Wisconsin Office of **Children's**

Mental Health

FACT SHEET: Crisis Intervention Services for Children on Medicaid

Medicaid Reimbursed Crisis Intervention Services

Most of Wisconsin's 72 counties are certified under DHS 34 to provide crisis intervention. These services are available 24/7 to help resolve mental health and/or alcohol/drug crises. Services include a 24/7 telephone crisis line; 8-hour/5-day per week walk-in services; and 8hour/7-day per week mobile crisis services to specific locations during specified times.

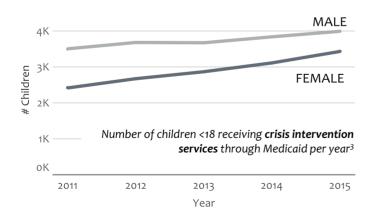
Wisconsin certified crisis services must comply to the standards in DHS 34, <u>Wis. Admin. Code. Crisis Intervention Services</u> including the following:

- Initial contact and determination of need by qualified mental health personnel,
- Initial mental health assessment and response planning,
- Referral and follow-up services such as therapy or day treatment,
- Optional crisis stabilization services.

Wisconsin's 2017/19 budget includes funding to expand youth crisis stabilization service capacity by creating a treatment facility which will be designed to prevent or de-escalate a young person's mental health crisis.

Crisis Intervention

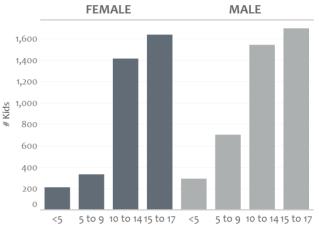
The number of children receiving crisis intervention has increased from 5,900 in 2011 to almost 7,500 in 2015. Across the four years, this is an increase of about 25% total (5-8% increase each year). The total cost of crisis intervention was almost \$14M in 2015, up 40% from 2013 spending.



Crisis Intervention by Age and Gender

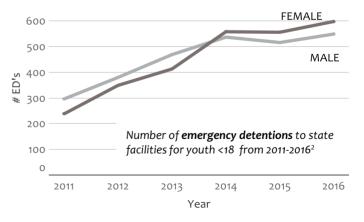
Most crisis intervention is provided to young people between 15 and 17 years of age, though 10-14 year olds are a close second.

Number of children on Medicaid using Crisis Intervention Services in 2015 by age group and gender³



Youth Emergency Detentions

Effective crisis intervention reduces the need for youth psychiatric hospitalizations and emergency detentions. The line graphs below and to the left represent the increases in both services. Data identifying the number of children diverted from an emergency detention due to crisis intervention is not currently collected.



Key Findings

- Wisconsin has more youth using crisis intervention services each year, with 25% more children in 2015 than in 2011.
- Youth ages 15 to 17 are most likely to use crisis services.
- The southeast region provides crisis services at a rate twice as high as the rest of the state.
- The southern region provides more crisis services per child.

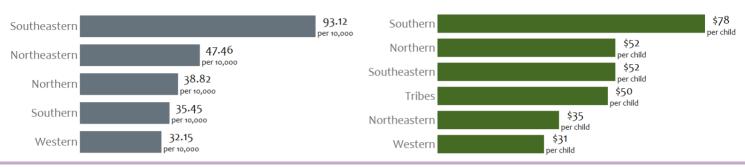
Crisis Intervention Services (page 2)

Regional Differences in Crisis Intervention Services

The southeastern region, encompassing Milwaukee and neighboring counties, has the highest rate of crisis intervention, with 93 per 10,000 children in the county receiving services (below).

Across Wisconsin, 44 per 10,000 children <18 receive crisis intervention under Medicaid, but rates vary by region³ The southern region, including Dane and Rock counties, provides the most crisis intervention per child, that is, children receiving crisis intervention in the southern region have more visits or visits of longer duration.

Average Medicaid spending on crisis intervention per child, per region of the state in 2015³



Parent and Youth Voice⁴

Families prefer when crisis intervention services are provided in the home, school, or community vs. a clinic or emergency room.

Families appreciate that crisis intervention services often provide a bridge to county and state supports through a crisis intervention plan.

In some communities, follow up to the crisis plan would be improved by adding "warm handoffs," that is, making an introduction to a provider instead of sending a family home with a list of names and phone numbers.

Children's Emergency Detention and Crisis Stabilization Workgroup

In 2014, Wisconsin state agencies initiated a workgroup to reduce the high rates of emergency detention. The group has grown over the years and now includes a <u>Collective Impact Parent</u>, more state agencies, providers, and county staff. Three sub-workgroups work on specific topics:

- 1. Best practices in supporting children in crisis,
- 2. Crisis stabilization bed availability,
- 3. County staff training requirements, structure, and delivery.

References

- 1. Wisconsin Legislature. (2010) Chapter DHS 34. Emergency Mental Health Services Programs. Department of Health Services. Madison, WI. Retrieved 10/10/2017 from https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/34.
- 2. Wisconsin Department of Health Services, Division of Care and Treatment Services. (2011-2016). Admission records for Winnebago Mental Health Institute [Data file]. Received 6/9/2017.
- 3. Wisconsin Department of Health Services. (2012-2015). *Medicaid claims spending* [Data file]. Received 3/1/2017 from the Division of Medicaid Services. Claims for this analysis include children <18 receiving Crisis Intervention (procedure codes S9484 or S9485), from 2011-2015, with any diagnosis.
- 4. Children's Mental Health Collective Impact Parent and Youth Partners. For more information visit https://children.wi.gov.