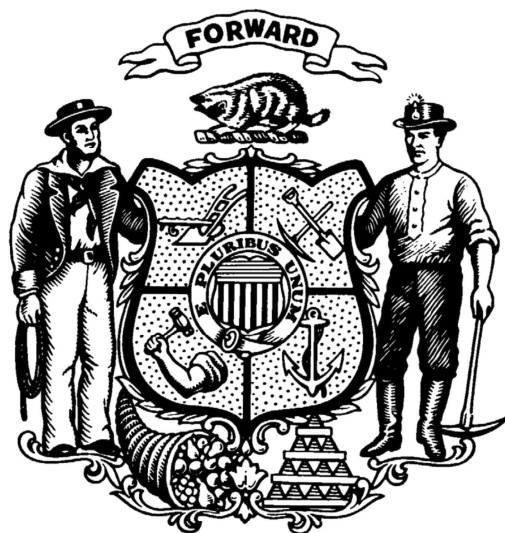


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



June 2, 2023
VIRTUAL MEETING
(via Zoom)

Kevin Florek
Chairperson

Tony Evers
Governor



Kevin Florek
Chairperson

Sandy Hardie
Vice Chairperson

Christine Ullstrup
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Meeting of the State Council on Alcohol and Other Drug Abuse (SCAODA)

June 2, 2023

9:30 AM to 1:00 PM

<https://dhs.wi.zoomgov.com/j/1606004151>

Phone: 1-669-254-5252

Meeting ID: 160 600 4151

MEETING AGENDA

1. Welcome and Introductions.....Kevin Florek, SCAODA Chairperson
2. Approval of March 3, 2023 Meeting Minutes.....Council Members...p. 5
3. Public Input.....SCAODA Chairperson
4. Update from Wisconsin Council on Mental Health.....Jessica Barrickman
5. Department of Health Services Updates.....Sarah Valencia, DHS
6. Committee Updates:
 - Executive CommitteeKevin Florek...p. 12
 - ✓ ATLAS Support Request
 - Diversity CommitteeDenise Johnson
 - Intervention & Treatment CommitteeRoger Frings and Sheila Weix...p. 14
 - Planning and Funding CommitteeChristine Ullstrup and Beth Collier...p. 23
 - Prevention CommitteeStacy Stone and Chris Wardlow...p. 34
 - ✓ Motion: *SCAODA to communicate to members of the State Legislature and Governor Evers the need for a strong state Tobacco 21 policy*
 - ✓ Motion: *SCAODA to oppose 2023 SB130/AB127*
7. Vital Strategies Presentation.....Adrienne Hurst, Vital Strategies
8. Homelessness Services Program Updates.....Amy Pulda,³DHS

- 9. Overdose Alert System.....Tom Bentley and Caitlin Murphy, DHS
- 10. Agency Reports:
 - Other Agencies.....Agency Designees
- 11. Bureau of Prevention Treatment and Recovery Update.....Teresa Steinmetz, DHS
- 12. Agenda Items for September 8, 2023 Meeting.....Council Members
- 13. Meeting Adjournment.....Council Members

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Council’s primary function is providing leadership in Wisconsin on substance use disorder (SUD) issues, advising Wisconsin state agencies on SUD prevention, treatment and recovery activities, and coordinating SUD planning and funding initiatives across state agencies. The Bureau of Prevention Treatment and Recovery within DHS staffs the Council. DHS is an equal opportunity employer and service provider.

If you need accommodations because of a disability, need an interpreter or translator, or need this material in another language or format, you may request assistance to participate by contacting Sarah Boulton at sarah.boulton@dhs.wisconsin.gov.

OPEN MEETING MINUTES

Name of Governmental Body: State Council on Alcohol and Other Drug Abuse		Attending: Members in Attendance: Kevin Florek, Jessica Geschke, Tina Virgil, Paul Krupski, Jennifer Stegall, Autumn Lacy, Jan Grebel, Subhadeep Barman, Deb Kolste, Sandy Haride, Christine Malone, Terry Schemenauer, Christine Ullstrup, Nichol Wienkes, Senator Jeff Smith, Mitch Goettl (on behalf of Senator Jesse James), Ann DeGarmo, Fil Clissa, Faith Price, Ritu Bhatnagar, MJ Griggs Guests: Denise Johnson, John Fournelle, Traci Goll, Roger Frings, Dennis Radloff, Michael Kemp, Miah Olson, Chris Wardlow, Kelsey Knowles, Catherine Taylor, Sarah Johnson, Maureen Busalacchi, Sara Rhodes, Department of Health Services Staff: Sarah Boulton, Jennifer Beer, Leilani Nino, Alicia Cook, Annie Larson, Matthew Fure, Saima Chauhan, Julie Nalepinski, Janet Fleege, Heather Carlson, Andrea Jacobson, Allison Weber, Simran Arora, Tiffany Nielson, Annie Vulpas, Nancy Michaud, Jacob Niesen, Teresa Steinmetz
Date: 3/3/2023	Time Started: 9:33am	Time Ended: 12:34pm
Location: Online via Zoom		Presiding Officer: Kevin Florek

Minutes

1. Call to Order

Council Chairperson Kevin Florek called the meeting to order at 9:33am. Quorum confirmed to conduct Council business.

2. Approval of December 2, 2022 Meeting Minutes

Deb Kolste moved to approve the minutes of December 2, 2022.

Christine Ullstrup seconded the motion to approve the minutes.

No comments, corrections made.

Meeting minutes were approved unanimously.

3. Public input

Michael Kemp offered public comment thanking the Council for following up on the discussion from last meeting around the Department of Safety and Professional Services (DSPS) and sending letters to the Legislature and Joint Committee on Finance.

4. Horizon High School Presentation:

John Fournelle and Traci Goll provided the presentation on Horizon High School. Horizon High School is Madison’s only Wisconsin Recovery High School. Recovery schools are separate, distinct schools that provide education, and both individual and group therapy to support sobriety and mental health.

Horizon High School started operation in January 2005 as a private, non-profit, incorporated recovery high school with a \$10K family donation, and six students at \$5K tuition. Starting in 2011, Horizon contracted with Madison Metropolitan School District (MMSD) to provide services to their students; originally MMSD paid HHS between \$640-\$760/month/student. Starting in 2022-23, MMSD is paying between \$960-\$1000/month/student. Other districts pay \$1000/month for students from their districts: DeForest, Middleton, Monona Grove, Mount Horeb, Oregon, Sauk Prairie, Verona, Waunakee, Wisconsin Heights. The majority (64%) of funding comes from donations & grants from individuals, family foundations and local businesses. Small amount from Dane County Comprehensive Community Services.

Horizon program includes daily check-ins, drugs tests, immediate attention to mental health crises. Over 200 students have attended Horizon, and 60% of those who have spent at least a month, have graduated. As of March 2023, there are 15 students. Staff includes a FT Director, two FT teachers, one FT counselor, one FT SEA, and two part-time SEAs.

Nationwide research on recovery schools has demonstrated that, compared to students in non-recovery high schools who have received substance use treatment, students in recovery high schools: have higher graduation rates, report significantly lower absenteeism, are more likely to abstain from substances, and have significantly fewer days using marijuana and other drugs. The most significant challenges that recovery schools face are the enrollment variability and the smaller school size, making them more expensive than traditional schools. Currently, there are 45 recovery high school in the U.S.

The 2019 Wisconsin Department of Public Instruction (DPI) Youth Risk Behavior Survey showed that for 260,001 public high school students:

- 42,900 had their first alcohol drink before age of 13
- 77,480 currently use alcohol
- 51,740 currently use marijuana
- 35,620 have been offered, sold or given illegal drug or alcohol on school property

December 2022 DPI Survey showed ~34 percent of students reported feeling sad or hopeless almost every day for more than two weeks in a row, and Wisconsin teens are showing suicidal ideation at highest rate in the survey's history. Recovery schools can save lives and are cost effective. Massachusetts, New York, and New Jersey have shown state-level funding for recovery schools is possible. Discussion in Wisconsin needed about state funding of recovery schools.

Chris Wardlow asked if there is a diagnosis requirement to be a student. Traci Goll reported that there is no diagnosis requirement.

Jessica Geschke thanked the Horizon High School team for presenting and for the work that they are doing. Touring recovery high schools nationwide and has found it very challenging to get Narcan into high schools. Traci Goll confirmed that Horizon High school has Narcan, and all students and staff are trained.

Council members offered thanks to the Horizon High School staff members for the presentation.

5. Atlas Overview

Shatterproof Director of State Engagement Kelsey Knowles provided the presentation. Atlas is a free, public website for those seeking treatment for themselves or others. The National Principles of Care are utilized as metrics for quality. Finding addiction treatment can often be challenging because folks don't know what to look for and there is often misinformation and/or misleading, biased information online. Atlas has a ten question needs assessment that produces a recommended level of care. There is no paid-for provider advertising that skews the results. List of providers comes from the state and then is regularly updated.

Kelsey Knowles reviewed the website. Online assessment is currently 13 questions but is being revised to ten questions. Shows the level of care that is recommended, as well as treatment recommendations. Quality indicators inform the results. Results can also be filtered by accessibility, special populations served, etc. Results also include reviews from people who have received services. A patient experience survey, that links back to the standards of treatment quality, can be completed by anyone who's received services from one of the facilities. Reviews are only posted when there are 20 or more for a certain facility, to ensure there is an adequate sample size. Any provider that submits data to the Atlas system, gets access to a password-protected professional portal. This is a way for providers to compare their facility with the services of those facilities around them.

Dr. Ritu Bhatnagar asked how Shatterproof is connecting with providers in the state. Kelsey Knowles reported that list of providers came from the state and includes all licensed providers. Encouraged any providers who think that they should

have been outreached to who have not been contacted to reach out to the Shatterproof team. Dr. Ritu Bhatnagar clarified what promotion will occur for launch of the site. Kelsey Knowles reported that Atlas will launch in Wisconsin at the end of June. There will be a launch event. There are also typically media promotions, like billboards and bus ads, as well as engagement with a variety of stakeholders.

The Atlas project is grant funded by the Wisconsin Department of Health Services. In most states where Atlas is active, it is funded by a state agency. In only one state currently, it is funded by a private foundation. Atlas started in 2020 in six states and has expanded rapidly since then. Goal is to provide support across all 50 states.

Dr. Subhadeep Barman asked if certifications would be included since ASAM is actively working to create more of a standard. Kelsey Knowles reported that there is a list of accreditations within a facility profile page. Any accreditation held by a facility is listed, and as additional certifications roll out, the page could be updated to include those as well. Currently, the credential based on level of care specific to residential facilities is not incorporated into the survey yet.

Dr. Ritu Bhatnagar asked about the inclusion of providers who prescribe medication but may not be certified by DHS 75. Kelsey Knowles reported that they've been given the go-ahead to include those providers in Atlas and, because there may not be a centralized list of these type of providers, they are being added to the database in an ad-hoc fashion. Dr. Bhatnagar followed up to ask if they are tracking things like availability or wait times? Kelsey Knowles reported that those are not currently being tracked by Atlas but looking to do those things with future iterations of the system.

Denise Johnson asked in chat if there is a way to filter for services for deaf and hard of hearing. Kelsey Knowles reported that there is a filter dropdown for languages spoken and American Sign Language is an option. Denise Johnson clarified that putting ASL as a filter option may be too broad since someone may be looking for the direct provision of services versus services through an interpreter. Kelsey Knowles noted that this is an important distinction and will follow up.

Kelsey Knowles further reviewed the portal, noting that people may explore providers without completing an assessment. Searches can include things like substance, payment, insurance, level of care, facility features, medications, age, etc. Facilities can also be compared to see a side-by-side comparison.

Wisconsin is currently in the data collection phase. Facilities that do not complete the provider survey will be listed on Atlas but will not have data available. There are open enrollment periods twice a year in any given state, so providers have the opportunity every six months to update their data. For initial survey, if a provider has multiple facilities, can streamline the process so not doing full surveys for each individual facility.

Atlas has been visited over 500,000 times since its launch in 2020. Will be developing state-specific materials for Wisconsin. The Wisconsin State Advisory Committee will begin meeting next week. Meets for one hour every quarter. If there are suggestions on how to improve the survey, the website, how to get the word out and promote Atlas, then attending the Advisory Committee is a great forum to do that.

Council members thanked Kelsey Knowles for the presentation.

6. Committee updates

Executive Committee

Kevin Florek provided the update. As discussed earlier, Executive Committee met and developed letters that went out to JCF and the Legislature on behalf of Council to encourage proper funding for DSPS. Chris Wardlow noted that there has been some reporting that legislature wants to audit DSPS before addressing anything. Kevin Florek confirmed.

A general reminder that the Diversity Committee and the Intervention and Treatment Committee are still in need of permanent Chairs. It is important that council members are involved with the committees. Committees drive the work of the Council.

Kevin Florek met with Jessica Barrickman, the Chair of Wisconsin Council on Mental Health (WCMH) to discuss potential opportunities for the two councils to collaborate. Next steps are for the Executive Committees of both councils to hold a joint meeting to identify some ways in which the councils can collaborate.

Diversity Committee

Denise Johnson provided the update. The Committee has not met since last May and is trying to come back together. DHS Staff person Mai Zong Vue retired as of February. As mentioned by Kevin Florek, the Committee does need some new members.

BPTR Deputy Director Andrea Jacobson confirmed that DHS staff member Allison Weber will be providing staff support to the Committee. Anyone interested in joining the Committee can reach out to Allison at allison.weber@dhs.wisconsin.gov.

Intervention & Treatment Committee

Roger Frings provided the update. Over the last couple months, the Committee has gained some new members. Dr. Charles Shorter, a retired OB-GYN, and Laura Fabick from ARC Community Services.

The Committee has had presentations over the last few meetings, including a presentation on the State Opioid Response (SOR) Grant from Jennifer Beer, a presentation on upcoming training opportunities from Bernestine Jeffers, a presentation on the Prevention Intervention Recovery Section by Section Supervisor Janet Fleege, an update on DHS 75 implementation from Andrea Jacobson, and held a discussion with Leilani Nino around integrated care.

Committee has also been discussing the Children Youth and Family Subcommittee, which they would like to get rolling again. Committee has also been reviewing the tobacco integration and language update for DHS 75. Additionally, collaborating with the Prevention Committee on efforts related to cannabis.

Planning and Funding Committee

Christine Ullstrup provided the update. Committee continues to look at resources and systems to try to track services across the state. Motion passed by the Council for DHS to look at this. Understand that there is no mandate for providers to report this information but continue to look at opportunities to gather related information. Hope that Atlas may be a possible solution to this, so that providers can make referrals and we know what services there are across the state.

Committee had a presentation from Paul Krupski on the opioid settlement dollars as well as a presentation from Shatterproof on the Atlas system, similar to the overview provided today. Committee has also been reviewing its strategic plan. One thing that has been top of mind has been that there is not yet a vehicle for billing Medicaid for the new services in DHS 75. Know that Medicaid has a working agenda on this and have invited them to return for April meeting to provide an update on where they are at with that process.

