

Targeted Mental Health and Substance Abuse Prevention and Early Intervention Through Schools

National Health Law Program
California School-Based Health Alliance
2022



Welcome & Housekeeping

- This is a pre-recorded session
 - Closed captioning are available
 - Slides are available
- Check out two other pre-recorded sessions in this series
 - Identifying needs and gaps in mental health access for system-involved youth
 - Ensuring appropriate service provision for system-involved youth, especially in light of SB 221

Agenda

- Introduction
- Overview of mental health and substance use disorder services through schools
- Relevant issues or challenges
- How are services provided through schools?
- Takeaways
- Resources

Introduction

Presenters

- National Health Law Program (NHeLP)
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Equal Justice Works Fellow
- California School-Based Health Alliance (CSHA)
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Director of Policy and External Affairs

About the National Health Law Program

- National non-profit law firm committed to improving health care access, equity, and quality for underserved individuals and families
- Offices in CA, DC, & NC
- NHeLP's [Equity Stance](#)
- Find us on
 - www.healthlaw.org
 - Twitter [@NHeLP_org](https://twitter.com/NHeLP_org)
 - Facebook [@NHeLPProgram](https://www.facebook.com/NHeLPProgram)



Why implement services through schools?

- School is the hub of the community
- School is where the kids are and for many, where the social support is
- Prevention and early intervention
- Many youth are getting evidence-based behavioral health services through schools

Overview of MH & SUD Services Through Schools

Two categories of services in schools

- Educational Services
 - [Special education](#) and Individualized Education Plan (IEP) services are mandated and provided through the Individuals with Disabilities Education Act ([IDEA](#))
- Health care services (which include MH & SUD services)
 - Health care services in schools may be covered under Medi-Cal (Medicaid in CA), private insurance, or other funding sources
 - Services may be available to uninsured students as well

Today we'll focus on **health care services** (especially Medi-Cal)

Medi-Cal Service Delivery Systems

- County Behavioral Health Delivery System
 - Provide Specialty Mental Health services (SMHS)
 - Substance Use Disorder services
- Medi-Cal Managed Care Health Plans (MCPs)
 - Provide physical health services and non-Specialty mental health services (NSMHS), i.e. individual, group, and family psychotherapy
 - Brief intervention referral screening services
- Fee for service (FFS) (aka “straight Medi-Cal”)
 - Some populations have the option to choose to remain in FFS

Medi-Cal & the EPSDT mandate

- The [Early and Periodic Screening, Diagnosis, and Treatment \(EPSDT\)](#) benefit entitled **Medicaid ("Medi-Cal") beneficiaries under 21** to all appropriate and medically necessary services to correct or ameliorate behavioral health conditions
 - **Early:** Assessing and identifying problems early
 - **Periodic:** Checking children's health at periodic, age-appropriate intervals
 - **Screening:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
 - **Diagnostic:** Performing diagnostic tests to follow up when a risk is identified, and
 - **Treatment:** Control, correct or reduce health problems found.

EPSDT Services

- Services may include:
 - Medical, dental, vision, and hearing
 - Mental health screening, early intervention, and treatment services
 - Alcohol and Drug Screening, Assessment, Brief Interventions and Referral to Treatment (SABIRT) (ages 11 and older, including pregnant youth)
- Services must be available regardless of county of residency (county may be required to coordinate with another county to locate services)
- Early intervention services must be available

Expanded Medi-Cal Specialty MH Services

- Having a condition that places the youth at high risk for a mental health disorder due to
 - Experience of **trauma**
 - Involvement in the **child welfare system, juvenile justice system, OR**
 - Experiencing **homelessness**
- No need to have a MH or SUD diagnosis

([Cal. W&I § 14184.402](#))

Medi-Cal & Foster Youth

- All foster youth are entitled to get Medi-Cal/ Medicaid
- [Former foster youth](#) (who were in foster care on their 18th birthday in California or another state) can get Medi-Cal until age 26, regardless of income

Relevant issues or challenges
regarding services provided
through schools

Confidentiality and Limits on Info Sharing

- Health care v. Educational records
 - HIPAA ([Health Insurance Portability and Accountability Act of 1996](#)) regulates the use and disclosure of individual's protected health information, with some exceptions (such as victims of abuse or neglect or domestic violence, judicial and administrative proceedings, law enforcement)
 - FERPA ([Family Educational Rights and Privacy Act](#)) protects the privacy of student education record
- Cross-agencies policies

Consent

- Generally, parental/ caregiver consent or involvement is needed
- Some minors may consent to MH and SUD services in CA
 - In CA, age 12 and over may consent to mental health and substance use disorder services ([Fam. Code § 6924](#); [H&S Code § 124260](#); [Fam. Code § 6929\(b\)](#))
 - Under the [Medi-Cal Minor Consent program](#), minors age 12 and older may consent to their own drug and alcohol abuse treatment and counseling & outpatient mental health treatment and counseling services
 - Minor Consent services are **confidential** from the parents

