

# WISCONSIN

## State SSA Director

John T. Easterday, Ph.D., Associate Administrator  
Bureau of Mental Health and Substance Abuse Services  
Division of Disability and Elder Services  
Wisconsin Department of Health and Family Services  
P.O. Box 7851  
Madison, WI 53707-7851  
**Phone:** 608-267-9391  
**Fax:** 608-266-2579  
**E-mail:** eastejt@dhfs.state.wi.us  
**Web site:** dhfs.wisconsin.gov

## Structure and Function

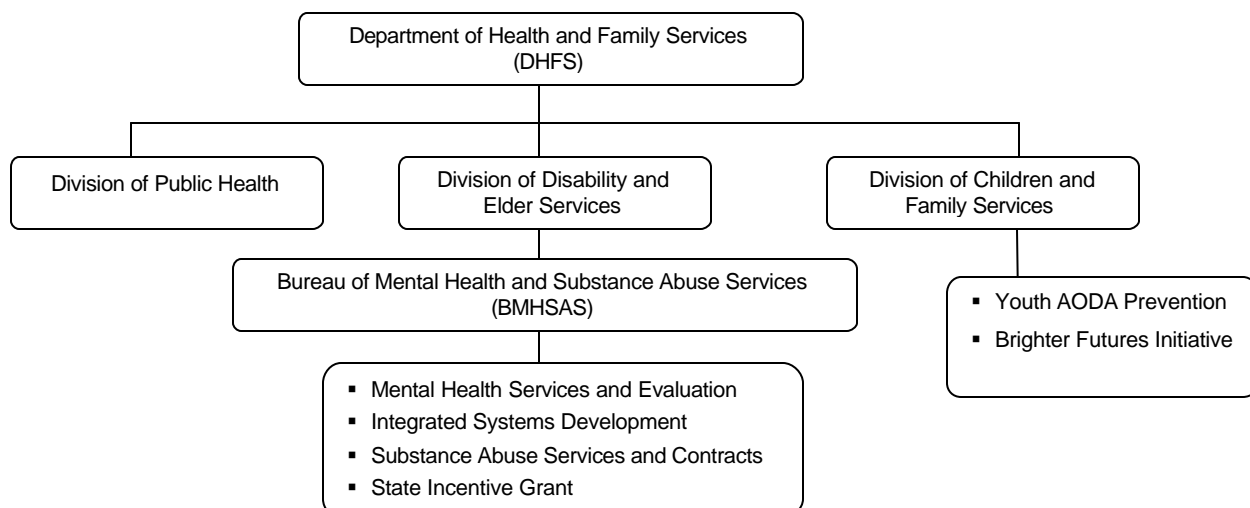


The Department of Health and Family Services (DHFS), Bureau of Mental Health and Substance Abuse Services (BMHSAS), is Wisconsin's designated Single State Agency (SSA) for providing substance abuse prevention and alcohol and other drug abuse (AODA) services. BMHSAS's mission is to support and improve the quality and effectiveness of mental health and substance abuse services in order to create a recovery-focused system for the people of Wisconsin. BMHSAS envisions a society where all persons have optimal physical and mental health; where mental health,

substance abuse dependency, and addiction are recognized as health issues; and where stigma and other barriers to recovery are eliminated. This mission and vision are realized by several guiding principles: invest for results and outcomes, change attitudes, build partnerships, commit to quality, and work on a common goal to assure that there will be access to individualized treatment and recovery. In addition to its central office, BMHSAS maintains five regional offices: Northeast, Northern, Southeastern, Southern, and Western.

The work of BMHSAS fall primarily into two categories for both prevention and treatment: program planning and evaluation monitoring and program and systems development. Program planning and evaluation activities include outcome identification, data system analysis, needs assessment activities, program coordination activities, and contract/grants management. The program and systems development activities include reviewing the biennial budget, following legislation, coordinating training, and managing programmatic areas.

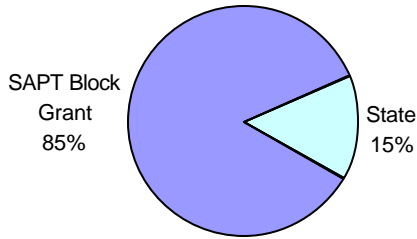
### Single State Agency Structure



## Single State Agency Funding Overview

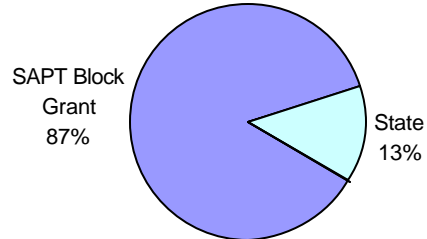
Wisconsin's SSA funding increased from \$28.8 million in FY 2000 to \$29.8 million in FY 2003. The distribution of expenditures remained fairly stable during this time period. In FY 2003 most (87 percent) of the expenditures came from the Block Grant, followed by 13 percent from the State—a distribution similar to that of FY 2000.

