

Tony Evers
Governor



DIVISION OF PUBLIC HEALTH

1 WEST WILSON STREET
PO BOX 2659
MADISON WI 53701-2659

Kirsten L. Johnson
Secretary

State of Wisconsin
Department of Health Services

Telephone: 608-266-1251
Fax: 608-267-2832
TTY: 711 or 800-947-3529

DATE: July 26, 2024
TO: Local and Tribal Health Departments and Contracted Agencies
FROM: Assistant Administrators: Anna Benton and Jonette Arms
RE: Calendar Year (CY) 2025 Consolidated Contracting Process

The Division of Public Health has begun preparations for the CY 2025 Consolidated Contract. Information related to the contract process will be posted to the [Consolidated Contract webpage](#) as it becomes available.

Allocation changes

Department of Health Services has been notified by our federal partners of the following 2025 funding change for the program area below:

- Environmental Public Health Tracking will increase by 89%.

The following programs have indicated minimal or no change in funding for 2025:

• WIC Breastfeeding Peer Counseling Program (BFPC)	• Public Health Emergency Preparedness (PHEP)
• Cities Readiness	• Preventative Health & Health Services Block Grant (PHHS)
• Childhood Lead	• Radon
• Children & Youth with Special Health Care Needs (CYSHCN)	• Reproductive Health & Family Planning
• Communicable Disease Control & Prevention	• Tobacco
• WIC Farmers Market Nutrition Program (FMNP)	• Supplemental Nutrition Assistance Program Nutrition Education (SNAP-ED)
• HIV/AIDS	• Wisconsin Wins
• Immunization	• Women, Infants and Children Program (WIC)
• Infertility Prevention	• Wisconsin Well Women
• Maternal Child Health (MCH)	

Local health departments should note that while the majority of funding is anticipated to remain level (pending any unknown federal changes that could occur), each health department could see an adjustment in funding they receive due to Level I, II, or III changes. The health department level is a factor in many of our funding allocation 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.

2021 Census population estimates will be used as one of the allocation factors to distribute funds. Minimal changes are anticipated from the last cycle unless a level change has occurred over the past year.

Memorandum of Understanding (MOU) transfer language

If a local or Tribal health department is considering the transfer of funds to another local or Tribal health department, a formal request (email is sufficient) must be submitted to the DPH Program Manager by **August 16, 2024**. 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 an MOU. All contracts are now handled through the DHS DocuSign process and these transfer MOUs need to be sent directly to Bridget Sneen, DHS Consolidated Contracts Program Manager, via DHSGACMail@dhs.wisconsin.gov prior to the return of the signed contract. If multiple local or Tribal health departments are transferring funds to one local or Tribal health department, then there must be an MOU submitted for each local or Tribal health department that is transferring funds.

Refusal of funds

If you have determined that you intend to refuse program funds, please inform the DPH Program Manager by **August 16, 2024**, of your intent to refuse funds. Once funding levels are approved through the DHS GEARS Unit, the funding amounts will be entered into the Grants and Contracts (GAC) System.

Negotiation process

The negotiation process for the 2025 contracts will be similar to last year. Each program will provide the DPH Bureau of Operations with their program objectives, quality criteria, boundary statements, and/or scope of work attachments which will then be posted to the [Consolidated Contract webpage](#). All attachments will be incorporated into the contracts. Local and Tribal health agencies will be able to begin entering objectives on or around September 20, 2024.

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 webpage](#).

More information regarding negotiations will be provided in a GovD message to local public health departments around the middle of September 2024.

Reporting of expenditures

Expenditures must be reported on the [CARS/GEARS Expense Report](#) form. Send the completed form by email to DHS600RCars@dhs.wisconsin.gov. Please copy your DPH contract monitor(s) on all expense report submissions. The form only requires that you report monthly expenses in a lump sum for each Profile ID; however, 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/GEARS reporting may be found on the [CARS/GEARS webpage](#). If you have a question related to the timeliness of your reimbursement or the appropriateness of an expenditure, work with your program contact.

Contract monitoring process

Mid-year and end-of-year reviews will be handled in the same manner for CY 2025 as in previous years. 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 reporting calendar tab of the 2025 Consolidated Contract Overview spreadsheet (*final version available approximately mid-September*) will identify the correct mid-year and end-of-year reporting mechanism for participating programs.