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State of Wisconsin

State Council on Alcohol and Other Drug Abuse

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**STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
MEETING MINUTES**

December 10, 2010

9:30 a.m. – 3:30 p.m.

**American Family Insurance Conference Center
6000 American Parkway Madison, WI 53783
Room A3141**

Members Present: Mark Seidl, John Easterday, Joyce O'Donnell, Representative John Townsend, Duncan Shroul, Steve Fernan, Rebecca Wigg-Ninham, Pamela Phillips, Mary Rasmussen, Michael Waupoose, Eileen Mallow, Sandy Hardie, Blinda Beason.

Members Excused: Douglas Englebert, Scott Stokes, Linda Mayfield

Members Absent: David Spakowicz

Ex-Officio Members Present: Linda Preysz, Matt Vogel, Mark Campbell, Ray Luick.

Ex-Officio Member Excused:

Ex-Officio Member Absent: Larry Kleinsteinber, Thomas Heffron, Roger Johnson, Randall Glysch, Colleen Baird or Jeff Scanlan.

Staff: Joyce Allen, Sue Gadacz, Lori Ludwig, Gail Nahwahquaw, Bernestine Jeffers, Lila Schmidt, Kathy Thomas, Leeann Cooper, Lou Oppor, Joyce Allen.

Guests: Joann Stephens, Nina Emerson, Andrea Jacobson, Dave Macmaster, Norm Briggs, Bill McCulley, Sue Gudenkauf, Jill Kenehan-Krey, Denise Johnson, Sheri Graeber, Mike Nunley, Chris Hill-Sampson, Amanda Jovaag, Lorie Goeser, Margaret Schmelzer, Jerry Kaye, Gregg Miller, Susan Pastor, Vana Steffen, Perry Ackert, Paula Perrin, Buck Nelson, Angela McAlister.

I. Introductions/Welcome/Agenda—Mark Seidl

The meeting was called to order at 9:40. Mark Seidl welcomed the group and following the Pledge of Allegiance asked the group to introduce themselves. Following introductions, Mr. Seidl reminded the group about the noise level. Mr. Seidl then acknowledged and thanked Representative John Townsend for his service to SCAODA since 2001. Representative Townsend will be retiring from the state legislature at the end of the month. Representative Townsend spoke to the group about the problems facing society. He felt that there are no quick solutions, rather problem-solving is a long term process. He spoke about his authorship of Act 362, the prescription drug monitoring program. He worked on the bill for four years. The group

applauded Representative Townsend in thanks for his hard work and commitment to the goals of SCAODA. Mark Seidl then introduced Joann Stephens. She is a representative from the Mental Health Council who will be attending SCAODA meetings.

II. Review/Approval of September 10, 2010 Minutes—Mark Seidl

Joyce O'Donnell made a motion to approve the minutes of September 10, 2010. Duncan ShROUT seconded the motion. Without further discussion, **all were in favor and the motion passed unanimously.**

