



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

REHABILITATION & COMMUNITY PROVIDERS ASSOCIATION

AUGUST 2014

■ RCPA NEWS

Eyster and Phillips Join Staff



RCPA is pleased to announce the hiring of **Sarah Eyster, LSW**, as the mental health policy specialist and the eastern regional representative. Ms.

Eyster will represent the association at state-level meetings and serve as staff liaison to the Mental Health Committee. She will be responsible for member communication and the analysis

of Department of Public Welfare and other key policy decisions. As eastern region representative, Ms. Eyster will have an ongoing local connection with providers in the southeast and north-east regions of the state, similar to what RCPA has been developing in the western region. Ms. Eyster has been a member of the association Conference Committee and will continue to serve in this capacity.

Prior to joining RCPA, Ms. Eyster held several positions with Community Behavioral HealthCare Network of

Pennsylvania/PerformCare, a behavioral health managed care company. She has a long history of working for and with providers to enhance service delivery to Pennsylvania residents. After receiving a Bachelor of Arts degree in social work, Ms. Eyster attained the Masters of Social Work from Marywood University, Scranton.



Jack Phillips, JD, is the director of legislative affairs. He is responsible to assist the association with health policy, which primarily includes member communica-

tion and advocacy with the governor's office, General Assembly, and state regulatory agencies. Mr. Phillips was most recently at the Pennsylvania Department of State as director of legislative affairs. Prior to employment with the state, he worked in legislative affairs for trade associations, an international corporation, and a lobbying/consulting group. Mr. Phillips has a Bachelor of Arts in Political Science from West Chester University and the Juris Doctorate from Widener University School of Law.

TOGETHER

One Mission • One Agency
One Provider • One Person



Conference Registration Open

Registration for TOGETHER...ONE, the 2014 RCPA conference is open. There are multiple ways to register and significant discounts available to those registering by **September 5**. The conference theme is focused on uniting members into one strong association "representing health and human services committed to effective, efficient, and high quality care."

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©2014. This newsletter is written by the Rehabilitation and Community Providers Association (RCPA) for the mental health, intellectual disability, addictive disease, and rehabilitation communities. This informational newsletter is published monthly. Deadline for publication is the third Friday of every month.

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RCPA NEWS

CONFERENCE REGISTRATION OPEN

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The conference agenda brings ample opportunities to learn and dialogue, with stellar speakers to offer a variety of stimulating and timely information. The event features more than 55 workshops; a film screening; a health care leadership keynote from Thomas Hudgin, MBA; a vibrant Exhibit Hall; networking events; time to interact with colleagues; and opportunities for creative thinking to inspire passion to create change. The week concludes with President and CEO Richard Edley hosting Department of Public Welfare Secretary Beverly Mackereth.

A [conference web site](#) is available with complete information about all scheduled activities. An [interactive registration brochure](#) has been prepared for download to provide essential information on the go. Links in the brochure are internal to the document as well as external to the conference web site to provide comprehensive information about workshops. [Online registration](#) is available and may be reached directly or from the conference web site.

Mark your calendar for October 7 – 10 and join the Conference Committee, Board of Directors, and staff at Seven Springs Mountain Resort. Questions about the conference may be directed to [Kris Ericson](#), conference coordinator, or [Tieanna Lloyd](#), conference registrar.

FSWP Selects Christian-Michaels as President and CEO



**Stephen
Christian-Michaels**

Chair Nicholas Barcelona, Family Services of Western Pennsylvania (FSWP), announced the appointment of **Stephen Christian-Michaels** as its new president and CEO. With the support of outside counsel, the Search Committee received over 80 applications for the position. The Executive Search Committee of the board seriously considered four highly-qualified candidates and recommended one for full board approval, resulting in a unanimous vote for Mr. Christian-Michaels. Active for many years with the association, including leadership roles, RCPA congratulates Mr. Christian-Michaels on his new position and looks forward to continued work together.

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The Negotiation Dilemma

In the past year, RCPA has been involved in several negotiations on behalf of members with payers and/or consulted with members on these issues. I don't want to comment on or detail any specific issue or process here, but rather highlight a dynamic that plays out repeatedly across all divisions.

Those not close to these types of discussions or who do not understand details of the issues assume that when providers approach payers – private or public – they do so because they need more money; translated to higher rates. Certainly rates are a critical part of the equation. For example, when Medicaid managed care first came to Pennsylvania in the 1990s, we spent a great deal of time working with behavioral health providers to better understand true unit costs in order to best negotiate with payers and be in a place to accept a rate for service.

In Pennsylvania today, however, rates are the tip of the iceberg. This past year I have seen providers increasingly concerned about the methodologies in place, calculations and adjustments that are made, and policy decisions that impact productivity and service delivery. These are real and significant threats to the viability of the provider delivery system. So how does a provider get in trouble? Consider changing and re-interpreting Centers

for Medicare and Medicaid Services rules, amending state licensing laws, changes in documentation standards, clarifications on how a CPT code will be handled for claims payment, development of policies that lead to unreimbursed care, or the installation of methodologies that make it impossible to retain any revenue. The list is seemingly endless and none of it has to do with the rates.



Richard S. Edley, PhD

The negotiation between provider and payer is threatened when one side sees it as a money issue and the other a methodological or structural one.

That takes us back to the "negotiation." I see payers as often focusing on rates. "Providers want more money and there is no money." Let me dispel a fallacy: there is nothing inherently wrong with providers wanting more money for services if indeed it is needed. Salaries, systems, infrastructure, and training (to name a few) need increased funds over time for providers to be viable and sustain quality. The additional problem, however, is that the negotiation between provider and payer is threatened when one side sees it as a money issue and the other a methodological or structural one. In some of the negotiation scenarios I allude to I looked at data and actuarial calculations. I came to the conclusion that we can look at the numbers all day, but it is not a numbers issue. It is one of policy.