**FY 2000 Expenditures by Funding Source**

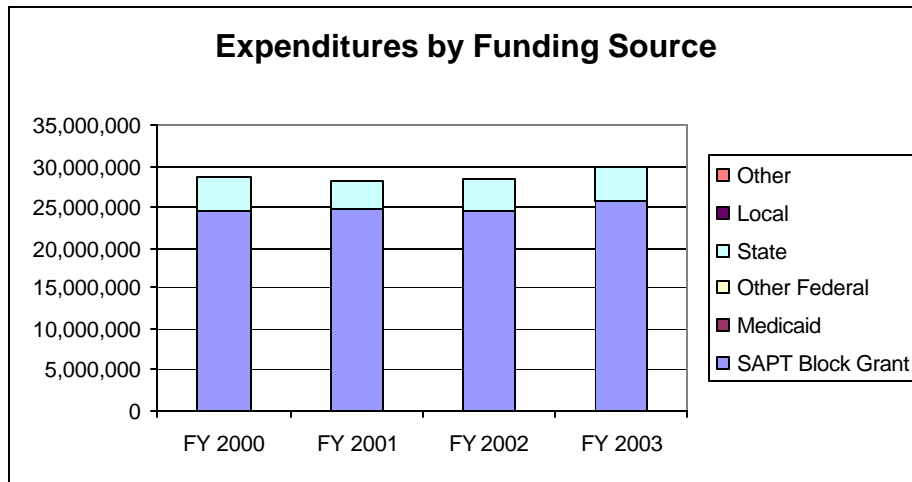


**N=\$28,780,879**

**FY 2003 Expenditures by Funding Source**



**N=\$29,774,673**



### Single State Agency Expenditures From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	24,530,479	85	24,837,927	88	24,525,217	86	25,877,350	87
Medicaid	0	0	0	0	0	0	0	0
Other Federal	0	0	0	0	0	0	0	0
State	4,250,400	15	3,384,699	12	3,969,339	14	3,897,323	13
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
<b>Total*</b>	<b>28,780,879</b>	<b>100</b>	<b>28,222,626</b>	<b>100</b>	<b>28,494,556</b>	<b>100</b>	<b>29,774,673</b>	<b>100</b>

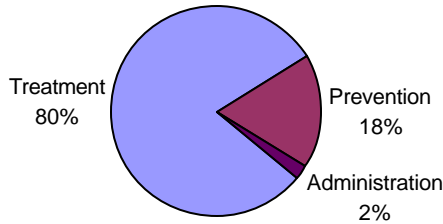
SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

\* Totals may not equal 100 percent due to rounding.

### Activities and Expenditures From All Funding Sources

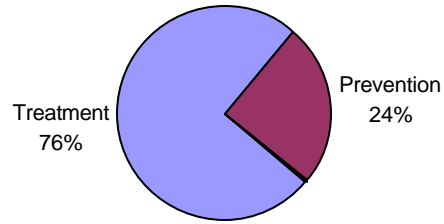
The \$22.4 million allocated for treatment services in Wisconsin in FY 2003 represented three-quarters (76 percent) of total SSA expenditures, while prevention services accounted for the remaining one-quarter (24 percent). Prevention as a proportion of total expenditures increased slightly from FYs 2000 to 2003, from 18 to 24 percent, while treatment as a proportion of total expenditures decreased from 80 to 76 percent.

**FY 2000 Expenditures by Activity**

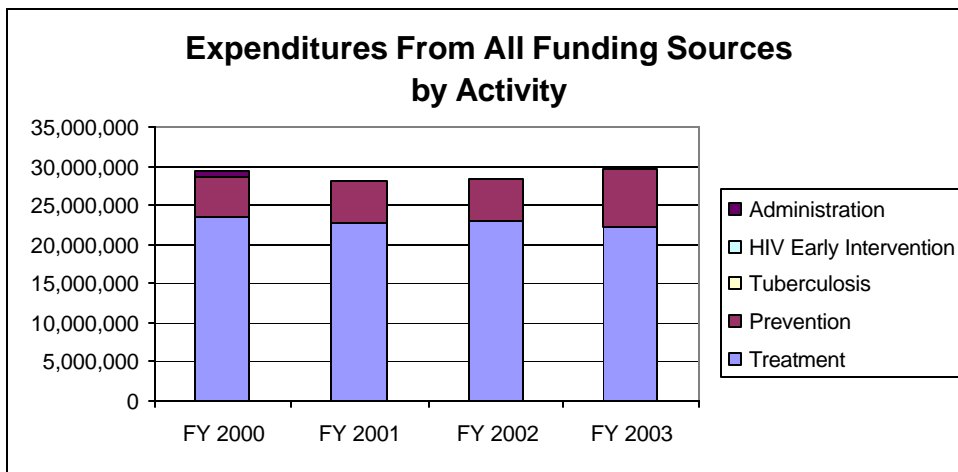


N=\$28,780,879

**FY 2003 Expenditures by Activity**



N=\$29,774,673



### Single State Agency Expenditures From All Funding Sources by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	3,970,400	14	3,104,699	11	22,958,071	81	22,430,769	75
Alcohol Treatment	9,780,942	33	9,893,921	35				
Drug Treatment	9,780,941	33	9,893,921	35				
Prevention	5,186,096	18	5,267,585	19	5,536,485	19	7,244,160	24
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	625,000	2	62,500	0	0	0	99,744	0
<b>Total*</b>	<b>28,780,879</b>	<b>100</b>	<b>28,222,626</b>	<b>100</b>	<b>28,494,556</b>	<b>100</b>	<b>29,774,673</b>	<b>100</b>

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

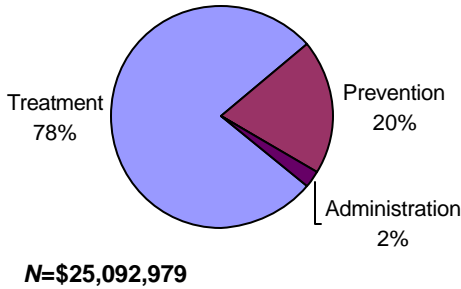
\* Totals may not equal 100 percent due to rounding.

