

Minutes of the Health and Human Services Board Meeting

Wednesday, July 15, 2016

Board Members Present: County Board Supervisors Duane Paulson (Chair), Christine Howard, Bill Zaborowski. Citizens Members Mike O'Brien, Mary Lodes, and Tim Whitmore. **Excused Absence:** Dr. Steven Kulick.

Others Present: Health and Human Services Director Antwayne Robertson, Health and Human Services Deputy Director Laura Kleber, County Board staff Mark Mader, Intake and Support Services Division Manager Kathy Mullooly, Economic Support Coordinator Debbie Berg, Child and Family Services Manager Lisa Roberts, Diane Scheerer, Adolescent and Family Services Division Manager Dr. Ron Pupp, Clinical Services Division Manager Joan Sternweis, Mental Health Center Administrator Jeff Lewis, Outpatient Services Administrator Gordon Owley, CJCC Coordinator Rebecca Luczaj, Services Division Manager Randy Setzer, Accounting Services Coordinator Cynthia Lilley, Senior Financial Analyst Jennifer Carriveau, Senior Financial Analyst Will Emslie, Financial Analyst Steve Brandhagen, Financial Analyst Meisha Bridges, Public Health Manager Dr. Nancy Healy-Haney, Health Officer/Epidemiologist Ben Jones, Dr. Ross Clay, Public Health Advisory Committee Members Dr. Ross Clay, Dr. Marshall Jennison, and Carroll Niewolny, ADRC Coordinator Mary Smith, Senior Financial Budget Analysts Clara Daniels and Steve Trimborn.

The meeting was called to order at 8:30 a.m. Introductions were exchanged.

Pledge of Allegiance

Approve Minutes of 4-21-16

MOTION: Howard moved, second by Lodes to approve the minutes of April 21, 2016. Motion carried 6-0.

Approve Minutes of 6-16-16

MOTION: Howard moved, second by Lodes to approve the minutes of June 16, 2016. Motion carried 6-0.

Overview of Proposed 2017 Budget

Robertson reported on the challenges with the proposed 2017 budget compared to previous years. The management team and fiscal staff have done an excellent job in meeting the target to present a balanced budget today. The department addressed challenges such as what can we do so as not to compromise programs and services, risks with revenue expenditures/projection, and deep end costs with institutional and residential placements. Robertson thanked the management team, fiscal staff, and subject matter experts (SME) in the development of the budget.

Paulson referenced the Health and Human Services Board's position on the drug issue which was addressed after the annual public hearing held in April 2016.

Proposed Child and Family Services Division Budget – Lisa Roberts

Roberts presented the child and family services division budget. Two primary service areas are in-home safety and out-of-home placement services, otherwise known as child protective services. Children have often been abused and neglected by their parents and/or at high risk of abuse or

neglect. Intact families receive wrap around services to keep children in home. If risk or abuse is too significant requiring out of home care, children are placed with relatives or foster care. Supports and services are provided to parents to rectify and reunite children back with their families. Roberts spoke of the federal and state benchmark requirements for children with proper assessments and supports in place to reach permanency. Roberts reviewed general government revenue and charges for service noted on page 3. In 2015 the department spoke of embedding a clinical therapist into the child and family services area. To date a therapist is providing mental health and crisis services to the children and families served. An increase in revenue for the billing services is anticipated for 2017. Other revenues are increasing by \$13,000. Personnel costs will decrease due to retirements. Operating expenditures are increasing primarily due to out of home care expenses. The contract for the child advocacy care center will be moved to the Intake and Shared Services Division.

Roberts presented on the children with special needs service area. Waukesha County is mandated to provide Birth to Three services. Waukesha County contracts with Lutheran Social Services to provide in-home support and services for children that have a 25% delay in one or more developmental areas. The Children's Community Options program is embedded in this area; formerly known as the Family Support program. Federal mandates have required the state to change the Children's Long Term Waiver and Children's Community Options programs. Services provided and funded through the waiver are now funded and provided through the child's insurance and transitioning those children from the waiver paid service to their card service. General government revenues increased primarily due to increase in the Children's Community Options allocation. Personnel costs decreased primarily due to turnover. Operating expenditures are budgeted to increase. Interdepartmental costs are increasing due to computer changes. Birth rates are stable in Waukesha County.

In response to Paulson's question, Robertson said the total increase in levy for the Health and Human Services Division was \$162,000.

Proposed Intake and Support Services Division 2017 Budget – Kathy Mullooly and Debbie Berg

Intake and Shared Services programs serve as the initial contact point for Child Welfare service referrals. Assessments are provided in the areas of child protective services; out of home placement requests; parent/teen family dysfunction; disability funding requests; and information/referral services. Short-term and supportive service includes Kinship Care assessment and funding; childcare certification; respite day care for families in crisis; home and financial management services and volunteer transportation services. The Division's purchased services include investments in prevention and early intervention services.

Mullooly presented the Intake and Shared Services budget. General Government revenues are budgeted to increase by \$7,100, related to the Child Day Care Administration funds received an increase allocation of \$59,900 to \$266,900 and Kinship Care Assessments had an increase of \$2,300 to \$49,900. This is offset by a decrease of about \$55,000 to \$536,000 for Kinship Care Base Benefits: All other General Government revenues remain the same: State Basic County Allocation budgeted at \$372,000, state funding for the Promoting Safe and Stable Family (PSSF) program budgeted at \$95,200 and the Foster Parent Training allocation of \$14,870. Charges for Services are budgeted at \$2,100 and are unchanged in the 2017 budget. This is a fee collected from Voluntary Kinship Providers related to annual background check. Other Revenues are budgeted to remain unchanged at about \$2,800.

