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TO: Representative Erik Severson, Chair and Members of the Speaker's Task Force on Mental Health

FROM: Gina Dennik-Champion, WNA Executive Director

DATE: March 27, 2013

RE: Testimony on Recommended Improvements to the State of Wisconsin Mental Health System

Good afternoon Chairman Severson and members of the Speaker's Task Force on Mental Health. My name is Gina Dennik-Champion, I am a Registered Nurse, and I am here today representing the Wisconsin Nurses Association (WNA). WNA is the professional nurses association for all RNs in Wisconsin. Our membership is comprised of RNs providing direct care, advanced practice, education, and research in settings that range from acute to community based services. On behalf of WNA, I want to thank you for sponsoring and inviting the Wisconsin Nurses Association to testify on this very important issue. WNA wants to focus our remarks on the how the utilization of psychiatric mental health nurses can assist in making improvements in our mental health infrastructure.

Background

Demand for healthcare services, including psychiatric mental health, will continue to grow, as millions of Americans gain health insurance from the Affordable Care Act and Baby Boomers retire, increasing Medicare enrollment. The National Institute of Mental Health reports that one in four adults (approximately 57.7 million Americans) experience a mental health disorder in a given year. Furthermore, the U.S. Surgeon General reports that 10 percent of children and adolescents in the United States suffer from serious emotional and mental disorders that cause significant functional impairment in their day-to-day lives.

(Source: http://www.nami.org/template.cfm?section=about_mental_illness) These statistics underscore the demand for an effective mental healthcare delivery system, which is currently not meeting the needs of the public. Federal agencies, commissions, and advocacy groups have identified a vision of a mental healthcare system that is person-centered, recovery-oriented, and organized to respond to all consumers in need of services, with particular emphasis on providing services to children, adolescents, older adults, and other underserved populations.



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As partners, we need to lead the transformation of the mental healthcare delivery system, improving outcomes across populations. These outcomes will demonstrate care consisting of an integrated system of settings, services, and clinicians. This continuum of care should provide treatment that allows the individual to achieve the highest level of functioning in the least restrictive environment.

Ending the Stigma

As we work to improve access, quality, and efficiency in our mental health system, we must also take a firm stand against the stigma that mental health treatment carries. Generations of negative attitudes toward mental illness and the mentally ill create barriers that can only be broken through education and increased awareness. We need to get to the point where the social stigma of treating depression is the same as treating a sprained ankle or strep throat, where people will look no differently upon the two. But that's not the case. A February 27, 2013 report from Kaiser Health News notes, "The public has a contradictory view of mental illness, according to a new poll. While most Americans believe people with such ailments are the victims of prejudice and discrimination, substantial portions of the public say they have qualms about working in the same place or having their children attend a school where someone with a "serious" mental illness is employed"

(<http://capsules.kaiserhealthnews.org/index.php/2013/02/americans-uncomfortable-around-mentally-ill-despite-acknowledging-discrimination/>). Clearly, we have a lot of work to do on this front.

Increase Utilization of Psychiatric Mental Health Nurses

Registered nurses are the largest workforce in the healthcare system and are proud to be America's Most Trusted Profession, with 3.1 million RNs nationwide and over 77,000 in Wisconsin. Given the increased demand for mental health services, we are seeing a very wise increase in the recognition and utilization of RNs with specialization in psychiatric mental health nursing. Despite this increased recognition and utilization, there still is a lack of an adequate supply of RNs in psychiatric mental health. We believe that continued training and utilization of RNs in psychiatric mental health nursing is essential to improving access to mental healthcare services.

The scope of practice for psychiatric mental health nursing is a specialized area of nursing practice committed to promoting mental health through the assessment, diagnosis, and treatment of behavioral problems, psychiatric disorders and comorbid conditions. Psychiatric



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mental health nursing is an art and a science, employing a wide range of nursing, psychosocial, and neurobiological research evidence to produce effective outcomes. They are trained to meet the needs of the person and function as part of a collaborative healthcare team (American Nurses Association, 2007).

