



# MONROE COUNTY BOARD OF SUPERVISORS

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## NOTICE OF MEETING

**COMMITTEE: ADMINISTRATION &  
PERSONNEL COMMITTEE**

**TIME: 9:00 a.m.**

**PLACE: Monroe County Justice Center  
Monroe County Board Assembly Room  
\*South Side/Oak Street Entrance\*  
1<sup>st</sup> Floor – Room #1200  
112 South Court Street  
Sparta, WI 54656**

**DATE: Tuesday May 9, 2023**

### SUBJECT MATTER TO BE CONSIDERED

1. Call to Order/Roll Call
2. Next month's Meeting Date/Time
3. Minutes Approval of April 11, 2023
4. Child Support Director Report
  - Job Fairs
  - WCA Human Services Day at the Capital
  - Student Government Days
  - May 1, 2023 Legislative Exchange
5. Information Technology
  - Local Area Network (LAN) RFP Recommendation – Discussion/Action
  - Director Report
6. Personnel Director
  - New Position Requests
    - Human Services – Resolution Authorizing One Children's Long Term Support (CLTS) and Four Comprehensive Community Services (CCS) Social Worker Positions in the Monroe County Human Services Department – Discussion/Action
    - Human Services – Resolution Authorizing a Behavioral Health Supervisor Position in the Monroe County Human Services Department – Discussion/Action
  - Employee Engagement Survey Meeting Results – Discussion Only
  - Director Report
7. Resolution Establishing 2024 Annual Budgeted Allocation for Cost of Living and Pay For Performance Adjustments – Discussion/Action
8. County Administrator Report
9. Next Month's Agenda Items
10. Adjournment

Wallace Habhegger, Committee Chair

Date notices mailed: May 4, 2023

**PLEASE NOTE:** A quorum of the Monroe County Board or other committees may be present at this meeting. No business of the County Board or other committees will be conducted at this meeting, only the business noted above.

Administration & Personnel Committee  
April 11, 2023

Present: Wallace Habegger, Jason Jandt, Todd Sparks, James Kuhn, Toni Wissestad  
Others: Tina Osterberg, Hannah Olsen, Adrian Lockington, Rick Folkedahl, Ed Smudde, Pamela Pipkin, Tracy Thorsen, Wes Revels, Cedric Schnitzler, Chris Weaver, Lisa Aldinger Hamblin

The meeting was called to order in the Monroe County Board Assembly Room at 9:00 a.m. by Chair Wallace Habegger.

- Next Month's Meeting Date/Time – The next meeting is May 9, 2023 at 9:00 a.m. in the Monroe County Board Assembly Room.
- Minutes Approval – Motion by Jason Jandt second by Todd Sparks to approve the March 14, 2023 minutes. Carried 5-0.
- Rick Folkedahl provided the Information Technology Director Report.
- Personnel Director
  - \*Resolution Authorizing ADRC Driver Position Increase to Part Time. Motion by Toni Wissestad second by Jason Jandt to approve resolution. Tracy Thorsen, Human Services Director explained request to change the LTE ADRC Driver position from LTE to part-time status effective May 1, 2023. Discussion. Carried 5-0.
  - \*Employee Engagement Survey & Staff Meetings. Ed Smudde, Personnel Director explained that the survey has been provided to the Administration & Personnel Committee and Department Heads. The survey will be provided to board members at the May regular board meeting.
  - \*Personnel Policy Update, Resolution Authorizing Changes to the Monroe County Personnel Policy, County/Government Owned Vehicles. Ed Smudde asked to pull resolution from the agenda for more time for policy review. It may take it until May or June for legal review. Discussion. The resolution was pulled from the agenda by Chair Habegger.
  - \*Ed Smudde provided the Personnel Director Report.
- Tina Osterberg provided the County Administrator Report.
- Next Month's Agenda Items: Employee Engagement Survey; Resolution Authorizing Changes to the Monroe County Personnel Policy Manual-County/Government Owned Vehicles (May or June).
- Motion to move into closed session by Jason Jandt second by Toni Wissestad. Wallace Habegger, Jason Jandt, Todd Sparks, James Kuhn and Toni Wissestad all voted yes.
- CLOSED SESSION per WI Statutes 19.85(1)(c), considering employment, promotion, compensation, or performance evaluation data of any public employee which the governmental body has jurisdiction or exercises responsibility – to complete County Administrator's Performance Evaluation – Discussion/Action
- Motion by James Kuhn second by Jason Jandt to return to open session. Wallace Habegger, Jason Jandt, Todd Sparks, James Kuhn and Toni Wissestad all voted yes.
- Motion by James Kuhn second by Toni Wissestad to move into closed session. Bargaining Members Wallace Habegger, James Kuhn and Toni Wissestad all voted yes.
- CLOSED SESSION under WI Statutes 19.82(1) of the Bargaining Subcommittee at approximately 10:15 a.m. to discuss bargaining strategy with the Monroe County Professional Police Association.
- Motion by Toni Wissestad second by James Kuhn to return to open session. Bargaining Members Wallace Habegger, James Kuhn and Toni Wissestad all voted yes.
- OPEN SESSION per WI Statutes 19.82(1) between the Bargaining Subcommittee at approximately 10:30 a.m. with Monroe County Professional Police Association to exchange initial proposals in an attempt to

arrive at successor collective bargaining agreement, and any other such business as authorized by law. Parties exchanged initial proposals and discussed the summary of the documents.

- Wallace Habegger adjourned the meeting at 11:56 a.m.

Shelley Bohl, Monroe County Clerk  
Recorder



# CAP TEAM

WCA County Ambassador Program

## COUNTY AMBASSADOR PROGRAM

Wednesday, April 12, 2023

The Madison Concourse Hotel  
1 W Dayton St  
Madison, Wisconsin

### AGENDA

- 8:30 a.m. Registration
- 9:00 a.m. Welcome and Pledge of Allegiance  
*Lance Pliml, Chair, Wisconsin Counties Association Board of Directors*  
*Bill Topel, President, Wisconsin County Human Service Association*
- Legislative Briefing  
*Chelsea Shanks, Government Affairs Associate*
- 10:00 a.m. Capitol Visits
- 12:00 p.m. Lunch  
*Members return to the Madison Concourse Hotel for lunch and guest speaker: Wisconsin Department of Health Services Secretary-designee Kirsten Johnson*
- 1:00 p.m. Capitol Visits Continue
- 3:00 p.m. Return to The Madison Concourse Hotel  
*Return Feedback Forms*
- 3:30 p.m. Adjourn

\*WCA staff will be available at the hotel until 3:30 p.m. if you have questions or need assistance.



# CAP TEAM

WCA County Ambassador Program

## **MENTAL HEALTH – COMMUNITY SUPPORT PROGRAM & CRISIS SERVICES**

State law designates counties with the primary responsibility for the well-being, treatment, and care of persons with mental illness. If persons are diagnosed with mental health conditions that require treatment, counties are responsible for serving persons that do not have private insurance coverage. Counties must directly provide or contract with providers to deliver mental health services in the least restrictive environment appropriate for an individual's needs.

The Medical Assistance program (MA) covers an array of mental health services, ranging from office-based therapy to inpatient hospitalization, and many of these services are delivered by counties. The financing of county-based services differs from most other MA services. That is, with most services, the provider receives a reimbursement payment and the cost of the payment is split between a federal and state share. For county-based mental health services, the county finances the cost of the services up front, and receives a reimbursement payment from the MA program equal to the federal share for that service, meaning that the county is responsible, in effect, for the nonfederal share (as well as any costs that exceed the reimbursement payment).

In 2013 the state fully funded Comprehensive Community Services (CCS) which led to expansion of community-based services. 2013 Wisconsin Act 20 included a provision that required the Department of Health Services (DHS) to reimburse CCS providers for both the federal and nonfederal costs of these services if the services were provided on a regional basis.

### Community Support Program

CSP offers intensive community-based care for adults whose mental illness and functional limitations might otherwise require them to need institutionalized care. Counties use CSP services to keep people out of extended hospitalizations and support people in the community following emergency detentions.

Sixty-five counties operate certified programs under DHS Administrative Rule 63. According to the Legislative Fiscal Bureau, based on the average federal payments for CSP services over the past three fiscal years, it is estimated that the state's GPR cost to fully fund CSP would increase by approximately \$14 million per year. Keeping in mind the probability that any increase in CSP services could reduce the utilization of other MA services for which the state is already responsible for the nonfederal share. For instance, if an increase in CSP services results in a decrease in inpatient hospitalization (one of the

primary objectives of CSP), any increased state costs in the CSP benefit category could be partially or fully offset by decreases in the cost of hospitalization.

### Crisis Services

Another required function of the county is providing an emergency mental health services program to serve persons in crisis situations. At a minimum, emergency programs must offer 24-hour crisis telephone service and 24-hour in-person response on an on-call basis. For persons who are Medicaid eligible, counties can receive Medicaid reimbursement.

For persons who are not Medicaid eligible, in non-certified counties, counties pay the full cost of crisis services. According to DHS, in 2020, counties spent about \$81 million on crisis intervention services, with \$60 million being Medicaid reimbursable services. The county cost for crisis services includes the \$21 million spent on persons who are not Medicaid eligible and in non-certified counties, along with the approximate 41% nonfederal share or \$24 million of the \$60 million of Medicaid reimbursable services.

Prior to 2020, counties were responsible for the entirety of the nonfederal share of the crisis intervention cost (41%), similar to the CSP. Beginning in 2020, the state pays a portion of the nonfederal share, provided certified counties participate in shared regional services and meet a maintenance of effort (MOE) requirement, which is equal to 75% of the three-year average of the county's crisis intervention expenditures in calendar years 2016 through 2018.

The 2019 law change is covering a portion of the \$24 million nonfederal share leaving the county cost for crisis Medicaid eligible services at \$21 million. While the 2019 law change providing partial state funding for crisis services was a step in the right direction, the additional state funding has yet to have a substantial impact on reducing the disproportionate county share.

State funding sources available to counties that can be used as a match for crisis and CSP services include Community Aids Basic County Allocation and Community Mental Health Allocation. The Community Aids funding has not kept pace over the years with increased county costs for services, resulting in counties bearing a disproportionate share of CSP and crisis service costs from county tax levy. Counties are limited in their capacity to use tax levy revenue due to state levy limits, so the lack of Community Aids increases combined with strict property tax controls makes it difficult for counties to maintain crisis and CSP services.

In addition to the costs to county human service departments, counties and municipalities also incur law enforcement costs to transport and provide security for persons in a crisis. The limited state funding for crisis services makes it difficult for counties to implement

new evidence-based services, such as mobile crisis workers that could meet law enforcement officers in the field for crisis calls, that would reduce the need for law enforcement involvement and provide a more trauma-informed response to crisis situations.

**CURRENT STATUS:** The public mental health system in Wisconsin is in need of additional resources to respond appropriately to the needs of individuals with persistent mental illness and those experiencing a mental health crisis. Stagnant state funding results in variations in the extent of services across counties, wait lists for services, and eligible persons receiving limited services.

**REQUESTED ACTION:** The Wisconsin Counties Association respectfully requests:

- State GPR be provided at \$21 million annually to fund crisis services statewide and elimination of the MOE requirement for Medicaid reimbursable services.
- State GPR be provided at \$19 million in FY 23-24 and \$21 million in FY 24-25 to cover the current county share of CSP Medicaid expenditures statewide.