Additional relevant issues or challenges

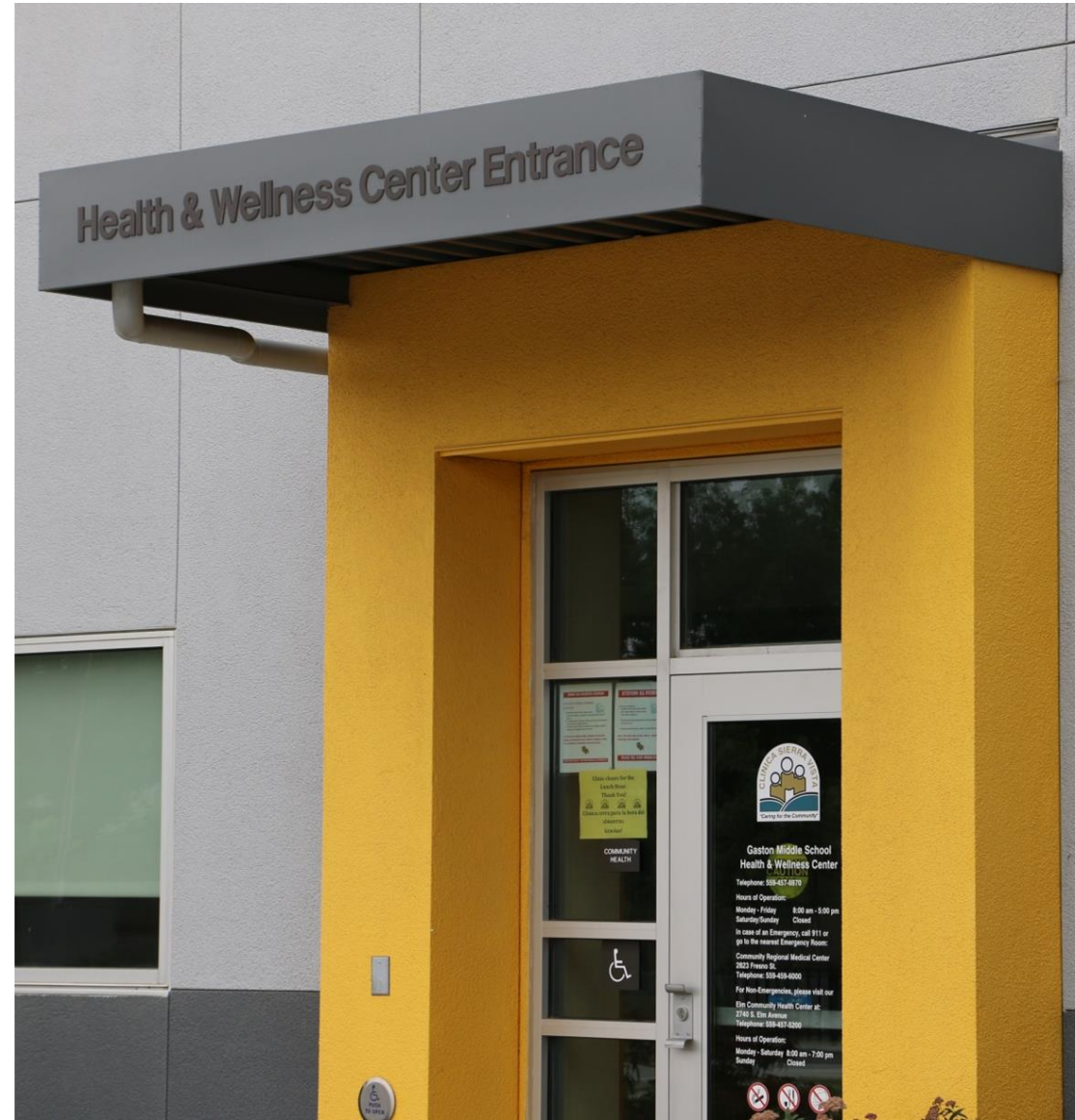
- Multiple systems involvement makes things more complicated
- Definition of “child” in Medi-Cal (age 21) v. justice system (age 18)
- Extended Foster care goes to age 21 v. justice system (age 18)
- Healing and recovery is not linear
- The need for trauma-informed care
- Mental health staffing and program availability varies by school district and county
- Unstable housing and unstable schooling situations impact service linkages

How are services provided
through schools?

