

**HOUSE OF REPRESENTATIVES
COMPILATION OF PUBLIC COMMENTS**

Submitted to the Committee on Human Services
For HB 1571

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Hearing Date: March 28, 2023 8:00 AM

Eric Kunish
National Alliance on Mental Illness
Austin, TX

I am a proponent of this bill. Thank you!

Clayton Travis

Texas Pediatric Society, Partnership for a Healthy Texas

Austin, TX

On behalf of the Texas Pediatric Society and the Partnership for a Healthy Texas, thank you for the opportunity to provide testimony on House Bill 1571. We strongly urge you to support HB 1571 to help students access health services at school and to provide school districts with sustainable funding for health services.

Over 5 million children attend Texas' public schools each day. With how much time children spend in school, the education system presents an opportunity to meet children where they are to provide health services. Many students already benefit from speech therapy, audiology, mental health screenings, and nursing services provided by school-based providers. Having these services within the school environment makes them accessible to students because parents do not have to take off time from work for appointments or deal with transportation, both barriers to care. It also reduces missed instruction time because student travel moves from across town to down the hall. However, currently only a sub-set of Medicaid enrolled students can fully access these services while at school.

With House Bill 1571, Texas can help more students on Medicaid access the benefits of school-based services, promoting both health and academic outcomes. This change would allow districts to bill Medicaid for all Medicaid-covered services provided to students already enrolled in Medicaid. Texas schools are currently only authorized to bill for services provided to Medicaid-enrolled students if those services are included in the student's individualized education plan (IEP). Establishing an IEP can be a long process, taking up to 75 days. Interventions in IEPs center on academic goals, meaning health-related services like mental health screenings that are not education-related are not provided. Students who do not require an IEP may also benefit from these school-based health services.

Allowing schools to bill Medicaid for services brings school districts a new and sustainable source of federal funding which can be used to bolster healthy school environments. Many schools already provide some of these health services because they see the benefits to students. Being able to bill Medicaid, however, would relieve the strain on the school budget and would give districts the capability to hire school health staff and provide more services. Consistent staffing of school health roles can better support investments in the Whole Child School Health approach which includes a broad range of practices from health education to physical activity to nutrition, practices that help students develop habits that keep them healthy long-term. All Texas students benefit from this investment, not just those who are receiving direct services. More than 17 states have adopted this change to support schools and students, including Florida, Georgia, and Arizona.

Shannon Hoffman

The Hogg Foundation for Mental Health

Austin, TX

HB 1571 would allow school districts to receive reimbursement for delivering services to children already enrolled in Medicaid. Currently, Texas schools are only able to receive reimbursement if the services are provided to a student receiving special education services and the service is required through their Individualized Education Program (IEP). In 2014, CMS issued guidance allowing states more flexibility in their school-based Medicaid programs, allowing districts to bill Medicaid for health services delivered to all Medicaid-enrolled children. In Texas, this program is known as Schools Health and Related Services or SHARS.

Over the past two decades, rates of Texan children who have felt hopeless, struggled with anxiety or depression, and experienced suicidal ideation have been rising. For a student experiencing trauma, stress, or other difficult life events, learning can be challenging. Trauma and stress are associated with difficulties with concentration, memory, motivation, and decision making. Alternatively, students who are emotionally and mentally well can better engage in learning. Integration of mental health into schools can encourage normalizing discussions, increase access to care, and provides opportunity for early identification and intervention, especially in rural schools where mental health resources in the community are often scarcer. Mental health initiatives and services provided in schools are related to increased test scores, commitment to school, attendance, grades, and graduation rates, while improving truancy and disciplinary rates.

This recommended change could not only increase access for more children but increase federal revenue to the state and more reimbursement to districts. Many Texas school districts are already currently enrolled in the SHARS program and deliver these services. In FY 21, 952 school districts billed Medicaid for mental health services. Further, many states across the country have taken advantage of this. As of March 2023, 19 states, including Arkansas, Florida, Georgia, Kentucky, Louisiana, and South Carolina, have extended their school Medicaid programs and increased schools' opportunity for reimbursement.

When mental health care is accessed in schools, the child, their family, and their school all benefit. Students spend more time in school, and employers and caregivers are not impacted by missed work. Further, supporting mental health in schools and improving the school's climate leads to teachers feeling better supported and higher rates of job satisfaction. A focus on creating schools that provide support for every student's mental health when they need it is imperative to combat the wide array of difficulties our kids face today. The goal should be a more preventative approach—focusing on creating positive school climates and building relationships among students, staff, and the community before a crisis occurs.

