AN ACT to amend 20.435 (5) (bw); and to create 51.448 of the statutes; relating to: addiction medicine consultation program and making an appropriation.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services to create and administer an addiction medicine consultation program to assist participating clinicians in providing enhanced care to patients with substance addiction and to provide referral support for patients with a substance abuse disorder, and to provide additional services. DHS must review proposals submitted by organizations seeking to provide consultation services through this consultation program and must designate sites based on the organizations’ submitted proposals. DHS must select qualified providers to provide consultation program services that meet certain criteria specified in the bill.

While the bill requires a consultation provider to have the capability to provide services by telephone, a consultation provider may provide services by certain other means of communication including in-person conference. A consultation provider may also provide the following services, which are eligible for funding from DHS: certain second opinion diagnostic and medication management evaluations and certain in-person or Internet site-based educational seminars and refresher courses provided to any participating clinician who uses the consultation program.

The bill requires a consultation provider to report to DHS any information it requests. The bill also requires the organization to conduct interviews and annual surveys of participating clinicians who use the consultation program and submit that information to DHS.
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:

SECTION 1. 20.435 (5) (bw) of the statutes is amended to read:

20.435 (5) (bw) Child psychiatry and addiction medicine consultation programs. Biennially, the amounts in the schedule for operating the child psychiatry consultation program under s. 51.442 and the addiction medicine consultation program under s. 51.448.

SECTION 2. 51.448 of the statutes is created to read:

51.448 Addiction medicine consultation program. (1) In this section, “participating clinicians” includes physicians, nurse practitioners, and physician assistants.

(2) Beginning July 1, 2017, the department shall create and administer an addiction medicine consultation program to assist participating clinicians in providing enhanced care to patients with substance use addiction and to provide referral support for patients with a substance abuse disorder, and to provide additional services described in this section. The addiction medicine consultation program created under this section is not an emergency referral service.

(3) The department shall review proposals submitted by organizations seeking to provide consultation services through the addiction medicine consultation program under this section and shall designate sites, in a number determined by the department, based on the submitted proposals. The department shall select and provide moneys to organizations to provide consultation services through the
addiction medicine consultation program in a manner that maximizes medically
appropriate access and services as described under sub. (4).

(4) The department shall select qualified organizations to provide addiction
medicine consultation program services through the sites designated in sub. (3).
Each site shall make available its own qualified provider or consortium of providers.
To be a qualified provider in the addiction medicine consultation program under this
section, an organization shall successfully demonstrate it meets all of the following
criteria:

(a) The organization has the required infrastructure to be located within the
geographic service area of the proposed site.

(b) Any individual who would be providing consulting services through the
addiction medicine consultation program is located in this state.

(c) The organization enters into a contract with the department agreeing to
satisfy all of the following criteria as a condition of providing services through the
addiction medicine consultation program:

1. The organization has at the time of participation in the addiction medicine
consultation program a physician who is board-certified in addiction psychiatry or
addiction medicine.

2. The organization operates during the normal business hours of Monday to
Friday between 8 a.m. and 5 p.m., excluding holidays.

3. The organization shall be able to provide consultation services as promptly
as is practicable.

4. The organization shall provide all of the following services:
a. Support for participating clinicians to assist in the management of addiction or substance abuse and to provide referral support for patients with a substance use addiction.

b. A triage-level assessment to determine the most appropriate response to each request, including appropriate referrals to other mental health professionals.

c. When medically appropriate, diagnostic and therapeutic feedback.

d. Recruitment of other practices in the site’s service territory to the provider’s services.

5. The organization shall have the capability to provide consultation services by telephone, at a minimum.

(5) (a) An organization that provides consultation services through the addiction medicine consultation program under this section may provide services by teleconference, video conference, voice over Internet protocol, electronic mail, pager, or in-person conference.

(b) The organization that provides consultation services through the addiction medicine consultation program under this section may provide any of the following services, which are eligible for funding from the department:

1. Second opinion diagnostic and medication management evaluations conducted either by a physician who is board-certified in addiction psychiatry or addiction medicine or a physician with extensive and documented experience in treating substance use disorders, either by in-person conference or by teleconference, video conference, or voice over Internet protocol.

2. In-person or Internet site-based educational seminars and refresher courses provided to any participating clinician who uses the addiction medicine consultation program on a medically appropriate topic within addiction medicine.
An organization that provides consultation services through the addiction medicine consultation program under this section shall report to the department any information as requested by the department.

(7) An organization that provides consultation services through the addiction medicine consultation program under this section shall do all of the following:

(a) Conduct annual surveys of participating clinicians who use the addiction medicine consultation program under this section to assess the amount of addiction medicine consultation provided, self-perceived levels of confidence in providing addiction medicine services, and the satisfaction with the consultations and the educational opportunities provided.

(b) Immediately after a clinical practice group begins using the addiction medicine consultation program under this section and again 6 to 12 months later, conduct an interview of participating clinicians from that practice group to assess the barriers to and benefits of participation to make future improvements and to determine the participating clinician’s treatment abilities, confidence, and awareness of relevant resources before and after using the addiction medicine consultation program.

(c) Annually, submit to the department survey results under par. (a), summaries of interviews under par. (b), and a description of the impact of the program under this section.

SECTION 3. Fiscal changes.

(1) ADDICTION MEDICINE CONSULTATION PROGRAM. In the schedule under section 20.005 (3) of the statutes for the appropriation to the department of health services under section 20.435 (5) (bw) of the statutes, the dollar amount for fiscal year 2017–18 is increased by $500,000 to create and operate the addiction medicine
consultation program under section 51.448 of the statutes. In the schedule under section 20.005 (3) of the statutes for the appropriation to the department of health services under section 20.435 (5) (bw) of the statutes, the dollar amount for fiscal year 2018-19 is increased by $500,000 to create and operate the addiction medicine consultation program under section 51.448 of the statutes.

SECTION 4. Effective dates. This act takes effect on the day after publication, except as follows:

(1) The treatment of section 20.435 (5) (bw) of the statutes takes effect on July 1, 2017.