An informational newsletter compiled by the Rehabilitation and Community Providers Association for the MH, IDD, D&A, and rehabilitation communities

### REHABILITATION & COMMUNITY PROVIDERS ASSOCIATION

**MAY 2014** 

#### RCPA NEWS

### **Tech Conference Highlights**



Presenter Paul Duck provided information on leveraging benchmarking through analytics.



Sponsor Qualifacts shared information about its product in Exhibit Hall.

eld at the Lancaster Marriot April 8 – 9, the RCPA Technology Conference hosted 197 attendees in 21 workshops. Subjects included robotics in rehabilitation, assistive technologies for individuals with physical disabilities, social networking for individuals receiving mental health services, and electronic health record implementation risk management. There was also time for networking receptions and meeting with technology vendors. Among comments from attendees were:

"Enjoyed this very much! My first RCPA conference! I learned so much and met some great people."

"Another great conference! I hope RCPA can continue these at least every other year."

RCPA thanks everyone that participated in the event. Special thanks is due to conference sponsors Brown and Brown of Lehigh Valley, Netsmart, PerformCare, and Qualifacts.



Dr. Alberto Esquenazi chaired a double session on robotics in rehabilitation.





President and CEO
Richard S. Edley, PhD

Senior Policy Specialist Western Region Lynn Cooper

Policy Specialists
Melissa Dehoff
Linda Drummond, MPA
Connell O'Brien, MEd

Director of Legislative Affairs

Anne McHugh Leisure, MHA

Technical & Conference Services Coordinator Kris Ericson, PhD

Membership & Outreach Coordinator Steve Neidlinger, CAE

Executive Assistant
Cindy Lloyd

Finance Manager
Tina Miletic

Fiscal/Administrative Assistant Tieanna Lloyd

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#### Rehabilitation and Community Providers Association

777 E Park Dr, Ste 300 Harrisburg, PA 17111-2754 717-364-3280—Phone 717-364-3287—Fax www.paproviders.org

#### RCPA NEWS



Members and staff joined with area legislators to discuss critical issues addressing services in Pennsylvania.

CPA hosted a Northwest Providers Coalition luncheon meeting for area legislators April 24 in Clarion. During the event, RCPA reviewed with legislators the state funding needs of community mental health, intellectual disability, and physical disability services organizations. The governor unveiled his proposed 2014/15 budget in February; lawmakers must pass a final spending plan by June 30.

Fifty individuals from provider organizations along with the regional director and district administrators from the northwestern Office of Vocational Rehabilitation attended. Legislators present included Sen. Scott Hutchison (R-Clarion, Venango), Rep. Donna Oberlander (R-Clarion, Armstrong), Rep. Kathy Rapp (R-Forest), Rep. Brad Roae (R-Crawford), Rep. Matt Gabler (R-Elk, Clearfield), Rep. Lee James (R-Venango), and Rep. Mark Longietti (D-Mercer). Staff from the offices of US Rep. Glen Thompson (R-PA 5), state Rep. Michele Brooks (R-Crawford, Mercer, Lawrence), and Rep. Jeff Pyle (R-Indiana) also attended.

In addition to the governor's proposed budget, the agenda reviewed critical topics including funding for intellectual and developmental disability (IDD) residential services; the Centers for Medicare and Medicaid Services final rule and effect on pre-vocational, vocational, and day programs; managed care and IDD services; *Healthy Pennsylvania*; regulatory changes in mental health and drug and alcohol services; and behavior specialist licensing.

The meeting was spearheaded by RCPA board member Colleen Stuart, CEO, Venango Training and Development Center. Richard Edley and Lynn Cooper attended for RCPA and Scott Johnson, Wojdak and Associates, also participated.

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## RCPANEWS - MAY 2014

## Our Federal Connection and Impact



Richard S. Edley, PhD

As a Harrisburg-based provider association, our efforts are focused on Pennsylvania activities and issues. RCPA staff spends a great deal of time at the Capitol and with key government departments (e.g., Department of Public Welfare; Offices of Developmental Programs, Mental Health and Substance Abuse Services, Long-Term Living). We work with the governor's office; the proposed 2014/15 governor's budget is of great importance. This work is critical it is where a significant amount of member funding and related policies originates. Additionally, we use state-based communications (Ceisler Communications) and lobbying (SR Wojdak and Associates) firms. These relationships have helped open doors for RCPA and best position the organization, especially important in our first year of existence. Our Harrisburg Capitol Day is June 17.

However, over the last year, we have also collectively been impacted by federal policies and legislation. A recent Centers for Medicare and Medicaid Services (CMS) final rule is a great example. It will have longlasting effects on pre-vocational, vocational, and day program services. Similarly, medical rehabilitation providers are significantly affected by CMS rules and the federal budget proposal. The interplay between state and federal governments was apparent this past year in Medicaid expansion discussions and the eventual *Healthy Pennsylvania* proposal. In fact, all of federal health care reform has and will continue to impact members – as providers and employers.

So as a state-based association, how do we begin to transform our efforts to cover federal issues effectively? How do we do this in a way that does not dilute our resources and take away from our important Pennsylvania work? We have started down a few avenues this past year and will continue to expand in the year ahead.

► NATIONAL ASSOCIATION RELATIONSHIPS. RCPA is a member of four distinct Washington, DC-based associations: The National Council for Behavioral

Health, American Network of Community Options and Resources – ANCOR (intellectual and developmental disabilities), ACCSES (vocational services), and the American Medical Rehabilitation Providers Association – AMRPA. We speak often with their representatives, exchange information, and relay critical items to our members. We also attend annual meetings, topic-related sessions, webinars, and trainings. We have scheduled legislative visits in coordination with these associations to increase our impact and participated in major events such as the National Council Hill Day.

- ► WASHINGTON PRESENCE. Over the next year, we will continue to explore ways to continue effective meetings with Pennsylvania senators, representatives, and staff in their home and Washington, DC offices. We are finalizing the hire of our new government relations staff and federal work has been added as a responsibility.
- FEDERAL LOBBYING. It would not be practical from a time or cost standpoint to hire a Washington-based lobbyist or firm. However, I have begun to explore possible ways in which we can get representation (and access) as needed. It takes creativity, but I will continue to look at this and determine our best strategy. This will not duplicate national association work, but augment our own strategy and effort.

