

# Provider Billing for Behavioral Health Services Within Medicaid School-Based Services

Thursday, April 25, 2024

3 p.m. to 4 p.m. ET | 2 p.m. to 3 p.m. CT | 12 p.m. to 1 p.m. PT



CMS Financial Management Group (FMG)  
7500 Security Boulevard  
Baltimore, MD 21244

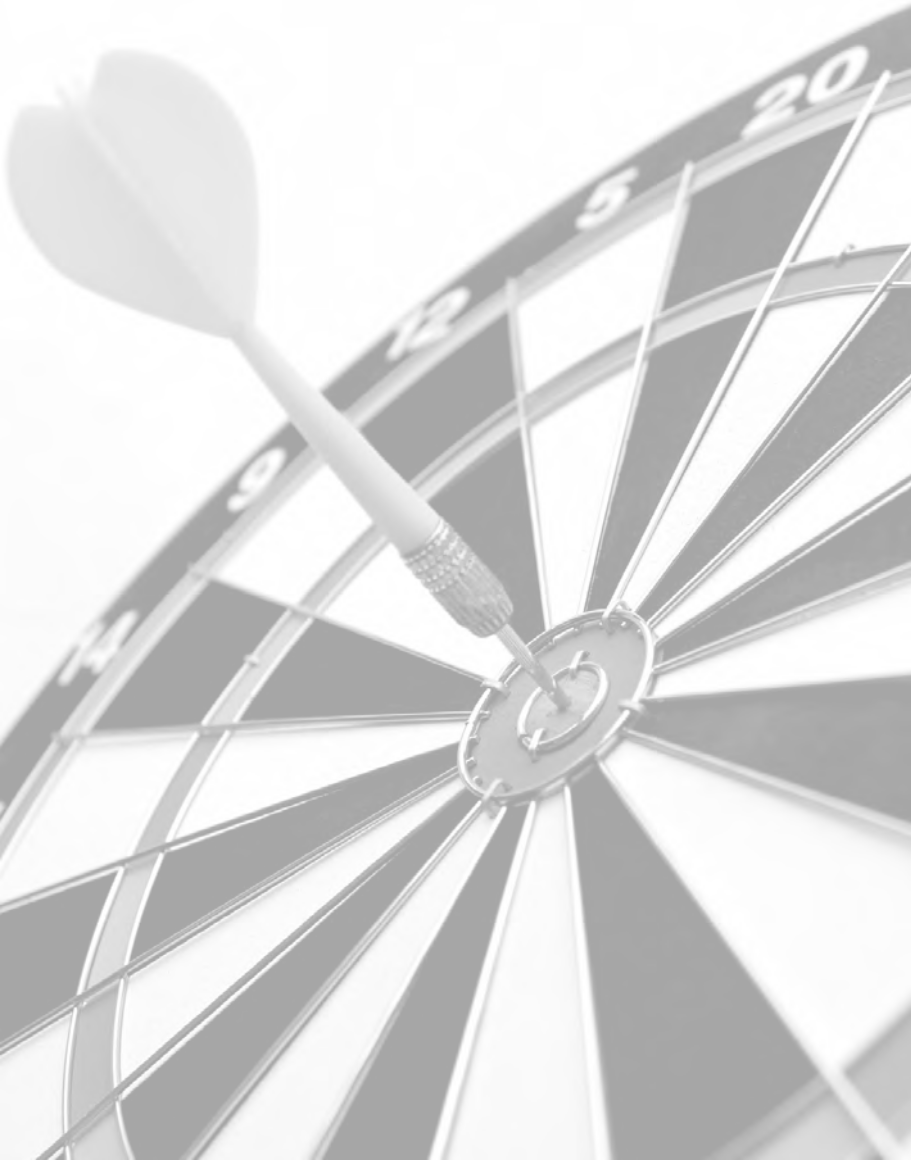


Econometrica, Inc.  
7475 Wisconsin Avenue, Suite 1000  
Bethesda, MD 20814

# Agenda

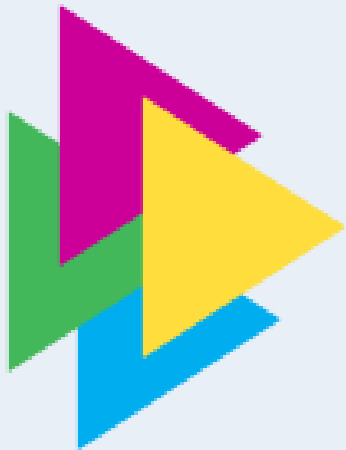
- › Welcome
- › Overview of Comprehensive School Mental Health Systems
- › How Medicaid and ED Sources Help to Fund Mental Health Services in Schools
- › State Variation for Billing Medicaid for Mental Health Providers/Services
- › Role of State Medicaid Agencies (SMAs) and State Education Agencies (SEAs) to Support Billing
- › State Panel: Minnesota, Michigan, and Colorado
- › Questions, Conclusion, and Adjournment

# Learning Objectives



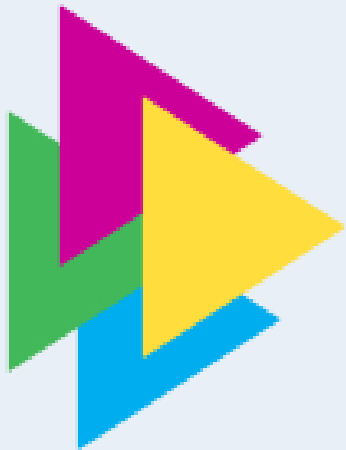
- › By the end of this webinar, you should be able to:
  - › Explain how mental health services are provided in schools.
  - › Describe how Federal funding sources can help to fund mental health services in schools.
  - › Discuss variation in provider and service types.
  - › Describe the role of SMAs and SEAs in supporting billing for behavioral health services.

