AGENDA

Eau Claire County
Human Services Board Meeting **Date**: April 26, 2021

Time: 5 PM

Location: Virtual Meeting via WebEx Events

Those wishing to make public comments must submit their name and address no later than 30 minutes prior to the meeting to alexa.dennis@co.eau-claire.wi.us. Comments are limited to 3 minutes; you will be called on during the public comment section of the meeting. Written comments will also be accepted and should be submitted to alexa.dennis@co.eau-claire.wi.us

Public Access:

Dial in Number: 1-415-655-0001, Access Code: 145 615 6281

*mute your personal device upon entry

- 1. Welcome & Call to Order
- 2. Roll Call
- 3. Confirmation of Meeting Notice
- 4. Public Comment
- 5. Review of March 22, 2021 Meeting Minutes Action/Accept/Denial/Revise
- 6. Chair Comment
- Review of December 2020 Preliminary Financials Action/Accept/Denial/Revise
- 8. Review of February 2021 Financial Statements Action/Accept/Denial/Revise
- 9. Update on 2019 CCS GAP Discussion
- 10. Legislative Items related to Human Services- Discussion
- 11. American Rescue Plan Act as relates to Human Services Discussion
- 12. Director's Update
- 13. Adjourn

Next Human Services Board Meeting: May 3, 2021 (educational) and May 24, 2021

MINUTES

HUMAN SERVICES BOARD MEETING

Date: March 22, 2021 Time: 5 PM

Location: Virtual Meeting via WebEx Events

Present: Colleen Bates, Martha Nieman, Sandra McKinney, Katherine Schneider, Donald Mowry, Kimberly Cronk Citizen Members: Jim Catlin, Kathleen Clark, Lorraine Henning, Paul Maulucci

Absent: n/a

Others: Alexa Dennis – Committee Clerk, Diane Cable – DHS, Vickie Gardner – DHS, Chelsey Mayer – DHS, Jen Coyne – DHS, Stephanie Hirsch – DHS, Kathryn Shauf – Administration, Amy Weiss – Finance, Nick Smiar - Ex-Officio Member

Public: Ryan Patterson – Leader Telegram, other members of the public not identified present

Chair Bates called the meeting to order at 5:05 p.m.

Verbal roll call was taken for the Human Services Board and is noted above under present.

Chair Bates confirmed the meeting notice.

Chair Bates confirmed any public comment requests. Kathleen Clark motioned to approve. Supervisor Nieman seconded the motion. All in favor. Motioned carries unanimously.

The board reviewed the February 22nd, 2021 meeting minutes. Supervisor Schneider motioned to approve the minutes. Supervisor Cronk seconded the motion. All in favor, the minutes were approved. Correction – remove the word Supervisor from public comment paragraph.

Vickie Gardner with Human Services presented and discussed the December 2020 Preliminary Statements, which were also included in the Board Packet.

Vickie Gardner with Human Services presented and discussed ^{the} January 2021 Financial Statements, which were also included in the Board Packet.

• Action: Supervisor McKinney motioned to accept the review of the December 2020 Preliminary Statements and the January 2021 Financial Statements. Lorraine Henning seconded the motion. All in favor. Motioned carries unanimously.

Diane Cable shared with the Board that information will be sent out in the next week on Human Services Day at the Capitol for a virtual event on April 13th, 2021.

Diane Cable gave an update and shared a presentation on the COVID Impact, which was included in the Agenda Packet. The following items were discussed:

- Agency Updates
- Noted Impacts
- Vaccination Efforts
- American Rescue Plan Act of 2021

Diane Cable discussed the Department's plan on education of Race, Equity, Diversity and Inclusivity. Plans and steps include providing training and education around Black History month, more than 50 staff participated in different discussions on Race and Equity, held a Book Club, and are also planning more segments in the next few months on other topics. Also currently working on putting data together through the Department's different systems.

Diane Cable gave a Director's Update and reviewed the Board Narrative, which is included in the Agenda Packet. Board members gave suggestions on what they would like to see for data.

Social Work Month

Supervisor Schneider requested to have the Agenda Item: Future Agenda Items

The meeting was adjourned at 6:40 p.m.

Respectfully submitted,

Alexa Dennis Committee Clerk – Human Services

EAU CLAIRE COUNTY HUMAN SERVICES

Department Report - Division & Unit Updates
April 2021

Director - Diane Cable

Hello. April is Child Abuse Prevention Month. The theme for 2021 is "growing a Better tomorrow for all children, together" Just like plants need good soil to grow, positive childhood experiences in nurturing environments provide fertile ground for physical and mental health, learning, and social skills to flourish.

This month we have participated in several meetings with our legislatures representing Eau Claire County, to share and discuss the proposed budget items of Governor Evers. Included in this Board packet are the legislative white papers, put together by the Wisconsin Counties Association regarding the proposed budget related to Human Services.

The Department continues to work on closing out the 2020 fiscal year for the Department. This process typically is complete in early June. We continue to provide a monthly update, a preliminary projection of the prior year, which does fluctuate, as programs are reconciled, and final billing and expenses are addressed. A final reporting will occur once the process is complete.

BEHAVIORAL HEALTH (LUKE FEDIE)

Outpatient Clinic	(Jennifer Coyne)
Data	Clinic Group Activity:
	 Social Skills Matrix Treatment Group (meets once weekly): seven participants.
	Relapse Prevention Matrix Treatment Group (meets twice weekly): seven participants.
	AM Dialectical Behavior Therapy (meets once weekly): 11 participants.
	PM Dialectical Behavior Therapy (meets once weekly): eight participants.
	Seeking Safety (meets once weekly): five participants.
	On hold until we hire another counselor: Family Education Matrix Treatment Group (meets once weekly).
	Early Recovery Skills Matrix Treatment Group (meets twice weekly) has resumed with three
	participants. We expect up to five more participants in May.
	Implementing data gathering using pre- and post-questionnaires and satisfaction surveys for
	DBT participants.
	25 referrals to the clinic in March and April.
	12 pre-covid client waiting to go back to in-office visits.
Key Issues	Participants may attend more than one group weekly.
	Some groups are dedicated to Treatment Court participants only, while others accept referrals
	from other internal DHS units as well as external sources.
	Plan to train our new therapist in Prepare and Enrich, which is an evidence-based, brief,
	couples therapy modality to address healthy relationships. This will be paid for under the
	treatment courts grants and will address one of the "criminogenic needs."
	Even with a new therapist, will continue to have a wait list for services.
Staffing Updates	Joshua Bleskachek, formerly of Arbor Place will join the outpatient team on May 17th. He has a
	masters degree in psychology and is licensed as a substance abuse counselor. He is also an Eau
	Claire resident and believes he'll find his "professional home" with the County.

Treatment Courts (Jennifer Coyne)

Data	•	Referrals decreased in 2020, but are now increasing.
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- 13 referrals in March and April.
- Three admissions and four awaiting pending charges from other counties to be resolved.
- Six were screen out due to unavailability or not meeting criteria.

	We will be investigating whether we should continue to require all out-of-County charges to be
	resolved before admission. This appears to be a significant barrier.
Key Issues	The new predatory drug dealer policy has been modified and implemented.
	Continuing to work with CJCC to pilot RED (Racial and Ethnic Disparities) Program Tool.
	• Treatment Courts paid for three past participants to be certified as Peer Support Specialists.
	They successfully completed this training.
Staffing Updates	Tessa Sarauer, Administrative Specialist, tendered her resignation. Kelly Henneman from CSP will
	be make a lateral move, replacing Tessa.

Community Support Program (Lynn Wilson)		
Data	Holding steady at 109 current participants.	
	Admitted two clients to CSP in April.	
	18 participants on the CSP referral list.	
Key Issues	Clients who have been vaccinated will begin to meet in person with Dr. McCafferty.	
	More clients are utilizing virtual contact with case managers and prescribers.	
	Exploring the use of Panda Docs for virtual signing of our documents.	
	The Comprehensive Assessment Workgroup continues to meet to revise the assessment format.	
	The CSP staff reviewed records of their cases to identify areas in need of attention in	
	preparation for our review early next year.	
Staffing Updates	Erin Ludwikowski was hired as the new CSP Case Manager.	
	Therapist Case Manager position continues to remain open.	

