

OPEN MEETING MINUTES

Name of Governmental Body: State Council on Alcohol and Other Drug Abuse Planning & Funding Committee			Attending: Sheila Weix, Beth Collier, Christine Ullstrup, Jill Gamez, Linda Van Tol, Kevin Florek, Jennifer Stegall, Sarah Johnson, Hannah Huffman, Steve Lawrence, Ryan Stachowiak, Kim Dawson
Date: 4/17/2024	Time Started: 9:34 AM	Time Ended: 11:59 AM	
Location: Via Zoom			Presiding Officer: Beth Collier, Christine Ullstrup
Minutes			

Members of the Planning and Funding Committee in Attendance: Sheila Weix, Beth Collier, Christine Ullstrup, Jill Gamez, Linda Van Tol, Kevin Florek

Guests: Jennifer Stegall, Sarah Johnson, Hannah Huffman, Steve Lawrence

Department of Health Services Staff in Attendance: Ryan Stachowiak, Kim Dawson

1. Call to Order and Roll Call

B. Collier called the meeting to order at 9:34 a.m.

2. Review February 21, 2024, Meeting Minutes

K. Florek moved to approve the minutes.

L. Van Tol seconded the motion.

Motion carried unanimously; minutes approved.

3. Public Comment

No public comment was made.

4. Discussion of JUUL Settlement spending

The Committee reviewed the following materials provided on the Department of Health Services (DHS) website, regarding JUUL Settlement spending:

- 1) [Webpage](#) outlining purpose of JUUL settlement and annual workplans
- 2) [Webpage](#) outlining which entities have been awarded JUUL settlement funds from DHS

S. Weix asked if settlement dollars were intended solely for funding prevention and cessation efforts related to e-cigarette products, or nicotine products more generally. S. Weix also inquired about funding limited to population of youth and young adults up to age 24. Committee discussed that likely funds focus on e- cigarettes and youth populations that were subjected to targeted manipulative marketing practices. The Committee also acknowledges that there is a large population over the age of 24 who use e-cigarette products.

The Committee discussed the settlement funding being \$14.7 million over a five-to-ten-year period, and the organizations that have been funded. J. Gamez inquired how much funding has been received to date, and what programming has been done with the program from the 13 funded organizations. J. Stegall noted that the 2024-2025 likely is not public because plans for spending have not yet been determined. J. Stegall expressed interest in learning

about the settlement payment schedule. B. Collier noted that JUUL's potential bankruptcy could impact the amount of funding the state receives.

J. Gamez noted that there were several organizations that did not receive funding after DHS's initial Request for Applications (RFA) for JUUL settlement funding. J. Gamez wondered if more organizations would be funded if additional settlement dollars were received in the coming years. J. Gamez also expressed concern that tobacco prevention and control efforts have felt segregated from other substance use prevention. J. Gamez wonders if these settlement dollars can be used in a more comprehensive and collaborative approach. Similarly, S. Weix encouraged bridging across, and building on existing efforts, such as expanding the University of Wisconsin's Center for Tobacco Research and Intervention's (UW-CTRI) online training.

R. Stachowiak noted that the DHS staff coordinating JUUL settlement is Liz Adams, Elizabethm.Adams@dhs.wisconsin.gov. The Committee drafted the following questions for Liz, and intends to invite Liz to an upcoming Planning and Funding Committee meeting:

1. What is the current state of JUUL settlement? What does the future of JUUL settlement look like?
 - a. What funds have been/will be received from the settlement?
 - b. How have/will funds been distributed?
2. What is the payment schedule?
3. Could JUUL's potential bankruptcy impact the amount of funding the state receives? If so, how do we anticipate this impact how we are funding programs?
4. If additional funds were received in future years, would programming and the number of organizations funded expand?
5. With tobacco prevention historically being fairly segregated from other substance use prevention efforts, is there an opportunity to use settlement funds in a more comprehensive and collaborative approach?
6. Is this funding supporting UW-CTRI online training? Is there an opportunity for these efforts to align?

5. Discussion of Medicaid funding 75.57

C. Ullstrup reminded the Committee of the previous meeting's discussion with Bill Hanna, DHS Medicaid Director, and asked the Committee if there were any further questions for B. Hanna. The Committee discussed wanting to better understand DHS 75.57, Residential withdrawal management service, and any potential movement on Medicaid benefits for this service.

