JIM STEINEKE MAJORITY LEADER

STATE REPRESENTATIVE • 5th ASSEMBLY DISTRICT

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P.O. Box 8953 Madison, WI 53708-8953

Testimony on Assembly Bill 118

Relating to: Increasing funding for the Child Psychiatry Consultation Program
Assembly Committee on Mental Health
June 4, 2019

Dear Chairman Tittl and members,

Thank you for the opportunity to come before your committee today to discuss Assembly Bill 118.

As many of you already know, Wisconsin continues to face a serious shortage of mental health providers. At the same time, many young adults in Wisconsin have reportedly been diagnosed with some form of a mental illness. In fact, according to a 2018 report from the Office of Children's Mental Health, 24% of young adults in Wisconsin have been diagnosed with a mental illness. Of those who are seeking mental health services, the report states that 44% see a primary care physician. These statistics show a clear need for additional mental health services for Wisconsin's youth.

To help address this need, Senator Darling and I created the Child Psychiatry Consultation Program (CPCP) through 2013 Act 127. The CPCP assists healthcare providers by offering enhanced care to children and adolescents with mild or moderate mental health care needs. Instead of waiting weeks or months to see a specialist, the program helps to provide children with access to the care they need immediately.

Since its inception, the CPCP has proven to be very successful in assisting both primary care providers and their patients. In fact, the CPCP has provided over 1,800 consultations for patients, with 90% of the 457 providers who utilize the program reporting satisfaction.

Currently, the CPCP is operated by the Medical College of Wisconsin in partnership with Children's Hospital through a \$1 million annual grant awarded through an RFP. Assembly Bill 118 increases the annual appropriation by \$1.5 million annually, and enables a statewide expansion of the program. This legislation continues on the success of the CPCP and significantly increases mental health care access for children and adolescents.

Chairman Tittl, again, I appreciate the opportunity to testify before the committee on this important legislation. At this time, I'd be happy to answer any questions you or the members of the committee may have.

disabilityrights | WISCONSIN Protection and advocacy for people with disabilities.

To; Assembly Committee on Mental Health

From: Disability Rights Wisconsin, Phyllis Greenberger, Lead Advocacy Specialist

Date: June 4, 2019

Re: Assembly Bill 118 - increasing funding for the child psychiatry consultation program

Chairman Tittl, Vice Chair Jagler, and members of the Committee, thank you for the opportunity to provide comments regarding AB 118 which would increase funding for the Child Psychiatry Consultation Program.

Disability Rights Wisconsin (DRW) is the designated Protection and Advocacy system for Wisconsinites with disabilities. DRW is charged with protecting and enforcing the legal rights of individuals with disabilities, investigating systemic abuse and neglect, and ensuring access to supports and services so that all Wisconsinites can learn, work, and live full lives in our communities free of abuse, neglect, and discrimination.

Wisconsin, like many states, is experiencing a severe shortage of child psychiatrists; 49 of Wisconsin's 72 counties have no child psychiatrist. The Child Psychiatry Consultation Program (CPCP) has provided additional capacity to address the extreme shortage of mental health supports for children and adolescents in our state. CPCP provides primary care providers with consultation from a psychiatrist and psychologist on issues such as diagnosis and medication management. The program also provides referrals to other mental health resources, as well as education and training for the participating primary care providers. While the need for the Child Psychiatry Consultation Program is statewide, funding constraints have limited expansion.

Parents often call DRW looking for services and supports for their children with mental health needs. We have heard many stories from parents experiencing very long wait lists for their child to get an appointment with a psychiatrist, including waiting over a year for that appointment. We have also heard stories of children and adolescents ending up hospitalized for psychiatric services, while they are waiting for an outpatient appointment. The hospital is a restrictive and often anxiety producing environment for children. If families were able to access outpatient mental health services to obtain an evaluation and medication recommendations, the need for hospitalization could be significantly reduced.

Given Wisconsin's severe shortage of child psychiatrists, the CPCP provides an innovative way to build capacity for supporting youth with mental health needs. CPCP has helped many primary care doctors provide better medication management, as well as referrals for additional services. This has resulted in better behavioral health care for children and their families in communities where CPCP is available. This bill will allow these services to be available to many additional providers and therefore allow them to better support the children within their communities. While this program will not solve all the issues that face families regarding their children's mental health, it has helped many families to get services more quickly, reducing symptoms and avoiding hospitalization — and with expansion can help many more.