**GOVERNOR'S BUDGET:** The Governor's budget recommends providing \$19 million in FY 23-24 and \$21 million in FY 24-25 to pay the nonfederal share of the Medicaid CSP. WCA supports the Governor's budget proposal but recommends inclusion of \$21 million for crisis services.

**TALKING POINTS:**

- As of February 2021, 36.4% of adults in Wisconsin reported symptoms of anxiety or depression. This led to 859,000 adults in Wisconsin having a mental health condition with 18.6% unable to get needed treatment.
- Additionally, in Wisconsin, 888 lives were lost to suicide and 231,000 adults had thoughts of suicide in the last year.
- In 2019 counties spent \$786.2 million on mental health and substance abuse services, while DHS distributes approximately \$170 million per year to counties through base community aids program and approximately \$24 million in a separate mental health allocation.
- If the Medicaid reimbursement for CSP is fully state funded, counties will remain responsible for the current \$11 million spent on persons that are not Medicaid reimbursable.

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# CAP TEAM

WCA County Ambassador Program

## **ADULT PROTECTIVE SERVICES**

Wisconsin's County Adult Protective Services (APS) are agencies that are tasked with aiding Elder Adults and Adults-at-Risk who have been abused, neglected, or exploited. Statutorily required protective services include, outreach, identification of individuals in need of services, counseling and referral for services, social services, case management, legal counseling, guardianship referral, and diagnostic evaluation. If vulnerable adults cannot remain safely in their own homes, counties are responsible for finding placements.

Wisconsin's counties and states across the U.S. continue to experience the effects of an increasingly aging population, increased social isolation, lack of caregivers, and the need for additional resources. County APS agencies and the Wisconsin Department of Health Services (DHS) have felt the strain of needing additional resources such as additional health care, dementia care, and locations for aging seniors who can no longer care for themselves.

The DHS-Adult Protective Services Office's annual report for 2021 showed 10,712 reports for adults over 60, which is an 84% increase from 2010. In the same time frame, the number of APS incidents for adults with disabilities rose by 38%. In Wisconsin, the population is rapidly aging in rural areas and is most pronounced in the northern half of the state. Northern counties face challenges in their APS programs due to higher than average growth in their aging population and tight labor markets creating workforce shortages of persons to provide care.

Along with population growth, there are projected increases in the prevalence of dementia. According to DHS, in 2015, it was estimated that 115,000 persons had dementia. By 2040, that number is expected to increase to 242,000 persons. In addition to aging and dementia populations, APS also serves young adults with disabilities who have aged out of children's programs.

The increasing APS population has resulted in greater difficulty in finding placements for persons who need long term care. Often facilities, such as nursing homes, assisted living or Community Based Residential Facilities are unwilling to take persons with cognitive limitations if the persons may act out with behavior issues. This has resulted in clients with cognition/dementia needs left waiting for a place to reside, creating ethical and dangerous situations for police officers, hospitals, health care facilities, and other care providers who are unable to safely care for these at-risk persons. Counties report in some instances contacting over 40 facilities that have stated they will not accept an elder at risk person.



The enactment of 2021 Wisconsin Act 122 requires counties to investigate claims of abuse, neglect and financial exploitation for people with disabilities under 60. Currently, in Wisconsin, 85% of individuals with disabilities require direct care for some or all of their support cannot find paid help and 40% of these individuals are receiving care from unpaid caregivers. The lack of caregivers results in additional calls of abuse and neglect for people with disabilities. DHS-Adult Protective Services Division's annual report for 2021 showed 2,847 reports of abuse and neglect for people with disabilities which is 21% of all calls to county APS.

Counties currently receive an allocation of \$7 million for APS services, which has not been increased since 2006. Counties supplement the APS allocation with Community Aids or county levy funds. The APS allocation to individual counties can be small, under \$20,000 for many counties, which is not sufficient to support county APS staff.

Providing increased funding, support and resources, such as safe placement locations for elder at-risk persons, as well as continued and increased collaboration between DHS and counties related to these issues is imperative for the safety and well-being of some of our most vulnerable populations.

**CURRENT STATUS:** State GPR funding to counties to investigate reports of abuse and neglect for people with disabilities and older adults has remained static at \$7 million while the numbers of elders and adults in need of protection has risen across every county in Wisconsin.

**REQUESTED ACTION:**

1. Provide a \$10 million increase in GPR funding to counties for APS, bringing the state share to about 1/2 of total APS funding.
2. Develop a statewide central registry of long-term care placement resources that counties can use, rather than each county maintaining its own resource list.

**GOVERNOR'S BUDGET:**

- \$9.5 million GPR to increase base funding for adult protective services, elder abuse, and domestic violence
  - \$8 million would go directly to counties for APS
  - \$1.5 million would also be provided to DHS for training initiatives and technical support

**TALKING POINTS:**

- According to a survey done by WCHSA there was a 56% increase in Protective Placements outside the county from 2019-2021.
- There was a 38% increase in Emergency Protective Placements from 2019-2021 and 58% of the respondents reported they do not have a facility for placement of these individuals.
- There was a 78% increase in people needing a corporate guardian from 2019-2021
- LFB reports a 38% increase of reports of abuse and neglect from 2013 to 2020 for adults with disabilities and a 237% increase for older adults from 2006 to 2020. State APS reports a 170% increase overall since 2006.
- Wisconsin is only one of 4 states that rely on local contact for reporting abuse and neglect reports - 44 states have a shared hotline.

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# CAP TEAM

WCA County Ambassador Program

## CHILD SUPPORT FUNDING

The child support enforcement program is designed to ensure that parents provide financial and medical support for their children, establish parental rights, and promote parental involvement in a child's life. In addition, child support is one of the most effective anti-poverty programs in the country and 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. A combination of state, federal, and county funds support the child support program.

Child support payments account for 42% of income for custodial families living in poverty. The financial support provided to children because of the program helps put food on their tables, clothes in their closets and school supplies in their backpacks. Children who receive child support are also:

- More likely to graduate high school
- Less likely to enter the criminal justice system
- Have fewer substantiated child protective services referrals

Wisconsin's strong performance in child support is at risk without additional state funding. The Wisconsin Child Support Program continues to drop in national rankings compared to other states. Wisconsin receives a 66% federal match for state GPR investments in child support as well as federal incentive payments. As a consequence of costs steadily increasing due to more complex cases, more administrative requirements, inflation, and other states investing more in their child support programs, further drops in Wisconsin's performance risk reduced federal incentive payments.

Category	2016 Ranking	2021 Ranking
Paternity Establishment	14	20
Support Order Establishment	27	34
Collection of Current Support	2	6
Collection of Arrears	11	13

DCF indicates that state support has not kept pace with administrative costs and IRS requirements imposed by changes in federal law. The requirements of the Flexibility, Efficiency, and Modernization in Child Support Act, include costs incurred for changes to case processing, electronic filing, background checks, fingerprinting, and changes to the state KIDS system and Circuit Court Automated Program. These increased demands for system modernization strain county resources. County child support agencies continue to see complex cases taking more of their time, workforce shortages, employee burnout, constant training of new staff while other staff picks up the caseload, and issues working with an archaic system.

**CURRENT STATUS:** Counties currently receive \$10.7 million in GPR support for the child support enforcement program.

**REQUESTED ACTION:**

1. Increase state GPR support for county child support agencies by \$5 million annually.
2. Provide the funding necessary for modernizing the child support system.

**GOVERNOR'S BUDGET:**

- An increase in funding by \$14.7 million all funds (\$5 million GPR and \$9.7 million FED) in each fiscal year to child support agencies to implement the program.
- Providing \$7.1 million in fiscal year 2023-24 (\$2.4 million GPR and \$4.7 million FED) and \$20.5 million in fiscal year 2024-25 (\$7 million GPR and \$13.5 million FED) to support the continuation of the Child Support Modernization IT project.

**TALKING POINTS:**

- In 2021, for every dollar spent on child support, \$6.43 is collected.
- In 2021, Child Support collected \$906 million in financial support, 98% of which went directly back into Wisconsin's children and families.
- 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.
- Every \$1 of state GPR invested generates \$2 in federal matching funds.
- Counties have contributed more towards child support enforcement costs than they have received in GPR funding allocations in every year since 2010 (Legislative Fiscal Bureau).
- Over the past decade, county child support staffing has fallen by almost 9%.

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# CAP TEAM

WCA County Ambassador Program

## **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 operated at the local level by counties. The Birth to 3 Program is often the first service 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), so the program is effectively an entitlement.

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 (parent co-pays), local, state, and federal tax dollars.

State and federal funding for the program decreased from 2007 to 2016, going from \$13,010,222 to \$11,712,328, yet the cost to operate the 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, over 40% with tax levy and Community Aids. Counties are responsible for covering most of the annual increase in program costs due to flat funding or limited growth in the other funding sources for the program.

**CURRENT STATUS:** Counties are currently bearing the brunt of the increased costs associated with operating the Birth to Three program. While private insurance was once a major funding source for this program, denials of claims by insurance companies have reduced the revenue to being a small part of the total program funding.

**REQUESTED ACTION:**

- Provide a \$4 million increase in the Birth to 3 state GPR allocation to bring the state share of the total program funding to approximately 20%.
- Provide annual GPR increases to cover the projected growth in caseload, service costs, and expanding of program eligibility to relieve the burden on counties to cover annual increases in program costs.

**GOVERNOR’S BUDGET:** The Governor’s budget recommends increasing funding for the Birth to 3 Program by \$3 million in FY 23-24 and \$6.1 million in FY 24-25 to expand the program to serve more lead-exposed children.

The Governor’s budget request of \$6 million is covering the costs of the expansion of the program eligibility. The WCA request is for \$4 million at the current eligibility/caseload. If the Governor’s proposal to expand the program eligibility is approved, the WCA request would be for \$10 million in order to increase the state share and increase dollars to expand the program.

**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 bill private insurance; however, federal law prohibits a delay or denial of services due to “inability to pay.”
- The additional GPR funding requested would bring state, federal and Medicaid funding to at least 50 percent of total program costs.
- Since the Birth to 3 program is an entitlement, it is not appropriate for the program to depend primarily on county tax levy revenue which is constrained by state-imposed levy limits as compared with state GPR funds from income and sales taxes which are unrestricted in their growth.

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**MONROE COUNTY**  
**Summary of Human Services Funding Challenges**  
*April 12, 2023*

Human Services is statutorily responsible for administering state programs. In Monroe County, Human Services administers child welfare, mental health and addiction treatment, services for children and adults with disabilities, aging programs and economic support services. **These are all important and necessary programs that serve some of our most needy and vulnerable citizens.** At one time the state community aids allocations were intended to fund county human services at 100%, but this is no longer the case. Counties do receive funding from the state toward the costs of providing these programs and services, but it is not sufficient. In many cases, the state requires that each county contribute a certain amount toward supporting programs. As costs continue to rise and state funding does not keep pace, the financial burden falls more heavily to local tax levy to keep these mandated programs operating.

The 2023 Budget for Human Services to provide these mandated programs and services is \$15,975,047. Monroe County receives \$7,261,729 from various state funding allocations which covers 45% of costs. Medicaid, insurance and other private pay revenues cover an additional \$4,255,972. Monroe County must contribute the remaining \$4,457,379. This year the County used some of its ARPA dollars to minimize the impact on county levy.

