

# New Mexico School-Based Health Centers: July 2017 Update for LHHS

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## Our discussion today

- I. NMASBHC and SBHCs: WHY We Are
- II. SBHCs: Where We Have Been
- III. SBHCs: Where We Are
- IV. SBHCs: Where We Are Going
- V. SBHCs: Questions

# The Galvanizing Challenge for NMASBHC (or WHY We Are)

## Our organization's mission:

- NMASBHC represents school-based health centers in New Mexico and collaborates with other partners to promote, facilitate, and advocate for comprehensive, culturally competent health care, including health education, in schools.

## Maximizing Child Health Outcomes & SBHC Sustainability

- Research Shows Benefits of SBHCs for Children
- Research Shows Benefits of SBHCs for Families
- Research Shows Benefits of SBHCs for Communities
- Research Shows SBHCs Need Funding Support for Sustainability

# The Galvanizing Challenge: WHY We Are

## Benefits of SBHCs for Children

- Health Outcomes
  - Primary Care
  - Access
  - Behavioral Health
  - Improved health literacy
- Academic Outcomes
  - Absenteeism rates
  - Graduation rates

# The Galvanizing Challenge: WHY We Are

## Benefits of SBHCs for Families

- Access
  - Addressing provider shortages
  - Convenience – especially regarding transportation
  - May be open to whole family
  - May have specialty not otherwise available – sometimes with telehealth
  - May help manage child’s chronic care
- Finances
  - Reduces employee absenteeism rates
  - Reduces cost associated with inappropriate use of urgent care and emergency departments