MADISON	MILWAUKEE	RICE LAKE	· · · · · · · · · · · · · · · · · · ·
131 W. Wilson St. Suite 700 Madison, WI 53703	6737 West Washington St. Suite 3230 Milwaukee, WI 53214	217 West Knapp St. Rice Lake, WI 54868	disability rights wi.org
608 267-0214 608 267-0368 FAX	414 773-4646 414 773-4647 FAX	715 736-1232 715 736-1252 FAX	800 928-8778 consumers & family



TO:

The Honorable Members of the Assembly Committee on Mental Health

FROM:

Jon A. Lehrmann, MD

Charles E. Kubly Professor in Psychiatry and Behavioral Medicine

Chairman and Professor

Department of Psychiatry and Behavioral Medicine

Medical College of Wisconsin

DATE:

June 4, 2019

RE:

Testimony in Support of Assembly Bill 118, Expanding Wisconsin's Child Psychiatry

Consultation Program Statewide

Good morning Chairperson Tittl and members of the Assembly Committee on Mental Health. Thank you for holding a public hearing today on Assembly Bill 118 (AB 118), legislation to provide mental health access for all children and adolescents in the state by expanding the Wisconsin Child Psychiatry Consultation Program (CPCP) by an additional \$1.5 million annually.

My name is Dr. Jon Lehrmann. I Chair the Medical College of Wisconsin's (MCW) Department of Psychiatry and Behavioral Medicine, and am also the Associate Chief of Staff for Mental Health at the Clement J. Zablocki VA Medical Center in Milwaukee. I am here today representing MCW's strong support for AB 118.

MCW is very grateful to Senator Darling and Representative Steineke for authoring and advancing this legislation. Both Senator Darling and Representative Steineke were the original authors of this program in the 2013-2015 legislative session, and their longstanding and continued support of this program since that time has been inspirational for Wisconsin's children and adolescents struggling with mental health challenges.

MCW, in partnership with Children's Hospital of Wisconsin, currently operates Wisconsin's CPCP through a \$1,000,000 annual contract with the Wisconsin Department of Health Services. The program provides primary care providers with immediate, free-of-charge mental health consultations for their pediatric patients, as well as educational programming and referrals to community-based mental health resources.

The inspiration for this program began several years ago. My wife, now a retired pediatrician, would often call me with mental-health related questions for her pediatric patients. Seeing that this was a much larger, unmet need, we were able to secure a private, philanthropic donation from Michael and Billie Kubly to fund the creation of the Charles E. Kubly Child Psychiatry Access Project. Although the

Access Project started off as a small pilot program serving pediatricians in just two Milwaukee-area clinics, the initial results were so promising that the model helped lead to the enactment of 2013 Wisconsin Act 127, the Wisconsin Child Psychiatry Consultation Program.

The Kubly's interest in creating this consultation pilot program stemmed from the tragic loss of their son Charlie, who was lost to suicide. The Kubly's charity, the Charles E. Kubly Foundation, is devoted to improving the lives of those with depression.

MCW is proud of this example, where private philanthropy has positively helped to impact public policy by benefitting youth in the State of Wisconsin. This brings me to my next point; putting Wisconsin's mental health crisis into perspective to better highlight the severity of what we are all up against:

- A recent Kaiser study ranked Wisconsin 49th of 50 states, meeting just under 21% of the state's mental health needs.
- > The Wisconsin Department of Health Services found that 68 of Wisconsin's 72 counties have inadequate psychiatrists to meet communities' needs.
- > Even worse for children, 49 of Wisconsin's 72 counties do not have a child psychiatrist.
- > A *Milwaukee Journal Sentinel* analysis of 2016 workforce data "found that Wisconsin is worse than most states in its per-capita workforce of all types of mental health professionals: nurses, social workers, psychologists and psychiatrists."
- > Only 44% of adults with diagnosable mental health problems and less than 20% of children and adolescents receive needed treatment.

These data points do a good job highlighting Wisconsin's shortages, but they don't fully capture the truly staggering and often tragic impact on human life:

- > Suicide is the second leading cause of death among 15-24 year olds.
- > Young people between the ages of 15 and 24 have the highest rate in Wisconsin of hospitalizations and emergency room admissions for self-inflicted injuries.
- > People with severe mental illnesses are over 10 times more likely to be victims of violent crime versus the general population.
- > Half of all mental health disorders show first signs before a person turns 14 years old, and three quarters of mental health disorders begin before age 24.

We are deeply proud of the work the CPCP is doing to improve mental health outcomes for children and adolescents in Wisconsin. Expanding the program statewide under AB 118 will extend these efforts to all Wisconsin children.

The CPCP has provided over 2,500 consultations and over 1,200 hours of educational opportunities. Over 670 providers are enrolled in the program making CPCP CAP consultation available to approximately 250,000 Wisconsin children, and 94% of participants report satisfaction with the program. The CPCP has even provided consultations while children are still in their doctor's offices, as 84% of requests are responded to within 15 minutes. These words from a parent sum up the program's success:

"It was a quick turnaround in which my son's pediatrician called me to discuss medication and treatment options. He is currently stable and doing great in school, and he is even excelling in math!"