Prevention Committee

Chris Wardlow provided the update. At most recent committee meeting, Maggie Northrop updated the group on the State's Health Improvement Plan. The Prevention Committee will continue to serve in the role as the Alcohol Action Team for that plan. Committee has also continued discussions around hemp derived cannabinoids, and hope to collaborate with the ITC Committee to bring a motion forth on this topic.

The Committee also received an update from the Community Anti-Drug Coalitions of America. They are starting an opioid academy through local coalitions, with extensive technical assistance on how to address the opioid epidemic from a local coalition level.

Maureen Busalacchi provided the update from the Alcohol Policy Project. April is Alcohol Awareness Month, and messaging from DHS and the Wisconsin Alcohol Policy Projects will be rolling out related to this. There are some great resources available for local coalitions and others to promote awareness around alcohol.

The legislature is again talking about home delivery of alcohol, which is a concern based on what's been seen in other states. Wine is already allowed. This potential legislation would allow delivery of other types of alcohol.

The Place of Last Drink User Group meeting is being planned again and hope to have some momentum going forward in terms of creating a statewide infrastructure to better understand where excessive alcohol use is occurring. Have seen interesting data in small pilot program, that it is not just bars and restaurants, but also recreational areas, campgrounds, and with friends. Now that there is some data to take action, planning a webinar series based on the feedback from the Alliance for Wisconsin Youth regions. Would like to be able to do the same thing that the Synar survey is doing in terms of funding alcohol age compliance checks. Currently, communities have to come up with their own funding in order to perform alcohol age compliance checks. Aware of 35 communities that perform these types of checks, which is well below the 72 counties and 1,900 plus communities that could be doing this.

Dr. Ritu Bhatnagar asked if the Tavern League is supporting the bill that would allow the delivery of alcohol to individual residences. Maureen Busalacchi reported that the alcohol industry is divided. Looking at other states that have done this, creates a lot of concerns around availability and accessibility of alcohol.

7. FY 2023 Synar Report: Update on Tobacco Prevention

Youth Access Program Coordinator in DHS' Wisconsin Tobacco Prevention and Control Program, Nancy Michaud, shared the update. Tobacco Prevention and Control (TPCP) programs have a common goal to prevent the underage sale of tobacco products to youth and young adults. This is done through the Wisconsin Wins Program, which is a statewide program that checks compliance on state law for tobacco sales. This ensures the state is in compliance with the Federal Synar Regulation.

The Synar Amendment comes from federal legislation enacted in the 1990s to decrease access to tobacco products. It requires states to enact and enforce laws prohibiting the sale of tobacco products to minors. The Synar Amendment requires tobacco retailers to train their employees regarding the laws around selling of tobacco products. Wisconsin has an online tobacco training called Wisconsin Tobacco Checks that's available to all retailers. The Synar Amendment also requires that states keep the retailer violation rate below 20 percent. If the retailer violation rate exceeds 20 percent, then the state stands to lose 10 percent of its Federal Substance Abuse Prevention and Treatment Block Grant funds, which is around \$2.7 million in Wisconsin. To keep that rate below 20 percent, conduct year-round compliance checks, community outreach, and retailer education. Local health departments and health agencies partner with local law enforcement to conduct the compliance checks. To determine what the retailer violation rate is, state does an annual survey, called the Synar Survey, that is random, unannounced inspections of retailer outlets that sell tobacco and e-cigarette products. Partner with UW Survey Center to conduct the Synar Survey. Annual Synar Report detailing how the survey was done and results is included in the meeting booklet.

In 2019, the Federal Tobacco Sales Law changed the legal age of purchase from 18 years old to 21 years old. There has been a tremendous amount of confusion since Wisconsin's law is still 18. Even though the state law doesn't align with the federal law, the federal law supersedes state law, and so everyone must follow the federal law of 21. The resulting confusion has had a significant impact on the Synar Survey. The rate is now at 11.9 percent. This has come down from the prior year but is still too high. If the rate goes above 20 percent next year, stand to lose federal dollars. The last time this happened, in 2001, the state put significant funding into creating the Wisconsin Wins Program. To ensure that the rate stays below the 20 percent threshold next year and beyond: continuing Wisconsin Wins outreach efforts, have local contracts to provide retailer education and promote the online training, and compliance checks are happening. Local law enforcement can only enforce local or state law, they cannot enforce the federal law. Wisconsin Wins can only check compliance on state law. The FDA tobacco program does have authority to enforce the federal law but only have eight

inspectors across the entire state. As the violation rate climbs, ultimately means more young people are being sold tobacco products.

Tobacco 21 media ad played for the Council. Campaign includes ads, billboards, and social media materials.

Chris Wardlow asked what the consequence is for a retailer who violates during an FDA inspection. Nancy Michaud reported that typically with a first offense, they are given a warning. The FDA must do a follow up inspection and a civil money penalty can be incurred if there is another violation.

Denise Johnson asked in the chat if vaping products are included for inspections. Nancy Michaud confirmed vaping products are included.

Council members thanked Nancy Michaud for the update.

7. State Agency Updates

DHS: Paul Krupski shared the update. The Governor has declared 2023 the year of mental health and the executive budget includes \$500 million to expand access to mental and behavioral health, including efforts to bolster the behavioral health workforce. Executive Budget webpage shared in the chat: <https://doa.wi.gov/Pages/2023-25-Executive-Budget%20ASE.aspx>. DHS budget webpage shared in the chat: <https://dhs.wisconsin.gov/budget/index.htm>. Budget includes expanded Medicaid coverage, as well as many provisions that would help build healthy communities, improve mental health and crisis services, invest in long-term care, and address staffing and workforce needs.

DHS held a partner call yesterday around the public health emergency unwinding that some folks may have taken part in. There will be a webpage on this on the DHS site going live soon that will provide information and provide the opportunity to ask questions directly to the department.

Governor Evers appointed a new DHS Secretary Designee, Kirsten Johnson. She started this past Monday. Most recently she served as the Health Commissioner in the city of Milwaukee. The Department is very excited to have her.

Some updates on the opioid settlement dollars. Thank you to the many colleagues at DHS who have done an extensive amount of work to get the opioid settlement funding out. Some opportunities that have recently closed, with awardees currently being notified:

- Room and Board for Residential Substance Use Disorder Treatment for Counties and Tribes.
- Capital Projects
- Tribal Support

Next Friday, the After School Community Based Opioid Prevention Programming will close. After that, there are a number of funding opportunities that will be released in the next few weeks, including:

- Public health vending machines, which will provide Narcan, Fentanyl Test Strips, and other public health supplies
- EMS first responders
- Expansion of the hub and spoke pilot project
- Law enforcement grant
- Partner project with the Department of Public Instruction (DPI) for K – 12 evidence-based substance use prevention.

Thank you to everyone who provided feedback via survey on the next round of opioid settlement funding. Received over 4,000 surveys from across the state. Expecting \$8 million in 2023, which is significantly less than the \$31 million that was received last year, so there will be fewer number of investments to ensure that funding is impactful for the projects that are funded. Plan will be submitted to the Joint Committee on Finance by the April 1st deadline.

8. Bureau of Prevention Treatment and Recovery updates

Teresa Steinmetz provided the update. Gynger Steele is the new Division Administrator in the Division of Care and Treatment Services following the retirement of Rose Kleman. Gynger was previously the DCTS Deputy Administrator.

Funding opportunities that are currently open include the Alliance for Wisconsin Youth, with applications due April 19th. The Medication Assisted Treatment in a Jail Setting opportunity closed February 28th. Those applications are currently being reviewed and award letters should go out in the next few weeks. There was a question from a Council member about the medication included, it is related to Wisconsin State Statute, shared in the chat:

<https://docs.legis.wisconsin.gov/statutes/statutes/46/47/2>.

The Narcan Direct program application was reissued throughout the state. Have been able to use COVID supplemental funding to support this program in recent year. This year, that additional funding is not available so have to go back to original process. Funding has never been enough to sustain the entire need of the state. Intent of the application is to provide Narcan to qualifying providers to start the distribution.

DHS 72 is going to be a new administrative rule. It will be developed to address Act 122 to create a certification and Medicaid reimbursement for peer recovery supports throughout Wisconsin. Public hearings have recently been held on the statement of scope, which is the first phase of being able to create an administrative rule. Suggestions for who should be on the related Advisory Committee has been pulled together and is currently going through the approval process. DHS staff Kenya Bright and Sarah Coyle will be the lead staff working on this. Christine Ullstrup has been nominated to be SCAODA's representative on the Advisory Committee.

Andrea Jacobson provided additional updates. Matthew Fure has joined the bureau as a Substance Use Services Program Coordinator.

In the rollout process of the revised DHS 75, many questions came forward from certified mental health providers, certified through DHS 35. Hearing from a majority of those providers that they are interested in applying for DHS 75 certification. The Division of Quality Assurance (DQA) has paused surveys for four months to give providers time for those applications. Thank you to the Intervention and Treatment Committee for their feedback on this matter.

11. Agenda Items for June 2, 2023 meeting

- Discussion around hybrid meeting option
- Budget update

12. Meeting Adjournment

Christine Ullstrup moved to adjourn.

Jennifer Stegall seconded the motion.

All in favor. None opposed.

Meeting adjourned at 12:34pm.

Prepared by: Sarah Boulton on 3/3/2023.

These minutes are in draft form. They will be presented for approval by the governmental body on: 6/2/2023

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Executive Committee		Attending: Kevin Florek, Christine Ullstrup, Sandy Hardie DHS Staff - Sarah Boulton
Date: 2/7/2023	Time Started: 1:05 PM	Time Ended: 1:26 PM
Location: Zoom		Presiding Officer: Kevin Florek, Committee Chair

Minutes

- 1. Call Executive Committee to Order**
The meeting was called to order at 1:05 pm by Committee Chair Kevin Florek.
- 2. Review of January 10, 2023 Meeting Minutes**
Christine Ullstrup moved to approve the Committee's meeting minutes of January 10, 2023
Sandy Hardie seconded.
No discussion or changes mentioned.
Motion to approve the minutes carried unanimously.
Minutes of January 10, 2023 were approved.
- 3. Public Comment**
None.
- 4. Setting Agenda for March 3, 2023 Council Meeting**
Committee members reviewed the draft agenda for the March 3rd Council meeting. Agenda items include an overview of ATLAS, annual Synar report update, including Tobacco 21 campaign information, and a presentation from Horizon Recovery High School.
- 5. Adjournment**
Meeting adjourned at 1:26pm with a motion from Christine Ullstrup and second from Kevin Florek.

Prepared by: Sarah Boulton on 2/7/2023.

Executive Committee reviewed and approved these minutes at its 5/2/23 meeting.



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Executive Committee of the State Council on Alcohol and Other Drug Abuse

May 2, 2023

1:00pm – 2:00pm

Meeting to be held via Zoom

Meeting URL: <https://dhs.wi.zoomgov.com/j/1609937479>

Meeting ID: 160 993 7479

Conference Call: 669-254-5252

AGENDA

- 1. Call to OrderKevin Florek
- 2. Review of February 7, 2023 Meeting Minutes.....Kevin Florek
- 3. Public Comment.....Kevin Florek
- 4. Setting Agenda for June 2, 2023 Council Meeting.....Executive Committee
- 5. Adjournment.....Kevin Florek

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Executive Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA) and consists of the Council’s three officers. The Committee’s primary objective is to provide leadership and direction to the Council in the setting of Council meeting agendas and prioritizing of Council activities.

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OPEN MEETING MINUTES

Name of Governmental Body: Intervention and Treatment Committee of SCAODA			Attending: Amy Anderson, Sheila Weix, Alisha Kraus Chris Wardlow, Dave MacMaster, Michael Kemp, Chuck Schauburger, Jolee Buhr; Beth Collier (approximately 10-11AM) DHS: Anne Larson, Saima Chauhan, Alicia Cooke, Janet Fleege, Andrea Jacobsen, Simran Arora, Jennifer Beer, Julie Nalepinski, Leilani Nino, Matt Fure, Dan Bizjack Guests: Karen Conner, Laura Fabick, Hannah Huffman, Clinton Peterson, Samantha Yaeger
Date: 2/14/2023	Time Started: 10:03 AM	Time Ended: 12:03 PM	
Location: virtual meeting occurred via Zoom platform			Presiding Officer: Roger Frings Co-chair, Sheila Weix-co-chair

Minutes

1. Roger Frings called the meeting to order at 10:03 AM.

Comments or Announcements: Quorum confirmed by Saima. Introduction of Guests and new DHS staff.
Not in attendance: Sandy Adams, Jennifer Stegall, Holly Stanelle.

2. Interested ITC Applicant: Jennifer Stegall appointed by the Insurance Commission to replace the position previously filled by Roger Frings.

3. Review and approval of 1/10/2023 meeting minutes. (Roger Frings)

Jolee Buhr made Motion moved to approve the January 10, 2023, Meeting Minutes. Second provided by **Michael Kemp**. Roger Frings abstained. No opposition. Approved unanimously.

4. DHS 75 implementation update and discussion on increasing access to integrated care (Andrea Jacobson, Deputy Director with BPTR)

Andrea facilitated a lengthy discussion regarding implementation of DHS 75. The primary issue was brought forward by Sheila Weix: 75.50 and CFR 42 requirements regarding Integrated Care and treatment of co-occurring disorders. There could be unintended consequences due to DHS 75 resulting in the loss of providers/programs. Specifically, DHS 35 providers wanting to provide co-occurring care must now also be DHS 75 certified. Implementation of dual certification was previously postponed and DQA is trying to be flexible in implementation of 75 certification. As of 2/14/2023, 70 of the 194 DHS 35 providers applied for 75 certifications.

Additional topics included:

- the importance of reimbursement Clinical supervision (note: Can bill for QTTs and SAC supervision).
- DHS 75- priority to ensure uninterrupted services
- training topics; terminology, MAT, EBPs like MI; brain illness and behavioral impact, and education about context for requirements
- how long is it taking to get answers on 75 questions? Received 400 questions
- assistance with transportation to treatment if they don't have state insurance or don't drive
- housing assistance such as application fees
- childcare needed to enable treatment of a parent

A DHS 35 provider meeting is held on the 2nd Tuesday of each month at noon.

Revised DHS 75 Questions, F-02897 (10/2021) (surveygizmo.com)

The clearing house rule page has the most current information.

https://docs.legis.wisconsin.gov/code/chr/all/cr_20_047

5. CYF subcommittee update (Anne Larson)

The scope of the Children, Youth, and Family Sub-Committee of the State Council on Alcohol and Drug Abuse (SCAODA) is to provide a unified voice in the areas of substance use prevention, intervention, treatment, and harm reduction for children, adolescents, transition-aged youth, and families in Wisconsin. The committee will engage stakeholders including people with lived experience, families, service providers, and state agencies in order to understand the relevant issues and promote strategies that ensure the safety and wellbeing of the population of focus as related to substance use prevention, intervention, treatment, and harm reduction.