# The Bipartisan Safer Communities Act



- On June 25, 2022, President Biden signed into law the Bipartisan Safer Communities Act (BSCA).
- Title 34, Subtitle B, Chapter 3 includes a directive to CMS to provide additional guidance to States on Medicaid SBS to:
  - Increase access to Medicaid-funded school-based health services, including mental health services.
  - Reduce administrative burden.
  - Support Federal compliance with IDEA requirements, billing, and payment.
  - Ensure ongoing coordination and collaboration between the U.S. Department of Health and Human Services and the U.S. Department of Education (ED).
  - Provide information to SEAs and LEAs on how to utilize funding to ensure payment under Medicaid for assistance provided in SBS.

# The Bipartisan Safer Communities Act (cont.)



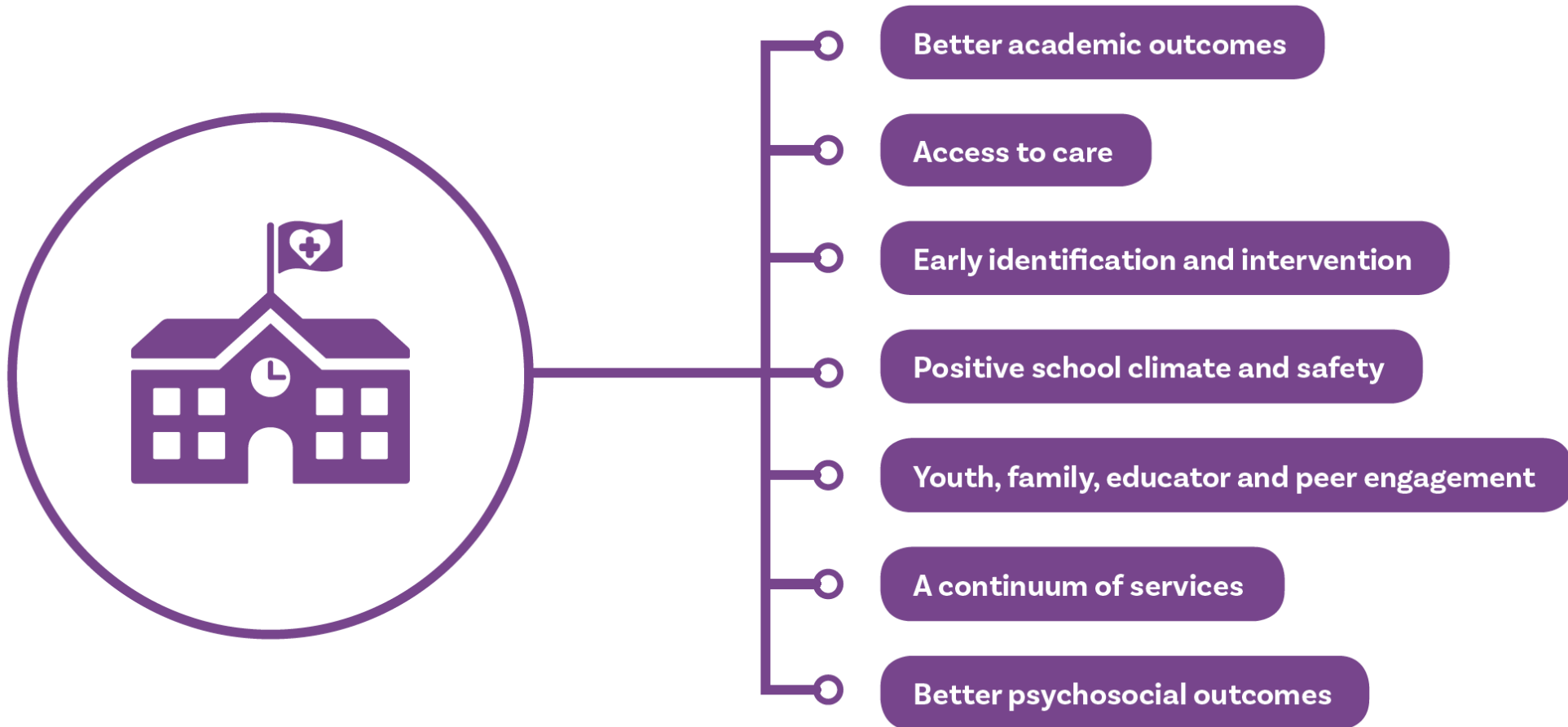
- For Medicaid SBS, BSCA specifically addresses:
  - Establishing responsibility for interagency coordination between State agencies.
  - Providing SMAs and SEAs with technical assistance necessary for them to access Medicaid to provide SBS.
  - Identification of the requirements that may be met through State statute or regulation, signed agreements, or other appropriate written methods.

# **Overview of Comprehensive School Mental Health Systems**

# Schools are a Primary Provider of Mental Health Services

***Schools are the most common location for youth to receive mental health services when compared with other locations (e.g., outpatient settings, primary care, inpatient, child welfare, and juvenile justice).***

