

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

Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
<b>Expenditures</b>					
<b>Personnel Costs</b>	\$64,418,840	\$65,217,429	\$69,758,153	\$69,764,445	\$6,292
<b>Operation Costs</b>	\$133,197,059	\$143,898,481	\$143,775,185	\$158,737,548	\$14,962,363
<b>Debt &amp; Depreciation</b>	\$0	\$0	\$0	\$0	\$ 0
<b>Capital Outlay</b>	\$110,056	\$2,004	\$100,000	\$0	(\$100,000)
<b>Interdepartmental. Charges</b>	\$2,915,144	\$5,691,498	\$4,380,394	\$5,044,908	\$664,514
<b>Total Expenditures</b>	<b>\$200,641,099</b>	<b>\$214,809,412</b>	<b>\$218,013,732</b>	<b>\$233,546,901</b>	<b>\$15,533,169</b>
<b>Revenues</b>					
<b>Direct Revenue</b>	\$101,822,123	\$111,262,507	\$118,381,453	\$132,743,607	\$14,362,154
<b>Intergovernmental Revenue</b>	\$42,348,233	\$44,104,596	\$43,689,581	\$47,349,303	\$3,659,722
<b>Indirect Revenue</b>	\$0	\$	\$0	\$	\$ 0
<b>Total Revenues</b>	<b>\$144,170,356</b>	<b>\$155,367,103</b>	<b>\$162,071,034</b>	<b>\$180,092,910</b>	<b>\$18,021,876</b>
<b>Tax Levy</b>	<b>(\$56,470,743)</b>	<b>(\$59,442,309)</b>	<b>(\$55,942,698)</b>	<b>(\$53,453,991)</b>	<b>\$2,488,707</b>
<b>Impact on Reserves Increase/(Decrease)</b>	<b>\$1,238,248</b>	<b>(\$2,310,917)</b>	<b>(\$226,697)</b>	<b>\$0</b>	<b>\$226,697</b>
<b>Personnel</b>					
<b>Full-Time Pos. (FTE)</b>	492.2	464.8	458.9	465	6.1
<b>Seasonal/Hourly/Pool Pos.</b>	24.3	20.0	23.6	29.5	5.9
<b>Overtime \$</b>	\$2,433,039	\$2,825,822	\$767,028	\$817,308	\$50,280

**Department Mission:**

Together, creating healthy communities.

**Department Vision:**

Empowering safe, healthy and meaningful lives.

**Department Description:**

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

**Major Changes in FY 2021**

2021 tax levy is reduced by \$2.5m to \$53.4m. Changes in the following areas enabled BHD to reduce tax levy without reducing services:

- Increase in WIMCR funding of \$0.9m
- Increase in Crisis Intervention revenue of \$0.9m
- Decrease in personnel expenses of \$0.7m by eliminating vacant positions and legacy healthcare savings.

Funding for behavioral health services are enhanced and expanded in the following areas:

- \$16.2m increased spending in the Comprehensive Community Service (CCS) Adult and Children's program with a projected enrollment of 2,125 by the end of 2021.
- \$1.0m funding for a new High-Fidelity Assertive Community Treatment (ACT) Team.
- \$0.7m additional funding for AODA services including Medication-assisted Treatment.
- \$0.5m for a Crisis Stabilization House redesign.
- \$0.2m to support supported employment services.
- Additional funding for mental health services in collaboration with area Federally Qualified Health Centers.

**Strategic Program Area 1: Management & Support Services**

Service Provision: Administrative

How We Do It: Program Budget Summary					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
Expenditures	(\$148,586)	\$2,786,764	(\$1,697,003)	(\$1,697,002)	\$ 1
Revenues	\$279,039	\$277,178	\$302,997	\$302,997	\$ 0
Tax Levy	(\$134)	\$2,509,586	(\$2,000,000)	(\$1,999,999)	\$ 1
FTE Positions	136.4	120.9	126.4	123.0	(3.4)

What We Do With It: Activity Data				
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target
Impaneling requests processed	N/A	2,262	2,500	2,500

How Well We Do It: Performance Measures				
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target
Revenue dollars/fiscal staff	\$6,931,267	\$7,126,931	\$7,113,311	\$7,187,947
Patient revenue collected/Billed revenue	41.7%	50.7%	54.3%	58.3%

**Strategic Overview:**

Management and Support Services provides fiscal management, compliance, and administration.

**Strategic Implementation:**

Expenditures of \$32.6m are budgeted in this area, which is allocated out to the other service areas. The 2021 budget includes a net reduction in costs of \$0.3m, primarily related to reductions in interdepartmental charges.

1.0 FTE Grant Accountant position is created. 2.0FTE vacant positions are eliminated. Other adjustments are made for vacancy and turnover based on actual experience.

A \$2.0m general expenditure reduction is added to this strategic area to budget cost savings or potential reserve contributions.

**A Focus on Quality:**

The Behavioral Health Division (BHD) will continue to strategically foster partnerships and participate in an enhanced and integrated community-based behavioral health system of care in 2021. Our vision will include the promotion of early crisis intervention and prevention, as to enhance individuals’ access to care, while providing crisis options and community-based locations with warmer front doors. Our system of care will support strength-based interventions, will be needs driven while ensuring linkages and coordination of a Quality, and a value-based network of provider services. Ultimately, more individuals with behavioral health needs throughout Milwaukee County will be served through financially sustainable models of care in support of the **"Right Care, Right Place, Right Time."**

BHD will continue to transform into a community system of care in 2020 with an emphasis on:

- Racial equity.
- Quality and safety.
- Client experience of care.
- Streamlined access to help.
- Workforce development and training.
- Building trusting relationships with stakeholders.
- Building network service capacity.
- Identifying racial equity gaps, injustice, and broader community-based solutions.
- Long-term fiscal sustainability and cost efficiencies.

Behavioral Health Division (BHD) Quality Management Services will continue to be strengthened in 2021 to assure ongoing excellence in the quality and safety of care as to meet clients' needs. We will define quality as a collective measure of excellence in BHDs (and our network) systems, processes, staff and provider performance, decisions, and human interactions. The overarching organizational aim we are undertaking in this and the next quality plan biennium is to align our quality program structure, management, and knowledge base to a customer-driven, performance based, innovation rewarding, and self-learning paradigm. BHD, our staff, partners, and the Milwaukee County Mental Health Board (MCMHB) will continue to demonstrate a commitment to improving the health of clients and ultimately the health and wellness of our community.

