Mental Health Services in Schools

Even prior to the COVID-19 pandemic, a great need for mental and behavioral health care existed in schools. Since March 2020, our nation’s students faced an unprecedented new reality. Schools throughout the country shifted to virtual instruction, isolating students from their teachers, friends, and peers. A growing body of evidence demonstrates that the mental health of children and youth continues to deteriorate in the current environment, including among those who did not previously demonstrate signs of a mental or behavioral health disorder.

Remote learning and lack of social interaction causes varying levels of trauma and emotional distress. Many students experienced grief, stress from financial hardship, or the loss of a loved one. COVID-19 also lessened detection of child abuse or mistreatment. Traditionally, schools—where teachers and other school-based professionals, including mental health providers, are trained to spot warning signs—have served as safe spaces for children living in abusive homes. Distance learning has made this much more challenging. All of this is having disproportionate effects on marginalized students, including students of color, students with disabilities, and LGBTQ+ students.

At the same time, shortages of school-based mental and behavioral health professionals continue to persist. This has more a significant impact along socio-economic lines. For many low-income students and families, school-based health centers were an affordable option to address their physical and mental health needs before the pandemic. While schools were closed, many of these students lost all access to healthcare. Students and families with the means to do so, continued to receive care from external providers, which further exacerbates disparities in both physical and behavioral health care.

As educators, administrators, and policymakers work to mitigate the impacts of unprecedented levels of learning loss, improving the mental and emotional well-being of all students is a critical component of achieving that goal. Schools—especially those that are under-resourced and serve high numbers of low-income and BIPOC students—must receive more support to address these needs by increasing and retaining diverse, culturally competent school-based professionals to provide affordable services.

ROLE OF MEDICAID IN SCHOOL-BASED MENTAL HEALTH SERVICES

Medicaid is the third-largest stream of federal funding for school-based health care services. It broadens access to physical and mental health care available to students through school-based health centers. This particularly benefits students who are otherwise less likely to have access to such professionals, including low-income students and students of color. School districts can use Medicaid reimbursement to fund health professionals and specialized instructional support personnel such as school psychologists, purchase and update specialized equipment, and connect eligible students with providers outside school settings.

Additionally, since the enactment of the Individuals with Disabilities in Education Act (IDEA), schools are responsible for furnishing services through a student’s individual education plan (IEP). Given the traditional shortfalls in IDEA funding, Medicaid can be used to pay for services described in a Medicaid-enrolled student’s IEP. Medicaid also covers a broad range of medically necessary services for children under its Early and Periodic Screening, Treatment and Diagnosis benefit, including certain screening, diagnosis, and treatment services.
Policy Recommendations

Pass legislation to increase school-based mental health services

- **Mental Health Services for Students Act.** Expands and increases funding for existing SAMHSA grants to fund a comprehensive mental health program by placing on-site licensed mental health professionals in schools.

- **Comprehensive Mental Health in Schools Pilot Program Act.** Provides resources for low-income schools to develop a holistic approach to student well-being by building, implementing, and evaluating comprehensive school-based mental health programs.

- **Increasing Access to Mental Health in Schools Act.** Expands mental health services in low-income schools by supporting partnerships between institutions of higher education and local education agencies to increase the number of school-based mental health professionals.

- **School-Based Health Centers Reauthorization Act.** Reauthorizes the School-Based Health Centers program to continue delivering quality physical and mental health care to students.

- **Mental Health Professionals Workforce Shortage Loan Repayment Act.** Authorizes a student loan repayment program to increase mental and behavioral health care professionals in a variety of sectors, including schools and community health centers.

Increase federal funding and support for existing programs

**Department of Education**

- **Student Support and Academic Enrichment Program, Title IV-A.** A flexible block grant program that funds school districts to improve students’ academic achievement including by improving school conditions and climate through enhanced mental health services, social and emotional learning, and trauma-informed practices.

- **Safe and Supportive Schools National Initiatives.** These programs address the health and well-being of students, school safety, security, and emergency management and preparedness, including those focused on mental and emotional well-being and development.

- **Individuals with Disabilities in Education Act (IDEA).** Fully fund IDEA as part of the annual appropriations process.

- **Public Service Loan Forgiveness Program.** Provides student loan forgiveness to incentivize employment in public service fields, including for public school-based mental health providers.

**Substance Abuse and Mental Health Services Administration (SAMHSA)**

- **Project AWARE.** Provides grants to increase awareness of mental health issues among students, train school personnel and other adults on students’ mental and emotional health concerns, and connect students and families to needed behavioral health services.

- **National Child Traumatic Stress Initiative.** Expands access to and enhances the quality of community-based trauma treatment and services to improve the mental and behavioral health care of children and adolescents impacted by trauma.

Strengthen Medicaid-Funded Services

- **Oppose efforts to restrict Medicaid payments to schools for necessary services.** This includes mental and behavioral health services delivered to Medicaid-eligible children, as well as those delivered to a student with an IEP under IDEA.

- **Update CMS’ guides on Medicaid in schools.** To ensure that Medicaid reimbursement can be utilized for school-based physical, and mental and behavioral health care.

- **Increase Medicaid FMAP.** To address state budget shortfalls, the Federal Medical Assistance Percentages (FMAP) should be increased to meet the growing need for physical and behavioral health services, including in schools, to eligible children.

- **Oppose efforts to implement per-capita caps or block grant funding for Medicaid.**
ENDNOTES


