to 2011.

Agency Providing Support Services	**Adjusted 2011 Contract**	**2012 Proposed Contract**
AJA Counseling Center	$ 1,213,260	$ 1,381,890
Alternatives in Psychological Consultation	$ 1,074,560	$ 812,490
Aurora Family Service	$ 379,600	$ 812,490
Families United of Milwaukee	$ 440,990	$ 450,000
La Causa, Inc.	$ 1,948,599	$ 1,939,617
Milwaukee Center for Independence	$ 25,000	$ 25,000
My Home, Your Home	$ 797,160	$ 812,490
St. Aemilian-Lakeside	$ 1,573,150	$ 1,514,202
St. Charles Youth and Family Service	$ 3,289,154	$ 2,958,335
Willowglen Community Care	$ 862,160	$ 952,490
Wisconsin Council on Children and Families	$ 620,319	$ 607,719
Total 2012 Proposed POS Contracts:		**$12,266,723**

Recommendation

It is recommended that the County Board of Supervisors authorize the Acting Director, DHHS, or his designee, to enter into 2012 purchase-of-service contracts for mental health, AODA, and child and adolescent treatment services with provider agencies for the time period of January 1 through December 31, 2012 (except as otherwise noted) with the contractors listed and in the amounts specified in the attached resolution. Approval of the recommended contract allocations will allow for the provision of identified high priority community-based services for children and adults having serious and persistent mental illness, substance abuse problems, or other emotional needs.

Fiscal Effect

The amounts recommended in these contracts have been included in BHD's 2012 Budget. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive's Office
Terrence Cooley, County Board
Patrick Farley, Director, DAS
Pam Bryant, Interim Fiscal & Budget Administrator, DAS
CJ Pahl, Assistant Fiscal & Budget Administrator, DAS
Steve Pietroske, Fiscal & Management Analyst, DAS
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

File No.
(Journal,)

(ITEM *) Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 purchase of service contracts for the Behavioral Health Division for the provision of adult and children mental health services and alcohol and other drug abuse (AODA) services, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 46.09 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into 2012 purchase of service contracts with community agencies for the Behavioral Health Division (BHD); and

WHEREAS, approval of the recommended contract allocations will allow BHD to provide a broad range of rehabilitation and support services to adults with mental illness and/or substance abuse problems and children with serious emotional disturbances; and

WHEREAS, approval of the recommended contract allocations will allow for the provision of identified high priority community-based services for children and adults having serious and persistent mental illness, substance abuse problems, or other emotional needs; and

WHEREAS, the amounts recommended in these contracts have been included in BHD's 2012 Budget; now, therefore,

BE IT RESOLVED, that the Acting Director of the Department of Health and Human Services, or his designee, is authorized to enter into 2012 purchase-of-service contracts with the following provider agencies for the time period of January 1 through December 31, 2012 (unless otherwise specified), in the amounts specified below

Adult Agencies - Mental Health	**Service**	**2012 Contract**
Alternatives in Psychological Consultation	Targeted Case Management	$ 338,223
ARO Behavioral Health	Targeted Case Management	$224,112
Bell Therapy	Community Support Program Crisis Respite	$1,564,690
Community Advocates	Community Living Support	$ 180,589
Grand Avenue Club	Community Living Support Services	$ 135,000

Health Care for the Homeless	Community Support Targeted Case Management Community Treatment-Outpatient	$ 1,443,338
Medical College of Wisconsin	Community Treatment-Outpatient	$ 1,038,443
Mental Health America	Service Access/Prevention Crisis Grant Initiative	$ 272,300
Milwaukee Mental Health Services	Community Support Targeted Case Management	$ 603,506
National Alliance for Mental Illness	Service Access/Prevention	$ 30,000
Our Space	Community Living Support Services Peer Specialists	$ 348,162
Project Access	Community Support Targeted Case Management	$ 601,855
Transitional Living Services	Community Residential Targeted Case Management Community Support Program Community Living Support Services Crisis Respite Service Access/Prevention	$ 1,922,378
Vital Voices	Service Access and Prevention	$ 130,961
Wisconsin Community Services	Community Support Targeted Case Management	$ 1,677,566
TOTAL Allocation – Adult Mental Health Services		**$10,511,123**

Adult Agencies – Alcohol and Other Drug Abuse	**Service**	**2012 Contract**
Bridge Health Clinics/Research	Process Evaluation	$ 111,500
Faith Partnership Network	Service Access and Prevention	$ 68,000
Fighting Back	Prevention	$ 753,220
Genesis Behavioral Services	Detoxification	$ 2,772,145

Guest House of Milw.	Case Mgmt.-Shelter+ Care	$ 130,913
IMPACT	CIU - Service Access	$ 509,412
Justice 2000	CIU - Service Access	$ 45,000
M&S Clinical Services	CIU - Service Access	$ 547,700
NIATx		$ 38,522
St. Charles Youth and Family Services	Community Living Support Services TANF Training	$ 403,126
WCS	CIU – Service Access	$258,963
TOTAL – Adult Alcohol & Other Drug Abuse Services		**$ 5,638,501**

Child and Adolescent

Agencies	**Service**	**2012 Contract**
AJA Counseling	Care Coordination	$ 1,381,890
Alternatives In Psychological Consultation	Care Coordination	$ 812,490
Aurora Family Service	Care Coordination	$ 812,490
Families United of Milwaukee	Family and Educational Advocacy, Support and Training	$ 450,000
La Causa, Inc.	Care Coordination Assessment	$ 1,939,617
Milwaukee Center For Independence	Fiscal Intermediary	$ 25,000
My Home/Youth Home	Care Coordination	$ 812,490
St. Aemilian-Lakeside	Care Coordination	$ 1,514,202
St. Charles Youth and Family Services	Care Coordination FISS Services Psychiatry Services for Medication Clinics Mobile Crisis Case Management for Foster Care Crisis Group Home	$ 2,958,335

	Assessment	
Willowglen Community Care Center	Care Coordination Assessment	$ 952,490
Wisconsin Council on Children & Families	Program Evaluation Training/Technical Assistance, Information Technology and Program Support Services	$ 607,719
TOTAL – Child & Adolescent		**$ 12,266,723**
	TOTAL – BHD	**$28,416,347**

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/18/2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, Requesting Authorization to Enter Into 2012 Purchase of Service Contracts for the Behavioral Health Division for the Provision of Adult and Child Mental Health Services and Alcohol and Other Drug Abuse (AODA) Services

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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		
	Revenue		
	Net Cost		
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) Milwaukee County Ordinance 46.09 requires County Board approval of Purchase of Service contracts to provide services under Sec. 51.42/437 Wis. Stats. Approval of the recommended contract allocations will allow the Behavioral Health Division of the Department of Health and Human Services to provide a broad range of rehabilitation and support services to adults with mental illness and/or substance abuse problems and children with serious emotional disturbances in this community.

B) The total funding recommended for 2012 Purchase of Service contracts is $28,416,347. Sufficient revenue and tax levy appropriations are included in the 2012 Behavioral Health Division budget to pay for the contracts recommended by the Division.

C) These funds are budgeted in BHD Org. 6300, in the BHD Community Services Orgs. 6402, 6423, 6424, 6425, 6426, and Wraparound Services Org. 6474, account series #8100.

D. No assumptions/interpretations.

[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 Alexandra Kotze, DHHS Budget Manager

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

By Supervisor Broderick

Journal,
File No. 11-

A RESOLUTION

Authorizing the Chief Judge of Milwaukee County to collaborate with the University of Wisconsin – Milwaukee to develop Shakespeare in the Courts as a pilot alternative to incarceration option for sentencing of juvenile offenders.

WHEREAS, the city of Pittsfield, MA implemented a Shakespeare in the Courts program in 2001 where youth offenders aged 13-17 are sentenced en lieu of incarceration or other programming for offenses such as assault, battery, breaking and entering, truancy and chronic school offenses; and

WHEREAS, in the Pittsfield, MA program adjudicated juvenile offenders work with Shakespeare & Company artists and participate in classes, rehearsals, and performances of scenes from Shakespeare's plays; and

WHEREAS, because of the structural, yet collegial environment of theater productions, participating youth learn to break down social barriers, increase their self-esteem and confidence, learn to meet individual and team responsibilities, and work collaboratively with diverse groups toward a positive outcome; and

WHEREAS, the Theatre Department at the Peck School of the Arts at the University of Wisconsin – Milwaukee, as the recipient of the assets of the dissolved Milwaukee Shakespeare Company, is uniquely positioned to implement Shakespeare productions; and

WHEREAS, the Milwaukee County Delinquency and Court Services Division of the Department of Health and Human Services (DCSD) is charged $284 per day - $103,660 annualized – by the State for each youth sentenced to incarceration at Wisconsin’s secure juvenile detention center; and

WHEREAS, Shakespeare in the Courts would be an additional option for judges at the Vel Phillips Juvenile Justice Center to complement existing programs and services designed to help youth offenders rehabilitate rather than being incarcerated; and

WHEREAS, due to unavoidable delays in implementing Universal Screening until late in 2011, some of the funding allocated for that pilot project is available for reallocation prior to year end to help launch the Shakespeare in the Courts program, with the understanding that the Chief Judge and/or DCSD will pursue grant funding ; now, therefore,

BE IT RESOLVED, that the Chief Judge of Milwaukee County is authorized to collaborate with the Theatre Program at the Peck School of the

Arts at the University of Wisconsin-Milwaukee to develop a Shakespeare in the Courts pilot program as a sentencing alternative for youth offenders; and

BE IT FURTHER RESOLVED, that the Chief Judge is authorized to encumber up to $65,000 of the unexpended 2011 allocation for Universal Screening for the pilot program; and

BE IT FURTHER RESOLVED that the Chief Judge and the Director, Department of Health and Human Services are authorized to apply for grants for the future underwriting of Shakespeare in the Courts programming.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 17, 2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: A RESOLUTION
Authorizing the Chief Judge of Milwaukee County to collaborate with the University of Wisconsin – Milwaukee to develop Shakespeare in the Courts as a pilot alternative to incarceration option for sentencing of juvenile offenders.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

Adoption of this resolution will re-allocate up to $65,000 of the $250,000 of 2011 property tax levy funding allocated for universal screening to a new pilot program called Shakespeare in the Courts. Courts staff has indicated that, due to unexpected and unavoidable delays in implementing universal screening in 2011, the full 2011 allocation for universal screening will not be expended prior to the end of the year. Following the recommended reallocation, staff expects to have sufficient funding remaining for 2011 universal screening activities. If the resolution is not adopted, the balance of the unexpended funds will lapse to the bottom-line and will be used to reduce the overall 2011 deficit in the Combined Court Related Operations.

This resolution will not increase 2011 or 2012 property tax levy.

Department/Prepared By County Board/Ceschin

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.

By Supervisor Romo West

File No. 11-

(ITEM) A resolution supporting the use of Sexual Assault Nurse Examiners in Milwaukee County hospitals

A RESOLUTION

WHEREAS, according to the International Association of Forensic Nurses, Sexual Assault Nurse Examiners (SANEs) are registered nurses who have completed specialized education and clinical preparation in the medical forensic care of patients who have experienced sexual assault or abuse; and

WHEREAS, SANEs are experts in history taking, physical/emotional assessment, collection and management of forensic evidence, as well as the recognition and documentation of trauma response and injury; and

WHEREAS, in many cases, SANEs provide emotional and social support during the medical forensic examination, and testimony which may be required in the judicial system; and

WHEREAS, according to a recent petition circulated on the website change.org, only two hospitals (Aurora Mount Sinai and Aurora West Allis) currently staff round-the-clock SANEs, while Children's Hospital staffs SANE personnel, but not overnight; and

WHEREAS, nationally 60 percent of sexual assault victims do not report their assault; and

WHEREAS, seeking medical treatment following a sexual assault is traumatic and patients should have access to the highly specialized care SANEs provide no matter which hospital they go to in Milwaukee County; and

WHEREAS, better communication, increased training opportunities for personnel interested in this specialty, and the coordination of service between hospitals in Milwaukee County could go a long way to ensure victims are able to access the important services offered by SANEs without having to transport themselves to another facility; and

WHEREAS, the Medical Society of Milwaukee County is an organization of physicians that provides leadership and advocacy in response to the needs of its members and the community by collaboration with others to improve the overall health status of the community; and

WHEREAS, one of the areas of focus for the Medical Society is to *serve as a neutral convener to focus physician and health system attention on issues of patient*

safety and community health and support interventions and measures of improvement; and

WHEREAS, the Medical Society's Emergency Medical Services Committee is advisory to area hospitals and physicians concerned with emergency patient care*;* now, therefore,

BE IT RESOLVED, that the Milwaukee County Board of Supervisors supports the use of Sexual Assault Nurse Examiners and encourages the fostering of partnerships between hospitals in Milwaukee County, including, but not limited to, training and service coordination, to ensure victims of sexual assault receive the best care and support possible; and

BE IT FURTHER RESOLVED, that the Milwaukee County Board of Supervisors encourages the Medical Society of Milwaukee County, through its Emergency Medical Services Committee, to consider incorporating the coordination of SANE services among hospitals in Milwaukee County into its community advocacy platform; and

BE IT FURTHER RESOLVED, that the Milwaukee County Clerk shall forward a copy of this resolution to the Medical Society of Milwaukee County.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/29/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: A resolution supporting the use of Sexual Assault Nurse Examiners in Milwaukee County hospitals.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

- ☒ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

- ☐ Absorbed Within Agency's Budget
- ☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	0	0
	Revenue	0	0
	Net Cost	0	0

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.

<u>There is no fiscal impact associated with this resolution other than existing staff time required to forward this resolution to the Medical Society of Milwaukee County.</u>

Department/Prepared By <u>Jennifer Collins, County Board</u>

Authorized Signature Jennifer Collins

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.

Date: October 24, 2011

To: Chairperson Lee Holloway, Milwaukee County Board of Supervisors

From: Jeffery A. Kremers, Chief Judge First Judicial District
John Barrett, Clerk of Circuit Court
Prepared by: Liz Finn Gorski, Judicial Review Coordinator (Children's Division)

RE: Milwaukee County Family Drug Treatment Court (FDTC) Coordinator and Evaluator Contracts

Request

The Chief Judge and the Clerk of Circuit Court received authorization to accept a three-year grant from the U.S Department of Justice (DOJ), Office of Justice Programs (OJP), Office of Juvenile Justice and Delinquency Prevention (OJJDP), in the amount of $650,000 to implement the Milwaukee County Family Drug Treatment Court in October of 2011. In order to implement the FDTC the Chief Judge and the Clerk of Circuit Court are requesting authorization to enter into a Professional Service Contract with the Planning Council for Health and Human Services, Inc. as the evaluator of the FDTC and Rebecca Foley as the FDTC Coordinator for a period of January 1, 2012 through August 30, 2014. The FDTC Coordinator is also being contract for an additional $2,440 per year to purchase incentives for the participants in the FDTC.

Background

On May 5, 2011 the U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention released a Family Drug Court Programs grant with a deadline of June 20, 2011. On Friday, September 2, 2011, Milwaukee County received notice from OJJDP (Award Number, 2011-DC-BX-0001) awarding Milwaukee County a $650,000 three year grant for the period of October 1, 2011 through August 30, 2014 to support the Milwaukee County Family Drug treatment Court. In October of 2011 the County Board approved receipt of the three year grant.

On October 1 - 2, 2011 and October 5, 2011 the FDTC published a Professional Service Request for Proposal in the Milwaukee Journal Sentinel for the FDTC Coordinator at an annual cost of $65,000 and the Evaluation of the FDTC at an annual cost of $41,224. The Clerk of Circuit Court received four applications for the FDTC Coordinator and one application for the FDTC Evaluator. In addition, the DBE required a 10% participation for the evaluator contract.

A review panel consisting of two members from the AODA community, a representative from the Milwaukee County Behavior Health, a representative from the District Attorney's Office and a representative from the Bureau of Milwaukee Child Welfare

reviewed the applications and recommended the Planning Council for Health and Human Services, Inc. as the FDTC evaluator and Rebecca Foley as the FDTC Coordinator.

Fiscal Impact

Milwaukee County Clerk of Circuit Courts has been awarded a grant #2011-DC-BX-0001 from the State Office of Justice Assistance for $650,000 for Family drug treatment court, for the period of October 1, 2011 through August 30, 2014. Funding is split over three years, with a fund transfer request of $216,000 in 2011. The grant was approved by the Health and Human Needs and Finance Committee and the Finance Committee. The FDTC Coordinator contract costs $67,440 annually and the Evaluator contract costs $41,224.

Sincerely,

Jeffery A. Kremers	John Barrett
Chief Judge First Judicial District	Clerk of Circuit Courts

File No.

(ITEM 11-) From the Chief Judge and the Clerk of Circuit Court, requesting authorization to enter into a Professional Service Contract with the Planning Council for Health and Human Services, Inc. as the evaluator of the FDTC and Rebecca Foley as the FDTC Coordinator for a period of January 1, 2012 through August 30, 2014. The FDTC Coordinator is also being contract for an additional $2,440 per year to purchase incentives for the participants in the FDTC:

A RESOLUTION

WHEREAS, On May 5, 2011 the U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention released a Family Drug Court Programs grant with a deadline of June 20, 2011. On Friday, September 2, 2011, Milwaukee County received notice from OJJDP (Award Number, 2011-DC-BX-0001) awarding Milwaukee County a $650,000 three year grant for the period of October 1, 2011 through August 30, 2014 to support the Milwaukee County Family Drug treatment Court; and,

WHEREAS, In October of 2011 the County Board approved receipt of the three year grant; and,

WHEREAS, On October 1 - 2, 2011 and October 5, 2011 the FDTC published a Professional Service Request for Proposal in the Milwaukee Journal Sentinel for the FDTC Coordinator at an annual cost of $65,000 and the Evaluation of the FDTC at an annual cost of $41,224; and,

WHEREAS, A review panel consisting of two members from the AODA community, a representative from the Milwaukee County Behavior Health, a representative from the District Attorney's Office and a representative from the Bureau of Milwaukee Child Welfare reviewed the applications and recommended the Planning Council for Health and Human Services, Inc. as the FDTC evaluator and Rebecca Foley as the FDTC Coordinator; now therefore,

BE IT RESOLVED, that the County Board of Supervisors hereby authorizes the Chief Judge and the Clerk of Circuit Court to enter into a contract with the Planning Council for Health and Human Services, Inc. as the FDTC evaluator and Rebecca Foley as the FDTC Coordinator.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/18/2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Execution of Contracts for the FDTC Coordinator and Evaluator

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☒ Increase Operating Expenditures
(If checked, check one of two boxes below)

☒ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☒ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	14,234	108,664
	Revenue	14,234	108,664
	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.

Milwaukee County Clerk of Circuit Courts has been awarded a grant #2011-DC-BX-0001 from the State Office of Justice Assistance for $650,000 for Family drug treatment court, for the period of October 1, 2011 through August 30, 2014. Funding is split over three years, with a fund transfer request of $216,000 in 2011. The grant was approved by the Health and Human Needs and the Finance Committee. The FDTC Coordinator contract costs $67,440 annually and the Evaluator contract costs $41,224 for a total annual cost of $108,664.

Department/Prepared By Elizabeth Finn-Gorski

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: November 21, 2011

To: Supervisor Peggy Romo West, Chair, Committee on Health and Human Needs
Supervisor Johnny Thomas, Chair, Committee of Finance and Audit
Supervisor Michael Mayo, Chair, Committee on Transportation, Public Works and Transit

From: Maria Ledger, Director, Department of Family Care
Don Natzke, Director, Office for Persons with Disabilities

Subject: Informational Report on New Freedom Grant Application for An Accessible Shared Car Initiative

The Department of Family Care (DFC) and Office for Persons with Disabilities (OPD), with the technical assistance of the Department of Transportation and Public Works (DTPW), seeks $97,500 in 2012 New Freedom Grant funding for an accessible shared car program as outlined below. The program will be implemented and managed by the DFC and the OPD with quarterly reports provided to the Wisconsin Department of Transportation (DOT), as required. The project requires 50% match funding (cash) from Milwaukee County, which Family Care has available in 2011 funding.
DFC and OPD were first notified of the availability of 2012 funding the week of Oct. 31. Due to the application return date of November 22, we were unable to provide advanced Committee notification prior to the DOT application return date. As designed, the initiative provides cost-effective alternatives for Milwaukee County citizens with disabilities and sponsoring agencies charged with supporting the independence of people with disabilities.

Project Description:

Milwaukee County requests an allocation of $97,500 in 2012 New Freedom funding from DOT for an accessible shared car program. With a 50% Milwaukee County match, $195,000 allocation in addition to (non-match eligible) in-kind staff contributions will be devoted to this program.

To be operated under the auspices of DFC and OPD, 3 vehicles, 2 of which will be accessible to passengers using wheelchairs, will be available for short-term rental to people served by Milwaukee County Department of Family Care as well as members of the general public. The target market will be individuals and families requiring use of accessible vehicles due to frail health, disability, and when such vehicles promote cost-effective community independence.

Following an RFP process, a shared vehicle vendor, that meets the qualifications and requirements as set forth in the RFP, would be selected to implement the program. They

would be required to maintain vehicles in good operation, screen drivers, coordinate the access and use of the vehicles, provide for emergency services, and create contingency relationships to complete necessary transportation in the event of vehicle breakdown or accident. Funding for replacement of vehicles will be incorporated into hourly and daily fee structures.

The program would be operationalized with the selected vendor engaging interested parties and the sponsoring organization in the following manner:

- $195,000 (50% Milwaukee County and 50% New Freedom Grant) to provide "seed" money for the program start-up, with the expectation that the program will become self-sustaining. Milwaukee County will not provide additional funding beyond the initial $195,000 investment.
- Pre-qualified drivers with favorable driving histories will be authorized to reserve vehicles that will be placed at convenient host locations.
- Operators will reserve vehicles either online or phone reservation services.
- DFC, as the sponsoring organization, would receive monthly reports.
- Hourly or daily fees will be assessed to the operator, their passenger, or sponsoring third party payer.
- It is estimated that an hourly charge of $10.00 will cover operating costs including: insurance, gasoline, maintenance, and vehicle replacement.
- DFC and OPD will assist in determining placement of the vehicles and may reserve blocks of time to meet specific service needs.

It is anticipated that the accessible shared vehicles will provide a number of enhancements to meet the mobility needs of people in frail health or those with disabilities. These would include: trips outside of Milwaukee County not currently supported by existing para-transit, transportation for people not currently eligible for transportation programs, options for individuals with short-term needs, individuals whose primary accessible vehicle requires repair, or individuals whose needs may exceed those provided by other public transportation.

For several years, shared car programs have been successfully implemented by the University of Wisconsin Milwaukee and Madison campuses. DFC and OPD are collecting information from these and other sponsoring organizations and potential vendors in preparation for a formal RFP process. DFC and OPD will draw upon the knowledge and experience of TPW and Milwaukee County Transit System (MCTS) to assure that all requirements of DOT, the Federal Transit Adminsitration (FTA) and Milwaukee County are met.

Maria Ledger, Director
Milwaukee County Department of Family Care

Don Natzke, Director
Milwaukee County Office for
Persons with Disabilities

cc: County Executive Chris Abele
Tia Torhorst
Chairman Lee Holloway
Pam Bryant
Steve Pietroske
Jodi Mapp
Steven Cady
Jennifer Collins
Martin Weddle
Jim Hodson
Eva Williams
Steve Nigh
Brian Dranzik

COUNTY OF MILWAUKEE
INTEROFFICE COMMUNICATION

DATE: November 22, 2011

TO: Supervisor Peggy Romo-West, Chair, Committee on Health and Human Needs
Supervisor Johnny L. Thomas, Chair, Committee on Finance and Audit

FROM: Maria Ledger, Director, Department of Family Care

SUBJECT: Request for authorization to increase to an amount not to exceed $950.000.00, a professional services contract with Andrea & Orendorff, LLC for Senior Management services

I respectfully request that the attached resolution be scheduled for consideration by the Committee on Health and Human Needs at its meeting on December 7, 2011.

