

Speaker 1: Welcome, and thank you for joining practical and Sustainable Strategies For Leveraging COVID Relief Funds to Support Student and Staff Mental Health. Before we begin, please ensure you've opened the WebEx chat panel by using the associated icon located on the bottom right corner of your WebEx screen. Please note that all audio connections are muted until the Q&A portion of the call. You may submit written questions throughout the presentation, and these will be addressed during the Q&A. To submit a written return question, select All Panelists from the dropdown menu in the chat panel, enter your question in the message box provided and send. If you require technical assistance, please send a check to the event producer.

With that, I will turn the conference over to [Lakesha 00:44:08] McKenzie. Lakesha, please go ahead.

Lakesha McKenz...: Greetings, everyone. Thank you so much for joining our webinar today. I am so excited about today's topic, it is very important, and I know you all are anticipating learning all of this rich information so that you can better serve the students in your state, and the staff as well.

We have partnered with the Department of Health and Human Services to bring you this very important webinar today. I am to introduce to you our presenters. I'm pleased to introduce to you Dr. Jill Bohnenkamp, who will be today's presenter. Dr. Bohnenkamp is an assistant professor in the division of child and adolescent psychiatry at the University of Maryland School of Medicine and core faculty at the National Center for School Mental Health. Dr. Bohnenkamp is a clinical and school psychologist by training and works with the local, regional and national partners to advance comprehensive school mental health systems across the United States.

We are also pleased to have Dr. Sharon Hoover joining us today, who will be answering questions in the chat and participating in our live question and answer at the end of the session. Dr. Hoover is a professor in the division of child and adolescent psychiatry at the University of Maryland School of Medicine, and she is also the co-director of the National Center for School Mental Health.

Without further ado, I'm going to give the presentation over to Dr. Jill at this time.

Dr. Jill Bohnen...: Thank you so much Lakesha, and thank you for having us here today. We are so pleased to be with y'all. Welcome, everyone, good to see folks from across the country coming in. We are so pleased to be talking today about practical and sustainable strategies for leveraging COVID relief funds to support student and staff mental health.

Apologies, I'm having a bit of difficulty moving my slide forward here.

Speaker 1: Are you able to click on the slide in then advance?

Dr. Jill Bohnen...: Perhaps our team may be able to move it forward for me.

Dr. Sharon Hoov...: Yeah. I'm happy to move the slide, Jill, if that's helpful.

Dr. Jill Bohnen...: That would be great. On the next slide, I'm looking forward to telling you more about our national center, and then of course we'll dive right into our discussion here.

Our National Center for School Mental Health was funded in 1995 with funding from the US Department of Health and Human Services, Health Resources, and Services Administration. We'll be talked more about our ongoing work with them, including our current work to support the national quality initiative. NCSMH's mission is to strengthen policies and programs in school mental health, to improve learning and promote success for America's youth. We offer also operate several school-based mental health programs in Maryland, which keeps us honest in our work.

Thank you so much Lakisha for the lovely introduction. As she mentioned, I'm a clinical and school psychologist by training and a core faculty at our National Center for School Mental Health. Our center is co-directed Dr. Sharon Hoover, who we are so pleased to have with us here today, and Dr. Nancy Lever. At the National Center for School Mental Health, we are committed to doing our work and thinking about a racial and social justice lens. We are committed to ensuring that our work, our products, our focus on cultural responsiveness and equity, and that we're thinking about developing and modeling equitable and anti-racist policies and practices. We know that school mental health gives us opportunities to learn, heal and grow together.

As I mentioned, I'm going to share more about our national quality initiative. This initiative is a cooperative agreement from the Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. We are so grateful for the Maternal and Child Health Bureau leadership, especially our program officer, Savannah Kidd, who I know is also joining us today.

In this work, we are challenged to move comprehensive school services, comprehensive school mental health systems and school-based health centers to adapt, report and improve school performance measures. You can see, we have of lofty goals in this work to improve the quality of care and use best business practices to promote sustainability among school-based health centers and comprehensive school mental health systems to increase the number and utilization of these services and increase state policies and programs that promote quality, sustainability and growth.

