Since 1995, the School-Based Health Alliance (SBHA), a 501(c)(3) nonprofit corporation, has supported and advocated for high-quality healthcare in schools for the nation’s most vulnerable children. Working at the intersection of healthcare and education, SBHA is recognized as a leader in the field and a source for information on best practices by philanthropic, federal, state, and local partners and policymakers.

**Among its primary functions, SBHA:**

- Establishes and advocates for national policy priorities
- Promotes high-quality clinical practices and standards
- Supports data collection and reporting, evaluation, and research
- Provides training, technical assistance, and consultation

**Why is School-Based Health Care so important?**

Health is a critical factor in setting our children up for success. Healthy children are more likely to attend school ready to learn and achieve higher levels of educational attainment, providing greater access to future opportunities and a pathway out of poverty. School-based health centers (SBHCs) have demonstrated their ability to increase access to health care, reduce emergency room use, lower Medicaid costs, and increase the use of sensitive services like mental health counseling. The Community Preventive Services Task Force recommends SBHCs as an evidence-based intervention to improve educational and health outcomes in low-income communities.

**What is a School-Based Health Center?**

School-based health centers (SBHCs) provide the nation’s vulnerable children and youth with access to primary care, behavioral health, oral health, and vision care where they spend the majority of their time – at school. Working at the intersection of health and education, SBHCs collaborate with school districts, school principals, teachers, school staff, families, and students. This collaboration, care coordination, and youth engagement results in not only improved student, school staff, and community health literacy and outcomes, but also contributes to positive educational outcomes including reduced absenteeism, decreased disciplinary actions and suspensions, and improved graduation rates. SBHCs advocate for the needs of low-income children, youth, and families, provide them with a safe haven, and serve as a protective factor that reduces poor health and education outcomes.
**Where are they located?** SBHCs are typically located either inside schools or in nearby community locations. They offer the best model for school-centered care because they remove barriers to access, treating children in a convenient, easily accessible location and a safe and nurturing setting. Services may be provided in person, via telehealth, or a combination of the two.

**Who runs them?** Most centers operate with an external medical sponsoring agency in partnership with the Local Education Agency. The billing capability and clinical operations of the SBHC are provided by the medical sponsors, along with additional revenue sources. Federally Qualified Health Centers (FQHCs)¹ sponsor the majority of SBHCs, while hospitals, nonprofit or community-based organizations, local health departments, and school districts sponsor the remainder.

**What services do they provide?** Each SBHC is different: the specific services each offers are tailored to the unique needs of the school and determined with community input. Services provided typically include primary care services and behavioral health, and often also vision and oral health care. Children and adolescents might receive services including routine immunizations, well-child and acute care, sports physicals, teeth cleanings, vision exams, and mental health counseling. In many cases, the centers may also provide health care services to students’ family members, school staff, and other community members.

**Who works at SBHCs?** Typical staffing at an SBHC includes a nurse practitioner or physician’s assistant, a behavioral health provider, and a medical assistant. Some sites offer additional staffing for additional services such as oral care. Students may also have access to a broader range of providers, including specialists, at the medical sponsoring organization. SBHCs employ advanced practice providers whose scope of practice allows for diagnosis, treatment, prescriptive authority, and billing capability. SBHC providers work collaboratively with school nurses, counselors, psychologists, social workers, athletic coaches, and other school employees.

**How are they funded?** Funding sources for SBHCs include public and private insurance reimbursement; state, federal, and local government appropriations; contributions from private foundations, sponsor agencies, and school systems; and in-kind donations of services and products. For a majority of centers, the most critical source of funding is third party payer reimbursement, contributing to a sustainable model of care. Although district superintendents have the budget authority to help fund SBHCs, the overwhelming majority of SBHCs operate without school district funding or staff.

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¹ Federally Qualified Health Centers are community health centers that are eligible to receive federal funding under the Health Resources and Services Administration (HRSA) Health Center program to provide primary care services in underserved areas.

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To learn more about SBHA and School-Based Health Centers, visit our website: [www.sbh4all.org](http://www.sbh4all.org)