# The Galvanizing Challenge: WHY We Are

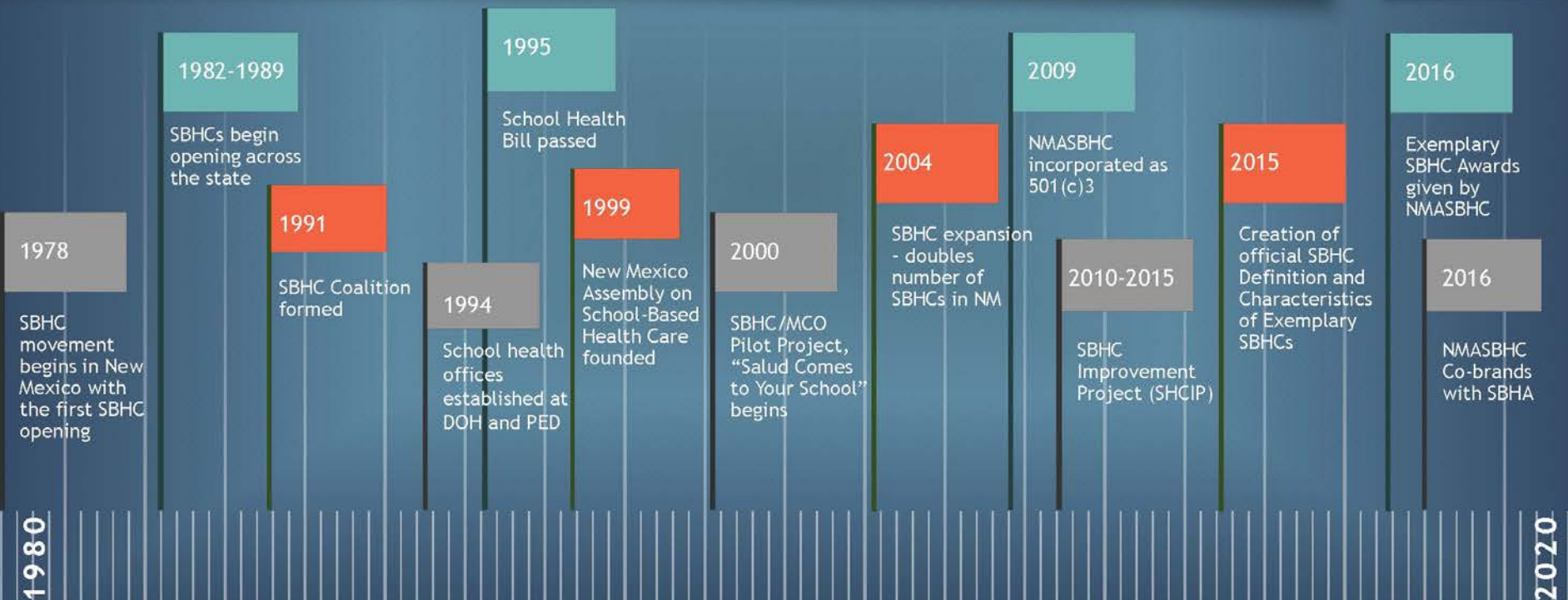
## Benefits of SBHCs for Communities

- Access
  - Addressing provider shortage areas
  - Providing convenience – especially regarding transportation
  - Staying open to whole family
  - Providing specialty not otherwise available
- Effect on Economy
  - Supporting employers with workforce
  - Reducing inappropriate use of emergency departments & urgent care
  - Improving long-term effect on community healthcare systems through health literacy
  - Basic ROI indicates a minimum of \$7.01 for every \$1 invested

# SBHCs: Where We've Been

## History

### NMASBHC and the SBHC Movement Timeline



# SBHCs: Where We've Been

## Number of Clinics

- 1978 – First NM SBHC opens and numbers steadily increase in coming decades
- 2004 – Governor & Legislature double SBHCs from 34 to 68, with all receiving DOH funding
- 2012 – Due to recession-era funding cuts only 52 of 70 NM SBHCs receive DOH funding
- 2015 – 5 SBHCs funded by NMDOH have contracts cut
- 2016 – 2017 – DOH funds 48 SBHCs



# SBHCs: Where We've Been

## Number of SBHC Visits Follow Levels of Funding



# SBHCs: Where We've Been

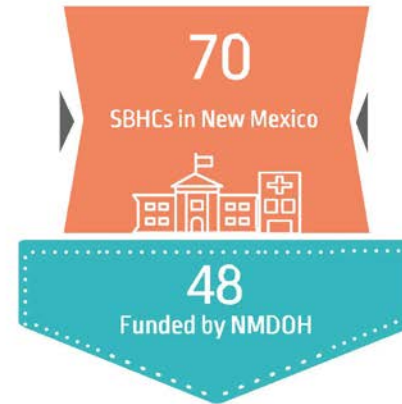
## Funding & Care

- A \$380,000 decrease in DOH funding between 2010-2012 resulted in cuts to the SBHC program and a decrease of 19,000 youth visits
- FY15 billing analysis of 16 SBHCs showed: only 75% of claims dollars were reimbursed, 21% of services were for children with private insurance seeking confidential care and were not billed as a result, 9% of services were provided to uninsured youth
- In a sample review of 10 SBHCs in FY16, data indicates that an SBHC absorbs an average of \$38,201 each year for the care of the uninsured and the privately insured
- SBHCs provide services that are not billable to Medicaid or private insurance: care coordination with school personnel; providing health and health literacy education and teacher training, and responding to campus crises
- Every decrease in DOH funding for SBHCs results in a reduced federal Medicaid match

# Where We Are 2016-2017

## New Mexico School-Based Health Centers

School-based health centers provide critical health services to students who may otherwise have little or no access to care. SBHCs keep kids in school and parents at work.



### Where are SBHCs located?



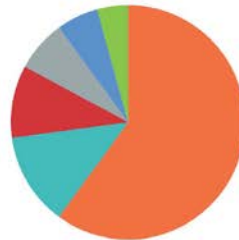
- 43 High schools
- 9 Middle Schools
- 2 Elementary Schools
- 16 combined grade campuses

### Who do SBHCs Serve?

- 47% serve students from other schools/districts
- 70% serve school staff
- 41% serve family/siblings of students
- 15% serve the broader community