Sheila Weix made a motion to approve the revised scope, **second provided by Mike Kemp**. The adopted scope will be on the March 3 SCAODA agenda.

6. Update from the Criminal Justice Coordinator (Leilani Nino)

Leilani gave an update on her role and a number of projects administered by the Integrated Services Section (e.g., Vivitrol; Narcan in Jails). Additional information at: <https://cjcc.doj.wi.gov/> and <https://www.samhsa.gov/gains-center>

7. Prevention Committee motion on cannabis-derived products (Chris Wardlow)

There are no statewide regulations regarding access to hemp-derived cannabinoids (e.g., Delta 9). Some local efforts have resulted in community level ordinances to limit access to these products. The committee intends to recommend enactment of a state-wide framework to regulate product safety and access for these substances (especially prior to age 21).

January 19th Prevention Committee Meeting voted to approve a motion for the full council to recommend that Wisconsin pass a Tobacco 21 law.

The Federal 21 law can't be enforced until it is enacted at the state level.

8. Tobacco Integration Update (Karen Conner)

Focus on cessation, especially under 24. Prevention for 21 and under. Planning underway regarding how to spend Jule (e-cigarette) settlement dollars.

DHS 75 outreach and TA.

Focus on disparity populations including those with MH and SUD issues. Priority population of women who inject drugs; "First Breath" best practice tobacco cessation treatment. Integrated contingency management into the program.

Sheila- also noted a Native American Quit line.

9. Updates on DHS 75 (Saima Chauhan)

DHS 75 Webinar Series- survey to providers to focus the training:

The DHS 75 Webinar Series is focused on supporting providers of residential and/or outpatient substance use services.

Upcoming sessions

- Sessions for **residential services providers** are scheduled for March 16, June 15, September 21, and December 14 from 12:00 p.m. to 1:30 p.m.
- Sessions for **outpatient services providers** are scheduled for February 16, May 25, August 17, and November 16 from 12:00 p.m. to 1:00 p.m.

Substance Use: Provider Information | Wisconsin Department of Health Services

10. Public Comments

No comments

11. Future meeting dates, agenda topics, and other announcements

Sheila- brought up the shortages and difficulty getting people licensed. Critical level

Future Agenda Items:

- SCAODA update
- Covid transition-unwinding
- Food Share
- DSPTS- plans for an audit. No new staff have been assigned.
- Pam from DMS (Medicaid)
- presentation on Mobile Units
- Motion re: Youth access to tobacco products by youth (e.g., vending machines)
- Opioid Settlement Funds-Finance report
- Update on DHS-SUD services specific to Women
- Hub and Spoke updates
- Social Determinants of Health: Info RE available supports for housing, transportation, food, childcare, etc.

12. Adjournment

Michael Kemp moved to adjourn; Sheila Weix seconded. **Unanimous approval to adjourn the meeting at 12:03 PM**

*Next scheduled Meeting: SCAODA on March 3, 2023; Next ITC April 11, 20

Prepared by: Anne Larson on 2/14/2023.

These minutes were approved by the governmental body on 4/11/2023: .



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

INTERVENTION AND TREATMENT COMMITTEE (ITC)

Time: April 11, 2023, at 10:00 AM Central Time (US and Canada)

This meeting will be held via teleconference.

Join ZoomGov Meeting

<https://dhs.wi.zoomgov.com/j/1610346565?pwd=RHdHdFhlRGt4d1VnQzRma3pwaFVGUT09>

Meeting ID: 161 034 6565

Passcode: 812076

AGENDA

1. Call to order and roll call
2. Review and approval of 2/14/2023 meeting minutes (Roger Frings)
3. Review of the SCAODA meeting on 3/3/2023 (Roger Frings)
4. Gynger Steele-The new Division of Care and Treatment Services (DCTS) Administrator
5. CYF subcommittee update (Anne Larson)
6. COVID-19 Unwinding and FoodShare Emergency Allotments (Saima)
7. Prevention Committee motion on cannabis-derived products (Chris Wardlow)
8. Tobacco Integration Update (Karen Conner)
9. Updates on DHS 75 (Saima Chauhan)
10. Public comments
11. Future meeting dates, future agenda topics, and other announcements
12. Adjourn

The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse. The mission of the State Council on Alcohol and Other Drug Abuse (SCAODA) is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

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*Next scheduled ITC Meeting: May 9, 2023, & SCAODA: **June 2, 2023**

OPEN MEETING MINUTES

Name of Governmental Body: Intervention and Treatment Committee of SCAODA			Attending: Roger Frings, Amy Anderson, Sheila Weix, Alisha Kraus, Chris Wardlow, Dave MacMaster, Michael Kemp (until 10:40), Holly Stanelle, Chuck Schauburger, Jolee Buhr; Jennifer Stegall, Beth Collier, DHS: Gynger Steele (until 10:20), Anne Larson, Saima Chauhan, Alicia Cooke, Janet Fleege, Andrea Jacobsen, Simran Arora, Matt Fure Guests: Amy Miles, Sarah Johnson, Laura Fabick, Patrick Riley,
Date: 4/11/2023	Time Started: 10:03 AM	Time Ended: 12:03 PM	
Location: virtual meeting occurred via Zoom platform			Presiding Officer: Roger Frings Co-chair, Sheila Weix-co-chair

Minutes

- 1. Roger Frings called the meeting to order at 10:03 AM.**
 Comments or Announcements: Quorum confirmed by Saima. Introduction of Guests and new DHS staff.
 Not in attendance: Karen Conner
- 2. Gynger Steele-The new Division of Care and Treatment Services (DCTS) Administrator**
 Gynger introduced herself and her role; shared her background and expressed support to the work of the council. Gynger.steele@dhs.wisconsin.gov. (608) 400-1481.
- 3. Review and approval of 1/10/2023 meeting minutes.** (Roger Frings)
Michael Kemp made Motion moved to approve the January 10, 2023, Meeting Minutes. Second provided by Beth Collier. No opposition. Approved unanimously.
- 4. Prevention Committee motion on cannabis-derived products** (Chris Wardlow)

2023 Farm Bill on Senate Website- opportunities to offer public comment. May increase ability to limit access to hemp-derived cannabinoids (e.g., Delta 9). Some local efforts have resulted in community level ordinances to limit access to these products. The committee intends to recommend enactment of a state-wide framework to regulate product safety and access for these substances (especially prior to age 21)

January 19th Prevention Committee Meeting voted to approve a motion for the full council to recommend that Wisconsin pass a Tobacco 21 law.

The Prevention Committee did pass a motion to request that SCAODA urge the legislature and governor to pass an emergency measure to prohibit the sale and distribution of hemp-derived psychoactive cannabinoids to individuals under the age of 21

The Federal 21 law can't be enforced until it is enacted at the state level.

Amy Miles- noted they have seen a jump in Delta 8 cases-many also have Delta 9 and other substances. These products are not regulated. Still seeing fatal overdoses from fentanyl.

Checking for Xylazine (a very strong sedative often mixed with Fentanyl. was only used as vet tranquilizer drug) Last 6-9 months. Seen in drivers and fatal overdose cases.

Meta various “nidozines”. Also seeing Benzodiazepines with other substances.

[Farm Bill Input | Senate Committee On Agriculture, Nutrition & Forestry](#)

[City of Kaukauna | Kaukauna Code of Ordinances](#)

[Xylazine, fentanyl overdose deaths still rising - Wisconsin Examiner](#)

5. Review of the SCAODA meeting on 3/3/2023 (Roger Frings)

Highlights:

- Horizon High School. Sober-living alternative school for students in recovery. Privately funded.
- ATLAS-survey regarding population served, insurance contracts and the capacity in SUD treatment and recovery field in Wisconsin.
- Update on the DHS Budget Recommendations
- Subcommittee updates

6. CYF subcommittee update (Anne Larson)-No update at this time.

7. COVID-19 Unwinding and FoodShare Emergency Allotments (Saima)

A meeting will be held on 4/12/2023 at 1:00 to cover most recent updates. The Public Health emergency is set to end on May 11th. Information on DQA website

Everyone will be evaluated for reenrollment. This was not occurring during the emergency. It will not occur all at once but will occur on a rolling basis. Several attempts will be made to reach consumers before their coverage is dropped.

[Coronavirus Waivers | CMS](#)

[Fact Sheet: COVID-19 Public Health Emergency Transition Roadmap | HHS.gov](#)

Division of Quality Assurance (DQA) Information

The following DQA Memos creating flexibilities during the Public Health Emergency for COVID-19 will be obsoleted effective May 11, 2023.

- 20-001 State Licensure Application for Temporary Expansion Locations during Public Health Emergency related to COVID-19
- 20-002 CMS 1135 Waiver Provisions – Wisconsin Hospitals
- 20-005 Guidance for Ambulatory Surgical Centers Temporarily Enrolling as a Hospital During the COVID-19 Public Health Emergency
- 20-008 State Licensure Application for Temporary Nursing Facility Expansion Units and Transfer Options during the COVID-19 Public Health Emergency

Questions-PHE

- For questions regarding hospitals and Ambulatory Surgical Center, please contact Ann Hansen Ann.Hansen@dhs.wisconsin.gov
- For questions regarding nursing homes, please contact Ann Angell - Ann.Angell@dhs.wisconsin.gov
- For questions regarding assisted living facilities, please contact Daniel Perron Daniel.Perron@dhs.wisconsin.gov

- For questions regarding Physical Environment or L Life Safety Code, please contact Fokruddin Khondaker Fokruddin.Khondaker@dhs.wisconsin.gov

8. Tobacco Integration Update (Karen Conner)- No updates at this time.

9. DHS 75 implementation update

Recordings and power point materials are at the link below:

[Substance Use: Provider Information | Wisconsin Department of Health Services](#)

A DHS 35 provider meeting is held on the 2nd Tuesday of each month at noon.

[Revised DHS 75 Questions, F-02897 \(10/2021\) \(surveygizmo.com\)](#)

The clearing house rule page has the most current information.

https://docs.legis.wisconsin.gov/code/chr/all/cr_20_047

1. Tobacco Integration Update (Karen Conner)

Focus on cessation, especially under 24. Prevention for 21 and under. Planning underway regarding how to spend Jule (e-cigarette) settlement dollars.

DHS 75 outreach and TA.

Focus on disparity populations including those with MH and SUD issues. Priority population of women who inject drugs; “First Breath” best practice tobacco cessation treatment. Integrated contingency management into the program.

Sheila- also noted a Native American Quit line.

2. Updates on DHS 75 (Saima Chauhan)

DHS 75 Webinar Series- survey to providers to focus the training:

The DHS 75 Webinar Series is focused on supporting providers of residential and/or outpatient substance use services.

Upcoming sessions

- Sessions for **residential services providers** are scheduled for June 15, September 21, and December 14 from 12:00 p.m. to 1:30 p.m.
- Sessions for **outpatient services providers** are scheduled for May 25, August 17, and November 16 from 12:00 p.m. to 1:00 p.m.

[Substance Use: Provider Information | Wisconsin Department of Health Services](#)

3. Public Comments

- Sheila Weix: Noted that Arbor House, Meta House and ...received awards....
- Dave MacMaster: Norman Briggs has retired after decades serving on SCAODA ITC in a leadership role and was a pioneer in addiction services. Roger noted there are plans to recognize Norman.
- Beth Collier- Re previous revisions to the Controlled Substances Act. Drug paraphernalia- Xylazine test strips would not be covered by the revision of the Controlled Substances Act. Recommend broadening the language as the revisions specifically identify Fentanyl test strips.
- <https://www.btnx.com/HarmReduction>

- Delays in processing Certification of clinics under DHS75.
- Amy Anderson: Brought up difficulties with MA funded transportation for clients. Problem solving regarding ways to address issues.

<https://www.mtm-inc.net/mtms-acquisition-of-veyo-finalized-after-august-1-closing/#:~:text=Earlier%20this%20summer%2C%20MTM%20revealed%20our%20planned%20acquisition,1%2C%20with%20integration%20activities%20set%20to%20begin%20immediately.>

4. Future meeting dates, agenda topics, and other announcements

Future Agenda Items:

- Cannabis Motion
- Mobile Unit Implementation
- SCAODA update
- Covid transition-unwinding; Food Share
- Statute and Rules Test [Wisconsin Legislature: AB143: Bill Text](#)
- DSPS- updates
<https://docs.legis.wisconsin.gov/raw/cid/1665856>
- Pam from DMS (Medicaid)
- Motion Re: Youth access to tobacco products by youth (e.g., vending machines)
- Opioid Settlement Funds-Finance report
- Update on DHS-SUD services specific to Women
- Hub and Spoke updates
- Social Determinants of Health: Info RE available supports for housing, transportation, food, childcare, etc.

5. Adjournment

Holly Stanelle moved to adjourn; **Sheila Weix** seconded. **Unanimous approval to adjourn the meeting at 11:30AM**

*Next scheduled Meeting: SCAODA on June 2, 2023; Next ITC May 9, 2023

Prepared by: Anne Larson on 4/11/2023.

These minutes were approved by the governmental body on: 5/9/2023



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

INTERVENTION AND TREATMENT COMMITTEE (ITC)

Time: May 9, 2023, at 10:00 AM Central Time (US and Canada)

This meeting will be held via teleconference.

Join ZoomGov Meeting

<https://dhs.wi.zoomgov.com/j/1610346565?pwd=RHdHdFhIRGt4d1VnQzRma3pwaFVGUT09>

Meeting ID: 161 034 6565

Passcode: 812076

AGENDA

1. Call to order and roll call
2. Review and approval of 4/11/2023 meeting minutes (Roger Frings)
3. 2023 Assembly Bill 143- Relating to: Prohibiting statutes and rules examinations for certain professions
4. Update on Mobile units (Dan Bizjak)
5. Questions for DSPS (Sheila Weix)
6. CYF subcommittee update (Anne Larson)
7. COVID-19 Unwinding and FoodShare Emergency Allotments (Saima)
8. Prevention Committee motion on cannabis-derived products (Chris Wardlow)
9. Tobacco Integration Update (Karen Conner)
10. Updates on DHS 75 (Saima Chauhan)
11. Public comments
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The purpose of this meeting is to conduct the governmental business outlined in the above agenda for the Intervention and Treatment Committee of the State Council on Alcohol and Other Drug Abuse. The mission of the State Council on Alcohol and Other Drug Abuse (SCAODA) is to enhance the quality of life for Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

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*Next scheduled ITC Meeting: July 11, 2023, & SCAODA: **June 2, 2023**

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Planning and Funding Committee			Attending: Members: Christine Ullstrup, Beth Collier, Jill Gamez, Michelle Devine Giese, Kevin Florek, Karen Kinsey, Sheila Weix DHS Staff: Sarah Boulton, Jennifer Beer, Julie Nalepinski Guests: Hannah Huffman
Date: 2/15/2023	Time Started: 9:35AM AM	Time Ended: 11:52AM	
Location: Zoom			Presiding Officer: Christine Ullstrup

Minutes

1. Call Planning and Funding Committee to Order

Christine Ullstrup called the meeting to order at 9:35AM.