As part of this work, we run what is called a CoIIN, collaborative improvement and innovation network, which is a data-driven learning collaborative. We're really supporting states and entities across the United States as they advance and drive quality improvement in their comprehensive school and health systems. If that term, comprehensive school mental health system, is new to you, don't worry, I'll be going in depth into our definition of what we mean by that. But I flag this work and especially wanted to call out the states and entities that are currently participating with us, that if you are in one of these states, we absolutely recommend that you get in touch with us and make sure you're connected to this work. This is our third cohort of states and entities that we have participating, and we've had several other states that have participated over the three-year period.

All right, let's get into what our plan is for today, what we're going to be covering. First, we're going to go through, and I know these statistics and this information I'll be sharing about our great need are probably one of the main reasons that you're joining today, so these stats will not be new to you, but really identifying this level of need. Quickly, we'll move to how can comprehensive school mental health systems help to address this need, how can multi-tiered systems of support help us to support our students and families and educators, and most importantly, how can we think about using COVID relief funds to advance school mental health. We'll talk specifically about examples from the field and free national resources to support you in your work.

We'll have plenty of time for question and answer at the end. Please feel free to put any questions in the chat as we're going. Please feel free to introduce yourself in the chat as well, we would love to hear where folks are coming from and whether you're at the state level or at a regional or local level, and looking forward to continuing in this dialogue with you all today.

All right, with that, let's pay attention to our reason that we likely are all here. This is a quote from The Washington Post, that, "Mental health is a simmering crisis for many of our nation's school children, partially hidden by isolation and increasingly evident in the distress and worries of counselors and an early body of research." This was from January of last year, so this is over a year ago, but I know that this will be a quotation and a passage that I will include in presentations for years to come, because while we've moved beyond this period, we know that the lasting of effects this really are far reaching. I know I'm preaching to the choir when I speak about this, that what we saw as a simmering crisis for children's mental health, we really are seeing play out now and that we think about this from a developmental perspective, that not only was this salient at that time, but what would it have meant to have your entire kindergarten or sixth grade or 12th grade year spent in this way?

We have new statistics that have recently come out that really highlight these mental health concerns, this is hot off the press CDC data from the 2021 school year. We can really see how significant these mental health concerns are, that

over one-third of students experienced a poor mental health during the pandemic. We can see that these rates were higher for different percentages of folks. This is a striking number, when we see that almost 50% of students felt persistently sad or hopeless over the prior year.

We know that the pandemic affected all of us as well, that we see this not only for youth, but on the next slide you'll see we have additional statistics around educator mental health and well being, and that our educators, many of you in this room and on this webinar know this, that they were on the front lines of this and that even pre-pandemic that we had high rates of concern about educator wellbeing and mental health, and that over the course of the pandemic, we know that that intensified and was even more severe.

All right. Then, we also know that our education and health leaders are really highlighting this as well. I can imagine that this is not new, this information here about the declaration of the national children and adolescent mental health emergency. I also just want to flag from our education leadership, this focus on school-based mental health as a national priority. We know that there are places that we can go from here. We have this significant need here, but on the next slide, we'll start to talk about where do we go from here. We see these staggering rates of mental health concerns for everyone who's in our school building, students and staff, and how do we move from anxiety and loss and really think about hope and resilience? We know we have so much opportunity for our schools to really be the pathway for hope and resilience.

Additionally, we have data not only that has come out from the CDC about mental health concerns, but also this extremely important role that connections to adult and peers have meant for youth and will continue to mean for youth. We see that this was associated with less, decreased feelings of sadness and hopelessness and of suicidal ideation, and this great news coming out, that almost one in every other student felt close to an adult or peer from school during the pandemic. Again, I know I'm preaching to choir that we know that schools are uniquely positioned to support youth at higher risk for mental health concerns.

I know folks on this call are very familiar with ESSER and with recovery funds, but I'm so pleased to highlight if you haven't seen this resource that was put out by the CCSSO in partnership with our National Center and the Healthy Schools Campaign. This brief specifically looks at how ESSER funds can be used to support student and staff wellbeing and how we can think about leveraging ESSER funds to access sustainable funding streams, such as Medicaid. This is the link here, highly recommend that y'all check out this guide. We'll be going into details today about some of the things that are covered in here as well.

I just want to highlight that while we have this great need, we see those staggering numbers of mental health concerns, that we also have great opportunity, when we think about ESSER funds and we think about the money that is being invested and we have the potential to invest in our systems to

really support the entire school community, to make it a place where everyone in the building, in the community, has access to a safe and supportive learning environment, that we really can be planful in terms of using these dollars to create this vision that we have, that I know many of us on this call, most of us, all of us, on this call dream for where this can be for our education systems and for the communities that we work with.

