

14 SCHOOL-BASED HEALTH CENTERS

Revision Dates: August 15, 2014, September 1, 2016, March 1, 2017

Effective Date: January 1, 2014

SBHC Program Overview

—School-Based Health Centers (SBHCs) are comprehensive primary health care centers on or adjacent to school grounds that provide physical and behavioral health services to students and community members.

By offering a range of health care services in school settings, SBHCs simultaneously increase access to care and decrease the amount of classroom time missed by students leaving campus for care in traditional settings. As a result, SBHCs can positively impact academic participation as well as health outcomes.

SBHCs also promote positive health behaviors and healthcare literacy by increasing health knowledge and decision-making skills in the students they serve.

SBHCs play a role in achieving the Centennial Care goal of “Assuring that Medicaid recipients in the program receive the right amount of care at the right time and in the most cost effective or ‘right’ settings”. HSD/MAD contracts with the New Mexico Department of Health’s Office of School and Adolescent Health (DOH/OSAH) for the provision of funding, leadership, support and oversight to nearly 50 SBHCs across New Mexico.

~~a vital part of the healthcare delivery system in New Mexico. They are comprehensive primary health care centers on school grounds that provide physical and behavioral health services to students. Working with the NM Department of Health, Office of School and Adolescent Health (DOH/OSAH) and the Managed Care Organizations (MCOs) who help insure Medicaid-eligible students and families, the HSD/MAD strives to offer “the right care, at the right time, in the right setting”—in this case at schools where students spend much of their time.~~

~~Through contractual agreements, the DOH/OSAH in collaboration with the HSD/MAD provide funding, leadership, support and oversight to nearly 50 New Mexico SBHCs.—~~

~~SBHCs have been found to be especially effective in offering developmentally and culturally appropriate primary care, preventative services, and behavioral health services for students in rural areas where other health care options are limited. Areas of particular focus and strength of services offered by SBHCs may include but not limited to:~~

- ~~• Health screenings—Early and Periodic Screening, Diagnosis, Treatment (EPSDT)~~
- ~~• Asthma screening and management~~
- ~~• Obesity and Diabetes type 2 screening and management~~
- ~~• Depression and anxiety screening and treatment~~
- ~~• Sexually Transmitted Infection and reproductive health services~~

~~SBHCs promote positive health behaviors and healthcare literacy by increasing healthy knowledge and decision-making skills in the students they serve. And by serving students in a school setting, SBHCs limit the amount of time students miss school to receive healthcare services, leading to increased in-class time and fewer absences for a positive effect on student academics as well as positive health outcomes.~~

New Mexico's SBHCs are differentiated across three categories:

- **DOH/OSAH Contract Status-** SBHCs may choose to contract through a sponsoring organization for funding and administrative support through the New Mexico Department of Health's Office of School and Adolescent Health (DOH/OSAH);
- **Sponsorship-**Through CY2017, SBHCs contracting with DOH/OSAH do so under either medical sponsorship (i.e. an FQHC or medical group) or non-medical sponsorship (i.e. an educational cooperative). A Sponsoring Entity provides its designated SBHC(s) one or more of the following: funding, staffing, medical oversight, liability insurance, and billing support; and
- **Provider Type-** SBHCs may apply for [approval for HSD/MAD Certification for Medicaid billing](#) as either a Provider Type 321 (SBHC) or Provider Type 313 (FQHC).
- A SBHC submitting a MAD 335 application as a Provider Type 313 must present a copy of documentation from CMS certifying the center or its sponsoring entity as an FQHC.

A DOH/OSAH-contracted SBHC submitting a MAD 335 application as a Provider Type 321 must present either (1) evidence of HSD/MAD certification for billing or (2) a letter of exemption from HSD/MAD.

