



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

REHABILITATION & COMMUNITY
PROVIDERS ASSOCIATION

JULY 2014

■ RCPA NEWS

RCPA Capitol Day Attendees Fill Rotunda

Hundreds of community providers, consumers, and families rallied at the Capitol June 17 in Harrisburg to prevent budget cuts that could strike hard at key programs. Mental health, intellectual disability, addiction, and medical rehabilitation community services already are stretched thin. Two years ago, the state imposed a 10 percent funding cut that still has many providers and families who rely on services reeling.

The governor's proposed budget includes an Intellectual Disability Waiting List initiative and flat funding for several key community services and programs. Community providers are urging the legislature to preserve funding in the final spending plan, which is to be approved by June 30. Rally participants were joined by several key legislators who are recognized champions including Rep. Gene DiGirolamo, Rep. Thomas P. Murt, Rep. Mike Sturla, and Rep. Pamela DeLissio.

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RCPA NEWS



RCPA CAPITOL DAY
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Major news media outlets attended the rally, providing additional coverage throughout the state.

While the RCPA event was a key focal point for ensuring that the General Assembly is aware of the importance of maintaining community services funding, RCPA urges members to continue vocal and consistent outreach in districts. All indications are that the state budget will be late this year, which enables significant educational efforts to take place.

Among RCPA's priorities for the 2014/15 budget:

- **Preserve jobs and local business in Pennsylvania communities.** Loss of jobs means Pennsylvanians will lose health insurance, will not pay taxes, purchase other goods and services, and support the economy.
- **Preserve the safety net and recognize the importance to Pennsylvania communities of funding mental health, intellectual disability, and addiction services at a sustainable level over time.** Keeping people receiving services in the community remains vastly more cost effective than treatment at state hospitals and centers or incarceration.
- **Explore ways to increase state government revenues.** Increasing state revenues, even temporarily, may be the best way to enable state agencies to meet core responsibilities to Pennsylvania's most vulnerable people. Revenue options may be achieved in a variety of ways. Support for revenue enhancement includes a wide variety of initiatives – a smokeless tobacco tax, appropriately taxing Marcellus shale, closing business tax loopholes, a revised sales tax structure, and others.

For more information regarding RCPA budget priorities, contact [Anne Leisure](#) or [Richard Edley](#).

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Member Connection


In the past month, RCPA performed a survey of members relative to how “connected” they felt to the association. I had heard that some people felt a bit “distant” since the merger in 2013 and, indeed, we are a large and different association today. The Board of Directors and I determined that a survey might be revealing of important directions we should take in the upcoming year.

We had good participation; 182 members responded and of those, 85 percent represented full members. Even better news is that 80 percent felt that their connection to the association was “strong” or “adequate.” Of course that also means that 20 percent did not feel so – something we need to address. The survey asked “What is it that people want to see more of from RCPA?” The results were interesting and a little surprising.

Suggestion	Response Count	Response Percent
Regional meetings	121	73.3%
Increased in-person networking opportunities	84	50.9%
Adjust committee meeting schedule to increase member-to-member contact	60	36.4%
Increased social networking options (discussion forums, Twitter feed, etc.)	55	33.3%
Increased connections between committee chairs/board members	30	18.2%
Attend board meetings	24	14.5%

In addition, by written comments it was clear that members appreciated *Alerts and Infos*, the *Weekly Digest*, webcasts/committee meetings, lobbying and advocacy, and responsiveness of staff. There were also concerns relative to the need to increase the amount of committee meetings, the loss of in-person contact (e.g., social/networking), a need to increase focus on traditional mental health and drug and alcohol providers, increase regional meetings and improve local connections, and more member connection to the board.

What do we make of this? Clearly, we need to increase our regional and local presence though that is easier said than done. Will it be meetings on global issues attracting all members? Should it be meetings on specific issues or divisions? Several aspects must be weighed. We will also work on a revised committee schedule, perhaps coinciding with board meetings to allow for increased connection and for social networking opportunities. RCPA will also add to our staffing to ensure that there is regional presence, a focus on all divisions, and an increased emphasis on webinars and



Richard S. Edley, PhD

We look forward to year two and bringing RCPA to even higher levels and are excited about ways to better connect to members.

social media; all this while continuing our strong lobbying, advocacy, and policy presence.

It will be a busy year. It is hard to believe that we are just one year old. The first year of RCPA had many accomplishments of which to be proud. We look forward to year two and bringing RCPA to even higher levels and are excited about ways to better connect to members. Thank you for the feedback as we grow stronger.

Richard S. Edley, PhD
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Philadelphia Organizations Honor Outgoing Leaders

The Philadelphia Coalition announced the retirement of Polly Schaller at the end of May. A long-time RCPA member, Ms. Schaller served as the coalition's executive director for 16 years. Coalition President Betty Andl-Petkov described Ms. Schaller as always committed to assuring that the needs of individuals in service are prioritized and that their voice is heard. Under her leadership, the coalition has made a significant impact on improving the behavioral health and intellectual disability system of care that supports the most vulnerable citizens in Philadelphia.

The Alliance of Community Service Providers in Philadelphia recently honored Tim Wilson on his retirement. Mr. Wilson served as executive director of the Alliance since 2000. The organization is also a long-time member of RCPA. Alliance Board President Jerry Skillings notes that significant changes have occurred in the last 18 months of Wilson's tenure including development of a strategic plan and adding other organizations to its membership. The Alliance is an active and effective voice for direct service providers and the people they serve.

RCPA extends its best wishes to Ms. Schaller and Mr. Wilson on their retirements.

McCarthy Announces Retirement

Stairways Behavioral Health President and CEO William McCarthy has announced his retirement effective December 31. Mr. McCarthy has been with Stairways for over 41 years and is a long-time member of the association. Stairways assists persons with mental health care needs at any stage of life in their recovery by providing comprehensive rehabilitation, treatment, and supports essential for living, working, learning, and participating fully in the community. RCPA wishes McCarthy a long and healthy retirement.