Personnel costs increase by about \$11,300 to \$2,102,500. This represents the cost to continue for 26.06 FTE's and 0.94 increase in LTE extra help offset by a 0.40 FTE decrease in overtime.

Operating expenditures reflect a net decrease of \$64,800 to \$1,142,800. This reflects a \$55,000 decrease in Kinship Care base benefits to \$535,800 to align with the change in the state county contract. Also crisis respite day care is budgeted to decrease \$27,000 to \$115,600 based on trending utilization. These decreases are offset by a realignment of a contract from the Child and Family division to this division of \$21,500 as it better aligns with the Intake and Shared Service programming. This contract provides a timely and comprehensive response to child abuse allegations in a safe child-focused setting. Also, the Kinship Care assessments are increased \$2,300 to \$49,900. Interdepartmental charges increase about \$3,100 to \$77,000. This is primarily due to an increase in the End User Technology Fees.

Mullooly presented the Program Activities section, which the number of Intake Referrals, and Child Abuse and Neglect referrals were highlighted to reflect an increase between 2015 and 2016.

Home and financial management services adults who are under a court ordered payee. This program services many adults in the ADRC. Mullooly referenced the Kinship care waiting list, 24 hours crisis, and Family Daycare and Volunteer Transportation programs.

Economic Support – Debra Berg

Waukesha County is a member of the Moraine Lakes (ML) Consortium that includes the following counties: Fond du Lac, Ozaukee, Walworth and Washington County. Fond du Lac County is the lead agency with fiscal responsibility for the ML Consortium. Waukesha County administers a variety of Economic Support (ES) programs including Medical Assistance, FoodShare (Food Stamps), Child Care, a fraud elimination program, and the Low-Income Energy Assistance Program. Program benefit services are provided either directly or through a purchase of service contract based on eligibility for applicable program offerings.

Berg presented the Economic Support Services budget. General Government revenues decrease by about \$35,400 to \$3,493,000. This is the result of a reduction of \$221,400 in Patient Protection Affordable Care Act (PPACA) revenue as the PPACA funding is being decreased to \$138,200 and a decrease in the Fraud Consortium funding of \$12,200. It is offset by an increase of \$189,200 in the Income Maintenance Contract and the Day Care Administration Contract of \$10,200. The purpose of this State allocation is to determine child care eligibility, child care eligibility redetermination, child care authorization, provider and client fraud prevention and certification. Allocations that remain unchanged are the Low Income Energy Assistance benefit of \$321,800.

Other Revenues are budgeted to remain unchanged at about \$28,500. Waukesha County receives a percentage of collections from fraud recoveries for FoodShare, Medical Assistance and Aid For Families with Dependent Children (AFDC). Personnel costs decrease by \$112,500 to \$3,139,900. This is related to the net cost to continue of 45.66 FTE positions and the unfunding of 2.0 FTE PPACA sunset positions as the funding continues to be reduced as prescribed by state statute. Operating expenditures are budgeted to decrease by \$191 to \$394,300. These is a net decrease due to a loss of the Fraud Consortium payments of \$34,700, and are offset by an increase of \$24,000 for small equipment for the purchase ergonomic work stations recommended for the call center staff and three in-house technical call center training sessions of \$15,000. Interdepartmental charges decrease by \$2,900 to \$193,900, due to an increase in the End User Technology Fees (EUTF) of \$3,170 and offset by a decrease in the Collection Fee for outstanding fraud claims by \$5,500 to more closely align with the actual usage.

Berg presented the Program Activities section: Medical Assistance cases are predicted to remain stable. As noted, Childcare experienced a slight decrease in the number of cases. Per policy, applicants can qualify for subsidiary funding if able to meet the 200% of the poverty level threshold. The notable reduction of individuals receiving Foodshare is unclear as to the cause.

Proposed Adolescent and Family Services Division Budget – Ron Pupp

Provide court intake services, court supervision and treatment to delinquent youth, as well as juveniles and children in need of protection or services. Services to these children and their families are directed at maintaining the children in their own homes and communities, reducing delinquency recidivism and promoting family and public safety. Services include intake assessments; regularly scheduled family and individual meetings; collaboration with schools and academic programs; monitoring compliance with court orders and school attendance; conflict resolution; case coordination; group counseling; and independent living training/preparation. Educational support program; in-home treatment team services, intensive tracking; home detention; youth accountability groups; mediation; and electronic monitoring are provided through contracts. In addition to these in-home services, monitoring and coordination of Correctional and Correctional Aftercare placements, and monitoring and coordination of Foster Care, Group Home and Residential Care Center placements of delinquent youth and juveniles in need of protection and services are also provided.