SBHC Certification

~~A SBHC funded by DOH/OSAH is eligible to become certified by HSD/MAD indicating a demonstrated adherence to SBHC Standards and Benchmarks and is eligible to bill Medicaid upon passing initial site review certification and a recertification site review once every 3 years.~~

HSD/MAD Certification is a positive determination of a SBHC's administrative eligibility for enrollment for Medicaid billing. It is based upon evidence of licensure by appropriate regulatory agencies and adherence to the *New Mexico Standards and Benchmarks for School Based Health Clinics (sic) (Standards and Benchmarks)* as maintained by DOH/OSAH in collaboration with HSD/MAD. Certification is issued for a period of **three years** and is subject to revocation in the event that HSD/MAD becomes aware of loss of appropriate licensure(s) or significant deviation from the *Standards and Benchmarks*.

HSD/MAD shall be responsible for the initial certification of SBHCs enrolling as Provider Type 321 and for the recertification of all Provider Type 321s with non-medical sponsorship.

The MCOs shall be responsible for the recertification of all Provider Type 321s with medical sponsorship.

[Certification Process](#)

Initiation

1. A DOH-contracted SBHC or its sponsoring entity may petition for HSD/MAD certification any time after the finalization of its contract with DOH/OSAH and receipt of the *Standards and Benchmarks*.
2. Requests shall be made in writing to HSD/MAD's Centennial Care Contracts Bureau. (Electronic communications shall be acceptable.)
3. Within ten business days of the receipt of a request for SBHC site certification, a representative of HSD/MAD will specify in writing to both the DOH-contracted SBHC and its sponsoring entity a deadline for the submission of all documentation required for certification. Unless to accommodate a request made by the applicant site, this deadline shall not be less than four weeks from the date upon which notification is sent.

Packet Submission

The applicant site and sponsoring entity shall submit:

1. A hard or electronic copy of an acknowledgement of receipt and attestation of adherence to *Standards and Benchmarks*, signed by the CEO of the sponsoring entity and the SBHC administrator; and a completed SBHC Site Review Self-Assessment, signed by the CEO of the sponsoring entity and the SBHC administrator.
2. A hard or electronic copies of:
 - a) The latest fire inspection report by the fire authority having jurisdiction over the site;
 - b) Health certificates of all staff;
 - c) Current license, registration or certificate of each staff member for which a license, registration, or certification is required by the State of New Mexico;
 - d) Valid drug permit from the New Mexico Board of Pharmacy;
 - e) Current Clinical Laboratory Improvement Amendments (CLIA) certificate; and
 - f) Evidence of other licensure and/or certification by appropriate jurisdictional agencies as requested.
3. A hard or electronic copies of each of the following:
 - a) The SBHC's Policy and Procedure Manual, which shall include at a minimum the policies and procedures described in the *Standards and Benchmarks*; and
 - b) Staff training logs, complaint logs, facility licenses, Material Safety Data Sheets (MSDS), pharmacy logs, laboratory logs, and other materials that may be specified by the Site Review Team.
4. Photographs or videos to provide evidence of compliance with such standards as the requirement for "No Smoking" signs, "Handicap Accessibility" signs, and the posting of appropriate licenses.

DOH/HSD Responsibilities

1. ~~Initial certification for new SBHCs, SBHCs with new sponsors, and Independent/Non-Medical Entity sponsored sites will receive a joint site review by DOH/OSAH and HSD/MAD for certification. DOH/OSAH and HSD/MAD will follow the same process as the MCOs for site reviews.~~

- ~~2. HSD/MAD will compile the data from all site reviews and determine if the SBHC and Sponsor have passed the site review and earned certification/recertification.~~

Site Review

A Site Review Team comprised of at least one member of HSD/MAD and one member of DOH/OSAH shall:

1. Convene to review the SBHC's submissions within 10 business days after the deadline for receipt.
2. Conduct a telephone or video interview with the SBHC staff and sponsor to discuss findings, questions, concerns, and recommendations.

~~3.~~ HSD/MAD will issue a letter to the SBHCs, Sponsor, DOH/OSAH, and the MCOs within 10-15 business days after completion of site review indicating whether the SBHC has passed or failed the review.