III. Public Input—Mark Seidl

There were a number of people who presented themselves for Public Input. Nina Emerson and Andrea Jacobson, Co-Chairpersons of the Intoxicated Driver Program (IDP) Sub-Committee thanked the group for the opportunity to address the Council. Andrea Jacobson read a statement regarding the termination of the Intoxicated Driver Program Sub-Committee under the Intervention and Treatment Committee (ITC) and the creation of the IDP Funding Sub-Committee under the Planning and Funding Committee (P&F). The statement expressed disappointment regarding the decision. Michael Waupoose asked a question about the background of the IDP Sub-Committee of ITC. Mark Seidl explained that the IDP Sub-Committee resulted from former Chairperson of SCAODA, Carol Roessler's initiative approximately three to four years ago. Each year the budget available to the county-level Intoxicated Driver Programs was decreasing. The IDP Sub-Committee under P&F will include representatives from the Senate and Assembly, as well as Nina Emerson and Andrea Jacobson. Both groups could not be funded. Also, staffing was an issue. The decision had to be made, even though it was difficult, to fund and staff the IDP Funding Sub-Committee. Mr. Waupoose then asked if there were different purposes for each group. Ms. Emerson responded in the affirmative. She felt that the two groups could co-exist. Ms. Jacobson added that the IDP/ITC group has formulated low cost recommendations that could lead to program changes and decreases in impaired driving. Gregg Miller, an IDP/ITC member felt that the group would still like to go forward. Nina Emerson and Andrea Jacobson distributed a document that contained a letter from Cheri Wotnoske, an AODA counselor from Lafayette County Human Services. Susan Pastor read the letter from Cheri Wotnoske. The letter expressed sadness that the IDP/ITC Sub-Committee was being "eliminated" in favor of a "Funding Sub-Committee." The letter was distributed to the group. Also contained in the document distributed was a statement from Gregg Miller, an instructor for IDP assessors since 1984 and a member of the IDP/ITC Sub-Committee. He argued that the IDP/ITC Sub-Committee was intended to exist in perpetuity rather than temporarily. He also questioned the procedure used to terminate the IDP Sub-Committee. He felt that the Council should have been involved in the decision to disband the IDP/ITC Sub-Committee. He asked for an apology from the Chairperson to the IDP/ITC Sub-Committee and to the Governor. Kathy Thomas pointed out that in the absence of a specific by-law informing the issue, the Council runs according to Roberts Rules. **Joyce O'Donnell asked to be recognized and made a motion to authorize support and endorsement for Mark Seidl's leadership.** Blinda Beason seconded the motion. Discussion elicited a question about what the motion means. Ms. O'Donnell felt that the Chair had been chastised and the issue could have been taken up in a group and the Chair should not be chastised. She felt the chastisement was

out of order. Mark Seidl pointed out that everyone has the right to their opinion. He acknowledged Ms. O’Donnell and Blinda Beason with appreciation but accepted the public comments. He indicated the IDP/ITC Sub-Committee will get a response. Ms. O’Donnell asked if there was a motion to table. **Steve Fernan made a motion to table the motion. Sandy Hardie seconded the motion to table. The vote elicited all “ayes” and the motion to table passed.**

IV. State Agency Reports to SCAODA—Mark Seidl

Eileen Mallow from the Office of the Insurance Commissioner reported on the Administrative Rule being developed to implement Act 218 relating to health insurance coverage of nervous and mental disorders, alcoholism, and other drug abuse problems. The Commissioner of Insurance is required to promulgate rules to implement the Statute. A subgroup advises the Commissioner on implementing Wisconsin Act 218. The subgroup has five health insurance company members, one agent member, three members representing the business community, three members representing hospitals, three provider representatives, two consumer advocates, and two legislative members.

The proposed rule (Ins 3.375) requires insurers offering group health insurance and self-insured governmental plans to provide coverage for the treatment of nervous and mental disorders and substance use disorders no more restrictively than coverage for the most common or frequent type of treatment limitations that are applied to substantially all other coverage under the plan. This means insurers and self-insured governmental plans cannot impose limited benefits or impose different cost-sharing provisions based upon receiving nervous, mental or substance use disorders treatment. The rule defines “substantially all” to mean that the terms of coverage for nervous, mental and substance use disorders is to be treated no more restrictively than a single type of financial requirements or quantitative treatment limitations that apply to two-thirds of covered medical or surgical benefits.

[Ins 3.375--Relating to health insurance coverage of nervous and mental disorders, alcoholism and other drug abuse problems and affecting small business](#)

Clearing-house #	Date of Scope	Date to Leg. Ref. Bureau	Hearing Date	Date to Leg.	Other Secs. Affected
	06/10/2010	12/20/2010	01/27/2011		

The Mental Health Parity and Addiction Equity Act of 2008 (“MHPAEA”), was effective October 1, 2009 with interim final regulations published in February 2010. Federal Parity applies to employers with 100 or more employees. Wisconsin’s 2009 Wis. Act 218 paralleled many provisions of the federal law in the statute and enhanced coverage benefits for Wisconsin consumers insured through small employers and covered by individual health benefit plans. State Parity law applies to employers with 25 or more employees. Additionally, the Patient Protection and Affordable Care Act of 2010, P.L. 111- 148, as amended by the Federal Health Care and Education Reconciliation Act of 2010, P.L. 111-152 (jointly “PPACA”), identifies the treatment

for mental health benefits and substance use disorders as an essential benefit that is to be contained in all health plans effective January 1, 2014. Further, as an essential benefit, as of September 23, 2010, insurers are to remove annual limits and phase out lifetime limitations over the next several years.