All right, let's get into the nuts and bolts of what schools can do. As promised, we'll go into some definitions of comprehensive school mental health. When we say comprehensive school mental health, we mean a multi-tiered system of support for students, families and educators. I know many folks on this call, MTSS or multi-tiered systems of support, is a term you know well. When we think about school and mental health supports, we think about them in this tiered level of support with promotion of positive social-emotional, and behavioral health skills and overall wellness for all students and everyone in our school community, supports and early intervention for students identified through needs assessments, and of course, targeted interventions for students with serious emotional and behavioral health concerns.

Now, let's break this down. That's our broad picture, how we think about of tiers, but I want to be a little more specific as we're thinking about when we talk about comprehensive school mental health and we're talking about universal mental health promotion, what does that mean? What are some of the things that you all have in your school communities that fall into this universal bucket? These are things like positive school climate, culturally-responsive and trauma-responsive school policies and practices, staff wellbeing is absolutely critical, can't highlight mental health literacy enough, especially when we think about these numbers, and social and emotional learning. When we're thinking about ESSER funds and we're thinking about how we can use is COVID relief funds to support comprehensive school mental health, we want to make sure that we're not just thinking about those tier two and three strategies, but really these things that impact our entire school community, including staff wellbeing.

Then when we think about tier two and tier three, we're think about early identification and intervention and treatment. These are screening and wellbeing check-ins, evidence-based psychosocial interventions, as well as psychiatric care. When we're thinking about comprehensive school mental health systems, this is our definition. We have walked through this more visually, but I like to put this up there so folks have this as well, that this idea that a comprehensive school mental health system promotes positive school climate while reducing the prevalence and severity of mental illness. We know that these systems are built on a strong foundation of district and school professionals, including administrators and educators, and that we know that this is all in strategic partnership with students and families, as well as community and mental health partners. In short, this takes a huge community, it takes a village for us to do this work and is very comprehensive in nature.

I want to highlight a couple core features. That gives you the model of what we're thinking about when we say comprehensive school mental health, we mean this entire spectrum tier services, but when we think about core features and best practices, this includes well-trained educators and specialized instructional personnel, this includes family and school and community collaboration and teaming. We want to be thinking about needs assessment and resource mapping, mental health screening. We want to ensure that we're using evidence-based practices, making data-informed decisions, and of course, thinking about how we fund this work.

I love to use this side to show what does this look like in practice. As I mentioned, this takes a village. We know that this is led by school-employed folks with partnerships with community partners. This is just one model of how comprehensive school mental health can look like in practice, that it may be that the school district is really heavy on tier one and tier two supports with community partners coming in to help to support those tier three services. This is just one model, this looks different across the country, but just want to highlight this as an example of how we can really support our youth in our school community.

For folks that comprehensive school mental health may be a new concept or for folks who need some data to bring back to their teams or communities who are saying, "Why are we putting ESSER funds to this?" or, "Why are we looking to do this in schools?" in addition to those tier one and universal supports, which we know are so critical, we also know that this is where many youth receive services and that they're more likely to complete those services in schools compared to a community setting. We also know, again, to add additional statistics and points to your discussion with your leaders, we know that there are significant academic benefits for having mental health treatment in schools.

On the next slide, you'll see a summary paper here, and here you'll see some of that value of better academic outcomes, access to care, early identification, positive school climate. These are all the outcomes that we hope for, for youth who are in schools, and we want to ensure that those come through, and apologies, here we go, educational outcomes associated with school behavioral health. Again, if this is something you're bringing to your school community, we know that there are significant benefits of school behavioral health, as we're thinking about a range of academic outcomes, grades, attendance, state test scores and school connectedness all are related to school behavioral health.

That was a quick tour through when we think about comprehensive school mental health, what do we mean, what's the definition. This is a great guidance document if you want to dive a little bit deeper. It's about a seven-page document, but really addresses this idea of why address mental health in schools, the value of school mental health, those core features that we went through, and also includes a number of local and state spotlights.