In coming years we need to be better able to bridge this gap in our negotiations. For example, if a provider proposes an administrative change to allow for increased productivity and a better use of resources for service delivery, that is significant. Public and private payers need to understand that and realize that such proposals and solutions are important and valid. Rates have to be sound, but so do the methodologies and policies in place to support them.

Richard S. Edley, PhD
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This column represents my opinion, not necessarily that of the association.

PROVIDER MEMBERS

Alleghenies Unlimited Care Providers

Scott Maust, Deputy Director
Johnston

Emmaus Community of Pittsburgh, Inc.

Karen Jacobsen, CEO
Pittsburgh

InnovaTel Telepsychiatry, LLC

Jonathan Evans, President/CEO
Erie

Frazier Rehab Institute

(IRPC member)
Abbey Roach, PhD, Director
Louisville, KY

GOVERNMENT MEMBER

Northampton County HealthChoices

Deborah A. Nunes, Administrator
Bethlehem

Cooper Visits Human Services Center



Steve Plyler, Jeffrey Stockdale, and Dennis Nebel spend time with Lynn Cooper during a recent visit to Human Services Center.

Lynn Cooper, western region representative, recently met with Executive Director Dennis Nebel, PsyD, and several senior staff of Human Services Center, New Castle, to learn more about the agency, assess agency needs, and determine how the association can assist. The visit provided an opportunity to discuss agency problems experienced, future regional meetings, and other ways that RCPA staff may be helpful, such as increased legislative initiatives and public relations activities.

The agency is a shining example of success in the community and has a large number of locations throughout Lawrence County providing a broad array of clinical, residential, and vocational services. Despite limited funding and recent cuts the agency has grown substantially. [Human Services Center](#) recently celebrated 50 years of transforming mental health care. Members are encouraged to visit the agency to learn more about the programs and facilities that have been developed.

*We arrive on this planet empty handed.
We all will soon leave empty handed.
So then, how and in what spirit do we
want to spend the time in between?*

— Nimo

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.



Corbett Signs Budget/Fiscal Code; Uses Line-item Veto Authority

On July 10, Governor Corbett signed House Bill 2328, the 2014/15 state budget, and HB 278, the 2014/15 Fiscal Code. Concerned with revenue assumptions used by the House and Senate in crafting the budget, the governor chose to use his line-item veto authority to reduce spending and ensure the state was meeting revenue estimates. He noted the budget passed included no new taxes and supported key administration priorities. More information is available from the [Office of the Governor](#).

KEY BUDGET HIGHLIGHTS

\$29 billion in spending, an increase of 1.5 percent from FY 2013/14. This is about \$400 million less in spending than proposed in February.
No new taxes.
Ready to Learn Block Grant – \$100 million increase to \$200 million total.
Pre-K Counts – \$10 million increase to \$97 million.
Special Education – \$20 million increase to \$1.05 billion.
New Ready-to-Succeed Scholarship program – \$5 million.
Intellectual Disabilities Waiver – \$13 million initiative to address the waiting list.
Services to Persons with Disabilities and Attendant Care – \$9 million to serve an additional 1,599 individuals with physical disabilities.
Child Advocacy Centers – new \$2 million program.
Primary Health Care Practitioner – \$1 million increase (part of the <i>HealthyPA</i> initiative).
Community-Based Health Care Subsidy – \$2 million increase (part of the <i>HealthyPA</i> initiative).

Legislative Affairs Committee

At the September 8 Legislative Affairs Committee meeting (9:30 a.m. – 12:00 p.m. in Harrisburg), new Director of Legislative Affairs Jack Phillips will be seeking input from the committee on the following topics: frequency of meetings, political candidate interview process, and political action committee bylaws and fundraising. RCPA members not already involved in the committee who would like to do so should contact [Jack Phillips](#).

Public Hearings on Heroin and Opioid Addiction

The Center for Rural Pennsylvania is holding hearings on heroin and opioid addiction. Upcoming hearings are listed below. Each public hearing will examine and discuss current policies and practices related to heroin and opioid addiction, including prevention, treatment, and law enforcement efforts. Comments and questions may be directed to [Jack Phillips](#).

August 5, 8:30 a.m.
Desepio Institute for Rural Health/Wellness,
St. Francis University
108 Franciscan Way
Loretto

August 19, 8:30 a.m.
Clarion University of Pennsylvania
Eagles Common
840 Wood St
Clarion

Hearing on Brain Injuries and Diseases of Aging Held by Senate Committee

On June 25, the US Senate Special Committee on Aging held a hearing, [State of Play: Brain Injuries and Diseases of Aging](#), that focused on the link between brain injuries and neurological diseases in later life such as Alzheimer's disease, Amyotrophic Lateral Sclerosis (ALS), and Parkinson's disease. The hearing included many presenters/witnesses to bring awareness on this very important issue, including Dr. Robert Stern, professor of neurology, neurosurgery, and anatomy and neurobiology, and clinical core director, Boston University Alzheimer's Disease Center; Dr. Jacob VanLandingham, director of neurobiological research, Tallahassee Memorial Healthcare Neuroscience Center, and assistant professor, Florida State University College of Medicine; Ben

Utecht, former National Football League tight end, Cincinnati Bengals and Indianapolis Colts; and Chris Nowinski, former professional wrestler, World Wrestling Entertainment, and founding executive director, Sports Legacy Institute. Athletes Utecht and Nowinski shared personal experiences with concussions/ repetitive brain trauma and the long-term impact of their traumatic brain injuries. Dr. VanLandingham shared his personal experience with brain injury from assault, his long recovery, and his research in the field. Dr. Stern focused on individuals with repeated head injuries (regardless of age) being at greater risk for developing chronic traumatic encephalopathy or other long-term conditions.

