

Halbur, Jennifer

From: Asbjornson, Karen
Sent: Monday, June 07, 2004 9:45 AM
To: Halbur, Jennifer; Halbur, Jennifer
Subject: New Forward Contact Ownership and Assignment

SB 72

Constituent: F. Mortensen (194934)
1335 Summit Ave
Oshkosh, WI 54901-7713

Email: fmort@new.rr.com

Owner: Halbur, Jennifer
Assigned: Halbur, Jennifer
Summary: Mental illness - Better health care systems and training

Issue:
Position:
Status: Pending
Contact Type: E-mail
Description: -----Original Message-----
From: fmort@new.rr.com [mailto:fmort@new.rr.com]
Sent: Friday, June 04, 2004 2:11 PM
To: Rep.Underheim
Cc: Roessler, Carol
Subject: "Better health care systems and training" are needed to address the problem,

Dear Mr. Underheim,

Treating mental illness is a world wide problem that needs further attention. In Wisconsin, we do not require health insurance companies to compensate their clients mental health problems in like fashion as diseases like cancer, diabetes, and cardiovascular problems. It's way past time that this problem is corrected through appropriate legislation regulating health insurance companies doing business in Wisconsin. We need to put treatment of mental health on a par with many of our other states. Why, as chair of the health committee, are you not bringing this up to a vote?

Sincerely,
F, Mortensen, Oshkosh

Study of 14 countries finds mental illness is prevalent

CHICAGO (AP) - Mental illnesses including anxiety disorders and depression are common and under-treated in many developed and developing countries, with the highest rate found in the United States, according to a study of 14 countries.

Based on face-to-face diagnostic surveys in the homes of 60,463 adults, the study found that mental ailments affect more than 10% of people queried in more than half the countries surveyed.

Rates ranged from 26.4% of people in the United States to 8.2% of people in Italy. While Nigerians appeared to have the lowest prevalence of mental illness - 4.7% - the researchers think the actual number is likely much higher since residents of the violence-prone West African nation may be hesitant to confide in strangers.

"In some countries there just is not this tradition of public opinion and speaking your

nd," said Ronald Kessler, a Harvard Medical School researcher who led the study.

The study was done in 2001-2003 in Belgium, China, Colombia, France, Germany, Italy, Japan, Lebanon, Mexico, the Netherlands, Nigeria, Spain, Ukraine and the United States. Results appear in Wednesday's Journal of the American Medical Association.

The most common ailments everywhere except Ukraine were anxiety disorders, which include panic attacks, phobias and post-traumatic stress disorder. In Ukraine, where unemployment is rampant as the country struggles with westernization, mood disorders including depression topped the list, Kessler said.

Questions on some disorders, including bulimia and attention deficit disorders, were not asked in every country, at least partly because they were thought to be relatively uncommon. The researchers said that limitation and relying on people to be truthful about their health may have led to underestimates.

"In every country there is a hidden or unhidden stigma," said co-researcher Dr. Bedirhan Ustun of the World Health Organization. "People are reluctant to admit that they have mental problems."

Kessler said it's plausible that the U.S. rate would be higher because of "higher expectations" of success that can lead to frustration when people can't live up to them.

According to the researchers, "Substantial proportions of serious cases receive no treatment" in every country studied.

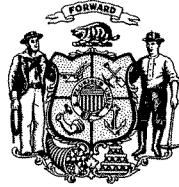
In developed countries, about 36% to 50% of people with serious symptoms were untreated in the previous year. In developing nations, between 76% and 85% of serious cases were untreated.

In all countries, a substantial proportion of people with less severe cases received treatment, suggesting a "misallocation of treatment resources," the researchers said.

Kessler said reasons for under-treatment include lack of access to health care in many regions. Also, Ustun said, in many countries insurance doesn't adequately cover mental health treatment and doctors who fail to detect it are not considered as neglectful as those who fail to diagnose physical ailments such as high blood pressure.

"Better health care systems and training" are needed to address the problem, Ustun said.