The Managed Care Organization received authority from the Board (File No. 09-450, Journal, December 17, 2009) to execute a Professional Services Contract with Andrea & Orendorff, LLC to provide senior Management Services to the Managed Care Organization under Family Care for the period January 1, 2010 through December 31, 2010 with the option to renew for two one-year extensions (2011 and 2012) without competitive Request for Proposals (RFP) based on satisfactory performance.

This resolution authorizes the Director, Milwaukee County Department of Family Care (MCDFC) to increase the professional services contract with Andrea & Orendorff, LLC for Senior Management services for 2012, based upon satisfactory performance of the vendor upon the same terms and conditions from $625,000.00 to an amount not to exceed $950,000.00, solely for the purpose of staffing needed positions in Racine and Kenosha Counties.

Positions are needed in Racine and Kenosha because MCDFC submitted a response to an RFP issued by the State of Wisconsin Department of Health Services for service areas to include Racine and Kenosha counties. Following review of the response to the RFP submitted by MCDFC, DHS on September 2, 2011 issued a Letter of Intent to pursue contract negotiations with MCDFC for Long-Term Managed Care in Racine and Kenosha Counties as described in the RFP.

MCDFC requires additional positions to ensure successful operation in Racine and Kenosha without any increase in County positions and to ensure that no tax levy will be required to support operation in Racine and Kenosha Counties. MCDFC will only add positions over and above those currently authorized, upon successful negotiations with

the Department of Health Services and Board authority to provide the Family Care benefit in Racine and Kenosha counties.

MCDFC wishes to increase the Professional Services Contract with Andrea & Orendorff, LLC commencing in January 1, 2012 with all deliverables due and received on or before December 31, 2012. MCDFC will extend all other terms of the current contract between the parties for 2011 for one additional year. MCDFC will seek review and approval of the contract from Milwaukee County Corporation Counsel, Risk Management and Community Business Development Program prior to execution.

If you have questions concerning the proposed professional services contract between MCDFC and Andrea & Orendorff, LLC, please contact Maria Ledger at 287-7610.

Attachment

Cc:

County Executive Chris Abele
Chairman Lee Holloway, County Board
George Aldrich, Chief of Staff, Office of the County Executive
Tia Torhorst, Office of the County Executive
Terry Cooley, Chief of Staff, County Board
Patrick Farley, Director, DAS
Toni Thomas-Bailey, Fiscal & Management Analyst, DAS
Steve Cady, Analyst, County Board Staff
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff
Jim Hodson, Chief Financial Officer, MCDFC

File No. ___
(Journal,___)

(ITEM NO. __) From the Milwaukee County Department of Family Care (MCDFC), requesting authorization to increase for 2012, a professional services contract with Andrea & Orendorff, LLC with vendor fees not to exceed $950,000.00 in 2012 to provide additional personnel in support of the provision of services in Racine and Kenosha Counties:

A RESOLUTION

WHEREAS, the Milwaukee County Department of Family Care operates a managed care organization (MCO) (also known as a Care Management Organization) in accordance with the Health and Community Supports Contract between Milwaukee County and the State of Wisconsin Department of Health Services; and

WHEREAS, MCDA received authority from the Board (File No. 09-450, Journal, December 17, 2009) to execute a Professional Services Contract with Andrea & Orendorff, LLC to provide senior Management Services to the Department on Aging-Care Management Organization under Family Care for the period January 1 through December 31, 2010 with the option to renew for two one-year extensions (2011 and 2012) without competitive Request for Proposals (RFP) based on satisfactory performance; and

WHEREAS, MCDFC submitted a response to RFP issued by the State of Wisconsin Department of Health Services for service areas to include Racine and Kenosha counties, and following review of the response to the RFP submitted by MCDFC, DHS on September 2, 2011 issued a Letter of Intent to pursue contract negotiations with MCDFC for Long-Term Managed Care in Racine and Kenosha Counties as described in the above-referenced RFP, and

WHEREAS, the MCO, operated by MCDFC, requires additional positions to ensure successful operation in Racine and Kenosha without any increase in County positions and to ensure that no tax levy will be required to support operation in Racine and Kenosha Counties; and

WHEREAS, Andrea & Orendorff, LLC has satisfactorily performed the Senior Management services during the initial contract period and the first extension (2011) of this agreement, therefore,

BE IT RESOLVED, (1) The Director of the Department of Family Care is authorized to increase the contract to an amount not to exceed $950,000.00 with Andrea & Orendorff, LLC for Senior Management Services for one additional year, 2012, and (2) services shall be performed under the direct supervision of the Department of Family Care Director or her designee and (3) any costs during the term of this agreement over the amount now approved will require further Board action, and

BE IT FURTHER RESOLVED, that this professional services contract shall be contingent upon continued funding from the State of Wisconsin Department of Health Services for administration and delivery of the family care benefit in Racine and Kenosha Counties by the Department of Family Care and County Board authorization for continued participation by the Department of Family Care as a Managed Care Organization (MCO) during the term of this agreement for 2012

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/22/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: The Department of Family Care is requesting authorization to increase the professional services contract with Andrea & Orendorff, LLC for Senior Management services for 2012, based upon satisfactory performance of the vendor upon the same terms and conditions from $625,000.00 to an amount not to exceed $950,000.00, solely for the purpose of staffing needed positions in Racine and Kenosha Counties.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	325,000
	Revenue	0	325,000
	Net Cost	0	0
Capital Improvement Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0

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.

The Department of Family Care is requesting authorization to increase the professional services contract with Andrea & Orendorff, LLC for Senior Management services for 2012, based upon satisfactory performance of the vendor upon the same terms and conditions from $625,000.00 to an amount not to exceed $950,000.00, solely for the purpose of staffing needed positions in Racine and Kenosha Counties.
There are no direct costs, savings, anticipated revenues or budgetary impacts associated with the requested action in the current budget year. Any contract executed with DHS for services outside of Milwaukee County will not take effect until 2012. Capitation rates will be determined prior to the execution of the contract and the 2012 budget will be modified accordingly.

Department/Prepared By Jim Hodson

Authorized Signature Maria Ledger

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: November 21, 2011

TO: Supervisor Peggy Romo-West, Chair, Committee on Health and Human Needs
Supervisor Johnny L. Thomas, Chair, Committee on Finance and Audit

FROM: Maria Ledger, Director, Department of Family Care

SUBJECT: Request authorization to execute a contract with the State of Wisconsin Department of Health Services to operate a managed care organization (MCO) to provide the Family Care benefit to residents of Milwaukee County for the period January 1, 2012 through December 31, 2012, and to accept the funding thereunder.

I respectfully request that the attached resolution be scheduled for consideration by the Committee on Health and Human Needs at its meeting on December 7, 2011.

The State of Wisconsin authorized the long-term care program known as Family Care via enactment of 1999 Wisconsin Act 9. Milwaukee County was one of five pilot counties authorized to provide the family care benefit to eligible residents and Milwaukee County has provided the Family Care benefit to residents of Milwaukee County since July 2000 previously through the Milwaukee County Department on Aging and currently through the Milwaukee County Department of Family Care.

The State of Wisconsin Department of Health Services (DHS) and the legislature authorized the expansion of Family Care to all target groups, including all adults with a developmental disability, physical disability or frailties of aging over the age of 18 who reside in Milwaukee County. The family care benefit has been available to eligible and enrolled adult residents of Milwaukee County since November 2009.

The process for awarding contracts to continue to provide the Family Care benefit is set forth at s. 46.284 (2) of the Wisconsin Statutes as follows: "The department may contract with counties, long-term care districts, the governing body of a tribe or band or the Great Lakes inter-tribal council, inc., or under a joint application of any of these, or with a private organization that has no significant connection to an entity that operates a resource center. Proposals for contracts under this subdivision shall be solicited under a competitive sealed proposal process under s. 16.75 (2m) and the department shall evaluate the proposals primarily as to the quality of care that is proposed to be provided, certify those applicants that meet the requirements specified in sub. (3) (a), select certified applicants for contract and contract with the selected applicants."

In August 2008 the State of Wisconsin issued a Request for Proposals (RFP #1645-DLTC-SM) to provide the Family Care benefit in Milwaukee County consistent with the above-referenced statute. DFC submitted a timely response to RFP #1645-DLTC-SM. Following review of the response to the RFP submitted by DFC, DHS on February 2, 2009 issued a Letter of Intent to pursue contract negotiations with DFC for Long-Term Managed Care in Milwaukee in 2009 as described in the above-referenced RFP with the option for one year contract renewals for calendar years 2010, 2011, 2012 and 2013.

The Director, Department of Family Care requests authorization to execute a contract with the Department of Health Services enabling the Milwaukee County Department of Family Care to serve as a managed care organization (MCO) for the period January 1, 2012 through December 31, 2012 in Milwaukee County and to accept the funding provided thereunder.

If you have questions concerning the proposed professional services contract between MCDFC and the State of Wisconsin Department of Health Services, please contact Maria Ledger at 287-7610.

Attachment

Cc:

County Executive Chris Abele
Chairman Lee Holloway, County Board
George Aldrich, Chief of Staff, Office of the County Executive
Tia Torhorst, Office of County Executive
Terry Cooley, Chief of Staff, County Board
Patrick Farley, Director, DAS
Toni Thomas-Bailey, Fiscal & Management Analyst, DAS
Steve Cady, Analyst, County Board Staff
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff
Jim Hodson, Chief Financial Officer, MCDFC

File No. ___
(Journal,___)

(ITEM NO. __) From the Department of Family Care (DFC), requesting authorization to execute a contract with the State of Wisconsin Department of Health Services to operate a managed care organization (MCO) to provide the Family Care benefit to residents of Milwaukee County for the period January 1, 2012 through December 31, 2012, and to accept the funding thereunder, by recommending the adoption of the following:

A RESOLUTION

WHEREAS, the state authorized the long-term care program known as Family Care via enactment of 1999 Wisconsin Act 9; and

WHEREAS, Milwaukee County was one of five pilot counties authorized to provide the Family Care benefit to eligible residents and Milwaukee County has provided the Family Care benefit to residents of Milwaukee County since July 2000 previously through the Milwaukee County Department on Aging and currently through the Milwaukee County Department of Family Care (MCDFC) ; and

WHEREAS, the State of Wisconsin Department of Health Services (DHS) and the legislature authorized the expansion of family care to all target groups, including all adults with a developmental disability, physical disability or frailties of aging over the age of 18 who reside in Milwaukee County, and the Family Care benefit has been available to eligible and enrolled adult residents of Milwaukee County since November 2009; and

WHEREAS, the process for awarding contracts to continue to provide the Family Care benefit is set forth at s. 46.284 (2) of the Wisconsin Statutes as follows: "The department may contract with counties, long-term care districts, the governing body of a tribe or band or the Great Lakes inter-tribal council, inc., or under a joint application of any of these, or with a private organization that has no significant connection to an entity that operates a resource center. Proposals for contracts under this subdivision shall be solicited under a competitive sealed proposal process under s. 16.75 (2m) and the department shall evaluate the proposals primarily as to the quality of care that is proposed to be provided, certify those applicants that meet the requirements specified in sub. (3) (a), select certified applicants for contract and contract with the selected applicants."; and

WHEREAS, in August 2008 the State of Wisconsin issued a Request for Proposals (RFP #1645-DLTC-SM) to provide the Family Care benefit in Milwaukee County consistent with the above-referenced statute; and

WHEREAS, RFP #1645-DLTC-SM provided in part that "DHS will offer an initial contract for the duration of the calendar year in which the contract begins, with the option for annual one-year renewals, not to exceed five years in total, if the MCO continues to meet performance requirements."

WHEREAS, MCDFC submitted a timely response to RFP #1645-DLTC-SM; and

WHEREAS, following review of the response to the RFP submitted by MCDFC, DHS on February 2, 2009 issued a Letter of Intent to pursue contract negotiations with DFC for Long-Term Managed Care in Milwaukee in 2009 as described in the above-referenced RFP with the option for one year contract renewals for calendar years 2010, 2011, 2012 and 2013, therefore,

BE IT RESOLVED, The Director, Department of Family Care is hereby authorized to execute a contract with the Department of Health Services enabling the Milwaukee County Department of Family Care to serve as a managed care organization (MCO) for the period January 1, 2012 through December 31, 2012 and to accept the funding provided thereunder, and

BE IT FURTHER RESOLVED, that contract performance by Milwaukee County Department of Family Care shall be contingent upon continued funding from the State of Wisconsin Department of Health Services for administration and delivery of the family care benefit by the Department of Family Care, and

BE IT FURTHER RESOLVED, further County Board authorization is required for participation by the Department of Family Care as a Managed Care Organization (MCO) for any additional renewal for any date of service after December 31, 2012.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/22/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Request authorization to execute a contract with the State of Wisconsin Department of Health Services to operate a managed care organization (MCO) to provide the Family Care benefit to residents of Milwaukee County for the period January 1, 2012 through December 31, 2012, and to accept the funding thereunder.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

- ☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

- ☐ Absorbed Within Agency's Budget
- ☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	0	0
	Revenue	0	0
	Net Cost	0	0

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.

There are no direct costs, savings, anticipated revenues or budgetary impacts associated with the requested action in the current budget year. Any contract executed with DHS will not take effect until 2012. Capitation rates will be determined prior to the execution of the contract.

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 must be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

COUNTY OF MILWAUKEE
INTEROFFICE COMMUNICATION

DATE: November 21, 2011

TO: Supervisor Peggy Romo-West, Chair, Committee on Health and Human Needs
Supervisor Johnny L. Thomas, Chair, Committee on Finance and Audit

FROM: Maria Ledger, Director, Department of Family Care

SUBJECT: Request authorization to execute a professional services contract for medical consultant services to be provided in 2011 with vendor service fees not to exceed prorated portion of $100,000.00 in 2011 and to renew for one additional year, 2012, upon satisfactory performance and at the sole discretion of the DFC Director upon the same terms and conditions.

I respectfully request that the attached resolution be scheduled for consideration by the Committee on Health and Human Needs at its meeting on December 7, 2011.

MCDFC 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. In addition to other requirements of the Health and Community Supports Contract, MCDFC is responsible for providing those services in the Family Care benefit package that are medically necessary. MCDFC is required to provide covered services and coordinate non-covered Medical Assistance service, including acute and primary care to all enrolled members.

MCDFC is charged with the responsibility of determining the most cost-effective services necessary to support the health and safety of members enrolled in the Managed Care Organization (MCO) operated by MCDFC. MCDFC will benefit from the services of a medical consultant to develop and oversee practice guidelines that ensure delivery of care consistent with contemporary clinical and economic standards. The medical consultant can provide support, guidance and clinical oversight to care managers and nurses responsible for authorization and coordination of services to members enrolled in MCDFC's managed care organization.

The Medical College of Wisconsin can provide valuable assistance in identifying a licensed and experienced physician capable of providing the necessary services to support the continued successful operation of MCDFC and the cost-effective management of service utilization on behalf of members.

The Milwaukee County Department of Family Care requests authority to negotiate and execute a professional services contract in an amount not to exceed $100,000.00 with a properly qualified physician to serve as Medical Consultant to the Department of Family Care beginning in 2011 Medical Consultant services shall be performed under the direct supervision of the Department of Family Care Director or her designee. The Director of the Department of Family Care requests authority to extend this agreement for one additional year (calendar year 2012) upon the same terms and conditions without need for further action of the Board. This professional services contract is contingent upon continued funding from the State of Wisconsin Department of Health Services for administration and delivery of the Family Care benefit by the Department of Family Care and County Board authorization for continued participation by the Department of Family Care as a Managed Care Organization (MCO) during the term of this agreement and renewal, if any, for 2012,

If you have questions concerning the proposed professional services contract between MCDFC and the State of Wisconsin Department of Health Services, please contact Maria Ledger at 287-7610.

Attachment

Cc:

County Executive Chris Abele
Chairman Lee Holloway, County Board
George Aldrich, Chief of Staff, Office of the County Executive
Terry Cooley, Chief of Staff, County Board
Patrick Farley, Director, DAS
Toni Bailey-Thomas, Fiscal & Management Analyst, DAS
Steve Cady, Analyst, County Board Staff
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff
Jim Hodson, Chief Financial Officer, MCDFC

File No. ___
(Journal,___)

(ITEM NO. __) From the Milwaukee County Department of Family Care (MCDFC), requesting authorization to execute a professional services contract with for medical consultant services to be provided in 2011 with vendor service fees not to exceed prorated portion of $100,000.00 in 2011 and to renew for one additional year, 2012, upon satisfactory performance and at the sole discretion of the MCDFC Director upon the same terms and conditions:

A RESOLUTION

WHEREAS, the Milwaukee County 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, in addition to other requirements of the Health and Community Supports Contract, MCDFC is responsible for providing those services in the Family Care benefit package that are medically necessary; and

WHEREAS, MCDFC is required to provide covered services and coordinate non-covered Medical Assistance service, including acute and primary care to all enrolled members; and

WHEREAS, MCDFC is charged with the responsibility of determining the most cost-effective services necessary to support the health and safety of members enrolled in the Managed Care Organization (MCO) operated by MCDFC; and

WHEREAS, MCDFC will benefit from the services of a medical consultant to develop and oversee practice guidelines that ensure delivery of care consistent with contemporary clinical and economic standards; and

WHEREAS, the medical consultant can provide support, guidance and clinical oversight to care managers and nurses responsible for authorization and coordination of services to members enrolled in MCDFC's managed care organization; and

WHEREAS, The Medical College of Wisconsin can provide valuable assistance in identifying a licensed and experienced physician capable of providing the necessary services to support the continued successful operation of DFC and the cost-effective management of service utilization on behalf of members, therefore,

BE IT RESOLVED, (1) The Department of Family Care is hereby authorized to negotiate and execute a professional services contract in an amount not to exceed $100,000.00 with properly qualified physician to serve as Medical Consultant to the Milwaukee County Department of Family Care beginning in 2011 and (2) services shall be performed under the direct supervision of the Milwaukee County Department of

Family Care Director or her designee and (3) any costs during the term of this agreement over the amount now approved will require further Board action, and

BE IT FURTHER RESOLVED, that the Director of the Milwaukee County Department of Family Care in her sole discretion may extend this agreement for one additional year (calendar year 2012) upon the same terms and conditions without need for further action of the Board, and

BE IT FURTHER RESOLVED, that this professional services contract shall be contingent upon continued funding from the State of Wisconsin Department of Health Services for administration and delivery of the Family Care benefit by the Milwaukee County Department of Family Care and County Board authorization for continued participation by the Milwaukee County Department of Family Care as a Managed Care Organization (MCO) during the term of this agreement and renewal, if any, for 2012,

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/22/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Request authorization to execute a professional services contract for medical consultant services to be provided in 2011 with vendor service fees not to exceed prorated portion of $100,000.00 in 2011 and to renew for one additional year, 2012, upon satisfactory performance and at the sole discretion of the DFC Director upon the same terms and conditions.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	0	0
	Revenue	0	0
	Net Cost	0	0

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.

The Milwaukee County Department of Family Care requests authority to negotiate and execute a professional services contract in an amount not to exceed $100,000.00 with a properly qualified physician to serve as Medical Consultant to the Department of Family Care beginning in 2011 Medical Consultant services shall be performed under the direct supervision of the Department of Family Care Director or her designee The 2011 and 2012 budget has incorporated the costs of this service into the budget.

Department/Prepared By Jim Hodson

Authorized Signature Maria Lagos

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: November 22, 2011

TO: Sup. Lee Holloway, Chairman, Milwaukee County Board of Supervisors
Sup. Peggy Romo West, Chair, Committee on Health and Human Needs

FROM: Stephanie Sue Stein, Director, Department on Aging

RE: Request for authorization to execute the 2012 State and County Contract Covering Social Services and Community Programs – Aging Programs and to accept the federal and state revenues provided thereunder, including any and all increases in allocations during the contract year

I respectfully request that the attached resolution be scheduled for consideration by the Committee on Health and Human Needs at its meeting on December 7, 2011.

The resolution authorizes the Milwaukee County Executive to execute the 2012 State and County Contract Covering Social Services and Community Programs – Aging Programs between the Milwaukee County Department on aging and the Wisconsin Department of Health Services (DHS) and to accept the federal and state revenues provided thereunder, including any and all increases in allocations during the contract year.

Funds provided under the State/County contract include most of the revenue in the Department's 2012 Adopted Budget. These funds will be used to pay for the services directly provided by Department on Aging employees and for the services purchased by the Department from private vendors.

These funds do require a local matching share that is provided, in part, through the County Tax Levy allocated to the Department on Aging in the 2012 Adopted Budget. As in previous years, contract agencies will be required to provide the remainder of the local matching share.

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
Tia Torhorst
Jennifer Collins
Antionette Thomas-Bailey
Jonette Arms
Keith Garland
Mary Proctor Brown
Nubia Serrano
Chester Kuzminsk
Gary Portenier
Pat Rogers

Attachments

RESOLUTION

WHEREAS, the Milwaukee County Department on Aging is funded primarily through several federal and state grant programs that are administered by the Wisconsin Department of Health Services (DHS); and

WHEREAS, the 2012 State and County Contract Covering Social Services and Community Programs -- Aging Programs between Wisconsin Department of Health Services (DHS) and Milwaukee County will provide most of 2012 revenues for the Department on Aging; and

WHEREAS, those revenues, including any and all increases in award amounts, will support most of the Department's direct and purchased services for older persons during 2012; now, therefore,

BE IT RESOLVED, that the County Executive is hereby authorized to execute the 2012 State and County Contract Covering Social Services and Community Programs -- Aging Programs between Wisconsin Department of Health Services (DHS) and Milwaukee County and to accept the federal and state revenues provided thereunder, including any and all increases in allocations during the contract year, for the support of Department on Aging programs and services for older persons.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 22, 2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Request for authorization to execute the 2012 State and County Contract Covering Social Services and Community Programs – Aging Programs and to accept the federal and state revenues provided thereunder, including any and all increases in allocations during the contract year.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☒ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	
	Revenue	0	
	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.

This resolution authorizes the Milwaukee County Executive to execute the 2012 State and County Contract with Wisconsin Department of Health Services and enables the Director, Milwaukee County Department on Aging, to accept federal and state revenues provided for under the 2012 Adopted Budget, as well as any and all increases in allocations during the contract year. The adoption of this resolution will not require the expenditure of any County Tax Levy not previously authorized in the 2012 Adopted Budget.

This resolution has no fiscal impact on 2011 other than the allocation of staff time required to prepare the accompanying report and resolution.

[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: Department on Aging / Gary W. Portenier, Program Planning Coordinator

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

County of Milwaukee
INTEROFFICE COMMUNICATION

DATE: November 22, 2011

TO: Sup. Lee Holloway, Chairman, Milwaukee County Board of Supervisors
Sup. Peggy Romo West, Chair, Committee on Health and Human Needs

FROM: Stephanie Sue Stein, Director, Department on Aging

RE: Request for authorization to execute a contract with the Wisconsin Department of Health Services (DHS) enabling the Department on Aging to serve as the Aging Resource Center of Milwaukee County under Family Care, for the period January 1, through December 31, 2012, and to accept $2,773,222 and such other revenues as DHS may award to operate the Resource Center in 2012

I respectfully request that the attached resolution be scheduled for consideration by the Committee on Health and Human Needs at its meeting on December 7, 2011.

The resolution authorizes the Milwaukee County Executive, or his designee, to execute a contract with the Wisconsin Department of Health Services (DHS) enabling the Department on Aging to serve as the Aging Resource Center of Milwaukee County under the Family Care program for the period January 1, through December 31, 2012, and to accept $2,773,222 and such other revenues as DHS may award to operate the Resource Center in 2012.

Family Care is Wisconsin's long-term care entitlement program for the elderly and persons with disabilities. The major purpose of Family Care is to divert persons requiring long term care services from expensive publicly funded nursing homes to more appropriate community based forms of care. One essential component of Family Care enables counties to serve as an Aging and Disability Resource Center (ADRC). These centers are responsible for providing the following services: information and assistance; benefits counseling; access to SSI, SSI-E, Medicaid, and food stamps; emergency response; elder abuse and adult protective services; transitional services; prevention and early intervention services; long-term care options counseling; and access to the Family Care benefit. The Milwaukee County Board of Supervisors has authorized the Milwaukee County Department on Aging to participate as the Aging Resource Center of Milwaukee County since 2000.