J. Gamez also brought up DHS 75.56, adult residential integrated behavioral health stabilization service. J. Gamez noted that when the DHS 75 revision came out, different programs and levels of care initially had no Medicaid benefit, with some continuing to lack this benefit. J. Gamez wonders how many service providers have been licensed? K. Florek shared that Tellurian is proving the service without Medicaid reimbursement. B. Collier noted that in addition to Tellurian, Rogers, Pathways to a Better Life, Matt Talbot, and Midwest Detox are also providing residential withdrawal management service. Tellurian Chief Financial Officer, S. Lawrence joined conversation to inform that Tellurian first needs to be licensed under 75.56 and have the credentialed mental health professionals. C. Ullstrup asked once licensed if Tellurian will have Medicaid reimbursement. C. Ullstrup additionally asked what in DHS 75.56 allows for dual treatment and billing of services for addiction and mental health. S. Weix added that there are many steps for a rollout. Currently agencies are unable to bill SAC and CSAC time because only a masters' level professional is reimbursable for screening. Some agencies were having Medical Directors sign off, but now facilities are not required to have medical directors. S. Lawrence explained that currently counties foot the bill for services such as residential withdrawal services,

and that it would be difficult to provide the same quality of services under Medicaid given the low reimbursement rate. S. Weix noted that Medicaid tends to be paired with county spending, with braided funding.

The Committee recalled a presentation on DHS 75 by Pam Lano to SCAODA on April 19, 2023, meeting. The presentation can be viewed as a meeting attachment on the Wisconsin Public Meeting Notices & Minutes [website](https://publicmeetings.wi.gov/view/e39f5702-e5a4-48b9-aef5-810214644a2f/1) (<https://publicmeetings.wi.gov/view/e39f5702-e5a4-48b9-aef5-810214644a2f/1>). The Committee brought up the slide deck and reviewed materials. The Committee is interested in receiving an update on the status of various service and Medicaid benefit roll outs. For example, SUD Intensive Outpatient (IOP) was slated to create a new level of care, falling between outpatient services and day treatment, by early 2024. Currently this service is licensed but an agency cannot bill Medicaid because there are no billable codes for IOP services.

The Committee discussed Office- Based Opioid Treatment (OBOT) being on hold since the Federal Government removed additional requirements (for examples, physicians needing to have a data waiver was removed). With removal of those federal requirements, it shifts what is in the state regulations. It exists in code but has not been implemented.

J. Gamez asked if there is a Medicaid benefit for case management. B. Collier responded, yes CCS, Hub and spoke, Target. S. Weix explained that all have their own benefits, and that agencies need to add on certifications most of the time to be able to bill. J. Gamez noted that case management is a core function of a SUD counselor, and asked - if a client comes in and meets with someone with the primary goal of case management needs, but counselor does have an SUD credential, is it fraudulent to bill? B. Collier responded that the service must be tied to treatment plan for it be an allowable and billable service.

The Committee concluded on this discussion wanting to talk with Pam Lano, or another Medicaid representative, to have an updated presentation similar to the presentation they were provided in April 2023. The Committee is hoping to have a better understanding of the current stats on billing ability for various levels of care.

Next, the Committee transitioned to discussing their workplan, namely "Task 3: Determine who we can reach out and find out if there are complaints about parity and lack of SU providers for Medicare patients and who can provide technical assistance to providers."

J. Stegall explained that given Medicare is a Federal program, Wisconsin Office of the Commissioner of Insurance does not navigate consumers issues. Leading up to the Committee's meeting J. Stegall did ask if complaints had been received. While no complaints had been received, J. Stegall noted that consumers may not know how to file a complaint or are being directed to CMS. The Board on Aging and Long-Term Care is also forwarding complaints to CMS, so this may be the point where more clients are interacting.

S. Weix added that many clients may not be complaining because they are too preoccupied and in too desperate of a situation looking for care.

S. Weix raised that the SCAODA Intervention and Treatment Committee had written a [position paper](https://www.dhs.wisconsin.gov/scaoda/scaoda-workgroup-older-adults-report.pdf), titled, "At-Risk Substance Use in Older Adults Sounding the Alarm: Implications for SUD Treatment in Wisconsin" (<https://www.dhs.wisconsin.gov/scaoda/scaoda-workgroup-older-adults-report.pdf>). S. Weix noted that it would be good to have the SCAODA Planning and Funding Committee support the paper, as well as keep it on the Committee's radar/work plan. S. Weix also advocated that anywhere in the Committee Workplan where "Medicaid" is discussed, to also add "Medicare," to shed more light on an also underserved population. S. Weix and B. Collier to support in bridging efforts between Planning and Funding, and ITC, given their positions on both committees.

6. Discussion of Tobacco 21 Motion

The Committee discussed that the Tobacco 21 motion previously drafted in their February 21 meeting had been approved at the SCAODA Council meeting on March 8. While the motion has been approved, the Committee discussed the need for strategic planning for timing a letter sent to legislators. J. Stegall impressed upon the importance of when the letter is sent, to whom, and the advocacy surrounding the letter. J. Stegall inquired about DHS's strategy for supporting Tobacco 21, and how might the Committee aid in those efforts. R. Stachowiak offered to reach out to Teresa Steinmetz, DHS leadership, to share back on DHS's Tobacco 21 efforts at the next Committee meeting. The SCAODA Executive Committee plans to further discuss Tobacco 21 strategy at upcoming meeting on May 7.