1. If the SBHC/Sponsor passed, the HSD/MAD letter will include the effective date the SBHC and Sponsor are eligible to begin billing Medicaid.
2. If the SBHC/Sponsor failed, the HSD/MAD letter will include the reasons and requirements the SBHC must complete to pass the certification/recertification process. If the SBHC/Sponsor is not able to correct the noted deficiencies within 10 business days from receipt of letter, HSD/MAD will send notification to the SBHC/Sponsor requesting a Corrective Action Plan (CAP).

- i. The CAP must address each noted deficiency, action steps required to correct the deficiency, and the desired outcome with a due date.
- ii. The SBHC/Sponsor will have 60 calendar days upon receipt of the notification to implement the CAP and correct all deficiencies. Evidence of the corrections must be submitted to HSD/MAD before or on the 60th day.
- iii. HSD/MAD will determine what documentation in what form if another site visit is required based on the CAP and resolution of deficiencies.
- iv. HSD/MAD will send a letter of certification/recertification to the SBHC, Sponsor, DOH/OSAH, and the MCOs within 5 business days of resolution of deficiencies and completion of the CAP,
- v. If the CAP is not completed and deficiencies are not resolved, HSD/MAD will collaborate with DOH/OSAH to determine if certification/recertification is possible and next steps.

~~vi. HSD/MAD will retain the ability to suspend Medicaid billing privileges for any SBHC that does not adhere to the SBHC Standards and Benchmarks.~~

RECERTIFICATION PROCESS

For Provider Type 321s with Non-Medical Sponsorship

HSD/MAD shall be responsible for the recertification of DOH-funded SBHCs sponsored by non-medical entities.

1. The recertification site review will be conducted by the HSD/MAD Site Review Team no later than six weeks before the expiration of current certification.
2. HSD/MAD will schedule the site review through the SBHC's Sponsoring Entity.
3. HSD/MAD shall ensure that the Sponsoring Entity has access to the most recent copy of the *Standards and Benchmarks*, *SBHC Site Review Self-Assessment*, and the *Site Review Guide* within one month of the site review.
4. The site review will be conducted as outlined in Certification Process above.

For Provider Types 321 with Medical Sponsorship

The MCO²s shall be responsible for the recertification of DOH-funded SBHCs sponsored by medical entities.

MCO Responsibilities

1. MCOs will perform site reviews for SBHCs sponsored by Medical Entities after initial certification. On a quarterly basis, HSD/MAD will provide the MCOs with a list of medically-sponsored DOH/OSAH contracted Medical Entities of SBHCs with expiring certifications, in need of recertification, including recertification due date, and the MCO responsible for performing the site review.
2. The designated recertification site review will be conducted by the assigned MCO will conduct the site review no later than six weeks before the expiration of current certification, by the last day of the month in which the site review is due.
3. The MCO will schedule the site review with the Medical Sponsor. The review may be conducted remotely. There is no requirement for a site visit.
4. The MCO shall ensure that the Medical Sponsor has access to the most recent copy of the *Standards and Benchmarks*, *SBHC Site Review Self-Assessment*, and the *Site Review Guide* within one month of the site review.
- ~~4. The SBHC Standards and Benchmarks, SBHC Site Review Self-Assessment, and the Site Review Guide will be sent by the MCO to the Medical Sponsor one month prior to the site review.~~
- ~~5. The designated MCO shall instruct the Medical Sponsor and SBHC to make available hard or electronic copies of: One month prior to the site review, the MCO will instruct the Medical Sponsor on selection process for medical records for review. A minimum of fifteen medical records per SBHC must be made available to the Site Review Team.~~
- ~~6. The selection of medical records must include a minimum of five from each type of service (Physical Health, Behavioral Health, Dental) if provided at the SBHC.~~
- ~~7. Preferred records are those of students who receive more than one type of service. These records can be counted as one of the five for each service type.~~
- ~~8. If the SBHC has provided services to fewer than fifteen students, then the medical records of all students served must be made available for review.~~
- ~~9.5. The MCOs will instruct the Medical Sponsor to have the following items available, hard copy or electronic, at the site review:~~

