5% Base Budget Reduction Form

AGENCY CODE & NAME:

#1 BRIEF DESCRIPTION OF SERVICE TO BE CONSIDERED FOR *ELIMINATION* OR *REDUCTION*:

Operating Costs in CSED.

#2 THE SAVINGS THAT ARE EXPECTED:

Savings in operating and personal services costs.

#3 THE CONSEQUENCES OR IMPACTS OF THE PROPOSED *ELIMINATION* <u>OR</u> *REDUCTION*:

Reducing operating expenses would require delays in staffing, reduced travel and standard office expenditures. Program workload would have to be shifted and reduced resources would affect the delivery of program priorities. Possible inability to meet Federal and State Plan requirements, which could result in the loss of Federal Incentive payments and TANF funding losses. Services to custodial and absent parents would be curtailed, consequently resulting in reductions in services intended for the care and welfare of the children which Child Support Services serves. As Child Support services would be curtailed, including medical support services, there would be increased financial burdens placed on Medicaid and welfare.

#4 HOW THE IMPACT TO CONSTITUENTS AND STAFF MIGHT BE MITIGATED:

Existing staff would have an increased workload. The division would have to prioritize services, identifying and serving the needs of Montana families first and placing State of Montana cost recovery and cost avoidance second. This would protect families, but potentially cost the state several millions of dollars.

#5 WHETHER THE SERVICE IS SPECIFICALLY REQUIRED BY STATE & /OR FEDERAL STATUTE - YES OR NO:

Yes - Federal: 42 USC 666

Yes - Montana Code Annotated, 40-5-201, et seg.

Form B