Council on the Advancement of School Based Health Centers
September 30, 2016 Meeting Minutes (Draft for Review)

In Attendance: Barbara Masiulis, Jennifer Dahl (phone), John B. Gaddis (phone), Kate Connor, Maura Rossman, Nicole Johnson, Sharon Lynn Morgan, Chad Perman, Uma Ahluwalia (phone), Mark Luckner, Kristina Kyles

Visitors: Tina Backe, Robyn Elliott, Tania Haag, Derek Simmonsen, Alicia Mezu, Judy Covich, Frances Caffe Wright, and Joanie Glick

Summary of Presentation and Discussion

Welcome and Background
Kristina Kyles opened the meeting with a welcome, and shared a presentation to provide additional background and data available from MSDE about school-based health centers. See PowerPoint presentation for additional information. The presentation covered the following areas:

Mapping SBHCs in Maryland
Members and visitors were presented with a map identifying the location of SBHCs across the state. The following comments and corrections were made to the map.
- Added Howard County and Washington County to the map; future maps would need to be corrected to reflect these jurisdictions
- Southern shore and Western Maryland is not represented; historically, primary care physicians saw SBHCs as competition in St. Mary's County

Reported Visit Data Summary
K. Kyles presented a chart detailing the reported data collected from SBHCs. Comments shared during the meeting:
- Align the visit data with the number of facilities by jurisdiction
- Present historical trends on outputs and outcomes of SBHC
- Provide total enrollment data for each jurisdiction so that we can see the % of eligible students enrolled; # of students in schools with SBHC
- Explore reporting of mental health visits and substance abuse visits; some jurisdictions are reporting more than others; different models are present across the state with services being provided by diverse providers; How do SBHCs count these visits and how are clinicians defining them? Are there enough treatment options?
- Monitor SBHCs that are starting to do SBERT, opportunity for reimbursement
- Define and better report case management services; Only two jurisdictions currently report this data.
- Understand the electronic medical records used to track and report for billing; challenges with coordination with MCOs to support billing; billing can be necessary but expensive;
- Need to develop a broader vision for services; make accessible in evenings and weekends

Summary of SBHC State Funds

K. Kyles presented a table detailing the actual and appropriated allocations for 2015-2017 by jurisdiction. Comments and questions shared during the meeting included:

- Funding the same year to year; varies widely across jurisdictions; How is each jurisdiction funded? Formula? Weighted?
- Adjust table to present # of sites funded by MSDE; understand the operating and personnel charges by center and by jurisdiction; Request SBHCs submit billing and revenue information annually, few months pass end of fiscal year;
- What percentage of funding is MSDE funding? What are the other sources of revenue?
- Explore billing:
  - Costs more to bill than jurisdiction will get back in reimbursement; diverse billing standards for MCOs and private insurers; claims are rejected; patients face high deductibles; large undocumented patients; SBHCs employ fee scale
  - Get more details from jurisdictions about what's billed and what's rejected
  - What other revenue models exist across the country? Sustainable? Integrate 3rd Party billing?
  - Conduct national scan to see if there are categories where billing will work; connect with SBHA for a presentation
  - Get agreements in place to be seen as essential community providers (ECPs); in 2017 SBHCs will fall under ECP; outreach needed to educate SBHCs to work with insurers

Set Program and Policy Procedures

N. Johnson led a discussion with members and visitors to begin to narrow the program and policy priorities for the Council to explore in 2017. The group reviewed the legislative charge and five areas of work to determine where the group should focus its learning and possible recommendations. The group proposed that "Sustainability" be the overarching theme for 2017. In small groups, members and guests identified top three priorities to guide the Council's engagement and possible recommendations. The main themes from each groups report out are summarized below.

Engagement and Policy Priorities

Themes	Engagement and Policy Priorities
Vision and Value Proposition	• Develop a vision for the future of SBHCs in MD • Educate key stakeholders about the value of SBHCs
Models that Work; Best Practices and Quality	• Understand and explore models of sponsorship; what's working • Understand current approaches to coordination of care • Identify effective, sustainable business models – state and national best practices
System Integration	• Leveraging resources across state and local agencies; linkages between MSDE, DHMH, DHS, and others

Themes	Engagement and Policy Priorities
	• Improve coordination across agencies; systems alignment in order to make program sustainable long-term
Data Collection and Reporting	• Link utilization data to track attendance, graduation rates, etc. • Capture substance abuse and behavioral health services • Establish standardized performance measures

Next steps:
- Review priorities to develop a work plan for 2017
- Schedule presentation by SBHA – national scan, business models and performance measures
- Continue to unpack current approaches – agency administration, sponsorship, funding, billing, coordination of care, role of state and local agencies