Stairways Criminal Justice Program Highlighted

RCPA is pleased to share an article published in the June 22 [Erie Times](#) regarding the outstanding Stairways Behavioral Health mental health program in the Erie County jail. The article highlights the success of the program and the many facets that make it work from the Stairways staff to the jail staff and warden to county probation and parole and several enlightened judges. Congratulations to Stairways for this well-deserved tribute!

NEW MEMBER

PROVIDER MEMBER

Good Shepherd Rehabilitation Network

Cynthia Lambert, VP Government and Community Relations
Allentown

IN MEMORIAM

Effie Jenks



Effie Jenks, longtime association member, president of The Arc of Centre County, and previously its executive director for 23 years, passed away June 16. She worked proactively throughout the years as the field of intellectual disability has changed to meet existing needs, set higher standards, and responded quickly to new initiatives. These efforts included establishing truly individualized services. With her guidance, the agency provides residential, home and community habilitation, and supportive employment services. It was with great resolve that she remained focused on the needs of the future with her most current accomplishment being the Forever Home, a group home specifically designed for persons with intellectual disability and Alzheimer's/dementia to have the supports needed to continue to live in the community. Forever Home was the recipient of RCPA's 2013 Innovation Award. An article and photograph was included in the February [RCPA News](#). Ms. Jenks will be greatly missed by those individuals and families she served and the professionals who had the privilege to work with her.

RCPA

REHABILITATION & COMMUNITY
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RCPA Conference

October 7 – 10, 2014

Seven Springs Mountain Resort



TOGETHER

One Mission • One Agency
One Provider • One Person

ONE

Registration Opens July 28

■ 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.



Suicide Prevention Education Bill Ready for Governor's Signature

House Bill 1559, introduced by Rep. Frank Farina, passed the House and Senate and is ready for Governor Corbett's signature. HB 1559 provides for suicide prevention education in the school setting and will require schools to adopt youth suicide awareness and prevention policies and child exploitation awareness education. The final version of the bill:

- Requires schools to adopt an age-appropriate youth suicide awareness and prevention policy;
- Requires teachers to receive four hours of training in youth suicide

awareness and prevention every five years;

- Requires the Department of Education (PDE) to develop a model youth suicide awareness and prevention policy and curriculum and make it available to all schools; and
- Although classroom education for students remains optional, schools are required to adopt a policy on suicide prevention.

HB 1559 originally passed the House on September 24, 2013 and was

amended in the Senate to include additional provisions. The House did not concur with the Senate provisions that they considered mandates, but a compromise was reached. The compromise eliminated the requirement for classroom education, making it optional, but schools are required to adopt a policy on suicide prevention and PDE is required to provide a model curriculum. After passage by the House as amended, HB 1559 was then referred to the Senate for concurrence, which took place June 17.

■ FEDERAL NEWS BRIEFS

ValueOptions and Beacon Health Strategies to Merge

ValueOptions and Beacon Health Strategies, leaders in behavioral health care management services for Medicaid, Medicare, and commercial populations, issued a [press statement](#) reporting they have entered into a definitive agreement to merge. The statement describes the merger as designed to create the premier managed behavioral health care company in the US. The combined business will serve 43 million people across all 50 states and the United Kingdom. It will have approximately 4,000 employees and be headquartered in Boston, MA.

Proposed Rule Issued on Modifications to EHR Incentive Programs

On May 23, the Centers for Medicare and Medicaid Services issued a [proposed rule](#) in the *Federal Register* that would change the meaningful use stage timeline and the definition of certified electronic health record (EHR) technology. It would also change requirements for the reporting of clinical quality measures for 2014. Comment on the proposed rule will be accepted through July 21.

CMS Releases C2C Initiative

The Centers for Medicare and Medicaid Services (CMS) recently launched a national initiative, [From Coverage to Care](#), to assist people with new health care coverage to understand benefits and connect to primary care and the preventive services that are right for them to live a healthy and long life. The From Coverage to Care (C2C) initiative will be an ongoing project as more and more individuals obtain coverage. This launch also marked the release of the new [Roadmap to Better Care and a Healthier You](#) that includes eight steps to help consumers and health care providers be informed about the diverse benefits available and how to use them appropriately to access primary care and preventive services.

OIG Releases Semi-Annual Report

The Office of the Inspector General (OIG) released its [semi-annual report to Congress](#) on May 28, summarizing the activities of the OIG, Department of Health and Human Services (HHS), for the six-month period that ended March 31. The OIG reported 465 criminal actions against individuals or entities that engaged in crimes against HHS programs and 266 civil actions, which include false claims and unjust-enrichment lawsuits filed in federal district court, civil monetary penalties settlements, and administrative recoveries related to provider self-disclosure matters. The OIG also reported exclusions of 1,720 individuals and entities from participation in federal health care programs.

Proposed Rule on Prior Authorization Process for DMEPOS

The Centers for Medicare and Medicaid Services released a [proposed rule](#) in the May 28 *Federal Register* that would establish a prior authorization process for certain durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) items that are frequently subject to unnecessary utilization. It would add a contractor's decision regarding prior authorization of coverage of DMEPOS items to the list of actions that are not initial determinations and not appealable. Comments on the proposed rule will be accepted through July 28.

New Medicare Data and Transparency Tools Released

On June 2, the Centers for Medicare and Medicaid Services (CMS) released its first [annual update](#) to the Medicare hospital charge data, which provides comparative information on the average amount a hospital bills for services that may be provided in connection with the most common inpatient stays and outpatient visits. CMS also released a set of tools intended to increase Medicare payment transparency. The data and tools were released as part of the annual Health Datapalooza conference in Washington, DC. CMS' web site now includes inpatient and outpatient hospital charge data for 2012, new interactive dashboards for the CMS Chronic Conditions Data Warehouse, and geographic variation dashboards.