--
F. Mortensen,
1335 Summit Avenue, Oshkosh
mailto:fmort@new.rr.com



Carol Roessler
STATE SENATOR

October 28, 2003

John Casper
2785 Leila Mae Lane
Oshkosh, WI 54904

Dear John,

Thank you for your recent contact on Senate Bill 72, relating to increasing the limits for insurance coverage of nervous or mental health disorders or alcoholism or other drug abuse problems.

I do support Senate Bill 72 and believe that mental health should be treated on the same level as a person's physical health. Mental illness is serious. Individuals suffering from mental illness should be afforded medical coverage that sufficiently meets their needs. The coverage requirements currently set forth in statute were intended to establish minimum coverage amounts, however, they have been viewed as maximums.

Senate Bill 72 increases the required coverage amounts on the basis of the change in the consumer price index for medical services since the coverage amounts were enacted. I view this as fair and not exorbitant. Coverage for inpatient services has not been increased since 1985 and outpatient since 1992. The current level of coverage required has not kept pace with the cost to provide mental health services.

Ensuring that individuals suffering from mental illness get the treatment they need is a positive for the economy.

- **A National Institute of Mental Health sponsored study revealed that mental and addictive disorders cost \$300 billion annually: productivity losses of \$150 billion, health care costs of \$70 billion, and other costs (such as criminal justice) of \$80 billion. The MIT Sloan School of Management found in 1995 that clinical depression costs American businesses \$28.8 billion a year in lost productivity and absenteeism.**
- **Businesses that provide insurance coverage of mental illnesses have found an unexpected benefit in reduced sick leave for physical ailments. Increased productivity and fewer sick days have resulted in a net positive for these businesses.**

Senate Bill 72 passed the Senate Health Committee 5-4 on September 4, 2003. I do very much understand your concerns relating to the skyrocketing cost of health care. I recognize the severity of this issue and the negative affects it is having on businesses, small ones in particular. As you well know, the increase in health care costs is a comprehensive problem that needs to be addressed on many fronts. An aging population, increased use of technology, insufficient Medicare reimbursement for services, duplication of services provided (hospital construction), lack of consumer choice and provider accountability, etc. are all factors contributing to the cost of health care.

While there is no silver bullet solution to this problem, my colleagues and I are proactively exploring options to help alleviate some of the cost burden. For example, I am currently working with a work group representing businesses, hospitals, and health plans. This group will have an initiative ready in at most two months to address some of the issues surrounding health care costs. In short, we are hoping to help improve accountability and competition among service providers as well as increase consumer choice.

The introduction of Senate Bill 204 is a proactive effort to help businesses better afford quality health care. This bill authorizes a health benefit purchasing cooperative pilot project. The overriding goals are to stabilize insurance rates, improve health care delivery in rural Wisconsin and, most importantly, provide affordable, quality health care coverage to farmers and other small employers who have little or no access to health insurance. I have included a copy of SB 204 for your review.

I encourage you to bring any suggestions forward that you feel may help to ease the burden of health care costs for small businesses.

While our views on SB 72 differ, I respect your position and will keep you up to date on any further action.

Sincerely,



CAROL ROESSLER
State Senator

Asbjornson, Karen

From: John Casper [john@oshkoshchamber.com]

Sent: Monday, October 20, 2003 1:48 PM

To: Senator Carol Roessler

Subject: SB 72 - Mental Health Mandate

Dear Senator Roessler:

On behalf of the Oshkosh Chamber of Commerce, I am writing in opposition to SB 72 - Mental Health Mandate.

As you know, rising health care costs undermine the ability of Wisconsin companies to offer health care benefits and, significantly, impede their ability to create and retain good-paying jobs in Wisconsin. Employers are challenged, especially in this economy, to provide competitive wages and to continue to provide health insurance to their employees.

According to Insurance Commissioner Gomez, SB 72 "will add approximately \$9.2 million to \$30.8 million per year to premium costs for group insurance consumers, borne mostly by small businesses." Employers response to rising health care cost has been to pass it on to their employees through increased co-pays and co-insurance levels and higher deductible insurance plans.

While there may be the very best of intentions in SB 72, the bottomline is the new mandate will cause a greater economic burden on employees and may actually lead small employers to discontinuing health insurance to their employees. Should that be the result, what has the Senate gained?

We ask that you oppose SB 72.