To truly transform into a healthcare system of high reliability, excellent client experience, and quality and safety, the Behavioral Health Division (BHD) will engage in purposeful activities in support of a quality journey. Mental Health Board governance and BHD Leadership will remain committed to quality care and services, including increased efforts to delineate contract performance expectations and increased monitoring, fostering a culture of safety, and supporting a continuous learning environment with an on-going emphasis on performance improvement, decision and action. Efforts to centralize BHD quality-related functions in collaboration with DHHS, with an emphasis on enhanced client outcomes, target goals, data, technology and benchmarks are the hallmarks of these continued efforts. Investment in personnel to provide quality assurance and quality improvement activities will be prioritized as to strengthen BHD services, network quality and performance. Activities to eliminate barriers and individual program and department silos in favor of an integrated system of care continue in 2021. The goals will include strengthening the quality approach to increase operational efficiency, support an environment of safety, reduce cost, and create a community-based healthcare system.

**Strategic Program Area 2: Psychiatric Crisis ER/Observation**

Service Provision: Mandated

How We Do It: Program Budget Summary					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
Expenditures	\$16,963,438	\$17,412,328	\$18,512,591	\$17,321,434	(\$1,191,157)
Revenues	\$8,921,538	\$9,101,269	\$8,959,547	\$9,081,833	\$122,286
Tax Levy	\$8,041,900	\$8,311,059	\$9,553,044	\$8,239,602	(\$1,313,442)
FTE Positions	70.4	68.7	71.7	73.1	1.4

What We Do With It: Activity Data				
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target
<i>Psychiatric Emergency Department</i>				
Admissions	7,375	7,492	8,250	7,500

How Well We Do It: Performance Measures				
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target
Percent of clients returning to PCS within 30 days	24.0%	26.1%	24.0%	24.0%
Percent of Time on Waitlist Status	83.2%	100%	80%	80%

**Strategic Overview:**

Psychiatric Crisis ER/Observation includes:

- Psychiatric Crisis Service (PCS) Emergency Room: PCS is a 24-hour a day, seven days a week psychiatric emergency room. This component of BHD’s system of crisis services provides crisis intervention, face-to-face medical/psychiatric assessment, and acute treatment for individuals who are, or who believe themselves to be, in psychiatric emergency and in need of psychiatric assessment, treatment, and/or referral; this includes voluntary referrals from law enforcement and emergency detention referrals.
- Observation Unit: Consumers may be placed on Observation Status as an alternative to inpatient hospitalization when they are experiencing a mental health crisis and need brief intensive assessment and treatment. The Observation Unit is designed to provide crisis intervention and stabilization services that are less than 48 hours in duration.

**Strategic Implementation:**

Budgeted Patient Revenue for the Emergency Room and Observation Unit is increased \$0.1m in 2021 to reflect current experience.

Personnel expenses are reduced by \$1.0m, primarily due to a decrease in legacy fringe costs charged to this area.

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

Service Provision: Mandated

<b>How We Do It: Program Budget Summary</b>					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
<b>Expenditures</b>	\$37,903,846	\$36,360,224	\$39,159,390	\$37,174,661	(\$1,984,729)
<b>Revenues</b>	\$15,547,280	\$17,489,269	\$20,408,055	\$20,252,425	(\$155,630)
<b>Tax Levy</b>	\$22,356,566	\$18,870,955	\$18,751,335	\$16,922,236	(\$1,829,099)
<b>FTE Positions</b>	173.6	155.4	141.8	143.1	1.3

<b>What We Do With It: Activity Data</b>				
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target
<i>Acute Adult Inpatient</i>				
Average Daily Census	41.8	40.6	44	42
Number of Admissions	770	693	700	700
Number of Patient Days	15,272	14,809	16,100	16,100
Average Length of Stay (Days)	23	23	23	23
<i>Child and Adolescent Inpatient Services</i>				
Average Daily Census	7.5	7.5	8	8
Number of Admissions	644	660	650	650
Number of Patient Days	2,734	2,731	3,000	3,000
Average length of Stay (Days)	4.2	4.1	4.5	4.5

<b>How Well We Do It: Performance Measures</b>				
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target
<i>Acute Adult Inpatient</i>				
Percent of clients returning to Acute Adult within 30 days	6.6%	9%	10%	10%
Patients Responding Positively to Satisfaction Survey	74.8%	71.5%	75%	75%
<i>Child and Adolescent Inpatient Services</i>				
Percent of children who return to CAIS within 30 days	12.4%	16.7%	12%	12%
Patients Responding Positively to Satisfaction Survey	71.1%	70.2%	75%	75%

**Strategic Overview:**

BHD's inpatient services are provided in four licensed psychiatric hospital units with three specialized programs for adults and one specialized unit for children and adolescents. Adult units include one 16 bed adult unit called the Acute Treatment Unit (ATU), one 16 bed AICE, and one 16 bed Intensive Treatment Unit (ITU). A total of 48 adult beds will be available in 2021 with a projected 87.5% occupancy rate. All units provide inpatient care to individuals who require safe, secure, short-term, or occasionally extended psychiatric hospitalization. A multi-disciplinary team approach of psychiatry, psychology, nursing, social service, and rehabilitation therapy provides assessment and treatment. This approach is designed to stabilize any patient with acute psychiatric needs and assist the return of the patient to their own community. The ATU program is the primary area for a variety of students including psychiatric residents, medical students, and nursing students to gain experience in the care of individuals who require inpatient care. The ITU program provides a safe, supportive environment for those individuals with mental health conditions who are at high risk for aggressive behavior and in need of intensive behavioral and pharmacological interventions. The Child and Adolescent (CAIS) unit provides inpatient care to individuals age 18 and under. The CAIS unit also provides emergency detention services for Milwaukee County, as well as inpatient screening for Children's Court.

**Strategic Implementation:**

Inpatient expenditures decrease by \$2.0m primarily due to reduction of legacy fringe costs, reduction in State Institute costs of \$0.5m, and a reduction in pharmaceutical costs of \$0.3m. Locum Tenens costs increase by \$0.5m. 1.0 FTE vacant psychiatrist position is eliminated. Other adjustments are made for vacancy and turnover based on actual experience.

Patient revenue is decreased by \$0.2m based on actual experience and payer mix trends.