<b>2023 HUMAN SERVICES BUDGET</b>	<b>\$15,975,080</b>	
<b>STATE FUNDING SOURCES</b>	<b>\$ 7,261,729</b>	<b>45%</b>
BCA & DHS/DCF Funding	\$ 6,755,276	
GWAAR (Older Americans Act Funding)	\$ 321,815	
DOT & Federal - TRANSPORTATION AIDS	\$ 184,638	
<b>MEDICAID, OTHER INSURANCE, &amp; PRIVATE PAY REVENUES</b>	<b>\$ 4,255,972</b>	<b>27%</b>
<b>COUNTY LEVY &amp; ARPA FUNDS</b>	<b>\$ 4,457,379</b>	<b>28%</b>
2023 Tax Levy	\$ 4,050,502	
ARPA Funds	\$ 406,877	

Below are some examples of the funding shortfalls for the state-mandated services that counties are required to provide.

**Long Term Support Services** - When Wisconsin implemented Family Care; a managed care approach, the private managed care organizations assumed state contracts for serving individuals with long term care needs, but counties continue to be required to contribute a base level in local tax levy (determined by state formula) to support Family Care. **[Monroe County's Required Contribution: \$415,047]**

**Birth to Three** - Counties are mandated to provide early intervention, special education, and related services to children with developmental delays through the Birth to Three Program. **[State Allocation provides \$99,751; Monroe County's Required Maintenance of Effort Contribution is \$177,261; After \$79,000 in Medicaid revenue, there is still a need for \$231,847 in County Levy\* to operate the program]**

*\*Corrected from the figure presented at the Legislative Exchange held in Monroe County on January 30, 2023*



**Youth Services** - Counties are mandated to provide services to rehabilitate delinquent youth and provide protection for the community from juvenile crime. Counties are required to pay for the cost of children placed in court ordered correctional facilities. [State Youth Aids Allocation to Monroe is \$692,374; This combined with available Basic County Allocation does not cover the cost of services and will require and additional \$750,000 in County Levy]

**Child Welfare Services** - Counties are mandated by the state to carry out state responsibilities to protect children from abuse and neglect. Counties experience annual fluctuations in the number of child abuse and neglect cases presented to them. Thus placement and other related costs can be unpredictable. Overall, the counties have seen a gradual trend towards increased numbers and severity/complexity of abuse and neglect cases. The State requires that counties submit additional plans in order to obtain funding through Promoting Safe and Stable families, Targeted Support Safety Program, Title IV-E reimbursement, Community Intervention Program and other targeted funding opportunities. [State DCF Allocation: \$1,082,942; This combined with other targeted funding sources still does not cover cost of necessary services and will require \$1,571,000 in County Levy]

**Mental Health and Substance Abuse Services** - Counties are mandated to provide services to persons with mental illness or substance use disorders. Counties have some flexibility to determine the type and levels of service, but if the appropriate service is not provided, the risk to the county is that an individual might end up in a hospital or institutional setting. Counties are responsible for the full cost of these placements if the person does not have insurance coverage or the ability to pay. The daily rate at Winnebago Mental Health Institute is \$1,319 per day. [Monroe County conservatively budgeted \$582,000 for anticipated placements in 2023 which will come from County Levy]

Monroe County provides specialized treatment services through our outpatient clinic, Community Support Program, and Comprehensive Community Services. Medical Assistance is supposed to reimburse counties for the cost of service but those Medical Assistance rates are roughly 70% of actual county costs. The State reimburses counties in CCS consortia 100% of costs, but does not fully fund the similar Community Support program. Medicaid also provides funding for Certified Crisis programs with reimbursement up to 100% after a required county maintenance of effort contribution. [Monroe County's Required Contribution: \$88,831]

**Adult Protective Services** - Counties are responsible to review and investigate all claims of abuse or neglect against vulnerable populations. State funding to counties to investigate reports of abuse and neglect for people with disabilities and older adults has remained static while the numbers of elders and adults at risk and in need of protection has risen across every county in Wisconsin. [State APS and Elder Abuse allocations provide \$55,348 combined with available Basic County Allocation does not cover cost of service and will require and additional \$94,000 in County Levy]

**Economic Support Services** – Counties administer mandated state and federal public assistance programs including FoodShare, Medicaid, Caretaker Supplement, WI Shares Child Care subsidy assistance as well as Child Care Provider Certification/Regulation. Services are mandated to be provided in a multi-county regional Income Maintenance Consortia. Although all direct benefits issued to individuals are funded entirely by federal/state resources, the program operational expenses are not fully funded by state contract dollars and require county tax levy contributions. [Monroe's share of the Income Maintenance Administration Allocation is \$964,972; After using some reserve funds to reduce the amount of local levy needed, Monroe must still contribute \$70,500 in levy dollars]



# MONROE COUNTY SUMMARY

## HUMAN SERVICES DAY

APRIL 12, 2023

### MENTAL HEALTH SERVICES – Community Support Program & Crisis Services

The public mental health system in Wisconsin is in need of additional resources to respond appropriately to the needs of individuals with persistent mental illness and those experiencing a mental health crisis. State law designates counties with the primary responsibility for the well-being, treatment, and care of persons with mental illness. State funding has remained unchanged and not kept up with increased costs resulting in variations in the extent of services provided in each of the counties. Counties are restricted in their capacity to use tax levy revenue due to state levy limits, so the lack of Community Aids increases combined with strict property tax controls makes it difficult for counties to maintain crisis and CSP services.

### COMMUNITY SUPPORT PROGRAM

The Community Support Program (CSP) offers intensive community-based care for adults whose mental illness and functional limitations might otherwise require them to need institutionalized care. Counties use CSP services to keep people out of extended hospitalizations and support people in the community following emergency detentions. Monroe County serves 12 individuals in CSP. This is a relatively small number, but if only two of these individuals required institutional care for a year, the cost would be over \$970,000 (*State institutional rates range from \$1,319 – \$1,657 per day*).

**Monroe County's expected budget for providing CSP is \$179,112.** Monroe County receives Medicaid reimbursement, but only the federal share (*roughly 60% of the Medicaid rate*), meaning that the county is responsible for the nonfederal share as well as any costs that exceed the reimbursement payment. Medicaid reimbursement rates have not kept up with costs of services. Depending on reimbursements, ***Monroe County contributes \$100,000 and \$113,000 in tax levy to support CSP.***

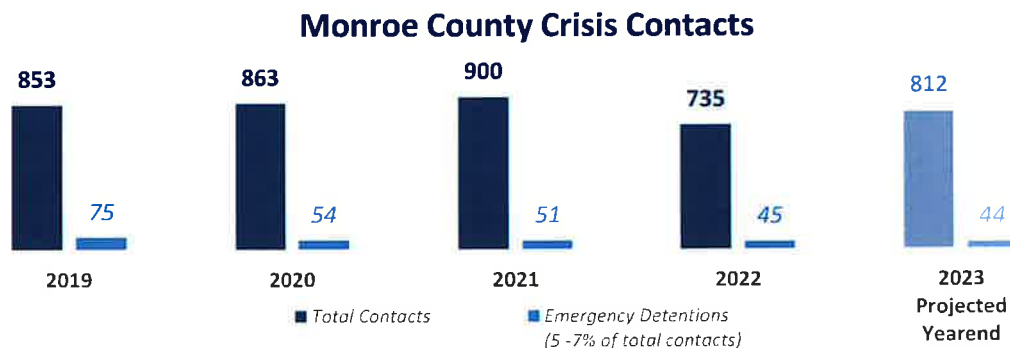
The state fully funds regionalized Comprehensive Community Services (CCS), a similar Medicaid program to CSP, by reimbursing counties for both the federal and nonfederal costs of these services. The state should fund these two important programs in the same way by also covering the county share of CSP Medicaid expenditures.

### REQUESTED ACTION:

**Monroe County supports WCA request that the state provide GPR at \$19 million in FY 23-24 and \$21 million in FY 24-25 to cover the current county share of CSP Medicaid expenditures statewide.**

## CRISIS SERVICES

Counties are required to provide emergency mental health services to persons in crisis situations. At a minimum, emergency programs must offer 24-hour crisis telephone service and 24-hour in-person response on an on-call basis. For persons who are Medicaid eligible, counties can receive Medicaid reimbursement. The state pays a portion of the nonfederal share if certified counties participate in regional services and meet a maintenance of effort (MOE) requirement. Monroe County's MOE requirement is \$88,831.



Emergency detention is necessary when an individual poses a risk to themselves or others and a safe local alternative is not available. There are limited crisis stabilization resources in the western region. If a local hospital does not have space, then individuals must be taken across the state to Winnebago Mental Health Institute. This is very costly and disruptive to individuals' lives. Better outcomes occur when individuals in crises can remain close to their support system. It also strains the law enforcement system who is responsible for securely transporting to and from the facilities. Counties are responsible for the cost of hospitalization if the person does not have insurance coverage or the ability to pay. *Monroe County conservatively budgeted \$582,000 for anticipated placements in 2023 which will come from County Levy.*

**Monroe County's budget for providing crisis intervention services is \$317,892.** This does not include inpatient hospital or institutional costs paid by the county when individuals do not have insurance coverage. It also does not include the costs that law enforcement agencies incur when transporting and providing security for persons in a crisis. Monroe County receives Medicaid reimbursement and utilizes mental health block grant to fund the crisis program but *the county must still contribute approximately \$139,500 in tax levy.*

Providing partial state funding for crisis services was a step in the right direction, but the additional state funding has yet to have a substantial impact on reducing the disproportionate county share.

### REQUESTED ACTION:

**Monroe County supports WCA request that the state provide GPR at \$21 million annually to fund crisis services statewide and eliminate the MOE requirement for Medicaid reimbursable services.**

## ADULT PROTECTIVE SERVICES

Wisconsin's County Adult Protective Services (APS) are tasked with aiding elder adults and adults-at-risk who have been abused, neglected, or exploited. Statutorily required protective services include, outreach, identification of individuals in need of services, counseling and referral for services, social services, case management, legal counseling, guardianship referral, and diagnostic evaluation. If vulnerable adults cannot remain safely in their own homes, counties are responsible for finding placements.

### Monroe County Adult Protective Services Referrals



State funding to counties for investigating these reports has remained static while the numbers of elders and adults in need of protection continues to rise across every county in Wisconsin.

**Monroe County's budget for providing adult protective services is \$ 149,856.** This does not include placement costs paid by the county when individuals do not have insurance coverage. The State's Adult Protective Services Allocation and the Elder Abuse Grant provides \$55,348 in funding toward Monroe County's APS costs. *Monroe County contributes \$94,468 in tax levy to supplement the shortfall.*

There is a need for safe placement locations for elder at-risk persons and increased collaboration between DHS and counties. Providing increased funding, support, and resources is imperative for the safety and well-being of some of our most vulnerable populations.

### **REQUESTED ACTION:**

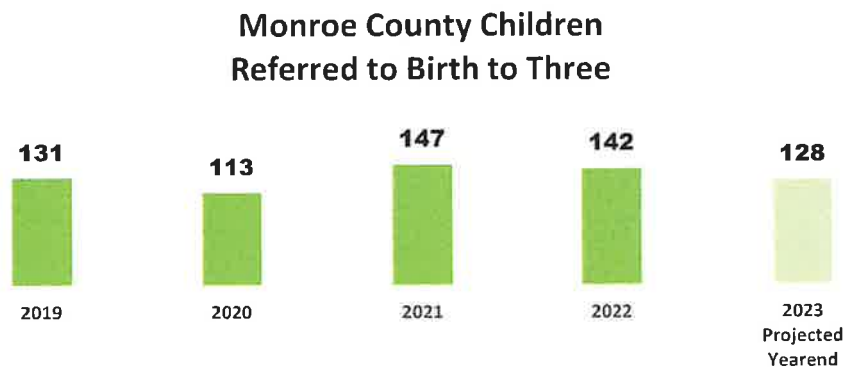
**Monroe County supports WCA request that the state provide a \$10 million increase in GPR funding to counties for APS, bringing the state share to about 1/2 of total APS funding.**

**And, develop a statewide central registry of long-term care placement resources that counties can use, rather than each county maintaining its own resource list.**

## BIRTH TO THREE SERVICES

The Birth to Three Program is an early intervention program that serves families with children under the age of three with developmental delays and disabilities. 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 Three 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.