One primary care clinician also stated, "The CPCP has been a wonderful resource to me as a primary care provider... Without the program, I would have many patients who would not have access to proper mental health treatment. It is truly a great program!"

Quotes like these are what make our work so rewarding and inspiring.

I have also enclosed several testimonial letters in support of the CPCP from providers who have used it with great success. Please be sure to take a few moments to read through these support letters at your earliest convenience.

The success of this program stands in stark contrast to having children waiting weeks or months to see a mental health professional. For anyone who has dealt with a mental health issue, whether personally or with a loved one, you know that any wait time at all is unacceptable. Just as patients with physical ailments need immediate care, mental health needs are just as pressing.

I respectfully urge you to support AB 118, providing an additional \$1.5 million in funding to expand Wisconsin's Child Psychiatry Consultation Program across the entire State of Wisconsin. Thank you again for your time and attention. I am available if you have any questions.

If you have any questions following the conclusion of today's public hearing, please do not hesitate to contact Kathryn Kuhn, MCW's Vice President of Government and Community Relations, or Nathan Berken, Director of Government Relations at 414.955.8217, or at kkuhn@mcw.edu or nberken@mcw.edu.

Wisconsin Child Psychiatry Consultation Program (CPCP)

Supporting the behavioral health needs of Wisconsin children and adolescents The goal of the CPCP is to increase the capacity of primary care providers to support the behavioral needs of children and their families in their care by:

- Providing education and training in behavioral health issues to primary care providers.
- Providing consultative support in screening, diagnosis and management of children, and adolescents with behavioral health needs.
- Providing a referral support network with up-to-date psychiatric and community resources.

What is the CPCP?

The CPCP is similar to other national models designed to address child adolescent psychiatry shortages, and is one piece of the puzzle in addressing the behavioral health needs of children and adolescents in Wisconsin.

The Wisconsin CPCP model supports the behavioral health needs of children and families by providing:

- Provider-to-provider consultation to answer questions and provide information screening and diagnosis, medication management and treatment recommendations for behavioral or other therapy.
- Referral support for providers to assist their pediatric patients and their family with referrals to other mental health professionals and community resources.
- Education and training for enrolled primary care providers.

How does the Wisconsin CPCP work?

Enrolled providers can:

- Request child/adolescent psychiatric consultation by calling the CPCP telephone line or sending questions through a dedicated email address, and expect to receive a response within 30 minutes for phone calls and within one business day for emails.
- CPCP staff includes a child psychiatrist, a
 psychologist, and intake coordinators who are
 available by phone or email Monday through
 Friday, 8 a.m. to 5 p.m., to provide consultation
 and answer primary care provider questions.

- Access online and in-person training and education regarding screening and assessment, treatment recommendations, psychopharmacology for mental health and psychiatric disorders.
- Obtain referral assistance to connect children to other local mental health resources.

Who can receive consultation services?

Only enrolled providers can receive consultation services through CPCP. Enrollment is simple. Providers need to fill out an enrollment form. The form is available at www. chw.org/cpcp. The Wisconsin CPCP does not provide direct service to pediatric patients.

When did the Wisconsin CPCP begin and who funds this program?

In response to the child adolescent psychiatry shortages, Wisconsin appropriated state funding to create the Wisconsin CPCP in December of 2014.

In 2017, funding for the program increased to expand services to more providers within the state. In October 2018, DHS was awarded a grant from the federal government to extend services to additional primary care providers in southern and southwestern Wisconsin. Please see page 2 for information on CPCP's coverage as of December 2018.

The Department of Health Services (DHS) collaborated with the Medical College of Wisconsin and Children's Hospital of Wisconsin to design and develop the program.