Sincerely,

John Casper
2785 Leila Mae Ln
Oshkosh, WI 54904

Contact Detail

Casper, John
120 Jackson St
Oshkosh, WI 54901-4714

Office: (920) 303-2266
Fax #: (920) 303-2263
Home: (920) 235-1476
Office: (920) 303-2265

Email - Work: john@oshkoshchamber.com

Yes

Contact Date: 10/20/2003

Contact Type: E-mail

Summary: SB 72 mental health mandate - oppose

Issue:

Position:

Description: Jennifer - Fyi - I printed for CR to read

Response (C)

-----Original Message-----

From: John Casper [mailto:john@oshkoshchamber.com]
Sent: Monday, October 20, 2003 1:48 PM
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Sincerely,

John Casper
2785 Leila Mae Ln
Oshkosh, WI 54904

Status: Pending

Closed Date:

Assigned: Halbur, Jennifer

Owner: Halbur, Jennifer

Note **Note Date:**

Summary:

Contact Type:

Description:

Halbur, Jennifer

From: on behalf of Roessler, Carol
To: jimneumann@rbroyal.com
Subject: SB 72 End of Session Update

April 8, 2004

Dear Jim,

Now that the 2003-2004 legislative session is over I am providing you with an update on Senate Bill 72, relating to: increasing the limits for insurance coverage of nervous or mental health disorders

SB 72 was introduced and referred to the Senate Committee on Health March 13, 2003. A public hearing was held July 22, 2003. The Committee passed SB 72 on September 15, 2004, with a 5-4 vote. No further action was taken.

I have included the bill history for you to review, which details the movement of this bill through the Legislature. This information is also available on the Wisconsin Legislature online database named Folio, accessible by visiting <http://folio.legis.state.wi.us>

Thank you for contacting me on this issue and I look forward to hearing your comments, questions, or concerns in the future.

Sincerely,

Carol Roessler

Constituent contacts on
Senate Bill 72.

Neumann, Jim
1350 S Hickory St
Fond Du Lac, WI 54937-5600

Home: (920) 921-1550

Email: jimneumann@rbroyal.com

Contact Date: 11/03/2003

Contact Type: Email

Summary: SB 72

Issue:

Position:

Description: -----Original Message-----

From: Neumann, Jim [mailto:jimneumann@rbroyal.com]
Sent: Friday, October 31, 2003 1:31 PM
To: State Senator Carol Roessler (E-mail)
Subject: Response to Senate Bill 72

Dear Carol,

You are right, we disagree on SB 72. I doubt that anything I say or write will change your mind.

RB Royal Industries is basically a small Wisconsin manufacturer. Without SB72, we are currently anticipating group health care costs rising from an estimated \$900,000 in 2003 to \$1,175,000.00 in 2004! By the way, we are only a 125 person, \$16,000,000 company! RB is also a company that has been actively working to control rising group health care costs for the last decade! Carol, do you consider this SINGLE YEAR increase in our group health care costs "fair and not exorbitant"? Many other businesses in this state are facing worse situations than ours.

RB Royal has been working creatively to develop programs and raise awareness within our company to control or, at best lessen the unrelenting higher cost of providing adequate health care coverage for our employees. Year after year, costs spiral upward. We have recently invested in a series of all-employee meetings to generate ideas and share our health care cost experience with them so they know what it will take to continue to offer the coverage we have provided thus far. We have some tough choices regardless of SB 72! And that is only to get us through 2004! What waits for us in 2005 and beyond? The statistics are frightening.

Incidentally, RB Royal offers our employees an EMPLOYEE ASSISTANCE PLAN. It allows for confidential counseling and assessments for not only our employees but also their family members. It covers substance abuse, mental health, family counseling and financial planning to name a few.

Despite SB 72 and other increasing costs, many over which we also have no control, our customers are asking us to hold or lower prices to them! Some of our larger customers have field offices in Asia to find lower cost sources of supply. No one here seems to care that these countries support unfair competition and they don't really care if they usurp domestic suppliers - suppliers like RB Royal! The USA has lost 2-3 million manufacturing jobs since 1998 due to foreign competition. Such legislation heaps more burden on the backs of already overburdened companies who are finding it increasingly hard to compete. That is not a "positive for the economy".