The proposed Administrative Rule documents under what conditions and how employers may request exemptions. It allows insurance companies to do the exemption analysis. There will be a public hearing after legislation is introduced in January. In response to a question regarding the applicability of the statute to self-funded health coverage, Ms. Mallow reported that the Office of the Commissioner of Insurance recently contracted with “ABC for Health” to help people with self-funded health coverage. The Office of the Insurance Commissioner will share appropriate complaints with ABC.

Steve Fernan reported on two items. The “Safe and Drug Free Schools” funding available to all Wisconsin school districts for the past 23 years is ending. Congress has defunded the program. Instead, the federal government has issued competitive grants. Wisconsin has won a “Safe and Supportive Schools” grant for \$14 Million. It is an intervention for high schools based on school safety scores. Mr. Fernan referred the group to pages 38-9 of the information packet. The Wisconsin Department of Public Instruction identified seven large school districts and twelve smaller districts based on high rates of suspension and expulsion and/or rates of disruptive drug- and violence-related incidents at schools. The school districts are in the process of deciding if they want to participate. Participating school districts will receive significant support from DPI in the form of funding, professional development and technical assistance. This support will be used by the high school staff and administration to develop, implement, and evaluate three-year intervention plans to improve the conditions for learning in the selected high schools. Participating high schools will submit data annually from student behavioral surveys and behavioral incident reports in order to have school safety scores calculated. These will be posted by DPI and compared to baseline data throughout the life of the projects.

The second item Mr. Fernan reported on was a proposed new categorical grant program which combines ten existing categorical grant programs including AODA grants. Please see pages 40-44 of the information packet. The proposal to consolidate 10 discretionary grant programs, currently managed by DPI, is part of the agency’s 2011-13 biennial state budget request. This proposal, if accepted would see the AODA grant program, currently awarded to schools, redirect its funds into the “Every Child a Graduate” program. This new program would allow the funds to be used in a more flexible way to reduce dropout rates and increase graduation rates.” If this proposal is accepted it would take effect in 2012-13. Joyce O’Donnell expressed concern about taking nineteen-and-one-half million dollars of categorical aide and focusing it on 40-50 districts with high drop out rates which effectively removes funding for most of the 426 school districts in Wisconsin. Dave Macmaster asked if there were any tobacco prevention funds. Mr. Fernan reported that tobacco prevention funding has been largely eliminated for schools, but there was some funding for tobacco prevention from the legislature. Mark Campbell reported that the Department of Children and Families received a percentage of the Safe and Drug Free School funds. The loss of those funds has left holes in programs. For example the funding supported programs for run away teens. He is worried that the cutbacks will cause the programs to collapse.

Ray Luick reported on The Treatment Alternatives and Diversion (TAD) Program, a coordinated effort between the Department of Corrections, the Department of Health Services and the Office of Justice Assistance. Mr. Luick distributed a document prepared by Kit Van Stelle and Janae Goodrich from the University of Wisconsin Population Health Institute, “Update on TAD Evaluation for 2010 All-Site Meeting.” Mr. Luick reported that there are seven counties that received TAD funding January 1, 2007. Four of the projects work on a drug court model. While the final report is due in December of 2011, this document provides data through 2010. The TAD programs are for non-violent offenders with alcohol or other drug crimes in the criminal justice system. He pointed to data in the document which summarized for each county participating, admissions, completions, terminations, demographic information on clients, discharge information, sentence outcomes, total number of incarceration days averted, and alternative to revocation admissions. Mr. Luick indicated that he wanted to bring the TAD programs to the Council’s awareness. He reported that the data show a significant savings in jail and prison beds.

IV. WI Epidemiological Report—Chris Hill Sampson and Amanda Jovaag

Ms. Hill Sampson and Ms. Jovaag distributed an eight page Executive Summary of the “Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2010.” According to the Summary, the report is published jointly by the Division of Mental Health and Substance Abuse Services and the Division of Public Health in the Wisconsin Department of Health Services. The report was prepared by the Population Health Information Section of the Division of Public Health in consultation with the Division of Mental Health and Substance Abuse Services and the University of Wisconsin Population Health Institute. The report is funded by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). The eight page Executive Summary is dated November, 2010. Ms. Hill Sampson and Ms. Jovaag reported that the full report should be available by the end of the month.