In sum, we are not in any way abandoning our Pennsylvania roots; they are critical to members. Yet in today's health care environment, we cannot assume that everything happens within state borders. We must branch out to impact and access state and federal legislators. Health care today is a national, state, and local affair.

Richard S. Edley, PhD, President/CEO redley@paproviders.org

This column represents my opinion, not necessarily that of the association.

#### LEGISLATIVE AFFAIRS

For additional information on legislative issues, contact RCPA at 717-364-3280. For copies of bills, call your local legislator, the House Document Room 717-787-5320, or visit the General Assembly's Electronic Bill Room at www.legis.state.pa.us.



#### co-sponsors NEEDED for Legislation Enabling MH/ID Tax Credit Program

On April 2, Representatives Bryan Cutler (R- Lancaster) and Pamela DeLissio (D- Montgomery) issued a co-sponsor memo to colleagues for a bill that will correct a problem with the Community-based Services Tax Credit Program created through Act 85 of 2012. The program has not been implemented to date and disability provider advocates have worked with officials on proposed language for more than a year. The proposed amendment will allow the program to be more easily accessible to the non-profit mental health and intellectual disability providers it is intended to benefit. The language provides for the inclusion of a business that is a pass-through entity to be defined as eligible to receive the tax credit for a contribution to a community non-profit provider. Please contact your representative and ask him or her to co-sponsor this bipartisan effort to improve an existing tax credit program that directly benefits people with disabilities. Further questions may be addressed to Anne Leisure or Linda Drummond.

#### RCPA Engages in Budget Effort

CPA participated in a joint effort of the Behavioral Health and Intellectual Disability and Autism Coalitions to engage in meetings with the Department of the Budget and key Appropriations Committee staff from all four caucuses to advocate for the support of crucial community services in the state budget. Issues front and center in discussion on the budget for intellectual disability and autism included:

- Support for sufficient funding for community services now being provided to people with intellectual disability (ID) and autism spectrum disorder;
- Support for changes to payment policies and rate methodologies, including additional funding so that rates are sufficient for sustainable ongoing services, specifically a residential rate setting methodology for ID services that allows for retention of retained earnings and \$14 million to support implementation of a vacancy factor for residential services; and
- Support for waiting list initiatives.

#### Behavioral health issues focused on:

- Support for restoration of the 10 percent cut to the Mental Health Services budget line that occurred in 2012/13;
- Support for the protection of Community Hospital Integration Project
   Program and Southeast Integration Project Program dollars;
- Support for proposed funding for an Olmstead initiative to support
   90 new individuals moving from state hospitals into the community; and
- Support for improved access to care and support services for individuals with mental illness and/or substance use disorders.

All four caucuses indicated that continuing disappointing revenue reports and unexpected impacts from other initiatives that had been scored as revenue neutral are driving current budget conversations. However, it was universally noted that efforts are being made not to make cuts during an election year. There was also acknowledgment that community services funding has been poorly served for a number of years.

RCPA members are urged to communicate with local legislators to advocate support for community services. Talking points and other materials, including charts that highlight the lag in funding for community services, may be accessed on the RCPA web site.



RCPA urges members, consumers, families, and friends to join colleagues June 17 to let elected officials know community services are essential and need to be supported! Budget advocacy is more important than ever and Capitol Day offers members a chance to touch base with elected officials and rally on the steps of the Capitol at 12:00 p.m. Registration materials will be sent as the event draws closer. Please direct questions or inquiries for more information to Anne Leisure.

#### Allied Top Inpatient Rehab Hospital

RCPA member Allied Services, Scranton, has been recognized as the number one inpatient rehabilitation hospital nationally. The analysis, completed by Uniform Data System for Medical Rehabilitation, included over 770 rehabilitation hospitals nationwide. Measures evaluated include discharge information, such as a patient's functional independence measures; length of stay efficiency rates; and the percentage of patients discharged back to acute care facilities. It also factors in change in a patient's independence measures, such as walking and eating, from arrival to departure. Particularly noted were Allied's investment in rehabilitative technology and focus on care continuity by regular communication with discharged patients. RCPA congratulates Allied for this prestigious honor.

#### Wilson and Dinwiddie Receive Awards

RCPA member Mental Health Association of Southeastern Pennsylvania (MHASP) announced its annual Bell of Hope Award will be presented to Bill Dinwiddie, retired president and CEO of MHASP, and the Lifetime Achievement Award will be given to Tim Wilson, The Philadelphia Alliance. The Bell of Hope Award event is the region's opportunity to recognize leaders who make important and lasting contributions to improving the lives of adults, children, youth, and family members challenged by mental health issues. The Bell of Hope Award is the region's most significant public acknowledgement of career or organizational accomplishments in the mental health arena. The awards will be given May 22 in Philadelphia. RCPA congratulates both Mr. Dinwiddie and Mr. Wilson for this well-deserved recognition.



ered complete without payment.

#### NEW MEMBERS

PROVIDER MEMBERS
Institute for Human Resources
and Services, Inc.
Joseph Dehaut, CFO

**Lighthouse Vocational Services** Dean Stoesz, CEO

**TGBHealth, Inc.**Jerry Burton, CEO
Schwenksville

New Holland

Kingston

**The Vista Foundation**Jim Bouder, COO
Hershey

BUSINESS MEMBER
McNees Wallace and Nurick, LLC
Julia Coelho, Attorney
Harrisburg

#### Members Asked to Change Email Security Settings

With thousands of contacts on its subscription lists, RCPA sends a large number of emails on a routine basis. To prevent being labeled a spammer, the association utilizes Cvent, a mass emarketing system. Cvent instituted changes in IP addresses beginning in April to improve deliverability. RCPA requests members forward the following information to information technology directors or contractors and instruct them to whitelist the following IP address ranges to ensure delivery of email:

198.207.147.224 through 198.207.147.255 CIDR: 198.207.147.224/27

When mass emails are sent, they appear as if they come directly from an RCPA staff member. In actuality, the emails are delivered by a Cvent domain. Therefore, RCPA requests that members whitelist the following domains:

Cvent.com
Cvent-planner.com
Cventmail.com
Cvtsv.com

Questions may be directed to Steve Neidlinger (sneidlinger@paproviders.org or 717-364-3280).

