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TO: County Board Chairpersons  
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

FROM: Thomas J. Engels, Deputy Secretary  
Office of the Secretary  
Department of Health Services

RE: **Advisory Notification of Calendar Year 2019: Contract Covering Social Services and Community Aids Allocations**

The purpose of this memo is to assist our county partners with their budget preparations by providing the calendar year (CY) 2019 Social Services and Community Aids Allocations for the Department of Health Services (DHS). The base State and County Grant Award Contract will establish a contractual relationship between your county agency and DHS.

Please see below for details regarding the basic county allocation and the categorical programs. For reference, the following documents are posted on the [DHS State County webpage](#):

- The October 3, 2018 memo that provided information regarding updates to the 2019 process, including the use of a standardized base grant agreement template and the use of DocuSign to route each contract electronically;
- This memorandum, which provides information regarding the 2019 Social Services and Community Aids Allocations; and
- The CY 2019 County Social Services and Community Aids Allocation Spreadsheet, which lists the funds allocated to each of the programs below.

### **Open Public Participation Process**

Counties must meet the requirements in Wis. Stat. § 46.031(3) for DHS approval of an open public participation process. Contact your area administrator with any questions.

### **The Wisconsin Board for People with Developmental Disabilities (WBPDD)**

Under Wis. Stat. § 51.437(7)(a), WBPDD has review and advisory responsibilities on community budgets and plans for programs affecting persons with developmental disabilities. WBPDD will issue instructions that enable it to carry out these responsibilities.

### **Basic County Allocation (561)**

The CY 2019 allocations reflect the available federal funding. The Basic County Allocation (BCA) is a block grant to counties for human services programs. The allocation is funded with 81 percent general program revenue (GPR), 12 percent federal Social Services Block Grant (SSBG), and 7 percent federal Temporary Assistance for Needy Family (TANF) funds. The preliminary CY 2019 BCA award level is based on the estimated federal fiscal year (FFY) 19 SSBG award level; the actual award level depends on action by Congress for the FFY 19 federal budget. The overall reduction to the BCA for CY 2019 is estimated to be .03 percent compared to CY 2018.

### **BCA less Match (561)**

This is the BCA with the state match portion of the BCA removed. If a county does not spend county matching funds, it is still eligible to receive the funds identified based on reimbursable community aids expenses.

### **State Match/County Match (681)**

This amount is based upon 9.89 percent of all match funds.

### **Total Match**

This is the sum of all community aids funds that are subject to county match.

### **Community Mental Health (516)**

County allocations are provided for Community Mental Health Profile 516. Expenses reported on this profile in excess of the contract award will roll to Profile 561 (BCA) where payment shall be made in accordance with the established practice of that profile. The allocations for 2019 will be limited to three-twelfths of the contract with the balance paid after June 30, 2019, based upon reported costs up to the contract level.

### **Community Mental Health Services Block Grant (569)**

Funding is unchanged from CY 2018.

### **Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Primary Prevention Activities (570)**

The program has been split into three profiles. Profile 570 provides prevention services. A minimum of 20 percent of SAPTBG community allocation funds must be set aside on primary prevention programs for individuals who do not require treatment for substance use disorder. Primary prevention programs are for individuals who do not require treatment for a substance use disorder. Such programs and activities may include education, mentoring, and other activities designed to reduce the risk of substance use disorders by individuals. Note: Early intervention activities and SBIRT (Screening, Brief Intervention, and Referral to Treatment) are not eligible “primary prevention” programs or activities. The Appendix clarifies the county responsibilities and includes contact information to assure counties and their subcontractors comply with federal law.

### **Substance Abuse Prevention and Treatment Block Grant (SAPTBG) AODA Treatment Services (545)**

The program has been split into three profiles. Profile 545 provides treatment services. SAPTBG community allocation funds may be expended for substance use disorder treatment, and general (non-primary) prevention, early intervention, recovery support, and training/system improvement programs and activities that are designed for or target persons with substance use disorders. This category does **not** include programs and services that fall within the 20 percent Primary Prevention set aside category (Profile #570) or fall within the 10 percent Women's Treatment set aside category (Profile 546) The Appendix clarifies the county responsibilities and includes contact information to assure counties and their subcontractors comply with federal law.

### **Substance Abuse Prevention and Treatment Block Grant (SAPTBG) AODA Women's Treatment Services (546)**

The program has been split into three profiles. Profile 546 provides women's treatment services. A minimum of 10 percent of the SAPTBG community allocation funds must be set aside to provide comprehensive substance use disorder treatment, and general (non-primary) prevention and recovery support programs and services targeting women and their dependent children, including pregnant and postpartum women and their dependent children. This includes programs and services targeting pregnant women who inject drugs. This category does **not** include primary prevention programs or services targeting women. The Appendix clarifies the county responsibilities and includes contact information to assure counties and their subcontractors comply with federal law.