# Why Mental Health Treatment in Schools?





# Comprehensive School Mental Health Systems (CSMHS) Definition

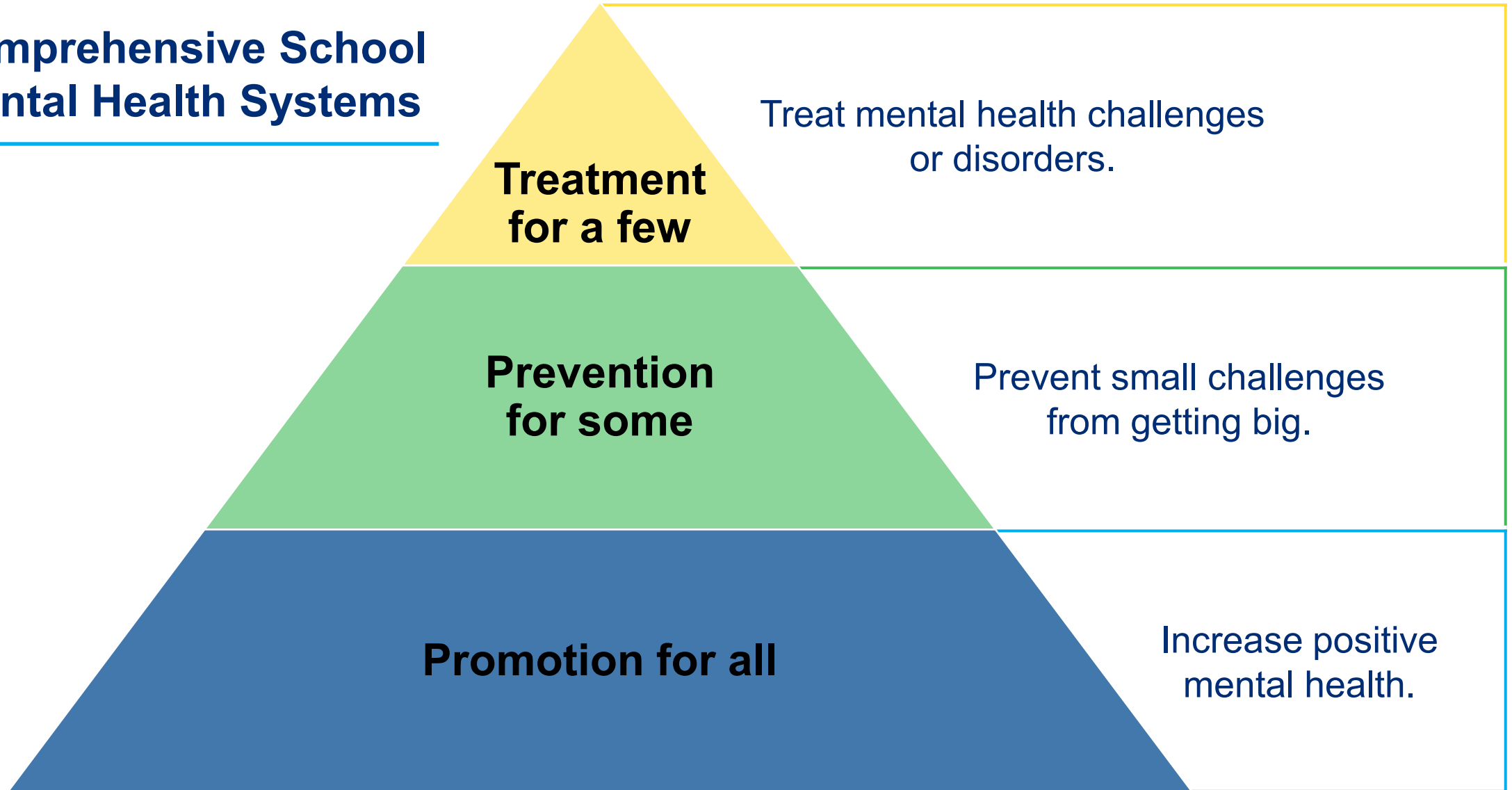
- **Provide a full array of tiered supports and services** that promote a positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness and substance use.
- **Are built on a strong foundation of district and school professionals**, including administrators, educators, and specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses, and other school health professionals), **in strategic collaboration with students, families, and community health and mental health partners.**
- **Assess and address the social, political, and environmental structures**, including public policies and social norms, that influence mental health outcomes.

# Core Features of Comprehensive School Mental Health Systems

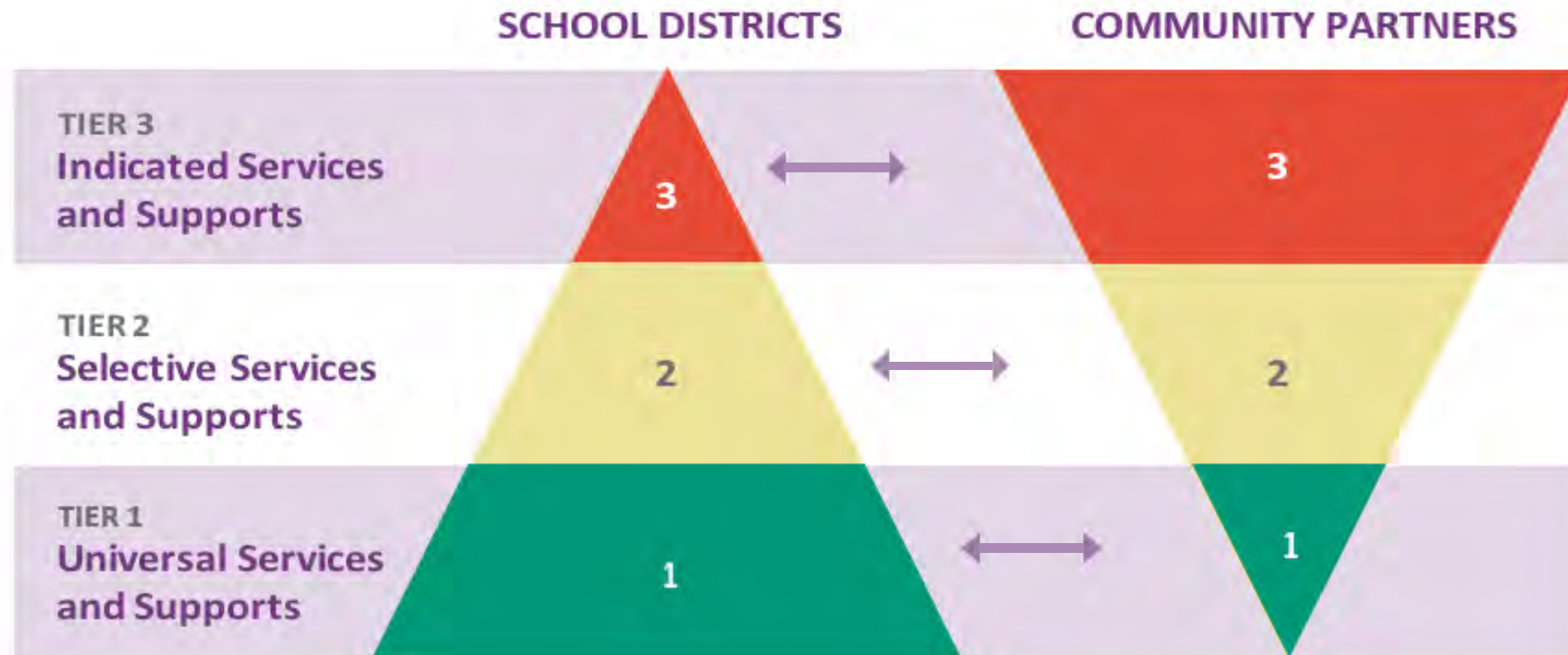


# Multi-Tiered System of Supports

## Comprehensive School Mental Health Systems



# Collaboration Between School and Community Providers



# School-Community Partnerships to Support School Mental Health

## School-Employed

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### Specialized instructional support personnel

