

# PAUL TITTL

STATE REPRESENTATIVE • 25<sup>th</sup> Assembly District

# Assembly Committee on Ways and Means Assembly Bill 466 March 5, 2020

First of all, I would like to thank you, Chairman Macco and committee members, for allowing me to testify before you today on Assembly Bill 466.

Fifty-four of Wisconsin's 72 counties face a "significant shortage" of psychiatrists, and 20 have no practicing psychiatrist at all. This shortage has a significant effect on the mental health of people throughout the state. Further, it touches all people: rich and poor, young and old, working and non-working. This bill is designed to address that serious shortage.

AB 466 creates a tax incentive for psychiatrists graduating from medical school who stay in Wisconsin to practice psychiatry. The tax incentive also extends to psychiatrists from other states who move to Wisconsin to practice.

Under the bill, psychiatrists practicing in underserved areas of the state could claim a deduction for the first \$200,000 of income earned in a taxable year. Psychiatrists serving in other areas could claim a \$100,000 deduction. In either case, the deduction could be claimed for a total of five years and must be taken within the first two years a psychiatrist begins to practice in this state or returns to Wisconsin after practicing in another state. The deduction may be taken for 5 years.

The bill contains a clawback provision. Psychiatrists leaving the state during the five-year period, would be required to pay taxes that would have been due if this tax provision were not in place.

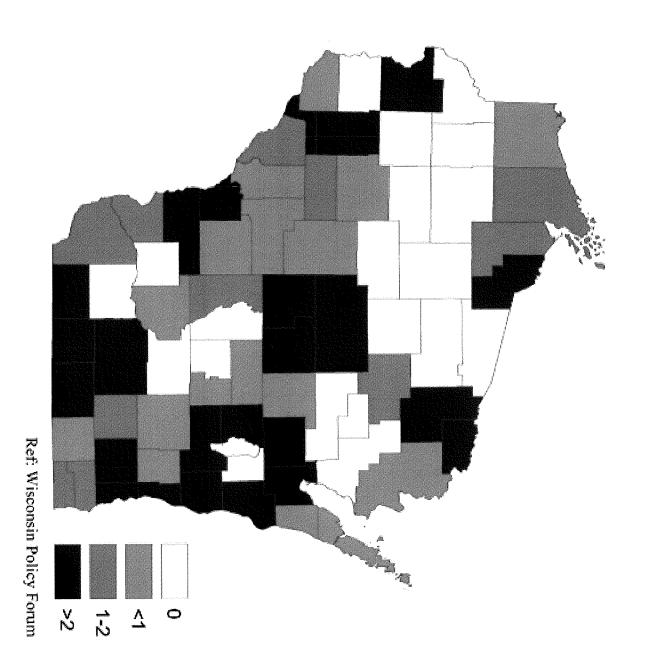
Mental health costs are staggering. The daily cost at the Mendota Mental Health Institute is \$1,129. During 2018 the institute had 102,878 inpatient days, amounting to \$116 million at the current rate.

When people suffer with untreated mental health matters, their situations often get worse, become more difficult to address, and spill over into family, social and employment settings, leading to significantly higher financial and social costs.

Attracting psychiatrists to our state and addressing these situations today is better than leaving them for our children and grandchildren to handle when the problems have grown even larger.

Thank you for this opportunity to testify before you today. I appreciate your consideration of this bill and would be happy to take any questions you might have.

# Wisconsin Psychiatrist Shortage Psychiatrists per 30,000 Residents



# Psychology Bill AB 466 Supplemental Points

- 1. 20 counties in Wisconsin have <u>no have no practicing psychiatrist</u> 37 counties have <u>less than 1 psychiatrist per 30,000 people</u>
- 2. The number doctors in WI has been increasing; but the number of psychiatrists has been going down.

% change in # of doctors in WI 2007-17	+16.7%
% change in # of psychiatrists in WI 2007-17	-3 %

3. What are <u>underserved areas</u>?

Leg. Council may wish to comment here. But generally, an underserved area as an area determined by the federal government to be an urban or rural area with a shortage of personal health services.

4. Health Professional Shortage Areas (HPSA)

The federal government uses the term Health Professional Shortage Area to designate underserved areas for medical services, dentistry and mental health.