## Expenditures of Block Grant and State Funds

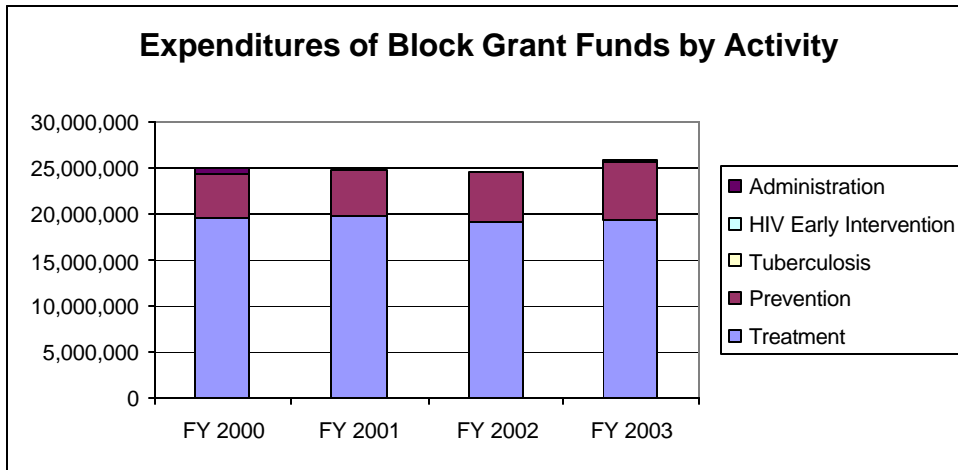
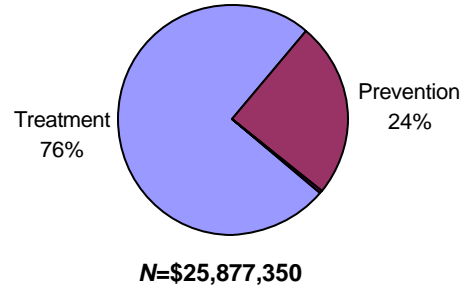
### Expenditures of Block Grant Funds

Treatment and rehabilitation activities accounted for 76 percent of the nearly \$25.9 million in Block Grant funding for Wisconsin in FY 2003—down slightly from their share of 76 percent in FY 2000. Prevention activities increased slightly from FYs 2000 to 2003, both in dollar value and proportion.

**FY 2000 Block Grant Expenditures by Activity**



**FY 2003 Block Grant Expenditure by Activity**



### Single State Agency Expenditures of Block Grant Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	0	0	0	0	19,268,732	79	19,496,217	75
Alcohol Treatment	9,780,942	39	9,893,921	40				
Drug Treatment	9,780,941	39	9,893,921	40				
Prevention	4,906,096	20	4,987,585	20	5,256,485	21	6,281,389	24
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	625,000	2	62,500	0	0	0	99,744	0
<b>Total*</b>	<b>25,092,979</b>	<b>100</b>	<b>24,837,927</b>	<b>100</b>	<b>24,525,217</b>	<b>100</b>	<b>25,877,350</b>	<b>100</b>

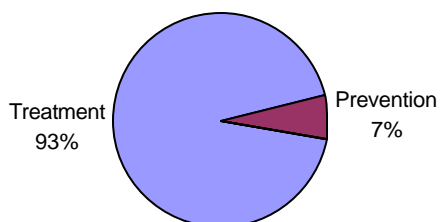
SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

\* Totals may not equal 100 percent due to rounding.

## Expenditures of State Funds

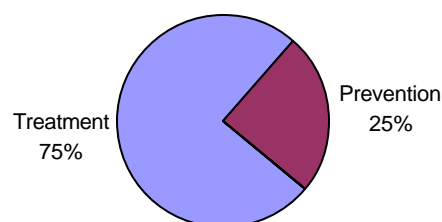
State expenditures for alcohol and drug abuse services in Wisconsin fluctuated between FYs 2000 and 2003. During this time period, expenditures on treatment decreased as a proportion of total funds (as well as in actual dollar amount) from 93 to 75 percent, while expenditures on prevention activities increased from 7 to 25 percent.