- School psychologists, school social workers, school counselors, school nurses, and other school health professionals

### Clinical social worker, psychologist, or counselor

### Educator/administrator partners

- Principals, deans, attendance officers, and teachers

## Community-Employed\*

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### Licensed mental health professional

- Clinical social worker, psychologist, or counselor

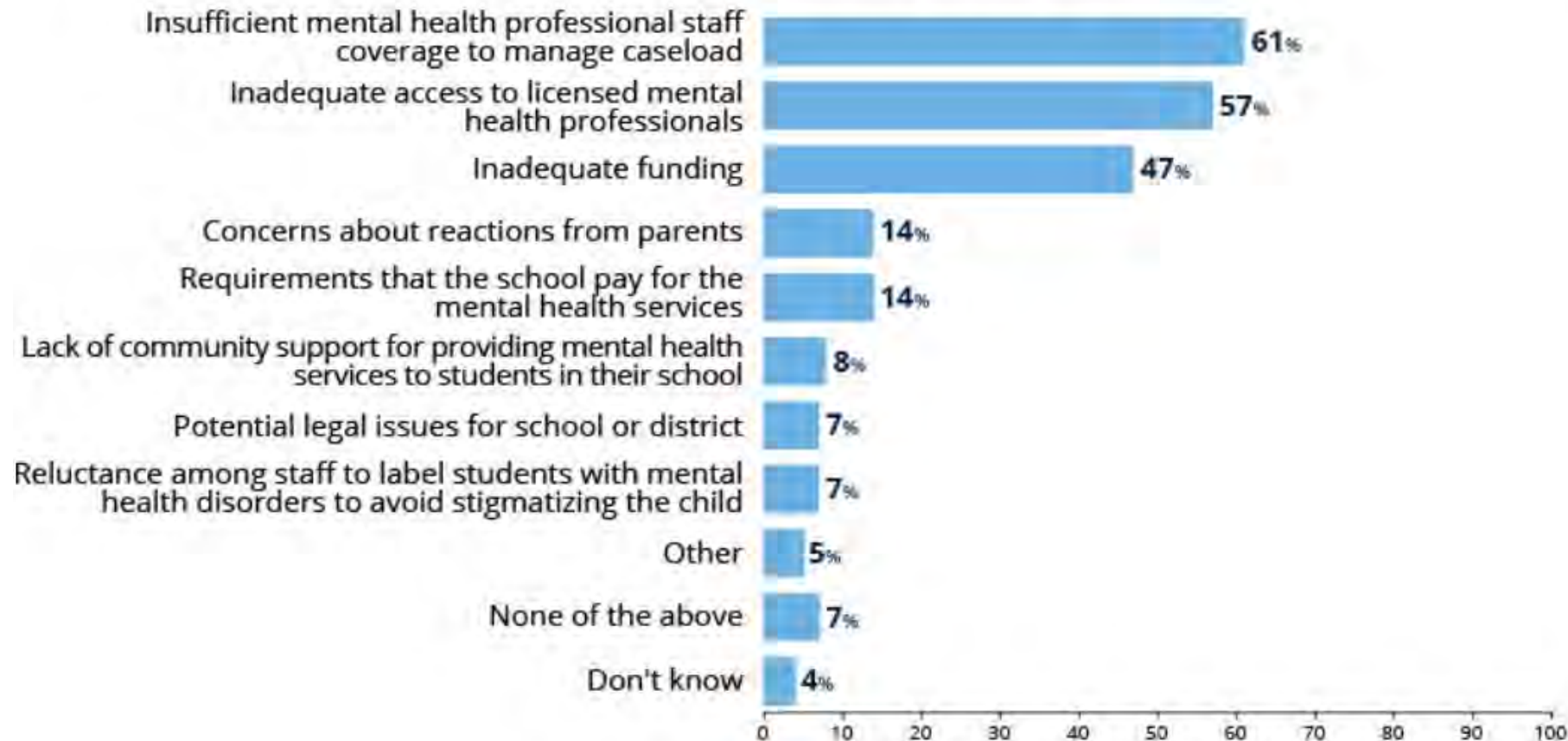
### Primary care provider

- Pediatrician, nurse practitioner, or physician assistant

\*May provide services within the school setting.

# School Mental Health Staff Shortages

Of those public schools that did not strongly agree that their school could effectively provide mental health services to all students in need, factors that limit their schools' efforts to effectively provide such services:





# Strategies to Address School Mental Health Staff Shortages

- Apply for Federal grant programs that aim to increase school mental health providers.
- Support provider wellbeing.
- Additional strategies in the Guide:
  - Improve the ratios of school counselors, school social workers, and school psychologists.
  - Increase the school mental health workforce pipeline.
  - Implement school telehealth programs.
  - Facilitate partnerships with community providers.

## Resource Guide on State Strategies

hopeful  
futures  
campaign

STATE LEGISLATIVE GUIDE FOR  
SCHOOL MENTAL HEALTH

..... AUGUST 2022



# Previous Medicaid SBS TAC Event

- View recording, meeting materials, and meeting handout from Virtual Meeting on Comprehensive School Mental Health Systems.
- Available on the Medicaid and School-Based Services Technical Assistance Center (TAC) web page under “Past Events.”