Crisis Services (Lita Prorok)	
Data	March data:
	249 crisis contacts.
	27 emergency detentions (67% local inpatient units).
	Diversion from hospitalization in 89% of contacts.
	27 face-to-face assessments.
Key Issues	Positive Avenues ended their 24/7 service in collaboration with Sojourner House. As of April, they will return to providing only daytime recovery services (while Sojourner will focus only on the overnight shelter needs). This will allow Positive Avenues staff to focus more time and attention on the crisis stabilization services they are contracted with us to provide.
Staffing Updates	Currently doing interviews for the open Crisis Social Worker position.

Adult Protective S	Services (Nancy Huberty)
February data:	March data:
	35 investigation requests, with 31 screened in.
	16 investigations concluded, with five substantiated, eight unsubstantiated, and three unable substantiate.
	 Most common allegations were self-neglect (36% of cases), neglect (20% of cases), financial
	abuse (14% of cases), request for guardianships (20% of cases), and 10% were Emergency
	Protective Placements or Conversions from 51.15 to 55.
Key Issues	An ongoing challenge has been isolation due to COVID and lack of available community resources.
Staffing Updates	Interviews for the open APS position were concluded at the end of March. Offer was made and
	accepted. New APS Social Worker first day on team is 4/26/2021.

Jail Re-Entry (Nancy Huberty)	
Data	Continued contact with 40 clients, of which 14 were new or self-referrals leaving the Jail.

Key Issues	Winter clothing items provided to clients.
	Locating new housing options.
	• Continued updates on the status of Sojourner House (related to its move to Barstow April 1st).
	Working with partners for resources: Western Dairyland (housing), EXPO (temporary sponsor)
	list), Workforce Resource (additional programs)
Staffing Updates	Current Jail Re-entry Social Worker resigned her position. Posting and interviews to occur in April.

Comprehensive Community Services (CCS) Program (Cinthia Wiebusch, Kerry Swoboda)		
Data	March data:	
	• 35 admissions	
	56 discharges	
	76 external referrals, 10 internal referrals	
	70 Adults waiting for CCS services	
	97 Youth waiting for CCS services	
Key Issues	 Working with the State on decreasing and eventually eliminating the CCS waitlist. 	
	Developing an internal Quality Assurance process.	
	Working with the B.E.St consortium to find effective ways to deliver services to participants.	
	Demand remains high.	
Staffing Updates	Three new Service Facilitators started on April 5, one new Service Facilitator and one new	
	Substance Use Professional will be starting on April 19.	
	• The CCS Program continues to interview for the following positions: four Service Facilitators,	
	one Administrative Assistant, and one Quality Assurance, to fill current vacancies.	

Children's Long-T	Children's Long-Term Support (CLTS/CCOP) Waiver (Kerry Swoboda)		
Data	Current CLTS Enrollment: 240		
	Current CLTS Waitlist: 115		
	One referral needing a screen.		
	22 referrals in process of being screened.		
Key Issues	Continuing to enroll more children from the State waitlist, and demand remains high.		
	State expectation for no waitlist; need all children enrolled on waitlist before November 2020		
	enrolled by March 31, 2021.		
	Families are waiting a significant amount of time to receive CLTS services.		
	Continuing internal triage process involving the Mental Health Professionals to determine		
	programmatic eligibility for the CCS program.		
Staffing Updates	Four CLTS Social Workers were hired since October 2020, and currently have one vacancy. There is		
	some progress on enrolling children from the waitlist, and team continues to assess staffing needs		
	in this area.		

FAMILY SERVICES (TERRI BOHL)

Access and Initial Assessment (Tasha Alexander)		
Data	March data: 112 total reports received; 32 screened in and 80 screened out	
Key Issues	N/A	
Staffing Updates	Social Worker remains on FMLA after she and her husband welcomed their baby girl. Jen Carey has been able to assist in providing some coverage in IA while also working within her current role. A new person for the Strengthening Families Program will be teaming directly with the IA team and start on 5/24.	

Ongoing Child Protective Services (Courtney Wick & Melissa Christopherson)		
Data	As of April:	
	Unit is serving 205 children (58% are served in out-of-home care)	

	• These children are in 111 families (65% of families have a child in out-of-home care)
Key Issues	 Housing and transportation continue to be a barriers for those served – specifically housing
	has been a barrier to reunifying children with their parents.
	Continued impact of the pandemic on service provision.
	 Contracted attorneys have been helping to move forward with TPRs.
Staffing Updates	One vacancy in Ongoing CPS and team is currently juggling caseload coverage for several employee
	leaves.

Youth Services (Hannah Keller)				
Data	As of April			
	24 Youth in Out of Home Care			
	Serving 109 Families, representing 118 youth			
Key Issues	Continue to see need for services for youth, including younger children, with complex mental			
	health, developmental, cognitive, and criminogenic needs.			
Staffing Updates	No staffing updates.			

Alternate Care (N	lelissa Christopherson)
Data	March data: 158 children in out-of-home care.
Key Issues	 Planning a recruitment event in partnership with Chippewa County. One Alternate Care staff member is being trained in Triple P Parenting to provide this to foster families. Team continues to be over capacity due to influx of new placements with relatives and fictive kin requiring new licensing. Planning continues for May Foster Parents Month by preparing flyer and a save the date for the Alternate Care picnic on Sunday, August 15th at the 10th Street Park in Altoona. Continuing to provide outreach, in partnership with Chippewa County, for recruitment of children for Royal Family Kids Camp which is free for kids in foster care or kinship care.
Staffing Updates	Social Worker moving on from her role as an Ongoing CPS worker to be a full-time therapist and her last day was 04/23/2021.

Birth to Three Program (Melissa Christopherson)			
Data	March data: 115 children currently being served.		
Key Issues	Continuing to work with Chippewa County on grant-funded effort to improve awareness of program and of importance of social/emotional development.		
Staffing Updates	None		

Juvenile Detention	n Center (Rob Fadness & Michael Ludgatis) COMPLETE!
Data	March Population:
	28 admissions (14 Eau Claire County residents)
	19 short-term youth (six Eau Claire County youth)
	Nine 180 Program youth (one Eau Claire County youth, two youth discharged)
	Average Daily Population: 14.4 youth
	63% Occupancy rate
	Climate survey ratings (out of 100%):
	• Staff: 74%

	Safety: 66%
	• Cleanliness: 77%
	Overall: 71%
Key Issues	• 47 incident reports - 49 incidents in February.
	Current trend toward younger placements:
	o 13-14 years of age
	 Self-harm concerns
	 Covid-19 safety protocols are continuously monitored, reviewed and updated to meet
	population needs.
	 No confirmed cases of Covid-19 among youth
Staffing Updates	2 staff attending 160 Hour Basic Juvenile Detention Worker training in Racine
	One .50 FTE Juvenile Detention Worker on "Hold"

ECONOMIC SUPPORT (KATHY WELKE, JANE OLSON, JEN DAHL, CINDY DRURY)

Data	March data for all consortium members counties:
	2,621 applications processed
	• 1,139 renewals processed
	• 7,545 calls received
	62,544 active cases, with 13,674 in Eau Claire County
	1,339 active Child Care Cases, with 384 in Eau Claire County
	• 3, 096 applications for energy assistance processed (as of 4/19/21)
Key Issues	Structured case review process underway targeting State Active Error rates.
	Unit continues to operate under Covid-19 emergency rules, many of which allow customers
	easier access to Income Maintenance services.
Staffing Updates	Consortium and County is considering how operations and staffing will need to adjust if Covid-19
	emergency rules phase out.

For Preliminary December 2020 Human Services Board Meeting Held on 4/26/2021

The December financials indicate an overage for the Department. The overall financial projection of the program areas are within budget. Revenues for the year have lagged.

