

SBHC Standards for Certification Review Workgroup

Meeting 5: February 2, 2016

Summary Notes

Attendees: Loretta Jenkins (SPO), Sarah Knipper (SPO), Rosalyn Liu (SPO), Stefanie Murray (SPO), Kate O'Donnell (SPO), Melanie Potter (SPO), Lisa Stember (SPO), Jessica Duke (OHA), Steve Bardi (Multnomah), Kristen Case (Multnomah), Jill Daniels (SBHC Consultant), Tamarra Harris (Mosaic), Lynnanne Hayes (Deschutes), Laurie Huffman (OSBHA), Tricia Schroffner (Lane), Alicia Southwick (Umatilla),

Introductions

- This is the fifth meeting of the workgroup. There will be a total of six meetings.

Review of Section D.4 & E.1 Revisions

Supporting documents: Workgroup 4 Notes, Section B-G Standards Edits, 2016 Bright Futures Periodicity table

- C.1(b)(1): SPO added language in footnote to clarify that minimum primary care (10) and “additional” hours (10) may overlap as long as minimum weekly hours (15) are met.
 - Action: Workgroup approved suggested changes.
- C.4(a): SPO suggested adding “Youth engagement” policy requirement. Discussion that policies may be difficult to get approved, may be more appropriate as procedure or general requirement.
 - Action: Workgroup decided to move (8) to C.1. Language should be about creating “youth-centered environment.” SPO will bring proposed language to Meeting 6.

Section E.1

- E.1: SPO proposed changing title from “Comprehensive services” to “Comprehensive Pediatric Health Care” to align with Bright Futures (BF) language.
 - Action: Workgroup approved suggested changes.
- E.1(a): SPO also proposed changing language as in E.1 heading.
 - Action: Workgroup approves addition and wording. Add “American Academy of Pediatrics” before Bright Futures.
- E.1(b): SPO changed categories of comprehensive service care to reflect conversations from Meeting 4 and to clarify different lab/service standards for a combined lab and services chart. Onsite* and Onsite+ for lab services will be more clearly delineated in final printed version to avoid confusion with footnotes.
 - Action: Workgroup approved suggested changes.
- E.1(b)(1): SPO defined “Onsite” as specific to services.
 - Action: Workgroup approved suggested changes.

- E.1(b)(2): SPO defined “Onsite*” as specific to lab, with “point of care testing” language workgroup recommended in Meeting 5. SPO is also asking OSPHL for recommended definition of this term (see footnote).
 - Action: Workgroup approved suggested changes.
- E.1(b)(3): SPO defined “Onsite+” as specific to lab, with language workgroup recommended in Meeting 5.
 - Action: Workgroup approved suggested changes.
- E.1(b)(4): SPO defined “Referral” as specific to labs and services.
 - Action: Workgroup approved suggested changes.
- E.1(c): During Meeting 4, workgroup recommended changing columns from school site to age range to align with BF (Middle Childhood and Adolescence). SPO felt this may cause some confusion for elementary schools who have clients over age 10 and/or see the community. SPO posed language about “host site” in E.1(c), but this was confusing. Group noted that columns were exactly the same in all service areas aside from three relating to reproductive health (STI testing, pregnancy testing, HIV testing). Discussed how best to present reproductive health services requirements to both be clear and to reflect BF clinical recommendations.
 - Action: Group asked to combine age groups into single column for minimum requirements. SPO will draft several options for presenting reproductive health minimum requirements and bring to Meeting 6. SPO will also reach out to SBHCs at elementary schools to see if/how they would be impacted by combining chart columns.
- Comprehensive Pediatric Health Care chart:
 - SPO consolidated Laboratory/diagnostic services chart (former D.4) and Comprehensive services chart (former E.1) into combined Comprehensive Pediatric Health Care chart (new E.1). Categories now align with BF Periodicity Table. Group recommended removing several lab requirements in former D.4, leaving a small chart. Seemed to make sense to combine into one chart.
 - Action: Workgroup approved suggested changes.
 - “Procedures” (lab) should come after physical/oral health services.
 - Action: Move all services before procedures.
 - “Oral Health” is missing “services.” “Oral health” and “dental health” used inconsistently in Standards.
 - Action: Add “services” after Oral Health in chart. Change all “dental health”s to “oral health.”
 - No other changes to the reproductive health services section of chart.

