

KEN WINN, BCBA, LBA

PRESIDENT OF THE COLORADO

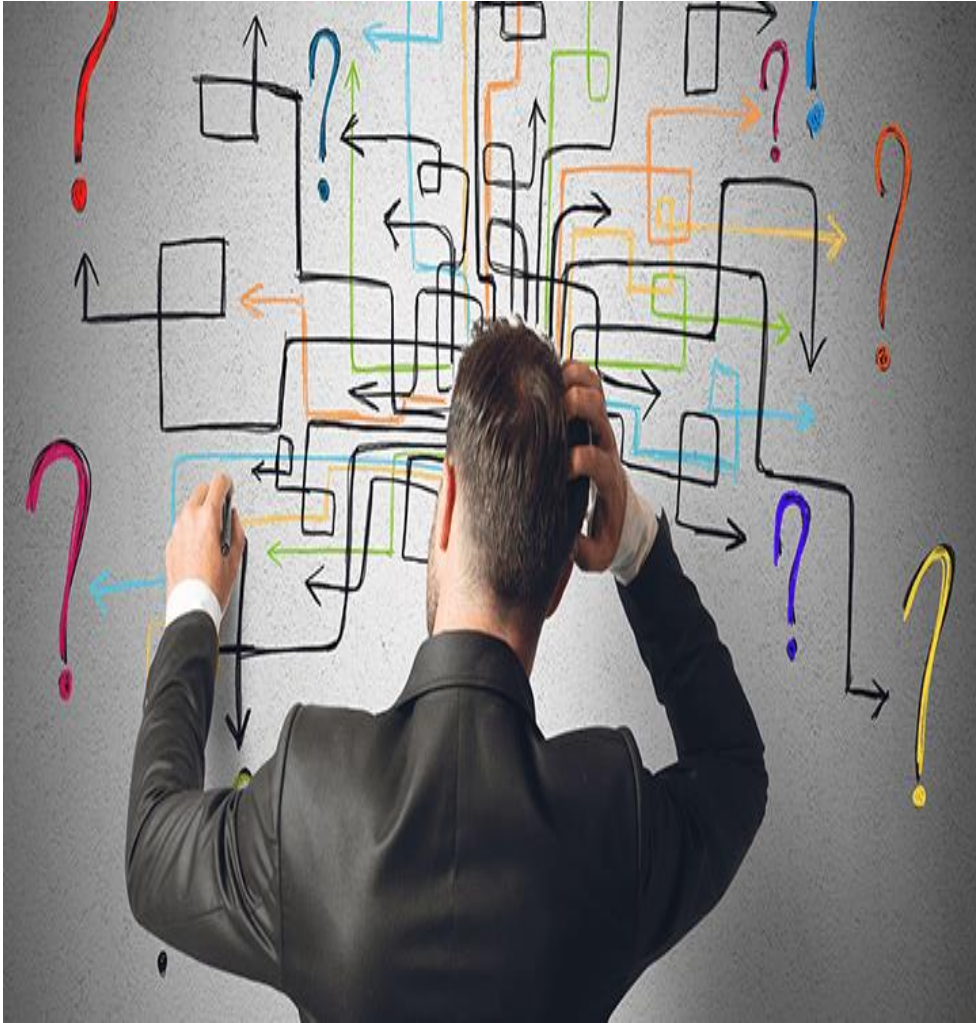
ASSOCIATION FOR BEHAVIOR ANALYSIS

**OVERVIEW OF
HB22-1260
ACCESS TO
MEDICALLY
NECESSARY
SERVICES FOR
STUDENTS**



B A C K G R O U N D

Children spend approximately one-third of their time in school settings. Some of those children require prescribed behavioral health therapy and treatment for other medical conditions in school as part of their overall treatment for a diagnosed medical condition. Autism Spectrum Disorder [ASD] is one common example of a diagnosis for which the prescription must occasionally occur at the school setting due to the clinical requirements of the diagnosis. Collaboration between school services and health care professionals to ensure timely access to necessary care is required to improve outcomes for children.



The Problem

- Many Colorado children are not receiving their prescribed, medically necessary care via current systems, such as IDEA/SHS; given schools are only required to provide services related to educational attainment, some students with clinical needs beyond the boundaries of educational attainment are not being met.
- As a result, families are having to choose between their child's education and their medical needs due to the barriers they face in receiving medically necessary treatment in the school setting. Without this legislation, families will continue to have to determine what is more important for their child: their education or their medical needs.
- No family should have to make this decision. Each child should be given the opportunity to achieve not only their educational success but also their clinical, functional potential.



WHAT HB1260 DOES

- **Allow children reasonable accommodations to access third-party-funded healthcare to get the care they need in schools.**
 - ❖ Students with problematic behaviors will have access to additional supports in school.
 - ❖ Having healthier kids will reduce costs to schools long term.
 - ❖ Schools will be able to retain essential control through the "reasonable accommodation" standard.
 - ❖ Children will no longer be shut out from medically necessary care.