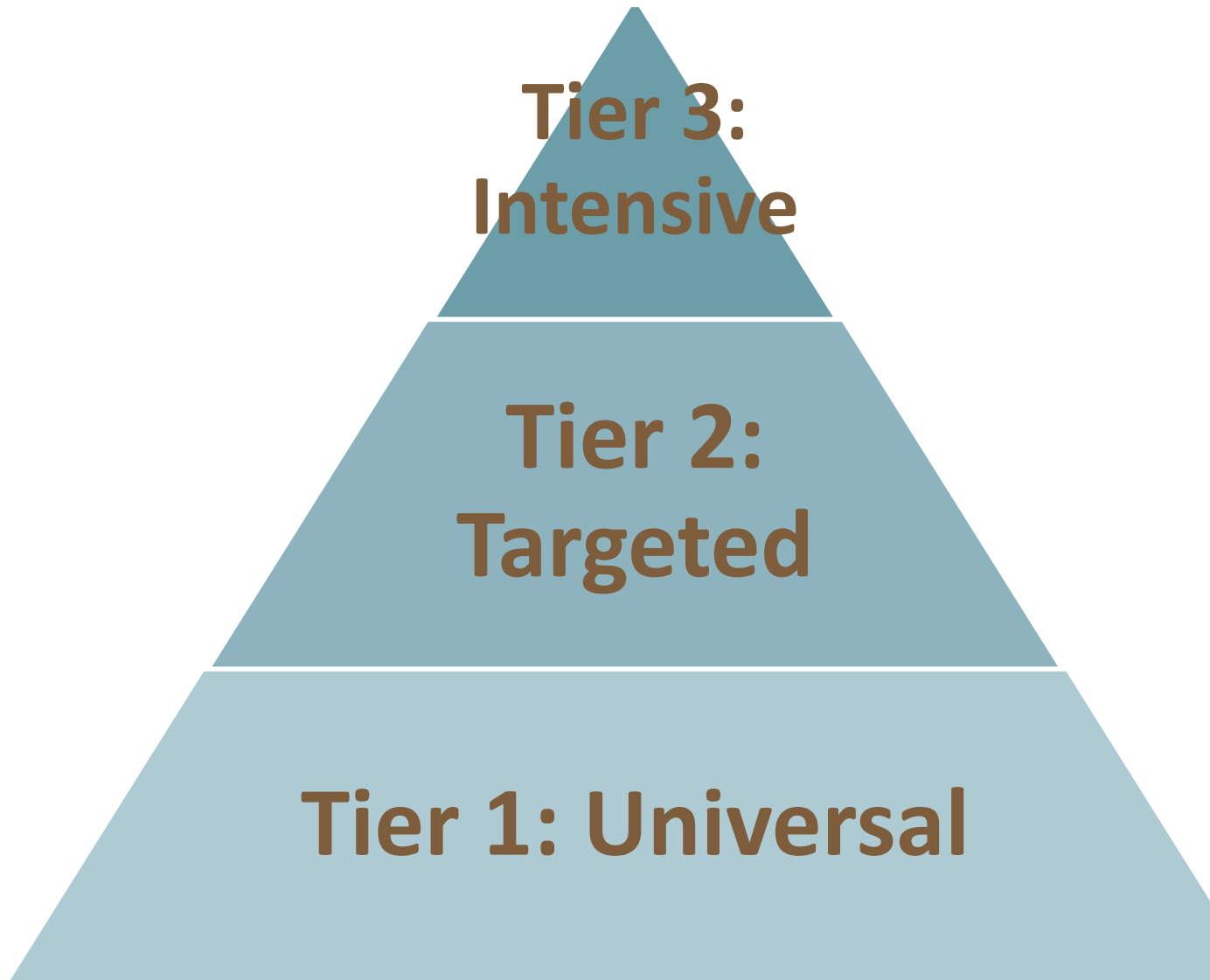
Putting Health Care in Schools

The California School-Based Health Alliance is the statewide non-profit organization dedicated to **improving the health & academic success** of children & youth by **advancing health services in schools.**

Learn more:
schoolhealthcenters.org



What is School Mental Health?