**FY 2000 State Expenditures by Activity**

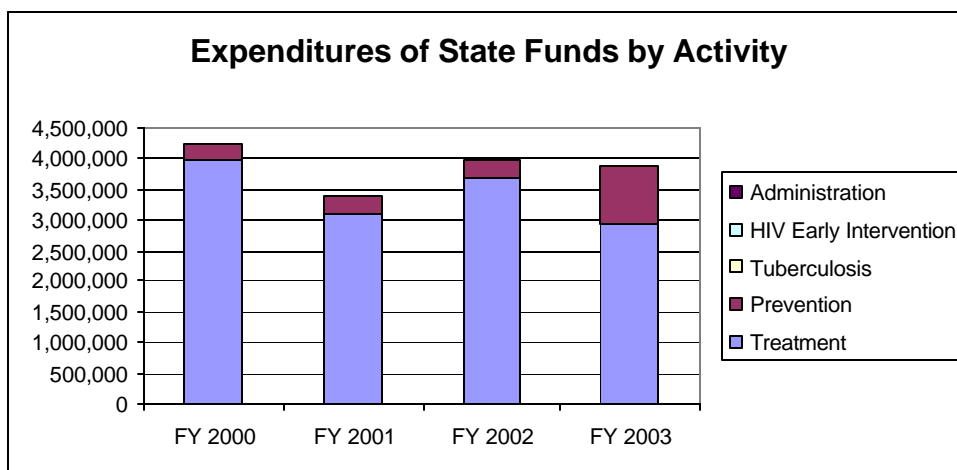


**N=\$4,250,400**

**FY 2003 State Expenditures by Activity**



**N=\$3,897,323**



### Single State Agency Expenditures of State Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	3,970,400	93	3,104,699	92	3,689,339	93	2,934,552	75
Alcohol Treatment	0	0	0	0				
Drug Treatment	0	0	0	0				
Prevention	280,000	7	280,000	8	280,000	7	962,771	25
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	0	0	0	0	0	0	0	0
<b>Total*</b>	<b>4,250,400</b>	<b>100</b>	<b>3,384,699</b>	<b>100</b>	<b>3,969,339</b>	<b>100</b>	<b>3,897,323</b>	<b>100</b>

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

\* Totals may not equal 100 percent due to rounding.

## Prevention Services

Wisconsin, a recipient of the Center for Substance Abuse Prevention (CSAP)'s State Incentive Grant (SIG), is in the process of reinventing its substance abuse prevention system to improve prevention programming by eliminating duplication, filling service gaps, and coordinating funding. The SIG Advisory Committee is completing a comprehensive, long-range prevention plan, utilizing two strategic planning committees: one includes DHFS's Division of Public Health, Division of Children and Family Services; the other committee includes the two entities above plus the Department of Public Instruction (which manages Safe and Drug Free Schools and Communities) and the Department of Transportation (which manages the driving while intoxicated and youth alcohol education programs).

The Brighter Futures Initiative (BFI) is a legislatively created initiative that funds 10 youth development programs. This program's overall goal is to assist youth and families to be safe, healthy, self-sufficient members of their community. BFI grantees receive enhanced technical assistance and access to the most current research on best practices in community, youth, and family development strategies to achieve the stated goals and benchmarks.

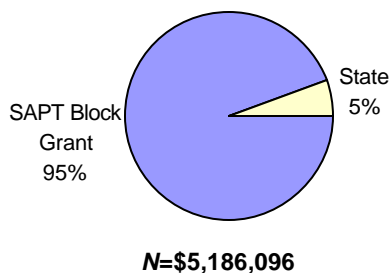
DMHSAS also helps enhance employers' capacity to implement and sustain a drug-free workplace as a primary prevention strategy. This coordination, the result of the Employee Assistance Program (EAP) Survey analysis, is included in the Governor's proclamation designating October as EAP and Drug Free Workplace Awareness Month. Other prevention activities include management of the tobacco prevention program through the Division of Public Health, and an initiative to support substance abuse prevention outcomes of high-risk Native American youth.

### Prevention Funding and Expenditures

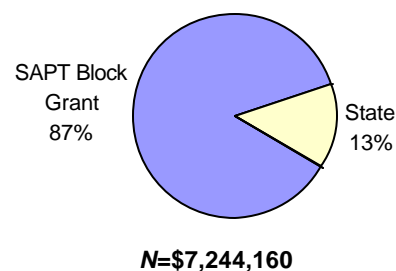
Wisconsin spent more than \$7.2 million on prevention services in FY 2003—a substantial increase from FY 2000 expenditures. Between those two periods, Block Grant funding dollars decreased as a proportion of prevention expenditures (from 95 to 87 percent), while State funds increased (from 5 to 13 percent).

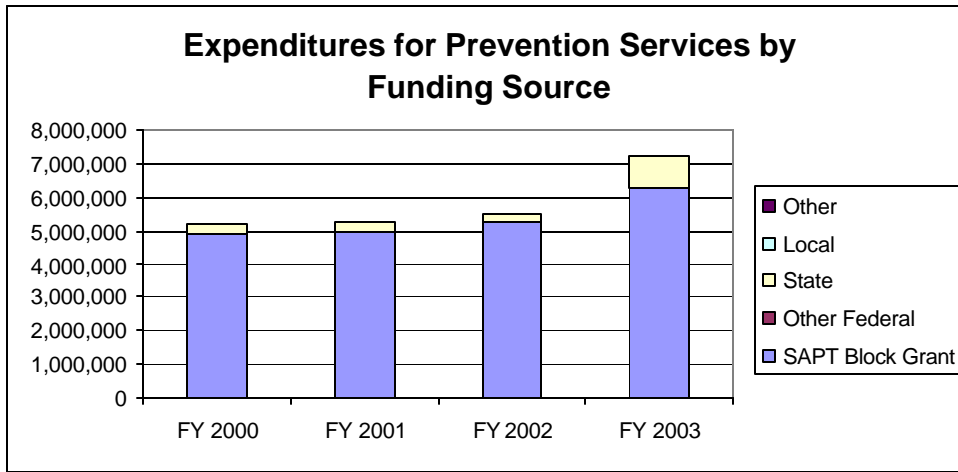
Per capita, Block Grant prevention funding increased from \$0.91 in FY 2000 to \$1.15 in FY 2003.

