Leveraging Medicaid to Expand Health Services in Schools:

An Update from the Healthy Students, Promising Futures State Learning Collaborative

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Driving Policy Factors

Increased interest in delivering health services in schools:

- Free care policy reversal (and Medicaid in general)
- Every Student Succeeds Act
- Population health
- Managed care and value-based care

Schools are where children spend most of their days!



Background on Medicaid in Schools

Lena O'Rourke, on behalf of Healthy Schools Campaign

Background on Medicaid in Schools

A recent change in federal policy presents a new opportunity to expand school-based services under Medicaid.

Prior to 2014, Medicaid payment was not permitted for services provided at no cost to other students. Medicaid was only permitted in limited circumstances including:

- Students with Individualized Education Plans (IEP)
- Individualized Family Service Plans (IFSP)
- Maternal and Child Health Block Grant

Free Care Policy Reversal

In 2014, CMS reversed long-standing policy and gave states the option to obtain federal Medicaid reimbursement for services provides to all Medicaid-enrolled students in schools

The "free care policy"

According to CMS guidance, states districts can be reimbursed for Medicaid services if the following conditions are met:

- The student is enrolled in Medicaid
- The services provided are covered by the state plan;
- Services are delivered by a qualified provider (as outlined in the Medicaid state plan)
- States have appropriate billing mechanisms in place; other oversight, documentation rules, and other requirements are met

The "Free Care" Springboard

Opens the door for partnerships between Medicaid and Education to implement innovative new strategies including:

- Increase funding for school-based health services
- Potentially provide additional resources for care and services
- Expand health care workforce and provider types

Encourages new thinking around how schools, state Medicaid and education agencies and health care entities can work together to improve student academic and health outcomes

State Planning Process

To increase delivery of Medicaid services in schools, states will:

- Assess student needs and capacity for services in schools for all Medicaidenrolled students
- Review their state plan to determine if they need to submit a state plan amendment
- Consider the best mechanisms for expanding access to services for Medicaid-enrolled students
- Explore opportunities exist to increase access to services, to test delivery models, or to pilot new ideas

Louisiana and "Free Care"

In 2011, Louisiana transitioned to Medicaid managed care

 Allowed school nurses to provide services to Medicaid beneficiaries with an IEP

With the reversal of the free care policy, Louisiana now allows school nurses to be reimbursed for services provided to all Medicaid-enrolled students.

California State Plan Amendment (SPA)

California submitted a SPA on the free care policy in September 2015.

Key components include permitting Medicaid billing for:

- All Medicaid (known as Medi-Cal) enrolled students
- New assessment and treatment services
- New practitioners
- Pending CMS approval



Healthy Students, Promising Futures Learning Collaborative Joaquin Tamayo, U.S. Department of Education

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- U.S. Department of Education (ED)
- U.S. Department of Health and Human Services (HHS)

With support from Healthy Schools Campaign (HSC) and Trust for America's Health (TFAH)

13 Participating States

California

Colorado

District of Columbia

Massachusetts

Minnesota

Mississippi

New Jersey

New York

Ohio

South Carolina

Tennessee

Virginia

Washington

Learning Collaborative Goals

Increase access to school-based health services through:

- Developing and implementing state vision and strategies to scale up school-based Medicaid services
- Identifying and assessing the options for delivering health services in schools (school nurses, partnerships with providers such as hospitals, health centers, school-based health centers, mobile health, telehealth)
- Addressing barriers and leveraging new opportunities, including through ESSA
- Receiving technical assistance on delivery models, Medicaid reimbursement and policy opportunities from federal policymakers and national and state organizations
- Assessing opportunities for innovative partnerships

Work Plan

In-person meetings of state teams with federal partners and national organizations

- July 27, 2016: Kick-off convening
- Dec. 2, 2016: State progress convening and addition of new states

Regular State Team check-in calls with federal partners, HSC and TFAH

Develop ongoing cross-agency communications at the state and local level

Technical assistance and support from national partners on an ongoing, asneeded basis

Success to Date

State ED and Medicaid agencies are committed to advancing school health services

- 10 states self-funded participation in July meeting on short notice
- Three additional states joined the December convening, in addition to nine of the 10 original state
- Eagerness to participate in on-going check-in calls and debriefs
- State-level conversations and on-going work continued past the in-person meeting
- States are identifying key policy goals and making plans to accomplish them



Early Lessons Learned

Anne De Biasi, Trust for America's Health

Early Findings

There are common themes about state team work:

- Federal policy support
- Building partnerships and cross-agency teams
- Assessing unmet student need
- Identifying innovative strategies

Building Partnerships and Cross-Agency Teams

States are engaged in:

- Building partnerships to improve access to health services in schools
- Improving state-level communication across departments
- Developing shared vision and policy goals
- Identifying elements of a total, cross-agency budget
- Identifying funding sources to seed delivery models

Federal Policy Support

State teams are:

- Learning about the models for providing Medicaid services in schools
- Untangling CMS guidance on the free care policy reversal
- Analyzing existing state plans to determine if a SPA is needed
- Seeking clarification on billing and reimbursement methodologies
- Working to develop SPAs and/or other policies for federal approval
- Exploring opportunities to leverage ESSA to improve student health

Assessing Need & Data Collection

States are reviewing sources of data to:

- Better understand the range of services already being provided in schools
- Assess unmet student need
- Assess opportunities to support Medicaid quality and access goals
- Identify a menu of needed services and workforce/delivery models

Challenges exist to collecting data and to sharing data between agencies.

Identifying Innovative Strategies

Schools are considering a range of delivery and reimbursement models. Teams are considering:

- The role and opportunities of managed care
- Delivery models including school nurses and other SISP, relationships with providers such as hospitals and health centers, school-based centers
- Identifying innovative models for expanding capacity such as telehealth
- How to serve specific student populations or students with high health care needs that impact learning

Get Involved!

- Connect with ongoing efforts across the state
- Educate and advocate for state action.
- Foster relationships between Medicaid and ED
- Provide technical assistance to policymakers and state teams
- Supporting data collection efforts
- Develop resources and advocacy materials
- Providing training on partnership development



Questions?



Contact

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