For mental health services, an HPSA must have less than 1 psychiatrist for an area of 30,000 people.

Wisconsin currently has 148 HSPAs.

- 5. Would you be open to defining what is meant by underserved area in the bill?

  Yes, the bill does not define how underserved areas would be determined. We purposely left it undefined with the intention of modifying the bill based on input during the hearing process.
- 6. Wisconsin's current suicide rate is 14.8 suicides per 100,000 people.
- 7. Average age of Wisconsin psychiatrists: 50.5 years old
- 8. Percent of psychiatrists older than 65: 17.4%
- 9. How does Wisconsin compare to other states concerning mental health?

The Mental Health America prepares an annual report showing mental health trends for a variety of measures. On some we are doing better than on others. But we can improve.

- Adults with serious thoughts of suicide 37<sup>th</sup> (bottom 25% of states)
- Adults who have a substance abuse disorder. (35th)
- Youth with Severe Major Depressive Episode (45<sup>th</sup>)
- Youth with At Least One Major Depressive Episode (30th)
- 10. The Lafollette School of Public Affairs issued a paper in 2018 related to combatting the psychiatry shortage but didn't discuss the psychiatry tax incentive proposal other than to say AB 556 was introduced in 2017 but never passed.

Note: the paper said, "We recommend a series of policy options, as <u>no one solution will suffice to</u> <u>address the challenges facing the state</u>." (Paper: Combatting the Psychiatrist Shortage in Wisconsin: Policy Recommendations for Increasing the Psychiatry Workforce and Access to Mental Health Services, 2018)



2018 • No. 19

# Rural Counties Face Psychiatrist Shortage

Fifty-five of 72 Wisconsin counties face a "significant shortage" of psychiatrists and 20 have no practicing psychiatrists at all. The dearth of psychiatrists in these areas, along with the high prevalence of mental illness and substance abuse in the state, likely contribute to a gap in which more than half of Wisconsin adults in need of services for a mental health disorder go without care.

More than three-quarters of the state's counties have a significant shortage of psychiatrists under the state's definition and more than half have a shortage under a tighter federal standard, a Wisconsin Policy Forum (WPF) analysis has found.

As providers charged with diagnosing and treating mental health disorders, including prescribing medications, psychiatrists play a critical role in the behavioral health care delivery system alongside other professionals, such as therapists and psychologists. For that reason, the availability of psychiatrists is one important component to patients' overall access to mental health care. As discussed below, the costs of not providing such care can be substantial.

In 2015, WPF assessed outpatient behavioral health capacity in Milwaukee County and found that lack of access to psychiatrists, particularly among children, is a serious problem in the state's largest metro area. Here, we use data from the Wisconsin Medical Society to expand the analysis statewide and find significant shortages, particularly in rural areas.

### State Numbers Mask Shortage

The data list 759 psychiatrists in Wisconsin, roughly 1.3 per 10,000 state residents. However, the statewide number masks significant regional variation.

Twenty of Wisconsin's 72 counties have no practicing psychiatrists and 10 more counties have less than one full-time equivalent psychiatrist because they share one with multiple counties. For example, a single psychiatrist currently serves Ashland, Bayfield, and Iron counties. As shown in Figure 1, counties with few or no psychiatrists are most common in the northern portion of the state.

The Wisconsin Department of Health Services says areas with fewer than one

psychiatrist for every 10,000 residents have a "significant shortage." The U.S. Department of Health & Human Services generally identifies "shortage areas" as those with one psychiatrist or fewer for every 30,000 people.

Under the state standard, the Medical Society data show 55 of the 72 Wisconsin counties have a psychiatrist shortage. More than half of the counties (37) have fewer than one psychiatrist per 30,000 residents and meet the federal shortage criteria.

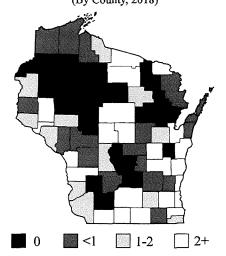
Exacerbating this problem is the fact the state's psychiatrist workforce is aging rapidly. The average Wisconsin psychiatrist is 50 years old and 15% of the state's psychiatrists are 65 or older. Average ages vary geographically, as well; psychiatrists in the central and northern portions of the state tend to be, on average, older than those in the southeast and south-central regions. (See Figure 2 on back page.)