2. Review January 18, 2023 Meeting Minutes

Kevin Florek made a motion to approve the minutes of 1.18.23.

Michelle Devine Giese seconded the motion.

No discussion or changes mentioned.

Motion to approve the minutes carried unanimously with one abstention (Sheila Weix).

Minutes were approved.

3. Public Comment

Kevin Florek reported that he met with Wisconsin Council on Mental Health (WCMH) Chair Jessica Barrickman to explore potential opportunities for SCAODA and WCMH to collaborate. Karen Kinsey asked for ongoing updates on any plans to potentially integrate SCAODA and Wisconsin Council on Mental Health, noting that by-laws for both Councils should be reviewed. Sheila Weix requested that any updates related to this are brought to all committees for input.

Committee discussed letters that were sent from Executive Committee related to DSPS budget. Sheila Weix reported that ITC discussed yesterday that DSPS will be audited. Beth Collier shared a related article in the chat [DSPS audit comes amid tensions between Evers, Legislature \(wisconsinwatch.org\)](https://www.wisconsinwatch.org/2023/01/dsp-s-audit-comes-amid-tensions-between-evers-legislature/) and confirmed that the Legislative Study Committee on Occupational Licenses approved the audit.

4. DHS 72

DHS Staff Sarah Boulton reported that DHS 72 is a new administrative rule which will govern peer recovery specialists based on Act 122. Christine Ullstrup will be representing SCAODA on the advisory committee. The Administrative Rules website <https://dhs.wisconsin.gov/rules/active-rulemaking-projects.htm> and Wisconsin Act 122 <https://docs.legis.wisconsin.gov/2019/related/acts/122> shared in the meeting chat. Michelle Devine Giese noted challenges with division around this. Recovery coach piece was not as structured when it rolled out as certified peer specialists. There are not as many offerings for trainings for certified peer specialists. Screening is subjective based on whoever is hosting the training. Sheila Weix reported that they have been able to advocate as an organization. This is a relatively new thing that's trying to find its footing. Peer support was initially in recovery and there is an opportunity to bridge this. There are not enough people to provide care to all who need it. Michelle Devine Giese noted that she would like to see more friendly collaboration. Haven't seen the new curriculum but previous iterations were very mental health focused. Sheila Weix reported that they've held their own trainings. Utilizing grant funds to make training available in rural communities. One of the important things is that this enables billing. Part of the Hub and Spoke pilot project. It is a way to support and sustain recovery coaches, who've in the past been asked to volunteer their time. Kellie Blechinger reported that in corrections, have peer specialists and finding a need for recovery coaches in rural areas. Need access to both. Sheila Weix noted that they do have many folks with dual diagnoses and that additional knowledge for people doing this work can be very helpful.

5. Opioid Settlement Funding Wrap Up

Christine Ullstrup noted that the committee heard from Paul Krupski as the last meeting, who provided a nice overview of where settlement funding is at. A reminder that some money is always coming to counties that folks can also be advocating for. Survey went out regarding 2023 settlement funding.

6. Strategic Plan Updates

Committee reviewed current strategic plan. Beth Collier noted that to move the committee's work forward, it would be helpful to continue the discussion with DMS around Medicaid's alignment with the revised DHS 75.

Haven't seen any Forward Health updates regarding changes. Christine Ullstrup indicated that it was helpful to discuss DHS 75 rollout and to revisit the support for evidence-based practices discussion with Pam Lano. Jill Gamez reported that evidence-based practices are very intertwined with Medicaid. Other states have provided incentives for agencies to provide evidence-based approaches. Sheila Weix agreed, noting that more money is needed to implement certain strategies and practices. Christine Ullstrup reported that for rate-setting, the residential substance use disorder 3.1 and 3.5, the reimbursement doesn't cover costs for most agencies providing these services. Jill Gamez noted that it's important to highlight that there are changing economic factors, including a declining workforce, rather than simply saying that rates are too low. Wages have gone up a significant amount and there have been significant economic changes within communities. Michelle Devine Giese agreed, noting that their budget is up 25 percent, and their wages are up 40 percent. Christine Ullstrup noted that it seemed like DMS would be receptive to additional and ongoing feedback regarding the rates.

Christine Ullstrup reviewed the presentation from ATLAS on the new system rolling out in Wisconsin, asking what are thoughts about the system in relation to the bed tracking capacity system that the committee has been advocating for? Committee members discussed the provider survey, the information it is collecting, and how that information is being used. Christine Ullstrup noted that the system does not include real-time capacity. The committee should continue to follow up on the capacity management system piece. Jill Gamez reported that she has been invited to attend the State Advisory Committee for ATLAS. Can bring concerns from and to the committee. Committee members agreed that additional transparency around information being requested in the provider surveys would be helpful. Seems that uploading of other certifications, such as DHS 75, CAREF, JCAHO, should be sufficient.

Committee members discussed how to move forward motion for capacity management system. Original intent for funding ATLAS was in response to this. Beth Collier reported that the original intent was changed in the legislature. Sheila Weix noted that it is challenging to implement this in Wisconsin where 72 counties function autonomously versus states that function as a single state authority. Beth Collier reported that Minnesota wrote this into their administrative rule wherein it does not matter if a provider receives block grant funds because it's part of administrative rule.

7. DHS Updates

DHS staff Sarah Boulton provided the following updates.

- Governor Evers has designated Kirsten Johnson as the next DHS Secretary, starting February 27th.
- BPTR Staffing Updates:
 - o Matt Fure has joined the bureau as a Substance Use Treatment Coordinator in the Substance Use Services Section.
 - o Intercultural Program Coordinator Mai Zong Vue has retired from state employment.
 - o Community Support Programs Coordinator Brad Munger has retired from the bureau.
- There will be a virtual public hearing held Friday, February 17th from 1:00pm – 2:00pm for Wis. Admin. Code chs. DHS 34, 35, 36, 40, 50, 61, 63, and 75. These administrative rules are being updated in response to 2019 Wisconsin Act 56 which expanded Medicaid-reimbursable services through telehealth delivery. Hearing information shared in the meeting chat https://docs.legis.wisconsin.gov/code/register/2023/805b/register/rule_notices/cr_22_053_hearing_information/cr_22_053_hearing_information
- Upcoming Revised DHS 75 Webinar Services
 - o Sessions for residential service providers are scheduled for March 15, June 15, September 21, and December 14 from 12:00pm – 1:30pm.
 - o Sessions for outpatient service providers are scheduled for February 16, May 25, August 17, and November 16 from 12:00 p.m. to 1:00 p.m.
 - o More information on each session is available on <https://dhs.wisconsin.gov/aoda/partner.htm>. Each session will be recorded and recordings will be posted to the DHS website within five business days after each session.
 - o Survey: DHS is seeking your input on topics to cover in the sessions for residential services providers. Share your feedback through this <https://survey.alchemer.com/s3/7147088/DHS-75-Webinar-Input> by February 18, 2023
- Legislative Updates:
 - o From the Study Committee on Occupational Licenses:
 - LRB-0364 - Credential renewals (Study Committee on Occupational Licenses)

https://docs.legis.wisconsin.gov/misc/lc/study/2022/2404/050_december_13_2022_9_00_a_m_room_411_south_state_capitol/lrb0364_p3

- LRB-0363 - DSPS Investigations (Study Committee on Occupational Licenses)
https://docs.legis.wisconsin.gov/misc/lc/study/2022/2404/050_december_13_2022_9_00_a_m_room_411_south_state_capitol/lrb0363_p5
- LRB-0366 - Credential issuance (Study Committee on Occupational Licenses)
https://docs.legis.wisconsin.gov/misc/lc/study/2022/2404/050_december_13_2022_9_00_a_m_room_411_south_state_capitol/lrb0366_p4
- LRB-0367 - Preliminary credentials (Study Committee on Occupational Licenses)
https://docs.legis.wisconsin.gov/misc/lc/study/2022/2404/050_december_13_2022_9_00_a_m_room_411_south_state_capitol/lrb0367_p4

8. SOR Updates

DHS SOR Coordinators Jennifer Beer and Julie Nalepinski provided the update:

- Currently in State Opioid Response 3 (SOR3) grant period. \$16,917,133 per year for two years. Year one is September 20, 2022 – September 29, 2023 and year two is September 30, 2023 – September 29, 2024.
- High level goals are to serve individuals with opioid use disorder (OUD), stimulant use disorder, and other concurrent substance use disorders; increase access to medications for opioid use disorder (MOUD); support prevention, harm reduction, treatment, and recovery support services; develop programs and services that target underserved and/or diverse populations; develop programs and services that target underserved and/or diverse populations; and reduce unmet treatment needs and reduce opioid-related overdose deaths.
- Supported SOR programming includes:
 - Community Coalition Prevention Strategies
 - Narcan Direct
 - Fentanyl Test Strips
 - Opioid and Stimulant Unmet Needs
 - Low Threshold Buprenorphine Programs
 - Wisconsin Addiction Recover Helpline
 - ED2 Recovery
 - Peer Support Expansion
 - Evidence-Based Professional Training
 - Buprenorphine Induction Training

Karen Kinsey reported that she had heard only tribes and counties could apply for SOR funding. Jennifer Beer noted that Unmet Needs specifically is only counties and tribes. Sheila Weix noted that money went to those who are dealing with all aspects of the opioid epidemic. Christine Ullstrup asked about time period for SOR funding. Jennifer Beer reported the no cost extension of SOR2 is funding five agencies right now. Programs receiving SOR2 are not included in SOR3. Jennifer Beer reminded committee members about the upcoming Opioids, Stimulants, and Trauma Summit. Jill Gamez asked about the awards for Unmet Needs. Jennifer Beer reported that awards should be going out soon. The announcement for low threshold will be in March. Committee members thanked SOR Coordinators for the update.

Committee members discussed update. Sheila Weix noted that they are working on pilot program with Pear Therapeutics that includes CBT pieces within a phone application. Contingency management can be done via the app and works with the Matrix Model. There is the \$75 limit but much higher shown to be effective. Beth Collier reported that \$1,700 - \$1,900 a year is shown to be effective contingency management. Currently being piloted in California. SAMHSA has been approached multiple times about it being too low. Response has been that they are looking at it. Current understanding is that opioid settlement funding can be used to supplement federal funding but making sure that everyone is on the same page about this. Contact information shared for Dean Krahn: dean.krahn@dhs.wisconsin.gov who is primary contact for pilot program.

9. COVID Updates/Workforce Challenges

Sheila Weix shared that they had a success when an LPC from Michigan received their license yesterday. There is such a large need. Currently, they have no waitlist for MAT but do have a waitlist for counseling. With DSPS stuff, no supply of providers coming in.

10. April Agenda Items

- Continued discussion with DMS
- Update from BPTR

11. Adjournment

Meeting adjourned at 11:52AM with a motion from Beth Collier and second by Sheila Weix.

Prepared by: Sarah Boulton on 2/15/2023.

Planning and Funding Committee reviewed and approved these minutes at its 4/19/23 meeting.

Tony Evers
Governor



Kevin Florek
Chairperson

Sandy Hardie
Vice Chairperson

Christine Ullstrup
Secretary

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

Planning and Funding Committee

April 19, 2023

9:30am to 12:30pm

Meeting to be held via Zoom

Meeting URL: <https://dhs.wi.zoomgov.com/j/1617160029>

Meeting ID: 161 716 0029

Conference Call: 669-254-5252

AGENDA

- | | | |
|-----|---|--|
| 1. | Call to Order and Roll Call | Christine Ullstrup, Co-Chair
Beth Collier, Co-Chair |
| 2. | Review February 15, 2023 Meeting Minutes | Beth Collier |
| 3. | ATLAS Discussion | Shatterproof Team |
| 4. | Revised DHS 75 and Medicaid | Pam Lano, DMS
Jessica Cwirla, DMS |
| 5. | Bureau of Prevention Treatment and Recovery Updates | Andrea Jacobson, DHS |
| 6. | Advisory Committee Updates | Committee Members |
| 7. | Public Comment | Beth Collier |
| 8. | Strategic Plan Updates | Committee Members |
| 9. | DHS Updates | Sarah Boulton, DHS |
| 10. | COVID Updates/Workforce Challenges | Committee Members |
| 11. | Agenda for May | Committee Members |
| 12. | Adjournment | All |

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Planning & Funding Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee's primary objective is to assist SCAODA with coordinating substance use disorder planning and funding initiatives across state agencies. DHS is an equal opportunity employer and service provider. If you need accommodations because of a disability, if you need an interpreter or translator, or if you need this material in another language or in alternative format, you may request assistance to participate by contacting Sarah Boulton at 608.590.8598 or Sarah.Boulton@dhs.wisconsin.gov.

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA Planning and Funding Committee		Attending: Members: Christine Ullstrup, Beth Collier, Jill Gamez, Kevin Florek, Sheila Weix, Kellie Blechinger DHS Staff: Sarah Boulton, Andrea Jacobson, Pam Lano, Jessica Cwirla Guests: Kelsey Knowles, Catherine Taylor, Shannon Biello, Lisa Kugler, Hannah Huffman
Date: 4/19/2023	Time Started: 9:22AM	Time Ended: 12:17PM
Location: Zoom		Presiding Officers: Beth Collier and Christine Ullstrup

Minutes

1. Call Planning and Funding Committee to Order

Committee Co-Chair Beth Collier called the meeting to order at 9:32AM.

2. Review February 15, 2023 Meeting Minutes

Christine Ullstrup made a motion to approve the minutes of 2.15.23.

Kevin Florek seconded the motion.

No discussion or changes mentioned.

Motion to approve the minutes carried unanimously with one abstention (Sheila Weix).

Minutes were approved.

3. ATLAS Discussion

Shatterproof team members Kelsey Knowles, Catherine Taylor, Shannon Biello, and Lisa Kugler provided the update and led the discussion. Lisa Kugler noted that Shatterproof has completed its first provider enrollment in Wisconsin. Per Kelsey Knowles, 62 percent of providers completed the survey, which is very high for first round of enrollment. Beth Collier asked for number versus percentage. Kelsey Knowles reported that 182 facilities submitted data, 57 started the survey, and 56 did not engage, out of 295 eligible facilities in Wisconsin.

Lisa Kugler noted that redesigned website is going live tomorrow. New home screen enables the ability to see all providers in the area or to take the ASAM-approved screener brief assessment. Sheila Weix asked how the order of results is determined. Lisa Kugler reported that results are based on best match and principles of care. If filters are changed then the results will adjust. Committee members discussed the allowance of smoking and tobacco products under new DHS 75 and needing to address tobacco use disorder. Christine Ullstrup noted that providers may still allow designated smoking areas on campus. It needs to be written clearly in policy.