There are three levels of Psychiatric Mental Health Nursing Practice:

Level 1 is the Psychiatric–Mental Health Registered Nurse (PMH-RN), with educational preparation within a Bachelor’s Degree, Associate’s Degree, or a Diploma program. These RNs practice in a variety of clinical settings across the care continuum and engage in a broad array of clinical activities including, but not limited to, health promotion and health maintenance; intake screening, evaluation, and triage; case management; provision of therapeutic and safe environments; promotion of self-care activities; administration of psychobiological treatment regimens and monitoring response and effects; crisis intervention and stabilization; and psychiatric rehabilitation, or interventions that assist in a person’s recovery.

Level 2 is the Psychiatric–Mental Health Advanced Practice Registered Nurse (PMH-APRN) with educational preparation within a Masters’ Degree program.

Level 3 is the Doctor of Nursing Practice in Psychiatric Mental Health (DNP-PMH) with educational preparation within a Clinical Doctoral Degree program as described by the American Association of Colleges of Nursing. The PMH-APRN and the DNP-PMH have the same clinical scope of practice; however the DNP-PMH has advanced education in systems function and analysis.

Wisconsin can count on APRNs as an important part of the solution as demand for services increase. Each year, more and more patients visit advanced practice registered nurses for primary care, including for mental healthcare. The psychiatric–mental health advanced practice registered nurse is equipped with the knowledge, skills and abilities to provide continuous and comprehensive mental healthcare, including assessment, diagnosis, and treatment across settings, while considering the needs and strengths of the individual, family, and community. Promoting mental health in society is important to the psychiatric mental health advanced practice registered nurse.

The scope of advanced practice in psychiatric mental health nursing is continually expanding, consistent with the growth in needs for service, and the evolution of various scientific and nursing knowledge bases. Psychiatric Mental Health APRNs are accountable for functioning within the parameters of their education and training, the scope of practice as defined by their



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state practice acts, and are responsible for making referrals for health problems that are outside their scope of practice. Psychiatric Mental Health APRNs are accountable for their own practice and are prepared to perform services autonomously. In Wisconsin, Advanced Practice Registered Nurse Prescribers are required to facilitate collaboration with other healthcare professionals, including a physician. Although many primary care clinicians treat some symptoms of mental health problems and psychiatric disorders, the APRN provides a full range of comprehensive services that constitute primary mental health and psychiatric care and treatment.

Additional functions of the Psychiatric Mental Health Advanced Practice Registered Nurse Prescriber include:

- prescribing psychopharmacological agents,
- integrative therapy interventions,
- various forms of psychotherapy,
- community interventions,
- case management,
- consultation and liaison,
- clinical supervision,
- program, system and policy development,
- expanded advocacy activities,
- education, and
- research

In summary, the psychiatric mental health nurse and the advanced practice registered nurse are a significant resource for eliminating barriers to treatment and promoting early and voluntary intervention for those in need of mental health services, all while improving care coordination among other practitioners and non-practitioners.

Building capacity and competency among the nursing workforce

Few would dispute the idea that effective mental healthcare relies on the quality and accessibility of healthcare professionals, especially nurses, and as previously mentioned, there is a lack of an adequate supply of RNs with a specialization in psychiatric mental health. That is not to say that RNs are not being exposed to psychiatric mental health. In order to maintain national accreditation, every Wisconsin school of nursing is required to include content specific to psychiatric mental health nursing. The content is integrated throughout the curricula.



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Students interested in psychiatric mental health nursing can obtain more skill and experience in their last semester as a capstone project. However, in Wisconsin, only one school of nursing, UW-Madison, offers psychiatric mental health nursing as a graduate degree. The many career paths available to RNs, combined with the lack of graduate programs and scholarship monies, may be a contributing factor as to why we are struggling to keep up with demand.