**FY 2000 Prevention Expenditures by Funding Source**



**FY 2003 Prevention Expenditures by Funding Source**





**Single State Agency Expenditures for Prevention Services From All Funding Sources**

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	4,906,096	95	4,987,585	95	5,256,485	95	6,281,389	87
Other Federal	0	0	0	0	0	0	0	0
State	280,000	5	280,000	5	280,000	5	962,771	13
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
<b>Total*</b>	<b>5,186,096</b>	<b>100</b>	<b>5,267,585</b>	<b>100</b>	<b>5,536,485</b>	<b>100</b>	<b>7,244,160</b>	<b>100</b>

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

\* Totals may not equal 100 percent due to rounding.

**Core Strategies**

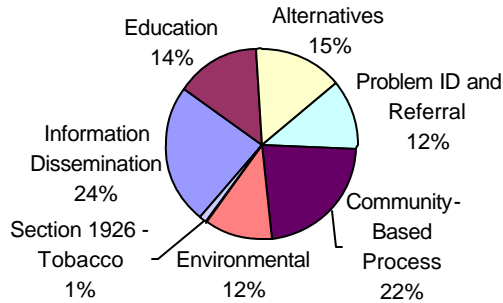
Examples of core prevention strategies supported by Block Grant funds include:

Core Strategy	Examples of Activities
Information Dissemination	Information dissemination activities include statewide clearinghouse activities through the Wisconsin Clearinghouse for Prevention Resources, Prevention Outlook newsletter, and Web sites.
Education	Strategies include a statewide prevention conference and prevention specialist workshops.
Alternatives	Programs include the Wisconsin Regional Teen Institute and the development and implementation of a community substance abuse prevention action plan.
Community-Based Processes	Brighter Futures Initiative (BFI) supports community participation and involvement to promote the health and well-being of children and families.
Environmental	Funds support education, policy, creation of local laws and ordinances, and training of community coalition members.
Problem Identification and Referral	Funds support each county and Tribe in providing onsite problem identification and referral services, as well as emergency after-hours hotline systems.

### Expenditures of Block Grant Funds for Core Strategies

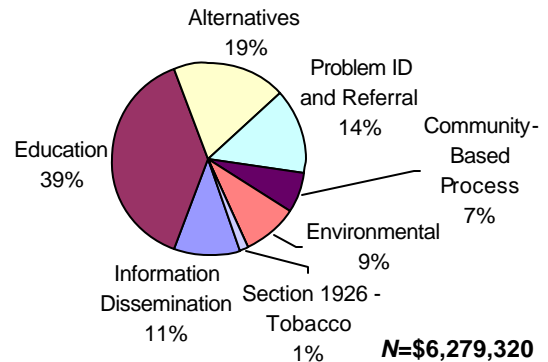
In FY 2003, the \$6.3 million in Block Grant funding for core prevention strategies was distributed widely among the strategies. Thirty-nine percent of funding went toward education activities (up from 14 percent in FY 2000), 19 percent went toward alternative strategies, and 14 percent went toward problem identification and referral activities.

**FY 2000 Block Grant Expenditures by Core Strategy**

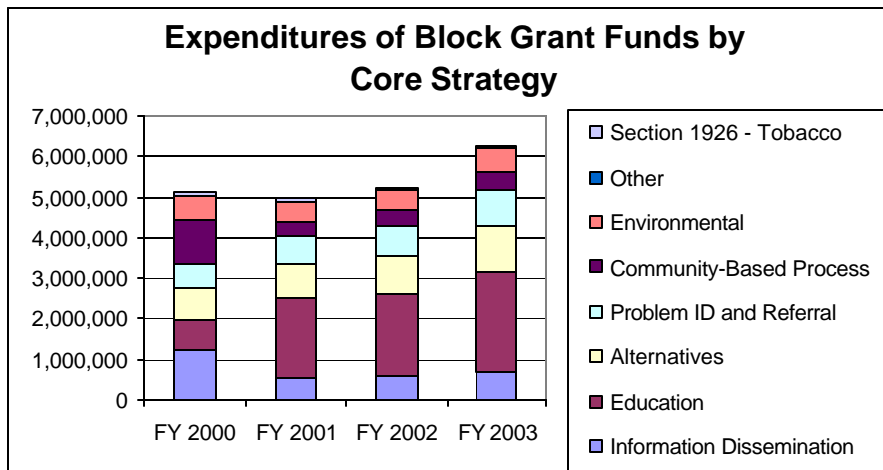


**N=\$5,139,671**

**FY 2003 Block Grant Expenditures by Core Strategy**



**N=\$6,279,320**



### Single State Agency Expenditures of Block Grant Funds by Core Strategy

Strategy	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Information Dissemination	1,233,521	24	551,571	11	569,853	11	690,725	11
Education	719,554	14	1,957,267	39	2,020,389	38	2,435,728	39
Alternatives	770,951	15	822,199	16	984,292	19	1,193,071	19
Problem ID and Referral	616,761	12	707,759	14	725,268	14	879,105	14
Community-Based Process	1,130,728	22	378,192	8	414,439	8	439,552	7
Environmental	592,156	12	494,597	10	466,244	9	565,139	9
Other	0	0	0	0	0	0	0	0
Section 1926 - Tobacco	76,000	1	76,000	2	76,000	1	76,000	1
<b>Total*</b>	<b>5,139,671</b>	<b>100</b>	<b>4,987,585</b>	<b>100</b>	<b>5,256,485</b>	<b>100</b>	<b>6,279,320</b>	<b>100</b>

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4a

\* Totals may not equal 100 percent due to rounding.