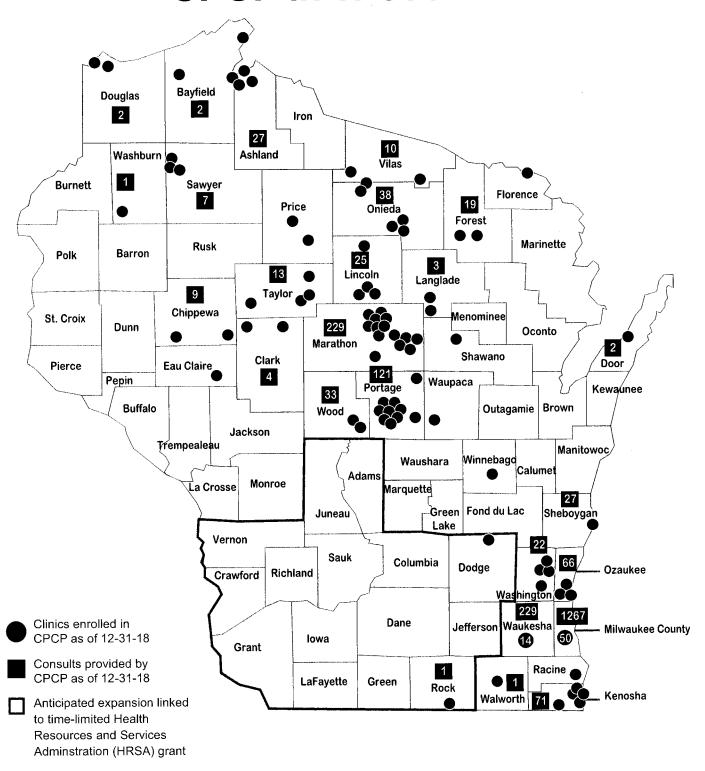
Who can enroll in CPCP?

Follow link below to learn more about enrollment: www.chw.org/CPCP

CPCP

www.chw.org/CPCP

CPCP in Wisconsin







May 2, 2019

W227 N6103 Sussex Road Sussex, WI 53089 tel 414.566.8100 fax 414.566.8038 www.myquadmedical.com/quad

The Honorable Dale Kooyenga State Senator State Capitol PO Box 7882 Madison, WI 53707

Dear Senator Kooyenga:

Thank you for your public service as Chair of the Senate Committee on Universities, Technical Colleges, Children and Families. I am writing to voice my strong support for legislation recently referred to your committee. Senate Bill 113, authored by State Senator Alberta Darling and Representative Jim Steineke, expands Wisconsin's Child Psychiatry Consultation Program (CPCP) across the entire state of Wisconsin, ensuring that all children and adolescents have access to mental healthcare.

I have been a pediatrician in the Milwaukee area for 29 years, and I am both astounded and saddened by the increased need for mental health resources in the past 15 years. I see children and adolescents literally on a daily basis who are in need of services for their anxiety, depression, academic difficulties, and problems with peers related to bullying. I have been fortunate enough to use the CPCP for the past 6-12 months and have found it to be such a valuable resource. Because of the lack of rapid access to mental health providers, primary care providers, such as myself, are now the first line in treating mental health disorders. With the CPCP at my disposal, I feel I am able to do a better job in caring for my patients. I can call or email the CPCP and get an answer to my question about medication or diagnosis within 24 hours, but usually faster than that. They also provide me with the opportunity to get my patients a "second opinion" consult with one of the Children's Hospital psychiatrists when I feel extra help is needed. I imagine this service would be even more valuable in rural areas of the state where it is even more difficult to find a child/ adolescent psychiatrist. I consider the CPCP to be extremely valuable to me in managing my young patients with challenging mental health disorders.

The CPCP provides primary care providers with free-of-charge pediatric mental health consultations for their child and adolescent patients struggling with mental health concerns. This is critical because a recent Kaiser study ranked Wisconsin 49th out of 50 states, meeting just under 21% of the state's mental health needs, and the Wisconsin Department of Health Services also found that 68 of Wisconsin's 72 counties have inadequate psychiatrists to meet communities' needs.

Expanding the CPCP statewide will provide immense benefits for Wisconsin's youth. This service's free-of-charge consultations continue to be an invaluable resource as I care for my patients, and the program's range of educational offerings greatly clarify the issues related to appropriate mental health diagnosis and treatment.

Please support Senate Bill 113, legislation to expand the CPCP statewide. I sincerely believe this program should be available to clinicians all across Wisconsin, as it will be to the benefit of Wisconsin's youth. Please don't hesitate to let me know if you have any questions about the program or my support.

Sincerely,

Kim McElroy, MD

QuadMed-Sussex Health Center

Kim McElroy, MD

W227 N6103

Sussex Road, WI 53089

414-566-6400



April 17, 2019

The Honorable Dale Kooyenga State Senator State Capitol PO Box 7882 Madison, WI 53707

Dear Senator Kooyenga:

Thank you for your public service as Chair of the Senate Committee on Universities, Technical Colleges, Children and Families. I am writing to voice my strong support for legislation recently referred to your committee. Senate Bill 113, authored by State Senator Alberta Darling and Representative Jim Steineke, expands Wisconsin's Child Psychiatry Consultation Program (CPCP) across the entire state of Wisconsin, ensuring that all children and adolescents have access to mental healthcare.

