



WISCONSIN LEGISLATIVE COUNCIL AMENDMENT MEMO

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| 2013 Assembly Bill 452 | Assembly Amendments 1 and 3 |
| <i>Memo published:</i> November 7, 2013 | <i>Contact:</i> Mary Matthias, Principal Attorney (266-0932) |

Assembly Bill 452 requires the Department of Health Services (DHS) to create and administer a child psychiatry consultation program to assist participating clinicians in providing enhanced care to pediatric patients with mental health care needs, to provide referral support for those patients, and to provide additional services.

Assembly Amendment 1

Pediatric Patients Served

The bill specifies that the program must assist clinicians in providing care to **pediatric patients with mild to moderate mental health care needs**, and provide referral support for those pediatric patients **who need care that is beyond the scope of primary care practice**.

Assembly Amendment 1 provides instead that the program must assist clinicians in providing care to **pediatric patients with mental health care needs**, and provide referral support for **pediatric patients**.

Location of Individuals Providing Consultation Services

The bill requires that any individual who provides consulting services under the program must be located on-site at the facility of the organization that is the provider of consultation services under the program. Assembly Amendment 1 provides instead that any individual who provides consulting services must be located in Wisconsin.

Staffing Requirements For Organizations Providing Consultation Services

The bill requires an organization providing consultation services under the program to maintain all of the following staffing at adequate levels:

- A psychiatrist, who is either eligible for certification or certified by the American Board of Psychiatry and Neurology, Inc., for either adult psychiatry or child and adolescent psychiatry, or both.
- A social worker or psychologist.

- A care coordinator.
- Appropriate administrative support.

Assembly Amendment 1 also provides that an organization that provides consulting services under the program must have a psychiatrist on staff. However, instead of specifying the other required types of staff, Assembly Amendment 1 requires that the organization “has and maintains additional staff as specified by the department.”

Reporting Requirements For Organizations Providing Consultation Services

The bill requires each organization that provides consultation services to provide an annual report to DHS containing all of the following: a record of each request for consultation services including certain information specified in the bill; consultation service response times, the total number of requests for consultation services, the total number of cases for which consultation services are provided, and the total number of individuals and practices requesting consultation services; and a description of the recruitment and educational efforts conducted by the consultation provider. The bill also authorizes DHS to collect additional data on the consultation program as needed to measure program outcomes.

Assembly Amendment 1 replaces the reporting requirement in the bill with a requirement that each organization that provides consultation services must report to DHS any information requested by DHS.

Appropriations

Assembly Bill 452 creates an appropriation line for the program and repeals it as of July 1, 2015. Assembly Amendment 1 eliminates the repeal of the appropriation line.

Regional Hubs

Assembly Bill 452 requires DHS to designate one urban and one rural regional program hub. Assembly Amendment 1 provides instead that DHS must determine the number of hubs to be created, and eliminates the requirement that there be one urban hub and one rural hub.

Assembly Amendment 3

Assembly Bill 452 provides that an organization providing consultation services may provide second opinion diagnostic and medication management evaluations, and that these services are eligible for funding from DHS. Under the bill, these evaluations may be conducted by a psychiatrist, a social worker, or psychologist.

Assembly Amendment 3 provides that diagnostic and medication management evaluations may also be conducted by a registered nurse with psychiatric training.

Bill History

Assembly Amendment 1 was offered by Representative Steineke on October 30, 2013. On November 5, 2013, the Assembly Committee on Health offered Assembly Amendment 3, and voted to recommend adoption of Assembly Amendment 1 and Assembly Amendment 3, and passage of the bill, as amended, on successive votes of Aye, 9; Noes, 0.

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