An award of $2,773,222 is allocated for Department on Aging to serve as the Aging Resource Center in 2012. The Department is requesting authorization to serve as the Aging Resource Center of Milwaukee County, for the period January 1, through December 31, 2012, and to accept the $2,773,222 award and such other revenue that may be awarded for that purpose.

If you have any questions about this resolution, please contact me at 2-6876.

Stephanie Sue Stein, Director
Milwaukee County Department on Aging

cc: County Executive Chris Abele
Tia Torhorst
Jennifer Collins
Antionette Thomas-Bailey
Jonette Arms
Keith Garland
Mary Proctor Brown
Nubia Serrano
Chet Kuzminski
Gary Portenier
Pat Rogers

Attachment

RESOLUTION

WHEREAS, the Wisconsin Department of Health and Family Services (DHFS) engaged in a comprehensive initiative to redesign Wisconsin's Long Term Support services for older adults and persons with disabilities; and

WHEREAS, the result of that initiative is the long-term care program Family Care; and

WHEREAS, a major purpose of Family Care is to divert persons requiring long term care from expensive publicly funded nursing homes to more appropriate community-based forms of care; and

WHEREAS, one component of Family Care enables counties to serve as Aging and Disability Resource Centers; and

WHEREAS, the Aging Resource Center of Milwaukee County is responsible for providing the following services: Information and Assistance; Benefits Counseling; Access to SSI, SSI-E, Medicaid, and Food Stamps; Emergency Response; Elder Abuse and Protective Services; Transitional Services; Prevention and Early Intervention Services; Long-Term Care Options Counseling; and Access to the Family Care Benefit; and

WHEREAS, the Milwaukee County Board of Supervisors authorized the Department on Aging to participate as the Aging Resource Center of Milwaukee County each year since 2000; and

WHEREAS, the Department on Aging is seeking authorization to continue to serve as the Aging Resource Center of Milwaukee County for the period January 1, through December 31, 2012; and

WHEREAS, the State of Wisconsin has allocated $2,773,222 to pay for the services to be provided by the Department on Aging as the Aging Resource Center of Milwaukee County in 2012; now, therefore,

BE IT RESOLVED, that the Milwaukee County Executive, or his designee, is hereby authorized to execute a contract with the Wisconsin Department of Health Services enabling the Department on Aging to serve as the Aging Resource Center of Milwaukee County for the

period January 1, through December 31, 2012; and

BE IT FURTHER RESOLVED, that the Milwaukee County Executive, or his designee, is hereby authorized to accept $2,773,222 from the Wisconsin Department of Health Services (DHS) and such other revenues as DHS may award to operate the Aging Resource Center of Milwaukee County in 2012.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 22, 2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Request for authorization to execute a contract with the Wisconsin Department of Health Services (DHS) to enable the Milwaukee County Department on Aging to serve as the Aging Resource Center of Milwaukee County under Family Care for the period January 1, through December 31, 2012 and to except $2,773,222 in state and federal funds, and such other revenues as may awarded to support the Aging Resource Center.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☒ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	
	Revenue	0	
	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.

This resolution authorizes the Milwaukee County Executive, or his designee, to execute a contract with the Wisconsin Department of Health Services (DHS) to enable the Department on Aging to serve as the Aging Resource Center of Milwaukee County under Family Care for the period January 1, through December 31, 2012.

The resolution also authorizes the Director, Department on aging, to accept $2,773,222 in state and federal funds, and such other revenues as may be awarded, to support the Department's activities as the Aging Resource Center of Milwaukee County under Family Care. The adoption of this resolution will not require the expenditure of any County Tax levy not previously authorized in the 2012 Adopted Budget.

This resolution has no fiscal impact on 2011 other than the allocation of staff time required to prepare the accompanying report and resolution.

[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: Department on Aging / Gary W. Portenier, Program Planning Coordinator

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

County of Milwaukee

INTEROFFICE COMMUNICATION

DATE: November 22, 2011

TO: Sup. Lee Holloway, Chairman, Milwaukee County Board of Supervisors
Sup. Peggy Romo West, Chair, Committee on Health and Human Needs

FROM: Stephanie Sue Stein, Director, Department on Aging

RE: Request for authorization to execute 2012 program and service contracts

I respectfully request that the attached resolution be scheduled for consideration by the Committee on Health and Human Needs at its meeting on December 7, 2011.

The resolution authorizes the Director, Department on Aging, to execute 2012 service contracts with the vendors and for the amounts and purposes set forth in the resolution.
The Department is purchasing a wide variety of human services and supporting several community programs to sustain the independence and well being of Milwaukee County's older adults during 2012.

County Board Resolution File No. 98-197 (a) (a) authorizes Department's to recommend the renewal of an existing contract without a Request for Proposal when based upon (1) satisfactory performance by the vendor and (2) continued funding within the Department's adopted budget. The Department on Aging puts some programs through an open and competitive Request for Proposals (RFP) ever year, some once every two years, and the remainder once every three years. Before recommended for contract renewal, the vendor is required to submit a complete proposal to assure both sides agree on budget, scope of service, staffing, and other factors.

A proposed vendor for 18 of the 27 awards for 2012 were selected by the Milwaukee County Commission on Aging from among qualified service providers who submitted proposals in response to an open and competitive Request for Proposals issued by the Department on Aging. Each proposal submitted was reviewed by Department staff and members of the Commission on Aging's Service Delivery Committee and evaluated in writing. The Service Delivery Committee, at public meetings to which all applicant providers were invited, approved recommendations for 2012 contracts. The full Commission on Aging, at its meeting on November 11, 2011, adopted the Service Delivery Committee recommendations. The Department on Aging includes action by the Commission in the accompanying resolution.

An additional nine contracts are recommended for renewal for 2012 based upon the satisfactory performance of the vendor during 2011 and consistent with funds included in the Department's Adopted Budget for calendar year 2012. Vendors for eight contracts recommended for renewal are eligible for a one-year renewal option authorized by the County Board on December 16, 2010 [File No. 11-34 (a)(a)]. One other vendor for 2012 (Transit Express, Inc.) is in year one of a two year renewal option authorized by the Board on December 16, 2010 under the same resolution.

One of the vendors recommended for a 2012 contract is Indian Council of the Elderly, Inc., to provide Services to Native American Elderly. The Commission on Aging is recommending that the County Board authorize a three month contract with Indian Council for the period January 1, through March 31, 2012. Several systemic problems have developed in the administration of this program and serves as the reason for the Commission's recommendation.

The contract between the Department on Aging and the Indian Council of the Elderly supports a senior center and nutrition site open on Mondays and Fridays. Space for the center is provided by Redeemer Lutheran Church, 631 North 19th Street. When the center is open Indian Council staff prepares congregate meals onsite for center participants. The Indian Council also provides home visits and related services to homebound elders, primarily on days the center is closed.

Indian Council of the Elderly has been struggling to find an effective program administrator for Services to Native American Elderly. Incomplete and inaccurate financial and service reports require revisions that delay reimbursement to the vendor. In addition to staffing and reporting issues, the Department is concerned about food quality, procurement, preparation, and storage at the nutrition site. The Department has developed a corrective action plan and increased monitoring at the center. At this time, the Department is not seeking an off site caterer, but that remains an option should problems continue. Limiting the contract to three months serves is an incentive for the Indian Council to resolve these issues as soon as possible.

Finally, the Department offers two programs budgeted at greater than $1,000,000 in 2012. The first is the proposed contract totaling $1,258,867 with Interfaith Older Adult Programs, Inc., to administer Programs in Clinton and Bernice Rose Park, McGovern Park, Washington Park, Wilson Park, and Lawrence P. Kelly Seniors Centers. The second is the proposed contract totaling $1,385,945 with Transit Express, Inc., to provide Specialized Elderly Transportation Services. Interfaith was the only agency to submit a proposal to manage the five county-owned senior centers in 2012. Transit Express is eligible for a contract renewal in 2012 so no open and competitive RFP was issued.

In addition to the 2012 resolution, the attached report summarizes the Commission's process for 2012 contract recommendations. Other than issues relating to Services to Native American Elderly, there are no changes in vendor or contract award amounts between 2011 and 2012.

If you have any questions about the resolution or the report, please call me at 2-6876.

Stephanie Sue Stein, Director
Department on Aging

Attachments

cc: County Executive Chris Abele
Tia Torhorst
Antionette Thomas-Bailey
Jennifer Collins
Jonette Arms
Keith Garland
Mary Proctor Brown
Chet Kuzminski
Nubia Serrano
Jill Knight
Diane Beckley
Beth Monrial Zatarski
Gary Portenier
Pat Rogers

Background on the Commission on Aging's Request for Proposal and Vendor Selection Process for 2012 Contracts

I. Request for Proposal Process and Commission on Aging's Selection of Vendors

The Department on Aging makes allocations for contractual services on the basis of several factors. These include: a) the anticipated funding available through the Department's federal and state grant programs; b) the needs of Milwaukee County's older adult population as identified in the Department's Area Plan; c) federal and state requirements regarding eligible populations to be served and services to be provided; and d) the need to maintain continuity of care and services to the many frail elders who depend upon the Department's programs and services for their continued independence in the community.

Allocations for most services do not change significantly from year to year. When additional funding is anticipated, the Department invests it in the following ways:

- Increasing allocations for individual programs serving high needs populations;
- Creating new programs for populations not previously served;
- Developing services to meet previously unmet needs of older people; and
- Increasing allocations to existing programs to help providers meet rising costs and maintain levels of service.

Over the years some program have been redesigned to provide services more efficiently or to use limited resources more effectively.

The Commission on Aging is recommending a total of 27 separate contracts or contract renewals for 2012 awards. For 2012, vendors eighteen (18) of the recommended contract awards were selected on the basis of a competitive Requests for Proposals (RFP) process. This process was initiated in August with the publication of legal notices in three newspapers, including one that serves the African-American community. For the first time interest parties could obtain general RFP guidelines and requirements, specific program/service guidelines or specifications, and proposal forms online. Interested parties could also obtain that information at Department on Aging offices in the Maria Coggs Human Services Center.

The Request for Proposal materials clearly described the programs and services for which the Department was seeking providers, the amount of funding available in each program or service area, and the criteria to be used in evaluating proposals. The Department on Aging staff offered prospective providers technical assistance in the preparation of proposal materials upon request.

Proposals submitted by the published deadline of September 6, 2010, were evaluated by Department staff and based on established criteria. The criteria include: the ability of the provider to meet program/service guidelines and specifications; the budget and unit rates proposed by each provider; the need to maintain continuity of services to frail elders; and the ability and willingness of vendors to provide a living wage and family supporting benefits. Staff summarized each proposal and submitted award recommendations in written proposal analyses.

Copies of proposals and proposal analyses were provided to members of the Commission on Aging's Service Delivery Committee, who collectively provided approximately 100 hours of volunteer time reading the RFP materials, the proposals submitted, and the staff analyses. Copies of the analysis were mailed to each vendor who submitted a proposal.

II. Demographics of Milwaukee County Seniors

According to the 2010 Census of Population and Housing, a total of 153,556 persons age 60 or older reside within Milwaukee County. The racial or ethnic breakdown of that population is as follows:

White	121,337	79.0%
Black or African-American	25,933	16.9%
American Indian or Alaska Native	600	0.4%
Asian	2,536	1.7%
Native Hawaiian or Other Pacific Islander	29	0.0%
Some other race	2,066	1.3%
Two or more races	1,055	0.7%
Hispanic or Latino (all races)	6,582	4.3%

III. Targeting of Services to Elder Persons of Color or Ethnicity

Of 27 contracts recommended by the Commission on Aging for 2012 funding, 8 (30%) contracts are to be awarded to agencies owned or managed by persons of color or ethnicity, with awards totaling $673,111 and representing 11% of all funds awarded.

While the entire range of the Department's contractual services is provided to persons of color or ethnicity, several of the contracts listed on the attached table are targeted to serve specific populations. Targeted services involve senior center programming, outreach, and nutrition, all of which may be more effective when designed to meet specific cultural needs or overcome cultural barriers.

The targeting of services represents the Department's efforts to serve the diversity of Milwaukee County's elderly population and to comply with federal mandates under the Older Americans Act to target services to populations having the greatest economic and social need.

The following summarizes programs providing targeted services by race or ethnicity:

Service	Provider	Allocation
African-American		
1. Senior Center	Bethesda Community Senior Citizens' Center, Inc.	$ 85,000
2. Senior Center	Project Focal Point, Inc.	60,000
Hispanic		
1. Senior Center, Transportation Nutrition Site Supervision, Catering	United Community Center, Inc.	373,189

Asian

1. Social Services and Nutrition	Asian American Community Center, Inc.	$ 37,500
2. Community Outreach and Access Services to Southeast Asian American Elderly: Translation and Interpretation	Hmong/American Friendship Association, Inc.	32,850
3. Community Outreach and Access Services to Southeast Asian American Elderly: Socialization, Recreation, and Education	Milwaukee Christian Center, Inc.	53,550
4. Nutrition Site Supervision	Milwaukee Christian Center, Inc.	40,000

Native American

1. Social Services and Nutrition	Indian Council of the Elderly, Inc.	21,143*

Other Targeted Services

1. Alzheimer's Counseling and Community Support Services	Alzheimer's Association of Southeastern Wisconsin, Inc.	50,000
2. Programs in Clinton and Bernice Rose Park, McGovern Park, Washington Park, Wilson Park, and Lawrence P. Kelly Senior Centers	Interfaith Older Adult Programs, Inc.	1,258,867
3. Outreach in Public Housing	S. E. T. Ministry, Inc.	67,500

In addition to services targeted to specific minority groups, all Department on Aging contracted vendors must submit a written description of the efforts they will make to serve persons of color.

The Department further targets contractual services by locating them in areas with high concentrations of elder persons of color. For example, 8 of the Senior Meal Program's 28 meal sites are located in the African-American community and 1 in the Hispanic community. Of the 65 senior apartments receiving weekly group grocery shopping transportation, 17 are located in the African-American community. Of the 17 groups receiving transportation to Senior Meal Program nutrition sites or senior centers, 5 are predominately African American, 1 Hispanic or Latino, 2 Asian, and 1 American Indian.

* That amount is for January thru March only. The amount available for this program is $84,572.

II. Summary of Changes from 2011 to 2012 in Program Allocations and Vendor Awards

The attached table summarizes the changes in the Department's contract award recommendations for 2012. Explanations are provided for changes greater than 5.0%.

Milwaukee County Department on Aging
2011 - 2012 Contract Changes

	Program/Service	2011 Provider	2011 Award	2012 Provider	2012 Award	% Change	Reason for Change
1.	Telephone Reassurance Services	Interfaith Older Adult Programs, Inc.	$13,500	Interfaith Older Adult Programs, Inc.	$13,500	0.0%	
2.	Community Outreach and Access Services to Southeast Asian American Elderly: Translation and Interpretation	Hmong/American Friendship Association, Inc.	$32,850	Hmong/American Friendship Association, Inc.	$32,850	0.0%	
3.	Community Outreach and Access Services to Southeast Asian American Elderly: Socialization, Recreation, and Education	Milwaukee Christian Center, Inc.	$53,550	Milwaukee Christian Center, Inc.	$53,550	0.0%	
4.	Nutrition Site Supervision at Hart Park Senior Center	YMCA of Metropolitan Milwaukee, Inc.	$20,000	YMCA of Metropolitan Milwaukee, Inc.	$20,000	0.0%	
5.	Nutrition Site Supervision at Milwaukee Christian Center	Milwaukee Christian Center, Inc.	$40,000	Milwaukee Christian Center, Inc.	$40,000	0.0%	
6.	Nutrition Site Supervision at Lakeside Senior Enrichment Program	Prospect Congregate Housing, Inc.	$20,000	Prospect Congregate Housing, Inc.	$20,000	0.0%	
7.	Outreach and Services to Lesbian, Gay, Bisexual and Transgender Elderly	SAGE Milwaukee, Inc.	$10,000	SAGE Milwaukee, Inc.	$10,000	0.0%	

Milwaukee County Department on Aging
2011 - 2012 Contract Changes

	Program/Service	2011 Provider	2011 Award	2012 Provider	2012 Award	% Change	Reason for Change
8.	Benefit Specialist/Legal Services	Legal Action of Wisconsin, Inc.	$406,209	Legal Action of Wisconsin, Inc.	$406,209	0.0%	
9.	Alzheimer's Counseling and Community Support Services	Alzheimer's Association of Southeastern Wisconsin, Inc.	$50,000	Alzheimer's Association of Southeastern Wisconsin, Inc.	$50,000	0.0%	
10.	Family Support for Aging and Persons with Developmental Disabilities	ARC Milwaukee, Inc.	$15,075	ARC Milwaukee, Inc.	$15,075	0.0%	
11.	Programs in Minority Senior Centers	Bethesda Community Senior Citizens Center, Inc.	$85,000	Bethesda Community Senior Citizens Center, Inc.	$85,000	0.0%	
12.	Programs in Minority Senior Centers	Project Focal Point, Inc.	$60,000	Project Focal Point, Inc.	$60,000	0.0%	
13.	Programs in United Community Center Senior Center	United Community Center, Inc.	$373,189	United Community Center, Inc.	$373,189	0.0%	
14.	Nutrition Site Supervision Services (Nine Sites)	Interfaith Older Adult Programs, Inc.	$180,000	Interfaith Older Adult Programs, Inc.	$180,000	0.0%	
15.	Nutrition Site Supervision Services (Twelve Sites)	Goodwill Industries of Southeastern Wisconsin, Inc.	$240,000	Goodwill Industries of Southeastern Wisconsin, Inc.	$240,000	0.0%	

Milwaukee County Department on Aging
2011 - 2012 Contract Changes

	Program/Service	2011 Provider	2011 Award	2012 Provider	2012 Award	% Change	Reason for Change
16.	Specialized Elderly Transportation Services	Transit Express, Inc.	$1,382,945	Transit Express, Inc.	$1,382,945	0.0%	
17.	Late Life Counseling Services	Jewish Family Services, Inc.	$33,000	Jewish Family Services, Inc.	$33,000	0.0%	
18.	Programs in Clinton and Bernice Rose Park, McGovern Park, Washington Park, Wilson Park, and Lawrence P. Kelly Senior Centers	Interfaith Older Adult Programs, Inc.	$1,268,867	Interfaith Older Adult Programs, Inc.	$1,268,867	0.0%	
19.	Services to Asian-American Elderly	Asian-American Community Center, Inc.	$37,500	Asian-American Community Center, Inc.	$37,500	0.0%	
20.	Services to Native American Elderly	Indian Council of the Elderly, Inc.	$84,572	Indian Council of the Elderly, Inc.	$21,143	-75.0%	The Department proposes to contract with Indian Council for three months as the parties resolve issues relating to administration of the program, including the accuracy of financial and service reports and the provision of congregate meals at the center.

	Program/Service	2011 Provider	2011 Award	2012 Provider	2012 Award	% Change	Reason for Change
21.	Employment, Training and Placement Services	Interfaith Older Adult Programs, Inc.	$40,500	Interfaith Older Adult Programs, Inc.	$40,500	0.0%	
22.	Coordination of Neighborhood Services	Interfaith Older Adult Programs, Inc.	$271,232	Interfaith Older Adult Programs, Inc.	$271,232	0.0%	
23.	Family Caregiver Support and Alzheimer's Direct Services	Interfaith Older Adult Programs, Inc.	$472,000	Interfaith Older Adult Programs, Inc.	$472,000	0.0%	
24.	Shopping and Errand Services	Goodwill Industries of Southeastern Wisconsin, Inc.	$87,300	Goodwill Industries of Southeastern Wisconsin, Inc.	$87,300	0.0%	
25.	Case Management and Delivery Services for Home Delivered Meals	Goodwill Industries of Southeastern Wisconsin, Inc.	$829,000	Goodwill Industries of Southeastern Wisconsin, Inc.	$829,000	0.0%	
26.	Outreach in Public Housing	S.E.T. Ministry, Inc.	$67,500	S.E.T. Ministry, Inc.	$67,500	0.0%	
27.	After Hours Telephone Coverage for ElderLink	IMPACT Alcohol and Other Drug Abuse Services, Inc.	$30,000	IMPACT Alcohol and Other Drug Abuse Services, Inc.	$30,000	0.0%	

2011 Contractual Services Consolidated Within Other Programs or Discontinued for 2012

1. None

RESOLUTION

WHEREAS, the Adopted Budget for the Milwaukee County Department on Aging allocates revenues and expenditures for the purchase of a variety of supportive programs and services for Milwaukee County older persons during 2012; and

WHEREAS, the Milwaukee County Commission on Aging was created by Chapter 53 of the General Ordinances of Milwaukee County as the designated Area Agency on Aging for the County under the Older Americans Act; and

WHEREAS, at it's meeting on November 11, 2011, the Commission on Aging recommended awarding the following program and service contracts for the period January 1, through December 31, 2012:

	Provider Agency	Program/Service	Recommended Contract Award
1.	Interfaith Older Adult Programs, Inc.	Telephone Reassurance Services	$ 13,500
2.	Hmong/American Friendship Association, Inc.	Community Outreach and Access Services to Southeast Asian American Elderly: Translation and Interpretation	32,850
3.	Milwaukee Christian Center, Inc.	Community Outreach and Access Services to Southeast Asian American Elderly: Socialization, Recreation and Education	53,550
4.	YMCA of Metropolitan Milwaukee, Inc.	Nutrition Site Supervision at Hart Park Senior Center	20,000
5.	Milwaukee Christian Center, Inc.	Nutrition Site Supervision at Milwaukee Christian Center	40,000
6.	Prospect Congregate Housing, Inc.	Nutrition Site Supervision at Lakeside Senior Enrichment Program	20,000

	Provider Agency	Program/Service	Recommended Contract Award
7.	SAGE Milwaukee, Inc.	Outreach and Services to Lesbian, Gay, Bisexual and Transgender Elderly	10,000
8.	Legal Action of Wisconsin, Inc.	Benefit Specialist/Legal Services	406,209

; and

WHEREAS, at it's meeting on November 12, 2010, the Commission on Aging recommended awarding the following program and service contracts for the period January 1, through December 31, 2011, with the provision that, contingent upon the acceptable performance of the vendor and the inclusion of sufficient funds in the 2012 County Budget, the contracts may be renewed for one additional year without Requests for Proposals [File No. 98-197 (a) (a)]; and

WHEREAS, because the following vendors (a) performed satisfactorily under requirements of their 2011 contract and (2) with sufficient funds included in the Department's Adopted Budget for 2012, the Department recommends renewing the following contracts for the period January 1, through December 31, 2012:

	Provider Agency	Program/Service	Recommended Contract Award
9.	Alzheimer's Association of Southeastern Wisconsin, Inc.	Alzheimer's Counseling and Community Support Services	$ 50,000
10.	ARC Milwaukee, Inc.	Family Support for Aging and Persons with Developmental Disabilities	15,075
11.	Bethesda Community Senior Citizens' Center, Inc.	Programs in Minority Senior Centers	85,000

	Provider Agency	Program/Service	Recommended Contract Award

12.	Project Focal Point, Inc.	Programs in Minority Senior Centers	60,000
13.	United Community Center, Inc.	Programs in United Community Center Senior Center	373,189
14.	Interfaith Older Adult Programs, Inc.	Nutrition Site Supervision Services (9 Sites)	180,000
15.	Goodwill Industries of Southeastern Wisconsin Inc.	Nutrition Site Supervision Services (12 Sites)	240,000

; and

WHEREAS, at it's meeting on November 11, 2011, the Commission on Aging recommended awarding the following program and service contracts for the period January 1, through December 31, 2012, with the provision that, contingent upon the acceptable performance of the vendor and the inclusion of sufficient funds in the County Budget, the contract may be renewed for two additional one-year contracts without Requests for Proposals [File No. 98-197 (a)(a)]:

	Provider Agency	Program/Service	Recommended Contract Award
16.	Jewish Family Services	Late Life Counseling Services	$ 33,000
17.	Interfaith Older Adult Programs, Inc.	Programs in Clinton and Bernice Rose Park, McGovern Park, Washington Park, Wilson Park and Lawrence P. Kelly Senior Centers	1,258,867
18.	Asian-American Community Center, Inc.	Services to Asian-American Elderly	37,500
19.	Interfaith Older Adult Programs, Inc.	Employment, Training and Placement Services	40,500
20.	Interfaith Older Adult Programs, Inc.	Coordination of Neighborhood Services	271,232

21.	Interfaith Older Adult Programs, Inc.	Family Caregiver Support and Alzheimer's Disease Direct Services	472,000
22.	Goodwill Industries of Southeastern Wisconsin, Inc.	Shopping and Errand Services	87,300
23.	Goodwill Industries of Southeastern Wisconsin, Inc.	Case Management and Delivery Services for Home Delivered Meals	829,000
24.	S. E. T. Ministry, Inc.	Outreach in Public Housing	67,500
25.	IMPACT Alcohol and Other Drug Abuse Services, Inc.	After Hours Telephone Coverage to Aging Resource Center	20,000

; and

WHEREAS, at it's meeting on November 12, 2010, the Commission on Aging recommended awarding the following program and service contract for the period January 1, through December 31, 2011, with the provision that, contingent upon the acceptable performance of the vendor and the inclusion of sufficient funds in the County Budget, the contract may be renewed for two additional years without a Request for Proposal [File No. 98-197 (a)(a)]; and

WHEREAS, the following vendor performed satisfactorily under requirements of its 2011 contract and with sufficient funds included in the Department's Adopted Budget for 2012, the Department recommends renewing the following contract for year one of the two-year renewal option for the period January 1, through December 31, 2012:

	Provider Agency	Program/Service	Recommended Contract Award
26.	Transit Express, Inc.	Specialized Elderly Transportation Services	$ 1,382,945

; and

WHEREAS, at it's meeting on November 11, 2011, the Commission on Aging

reviewed recurring problems with administration and staffing by Indian Council of the Elderly, Inc., in providing Services to Native American Elderly under contract with the Department on Aging; and

WHEREAS, Department on Aging staff is assisting the Indian Council of the Elderly Board of Directors in resolving problems with the staffing and administration of the program through a corrective action plan to be completed by March 2012; and

WHEREAS, to assure services continue for seniors participating in the nutrition, senior center, and social service aspects of the program, the Commission on Aging, at its meeting on November 11, recommended awarding the following contract for the period January 1, through March 31, 2012:

	Provider Agency	Program/Service	Recommended Contract Award
27.	Indian Council of the Elderly, Inc.	Services to Native American Elderly	$ 21,143

; and

WHEREAS, the above recommended contracts require authorization by the Milwaukee County Board of Supervisors; now, therefore,

BE IT RESOLVED, that the Director, Milwaukee County Department on Aging, is hereby authorized to enter into contracts for 2012 with the above named providers for the programs, services, amounts, and contract periods indicated.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 22, 2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Request for authorization to execute 2012 program and service contracts

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☒ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	
	Revenue	0	
	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.