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

Service Provision: Mandated

How We Do It: Program Budget Summary					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
<b>Expenditures</b>	\$89,914,819	\$100,494,656	\$103,707,773	\$119,547,782	\$15,840,009
<b>Revenues</b>	\$64,089,966	\$71,530,371	\$74,732,311	\$89,332,900	\$14,600,589
<b>Tax Levy</b>	\$25,824,853	\$28,964,285	\$28,975,462	\$30,214,882	\$1,239,420
<b>FTE Positions</b>	93.8	97.6	100.7	108.0	7.3

What We Do With It: Activity Data				
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target
Number of Unique Clients Served	9,363	10,049	9,500	10,500

How Well We Do It: Performance Measures				
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target
Average Satisfaction Survey Score	77.4%	81.50%	78%	78%
Percent with any emergency room utilization	14.6%	16.4%	10%	10.0%
Percent Homeless	9.18%	9.6%	6.8%	7.0%
Percent Employed	20.06%	19.04%	18.25%	19.0%

**Strategic Overview:**

CARSD consists of two program areas:

- Community Mental Health and Community Crisis Services
- Community AODA Services

**Strategic Implementation:**

Community Access to Recovery Services (CARS) is the community-based mental health and substance abuse system for adults in Milwaukee County. CARS provides a variety of services to help adults with behavioral health needs achieve the greatest possible independence and quality of life by assessing individual needs and facilitating access to appropriate community services and supports. CARS is committed to fostering independence, choice, and hope for individuals by creating an array of services that are person-centered, recovery oriented, trauma informed, and culturally intelligent. The 2020 Budget sustains investment in community-based mental health care with an emphasis on recovery.

**CARS: Community Mental Health and Community Crisis Services**

How We Do It: Program Budget Summary					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
<b>Expenditures</b>	\$73,672,957	\$84,756,346	\$88,336,751	\$103,517,369	\$15,180,618
<b>Revenues</b>	\$51,484,921	\$56,548,095	\$61,172,616	\$74,971,867	\$13,799,251
<b>Tax Levy</b>	\$22,188,036	\$28,208,251	\$27,164,135	\$28,545,502	\$1,381,367

What We Do With It: Activity Data				
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target
<i>Crisis Mobile Team</i>				
Mobiles Completed	3,337	3,785	3,600	3,600
<i>Targeted Case Management</i>				
Average Enrollment	1,566	1,305	1,602	1,600
<i>Community Support Program</i>				
Average Enrollment	1,320	1,298	1,300	1,300
<i>Comprehensive Community Services</i>				
Year-End Enrollment	922	1,225	1,430	1,750

How Well We Do It: Performance Measures				
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target
CCS: Tax levy per capacity	\$123	\$ 2,426	\$1,167	\$ 1,958
CSP: Tax levy per capacity	\$5,912	\$ 6,114	\$5,376	\$ 5,282
TCM: Tax levy per capacity	\$2,228	\$ 2,238	\$2,204	\$ 2,139

**Strategic Overview:**

Community Mental Health and Crisis Services includes the following service options: Comprehensive Community Services (CCS), Targeted Case Management (TCM), Community Support Program (CSP), Community-Based Residential Facilities (CBRF), Access Clinic, Crisis Mobile Team (CMT), Community Assessment Response Team (CART), Community Consultation Team (CCT), Team Connect, Crisis Resource Centers (CRC), Crisis Stabilization Houses (CSH), and Community Linkage and Stabilization Program (CLASP).

**Strategic Implementation:**

The 2021 Community Access to Recovery Services Division MH budget includes \$15.2m in expanded services. The primary driver of this increase is \$11.5m in expanded CCS services. This is offset by \$11.2m in increased Medicaid and WIMCR revenue.

Expenses are increased by \$1.0m to support a new Assisted Outpatient Treatment (AOT) program using the Assertive Community Treatment (ACT) model for individuals with severe mental illness, high utilization rates of acute adult inpatient services, and under involuntary commitment for treatment. Project goals are to enhance crisis treatment services for individuals unable to adhere to treatment and who cycle repeatedly from tenuous stability to psychiatric crisis; provide more effective and comprehensive evidence-based practices (EBP) services for individuals with complex clinical and social needs; and sustain the AOT program through ongoing EBP training for the ACT Team, third party revenue, and mentorship. This is funded by a Substance Abuse and Mental Health Services (SAMHSA) award for \$1.0m per year for four years.

\$0.2m expense increase supports various employment services for individuals with behavioral health issues which can be an important role in an individual's recovery. This budget maintains support for Individual Placement and Support (IPS) which is a model of supported employment for people with serious mental illness. In 2021, BHD will continue the expansion of IPS in Community Support Programs (CSP) and will examine the use of Community Recovery Services (CRS) funding for sustainability of these employment services.

The integration of mental health and substance use disorder services with primary care remains a priority for community-based service delivery. The development of service partnerships with the area Community Health Centers (CHC) remains a programmatic and budgetary commitment for BHD. In December of 2019, the first collaboration was operationalized with Progressive CHC and two additional partnerships will be operationalized in the next year: Outreach CHC projected to be operational in November 2020 and Sixteenth Street CHC projected to be operational by April 2021. The 2021 budget contains funding to sustain operations at these integrated partnerships.

\$0.5m is dedicated to the redesign of the current Crisis Stabilization House services. BHD will be working to change this to a fully contracted service that provides short-term (less than six month), intensive crisis stabilization services to individuals post-hospitalization. The goal will be able to provide a higher level of services to individuals in home-like settings that support their recovery and allows time for community-based planning and service implementation to address the individuals self-identified ongoing needs. Lastly, the expected programming will support community involvement and promote social interactions.

The redesign of the Crisis Stabilization House (CSH) program will also allow for expanded Crisis Mobile Team (CMT) services. This change will create the opportunity for 4.5 FTE existing Emergency Service Clinicians to be re-allocated solely to the completion of mobile crisis services in the community. This will greatly increase the number of clinical staff available to respond to mobiles and expand the hours of available adult mobile team staff. It should also be noted that the 2021 budget continues to support the specialized crisis response services for people with developmental and intellectual disabilities. The budget also contains an Emergency Service Clinician for a county-wide Crisis Assessment Response Team should discussions with the Sheriff's Department lead to the implementation of this team.

