



State of Wisconsin

Wisconsin Council on Mental Health
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Meeting of the Legislative and Policy Committee
October 11, 2018, 12:30 pm to 3:00 pm
1 West Wilson Street, Madison, Wisconsin and via Conference Call

Members of Legislative and Policy Committee (LPC) in Attendance: Crystal Hester, Alice Sykora, Shel Gross, Phil Robinson, Chris Wirth, Justin Odulana, Joanne Juhnke, Mary Neubauer, Kit Kerschensteiner (via teleconference)

Department of Health Services (DHS) Staff in Attendance: Ryan Stachoviak, Joyce Allen

Guests in Attendance: Mishelle O'Shasky, Brian Michel, Marina Pappas (via teleconference)

MINUTES

1. Call Legislative and Policy Committee (LPC) Meeting to Order

Review and approval of the minutes of September 13, 2018

Members of the LPC provided edits to the minutes.

S. Gross moved to approve the minutes of September 13, 2018.

J. Odulana seconded the motion.

Motion carried, M. Neubauer abstained.

Announcements

C. Hester announced the opening of the NAMI Wisconsin Healing Arts Show. The art will remain displayed at the Lakeside Café until November 8th. No updates were provided from the WCMH.

LPC Schedule Review

Members of the LPC reviewed and approved the 2019 meeting schedule. The schedule is available online:
<https://mhc.wisconsin.gov/mhcfiles/docs/legpol/2019%20LPC%20Meeting%20Schedule.pdf>.

Public Comment

M. O'Shasky discussed a documentary that is soon to be released by HBO called The Sentence. The documentary tells the story of a woman who was incarcerated and mandatory minimum sentencing. M. O'Shasky hopes to bring the film to Wisconsin for a screening with the film makers.

M. Pappas discussed a recent candidate forum held by NAMI Racine County in collaboration with Disability Rights Wisconsin. NAMI Racine County has been making efforts to engage voters with an aim to increase voter turnout.

2. Legislative and Policy Updates, Discussion, and Action

Budget Priority Planning

S. Gross recommended including a placeholder for priorities related to mental health services for people who are Deaf and Hard of Hearing. C. Hester will have an update to provide regarding Individual Placement and Support (IPS). The general ask would be to fund five full time staff members to provide IPS to meet the states need. This would cost roughly \$100,000 per staff, for a total budgetary ask of \$500,000.

S. Gross discussed updates regarding the Medicaid Assistance Purchase Plan (MAPP), noting that there continues to be external work to make changes to the program. LPC members K. Kerschensteiner and M. Neubauer will continue to track the effort.

J. Juhnke provided updates on children's mental health related budget priorities. Some updates have been made based on clarified information from the Department of Public Instruction (DPI). One update is related to funding for the Center for Suicide Awareness; this proposal has now been included in the DPI budget proposal. The CYC and WCMH were supportive of such proposals in the past. Also included in the budget is \$310,000 to be awarded to Wisconsin Family Ties.

M. O'Shasky provided an update regarding Criminal Justice Committee (CJC) discussions on budget priorities at the CJC meeting on October 10, 2018. The committee discussed proposals regarding Treatment Alternatives and Diversion (TAD). Currently there are people who would benefit from involvement in TAD, however as they are low risk they are not eligible. Anecdotal evidence suggests at times people are being charged with a felony so that the person can be eligible for TAD, even though the charge may not be warranted. The CJC discussed the benefit of having a low-risk track for the program that would increase eligibility for the program. Members of the LPC suggested reaching out to the DOJ to learn more about the specifics of the program.

C. Wirth requested that budget priority updates be submitted by November 9 so that they can be provided to the WCMH at their November 14 meeting.