Annual Report Requirement
The Council members provided recommendations for how to approach drafting the 2016 Annual Report. A draft outline will be circulated to members for feedback. The outline will include two to three questions the Council will work on for 2017.
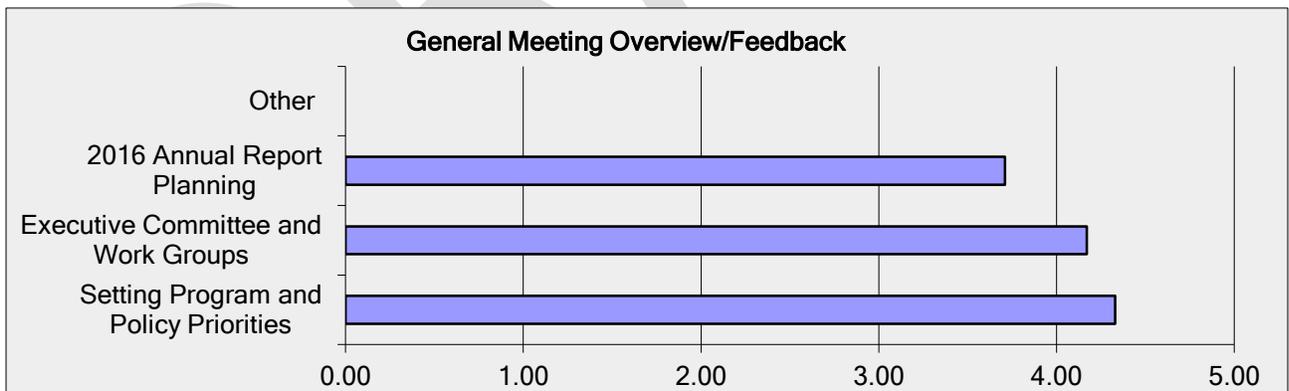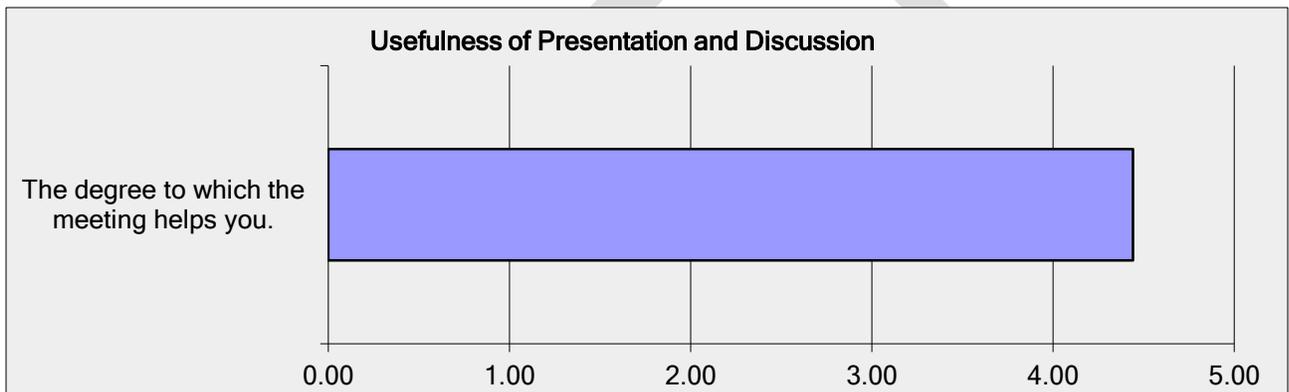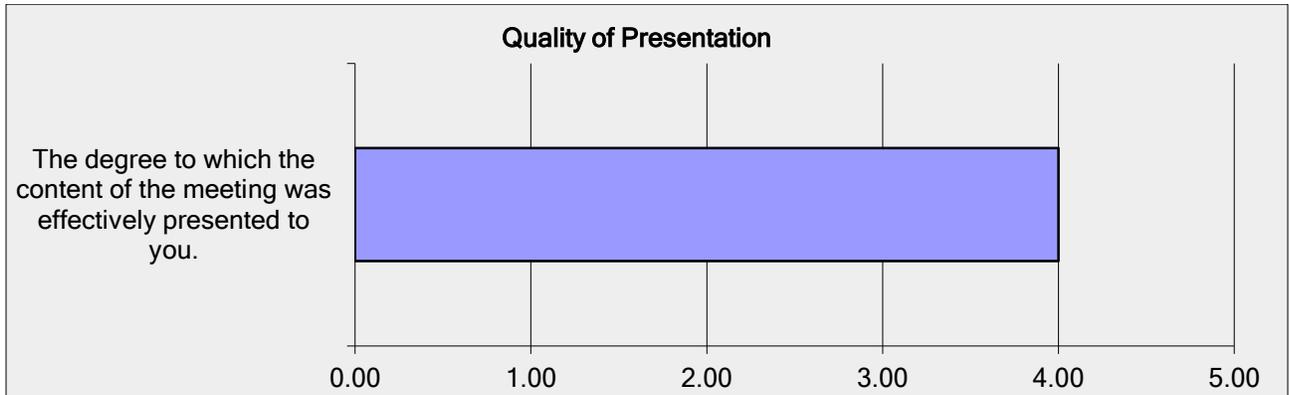
Administrative Next Steps
By the end of the year, the Council must complete the following administrative steps:
- Propose Council structure for 2017
- Nominate a chair
- Establish work groups

Summary of Meeting Evaluation

Total Number of Respondents: 9 (In Person)

Quality of Presentation

The degree to which the content of the meeting was effectively presented to you. — 4.00

Usefulness of Presentation and Discussion

The degree to which the meeting helps you. — ~4.45

General Meeting Overview/Feedback

- Other — (no bar)
- 2016 Annual Report Planning — ~3.7
- Executive Committee and Work Groups — ~4.15
- Setting Program and Policy Priorities — ~4.3

Additional Comments:
- Appreciate the opportunity to participate in the work group or as a stakeholder
- May need to scale back agenda in order to accomplish the work
- Thank you for your work!
- Well organized – thank you
- Thanks!