This resolution authorizes the Director, Department on Aging, to execute twenty-seven (27) purchases of service contracts for 2012 that provide a wide range of programs and services to Milwaukee County older adults. All funds required to execute the contracts authorized herein depend on Federal and State grants and County Tax Levy included in the revenue and expenditure allocations for the Department on Aging in the 2012 Adopted Budget.

This resolution has no fiscal impact on 2011 other than the allocation of staff time required to prepare the accompanying report and resolution.

[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 Coordinator Department on Aging / Gary W. Portenier, Program Planning

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

MILWAUKEE COUNTY
Inter-Office Memorandum

DATE: November 8, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services

SUBJECT: **Report from the Acting Director, Department of Health and Human Services (DHHS), requesting authorization to execute a contract with the Wisconsin Department of Health Services (DHS) to operate the Disability Resource Center under the Family Care Program for the period January 1, 2012 through December 31, 2012 and to accept $2,074,753 in revenue**

Issue

Milwaukee County ordinances require that departments obtain authorization from the County Board in order to execute contracts. The Acting Director, Department of Health and Human Services (DHHS), is therefore requesting authorization to execute a contract with the Wisconsin Department of Health Services (DHS) enabling the DHHS Disabilities Services Division (DSD) to serve as the Disability Resource Center (DRC) of Milwaukee County under the Family Care program for the period January 1, 2012 through December 31, 2012, and to accept $2,074,753 in revenue.

Background and Rationale

The major purpose of Family Care is to provide publicly funded long-term care services to eligible persons with disabilities and older persons in order to provide them with a community-based living option, rather than expensive publicly funded nursing homes or other institutional settings.

One essential component of Family Care enables counties to serve as a Disability Resource Center (DRC) for individuals with disabilities ages 18 through 59. In June 2009, the Milwaukee County Board of Supervisors authorized DHHS to participate as the DRC of Milwaukee County beginning August 2009.

The Resource Center is responsible for providing information and assistance; and benefits counseling that includes access to Medicaid, Medicare, private insurance and other benefits including Food Share. It also provides access to emergency response services; adult protective services; transitional services for youth; long-term care options counseling; and access to the Family Care benefit or other publicly funded long term care options (i.e. partnership PACE and IRIS-Self Directed Supports service models).

The 2011-2013 State Budget includes a statewide cap on new Family Care enrollments, allowing only enrollments based on program attrition statewide over the next two years. The current waitlist for individuals with developmental or physical disabilities is about 1,550 as of Oct. 1.

In response to the Family Care cap, DSD's budget reflects resources and support for all remaining areas and realigns the functions and new role of staff, including a focus on options counseling. DSD will be forced to continue to maintain a waitlist for services that is anticipated to grow over the next several years given the State cap on Family Care.

The base award of $2,074,753 in general purpose revenue is allocated to Milwaukee County to operate the DRC for the period January 1, through December 31, 2012. This allocation is the same as CY 2011.

Recommendation

It is recommended that the County Board of Supervisors authorize the Acting Director, DHHS, or designee, to enter into a contract with DHS to operate the Disability Resource Center in the amount of $2,074,753 for the period January 1, 2012 through December 31, 2012 and to accept any addenda to this contract.

Fiscal Effect

The 2012 Budget includes the $2,074,753 in revenue for the Disability Resource Center. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Administrator - DAS
Pamela Bryant, Fiscal and Budget Administrator – DAS
CJ Pahl, Assistant Fiscal and Budget Administrator – DAS
Antoinette Thomas-Bailey, Fiscal and Management Analyst – DAS
Jennifer Collins, County Board Staff
Jodi Mapp, County Board Staff

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services (DHHS), requesting authorization to execute a contract with the Wisconsin Department of Health Services (DHS) to operate the Disability Resource Center under the Family Care Program for the period January 1, 2012 through December 31, 2012 and to accept $2,074,753 in revenue by recommending adoption of the following:

A RESOLUTION

WHEREAS, the Wisconsin Department of Health Services (DHS) engaged in a comprehensive initiative to redesign Wisconsin's Long Term Support services for the elderly and persons with disabilities; and

WHEREAS, the result of that initiative is the Family Care Program; and

WHEREAS, a major purpose of Family Care is to divert persons requiring long-term care from expensive publicly-funded nursing homes to more appropriate community-based forms of care; and

WHEREAS, one component of Family Care enables counties to serve as a Disability Resource Center (DRC); and

WHEREAS, the DRC of Milwaukee County is responsible for providing the following services: Information and Assistance; Benefits Counseling; Access to Supplemental Security Income (SSI), Supplemental Security Income Exceptional Expense (SSI-E), Medicaid, and Food Share; Emergency Response; Adult Protective Services; Transitional Services; Prevention and Early Intervention Services; Long-Term Care Options Counseling; and Access to the Family Care Benefit; and

WHEREAS, the Milwaukee County Board of Supervisors authorized DHHS Disability Services Division (DSD) to participate as the DRC of Milwaukee County in June 2009; and

WHEREAS, the DHHS DSD is seeking authorization to continue to serve as the DRC of Milwaukee County for the period January 1 through December 31, 2012; and

WHEREAS, the State of Wisconsin has allocated $2,074,753 to pay for the services to be provided by the DRC of Milwaukee County during 2012; now, therefore,

BE IT RESOLVED, that the Acting Director of the Department of Health and Human Services, or his designee, is hereby authorized to enter into a contract with the Wisconsin Department of Health Services to operate the DRC for the period January 1 through December 31, 2012, and to accept $2,074,753 and any addendum thereto.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/22/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services (DHHS), requesting authorization to execute a contract with the Wisconsin Department of Health Services (DHS) to operate the Disability Resource Center under the Family Care Program for the period January 1, 2012 through December 31, 2012 and to accept $2,074,753 in revenue

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

A. Approval of the Department's request will authorize the DHHS Acting Director to sign a 2012 contract with the State to operate a Disability Resource Center (DRC) under the state's Family Care program.

B. Approval to enter into the contract will enable the DHHS Disabilities Services Division to draw down revenue included in its 2012 Budget to fund the costs of operating the DRC. The State's general purpose revenue (GPR) of $2,074,753 provided under the contract will be matched by Federal Medicaid revenue of $1,915,162 for a total of $3,989,915 in State and Federal match. In addition, the 2012 Budget for the DRC includes tax levy of $789,389, which is also matched by 48 percent Federal revenue of $729,166, for a total additional investment of $1,518,555.

C. There is no budgetary impact to 2011 or 2012 by approving the State DRC contract.

D. The fiscal note assumes the DRC will be able to earn 48 percent Federal match dollars based on 100 percent time reporting activity of staff in the DRC. If time reporting results do not support a 48 percent match rate, actual revenue reimbursement will be less than budgeted.

Department/Prepared By Clare O'Brien, Budget Analyst for DHHS

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.

Revised Copy 12/2/2011

MILWAUKEE COUNTY
Inter-Office Memorandum

DATE: November 21, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by Geri L. Lyday, Administrator, Disabilities Services Division

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Disabilities Services Division purchase of service contracts for the Disability Resource Center, Children's Programs and Adults with Disabilities**

Issue

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from non-governmental vendors. Per Section 46.09, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into 2012 purchase-of-service (POS) contracts for the Disabilities Services Division (DSD).

Background and Rationale

Each year, DSD submits requests to the County Board to purchase community-based services from non-governmental vendors. The contract amounts shown on Attachment 1 reflect 2012 proposed DSD contracts. Approval of the recommended contract allocations will allow DSD to provide a broad range of rehabilitation, treatment and support services to adults and children with disabilities in Milwaukee County in 2012.

DSD reviews all new proposals that are submitted to the department by utilizing a five to seven-member panel, as outlined in the procedures contained in the DHHS technical assistance Request for Proposal document. This process is used in every service area where a competitive proposal is submitted. DHHS Contract Administration/Quality Assurance staff assists DSD by facilitating panel reviews when necessary.

Due to the expansion of Family Care to persons 18 through 59 years of age, numerous key decisions were made in recent years and approved by the County Board concerning the continuation of existing DSD POS contracts, the eligibility of the consumers, and how they are integrated in the new publicly funded managed care models. These decisions were reflected in recommendations to allocate contracts and resulted in decreased allocations due to reduced numbers of persons served as individuals eligible for Family Care were enrolled in that program.

Effective July 1, 2011, the State of Wisconsin Department of Health Services (DHS) implemented a cap on Family Care enrollments. It is anticipated that the cap will result in waiting lists growing and considerable delays in services for individuals with physical and developmental disabilities. DSD is therefore recommending continued funding for certain POS contracts in CY 2012 to support individuals who are not eligible for Family Care due to their financial or functional status. Remaining POS funding in DSD contracted programs will be used to purchase services that are identified as having a high priority in assisting persons with disabilities to achieve their maximum independence.

During CY 2011, the State DHS implemented a new third party administrator payment system for the Children's Long Term Support Medicaid Waiver program. This implementation has shifted the payment processing for services to a third party administrative agency contracted with DHS effectively eliminating the need for DSD to make payments to providers. Therefore, the former purchase of service agreement with a fiscal agent is no longer required.

DSD is therefore recommending the following allocations for the adult and children's POS contracts in 2012. DSD has made it a high priority to maintain the integrity of the existing service delivery system to ensure that a safety net for those who need community-based supports can continue to live independently and not be forced to utilize institutional based services including nursing homes.

The following information highlights the 2012 POS contract recommendations and program changes for DSD by disability and program areas.

Children's Programs

Birth- to-Three/Early Intervention

Milwaukee County DSD will receive $2.7 million in State Birth-To-Three funding for 2012, which is the same as 2011. Referrals to this program continue to increase approximately 13% each year. Contracted agencies that provide these critical services, continue to report increased costs, in part, as a result of the increased number of referrals and children served. The Division will work with State and Federal agencies that fund Birth-To-Three to examine ways of increasing revenue for this critical program. It should be noted that Birth-To-Three contract agencies have continued to accept increasing numbers of referrals while maintaining service levels for children and families in spite of the fiscal challenges and lack of adequate funding often relying on outside fund raising from outside sources to meet the actual costs of serving this population.

Birth-To-Three services continue to be invaluable to families who have a child with a developmental delay. These programs are critical to the identification of early intervention strategies that can assist children to reach their maximum potential and actively participate in their communities.

Wisconsin has a long-standing history and commitment to quality services for young children and their families. Provider agencies are key partners in the process through the delivery of effective early intervention services in partnership with families and Milwaukee County.

The Office of Special Education Programs (OSEP) in the U.S. Department of Education continues to enforce the Individuals with Disabilities Education Act (IDEA) by issuing state-level outcome determinations for Part C, Birth-to-Three Program, and Part B, 3-21 year old Special Education Programs. The determinations are based on 14 federally defined indicators and are required under federal statute as part of ongoing efforts to improve results for children and youth with disabilities. OSEP continues to require states to enforce IDEA by making local determinations annually on the performance of each early intervention program under Part C. States are required to monitor a county's performance on compliance indicators, valid, reliable and timely data, non-compliances, audit and issue status determinations on Federal requirements.

The Milwaukee County DSD Birth-to-Three program has information on the State's Federal indicators as of October 31st for 2010/2011. During 2010 and 2011, Milwaukee County DSD developed and implemented improved data collection and reporting processes and worked closely with providers to monitor and improve compliance of indicators. Milwaukee County has worked in partnership with the State Birth To Three program and local contacted providers to correct previous noncompliant indicator findings. There are still a couple of cases that have been identified as needing assistance. They are 4A, 4C and 7. The State has not issued to Milwaukee County DSD its final report for the period 2010/2011. Preliminarily results of the indicators show continued improvement in several areas where there were issues previously (See Attachment 2).

All Birth-To-Three agencies are projected to exceed their 2011 contract in number of children served and units of service delivered, however, there are significant differences in unit rates by providers for the same service delivered and there are also providers who have expressed concerns relative to these differences. In order to do a comprehensive review of referral patterns, differences in established units of service and performance indicators by agency, the Division is recommending three-month contracts to conduct a more thorough and exhaustive review of these factors and then recommend 2012 allocations for the balance of the year. This will be based on quantitative data and further discussion with the agencies. The allocations will then be able to be more reflective of actual experience, solid year-end data and allow for an appropriate fiscal analysis.

The Division has been working and moving toward performance based contracting based on Federal indicators, review of unit rates and provision of services in the natural environment. However, we do not yet have the data needed to allocate on this basis at this time. This will be a priority in 2012 to move in this direction, especially given the lack of new fiscal resources and the need to maximize available funding. The Division anticipates working collaboratively with contract agencies to ensure a thorough review of program data and a positive outcome for 2012 contract allocations.

The following providers are recommended for new contracts in 2012:

- Bader Association for the Blind and Visually Impaired (Vision Forward Association, Inc.)
- Center for Communication Hearing and Deafness
- Curative Care Network
- Easter Seals
- Lutheran Social Services
- Milwaukee Center for Independence
- Next Door Foundation
- Penfield Children's Center
- St Francis Children's Center

The State DHS Birth-To-Three Program has indicated its intention to apply for a Medicaid Benchmark 1937 Plan that was approved in the State biennial budget. DSD is working with DHS to clarify the timeframes for implementation of the new initiative. The State is hopeful that the new program will assist counties and programs with some additional revenue during 2012. The Birth-To-Three State Plan Amendment (SPA) is intended to assure complete coverage of costs for children with complex needs.

Adult Programs

DSD began Family Care expansion late in 2009 and anticipated a decreased need for program capacity due to the planned elimination of the waiting list for services as well as conversion to Family Care funding of all those individuals who were eligible for the Family Care program. However, as of July 1, 2011, the State DHS capped Family Care to further enrollments which is anticipated to result in longer waiting lists and increased time before long term support services will become available.

All eligible individuals were transferred to Family Care from POS contracts in late 2010 and 2011. The current dollars allocated to these agencies are only for individuals who are not financially and functionally eligible for Family Care. These allocations also consider a slight expansion of service for individuals who may need services and are on the waiting list. All of these agencies are long standing providers who have worked to provide high quality services to consumers. Contracts are either in a two or three year funding cycle as specified below.

The remaining dollars from these contracts will be targeted to the development of new crisis stabilization services to support the relocation efforts of individuals at BHD Hilltop as well as support the long term support system provided by Care Management Organizations in the delivery of services to this highly specialized population.

Therefore, DSD is recommending continued contracts for many services to ensure that support is available to individuals with disabilities in this community.

Work Services

Two agencies are recommended for new contracts in 2012 with allocations that reflect the anticipated number of consumers who will not be eligible for Family Care. Work Services is currently in the second year of a three year RFP cycle and the agencies are as follows:

- Goodwill Industries
- Milwaukee Center for Independence

Employment Options

Three agencies are recommended for new 2012 contracts with allocations that reflect the anticipated number of consumers who will continue to require services. Attrition in this program has continued during 2011 and individuals who converted to Family Care funding reduced the number of persons served. Employment Options is in the second year of a three year RFP approval cycle. The agencies recommended for contracts in 2012 are:

- Milwaukee Center for Independence
- Goodwill Industries, Inc.
- United Cerebral Palsy

Curative Care Network did not submit an application and all remaining consumers served by this program were transitioned to Family Care.

Community Support Living Services

This program area addresses services that complement families as they maintain adult members with disabilities in their homes and communities with emphasis on quality of life through recreational activities, personal safety and support to caregivers from respite services. Also in this area, it is anticipated that continued services for individuals ineligible for Family Care will be needed. The program category is in the second year of a three year RFP approval cycle.

Recreation

Easter Seals has provided recreation services for DSD and is recommended for a new contract in 2012 at the 2011 funding level. This agency provides recreational services to hundreds of children and adults with disabilities at the Wil-O-Way sites in conjunction with the Milwaukee County Office of Persons with Disabilities and at integrated community events and outings. This program area is recommended for funding at the same level, because it is an important service for families who depend on it as respite and consumers who enjoy the opportunity for fun and relaxation with their friends. This service is currently not a covered benefit under the Family Care program.

Respite

United Cerebral Palsy and St. Ann's Intergenerational Center are recommended for new contracts in 2012 at the same funding level as 2011. Respite continues to be in high demand particularly by families. Respite services support both adults and families with children who have disabilities. St. Ann's Intergenerational Center operates a respite service that allows families the opportunity to take one to three day vacations by having available a secure respite home option.

Targeted Case Management

ARC Milwaukee is recommended for a new contract in 2012 at a funding level consistent with anticipated service needs. There had been a decrease in the demand for Targeted Case Management services due to Family Care expansion as individuals were taken off the DSD waitlist. However, this service will continue to be a valuable support for individuals who are financially and functionally ineligible for Family Care.

The Targeted Case Management program currently assists individuals who have complicated community living issues and who lack strong family supports. The service provides professional targeted case management support to individuals who need intermittent or ongoing intervention with a variety of community living challenges such as obtaining benefits, working with utility companies, housing assistance, assistance with health care; and decision-making in typical community, family or relationship experiences. It is anticipated that these activities would be partially offset by T-19 revenue. It should also be noted that services provide support to individuals who also might otherwise be interfacing with the criminal justice system or the Behavioral Health Division.

Assertive Case Management (Intervention)

The Milwaukee Center For Independence is recommended for a new contract in 2012 at the same funding level from 2011. Assertive case management/intervention services provides short and long-term intervention for adults who are experiencing behavioral/mental health challenges in the community. Professional assistance with health care or social programming is available to reduce the risk for an acute admission to the Behavioral Health Division (BHD) or loss of community living residence due to instability. This service currently assists individuals on a monthly basis and is closely linked to community programs, therapies, or counseling services.

Person-Centered Planning Services

Curative Care Network is recommended for a new contract in 2012 at the 2011 funding level. This contract has assisted the Division with crisis situations of individuals and families referred to DSD who face challenges during the year. It also helps families managing difficult situations

and planning for future crisis. They manage between 40 to 50 individuals at any point in time. The program has been an invaluable service to the Disability Resource Center and DSD providing an important function as needs arise for individuals on a temporary basis.

This service will be absorbed by the Disability Resource Center next year as the Division continues to refine and expand its resource center responsibilities and functions.

Advocacy

Four existing agencies are recommended for new 2012 contracts at the same funding level as 2011 for the provision of advocacy service. The agencies include:

- The Epilepsy Foundation of Southeast Wisconsin
- ARC Milwaukee
- Easter Seals
- Alianza Latina Aplicando Soluciones

These agencies will work in conjunction with the DSD Disability Resource Center to identify individuals eligible for Family Care and to fill in the gaps with information and short-term counseling for families until Family Care becomes available. This continued function will help provide supports and referrals to the Disability Resource Center as the DRC begins to implement outreach activities and consider moving these services to the DRC.

Wisconsin Facets is recommended for an increase in 2012 to permit expansion of their work with families who have young adults with disabilities that are making the transition to adult services. The agency will provide additional opportunities for families to participate in person centered planning. This will compliment the DRC efforts to provide youth transition planning to families who have young adults with disabilities.

One new application was received in this program area and is recommended for a new contract in 2012. Hmong/American Friendship Association, Inc. is recommended for a contract to augment the existing service delivery area by providing bilingual advocacy services to individuals and families. This has been an under served population in the disability program area. We believe the addition of this contract will increase the outreach and advocacy efforts in the Hmong community.

Supported Living Options

Five agencies are recommended for new contracts in 2012 for supported living option services. These agencies currently provide vital daily living skills training and community living assistance to individuals with disabilities. The agencies recommended for 2012 contracts are as follows:

- Center for Communication, Hearing & Deafness, Inc. (Adult Day)
- Dungarvin-Wisconsin

- Milwaukee Center for Independence (Supported Parenting)
- Phoenix Care Systems (Bell Therapy)
- United Cerebral Palsy

Disability Resource Center (DRC)

The DRC provides Information and Assistance, Options/Enrollment Counseling to individuals eligible for Family Care including those on the DSD waitlist and Disability Benefits Specialist services. The DRC also acts as the front door to the expanding Family Care program and other long-term managed care options.

Wait List

For several years, DSD has funded a Wait List Initiative providing current information about individuals on the DSD wait list and assess those individuals for continued need of services. DSD has utilized St. Ann Center for Intergenerational Care (SAC) to manage this function. SAC has also provided other services, including access to the Milwaukee Community Services Bank. This agreement has been providing assistance to the DRC with the process of removing individuals from the DSD waitlist by updating information and preparing the cases for the options counseling and enrollment process. This service has also provided critically needed goods and services to help individuals remain independent in the community. It should be noted that SAC has donated these goods and services at no cost to Milwaukee County.

It is recommended that a new 2012 contract be approved for St. Ann Center for Intergenerational to continue this important initiative to provide services to those on the DSD wait list.