State Legislation and Review of LPC Bill Tracking and Bills to Review and Approve

S. Gross presented a document that was provided by Disability Rights Wisconsin (DRW) regarding comment on the Family Care Waiver. These ideas may be important for the LPC and WCMH to consider. Changes that were proposed include integrating behavioral health services into the Family Care Waiver. Advocates have expressed concern the adequacy of mental health service delivery in Family Care. The DRW document provides comment on changes. Certain concerns are regarding whether mental health needs will be identified upfront, training on Trauma Informed Care and recovery. DRW also suggests support for Certified Peer Specialists (CPS) in Family Care. Other concerns include services for people with intellectual disabilities, and a lack of coordination of services in Family Care.

M. Neubauer noted her support for the document. Peer Specialist Services in particular are important for consideration in Family Care. K. Kerschensteiner stated that while the waiver may be effective in certain ways, the implementation is problematic and more needs to be done to educate providers on what the covered benefits are under the waiver.

P. Robinson discussed self-directed services. It would be helpful to have some sort of operational methodology included and how we can measure the impact it is having on the people being served. It is important to emphasize voice and choice.

J. Juhnke left the meeting at 2:09 pm.

S. Gross moved that the WCMH endorse the recommendations in Disability Rights Wisconsin's "DRW Ideas for Improving Wisconsin's Family Care HCBS Waiver" dated October 10, 2018. In addition, the WCMH should provide comment on other pertinent issues related to the Family Care Waiver.

M. Neubauer seconded the motion.

Motion carried unanimously.

J. Odulana noted that the document does not address the mental health needs of people with visual and hearing impairments. M. O'Shasky suggested that CLAS standards be considered as well.

C. Hester discussed a recent meeting with the Department of Justice (DOJ) regarding school safety. At that meeting a discussion was held regarding the concerns recently expressed by advocates regarding the recent school safety funding. J. Juhnke called into the meeting at 2:18 pm and provided additional detail regarding the training being funded via the school safety funding.

Federal Legislation, Executive Actions or other Federal matters

C. Hester announced the maintenance of the Mental Health Block Grant funding as the Senate budget was passed.

3. Division of Care and Treatment Services Updates

J. Allen provided an update regarding the DHS budget request. Overall it was a standard budget, though there are some items to highlight. Funds are included for the Youth Crisis Stabilization Facility. This effort was started in the current budget and the DCTS is currently developing a new administrative rule. An amount of \$996,400 is included in the next budget. The budget also includes continued funding of \$450,000 for a Veterans Peer Run Respite. Medicaid has also included a Comprehensive Community Services (CCS) cost re-estimate in the budget. The budget includes funds for the Mendota Juvenile Treatment Center expansion, providing additional funding over the course of two years, \$3.1 million in year one, and \$8.4 million in year two.

R. Stachoviak provided a briefing on updates to the Mental Health Block Grant carryover funding from 2018 into 2019. J. Allen discussed the Veterans Peer Run respite funding opportunity. No organization was able to be funded off of the previous Government Funding Opportunity (GFO) so a new GFO will be released. Regarding the Menomonie peer run respite, the DCTS will not continue to fund Grassroots Empowerment Project (GEP) to provide the service. The DCTS, based on the previous GFO, reached out to those existing organizations to identify an organization that would be open to operating a second Peer Run Respite. SOAR Case Management

was open to taking the project on and will be working with an organization in Menomonie to provide Peer Run Respite services.

The DCTS is also in the process of bringing together a Certified Peer Specialists advisory committee. There will be an application released soon, with the goal of building a group of 25 members. This will include a representative from the WCMH, the State Council on Alcohol and Other Drug Abuse (SCAODA), and the Recovery Implementation Task Force (RITF). The first meeting is planned for December. J. Allen discussed DCTS efforts to coordinate a CCS and CST system of care. The DCTS created a description of this system with common language and descriptions of similarities and differences between the programs.

4. Agenda Items for the November 2018 Committee Meeting

Members of the LPC recommended discussing LPC membership, the process of selecting members, and continued discussion of budget priorities.

5. Adjourn

Meeting adjourned at 3:15 pm.