Jill Gamez noted that it's great there are so many preferences to select. It would be helpful on the back end to see where there are gaps, for example, childcare. It would be helpful to see what people are seeking in an area that may not be available. Sheila Weix asked who the audience is for the site – family members would likely find this helpful, but a primary patient may struggle. Shannon Biello reported that they have tested the site with all different users. Agree that it could potentially be challenging for someone experiencing active addiction to utilize the site. In user testing, discovered that often people are leaning on their networks to access help. Sheila Weix noted the site is likely a challenge for primary patients, but it is a great tool for care coordinators. Shannon Biello reported that they try to accommodate all different users who may be utilizing the site.

Lisa Kugler reviewed how people are matched to services, including consumer reviews. Sheila Weix asked if there is any opportunity to respond to consumer reviews. Shannon Biello reported that many questions are around alignment with principles of care and clinical best practices rather than reviews. If a review is unhelpful, malicious, or fraudulent, may be flagged by provider for review to potentially be removed. The site does not allow for comments back from the providers. Before posting, there are multiple steps of review. Sheila Weix asked if providers should be scanning for reviews or if they will be notified when a review is posted. Shannon Biello reported that no reviews are posted until there are at least 20 to ensure there is substantial information.

Christine Ullstrup asked what it might look like for the ATLAS portal if the Planning and Funding Committee made recommendation to the state for ATLAS to be used for open bed tracking. Lisa Kugler provided an overview of a professional portal example and potential timeline, with time to understand need of availability, determining how updates would be made, training providers, and launching. Potential launch of a system might be Spring 2024. Christine Ullstrup clarified if this could be part of the original contract with DHS. Lisa Kugler reported that this was not in the original contract with DHS. Building out this capacity would be an enhancement

to the system. Christine Ullstrup asked if this would include sober living and recovery housing. Lisa Kugler noted that ATLAS does not currently include recovery housing, this would be an enhancement to the current system. For full-scale implementation process, work very closely with consumer groups to create awareness, move into referral spaces, and target outreach to areas where there may be barriers. Christine Ullstrup asked what the sustainability plan is for the ATLAS platform in Wisconsin. Lisa Kugler noted that Shatterproof is still engaging with the state around sustainability. Currently, have a one-year contract that is ending 6.30.23. Committee members thanked the Shatterproof team for the update.

4. **Revised DHS 75 and Medicaid**

Division of Medicaid Services (DMS) Behavioral Health Policy Section Manager, Pam Lano and Behavioral Health Policy Analyst Jessica Cwirla provided the update. To align with the revised DHS 75, there are 11 Medicaid coverage projects. DMS has completed five of the 11 projects, including:

- Transition to new provider certification number.
- Integrated BH Stabilization 75.56. This is an interim solution to create a reimbursable place of service for crisis stabilization.
- Qualified Treatment Trainees (QTTs) to be DHS 75 certified facilities to provide substance use disorder (SUD) treatment.
- Alignment of mental health and SUD treatment outpatient benefits/rates.

The six remaining projects are currently underway, including:

- Drug Testing. To align policy with administrative cost, adding point of care testing coverage to the outpatient SUD and SUD day treatment benefits.
- SUD Intensive Outpatient (IOP) is a new level of care in the revised DHS 75 that falls between outpatient services and day treatment.
- Concurrent Services. DHS 75 allows members to receive services at more than one level of care at a given time. DMS will explore additional areas of coverage for medically necessary concurrent services.
- Continuing Care implementation will likely roll out in early 2024 following the implementation of concurrent services.
- Withdrawal Management Services, which are currently only covered by Medicaid in hospital setting. DHS 75 added residential withdrawal management and intoxication monitoring services. To roll out after the implementation of continuing care.
- Office based opioid treatment (OBOT) was created as a new provider type with the revised DHS 75. Currently, OBOT prescribers may be reimbursed for medical evaluation and management services when prescriptions/orders are issued. Federal Consolidations Appropriations Act, 2023 removed a federal requirement for prescribers to register with the DEA as DATA-Waived to prescribe OUD medications. Wisconsin is determining how to move forward with federal changes.

Beth Collier asked if Wisconsin is applying for waiver to provide re-entry. Pam Lano noted that there is more to come on this topic. Beth Collier noted that it would be helpful if OTPs could be reimbursed for pregnancy and HIV testing, which is required for DHS 75. Pam Lano reported that this has been raised but it is currently unclear how it would be done. Christine Ullstrup noted that current reimbursement rates are not covering services. Pam Lano noted that they are working to streamline the authorization process. For reimbursement for residential services, would welcome written feedback.

Committee members thanks DMS team members for providing the update.

5. **Bureau of Prevention Treatment and Recovery Updates**

Deputy Director of the Bureau of Prevention Treatment and Recovery (BPTR) Andrea Jacobson provided the update. Bureau updates include:

- DMS team noted the room & board benefit that is included in the Governor's Budget.
- Opioid settlement dollars went out to counties and tribes for room & board, specific to opioid use disorder.
- Training opportunity upcoming for recovery residences.
- Distribution of Naloxone is occurring throughout the state, specifically where there are high-needs areas. Implementing State Naloxone Saturation Plan.
- The Children's Systems of Care Summit will be held next week.

Beth Collier asked about low threshold for buprenorphine induction. Started on SOR grant and now moved to opioid settlement. Andrea Jacobson noted that SOR was able to fund three projects but looking at other options to fund additional projects.

Jill Gamez noted that there has been a discussion for years around how to really get at capacity in the state. Committee brought forth a motion at September Council meeting. ATLAS system seems to have capacity to

potentially do this but Shatterproof does not have a contract past June 2023. How do we know how we're doing in the state? Christine Ullstrup noted that they are hearing from the state that there is no mandate to request capacity information. One suggestion the committee made was to include the number of beds, outpatient capacity, age served, etc. in the application for licensure. Andrea Jacobson reported that the importance of such a system is recognized. Some barriers include the fiscal challenges of having a real-time tracker and providers updating the system to have meaningful, up-to-date information in the system. Jill Gamez noted that there is a strong business case for providers to do this. Providers are already spending time on this. It is great that over 60% of providers entered their information into ATLAS system – this can be used as support. It benefits providers financially to fill their beds. A real-time capacity system is an easy way for providers to be in compliance with the 90% reporting requirement. Something like this could even be done as a pilot program rather than a large, system-level project. Beth Collier reported that DHS has been looking at different systems to do this work. New York has a similar structure to Wisconsin and has a nice set up that meets the need. There is increased funding coming into the state through supplemental funding and settlement funding. It makes sense to potentially be working on the up-front costs of such a system. Andrea Jacobson reported that much of that funding has been allocated. At this point, there is not dedicated funding that could go towards this. Christine Ullstrup suggested that, as a start, should be working with DQA to gather the number of beds. Won't be real-time but it will at least be a start. Andrea Jacobson reported that the state has previously developed mapping of where services are. Most recently done in 2016. Planning to do this again.

Committee thanked Andrea Jacobson for providing the update.

6. Advisory Committee Updates

Christine Ullstrup reported that she is serving as the SCAODA representative on the DHS 72 Advisory Committee that will have first meeting in May. Jill Gamez reported that the next advisory meeting for Shatterproof is scheduled for June 7th.

7. Public Comment

None.

8. Strategic Plan Updates

None.

9. DHS Updates

DHS staff Sarah Boulton provided the following updates:

- BPTR Staffing updates:
 - o Carmella Glen, who was the Peer Run Respite & Peer Services Coordinator has left to pursue an opportunity with Dane County.
 - o Yolanda Candler has joined the Prevention Intervention and Recovery Services Section as a Prevention Coordinator
 - o Hannah Foley has joined the Performance Management Section as the Mental Health Planner.
- Wisconsin Budget Updates:
 - o The next steps for the 2023 – 2025 biennial budget: [High Level Budget Timeline](#)
 - o The Joint Committee on Finance is holding Statewide Listening Sessions and accepting public comments that may be submitted at [JCF Listening Sessions](#)
 - o Additional budget information on the Governor's Proposed Budget can be found on the DHS website <https://www.dhs.wisconsin.gov/budget/index.htm>
- Legislative Updates
 - o Senate Bill 191: <https://docs.legis.wisconsin.gov/2023/related/proposals/sb191>. Current law prohibits employment discrimination on the basis of a conviction record. This prohibition applies to the Department of Safety and Professional Services (DSPS) and the credentialing boards in granting credentials. However, current law also allows DSPS or a credentialing board to refuse, bar, or terminate an occupational credential due to a prior conviction if the circumstances of the offense are substantially related to circumstances of the licensed activity. The bill allows DSPS to complete its investigation as to whether the circumstances of an arrest, conviction, or other offense are substantially related to the circumstances of the licensed activity without reviewing certain types of violations.

10. COVID Updates/Workforce Challenges

Christine Ullstrup reported that they are no longer requiring masks. Policies cover transmissible diseases rather than being COVID-specific. Staffing continues to be a challenge. Jill Gamez agreed that staffing continues to be a

challenge for their facility as well. Important not to sacrifice quality of staff. Kellie Blechinger noted that lots of providers are struggling with this. Desperate to fill positions but then have issues with facilitating to fidelity. Jill Gamez reported that the Advancing a Healthier Wisconsin Endowment from the Medical College of Wisconsin is focused on maternal/child health and expanding the workforce. Would be helpful to do something similar for residential workers. Could potentially put a training together for students. Not just the regulations but also specific skills, like boundaries. Wonder if individual organizations would be interested in a behavioral health/substance use training. Organizations often have college students working with them. Could be doing more training for these young professionals to feed the workforce. Christine Ullstrup agreed that a training academy for residential services providers would be great. Should reach out to other providers and see if a group can be put together. There are workforce grants coming out. For future grants, could join forces to develop online trainings.

11. May Agenda Items

- Invite DMS for rate setting discussion
- Revisit strategic plan
- Vital strategies
- Block grant application update

12. Adjournment

Meeting adjourned at 12:17pm with a motion from Kellie Blechinger and a second from Christine Ullstrup.

OPEN MEETING MINUTES

Name of Governmental Body: SCAODA prevention committee		Attending: Chris Wardlow, Stacy Stone, Faith Price, Janet Feege, Meagan Barnett, MacKenzie Ingle, Annie Short, Sarah Johnson, Devin Manns, Erin Sterk, Hannah Lepper, Maggie Northrop, Maureen Busalacchi, Danielle Luther, Felice Borisy-Rudin, Alex Berg, Emily Loertscher, staff: Allison Weber
Date: 1/19/2023	Time Started: 9:30 AM Time Ended: 12:08PM	
Location: virtual zoom		Presiding Officer: Chris Wardlow, Stacy Stone

Minutes

1. Welcome and Introductions.....Stacy Stone and Chris Wardlow
Chris called the meeting to order and thanked everyone for being here. It was noted that there was a quorum. Introductions were made.
2. Public Comment: The committee will accept comments from the public relating to any committee business.....Stacy Stone, Chair and Chris Wardlow
Chris opened the floor for public comments. No public comments.
3. Approve minutes from July 2022 and November 2022 meetings..... Stacy Stone and Chris Wardlow
Minutes from July 2022 were approved with Meagan Barnett making the motion and Emily Loertcher seconded. A vote was taken, and the motion passed.
4. Minutes from the November meeting were approved with Maureen Busalacchi making the motion and Annie Short seconding the motion. A vote was taken, and the motion passed. Meagan Barnett abstained.
5. Wisconsin Alcohol Policy Project (WisAPP) Updates..... Maureen Busalacchi and Felice Borisy-Rudin
Felice Borisy-Rudin announced that she is now assistant professor of Pharmacology at the Medical College of Wisconsin, and the committee congratulated her. Maureen Busalacchi gave updates on the municipal database, the Place of last Drink (POLD), an Alcohol Compliance check manual, and a webinar series planned for this year. Slides were shown on the WisAPP data.
6. State Health Improvement Plan (SHIP) and serving as the Alcohol Action Team....Maggie Northrop
Action Item: The SCAODA Prevention Committee will continue to act as the Alcohol Action Team for the SHIP. The motion was made by Maureen Busalacchi and was seconded by Annie Short. The motion was approved by vote.
7. Advocating for state regulation of hemp-derived cannabinoids..... committee members
The committee to move to the SCAODA council to consider a motion to the legislature as a stop gap to prohibit sale to anyone under 21. The motion: The sale of CBD and cannabinoids are not sold to minors (under 21) with the exception of medical needs. Annie Short made the motion and it was seconded by Hannah Lepper. The motion was approved by a vote.
8. Equity and Inclusion ad hoc Workgroup and Prevention..... Meagan Barnett
Meagan had to leave early so this is shelved until the 4/20/23 meeting
9. CADCA presentation.....General Barrye Price and Pat Castillo
CADCA gave a presentation about their opioid academy.
10. Updates.....committee members
Sarah gave an update on opioid settlement funds, Emily said that DPI mini grants for prevention are out. Danielle reported that the HOPE consortium event is August 3 and 4. Chris asked that agenda items for 4/20/23 be emailed to him, Stacy, or Allison.

Next meeting is Thursday, April 20, 2023

Prepared by: Allison Weber on 3/6/2023.

These minutes are in draft form. They will be presented for approval by the governmental body on: 4/20/2023



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

OPEN MEETING NOTICE

**Prevention Committee
Zoom link**

<https://dhs.wi.zoomgov.com/j/1618220320?pwd=Ym16WmhkMVp1QlgzZ2VyaC92VEFTQT09>

Thursday, April 20, 2023
9:30 a.m. to Noon

MEETING AGENDA

- 1. Welcome and Introductions..... Stacy Stone, Chair, and Chris Wardlow

Attendees: Allison Weber, Yolanda Candler, Jennifer Stegall, Annie Short, Felice Borisy Rudin, Maggie Northrup, Danielle Luther, Hannah Huffman, Meagan Barnett, Kathy Asper, Melissa Moore, Hannah Lepper, Alex Berg, Faith Price, Linnea James, Chris Wardlow, Devin Manns, Emily Holder, Maureen Busalacchi

- 2. Public Comment: The committee will accept comments from the public relating to any committee business..... Stacy Stone, Chair, and Chris Wardlow

No public comment

- 3. Approve Minutes from January 2023 Meeting..... Stacy Stone, Chair, and Chris Wardlow

Motion: Kathy Asper
Second: Melissa Moore
Approved: Yes

- 4. State Health Improvement Plan and serving as Alcohol Action Team..... Maggie Northrop

Maggie: state HIP published as exec summary, fully publish later in Spring. Link:

<https://www.dhs.wisconsin.gov/publications/p01791-2023.pdf>

Prevention Comm as alcohol group and for opioids and grandfathered in to next 5 years

(Outcome) alcohol priority action team? What will we call it? Felice-need to include alcohol

Plan is very broad-substances keep changing. Focus on policy and environment change

- 5. WisAPP Updates, Alcohol Awareness Month..... Maureen Busalacchi and Felice Borisy-Rudin

Alcohol awareness month-AWY web page has a lot for social media

Legislature: bill for remote delivery (click and collect, curbside) shifts responsibility to delivery co.(?)

