



---

# SHANNON ZIMMERMAN

STATE REPRESENTATIVE • 30<sup>th</sup> ASSEMBLY DISTRICT

**Assembly Bills 732, 844, 845**  
**Assembly Committee on Substance Abuse and Prevention**  
**January 13, 2022**

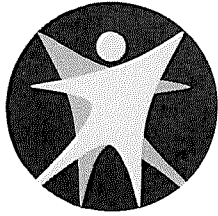
Thank you Chairman James and committee members for hearing testimony on three proposals I have authored that are before you, specifically AB 732, AB 844, and AB 845. These bills represent our continued commitment to fighting addiction in our state.

The recently approved biennial budget included provisions that set funds aside into the JFC supplemental account to be released by the committee at a later date. Among those provisions were the proposals that you see today. They all focus on substance abuse and are efforts to advance treatment services for individuals struggling with substance use disorder.

- AB 732 directs DHS to expend \$300,000 in FY 23 to establish a substance use disorder treatment platform. This will most likely be a web based app that connects those seeking treatment with the most appropriate treatment available. At least six other states are currently operating this type of platform.
- AB 844 directs DHS to expend up to \$450,000, \$150,000 in FY 22 and \$300,000 in FY 23, on methamphetamine treatment grants. Opioid addiction and treatment has been the focal point of the legislature in the recent past, but methamphetamine is still a significant issue in the state, especially in northern Wisconsin.
- AB 845 directs DHS to expend up to \$1.5 million to expand medication-assisted treatment (MAT). Up to \$500,000 could be awarded in FY 22 and up to \$1 million annually thereafter. According to the DHS website, there are 22 MAT providers throughout the state receiving grants from the Department.

While none of these are a silver bullet that will solve addiction issues in our state. They are all positive movement in the right direction.

Thank you again for the opportunity to provide testimony and I hope I can count on your support of these measures as they move forward.



State of Wisconsin  
Department of Health Services

Tony Evers, Governor  
Karen E. Timberlake, Secretary-Designee

---

**TO:** Members of the Assembly Committee on Substance Abuse and Prevention

**FROM:** HJ Waukau, Legislative Director

**DATE:** January 13, 2022

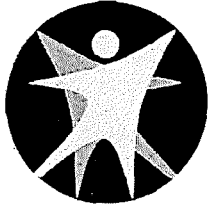
**RE:** AB 844, relating to: methamphetamine addiction treatment grants

The Department of Health Services (DHS) would like to submit written testimony for information only on Assembly Bill 844 (AB 844) regarding DHS being requested to submit a plan for supplemental funding from the Joint Committee on Finance to provide trainings and substance use disorder treatment providers on treatment models for methamphetamine addiction.

On October 15, 2021, DHS submitted a 13.10 request to the Joint Committee on Finance for the approval of the transfer of funds in the Committee's appropriation under Wis. Stat. § 20.865 (4)(a); to expand and enhance the state's substance use disorder treatment programs per appropriations made by 2021 Act 58. Per the request, DHS plans to use this funding to expand and enhance existing methamphetamine addiction treatment training programs in the state. Currently, DHS contracts with the University of Wisconsin-Milwaukee's Center for Urban Population Health (CUPH) to provide statewide evidence-based training to outpatient providers of methamphetamine use treatment services. Unlike opioid use disorder, medications approved by the Food and Drug Administration (FDA) to address methamphetamine use disorder do not exist. Rather, the most effective treatments rely on behavioral therapies. The trainings DHS currently supports are available for providers and supervisors, in both in-person and remote formats, and focus on the Matrix Model of treatment and Contingency Management approaches.

The Matrix model is an evidence-based program, which relies on a comprehensive behavioral treatment approach to address methamphetamine addiction and has been shown to reduce an individual's drug and alcohol use. The 16-week program combines relapse prevention, family and group therapy, monitored drug testing, self-help, and drug education to help treat methamphetamine use disorder. Contingency Management is an evidence-based behavioral reinforcement approach that incentivizes reductions in substance use and treatment and recovery engagement. DHS would allocate these funds to CUPH to leverage its existing methamphetamine treatment training infrastructure to create additional opportunities for providers across the state to enroll in training. A copy of the initial request and proposal is appended to DHS's testimony for AB 732, AB 844, and AB 845 for the Committee's reference.

DHS thanks the Committee for the opportunity to submit written testimony for information only and would be happy to address any follow-up questions the Committee may have about the pending proposal before the Joint Committee on Finance.



State of Wisconsin  
Department of Health Services

Tony Evers, Governor  
Karen Timberlake, Secretary-designee

October 15, 2021

The Honorable Howard L. Marklein  
Joint Committee on Finance, Senate Co-Chair  
Room 316 East State Capitol  
PO Box 7882  
Madison, WI 53707

The Honorable Mark Born  
Joint Committee on Finance, Assembly Co-Chair  
Room 308 East State Capitol  
PO Box 8952  
Madison, WI 53708

Dear Senator Marklein and Representative Born:

Summary of Request

Under the provisions of s. 13.101 (4), the Department of Health Services (DHS) requests transfers from the Committee's appropriation under s. 20.865 (4)(a) to expand and enhance the state's substance use disorder treatment programs. The 2021-23 biennial budget, 2021 Act 58, placed funds for these programs in the Committee's appropriation pending the Department's submittal of a 13.10 request. DHS intends to use these funds to address needs in the state for medication-assisted treatment services, to expand and enhance provider training in evidence-based methamphetamine treatment models, and to develop a platform able to compare substance abuse disorder treatment programs.