HHS Announces Health Care Innovation Awards

The Department of Health and Human Services (HHS) announced the remaining prospective recipients for round two of the Health Care Innovation Awards. This brings the total amount of funding to as much as \$360 million for 39 recipients across 27 states and the District of Columbia. These models are designed to deliver better health care and lower costs. The awards will range from an expected \$2 million to \$23.8 million over a three-year period and are authorized as part of the Affordable Care Act. Examples include projects to promote better care for persons living with HIV/AIDS, reduce unnecessary use of emergency departments, improve pediatric dental care, promote prevention and management of cardiovascular disorders, and improve care coordination in rural areas of the country.

■ STATE NEWS BRIEFS

EMS Conference Offers Wide Variety of Sessions in Two Locations

Pennsylvania's annual statewide emergency medical services (EMS) [conference](#) will provide one curriculum in two locations on two different dates. The annual conference, August 13-15 in Lancaster and September 17-19 in Altoona, is designed to bring together EMS practitioners from across the state and nation to network and learn the latest advances and practices in the delivery of pre-hospital emergency medicine. A variety of sessions will be offered, including sessions focused on the pediatric population, rehabilitation, and traumatic brain injury. Preconference sessions will also be available.

Pennsylvania Applies for Health Innovation Model Grant

The Department of Health informed RCPA of its intention to apply for the State Innovation Model Test grant from the Centers for Medicare and Medicaid Innovation (CMMI). Submitting an application for this grant is a continuation of the innovation planning process that RCPA staff participated in last year. That effort culminated in the development of statewide health care innovation plan for Pennsylvania. The funds available through this grant represent an opportunity to accelerate the implementation of delivery system transformation and payment reform in Pennsylvania, with the goal of bringing improved quality and value to the physical and behavioral health care system. The grant application will be consistent with the innovation plan submitted in December 2013. It will include an operational plan and budget for how grant funds will be spent. In addition, the application will be responsive to a new CMMI request for added emphasis on strategies to improve overall population health.

Yellow Dot Program Materials Available

The Pennsylvania Department of Transportation (DOT) has materials available on its web site specific to the [Yellow Dot Program](#). The program was created to assist individuals in the “golden hour” of emergency care following a traffic accident when they may not be able to communicate their needs themselves. A yellow dot is placed in a vehicle’s rear window that alerts first responders to check the glove compartment for vital information to ensure the person receives the medical attention they need. The program is a cooperative effort among DOT, the Departments of Health and Aging, the Pennsylvania State Police, the Pennsylvania Turnpike Commission and First Responders, and local law enforcement.

Governor’s Office Publishes Regulatory Agenda

The [regulatory agenda](#) for the Governor’s Office was published in the July 19 *Pennsylvania Bulletin*. Executive Order 1996-1 requires all agencies under the jurisdiction of the governor to submit for publication an agenda of regulations under development or consideration. This agenda represents the administration’s present intentions regarding future regulations.

Senate Briefing Promotes Study of Clinical Outcomes in Rehab Hospitals

In mid-July, the American Medical Rehabilitation Providers Association (AMRPA) held a Senate briefing to promote its national study, “Assessment of Patient Outcomes of Rehabilitative Care Provided in Inpatient Rehabilitation Facilities and After Discharge,” commissioned by Dobson DaVanzo and Associates, that shows patients treated in inpatient rehabilitation hospitals and units had better long-term clinical outcomes than those treated in nursing homes. The briefing was attended by nearly 100 Congressional staff, reporters, and stakeholders and featured remarks by Susan Connors, Brain Injury Association of America, and Dr. Terrence Sheehan, Amputee Coalition. Other sponsors of the briefing include the Coalition to Preserve Rehabilitation, Center for Medicare Advocacy, National Multiple Sclerosis Foundation, Association of Rehabilitation Nurses, United Spinal Association, and Christopher and Dana Reeve Foundation.

CMS Issues Fire Protection Requirements for Rehabilitation Agencies

On July 3, the Centers for Medicare and Medicaid Services (CMS) issued [Survey and Certification Memorandum](#) (S&C: 14-38-OPT): Rehabilitation Agencies: Fire Alarm Systems, SOM Appendix E Revision-Advance Copy, which clarifies fire safety requirements for rehabilitation agencies. The requirements of the memorandum went into effect on the date of issuance. Some of the requirements include:

- Have a permanently attached automatic fire-extinguishing system in hazardous areas, fire extinguishers, fire regulations that are prominently posted, and a fire alarm system with local alarm capability;
- Specific guidelines for portable fire extinguishers, including proximity and inspection requirements;
- Written copy of a plan for the protection of all facility occupants and evacuation plan and the requirements of the plan readily available to all personnel;
- Fire alarm system integrated into the building, use of air horns in lieu of a fire alarm system is not acceptable; and
- Minimum fire protection requirements must be met in order for Medicare certification or re-certification.

The requirements only apply to the Medicare-certified facility and not to a patient’s home or an administrative office.