Though the shortages observed here can be found within other health care disciplines (such as primary care doctors and nurses), there is evidence to suggest the shortage among psychiatrists is particularly severe. From 2003 to 2013, the number of U.S. physicians increased by 14.2%, but psychiatrist numbers declined by 0.2%, the journal *Health Affairs* found. Additionally, as medical doctors with the training and authority to prescribe, psychiatrists provide services that other mental health providers generally cannot. For this reason, a dearth of psychiatrists represents a challenge for those struggling with mental illness.

### Treatment Gap is Substantial

This is particularly true in Wisconsin, where mental illness is relatively common and often goes untreated. According to Mental Health America, Wisconsin is ranked 41st of the 50 states for prevalence

Fig. 1 Psychiatrists Per 30,000 Residents (By County, 2018)



of mental illness (the low ranking indicates a higher prevalence of mental health and substance use issues).

A 2017 DHS report found Wisconsin's overall treatment gap (the difference between the population in need of mental health disorder services and the population that is served) totaled 54% in 2015 among adults. The gap among those struggling with addiction is worse: less than one-quarter of the estimated 456,000 state residents in need of treatment for addiction receive it, for a gap of 77%.

DHS estimates suggest substance misuse and addiction alone cost an estimated \$6.8 billion annually in Wisconsin. A 2014 report from the agency estimates depression and schizophrenia cost the state \$800 million and \$1 billion each year, respectively, in treatment and medication, criminal justice, capital costs for mental health facilities, and lost productivity.

A number of initiatives aim to draw psychiatrists and other physicians to underserved areas. For example, there are

### Wisconsin Policy Forum

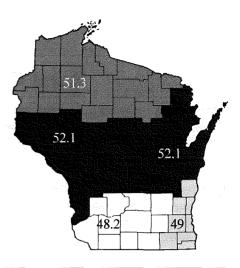
three loan assistance programs available to Wisconsin psychiatrists: the Health Professions Loan Assistance Program and Rural Physician Loan Assistance Program, which are run by the state Office of Rural Health; and the federal National Health Service Corps.

Additionally, the Primary Care and Psychiatry Shortage Grant (2013 Act 128) was created to encourage primary care physicians and psychiatrists to practice in underserved areas. The Medical College of Wisconsin opened two new psychiatry residency programs in northeastern and central Wisconsin in 2017. Other opportunities include the Wisconsin Conrad Waiver program, which offers an expedited immigration process to foreign-trained

physicians in return for providing primary care or general mental health care in federally designated shortage areas. Wisconsin has also created rural and urban outreach curriculum programs: Training in Urban Medicine and Public Health and the Wisconsin Academy for Rural Medicine.

Going forward, policymakers may want to consider increasing psychiatry residency class sizes or rural psychiatry residency programs, as approximately half of medical residents practice within the state in which they trained. In addition, expanding the use of integrated care models and of telemedicine for both patients and other health care providers could help to widen the reach of the existing psychiatrist workforce.

Fig. 2 Average Psychiatrist Age (By Region, 2018)



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# Policy notes

■ Hidden within a recent report on Wisconsin property values lies a significant shift: a decrease of \$3.5 billion, or 27%, in personal property values. As part of the 2017-19 budget, the Legislature and governor last year exempted machinery outside factories from local property taxes, part of a century-long shift toward exempting more personal property.

Following this change in state law, a recent Department of Revenue report

on statewide equalized property values shows the value of personal property outside factories dropped by more than one-third statewide (a 1973 law exempted most manufacturing machinery.)

Strong growth in state real estate values meant that the total for all property still increased by 4.5% in the 2018 report even with the decrease in personal property values. However, if personal property values had remained constant, the statewide increase would have been 5.1%.

The Legislature has committed the state to reimbursing local governments for the amount of taxes lost because of the personal property tax exemption, with the annual cost estimated in September 2017 at \$74.4 million. The exact total will depend on the local tax rates in the areas where the exempt property is found, but a \$3.5 billion drop in equalized values appears roughly in line with the estimated decrease in local property taxes.

