


STATE OF WISCONSIN  
Department of Health and Family Services  
Division of Children and Family Services  
Division of Disability and Elder Services

MEMO SERIES DCFS-2006 -16 /ACTION  
MEMO SERIES DDES 2006 -19 /ACTION  
Date: September 5, 2006  
Re: ADVISORY NOTIFICATION OF  
CALENDAR YEAR 2007  
COMMUNITY AIDS ALLOCATIONS

Supercedes DCFS Memo 2005-07  
and DDES Memo 2005-14

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: Burnie Bridge   
Administrator  
Division of Children and Family Services

  
Sinikka Santala  
Administrator  
Division of Disability and Elder Services

The purpose of this memo is to provide you with notification of your CY 2007 Community Aids Allocations. The following information is described in this memo:

- I. New Feature for CY 2007 Community Aids Allocation Spreadsheet
- II. Information on the 2007 Community Aids Allocation
- III. Attachments
  - Public Participation Process Planning
  - CY 2007 County Community Aids Allocation Spreadsheet

I. New Feature for CY 2007 Community Aids Allocation Excel Spreadsheet

This year it will be possible to print two views of the 2007 Community Aids Allocation spreadsheet with just a few clicks of the mouse. You may print the entire spreadsheet on 12 sheets of paper or just the allocations for your county(ies)/agencies on 1 or 2 sheets of paper. Once you print your county/agency only, this view will be saved as a new sheet in the same workbook for reuse, planning, or reprinting. This feature requires Office 97 or newer.

II. Information on CY 2007 Community Aids Allocations

The attached schedules reflect the anticipated contract amounts for Community Aids and other programs. The CY 2007 allocations identified on the attachments are for the **entire** 12 months of the calendar year. This assumes that the 2007-09 State Budget will contain sufficient funding to support these allocations for the last six months of 2007. If changes are made in the State Budget, the 2007 allocation will be adjusted accordingly.

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Document Summary

This memo provides the notification of Community Aids allocations for 2007. Counties can use this information to prepare their 2007 budgets.

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**Carry-over Community Aids Funds.** A county can carry over up to 3% of the following:

Basic County Allocation  
Alzheimer's Family and Caregiver Support  
Community Mental Health Block Grant Services  
AODA Block Grant

The AODA Block Grant Allocation and Community Mental Health Services Block Grant Allocation funds carried over must be used for their original purpose. The other funds become general carry-over funds and are made available on a one-time basis after the previous years' contract has been reconciled.

### **Carry-Over Family Support Program**

Per the statutes, a county can carry-over up to 5% of its Family Support Funding. This carryover must be used for Family Support Program Services.

### **Planning and Budgeting Requirements**

Counties must meet the requirements in s.46.031(3)(b) for Departmental approval of a public participation process for counties without a citizen advisory committee. Counties without a citizen advisory committee must use the attached updated version of Form 4 and instructions (Attachment I - Public Participation Planning Process).

Counties are required to submit to the Department a proposed budget. See DCS Numbered Memo 95-48 for information on this process.

Finally, it should be noted that the Council on Developmental Disabilities (WCDD), under s. 51.437(2)(a)3, Wisconsin Stats., has review and advisory responsibilities on community budgets and plans for programs affecting persons with developmental disabilities. The Council will issue instructions which enable it to carry out these responsibilities.

## **ALLOCATION INFORMATION - SOCIAL SERVICES - COMMUNITY SERVICES - HUMAN SERVICES**

### **Basic County Allocation** (also see CARS Lines 561 and 681)

The amounts reflect the funds added in for the Foster Care Rate Increase. There are no changes from the 2006 amounts.

### **Family Support** (577)

Funding is unchanged from CY 2006.

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

This is the same amount counties received in 2006.

### **Substance Abuse/AODA Block Grant** (570)

This allocation is the same as the 2006 level.

### **Alzheimer's Caregiver Support** (381)

This allocation is unchanged from 2006.