Senate Bill 130- can sign up for alerts on bills or topics

<https://notify.legis.wisconsin.gov/Subject/Manage?defeatCache=f449e2b314c744a19e0058cbcd99584>

***CONSIDER A MOTION FOR THE COMMITTEE TO PRESENT TO THE COUNCIL**

Motion: Chris Wardlow-forward to the council that they weigh in on SB130 and oppose the bill

Second: Annie Short

Approved: Yes

Abstain: Jennifer Stegall (OIC)

WPHA-legislative tracker system-can sign up

<https://www.wpha.org/page/CurrentLegislative>.

Social Host Ordinance conversation

Public Health Law conference accepted

WI PH conference accepted

June 5 **POLD** user meeting in GB. \$25 10:30-3:30

Database development

 Municipal alcohol policies

 May expand to RMS system later

Had Webinar on legislature policy and calendar

Alcohol compliancy age checks (include promoting equity)

OWI system on Badger Tracks used by all law enforcement

May expand to RMS system later

MSOE students-presentation, advocacy and lobbying – “Own time, own dime and own equipment”

WHO report <https://www.who.int/publications/i/item/9789240072152>

6. Tobacco 21 Updates..... Committee Members

Invite someone to be at this meeting regularly

 Have we asked council to weigh in? Probably not for this session (leg).

To encourage the state to align with federal standards for tobacco 21

Motion: Ask council To encourage the state to align with federal standards for tobacco 21: Maureen

Second: Annie

Approved: Yes

We will accept recommendations to add tobacco content experts to the next meeting. Email Allison

7. Advocating for state regulation of hemp-derived cannabinoids update Committee Members

Attached document-screen shared

Motion 1: Chris W: A motion requesting that SCAODA urge the Legislature and Governor to take emergency action to prohibit the sale and distribution of hemp-derived psychoactive cannabinoids to persons under the age of 21.

Motion 2: Felice: A motion requesting that SCAODA urge the Legislature and Governor to take emergency action to prohibit the sale and distribution of hemp-derived psychoactive cannabinoids to persons under the age of 21, except for persons under the age of 21 with a valid prescription for the hemp-derived psychoactive cannabinoid.

Motion 3: Felice requesting that SCAODA urge the Legislature and Governor to take emergency action to prohibit the sale and distribution of hemp-derived psychoactive cannabinoids to persons under the age of 21, except for persons under the age of 21 with a valid prescription or certificate authorized under Wis. Stat. 961.32(2m)(b) for that hemp-derived psychoactive cannabinoid or cannabidiol product.

Statute 961.32

Motion:

Second:

Approved:

Comment: Felice-so many hemp derived products, chemists able to make lots of products, we have to really think about THC in general. There are folks who use medicinal THC with an Rx

Melissa-2019 Wisconsin Act 68-state approval of the farm bill

Jennifer: pre-empting municipal ordinances? Good point, we’ll look into it

Danielle-worried about the Rx

Table this to another time-small group outside of the quarterly meeting? Chris will take progress to next ITC meeting

8. Equity and Inclusion ad hoc Workgroup and Prevention..... Meagan Pichler
Tabled for now until DHS has more staff for Diversity Comm and its sub-committees

9. Member Updates..... Committee Members

10. Agency Updates..... Committee Members
Allison reminded everyone that SAP-SIS reports are due on May 12, 2023

11. Future Agenda Items..... Committee Members

Next meeting is Thursday, July 20, 2023.

The purpose of this meeting is to conduct the governmental business outlined in the above agenda. The Prevention Committee serves under the State Council on Alcohol and Other Drug Abuse (SCAODA). The Committee's primary objective is to assist SCAODA with coordinating substance abuse prevention initiatives across state agencies.

DHS is an equal opportunity employer and service provider. If you need accommodations because of a disability, if you need an interpreter or translator, or if you need this material in another language or in alternative format, you may request assistance to participate by contacting Allison Weber at allison.weber@dhs.wisconsin.gov.

<https://scaoda.wisconsin.gov>

SCAODA Motion Introduction

Committee Introducing: Prevention Committee

Motion: The Prevention Committee requests that SCAODA communicate to members of the State Legislature and Governor Evers the need for a strong state Tobacco 21 policy that not only prohibits the sale of any and all tobacco products (as defined in section 201(rr) of the Federal Food, Drug, and Cosmetic Act*) to persons under the age of 21, but also requires retailers of all tobacco products to be licensed and holds tobacco retailers and licensees accountable rather than youth purchasers or non-management employees. In addition, a state Tobacco 21 policy needs to ensure that local jurisdictions have the authority to enact more stringent regulations for tobacco products than state or federal law.

Related SCAODA Goal:

Goal #2: Inform Wisconsin citizens on the negative fiscal, individual, and societal impacts of substance use disorders.

Objective 2(a): Enhance Council visibility as a substance use disorder policy body and increase its level of advocacy to the Wisconsin Governor, Legislature, and interested citizens.

Background: On December 20, 2019, President Trump signed legislation to amend the Federal Food, Drug, and Cosmetic Act, and raise the federal minimum age of sale of tobacco products from 18 to 21 years. As such, it is now illegal for a retailer to sell any tobacco product – including cigarettes, cigars and e-cigarettes – to anyone under 21. While the law does not require that states pass laws to raise their sales age to 21, it does require states to demonstrate that their retailers are complying with the law. If a state’s retailer noncompliance rate exceeds 20%, the state risks losing a portion of their federal substance abuse block grant funding.

- **Positive Impact:** Raising the minimum sales age for all tobacco products will help reduce tobacco use, nicotine addiction and tobacco-related death and disease. Also, aligning state law with federal law will help return the state’s noncompliance rate to pre-pandemic levels by enabling local enforcement of Tobacco 21. This in turn will help ensure that the state does not incur a Synar violation and be penalized 10% of its federal substance use block grant allocation.
- **Potential Opposition:** On March 6, 2023, an article was published on wisbusiness.com titled “Republicans raise doubt about increasing tobacco-buying age to 21.” The article indicated that Republicans intended to pull the Tobacco 21 measure from the Governor’s Biennial Budget and raised doubts about it moving forward as separate legislation. Among the reasons cited were stakeholders not pushing it and the view among some that if a person is old enough to die for our country at age 18, they should be able to use tobacco products.

Rational for Supporting:

- Tobacco use remains the leading cause of preventable deaths in the U.S.
- According to the 2021 Annual Commercial Tobacco Use Cessation Report to the Governor and the Legislature, tobacco causes the preventable deaths of approximately 7,900 Wisconsinites annually and costs an estimated \$2.66 billion in annual health care expenses, \$581.4 million in Medicaid claims, and \$2.06 billion in lost worker productivity. Also, the report mentions that nearly 30 percent of Wisconsin’s cancer deaths are attributable to smoking.
- Nearly 95% of adult smokers report starting tobacco use before 21.

- Nearly 1 in 8 Wisconsin tobacco retailers sold tobacco products to customers under the age of 21 in 2022.
- The 2022 violation rate was 11.9%, nearly double the pre-pandemic rate of 5.5%, according to DHS.
- Wisconsin’s purchasing age for cigarettes, other tobacco products, and products containing nicotine (including e-cigarette products containing nicotine) is still 18, despite the federal age limit being raised to 21 over a year ago.
- Local law enforcement in Wisconsin can enforce local ordinance and state law; they cannot enforce the federal prohibition on sales to 18-20 year olds.
- State statute prevents local municipalities from raising the minimum legal purchase age of tobacco products to 21.
- Wisconsin's Substance Abuse and Treatment Block Grant is tied to state compliance. States risk losing up to 10% of their block grant if compliance falls below 80%. In Wisconsin, 10% of our block grant would be approximately \$2.7 million annually.

* Definition accessed 5/22/23 at <https://www.federalregister.gov/d/2023-03950>

“The Family Smoking Prevention and Tobacco Control Act (Tobacco Control Act) (Pub. L. 111-31) was enacted on June 22, 2009, amending the FD&C Act and providing FDA with the authority to regulate tobacco products. Section 201(rr) of the FD&C Act (21 U.S.C. 321(rr)), as amended by the Tobacco Control Act, defined the term “tobacco product” to mean any product made or derived from tobacco that is intended for human consumption, including any component, part, or accessory of a tobacco product (except for raw materials other than tobacco used in manufacturing a component, part, or accessory of a tobacco product). It further stated that the term “tobacco product” does not mean an article that is a drug under section 201(g)(1), a device under section 201(h), or a combination product described in section 503(g) of the FD&C Act (21 U.S.C. 353(g)).

The Consolidated Appropriations Act of 2022 (the Appropriations Act) (Pub. L. 117-103), enacted on March 15, 2022, amended the definition of the term “tobacco product” in section 201(rr) of the FD&C Act to include products that contain nicotine from any source.”

SCAODA Motion Introduction

Committee Introducing Motion: SCAODA Prevention Committee
Motion: That SCAODA oppose 2023 SB130/AB 127
Related SCAODA Goal: Goal #2: Inform Wisconsin citizens on the negative fiscal, individual, and societal impacts of substance use disorders. Objective 2(a): Enhance Council visibility as a substance use disorder policy body and increase its level of advocacy to the Wisconsin Governor, Legislature, and interested citizens.
<p>Background: On March 14, 2023, 2023 SB 130 was introduced by Senators STROEBEL, ROYS, BALLWEG, BRADLEY, FEYEN and NASS, cosponsored by Representatives DUCHOW, MYERS, ANDERSON, BARE, BEHNKE, CLANCY, HONG, JOERS, KITCHENS, MADISON, MACCO, RODRIGUEZ, SCHMIDT, SPIROS, STUBBS and ZIMMERMAN, and referred to Committee on Government Operations, Elections and Consumer Protection. 2023 SB 130 would greatly expand the availability of alcohol beverages in Wisconsin and increase the risk of alcohol consumption by underage and intoxicated people. It would allow remote delivery of alcohol beverages throughout the state in response to online or telephone sales, without any funding for enforcement of compliance with state law. It would also preempt local control and decision-making regarding curbside or parking-lot pick up of alcohol beverages, without providing adequate safeguards against sales to underage and intoxicated people.</p> <ul style="list-style-type: none"> • Positive impact: Opposing this bill would prevent a reckless and undesirable expansion of the availability of alcohol beverages through remote delivery and remote pick-up, that does not provide any funding for its enforcement of compliance, does not provide sufficient safety features, and preempts local municipal (city, village, town) control of alcohol licensing and sales. • Potential Opposition: Large interstate commercial retailers and many grocery stores perceive this bill as a way to inexpensively provide more alcohol beverages to more customers. The bill would create a remote delivery permitting process that would require delivery persons to be of legal drinking age and complete a responsible beverage server training course, and would require the driver to check ID.
<p>Rationale for Supporting Motion: 2023 SB 130 would do two main things:</p> <ol style="list-style-type: none"> 1. Allow online or telephone order sales for delivery by a retailer, delivery service under common ownership with the retailer or third-party delivery service; and <ol style="list-style-type: none"> a. Create an alcohol delivery permit b. Shift liability for delivery from the retailer to the delivery service 2. Allow curbside pick-up from all licensees that have a parking space as part of their licensed premises <ol style="list-style-type: none"> a. Allow for licensees to apply for parking spaces to become part of their licensed premises, even if the parking spaces are not contiguous with the rest of the licensed premises. b. Preempt municipalities from imposing additional regulations relating to sales of alcohol beverages made by remote pickup order. <p>Analysis: From a public health and public safety perspective, expanding the availability of alcohol</p>

beverages through remote delivery and remote pick-up is both undesirable and reckless. The bill is not crafted in such a way as to protect from harm those who are vulnerable, such as people who are underage or people who have an alcohol use disorder. It increases underage access to alcohol beverages and would facilitate people who are already intoxicated gaining easy additional access to alcohol.

SIGNIFICANT ISSUES IN THE BILL CREATE PROBLEMS FOR BOTH PUBLIC HEALTH OR PUBLIC SAFETY.

1. Removing ability to hold licensee legally responsible for delivery to underage or intoxicated persons.

The bill would remove the requirement for licensees to conduct face-to-face sales for delivery. The greatest public health and safety danger with this bill is that it allows licensees to completely avoid responsibility for selling or delivering to underage or intoxicated people when selling alcohol for remote delivery through a delivery service. The bill would entirely shift the legal liability to the delivery service. It would create section 125.07(1)(b)7., which would provide that when a licensee uses a delivery service, “the licensee is not subject to any penalty” under section 125.07(1), which is the law for selling or serving underage people. 2023 SB 130, Sec. 3. It would also create section 125.07(2)(c), which would similarly provide that when a licensee uses a delivery service, “the licensee is not subject to any penalty” under section 125.07(2), which prohibits selling or serving intoxicated people. 2023 SB 130, Sec. 4. The sale would take place at the time of payment. See 2023 SB 130, Secs. 14 and 22. It is reasonable to anticipate that this bill would not just increase availability of alcohol beverages, but also would increase the frequency and intensity of underage drinking and binge drinking. There are several problems with this shift in liability:

a. Under the proposed law, retailers would not be held responsible or liable for selling to underage or intoxicated people when they use remote delivery, unless the licensee is the one who delivers the alcohol. If this bill passes, no one could penalize the retailer for a third-party delivering alcohol on the retailer’s behalf to an underage or intoxicated person. See 2023 SB 130, Secs. 3 & 4. This is contrary to Recommendation 12 for State Government and State Agencies in the Dec. 2021 SCAODA Report by the Alcohol Prevention Ad-Hoc Workgroup, *Moving Forward: Policies and Strategies to Prevent and Reduce Excessive Alcohol Use in Wisconsin* (“SCAODA Report”), which recommended instead that both the retailer and the delivery service be separately responsible for determining that alcohol is only delivered to individuals who are age 21 or older and not intoxicated.

b. The bill would create sec. 125.272(2)(b)4. that would eliminate the requirement on the licensee to check a customer’s ID if the “customer asserts [online or by telephone] that the customer has attained the legal drinking age and is not intoxicated.” 2023 SB 130, Sec. 14. There would be no requirement or even opportunity for the retailer to inspect the purchaser’s ID, to determine whether the purchaser was actually 21, to look at the purchaser’s face and determine that it matched the purchaser’s ID, or to make a judgment whether the purchaser was intoxicated. All the responsibility for checking ID and making judgment calls would shift to the delivery person.

c. The bill would incentivize use of remote delivery by retailers, because it would prevent enforcement actions by law enforcement, local government, or the DOR against licensed retailers that are selling to underage or intoxicated people through a delivery service. The consequence of this would be that it would allow noncompliant businesses, retailers that already are selling to underage or intoxicated people, to continue acting with impunity, knowing that they have a way to do this without any negative consequences – no forfeitures, no civil liability, and no licensing repercussions.

d. While the bill would require record-keeping by both the delivery service and the licensee, it disincentivizes the individuals performing delivery from checking ID or refusing to deliver to intoxicated persons. It would require a delivery service that is unable to complete delivery, due to a customer being underage or intoxicated, to return the alcohol beverages to the licensed retailer. At that point the licensee would be required to cancel the sale – but nothing in the bill discusses what compensation the delivery person would receive, despite the additional driving miles – certainly no tip, but also, if they are only paid by percentage of the sale, it is possible they would receive no payment. 2023 SB 130, Sec. 14, proposing creating sec. 125.272 (2).

e. The bill would move the stage for enforcement from the point of sale on the licensed premises to the point of receipt wherever the purchaser is located, whether it is at a house, an apartment building, a college dorm, an office building, or a park, shifting the location of enforcement from 17,429 alcohol beverage retailers to more than 2.4 million households in Wisconsin. It handicaps enforcement options for law enforcement, especially at a time when many law enforcement agencies are short on staff and fewer people are entering policing. Much greater effort, time, and expense would be required for law enforcement to observe the moment when ID is checked and the alcohol delivered. Even if illegal deliveries are observed by law enforcement, any citation issued would only be allowed to go to the delivery person.

f. In states with home delivery that have attempted to run Minimum Legal Drinking Age compliance checks on delivery scenarios, compliance with the law has been very poor. (Colbert, Wilkinson et al. 2021). In addition, in states in which home delivery was available, people who had alcohol beverages delivered drank more servings, more often, and were more likely to binge drink. (Colbert, Wilkinson et al. 2021, Grossman, Benjamin-Neelon et al. 2022).

