

2019 Assembly Bill 650 (LRB -2886)

An Act to create 46.482, 49.45 (30j) and 49.46 (2) (b) 14p. of the statutes; relating to: reimbursement for peer recovery coach services under the Medical Assistance program and coordination and continuation of care following an overdose. (FE)

2019

12-05.	A.	Introduced by Representatives Nygren, Novak, Born, Snyder, Petersen, Kitchens, Quinn, Felzkowski, Edming, Kulp, Magnafici, Plumer, Horlacher, Rohrkaste, Knodl, Tusler, Dittrich, Tranel, Jagler, Spiros, Mursau, Ramthun, Billings and Bowen ; cosponsored by Senators Testin, Olsen and Wanggaard .	417
12-05.	A.	Read first time and referred to Committee on Substance Abuse and Prevention	418

2020

01-07.	A.	Representative Stuck added as a coauthor	443
01-08.	A.	Public hearing held	
01-13.	A.	Assembly Amendment 1 offered by Representative Nygren (LRB a0821)	452
01-15.	A.	Executive action taken	
01-16.	A.	Fiscal estimate received	
01-16.	A.	Report Assembly Amendment 1 adoption recommended by Committee on Substance Abuse and Prevention, Ayes 9, Noes 0	478
01-16.	A.	Report passage as amended recommended by Committee on Substance Abuse and Prevention, Ayes 9, Noes 0	478
01-16.	A.	Referred to committee on Rules	478
01-16.	A.	Placed on calendar 1-21-2020 by Committee on Rules	
01-16.	A.	Representative Petryk added as a coauthor	479
01-21.	A.	Read a second time	494
01-21.	A.	Assembly Amendment 1 adopted	494
01-21.	A.	Ordered to a third reading	494
01-21.	A.	Rules suspended	494
01-21.	A.	Read a third time and passed	494
01-21.	A.	Ordered immediately messaged	494
01-22.	S.	Received from Assembly	604
01-27.	S.	Read first time and referred to committee on Senate Organization	616
01-27.	S.	Available for scheduling	
02-14.	S.	Public hearing requirement waived by committee on Senate Organization, pursuant to Senate Rule 18 (1m), Ayes 5, Noes 0	678
02-14.	S.	Placed on calendar 2-19-2020 pursuant to Senate Rule 18(1)	679
02-19.	S.	Read a second time	
02-19.	S.	Ordered to a third reading	
02-19.	S.	Rules suspended	
02-19.	S.	Read a third time and concurred in	
02-19.	S.	Ordered immediately messaged	
02-20.	A.	Received from Senate concurred in	639

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Adopted Documents

Original Engrossed Substitute Amdt 19 2886, 1

Amendments: None or Listed below.

Am 1

Corrections: None or Listed by date below.

CCC to AA1 to AB650 2/24/20

Topic: Same as relating clause or Indicated below.

2/24/20

Date

Enrolling Drafter



2019 ASSEMBLY BILL 650

December 5, 2019 - Introduced by Representatives NYGREN, NOVAK, BORN, SNYDER, PETERSEN, KITCHENS, QUINN, FELZKOWSKI, EDMING, KULP, MAGNAFICI, PLUMER, HORLACHER, ROHRKASTE, KNODL, TUSLER, DITTRICH, TRANEL, JAGLER, SPIROS, MURSAU, RAMTHUN, BILLINGS and BOWEN, cosponsored by Senators TESTIN, OLSEN and WANGGAARD. Referred to Committee on Substance Abuse and Prevention.

1 AN ACT *to create* 46.482, 49.45 (30j) and 49.46 (2) (b) 14p. of the statutes;
2 relating to: reimbursement for peer recovery coach services under the Medical
3 Assistance program and coordination and continuation of care following an
4 overdose. *INS ART 2.*

AA1
1.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services to provide as a benefit and reimburse peer recovery coach services under the Medical Assistance program and to establish and maintain a program to coordinate and continue care following a substance use overdose. A “peer recovery coach,” as defined in the bill, is an individual who practices in the recovery field and who provides support and assistance to individuals who are in treatment or recovery from mental illness or a substance use disorder.

The bill requires DHS to reimburse under the Medical Assistance program a peer recovery coach service that meets all of the following criteria: the recipient of the peer recovery coach service is in treatment for or recovery from mental illness or a substance use disorder; the peer recovery coach provides the service under the supervision of a peer supervisor and in coordination and accordance with the recipient’s individual treatment plan and treatment goals; and the peer recovery coach completes the training specified in the bill. The bill requires DHS to request any federal approval necessary to implement the reimbursement.

