

AFFORDABLE CARE ACT: ANOTHER SUCCESS STORY

School-Based Health Centers

Providing health care to children in schools is simply a smart thing to do. Kids get needed medical attention and vital preventive care. Low-income and rural parents do not have to worry about skipping a day of work or affording a doctor visit. Healthier kids miss less school, pay better attention and are better students. Schools, too, benefit when attendance is higher and kids are prepared to learn.



**JEFF
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A little-known provision in the Affordable Care Act is set to improve health care access for kids in schools and communities across the country. The Department of Health and Human Services (HHS) recently awarded 278 grants totaling \$95 million for capital expenditures to help school-based health centers expand facilities, buy new equipment, modernize mobile clinics

and better serve rural children who cannot always obtain needed preventive and acute care.

As benefits of the Affordable Care Act continue to come online and make real differences in the lives of children, seniors, small business owners and others, the new funding for school-based health centers offers evidence of how one piece of the law is enhancing community benefit opportunities and improving the health of individuals, families and entire neighborhoods.

Several Catholic-sponsored health systems and hospitals are among the grant recipients including CHRISTUS Santa Rosa Health Care in Texas; Sisters of Charity Hospital in Buffalo, N.Y., part of Catholic Health System; and three CHRISTUS hospitals in Louisiana.

“Our pediatric mobile clinic is on its last leg,” said Rosie Perez, vice president of mission integration and outreach services for CHRISTUS Santa Rosa. Perez worked on behalf of CHRISTUS to secure the \$350,000 it will use to give its dilapidated mobile clinic a major face-lift. The grant money will make its van wheelchair accessible and add a satellite dish to electronically transfer

patient information and enroll children in health coverage for which they might be eligible.

“School-based health centers are one of the easiest things to do” to fill gaps that have been identified by community needs assessments, Perez said, adding: “There is a huge uninsured population in Texas and in San Antonio, huge, and a lot are kids. CHRISTUS operates a children’s hospital. It makes sense for us to take our services into the community and help fill these unmet needs.”

School-based health centers consist mostly of fixed-site clinics on a school campus or mobile programs that rotate a health care team through several regional school sites, according to the Assembly of School-Based Health Care. The centers come in various shapes and sizes, are usually sponsored by a hospital or community organization and provide care to a diverse group of children. A census by the assembly counted 1,909 clinics and programs connected with schools nationwide in 2007 and 2008.

The Affordable Care Act that became law in March, 2010, allocated federal money to these school-based health centers for the first time. First-round grant recipients serve nearly 800,000 patients and will use the new funds to reach an additional 440,000, according to HHS.

“We know that if kids aren’t healthy, then kids can’t learn,” said U.S. Secretary of Education Arne Duncan in a news release. “These grants will make it a lot easier for working moms and dads to help get their children the health care they need and deserve.”

CHRISTUS’ pediatric mobile clinic, part of a program that the system has run for nearly 20 years, serves three Texas school districts, two in

San Antonio and one in New Braunfels, about 35 miles northeast. The benefits are numerous: children get needed immunizations and flu shots. They get access to a nurse practitioner for minor issues that could become a problem if not treated. Parents, especially those without insurance, have greater peace of mind.

“By offering mobile care at school we help meet the needs of families by reducing the amount of time that parents are away from work due to doctor visits and, more importantly, reducing the amount of valuable instruction time that children are out of the classroom,” Perez said. The school benefits too, Perez noted, because it receives federal funding in part based on student attendance rates.

Put simply, the mobile health clinic represents outreach beyond the hospital walls, service to vulnerable kids and an effort that makes schools stronger, children healthier and keeps parents at work — the essence of community benefit.

In upstate New York, four-hospital Catholic Health System received a \$405,000 grant that will enable electronic communication between three school-based health centers and the Sisters of Charity Hospital campus in Buffalo. Of the grant, about \$300,000 will be used for health information technology and most of the rest to replace cots and furniture in the health centers themselves, according to Rachael Nees, Catholic Health’s director of grants.

The grant “improves our ability to provide accurate, timely care through enhanced communication with physicians, hospitals and labs,” Nees said. “When a kid is seen during the day, the [hospital or primary care doctor] would have no idea what happened at the school.” With grant money, the system will be able to build those vital connections.

For CHRISTUS, the Catholic Health System and other grant recipients, the funding for school-based health centers is an opportunity — to meet identified need in the community, improve the availability and quality of care for children and to build an infrastructure that will enable this kind of outreach for years to come.

HHS grants are a “great example of how [Affordable Care Act] money is actually hitting the ground and making a real, immediate difference in the kinds of services these school-based health centers can provide,” said Adrienne Ammerman, communications director for the Assembly of School-Based Health Care.

Including the grant provision in the Affordable Care Act, Ammerman said, was “the result of years of advocacy from our group and our state associations and the school-based health care field. It is a huge accomplishment and recognition of the important role the centers play in providing a health care safety net for kids and adolescents.”

In May the U.S. House of Representatives voted to rescind the funding for school-based health centers as part of a broader effort to repeal, scale back or defund health reform. At the same time, the Affordable Care Act continues to be maligned in the press and blogosphere by opponents of

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health reform, and courts continue to wrangle over its constitutionality.

That makes all the more important our continued advocacy, public education and awareness efforts. To help change the narrative around health reform, CHA has been collecting stories of real people who have been helped and healed because of the Affordable Care Act. You can watch the video vignettes at www.YouTube.com/HealthReformWorks.

In CHA’s *Vision for U.S. Health Care*, developed before the reform law passed, we called for public policy that would enhance the health status of communities. The Affordable Care Act is doing that in many ways, some of which — like improving coordinated health care for children — are not easy to find in the news or on TV. All of us can play a role in making sure that these stories are told.

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