



2025 SENATE BILL 245

May 9, 2025 - Introduced by Senators JAMES and TESTIN, cosponsored by Representatives DITTRICH, ARMSTRONG, CALLAHAN, DONOVAN, B. JACOBSON, KREIBICH, MAXEY, MURSAU, NOVAK and PIWOWARCZYK. Referred to Committee on Mental Health, Substance Abuse Prevention, Children and Families.

1 **AN ACT relating to:** a pilot school-centered mental health program.

Analysis by the Legislative Reference Bureau

In each fiscal year of the 2025-27 biennium, this bill requires the Department of Health Services to distribute an amount determined by the secretary of health services to a provider to operate a school-centered mental health program in two schools in this state for two school years; one school must be located in a rural school district and one school must be located in a suburban or urban school district. Under the bill, the provider must use the money to support full-time therapist positions, family coach positions, and any other positions necessary to operate the school-centered mental health program. Under the bill, a school-centered mental health program is a program that meets various criteria, including that it serve at-risk pupils and families at school, at home, and in the community, serve pupils and families year-round, include classroom observations and pupil-specific behavior intervention, include evidence-based individual or family therapy, and provide family coaching that is aligned with therapeutic goals. Finally, the bill requires the provider who receives money from DHS to submit a report to DHS on the impact of the school-centered mental health program on pupils and families by six months after the end of the program, and requires DHS to distribute the report to the legislature.

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

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

SECTION 1. Nonstatutory provisions.

(1) SCHOOL-CENTERED MENTAL HEALTH PROGRAM; PILOT.

(a) In this subsection:

1. "Provider" means an organization that operates a school-centered mental health program.

2. "School-centered mental health program" means a program that satisfies all of the following criteria:

a. The program serves at-risk pupils and families at each school at which the program is operated.

b. The program actively engages each participating pupil and the pupil's family and other identified supportive individuals in the participating pupil's life.

c. The program provides services to each participating pupil year-round.

d. The program includes evidence-based individual or family therapy at the school at which the program is operated, at each participating pupil's home, or elsewhere in the community.

e. The program provides family coaching that is aligned with a participating pupil's therapeutic goals and includes skill-building, parent education, home visits to assess family needs, family wellness checks and support, assistance in accessing after-school and mentoring programs, education about the participating pupil's diagnosis, treatment, and medications, and guidance on how to support the participating pupil at home and in school.

f. The program actively supports families in connecting to community health

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1 services and services addressing social determinants of health needs to establish
2 primary care providers.

3 g. The program includes classroom observations for the purpose of
4 collaborating with school staff to develop pupil-specific behavior interventions.

5 h. The program facilitates school staff training and collaboration.

6 i. The program includes a process for measuring and reporting the program's
7 effect on pupils and families, including improvement in social determinants of
8 health and reduction of symptoms related to mental health conditions.

9 (b) In each fiscal year of the 2025-27 biennium, the department of health
10 services shall distribute an amount determined by the secretary of health services
11 to a provider to operate a school-centered mental health program at 2 schools in this
12 state that are selected in accordance with par. (c) for 2 school years. The provider
13 shall use moneys distributed under this paragraph to support full-time therapist
14 positions, family coach positions, and other positions necessary to operate the
15 school-centered mental health program.

16 (c) The provider shall select schools to participate in the school-centered
17 mental health program under par. (b) as follows:

18 1. One school shall be physically located in a rural school district and one
19 school shall be physically located in a suburban or urban school district.

20 2. Each school shall demonstrate all of the following to the provider:

21 a. That the school currently offers behavioral health resources to pupils.

22 b. That the school is willing and able to facilitate a survey to school staff,
23 pupils, and parents of pupils related to the program operated under par. (b).

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c. That, upon request, the school is willing and able to provide pupil data to the provider for the report required under sub. (2).

(2) REPORT ON SCHOOL-CENTERED MENTAL HEALTH PROGRAM.

(a) A provider that receives money from the department of health services under sub. (1) (b) shall by no later than 6 months after the last day of the 2nd school year during which the provider operates the program under sub. (1), submit to the department of health services a report on the effect of the school-centered mental health program on pupils and families. The provider shall include in the report under this paragraph at least all of the following:

1. Changes in social determinants of health for pupils and families.

2. Changes related to symptoms of mental health conditions experienced by pupils and families.

3. The impact of the program on pupils' academic performance and the social and emotional growth of pupils at participating schools, as reported on surveys facilitated by participating schools.

(b) By no later than 14 days after receiving a report under par. (a), the department of health services shall distribute the report received under par. (a) to the legislature under s. 13.172 (2).

(END)