



State of Wisconsin
2017 - 2018 LEGISLATURE

LRB-4076/1
SWB:klm&amn

2017 BILL

1 **AN ACT** *to create* 15.197 (14g) and 51.028 of the statutes; **relating to:** an
2 advisory council on pediatric autoimmune neuropsychiatric disorder
3 associated with streptococcal infections and pediatric acute-onset
4 neuropsychiatric syndrome.

Analysis by the Legislative Reference Bureau

This bill establishes a council in the Department of Health Services to advise the department on research, diagnosis, treatment, and education relating to pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections, commonly referred to as PANDAS, and pediatric acute-onset neuropsychiatric syndrome, commonly referred to as PANS. Under the bill, in addition to advising DHS, the council must also prepare an annual report to the legislature with its recommendations regarding 1) practice guidelines for the diagnosis and treatment of PANDAS and PANS; 2) mechanisms to increase clinical awareness and education among physicians, including pediatricians, school-based health centers, and providers of mental health services; 3) outreach to educators and parents to increase awareness; and 4) development of a network of volunteer experts to assist in education and outreach.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

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1 **SECTION 1.** 15.197 (14g) of the statutes is created to read:

2 **15.197 (14g) COUNCIL ON PEDIATRIC AUTOIMMUNE NEUROPSYCHIATRIC DISORDERS**
3 ASSOCIATED WITH STREPTOCOCCAL INFECTIONS AND PEDIATRIC ACUTE-ONSET
4 NEUROPSYCHIATRIC SYNDROME. (a) There is created in the department of health
5 services a council on pediatric autoimmune neuropsychiatric disorders associated
6 with streptococcal infections and pediatric acute-onset neuropsychiatric syndrome.
7 The council shall consist of the following members appointed for staggered 3-year
8 terms:

9 1. An immunologist licensed in this state who has experience treating pediatric
10 acute-onset neuropsychiatric syndrome with the use of intravenous
11 immunoglobulin.

12 2. A health care provider licensed and practicing in this state who has
13 experience treating persons with pediatric acute-onset neuropsychiatric syndrome
14 and autism.

15 3. A representative of a nonprofit pediatric acute-onset neuropsychiatric
16 syndrome advocacy organization.

17 4. A family practice physician licensed and practicing in this state who has
18 experience treating persons with pediatric acute-onset neuropsychiatric syndrome.

19 5. A medical researcher with experience conducting research concerning
20 pediatric autoimmune neuropsychiatric disorders associated with streptococcal
21 infections, pediatric acute-onset neuropsychiatric syndrome, obsessive-compulsive
22 disorder, and other neurological disorders.

23 6. A health care provider licensed and practicing in this state who has expertise
24 in treating eating disorders.

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1 7. A representative of a professional organization in this state for school
2 psychologists or school social workers.

3 8. A child psychiatrist who has experience treating persons with pediatric
4 acute-onset neuropsychiatric syndrome.

5 9. A pediatrician who has experience treating persons with pediatric
6 acute-onset neuropsychiatric syndrome.

7 10. A representative of an organization focused on autism.

8 11. A parent with a child who has been diagnosed with pediatric acute-onset
9 neuropsychiatric syndrome and autism.

10 12. A social worker licensed in this state.

11 13. A representative of the division of the department of public instruction that
12 addresses special education services.

13 14. One representative to the assembly appointed by the assembly majority
14 leader.

15 15. One senator appointed by the senate majority leader.

16 16. Notwithstanding s. 15.09 (2), the secretary of health services, or his or her
17 designee, who shall serve as the secretary and a nonvoting member of the council.

18 (b) A majority of the council members shall constitute a quorum. A majority
19 vote of a quorum is required for any official action of the council. The council shall
20 meet upon the call of the chair or upon the request of the majority of its members and
21 shall meet no fewer than 4 times each year. The secretary of health services, or his
22 or her designee to the council, shall attend all meetings of the council. The council
23 shall select a chair at the first meeting of the council.

24 **SECTION 2.** 51.028 of the statutes is created to read:

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1 **51.028 Council on pediatric autoimmune neuropsychiatric disorders**
2 **associated with streptococcal infections and pediatric acute-onset**
3 **neuropsychiatric syndrome.** The council on pediatric autoimmune
4 neuropsychiatric disorders associated with streptococcal infections and pediatric
5 acute-onset neuropsychiatric syndrome shall do all of the following:

6 **(1)** Advise the department regarding research, diagnosis, treatment, and
7 education relating to pediatric autoimmune neuropsychiatric disorders associated
8 with streptococcal infections and pediatric acute-onset neuropsychiatric syndrome.

9 **(2)** By July 1, 2018, and annually thereafter, the council on pediatric
10 autoimmune neuropsychiatric disorders associated with streptococcal infections
11 and pediatric acute-onset neuropsychiatric syndrome shall submit a report to the
12 chief clerk of each house of the legislature for distribution to the legislature in the
13 manner described under s. 13.172 (2) that provides the council's recommendations
14 concerning all of the following issues relating to pediatric autoimmune
15 neuropsychiatric disorders associated with streptococcal infections and pediatric
16 acute-onset neuropsychiatric syndrome:

17 (a) Practice guidelines for diagnosis and treatment.

18 (b) Mechanisms to increase clinical awareness and education among
19 physicians, including pediatricians, school-based health centers, and providers of
20 mental health services.

21 (c) Outreach to educators and parents to increase awareness.

22 (d) Development of a network of volunteer experts on the diagnosis and
23 treatment of the disorders and syndrome to assist in education and outreach.

24 **(3)** The council may take no action after June 30, 2021, unless legislation has
25 been introduced to continue the activities of the council.

BILL**SECTION 3. Nonstatutory provisions.**

(1) Notwithstanding the length of terms specified for the members of the council on pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and pediatric acute-onset neuropsychiatric syndrome under section 15.197 (14g) (a) of the statutes, of the 15 members appointed, 8 of the initial members, specifically those appointed under section 15.197 (14g) (a) 7. to 10. and 12. to 15. of the statutes, shall be appointed for terms expiring on June 30, 2020, and 7 of the initial members, specifically those appointed under section 15.197 (14g) (a) 1. to 6. and 11. of the statutes, shall be appointed for terms expiring on June 30, 2021.

(2) All initial members of the council on pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and pediatric acute-onset neuropsychiatric syndrome shall be appointed or designated under section 15.197 (14g) (a) of the statutes no later than 60 days after the effective date of this subsection. The governor shall also schedule the first meeting of the council, which shall take place within 90 days of the effective date of this subsection.

(END)