Pupp presented the Adolescent and Family Services Division budget. General Government revenues are budgeted to decrease by \$100,000 to \$3,536,700, primarily due to a decrease in the Youth Aids allocation of \$74,000 as the result of a declining trend in correctional placements. There is also a decrease in the Independent Living revenues of \$21,000 as the program is scheduled to transition from a County allocation to a private consortium by June 30, 2017. Charges for Service revenues are budgeted to increase slightly by \$8,500 to \$158,200 based on an increasing population of juveniles on supervision. Other Revenues for SSI/SS Collections for cost of care decrease by \$8,200 based on fewer adolescents in out of home care who are receiving benefits.

Personnel costs are budgeted to decrease by about \$63,100 to \$3,475,300. This is due to unfunding a 1.0 FTE social worker and offset by the cost to continue of the 37.5 FTEs. Operating expenditures are budgeted to decrease by \$224,000 to \$2,476,600. This is primarily due to the elimination of the contract for educational support of \$228,758. This programming will be provided by the respective school districts. A transfer of \$25,000 was made from Juvenile Corrections budget to contracted services due to a decline in Correctional placements and the need to find alternative ways to support children in their schools. Interdepartmental charges increase by approximately \$114,600 to \$255,000 due primarily to the transfer of the Interdepartmental Legal Charges budget of \$81,600 from Administrative Services to the Adolescent and Family Services budget to more appropriately align with division usage. The Interdepartmental Collections fee budget of \$32,000 was also transferred from the Juvenile Center division to be consistent with how collection fees are reflected across the agency.

Pupp presented the Program Activities section: noted a significant increase in the number of young truants. There is an effort to address truancy at a younger age. Waukesha County is one of several counties involved in a pilot to use DRAI. Out of placement rate is tremendously low. The trend is expected to be less than 1. Recidivism rate for 2016 estimate is under 30%.

Pupp presented Juvenile Center 2017 budget, which provide 24-hour care and supervision to delinquent and status offender youth who are court-ordered to be held in boy's secure detention at the Juvenile Center. In addition, in 2012 female secure detention services were purchased from the Washington County Juvenile Detention Facility and effective July 1, 2015, Lad Lake, Inc. began providing male and female Shelter Care services through a contract at a licensed Residential Care Center located in Dousman, WI. General Government revenue from Basic County Allocation and Youth Aids is budgeted to remain at the 2016 budget of \$43,901. Charges for Services decrease by \$10,000 due to collection trend from clients. Fund Balance of \$30,000 is budgeted to cover short-term, temporary costs for female secure detention. Personnel costs increase by about \$22,600 to \$759,700 for 10.03 FTE's due to cost to continue. Operating expenditures are budgeted to increase by about \$77,000 to \$955,700 mainly due to an increase of about \$38,000 for additional short-term, temporary female secure detention costs, as well as \$16,700 for the cost of living increase related to the shelter care contract. This also includes \$20,000 for additional physical plant improvements specific to the shelter care contract, to deter youth from leaving. Interdepartmental charges decrease \$24,500 to \$59,900, due to the transfer of the Interdepartmental Collections fee budget of \$24,000 to the Adolescent and Family Services division to be consistent with how collection fees are reflected across the agency.

Proposed Veteran Services Division Budget – Mike Johannes

It is the mission of the Waukesha County Division of Veterans' Services to advocate for and assist all veterans of the U.S. Armed Services, their dependents, and survivors. The Division ensures that clients obtain all available and appropriate benefits for which they are entitled. The Division staff is committed to act in a courteous, effective, and fiscally responsible manner to maintain its reputation as one of the top veterans' service divisions in the State by providing maximum service to its clientele.

Johannes presented the Veterans Services Division 2017 Budget: General Government revenues of \$13,000 consist of a Wisconsin Department of Veterans' Affairs County Veterans' Service Office Grant from the State and remains unchanged in the 2017 budget. Personnel Costs decrease by \$2,300 to \$254,700 due to staff turnover and cost to continue. This is offset by a 2016 ordinance action to increase by 0.30 FTE in the Veteran Service Aide position to full time. Operating expenditures increase almost \$1,100 to \$42,000 mainly due to an increase of over \$3,200 in Promotion/PR Supplies, offset by a reduction of over \$2,000 in Outside Printing based on trend levels. Interdepartmental Charges decrease almost \$600 to \$19,000 mainly due to reductions in Postage and the allocation of Property Insurance, offset by an increase in EUTF.

Proposed Public Health Division 2017 Budget – Nancy Healy-Haney and Ben Jones

Dr. Clay and Mr. Genesen, from the Public Health Advisory Committee, were in attendance for the Public Health Division 2017 Budget review. Dr. Clay expressed concern regarding Public Health Division struggle to retain and recruit staff to meet workload capacity. Mr. Marshall Genesen expressed concern about Public Health's ability to maintain a level 2.

Healy-Haney presented a program description overview. The Administration Section provides leadership, direction and clinical competence in the overall management of the Public Health Division's human resources, program resources, and overall budget. This section is responsible for the Division's State of Wisconsin Administrative Code 140 certification review to maintain Level II health department status. The Family and Community Health Section provides services directly to individuals, families and to the population collectively. This section provides various services to individuals from early childhood to late in life through clinic visits, home visits or

community events. Child preventive health services can include childhood immunizations, lead poisoning screenings, child health checks, fluoride varnishing, and child neglect and abuse assessments. Adult health services consist of screenings and case management in areas such as: cholesterol, glucose, blood pressure, pregnancy testing, prenatal and postpartum monitoring, sexually transmitted diseases, and drug testing. This section oversees the County's Community Health Assessment and Improvement Plan and Process (CHIPP). The Women, Infants and Children (WIC) program is federally funded and provides nutrition assessments for prenatal and postpartum lactating mothers, infants under one year and children through five years of age. The Communicable Disease Control and Public Health Preparedness Section provide services to individuals, families and to the population collectively. This section provides communicable disease surveillance, investigations and interventions to control communicable diseases and outbreaks affecting individuals, families and businesses in Waukesha County. Public health preparedness is a rapidly evolving component of this section that addresses preparedness strategies for quick response to a range of public health threats, both intentional and unintentional, including biological, chemical or natural disasters.