\*based on the 66 SBHCs who self-reported to NMAASBHC

### Who Sponsors SBHCs in New Mexico?



### What Services do SBHCs Provide?

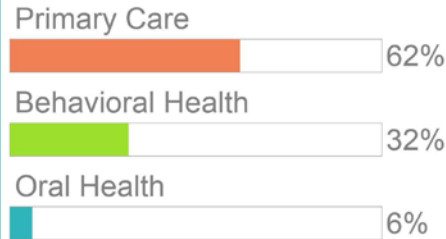
- ✓ Comprehensive wellness exams (EPSDT)
- ✓ Behavioral health counseling
- ✓ Acute care for minor illnesses and injuries
- ✓ Reproductive health care
- ✓ Diagnosis, treatment, and management of chronic diseases

# Where We Are 2016-2017

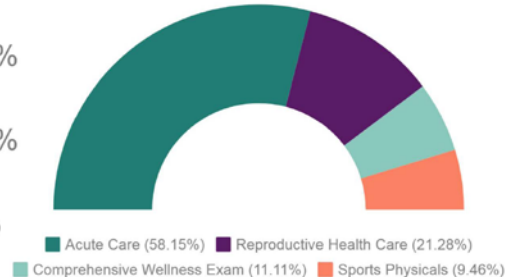
*Of 1050 SBHC patients completing a survey, 48% indicated that their SBHC was the ONLY place they accessed healthcare in the last year. Another 7% said they had accessed dental care elsewhere but not primary or behavioral health.*

## 2016/2017 NMDOH Funded SBHCs

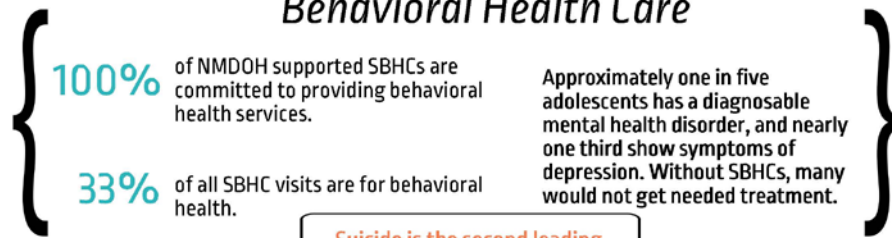
### Types of SBHC Visits



### Primary Care Visits by Type

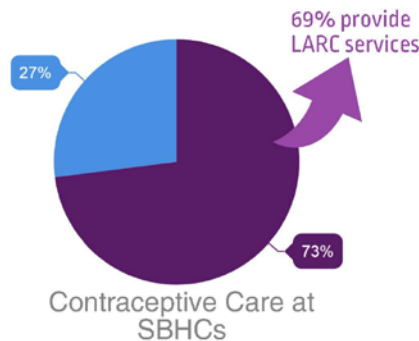


### Behavioral Health Care



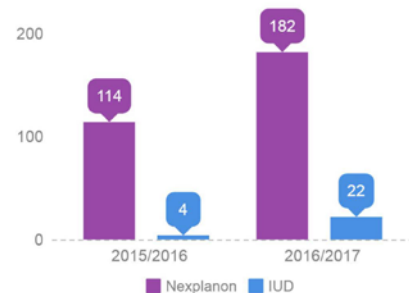
**Suicide is the second leading cause of death for 10-24 year olds**