Trial Will Test New Patient-centered Strategies

The National Institutes of Health and the Patient-centered Outcomes Research Institute recently announced a [major award to prevent falls injuries in older people](#). The clinical trial will test individually tailored interventions to prevent fall-related injuries. The award is expected to total \$30 million over the five-year project. The study's approach differs from others in that it will integrate proven falls reduction strategies into a cohesive intervention that can be adopted by many health care systems. Each person in the trial will be assessed for his or her risk of falling and receive either the current standard of care or the experimental study intervention in which individualized care plans will be developed and administered.

"We don't have to agree with each other in order to think well together. There is no need for us to be joined at the head. We are already joined by our human hearts."

– Margaret Wheatley

Insurers Respond to Request for *HealthyPA* Private Coverage Option

Governor Corbett has announced that nine insurers have submitted successful applications to participate in the *HealthyPA* Private Coverage Option plan. The administration is still in negotiations with the Department of Health and Human Services (HHS) for approval of *HealthyPA*, the Corbett proposal that would use Medicaid expansion dollars to allow adults earning up to 133 percent of the federal poverty level to purchase health care coverage. The administration has indicated its commitment to *HealthyPA* being operational by January 1, 2015.

There are nine designated regions of operation for *HealthyPA*. At least three qualified applications have been received for each region. Pennsylvania will soon begin negotiations with the

applicants. The applicants will soon move forward in the negotiation process with the commonwealth. In order to qualify to proceed with negotiations, the plans had to meet the following criteria:

- Possess a current and valid Pennsylvania HMO Certificate of Authority or submit a plan to indicate how they would obtain one by August 4;
- Provide documentation that coverage provided would meet all applicable federal and state laws regulating health insurance coverage in the individual market;
- Possess Department of Health operational authority for all counties in the region(s) in which they applied or a plan to obtain one by August 4;
- Possess recent National Committee for Quality Assurance accreditation of “commendable,” “excellent,” or “accredited;”
- “Provide an acceptable emergency preparedness statement;
- Demonstrate financial stability or economic capacity to perform as a private coverage plan; and
- Provide a statement of net worth supported by a copy of filing with the Pennsylvania Insurance Department or a balance sheet attested to by an independent public accounting firm.

OLTL Releases Transition Plan for HCBS Regulations

The Department of Public Welfare Office of Long-Term Living (OLTL) released its [transition plan](#) specific to the new Centers for Medicare and Medicaid Services home and community-based services (HCBS) regulations, which require public comment. OLTL is submitting amendments to the Aging, Attendant Care, and Independence waivers to increase the allowable number of unduplicated participants in each of these waivers for fiscal year 2013/14. The amendments were detailed in the [May 17 Pennsylvania Bulletin](#). As a result, OLTL must seek public comment on the proposed amendments and on a transition plan to bring these three waivers into compliance with the new federal rule.

Pennsylvania to Participate in Balancing Incentive Program

The Departments of Public Welfare and Aging have announced that they have applied for and will receive enhanced federal funding through the Balancing Incentive Program. The goal of the program is to improve community-based support to older Pennsylvanians and adults with disabilities. States that participate in the program commit to make improvements to how individuals access long-term support that will help them to stay in their homes and communities. Pennsylvania will receive \$94 million and is one of 20 states to be approved. This funding was included in Governor Corbett’s 2014/15 budget proposal. The enhanced federal funding begins on July 1 and concludes on September 30, 2015. Together, the departments will develop a web page with information on all Medicaid community-based supports for older adults, those with physical disabilities, intellectual and developmental disabilities, autism, and serious mental illness; create an information and referral tool to identify programs to provide the supports needed; and a process to improve the timeframe for determining eligibility for Medicaid long-term supports.

FREE Webinar Focuses on Transportation/ADA Compliance

The Mid-Atlantic Americans with Disabilities Center recently announced a free webinar, [Public Transportation and Right-of-Way: Making the Connection](#), July 10, 2:00 – 3:30 p.m. This session will focus on the interconnection of public transportation and compliance with the Americans with Disabilities Act (ADA) in the public right-of-way, including design and field construction methods for pedestrian facilities and the challenges that are faced. Presenter Linda Osiecki will bring firsthand experience on how prioritization of funding for infrastructure improvements and effective use of those funds will result in cost savings and lasting changes that will benefit all pedestrians.

Governor Approves State Plan for Alzheimer's Disease and Related Disorders

On June 12, Governor Corbett [announced](#) his approval of the state plan for Alzheimer's Disease and Related Disorders (ADRD). The plan proposes recommendations and a strategic approach to address the growth of the disease and related disorders. It was created and developed by the Pennsylvania Alzheimer's Disease State Planning Committee. Recommendations included in the plan:

- Improve awareness, knowledge, and sense of urgency about medical, social, and financial implications of ADRD across the commonwealth;
- Due to the magnitude of the ADRD epidemic, identify financial resources where possible to implement this plan through federal, state, foundation, private, and other innovative funding mechanisms and partnerships;
- Promote brain health and cognitive fitness across the life cycle from birth onward;
- Provide a comprehensive continuum of ethical care and support that responds to social and cultural diversity, with services and supports ranging from early detection and diagnosis through end-of-life care;

- Enhance support for family and non-professional caregivers and those living with ADRD;
- Build and retain a competent, knowledgeable, ethical, and caring workforce; and
- Promote and support novel and ongoing research to find better and effective cures, treatments, and prevention strategies for ADRD.

The plan also emphasizes the importance of collaboration among caregivers, state officials and legislators, organizations, academic and teaching entities, health care providers, and individuals living with ADRD and their families.

Policy Specialist Linda Drummond presented testimony at the public forum in State College and submitted written comments regarding the need to address Alzheimer's and other dementias for persons with intellectual or developmental disabilities. This will require increased funds for Departments of Public Welfare and Aging programs serving these individuals. Increased funding is necessary due to the requirement of specially trained staff, home modifications, and assistive technology to offer individuals continued community living with quality supports and services.