This legislation represents, in my opinion, treating the symptom - not treating the disease.

We have become a nation of victims with little or no personal accountability for our actions. Carol, we need leaders to help Americans regain personal accountability or we will continue to decline.

I wish you success with SB 204.

Sincerely,

Jim

Jim Neumann
President
RB Royal Industries, Inc.
(920) 921-1550 ext. 4426
www.rbroyal.com

Status: Done

Closed Date: 11/04/2003

Assigned: Halbur, Jennifer

Owner: Halbur, Jennifer

Note **Note Date:** 11/04/2003

Summary: JH shared e-mail with CR

Contact Type:

Description: Jim's e-mail is in response to a letter CR sent him (responding to his opposition to SB 72). I showed CR a copy.

Note **Note Date:** 04/08/2004

Summary: JH sent an update e-mail

Contact Type:

Description: April 8, 2004

File: S:\DOCS\Jennifer\End of 03 session update ltrs\4-8-04 sb 72 ment health ins cov e mail.doc

Dear Jim,

Now that the 2003-2004 legislative session is over I am providing you with an update on Senate Bill 72, relating to: increasing the limits for insurance coverage of nervous or mental health disorders

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Thank you for contacting me on this issue and I look forward to hearing your comments, questions, or concerns in the future.

Sincerely,

Carol Roessler



Carol Roessler
STATE SENATOR

October 28, 2003

Jim Neumann, President
RB Royal Industries, Inc.
PO Box 1168
Fond du Lac, WI 54936-1168

Dear Jim,

Thank you for your recent contact on Senate Bill 72, relating to increasing the limits for insurance coverage of nervous or mental health disorders or alcoholism or other drug abuse problems.

I do support Senate Bill 72 and believe that mental health should be treated on the same level as a person's physical health. Mental illness is serious. Individuals suffering from mental illness should be afforded medical coverage that sufficiently meets their needs. The coverage requirements currently set forth in statute were intended to establish minimum coverage amounts, however, they have been viewed as maximums.

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I encourage you to bring any suggestions forward that you feel may help to ease the burden of health care costs for small businesses.

While our views on SB 72 differ, I respect your position and will keep you up to date on any further action.

Sincerely,



CAROL ROESSLER
State Senator

Halbur, Jennifer

From: Halbur, Jennifer
Sent: Thursday, October 09, 2003 11:11 AM
To: Halbur, Jennifer
Subject: FW: here we go...

-----Original Message-----

From: Neumann, Jim [mailto:jimneumann@rbroyal.com]
Sent: Thursday, October 09, 2003 9:31 AM
To: State Senator Carol Roessler (E-mail); John Townsend (E-mail)
Subject: here we go...

Dear Carol and John,

I think it was just yesterday or the day before when I sent you the brief article on California and their health care time bomb.

This came across my desk this morning from WMC:

Commissioner of Insurance Concludes New Mental Health Mandate Will Drive Up Health Care Costs, Hurt Access to Insurance
SB 72 mandates all fully-insured employers to dramatically increase the coverage limits under group health insurance policies for treatment for nervous and mental disorders and for alcohol and other drug abuse problems. State Commissioner of Insurance Jorge Gomez has concluded this new mandate will increase the cost of health care insurance in Wisconsin and will make it more difficult for workers and businesses to afford health care insurance.

Commissioner Gomez accurately observes "[t]raditionally, as the number of benefit mandates increase the cost of coverage rises, and as costs rise, fewer and fewer individual and businesses can afford to insure." Regarding SB 72, specifically, Commissioner Gomez concludes:

1. "The mandate will add approximately \$9.2 million to \$30.8 million per year to premium costs for group insurance consumers, borne mostly by small businesses." [Emphasis added]
2. ". . . it is reasonable to assume that an increase in premium costs to small and medium-sized employers certainly will have a negative impact on the number of people insured in Wisconsin."

This new mandate will increase your health care costs and will make it harder for you to afford this valuable benefit.

Action Requested: Please contact your legislators and express your strong opposition to SB 72, which will drive up health care costs in Wisconsin.

