School-Based Health Centers and Health Systems Transformation

Oregon is undergoing a significant health system transformation to achieve the triple aim of better health, better care and lower cost. Oregon’s plan to meet these outcomes for its population includes implementation of the coordinated care model. The model was first implemented for the Medicaid population and will be extended next to public employees. The coordinated care model emphasizes primary care and Oregon’s Patient-Centered Primary Care Homes (PCPCH).

Today more than 90% of Oregon’s Medicaid population is being served through a local Coordinated Care Organization.

Oregon’s PCPCH model requires care to be coordinated, continuous, accessible, comprehensive, culturally competent and include individually tailored care for children and adolescents. Clinics must apply to the state and meet certain criteria to be recognized as certified PCPCHs.¹

**Role of School-Based Health Centers in Health Care Transformation**

School-Based Health Centers (SBHCs) are important local partners in our current and emerging health care delivery system and are well positioned and ready to contribute to the goals of health care transformation.

**SBHCs align with the PCPCH model and Oregonians support them:** SBHCs exemplify many of the core attributes of the PCPCH model by providing high quality care specific to the needs of children and adolescents. Because they provide easy access to physical, mental and preventive health services for Oregon’s youth in school settings, SBHCs are uniquely positioned to help meet the goals of Oregon’s coordinated care model.

Oregonians strongly support SBHCs providing primary care services, including well-child visits, vaccinations, mental health counseling, and treatment of minor injury/illness as well as chronic disease.

¹ [http://www.oregon.gov/oha/ohpr/Pages/healthreform/pcpch/index.aspx](http://www.oregon.gov/oha/ohpr/Pages/healthreform/pcpch/index.aspx)

---

**School-Based Health Center Basics**

The School-Based Health Center (SBHC) model is nationally recognized and provides school-aged youth with comprehensive physical, mental and preventive health services delivered by qualified medical providers in a school setting.

There were 65 SBHCs operational during the 2012-2013 school year, providing health care to 22,408 clients.

20% of Oregonian parents have a child who has attended a school with a SBHC (Oregon BRFSS 2011).
Although there is no requirement to do so, SBHCs have the option of becoming a recognized patient-centered primary care home (PCPCH). Clinics must meet certain standards to qualify, and can achieve three different tiers of recognition that reflect increasing rigor or services depending on the criteria they meet. Recognized PCPCHs have incentive payment opportunities that other clinics do not, with each higher tier having more opportunities. These payments are for the enhanced services that patients receive in a PCPCH, such as care coordination and health promotion, which are traditionally not reimbursable.

As of March 2013, 43% of SBHC sites have applied and received Tier 2 or 3 PCPCH recognition. Nine of the 28 PCPCH recognized SBHC sites (13%) are receiving supplemental payments.

To better understand the needs of SBHCs within the context of emerging health care reform practices, an assessment was undertaken by the Oregon Health Authority in partnership with the Oregon School-Based Health Care Network in spring 2013. The findings are shown below.
Barriers Facing SBHCs to Achieve PCPCH Recognition: Certain elements of transformation may be easier for clinics that are part of a larger health care system with built-in infrastructure, such as Federally Qualified Health Centers (FQHCs). Some SBHCs perceive barriers to achieving PCPCH recognition. Reasons included:

- inability to support the requirement for 24 hour access to clinical advice via telephone
- limited capacity to collect and submit required data
- insufficient administrative support
- lack of staffing capacity
- current funding and budget is inadequate to meet PCPCH standards
- competition for patients
- a lack of understanding of Public Health role in the PCPCH model

SBHCs participate in CCO governance: Local Medicaid Coordinated Care Organizations must ensure their governance structure reflects community needs and are required to convene regular meetings of community advisory councils (CACs). CCOs may also choose to establish a clinical advisory panel, on which SBHCs may participate.

- 46 SBHC sites (71%) report having some representation within CCO governance committees.
- Involvement is not usually at the SBHC level; representatives are primarily CEOs of Federally Qualified Health Centers, County Commissioners, or Health Department Administrators.
- Over half of the SBHCs indicated their representative to the CCO committee is very invested in the SBHC.

SBHCs help CCOs meet incentive metrics: CCOs are required to collect data that will be used to inform 17 outcome and quality measures (aka Incentive measures). One of these measures is adolescent well-care visits. SBHCs are poised to aid in helping CCOs meet this metric, as they are clinics that primarily serve and are easily accessible to youth.

SBHCs are in the process of defining relationships with CCOs: CCOs have the ability to create contracts with different provider arrangements and that include alternative payment strategies. Existence of a contract allows for data-sharing and improving coordination of care, and can facilitate provider relationships. Nearly a quarter of SBHCs do not currently have or are unsure whether they have a contract with a CCO. Legislation passed in the 2013 legislative session (HB2445, SB436) that provides direct support for optimizing the SBHC-CCO relationship.

As we move into the second year of coordinated care implementation, CCOs will continue to strengthen their network of local providers and the state has begun assessing and reporting on CCO progress. While Oregon continues its health care transformation, work will be done to better define the role of SBHCs and their relationship with CCOs.
For more information visit:

www.healthoregon.org/sbhc

www.health.oregon.gov

http://www.primarycarehome.oregon.gov