OMHSAS Releases New Update on Collaborative Documentation

As reported previously, the Office of Mental Health and Substance Abuse Services (OMHSAS) issued a policy clarification indicating that concurrent documentation is not a billable part of the therapeutic episode for peer support and other services. RCPA immediately engaged OMHSAS on this critical issue, requesting clarification in writing. OMHSAS responded by issuing a clarification indicating there is an expectation that staff and service recipients will work collaboratively toward the development of goals documented in the individual service plan, review and revise those goals as needed, and that this collaboration can be part of the billable time spent with an individual receiving peer support and other services. RCPA has further requested that OMHSAS communicate with Medicaid managed care organizations (MCOs) to ensure that the MCOs withdraw communications requesting providers not to bill for time spent with consumers on collaborative documentation. RCPA will participate in a short-term work group to work toward further clarification on this issue. The work group will develop practice guidelines and training suggestions for the field. Comments and questions may be directed to [Anne Leisure](#) or [Lynn Cooper](#).

■ MEDICAL REHABILITATION

Post-acute Care Transfer Policy Report Released

The Office of the Inspector General (OIG) released [Medicare Inappropriately Paid Hospitals' Inpatient Claims Subject to the Postacute Care Transfer Policy](#), which shows Medicare inappropriately paid 6,635 claims subject to the post-acute care transfer policy from January 2009 – September 2012. The hospitals used incorrect patient discharge status codes on claims, indicating that patients were discharged to home or certain types of health care institutions rather than transferred to post-acute care. Of these claims, 91 percent were followed by claims for home health services and nine percent were followed by claims for services in other post-acute care settings.

Case Studies/Stories Needed for Health-related Rehabilitation

The World Health Organization (WHO) is currently developing *Guidelines on Health-Related Rehabilitation*, which will be used to provide guidance to governments and others on how to develop, expand, and improve the quality of rehabilitation services (including assistive technology) in less-resourced settings. The guidelines, which will be released in 2015, will position rehabilitation within the context of universal health coverage. In conjunction with the forthcoming launch of the guidelines, the WHO is [announcing](#) a call for case studies and personal stories. Successful case studies and personal stories will be reflected in the guidelines. The due date is July 20.

Subcommittee Holds Hearing on MedPAC Report

The House Ways and Means Health Subcommittee held a hearing on the Medicare Payment Advisory Commission's (MedPAC) June 18 [Report to the Congress: Medicare and the Health Care Delivery System](#). In this report, MedPAC mentions the possibility of paying inpatient rehabilitation facilities/units and skilled nursing facilities the same amount (commonly referred to as site-neutral payments) for three conditions frequently treated in both settings: rehabilitation therapy after a stroke, major joint replacement, and other hip and femur procedures.

■ VOCATIONAL REHABILITATION

Guidance on Transition

New [technical guidance](#) on youth transition and vocational rehabilitation has been issued by the US Department of Education Rehabilitation Services Administration. Issues addressed include:

- Effective collaboration between state education and vocational rehabilitation agencies;
- The vocational rehabilitation process for referral and application of services, eligibility determination, and development of individualized plans for employment; and
- Vocational rehabilitation program services.

■ BRAIN INJURY

Council on Brain Injury Seeking Nominations

The Council on Brain Injury (CoBI) is seeking nominations for its annual award that recognizes an individual who has demonstrated exemplary service in furtherance of brain injury awareness, prevention, education, research, or service. Nominations must be submitted to MJ Schmidt (mjschmidt@remed.com or CoBI, 16 Industrial Blvd, Ste 203, Paoli, PA 19301) by August 12. Information to include is the name of individual, reasons for nomination, and the nominator's name and contact information.

High Expectations for Achievement Conference in August

The Pennsylvania Department of Education, Bureau of Special Education recently announced a conference, August 4–7, at the Hershey Lodge and Conference Center. The [2014 Pennsylvania Low Incidence Institute: High Expectations for Achievement](#) is a four-day event focused on topics related to serving students and young children with deafness and hearing loss, blindness, deaf-blindness, visual impairment, intellectual disabilities, traumatic and brain injury, and multiple disabilities.

Brain Injury Coalition Advocates for State Funding



Melissa Dehoff (at podium) is joined by other coalition members during the awareness day event.

On June 3 the Brain Injury Coalition (a cooperative effort of the Acquired Brain Injury Network of Pennsylvania, the Brain Injury Association, and RCPA) held a Brain Injury Awareness Day at the State Capitol. Members of the coalition thanked the General Assembly and governor for recognizing the needs of those with brain injury and asked for their continued support. In addition, the need for prevention, research, services, and supports was highlighted by coalition representatives, elected officials, and a family member.

Heads Up App Helps Identify Concussions

The Centers for Disease Control and Prevention has created [Heads Up App](#) to assist parents and others learn how to spot signs and symptoms of a concussion and explains what to do if they think someone has a concussion or other serious brain injury. The app also includes information on selecting the right helmet for an activity and other detailed helmet safety information.

Brain Injury Committee Will Convene July 24

RCPA's Brain Injury Committee will meet July 24, 9:30 a.m. – 12:00 p.m. at the RCPA office. Members interested must [register](#) to attend in person or via webcast.

RCPA Members Receive Awards at Annual BIAPA Conference



Jack Poplar (third from left) is pictured with members of his staff during the BIAPA conference.

Two RCPA members were recognized during the annual Brain Injury Association of Pennsylvania (BIAPA) conference. Jack Poplar, president/CEO, Acadia, Inc. received the Leadership Award in recognition of his far-reaching impact on the field of brain injury rehabilitation and his willingness to go the extra mile. Poplar's work has included advocacy efforts that have promoted the cause and goals of improving each and every life. Deborah Cerra-Tyl, director of program development and admissions, Beechwood NeuroRehab, was presented with the Service to the Association award in recognition of her establishment of the dedicated brain injury program at Woods and efforts to assist families and individuals with brain injuries to find funding and services.

Suroviec New ODP Deputy

Effective July 1, Steve Suroviec will be the deputy secretary for the Office of Developmental Programs. He last served as executive director of the Office of Vocational Rehabilitation (OVR). Suroviec has held previous

positions as executive director, The Arc of Pennsylvania; Erie County director of human services; and deputy secretary, Department of Health Office of Health Promotion and Disease Prevention. RCPA welcomes Suroviec and looks

forward to a continuing relationship with him. Policy Specialist Linda Drummond has worked with Suroviec on the Intellectual Disability and Autism Coalition and through work groups and meetings with OVR.

