

**DANE COUNTY  
POLICY AND FISCAL NOTE**

<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Update	Substitute No. _____
Sponsor: <u>0&amp;@!</u>		Resolution No. <u>2020 RES-315</u>
Vote Required: Majority <input checked="" type="checkbox"/>	Two-Thirds <input type="checkbox"/>	Ordinance Amendment No. _____

Title of Resolution or Ord. Amd.:

**APPROVING CHANGES TO THE 2020 COUNTY EMPLOYEE BENEFIT HANDBOOK**

**Policy Analysis Statement:**

Brief Description of Proposal -

This resolution approves modifications to the terms and conditions for the 2020 Employee Benefit Handbook.

Current Policy or Practice -

The current Employee Benefit Handbook contains the terms and conditions of employment for County employees. A Dane County Ordinance requires the Department of Administration to annually review and propose modifications.

Impact of Adopting Proposal -

Adopting the resolution will authorize the proposed changes to the 2020 Employee Benefit Handbook.

**Fiscal Estimate:**

Fiscal Effect (check all that apply) -

- No Fiscal Effect
- Results in Revenue Increase
- Results in Expenditure Increase
- Results in Revenue Decrease
- Results in Expenditure Decrease

Budget Effect (check all that apply)

- No Budget Effect
  - Increases Rev. Budget
  - Increases Exp. Budget
  - Decreases Rev. Budget
  - Decreases Exp. Budget
  - Increases Position Authority
  - Decreases Position Authority
- Note: if any budget effect, 2/3 vote is required

**Narrative/Assumptions about long range fiscal effect:**

N/A

**Expenditure/Revenue Changes:**

	Current Year		Annualized			Current Year		Annualized	
	Increase	Decrease	Increase	Decrease		Increase	Decrease	Increase	Decrease
Expenditures -					Revenues -				
Personal Services					County Taxes				
Operating Expenses					Federal				
Contractual Services					State				
Capital					Other				
Total	\$0	\$0	\$0	\$0	Total	\$0	\$0	\$0	\$0

**Personnel Impact/FTE Changes:**

n/a

**Prepared By:**

Agency: Department of Administration	Division: Employee Relations
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Reviewed by:	Date: Phone: