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State of Wisconsin

Wisconsin Council on Mental Health

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851
mhc.wisconsin.gov

MEETING OF THE LEGISLATIVE AND POLICY COMMITTEE

November 10, 2016, 12:30 pm - 3:00 pm

1 West Wilson Street, Conference Room 850A, Madison, Wisconsin

Members of the Legislative and Policy Committee (LPC) in Attendance: Shel Gross, William Parke-Sutherland, Crystal Hester, Mishelle O'Shasky, Joanne Juhnke, Britt Cudaback, Mike Bachhuber, Barbara Beckert (via teleconference)

Department of Health Services (DHS) Staff in Attendance: Kay Cram, Joyce Allen, Ryan Stachoviak, Lorie Goeser, Kenya Bright

Guests in Attendance: Veronica Thompson, Linda Hall, Jolene Plautz (via teleconference)

Minutes

Item 1: Call to Order

Review and approval of minutes of October 13, 2016

C. Hester moved to approve the minutes of October 13, 2016.

M. Bachhuber seconded the motion.

Motion carries, minutes approved.

Announcements

C. Hester announced the NAMI Wisconsin Annual Conference and Action on the Square will be held in May 2017 in Madison. M. O'Shasky announced she will be presenting at the Children Come First Conference. B. Beckert noted that Medicare Part D open enrollment supports are available through Disability Rights Wisconsin (DRW).

Public Comment

No public comment was made.

Item 2: Budget Priorities

Treatment Alternatives and Diversion (TAD)

S. Gross announced that an updated WCMH Budget Summary was provided in the meeting materials. This update includes a proposal to modify funding for Institutes for Mental Disease (IMD).

L. Goeser from the Division of Care and Treatment Services (DCTS) provided the Committee with a presentation on Treatment Alternatives and Diversion (TAD) program. L. Goeser noted that there is also the Treatment Alternative Program (TAP) which is funded via the MHBG. Initially a smaller group of counties offered TAD services. The number offering TAD has since expanded. Services offered by the TAD programs do vary program to program. TAD is a collaborative effort across the justice system. Funding for TAD was increased to 6 million dollars annually, however the amount of funding that will be allocated ongoing is not yet known. Two million dollars that was included in the last session was one time funding for the biennium. Counties vary in the level of funding that they provide for treatment courts. The DHS funds TAP at an annual amount of \$900,000. The DHS and DOC plan to provide ongoing training for the TAD programs. J. Allen noted that having a pre-booking intervention approach would be an important step in improving diversion.

S. Gross asked whether the Committee was ok including TAD back into the budget priorities. S. Gross noted that another element to propose regarding TAD is to allow people with only a mental illness to participate in the program as well. Members of the Committee voiced support for including TAD in the priority list.

Medicaid Rates and School-Based Mental Health

L. Hall provided a presentation on the Medicaid rate for outpatient psychotherapy. L. Hall noted that school-based mental health programs often face difficulties due to low Medicaid payments for services. In addition, not all kids who receive services are Medicaid eligible. L. Hall presented a best practices paper from the Wisconsin Coalition for Expanding School-Based Mental Health. Wisconsin's Medicaid rates are lower than other state's rates. In addition some schools have concerns over offering consultation as they may not be able to meet the demands.

C. Hester noted the importance of increasing Medicaid rates for children and adults, however it is a much larger ask to include adults in a proposal. S. Gross asked whether the LPC ought to add Medicaid reimbursement rates as priority and if so across the lifespan or just for kids? 14 million dollars in General Purpose Revenue (GPR) would likely be needed to increase Medicaid Rates. S. Gross recommended, based on Committee input, putting the item into the priorities.

Other discussion

W. Parke-Sutherland stated that estimated cost of completing a thorough evaluation of the Peer Run Respite programs would likely be \$250,000 to \$400,000. S. Gross noted that the Independent Living Council is also doing work to make recommendations regarding people who are Deaf or Hard of Hearing. B. Beckert suggested that the Individualized Placement and Support (IPS) budget proposal should stand on its own as an item. M. Bachhuber recommend including supporting TAD, including low-risk offenders, in the budget priority document.

K. Bright provided a briefing on IPS. It is difficult to provide a firm number of how many people are served by the program a year. It is estimated that 450 people are receiving IPS services on any given day. K. Bright shared that 45% of people receiving IPS achieve employment, making the program more impactful than standard supported employment services. M. Bachhuber asked what resources would be needed to bring IPS statewide. K. Bright stated that to do so the State would need more trainers. It is estimated that to be brought statewide 4-5 trainers would be needed who would provide training and technical assistance. IPS requires continual retraining and fidelity monitoring.

M. Bachhuber moved to recommend the Budget Priority document be provided to and approved by the WCMH.

C. Hester seconded the motion.

Motion carries.

Item 3: Legislative Updates (State and Federal)

M. Bachhuber provided a summary and update on H.R. 2646, the Helping Families in Mental Health Crisis Act of 2016.

Item 4: Division of Care and Treatment Services Updates

J. Allen provided an update on the Office of Inspector General (OIG) audit of the Comprehensive Community Services (CCS) program. Counties have expressed concerns over mixed messages and a lack of communication. Counties had noted that there was not good communication among DHS and answers often differed among the various divisions. DHS brought together a group to discuss the outcomes of the audit.

Regarding the Trempealeau County IMD K. Cram noted that the Bureau recently conducted a site visit related to the IMD contract. The Bureau is having internal discussion on how to provide technical assistance and support to encourage recovery oriented services and person centered planning. The Bureau is planning to have a follow up meeting with the agency.

J. Allen noted that the Governor’s Taskforce on Opiate abuse held their first meeting and are scheduling a meeting in the coming month. The Taskforce is looking for ideas on how to improve treatment services in the state.

Item 5: 2017 Meeting Schedule

The LPC will hold a combined meeting with Children and Youth Committee on May 11th. M. O’Shasky voiced her support for a combined LPC and Criminal Justice Committee meeting.

Item 6: Committee Charter

The LPC will address the charter and guiding principles at the upcoming meeting.

Item 7: Agenda Items for December 2016 Meeting

The following agenda items were noted:

1. Bill tracking process and procedures
2. LPC Charter
3. DHOH priority areas
4. Details of budget initiatives

Item 8: Adjourn

Meeting adjourned at 3:04pm.