

## Medicaid-funded school-based health care services and supports

There are several ways Medicaid dollars are used to support school-based health care. The following is a summary of key programs and the funded budget to support continued growth of these programs.

### School-Based Health Care Services (SBHS) Program

SBHS is an optional Medicaid program that reimburses contracted school districts, educational service districts (ESDs), charter and tribal schools for providing medically necessary services to Medicaid-eligible children with Individualized Education Programs (IEPs) or Individualized Family Service Plans (IFSPs). To be reimbursable, services must be included in a student's IEP or IFSP and must be provided by or under the supervision of a Department of Health (DOH) licensed provider.

HCA contracts with 183 school districts and five ESDs for the SBHS Program, serving about 18,000 students annually at an annual cost of \$11.5 million. SBHS-covered services include audiology, counseling services, occupational therapy, physical therapy, speech language therapy, and nursing services. The services are carved out of the Medicaid managed care contracts and are offered fee-for-service. The SBHS Program provides reimbursement for in-person services as well as telehealth services.

More information: <https://www.hca.wa.gov/sbhs>

### Medicaid Administrative Claiming (MAC) Program

MAC is an optional Medicaid program that allows school districts and ESDs to receive federal reimbursement for administrative activities performed by school staff that support the goals of the [Medicaid State Plan](#). Examples of eligible activities include outreach and providing information about Medicaid programs and covered services to students and families, assisting individuals in applying for or accessing Medicaid-covered services, and referring students and families to health providers.

School district staff participate in a quarterly Random Moment Time Study (RMTS) to determine the amount of time they spend performing eligible administrative activities. The RMTS assigns "moments" to participants throughout the quarter. HCA contracts with 49 school districts for the MAC Program, at an annual cost of \$3.6 million.

More information: <https://www.hca.wa.gov/billers-providers-partners/programs-and-services/public-school-districts>

### Medicaid Managed Care

School districts and ESDs can contract directly with the Medicaid managed care organizations (MCOs) to receive reimbursement for providing Medicaid-covered health services not included in an IEP or IFSP. Examples of services that schools may receive reimbursement for include vision and hearing screenings, diabetes and asthma treatment for students with 504 plans, behavioral health services, immunizations, and any other non-IEP/IFSP Medicaid-covered health service.

ESD 113 and Spokane Public Schools are licensed behavioral health agencies and have been successfully billing the Medicaid MCOs for behavioral health services for years. ESD 112 and other ESDs are also in the process of becoming licensed behavioral health agencies. HCA is actively working with interested ESDs, the MCOs, and OSPI to ensure all ESDs/school districts are able to contract with and bill the MCOs if they wish to pursue this option.

More information: <https://www.hca.wa.gov/billers-providers-partners/programs-and-services/managed-care>

## School-Based Health Centers (SBHC)

School-based health centers (sometimes called school-based health clinics) are student-focused health centers located in or adjacent to a school where students can receive integrated medical, behavioral health, and other health care services. SBHCs are a partnership between the community, the school, and a health care sponsor, which can be a community clinic or health care system, hospital, public health department, or tribal program. SBHCs serve all students in the school, regardless of insurance status or ability to pay. Some may also serve other students in the district, students' families, school staff, and other community members. Most SBHC sponsors bill both Medicaid and private insurance for services. There are more than 50 SBHCs in Washington.

More information: <https://wasbha.org/>

## Cross-Agency Collaboration

### ESD Behavioral Health Navigators

[Second Substitute House Bill \(2SHB\) 1216 \(2019–20\)](#) funded Behavioral Health Coordinator/Navigator (BHN) positions in all nine of Washington's Educational Service Districts (ESDs) to provide a network of support for school districts to develop and implement comprehensive suicide prevention and behavioral health supports for students.

For more information about the program and current BHN contact information: [Youth Suicide Prevention, Intervention, & Postvention | OSPI \(www.k12.wa.us\)](#)

### Medicaid School-Based Behavioral Health Services and Billing Toolkit

As a result of the recommendations outlined in the 2021 [SAO K-12 Student Behavioral Health Performance Audit](#), HCA created the *Medicaid School-Based Behavioral Health Services and Billing Toolkit* which is scheduled to be available to ESDs/school districts in late May 2022. The purpose of the toolkit is to provide guidance on how ESDs and school districts can access Medicaid funding for school-based health services (including behavioral health services) through the Medicaid managed care organizations as well as through fee-for-service programs. The toolkit also provides behavioral health resources and supports, directions on how to become a behavioral health agency, and best practices for billing Medicaid.