All right. As promised, we're going to dive into some of these strategies to think about how states can use ESSER funds to support school and mental health. Much of this is the listed in this Restart and Recovery, so this is all available for you to access, but there are many opportunities on how states can really think about using recovery funds to support school mental health. I'll be going in detail into some of the ways that many of you on this call are already doing this work, how states across the country are already supporting school mental health via Esther funds.

But in this document, we outline some very specific ways, including how you can think about fostering meaningful collaboration, I'll go in more detail about strengthening and expanding school Medicaid programs in a moment, thinking about how you might promote MTSS implementation. This second to last one is a big one here, of thinking about enhancing data systems. I know many times in conversations prior to COVID, we wished we had additional funding for infrastructure, such as data systems or coordinators, to really be able to move this work forward. We've seen many states really building LEA capacity via funding directly to local education agencies in this work.

Heidi, thanks for the comment. Of course, we are very happy to have these slides available to everyone.

When we're thinking about ESSER funds and we're thinking about how we might use those in a sustainable way, we want to think about tying those to those mechanisms that perhaps are more sustainable that exist or that are longer term, and wanted to highlight some of these here. Thinking about the Every Student Succeeds Act funding, IDEA funding, we know that there's additional federal grant programs, and of course state and local funding. As I mentioned, in a moment I'll talk more or about thinking about ESSER funds to support Medicaid, but when you're thinking about COVID relief funds and thinking about comprehensive school mental health, we really just want to highlight to make sure that you're thinking strategically about how can you have those efforts be connected, how can ESSER funds help to fill gaps for some of these sustainable funding streams or to help to put you in a better place for those funding streams moving forward.

We know that there has been a significant expansion of school-based Medicaid programs, and this map shows that in practice. As you can see, so much of this work is in partnership with the CCSSO and the Healthy Schools Campaign. I want to give a special shout out to Alex Mays and to Anne Bowles with both with those organizations, just for their work in this area and for being so willing to share this for us to move forward. The Healthy Schools Campaign has done a lot of work in this area and in partnership with CCSSO, and there are a number of resources that they have around building school-based Medicaid programs.

The reason we really highlighted it in this Restart and Recovery document is that we know that there's a number of startup things that are required for states to be able to really build their school-based Medicaid programs. As you can see

here, this is from folks who have built strong school-based Medicaid programs. These are all the things that they say are really critical and have been critical in their work in terms of setting up their school-based Medicaid programs. School-based Medicaid is a reimbursement system. That's not funding that comes on the front end, and so there are a number of things that perhaps ESSER funds can be used to help to leverage towards school-based Medicaid programming. Highly recommend looking at this list and thinking about how might we be able to use ESSER funds to really help us to establish or strengthen or grow our school-based Medicaid programming.

On the next slide, you'll see great resources. As I said, CCSSO and the Healthy Schools Campaign are real leaders in this work and they have wonderful resources. If you're thinking about ESSER funds, thinking about moving this forward, want to tie those to school Medicaid and to building your school Medicaid systems in your state, highly recommend checking out these two resources here.

Another resource that I want to highlight was developed by the CCSSO in partnership with our national center. This is a guide for state education agencies in advancing comprehensive school mental health. We mentioned one way that you may think about using ESSER funds, COVID relief funds, to advance comprehensive school mental health. This document also goes through and gives five key strategies that state education agencies can think about as they're moving their systems forward. On the next slide, you'll see a great graphic that is included in this guidance document.

These are great points for folks to think about. Establishing a statewide strategy and framework, there's lots of examples from states that have these in place, coming out of Wisconsin and Colorado and many places across the country, thinking about strong and diverse partnerships, taking an asset-based approach, and you'll see this fourth one here, aligning efforts with existing efforts and COVID recovery, and prioritizing capacity building at the local level. We see many states, I'm sure many of you on the call, already doing these things, but I just wanted to highlight that resource and these five key steps that we see here.

All right. You may be familiar about what's happening, or likely are familiar with about what's happening in your state as it relates to ESSER funds to support school mental health, but we really want to share more of a picture of what this looks like in states across the country. We know that approximately 50 state plans list students' mental, social-emotional and behavioral health as top issues, and that we've seen common strategies include using a whole child framework, additional funding for school mental health services, enhanced and integrated social-emotional learning, support for educators. This has come in many different ways, including in-person and on-demand tools and resources.