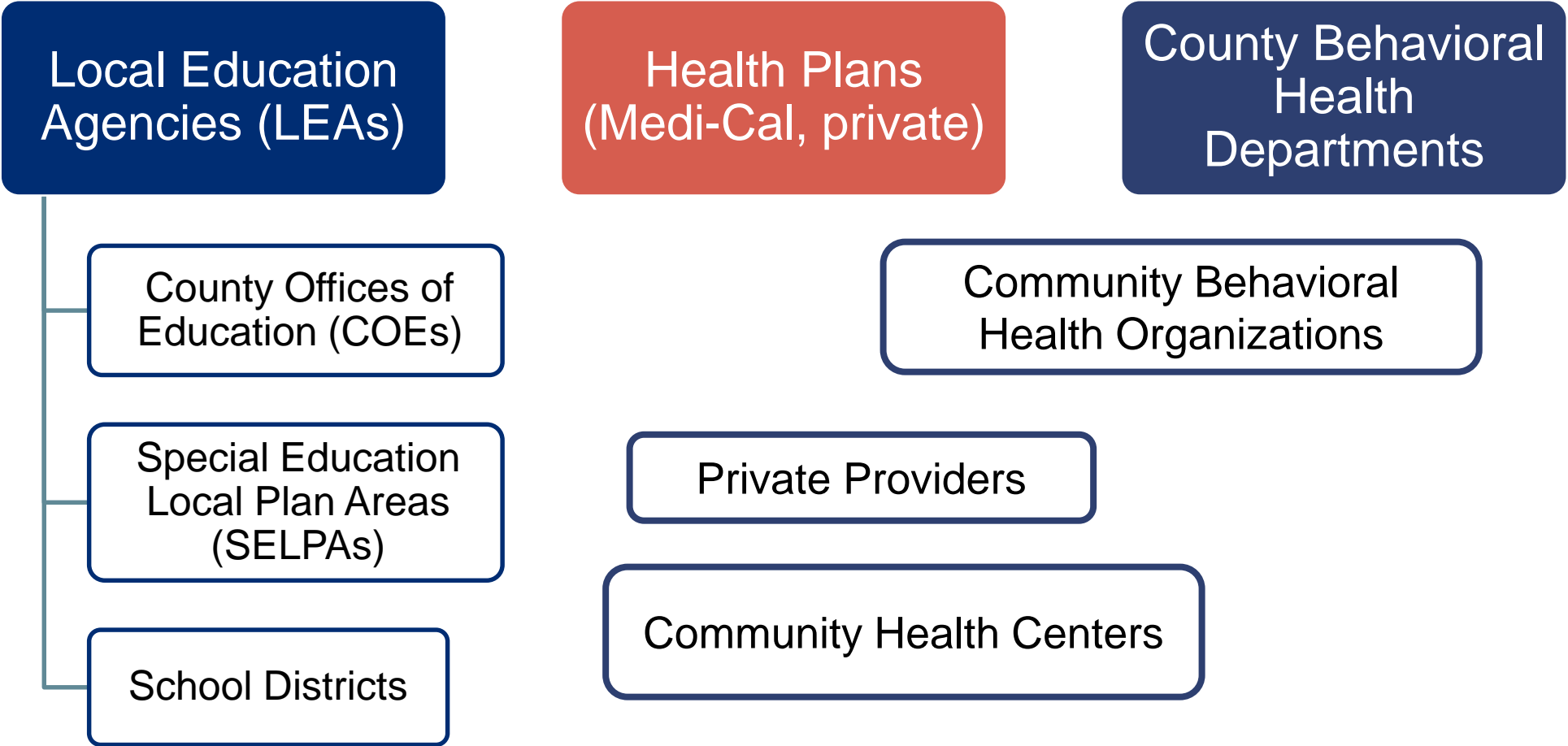


- Clinical groups
- Intensive individual mental health services
- Crisis intervention
- Multi-system case management

- Assessment & referral
- Support groups
- Coordination of Services teams
- Alternatives to suspension
- Short-term individual counseling

- Schoolwide education & activities
- School climate efforts
- Teacher/staff professional development & training
- Youth development activities

WHO ARE THE LOCAL PARTNERS?



More info: [Possible Partners in Delivering School Mental Health](#)

What Are Schools Doing?

Hire staff

- School counselors
- School social workers
- School nurses

Bring in partners

- County
- CBOs
- FQHCs
- Hospitals

Build spaces

- School-based health centers
- Wellness Centers or rooms



What is a School-Based Health Center?

A student-focused health center or clinic:

- Located **on or near** a K-12 school campus
- Organized through school, community, and health provider **relationships**
- That provides age-appropriate, **clinical** health care services



SBHCs **may provide** primary medical care, behavioral health services, **or** dental care onsite or through mobile or telehealth

SBHC or “Wellness Center”?

Wellness Centers

Calming Rooms

Welcoming, safe drop-in spaces without any clinical services, staffed by some caring adult

Mental Health only

Calming rooms plus some on-site clinical behavioral health services, provided by school-employed staff and/or co-located CBOs

Mental Health+

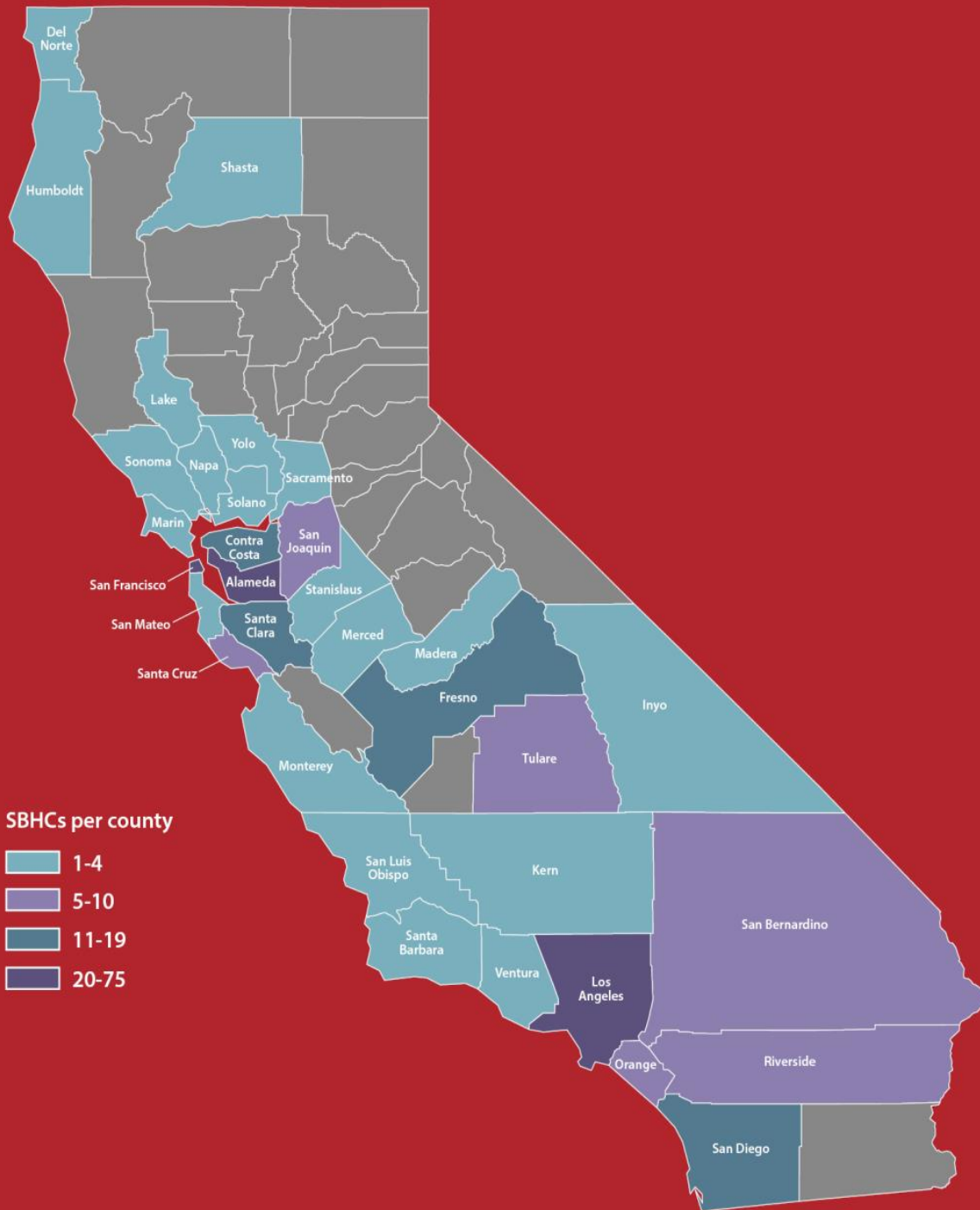
Centers with mostly clinical behavioral health plus some other services, like a school nurse and/or sexual/repro health

