Maryland Community Health Resources Commission

Study of School-Based Health Centers

February 5, 2007
Today’s Objectives

- Review the Commission’s charge
- Reach consensus on study goals and objectives
- Determine the process and timeline for commissioning the study
MCHRC Charge

“Study SBHC funding and access issues including:
(i) Reimbursement ... by MCOs, insurers, nonprofit health service plans, and HMOs; and
(ii) Methods to expand SBHCs to provide primary care services.

§19-2109(a)(15)(i-ii)
MCHRC Charge (cont.)

(d)(2) The Commission shall, in conducting the SBHC study .... identify the following:

(i) A fee schedule for individuals accessing a school-based community health center;

(ii) Reimbursement rates to be paid by MCOs and insurers, nonprofit health services plans, and HMOs to the school-based community health center;
(iii) Insurance payments owed to school-based community health centers and how much of the payments should be collected to offset any State subsidy;

(iv) Barriers to reimbursement of licensed health care providers who provide services at SBHCs, including nurse practitioners and physician assistants;
MCHRC Charge (cont.)

(v) A system of registering individuals who receive health care services from a school-based community health center that requires an individual to pay premiums and sliding scale fees; and

(vi) Security measures to be used by school-based community health centers.

§19-2109(d)(2)(i-vi)
(17) Evaluate the feasibility of extending liability protection under the Maryland Tort Claims Act to health care practitioners who contract directly with a CHR that is also a Maryland qualified health center or a SBHC.

§19-2109(a)(17)
Purpose of SBHC Study

- Address “funding and access” issues listed in the legislation
- Explore ways to expand SBHCs to provide primary care services
- Inform future work of MCHRC
Products of the SBHC Study

- Policy options and recommendations
- Directions for future work by MCHRC (e.g., grants program, technical assistance, advocacy/facilitator role)
Study Process and Timeline

Process:
- Develop scope
- Identify and engage a contractor

Suggested Timeline:
- April – September 2007
- Report finalized by October 1 to submit with MCHRC’s annual report to the legislature
Study Methods

- Survey SBHCs to provide a comprehensive portrait of sponsorship, financing, and organizational strength
- Best practices research
- Legislative analysis
- Analysis of policy options
- Investigation of opportunities for MCHRC collaboration with other groups
Survey of Maryland’s SBHCs

- Sponsors (mission, capacity, commitment)
- Budgeted/actual expenditures
- Revenues (Medicaid, private insurance, state/local funds, grants)
- Fee schedules
- Staffing
- Billing capability
- Board composition
- Liability coverage
Study Input

... solicit input on the study from SBHCs, local governments, state agencies, providers, and insurers [as per §19-2109(d)(1)]
Funding is available in the “Consultants” line item of the FY 2007 budget.
Proposed Study Topics

1. Reimbursement
2. Billing Capability
3. Liability Barriers
4. Security Measures
5. Building Strong Sponsors
1. Reimbursement

- MCOs, Insurers, Non-Profit Health Service Plans, HMOs
- Fee Schedules
- Reimbursement for NPs (HB 974) and PAs
- Insurance Payments Owed to SBHCs
2. Capability of SBHCs to Bill for Services

- What is billing capability now?
- Can billing capability be enhanced through access to IT and if so how?
3. Liability Barriers

Could liability protection be extended to SBHCs through the Maryland Tort Claims Act?

What measures should be in place to ensure continuity of care?
4. Security Measures

- Required Criteria
- What are “best practices” for ensuring security at SBHCs?
5. Building Strong Sponsors

What are the options?

- Regulatory approach: Using standards, credentialing, reimbursement policy
- Market approach: Incentives to encourage health systems, hospitals, and FQHCs to sponsor SBHCs
- Combination of both?
Ways to Build Viable SBHCs

- Organizational strength
  - Strong sponsors
  - Leadership behind the lines
  - Billing capability
  - Effective training
  - Liability protection

- Financing
  - Reimbursement from Medicaid and commercial insurers