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State of Wisconsin

Wisconsin Council on Mental Health
mhc.wisconsin.gov

MEETING OF THE LEGISLATIVE AND POLICY COMMITTEE

April 12, 2018

12:30 pm to 3:00 pm

1 West Wilson Street, Conference Room 630, Madison, Wisconsin and Via Conference Call

Members of the Legislative and Policy Committee (LPC) in Attendance: Karen Iverson Riggers, Shel Gross, Joanne Juhnke, Justin Odulana, Mike Lappen, Kathie Knoble-Iverson, Chris Wirth, Nate Schorr, Mary Neubauer, Kit Kerschensteiner, Elizabeth Viera (phone), Tammy Conrad (phone)

Guests in Attendance: Mishelle O'Shasky (WCMH), Marc Herstand (NASW), Bonnie MacRitchie (CYC), Kim Eithun (CYC)

Department of Health Services Staff in Attendance: Kay Cram, Ryan Stachoviak

MEETING MINUTES

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

Review and approval of the minutes of March 8, 2018

J. Juhnke moved to approve the minutes of March 8, 2018.

K. Knoble-Iverson seconded the motion.

Motion carried, minutes approved.

Announcements

S. Gross announced that the Annual Prevent Suicide Wisconsin Conference will be held on April 13th.

Wisconsin Council on Mental Health (WCMH) Updates

K. Iverson Riggers announced that the WCMH continues to work on strategic planning. A workgroup coordinated by the Nominating Committee will focus on Council scope, logistics, membership, mentorship, and onboarding. The members of the Council plan to discuss goals and structure for Council white papers or position papers. The Council will hold its fall tour in the Ashland area this year. K. Iverson Riggers welcomed members of the Committee to provide suggestions for organization that the Council could meet with during this visit.

Public Comment

No public comment was made.

2. Legislative and Policy Updates, Discussion, and Action

Budget Priority Planning

S. Gross introduced the budget planning process, noting that policy items may come up in discussions as well; those can be noted for future action as well. There may be some overlap between budget and policy as well.

There are several key points in time that the LPC should consider. Agency budgets are due to the Department of Administration (DOA) by September 15th. The Governor's budget is released in late January or early February. The Joint Committee on Finance generally holds hearings starting in late March. S. Gross noted that members of the Council and Committees, along with other advocates, generally try to meet with agency heads by the end of June. While there is more frequent contact between the WCMH and the DHS the group should also consider meeting with the Department of Public Instruction (DPI), Department of Children and Families (DCF), and the Department of Corrections (DOC). Other Council committees can also take on advocacy with some of the agencies.

Advocates should work to meet with the Governor's office in November and December. Once the Governor's budget has been released advocates can effort to meet with members of the Joint Committee on Finance. Members of the LPC should also consider the logistics of how various talking points can be prioritized given the limited time often available in meetings with decision makers. J. Odulana suggested that the LPC develop a formal process on how budget priorities are developed.

S. Gross offered that there could be meetings held among the members of the committees to come together in the interim between the LPC meetings. It would be beneficial to discuss and further refine budget priorities at the May LPC meeting in order to bring the document to the WCMH meeting in mid-May.

J. Juhnke provided a briefing on the Children and Youth Committee's (CYC) recent budget planning process. The CYC reviewed recommendations from this past year and motions the CYC has made this year that have gone through the Council. The resulting list was then grouped into categories for which there has been ongoing strategic planning by the CYC.

The initial category is in regards to prevention and early intervention. In this category Infant Mental Health Consultation was a priority identified by the members of the CYC. There is not a specific ask regarding this area at this time, but the CYC plans to hold future discussions to better refine it.

The CYC's second category is access. An area for budget consideration in this category is funding for trauma focused Cognitive Behavioral Therapy (CBT). While there is currently SAMHSA grant funding for this effort through the DCF a funding gap remains. Special Education funding has also not increased in roughly a decade and would be another area for categorical funding proposed for inclusion by the CYC.

K. Knoble-Iverson suggested the group review suicide trends in the Youth Risk Behavior Survey (YRBS), noting an increase in rates of suicide. S. Gross suggested including YRBS data in future discussions of the priorities could be beneficial.

The CYC has also reviewed Mental Health Block Grant (MHBG) related items, including those motions that the CYC brought to the WCMH for approval during the MHBG planning cycle. The items that were proposed were the completion of a mental health gaps analysis. The second proposal was to update Wisconsin statutes that guide the expenditure of the MHBG so that mental health provider training was no longer capped. Other areas being considered by the CYC are restraint and seclusion in schools and school mental health funding.