#### STATE NEWS BRIEFS

#### Long-Term Care Commission Convenes First Public Meeting

The Pennsylvania Long-Term Care Commission (LTCC) held its first regional meeting seeking public input on the state of long-term care on April 11. The LTCC is part of Governor Corbett's *Healthy Pennsylvania* plan to ensure access to quality, affordable health care. Input from the meeting will be included in development of the final plan that will set priorities and guidelines in improving the long-term care system, including identifying effective ways to provide better coordinated methods of administering long-term care programs and services and ensuring quality health care for older Pennsylvanians and individuals with disabilities. The commission has until December 31 to complete and submit a plan to the governor. The commission will accept written comments and feedback through June 27 (ra-LTCCommission@pa.gov or PO Box 2675, Attn: OLTL Policy, Harrisburg, PA 17105). Additional information, including upcoming public meeting dates and locations, are available via the link.

#### CONFERENCES/ TRAININGS

May 16. In Search of Safe Space: Helping Youth Face Stress and Terror. 2014 STAR-Center Conference. William Pitt Union, University of Pittsburgh. Pittsburgh, PA.

May 20 – 23. Research, Education, and Advocacy for Community Health (REACH). Mid-Atlantic Research and Training Institute and Center for Applied Psychology Conference. Indiana University of Pennsylvania. Indiana, PA.

#### CMS Announces Intent in Medicare Data Transparency

On April 2, the Centers for Medicare and Medicaid Services (CMS) announced its intent via *The CMS Blog* to take another major step forward in making the health care system more transparent and accountable by providing the public with access to information about the number and type of health care services that individual physicians and other health care professionals delivered in 2012, and the amount Medicare paid them for those services. CMS is hopeful that providing this information will assist consumers with making choices about the care they receive.

## Proposed Adoption of Updated Life Safety Code

On April 16, the Centers for Medicare and Medicaid Services (CMS) published a proposed rule in the Federal Register on the adoption of an updated life safety code (LSC) it would use in ongoing work to ensure the health and safety of all patients, family, and staff in every provider and supplier setting. A key priority of CMS is to ensure that patients and staff continue to experience the highest degree of safety possible, including fire safety. CMS intends to adopt the National Fire Protection Association's 2012 editions of the LSC and the Health Care Facilities Code (currently it applies standards set in the 2000 edition of the LSC). This would reduce burden on health care providers, as the 2012 edition is aligned with international building codes and would make compliance across codes much simpler for Medicare- and Medicaidparticipating facilities. The new edition of the LSC applies to hospitals, long-term care facilities, critical access hospitals, Programs for All Inclusive Care for the Elderly, religious non-medical health care institutions, hospice inpatient facilities, ambulatory surgical centers, and intermediate care facilities for individuals with intellectual disabilities. CMS will accept comments on the proposed rule until June 16.

#### HHS Releases Strategic Plan

The Department of Health and Human Services (HHS) has released its strategic plan covering fiscal years 2014 – 2018. The plan addresses health care; public health promotion and protection, disease prevention, and emergency preparedness; human services; and scientific research and development.

#### Progress Made in Disease Prevention and Health Promotion

According to Healthy People 2020 Leading Health Indicators: Progress Update from the Department of Health and Human Services, the nation's health is improving in more than half of the critical measures known to have major influence in reducing preventable disease and death. This report includes 26 specific measures (such as categories of access to care, maternal and child health, nutrition, etc.) that are identified as leading health indicators. As of March, progress has been positive toward achieving targets, with 14 indicators (53.9 percent) having either met the target or shown improvement.

#### Medicare Information Guide for Providers/ Suppliers Revised

The Centers for Medicare and Medicaid Services has revised *Basic Medicare Information for Providers and Suppliers*, which provides education on the Medicare program. It includes an introduction to the Medicare program, becoming a Medicare provider or supplier, Medicare reimbursement, Medicare services, protecting the Medicare Trust Fund, Medicare overpayments and Fee-For-Service appeals, and provider outreach and education.

## Obama Signs Protecting Access to Medicare Act of 2014

On April 1, President Obama signed HR 4302: Protecting Access to Medicare Act of 2014 into law. Included in this bill is a short-term sustainable growth rate fix to prevent a Medicare physician payment cut. The law also provides a one-half percent Medicare physician payment update that began April 1 and goes through December 31. It further provides a zero percent physician payment update January 1 – March 31, 2015. The bill also extends the therapy caps exceptions process through March 31, 2015 and delays for one year implementation of ICD-10 code sets, which had an October 1, 2014 deadline.

## IRF Claims Returning With Reason Code 37096

Novitas Solutions posted a bulletin about a large number of inpatient rehabilitation facility (IRF) claims that have returned with reason code 37096. The claims are returning due to submission errors on the IRF-Patient Assessment Instrument (PAI). When this edit is received, billers are advised to verify that information on the IRF-PAI matches the claim that is submitted for processing in the Fiscal Intermediary Shared System. Members are encouraged to share this bulletin with their billers for additional information and guidance.

#### OIG Releases Report on Billing for Electrodiagnostic Tests

On April 4, the Office of Inspector General (OIG) released Questionable Billing for Medicare Electrodiagnostic Tests by physicians, which includes physiatrists. Electrodiagnostic tests are used to evaluate patients who may have nerve damage. Recent investigations found that electrodiagnostic testing is an area vulnerable to fraud, waste, and abuse. The OIG analyzed Medicare 2011 electrodiagnostic test claims to identify physicians who had unusually high billing for at least one of these measures. It also determined whether physicians with questionable billing received comparative billing reports (CBRs) in 2011 for such tests. Finally, it identified the

geographical areas with the highest amounts of questionable billing. The OIG indicated findings further indicate vulnerabilities in the monitoring of Medicare billing for electrodiagnostic tests and found that approximately 20 percent of physicians with questionable billing for electrodiagnostic tests received CBRs in 2011 on the basis of their 2010 electrodiagnostic test billing. Further, 49 percent of physicians identified as having questionable billing were neurologists and physiatrists.