BHSL Updates

The Bureau of Human Services Licensing (BHSL) has released [clarification](#) regarding requirements of the Older Adult Protective Services Act (OAPSA) for licensed facilities serving individuals with intellectual disabilities. This includes Chapter 6400-licensed community homes, Chapter 6500-licensed family living homes, Chapter 2380-licensed adult training facilities, and Chapter 2390-licensed vocational facilities.

OAPSA requirements supersede any criminal history check and hiring policy criteria in the applicable regulatory chapter and corresponding licensing inspection instrument. A [copy of the OAPSA regulations](#) list of prohibited hiring offenses is available. A criminal background check [self-study course](#) is also available. Questions may be directed to the BHSL Provider Support Hotline (866-503-3926 or ra-pwaralheadquaraters@state.pa.us).

BHSL and the Office of Developmental Programs are working together to review geographic locations for self-inspection for amended licensing. The goal is to have the provider enter the certification in HCSIS and the Certification and Licensing System on the same day, which will allow the amended license to be generated within 14 days.

BHSL announces the appointment of Sheila Page as director of operations. Page has been with the bureau for seven years, serving as the western region director for the last five years.

ODP UPDATES

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

- **Announcement #033-14:** ODP Deaf Services Overview: Required Training for Provider Administrators/Agencies and Staff.
- **Informational Memo #034-14:** Adult Protective Services Contact Persons and Upcoming Networking Calls. Calls are scheduled July 30, August 27, and September 24.
- **Informational Packet #035-14:** Waiver Service Claim Documentation and Remediation Process. Describes procedures for administrative entities and providers to use when a claim documentation issue is identified.
- **Announcement #036-14:** ODP's Quality Management Certification Program Leadership Resources Available. Modules 101 and 102 are available to all audiences.
- **Announcement #037-14:** DPW Medication Administration Updates and Clarifications. Additional clarifications regarding the medication administration courses shared in Announcements #022-14 and #004-14.
- **Announcement #038-14:** ODP Futures Planning initiative requests stakeholder assistance in next research steps in the planning process. Members that have a document (e.g. assessment tool, study, managed care plan, pilot project description, list of quality measures) and would like to share with ODP, please forward those documents by August 15 to a contact listed in the announcement. Please also copy [Linda Drummond](#) at RCPA.
- **Informational Packet #039-14:** Vendor Fiscal/Employer Agent Financial Management Services Wage and Benefit Ranges for Specific Participant Directed Services Effective July 1, 2014.
- **Informational Packet #040-14:** Agency with Choice Financial Management Services Wage Ranges and Benefit Allowance and Corresponding Department Established Fees for Specific Participant Directed Services Effective July 1, 2014.

PHI Resources

The Paraprofessional Healthcare Institute (PHI) has developed several data resources that provide information on the direct-care workforce and long-term services. The [PHI State Data Center](#) is a web-based tool to provide state profiles on the direct-care workforce in the aging and physical disabilities systems. Data provides trends in wages, health insurance coverage rates, and workers reliance on public assistance. There is also a [Scorecard Report](#) on each state with data related to long-term services for older adults, people with physical disabilities, and family caregivers. Pennsylvania is ranked 42.

IM4Q Annual Training

The focus of the Independent Monitoring for Quality (IM4Q) [Annual State-wide Training](#) July 23 – 24 is the four Office of Developmental Programs (ODP) initiatives of communication, lifesharing, employment, and transition. There will be three keynote presentations: Nancy Thaler, executive director, National Association of State Directors of Developmental Disabilities Services and former ODP Deputy Secretary under whom IM4Q was created and implemented; David Hingsburger, international disability consultant, Toronto, Canada; and a transition panel with Patty McCool, director, Bureau of Supports for People with Intellectual Disability, and Pat Hozella, director, Bureau of Special Education. Linda Drummond is a member of the planning committee and coordinated two sessions for the conference.

Sexuality Knowledge

Mackenzie Health and Vita Community Services have created the [Tool for Assessment of Levels of Knowledge Sexuality and Consent](#). This assessment tool assists in determining the level of education, treatment, or appropriate curriculum training needed regarding sex education. This tool is useful for individuals with intellectual and developmental disabilities.

■ DRUG & ALCOHOL ACTION

Field Again Divided on Confidentiality Regulations

The Legal Action Center in Washington, DC, is fighting to protect 42 C.F.R. On May 12, the federal government [announced that it is considering changing](#) the 40-year-old regulations (known as [42 C.F.R. Part 2](#)) that protect the confidentiality of patients' alcohol and drug treatment records. At a [Public Listening Session](#) held on June 11 by the Substance Abuse and Mental Health Services Administration, many witnesses called for eliminating or substantially reducing these privacy protections. The Legal Action Center believes strongly that 42 C.F.R. Part 2's core privacy protections must be maintained. The center believes that while behavioral health care should be integrated with physical health care, and communication between health care providers should be encouraged, the regulations' protections are as necessary today as they were when they were issued in light of ongoing stigma and discrimination faced by people with substance use disorders. In a recent notice, the center states that the regulation enables people with substance use disorders to seek treatment without fear of exposure of treatment records without their permission to law enforcement, employers, insurers, other health care providers, or others. Changes to the regulations would threaten these critical patient protections.

Many in the behavioral health community believe strongly that the 42 C.F.R. federal regulations and the state confidentiality regulations (Chapter 255.5) are extremely outdated and need to be eliminated/revised. Many RCPA members believe that the regulations, especially Chapter 255.5, actually impede access and care for people suffering with alcohol and drug addiction problems. Numerous attempts have been made to change the state regulation, but all have failed.