Resources:

Commissioner Gomez' report Staff Contact: R.J. Pirlot at 608-258-3400.

Jim Neumann
President
RB Royal Industries, Inc.
(920) 921-1550 ext. 4426
www.rbroyal.com

is what we have
what we need.

Halbur, Jennifer

From: on behalf of Roessler, Carol
To: fmort@new.rr.com
Subject: End of Session Update: SB 72 and SB 518

April 8, 2004

Dear Frank,

Thank you for your support for Senate Bill 72 and the Substance Abuse Offenders Accountability and Public Safety Act.

Senate Bill 518, relating to grants to counties for providing alternatives to prosecution and incarceration for persons who abuse alcohol or other drugs and making an appropriation, passed the State Senate 33-0; however, was not scheduled in the State Assembly before adjournment of this legislative session.

I am planning on re-introducing this bill next session. This bill will provide treatment to non-violent offenders who commit drug and alcohol-related crimes and, in turn, stop the revolving door into our jails and prisons, increase accountability of drug and alcohol abusing offenders, reduce recidivism, increase public safety, reduce the number of victims, and lower costs for prisons. This much-needed legislation will not only address the overcrowding problem in our jails and prisons, but will also provide a cheaper and more effective alternative to incarceration; thus, creating safer communities while saving taxpayers money.

SB 72, relating to increasing the limits for insurance coverage of nervous or mental health disorders was introduced and referred to the Senate Committee on Health March 13, 2003. A public hearing was held July 22, 2003. The Committee passed SB 72 on September 15, 2004, with a 5-4 vote. No further action was taken.

I have included links to the bill histories for you to review, which detail the movement of these bills through the Legislature:

<http://www.legis.state.wi.us/2003/data/SB72hst.html>

<http://www.legis.state.wi.us/2003/data/SB518hst.html>

Thank you for contacting me on these issues and I look forward to hearing your comments, questions, or concerns in the future.

Sincerely,

CAROL ROESSLER

Mortensen, F.
1335 Summit Ave
Oshkosh, WI 54901-7713

Email: fmort@new.rr.com

Contact Date: 03/09/2004

Contact Type: E-mail

Summary: Substance abuse bill and mental health

Issue:

Position:

Description: Hi Sara and Jennifer - I assigned to each of you... - K

-----Original Message-----

From: fmort@new.rr.com [mailto:fmort@new.rr.com]

Sent: Tuesday, March 09, 2004 2:52 PM

To: rep.underheim@legis.state.wi.us

Cc: Carol.Roessler@legis.state.wi.us

Subject: More Mentally Ill Incarcerated

3/9/2004

Dear Mr. Underheim,

I have written you many times in the past twelve months concerning the treatment and care of the mentally ill in Wisconsin. Senator Roessler has taken a positive step forward with her introduction of a bill that would address many of the root causes of alcohol and drug abuse. It recognizes that substance abuse problems are frequently symptomatic of underlying mental health problems.

Please, follow Carol's lead and send your bill to the legislature mandating health insurance companies to provide their subscribers with the same dollar coverage for their mental health care as they receive for their physical health care. The present system is an injustice to health insurance premium payers and has gone on for too long.

It is the right thing to do for the mentally ill and for the taxpayers. Early intervention into those suffering from mental health problems will end misery and suffering for both penitent and family. And it will cut down crime with its attendant high cost of and incarceration, which is ultimately born by the taxpayer.

Regards,
F. Mortensen

PS Note attached article.

More Mentally Ill Incarcerated
Commentary
Bernice Powell Jackson
Sacramento Observer
3-9-4

Contact Detail

In the 19th century, many mentally ill patients were locked up in their homes by families embarrassed by their conduct and ignorant about the illness. But with more medical knowledge about the nature of mental illness, this was seen as barbaric and mental hospitals were created to care for these patients.

As problems surfaced with these mental hospitals in the latter half of the 20th century, many were closed with the understanding that community treatment facilities would be put in place for their former patients. But these community-based services were never adequately funded so today instead of locking our mentally ill up in our homes, it seems we have opted to lock them in prisons and jails.