A full assessment is conducted on every child referred in order to determine the extent of developmental delays or disability.



Counties fund over 40% of Birth to Three Program costs using tax levy and Community Aids. The state requires that counties contribute a minimum maintenance of effort (MOE) toward the program, but due to flat funding or limited growth in the other funding sources we have been responsible for covering most of the annual cost increases. Monroe County's required MOE contribution is \$177,261 but more is needed from the county to adequately fund the needed services.

**Monroe County's budget for providing the Birth to Three Program is \$694,370.** The program is funded with from the State's Birth to Three Allocation (\$99,751) as well as community aids, Medicaid reimbursement, parental cost-share contributions, and county levy. ***Monroe County contributes \$231,847 in tax levy to operate the program.***

### **REQUESTED ACTION:**

**Monroe County supports WCA request that the state provide a \$4 million increase in the Birth to Three Program state GPR allocation to bring the state share of the total program funding to approximately 20%.**

**And, provide annual GPR increases to cover the projected growth in caseload, service costs, and expanding of program eligibility to relieve the burden on counties to cover annual increases in program costs.**



2023 – 2025 Executive Budget Recommendation

**Child Support Information  
Technology Modernization Project**



**Key System Objectives**

**Replace a 25-year old system that lacks basic modern functionality:**

- Provide a modern platform to reduce the number of participant inquiries about child support
- Provide drop-down menus and point and click interfaces
- Provide participants with live account access via modern tools like mobile apps

**Reduce extensive time commitment performing manual workarounds:**

- Increase child support collections through automation and use of business intelligence
- Improve case work effectiveness using automated workflow and dashboards
- Improve the effective provision of child support services through the use of automated case processing and financial management systems required to meet federal performance objectives

**Reduce staff training time with intuitive modernized user interfaces and streamlined workflows :**

- Reduce the two year time frame it takes new child support workers to become proficient with the outdated system
- Improve our ability to hire new staff who have the skillsets to work with modern technologies

**Mitigate the risks associated with the limitations of an outdated platform and complex system architecture:**

- Reduce the cost of replacing technical staff by eliminating the use of programming language that is no longer taught in colleges and universities
- Reduce the cost of system maintenance and the risk of incompatibility with newer systems with external partners

**Ensure compliance with state and federal security requirements:**

- Modernize system to provide security to safeguard participant information, meet IRS safeguarding and SSA security requirements
- Mitigate the risk of data being inadvertently compromised

The Department of Children and Families is an equal opportunity employer and service provider. If you have a disability and need to access services, receive information in an alternate format, or need information translated to another language, please call the Child Support Program at 608-422-6250. Individuals who are deaf, hard of hearing, deaf-blind or speech disabled can use the free Wisconsin Relay Service (WRS) – 711 to contact the department.



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PRODUCTION

K I D S  
MAIN MENU

VRP20255

KIDS INFORMATION DATA SYSTEM  
WISCONSIN BUREAU OF CHILD SUPPORT

- 
- |                                    |                                      |
|------------------------------------|--------------------------------------|
| 01 - CASE INITIATION               | 07 - SUPERVISORY FUNCTIONS           |
| 02 - INQUIRY FUNCTIONS             | 08 - INTERSTATE PROCESSING MENU      |
| 03 - CASE MANAGEMENT               | 10 - DOCUMENT RETRIEVAL (NON WIKIDS) |
| 04 - PARTICIPANT MAINTENANCE       |                                      |
| 05 - FINANCIAL MANAGEMENT          |                                      |
| 06 - THIRD PARTY TABLE MAINTENANCE |                                      |

UNAUTHORIZED USE OF KIDS IS PROHIBITED UNDER S. 49.83, WIS. STATS.  
ACCESSING KIDS FOR PERSONAL INFORMATION OR ANY OTHER PURPOSE NOT DIRECTLY  
RELATED TO ADMINISTRATION OF THE PROGRAMS IS STRICTLY PROHIBITED.

ENTER NUMBER OF SELECTION \_\_\_\_\_

F1-HELP

F2-JUMP-SAVE

F3-SIGN OFF

F14-JUMP-ERASE

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VRP20255

20,53

## CHILD SUPPORT ISSUE—VA DISABILITY

Currently the majority of child support payments are made by Income Withholding where the payments are deducted by employers/social security disability/military pay and retirement and sent to the trust fund. Currently it is not withheld from VA Disability and SSI.

SSI is not considered income for child support purposes so payments are not due from that money.

VA Disability is considered income for purposes of child support. So we use it to calculate the support that should be paid and is then ordered.

Since you cannot deduct support from VA Disability by income withholding the Veteran has to make the payments on their own. Many of them do not make these payments which results in Child Support Agencies taking actions, such as:

- Setting the person for Court and if they do not show a bench warrant is issued for their arrest. There is always a bond amount, but the Veteran may end up spending some time in jail if unable to post the bond.
- Filing a contempt of court motion resulting in possible jail sentences.
- Administrative actions such as suspending hunting/fishing/driver's licenses; credit bureau reporting.
- Possible Criminal nonsupport charges, which may result in a felony charge.

### Possible Solutions:

- Allow child support to be withheld from VA disability.
- Do not use VA disability in calculating child support.

Monroe County has approximately 10 cases out of 3,000 with this situation so it is not a large number. However, this is troublesome to veteran's that may have many issues they are dealing with and then to add us in the mix. And it is also hard on the parents that are expecting to receive payments and are not. So I am not advocating for either solution just would be very helpful to not have the current situation.

I do not know how many cases across the State this affects.

It is just an issue I thought could be brought to your attention.

Pamela Pipkin  
Monroe County Child Support Director  
608-269-8809  
Pamela.Pipkin@co.monroe.wi.us

# Position Requests

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DEPARTMENT OF HUMAN SERVICES

## The Requests...

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- 1. Authorize adding one Children's Long Term Support (CLTS) and four Comprehensive Community Services (CCS) Social Worker positions***
- 2. Authorize a new Behavioral Health Supervisor position***





## CLTS & CCS Program Overview

### Children's Long-Term Support (CLTS)

*Provides community-based services and adaptive supports to children with developmental disabilities; severe emotional disturbances, and physical disabilities*

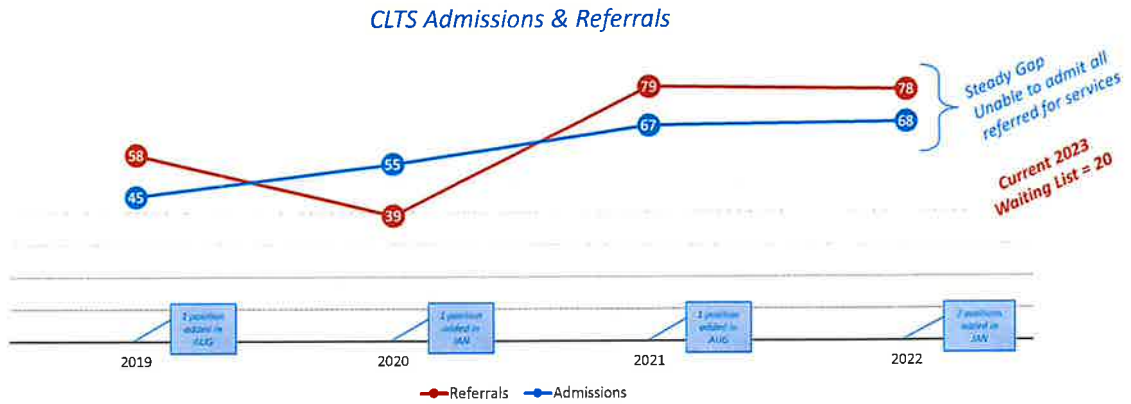
- Program Funding: **100% Funded** through Medicaid Waiver Revenue (No County Levy)
- Current Enrollment: **263 Children**
- Current Waiting List: **20 Children**
- Current Staffing: **8 FTE Social Worker Positions**
- Current Average Caseload: **33 cases per staff**
- Recommended Caseload: **25 – 30 cases per staff**

### Comprehensive Community Services (CCS)

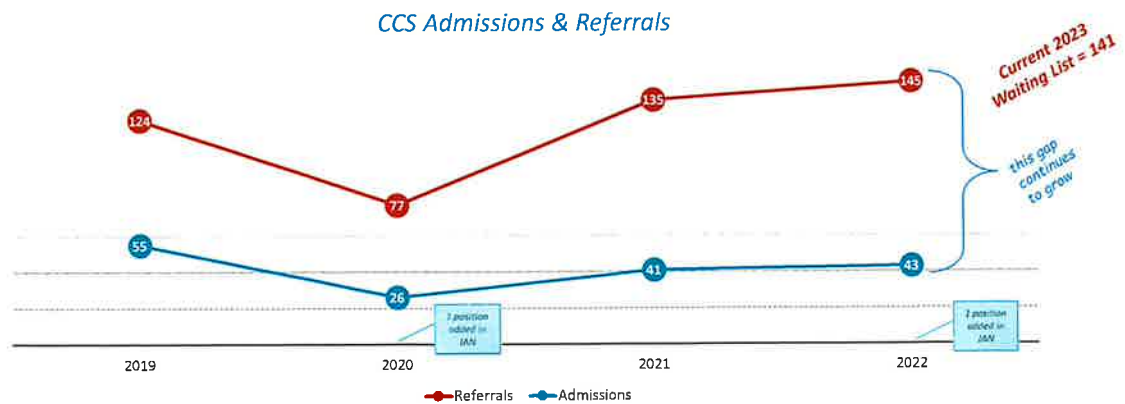
*Provides intensive community-based treatment services and skills development training to adults and children with serious mental health and/or substance-use disorders.*

- Program Funding: **100% Funded** through Medicaid Revenue (No County Levy)
- Current Enrollment: **126 Adults & Children**
- Current Waiting List: **141 Adults & Children**
- Current Staffing: **9 FTE Social Worker Positions & 1.5 FTE Mental Health Professionals**
- Current Average Caseload: **14 cases per staff**
- Recommended Caseload: **15 – 20 cases per staff** (Smaller caseloads are recommended in CCS because of required increased contacts and team meetings)

### CLTS admissions will not be able to keep up with referrals in the coming year

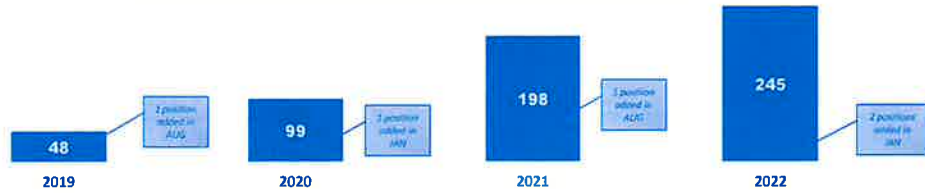


### CCS admissions are falling further and further behind the referrals received each year



# CLTS & CCS Program Numbers

Number Served in CLTS & Positions Added



Number Served in CCS & Positions Added



# CLTS & CCS Program Staffing and Caseload Data

Children's Long-Term Support (CLTS)

	2019	2020	2021	2022	2023 YTD
Added Positions	1	1	1	2	1
Total FTE Staff	3	4	5	7	8
Program Enrollment	49	99	198	245	263
Caseload per Staff*	16	25	40	35	33

\*Recommended maximum caseload is 25 – 30

Current 2023  
Waiting List = 20

NOTE: From 2019 to 2022, CLTS succeeded in eliminating a significantly backlogged waiting list.