Key findings include:

- Wisconsin has one-and-a-half times the national rate of arrests for operating a motor vehicle while intoxicated.
- Wisconsin has more than three times the national rate of arrests for other liquor law violations.
- Wisconsin has the highest rate in the nation of self-reported drinking and driving.
- The number of clients receiving publicly funded services for alcohol and other drug abuse decreased sharply from 2006 to 2008, returning to the level seen in 2000.
- Inflation-adjusted public expenditures for those services decreased 15% from 2006 to 2008 and 11% overall from 2000 to 2008.
- Wisconsin’s rates of alcohol use and misuse are among the highest—if not the highest—in the nation. As of 2008, Wisconsin adults continue to have the highest rates of alcohol consumption, binge drinking and heavy drinking among all U.S. states and territories, and Wisconsin rates of underage drinking (ages 12—29) exceed national levels.

- Better news! Wisconsin no longer has the nation's highest rate of binge drinking among high school students. Binge drinking among young adults (ages 18-24) has also declined in Wisconsin since 2000.
- Wisconsin women of childbearing age are more likely to drink and to binge drink than their national counterparts.
- Fifteen percent of Wisconsin adults ages 18-25 reported using pain relievers for non-medical purposes.
- Drug-related deaths have doubled since 2008.

The group had a number of questions and comments about the findings. It was stressed that it is important to consider the findings within the context of the full report, which should be available later this month. Group problem-solving attributed the drop in the number of publicly funded clients to the reduction in funding between 2007 and 2008.

V. Infra-Structure Study Update and Discussion on Health Care Reform—Dr. John Easterday and Staff

Dr. John Easterday gave a quick history of the Infra-Structure Study. It was about one year ago that the Infra-Structure Study Summit was held. Last July was the last meeting of the Infra-Structure Study advisory groups. Since then, Request for Information (RFI) proposals were developed and responses collected. Twenty-six proposals were received from 23 respondents. Respondents were mostly counties, some with partnerships with private agencies or federally qualified health care centers. Some proposed to integrate behavioral and physical health; some had more than one priority, for example systems innovation and integrating physical and mental health. Most served both children and adults. Some were wraparound proposals for un-served populations. The range of funding estimates was \$200,000 to \$1 Million. Michael Waupoose asked if any of the Tribes submitted proposals or other minorities. Sue Gadacz answered in the negative. Duncan Shroul asked if innovation was a part of this. Dr. Easterday responded that yes, innovation was part of the requirements. For example, the northwest counties were going to collaborate into a seven-county consortium with one lead. Joann Stephens reported innovation on several levels; individual level as well as provider-level. There were many diverse collaborations. Joyce Allen indicated that she was impressed with the number of submissions which seemed on the right track to stimulate creativity. Dr. Easterday pointed out that another side benefit of the study was the identification of core benefits for health care reform.

VI. Prescription Monitoring Program Report from the Pharmacy Examining Board—Lou Oppor

Mr. Oppor reported that there has been formed under the Prevention Committee, a Controlled Substances Workgroup.” That Workgroup has been looking at prescription drug abuse. They have found that currently there isn't a good way to report that data. The only available data is through death certificates and physicians don't report it consistently or all the same way. Wisconsin is one of a handful of states without a reporting system. Because of this, there is lots of border hopping for obtaining prescription drugs. This is a concern for the workgroup and progress needs to be made. Mr. Oppor then relayed a little history regarding the matter. 2009

Wisconsin Act 362 authorized the Pharmacy Examining Board to create a program to monitor the dispensing of prescription drugs and requiring the exercise of rule-making authority. Act 362 states the Department of Regulation and Licensing shall submit a timely application for a federal grant under 42 USC 280g-3 and under the Harold Rogers Prescription Drug Monitoring Program to fund the establishment and operation of the program under this section. Lou Oppor then introduced Dr. Pamela Phillips who would provide the group with an update on efforts to create a prescription drug monitoring program. Dr. Pamela Phillips, SCAODA's representative member from the Pharmacy Examining Board read a paragraph updating efforts regarding the Prescription Drug Monitoring Program (PDMP).