Indeed, according to a recent study by Human Rights Watch, one in six U.S. prisoners is mentally ill. In fact, there are three times more mentally ill persons in U.S. prisons than in mental health hospitals. And those numbers do not include mentally ill persons who are in jails or juvenile detention facilities. "Prisons have become the nation's primary mental health facilities," said Jamie Fellner, director of Human Rights Watch's U.S. program. They estimate that there are between 200,000 and 300,000 mentally ill prisoners in U.S. prisons. Moreover, the rate of mental illness in our nation's prison population is three times higher than in the general population.

The fact that so many mentally ill persons are incarcerated can be traced directly to our underfunded, disorganized and fragmented community mental health services. When state and local governments shut down the large mental health facilities in the latter part of the 20th century, many people with mental illness, especially those with substance abuse problems and without homes or health insurance were left without any mental health services. "Unless you are wealthy, it can be next to impossible to receive mental health services in the community," said Fellner, adding, "many prisoners might never have ended up behind bars if publicly funded treatment had been available." An advisory commission appointed by President Bush recently reported that the U.S. mental health system is "in shambles."

The Human Rights Watch report is based on two years of research and hundreds of interviews with prisoners, corrections officials, mental health experts and attorneys. It tells of prisoners who rant, rave, babble incoherently, talk with invisible companions, beat their heads against cell walls, cover themselves with feces, mutilate themselves and attempt suicide. In many instances these prisoners find it difficult, if not impossible, to follow prison rules and then are punished for their behavior.

Moreover, corrections officials are being required to provide mental health facilities which they just are not equipped to do. Many patients need medication on a regular basis, which prison hospitals or guards are not able to provide, thus ensuring that mentally ill prisoners will deteriorate while they are incarcerated. Although many state prison mental health services have improved over the past two decades, the alarming rise in the number of mentally ill prisoners at the same time as decreasing state budgets has meant that the much-needed services for these prisoners often have not been available. As a result, untrained staff have sometimes escalated confrontations with mentally ill prisoners and these prisoners can accumulate extensive disciplinary records resulting in them being put into isolated, windowless segregation cells. In other instances, other prisoners have abused or attacked them.

The treatment of mentally ill prisoners is a part of international human rights laws and standards. Thus, Human Rights Watch points out that if the U.S. abided by such standards, the plight of American mentally ill prisoners would improve dramatically. In addition, such prisoners are protected under the Eighth Amendment to the U.S. Constitution, which prohibits cruel and unusual punishment.

Now federal legislation is being proposed by Senator Mike DeWine (R-OH) and Congressman Ted Strickland (D-OH) which would provide federal grants to divert mentally ill offenders into treatment programs rather than jail or prison and to improve the quality of mental health services inside our prisons and jails. Called the Mentally Ill Offender Treatment and Crime Reduction Act, it begins to address some of the problems highlighted in the Human Rights Watch report.

Our nation's prisons were never designed to be our primary mental health facility. Unless we do something about this, we are no better than our 19th century ancestors who locked up their mentally ill in their attics and basements and threw away the key. In fact, we are worse because we better understand the nature of mental illness. We are worse because we have chosen to incarcerate our mentally ill and thereby don't have to care for these mentally ill persons ourselves.

--
F. Mortensen,
1335 Summit Avenue, Oshkosh

mailto:fmort@new.rr.com

Status: Pending

Closed Date:

Assigned: Halbur, Jennifer

Owner: Seaquist, Sara

Note **Note Date:** 04/08/2004

Summary: JH and SS sent end of session update

Contact Type:

Description: April 8, 2004

File: S:\DOCS\Jennifer\End of 03 session update ltrs\4-8-04 mortensen update sb 518 sb 72.doc

Dear Frank,

Thank you for your support for Senate Bill 72 and the Substance Abuse Offenders Accountability and Public Safety Act.

Senate Bill 518, relating to grants to counties for providing alternatives to prosecution and incarceration for persons who abuse alcohol or other drugs and making an appropriation, passed the State Senate 33-0; however, was not scheduled in the State Assembly before adjournment of this legislative session.

