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DATE: June 4, 2018
TO: Local and Tribal Health Departments and Contracting Agencies
FROM: Chuck Warzecha, Deputy Administrator
Division of Public Health
RE: 2019 Consolidated Contracting Process

The Division of Public Health has begun preparations for the 2019 Consolidated Contract. Information related to the contract process will be posted to the 2019 Consolidated Contract webpage as it becomes available.

Allocation Changes

At this time, we do not have final federal funding allocations and guidance for all of our program areas. The most notable change from last year includes an expected reduction in the Women, Infants and Children’s (WIC) program which expects to see a decrease in 2019 funding (see chart below). The Title V funding for CYSHCN and Reproductive Health have returned to the annual grant funded levels and remain level for this year.

If a significant funding change occurs, notifications to the local and tribal health departments will be provided by the program directly.

<i>The following programs have indicated level funding for 2019</i>	
• Childhood Lead	• Immunization
• Radon	• STD Program
• Preparedness	• HIV
• Tobacco	• SNAP-Ed
• Wisconsin Well Woman	• TEFAP
• Prevention Block Grant	• WIC FMNP (154720)
• Women’s Reproductive Health/Family Planning	• Oral Health (mouth rinse & supplement)
• Children of Youth with Special Health Needs (CYSHCN)	• MCH
<i>The following programs have indicated an expected decrease in funding for 2019</i>	
• WIC (154710) - 5% decrease	• WIC (154760) - 2-3% decrease

Local health departments should note that while the majority of funding is anticipated to remain level (pending any unknown federal changes related to the Prevention and Public Health Fund), each health department could see a change in funding they receive due to Level I, II or III changes. Health department level is a factor in many of our funding formulas in the consolidated contracts. As a result, we cannot state definitively at this time what will happen to individual health department funding until all calculations have been made based on changes to health department levels.

Another factor that could impact local health department funding for the 2019 contracts will be the utilization of new population estimates. Again, we cannot state definitively how this will impact the budgets at the local level.

Memorandum of Understanding (MOU) Transfer Language

If a local or tribal health department wants to transfer funds to another local or tribal health department, a formal request (email is sufficient) should be submitted to the DPH Program Manager by **June 20, 2018**. Once that request has been received, a contract will be established with the combined funding according to the normal procedure.

If a local or tribal health department chooses to transfer funds to another local or tribal health department, both sending and receiving health departments *must* sign the MOU. The receiving local or tribal health department *must* then attach it to the contract when the contract is returned to the state for final signature. If multiple local or tribal health departments are transferring funds to one local or tribal health department, then there must be an MOU attached to the contract for each local or tribal health department that is transferring funds.

Signed copies of the MOU must be attached to the returned contract.

Refusal of Funds

If you have determined at this time that you intend to refuse program funds, please inform the DPH Program Manager by **June 29, 2018**, of your intent to refuse funds. Once funding levels are approved through the department's CARS Unit, the funding amounts will be entered into the Grants and Contracts (GAC) System.

Negotiation Process

The negotiation process for the 2019 contracts will be the same as the previous year. To summarize, each DPH program will have the choice of either using GAC to negotiate objectives or continuing whatever negotiating practice was used in prior years. Each program will provide the Bureau of Operations with their program objectives, quality criteria, boundary statements, and/or scope of work attachments which will then be posted to the 2019 Consolidated Contract website. All attachments will be incorporated into the contracts including scope of work changes through the amendment process.

For programs that use GAC to negotiate their objectives, agencies may begin entering them after the program allocations have been loaded. All local and tribal health agencies will be able to enter objectives **on or around September 24, 2018.**

For those programs that have *non-negotiated* objectives, the related funding amounts will be entered into GAC; those program items will be locked and the contracts will be prepared for posting to the DPH Contracting web site. The programs that are not negotiating objectives are also required to provide at least one objective, quality criteria, boundary statement, and/or a scope of work attachment that will also be incorporated into the consolidated contract.

The [GAC Manual](#) is available to assist you with the GAC negotiation process. If you do not have GAC access, or need a different user role, follow Steps 1 and 2 under the Accessing GAC section of the [Consolidated Contract homepage](#).

Reporting of Expenditures

Please report your expenditures on the [CARS Expense Report](#) form. Send the completed form by email to DHS600RCars@dhs.wisconsin.gov. The form only requires that you report monthly expenses in a lump sum for each Profile ID; however, please remember that you will need to have this lump sum broken down by the different categories (personnel, contracts, etc.) for program purposes if requested. General information on CARS reporting may be found at <https://www.dhs.wisconsin.gov/cars/index.htm>.

Contract Monitoring Process

Mid-year and end-of-year reviews will be handled in the same manner for CY2019 as in CY2018. The mid-year review provides an opportunity for problem solving with local and tribal agencies to assure contracted objectives will be met by year end. The year-end review closes out this process and sets the stage for subsequent funding in the upcoming year.

For those programs that are continuing to require mid-year or end-of-year monitoring, the responsibilities will be assumed by the program staff for their respective programs/grants. The grid tab of the 2019 Consolidated Contract Overview (***available by the end of June***) will identify the correct mid-year and end-of-year reporting mechanism for participating programs.