

# Mental Health

## **DRW advocates for an increased investment in community mental health services.**

**Why:** *A lack of access to needed community supports has resulted in people with mental illness being placed in more costly out-of-home and institutional settings or being confined in jails or prisons. People need choices to help them live in their own homes, find meaningful work and participate fully in their communities.*

- **Proposal:** Promote community services by limiting the subsidy for a nursing home "Institution for Mental Disease" (IMD) for residents staying longer than 90 days and allow DHS to use funds from the appropriation under Wis. Stat. 20.435(5)(be) to pay for individual evaluations and assessments and an enhanced county reimbursement to encourage returning individuals to their community.
- **Proposal:** Create a transitional time-limited funding resource available to counties with a resident at Wisconsin's only Institute of Mental Disease in Trempealeau County, providing a treatment plan with consultation and community-based mental health supports to aid them in planning the return of that person to their home county. (\$200,000 per year of the biennium).
- **Proposal:** Create a state-funded program to ensure access to mental health and substance use services in the language of Deaf Wisconsinites; including a statewide mental health coordinator, peer specialist program and clinical training and supervision. (\$500,000 over the biennium).

## **DRW supports improvements to addressing the mental health needs of children.**

**Why:** *An estimated 1 in 4 school-age children has a mental health concern. Students with mental health disabilities are more likely than other students with disabilities to experience poor outcomes including habitual truancy, lower graduation rates, suspension and expulsion and poor academic achievement.*

- **Proposal:** Support the recommendation from the Speakers Task Force on Urban Education to allow for Medicaid billing for consultation time between mental health care providers, parents, and school personnel. Coordination and consistent treatment between school and community providers would substantially increase the potential for effective integrated treatment and lead to more positive long-term outcomes for these children.
- **Proposal:** Increase opportunities and funding for paid in-home respite for families who have a child with a serious emotional condition.