Social Workers can Assist in Recovery From TBI

A recent pilot study, "[The Emergency Department Social Work Intervention for Mild Traumatic Brain Injury \(SWIFT-Acute\)](#)," was published in *Brain Injury* and shows that a brief conversation with a social worker has the potential to reduce functional decline of individuals diagnosed with mild traumatic brain injury (TBI). Mild TBI is often difficult to detect and may go undiagnosed in the emergency department. Common symptoms of a concussion or mild traumatic brain injury include headache, nausea, vomiting, dizziness, blurred vision, fatigue, and sleep disturbances. According to the Centers for Disease Control, not everyone gets all of these symptoms and not all symptoms appear at once. Some individuals do not develop some or all symptoms for days or even weeks after the initial injury. If a patient does go to the emergency room to be evaluated, he or she may go home thinking they are fine, but later develop symptoms. This supports why it is important that an individual receive a consultation with a social worker before they are discharged. The social worker can provide patients with information about what may happen to them over the next several days or weeks and suggest potential coping strategies, provide resources for proper follow up care in case symptoms develop, and ease the mind of the individual.

TBI Education and Awareness Mini-grant Opportunity

The Pennsylvania Department of Health (DOH) Bureau of Family Health published a notice in the June 28 [Pennsylvania Bulletin](#) regarding availability of traumatic brain injury (TBI) grant funds to support education and public awareness of the causes and consequences of TBI. Applications will be accepted for funding for schools, community sports programs, and providers of recreational opportunities for youth to support education and awareness of causes and consequences of concussion and mild to severe TBI. Funding up to \$5,000 is available to develop trainings and materials to reach the identified population. Funded activities will expand or develop programs, or both, for the targeted audience about the risks and consequences of TBI. This training and education improves knowledge and awareness of TBI and increases state and local capacity for treatment and intervention. Funding will be used to develop training, materials, and education and awareness activities that target professionals (e.g. practitioners, teachers, athletic trainers, coaches, and school nurses), community sports programs, community members, and/or providers of recreational opportunities that could result in physical injury. Training should teach appropriate intervention strategies in the event an individual sustains an injury that could result in TBI in the population of school-aged youth. To apply for funding, a complete application must be postmarked and mailed to DOH no later than September 15. The application and additional information are provided in the bulletin.

DPW Conducts Call on Balancing Incentives Program

On July 9, the Department of Public Welfare (DPW) conducted a stakeholder conference call on the [Balancing Incentives Program \(BIP\)](#). Pennsylvania recently received approval for its application to the BIP, a federal grant to assist states rebalance long-term services and supports systems and improve access to home and community-based services. For additional information on BIP, a [presentation](#) was shared and reviewed with participants. The conference call was also [recorded](#). DPW and the Department of Aging are developing a detailed work plan required by the federal government, which includes how to implement required tasks for the BIP. The departments requested stakeholder input to assist with development of the work plan and created a brief survey that was available in July and designed to gain perspectives on what stakeholders believe to be the most pressing priorities.

Bill to Reauthorize TBI Program Introduced

In late June, Senator Casey (D-PA) and Senator Hatch (R-UT) introduced [Senate Bill 2539](#) known as the Traumatic Brain Injury (TBI) Reauthorization Act of 2014. The legislation would reauthorize the program for another five years (through FY 2019) at current funding levels. The legislation supports critical activities to improve prevention, educate communities, and support individuals with TBI and their families and caregivers. It also includes steps to improve the coordination of federal activities relating to TBI and to identify further opportunities for improving brain injury management in children.

OVR Innovation and Expansion Projects

The Office of Vocational Rehabilitation (OVR) is developing innovation and expansion projects that target development of strategies and programs currently not available in an OVR district office service area. Projects will target the expansion of employment services into rural and underserved counties, job readiness, and job placement for customers with significant disabilities. OVR anticipates potential contracts will be up to \$150,000 for the initial project year. Eligible bidders are existing public and private entities that have the infrastructure, proven track record, and at least five years of demonstrated experience in providing rehabilitation services to those with the most significant disabilities. Bidders must also have an established relationship with the OVR district office. To register for the invitation to quality (ITQ) begin by [obtaining a vendor ID](#). Request for quotes will be disseminated August 8. Questions on the ITQ process may be directed to [Matt Fidler](#). Questions regarding the innovation and expansion projects may be directed to [Chris Forbrich](#).

Drexel Releases 2014/15 Course Schedule

Drexel University College of Medicine has released its 2014/15 [course schedule](#) for continuing education. Registration changes have been announced, most importantly noting that the organization has moved to trimester programming, allowing three courses per semester per person. Highlights of the catalog include new courses including Motivational Interviewing, the Fidelity of WRAP, Co-Occurring Intellectual/Developmental Disabilities and Mental Health, and many others.

Improving Care and Employee Retention

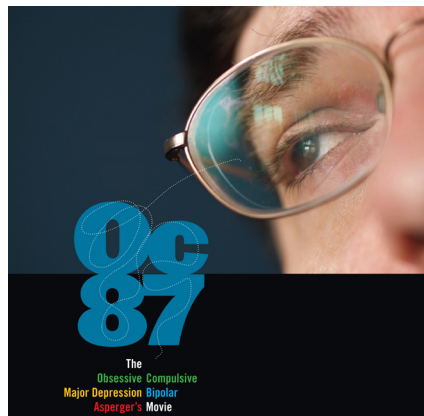
The high cost of turnover in health care continues to plague the market. Now more than ever, organizations need to be proactive to retain knowledgeable and reliable direct care staff. Join Netsmart on August 13 at 2:00 p.m. for a [no-cost webinar](#) to learn more about competency-based trainings that lead to improved staff moral and employee retention.