“In December, 2010, the Pharmacy Examining Board will review a list of certain portions of the Prescription Drug Monitoring Program (PDMP) in Wisconsin. The parts of the program that will be considered are directly linked to grant applications that are due in 2011. Due to restrictions in the legislation, the Pharmacy Examining Board will only develop these components because they are necessary to meet minimum requirements for the grant applications. The scope statement must be approved by the board and then published for a certain period of time before work can begin on the rules.

“The Department of Regulation and Licensing will submit grant applications for Harold Rogers as well as NASPER in 2011. Harold Rogers applications are generally due in early spring and NASPER in early fall.”

Lou Oppor added that there are two Harold Rogers grants: one for planning (\$40,000) and one for implementation (\$400,000). He added that the Prevention Committee is concerned that progress continues. Mark Seidl expressed concern about the confidentiality of records. He asked how the information would be protected. Dave Macmaster pointed out that the abuse of prescription drugs epidemic could be explained by the lack of a monitoring system. Mr. Oppor pointed out that Wisconsin probably mirrors national trends on prescription drug abuse. He continued that we don't know if there is more abuse in the state or not—because of the lack of data. Denise Johnson wanted to know how a PDMP would differ from how medications like Sudafed are dispensed now. That is, we must now sign for Sudafed. That information must be stored someplace now. Dr. Phillips responded that she would investigate that.

VII. K-2 Presentation—Lou Oppor

Lou Oppor referred the group to pages 48 in the information packet for a K2 Fact Sheet. He reported that K2 is a product sold as incense and mimics the effects of marijuana. K2 is a combination of chemicals sprayed on herbs. On page 50 of the packet is a news release dated November 24, 2010. A “Notice of Intent” was published in the Federal Register (on that date) to alert the public to this action, that is, banning the chemicals used to produce K2 at the federal level. Mr. Oppor reported that Senator Coggs is working to ban K2 in Wisconsin. Mr. Oppor has asked the Prevention Committee if it still wanted to take action. In essence the federal ban would apply at the state level. However the Prevention Committee is in support of a state law for enforcement purposes. Blinda Beason then made the following motion:

The Prevention Committee made a motion that SCAODA recommend a legislative ban on synthetic compounds that mimic the effects of marijuana and other illicit drugs. Steve Fernan seconded the motion. Matt Vogel asked about marinol, a prescribed drug which mimics cannabinoids in marijuana. He asked if that would be covered in the motion. Lou Oppor indicated that marinol was not part of the intention of the motion and that they may want to tweak the motion. Mark Seidl asked for a friendly amendment. **Matt Vogel suggested adding “no medical usage.” Blinda Beason accepted the friendly amendment. Without further the discussion, the vote was called and the motion passed unanimously. The motion now reads that the Prevention Committee made a motion that SCAODA recommend a legislative ban on synthetic compounds with no medical usage that mimic the effects of marijuana and other illicit drugs.**

Blinda Beason then made a second motion: **The Prevention Committee recommends that SCAODA send a letter to the Food and Drug Administration encouraging the investigation and prosecution of manufacturers and/or suppliers of synthetic compounds that mimic the effects of marijuana and other illicit drugs. Joyce O’Donnell seconded the motion.** Steve Fernan asked a question about temporary scheduling. Mr. Oppor explained that the product is sold as incense but it is intended for consumption. An FDA investigation is needed. **Duncan Shroul asked if the friendly amendment ought to be added. Matt Vogel indicated in the affirmative and Blinda Beason accepted the friendly amendment. Without further discussion the motion passed unanimously. The motion now reads: The Prevention Committee recommends that SCAODA send a letter to the Food and Drug Administration encouraging the investigation and prosecution of manufacturers and/or suppliers of synthetic compounds with no medical usage that mimic the effects of marijuana and other illicit drugs.**

VIII. Committee Reports

Diversity Committee:

Michael Waupoose reported that the Diversity Committee has been spending time discussing the stakeholders meeting convened by Bureau staff regarding the topics of health care reform and scope of practice issues and their impact. Also the Diversity Committee believes in holding meetings in communities of color. The last Diversity meeting was held at L’Esparanza in Waukesha. The Diversity Committee held a Public Forum at the Tribal conference. Issues emerging from the Public Forum were: 1) encouragement from participants about increasing the membership of SCAODA and targeting Tribal members. How SCAODA can be a resource to Tribes. 2) The ACE Report (Alcohol, Culture and the Environment): the continuing need to increase education and programs for Tribes especially regarding Fetal Alcohol Spectrum Disorders. 3) The continual reduction in the availability of treatment resources. 4) The desire to decrease alcohol advertising in Tribal Communities. The Diversity Committee discussed action by the Joint Board (Social Work/Marriage and Family Therapists/Licensed Counselors) to remove the requirements of a specialty in alcohol and other drug abuse counseling for licenses for the treatment of substance use disorders. They want to treat under their current licenses. The Diversity Committee and the Intervention and Treatment Committee are strongly opposed to this action. The treatment of substance use disorders requires special education and training. Even

physicians need special education, training and experience. Mr. Waupoose continued that the Joint Board already says one can't treat outside their scope of practice. But, this action asks people to police themselves. While the profession already acknowledges that it takes more than a couple of courses to establish competency, they argue they have to treat many specific disorders without training.

Michael Waupoose made the following motion: **The Diversity Committee and the Intervention and Treatment Committee jointly motion to oppose the following proposal for revision to WI Admin code MPSW 1.09: Revise Adm. Code s. MPSW 1.09 to allow licensed marriage and family therapists, professional counselors and clinical social workers to engage in substance abuse counseling without seeking separate certification as a substance abuse counselor under s 440.088 Wis. Stats. Additionally, the intended revision will eliminate the provisions for applying for and receiving a substance abuse specialty within s. MPSW 1.09, Wis. Admin. Code. Duncan Shrout seconded the motion.** Steve Fernan indicated that he would abstain. John Easterday indicated that according to Act 80 what they are proposing changes the agreement and is not good policy. Sheri Graeber reported that at the Substance Abuse Advisory Committee to the Department of Regulation and Licensing (DRL) the issue came to them. They thought this is ill advised. **Without further discussion, the Chair called for the vote. Three members abstained, Steve Fernan, Blinda Beason and Joyce O'Donnell. All others voted "aye," and the motion was passed.** Michael Waupoose was much appreciative of the work of the ITC Committee on this issue. Joyce O'Donnell asked if this motion would be referred back to DRL? Sue Gadacz explained that a letter of opposition would be drafted and sent to the Boards in DRL.

Intervention and Treatment Committee:

Linda Preysz reported that there was disappointment on the ITC Committee that the Intoxicated Driver Sub-Committee was shut down. She reported that she has encouraged them to move forward. Ms. Preysz would like to go on record thanking them. She reported that she had a difficult time explaining to them why they couldn't continue. They need a better explanation of why they were shut down. Funding was part of their scope. SCAODA should provide a clear understanding of a Sub-Committee's mission so when Chairs are giving direction they can clarify. They were devastated by this decision. Mark Seidl responded that there will be an official response by the Chair. A thorough explanation will be made to Linda Preysz and the two Co-Chairs. When a report is provided, Mr. Seidl explained, he will acknowledge their work and provide an explanation. John Easterday asked if perhaps this could be an agenda item for the next meeting. Sandy Hardie requested that it be on the next agenda. Ms. Hardie explained that we are concerned as a Council, and we have no voice. We need to respond to the public, to the citizens. Mark Seidl indicated he will entertain the agenda item for the March meeting. Michael Waupoose asked as part of that, does it really have to be here or there (the IDP Sub-Committee). Can't the Committees come together and work on these things? Many consumers and providers have issues regarding IDP (non-funding issues). If Planning and Funding misses this opportunity for collaboration, they would inadvertently hurt people. Citizens are enthusiastic and passionate and yet they get squashed. That is not our intent. Can we ponder how it occurred? Isn't there a way to collaborate?

Linda Preysz continued reporting on other areas of the ITC Committee.

- The Children Youth and Family Sub-Committee is looking at the decline in AODA providers. There is increasing need that is not being addressed. Mental health and substance abuse issues have been identified in the Infra-Structure Study.
- WINTIP—The Divisions of Public Health and Mental Health and Substance Abuse Services have contributed funds for provider trainings during 2011. There is a webinar on Tuesday December 14, 2010. Joyce O’Donnell added that she would like to continue to endorse the no smoking policy and reaffirm the no smoking policy
- Ms. Preysz reported that Shel Gross, a member of the Mental Health Council will become a member of ITC.

