



Washington State
Health Care Authority

**REPORT OF SUMMARY RECOMMENDATIONS FOR CONTINUED
COLLABORATION
NOVEMBER 1, 2014**

**FOLLOW-UP TO: RECOMMENDATIONS TO FUND INTEGRATED SCHOOL
NURSING SERVICES
MARCH 1, 2014**

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Report of Summary Recommendations for Continued Collaboration

The HCA and OSPI thank the Legislature for providing funding to enable joint agency work in identifying potential federal funding opportunities to ensure that students receive access to school nursing services in Washington State.

This collaboration has helped identify potential opportunities while underscoring the need for on-going collaboration to bring lasting, positive changes to the interdependent systems of health and education in Washington State.

This briefing paper is provided as follow-up to a previous report, *Recommendations to Fund Integrated School Nursing Services*, submitted to the Legislature on March 1, 2014. In this paper, we offer some observations and suggestions for potential strategies, some new and some that build on those noted in the original report. These strategies may be employed to ensure that all students have robust, quality, cost-efficient, and universal access to school nursing and other health services in schools.

Recommendations:

- 1. Engage licensed health providers in the community to offer covered services in a school setting to all students in collaboration with school nursing services**

Potential Strategies Include:

In the previous report, it was noted a number of times that schools are obvious locations to provide comprehensive health services from prevention and screening to primary care and behavioral health services.

This recommendation can be addressed through school nurse care coordination of primary care, behavioral health, and oral health service partnerships currently being formed in the Accountable Communities of Health regions across the state.

With continued HCA/OSPI collaboration on health reform planning efforts, it is important for school nurses and Educational Service District leadership to participate with Community of Health Planning Grant awardees in the design and implementation of Accountable Communities of Health in their regions.

- 2. Explore a school nurse driven model to offer expanded covered services in a school setting to all students**

Potential Strategies Include:

- Since the initial *Recommendations* report was submitted, the U.S. Secretary of the

RECOMMENDATIONS TO FUND INTEGRATED SCHOOL NURSING SERVICES

- 1) Engage licensed health providers in the community to offer covered services in a school setting to all students in collaboration with school nursing services
- 2) Explore a school nurse driven model to offer expanded covered services in a school setting to all students
- 3) Investigate opportunities that arise from the Healthier Washington Initiative and other health system transformation efforts

- Department of Health and Human Services has stated that the CMS “free care”¹ rule that currently impedes reimbursement for the majority of school nursing services is being placed under review and results of that review are anticipated in fall 2014 (see attachment). Any changes in this rule could greatly impact the abilities of schools to more broadly provide and bill for school nursing services.

3. *Investigate opportunities that arise from the Healthier Washington Initiative and other health system transformation efforts*

Potential Strategies Include

- Monthly strategic planning meetings between OSPI and HCA to discuss collaboration and advocacy, including identifying upcoming Healthier Washington meetings that OSPI can attend or engage its constituents in.
- Maximize cross pollination stakeholdering activities such as arranging for OSPI to attend Managed Care Organization (MCO) monthly meetings at HCA to provide information about the school nursing services and systems in our state. In addition, HCA can attend a School Nurse Corps meeting to share information about HCA core programs.
- Expand the current SBHS program by implementing Individuals with Disabilities Education Act (IDEA) Part C services, also known as early intervention services for infants and children ages birth to three who have a disability, developmental delay, or diagnosed physical or mental condition. SBHS currently reimburses participating school districts for health-care-related services to Medicaid children in Special Education ages 3 to 21 under IDEA Part B. Reimbursement for Part C services provided by licensed school staff under the SBHS program would allow schools to draw down additional state and federal monies. Currently, expansion of Part C services is under way through a State Plan Amendment.