The OIG recommended that the Centers for Medicare and Medicaid Services (CMS) increase the monitoring

of billing for electrodiagnostic tests, instruct its contractors to monitor the billing of these tests using measures of questionable billing similar to those incorporated into the study, that CMS should develop thresholds for these measures and instruct contractors to conduct additional reviews of physicians who exceed them, and include these measures of questionable billing in its fraud prevention system. Finally, CMS should use CBRs to identify and monitor all physicians, including neurologists and physiatrists, with unusually high billing for electrodiagnostic tests.

#### BRAIN INJURY

#### Report Highlights Sports-related Concussions in Youth

Despite increased attention to and recent research on sports-related concussion, confusion and controversy persist in many areas. These range from agreement on how to define a concussion and the effects of multiple concussions on the vulnerability of athletes to future injuries to when it is safe for a player to return to sports and the effectiveness of protective devices and other interventions in reducing the incidence and severity

of concussive injuries. The Institute of Medicine and National Research Council convened a committee of experts on sports-related concussions in youth to review the science and prepare a report on such concussions in youth from elementary school through young adulthood. The committee was charged with reviewing the available literature on concussions (within the context of developmental neurobiology)

regarding causes of concussions, their relationship to impacts to the head or body during sports, effectiveness of protective devices and equipment in preventing concussions, screening for and diagnosis of concussions, treatment and management, and long-term consequences. Additional information can be found in *Sports-Related Concussions in Youth: Improving the Science, Changing the Culture*.

#### BRAIN INJURY

## Adverse Correlates of TBI in Adolescents Study Focus

"Suicidality, Bullying and Other Conduct and Mental Health Correlates of Traumatic Brain Injury in Adolescents," published in April's PLOS ONE, focuses on data obtained and studied on the adverse correlates of traumatic brain injuries (TBI), including non-hospitalized cases, among adolescents. The study found significant associations between TBI and adverse internalizing and externalizing behaviors in this large population-based study of adolescents. Those who reported lifetime TBI were at a higher risk for experiencing mental and physical health harms in the past year than peers who never had a head injury. Primary physicians are encouraged to be vigilant and screen for potential mental health and behavioral harms in adolescent patients with TBI. Efforts to prevent TBI during adolescence and intervene at an early stage may reduce injuries and comorbid problems in this age group.

## Updated FAQs on HCBS Final Regulations Posted

The Centers for Medicare and Medicaid Services posted a set of updated frequently asked questions (FAQs) regarding new requirements in the recently published home and community-based service final regulations.

#### Program on Alternative Medicine for TBI June 21

Alternative Medicine for Traumatic Brain Injury (TBI) is June 21, 10:00 a.m. – 2:00 p.m., Bryn Mawr College (Gateway Building). The event was organized by Thomas Hartmann, author of *Broken Mind, Persistent Hope:*A Memoir of Recovery from Brain Damage and Manic Depression, to showcase alternatives he found helpful – homeopathy, acupuncture, and neurofeedback (including Bernardo Merizalde, MD, R. Kurt Ebert, PhD). Attendees should bring a bag lunch; coffee and tea will be provided. The cost is \$25 for preregistration or \$35 at the door. Register at 610-789-0451 or leeandtom01@gmail.com.

#### Brain Injury Legislative Press Conference June 3

RCPA, as a member of the Brain Injury Coalition, will hold a Brain Injury Legislative Press Conference/Awareness Event June 3, 11:30 a.m., State Capitol Rotunda, Harrisburg. Members, clients served, and family members are encouraged to save the date and attend. Additional information will be forthcoming.

#### VOCATIONAL REHABILITATION

#### **ODP Workshops Meeting**

The Office of Developmental Programs (ODP) recently held its second meeting with executive directors of sheltered workshops. The formal presentation was provided by Dr. Domenico Cavaiuolo, professor of special education and rehabilitation, East Stroudsburg University, which featured discussion regarding program conversion and building capacity to provide community-based employment and other inclusive day support options for people with disabilities.

Participants had opportunity to develop challenges, ideas, and solutions related to policy, program, and the system. Challenges included licensing issues, overregulation, the need for cross-department cooperation (ODP, Office of Vocational Rehabilitation, Education), parent expectations of the system, transportation, staff recruitment and retention, and revising service definitions to allow creative work environments.

Recommendations to assist with system changes included:

- More flexible service definitions to support transition from facility-based to community-based services;
- Separate definition of transportation for those receiving residential services;

- Pilot programs to support provider innovation;
- Change individual support plans to allow more flexibility in time frames;
- Implement one standardized tool for quality management to reduce multiple tool use, which takes excessive time and resources;
- Allow programs to build their own businesses and integrate them;
- Educate families and participants on system expectations and develop motivation tools for their use; and
- Reduce duplication of provider monitoring and licensing.

#### Rhode Island Settlement

On April 8, the US Department of Justice and Rhode Island announced agreement regarding unnecessary segregation of individuals with intellectual and developmental disabilities (IDD) in sheltered workshops and facility-based day programs. It was determined that the state's day activity service system relied on segregated settings to the exclusion of integrated options. Under this agreement, Rhode Island will implement these changes:

- Provide supported employment placements in the community,
- Pay at least minimum wage,
- Work an average of at least 20 hours per week,
- Integrate non-work activities when individuals are not working, and
- Begin transition services for students starting at age 14 to include internships, mentoring, and job site visits.

This federal investigation and settlement is based on violations of the Americans with Disabilities Act for over 3,200 residents with IDD. Findings indicate that Rhode Island failed to provide services in the most integrated day activity settings and placed transition age students at risk of segregation. The consent decree focuses on individuals in sheltered workshops, facility-based day programs, and transitioning youth. Details, including a copy of the consent decree, fact sheet, complaint, and letter of findings are available from ADA.gov.