Healy-Haney and Jones presented the Public Health Division 2017 budget. General Government revenues decreased over \$15,600 to \$824,000 mainly due to reductions in the following grants: Public Health Preparedness (BIO) - \$19,900 of which \$9,200 is due to an increase in revenue recognized in the HHS Administration Division; Cities Readiness (READY) \$8,300 and Women Infants and Children (WIC) - \$4,800; the reductions are offset by increases due to the following: a new Adult Immunization (IMMUAD) grant - \$11,386; and an increase in the Maternal Child Health (MATERN) grant -\$3,700. Charges for Services revenue increased almost \$36,000 to \$358,900 mainly due to an increase in the Travel Immunization Clinic as a result of increased Travel Clinic usage and an overall increase in service fees. Interdepartmental Revenues decreased over \$3,100 to \$275 due Waukesha County employees receiving services at the Waukesha Employee Health & Wellness Center. Personnel Costs are reduced by almost \$212,500 to \$2,888,300 mainly due a 2.87 FTE reduction to 34.87 FTE's. The reductions include the unfunding of the 1.0 FTE Health & Human Services Coordinator position and a 1.0 FTE Public Health Nurse position. The FTE reduction also includes the transfer of a 1.0 FTE Administrative Assistant position to HHS Administrative Services Admissions Unit, and offset by a 0.13 FTE net increase in various Extra Help positions. The reductions are offset by the cost to continue for the remaining 34.87 FTE's. Operating expenditures are reduced by \$54,500 to \$230,900 with the largest decreases in Travel - \$7,600; Outside Printing - \$7,500; Mileage Reimbursement - \$7,000; Medical Services - \$6,200; Prescription Meds - \$5,200; Office Supplies - \$4,500; Books, Publ, Subscrip - \$3,800; and Tuition & Registration - \$3,700. Interdepartmental Charges decrease over \$7,600 to about \$232,200 mostly due to decreases in the following areas: \$5,300 in Postage, \$2,600 in the Property Insurance allocation, \$1,600 in Telephone - Fixed, and \$1,200 in Cellular Phone - Fixed; the reductions are offset by an increase of \$3,000 in EUTF.

Jones presented Program Activities: Health check examinations are down slightly as WIC has experience a reduction in the number of clients. Jones noted urine drug screen, travel clinic and STD trend. Jones also updated the Board members on the Emergency Preparedness efforts and exercises.

Proposed Aging and Disability Resources Division 2017 Budget – Mary Smith

The Aging and Disability Resource Center (ADRC) Contract Fund is a Special Revenue Fund providing the public with information related to aging or living with a disability. Programs provide specialized counseling, support, and options to older adults and adults with disabilities in areas

related to elder and disability rights, income maintenance, housing, surrogate decision making, consumer/financial issues, legal and benefit problems, and health care financing. Core services include: information, referral, assistance, long-term care financial and functional eligibility, long-term care options, short-term case management, elderly and disability benefits counseling, prevention, early intervention, health promotion, outreach/marketing, advocacy, and emergency referrals for older adults, individuals with disabilities age 18 and above, and their families.

The ADRC honors choice, supports dignity, and maximizes independence.

Mary Smith presented on the ADRC contract and ADRC general 2017 budgets. General government revenue for the Aging and Disability Resource Center (ADRC) Contract fund is budgeted to increase about \$10,100 to \$3,176,400 due to program related costs-to-continue.

Net personnel costs are budgeted to decrease approximately \$107,100 to \$1,742,800 for 22.0 FTE. This decrease is primarily due to staff retirements, allowing for positions to be filled at a lower wage level, and the reallocation of 0.40 FTE Senior ADRC Specialist positions to Fund 150 Community Services Program to assist with growing Older Americans Act grant and Alzheimer's grant programming needs. Operating expenditures increase about \$126,500 to \$1,050,600 mainly due to contract staff positions, \$89,300; program promotion related materials, \$15,000; printing costs, \$9,700; newspaper related program advertising, \$4,200; office supplies, \$3,000; telecommunication equipment, \$1,700; copy machine service, \$1,400; postage, \$900; memberships, \$800; and program related books and publications, \$700. Interdepartmental charges decrease by about \$9,400 to \$383,100 primarily due to reallocation of insurance and copier replacement costs in the amount of about \$15,000 to Fund 150 ADRC Administration program to standardize the budgeting of these costs within the ADRC Division which conforms to HHS methodology. Utilization of HHS indirect cost plan will allow for inclusion of these costs. This cost reduction is partially offset by increases in postage, \$5,400; and EUTF, \$2,500.

