



Committee: House Ways and Means Committee

Bill Number: House Bill 1317 - Maryland Medical Assistance Program – Use of Reimbursement Funds by Schools

Hearing Date: February 28, 2024

Position: Support with Amendment

The Maryland Assembly on School-Based Health Centers (MASBHC) supports *House Bill 1317 – Maryland Medical Assistance Program – Use of Reimbursement by Schools*. We would request to clarify that the bill addresses reimbursement for school health services, rather than any health care service provided on school grounds.

MASBHC strongly supports the Maryland Medicaid Program in its initiative to expand opportunities for schools to bill for school health services. Maryland already allows schools to bill Medicaid for school health services provided under an individualized education plan (IEP). As a result, Maryland is able to draw down federal dollars to support these services.

In 2023, the Center for Medicare and Medicaid Services (CMS) revised its guidance for Medicaid reimbursement for school health services. Under the revised guidance, states have the opportunity to seek additional federal resources to enhance both behavioral and somatic health services provided in schools. The revised guidance could be a game changer for state and local jurisdictions that have struggled to adequately fund school health services.

This legislation is designed to ensure school health programs are bolstered by the expansion of Medicaid reimbursement. MASBHC supports the intention as school health resources, already stretched too thin by the pandemic, have struggled to rebound. Schools cannot maintain adequate school health staffing levels for school nurses, behavioral health practitioners such as school social workers and school psychologists, school counselors, and habilitative service practitioners including occupational therapists, speech pathologists, and physical therapists.

MASHC requests a clarifying amendment. The bill includes any health services provided on school grounds. This is overly broad and, if implemented, would inadvertently drain resources from



health providers who are not under “school health” but provide services to students while they are in schools including:

- School-based health centers. School-based health centers are community health centers co-located on school grounds. It is essential that they continue to retain Medicaid reimbursement for their services;
- Community-based partnerships. Under this model, community-based behavioral health providers have expanded access to behavioral health services on school groups. These community-based providers partner with schools to provide services to students at schools; and
- Telehealth providers. This committee just voted favorably on *House Bill 522 - Public Schools - Student Telehealth Appointments - Policy and Access*. With this legislation, the Maryland General Assembly is seeking to expand student’s access to their own providers during school hours. Instead of having to leave school grounds, students would attend their appointments from an appropriate private space on school grounds.

Providers of these different type of services need to retain their own reimbursement revenue to remain financial solvent. The bill just needs a clarifying amendment to address this issue:

On page 2 in line 1-5 :

(3) “REIMBURSEMENT FUNDS” MEANS FUNDS RECEIVED BY AN ELEMENTARY OR SECONDARY SCHOOL, OR A COUNTY SCHOOL SYSTEM, FOR SERVICES PROVIDED UNDER EDUCATION ARTICLE §7-401 IN A SCHOOL SETTING TO AN INDIVIDUAL ENROLLED IN THE MARYLAND MEDICAL ASSISTANCE PROGRAM OR THE MARYLAND CHILDREN’S HEALTH INSURANCE PROGRAM.

We ask for a favorable vote with this clarifying amendment. If you need any additional information, please contact Robyn Elliott at relliott@policypartners.net.