D&A Regulations Through Round One of IRRC

RCPA received good news from Secretary Gary Tennis, Department of Drug and Alcohol Programs (DDAP), that Chapter 709 Drug and Alcohol Free Standing Regulations have made it through round one of the Independent Regulatory Review Commission (IRRC) process. The IRRC hearing, which will result in the final approval and implementation of the changes, will be held in late July. As previously reported, RCPA members worked diligently for many months developing recommendations to be submitted to DDAP for consideration. All RCPA recommendations were accepted. Again, thanks to the members that worked hard to help make this happen. The residential regulation recommendations will be submitted to DDAP in early July.

National Council Seeks Applications for SBIRT

The National Council for Behavioral Health announced a request for applications for the 2014 [Reducing Adolescent Substance Abuse Initiative](#) to support community behavioral health organizations interested in implementing screening for substance use. The National Council received a \$1.3 million grant from the Conrad N. Hilton Foundation to support the implementation of screening, brief intervention, and referral to treatment (SBIRT) for adolescents in up to 30 community behavioral health organizations throughout the country. SBIRT is an evidence-based practice. The project will also address how Medicaid through its Early and Periodic Screening, Diagnosis and Treatment mandate can pay for SBIRT services. View project commitment criteria and download application materials from the National Council's 2014 Reducing Adolescent Substance Abuse Initiative [web site](#). Applications must be submitted by July 11. Questions should be directed to [Aaron Williams](#), project director, or [Chris Bodner](#), project coordinator.

■ ON THE AUTISM SPECTRUM

Transitioning to Summer

Andrea Layton, coordinator, the Autism Service Education, Resource, and Training Center's Autism Life Care Model, has offered valuable suggestions for the summer season. As school programs end, changes in routines often occur. Whether working a summer job, attending a summer camp, participating in an extended school year program, or taking a vacation, there are steps that can be taken to help ease the transition to new summertime routines for individuals with autism.

- **Visit new locations in advance.** If possible, tour new locations in advance to help individuals become familiar with new, unfamiliar environments. If vacationing in an unfamiliar place, check with the attractions to see if they offer social stories or virtual tours online to help prepare.
- **Transition slowly.** If the new routine will involve different bedtimes or wake times, begin implementing the changes a few weeks in advance. Move bedtimes and wake times by 10–15 minutes every few days to smoothly transition to the new timing. Blackout curtains can help with this transition if new bedtimes occur before sundown.
- **Visual schedules.** Pictures are one way to add predictability to new routines or anticipation for activities. Go over the day's routine using pictures to help the individual know what to expect. During activities, use the pictures to help the individual prepare for next steps. Keep the pictures in a place where they can be seen and are accessible at all times. Having multiple prints of the same picture on hand is also helpful in scheduling. If the individual has calendar skills, prepare for changes or upcoming events by placing vacations, events, or day trips on their calendar.
- **Educate others.** Provide any new summer support staff with important information about the person in the setting he/she will be supported, how to best handle changes from previous experience, and educate them as much as possible about the individual's typical routine.
- **Incorporate typical routines into the new schedule.** Even though times, destinations, bedtimes, and travel methods change with a summer routine, find creative ways to keep consistency with the individual's typical routine. For example, bring a favorite movie or book to watch or read before bed when on vacation.

Lifetime Cost of Autism Ranges from \$1.4 – \$2.4 M

According to [findings](#) recently published in *JAMA Pediatrics*, the lifetime cost of caring for just one individual with autism can be as high as \$2.4 million. Researchers found the range of costs related to medical treatments, schooling, housing, and employment supports as well as in lost wages for individuals with autism range from \$1.4 million for individuals with autism alone to \$2.4 million for those on the spectrum with an intellectual disability. For the study, researchers from the University of Pennsylvania and the London School of Economics analyzed previous research on

people with autism and their families to assess the overall costs and economic impact of autism. The findings highlight the need for interventions specifically geared toward helping adults with autism and approaches early in life that may lessen the need for long-term care. "These numbers provide important information that can help policymakers and advocacy organizations make decisions about how to allocate resources to best serve this population," said David Mandell, University of Pennsylvania, the study's senior author.

DRN Files Lawsuit for ABA Services in Medicaid

On June 9, three families represented by the Disability Rights Network (DRN) filed a class action lawsuit seeking to represent all Pennsylvania children with Autism Spectrum Disorder (ASD) who are enrolled in Medical Assistance and need Applied Behavioral Analysis (ABA). The families allege that the Department of Public Welfare fails to cover ABA services in an amount or scope consistent with medically accepted standards. While the department has not disputed this fact, it does not cover ABA as a distinct service. It requires children with ASD to get behavioral services through a program designed for children with emotional, rather than developmental, disorders. As a result, it limits the scope of services to those aimed at the behavioral symptoms of ASD and will not pay for services that focus more directly on developing social, self-help, and communication skills.

DRN reports that the department's policies do not allow intensive services until a child is at risk of out-of-home or out-of-school placement and that the Bureau of Autism Services has written that this mental health service is not a good fit for children with ASD. The families want the department to cover ABA as a distinct service using the standards and criteria that are generally accepted in the medical community so that their children, and all children with ASD, can get the services they need. For questions regarding this lawsuit, please contact Disability Rights Network Staff Attorney [Rachel Mann](#) or DRN Staff Attorney [Koert Wehberg](#).

Pennsylvania Colleges Address Suicide Prevention

The Suicide Prevention Resource Center reports that a number of Pennsylvania colleges have taken steps to meet students' emotional and mental health needs in an effort to reduce the risk that the stresses of campus life will trigger suicidal behavior. Two of the schools, California University of Pennsylvania and Penn State Fayette, use online reporting systems for professionals trained to recognize and intervene with students identified as being at risk. The colleges employ a range of approaches with common themes of reaching out to students, fostering peer support, and being aware of suicide risk factors and warning signs. For more information about suicide prevention on college campuses, review the [Guide to Campus Mental Health Action Planning](#).

