SUCCESS BEYOND SIX SCHOOL MENTAL HEALTH AND COVID-19

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QUICK SB6 OVERVIEW

- Success Beyond Six (SB6) is the name for the Medicaid funding mechanism for school mental health services provided through Designated mental health Agencies in partnership with a Local Education Agency (LEA; school district)
- FY20 ~ \$70M budget; 831 FTEs; over 3K students
- There are LEA/DA contracts for SB6 school mental health in nearly every school district in Vermont and 13 independent schools

	Total in	With any
SFY 2020	VT	SB6 # (%)
Public Schools	292	201 (69%)
Supervisory Unions	53	48 (91%)

Services & Funding Structures:

School-Based Clinical Services	Monthly Case Rate	
School-Based Behavioral services	Fee-For-Service	
C.E.R.T. Therapeutic Schools	Daily Rate	

Report:

Review of Success Beyond Six: School Mental Health Services Act 72 (2019), Section E.314.1. January 15, 2020



- DMH developed guidance based on emerging information <u>https://mentalhealth.vermont.gov/information-coronavirus-covid-I9-0/service-providers</u>
- Essential Services guidance for DA/SSAs mental health services
- DMH & DVHA leveraged Covid-19 related Medicaid flexibilities to alleviate restrictions on service delivery and payment mechanisms
- Success Beyond Six (SB6) guidance to DAs on provision of school mental health services during school closure/ remote learning
- DMH held "office hours" for open communication with DA leadership regarding SB6 needs and changes related to Covid-19

SB6 GUIDANCE FOR COVID-19

Goals are to maintain services to the greatest extent possible for students & families, staff retention, flow of funding to DAs, and safety for all

SB6-specific changes in place:

- All SB6 services may be provided through telehealth (video + audio) or phone (audio only) with the student and/or family in their home or chosen setting during this period
- DMH lowered minimum thresholds of service to bill
 SB6 services for the services with case rate/ daily rate
 - School-based clinicians monthly case rate: lowered from 2 hours of a qualifying service per month to 1 hour of a qualifying service per month
 - <u>CERT (therapeutic schools)</u> daily rate: lowered from 2 hours of a qualifying service to 15 minutes of a qualifying service per day
- DMH allowing delayed match payments within fiscal year
 - Asking DAs to confirm match will continue to flow from LEAs

CONTINUED FOCUS: BEHAVIORAL INTERVENTION PROGRAM

- Behavioral Intervention Programs are Fee-for-Service and are seeing biggest impact of reduced service & billing
 - 566 BI FTEs; 42 BCBA FTEs;
- Exploring emergency case rate to shore up fiscal risk and staff retention
 - DMH working closely with DA Execs, CFOs, Program Directors and DVHA Payment Reform team
- DAs looking to redeploy staff who cannot perform typical duties
- DAs may need to issue temporary lay-offs of some BI Program staff if cannot redeploy or have emergency case rate structure in place



- All DAs have shifted their service delivery and are connecting with families and students for continued mental health support
- DAs are arranging services based on clinical need, family availability and ability to access supports through alternate methods, while following the governor's directives and VDH guidance
- DAs are connecting with schools to coordinate plans for students. Collaborative teams are still functioning through remote methods (E.g. Educational Support Teams)
- Concerns about some students who don't have internet or, in a few cases, phones for remote check-in supports

COORDINATION WITH AOE

- DMH is coordinating with the Agency of Education on guidance
- Shared concerns about lack of internet or, in a few cases, phones for remote learning & mental health check-in/ services
- Will continue to coordinate on the role of school mental health in the development and implementation of continuity of learning plans for remote learning for the remainder of the school year
- Will eventually focus on coordination of SB6 services with educational compensatory services (e.g. summer programming)