Planning and Funding Committee

Joyce O’Donnell referred the group to the Public Forum minutes handout. She then spoke to the Sub-Committee on IDP funding. She indicated that the IDP Sub-Committee on Funding could also incorporate policy issues that the previous group worked on. Currently they are focusing on the funding loss over the last few years. Ms. O’Donnell reported that the Planning and Funding Committee is investigating returning 17 year-olds to the juvenile justice system and has spent time discussing the issue in its last two meetings. She referred the group to the minutes of the meeting. She also announced that Steve Fernan has returned to the Planning and Funding Committee to provide input to AODA issues in the schools. Health care reform is a hot topic and on the agenda for the Planning and Funding Committee. Duncan Shroul reported that at the October 15th meeting of Planning and Funding there was a motion to take lead in the discussion of health care reform as it moves forward (please see page 86 of the information packet). He explained that his colleagues are concerned about health care reform on several levels; the medicalization of substance abuse treatment, how organizations may be left out in the future. Linda Preysz was surprised that Planning and Funding decided it should be the driver of health care reform. It is a big issue which affects all of SCAODA’s Committees. Duncan Shroul argued that Planning & Funding didn’t say it would take over, it said it would take an active role. Michael Waupoose suggested the Department or Bureau is really the lead. He asked if the motion means Planning and Funding is just interested in health care reform? Duncan Shroul responded in the affirmative. John Easterday clarified that the Office of Health Care Reform is Chaired by the Office of the Insurance Commissioner. Sue Gadacz explained that at this stage, the Department of Health Services’ role is to disseminate information. Duncan Shroul pointed out that Governor-elect Walker is a litigant against health care reform.

Prevention Committee:

Lou Oppor reported that Scott Stokes was unable to attend today’s meeting, due to weather concerns. He also informed the group that the Prevention Committee report was presented in the item on K2.

IX. Healthy Wisconsin 2020—Margaret Schmelzer

Margaret Schmelzer from the Division of Public Health distributed a power point document on the background and purpose of Healthy Wisconsin 2020, a planning document to guide public health goals and objectives through 2020. It is a guide to help everyone in Wisconsin working on an issue that affects the health of the public move in the same direction. She gave a brief summary of the focus areas and the critical messages of HW2020. She reported that Wisconsin ranks 50th among states in the amount of state resources going to Public Health. In December, the federal government released Healthy People 2020. She reported that Wisconsin's plan was well received by federal officials. Over 1500 people were involved in the development of the plan. The critical, or core messages of Healthy Wisconsin 2020 are: that overall health affects each of us; health begins with families, neighborhoods, schools and jobs; working together we can increase positive outcomes; and "Act now! If not us, who? When? What didn't work so well for HW 2010 was that the goals were not measured over time. We needed to focus on objectives and diverse communities. She asked the group if SCAODA could serve as HW2020 champions? Steve Fernan asked if there were any recommendations from federal officials on how much Wisconsin should spend on for example, tobacco prevention? Ms. Schmelzer indicated that no, she hasn't received recommendations on spending. She indicated that the Public Health Council has looked at financing issues on their website. In the Midwest, Minnesota is at the top and Wisconsin is at the bottom, in terms of spending. Duncan ShROUT suggested that we need to take into account children. Kids are vulnerable. He expressed concern that children were not addressed. Ms. Schmelzer indicated that she would like to work with SCAODA on this. The plan is not static and she is very flexible. She would like to look at that. Michael Waupoose indicated that having worked on this, he was impressed with the degree of intention and attention given to issues of diversity and not left to chance. He reported that he intentionally asked SCAODA Committees to address issues of Diversity in at least one goal. Kathy Thomas wanted to give kudos to public health nurses. They provide the lead in many SPF-SIG groups. They are partnering with police, providing leadership and are both enthusiastic and remarkable. Gail Nahwahquaw asked if HW2020 was connected to the St. Croix Tribe's grant. Ms. Schmelzer reported on the concept of the Alcohol Tree, created by the St. Croix Tribe. On the drawing of a tree, "What are the problems of AODA?" was written on the tree. "What are the good things you need?" was written on the branch. The point was, you cannot focus on one branch or leaf. The whole tree needs attention. Ms. Schmelzer indicated she was quite moved by what they did. Mark Seidl indicated that SCAODA would follow-up in working with John Easterday and Duncan ShROUT in providing a message regarding children's inclusion in HW2020. Mark Seidl also indicated he would like to collaborate with both the Mental Health Council and the Public Health Council. Michael Waupoose asked if we could have a motion to support the HW2020 plan at the next meeting.