### Healthy Students, Promising Futures

In January 2017, HCA and OSPI established the Washington State Healthy Students, Promising Futures (HSPF) state team. The team was formed after HCA and OSPI attended the National HSPF Learning Collaborative along with 14 other states in 2016. The state team includes representatives from OSPI, HCA, DOH, the Department of Children, Youth, and Families (DCYF), the School-Based Health Alliance, and Kaiser Permanente Thriving Schools. The team attends the national forum biannually and meets quarterly. The goals of the HSPF state team include expanding access to school-based health services through the SBHS and MAC programs, the MCOs, and SBHCs. The goal of the National HSPF Learning Collaborative supports states and school districts in increasing access to school health services.

More information: <https://healthyschoolscampaign.org/programs/healthy-students-promising-futures/>

### Children and Youth Behavioral Health Work Group

The Children and Youth Behavioral Health Work Group (CYBHWG) provides recommendations to the Legislature to improve behavioral health services and strategies for children, youth, young adults, and their families. The group includes representatives from the Legislature, state agencies, health care providers, tribal governments, community health services, and other organizations, as well as parents of children and youth who have received services. HCA's Assistant Director for Behavioral Health and Recovery, Dr. Keri Waterland, is co-chair, along with Representative Lisa Callan.

More information: <https://www.hca.wa.gov/about-hca/behavioral-health-recovery/children-and-youth-behavioral-health-work-group-cybhgw>

## HCA funded budget requests to improve mental health and substance use services for children, youth, and young adults

### 1. CCBHC Model (supports recommendations from the CYBHWG)

*FY 2023: \$300,000 General Funds-State (GF-S) (One-time) / \$300,000 General Fund-Medicaid (GF-F) (One-Time)*

Funding is provided on a one-time basis for the Health Care Authority to explore the development and implementation of a sustainable, alternative payment model for comprehensive community behavioral health services including examination of the Certified Community Behavioral Health Clinic model, which provides for an enhanced Medicaid reimbursement rate based on anticipated costs of expanding services to meet the needs of complex populations.

### 2. Youth Crisis Stabilization (supports recommendations from the CYBHWG)

*FY 2023: \$48,000 General Funds-State (GF-S) (Custom) / \$49,000 General Fund-Medicaid (GF-F) (Custom)*

Funding is assumed in the outlook for 32 beds and agency administration at the Health Care Authority to create a short-term Residential Crisis Stabilization Program (RCSP) for youth with severe behavioral health diagnoses. The outlook assumes operating funds for the 32 beds effective July 1, 2024.

### 3. Children's Long-Term Inpatient Program (CLIP) (supports recommendations from the CYBHWG)

*2021-2023: \$6,296,000 General Funds-State (GF-S) (FY22 \$1,193,000/FY23 \$5,103,000) (Custom) / \$6,296,000 General Fund-Medicaid (GF-F) (FY22 \$1,193,000/FY23 \$5,103,000) (Custom)*

Funding is provided to increase the number of Children's Long-term Inpatient Program (CLIP) beds and the rates for CLIP providers. The number of beds is phased up from the current funded level of 37 to 62 by the end of FY 2022 and 72 by the end of FY 2023. The outlook assumes a level of 83 beds by the end of FY 2024. Funding is also provided for a 4.5 percent rate increase for CLIP providers in January 2023 and for administrative support for the program.

### 4. School-based Health Care Services (SBHS)

*FY 2023: \$4,359,000 General Funds-State (GF-S) (Custom) / FY 2023: \$208,000 (Custom)*

Funding is provided to support school-based health services by removing the financial contribution requirement for school districts who participate in the SBHS Program. General Fund-Local expenditure authority is shifted to General Fund-State.

### 5. Outreach/Intensive Case Management

*FY 2023: \$2,000,000 General Funds-State (GF-S)(Ongoing)*

Funding is provided for Recovery Navigator Program services established in Chapter 311, Laws of 2021 (ESB 5476). Of the amounts provided, the Health Care Authority must allocate \$2 million to Recovery Navigator Program services in King, Pierce, and Snohomish counties. The remaining \$3 million must be allocated to all ten regions proportionate to their current allocation of Recovery Navigator Program funds.

### 6. Periodic Screening

*FY 2023: \$272,000 General Funds-State (GF-S) (Custom) / \$149,000 General Fund-Medicaid (GF-F)(Custom)*

Funding is provided beginning January 1, 2023 to update the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) schedule for health care services for Medicaid-enrolled children under age 21. The new schedule will align with the Bright Futures guidelines, or a comparable EPSDT schedule.