As a primary care pediatrician and Chief Medical Officer at Children's Hospital of Wisconsin, I have utilized this important resource for my own patients and experienced the multiple benefits of the CPCP. Some of those benefits are timely access, relevant medical advice from experts and collaboration which allows the patient's medical home to remain at the center of care. These are best practices for the delivery of high quality and meaningful mental health services.

The CPCP provides primary care providers with free-of-charge pediatric mental health consultations for their child and adolescent patients struggling with mental health concerns. This is critical because a recent Kaiser study ranked Wisconsin 49th out of 50 states, meeting just under 21% of the state's mental health needs, and the Wisconsin Department of Health Services also found that 68 of Wisconsin's 72 counties have inadequate psychiatrists to meet communities' needs.

Expanding the CPCP statewide will provide immense benefits for Wisconsin's youth.

Please support Senate Bill 113, legislation to expand the CPCP statewide. I sincerely believe this program should be available to clinicians all across Wisconsin, as it will be to the benefit of Wisconsin's youth. Please don't hesitate to let me know if you have any questions about the program or my support.

Sincerely,

Michael F. Gutzeit

Chief Medical Office, VP

Children's Hospital of Wisconsin

nuluy Esty

9000 W. Wisconsin Avenue

Milwaukee, WI 53226

April 30, 2019

The Honorable Dale Kooyenga State Senator State Capitol PO Box 7882 Madison, Wi 53707

Dear Senator Kooyenga:

Thank you for your public service as Chair of the Senate Committee on Universities, Technical Colleges, Children and Families. I am writing to voice my strong support for legislation recently referred to your committee. Senate Bill 113, authored by State Senator Alberta Darling and Representative Jim Steineke, expands Wisconsin's Child Psychiatry Consultation Program (CPCP) across the entire state of Wisconsin, ensuring that all children and adolescents have access to mental healthcare.

I am a pediatrician serving patients from Milwaukee and surrounding suburbs. The mental health care needs of my patients have greatly increased since I started working in 1984. There are not enough mental health care providers to help my patients, indeed sometimes they wait a year for services. I am extremely grateful for the expert advice I receive from CPCP. Sometimes I can help the patient until they can get services and sometimes I can take care of the patient without the need for a referral. I wouldn't have been able to do this without the tremendous support I get from CPCP. They provide timely advice and have worked hard to provide ongoing education and support to primary care providers.

The CPCP provides primary care providers with free-of-charge pediatric mental health consultations for their child and adolescent patients struggling with mental health concerns. This is critical because a recent Kaiser study ranked Wisconsin 49th out of 50 states, meeting just under 21% of the state's mental health needs, and the Wisconsin Department of Health Services also found that 68 of Wisconsin's 72 countles have inadequate psychiatrists to meet communities' needs.

Expanding the CPCP statewide will provide immense benefits for Wisconsin's youth. This service's free-of-charge consultations continue to be an invaluable resource as I care for my patients, and the program's range of educational offerings greatly clarify the issues related to appropriate mental health diagnosis and treatment.

Please support Senate Bill 113, legislation to expand the CPCP statewide. I sincerely believe this program should be available to clinicians all across Wisconsin, as it will be to the benefit of Wisconsin's youth. Please don't hesitate to let me know if you have any questions about the program or my support.

Sincerely,

Mary Jo Zimmer, MD 3003 Good Hope Road Milwaukee, WI 53209 414-352-3100 April 24, 2019

The Honorable Dale Kooyenga State Senator State Capitol PO Box 7882 Madison, WI 53707

Dear Senator Kooyenga:

Thank you for your public service as Chair of the Senate Committee on Universities, Technical Colleges, Children and Families. I am writing to voice my strong support for Senate Bill 113, authored by State Senator Alberta Darling and Representative Jim Steineke. The Bill expands Wisconsin's Child Psychiatry Consultation Program (CPCP) across the entire state of Wisconsin, ensuring that all children and adolescents have access to mental healthcare.

CPCP provides primary care providers with free-of-charge pediatric mental health consultations for their child and adolescent patients. As a general pediatrician in Kenosha County, I have found CPCP to be an invaluable resource for me and my patients.

The program's most direct impact is its ability to provide timely expert medical advice. As a recent graduate from a highly-esteemed pediatric residency program, I can assure you that mental health training is limited for pediatricians, and even the best-trained pediatricians often find these disorders to be intimidating or "out of their scope." With the rising rates of depression and anxiety in children and adolescents, it is no longer an option to be out of their scope. These issues are too prevalent to be overlooked by the primary care provider or passed off to specialists. Mental health disorders are steadily on the rise in children, and suicide is now the 2nd leading cause of death in children and adolescents aged 10-24 years old. CPCP provides a lending hand to primary care providers who are undertrained for this growing problem.

