

## Milwaukee Mental Health Task Force Overview of 2021 – 2023 Biennial Budget Provisions – (7/13/2021)

*This document draws on materials from the state of Wisconsin, Survival Coalition of Disability Organizations, and NAMI Wisconsin.*

<b>Budget Ask</b>	<b>Governor’s Budget Proposal</b>	<b>Budget Approved by Legislature</b>
<b>Mental Health Budget Highlights</b>		
Increased reimbursement for outpatient mental health (40% increase) and child adolescent day service (40% increase)	<b>\$16M GPR</b> (\$4M 1 <sup>st</sup> year, 12 M 2 <sup>nd</sup> year) increase	<b>15% increase</b> outpatient mental health positions, <b>20% increase</b> child adolescent day service position.
<b>LOCAL CRISIS RESPONSE Regional Crisis Response System Response</b>  <i>County Crisis Phone Lines and Peer-Run Warmlines</i>	Regional Crisis Centers <b>\$12.6M</b> Regional Crisis Stabilization facilities <b>\$5M</b>  <b>\$850K each year</b> <i>County Crisis Phone Lines</i> <b>\$1.2M GPR each year</b> <i>Peer-Run Warmlines</i>	<b>10M GPR</b> in 1st year of biennium (2021-22) in JFC program supplements appropriation  <b>Not included</b> <b>Not included</b>
Milwaukee County Crisis Mobile Team Grant	<b>Included</b>	<b>Not included</b>
Milwaukee Trauma Response Team expansion	<b>Included</b>	<b>Not included</b>
Behavioral Health Services for Individuals who are Deaf, Hard of Hearing, or Deaf-blind	<b>\$1.9 million</b>	<b>Not included</b>
Collaboration with law enforcement	Emergency Response Collaboration Grant <b>2.5M</b> Crisis Intervention Training Grant <b>\$750K</b>	<b>Not included</b>  <b>Included</b>
Child Psychiatry Consultation Program	<b>\$1M to expand statewide</b>	<b>\$500K</b>
Psychosocial rehab services	<b>Included</b>	<b>Not included</b>
Forensic Assertive Community Treatment Team	<b>\$4.5M</b>	<b>Not included</b>
Forensic positions at Mendota Mental Health	<b>Included</b>	<b>Not included</b>

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Medicaid Room and Board Reimbursement for Residential SUD Treatment Facilities	<b>\$6,549,200</b>	<b>Not included</b>
Substance use harm reduction grant	<b>Included</b>	<b>Not Included</b>
<b>Medicaid and Long Term Care Budget Highlights</b>		
Medicaid/ BadgerCare expansion	Included	Not included
Raising <b>BadgerCare income limits</b> to 138% FPL	<b>Included</b>	<b>Not Included</b>
Improve <b>access to dental care</b> for Medicaid patients (50% reimbursement rate)	<b>\$4.8M GPR 1<sup>st</sup> year, \$9.5M GPR 2<sup>nd</sup> year</b>	<b>Increases MA reimbursement rates by 40% by 2022</b>
Expand/equalize critical <b>ADRC services</b> across the state	<b>Not Included</b>	<b>Not Included</b>
Fully fund <b>EBS services</b> statewide	<b>Not Included</b>	<b>Not included</b>
Increase <b>direct care workforce funding</b>	<b>\$30 M GPR</b> increase direct care services in Family Care	<b>\$40 M GPR</b>
<b>Increase Personal Care reimbursement</b>	<b>\$30 M GPR</b> increase funding for personal care services to support workers employed by personal care agencies.	<b>\$32 M GPR</b>
Ensure all eligible children who apply receive services under the <b>CLTS waiver program</b> :	Changed appropriation from sum certain to <b>sum sufficient</b> , which would guarantee all eligible children would receive services	<b>Not Included</b>
Help babies & toddler exposed to lead: Support eliminating lead pipes and lead paint as a 100% preventable cause of I/DD	<b>\$10M increase</b> Expand Access to the Birth to 3 Program for eligible children who have a positive blood lead test above 5 micrograms per deciliter.  <b>\$2M</b> for Windows Plus Program, which provides lead-safe renovation to high-risk areas in homes built before 1950 that are	<b>No expansion of eligibility to cover additional children with lead poisoning, maintenance of effort funding for Birth to 3 included (\$2.2 M)</b>  <b>Not Included</b>

