

RESOLUTION NO.: 45—2014-15

TO THE HONORABLE, THE OUTAGAMIE COUNTY BOARD OF SUPERVISORS

LADIES AND GENTLEMEN:

2/3 MAJORITY – 24 VOTES

1 Each year the Department of Health & Human Services requires a number of budgetary
2 transfers to account for actual financial activity. Primary reasons for the current transfers
3 include variations in salary and fringe benefits costs, increased costs for out of home
4 placements for children and youth, increased alcohol and other drug abuse (AODA)
5 services, the cost of placements at the State’s Central Wisconsin Center, and general
6 operational variances.

7
8 NOW THEREFORE, the undersigned members of the Health and Human Services Committee
9 recommend adoption of the following resolution.

10 BE IT RESOLVED, that the Outagamie County Board of Supervisors does authorize and
11 approve of various budget transfers and alterations in the 2014 Health and Human Services Budget as
12 noted on the attached fiscal note and worksheet, which by reference are made a part hereof, and

13 BE IT FINALLY RESOLVED, that the Outagamie County Clerk be directed to forward a copy
14 of this resolution to the Outagamie County Health and Human Services Director and the Outagamie
15 County Finance Director.

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17 Dated this ____ day of October, 2014

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Jerry Iverson

Respectfully Submitted,
HEALTH & HUMAN SERVICES COMMITTEE

Barney Lemanski

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Patrick Meyer

Kevin Behnke

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1 _____
2 Cathy Spears

3 Duly and officially adopted by the County Board on: _____
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6 Signed: _____
7 Board Chairperson County Clerk

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9 Approved: _____ Vetoed: _____
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12 Signed: _____
13 County Executive

OUTAGAMIE COUNTY FISCAL NOTE

INTRODUCTION: This form must be attached to any resolution or ordinance which contains a spending or revenue proposal. The form should be completed by an individual within the department initiating the resolution or ordinance with assistance from the Financial Services Department. Contact the Finance Director (1674), Controller (1675) or Staff Accountant (1681) for assistance. Once completed, forward a copy of the form to the Financial Services Department for their review. Financial Services will forward a reviewed copy of the fiscal note to Legislative Services.

1. **Subject:** 2014 Budget Transfers for Health and Human Services

2. **Description:** This section must be completed for all fiscal notes. Briefly and concisely describe the request. State assumptions used and discuss any current year and long-term fiscal impacts. (A separate attachment can be used)

Each year the Department of Health and Human Services requires a number of budgetary transfers to account for actual financial activity. Primary reasons for the current transfers include variations in salary and fringe benefit costs, increased costs for out of home placements of children and youth, increased alcohol and other drug abuse (AODA) services, the cost of placements at the State's Central Wisconsin Center, and general operational variances.

This resolution moves the authorized funds for 2014 to the line items and cost centers where expenditures incurred exceed amounts originally projected. There is no net levy impact as a result of these transfers as all increases in expenditures are offset by decreases in other expenditures.

Current Year Budget Impact (Check one or more of the following boxes)

Revenues Expenses (Cost) None

- 3. Is the specific cost or revenue included in the current year's budget? yes () no () partially (XX)
- 4. If the proposal requests additional spending, can the additional cost be absorbed within the current year's line item? yes () no (XX) n/a ()
- 5. Is the proposal to accept additional revenues only? yes () no (XX)
- 6. Does this request modify/adjust the current year budget? yes (XX) no ()
If no, skip to question 8 below.
- 7. Detail current year budget changes. Please list cost center name, line item, account number and either the increase or decrease amount. (Please note that all budget adjustments must balance. For example, an increase in an expenditure account must be offset by a decrease in another expenditure account or the contingency fund or an increase in a revenue account or other funding sources such as fund balance applied.)

<u>COST CENTER NAME</u>	<u>LINE ITEM</u> <small>(i.e. Salaries, Supplies, Etc.)</small>	<u>ACCOUNT NUMBER INCLUDING COST CENTER</u> <small>(i.e. 1004100.5100, 1004100.5400, etc.)</small>	<u>INCREASE (DECREASE) AMOUNT</u>
<u>See Attached Worksheet for Transfer Detail</u>			

Annual and Long-Term Impact

- 8. Is the above Increase/Decrease a nonrecurring one-time expense or revenue? yes (XX) no () n/a ()
- 9. What is the anticipated annual and/or long-term cost or revenue impact? Annual Cost 0
Annual Revenue 0

Fiscal Note Prepared by: Kay Herring

For Financial Services purposes only	
Reviewed By: <u>Am</u>	If expenditures are recorded in the financial system at a level of detail lower than the level 6 as shown above, indicate the specific account numbers and amounts below: <u>Detail Expenditures Account Number</u> <u>Amount</u>
Date: <u>10/6/14</u>	
Comments:	