7. Review of SCAODA Strategic Goals and Committee Workplan

C. Ullstrup suggested holding off on reviewing the workplan until the next Committee meeting on May 15. J. Gamez agrees. In the meantime, all committee members are asked to revisit the workplan and come to the future meeting prepared to discuss. Of note, the committee wants to revise the workplan to formalized process for providing input in the budget cycle. Also, the Committee will add "Medicare" after all mentions of "Medicaid" in the workplan – in order to provide more visibility to this often-overlooked population. The Committee decided to put "Workplan revisions" at the top of the agenda for the next meeting.

8. Department of Health Services (DHS) Updates

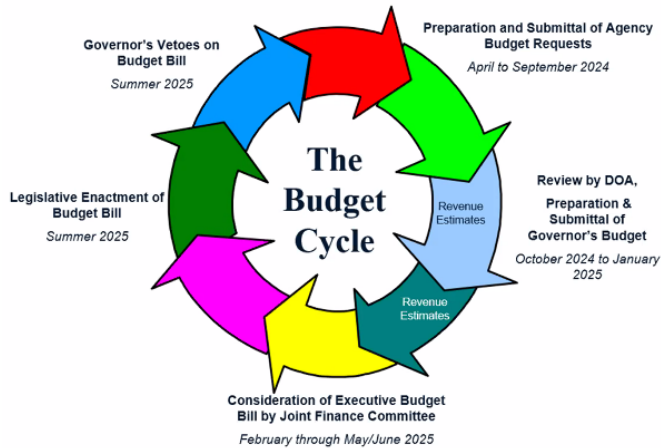
R. Stachowiak provided update that the State Opioid Treatment Authority, Mike York, has been hired as of one month ago.

R. Stachowiak also shared that DHS is in the last year of administering American Rescue Plan Act (ARPA) Supplemental funds to Counties and Tribes. These funds were introduced during the COVID-19 Pandemic and conclude in March 2025.

S. Johnson provided updated that the budget and plan for opioid settlement spending has been submitted to the Joint Committee on Finance. The plan is within the 14-day passive review period, ending this Friday (4/19). In anticipation of this review, Michelle Haese, DHS Director of Substance Use Initiatives, has been disseminating information about the plan and answering questions. See the link [here](#) for Fiscal Year 2025, \$31 million proposal: <https://www.dhs.wisconsin.gov/publications/p03288-2025.pdf>

S. Johnson also shared an RFA funding opportunity to apply for funds to purchase harm reduction vending machines and supplies. See the link [here](#) for the application: <https://www.dhs.wisconsin.gov/contracts/public-health-vending-machines-2024.htm>. K. Florek commented that Tellurian Behavioral Health has a harm reduction vending machine located at a detoxification center, and that the vending machine has served their agency well.

J. Stegall asked about the process for SCAODA to provide recommendations for the State budget. The Committee discussed Fall being the time to provide recommendations to the Governor (see Budget Cycle below.) C. Ullstrup outlined a process where the Planning and Funding Committee will bring recommendations to SCAODA Council, and the Council provides recommendations to DHS. C. Ullstrup encouraged committee members to think about priority funding areas and recommendations to bring to SCAODA Council. This item will also be added to the Executive Committee agenda for the May 7 meeting.



K. Dawson provided updates on SCAODA website and communications strategy. K. Dawson shared that currently there is not a Gov Delivery topic subscription solely focused on Substance Use. However, the DHS Communications is working to transition the “Dose of Reality” subscription over to a more general Substance Use Thread. The SCAODA Executive Committee will decide whether to promote SCAODA meetings and membership via “Dose of Reality” or wait until the thread becomes generalized to Substance Use topics.

The Planning and Funding Committee discussed further ways for advertising membership application. Some ideas brainstormed by Planning and Funding were, adding to the “Contact us” page, and tabling at a conference to promote membership. R. Stachowiak noted Substance Use Block Grant funds can be used for conference costs, such as reserving a table. S. Weix noted that previously listening session occurred across the state, not just state conference. We should continue looking for ways to raise the profile, particularly in areas where those interested may not be able to travel for a state conference.

9. Agenda for May

The following agenda items were noted by committee members:

- Revise workplan (note to prioritize this to top of agenda)
- Discuss JUUL settlement, inviting Liz Adams to attend
- Discuss status of services being rolled out funded by Medicaid, inviting Pam Lano to attend
- Receive updates from SCAODA Executive Committee
- Discuss CCS, and that OTP is being excluded at state level. Invite Teresa Steinmetz to attend, to provide update if counties joining CSS will be considered.

10. Adjournment

B. Collier moved to adjourn the meeting.

J. Gamez seconded the motion to adjourn.

Motion carried; meeting adjourned at 11:59 a.m.

Prepared by: Kim Dawson, on 2/21/2024.

Council reviewed and approved these minutes at its meeting on: 5/15/2024