USA Today Series: The Cost of Not Caring

Liz Szabo's is exploring America's mental health system, which she describes as "man made disaster," in a year-long series published by *USA Today*. She describes the mental health system as "drowning from neglect." This series reveals the inadequacies in psychiatric treatment in the community, high unemployment rates for people with a mental illness, and the use of prisons and shelters as hospital and treatment alternatives. RCPA applauds the efforts of Ms. Szabo and *USA Today* for bringing this crisis to the public's attention. Links to currently posted articles are:

- The Cost of Not Caring: [Nowhere to Go](#)
- [Bleak Picture for Mentally Ill: 80% Are Jobless](#)
- Mental Illness [Cases Swamp Criminal Justice Series](#)

OC87: Film Illuminates Recovery-RCPA Conference



RCPA is pleased to announce a screening of the critically acclaimed documentary during the 2014 conference at Seven Springs. *OC87: The Obsessive Compulsive Major Depression Bipolar Asperger's Movie*, is an illuminating (and at times funny) film about vulnerability, empowerment, family love and tension, and the quest for belonging. It's a roller-coaster tale about the recovery process of Bud Clayman, a Philadelphia filmmaker who has obsessive compulsive disorder and Asperger's, and who has struggled with other psychiatric problems. Through the eyes of this unlikely hero, we experience Bud's internal world as he navigates the daily challenges of intrusive symptoms with pain, resilience, skill, and humor. Scott Johnston, one of the directors, will be on hand for Q&A following the screening. Please join us at the RCPA conference on October 7 to view this captivating documentary.

Edley Writes Legislature to Support Chapter 709 Regulations

President and CEO Richard Edley wrote to committees in the Pennsylvania House and Senate to express strong support for Drug and Alcohol Program Chapter 709 regulations. "First and foremost," he stated, "the Department of Drug and Alcohol Programs (DDAP) is to be commended for its decision to promulgate general regulations for drug and alcohol facilities (Chapter 709)." He highlighted that RCPA staff and members have been reviewing drug and alcohol regulations line-by-line and provided detailed feedback to DDAP regarding these regulations.

The letter also stated "RCPA was pleased to see these regulations published in the [Pennsylvania Bulletin](#) and now continuing their path through the regulatory process. The regulatory changes have been desired for many years and it is encouraging to see real change occurring. RCPA wishes to express special thanks to DDAP Secretary Gary Tennis and his staff for their hard work and commitment to much needed, overdue changes. RCPA requests your support to help move these much needed changes forward."

DDAP Releases Guidelines on Use of Opioids to Treat Noncancer Pain

The Department of Drug and Alcohol Programs (DDAP) held a press conference in conjunction with the Pennsylvania Medical Society to release the final version of the [Pennsylvania Guidelines on the Use of Opioids to Treat Chronic Noncancer Pain](#). The new guidelines outline practices for Pennsylvania physicians to follow when prescribing painkillers. Physicians, various state departments, and the Pennsylvania Medical Society teamed up to form guidelines for doctors prescribing painkillers. Under the guidelines, doctors should perform a physical examination and verify a patient's medication regimen before starting opioid therapies. The guidelines also recommend that doctors personalize opioid selections, adjust dosing and reassess the approach developed for each patient, among other best practices. Questions should be directed to Maureen Cleaver, director, division of prevention and intervention (717-783-8200 or 02 Kline Village, Harrisburg, PA 17104).

■ IDD FOCUS

New Disability Adviser

The White House has announced a new disability adviser, Taryn Mackenzie Williams. She will be joining the Office of Public Engagement as the liaison with the disability community. Her experience includes service as a senior policy adviser for the US Department of Labor Office of Disability Employment Policy and the Senate Committee on Health, Education, Labor and Pensions.

Suroviec Meets With RCPA

RCPA staff has participated in several meetings with Office of Developmental Programs (ODP) Deputy Secretary Steve Suroviec. These have included discussions regarding a variety of system and provider issues, including residential rates and the vacancy factor, importance of the continuation of the dually diagnosed initiative, and the need for ODP and the Adult Protective Services program to collaborate on incident management and certified investigations.

In a joint meeting with the Intellectual Disability and Autism Coalition, discussion focused on the Future's Planning process and continued need for stakeholder input into final recommendations. On the topic of the state's development of the pre-transition plan based on the Centers for Medicare and Medicaid Services Home and Community-Based Services Waiver rule changes, Suroviec offered to have staff developing this plan meet with RCPA members for discussion and input, which occurred July 23.

LEAD Webinar

The LEAD Center webinar, "[New CMS Regulations on HCBS Settings: Implications for Employment Services](#)," is available for viewing. States and stakeholders are working on transition plans based on these new requirements for greater integration. The Pennsylvania Department of Public Welfare is working on potential changes to the state plan based on these recommendations. This document will be released for 30-day public comment by mid-August.

Kaiser Brief on Olmstead

The Henry J. Kaiser Family Foundation has issued a brief, *Olmstead's Role in Community Integration for People with Disabilities under Medicaid: 15 Years after the Supreme Court's Olmstead Decision*, which provides background on this Supreme Court decision and reviews its impact on community integration mandates and Medicaid. Medicaid is an important component because it is the funding stream for home and community-based services. Highlights from the brief indicate recent Olmstead cases emphasize Medicaid's role in:

- Providing community-based services,
- Providing services in the most integrated settings, and
- Providing community-based services to prevent institutionalization for at-risk individuals.

APS Intake Calls

Implementation of the Adult Protective Services (APS) program includes centralizing the intake of all calls about abuse, neglect, or exploitation of adults with disabilities between the ages of 18 – 59. Beginning July 1, APS calls are directed to the local Area Agencies on Aging for initial intake. This is the same number as Older Adults Protective Services (800-490-8505). The Department of Public Welfare is currently in the process of procuring agencies to conduct APS investigations. The following incidents must also be reported to law enforcement:

- Sexual abuse,
- Serious injury,
- Serious bodily injury, and
- Suspicious death.