# Health Professional Shortage Areas Mental Health June 2018

MENTAL HEALTH: Wisconsin

County and County Equivalent Listing

Adams County

Service Area: Adams County

Ashland County

Service Area: Ashland/Bayfield/Douglas/Iron/Sawyer/Washburn Counties

Facility: Bad River Health Svs

Barron County

Service Area: Barron County

· Facility: Turtle Lake Medical Clinic

Bayfield County

Service Area: Ashland/Bayfield/Douglas/Iron/Sawyer/Washburn Counties

Facility: Red Cliff Health Services

Facility: The Lakes Community Health Center, Inc.

Brown County

Facility: Green Bay Correctional Institution

Facility: N.E.W. Community Clinic

Facility: Oneida Community Health Center

Buffalo County

Service Area: Buffalo County

Burnett County

Service Area: Burnett County

Facility: Burnett Medical Center Clinic

Facility: Ingalls - St. Croix Regional Medical Center

Facility: St. Croix Tribal Health Dpt

Chippewa County

Service Area: Chippewa County

Facility: Stanley Correctional Institution

Clark County

Service Area: Clark County

Facility: Memorial Medical Center - Greenwood Facility: Memorial Medical Clinic-Neillsville

Columbia County

Service Area: Columbia County

Facility: Columbia Correctional Institution

Crawford County

Service Area: Crawford County

Facility: Kickapoo Valley Medical Clinic

Facility: Prairie Du Chien Correctional Institution

Dane County

Facility: Madison Community Health Center

Dodge County

Service Area: Dodge County

Facility: Dodge Correctional Institution

Page 235 of 254

Facility: Fox Lake Correctional Institution Facility: Waupun Correctional Institution

Door County

Service Area: Door County

Douglas County

Service Area: Ashland/Bayfield/Douglas/Iron/Sawyer/Washburn Counties

Florence County

Service Area: Florence County

Forest County

Service Area: Forest County

Facility: Potawatomi Health and Wellness Center Facility: Sokaogon Chippewa Indian Community

Grant County

Service Area: Grant County

Facility: Boscobel Area Health Center Bluff Street Clinic

Facility: Riverside Family Practice

Facility: Upland Hills Health Clinic - Mortfort

Facility: Wisconsin Secure Program Correction Facility

Green Lake County

Service Area: Green Lake County

Iowa County

Service Area: Iowa County

Facility: Upland Hills Health Clinic - Highland

Iron County

Service Area: Ashland/Bayfield/Douglas/Iron/Sawyer/Washburn Counties

Facility: Aspirus Grand View Clinic - Hurley

Jackson County

Service Area: Jackson County

Facility: Ho-Chunk Nation Health Department

Jefferson County · .

Service Area: Jefferson County

Juneau County

Service Area: Juneau County

Facility: Elroy Family Medical Center

Facility: Mile Bluff Clinic, LLP

Facility: Necedah Family Medical Center

Facility: New Lisbon Clinic

Facility: St. Joseph's Health Services, Inc. Dba Gundersen St. Joseph's

Hospital and Clinic Elroy Clinic

Facility: St. Joseph's Health Services, Inc. Dba Gundersen St. Joseph's

Hospital and Clinic Wonewoc Clinic

Kenosha County

Service Area: Kenosha County

Facility: Kenosha Community Health Center

Kewaunee County

Service Area: Kewaunee County

Lafayette County

Service Area: Lafayette County

Langlade County

Population Group: Low Income-Langlade County

Lincoln County

Service Area: Lincoln County

Marathon County

Service Area: Marathon County

Facility: Bridge Community Health Center

Marinette County

Service Area: Marinette County

Marquette County

Service Area: Marquette County

Menominee County

Population Group: Low Income-Menominee County Facility: Menominee Tribal Clinic-Wolf River

Milwaukee County

Service Area: Milwaukee Upper North

Service Area: Near North Side - Milwaukee

Facility: 16th Street Community Health Center

Facility: Gerald I. Ignace Health Center

Facility: Milwaukee Health Services

Facility: Milwaukee Secure Detention Facility

Facility: Outreach Community Health Centers, Inc.

Facility: Progressive Community Health Centers, Inc.