Comprehensive Community Services (CCS)

	2019	2020	2021	2022	2023 YTD
Added Positions		1		1	1
Total FTE Staff	6	7	7	8	9
Program Enrollment	135	131	142	156	126
Caseload per Staff**	23	19	20	20	14

\*\*Recommended maximum caseload is 15 – 20

Current 2023  
Waiting List = 141

NOTE: Smaller caseloads are recommended in the CCS program because of the increased contacts and team meetings that are required as part of the services.

## Position Costs and Funding

POSITION	2023 COST		ANNUAL COST THEREAFTER	
	per Position	TOTAL	per Position	TOTAL
CLTS Social Worker (1)	\$ 43,097	\$ 43,097	\$ 86,283	\$ 86,283
CCS Social Worker (4)	\$ 42,847	\$ 171,388	\$ 86,283	\$ 345,131
<b>TOTAL</b>		<b>\$ 214,485</b>		<b>\$ 431,414</b>

**Both the CLTS and CCS programs are fully funded by Medicaid revenues, state waiver funding, and the Wisconsin Medicaid Cost Reporting (WIMCR) reconciliation funds.**

## How the Medicaid Waiver Program works...

The CLTS Waiver Program makes Medicaid funding available to support children and youth with disabilities who live at home or in the community.

It is called a “waiver” because the program permits certain federal Medicaid regulations to be waived, and Medicaid funding to be used, in a home and community setting rather than in an institutional setting.

Each year, the county sets a billable rate based on what we project our expenses will be and then when the year ends, we complete a reconciliation of our actual expenses and revenues. There is a Maintenance of Effort (MOE) that the county is required to contribute (\$41,106), but we are able to utilize CCOP funds so no County Levy is required.

CLTS is 100% reimbursed through a yearend reconciliation that covers the county’s costs that were in excess of Medicaid payments from our billable rate. The county must request an **Administrative Variance** to cover excess costs.

Reconciliation occurs immediately following the end of the year, so payment is able to be applied to the same year that expenses were incurred.

### CLTS Example

**If...** 2022 CLTS Staff Salaries & Benefits plus AMSO\* was **\$700,000** **but...** 2022 Billable Medicaid payments received was **\$500,000** **then...** The 2022 Administrative variance payment would be **\$200,000**

\*Administrative, Management, Support, And Overhead costs

## How WIMCR works...

The Wisconsin Medicaid Cost Reporting (WIMCR) program is a cost-based payment system for counties that are certified Medicaid providers of community-based services.

Certified programs bill Medicaid for services, but the Medicaid interim rates set by the state often do not fully cover the costs of the program which includes direct service staff salaries and benefits as well as Administrative, Management, Support, And Overhead (AMSO) costs.

WIMCR is a reconciliation process to provide additional funding to counties for these expenses.

CCS is **100% reimbursed** through the WIMCR program by covering the county's costs that were in excess of Medicaid payments received.

Reconciliation occurs the year after expenses are incurred.

### CCS Example

**If...** 2022 CCS Staff Salaries & Benefits plus AMSO\* was **\$2,600,000** **but...** 2022 Billable Medicaid payments received was **\$1,900,000** **then...** The 2023 WIMCR payment to the county would be **\$700,000**

\*Administrative, Management, Support, And Overhead costs

## Covering 2023 CCS Position Costs

- Because WIMCR payments are received a year after the expenses are incurred, we must have a plan to cover the costs of the CCS positions in the 2023 budget year **without any additional Levy**.
- Late in 2022, the state made a change to their schedule for collecting required Family Care Contributions from counties that resulted in Monroe County only being required to make a prorated payment in 2023. This occurred after we already budgeted for the full payment amount.
- In order cover the 2023 CCS position costs, a line item transfer will be requested in order to utilize remaining unspent funds from the Family Care Contribution.

Family Care Annual Contribution		2023 AMOUNT	2023 CCS POSITION COSTS	
Annual Required Contribution	\$	415,046.74	CCS Social Worker Positions (4)	\$ 171,388
2023 Prorated Payment Due*	(\$)	103,761.69		
<b>Remaining Unspent Funds</b>	<b>\$</b>	<b>311,285.051</b>		

\* Due to a change in the State's payment schedule, Monroe County will only be required to make a prorated payment in 2023.

Utilize \$171,388 of these unspent funds to cover positions





## Behavioral Health Unit

### Clinical Administrator

Manages...

- Six distinct programs

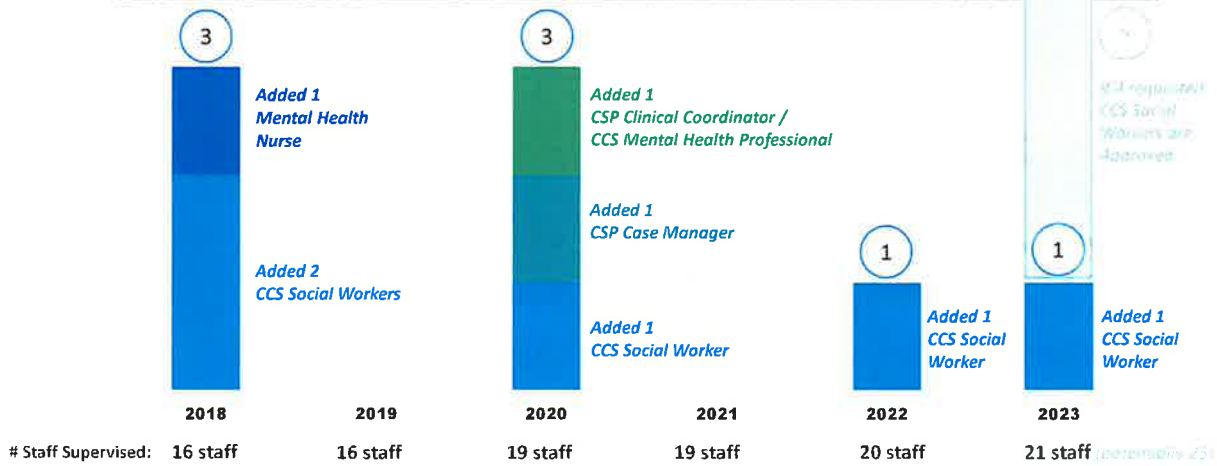
Supervises / Oversees...

- Medical Director Contract
- Contracted APNP Psychiatric Prescriber
- Contracted Health Department Nurse *(when working in Behavioral Health Programs)*
- 21 Human Services Employees

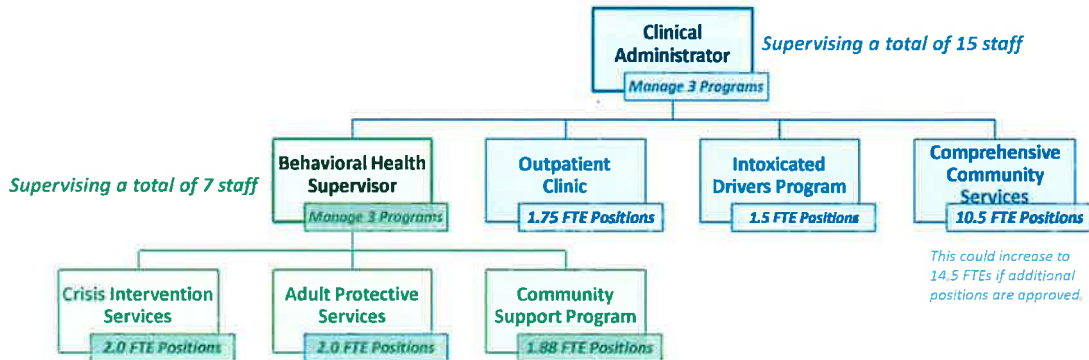
Crisis Intervention Services	<ul style="list-style-type: none"> <li>• Crisis Professionals (1.5 FTEs)</li> <li>• Program Associate (0.5 FTE)</li> </ul>
Adult Protective Services	<ul style="list-style-type: none"> <li>• APS Professional (1.5 FTEs)</li> <li>• Program Associate (0.5 FTE)</li> </ul>
Outpatient Clinic	<ul style="list-style-type: none"> <li>• Contracted APNP Psychiatric Prescriber (0.75 FTE)</li> <li>• Mental Health Nurse (1.0 FTE)</li> <li>• Mental Health Therapist (0.25 FTE)</li> <li>• Substance-Use Counselor (0.25 FTE)</li> </ul>
Intoxicated Drivers Program	<ul style="list-style-type: none"> <li>• IDP Assessor Coordinator (1.0 FTE)</li> <li>• IDP Assessor (0.5 FTE)</li> </ul>
Comprehensive Community Services	<ul style="list-style-type: none"> <li>• Mental Health Professional (1.5 FTEs)</li> <li>• Service Facilitators (9.0 FTEs)</li> </ul>
Community Support Program	<ul style="list-style-type: none"> <li>• Clinical Coordinator (0.5 FTE)</li> <li>• Case Manager (1.0 FTE)</li> <li>• Health Department Nurse (0.33 FTE)</li> </ul>

## Positions Added to Behavioral Health Requiring Supervision

*(total of 8 positions added since 2018)*



## *Behavioral Health Proposed Organization Structure*



## Position Costs and Funding

POSITION	2023 COST	ANNUAL COST THEREAFTER
Behavioral Health Supervisor	\$ 54,878	\$ 108,644

*This position will be funded by a combination of existing county levy shifted from the Clinical Administrator position and through the WIMCR program.*

### *Funding the Supervisor Position...*

- While CCS is 100% funded through WIMCR, Not all WIMCR programs are 100% funded (i.e. Outpatient Clinic, Crisis, CSP). Generally, counties only receive the Federal share of Medicaid funding for these program (roughly between 50% and 60%).
- Adult Protective Services is not covered under the WIMCR Program at all.
- No additional levy dollars will be required to fund the Behavioral Health Supervisor, but some existing levy in the Human Services Budget will be shifted from the Clinical Administrator costs to the Behavioral Health Supervisor position.
- Approximately 45% of the Clinical Administrator position cost (\$43,000) is funded by County Levy and the remaining is funded through WIMCR and other state allocations.
- Because more of the Clinical Administrator's time will be dedicated to CCS, her increased time will be reimbursed through the WIMCR program (requiring less levy).
- If the position is approved and hired in July, approximately \$8,000 of levy will be shifted from funding the Clinical Administrator position toward funding the Behavioral Health Supervisor position. The remaining funding would be captured through WIMCR funding.



## Covering 2023 BH Supervisor Position Costs

- Again, because WIMCR payments are received a year after the expenses are incurred, we must have a plan to cover the costs of the Behavioral Health Supervisor in the 2023 budget year **without any additional Levy**.
- Like the plan for covering the 2023 CCS position costs, a line item transfer will be requested in order to utilize remaining unspent funds from the Family Care Contribution to cover the Behavioral Health Supervisor position

Family Care Annual Contribution		2023 AMOUNT	2023 POSITION COST	
Annual Required Contribution		\$ 415,046.74	Behavioral Health Supervisor	\$ 54,878
2023 Prorated Payment Due*		(\$ 103,761.69)		
<b>Remaining Unspent Funds</b>		<b>\$ 311,285.05</b>		
Line Item Transfer for CCS Positions		(\$ 171,388.00)		
<b>Remaining Unspent Funds</b>		<b>\$ 139,897.05</b>		

Utilize \$54,878 of these unspent funds to cover the position

After the line item transfers are complete, \$85,019.05 will remain in the Family Care Contribution budget line

\* Due to a change in the State's payment schedule, Monroe County will only be required to make a prorated payment in 2023.