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

DPW/L&I Bulletin #00-14-05: OVR Referral Process for Employment Services. Provides guidance on referrals to the Office of Vocational Rehabilitation (OVR) for individuals enrolled in the ODP Consolidated, Person/Family Directed Support, or Adult Autism waivers. Referrals to OVR continue to be required prior to authorizing waiver-supported employment services. Referrals are no longer required prior to authorizing waiver prevocational services and transitional work services.

Informational Memo #041-14: Provider Action: Revalidation of Enrollment Required for All Service Locations. This is a new requirement because of the Affordable Care Act. All ODP providers are considered Medical Assistance providers. The revalidation deadline is March 24, 2016.

Announcement #042-14: SC Curriculum 2014 Required Training Service Notes: Part 2. Provides one credit hour and will be available until December 31.

Informational Memo #043-14: Fiscal Year 2014/15 Consolidated Waivers Proposed Modifier to Fee Schedule Rate for Enhanced Communication Services. Enhanced rates based on *Harry M.* settlement agreement to serve those who are deaf and intellectually disabled and enrolled in the Consolidated waiver.

Informational Memo #044-14: Agency with Choice Financial Management Services Organization Listing. This listing is not currently available on the HCSIS Services and Supports Directory. ODP requires each Administrative Entity to have a qualified Agency with Choice organization to provide these administrative services to waiver participants that chose to self-direct services.

Informational Packet #045-14: Money Follows the Person Initiative – Start-Up and Supports Coordination Transition Support. The Centers for Medicare and Medicaid Services has approved the Department of Public Welfare request to receive enhanced federal matching funds to support the movement of people from intermediate care facilities for the intellectually disabled to the community.

Announcement #046-14: Waiver Direct Service Provider Audit Requirements for FY 2013/14 Reporting Period.

ACL Guidance

The Administration for Community Living (ACL) under the US Health and Human Services Department has issued [guidance](#) regarding implementation of the Affordable Care Act Section 2402: *Standards for Person-Centered Planning and Self-direction in Home and Community-Based Services (HCBS) Programs*. The requirements of this section include maximizing independence and self-direction, providing support coordination to assist in a community-supported life, and states achieving a coordinated administrative approach to policies and procedures for program providing HCBS. Agencies affected by this guidance include the Centers for Medicare and Medicaid Services, the Substance Abuse and Mental Health Services Administration, the Administration for Children and Families, and ACL.

Lawsuit Filed Regarding ABA Services

This spring three families, in collaboration with the Disability Rights Network, filed a class action lawsuit seeking to represent all Pennsylvania children with Autism Spectrum Disorder (ASD) who are enrolled in Medicaid (MA) and need Applied Behavioral Analysis (ABA). The families allege that the Department of Public Welfare (DPW) fails to cover ABA services in an amount or scope consistent with medically accepted standards. DPW has not disputed the fact that they do not cover ABA as a distinct service. Currently, DPW requires that children with ASD get behavioral services through a program designed for children with emotional, rather than developmental, disorders. As a result, they limit 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. The families want DPW to cover ABA as a distinct service using standards and criteria generally accepted in the medical community for this service so that their children, and all children with ASD, can receive the services they need.

Monthly Columns Address Timely Topics on Children

The Office of Mental Health and Substance Abuse Services Bureau of Children's Behavioral Health has two prominent child psychiatrists as consultants. Both have wide-ranging expertise and experience in public sector mental health and private practice, but each has his own particular areas of interest. Dr. Gordon Hodas has written and trained widely in trauma-informed care, while Dr. John Biever has worked extensively on attachment issues, especially in young children. As part of their service to the bureau, Drs. Hodas and Biever each write a monthly "[Children's Mental Health Matters](#)" column to help support children, adolescents, and their families to help mental health practitioners be more empowering. Dr. Hodas' columns focus on a range of issues, while Dr. Biever's columns focus on issues related more specifically to early childhood.

OCYF Rate Methodology Task Force

The second phase of the Rate Methodology Task Force is now working on a "methodology to determine reimbursement for actual and projected costs, which are reasonable and allowable, for the purchase of services from providers and for other purchased services." The timeframe for a complete recommendation document to be provided to the General Assembly is December. Having finished recommendations for out of home services, the task force is now in the process of gathering information on the range of community-based family, child, and youth support service types. The task force is also studying approaches to rate methodology in other states and the challenge of reflecting actual service costs in the needs-based cost documents that now reflect contracted costs to the county for in-home services.

Suicide Prevention Training for Schools

On June 26, Governor Corbett signed Act 71 of 2014 into law. This bill codifies school-based suicide prevention. RCPA, as part of the state's Youth Suicide Prevention Initiative, actively advocated for this new law. Beginning with the 2015/16 school year, each school must:

- adopt an age-appropriate youth suicide awareness and prevention policy,
- provide four hours of training in youth suicide awareness and prevention every five years for professional educators in grades 6-12, and
- work to incorporate a youth suicide awareness and prevention curriculum into its existing instructional programs.

The Department of Education (PDE) will develop a model youth suicide awareness and prevention policy, in consultation with a youth suicide prevention organization, and make it available to all schools. PDE will also post on guidelines and materials for training of educators, resources, and age-appropriate educational material on its web site. This bill is the result of the work of many state and local mental health, pediatric, and education organizations, and the leadership of Dr. Erich Batra, co-chair of the Youth Suicide Prevention Initiative and medical director of the state Child Death Review organization. This is an important step toward ensuring that schools have policies and procedures in place and teachers have training to help identify youth who need help.