Discussion – Standards Sections E.2-E.5

Supporting documents: Section B-G Standards Edits; 2016 Bright Futures Periodicity table

- Participants should keep in mind the following:
 1. What is working: How do current Standards help improve clinical practice? Can we advance requirements in current Standards?
 2. What are challenges: What is missing or needs clarification? Any barriers related to meeting these Standards?
- E.2(a): SPO added new section to outline immunization requirements. Language eliminated need for immunization footnote in Minimum Services chart.
 - Action: Workgroup approved suggested changes.
- E.2(b): Workgroup approved suggested changes.
- E.3(a): No changes recommended.
- E.3(b): No changes recommended.
- E.3(c): No changes recommended.
- E.4(a): No changes recommended.

Discussion – Standards Sections F

Supporting documents: Section B-G Standards Edits

- Participants should keep in mind the following:
 1. What is working: How do current Standards help improve clinical practice? Can we advance requirements in current Standards?
 2. What are challenges: What is missing or needs clarification? Any barriers related to meeting these Standards?
- F.1(a): No changes recommended.
- F.1(b): SPO added language clarifying that SBHCs must submit data for all services provided onsite at SBHC (including physical, oral and behavioral health). Workgroup asked for clarification that requirement wouldn't apply to occasional services, such as dental vans, etc.
 - Action: Workgroup approved suggested changes, with addition of "all ongoing services."
- F.1(c): SPO added language about "Quality Assurance Coordinator" role. Workgroup suggested this should be in Operations section, as doesn't exclusively relate to data.
 - Action: Move to Section B.
- F.2(a): SPO added several new data variables to required list. There are some concerns about an increase in labor for provider name/NPI # for sites who are still using Excel to report that data. SPO has offered help to those sites to decrease the amount of labor required.
 - Action: Workgroup approved suggested changes.
- F.3(a): SPO clarified that data must be submitted twice annually.
 - Action: Workgroup approved suggested changes.
- F.3(b): No changes recommended.

- F.3(c): SPO added language about student satisfaction surveys, as this is a requirement, but is not in current version of standards.
 - Action: Workgroup approved suggested changes, with addition of “a minimum of” twice annually to accommodate SBHCs that sync iPads once a month.
- F.3(d): SPO added language about operational profile information, as this is a requirement, but is not in current version of standards.
 - Action: Workgroup approved suggested changes.

Discussion – Standards Sections G

Supporting documents: Section B-G Standards Edits

- Participants should keep in mind the following:
 1. What is working: How do current Standards help improve clinical practice? Can we advance requirements in current Standards?
 2. What are challenges: What is missing or needs clarification? Any barriers related to meeting these Standards?
- G.1(a): SPO added language to clarify that providers must both be enrolled and bill Medicaid. Intent is to ensure all eligible providers are billing. Workgroup reminded that not all SBHC providers are eligible to bill Medicaid.
 - Action: Workgroup suggested changing language to: “SBHC providers who are providing Medicaid eligible services must be enrolled with and eligible to bill Medicaid.” SPO will draft language and bring to Meeting 6.
- G.1(b): Similarly, not all SBHC providers are eligible to bill Medicaid.
 - Action: SPO will draft language and bring to Meeting 6.
- G.1(c): SPO added language about “UB” modifier requirements, as this is a requirements, but not in current version of standards.
 - Action: Workgroup approved suggested changes.
- G.1(d): SPO made small edit to clarify that SBHC should bill private insurance if able.
 - Action: Workgroup approved suggested changes.
- G.1(e): Workgroup approves deletion
- G.1(f): No changes recommended.
 - Action: SPO will ask State Adolescent Health Policy Specialist Liz Thorne to review to ensure language is up-to-date.

Next Steps

- SPO will send out recommended changes and edits prior to the next meeting. We will pick up on Section A and review changes at the next meeting.