- a. SBHC Policy and Procedure Manual, including the policies and procedures described in the ~~SBHC Standards and Benchmarks~~ and the SBHC Site Review Self-Assessment,
 - b. Staff training logs, complaint logs, personnel files, facility licenses, Material Safety Data Sheets (MSDS), pharmacy logs, laboratory logs, and requested medical records, and
 - c. Copies of licensure by jurisdictional agencies including The New Mexico Board of Pharmacy;
 - d. Any other documentation as deemed necessary after consult with HSD/MAD; and
 - e. ~~e.~~ The completed SBHC Site Review Self-Assessment.
- ~~10.6.~~ ~~The MCO is not required to perform site reviews at the SBHC locations.~~ The SBHCs may use photographs or audiovisuals to provide evidence that the ~~clinics~~ ~~clinics~~ have required items such as “No Smoking” signs, “Handicap Accessibility” signs, or possession of appropriate licenses.
- ~~11.7.~~ ~~The designated MCO~~ On the day of the site review, the review team shall will:
- a. Meet with the clinic staff and sponsor representatives in person, by phone or by video conference to ~~discuss~~ review the site review process,
 - b. Review the completed SBHC Site Review Self-Assessment,
 - c. Use the HSD/MAD electronic Assessment Tool to determine adherence to the SBHC Standards and Benchmarks. ~~The Medical Record review can include all 15 or a random selection of medical records per SBHC,~~ and
 - d. Conduct an exit interview with the staff and sponsor to discuss findings, questions, concerns, and recommendations. A verbal indication will be given of the certification status.
- ~~12.8.~~ The MCO will deliver the site review documentation to HSD/MAD within ten (10) business days. ~~to~~ HSD/MAD will ~~to~~ compile the data and make the final determination for recertification.

Confidential Services and Suppression of Explanation of Benefits (EOBs) for SBHC

Services Under New Mexico law: There are a number of circumstances in which an adolescent (an un-emancipated minor) may consent to receive services without parental consent, including the following:

Treatment for Sexually Transmitted Diseases:

Under Section 24-1-9 (capacity to consent to examination and treatment for a sexually transmitted disease), any person regardless of age has the capacity to consent to an examination and treatment by a licensed physician for any sexually transmitted disease; however, under Section 24-1-9.4, disclosure of the test results is authorized “to the subject of the test or the subject’s legally authorized representative, guardian or legal custodian.”

Pregnancy Examination and Diagnosis:

Under Section 24-1-13 (pregnancy; capacity to consent to examination and diagnosis), any person, regardless of age, has the capacity to consent to an examination by a licensed physician for pregnancy.

Family Planning Services:

Under Section 24-8-5 (prohibition against imposition of standards and requirements as prerequisites for receipt of requested family planning services) there are no prerequisites for parental consent to obtain family planning services.

Behavioral Health Services:

Under Section 32A-6-14 (treatment and habilitation of children; liability), parental consent is not required to receive “individual psychotherapy, group psychotherapy, guidance, counseling or other forms of verbal therapy that do not include any aversive stimuli or substantial deprivations.”

MCO Responsibilities

The HSD and MCOs contracts require that the MCOs adopt and implement written confidentiality policies and procedures that conform to state and federal laws and regulations.

The MCOs are contractually required to preserve adolescent members’ confidentiality rights.

The MCOs are required to honor adolescent members’ rights to receive confidential services to the same extent that they are required to ensure adult members’ privacy rights under HIPAA and other state and federal confidentiality provisions.

SBHCs should not bill private payors for services rendered to an adolescent who, according to state law, consented to receive them without parental knowledge.

The MCOs are to suspend the distribution of Explanation of Benefits (EOBs) for all services provided at SBHCs.