*Thank you!*



funding, and the WIMCR program with no additional county levy. A simple majority vote of the entire membership of the Monroe County Board of Supervisors is required for approval.

Purpose: To approve needed CLTS and CCS positions for 2023 in order to meet service needs.

Finance Vote (If required):  
\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Absent

Approved as to form on \_\_\_\_\_  
\_\_\_\_\_  
Lisa Aldinger Hamblin, Corporation Counsel

Committee of Jurisdiction Forwarded on: \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Absent  
Committee Chair: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ADOPTED  FAILED  AMENDED  
 OTHER \_\_\_\_\_  
County Board Vote on: \_\_\_\_\_ 20\_\_\_\_  
\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Absent

STATE OF WISCONSIN  
COUNTY OF MONROE  
I, SHELLEY R. BOHL, Monroe County Clerk, DO HEREBY CERTIFY that the foregoing is a true and correct copy of Resolution # \_\_\_\_\_ acted on by the Monroe County Board of Supervisors at the meeting held on \_\_\_\_\_.  
\_\_\_\_\_  
SHELLEY R. BOHL, MONROE COUNTY CLERK  
*A raised seal certifies an official document.*

# New Position Analysis



- New position
- Increased hours to current position
- Additional existing position

<b>Date:</b> 05/02/2023	<b>Department:</b> Human Services
<b>Department Head Name:</b> Tracy Thorsen	

Explain the necessity of this position (be specific as to the reasons why this position is needed and explain reasons why present staff cannot accomplish tasks):

The Children's Long-Term Support (CLTS) program provides intensive community-based services and adaptive supports to children with developmental disabilities; severe emotional disturbances, and physical disabilities. The CLTS program has a waiting list of 23 children who need these services, but current staff caseloads are full (averaging 32 cases per social worker). The recommended caseloads for CLTS is 25 – 30. Current staffing is no longer able to keep up with referrals of children requiring these services. An additional position is necessary in order to address service needs of children with disabilities and keep up with future referrals.

<b>Suggested Title:</b> Social Worker			
<b>Personnel Director's Recommended Classification:</b>	<b>Grade:</b> N	<b>FLSA Class:</b> Exempt	
<b>Full-time:</b> <input checked="" type="checkbox"/>	<b>Part-time:</b> /hours	<b>Projected Start Date:</b> 7/3/2023	

\*Current or newly created Job Description in current County format must be attached.\*  
\*A completed and approved Resolution must also accompany this Position Analysis.\*

## Funding - Annual Costs to include family insurance coverage:

Hourly Rate	Annual Salary	Retirement	Social Security	Medicare	Work Comp	Health Ins.	Dental Ins.	Life Ins.
25.57	53,186	3,617	3,298	772	612	23,941	839	18

1. Where will the funds for this position come from?  
 The costs for this position is fully funded through the CLTS Waiver Program and will not require additional Levy.
2. What equipment will need to be purchased for this position (desk, etc.)?  
 Computer Set-up, Phone, and Desk Chair
  - a. Is office space presently available? Yes Where? Historic Courthouse
  - b. Estimated cost of needed equipment? \$1,950
  - c. Is the cost of needed equipment in the department budget? Yes, with a line item transfer
3. What is the grand total cost of all items this fiscal year? \$26,593 (salary) + \$16,504 (fringe/wkrcomp/equip) = \$43,097
4. What is the annual cost of salary and fringes, thereafter? \$53,186 (salary) + \$33,097 (fringe/wkrcomp) = \$86,283

**Supervisory Responsibility** (if applicable):

1. In brief detail, explain the supervisory authority this position will have:

N/A
-----

2. Number of employees Directly supervised: \_\_\_\_\_ Indirectly: \_\_\_\_\_

List the position titles that will report to this position:


3. What position title will this position report to? CFS Supervisor

**County Administrator – Action:**

Date: 4/27/2027	Position Approved: <input checked="" type="checkbox"/>	Position Denied: <input type="checkbox"/>	
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**Committee of Jurisdiction:** Health + Human Services – Action:

Date: <u>5/2/2023</u>	Position Approved: <input checked="" type="checkbox"/>	Position Denied: <input type="checkbox"/>	by a vote of: <u>6-0-3</u>
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**Administration & Personnel Committee – Action:**

Date:	Position Approved: <input type="checkbox"/>	Position Denied: <input type="checkbox"/>	by a vote of:
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**Finance Committee – Action on Fiscal Note:**

Date:	Funds Approved: <input type="checkbox"/>	Funds Denied: <input type="checkbox"/>	by a vote of:
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**County Board – Action:**

Date:	Position Approved: <input type="checkbox"/>	Position Denied: <input type="checkbox"/>	
By a vote of:	aye	nay	absent/abstention

<b>Job Title:</b>	<b>Human Services Social Worker I – CFS – Children’s Long Term Support Program (CLTS)</b>	<b>Department:</b>	Human Services
<b>Location:</b>	112 S. Court St. Room 3000, Community Services Center, Sparta	<b>FLSA Category:</b>	Exempt- Professional
<b>Immediate Supervisor:</b>	Social Work Supervisor (Children and Family Services)	<b>Salary Grade:</b>	
<b>Supervision Exercised:</b>	None.	<b>Position Type:</b>	Full-time:

**Basic Functions and Responsibilities**

Works with children and families of children with special needs (physical, developmental, and mental health disabilities). Screens children for functional eligibility and provides service coordination to children eligible and enrolled in the Children’s Long Term Support Waiver Program (CLTS).

**Job Description**

**ROLE AND RESPONSIBILITIES**

- Screen children for functional and financial eligibility in the Children’s Long Term Support Waiver Program (CLTS).
- Responsible for overall case management of eligible children and families in CLTS.
- Develop, assess, and update Individual Service Plans (ISP) for children
- Provides advocacy, information, and resources to eligible children and families
- Coordination of services provided under the specified guidelines of the CLTS program manual.
- Provide direct contact with clients and make appropriate collateral service contacts
- Participate in wrap around service coordination through meeting with children and their families; attend Individual Educational Plan (IEP) meetings in the local school system; meet/consult with other professionals involved in the delivery of services to children and families
- Responsible for balancing the needs of children and families in the CLTS program with federal and state requirements
- Document case management time for billing purposes.
- Provide transitional and relocation assistance for children and families who by age exceed the guidelines for CLTS.

**QUALIFICATIONS AND EDUCATION REQUIREMENTS**

- Bachelor’s degree with major in social work or related degree programs (i.e., sociology, psychology, or guidance and counseling), with a minimum of four years social work in a human services agency with a case manager of support and service coordination;
- Certified, or eligible for certification, under 2001 Wisconsin Act 80; Wisconsin §457.08.
- Valid Wisconsin driver’s license, reliable transportation, and sufficient driver liability insurance.
- Computer skills.

**PHYSICAL DEMANDS**

A large percentage of time is spent Sitting, walking, talking, hearing, keyboarding, using judgment. Stands, stoops, climbs, bends, reaches, uses near and far vision, lifts, pushes/pulls up to 10 pounds, carries up to 40 pounds, is exposed to adverse weather, potential for physical attack, travels to and moves about county sites and homes intermittently.

**ADDITIONAL NOTES**

Please note this job description is not designed to cover or contain a comprehensive listing of activities, duties, or responsibilities that are required of the employee for this job. Duties, responsibilities, and activities may change at any time with or without notice.

# New Position Analysis



- New position
- Increased hours to current position
- Additional existing position

<b>Date:</b> 05/02/2023	<b>Department:</b> Human Services
<b>Department Head Name:</b> Tracy Thorsen	

Explain the necessity of this position (be specific as to the reasons why this position is needed and explain reasons why present staff cannot accomplish tasks):

The Comprehensive Community Services (CCS) program provides intensive community-based treatment services and skills development training to adults and children with serious mental health and/or substance-use disorders. The CCS program has a waiting list of 141 individuals who need these services, but current staff caseloads are nearly full (averaging 14 cases per social worker). The recommended caseloads for CCS is 15 - 20. Current staffing is no longer able to keep up with referrals of individual requiring these services. Four additional positions are necessary in order to address service needs of individuals and keep up with future referrals.

<b>Suggested Title:</b> Social Worker			
<b>Personnel Director's Recommended Classification:</b>		<b>Grade:</b> N	<b>FLSA Class:</b> Exempt
<b>Full-time:</b>	<input checked="" type="checkbox"/>	<b>Part-time:</b> /hours	<b>Projected Start Date:</b> 7/3/2023

\*Current or newly created Job Description in current County format must be attached.\*  
\*A completed and approved Resolution must also accompany this Position Analysis.\*

## Funding - Annual Costs to include family insurance coverage:

Hourly Rate	Annual Salary	Retirement	Social Security	Medicare	Work Comp	Health Ins.	Dental Ins.	Life Ins.
25.57	53,186	3,617	3,298	772	612	23,941	839	18

1. Where will the funds for this position come from?  
 The costs for these positions are fully funded through billable Medicaid Revenue and the WIMCR reconciliation and will not require additional Levy.  
 Because WIMCR payments are received a year after the expenses are incurred, a line item transfer will be necessary in 2023 to utilized remaining funds from the Family Care Contribution.
2. What equipment will need to be purchased for this position (desk, etc.)?  
 Computer Set-up and Phone
  - a. Is office space presently available? No      Where? This will need to be a Telework Position
  - b. Estimated cost of needed equipment? \$1,700
  - c. Is the cost of needed equipment in the department budget? Yes, with a line item transfer
3. What is the grand total cost of all items this fiscal year?  $[\$26,593(\text{salary}) + \$16,254(\text{fringe/wkrcomp/equip}) = \$42,847] \times 4 \text{ positions} = \$171,388$
4. What is the annual cost of salary and fringes, thereafter?  $[\$53,186 (\text{salary}) + \$33,097 (\text{fringe/wkrcomp}) = \$86,283] \times 4 \text{ positions} = \$345,131$

**Supervisory Responsibility** (if applicable):

1. In brief detail, explain the supervisory authority this position will have:

N/A
-----

2. Number of employees Directly supervised: \_\_\_\_\_ Indirectly: \_\_\_\_\_

List the position titles that will report to this position:


3. What position title will this position report to? Clinical Administrator/ BH Supervisor

**County Administrator – Action:**

Date: 4/27/2023	Position Approved: <input checked="" type="checkbox"/>	Position Denied: <input type="checkbox"/>
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**Committee of Jurisdiction:** Health + Human Services – Action:

Date: <u>5/2/2023</u>	Position Approved: <input checked="" type="checkbox"/>	Position Denied: <input type="checkbox"/>	by a vote of: <u>6-0-3</u>
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**Administration & Personnel Committee – Action:**

Date:	Position Approved: <input type="checkbox"/>	Position Denied: <input type="checkbox"/>	by a vote of:
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**Finance Committee – Action on Fiscal Note:**

Date:	Funds Approved: <input type="checkbox"/>	Funds Denied: <input type="checkbox"/>	by a vote of:
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**County Board – Action:**

Date:	Position Approved: <input type="checkbox"/>	Position Denied: <input type="checkbox"/>	
By a vote of:	aye	nay	absent/abstention



<b>Job Title:</b>	<b>Human Services Behavioral Health Professional</b>	<b>Department:</b>	Human Services
<b>Location:</b>	112 S. Court Street, Rm 3000 , Sparta	<b>FLSA Category:</b>	Exempt- Professional
<b>Immediate Supervisor:</b>	Clinical Administrator - Behavioral Health	<b>Salary Grade:</b>	
<b>Supervision Exercised:</b>	None.	<b>Position Type:</b>	Full-time:

**Basic Functions and Responsibilities**

Under general supervision of the Clinical Administrator, the Behavioral Health Professional provides services to at-risk children and adults, individuals with mental health or substance abuse related issues.