### Reproductive Health Care



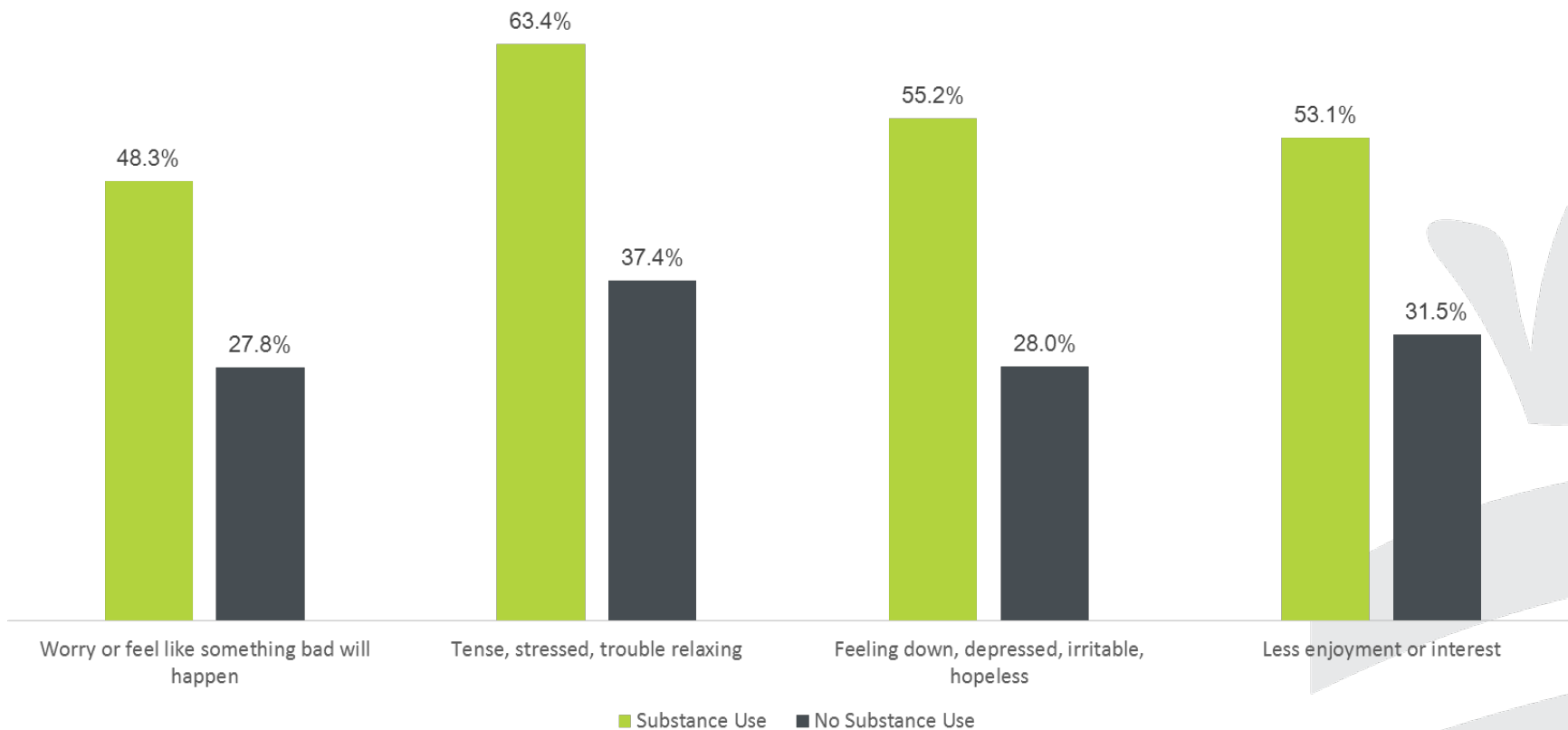
Provide Contraception (73%) Don't Provide Contraception (27%)

### SBHC LARC Insertions



# SBHCs: Where We Are

Health Screen Data (eSHQ) (5,099 total)



# SBHCs: Where We Are

## Funding for SBHCs

	2016 -2017 Budget for SBHCs
General Fund for OSAH	\$2,647,500
Federal Medicaid Match	\$666,450
<b>Total Investment</b>	<b>\$3,311,950</b>

Every dollar spent on SBHCs returns **\$7.01** to New Mexico!



# School-Based Health Centers

“ **WITHOUT SBHCS...**

thousands of youth would be at great risk for suicide, early pregnancy, and entering the health system through expensive emergency and intensive care services.”

*SBHC Partner*



“ **SBHCS ARE IMPORTANT BECAUSE...**

so many parents are busy working and do not have time to take their children to doctor appointments. Parents are always so grateful to have us there to care for students.”

*SBHC Staff Member*

“ **SBHCS ARE SPECIAL BECAUSE...**

they provided me with critical sexual/reproductive healthcare access while I was in high school. I was unwilling to talk to my parents about going to the doctor to get tested for STIs and to get birth control. If it wasn't for my SBHC providing free and confidential services I would not have sought help.