The Crisis Resource Center (CRC) offers a safe, recovery-oriented environment that provides short-term crisis intervention to individuals. These settings provide a multitude of services, which includes crisis stabilization, peer support, and linkage to ongoing support and services. There is one CRC located on the Southside of Milwaukee and one on the Northside that provides walk-in crisis services along with short-term stabilization services. 2021 includes a fully operational third CRC location on the northwest side of Milwaukee, which will be supported partly through BHD funding.

BHD continues to support the use of Certified Peer Support Specialists as an integral part of service delivery teams. The 2021 budget maintains funding for Parachute House (Peer Run Respite) and support services provided by Warmline, Inc. The budget also includes funding for the expansion of peer support services as a part of the CHC partnerships. Lastly, the BHD budget maintains funding dedicated to the completion of peer support trainings to have more trained peer specialists enter the job market.

Expenses are increased by \$0.2m to support ongoing Community-Based Residential Facility and Adult Family home placements for individuals with complex needs. \$2.7m BCA funds are shifted into this area to support these services.

Wisconsin Medicaid Cost Report (WIMCR) and CCS cost report revenue is increased by \$0.9m. This impacts the following areas: crisis services, TCM, CSP, and CCS. Funding in 2021 will be based on the FY 2020 cost report.

<b>Community Mental Health Financials by Major Program Area</b>					
<b>Category</b>	<b>2018 Actual</b>	<b>2019 Actual</b>	<b>2020 Budget</b>	<b>2021 Budget</b>	<b>2020/2019 Variance</b>
<b><i>Crisis Mobile Team</i></b>					
Expense	\$4,443,833	\$4,660,327	\$4,881,301	\$5,073,057	\$191,756
Revenue	\$1,449,635	\$911,483	\$1,298,160	\$2,315,494	\$1,017,334
Tax Levy	\$2,994,198	\$3,748,844	\$3,583,141	\$2,757,563	(\$825,578)
<b><i>CARS Care Coordination</i></b>					
Expense	\$884,136	\$908,980	\$1,052,255	\$1,094,321	\$42,066
Revenue	\$168,098	\$278,107	\$86,351	\$258,362	\$172,011
Tax Levy	\$716,038	\$630,873	\$965,904	\$835,959	(\$129,945)
<b><i>Targeted Case Management &amp; Crisis Care Management</i></b>					
Expense	\$6,505,212	\$6,560,972	\$7,029,854	\$7,433,832	\$403,978
Revenue	\$3,015,369	\$3,640,161	\$3,452,193	\$4,010,899	\$558,706
Tax Levy	\$3,489,843	\$2,920,811	\$3,577,661	\$3,422,933	(\$154,728)
<b><i>Community Support Program</i></b>					
Expense	\$15,164,903	\$15,969,922	\$15,826,894	\$16,708,403	\$881,509
Revenue	\$7,360,606	\$8,033,566	\$8,729,866	\$9,842,042	\$1,112,176
Tax Levy	\$7,804,297	\$7,936,356	\$7,097,028	\$6,866,361	(\$230,667)
<b><i>Comprehensive Community Services</i></b>					
Expense	\$15,492,052	\$23,042,579	\$24,295,281	\$36,590,320	\$12,295,039
Revenue	\$15,378,461	\$20,070,811	\$22,226,708	\$33,163,319	\$10,936,611
Tax Levy	\$113,591	\$2,971,768	\$2,068,573	\$3,427,001	\$1,358,428
<b><i>Community Recovery Services</i></b>					
Expense	\$230,836	\$1,358	\$0	\$193,121	\$193,121
Revenue	\$348,543	\$0	\$0	\$100,000	\$100,000
Tax Levy	(\$117,707)	\$1,358	\$0	\$93,121	\$93,121
<b><i>Community-Based Residential</i></b>					
Expense	\$13,551,949	\$14,122,126	\$13,554,226	\$13,705,948	\$151,722
Revenue	\$9,780,317	\$14,016,985	\$10,572,898	\$13,272,898	\$2,700,000
Tax Levy	\$3,771,632	\$105,141	\$2,981,328	\$433,050	(\$2,548,278)
<b><i>Access Clinic and CHC Partnerships (2018 included Day Treatment)</i></b>					
Expense	\$1,750,952	\$1,252,482	\$4,491,532	\$4,886,886	\$395,354
Revenue	\$1,500,780	\$1,073,375	\$2,045,686	\$1,952,188	(\$93,498)
Tax Levy	\$250,172	\$179,107	\$2,445,846	\$2,934,698	\$488,852

**CARS: Community AODA Services**

How We Do It: Program Budget Summary					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
<b>Expenditures</b>	\$16,241,982	\$15,895,172	\$15,371,022	\$16,030,413	\$659,391
<b>Revenues</b>	\$12,605,045	\$14,982,276	\$13,559,695	\$14,361,033	\$801,338
<b>Tax Levy</b>	\$3,636,937	\$912,896	\$1,811,327	\$1,669,380	(\$141,947)

What We Do With It: Activity Data					
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target	
<i>Detoxification</i>					
Mobiles Completed	6,698	6,216	6,000	6,216	
<i>AODA Residential</i>					
Average Enrollment	99	102	112	112	
<i>Recovery Support Coordination</i>					
Average Enrollment	386	551	400	500	
<i>Recovery Support Services</i>					
Year-End Enrollment	188	122	240	240	

How Well We Do It: Performance Measures					
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target	
Detoxification 7 Day Readmissions	60.12%	50.67%	49.00%	49.00%	
Percent abstinent from drug or alcohol use	63.65%	62.99%	64.18%	64.18%	

**Strategic Overview:**

Milwaukee County’s community AODA service program is an alcohol, drug treatment, and recovery service system. These services are open to Milwaukee County residents ages 18-59 with a history of alcohol or drug use. Priority is given to families with children and pregnant women (regardless of age). Milwaukee County BHD has a provider network for AODA residential services that provides a continuum of services, which include traditional residential, medically monitored residential and co-occurring bio-medically monitored residential, day treatment, recovery support coordination, outpatient services, and numerous recovery support services.

**Strategic Implementation:**

2021 AODA expenses are increased by \$0.7m. This is primarily in support of expanded medication-assisted treatment (MAT) and Recovery Support Coordination services. Other expenses are shifted between AODA programs based on current utilization trends.

Revenue is increased by a total of \$2.2m. Of those increases, \$1.4m is from shifting BCA from other BHD programs to support AODA services. State Opioid Response funds are increased by \$0.4m and Bureau Justice Assistance grant funds \$0.4m enhanced AODA programming.