## Treatment and Rehabilitation Services

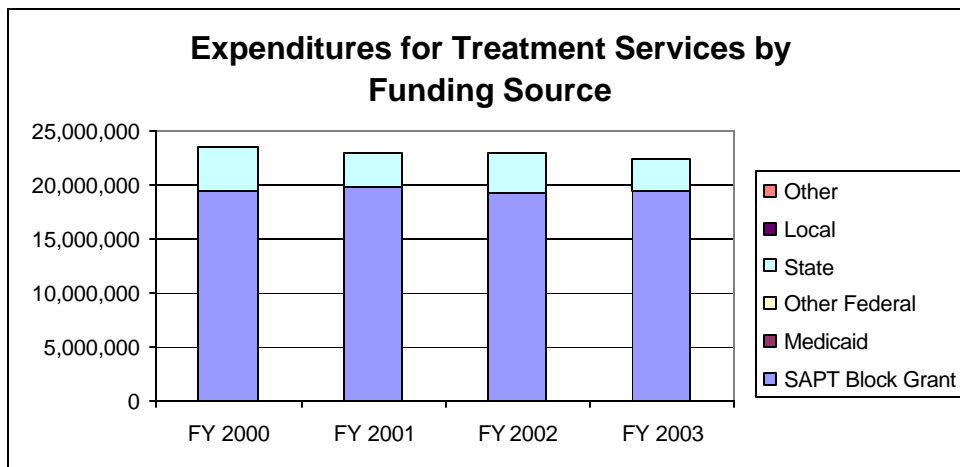
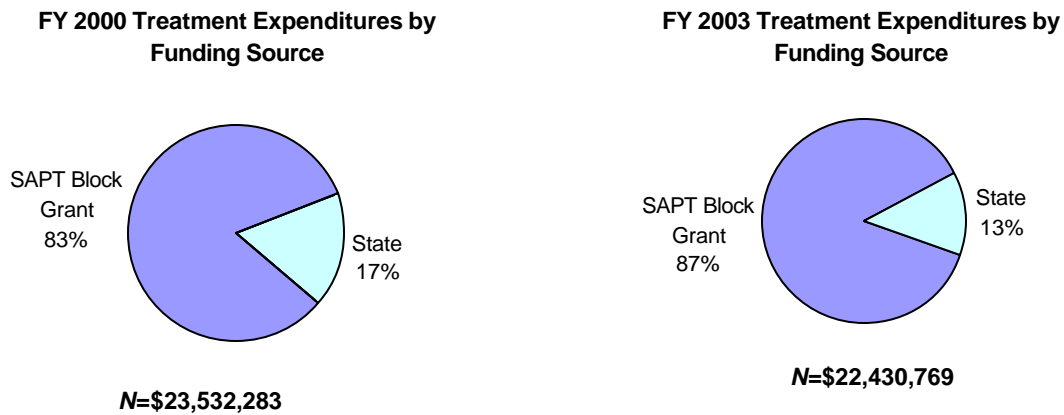
Wisconsin operates under a county-administered, State-supervised substance abuse service system. A full continuum of substance abuse services is purchased through the 72 counties and 11 tribal governments throughout Wisconsin. These services include emergency outpatient, medically managed inpatient detoxification, medically monitored residential detoxification, ambulatory detoxification, medically managed inpatient, medically monitored, outpatient, day, and transitional residential treatment services, as well as residential intoxication monitoring, and narcotic treatment for opiate addiction.

Pregnant women receive priority admission to treatment. Other targeted populations for treatment include women, participants in the criminal justice system, youth, and injection drug users (IDUs).

### Treatment Funding and Expenditures

Between FYs 2000 and 2003, total expenditures on treatment services in Wisconsin remained fairly stable, totaling \$22.4 million in FY 2003. The Block Grant funded 87 percent of those expenditures, and the State funded the remaining 13 percent, representing a fairly stable proportion since FY 2000.

Block Grant funding per capita declined slightly from \$3.64 in FY 2000 to \$3.56 in FY 2003.



**Single State Agency Expenditures for Treatment Services From All Funding Sources**

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	19,561,883	83	19,787,842	86	19,268,732	84	19,496,217	87
Medicaid	0	0	0	0	0	0	0	0
Other Federal	0	0	0	0	0	0	0	0
State	3,970,400	17	3,104,699	14	3,689,339	16	2,934,552	13
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
<b>Total*</b>	<b>23,532,283</b>	<b>100</b>	<b>22,892,541</b>	<b>100</b>	<b>22,958,071</b>	<b>100</b>	<b>22,430,769</b>	<b>100</b>

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

\* Totals may not equal 100 percent due to rounding.