More specifically, the Department requests:

1. To address gaps in Wisconsin's medication-assisted treatment services, a permanent base transfer of \$500,000 GPR in FY 22 and \$1,000,000 GPR in FY 23 from the appropriation under s. 20.865 (4)(a) to the appropriation under s. 20.435 (5)(bc), Grants for community programs.
2. To expand and enhance the training of providers in methamphetamine treatment models, a permanent base transfer of \$150,000 GPR in FY 22 and \$300,000 GPR in FY 23 from the appropriation under s. 20.865 (4)(a) to the appropriation under s. 20.435 (5)(a), General program operations.
3. A permanent base transfer of \$300,000 GPR in FY 23 from the appropriation under s. 20.865 (4)(a) to, to the appropriation under s. 20.435 (5)(a), General program operations, to develop a substance use disorder treatment platform.

## Background

### *Medication Assisted Treatment Expansion*

Act 58 placed \$500,000 GPR in FY 22 and \$1,000,000 GPR in FY 23 into the Committee's supplemental appropriation for medication-assisted treatment expansion.

The Department plans to award the funds through a competitive grant application process to an organization able to provide mobile medication-assisted treatment services in underserved areas of the state. Medication-assisted treatment (MAT) is currently available in a variety of settings, including opioid treatment programs, private medical clinics, community health centers, and through clinics that specialize in substance use disorders. However, some areas of the state remain over a 45 minute drive away from a substance use treatment provider<sup>1</sup>. To help alleviate the ongoing opioid epidemic, in July 2021, the federal Drug Enforcement Agency authorized opioid treatment programs to add a mobile component to their existing program registration. The registration would allow programs to develop a mobile MAT unit able to travel to underserved areas impacted by opioid use; the unit would not necessarily be tied to a single, physical site. To help states develop the mobile MAT programs, recent guidance from the federal Substance Abuse and Mental Health Services Administration identified specific services that can be provided at a mobile MAT site. These services include administering and dispensing medications for opioid use treatment, including initiating buprenorphine or methadone<sup>2</sup>, collecting samples for drug testing or analysis, dispensing take-home medications, and providing medical and psychosocial assessments and counseling, when possible. The grant funding for this program would be available to any organization able to provide these services and that successfully competes for the available grant funds.

### *Methamphetamine Addiction Treatment Training Grants*

Act 58 placed \$150,000 GPR in FY 22 and \$300,000 GPR in FY 23 in the Committee's supplemental appropriation for training of substance use disorder treatment providers on treatment models for methamphetamine addiction.

DHS intends to use this funding to expand and enhance existing methamphetamine addiction treatment training programs in the state. Currently, DHS contracts with the University of Wisconsin-Milwaukee's Center for Urban Population Health (CUPH) to provide statewide, evidence-based training to outpatient providers of methamphetamine use treatment services. Unlike opioid use disorder, Food and Drug Administration (FDA) approved medications to address methamphetamine use disorder do not exist; instead, the most effective treatments rely on behavioral therapies. The trainings DHS currently supports are available for providers and supervisors, in both in-person and remote formats, and focus on the Matrix Model of treatment and Contingency Management approaches. The Matrix model is an evidence-based program, which relies on a comprehensive behavioral treatment approach to address methamphetamine addiction and has been shown to reduce individuals' drug and alcohol use. The 16-week program

---

<sup>1</sup> WI DHS. Preventing and Treating Harms of the Opioid Use Crisis. February 2020: Page 13, Figure 7.

<sup>2</sup> A properly certified mobile unit would be able to provide all three forms of FDA-approved opioid medication: buprenorphine, naltrexone, and methadone.

combines relapse prevention, family and group therapy, monitored drug testing, self-help, and drug education to help treat methamphetamine use disorder. Contingency Management is an evidence-based behavioral reinforcement approach that incentivizes reductions in substance use and treatment and recovery engagement. DHS would allocate these funds to CUPH to leverage its existing methamphetamine treatment training infrastructure to create additional opportunities for providers across the state to enroll in training.

*Substance Use Disorder Treatment Platform*

Act 58 placed \$300,000 GPR in FY 23 in the Committee's supplemental appropriation for the development of a substance use disorder treatment platform.

The Department intends to award funding through a competitive process to an organization able to develop an online substance use disorder treatment platform that allows for the location, comparison and review of treatment programs in the state. Online substance use disorder treatment comparison platforms can include information about the types of substance use treatment services a provider and/or facility offers, location of these services, availability of age-specific programming, and insurance or other accepted forms of payment information, among other information. In addition, platform can offer patients a place to share reviews and information about their experiences with the treatment services offered by a provider. DHS would use this funding to support the development of this treatment comparison platform. The Department will not require providers to enroll in the platform; providers would do so on a voluntary basis.

Statutory Criteria

This request for the transfer of funds meets the statutory criteria of s. 13.101 (4) of being a transfer that will "result in legislative intent being more effectively carried out," as it will enable the Department to address substance use treatment needs across the state with funds budgeted for that purpose in Act 58. The transfers are needed to provide sufficient budget authority for the Department to support a breadth of substance use disorder treatment programs. Without the approval by the Committee for this additional appropriation authority, DHS would not be able to provide these grants for these programs.

Thank you for considering this request. H.J. Waukau, Deputy Legislative Director, will represent the Department at the s. 13.10 meeting for this issue.

Sincerely,



Karen E. Timberlake  
Secretary-designee