Comprehensive

Clinics with full-scope of health services, including physical medical care, behavioral health, and oral health



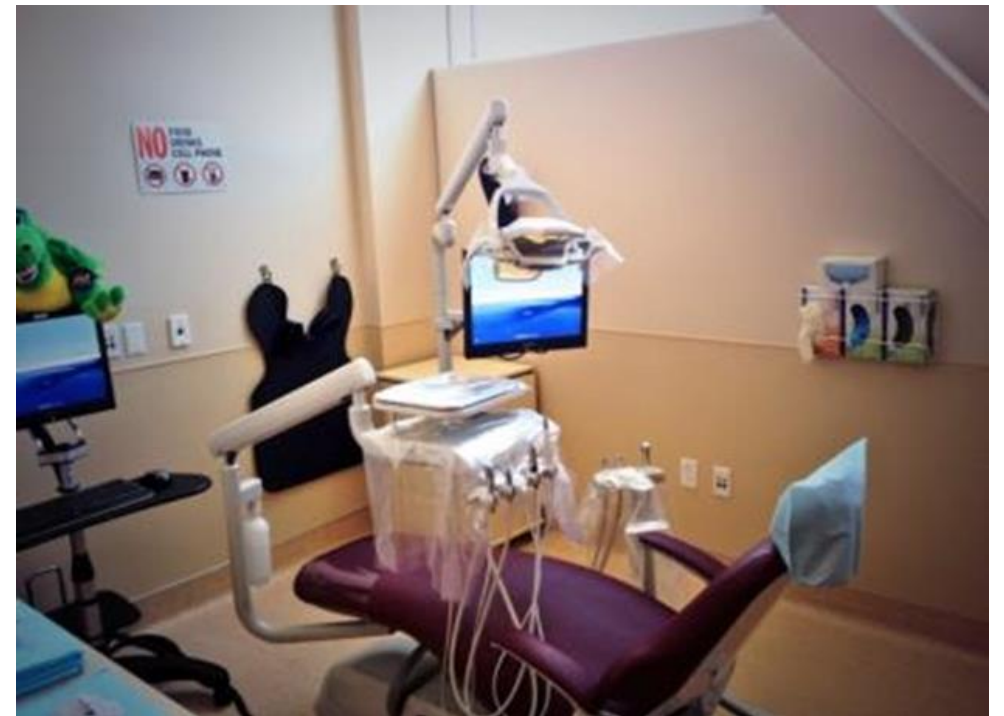
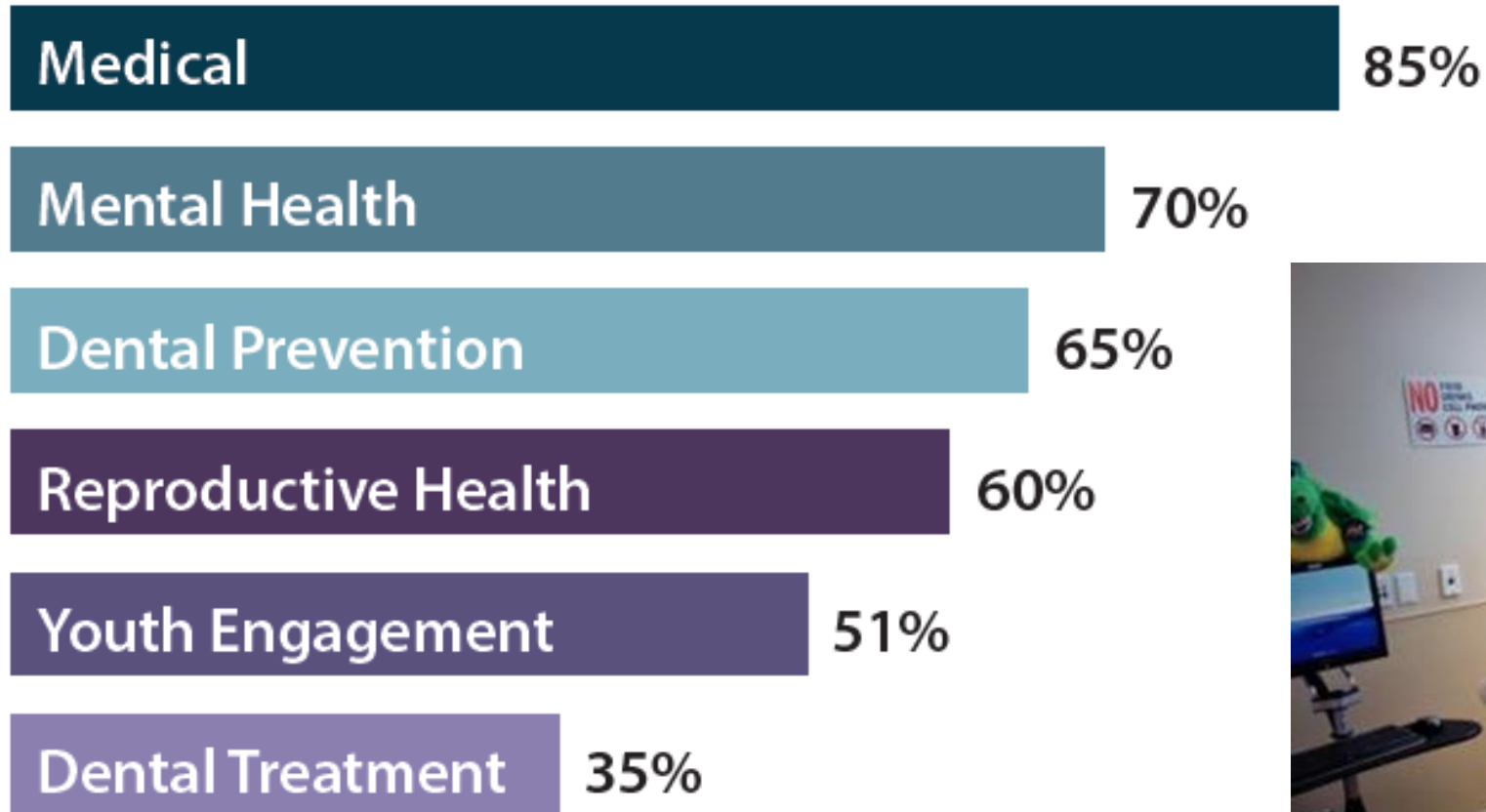
School-based health centers!