I am planning on re-introducing this bill next session. This bill will provide treatment to non-violent offenders who commit drug and alcohol-related crimes and, in turn, stop the revolving door into our jails and prisons, increase accountability of drug and alcohol abusing offenders, reduce recidivism, increase public safety, reduce the number of victims, and lower costs for prisons. This much-needed legislation will not only address the overcrowding problem in our jails and prisons, but will also provide a cheaper and more effective alternative to incarceration; thus, creating safer communities while saving taxpayers money.

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<http://www.legis.state.wi.us/2003/data/SB518hst.html>

Thank you for contacting me on these issues and I look forward to hearing your comments, questions, or concerns in the future.

Sincerely,

CAROL ROESSLER

SB 72

E-mail
Sent to
F. Mortensen

October 28, 2003

Dear F. Mortensen,

Thank you for your contact on the Accountability and Public Safety Act and Mental Health Parity.

As you know, the Addicted Offenders Accountability and Public Safety Act creates a voluntary grant program for pilot counties to establish or expand programs offering drug and alcohol treatment options for non-violent offenders. The goal of this legislation is to lower inmate populations, reduce recidivism, lower the number of victims of crime, and increase public safety.

I share your concerns relating to mental health insurance coverage. As you know, the current level of coverage required has not kept pace with the cost to provide mental health services. The coverage for inpatient services has not been increased since 1985 and outpatient since 1992.

In March of this year, the Joint Legislative Council Special Committee on Mental Health Parity issued recommendations on this issue. As a result, the Joint Legislative Council introduced Senate Bill 72. This bill increases the required coverage amounts on the basis of the change in the consumer price index for medical services since the coverage amounts were enacted. I have enclosed a copy of the bill for your review.

Senate Bill 72 passed the Senate Committee on Health, Children, Families, Aging and Long Term Care, which I chair, 5-4. The bill is now available to be scheduled for a debate before the full Senate.

Thank you again for sharing your views on these issues. I will keep you updated on the progress of the Treatment Instead of Prison legislation and Senate Bill 72. Please feel free to contact me with any further questions.

Sincerely,

CAROL ROESSLER

Contact Detail

Mortensen, F.
1335 Summit Ave
Oshkosh, WI 54901-7713

Email: fmort@new.rr.com

Contact Date: 10/20/2003

Contact Type: E-mail

Summary: Mental health parity and TIP

Issue:

Position:

Description: -----Original Message-----

From: fmort@new.rr.com [mailto:fmort@new.rr.com]

Sent: Monday, October 20, 2003 9:44 AM

To: Roessler, Carol

Subject: RE: State must come to grips with prison problem

Dear Senator Roessler,

Sorry for the delay in my reply, I just found your email in my In/Out box. Guess I should deal with issues immediately, otherwise they are forgotten.

Regards,

F. Mortensen,
1335 Summit Avenue, Oshkosh
mailto:fmort@new.rr.com

Thank you for your email.

Due to the volume of emails I receive, I ask that all emails include a home address. This will ensure that my constituents receive the highest priority. Your assistance is greatly appreciated. I look forward to your response.

Sincerely,

CAROL ROESSLER

State Senator

-----Original Message-----

From: fmort@new.rr.com [mailto:fmort@new.rr.com]

Sent: Friday, September 26, 2003 4:05 PM

To: Sen.Roessler@legis.state.wi.us

Contact Detail

Cc: fmort@new.rr.com

Subject: State must come to grips with prison problem

Dear Senator Roessler:

I am encouraged by your proactive position on the prison problem within our state. For far too long we have neglected the root causes of crime. Your bill to deal with the tens of thousands of persons in Wisconsin's prisons, because of drug/alcohol problems, is commendable. I agree that the real criminals need to be locked up to protect our society. But, we've been spending far too much money on incarceration and we are not successfully helping rehabilitate 2/3 of the inmates there because of substance issues.

Personally, I believe that the drug/alcohol problem is the tip of the iceberg of treatable mental health problems. Early intervention is very effective, but many times not an option because of meager mental health insurance benefits. Most states require the Health Insurance Companies doing business with their residents offer equal mental health insurance coverage for policy holders. Wisconsin does not currently have a law requiring equal mental/physical health coverage for the insured. There goes early intervention! This would not cost the state a penny and would increase the cost to the insurance companies by less than 1%. A small price to pay for helping the mentally ill and to help save the taxpayer money currently spent unnecessarily for many on incarceration.