This is just a snapshot of some ways that states are using ESSER funds. The Future Ed Campaign has compiled an entire document, that's the link at the bottom of the page here, that you can go to and see exactly how your state or

other states, states close to you or across the country, are using ESSER funds, but wanted to highlight some of these examples to see and for you to get ideas around we've thought about these things, what are some of other states doing?

You can see a couple of common themes here. Many states, again, are having grants go to their local education agencies. The way that's been structured looks really different, it has been as opened-ended as competitive grant applications, where LEAs can really say what they would like to prioritize funding for. We've certainly seen school-based mental health professionals, grants going specifically for funding for those positions. Lots of exciting new programs coming out, we see the School Safety Grant Program coming out of Arizona, the Maryland School Mental Health Response Program coming out of Maryland, the Oklahoma School Counselor Corps, and some great work happening in the District of Columbia, again, thinking about educator wellbeing in addition to student mental health.

Thank you to the CCSSO who has compiled and has been looking through this information, and also to Future Ed Campaign. Highly recommend checking out what other folks are doing. I know many of you are right in the middle of this work, so please feel free if you'd like to share in the chat exciting things that you have going on in your state that you're proud of, innovation that's happening around your uses of ESSER funds to support school mental health.

I also wanted to highlight how districts are using ESSER funds. Again, you saw that many states are having grants go to their local education agencies. We've seen lots of hiring of school-based mental health professionals, investment in technology platforms to support the delivery of school mental health. This, I know, was a big place prior to COVID that folks said, "We wished we had funding for this," and many folks are putting those forward. Certainly, hiring district level staff to oversee this work, especially a school Medicaid coordinator with this idea that if we have that in place that then that will allow to set up a system that will then become reimbursable and that while ESSER funding may pay for that to begin with, that perhaps then that position could continue to be funded as it moves forward. Lots of professional development opportunities on school mental health happening and thinking about providing mental health supports for school staff. Can't highlight this enough, that what we're seeing across the country at the state and district level is about the entire school community, thinking about students and about staff.

We want to make sure we call out where you can access all of these wonderful resources coming out of the CCSSO. They've got a great website specifically focused on wellbeing and connection. Everything that we've gone through, you can access there.

All right. Getting some ideas going here, you've seen some examples of what states are doing and what local education agencies are doing. We know that many of you are deep in this work right now, and as you're thinking about building your comprehensive school mental health system and investing ESSER

funds, we especially want to make sure that you are aware of many free resources, national resources that exist to support your work. Our National Center for School Mental Health has and privilege to partner in many ways to support this work. I'll highlight a couple of free national resources that, if you are engaging in comprehensive school mental health work, you must check out.

The first one is the School Health Assessment and Performance Evaluation system, or the SHAPE system for short. This Was Developed By the National Center for School mental health in partnership with many stakeholders, hundreds of stakeholders across the country, and partially funded by the Health Resources and Services Administration, Maternal and Child Health Bureau, through the national quality initiative that I mentioned in the beginning of this presentation. What is SHAPE? It's a free interactive system where individuals, schools, districts, regional education agencies, and states can really go in and access a powerhouse of resources to advance comprehensive school mental health. Schools and districts and regional entities can go in and map their school mental health services and supports, they can assess system quality using national performance standards, receive custom reports and strategic planning guidance and resources, and utilize many additional resources, including this screening and assessment library and trauma-responsive schools. It really is a great place for districts and states to be able to collaborate with their communities as it relates to school mental health.

I'll talk a little bit more about some of these components. I just wanted to highlight the National School Mental Health Quality Assessment, which is housed on the SHAPE system. This is a tool for schools and districts and entities to be able to go in and to really assess how they are doing in terms of our key quality domains for comprehensive school mental health. We see this as a comprehensive needs assessment process, where school and district teams can really go in and say, "Okay, when we think about best practices and standards for school mental health, how are we doing, and more importantly, how can we move this? What are areas that we really want to focus on for continuous quality improvement?" You can see the National School Mental Health Quality Assessment includes these quality domains for schools and districts to be able to assess.

Then after folks complete the quality assessment, they offer also receive a custom report. This really facilitates this needs assessment and quality improvement process. Teams can take these reports and then be able to sit and think about, "Okay, knowing this, what do we want to move forward? What are our next steps?" There's a strategic action planning guide at the end of ever report that really helps to move teams through an action planning process. You can see that on the next slide. Folks in all 50 states, over 15,000 schools, have used the SHAPE system and really use this strategic planning process.