Crisis Respite Home

Crisis respite services provide individuals urgent levels of service that exceed the capacity of existing supports available in their current environment. Crisis is defined as a situation requiring the removal of an individual from the current living environment. Examples may include the death of the primary caregiver or the development of physically aggressive behaviors resulting in the individual becoming a danger to self or others. The Crisis Respite Service provides DSD the resources needed to temporarily place an individual in crisis in an environment that is safe, therapeutically appropriate, and cost-effective (relative to institutional placement costs) while DSD staff work to defuse the crisis and arrange for a permanent placement in the least restrictive setting suitable to the individual's long-term needs.

It is required that the Crisis Respite Home be fully accessible. The current provider, Phoenix Care Systems, Inc., respite home is not fully accessible. DSD is recommending a new contract in 2012 for six months to ensure that a fully accessible location is developed. If this is not achieved, the Division will need to seek alternate options. In addition, one new application was

received for Crisis Respite Services from Transitional Living Services but a contract is not being recommended at this time. However, the Division intends to explore other service possibilities to support the hilltop downsizing.

Resource Center Technical and Program Support

As described above, DSD has been working to respond to caps placed on Family Care which were effective July 1, 2011. Key changes have been made to shift the DRC activities toward assisting individuals who are now placed on a growing waiting list for services.

The DRC continues to require support for:

- Enrollment coordination to facilitate the timely enrollment of individuals from the DSD waitlist while maximizing the number of enrollments based on program attrition.
- Financial eligibility determination coordination to ensure that eligibility processing does not delay or prevent timely enrollment into Family Care.
- Support for youths in transition leaving the school system.

It should be noted that the youth transition process development and coordination has been funded by a Medicaid Infrastructure Grant in partnership with DHS and UWM. This funding ended during 2011 and additional funding has not been provided by the State DHS to support this contractually required function. The funding in this area was included in the 2012 adopted DSD budget.

In addition, DSD is working jointly with BHD to initiate a Hilltop Downsizing and will require assistance to provide support to relocation efforts and provider network development. Therefore, a small increase is being recommended to help support the hilltop effort.

Given ARC's experience and past history of providing quality services and assisting with these functions, DSD is recommending a new contract with ARC Milwaukee to provide these critical consulting services.

Recommendation

It is recommended that the County Board of Supervisors authorize the Acting Director, DHHS, or his designee, to enter into 2012 purchase-of-service contracts with community-based provider agencies per the narrative above and in the amounts specified in Attachment 1 and the accompanying resolution.

Fiscal Effect

Funding for these POS contracts includes federal, state and local property tax levy appropriations as approved in the 2012 DHHS adopted budget. There is no additional tax levy impact associated with this request. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

Attachments

cc: Chris Abele, County Executive
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Director, Administrative Services
Pam Bryant, Fiscal & Budget Administrator
Cynthia Pahl, Acting Assistant Fiscal and Budget Administrator
Antionette Thomas-Bailey, DAS Analyst
Jennifer Collins, Analyst – County Board
Jodi Mapp, Committee Clerk – County Board

2012 DHHS-Disabilities Services Division
Contract Allocation Recommendations
by Provider
(Attachment 1)

#	Agency	Disability Area	Service	2011 Allocation	2012 Proposed	Incr.(Decr.)
1	Alianza Latina Apilcando Soluciones	Developmental Disabilities	Advocacy	$30,000	$30,000	$0
2	ARC Milwaukee	Developmental Disabilities	Advocacy	$136,043	$136,043	$0
		Developmental Disabilities	Community Living Support (DRC Implementation)	$178,500	$200,000	$21,500
		Developmental Disabilities	Community Support Living Services (TCM)	$27,123	$17,000	($10,123)
			Total Agency	**$341,666**	**$353,043**	**$11,377**
3	Badger Association of the Blind and Visually Impaired, Inc. (Vision Forward Association, Inc.)	Developmental Disabilities	Early Intervention-Birth to 3	$80,719	$20,180	($60,539)
4	Center for Communication, Hearing & Deafness, Inc.	Developmental Disabilities	Early Intervention-Birth to 3	$79,588	$19,897	($59,691)
		Developmental Disabilities	Supportive Living Options (Adult Day)	$8,342	$8,342	$0
			Total Agency	**$87,930**	**$28,239**	**($59,691)**
5	Creative Employment Opportunities, Inc.	Developmental Disabilities	Employment Options	$13,219	$0	($13,219)
6	Curative Care Network	Developmental Disabilities	Day Services	$18,603	$0	($18,603)
		Developmental Disabilities	Early Intervention-Birth to 3	$1,329,846	$332,462	($997,385)
		Developmental Disabilities	Employment Options	$5,851	$0	($5,851)
		Developmental Disabilities	Community Support Living Services (PCP)	$51,581	$51,581	$0
			Total Agency	**$1,405,881**	**$384,043**	**($1,021,839)**
7	Dungarvin Wisconsin, Inc.	Developmental Disabilities	Supportive Living Options	$92,811	$50,000	($42,811)
8	Easter Seals	Developmental Disabilities	Early Intervention-Birth to 3	$575,401	$143,850	($431,551)
		Developmental Disabilities	Community Support Living Services (Rec)	$85,250	$85,250	$0
		Developmental Disabilities	Advocacy	$10,000	$10,000	$0
			Total Agency	**$670,651**	**$239,100**	**($431,551)**
9	Epilepsy Foundation of Southeast WI	Developmental Disabilities	Advocacy	$20,000	$20,000	$0
10	Goodwill Industries of Southeastern WI	Developmental Disabilities	Work Services	$202,791	$175,000	($27,791)
		Developmental Disabilities	Employment Options	$36,070	$23,000	($13,070)
			Total Agency	**$238,861**	**$198,000**	**($40,861)**
11	Hmong American Friendship Association, Inc.	Developmental Disabilities	Advocacy		$25,000	$25,000
12	Independence First	Disability Resource Center	Disability Benefits Specialist	$186,875	$0	($186,875)
13	Lutheran Social Services	Developmental Disabilities	Early Intervention-Birth to 3	$231,530	$57,883	($173,648)
14	Milwaukee Center for Independence	Developmental Disabilities	Work Services	$101,306	$27,000	($74,306)
		Developmental Disabilities	Early Intervention-Birth to 3	$338,970	$84,743	($254,228)
		Developmental Disabilities	Employment Options	$61,994	$30,000	($31,994)
		Developmental Disabilities	Community Support Living Services (ACI)	$26,338	$26,338	$0
		Developmental Disabilities	Supportive Living Options (Supported Parenting)	$139,740	$76,000	($63,740)
			Total Agency	**$668,348**	**$244,081**	**($424,268)**

2012 DHHS-Disabilities Services Division
Contract Allocation Recommendations
by Provider
(Attachment 1)

#	Agency	Disability Area	Service	2011 Allocation	2012 Proposed	Incr.(Decr.)
15	**Mt. Tharps & Associates**[1]	Physical Disabilities	Fiscal Agent Services - CLTS	$423,000	$0	($423,000)
			Fiscal Agent Services - Birth to 3 ARRA	$328,350	$0	($328,350)
			Total Agency	**$751,350**	**$0**	**($751,350)**
16	**Next Door Foundation**	Developmental Disabilities	Early Intervention-Birth to 3	$142,779	$35,695	($107,084)
17	**Penfield Children's Center**	Developmental Disabilities	Early Intervention-Birth to 3	$1,125,597	$281,399	($844,198)
18	**Phoenix Care Systems, Inc. (Bell Therapy)** [2]	Developmental Disabilities	Supportive Living Options	$10,000	$10,000	$0
		Developmental Disabilities	Community and Crisis Residential	$250,000	$125,000	($125,000)
			Total Agency	**$260,000**	**$135,000**	**($125,000)**
19	**St. Ann's Center for Intergenerational Care**	Resource Center	Wait List Initiative	$45,000	$45,000	$0
		Developmental Disabilities	Community Living Support Services (Respite Care)	$32,489	$32,489	$0
			Total Agency	**$77,489**	**$77,489**	**$0**
20	**St. Francis Children's Center**	Developmental Disabilities	Early Intervention-Birth to 3	$430,169	$107,542	($322,627)
21	**United Cerebral Palsy of Southeastern WI**	Developmental Disabilities	Employment Options	$14,235	$14,235	$0
		Developmental Disabilities	Community Support Living Services (Respite Care)	$311,095	$311,095	$0
		Developmental Disabilities	Supportive Living Options	$75,667	$75,667	$0
			Total Agency	**$400,997**	**$400,997**	**$0**
22	**WI Facets**	Developmental Disabilities	Advocacy	$20,000	$30,000	$10,000
						$0
			TOTALS:	**$7,276,872**	**$2,717,691**	**($4,559,181)**

[1] The $751,350 reduction represents the elimination of the Fiscal Agent as noted in the report as well as the absence of ARRA funding during 2012. This reduction does not represent additional available funding.

[2] Phoenix Care Systems reduction of $125,000 is due to a six-month allocation as noted in the report.

2012 DHHS-Disabilities Services Division
Contract Allocation Recommendations
by Service
(Attachment 1a)

Agency	Disability Area	Service	2011 Allocation	2012 Proposed	Incr.(Decr.)
Badger Association of the Blind and Visually Impaired, Inc. (Vision Forward Association, Inc.)	Developmental Disabilities	Early Intervention-Birth to 3	$80,719	$20,180	($60,539)
Center for Communication, Hearing & Deafness, Inc.	Developmental Disabilities	Early Intervention-Birth to 3	$79,588	$19,897	($59,691)
Curative Care Network	Developmental Disabilities	Early Intervention-Birth to 3	$1,329,846	$332,462	($997,385)
Easter Seals	Developmental Disabilities	Early Intervention-Birth to 3	$575,401	$143,850	($431,551)
Lutheran Social Services	Developmental Disabilities	Early Intervention-Birth to 3	$231,530	$57,883	($173,648)
Milwaukee Center for Independence	Developmental Disabilities	Early Intervention-Birth to 3	$338,970	$84,743	($254,228)
Next Door Foundation	Developmental Disabilities	Early Intervention-Birth to 3	$142,779	$35,695	($107,084)
Penfield Children's Center	Developmental Disabilities	Early Intervention-Birth to 3	$1,125,597	$281,399	($844,198)
St. Francis Children's Center	Developmental Disabilities	Early Intervention-Birth to 3	$430,169	$107,542	($322,627)
		Subtotal Early Intervention-Birth to 3	**$4,334,599**	**$1,083,650**	**($3,250,949)**
Goodwill Industries of Southeastern WI	Developmental Disabilities	Work Services	$202,791	$175,000	($27,791)
Milwaukee Center for Independence	Developmental Disabilities	Work Services	$101,306	$27,000	($74,306)
		Subtotal Work Services	**$304,097**	**$202,000**	**($102,097)**
Creative Employment Opportunities, Inc.	Developmental Disabilities	Employment Options	$13,219	$0	($13,219)
Curative Care Network	Developmental Disabilities	Employment Options	$5,851	$0	($5,851)
Goodwill Industries of Southeastern Wisconsin	Developmental Disabilities	Employment Options	$36,070	$23,000	($13,070)
Milwaukee Center for Independence	Developmental Disabilities	Employment Options	$61,994	$30,000	($31,994)
United Cerebral Palsy of Southeastern WI	Developmental Disabilities	Employment Options	$14,235	$14,235	$0
		Subtotal Employment Options	**$131,369**	**$67,235**	**($64,134)**
St. Ann's Center for Intergenerational Care	Developmental Disabilities	Community Living Support Services (Respite Care)	$32,489	$32,489	$0
Milwaukee Center for Independence	Developmental Disabilities	Community Support Living Services (ACI)	$26,338	$26,338	$0
Curative Care Network	Developmental Disabilities	Community Support Living Services (PCP)	$51,581	$51,581	$0
Easter Seals	Developmental Disabilities	Community Support Living Services (Rec)	$85,250	$85,250	$0
United Cerebral Palsy of Southeastern WI	Developmental Disabilities	Community Support Living Services (Respite Care)	$311,095	$311,095	$0
ARC Milwaukee	Developmental Disabilities	Community Support Living Services (TCM)	$27,123	$17,000	($10,123)
		Subtotal Community Support Living Svs	**$533,876**	**$523,753**	**($10,123)**
Alianza Latina Apilcando Soluciones	Developmental Disabilities	Advocacy	$30,000	$30,000	$0

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2012 DHHS-Disabilities Services Division
Contract Allocation Recommendations
by Service
(Attachment 1a)

Agency	Disability Area	Service	2011 Allocation	2012 Proposed	Incr.(Decr.)
ARC Milwaukee	Developmental Disabilities	Advocacy	$136,043	$136,043	$0
Easter Seals	Developmental Disabilities	Advocacy	$10,000	$10,000	$0
Epilepsy Foundation of Southeast WI	Developmental Disabilities	Advocacy	$20,000	$20,000	$0
Hmong American Friendship Association, Inc.	Developmental Disabilities	Advocacy		$25,000	$25,000
WI Facets	Developmental Disabilities	Advocacy	$20,000	$30,000	$10,000
		Subtotal Advocacy	**$216,043**	**$251,043**	**$35,000**
Dungarvin Wisconsin, Inc.	Developmental Disabilities	Supportive Living Options	$92,811	$50,000	($42,811)
Phoenix Care Systems, Inc. (Bell Therapy) [2]	Developmental Disabilities	Supportive Living Options	$10,000	$10,000	$0
United Cerebral Palsy of Southeastern WI	Developmental Disabilities	Supportive Living Options	$75,667	$75,667	$0
Center for Communication, Hearing & Deafness, Inc.	Developmental Disabilities	Supportive Living Options (Adult Day)	$8,342	$8,342	$0
Milwaukee Center for Independence	Developmental Disabilities	Supportive Living Options (Supported Parenting)	$139,740	$76,000	($63,740)
		Subtotal Supportive Living Options	**$326,560**	**$220,009**	**($106,551)**
St. Ann's Center for Intergenerational Care	Resource Center	Wait List Initiative	$45,000	$45,000	$0
Phoenix Care Systems, Inc., (Bell Therapy)	Developmental Disabilities	Community and Crisis Residential	$250,000	$125,000	($125,000)
ARC Milwaukee	Developmental Disabilities	Community Living Support (DRC Implementation)	$178,500	$200,000	$21,500
Curative Care Network	Developmental Disabilities	Day Services	$18,603	$0	($18,603)
Independence First	Disability Resource Center	Disability Benefits Specialist	$186,875	$0	($186,875)
ML Tharps & Associates[2]	Developmental Disabilities	Fiscal Agent Services - Birth to 3 ARRA	$328,350	$0	($328,350)
ML Tharps & Associates[1]	Physical Disabilities	Fiscal Agent Services - CLTS	$423,000	$0	($423,000)
		Subtotal	**$1,430,328**	**$370,000**	**($1,060,328)**
		TOTALS:	**$7,276,872**	**$2,717,691**	**($4,559,181)**

Disabilities Services Division
Birth To Three
Federal Indicator Summary

	Monitoring Priorities and Indicators	Criteria	Data Used	Indicator Determination	State Target	State Result	County Result 2010/2011
1.	Percent of infants and toddlers with IFSP's who receive the early intervention services on their IFSP's in a timely manner. [Compliance Indicator]	Meets Requirements (4) 95% - 100% of children had a transition conference, if child potentially eligible for Part B Needs Assistance (3) 75%-95% of children had a transition conference, if child potentially eligible for Part B Needs Intervention (2) 51%-75% of children had a transition conference, if child potentially eligible for Part B Needs Substantial Intervention (1) Below 51% of children had a transition conference, if child potentially eligible for Part B	Program Participation System (PPS)	Meets Requirements	100%		97.45%
2.	Percent of infants and toddlers with IFSP's who primarily receive early intervention services in the home or programs for typically developing children.	Meets Requirements (4) 95%-100% of children received services in natural environments Needs Assistance (3) 75%-95% of children received services in natural environments Needs Intervention (2) 51%-75% of children received services in natural environments Needs Substantial Intervention (1) Below 51% of children received services in natural environments	Program Participation System (PPS)	Meets Requirements	95.68%	95.10%	99.63*

Disabilities Services Division
Birth To Three
Federal Indicator Summary

	Monitoring Priorities and Indicators	Criteria	Data Used	Indicator Determination	State Target	State Result	County Result 2010/2011
4.	Percent of families participating in Part C who report that early intervention services have helped the family: A. Know their rights; C. Help their children develop and learn. [Results Indicator]	Meets Requirements (4) 95% - 100% of children had a transition conference, if child potentially eligible for Part B Needs Assistance (3) 75%-95% of children had a transition conference, if child potentially eligible for Part B Needs Intervention (2) 51%-75% of children had a transition conference, if child potentially eligible for Part B Needs Substantial Intervention (1) Below 51% of children had a transition conference, if child potentially eligible for Part B	Program Participation System (PPS)	Needs Assistance Needs Assistance	85% 92%	Unknown Unknown	84.63% 85.18%
7.	Percent of eligible infants and toddlers with IFSP's for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. [Compliance Indicator]	Meets Requirements (4) 95%-100% occurred within 45 days Needs Assistance (3) 75-95% occurred within 45 days Needs Intervention (2) 51-75% occurred within 45 days Needs Substantial Intervention (1) Below 51% occurred in 45 days	Program Participation System (PPS)	Needs Assistance	100%	74.60%	91.69%

	Monitoring Priorities and Indicators	Criteria	Data Used	Indicator Determination	State Target	State Result	County Result 2010/2011
8a.	Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including IFSP's with transition steps and services [Compliance Indicator]	Meets Requirements (4) 95% - 100% of children had a transition conference, if child potentially eligible for Part B Needs Assistance (3) 75%-95% of children had a transition conference, if child potentially eligible for Part B Needs Intervention (2) 51%-75% of children had a transition conference, if child potentially eligible for Part B Needs Substantial Intervention (1) Below 51% of children had a transition conference, if child potentially eligible for Part B	Program Participation System (PPS)	Meets Requirements	100%	Unknown	99.35%
8b.	Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community service by their third birthday including: Notification to LEA, if child potentially eligible for Part B.	Meets Requirements (4) 95% - 100% of children had a transition conference, if child potentially eligible for Part B Needs Assistance (3) 75%-95% of children had a transition conference, if child potentially eligible for Part B Needs Intervention (2) 51%-75% of children had a transition conference, if child potentially eligible for Part B Needs Substantial Intervention (1) Below 51% of children had a transition conference, if child potentially eligible for Part B	Program Participation System (PPS)	Meets Requirements	100%		98.68%

Disabilities Services Division
Birth To Three
Federal Indicator Summary

	Monitoring Priorities and Indicators	Criteria	Data Used	Indicator Determination	State Target	State Result	County Result 2010/2011
8C.	Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: Transition conference, if child potentially eligible for Part B. [Compliance Indicator]	Meets Requirements (4) 95% - 100% of children had a transition conference, if child potentially eligible for Part B Needs Assistance (3) 75%-95% of children had a transition conference, if child potentially eligible for Part B Needs Intervention (2) 51%-75% of children had a transition conference, if child potentially eligible for Needs Substantial Intervention (1) Below 51% of children had a transition conference, if child potentially eligible for Part B	Program Participation System (PPS)	Meets Requirements	100%	66.19%	95.50%

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Disabilities Services Division purchase of service contracts for the Disability Resource Center, Children's Programs and Adults with Disabilities, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 46.09 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into 2012 purchase of service contracts with community agencies for the Disabilities Services Division (DSD); and

WHEREAS, approval of the recommended contract allocations will allow DSD to provide a broad range of rehabilitation/treatment and support services to children and adults with disabilities in Milwaukee County in 2012; and

WHEREAS, the 2012 Adopted Budget for the DHHS DSD includes sufficient funding for the recommended allocations; now, therefore,

BE IT RESOLVED, that the Milwaukee County Board of Supervisors does hereby authorize and direct the Acting Director of the Department of Health and Human Services, or his designee, to enter into DSD purchase of service contracts for the period of January 1 through December 31, 2012, or as otherwise indicated in the report, with the agencies and in the amounts listed below:

	AGENCY	2012 PROPOSED CONTRACT
1	Alianza Latina Aplicando Soluciones	$30,000
2	ARC – Milwaukee	$353,043
3	Badger Association for Blind & Visually Impaired, Inc.	$20,180
4	Center for Communication, Hearing & Deafness, Inc.	$28,239
5	Curative Care Network	$384,043
6	Dungarvin, Inc.	$50,000
7	Easter Seals	$239,100
8	Epilepsy Foundation of Southeastern Wisconsin	$20,000
9	Goodwill Industries of Southeastern Wisconsin	$198,000
10	Hmong American Friendship Association	$25,000
11	Lutheran Social Services	$57,883
12	Milwaukee Center for Independence	$244,081
13	Next Door Foundation	$35,695
14	Penfield Children's Center	$281,399
15	Phoenix Care Systems, Inc. (Bell Therapy)	$135,000

16	St. Ann's Center for Intergenerational Care	$77,489
17	St. Francis CAAC	$107,542
18	United Cerebral Palsy	$400,997
19	WI Facets	$30,000
	Total	**$2,717,691**

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MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 12/1/2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Disabilities Services Division purchase of service contracts for the Disability Resource Center, Children's Programs and Adults with Disabilities.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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	0	0
	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 Acting Director of the Department of Health and Human Services (DHHS) requests authorization to execute purchase of service contracts with a variety of community vendors for the provision of services to persons with disabilities and others with special needs within the DHHS-Disabilities Services Division (DSD).

B. Approval of this request will result in an expenditure of $2,717,691 for calendar year 2012. This reflects a reduction of $4,559,181 compared to the amount allocated for purchase of service contracts in 2011. This reduction is largely the result of reducing the Birth to 3 contracts by $3.2 million or 25 percent of their 2011 contract amounts. The remaining $1.3 million of the total $4.5 million reduction relates to the elimination of $751,000 for fiscal agent services for the Children's Long Term Support (CLTS) program, a $125,000 cut to the Phoenix Care Systems contract to reflect a six-month contract, and a $432,000 reduction in various contracts to reflect actual experience.

C. The 2012 Budget reflects a total appropriation of $6,465,141 (orgs 8381 and 8383 and account 8164), which is sufficient to cover the proposed expenditure of $2,717,691.

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 Clare O'Brien, Budget Analyst, DHHS

Authorized Signature

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

COUNTY OF MILWAUKEE
Inter-Office Communication

DATE: November 17, 2011

TO: County Executive Chris Abele
Milwaukee County Board Chairperson, Lee Holloway
Supervisor Johnny Thomas, Chairperson, Committee on Finance and Audit
Patrick Farley, Director, Department of Administrative Services

FROM: Héctor Colón, Acting Director, Department of Health and Human Services

SUBJECT: **Notification from the Acting Director, Department of Health and Human Services, Regarding a Potential Youth Aids Revenue Shortfall in the 2012 Budget**

Issue:

Milwaukee County Ordinance 56.02 requires department heads to submit written notification to the County Executive, Finance and Audit Committee, and the Department of Administrative Services when potential revenue deficits of $75,000 or more are identified.

Background

Under State statutes, counties are responsible for the cost of supervision and treatment for juveniles adjudicated for delinquent behavior. The State's policy is intended to encourage counties to provide a continuum of services appropriate for the level and frequency of delinquent behavior. Disposition alternatives available to judges range from probation supervision to other, more intensive community-based treatments, and finally, the option of placement into State custody in secure correctional facilities. The State assists counties to pay for juvenile delinquency services by providing funding under the "Youth Aids" program.

In order to create incentives for counties to emphasize community-based supervision, State statutes require counties to pay the State for the cost of juveniles placed into State custody at rates set by law. Accordingly, if state placements and costs decrease, the Youth Aids revenue remaining to support community-based services would increase. Since the State pays itself first from a county's Youth Aids allocation, decreased State charges result in a surplus in Youth Aids revenue in the Department of Health and Human Services (DHHS) compared to the budget.

Discussion

While no official correspondence has been received to date, DHHS has learned through a conference call with State officials that the 2011-13 State Budget called for the Executive Branch to implement additional, unspecified expenditure reductions in the amount of $174

million during the biennium in order to keep the State budget in balance. Since the State budget was adopted in July 2011, actual State revenue receipts have been lower than anticipated resulting in additional expenditure reductions bringing the total State unspecified expenditure reductions to $300 million.

