Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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WPPNT Reminders

• Call 877-820-7831 before 11:00 a.m.

• Enter passcode 107633#, when prompted.

• Questions may be asked, if time allows.

• To ask a question, press *6 on your phone to un-mute yourself. *6 to remote.
Chapter 51 Update

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Preview

• This presentation will review some recent changes to Chapter 51.
Statistics

• Generally speaking the number of emergency detentions has continued to rise. There are some exceptions and each county may have it’s own variations.

• As you can see the data that includes hard numbers is quite old.

• The last graph gives a better overall snapshot.
Older Data

![Graph showing older data for commitment types Alcohol and Drug over the years 2008 to 2011.](image)
Older Data

MH

Year 2008 2009 2010 2011
MH
Recent Statistics

![Graph showing recent statistics for various types of admissions over a period from 1997 to 2017. The graph indicates an upward trend in admissions, with a significant increase in emergency detention admissions. Legend includes categories: Voluntary commitment, Protective placement, Involuntary civil commitment, Emergency detention.]
Fond du Lac County v. Helen E.F., 2012 WI 50, 340 Wis. 2d 500

• Familiar to most of this audience this Supreme court decision held that a patient with Alzheimer's dementia was not a proper subject for treatment under chapter 51 based on the definition in the statute and the lack of rehabilitative potential.
Dissent

• Dissent was written by Justice Abramson and suggested that there needed to be further legislative clarification:

• A tension exists in the texts of the statutes (and the application of the statutes) between on the one hand lumping together all people with a certain condition and on the other hand considering the symptoms and conduct of the individual. The tension between the more rigid categories of people with a certain condition and the more flexible behavioral standards is palpable in the majority opinion. Does this opinion govern all Alzheimer's patients or only Helen E.F.?
What About Developmental Disability?

• Justice Abramson also brings up the title of chapter 51 and definitions which include developmental disability. Where do folks with DD fall in the spectrum of rehabilitation?
Waukesha Co v JWJ
2017

• Mr. J is a person with paranoid schizophrenia who has been under a chapter 51 commitment for many years. He contends that:
  – further involuntary commitment and treatment will not rehabilitate him, so he is not a proper subject for treatment within the meaning of Wis. Stat. § 51.20(1) (2015–16).
  – [this is based on his experience that medications do not entirely remove his symptoms].
Waukesha Co v JWJ

• In this case the supreme court found that rehabilitation was not synonymous with cure. That Mr. J was able to remain safe and live in the community when he was taking medications. And that therefore he was a proper subject for treatment.

• It also affirmed that the standard in Helen EF was correct and clear enough to distinguish who was and was not a proper subject for treatment.
Dissent

• Again the dissenting opinion came from Justice Abramson saying that the legislature should look at the statutory language and better define the terms. Including some discussion of long term vs short term treatment.
HIPAA Harmonization

• The Act permits covered entities and their business associates to use, disclose or request disclosure of mental health treatment records without a patient authorization for the limited purposes of treatment, payment or health care operations, so long as such uses, disclosures or requests for disclosure are otherwise compliant with HIPAA.
Limitations

- An entity can decide to follow the older stricter restrictions as outlined in Chapter 51.30, they do not have to convert to this new structure but practically it is difficult for medical practices to abide by the letter of 51.30 without causing problems for patients. Many billing structures require these disclosures for payment.
HIPAA

• HIPAA still applies. There are provisions for the privacy of certain records in HIPAA such as psychotherapy notes that would still apply.
HIPPA Harmonization

When considering transition to this set of rules entities should review policies and consent forms to be sure they are consistent with the approach the organization is going to follow.
HIPAA Harmonization

Prior consents will need to be updated with the new rules in mind and patient’s need to know that the rules have have changed.
Emergency Detention and Drug Addiction

- Wisconsin Act 34
  - Grouped the treatment and emergency care of persons with drug dependence with alcohol use disorders rather than with mental illness where it previously resided.
  - While this makes more sense in many ways it is unclear what the practical application of this statutory change will be.
As you can see very few drug or alcohol commitments were done in the past.
Considerations…

Several questions remain:

– Previously, alcohol commitments were rarely done in some counties. This was because of the belief that they were expensive and futile. Will individual counties change their thinking on this?
– Where do we put persons involuntarily committed for substance use disorders? Is there a need for more inpatient beds?
– Will there be locked facilities?
– What will the consequence be for non-compliance?
– How is your county handling this? Have you done a substance related ED? If so how did it go?