A recent Kaiser study ranked found that Wisconsin is meeting just under 21% of the state's mental health needs, ranking 49th out of 50 states. The Wisconsin Department of Health Services found that 68 of Wisconsin's 72 counties have inadequate psychiatrists to meet communities' needs. Let's improve that! Expanding CPCP statewide will allow other counties to benefit as much as I do. Expanding CPCP will help ensure children aren't rushed to hospitals when a CPCP consultant can help keep that child in school or at home. Expand CPCP so doctors don't feel helpless in combatting mental illness.

Without well-trained and well-supported primary care providers, children with mental health disorders receive inadequate or inappropriate care. This is costly to the system and to the family. Often children will be sent to an emergency room because the primary care provider isn't confident in addressing the issue. Or they'll be put on a months-long waitlist to see a psychiatrist while their symptoms deteriorate as the illness goes untreated for months. Plus, many psychiatrists do not accept State insurance. This

leaves a huge gap in mental health care. CPCP bridges this gap by empowering providers like me to take on mental health disorders in the primary care medical home and thus improve children's mental health care in Wisconsin. I can personally attest that CPCP has helped decrease my patients' emergency room visits, hospitalizations, and delays in treatment.

Furthermore, CPCP provides education to pediatricians like me so we can begin to take care of these children more effectively on our own, thereby creating a sustainable program for Wisconsin. I now see >100 patients with anxiety or depression. Before starting in Kenosha, my practice saw 0. By both training pediatricians and giving them a safety net resource, CPCP is providing a tremendous amount of mental health care access to Wisconsin children.

Please support Senate Bill 113, legislation to expand the CPCP statewide. I sincerely believe this program should be available to clinicians all across Wisconsin, as it will be to the benefit of Wisconsin's youth. Please don't hesitate to let me know if you have any questions about the program or my support.

Sincerely,

Landon B. Krantz, MD FAAP

lkrantz@chw.org

8600 75th St Suite 101, Kenosha WI 53142

847-337-6151



TO: Assembly Committee on Mental Health

FROM: Robert Rohloff, MD, Director of Quality & Patient Safety of Children's Medical Group

at Children's Hospital of Wisconsin

DATE: Tuesday, June 4, 2019

RE: Support for AB 118—Statewide expansion of Wisconsin's Child Psychiatry Consultation

Program

Good afternoon, Chairman Tittl and members of the committee. My name is Dr. Bob Rohloff and I am the Director of Quality & Patient Safety of Children's Medical Group at Children's Hospital of Wisconsin. Thank you for allowing me this opportunity to testify today in support of AB 118, which relates to expanding the Wisconsin Child Psychiatry Consultation Program.

We know that a child's mental health significantly impacts their overall health, well-being and development. Kids need people to care for them who are specially trained to understand their developing bodies and minds. Children's offers a comprehensive array of mental and behavioral services to children, youth and families at locations across the state. By integrating mental health care delivery in primary care and through valuable partnerships with the State, community organizations and schools, Children's has worked to increase pediatric access to mental and behavioral health care services.

As you know, together with support from the Wisconsin Department of Health Services, the Medical College of Wisconsin and Children's jointly operate the Child Psychiatric Consultation Program (CPCP).

I'd like to share stories that two of my colleagues passed on regarding the value and benefit of the CPCP to their practice.

Larissa Malmstadt, MD, a pediatrician at Children's Oklahoma Pediatrics, says that:

"Following my residency, I moved to central Maine to practice general pediatrics in a new place with very little support from pediatric subspecialists, including mental health professionals. I had to learn very quickly how to treat children for attention deficit/hyperactivity disorder (ADHD), depression and anxiety through literature and the help of my very capable partners. When I returned to Milwaukee, I felt rather confident in my abilities to care for these children, but was absolutely thrilled when the CPCP came into being.

Now I have immediate access to local child psychiatrists who can help me care for even more of these children and to assuage my fears when I have questions about things I am not sure of. I have something to offer families when waitlists seem interminable. I have trusted colleagues with whom to collaborate on my toughest cases. I cannot tell you how helpful this program has been for me and for my patients and their families and I am extremely grateful every day to know that these physicians are here to help this community."

Renee Szafir, MD, a pediatrician at Delafield Pediatrics, explains that:

"The CPCP has been an extremely valuable resource for me as a pediatrician. There is a significant shortage of mental health care providers in our area, and as a pediatrician, I feel it is my duty to be able to step in to help these children if mental health access is unavailable. Often, families prefer to stay with a provider they trust in their medical home, instead of traveling long distances to see specialists. And

Your Children's Miracle Network Hospital CPCP allows families to do just that. For me to be able to consult a psychiatrist or psychologist and then circle back to families with recommendations, they feel more confident in the treatment we are pursuing. The CPCP has built my knowledge on treating children with mental health concerns and I can refer back to all that I've learned throughout the years. Upon leaving residency, I felt very unsure about treating mental illness; now I feel like that it is one of my strengths – due in part to the resources from the CPCP team.