2013 Child Abuse Report

The Pennsylvania Department of Public Welfare released its [2013 Annual Child Abuse Report](#). The report notes there were more suspected child abuse reports in 2013 than any other year on record. It also shows a decrease in substantiated reports from 2012. Over the past year, the governor and legislature have enacted at least 20 new laws and amendments that will help ensure that Pennsylvania children are better protected in their homes and communities. The new laws expand the definitions of child abuse and perpetrator, and streamline and clarify mandatory child abuse reporting processes. "We believe the increased awareness on the issue and information available on where to go to report suspected abuse has successfully empowered people to speak up," Department of Public Welfare Secretary Beverly Mackereth said. "Protecting children requires a partnership between the child welfare community, its partners and citizens to ensure child abuse and neglect are identified, reported and ultimately prevented." The report showed that in 2013 ChildLine, Pennsylvania's child abuse hotline, registered 26,944 reports of suspected abuse or neglect, an increase of 280 from the previous year. There were 38 substantiated child abuse-related child fatalities in 2013, five more than the previous year.

Youth Suicide Prevention Calendar

This summer the Pennsylvania Youth Suicide Prevention Initiative (PAYSPI) is launching a new feature to the [web site](#). Providers and other community leaders, working with a county PAYSPI task force leader, will have an opportunity to submit suicide prevention activities through a new event calendar form and have them posted on the PAYSPI calendar. In addition to viewing all of the activities on a specific date for the entire state, visitors will be able to view the calendar by region. PAYSPI hopes this new feature will facilitate the sharing of resources and information within and between counties. Questions regarding the calendar should be directed to Rose Milani (215-503-6456 or rose.milani@jefferson.edu).

ADHD and Substance Abuse Risk

Youth who have an Attention Deficit Hyperactivity Disorder (ADHD) are at higher risk for substance abuse. To address this finding, the American Academy of Pediatrics (AAP) released a statement discussing ways to reduce addiction risk. The statement authors recommend that health care providers regularly screen those who have ADHD and take stimulants for possible signs of a substance use problem. Dr. Elizabeth Harstad, AAP Committee on Substance Abuse, reviewed strategies for reducing the risk that those with ADHD will develop substance abuse problems. The committee noted that individuals with ADHD are twice as likely to develop alcoholism. In addition, those with ADHD are three times more likely to become dependent on nicotine, with an increased risk for using marijuana or cocaine. Past research reveals that those with ADHD are about 2.5 times more likely to develop any substance use problem than those without the disability. It is important to note that the committee found that treating ADHD with stimulant medications decreases the risk of developing a substance use disorder by 85 percent. The authors reported that the younger individuals are treated, the less likely they are to develop substance use problems. Behavioral therapy may reduce that risk as well.

September Brings FASD Awareness Day and Month

Birth defects that include behavioral, emotional, learning, addiction, and general health impairments related to prenatal alcohol exposure are diagnosed in approximately one percent of all US newborns. Fetal Alcohol Spectrum Disorder (FASD) affects more children than autism and the number of new cases each year is greater than the cases of muscular dystrophy, spina bifida, and Down syndrome combined. The Department of Drug and Alcohol Programs supports a variety of initiatives to raise awareness about FASD. It encourages Single County Authorities (SCAs) and providers to conduct educational and awareness activities in communities for FASD awareness month and throughout the year. DDAP provides the SCAs with links to free resources to support this initiative.

The department also participates in a project in which baby bottles containing a fact sheet about the dangers of drinking alcohol during pregnancy are disseminated to medical offices serving pregnant women. In 2014 over 5,000 baby bottles will be disseminated to participating partners throughout the state. As in prior years, RCPA anticipates that Governor Corbett will sign a proclamation declaring September FASD Awareness Month in Pennsylvania. In observance of FASD Awareness Month, the department will partner with the Center for Humanistic Change in Allentown for a kick-off event on September 9.

OCDEL Learning Standards for Early Childhood

The Office of Child Development and Early Learning (OCDEL) released learning standards for infant-toddler and pre-kindergarten children and programs. *Pennsylvania's Learning Standards for Early Childhood* were originally developed as a joint project of the Departments of Education (PDE) and Public Welfare. Each set of standards has been formulated with help and guidance from practitioners and program specialists representing early childhood programs, school districts, higher education, family leaders, policy analysts, and researchers. Learning Standards for early childhood are used to:

- Inform professionals about curriculum and assessment,
- Guide the selection of instructional materials and the design of interactions/ goal setting, and
- Inform families of appropriate expectations for children.

In addition to "Key Learning Areas" the standards also focus on social and emotional development in the areas of self-awareness and self-management, establishing and maintaining relationships, and decision making and responsible behavior. The learning standards are available from the [PA Key](#) and [PDE](#) web sites.

Pennsylvania Hosts School Mental Health Conference

The Center for School Mental Health will hold its national conference on advancing school mental health September 18-20 at the [Wyndham Grand Pittsburgh Downtown](#) in Pittsburgh. The conference theme is ***School Mental Health: Enhancing Safe, Supportive and Healthy Schools***. The conference features 12 tracks and a special topic area on funding and sustainability. The conference offers numerous opportunities to advance knowledge and skills related to school mental health practice, research, training, and policy. It emphasizes a shared school-family-community agenda to bring high-quality and evidence-based mental health promotion, prevention, and intervention to students and families. The conference is hosted by the Center for School Mental Health and the IDEA Partnership, funded by the Office of Special Education Programs, and sponsored by the National Association of State Directors of Special Education. Presenters and attendees may [register online](#).

National Focus on Care Coordination and Wraparound

Approximately one in 10 children in the US has a severe emotional disorder. Mental health issues represent the most costly health condition among all children in the nation. These children and youth can benefit from approaches to care that are individualized, coordinate services across systems, are youth and family driven, and incorporate peer support. Intensive care coordination using high-quality wraparound is one approach to care that has demonstrated improved outcomes and reduced costs for children and youth with serious behavioral health needs and their families. The Center for Health Care Strategies recently published [Intensive Care Coordination Using High-Quality Wraparound for Children with Serious Behavioral Health Needs: State and Community Profiles](#). This document outlines key features for established programs with demonstrated cost and quality outcomes along with programs in the early stages of development, including work underway in Pennsylvania.

