NOTIFICATION OF PARENT/GUARDIAN RIGHTS AND PROTECTIONS

_____ SCHOOL DISTRICT (the School District) currently provides necessary school-based health services to your child at no cost to you, the parent/guardian. The School District is participating in Michigan Department of Community Health program through which Federal Medicaid funds are made available to school districts in the State to help cover the costs of providing necessary school-based health services to students. By participating in this program, the School District is allowed to seek Federal Medicaid funds to help cover the costs of the health services the School District provides to your child. In order to seek the Federal funds, the School District must disclose information from your child's education records to Michigan Department of Community Health. This may include personally identifiable information (ex. Name, Date of Birth) as well as records or information about the services that may be provided to your child.

To ensure that your child has access to a free appropriate public education, as required by Federal law, the School District must

- obtain your written consent prior to disclosing your child's health information to Michigan Department of Community Health,
- may not require you to sign up for or enroll in any public benefits or insurance programs,
- may not require you to pay any out-of-pocket expenses such as a deductible or co-payment for the costs of the health services the School District provides to your child, and
- may not use your child's Medicaid or other public benefits if that use would
    - decrease available lifetime coverage or any other insured benefit,
    - result in you or your family paying for services that would otherwise be covered by Medicaid or other public insurance program and that are required for your child outside of the time that your child is in school,
    - increase your insurance premiums or lead to the discontinuation of any public benefits or insurance, or
    - risk the loss of your eligibility for home and community-based waivers, based on aggregate health-related costs.

Whether or not you give your consent or if you withdraw your consent for the school district to disclose your child's health service information to Michigan Department of Community Health in order to seek Federal Funds to help the School District to cover the cost of your child's health services, the School District will continue to provide services to your child at no cost to you, the parent/guardian.