2. Fees for Alcohol Delivery Permit do not offset cost of compliance

The bill attempts to address previously expressed concerns about alcohol delivery by creating an alcohol delivery permit through creating a new statute, sec. 125.20. It would place the responsibility for these permits with the Department of Revenue (DOR). Any “person” (including both individuals and businesses such as corporations or LLCs) who is either a retail licensee, a delivery service under common ownership with retail licensees, or a 3rd party delivery service, and who holds a business tax registration certificate would be able to receive an alcohol delivery permit from the DOR. 2023 SB 130, sec. 6. A business would be able to appoint an agent and vest that agent with all authority for the delivery operations. 2023 SB 130, sec. 6. Annual fees for the permit would be \$150 for retail licensees and \$300 for 3rd-party delivery services or delivery services under common ownership with a retail licensee. Id. While the

Wisconsin Department of Administration (DOA) estimates that this would bring in revenue of about \$2,932,500 total, it acknowledges that there is no provision in the bill to pay the DOR for increased administrative and staffing costs of \$694,490. (DOA, Fiscal Estimate - 2023 Session). The DOA estimates that the DOR would require additional staffing of one Excise Tax Agent and two Revenue Agents in order to administer the increased proposed alcohol delivery permits. Id. However, the DOA completely ignored another cost created by the bill, as the bill does not provide for any of the fees collected to be used for enforcement purposes, whether by the state or by local law enforcement. There are several problems with this proposed permit:

a. Fees collected by providing permits to businesses would be very small compared to the cost of enforcement, as many single third-party delivery businesses, e.g., EatStreet, GrubHub, or UberEats, could potentially hire or contract with thousands of drivers under a single \$300 annual alcohol delivery permit. For example, EatStreet drivers are employees. See, e.g., Drivers | EatStreet.com. The DOR estimates that there are currently 1061 local messengers/delivery service providers in Wisconsin. The third-party permits would only generate \$318,300 in revenues. The focus on businesses rather than individuals and use of DOR as the permitting agency are in contrast to Recommendation 18 for State Government and State Agencies of the SCAODA report, which recommended that an alcohol delivery license be created by the Department of Transportation, for every individual who delivers alcohol for a delivery service or a licensed retailer, as an endorsement on that individual's driver's license.

b. The bill would create sec. 125.02 (20k), in which "Third-party delivery service" would be defined as "a delivery service that is independent of a retail licensee and that derives less than 50 percent of its annual revenues associated with food and beverage delivery from the delivery of alcohol beverages." 2023 SB 130, sec. 2. However, it provides no scheme or funds for the immense work required for the DOR to calculate compliance with this requirement. In addition, the bill does not provide any clarity as to how "revenues associated with food and beverage delivery" would be calculated. Would that be the fees collected by the third-party delivery service from the retailers? Would it be tips? How do those fees get segregated into portions due to food or alcohol? The bill is silent on all this. Without funding, enforcement would not be achievable.

3. Municipal preemption and inadequate protections on remote pick-up.

2023 SB 130, Sec. 5 would create sec. 125.10 (6) preempting municipalities from imposing regulations on sales of alcohol beverages using remote pickup. It proposes the following: "a municipality may not prescribe additional regulations for, or impose additional restrictions relating to, sales of alcohol beverages made pursuant to remote pickup order. . . . An ordinance that is inconsistent with this paragraph may not be enforced."

However, in contrast to its proposed wording for remote delivery orders that would be created in 125.272 (2) the proposed bill does not provide ANY details about how to ensure that underage people and intoxicated people do not get served alcohol by remote pick-up orders. See 2023 SB 130, Secs. 14 and 22. Instead, the proposed 125.272 (3) refers to when the sale takes place (for remote pick-up, at the time of customer taking possession), the hours when the sale can happen, and that it does not allow for on-premises consumption in the parking stall. While the bill does

not contain any provisions to ensure that underage and intoxicated people are adequately carded and screened, it does prevent municipalities from adding those provisions by ordinance. The proposed bill would preempt and prevent municipalities from creating or using ordinances to ensure adequate compliance with Wis. Stat. sec. 125.07. Many municipalities already have ordinances for online ordering and curbside pickup of alcohol beverages with detailed procedures that would be preempted by this bill and no longer enforceable. Some of these ordinances that would be preempted include very reasonable requirements such as: that the sale and delivery of curbside pickup can only be made by a licensed operator, who must verify a valid photo identification; that the establishment captures and retains an image of each vehicle that picks up alcohol; and that if the purchaser is not the driver of the vehicle, the licensed operator must verify through photo ID that the driver is 21 years of age as well as the purchaser. Under the proposed bill, such ordinances would no longer be enforceable at all because they would be inconsistent with the proposed law.

CONCLUSION:

The bill as proposed has significant issues that adversely affect public health, by making alcohol more easily and widely available, increasing access to alcohol for underage and intoxicated people, and crippling enforcement by shifting liability away from the alcohol retailers while at the same time failing to provide any funding for enforcement. It also very significantly curtails and preempts local municipal control of licensing and alcohol sales regulation. The few positive attributes do not offset its main structural flaws. As such, SCAODA should oppose it.

Substance Use Disorders Prevention and Treatment Trainings and Conferences

Wisconsin Harm Reduction Conference

June 28- 29, 2023

Green Bay (with virtual option)

To highlight prevention, harm reduction, treatment, and recovery strategies related to opioids, stimulants, and trauma. Those who attend get continuing education credit. For more information, visit the [conference website](#).

Wisconsin Substance Use Prevention Conference

September 12-14, 2023

Kalahari Resort: Wisconsin Dells, Wisconsin (with virtual option)

To highlight strategies to prevent all types of substance use. Those who attend get continuing education credit. For more information, visit the [conference website](#).

19th Annual Mental Health & Substance Use Recovery Conference

October 19-20, 2023

Kalahari Resort: Wisconsin Dells, Wisconsin

For behavioral health professionals, people in recovery and family members, clinicians in the criminal and juvenile justice system, adolescent treatment professionals and educators, and anyone interested in the topics discussed. For more information, visit the [conference website](#).



SCAODA 2023 Meeting Dates

March 3, 2023 (Via Zoom)

June 2, 2023 (Via Zoom)

September 8, 2023 (Meeting Mode TBD)

December 1, 2023 (Meeting Mode TBD)

**BY-LAWS
of the
State of Wisconsin
State Council on Alcohol and Other Drug Abuse
As Approved
June 6, 2008
Amended 9-10-10, 9-9-11, 12-13-13, 12-12-14**

<please note: lines underlined below are taken directly from statute.>

ARTICLE I

Purpose and Responsibilities

Section 1. Authority

The council is created in the office of the governor pursuant to sec. 14.017 (2), Wis. Stats. Its responsibilities are specified under sec. 14.24, Wis. Stats.

Section 2. Purpose

The purpose of the state council on alcohol and other drug abuse is to enhance the quality of life of Wisconsin citizens by preventing alcohol, tobacco and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities by:

- a. Supporting, promoting and encouraging the implementation of a system of alcohol, tobacco and other drug abuse services that are evidence-based, gender and culturally competent, population specific, and that ensure equal and barrier-free access;
- b. Supporting the prevention and reduction of alcohol, tobacco, and other drug use and abuse through evidence-based practice with a special emphasis on underage use; and
- c. Supporting and encouraging recovery in communities by reducing discrimination, barriers and promoting healthy lifestyles.

Section 3. Responsibilities

The state council on alcohol and other drug abuse shall:

- a. Provide leadership and coordination regarding alcohol and other drug abuse issues confronting the state.

- b. Meet at least once every 3 months.
- c. By June 30, 1994, and by June 30 every 4 years thereafter, develop a comprehensive state plan for alcohol and other drug abuse programs. The state plan shall include all of the following:
 - i. Goals, for the time period covered by the plan, for the state alcohol and other drug abuse services system.
 - ii. To achieve the goals in par. (a), a delineation of objectives, which the council shall review annually and, if necessary, revise.
 - iii. An analysis of how currently existing alcohol and other drug abuse programs will further the goals and objectives of the state plan and which programs should be created, revised or eliminated to achieve the goals and objectives of the state plan.
- d. Each biennium, after introduction into the legislature but prior to passage of the biennial state budget bill, review and make recommendations to the governor, the legislature and state agencies, as defined in s. 20.001 (1), regarding the plans, budgets and operations of all state alcohol and other drug abuse programs. The council also recommends legislation, and provides input on state alcohol, tobacco and other drug abuse budget initiatives.
- e. Provide the legislature with a considered opinion under s. 13.098.
- f. Coordinate and review efforts and expenditures by state agencies to prevent and control alcohol and other drug abuse and make recommendations to the agencies that are consistent with policy priorities established in the state plan developed under sub. (3).
- g. Clarify responsibility among state agencies for various alcohol and other drug abuse prevention and control programs, and direct cooperation between state agencies.
- h. Each biennium, select alcohol and other drug abuse programs to be evaluated for their effectiveness, direct agencies to complete the evaluations, review and comment on the proposed evaluations and analyze the results for incorporation into new or improved alcohol and other drug abuse programming.

- i. Publicize the problems associated with abuse of alcohol and other drugs and the efforts to prevent and control the abuse. Issue reports to educate people about the dangers of alcohol, tobacco and other drug abuse.
- j. Form committees and sub-committees for consideration of policies or programs, including but not limited to, legislation, funding and standards of care, for persons of all ages, ethnicities, sexual orientation, disabilities, and religions to address alcohol, tobacco and other drug abuse problems.

ARTICLE II

Membership

Section 1. Authority

Membership is in accordance with section 14.017(2), Wis. Stats.

Section 2. Members

2.1 The 22-member council includes six members with a professional, research or personal interest in alcohol, tobacco and other drug abuse problems, appointed for four-year terms, and one of them must be a consumer representing the public. It was created by chapter 384, laws of 1969, as the drug abuse control commission. Chapter 219, laws of 1971, changed its name to the council on drug abuse and placed the council in the executive office. It was renamed the council on alcohol and other drug abuse by chapter 370, laws of 1975, and the state council on alcohol and other drug abuse by chapter 221, laws of 1979. In 1993, Act 210 created the state council on alcohol and other drug abuse, incorporating the citizen's council on alcohol and other drug abuse, and expanding the state council and other drug abuse's membership and duties. The state council on alcohol and other drug abuse's appointments, composition and duties are prescribed in sections 15.09 (1)(a), 14.017 (2), and 14.24 of the statutes, respectively.

The council strives to have statewide geographic representation, which includes urban and rural populated areas, to have representation from varied stakeholder groups, and shall be a diverse group with respect to age, race, religion, color, sex, national origin or ancestry, disability or association with a person with a disability, arrest or conviction record, sexual orientation, marital status or pregnancy, political belief, or affiliation, or military participation.

2.2 There is created in the office of the governor a state council on alcohol and other drug abuse consisting of the governor, the attorney general, the state superintendent of public instruction, the secretary of health services, the commissioner of insurance, the secretary of corrections, the secretary of transportation and the chairperson of the pharmacy examining board, or their designees; a representative of the controlled substances board; a representative of any governor's committee or commission created under subch. I of ch. 14 to study law enforcement issues; 6 members, one of whom is a consumer representing the public at large, with demonstrated professional, research or personal interest in alcohol and other drug abuse problems, appointed for 4-year terms; a representative of an organization or agency which is a direct provider of services to alcoholics and other drug abusers; a member of the Wisconsin County Human Service Association, Inc., who is nominated by that association; and 2 members of each house of the legislature, representing the majority party and the minority party in each house, chosen as are the members of standing committees in their respective houses. Section 15.09 applies to the council.

2.3 Selection of Members

From Wis. Stats. 15.09 (1)(a); Unless otherwise provided by law, the governor shall appoint the members of councils for terms prescribed by law. Except as provided in par. (b), fixed terms shall expire on July 1 and shall, if the term is for an even number of years, expire in an odd-numbered year.

2.4 Ex-Officio Members

- a. Ex-officio members may be appointed by a majority vote of the council to serve on the council, special task forces, technical subcommittees and standing committees. Other agencies may be included but the following agencies shall be represented through ex-officio membership: The Wisconsin Departments of: Revenue, Work Force Development, Safety and Professional Services, Veteran Affairs and Children and Families, the Wisconsin Technical Colleges System and the University of Wisconsin System.
- b. Ex-officio members of the council may participate in the discussions of the council, special task forces, technical subcommittees, and standing committees except that the chairperson may limit their participation as necessary to allow full participation by appointed members of the council subject to the appeal of the ruling of the chairperson.

- c. An ex-officio member shall be allowed to sit with the council and participate in discussions of agenda items, but shall not be allowed to vote on any matter coming before the council or any committee of the council, or to make any motion regarding any matter before the council.
- d. An ex-officio member may not be elected as an officer of the council.
- e. An ex-officio member shall observe all rules, regulations and policies applicable to statutory members of the council, and any other conditions, restrictions or requirements established or directed by vote of a majority of the statutory members of the council

2.5 Selection of Officers

Unless otherwise provided by law, at its first meeting in each year the council shall elect a chairperson, vice-chairperson and secretary from among its members. Any officer may be reelected for successive terms. For any council created under the general authority of s. 15.04 (1) (c), the constitutional officer or secretary heading the department or the chief executive officer of the independent agency in which such council is created shall designate an employee of the department or independent agency to serve as secretary of the council and to be a voting member thereof.