The State Department of Corrections share of this $300 million reduction is approximately $15 million, with $7.3 million of this reduction coming in the form of a further 2012 cut to Youth Aids. Based on DHHS calculations using existing formulas from the State for Youth Aids revenue, the anticipated impact to Milwaukee County is $2.7 million. This amount is subject to change based on final notification from the State.

Youth Aids revenue is a direct result of the Average Daily Population (ADP) of Milwaukee County juveniles in State Juvenile Correctional Institutions (JCI's). Based on the information we have, various assumptions of ADP and the time frame used for Youth Aids projections, DHHS is projecting that the overall Milwaukee County share of this cut will result in a tax levy deficit for the department ranging between $1 million and $2.7 million for 2012.

Recommendation

In consideration of the potential deficit, DHHS has taken a very thoughtful and prospective approach to contract recommendations and allocations in 2012 that would best position the Department to respond to emerging challenges and the pending revenue reductions. In addition to proposing some immediate allocation reductions based on current service utilization trends, the Department is proposing contracts for time frames that are less than the typical one-year contracts for the majority of expense-based contracts. In addition to this strategy, DHHS-wide strategies to offset the anticipated revenue reductions will be considered including the use of 2011 surplus funds, should such funds materialize.

DHHS will inform the County Executive and County Board as soon as notification is received from the State and will continue to monitor the situation.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: Supervisor Peggy Romo West, Chairperson, Health and Human Needs Committee
George Aldrich, Chief of Staff, County Executive's Office
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Pamela Bryant, Fiscal and Budget Administrator – DAS
Steve Cady, County Board Staff

COUNTY OF MILWAUKEE
Delinquency and Court Services Division (DHHS)
INTER-OFFICE COMMUNICATION

DATE: November 18, 2011

TO: Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
(Prepared by Eric Meaux, Administrator/ Chief Intake Officer – DCSD)

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Professional Services Contracts for programs and services within the Delinquency and Court Services Division.**

Issue

In accordance with section 56.30 of the County Ordinances the Acting Director of the Department of Health and Human Services (DHHS) is requesting approval to enter into various professional service contracts for the Delinquency and Court Services Division (DCSD) for 2012.

Background

Since 1970, DHHS has supported a social service delivery system comprised of both directly provided and purchased services. Partnerships with community vendors have allowed DHHS to cooperate and collaborate with various community partners and resources. These partnerships further the opportunities for community participation regarding delinquency response.

The top priority for the juvenile justice system and partnering youth serving systems is stopping repeat offenses and reducing crime. Police referrals to the Children's Court have decreased by 50% over the past 10 years. Further, the number of youth that are referred to the Children's Court for multiple repeat offenses has decreased by over 6% in the past 4 years. These positive trends are in part due to the partnerships developed over the years involving community providers and the continuously evolving "systems of care" model.

In addition to Section 56.30 of the County Ordinances, the Department conforms to the DHHS request for proposal (RFP) process to ensure objectivity and fairness in the awarding of professional service contracts. Using authority granted by the County Board, DCSD has contracts that allow for second and third-year contracts without a Request for Proposals based on an agency's performance during the previous year.

Discussion

In consideration of the proposed contracts below, the Department was notified by the State Department of Corrections that further reductions were imminent for 2012 beyond the $3.6

million cut in Youth Aids and the estimated $1 million in deficit reduction surcharge contained in the 2011-2013 State Budget. State-wide Youth Aids reductions are estimated to reach 15 – 19% based on information learned from the Department of Corrections.

In this context, the Department has taken a very thoughtful and prospective approach to contract recommendations and allocations in 2012 that would best position the Department to respond to emerging challenges and the pending revenue reductions. In addition to proposing some immediate allocation reductions based on current service utilization trends, the Department is proposing six-month contracts at a commensurate pro-rated amount for the majority of expense-based contracts. This will position the Department to address the revenue reductions from the Department of Corrections and alerts service providers that further contract adjustments may become necessary as a result of the State actions. In addition to this, Department-wide strategies to offset the anticipated revenue reductions will be considered including the use of 2011 surplus funds should such funds materialize.

Detention Physician and Medical Services

A request for proposal was issued in 2011 for this service. The Medical College of Wisconsin (MCW) was the only applicant. MCW has been responsible for medically screening all adolescents housed in the secure detention center facility. Health physicals are also given to youth that remain in detention for more than 24 hours, along with any necessary follow-up care. This contract provides 29 hours of coverage per week (Monday through Friday), consisting of 24 hours of coverage by a nurse practitioner, and five hours of coverage by a physician. MCW has previously provided these services utilizing a certified Disadvantage Business Enterprise (DBE) subcontractor to meet the DBE program goals. MCW has exceeded the DBE goal in the past and anticipates the same for 2012.

The Department would like to purchase these services from the Medical College of Wisconsin in the amount of $71,530 for the period of 1/1/2012 – 6/30/2012. This is a pro-rated amount that includes a $1,949 increase compared to the 2011 pro-rated amount.

Detention Psychiatric Nursing Services

A request for proposal was issued in 2011 for this service. Alternatives in Psychological Consultation (APC) was the only applicant. APC has been responsible for the provision of 80 hours of coverage per week (Monday through Sunday), consisting of psychiatric nursing services, mental health screenings and follow-up services as necessary. APC has previously provided these services utilizing a certified subcontractor to meet the DBE program goals. In January 2011, APC received notice from the only listed DBE provider that they no longer desired to continue as a DBE subcontractor under this contract. APC provided documented correspondence with the CBDP office regarding good faith efforts to include a DBE provider both in 2011 and prospectively in 2012. As of this report, APC is able to provide DBE participation in the amount of 1% of the contract for other in-direct support services and will continue to work with the CBDP office to include further DBE participation as such provider becomes available.

The Department would like to purchase these services from the Alternatives in Psychological Consultation (APC) in the amount of $79,548 for the period of 1/1/2012 – 6/30/2012. This is a pro-rated amount that is the same as the pro-rated amount in 2011.

Safe Alternatives for Youth

The 2012 Budget includes an allocation of $100,000 to support the Safe Alternatives for Youth program with fiscal agent and administrative services to be provided by the Milwaukee Urban League. The contract limits the allowable fiscal agent and administrative costs to $8,000. The Department is in the process of requesting a waiver of the DBE goal as has been granted in previous years.

Youth Sports Authority

The 2012 Budget includes an allocation of $100,000 to support the Youth Sports Authority (YSA) program. Fiscal agent and administrative services are currently provided by Jewish Family Services. The current contract limits the allowable fiscal agent and administrative costs to $8,000.

As reported in the September 2011 board report detailing the 2011 Fall award allocations recommended by the YSA Board, the fiscal agent and administrative services have been provided by a number of agencies over the years as a result of either voluntary stoppage or agency merger. The table below is the history.

Year	Fiscal Agent	Year	Fiscal Agent
2000	Milwaukee Foundation	2006	Planning Council
2001	Milwaukee Foundation	2007	Planning Council
2002	Milwaukee Foundation	2008	Planning Council
2003	Planning Council	2009	Fighting Back
2004	Planning Council	2010	Jewish Family Services
2005	Planning Council	2011	Jewish Family Services

Given the reasonable allowable fiscal agent and administrative costs contained in the current and proposed contract, past funding uncertainty, and to ensure continuity and timeliness of Spring activities, the Department is recommending waiver of Section 56.30 of the County Ordinances that would normally require the solicitation for RFPs. The Department is in the process of requesting a waiver of the DBE goal as has been granted in previous years.

The Department would like to purchase these services from Jewish Family Services in the amount of $50,000 for the period of 1/1/2012 – 6/30/2012. The fiscal agent and administrative cost limit would be pro-rated to an amount not to exceed $4,000. This is a pro-rated amount that is the same as the pro-rated amount in 2011.

Targeted Reentry

In August 2009, the Division applied for and subsequently received competitive grant funds offered by the Wisconsin Office of Justice Assistance (OJA) to develop and implement strategies that address issues of Disproportionate Minority Contact (DMC) within the juvenile justice system. As part of that funding, OJA allowed a portion of the funds to be used to support the Boys and Girls Club (BGC) – Targeted Reentry Program that operated out of the now closed Ethan Allen School for Boys since 2004. In July 2011, the Department sought and received approval from OJA to allow the funded program to relocate locally to the County funded FOCUS delinquency program to enhance reentry services.

As requested and approved in the December 2010 board report, the Department was authorized to waive Section 56.30 of the County Ordinances that would normally require the solicitation for request for proposals since BGC was the only provider of said service and the contract was solely supported by grant revenue approved by OJA for the specific service. The Department is in the process of seeking a waiver of the DBE goal as has been granted in previous years.

The Department is recommending that Boys and Girls Club of Greater Milwaukee receive a contract in the amount of $53,088 for the period of 1/1/2012 – 9/30/2012 to support the Targeted Reentry program contingent upon the continued availability of $53,088 in OJA grant revenue. The Department has received notice that the funding has been approved.

Recommendation

It is recommended that the County Board of Supervisors authorize the Acting Director of DHHS, or his designee, to enter into 2012 professional service contracts with the following provider agencies for the designated periods and contingencies:

Provider	Amount	Notes or Contingencies	Period
Medical College of Wisconsin	$ 71,530	Youth Aids may not support Detention Center operations.	1/1/2012 – 6/30/2012
Alternatives in Psychological Consultation	$ 79,548	Youth Aids may not support Detention Center operations.	1/1/2012 – 6/30/2012
Milwaukee Urban League	$ 100,000	Availability of Potawatomi revenue.	1/1/2012 - 12/31/2012
Jewish Family Services	$ 50,000	Pro-rated amount and fiscal agent limit adjusted to $4,000.	1/1/2012 – 6/30/2012
Boys and Girls Club of Greater Milwaukee	$ 53,088	Availability of $53,088 in OJA grant revenue.	1/1/2012 – 9/30/2012

Fiscal Impact

Sufficient funds have been allocated in the 2012 Budget to cover the proposed professional service contracts. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive Staff
Terry Cooley, County Board Chief of Staff
Patrick Farley, Administrator - DAS
Pamela Bryant, Fiscal and Budget Administrator - DAS
CJ Pahl, Assistant Fiscal and Budget Administrator - DAS
Antoinette Thomas-Bailey, Fiscal & Management Analyst - DAS
Jennifer Collins, Analyst, County Board Staff
Honorable Marshall Murray, Children's Court Judge Presiding

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Delinquency and Court Services Division professional service contracts with community vendors for Delinquency and Court Services programs, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 56.30 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) has requested authorization to enter into 2012 professional service contracts for the Delinquency and Court Services Division (DCSD); and

WHEREAS, in the past several years, DCSD has entered into a series of professional service contracts to support essential staff activities and functions; and

WHEREAS, the DCSD is responsible for providing for the care and safety of youth placed in the County Detention facility; and

WHEREAS, in accordance with Milwaukee County's Request for Proposals process, the providers, Medical College of Wisconsin and Alternatives in Psychological Consultation, are being recommended to provide their respective services during 2012; and

WHEREAS, DCSD is recommending a contract in the amount of $71,530 to Medical College of Wisconsin for the provision of medical services, and is recommending a contract in the amount of $79,548 to Alternatives in Psychological Consultation for the provision of mental health services for the period January 1 through June 30, 2012; and

WHEREAS, the 2012 DCSD Budget contains funding for the Safe Alternatives for Youth program in the amount of $100,000 and limits the amount of allowable administrative costs to not exceed $8,000 period January 1 through December 31, 2012; and

WHEREAS, the County Board has identified the Milwaukee Urban League to be the administrator of such program; and

WHEREAS, DCSD is recommending a contract in the amount of $50,000 for Youth Sports Authority program and limits the amount of allowable administrative costs to $4,000 for the period January 1 through June 30, 2012; and

WHEREAS, the County Board has identified Jewish Family Services to be the administrator of such program; and

WHEREAS, the 2012 DCSD Budget contains funding for the Targeted Reentry program in the amount of $53,088 contingent upon the continued availability of $53,088 in Wisconsin Office of Justice Assistance (OJA) grant revenue; and

WHEREAS, DCSD is recommending that the Boys and Girls Club of Greater Milwaukee be the administrator of such program; now, therefore,

BE IT RESOLVED, that the Acting Director, Department of Health and Human Services, or their designee, is hereby authorized to enter into professional service contracts for the period January 1 through June 30, 2012 (unless otherwise specified) in the amounts listed and under the terms stated below:

PROVIDER	**SERVICE/ PROGRAM**	**AMOUNT**
Medical College of Wisconsin	Medical and Nursing	$ 71,530
Alternatives in Psychological Consultation	Mental Health	$ 79,548
Milwaukee Urban League	Safe Alternatives for Youth (1/1/12 to 12/31/12)	$100,000
Jewish Family Services	Youth Sports Authority	$ 50,000
Boys and Girls Club of Greater Milwaukee	Targeted Re-entry (1/1/12 to 9/30/12)	$ 53,088
TOTAL 2012 Professional Service Contracts for DCSD:		**$354,166**

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/17/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Professional Services Contracts for programs and services within the Delinquency and Court Services Division.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

A. The Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to execute 2012 Delinquency and Court Services Division (DCSD) Professional Service contracts.

Approval of this request will allow then Acting Director of DHHS to execute Professional Service contracts for Detention Center Medical and Mental Health Services to ensure necessary care and safety, and provide support for the Youth Sports Authority for the period January 1, 2012 through June 30, 2012. The Department intends to seek some extensions of these six-month contracts in Spring 2012, once the extent of further cuts by the State to Youth Aids becomes clear and based on the fiscal impact of that State reduction.

Approval of this request will also allow the Acting Director of DHHS to execute a Professional Service contract to provide support for the Safe Alternatives for Youth for the period January 1, 2012 through December 31, 2012 and for the Targeted Re-entry program for the period January 1, 2012 through September 30, 2012, contingent upon the continued availability of OJA grant revenue.

B. Total 2012 expenditures included in this request are $354,166.

C. There is no tax levy impact associated with approval of this request in 2012 as funds sufficient to cover associated expenditures are included as part of DCSD's 2012 Budget Funding for the Targeted Re-entry program is contingent upon the continued availability of $53,088 in Wisconsin Office of Justice Assistance (OJA) grant revenue.

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 Thomas F. Lewandowski, Fiscal & Management Analyst

Authorized Signature

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

COUNTY OF MILWAUKEE
Delinquency and Court Services Division (DHHS)
INTER-OFFICE COMMUNICATION

DATE: November 14, 2011

TO: Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by Eric Meaux, Administrator/ Chief Intake Officer – DCSD

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Purchase of Service Contracts for programs within the Delinquency and Court Services Division.**

Issue

In accordance with section 46.09 of the County Ordinances the Acting Director of the Department of Health and Human Services (DHHS) is requesting approval to enter into various 2012 purchase of service contracts for the Delinquency and Court Services Division (DCSD).

Background

Since 1970, DHHS has supported a social service delivery system comprised of both directly provided and purchased services using a combination of State, grant, and local tax funds. Partnerships with community providers have allowed DHHS to cooperate and collaborate with various community agencies and resources. These partnerships further the opportunities for community participation and leverage resources and or community expertise regarding our community response to delinquency.

The top priority for the juvenile justice system and partnering youth serving systems is stopping repeat offenses and reducing crime. Police referrals to the Children's Court have decreased by 50% over the past ten years. Further, the number of youth that are referred to the Children's Court for multiple repeat offenses has decreased by over 6% in the past four years. These positive trends are in part due to the partnerships developed over the years involving community providers and the continuously evolving "systems of care" model.

In addition to Section 46.09 of the County Ordinances, the Department conforms to the DHHS request for proposal (RFP) process to ensure objectivity and fairness in the awarding of purchase of service contracts. The Department relies on these objective reviews by community panels and DHHS contract administration/ quality assurance to guide award recommendations. In addition to the DHHS panel scoring process, the Department may consider other salient factors in order to best meet the needs of the juvenile court and youth served including the financial stability of applicants to ensure the continuity of services, the minimization of service disruption, provider alignment with emerging strategies or changing system demands, opportunities for further resource leveraging and information sharing, and maximization of

resources.

Using authority granted by the County Board, DCSD has contracts that allow for second and third-year contracts without a Request for Proposals based on an agency's performance during the previous year.

Discussion

In consideration of the proposed contracts below, the Department was notified by the State Department of Corrections that further reductions were imminent for 2012 beyond the $3.6 million cut in Youth Aids and the estimated $1 million in deficit reduction surcharge contained in the 2011-2013 State Budget. Statewide Youth Aids reductions are estimated to reach 15 – 19% based on information learned from the Department of Corrections.

In this context, the Department has taken a very thoughtful and prospective approach to contract recommendations and allocations in 2012 that would best position the Department to respond to emerging challenges and the pending revenue reductions. In addition to proposing some immediate allocation reductions based on current service utilization trends, the Department is proposing 6-month contracts at a commensurate pro-rated amount for the majority of expense-based contracts. This will position the Department to address the revenue reductions from the Department of Corrections and alerts service providers that further contract adjustments may become necessary as a result of the State actions. In addition to this, Department-wide strategies to offset the anticipated revenue reductions will be considered including the use of 2011 surplus funds should such funds materialize.

The contracts allowing for second and third-year contracts are presented first followed by those for which the Department solicited requests for proposals.

For 2012, the Department is requesting approval to purchase services with the providers listed below for the identified service/ program, contract amounts and time period. Where applicable, an explanation as to any increase or decrease in the proposed amount is provided. All providers were previously awarded the listed program areas contracts in either 2010 or 2011 as part of a three-year contract cycle process.

Service	Provider	2012 Proposed Allocation and Term
Re-entry Coordination Services	St. Charles Youth and Family Services	$45,000 for the period of 1/1/2012-6/30/2012. This is a pro-rated $60,000 decrease from 2011 due to a shift from sole contract provided to shared responsibility with County personnel.

Adolescent Sex Offender Treatment Program	Pathfinders	$11,243 for the period of 1/1/2012 – 1/31/2012. This is a $123,669 decrease from 2011 to accommodate a shift from expense base to fee-for-service purchase utilizing existing network of service providers. Actual utilization over the past two years has been below 50%, which is consistent with sex offense referral trends. Estimated $75,000 net savings.
Level 2 In-Home Monitoring Services	Southwest Key Programs	$332,345 for the period of 1/1/2012 – 6/30/2012. This is same pro-rated amount as 2011 pro-rated amount.
Level 2 In-Home Monitoring Services	St. Charles Youth and Family Services	$240,373 for the period of 1/1/2012 – 6/30/2012. This is same pro-rated amount as 2011 pro-rated amount.
Targeted Monitoring Program	Running Rebels Community Organization	$762,972 for the period of 1/1/2012 – 6/30/2012. This is same pro-rated amount as 2011 pro-rated amount plus an additional $37,500 due to expansion in Sept 2011 as approved by the County Board in August 2011 to target youth involved Burglary.
Shelter Care - Girls	New Horizon Center	$624,045 for the period of 1/1/2012 – 12/31/2012. This is the same amount as the 2011.
Shelter Care - Boys	St. Charles Youth and Family Services	$1,604,438 for the period of 1/1/2012 – 12/31/2012. This is a $50,000 increase from 2011 due to staffing needs of separate male and female facilities.

For 2012, the Department issued requests for proposals (RFPs) for the following programs and is requesting approval to purchase the identified services.

<u>Day Treatment (Alternative Court Ordered School)</u>

A community panel and member of DHHS contract administration/quality assurance reviewed and scored the applicant proposals. In an effort to improve the panel review process, the Department involved a Milwaukee Public Schools representative on the panel because of MPS' fiscal and programmatic partnership in this service area.

DCSD would like to purchase these services from St. Charles Youth and Family Services in the

amount of $244,533 for 30 seats, Wisconsin Community Services in the amount of $244,533 for 30 seats, and Lad Lake in the amount of $122,267 for 15 seats. The panel ranked these applicants first, second, and third. All contracts would be for the period of 1/1/12 – 6/30/2012. These are the same pro-rated amounts as compared to 2011 pro-rated amounts.

First Time Youthful Offender Program – Tracking and Community Education Services

This service primarily provides tracking services for first time offenders on a fee-for-service basis. In an effort to minimize overhead costs, improve program sustainability due to reduced enrollments, and improve program continuity, applicants were also requested to incorporate a weekend community education program tailored appropriately for first time offenders.

A community panel and member of DHHS contract administration/ quality assurance reviewed and scored the applicant proposals.

DCSD would like to purchase services from Community Relations - Social Development Commission (CR-SDC) for north side youth and that Milwaukee Christian Center continue to provide these services for the south side youth. The panel ranked these applicants first and fourth. DCSD believes that increased first time offender prevention efforts could expand with a transition to CR-SDC. CR-SDC has operated the Youth Services Division for a number of years and has a standing relationship with the municipal courts. Emerging discussions have recently developed involving the need to "bridge" the relationship between Milwaukee municipal court and the Milwaukee County Juvenile Probation Department with the overarching concept of assisting with intervention prior to involvement with the Children's Court Center. Further, the Department has partnered with CR-SDC in the past using grant funds to develop gender specific services for females.

DCSD, to the greatest extent possible, desires a smooth transition to minimize both client and system disruption. It is recommended that the Department continue to purchase tracking services from the current provider, New Concept Self Development, in an amount not to exceed $59,483 through 6/30/2012 to service youth up until a referral for service end date of 12/31/2011 is implemented. The Department would begin to direct youth to CR-SDC under a fee-for-service agreement for the period of 2/1/2012 – 12/31/2011. This arrangement has a not-to-exceed allocation amount of $165,517, but it is not a guaranteed amount since it is fee-for service. In order to ensure continuity of service and a successfully management of the transition above, the Department will continue to purchase these services from Milwaukee Christian Center (MCC) using a fee-for-service agreement for the period of 1/1/2012 – 12/31/2012. This arrangement has a not-to-exceed allocation amount of $225,000, but it is not a guaranteed amount since it is fee-for service.

DCSD utilizes community intervention and early intervention revenue dollars from the State Department of Juvenile Corrections for this program area.

Group Home Care

In an effort to contain costs, the Department is recommending to reduce the number of providers for boys to three and the overall number of beds on the purchase of service side. This will potentially result in both cost savings and programmatic improvement. In terms of cost savings, the Department has experienced a utilization rate of 61% in 2010. This rate has further declined in 2011. By maintaining a higher utilization rate (i.e. more beds filled on a daily basis) for the three remaining providers, the Department estimates a potential savings between $75,000 and $276,863 on an annual basis based upon the need to purchase additional fee-for-service beds. In addition to the potential cost savings, the Division has a desire to incorporate risk and needs level considerations into placement planning in 2012 which would result in the use of an extended pool of licensed providers for low risk youth in an effort to remove them from the negative affects of congregated high risk youth.

A community panel and member of DHHS contract administration/quality assurance reviewed and scored the applicant proposals.

DCSD would like to purchase services from Southeastern Youth and Families in the amount of $302,032 for 8 beds, St. Charles Youth and Family Services in the amount of $302,032 for 8 beds, and Nehemiah Project in the amount of $302,032 for 8 beds. The panel ranked these applicants first, second, and third. All contracts would be for the period of 1/1/12 – 12/31/2012. These are the same amounts as in 2011. DCSD recommends a contract with Servant Manor in the amount of $25,169 for the period of 1/1/2012 – 1/31/2012 in order to ensure continuity of service for any youth remaining in Servant Manor. Youth not transitioned to an alternative placement by the end of the contract would be allowed to remain at Servant Manor under the standard terms of a fee-for-service agreement similar to the means by which the Division currently purchases group home services for girls. In addition, the Division would begin the certification process to allow for future placements to Servant Manor under a fee-for-service agreement.