### **APS-Adult Protective Services (312)**

The Adult Protective Services allocation is awarded to each county. Expenses reported on this profile in excess of the contract award will roll to Profile 561 (BCA) where payment shall be made in accordance with the established practice of that profile. These additional funds are available to be used for reimbursement of expenses incurred by the county for the purpose and services listed in the scope of work appendix. The allocations for January 1 in this profile include payments through June 30, 2019, are limited to six-twelfths of the contract with the balance paid after June 30, 2019, based on reported costs up to the contract level.

### **Non-Resident Emergency Detention – 997 (531)**

A request for reimbursement of emergency detention services must be submitted on DHS Form F-20572 -- Request for State Public Funding for Non-Residents. Funds will be approved on a quarterly basis. Funds will be approved on a person-by-person basis using a county unilateral contract modification. A memo of approval from the Division Care and Treatment Services Administrator to the county will constitute agreement that the contract has been modified to the new value.

### **Children's Community Options Program (CCOP) (377), Wis. Stat. § 46.272**

Funding previously allocated to a county through the Family Support Program has been moved to the new Children's Community Options Program (CCOP). COP funds identified for children for all counties transitioned to the long term care programs has also been moved to the new CCOP. These funds may be used by the county only in accordance with DHS numbered memos, DHS CCOP Guidelines and Procedures, DHS MA Waiver Manual, numbered CCOP

information bulletins, and the approved county CCOP plans which are by reference part of this contract. CCOP expenses will be reported on CARS profile 377 and should include CCOP funding that is used for match in the Children's Long-Term Support Home and Community-Based Medicaid Waivers. When reporting these match expenses to CCOP, an offset expense should be reported to the BCA. CCOP expenses that are used for non-waiver services must be reported to HSRS Long Term Support module (refer to Children's Long Term Support informational memos for further reporting instructions). The allocations for January 1 in this profile include payments through June 30, 2019, and are limited to four-twelfths of the contract with the balance paid after June 30, 2019, based on reported costs up to the contract level.

### **Carry-Over Children's Community Options Program (CCOP), Wis. Stat. § 46.272 (13)(4e)**

The Carry-Over Children's Community Options Program (CCOP) was created by 2015 Act 55 and became effective January 1, 2016. DHS shall, at the request of a county, carry forward up to 5 percent of the amount allocated under this subsection to the county for a calendar year if up to 5 percent of the amount so allocated has not been spent by the county by December 31 of that year, for use by the county in the following calendar year, except that the amount carried forward shall be reduced by the amount of funds that the county has notified the department that the county wishes to place in a risk reserve under par. (f). DHS may transfer funds within Wis. Stat. § [20.435\(4\)\(bd\)](#) to accomplish this purpose. An allocation under this paragraph does not affect a county's base allocation under this subsection and shall lapse to the general fund unless expended within the calendar year to which the funds are carried forward. A county may not expend funds carried forward under this paragraph for administrative or staff costs, except administrative or staff costs that are associated with implementation of the waiver under sub. [\(14\)](#) and approved by DHS.

### **Birth to Three (550)**

The allocations for January 1, 2019 include payments through June 30, 2019, and are limited to six-twelfths of the contract, with the balance paid after June 30, 2019, based on reported costs up to the contract level. Counties should report only expenses that have not been reimbursed through other sources of revenue, such as private insurance, Medicaid services, parental cost share, etc.

### **Children's Long Term Supports (CLTS) (871,872, 874, 875, 877, 878, 880, and 881)**

The initial CY 2019 CLTS-Waiver allocations represent the county's base CLTS-Waiver funding from before the start of the wait list elimination initiative. The CLTS exceptional expense funding and wait list elimination funding will be added to county CLTS allocations during the first quarter of CY 2019. The wait list elimination funding will be based on wait list elimination plan progress, projected 2019 net new enrollees, and available CLTS budget authority. Additional information about the wait list elimination allocations and exceptional expense allocations will be forthcoming.

The CLTS-Waiver service allocations have been adjusted to align with the estimated Federal Medicaid Assistance Percentage (FMAP). The ongoing amount of non-federal base allocation included in the CY 2019 CLTS-Waiver allocation is the same as the ongoing non-federal base

CLTS-Waiver allocation for CY 2018, excluding any CLTS exceptional expense and wait list funding provided during CY 2018.