**Admissions**

Wisconsin's SAPT Block Grant application indicates that nearly 30,000 persons were admitted to treatment during FY 2002, of which most were admitted for outpatient (non-methadone treatment).

**Number of Persons Admitted by Type of Treatment Care**

Type of Care	Total Number Admissions by Primary Diagnosis (N=29,998)		
	Alcohol Problems	Drug Problems	None Indicated
<b>Detoxification (24-hour care)</b>			
Hospital inpatient	3,228	199	298
Free-standing residential	892	632	58
<b>Rehabilitation/Residential</b>			
Hospital inpatient (rehabilitation)	163	56	40
Short-term residential	467	224	8
Long-term residential	1,625	996	44
<b>Ambulatory (Outpatient)</b>			
Outpatient (methadone)	222	768	17
Outpatient (non-methadone)	12,483	4,239	1,469
Intensive outpatient	1,183	657	30
Detoxification (outpatient)	0	0	0
<b>Total</b>	<b>20,263</b>	<b>7,771</b>	<b>1,964</b>

SOURCE: FY 2005 SAPT Block Grant Application Form 7a; Reported data for State FY 2002

Treatment Episode Data Set (TEDS) data indicate more than 19,000 admissions (where at least one substance is known), of which more than 10,000 are for alcohol only. Calculations (with imputation) from TEDS data show that approximately 20 percent of persons admitted to treatment programs reported a psychiatric problem combined with alcohol or drug use. This rate varied only slightly when separating out alcohol-only abuse versus abuse of alcohol in combination with other drugs. (For a discussion of the different data sources, see Appendix D: Methodology.)

**Percent of Admissions with a Psychiatric Problem by Primary Diagnosis**

Admissions	2002	
	Admissions Where at Least One Substance Is Known	% with Psychiatric Problem*
Alcohol only	10,437	19.2
Any other drugs	8,615	20.6
<b>Total</b>	<b>19,052</b>	<b>19.9</b>

SOURCE: Treatment Episode Data Set, 2002

\*Values are imputed for admission records with missing information on other psychiatric diagnoses.

According to the National Survey of Drug Use and Health, 405,000 persons aged 12 and older (8.9 percent of Wisconsin's population) needed, but did not receive, treatment for alcohol use, and 104,000 persons (2.3 percent) needed, but did not receive, treatment for illicit drug use in Wisconsin.

**Treatment Gap by Age Group**

Measure	% 12 and older	% 12-17	% 18-25	% 26 and older
Needing but not receiving treatment for alcohol use	8.92	7.00	22.25	6.80
Needing but not receiving treatment for illicit drug use	2.28	5.67	6.84	0.99

SOURCE: National Survey on Drug Use and Health; combined data for 2002 and 2003

## Resource Development Activities

### Planning and Needs Assessment

BMHSAS works closely with the Governor's State Council on Alcohol and Other Drug Abuse (SCAODA) to ensure its mission, vision, and values are carried out. The SCAODA drafts a 4-year plan to guide the State's AODA treatment and prevention services, as well as direct cooperative agreements between State agencies to clarify responsibilities for implementing the plan. The DHFS Secretary chairs the SCAODA, and two BMHSAS staff also work with the SCODA.

Wisconsin's substate planning is divided into six planning areas, encompassing multiple counties and tribal governments, that plan substance abuse treatment and prevention services. Planning is done on the county level, and counties are required to hold public hearings for citizen input into Block Grant planning. SCAODA is statutorily responsible for overseeing and advising on planning, evaluation, and legislation addressing substance abuse in Wisconsin. It works with the regional directors to ensure that citizens have input into county-level treatment and prevention plans.

The State Treatment Needs Assessment Program (STNAP) studies are used for assessing treatment needs in Wisconsin. The primary data set for assessing prevention needs is the Youth Risk Behavior Survey (YRBS), conducted every other year. Secondary prevention data sets include the Wisconsin Clearinghouse for Prevention Resources study "Defining Prevention Needs for Wisconsin's Youth: Nation and State Resources Facts and Figures" and the Brighter Futures Initiative data set.

### Evaluation

Monitoring and evaluation activities are conducted at the regional level. Each of the 5 regional offices participate in quality improvement activities, monitor program compliance with performance and outcome standards, and provide technical assistance to assure compliance with all Federal and State legislation, rules and regulations, and policies. The regional offices also receive and review all State/county contracts for human services in their region.

Prevention program monitoring for the SAPT Block Grant services is limited to monthly expenditure reports and annual progress reports by the county or tribe. Direct grants to nonprofit organizations report monthly expenditures and provide quarterly progress reports. The State's Human Service Reporting System (HSRS) provides data for the chemical dependency treatment system, exclusive of tribal programs that do not report on HSRS.

### Training and Assistance

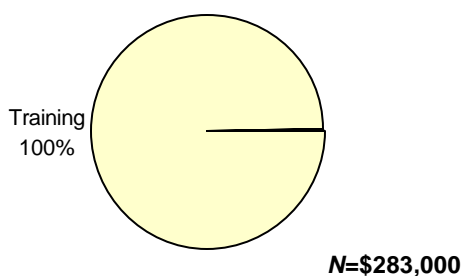
BMHSAS provides continuing education for the treatment workforce through counselor certification core courses, clinical supervisor training, and statewide monthly teleconferences on research-based addiction treatment. Training is also provided to improve substance abuse and mental health services for older persons in collaboration with the Bureau of Aging and Long-Term Care Resources. BMHSAS also oversees the Minority Training Project, an ongoing statewide training initiative to support the growth and development of ethnic minority substance abuse professionals.