After completing the quality assessment, SHAPE also houses a huge resource library that's organized by domain. Let's say a school or district assesses and they say, "We really want to move forward our work in teaming or in

screening," there's tons of resources where folks can really dive in and look through those. Highly recommend if you're at the state level passing this along to your LEAs, but also there is tons that SHAPE can help the support at the state level as well.

On the next slide, you'll see one of the resources that is really helpful at both the state and [inaudible 00:37:45] level is within that resource library we have school mental health quality guides for each domain. If schools or districts, or even at your state level, if you're saying, "Wow, we really want to think about how we can move forward tier one support," this is a quick guide with lots of actionable resources, best practices and examples from the field. These are all housed in the SHAPE system in that resource library.

Highly recommend that states use SHAPE as a way to be engaged. We have the State School Mental Health Profile, which allows states to be able to assess their system. Really if you're thinking about, "Okay, how are we going to be using ESSER funds? Where might be gaps, where might be places that we want to invest or really to think about and have a better landscape?" the State School Mental Health Profile allows states to go in and really to map this out and have a dialogue with state leaders around this. Similar to the school and district reports we showed you, there's also that capability at the state level.

What I think is probably the most powerhouse feature for states is this access for collaboration with schools and districts in the states. We know that many states have been using SHAPE as a way to really be able to understand what's happening across the state, encourage folks to speak the same language as you're thinking about comprehensive school mental health. You can see here that this is the state dashboard that allows a state to be able to see all of the schools and districts that are participating with the SHAPE system, and really to directly collaborate with them as it relates to school mental health quality improvement. Whichever level you are at joining us today, if you're at the state level and supporting LEAs, highly recommend that you get into SHAPE, no weights or sweatbands required, and check out the number of resources that are there.

On the next slide, the next that I want to highlight is the National School Mental Health Best Practices Implementation Guidance Modules. These were developed by the Mental Health Technology Transfer Center Network in partnership with our National Center for School Mental Health. If you're not familiar with the MHTTC network, highly recommends that you check this out. This is funded by SAMSA, there is a national coordinating office and then also regional centers across the United States. They each have specific funding focused on school mental health, so lots of work happening, both in that national coordinating office and regionally around school mental health. Definitely recommend if you're not in connection with them that you check out what they're doing, reach out, it's MHTTC.

This is an example of the modules, these best practice modules. Again, if you need additional resource is to think about how do we move this forward, we really need additional supports or we want to look into best practices, it's modules that are organized similar and same quality domains as the SHAPE assessment so these two work really nicely together. This is an example of one of the modules, I just wanted to show you what this looks like a little bit, this is Early Intervention and Treatment.

Then the next couple of slides, on this slide you can see that it talks about the quality indicators and then it's chockfull of resources, very hands-on, practical, take off the shelf and use this in our school system. This is an example of an intervention planning form, lots of great resources. We really pulled these from across the country and across national organizations that are leading this work. You can see this is an example crisis response protocol. Those are just a few examples. It's all in electronic format, all free. We previously have printed this and it's about this big in a binder, just lots in there to check out.

Then the last one I'll quickly mention is Classroom WISE. We highlighted so much thinking about wellbeing information and strategies for educators. This is another thing developed by the MHTTC network and partnership with our national center. This really is to support educators in their work around mental health promotion and prevention. There's an entire course, but there also are short video modules, that are even as short as two minutes long, that you could show, that education agencies could show or schools could show in staff meetings. I just wanted to highlight that as another new one that has come out to check out.

That's some of my top ones for you to check out, but I also just want to call your attention to our website, schoolmentalhealth.org. We are always working and culling additional resources, and so highly recommend that you check out our website, sign for our listserv to stay connected to us and stay connected to this work. As we mentioned, we work with many states across the country via our national quality initiative and via a number of different initiatives. If we're not already connected with you, we hope to be. Please don't hesitate to reach out to us.

On the next slide, I've summarized some of these school mental health resources that I've talked about, highly recommend that you sign up for our listserv or follow us on Twitter. These are just your links to be able to sign up for SHAPE and to access those best practice implementation modules.

All right. With that, I want to make sure we have plenty of time to get into questions that have been coming through. I'll turn it over to Lakesha who I know is going to facilitate that for us.

