



The Milwaukee Mental Health Task Force is committed to being a leader in identifying issues faced by all people affected by mental illness, facilitating improvements in mental health services, giving consumers and families a strong voice, reducing stigma, and implementing recovery principles.

Milwaukee Mental Health Task Force Testimony Priorities for the 2019 Behavioral Health Division Budget

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On behalf of the Milwaukee Mental Health Task Force (MMHTF), thank you for this opportunity to share our priorities for the 2019 Behavioral Health Division Budget. The MMHTF works collaboratively to identify issues faced by people affected by mental illness and by substance abuse disorders, facilitate improvements in services, give consumers and families a strong voice, reduce stigma, and implement recovery principles. The MMHTF includes over 40 community organizations and comprises service providers, individuals who live with a mental illness or substance use disorder, advocates, family members, and other stakeholders.

We appreciate the opportunity to share our frontline perspective regarding community needs with the Mental Health Board and BHD leadership.

The MMHTF thanks you for the following positive investments in the 2018 budget and asks that these be supported moving forward:

- Peer Run Respite which has the potential to help support recovery, avert crises, and avoid hospitalizations
- Expansion of the Crisis and Assessment Response Teams (CART) and increased hours of service.
- Support for individuals in Housing First. Without stable housing, recovery is not possible.
- Transportation funding, which is vital to ensuring access to mental health services and supports, as well as the continuum of activities needed to meet basic needs, support independence and community integration.
- Community Consultation Team which supports Adults with Intellectual and other Developmental Disabilities and mental health needs.
- Team Connect, which supports to adults seen in PCS or discharged from the Observation or Acute units
- Expanded Access Clinic capacity including the ability to serve individuals in Medicaid

We ask you to prioritize the following in the 2019 budget:

Expanded capacity on the Northside including the northside hub or other community based alternatives located in northside locations, as well as a developing plan to provide a continuum of community services on the northside. We recommend this as a top priority as there was an expectation for northside hub to be in place this year.

Diverting people with mental illness from the criminal justice system

Over 35% of people in custody at the Milwaukee County Jail and House of Corrections are taking psychotropic medication. Post booking stabilization is a sustained effort to remove individuals who live with a mental illness from the criminal justice system immediately after booking. If diversion occurs at this point and individuals are connected to stable housing and community mental health services, we will have dramatically better outcomes.

Post booking stabilization can only be effective and sustainable if there are adequate community mental health resources available on relatively short notice at the appropriate level. We ask you to prioritize funding for the continuum of services need to ensure dedicated resources to support diversion:

- 24/7 access to crisis services including CART, mobile crisis, CRC, and Crisis line. CART expansion is key to our ability to divert people with mental illness from the jail, and prevents situations from escalating.
- A high level of accountability for providers

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- Timely access to a prescriber
- Emergency supportive housing to serve as a bridge for those removed from the jail.
- Access to the appropriate community services based on individual needs, such as CCS or CSP.

Provider Quality: As BHD transitions from becoming a provider of services to a purchaser of services, it is essential to have a high level of provider accountability to assure high quality, timeliness, and responsiveness to client needs. This should include the following:

- Additional oversight and quality assurance.
- Targeted rate increases. Current reimbursement for some community mental health services as well as for substance abuse treatment, including residential services, are not competitive and harm the ability to attract and retain quality staff.
- Expand the provider network, including ancillary services for CCS and the therapist network for children and adults.
- Expectation that providers proactively provide information on client rights including how to file a complaint, and options for obtaining advocacy assistance.

Substance Abuse Treatment Services

The MHTF is concerned that the funding for substance abuse treatment services has decreased in recent years, although the needs have increased. A new government report finds that hospitals faced 1.27 million patient visits for opioid-related problems in a single year. The 2014 numbers, the latest available for every state, reflect a 64 percent increase for inpatient care and a 99 percent jump for E.R. treatment compared to figures from 2005. They show that women are now as likely as men to be hospitalized. We commend that work that BHD has done to draw down additional grant funding to support treatment. In addition, we ask you to support the following in the 2019 budget:

- Funding for services and support, such as care coordination and case management for BHD clients who have a substance abuse disorder and are residing in wet and sober housing
- Medication Assisted Treatment (MAT), which is an evidence-based practice increasingly utilized with opioid and/or alcohol-addicted persons, and includes Suboxone, Vivitrol, and Methadone, all medications which have been demonstrated as effective. Research reaffirms the need to combine MAT with effective treatment and case management that is based on individualized assessment and treatment planning. We encourage BHD to expand this service in the 2019 budget to address these issues as a proactive approach to this increasing public health crisis.
- Expand services for youth who are struggling with substance abuse and require treatment. Expansion of CCS is one opportunity to expand access, and is a good first step. Other options for expanding capacity and improving outcomes are laid out in a March 27th memo created by WRAP Clinical Director, Dr. Stephen Gilbertson in response to a request from Mary Jo Meyers, Director of Wraparound Milwaukee. We ask Mental Health Boards members to prioritize options for expanding access to treatment for youth.

Thank you for your consideration of these recommendations for the 2019 BHD budget, and for your service on the Mental Health Board. Please feel free to contact us for additional information.