Lee Spiller

Citizens Commission on Human Rights-Texas

Austin, TX

Against- While we recognize the need for students under the School Health and Related Services program to receive services so that they can receive a free and appropriate public education, we have concerns about school districts becoming full blown Medicaid providers, particularly in the area of mental health.

How many more children will be put on psychotropic drugs?

Given the many surveys, "check-ins" and other screenings that have been worked into everyday school life, how will students' and families private information be protected from those who might sift them to find eligible children?

According to testimonies, schools already have problems finding counselors or social workers. So the only practical way this could play out would be for school districts to contract the service provision private psychiatric providers. What is to keep such providers from using these students to fill inpatient beds? This has happened before. In the early 1990's, a number of major psychiatric hospital chains were accused of paying kickbacks to school counselors. In some cases, hospital chains provided school counselors to schools, who then referred back to the psychiatric facilities. This became the subject of lawsuits, prosecutions and Congressional hearings.

More recently, a search of psychiatric hospital Facebook pages found marketing teams contacting schools or giving lectures to school counselors. While we make no accusation of wrongdoing, this type of legislation raises concerns that we could see a return to such practices. Only in this case, the schools would be paid by Medicaid, not providers.

Susan Burek

I am a Parent and an advocate for people with disabilities

Austin, TX

I SUPPORT HB 1571 which allows school districts and charter schools to provide health care, behavioral health services, and nursing services at school to students with Medicaid and bill Medicaid for these services through the SHARS program. This will provide an important medical benefit to students with Medicaid.

However, since the SHARS program doesn't provide Explanation of Benefits (EOB) notices to parents AND the Medicaid program doesn't provide EOBs to parents, the parents have no way of knowing what medical, behavioral health, or nursing services were provided to their children. Since the parents are responsible for coordinating the medical care for their children, it is very important for the parents to be aware of the dates and descriptions of services delivered to their children to avoid any potential duplication or errors in services.

In addition, some parents whose children receive SHARS medical services at school have complained about fraud in the SHARS program. It is important for EOBs to be provided to parents to allow parental information and oversight and to prevent any potential SHARS fraud or overbilling problems.

Please consider amending HB 1571 to include EOBs to be provided to parents whose children with Medicaid receive medical services at school that are billed through the SHARS program.

Thank you very much for your consideration of my comments.

Pamela Culley

Self

Frisco, TX

Health care services and Medicaid services relating to health care should not be administered in public schools. Parental rights as well as privacy rights are being stripped by publicizing healthcare for minors in the schools. Parental rights continue to be stripped in Texas under an illusion of "help" for the students. Please do not allow schools to have health centers that essentially would be a replacement for family doctors. I realize the narrative for this is for "underprivileged kids" but there is much more to this than meets the eye. With every rights stripping being done to families it's always under an illusion of "helping" the underprivileged. Please stop using mom and dad hearts who would do anything to help kids out to allow for their rights to be stripped by these bills.

Sydney Carter

Network of Behavioral Health Providers

Houston, TX

NBHP supports this bill.

Diana Tang
Self
Houston, TX

I am writing to share my support for HB 1571, which would increase access to mental health services for Medicaid-eligible students. I would ask the Health and Human Services committee to please support student mental health by voting HB 1571 out of committee.

Over the past two decades, the rate of Texas children who have felt hopeless, struggled with anxiety or depression, or experienced suicidal ideation has been rising. In Texas, the high school suicide rate is 66% higher than the national average. Mental health conditions often manifest by age 14, and the stress of the pandemic intensified mental health symptoms for many students.

To make matters worse, in 2021 nearly 65% of Texans ages 12-17 who experienced depression did not receive any care. Lack of mental healthcare can create barriers to learning for students experiencing trauma, stress or other difficult life events. Trauma and stress are also associated with difficulty concentrating, poor memory, lower motivation and strained decision-making. Alternatively, students who are emotionally and mentally well are more engaged in learning.

School is often the first place we realize that a child needs mental health support. Currently, students need an individualized education plan (IEP) to receive behavioral healthcare at school, but this session, lawmakers are attempting to expand access to school-based mental healthcare.

HB 1571 (Lozano) would allow school districts to claim federal Medicaid funding for services provided to Medicaid-enrolled students, including mental health services, regardless of whether the student has an IEP.

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EVE MARGOLIS

Self

Austin, TX

I support this bill. Students need healthcare where they are. Many students cannot access providers outside of school. This bill gives all students the ability to get support.