Speaker 1: Can I ask a question?

Lakesha McKenz...: [inaudible 00:44:18] Thank you, [inaudible 00:44:20]. Thank you, Jill, phenomenal presentation. This was such rich information that I'm sure our grantees greatly appreciate. Thank you so very much. We do have a question and I already answered it. The question was asking, "Will the presentation be made available?" Yes, the presentation will be posted on our website for promising practices. That link was sent to you all in the invite and I just posted it again in the chat.

We have another question from Pamela Becker. Her question is how long should we expect these funds to keep coming?

Dr. Sharon Hoov...: Jill, I'm happy to start that response.

Dr. Jill Bohnen...: That'd be great.

Dr. Sharon Hoov...: Yeah. That's the million dollar question, literally the multi-billion dollar question really given the amount of funds that have come down the pike. We do know about the current funds that are available, and all of you may be familiar, but there are really three buckets of funding that have come out with different dates for when states and local education agencies need to obligate those funds, with the latest date being the end of September 2024. Most states have already developed plans and begun spending or obligating funds.

What we know is that the effects of COVID, certainly on the education and academic performance and our psychosocial outcomes for our children and families, are going to extend beyond 2024, so we would hope for, and anticipate, continued support for the services and supports that'll be necessary to address those impacts, but we don't yet know what that might look like, unless Lakesha or Jill has other information that I'm not aware of.

Lakesha McKenz...: Thank you, Sharon. No, I do not have any further information to add. Thank you very much. Actually, we only had two questions. If you have a question regarding the information that was just presented to you in the webinar, now would be the time to put your question in the chat. If you want to ask your question verbally, because you called in, you can do that as well if you hit #2, then our event producer can see that you are virtually raising your hand and you will be unmuted to ask your question.

Speaker 1: It looks like we do have a call on WebEx. Christine, your line is now unmuted, please go ahead.

Christine: I don't know if you mean me, but I'll ask my question. I was typing it, but ... My question was if your school has a Medicaid school-based mental health clinic, does that mean that they can serve any student with Medicaid, not just kids with IEPs?

Dr. Jill Bohnen...: Yeah. There was change in that legislation and the free care rule. If I'm understanding your question correctly, previously, prior to the free care rule, there was some limitations around what Medicaid funding could be used for when we think about IEPs, but at this point, that funding, that free care rule allowed us to be able to think about funding for all students.

Christine: Wonderful, thank you.

Dr. Jill Bohnen...: Sharon, feel free to jump in if there's any clarification.

Dr. Sharon Hoov...: I think the rule, just piggybacking on what you're saying, formerly it was understood that Medicaid could cover services if they were included on students' IEPs and IFSPs, where the free care rule has allowed for services to be covered for all Medicaid-enrolled students. I believe that's to your question, but feel free to clarify.

Christine: That's exactly what I wanted to know, yep. That opens up to so many more students.

Dr. Sharon Hoov...: That's right. I mean, it was a huge win really for the field in terms of being able to provide expanded coverage to Medicaid-enrolled students, but it still has not really been as utilized as it could be. I think in part it's just that the understanding about the implications of the reversal of the free care rule are still being understood. There's been a call to Congress and to Medicaid to expand guidance to states to help them better understand the Medicaid rules and how they can be used to support mental health services in schools and substance use services in schools. You may have seen the memo that was issued jointly by SAMSA and CMS about funding for school mental health and substance use services. I'll go ahead and put, I think, a really nice document that came out from the Healthy Schools Campaign that lays out the free care rule and its implications for school mental health and I'll also put the SAMSA and CMS memo in the chat box.

Christine: Thank you.

Lakesha McKenz...: If you joined by computer and you have a question, you too can be unmuted if you would use the raise your hand icon through WebEx.

Speaker 1: At this time, I don't see anyone else in the queue. Once again, please use the raise hand icon if you would like to ask a question or press #2 if you downloaded audio only.

Dr. Sharon Hoov...: I'll just also expand on the question that was just asked because we have a moment here. As Jill mentioned, there are a number of states that have expanded their state plan, their state Medicaid plan, to expand school mental health services. We are happy to share information on how that's been done. Many states have made state plan amendments, for example, to expand the

services that are covered and/or the providers that are covered. If your state is not one of those 17 states that have done that yet, then we would be happy for you to take a look to see if it's something that would benefit your students and schools.