The CLTS-Grandfathered allocations have been adjusted to match projected service expenditures, as estimated by DHS, or the CY 2017 reconciled CLTS-Grandfathered amount, whichever is higher. The CLTS-Grandfathered service allocation may only be used to pay for the CLTS waiver service expenses of children on the DHS CLTS-Grandfathered participant list.

Reimbursement for CLTS waiver administrative expenses may not exceed 7 percent of allowable CLTS service costs without an approved administrative variance. The CLTS administrative allocations have been adjusted to align with the updated CLTS service allocations.

### **Institutes for Mental Disease (IMD) Rebalancing Initiative**

There will be an opportunity for one-time innovation incentive funding focused on improving county crisis intervention systems collaboration with Medicaid funded adults in Long Term Care programs. These awards are part of ongoing efforts by DHS to improve local crisis prevention and intervention responses to reduce the frequency and duration of stays at IMDs. Individual counties, or consortia of counties, are encouraged to apply for awards ranging from \$25,000 – \$350,000 for service enhancements or resource development.

### **Coordinated Services Team Initiatives (515)**

The 2019 estimated allocations per county is \$60,000 and all currently funded counties' funding is included in this memo. In addition, the Division of Care and Treatment Services will be issuing another Request for Applications to allow those counties not currently funded another opportunity to apply for funding in 2019. Any new contracts from that solicitation will be contracted separately.

### **Intoxicated Driver Program – Supplemental/Emergency Funds (567)**

Wis. Stat. § 20.435(5) appropriates funds for counties to cover unanticipated deficit for the treatment costs of impaired drivers. Counties may apply for these funds to offset their deficits. The Division of Care and Treatment Services (DCTS) will issue a numbered memo in the fall of 2019 when the revenue is made available to request these funds.

Counties will be required to submit a request in the same way as in previous years. However, in 2019, the division is incorporating these funds in the State County contract process. The allocation for each county will initially be \$0. After the completion of the Request for Application process, DCTS will provide contract amendments to each county awarded the supplemental funds.

### **Methamphetamine Treatment Grant (544)**

Methamphetamine Treatment Grant will be used to fund matrix model evidence-based treatment services and other contract administrator approved modalities. Counties receiving these additional funds will require a separate work plan and budget regarding evidence based treatment services for methamphetamine contracts.

## **Temporary Assistance to Needy Families (TANF) Alcohol and Other Drug Abuse (AODA) Treatment County (535)**

These additional funds will be used by the county only in accordance with your application submitted under Statewide Solicitation of Grant Applications for Temporary Assistance for Needy Families (TANF) and Community-Based Alcohol and Other Drug Abuse Treatment Programs. All of these additional GPR funds must be used by the county for substance use disorder services for TANF-eligible individuals and their families, parents with minor child(ren) who reside in the household, pregnant women, and non-custodial parents of minor children, involved in multiple systems and in need of treatment for substance use disorder.

## **Juvenile Alcohol and Other Drug Abuse (JAODA) (579)**

The purpose of the additional funds is to develop intake and court procedures that screen, assess, and give new dispositional alternatives for children with needs and problems related to the use of alcohol beverages or controlled substances who come within the jurisdiction of a court assigned to exercise jurisdiction under this chapter in the counties selected by DHS.

## **Program Profiles Removed from the 2019 Contract**

All counties completed the transition to Managed Care prior to CY 2019 and county operated Adult Waivers ended June 30, 2018. This includes the following Adult Waiver Programs:

- The Medicaid Pass-Through Program (MAPT) (388, 389, and 390)
- COP-Waiver (338 and 339)
- COP-Waiver (367)
- Community Integrity Program (CIP) IA Non-Federal (580), CIP IA Federal (581), Money Follows the Person (MFP) Non-Federal (472) and Federal (473)
- CIP IB Non-Federal (564) and CIP IB Federal (563)
- ICFMR Non-Federal (407), ICFMR Federal (408), MFP Non-Federal (475) and MFP Federal (476)
- CIP1B Family Care Transition Non-Federal (410) and CIP1B Family Care Transition Federal (411)
- CIP II (348 and 349)
- CIP II – Community Relocation Initiative (369 and 370) and MFP Non-Federal (478) and MFP Federal (479)
- CIP II – Diversions (375 and 376)
- CIP II – Family Care Transfers (392 and 393)

Additionally, the following program profiles have been removed from the 2019 contract and will be contracted individually with the awarded counties:

- Urban Black and Hispanic Treatment (543) Woman's AODA Treatment (545)
- Urban Rural Women's Treatment (547)
- Treatment Alternative Program (576)
- IV Drug Abuse Treatment (586)
- IV Drug Prevention (587)
- Alcohol and Other Drug Abuse (AODA)/Inner City Services (589)

## **Questions**

If you have any questions, please contact your [DHS Area Administration office](#).