Recommendation

The Department recommends that the County Board of Supervisors authorize the Acting Director of Health and Human Services, or his designee, to execute purchase of service contracts for 2012 for a variety of services and programs for the time period of January 1 through December 31, 2012 (except as otherwise noted) with the providers listed and in the amounts specified in the attached resolution. The proposed recommendations will necessitate a continuous review of expenditures, service utilization and Youth Aids revenue projections in order to adapt and bring forward a continuing service plan following the first quarter of 2012 to avoid service disruptions. Approval of the recommended contract allocations will allow for the provision of identified high priority community-based services for youth being served by the Delinquency and Court Services Division.

In light of the imminent State revenue reductions discussed, the Department estimates an approximate $210,000 – $412,000 annual savings that would be available to offset the 2012 revenue reductions. This amount does not include any contract increases mentioned in the report as these were accounted for in the 2012 Budget.

Fiscal Impact

Sufficient funds have been allocated in the 2012 Budget to cover the proposed purchase of service contracts. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive Staff
Terry Cooley, County Board Chief of Staff
Patrick Farley, Administrator - DAS
Pamela Bryant, Fiscal and Budget Administrator - DAS
CJ Pahl, Assistant Fiscal and Budget Administrator - DAS
Antoinette Thomas-Bailey, Fiscal & Management Analyst - DAS
Jennifer Collins, Analyst, County Board Staff
Honorable Marshall Murray, Children's Court Judge Presiding

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Delinquency and Court Services Division purchase of service contracts and fee for service agreements with community agencies for a variety of Delinquency and Court Services programs, by recommending adoption of the following:

A RESOLUTION

WHEREAS, Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors; and

WHEREAS, per Section 46.09, the Acting Director of the Department of Health and Human Services (DHHS) has requested authorization to enter into 2012 purchase of service contracts with community agencies for the Delinquency and Court Services Division (DCSD); and

WHEREAS, the recommended contracts will ensure an integrated delivery system for delinquent youth of both provided and purchased services in the community; and

WHEREAS, the contract recommendations are within the limits of the 2012 Budget and take into account recent notification from the State Department of Corrections concerning further 2012 Youth Aids reductions; now, therefore,

BE IT RESOLVED, that the Milwaukee County Board of Supervisors does hereby authorize and direct the Acting Director of the Department of Health and Human Services, or his designee, to enter into 2012 Delinquency and Court Services Division Purchase of Service contracts and or Service Agreements, effective January 1, 2012 to June 30, 2012 (unless otherwise stated), with the agencies and in the amounts listed below:

PROVIDER	SERVICE/ PROGRAM	AMOUNT
St. Charles Youth and Family Services	Re-entry Coordination	$ 45,000
The Counseling Center of Milwaukee d/b/a Pathfinders	Adolescent Sexual Abuse Treatment (1/1/2012 to 1/31/2012)	$ 11,243
Southwest Key Program	Level II In-Home Monitoring	$ 332,345
St. Charles Youth and Family	Level II In-Home Monitoring	$ 240,373

Running Rebels	Targeted Monitoring	$ 762,972
New Horizon Center	Temporary Shelter Care (1/1/2012 to 12/31/2012)	$ 624,045
St. Charles Youth and Family	Temporary Shelter Care (1/1/2012 to 12/31/2012)	$1,604,438
St. Charles Youth and Family	Day Treatment	$ 244,533
Wisconsin Community Services	Day Treatment	$ 244,533
Lad Lake	Day Treatment	$ 122,267
New Concept Self Development	Tracking/Community Education	$ 59,483
Community Relations - SDC	Tracking/Community Education (2/1/2012 to 12/31/2012)	$ 165,517
Milwaukee Christian Center	Tracking/Community Education (1/1/2012 to 12/31/2012)	$ 225,000
Southeastern Youth and Family	Group Home Care (1/1/2012 to 12/31/2012)	$ 302,032
St. Charles Youth and Family	Group Home Care (1/1/2012 to 12/31/2012)	$ 302,032
Nehemiah Project	Group Home Care (1/1/2012 to 12/31/2012)	$ 302,032
Servant Manor	Group Home Care (1/1/2012 to 1/31/2012)	$ 25,169
TOTAL for 2012		**$5,613,014**

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/17/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Purchase of Service Contracts for programs within the Delinquency and Court Services Division.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

A. The Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to execute 2012 Delinquency and Court Services Division (DCSD) Purchase of Service contracts with community vendors.

Approval of this request will allow the Director of DHHS to execute purchase of service contracts and fee for service contracts to continue provision of contracted Shelter Care, Group Home and First Time Offender Tracking & Community Education services in the DCSD for the period January 1, 2012 through December 31, 2012.

Approval of this request will also allow the Acting Director of DHHS to execute pro-rated contracts for Re-entry Coordination, Level 2 In-Home Monitoring, Targeted Monitoring and Day Treatment services for the period January 1, 2012 through June 30, 2012. The Department intends to seek extensions of these six-month contracts in Spring 2012, once the extent of further cuts by the State to Youth Aids becomes clear and based on the fiscal impact of that State reduction.

B.Total 2012 expenditures included in this request are $5,613,014.

C. There is no tax levy impact associated with approval of this request in 2012 as funds sufficient to cover associated expenditures are included as part of DCSD's 2012 Budget.

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 Thomas F. Lewandowski, Fiscal & Management Analyst

Authorized Signature

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

COUNTY OF MILWAUKEE
Delinquency and Court Services Division (DHHS)
INTER-OFFICE COMMUNICATION

DATE: November 10, 2011

TO: Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Director, Department of Health and Human Services
Prepared by Eric Meaux, Administrator/ Chief Intake Officer – DCSD

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting authorization to accept grant revenue totaling $117,911 from the Wisconsin Office of Justice Assistance to support programs administered by the Delinquency and Court Services Division**

Issue

In accordance with section 56.06 of the County Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to accept grant revenue from the Wisconsin Office of Justice Assistance (OJA) to support programs administered by the Delinquency and Court Services Division (DCSD).

Background

DCSD has successfully applied for and received both State and Federal grant revenue to pilot and support new initiatives that have directly resulted in strategic programming for specific target populations served by the Division. These funding opportunities allow the Division to pilot new services and strategies that continue to test and improve the Division's response to youth involved in the juvenile justice system.

Juvenile Accountability Incentive Block Grant (JAIBG) funds were initially awarded to Milwaukee County in 1999 to target youth found to be in possession of a firearm. This funding became available at a critical time when there was both a large number of youth being committed to State correctional facilities and a high demand for structured, community services for delinquent youth. These community services were viewed as effective in reducing youth reoffense, while resulting in cost-effectiveness and maintaining community safety.

Due to the success of the Firearm Project, the Division has continued to be eligible for JAIBG funds on an annual basis since 1999. As a result of the annual allocation of these funds by OJA, the Division has planned for the availability of these grant funds during annual budget development.

Similarly to the Firearm Project, the Serious Chronic Offender program, targets a specific juvenile subpopulation. In early 2009, in response to changing subpopulation demands for service, the current provider and the Division mutually agreed to combine the contract

allocations for the respective target populations to improve overall service capacity and provide program efficiencies. The subpopulations and program are now known as the Targeted Monitoring Program. This has removed episodic waitlist issues that become problematic for both the Division and the juvenile courts.

DCSD received notice of OJA approval on 6/7/2011 with funds being available on 4/1/2012 to support service capacity within the 2012 Budget.

Discussion

These grant funds allow the Division to provide more capacity for the Targeted Monitoring Program, a contractual service currently provided by the Running Rebels Community Organization. The Targeted Monitoring Program is comprised of two focus areas the target two separate juvenile subpopulations: 1) youth found in possession of a firearm (typically a handgun) and 2) youth determined to be serious chronic offender.

The Targeted Monitoring Program allows youth to remain in the community as an alternative to correctional placement. The program is intended to hold youth accountable, improve social competencies and reduce the probability of reoffense. These program services are considered targeted enhancements to regular probation services. All youth referred to the program have been adjudicated delinquent and are serving a supervision period under the supervision of the DCSD. Many youth are on a stayed order to juvenile corrections.

DCSD is required to report quarterly on a number of performance outcome measures during the period in which the grant funds are expended. DCSD has successfully maintained these requirements with in-house personnel since receiving the funds.

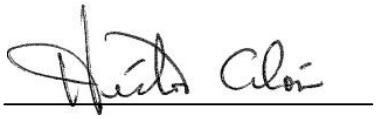
The award amount of $117,911 will allow DCSD to maintain the current service capacity through 2012 including funds available in the 2012 Budget. The award amount includes a match of $13,101, which is achieved through the anticipated 2012 purchase of service contract for the Targeted Monitoring Program.

Recommendation

It is recommended that the County Board of Supervisors authorize the Acting Director of DHHS, or his designee, to accept grant funds in the amount of $117,911 associated with Juvenile Accountability Incentive Block Grant: 2010-JB-15-8945 from the State of Wisconsin Office of Justice Assistance.

Fiscal Impact

Approval of this request will result in no additional expenditures in 2012. The local match requirement is achieved within the 2012 Adopted Departmental budget and will not result in any tax levy change. A fiscal note is attached.



Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive Staff
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Administrator – DAS
Pam Bryant, Interim Fiscal and Budget Administrator - DAS
CJ Pahl, Assistant Fiscal and Budget Administrator - DAS
Antoinette Thomas-Bailey, Fiscal & Management Analyst - DAS
Jennifer Collins, Analyst, County Board Staff
Jodi Mapp, Committee Clerk, County Board Staff

File No.
(Journal,)

(Item *) From the Acting Director, Department of Health and Human Services (DHHS), requesting authorization to accept grant dollars totaling $117,911 from the Wisconsin Office of Justice Assistance for programs within the Delinquency and Court Services Division:

A RESOLUTION

WHEREAS, the Delinquency and Court Services Division (DCSD) has in the past successfully applied for and received Federal dollars through the State of Wisconsin – Office of Justice Assistance (OJA) to fund new initiatives that have directly resulted in programming for specific subpopulations served by DCSD; and

WHEREAS, DCSD applied for additional grant funds that require local match funds, and the Division is now seeking authorization to accept such funds per Section 56.06 of the Code of General Ordinances; and

WHEREAS, the services that target both firearm offenders and serious chronic offenders has had a very positive impact on the lives of many youth and has produced significant fiscal savings directly related to reduced commitments to the Division of Juvenile Corrections from Milwaukee County; and

WHEREAS, it is anticipated that JAIBG funding in the amount of $117,911 will be available to support and continue these targeted services in 2012 at current capacity, and a $13,101 local match contribution is required for Milwaukee County to utilize these grant dollars for this project; and

WHEREAS, approval of this grant award would result in no additional expenditures in 2012; and

WHEREAS, approval of this grant award would require a local match contribution of $13,101 in 2012, which is included as part of the Division's 2012 Budget; now, therefore,

BE IT RESOLVED, that the County Board of Supervisors hereby authorizes the Acting Director of Health and Human Services, or his designee, to accept grant dollars from the State of Wisconsin Office of Justice Assistance for services targeting firearm offenders and serious chronic offenders.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/10/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, requesting authorization to accept grant revenue totaling $117,911 from the Wisconsin Office of Justice Assistance to support programs administered by the Delinquency and Court Services Division

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

A. The Acting Director of the Department of Health and Human Services (DHHS) has requested approval to accept grant dollars totaling $117,911 from the Wisconsin Office of Justice Assistance (OJA), for targeted monitoring services within the Delinquency and Court Services Division (DCSD) for the period beginning January 1, 2012 through December 31, 2012. The grant requires a local match contribution of $13,101.

B. Approval of this request will result in no additional expenditures in 2012.

C. There is no tax levy impact associated with approval of this request in 2012 as funds sufficient to meet the required local match contribution and the revenue grant are included as part of the Division's 2012 Budget.

D. No further assumptions are made.

Department/Prepared By Thomas F. Lewandowski, Fiscal & Management Analyst

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
INTER-OFFICE COMMUNICATION

DATE: November 8, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by: Dennis Buesing, Administrator, DHHS Contract Administration

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting authorization to retrospectively amend the amounts of the FFY2011 Wisconsin Home Energy Assistance Program (WHEAP) subcontracts with the Social Development Commission (SDC) and Community Advocates.**

Issue

The Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to retrospectively amend the amounts of the FFY2011 purchase of service contracts with the Social Development Commission (SDC) and Community Advocates. SDC was unable to expend their entire contract award and Community Advocates had documented expenses in excess of their contract award.

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors.

Background

In September 2010, DHHS recommended and the Milwaukee County Board of Supervisors approved a FFY2011 contract between the Wisconsin Department of Administration and Milwaukee County DHHS to cover the operation of the Wisconsin Home Energy Assistance Program (WHEAP), which assists individuals and families who are experiencing energy burdens throughout Milwaukee County. The approval included the acceptance of any amendments from the State during the course of the contract duration.

Also approved in September 2010 were purchase of service contracts between DHHS and SDC and Community Advocates to continue the provision of services to Milwaukee County residents under WHEAP. The contract between the State Division of Energy Services and Milwaukee County DHHS was initially $2,476,120 (excluding the funding for client benefits) and with the amendments increased to $3,187,174. The full $711,054 in amendments were distributed proportionately to SDC and Community Advocates. The SDC contract award, including amendments, was $2,308,469. The Community Advocates contract award, including

amendments was $434,946. SDC operates three Energy sites and deploys County energy staff along with its regular staff. Community Advocates operates one main Energy site and provides outreach services at various locations throughout the County, focusing on housing sites for low-income and elderly populations.

Discussion

The FFY2011 contract with the State for the operation of WHEAP and the DHHS contracts with SDC and Community Advocates for the provision of WHEAP services ended on September 30, 2011. Three different funding streams comprise the total contract amount: Operations/Administration, Crisis Services Administration, and Outreach. After all invoicing for the year had been submitted to DHHS, it was found that SDC had been unable to spend down their contract amount in all three funding areas, while Community Advocates had documented expenses in excess of their contract amount in all three areas.

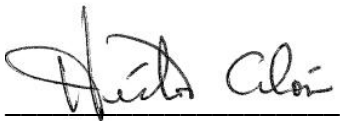
The department is requesting permission to transfer $25,630 in unspent funding from the SDC contract to the Community Advocates contract to offset some of their otherwise unfunded costs. Because funding steams are not interchangeable, not all of the Community Advocates costs will be covered; however, amending their contract to the maximum extent possible in each funding area will help to reduce their currently unfunded expense.

Recommendation

It is recommended that the County Board of Supervisors authorize the Acting Director of the Department of Health and Human Services, or his designee, to retrospectively reduce the SDC contract from $2,308,469 to $2,282,839, resulting in a reduction of $25,630; and to amend the Community Advocates Contract by increasing it in the amount of $25,630 for a revised FFY2011 total contract amount of $460,576.

Fiscal Impact

There will be no tax levy impact as the funding for the WHEAP program comes from the State. A fiscal note form is attached.



Héctor Colón, Acting Director
Department of Health and Human Services

cc: Chris Abele, County Executive
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Director – DAS
Pamela Bryant, Fiscal and Budget Administrator– DAS
CJ Pahl, Interim Assistant Fiscal and Budget Administrator - DAS
Antoinette Thomas-Bailey, Fiscal and Management Analyst
Jennifer Collins, County Board Staff
Jodi Mapp, County Board Staff

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services, requesting authorization to retrospectively amend the amounts of the Federal Fiscal Year (FFY) 2011 Wisconsin Home Energy Assistance Program (WHEAP) subcontracts with the Social Development Commission (SDC) and Community Advocates, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 46.09 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) has requested authorization to retrospectively amend the amounts of the FFY2011 Wisconsin Home Energy Assistance Program (WHEAP) subcontracts with the Social Development Commission (SDC) and Community Advocates; and

WHEREAS, SDC was unable to expend their entire FFY2011 contract award; and

WHEREAS, Community Advocates had documented expenses in excess of their contract award for the same period; and

WHEREAS, each of the recommended contracts that pertains to Energy Assistance is funded with Wisconsin Home Energy Assistance Program (WHEAP) revenue and the contract adjustment will have no tax levy impact; now, therefore,

BE IT RESOLVED, that the Milwaukee County Board of Supervisors hereby authorizes and directs the Acting Director, DHHS, or designee, to retrospectively amend and reduce the FFY2011 WHEAP subcontract with SDC from $2,308,469 to $2,282,839, and to amend and increase the Community Advocates contract, which was in the amount of $434,946, by $25,630 for a revised FFY2011 WHEAP total contract in the amount of $460,576.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/08/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, requesting authorization to retrospectively amend the amounts of the FFY2011 Wisconsin Home Energy Assistance Program (WHEAP) subcontracts with the Social Development Commission (SDC) and Community Advocates.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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		
	Revenue		
	Net Cost	0	0
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. [1] If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A.) Approval of the request would permit the DHHS Management Services Division to retrospectively amend the purchase of service contracts for the Energy Assistance program with the Social Development Commission and Community Advocates. The contracts, which run on the federal fiscal year cycle, ended on September 30, 2011.

B.)The total revenue included in the amended WHEAP FFY2011 contract was $3,187,174. This revenue funded Milwaukee County staff and admin costs as well as the SDC and Community Advocates contracts. SDC underspent its amended contract of $2,308,469 and Community Advocates overspent its amended contract of $434,946.

The department is seeking to increase the Community Advocates contract by $25,630 and reduce SDC's contract by the same amount.

C.) There would be no tax levy impact by approving the request as the recommended contract amounts are within the State Wisconsin Home Energy Assistance Program (WHEAP) allocation.

D. This fiscal note contains no assumptions.

[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 Clare O'Brien, DAS

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

COUNTY OF MILWAUKEE
INTEROFFICE COMMUNICATION

DATE: November 8, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by: Dennis Buesing, Administrator, DHHS Contract Administration

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, Requesting Authorization to Enter into 2012 Purchase of Service Contracts for the Management Services Division**

Issue

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors. Per Section 46.09, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into 2012 Purchase of Service Contracts with community vendors for the Management Services Division (MSD).

Background and Summary of 2012 Purchase-of-Service Contracts

DHHS traditionally has sought to maintain a social service delivery system comprised of both County provided and purchased services. Partnerships with community vendors have helped DHHS make use of available community resources and expertise in carrying out its mission.

For 2012, MSD proposes two Purchase of Service contracts with community vendors for critical services and programs. The recommended vendors have been performing the relevant service for Milwaukee County, first with the Economic Support Division for multiple years and for the past two years for the Management Services Division, and have met or exceeded contract specifications. The proposed contracts for 2012 are summarized below.

A) Interim Disability Assistance Program (IDAP) Recovery

DHHS recommends that Community Advocates continue to assist Supplemental Security Income/Social Security Disability (SSI/SSD) applicants who are applying for or currently receiving IDAP, which provides financial assistance to disabled persons while their SSI application is pending. This contract is level funded in 2012 with $45,000 in Basic County Aids (BCA) revenue. This contract will no longer be provided by the State of Wisconsin due to the change of staff from the County to the State. However, other functions will continue and the

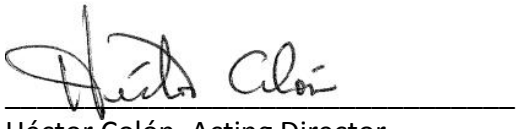
contract will be transferred to the Disability Services Division for management and implementation in 2012.

B) Community Information Line (211)

DHHS recommends that the existing contract with Impact Alcohol and Other Drug Abuse Services, Inc. (IMPACT) be continued for the 211 community information line. This contract provides 24-hour centralized information and referral service for residents seeking social services in Milwaukee County. The 2012 allocation from MSD DHHS and the Behavioral Health Division (BHD) is $480,000, which reflects $338,162 in tax levy, $41,838 in Wisconsin Home Energy Assistance Program (WHEAP) funding from MSD and $100,000 from BHD AODA funds. This is the same level of funding as in 2011.

Fiscal Impact

Approval of the recommendations delineated above would have no additional tax levy impact beyond what has been allocated in MSD's 2012 budget. A fiscal note form is attached.



Héctor Colón, Acting Director
Department of Health and Human Services

cc: County Executive Chris Abele
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Administrator - DAS
Pamela Bryant, Fiscal and Budget Administrator– DAS
CJ Pahl, Interim Assistant Fiscal and Budget Administrator - DAS
Antoinette Thomas-Bailey, Fiscal and Management Analyst – DAS
Jennifer Collins, County Board Staff
Jodi Mapp, County Board Staff

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services, requesting authorization to enter into 2012 Purchase-of-Service Contracts for Management Services Division programs, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 46.09 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) has requested authorization to enter into 2012 Purchase-of-Service Contracts with community vendors for the Management Services Division (MSD); and

WHEREAS, the recommended contracts will allow for provision of critical services within the community; and

WHEREAS, the contract recommendations are within limits of relevant 2012 State/County contracts and the 2012 Adopted Budget; now, therefore,

BE IT RESOLVED, that the Acting Director, DHHS, or his designee, is hereby authorized to enter into contracts for the period of January 1 through December 31, 2012 with the following vendors in the following amounts:

Community Advocates (IDAP)	45,000
Impact Alcohol and Other Drug Abuse Services, Inc. *$380,000 MSD + $100,000 BHD	480,000*
TOTAL:	$525,000

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/08/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, DHHS, Requesting Authorization to Enter into 2012 Purchase of Service Contracts for Management Services Division Programs.

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

A.) Approval of the request would permit the DHHS Management Services Division to enter into 2012 Purchase of Service contracts for the Community Information Line 211 Program - IMPACT and Interim Disability Assistance (IDAP) Program - Community Advocates.

B.) Approval of the requested purchase of service contracts would result in $525,000 in total expenditures for 2012. This amount reflects a contract of $480,000 with 211-IMPACT and a $45,000 contract with Community Advocates for IDAP.

C.) Sufficient funds in the amount of $480,000 are included in the 2012 Adopted Budget for the 211 IMPACT contract. This funding reflects tax levy of $338,162, $41,838 in WHEAP revenue and $100,000 in BHD AODA revenue. The 2012 Budget made an unspecified reduction of $45,000 to IDAP. Therefore, the contract with Community Advocates will be funded by a portion of the surplus in Basic County Aids (BCA) revenue identified in the department's December report seeking approval for its Social Services (Community Aids) contract.

D. This fiscal note assumes expenditures cannot exceed the amounts authorized for the Purchase of Service contracts.

[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 Clare O'Brien, Budget Analyst for DHHS

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

COUNTY OF MILWAUKEE
INTEROFFICE COMMUNICATION

DATE: November 8, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services
Prepared by: Dennis Buesing, Administrator, DHHS Contract Administration

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting authorization to enter into a 2012 Professional Services Contract for specialized accounting services with Quick Financial Solutions, LLC, in the amount of $107,262**

Issue

Section 56.30 of the Milwaukee County Code of General Ordinances requires County Board approval for Professional Services Contracts of $50,000 or greater. Per Section 56.30, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into a Professional Services Contract with Quick Financial Solutions, LLC, in the amount of $107,262 for 2012 for specialized accounting and fiscal management services.

Background

Each year, DHHS enters into purchase contracts and fee-for-service agreements for the provision of human services totaling hundreds of millions of dollars, with a wide variety of community agencies. Under state law and federal guidelines, the county is required to review CPA audits of all agencies that receive state funding in the amount of $25,000, or greater, or federal funding in the amount of $500,000 or greater effective January 1, 2005. In addition, DHHS is required to conduct other forms of sub-recipient monitoring that may include desk reviews, on-site reviews, and audits of provider agencies. DHHS' 2012 adopted budget includes $87,262 for accounting services to provide audit review and monitoring services of provider agencies and the department's fee-for-service networks.

The county would face a significant loss of federal and state revenue if it failed to review audits per federal and state requirements. Furthermore, the audit reviews and monitoring of provider agencies allows the county to ensure that human service purchase agencies are not paid in excess of allowable costs, and that agencies maintain adequate financial systems, records, and practices.

In addition, DHHS' 2012 adopted budget includes $20,000 for accounting services to enhance Children's Long Term Support (CLTS) Medicaid Waiver fiscal management to maximize the Disabilities Services Division's (DSD) ability to draw down state and federal revenue.

Professional services to be provided include analysis and review of the components of the CLTS Medicaid Waiver program and the CLTS TPA claims process, including creation and preparation of monitoring tools to aid DSD fiscal and program staff in the management of the CLTS Medicaid Waiver program more efficiently and effectively.