#### MENTAL HEALTH HEADLINES

#### Mental Health Services Booklet Revised

The Centers for Medicare and Medicaid Services has revised the *Mental Health Services* booklet. The booklet contains covered and non-covered mental health services, eligible professionals, outpatient and inpatient psychiatric hospital services, same day billing guidelines, and National Correct Coding Initiative.

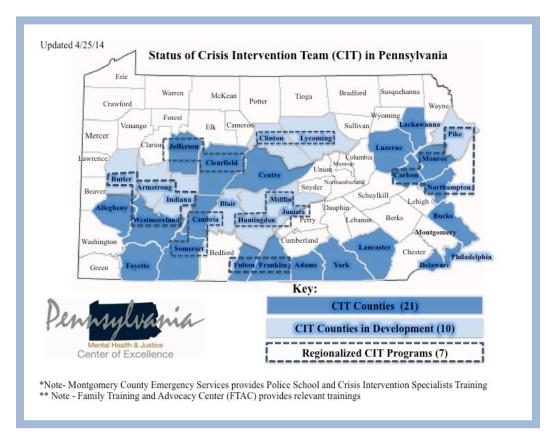
#### OMHSAS Policy Clarification Raises Concerns

The National Council, through MTM Services, has worked with a number of RCPA members to implement practice models that focus on patient access and retention. A key component of this model is the ability of clinicians to use concurrent documentation with consumers. The collaborative completion of session notes with the consumer's participation is a best practice that benefits both the consumer and the practitioner in developing trust and in promoting active engagement in the recovery process and also allows for active dialogue and agreement regarding progress towards goals.

The Office of Mental Health and Substance Abuse Services (OMHSAS) has issued *Policy Clarification 02-14-01* indicating that concurrent documentation is not allowable for peer support and other services. All outpatient mental health providers are asked to share with RCPA whether they have implemented this model and whether it has proved effective in the recovery process. RCPA is taking immediate action on this issue and will engage key OMHSAS leadership in this effort. Comments and questions may be directed to Anne Leisure or Lynn Cooper.

#### OMHSAS Issues Updated Telepsych Bulletin

The Office of Mental Health and Substance Abuse Services (OMHSAS) has issued *OMHSAS-14-01: OMHSAS Guidelines for the Approval of Telepsych Services in HealthChoices* to clarify and reissue guidelines that the Department of Public Welfare (DPW) uses to approve telepsychiatry and telepsychology programs. This updated bulletin supersedes *OMHSAS-11-09: OMHSAS Guidelines for the Approval of Telepsychiatry*. While for the most part the bulletin contains updates to language without affecting basic requirements, there is a provision that behavioral health managed care organizations (BH-MCOs) may now reimburse providers the cost of the mental health staff that is on site to attend to emergency or other needs. BH-MCOs may also now pay a telehealth originating site facility fee for the technology services provided. RCPA is pleased that BH-MCOs may reimburse providers for additional services and will work with OMHSAS to address member concerns. Further questions may be addressed to Anne Leisure or Lynn Cooper.



#### Statewide Crisis Intervention Team (CIT) Meeting

Crisis Intervention Team (CIT) is a 40-hour training program of policebased first responder crisis intervention, developed and delivered in partnership with community mental health agencies and advocacy groups. Recently, Centre County and the Pennsylvania Commission on Crime and Delinquency (PCCD) hosted a meeting in State College, gathering representation from 18 counties that included counties with established CIT programs and counties in the beginning stages of developing CIT programs. The meeting provided an excellent outlet to share effective practices, barriers to implementation, and successful tools to assist new counties with efforts to get started. It also served as a platform for the

Center of Excellence (CoE) to discuss the collaboration with the Pennsylvania Chiefs of Police Association, role with CIT, and how the CoE can assist CIT programs throughout the commonwealth. Please contact Katy Winckworth-Prejsnar (kw494@drexel.edu or 215-553-7174) for more information or visit the CoE web site.

## Congress Passes Excellence in Mental Health Act Demonstration, Delays ICD-10

On March 31, the US Congress passed *Protecting Access to Medicare Act (HR 4302),* legislation that provides a demonstration program based on the Excellence in Mental Health Act and a one-year delay on implementation of ICD-10 codes. As stipulated, providers will not be required to adopt ICD-10 codes until October 1, 2015. Providers have been working to comply with the originally scheduled fall implementation date. The National Council for Behavioral Health noted that the one-year delay leaves the field seeking clarification from the Centers for Medicare and Medicaid Services (CMS). Some provider groups

are interested in implementing ICD-10 before 2015. CMS is expected to provide more information regarding the delay.

The National Council has also provided detail regarding the implementation timeline of the eight-state demonstration program based on the Excellence in Mental Health Act.

Details about steps that will occur before the launch of the demonstration program are available. RCPA will continue to inform members on the ICD-10 delay and the demonstration program as it becomes available. Further questions may be directed to Anne Leisure or Lynn Cooper.

#### Lokuta Resigns

Office of Developmental Programs Deputy Secretary Fred Lokuta resigned in April. He worked in the state system for 30 years, beginning as a direct support staff worker. RCPA worked cooperatively with Lokuta to address a variety of issues such as dual diagnosed curriculum, sheltered workshops and supported employment, and futures planning. To learn more about RCPA members and their services he visited the Cumberland/ Perry Arc Center for Industrial Training, Arc Centre County Forever Home, Strawberry Fields residential program, Cambria County Association for the Blind and Handicapped, and Family Services of Western Pennsylvania.

#### Frantz Named Acting ODP Deputy

The Office of Developmental Programs (ODP) announced that Dolores Frantz has been named acting deputy secretary. Ms. Frantz has applied quality management principles and tools to move organizations and programs in health and human services forward for the last 25 years. Frantz joined ODP in 2002. As a Certified Professional in Healthcare Quality, she develops and delivers training in quality management strategy for internal and external stakeholders and collaborates with the Centers for Medicare and Medicaid Services and quality leaders from other states to build waiver quality strategy. She served as project manager for ODP's strategic Futures Planning process, where internal and external stakeholders identify and translate long-range goals for Pennsylvania's developmental disabilities system into near-term, achievable priorities and results. RCPA has worked with Ms. Frantz on the Futures Planning initiative. She has been invited to the June 5 RCPA Intellectual and Developmental Disabilities Committee. The association welcomes Ms. Frantz to her new position and looks forward to a positive working relationship.