Members of the LPC suggested that the budget priority area for trauma focused CBT could be a DCF budget request. Special education budget requests would be areas for discussion with the DPI. Infant mental health consultation would likely a budget item for either the DHS or the Office of Children's Mental Health.

M. O'Shasky provided a briefing on recent Criminal Justice Committee (CJC) budget priority discussion. The CYC has reviewed the Committee's guiding principles for consideration. These guiding principles are: system collaboration, reduction of stigma, increasing recovery and resiliency, using best practices and quality improvement to guide the DOC practices, cultural and linguistic responsiveness, suicide prevention, trauma among corrections officers, stakeholder involvement, total health integration and modeling, and utilizing data.

Some criminal justice related areas for potential funding are: jail reentry and diversion, Opening Avenues to Reentry Success (OARS), access to services prior to release, and peer mentors and supports. Peer mentors and peer supports in the criminal justice system has had challenges gaining support in the past, but a pilot program in the DOC has been very successful and achieved good outcomes. The CJC would like to include a budget priority area to expand the peer mentor program in the Wisconsin prison system. Other potential budget priority areas that were noted were expanding the OARS program, programs to work with youth in the juvenile justice system, and Trauma Informed Care crossover training for both providers and clients.

As expertise to address the juvenile justice system continues to be a barrier for the WCMH, the CYC had suggested building a workgroup to develop collaborative policy statements to guide the Council. This group could be comprised of representatives from the CYC, CJC, and the Wisconsin County Health Services Administration (WCHSA). K. Iverson Riggers suggested that the committees each discuss whether there are individuals who are interested and willing to participate on this group. M. Lappen suggested that Mark Mertens from WCHSA may be a good candidate to participate.

M. Herstand suggested two areas for consideration are the second chance legislation and programs for reintegrating offenders.

M. Neubauer joined the meeting at 2:00 pm.

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

S. Gross provided a summary briefing on state legislation that enrolled as well as legislation that failed to move forward. S. Gross provided a briefing on federal funding and increases in spending approved through the Fiscal Year 2018 budget.

Members of the LPC discussed HR 620 regarding amending the Americans with Disabilities Act. The LPC determined that the LPC should forward a motion to the WCMH in opposition to this bill ADA in the event action should be taken on the legislation

K. Knoble-Iverson moved that the LPC recommend that the WCMH oppose HR 620.

K. Kerschensteiner seconded the motion.

Motion carried unanimously.

Members of the LPC discussed the previous WCMH budget priority summary. Regarding a priority to enhance mental health services for the Deaf/Hard of Hearing (D/HOH), legislation was introduced subsequent to advocacy by the D/HOH community however the legislation did not move forward. K. Iverson Riggers noted that the Council has expressed interest in reaching out to D/HOH stakeholder groups to gain their feedback. Members of the LPC will continue to keep this as a priority area.

Regarding a priority to strengthen suicide prevention treatment and support a bill to provide funding for Hopeline was introduced but was not brought to the floor in the Senate. S. Gross noted that there has been indication that Representative Ballweg is considering introducing a package of suicide prevention bills. The LPC could also provide additional support for lethal violence protection legislation.

Regarding a previous budget priority to Increase Medicaid rates for outpatient psychotherapy services action was taken administratively by DHS and prior authorization requirements were also eliminated. M. Lappen recommended an increase in rates for evaluation and management would also be beneficial.

Members of the LPC suggested adding issues around BadgerCare work requirements to future policy issues to address. K. Knoble-Iverson noted the need for additional inpatient behavioral health services in many parts of the state. K. Iverson Riggers suggested that expanded peer run respite be included as a budget item request. S. Gross suggested expanded Individualized Placement and Support (IPS) be included, perhaps as an area for additional MHBG funding.

3. Division of Care and Treatment Services Updates

R. Stachoviak provided a briefing on increased funding through the MHBG. Wisconsin anticipates soon receiving notification on the how the increase in federal funding via the MHBG allocation will impact Wisconsin. States had been told to anticipate a roughly 20% reduction to the MHBG, however congress approved funding at a level greater than in 2017. DHS will review the MHBG budget given this increase and will bring tentative plans back to the WCMH and the Council's committees.

K. Cram introduced and provided a briefing on the recently released DCTS annual report: <https://www.dhs.wisconsin.gov/publications/p00568-17.pdf>. The DCTS is also in the process of developing an online dashboard that will display behavioral health data in greater detail and by county.

4. Agenda Items for May 2018 Committee Meeting

The following future agenda items were noted:

- Continue to review budget priorities
- IMD exclusion proposal for opioid treatment
- MAPP revisions

5. Adjourn

Meeting adjourned at 3:02 pm.