The Wisconsin Clearinghouse for Prevention Resources has taken the lead in providing training to Wisconsin's prevention workforce. The Clearinghouse sponsored prevention specialist workshops and organized a prevention conference (the first in more than 10 years). The conference was designed to promote best practices, research-based programs, and environmental strategies to help sustain and improve the effectiveness of local and State programs.

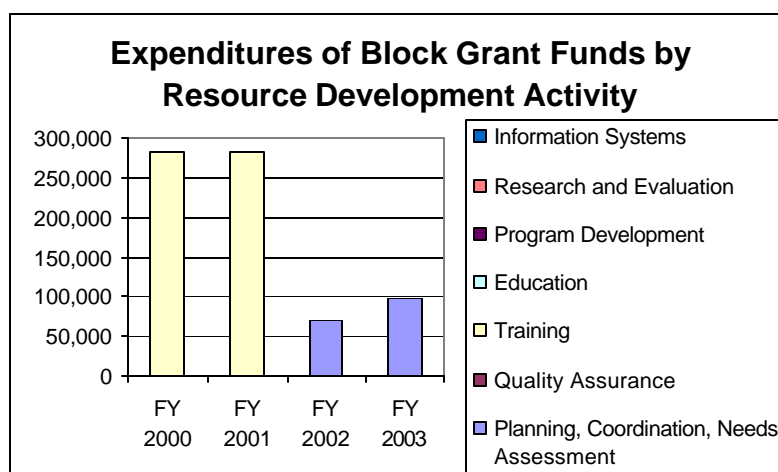
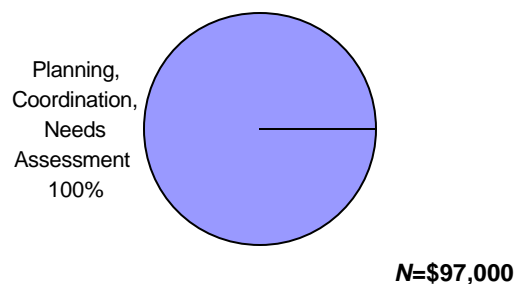
## Expenditures of Block Grant Funds for Resource Development Activities

In FY 2003, Wisconsin directed all its Block Grant resource development funds (\$97,000) toward planning, coordination, and needs assessment activities. These funds were considerably reduced from those in FY 2000, when all of the funds were directed toward training activities.

**FY 2000 Block Grant Expenditures on Resource Development Activities**



**FY 2003 Block Grant Expenditures on Resource Development Activities**



**Single State Agency Expenditures of Block Grant Funds by Resource Development Activities**

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Planning, Coordination, Needs Assessment	0	0	0	0	69,500	100	97,000	100
Quality Assurance	0	0	0	0	0	0	0	0
Training	283,000	100	283,000	100	0	0	0	0
Education	0	0	0	0	0	0	0	0
Program Development	0	0	0	0	0	0	0	0
Research and Evaluation	0	0	0	0	0	0	0	0
Information Systems	0	0	0	0	0	0	0	0
<b>Total*</b>	<b>283,000</b>	<b>100</b>	<b>283,000</b>	<b>100</b>	<b>69,500</b>	<b>100</b>	<b>97,000</b>	<b>100</b>

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4b

\* Totals may not equal 100 percent due to rounding.

## Discretionary Funding

### Center for Substance Abuse Prevention

The Center for Substance Abuse Prevention (CSAP) awarded more than \$2.8 million in 25 discretionary grants to entities in Wisconsin during FY 2004. Nearly three-quarters of that funding was awarded to 23 drug-free communities grantees

#### Center for Substance Abuse Prevention Discretionary Awards for FY 2004

CSAP Discretionary Grant	Number of Awards	Total \$ Amount
Drug Free Communities	23	2,094,349
Family Strengthening	1	394,174
HIV/AIDS Cohort 3 Services	1	350,000
<b>Total</b>	<b>25</b>	<b>2,838,523</b>

SOURCE: [www.samhsa.gov](http://www.samhsa.gov)

### Center for Substance Abuse Treatment

The Center for Substance Abuse Treatment (CSAT) awarded more than \$11 million in discretionary grants to a wide range of Wisconsin entities in FY 2004. The largest awards were granted to Access to Recovery (ATR) (nearly 70 percent of total discretionary funds), followed by targeted capacity expansion (about 9 percent).

#### Center for Substance Abuse Treatment Discretionary Awards for FY 2004

CSAT Discretionary Grant	Number of Awards	Total \$ Amount
State Data Infrastructure	1	100,000
Access to Recovery	1	7,591,723
Pregnant/Post-Partum Women	1	500,000
Homeless Addictions Treatment	1	511,465
Targeted Capacity Expansion	2	1,000,000
Targeted Capacity - HIV/AIDS	1	312,608
Youth Offender Reentry Program 2004	1	499,650
TCE Rural Populations	1	500,000
<b>Total</b>	<b>9</b>	<b>11,015,446</b>

SOURCE: [www.samhsa.gov](http://www.samhsa.gov)