**Medicaid.gov**  
Keeping America Healthy

Q [FAQs](#)

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**Medicaid and School Based Services**

Technical Assistance Materials

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**Technical Assistance Center (TAC)**

Upcoming Events

**Past Events**

US Department of Education and School-Based Services

## Past Events

### Virtual Meeting: Comprehensive School Mental Health Systems

On November 15th, 2023, the National Center for School Mental Health (NCSMH) provided an overview of comprehensive school mental health systems (CSMHs). CSMHs provide a full array of tiered supports and services that promote a positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness and substance use. CSMHs are built on a strong foundation of district and school professionals, including administrators and educators, specialized instructional support personnel, in strategic collaboration with students, families, and community health and mental health partners. Attendees learned about these systems, best practices, and key resources. The session also featured a panel of speakers from Massachusetts, who discussed their efforts to leverage Medicaid to support student mental health.

A recording of the webinar, presentation slides, and summary handout are available below. Please direct any questions related to the webinar or guidance to the SBS mailbox at [SchoolBasedServices@cms.hhs.gov](mailto:SchoolBasedServices@cms.hhs.gov) .

**Downloads**

[Comprehensive School Mental Health Systems Virtual Meeting Recording](#) ↗

[Comprehensive School Mental Health Systems Virtual Meeting Slides](#)

[Comprehensive School Mental Health Systems Virtual Meeting Handout](#)



# **How Medicaid and ED Sources Help to Fund Mental Health Services in Schools**

# CMS Mental Health and Substance Use Disorder Action Plan

- **Written with the intention of improving access to high-quality mental health (MH) and substance use disorder (SUD) treatment is among the CMS' highest priorities.**
- **Overarching goals:**
  - Increase access to prevention and treatment.
  - Improve engagement in care.
  - Enhance quality of care.
- **Role of schools in meeting goals:**
  - Support access through additional settings and services.
  - Encourage engagement in MH and SUD treatment.
  - Reduce the stigma associated with MH and SUD challenges.



## Center for Medicaid & CHIP Services Mental Health and Substance Use Disorder Action Plan



### Introduction

As the largest single source of funding for mental health (MH) and substance use disorder (SUD) treatment and support services,<sup>1</sup> Medicaid, along with the Children's Health Insurance Program (CHIP), underpins the delivery of care for MH conditions and SUDs across the United States and provides critical support for millions of people with these conditions. Improving access to high quality MH and SUD treatment is among the Centers for Medicare & Medicaid Services' (CMS) highest priorities and is integral to the Center for Medicaid and CHIP Services' (CMCS) partnership with states to provide high quality health care coverage to over 90 million individuals. CMCS also collaborates closely with other federal agencies, particularly the Substance Abuse and Mental Health Services Administration (SAMHSA), to improve the quality and availability of MH and SUD services for Medicaid and CHIP enrollees.

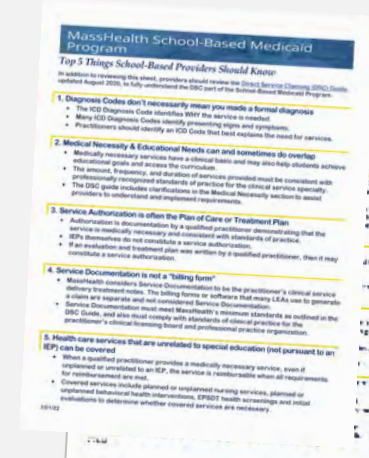
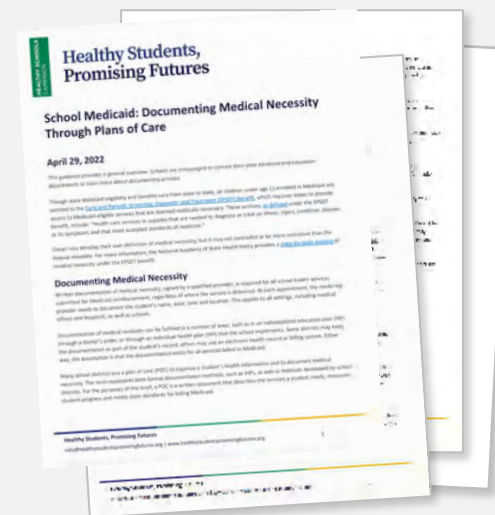
Medicaid and CHIP can provide coverage for a full array of services and supports for people with MH conditions and SUDs, including services and supports that generally are not covered by other health care programs or plans. Providing the full array of services and supports is particularly critical for individuals with more serious MH conditions and/or SUDs as they are more likely to be enrolled in Medicaid and CHIP.<sup>2</sup> In addition, special protections incorporated into Medicaid and CHIP, including the mandatory Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit in Medicaid, provide assurance that enrollees struggling with serious MH conditions or SUDs have coverage for the care they need.

As highlighted in a recent CMCS Informational Bulletin "[Leveraging Medicaid, CHIP, and Other Federal Programs in the Delivery of Behavioral Health Services for Children and Youth](#)", the mandatory EPSDT benefit requires coverage of all medically necessary care for children and adolescents under the age of 21 enrolled in Medicaid, including coverage of prevention, screening, assessment, and treatment services for MH conditions and SUDs. This clarification is critically important since MH and SUD conditions are among the most prevalent health conditions affecting children,<sup>3</sup> and Medicaid and CHIP provide health care coverage for about half of the children and adolescents in the U.S.<sup>4</sup>

In addition, the Mental Health Parity and Addiction Equity Act (MHPAEA) requirements that apply to Medicaid and CHIP coverage have helped improve access to MH and SUD treatment among individuals at higher risk of these conditions. Under the Affordable Care Act (ACA), for example, MHPAEA requirements were extended to the alternative benefit plans for Medicaid expansions that have significantly increased access to MH and SUD treatment among low-income adults in states that have expanded coverage to this group.<sup>5</sup> The MHPAEA requirements are a critical element of those Medicaid expansions since individuals covered are at heightened risk of MH conditions and SUDs.