Financial Year-end Surplus/(Deficit) Estimate: (\$95,262)

Contributing Factors which favorably impact financial outcomes

- Personnel costs (not fully staffed)
- Become Provider CCS services by Out Patient Mental Health Clinic
- Mandatory Furloughs
- Voluntary Furloughs
- Additional Income Maintenance revenue from year-end Great Rivers Consortium reconciliation process – 264K

Contributing factors which negatively impact financial outcomes

- Revenue lagging monthly budgeted projection
 - Due to COVID
 - Less Client Services
 - Mandatory/Voluntary Furloughs impacting revenues and service delivery
- Overall increased utilization and costs
 - Winnebago and Mendota
 - o Trempealeau
- CCS Non-billable expenses \$330K

Eau Claire County

Department of Human Services

Preliminary Financial Statement w/o CCS Estimated for the Period January 1, 2020 through December 31, 2020

Revenue	Net YTD Budget	YTD Actual Transacations	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Tax Levy	8,907,473	8,907,473		8,907,473	
04-Intergovernment Grants and Aid		***************************************			***************************************
(State & Federal Grants)	11,309,086	9,285,666	1,782,209	11,067,874	(241,212)
05-Intergovernmental Charges for					
Services (Medicaid & Other Counties)	4,022,442	3,257,094	243,292	3,500,386	(522,056)
06-Public Charges for Services (Client		***************************************			
Contributions)	941,381	878,417	27,702	906,119	(35,262)
09-Other Revenue (TAP & Misc.)	183,368	167,981	12,987	180,967	(2,401)
Total Revenue	25,363,750	22,496,631	2,066,189	24,562,820	(800,930)

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	9,187,888	8,463,776		8,463,776	724,112
02-OT Wages	-	55,615	***************************************	55,615	(55,615)
03-Payroll Benefits	4,173,725	3,772,140	-	3,772,140	401,584
04-Contracted Services	11,403,792	11,563,114	484,094	12,047,208	(643,416)
05-Supplies & Expenses	467,864	244,928		244,928	222,936
07-Fixed Charges (Liability Insurance)	63,207	68,620		68,620	(5,414)
09-Equipment	67,275	5,795		5,795	61,480
10-Other	-	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· -	-
Total Expenditures	25,363,751	24,173,988	484,094	24,658,082	705,668

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December 2019 Deficit

(2,180,909)

Revenue Adjustments Included:

State/Federal	1,782,209
MA/Other Counties	243,292
Public Charges	27,702
Other- TAP Grant	 12,987
	\$ 2.066.189

Expense Adjustments Included:

Wages and Benefits		-
Liability Insurance		·-
Addt'l Contracted Services		152,600
Non-CCS Program Expenses		329,494
Winnebago		₩.
TCHCC		-
	. \$	482,094

Eau Claire County

Department of Human Services

Preliminary CCS Financial Statement Estimated for the Period January 1, 2020 through December 31, 2020

06-Public Charges for Services (Client Contributions) 33,714 27,702 (27,702) (33,714) (Revenue	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
State & Federal Grants	01-Tax Levy	e .				
Services (Medicaid & Other Counties) 6,218,928 6,603,463 (1,590,960) 5,012,503 (1,206,425) OF-Public Charges for Services (Client Contributions) 33,714 27,702 (27,702) - (33,714) OF-Other Revenue	-	_		_	· -	_
106-Public Charges for Services (client contributions) 33,714 27,702 (27,702) (33,714)	05-Intergovernmental Charges for					
Contributions 33,714 27,702 (27,702) (33,714)	***************************************	6,218,928	6,603,463	(1,590,960)	5,012,503	(1,206,425)
Net YTD		33,714	27,702	(27,702)		(33,714)
Net YTD Net YTD Net YTD Actual Estimated Net Variance Net Variance	09-Other Revenue				-	
Expenditures Budget Transactions Adjustments Transactions Excess (Deficient)	Total Revenue	6,252,642	6,631,164	(1,618,662)	5,012,503	(1,240,139)
01-Regular Wages 3,211,695 2,564,342 - 2,564,342 647,353 02-OT Wages - 1,106 - 1,106 (1,106) 03-Payroll Benefits 1,391,058 1,073,793 - 1,073,793 317,265 04-Contracted Services 3,361,736 3,614,677 (329,494) 3,285,183 76,553 05-Supplies & Expenses 36,700 24,583 - 24,583 12,117 09-Equipment - 827 - 827 (827) AMSO Allocation 645,715 411,396 411,396 234,319 Total Expenditures 8,646,904 7,690,723 (329,494) 7,361,229 1,285,675 Excess (Deficiency) of Revenue over Expenditures 11-Fund Balance Applied (2020 CCS Est. Gap, Rec'd 2021) (2,394,262) - - - (2,394,262) 2020 CCS Est. Gap Rec'd 2021 (2,394,262) - - - (2,394,262) 2020 CCS Est. Gap Rec'd 2021 (2,36,749) 2019 WIMCR (1,831,211) Public Charges (27,702) \$ (1,618,662) - - - - (2,394,262) Expense Adjustments Included: - - - - - - - <td< td=""><td>Expenditures</td><td></td><td></td><td></td><td>-</td><td></td></td<>	Expenditures				-	
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2018 WIMCR (236,749) 2019 WIMCR (1,831,211) Public Charges (27,702) \$ (1,618,662) Expense Adjustments Included: Accrued Wages 1/15/21 - Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)	Revenue Adjustments Included:					
2019 WIMCR (1,831,211) Public Charges (27,702) \$ (1,618,662) Expense Adjustments Included: Accrued Wages 1/15/21 - Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)	MA	477,000				
Public Charges (27,702) \$ (1,618,662) Expense Adjustments Included: Accrued Wages 1/15/21 - Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)	2018 WIMCR					
\$ (1,618,662) Expense Adjustments Included: Accrued Wages 1/15/21 - Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)	2019 WIMCR					
Expense Adjustments Included: Accrued Wages 1/15/21 - Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)			·			
Accrued Wages 1/15/21 - Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)		, , ,				
Accrued Benefits 1/15/21 - Non-CCS Program Expenses (329,494)	· ·					
Non-CCS Program Expenses (329,494)		-				
		(320 404)				

DHS Child Alternate Care and Adult Institutions For Preliminary Period Ending 12/31/2020

Children in Foster Care (FC) /Treatment Foster Care (TFC)/Residential Care Centers (RCC)/Group Homes (GH)

			2020)		
	New					
	Placements	Clients	Budget		Expense	(Over)/Under Budget
FC	3	97	\$ 95,660	\$	151,038	\$ (55,378)
TFC	1	13	\$ 26,706	\$	9,288	\$ 17,418
GH	0	1	\$ 8,668	\$	11,135	\$ (2,467)
RCC	1	6	\$ 125,679	\$	71,233	\$ 54,446
December Total	5	117	\$ 256,713	\$	242,694	\$ 14,019
2020 YTD Total	97	225	\$ 3,080,552	\$	3,126,098	\$ (45,546)
2019 YTD Comparison	101	262	\$ 2,817,628	\$	4,209,061	\$ (1,391,433)

	e de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela composición de la composición dela c	Juvenile Co	rrections	s (Lir	ncoln Hills/C	Орр	er Lake)	00000000000000000000000000000000000000	
					20	20			
		New							
		Placements	Clients		Budget		Expense	(Over)/Unde	r Budget
December Total		0	0	\$	•	\$	-	\$	-
2020 YTD Total	70000 70000 70000 10000	0	0	\$	-	\$	_	\$	-
2019 YTD Comparison									

		In	stitute f	or N	/lental Diseas	e		en de la compressión de la sextra confederación de la confederación de la compressión de la confederación de l
					2020	0		
		New Placements	Clients		Budget		Expense	(Over)/Under Budget
TCHCC		2	9	\$	25,902	\$	52,560	\$ (26,659)
Winnebago		3	4	\$	33,352	\$	39,042	\$ (5,690)
Mendota		0	0	\$	5,500	\$		\$ 5,500
December Total		5	13	\$	64,754	\$	91,602	\$ (26,848)
2020 YTD Total		61	72	\$	777,045	\$	1,766,619	\$ (989,574)
2019 YTD Comparison	1000 1000 1000 1000 1000	84	97	\$	773,185	\$	1,989,910	\$ (1,216,725)