The bill also requires DHS to establish and maintain a program to facilitate overdose treatment providers to do all of the following: use peer recovery coaches to

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encourage individuals to seek treatment for a substance use disorder following an overdose, provide access to medications to reverse an overdose, coordinate and continue care and treatment of individuals after an overdose, provide education to patients and families on preventing and reversing an overdose, provide follow-up services for patients after an overdose to ensure continued recovery and connection to support services, and collect and evaluate outcomes data on patients receiving peer recovery coach services and coordination and continuation of care services. The bill allows DHS to establish policies and procedures to provide guidance on the provision of medications that reverse an overdose or treat a substance use disorder or on continuation of, or referral to, evidence-based treatment services for patients with a substance use disorder who have experienced an overdose. DHS is required under the bill to seek any funding available from the federal government, including grant funding under the federal SUPPORT for Patients and Communities Act, to establish and maintain the program or establish the policies and procedures.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 46.482 of the statutes is created to read:

2 **46.482 Coordination of care in substance use overdose. (1) DEFINITIONS.**

3 In this section:

4 (a) "Overdose treatment provider" means an entity, including an emergency
5 department of a hospital, that offers treatment or other services to individuals in
6 response to or following a substance use overdose.

7 (b) "Peer recovery coach" means an individual described under s. 49.45 (30j) (a) ^{f 2.}
8 and who has completed the training requirements specified under s. 49.45 (30j) (b)
9 4.

10 **(2)** The department shall establish and maintain a program to facilitate
11 overdose treatment providers to do all of the following:

12 (a) Use peer recovery coaches to encourage individuals to seek treatment for
13 a substance use disorder following an overdose.

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1 (b) Provide access to medications to reverse overdose, as appropriate.

2 (c) Coordinate and continue care and treatment of individuals after an
3 overdose, including through referrals to treatment services, to peer support, to
4 community organizations that support recovery, to education, training, and
5 employment services, to housing services, and to child welfare agencies. An overdose
6 treatment provider may coordinate and continue care and treatment under this
7 paragraph by establishing an integrated model of care for patients who have
8 experienced an overdose that may include assessment, follow-up services, and
9 transportation to and from treatment.

10 (d) Provide education to patients and families on preventing and reversing an
11 overdose.

12 (e) Provide follow-up services for patients after overdose to ensure continued
13 recovery and connection to support services.

14 (f) Collect and evaluate data on the outcomes of patients receiving peer
15 recovery coach services and coordination and continuation of care services under this
16 section.

17 **(3)** The department may establish policies and procedures to provide guidance
18 on any of the following:

19 (a) The provision of medications that reverse an overdose and any other
20 medications or biological products used to treat a substance use disorder.

21 (b) Continuation of, or referral to, evidence-based treatment services for
22 patients with a substance use disorder who have experienced an overdose, for the
23 purpose of supporting long-term treatment and preventing relapse or future
24 overdoses.

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SECTION 1

1 (4) The department shall seek any funding available from the federal
 2 government, including grant funding under 42 USC 290dd-4, to establish and
 3 maintain the program under sub. (2) or establish the policies and procedures under
 4 sub. (3). The department may satisfy the requirement under sub. (2) by encouraging
 5 or facilitating or providing funding to programs operated by nongovernmental
 6 overdose treatment providers.

7 **SECTION 2.** 49.45 (30j) of the statutes is created to read:

8 49.45 (30j) REIMBURSEMENT FOR PEER RECOVERY COACH SERVICES. (a) In this
 9 subsection, "peer recovery coach" means an individual who practices in the recovery
 10 field and who provides support and assistance to individuals who are in treatment
 11 or recovery from mental illness or a substance use disorder.

12 (b) The department shall reimburse under the Medical Assistance program
 13 under this subchapter any service provided by a peer recovery coach if the service
 14 satisfies all of the following conditions:

15 1. The recipient of the service provided by a peer recovery coach is in treatment
 16 for or recovery from mental illness or a substance use disorder.

17 2. The peer recovery coach provides the service under the supervision of a peer
 18 supervisor ^{or competent mental health professional} who has been trained in all of the following subjects:

19 a. Understanding the peer role in recovery and supporting clear and
 20 meaningful peer roles.

21 b. Recovery orientation.

22 c. Model principles of recovery.

23 d. Training of peer recovery coaches.

24 e. Professional health system navigation.

25 f. Applicable laws and policies.

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- 1 g. Community resources.
- 2 h. Quality, strength-based, and person-centered supervision.
- 3 i. Identification and evaluation of peer competencies.
- 4 j. Confidentiality, ethics, and professional boundaries.
- 5 k. Antidiscrimination in employment, staff development, and employment
- 6 practices.
- 7 L. Peer-delivered services advocacy.

8 3. The peer recovery coach provides the service in coordination with the
 9 Medical Assistance recipient's individual treatment plan and in accordance with the
 10 recipient's individual treatment goals.