X. IDP Funding Sub-Committee

Duncan ShROUT thanked Sue Gadacz and Leann Cooper for organizing the meeting of the IDP Funding Sub-Committee. The minutes are forthcoming. The goal is to provide funding for indigent persons and to study how the surcharge funds are being used. Supplemental funding requests from the counties totaled \$3 Million. We would like to see that much available. People need services to be available so that first time OWI offenders do not become multiple OWI offenders. Mr. ShROUT reported that Senator David Hansen, and Representatives Tony Staskunas

and Garey Bies have agreed to participate. They still need a Republican Senator. The ultimate goal is to develop legislation as a way to balance this need. The next meeting will be in early January. Nina Emerson and Andrea Jacobson will be participating. Michael Waupoose asked if they had a Tribal representative. Mr. Shroul responded in the negative. Mr. Waupoose indicated that they need one. Counties refer Tribal members to the Tribes for treatment but provide no funding. He informed Mr. Shroul that he could get a representative from Great Lakes Inter-Tribal Council (GLITC).

XI. Agenda Items for the March 4, 2011 Meeting—Mark Seidl

The group generated the following list of items for the next SCAODA meeting:

- Response from the Chair to the Public Input Session today (Conference call with Four Chairs regarding the procedural process for dissent.
- Health Care Reform Presentation
- Update from Margaret Schmelzer
- Epi Study
- Department of Transportation Report (State Agency Reports)
- Motion to Support HW2020

XII. Announcements—Sue Gadacz

Sue Gadacz referred the group to page 100 of the information packet. There is a press release which reports that tobacco sales to Wisconsin youth have decreased again. This is called the Synar violation rate. It is down to 4.7% from 5.7% last year.

Sue Gadacz reported to the group that an AODA Stakeholder meeting was held October 17, 2010 at the Bureau of Prevention Treatment and Recovery. Representatives from provider agencies and advocacy groups from across the state attended. She will be meeting with the Department of Regulation and Licensing next week in Milwaukee regarding the Scopes of Practice issue. Michael Waupoose suggested reconvening the Substance Abuse Advisory Committee and making it a Board. He added that the Stakeholder Group was excellent and an ideal way for information to get out.

Sue Gadacz announced that though it's not official yet, there is every indication that the next Block Grant cycle will require a combined Substance Abuse Prevention and Treatment and Mental Health Block Grant application.

Sue Gadacz asked for a volunteer for the Legislation and Policy Committee of the Mental Health Council. Duncan Shroul volunteered.

John Easterday reported on transition issues. On December 15th the Transition Team will meet with Secretary Timberlake. Individual meetings have not been scheduled yet. The budget is a cost to continue budget with no budget requests related to SCAODA.

Sue Gadacz recognized Kathy Thomas who is retiring; and John Easterday. Kathy has been active in the Prevention Committee and represented the Parliamentarian for SCAODA. John will

be making room for a possible new Administrator. Both have made tremendous contributions to SCAODA.

XIII. Adjournment: Duncan Shrout made a motion to adjourn the meeting. Michael Waupoose seconded the motion. The group responded with all ayes. The meeting was adjourned. The next meeting is scheduled for March 4, 2011 from 9:30 a.m. to 3:30 p.m. at American Family Insurance Conference Center, Room A3151.

SCAODA 2010 Meeting Dates

~~March 5, 2010 9:30 am – 3:30 pm~~
~~June 11, 2010 9:30 am – 3:30 pm~~
~~September 10, 2010 9:30 am – 3:30 pm~~
~~December 10, 2010 9:30 am – 3:30 pm~~

SCAODA 2011 Meeting Dates

March 4, 2011 9:30 am – 3:30 pm
June 10, 2011 9:30 am – 3:30 pm
September 9, 2011 9:30 am – 3:30 pm
December 9, 2011 9:30 am – 3:30 pm