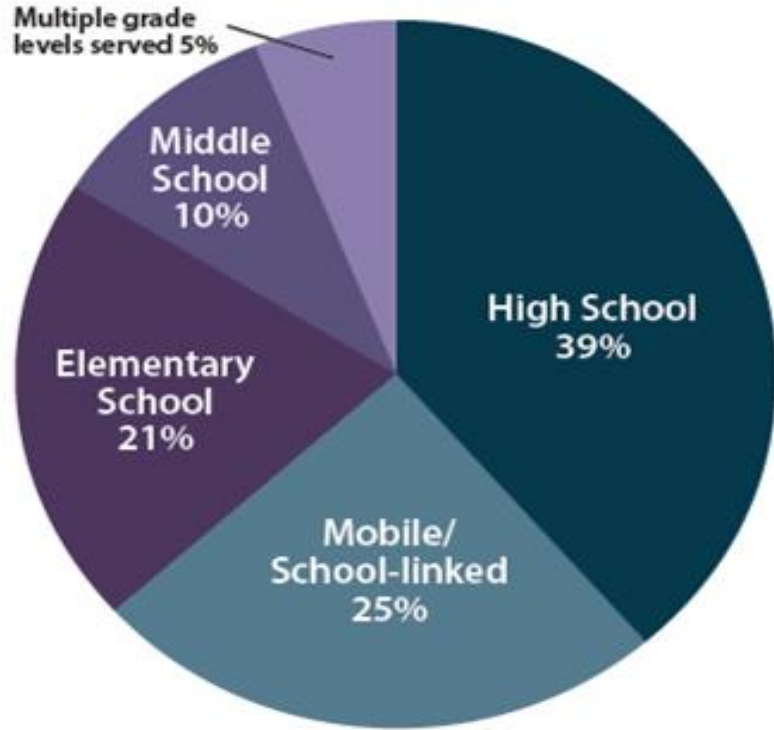
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SCHOOL-BASED HEALTH CENTERS AND GROWING

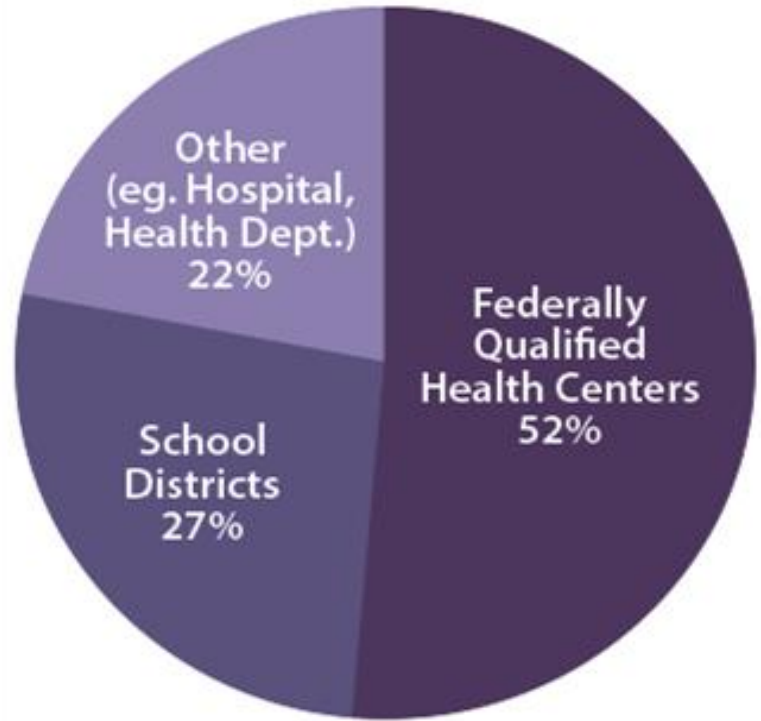
What Services are Provided?