Since the initial *Recommendations* report was submitted, Washington has implemented a number of activities related to the State Health Care Innovation Plan and recent legislation, 2SSHB 2572, which laid out the policy framework for the State’s Innovation Plan. Additionally, Washington submitted its request for \$92.4 million to the Center for Medicaid and Medicare Innovation, State Innovation Model test proposal, incorporating core elements of the Innovation Plan. These efforts are collectively branded The Healthier Washington Initiative. A number of activities are already under way and some forthcoming. These activities collectively provide great potential for further engagement across the health and education sectors at state, regional and local levels:

- Community Empowerment and Accountability: HCA has awarded 10 entities Community of Health grants to support initial planning and development of Accountable Communities of Health (ACH). ACHs are intended to drive health delivery system and community linkages at a regional level and will serve as a core infrastructure to build healthy communities and improve population health. They are structurally similar to an established model of regional Educational Service Districts (ESDs) that serve as hubs of multidisciplinary expertise,

¹ The free care rule states that Medicaid funds may not be used to pay for services that are provided for free to everyone in the community. For example, if all children in a school receive vision screening, Medicaid cannot be billed for the screenings provided to Medicaid recipients unless all students, regardless of insurance status, are also billed for the services.

providing a wide variety of technical assistance, training, programs, and support services that reflect and support community needs. ACHs are a critical component of the Healthier Washington Initiative, and their success will require partnerships across sectors within a region. HCA and OSPI recognize the opportunities in, and mutual benefits of collectively engaging with each other and with core regional partners in expanding the capacity to create a healthier Washington.

- The Performance Measure Coordinating Committee formed through ESSHB 2572 is tasked with developing a statewide measure set around three core areas, Prevention, Chronic Disease and Acute Care. Because much of the work of school nurses is focused on preventive efforts, and on management of chronic health conditions that mitigate disease progression and severity, staying abreast of this work, and exploring potential opportunities with others who have a stake in reducing the human and economic costs of chronic disease will be of mutual benefit for OSPI, HCA and other stakeholders.
- As Washington strives to develop more coordinated care delivery, the ability for schools to interface more effectively with health information technology and exchange efforts will serve Washington students well.
- Payment and Delivery System Reform: Health reform efforts in Washington are striving to provide whole person care to improve health, improve outcomes and lower costs. Existing nursing services in Washington State schools provide a model system of health care, recognized for outstanding economic value and quality health outcomes. In 2013, Governor Jay Inslee presented the School Nurse Corps (SNC) with the Warren Featherstone Reid award, citing its “innovative service delivery model” in providing quality and comprehensive health services to more than 1 million children in Washington State. In addition to ensuring daily student safety by implementing plans and protocols to address potentially life-threatening health conditions, and managing and reducing the long-term complications and disabilities of chronic health conditions, school nursing services are positioned to meet all Washington State health reform priorities (universal access -- particularly to underserved and geographically isolated children and families – focus on prevention, quality integration of behavioral and physical health care and case management, and proven economic efficiencies). Because these services are regionally based, they are able to respond with flexibility to emerging or changing community needs. As new models are developed, recognizing the assets school nurses bring to regional health system will be critical.
- Communication and Engagement: During the planning and implementation period, the Healthier Washington Initiative will strive to inform and engage OSPI actively in community empowerment and accountability initiatives. The Healthier Washington Initiative encourages OSPI to stay abreast of and engaged in these opportunities and provide information to their constituents. OSPI will continue to serve as an agency member of the Health Innovation Leadership Network, the evolved advisory governance structure to advise the Healthier Washington Initiative, to integrate data and leverage existing data.

Exploring new opportunities that increase the capacity for all children to access health care at school requires time, staffing resources, and extensive stakeholder engagement. While we are jointly committed to continued collaboration, OSPI and HCA are both constrained by limited resources. To effectively meet the goal of improving access to school nursing and other health services for all students in school settings, and to produce a thoughtful, well-researched and comprehensive strategy that delves more deeply into other state systems and engages critical external stakeholders, we believe it is necessary to receive dedicated resources to do this work. Without them, we will find opportunities to engage in the above strategies in an ad-hoc manner. We remain committed to this work and very much appreciate the Legislature's investment in ensuring that all children have access to a school nurse.