Lakesha McKenz...: It's not a question, but we have a point of clarification that has been submitted to us. I'm just going to copy and paste that for all attendees to see, it is the dates that funds must be obligated by for each of the programs.

Dr. Sharon Hoov...: That's really helpful, Frank. That's exactly right. There's the three different buckets of funding that we mentioned and they each have different dates that they need to be obligated, with the final one being September 2024, the third bucket, but as you've laid it out there and as Lakesha has just shared, this is helpful. This is actually spelled out in a visual way in the CCSSO and CSMH Healthy Schools Campaign guidance document that we shared early, so that you can have an illustration of what the funds are, how much they are and when they need to be obligated. I'll go ahead and share that again in the chat.

Lakesha McKenz...: Thank you, Sharon, and thank you, Frank Chicky. We have another question that came in from Anne. Anne is asking, is there a reason that more states are not participating in the free care rule?

Dr. Jill Bohnen...: I think Sharon highlighted that this was a change that now has happened, I think, seven years ago, maybe more than that, but that information may not be as widely available or known. Then we certainly know that some of that plays into the state Medicaid plans and that opening up those plans we know can be complicated and we know that there are many layers in terms of that. Sharon, welcome other thoughts on that.

Dr. Sharon Hoov...: Well, we know that children's mental health also represents a very, very small percentage of overall spending by Medicaid. Unfortunately, for us who are in the children's mental health space and in child education, it's not always the priority that we would wish it would be when states are looking at their Medicaid funding. It really does require that groundswell of advocacy from students, from families, from communities, for states to actually take a look at adjusting their Medicaid plans to further support school mental health.

But with respect to the free care rule specifically, again, I think there is a lack of understanding and some states have indicated that they worry about Medicaid auditing when they don't have a full grasp on what they are allowed to bill for. I also want to mention that especially in some of our smaller and more rural communities, the infrastructure to support Medicaid billing and processing is not there. Again, there's been calls to really use some of this funding to build some of the infrastructure support and to build awareness and understanding of how to better leverage Medicaid to support student mental health.

Lakesha McKenz...: Thank you, Sharon. We have another question, Amy is asking, where can she access more information? Where can we access more information on the states that have expanded their Medicaid programs?

Dr. Jill Bohnen...: Y'all will get a copy of this slide deck and perhaps we can put in the chat. There are two good resources that come out of Healthy Schools Campaign and CCSSO. I believe they link directly to state-by-state information.

Dr. Sharon Hoov...: Jill, if you could share the link to the Google Doc that has the state spending, from Future Ed, that would be really helpful. That was one link that I did not share in the chat, but I think it speaks directly to this question about understanding what's happening in my state and other states.

Dr. Jill Bohnen...: Yep, I've got that right now.

Dr. Sharon Hoov...: Thank you.

Lakesha McKenz...: We also have some thank you. We have many thank yous coming in from our grantees for providing them this rich presentation today. I also want to just say thank you. We only have two minutes left, so now would be the time to just express our gratitude and appreciation to you all for doing this presentation with us. Thank you, Sharon, thank you, Jill. I want to make honorable mention of Savannah Kidd who worked with me behind the scenes to bring this presentation to the grantees today as well. We want to just say thank you to HHS and to all of our grantees who registered and participated today. We hope that the information that was presented here today will be very meaningful and useful to you as you proceed to implement the grants to help students and staff, specifically around mental health.

Did you want to say anything in closing, Jill or Sharon?

Dr. Jill Bohnen...: Thank you so much for having us. Huge thank you to your team, Lakesha and the Department of Education, and equal thanks to our Maternal and Child Health Bureau leads and just grateful for this partnership, and to all of you who have joined us who are doing this work across the country, thrilled to have you all here today and thank you for joining. Reach out, you've been looking at all of our contact for a while so we look forward to connecting with you again soon.

Lakesha McKenz...: All right. I would be remiss if I didn't say thank you to our director, Laura [Miniz 00:57:58] and Britt Young who brought to my attention the need for this presentation and the opportunity to collaborate with you all. Once again, thank you. I wish that all of you have a wonderful rest of the day.

Speaker 1: That concludes our conference. Thank you for using event services, you may now disconnect.

Dr. Jill Bohnen...: Thank you.

Lakesha McKenz...: All right, bye.