<b>AODA Financials by Major Program Area</b>					
<b>Category</b>	<b>2018 Actual</b>	<b>2019 Actual</b>	<b>2020 Budget</b>	<b>2021 Budget</b>	<b>2020/2019 Variance</b>
<b><i>Detoxification</i></b>					
Expense	\$2,661,453	\$2,734,471	\$2,927,071	\$2,808,469	(\$118,602)
Revenue	\$2,333,731	\$2,333,730	\$2,333,731	\$2,333,731	\$ 0
Tax Levy	\$327,722	\$400,741	\$593,340	\$474,738	(\$118,602)
<b><i>AODA Residential</i></b>					
Expense	\$5,607,958	\$5,823,119	5,579,145	\$5,445,240	(\$133,905)
Revenue	\$5,351,007	\$6,903,510	5,430,371	\$5,430,371	\$ 0
Tax Levy	\$256,951	(\$1,080,391)	\$148,774	\$14,869	(\$133,905)
<b><i>Day Treatment &amp; Outpatient – AODA</i></b>					
Expense	\$631,923	\$703,843	\$641,029	\$660,266	\$19,237
Revenue	\$619,489	\$611,376	\$532,000	\$532,000	\$ 0
Tax Levy	\$12,434	\$92,467	\$109,029	\$128,266	\$19,237
<b><i>Recovery House</i></b>					
Expense	\$71,640	\$45,538	\$49,644	\$27,942	(\$21,702)
Revenue	\$0	\$0	\$0	\$0	\$ 0
Tax Levy	\$71,640	\$45,538	\$49,644	\$27,942	(\$21,702)
<b><i>Recovery Support Coordination</i></b>					
Expense	\$3,296,405	\$3,545,786	\$2,930,517	\$3,242,916	\$312,399
Revenue	\$3,470,248	\$4,186,289	\$2,810,011	\$3,010,011	\$200,000
Tax Levy	(\$173,843)	(\$640,503)	\$120,506	\$232,905	\$112,399
<b><i>Medication Assisted Treatment</i></b>					
Expense	\$79,777	\$917,939	\$389,715	\$878,043	\$488,328
Revenue	\$0	\$0	\$100,000	\$701,338	\$601,338
Tax Levy	\$79,777	\$917,939	\$289,715	\$176,705	(\$113,010)
<b><i>Prevention</i></b>					
Expense	\$3,138,513	\$1,197,175	\$1,222,810	\$1,303,776	\$80,966
Revenue	\$287,639	\$425,398	\$1,191,194	\$1,191,194	\$ 0
Tax Levy	\$2,850,874	\$771,777	\$31,616	\$112,582	\$80,966

**Strategic Program Area 5: Wraparound Services**

Service Provision: Mandated

How We Do It: Program Budget Summary					
Category	2018 Actual	2019 Actual	2020 Budget	2021 Budget	2021/2020 Variance
<b>Expenditures</b>	\$56,007,462	\$57,755,442	\$58,330,981	\$61,200,026	\$2,869,045
<b>Revenues</b>	\$55,332,534	\$56,969,014	\$57,668,124	\$61,122,755	\$3,454,631
<b>Tax Levy</b>	\$674,928	\$786,428	\$662,857	\$77,271	(\$658,104)
<b>FTE Positions</b>	40.0	42.1	41.7	47.2	5.5

What We Do With It: Activity Data				
Activity	2018 Actual	2019 Actual	2020 Target	2021 Target
<i>Wraparound</i>				
Average Total Enrollment	1,139	1,146	1,246	1,100
Average Daily Number of REACH enrollees	540	860	600	900
<i>Children's Mobile Crisis Team</i>				
Number of Clients Seen (face-to-face)	1,235	1,085	1,650	1,160
<i>Children's Comprehensive Community Services</i>				
Year-End Enrollment	79	301	350	375

How Well We Do It: Performance Measures				
Performance Measure	2018 Actual	2019 Actual	2020 Target	2021 Target
Family Satisfaction with Care Coordination (5.0 Scale)	4.68	4.56	4.0	4.0
Percentage of enrollee days in a home type setting (enrolled through Juvenile Justice system)	65.3%	64.1%	75%	75%
Percentage of youth who achieved permanency at disenrollment	53.9%	54.1%	70%	70%
Average level of "Needs Met" at disenrollment (Scale of 1-5)	2.4	2.4	3.0	3.0

**Strategic Overview:**

BHD'S Children's Community Services and Wraparound Milwaukee system of care serves youth and young adults (aged 5-23) along with their families. Through this system of care, eligible youth and young adults in Milwaukee County receive coordinated, community-based mental health services and connections to community resources. All programs emphasize a strength-based care coordination model rooted in underlying need that offers a range of services and supportive options to youth and their families. These community-based services are designed to be individualized to

meet the needs of each family. To fulfill eligibility requirements for all programs, children or young adults must meet Serious Emotional Disturbance (SED) criteria. For the first three options listed below, those programs in which enrollment includes participation in the specialized Managed Care carve out Wraparound Milwaukee, other eligibility criteria consist of risk level for out of home care, including hospitalization, and involvement in two or more systems (Child Welfare, Juvenile Justice, Mental Health Social Services, and Education). For enrollment in Comprehensive Community Services (CCS), individuals must be founded functionally eligible per the state assessment, in addition to having a SED diagnosis. Due to our historical ability to manage resources well and form valuable partnerships, the remaining options were able to be developed and sustained to offer Milwaukee County families increased access and choice. Once a determination of eligibility and need is made in partnership with the youth and their family, the following options are available under the Wraparound umbrella:

- Wraparound: Referrals are received from the Division of Youth and Family Services (DYFS) and the Division of Milwaukee Child Protective Services (DMCPS) for youth either placed out of home and outside of their community or are at risk of being placed. It provides cost-effective, community-based alternatives to residential treatment placements, juvenile correctional placements, and psychiatric hospitalization.
- REACH (Reaching, Engaging, and Assisting Children): Referrals come directly from families, schools, service providers, and the Children's Mobile Crisis (CMC) Team. Youth generally are not involved with DYFS or DMCPS. Under the same practice model, youth and families receive the same type of supports and services as those in the Wraparound program with the exception of placement services.
- OYEAH (Older Youth and Emerging Adult Heroes): Supports older youth and young adults (age 16-23) who are experiencing emotional and behavioral challenges to successfully transition to adulthood. In addition to mental health services, there is a focus on life skills, housing, and employment/training.
- CCS (Comprehensive Community Services for Children): An option for families, which provides support and services to youth and young adults who may be experiencing mental health or substance abuse diagnoses. As a voluntary community-based program, CCS addresses needs throughout a person's lifespan, with a coordinated and comprehensive array of recovery, treatment, and psychosocial rehabilitation services.
- FISS (Family Intervention and Support Services): A contract from DMCPS in partnership with St. Charles, which utilizes a shorter-term care coordination model aimed at stabilization and prevention. It is designed to assist families in meeting their needs while preventing court and system involvement. Children who are enrolled have identified behavioral issues, but diagnostic information is not required.
- Children's Mobile Crisis Team (CMC): Provides 24/7 crisis intervention services to any family in Milwaukee County with a child who is experiencing a mental health emergency in which the behavior of the child threatens his/or her removal from home, a community placement, and/or school placement. The team can also provide short-term case management and can link the child and family to crisis stabilization and community resources.

**Strategic Implementation:**

BHD'S Children's Community Services and Wraparound Milwaukee system of care contains a diverse number of programs, services, and supports available to Milwaukee County families and young adults and all aimed at providing comprehensive, individualized, and cost-effective care to children with complex mental health and emotional needs. The 2021 expectation for Wraparound Milwaukee is a daily enrollment of 1,100 children, young adults, and their families. Enrollment numbers in Wraparound are expected to remain consistent or slightly increase due to a planned integration of screening and assessment between DYFS and Wraparound Milwaukee. The expectation is to continue to see an increase in enrollments for both REACH and CCS, as new potential referral sources are identified and an integration with the Disability Services Division – Children's area continues. Additionally, enrollment into CORE (Coordinated Opportunities for Recovery and Empowerment), a specialized program within CCS, continues to see a steady enrollment of youth and young adults who are clinically at high risk for psychosis or who have already experienced their first episode of psychosis. The number of youth and young adults seen by Children's Mobile Crisis may exceed projections, however numbers reflect current staffing. With the implementation of Crisis Redesign, there is an expectation the continuum of care within crisis response will increase in both capacity and breadth. Wraparound will continue to depend on the use of Crisis Stabilization services as a component of this expansion.

Expenses increase by a net of \$2.8m and revenues increase by a net of \$3.4m based on projected enrollment and utilization trends for Wraparound and Youth CCS.

A net of 5.5 FTE positions are added to the 2021 Wraparound budget. 4.5 FTE positions are supported by grant funding. 1.0 FTE System Navigator Manager position is transferred from DHHS (Agency 800).

<b>Wraparound Services by Major Program Area</b>					
<b>Category</b>	<b>2018 Actual</b>	<b>2019 Actual</b>	<b>2020 Budget</b>	<b>2021 Budget</b>	<b>2020/2019 Variance</b>
<b><i>Wraparound Services (Reach, O-Yeah, CMC)</i></b>					
Expense	\$52,995,112	\$50,354,261	\$54,517,868	\$52,335,114	(\$2,182,754)
Revenue	\$53,849,963	50,161,406	\$54,357,800	\$53,090,009	(\$1,267,791)
Tax Levy	(\$854,851)	\$192,855	\$160,068	(\$754,895)	(\$914,963)
<b><i>Youth CCS</i></b>					
Expense	\$2,387,473	\$6,645,293	\$3,077,815	\$8,129,230	\$5,051,415
Revenue	\$1,051,291	\$6,387,718	\$2,879,044	\$7,601,466	\$4,722,422
Tax Levy	\$1,336,182	\$257,575	\$198,771	\$527,764	\$328,993
<b><i>Family Intervention and Support Services</i></b>					
Expense	\$624,877	\$739,580	\$735,298	\$735,683	\$ 385
Revenue	\$431,280	\$419,890	\$431,280	\$431,280	\$ 0
Tax Levy	\$193,597	\$319,690	\$304,018	\$304,403	\$ 385

**COUNTY OF MILWAUKEE**  
**INTEROFFICE COMMUNICATION**

DATE : 7/6/2020

TO : Supervisor Marcelia Nicholson Chair, County Board of Supervisors  
Chairman Thomas Lutzow, Milwaukee County Mental Health Board

FROM : Joe Lamers, Department of Administrative Services, Budget Director

SUBJECT : Coronavirus Relief Fund Allocation

**OVERVIEW:**

The Coronavirus Aid, Relief, and Economic Security Act (CARES) was signed into law on March 27, 2020 and created the Coronavirus Relief Fund. The Coronavirus Relief Fund provides \$160 billion in direct assistance for domestic governments, in order to cover the costs of necessary expenditures incurred due to the COVID-19 public health emergency. Local governments serving a population of 500,000 or more are eligible to receive assistance directly from the Treasury.

Milwaukee County received an initial Coronavirus Relief Fund payment in the amount of \$62,044,048 from the federal government. In addition, the County has received an allocation of \$15,384,444 from the State of Wisconsin's "Routes to Recovery" program, which is funded from the State's share of the Coronavirus Relief Fund. In total, the County has now received allocations of \$77,428,492 of CARES Act Coronavirus Relief Funds.

Guidance released by the United States Treasury on April 22, 2020 indicates that the funding can only be used to cover costs that:

1. Are necessary expenditures incurred due to the public health emergency
2. Were not accounted for in the budget most recently approved as of March 27, 2020
3. Were incurred during the period that begins March 1, 2020 and ends on December 30, 2020

The guidance also indicates that these funds may not be used to fill shortfalls in revenue.

In May of 2020, the County Board approved a request to add \$20 million of these funds to the budget to cover costs which are being incurred for items such as personal protective equipment (PPE), cleaning and sanitation, telework, emergency communications, and other direct costs related to mitigating the spread of COVID-19.

In June of 2020, an additional allocation of \$10 million was approved by the County Board for housing and homeless services including \$7 million for eviction prevention, \$2 million for housing acquisition, and \$1 million for mortgage assistance.

These allocations were approved with plans for the Department of Administrative Services to return to the County Board with updates on spending of the grant as well as recommendations for spending of the full \$77.4 million grant allocation.