Smith presented the Adult Protective Services 2017 budget. General government includes revenues from Supportive Home Care State Basic County allocation of \$259,000, and a State Basic County Allocation of \$227,700, to fund Adults-at-Risk activities and Adult Protective Services (APS). These funds remain unchanged from the 2016 budget. Charges for services are budgeted to remain at \$101,000, for adults who are in need of guardianship services or are found to be legally incompetent and unable to safely provide for their residential care and custody needs. The Waukesha County Department of Health and Human Services (HHS) is obligated to provide services and protection. Law enforcement and APS utilize Waukesha Memorial Hospital as a placement site for emergency protective placements for both adults at risk and elder adults at risk. HHS pays for the episode and then bills the client to recapture the costs. Other revenue is budgeted to increase approximately \$14,500 to about \$26,900 resulting from social security reimbursements for clients served by this program where the Waukesha County is the protective payee. Net personnel costs are budgeted to decrease approximately \$168,400 to about \$750,200 primarily due to the transfer of two Clinical Therapist positions to the Clinical Services Division to better align job functions with divisional service delivery. Operating expenditures are budgeted to decrease approximately \$236,400 to \$777,900. Of this decrease, \$132,300 is attributable to the anticipated transfer of APS clients who are eligible for Managed Care Organization (MCO) funding and a reduction in contracted services expenditures. During 2017, a "flat rate" reimbursement payment schedule for all volunteer and corporate guardians will be implemented resulting in a decrease of about \$83,000 from \$174,200 in previous year's budget. In addition, due to a reduction in the number of clients receiving ongoing care at Clearview Nursing Home and Facility for Individuals with Intellectual Disabilities (IID) in Dodge County, client care costs are anticipated to decrease \$40,200. These decreases are offset by an approximate \$17,300 increase in the annual Marsh

Country Health Alliance assessment fee budgeted at \$150,000 Interdepartmental charges are budgeted to decrease approximately \$3,200 to \$155,900 due to the reallocation of about \$9,800 insurance and copier replacement costs to the Aging and Disability Resource Center (ADRC) Administration program to standardize the allocation methodology of these types of costs within the HHS department. These reductions are offset by an increase in legal charges of about \$5,700.

Smith presented the ADRC Community Services 2017 budget. General government revenues are budgeted to increase about \$127,900 to approximately \$2,573,400 primarily due to additional Older Americans Act grant funding, \$76,900 (including increases of Supportive Services IIIB, \$30,600; Nutrition Services IIC1 & IIC2, \$23,200; Nutrition Incentive Services Program (NSIP), \$15,000; Family Caregiver Support IIIE, \$8,100); Alzheimer's grant, \$30,500; State of Wisconsin Specialized Transportation Grant, \$13,800; and Other State Revenue grant, \$6,700. Other revenue is budgeted to decrease approximately \$36,500 to about \$373,800 due to reduced nutrition program revenue from Managed Care Organization (MCO) meals of \$22,300, and client donations primarily due to nutrition services of \$14,100. Net personnel costs increase about \$29,700 to \$1,278,300 primarily for the cost-to-continue for existing 18.45 FTE and the reallocation of 0.40 FTE Senior ADRC Specialist staff from Fund 201 ADRC Contract Program to Fund 150 ADRC Community Services Program to assist with increasing Older Americans Act grant and Alzheimer's grant programming needs. Operating expenditures are budgeted to increase about \$93,000 to \$2,600,400 primarily due to anticipated increase in nutrition program food costs of \$47,600 to \$898,900 to serve a combined nutrition program total of 171,120, meals, an increase of about 11,600 meals from previous year's budget. Community based bath and respite care services are anticipated to increase \$39,200 and \$10,600 to \$148,200 and \$82,600, respectively. Alzheimer's grant related services are anticipated to increase \$27,400. Transportation services increase about \$16,700 to \$913,900 due to a Rideline contract vendor rate increase. These increases are partially offset by reductions in contracted staff costs, \$24,000 and adult day care service, \$18,300. Interdepartmental charges increase by about \$32,700 to \$132,400 due to reallocation of insurance and copier replacement costs in the amount of about \$9,800 from APS program and about \$15,000 from Fund 201 ADRC Contract to standardize the budgeting of these costs within the ADRC Division which conforms to HHS methodology. In addition, worker's compensation and telephone usage costs increase about \$5,800 and \$3,600, respectively.

Proposed Clinical Services Division 2017 Budget – Joan Sternweis, Dr. Gordon Owley, and Jeff Lewis

Sternweis presented a Division Overview. The Clinical Services Division provides behavioral medicine, treatment and support services to citizens of Waukesha County who are experiencing symptoms of mental health and substance abuse disorders. The service delivery system is consistent with State Statute Chapter 51 requirements and applicable state and federal regulations. The array of services creates a continuum of care including diagnostic services, medication management, crisis intervention, individual and group therapy, case management, independent living training, peer support, residential rehabilitation, and acute psychiatric inpatient treatment. Services are individualized to maximize each client's independence, recovery, self-management of symptoms, and to prevent relapse.

Sternweis also commented on the four budget areas. Briefly discussed adjustments made across the division based on service needs of people. Sternweis added you will not see opioid in the

wording. Staff budget for the service need, and crisis intervention. Sternweis commented on the Heroin Task Force Pillar activities and on the community's engagement on this issue.