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	occupied by low-income families. <b>\$40 M increase</b> in Safe Drinking Water Loan program for replacement of lead service lines <b>\$100K</b> for Lead Screening and Outreach Grant	<b>Not Included</b>  <b>\$100 K</b>
<b>Justice Reform – Budget Highlights</b>		
Expansion of <b>Opening Avenues to Reentry Success</b> (OARS).	<b>\$2.25M</b> in FY22 and <b>\$3M</b> in FY23 Increase program by 167 participants/year in existing 51 counties	<b>Not included</b>
<b>Treatment Alternatives and Diversion Program</b>	<b>\$15M GPR</b> and 2.0 FTE GPR positions in fiscal year 2022-23	<b>\$2.5MGPR</b> in 2022 -23 for TAD grants
<b>Medication Assisted Treatment</b> (DOC)	<b>\$800K</b> in FY22 and <b>\$800K</b> in FY23	Provides <b>\$400K GPR</b> annually
Return 17-year-olds to the juvenile justice system; reallocate funds from incarceration of youth to invest in local community-based prevention, early intervention, and supervision.	Included	<b>Not included.</b>
<b>Special Education</b>		
Increase <b>special education categorical aid</b> with ultimate goal of 60% reimbursement	Increase special education categorical aid to <b>45 percent</b> in FY22 and <b>50 percent</b> in FY23	Increase to <b>30% reimbursement rate</b> in second year of budget
	Change allocation to <b>sum sufficient</b> to ensure school districts receive the percent reimbursement promised by the state.	<b>Not included</b>
<b>High-Cost Special Education aid</b>	Increase reimbursement rate to <b>40 percent in FY22</b> and to <b>60 percent in FY23</b>	Increase to <b>40% reimbursement rate</b> each year

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Increase funding for <b>school mental health staff'</b>	Increase of <b>\$46.5M</b> for student mental health and wellness funding across all categories of pupil services (social workers, counselors, psychologists, and nurses), for all school districts that have pupil services expenditures.	<b>\$12 M</b> (only for school social workers)
School based mental health services grants.	<b>\$7 M</b>	<b>\$7M</b>
Increase the <b>transition readiness grant</b> to help students with disabilities transition into the workforce and postsecondary education.	<b>\$1.5M GPR</b> Special Education Transition Readiness grant increase	<b>Not Included</b>
<b>Transportation</b>		
2.5% increase for <b>Public Transit</b> systems	<b>Increase mass transit operating aids 2.5%</b>	<b>Cut mass transit operating aids by 50%</b> in year one of the budget for Tier A systems (Milwaukee and Madison transit systems). <b>Flat funding for tiers B &amp; C.</b>
Transit Capital Improvement	<b>\$20 M</b> for transit capital improvement	<b>Not Included</b>
2.5% increase for <b>paratransit</b>	<b>Increases paratransit 2.5%</b> per year	<b>2.5% increase</b>
2.5% increase for <b>specialized transportation</b>	<b>Increases specialized transportation 2.5%</b> per year	<b>Not Included</b>
20% increase for <b>Specialized Transit</b> (\$183K)	Increase <b>Specialized Transit 2.5%</b> per year	<b>2.5% increase</b>
Funding for new DMV locations	funded new Green Bay and Madison locations	<b>Not included</b>
<b>Voting Rights</b>		
Automatic Voter Registration at DMV	Included	<b>Not included</b>
Restore voter residency requirement to 10 days prior to election	Included	<b>Not Included</b>

## **Budget Vetos**

You may view Governor Ever's Veto message here: [2019-21 Veto Message .pdf \(wi.gov\)](#)

The Governor's budget message included 50 partial vetoes. Very few related to mental health or other advocacy priorities

- The Governor changed a provision that provides \$15 million to Hospital Sisters Health System hospitals in Eau Claire and Chippewa Falls for mental health beds. He cut a requirement that the facilities be the primary receiver for emergency detention for two-thirds of the western Wisconsin counties specified in the bill.
- The Governor vetoed a portion of the requirements for the Behavioral Health Bed Tracker:

*“This section requires the Department of Health Services to provide to the entity awarded the grant funding for the expanded behavioral health bed tracker a list of operators with peer run respite and crisis stabilization beds as well as a list of emergency mental health services programs that are certified by the department and that perform crisis assessments.” The Governor vetoed this section because he objected to imposing these burdensome requirements on DHS. “The provision requires the department to collect information on some entities that are neither licensed nor certified by the state. Additionally, a crisis stabilization bed is not a unique licensing category, and the department does not have access to information regarding which facilities throughout the state have agreements with counties to utilize space for crisis stabilization. Further, the bill did not provide the department any additional resources...”*