Northern	1/S	outhern Cent	ters (Adı	ult/C	Child Develop	me	entaly Disa	bled (DD))
					202	0		
		New Placements	Clients		Budget		Expense	(Over)/Under Budget
December Total		0	0	\$	-	\$	-	
2020 YTD Total		0	0	\$	-	\$		
2019 YTD Comparison								

Adult Far	mily	Homes (AFI	⊣) & Co n	ımu	nity Based Ro	esi	dential Faci	lit	y (CBRF)
					2020	0			
		New Placements	Clients		Budget		Expense		(Over)/Under Budget
AFH		2	11	\$	69,114	\$	105,170	\$	(36,056)
CBRF		0	15	\$	108,837	\$	155,978	\$	(47,141)
December Total		2	26	\$	177,952	\$	261,148	\$	(83,197)
2020 YTD Total		32	69	\$	2,135,418	\$	1,950,147	\$	185,271
2019 YTD Comparison	170	48	114	\$	1,511,881	\$	2,510,713	\$	(998,832)

ALTERNATE CARE REPORT Preliminary Month Ending December 2020

Level of Care	Foster Care	Therapeutic Foster Care	Group Home	Residential Care Center	Total

		November			December			VTD		Ave Cost per
	Placements	Clients	Days	Placements	Clients	Number of Days	Placements	Clients	Days	Day
are	15	96	2,708	3	26	2,928	72	172	32,039	\$50
are	3	12	287	1	13	363	11	26	4,301	\$49
me	0	3	70	0	1	31	9	10	744	\$297
iter	0	5	150	1	9	144	8	17	2,205	\$498
tal	18	116	3,215	5	117	3,466	97	225	39,289	

Adjusted Budget - November	\$ 1,052,258	\$ 293,762	\$ 95,347	\$ 1,382,472	0000000
Level of Care	Foster Care	Therapeutic Foster Care	Group Home	Residential Care Center	1-7-20

Adjustec	d Budget			Percentage Used	Adjusted Budget	De
- Nov	ember	Œ	xpense	- November	December	E
Foster Care \$ 1,0	52,258	\$	168,520	137.0%	\$ 1,147,918	es.
\$ 2	93,762	8	11,348	70.9%	\$ 320,468	€>
S	95,347	↔	19,525	222.1%	\$ 104,015	\$
\$ 1,3	82,472	ક્ર	73,404	74.3%	\$ 1,508,151	\$
\$ 2,8	23,839	89	272,797	102.3%	\$ 3,080,552	S
					Adjusted Budget November - November - Street - Bxpense S 1,052,258 \$ 168,520 \$ \$ 293,762 \$ 11,348 \$ \$ 95,347 \$ 19,525 \$ \$ 1,382,472 \$ 73,404 \$ \$ 2,823,839 \$ 2,72,797 \$	Adjusted Budget November Percentage Used AG - November - November - De \$ 1,052,258 \$ 168,520 137.0% \$ 1, \$ 293,762 \$ 11,348 70.9% \$ 1, \$ 95,347 \$ 19,525 222.1% \$ 5 \$ 1,382,472 \$ 73,404 74.3% \$ 1, \$ 2,823,839 \$ 2,72,797 102.3% \$ 3,

135.9%

195.1%

16,000 \$ 31,210 60,300 \$ 53,724

212.1%

↔ ↔

7,450 \$ 10,127

166,000 \$279,167

139.2% 65.5%

1,597,604

S

151,038

209,806 220,648

9,288 11,135 71,233 242,694

149.8%

\$ 249,750 \$374,228

101.5%

3,126,098 1,098,040

72.8%

89.1%

Collected 168.2%

Revenue YTD

Adjusted Budget

Percent Used

YTD Expense

December Expense

Expense

Percent

Revenue

NOTES:

Eau Claire County	Department of Human Services	Preliminary YTD Program Expenditures Summary	Thru December 31, 2020
-------------------	------------------------------	--	------------------------

-	Σ	Monthly		YTD	Year End
	Budgeted	Adjusted Actual	Budgeted	Adjusted Actual	Annualized
		% of		% of	
		Expenses		Expenses	%
Program	Expenses Targeted %	<u>Expenses</u> Utilized	Expenses Targeted %	<u>Expenses</u> <u>Utilized</u>	<u>Expenses</u> <u>Annualized</u>
1. Community Care & Treatment of Children					
who are Abused or Neglected	\$473,012 8.3%	\$561,575 9.9%	% \$5,676,138 100.0%	\$6,904,107 121.6%	\$6,904,107.1 121.6%
2. Community Care & Treatment of Adults &					
Children with BH Issues	\$1,466,759 8.3%	\$1,351,190 7.7%	% \$17,601,102 100.0%	% \$15,781,897 89.7 %	\$15,781,897.3 89.7%
3. Community Care & Treament of					
Developmentally Disabled or Delayed	\$109,069 8.3%	\$284,770 21.8%	% \$1,308,824 100.0%	3% \$1,453,457 111.1%	\$1,453,456.7 111.1%
A Community of Transfer and Telephone					
T. Community Care and Treatment of Touth	\$399,474 8.3%	\$289,831 6.0%	% \$4,793,691 100.0%	33,690,649 77.0%	\$3,690,649.5
			c		
5. Protection of Vulnerable Adults	\$62,619 8.3%	\$69,116 9.2%	\$751,431 100.0%	% \$795,490 105.9 %	\$795,489.5 105.9%
6. Financial & Economic Assistance	\$323,289	\$269,099 6.9%	\$3,879,467 100.0%	\$3,393,711 87.5%	\$3,393,711.2
Total	\$2,834,221 8.3%	\$2,825,581 8.3%	% \$34,010,653 100.0%	\$32,019,311 94.1%	\$32,019,311 94.1%

For Preliminary February 2021 Human Services Board Meeting Held on 4/26/2021

The February financials indicate a small surplus for the Department. The overall financial projection of the program areas are within budget. Most of the revenues are estimates.

Financial Surplus/(Deficit) Estimate:

\$8,505

Contributing Factors which favorably impact financial outcomes

• Personnel costs (not fully staffed)

Contributing factors which negatively impact financial outcomes

Annual Replacement IT Equipment allocation of \$125K

Eau Claire County

Department of Human Services

Financial Statement w/o CCS Estimated for the Period January 1, 2021 through February 28, 2021

Revenue	Net YTD Budget	YTD Actual Transacations	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Tax Levy	1,432,084	1,432,084	0	1,432,084	F
04-Intergovernment Grants and Aid					
(State & Federal Grants)	1,837,337	73,576	1,763,999	1,837,575	238
05-Intergovernmental Charges for					
Services (Medicaid & Other Counties)	805,374	3,524	448,290	451,814	(353,560)
06-Public Charges for Services (Client	***************************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Contributions)	135,629	48,801	2,429	51,230	(84,400)
09-Other Revenue (TAP & Misc.)	58,024	7,307	(10,424)	(3,117)	(61,141)
Total Revenue	4,268,447	1,565,291	2,204,294	3,769,585	(498,862)

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	1,543,281	1,040,542	309,458	1,349,999	193,281
02-OT Wages	_	14,283	-	14,283	(14,283)
03-Payroll Benefits	718,546	596,467	45,597	642,063	76,483
04-Contracted Services	1,918,221	1,430,271	237,503	1,667,775	250,446
05-Supplies & Expenses	73,308	47,892		47,892	25,416
07-Fixed Charges (Liability Insurance)	13,666	20,539	(6,948)	13,591	75
09-Equipment	1,427	35,970	(10,491)	25,479	(24,052)
10-Other	_	-	-	*	
Total Expenditures	4,268,449	3,185,964	575,118	3,761,082	507,367

Excess (Deficiency) of Revenue over Expenditures

8,505

February 2020 Deficit

(343,310)

Revenue Adjustments Included:

State/Federal	1,763,999
MA/Other Counties	448,290
Public Charges	2,429
Other	 (10,424)
	\$ 2,204,293

Expense Adjustments Included:

Overhead	25,684
Wages and Benefits	355,055
Addt'l Contracted Services	108,949
Winnebago	77,562
TCHCC	25,308
Liability Insurance	(6,948)
IT Equipment-Quarterly Allocation	(10,491)
	\$ 575 118

Eau Claire County Department of Human Services

CCS Financial Statement Estimated for the Period January 1, 2021 through February 28, 2021

Davanua	Net YTD	YTD Actual Transactions	Estimated	YTD Adjusted Transactions	Net Variance
Revenue	Budget	transactions	Adjustments	Transactions	Excess (Deficient)
01-Tax Levy		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
04-Intergovernment Grants and Aid					•
(State & Federal Grants)	_	_	_	_	-
05-Intergovernmental Charges for					
Services (Medicald & Other Counties)	1,264,265		848,500	848,500) (415,765)
06-Public Charges for Services (Client			•••••••••••••••••••••••••••••••••••••••		***************************************
Contributions)	7,000	2,429	(2,429)	-	(7,000)
09-Other Revenue					
11-Fund Balance Applied (2021 ccs	•••••••••••				
Est.Gap, Rec'd 2022)	(470,208)	-	-	-	(470,208)
Total Revenue	1,271,265	2,429	846,071	848,500	(892,973)

Expenditures	Net YTD Budget	YTD Actual Transactions	Estimated Adjustments	YTD Adjusted Transactions	Net Variance Excess (Deficient)
01-Regular Wages	539,905	319,179	103,423	422,602	117,303
02-OT Wages	-	-	-	-	-
03-Payroll Benefits	230,476	151,888	14,693	166,581	63,894
04-Contracted Services	870,755	311,678	202,124	513,802	356,953
05-Supplies & Expenses	6,329	10,958		10,958	(4,628)
09-Equipment	-		-	-	-
AMSO Allocation	94,008	59,289		59,289	34,719
Total Expenditures	1,741,473	852,993	320,240	1,173,233	568,241

Excess (Deficiency) of Revenue over Expenditures

(324,733)

Revenue Adjustments Included:	
-------------------------------	--

848,500
(2,429)
\$ 846,071
103,423
14,693
(3,163)
205,287
\$ 320,240
\$

DHS Child Alternate Care and Adult Institutions For Preliminary Period Ending 2/28/2021

Children in Foster Care (FC) /Treatment Foster Care (TFC)/Residential Care Centers (RCC)/Group Homes (GH)

		2021									
	New Placements	Clients		Budget		Expense		(Over)/Under Budget			
FC	3	94	\$	106,731	\$	112,218	\$	(5,487)			
TFC	0	14	\$	14,702	\$	54,642	\$	(39,940)			
GH	0	0	\$	15,750	\$	1,365	\$	14,385			
RCC	1	6	\$	106,903	\$	86,829	\$	20,074			
February Total	4	114	\$	244,086	\$	255,054	\$	(10,968)			
2021 YTD Total	10	123	\$	488,172	\$	502,398	\$	(14,226)			
2020 YTD Comparison	10	138	\$	513,425	\$	548,283	\$	(34,858)			

от водительной водитель	Juvenile Corrections (Lincoln Hills/Copper Lake)											
			2021									
		New										
		Placements	Clients		Budget		Expense	(Ove	r)/Under	Budget		
February Total		0	0	\$	•	\$	-	\$		-		
2021 YTD Total		0	0	\$		\$	-	\$		-		
2020 YTD Comparison												

Institute for Mental Disease												
			2021									
		New Placements	Clients		Budget	٠	Expense		(Over)/Under Budget			
TCHCC		1	7	\$	17,283	\$	25,308	\$	(8,025)			
Winnebago		4	8	\$	36,044	\$	84,622	\$	(48,578)			
Mendota		0	0	\$	-	\$	-	\$	-			
February Total		5	15	\$	53,327	\$	109,930	\$	(56,603)			
2021 YTD Total		12	21	\$	106,655	\$	215,952	\$	(109,297)			
2020 YTD Comparison		12	23	\$	128,864	\$	413,094	\$	(284,230)			

Northern	Northern/Southern Centers (Adult/Child Developmentaly Disabled (DD))										
					202	1					
100 (100 pt)		New Placements	Clients		Budget		Expense	(Over)/Under Budget			
February Total		0	0	\$	-	\$	-	·			
2021 YTD Total		0	0	\$	-	\$	•				
2020 YTD Comparison	72110										

Adult Far	nily	Homes (AFI	վ) & Con	nmı	unity Based R	esi	dential Fac	ilit	ty (CBRF)
					202:	1			
		New Placements	Clients		Budget		Expense		(Over)/Under Budget
AFH		0	12	\$	29,588	\$	67,108	\$	(37,519)
CBRF		0	13	\$	142,799	\$	109,509	\$	33,290
February Total		0	25	\$	172,387	\$	176,616	\$	(4,229)
2021 YTD Total		29	36	\$	313,754	\$	239,627	\$	74,127
2020 YTD Comparison	***************************************	16	31	\$	<i>251,980</i>	\$	251,942	\$	38

ALTERNATE CARE REPORT Month Ending February 2021

		January			February			YTD		Ave Cost per
mpedalah	Placements	Clients	Days	Placements	Clients	Number of Days	Placements	Clients	Days	Day
e.	3	86	2,865	3	94	2,617	9	101	5,482	\$40
re	3	15	414	0.	14	354	3	15	768	\$139
e e	0	-	21	0	0	0	0	1	21	\$357
er	0	5	155	1	9	154	-	9	309	\$541
a I	9	119	3,455	4	114	3,125	10	123	6,580	

	ranteer .						Expense					
	Adju	Adjusted Budget		January	January -	,	Adjusted	1	ebruary	,	,	TTD
Level of Care	1	- January		Expense	Percent Used	, <u>1</u>	Budget - February	_	Expense	X.I.	YTD Expense	Percent Used
Foster Care	↔	106,731 \$ 109,127	S	109,127	102.2%	\$	213,462	69	213,462 \$ 112,218 \$	69	221,345	103.7%
*Therapeutic Foster Care	⇔	14,702 \$	⇔	51,817	352.4%	\$	29,404 \$	8	54,642	69	106,459	362.1%
Group Home	69	15,750 \$	S	6,139	39.0%	S	31,500	s	1,365	89	7,504	23.8%
Residential Care Center	S	106,903 \$	S	80,261	75.1%	S	213,805 \$	S	86,829 \$	es.	167,090	78.2%
Total	S	244,086	S	244,086 \$ 247,344	101.3%	S	488,172 \$	S	255,054 \$	S	502,398	102.9%

Percent Collected 32.7% %9.682

Adjusted Budget

Revenue

50.1% 39.5%

3,510

\$ 26,518

67,057

6.7%

3,948 112

500 1,667 7,000

\$ 18,948 Revenue YTD

57,890

Notes:

*Treatment Foster Care is over budget primarily due to CLTS placements. In previous years, all CLTS placements costs were expensed under One-time COVID-19 payments made to a Group Home and Residential Care Centers were paid in this period based on January days in care. Foster Care. Due to the rise in CLTS placements, account numbers for Treatment Foster Care CLTS placements were created for 2021, but no budget was allocated as the budget was already set.