Facility: Whole Health Clinical Group/Milwaukee Center for Independence

Monroe County

Facility: Scenic Bluffs Health Center

Oconto County

Service Area: Oconto County

Facility: St. Clare Memorial Hospital - Gillett Health Center

Facility: St. Clare Memorial Hospital - Lena Health Center

Facility: St. Clare Memorial Hospital - Mountain Health Center

Facility: St. Clare Memorial Hospital - Suring Health Center

Pepin County

Service Area: Pepin County

Pierce County

Service Area: Pierce County

Polk County

Facility: Clear Lake Clinic

Facility: Frederic Clinic - St Croix Regional Medical Center

Facility: Luck Medical Clinic

Page 237 of 254

Price County

Service Area: Price County

Racine County

Facility: Racine Correctional Institution

Facility: Racine Youthful Offender Correctional Facility

Richland County

Service Area: Richland County

Rock County

Service Area: Beloit

Facility: Community Health Systems

Rusk County

Service Area: Rusk County

Sauk County

Service Area: Sauk County

Facility: House of Wellness Clinic Facility: Spring Green Medical Center

Facility: Upland Hills Health Clinic - Spring Green

Sawyer County

Service Area: Ashland/Bayfield/Douglas/Iron/Sawyer/Washburn Counties

Facility: Lac Courte Oreilles Tribal Health Center

Shawano County

Service Area: Shawano County

Facility: Stockbridge-Munsee Tribal Health Center

Sheboygan County

Service Area: Sheboygan County

Facility: Kettle Moraine Correctional Institution

Facility: Sheboygan Area Community Clinics

St. Croix County

Facility: Baldwin Clinic

Taylor County

Service Area: Taylor County

Trempealeau County

Service Area: Trempealeau County

Vernon County

Service Area: Vernon County Facility: Bland Clinic - Vmh Facility: Hirsch Clinic - Vhm

Facility: La Farge Medical Clinic - Vhm

Facility: St. Joseph's Health Services, Inc. Dba Gundersen St. Joseph's

Hospital and Clinic Hillsboro Clinic

Vilas County

Service Area: Vilas County

Facility: Great Lakes Inter-Tribal Council

Facility: Peter Christensen Health Center

Walworth County

Service Area: Walworth County

Washburn County

Service Area: Ashland/Bayfield/Douglas/Iron/Sawyer/Washburn Counties

Waupaca County

Service Area: Waupaca County

Waushara County

Service Area: Waushara County

Facility: La Clinica De Los Campesinos, Inc. Facility: Redgranite Correctional Institution

Winnebago County

Facility: Fox Cities Community Health Center

Facility: Oshkosh Correctional Institution

Wood County

Facility: Marshfield Family Health

# **Mental & Behavioral Health Fact Sheet**

### Background

In Wisconsin, over 1.45 million people are dealing with a mental or behavioral health (MBH) issue. According to Mental Health America (MHA), Wisconsin has the 4th-highest prevalence of mental illness in the nation. These illnesses and conditions range from moderate to severe and encompass depression, anxiety, bipolar disorder, schizophrenia, personality disorders and addiction and substance abuse. They affect not only those struggling with MBH conditions, but their families, friends and coworkers. In addition, the Department of Health Services (DHS) estimates that MBH illnesses adversely affect Wisconsin's economy by close to \$9 billion annually in terms of lowered productivity, public assistance and crime.

### Problem

With so many people adversely affected by MBH illness, Wisconsin is unable to meet the demand of all those who need help. Recent estimates from DHS show that **only 20 percent of those who seek treatment from public providers received care,** with children receiving services at twice the rate of adults. This is even lower than the national average, with estimates from the Substance Abuse and Mental Health Services Administration showing that 25 percent of those who seek treatment received care. Despite providers' best attempts to provide services to those most in need, there simply aren't enough providers.

Wisconsin has a shortage of 215 to 262 psychiatrists, according to estimates from Kaiser Family Foundation (KFF) and DHS, respectively. Twelve counties have no psychiatrists, and 12 others share one or fewer psychiatrists. This shortage is exacerbated by a rapidly aging workforce with more than a quarter of all psychiatrists over age 65, and close to half being over age 55.

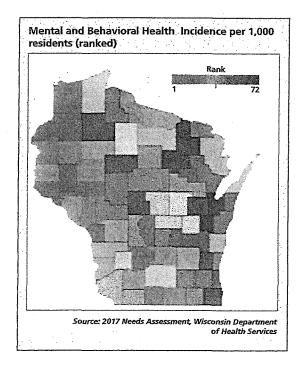
The issue is further compounded by the stigma that society attributes to people with MBH illnesses.