Survey on Integrated Child Physical and Mental Health Care

Now is the time for RCPA child mental health practitioners to share their perspective and experience in collaborating with primary health care providers. The care of children and adolescents with developmental, behavioral, and emotional problems is integral to general or primary health care. RCPA is collaborating with the University of Pittsburgh Health Policy Institute to conduct a survey of practitioners planning and providing mental health treatment for children and adolescents in Pennsylvania. The Health Policy Institute is conducting a short, online research study (10-15 minutes). This is a first step to understanding solutions that behavioral health specialists have initiated to address this need and barriers or burdens related to doing this unique clinical work. This research study is voluntary. Respondents must be mental health professionals dedicated to working with children/adolescents and families. After completing the consent form, respondents are prompted to continue to the [study](#). Contact Trina Orimoto (412-246-5837 or orimotote@upmc.edu) with questions related to completing the survey. For information regarding RCPA's collaboration with the Health Policy Institute, contact [Connell O'Brien](#).

OMHSAS Planning Council Update

The quarterly meeting of the Office of Mental Health and Substance Abuse Services (OMHSAS) Planning Council Children's Committee was held in June. Highlights included a recommendation to OMHSAS that the Certified Peer Specialist service line be expanded to include family and caregiver peers. These individuals would be trained, certified, and employed in the Medicaid system as peer supports and system navigators to other parents and caregivers. OMHSAS leadership reported on feedback from community meetings, the recent planning council retreat, and plans to pursue several federal grant opportunities. OMHSAS staff and committee members also reported on work groups focused on behavioral health rehabilitation services and related projects. The council's Children's Committee continues to press for service delivery data that would help to understand service trends and changes that would influence recommendations to OMHSAS.

SAMHSA Publication on FASD Prevention and Treatment

The Substance Abuse and Mental Health Services Administration (SAMHSA) has published a Treatment Improvement Protocol, *TIP 58: Addressing Fetal Alcohol Spectrum Disorders (FASD)*, available at no charge from the SAMHSA web site. The publication provides strategies and recommendations for expanding FASD prevention and treatment efforts across child, adolescent, and family behavioral health settings. The content was developed and reviewed by experts across the country including Mary C. DeJoseph, DO, Philadelphia College of Osteopathic Medicine, and Donna N. McNelis, PhD, Drexel University College of Medicine. TIP 58 provides guidance for program administrators and a variety of checklists and tools to assist service implementation and delivery. It is divided into three parts: *Background and Clinical Strategies for FASD Prevention and Intervention*, *Administrator's Guide to Implementing FASD Prevention and Intervention*, and a *Literature Review*.

Revisiting Efforts to Manage "BHRS Redesign"

Community providers of child and adolescent mental health services and families continue to raise concerns around prescription changes, reductions, denials, and the curtailment of many medically necessary rehabilitative services. Many of these services were developed by the state, often in compliance with Medicaid Early Periodic Screening, Diagnosis and Treatment (EPSDT) criteria. RCPA suggests several actions that providers should consider in efforts to manage substantial changes in service prescriptions, access, dosages, and consumer involvement and choices related to "BHRS Redesign."

- Expect evaluators to rely on their clinical training and experience to prescribe the level and dosage of Behavioral Health Rehabilitative Services (BHRS) and other treatment and rehabilitative care based on the biopsychosocial needs of the child as essential to the treatment planning process.
- Inform and encourage families to consider exercising their Medicaid grievance and appeal rights when recommended/prescribed services or service levels are "compromised," reduced from the clinical recommendation, or denied.
- Inform families that they may have the right to advocate for schools to replace reduced, denied, and discontinued services in school through changes in their child's Individualized Education Plan (IEP). Encourage schools to quantify the costs of the shift of service from a Medicaid provider to the IEP and special education budgets.
- Track any adverse life domain and clinical impact for children served because of service reductions or "fail first" policies.
- Inform community leaders and families that providers are often under pressure to reduce the prescribed quantity of home, community, and school services.
- Share agency-specific BHRS Redesign impact data where it is available with local and state leaders.

Child Protective Services, Changes on the Way

Over the past several months Pennsylvania has passed 22 new laws or amendments to current laws that will significantly impact child protective services and make an estimated one million adults in the state mandated reporters. RCPA staff and members serve on the Department of Public Welfare (DPW) Implementation Team developing guidance and training for employees and volunteers in provider organizations, county agencies, schools, faith communities, youth sports, and other youth-oriented organizations. The target date for the implementation of key elements of these laws is December 31. Over the next several months RCPA will work with the Office of Children, Youth and Families to keep members informed of changes, significant areas of provider impact, training opportunities, and advances in the child abuse reporting systems. As an informational reference for the DPW Implementation Team and other interested parties, the department has created and will update an extensive PowerPoint presentation and other key documents. The current documents are available on the [RCPA web site](#).

CONFERENCES / TRAININGS

October 7 – 10. RCPA Conference 2014: TOGETHER...ONE. Seven Springs Mountain Resort. Champion, PA. Registration opens July 28.

Children's Committee

More than 50 members gathered to hear a review of the Office of Children, Youth and Families bulletin on the sharing of health information. The Office of Mental Health and Substance Abuse Services reviewed the recent bulletin for enrolling licensed Behavioral Specialists defined in Act 62 as "an individual who designs, implements or evaluates a behavior modification intervention component of a treatment plan, including those based on applied behavioral analysis, to produce socially significant improvements in human behavior or to prevent loss of attained skill or function, through skill acquisition and the reduction of problematic behavior." The committee discussed the loss of mental health rehabilitation service options related to reductions in Summer Therapeutic Activity Programs. Members also discussed ongoing concerns about child mental health and autism services that face major recruitment and retention challenges. Scott Daubert, vice president of operations, PerformCare, provided a presentation titled *Managing Operations and Services in Changing Times* that reviewed the operational changes ahead with the Affordable Care Act, ICD-10, "Meaningful Use Phase 2," and other challenges to providers. An RCPA provider panel previewed a future presentation and discussion of the advantages and approaches to collaborative and co-located outpatient treatment services in community settings. Because of time constraints, the full panel presentation and discussion is being planned for a future meeting or webcast. RCPA staff provided a review of the integrated child mental health care survey being conducted by the University of Pittsburgh. Staff also provided updates on a range of issues and initiatives including behavioral specialist licensing and staffing challenges, a report on the BHRS Redesign Impact meeting, action related to the state's concurrent documentation policy clarification, and a report from National Council conference. The next Children's Committee meeting is September 3.