**Job Description**

**ROLE AND RESPONSIBILITIES**

- Provides initial and ongoing assessments and serves as a resource person
- Develops case plans, makes arrangements for appropriate services, and monitors individuals receiving Behavioral Health services
- Participate on committees and task forces as assigned
- Complete all required documentation related to job functions within established timelines
- May provide services in the following areas:
  - Adult Protective Services to adults-at-risk and elder adults-at-risk including court and monitoring actions related guardianships and protective placements
  - Crisis Intervention Services including risk assessment, linkage and follow-up activities, crisis planning, and initiating court and monitoring actions related to emergency detentions and civil commitments;
  - Coordinated Services Team
  - Comprehensive Community Services
  - Community Recovery Services
  - Targeted Case Management
  - Any other related services or programs

**QUALIFICATIONS AND EDUCATION REQUIREMENTS**

- Minimum of a Bachelor's degree with major in social work, sociology, psychology, or guidance and counseling; or general college degree with two years professional experience in a human services agency.
- Valid Wisconsin's driver's license.
- Credentialed by the Wisconsin Department of Safety and Professional Services as a Certified Social Worker or other advanced credential such as Advance Practice Social Worker, Licensed Clinical Social Worker, Licensed Professional Counselor, and License Marriage and Family Therapist (individuals who can identify a path to licensure may be considered).

**PHYSICAL DEMANDS**

A large percentage of time is spent Sitting, walking, talking, hearing, keyboarding, using judgment. Stands, stoops, climbs, bends, reaches, uses near and far vision, lifts, pushes/pulls up to 10 pounds, carries up to 40 pounds, is exposed to adverse weather, potential for physical attack, travels to and moves about county sites and homes intermittently.

**ADDITIONAL NOTES**

Please note this job description is not designed to cover or contain a comprehensive listing of activities, duties, or responsibilities that are required of the employee for this job. Duties, responsibilities, and activities may change at any time with or without notice.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved by Supervisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**RESOLUTION AUTHORIZING A BEHAVIORAL HEALTH SUPERVISOR POSITION IN THE MONROE COUNTY HUMAN SERVICES DEPARTMENT**

1 **WHEREAS**, the Behavioral Health Unit consists of twenty-one (21) staff and one (1) manager; and

2  
3 **WHEREAS**, eight (8) positions have been added to the Behavioral Health Unit over the last five years; and

4  
5 **WHEREAS**, one manager can no longer meet the supervisory needs of this many staff; and

6  
7 **WHEREAS**, an additional supervisory position is needed in order to assure proper program oversight and  
8 sufficient direction and support to staff; and

9  
10 **WHEREAS**, the position will be funded by existing funds in the budget and funding through the Wisconsin  
11 Medicaid Cost Reporting (WIMCR) program; and

12  
13 **WHEREAS**, WIMCR payments are received a year after expenses are incurred, in order to cover the 2023 cost  
14 there are unspent funds in the Family Care Contribution budget line that can be utilized; and

15  
16 **WHEREAS**, Human Service Board recommends adding a Behavioral Health Supervisor position in order to meet  
17 the increasing supervisory needs of staff in that unit in Monroe County.

18  
19 **NOW, THEREFORE BE IT RESOLVED** by the Monroe County Board of Supervisors that they do hereby  
20 authorize establishing a Behavioral Health Supervisor in the Department of Human Services effective July 3,  
21 2023. If the funding ceases, the positions will be reviewed.

22  
23 **BE IT FURTHER RESOLVED**, that the Monroe County Board of Supervisors approves the following line item  
24 adjustments for the disbursement of funds:

25			
26	Decrease Expenditure Account Budget	24900507 525005	\$ 54,878.00
27	Increase Expenditure Account Budget	24950580 511000	\$ 54,878.00

Dated this 24<sup>th</sup> day of May, 2023.

Offered by the Administration & Personnel Committee

Fiscal note: The cost of the position is \$54,878 in 2023 and \$108,644 annually thereafter. This position will funded with the above noted line item adjustment in 2023 with no additional county levy required. Ongoing position costs will be covered by existing budgeted levy, funds from State allocations, and the WIMCR Program with no additional county levy. A simple majority vote of the entire membership of the Monroe County Board of Supervisors is required for approval.

Purpose: To approve a new Behavioral Health Supervisor position for 2023.

Finance Vote (If required):  
\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Absent

Approved as to form on \_\_\_\_\_  
\_\_\_\_\_  
Lisa Aldinger Hamblin, Corporation Counsel

ADOPTED  FAILED  AMENDED  
 OTHER \_\_\_\_\_  
County Board Vote on: \_\_\_\_\_ 20\_\_  
\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Absent

Committee of Jurisdiction Forwarded on: \_\_\_\_\_, 20\_\_  
\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Absent

Committee Chair: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF WISCONSIN  
COUNTY OF MONROE  
I, SHELLEY R. BOHL, Monroe County Clerk, DO HEREBY CERTIFY that the foregoing is  
a true and correct copy of Resolution # \_\_\_\_\_ acted on by the Monroe  
County Board of Supervisors at the meeting held on \_\_\_\_\_.  
  
\_\_\_\_\_  
SHELLEY R. BOHL, MONROE COUNTY CLERK  
*A raised seal certifies an official document.*



# New Position Analysis

- New position
- Increased hours to current position
- Additional existing position

<b>Date:</b> 05/02/2023	<b>Department:</b> Human Services
<b>Department Head Name:</b> Tracy Thorsen	

Explain the necessity of this position (be specific as to the reasons why this position is needed and explain reasons why present staff cannot accomplish tasks):

The Behavioral Health Unit consists of twenty-one (21) staff and one (1) manager. Eight (8) positions have been added to the unit over the last five years. One manager can no longer meet the supervisory needs of this many staff. An additional supervisory position is necessary in order to assure proper program oversight and sufficient direction and support to staff. This position would primarily oversee the Adult Protective Services, Crisis Intervention Services, and Community Support Program and supervise the staff who work within those programs. This position would also provide back up oversight of all other Behavioral Health programs and staff at the direction of the Clinical Administrator. Ongoing costs of this position will be funded by existing funds in the budget and funding through the Wisconsin Medicaid Cost Reporting (WIMCR) program. No additional county levy will be required.

<b>Suggested Title:</b> Behavioral Health Supervisor			
<b>Personnel Director's Recommended Classification:</b>		<b>Grade:</b> S	<b>FLSA Class:</b> Exempt
<b>Full-time:</b>	<input checked="" type="checkbox"/>	<b>Part-time:</b> /hours	<b>Projected Start Date:</b> July 3, 2023

\*Current or newly created Job Description in current County format must be attached.\*  
\*A completed and approved Resolution must also accompany this Position Analysis.\*

## Funding - Annual Costs to include family insurance coverage:

Hourly Rate	Annual Salary	Retirement	Social Security	Medicare	Work Comp	Health Ins.	Dental Ins.	Life Ins.
34.87	72,530	4,933	4,497	1,052	834	23,941	839	18

1. Where will the funds for this position come from?  
 The costs for this position will be able to be expensed through WIMCR reconciliation and other allocation claiming and will not require additional Levy.  
 Because WIMCR payments are received a year after the expenses are incurred, a line item transfer will be necessary in 2023 to utilize remaining funds from the Family Care Contribution.
2. What equipment will need to be purchased for this position (desk, etc.)?  
 Computer Set-up, Phone, Desk, Chair
  - a. Is office space presently available? Yes Where? Historic Courthouse
  - b. Estimated cost of needed equipment? \$3,000
  - c. Is the cost of needed equipment in the department budget? No
3. What is the grand total cost of all items this fiscal year? \$36,265 (salary) + \$16,063 (fringe& wkr comp) + \$2,550 (equipment) = \$54,878 Total
4. What is the annual cost of salary and fringes, thereafter? \$72,530 (salary) + \$36,114 (fringe& wkr comp) = \$108,644 Total

**Supervisory Responsibility** (if applicable):

1. In brief detail, explain the supervisory authority this position will have:

The position will primarily be responsible to over see Adult Protective Services, Crisis Intervention Services, and the Community Support Program. Directs the work of and assists in the management of Behavioral Health Unit staff overall. Participates in interviews and selection of new employees. Assures the provision of training, instruction, and ongoing training. Provides coaching and/or counseling. Assigns tasks, reviews work, and prepares performance evaluations.

2. Number of employees Directly supervised: 6 - 8 Indirectly: 13 - 15

List the position titles that will report to this position:

Adult Protective Services Prof.	Program Associate	
CSP Clinical Coordinator	Behavioral Health Prof. - Crisis	
CSP Case Manager		

3. What position title will this position report to? Clinical Administrator

**County Administrator – Action:**

Date: 4/27/2023	Position Approved: <input checked="" type="checkbox"/>	Position Denied: <input type="checkbox"/>
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**Committee of Jurisdiction:** Health + Human Services – Action:

Date: <u>5/2/2023</u>	Position Approved: <input checked="" type="checkbox"/>	Position Denied: <input type="checkbox"/>	by a vote of: <u>6 - 0 - 3</u>
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**Administration & Personnel Committee – Action:**

Date:	Position Approved: <input type="checkbox"/>	Position Denied: <input type="checkbox"/>	by a vote of:
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**Finance Committee – Action on Fiscal Note:**

Date:	Funds Approved: <input type="checkbox"/>	Funds Denied: <input type="checkbox"/>	by a vote of:
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**County Board – Action:**

Date:	Position Approved: <input type="checkbox"/>	Position Denied: <input type="checkbox"/>	
By a vote of:	aye	nay	absent/abstention



## JOB DESCRIPTION

Title:	<b>Human Services Supervisor -BH</b>	Date:	
Department:	Human Services	Pay Grade:	S
Reports To:	Mental Health Clinic Manager	FLSA Status:	Exempt

---

### POSITION SUMMARY

This position is responsible to assist the Mental Health Clinic Manager with coordination, and management of the Behavioral Health Unit. This position provides professional work planning, organizing, evaluating, supervision, and implementation to County service- related programs in accordance with State and Federal laws and regulations, and to implement general policies set forth by governing bodies and agencies.