Additionally, my provider helped educate me about sexual health and counseled me to make better and wiser sexual and reproductive choices. My school did not provide sex education, my parents provided it too soon for me to care or retain the information, and as a result I made very poor choices. I am so grateful that someone referred me to the SBHC, because without Robert (PMS provider at SFHS) I wouldn't have accessed birth control and might have had an unwanted pregnancy before I was 16, based on the choices I was making.”

*Danielle, past SBHC patient*

# SBHCs: Where We Are Going

## Opportunities and Challenges

- Challenge: Substance use and abuse rates are high in New Mexico generally and among youth
- Opportunity: SBHCs provide behavioral health/substance abuse screening and healthcare services in a convenient and youth-friendly structure with integrated primary and behavioral health care
- Challenge: Behavioral healthcare provider and clinic shortages plague New Mexico
- Opportunity: SBHCs are a model of integrated care, and in some communities behavioral health is more quickly available to youth in their SBHC than more generally in the community



# SBHCs: Where We Are Going

## Opportunities and Challenges

- Challenge: New Mexico has one of the highest rates of unintended teen pregnancy in the country
- Opportunity: Through community partnerships and the efforts of DOH and HSD, comprehensive reproductive health services including counseling, STD screening and LARC (long-acting reversible contraceptives) access and utilization is increasing in SBHCs
- Challenge: SBHCs regularly provide healthcare to the privately insured for confidential visits (behavioral health, substance use, reproductive health) and absorb that cost
- Opportunity: While there is no silver bullet solution to this challenge, NMASBHC is working diligently with a community coalition to draft mitigating policy recommendations that may offset some portion of this cost

