

STATE OF WISCONSIN  
Department of Health Services  
Division of Mental Health and Substance Abuse Services

Date: October 31, 2013  
DMHSAS Numbered Memo 2013-05 Action

RE: This replaces DMHSAS Memo 2012-08  
Intoxicated Driver Program Supplemental / Emergency Funding Update

To: DMHSAS Listserv

For: Area Administrators / Human Services Area Coordinators  
Bureau Directors  
County Departments of Community Programs Directors  
County Departments of Developmental Disabilities Services Directors  
County Departments of Human Services Directors  
County Departments of Social Services Directors  
County Mental Health Coordinators  
Program Office Directors / Section Chiefs

From: Linda A Harris, Administrator  
Division of Mental Health and Substance Abuse Services

Subject: Intoxicated Driver Program Supplemental / Emergency Funding Update

### **Document Summary**

This memo describes the procedure for counties to request Intoxicated Driver Supplemental / Emergency funding by **Friday, November 22, 2013**.

Section 20.435 (5) (hy), Wis. Stats., appropriates funds for counties to cover costs resulting from a deficit in the counties' Intoxicated Driver Program (IDP) funding. For calendar year 2012, the Department awarded \$700,283 for this purpose within available revenue. This memo serves as a request for application (RFA) and provides details on how counties can apply for these funds.

### **Eligibility Conditions for Funding Requests from Counties**

In order to qualify for supplemental / emergency funding for 2013, eligible counties must address the criteria below in a Narrative. The Narrative could be in the form of a cover letter or attached document.

1. Justification of financial need

Agencies must document that collections of driver improvement surcharges, third party revenues and client fees are insufficient to cover the actual or projected cost of services through the completion and submission of the attached Form [F-20891](#) (Rev. 10/2013). Any county is eligible to apply for this funding if projected or actual expenditures exceed projected or actual revenues. Amounts appearing on Form [F-20891](#) must be fully described in the Narrative.

2. Demonstration of effort to collect fees and revenue

Counties must demonstrate a good faith effort to collect surcharges, third party revenues and client fees. The Narrative should explain the following:

a) Rate of surcharge collections and efforts made by the County Treasurer's Office and

Courts to ensure the maximum amount is collected.

- b) Third party revenue,
- c) Client fee collections,
- d) Factors that limit the collection of these surcharges, revenues and fees.

### **3. Program Participation System (PPS) Module**

The county's data must be complete and free of errors. Applying agencies should use the PPS service utilization reports located on the Internet to assist with filling out the F-20891 form. The password-protected reports may be found at: <https://pps.wisconsin.gov/>

**To obtain an ID and password, contact the helpdesk at (608) 266-9198.**

### **4. 2012 Substance Abuse Service Expenditures**

Applying Counties must report 2012 substance abuse service expenditure detail for standard program categories (SPCs) in service clusters 700, 800, and 900 using the Expense Reports at the Internet site referenced in (3) above (click on 942 Expense Reports 2010).

### **5. Improved IDP Client outcomes**

Counties must demonstrate improved IDP client outcomes by selecting one of the federal NOMS (National Outcomes Measurement System) outcome measures listed below and documenting in the Narrative what deliverable(s) were provided in 2013 to achieve improvements for that outcome measure from the Intoxicated Driver Supplemental Funds.

Federal NOMS outcome measures include:

- a) Reduced Alcohol/Drug Use
- b) Improved Employment/Education
- c) Reduced Crime and Criminal Justice, including reduction in repeat offenders
- d) Reduced Homelessness
- e) Improved Social Supports for Recovery
- f) Retention in or Completion of Treatment

#### **Action Summary:**

The following process will be used for the review and approval of the supplemental / emergency funds.

1. Counties shall submit copies of request for supplemental funds to their Area Administrator **and** LeeAnn Cooper, Intoxicated Driver Program Coordinator, Bureau of Prevention, Treatment and Recovery (BPTR) **by Friday, November 22, 2013.**
2. The Area Administrator will review items(s) above and forward recommendations to approve or deny the request(s) to LeeAnn Cooper, BPTR.
3. Division of Mental Health and Substance Abuse Services (DMHSAS) will review requests and

prepare approvals in concert with the Area Administrator with final approval by the DMHSAS Administrator.

4. Following the DMHSAS Administrator's approval, the contract addenda will be transmitted to the county.

**For additional information and questions regarding this memo:**

**Regional Office Contact:**

Area Administrators

**Central Office Contact:**

LeeAnn Cooper  
Department of Health Services  
Division of Mental Health and Substance Abuse Services  
1 W. Wilson St., Room 850  
Madison, WI 53703-7851  
Telephone: (608) 266-2453  
Email: [leeann.cooper@wisconsin.gov](mailto:leeann.cooper@wisconsin.gov)

**Forms:**

DHS Form [F-20891](#): Intoxicated Driver Program Supplemental Funding Request.

PPS Utilization Reports login page (password protected): <https://pps.wisconsin.gov/>.

DHS Form [F20942A](#): Total Expenses All Sources by Target Group and Standard Program Cluster

DHS Form [F-20942i](#): Total Expenses all Sources by Target Group and Standard Program Cluster Instructions.

**Memo Websites:**

DLTC / DMHSAS Memo Series web page ([http://www.dhs.wisconsin.gov/dsl\\_info/index.htm](http://www.dhs.wisconsin.gov/dsl_info/index.htm))

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