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Wednesday, December 3, 2025

WHA Shares Behavioral Health Challenges, Opportunities and Data at State Capitol

WHA presented a summary of behavioral health challenges and opportunities at the state capitol on Nov. 13 as part of a panel hosted and organized by the Mental Health Action Partnership. WHA General Counsel Matthew Stanford also shared data available for free to the public on the WHA Information Center's Behavioral Health Visits Dashboards as part of the WHA portion of the panel presentation.



WHA's Matthew Stanford presenting at a state capitol briefing on behavioral health

Systemic barriers to access noted by Stanford included:

- Regulatory and payment complexity unique to mental health and substance use disorder impacting both hospital and clinic services, resulting in reduced access for patients in need of behavioral health services
- A regulatory and funding model for behavioral health that is built on a county-based system that was originally designed for an institutionalization model of care for behavioral health

Stanford also identified high-level opportunities for systemic change.

- Prioritizing a reexamination of Wisconsin rules and policies to remove regulatory overlap, particularly between DHS and professional licensure standards at DSPS, removing low-value regulation whose costs do not meaningfully benefit patients and removing other regulatory complexity and barriers to access
- Ensuring sustainable reimbursement, including removing regulatory costs and mandates that Medicaid does not reimburse or does not fully reimburse

Data to inform stakeholders and policymakers was also a highlight of WHA's presentation. Key information and data included:

- In 2024, 42,535 out of the 48,903 total inpatient psychiatric admissions in Wisconsin were to private hospitals, compared to 2,899 inpatient admissions at Winnebago Mental Health Institute.
- Medicaid was the payor for 44% of the inpatient psychiatric admissions in private hospitals in Wisconsin, illustrating how challenging it is to sustain psychiatric services when Medicaid reimbursement is below the cost of delivering care.
- In 2024, 78,129 individuals came to a Wisconsin emergency department due to a mental health or substance use disorder issue and Medicaid was the payor for 41% of those visits.
- Wisconsin is ranked best in the Midwest and the 6th best state in the nation in minimizing time spent in the emergency department for individuals at the emergency department due to a mental health diagnosis. On average, in 2023, the difference in time spent in the emergency department for psychiatric patients vs. other patients in Wisconsin was 66.2 minutes, compared to 158.0 minutes in Illinois and 167.2 in Michigan.

The Mental Health Action Partnership was formed in 2023 and serves as a forum for multiple different communities and sectors of the mental health system to share and discuss mental health needs, challenges and opportunities to improve mental health in Wisconsin.

Other panelists at the state capitol briefing included representatives from the National Alliance on Mental Illness (NAMI) Wisconsin, the Wisconsin Association of Family & Children's Agencies (WAFCA), the Wisconsin County Human Services Association (WCHSA), the Division of Care and Treatment Services at the Department of Health Services (DCTS-DHS), the Wisconsin Primary Health Care Association (WPHCA) and Journey Mental Health.

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- GRASSROOTS SPOTLIGHT: WHA Meets Congressman Wied at DePere District Office; Congressman Steil at Aurora Lakeland Medical Center November 25
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EDUCATION EVENTS

Dec. 16, 2025

Common Hospital Deficiencies

Jan. 14, 2026

Caring for Wisconsin's Caregivers Well-Being First Champion Challenge for Credentialing Kickoff

Jan. 28, 2026

2026 WHA Health Care Leadership Academy