Safely Home Campaign Report

Safely Home is a nationwide movement to care for all youth and young adults engaged with the juvenile justice system. It promotes service models that keep youth in their home communities and with their families by reducing and preventing unnecessary out-of-home placements. Safely Home is a national project of Youth Advocate Programs. The recently released [Safely Home Report](#) describes how communities and systems can support high-need youth. Some key messages of this initiative are:

- A lack of effective alternatives for high-need youth contributes to youth incarceration,
- Systems can redirect institutional dollars toward less expensive community programs, and
- Community-based programs that provide the right amount of intensity can provide safe and effective alternatives to youth incarceration and residential placement.



Children's Service Center of Wyoming Valley, Inc. (CSC) is a diagnostic and treatment center for children and adolescents with emotional disturbance, severe and persistent mental illness, and pervasive developmental disorders, including autism. We are currently seeking a **Chief Operating Officer (COO)** whose experience, skills, and talents are a match for this important position. Celebrating our 152nd anniversary, CSC is deeply committed to the wellness of young people in our community. Our services are designed to meet the individual needs of children, adolescents, and their families.

This is an exciting and challenging role, leading a team of experienced professionals, providing oversight for day-to-day clinical operations, implementing strategic initiatives, and representing CSC with health care business partners in commercial and non-profit arenas. The ideal candidate is a senior level professional in health care or behavioral health with knowledge of business process improvement methodologies, creating a strong culture and great people management programs, and with keen financial acumen and excellent leadership abilities.

Responsibilities

The **COO** reports directly to the president and directs, administers, and coordinates the clinical activities of the organization in support of policies, goals, and objectives established in coordination with the president, Board of Directors, and executive leadership team. The **COO** supports strategic planning, direction and execution of CSC business operations to aligning operating units within the vision and strategy of the organization. He or she coordinates and integrates all internal operations. He or she pursues business re-engineering and other operational and/or lean initiatives in improving overall structure, operations, and service. The **COO** represents CSC and cultivates customer relationships through the negotiation of strategic alliances with critical industry partners, health care policy makers, providers, payers, government officials, and others.

Skills & Experience: Requirements

- Graduate degree: LSW, PhD, MS/MBA considered.
- Experience in managed care environments.
- Demonstrated financial acumen, successfully managed budgets of excess of \$30 million.
- Knowledgeable of Pennsylvania service systems and trends.
- Demonstrated entrepreneurial success in expanding and growing programs and services to meet changing needs and ensure sustainability.
- Experience with an electronic health record system.
- Knowledge and experience in clinical programs licensing requirements, Joint Commission, and quality assurance activities.
- Understanding/knowledge of productivity modeling, third party reimbursement, and registration/intake/admission criteria.
- Knowledge and experience in Physical Health Care environment a plus.

Preferred skills include superior leadership, communication, and interpersonal skills; a strong understanding of organizational cultural development and change initiatives; the ability to motivate, teach, and empower teams; goal, detail, and customer service oriented; ability to liaison with key state and industry leaders; ability to develop successful business models; and ability to coach the balance between clinical excellence and fiscal imperatives/demands.

If you possess the background, knowledge, desire, and tenacity to make a difference in the wellness of young people in our community, we want to talk with you! CSC offers competitive compensation package as well as an array of benefits including health coverage, life, paid time off, and holidays. Send your résumé in confidence to **Chris Boyle, Vice President of Human Resources** at cboyle@e-csc.org. EOE. Drug free work place.

■ CONFERENCES/TRAININGS

August 21 – 22. Pennsylvania Health Equity Conference, “[Engaging and Empowering You to Enhance Health Equity](#).” Radisson Convention Center. Camp Hill, PA. Questions may be directed to the Pennsylvania Department of Health, Office of Health Equity (717-547-3481 or hectorortiz@pa.gov).

October 15 – 16. Pennsylvania Suicide Prevention Conference, “[Making a Difference Together](#).” Ramada Inn. State College, PA.



October 7 – 10. [RCPA Conference 2014: TOGETHER...ONE](#). Seven Springs Mountain Resort. Champion, PA. Registration open.

■ CALENDAR

AUGUST		
Tuesday, August 5	12:00 – 1:00 p.m.	Explore Constraint-induced Movement Therapy <i>IPRC Webinar</i>
SEPTEMBER		
Monday, September 8	9:30 a.m. – 12:00 p.m.	Legislative Affairs Committee <i>Penn Grant Centre</i>
Wednesday, September 10	10:00 a.m. – 12:30 p.m.	Human Resources Committee <i>RCPA Conference Room</i>
Thursday, September 11	10:00 a.m. – 12:30 p.m.	Medical Rehabilitation Committee <i>Penn Grant Centre</i>
Tuesday, September 16	9:30 a.m. – 12:00 p.m. 1:00 – 4:00 p.m.	Criminal Justice Committee Drug and Alcohol Committee <i>Penn Grant Centre</i>
Wednesday, September 17	9:30 a.m. – 12:00 p.m. 1:00 – 4:00 p.m.	Children’s Committee Mental Health Committee <i>Penn Grant Centre</i>
Thursday, September 18	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 and Developmental Disabilities Committee Vocational Rehabilitation Subcommittee <i>Penn Grant Centre</i>
Wednesday, September 24	10:00 a.m. – 12:30 p.m.	Brain Injury Committee <i>Penn Grant Centre</i>