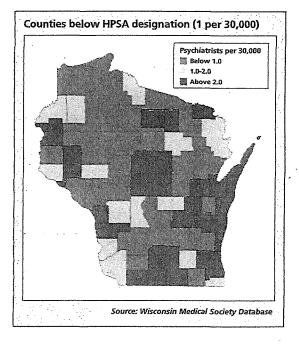
### Plan

Mental and behavioral health issues require immediate action to address the significant needs currently facing our communities. The Wisconsin Medical Society is confronting these issues through invigorated physician leadership. The Society will serve as a convener of physician groups, MBH workforce personnel, nonprofit organizations, educators, legislators and local, county and state agencies and will seek to improve the MBH climate in Wisconsin by:

- · Reducing Stigma
- Increasing Access to Care
- Building the Workforce

Improving MBH in Wisconsin is complicated and will involve collaboration among multiple groups. Together we can improve the health of those in need and the overall health of Wisconsin.







### National Comparisons

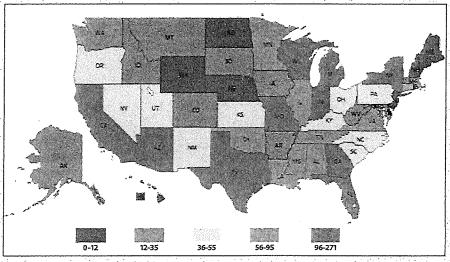
Wisconsin has one of the lower employment rates of psychiatrists nationwide, ranking 30th out of 50 states, according to the Bureau of Labor Statistics. This places Wisconsin behind regional peers such as Minnesota, Illinois and Michigan.

Further, according to MHA, Wisconsin lags behind Minnesota and lowa in terms of access to care and ranks 34th in mental health workforce availability. Current estimates put workforce shortages between 2,800 to 3,330 psychiatrists nationwide (6,090 by 2025).

In addition, Wisconsin has one of the highest needs for practitioners in order to remove its designation as a health provider shortage area (defined as one psychiatrist per 30,000 residents). It also ranks among the lowest states nationally in terms of available hospital beds for mental health patients. According to the Treatment Advocacy Center, Wisconsin has experienced an 18 percent decline in available beds since 2010. which is higher than the national average of 13 percent.

These data make it clear that Wisconsin trails its peers, both regionally and nationally, in important metrics regarding workforce and access.

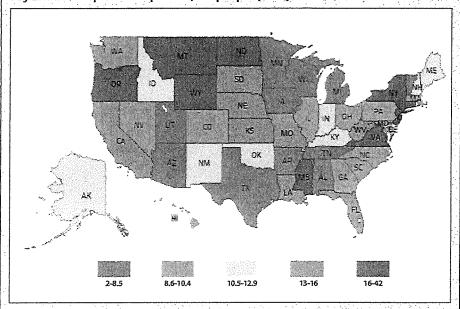
# Practitioners Needed to Remove Health Provider Shortage Area (HPSA) Designation



Source: Kaiser Family Foundation

Wisconsin ranks 45th out of 50 states in terms of the number psychiatrists needed to reduce its HPSA shortage.

### Psychiatric Hospital Beds per 100,000 people (2016)



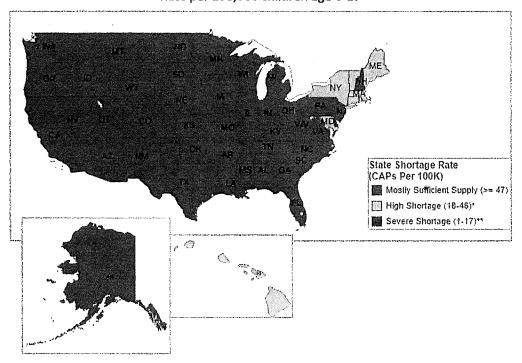
Source: Treatment Advocacy Center

Wisconsin ranks 42nd out of 50 states in terms of the lowest number of psychiatric beds available per 100,000 people.