The Office of Developmental Programs (ODP) has released the following information.

Announcement #021-14: ODP Deaf Services Overview. Required Training for Supports Coordinators is available until July 3.

Announcement #022-14: Department of Public Welfare Medication Administration Program. A new medication administration course for unlicensed staff is available.

Announcement #023-14: ODP Presentation Governor's Proposed Budget FY 2014–15.

Announcement #024-14: Training Now Available for Community Services Direct Support Professionals. Health Care Quality Units are offering trainings for the first two lessons in the dual diagnosis curriculum. Policy Specialist Drummond has been a member of the team which has worked for two years developing this curriculum.

Announcement #025-14: ODP Presentation Certification and Licensing System Enhancements Effective April 28, 2014. Four calls are scheduled in May and June with the Bureau of Human Services Licensing to discuss enhancements to the certified licensing system.

Informational Packet #026-14: Preparations for Fiscal Year 2014–15 ISP Renewal Period. Topic areas addressed include use of waiver service definitions, rate load and dependencies, supplemental habilitation and additional individualized staffing, provider qualifications, and the Person/Family Directed Supports Waiver cap.

#### Bulletin Addresses IDD Services and Persons Who Are Deaf

The Office of Developmental Programs released *Bulletin #00-14-04*: Accessibility of Intellectual Disability Services for Individuals Who Are Deaf. The bulletin clarifies requirements to provide communication assistance to individuals who are deaf, criteria to be used to determine if an individual is deaf, and types of communication assistance to facilitate communication for these individuals.

#### Adult Protective Services Assistance

The Office of Developmental Programs has been conducting Adult Protective Services networking calls with two remaining, May 28 and June 2–5. The calls address questions regarding implementation of the *Adult Protective Services Act 70 of 2010*. The Office of Long-term Living (OLTL) has also provided webinar training for direct service providers and service coordinators in the OLTL programs. A copy of the training is available from the link.

#### Hope Springs Farm

RCPA welcomes new member Hope Springs
Farm, a creative provider of services to adults
with intellectual and developmental disabilities.
The program offers farm-based pre-vocational
opportunities on a 17-acre site in Hershey to
approximately 48 adults who attend each
weekday. According to co-founder Nina Rover,
the purpose is for "growers" to learn new skills
and take independent responsibility for a wide
variety of chores in animal husbandry, horticulture, and community volunteering. Activities
are designed with building skills that impact all
aspects of the growers' lives.

The growers feed and care for many kinds of animals; plant from seed in a four-season greenhouse and work in the flower and vegetable raised beds; bake, cook, can, and eat the produce grown; and make crafts, including fleece ornaments from farm sheep that has been washed, carded, and dyed by them. They serve in a variety of community volunteer sites such as the Central Pennsylvania Food Bank, Hershey Meals on Wheels, Hershey Hotel Garden, and several nursing homes. The growers also learn life skills, such as grocery shopping and meal planning. Most importantly, a grower at Hope Springs Farm can expect to spend a meaningful day full of purpose, friendship, and fun. Making friends, working cooperatively on chores, and



helping one another lets each grower know immense satisfaction.

Policy Specialist Linda Drummond recently toured this program with Governor's Cabinet and Advisory Committee for People with Disabilities Executive Director Devon Grant. Rovner provided the tour and overview of the vision and development of this unique program. To learn more, access the Hope Springs Farm web site.

#### States Report on Inclusion

Each year United Cerebral Palsy publishes *The Case for Inclusion*, which tracks the progress each state has made regarding community living for individuals with intellectual and developmental disabilities. Data shows how each state is performing overall on areas such as promoting independence, promoting productivity, keeping families together and reaching those in need, and tracking health, safety, and quality of life. Pennsylvania is ranked 16, up 13 places from previous reports. This has occurred due to increasing resources available for community supports such as homelike settings and reducing by 24 percent the total population living at state institutions.

#### **DRN Names CEO**

The Disability Rights Network (DRN) of Pennsylvania has selected Peri Jude Radecic, Esq. as its new CEO. She will begin July 1. Ms. Radecic is currently executive director at the Arizona Center for Disability Law, the state's protection and advocacy agency.

#### Children's Mental Health Awareness Day May 8

The Substance Abuse and Mental Health Services Administration will provide media messages and other resources for local communities to use to celebrate Children's Mental Health Awareness Day. The national launch event on May 6 will focus on the needs of young adults, ages 16-25. In Pennsylvania's public mental health system, 216,978 children and youth were served in 2012. May is the opportunity to remind communities that "child mental health is not caused by personal weakness, cannot be overcome by will power or by a "change in attitude," and is more common than most people think." Pennsylvania – and especially community providers of child and adolescent mental health services – will share the message of "Listen Don't Label, Ask Don't Fear." Pennsylvania Children's Mental Health Awareness efforts are being facilitated by Pennsylvania System of Care Partnership and Pennsylvania Families, Inc. More information, including a long list of resources for young adults, is available on the SAMHSA web site or from the partnership.



#### ON THE AUTISM SPECTRUM

#### **Autism Act Reauthorization**

The Combating Autism Act is set to expire in September unless Congress renews the legislation. Currently, \$231 million is allocated annually for autism research, tracking, education, early identification, and intervention programs. Eighteen national organizations are asking for changes to this legislation when it is reauthorized. Those organizations note that much of the funding goes toward underwriting research at the National Institutes on Health and only 2.4 percent is spent on researching services and 1.5 percent funds projects focused on adults.

#### Create an Account at PAautism.org

Staff serving individuals with an autism spectrum disorder will be able to have a fully-customized experience at PAautism.org. Account creation, a new feature, will give professionals, consumers, and family members the option to personalize their online profile. The personalized account will allow users to:

- Select resources, events, and trainings as "favorites;"
- Receive customized suggestions for resources based on other resources viewed or selected as favorites in the past;
- Stay up-to-date on new resources that are added in areas of interest; and
- Create multiple "profiles" within the account (e.g. a parent with two children in different age groups can create separate profiles tailored to each child's needs).