It has been determined that, in order to perform these accounting and auditing functions appropriately, it is necessary for DHHS to secure the experience and expertise of a professional consulting firm with current experience in both governmental and non-profit accounting and auditing.

In 2009, the DHHS Management Services Division initiated a Request for Proposals (RFP) for competitive bidding for accounting services to provide audit review and monitoring services of provider agencies and to enhance Long Term Support Medicaid Waiver fiscal management. The RFP contained provisions for a one-year contract, with two one-year options to renew the contract in subsequent years if agreed to by both parties. Subsequent rate increases would be limited to the rate of inflation in the prior calendar year, if funding were continued in future years. The applicant awarded the contract was Quick Financial Solutions, LLC, a certified Disadvantaged Business Enterprise (DBE).

Recommendation

It is recommended that the Acting Director of the Department of Health and Human Services, or his designee, be authorized to enter into a professional services contract with Quick Financial Solutions, LLC, in the amount of $107,262 for the period January 1, 2012 through December 31, 2012. Approval of this contract recommendation will allow the Department to maintain its required review of provider agency audits and monitoring activities, enhance Children's Long Term Support Medicaid Waiver fiscal management, and maximize DSD's ability to draw down state and federal revenue.

Fiscal Effect

There is no budgetary impact associated with this request, as funding for this professional services contract is included in the 2012 Adopted Budget. A fiscal note form is attached.

Héctor Colón, Acting Director
Department of Health and Human Services

cc: Chris Abele, County Executive
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Director – DAS
Pamela Bryant, Fiscal and Budget Administrator
CJ Pahl, Interim Assistant Fiscal and Budget Administrator - DAS
Antoinette Thomas-Bailey, Fiscal and Management Analyst
Jennifer Collins, County Board Staff
Jodi Mapp, County Board Staff

File No.
(Journal,)

(ITEM) From the Acting Director, Department of Health and Human Services, requesting authorization to enter into a 2012 professional services contract with Quick Financial Solutions, LLC, in the amount of $107,262, by recommending adoption of the following:

A RESOLUTION

WHEREAS, per Section 56.30 of the Milwaukee County Code of General Ordinances, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into a 2012 professional services contract with Quick Financial Solutions, LLC, in the amount of **$107,262**; and

WHEREAS, under state law and federal guidelines, the county is required to review CPA audits of all its contract agencies that receive state funding in the amount of $25,000 or greater, or federal funding in the amount of $500,000 or greater; and

WHEREAS, the county would face a significant loss of federal and state revenue if it failed to review audits per federal and state requirements; and

WHEREAS, the audit reviews and monitoring of provider agencies also allows the county to ensure that human service purchase agencies are not paid in excess of allowable costs, and that agencies maintain adequate financial systems, records, and practices; and

WHEREAS, DHHS' 2012 adopted budget includes $87,262 for accounting services to provide audit review and monitoring services of provider agencies; and

WHEREAS, in addition, DHHS' 2012 adopted budget includes $20,000 for accounting services to enhance Children's Long-Term Support (CLTS) Medicaid Waiver fiscal management and to maximize the Disabilities Services Division's (DSD) ability to draw down state and federal revenue; and

WHEREAS, professional services to be provided include analysis and review of the components of the CLTS Medicaid Waiver program, including creation and preparation of monitoring tools for program staff to more efficiently and effectively manage the CLTS Medicaid Waiver program of the State of Wisconsin; and

WHEREAS, it has been determined that in order to appropriately perform these accounting and auditing functions, it is necessary for DHHS to secure the experience and expertise of a professional consulting firm with current experience in both governmental and non-profit accounting and auditing; and

WHEREAS, In 2009 DHHS Management Services Division initiated a Request for Proposals (RFP) for competitive bidding to award this contract, and the applicant awarded the contract was Quick Financial Solutions, LLC, a certified Disadvantaged Business Enterprise (DBE); and

WHEREAS, this is the third year of a RFP cycle, which contained two one-year options to renew the contract in the second and third year of the cycle; and

WHEREAS, Quick Financial Solutions, LLC is being recommended for the award of a one-year contract for each of the functions described herein; now, therefore,

BE IT RESOLVED, that the Acting Director of the Department of Health and Human Services, or his designee, is hereby authorized to enter into a professional services contract with Quick Financial Solutions, LLC, in the amount of $107,262 for the period January 1, 2012 through December 31, 2012.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: November 8, 2011

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: From the Acting Director, Department of Health and Human Services, requesting authorization to enter into a 2012 Professional Services Contract for specialized accounting services with Quick Financial Solutions, LLC, in the amount of $107,262

FISCAL EFFECT:

☒ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☐ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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.

A. The Acting Director of DHHS is requesting authorization to enter into a Professional Services Contract with Quick Financial Solutions, LLC for the period January 1, 2012 through December 31, 2012. The contract would allow the DHHS to perform required auditing and monitoring activities that ensure compliance with state law and federal guidelines, as well as specialized accounting services in support of the Disabilities Services Division's Children's Long-term Support program .

B. The amount of the 2012 Professional Services Contract with Quick Financial Solutions, LLC, is $107,262.

C. Sufficient funds in the amount of $107,262 are included in the 2012 Adopted Budget for this contract. Approval of this request will result in a zero tax levy impact.

D. No assumptions utilized.

[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 Clare O'Brien, DAS

Authorized Signature _____

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No

COUNTY OF MILWAUKEE
Inter-Office Communication

DATE: November 8, 2011

TO: Supervisor Lee Holloway, Chairman, Milwaukee County Board of Supervisors

FROM: Héctor Colón, Acting Director, Department of Health and Human Services

SUBJECT: **Report from the Acting Director, Department of Health and Human Services, requesting the authorization to enter into the 2012 contract with the State of Wisconsin for Social Services and Community Programs**

Issue

Sections 46.031 and 49.325 of the Wisconsin Statutes require counties to execute annual contracts with the state departments of Health Services (DHS) and Children and Families (DCF) for "Social Services and Community Programs." The contracts, also referred to as Community Aids, provide State and Federal funding for county services to persons with disabilities, substance abuse problems and juvenile delinquents and their families as mandated by state and/or federal law.

County ordinances require that departments obtain authorization from the County Board in order to execute contracts. The Acting Director, Department of Health and Human Services (DHHS), is therefore requesting authorization to sign the 2012 contracts with DHS and DCF for the provision of social services and community programs mandated by state law. The county cannot receive 2012 revenues from the state until this contract is signed.

Background

The single largest revenue source for DHHS are state and federal funds that are forwarded to the Department under the Social Services and Community Programs state contract, commonly referred to as "Community Aids."

While DHHS and the Department on Aging have a number of revenue sources in common (e.g. Community Aids), separate contracts are executed with the State for each department. This report only covers the contract with the Department of Health and Human Services. Revenues allocated to DHHS under this contract fund programs in the Behavioral Health, Disabilities Services, and Delinquency and Court Services Divisions.

In 2012, Milwaukee County also will have separate contracts with the state Department of Administration for administration of the Wisconsin Home Energy Assistance Program and the Department of Corrections for Youth Aids. In addition, there will be separate contracts with State DHS and DCF for the lease for the Marcia P. Coggs Center and shared services provided by the county for the State operated Income Maintenance and Child Care programs.

At this time, DHHS has not received the actual 2012 "Community Aids" contract from the State. However, DHHS has received an advisory notification of 2012 allocations, and this has been utilized to

identify the fiscal effect of the expected contract (allocations are posted at http://www.dhs.wisconsin.gov/sca/ and http://dcf.wisconsin.gov/contractsgrants/social_human_services_contracts/default.htm).

State Allocations and Fiscal Effect (*See Attachment 1*)

Community Aids – Basic County Allocation (BCA)

The Basic County Allocation (BCA) is a type of block grant provided to counties that is not earmarked to serve a specific target population. Counties are able to determine how much funding to provide to each of the populations eligible to be served with these funds: persons with mental illness, developmental disabilities, physical disabilities, substance abuse problems, and delinquent children.

The 2012 Budget includes $34,890,877 of BCA for BHD, DSD and DCSD. The State's Advisory Notification of the 2012 BCA funding level is $32,373,052,[1]which is $2,517,825 lower than the County budget. This reflects a reduction of $2.7 million being intercepted by the State to support the Income Maintenance program and an increase in BCA of $182,175 for a net overall reduction of $2,517,825. The 2012 DHHS Budget includes tax levy of $2.7 million rather than a reduction in BCA. A fund transfer will be submitted in 2012 to make this adjustment to be consistent with the State reduction. Therefore, the overall fiscal effect is a surplus of $182,175 in BCA.

Attachment 1 to this report includes a summary of all the funding provided under the state contract.

Social Services Revenue Sources

Children's Long Term Support Programs (CLTS)

As shown in Attachment 1, the state allocation for the Children's Long-Term Support program, administered in the Disabilities Services Division, is $10,152,068, which is $356,400 higher than the $9,795,668 contained in the 2012 DHHS Budget. However, all revenue claimed must be matched with an equal amount of expenditures so this variance will not produce a surplus for the department but could potentially increase the amount of services provided to clients.

Behavioral Health Division

As shown in Attachment 1, there is about $1 million in budgeted revenues that are not contained in the State's 2012 allocation amount for BHD at this time due to the State's issuance of a –Request for Proposals (RFP) for two grants. The 2012 BHD Budget includes $920,000 for an IV Drug grant and $68,800 for an AODA Day Care/Services in Treatment grant based on amounts received in prior years. At the time of budget development, BHD was not aware that the State would be issuing an RFP for the abovementioned grants.

For the IV Drug grant, the maximum amount available is now $750,000 compared to the $920,000 BHD received in 2011. BHD has applied for a $500,000 component of the IV Drug grant for treatment

[1] This amount does not include the $38.8 million in County BCA funding that is transferred each year to the State Bureau of Child Welfare per State legislation that was adopted when the State assumed responsibility for the Child Welfare function in Milwaukee County.

services, and it is our understanding that an outside agency with which BHD contracts has applied for the remaining $250,000, meant to fund prevention services. Given that the maximum amount of the IV Drug grant is $170,000 less than the 2012 Budget, service reductions are possible even if BHD and the outside agency receive the full $750,000. As of this writing, neither BHD nor the outside agency has received notification on the status of the IV Drug grant. Related expenditures will also be decreased based on the RFP award so the net tax levy impact will be zero. If necessary, a fund transfer will be submitted later in the year.

Moreover, the AODA Day Care/Services in Treatment grant for $68,800 is a pass-through grant to an outside agency. BHD did not apply for this grant for 2012 because it is our understanding that the outside agency applied and is awaiting notification from the State. Again, related expenditures will be decreased resulting in a net tax levy impact of zero.

BHD's allocation of the TANF grant is approximately $544,405 less than the 2011 allocation, which is $50,000 less than the amount included in the 2012 Budget. It is likely that service reductions will need to be made to account for this change, although some funding has been added to the Recommended 2012 Budget to offset this reduction. BHD will continue to monitor Board actions and bring contract allocation recommendations with the final allocation to the Board in the December cycle.

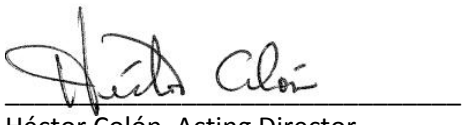
Conversely, the 2012 BHD allocation for several other funding sources is more beneficial than was assumed in the 2012 Budget by approximately $23,000. Overall, BHD is projecting that there is no tax levy impact from all of these changes.

Recommendation

It is recommended that the County Board of Supervisors authorize the DHHS Acting Director to execute the 2012 Social Services and Community Programs contracts from the State Departments of Health Services and Children and Families, and any addenda to those contracts, in order for the County to obtain the State Community Aids revenue. The 2012 Social Services and Community Programs contracts provide total revenue of approximately $62.3 million.

Fiscal Impact

DHHS staff has compared revenues in the State's Advisory Notification to revenues that were anticipated in the 2012 Budget. Based on the notification, the contract is expected to include net revenue of $62,327,679 (Community Aids of $32,373,052 and earmarked revenues of $29,954,627) after adjusting for a Family Care intercept amount of $8,305,873 and Income Maintenance intercept of $2.7 million. A fiscal note form is attached.



Héctor Colón, Acting Director
Department of Health and Human Services

Attachment

cc: County Executive Chris Abele
Tia Torhorst, County Executive's Office
Terrence Cooley, Chief of Staff – County Board
Patrick Farley, Administrator - DAS
Pamela Bryant, Fiscal and Budget Administrator – DAS
CJ Pahl, Interim Assistant Fiscal and Budget Administrator – DAS
Antoinette Thomas-Bailey, Fiscal and Management Analyst – DAS
Jennifer Collins, County Board Staff
Jodi Mapp, County Board Staff

Attachment 1 11/21/2011

CY 2012 Social Service/Community Programs State Notice Revenue Compared to 2012 Recommended Budget

2012 CARS #	Basic County Allocation	2011 Final State Notice	2012 Budget Revenues DCSD	DSD	BHD	2012 DHHS/BHD Budget Total	2012 Prelminary State Notice		State vs. DHHS/BHD Budget
561	DHS Basic County Allocation (BCA)	$32,985,502				$0	$30,446,872		
681	DHS State BCA Match	$3,503,194				$0	$3,341,686		
561	DCF Basic County Allocation (BCA)	$6,397,407				$0	$6,373,837		
681	DCF State BCA Match	$496,768				$0	$516,530		
	Sub-Total DHS Community Aids	**$43,382,871**	**$6,708,054**	**$4,343,740**	**$23,839,083**	**$34,890,877**	**$40,678,925**		**$5,788,048**
	Adjustments to State Contract								
	Family Care Contribution	($8,305,873)					($8,305,873)		($8,305,873)
	Net BCA Revenue	**$35,076,998**	**$6,708,054**	**$4,343,740**	**$23,839,083**	**$34,890,877**	**$32,373,052**		**($2,517,825)**
	2012 Budgeted Tax Levy for Income Maintenance[1]					**($2,700,000)**			**$2,700,000**
	BCA Surplus (Deficit)					**$32,190,877**	**$32,373,052**		**$182,175**

CARS #	Earmarked Revenues	2011 Final State Notice	2012 Budget Revenues DCSD	DSD	BHD	2012 DHHS/BHD Budget Total	2012 Prelminary State Notice		State Notice vs. DHHS/BHD Budget
579	AODA JuvenileJustice	$453,554	$453,554			$453,554	$453,554		$0
312	Adult Protective Services	$426,335		$426,335		$426,335	$426,335		$0
577	Family Support-DD Children	$852,668		$852,668		$852,668	$852,668		$0
550	Birth - 3 Prog (incl former Ch 1)	$2,700,671		$2,700,671		$2,700,672	$2,700,672		$0
427	CLTS DD Autism Fed	$4,061,529				$0	$3,431,988		
428	CLTS DD BCA Matched Fed	$0				$0			
429	CLTS DD Fed Other	$310,574				$0	$1,456,834		
437	CLTS MH Autism Fed	$1,215,040				$0	$1,383,830		
438	CLTS MH BCA Matched Fed	$0				$0			
439	CLTS MH Fed Other	$136,644				$0	$141,282		
448	CLTS PD Autism Fed	$0				$0	$5,456		
449	CLTS PD Fed Other	$149,739				$0	$263,088		
	CLTS PD Autism Non Fed						$3,572		
450	CLTS DD Autism Non-Fed	$188,121				$0	$2,247,290		
451	CLTS MH Autism Non-Fed	$56,278				$0			
460	CLTS DD Non-Fed Other	$66,877				$0	$953,944		
461	CLTS MH Non-Fed Other	$6,486				$0	$92,512		
462	CLTS PD Other Non Fed	$12,077				$0	$172,272		
	CLTS Total	$6,203,365	$0	$9,795,668	$0	$9,795,668	$10,152,068		$356,400
	BHD Earmarked Revenues								
367	Community Options Program (COP)	$1,525,673		$47,000	$1,478,673	$1,525,673	$1,525,673		$0
504	CSP Wait List	$93,910			$84,519	$84,519	$88,217		$3,698
517	Certified Mental Health Program	$374,999			$337,499	$337,499	$352,233		$14,734
535	Subst Abuse Trtmt TANF	$4,939,000			$4,445,100	$4,445,100	$4,394,595		($50,505)
559	IMD Regular Relocation	$6,546,319			$5,891,687	$5,891,687	$5,891,677		($10)
569	Mental Health Block Grant	$685,914	$45,000		$635,914	$680,914	$685,914		$5,000
570	AODA Block Grant	$2,431,021			$2,431,021	$2,431,021	$2,431,021		$0
582	AODA Day Care/Svces in Treatment	$68,800			$68,800	$68,800	$0	2	($68,800)
585	IV Drug	$920,000			$920,000	$920,000		2	($920,000)
	Subtotal BHD Earmarked Revenues	$17,585,636	$45,000	$47,000	$16,293,213	$16,385,213	$15,369,330		($1,015,883)
	Sub-Total Earmarked Revenues	**$28,222,229**	**$498,554**	**$13,822,342**	**$16,293,213**	**$30,614,110**	**$29,954,627**		**($659,483)**
	GRAND TOTAL Revenue	**$63,299,227**	**$7,206,608**	**$18,166,082**	**$40,132,296**	**$62,804,987**	**$62,327,679**		**($477,308)**

Net Tax Levy Impact	**$182,175**

[1] In 2012, BCA revenue is reduced by $2.7 million which reflects the county's required contribution for the State operated Income Maintenance program. The 2012 Budget does not reflect this reduction to BCA. Rather, it includes $2.7 million in tax levy to offset the BCA reduction.

[2] New for 2012, the State has issued Requests for Proposals (RFP) for the AODA Day Care/Services in Treatment and IV Drug grants, which support programs offered by the Behavioral Health Division. BHD and an outside agency (based on our understanding) have submitted responses to the IV Drug grant, but as of this writing have not received notification from the State. The AODA Day Care/Services in Treatment grant is a pass-through grant to an outside agency. While BHD did not apply for this grant for 2012, it is BHD's understanding that the outside agency has applied to the State for this grant.

File No.
(Journal,)

(ITEM) Report from the Acting Director, Department of Health and Human Services, requesting the authorization to enter into the 2012 contract with the State of Wisconsin for Social Services and Community Programs by recommending adoption of the following:

A RESOLUTION

WHEREAS, Sections 46.031 and 49.325 of the Wisconsin Statutes require that Milwaukee County enter into contracts with the state departments of Health Services and Children and Families for social services and community programs (otherwise referred to as "Community Aids"); and

WHEREAS, while formal contracts have not yet been submitted by the State, the State has provided an advisory notification of funding for 2012 for social services and community programs; and

WHEREAS, DHHS staff have compared revenues in the State's Advisory Notification to revenues that were anticipated in the 2012 Budget, and based on the notification, the contract is expected to include $62,327,679 in total net revenues (Community Aids of $32,373,052 and earmarked revenues of $29,954,627) after adjusting for a Family Care intercept amount of $8,305,873 and Income Maintenance intercept amount of $2,700,000; and

WHEREAS, the total anticipated revenue is slightly higher than the revenue contained in the 2012 Budget for Basic County Aids (BCA) but lower in earmarked revenues for the Behavioral Health Division; and

WHEREAS, the net reduction of about $1 million in revenue to BHD compared to the 2012 Budget primarily represents funding being applied for under a Request for Proposals (RFP) process which has not yet been completed; and

WHEREAS, assuming BHD is awarded the full grant amount, the maximum grant is still about $170,000 lower than budgeted which could result in service reduction; and

WHEREAS, it is in the County's best interest to execute contracts in a timely manner to improve cash flow and maximize interest earnings; and

WHEREAS, the County will not receive any State Community Aids revenue until the County Board has authorized the DHHS Acting Director to execute the contract; and

WHEREAS, in light of the above, the Acting Director of DHHS is requesting authorization from the County Board to execute the contracts for social services and community programs so that the contract can be executed in a timely manner once it is received from the State of Wisconsin; now, therefore,

BE IT RESOLVED, that the Acting Director of the Department of Health and Human Services, or designee, is hereby authorized to enter into contracts with the Wisconsin Departments of Health

48 Services and Children and Families covering Social Services and Community Programs for the period
49 January 1 through December 31, 2012, and any addendum thereto.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 11/22/11

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: Report from the Acting Director, Department of Health and Human Services, requesting the authorization to enter into the 2012 contract with the State of Wisconsin for Social Services and Community Programs

FISCAL EFFECT:

☐ No Direct County Fiscal Impact

☐ Existing Staff Time Required

☐ Increase Operating Expenditures
(If checked, check one of two boxes below)

☐ Absorbed Within Agency's Budget

☐ Not Absorbed Within Agency's Budget

☐ Decrease Operating Expenditures

☒ Increase Operating Revenues

☐ Decrease Operating Revenues

☐ Increase Capital Expenditures

☐ Decrease Capital Expenditures

☐ Increase Capital Revenues

☐ Decrease Capital Revenues

☐ 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		
	Revenue		182,175
	Net Cost		-182,175
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. Authorization is requested to sign the 2012 Social Services and Community Programs contracts with the state Departments of Health Services and Children and Families. Approval will allow Milwaukee County to receive State revenue for county services to persons with disabilities, substance abuse problems and juvenile delinquents and their families as mandated by State and/or Federal law.

B. The state's Social Services and Community Programs contracts include various separate revenues used to fund DHHS (including BHD). Approval to sign the 2012 contracts will allow Milwaukee County to receive funds.

C. DHHS staff has compared revenues in the State Advisory notification to revenues that were anticipated in the 2012 Recommended Budget. The majority of anticipated revenues are basically consistent with budgeted revenues but some of the earmarked revenues are lower than budget and may require service reductions in certain programs operated by BHD.

The state funding notice reflects a net reduction in revenue of $477,308 compared to the 2012 Recommended Budget (see Attachment 1). This is the result of the State notice reflecting:

1) An additional $182,175 in net Basic County Aids (BCA) revenue of $32,373,052 compared to $32,190,877 in the 2012 Recommended Budget. This additional revenue would provide for a tax levy surplus. The overall BCA amount has been reduced to reflect the $8,305,873 BCA intercept for Family Care as well as a $2.7 million intercept for the operation of the State Income Maintenance Program. The $2.7 million reduction in BCA is not contained in DHHS' 2012 Budget. Rather, $2.7 million in tax levy is budgeted to cover this revenue reduction. A fund transfer will be submitted in 2012 to reduce BCA and allocate tax levy.

[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.

2) An additional $356,400 in Children's Long Term Support revenue compared to the 2012 Recommended Budget. All expenditures incurred in the CLTS program are 100 percent offset with revenue so this variance will not impact the budget by producing a surplus.

3) A $1 million net reduction in BHD revenue compared to the 2012 Recommended Budget. The 2012 BHD Budget includes $920,000 for an IV Drug grant and $68,800 for an AODA Day Care/Services in Treatment grant. For the IV Drug grant, the maximum amount is now $750,000 instead of $920,000. Given that the maximum amount of the IV Drug grant is $170,000 less than the 2012 Budget, service reductions are possible even if BHD and the outside agency receive the full $750,000. As of this writing, BHD has not received notification on the status of the grant.

The AODA Day Care/Services in Treatment grant for $68,800 is a pass-through grant to an outside agency. The agency has applied for this grant and is awaiting notification.

BHD's allocation of the TANF grant is approximately $50,000 less than was included in the 2012 Budget. Service reductions are possible to account for this change. Conversely, the 2012 BHD allocation for several other funding sources is more beneficial than was assumed in the 2012 Budget by approximately $23,000.

The only tax levy impact anticipated in items 1 to 3 is a surplus in BCA revenue. The other changes to revenue are not anticipated to impact tax levy but could cause a service reduction.

D. There were no assumptions made. The fiscal information was taken from the State's initial 2012 contract advisory notification.

Department/Prepared By Clare O'Brien, Budget Analyst for DHHS

Authorized Signature

Did DAS-Fiscal Staff Review? ☐ Yes ☒ No