		Mor	Monthly			YTD			Year End	pu <u>=</u>
	Budgeted		Adjusted Actual	ctual	Budgeted	eted	Adjusted Actual	Actual	Annualized	lized
				% of Expenses				% of		%
Program	Expenses Targe	Targeted %	Expenses	Utilized	Expenses	Targeted %	Expenses	Utilized	Expenses	Annualized
1. Community Care & Treatment of Children										
who are Abused or Neglected	\$567,287	8.3%	\$538,272	7.9%	\$1,134,574	16.7%	\$994,458	14.6%	\$5,966,748.6	87.7%
2. Community Care & Treatment of Adults &										
Children with BH Issues	\$1,609,002	8.3%	\$1,294,483	6.7%	\$3,218,005	16.7%	\$2,540,051	13.2%	\$15,240,304.7	78.9%
3. Community Care & Treament of										
Developmentally Disabled or Delayed	\$138,451	8.3%	\$96,297	2.8%	\$276,901	16.7%	\$203,625	12.3%	\$1,221,749.9	73.5%
4. Community Care and Treatment of Youth										
Offenders	\$304,442	8.3%	\$269,130	7.4%	\$608,884	16.7%	\$551,918	15.1%	\$3,311,508.0	%9:06
5. Protection of Vulnerable Adults	\$94,470	8.3%	\$84,475	7.5%	\$188,939	16.7%	\$153,432	13.5%	\$920,591.4	81.2%
6. Financial & Economic Assistance	\$291,309	8:3%	\$223,108	6.4%	\$582,618	16.7%	\$469,497	13.4%	\$2,816,984.1	80.6%
•					ange-					
Total	\$3,004,960	8.3%	\$2,505,764	%6.9	\$6,009,921	16.7%	\$4,912,981	13.6%	\$29,477,887	81.7%

CCS WIMCR Gap Reconciliation

2019

December Final Estimate Less CCS Non-Billable Expenses	\$ 2,190,049	
		*NOTE: This is estimated based on interim billing rates and includes both provided and
Total CCS Non-Billable Expenses	\$ 354,433	contracted costs.
Final CCS Gap	\$ 1,835,616	
Amount Received	\$ 1,831,211	** NOTE: Received 3/21
Amount Remaining	\$ 4,405	





CHILD WELFARE

Family First Prevention Services Act Compliance

In February 2018, the federal government passed the Family First Prevention Services Act (FFPSA). The focus of the FFPSA is to keep families intact by reducing the number of children in foster care and building more family-based environments for children who cannot remain safely in their homes. Family First places greater emphasis on providing preventive services that help families at risk stay together through the use of evidence-based services.

The FFPSA also modifies how states claim federal Title IV-E funding. More specifically, the FFPSA alters the types of congregate care settings that are eligible for Title IV-E reimbursement to Qualified Residential Treatment Programs (QRTP). However, Wisconsin law does not currently recognize QRTPs as a placement alternative or have defined placement options that meet QRTP criteria. In addition, states may only claim Title IV-E reimbursement for a child in a QRTP if certain items are included in that child's permanency plan.

Children and Family Aids

The Department of Children and Families (DCF) distributes Children and Family Aids (CFA) to counties for services related to child abuse and neglect and to unborn child abuse, including prevention, investigation, and treatment. Following an increase in the 2019-21 state biennial budget, funding for the Children and Family Aids allocation is \$101,359,373.

As discussed quite significantly during 2019-21 state budget deliberations, the need for additional state investment in the child welfare system remains. Staff to caseload ratios still remain high and out-of-home placement costs still weigh heavily on county budgets.

Subsidized Guardianship

Subsidized guardianship offers a way for children in foster care to reach permanence. When termination of parental rights (TPR) and reunification with the child's parents are not the best option, it may be possible for a relative, a person who is like-kin, or a foster parent (in certain circumstances) to become the legal guardian and receive a monthly subsidy. Counties use existing funds provided through the Children and Family Aids allocation, along with county tax levy, to fund subsidized guardianship payments. The annual cost of subsidized guardianships continues to rise, forcing counties to divert funds from other child welfare services to subsidized guardianship payments. It is important to note that since subsidized guardianship is a permanency option, counties have no further involvement with the child other than the

requirement to fund the guardianship. Because of this, subsidized guardianship payments should operate like adoption subsidies as in both cases the county no longer provides services.

CURRENT STATUS:

- The Governor's 2021-23 state biennial budget proposal makes several positive investments in the child welfare system:
 - o A \$5 million increase in FY22 and a \$10 million increase in FY23 in the Children and Family Aids allocation.
 - Modifications to current law to conform to the Family First Prevention Services Act.
 - o A \$12,342,700 investment in in-home prevention services.
 - o \$200,000 to provide training for congregate care providers.
 - o \$1,000,000 in FY22 and \$500,000 in FY23 for child welfare new worker training.
- In 2020, counties spent \$5,511,740 on subsidized guardianship payments.

REQUESTED ACTION:

- Support the above-mentioned provisions in the proposed 2021-23 state biennial budget.
- Transfer payment responsibility for subsidized guardianships to the state in a manner similar to the adoption assistance program.

TALKING POINTS:

FFPSA:

- If Wisconsin is not in compliance with the FFPSA by September 29, 2021, a significant amount of federal funding will be lost.
- Counties receive federal IV-E funds as part of their Children and Family Aids allocation.
 Those funds are used to provide critical child welfare services, including child abuse and
 neglect assessments, out-of-home placements, reunification services including parenting
 classes, etc.
- During the 2019-21 state budget process counties successfully made the case for increased child welfare funding. Failure to reach timely compliance with the FFPSA requirements will take us a step backwards.

Children and Family Aids:

- The need for additional state investment in the child welfare system remains.
- Staff to caseload ratios still remain high and out-of-home placement costs still weigh heavily on county budgets.

Subsidized Guardianships:

• State payment of subsidized guardianship costs is consistent with the payment structure for other permanency options - most notably, the adoption assistance program.

Child Welfare Page 3

• Since child welfare agencies are no longer actively involved in subsidized guardianship cases, it only makes sense to separate them from the financial component of a subsidized guardianship.

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YOUTH JUSTICE

The Governor's 2021-23 state biennial budget proposes significant changes to Wisconsin's youth justice system. While there is no doubt that the philosophy behind the changes is based off of evidence-based practice, counties cannot support such wholesale changes at this time. As counties were not involved in the development of the proposals contained in the budget, several concerns need to be addressed in order for counties to have confidence that this systems change is feasible. These concerns include timing, appropriate infrastructure development, funding, etc. However, the budget does contain some positive investments that should be maintained as a starting point for the development of a new community-based youth justice system. We understand the intent is to implement the changes over a three- to five-year period. If that is the case, many of the proposed changes could be delayed to a future biennial budget.

Serious Juvenile Offender Program

The Governor's budget eliminates the serious juvenile offender program (SJOP) as an available disposition (effective July 2021) for a juvenile adjudicated delinquent under the Juvenile Justice Code and transfers responsibility for future young offenders to the counties. The budget replaces the SJOP with an extended juvenile jurisdiction (EJJ) blended sentencing model (effective July 1, 2022) under which a youth would be under county supervision until age 18. The budget allocates \$5,327,500 GPR in FY22 and \$13,529,700 GPR in FY23 to counties to serve the former SJO population.

REQUESTED ACTION: Oppose the transfer of responsibility for formerly-eligible SJO youth to counties. Support further discussion between counties and the state with regard to changes to the youth justice system, including the development of a community-based infrastructure to serve justice-involved youth.

TALKING POINTS:

- The July 1, 2021 effective date provides counties with no time to plan, obtain appropriate staffing, etc. for such a change.
- The infrastructure for serving these youth in the community does not currently exist; therefore, a transfer of responsibility is premature.
- The youth in the SJOP have significant treatment needs that cannot currently be met in the community. Until such an infrastructure exists in this state, youth will need to be transferred out of state (there are approximately 55 Wisconsin youth receiving treatment services out of state) or placed in Lincoln Hills. Therefore, the only real change is who pays for the Lincoln Hills stay.

• The state can certainly implement its extended juvenile jurisdiction (SJOP replacement) blended sentencing model without the transfer of responsibility for eligible youth to the counties.

Type 1 Facilities/SRCCCYs

The Governor's budget eliminates state-run Type 1 facilities and allows both the state and counties to operate Secured Residential Care Centers for Children and Youth (SRCCCY). The proposed budget also removes the July 1, 2021 closure date for Lincoln Hills and Copper Lake and instead proposes closure as soon as all juveniles have been transferred to a suitable replacement facility.

The budget also removes rate-setting authority from the Legislature and instead allows DOC to establish rates that reflect the number of supervised youth and the costs of providing care.

REQUESTED ACTION: Oppose the elimination of statutory daily rates.