I always reflect on this patient experience. I had two new patients on my schedule, whom I thought were visiting for a routine health check. As it turned out, they had several mental health diagnoses and were on a large regimen of medications, most of which I did not feel comfortable managing. Their nurse practitioner who had been treating them was no longer able to provide care. They had tried to seek care at multiple offices with different pediatricians, however with their state insurance, they could not find anyone who would continue to prescribe their medications – medications that would be dangerous to stop abruptly. Rather than referring them to try yet another attempt to find a specialist, I utilized the CPCP. They helped guide me through prescribing their medications, advising as to what lab work was needed to make sure there were no serious side effects and helping me to care for these children with complex concerns. I touched base with the CPCP staff every month and they helped me safely care for the children until their care was transferred. The CPCP staff were even able to help me safely wean them off many of their medications they did not need, providing safe and effective care. This family was forever grateful to Children's for being able to assist them. Both children are now doing very well in the care of a pediatric psychiatrist."

As you've heard, the CPCP provides physicians in Wisconsin with the expert resources and education they need to provide their patients with timely and safe mental and behavioral health care. With the state's increased investment, CPCP would be able to extend services across the entire state. This would mean additional increases in access to mental and behavioral health care for more children and families in need.

Chairman Tittl and committee members, I thank you again for the opportunity to testify in support of AB 118. I am happy to answer any questions now. If you have any questions, comments or concerns after the hearing, please feel free to contact me via email at rrohloff@chw.org or via phone at 414-266-7588.

As you know, Children's Hospital of Wisconsin (Children's) serves children and families in every county across the state. We have inpatient hospitals in Milwaukee and the Fox Valley. We care for every part of a child's health, from critical care at one of our hospitals, to routine checkups in our primary care clinics. Children's Hospital also provides specialty care, urgent care, emergency care, dental care, school health nurses, foster care and adoption services, family resource centers, child health advocacy, health education, family preservation and support, mental health services, pediatric medical research and the statewide poison hotline.



TO:

Assembly Committee on Mental Health

FROM:

Robert Chayer, M.D., Associate Professor, Chucker Aring Chair of Child & Adolescent

Psychiatry at Children's Hospital of Wisconsin

DATE:

Tuesday, June 4, 2019

RE:

Support for AB 118—Statewide expansion of Wisconsin's Child Psychiatry Consultation

Program

Good afternoon, Chairman Tittl and members of the committee. My name is Dr. Bob Chayer and I am the Chair of Child & Adolescent Psychiatry at Children's Hospital of Wisconsin. Thank you for allowing me this opportunity to testify today in support of AB 118, which relates to expanding the Wisconsin Child Psychiatry Consultation Program.

A child's mental health significantly impacts their overall health, well-being and development. One in five young people will have diagnosable mental health symptoms during their childhood and one in ten will have a serious mental health concern that affects their ability to learn. The World Health Organization tells us that over the past decade childhood depression has increased by 18 percent and anxiety by 15 percent. Suicide is the second leading cause of death among teenagers in Wisconsin and across the country. Mental health concerns can have a serious impact on physical health and a child's progression into adulthood. Mental illnesses are associated with increased risk for chronic diseases including substance abuse, diabetes, heart disease and cancer. Nationally, mental health hospitalizations occur in 199 per 100,000 residents. In Wisconsin, that number is significantly higher at 223 per 100,000 residents.

Kids need people to care for them who are specially trained to understand their developing bodies and minds. An alarming shortage of pediatric mental health providers in Wisconsin and across the country contributes to the difficulty families have in accessing the mental and behavioral health care their children need. Nearly 50 of Wisconsin's 72 counties are designated as significant shortage areas for adult and pediatric mental health providers, including counselors, therapists, psychologists and psychiatrists. There are approximately 1.5 million children in Wisconsin, yet there are only 150 child and adolescent psychiatrists practicing in the state. In fact, Wisconsin ranks 50th in the nation related to access as measured by youth with major depression who did not receive mental health services.

With funding and support from the Wisconsin Department of Health Services and the Kubly Family, the Medical College of Wisconsin and Children's operate the Child Psychiatric Consultation Program (CPCP) which provides primary care providers phone or email access to expert pediatric psychiatric experts to help answer questions and provide consultation to help appropriately screen for and diagnose a number of conditions, offer community resources and support, and appropriately manage psychotropic medication. By allowing their physicians direct access to consultation with specialists, children are able to receive adequate and timely care and referrals to additional mental health resources that may be available in their community.