# Medicaid SBS

- Providing Medicaid-covered services to correct or ameliorate physical or mental health conditions to a student(s) enrolled in Medicaid and otherwise coverable in 1905(a) of the Social Security Act.
- Services must be medically necessary as defined by the State.
  - “Health care services or supplies that are needed to diagnose or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine.”
    - [Plans of Care Policy Brief \[PDF\] \(healthystudentspromisingfutures.org\)](#)
  - [MassHealth School-Based Medicaid Program \(mass.gov\)](#)
- Can be delivered to an individual or group; must be performed in the presence of the student(s).
- Services must be coverable services under 1905(a) of the Social Security Act. Schools should work with the State to determine the specific services that are covered in the State.
- Services are provided by a qualified Medicaid provider.



# ED Funding Sources to Support School Mental Health

- **Title I Funds:**
  - Integrated services, counseling, school-based mental health programs, specialized instructional support services, mentoring services, and other strategies to improve students' skills outside the academic subject areas
- **Title II, Part A Funds (Supporting Effective Instruction):**
  - Training for school personnel for supporting students with mental health challenges, using appropriate referral mechanisms, developing partnerships between school-based mental health programs and community providers
- **Title IV Part A Funds (Student Support and Academic Enrichment Grants):**
  - Activities that foster safe, healthy, supportive, and drug-free environments that support academic achievement (e.g., professional development and training, school-based mental health services, school-based mental health partnership programs)
- **Bipartisan Safer Communities Act:**
  - E.g., School-Based Mental Health Services Grant, Mental Health Service Professional Demonstration Grant Program
- **Individuals with Disabilities Education Act (IDEA):**
  - E.g., Behavioral evaluations, services, and supports

# BSCA Department of Education Grant Funds

## School-Based Mental Health Services Grant

- Grants to SEAs, LEAs, and consortia of LEAs to increase the number of credentialed school-based mental health services providers
- **Goals:** Increase recruitment and retention of providers; promote respecialization and retraining; increase diversity and cultural and linguistic competency of providers
- **Application closes** April 30, 2024
- [Link to Apply](#)

## Mental Health Service Professional Demonstration Grant

- Grants to support and demonstrate innovative partnerships to train school-based mental health service providers
- **Goal:** Increase the number and diversity of high-quality, trained providers
- **Application closes** May 15, 2024
- [Link to Apply](#)



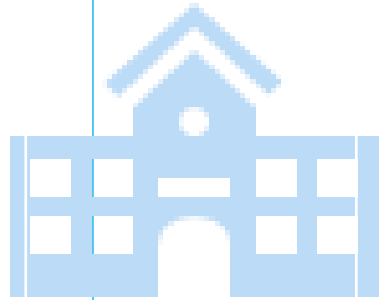
# Raise the Bar for Children's Mental Health: Strategies to Sustain Innovation & Access to School-based Services

Convening of State and local government leaders to discuss investing in building schools' capacity to support student mental health



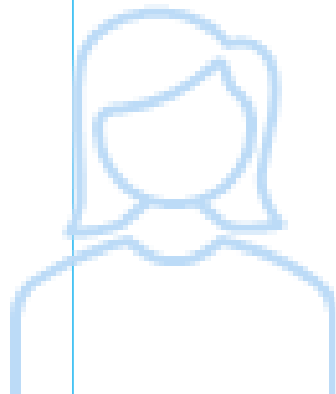
**Variation in State Requirements for  
School-Employed Mental Health  
Providers and Medicaid Billing**

# Mental Health Services and Provider Examples



## Examples of Potentially Eligible School Mental Health Services

- Psychological Assessments
- Psychosocial Assessments
- Individual Counseling
- Group Counseling
- Case Management
- Substance Use Disorder Counseling
- Crisis Intervention Services



## Examples of Potentially Eligible School Mental Health Providers


- Psychologist
- School Psychologist
- Licensed Professional Counselor
- School Counselor
- Clinical Social Worker
- School Social Worker
- Marriage and Family Therapist



# Where to Find Information on State Variation

- A State Medicaid agency can establish provider qualifications for school-based providers that differ from the qualifications for non-school-based providers of the same Medicaid services, as long as the State's provider qualifications are not unique to Medicaid-covered services.
- School Medicaid Fact Sheets from the Healthy Schools Campaign's initiative, Healthy Students, Promising Futures
  - Identify behavioral health services and providers eligible for Medicaid reimbursement.
  - Provide a snapshot for all States.
- State Medicaid Plans provide further details.

## Example State Fact Sheet: Oregon



**Healthy Students,  
Promising Futures**

**Oregon School Medicaid Snapshot**

Visit [Free Care Reversal State Activity Brief](#) for the latest state updates.

**Expansion of School Medicaid Program**

Oregon is in the [process of expanding](#) its school Medicaid program to include medically necessary services delivered outside of an IEP or IFSP.

**Coverage & Billing**

Oregon covers the following school-based health services:

- Evaluations
- Audiology
- Nurse Services
- Occupational Therapy
- Physical Therapy
- Speech Therapy
- Social Work and Psychological Services
- Transportation
- Targeted Case Management

**Eligibility:** Medicaid-eligible children under age 21 for covered medically necessary services provided pursuant to an IEP.

**Billing:** The billing providers are the Local Education Agencies (LEAs), including schools and educational service districts (but not school clinics) that enroll with Medicaid. It seems that rendering practitioners do not need to enroll in Medicaid. School-based services are not included in the managed care contract.

# **Role of SMAs and SEAs to Support Billing**

# Opportunities for Medicaid SBS and School Mental Health

- Expand and sustain school mental health supports and services.

Leverage funding from Federal grants (e.g., School-Based Mental Health Services Grant Program, Mental Health Service Professional Demonstration Grant Program) to expand the number of providers who could ultimately bill Medicaid for services.

- Expand provider eligibility for Medicaid reimbursement.

- Expand types of services offered in schools.

- Assess for alignment between providers/services coverage within the State and Medicaid eligibility.

