



State of Wisconsin
2025 - 2026 LEGISLATURE

LRB-0672/P1

SWB:cjs

DOA:.....Bollhorst, BB0019 - Mental Health Consultation Program

FOR 2025-2027 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES

Mental health consultation program

This bill combines the child psychiatry consultation program with additional services into a new mental health consultation program. The bill also splits off funding for the existing addiction medicine consultation program into a separate appropriation.

Currently, the child psychiatry consultation program assists participating clinicians in providing care to children with mental health care needs and provides referral support and additional services. Current law requires DHS to convene interested persons, including the Medical College of Wisconsin, to develop a plan and standards for a comprehensive mental health consultation program incorporating various psychiatry specialties, including addiction medicine; a perinatal psychiatry consultation program; and the child psychiatry consultation program. This requirement is eliminated in the bill along with the separate child psychiatry consultation program. Under current law, the addiction medicine consultation program assists participating clinicians in providing care to patients with substance use addiction and provides referral support and additional services. The bill retains the program, but establishes a new appropriation to fund the program.

The bill requires an organization to administer a mental health consultation program (MHCP) that incorporates a comprehensive set of mental health consultation services and may include perinatal, child, adult, geriatric, pain, veteran, and general mental health consultation services. Under the bill, the organization that currently administers the child psychiatry consultation program must administer the MHCP during the 2025-26 fiscal year, but DHS may contract with another organization in subsequent fiscal years. The contracting organization may contract with any other entity to perform any operations and satisfy any requirements of the MHCP. The contracting organization must do all of the following: ensure that mental health providers providing services through the MHCP have the appropriate credentials as described in the bill, maintain

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infrastructure to provide services statewide on every weekday, provide consultation services as promptly as practicable, report to DHS any information DHS requires, conduct surveys of participating clinicians as described in the bill, and provide certain specified services. Those specified services are the following: support for clinicians participating in the MHCP to assist in the management of mental health concerns; triage-level assessments to determine the most appropriate response; diagnostics and therapeutic feedback when medically appropriate; and recruitment of other practices to a provider's services. The MHCP must be able to provide consultation services by telephone and email but may also provide services by other means. In addition to the services required in the bill, which are eligible for funding by DHS, the contracting organization may provide any of the services specified in the bill that are eligible for funding by 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~~ Mental health consultation program. 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~~ mental health consultation program under s. 51.443.

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

SECTION 2. 20.435 (5) (bx) of the statutes is created to read:

20.435 (5) (bx) *Addiction medicine consultation program*. Biennially, the amounts in the schedule for operating the addiction medicine consultation program under s. 51.448.

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

SECTION 3. 20.435 (5) (ct) of the statutes is repealed.

BILL**SECTION 3**

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

SECTION 4. 51.441 of the statutes is repealed.

SECTION 5. 51.442 of the statutes is repealed.

SECTION 6. 51.443 of the statutes is created to read:

51.443 Mental health consultation program. (1) In this section:

(a) “Participating clinicians” includes physicians, nurse practitioners, physician assistants, and medically appropriate members of the care teams of physicians, nurse practitioners, and physician assistants.

(b) “Program” means the mental health consultation program under this section.

(2) During fiscal year 2025-26, the department shall contract with the organization that provided consultation services through the child psychiatry consultation program under s. 51.442, 2023 stats., as of January 1, 2025, to administer the mental health consultation program described under this section. Beginning in fiscal year 2026-27, the department shall contract with the organization that provided consultation services through the child psychiatry consultation program under s. 51.442, 2023 stats., as of January 1, 2025, or another organization to administer the mental health consultation program under this section.

(3) The contracting organization under sub. (2) shall administer a mental health consultation program that incorporates a comprehensive set of mental health consultation services, which may include perinatal, child, adult, geriatric, pain, veteran, and general mental health consultation services, and may contract

BILL**SECTION 6**

with any other entity to perform any operations and satisfy any requirements under this section for the program.

(4) As a condition of providing services through the program, the contracting organization under sub. (2) shall do all of the following:

(a) Ensure that all mental health care providers who are providing services through the program have the applicable credential from this state; if a psychiatric professional, that the provider is eligible for certification or is certified by the American Board of Psychiatry and Neurology for adult psychiatry, child and adolescent psychiatry, or both; and if a psychologist, that the provider is registered in a professional organization, including the American Psychological Association, National Register of Health Service Psychologists, Association for Psychological Science, or the National Alliance of Professional Psychology Providers.

(b) Maintain the infrastructure necessary to provide the program's services statewide.

(c) Operate the program on weekdays during normal business hours of 8 a.m. to 5 p.m.

(d) Provide consultation services under the program as promptly as is practicable.

(e) Have the capability to provide consultation services by, at a minimum, telephone and email. Consultation through the program may be provided by teleconference, video conference, voice over Internet protocol, email, pager, in-person conference, or any other telecommunication or electronic means.

(f) Provide all of the following services through the program:

BILL**SECTION 6**

1. Support for participating clinicians to assist in the management of mental health concerns.

2. Triage-level assessments to determine the most appropriate response to each request, including appropriate referrals to any community providers and health systems.

3. When medically appropriate, diagnostics and therapeutic feedback.

4. Recruitment of other clinicians into the program as participating clinicians when possible.

(g) Report to the department any information requested by the department.

(h) Conduct annual surveys of participating clinicians who use the program to assess the quality of care provided, self-perceived levels of confidence in providing mental health services, and satisfaction with the consultations and other services provided through the program. Immediately after participating clinicians begin using the program and again 6 to 12 months later, the contracting organization under sub. (2) may conduct assessments of participating clinicians to assess the barriers to and benefits of participation in the program to make future improvements and to determine the participating clinicians' treatment abilities, confidence, and awareness of relevant resources before and after beginning to use the program.

(5) Services provided under sub. (4) (b) to (h) are eligible for funding from the department. The contracting organization under sub. (2) also may provide any of the following services under the program that are eligible for funding from the department:

BILL**SECTION 6**

(a) Second opinion diagnostic and medication management evaluations and community resource referrals conducted by either a psychiatrist or allied health professionals.

(b) In-person or web-based educational seminars and refresher courses on a medically appropriate topic within mental or behavioral health care provided to any participating clinician who uses the program.

(c) Data evaluation and assessment of the program.

(END)