**PROPOSED ALLOCATIONS BY CATEGORY (July 2020 update):**

This report provides a framework for proposed spending of the total \$77.4 million allocation. Proposed allocations are provided by major category of expenses (life safety, emergency operating costs, community and economic support). It should be noted that spending by category will be subject to change throughout the year based on experience and emergency needs, and the potential for changing circumstances during the pandemic. The following chart provides an allocation framework, and it is followed by a description of costs.

<b>Coronavirus Relief Fund Allocation Framework</b>	
<b>Description</b>	<b>Amount</b>
PPE, Cleaning, Sanitation	11,163,712
COVID Sick and Leave Time (includes transit)	5,200,000
IT Costs and Remote Work Capabilities	2,963,461
Re-opening Operations with Added Safety Measures	5,500,000
<b>Subtotal Life Safety</b>	<b>24,827,172</b>
Isolation and Social Distancing in the jail and HOC	13,318,341
Social Distancing Enforcement: Parks & Zoo	432,000
Emergency Operations Center (EOC/UEOC)	2,015,323
COVID Admin Support & Grants Management	522,997
Expanded Pre-trial Svcs and Electronic Monitoring	740,000
Hazard pay	700,000
Senior Services - COVID wellness checks	200,000
OEM/EMS Direct COVID Costs	833,600
COVID benefits costs (Health, unemployment, WC)	1,207,544
Public Health and Public Safety COVID-19 mitigation	5,485,514
<b>Subtotal Emergency COVID-19 Costs</b>	<b>25,455,319</b>
Housing and Homeless Services	15,000,000
Small Business Grants	7,000,000
Public Health / Mental Health Services	1,600,000
Employment Program	3,500,000
<b>Economic Support and Public Health</b>	<b>27,100,000</b>
<b>Total</b>	<b>77,382,492</b>

Life Safety Measures: \$24.6 million

The County is incurring operating costs on a routine daily basis for life safety measures related to mitigating the spread of COVID-19. Increased costs are anticipated in the coming months as

County operations will re-open with added safety precautions, resulting in added IT and facilities expenses, and increased needs for PPE and cleaning. Expenses of \$24.6 million are currently projected for the following costs:

- Personal protective equipment (PPE)
- Increased cleaning and sanitation costs
- COVID-19 related sick time
- IT costs associated with establishing remote work capabilities, videoconferencing, and other IT costs to enable compliance with COVID-19 public health precautions
- Re-opening County operations with added safety precautions including changes to facilities and IT

The \$24.6 million expenditure projection is based on current spending levels combined with an expectation that there will be increased costs associated with re-opening of Courts and other operations with added safety precautions due to COVID-19.

#### Emergency Operating Costs to Mitigate COVID-19: \$25.7 million

County operations have been significantly impacted by COVID-19. Treasury guidance indicates that costs which are substantially dedicated to mitigating the spread of COVID-19 are eligible for reimbursement under the Coronavirus Relief Fund. This includes payroll costs for public health and public safety employees which are substantially dedicated to mitigating COVID-19.

Emergency costs of \$27.8 million are currently estimated, including but not limited to the following:

- Social distancing and isolation in the Criminal Justice Facility (CJF) and House of Correction (HOC), consistent with CDC guidelines
- Emergency Operations Center costs for COVID-19 emergency planning purposes
- Increase in pre-trial services and electronic monitoring to assist in mitigating COVID-19 spread
- Emergency COVID-19 communications
- Staffing costs to enforce social distancing in the parks and zoo
- Increased death investigations conducted by the Medical Examiner's Office
- Sheriff's Office operating costs including enforcement of social distancing, transporting, screening visitors to the CJF and courthouse
- Public health expenditures in BHD and DHHS which are dedicating to mitigating the spread of COVID-19

#### Economic Support and Public Health: \$27.1 million

Economic Support and Public Health programs which are provided in connection with the COVID-19 public health emergency are eligible for reimbursement under the fund. The revised allocation framework recommends \$27.1 million in funding for the following programs:

- \$15 million is recommended for housing and homeless services, including funding for eviction prevention, housing acquisition, and mortgage assistance.

- This reflects an increase of \$5 million over the \$10 million allocation approved by County Board in June of 2020, which is recommended based on housing needs.
- \$7 million is recommended for grants to small business to reimburse costs of business interruptions caused by closures and impacts of COVID-19.
- \$1.6 million is recommended for public health services, including health and mental health services for uninsured populations
- \$3.5 million is recommended for an Employment Program in connection with Employ Milwaukee whereby unemployed individuals would be hired and trained to be resource navigators with jobs focused on mitigating COVID-19.

See below for additional detail regarding each of these programs.

### Housing and Homeless Services Detail

An updated allocation of \$15.0 million is recommended for housing programs which are aimed to assist in preventing homelessness. The County Board approved an initial allocation of \$10 million for housing programs in June of 2020. The administration is recommending an increase in this allocation due to needs pertaining to housing, which are described below.

**Eviction Prevention:** \$10 million is recommended for eviction prevention programs, primarily for payment of rental arrearages. This reflects an increase of \$3 million over the allocation which was approved in June. Partner agencies report over 25,000 calls since funding was announced by the Social Development Commission and Community Advocates. Legal advocates are also seeing unprecedented demand for their services for eviction representation. Three contracts are being recommended for approval through this initiative:

- 1) Community Advocates (\$6.5 million): This contract is to assist with the management of the application process as well as fiscal agent services to pay rental arrearages for those facing potential eviction. Up to \$400,000 will be used for staffing and related administrative costs.
- 2) Hope House (\$2.5 million): This contract is to provide prevention case management services for those with housing insecurity related to COVID as well as fiscal agent services to provide tenant based rental assistance. Up to \$200,000 will be used for staffing and related administrative costs.
- 3) Legal Aid Society (\$35,750): This contract is to provide additional legal services for those facing evictions.

**Housing Acquisition:** \$2.0 million is recommended for housing acquisition (amount is not changed). These funds would be used to acquire properties to house individuals with housing insecurities whose housing options are limited because of COVID. The target population would be those who are in housing and isolation facilities as well as hotels. Shelters remain at limited capacity so additional housing options are necessary. The Housing Division is currently assessing specific real estate options to include multi-family housing, single room occupancy

options, and hotels. It is the intention that the Housing Division will make an offer to purchase on a potential property by September.

**Mortgage Assistance:** \$3.0 million is recommended for mortgage assistance, which reflects a \$2.0 million increase over the allocation approved in June. These funds could be used for households that have not been able to maintain their current mortgages due to economic hardships brought on by COVID. It is being recommended that Housing Resources Inc., a minority ran agency, administer the mortgage assistance program. Up to \$300,000 will be used for staffing and administrative costs.