Outagamie County Department of Human Services
2014 Budget Transfers

<u>INCREASE EXPENDITURES:</u>					<u>DECREASE EXPENDITURES:</u>				
Cost Center Name	Number	Budget Item	Amount		Cost Center Name	Number	Budget Item	Amount	
Nursing Services	2061010	Purchased Services	5500	\$5,000	Nursing Services	2061010	Fringe Benefits	5200	\$5,000
WIC	2061020	Purchased Services	5500	\$40,000	Nursing Services	2061010	Salaries	5100	\$40,000
WIC	2061020	Supplies	5400	\$3,500	WIC	2061020	Fringe Benefits	5200	\$3,500
Environmental Health	2061050	Fringe Benefits	5200	\$1,500	Nursing Services	2061010	Travel / Training	5300	\$1,500
CYF Provided	2062040	Salaries	5100	\$705,000	DD Services Unit	2063090	Salaries	5100	\$100,000
					ES Administration	2064010	Salaries	5100	\$100,000
					Management and Support	2065010	Salaries	5100	\$60,000
					MH Provided	2066090	Salaries	5100	\$345,000
					Juvenile Resources	2067020	Salaries	5100	\$65,000
					YFS Provided	2067040	Salaries	5100	\$35,000
CYF Provided	2062040	Fringe Benefits	5200	\$360,000	WIC	2061020	Fringe Benefits	5200	\$5,000
					DD Services Unit	2063090	Fringe Benefits	5200	\$33,000
					ES Administration	2064010	Fringe Benefits	5200	\$97,500
					Child Support	2064050	Fringe Benefits	5200	\$12,500
					Management and Support	2065010	Fringe Benefits	5200	\$7,500
					MH Provided	2066090	Fringe Benefits	5200	\$105,000
					Drug and Alcohol Trmt Court	2066595	Fringe Benefits	5200	\$9,500
					Juvenile Resources	2067020	Fringe Benefits	5200	\$55,000
					YFS Provided	2067040	Fringe Benefits	5200	\$35,000
CYF Provided	2062040	Travel / Training	5300	\$15,000	CYF Provided	2062040	Purchased Services	5500	\$15,000
C-Community Aids	2062520	Purchased Services	5500	\$100,000	C-Youth Aids	2067540	Purchased Services	5500	\$100,000
Nutrition	2063050	Salaries	5100	\$500	DD Services Unit	2063090	Salaries	5100	\$500
Nutrition	2063050	Fringe Benefits	5200	\$2,000	DD Services Unit	2063090	Salaries	5100	\$2,000
Nutrition	2063050	Purchased Services	5500	\$4,500	DD Services Unit	2063090	Purchased Services	5500	\$4,500
Supportive Home Care	2063065	Fringe Benefits	5200	\$6,000	Supportive Home Care	2063065	Salaries	5100	\$6,000
Supportive Home Care	2063065	Travel / Training	5300	\$1,500	DD Services Unit	2063090	Travel / Training	5300	\$1,500
Aging & Disability Resource Ctr (ADRC)	2063100	Salaries	5100	\$2,000	DD Services Unit	2063090	Salaries	5100	\$2,000
Aging & Disability Resource Ctr (ADRC)	2063100	Fringe Benefits	5200	\$21,000	DD Services Unit	2063090	Fringe Benefits	5200	\$21,000
Aging & Disability Resource Ctr (ADRC)	2063100	Travel / Training	5300	\$2,500	DD Services Unit	2063090	Travel / Training	5300	\$2,500
C-Developmental Disabilities	2063590	Purchased Services	5500	\$165,000	C-Youth Aids	2067540	Purchased Services	5500	\$165,000
ES Administration	2064010	Travel / Training	5300	\$500	Child Support	2064050	Travel / Training	5300	\$500
ES Administration	2064010	Purchased Services	5500	\$15,000	ES Grants	2064020	Purchased Services	5500	\$15,000
Child Support	2064050	Salaries	5100	\$65,000	Management and Support	2065010	Purchased Services	5500	\$65,000
Management and Support	2065010	Travel / Training	5300	\$2,500	Management and Support	2065010	Purchased Services	5500	\$2,500

Outagamie County Department of Human Services
 2014 Budget Transfers

<u>INCREASE EXPENDITURES:</u>					<u>DECREASE EXPENDITURES:</u>					
Cost Center Name	Number	Budget Item	Amount		Cost Center Name	Number	Budget Item	Amount		
Management and Support	2065010	Supplies	5400	\$8,990	Management and Support	2065010	Capital Outlay	6000	\$8,990	
C-Alcohol and Other Drug Abuse (AODA)	2066560	Purchased Services	5500	\$230,000	MH Provided	2066090	Purchased Services	5500	\$45,000	
					C-Mental Health	2066580	Purchased Services	5500	\$35,000	
					Mental Health Court	2066590	Purchased Services	5500	\$130,000	
					Drug and Alcohol Trmt Court	2066595	Purchased Services	5500	\$20,000	
Mental Health Court	2066590	Salaries	5100	\$1,500	Mental Health Court	2066590	Purchased Services	5500	\$1,500	
Mental Health Court	2066590	Fringe Benefits	5200	\$500	Mental Health Court	2066590	Purchased Services	5500	\$500	
Mental Health Court	2066590	Travel / Training	5300	\$750	Mental Health Court	2066590	Purchased Services	5500	\$750	
Mental Health Court	2066590	Supplies	5400	\$500	Mental Health Court	2066590	Purchased Services	5500	\$500	
Drug & Alcohol Treatment Court	2066595	Supplies	5400	\$5,000	Drug and Alcohol Trmt Court	2066595	Purchased Services	5500	\$5,000	
YFS Provided	2067040	Supplies	5400	\$150	C-Youth Aids	2067540	Purchased Services	5500	\$150	
YFS Provided	2067040	Purchased Services	5500	\$7,000	C-Youth Aids	2067540	Purchased Services	5500	\$7,000	
Total Transferred To				\$1,772,390	Total Transferred From				\$1,772,390	