# Examples of SEA and SMA Behavioral Health Billing Training and Technical Assistance Strategies

- ✓ District training on seeking and maximizing Medicaid reimbursement.
- ✓ SEA/SHS partnerships to provide biannual forums, differentiated training and technical assistance (101 and more advanced training), SharePoint for all districts, and individualized district mentorship.
- ✓ State workforce to identify barriers and elevate exemplars.
- ✓ Joint SEA/SMA presentations to small, rural school districts seeking to bill Medicaid.
- ✓ School health services stakeholder forum for providers and other stakeholders to share ideas, resources, and information.
- ✓ State/regional office that works with districts to provide support and common billing codes.
- ✓ Multi-district coordination for shared administrative support.

# Panel Discussion

# Today's Panelists

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**Scott Hutchins**

School Mental Health and  
Medicaid Consultant, Michigan  
Department of Education



**Julie Neururer**

Interagency Services Specialist,  
Minnesota Department of Education



**Olga Gintchin**

Program Administrator, Colorado  
Department of Health Care Policy  
& Financing



**Omar Estrada**

School Health Services Consultant,  
Colorado Department of Education

**Scott Hutchins**  
**Supervisor, School Behavioral Health Unit**  
**Michigan Department of Education**





**Core Features of a  
Comprehensive  
School Mental  
Health System  
\*National Center  
for School Mental  
Health (NCSMH)**

Infographic from [Advancing CSMHS: Guidance from the Field, Sept 2019](#)



**Well-Trained  
Educators and  
Specialized  
Instructional  
Support Personnel**



**Mental Health  
Screening**



**Family-School-  
Community  
Collaboration  
and Teaming**



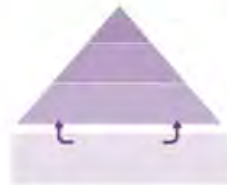
**Evidence-Based  
and Emerging  
Best Practices**



**Needs Assessment  
and Resource  
Mapping**



**Data**



**Multi-Tiered  
System  
of Support**



**Funding**

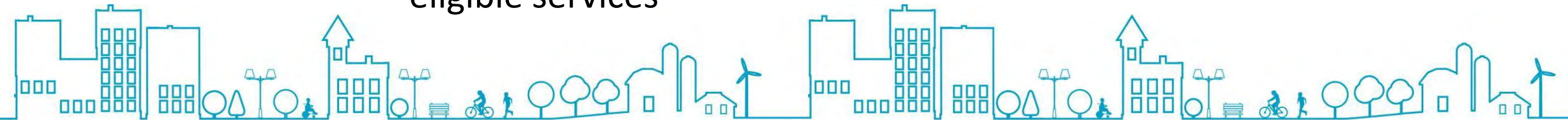




## State School Aid Act Funding + Medicaid Expansion



- \$30 million, or roughly \$20 per student, was added to the State School Aid Act in Fiscal Year 2018–19
- Amended our Medicaid State Plan at the same time
- Since that first year of funding, we have continued to see significant investments in school mental health funds from our legislators and governor
- 31n funds require providers to bill Medicaid for eligible services



## Mental Health Funding in State School Aid

Fiscal Year	Recurring	Non-Recurring
FY18	\$0	\$0
FY19	\$31.8m	\$0
FY20	\$31.8m	\$0
FY21	\$46.3m	\$0
FY22	\$54.4m	\$125.4m
FY23	\$79.4m	\$282.5m
FY24	\$112.8m	\$343m



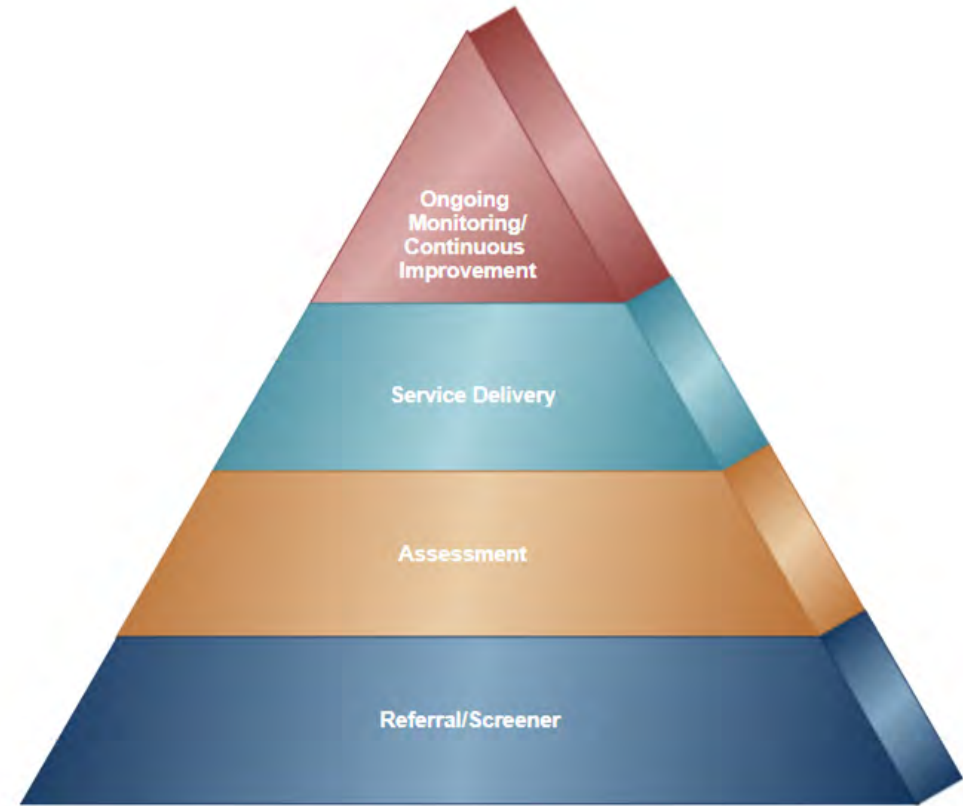
# Roadmap

- **Conduct a Needs Assessment**
  - Identify a common mission/goal to get started
- **Identify Steering Committee Members**
  - Representative(s) from Department of Health and Human Services
  - Representative(s) from Department of Education
  - School leaders
  - Community advocates/legislative champions
- **Identify Potential Funding Sources**
  - Medicaid expansion
  - State legislative funding
  - Federal grants
- **Identify LEAs to serve as early adopters**
- **Build on success of early adopters and make changes as necessary**
- **Identify a common technology infrastructure for establishing best practices and integration**