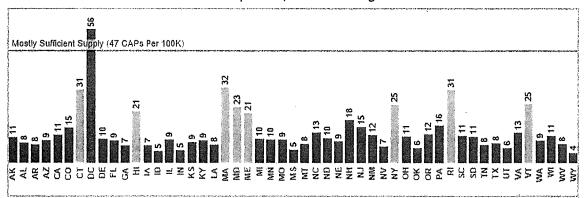
# **WISCONSIN**

# Child and Adolescent Psychiatrist (CAP) Workforce Distribution Map

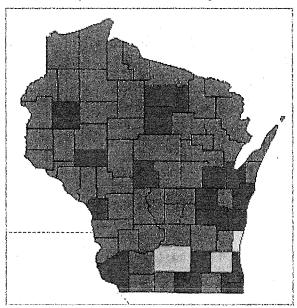
Practicing Child and Adolescent Psychiatrists by State 2015 Rate per 100,000 children age 0-17

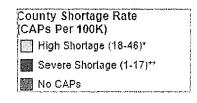


State CAPs per 100,000 children age 0-17



Practicing Child and Adolescent Psychiatrists by County 2015 Rate per 100,000 children age 0-17





\*Council on Graduate Medical Education. Re-examination of the Academy of Physician Supply made in 1980 by the Graduate Medical Education National Advisory Committee for selected specialties, Bureau of Health Professions in support of activities of the Council on Graduate Medical Education. 1990. Cambridge, ABT Associates.

\*\*Kim WJ, American Academy of Child and Adolescent Psychiatry Task Force on Workforce Needs. Child and adolescent psychiatry workforce: A critical shortage and national challenge. Acad Psychiatry. 2003;27:277–82.

Last Updated: March 2016

# Total CAPs in Wisconsin: 145

Population age 0-17: 1,299,502



# 11 CAPs per 100,000 children

Average age of CAPs:

**53** 

	TOTAL	Population,
COUNTY	CAPs	Children Under 18
ADAMS	0	3,004
ASHLAND	0	3,645
BARRON	1	9,845
BAYFIELD	0	2,703
BROWN	11	62,428
BUFFALO	0	2,788
BURNETT	0	2,773
CALUMET	0	12,572
CHIPPEWA	0	14,400
CLARK	0	10,096
COLUMBIA	0	12,671
CRAWFORD	0	3,435
DANE	44	108,751
DODGE	0	18,373
DOOR	0	4,660
DOUGLAS	0	· 9,014
DUNN	0	8,839
EAU CLAIRE	1	20,796
FLORENCE	0	674
FOND DU LAC	1	22,033
FOREST	0	1,878
GRANT	1	10,526
GREEN	0	8,562
GREEN LAKE	0	4,332

ı		TOTAL	Population, Children
	COUNTY	CAPs	Under 18
l	IOWA	0	5,540
	IRON	0	939
ı	JACKSON	0 .	4,632
	JEFFERSON	1	18,716
	JUNEAU	0 .	5,404
	KENOSHA	1	40,522
	KEWAUNEE	0	4,501
	LA CROSSE	3	24,034
	LAFAYETTE	0 ,	4,197
	LANGLADE	0	3,871
	LINCOLN	1	5,825
	MANITOWOC	1	16,819
	MARATHON	Q.	31,796
	MARINETTE	Ő	8,075
	MARQUETTE	. 0	2,955
	MENOMINEE	0	1,481
	MILWAUKEE	33	233,769
	MONROE	0	11,470
	OCONTO	0	0
	ONEIDA	1	6,134
į	OUTAGAMIE	3	43,921
	OZAUKEE	6	19,008
	PEPIN	0	1,603
	PIERCE	0	8,727

	TOTAL	Population, Children
COUNTY	CAPs	Under 18
POLK	0	9,486
PORTAGE	0	13,872
PRICE	0	2,416
RACINE	3	46,713
RICHLAND	0	3,937
ROCK	1	38,517
RUSK	0	3,019
ST CROIX	0	22,470
SAUK	0	14,580
SAWYER	0	3,273
SHAWANO	0	9,106
SHEBOYGAN	1	26,176
TAYLOR	0	4,865
TREMPEALEAU	0	7,192
VERNON	0	7,850
VILAS	0	3,602
WALWORTH	0	22,702
WASHBURN	0	3,065
WASHINGTON	0	30,644
WAUKESHA	25	88,284
WAUPACA	0	11,031
WAUSHARA	0	4,522
WINNEBAGO	4	35,330
WOOD	2	16,184