It is important to highlight the existing federal loan program and current public policy. They are as follows:

Federal Education Loan Programs

The Bureau of Clinician Recruitment and Services (BCRS) Loan Repayment Programs for Nurses

Nurse practitioners who are dedicated to working in communities with limited access to health care can reduce their educational debt through the National Health Service Corps (NHSC) Loan Repayment Program or the NURSE Corps Loan Repayment Program (LRP). Administered by the U.S. Department of Health and Human Services Health Resources and Services Administration, these programs support nurse practitioners who are dedicated to working in health care facilities with a critical shortage of nurses. Both programs award loan repayment to nurse practitioners working in urban, rural and frontier communities with limited access to care throughout the United States in exchange for a commitment to serve at a site for a minimum of two years. A clinical area that is in demand includes psychiatric mental health nursing.

NURSE Corps Loan Repayment Program

NURSE Corps Loan Repayment Program puts registered nurses (including advanced practice nurses and nursing faculty) on a rewarding career path while paying off 60 percent of their unpaid nursing student loans in just 2 years – and an additional 25 percent of the original balance for an optional third year. In return, NURSE Corps members fulfill a service obligation at any one of thousands of nonprofit hospitals, clinics and other facilities located in designated primary medical care or mental “Health Professional Shortage Areas (HPSA)” across the United States, including Wisconsin.



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Federal Policies

CMS Coding and Reimbursement Changes

There are new policies implemented by CMS which recognizes and fortifies psychiatric mental health services. The introduction of new billing codes and increased reimbursement rates effective January 2013 allows physicians and psychiatric mental health APRNs to bill for their psychotherapy services using “add-on” codes for the psychotherapy portion, in addition to billing an “evaluation and management” service for an office visit. This results in higher reimbursement than under the current coding structure. The new code framework is designed for all settings, with no distinction between “Office or Outpatient” versus “Hospital, Partial Hospital, or Residential Care Facility.” Several codes stayed the same — Psychoanalysis; Family Psychotherapy; Group Psychotherapy; Narcosynthesis; Transcranial Magnetic Stimulation; and Electroconvulsive Therapy.

National Defense Authorization Act Includes APRNs as Included Provider

Another area where psychiatric advanced practice registered nurses are recognized is the National Defense Authorization Act (NDAA). This language includes psychiatric advanced practice registered nurses as an authorized provider to conduct PTSD pre-separation medical examinations.

State Policies

In Wisconsin, Administrative Code DHS 35 allows for the utilization of nationally board certified psychiatric mental health advanced practice registered nurses to prescribe and treat in certified outpatient mental health clinics.

Most insurance plans include coverage for APRN psychiatric mental health nurses.

Identifying Best Practices

I would like to draw your attention to a study that is working to identify best practices in meeting psychiatric mental healthcare demand. A collaborative partnership in the Milwaukee County area, funded by the Robert Wood Johnson Foundation and Northwest Health Foundation, is investing monies to assist in the preparation of RNs and identify the workforce and skills needed to serve an older and more diverse population, including patients in need of psychiatric mental health services. One goal is to support the redesign of Milwaukee County’s mental health system with the recognition that one of the crucial issues they face is how to build an effective and efficient mental health nursing workforce.



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These Milwaukee County stakeholders project; *Workforce Data and Mental Health Redesign: Nursing's Voice*, will create a new, replicable model of workforce data collection and analysis to better project the skills needed in nurses of the future, and in particular to identify the nursing workforce needs in mental health services in Milwaukee.

The collaborative partnership working on three key activities:

- 1) Conduct research and data collection to document the current and future need for mental health nurses in the new system;
- 2) Develop strategies to encourage nursing students to pursue a career in mental health service and to provide them with the essential skills to be successful; and
- 3) Provide a platform for the voice of nurses so that the new mental health delivery system can make optimal use of their skills and ideas.

The best practices identified in the project can then be utilized throughout the state beginning with the development of questions for the 2014 RN Workforce Survey and educational content for formal nursing programs and continuing education.

Summary

The discussion of how to address the psychiatric mental health issues in Wisconsin needs to consider system redesign, care coordination and a culture of person-centered care. In order to achieve successful outcomes, there will need to be an adequate supply of competent psychiatric mental health providers. It was WNA's goal today to provide information on the important contributions of psychiatric mental health nurses in Wisconsin.