School Levels Served



Who Operates SBHCs



83% of SBHCs serve broader community

17% of SBHCs serve students only

SBHC Impact on Youth Mental Health

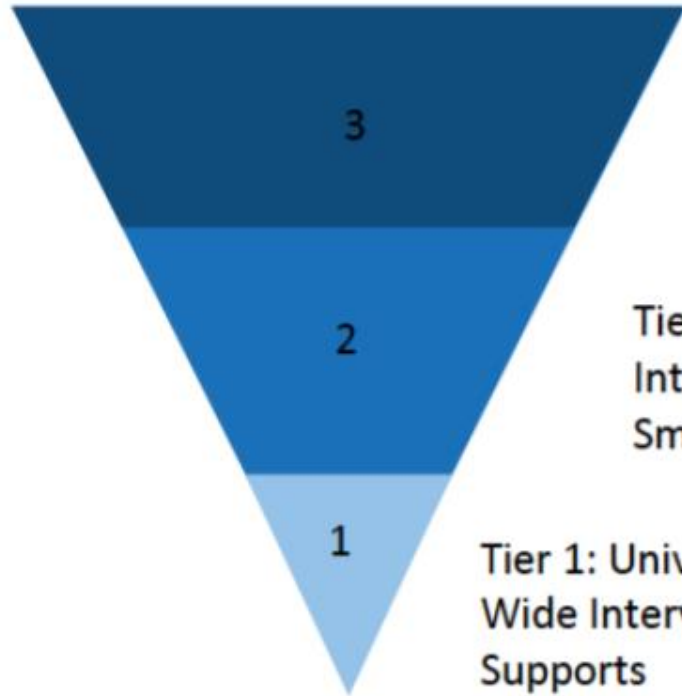
- **70%–80%** of children and adolescents who receive mental health services, access the services in school.
- Youth are **6 times more likely** to complete evidence-based treatment in a school setting vs a community-based setting
- With access to mental health professionals, **educators** report **increased abilities to respond** appropriately to students in psychological distress and **better relationships with students.**
- **Higher quality relationships with adults** for youth has been linked to reduced mental health distress and a protective factor against suicide.



STUDENT
MENTAL HEALTH
MATTERS

Staffing

Community Partner (Non-Credentialed)