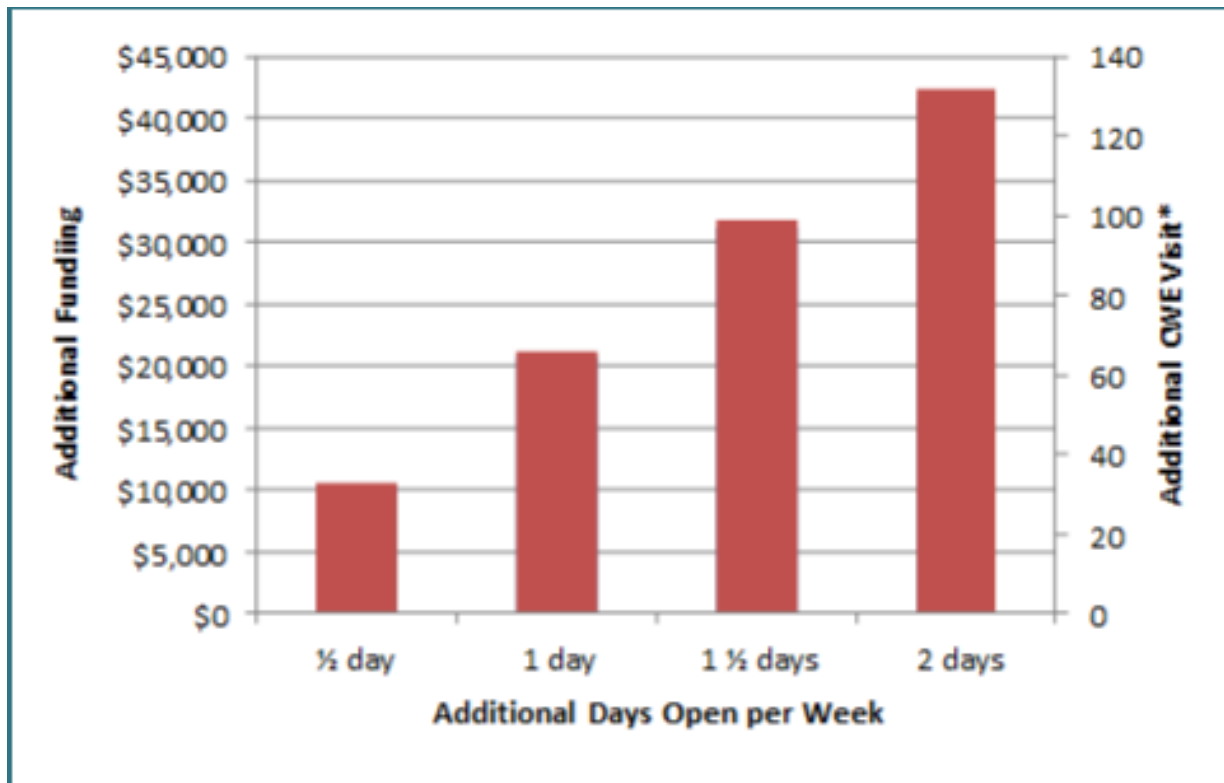
# SBHCs: Where We Are Going

## Opportunities and Challenges

- Challenge: SBHCs regularly provide services that are not billable to Medicaid or private insurance: care coordination with school personnel; providing health literacy education and teacher training, and responding to campus crises
- Opportunity: SBHCs provide services in an educational setting and educate children and educators in ways that save money through prevention and in the long-term through health literacy of the populace
- Challenge: Every decrease in DOH funding for SBHCs results in a reduced federal Medicaid match
- Opportunity: Every dollar spent on SBHCs enables the state to bring in federal monies

# SBHCs: Where We Are Going

Dollars for SBHCs provide healthcare services for children that result in innumerable benefits to the state and its residents in both the short and long-term. NMASBHC strongly encourages the legislature to provide additional funds when possible and to always protect existing funding; there truly is no other way for this successful healthcare model to survive.



# SBHCs: Where We Are Going

## School-Based Health Centers: Addressing New Mexico's Health Priorities

"Students from our SBHC group partnered with a county organization to address prevention of tobacco sales to minors by checking compliance at local businesses. They also provided tobacco education to the community. Not only are they making a positive impact on their peers, but their involvement is lifting their own self-esteem."  
- SBHC Staff

### Tobacco Use

"Our SBHC staff provides suicide prevention presentations for our schools' health & PE classes. Creating awareness has resulted in students reaching out to us for help for themselves and friends when self harm and suicide are real risks."  
- SBHC Team

### Suicide Prevention

### Asthma

"We saw a student with uncontrolled asthma whose family struggled to get her to appointments due to transportation needs. The location of the SBHC helped us better support the family, and the student's asthma is under better control and her school attendance has improved."  
- SBHC Staff

"I am so grateful that my child has access to the same services I did 20 years ago. My senior year was a particularly difficult time for me and I was in desperate need to talk about what I was going through. If I had not received that support or had access to counseling who knows where I would be today!"  
- Parent of SBHC Patient



## School-Based Health Centers: Addressing New Mexico's Health Priorities

"I am seeing an elementary student who is obese, as are both of her parents. She is very motivated and setting goals like drinking more water and eating more vegetables. Her BMI is now trending downward, and her parents are very grateful."  
- SBHC Provider

### Obesity & Diabetes

"During a sports physical, a student expressed concern about substance abuse. We were able to provide behavioral health care that is helping address that need, and the student was especially grateful that the care can be provided confidentially."  
- SBHC Staff

### Substance Abuse

### Unintended Teen Pregnancy

"After teaching a family planning lesson in a health education class, I was approached by a student who wanted help not becoming pregnant. Both partners made appointments at the SBHC and got education, contraception and STI testing. That classroom integration is critical."  
- SBHC Staff



## Questions & Feedback

NMASBHC is anxious to hear from legislators about how we can help improve healthcare for New Mexicans:

What questions do you have for us?

What feedback do you have for us?

## Wrapping Up

### Staying in Touch

Tools: [www.nmasbhc.org](http://www.nmasbhc.org) or email NMASBHC

Nancy Rodriguez, [nancyrodrigueznmasbhc@gmail.com](mailto:nancyrodrigueznmasbhc@gmail.com)

(505) 404-8059

THANK YOU FOR INVITING US TO BE HERE