

State of Misconsin 2013 - 2014 LEGISLATURE



2013 ASSEMBLY BILL 701

January 31, 2014 – Introduced by Representatives NYGREN, JAGLER, BALLWEG, BIES, CZAJA, ENDSLEY, KLEEFISCH, KNODL, KNUDSON, KOOYENGA, KRUG, T. LARSON, LEMAHIEU, LOUDENBECK, MARKLEIN, MURPHY, A. OTT, PETERSEN, PETRYK, RODRIGUEZ, SWEARINGEN, TRANEL, BILLINGS, GOYKE, KAHL, RICHARDS, RINGHAND and ZAMARRIPA, cosponsored by Senators DARLING, HARSDORF, GUDEX, OLSEN and SCHULTZ. Referred to Joint Committee on Finance.

1 AN ACT to amend 20.435 (5) (bc); and to create 51.422 of the statutes; relating

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to: opioid treatment programs and making an appropriation.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services (DHS) to create two or three regional comprehensive opioid treatment programs to provide treatment for opiate addiction in rural and underserved, high-need areas. In creating the program, DHS must obtain and review proposals for opioid treatment programs in accordance with its request-for-proposal procedures. These programs may not offer methadone treatment.

An opioid treatment program, under the bill, must offer an assessment to individuals in need of service to determine what type of treatment is needed. The opioid treatment program must provide counseling, medication-assisted treatment, and abstinence-based treatment. If a licensed residential program is necessary for an individual, the opioid treatment program must transition the individual there. The opioid treatment program must transition individuals who have completed treatment to county-based or private post-treatment care. The bill also requires DHS to submit annually, beginning approximately two years after the bill's effective date, a progress report on the outcomes of the opioid treatment program to the Joint Committee on Finance and appropriate standing committees of the legislature.

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

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

SECTION 1. 20.435 (5) (bc) of the statutes is amended to read:

 $\mathbf{2}$ 20.435 (5) (bc) Grants for community programs. The amounts in the schedule 3 for grants for community programs under s. 46.48 and for opioid treatment programs under s. 51.422. Notwithstanding ss. 20.001 (3) (a) and 20.002 (1), the department 4 5 may transfer funds between fiscal years under this paragraph. Except for amounts authorized to be carried forward under s. 46.48 and as otherwise provided in this 6 paragraph, all funds allocated but not encumbered by December 31 of each year lapse 7 to the general fund on the next January 1 unless carried forward to the next calendar 8 9 year by the joint committee on finance. Notwithstanding ss. 20.001 (3) (a) and 20.002 10 (1), the department shall transfer from this appropriation account to the appropriation account for the department of children and families under s. 20.437 11 12(2) (dz) funds allocated by the department under s. 46.48 (30) but unexpended on 13June 30 of each year.

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SECTION 2. 51.422 of the statutes is created to read:

15 **51.422 Opioid treatment programs. (1)** PROGRAM CREATION. The 16 department shall create 2 or 3 new, regional comprehensive opioid treatment 17 programs to provide treatment for opiate addiction in rural and underserved, 18 high-need areas. The department shall obtain and review proposals for opioid 19 treatment programs in accordance with its request-for-proposal procedures. A 20 program under this section may not offer methadone treatment.

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1 (2) PROGRAM COMPONENTS. An opioid treatment program created under this 2 section shall offer an assessment to individuals in need of service to determine what 3 type of treatment is needed. The program shall transition individuals to a licensed 4 residential program, if that level of treatment is necessary. The program shall 5 provide counseling, medication-assisted treatment, and abstinence-based 6 treatment. The program shall transition individuals who have completed treatment 7 to county-based or private post-treatment care.

8 (3) REPORT. By the first day of the 24th month beginning after the effective date 9 of this subsection [LRB inserts date], and annually thereafter, the department 10 shall submit to the joint committee on finance and to the appropriate standing 11 committees under s. 13.172 (3) a progress report on the outcomes of the program 12 under this section.

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SECTION 3. Nonstatutory provisions.

14(1) OPIOID TREATMENT PROGRAM FUNDING. During the 2013–15 fiscal biennium, 15the department of health services shall submit one or more requests to the joint 16 committee on finance under section 13.10 of the statutes to supplement the 17appropriation under section 20.435 (5) (bc) of the statutes from the appropriation 18 under section 20.865 (4) (a) of the statutes for a purpose of paying for the opioid 19 treatment programs under section 51.422 of the statutes, as created by this act. If 20the joint committee on finance releases the moneys, the department may not expend more for the opioid treatment programs than the amount of the supplement provided 2122by the joint committee on finance.

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(END)