Dr. Owley presented the Mental Health Outpatient – Clinical Budget. General Government revenues decrease by \$221,200 primarily as a result of consolidation of several state grants and allocation of the new consolidated grant to intensive outpatient services, and a result of a reduction of \$18,800 to a state grant for children with severe emotional disturbance. Other state funding remains constant: \$521,500 in AODA block grant funding, \$48,900 in the State Basic County Allocation for Child Abuse and Neglect services, and \$169,500 in Mental Health block grant funding. Fines and License revenues reflect a decrease in the amount of \$14,100 to \$357,000 to reflect prior year activity levels of Intoxicated Driver Program surcharge revenues. Charges for Services consist of client fee revenues, which are budgeted to increase by \$206,900 to \$963,600 based on current year estimates and additional revenue for crisis services and transitioning to open access for mental health clinic services. Other Revenues are budgeted to decrease \$21,500 related to a decrease of \$77,000 in Supplemental Security Income (SSI)/Social Security collections revenues, where the County is the protective payee for mental health clients. The decrease in revenue is partially offset by an increase of \$52,700 to \$655,200 in collections for adult and children located at the State Mental Health Institute. Wisconsin Medical Assistance Cost Reporting (WIMCR) program reimbursements increases by \$2,800 to reflect the current funding distribution between WCDHHS programs at the 2002 established Maintenance of Effort. A fund balance increase of \$260,000 provides one-time funding for increased costs for placements at state mental health institutions Personnel costs increase by approximately \$169,300 to \$3,879,700, mainly for the cost to continue for the 36.03 FTE staff assigned to this program. The budget includes \$160,900 of funding for 2.04 FTE for extra help staff, transfers .23 FTE Weekend Registered Nurse and .10 FTE Senior Clinical Psychologist from the Mental Health Center to implement crisis services mandated by 2015 Wisconsin Act 55. The budget also includes the cost to continue for other extra help based on current year actuals. Overtime FTE are reduced by .01 FTE to reflect an estimate based on current year actuals. Operating Expenditures increase \$999,700 to \$4,885,100 which includes a budget increase of \$648,500 to \$1,654,800 to Adult State Mental Health Institute costs related to an increase in the number of days of care by 748 to 1,520. In addition, there is an increase of \$213,400 to \$592,100 for children placed at the State Mental Health Institutes related to an increase in the number of days of care by 211 to 486. Also, contracted psychiatric services costs increase by \$337,600 due to additional psychiatric services for children and the cost to continue for existing contracted psychiatrists. Mental Health and AODA related pharmaceutical costs decrease \$278,600 due to increased efficiencies associated with the use of a contracted, on-site pharmacy. Contracted AODA services increase by \$59,700 based on increased costs for residential and detoxification services. Interdepartmental Charges reflects a net increase of about \$29,500 to \$337,800 which includes a decrease in collection activity of \$21,700 to \$78,000, and an increase in Sheriff interdepartmental transportation cost to continue of \$41,900 to \$89,000. Dr. Owley commented briefly on the program activities noting an anticipated significant increase in Outpatient AODA visits.

Sternweis presented the Mental Health Outpatient – Intensive Budget. The Mental Health Outpatient Intensive program (located at the Mental Health Center) is comprised of two units. The Treatment and Support Services Unit (TSSU) provides an array of community based mental health services to residents of Waukesha County through two state certified programs, Comprehensive Community Services (CCS) and Adult Mental Health Day Treatment. The second unit is the State certified Community Support Program (CSP). Additional services are provided through Targeted Case Management and Community Recovery Services (CRS) benefits for eligible clients. General

Government revenue increases by \$144,500 to \$692,400 as a result of the consolidation of several state grants and allocation of the new consolidated grant to intensive outpatient services. The \$603,712 consolidated grant combined funds previously received through the community options program (COP) grant, the CSP waitlist grant, and the certified mental health programs grant. The allocation of Basic County Allocation for the Community Support Program funding is maintained at \$88,600. Charges for Service revenues are budgeted to increase by about \$148,300 to \$4,063,800. This reflects a budgeted increase in client fee revenue for services billed to Medicaid for the Comprehensive Community Services (CCS) program by \$177,300 to \$2,658,000, based on an estimate of total expenses for which reimbursement will be available under the state's cost-based reimbursement model. Community Recovery Services (CRS) client fee revenue increases by \$63,100 to \$584,800 based on prior year actual revenues. The increases are partially offset by a decrease in Community Support Program (CSP) revenue by \$100,000 to \$744,300 based on lower revenue as a result of fewer clients with Medicaid eligibility. Other Revenue increases by \$10,700 to \$282,600 to reflect the current distribution for funding received for the State of Wisconsin Medical Assistance Cost Reporting (WIMCR) cost based reimbursement based reimbursement program. This state funding allocation to WCDHHS is budgeted to remain at the 2002 Maintenance of Effort. Personnel costs are budgeted to increase by \$123,400 to \$2,074,600. Personnel costs reflect the transfer of a 1.0 FTE clinical therapist from the Mental Health Outpatient-Clinical program area as well as an increase of .10 FTE of extra help based on an estimate of current year actuals and the addition of extra help in the CCS program to perform quality assurance activities. Operating expenditures are budgeted to decrease by about \$205,500 to nearly \$6,455,300. This reflects a decrease of \$105,000 in the treatment component for the CCS program and a decrease of \$265,600 in the treatment component for CRS based on lower Medicaid eligible caseloads. These decreases are partially offset by an increase of \$99,800 for specialized residential treatment costs. In addition, contracted treatment services and support costs increase by \$91,500 due to increases in use of contracted staff whose current professional credentials have allowed for increased billing. Operating expenses also decrease by \$16,300 for office equipment and \$5,500 for medication costs. Interdepartmental Charges increase by \$3,900 to \$233,900 mainly due to increases in computer maintenance and information system charges.