**Total Matchable**

This is the sum of all Community Aids funds which are subject to county match.

**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 in this column based upon reimbursable Community Aids expenses.

**Youth Aids MOE (DSS/HSD Only)**

This is the Youth Aids Maintenance Of Effort level which is used in computing the state/county match for human services and social services departments.

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

This amount is based upon 9.89% of all matchable funds.

**IV-E Independent Living (360)**

Independent Living allocations are based on the data provided to the Department by each county regarding the number of IL eligible youth and the number of eligible youth receiving IL services in the preceding calendar year.

**COP (367)**

The COP allocations indicated in this notification include cost to continue to persons relocated from a nursing home during CY 01, 02 and 03. These amounts do not include funding that may have been awarded to support individuals funded with COP Estate Recovery Funds or for Family Care participants who have moved to a waiver county.

Increases in contract levels due to activity that has not been included in this notification will either be included in the CY 07 final initial contracts or contract amendments will be processed after January 1, 2007.

**COP-Waiver (338 and 339)**

The COP-W allocations listed in this notification include cost to continue for persons relocated from a nursing home during CY 01, 02 and 03. The amounts do not include funding that may have been awarded to support individuals funding with the COP Estate Recovery Funds or for Family Care participants who have moved to a waiver county.

Increase in contract levels due to activity that has not been included in this notification will either be included in the final CY 07 initial contracts or a contract amendment will be processed after January 1, 2007.

Report all COP-Waiver expenses on CARS Profile 337. This profile will allocate the non-federal share and the federal share of expenses based on the current federal percentages to CARS Profiles 338 and 339. CARS Profile 338 will identify and pay the non-federal share of expenses as reported on Profile 337 based on the current state/federal percentage rate. This profile is contract controlled. The non-federal share of expenses as reported to 337 that exceed the COP-Waiver GPR contract level will roll to BCA (profile 561) for payment. The federal share of expenses will be identified and paid on CARS Profile 339. This profile is sum sufficient.

For purposes of this notification that state/federal percentage calculation was 42.94 % (GPR) and 57.06% (FED). This ratio may change depending upon final federal notification.

### **Kinship Care Assessments (380) and Benefits\_(377)**

The Kinship Care benefit allocation is computed using the most recent 12 month case data from each county, then averaged to determine annual need. This formula distributes the annual grants to counties based on the most recent data.

### **Brain Injury Waiver (BIW) (506) and BIW Federal ( 507)**

Reimbursement for BIW Non-Federal (Profile 506) is the state MA GPR portion of average daily claims, which must be less than or equal to the **state per diem rate** (\$180) for program participants. The BIW Federal (506) amount includes the federal share of the revenue earned for slots at \$180 per day; the federal share of costs exceeding the **state per diem rate** for the slots at \$180 per day; and the federal portion of estimated claims for local match slots. The BIW number of regular and local match slots is based on the county's caseload as of July 1, 2006. The 2005 actual costs per day for each county was used as the baseline and then inflated for 2007. The totals do not reflect any local matching funds.

### **CIP IA Non-Federal\_(580) and CIP IA Federal (581)**

The CIP IA actual cost per day for 2005 was used as a baseline and then inflated to estimate the 2007 costs for participants identified in the CIP IA Program as of July 1, 2006. The amount calculated for CIP IA Non-Federal (Profile 580) is the total of the state MA GPR portion of the funds available for the slots assigned to these program participants. The federal share of the slot revenue is included in the amount on CIP IA Federal (Profile 581) as well as the federal portion of estimated costs above the total of the slot revenue earned by the county.

