



Health Justice Opportunity 2020: Expanding Medicaid Reimbursement in Schools Call to Action!

- 1. Background: Understanding the history of why Medicaid reimbursements in schools were originally limited to a small subset of students, and why this limitation can and should now be lifted.**

School-based health services (also referred to as “SBHS”) help support the health of school aged children and reduce health disparities by providing services to school children where they are. Like all health services, SBHCs must be funded. Medicaid, which funds the health care coverage of 40% of Florida’s children, should be a top source of funding. Yet currently, the Florida Medicaid program only pays for SBHS for a small subset of school children: students with disabilities with an individualized Education Plan (IEP).

This limitation on Medicaid dollars to support student health was created to comply with an old federal policy. But while the federal policy has since changed, allowing Medicaid reimbursement for school-based health and related services provided to *all* Medicaid-enrolled students, Florida law has failed to keep up. As a result, FL schools are losing out on critical Medicaid dollars that could support essential health services for all Medicaid eligible children. In turn, students lack access to a full range of services that can be provided in school. The ***Florida legislature must amend the state law*** to allow Medicaid reimbursement of school-based health services for ***all children*** who are covered by Medicaid.

- 2. Impact on the community: Why school-based health services are important for low-income Miami-Dade county residents, and how broad Medicaid coverage helps make these services available.**

How do school-based health services improve student health?

Healthy students do better in school, and students who use school-based health centers have better outcomes. Improved outcomes include: greater satisfaction with health, more physical activity, eating healthier food, improved attendance and academic achievement and receipt of more preventive care. School-based health services also result in fewer distractions in classrooms, more appropriate use of medical services, and important support for low-wage working families.

School health services are critical in large part because they reach students who otherwise would get none. Approximately 75-80% of children and youth who need mental health services, for instance, don’t get them. And students of color, students from low-income backgrounds, and students with disabilities are even less likely to receive the services they need. But when schools do offer critical health services, students use them. For example, of those students who receive mental health services, 70-80% receive them in school. Studies show that students are 21 times more likely to seek mental health services in school-based health centers than in community-based centers.

How big is the impact of school-based healthcare, and does the supply meet the demand?

School-based health services meet students where they are, allowing for unparalleled access to care. Across the state, in FY 2017, there were 15.4 million school health room visits, and 4.7 million medication doses administered in school health rooms. But schools are unable to keep up with the demand for healthcare services. Chronic health conditions, including asthma, diabetes, and ADD/ADHD, are on the rise in public school students, and school health staffing is not keeping pace. In fact, between 2005 and 2015, while reported student health conditions rose by 69%, the number of registered nurses (RNs) providing school health services in Florida rose by only 16%. This means Florida is failing to keep pace not just with the need, but also with best practices: the American Academy of Pediatrics recommends that every school have its own RN, yet Florida has only about 1,300 RNs for over 4,170 public schools, leaving more than two-thirds of schools without a nurse.

3. Given the importance of school-based health services and the overwhelming need for these services, what can be done to expand services?

Health services in schools rely on funding. One key funding source is reimbursements by health insurers for services provided. Medicaid, the public health insurance program funded with state and federal dollars, currently covers 1.3 million of Florida's school-aged children. In fact, in nearly fifty school districts across the state, 40% of students are covered by Medicaid. If Florida's school-based health centers were able to bill Medicaid for services provided to *all* students covered by Medicaid, the growth in income would allow for expanded health services (both in scale and scope), and in turn improved health outcomes. This can be done with a simple fix to state law. The FL legislature must change state law so that Medicaid can reimburse schools for services provided to *all Medicaid-enrolled students*, not just students with disabilities with Individualized Education Plans (IEPs).

4. How can local community members move this forward?:

The 2020 Legislative Session began on January 14 and is expected to end on March 14. Only one month remains in which to reach out to legislators on this issue.

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