Drug and Alcohol Committee

The Drug and Alcohol Committee meeting was June 3. It included an in-depth report from the Department of Drug and Alcohol Programs regarding various licensing issues. Many changes are being implemented. Regulation changes are underway, inspections are under a new system, and changes in the application process are being developed. Peter Luongo, Institute on Research, Education and Training in Addictions, provided a national update that included an overview of the Affordable Care Act and 42 C.F.R. The next Drug and Alcohol Committee meeting is September 16. All interested members are asked to attend.

Criminal Justice Committee

The Criminal Justice Committee met June 3 and began a new format. All future meetings will include invitations to community partners such as Probation and Parole and Department of Corrections (DOC.) Previous meetings were more "topic" focused. While time for specific topics will continue to be offered, it is believed that regular contact with state and county partners is extremely valuable. The June meeting was an example of that. It included a report from Probation and Parole and a report from the chief of security for community corrections, DOC. Highlights include:

- DOC is expanding transitional housing units (more than double in size) and members were encouraged to reach out to the transitional housing units located in their respective areas.
- Probation and Parole and DOC are working hard to develop a seamless transition.
- Veteran's service units are focusing on post traumatic stress disorder.
- New family reunification is being considered.
- The Photo ID program is seeing dramatic improvement (RCPA lobbied for many years for this initiative). In 2012, 328 people were released with a photo ID. In 2013, over 10,000 people left with a photo ID.
- DOC will be installing Internet access at all transitional housing units and Community Corrections Centers.
- Mental Health First Aid training will be a priority for all DOC staff.

The next meeting of the Criminal Justice Committee is September 16. All interested members are encouraged to attend.

IDD Committee

The June 5 Intellectual and Developmental Disabilities Committee included discussion with Representative Thomas Murt (R-152) regarding his legislation to change the name of the Department of Public Welfare to the Department of Human Services (House Bill 993) and the 2014/15 state budget. Rep. Murt has an IDD Caucus committee in the House. RCPA will work with him regarding future testimony to this caucus. He has taken the time since his election to learn about IDD issues. This included meeting with committee Co-chairs Will Stennett, Dan Sausman, and staff Linda Drummond. He emphasized that it is a positive for all providers to invite local, state, and federal legislators to visit their programs and to learn more about our services and the populations served.

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IDD COMMITTEE *Continued from page 17*

ODP Acting Deputy Secretary Dolores Frantz, ODP Executive Assistant Dave Kauffman, ODP Waiver Coordinator Angela Fortney, and DPW Special Advisor Mark Knouse addressed a variety of issues on topics such as the dual diagnosis bulletin, deaf services, sheltered workshop meetings, and Futures Planning. RCPA President and CEO Richard Edley provided an update on a state-level financial work group that is addressing ODP rates, areas, and the residential rates and vacancy factor of 97 percent. [Comprehensive meeting notes](#) are available.

Mental Health Committee

The Mental Health Committee met June 4. Director Matt Jones, Bureau of Human Service Licensing, provided a detailed report. Numerous members had questions and concerns and Mr. Jones responded to each one directly. He stated that a Regulatory Compliance Guides (RCGs) are being developed which should help assure consistency. He noted that RCPA will be given an opportunity to review and comment on the RCGs as they are developed. Office of Mental Health and Substance Abuse Services representatives provided in-depth reports on numerous issues including licensing, outpatient regulation revisions, and collaborative documentation. The meeting also included a comprehensive report from Kristen Rotz, Pennsylvania Association of County Administrators of Mental Health and Disability Services, on such issues as the state budget, *HealthyPA*, and the Adult Protective Services act. Kelly Hoover Thompson provided an overview of the statewide eHealth project. The next meeting is September 17.

SCO Subcommittee

The Supports Coordination Organizations Subcommittee met June 5. Guests included Adult Protective Services Director Winter Roberts and Office of Developmental Programs (ODP) Human Services Program Specialist Bill Posavec who provided an update on the Adult Protective Services program and its interface with ODP’s Incident Management policy. Issues discussed included adult protective services training and regulations. ODP Human Services Program Specialist Sonya Hipple discussed concerns regarding “back-up plans,” with some counties indicating these plans are only needed for those in community residential services and others indicating plans needed for everyone for all services. According to ODP, back-up plans are needed for all ODP-funded services written into the Individual Service Plan. The June 11 [IDD Update](#) includes clarification from Hipple regarding provider monitoring. [Comprehensive meeting notes](#) are available.

Vocational Rehabilitation Subcommittee

The Vocational Rehabilitation Subcommittee met June 5 and included presentations by several members regarding “Work Readiness Programs.” Cindy Mayes, director of long-term planning, The Arc of Centre County, discussed her agency’s career discovery program. Susan Lautenbacher, CEO, LARK, discussed the new strategic plan being developed regarding employment services due to the possible state and federal funding and law changes to these services. Colleen Stuart, CEO, Venango Development and Training Center and subcommittee co-chair, provided an update on the proposed RCPA vocational pilot project with Indiana University of Pennsylvania. The purpose of this pilot is to gather data and objectively study the importance of sheltered workshops providing employment for individuals with disabilities as well as defining the economic impact for the state. This study will address threats and obstacles to workshops and develop a plan that is socially and economically acceptable. [Comprehensive meeting notes](#) are available.

CALENDAR

JULY		
Wednesday, July 16	3:00 – 4:00 p.m.	Legislative Affairs Committee <i>Conference Call</i>
Wednesday, July 24	9:30 a.m. – 12:00 p.m.	Brain Injury Committee <i>Penn Grant Centre</i>
Tuesday, July 29	10:00 a.m. – 1:00 p.m	Finance Committee <i>Penn Grant Centre</i>
AUGUST		
Tuesday, August 5	12:00 – 1:00 p.m.	Explore Constraint-induced Movement Therapy <i>IPRC Webinar</i>