## Using bhworks to Connect Students to Services More Efficiently

- Care Coordination Platform
- Streamline standard operating procedures and best practices
- Improve confidential communication with families, school staff, and providers
- Access to real-time data





# Special Education Behavioral Health Expansion

Julie Neururer BA, MSW, LICSW  
Interagency Services Specialist  
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# Why Does It Matter? State and Federal Medicaid Data

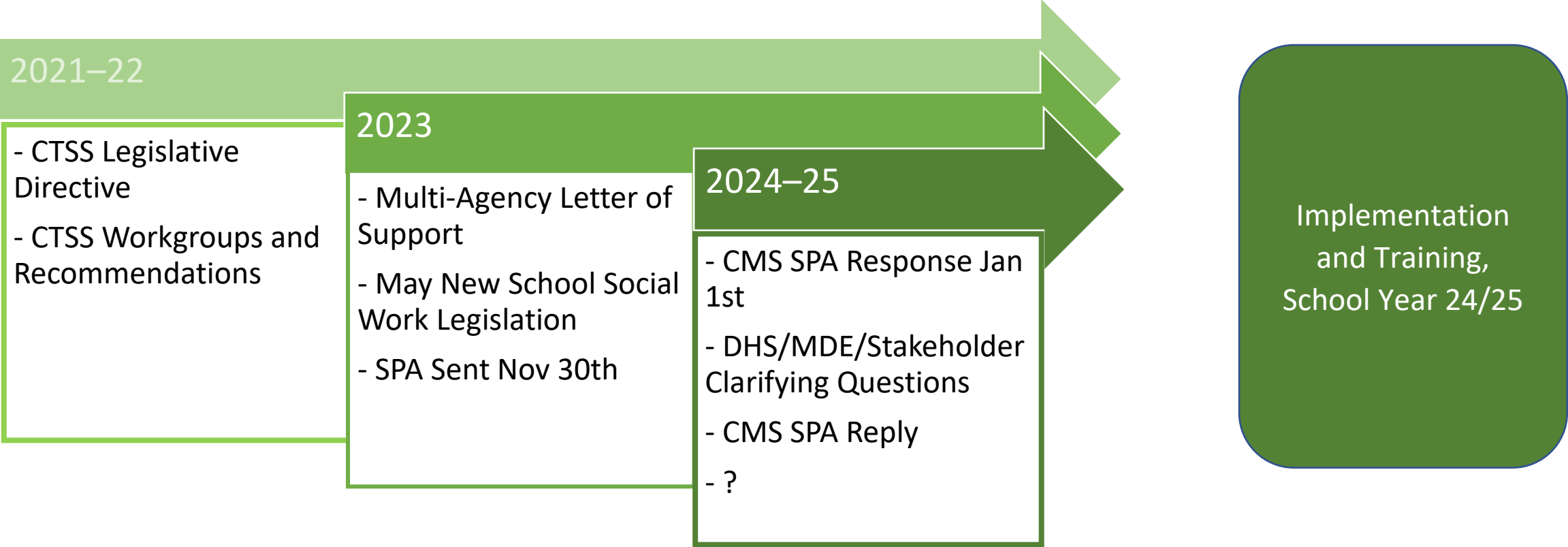
## Medicaid Minnesota Fact Sheet



According to Minnesota Data from 2021–2022 School Year:

- 151,532 students are identified as having disabilities, based on [MDE child count](#).
- 67% of students with an EBD disability in Minnesota have free or reduced lunch.
- 44,502 children enrolled in MHCP in 2021–2022 were billed for IEP services.
- Minnesota schools in SY 2021–22 received over \$57 million in federal Medicaid revenue for IEP/IFSP services.
- Mental health is only 1.5% of \$57 million.
  - CTSS certification
  - Additional paperwork
  - Lack of staff
  - Reimbursement does not cover the extra cost

# How We Got Here



# Preparation and Training

## Behavioral health workgroups

- Policy
- Due process
- Staff funding
- Licensure and supervision

Annual DHS & MDE joint fall training

Annual DHS & MDE Spring forum

Communications (SharePoint, DHS provider list & MDE listserv)



# Thank you

Julie Neururer BA, MSW, LICSW  
Interagency Services Specialist  
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**Colorado Department of Education**



**Colorado Department of Health  
Care Policy & Financing**



# Questions?

Email: [SchoolBasedServices@cms.hhs.gov](mailto:SchoolBasedServices@cms.hhs.gov)



# References

- [CMCS Mental Health and Substance Use Disorder Action Plan \(medicaid.gov\)](#)
- [Bipartisan Safer Communities Act \(oese.ed.gov\)](#)
- [Advancing Comprehensive School Mental Health Systems: Guidance from the Field](#)
- [Rates of Mental Health Service Utilization by Children and Adolescents in Schools and Other Common Service Settings: A Systematic Review and Meta-Analysis](#)
- [Mental Health and Well-Being of Students and Staff During the Pandemic \(ies.ed.gov\)](#)
- [ESSA Legislation Table of Contents \(oese.ed.gov\)](#)
- [IDEA Statute and Regulations \(ed.gov\)](#)
- [Plans of Care Policy Brief \[PDF\] \(healthystudentspromisingfutures.org\)](#)
- [MassHealth School-Based Medicaid Program \(mass.gov\)](#)
- [Technical Assistance Center \(TAC\) | Medicaid](#)
- [Raising the Bar for Children's Mental Health: Strategies to Sustain Innovation and Access to School-based Services](#)
- [School Medicaid Fact Sheets: Details on All 50 States - Healthy Students, Promising Futures](#)
- [School-Based Mental Health Services Grant Program \(oese.ed.gov\)](#)
- [Mental Health Service Professional Demonstration Grant Program \(oese.ed.gov\)](#)
- [State Legislative Guide for School Mental Health](#)