### **CIP IB Non-Federal\_(564) and CIP IB Federal (563)**

The estimated MA GPR funding the County has been allocated on CIP IB Non-Federal is based on the number and type of waiver slots in use as of July 1, 2006, including those funded by the ICF-MR Restructuring Initiative. The allocation is the sum of the MA GPR portion of the state per diem rate for regular slots, facility specific slots and the ICF-MR Restructuring plan rate slots available to counties during calendar year 2007. The federal portion of the slot revenue is available on CIP IB Federal. This profile also includes the federal portion of average costs for those participants having regular or facility specific slots is allocated to the CIP IB Federal and the federal portion of total costs for those participants counties have chosen to serve with local revenue.

### **CIP II (348 and 349)**

The amounts shown in this notification are based on caseload information as of January 1, 2006 and will be updated for the final CY 07 contracts. Contract value is calculated based on CY 07 per diem of \$41.86 times 365 days times the number of slots a county currently holds. For the purposes of this allocation notification the state/federal split used was 42.54% (GPR) and 57.46% (FED).

Counties will report all CIP II program expenses on CARS Profile 347. CARS Profile 347 will allocate the non-federal share to Profile 348 and the federal share of expenses to Profile 349 based on the current state/federal split. CARS Profile 348 is contract controlled. The non-federal share of expenses that exceed the GPR contract level will roll to the BCA (561) for payment. The federal share of expenses will be identified and paid on CARS Profile 349. This Profile is sum sufficient.

### **CIP II – Community Relocation Initiative\_(369 and 370)**

The amounts shown in this notification are based on caseload information as of August 1, 2006 and will be updated for the final CY 07 contracts. Contract value is calculated based on the per diem specific awarded to each person times 365 days. For the purposes of this allocation notification the state/federal split used was 42.54% (GPR) and 57.46% (FED).

Counties will report all CIP II – Community Relocation Initiative expenses on CARS Profile 368. CARS Profile 368 will allocate the non-federal share to Profile 369 and the federal share of expenses to Profile 370 based on the current state/federal split. CARS Profile 369 is contract controlled. The non-federal share of expenses that exceed the GPR contract level will roll to Profile 561 (Base) for payment. The federal share of expenses will be identified and paid on CARS Profile 349. This Profile is sum sufficient.

**CIP II – Diversions (375 and 376)**

The amounts shown in this notification are based on caseload information as of August 1, 2006 and will be updated for the final CY 07 contracts. Contract value is calculated based on CY 06 per diem of \$85 times 365 days times the number of slots a county currently holds. For the purposes of this allocation notification the state/federal split used was 42.54% (GPR) and 57.46% (FED).

Counties will report all CIP II program expenses on CARS Profile 374. CARS Profile 374 will allocate the non-federal share to Profile 375 and the federal share of expenses to Profile 376 based on the current state/federal split. CARS Profile 375 is contract controlled. The non-federal share of expenses that exceed the GPR contract level will roll to Profile 561 (Base) for payment. The federal share of expenses will be identified and paid on CARS Profile 349. This Profile is sum sufficient.

**Foster Care Continuation (365)**

Allocations for this profile are based on awards to individuals remaining in their foster care setting during the contract year. This state funding must be used as match for a Home and Community Based Waiver and an approved community placement individual service plan (ISP) must be in place for CY2007. The federal share of the ISP will be identified and paid on one of the waiver payment profiles.

**Children’s Long Term Supports (CLTS)**

The flowchart below identifies each of the Children’s Long Term Supports Waivers and the associated CARS reporting and payment profiles. The estimated MA GPR funding the County has been allocated for the Non Federal Profiles is based on the number and type of slots (autism, crisis or Children’s Redesign Pilot) assigned to each County or County Agency as of 7/1/2006. The amount available on each Federal Profile includes the Federal match of the MA GPR for each autism, crisis or Children’s Redesign Pilot slot, the Federal portion of estimated costs above the total of the slot revenue earned by the County and/or local match slots.