TALKING POINTS:

- If DOC has rate-setting authority rates could change multiple times throughout the course of a year. That will make it difficult for counties for budgeting purposes.
- The current rate is \$615 per day; the LFB summary of the budget indicates that the daily rate utilized to determine SJO funding would be \$1,007 in FY22 and \$1,009 in FY23.
- Disproportionately affects counties, predominantly smaller and rural, that will need to use Lincoln Hills until the day it closes due to a lack of local placement options.

County Secure Detention Facilities

The Governor's budget eliminates as an available disposition under the Juvenile Justice Code the placement of a juvenile in a juvenile detention facility for more than 30 days, effective one year after the closure of Lincoln Hills.

REQUESTED ACTION:

- Oppose the elimination of county 365/180 programs.
- Remove the following language from Wis. Stat. 938.22 (2) (d) 2.: After July 1, 2021, the number of juveniles that may be housed at a juvenile detention facility under subd. 1. is limited to the number that is equal to the average daily population of juveniles housed under subd. 1., rounded up to the nearest while number, of the juvenile detention facility between July 1, 2018, and June 30, 2021...

TALKING POINTS:

- Elimination of the county 365/180 programs will cause a shortage of placement beds across the state.
- Based on the work of the Juvenile Corrections Grant Committee, even if four county SRCCCYs were operational, the 365/180 beds would still be needed to cover estimated populations.
- The capital budget calls for the creation of a single state facility of 32 beds. Given that the Lincoln Hills population exceeds that number, all currently available bed space should remain available.
- As Lincoln Hills will not be closing on July 1, 2021 it is no longer appropriate to place a limit on the number of 365/180 beds operated by counties.

Youth Justice Systems Improvement Program

The Governor's budget provides \$230,000 GPR in FY22 and \$10,837,900 in FY23 for a newly-created Youth Justice Systems Improvement Program (YJSIP) for community-based grants, residential service grants, and training system improvements. Funding may be used for programs that enhance diversion, prevention, or early intervention to reduce the number of justice-involved youth or promote successful outcomes for youth; address emergencies; and fund activities of the Department related to youth and families under youth aids provisions.

REQUESTED ACTION: Support the Governor's proposal.

TALKING POINTS:

• Begins to build community capacity for serving justice-involved youth.

Juvenile Court Jurisdiction

The Governor's budget raises the age of adult court jurisdiction to 18 years of age, effective for acts committed on the day after publication of the budget. The budget creates a new sum sufficient appropriation and provides \$10 million GPR in each fiscal year to reimburse counties, beginning January 1, 2022, for the increased cost associated with raising the age.

REQUESTED ACTION: Support but amend the effective date of the provision.

TALKING POINTS:

• The effective date included in the budget is July 1, 2021. Counties will require planning time to secure staff and community services; therefore, counties request a delayed effective date to July 1, 2022.

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• The "juvenile justice aids for 17-year-olds" are not available until January 1, 2022 but costs will be incurred starting July 1, 2021.

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MENTAL HEALTH SERVICES

State statute imparts counties with primary responsibility for the well-being, treatment, and care of persons with mental illness and substance use disorders who reside in the county, limited to the programs, services and resources the county is able to provide within the limits of available state and federal funds and of county funds required to be appropriated to match state funds. Counties must provide directly or contract with providers to deliver mental health and substance abuse services in the least restrictive environment appropriate for an individual's needs.

In addition, every county must establish an emergency mental health services program to serve persons in crisis situations within the county, regardless of their county of residence. At a minimum, emergency programs must offer 24-hour crisis telephone service and 24-hour inperson service on an on-call basis. Telephone service must be staffed by mental health professionals or paraprofessionals or by trained mental health volunteers, backed up by mental health professionals. In order to receive reimbursement under the state's Medical Assistance program, an emergency mental health services program must have additional features, such as a mobile crisis team for on-site in person response, walk-in services, and short-term voluntary or involuntary hospital care (emergency detention) when less restrictive alternatives are not sufficient to stabilize an individual experiencing a mental health crisis. Chapter 51 establishes procedures for the emergency detention of persons experiencing a mental health or substance abuse crisis, as well as procedures for the commitment of certain persons for treatment, under either a civil or criminal court proceeding. Many individuals subject to emergency detention are brought to Winnebago Mental Health Institute for services.

Under the Medical Assistance (MA) program, certified providers are reimbursed for services offered to eligible beneficiaries at rates established for each procedure or service. The costs of the provider reimbursement are shared between the federal government and the state or counties, according to a formula that is based on each state's per capita personal income. Wisconsin's standard FMAP has generally ranged between 58% and 60% over the last several years.

Medical Assistance provides coverage of substance abuse treatment in a community-based, residential setting for individuals who are found to need a structured daily routine that is removed from their normal social environment. Residential substance abuse treatment is provided under two separate circumstances. Some MA beneficiaries have been able to access residential treatment since May 1, 2017 as part of the comprehensive community services (CCS) benefit. Beginning in February 2021, a new benefit, referred to as residential substance use disorder (RSUD) treatment, expands the range of eligible providers to include larger facilities (IMDs) and covers MA recipients who are not enrolled in CCS. By federal law, Medicaid pays for the treatment costs, but does not pay for room and board costs in a community-based

residential facility (not an inpatient hospital). Consequently, these costs must be paid by the county or by the individual.

CURRENT STATUS: The Governor's budget:

- Provides \$12.3 million GPR in FY23 to establish up to two regional crisis response centers
- Provides \$5 million GPR in FY23 to establish five regional crisis stabilization facilities.
- Directs DHS to pay allowable charges on behalf of recipients of Medical Assistance for room and board for residential substance use disorder treatment.
- Increases MA reimbursement rates paid for outpatient services for mental health and substance abuse and for day treatment services for children and adolescents.

REQUESTED ACTION:

- Support the Governor's proposed changes related to the payment of room and board for residential SUD treatment, as well as increased MA rates for outpatient mental health services and day treatment services for children and adolescents.
- Include funding to construct the infrastructure necessary to support regional behavioral health facilities to serve individuals experiencing a mental health crisis.

TALKING POINTS:

- In 2019, counties reported spending over \$698.5 million on services for individuals with mental illness, and over \$87.6 million on services for individuals with substance use disorders.
- Counties have significant levy investment in mental health programs.
- Counties all across the state are experiencing an increase in crisis contacts.
- The funding provided in the budget for outpatient mental health and substance abuse services is based on an estimate of the cost to increase rates for these services by 40% on January 1, 2023, with the first 20% increase phased in beginning January 1, 2022.
- The rate increase better reflects the cost of providing mental health and substance abuse services.
- State payment of room and board costs will allow access to inpatient substance use disorder treatment to many individuals who could not otherwise afford it.
- Creating regional mental health crisis facilities provides benefits to consumers, law enforcement, etc.
- Having a range of service options available to individuals in a mental health crisis will ensure services can be provided using the least restrictive option.

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CHILD SUPPORT FUNDING

The child support enforcement program is designed to ensure that parents provide financial and medical support for their children. In addition, the program helps reduce public welfare spending for single-parent families.

In Wisconsin, counties are required to contract with the Department of Children and Families (DCF) to implement and administer the program at the local level. County responsibilities include establishing child support and medical support orders, establishing paternity, providing data related to support orders, and enforcing medical and financial child support orders. The program is funded through a combination of state, federal, and county funds.

County child support agency costs have been steadily increasing due to growing caseloads, inflation, and new federal regulations. Wisconsin's strong performance in child support is at risk without additional state funding. In fact, Wisconsin has fallen in the rankings for nearly every measure in recent years due to rising caseloads and insufficient funding.

Category	2016 Ranking	2019 Ranking
Paternity Establishment	14	16
Support Order Establishment	27	33
Collection of Current Support	2	5
Collection of Arrears	11	10

Due to the drop in rankings, Wisconsin is receiving a smaller share of federal incentive payments.

A state policy change took effect July 1, 2018 prohibiting child support agencies from seeking recovery for birth costs in cases where the family is "intact" at the time that paternity or support is established if the father's income contributes to the support of the child. This policy change will lead to decreased funding for county child support agencies statewide. In addition, a June 2019 federal interpretation eliminates the ability of states to claim federal matching funds related to the birth cost recovery program.