WHAT HB1260 DOES(CON'TD)

- **Ensure healthcare insurers, including Medicaid, cover costs of ameliorating medical symptomatology rather than schools.**
 - ❖ Some schools participate in the School Health Services Program. However, that program places the onus of medical treatment on the school itself resulting in a fiscal burden that adds to the stressors for an already strained system. Additionally, not all schools participate resulting in inequitable access to medical services across the state.
 - ❖ Medical Necessity in Schools provides a solution that offers protections to the school system while allowing the child access to life-enhancing treatments funded by their insurance plan.



WHAT ARE MEDICALLY NECESSARY TREATMENTS?

Services typically prescribed by a child's Pediatrician to support growth developmentally, socially, cognitively, affectively, and physically while ameliorating risks to safety. In short, the skills kids need to access the world so they may find their place, hold a job, and navigate relationships and society.

MAIN POINTS

MEDICALLY NECESSARY SERVICES

- Not just ABA. This is for all services that can and should be provided in schools but are often not. This includes private speech, OT, Feeding programs, or other medically necessary services

DOES COST THE SCHOOLS ANY MONEY?

- Funds for services provided in the schools would be paid by private insurance or other funding. NOT THE SCHOOL

DOESN'T MY CHILD'S IEP, THROUGH IDEA, ALREADY PROVIDE THIS

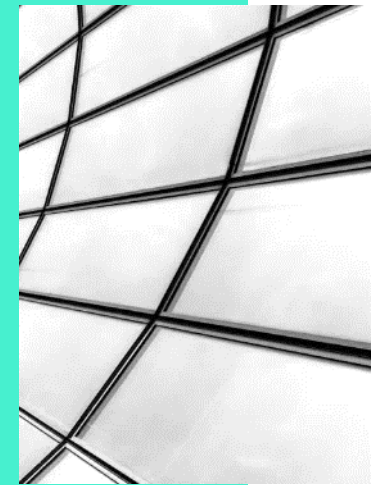
- Not always. If the IEP system works, this law allows for that. But often the IEP system does not work or is not applicable. This law is founded, not on IDEA, but on 504 and ADA.



SCHOOL BOARD POLICIES

- A major part of the law is that each school district must have a policy describing how their students will receive these services **IN THE SCHOOL SETTING.**
- “No later than July 1, 2023, each administrative unit shall adopt a policy that addresses how a student who has a prescription from a qualified health-care provider for medically necessary treatment receives such treatment in the school setting as required by applicable federal and state laws, including section 504 of the federal "rehabilitation act of 1973" and the "Americans With Disabilities Act of 1990”

..... text from HB 22-1260

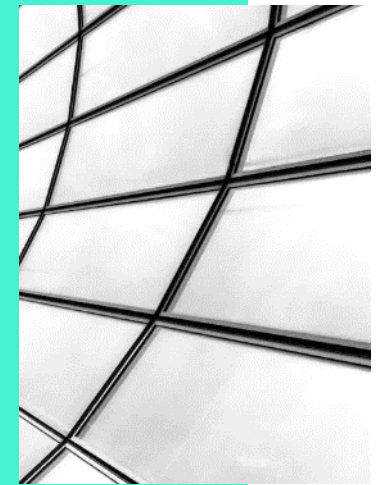


MUCH NEEDED DATA

- Another important major part of this law is that school districts must report data on the implementation of this law.

Beginning July 1, 2024, and each July 1 thereafter, each administrative unit shall compile and provide to the department of education the **total number of requests for access to a student by a private health-care specialist pursuant to this section and whether the access was authorized or denied.**

Beginning January 2025, and each January thereafter, the Department of Education shall make the information reported, on the **department's website and report the information** to the house of representatives education committee and the senate education committee,

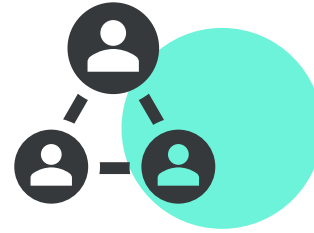


HOW CAN YOU HELP



PROVIDE DATA ON IMPLEMENTATION

- Communicate to members of COABA's Public Policy Committee
 - ✓ coabapublicpolicy@gmail.com
- Things that are working
- Things that not working, especially schools not cooperating



COMMUNICATE WITH LEGISLATORS

- Let your representatives know if there are issues
- Bill Sponsor:
 - ✓ Meg Froelich
repfroelichhd3@gmail.com



COLLABORATE AND CULTIVATE RELATIONSHIPS WITH SCHOOL DISTRICTS

- Cultivate relationships with friendly school districts who see this a positive initiative
- Collaborate with providers and support personnel to help implement this law

QUESTIONS/COMMENTS





THANK YOU

Ken Winn

ken.winn@advancedbehavior.org

Cell: 813-215-7236