**Children's Waivers Flowchart - CY06**

<b>Profile 420 CLTS DD</b> <i>(LTS Code F)</i>	<b>Profile 427 CLTS DD Autism Federal (E)</b>	
	<b>Profile 450 CLTS DD Non Federal (F)</b>	Rolls to 561 BCA (F)
<b>Profile 421 CLTS DD BCA MATCHED</b> <i>(LTS Code I)</i>	<b>Profile 428 CLTS DD Federal (E)</b>	
	<b>Profile 561 BCA (F)</b>	
<b>Profile 422 CLTS DD OTHER</b> <i>(LTS Code H)</i>	<b>Profile 429 CLTS DD Federal (E)</b>	
	<b>Profile 460 CLTS Non Federal Other (F)</b>	Rolls to 561 BCA (F)
<b>Profile 430 CLTS MH</b> <i>(LTS Code G)</i>	<b>Profile 437 CLTS MH Autism Federal (E)</b>	
	<b>Profile 451 CLTS GPR (F)</b>	Rolls to 561 BCA (F)

<b>Profile 431 CLTS MH BCA MATCHED</b> (LTS Code K)	<b>Profile 438 CLTS MH Federal (E)</b>	
	<b>Profile 561 BCA (F)</b>	
<b>Profile 432 MH OTHER</b> (LTS Code J)	<b>Profile 439 CLTS MH Federal (E)</b>	
	<b>Profile 461 CLTS Non Federal Other (F)</b>	Rolls to 561 BCA (F)
<b>Profile 440 CLTS PD</b> (LTS Code P)	<b>Profile 447 CLTS PD Autism Federal (E)</b>	
	<b>Profile 452 CLTS PD Autism Non Federal (F)</b>	Rolls to 561 BCA (F)
<b>Profile 441 CLTS PD BCA MATCHED</b> (LTS Code M)	<b>Profile 448 CLTS PD Federal (E)</b>	
	<b>Profile 561 BCA (F)</b>	Rolls to 561 BCA (F)
<b>Profile 442 CLTS PD OTHER</b> (LTS Code L)	<b>Profile 449 CLTS PD Federal (E)</b>	
Profile types-- D=Non-reimbursable, E=Sum Sufficient, F=Contract Controlled, G=Allocating	<b>Profile 462 CLTS Non Federal Other (F)</b>	Rolls to 561 BCA (F)

**Other Programs**

The schedule also contains 2007 allocations for programs only available in certain counties. The requirements for these programs are similar to 2006 requirements.

ACTION SUMMARY STATEMENT: Counties are to use this information to prepare their 2007 budgets. The budget for Community Aids funds is due to your Area Administrator on December 1, 2007.

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MEMO WEB SITE: [http://dhfs.wisconsin.gov/dcfs\\_info](http://dhfs.wisconsin.gov/dcfs_info) or [http://www.dhfs.wisconsin.gov/dsl\\_info/](http://www.dhfs.wisconsin.gov/dsl_info/)

Attachments: [2007 CARS Allocation Spreadsheet](#)

cc Area Administrators/Assistant Area Administrators  
Bureau Directors  
Program Office Directors/Section Chiefs  
Tribal Chairpersons/Human Services Facilitators

#memoV2007 CO\_ALLOCATIONS.DOC

Attachment I

County(ies) \_\_\_\_\_

Agency \_\_\_\_\_

Public Participation  
Planning Process

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(1)	(2)	(3)
Date	Activity	Regional Office Monitoring

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Column (1): Date

Indicate the date of the proposed activity. Be as specific as possible. If you are unable to give a specific date now, then indicate a time frame (e.g., June 3-6). As specific dates become known, forward this information to the Regional Office so they may update their copy of the plan.

Column (2): Activities

Each activity that the agency will carry out during the plan's period should be described in this space. The description should include the nature of the activity, the agencies involved e.g., Aging and Public Health Nurse as well as DSS), the location of the activity, the target group of the activity (e.g., about whom and from whom information is sought).

Column (3): Regional Office Monitoring

Agencies do not complete this column. This column will be used by the DHFS Regional Office to check off and/or comment on the Implementation of the activities.