2.6 Terms of Voting Members

- a. Voting members shall remain on the council until the effective date of their resignation, term limit or removal by the governor, or until their successors are named and appointed by the governor.
- b. Letter of resignation shall be sent to the governor and council chairperson.
- c. Each voting member or designee of the council is entitled to one vote.

2.7 Code of Ethics

All members of the council are bound by the codes of ethics for public officials, Chapter 19, Wis. Stats., except that they are not required to file a statement of economic interest. Ex-officio members are not required to file an oath of office. As soon as reasonably possible after appointment or commencement of a conflicting interest and before

voting on any grant, members shall reveal any actual or potential conflict of interest. Chapter 19.46 of Wisconsin State Statutes states that no state public official may take any official action substantially affecting a matter in which the official, a member of his or her immediate family, or an organization with which the official is associated has a substantial financial interest or use his or her office or position in a way that produces or assists in the production of a substantial benefit, direct or indirect, for the official, one or more members of the official's immediate family either separately or together, or an organization with which the official is associated.

2.8 Nondiscrimination

The council will not discriminate because of age, race, religion, color, sex, national origin or ancestry, disability or association with a person with a disability, arrest or conviction record, sexual orientation, marital status or pregnancy, political belief, or affiliation, or military participation.

2.9 Nomination Process for Appointed Members and Officers

As per Article II, Section 2.1, the governor is required to appoint six citizen members. In addition, the council elects the chairperson, vice-chairperson and secretary, annually. The council will follow this process when making recommendations to the governor concerning appointments and nominating a slate of officers:

- a. The council, along with the office of the governor and department staff, will monitor when council terms will expire. It will also monitor the composition of the council with respect to the factors specified in Article II, Section 2.1.
- b. The vice-chairperson of the council shall convene a nominating committee and appoint a chairperson of that committee as needed to coordinate the process for all appointments to the council as outlined in Article II, Section 2 and annually put forth a slate of officers as identified in Article II Sections 3.1, 3.2 and 3.3. The Council Chairperson may ask for nominations from the floor to bring forth nominations in addition to the slate of officers brought forth by the nominating committee. The nominating committee shall make recommendations to the council regarding nominations and appointments prior to the September council meeting and have such other duties as assigned by the council.
- c. The nominating committee of the council, with support of bureau staff, will publicize upcoming vacancies, ensuring that publicity includes interested and underrepresented groups, including

alcohol, tobacco and other drug abuse agencies, alcohol, tobacco and other drug abuse stakeholder groups, consumers, and providers of all ethnic groups. Publicity materials will clearly state that council appointments are made by the governor. Materials will also state that the governor normally considers the council's recommendations in making council appointments.

- d. While any person may apply directly to the governor according to the procedures of that office, all applicants will be asked to provide application materials to the council as well. Bureau staff will make contact with the office of the governor as necessary to keep the committee informed regarding applicants, including those that may have failed to inform the committee of their application.
- e. Applicants shall provide a letter of interest or cover letter, along with a resume and any other materials requested by the office of the governor. The nominating committee, in consultation with department staff, may request additional materials. The nominating committee, with support of bureau staff, will collect application materials from nominees, including nominees applying directly to the governor. The nominating committee or staff will acknowledge each application, advising the applicant regarding any missing materials requested by the nominating committee. The nominating committee or staff will review each application to ensure that all required nomination papers have been completed.
- f. The nominating committee may establish questions to identify barriers to attendance and other factors related to ability to perform the function of a member of the state council on alcohol and other drug abuse and to identify any accommodations necessary to overcome potential barriers to full participation by applicants. The nominating committee may interview applicants or designate members and/or staff to call applicants. Each applicant shall be asked the standard questions established by the committee.
- g. The nominating committee shall report to the full council regarding its review of application materials and interviews. The report shall include the full roster of applicants as well as the committee's recommendations for appointment.
- h. The council shall promptly act upon the report of the nominating committee. Council action shall be in the form of its recommendation to the governor. Department staff shall convey the council's recommendation to the office of the governor.

2.10 Removal from Office

The Governor may remove appointed members from the council. The council may recommend removal but the Governor makes the final decision regarding removal.

Section 3. Officers

3.1 Chairperson

The chairperson is the presiding officer and is responsible for carrying out the council's business including that motions passed be acted upon in an orderly and expeditious manner and assuring that the rights of the members are recognized. The chairperson may appoint a designee to preside at a meeting if the vice-chairperson is unable to preside in their absence. The chairperson is also responsible for organizing the work of the council through its committee structure, scheduling council meetings and setting the agenda. The chairperson may serve as an ex-officio member of each council committee. The chairperson shall represent the positions of the council before the legislature, governor and other public and private organizations, unless such responsibilities are specifically delegated to others by the council or chairperson. The agenda is the responsibility of the chairperson, who may consult with the executive committee or other council members as necessary.

3.2 Vice-Chairperson

The vice-chairperson shall preside in the absence of the chairperson and shall automatically succeed to the chair should it become vacant through resignation or removal of the chairperson until a new chairperson is elected. The vice-chairperson shall also serve as the council representative on the governor's committee for people with disabilities (GCPD). If unable to attend GCPD meetings, the vice-chairperson's designee shall represent the council.

3.3 Secretary

The secretary is a member of the executive Committee as per Article IV, Section 5. The secretary is also responsible for carrying out the functions related to attendance requirements as per Article III, Section 6.

3.4 Vacancies

In the event a vacancy occurs among the Officers (Chairperson, Vice-Chairperson, or Secretary) of the State Council on Alcohol and Other

Drug Abuse, the following procedure should be followed: In the event of a vacancy of the Chairperson, the Vice-Chairperson assumes the responsibility of Chairperson until such time as new Officers are elected according to the procedures outlined in the By-Laws. In the event of a vacancy of the Vice-Chairperson, the Secretary assumes the responsibility of the Vice-Chairperson until such time as new Officers are elected according to the procedures outlined in the By-Laws. In the event of a vacancy of the Secretary, the Chairperson shall appoint a replacement from the statutory membership until such time as new Officers are elected according to the procedures outlined in the By-Laws.

ARTICLE III

Council Meetings

Section 1. Council Year

The council year shall begin at the same time as the state fiscal year, July 1.

Section 2. Meetings

2.1 Regular and special meetings

Regular meetings shall be held at least four times per year at dates and times to be determined by the council. Special meetings may be called by the chairperson or shall be called by the chairperson upon the written request of three members of the council.

2.3 Notice of meetings

The council chairperson shall give a minimum of seven days written notice for all council meetings. An agenda shall accompany all meeting notices. Public notice shall be given in advance of all meetings as required by Wisconsin's Open Meetings Law. If a meeting date is changed, sufficient notice shall be given to the public.

2.3 Quorum

A simple majority (51%) of the membership qualified to vote shall constitute a quorum to transact business.

Section 3. Public Participation

Consistent with the Wisconsin Open Meetings law, meetings are open and accessible to the public.

Section 4. Conduct of Meetings

- 4.1** Meetings shall be conducted in accordance with the latest revision of Robert's Rules of Order, unless they are contrary to council by-laws or federal or state statutes, policies or procedures.

Section 5. Agendas

- 5.1** Agendas shall include approval of minutes from prior meetings, any action items recommended by a committee, an opportunity for public comment, and other appropriate matters.
- 5.2** Requests for items to be included on the agenda shall be submitted to the chairperson two weeks prior to the meeting.

Section 6. Attendance Requirements

- 6.1** All council members and committee members are expected to attend all meetings of the council or the respective committees. Attendance means presence in the room for more than half of the meeting.
- 6.2** Council or committee members who are sick, hospitalized or who have some other important reason for not attending should notify the secretary or the secretary's designee or committee staff person or chairperson at least a week before the meeting. If that is not possible, notice should be given as soon as possible.
- 6.3** Any statutory members or designees of the council or committee who has two unexcused absences from meetings within any twelve month period will be contacted by the secretary of the council or committee chair to discuss the reasons for absence and whether the member will be able to continue serving. Appointed members who do not believe that they can continue should tender their resignation in writing to the secretary of the council or committee chair. Any council member resignations will be announced by the chairperson and forwarded by written notice to the Governor of the need for a new appointment. The replacement member would fulfill he resigned member's term.

Section 7. Staff Services

The division of mental health and substance abuse services shall provide staff services. Staff services shall include: record of attendance and prepare minutes of meetings; prepare draft agendas; arrange meeting rooms; prepare correspondence for signature of the chairperson; offer information and assistance to council committees;

analyze pending legislation and current policy and program issues; prepare special reports, and other materials pertinent to council business.

Section 8. Reimbursement of Council and Committee Members

According to Section 15.09 of Wisconsin Statutes: Members of a council shall not be compensated for their services, but, except as otherwise provided in this subsection, members of councils created by statute shall be reimbursed for their actual and necessary expenses incurred in the performance of their duties, such reimbursement in the case of an elective or appointive officer or employee of this state who represents an agency as a member of a council to be paid by the agency which pays his or her salary.

ARTICLE IV

Committees

Section 1. Committee Structure

- 1.1** There shall be an executive committee as provided below. The executive committee is a standing committee of the council.
- 1.2** The council may establish other standing committees and subcommittees as necessary or convenient to conduct its business. Of the standing committees established by the state council on alcohol and other drug abuse, at least one shall have a focus on issues related to the prevention of alcohol, tobacco and other drug abuse, at least one shall have a focus on issues related to cultural diversity, at least one shall have a focus on issues related to the intervention and treatment of alcohol, tobacco and other drug abuse, and at least one shall have a focus on issues related to the planning and funding of alcohol and other drug abuse services. Subcommittees are a subset of a standing committee. Subcommittees are standing committees, which by another name is a permanent committee. Standing committees meet on a regular or irregular basis dependent upon their enabling act, and retain any power or oversight claims originally given them until subsequent official actions of the council (changes to law or by-laws) disbands the committee. Of the standing subcommittees established by the state council on alcohol and other drug abuse, at least one shall have a focus on children youth and families and is a subcommittee of the intervention and treatment committee, at least one shall have a focus on cultural competency and is a subcommittee of the cultural diversity committee, and at least one shall have a focus on epidemiology and is a subcommittee of the prevention committee.

Ad-hoc committees are established to accomplish a particular task and are to be temporary, with the charge being well-defined and linked to SCAODA's strategic plan, not to exceed duration of twelve calendar months. Ad-hoc committees are formed by standing committee chairs. Ad-hoc committees must report their progress at the meeting of their standing committee. Ad-hoc committees can be granted extensions by the standing committee chair.

It is the intent of this section that:

- There should be periodic review of the structure and progress of the work of the committees, subcommittees and ad-hoc committees.
- If the officers have concerns about the work of the standing committees, subcommittees or ad-hoc committees, they could convene an executive committee meeting to discuss options, "for the good of the order."
- The intent of this group is to recommend that ad-hoc committees be time-limited (recommend one year) and the committee chair determines if the work should go forward beyond the original charge.
- The charge should be well-defined and linked to SCAODA's strategic plan.
- The committee chairs should be primarily responsible for creating and disbanding ad-hoc groups.
- The committee chairs should be responsible for monitoring the work and duration of the work in coordination with SCAODA.

1.3 Committees may determine their own schedules subject to direction from the full council.

Section 2. Composition of Committees

2.1 Council committees may include members of the public as well as council members.

2.2 The council chairperson may appoint a chairperson who must be a member of the council, for each committee. The council chairperson, with the advice of the committee chairperson may appoint other committee members.

2.3 Committees may designate subcommittees including ad hoc committees, as necessary or convenient subject to limitation by the full council.

2.4 A council member shall not chair more than one committee.

- 2.5** A committee chairperson's term shall not exceed the length of their appointment or four years whichever comes first. With the majority vote of the council, a chairperson may be reappointed.

Section 3. Requirements for all Committees

- 3.1** A motion or resolution creating a committee shall designate the mission and duties of the committee. The council may also specify considerations for the chairperson to follow in appointing committee chairpersons and members and such other matters as appropriate.
- 3.2** All committee members are expected to attend all meetings of the committee. Attendance means presence in the room for more than half of the meeting.
- 3.3** Any committee may authorize participation by telephone conference or similar medium that allows for simultaneous communication between members as permitted by law.
- 3.4** Committee members who are sick, hospitalized or who have some other important reason for not attending should notify the chairperson or the chairperson's designee at least a week before the meeting. If that is not possible, notice should be given as soon as possible.
- 3.5** Any committee member who has two unexcused absences within a twelve month period will be contacted by the committee chairperson to discuss the reasons for absence and whether the member will be able to continue serving. Members who do not believe that they can continue should tender their resignation in writing to the committee chairperson. Any resignations will be announced to the council chairperson and to the committee.
- 3.6** The committee chairperson may remove committee members, other than executive committee members, after notice of proposed removal to and an opportunity to be heard by the member consistently with this process.

Section 4. Requirements for Committee Chairpersons

The chairperson of each committee is responsible for:

- a. Ensuring that the by-laws and every applicable directive of the council are followed by the committee as indicated in Chapters 15.09, 14.017 and 14.24 of Wisconsin Statutes;
- b. Ensuring that recommendations of the committee are conveyed to the full council;

- c. Submitting meeting minutes in the approved format to the council; and
- d. Coordinating work with other committees where items could be of mutual interest.

Section 5. Executive Committee

5.1 The executive committee shall be comprised of at least three members, including the council chairperson, vice-chairperson and secretary.

5.2 The executive committee will have the following responsibilities:

- a. Provide policy direction to and periodically evaluate the performance of the council and its activities relating to direction from the division of mental health and substance abuse services.
- b. Meet at the request of the chairperson as needed;
- c. Provide for an annual review of the by-laws;
- d. Act on behalf of the council when a rapid response is required, provided that any such action is reported to the council at its next meeting for discussion and ratification; and
- e. Other duties designated by the council.

5.3 Rapid Response

The executive committee may act on behalf of the full council only under the following circumstances:

- a. When specifically authorized by the council;
- b. When action is needed to implement a position already taken by the council;
- c. Except when limited by the council, the executive committee may act upon the recommendation of a committee, other than the executive committee, if such action is necessary before a council meeting may reasonably be convened, provided that if more than one committee has made differing recommendations concerning the subject, the executive committee may not act except to request further study of the subject; or
- d. Except when limited by the council, the executive committee, by unanimous consent, may take such other action as it deems

necessary before a council meeting may reasonably be convened.

ARTICLE V

Amendments

The by-laws may be amended, or new by-laws adopted, after thirty days written notice to council members by a two-thirds vote of the full council membership present at a regularly scheduled meeting.