#### Small Business Grants Safe Restart Program

An allocation of \$7.0 million is recommended to provide grants to aid small business in Milwaukee County, to reimburse costs of business interruptions caused by closures and impacts of COVID-19. Grants of up to \$20,000 will be available to eligible small businesses. The Milwaukee Economic Development Corporation (MEDC) will assist Milwaukee County in reviewing applications, distributing grant funds and communicating with grant recipients.

The program will be available to for-profit small businesses located in Milwaukee County that have 20 or fewer full-time or full-time equivalent employees, which have 2019 revenue greater than \$0 but less than \$2 million, and which are current on property taxes owed to the prescribed municipality. Businesses will be required to complete a Duplication of Benefits (DOB) Affidavit to indicate if they have applied for or received grant funds elsewhere.

Woman, minority, veteran and LBGTQ+ owned businesses are strongly encouraged to apply and will receive priority review if they have a letter of support from a qualifying member of the Ethnic & Diverse Business Coalition (including the African American Chamber of Commerce of Wisconsin, American Indian Chamber of Commerce of Wisconsin, Greater Milwaukee Chamber of Commerce, Hmong Wisconsin Chamber of Commerce, Latino Entrepreneurial Network, MICAH, National Association of Minority Contractors – Wisconsin, The Business Council, Inc., Wisconsin Black Chamber of Commerce, Inc., Wisconsin Chinese Chamber of Commerce, Wisconsin LGBT Chamber of Commerce, Wisconsin Veterans Chamber of Commerce). Applicants need not be members of the abovementioned Chambers to seek a letter of support nor to apply for the program.

All businesses receiving Restart assistance will be required to complete a follow-up survey at a later date after the grant is awarded. Recipients are required to maintain detailed records on reopening dates, documentation of qualifying expenses, and staff and payroll records associated with the grant.

#### Public Health / Mental Health Services

An allocation of \$1.6 million is recommended for public health services, including mental and behavioral health services for uninsured populations that are impacted by COVID-19. There has

been an increased demand of public health services from existing and new clients who are experiencing high levels of stress and anxiety from impacts related to COVID-19. This need has been demonstrated in part by an increase in calls to suicide prevention hotlines, 211 Impact and requests for other services such as housing, food/ personal needs, and healthcare. For example, approximately a 16.2% increase in calls to Suicide Prevention Hotlines has been recorded since the Stay at Home order was put in place. Milwaukee County's homicide and domestic violence abuse rates have followed similar rates of intensification.

This program will provide psychiatry services, including telehealth services, to approximately 100 individuals. The program will contract with psychiatrists who can provide prescriptions and will also include resources to assist with housing and employment services.

In addition, therapy sessions will be offered virtually or in community-based settings that are facilitated by culturally relatable leaders who are experienced and trusted community members. The therapy sessions will address increased grief, loss, sadness and depression that has been experienced in Milwaukee County communities of color due to the disparate rates of COVID-19 infection and death.

This program will target vulnerable populations including individuals who have been released from the HOC as a means to mitigate the spread of COVID-19. Individuals on GPS monitoring are not eligible for Medicaid and have high needs due to limited eligibility for resources and disconnection from social networks. The program will also target people who have been furloughed or laid off during the pandemic due to mandatory closures and/or financial loss from reduced business.

Existing contracting and risk management processes will be utilized to expand contracts with current vendors and/or to extend new short-term contracts with new providers. Concerted efforts to diversify the vendors and engage woman, minority, veteran and LBGTQ+ providers will also be employed to advance racial and health equity.

#### Community Resource Navigator Employment Program

An allocation of \$3.5 million is recommended for the Community Resource Navigator Employment Program. This program is planned in partnership with Employ Milwaukee and the City of Milwaukee. Employ Milwaukee recruits unemployed individuals and trains them to be resource navigators in combating COVID through distribution of public health information and resources, and aid in contact tracing. The program is already up and running. A Milwaukee County allocation would allow for expansion of the program, including expansion to Community Health Centers. Employ also utilizes funds to provide supportive services and coaching/mentoring to the employees as part of the program.

#### FEMA Application Details

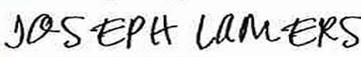
Some of the emergency costs described above will also be eligible for Federal Emergency Management Administration (FEMA) reimbursement. However, FEMA reimbursement is more

restrictive, and eligibility is expected to be limited. The primary cost area where FEMA eligibility is expected is life safety measures including personal protective equipment and increased cleaning and sanitation costs. Even within these expenditure categories, eligible reimbursement is limited to costs considered immediate life threats. It is currently unknown how long the FEMA claiming period related to COVID-19 will remain open. The administration is currently working with the Wisconsin Emergency Management (WEM) department to determine FEMA eligible costs and prepare an application. FEMA reimbursement is expected to result in changes to the CARES Act allocations.

## RECOMMENDATIONS

The following recommendations are included in this report.

1. The Department of Administrative Services recommends increasing the budget by \$47,482,492 to reflect the full allocation of emergency revenues received under the CARES Act Coronavirus Relief Fund. This will bring the total allocation to \$77,482,492.
2. The Department of Administrative Services recommends approval of a spending framework which includes \$24.6 life safety expenses, \$25.7 million for emergency operating costs, and \$27.1 million for Economic Support and Public Health programs.
3. Within the \$27.1 million allocation for Economic Support and Public Health programs, the Department of Administration recommends increasing funds for housing programs to \$15 million, allocating \$7.0 million to small business grants, allocating \$1.6 million to public health and mental health services, and allocating \$3.5 million to the Community Resource Navigator Employment Program.
4. The Department of Administrative Services will continue to provide monthly reports to the County Board with updates on spending of the grant, including updates regarding any changes to grant allocations.

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Joe Lamers, Budget Director  
Department of Administrative Services

Cc: David Crowley, Milwaukee County Executive  
Jason Haas, Chair, Finance and Audit Committee  
Willie Johnson, Jr., Co-chair, Finance and Audit Committee  
Scott Manske, County Comptroller

Steven Cady, Research and Policy Director, Office of the Comptroller

Julie Landry, DAS Director

Mary Jo Myers, Chief of Staff, Office of the County Executive

Kelly Bablitch, Chief of Staff, County Board