### ESSENTIAL FUNCTIONS

*The following duties are typical for this position. However, these are not to be construed as exclusive or all-inclusive. To perform this job successfully, an individual must be able to perform each duty satisfactorily. Other duties may be required and assigned.*

1. Provides leadership in attracting, retaining, and developing an engaged workforce in the delivery of superior services to County residents and businesses.
2. Directs the work of and assists in the management of unit staff. Participates in interviews and selection of new employees. Assures the provision of training, instruction, and ongoing training for the Department. Provides coaching and/or counseling. Assigns tasks, reviews work, and prepares performance evaluations. Recommends employee transfers, promotions, disciplinary action, and discharge.
3. Provides supervision to all assigned staff. Directs staff on interpreting the application of policy and procedure.
4. Supervises the operations of the Unit. Ensures compliance with program requirements.
5. Reports administrative and program services, along with policies and procedures, to the responsible boards.
6. Supervises services as assigned in the following areas: Outpatient Mental Health and Substance Abuse Clinic, Crisis Services, Coordinated Services Team, Comprehensive Community Services, Community Support Program, Intoxicated Drivers Program, Adult Protective Services, and other related services;
7. Provides clinical consultation regarding screening cases, crisis management, treatment options, and diagnoses for targeted populations in the respective division, including after hours, as needed.
8. Ensures the programs of the unit are carried out in a cost-efficient manner. Develops goals or outcomes which are measurable and enhance the quality of cost-effective services.
9. Evaluates service delivery. Conducts needs assessments and recommends service priorities to Unit Manager in addition to those mandated by State and Federal Government.
10. Ensures the programs of the Unit are carried out in a cost-efficient manner. Develops goals or outcomes which are measurable and enhances the quality of cost-effective services.
11. Ensures all mandated State and Federal programs are carried out in accordance with established requirements.



12. Ensures all mandated State and Federal programs are carried out in accordance with established requirements.
13. Maintains knowledge of current County, State, and Federal Rules and Regulations. Monitors legislative proposals that will impact the Unit. Keeps responsible boards and Unit Manager informed of these changes.
14. Negotiates and monitors annual contracts with the Wisconsin Department of Health Services and public and private vendors, and consultants who provide services.
15. Performs the duties of subordinate personnel within the Unit, as needed.
16. Other duties as assigned.

#### **MINIMUM REQUIRED QUALIFICATIONS**

- Master's degree in Social Work, Counseling, Clinical Psychology, or Marriage Family Therapy from an accredited university with a minimum of 3,000 hours of supervised clinical practice and five (5) years of progressive administrative experience in human service-related programs.
- Three years' previous supervisory experience.
- Credentialed as a Licensed Clinical Social Worker (LCSW), Marriage and Family Therapist (LMFT), or Professional Counselor (LPC) in the State of Wisconsin.
- Must successfully pass caregiver and criminal background check.

#### **PREFERRED QUALIFICATIONS**

- Credentialed as an Independent or Intermediate Clinical Supervisor in the State of Wisconsin.

#### **REQUIRED JOB COMPETENCIES**

- Knowledge of laws and regulations that affect the delivery of services provided by the Department.
- Knowledge of community resources, and alternative care resources.
- Knowledge of applicable State statutes.
- Comprehensive knowledge of social, economic, and health problems of basic human behavior and of available assistance and rehabilitative services and techniques.
- Thorough knowledge of State and Federal human services programs and requirements.
- Knowledge of human service needs assessment methodologies, grant programs, and budgeting procedures.
- Knowledge of legal requirements for human service programs, including client rights, confidentiality, and non-discrimination.
- Knowledge of the principles of human growth and development, psychology, systems theory, and human motivation.
- Knowledge of goals, principles, and practices of human service programs, program administration, and program goals and their intended impacts.
- Ability to communicate effectively with individuals of varying abilities, interests, and concerns.
- Skill in analyzing complex administrative information and issues, defining problems and evaluating alternatives, and recommending methods, procedures, and techniques for resolution of issues.
- Ability to research and analyze detailed information and make appropriate recommendations.
- Ability to develop program goals and objectives.
- Ability to plan, develop, implement, and evaluate projects and programs.
- Ability to develop, interpret and implement regulations, policies, procedures, written instructions, general correspondence, and other Department-specific documents.

- Knowledge of management and supervisory practices & principles, including the ability to make final employment recommendations, preparing performance evaluations, managing time-off, and maintaining personnel records.
- Ability to adapt and take control of situations, dictating subordinate activities in a responsible manner.
- Ability to instruct and train in methods and procedures.
- Ability to organize, assign, and modify the work assignment of others, and (re)-establish priorities to meet deadlines.
- Ability to establish and maintain accurate records of assigned activities and operations.
- Ability to interpret and implement local policies and procedures; written instructions, general correspondence; Federal, State, and local regulations.
- Skill in organizational and time management to prioritize duties to accomplish a high volume of work product while adapting to constant changes in priority.
- Ability to perform detailed work accurately and independently in compliance with stringent time limits requiring minimal direction and supervision.
- Ability to think quickly, maintain self-control, and adapt to stressful situations.
- Knowledge of current office practices and procedures and knowledge of the operation of standard office equipment and software.
- Knowledge of computer software including word processing, spreadsheet, and database applications consistent for this position.
- Ability to perform mathematical calculations required of this position.
- Ability to communicate clearly, concisely, and effectively in English in both written and verbal form.
- Skill in researching and understanding complex written materials.
- Ability to prepare and maintain accurate and concise records and reports.
- Ability to apply sound judgment and discretion in performing duties, resolving problems, and interpreting policies and regulations.
- Ability to communicate detailed and often sensitive information effectively and concisely, both orally and in writing.
- Ability to handle sensitive interpersonal situations calmly and tactfully.
- Ability to maintain professionalism at all times.
- Ability to maintain effective working relationships with individuals within and outside the organization.
- Ability to maintain confidentiality and discretion regarding business-related files, reports, and conversations, within the provisions of open records laws and other applicable State and Federal statutes and regulations.
- Ability to work the allocated hours of the position and respond after hours as needed.

#### **PHYSICAL AND WORK ENVIRONMENT**

*The physical and work environment characteristics described in this description are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions as otherwise required by law. Employees needing reasonable accommodation should discuss the request with Human Resources.*

- This work requires the occasional exertion of up to 25 pounds of force; work regularly requires sitting, frequently requires standing, speaking or hearing, using hands to finger, handle or feel and repetitive motions and occasionally requires walking, stooping, kneeling, crouching or crawling and reaching with hands and arms.
- Work has standard vision requirements.
- Vocal communication is required for expressing or exchanging ideas by means of the spoken word.
- Hearing is required to perceive information at normal spoken word levels.
- Work requires preparing and analyzing written or computer data and observing general surroundings and activities.
- Work is performed in an office setting as well as offsite clinic work sites.
- May require communicating with persons who are hostile, aggressive, abusive or violent, posing threatening conditions.

*Nothing in this job description limits management's right to assign or reassign duties and responsibilities to this job at any time. The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position. The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.*

**EMPLOYEE ACKNOWLEDGEMENT**

I have received, reviewed and fully understand this job description. I further understand that I am responsible for the satisfactory execution of the essential functions as well as skills and abilities described therein. Furthermore, I understand this document will change over time, as necessary, and this document supersedes all prior descriptions. I understand I may be asked to perform duties and handle responsibilities that are not specifically addressed in my job description, from time to time. I understand that this does not constitute an employment agreement.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Printed Name

RESOLUTION NO. \_\_\_\_\_

ESTABLISHING 2024 ANNUAL BUDGETED ALLOCATION FOR COST OF LIVING AND PAY  
FOR PERFORMANCE ADJUSTMENTS

- 1 WHEREAS, Monroe County strives to provide maximum service to its residents while minimizing the  
2 financial impact of County taxes on taxpayers, and  
3
- 4 WHEREAS, the State imposed budgetary constraints while providing mandated services to be provided  
5 by the County, and  
6
- 7 WHEREAS, McGrath Human Resources Group recommended increasing Salary Schedules annually by  
8 the Consumer Price Index – Urban (CPI-U) percentage; and  
9
- 10 WHEREAS, Monroe County has a policy of compensating employees based on a competitive market  
11 salary rate, the quality of their performance, and basing future non-union wage adjustments on the  
12 merits of employee performance, and  
13
- 14 WHEREAS, the County Administrator will be developing the 2024 Proposed Annual Budget for review  
15 and adoption by the Monroe County Board in November 2023, and wage costs must be incorporated  
16 into the budget as proposed and adopted.  
17
- 18 NOW THEREFORE BE IT RESOLVED, by the Monroe County Board of Supervisors that each  
19 departmental 2024 budget may include an allocation amount up to 2.0% for increases based on the  
20 Consumer Price Index-Urban (CPI-U) for the previous 12 months as of July 1, 2023, and 2.0% of gross  
21 wages to be available for increases based on the merits of employee performance as established during  
22 their individual annual performance review; and  
23
- 24 BE IT FURTHER RESOLVED, that any agreed upon increased allocation in accordance with the (CPI-  
25 U) will be applied to the current Monroe County wage scale structure to increase the amounts of the  
26 wage ranges effective with the second payroll of April 2024, to ensure it remains current and ensure the  
27 longevity of the structure; and  
28
- 29 BE IT FURTHER RESOLVED, that any performance and COLA wage increases will be effective with  
30 the second payroll of April 2024 and that the funds shall be awarded based strictly COLA and on the  
31 merits of the employees performance; and  
32
- 33 BE IT FURTHER RESOLVED that effective January 1, 2024 any non-union, non-elected staff who  
34 have held their current position for 5 years or more and have had satisfactory (score 3.0 or higher)  
35 performance evaluations for the past two years will be compensated at a minimum rate of 10% above  
36 minimum on the wage scale of their current pay grade; and  
37
- 38 BE IT FURTHER RESOLVED that any departmental funds budgeted for these merit-based wage  
39 adjustments, which remain after the annual performance review process has been completed, shall be  
40 applied by the Finance Department to any department merit pay line shortages and then transferred to  
41 the Non-Lapsing Retirement/Fringe Pool (Acct# 11435000.515200) to be available to cover budget  
42 variations that occur due to internal position postings, new position hires, retirements, and the like that  
43 are unknown variables that impact budgeted salary/fringe benefits for the year; and  
44

45 BE IT FURTHER RESOLVED that the purpose statement and fiscal note are made a directive of the  
46 County Board.

Offered this 24<sup>th</sup> day of May, 2023 by the Administration & Personnel Committee.

Fiscal note: For 2024 the levied general pay increase based on CPI-U and employee performance shall not exceed \$716,010. Budgeted funds not allocated as a CPI-U or merit increase shall be transferred to the Non-Lapsing Retirement/Fringe Pool (Acct# 11435000.515200) to cover budget variations that occur do to internal position postings, new position hires, retirements, and other unknown variables that impact budgeted salary/fringe benefits for the year. The 2024 proposed and adopted budget will incorporate pay increases. A simple majority vote of the entire membership of the Monroe County Board of Supervisors is required for approval.

Statement of purpose: To establish 2024 budget for CPI-U and merit-based pay adjustments along with adjusting the wage scale structure by the CPI-U and fund the Non-Lapsing Retirement/Fringe Pool.

Drafted by County Administrator, Tina Osterberg

<p>Finance Vote (If required): ____ Yes ____ No ____ Absent ..... Approved as to form: _____ Lisa Aldinger Hamblin, Corporation Counsel</p>	<p>Committee of Jurisdiction Forwarded on: _____, 20____ VOTE: ____ Yes ____ No ____ Absent Committee Chair: _____ _____ _____</p>
<p><input type="checkbox"/> ADOPTED <input type="checkbox"/> FAILED <input type="checkbox"/> AMENDED <input type="checkbox"/> OTHER _____ County Board Vote on: _____ 20____ ____ Yes ____ No ____ Absent</p>	<p>STATE OF WISCONSIN COUNTY OF MONROE I, SHELLEY R. BOHL, Monroe County Clerk, DO HEREBY CERTIFY that the foregoing is a true and correct copy of Resolution # _____ acted on by the Monroe County Board of Supervisors at the meeting held on _____. _____ SHELLEY R. BOHL, MONROE COUNTY CLERK <i>A raised seal certifies an official document.</i></p>