Your Children's Miracle Network Hospital Children's staff, including the intake team and child and adolescent psychologist, provide two of the three major components of the program: the resource coordination and the behavioral health psychology consultation. Additionally, all of Children's pediatric clinics in the southeastern Wisconsin region (approximately 26 clinics) and more than 140 Children's Medical Group providers are enrolled to participate in the CPCP. Many physicians call for assistance, relying on the pediatric expertise of the Child Psychiatrists at the Medical College of Wisconsin and Children's to assist in this important aspect of patient care. Additionally, the CPCP team provides medical education and training to primary care physicians, deepening their knowledge and understanding of pediatric mental health care, and increasing their comfort level in helping care for and manage future patients' needs.

The CPCP has grown to work with 150 clinics across the state, providing more than 2,500 physician consultations. However, there are still populations in Wisconsin where physicians do not have access to the valuable resources provided by CPCP. With the state's increased investment of \$1.5 million annually, as outlined in SB 113, CPCP would be able to extend services across the entire state, increasing access to mental and behavioral health care for all Wisconsin children in need.

Chairman Tittl and committee members, I thank you again for the opportunity to testify in support of AB 118. I am happy to answer any questions now. If you have any questions, comments or concerns after the hearing, please feel free to contact me via email at rchayer@chw.org or via phone at 414-266-2932.

As you know, Children's Hospital of Wisconsin (Children's) serves children and families in every county across the state. We have inpatient hospitals in Milwaukee and the Fox Valley. We care for every part of a child's health, from critical care at one of our hospitals, to routine checkups in our primary care clinics. Children's Hospital also provides specialty care, urgent care, emergency care, dental care, school health nurses, foster care and adoption services, family resource centers, child health advocacy, health education, family preservation and support, mental health services, pediatric medical research and the statewide poison hotline.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN

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June 4, 2019

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Registration in Support and Verbal Testimony

AB 118 Relating to Increased Funding for the Child Psychiatry Consultation
Program (CPCP)

Honorable Chair Tittl and esteemed colleagues:

Thank you for the opportunity to testify in strong favor of the passage of Assembly Bill 118, providing expansion funding for the **Child Psychiatry Consultation Program (CPCP)**. I represent the over 900 members of the Wisconsin Chapter of the American Academy of Pediatrics, including primary and subspecialty pediatricians and other health professionals dedicated to the health and well-being of all children.

I have served as the executive director of our organization for over twelve years. From the start, the key topic that demanded my attention was the drastic rise in mental health disorders for children and adolescents. Anecdotally, our members report that up to 40% of their routine practice involves mental health concerns including anxiety, depression, ADHD and substance misuse. As an organization, we have worked to provide educational and peer-to-peer supports between primary care and mental health professionals as a priority.

June 4, 2019

WIAAP Testimony for AB 118

Assembly Committee on Mental Health From infants to young adults, the very limited access to board certified child and adolescent psychiatrists is of grave concern. Primary care clinicians, most of whom have only cursory training in mental and behavioral health provision, are called upon to assess, screen, diagnose and surveil these cases on a daily basis. They want to provide care for their patients and families with whom they have trusting relationships, knowing that waiting lists for behavioral health referrals are long.

WIAAP first engaged in efforts to bring the CPCP to life prior to the signing of Act 127 in 2014 by Governor Walker. As a conduit and channel to intended users of the service, we have promoted the implementation of the CPCP, and collaborated with the Wisconsin Department of Health Services, the Medical College of Wisconsin and Children's Hospital of Wisconsin to recruit clinicians and provide accredited educational opportunities.

Already, the expansion of the program from the initial two regional hubs has bridged the gap for many providers. At the close of last year, nearly 650 clinicians in 152 clinics and 33 counties were enrolled. For these primary care clinicians, just knowing they have a resource when needed has provided improved quality of care for their clinics.

Through a simple phone call or email, they get the help they need from a team of behavioral health experts providing the consultation needed for improved confidence in care delivery.

The ability to team virtually provides educational development that ultimately increases the capacity of the primary care office to handle cases of increasingly complex nature. More and more patients are seen by their primary care provider instead of waiting months to see a psychiatrist when the conditions are mild to moderate. The CPCP is a lifeline.

Expanding the funding for the CPCP per the provisions in AB 118 is a critical step forward in implementing real quality improvements and increased access to care. We urge you to put forth this bill as a model of commitment to mental and behavioral health for youth, adolescents and young adults in our state.

Sincerely,

AMERICAN ACADEMY OF PEDIATRICS Wisconsin Chapter

Kia Kjensrud LaBracke Executive Director

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