#### "See Amazing in All Children"

Sesame Workshop is launching a new initiative dubbed "See Amazing in All Children." This new effort is designed to reduce stigma surrounding kids with autism and help children with the disorder, their families, and service providers support children to learn important life skills. Sesame Workshop will create digital tools to help children with autism learn to play with others and complete everyday activities such as brushing teeth, getting dressed, and trying new foods. We can expect that the "friends on Sesame Street" will work to educate the public about autism and promote the idea that kids on the spectrum are much like other kids on the block. Jeanette Betancourt, senior vice president for community and family engagement, noted "This has become one of the most widely-discussed topics in childhood development, yet we have found that there's a lack of understanding among the general public about children with autism. Sesame Workshop has a long history of addressing diversity, acceptance, and inclusion and can play a critical role in reducing misconceptions by highlighting the commonalities children with autism share with all children."

#### Pennsylvania Autism Training Conference June 10

The Pennsylvania Autism Training Conference is June 10–12 at Eden Resort Inn and Suites, Lancaster. The conference will focus on addressing real-life situations faced by those who work directly with individuals with autism, from the youngest children to older adults. Presenters will share strategies that exemplify best and most current practices. Each session will offer practical strategies and solutions that can improve the quality of life for people with autism and their families. New this year, the conference will offer sessions for adults on the spectrum!

# RCPANEWS - MAY 2014

#### Children's Division Meets June 4

The Children's Division will meet June 4 in Harrisburg. The meeting will provide opportunity for members to discuss updates, challenges, and changes in the child-serving systems. The meeting will also focus on the many changes in operational and business practices impacting provider organizations and a panel on co-locating services in school, health care, and other community settings.

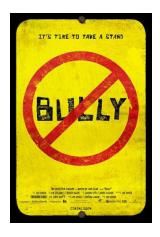
#### PCIT Focus on Sustainability

The statewide steering committee for the University of Pittsburgh training research project for Parent-Child Interaction Therapy (PCIT) – known as "PCIT Across Pennsylvania" – met in State College. Discussion focused on how to sustain PCIT services as they expand and become established beyond the period of implementation and grant support. Project staff reported on a survey of administrators of provider agencies asking what kind of resources they need to be able to continue to offer PCIT. Staff also reported on a study currently underway to understand how other states have sustained PCIT over time. There are approximately 215 trained PCIT clinicians in Pennsylvania. As part of the "PCIT Across Pennsylvania" grant, two series of trainings for new PCIT therapists have been completed or are underway, and a third will begin in May. The fourth series will begin in September, targeting primarily rural counties. More information about PCIT in Pennsylvania is available.

## Federal Collaborative Launches *Birth to 5: Watch Me Thrive!*

Recent statistics indicate that as many as one in four children aged 0-5 are at moderate- or high-risk for developmental, behavioral, or social delay. The Administration for Children and Families, Substance Abuse and Mental Health Services Administration, and other federal agencies focused on the health and well-being of young children have partnered to launch *Birth to 5: Watch Me Thrive!* This initiative is an effort to encourage developmental and behavioral screening and support for children, families, and the providers who care for them by promoting efforts to celebrate milestones, promote universal screening, identify possible delays and challenges early, and enhance developmental supports.

Birth to 5: Watch Me Thrive! will support the implementation of these core missions by releasing a compendium of research-based screening tools and user's guides for multiple audiences. Resources include materials, information, and contacts from each partner agency and relevant grantees that will serve to bring awareness to parents and providers about early child development; how and where to get help if a concern exists; tips and techniques to help children with disabilities or delays; and free online training modules on a range of topics. Visit the web site for a complete set of resources.



## Film Screening of "BULLY"

The Highmark Foundation, the Center for Safe Schools, and the Center for Health Promotion and Disease Prevention are inviting providers, families, and the community to a free film screening of "BULLY" and postviewing discussion facilitated by bullying prevention experts. This 45-minute documentary is designed to promote awareness about bullying issues. Directed by Lee Hirsch, "BULLY" follows two students and their families over the course of a school year. It has been edited and does not include the more controversial material found in the theatrical release. This event aims to be a catalyst for change in the way people deal with bullying. Pennsylvania bullying prevention experts will offer additional insights and solutions. Upcoming events are

> May 5 Carnegie May 17 Harrisburg June 10 Altoona June 11 Allentown

More information and the ability to reserve seats online is available. Walk-ins will be admitted as space allows.

#### Research Supports Co-located Mental Health Services

Dr. David Kolko, a leader of the Pennsylvania Physical Health-Behavioral Health Learning Community, was recently featured in a Pittsburgh Post-Gazette article on integrated health care based on his study just published in Pediatrics. The five-year, federally-funded study found children treated for mental health disorders at their pediatricians' offices were nearly seven times more likely to complete a program of care, with better results, than those referred to outside specialists. Lead researcher David Kolko said the results suggest families view the pediatrician as a convenient, trusted, and discreet source for effective treatment of certain behavioral disorders. "They came back to a setting where they've been for years and feel comfortable," said Kolko, a clinical psychologist and professor of psychiatry, psychology, pediatrics, and clinical and translational science at the University of Pittsburgh School of Medicine.

#### CLASSIFIEDS



#### PROFESSIONAL SOCIAL WORK OPPORTUNITY

Dickinson Center, Inc. (DCI) is seeking a licensed clinical social worker to provide professional services at its Ridgway (Elk County) location. The successful candidate will provide clinical diagnostic and treatment services to a diverse client population. DCI operates program services in an eight-county region. The position is full-time and provides a generous benefit package. DCI is offering a \$5,000 sign-on bonus to the successful candidate. DCI holds the designation as a federally qualified manpower shortage area and qualified applicants may apply to NHCS for the student loan forgiveness program. Please visit www.dickinsoncenter.org to file an electronic application or mail a cover letter and resume to Carol Wells, Director of Human Resources, Dickinson Center, Inc., 43 Servidea Dr, Ridgway, PA 15853.