This legislation has languished in Gregg Underheim's Health committee for years. Please talk with Greg and urge him to move this initiative to the floor for a vote. I have written Mr. Underheim, but he doesn't reply to my emails.

You have my support on this issue! Bless you Carol.

Regards,
F. Mortensen, Oshkosh

Attachments:

- (1) My July 6 email to Mr. Underheim requesting a response to my Easter email.
- (2) My Easter email to him
- (3) A copy of your commentary in today's Northwestern.

July 6, 2003

Mr. Underheim,

I never received an acknowledgment nor a reply to my April 20 email.

Sincerely,
F. Mortensen, Oshkosh

Date: Sun, 20 Apr 2003 21:56:57 -0500
To: Greg
From: fmort@new.rr.com
Subject: BRAIN DISEASE, A PERSONAL JOURNEY

Easter Sunday
April 20, 2003

Dear Mr. Underheim,

For many years the Committee on Health in the Wisconsin State Assembly has debated legislation requiring Health Insurance Corporations to provide equal benefits for the treatment of mental health problems. Legislation where insurance companies that provide health insurance would have to provide the same benefits across the board, whether someone is being treated for cancer or for depression.

What is the root cause of most mental illnesses? It is physical problem within the brain. It is a brain disease. What are the implications for its treatment? An appropriate change in chemistry of brain for the patient administered by a doctor with appropriate medication(s). Self treatment though the use of drugs/alcohol, while very popular, is neither prudent nor wise.

Attached is an article by Sheldon Drobny about his personal experience with depression. Perhaps reading his account and insight might help you to see mental illness in a new light. While I do not agree with his viewpoint of free will, ie., I think 'mentally healthy' persons make choices that they are responsible and accountable. I do not deny nor diminish the importance of will power in any medical treatment or in living life.

Those who have mental illnesses pay the same amount in insurance premiums as people who don't have mental illness. They want equal treatment and equal benefits just like their counterparts get in the 30 other states that have passed this legislation. They pay for it, they deserve it, and the additional cost would be less than 1%* of the present health insurance cost. And the cost of untreated mental illnesses is over \$100,000,000,000 a year.

I look forward to your reply.

Regards,
F. Mortensen, Oshkosh

Halbur, Jennifer

From: Seaquist, Sara
Sent: Tuesday, October 21, 2003 1:33 PM
To: Halbur, Jennifer
Subject: for letter to F Mortensen

Thank you for contacting me on the Accountability and Public Safety Act and...

The Addicted Offenders Accountability and Public Safety Act creates a voluntary grant program for pilot counties to establish or expand programs offering drug and alcohol treatment options for non-violent offenders. The goal of this legislation is to lower inmate populations, reduce recidivism, lower the number of victims of crime, and increase public safety. Thank you for sharing your views on this proposal.

I will keep you updated on the progress of the Treatment Instead of Prison legislation. Please feel free to contact me with any further questions.

Halbur, Jennifer

From: Seaquist, Sara
Sent: Tuesday, October 21, 2003 2:10 PM
To: Halbur, Jennifer
Subject: one little change to F Mortensen ltr...

The beginning of the second paragraph should say, "As you know,..."

Thanks!

Halbur, Jennifer

From: on behalf of Roessler, Carol
To: Brady Onsager
Subject: Senate Bill 72: End of Session Update

April 8, 2004

Dear Brady,

Now that the 2003-2004 legislative session is over I am providing you with an update on Senate Bill 72, relating to: increasing the limits for insurance coverage of nervous or mental health disorders.

SB 72 was introduced and referred to the Senate Committee on Health March 13, 2003. A public hearing was held July 22, 2003. The Committee passed SB 72 on September 15, 2004, with a 5-4 vote. No further action was taken.

I have included a link to the bill history for you to review, which details the movement of this bill through the Legislature: www.legis.state.wi.us/2003/data/SB72hst.html

Thank you for contacting me on this issue and I look forward to hearing your comments, questions, or concerns in the future.

Sincerely,

Carol Roessler