Lewis presented the Mental Health Center budget. The inpatient hospital program of the Mental Health Center provides 24-hour care including assessment, intervention, diagnosis and treatment for individuals with acute and chronic mental illnesses requiring diagnosis; medication monitoring and stabilization; individual, couple, and group counseling; and development of aftercare services. Alcohol detoxification management services are also provided. The facility has a capacity of 28 on two 14 bed units, and serves court-involved and voluntary patients. Charges for services increase by \$172,300 to \$2,994,300 primarily due to client fee revenues related to the 28 bed adult psychiatric hospital for the acute treatment of mental health including symptom stabilization, medication adjustment and emergency detentions (voluntary or involuntary) including Commercial Insurance, Medicare/Medicaid and self-pay reimbursements based on increases in insurance and Medicaid managed care reimbursements and higher census related to contracts for services with surrounding counties. Appropriated Fund Balance increases by \$203,700 to \$249,300 and is budgeted to cover equipment replacement and building improvement items that are needed to remain in compliance with State/Federal hospital regulations (facility is inspected annually). The 2017 fund balance appropriation is budgeted to cover the following replacement items: \$40,000 for resurfacing of two seclusion rooms, \$20,000 for Angled Bathroom Door project, \$100,000 for building improvements required as a result of the recent federal compliance audit primarily related to adding a drop ceiling to the stairwell for fire safety compliance, \$75,000 for an medication dispensing machine that will improve the efficiency of medication

administration and minimize costs by preventing expired usage, and \$14,200 for various furniture upgrades such as mattresses and replacement chairs. Personnel costs increase by approximately \$153,100 or 3.2% to about \$4,849,900 which includes the net cost to continue for 49.11 FTE positions. Personnel costs reflect the following changes to better reflect the actual operational and administrative time for the Mental Health Center: an increase of 0.60 FTE Psychiatrist and 0.10 FTE Senior Clinical Psychologist and a decrease of .23 FTE Weekend Registered Nurse reallocated from the Mental Health Outpatient- Clinical program to reflect adjustments to address operational efficiencies, vacancies and retirements; and an increase of .19 FTE Overtime and a decrease of .27 FTE Extra Help based on a estimate of current year utilization. Operating expenditures decrease approximately \$146,100 to \$938,400, primarily due to a \$140,000 decrease in medication costs. Contracted physician and psychiatrist costs increase by \$59,900 based on anticipated increases in medical and psychiatric wage rates in 2017, while food service costs decrease by \$17,200 and lab service costs decrease by \$29,600 based on lower prior year actuals.

Interdepartmental Charges are budgeted to decrease by \$2,100 to \$764,000, mainly due to a decrease in the estimated collection services costs of \$14,600. This decrease is partially offset by an increase of \$5,500 in end user technology fees, an increase of \$2,600 in medical malpractice insurance costs, and an increase of \$4,100 for increased phone and cell phone charges.

Paulson inquired as to new regulations in response to the recent audit. Lewis responded that some structural components have been in the building since inception, but now is required by the Federal Government to either replace or update to meet building codes. Lewis also noted this is connected to Medicare/Medicaid funding. Whitmore inquired about documentation components. Lewis noted that every time a client is seen a progress note must be written. The new model includes clients in the process to provide feedback on what transpired during a session. Collaboration is between the client and provider, a mutual note. Howard questioned is this a realistic goal. In addition, Just-in-Time scheduling discussed, which will add to the open access model to reduce no shows with the goal to go live November 1, 2016.

Proposed CJCC 2017 Budget – Rebecca Luczaj

Luczaj presented a CJCC program overview. The mission of the Waukesha County CJCC is to enhance public safety and promote the effective and efficient administration of the criminal justice system through community collaboration by ensuring offender accountability and providing rehabilitative services, while recognizing the rights and needs of victims. Luczaj emphasized the CJCC strategic objective that involves the national evidence based decision making initiative. Luczaj noted that phase 5 of this initiative concluded and that Waukesha County submitted an application to participate in phase 6.