## BHRS and STAP Reductions – Gauging the Impact

RCPA will convene two meetings May 13 to discuss the local and statewide impact of service reductions on children, families, and communities. It has been two years since the state implemented Behavioral Health Rehabilitation Services (BHRS) Redesign and the Office of Mental Health and Substance Abuse Services bulletin that impacted the design and operation of Summer Therapeutic Activity Programs (STAP). Data gathered by the association show an estimated oneyear reduction of \$50 million in Therapeutic Staff Support Services and the loss of hundreds of mental health worker and mental health professional jobs over a one-year period. More importantly, there is no statewide information about the impact of these reductions on the well-being of children, families, schools, and communities. While RCPA supports the goals of quality improvement and operational efficiency, there continue to be strong indications that changes in the service delivery system have resulted in dramatic reductions in BHRS, STAP, and other child mental health services. A morning meeting with current and former providers will be followed in the afternoon with a meeting of provider, county, and managed care RCPA members and invited guests. Registration information is available to members on the RCPA web site. For more information contact Connell O'Brien.

#### OCYF Rate Methodology Recommendations

Since September 2013, a task force lead by the Office of Children, Youth and Families (OCYF) in collaboration with county and provider representatives and consultants, has worked to craft rate methodology recommendations "to determine reimbursement for actual and projected costs of child welfare services which are reasonable and allowable." On May 27, 1:00 - 4:00 p.m., an informational meeting will be held regarding the recent Act 55 Rate Methodology Task Force recommendations to the General Assembly. The focus of these recommendations is the rate methodology for out-of-home child welfare and juvenile justice services provided under contract with counties. The meeting will be held at the Child Welfare Resource Center in Mechanicsburg. Providers may also participate via webinar. The Report of the Recommendations of the Rate Methodology Task Force to the General Assembly, along with a frequently asked questions document will be made available in the next few weeks for review. The agenda for the meeting is available. Following release and review of the recommendations document guestions may be sent to RA-PWRateMethodology@pa.gov.

#### **IDD Committee**

The March 13 Intellectual and Developmental Disabilities Committee featured presentations and discussion with Office of Developmental Programs (ODP) Deputy Secretary Fred Lokuta, Fiscal Director Deb Donahue, and Fiscal Consultant Mark Mannion. They provided an overview of the governor's proposed budget for FY 2014/15 for ODP. Members shared concerns related to residential programs experiencing financial deficits due to the current vacancy factor of 97 percent, ineligible rates, and area rates that do not cover the provider's expenses. ODP Dual Diagnosis Lead Marlinda Smith provided an update on the joint initiative with ODP and the Office of Mental Health and Substance Abuse Services. Bureau of Human Services Licensing Director (BHSL) Matt Jones discussed a variety of licensing issues related to direct service providers. In September 2013, BHSL released a revised Licensing Reference Manual for Personal Care Home, Assisted Living, Child Residential, Intellectual Disabilities and Mental Health Service Providers. This manual provides information regarding policies on reportable incident process, reporting requirements for adult training facilities, vocational facilities, ID community homes, family living homes, communicable diseases, and how to request a regulatory waiver. Scott Johnson, SR Wojdak and Associates, provided a 2014/15 state budget overview. Comprehensive meeting notes are available to members.

#### **SCO Subcommittee**

Guests at the March subcommittee meeting were Office of Developmental Programs (ODP) Director of Quality Initiatives Jen Fraker and Human Services Program Specialist Sonya Hipple. Discussion focused on ODP trainings under development for Supports Coordination Organizations (SCOs) that are based on the ODP SCO Focus Group meeting held several months ago for agency input. Issues discussed included the Administrative Entity Oversight Monitoring Process, the Adult Protective Services request for a vendor to facilitate implementation of protective services, and issues with data integrity of reports generated from HCSIS. Comprehensive meeting notes are available to members.

#### Vocational Rehabilitation Subcommittee

The Vocational Rehabilitation Subcommittee featured Mike Kinger, general manager at Lowe's Distribution Center, Pittston, who provided an overview of its program to hire persons with disabilities. Office of Vocational Rehabilitation (OVR) Chief, Division of Business Services Ralph Roach and Outreach and Michele Bornman, Eastern Regional Manager provided an update on recent changes to the Rehabilitation Act Section 503 and OVR's Early Reach Initiative. Committee discussion focused on RCPA initiatives including a "Best Practices in Employment, Pre-vocational, and Vocational Services" document overviewing all employment and vocational training options offered to individuals with intellectual and developmental disabilities, efforts to continue RCPA's work in identifying positive economic and programmatic impact sheltered workshops have on our communities, and the need for agencies to support Senate Bill 844. Comprehensive meeting notes are available to members.

Shall we make a new rule of life... always try to be a little kinder than necessary?

– JM Barrie

#### CALENDAR

10:00 a.m. – 3:30 p.m.	BHRS-STAP Impact Meetings Penn Grant Centre
10:00 a.m. – 12:30 p.m.	Brain Injury Committee Penn Grant Centre
9:30 a.m. – 12:00 p.m. 1:00 – 4:00 p.m.	Criminal Justice Committee Drug and Alcohol Committee Penn Grant Centre
9:30 a.m. – 12:00 p.m. 1:00 – 4:00 p.m.	Children's Committee Mental Health Committee Penn Grant Centre
9:00 – 11:00 a.m. 11:30 a.m. – 2:30 p.m. 2:45 – 4:45 p.m.	Supports Coordination Organization Subcommittee Intellectual/Developmental Disabilities Committee Vocational Rehabilitation Subcommittee Penn Grant Centre
12:30 – 2:30 p.m.	RCPA Annual Membership Meeting Penn Grant Centre
10:00 a.m. – 12:30 p.m.	Medical Division Meeting Penn Grant Centre
1:00 – 2:00 p.m.	Chilean Pediatric Disability System of Care  IPRC Webinar
	RCPA Capitol Day Capitol Rotunda, Harrisburg
	9:30 a.m. – 12:30 p.m. 10:00 a.m. – 12:00 p.m. 1:00 – 4:00 p.m. 1:00 – 4:00 p.m. 1:00 – 4:00 p.m. 1:30 a.m. – 12:30 p.m. 1:30 a.m. – 2:30 p.m. 12:30 – 2:30 p.m.