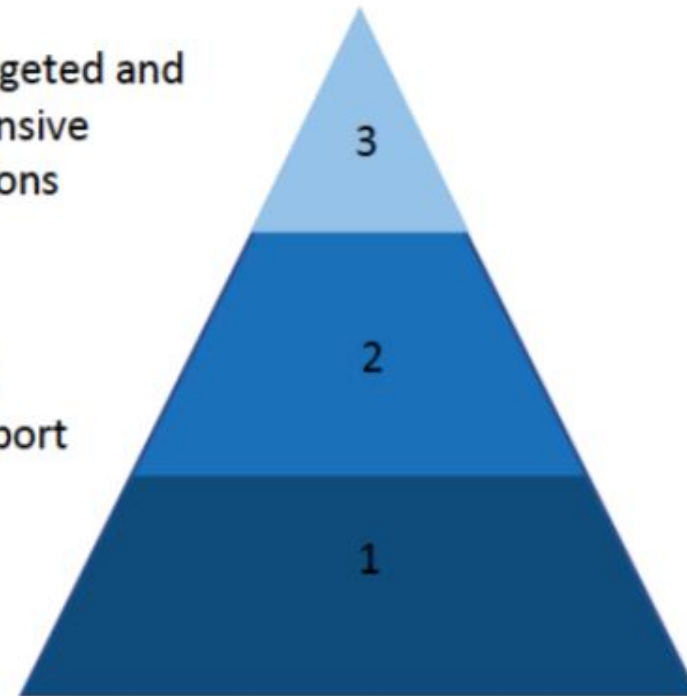


Tier 3: Targeted and more Intensive Interventions

Tier 2: Early Intervention and Small Group Support

Tier 1: Universal School Wide Intervention and Supports

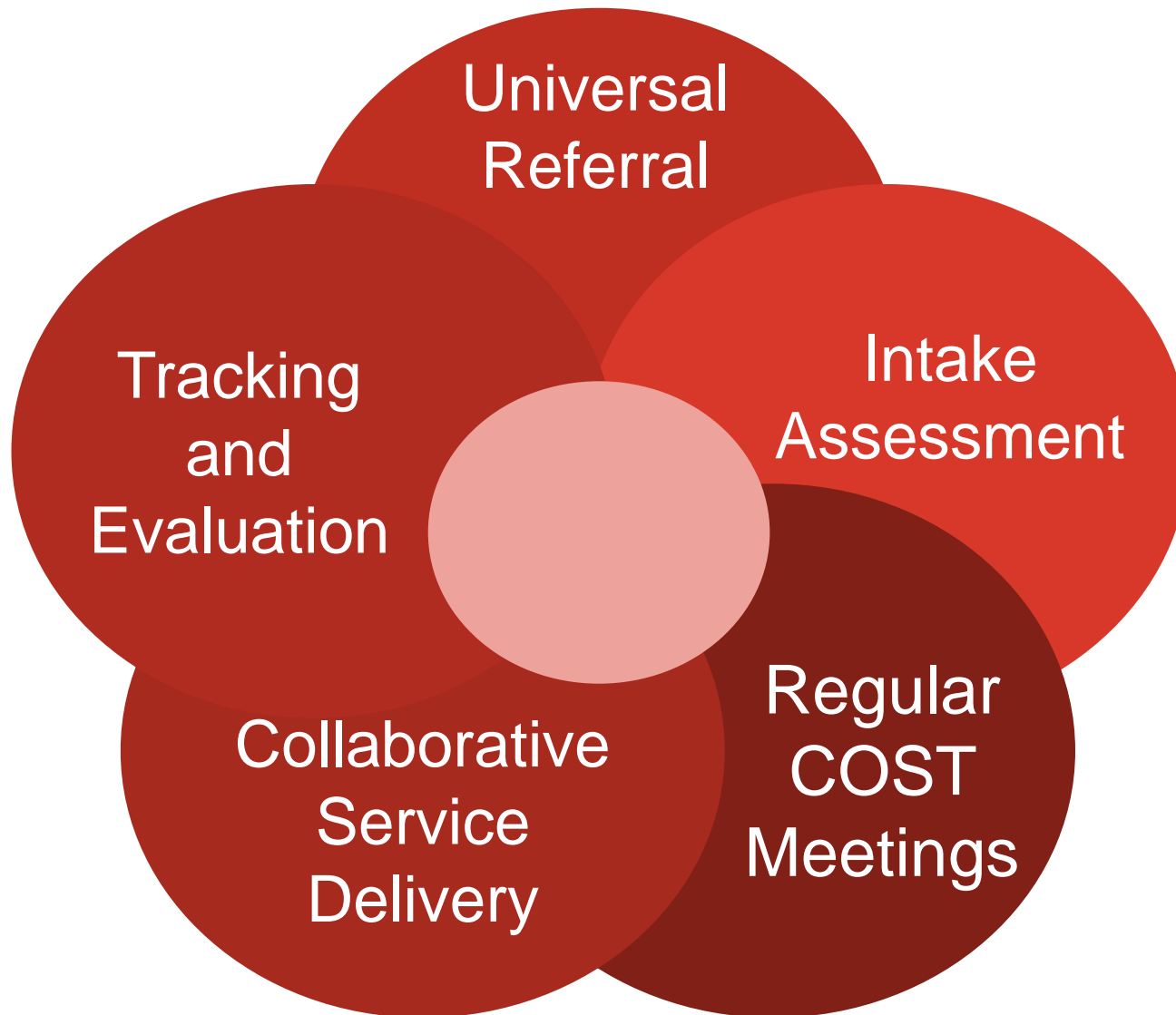
District (Credentialed)



- ❖ Licensed Clinical Social Worker
- ❖ Licensed MFT
- ❖ Associate clinicians (pre-license)

- ❖ School Counselors
- ❖ School Social Workers
- ❖ Uncredentialed staff **

Coordination



**Components of
school-site
coordination
team**

Referral Systems

Streamline

Coordinate referrals through one person, program or team

2 Forms

Develop at least 2 forms- for adults and youth/self-referral

Tracking

Create a system to track status of referrals, interventions, provider(s) and outcomes

Informed Staff

Educate everyone on campus about how to make a referral and what happens next

Crisis

Ensure the school community knows where to refer in a crisis (and what constitutes a crisis!)

WAIT a minute! What about...

- Confidentiality (HIPAA! FERPA!)
- Funding!
- MOUs and contracts!
- Quality assessment and improvement!
- Evidence-based practices!
- Summer vacation!



Takeaways & Resources

Takeaways

- Most court-involved youth are eligible for school-based behavioral health services (including uninsured students) but what is available depends on the county or district the youth is in
- It's important for the youth/ families AND adults working with youth to know what services the youth is entitled to (including confidential services) and what services are available through schools
- There are a lot of resources available!

Questions to Consider

- Is the youth over or under age 12?
- Is the youth currently enrolled in a school? Or will be?
 - What is the county and the school district in which the youth is (or will be) enrolled in?
 - What kind of programs and services are available at the school or the district?
- Does the youth have health insurance coverage?
 - If the youth has Medi-Cal
 - What county is the youth's Medi-Cal in?
 - Does the youth know how to use Medi-Cal?
 - Does the youth know about the minor consent program?

Resources

- **School Mental Health 101**

- [School-Based Mental Health: Improving School Climate & Students' Lives](#)
- [Overview: School-Based Mental Health Programs](#)

- **County examples**

- Connecting Students to Mental health Services [Guide](#)
- [Summaries of County-School Partnerships to Advance School Mental Health](#)

Resources Continued

- **School-based services in Medicaid**

- [School-based Health Services in Medicaid: Funding, Documentation, and Expanding Services” informational bulletin](#)

- **Medi-Cal**

- [Meeting the Moment: Understanding EPSDT and Improving Implementation in California to Address Mental Health Needs](#)
- [Medi-Cal Eligibility for Former Foster Youth Under the Affordable Care Act](#)
- [Addressing Barriers to Behavioral Health Coverage for Low-Income Youth](#)

Resources Continued

- **California Minor Consent Laws**

- Mental Health [Chart](#) & [Comparison](#)
- [Substance Use Disorder FAQ](#)
- Additional [resources](#)

- **California Confidentiality Laws**

- [HIPAA or FERPA? A Primer on Sharing School Health Information in California, 2nd Ed. \(2018\)](#)

Resources Continued

- **Department of Health Care Services**

- Medi-Cal Member Helpline
 - Call [1\(800\) 541-5555](tel:18005415555)
 - Visit [online resources](#)

- **Health Consumer Alliance (HCA)**

- Offers **free assistance** over-the-phone or in-person to help people who are struggling to get or maintain health coverage and resolve problems with their health plans
 - Consumer Hotline 888-804-3536 (TTY 877-735-292)
 - healthconsumer.org/ (English)
 - healthconsumer.org/es/ (Spanish)



Thank you!

Questions?

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