11 4. The peer recovery coach providing the service has completed all of the
 12 following training requirements:

13 a. Forty ~~six~~ ^{INS AA 1} hours of training in advocacy, mentoring and education, recovery
 14 and wellness support, and ethical responsibility that includes training of at least 10
 15 hours in advocacy, at least 10 hours in mentoring and education, at least 10 hours
 16 in recovery and wellness support, and at least ~~10~~ ¹⁰ hours in ethical responsibility. AA 8.

17 b. Twenty ~~five~~ ^{four} hours of supervised volunteer or paid work experience involving
 18 advocacy, mentoring and education, recovery and wellness support, ethical
 19 responsibility, or a combination of those areas.

20 c. Five hundred hours of volunteer or paid work experience involving advocacy,
 21 mentoring and education, recovery and wellness support, ethical responsibility, or
 22 a combination of those areas.

23 (c) The department shall certify under Medical Assistance peer recovery
 24 coaches to provide services in accordance with this subsection.

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SECTION 2

1 (d) The department shall request from the federal department of health and
2 human services any waiver of federal Medicaid law, state plan amendment, or other
3 federal approval necessary to implement this subsection and s. 49.46 (2) (b) 14p.

4 **SECTION 3.** 49.46 (2) (b) 14p. of the statutes is created to read:

5 49.46 (2) (b) 14p. Subject to s. 49.45 (30j), services provided by a peer recovery
6 coach.

7 (END)

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II.



State of Wisconsin
2019-2020 LEGISLATURE

CORRECTIONS IN:

**ASSEMBLY AMENDMENT 1,
TO ASSEMBLY BILL 650**

Prepared by the Legislative Reference Bureau
(February 24, 2020)

In enrolling, the following correction was made:

1. Page 1, line 4: after that line insert:
“2m. Page 2, line 7: after “(30j) (a)” insert “2.”.”

(END)



**ASSEMBLY AMENDMENT 1,
TO ASSEMBLY BILL 650**

ecc
1.

2m. Page 2, line 7: after "(30j) (a)" insert "2."

January 13, 2020 - Offered by Representative NYGREN.

1 At the locations indicated, amend the bill as follows:

2 ✓1. Page 1, line 3: delete "program and" and substitute "program,".

3 ✓2. Page 1, line 4: after "overdose" insert ", granting rule-making authority,
4 and extending the time limit for emergency rule procedures".

5 3. Page 4, line 8: after "this" insert "subsection:".

6 ✓4. Page 4, line 9: delete that line and substitute:

7 "1. "Competent mental health professional" means a physician who has
8 completed a residence in psychiatry; a psychologist or a private practice school
9 psychologist licensed under ch. 455; a marriage and family therapist licensed under
10 s. 457.10 or 457.11; a professional counselor licensed under s. 457.12 or 457.13; an
11 advanced practice social worker granted a certificate under s. 457.08 (2); an
12 independent social worker granted a certificate under s. 457.08 (3); a clinical social
13 worker licensed under s. 457.08 (4); a clinical substance abuse counselor or

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1 independent clinical supervisor certified under s. 440.88, or any of these individuals
 2 practicing under a currently valid training or temporary license or certificate
 3 granted under applicable provisions of ch. 457. "Competent mental health
 4 professional" does not include an individual whose license or certificate is suspended,
 5 revoked, or voluntarily surrendered, or whose license or certificate is limited or
 6 restricted, when practicing in areas prohibited by the limitation or restriction.

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cont.

7 2. "Peer recovery coach" means an individual who practices in the recovery".

8 ✓5. Page 4, line 17: delete the material beginning with "peer" and ending with
 9 "supervisor" on line 18 and substitute "competent mental health professional".

10 ✓6. Page 5, line 12: after "requirements" insert ", as established by the
 11 department by rule, after consulting with members of the recovery community".

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12 ✓7. Page 5, line 13: delete "Forty-six" and substitute "Forty".

13 ✓8. Page 5, line 16: delete "16" and substitute "10".

14 ✓9. Page 5, line 17: delete "Twenty-five" and substitute "Twenty-four".

15 ✓10. Page 5, line 20: delete lines 20 to 22.

16 11. Page 6, line 6: after that line insert:

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11.

17 **"SECTION 4m. Nonstatutory provisions.**

18 (1) RULES REGARDING TRAINING OF PEER RECOVERY COACHES. The department of
 19 health services may promulgate the rules required under s. 49.45 (30j) (b) 4. as
 20 emergency rules under s. 227.24. Notwithstanding s. 227.24 (1) (a) and (3), the
 21 department of health services is not required to provide evidence that promulgating
 22 a rule under this subsection as an emergency rule is necessary for the preservation
 23 of the public peace, health, safety, or welfare and is not required to provide a finding
 24 of emergency for a rule promulgated under this subsection. Notwithstanding s.





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227.24 (1) (c) and (2), emergency rules promulgated under this subsection remain in effect until the date the permanent rules take effect."

(END)

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