Counties currently receive \$9,010,000 in GPR support for the child support enforcement program.

CURRENT STATUS: The Governor's budget increases state GPR support for local administration of the child support program by \$4 million GPR annually.

REQUESTED ACTION: Support the Governor's proposed increase in child support funding.

TALKING POINTS:

- The \$4 million in GPR funding draws down \$7,764,700 in federal matching funds.
- The child support enforcement program is an effective investment in Wisconsin's future as child support increases self-sufficiency, reduces child poverty, and has a positive effect on children's well-being.
- Wisconsin's child support enforcement program is cost effective, collecting an average of \$6.20 in support for every dollar invested in the program.
- Prior to a GPR funding increase of \$765,000 provided in the 2019-21 state biennial budget, state funding for the program had been flat or cut for nearly a decade.
- County child support agencies collected \$934 million in child support during 2017 95% went directly to families and 5% reimbursed public assistance programs.
- Child support agencies help save taxpayer dollars by establishing health insurance orders, which reduces state Medicaid costs by moving children from public assistance to private insurance. Orders are established in 97% of cases.
- Over the past decade, county child support staffing has fallen by 8.89% while caseloads have increased by 5.91%.
- County child support agencies are already struggling to meet their obligations at their current funding levels. The loss of funding due to an administrative policy change cannot and should not be absorbed by counties.
- Last budget, counties received approximately one-third of their funding request.
- The change in federal interpretation with regard to birth cost recovery was announced just after the 2019-21 state biennial budget was completed.
- The federal change will cost county child support agencies approximately \$4.2 million annually.

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INCOME MAINTENANCE ADMINISTRATION ALLOCATION

The Income Maintenance Administration Allocation (IMAA) is a combination of state and federal funds provided to county income maintenance consortia to perform the eligibility determination and management functions associated with several federal and state programs, including Medical Assistance and FoodShare. Ten multi-county consortia administer income maintenance programs. Administration of IM is a shared cost between local county levy, federal revenue, and GPR, with typically a 50-50 split between federal revenue and the state's share of cost (funded through GPR and county tax levy).

Historically, IMAA funding levels have not kept pace with the work involved in processing and managing FoodShare and Medicaid cases. In recent years, counties have worked with the administration and legislature to not fall further behind by seeking increased funding for the implementation and enforcement of new eligibility requirements and additional projects. In CY21, the base county IM allocation is \$36,249,260.

Although additional funding is needed in the base, it is critical for counties to receive the funding necessary to serve the increasing caseloads faced by the IM consortia since the pandemic hit.

- The Department of Health Services (DHS) estimates that Medicaid caseloads managed by IM consortia will increase from approximately 412,800 cases in July 2020 to 471,200 cases in June 2023.
- DHS estimates that FoodShare caseloads will increase from approximately 361,700 cases in July 2020 to 471,200 cases in June 2023.

At the time the 2019-21 state biennial budget was adopted, no one could have predicted the state's current economic condition. Therefore, the current caseload increases seen by the IM consortia have not been accounted for in the base funding amount for 2021.

CURRENT STATUS: The Governor's budget increases the IMAA by \$3,613,200 AF (\$1,445,300 GPR and \$2,167,900 FED) in FY22 and \$5,292,400 AF (\$2,117,000 GPR and \$3,175,400 FED) in FY23 to fund projected workload increases for IM consortia and tribal IM agencies.

REQUESTED ACTION:

- Support the Governor's recommendation.
- Provide an additional \$500,000 (\$250,000 GPR/\$250,000 FED) annually in the Fraud Prevention and Investigation Program (FPIP).

TALKING POINTS:

- The funding increase is intended to maintain the same level of state support per case in the 2021-23 biennium as DHS estimates the state provided in 2020 \$75.72 per case.
- Counties lack the levy capacity to fund increased caseload costs.
- Counties have a greater tax levy investment in the program than the state's GPR investment.
- At the time the income maintenance consortia were created, the state significantly cut funding to the counties indicating that any future savings in the program would accrue to the counties. Instead, county investment in the program has continued to increase.
- According to the Legislative Fiscal Bureau, in 2017 the state invested \$17.7 million GPR in the IM consortia. County levy investment was over \$30 million.
- Consistent with the Department's goal of sustaining the timely processing of applications for Medicaid and FoodShare benefits.
- In 2020, each \$1 spent on FPIP resulted in a savings of \$18.43.
- In 2020, counties performed over 19,521 fraud investigations, with a total program savings of \$32,255,487.

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BIRTH TO THREE FUNDING

The Birth to 3 Program is a statewide early intervention program authorized under the federal Individuals with Disabilities Education Act (IDEA), Part C for Infants and Toddlers, and Wis. Admin. Code DHS 90. The U.S. Department of Education's Office of Special Education Programs (OSEP) is the federal administering agency.

The Birth to 3 Program serves children under the age of three with developmental delays and disabilities, as well as their families. The program works to enhance the child's development while supporting the family's knowledge, skills, and abilities as they interact with and raise their child. The goals of the Birth to 3 Program are to enhance the capacity of families to meet the special needs of their child, maximize the potential for independent living, and reduce long-term costs through remediating delays with early targeted intervention.

In Wisconsin, the Birth to 3 Program is administered by the Department of Health Services (DHS) and operationalized at the local level by counties. The Birth to 3 Program is frequently the first and largest system that children with disabilities encounter in Wisconsin. Part C of IDEA requires that all infants and toddlers with disabilities eligible for early intervention services be identified, located, and evaluated (34 C.F.R. § 303.302).

Funding for the Birth to 3 Program includes a combination of federal, state, and local revenue. By rule, Birth to 3 service providers must access funding sources in the following order: private insurance, Medicaid, parental cost share, local, state, and federal tax dollars.

The cost to operate the Birth to 3 program continues to increase year after year. In addition, private insurance companies are increasingly denying coverage for Birth to 3 services. Counties fund the highest percentage of Birth to 3 program costs. Please see attached for funding source percentages.

Counties are currently bearing the brunt of the increased costs associated with operating the Birth to Three program. While private insurance was once a primary funding source for this program, it has since been reduced to being an insignificant source of revenue.

The 2019-21 state biennial budget provided one-time funding of \$1,125,000 GPR annually for the Birth to 3 program.

CURRENT STATUS: The Governor's budget provides \$1,125,000 in each year of the biennium (continues one-time funding from the 2019-21 biennial budget) for the Birth to 3 program. In addition, the budget expands Birth to 3 services to additional children that are lead poisoned and increases funding to serve that population - \$3.3 million GPR in FY22 and \$6.6 million GPR in FY23.

REQUESTED ACTION:

• Maintain the increased funding provided by the Governor in his 2021-23 state biennial budget proposal - \$1,125,000 annually, plus the \$3.3 million in FY22 and \$6.6 million in FY23. However, delete the language expanding Birth to 3 eligibility.

TALKING POINTS:

- Counties continue to fund the largest percentage of Birth to 3 program costs.
- In 2010, the state introduced an evidence-based model of practice that greatly enhances a family's capacity to meet the needs of their child. This model of practice, however, drastically and significantly changed the way Birth to 3 services are provided. This change in practice model has had a dramatic impact on the cost to run this program.
- Commercial insurance carriers are increasingly denying coverage of Birth to 3 services, indicating services in the "natural environment" are not covered.
- Parents can deny access to private insurance; however, federal law prohibits a delay or denial of services due to "inability to pay."
- The additional revenue requested is consistent with counties' Birth to 3 biennial budget request.
- State funding for children currently eligible for the program should be sufficient before expanding program eligibility.

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Birth to Three Funding Percentages 2019

Number	Community	County	Medicaid	Private	Cost	Other	OSEP Grant	State GPR	Grand Total
of	Aids	Funds		Insurance	Share	Revenue			
Children									
Enrolled									
12,858	\$4,692,521	\$14,621,289	\$7,493,432	\$2,411,968	\$538,587	\$1,807,952	\$5,979,266	\$7,415,032	\$44,960,047
	10.4%	32.5%	16.7%	5.4%	1.2%	4.0%	13.3%	16.5%	