General Government Revenue decreases by approximately \$17,600 to \$245,400, mainly due to the ending of the state Treatment Alternatives and Diversion (TAD) grant allocation for the funding cycle ending December 31, 2016. The budget includes \$125,000 that assumes WCDHHS will receive a new TAD grant allocation for the funding cycle beginning January 1, 2017, a reduction from the current year grant level of \$142,900. The federal Bureau of Justice Assistance (BJA) Drug Court Enhancement grant will end on September 30, 2017. However, the budget maintains 2016 BJA revenue for 2017 as a result of prior year underspending. General Government revenues also include, state Department of Corrections (DOC) revenue for the Community Service Options (CSO) program of \$23,800. Charges for Services are budgeted to decrease by \$14,100 to \$36,600. This is in anticipation of reduced revenue from client fees from the Alcohol Treatment Court and Day Report Center Programs based on prior year actuals. Alcohol Treatment Court participants

are charged a monthly fee using an income-based fee scale, which was implemented in June 2009 and is mandatory for all program participants. Day Report Center participants are charged a flat fee, which was implemented in October 2010 and is mandatory for all program participants based upon length of stay in the program. Personnel costs are budgeted to increase \$2,900 to \$115,800, reflecting the cost to continue for the 1.0 FTE Coordinator position. Operating expenditures are budgeted to decrease by about \$11,400 to \$1,226,100, mainly due to the end of the federal grant on September 30, 2017, which is partially offset by the cost to continue for contracted services. Interdepartmental Charges are budgeted to decrease by approximately \$500 to \$18,000, due to minor changes to various interdepartmental accounts.

Luczaj cited the 9 program activities and outcomes. Luczaj also noted the independent audit by the Sheriff Department regarding the definition of jail days saved and that CJCC does not equate the same way. It was also noted that Crisis staff provide crisis intervention services for jail inmates but not treatment.

Proposed Administrative Services Division 2017 Budget – Randy Setzer

Setzer stated the Division's program description. Along with providing the overall direction of the HHS Department, Administrative Services is responsible for coordinating and providing operational, fiscal and management information systems support. Major functions and responsibilities include the processing of client and provider payments, contract administration of vendor purchased services, commercial carrier contract negotiation, monitor and analyze legislative initiatives, the billing and service coding for Medicare, Medical Assistance, Commercial Insurance Carriers and responsible parties, and liaison to Human Resources. Monitor HHS compliance with the Health Insurance Portability & Accountability Act (HIPAA) Privacy Security/HITECH compliance, client medical records management. Department specific business application support, computer training and system administration, along with Department-wide data collection, analysis and reporting to various outside entities are coordinated and supported through this area.

Setzer began with objective 7.2, noting that the Department will modify current business policies to better meet customer needs, reduce denied claims, and improve revenue cycle integrity.

Setzer presented the 2017 budget. General Government revenues increase by \$14,100 to about \$8,553,000. This is primarily related to an increase of \$13,200 in administrative cost recovery from the Aging and Disability Resource Center (ADRC) State Contract to \$669,800. Other funding included in general government revenue had minimal increase is the Basic County Allocation of \$7,606,500, Indirect Cost Recovery from ADRC grants of \$64,300, Public Health Grants of \$77,100 and the Income Maintenance Allocation of \$115,000. Charges for services revenue from record copy services budgeted at \$23,000 remain unchanged from the 2016 budget. Other Revenues are budgeted to increase \$161,800 to \$330,100. This is related to the Wisconsin Medical Assistance Cost Reporting (WIMCR) program reimbursements to reflect the current funding distribution between WCDHHS programs at the 2002 established Maintenance of Effort. Fund Balance appropriation decrease by \$12,000 to \$-0- to reflect the final planned phase-down of General Fund balance use.

Personnel costs increase by about \$247,400 to \$4,675,900. This reflects a net cost to continue for the 63.94 FTE staff. This also reflects a transfer from the Public Health Division of 1.0 FTE of an Administrative Assistant to work in the Admissions unit, the establishment of 1.03 FTE related to the Limited Term Civilian Bailiffs to provide after-hours facility watch and building safety and the transfer of 1.29 FTE for after-hours reception duties at the Health and Human Services Center.

Operating expenses increase by about \$75,900 to approximately \$971,100 mainly from an increase in contracted services of about \$28,500 for the practice management system maintenance and licensure fees, and contracted staffing of \$46,000 to assist with the CORE project implementation.

Interdepartmental charges are higher by \$10,400 to \$846,400 mainly due to increased allocations of about \$6,300 for end user technology computer maintenance which partly relates to personnel changes and Workers Compensation charges of about \$8,400 due to an increase in the risk management insurance allocation.

Setzer presented the Family Care 2017 budget. General Government revenues of \$2,504,618 reflect a portion of State Community Aids – Basic County Allocation (BCA) received from the State Department of Health Services. Operating expenses for 2017 include the required payment back to the State Department of Health Services to meet the scheduled county contribution. The county is now at the scheduled legislated maintenance of effort (equal to 22% of the total long-term care expenditures for the final year that the County operated this program) the same amount annually hereafter to help pay for Waukesha County residents receiving benefits from the State's Family Care Program.

Recap and Summarization – Robertson

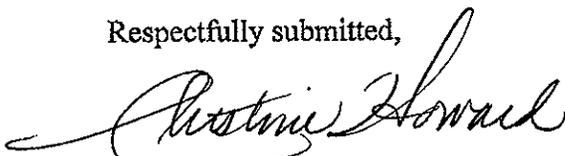
Robertson thanked all HHS Board members for their attentiveness and questions. Robertson also summarized the Department's ongoing challenges related to the budget or capacity to meet community needs. Robertson expressed his appreciation to his Management Team for their dedication to ensure services and programs are not compromised, especially during this budget cycle.

Adjournment

Howard made a motion to adjourn second by Zaborowski. The motion was voted on and carried 5-0. The meeting adjourned at 2:55 p.m.

Minutes recorded by Linda Johnson

Respectfully submitted,



Christine Howard

Secretary

Health and Human Services Board